Board of Health Meeting

Tuesday, February 25, 2025

Agenda

Jagdish Bhati	Mary Carol Burkhardt, M.D.	Jennifer Forrester, M.D.
Edward B. Herzig, 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

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

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

Old Business

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

6:20 pm – 6:30 pm Communicable Disease Unit (CDU) report: What's bugging us? – Ms. Kim Wright

6:30 pm – 6:40 pm Technical Environmental Services Presentation—Mr. Robert Smith

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

- Vote: **Motion to Approve** Get Vaccinated Ohio Grant-Public Health Initiative—Contract 65x10771
- Vote: **Motion to Approve** National Association of County and City Health Officials (NACCHO)—Contract 55x10769

6:50 pm – 7:00 pm Finance Update – Mr. Mark Menkhaus Jr.

7:00 pm – 7:05 pm Personnel Actions—Dr. Grant Mussman

- Vote: **Motion to Approve** Personnel Actions dated February 25, 2025

New Business

7:05 pm – 7:25 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 3 employee(s).

7:25 pm – 7:30 pm Additional New Business and Public Comments

7:30 pm Adjourn

Next Meeting March 25, 2025

[Mission]

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

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

Ms. Ashlee Young, Chair of the Board of Health, called January 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, Dr. Christopher Lewis (joined late and left early), Ms. Raynal Moore, Ms. Kiana Trabue, Ms. Ashlee Young

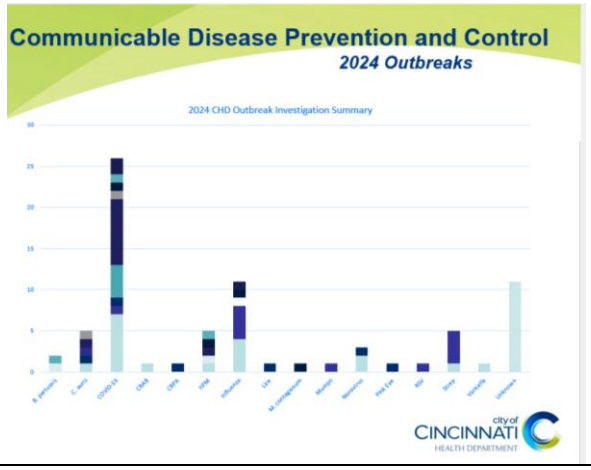
Absent: Mr. Ken Patel

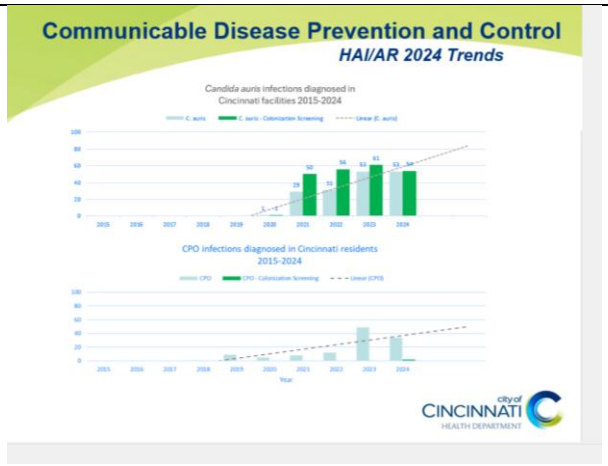
Others Present: Mr. Timothy Collier, Ms. Sa-Leemah Cunningham, Dr. Michelle Daniels, Mr. Ian Doig, Mr. John Dunham, Dr. Yury Gonzales, Dr. Camille Jones, Mr. Mark Menkhaus Jr, Dr. Grant Mussman, Ms. Ashanti Salter, Ms. Joyce Tate, Ms. Kim Wright, Mr. Antonio Young

AGENDA PACKET → January-BOH-Agenda-Packet-1.28.25.pdf			
ITEM	**TOPIC**	**RESPONSIBLE PARTY**	**ACTION/MOTION**
Minutes	**Motion** that the Board of Health approves the minutes from December 3, 2024, Board of Health Meeting. **Motion** that the Board of Health approves the minutes from December 23, 2024, Special Board of Health Meeting.	Ms. Sa-Leemah Cunningham	**Vote: Approval of Minutes from 12/3/24** **Motion**: Ms. Kiana Trabue **2nd:** Ms. Raynal Moore **Action: 7-0 Passed** **Vote: Approval of Minutes from 12/23/24** **Motion**: Dr. Jennifer Forrester **2nd:** Mr. Jagdish Bhati **Action: 7-0 Passed**
Old Business			
Introduction of New Board Member-Mr. Jagdish Bhati	Ms. Young welcomed a new Board member, Mr. Jagdish Bhati, to the Board of Health and spoke about his background. Mr. Bhati was sworn in on the morning of December 12, 2024. • Mr. Jagdish Bhat is currently retired and has extensive experience in strategic management and healthcare operations. He has held senior roles at Lucent Technologies, Optimum Management, and Serene Suites, where he streamlined business processes and optimized payer-provider dynamics. In addition to the Board of Health Mr. Bhati serves on the boards for: Ronald McDonald House (RMH), Miami University (Emeritas Board Member),	Ms. Ashlee Young	n/a

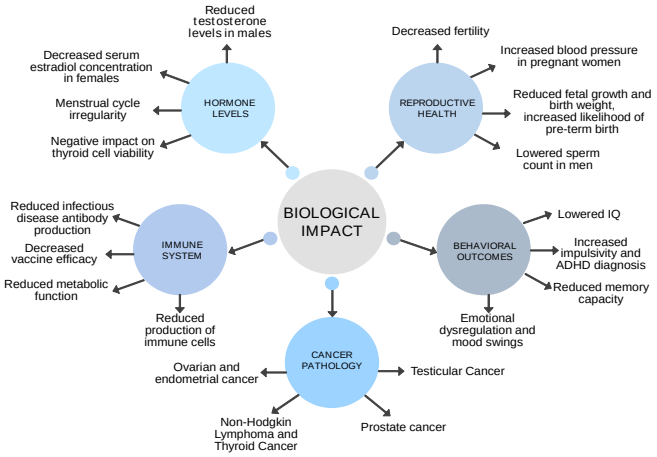
	Interact for Health, and BB&T Bank's Local Board of Advisors. • Dr. Bhati shared his excitement and enthusiasm for joining the board; he also stated his commitment to the role of being a board member.		
Commissioner's Report	Discussion Items: Memo included in the agenda packet. Dr. Grant Mussman shared a brief commissioner's update with the Board. **Ohio's 1115 Medicaid Work and Community Engagement Waiver** • Dr. Mussman updated that the team is closely monitoring developments with Ohio's 1115 Medicaid Work and Community Engagement Waiver, which aimed to require certain Medicaid beneficiaries to engage in work or community activities to maintain coverage. • Decrease in Medicaid coverage would put additional strain on our resources, as our current case mix is approximately 60% Medicaid and 30% uninsured • Additional information: o The waiver was approved by the Centers for Medicare & Medicaid Services (CMS) in 2019 but later paused due to the COVID-19 o It was posted again for public comments in December, indicating that the state will likely work toward re-instituting o Estimates of effect on Medicaid coverage vary, but all estimates (including official state estimates) anticipate loss of coverage, and in the • The team begun work on our capital budget, which broadly describes our next 6 years (with annual review) and includes sufficient budget for new buildings and/or substantial renovations (to be determined as our needs assessment continues). • City Council will vote on the budgets in June after public comment periods. **Contract with Cincinnati Public Schools**	Dr. Grant Mussman	n/a

	• CHD contract with Cincinnati Public Schools, which was approved by the Board of Health in our emergency meeting in December, was scheduled to be signed by the Board of Education on Monday 1/27/25. **Departmental Report: Air Quality Monitoring (Epidemiology)** • There will be a deep dive topic for this month in our Air Quality Monitoring project • Meriel Vigran presented her work from Environmental Epidemiology. **Unveiling of Braxton F. Cann Memorial Health Center Signage** • Dr. Mussman shared with excitement that the signage for the Braxton F. Cann Memorial Health Center was unveiled on Tuesday, January 14, 2025. The ceremony brought together community members, healthcare professionals, and loved ones to celebrate Dr. Cann's legacy. Speakers shared heartfelt stories about his impact on patients and the medical field		
Communicable Disease Unit (CDU) report: What's Bugging Us	**Discussion Items:** Memo and presentation included in the agenda packet. Ms. Wright presented her rebranded report, Communicable Disease Unit (CDU): What's Bugging Us to the board. The Epidemiology report has changed due to other infectious diseases becoming of more importance and COVID cases decreasing and not being the only primary concern anymore. The full 2024 infectious disease report was included in the agenda packet. Included was preliminary 2024 numbers of confirmed and probably communicable disease case counts and outbreaks. **Highlights** Ms. Wright discussed, "What's Bugging Us"? (meaning what is of importance to CHD currently). • Healthcare-associated Infections and Antimicrobial Resistance such as Outbreaks, Candida Auris, Carbapenemase-producing organisms.	Dr. Kim Wright	n/a

	• Zoonotic Disease such as Rabies and Avian Influenza.
	  ○ With a recent rabies exposure, the CHD CDU team put in over 400 hours of work on; including 194 risk assessments (which resulted in 32 referrals for PEP treatment).
	• Vaccine Preventable diseases were seen to return in 2024 such as Pertussis (Whooping Cough), Measles, Mpox.
	• Seasonal Respiratory Viruses such as COVID-19, Influenza, and RSV.
	  ○ Influenza peaked at the middle of January with high transmission.
	  ○ COVID cases continued to decline.
	  ○ RSV was low.
	• Communicable Disease Prevention and Control 2024 highlights
	  ○ Total of COVID-19 Case investigations performed were 5,635.
	  ○ Total non-COVID 19 Case investigations performed were 1,295.
	  ○ Total COVID Outbreak investigations were 26.
	  ○ Total non-COVID outbreak investigations were 51.
	• Candida auris infections did not increase—huge win for the CDU team and there investigations.
	 		

			
Cincinnati Country Club Pool Gate Variance Resolution No. 2024-006 – Reading #2	**Discussion Items:** Document and Presentation included in the agenda packet. Mr. Antonio Young Discussed Resolution 2024-006 Cincinnati Country Club Pool Gate Variance. • Cincinnati Country Club is located at 2348 Grandin Road, Cincinnati, Ohio 45208. • Cincinnati Country Club operates three public swimming pools—a lap pool, family pool, and a baby/wading pool. • In this variance, the Cincinnati Country Club requests that there be an attendant at the entrance present in all hours of operation and making sure there is a lifeguard present for all hours of operation; in addition to maintaining self-closing and lockable gates or doors. • Mr. Young recommended the passing of this resolution. • Per Ian Doig, to waive the 3x readings, 7 board members must be present and only 6 were present. Therefore, this will now be the FIRST reading of the resolution. **Motion to Suspend** the statutory rule requiring three readings of Resolution No. 2024-006. **Motion to Approve** Resolution No. 2024-006 APPROVING the Cincinnati Country Club Pool Gate Variance request for a limited variance from the requirements of Ohio Administrative Code 3701-31-04(B)(6)(s), subject to the approval of the Ohio Department of Health.	Mr. Antonio Young	**Vote: Waive 3x Readings for resolution 2024-006** **Motion**: Dr. Jennifer Forrester **2nd:** Mr. Jagdish Bhati **Action: 7-0 Passed** **Vote: Approval of Minutes from 12/23/24** **Motion**: Dr. Jennifer Forrester **2nd:** Mr. Jagdish Bhati **Action: 7 Yes, 1 Abstain-Passed**
PFAS Presentation	**Discussion Items:** Presentation included in the agenda.	Ms. Meriel Vigran	n/a

	Ms. Meriel Vigran, Environmental Epidemiologist, presented a PFAS Presentation to the board. Dr. Mussman explained that this is part of the ongoing series of highlighting each area of CHD. He also discussed where the PFAS program sits within the structure of CHD. This program reports to the Community Health & Environmental section--Epidemiology; reporting under Dr. Maryse Amin (Assistant Health Commissioner). **Highlights** • What are PFAS? o Perfluoroalkyl Substances (PFAS) are synthetic chemicals, also known as "forever chemicals". These Chemicals cannot be broken down by natural systems in the environment or metabolized in our bodies. PFAS become stored in plants, animals, and humans through bioaccumulation and biomagnification. o First created in the 1940s, PFAS have fluorocarbon chains that reduce surface tension. Today, the EPA estimates there to be around 12,000 kinds of PFAS used in a wide variety of products to make surfaces water and oil resistant. • What are the Exposures to PFAS? o Exposure to PFAS happens when an individual absorbs a PFAS chemical through the skin, ingests it, or inhales it. o Most known exposures are relatively low, but prolonged exposure to a concentrated source can result in high PFAS concentrations in the body over time. o Some ways an individual can be exposed to high concentrations of PFAS are: • What is the Biological Impact of PFAS? o According to the Centers for Disease Control and Prevention (CDC), nearly all people in the U.S. have been exposed to PFAS. o PFAS blood levels are declining with reduced production and use.		



- How are we protecting are water?
    - Monitoring:
        - GCWW tests water both before the water enters the treatment plant and after it is treated.
        - GCWW participates in The Ohio River Valley Water Sanitation Commission (ORSANCO), which oversees 17 monitoring stations on the Ohio River that monitor for the most spilled contaminants, including PFAS, and volatile organic compounds.
    - Protecting:
        - The Ohio EPA regulates PFAS through wastewater discharge permits.
        - US EPA is currently working on implementing stricter standards that will reduce the amount of PFAS runoff into our water sources.
        - The US EPA enacted drinking water regulations for six common PFAS including PFOA and PFOS.
        - GCWW conducts investigations to determine possible polluters of PFAS upstream.
        - To further protect our drinking water, GCWW can close the Ohio River intake pump until a contaminant spill passes. Meanwhile stored and supplementary water is utilized.
        - The GMBVA aquifer is protected by the Hamilton to New Baltimore Groundwater Consortium, which developed legislation that requires businesses to register their facilities with the Consortium.

	• What steps are Cincinnati Water Works Taking?
	  ○ Treating
	  ▪ Cincinnati has some of the highest quality water in the nation thanks to its state-of-the-art facilities.
	  ▪ Most of Cincinnati's water is treated in the Richard Miller Treatment Plant, which filters the water through a Granulated Active Carbon (GAC) treatment system.
	  ▪ GAC has been recognized as the best available technology for removing the most common chemicals found in spills in the Ohio River including some PFAS. GAC is made from organic materials that are naturally high in carbon such as coconut shells and coal. These small particles are called Granulated Carbon (GC). GC particles are heated up, or "activated" to create microscopic fractures that increase their surface area. These tiny cracks allow water to pass through but catch chemical particles such as PFAS.
	  ▪ GCWW also uses source water from its Charles M. Bolton Wellfield on the Great Miami Aquifer (an aquifer is buried sand and gravel filled with water). It is located in the portion of the aquifer served by the Hamilton to New Baltimore Consortium, which has developed an award-winning source water protection program to protect the aquifer.
	  ▪ Monitoring from this smaller treatment plant has found some compounds which were note entirely removed by the treatment there. As a result, GCWW is both trying to identify the source of these compounds and is evaluating the treatment and other means to cost effectively address the threat of PFAS at that plant.
	  ○ GCWW also uses source water from its Charles M. Bolton Wellfield on the Great Miami Aquifer (an aquifer is buried sand and gravel filled with water). It is located		

	in the portion of the aquifer served by the Hamilton to New Baltimore Consortium, which has developed an award-winning source water protection program to protect the aquifer. o Monitoring this smaller treatment plant has found some compounds which were note entirely removed by the treatment there. As a result, GCWW is both trying to identify the source of these compounds and is evaluating the treatment and other means to cost effectively address the threat of PFAS at that plant. • What other steps is Cincinnati Taking? o CFD-Phasing out aqueous film form foam (AFFF) for fighting liquid fuel fires. o GCWW-Drinking water supply Greater Cincinnati Water Works (GCWW) is required to monitor 29 PFAS compounds under the 2021 unregulated contaminant monitoring rule (UCMR). o MSD – Wastewater Collection and Treatment MSD is collaborating with USEPA Office of Research and Development to evaluate how PFAS in influent coming to the treatment plant partitions between treated effluent and wastewater treatment solids. MSD also plans to participate in USEPA's Publicly owned Treatment Works (POTW) Influent Study, which will collect data on industrial discharges of PFAS-containing wastewater sent to POTWs for treatment. This information will allow USEPA to identify industrial sources of PFAS and assess the need for additional regulatory control measures. o Procurement – Purchases of Goods and Services for the City require that all city departments, boards, and commissions specify environmentally preferable supplies, services, or construction when appropriate. Products that do not contain PFAS are considered environmentally preferred by the City Municipal Code Section 321-22. • Dr. Lewis applauded the great presentation and asked if CHD has any relationship with higher education institutions with engineering departments. o Ms. Vigran wasn't sure and will touch base with MSD and Waterworks to check and see. • Dr. Forrester also applauded the great and informative presentation.		

Finance Update	**Discussion Items:** Memo and materials were included in the agenda.
	
	Mr. Menkhaus gave an update on CHD Financials for December 2024 and Year over Year.
	
	Highlights
	• Revenue total was $29,690,315.70, an increase of 2.11%.
	  ○ Private Pay Insurance increased by 0.07%.
	  ○ Medicare increased by 2.74%.
	  ○ Medicaid decreased by 47.25%.
	  ○ Medicaid managed care increased by 6.66%.
	  ○ Self-Pay patients increased by 0.78%.
	  ○ Board of Ed Svcs (School Nurse's Salary) increased by 4.34%.
	  ○ Grants/Federal increased by 44.05%.
	• Expenses were $31,787,076.62, an increase of 7.98%.
	  ○ Property expenses decreased 59.96%.
	  ○ Personnel expenses increased by 14.00%.
	  ○ Contractual costs increased by 3.98%.
	  ○ Material costs increased by 13.73%.
	  ○ Fixed costs decreased by 25.97%.
	  ○ Fringes increased by 7.39%.
	
	The total available is $90,239.08, increased by 138.04%
		Mr. Mark Menkhaus Jr.	n/a

Personnel Actions	**Motion to Approve** the personnel actions dated January 28, 2025.	Dr. Grant Mussman	**Motion:** Mr. Jagdish Bhati **2nd:** Ms. Kiana Trabue **Action: 8-0 passed**
New Business			
Executive Session	**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 employees. **Motion to approve** the adaptation of the recommendation of HR of 8-hour suspension for employee #1 discussed in the executive session. **Motion to approve** the adaptation of the recommendation of HR of 8-hour suspension for employee #2 discussed in the executive session.	Ms. Ashlee Young	**Vote:** Enter Executive Session **Motion:** Mr. Jagdish Bhati **2nd:** Dr. Edward Herzig **Action: 8-0 passed** **Vote:** Adaptation of the recommendation of HR of 8-hour suspension for employee #1 discussed in executive session **Motion:** Dr. Edward Herzig **2nd:** Mr. Jagdish Bhati **Action: 7-0 passed** **Vote:** Adaptation of the recommendation of HR of 8-hour suspension for employee #2 discussed in executive session **Motion:** Mr. Jagdish Bhati

			2nd: Dr. Jennifer Forrester **Action: 7-0 passed**
Additional New Business and Public Comments	**Public Comments** • There were no public comments.	Ms. Ashlee Young	n/a

7:30 p.m. adjourned.

Next meeting: Tuesday, February 25, 2025, at 6pm via Zoom.

Meeting can be viewed at: https://archive.org/details/boh-1-28-25

Minutes Approved by:

_____
Sa-Leemah Cunningham
Cincinnati Board of Health Clerk

_____
Ashlee Young
Chairperson, Board of Health

January 28, 2025 Meeting Attendance/vote sheet

Board Members	Roll Call	12.3.24 BOH Meeting Minutes	12.23.24 BOH Special Meeting Minutes	Waive 3x Readings for resolution 2024-006	Approve Resolution 2024-006	Personnel Actions Dated 1.28.25	Motion to move into Executive Session to discuss multiple personnel actions	Adaptation of the recommendation of HR of 8 hour suspension for employee #1 discussed in executive session	Adaptation of the recommendation of HR of 8 hour suspension for employee #2 discussed in executive session
Mr. Jagdish Bhati	x		2nd	2nd	M	M	M	2nd	M
Dr. Mary Carol Burkhardt	x								
Dr. Jennifer Forrester	x		M	M	2nd				2nd
Dr. Edward Herzig	x						2nd	M	
Dr. Christopher Lewis	x				abstain				
Ms. Raynal Moore	x	2nd							
Mr. Ken Patel									
Ms. Kiana Trabue	x	M				2nd			
Ms. Ashlee Young	x								
Motion Result:	Quorum	Passed	Passed	Passed	Passed	Passed	Passed	Passed	Passed

x	*Present*
	Yay
	Nay
	Absent
	Didn't vote but present
M	*Move*
2nd	*Second*

STAFF	
Dr. Grant Mussman-Commissioner	x
Sa-Leemah Cunningham (clerk)	x
Antonio Young	x
Ian Doig	x
Mark Menkhaus Jr.	x
Dr. Camille Jones	x
Dr. Ashanti Salter	x
Dr. Michelle Daniels	x
Kim Wright	x
Dr. Maryse Amin	x
Harry Barnes	x
Tim Collier	x
Jose Marques	x
Dr. Nick Taylor	x
Chante Randolph	x
Robert Smith	x
Meriel Vigran	x

DATE: February 21, 2025

TO: Board of Health Members

FROM: Dr. Grant Mussman, Health Commissioner

SUBJECT: Health Commissioner Executive Summary

Dr. Nick Taylor steps in as interim Dental Director

- After 5 years of excellent leadership as Dental Director, Dr. Novais has stepped down to resume clinical practice.
- Dr. Novais' tenure has included several important milestones, including the impending completion of the Robert's Dental Center and the Implementation of the EPIC Wisdom system.
- While we are recruiting for a new director, Dr. Nick Taylor has agreed to step in as interim Dental Director.
- Dr. Taylor joined CHD in 2021 after 9 years at Healthsource of Ohio and has been providing critical support to Dr. Novais in a variety of areas including QI work and implementation of a new EMR system for the dental program. He practices at Bobbie Sterne Dental Center.

Biannual Budget Process Continues

- We are engaged in the biennial budget process for FY 26 and 27.
- City manager anticipates completion and release in Mid-May
- Between now and then, we will be working through our budget scenarios with the Office of Budget and Evaluation.

CHD continues to have access to Federal Funds

- The Cincinnati Health Department continues to not be greatly impacted by interruptions in federal funding.
- Out of a total budget of approximately $70 million, the Cincinnati Health Department receives over $10 million in Federally sourced grants every year.
- This figure does not include our Medicaid reimbursement, which was approximately $21 million in 2024.
- Generally, we have continued to have access to these resources other than our refugee health program grant, which was $184,000.00 per year. That program is currently suspended.

DATE: February 18, 2025

TO: Cincinnati Health Department Board of Health

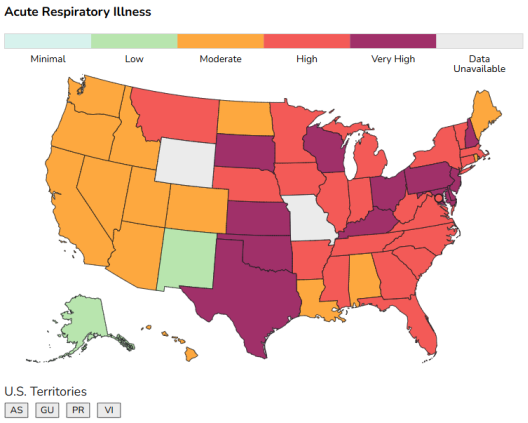
FROM: Kim Wright, Supervising Epidemiologist Communicable Disease Prevention and Control - CHES

SUBJECT: February 2025 Board of Health Communicable Disease Report

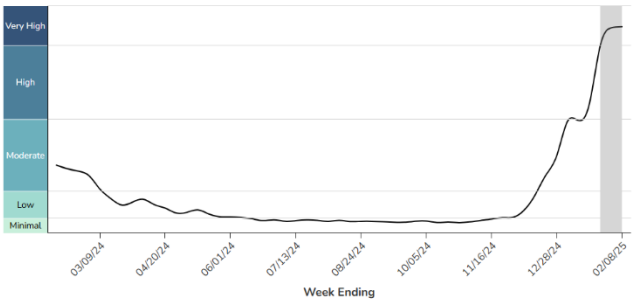
What's Bugging Us?

Seasonal Respiratory Viruses

Acute Respiratory Illness continues to be reported at high levels in most of the United States, including Ohio (very high). Nationally wastewater viral activity levels of influenza A are noted to be very high, and responsible for most of the respiratory illnesses currently being reported. CDC notes they continue to investigate whether the ww data is impacted by avian influenza outbreaks in animals.

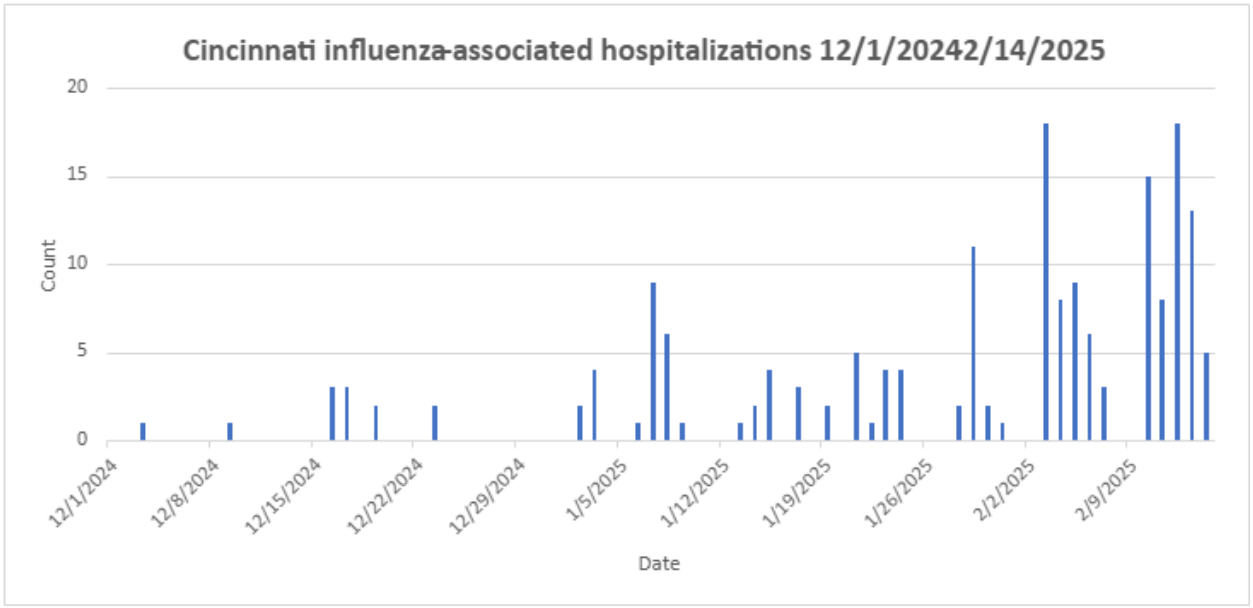


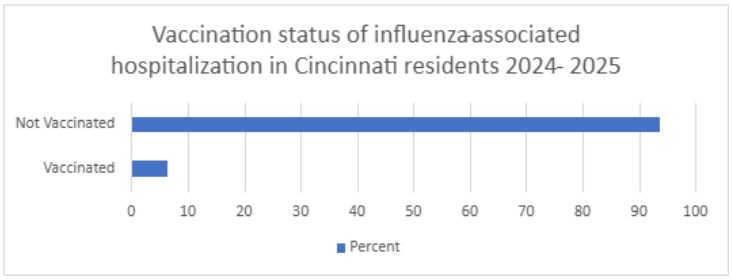
CDC - Influenza A trend in wastewater



Influenza: CHD continues to track influenza-associated hospitalizations as an indicator of flu severity in the community. CHD reported 72 in the month of January. Last year there were 79 reported in January. CHD has also received reports of elevated influenza detected in wastewater samples. Influenza Type A (H1) and (H3) are the primary circulating subtypes, with a minimal amount of Type B detected. All hospitalizations since the beginning of 2025 in Cincinnati have been Type A. CHD is

reporting only 6.3% of influenza-associated hospitalizations reported this flu season have been currently vaccinated for flu. Nationally, CDC is reporting as of 2/24/2025 influenza vaccination levels at 45.9% (44.4-47.3) for children and 45.0% (44.0-45.9) for adults age 18+, including 69.6% (67.6-71.7) among adults age 65+. Ohio reports all influenza-like illness activity indicators continue to increase, as of the latest update on 2/8/2025.





Age Range Sort	number of cases
0-9 Years Old	10
10-19 Years Old	<10
20-29 Years Old	<10
30-39 Years Old	<10
40-49 Years Old	11
50-59 Years Old	24
60-69 Years Old	26
70-79 Years Old	22
80-89 Years Old	10
90+ Years Old	<10
Total	**120**

By Race

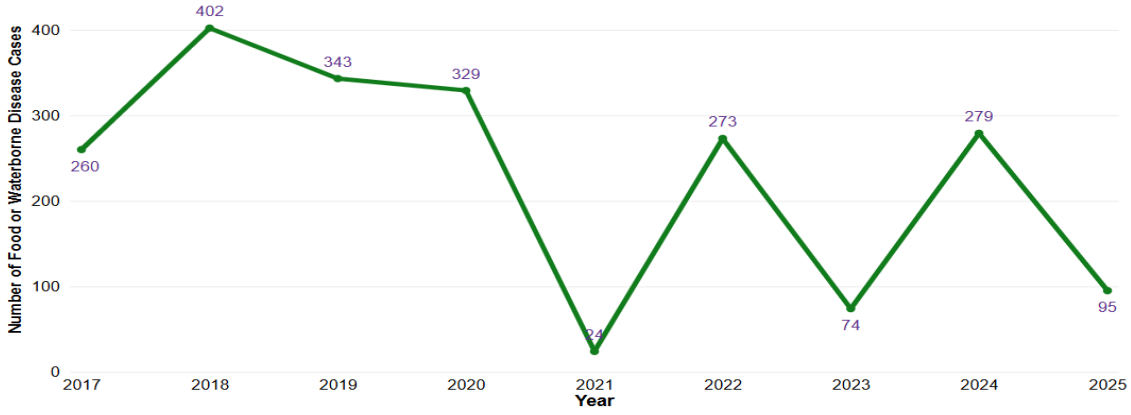
Race	number of cases
American Indian/ Alaskan Native	<10
Asian	<10
Black	77
Other	<10
Unknown	<10
White	37
Total	**120**

By Sex

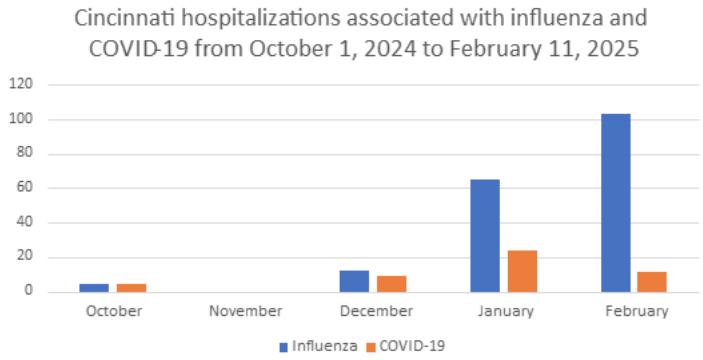
Sex	number of cases
Female	60
Male	59
unknown	<10
Total	**120**

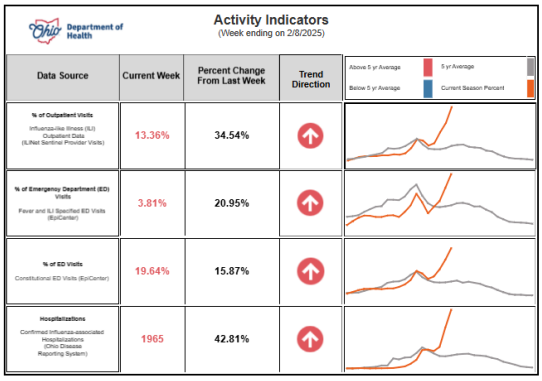
CHD Communicable Disease Dashboard As of 2/6/2025

Cincinnati influenza-associated hospitalizations by year 2017-2025



COVID-19: CHD is reporting moderate transmission of COVID-19 in the community at 39.5 7-day Cumulative New Cases Per 100,000. Wastewater detection is steady at the time of this report and not as high as it was in February 2024. 24 COVID-19 hospitalizations were reported in the month of January. Nationally, CDC is reporting low levels of COVID-19 related ER visits.





RSV: CHD will soon be able to track RSV-associated infections in residents, as it is one of the proposed changes to Ohio communicable disease reporting regulations. Levels of RSV being detected in local wastewater have been minimal so far. CDC reports national RSV related ER visits are decreasing.

Outbreak Response

CHD's Communicable Disease Control and Prevention Unit investigated eight outbreaks in January:

- 4 COVID-19 outbreaks (3 in healthcare settings, 1 in a group home)
- 2 gastrointestinal illness outbreaks (1 healthcare setting, 1 daycare setting)
- 1 influenza outbreak (healthcare setting)
- 1 RSV outbreak (daycare setting)
- 1 whooping cough outbreak (school setting)

On The Radar

The first person residing in Ohio detected with **Influenza Type A(H5N1)** was reported by Ohio Department of Health on 2/14/2025. The person was exposed to an infected poultry flock. Nationally, there have been 68 confirmed human cases of HPAI in 11 states since the beginning of 2024, which includs one death in Louisiana. All but three involved exposures related to commercial agriculture or wild birds. In Ohio, one dairy herd and numerous poultry flocks have been infected since the outbreak began in 2022. CHD has communicated with providers regarding infection control and testing recommendations, and CHD has received one call from the public who was concerned about having influenza and having a small flock of chickens. In 2022 when the outbreak began in the United

States, CHD published a Highly Pathogenic Avian Influenza Epidemiological Brief that is available on the CHD website here.
Key contacts for reporting sick or dead birds:

- Ohio Poultry Association at (614) 882-6111 or the Ohio Department of Agriculture at (614) 728-6220 or after hours at (888) 456-3405.
- Ohio Department of Natural Resources (ODNR) at 1-800-WILDLIFE and sick or dead poultry to the ODA at 614-728-6220.

city of
CINCINNATI
HEALTH DEPARTMENT

Communicable Disease Prevention and Control

Board of Health Presentation
2/25/2025

What's Bugging Us?

Seasonal Respiratory Viruses

- COVID-19
- Influenza
- RSV

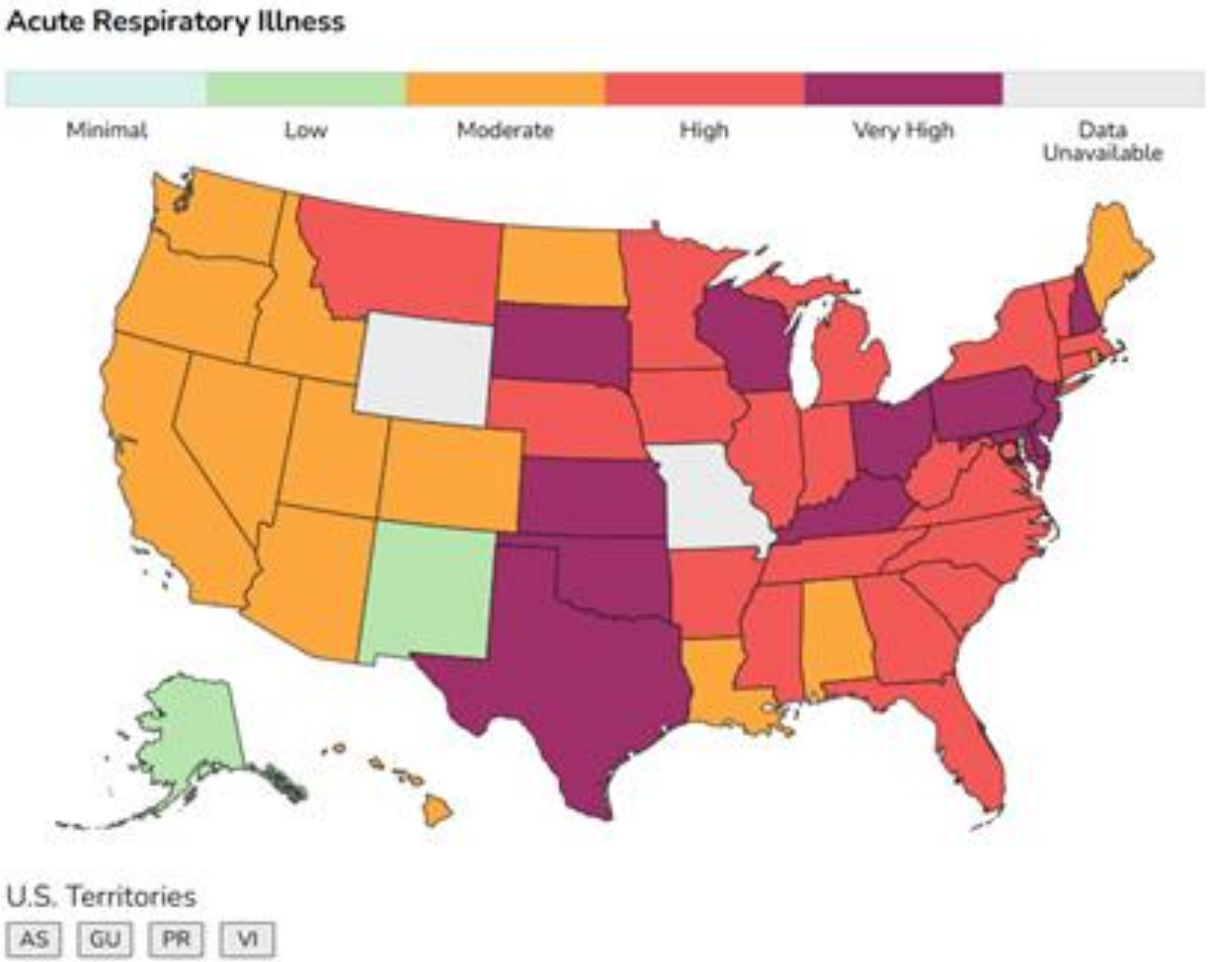
Outbreaks

- Respiratory
- Gastrointestinal

city of CINCINNATI HEALTH DEPARTMENT

city of CINCINNATI HEALTH DEPARTMENT

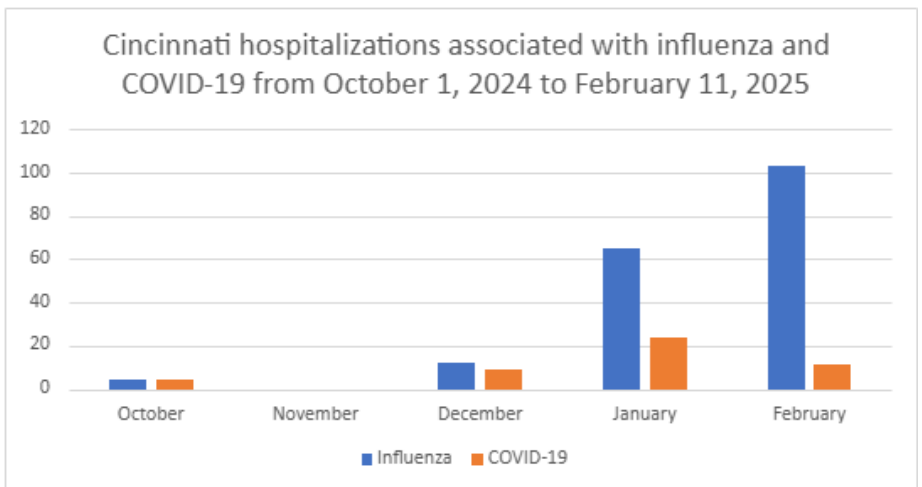
What's Bugging Us?

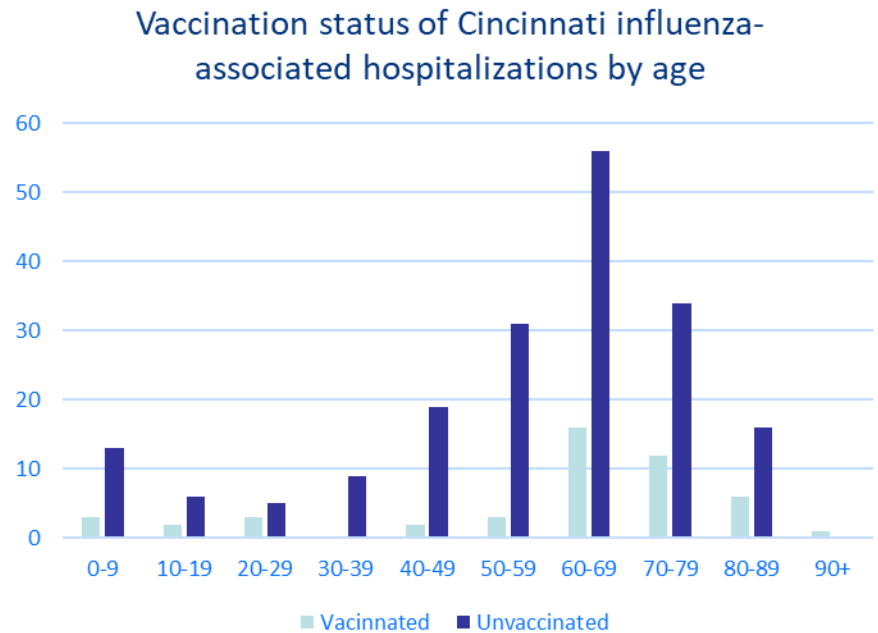


Emergency department visits in **the United States**

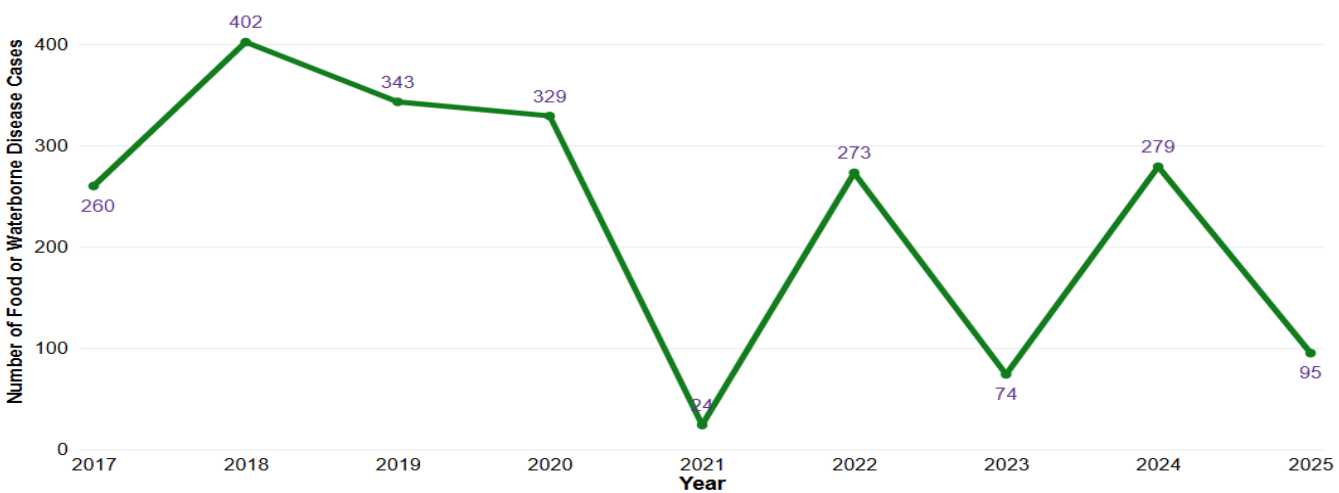
COVID-19	Flu	RSV
Low Decreasing ↘	Very High Increasing ↗	Moderate Decreasing ↘

What's Bugging Us?





Cincinnati influenza-associated hospitalizations by year 2017-2025



CHD Communicable Disease Dashboard As of 2/6/2025

Questions?

Kim Wright
Supervising Epidemiologist
Cincinnati Health Department
Communicable Disease Prevention and Control Unit
kimberly.wright@cincinnati-oh.gov
513-357-7391

city of
CINCINNATI
HEALTH DEPARTMENT

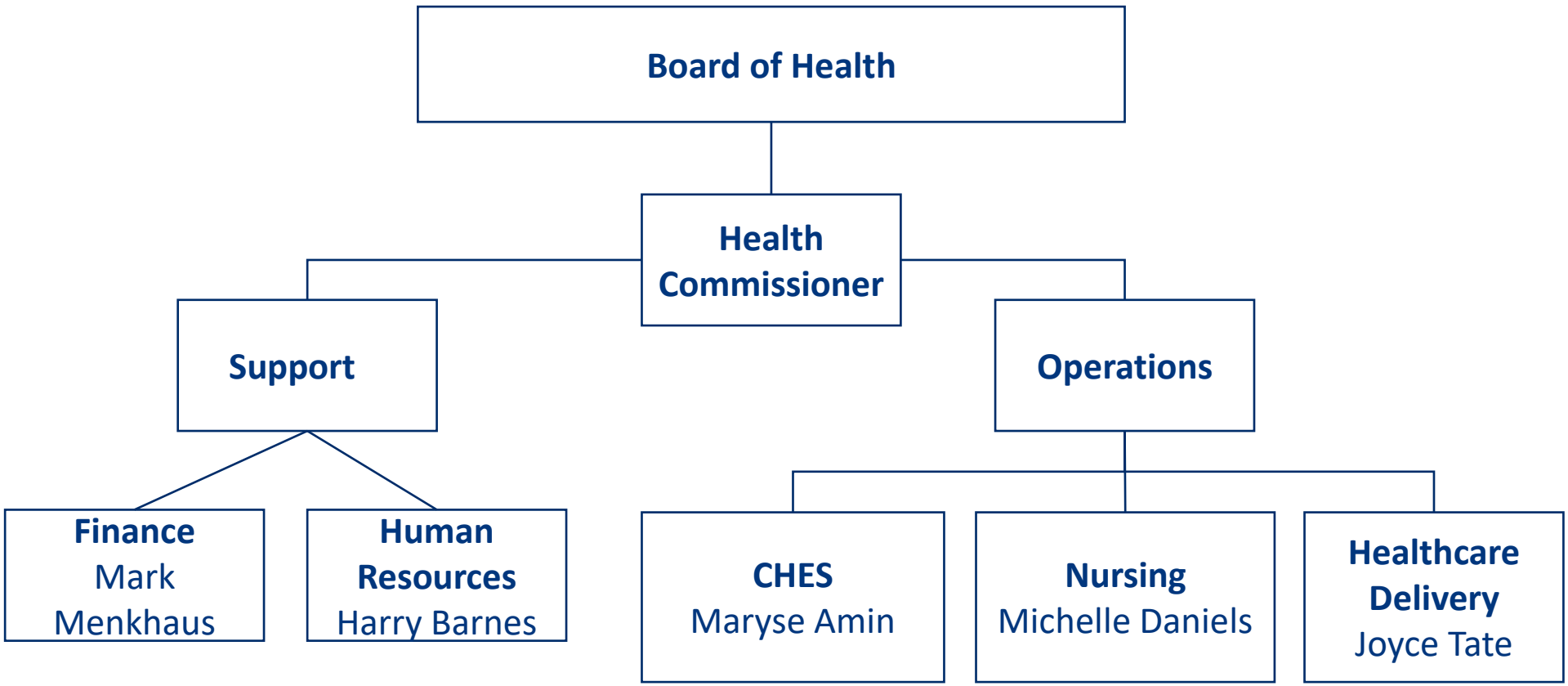
CHD Deep Dive: Technical Environmental Services

Robert Smith

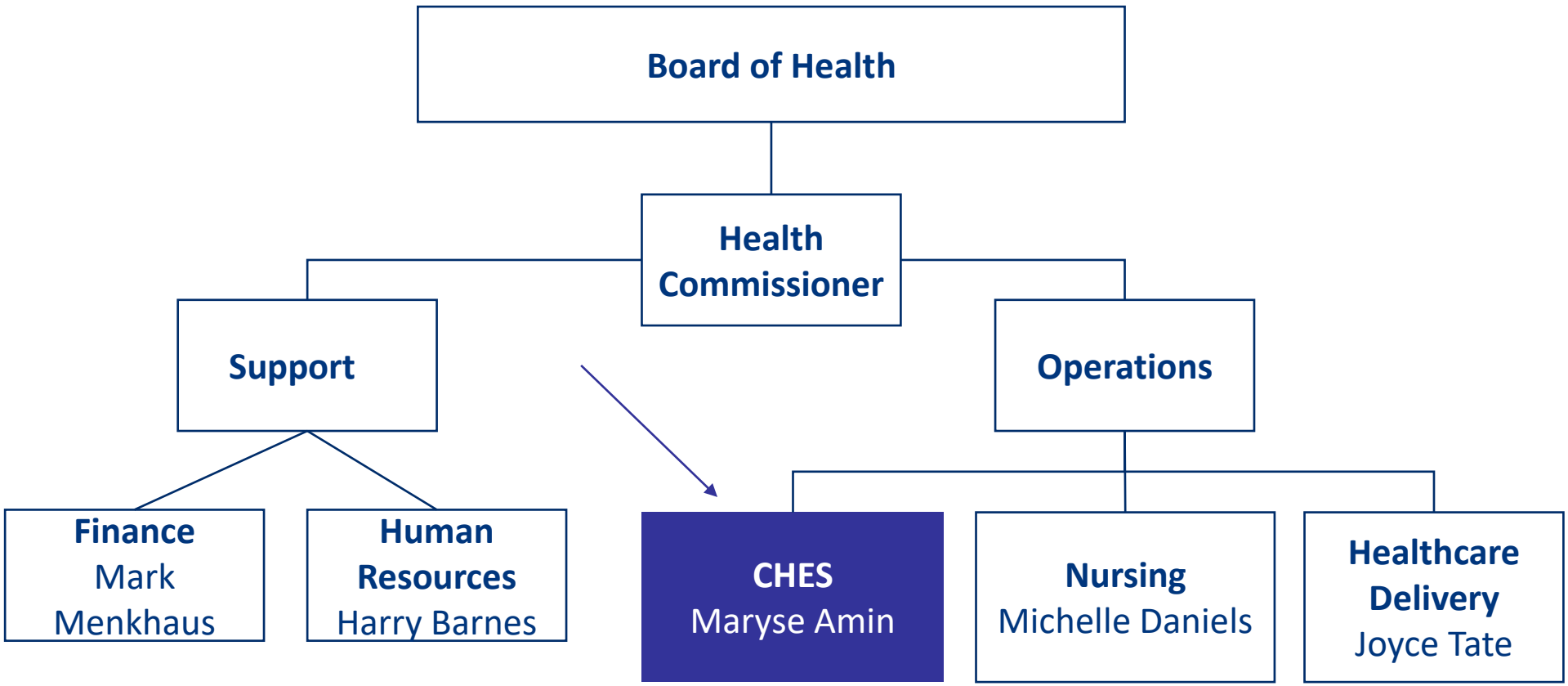
Supervising Environmental Health Specialist

2/25/2025

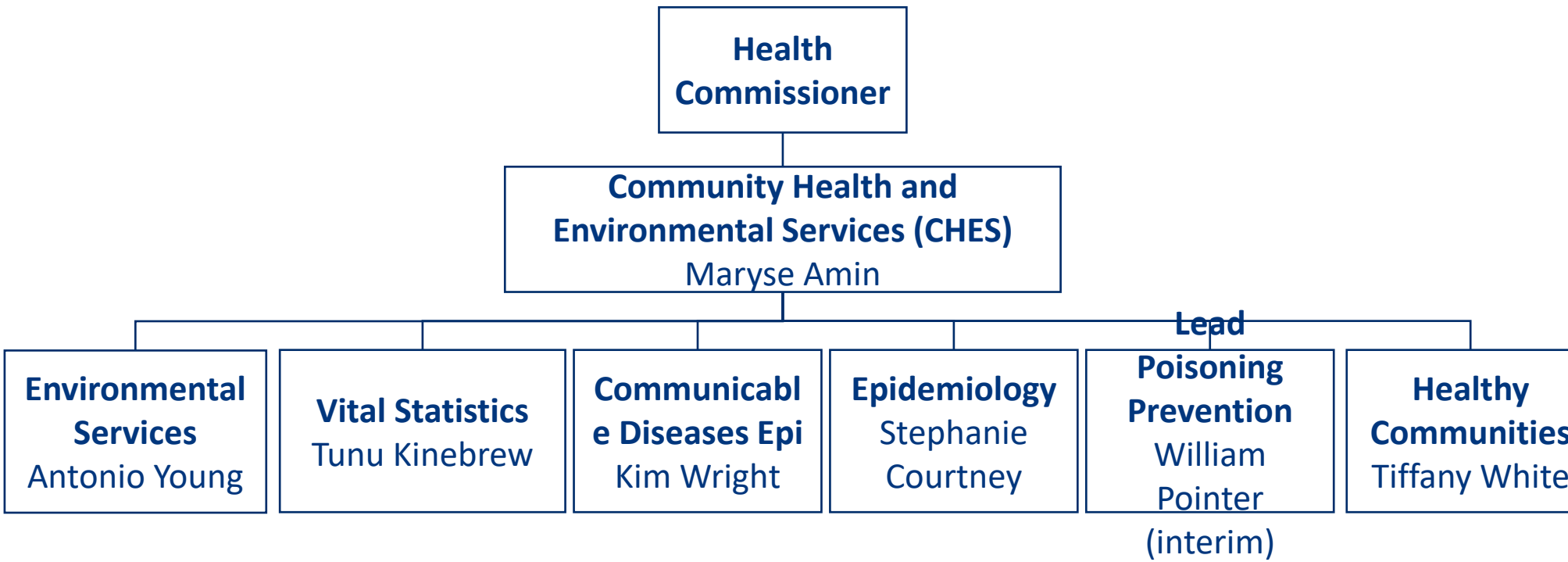
CHD High-Level Reporting Structure



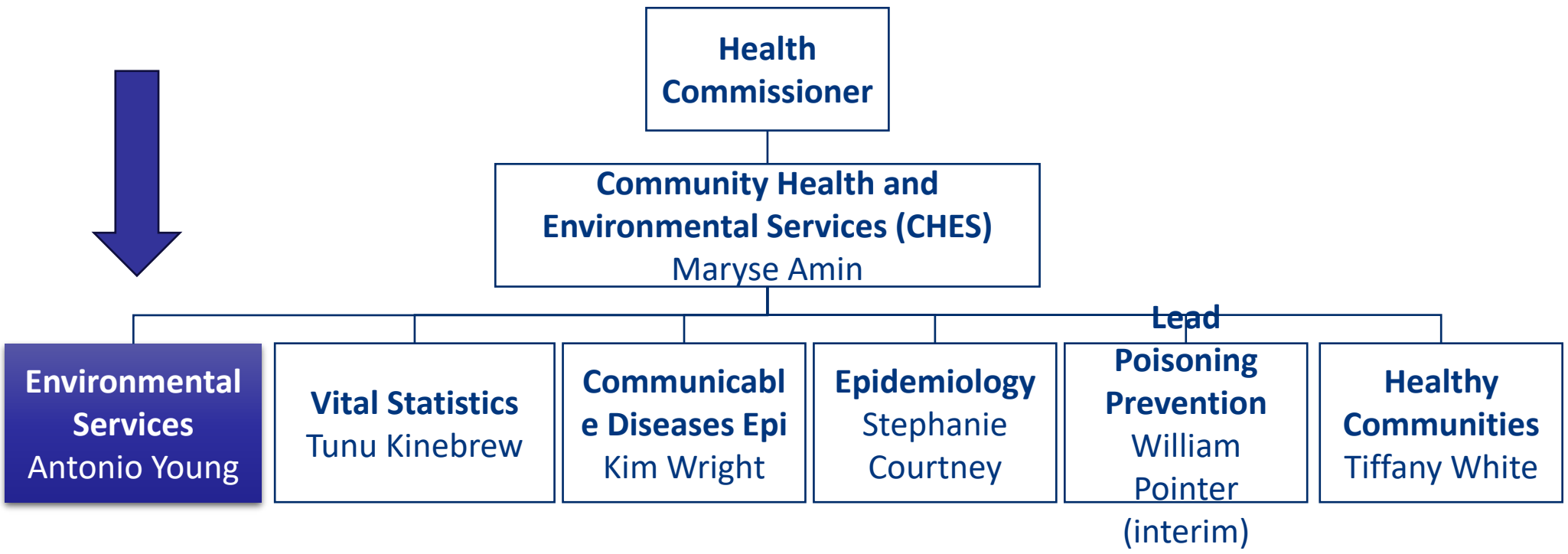
CHD High-Level Reporting Structure



CHES


Health Commissioner
Community Health and Environmental Services (CHES)
Maryse Amin
Environmental Services
Antonio Young
Vital Statistics
Tunu Kinebrew
Communicable Diseases Epi
Kim Wright
Epidemiology
Stephanie Courtney
Lead Poisoning Prevention
William Pointer
(interim)
Healthy Communities
Tiffany White

CHES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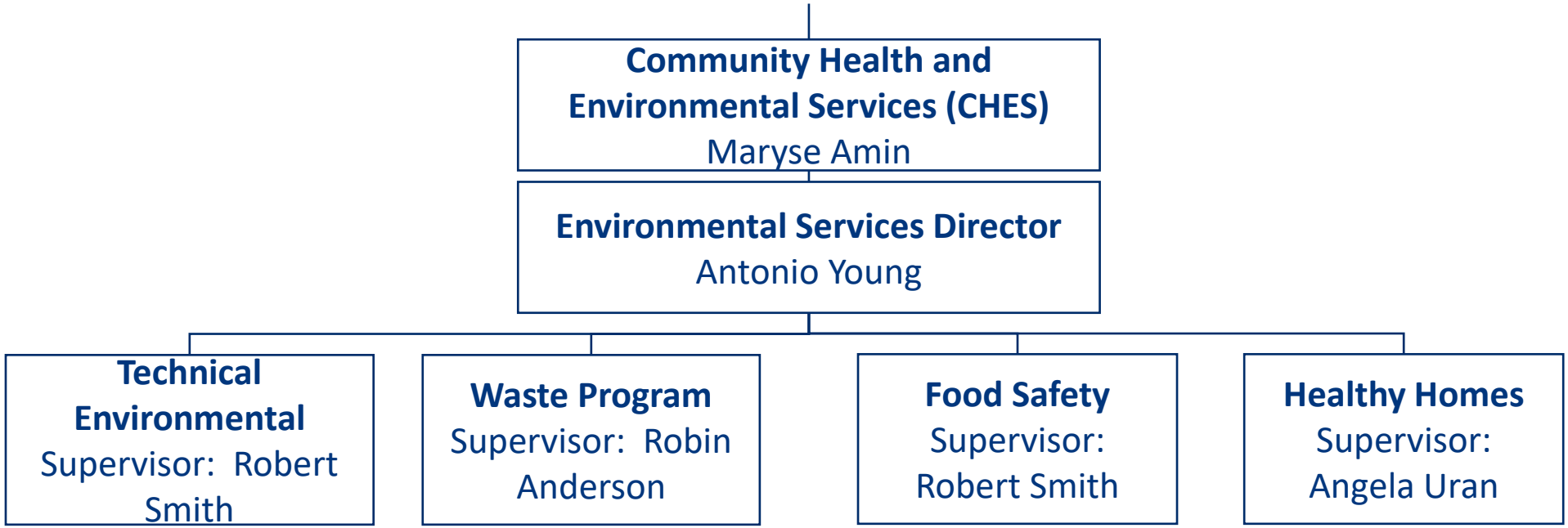
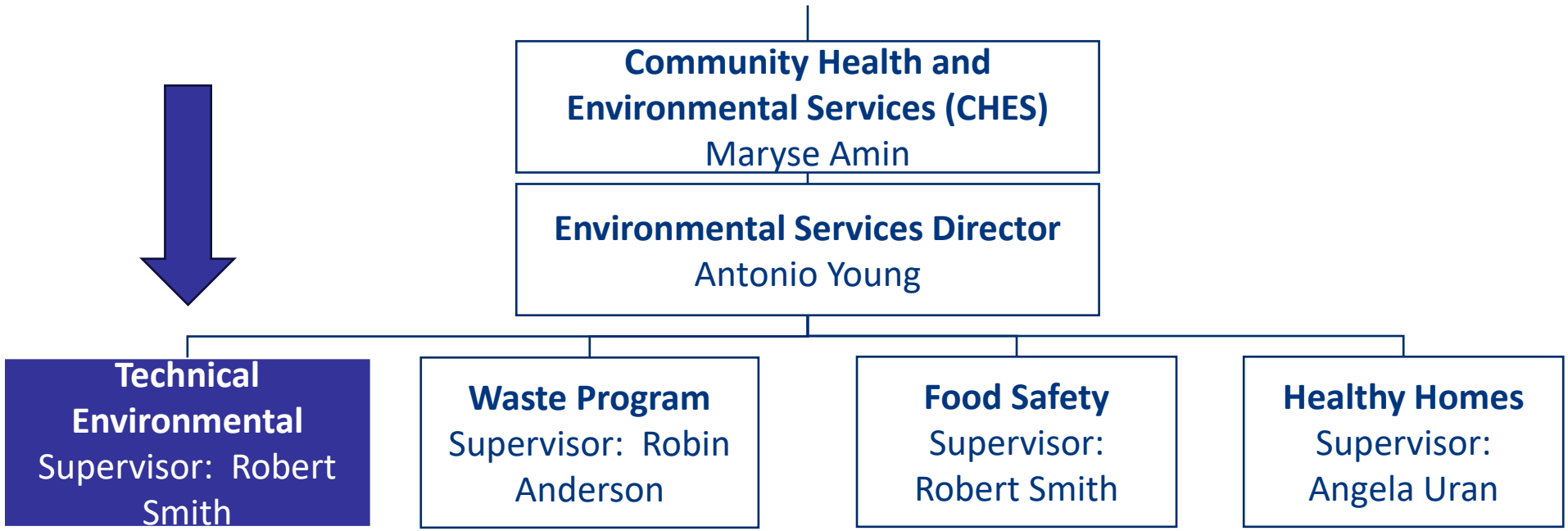
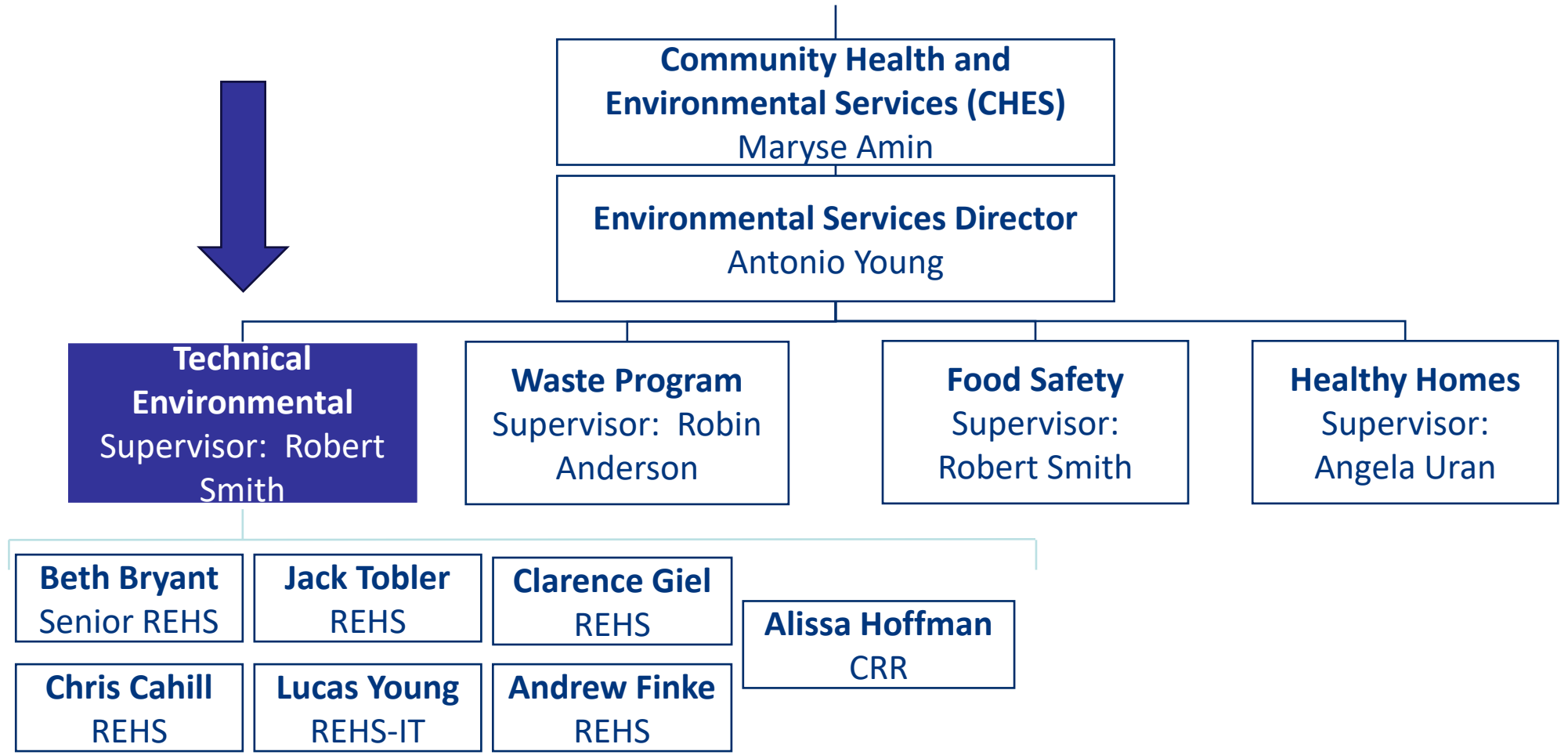


Environmental Services



Environmental Services



city of
CINCINNATI
HEALTH DEPARTMENT

Technical Environmental Services

Board of Health Presentation
February 25, 2025

Who We Are

- Supervising Environmental Health Specialist
- Senior Environmental Health Specialist
- 5 Environmental Health Specialists
- Seasonal Techs– Mosquito & Swimming Pool
- Customer Relations Representative (CRR)

city of CINCINNATI HEALTH DEPARTMENT

Mosquito Surveillance/WNV Program

- Utilize 68 trapping locations
  - 24 WNV+ pools in 2024
- Educate residents
  - Breeding source reduction
  - PPE
- Targeted larviciding
- OEPA grant

city of CINCINNATI HEALTH DEPARTMENT

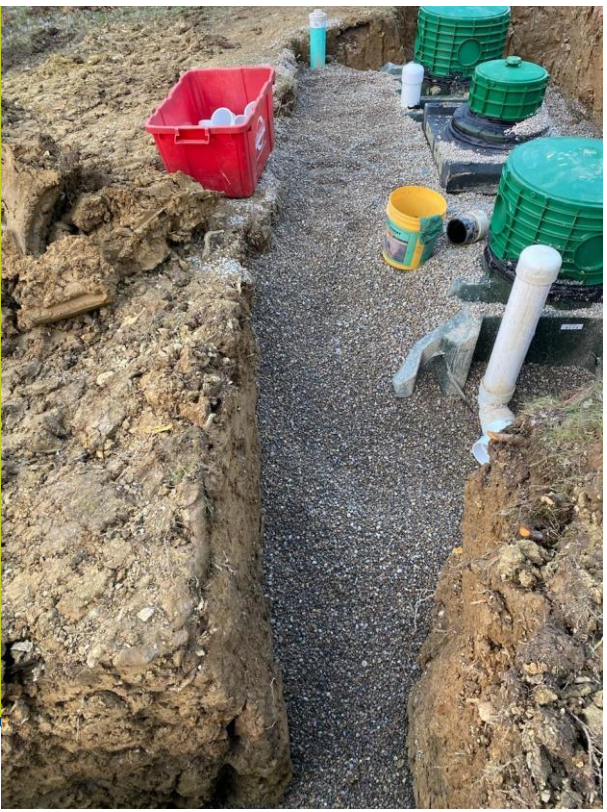
Sewer Baiting

- Place rodenticide in sanitary sewers in response to citizen complaints
- Annual baiting projects
  - downtown CBD
  - Findlay Market

city of CINCINNATI HEALTH DEPARTMENT


CITY OF CINCINNATI
7135
OS·401
CITY - OHIO - 1954

Household Sewage

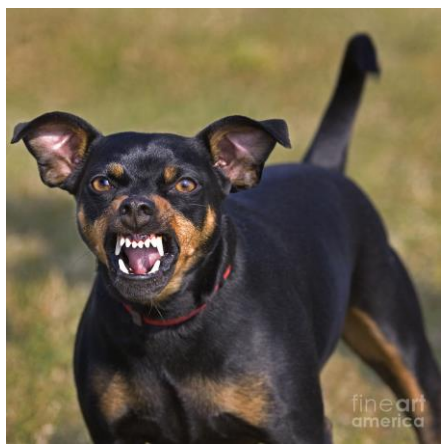


- License/inspect ~500 HSTS
  - Soil absorption & discharging ATUs
- Discharging systems installed since 2007 subject to OEPA regulations
  - Currently 20 NPDES systems
- Register 25 Installers, Haulers, Service Providers

city of CINCINNATI
HEALTH DEPARTMENT

Rabies Control

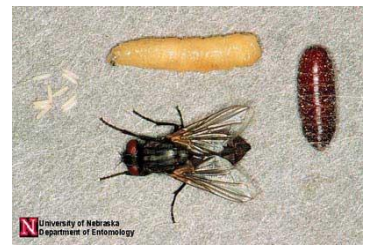
- EHSs investigate 500-700 animal bites/year
  - Quarantine in owner's home or at CACHS
  - Verify that animal has current rabies vaccination
  - Refer bite victims to CDU for PEP consultation
- Ship specimens to ODH for testing
  - 44 in 2024, over 90% of which were bats
  - 1 rabies positive bat in 2024



city of CINCINNATI
HEALTH DEPARTMENT

Pest/Vector Control

- TES staff are licensed Pest Management Professionals
- Perform pest control work in 27 locations for 5 different city departments
- Respond to citizen complaints for bats/raccoons



city of CINCINNATI
HEALTH DEPARTMENT

Swimming Pool Program

- Licensed 222 facilities in 2024
- Indoor/outdoor public swimming pools, spas, spray grounds
- Seasonal techs check water chemistry and pull samples for testing

city of CINCINNATI HEALTH DEPARTMENT

city of
CINCINNATI
HEALTH DEPARTMENT

Technical Environmental Services

Bobbie Sterne Health Center
1525 Elm St., 3rd Floor
cincinnatihealthtechnical@cincinnati-oh.gov
(513) 352-2922

City of Cincinnati Board of Health Finance Committee

Kiana Trabue, Chair of the Board of Health Finance Committee, called the Tuesday, February 18, 2025 Finance Committee meeting to order at 5:02p.m.

Roll Call

Members present: Tim Collier, Dr. Edward Herzig, Mark Menkhaus Jr., Commissioner Dr. Grant Mussman, Joyce Tate, and Kiana Trabue.

Topic	Discussion	Action/Motion
Approval of Minutes	The Chair asked Committee members if everyone had the opportunity to review the minutes from November 19, 2024. Motion: That the Board of Health (BOH) Finance Committee approves the minutes from November 19, 2024.	**Motion:** Mussman **Second:** Herzig **Action:** Pass
Review of Contracts for BOH Approval: Feb. 18, 2025	The Chair began reviewing contracts going to BOH for approval. Get Vaccinated Ohio Grant- Public Health Initiative-65x10771 $298,869.00 Grant, term of 7/1/25 - 6/30/26. Dr. Amin explained, the project is a state funded grant designed to support activities that will improve and sustain immunization rates in children under 2 years of age, school aged children and adolescents. Grant activities will include immunization assessment, targeted reminder, and recall, identifying inequities affecting low immunization levels, educational activities involving families and providers, assuring schools report vaccination rates and school education, and assuring the vaccination of high-risk infants exposed to Hepatitis B disease as methods of increasing immunization rates for both public and private providers. The GV team will work with community providers within the region to increase the community rates until 90% of children are immunized by age two and 80% for adolescents. **Motion**: That the BOH Finance Committee recommends approval. National Association of County and City Health Officials (NACCHO)-5**5x10**769 $200,000 grant, term of 12/2/24 - 8/29/25. Dr. Amin explained that the goal of this project is to strengthen capacity in healthcare IPC by piloting and adapting tools and best practices utilizing Project Firstline resources. Dr. Herzig asked to clariy what IPC stands for. Infection, Prevention, and Control per Dr. Mussman. **Motion**: That the BOH Finance Committee recommends approval.	**Motion**: Herzig **Second**: Collier **Action**: Pass **Motion**: Herzig **Second**: Collier **Action**: Pass
Review of Contracts for BOH Information: Feb. 18,**2024**	The Chair began reviewing the following contracts, going to BOH for information. UC Winkle College of Pharmacy- 35x10529 2nd Amendment David Miller explained that this 2nd amendment would increase the annual salary to $53,000 beginning 7/1/25 and to $58,000 beginning 7/1/2026. The terms remain the same. University of Cincinnati- 55x10764 Ms. Tate explained that this an agreement between UC and WIC Program to provide clinical education and experience to students in the Spanish Assistance Program. The agreement will begin 2/22/25 and and remain effective for 5 years.	

Financial Update	Mr. Menkhaus provided an overview of the financial statement for the period ending in January 2025. **Total Revenue:** As of the end of January was $34,518,192.51. Which is a 4.74% decrease from January 2024. o Total net gain after the capital revenue transfer was $3,391.52. o Expenses as of January 2025 totaled $36,701,800.99 which is a 1.76% increase from January 2024. o As of January, we had $101,648.03 in overtime compared to January of 2024's total of $103,843.93. Neither year had any disaster overtime in the month of January. o Capital revenue transfer for FY25 in the amount of $2,187,000. In FY24 we received partial revenue transfer in December and the balance in February for a total of $1,227,000.00. **Total Expenses**: $36,701.800.99 o 71—Personnel- An increase of 4.09%. This increase is due to COLAs for non-represented and AFSCME staff. o 7500-Fringes saw a corresponding increase of 3.62%. This increase is also attributed to the calendar year 2024 having 27 pay periods. This only happens every 10 years. o 7200-Contractual-An increase of 1.77% (3.98% increase in prior month). o 7300- Materials & Supplies- An increase of 11.74% (13.73% increase in prior month). The increases are due to the timing of invoices paid. In FY25 we have paid Cardinal Health $917,557.03 as of January, yet in FY24 we paid Cardinal Health $610,723.74 as of January. We also expensed $250, 000 to Community Learning Center Institute in FY25 that was not expensed in FY24. o 7400-Fixed Cost: A decrease of 30.73% (25.97% decrease in prior month). The decrease is the timing of invoices paid. In FY25 we have paid Talbert Services $29,071.56 as of January, yet in FY24 we paid Talbert Services $472,113.91 as of January. o 7600-Property: A decrease of 45.96% (56.96% decrease in the previous month). **Total Available**: $3,391.52	
New Business	No new business to discuss.	

Public Comment	Mrs. Baur stated that as of 5 p.m. today, no questions or comments from the public were received.	

Meeting Adjourned: 5:30 p.m.
Next Meeting: **Tuesday,** March **18, 2025, 5**:00 **p.m.**
Minutes prepared by Liz Baur
The meeting can be viewed and is incorporated in the minutes: https://fb.watch/pD-N3kOzkN/

Board of Health Finance Committee Roll Calls for February **1**8**, 202**5

	Roll Call	**Minutes**	Get Vaccinated Ohio Grant-Public Health Initiative-6**5x1**0771	National Association of County and City Health Officials (NACCHO)-5**5x10**769
Tim Collier	P	Y	2Y	2Y
Dr. Edward Herzig	P	2Y	MY	MY
Dr. Camille Jones	X	-	-	-
Mark Menkhaus Jr.	P	Y	Y	Y
Dr. Grant Mussman	P	MY	Y	Y
Joyce Tate	P	Y	Y	Y
Kiana Trabue	P	Y	Y	Y

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

Others Present: Dr. Maryse Amin, David Miller, Ashanti Salter, and Liz Baur (Clerk).

Preparation Date February 3, 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	**Get Vaccinated Ohio Grant – Public Health Initiative 2024-2025**
Contract #	**65x10771**

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

Initiator Person & Phone #	**Elizabeth Gay, 513-352-2901**
Division Head & Phone #	**Maryse Amin, 513-357-7273**
Division	**Community Health and Environmental Services**

Type of Contract/Agreement ___ Accounts Payable **X** Accounts Receivable

___ Service Contract (no $) ___ Lease

Funding Source ___ General Fund **X** Grant Fund ___ Other Funding

Action Required: **X** Board Approval ___ Board Information

CONTRACT DOLLAR AMOUNT

Original Amount **$298,869.00**

TERM

Original Term Start Date **7/1/2025** End Date **6/30/2026**

EXECUTIVE SUMMARY

Get Vaccinated OHIO- Public Health Initiative (GV) Sub-grant
2025-26

The Get Vaccinated Ohio Project is a state funded competitive grant designed to support activities that will improve and sustain immunization rates in children under two years of age, school aged children and adolescents. Grant activities will include immunization assessment, targeted reminder, and recall, identifying disparities/inequities affecting low immunization levels, educational activities involving families and providers, assuring schools report vaccination rates and school education, and assuring the vaccination of high-risk infants exposed to hepatitis B disease as methods of increasing immunization rates for both public and private immunization providers. The Project's focus is on expanding education (peer-to-peer and family), assessment activities and reminder/recall. The Project provides peer-to-peer education utilizing the Maximizing Office Based Immunization (MOBI) program, Teen Immunization Education Session (TIES) and immunization assessment services utilizing the CDC tool: Immunization Quality Improvement for Providers (IQIP) program in the private and public sector. The Project contracts with Western Nursing to provide nursing support for MOBI, TIES and IQIP services *in the county.* The GV Grant support a Perinatal Hepatitis B Prevention Project which provides perinatal case identification, follow up/ education to pregnant females and provider education.

The outcome measure for this grant is to achieve and maintain the Centers for Disease Control (CDC) National Immunization Rate of 90% for **two-year-old children** and 80% for **adolescents**. In 2024, CHD

health centers achieved 90-95% immunization rate for children by age two. This exceeds the 2023 Ohio rate of 71%. The CHD health centers achieved 91%-100% adolescent rates for **13-year-old** for the following vaccines: HPV #1, Meningococcal, and Tdap. The **Up-to-Date HPV** Ohio rate is 63.4% and CHD is 59%-77%. In 2024, of practices assessed in the public/private community, immunization rates for two-year-old children at individual offices were between 25%-88% with an HPV up to date range of 8-65%. Through community outreach, education and assessment in the public and private sector, the GV team will work with community providers within the region to increase the community rates until 90% of children are immunized by age two and 80% for adolescents.

Preparation Date 01/27/2025

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 **National Association of County and City Health Officials (NACCHO)**

Contract # **55x10769**

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

Initiator Person & Phone # **Maryse Amin, 513-357-7273**

Division Head & Phone # **Maryse Amin, 513-357-7273**

Division **Health**

Type of Contract/Agreement ____ Accounts Payable **X** Accounts Receivable

____ Service Contract (no $) ____ Lease

Funding Source ____ General Fund **X** Grant Fund ____ Other Funding

Action Required: ____ Board Approval ____ Board Information

CONTRACT DOLLAR AMOUNT

Original Amount **$200,000**

TERM

Original Term Start Date **12-2-2024** End Date **8-29-2025**

EXECUTIVE SUMMARY

The goal of this project is to strengthen capacity in healthcare IPC by piloting and adapting tools and best practices utilizing Project Firstline resources. All awardees, regardless of cohort, will:

- Complete an initial assessment to identify IPC-related training needs;
- Participate in monthly calls with NACCHO to monitor progress, facilitate peer-exchange, and provide technical assistance;
- Identify, adapt and implement at least four existing Project Firstline tools and resources as part of specific outreach, education, or training activities for healthcare facilities in the jurisdiction or locality;
- Participate in evaluation-related activities to track and measure progress towards expressed outcomes;
- Attend an in-person convening; and
- Submit an end-of-project report.

DATE: February 18, 2025

TO: City of Cincinnati Board of Health Finance Committee

FROM: Mark Menkhaus, Jr., CFO

SUBJECT: Fiscal Presentation 2025

FINANCIAL STATEMENTS REVIEW FOR THE FISCAL YEAR 2025 – JANUARY

2024 January Highlights:

- Revenue as of the end of January was $34,518,192.51. Which is a 4.74% decrease from January of 2024. Expenses as of January 2025 totaled $36,701,800.99 which is a 1.76% increase from January 2024. Total net gain after the capital revenue transfer was $3,391.52.

Year over Year:

- As of January, we had $101,648.03 in overtime compared to January of 2024's total of $103,843.93. Neither year had any disaster overtime as of the month of January.

- We received capital revenue transfer for FY25 in the amount of $2,187,000. In FY24 we received partial revenue transfer in December and the balance in February for a total of $1,227,000.00.

- 7100-Personnel increased by 4.09% (14.0 increase in prior month). This increase is due to COLAs for non-represented and AFSCME staff. 7500-Fringes saw a corresponding increase of 3.62 (7.39% in the prior month). The increase is also attributed to the calendar year 2024 having 27 pay periods. This only happens every 10 years.

- 7200- Contractual Services saw an increase of 1.77% (3.98% increase in prior month), and 7300- Materials & Supplies increased by 11.74% (13.73% increase in prior month). The increases are due to the timing of invoices paid. In FY25 we have paid Cardinal Health $917,557.03 as of January, yet in FY24 we paid Cardinal Health $610,723.74 as of January. We also expensed $250,000 to Community Learning Center Institute in FY25 that was not expensed in FY24.

- 7400-Fixed Costs decreased by 30.73% (25.97% decrease in prior month). The decrease is the timing of invoices paid. In FY25 we have paid Talbert Services $29,071.56 as of January, yet in FY24 we paid Talbert Services $472,113.91 as of January.

- 7600-Property decreased by 45.96% (56.96% decrease in prior month).

Cincinnati Board of Health Financial Statement for the period of January

	FY25 Actual	FY24 Actual	Variance
Revenue			
8236-Pools/Spa	$1,642.50	$2,470.23	-33.51%
8237-Household Sewage System	$38,473.00	$38,594.00	-0.31%
8239-Tatto/ Body, Environmental Waste License Fee	$38,996.00	$57,651.00	-32.36%
8241-Food Service (Mobile-Temporary)	$54,391.94	$93,815.00	-42.02%
8242-Vending Machine Licenses	$53.76	$88.34	-39.14%
8244-Food Establishments	$115,038.00	$10,451.90	1000.64%
8249-Food, NOC	$29,484.50	$39,058.50	-24.51%
8432-Vending Machine Proceeds	$0.00	$0.00	0.00%
8536-Grants\State	$517,458.04	$990,554.74	-47.76%
8556-Grants\Federal	$6,592,618.17	$4,592,391.85	43.56%
8563-Bd of Ed Svc (School Nurses Sal.)	$1,747,068.61	$2,669,061.21	-34.54%
8564-Ham Co Service	$81,007.51	$167,131.26	-51.53%
8571-Specific Purpose\Private Org.	$153,097.86	$843,719.89	-81.85%
8617-Non-Department Fringe Benefit Reimbursement	$1,236.01	$732.65	68.70%
8618-Overhead Charges Indirect Costs	$61,340.00	$0.00	0.00%
8731-Birth & Death Certificates	$305,907.02	$309,174.00	-1.06%
8732-Vital Stats - Other	$6,048.69	$2,581.89	134.27%
8733-Self-Pay Patient	$528,522.90	$518,629.87	1.91%
8734-Medicare	$3,037,225.42	$3,011,335.47	0.86%
8736-Medicaid	$3,495,232.24	$6,362,060.53	-45.06%
8737-Private Pay Insurance	$673,026.74	$703,024.31	-4.27%
8738-Medicaid Managed Care	$4,979,578.49	$3,465,829.80	43.68%
8739-Misc. (Medical rec.\smoke free inv.)	$1,155,472.68	$1,010,993.92	14.29%
8784-Private Lot Litter & Weed	$0.00	$0.00	0.00%
8811-Unclaimed Remains	$0.00	$0.00	0.00%
8914-Bond/Note Proceeds	$0.00	$1,227,000.00	-100.00%
8917-Deferred Sewer Assessment Collections	$226.60	$342.49	-33.84%
8932-Prior Year Reimbursement	$185,076.65	$32,969.95	461.35%
% That is attributable from 416	$10,719,969.18	$10,085,850.21	6.29%
Total Revenue	$34,518,192.51	$36,235,513.01	-4.74%
Expenses			
71-Personnel	$19,641,819.58	$18,869,302.87	4.09%
72-Contractual	$5,222,340.06	$5,131,323.95	1.77%
73-Material	$2,337,618.28	$2,091,970.36	11.74%
74-Fixed Cost	$1,350,595.12	$1,949,662.16	-30.73%
75-Fringes	$7,966,915.76	$7,688,535.61	3.62%
76-Property	$182,512.19	$337,726.93	-45.96%
Total Expenses	$36,701,800.99	$36,068,521.88	1.76%
Net Gain (Losses)	**($2,183,608.48)**	**$166,991.13**	-1407.62%
8936-Transfer	**$2,187,000.00**	**$125,000.00**	
Total Available	**$3,391.52**	**$291,991.13**	-98.84%

Interdepartmental Correspondence Sheet

Date: 2/25/2025

To: MEMBERS of the BOARD of HEALTH

From: Grant Mussman, MD MHSA, Health Commissioner

Copies: Leadership Team, HR File

Subject: PERSONNEL ACTIONS for February 25, 2025 BOARD of HEALTH MEETING

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

KELSEY KUNATH	**DIETITIAN**	**WIC PROGRAM**
(Promotional vacancy)		
Salary Bi-Weekly Range:	$2,092.55 to $2,794.68	Grant Fund

Kelsey Kunath received her undergraduate degree from the University of North Dakota and her master's degree from the University of Cincinnati. She has experience working as Certified Nurse's Assistant and managing missionary groups on campus. During her internship program she had a rotation in a WIC office. She has an interest in community nutrition to assist with access to food and education to make an early impact on life.

DAVID NOORI	**PUBLIC HEALTH PHYSICIAN**	**CCPC**
(Retirement vacancy)		
Salary Bi-Weekly Range:	$5,946.47 to $8,027.74	Revenue Fund

Dr. Navid Noori is a dedicated physician with a strong background in family medicine, global health, and public health. He is currently a junior clinical faculty member in the Department of Family Medicine at the University of Cincinnati, where he is completing a Family Medicine Global Health Fellowship.

Dr. Noori completed his residency in Family Medicine at Prisma Health Toumey Family Medicine Residency in Sumter, SC, where he presented on medical ethics and contributed to program-wide discussions. He also holds a Master of Public Health from George Washington University, where his coursework and capstone project focused on global health and public health emergencies, including a COVID-19 testing initiative with the Los Angeles County Department of Public Health.

A graduate of Western University of Health Sciences, Dr. Noori earned his Doctor of Osteopathic Medicine while participating in global health initiatives, including a medical mission to rural Thailand. He also holds a Master of Science in Infectious Diseases from Georgetown University, where he studied bioterrorism and emerging infectious diseases, and a Bachelor of Arts in Asian Studies from Occidental College, with a focus on Japanese and Chinese languages.

Dr. Noori's leadership experience includes serving as Treasurer for the Student Osteopathic Medical Association and Co-President of Musicians in Medicine, where he fostered community engagement through music. His academic contributions include a co-authored publication on diabetes and susceptibility to tuberculosis in the Journal of Clinical Medicine. Multilingual and culturally adept, Dr. Noori brings a unique global perspective to his work in medicine and public health.

Beyond his professional pursuits, Dr. Noori enjoys playing the piano and saxophone, salsa dancing, and exploring diverse cultural experiences.

Date: February 25, 2025
To: Board of Health
From: Grand Mussman, MD, Health Commissioner
Subject: Health Commissioner's Report, Reflects January 2025

WIC Updates January 2025

1. The WIC caseload in January was 15,338.
   Women:3,483 Infants:3,892 Children:7,944
2. January breastfeeding initiation rate for WIC infants was 64.3%. Breastfeeding at 6 months was 37.5. Breastfeeding rates have been steady. WIC continues to offer on-line and in-person breastfeeding classes along with walk-in hours for breastfeeding assistance.

Community Health and Environmental Services (CHES) Updates for CHD BOH Meeting 2.25.2025

Community Health and Environmental Services (CHES) updates:

- 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
- 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)

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\msoA228.tmp (cincinnati-oh.gov)

2022 Annual Lead Report:

2022-LEAD-ANNUAL-REPORT-FINAL.pdf (cincinnati-oh.gov)

Epidemiologic Infant data:
These numbers are provisional for 2021-2024:
**** May 2024's report is delayed due to ODH data warehouse update**

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 OOJ 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 = 34
Total Hamilton County 2024 = 67

The provisional number of births for 2024 (births extracted from state database (by residence city/county) as of 1.21.25):
City of Cincinnati = 4,086
Hamilton County births outside of the City limits = 5,880
Hamilton County inclusive of the City = 9,966

The provisional infant mortality rate for 2024 based on our current numbers:
City of Cincinnati IMR = 8.08 per 1,000 live births
Hamilton County outside the City limits = 5.78 per 1,000 live births
Hamilton County IMR = 6.72 per 1,000 live births (inclusive of the city numbers)

CCPC UPDATE

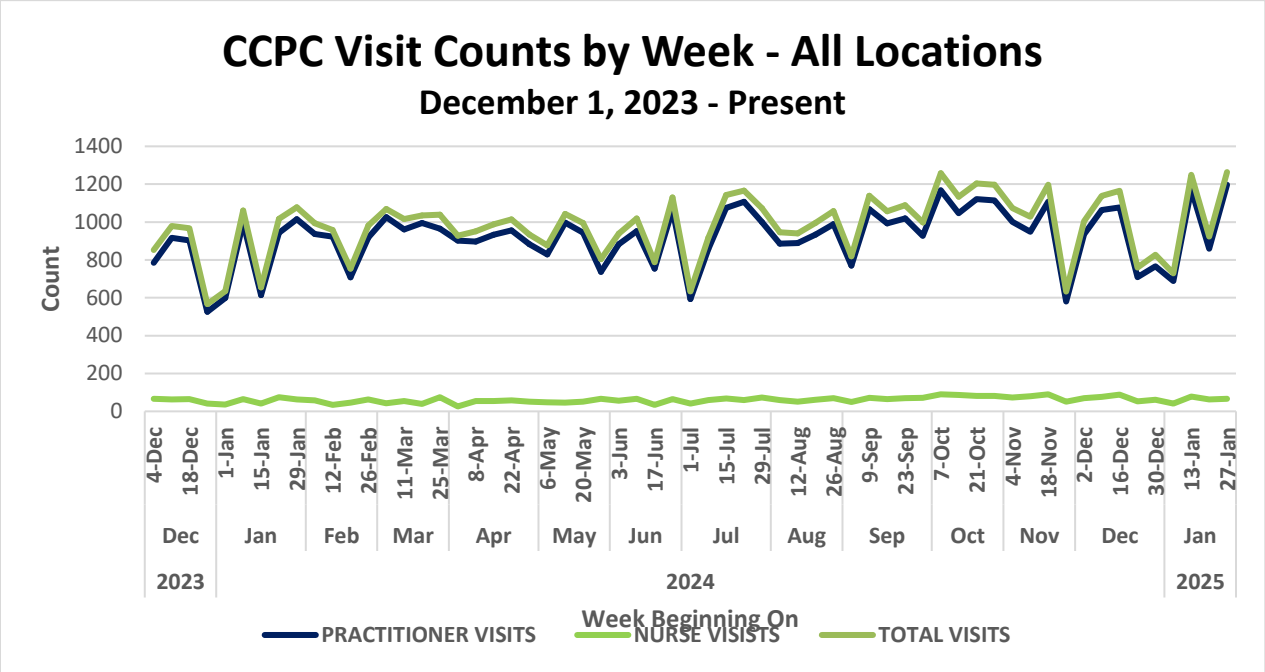


Figure 1. Number of Completed Patient Visits to All CCPC Community Health Center Sites

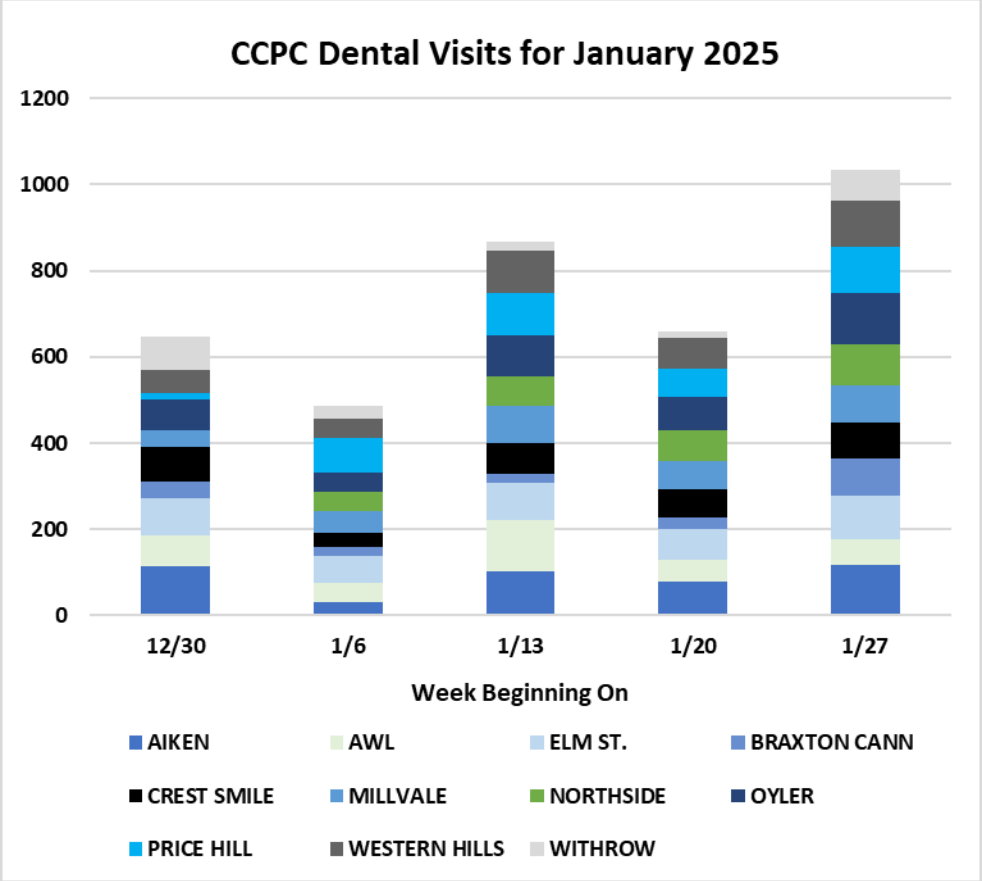
Table 1. Number of Completed Patient Visits by Location for January 2025 and FYTD

CCPC Community Health Centers	12/30	1/6	1/13	1/20	1/27	January 2025 Total	January 2024 Total	2025 FYTD Total	2024 FYTD Total
VISITS	**766**	**688**	**1172**	**860**	**1197**	**4683**	**4167**	**29665**	**26472**
AMBROSE CLEMENT	74	86	121	77	119	477	289	3347	1291
AMBROSE CLEMENT BH	21	27	30	24	35	137	99	877	611
BRAXTON CANN	72	49	101	74	99	395	427	2721	2739
BRAXTON CANN BH	3	2	0	0	3	8	0	40	0
ELM ST. BH	8	4	11	2	9	34	13	332	93
ELM ST.	120	103	227	120	206	776	709	4881	4904
MILLVALE	107	97	149	132	184	669	577	3907	3964
MILLVALE BH	5	9	10	11	13	48	41	278	358
NORTHSIDE	111	99	173	135	162	680	512	4614	3933
NORTHSIDE BH	10	7	13	13	17	60	20	175	266
PRICE HILL	212	182	300	244	312	1250	1320	7590	7247
PRICE HILL BH	23	23	37	28	38	149	160	903	1066
NEW PATIENTS	**53**	**49**	**68**	**65**	**85**	**320**	**271**	**1973**	**1533**
AMBROSE CLEMENT	5	3	12	9	12	41	13	320	86
AMBROSE CLEMENT BH	0	0	1	0	1	2	0	10	10
BRAXTON CANN	8	5	10	5	11	39	32	242	188
BRAXTON CANN BH	0	0	0	0	0	0	0	0	0
ELM ST. BH	0	0	0	1	0	1	0	4	1
ELM ST.	5	7	7	9	8	36	31	246	213
MILLVALE	17	11	16	18	18	80	66	339	383
MILLVALE BH	0	0	0	0	0	0	0	0	0
NORTHSIDE	3	6	10	5	13	37	29	317	246
NORTHSIDE BH	0	0	0	0	0	0	1	0	8
PRICE HILL	15	17	12	18	22	84	99	490	391
PRICE HILL BH	0	0	0	0	0	0	0	5	7

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

CCPC PHARMACY LOCATION	12/30	1/6	1/13	1/20	1/27	January 2025 Total	January 2024 Total	2025 FYTD Total	2024 FYTD Total
NUMBER OF FILLS	1932	2076	2685	1939	2488	11120	10686	66642	65306
AMBROSE CLEMENT	282	329	388	360	425	1784	1291	10679	8270
BRAXTON CANN	265	266	345	191	322	1389	1541	8441	9487
ELM ST.	325	408	484	291	404	1912	2462	12307	15207
MILLVALE	339	389	390	279	368	1765	1569	10229	9894
NORTHSIDE	281	216	364	290	320	1471	1322	8818	8054
PRICE HILL	440	468	714	528	649	2799	2501	16168	14394

Figure 2. Number of Completed CCPC Dental Visits for January 2025 by Location



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 2024 – 2025

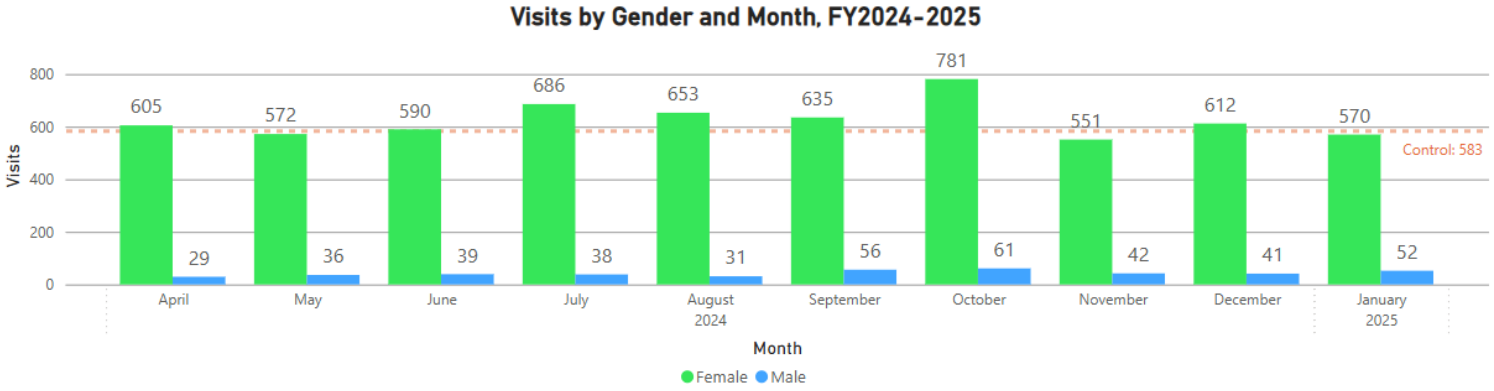
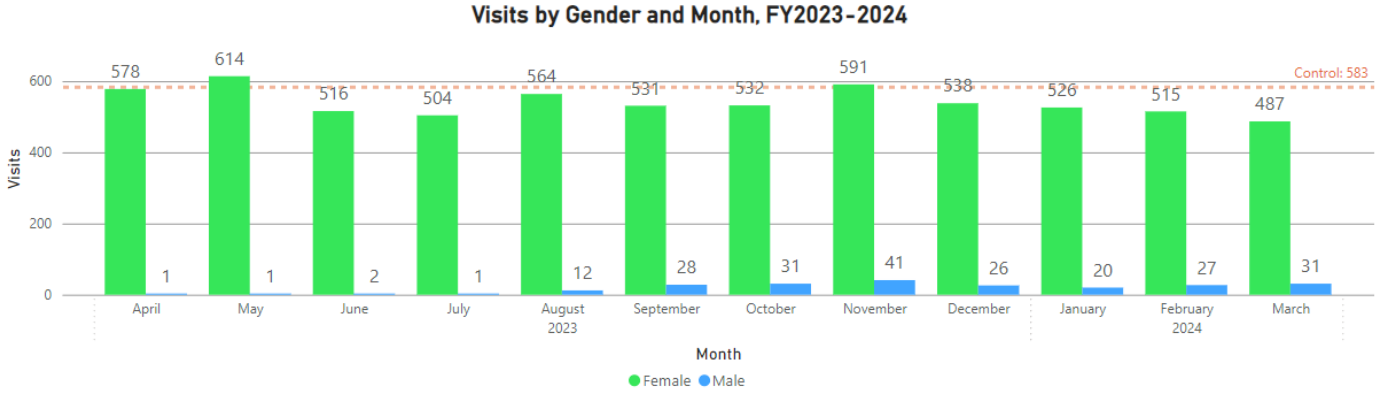


Figure 1b. City of Cincinnati Primary Care Health Center Reproductive Health Visits by Gender and Month, Fiscal Year 2023 – 2024



FY23/24 Visits with Men: 221 patients
FY23/24 Visits with Women: 6496 patients
FY23/24 Visits Combined (men/women): 6717 patients
FY23/24 Control (Expected) Visits: 7000 patients
FY23/24 Visits as % of Control Total: 96.0%
FY24/25 Visits with Men: 425 patients
FY24/25 Visits with Women: 6255 patients
FY24/25 Visits Combined (men/women): 6680 patients
FY24/25 Control (Expected) Visits: 5830 patients
FY24/25 Visits as % of Control Total: 115.0%

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 2024 – 2025

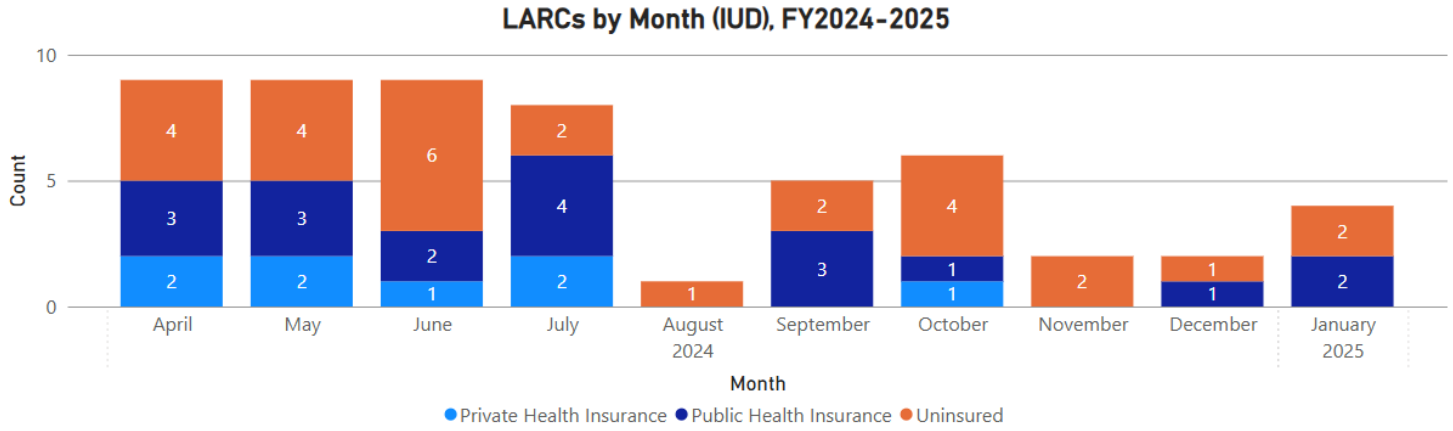


Figure 2b. Long-acting Reversible Contraception (LARC) (Intrauterine Devices) provision by Month and Insurance Type for patients seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2023 – 2024

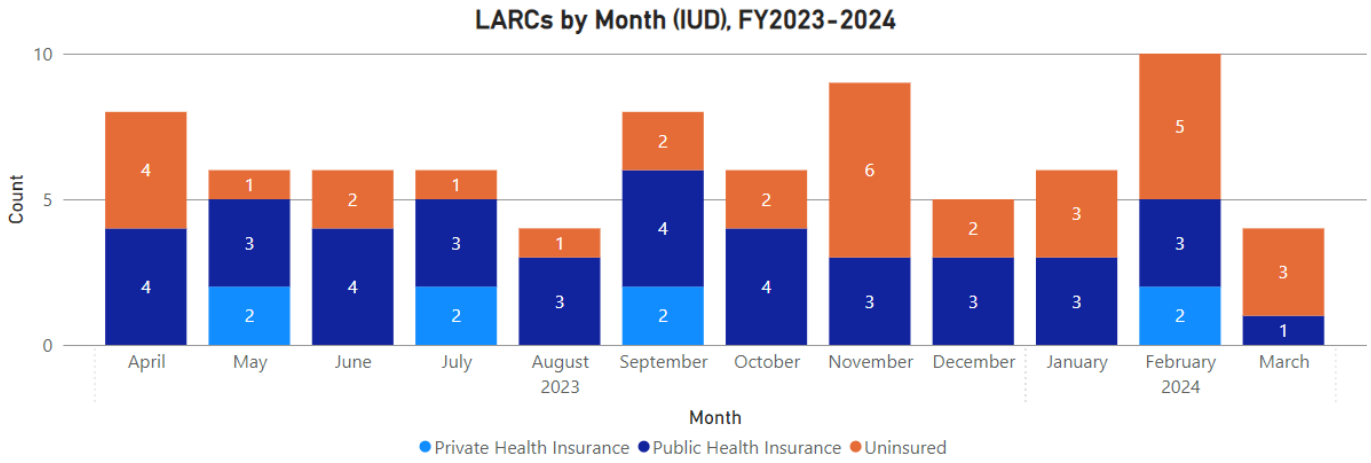


Figure 3a. Long-acting Reversible Contraception (LARC) (Implants) provision by Month and Insurance Type for patients seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2024 – 2025

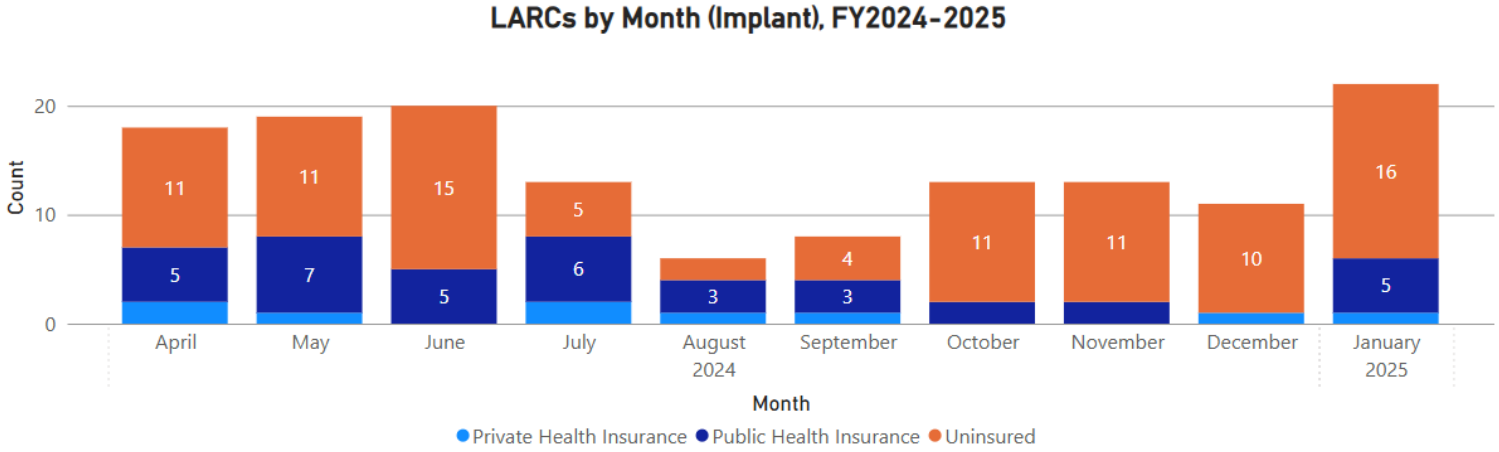


Figure 3b. Long-acting Reversible Contraception (LARC) (Implants) provision by Month and Insurance Type for patients seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2023 - 2024

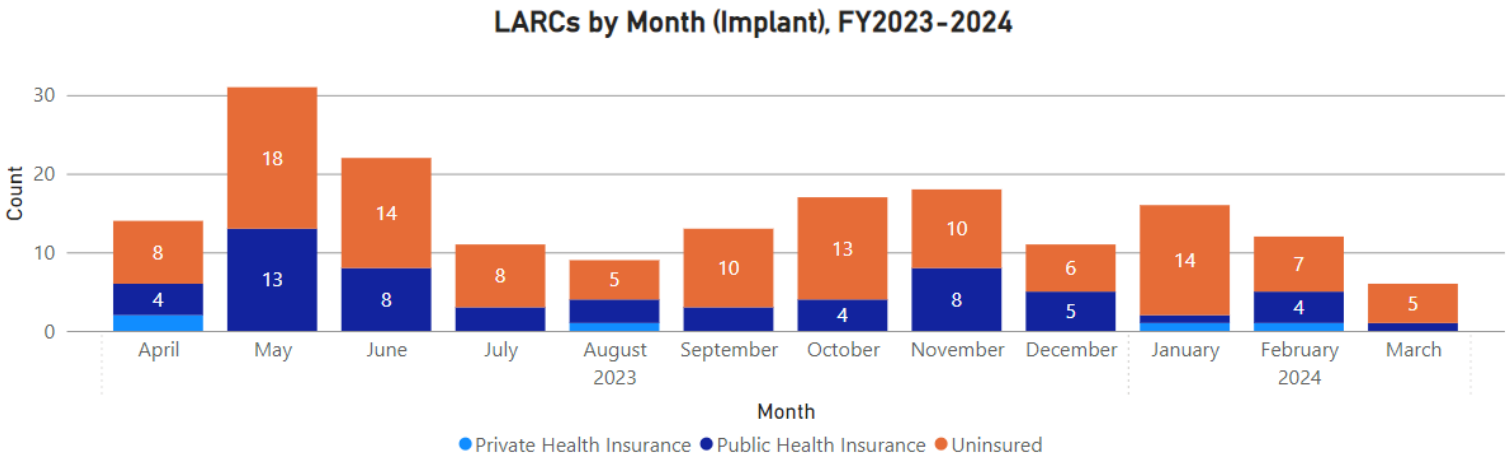


Table 1. Selected Demographic Characteristics of Unduplicated RHWP Patients, December 2024

	Female	% in col.	Male	% in col.	Total	% in col.
Race						
AI/AN	4	0.70%		0.00%	4	0.64%
Asian	8	1.40%	0	0.00%	8	1.29%
Black	275	48.25%	42	80.77%	317	50.96%
PI/HN	13	2.28%		0.00%	13	2.09%
Unknown	80	14.04%	4	7.69%	84	13.50%
White	190	33.33%	6	11.54%	196	31.51%
Ethnicity						
Hispanic	206	36.14%	2	3.85%	208	33.44%
Non-Hispanic	364	63.86%	50	96.15%	414	66.56%
Income						
<=100% FPL	*will report next month when HHS table is updated					
101-249% FPL						
>=250% FPL						
Insurance						
Private	72	12.63%	9	17.31%	81	13.02%
Public	221	38.77%	18	34.62%	239	38.42%
Uninsured	277	48.60%	25	48.08%	302	48.55%
Age (years)						
<15	1	0.18%		0.00%	0	0.16%
15-49	537	94.21%	39	75.00%	576	92.60%
>50	32	5.61%	13	25.00%	45	7.23%
Limited English						
No	336	58.95%	51	98.08%	387	62.22%
Yes	234	41.05%	1	1.92%	235	37.78%

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

	Female	% in col.	Male	% in col.	Total	% in col.
Health Center						
Ambrose Clement	77	13.51%	36	69.23%	113	18.17%
Braxton Cann	23	4.04%		0.00%	23	3.70%
Bobbie Sterne	123	21.58%	8	15.38%	131	21.06%
Millvale	59	10.35%	1	1.92%	60	9.55%
Northside	108	18.95%	7	13.46%	115	18.49%
Price Hill	180	31.58%		0.00%	180	28.94%

* 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:

The PHAB annual report was submitted for 2024, it focused on the foundational capabilities of the health department surrounding quality improvement efforts. The 2025 annual report will include an application for PHAB to conduct a reaccreditation readiness assessment as our annual report submission in preparation for reaccreditation in 2026.

CHD CHA Update:

Cincinnati Health Department has completed the CHD Community Health Assessment (CHA). The CHA was posted on the CHD website and can be accessed at CHD Reports & Publications - Health

Cincy CHIP Update:

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

The CHIP Behavioral Health Action Team:

The Sources of Strength instructor training is being conducted by our partners at 1N5 starting on January 16, 2025. Xavier MSW students and Santa Maria staff will be trained during this first wave of training in preparation of facilitating this 12-week curriculum to the five Cincinnati Public Schools third grade classes selected to participate in the training.

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

CHD will continue its participation in the Regional Behavioral Health Continuity of Care group, 2024 Regional CHNA Advisory committee, and 2024 CHNA Public Health Task Force as specific strategies are developed.

Quality Improvement/ Quality Assurance

Public Health QI is working with CCHMC to build the systems dashboard for public health programs. Through our continued partnership with Children's Hospital, several CHD staff members are expected to complete their ImpactU Improvement Science course in April 2025. Our CHD QI Steering Committee continues to meet monthly to review progress on highlighted projects and provide feedback to colleagues.

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	570	642	0	0	0	0	0	0	0	2
August	906	1124	0	0	6	2	10	10	0	0
September	786	1176	1	0	5	5	17	15	2	3
October	822	1214	6	1	0	4	5	6	1	0
November	909	1329	3	0	0	2	5	3	2	0

December	687	1120	1	6	0	5	1	2	1	0
January	651	1013	3	0	0	2	1	1	1	0
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, (7/18) and IQIP (7/30) required ODH training completed. ..training required PRIOR to initiating MOBI, TIES, IQIP outreach**

October -Immunization Coverage Disparities report submitted

December- Immunization Coverage Disparity Education Plan submitted

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**
2/5/2025	2533 Kemper Ln., Cincinnati, OH 45206 **Guest Presentation:** Cherished Heart Doulas **February newsletter sent to 120+ members 2/11/2025.**	**Next meeting is March 5, at** MSD Admin Building 1081 Woodrow Street - Room 106 **Meeting frequency: 1st Wednesday of each month.**

Infant Vitality – Malina Harris

ODH- 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**
89 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 & Babes, Helping Young Mothers Mentor, Inc., Home Health/CHD, Interfaith Hospitality Network of Greater Cincinnati (IHNGC),Mercy Health – Perinatal Outreach Program, 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**	**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 12/3/24 Meetings are Quarterly Next Meeting 3/4/25
DCY		
# distributed since	**Project Partners and Status**	**Next Steps**

last report		
150 diapers & 1 potty training kit 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** Planning Diaper drive at one of the CHD Health Centers during a health fair. Facility has moved to Walnut Hills. **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**
1-Last Meeting: 10/24/24	**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: 3/27/25
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**
12/12/24	**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 3/13/25

Program supported projects/ meetings:

1/16/25- Cradle Learning Collaborative Meeting
1/16/25- Ohio Department of Health GMIS training
1/17/25- Tobacco/Vape Education presentation with Midway School
1/23/25- Fatherhood Collaborative Training
1/27/25- GMIS Portal Training
1/27/25- Safe sleep baby simulation training
1/29/25- GMIS Portal Training
1/30/25- HCAN Community Health Fair Final Project
2/5/25- LWPC Meeting
2/7/25- Tobacco/Vape Education with Mt Washington School
2/10/25- Fatherhood Collaborative Training

2/12/25- Safe Sleep Training with Bethany House
2/12/25- Women's Equity Community of Practice 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
2	Produce Perks, Winton Hills Community Church and Council, and Mustard Seed Farm --- **Status: Active**	Plan for 2025 distribution and events by meeting with community members and leaders to determine space for distribution and how to best align with community needs. **Meeting frequency:** as needed for planning

CHD Healthy Communities Freezer
The Cincinnati Health Department (CHD) Healthy Communities Program will partner with 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
10	CRC, La Soupe, CareSource, Food for the Soul, and Hamilton County ReSource --- **Status: Active** (award received)	Complete contracts with CareSource and plan kick-off event. **Meetings frequency:** standing weekly meetings for contract negations, 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
3	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; current project funding covers works in Avondale, East and Lower Price Hill (expansion into Roll Hill coming soon) **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**
2	Newsletter sent to community members and partners by the 2nd Tuesday of each month. Posted on FEC site routinely --- **Status: Active**	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**
2	Meet with other department champions, stay informed on city-wide engagement updates, and share resources with colleagues --- **Status: Active**	**Meeting frequency:** standing monthly meetings

Program supported projects/ meetings (FEC returned 1/21/25):
1/23/25: HCJFS Fatherhood Collaborative Fatherhood Training
1/27/25: Baby Simulation/Program Collaboration discussion
1/30/25: HCAN Community Health Fair
2/5/25: Lactation Seminar Series 2024-2025: A Tour of Breast Pumps webinar
2/7/25: Assist Courthney with Vape education @ Mt. Washington School
2/10/25: HCJFS Fatherhood Collaborative Fatherhood Training
2/12/25: Women's Health Equity Community of Practice meeting
2/19/25: NACCHO Behavioral Health 360 State of the Union meeting

Tobacco Free Living (TFL) – Courthney 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: 65 72	**Partners:** Midway School Clark High School	**Plan:** **To present preventative tobacco education for youth. Present the opportunity to take over the vape disposal program.** **Meeting frequency:** As Needed

125 **262 Total**	Mt. Washington School ---------- **Status: Active**	

Program supported projects/ meetings:
01/13/25: Air We Share meeting
01/14/25: TFOA Quarterly Meeting
01/15/25: School Vape Disposal Webinar
01/17/25: Vape Education at Midway School
01/21/25: Cancer Center Community Advisory Board Meeting
01/23/25: Fatherhood Collaborative Training
01/24/25: Eviction Prevention Meeting with Council Woman Meeka Owens
01/24/25: CHIP Housing Meeting
02/04/25: Vape Education at Clark High School
02/05/25: LWPC Meeting
02/06/25: Meeting w/ Vanessa Denier -Action for Smokefree Multi-Unit Housing
02/06/25: Meeting w/ Dr. Ashley at Xavier University-Potential Partnership and Vape Education
02/06/25: CHD Pharmacy Cessation Meeting
02/06/25: Stanford University Parent Advisory Meeting-Creating Tobacco Toolkit for Parents
02/07/25: Vape Education at Mt. Washington School
02/07/25: Eviction Prevention Meeting with Council Woman Meeka Owens
02/07/25: CHIP Housing Meeting
02/10/25: Fatherhood Collaborative Training
2/13/25: CPS School Community Partner Meeting

Tobacco 21/Tobacco Retail License (TRL) -

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
	239 - Retailers Licensed 302 - Identified retailers 10 – 2025 TRL Inspections Completed 134 Underage Buy Attempts Completed, 87% Compliance	**Plan:** • Continue Inspections/Compliance Checks until further notice. • Begin Issuing Citations for Non-licensed Retailers after Education • Hire additional underage buyer(s).

Worksite Wellness & Active Living – Scott Dean

Healthy Eating Active Living (HEAL) Capacity Building Grant for Carthage is now the **ODH Creating Healthy Communities Grant**
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

16	**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.	• 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 • Have Carthage Community Complete Artist questionnaire to help narrow down artists to design street mural **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**
13	**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	• Meeting with school partners to conduct engagement on design and selection of traffic garden. • Continue work on developing a comprehensive curriculum. • Conducting comprehensive community engagement with students and parents. **Meeting frequency: Monthly**

Program supported projects/ meetings:
1/23/25 – Fatherhood Training
1/23/25 – Winton Hills Plan
1/24/25 – Tri-State Trails Regional Trail and Bikeway Committee meeting
1/27/25 – CHC Group Weekly Meeting
1/27/25 – Carthage Mural Discussion
1/27/25 – CROWN Millcreek Greenway Meeting
1/28/25 – Roll Hill Survey Development
1/28/25 – Roll Hill Traffic Garden Advisory Committee Meeting
1/30/25 – Traffic Garden Engagement Planning Session
2/3/25 – Roll Hill Traffic Garden Meeting
2/3/25 – Carthage Wayfinding Community Walk
2/3/25 – CHC Group Weekly Meeting
2/4/25 – Wayfinding Grant discussion
2/5/25 – Roll Hill Engagement Activity Planning Meeting
2/6/25 – CHD and Homebase Carthage Check-In
2/6/25 – CPS Maintaining Outdoor Learning Spaces Meeting
2/6/25 – Roll Hill Parent Teacher Conference Engagement Survey

2/7/25 – Roll Hill Student Engagement Activity
2/7/25 – ArtWorks Mural discussion
2/7/25 – Eviction Prevention Meeting
2/7/25 – CHIP Housing Meeting
2/10/25 – CHC Group Weekly Meeting
2/10/25 – Fatherhood Training
2/10/25 – DOTE Wayfinding Discussion
2/10/25 – Mural Discussion
2/11/25 – Review Student Engagement Activity and Develop Survey for Older Students
2/11/25 – Roll Hill Traffic Garden Advisory Committee Meeting
2/12/25 – CHC All Project Call
2/13/25 – Winton Hills Plan
2/18/25 – CHC Group Weekly Meeting

Behavioral Health and Recovery Support

Project/ Meeting Title: Buckeye Health Plan and Men's Health		
# of Meetings Since Last BOH Meeting	**Project Partners and Status**	**Next Steps**
1 Meetings	**Partners:** Buckeye Health Plan – "What's Your Numbers." **Status: Ongoing**	**Plan:** • Start Planning Jan '25 • Planning to add churches, Salons, Etc. **Meeting frequency:** Monthly
Project/ Meeting Title: Brother You're on My Mind		
# of Events Since Last BOH Meeting	**Project Partners and Status**	**Next Steps**
1 Meeting	**Partners:** Omega Psi Phi – Barbershop Talk Series (Mental, Physical and Spiritual Health **Status:** (Ongoing Monthly)	**Plan:** • Adding CRP and Men's Health -Chronic Disease in '25 • Conversation dealing w/ Mental Health and Youth Mentorship **Meeting frequency:** Monthly x1
Project/ Meeting Title: Men's Health Partnership/Resource (Maple Towers**)**		
# of Events Since Last BOH Meeting	**Project Partners and Status**	**Next Steps**
1 Meeting	**Partners: Maple Towers** Awareness, Education and Prevention **Status: Ongoing**	**Plan:** • Programming on Chair Yoga. Meditation, Exercise – • T.Davis will provide a follow up regarding other organizations will teach -Pending • Add a Nutrition/Healthy • Music Component • Starting 2025 TBA **Meeting frequency: Monthly x1**
Project/ Meeting Title: Recovery \Ohio Drug Trends Monthly Meeting		
# of Meetings Since Last Meeting	**Project Partners and Status**	**Next Steps**
	Partners: State of Ohio Partners (200+)	**Plan:**

	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 - State Reporting**	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**

1/21/25 – Ohio Jobs Means – Reschedule TBA
1/21/25 – Community Freezers Cincy
1/21/25 – Active Living Network Call
1/21/25 – IH25 Meeting
1/21/25 – Wayfinding Signs Meeting
1/22/25 – Healthy Communities Group Meeting
1/22/25 - Meeting (Behavioral and Mental Health)
1/23/25 – JFS – Fatherhood Training – Rescheduled
1/23/25 College Hill – Future Health Event Site Tour
1/27/25 – CHD CHC Group Weekly Meeting
1/27/25 – Baby Simulation/Program
1/27/25 - Mural Discussion
1/28/25 – CYC Breakfast
1/28/25 – Ohio Means Job Site Visit
1/28/25 - Roll Hill Garden Advisory Committee Meeting
1/30/25 – Project DAWN Meeting
2/3/25 – 1:1 M. Harris
2/4/25 - Carthage Walk for Wayfinding [In-person
2/4/25 – Community Freezer Cincy
2/4/25 - CHD CHC Group Weekly Meeting
2/4/25 - Grant Discussion for Wayfinding
2/4/25 – CEHEE CAB Meeting
2/4/25 - Hamilton County Fatherhood Collaborative - Fathers' UpLift
2/5/25 – LWPC Meeting
2/5/25 – Roll Hill Meeting
2/6/25 – Warming Center Meeting w/ Xavier University
2/6/25 - Roll Hill Parent Survey Meeting
2/7/25 – Roll Hill – Engagement
2/10/25 - CHD CHC Group Weekly Meeting
2/10/25 – Fatherhood Training
2/10/25 - SDOH Meeting
2/11/25 – Monthly Men's Health Update
2/11/25 – Roll Hill Traffic Garden Advisory Committee
2/12/25 – 1:1 w/J. Berry
2/18/25 – Hamilton County of Reentry – Career & Education Fair
2/18/25 – Meeting w/ M. Barnett (A-1)

Community Outreach – Justin Berry

Project/ Meeting Title – Community Outreach
Details/ description

# of ...	Project Partners and Status	Next Steps
2 Meeting and Community Members reached) 49	**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, **Status: (Ongoing)** Nacarn- 12 kits passed out in community	**Plan:** **Meeting frequency:** (Monthly and Bi-Monthly) Passed out a lot of gloves and socks to client. Tried working with multiple agencies to provide shelter temporarily for some of the clients living outside. This is going to be a ongoing battle but it has to happen.

MONTH: (2024)	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Open cases:	97	92	97	86	83	84	84	87	87	85	82	84
3.5-9 µg/dL case mgt & follow-up: *	22/22	22/24	20/20	16/20	8/10	16/7	27/15	41/12	29/14	19/14	18/14	9/12
10+ µg/dL case mgt & follow-up:	4/15	2&18	3/15	4/12	2/20	3/11	6/12	3/10	3/13	5/15	3/9	3/11
Risk assessments:	4	1	2	2	3	1	5	3	3	5	1	4
Orders issued:	0	2	0	4	2	0	5	2	2	2	1	5
Clearances EBL:	1	1	1	3	4	1	1	1	1	1	1	0
Clearances HUD:	0	0	1	2	0	0	6	2	6	6	9	11
Owner meetings EBL:	1	3	0	0	3	0	0	0	1	1	1	4
Owner meetings HUD:	1	1	0	0	4	1	1	1	1	0	1	3
Compliance checks EBL:	23	25	19	22	21	62	26	20	24	27	9	30
Compliance checks HUD:	0	0	3	0	1	0	1	1	3	2	3	1
Contractor mtgs EBL:	0	0	1	0	0	0	2	0	0	0	2	1
Contractor Meetings HUD:	3	5	4	3	1	9	5	7	4	1	8	3
Filed for prosecution:	0	0	0	0	0	0	0	0	0	0	0	0
LIRAs:	8	4	8	4	6	5	5	4	2	6	3	1

Grant apps uploaded (ODH /ODD/HUD)	7/2	11	1/2	5/1	4/0	2/0	13/0	3/4/1	3/1/0	1/0/0	1/0	2/0
Case Update w/ Lead Clinic:	10	12	13	10	11	9	7	11	8	9	8	11

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.

January 2025 BOH Report
Emergency Preparedness/Safety

Meetings, Grants, and Employee Safety
Attended the ODH Bidders Call for the 2025-2026 Public Health Emergency Preparedness Grant January 9.
Attended SWOPHR Emergency Response Coordinator Workgroup Meeting January 10.
Attended the Local Emergency Planning Committee (LEPC) meeting January 22.
Attended the Cincinnati BioWatch Quarterly Meeting January 22.
Attended the BioWatch Program Kentucky Special Event Planning Meeting for the Kentucky Derby January 24.

Training, Exercises and Improvement Plans
Attended the Chempack Tabletop Exercise Mid-Term Planning Meeting January 16.
Attended the United States Postal Service Tabletop Exercise January 23.
Attended the Cincinnati Chemical Incident Tabletop Exercise Final Planning Meeting January 30.

Response/Preparedness Activities

The Emergency Preparedness Unit assisted CHD's Communicable Disease Unit during their response to a human rabies case.

Cincinnati Vital Records and Statistics Program
Monthly Dashboard for January 2025

Vital Records received payment for 29 affidavits, staff assisted customers with birth certificate corrections

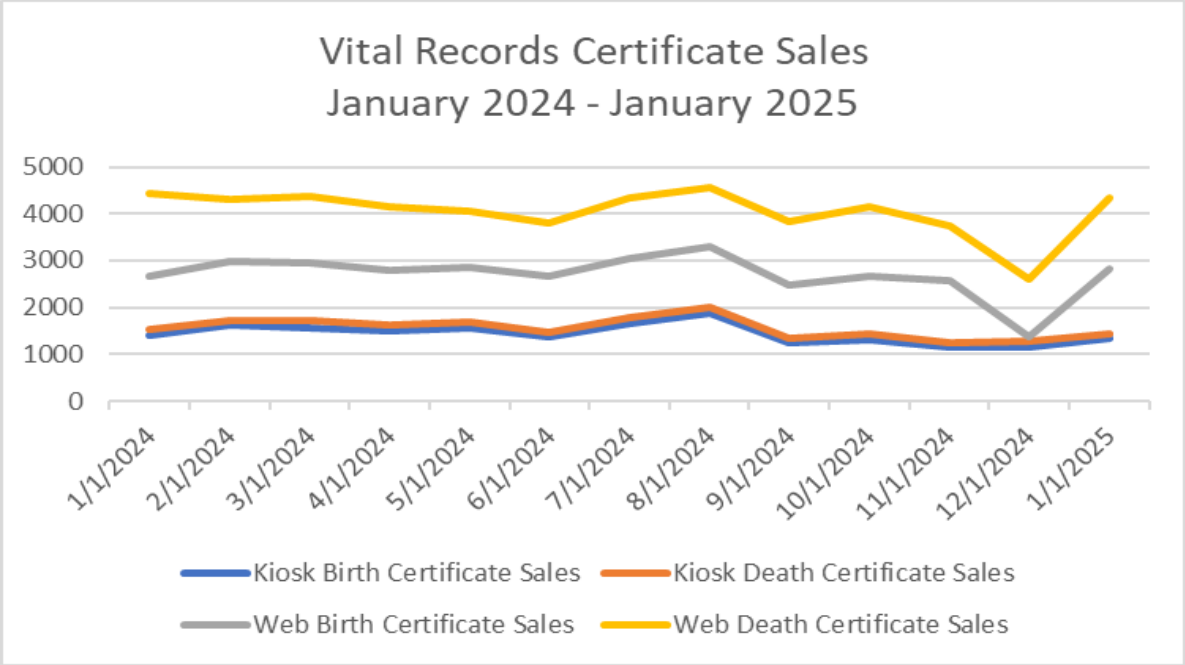
using the affidavit process.

Vital Records staff assisted 12 families with a paternity affidavit process to add the father to a birth certificate.

Vital Records received 188 payments for 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.

January 2025	Kiosk	Web	Vital Chek	Mail
Birth Certificates	1328	1375	290	10
Death Certificates	119	1526	102	27
Total Payments	$32,501	$72,010	$9,134	$949



Monthly Infectious Disease Surveillance Summary[1,2], January 2025

city of CINCINNATI HEALTH DEPARTMENT

Reportable Condition by Category[3]	2025 January	2025 Year to Date (YTD)	2024 January	2024 YTD	2024 Rate	Cincinnati 5 Year Average Rate (2020-2024)	Ohio 5 Year Average Rate (2019-2023)
Food- or Waterborne	**9**	**9**	**9**	**9**	***46.92***	***239.48***	***284.02***
Amebiasis					-	1.93	0.56
Brucellosis					-	-	0.12
Botulism					-	0.32	0.01
Campylobacteriosis	2	2	2	2	8.36	54.32	91.71
Cryptosporidiosis			1	1	6.11	20.89	20.73
Cyclosporiasis					0.32	1.29	3.68
E. coli, Shiga Toxin-Producing O157:H7					2.57	19.29	21.71
Giardiasis			2	2	4.50	24.43	16.49
Hepatitis A (*also vaccine-preventable*)					-	1.61	16.82
Hepatitis E					0.32	0.64	0.06
Legionellosis - Legionnaires' Disease	1	1			2.89	19.93	28.18
Listeriosis					-	2.25	1.42
Salmonellosis	2	2	1	1	10.93	52.72	59.04
Salmonella Typhi (travel associated)					0.32	0.64	0.36
Shigellosis	2	2	2	2	6.75	29.25	13.48
Vibriosis (not cholera)	1	1			0.64	1.93	2.55
Yersiniosis	1	1	1	1	3.21	8.04	7.10
Vectorborne	**1**	**1**	**1**	**1**	***5.46***	***16.38***	***34.07***
Chikungunya Virus Disease*					0.32	0.32	0.15
Dengue					0.64	0.96	0.31
Lyme disease					1.61	6.43	28.52
Malaria*	1	1	1	1	2.57	7.07	2.74
Spotted Fever Rickettsiosis					-	0.96	1.43
Ehrlichiosis-Ehrlichia chaffeensis					-	0.32	0.63
Anaplasmosis-Anaplasma phagocytophilum					0.32	0.32	0.29
Vaccine-Preventable	**91**	**91**	**92**	**92**	***121.18***	***474.12***	***323.84***
Hemophilus influenzae, invasive disease					2.25	14.46	11.19
Influenza-associated hospitalization	72	72	79	79	89.68	360.66	279.59
Mumps					0.32	1.29	1.20
Pertussis	9	9			12.54	16.07	20.79
Meningococcal disease – Neisseria meningitidis					-	0.32	0.44

S. pneumoniae, invasive (abx susceptible/unknown)	6	6	9	9	9.00	56.25	-
S. pneumoniae, invasive (abx resistant)	3	3	1	1	3.21	14.14	-
Varicella (chickenpox)	1	1	3	3	4.18	10.93	10.63
Viral Hepatitis	**45**	**45**	**38**	**38**	***147.86***	***1266.8***	***601.08***
Hepatitis B, acute *(also vaccine-preventable)*					2.57	8.36	5.58
Hepatitis B, chronic, newly identified *(also vaccine-preventable)*	10	10	10	10	28.61	189.33	81.84
Hepatitis B, perinatal					-	0.32	0.03
Hepatitis C, acute					0.32	13.18	8.93
Hepatitis C, chronic, newly identified	35	35	28	28	115.40	1050.15	504.70 (combined chronic and perinatal rate)
Hepatitis C, perinatal					0.96	5.46	
Healthcare Associated Infections (HAIs)[4]	**9**	**9**	**13**	**13**	***45.32***	***288.34***	***33.35***
Carbapenemase-Producing Organisms (CPO)	1	1	1	1	11.25	55.29	26.32
Candida Auris	8	8	12	12	34.07	233.05	7.03
Other Conditions	**405**	**405**	**959**	**959**	***1839.93***	***37132.45***	***31129.23***
COVID-19	400	400	948	948	1811.33	36976.57	31053.01 (3-year rate, 2020-2023)
Coccidioidomycosis			1	1	0.96	4.82	1.02
Creutzfeldt-Jakob Disease					0.32	0.64	0.96
Hemolytic uremic syndrome (HUS)							0.23
Meningitis, aseptic	1	1	1	1	6.11	22.82	17.15
Meningitis, bacterial (not *N. meningitidis*)					4.18	14.14	5.76
MPOX			1	1	0.96	10.29	3.57
Multisystem Inflammatory Syndrome in Children (MIS-C) associated with COVID-19					-	6.11	3.65
Staphylococcal aureus - intermediate resistance to vancomycin (VISA)					-	0.96	0.20
Streptococcal, Group A, invasive	3	3	5	5	11.25	71.04	34.40
Streptococcal, Group B, newborn					0.96	5.14	2.73
Toxic Shock Syndrome (TSS)					-	0.96	0.06
Tuberculosis[2]	1	1	3	3	3.86	18.64	6.49
Typhus Fever					-	0.32	-
Sexually Transmitted Infection[2]	**448**	**448**	**504**	**504**	***1859.87***	***14579.68***	***4121.60***
Chlamydia infection	288	288	286	286	1109.62	8511.81	2465.52
Gonococcal infection	134	134	163	163	570.88	4704.96	1083.04
Human Immunodeficiency Virus (HIV)	15	15	12	12	46.93	334.62	344.30
Syphilis - congenital			1	1	1.61	7.71	2.27
Syphilis - early	1	1	11	11	28.93	262.62	-
Syphilis - primary			3	3	11.89	122.79	

Syphilis - secondary	3	3	8	8	19.61	194.79	67.56 (primary and secondary combined rate)
Syphilis – stage unknown	1	1	5	5	23.79	142.08	158.91 (total syphilis rate)
Syphilis – unknown duration or late	6	6	15	15	46.61	298.30	
TOTAL CONFIRMED AND PROBABLE CASES	**1008**	**1008**	**1616**	**1616**	***4066.58***	***53996.66***	***36527.13***
Outbreaks (Investigation Started)	**2025 January**	**2025 YTD**	**2024 January**	**2024 YTD**	**2024 Rate**	**Cincinnati 5 Year Average Rate (2020-2024)**	
Dermatologic	1	1	1	1	2.25	7.39	
Gastrointestinal					1.29	6.43	
Respiratory	7	7	9	9	23.79	315.98	
Other					2.25	2.57	
Unknown					-	0.32	
TOTAL OUTBREAKS (INVESTIGATION STARTED)	**8**	**8**	**10**	**10**	***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.

CITY OF CINCINNATI ENVONMENTAL HEALTH REPORT

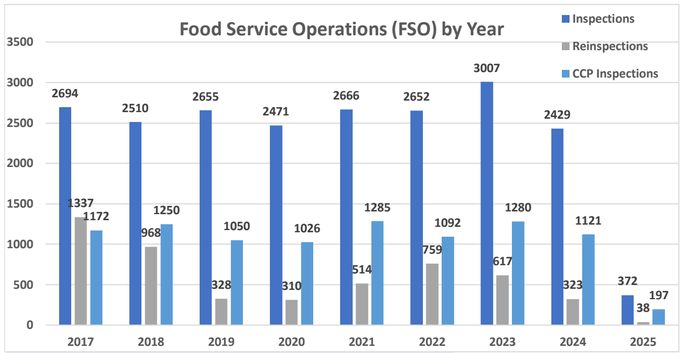
Environmental Health

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

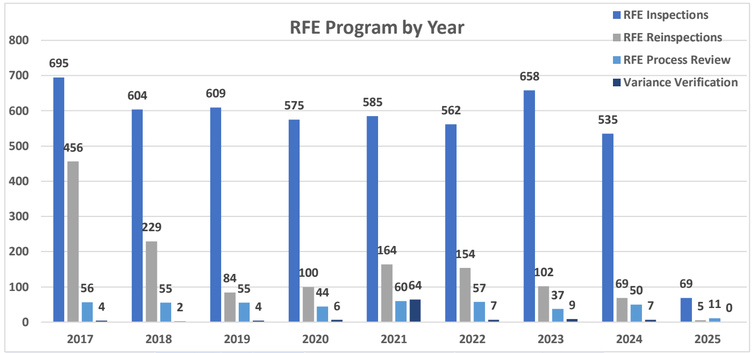
The Food Safety program met with the Tobacco 21 program regarding T21 inspection protocol. The Supervisor of Food Safety met with management regarding updates to the new Accela / Cagis Edge inspection program.



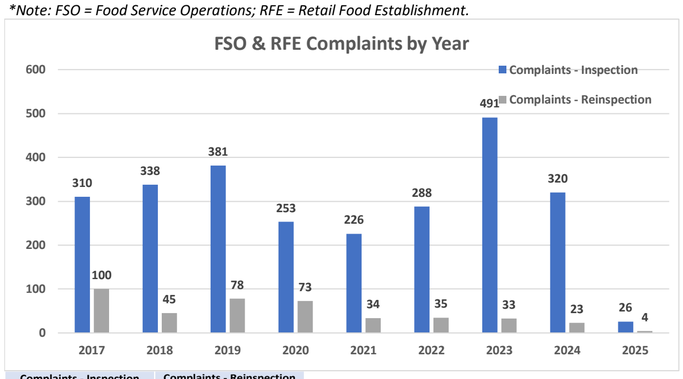
Inspections		Reinspections		CCP Inspections	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
286	251	62	45	128	62

*Note: CCP = Critical Control Point Inspections.

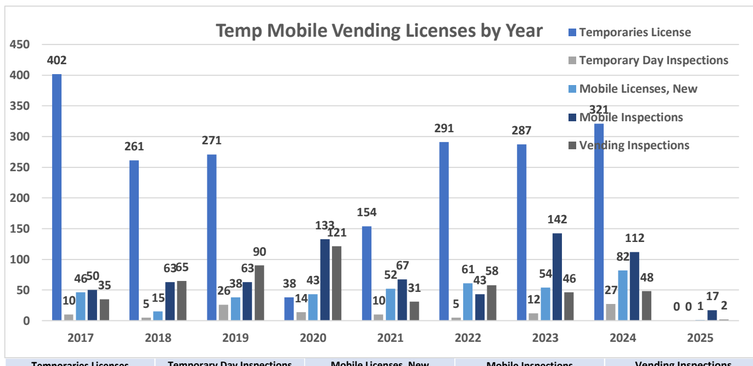
*Note: FSO = Food Service Operations; RFE = Retail Food Establishment.



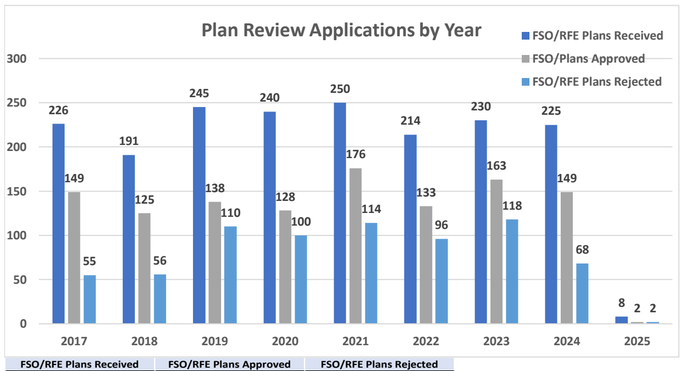
RFE Inspections		RFE Reinspections		RFE Process Reviews		Variance Verifications	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
55	58	17	4	8	4	7	0



Complaints - Inspection		Complaints - Reinspection	
JAN Average	Total Last Month	JAN Average	Total Last Month
31	61	9	2



Temporaries Licenses		Temporary Day Inspections		Mobile Licenses, New		Mobile Inspections		Vending Inspections	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
1	0	0	0	1	0	5	0	15	10

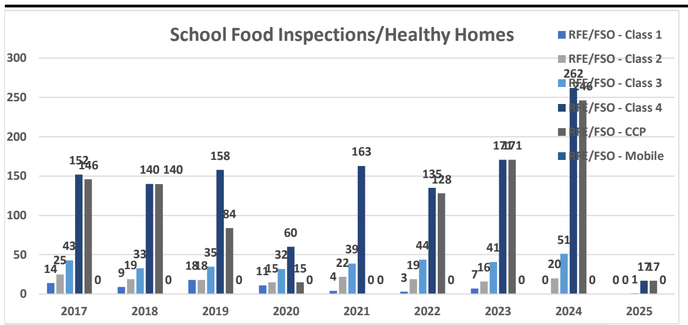


FSO/RFE Plans Received		FSO/RFE Plans Approved		FSO/RFE Plans Rejected	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
18	16	9	8	7	7

ServSafe Training Classes		PIC Training Classes	
JAN Average	Total Last Month	JAN Average	Total Last Month
0	0	0	0

HEALTHY HOMES PROGRAM

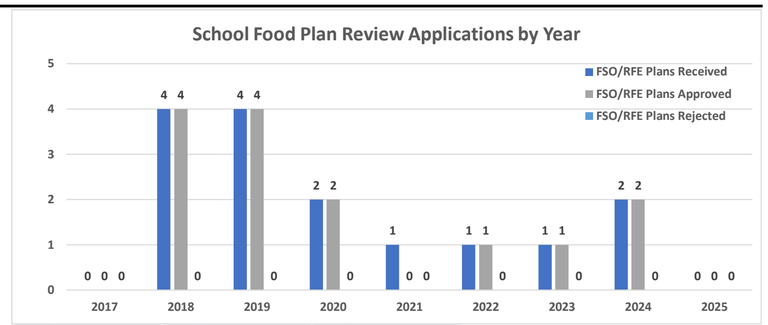
The Healthy Home staff attended the 311 meeting. Healthy Homes is working with Sonya on her IMPACTU project, and continuing training on CAGIS ACCELA.



RFE/FSO-Class 1		RFE/FSO-Class 2		RFE/FSO-Class 3		RFE/FSO-Class 4	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
0	0	0	0	1	4	8	13

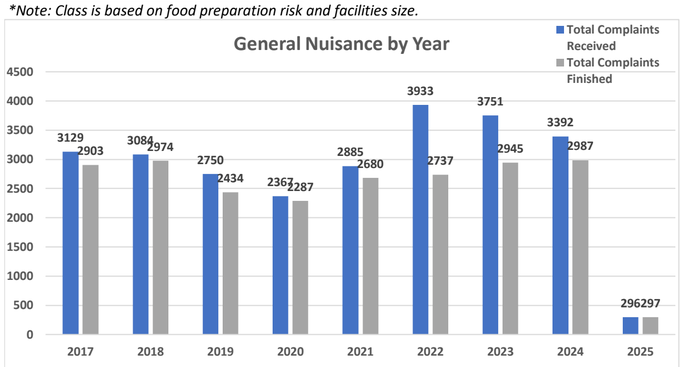
RFE/FSO-CCP		RFE/FSO-Mobile	
JAN Average	Total Last Month	JAN Average	Total Last Month
4	13	0	0

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

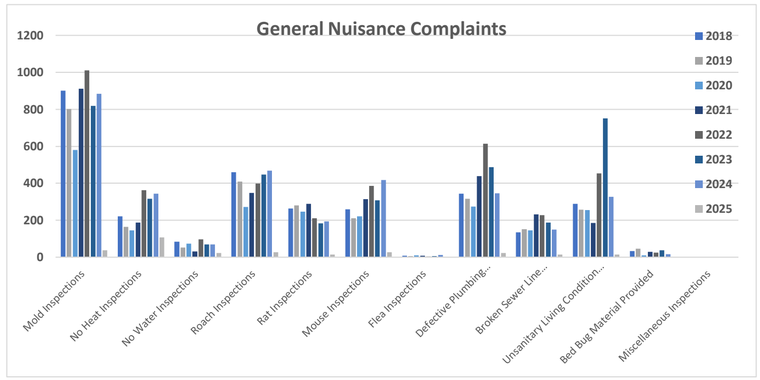


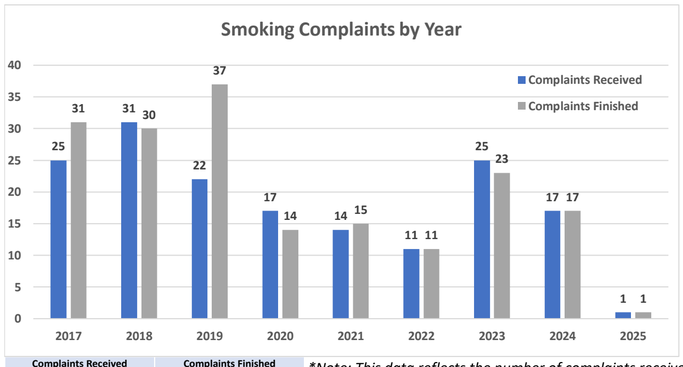
FSO/RFE Plans Received		FSO/RFE Plans Approved		FSO/RFE Plans Rejected	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
0	0	0	0	0	0

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



Complaints Received		Complaints Finished	
JAN Average	Total Last Month	JAN Average	Total Last Month
279	383	274	325



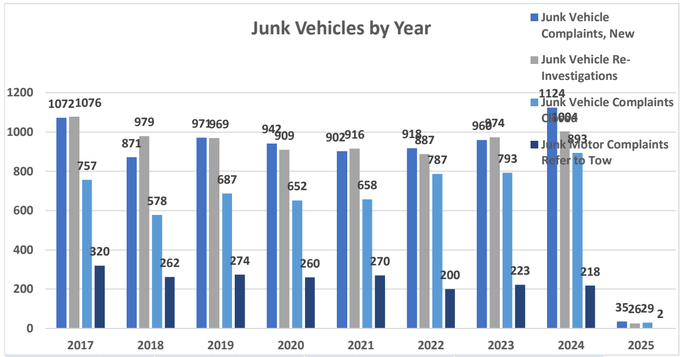


Complaints Received		Complaints Finished	
JAN Average	Total Last Month	JAN Average	Total Last Month
2	2	1	0

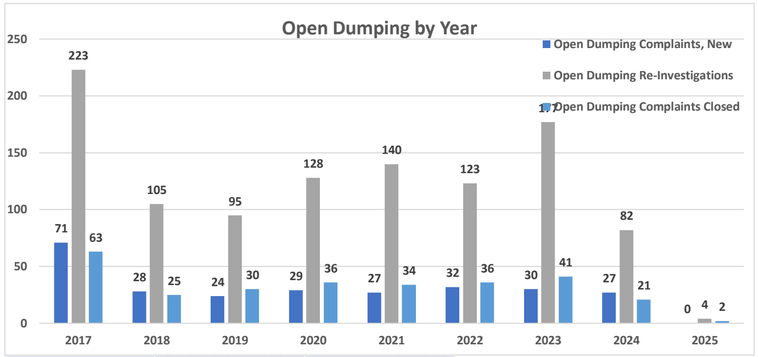
**Note: This data reflects the number of complaints received for the entire city*

ENVIRONMENTAL WASTE PROGRAM

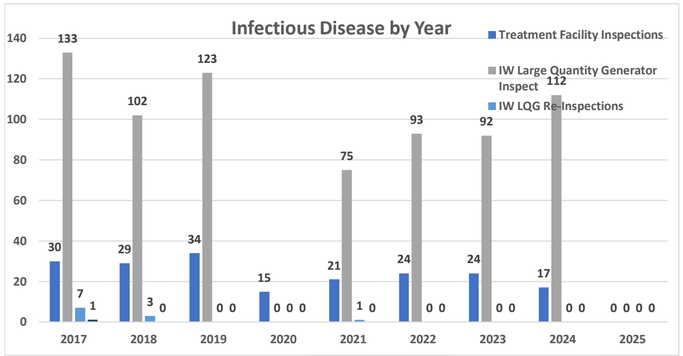
The Waste Unit licensed two Temporary Body Art Events that took place in January, Cinti Art Museum and Lane & Kate's Jewelry.



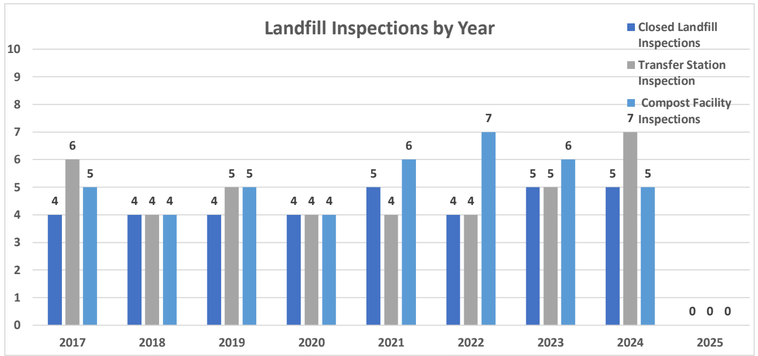
Junk Vehicle Complaints, New		Junk Vehicle Re-investigations		Junk Vehicle Complaints Closed		Junk Motor Complaints Refer to Tow	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
74	99	60	64	47	63	18	14



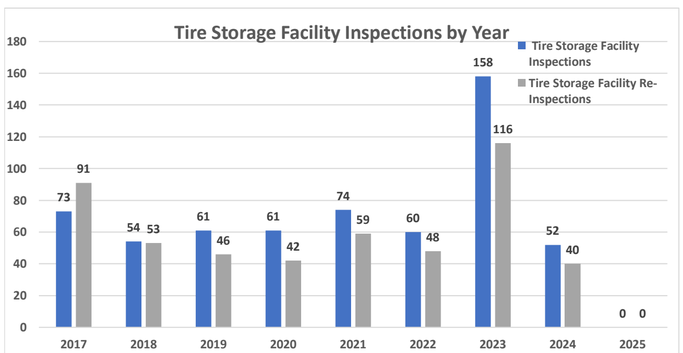
Open-Dumping Complaints		Open-Dumping Re-Investigations		Open-Dumping Complaints Closed	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
2	2	8	5	3	1



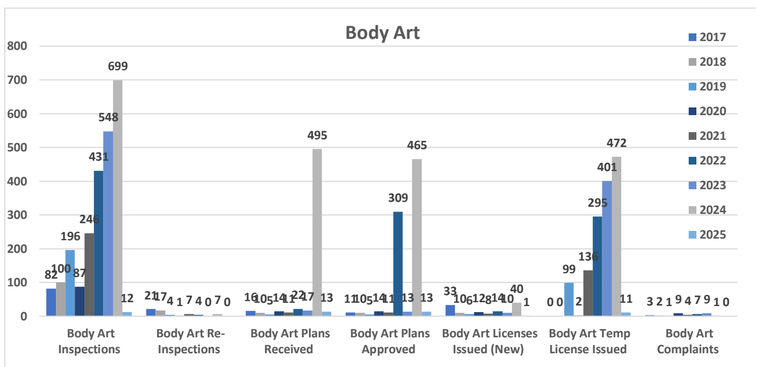
Treatment Facility Inspections		IW Large Quantity Generator Inspections		IW LQG Re-Inspections		IW Complaints	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
0	0	1	0	0	0	0	0



Closed Landfill Inspections		Transfer Station Inspection		Compost Facility Inspections	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
0	0	0	0	0	0

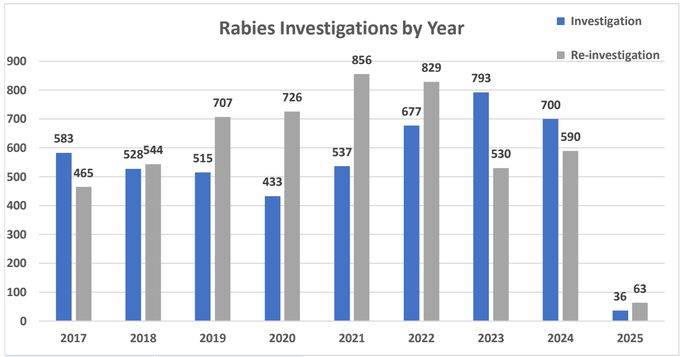


Tire Storage Facility Inspections		Tire Storage Facility Re-Inspections	
JAN Average	Total Last Month	JAN Average	Total Last Month
0	0	0	0

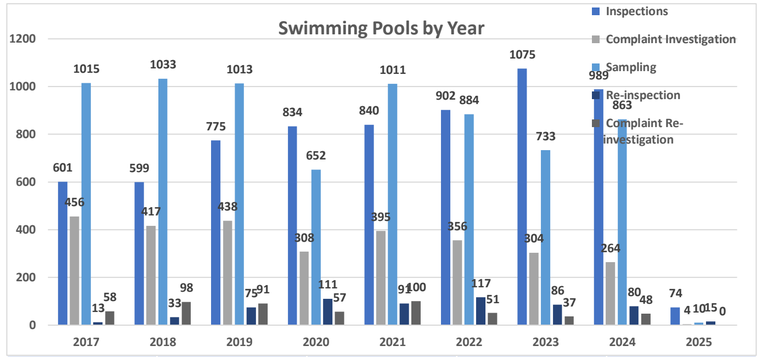


TECHNICAL ENVIRONMENTAL SERVICES (TES)

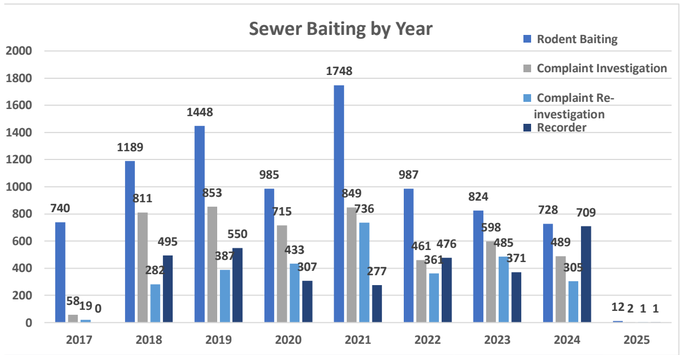
The Technical supervisor and senior EHS met onsite with the contractor who will be installing a WPCLF grant-funded sewage treatment system in East Westwood. Technical applied for the 2025 Mosquito Control Grant from OEPA.



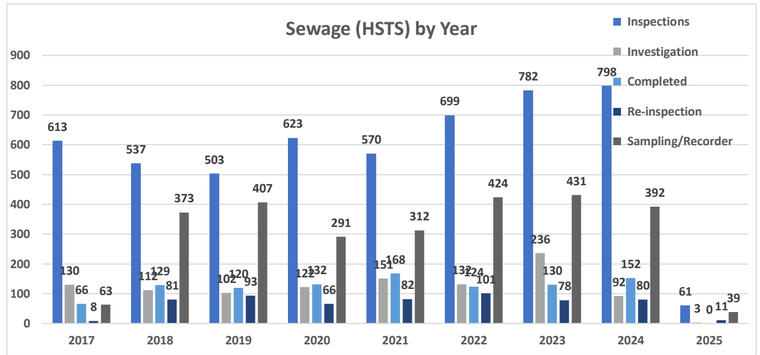
Investigations		Re-Investigations	
JAN Average	Total Last Month	JAN Average	Total Last Month
49	80	58	31



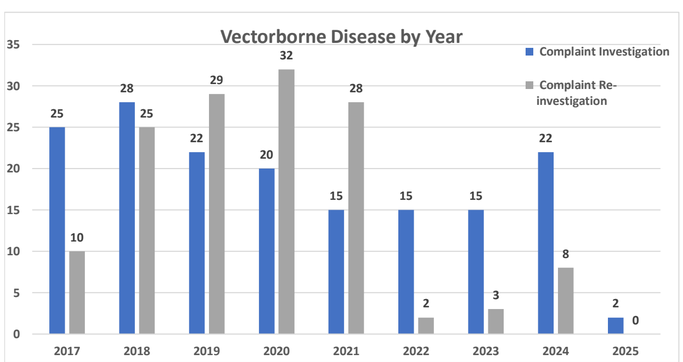
Inspections		Complaint Investigations		Sampling		Re-Inspections		Complaint Re-Investigations	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
29	53	3	0	2	3	4	5	3	2



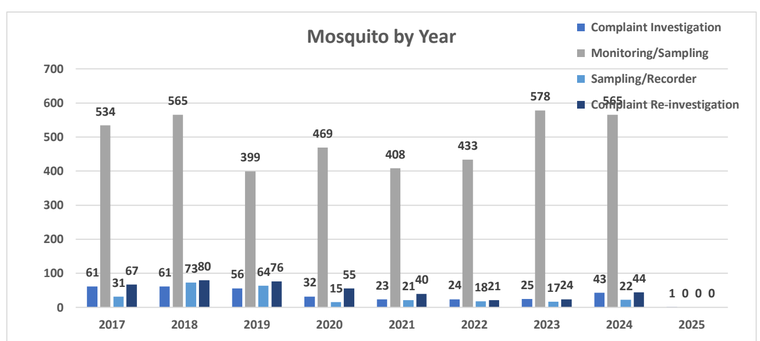
Rodent Baiting		Complaint Investigations		Complaint Re-Investigations		Recorder	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
69	0	43	1	15	8	4	8



Inspections		Investigations		Completed		Re-Inspection		Sampling/Recorder	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
62	57	24	25	12	2	14	25	44	39



Complaint Investigations		Complaint Re-Investigations	
JAN Average	Total Last Month	JAN Average	Total Last Month
1	0	1	0



Complaint Investigations		Monitoring/Sampling		Sampling/Recorder		Complaint Re-Investigations	
JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month	JAN Average	Total Last Month
0	0	0	1	0	0	2	0

CITY OF CINCINNATI COVID-19 REPORT

Updated 2/14/2025

KEY METRICS

TOTAL CASES	TOTAL DEATHS
95493	821
74425 Confirmed / 21068 Probable	702 Confirmed / 119 Probable

Total Hospitalized	Median Age	Age Range
3646	34	0 - 107

Males	Females	Onset of Symptoms
40352	54262	1/5/2020 - 2/11/2025

Active Cases	Recovered Cases
334	94312

7 Day Cumulative New Cases Per 100,000

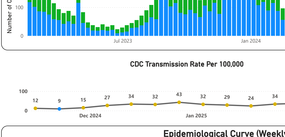
39.5

DATA SHOWN FOR TODAY REFLECTS PAST 24 HOURS
*DATA IS PROVISIONAL CONTINGENT UPON COMPLETION OF CONTACT TRACING AND CONFIRMATION OF JURISDICTIONAL RESIDENCE
**IN ACCORDANCE WITH THE NEW CDC GUIDELINES, THE CDC EXPANDED (PROBABLE) CASE DEFINITION IS INCLUDED IN THIS REPORT. SEE: https://www.cdc.gov/coronavirus/2019-ncov/covid-data/faq-surveillance.html
***Presumed recovered cases is defined as cases with a symptom onset date/test date >21 days prior who are not deceased. Active cases are defined as cases with a symptom onset/test date <21 days.
****Jurisdictional transfers added based on the date they were originally reported to the local health department. These are not classified as new cases.
*****For more information including detailed maps of City of Cincinnati data, please visit https://insights.cincinnati-oh.gov/stories/s/VHF-5XR5
******Transmission indicator based on CDC defined criteria
STATE DATA SOURCE: OHIO DISEASE REPORTING SYSTEM (ODRS)

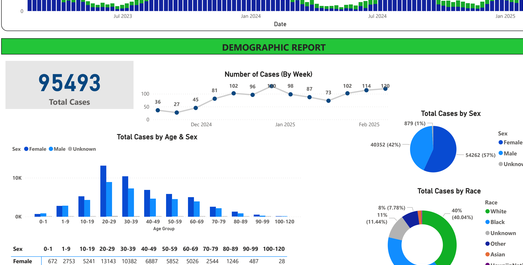
city of CINCINNATI HEALTH DEPARTMENT

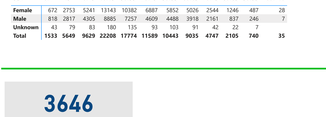
WEEKLY NEW CASE INFORMATION

Total New Cases	75 New Confirmed	45 New Probable
120		

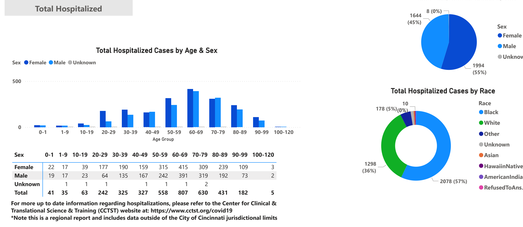


Sex	0-1	1-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90-99
Female	3	7	14	15	7	6	6	7	1	2	
Male	6	3	6	8	6	7	3	4	6	3	
Total	6	6	13	22	21	14	9	10	13	4	2





*Transmission rate graph represents the last 3 months



DEMOGRAPHIC REPORT

95493
Total Cases

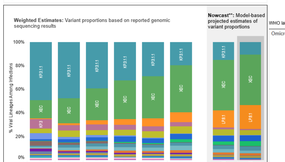
Sex	0-1	1-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90-99	100-120
Female	672	2753	5241	13143	10382	6887	5852	5026	2544	1246	487	28
Male	818	2817	4305	8885	7257	4609	4488	3918	2161	837	246	7
Unknown	43	79	83	180	135	93	103	91	42	22	7	
Total	1533	5649	9629	22208	17774	11589	10443	9035	4747	2105	740	35

3646
Total Hospitalized

Sex	0-1	1-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90-99	100-120
Female	22	17	39	177	190	159	315	415	309	239	109	3
Male	19	17	23	64	135	167	242	391	319	192	73	2
Unknown	1		1			1	1	1	2			
Total	41	35	63	242	325	327	558	807	630	431	182	5

For more up to date information regarding hospitalizations, please refer to the Center for Clinical & Translational Science & Training (CCTST) website at: https://www.cctst.org/covid19
*Note this is a regional report and includes data outside of the City of Cincinnati jurisdictional limits

821
Total Deaths



Sex	0-1	1-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90-99	100-120
Female	2	4	2	8	18	50	66	92	83	75	8	
Male		1	2	7	28	47	84	98	97	46	1	
Unknown								1	1			
Total	2	5	4	15	46	97	150	191	181	121	9	

94312
Total Recovered

Sex	0-1	1-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90-99	100-120
Female	609	2743	5222	13103	10324	6849	5782	4936	2432	1155	408	20
Male	805	2806	4283	8863	7234	4565	4431	3816	2051	730	199	6
Unknown	43	79	82	180	135	93	103	91	40	21	7	
Total	1517	1628	9587	22146	17693	11507	10316	8843	4523	1906	614	26

ADDITIONAL COVID-19 INFORMATION

%Hospitalized

3.8%
of Total Cases

0.9%
Case Fatality Rate

Regional COVID-19 Variant Report

The graphic below represents genomic surveillance by the CDC for the United States
Variant proportions can be found at https://covid.cdc.gov/covid-data-tracker/#variant-proportions
*Updated 02/14/2025

Weighted and Nowcast Estimates in United States for 2-Week Periods in 10/13/2024 – 2/1/2025

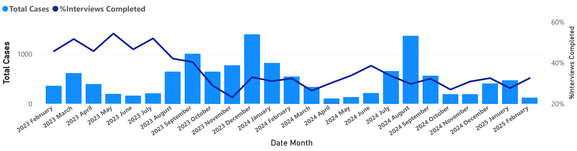
Hover over (or tap in mobile) any lineage of interest to see the amount of uncertainty in that lineage's estimate.

Nowcast Estimates in United States for 1/19/2025 – 2/1/2025

		USA	
RHO label	Lineage #	%Total	95%PI
Omicron	XEC	43%	40–46%
	LP.8.1	20%	16–25%
	KP.3.1.1	11%	9–12%
	MC.10.1	5%	4–6%
	MC.1	4%	3–5%
	XEC.4	4%	2–5%
	LF.7	4%	3–5%
	LB.1.3.1	2%	2–4%
	JN.1.18.6	2%	1–3%
	XEK	2%	1–3%
	KP.3	1%	1–1%
	MC.19	1%	1–2%
	JN.1.16	0%	0–1%
	BA.2.86	0%	0–1%
	KS.1	0%	NA
	KP.1.1.3	0%	NA
	KP.2.3	0%	NA
	LB.1	0%	NA
	KP.2	0%	NA

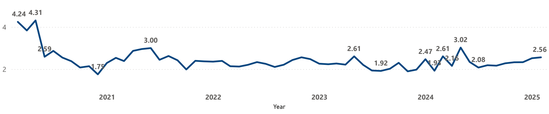
KEY METRICS

Total Cases and %Interviews Completed by Month



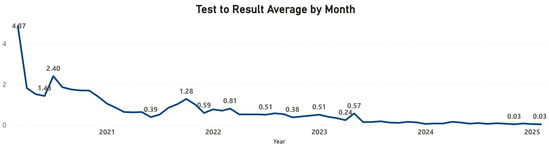
Year	%Interviews Completed	Total Cases
2020	57.1%	17113
2021	30.8%	32806
2022	27.7%	31805
2023	39.7%	7620
2024	31.3%	5555
Total	**35.2%**	**95493**

Symptom Onset to Test Average by Month



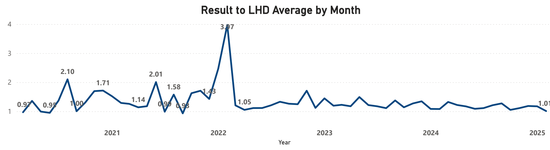
Year	Symptom Onset to Test Average
2020	2.43
2021	2.41
2022	2.30
2023	2.12
2024	2.26
2025	2.53
Total	**2.34**

Test to Result Average by Month



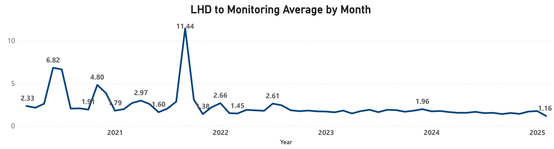
Year	Test to Result Average
2020	1.69
2021	0.84
2022	0.64
2023	0.24
2024	0.07
2025	0.04
Total	**0.83**

Result to LHD Average by Month



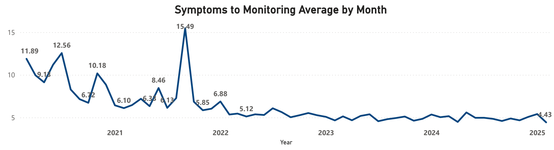
Year	Average of Result to LHD
2020	1.55
2021	2.06
2022	2.24
2023	1.59
2024	1.39
Total	**1.95**

LHD to Monitoring Average by Month



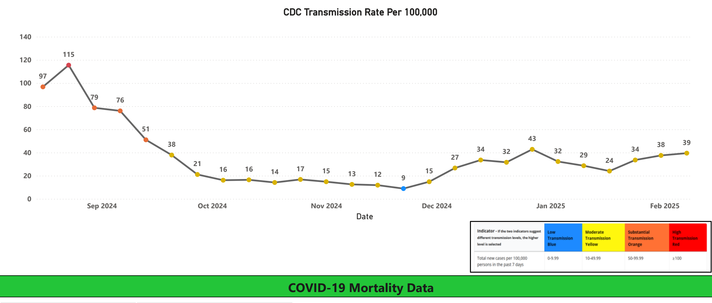
Year	Average of LHD to Monitoring
2020	4.16
2021	3.06
2022	2.09
2023	1.76
2024	1.57
2025	2.36
Total	**2.86**

Symptoms to Monitoring Average by Month



Year	Average of Symptoms to Monitoring
2020	9.67
2021	7.32
2022	5.72
2023	4.90
2024	4.98
2025	5.19
Total	**6.87**

CDC Transmission Rate Per 100,000

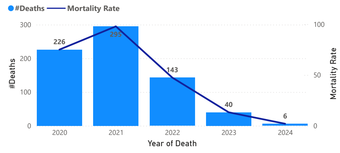


COVID-19 Mortality Data

710 #COVID-19 Deaths

39.26 Total Pop. Mortality Rate

COVID-19 Deaths and Mortality Rate (per 100,000) by Year

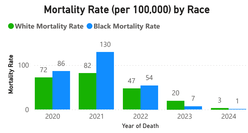


Data Source: Ohio Department of Health, Office of Vital Statistics
Note the difference between total deaths from vital statistics and the Ohio Disease Reporting System. This can be due to a variety of factors including: time lag of death certificate reporting, difference in residential address, and ICD coding.
Mortality data updated monthly

37.27 White Mortality Rate

46.33 Black Mortality Rate

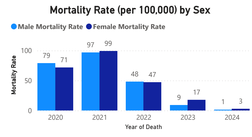
Mortality Rate (per 100,000) by Race



38.95 Male Mortality Rate

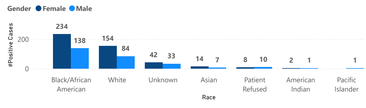
39.55 Female Mortality Rate

Mortality Rate (per 100,000) by Sex



City of Cincinnati Primary Care COVID-19 Information

Positive Cases by Race and Sex

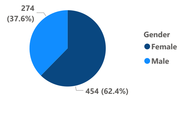


728 Total CCPC Confirmed Cases

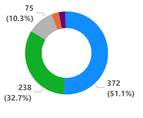
5258 Total CCPC Tested

13.8% CCPC Positivity Rate

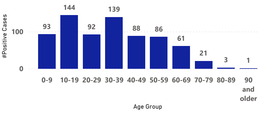
Positive Cases by Sex



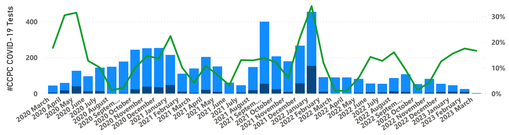
Positive Cases by Race



Positive Cases by Age Group



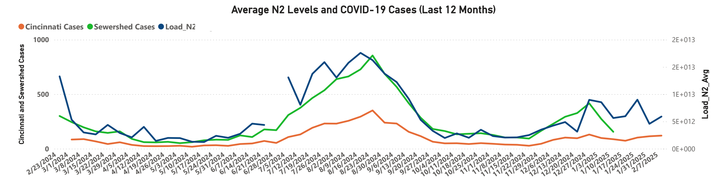
Total CCPC Tests and Positivity Rate



***CCPC data updated monthly**
***Data is provisional Contingent Upon Completion of Contact Tracing and Confirmation of Jurisdictional Residence**
***Data Source: Epic EMR for City of Cincinnati Primary Care**

Wastewater Data

Average N2 Levels and COVID-19 Cases (Last 12 Months)



The graph above represents the number of reported cases in the City of Cincinnati, reported cases in each greater Cincinnati sewershed (Little Miami, Mill Creek, Muddy Creek, and Taylor Creek), and compared to the wastewater data (Load N2 Average).**
****On 9/25/22, a new method was implemented to improve extraction efficiency (from an average of 15% to about 50%) resulting in about 50% higher gene copies/L.**
****Sample collections paused for the month of September 2023**
***Note the date differences for each variable (all grouped by week)**
***Sewershed cases based on symptom onset date**
***Cincinnati cases based on case report date**
***Load N2 Average based on sample collection date**
*****Sewershed Cases Data has not been updated since 01/10/2025**
****Updated Weekly**
Source: Ohio Disease Reporting System (ODRS), https://coronavirus.ohio.gov/dashboards/other-resources/wastewater