

kept. Duties of the Commission were transferred to a Board of Mental Hygiene in 1922, and the State's five mental institutions were placed under the Department of Welfare (Chapter 29, Acts of 1922). Wartime austerity cut back spending on State institutions, and public concern after the war about treatment of the mentally ill led to creation of the Department of Mental Hygiene in 1949 (Chapter 685, Acts of 1949). The Department was charged to administer the State's mental institutions, coordinate State activities in **psychiatric research**, and oversee education and training of personnel working in mental institutions.

*State Board of Health and Mental Hygiene.* Mental health and public health functions became officially entwined in 1961 under the new State Board of Health and Mental Hygiene which assumed responsibility for: the health interests of Marylanders; State facilities for care of the chronically ill, mentally ill, mentally retarded, and tuberculous persons; and the medical care program for the indigent and medically indigent. The two departments, Health and Mental Hygiene, continued to administer programs and facilities as directed by the new Board (Chapter 841, Acts of 1961).

*Department of Health and Mental Hygiene.* Through executive reorganization in 1969, the Board and the two departments were superseded by the Department of Health and Mental Hygiene, which encompassed not only the programs and facilities inherited from its two predecessors, but also all the medical professional licensing boards, the Comprehensive Health Planning Agency, the Commission on Physical Fitness, the Advisory Board on Hospital Licensing, the Advisory Council on Hospital Construction, the Radiation Control Advisory Board, the Air Pollution Control Council, the Air Quality Control Council, and the Juvenile Services Administration (Chapter 77, Acts of 1969). Boards and councils relating to radiation and air quality, as well as environmental health programs, were transferred to the Department of the Environment in 1987; the Juvenile Services Administration became an independent agency in 1987 and an executive department in 1988.

The Department of Health and Mental Hygiene has evolved into a complex agency which continues to protect the physical, mental and social health of Marylanders. Through a comprehensive and accessible system of health services, the Department promotes health and prevents disease and disability.

Many health care programs are, by their nature, public functions and cannot be performed effectively by the private sector. Prime among these is the responsibility for dealing with epidemiological hazards to health, such as communicable diseases, and the organization of community efforts to prevent or control their impact.

Local health departments are the focal point in the delivery of services. Overseen by the Department of Health and Mental Hygiene, twenty-four local health departments report to the Deputy Secretary for Public Health Services and have access to all Department officials as well.

The Department also provides or purchases direct care services. These primarily include residential and outpatient care for the mentally ill; the mentally retarded; the chronically ill, including those with tuberculosis; the impaired elderly; and persons with addictive conditions. Several health services for the community as well as comprehensive health care services for the indigent and medically indigent are provided directly by the Department.

In 1987, the Department was reorganized under deputy secretaries responsible for three distinct programmatic areas: Operations; Public Health Services; and Policy, Finance, and Regulation.

## OFFICE OF THE SECRETARY

Appointed by the Governor with Senate advice and consent, the Secretary of Health and Mental Hygiene is responsible for the functions of the Department. The Secretary also directs and coordinates numerous boards, commissions, and citizen advisory groups.

### BOARD OF REVIEW

Mildred L. Tyssowski, *Chairperson*, 1991

*Appointed by Governor (who also designates chair from public members) with Senate advice & consent:* Usha J. Mehta, M.D., 1991; Carol Kehring, 1992; Thelma M. Millard, 1992; Jane S. Buckley, 1993;

Richard K. C. Hsieh, Ph.D., 1993; Joan H. Phillips, R.N., 1993.

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The Board of Review was established in 1969 (Chapter 77, Acts of 1969). The Board makes recommendations to the Secretary on the operation and administration of the Department. The Board also hears appeals as provided by law.

The Board's seven members are appointed to three-year terms by the Governor with Senate advice and consent (Code Health—General Article, secs. 2-201 through 2-207).