

Health



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Department of Health

Functions

The medical care system treats patients one at a time, but public health protects the entire community from the everyday health threats to the exceptional emergencies. The Department of Health works tirelessly to prevent disease outbreaks, to make sure the tap water we drink, and the restaurant food we eat are all safe, and to help create conditions in the community that make it easier for people to make healthier individual choices. The Department is ready to respond to any health emergency—be it bioterrorism, SARS, West Nile Virus, Pandemic Flu, or an environmental hazard.

The Dutchess County Department of Health (DCDOH) is a diverse group of experienced individuals and motivated professionals whose Mission is to assess, protect and promote the health of our communities and our environment through the fulfillment of the core functions of public health: assessment, assurance and policy development. Interventions are based on what has been proven to work, promoting best practices known to improve health.

The practice of public health is best described by the following ten essential services aligned with the three core functions of public health (i.e. assessment, policy development, and assurance).

Assessment

1. Monitor health status to identify community health problems
2. Diagnose and investigate health problems and hazards in the community

Policy Development

3. Inform, educate and empower people about health issues
4. Mobilize community partnerships to identify and solve health problems
5. Develop policies and plans that support individual and community health efforts

Assurance

6. Enforce laws and regulations that protect health and ensure safety
7. Link people to needed personal health services and assure the provision of services when otherwise unavailable
8. Assure a competent public and personal health workforce
9. Evaluate the effectiveness, accessibility and quality of personal and population-based health services
10. Conduct research for new insights and innovative solutions to health problems.

The role of local health departments is changing across the nation, requiring augmented capacity and infrastructure. Local health departments must have the capacity to: generate locally important and timely data, analyze and interpret data as quickly and accurately as possible, establish interventions based on timely and geographically insightful data, and use their resources efficiently through community oriented collaborations.

The Department, established in 1958, currently has offices located throughout the county - in Poughkeepsie, Millbrook, and Beacon. It is licensed by the New York State Department of Health as an Article 28 Diagnosis and Treatment Center, and is also a Licensed Home Care Services Agency (LHCSA).

PROGRAMS & ACTIVITIES

The following summarizes the functions of each Division within the Department and the expected activities for the coming year:

Administration Division

The Division is responsible for the day to day management of the fiscal and administrative operations of the department. It provides timely and accurate accounting for revenues and expenditures, billing, contract management, personnel and grant administration. It is also responsible for facility/building maintenance and management.

Children with Special Needs Division (EI and Preschool)

The Division provides oversight of the Early Intervention Program and the Preschool Special Education Programs (located in the Education section of the budget). These programs work with families, medical providers, specialists and/or school districts to assure the earliest identification of eligible children, to ensure that each child receives the necessary individual assistance to maximize growth and development, and to get them ready to enter the school system. Families with infants and toddlers ages 0-3 who have certain special needs established by NYS criteria receive Early Intervention Program services, while the Preschool Special Education Program targets children 3 to 5 years of age.

Medical Examiner's Office (MEO)

The MEO is mandated by law to investigate any sudden, unexpected, violent or suspicious death within the County, and to perform postmortem examinations in order to determine cause and manner of death; forensic expertise is also provided to surviving victims of violence and abuse. The MEO serves law enforcement, public health and safety, the New York Organ Donor Network, State and County agencies, and all County residents.

Public Health Planning and Education Division (HP&E)

The mission of the HP&E Division is to disseminate to the community continuous, accurate, timely and meaningful information designed to reduce health risks and promote better health, and to provide the DCDOH workforce with reliable access to high quality information resources when and where decisions are made.

HP&E is responsible for the planning, development, implementation, and evaluation of the long and short-term goals of the Department. As part of its activities, it engages in ongoing integrated county-wide community assessment processes to examine the local health and human service system. The results of these assessments feed the Department's strategic planning process. The Division also produces major documents, such as the Municipal Health Services Plan and the Annual Performance Report, which document the Department's activities for State Aid reimbursement.

The Division focuses on partnerships with the local medical community, educational institutions and social agencies. The Division conducts educational programs to increase awareness of public health issues, and supports local collaborative efforts such as the Heart Safe Communities and the Comprehensive Cancer Control Consortium. The Division coordinates media and public outreach efforts and develops the department's emergency communication plan, which describes the communication infrastructure, planning

and response protocols during an emergency.

Additionally, the Division is responsible for the administration of the federally funded Ryan White Program which serves the needs of people living with HIV/AIDS and the management of the Emergency Preparedness grant. The EMS Coordinator acts as a liaison between the Departments of Health and Emergency Response, local volunteer rescue squads and hospital emergency rooms. Additionally, the EMS Coordinator ensures that the Department of Health's Emergency Preparedness plan is compatible with the Comprehensive Emergency Management Plan, embracing an "all hazards" approach. The EMS Coordinator is also responsible for the Department's Strategic National Stock Pile (SNS). The Volunteer Medical Reserve Corps with its Medical Reserve Corps Coordinator is supervised by the EMS Coordinator to ensure additional resource is available when needed. MRC volunteers are regularly trained to be ready to assist when needed.

Public Health Nursing and Communicable Disease Control Division

This Division encompasses the clinical and nursing services of the Department offered through the Public Health Nursing and Communicable Disease Control Divisions

Public Health Nursing Unit provides home visiting and case management services to pregnant and parenting families to ensure they are engaged in primary and preventive health services. Public Health Nurses conduct health education and counseling on infant care and positive parenting skills to reduce childhood abuse and neglect; promote injury prevention including safe sleep and prevention of shaken baby syndrome; provide domestic violence screening, identification and referral services; offer preconception counseling and family planning education, as well as post partum depression screening and referral services.

Additional preventive health services include the Childhood Lead Poisoning Prevention Program, Childhood and Adult Immunization Clinics including Perinatal Hepatitis B, International Travel Immunization Clinics, Influenza and Pneumococcal Immunization Clinics, Newborn Metabolic and Hearing Screening Program, and Rabies Post Exposure Program.

The Division is responsible for direct support for the Department's public health preparedness program and the administration of the Children with Special Health Care Needs Grant and Physically Handicapped Children Program which provides education, outreach, referral services and reimbursement to families with special needs children.

Communicable Disease Control Unit offers services for the prevention and control of communicable disease including Tuberculosis, Arthropod Diseases and Sexually Transmitted Diseases (STD). Programs include the HIV/AIDS Prevention and Control and Partner Notification Program, the Tuberculosis Control Program, and related screening and treatment clinics for STDs and Tuberculosis. The Division is on the front-line for prevention and control of communicable diseases and disease outbreak investigations and is integral to the department's public health preparedness program.

The Division also on occasion conducts research trials for vaccines and has participated in several focused-trials of community interest such as Gardasil and Influenza vaccines.

Weights & Measures Division

The Division of Weights & Measures is responsible for ensuring commercial products are marketed fairly and competitively. The Division's responsibilities include: inspection of all scales and measuring devices in commercial establishments to ensure accuracy; testing of petroleum products for quality (octane, ethanol content and Clean Air Act Requirements); inspection of retail price scanner accuracy; weights of all

commodities; and precious metal licensing. In addition, the Division assumes the responsibility for enforcing the Department of Energy Conservation regulations as it pertains to gasoline storage at retail pas stations.

Inspection procedures are carried out in accordance with the NYS Agriculture and Markets law. The National Bureau of Standards Codes and Specifications forms the basis for the major portion of the NYS laws.

Environmental Health Services Division

Environmental Health activities include regulatory services carried out in accordance with the provisions of the Sanitary Code and the State Public Health Law. The Division permits and inspects food service facilities, tobacco retailers, children’s camps, hotels, motels, campsites, parks, temporary residences, mobile home parks, public functions, swimming pools, bathing beaches, migrant labor camps, daycares and nursery schools. The Engineering section is responsible for the review and approval of plans for sewage collection, treatment and disposal systems, realty subdivisions, bathing beaches, residential and commercial sewage disposal systems, individual and public water supplies. Inspection activities include sewage collection, treatment and disposal systems, public water supplies and bottled and bulk water. Educational activities include the teaching of courses for the certification of water treatment plant operators.

Environmental health staff also arrange for pre-construction conferences and inspection of individual water supplies and sewage disposal systems for conformance to approved plans. The Division investigates complaints regarding food-borne illnesses, rental dwellings, sewage failures, vermin infestations, and offensive materials; and reports of animal bites and human contact with suspect rabid animals.

The Radiation Services and Environmental Health Assessment Program conducts investigations and provides technical assistance regarding radon, radiation and chemical emergency response plans, occupational health, hazardous and medical waste disposal sites, indoor air quality, environmental lead assessments and potential exposure to chemicals and hazardous substances.

Division of Veterans Services

The Functions and objectives of this Division are to promote the interests and welfare of our veterans, their dependents and survivors. The Division aims to enhance their quality of life through counseling, claims assistance, education, and advocacy in obtaining federal, state and local benefits which may be available to them. Services provided by the Division include the following:

Assistance in filing claims and referrals for:

- Exposure to Agent Orange
- Persian Gulf hazards
- Service-Connected Disability
- Non service Connected Pension
- Educational Benefits
- Vocational Rehabilitation
- Medical ad Dental Benefits
- Home Loan Guaranty
- Insurance
- Veterans Status for Merchant Marines

Burial benefits:

- Headstone or Marker
- Burial/Plot Allowance
- Presidential Memorial Certificates

Survivor's benefits:

- Dependency and Indemnity Compensation (DIC)
- Death Pension
- VA Life Insurance Claims
- Completion of Annual Eligibility Verification Reports

Assistance in applying for the following New York State benefits:

- Blind Annuity
- Real Property Tax Exemption

Assistance is also provided in:

- Filing of Discharge with County Clerk
- Applying for the F.A.V.O.R. Discount Card
- Replacing Military Records (Discharge Papers)
- Application for Medals (NYS & Federal)
- Assistance in upgrading or correction of military discharges
- Referrals to other benefit agencies

In depth counseling and follow-up service on all claims for benefits is available to all veterans and their dependents/survivors.

The Veterans Service Agency staff is available to meet with veterans at the Eastern Dutchess and Beacon Government Center by appointment and Pine Plains VA Clinic making services more accessible to veterans throughout the County.

Department of Health



Mission Statement

To assess, protect and promote the health of our communities and our environment through the fulfillment of the core functions of public health: assessment, assurance and policy development. The goal of public health is to promote health and prevent illness, disability, and premature death, using the best available science and resources, and aiming to reach the national public health objectives.

Medical Examiner

Goal:

The medical examiner is mandated, in the interests of justice, public health and public safety, to investigate sudden, suspicious and violent deaths within his/her jurisdiction and to evaluate, and document injuries in live victims of abuse. Objective: To respond to and investigate all reportable deaths, in order to determine which cases fall under the jurisdiction of the medical examiner. Act as an expert witness in criminal and civil cases involving deaths due to violence and live victims of violence and abuse; and investigate unresolved old cases.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
Total Caseload	770	840	840	-	0.0%
Death Scene Visits	307	321	340	19	5.9%
Autopsies	176	225	225	-	0.0%
External Examinations / Certifications	133	130	175	45	34.6%
Court Testimony	15	20	20	-	0.0%
Consultations/ Live Victims and Old Cases	8	25	20	(5)	-20.0%

Public Health Nursing: Health Guidance and Immunization Clinics

Goal:

Link people to needed personal health services and assure the provision of services when otherwise unavailable. Objectives: Promote the health of mothers, infants and children through home visits to ensure engagement in primary care and preventive health services and to provide health guidance as needed. Provide immunization to the public, in particular to high risk individuals.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Health guidance visits	1,298	1,142	1,256	114	10.0%
# of individuals who received influenza vaccines at DCDOH clinics	399	400	375	(25)	-6.3%
% of children seen at DCDOH clinics who are fully immunized at age 2	77%	80%	83%	3%	3.7%

Communicable Disease Control Clinics

Goal:

Prevent and control infectious disease in Dutchess County through timely investigation of reportable communicable disease and prompt response. Objectives: Provision of free and confidential diagnosis and treatment at the TB, HIV and STD clinics.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
Clinic Visits (TB, HIV, STD)	3,892	3,196	3,200	4	0.1%

Department of Health

Tuberculosis Control Program

Goal: Prevent, control and reduce incidents and health effects of Tuberculosis (TB). Objectives: Provide outreach, education, screening testing and treatment (clinics) for persons infected and affected by TB. Ensure early identification of TB cases and prompt investigation of potential contacts in the community setting.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
TB - Total number of cases	10	4	6	2	50.0%
TB - Total number of individuals screened	623	600	625	25	4.2%

Environmental Health: Community Sanitation Services

Goal: To protect the health and well-being of Dutchess County residents and others receiving services through the administration and enforcement of environmental health regulations and services. Objectives: Inspect permitted facilities and investigate complaints.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
Inspections of camps and recreational facilities	896	896	896	-	0.0%
Inspections of temporary residences (Hotels / Motels)	220	220	220	-	0.0%

Rabies Program

Goal: Prevent, control and reduce the health effects of rabies: humans, animals, etc. Objectives: To decrease the number of humans receiving post-exposure treatment in Dutchess County by increasing the number of pets (dogs, cats, domestic ferrets) vaccinated at rabies clinics sponsored by DCDOH and by DCDOH community partners.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
Total # of contacts that received post exposure treatment	47	40	40	-	0.0%
# Pets vaccinated- DCDOH 3 Clinics	660	690	690	-	0.0%

Arthropod-borne Disease Program

Goal: Prevent and reduce the risk of human disease that is attributed to arthropod vectors. Objectives: To maintain accurate, ongoing surveillance activities and epidemiological status of reportable conditions caused by the arthropod vectors (primarily ticks and mosquitoes). Develop and implement prevention education for residents. Update healthcare providers on emergent arthropod-borne disease issues, advising on approved treatments and understanding current laboratory tools used for diagnosis.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
Total number of lab reports (ECLRS) to include all arthropod diseases	6,213	5,986	6,000	14	0.2%
Total number of confirmed and probable cases based on NYSDOH data	334	330	330	-	0.0%

Department of Health

Weights & Measures Division

Goal: Inspections of all retail gasoline pumps and scales used in commercial transactions to ensure that the correct amounts are received by the consumer. Gasoline samples are tested for chemical content to ensure that it is within specifications.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
Weights & Measuring Devices Inspected	4,194	4,406	4,406	-	0.0%
Gasoline Samples Tested	305	321	324	3	0.9%

Goal: Protect consumers through the enforcement of local and state laws designed to maintain equity in retail transactions.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
Inspection of item pricing	33	33	33	-	0.0%
Inspection of scanner accuracy	20	60	60	-	0.0%

Division of Veteran Services

Goal: Assist veterans and families to receive all entitled benefits.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
Total Services Rendered	17,929	19,478	19,478	-	0.0%
Education/ Vocational Rehab	557	641	641	-	0.0%
Pension	1,435	1,448	1,448	-	0.0%
Burial / Insurance	1,072	1,496	1,496	-	0.0%
Compensation	1,970	2,132	2,132	-	0.0%
Discharge Papers/ Medals/ Military Records	1,294	1,878	1,878	-	0.0%
Blind Annuity	125	224	224	-	0.0%
Loan	361	422	422	-	0.0%
Medical	709	966	966	-	0.0%

Goal: Link veterans and families with available community services (referrals).

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
Department of Labor	213	250	250	-	0.0%
Tax Exemption Information	381	548	548	-	0.0%

2013 Accomplishments:

The Department maintained the basic programs required to assure the fulfillment of its core mission. Highlights for the year include welcoming the Veterans Services as a new Division within the Department, relocating several of the offices, and re-aligning the workload to absorb the reduction in staffing following the retirements due to the Workforce Adjustment Incentive program.

Welcoming Veterans Services

The Division of Veterans Services was brought in to the Department of Health as of January 1, 2013. DOH began integrating a number of the routine administrative functions thereby allowing the Veteran Services Division's staff to allocate more of their time to serving the veterans and their families.

The Department has increased the efficiency of the educational and outreach efforts through more coordinated strategies, ensuring that information regarding the benefits available to veterans and their families is disseminated throughout the various programs of the Department of Health. Additionally, the Department has been able to provide direct outreach to the Veterans, organizing workshops on health related topics such as diabetes and immunization.

Relocating

The relocation of DOH operations occupied significant time during the spring of 2013. The Department of Health's main offices located at 387 Main Street, Poughkeepsie, and the Early Intervention and Preschool Special Education Programs that rented space at 510 Haight Avenue in Poughkeepsie, were brought together in one location at 85 Civic Center Plaza in Poughkeepsie. The new office space incorporates the Administration, Public Health Nursing, and Environmental services divisions as well as the Early Intervention and Preschool Special Education programs, along with the Veterans Services division which was already located at 85 Civic Center Plaza. This consolidation facilitates the workflow between the various divisions and provides greater operational efficiency. The move allowed the Department to reduce its overall square footage needs, projecting a savings of more than \$500,000 over the next five years.

The Medical Examiner's Office moved to its new facility at 168 Washington Street, Poughkeepsie, on July 22, 2013. The new facility includes office space, public areas, secure storage for records, evidence and supplies, and a state of the art morgue with a walk-in refrigerated body storage compartment. Designated space in the parking area will hold the County-owned refrigerated morgue trailer presently located at the 911 Center. The newly built facility and increased body storage capacity will enable Dutchess County Medical Examiner's Office to function more efficiently and to handle most County-based multiple fatality events.

The Department's Clinical Services, including immunizations and screening activities, is scheduled to relocate to newly renovated clinical space at the Family Partnership center at 29 North Hamilton Street in Poughkeepsie later in the year. As a new member of the community of service providers within the Family Partnership Center, the Department will have the opportunity to strengthen its current relationships and to develop new partnerships. The new clinic space will enable access to health care services and community partners on site so that patients can be referred to needed services directly and easily.

Restructuring

In addition to the consolidation with the Veterans Services division and the relocations mentioned above, the Department faced the challenge of maintaining its services with a reduced staff following the County's Workforce Adjustment Incentive Program. A total of eleven positions were eliminated as of January 2013. Nearly every division and every program of the Department was affected; yet DOH has continued to maintain all of their core services as well as the ability to be responsive to our community. The Department has re-assigned the workload among existing staff and changed the way services are provided to allow for a more efficient use of our resources. These modifications include not only an organizational re-structuring, but also a change in service delivery whenever possible, such as moving to a clinic appointment based system as opposed to a walk in.

In August, The Center for Governmental Research, Inc. (CGR) began a comprehensive study of potential integration between the Department of Health (DOH) and the Department of Mental Hygiene (DMH). The study will provide immediate, short term and long term recommendations to strengthen delivery of services, maximize resources and increase efficiencies within a more integrated structure.

Services:

Emergency Preparedness

Efforts continued in 2013.

The Department of Health worked in collaboration with The Emergency Response Department to strengthen our ability to respond to natural and/or manmade disasters. DOH continued to recruit and train Medical Reserve Corps volunteers, and reviewed and updated several of our emergency preparedness plans. Most noticeable was the completion of a table top exercise developed to test Dutchess County's ability to activate and support an alternate care site in the event the local healthcare resources are overwhelmed. The Dutchess County Alternate Care Site (ACS) plan involves integration and collaboration across county agencies and non-governmental partners. The Exercise brought together over 41 participants from 15 local, county and state agencies. DOH also completed the formalization of an MOU with an appropriate site essential to the success of the ACS plan.

Clinical Services

The sale of the Certified Home Health Care Agency (CHHA) was completed in June 2013. The Department fully transitioned under a newly approved Licensed Home Care Service Agency (LHCSA) for the provision of home health services focused on priorities such as Maternal-Child Health. The LHCSA is required for public health nurses to provide services to meet the Department's mandates.

In 2013, forty seven (47) D.C. Sheriff Deputies and D.C. Jail Corrections Officers were immunized with hepatitis B vaccine as a result of a collaborative initiative between the departments to increase hepatitis B immunization rates among those employees who are at high risk of coming in contact with blood borne pathogens such as hepatitis B due to the nature of their work. The DCDOH Immunization Program staff conducted planning sessions with DC Jail and DC Sheriff training officers to identify deputies and corrections officers who were not immunized and to plan and coordinate clinics to be operated by DCDOH Nursing staff at the DC jail. The clinics were conducted at the jail at times concurrent with shift changes to make access to the vaccine for the deputies and officers efficient and convenient.

This initiative will be continuing into 2014 as DOH strives to further increase the overall hepatitis B immunization rates for deputies and corrections officers.

Environmental Services

The Lead Primary Prevention Program entails educating the public about lead hazards, training contractors in lead safe work practices, and in partnership with the City of Poughkeepsie, conducting inspections of residential properties within the 12601 zip code target area. To date, over 700 inspections were conducted, identifying lead based hazards in more than 370 homes. DOH has worked with property owners to remove lead hazards from housing units where children are at risk and also have helped more than 400 people receive Lead Safe Renovation Training.

DOH continued to successfully use GIS technology to support internal program evaluation and analysis. For example, the Department generated a County map which showed the locations of chloride MCL increasing over time. This map showed how chloride levels in Dutchess rise in the winter along major roadways; a clear indication of the impact of road salt. DOH continued to provide technical assistance to the three jurisdictions that have passed a local private well testing law, and have also updated the webpage to bring all of the

County's water information into one location, making it easier for the public to look for information about testing of water supplies.

Weights & Measures

The Weight & Measures division continued to assure measurement accuracy in commerce in accordance with Article 16 of the NYS Agriculture and Markets Law. With only two inspectors, the division conducted inspections to ensure equity in commercial transactions involving weight, measure, or count.

Additionally, the Division was charged with the responsibility of enforcing the new local law regarding gasoline price signage (New York Local Law #1 of 2013, amending Local #10 of 1991 Unfair and Deceptive Trade Practice Section 2(B) 16 Road Signage). The Division sent letters to all gasoline stations, informing them of the new law which requires displaying gasoline prices in a manner which makes plainly visible to the consumer of the difference, if any, between the price per gallon for payment by cash, debit or credit.

Finally, it should be noted that this year, the division also assisted the Dutchess County Sheriff's Department with an investigation of local precious metal license owners suspected of fraudulent transactions.

Community Health Assessment & Health Improvement Plan

In 2013, DOH released the results of a countywide survey to identify priority community health and quality of life issues from the County resident's perspective. The survey was initiated in the fall of 2012 with generous financial support provided by the Foundation for Community Health, Health Quest, and St. Francis Hospital. These partner agencies shared resources to avoid duplication of effort for the completion of the Department's Community Health Assessment and the hospitals' Community Services Plan.

Using the results from the survey, along with epidemiological data, in the fall of 2013, the Department will conduct meetings and forums with health care partners and community stakeholders to develop a community health improvement plan (CHIP). The Department has begun an internal assessment of what data will be needed and which resources are currently in place, and DOH is reaching out to our community partners to gauge their understanding of and willingness to participate in the CHIP process. To reduce duplication of effort, the DOH is participating in the assessment and planning process of other organizations such as Imagine Dutchess, an asset-based community development project committed to transforming the current health care delivery model. Imagine Dutchess is focusing on the complex relationships between multiservice coordination across care continuums, especially mental health and substance abuse treatment. Access to and coordination with these large systems will be key to assessing health status as well as developing a holistic, comprehensive improvement plan

2014 Initiatives:

Progress will continue with the DOH and DMH integration study as CGR continues gathering information and conducting interviews with the county departments, county officials and community stakeholders. The study is on schedule to be completed in early 2014.

Some initiatives for 2014 include on-going monitoring of our Public Water Supplies, outreach and education efforts regarding prescription drug use, and reaching out to Veterans. DOH plans on engaging the medical community to help raise awareness about prescription drug abuse and misuse, and to help identify Vietnam Veterans exposed to Agent Orange and refer them to our Veteran Services, as many Vietnam Veterans are unaware of the benefits available to them.

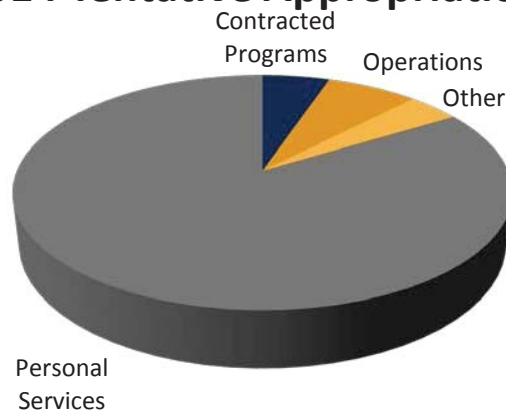
DOH will sharpen their preparedness to respond to emerging issues while making strides toward preventing and reducing the burden of diseases, informing and educating our residents about health issues, advancing community partnerships, and protecting the health and lives of our residents. The Department will be exploring innovative ways of delivering services and developing stronger partnerships with other service providers, so as to expand access to clinical services and bridge the gap between the public health clinical services and traditional medical care.

Department of Health Fiscal Summary

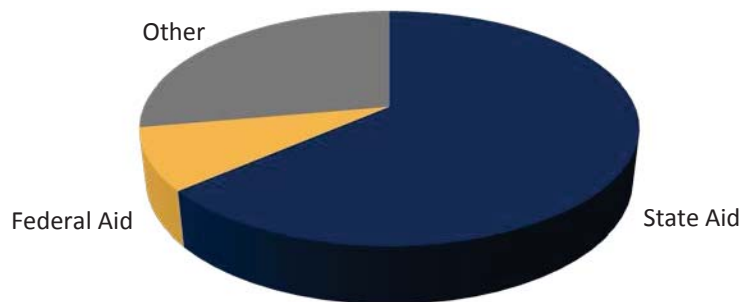
Budget Summary

	2013 Modified	2014 Tentative	% Change
Appropriations	\$ 13,073,802	\$ 12,093,633	-7%
Revenues	\$ 4,850,609	\$ 4,443,896	-8%
County Cost	\$ 8,223,193	\$ 7,649,737	-7%

2014 Tentative Appropriations



2014 Estimated Revenue



Health Department

Budget Summary

Classification	2012 Actual	2013 Adopted	2013 Modified	2014 Tentative	\$ Change	% Change
Salaries and Wages	7,503,863	7,233,180	7,285,483	6,782,505	(502,978)	-6.90%
Employee Benefits	3,521,060	3,514,199	3,381,742	3,340,946	(40,796)	-1.21%
Personal Services	11,024,923	10,747,379	10,667,225	10,123,451	(543,774)	-5.10%
Employee Travel, Train & Educ	88,558	97,863	103,181	89,796	(13,385)	-12.97%
Equipment (Non-Depreciable)	2,464	0	14,558	0	(14,558)	-100.00%
Equipment (Depreciable)	0	0	4,575	0	(4,575)	-100.00%
Equipment	2,464	0	19,133	0	(19,133)	-100.00%
Communication	16,069	22,863	24,025	25,658	1,633	6.80%
Supplies	64,250	89,759	94,670	94,456	(214)	-0.23%
Utilities	64,535	48,384	46,972	22,610	(24,362)	-51.86%
Interdepartmental Services	279,499	305,122	306,953	238,254	(68,699)	-22.38%
Interdepartmental Prog & Srv	279,499	305,122	306,953	238,254	(68,699)	-22.38%
Contracted Services	936,682	975,458	921,240	629,612	(291,628)	-31.66%
Mandated Programs	16,331	25,000	22,303	16,000	(6,303)	-28.26%
Operations	865,084	836,603	868,100	853,796	(14,304)	-1.65%
Total	13,358,394	13,148,431	13,073,802	12,093,633	(980,169)	-7.50%
OTPS	2,333,471	2,401,052	2,406,577	1,970,182	(436,395)	-18.13%
Departmental Income	272,533	332,150	332,150	444,181	112,031	33.73%
Intergovernmental Charges	12,000	7,500	7,500	12,500	5,000	66.67%
Use of Money & Property	574	0	0	0	-	
Licenses and Permits	587,199	621,800	621,800	622,308	508	0.08%
Fines and Forfeitures	166,485	48,000	48,000	156,401	108,401	225.84%
Sale of Prop and Comp for Loss	92	0	0	0	-	
Misc. Local Sources	71,554	0	0	0	-	
State Aid	3,401,940	3,186,543	3,186,543	2,827,163	(359,380)	-11.28%
Federal Aid	786,454	654,616	654,616	381,343	(273,273)	-41.75%
Total	5,298,831	4,850,609	4,850,609	4,443,896	(406,713)	-8.38%
Net to County Cost	8,059,563	8,297,822	8,223,193	7,649,737	(573,456)	-6.97%

Department of Health

New York State Department of Health

Commissioner of Health

Dutchess County Board of Health

Assistant Commissioner for Administration

Division of Weights & Measures

- Gasoline Quality Program
- Inspection of gas pumps and scales
- Precious Metal License

Health Planning & Education Division

Health Planning

- Epidemiology
- Needs Assessment
- Health Status Monitoring
- Program Evaluation

Emergency Preparedness and Medical Reserve Corps

Health Education

- Diabetes
- Obesity/Nutrition
- Hand Washing
- Injury Prevention
- Access to Care

Media Relations

Program Initiatives

- Heart Safe
- Cancer

Ryan White Care Act

Administrative Division

Administrative Unit:

- Personnel & Payroll
- Administrative Hearings
- Foil
- Facility Management
- Contract Administration

Fiscal Unit

- Budgeting
- Purchasing
- Cash Receipts/Payments
- Billing
- Fiscal Reporting

Public Health Nursing & Communicable Disease Control Division

Public Health Nursing Unit:

Preventative Services

- Infant child health assessment
- Home visiting/Health guidance
- Newborn Screening
- Lead
- Physically handicapped children
- CPR / AED for County Offices
- Childhood & Adult immunization
- Perinatal HEP B
- Rabies post exposure treatment

Emergency Preparedness/POD

Communicable Disease Unit:

- STD/HIV & TB clinics
- TB Control Preventive Services
- HIV/AIDS testing & counseling
- Partnership Notification Assistance Program
- Lyme & Arthropod-borne
- Clinical Lab
- Outbreak Control
- Infectious Diseases
- Clinical trials

Division of Environmental Health Services

Public Health Engineering

- Plan Reviews
- Public Water Supply

Health Protection

- Occupational
- Radiological
- Toxicological
- Lead

Community Sanitation

- Restaurants
- Hotels / Motels
- Children's Camps
- Campgrounds Resorts
- Child Day Care
- Pools / Beaches
- Mobile Home Parks
- Housing / Nuisance
- Complaints
- Fair Grounds / Public Functions
- On-site Sewage Disposal
- Rabies Control
- Individual Water Supply
- Tobacco Education & Enforcement

Medical Examiner Office

- post Mortem Examination
- Death Investigation
- Organ Donation
- Clinical Forensic Services

Division of Veteran Services

- Assistance in filing claims
- Assistance in applying for benefits
- Burial benefits
- Survivor benefits

Children with Special Needs Division

- Early Intervention Program
- Preschool Special Education Program

Table of Organization

<u>Position Title</u>	<u>Pay Grade</u>	<u># of Positions</u>
<i>Medical Examiners:</i>		
Chief Medical Examiner Forensic Path	F	1
Deputy Medical Examiner	F	1
Chief Medical Investigator (Forensic)	17	1
Supervising Public Health Nurse	17	1
Principal Program Assistant	12	1
Mortuary Technician	11	<u>1</u>
Total:		6
<i>Health Dept Administration:</i>		
Health Commissioner	MJ	1
Assistant Commissioner	MH	1
Director of Budget & Finance	ME	1
Confidential Administrative Assistant	CI	1
Administrative Assistant	12	1
Principal Program Assistant	12	3
Senior Program Assistant	10	1
Accounting Clerk	9	3
Receptionist	6	<u>1</u>
Total:		13
<i>Health Department Information Planning & Education:</i>		
Assistant Coordinator Emergency Medical Services	17	1
Epidemiologist	17	1
Public Health Nutrition Coordinator- EA	17	1
Biostatistician	16	1
Senior Public Health Education Coordinator	16	1
Public Health Education Coordinator	15	1
Public Health Education Coordinator - Hourly	15	0.75
Medical Reserve Corps Coordinator	14	1
GIS Technician	12	1
Program Assistant	8	<u>1</u>
Total:		9.75
<i>Weights & Measures</i>		
Director of Weights & Measures B	15	1
Consumer Services Inspectioner I	12	1
Consumer Services Inspectioner I - Trainee	11	1
Secretary	10	<u>1</u>
Total:		4
<i>Veterans Services</i>		
Director of Veterans Affairs	MD	1
Veterans Counselor	12	2
Secretary	10	<u>1</u>
Total:		4

Table of Organization

<u>Position Title</u>	<u>Pay Grade</u>	<u># of Positions</u>
<i>Health Department Environmental Health:</i>		
Director of Environmental Health Services	MG	1
Supervising Public Health Engineer	20	1
Associate Public Health Sanitarian	19	1
Senior Public Health Engineer	19	5
Senior Public Health Sanitarian	17	6
Public Health Engineer	17	2
Public Health Sanitarian	14	12
Public Health Engineer Technician	13	6
Administrative Assistant	12	1
Program Assistant	8	4
Senior Office Assistant	8	2
Office Assistant	6	<u>2</u>
Total:		43
<i>Health Department Public Health Nursing:</i>		
Director of Public Health Nursing	MG	1
Supervising Public Health Nurse	17	3
Public Health Nurse	15	4
Community Health Nurse	14	1
Principal Program Assistant	12	1
Program Assistant	8	1
Senior Office Assistant	8	1
Case Manager Aide	7	<u>1</u>
Total:		13
<i>Health Department Communicable Disease:</i>		
Nurse Practitioner	21	1
Director Communicable Disease Control	19	1
Senior Public Health Advisor	16	1
Public Health Advisor	15	2
Public Health Nurse	15	1
Community Health Nurse	14	3
Program Assistant	8	3
Senior Office Assistant	8	1
Case Manager Aide	7	<u>2</u>
Total:		15
Department Total:		107.75

Department of Mental Hygiene

Functions

The Department of Mental Hygiene (DMH), in its statutory role as the Local Governmental Unit, is responsible for the planning, oversight, development, and provision of comprehensive community-based prevention, treatment, and rehabilitation services and programs for people who are emotionally disturbed, mentally ill, developmentally disabled and/or chemically dependent. These services are provided directly by DMH, the state, Saint Francis Hospital and by local not-for-profit agencies under contract with DMH.

PROGRAM/ACTIVITY DESCRIPTIONS

Administration

The Cost Center, Central Administration, in addition to the Commissioner's Office, includes the Division of Administrative Operations, the Office of Quality Improvement and the Office of Psychiatric Coordination. Its functions are to organize, finance and facilitate the delivery of services, to insure continuous quality improvement, to coordinate psychiatric services, and to provide the organizational structure which allows the Department to operate as an integrated system.

Division of Clinical Services

As part of the restructuring in 2013, the three divisions---Mental Health, Chemical Dependency and Developmental Disabilities---had been collapsed into a single Division of Clinical Services. The clinical programs directly operated by DMH are as follows:

- The Diversion Program, which includes HELPLINE, Mobile Crisis Intervention Team and Partial Hospital Program
- Jail-Based Mental Hygiene Program
- ITAP
- Trauma Team

HELPLINE provides telephone counseling, crisis intervention, information and referral and operates 24 hours a day.

The Mobile Crisis Intervention Team is dispatched by HELPLINE, is available seven days a week, interfaces with police and other county agencies and intervenes with children and adults countywide.

The Partial Hospitalization Program provides services for patients 18 years of age and over who require daily structured treatment; the program functions as an alternative to full-time psychiatric hospitalization for those who have supportive living arrangements.

In cooperation with the Dutchess County Jail and Correctional Medical Care, Inc., the Jail-Based Mental Hygiene Program identifies and counsels inmates in need of mental health and/or chemical dependency treatment within the Jail and/or upon release therefrom.

The Intensive Treatment Alternatives Program (ITAP) provides day rehabilitation for chemically dependent persons who require more intensive care than can be provided in a clinic, serves as an alternative-to-incarceration and provides chemical dependency evaluation and case management support to chemically dependent Public Assistance recipients, probationers, and others served by the criminal justice system.

The Trauma Team consists of seasoned clinical administrators who have the flexibility and experience to respond to an unexpected death (e.g. suicide), serious accident, hostage situation, or any other event personal or public that is likely to result in emotional upset or be experienced as traumatic by the victim, family members or witnesses.

Contracted Services

In 2014, contracted services under the Division's auspices and oversight are provided by Abilities First, Inc.; Astor Services for Children & Families; ARC; Dutchess County Council on Addiction Prevention & Education, Inc.; Gateway Community Industries, Inc.; Hudson River Housing; Hudson Valley Mental Health, Inc.; Lexington Center for Recovery, Inc.; Mental Health America of Dutchess County, Inc.; Mid-Hudson Addiction Recovery Centers; Occupations, Inc.; PEOPLE, Inc.; Rehabilitation Support Services, Inc.; Saint Francis Hospital; and Taconic Resources for Independence, Inc.

Department of Mental Hygiene



Mission Statement

The Department of Mental Hygiene is the unit of county government that plans for, develops, oversees, and provides, in conjunction with allied agencies, a comprehensive and integrated array of services and programs to meet the mental hygiene needs of the Dutchess County community. In carrying out this mission, the Department strives to ensure that the resulting public mental hygiene system is responsive, accessible, affordable, cost-effective, patient-centered, recovery-oriented and dedicated to continuous quality improvement.

DIVISION OF CLINICAL SERVICES

MENTAL HEALTH SERVICES

HELPLINE

Goal: To provide telephone counseling, crisis intervention, information and referral services, 24 hours a day, 7 days a week.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Identified (unduplicated)	6,894	6,890	6,890	-	0.0%
Volume of Service	24,945	24,800	24,800	-	0.0%

Mobile Crisis Intervention Team¹

Goal: To provide short-term interventions stabilization for individuals in acute psychological distress in an effort to avoid emergency department visits and/or psychiatric hospitalization

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	482	950	950	-	0.0%
Volume of Service	3,820	8,760	8,760	-	0.0%

Partial Hospitalization

Goal: A five day a week intensive treatment program to stabilize individuals in an effort to prevent psychiatric hospitalizations or to gradually phase individuals back into the community after a psychiatric hospitalization.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	380	500	500	-	0.0%
Volume of Service	3,779	4,750	4,750	-	0.0%

Mansion Street Clinic²

Goal: To provide treatment to seriously and persistently mentally ill persons in the mental health clinic setting with the aim of supporting their continued recovery in the community.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	385	-	-	-	-
Volume of Service	4,632	-	-	-	-

Hedgewood Clinic²

Goal: To provide residents of the Hedgewood Home for Adults with clinic treatment services to enhance their mental health, quality of life and independence.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	181	-	-	-	-
Volume of Service	3,453	-	-	-	-

Department of Mental Hygiene

Continuing Day Treatment³

Goal: To provide five day/week day treatment program to assist seriously and persistently mentally ill individuals to live as independently as possible and to assist these patients in their overall recovery process.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	360	-	-	-	
Volume of Service	9,542	-	-	-	

HVMH Outpatient Clinic Services

Goal: To provide adults with clinic treatment to enhance their mental health, quality of life and independence.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	3,424	3,950	3,950	-	0.0%
Volume of Service	39,315	45,430	45,430	-	0.0%

Occupations, Inc. Personalized Recovery Oriented Services (PROS)⁴

Goal: To provide adults with PROS treatment services to enhance their mental health, quality of life and independence.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	465	525	525	-	0.0%
Volume of Service	73,524	95,000	95,000	-	0.0%

Case Management (ICM, SCM, BCM and Generic CM Services) & MHA Beacon PROS⁵

Goal: To provide linking and coordinating services that assist mentally ill individuals to live as independently as possible, through accessing treatment services, housing supports, medical supports and vocational support.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	2,134	3,100	3,100	-	0.0%
Volume of Service	63,265	59,320	59,320	-	0.0%

Children's Services

Goal: To provide children and their families with clinic treatment, day treatment, home-based crisis intervention, case management and partial hospitalization services to enhance their mental health, functionality at home and school, and quality of life.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	2,743	2,440	2,440	-	0.0%
Volume of Service	54,654	57,600	57,600	-	0.0%

Mental Health Services Total

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	17,448	18,355	18,355	-	0.0%
Volume of Service	280,929	295,660	295,660	-	0.0%

CHEMICAL DEPENDENCY SERVICES

Outpatient Clinic Services

Goal: To provide adults/adolescents and their families with treatment to promote recovery from chemical dependence/addiction and improve their quality of life.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	56	55	55	-	0.0%
Volume of Service	928	490	490	-	0.0%

Department of Mental Hygiene

Outpatient Rehabilitation Services (ITAP)

Goal: To provide chemically dependent adults with a highly structured, intensive, five day per week program with the goal of developing and maintaining a program of recovery.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	118	125	125	-	0.0%
Volume of Service	10,763	11,250	11,250	-	0.0%

Methadone Services

Goal: To offer methadone maintenance and treatment to individuals addicted to heroin and certain prescription drugs.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	260	240	240	-	0.0%
Volume of Service	43,063	43,190	43,190	-	0.0%

Lexington Center for Recovery, Inc. Outpatient Clinic Services

Goal: To provide adults/adolescents and their families with treatment to promote recovery from chemical dependence/addiction and improve their quality of life.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	1,612	1,780	1,780	-	0.0%
Volume of Service	42,232	39,500	39,500	-	0.0%

Chemical Dependency Crisis Center

Goal: To offer 24 hour medically monitored withdrawal services for persons who are intoxicated by alcohol and/or other substances.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	472	405	405	-	0.0%
Volume of Service	3,983	4,040	4,040	-	0.0%

Chemical Dependency Services Total

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	2,518	2,605	2,605	-	0.0%
Volume of Service	100,969	98,470	98,470	-	0.0%

COORDINATED SERVICES

Forensic Services

Goal: To provide a comprehensive chemical dependency/mental health/criminal justice assessment with appropriate behavioral healthcare treatment recommendations to the courts as an alternative to incarceration.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	458	410	410	-	0.0%
Volume of Service	458	410	410	-	0.0%

Jail-Based Behavioral Health Services

Goal: To provide mental health/chemical dependency services to individuals incarcerated in the DC Jail and link these individuals to appropriate behavioral healthcare services upon their release into the community.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	333	230	230	-	0.0%
Volume of Service	4,767	3,350	3,350	-	0.0%

Department of Mental Hygiene

Case Management, Vocational, and Assessment Services

Goal: To provide planning, linking, monitoring and advocacy to individuals to assist in engaging them in treatment and remaining in treatment with the goal of reducing the Medicaid cost for CD Treatment.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	1,217	1,395	1,395	-	0.0%
Volume of Service	2,596	2,040	2,040	-	0.0%

Court Evaluations

Goal: To assist the Dutchess County criminal justice system by providing the courts with pre-trial psychiatric evaluations of defendant's competency to understand at trial the charges brought against them and their ability to participate in their own defense.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	83	90	90	-	0.0%
Volume of Service	181	225	225	-	0.0%

Psychiatric Emergency Department

Goal: To evaluate individuals in acute psychological distress for medication and possible hospitalization.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	5,290	5,020	5,020	-	0.0%
Volume of Service	5,290	5,020	5,020	-	0.0%

Inpatient

Goal: To provide psychiatric inpatient treatment for individuals suffering from acute mental illness who require supervision 24 hours a day and cannot be maintained in the community.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	1,195	1,040	1,040	-	0.0%
Volume of Service	14,185	14,160	14,160	-	0.0%

Crisis Residence (RPC Crisis Residence)

Goal: To provide short-term respite and stabilization for individuals in acute psychological distress in an effort to avoid hospitalization.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	251	290	290	-	0.0%
Volume of Service	3,291	5,450	5,450	-	0.0%

Coordinated Services Total

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	8,827	8,475	8,475	-	0.0%
Volume of Service	30,768	30,655	30,655	-	0.0%

Department of Mental Hygiene

DEVELOPMENTAL DISABILITIES SERVICES

Clinic for the Multi-Disabled²

Goal: To treat mentally ill and/or chemically dependent developmentally disabled individuals in a clinic setting with the aim of enhancing their functionality and quality of life.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	457	-	-	-	
Volume of Service	2,582	-	-	-	

Habilitation, Training and Vocational Services

Goal: To enhance the functionality and quality of life of people who are developmentally disabled and their families residing in Dutchess County.

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	862	890	890	-	0.0%
Volume of Service	131,779	123,490	123,490	-	0.0%

Developmental Disabilities Services Total

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	1,319	890	890	-	0.0%
Volume of Service	134,361	123,490	123,490	-	0.0%

DC/DMH TOTAL

Indicators:	2012 Actual	2013 Estimate	2014 Plan	Change	% Change
# of Persons Served	30,112	30,325	30,325	-	0.0%
Volume of Service	547,027	548,275	548,275	-	0.0%

¹ MCIT is one of the Diversion Programs – effective second quarter 2012. An additional 334 collateral recipients were seen.

² Programs ceased operations 12/31/12.

³ Programs ceased operations 3/31/12.

⁴ PROS programs began operations 4/1/12.

⁵ MHA Beacon PROS began operations 1/1/12. Number of persons served is not an unduplicated count.

KEY BUDGETARY ISSUES:

2013 Accomplishments

- Drew down an additional \$500,000 from the NYS Office of Mental Health for 2013, which hopefully will be continued in 2014 and 2015, to sustain 2012 increases in outpatient capacity for both Astor Services for Children & Families and Hudson Valley Mental Health, Inc.
- Prepared DMH’s 2014 budget. It is a no growth budget---gross appropriations are the smallest in over a decade; county tax levy is virtually the same as 2013; and the number of authorized positions is fewer than any year since 1975.
- Prior to budget preparation, DMH developed the Local Governmental Plan for 2014.

- The NYS Department of Health's Medicaid Health Home Program is now in operation and contracting has begun with agencies for care management services. The two Health Homes serving Dutchess County are Hudson Valley Care Coalition and Hudson River Health Cares. It is expected that next year service providers will become part of the Health Home service provider network. DMH will explore with the Health Home, payment for ITAP and Partial Hospital Program, with the possibility of including HELPLINE and the Mobile Crisis Intervention Team.
- DMH is participating with the Health and Human Services Cabinet to develop a campaign against Prescription Drug Misuse. The committee will develop a framework that includes community coalitions, interventions, law enforcement policy and environmental policies. This will be presented to the County Executive when completed.
- In the process of revising DMH's Policy & Procedure Manual to reflect the changes in structure, organization and functions.
- In August, The Center for Governmental Research, Inc. (CGR) began a comprehensive study of potential integration between the Department of Health (DOH) and the Department of Mental Hygiene (DMH). The study will provide immediate, short term and long term recommendations to strengthen delivery of services, maximize resources and increase efficiencies within a more integrated structure.
- Feasibility Study - Continue to explore, plan and implement ways the departments of Health and Mental Hygiene can better integrate services and/or functions.
- Continue to migrate DMH's current server infrastructure to new servers at the Office of Central & Information Services.
- Switched over to the new Voice Over Internet Phone (VOIP) system.

2014 Initiatives:

- Maintain the Department's statutory role as the Local Governmental Unit as spelled out in Article 41 of the NYS Mental Hygiene Law, overseeing, monitoring, planning and contracting for publicly funded services for mentally ill, chemically dependent and/or developmentally disabled persons in Dutchess County.
- With the expectation of additional funding from the NYS Office of Mental Health, toward the end of 2013 and into 2014, DMH plans to mount a prevention program aimed at children and youth in selected school districts, as well as an educational initiative focusing on relatives and friends of seriously mentally ill persons, as well as the public at large, with the aim of increasing the community's understanding of mental illness and chemical dependency, identifying the resources available in our county and decreasing the stigma associated with seeking treatment.
- The following clinical services continue to be provided directly by DMH:

ITAP (Intensive Treatment Alternatives Program)

A day rehabilitation program for recovering persons, which, as an alternative to incarceration, has become a vital component in the County's criminal justice system

The Diversion Program, which includes:

- 24-hour HELPLINE
Providing crisis counseling, information and referral
- 7-day Mobile Crisis Intervention Team
Interfacing with police and other county agencies and intervening with children and adults county-wide
- 5-day Partial Hospital Program
An alternative to or point of re-entry from inpatient psychiatric care

Jail-Based Mental Hygiene Services

Providing motivational counseling and referral five days a week in the County's jail

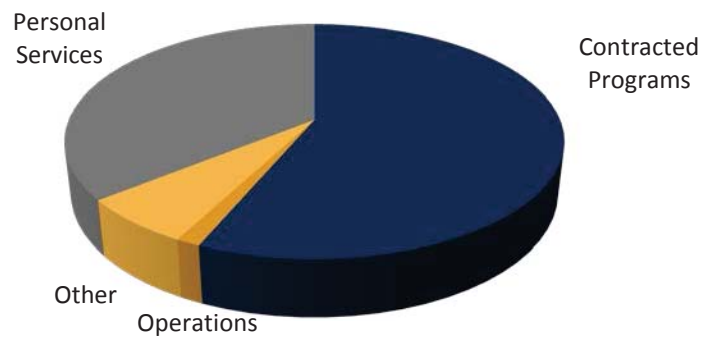
- Dispatch Trauma Team as needed to help individuals, families and agencies process unexpected untoward events.
- Decrease the number of Dutchess County residents requiring psychiatric inpatient care.
- Continue to work with mental health and chemical dependency clinic providers to increase productivity (# of people seen and volume of service) and revenue.
- Work with the Health & Human Services Advisory Team's Steering Committee and other agencies and groups in developing and refining systems with the aim of fostering the integration of physical health services with behavioral health programs.
- Progress will continue with the DOH and DMH integration study as CGR continues gathering information and conducting interviews with the county departments, county officials and community stakeholders. The study is on schedule to be completed in early 2014.

Department of Mental Hygiene Fiscal Summary

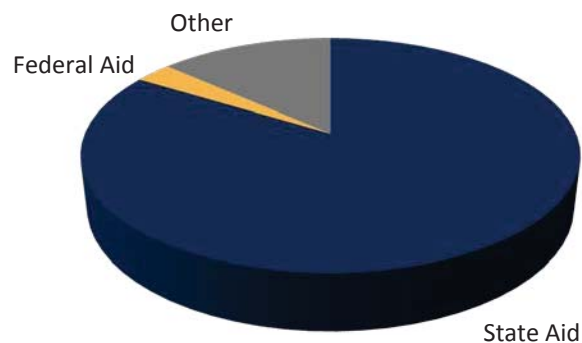
Budget Summary

	2013 Modified	2014 Tentative	% Change
Appropriations	\$ 26,022,736	\$ 25,406,889	-2%
Revenues	\$ 16,051,672	\$ 15,983,555	0%
County Cost	\$ 9,971,064	\$ 9,423,334	-5%

2014 Tentative Appropriations



2014 Estimated Revenue



Department of Mental Hygiene

Budget Summary

Classification	2012 Actual	2013 Adopted	2013 Modified	2014 Tentative	\$ Change	% Change
Salaries and Wages	8,975,855	6,577,902	6,628,377	6,220,578	(407,799)	-6.15%
Employee Benefits	3,693,333	3,039,989	3,028,622	2,885,600	(143,022)	-4.72%
Personal Services	12,669,188	9,617,891	9,656,999	9,106,178	(550,821)	-5.70%
Employee Travel, Train & Educ	29,168	52,197	53,167	184,757	131,590	247.50%
Equipment (Non-Depreciable)	29,483	47,600	47,600	18,700	(28,900)	-60.71%
Equipment (Depreciable)	0	0	0	10,000	10,000	
Equipment	29,483	47,600	47,600	28,700	(18,900)	-39.71%
Communication	118,288	30,138	31,488	27,892	(3,596)	-11.42%
Supplies	130,032	199,534	191,434	190,294	(1,140)	-0.60%
Utilities	8,397	0	0	0	-	
Interdepartmental Services	310,142	389,261	389,761	391,878	2,117	0.54%
Interdepartmental Prog & Srv	310,142	389,261	389,761	391,878	2,117	0.54%
Insurance	37,000	76,400	76,400	116,440	40,040	52.41%
Contracted Services	13,725,816	14,508,350	14,866,790	14,321,832	(544,958)	-3.67%
Mandated Programs	670,000	393,000	393,000	697,000	304,000	77.35%
Operations	433,940	313,147	316,097	341,918	25,821	8.17%
Total	28,161,453	25,627,518	26,022,736	25,406,889	(615,847)	-2.37%
OTPS	15,492,265	16,009,627	16,365,737	16,300,711	(65,026)	-0.40%
Departmental Income	3,765,714	1,754,016	1,754,016	1,910,606	156,590	8.93%
Use of Money and Property	214,068	228,775	228,775	228,775	-	0.00%
Sale of Property & Compensation	476	0	0	0	-	
Misc. Local Sources	1,586,064	3,500	3,500	3,500	-	0.00%
State Aid	13,282,636	13,145,574	13,509,134	13,384,427	(124,707)	-0.92%
Federal Aid	508,398	556,247	556,247	456,247	(100,000)	-17.98%
Total	19,357,356	15,688,112	16,051,672	15,983,555	(68,117)	-0.42%
Net to County Cost	8,804,097	9,939,406	9,971,064	9,423,334	(547,730)	-5.49%

Department of Mental Hygiene

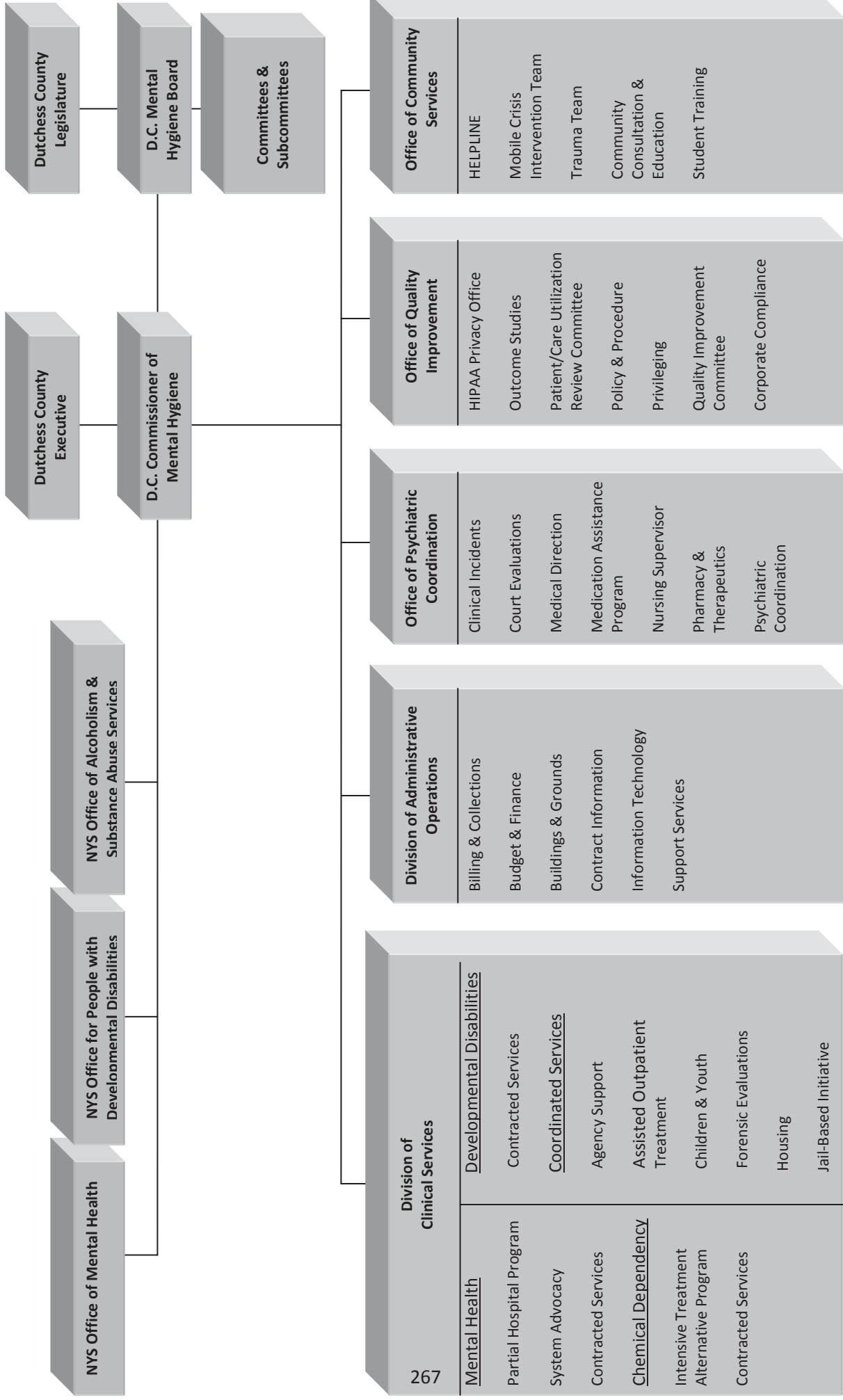


Table of Organization

<u>Position Title</u>	<u>Pay Grade</u>	<u># of Positions</u>
Central Administration:		
Commissioner of Mental Hygiene	MJ	1
Clinical Division Chief	MH	1
Chief Division of Administrative Operations	MG	1
Director of Consultation and Education	MG	1
Director of Research and Evaluation	MF	1
Director of Budget and Finance-E	ME	1
Support Services Manager	MC	1
Supervising Psych / Medical Director	F	1
Confidential Administrative Assistant	CI	1
Support Services Assistant	CH	3
Secretary	CD	1
Clinical Unit Administrator	21	0.8
Nursing Supervisor	17	0.2
Accountant	16	1
Research Assistant	15	2
Billing Manager	14	1
Community Mental Health Nurse	14	1
Microcomp / Word Proc Supp Asst	14	1
Principal Accounting Clerk	12	2
Principal Program Assistant	12	2
Senior Program Assistant	10	1
Receptionist	6	1
Office Assistant	6	<u>2</u>
Total:		28
Partial Hospitalization:		
Nurse Practitioner - Hourly	21	0.3
Psychologist II	20	1
Psychologist I	19	1
Nursing Supervisor	17	0.8
Social Worker III	17	1
Chemical Dependency Counselor	14	1
Community Mental Health Aide	12	1
Principal Accounting Clerk	12	1
Activity Therapy Aide	6	1
Office Assistant	6	<u>1</u>
Total:		9.1
MR & DD		
Clinical Unit Administrator	21	<u>0.2</u>
Total:		0.2

Table of Organization

<u>Position Title</u>	<u>Pay Grade</u>	<u># of Positions</u>
HELPLINE:		
Clinical Unit Administrator	21	1
Supervising Social Worker	18	1
Social Worker III	17	1
Community Mental Health Counselor- PT-E	16	0.42
Community Mental Health Nurse- Hrly	14	0.74
Community Mental Health Aide (Spanish Spk)	12	<u>1</u>
Total:		5.16
Diversion Program		
Supervising Social Worker	18	1
Social Worker III	17	2
Community Mental Health Nurse	14	2
Community Mental Health Aide	12	3
Recreational Therapy Assistant	11	1
Activity Therapy Aide	6	1
Office Assistant	6	<u>1</u>
Total:		11
Coordinated Services		
Clinical Unit Administrator	21	1
Psychologist III	21	1
Supervising Social Worker	18	3
Social Worker III	17	3
Social Worker I - EA	16	1
Social Worker I	15	1
Chemical Dependency Counselor	14	3
Senior Program Assistant	10	1
Activity Therapy Aide	6	1
Office Assistant	6	<u>2</u>
Total:		17
Alcohol Addiction Control		
Clinical Unit Administrator	21	1
Nurse Practitioner - Hourly	21	0.3
Psychologist II	20	2
Social Worker III	17	3
Chemical Dependency Counselor	14	2
Community Mental Health Nurse	14	1
Accounting Clerk	9	1
Office Assistant	6	<u>2</u>
Total:		12.3
Department Total:		82.76

