FY 2027 Borough Budget Consultations

Manhattan - Department of Health and Mental Hygiene

Meeting Date:

AGENDA ITEM [1]: Impact of Measures to Close Budget Gaps and Threatened Funding Cuts on the Budget For FY 2028 and Beyond

1. Has the funding for any programs or initiatives at your Agency allocated for FY 2026 or projected FY 2027 been cut or reduced as a result of the efforts to close City Budget gaps in FY 2026, FY 2027 or projected FY 2028?

The Health Department participated in the Chief Savings Officer (CSO) exercise in 2026. Our goal was to find savings that were achievable and did not cut services, and collaborated with OMB and City Hall to evaluate a range of options.

a. If yes:

i. Please identify the program or initiative, and

ii. Please provide an estimate of the amount of the funding cut or reduction in both absolute and percentage amounts.

Details about agency savings, including the Health Department, in the FY27 Executive budget can be found here: https://www.nyc.gov/assets/omb/downloads/pdf/exec26/sp5-26.pdf

2. Has the funding for any programs or initiatives at your Agency allocated for FY 2026 or projected FY 2027 been cut or reduced as a result of actual or threatened cuts to or reductions in funding or subsidies directly or indirectly attributable to the federal government for FY 2026, FY 2027 or projected FY 2028?

No, there have been no direct financial impacts to any Health Department programs or initiatives as a result of federal funding reductions.

a. If yes:

i. Please identify the program or initiative, and

ii. Please provide an estimate of the amount of the funding cut or reduction in both absolute and percentage amounts.

3. Has any State or federal funding streams previously earmarked or allocated for programs or initiatives at your Agency been redirected or re-allocated to other uses in order to:

a. Close the City Budget Gap for FY 2026, FY 2027 or projected FY 2028? No

i. If yes, please provide an estimate of the funding cut or reduction in both absolute and percentage amounts.

b. Prepare for or respond to actual or threatened cuts to or reductions in funding or subsidies directly or indirectly attributable to the federal government for FY 2026, FY 2027 or projected FY 2028? No

i. If yes, please provide an estimate of the funding cut or reduction in both absolute and percentage amounts.

4. Have any programs or initiatives, including scheduled or planned expansions of existing programs or initiatives, at your Agency been frozen, postponed, suspended or abandoned as a result, directly or indirectly, of measures taken to address either the City Budget Gap or the threats to cut or reduce federal funding in FY 2026, FY 2027 or projected FY 2028?

Yes

a. If yes:

i. Please identify such programs or initiatives, and

ii. Please provide an estimate of the funding needed to restore or continue those programs and initiatives as planned.

Relay Re-estimate: not proceeding with certain components of program enhancement (phones and contingency management). No impact to existing program operations. This savings was implemented as part of the CSO initiative and resulted in $2M baselined savings, beginning in FY26.

5. What other measures is your Agency taking in connection with:

a. The calls for greater efficiency in City government operations, or

Our Chief Savings Officer (CSO) will continue to explore savings opportunities working with the entire agency and examining best practices from peer agencies.

b. Actual or threatened cuts to or elimination of federal funding?

We remain very concerned about funding for public health under this federal Administration. We continue to monitor changes, and are working closely with OMB, the Law Department, and the Mayor's Office.

c. What is the vacancy rate for positions in your agency?

9%.

AGENDA ITEM [2]: Mental Health

1. Please provide an updated list of programs and add any new programs for FY 27 or FY 28.

a. Agency Response:

Site Status	Date of Program Inception	Date of Program Closure	Provider
Active	2017-11-01		Northside Center for Child Development, Inc.

Active	2007-07-01		Good Shepherd Services
Active	1974-01-01		Greenwich House, Inc.
Active	2007-10-01		Lantern Community Services, Inc.
Active	2021-07-01		Lantern Community Services, Inc.
Active	2021-07-01		Lantern Community Services, Inc.
Active	2021-07-01		Lantern Community Services, Inc.
Active	2000-08-01		The Mental Health Association of NYC, Inc. d/b/a Vibrant Emotional Health
Active	1997-12-01		Northside Center for Child Development, Inc.
Active	2015-01-01		Urban Justice Center
Active	1999-10-01		Urban Pathways, Inc.
Active	1999-11-01		The Bridge, Inc.
Active	2006-10-01		Henry Street Settlement
Active	2013-01-01		Community Access, Inc.
Active	2012-07-01		Puerto Rican Family Institute, Inc.
Active	1999-04-01		Odyssey House, Inc.
Active	2001-01-01		Covenant House
Active	2014-07-01		Association to Benefit Children
Active	2005-07-01		National Alliance on Mental Illness of NYC (NAMI-NYC)
Active	2008-04-01		The Fortune Society, Inc.
Active	2015-10-15		The Fortune Society, Inc.
Active	1998-06-01		Goddard-Riverside Community Center
Active	1900-01-01		Goddard-Riverside Community Center
Active	2012-07-01		Upper Manhattan Mental Health Center, Inc.
Active	1988-07-01		Goddard-Riverside Community Center
Active	1997-07-01		Goddard-Riverside Community Center

Active	2012-11-01		Service Program for Older People, Inc.
Active	2005-07-01		Project Renewal, Inc.
Active	2005-07-01		Project Renewal, Inc.
Active	2005-07-01		Project Renewal, Inc.
Active	1999-01-01		Project Renewal, Inc.
Active	1980-07-01		St. Francis Friends of the Poor, Inc.
Active	1983-01-01		Mobilization for Justice, Inc.
Active	1900-01-01		Center for Urban Community Services, Inc.
Active	1900-01-01		Center for Urban Community Services, Inc.
Active	1981-07-01		Center for Urban Community Services, Inc.
Active	1999-12-01		Center for Urban Community Services, Inc.
Active	1999-12-01		Center for Urban Community Services, Inc.
Active	2000-07-01		Center for Urban Community Services, Inc.
Active	1997-11-01		Volunteers of America - Greater New York, Inc.
Active	2005-07-01		Lenox Hill Neighborhood House, Inc.
Active	2005-07-01		Lenox Hill Neighborhood House, Inc.
Active	1993-07-01		New York Presbyterian Hospital
Active	1988-01-01		Encore Community Services, Inc.
Active	1901-01-01		The Neighborhood Coalition for Shelter, Inc.
Active	2005-06-01		The Neighborhood Coalition for Shelter, Inc.
Active	2002-07-01		The Mental Health Association of NYC,

			Inc. d/b/a Vibrant Emotional Health
Active	2003-11-01		Center for Urban Community Services, Inc.
Active	2004-04-01		Project Renewal, Inc.
Active	2011-07-01		Volunteers of America - Greater New York, Inc.
Active	2020-07-01		Volunteers of America - Greater New York, Inc.
Active	2020-07-01		Volunteers of America - Greater New York, Inc.
Active	2012-07-01		ACMH, Inc.
Active	2016-12-08		St. Luke's-Roosevelt Hospital Center
Active	1900-01-01		VNS Health Behavioral Health Inc
Active	2012-07-01		VNS Health Behavioral Health Inc
Active	2020-01-01		Postgraduate Center for Mental Health
Active	2006-07-01		Beth Israel Medical Center
Active	1900-01-01		The Center for Family Support, Inc.
Active	2017-12-01		Young Adult Institute, Inc.
Active	2017-12-01		New Alternatives for Children, Inc.
Active	2017-12-01		Sinergia, Inc.
Active	2017-12-01		The Jewish Community Center in Manhattan, Inc.
Active	2017-12-01		Young Adult Institute, Inc.
Active	2000-10-01		Baltic Street AEH, Inc.
Active	1997-05-01		St. Luke's-Roosevelt Hospital Center
Active	2016-01-01		Center for Alternative Sentencing and Employment Services, Inc.
Active	2002-01-01		University Settlement Society of New York
Active	2016-12-08		University Settlement Society of New York
Active	2004-07-01		Columba Services, Inc.

Active	1989-11-01		West Side Federation for Senior and Supportive Housing, Inc.
Active	1991-05-01		West Side Federation for Senior and Supportive Housing, Inc.
Active	1997-02-27		West Side Federation for Senior and Supportive Housing, Inc.
Active	2023-07-01		West Side Federation for Senior and Supportive Housing, Inc.
Active	2017-07-01		The Coalition of Behavioral Health Agencies, Inc. d/b/a InUnity Alliance, Inc.
Active	1994-01-01		Bowery Residents' Committee, Inc.
Active	1997-03-19		Bowery Residents' Committee, Inc.
Active	2017-09-01		Project Renewal, Inc.
Active	2017-09-07		New York Foundling
Active	2005-07-01		Weston United Community Renewal, Inc.
Active	2003-09-01		Weston United Community Renewal, Inc.
Active	1900-01-01		Community Access, Inc.
Active	1900-01-01		Community Access, Inc.
Active	2000-01-01		Community Access, Inc.
Active	2012-07-01		Community Access, Inc.
Active	2012-07-01		Postgraduate Center for Mental Health
Active	2012-07-01		Postgraduate Center for Mental Health
Active	2012-07-01		Postgraduate Center for Mental Health
Active	2016-12-08		Postgraduate Center for Mental Health
Active	2008-07-01		Housing Works, Inc.

Active	2017-07-01		Iris House: A Center for Women Living with HIV, Inc.
Active	2017-07-01		Faces NY, Inc.
Active	1900-01-01		Greenwich House, Inc.
Active	2013-07-01		Greenwich House, Inc.
Active	2005-07-01		Research Foundation for Mental Hygiene, Inc.
Active	2008-07-01		CAMBA, Inc.
Active	2019-01-01		Community Access, Inc.
Active	2018-10-01		Postgraduate Center for Mental Health
Active	2005-07-01		St. Luke's-Roosevelt Hospital Center
Active	2025-02-01		St. Luke's-Roosevelt Hospital Center
Active	2019-07-01		Goodwill Industries of Greater New York & Northern New Jersey, Inc.
Active	2025-02-01		Upper Manhattan Mental Health Center, Inc.
Active	2012-09-01		Beth Israel Medical Center
Active	1996-07-01		Association to Benefit Children
Active	2012-07-01		VNS Health Behavioral Health Inc
Active	1995-10-15		Community Association of Progressive Dominicans, Inc.
Active	2014-07-01		Community Access, Inc.
Active	2015-10-01		Community Access, Inc.
Active	2014-05-01		Services for the Underserved, Inc.
Active	2020-01-01		Services for the Underserved, Inc.
Active	2010-01-01		Center for Urban Community Services, Inc.
Active	2010-07-01		West Harlem Group Assistance, Inc.
Active	2011-07-01		West End Residences Housing Development

			Fund Company, Inc. d/b/a Homeward NYC
Active	2012-01-01		Clinton Housing Development Company, Inc.
Active	2013-02-01		Good Shepherd Services
Active	2013-07-01		Good Shepherd Services
Active	2013-01-01		The Door - A Center of Alternatives, Inc.
Active	2013-01-01		The Door - A Center of Alternatives, Inc.
Active	2011-07-01		New York Presbyterian Hospital
Active	2011-07-01		Beth Israel Medical Center
Active	1900-01-01		Beth Israel Medical Center
Active	1900-01-01		Beth Israel Medical Center
Active	1900-01-01		Beth Israel Medical Center
Closed	2012-01-01	2026-06-30	Beth Israel Medical Center
Active	2015-07-01		Beth Israel Medical Center
Active	2015-07-01		Beth Israel Medical Center
Active	2020-01-01		Beth Israel Medical Center
Closed	2004-07-01	2026-06-30	Employment Program for Recovered Alcoholics, Inc.
Active	1987-05-01		Hamilton Madison House, Inc.
Active	1988-11-01		Inwood Community Services, Inc.
Active	2013-07-01		Inwood Community Services, Inc.
Active	1991-07-01		NYSARC, Inc. New York City Chapter
Active	2007-07-01		Project Renewal, Inc.
Active	2008-05-01		The Doe Fund, Inc.
Active	2009-11-01		Services for the Underserved, Inc.
Active	2009-12-01		The Door - A Center of Alternatives, Inc.
Active	2009-12-01		The Door - A Center of Alternatives, Inc.

Active	2008-07-01		Lesbian & Gay Community Services Center, Inc.
Active	2012-07-01		Lesbian & Gay Community Services Center, Inc.
Active	2012-07-01		Lesbian & Gay Community Services Center, Inc.
Active	2016-01-01		Lesbian & Gay Community Services Center, Inc.
Active	2020-01-01		Lesbian & Gay Community Services Center, Inc.
Active	1994-07-01		Single Parent Resource Center, Inc.
Active	2010-04-01		The Fortune Society, Inc.
Active	2009-08-01		The Children's Aid Society
Active	2013-07-01		The Children's Aid Society
Active	2013-07-01		The Children's Aid Society
Active	2011-07-01		Joan and Sanford I. Weill Medical College of Cornell University
Active	2011-04-01		Cecil Housing Development Fund Corporation
Active	2004-11-01		NYC Health + Hospitals
Active	2003-05-01		NYC Health + Hospitals
Active	2003-01-01		NYC Health + Hospitals
Active	2012-07-01		NYC Health + Hospitals
Active	1900-01-01		NYC Health + Hospitals
Active	1900-01-01		NYC Health + Hospitals
Active	2019-01-01		Odyssey House, Inc.
Active	2019-11-01		New Horizon
Active	2020-07-01		Center for Urban Community Services, Inc.
Active	2020-07-01		Center for Urban Community Services, Inc.

Active	2021-07-01		University Settlement Society of New York
Active	2021-07-01		Housing and Services Inc.
Active	2021-07-01		The Mental Health Association of NYC, Inc. d/b/a Vibrant Emotional Health
Active	2022-02-01		The Puerto Rican Organization to Motivate, Enlighten and Serve Addicts (PROMESA)
Active	2022-01-01		Henry Street Settlement
Active	2022-01-01		Hamilton Madison House, Inc.
Active	2022-01-01		Bailey House, Inc.
Active	2022-05-01		CAMBA, Inc.
Active	2023-01-01		Janian Medical Care PC
Active	2023-01-01		New York University Langone Medical Center
Active	2023-01-01		West End Residences Housing Development Fund Company, Inc. d/b/a Homeward NYC
Active	2023-11-01		Goddard-Riverside Community Center
Active	2024-07-01		Urban Pathways, Inc.
Active	2024-08-01		Fountain House, Inc.
Active	2024-08-01		Phoenix Houses of Long Island, Inc.
Active	2024-12-01		Goddard-Riverside Community Center
Active	2025-07-01		Goodwill Industries of Greater New York & Northern New Jersey, Inc.
Active	2025-07-01		Hamilton Madison House, Inc.
Active	2025-07-01		Service Program for Older People, Inc.
Active	2025-07-01		The Bridge, Inc.

With respect to the Access Hub for mental health services, please indicate whether it is operational, who has access, how is it being promoted and what are the current costs for running the HUB, what is the budget for FY 27 and projected for FY 28?

b. **Agency Response:** The platform is in the process of implementation and we look forward to sharing more details upon its release.

2. Please provide an update on the CONNECT pilot program. Will this program be expanded to more service providers. Will this be baselined as a permanent program once the pilot is completed? What funding will be needed for such permanent implementation? From what source will the funds for this program be derived?
    a. **Agency Response:** Connect clinics programs provide rapid access to services and a flexible and holistic approach to mental health including the addressing of socioeconomic determinants of health.

    There are currently 7 Connect clinics across NYC. The Health Department will continue to procure the Connect Clinic program on an ongoing basis.
3. Please update on youth mental health programs. Have any new programs been added, how many are run through the school system vs separately?
    a. **Agency Response:** In FY 2025 CSPOA received 1,164 referrals for all 5 boroughs, in FY 2026 1,197 referrals for all 5 boroughs. Citywide, New York City served 2,578 children through Children's Crisis Intervention Services (CCIS) in 2026. Children's Mobile Crisis Teams (CMCT) served 2,620 children citywide. Home Based Crisis Intervention (HBCI) served 784 children citywide. Since its launch in 2024, Caring Transitions enrolled over 180 patients in the program and completed over 1,800 encounters with youth at high risk for suicide and their caregivers (as of March 2026). There have been no new programs added to the current portfolio of youth mental health programs. Current programming run in collaboration with schools through our contracted providers are School Response Teams (38 schools) and the Promise Zone (9 schools).

AGENDA ITEM [3]: Clubhouses

The Health Department has previously reported an anticipated expansion in clubhouse membership of 3,750 individuals in addition to the 5,000 members already served through clubhouses.

- Does that commitment carry over to this new administration?
- How many clubhouses were created in FY 2026. How many new clubhouses are projected to be created in FY 2027 and FY 2028?
- What funding is available to support existing and create new clubhouses in FY 2027 and projected FY 2028?
- How many individuals are currently being served by clubhouses? Is there a waiting list, if so, what funding would be needed to find placements for those on the waiting list?

Agency Response: Clubhouses were expanded in FY25. There are now 13 clubhouses funded by the Health Department and City Council. As of June 30, 2026, 13 clubhouses across NYC have 5,608 active members. Clubhouse membership continues to expand and the Health Department is working to further promote clubhouses to increase membership. There is no waitlist to join a clubhouse. Clubhouses are funded through a combination of sources including funding from City Council and the NYC Health Department.

AGENDA ITEM [4]: Vaccinations

- **What is the vaccination budget for FY 27, how is it different from FY 26? What is the projected budget for FY 28?**

Vaccine Costs:

	VFC Doses	VFC Dollars	CHIP Doses	CHIP Dollars	317 Doses	317 Dollars
FY26 (July 1, 2025 – June 30, 2026)	2,093,871	$186,757,157.51	214,379	$19,178,062.14	27,718	$1,455,840.76

We are not expecting changes for FY27 or FY28. The VFC program and CHIP doses are entitlement (eligible children are guaranteed access to any recommended vaccine) and, therefore, number of doses and dollars spent will fluctuate based on our need (vaccine orders from enrolled providers). Vaccines received through the 317 program (a federal program) are prioritized for under and uninsured adults and are not an entitlement. The budget is limited to the dollar amount provided. This is the FY27 budget amount; we expect the same in FY28.

- **What vaccinations were prioritized for New Yorkers in FY 27 and for FY 28?**

In FY27, all routine pediatric immunizations (including MMR) and respiratory virus season immunizations (flu, COVID-19, and RSV) for all recommended age groups will be prioritized. Vaccinations for adults, including the pneumococcal vaccine will also be prioritized. If there is a vaccine-preventable disease outbreak, specific vaccines would be highlighted.

Vaccine budgets will be used for *all recommended immunizations,* based on provider needs.

- **What is the budget for promotions of those programs?**

The Bureau of Immunization's operating budget for FY26 includes $4,309,646 in CTL funds and $10,366,762 in our core immunization cooperative agreement from the CDC; both include funding for both personnel and OTPS. These funds support: program management, vaccine-preventable disease surveillance (including measles), case management of persons with hepatitis B infection during pregnancy, activities to ensure schools comply with immunization requirements, increasing access to vaccination through pharmacies and federally qualified health centers, education and support on immunizations in pregnancy, administration of the Vaccines for Children program, and work to support and maintain the Citywide Immunization Registry.

In addition, the bureau has ~$1.7 million in a CDC cooperative agreement to modernize the Citywide Immunization Registry through November 2027.

- **Where will the vaccinations be provided?**

Vaccines distributed through the VFC program (includes VFC program doses and doses for children enrolled in CHIP) will be provided at ~1200 enrolled provider locations across NYC, including all H+H locations that serve pediatric patients and the NYC Health Department's Immunization Clinic.
The 317-funded vaccines will be used for under and uninsured adults and will be available at the NYC Health Department's Immunization Clinic and ~10-12 additional sites across the city (mainly FQHCs).
Vaccinating healthcare providers (including pharmacies) separately order vaccines for their patients, particularly those for children who are commercially insured and adults who have public or commercial insurance, from the commercial market.

- **What additional funding is needed for either the vaccination program or for access to it, including those no longer eligible for federally funded vaccinations such as Covid?**

With sustained funding, the NYC Health Department would enhance and expand its Vaccines for Adults (VFA) Program to provide no-cost recommended vaccines, including COVID-19 vaccines, to uninsured and underinsured adults, ensuring continued access to life-saving immunizations regardless of insurance status or changes in federal funding.
The program would partner with federally qualified health centers (FQHCs) and other community providers in neighborhoods with high rates of uninsured adults and low vaccination coverage. The NYC Health Department would provide participating sites with no-cost vaccines and operational funding to support dedicated nursing staff to administer vaccines during vaccine-only visits for eligible adults, including those who are not established patients.

This model has already proven successful. The VFA Nurse Pilot and the Continue Access to Vaccinations for the Uninsured (CAV-U) programs demonstrated that combining no-cost vaccines with operational support increases vaccination access and uptake among uninsured and underinsured New Yorkers. During its operation period from 2022 - 2023, 26 CAV-U sites administered more than 60,000 vaccine doses, while the VFA Nurse Pilot administered more than 600 doses to uninsured and underinsured adults in the past year. As COVID-19 federal operational funding ended, the Health Department's ability to support providers in continuing to offer these services has diminished despite ongoing community need. While we continue to provide limited supply of vaccines to ~10 sites, operational funding is only available to support a nurse at one at one of those locations, limiting providers' ability to offer vaccination services.

A permanent VFA program would preserve and expand this successful infrastructure, improve equitable access to adult vaccines, reduce financial barriers to immunization, and protect New Yorkers from vaccine-preventable diseases, particularly as changes to federal vaccine programs and Medicaid coverage increase the number of adults at risk of losing access to recommended vaccines

- **What funding impact will cuts to Medicaid have on vaccinations? What funding is needed to replace access to vaccinations for such individuals?**

Children who are uninsured or become uninsured are eligible to receive vaccines at no cost through the Vaccines for Children program.
Approximately 611,000 adults (10%) in New York City are uninsured, with disproportionately higher uninsured rates among Black and Latino New Yorkers, immigrants, and other underserved populations. Recent federal policy changes are expected to further increase the number of uninsured and underinsured adults. It is estimated that at least 200,000 New Yorkers will lose health insurance coverage due to funding cuts to New York State's Essential Plan under H.R. 1, with hundreds of thousands more at risk of losing Medicaid coverage beginning in 2027. As coverage declines, more New Yorkers will lose access to recommended adult vaccines, increasing the risk of vaccine-preventable disease and widening existing health disparities.

- To address this growing gap, the Health Department would like to expand the Vaccines for Adults (VFA) Program to provide no-cost recommended vaccines to uninsured and underinsured adults. The program would leverage New York City's existing immunization infrastructure by partnering with federally qualified health centers and other community providers, supplying no-cost vaccines and operational support to ensure vaccination services remain available regardless of insurance status. This investment would replace access lost through reductions in federal coverage, protect vulnerable populations, and help prevent outbreaks of vaccine-preventable diseases.

AGENDA ITEM [5]: Rat Prevention

Please list programs, initiatives and costs for FY 27 and projected FY 28 for Rat Prevention.

a. Neighborhood Rat Reduction continues in the Harlem RMZ and the East Village/Lower East Side RMZ which includes all of Community Boards 3, 9, 10 and 11
b. The team is continuing with next steps and analysis of data in the West Harlem (CB9) contraceptive Pilot area
c. The City Agency Survey team conducts surveys every other month of public schools, parks and NYCHA developments in the Rat Mitigation Zones
d. We publish an annual Rat Mitigation Zone report detailing our work
e. We continue to conduct proactive Rat Indexing inspections in many areas outside of the two RMZs in Manhattan including in CB7, CB12, CB8, CB4 and CB2

f. The Rat Information Portal at www.nyc.gov/rats is updated with recent inspections and interventions as well as educational materials
g. We offer free Rat Academy training and Rat Walks to New Yorkers who wish to learn more about rat prevention – to sign up, visit our training page at https://www.nyc.gov/site/doh/services/rats-control-training.page
h. Our team continues to partner with the Parks GreenThumb team to offer rat management services in city-owned community gardens
i. Our team responds to all unique 311 complaints with an inspection within 14 days of receipt

Please indicate whether findings of rat infestations have increased in Manhattan in FY 2026? What budget is needed effectively to address any increase in such findings?

Fiscal Year	**Number of Initial Inspections**	Number of Initial Inspections that **Failed**	Number of Initial Inspections that **Failed for Rat Activity**	Number of Initial Inspections that **Failed for Garbage or Harborage Conditions**	**Percent** of Initial Inspections that **Failed for Rat Activity**	**Number of Compliance Inspections**	Number of Compliance Inspections that **Failed**	Number of Compliance Inspections that **Failed for Rat Activity**	Number of Compliance Inspections that **Failed for Garbage or Harborage Conditions**	**Percent** of Compliance Inspections that **Failed**	**Percent** of Compliance Inspections that **Failed for Rat Activity**	**Number of Service Visits** by Pest Management Professional
FY26	48,366	9,436	7,634	1,802	15.78%	9,540	6,257	5,659	598	65.59%	59.32%	10,605
FY25	53,563	11,362	9,016	2,346	16.83%	11,643	7,731	6,777	954	66.40%	58.21%	11,043

Note: We see some improvements in FY26 compared to FY25. Few properties failed inspection for rat activity and garbage conditions that attract rats.

Rat findings are highest at city-owned properties. Is DOHMH considering any programs to mitigate rat infestations at city-owned properties?

a. We already implement programs to mitigate rat conditions on city-owned properties and this is an important aspect of our work. For example, we survey Parks, Public Schools and NYCHA every other month for rat conditions and meet with the agencies to review the data and to recommend remediation measures. The agencies implement those and we monitor success and any needs for ongoing remediation.
b. Our stoppage team conducts rat mitigation work in the public realm including in street plazas, green streets, tree pits and around city owned properties throughout Manhattan.

c. We compile monthly city agency referral reports of public properties that have failed inspection for rat conditions and meet with all agencies several times a year to review referrals and assess implementation.
d. We offer technical assistance and guidance to our partner agencies – including walkthroughs and free training to city agencies.

MEETING NOTES:

NEW INFORMATION:

FOLLOW-UP COMMITMENTS:

AGENDA ITEM [6]: Health Clinics

Please provide a list of all DOHMH health clinics in Manhattan, including staffing numbers and the budget for these clinics in FY 27 and what is needed for FY 28. Please indicate which are Federally qualified

Is additional funding required to maintain current service levels? Has that funding been allocated?

How is the agency responding to changes in healthcare from the federal government?

AGENCY RESPONSE:

MEETING NOTES:

NEW INFORMATION:

FOLLOW-UP COMMITMENTS:

AGENDA ITEM [7]: Food Safety

Have restaurant, food cart, and food truck inspection levels been maintained from FY 26-FY 27? What is funding needed for the program for FY 28?

AGENCY RESPONSE:

MEETING NOTES:

NEW INFORMATION:

FOLLOW-UP COMMITMENTS:

AGENDA ITEM [8]: B-HEARD

Has the B-HEARD program been transitioned to the Mayor's Office of Community Safety? Has the program and its budget been expanded?

- **Agency Response:** The Health Department defers to NYC Health + Hospitals and the Office of Community Safety on their B-HEARD program.

AGENDA ITEM [9]: Legionnaires' Disease

What steps is DOHMH taking to prevent and respond to Legionnaires' disease outbreaks.

What additional funding is required for the Department to provide for greater enforcement of testing rules for cooling towers?

When does the Department expect to have a fully staffed team of water ecologists?

AGENCY RESPONSE:

NYC has among the most rigorous, protective laws and regulations requiring cooling tower system (CTS) owners to monitor and maintain their cooling towers to reduce the risk that *Legionella* bacteria will grow and cause a community cluster of Legionnaires' disease. The Health Department conducts extensive outreach and education with CTS owners to help them comply, sends reminders at key points of the year about requirements, offers individual consultations, and conducts inspections. Every inspection is a teachable moment, and the Scientist (Water Ecologist) reviews requirements and deficiencies, and can issue a summons subject to fines for non-compliance with the regulations.

When there is a community cluster of Legionnaires' disease, the Department mobilizes a multidisciplinary team to alert those in the affected area to seek treatment and to rapidly address the potential source of exposure.
What additional funding is required for the Department to provide for greater enforcement of testing rules for cooling towers?
The Department does not need additional funding at this time. We received a substantial budget increase in 2025.
When does the Department expect to have a fully staffed team of water ecologists?
The New York City Health Department has 56 scientists (water ecology) positions for *Legionella* work, which includes 23 additional new hires authorized in November 2025. As of 8/13/26, 43 are on board and 6 are in the

onboarding process. The Department is actively recruiting to fill the other positions, and we encourage and welcome people to apply.

MEETING NOTES:

NEW INFORMATION:

FOLLOW-UP COMMITMENTS:

AGENDA ITEM [10]: Mobile Behavioral Health Programs for Homeless Individuals

How long are the waiting lists for the Intensive Mobile Treatment (IMT) program? What is the level of coordination with state and other city programs to ensure greater continuity of care and efficiency? What is the FY27 budget for this program and how does it compare to previous years? What are the budget and other administrative barriers to eliminating the waitlist?

- **Agency Response:**

Crisis services do not have waitlists (or referral list). 988, Mobile Crisis Teams, and Crisis Residences - they will never have a waitlist – they are designed to be responsive to immediate needs. If someone is referred to ACT or IMT and deemed an appropriate fit, they are offered care coordination while waiting for placement with one of our teams. Offering Care Coordination means a person on the waitlist is assigned a case manager that assists with connections to care, emergency assistance, and services to fulfill basic needs (food, clothing, and housing). Case managers connect people to community based mental health services like Article 31 mental health clinics and Connect Clinics. Care Coordinators travel to meet with their clients in their home or wherever is convenient for the client. Waiting for placement also does not preclude someone from using other services provided by the City and the Health Departments helps connect folks to these services.

We've doubled our capacity of mobile treatment services since 2016. We are always improving our programs and adding new services to increase access and reduce any potential waiting for services. We are working on several initiatives to reduce wait time, such as:
Workforce: Salary increases in order to attract and retain provider staff through State and City cost of living adjustments, Medicaid rate increases for ACT reimbursement, and loan repayment/forgiveness.
Increased team capacity: Over the last ten years, the NYC Health Department and OMH have doubled community based mobile treatment capacity (ACT, FACT, SPACT, IMT) from about 3,000 to over 6,000 spots. The State has several current open procurements to expand ACT and FACT teams in NYC. These new teams will be accessed through SPOA and continue to expand system capacity.
Flexible ACT and Connect step down.
Expanded site-based treatment capacity: The NYC Health Department and OMH have implemented several enhancements to site based mental health services to provide funding for mental health clinics to offer some mobile/community-based treatment services as needed.

Expanded referrals: NYC Health Department has expanded SPOAs referrals to community based psychosocial rehabilitation programs focusing socialization, education and employment as a complement to treatment and care coordination.
The FY27 IMT contracts value is $48.56M, and the FY27 IMT Budget is $44.27M.

AGENDA ITEM [11]: Wish List

For community board advocacy, we need to know which important programs or projects are most in need of funding. If your agency were given a large amount of money, to which staffing need, program, or capital project would you assign it?

AGENCY RESPONSE:

MEETING NOTES:

NEW INFORMATION:

FOLLOW-UP COMMITMENTS: