



Board of Health Meeting

Tuesday, December 2, 2025

Agenda

Jagdish Bhati	Mary Carol Burkhardt, M.D.	Jennifer Forrester, M.D.
Christopher Lewis, M.D.	Raynal Moore	Ken Patel
Kiana Trabue	Ashlee Young	

6:00 pm – 6:05 pm Call to Order and Roll Call

Old Business

6:05 pm – 6:10 pm Review and Approval of Minutes

- **Vote: Motion to Approve** the Minutes of October 28, 2025, Board of Health Meeting.

6:10 pm – 6:20 pm Commissioner's report – Dr. Grant Mussman

New Business

6:20 pm – 6:30 pm Food Safety Presentation – Ms. Trisha Blake and Mr. John Sanders

6:30 pm – 6:40 pm Finance Committee – Ms. Kiana Trabue

- **Vote: Motion to Approve** Hamilton County Solid Waste Management District– Contract 65x10830

6:40 pm – 6:50 pm Finance Update – Mr. Mark Menkhaus Jr.

6:50 pm – 6:55 pm Personnel Actions—Dr. Grant Mussman

- **Vote: Motion to Approve** Personnel Actions dated December 2, 2025.

6:55 pm – 7:15 pm **Motion for Executive Session** – That the Board of Health enter an Executive Session pursuant to Ohio Revised Code Section 121.22(G)(1) to discuss discipline of an employee(s).

7:15 pm – 7:20 pm Public Comments

7:20 pm Adjourn

Documents in the Packet but not presented. (if she doesn't have to present)

The Communicable Disease Unit Report will not be presented this month and is included in the packet. Please contact Ms. Kim Wright with any questions/concerns.

Next Meeting January 27, 2026

[Mission]

To assure access to quality services and to improve community health and wellness.

CINCINNATI BOARD OF HEALTH
BOARD OF HEALTH MEETING
October 28, 2025

Ms. Ashlee Young, Chair of the Board of Health, called October 28, 2025, meeting of the Cincinnati Board of Health to order at 6:00 p.m.

I. ROLL CALL:

Board Members Attending: Mr. Jagdish Bhati, Dr. Mary Carol Burkhardt, Dr. Jennifer Forrester, Dr. Edward Herzig, Ms. Raynal Moore, Mr. Ken Patel, Ms. Kiana Trabue, Ms. Ashlee Young

Absent: Dr. Christopher Lewis

Others Present: Dr. Grant Mussman-Commissioner, Ms. Sa-Leemah Cunningham-Clerk, Dr. Maryse Amin, Mr. Ian Doig, Mr. Antonio Young, Mr. Mark Menkhaus Jr., Ms. Kim Wright, Dr. Camille Jones, Dr. Nick Taylor, Ms. Joyce Tate, Dr. Michelle Daniels, Ms. Angela Robinson, Dr. Geneva Goode, Ms. Christina Deck, Ms. LaSheena White, Mr. Carlos Flores, Dr. Yury Gonzales, Mr. Steve Sobel

AGENDA PACKET → [OCTOBER-BOH-AGENDA-PACKET-10.28.25.PDF](#)

ITEM	TOPIC	RESPONSIBLE PARTY	ACTION/MOTION
Minutes	Motion that the Board of Health approves the minutes from September 23, 2025, Board of Health Meeting.	Ms. Sa-Leemah Cunningham	Motion: Mr. Jagdish Bhati 2nd: Dr. Mary Carol Burkhardt Action: 8-0 Passed
Old Business			
Commissioner's Report	Discussion Items: Memo included in the agenda packet. Dr. Grant Mussman presented his commissioner's report to the Board. • Dr. Mussman began by reminding the board of the upcoming Board Member Training session scheduled for Saturday, November 8th. • Expressed appreciation to Representative Landsman for visiting the Ambrose H. Clement Health Center. The team discussed with Mr. Landsman the ongoing successes as well as the challenges the centers are facing. Transgender Youth Mental Health Funding • Dr. Mussman highlighted the \$500,000 in city-identified funding dedicated to supporting mental health services for transgender youth.	Dr. Grant Mussman—Commissioner	n/a

	• Dr. Mussman explained that the funds were awarded last month following a thorough, well-run process led by the City Manager’s Office. • Dr. Mussman reinforced that this initiative reflects a strong commitment to youth mental health and community support. Maternal Home Visiting Program Successes • Dr. Mussman shared that the department will present next week at the American Public Health Association (APHA) Meeting in Washington, D.C. • The presentation focused on: ○ Strong outcomes from the Maternal Home Visiting Program. ○ The effectiveness of Community Health Workers in improving birth outcomes for both the city and county. • He emphasized that this is a county-wide success, not just a city initiative.		
Strategic Plan Discussion	Discussion Items: Presentation included in the agenda packet. Dr. Grant Mussman presented a follow-up discussion regarding the CHD strategic plan to the board. Overview of the Strategic plan • Dr. Mussman recapped that the initial Strategic Plan overview was presented in August 2025. • He shared that the updates were driven partly by Public Health Accreditation Board (PHAB) requirements—but was also a genuinely useful internal exercise. • He noted that he received general positive feedback, but few specific changes were requested. • Dr. Mussman shared his objective for presenting at the meeting: ○ Brought the Strategic Plan forward again. ○ Determine whether the Board would approve the plan. ○ Begin a conversation about the proposed execution approach.	Dr. Grant Mussman—Commissioner	Motion: Ms. Raynal Moore 2nd: Dr. Mary Carol Burkhardt Action: 8-0 Passed

	• Shared intention to give regular updates moving forward as the plan progresses. • Noted that the Strategic Plan will cover 2025–2030, making ongoing review and adjustments as needed. • Dr. Mussman shared that the strategic plan framework is organized around five functional domains created after years of reviewing and condensing all department activities into meaningful categories. <u>Highlights</u> Dr Mussman discussed Domain 1 – Health Outcomes and shared the importance of this domain. • The department wanted one population-level measure to track overall health outcomes in Cincinnati. • The measure chosen was life expectancy disparities (excess years of potential life lost) because: ○ It exposes neighborhood-level equity gaps. ○ It highlights preventable early deaths. ○ Literature supports this as an effective public health indicator. ○ It is measurable to use vital statistics, which are dependable and foundational. Key Metrics • Median excess years of potential life lost historically: 10,500. • Increased during the opioid epidemic to 11,600. • Goal for 2030: 20% reduction, targeting around 8,400. • The recent point sits at 8,800 but still determined if this is a real trend or random variation. Dr. Mussman shared How Progress is being Measured. • Use of statistical process control: ○ Tracks a single metric over time. ○ Distinguishes normal variation from true changes. ○ Helps identify “special cause” events (e.g., opioid epidemic spike). • After reviewing preventable contributors (opioid overdose, infant mortality, violence, cancer, cardiovascular disease), cardiovascular disease emerged as the highest preventable		
--	--	--	--

	driver of early deaths that fall squarely under public health influence. Dr. Mussman discussed the Current HEAL Initiative (Health Equity & Achievable Life Expectancy). • Focus area: Cardiovascular health. • Stakeholder collaboration underway. ○ Second stakeholder meeting scheduled for November 5. ○ Currently in pre-planning: structure, frequency, membership, purpose. • A community collaborative scan was completed with support from the Health Collaborative. • The Aim: develop and implement a collective plan of action. Dr. Mussman discussed Domain 2 – Customer & Employee Experience Goal • Improvement of patient and employee experience through regular feedback cycles and quality improvement projects. Activities • Annual patient survey: ○ Last completed in 2024; analyzed in May 2025. ○ Presented to the CCPC Board over the summer. • Highlights of patient survey: ○ Strengths: ease of care, positive staff interactions, good facility experience. ○ Opportunities: same-day appointments, after-hours medical advice awareness, pharmacy efficiency, and continuity with preferred providers. • Employee surveys: ○ City conducts periodic annual assessments. ○ Department has recently run site-specific surveys and plans to expand. • QI Project Development: ○ Not every finding becomes a QI project, but at least one formal project will stem from survey data. Dr. Mussman discussed Domain 3 – Access to Services and shared that this domain was tied to the Jensen Facilities Master Plan.		
--	--	--	--

	• The Jensen report (early 2024) assessed: ○ Current building conditions. ○ Community demand. ○ Traffic patterns, parking, and future needs. • Not a final action plan—more of a scenario generator. Strategic Plan Objectives • Consolidate non-clinical facilities where possible (starting with admin functions). • Conduct community engagement before making any changes in clinical sites. ○ Emphasis on serving neighborhoods responsibly as a city-owned system. • Examples under review: ○ Bobbie Stern Health Center: ▪ Outdated facility with repair needs. ▪ Early community feedback suggests less urgency to relocate than expected. • Medicaid changes may influence future planning and must be evaluated. Dr. Mussman discussed Domain 4 – Operational Excellence Goal • Build a comprehensive performance management system that: ○ Goes beyond city-required indicators. ○ Supports continuous monitoring and improvement. ○ Reflects the full scope of CHD activities. Current Status • System exists in early form—more prototype than fully operational. • Still manually updated. • Not yet interactive. • Further development needed to: ○ Expand content. ○ Define how leadership will use the data in decision-making. Dr. Mussman discussed Domain 5 – Safety Gap Identified • Although CHD has strong safety culture and leadership, it lacked: ○ A comprehensive reporting structure. ○ A clear, unified process for reporting incidents.		
--	--	--	--

	Strategic Goal • Reduce workplace injuries through: ○ Accurate electronic reporting. ○ Data-driven safety improvements. ○ Safety-related performance improvement projects. Major Achievement • Successfully launched a one-stop safety reporting portal: ○ One link manages all incident types. ○ System guides staff through what should be reported and where it must go. ○ Eliminates confusion about reporting pathways. • Still in preliminary stages of data collection but considered a major departmental win. Q&A: Mr. Patel asked whether the measure of “preventable deaths” screens specifically for health-related causes, or if it also includes factors like crime. • Dr. Mussman responded by explaining that the metric captures all major preventable causes of early death, not just medical conditions. • He clarified that the top five drivers of preventable early death in Cincinnati typically include: Cardiovascular disease, Infant mortality, Homicides, Opioid overdoses, Preventable cancers. • Dr. Mussman noted that these are not the top causes of death overall—they are, specifically the leading preventable causes. He also confirmed that this approach intentionally captures both health-related and non-health-related preventable deaths, because both impact community life expectancy. Mr. Bhati asked whether the department had conducted this type of measurement in the past and if similar analysis of life expectancy or preventable deaths had been done before. • Dr. Mussman confirmed that previous analysis was conducted in 2010 and 2015. ○ Those studies used formal life expectancy calculations by neighborhood. ○ The analysis revealed a 25-year life expectancy gap between Cincinnati neighborhoods, one of the worst disparities nationally.		
--	--	--	--

	• Dr. Mussman explained that the current approach differs in several key ways: it focuses on more common, preventable causes of early death, allows for more frequent measurement without the exhaustive statistical process used in formal life expectancy studies, and expresses outcomes in years of life lost, which enables direct comparisons across different causes of death, removes distortions from crude mortality rates, and provides a clearer picture of preventable loss in each neighborhood. Dr. Burhardt asked if the total measure of preventable deaths could be broken down by specific causes (cardiovascular disease, infant mortality, opioid overdose, preventable cancers). • Dr. Mussman answered that the department has an interactive tool on their website developed by an epidemiologist. • He explained that the tool allows users to click and break down data by individual causes and noted that it is intuitive and user-friendly. Dr. Burkhard also asked whether the data could be updated more frequently to track trends (e.g., monthly, or quarterly) instead of annually. • Dr. Mussman explained that the monthly data had points scattered widely due to small sample sizes. Quarterly reporting would start to smooth the trends; semi-annual reporting would be even more stable. • Dr. Mussman shared that the current method of data collection is analyzed annually as there was no active improvement initiative driving more frequent measurements. Dr. Bhati asked about the potential recurrence of opioid-related deaths given changing drug trends, requested clarification on the breakdown of the current 8,000 excess years of potential life lost across the preventable causes, and suggested considering additional metrics to capture nuances not fully reflected in the current measure. • Dr. Mussman acknowledged that the opioid epidemic could potentially resurge and impact trends in preventable deaths. He explained that ongoing abatement strategies include Ohio lawsuits against drug manufacturers organized under the One Ohio banner, with regional and local funds distributed for		
--	--	--	--

	community interventions; Hamilton County received \$3–4 million in the most recent rounds. While these funds are significant, he noted that they do not fully explain the changes in the data. He also highlighted the role of the Hamilton County Addiction Coalition, which has been coordinating responses since 2015. Dr. Mussman emphasized the importance of board feedback in guiding the use and interpretation of these metrics and agreed that additional measures may be necessary to capture the nuances in progress. • Dr. Amin also added that death data typically has a minimum three-month delay, sometimes extending to six months or even a year, which makes monthly tracking challenging. Regarding drugs, new lethal substances continue to emerge, but public health interventions—such as avoiding use alone, harm reduction strategies, and syringe exchange programs—have helped reduce deaths. Nevertheless, without intervention, any dangerous drug of choice can still result in lethal outcomes. Dr. Bhati asked about the key stakeholders involved in the cardiovascular disease initiative. • Dr. Mussman explained that they are following a model like Cradle Cincinnati, where stakeholders are intentionally broad. The goal is to engage public health agencies, nonprofits, health systems, funders, community members, and community organizations. By aligning on a measure—not the current excess years of life lost metric but a more proximal measure—these stakeholders can monitor changes over time and identify areas of greatest need based on preventable deaths. • Dr. Mussman emphasized that at this stage, the initiative is primarily a measurement plan, not a set of specific interventions. They have not yet developed a theory of improvement but have begun mapping existing activities in communities, including scans of two neighborhoods included in the board packet. The department is working with the Health Collaborative, which has leveraged funds to support this effort, and is examining publicly available data to identify social and		
--	--	--	--

	geographical determinants of cardiovascular risk. Dr. Mussman noted the importance of an academic component connecting vital records with patient stories, underscoring that this is a complex, long-term effort with much still to learn before moving to targeted interventions. Dr. Forrester commended the initiative to address infant mortality, noting the inclusion of the opioid epidemic in the metrics and the ambitious goal of a 20% decrease. She raised concerns about the feasibility of achieving a five- to six-point decrease by 2030, questioning whether the goal is realistically attainable through meaningful interventions. She also praised the transparency of sharing data with stakeholders. • Dr. Mussman acknowledged the concern and emphasized the importance of balancing ambition with achievability. He noted that a 20% reduction within five years would be particularly challenging, though external factors, such as increased focus on the opioid crisis and ongoing work by programs like Cradle, could contribute to progress. He highlighted that significant impacts in Cradle’s data took nine to ten years to materialize and cautioned that extending the timeline too far might reduce the sense of urgency. The goal, therefore, must motivate action while remaining credible. Ms. Trabue thanked Dr. Mussman for the information and asked whether specific outcomes or goals, like the 20% reduction in the first domain, have been established for other domains. She specifically inquired about safety, asking if there are a baseline and associated goal for measuring improvements. • Dr. Mussman explained that many measures are still in the early development phase and, due to accreditation requirements, are currently framed around implementation rather than specific numeric targets. While goals and interventions are monitored at a granular level through the performance management system, these have not yet been developed or incorporated into the strategic plan. Motion to approve the adoption of the Cincinnati Health Department Accreditation Update: Strategic plan.		
--	---	--	--

Revocation or Suspension of License for Pool Resolution 2025-007	Discussion Items: Document included in the agenda. Mr. Antonio Young discussed resolution 2025-007: Revocation or Suspension of License for Pool. • Mr. Young presented a recommendation from the Law Department to update Board of Health Regulations related to escalated enforcement for public swimming pools, spas, and spray grounds. • He noted that the Health Department meets monthly with the Law Department and environmental groups to address enforcement challenges and obtain guidance on escalated actions. • Mr. Young highlighted the past contributions of Ms. Kate Burroughs to develop this recommendation. The resolution proposes an update to Regulation 00047-3, strengthening the enforcement process for recreational facilities inspected by the Technical Environmental Services Unit. • He emphasized that this update reflects the Health Department’s commitment to continuous quality improvement and ensures regulatory processes remain robust and effective. • Mr. Young recommended the board approves this resolution. Motion to Suspend the statutory rule requiring three readings of Resolution No. 2025-007. Motion to Approve Resolution 2025-007, amending Board of Health Regulation No. 00047-3, “License Fees for the Operation of Public Swimming Pools and Spas,” to provide notice of the procedures for the appeal of the suspension or revocation of pool licenses, and granting authority to the Health Commissioner of the City of Cincinnati (the “Commissioner”) and the Commissioner’s designees to enforce such procedures, issue notices, suspend or revoke licenses, and take all other actions necessary to implement this regulation in accordance with the Ohio Revised Code and Ohio Administrative Code.	Mr. Antonio Young	Vote: Waive 3x Readings for Resolution 2025-007 Motion: Dr. Edward Herzig 2nd: Mr. Jagdish Bhati Action: 8-0 Passed Vote: Approve Resolution 2025-007 Motion: Mr. Jagdish Bhati 2nd: Ms. Kiana Trabue Action: 8-0 Passed
2026 Solid Waste Transfer Station Licensure for Republic Services (CSI) Resolution 2025-008	Discussion Items: Document included in the agenda. Mr. Antonio Young discussed resolution 2025-008: 2026 Solid Waste Transfer Station Licensure for Republic Services (CSI). • Mr. Young shared that this is an annual license.	Mr. Antonio Young	Vote: Waive 3x Readings for Resolution 2025-008 Motion: Ms. Raynal Moore 2nd: Mr. Jagdish Bhati Action: 8-0 Passed Vote: Approve Resolution 2025-008 Motion: Ms. Raynal Moore

	• This facility carries a license fee of \$750, and the license covers the calendar year beginning January 1, 2026. • Mr. Young explained that a transfer station serves as a holding point for trash and solid waste prior to transportation to a landfill. • He explained that the Environmental Waste Unit ensures proper storage, ground maintenance, and compliant transfer operations. • Mr. Young informed that for 2025, five inspections had already been conducted at this facility, with no community complaints. • Based on the operator's application and successful inspections, Mr. Young recommended that the Board renew the license for 2026. Motion to Suspend the statutory rule requiring three readings of Resolution No. 2025-008. Motion to Approve Resolution 2025-008, granting Republic Services of Ohio Hauling LLC a license for the year 2026 to operate a solid waste transfer station at 5701 Este Avenue, Cincinnati, OH.		2nd: Ms. Kiana Trabue Action: 8-0 Passed
2026 Whitton Waste & Recycling License Resolution 2025-009	Mr. Antonio Young discussed resolution 2025-008: 2026 Whitton Waste & Recycling License for Republic Services (CSI). • Mr. Young shared that this is an annual license. • This facility carries a license fee of \$750, and the license covers the calendar year beginning January 1, 2026. • Mr. Young provided details on a second facility, a construction and demolition debris (C&D) recycling center operated by a different company. He explained that the facility receives C&D materials from commercial dumpsters and sorts them for recycling. Inspections ensure proper handling to prevent contamination of waters of the state. • This facility's license is an annual renewal. The facility was newly approved by the Board on May 27, 2025, and its current license will expire at the end of the year. Approval for 2026 would allow the facility to continue operations. • He explained that the Environmental Waste Unit ensures proper storage, ground maintenance, and compliant transfer operations.	Mr. Antonio Young	Vote: Waive 3x Readings for Resolution 2025-009 Motion: Dr. Edward Herzig 2nd: Mr. Jagdish Bhati Action: 8-0 Passed Vote: Approve Resolution 2025-009 Motion: Ms. Raynal Moore 2nd: Dr. Mary Carol Burkhardt Action: 8-0 Passed

	- Mr. Young stated that although this is a new facility, inspections have been conducted more frequently to ensure compliance, with a total of eight inspections since May. Going forward, inspections will follow the standard quarterly schedule, gradually reducing frequency as operations demonstrate consistent compliance. - Mr. Young recommended that the Board renew the license for 2026. Motion to Suspend the statutory rule requiring three readings of Resolution No. 2025-009. Motion to Approve Resolution 2025-009, approving Whitton Waste & Recycling, LLC, a license for the year 2026 to operate a Construction and Demolition Debris (C&DD) Processing Facility located at 2000 State Street, in accordance with the Ohio Revised Code and the Ohio Administrative Code.		
New Business			
Finance Committee	Discussion Items: Documents included in the agenda. Ms. Kiana Trabue presented the contracts that were discussed and presented at the Board of Health Finance Committee Meeting to the Board. Ohio Department of Health—Contract 65x10811 - This grant provides pass-through funding for Public Health Emergency Preparedness (PHEP) support from the Ohio Department of Health under the Centers for Disease Control PHEP Grant. The grant supports prepared planning requirements set forth as deliverable-based service. CHO will receive Budget Period 2 (FY '26) grant funds totaling \$225,406 paid through completion of service deliverables. PHEP funding is \$145,711. This grant also includes the Cities Readiness Initiative grant fund amount of \$79,695 which represents level funding from the last budget period. Greater Cincinnati Dental Lab—Contract 65x10819 - Greater Cincinnati Dental Laboratory provides dental laboratory services for the Cincinnati Health Department's Dental Centers. Dental Lab work includes removable and fixed dental appliances (crowns, bridges, partial and full dentures). CHO patients typically present with missing teeth; dental lab services are essential to restoring oral health and function to the patients.	Ms. Kiana Trabue	Vote: Contract 65x10811 Motion: Mr. Jagdish Bhati 2nd: Dr. Edward Herzig Action: 8-0 passed Vote: Contract 65x10819 Motion: Ms. Raynal Moore 2nd: Ms. Ashlee Young Action: 8-0 passed

	Patients pay up front for their portion of the laboratory bill. The minimum fees are set at a level that covers the cost of the lab services. The cost of this contract, therefore, is covered by the minimum payments or insurance payments from the patients. This contract is essential to providing comprehensive dental care to CHD dental patients. Motion to Approve Ohio Department of Health – Contract 65x10811. Motion to Approve Greater Cincinnati Dental Lab – Contract 65x10819		
Finance Update	Discussion Items: Memo and materials were included in the agenda. Mr. Menkhaus gave an update on CHD Financials for September 2025 and Year over Year. Highlights - Mr. Menkhaus provided an overview of the Health Department’s financial performance throughout the first quarter of FY26, noting that detailed figures are available in the meeting packet. - Revenue total was \$14,912,447.59; increased by 19.28%. - Private Pay Insurance increased by 16.38%. - Medicare increased by 19.01%. - Medicaid increased by 252.33%. - Medicaid managed care increased by 64.04%. - Self-Pay patients increased by 16.76%. - Board of Ed Svcs (School Nurse’s Salary) decreased by 30.76%. - Grants/Federal decreased by 22.77%. - Expenses were \$14,378,916.02, increased by 1.55%. - Property expenses increased by 242.93%. - Personnel expenses increased by 8.39%. - Contractual costs decreased by 25.59%. - Material costs decreased by 11.30%. - Fixed costs decreased by 5.64%. - Fringes increased by 5.77%. The total available is \$690,531.57, which increased by 30.38%.	Mr. Mark Menkhaus Jr.	n/a
Personnel Actions	- Dr. Mussman directed the Board to the personnel actions included in the board packet. - Personnel actions included employee promotions. 1 Expanded Function Dental Assistant 1 Public Health Educator	Dr. Grant Mussman	Motion: Mr. Jagdish Bhati 2nd: Ms. Ashlee Young Action: 8-0 passed

	○ 1 Dental Hygienist ○ 1 Promotion to Public Health Educator ○ 1 Promotion to Environmental Safety Specialist ○ 1 Transfer to Senior Human Resources Analyst Motion to Approve the personnel actions dated October 28, 2025		
Fairwell to Dr. Herzig	• Ms. Ashlee Young recognized the impact and leadership of departing board member Dr. Edward Herzig. Ms. Young expressed appreciation for Dr. Herzig, who is attending his final Board meeting after six years of service. She highlighted Dr. Herzig's contributions, noting her insightful questions, historical knowledge, and guidance as invaluable to the Board. Ms. Young shared a personal reflection on their early interactions and emphasized that Dr. Herzik has been a trusted friend and resource. She acknowledged that while Dr. Herzik will be missed as a Board member, there is always space for her to participate virtually or in person as a member of the community. • Dr. Mussman added his appreciation for Dr. Herzik's service, reflecting on her mentorship during his early tenure as Health Commissioner. He recounted how Dr. Herzik guided him in understanding the scope of the Health Department's operations, including evaluating facilities, strategic planning, and addressing resource challenges. He emphasized that her guidance provided him with a broader perspective beyond day-to-day operations, helping him appreciate the long-term strategic responsibilities of his role. Dr. Mussman expressed gratitude for her continued feedback, perspective, and support over the years. • The Board and staff collectively acknowledged Dr. Herzig's impact on shaping the Health Department and thanked her for her dedicated service. • Dr. Herzig reflected on his Board service since October 2019, including her role as Chair and the extraordinary challenges during the COVID-19 pandemic. He highlighted collaborative citywide efforts, participation in mass immunizations, and the dedication of Health Department staff. He expressed	Ms. Ashlee Young	n/a

	gratitude for the opportunity to serve, valued the professional relationships and friendships she developed, and wished the Board continued success. Ms. Young gave a token of appreciation for his years of service, dedicated leadership and unwavering commitment to the health and well being of the community and selfless service to the Cincinnati Board of Health. Dr. Herzig thanked the board and expressed his appreciation.		
Additional New Business and Public Comments	Public Comments There were no public comments.	Ms. Ashlee Young	n/a

7:29 p.m. adjourned.

Next meeting: Tuesday, December 2, 2025, at 6pm, via Zoom.

Meeting can be viewed at: <https://archive.org/details/boh-10-28-25>

Minutes Approved by:

Sa-Leemah Cunningham
Cincinnati Board of Health Clerk

Ashlee Young
Chairperson, Board of Health

October 28, 2025 Meeting Attendance/vote sheet

[illegible]

x	<i>Present</i>
	<i>Yay</i>
	<i>Nay</i>
	<i>Absent</i>
	<i>Didn't vote but present</i>
M	<i>Move</i>
2nd	<i>Second</i>

STAFF

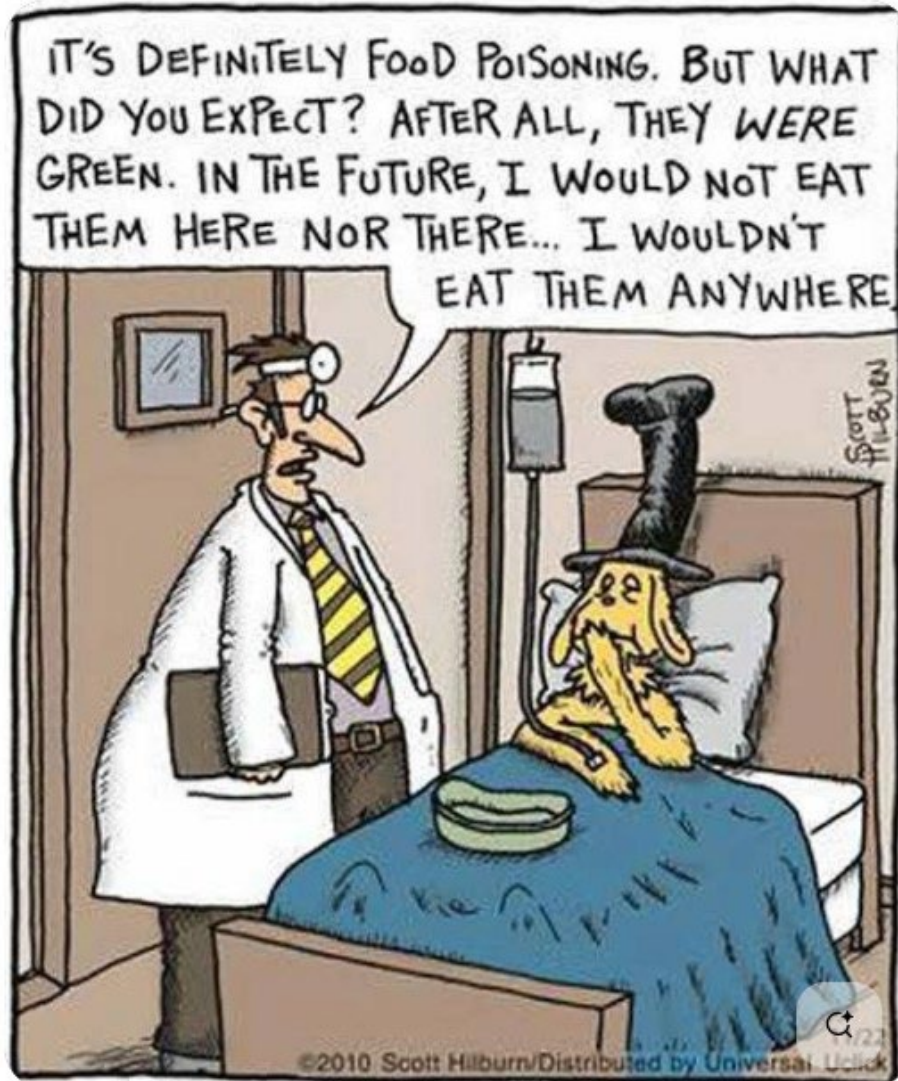
Dr. Grant Mussman-Commissioner
Sa-Leemah Cunningham (clerk)
Dr. Maryse Amin
Mark Menkhous Jr.
Antonio Young
Kim Wright
Dr. Camille Jones
Dr. Nick Taylor
Joyce Tate
Harry Barnes
Dr. Michelle Daniels
Ian Doig
Angela Robinson
Dr. Geneva Goode
Christina Deck
LaSheena White
Carlos Flores
Dr. Yury Gonzales
Steve Sobel

[illegible]



Food Safety Program

Board of Health Presentation
December 2nd, 2025



Why Food Safety is Important

Who We Are



What We Do

- Food Facility Reviews, Licensing, Complaints & Inspections related to:
 - Restaurants & Bars
 - Markets/Grocery Stores
 - Daycares & Nursing Homes
 - Food Trucks & Carts
 - Temporary Food Facilities
 - Vending Machines
 - Gas Stations
 - Micromarkets
- Enforcement & Education
 - Enforcement of food safety laws
 - Educating the public on food safety principles through the ServSafe and Person-in-Charge courses

Food Service Operations (FSOs)

- Regulated by the Ohio Department of Health
- Examples: Restaurants, Bars, Nursing Homes, Daycares
- Over 1900 FSOs in Cincinnati in



Retail Food Establishments (RFEs)

- Regulated by the Ohio Department of Agriculture
- Examples: Grocery Stores, Gas Stations, Micromarkets
- Over 450 licensed RFEs in Cincinnati



Mobile Food Operations

- Can be either an FSO or RFE
- Examples: Food Trucks/Trailers, Hot Dog Carts, Portable Mobiles (Tents)
- Around 250 licensed mobiles in Cincinnati
- Those with a mobile license can operate anywhere in Ohio.



Temporary Food Operations

- More than 300 temporary licenses issued in Cincinnati in more than 75 events
- Usually most active between March and October
- Examples of Special Events: City festivals like Taste of Cincinnati and Oktoberfest, church festivals, concerts, sporting events



Food Safety Training

- Our employees teach food safety courses most months out of the year to help the public become certified as a:
 - Level 1: Person in Charge
 - Level 2: ServSafe Manager's Course



city of
CINCINNATI
HEALTH DEPARTMENT

Food Safety Program

3845 William P Dooley Bypass
cincinnatihealthfood@cincinnati-oh.gov
(513) 564-1761



City of Cincinnati Board of Health Finance Committee

Kiana Trabue, Chair of the Board of Health Finance Committee, called the Monday, November 18, 2025 Finance Committee meeting to order at 5:03 pm

Roll Call

Members present: Kiana Trabue, Jagdish Bhati, Dr. Camille Jones, John Kachuba, Mark Menkhaus Jr., Grant Mussman, and Joyce Tate

Topic	Discussion	Action/Motion
Approval of Minutes	The Chair asked Committee members if everyone had the opportunity to review the minutes from October 21, 2025. <u>Motion:</u> That the Board of Health (BOH) Finance Committee approves the minutes from October 21, 2025.	Motion: Ms. Tate Second: Dr. Jones Action: Pass
Review of Contracts for BOH Approval:	Ms. Trabue began reviewing contracts going to BOH for approval. Hamilton County Solid Waste Management District - 65x10830 Mr. Antonio Young presented and explained that this contract represents the annual service agreement between the Cincinnati Health Department and the Hamilton County Board of County Commissioners. This contract, which is executed annually from January through December, is valued at \$72,000. Its primary purpose is to allow us to perform necessary inspections and enforcement activities at the county's solid waste facilities. We greatly value this long-standing partnership and anticipate the successful continuation of this agreement. In response to Mr. Bhati's question regarding the number of inspections and the previous year's compensation, Mr. Young confirmed that the funding amount has remained consistent at \$72,000 since the initial contract. Under this agreement, we perform solid waste inspections at least quarterly. Additional inspections are conducted on an as-needed basis when a complaint is received. Currently, the facilities covered include a transfer station, a closed landfill, and a newly licensed recycling center. Motion: That the BOH Finance Committee recommends approval.	Motion: Dr. Jones Second: Dr. Mussman Action: Pass
Review of Contracts for BOH Information:	Ms. Trabue began reviewing the following contracts, going to BOH for information. Western Governors University - 65x10828 Angela Mullins presented and explained a service contract with Western Governors University (WGU). This agreement, which carries no associated costs or financial obligations for us, is for their Levitt School of Health. WGU, based in Salt Lake City, will collaborate with the Cincinnati Health Department to provide practical experience for students enrolled in their Bachelor of Nursing Program. Initially, this opportunity will be offered to one student. This arrangement will	

	allow the student to learn, observe, and engage with patient care activities in a public health setting. The Community Builders - 65x10829 Dr. Goode presented a service contract with Community Builders that carries no associated cost. This agreement is a temporary occupancy agreement between the Cincinnati Health Department and one of its primary care centers, the Ambrose Clement Health Center. Specifically, it is a temporary leasing agreement for a portion of the Avondale Town Center. The leased area is a segment of the parking spots directly in front of the Ambrose Clement Health Center and is needed for the annual fall event we have held for the last three years. The temporary occupancy is scheduled for November 22nd, from 7 a.m. to 4 p.m., and, as stated, there is no financial cost affiliated with this contract.	
Financial Update	Mr. Menkhaus provided an overview of the financial statement for the period ending in October 2025. ○ Total Revenue: Revenue at the end of October was \$20,235,587.06. Which is a 16.63% increase from October of 2024. Expenses as of October 2025 totaled \$21,040,148.92 which is a 9.39% increase from October 2024. Total net loss after the capital revenue transfer was \$647,561.86. Total Expenses: ○ 7100-Personnel increased by 6.00%. 7500-Fringes saw an increase of 4.16%. The increase is attributed to the increase in the employer contribution retirement rate (this increased from 19.79% to 23.83%). This is also attributable to the 5% COLA all AFSCME employees received at the end of September. AFSCME also received a one-time payment of \$1,500. This one-time payment totaled \$415,500 for the Health Department. ○ 7200- Contractual Services saw an increase of 12.16% (25.59% decrease in the prior month), and 7300- Materials & Supplies increased by 20.43% (11.3% decrease in the prior month). The differences are due to the timing of invoices paid. In FY26 we paid Cross Country Staffing \$9,760.10 as of October, yet in FY25 we paid Cross Country Staffing \$141,700.37 as of October. In FY26 we paid Cardinal Health \$802,309.91 as of October, yet in FY25 we paid Cardinal Health \$693,313.50 as of October. We also expensed \$500,000 to Greater Cincinnati Community Shares in FY26, this was not an expense in FY25. ○ 7400-Fixed Costs increased by 17.66% (5.64% decrease in the prior month). The increase is the timing of invoices paid. In FY26 we paid Ochin \$363,297.09 as of October, yet in FY25 we paid Ochin \$291,924.11 as of October. We also expensed \$50,000 to Hamilton County FY26 that was not expensed in FY25. ○ 7600-Property increased by 370.45% (242.93 increase from the prior month). The increase is due to the renovation at the Price Hill Clinic and the sink hole at the Bobbie Sterne parking lot. Total Available: \$647,561.86	

New Business	No new business this meeting.	
Public Comment	Mrs. Mitchell stated that as of 5 p.m. today, no questions or comments from the public were received.	

Meeting Adjourned: 5:26 pm

Next Meeting: **Tuesday, January 20, 2026, 5 p.m.**

Minutes prepared by Shurdina Mitchell

The meeting can be viewed and is incorporated in the minutes: <https://fb.watch/pD-N3kOzkN/>

DRAFT

Board of Health Finance Committee Roll Calls for November 18, 2025:

	Roll Call	Minutes	Hamilton County Solid Waste Management District 65x10830	Western Governors University 65x10828 – Informational Only	The Community Builders 65x10829 – Informational Only
Mr. Jagdish Bhati	Y	Y	Y	-	-
Dr. Camille Jones	Y	2Y	MY	-	-
Mr. John Kachuba	Y	Y	Y	-	-
Mr. Mark Menkhaus Jr.	Y	Y	Y	-	-
Dr. Grant Mussman	Y	Y	2Y	-	-
Ms. Joyce Tate	Y	MY	Y	-	-
Ms. Kiana Trabue	Y	Y	Y	-	-

Y = Yes | N = No | A = Abstain | P = Present | R = Recuse | M = Moved | 2 = Second

Others present: Shurdina Mitchell (Clerk)

Dr. Maryse Amin, Dr. Geneva Goode, Ms. Angela Mullins, Dr. Ashanti Salter, and Mr. Antonio Young

Preparation Date November 10, 2025

CINCINNATI HEALTH DEPARTMENT CONTRACT AND GRANT INFORMATION SHEET

This information must be supplied to the Contract Liaison no less than one week prior to the Board of Health meeting.

Vendor **Hamilton County Solid Waste Management District**

Contract # **65x10830**

Person and Division responsible for administering contract/grant/lease:

Initiator Person & Phone # **Robin Anderson 513-564-1782**

Division Head & Phone # **Antonio Young , 513-357-7202**

Division **Environmental Services**

Type of Contract/Agreement ☐ Accounts Payable ☒ Accounts Receivable

☐ Service Contract (no \$) ☐ Lease

Funding Source ☐ General Fund ☐ Grant Fund ☒ Other Funding

Action Required: ☒ Board Approval ☐ Board Information

CONTRACT DOLLAR AMOUNT

Original Amount **\$72,000**

TERM

Original Term Start Date **01/01/2026** End Date **12/31/2026**

EXECUTIVE SUMMARY

This is a long-standing contract between the Cincinnati Health Department and the Hamilton County Solid Waste District.

The Environmental Waste Unit of the CHD will inspect the Solid Waste Transfer Station, the Class II Composting Facility, the Closed Municipal Solid Waste Landfill, all Registered Scrap Tire Transporters, and Open Dump Complaints; at the frequency stated in the contract. In return for performing these inspections, the HCSWD will pay the CHD \$72,000 total. Billing and payment will be quarterly.

The term will be from January 1, 2026 to December 31, 2026.

DATE: November 18, 2025

TO: City of Cincinnati Board of Health Finance Committee

FROM: Mark Menkhaus, Jr., CFO

SUBJECT: Fiscal Presentation 2026

FINANCIAL STATEMENTS REVIEW FOR THE FISCAL YEAR 2026 – OCTOBER

2026 October Highlights:

- Revenue at the end of October was \$20,235,587.06. Which is a 16.63% increase from October of 2024. Expenses as of October 2025 totaled \$21,040,148.92 which is a 9.39% increase from October 2024. Total net loss after the capital revenue transfer was \$647,561.86.

Year over Year:

- As of October, we had \$55,997.15 in overtime compared to October of 2024's total of \$63,759.74. Neither year as of October had any disaster overtime.
- We received capital revenue transfer for FY26 in the amount of \$157,000. In FY25 we received a total of \$2,187,000.
- 7100-Personnel increased by 6.00%. 7500-Fringes saw an increase of 4.16%. The increase is attributed to the increase in the employer contribution retirement rate (this increased from 19.79% to 23.83%). This is also attributable to the 5% COLA all AFSCME employees received at the end of September. AFSCME also received a one-time payment of \$1,500. This one-time payment totaled \$415,500 for the Health Department.
- 7200- Contractual Services saw an increase of 12.16% (25.59% decrease in the prior month), and 7300- Materials & Supplies increased by 20.43% (11.3% decrease in the prior month). The differences are due to the timing of invoices paid. In FY26 we paid Cross Country Staffing \$9,760.10 as of October, yet in FY25 we paid Cross Country Staffing \$141,700.37 as of October. In FY26 we paid Cardinal Health \$802,309.91 as of October, yet in FY25 we paid Cardinal Health \$693,313.50 as of October. We also expensed \$500,000 to Greater Cincinnati Community Shares in FY26, this was not an expense in FY25.
- 7400-Fixed Costs increased by 17.66% (5.64% decrease in the prior month). The increase is the timing of invoices paid. In FY26 we paid Ochin \$363,297.09 as of October, yet in FY25 we paid Ochin \$291,924.11 as of October. We also expensed \$50,000 to Hamilton County FY26 that was not expensed in FY25.
- 7600-Property increased by 370.45% (242.93 increase from the prior month). The increase is due to the renovation at the Price Hill Clinic and the sink hole at the Bobbie Sterne parking lot.

Cincinnati Board of Health Financial Statement for the period of October

	FY26 Actual	FY25 Actual	Variance
Revenue			
8236-Pools/Spa	\$3,151.25	\$1,249.50	152.20%
8237-Household Sewage System	\$1,365.00	\$1,285.00	6.23%
8239-Tatto/ Body, Environmental Waste License Fee	\$2,700.00	\$450.00	500.00%
8241-Food Service (Mobile-Temporary)	\$29,530.00	\$54,014.44	-45.33%
8242-Vending Machine Licenses	\$55.56	\$13.44	313.39%
8244-Food Establishments	\$47,291.25	\$67,496.75	-29.94%
8249-Food, NOC	\$36,087.75	\$21,356.75	68.98%
8432-Vending Machine Proceeds	\$0.00	\$0.00	0.00%
8536-Grants\State	\$744,591.80	\$208,318.77	257.43%
8556-Grants\Federal	\$2,455,286.84	\$2,808,933.45	-12.59%
8563-Bd of Ed Svc (School Nurses Sal.)	\$304,330.12	\$831,358.34	-63.39%
8564-Ham Co Service	\$80,032.51	\$89,885.27	-10.96%
8571-Specific Purpose\Private Org.	\$6,000.00	\$172,502.85	-96.52%
8617-Non-Department Fringe Benefit Reimbursement	\$451.39	\$0.00	0.00%
8618-Overhead Charges Indirect Costs	\$60,700.00	\$61,340.00	-1.04%
8731-Birth & Death Certificates	\$203,331.82	\$188,121.52	8.09%
8732-Vital Stats - Other	\$2,775.04	\$3,145.89	-11.79%
8733-Self-Pay Patient	\$361,528.66	\$304,602.00	18.69%
8734-Medicare	\$2,096,240.27	\$1,855,790.04	12.96%
8736-Medicaid	\$2,498,480.73	\$1,458,680.61	71.28%
8737-Private Pay Insurance	\$443,724.68	\$406,367.88	9.19%
8738-Medicaid Managed Care	\$3,546,093.43	\$2,138,872.96	65.79%
8739-Misc. (Medical rec.\smoke free inv.)	\$378,878.07	\$674,975.26	-43.87%
8784-Private Lot Litter & Weed	\$0.00	\$0.00	0.00%
8811-Unclaimed Remains	\$1,145.00	\$0.00	0.00%
8914-Bond/Note Proceeds	\$0.00	\$0.00	0.00%
8917-Deferred Sewer Assessment Collections	\$0.00	\$226.60	-100.00%
8932-Prior Year Reimbursement	\$5,076.82	\$185,076.65	-97.26%
% That is attributable from 416	\$6,926,739.07	\$5,815,998.31	19.10%
Total Revenue	\$20,235,587.06	\$17,350,062.28	16.63%
Expenses			
71-Personnel	\$10,378,251.36	\$9,790,986.66	6.00%
72-Contractual	\$3,191,556.11	\$2,845,461.16	12.16%
73-Material	\$1,659,869.51	\$1,378,267.92	20.43%
74-Fixed Cost	\$840,395.50	\$714,261.07	17.66%
75-Fringes	\$4,612,601.13	\$4,428,574.74	4.16%
76-Property	\$357,475.31	\$75,985.46	370.45%
Total Expenses	\$21,040,148.92	\$19,233,537.01	9.39%
Net Gain (Losses)	(\$804,561.86)	(\$1,883,474.73)	57.28%
8936-Transfer	\$157,000.00	\$2,187,000.00	
Total Available	(\$647,561.86)	\$303,525.27	-313.35%

DATE: November 25, 2025,

TO: Cincinnati Health Department Board of Health

FROM: Kim Wright, Supervising Epidemiologist Communicable Disease Prevention and Control - CHES

SUBJECT: December Communicable Disease Report

Legionnaires Outbreak Investigation

CHD continues to investigate an outbreak of Legionnaires' Disease at a local hospital. On October 9th CHD was notified by the Ohio Department of Health (ODH) of a presumptive healthcare-associated LD case who developed symptoms while hospitalized at a local hospital. Recommendations were made the same day, requesting the facility take immediate actions to prevent additional exposures. Two more possible healthcare-associated cases of LD were reported to CHD October 24th and November 5th, having exposures at the same hospital. CHD has participated in several Teams meetings with the facility and ODH's Bureau of Infectious Disease (BID) and Bureau of Environmental Health and Radiation Protection. Centers for Disease Control (CDC) legionellosis experts also attended one meeting and directly answered facility questions and concerns with the recommendations. CHD Environmental Health and Communicable Disease staff conducted a joint on site review of the preventative measures being taken at the hospital on Wednesday, November 19th. The facility is required to continue mitigation efforts until two rounds of water testing have resulted in no legionella detected, using the approved water sampling plan. The first round of testing results is pending at the time of this report.

CHD also continues to work with the long-term care facility that had a presumptive healthcare-associated LD case in August, as they continue remediation efforts. No new cases have been reported to date.

One Health Anti-Microbial Resistance (AMR) Collaboration in Cincinnati

CHD held the 3rd Greater Cincinnati Area One Health Steering Committee meeting on Tuesday, November 18, 2025. Representatives from the local Environmental Protection Agency and Kroger's Little Clinic spoke about current environmental anti-microbial resistance projects and antibiotic stewardship quality improvement efforts. The next meeting will be held on Tuesday, January 13, 2026. Human, animal, agricultural, and environmental health professionals are invited to attend.

ODH also recently announced quarterly Ohio One Health meetings, and invited interested parties to [sign up](#) to receive invitations.

Respiratory Activity as of 11/25/2025

- Nationally, respiratory activity data was last updated on November 21, 2025 on the [CDC website](#):

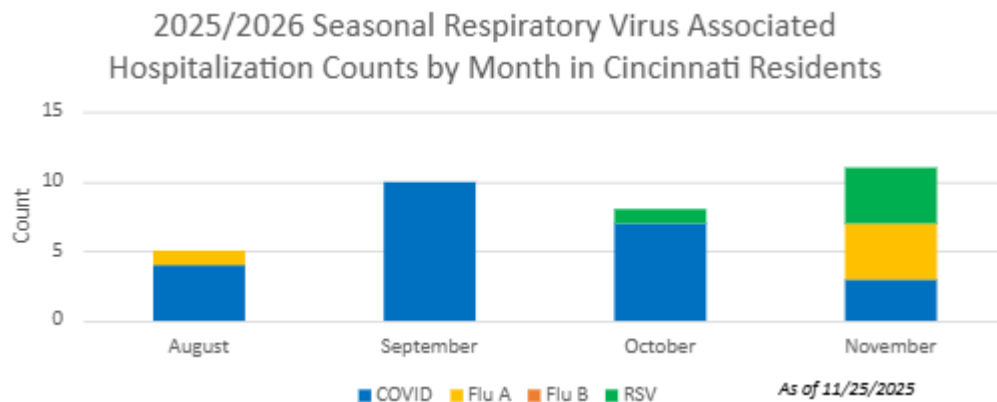
- *The amount of acute respiratory illness causing people to seek health care is low.*
- *RSV activity in many Southeastern and Southern states is increasing.*
- *Nationally, COVID-19 activity is low.*
- *Seasonal influenza activity is low nationally but increasing.*
- *Wastewater activity level for COVID-19, flu and RSV is low or very low.*
- Ohio influenza and RSV activity are trending up.
- CDC respiratory vaccine recommendations can be found [here](#).
- The ODH is reporting statewide respiratory activity through 11/8/2025 on its [dashboard](#):
 - Weekly RSV hospitalizations doubled from 14 to 28 week ending 11/8/2025.
 - 42 Influenza hospitalization were reported week ending 11/8/2025, up from 22 reported the week prior.
 - 155 COVID-19 hospitalizations were reported, up from 142 reported the week prior.

Wastewater Viral Activity Levels Updated 11/24/2025 in Ohio.

Respiratory Virus	US	Ohio	Greater Cincinnati	
			Mill Creek	Little Miami
COVID-19	Low	Moderate	Moderate	Moderate
Influenza	Low	Low	Not Detected	Low
RSV	Very Low	Low	Not Detected	Low

Sources: [NWSS Wastewater Monitoring in the U.S. | National Wastewater Surveillance System | CDC](#), [Monitoring Data | Ohio Department of Health](#)

- CHD began receiving more respiratory hospitalizations of Cincinnati residents via CliniSynch reporting in November. As of 11/25/2025 we have received the following for the month of November:
 - 3 (10 reported last month) COVID-19 – ages 69 to 95 years
 - 4 (0) Influenza – ages 42 to 89
 - 4 (1) RSV - ages 3 months to 3 years
 - CHD hospitalizations received as of 11/25/2025 by month below (data is preliminary and subject to change)



Communicable Disease Investigations in October

CHD investigated 75 (89) communicable disease reports in October 2025, including 12 new reports of *Candida auris* or Carbapenamase-producing organisms (CPO) infections, 8 new reports of pertussis, 5 tickborne disease reports, and 1 mosquito borne disease report. You can find the reports meeting confirmed and probable case definitions included in the October Monthly Infectious Disease Surveillance Summary in the board's packet. This data is also updated each month on the Communicable Disease Dashboard that is located on the website: [Communicable Disease Unit - Health](#).

Outbreak Response

CHD's Communicable Disease Control and Prevention Unit investigated 1 new outbreak (OB) in October:

- 1 Legionnaires' Disease outbreak in healthcare setting

Date: December 2, 2025

To: Board of Health

From: Grand Mussman, MD, Health Commissioner

Subject: Health Commissioner's Report, Reflects October 2025

WIC Updates October 2025

1. The WIC caseload for October was 15,587, which is a 0.5% decrease. We believe the government shutdown may have kept families from keeping their appointments due to misinformation. We were fully open for service.
2. October Breastfeeding:
 - a. Initiation rate- 65.10%
 - b. Breastfeeding at 6 months- 38.76%
 - c. Breastfeeding at 12 months- 35.19%
 - d. The WIC Lactation Center is open for walk-in appointments daily. WIC offers virtual and in-person breastfeeding classes monthly including a Spanish virtual class. The attendance for both options is increasing.
3. Breast pump issuance data for October 2025 is not available yet. We still offer hospital grade loaner, multi-user loaner, single user, and hand pumps as well as Haakaa milk collectors to eligible participants.

Community Health and Environmental Services (CHES) Updates for CHD BOH Meeting 12.2.2025

Community Health and Environmental Services (CHES) updates:

- The Cincinnati Health Department's Lead Program Housing and Urban Development Lead Remediation Grant was completed in November 2025. In partnership with many city departments and local partners, we were able to remediate 172 homes in the City of Cincinnati, helping 274 children live in lead safe housing.
- Cincinnati Health Department is continuing the partnership with The Health Collaborative to conduct the Cardiovascular Collaborative with City of Cincinnati Leveraged Support Funding related to identifying next steps aimed at increasing life expectancy with cardiovascular disease.
- Cincinnati Health Department partnered with the City Manager's Office to launch a medical debt relief project in response to Mayor Pureval's Financial Freedom Blueprint. With the launch, thus far \$219,849,397.57 in debt has been relieved for 107,546 individuals.
- Cincinnati Health Department continues to meet with the Cincy CHIP action teams on the five priorities set for the next three years. 1) Access to Care, 2) Mental and Behavioral Health, 3) Nutrition and Food Access, 4) Infant Vitality, 5) Housing. More information in the Accreditation section.
- Alternative Response to Crisis (ARC) pilot diverting low acuity 911 calls to a behavioral health and EMT team is continuing in the Cincinnati community, more information can be found with the link below:

[Alternative Response to Crisis \(cincinnati-oh.gov\)](https://www.cincinnati-oh.gov/health/alternative-response-to-crisis/)

Epidemiology

Epidemiology Data Briefs and Educational Guides:

Data Briefs and Educational Guides can be found using the website below.

<https://www.cincinnati-oh.gov/health/community-health-data/epidemiology-data-briefs/>

The Emergency of Antimicrobial Resistance in Cincinnati (2017-2022)

<C:\Users\KIMBER~1\WRI\AppData\Local\Temp\ms0A228.tmp> (cincinnati-oh.gov)

2023 Annual Lead Report:

[2023-LEAD-ANNUAL-REPORT-FINAL-\(2\).pdf](#)

Epidemiologic Infant data:
These numbers are provisional for 2024-2025:

Deaths for 2020:

City 2020 = 44
County (minus the city) 2020 = 33
Total Hamilton County 2020 = 77

The finalized number of births for 2020 (births extracted from Ohio Resident live births database (by residence city/county) as of 9.20.22):

City of Cincinnati = 4,220
Hamilton County births outside of the City limits = 6,110
Hamilton County inclusive of the City = 10,330

The finalized infant mortality rate for 2020 based on our current numbers:

City of Cincinnati IMR = 10.4 per 1,000 live births
Hamilton County outside the City limits = 5.4 per 1,000 live births
Hamilton County IMR = 7.5 per 1,000 live births (inclusive of the city numbers)

Provisional deaths for 2021:

City 2021 = 41
County (minus the city) 2021 = 24
Total Hamilton County 2021 = 65

The provisional number of births for 2021 (births extracted from Ohio Resident live births database (by residence city/county) as of 2.9.23):

City of Cincinnati = 4,111
Hamilton County births outside of the City limits = 6,154
Hamilton County inclusive of the City = 10,265

The provisional infant mortality rate for 2021 based on our current numbers:

City of Cincinnati IMR = 10.0 per 1,000 live births
Hamilton County outside the City limits = 3.9 per 1,000 live births
Hamilton County IMR = 6.3 per 1,000 live births (inclusive of the city numbers)

Provisional deaths for 2022:

City 2022 = 47
County (minus the city) 2022 = 42
Total Hamilton County 2022 = 89*
*three deaths OOH excluded

The provisional number of births for 2022 (births extracted from Ohio Resident live births database (by residence city/county) as of 2.28.24):

City of Cincinnati = 4,155
Hamilton County births outside of the City limits = 6,034
Hamilton County inclusive of the City = 10,189

The provisional infant mortality rate for 2022 based on our current numbers:

City of Cincinnati IMR = 11.3 per 1,000 live births
Hamilton County outside the City limits = 7.0 per 1,000 live births

Hamilton County IMR = 8.7 per 1,000 live births (inclusive of the city numbers)

Provisional deaths for 2023:

City 2023 = 29
County (minus the city) 2023 = 29
Total Hamilton County 2023 = 58

The provisional number of births for 2023 (births extracted from state database (by residence city/county) as of 10.28.24):

City of Cincinnati = 4,122
Hamilton County births outside of the City limits = 5,912
Hamilton County inclusive of the City = 10,034

The provisional infant mortality rate for 2023 based on our current numbers:

City of Cincinnati IMR = 7.04 per 1,000 live births
Hamilton County outside the City limits = 4.91 per 1,000 live births
Hamilton County IMR = 5.78 per 1,000 live births (inclusive of the city numbers)

Provisional deaths for 2024:

City 2024 = 33
County (minus the city) 2024 = 35
Total Hamilton County 2024 = 68

The provisional number of births for 2024 (births extracted from state database (by residence city/county) as of April 2025):

City of Cincinnati = 4,099
Hamilton County births outside of the City limits = 5,894
Hamilton County inclusive of the City = 9,993

The provisional infant mortality rate for 2024 based on our current numbers:

City of Cincinnati IMR = 8.05 per 1,000 live births
Hamilton County outside the City limits = 5.94 per 1,000 live births
Hamilton County IMR = 6.80 per 1,000 live births (inclusive of the city numbers)

Provisional deaths for 2025:

City 2025 = 40
County (minus the city) 2025 = 29
Total Hamilton County 2025 = 69

The provisional number of births for 2025 (births extracted from state database (by residence city/county) as of 11.21.25):

City of Cincinnati = 3,413
Hamilton County births outside of the City limits = 4,961
Hamilton County inclusive of the City = 8,374

The provisional infant mortality rate for 2025 based on our current numbers:

City of Cincinnati IMR = 11.72 per 1,000 live births
Hamilton County outside the City limits = 5.85 per 1,000 live births
Hamilton County IMR = 8.24 per 1,000 live births (inclusive of the city numbers)

CCPC UPDATE

Figure 1. Number of Completed Patient Visits to All CCPC Community Health Center Sites

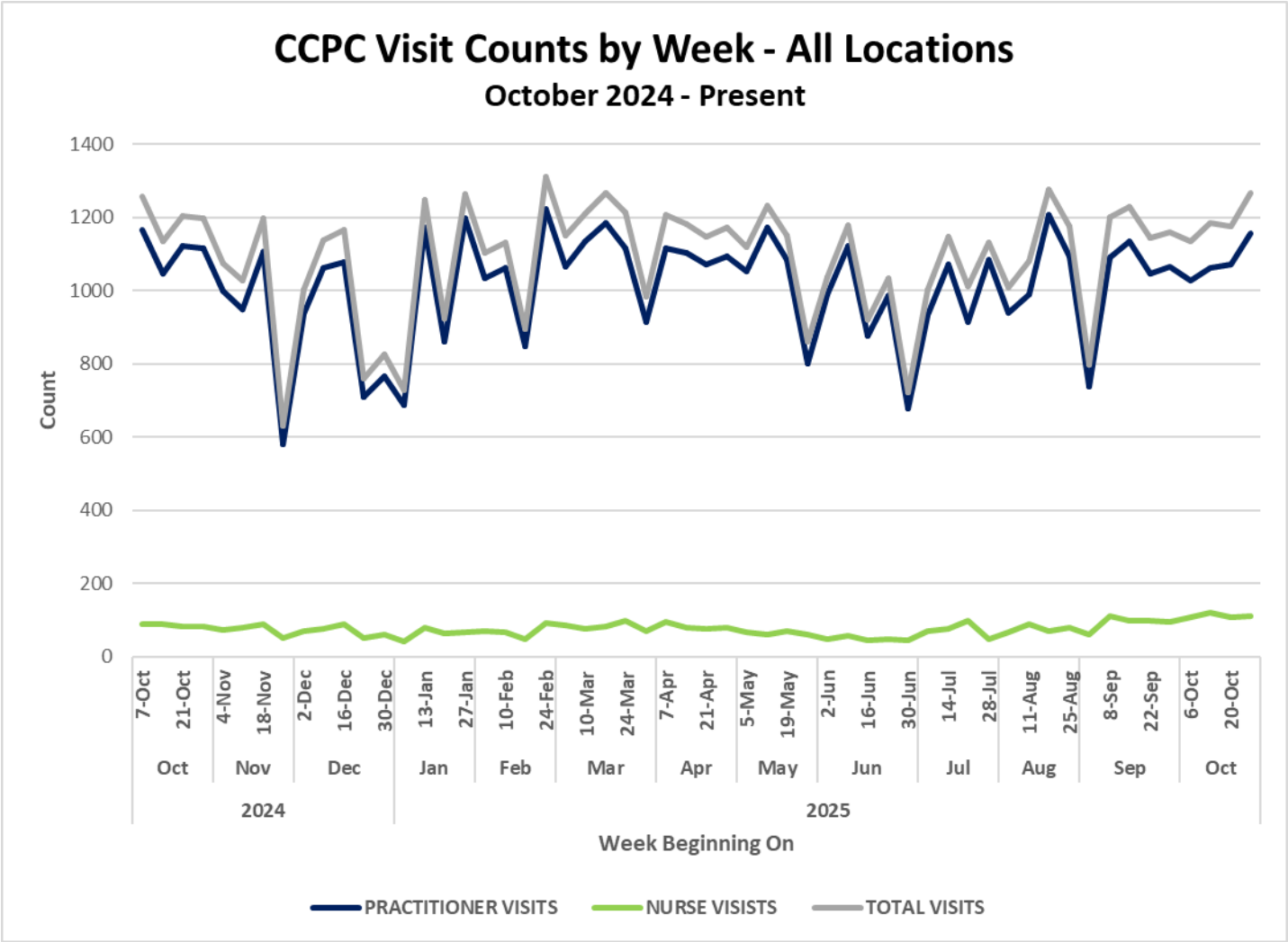


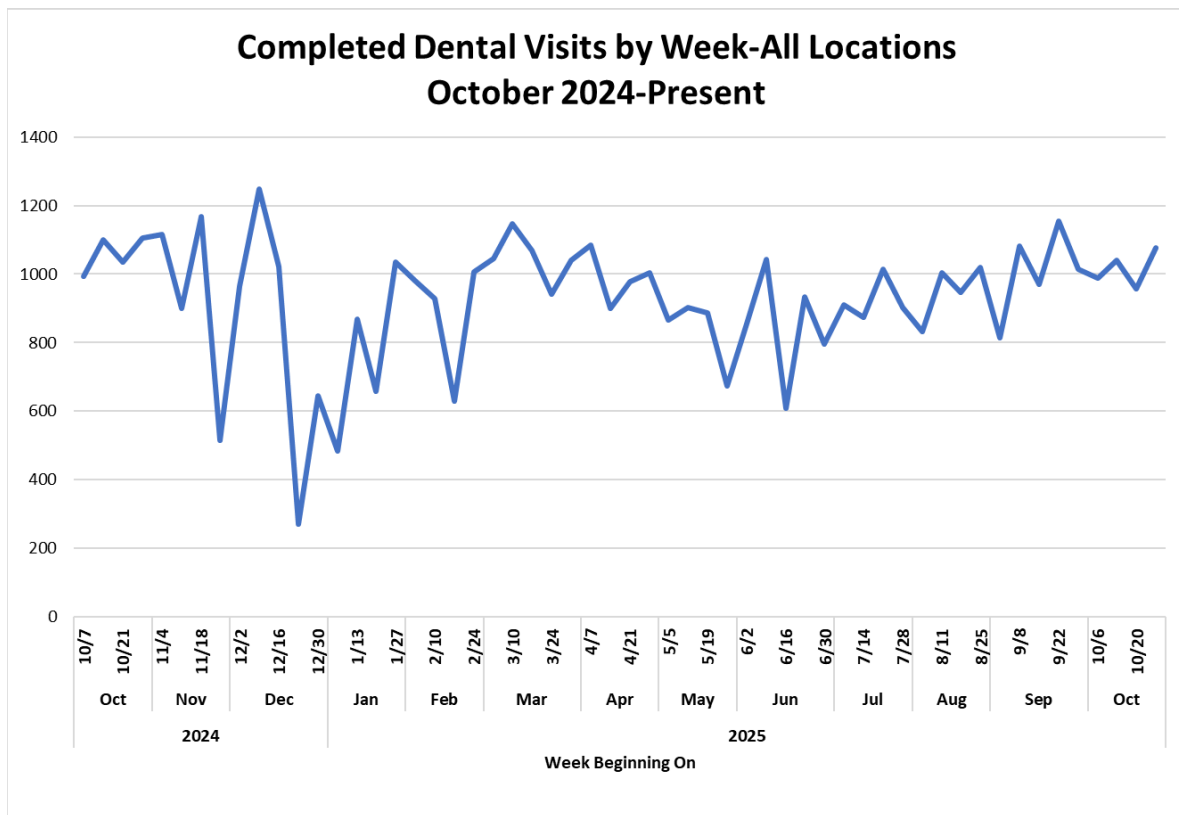
Table 1. Number of Completed Patient Visits by Location for October 2025 and FYTD

CCPC Community Health Centers	10/6	10/13	10/20	10/27	Oct 2025 Total	Oct 2024 Total	2025 FYTD Total	2024 FYTD Total
VISITS	1027	1064	1071	1158	4452	3698	18312	17559
AMBROSE CLEMENT	102	96	122	114	448	518	1707	2097
AMBROSE CLEMENT BH	34	23	21	29	121	137	511	535
BRAXTON CANN	81	90	93	79	393	322	1453	1665
BRAXTON CANN BH	3	4	1	4	0	0	59	0
ELM ST. BH	7	7	2	5	56	48	127	219
ELM ST.	164	154	165	202	719	488	3234	2827
MILLVALE	140	156	128	163	664	394	2320	2167
MILLVALE BH	10	12	13	6	48	16	147	160
NORTHSIDE	176	172	188	157	711	603	3041	2826
NORTHSIDE BH	23	23	21	20	11	9	366	39
PRICE HILL	250	290	301	344	1147	1046	4782	4507
PRICE HILL BH	37	37	16	35	134	117	565	517
NEW PATIENTS	51	48	71	67	237	309	1010	1160
AMBROSE CLEMENT	5	4	6	8	23	40	118	212
AMBROSE CLEMENT BH	0	0	1	0	1	0	2	7
BRAXTON CANN	3	8	8	6	25	42	93	136
BRAXTON CANN BH	0	0	0	0	0	0	0	0
ELM ST. BH	0	0	0	0	0	0	1	3
ELM ST.	15	9	13	14	51	39	199	145
MILLVALE	8	7	7	9	31	68	117	164
MILLVALE BH	0	0	0	0	0	0	0	0
NORTHSIDE	11	9	17	12	49	51	195	200
NORTHSIDE BH	0	0	1	0	1	0	4	0
PRICE HILL	9	11	18	18	56	67	278	289
PRICE HILL BH	0	0	0	0	0	2	3	4

Table 2. Number of Pharmacy Fills for September 2025 and FYTD

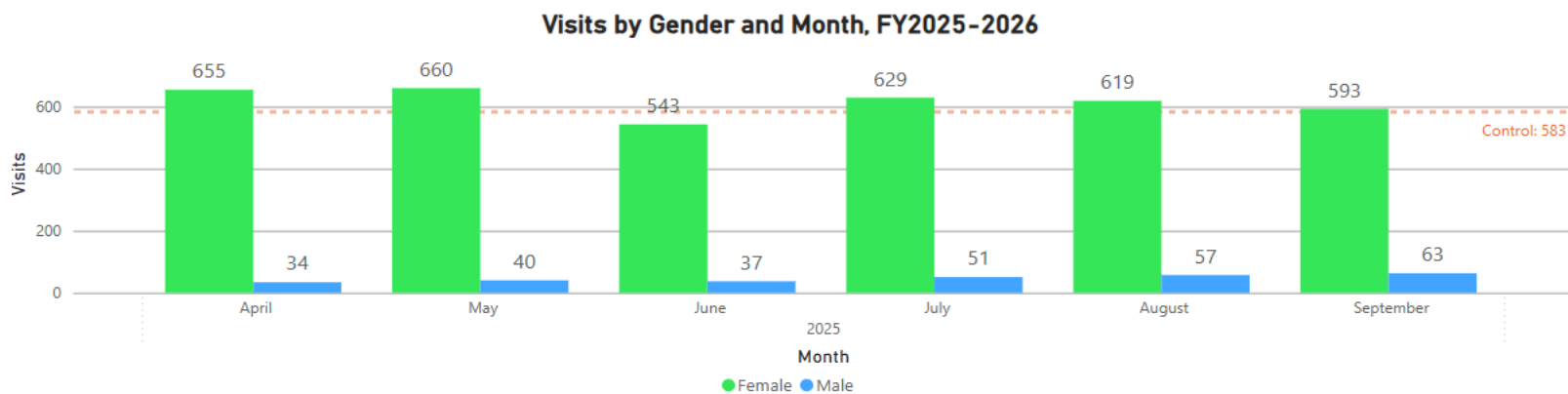
CCPC PHARMACY LOCATION	10/6	10/13	10/20	10/27	Oct 2025 Total	Oct 2024 Total	2025 FYTD Total	2024 FYTD Total
NUMBER OF FILLS	1931	2317	2321	2399	8968	9072	39699	38111
AMBROSE CLEMENT	277	350	379	325	1157	1352	5830	6026
BRAXTON CANN	221	262	218	243	1020	1032	4176	4940
ELM ST.	323	350	375	407	1759	1745	6986	7179
MILLVALE	314	378	380	366	1391	1472	5925	5747
NORTHSIDE	242	375	345	312	1387	1141	5773	5045
PRICE HILL	554	602	624	746	2360	2330	11009	9174

Figure 2. Number of Completed CCPC Dental Visits for All Locations



Reproductive Health and Wellness Program (RHWP) Data Report

Figure 1a. City of Cincinnati Primary Care Health Center Reproductive Health Visits by Gender and Month, Fiscal Year 2025 – 2026



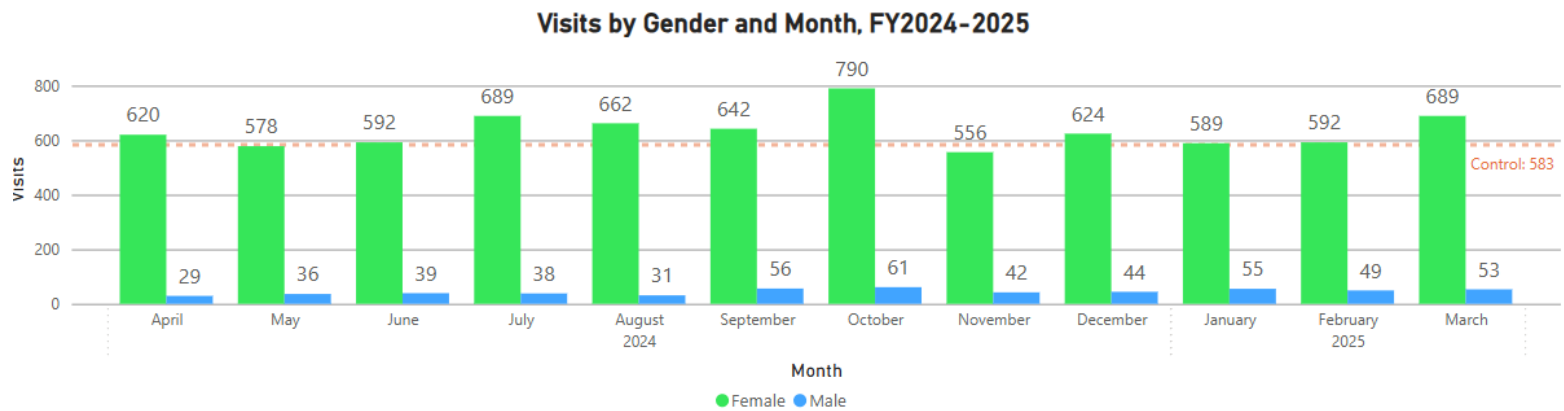


Figure 1b. City of Cincinnati Primary Care Health Center Reproductive Health Visits by Gender and Month, Fiscal Year 2024 – 2025

FY24/25 Visits with Men: 533 patients

FY24/25 Visits with Women: 7623

patients

FY24/25 Visits Combined (men/women): 8156

patients

FY24/25 Control (Expected) Visits: 7000 patients

FY24/25 Visits as % of Control Total: 116.5%

Fiscal Year 2025 – 2026

FY25/26 Visits with Men: 282 patients

FY25/26 Visits with Women: 3699

patients

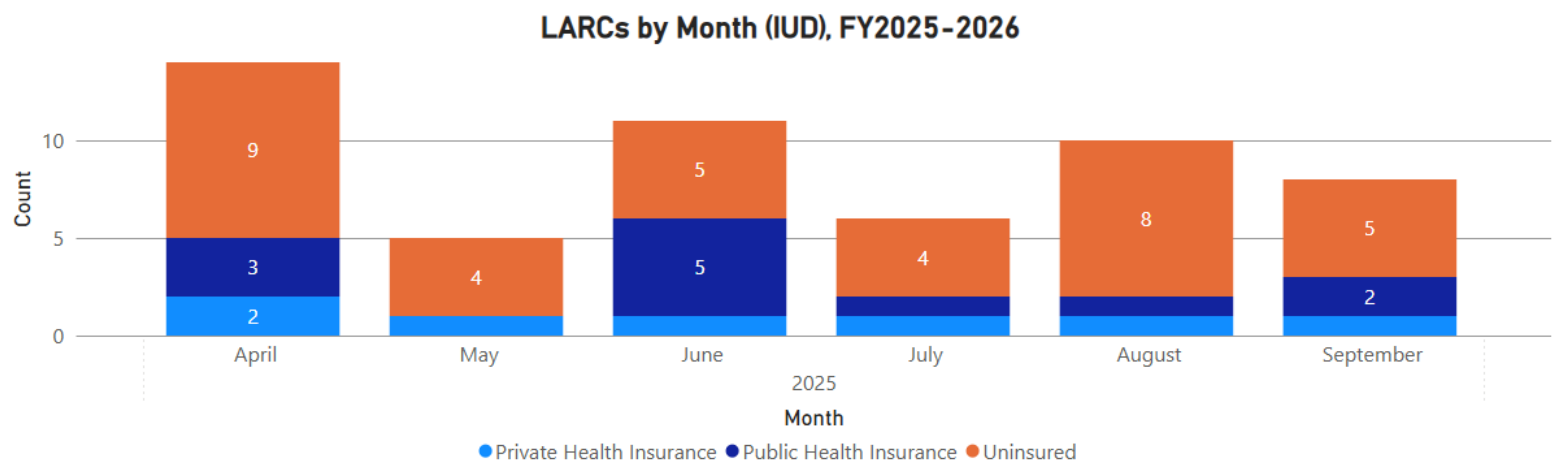
FY25/26 Visits Combined (men/women): 3981

patients

FY25/26 Control (Expected) Visits: 583 patients

FY25/26 Visits as % of Control Total: 105.7%

Figure 2a. Long-acting Reversible Contraception (LARC) (Intrauterine Devices) provision by Month and Insurance Type for patients



seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2025 – 2026

Figure 2b. Long-acting Reversible Contraception (LARC) (Intrauterine Devices) provision by Month and Insurance Type for patients seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2024 – 2025

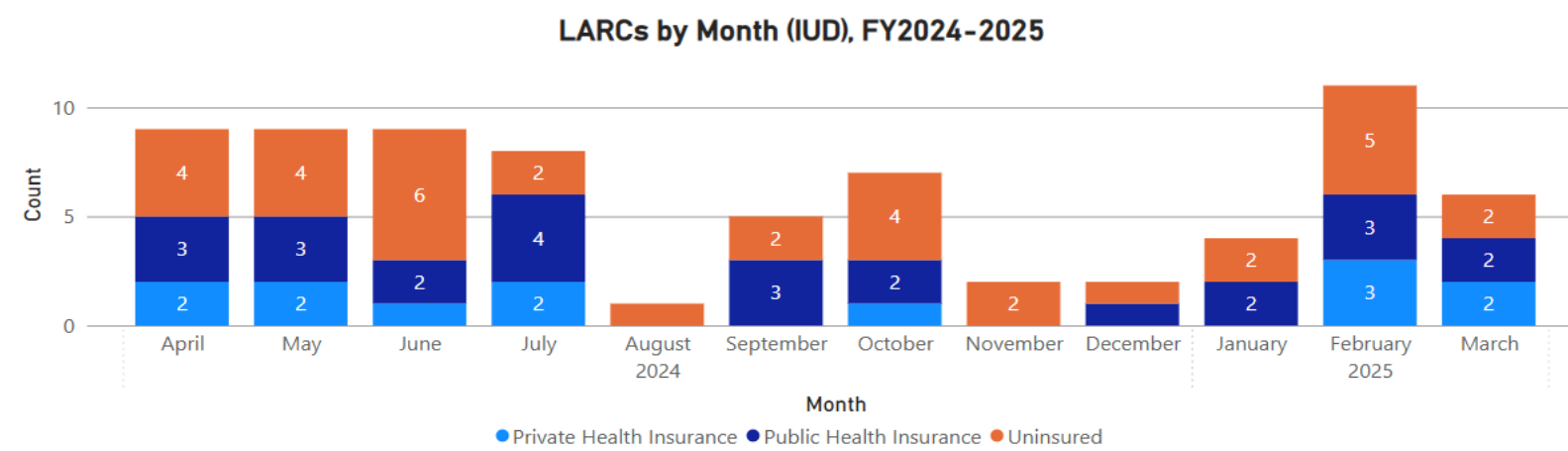


Figure 3a. Long-acting Reversible Contraception (LARC) (Implants) provision by Month and Insurance Type for patients seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2025 – 2026

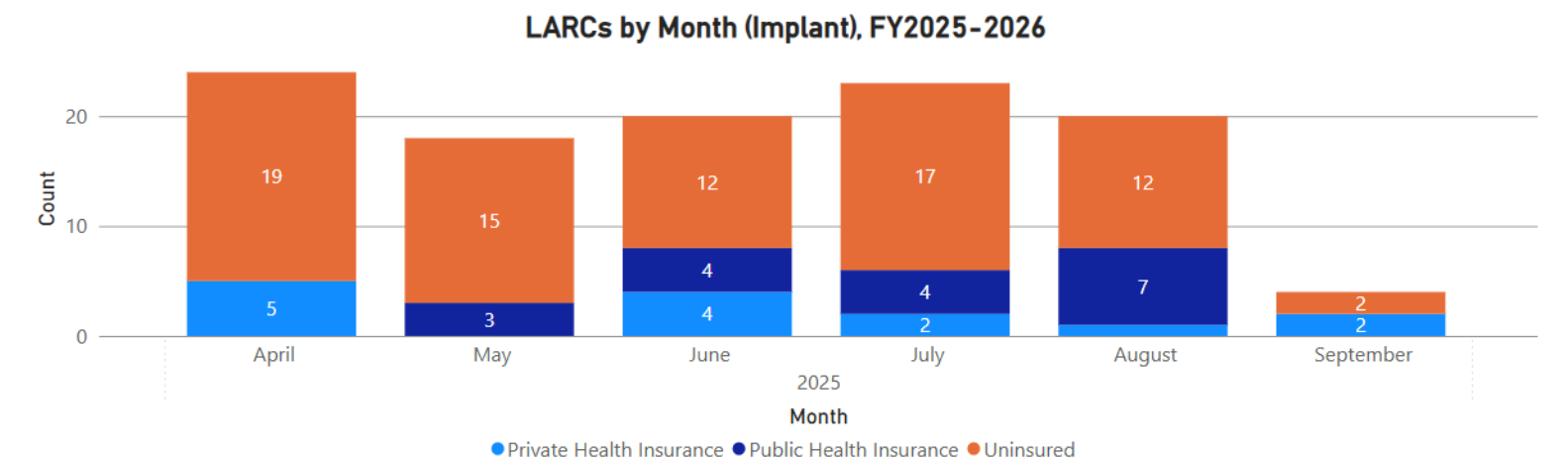
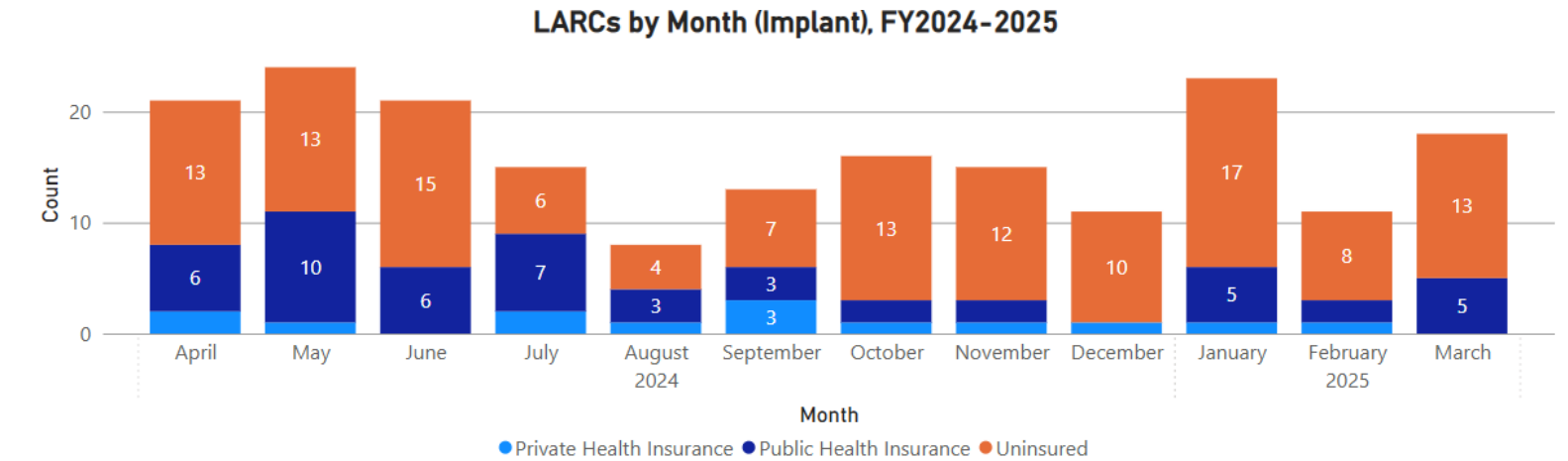


Figure 3b. Long-acting Reversible Contraception (LARC) (Implants) provision by Month and Insurance Type for patients seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2024 – 2025



seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2024 - 2025

Table 1. Selected Demographic Characteristics of Unduplicated RHWP Patients, September 2025

	Female	% in col.	Male	% in col.	Total	% in col.
Race						
AI/AN	8	1.35%	0	0.00%	8	1.22%
Asian	14	12.36%	0	0.00%	14	2.13%
Black	269	45.36%	50	79.37%	319	48.63%
PI/HN	9	1.52%	1	1.59%	10	1.52%
Unknown	102	17.20%	3	4.76%	105	16.01%
White	191	32.21%	9	14.29%	200	30.49%
Ethnicity						
Hispanic	235	39.63%	4	6.35%	239	36.43%
Non-Hispanic	358	60.37%	59	93.65%	417	63.57%
Income						
<=100% FPL	514	86.68%	46	73.02%	560	85.37%
101-249% FPL	69	11.64%	10	15.87%	79	12.07%
>=250% FPL	10	1.69%	7	11.11%	17	2.59%
Insurance						
Private	63	10.62%	8	12.70%	71	10.82%
Public	216	36.42%	21	33.33%	237	36.13%
Uninsured	314	52.95%	34	53.97%	348	53.05%
Age (years)						
<15	4	0.67%	0	0.00%	4	0.61%
15-49	543	91.57%	48	76.19%	591	90.09%
>50	46	7.76%	15	23.81%	61	9.30%
Limited English						
No	334	56.32%	58	92.06%	392	59.76%
Yes	259	43.68%	5	7.94%	264	40.24%

Table 2. Unduplicated RHWP Patients by CCPC Health Center, September 2025

	Female	% in col.	Male	% in col.	Total	% in col.
Health Center						
Ambrose Clement	97	16.36%	51	80.95%	148	22.56%
Braxton Cann	33	5.56%	0	0.00%	33	5.03%
Bobbie Sterne	100	16.86%	3	4.76%	103	15.70%
Millvale	56	9.44%	1	1.59%	57	8.69%
Northside	103	17.37%	8	12.70%	111	16.92%
Price Hill	204	34.40%	0	0.00%	204	31.10%

* Reproductive health data is based on services as part of the Title X grant provided by our City of Cincinnati Primary Care (CCPC) Health Centers.

Accreditation

PHAB Action Plan Update:

In September 2025, CHD received its Reaccreditation Readiness Assessment Feedback report from the Public Health Accreditation Board (PHAB). The report provided feedback on each of the ten domains and foundational capabilities as outlined in the PHAB Standards and Measures for Reaccreditation, v2022 guide. The feedback was very positive, outlining several areas of strength, such as investigative protocols, community partnerships, and use of evidence-based practices. The CHD domain teams will continue to meet over the next 8-10 months in preparation for our 2026 reaccreditation submission.

The Cincinnati Health Department has completed the 2025-2030 CHD Strategic Plan. The plan was adopted by the board on October 28, 2025. CHD leadership and BOH members will regularly monitor the plan to ensure progress of the stated goals and continue to look for opportunities to improve health outcomes within the city. The CHD Strategic Plan was posted on the CHD website and can be accessed at [CHD Reports & Publications - Health](#)

Cincy CHIP Update:

The Action Teams continue to work towards advancing their initiatives in the community.

The Cincy CHIP focus areas for the upcoming Cincy CHIP cycle are as follows:

- Access to Care

- Behavior and Mental Health
- Infant Vitality
- Nutrition and Food Access
- Housing

Regional CHNA and CHIP Update:

The Regional CHNA lead by The Health Collaborative (THC) was released in February 2025. The Greater Cincinnati Tri-State regional priorities identified are:

- Mental health treatment and prevention
- Homelessness prevention and housing stability
- Heart disease and stroke prevention and treatment

The Greater Cincinnati Tri-State Region 2025-2027 Collective Health Agenda was released July 16, 2025. To access the full report, click the link below:

https://healthcollab.org/wp-content/uploads/2025/07/SWOHio_CollectiveHealthAgenda_Final.pdf

Quality Improvement/ Quality Assurance

The Quality Improvement Steering Committee will hold its end of the year celebration on December 10th from 1-3pm at the B & K auditorium. This event will showcase QI projects conducted over the last two years.

GET VACCINATED GRANT- MONTHLY DATA TABLE 2024-2025										
MONTH	RM 0-18 Years	RC 0-18 Years	IQIP Initial Site visit With office	IQIP 2 M Follow up	IQIP 6 M Follow up	IQIP 12 M Follow up	MOBI	TIES	PERI HEPB NEW CASES	PERI HEPB CLOSED CASES
July	785	872	0	2	2	0	4	1	0	0
August	868	922	0	0	4	0	1	1	2	3
September	950	1261	0	0	5	1	14	14	0	0
October	840	1621	6	0	1	4	3	2	1	0
November	961	1531	4	0	2	4	5	5	1	0
December										
January										
February										
March										
April										
May										
June										
TOTAL										

RM=reminders to families for immunizations now due

RC=recalls to families behind on immunizations

IQIP= Immunization Quality Improvement Process (CDC tool including audit) (2M/6M/12M=follow ups with practices involved in QI process)

MOBI=Maximizing Office Based Immunization education presentation for providers

TIES=Teenage Immunization Education Session -immunization education for providers regarding adolescents

Peri HEPB=Peri-natal Hepatitis

***JULY- MOBI, TIES, (7/17) and IQIP (7/324) required ODH training completed. ..training required PRIOR to initiating MOBI, TIES, IQIP outreach**

September- 41 in person school trainings

October- 56 in person school trainings

November- 17 in person school trainings

Healthy Communities Program – Tiffany White

Live Work Play Cincinnati Coalition A multi-sector coalition that works to improve health outcomes by addressing health-related social needs and social determinants of health at the community level.		
Date of Meeting	Location & Presentations	Next Steps
No August Meeting September 3, 2025	September newsletter	Next meeting is December 3rd, 10:00 AM – 12:00 PM MSD Admin Building NEW meeting frequency: in-person all coalition meetings will be quarterly (March, June, September, and December) on the first Wednesday of each month. Subcommittees will be held virtually each month.
Creating Healthy Communities Grant Implementation of strategies to improve healthy eating and active living in multiple Cincinnati neighborhoods. Strategies include: 1 pedestrian infrastructure strategy in Carthage, 1 food pantry strategy in Hartwell, 1 recreation/playground in Roll Hill/E. Westwood, and 2 Policy, System, and Environmental assessments in the Beekman Corridor.		
# of Meetings	Status	Next Steps
4 See Food Equity and Active Living Sections for more details.	Carthage – Finalizing heritage walk install and traffic calming strategies Hartwell – Placed freezers. Roll Hill – Traffic garden installed 9/11/25; planning kick off event.	Carthage - Finalize installation for heritage walk with DOTE. Work with DOTE for remaining traffic calming strategies. Hartwell – Cincy Freeze & Feed kick scheduled for September 24th Roll Hill – Host kick off event and develop curriculum plan with Roll Hill PE teacher.

Infant Vitality – Malina Harris

DCY- Cribs for Kids Subgrantee The Ohio Department of Health (ODH), Bureau of Maternal, Child and Family Health is partnering with Cribs for Kids® and local organizations throughout Ohio to provide Cribettes® and safe sleep education to eligible families.		
# of families served since last report	Project Partners and Status	3 Next Steps
102 families	Partners: All In Cincinnati, Bethany House Services, Cherished Hearts CPR Family, Community Action Agency, Cradle Cincinnati Connections (CCC), Crossroad Health Center, First Step Home, Greater Cincinnati Behavioral Health Services, Healthcare Access Now (HCAN), Healthy Homes: Block by Block (Community Matters), Healthy Moms & Babies, Helping Young Mothers Mentor, Inc., Home Health/CHD, Interfaith Hospitality Network of Greater Cincinnati (IHNGC), Mercy Health – Perinatal Outreach Program,	Plan: Cribs for Kids and DCY contracts have been approved. Awaiting paperwork to be received to sign. Meeting frequency: ODH TA Meetings are Quarterly. Last meeting 9/3/25 Meetings are Quarterly Next Meeting TBD

	Nurse Family Partnership/ECS-Pathways to Home, Rosemary's Babies Co., Santa Maria Community Service, Sigma Gamma Rho Sorority, Inc. Su Casa Hispanic Center, The Children's Hospital/ECS, The Children's Home of Cincinnati/ECS/Costars, The Christ Hospital, The Community Builders (TCB), TriHealth, The Salvation Army, University of Cincinnati Medical Center (UCMC)/Hoxworth/Women's Center, WIC, Women's Center of Ohio, TriHealth ----- Status: Active	
Sweet Cheeks Diaper Program		
# distributed since last report	Project Partners and Status	Next Steps
100 diapers have been distributed since the last BOH report.	Partners: Sweet Cheeks Diaper Bank HCAN, Mercy Health, Health Vine, UC Women's Center, Hamilton County OEI, Cincinnati Health Department Home Health, WIC ----- Status: Active	Plan: Families have been referred to other agencies to receive diapers Agency is currently going through restructuring the program, so diaper ordering is currently on pause. Meeting frequency: Last Meeting: 1/11/25 Next Meeting: 1/2026
CAT- The Cincinnati-Hamilton County Community Action Team The mission of the Cincinnati-Hamilton County Community Action Team is to optimize equitable health outcomes for women, infants, children, and families in Cincinnati-Hamilton County through collaboration, education, and action. This group meets monthly.		
# of meetings since last report	Project Partners and Status	Next Steps
3-Last Meeting: 6/26/25	Partners: Hamilton County ----- Status: Active	Plan: Discuss the results of the Maternal & Child Health Survey. The work Group is being reconfigured and will meet on a quarterly basis. Meeting frequency: Quarterly Next Meeting: 9/25/25
OIPP/CIAG- Ohio Injury Prevention Partnership: Child Injury Action Group The function of the Child Injury Action Group (CIAG) is to identify priorities and strategies to reduce child injury in Ohio. The CIAG has identified focus areas to address in their five-year strategic plan including teen driving, traumatic brain injury, safe sleep, youth suicide and child passenger safety.		
# of meeting since last report	Project Partners and Status	Next Steps

5	Partners: Ohio Department of Health Status: Active	Plan: Strategic Plan Update Shared progress on the standardized data presentation the subcommittee members will be able to brand as their own and share within their respected communities. The presentation includes quantitative and qualitative data from multiple reporting sources (OPAS, CFR, etc.), representing all of Ohio. Presented on current work being done in the Infant Vitality Program. Meeting frequency: Quarterly Next Meeting TBD
---	---	--

Program supported projects/ meetings:

8/14/25- Meeting with Buckeye Health Plan
8/14/25-Hamilton County Infant Safe Sleep Work Group
8/14/25- Winton Hills Produce Drive
8/19/25- Tabling event at Mt Airy Elementary School
8/20/25- Hamilton County Safe Sleep Workshop Planning
8/20/25- Cultivating Connections: Building Partnerships to Address Hunger, Nutrition & Health Confirmation
8/22/25- Avondale Respite Center Resource Fair
8/26/25- CIAG Quarterly Meeting
8/27/25- Building Policy, Supporting Families: Advancing Breastfeeding Initiatives Together Webinar
8/28/25- Cradle Cincinnati: Community Partner Meeting
8/28/25- AmeriHealth Stakeholder Engagement Luncheon
8/28/25- Community Action Agency Family Service Meeting
9/9/25- DCY TA Call
9/9/25- Hartwell Freezer Soft Launch
9/10/25- Infant Vitality Program Quarterly Development Training
9/11/25- CIAG – Quarterly Meeting
9/11/25- Winton Hills Produce Drive
9/12/25- JDQ Overview meeting
9/13/25- Social Services Day Event
9/15/25- Caresource Quarterly Engagement Meeting

Food Equity (Healthy Eating)- Jasmine Robinson

Produce Perks- Community Supported Agriculture Distribution (Fruit and Vegetable Program)

Produce Perks and CHD partnered to increase access to healthy fresh fruits and vegetables in the Winton Hills neighborhood. The partnership has distributed over \$50,000 in healthy foods purchased directly from Mustard Seed Farms (a local, Cincinnati small-scale farm) strengthen healthy dietary habits and increase nutritional/cooking knowledge in hundreds of Winton Hills community members.

# of Meetings Since Last BOH Report	Project Partners and Status	Next Steps
1	Produce Perks, Winton Hills Community Church and Council, Mustard Seed Farm, and Last Mile Food Rescue. ----- Status: Active (began 5/15/25-21 families signed up)	Weekly produce distributions to enlisted families and other community members. Meeting frequency: as needed for planning
Cincy Freeze & Feed The Cincinnati Health Department (CHD) Healthy Communities Program will partner with the Cincinnati Recreation Commission (CRC) Hirsch and Millvale locations to implement a pilot community freezer program.		
# of Meetings Since Last BOH Report	Project Partners and Status	Next Steps
1	CRC, La Soupe, CareSource, Food for the Soul, and Hamilton County ReSource ----- Status: Active	Soft launch completed on 9/9/25 and grand opening scheduled for 9/24/25. Programming discussions scheduled with Winton CRC staff for planning of launch. Meetings frequency: standing weekly meetings for contract negotiations, promotion discussions, and general project updates.
Systems to Achieve Food Equity (SAFE) Network a sub-network of All Children Thrive made up of individuals and organizations committed to improving food security in Cincinnati to ensure that all children have the food that they need to grow, develop, learn, and thrive.		
# of Meetings Since Last BOH Report	Project Partners and Status	Next Steps
2	CCHMC, Freestore Foodbank, Hamilton County ReSource, La Soupe, and more. ----- Status: Active	Network planning for food distribution in the City of Cincinnati including non-instructional school day initiatives; communications team discussions' current project funding covers works in Avondale, East and Lower Price Hill (expansion into Roll Hill coming soon) SAFE Summit planning Meeting frequency: 3rd Thursday of every month ----- Stakeholder meeting to report on organizational updates, events, and needs working towards food equity in Cincinnati. Meeting frequency: 1st Thursday of every month
Food Equity Program Newsletter Each month, the Food Equity Coordinator sends a newsletter that includes local food related events such as food/produce distribution sites, pop ups, cooking improv learning sessions and more.		
# of Meetings Since Last BOH Report	Project Partners and Status	Next Steps

0	Newsletter sent to community members and partners by the end of the 2 nd week of each month. Posted on FEC site routinely ----- Status: Active (last sent on 9/12/25 to 253 individuals)	Continue to update newsletter content and layout to meet the reader's needs Meeting frequency: included in monthly program meeting with HCP program manager and health counselor supervisor as well as needed meetings scheduled with SAFE's SSF Communications team for discussion/ review
Department Engagement Champions Engagement Champions play a crucial role in shaping the city's culture. Engagement Champions will be at the forefront of driving meaningful change within the city's engagement practices.		
# of Meetings Since Last BOH Report	Project Partners and Status	Next Steps
0	Meet with other department champions, stay informed on city-wide engagement updates, and share resources with colleagues ----- Status: Active (missed August meeting- next meeting on 9/25/25)	Meeting frequency: standing monthly meetings with full group and additional meetings as needed based on active projects or requests

Program supported projects/ meetings:

8/18/25: CRC: Hartwell Pantry/ Freezer Discussion (CHC funded strategy)
8/19/25: Mt. Airy Back to School Bash
8/21/25: Count the Kicks Ohio Webinar: Empowering Moms, Saving Babies webinar
8/21/25: Avondale Respite Center Ribbon Cutting event
8/22/25: CRC: Millvale freezer cleaning and stock check
8/22/25: CRC: Hartwell pantry cleaning and stock check
8/22/25: CRC: Hirsch freezer cleaning and stock check
8/22/25: Avondale Respite Center Resource Fair
8/25/25: CRC: Hartwell Pantry/ Freezer Discussion (CHC funded strategy)
8/26/25: CPS Curriculum Partners Meet-up
8/28/25: Presentation to Community Action Agency/ CPS Family Service Workers
8/29/25: CRC: Millvale freezer cleaning and stock check
8/29/25: Beekman Corridor Community Garden Discussion with WIN (CHC funded strategy)
8/29/25: CRC: Hartwell pantry cleaning and stock check
8/29/25: CRC: Hirsch freezer cleaning and stock check
9/3/25: Live Work Play Cincinnati Coalition Meeting
9/4/25: Weekly Winton Hills Fruit and Vegetable Distribution (Produce Perks)
9/5/25: CRC: Millvale freezer cleaning and stock check
9/5/25: CRC: Hartwell pantry cleaning and stock check
9/5/25: CRC: Hirsch freezer cleaning and stock check
9/11/25: Weekly Winton Hills Fruit and Vegetable Distribution (Produce Perks)
9/12/25: CRC: Millvale freezer cleaning and stock check
9/12/25: CRC: Hartwell pantry cleaning and stock check
9/12/25: CRC: Hirsch freezer cleaning and stock check
9/13/25: Social Services Day-City of Cincinnati event

9/15/25: CRC: Hartwell Pantry/ Freezer Discussion (CHC funded strategy)
9/15/25: Beekman Corridor Community Garden Discussion with Lick Run (CHC funded strategy)
9/16/25: Cincinnati State - Student Health Fair

Tobacco Free Living (TFL) – Courtney Calvin

Project/ Meeting Title: Youth Vape Presentation Educate Cincinnati youth on the dangers of e-cig use.		
Date and # of Students	Project Partners and Status	Next Steps
Total Amount of Students Educated: 27 97 Students TOTAL Total Amount of Attendees at Community Events 1 (50 Participants)	Partners: Orion Academy (teachers) Mercy McCauley (Students) Forever Kings back to School Bash	Plan: To present preventative tobacco education for youth. Present the opportunity to take over the vape disposal program. Continue to build a partnership with the senior population in Cincinnati. Presenting information about the harmful effects of tobacco and educate about smoking in homes/apartments

Program supported projects/ meetings:

08/15/25: Forever Kings Back to School Bash Tobacco Table display
08/19/25: Vape Education to Orion Academy School Staff
08/20/25: Vape Education at Mercy McCauley High School
08/25-08/29 National Tobacco Conference in Chicago
09/02/25: Vape Education at Gamble HS
09/03/25: Vape Education at Gamble HS
09/05/25: Vape Education at New Richmond High School

Tobacco 21/Tobacco Retail License (TRL) - Allyn Griffith

Tobacco Retail Licensing/T21 License any retailer in the City of Cincinnati selling tobacco products. Conduct underage buy attempts and issue citations to enforce tobacco 21 laws.		
	Status	Next Steps

	269 - Retailers Licensed 302 - Identified retailers 189 – 2025 TRL Inspections Completed 293 Underage Buy Attempts Completed, 81% Compliance PASSED REHS exam	Plan: - Continue Inspections/Compliance Checks until further notice. - Continue Issuing Citations for Non-licensed Retailers after Education - Hire additional underage buyer(s)
--	---	---

Worksite Wellness & Active Living – Scott Dean

ODH Creating Healthy Communities Grant (Carthage) Supportive pedestrian infrastructure for Carthage. The goals being to increase the proportion of adults and adolescents that walk or bike to get to places and to reduce the proportion of adults, adolescents and children with obesity.		
# of Meeting since last report	Project Partners and Status	Next Steps
10	Partners: Identified 36 partner agencies ----- Status: Active Working with community on neighborhood improvements. Procuring wayfinding signage and traffic calming measures in the near future, so working with community to make selections. Selected an Artist and working on contract.	- Continue pushing usage of the CAGIS Pedestrian Hazard map we created for the community to track issues - Push out completion of Neighborhood Physical Activity survey - Zebra Striping intersection completed - Location and Orientation of Heritage Walk signs finalized and slated for installation in September - Successfully completed the Carthage End of Summer Bash 8/9. Street mural has been installed and worked with over 300 residents. - Additional traffic calming measures to be installed by September - Distributed 10 bicycle helmets to residents and gave bicycle safety education. Meeting frequency: Monthly with additional meetings as needed
Y.E.S on Bike & Pedestrian Safety and ODH Creating Healthy Communities grant The aim of this education series is to increase youth knowledge around the responsibilities of pedestrians, cyclists, and drivers to create a culture of safe transportation in neighborhoods. The goals of the CHC grant are to increase the proportion of adults and adolescents that walk or bike to get to places and to reduce the proportion of adults, adolescents and children with obesity. We also are trying to increase the proportion of community members that engage in aerobic and muscle strengthening activity.		
# of Meeting since last report	Project Partners and Status	Next Steps

5	Partners: Cincinnati Public School (CPS), Tri-State Trails, Green Umbrella: Green Schoolyards Team ----- Status: Active Finalized pilot curriculum and began presentations. Continuing to find partners to present to Working with Roll Hill to establish new Traffic Garden Working on finalizing procurement contracts so Traffic Garden design can proceed	- Continuing work with principal to secure bicycles from Ethel Taylor - Continue work on developing a comprehensive curriculum. - Conducting comprehensive community engagement with students and parents. - Received updated contract proposal from PES which is being reviewed by procurement. - CPS completed prefabrication work on playground surface filling cracks. Meeting frequency: Monthly
---	--	---

Behavioral Health and Recovery Services - Eric Washington

Men's Health – Eric Washington

Project/ Meeting Title: Recovery Ohio Drug Trends		
# of Meetings Since Last BOH Meeting	Project Partners and Status	Next Steps:
1 Meetings	Partners: Recovery Ohio Drug Trends Monthly Meeting Status: Ongoing	Continue to utilize shared information to better serve communities through emerging trends, patterns, insights, and outcomes related to Ohio's drug epidemic. Plan: The meeting was created to provide decision makers across diverse public sectors with information sharing opportunities and actionable intelligence on emerging trends, patterns, insights, and outcomes related to Ohio's drug epidemic. Meeting frequency: Monthly x1
Project/ Meeting Title: Brother You're on My Mind and Youth Mentoring Program		
# of Events Since Last BOH Meeting	Project Partners and Status	Next Steps:
1 Meeting	Partners: Omega Psi Phi – Barbershop Talk Series and Youth Mentoring Status: Ongoing	Monthly safe and supportive space to address topics around: Mental, Spiritual, Physical Health, Chronic Disease, Child Support, Resources Plan: Continue to provide a safe and supportive space for men to meet monthly to have open conversations and to provide mentorship to The Youth Mentorship Program Meeting frequency: Monthly x1
Project/Meeting Title: Harm Reduction Committee		
# of Events Since Last BOH Meeting	Project Partners and Status	Next Steps:
1 Meeting	Partners: Monthly meeting with community partners Status: Ongoing	Monthly meeting with community partners to discuss Harm Reduction efforts Plan: To continue to provide update on Harm Reduction in Hamilton County Meeting frequency: Monthly x1
Project/ Meeting Title: Recovery \Ohio Drug Trends Monthly Meeting		
# of Meetings Since Last Meeting	Project Partners and Status	Next Steps:
		Continue to share and provide updates as needed

	Partners: State of Ohio Partners (200+) Department of Mental Health and Addictive Services: The Stepping Up Initiative is a national initiative targeted at reducing the number of people with mental illnesses in jails. Status: Ongoing	Plan: Monthly Drug Update - The ONIC consists of criminal intelligence analysts and computer forensic specialists providing investigative, analytical, and data management support to local law enforcement agencies and drug task forces throughout Ohio Meeting frequency: Monthly x1
--	---	---

Recovery Services/Community Outreach – Justin Berry

Project/ Meeting Title – Community Outreach Details/ description		
# of ...	Project Partners and Status	Next Steps
2 Meeting and Community Members reached) 53	Partners: GCB, City Gospel, Heroin Coalition Team, CCRC, Step Stone and DeCoach, First Step Home, Treatment Team, CRC Rec Center, Our daily Bread), God Sam's, UC Hospital, 20/20, Brightview, LIT, Status: (Ongoing) Nacarn- 11 kits passed out in community	Plan: Coaching Boys Into Men (CBIM) Training scheduled for November. Meeting frequency: (Monthly and Bi-Monthly) This month, I focused on helping people prepare for the colder months by working to get them situated with safe shelter and resources. I also assisted individuals in entering treatment programs, giving them the support they need to move toward stable housing and long-term employment. By connecting them with both immediate care and opportunities for growth, I aimed to provide a foundation for stability and a better future.

MONTH: (2025)	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Open cases:	84	78	76	68	68	70	64	59	68	59		
3.5-9 µg/dL case mgt & follow-up: *	7&17	12/10	18/12	17/15	25/12	22/12	19/12	14/10	26/12	21/8		
10+ µg/dL case mgt & follow-up:	5&10	3&10	1/10	5/7	6/11	4/13	3/10	2/9	4/8	3/9		
Risk assessments:	5	2	5	0	3	3	2	1	7	3		
Orders issued:	3	1	1	0	3	5	1	0	4	3		
Clearances EBL:	2	1	2	0	1	0	3	0	2	1		
Clearances GRANT:	9	13	10	13	11	4	8	4	0	6		
Owner meetings EBL:	1	0	1	0	1	1	0	2	3	3		
Owner meetings GRANT:	1	1	2	2	2	1	2	2	0	2		
Compliance checks EBL:	38	32	30	28	30	14	17	25	13	10		
Compliance checks GRANT:	3	3	5	4	4	1	6	2	2	3		
Contractor mtgs EBL:	0	0	0	0	0	0	0	1	1	1		
Contractor Meetings GRANT:	0	2	3	1	1	1	0	4	5	1		
Filed for prosecution:	0	0	0	0	0	1	0	0	0	0		
LIRAs:	1	0	1	3	3	0	0	3	2	1		
Grant apps uploaded (ODH & ODD / HUD)	0	0/1	0/3	1/0	0/1	0/3	0/2	0/0	0/0	0/0		
Case Update w/ Lead Clinic:	9	8	7	6	7	8	5	5	7	10		
Affidavit of Fact	0	0	0	0	0	0	0	0	0	0		

Risk Assessment: If a child has a lead level of 10 ug/dL and above, a risk assessment of the property is conducted to determine the source of lead poisoning.

Orders issued: If lead hazards are present on the property, orders are issued to the property owner to ensure compliance.

Clearances: These include soil and dust sample analysis for lead on EBL & HUD grant properties.

Owner Meetings: Meet with owners to discuss compliance with orders; meet with owners to discuss the HUD grant program.

Compliance checks: These are conducted to inspect the licensed lead abatement contractors and workers on the project sites for the EBL as well as the grant program.

Contractor meetings: Meet with the licensed lead abatement contractor at the job site/property to discuss the orders/work specifications for the EBL/HUD grant program.

Filed for prosecution: When non-compliance is achieved, the property owner is referred to the Law Department for enforcement action.

PIRA's: Paint Inspection/Risk Assessment of the house to evaluate lead hazards for lead remediation by the HUD grant.

Case update with Lead Clinic: Collaboration with CCHMC Lead Clinic every Thursday.

Affidavit of Fact (AF): When all resources for compliance are exhausted, the AF is sent to the Auditor's Office to flag properties with lead hazards so new owners are aware of the BOH Lead orders on the property.

October 2025 BOH Report
Emergency Preparedness/Safety

Meetings, Grants, and Employee Safety

Attended Northern Kentucky Cities Readiness Initiative meeting October 1.
Attended City-Wide Safety Task Force Meeting October 8.
Attended the quarterly Local Emergency Planning Committee (LEPC) meeting on October 15.
Attended monthly Emergency Response Coordinator meeting October 16.
Attended the Hamilton County Homeland Security and Emergency Management Agency Community Organizations Active in Disasters (COAD) meeting October 23.
Attended (virtual) the Three Cs Cities Readiness Initiative Grant quarterly meeting October 24.
Attended the TriState Disaster Preparedness Coalition meeting on October 31.

Training, Exercises, and Improvement Plans

Nothing to report.

Response/Preparedness Activities

None to report.

Cincinnati Vital Records and Statistics Program

Monthly Dashboard for October 2025

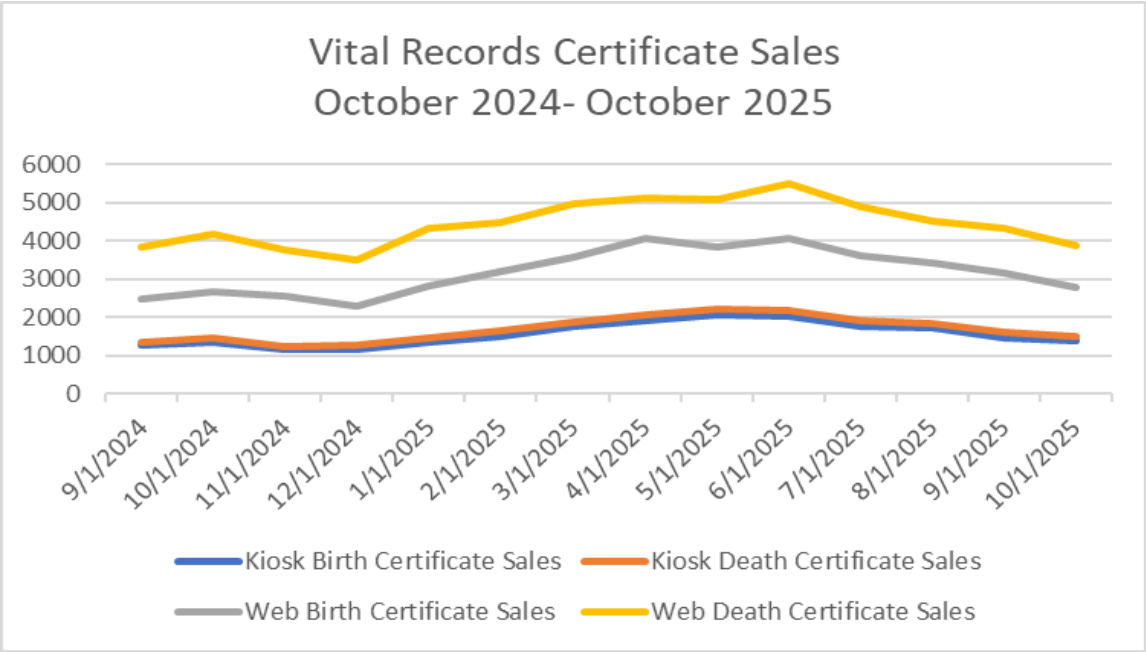
Vital Records received payment for 28 affidavits, where staff assisted customers with birth certificate corrections using the affidavit process.

Vital Records staff assisted 14 families with a paternity affidavit process to add the father to a birth certificate.

Vital Records received payments for 150 permits (burial, cremation, transport, or entombment).

Birth and Death Certificates requested from the kiosk, web system, and mail are shown in the chart that follows.

October 2025	Kiosk	Web	Vitalchek.com	Mail
Birth Certificates	1393	1267	318	-
Death Certificates	108	1112	67	-
Total Payments	\$33,643	\$59,391	\$8,805	-



Monthly Infectious Disease Surveillance Summary^{1,2}, October 2025



Reportable Condition by Category ³	2025 October	2025 Year to Date (YTD)	2024 October	2024 YTD	2024 Rate	Cincinnati 5 Year Average Rate (2020-2024)	Ohio 5 Year Average Rate (2019-2023)
Food- or Waterborne	7	101	12	132	46.92	239.48	284.02
Botulism					-	0.32	0.01
Campylobacteriosis	1	25	4	24	8.36	54.32	91.71
Cryptosporidiosis	1	9		17	6.11	20.89	20.73
Cyclosporiasis		1		1	0.32	1.29	3.68
<i>E. coli</i> , Shiga Toxin-Producing O157:H7		4		7	2.57	19.29	21.71
Giardiasis		6		12	4.50	24.43	16.49
Hepatitis A (<i>also vaccine-preventable</i>)		1			-	1.61	16.82
Hepatitis E				1	0.32	0.64	0.06
Legionellosis - Legionnaires' Disease	1	11	1	7	2.89	19.93	28.18
Listeriosis		3			-	2.25	1.42
Salmonellosis	4	18	2	32	10.93	52.72	59.04
Salmonella Typhi (travel associated)				1	0.32	0.64	0.36
Shigellosis		16	4	20	6.75	29.25	13.48
Vibriosis (not cholera)		5		2	0.64	1.93	2.55
Yersiniosis		2	1	8	3.21	8.04	7.10
Vectorborne		6	1	15	5.46	16.38	34.07
Chikungunya Virus Disease*				1	0.32	0.32	0.15
Dengue				2	0.64	0.96	0.31
Lyme disease		3		5	1.61	6.43	28.52
Malaria*		2	1	7	2.57	7.07	2.74
Spotted Fever Rickettsiosis		1			-	0.96	1.43
Ehrlichiosis-Ehrlichia chaffeensis					-	0.32	0.63
Anaplasmosis-Anaplasma phagocytophilum					0.32	0.32	0.29
Vaccine-Preventable	7	446	18	341	121.18	474.12	323.84
COVID-19-associated hospitalization	3	3			-	-	-
<i>Hemophilus influenzae</i> , invasive disease		4	1	7	2.25	14.46	11.19
Influenza-associated hospitalization		372	1	256	89.68	360.66	279.59
Mumps				1	0.32	1.29	1.20
Pertussis	2	33	13	33	12.54	16.07	20.79
Meningococcal disease – <i>Neisseria meningitidis</i>		2			-	0.32	0.44
<i>S. pneumoniae</i> , invasive (abx susceptible/unknown)		24	2	24	9.00	56.25	-
<i>S. pneumoniae</i> , invasive (abx resistant)	1	8		8	3.21	14.14	-

Varicella (chickenpox)	1	3	1	12	4.18	10.93	10.63
Viral Hepatitis	42	325	43	386	147.86	1266.8	601.08
Hepatitis B, acute (<i>also vaccine-preventable</i>)		2		8	2.57	8.36	5.58
Hepatitis B, chronic, newly identified (<i>also vaccine-preventable</i>)	8	68	10	77	28.61	189.33	81.84
Hepatitis B, perinatal					-	0.32	0.03
Hepatitis C, acute		4		3	0.32	13.18	8.93
Hepatitis C, chronic, newly identified	34	250	33	295	115.40	1050.15	504.70 (combined chronic and perinatal rate)
Hepatitis C, perinatal		1		3	0.96	5.46	
Healthcare Associated Infections (HAIs)⁴	1	58	15	118	45.32	288.34	33.35
Carbapenemase-Producing Organisms (CPO) (includes colonization screenings)		18	4	33	11.25	55.29	26.32
<i>Candida Auris</i> (includes colonization screenings)		40	11	85	34.07	233.05	7.03
Other Conditions	1	54	5	72	1839.93	37132.45	31129.23
Coccidioidomycosis		2		2	0.96	4.82	1.02
Creutzfeldt-Jakob Disease					0.32	0.64	0.96
Meningitis, bacterial (not <i>N. meningitidis</i>)		3	1	11	4.18	14.14	5.76
MPOX		2		3	0.96	10.29	3.57
<i>Staphylococcal aureus</i> - intermediate resistance to vancomycin (VISA)					-	0.96	0.20
Streptococcal, Group A, invasive	1	24	2	28	11.25	71.04	34.40
Streptococcal, Group B, newborn		1		3	0.96	5.14	2.73
Toxic Shock Syndrome (TSS)					-	0.96	0.06
Tuberculosis ²		6	1	10	3.86	18.64	6.49
Typhus Fever					-	0.32	-
Sexually Transmitted Infection²	471	4302	519	4907	1859.87	14579.68	4121.60
Chlamydia infection	283	2759	314	2942	1109.62	8511.81	2465.52
Gonococcal infection	169	1370	161	1472	570.88	4704.96	1083.04
Human Immunodeficiency Virus (HIV)	10	108	13	139	46.93	334.62	344.30
Syphilis - congenital		4		4	1.61	7.71	2.27
Syphilis - early		45		73	28.93	262.62	-
Syphilis - primary		16	4	36	11.89	122.79	67.56 (primary and secondary combined rate)
Syphilis - secondary	1	29	3	50	19.61	194.79	
Syphilis – stage unknown	4	41	10	62	23.79	142.08	158.91 (total syphilis rate)
Syphilis – unknown duration or late	4	110	14	129	46.61	298.30	
TOTAL CONFIRMED AND PROBABLE CASES	529	5292	1784	10189	4066.58	53996.66	36527.13
Outbreaks (Investigation Started)	2025 October	2025 YTD	2024 October	2024 YTD	2024 Rate	Cincinnati 5 Year Average Rate (2020-2024)	
Dermatologic		6	1	6	2.25	7.39	
Gastrointestinal		6	1	4	1.29	6.43	

Respiratory	1	30	4	62	23.79	315.98	
Other		1	2	7	2.25	2.57	
Unknown					-	0.32	
TOTAL OUTBREAKS (INVESTIGATION STARTED)	1	43	8	79	29.57	332.69	

1) Confirmed and probable cases reported by health care providers and laboratories among residents of the City of Cincinnati by date of event (most frequently, the date of event is the date of illness onset).
*Cases acquired through international travel

2) Sexually transmitted infections, human immunodeficiency virus (HIV), and Tuberculosis cases are investigated and reported by the Hamilton County Public Health Department.

3) List includes only reportable conditions for which at least one case was reported in either year; the full list of reportable conditions in Ohio can be found at <https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/infectious-disease-control-manual>

4) Healthcare Associated Infections (HAIs) are infections that patients get while or soon after receiving health care. More information about HAIs can be found at <https://www.cdc.gov/healthcare-associated-infections/about/index.html>

- All Cincinnati data is provided through the Ohio Disease Reporting System – **All data is provisional and subject to change.**
- Case rates use the U.S Census Bureau’s 5-year average population estimates for Ohio and Cincinnati and are per 100,000 residents.
- Ohio case counts were obtained from DataOhio’s Summary of Infectious Diseases in Ohio dashboard: <https://data.ohio.gov/wps/myportal/gov/data/view/summary-of-infectious-diseases-in-ohio?visualize=true> and Ohio Department of Health’s Data & Statistics page: <https://odh.ohio.gov/explore-data-and-stats>
- Any dash (-) indicates there was no available data at the time this report was published due to lack of cases from 2019-2024.
- On October 1, 2025, the reportable conditions rule changes went into effect in Ohio and are reflected in the October report.

CITY OF CINCINNATI ENVIRONMENTAL HEALTH REPORT

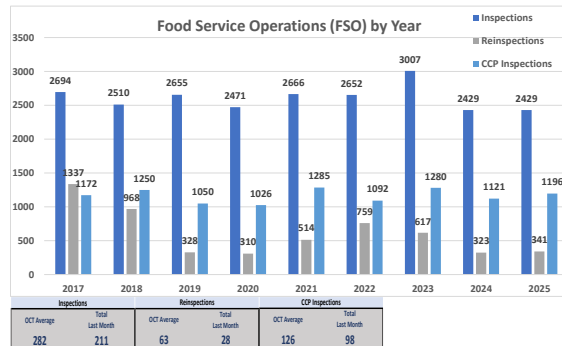
Environmental Health

The Environmental Health Division strives to provide quality community-based services to Cincinnati citizens through the enforcement of public health laws. Through five offices (including Licensing Administration), the Division issues licenses, investigates complaints, abates public health nuisances, and conducts inspections of Cincinnati's restaurants, food trucks, grocery stores, festivals, composting facilities, tattoo and body piercing parlors, infectious waste facilities, junk vehicles, solid waste open dumps, swimming pools and spray grounds, mosquitoes, rabies exposures, household sewage treatment systems, smoking in public places, mold, no water, no heat, rat and mouse, surfacing sewage, roaches, defective plumbing, schools, unsanitary living conditions, hotels, and institutions, along with other programs. The Environmental Health Specialists focus on prevention, consultation, and educating our thriving community on health risks and maintaining a safe environment.

*Averages for each category are based on the last five years average for the same month.

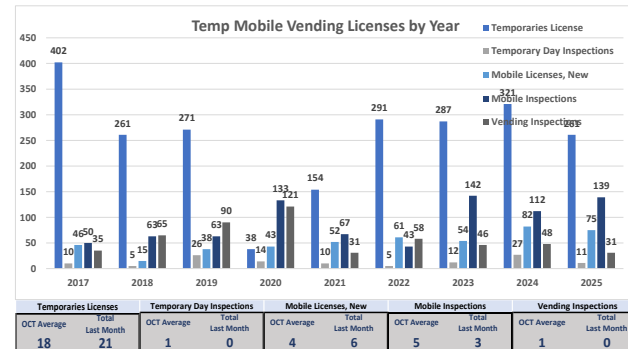
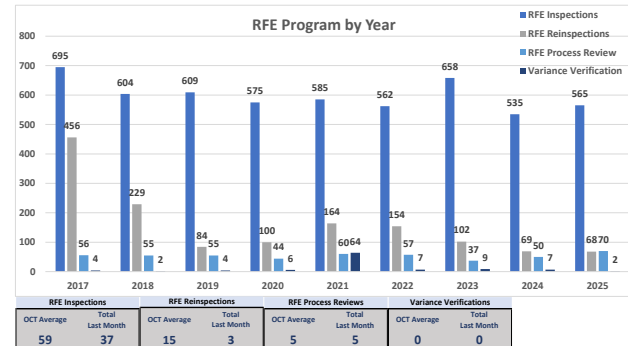
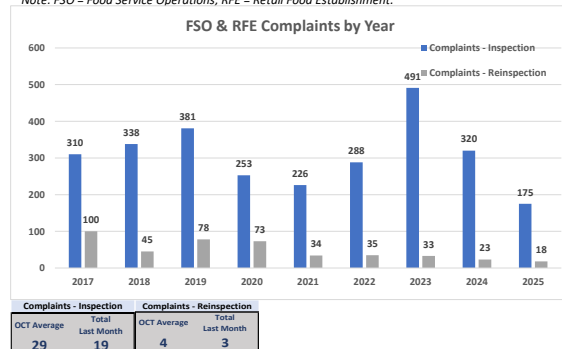
FOOD INSPECTION PROGRAM

Food Safety had another employee promoted to Safety Specialist, and a new hire start this month . There were 21 temp licenses issued for three special events (Serenity Jam , River Roots, and Disney on Ice.



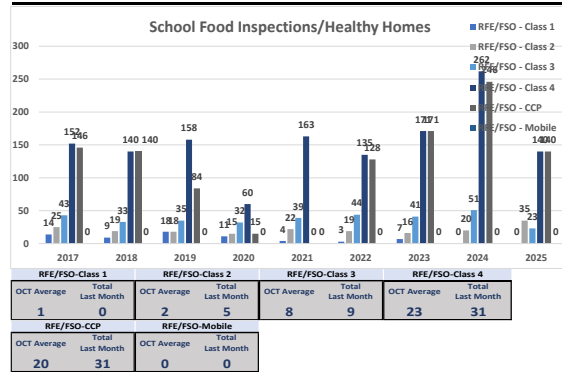
*Note: CCP = Critical Control Point Inspections.

*Note: FSO = Food Service Operations; RFE = Retail Food Establishment.

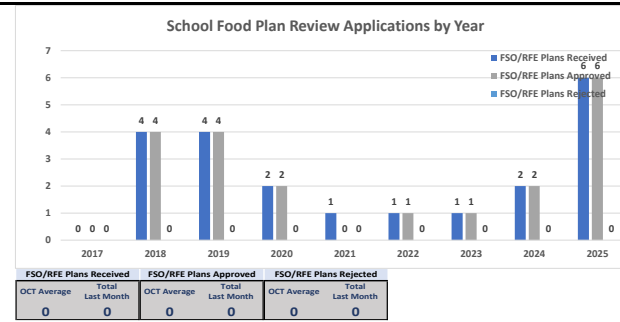


HEALTHY HOMES PROGRAM

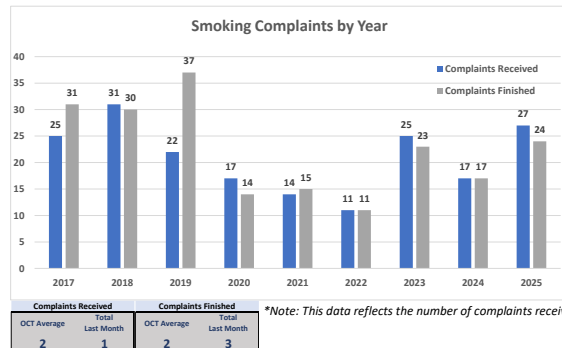
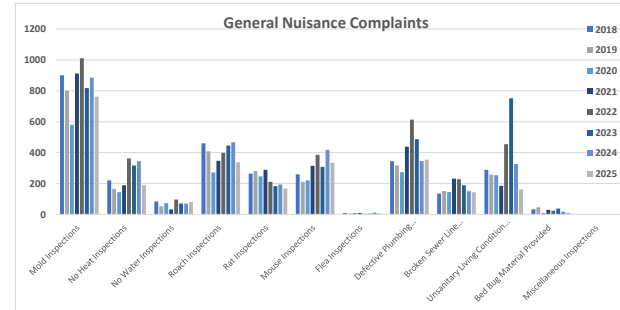
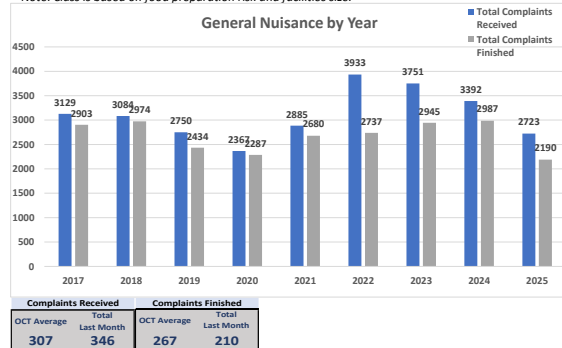
Healthy Homes continues to work with The QOL lawyers on problem landlord. We conducted our quarterly inspection of Job Corps.



*Note: Class is based on food preparation risk and facilities size.



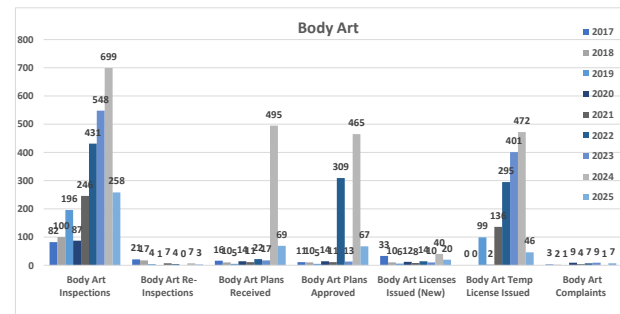
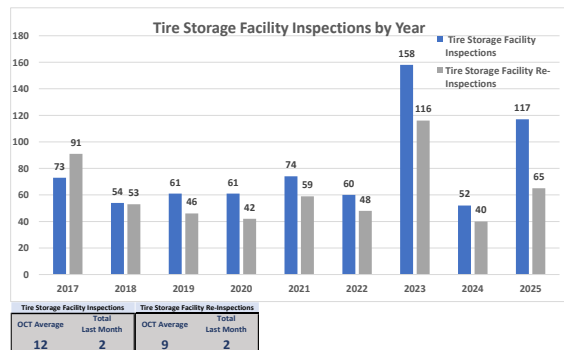
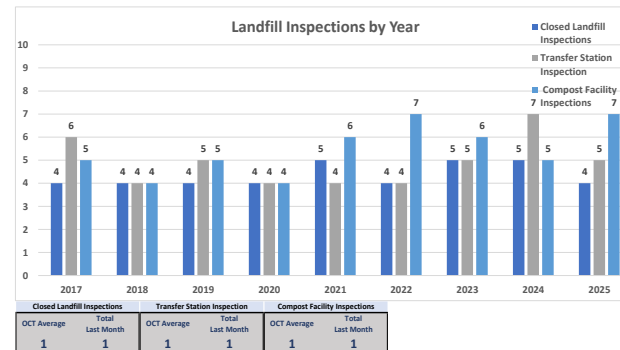
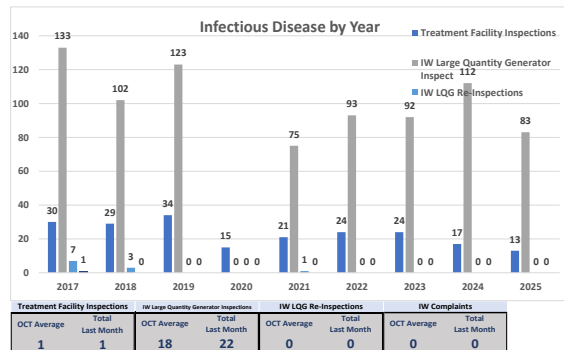
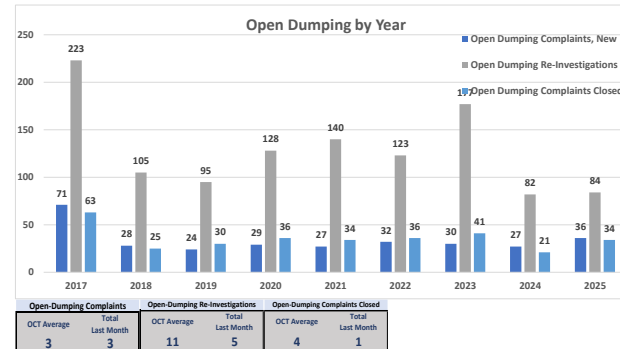
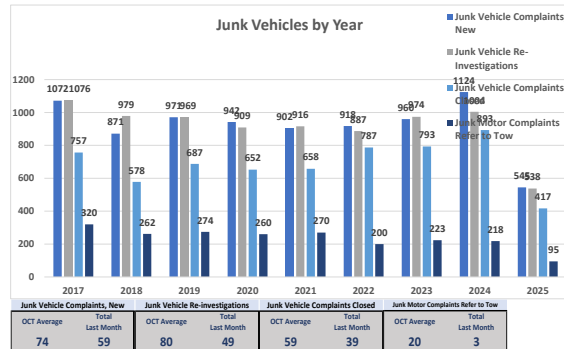
*Note: Plan Reviews are only completed when there is a new facility or renovation



*Note: This data reflects the number of complaints received for the entire city

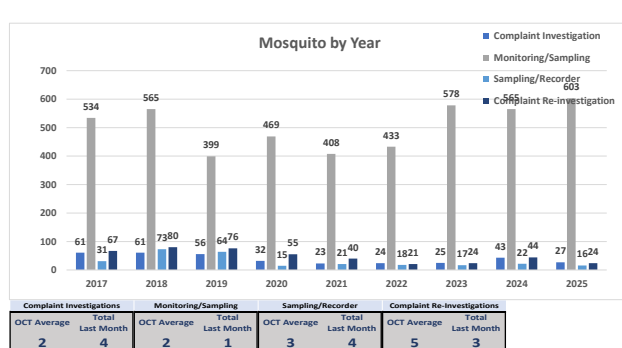
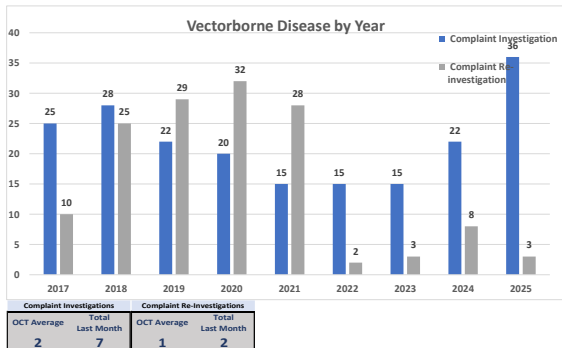
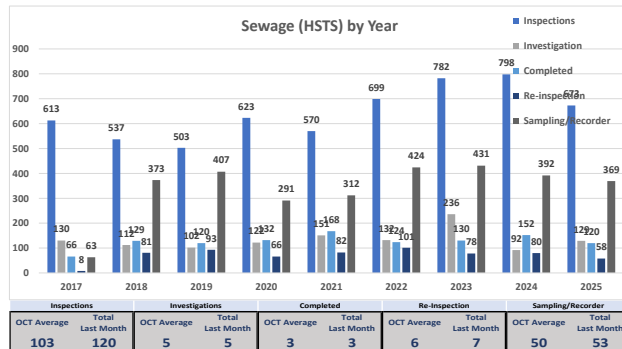
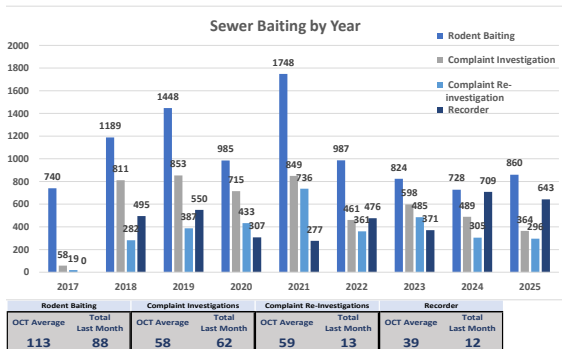
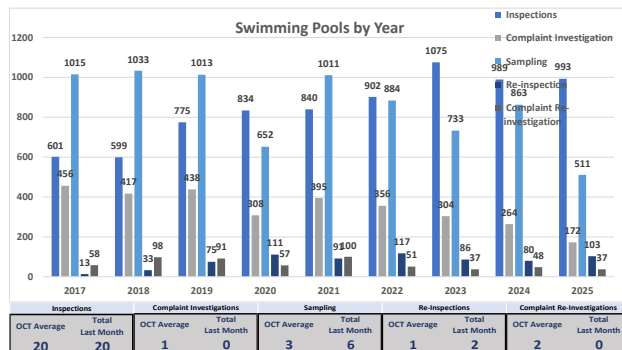
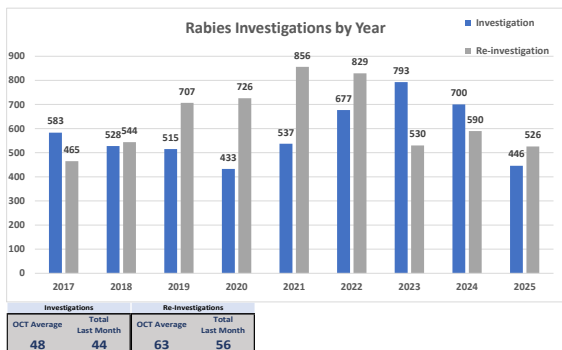
ENVIRONMENTAL WASTE PROGRAM

The Waste Unit had one temporary body art event that was licensed and inspected at Streetside Brewery. Our annual OEPA Survey was conducted on 10/6 & 10/7. CERT inspections were conducted by staff.



TECHNICAL ENVIRONMENTAL SERVICES (TES)

The Technical Unit received approval from OEPA for our fifth WPCLF project to replace a failing HSTS. Staff renewed their Commercial Applicators licenses with ODA for pest control.





Date: 12/2/2025

To: MEMBERS of the BOARD of HEALTH

From: Grant Mussman, MD MHSA, Health Commissioner

Copies: Leadership Team, HR File

Subject: PERSONNEL ACTIONS for December 2, 2025 BOARD of HEALTH MEETING

NON-COMPETITIVE APPOINTMENT –pending EHS and/or background check

SHAWN CARUSO-TAYLOR ACCOUNTANT

CHES

(Promotional vacancy)

Salary Bi-Weekly Range: \$2,706.55 to \$3,607.38

General Fund

Shawn Caruso Taylor comes to the Health Department with a Bachelor's Degree in Accounting and Management from Notre Dame College and over four years experience in Finance. He has extensive experience in financial reporting. Mr. Caruso Taylor will be an asset to the CHES Division.

SYD'NIA JONES

PHARMACY TECHNICIAN

CCPC

(Other)

Salary Bi-Weekly Range: \$2,125.29 to \$2,231.39

Revenue Fund

Syd'Nia is a Registered Certified Pharmacy Technician. She joins us from our Temp Agency Rockglade, where she has served as a Certified Pharmacy Technician since August in various capacities. Her references highlight her strong customer service, excellent attendance, organizational abilities, and experience in clinical services. We are pleased to welcome her to the City's Pharmacy Program, where she will undoubtedly be an asset to our team.

JENNA PANEK

DENTIST

CCPC

(Promotional vacancy)

Salary Bi-Weekly Range: \$6,355.81 to \$8,145.71

General Fund

Dr. Jenna Panek is a graduate of the University of Pennsylvania School of Dental Medicine (May 2023) where she received her Doctorate in Dental Medicine. She has also completed a pediatric residency program at Cincinnati Children's Hospital Medical Center. During dental school, Dr. Panek gained experience working with a wide variety of demographics during her residency and has a strong desire to continue working in community health settings. Dr. Panek has a passion for working with underserved populations. She is a National Health Service Corps Scholar and will provide valuable services to Cincinnati Health Department dental patients.

PERSONNEL ACTIONS for DECEMBER 2, 2025 , BOARD of HEALTH MEETING
Page 2 of 2

NON-COMPETITIVE APPOINTMENT –pending EHS and/or background check

KEARA WILLIAMS (Transfer vacancy)	DENTAL HYGIENIST	CCPC
Salary Bi-Weekly Range:	\$3385.82 to \$3,906.72	General Fund

Ms. Williams is a Registered Dental Hygienist with an Associate's Degree in Dental Hygiene Technology. She is also certified to administer local anesthesia and monitor nitrous oxide sedation. Ms. Williams has experience working with population groups with traditionally high disease rates and unmet dental need. She was previously employed by the Cincinnati Health Department as a dental assistant and left to pursue her hygiene degree. We are excited to rejoin our dental team.

PROMOTIONS

ELIZABETH CRABLE-MEANS (Resignation vacancy)	NURSING SUPERVISOR	CHES
--	---------------------------	-------------

Salary Bi-Weekly Range:	\$3,462.49 to \$4,653.30	General Fund
-------------------------	--------------------------	--------------

Elizabeth Crable-Means is being promoted to nursing supervisor in our Communicable Disease Unit. She currently works as a Public Nurse III in Community Nursing, specifically with the Community Health Worker Program. She has over 14 years of nursing experience from home health, mental health, rehabilitation, and public health. Ms. Crable Means has a Bachelor of Science in Nursing Degree from Chamberlin College of Nursing and a Master of Business Administration-Healthcare from Indiana Wesleyan University. She is also a US Army Veteran.

HOLLY GRIFFIN (Retirement vacancy)	SUPERVISING DIETITIAN	WIC
--	------------------------------	------------

Salary Bi-Weekly Range:	\$3,210.75 to \$4,314.98	Grant Fund
-------------------------	--------------------------	------------

The CCPC division wishes to promote Holly Griffin to the position of Supervising Dietician. Ms. Griffin has worked with the WIC program since 1994, serving as a WIC Program Dietician and currently as the WIC Program Coordinator. Ms. Griffin has a Bachelor of Science from the University of Cincinnati and has participated in multiple teams and committees for over 29 years as a Dietitian. CCPC looks forward to Ms. Griffin's leadership over the WIC Program.

ANGELA RUDOLPH (Retirement vacancy)	CUSTOMER RELATIONS REP.	CHES
---	--------------------------------	-------------

Salary Bi-Weekly Range:	\$2,154.85 to \$2,276.35	General Fund
-------------------------	--------------------------	--------------

Angela Rudolph brings 30 years of experience in customer service, case management, account administration, finance, and community engagement. Background includes Eligibility Technician work with Hamilton County Job and Family Services, complex account and risk management roles at Cincinnati Bell and Fifth Third Bank, and leadership oversight of more than 100 staff at the Aronoff Center and Music Hall. Founded and directs the nonprofit Sistah's Acts of Kindness and holds a commissioned Notary Public credential, supporting documentation and verification needs. Angela demonstrates a consistent record of professionalism, operational reliability, and customer-focused service.