



Board of Health Meeting

Tuesday, January 27, 2026

Agenda

Jagdish Bhati
Christopher Lewis, M.D.
Kiana Trabue

Mary Carol Burkhardt, M.D.
Raynal Moore
Ashlee Young

Jennifer Forrester, M.D.
Ken Patel

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

Old Business

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

- Vote: **Motion to Approve** the Minutes of December 2, 2025, Board of Health Meeting.

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

New Business

6:20 pm – 6:30 pm Resolution 2026-001: Amendment of Resolution 2025-004 – Mr. Antonio Young

- Vote: **Motion to Suspend** the statutory rule requiring three readings of Resolution No. 2026-001.
- Vote: **Motion to Approve** emergency passage of Resolution No. 2026-001.
- Vote: **Motion to Approve** Resolution No. 2026-001, Amending resolution number 2025-004; to correct the licensing fees for low-risk mobile food service operations and mobile retail food establishments.

6:30 pm – 6:40 pm Healthy Communities Presentation – Ms. Tiffany White

6:40 pm – 6:50 pm Finance Committee – Ms. Kiana Trabue

- Vote: **Motion to Approve** Ohio Association of Community Health Centers – Contract 65x10834
- Vote: **Motion to Approve** Susan Tilgner – Contract 65x10840
- Vote: **Motion to Approve** FQHC 340B Compliance – Contract 65x10841

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 January 27, 2026

7:05 pm – 7:20 pm **Motion for Executive Session** – That the Board of Health enter an Executive Session pursuant to Ohio Revised Code Section 121.22(G)(1) to discuss discipline of an employee(s).

7:20 pm – 7:25 pm Public Comments

[Mission]

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

7:25 pm

Adjourn

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

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

Next Meeting February 24, 2026

[Mission]

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

CINCINNATI BOARD OF HEALTH
BOARD OF HEALTH MEETING
December 2, 2025

Ms. Ashlee Young, Chair of the Board of Health, called December 2, 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. Christopher Lewis, Ms. Raynal Moore, Mr. Ken Patel, Ms. Kiana Trabue, Ms. Ashlee Young

Absent: Dr. Jennifer Forrester

Others Present: Dr. Grant Mussman-Commissioner, Ms. Sa-Leemah Cunningham-Clerk, Dr. Maryse Amin, Mr. Ian Doig, Mr. Antonio Young, Ms. Debi Smith, Ms. Kim Wright, Dr. Camille Jones, Ms. Chante Randolph, Dr. Michelle Daniels, Mr. John Sanders, Ms. Trisha Blake, Mr. John Kachuba, Mr. David Miller, Mr. Jose Marques, Ms. Marla Fuller, Dr. Ashanti Salter

AGENDA PACKET → [DECEMBER-BOH-AGENDA-PACKET-12.2.25.PDF](#)

ITEM	TOPIC	RESPONSIBLE PARTY	ACTION/MOTION
Minutes	Motion that the Board of Health approves the minutes from October 28, 2025, Board of Health Meeting. <i>(Dr. Lewis and Ms. Trabue joined after this vote)</i>	Ms. Sa-Leemah Cunningham	Motion: Ms. Raynal Moore 2nd: Mr. Jagdish Bhati Action: 5-0 Passed
Old Business			
Commissioner's Report	Discussion Items: Memo included in the agenda packet. Dr. Grant Mussman presented his commissioner's report to the Board. Ambrose Clement Fall Festival Dr. Mussman reported that the Ambrose Clement Fall Festival, held on Saturday, November 22, was a major success. She expressed appreciation to staff, current board members, and former board members who attended and supported the event. The Mayor and U.S. Representative Gregg Landsman were also in attendance. Nearly 300 turkeys were distributed to community members. Quality Improvement (QI) Program Celebration	Dr. Grant Mussman—Commissioner	n/a

	• Dr. Mussman announced the department’s upcoming Quality Improvement Program Celebration, recognizing a year of quality improvement efforts. She noted the department’s robust QI program, which includes formal training and a partnership with Cincinnati Children’s Hospital. • The celebration was held on December 10, from 1:00–3:00 p.m. at B&K and will feature individual QI projects and accomplishments. • Dr. Mussman clarified that this event is not a Board activity, and board members may attend provided no Board business was conducted. Legal counsel Ian confirmed that attendance would not trigger quorum concerns. Board of Health Training • Dr. Mussman thanked Ms. Cunningham for arranging a Board training session on November 8 and extended special appreciation to Mr. Joseph Durham of Eastman & Smith for his presentation on public health law and Board of Health requirements. Chair’s Remarks – Ms. Young • Ms. Young thanked Dr. Mussman for his report and echoed his sentiments regarding the success of the Ambrose Clement Fall Festival. She commended the team for organizing the event and thanked all who attended and supported it, noting that it was an exceptional community event.		
Food Safety Presentation	Discussion Items: Presentation included in the agenda packet. Ms. Trisha Blake and Mr. John Sanders gave a presentation on Food Safety to the Board. Introduction and Overview • Mr. Sanders introduced himself as one of the two supervisors of the Food Safety Program at the Cincinnati Health Department and introduced Ms. Tricia Blake, the co-supervisor. Mr. Sanders noted that the presentation would be shared between both presenters. Purpose of the Food Safety Program • Mr. Sanders explained the importance of food safety and the role of the program in preventing foodborne illness. He emphasized	Ms. Trisha Blake and Mr. John Sanders	n/a

	that the department's work is focused on ensuring food is prepared and served safely throughout the city. Food Safety Program Staffing and Structure Mr. Sanders described the structure of the Food Safety Program: • Two supervisors oversee the program, with Mr. Sanders supervising the west side of the city and Ms. Blake supervising the east side. • The program includes three Senior Environmental Health Specialists who conduct plan reviews and licensing for new food establishments. • The Senior Environmental Health Specialists support ten Environmental Health Specialists (health inspectors), each assigned to a specific area of the city. • One CRR also supports program operations. Inspection and Licensing Responsibilities • Mr. Sanders outlined the program's responsibilities, including inspections and licensing for: ○ Restaurants and bars ○ Grocery stores and markets ○ Daycares and nursing homes ○ Food trucks and food carts • He noted that while the department is responsible for school cafeterias, inspections for approximately 250 schools are conducted by the Healthy Homes Unit. • Additional responsibilities include licensing: ○ Temporary food facilities ○ Vending machines ○ Gas stations and micro markets Enforcement and Education • Mr. Sanders explained that the program enforces the Ohio Uniform Food Safety Code, which provides consistent food safety standards statewide. He also highlighted the program's educational role, including food safety training for the public, such as SERV Safe and Person-in-Charge training. Food Service Operations (FSOs) • Mr. Sanders defined Food Service Operations (FSOs) as establishments serving ready-to-eat food, regulated by the Ohio Department of Health. Examples include restaurants, bars,		
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	nursing homes, and daycares. He reported that there are over 1,900 FSOs in the City of Cincinnati. • Mr. Sanders then turned the presentation over to Ms. Blake. Retail and Mobile Food Operations • Ms. Blake explained that Retail Food Establishments are regulated by the Ohio Department of Agriculture and include grocery stores, gas stations, micro markets, and other establishments selling packaged foods. She reported that there are over 450 licensed RFEs in Cincinnati. • Ms. Blake discussed mobile food operations, including food trucks, trailers, carts, and tent-based vendors. These operations may be licensed as either FSOs or RFEs and are permitted to operate statewide with a valid Ohio license. She noted that there are over 200 licensed mobile food operations in the city. • Ms. Blake reported that the department issues over 300 temporary food licenses annually for events such as: ○ Taste of Cincinnati ○ Oktoberfest ○ Asian Food Fest ○ Church festivals ○ Concerts ○ Farmers markets ○ Sporting events • She noted that these operations are most active between March and October, though some events occur year-round. Food Safety Training Programs • Ms. Blake described the department's Food Safety Training Program, which includes: ○ Person-in-Charge certification ○ SERV Safe Manager training • She noted that these courses are required for many food establishments, are offered regularly throughout the year, and are well attended. • Ms. Blake concluded her portion of the presentation. Temporary Food Surveillance Case Example • Mr. Sanders shared a case example illustrating the importance of ongoing surveillance at		
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	temporary food events. He explained that the department conducts daily monitoring at major festivals to ensure continued compliance and to prevent foodborne illness. • He described a past incident involving a nut allergy exposure at a temporary food booth, which resulted in multiple individuals experiencing allergic reactions. Upon investigation, it was determined that a product contained nuts that were not properly disclosed. • Mr. Sanders explained that, following consultation with Dr. Mussman, Antonio Young, and Dr. Amin, the decision was made to halt the vendor's operation. He stated that corrective actions were taken to protect public safety and noted that this incident contributed to the addition of allergen disclosure requirements in the Ohio Uniform Food Safety Code. • Mr. Sanders emphasized that the department's work not only prevents foodborne illness but also protects lives. <u>Q&A:</u> • Mr. Patel thanked Mr. Sanders and Ms. Blake for the presentation and commended the Food Safety team for their work. Mr. Patel inquired whether the department has considered issuing food service licenses based on levels of compliance or grading, like restaurant grading systems used in other cities, such as New York City. ○ Mr. Sanders responded that the department currently classifies food establishments by risk level, ranging from Level 1 (lowest risk) to Level 4 (highest risk). He explained that each inspection includes the identification of critical and non-critical violations, and follow-up inspections are conducted as required. ○ Mr. Sanders noted that while some counties utilize public letter-grade systems (e.g., A–F ratings), implementation of such a grading system would fall outside the department's authority and would require action at the City Council or legislative level, rather than through the Food Safety Program itself. • Dr. Lewis stated that he did not have a question but wished to express his appreciation to Mr. Sanders, Ms. Blake, and their teams for their work. He shared that his wife and two daughters have		
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	nut allergies and noted that the example shared regarding shutting down a temporary food operation due to allergen concerns resonated strongly with him and his family. Dr. Lewis thanked the Food Safety team for their diligence and commitment to protecting public health. • Mr. Bhati commended Mr. Sanders and Ms. Blake for the presentation and noted the broad scope of the Food Safety Program's work across the city and greater Cincinnati. He asked how many employees support the program and whether staff are permanent or temporary. ○ Ms. Blake responded that full-time employees staff the Food Safety Program entirely. She reported that the program consists of approximately sixteen staff members, including 10 Environmental Health Specialists (inspectors), three Senior Environmental Health Specialists, two supervisors, and one Customer Relations Representative. • Mr. Bhati asked for clarification regarding food safety oversight at sporting and large venue events, specifically whether inspections focus on vendors operating during events or on permanent food establishments within venues such as Paycor Stadium and Kings Island / Great America. ○ Mr. Sanders explained that large venues operate under multiple individual food licenses, each of which is subject to inspection. He noted that a designated inspector is assigned to oversee these venues, with inspections conducted during event operations whenever possible. ○ Mr. Sanders also stated that Paycor Stadium presents unique challenges due to its limited number of operating days; however, the department ensures that two rounds of inspections are completed. He added that inspections at Kings Island / Great America are more easily scheduled due to longer operating seasons. ○ Mr. Sanders further reported that there are over eighty individual food licenses at Paycor Stadium, approximately thirty-eight licenses at Kings Island / Great America, and eight licenses at U.S. Bank Arena. He emphasized that the Food Safety team works collaboratively as a unit to conduct these inspections. • Ms. Moore commended the Food Safety team for their quick response during the allergen incident and noted the importance of prompt intervention at large public events. She asked what criteria		
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	trigger Food Safety monitoring at events, specifically whether oversight begins when an event organizer applies for a license. She also inquired how members of the public can identify whether an event or food vendor has been inspected and monitored by the department. - Ms. Blake explained that Food Safety oversight is primarily triggered when an individual or organization applies for a food-related license as part of an event. She noted that while the department cannot always monitor every location, education and coordination play a significant role in ensuring compliance. - Ms. Blake stated that the City Manager's Office Special Events Department assists in educating organizers about licensing requirements when food is sold. She explained that licensed vendors are required to display their food license prominently at events. Members of the public may look for the displayed license or request to see it to confirm that an inspection has occurred and that the vendor has met basic food safety requirements. - Ms. Blake emphasized that licensing ensures the department has inspected the operation at least once to verify that the vendor can operate safely.		
New Business			
Finance Committee	Discussion Items: Documents included in the agenda. Ms. Kiana Trabue presented the contracts that were discussed and presented at the Board of Health Finance Committee Meeting to the Board. Hamilton County Solid Waste Management District—Contract 65x10830 - This is a long-standing contract between the Cincinnati Health Department and the Hamilton County Solid Waste District. - The Environmental Waste Unit of the CHD will inspect the Solid Waste Transfer Station, the Class II Composting Facility, the Closed Municipal Solid Waste Landfill, all Registered Scrap Tire Transporters, and Open Dump Complaints: at the frequency stated in the contract. In return for performing these inspections, the HCSWD will pay the CHD \$72,000 total. Billing and payment will be quarterly. - The term will be from January 1, 2026, to December 31, 2026.	Ms. Kiana Trabue	Vote: Contract 65x10830 Motion: Ms. Raynal Moore 2nd: Mr. Jagdish Bhati Action: 7-0 passed

	Motion to Approve Hamilton County Solid Waste Management District—Contract 65x10830		
Finance Update	Discussion Items: Memo and materials were included in the agenda. Ms. Smith gave an update on CHD Financials for October 2025 and Year over Year. Highlights - Ms. Smith provided an overview of the Health Department's financial performance noting that detailed figures are available in the meeting packet. - Revenue total was \$20,235,587.06; increased by 16.63%. - Private Pay Insurance increased by 9.19%. - Medicare increased by 12.96%. - Medicaid increased by 71.28%. - Medicaid managed care increased by 65.79%. - Self-Pay patients increased by 18.69%. - Board of Ed Svcs (School Nurse's Salary) decreased by 63.39%. - Grants/Federal decreased by 12.59%. - Expenses were \$21,040,148.92, increasing by 9.39%. - Property expenses increased by 370.45%. - Personnel expenses increased by 6.01%. - Contractual costs increased by 12.16%. - Material costs increased by 20.43%. - Fixed costs increased by 17.66%. - Fringes increased by 4.16%. The total available is \$647,561.86, which decreased by 313.35%.	Ms. Debi Smith	n/a
Personnel Actions	- Dr. Mussman directed the Board to the personnel actions included in the board packet. - Personnel actions included 1 Accountant 1 Pharmacy Technician 1 Dentist 1 Dental Hygienist 1 Promotion to Nursing Supervisor 1 Promotion to Supervising Dietician 1 Promotion to Customer Relations Representative Motion to Approve the personnel actions dated December 2, 2025	Dr. Grant Mussman	Motion: Mr. Jagdish Bhati 2nd: Ms. Raynal Moore Action: 7-0 passed
Executive Session	The Board moved to Executive session to discuss disciplined of two employees. Motion for Executive Session – That the Board of Health enter an Executive Session pursuant to Ohio	Ms. Ashlee Young	Vote: Enter Executive Session Motion: Mr. Jagdish Bhati 2nd: Ms. Kiana Trabue Action: 7-0 passed

	Revised Code Section 121.22(G)(1) to discuss discipline of an employee. Motion to approve the adaptation of the recommendation of HR of 8-hour suspension for the employee discussed in the executive session. Motion to approve the adaptation of the recommendation of HR for 40-hour suspension for the employee discussed in the executive session.		Vote: Adaptation of the recommendation of HR of 8 Hour suspension for the employee discussed in executive session Motion: Ms. Kiana Trabue 2nd: Ms. Raynal Moore Action: 7-0 Passed Vote: Adaptation of the recommendation of HR of 40 Hour suspension for the employee discussed in executive session Motion: Ms. Kiana Trabue 2nd: Mr. Ken Patel Action: 7-0 Passed
Additional New Business and Public Comments	Public Comments There were no public comments.	Ms. Ashlee Young	n/a

7:04 p.m. adjourned.

Next meeting: Tuesday, January 27, 2026, at 6pm, via Zoom.

Meeting can be viewed at: <https://archive.org/details/boh-12-2-25>

Minutes Approved by:

Sa-Leemah Cunningham
Cincinnati Board of Health Clerk

Ashlee Young
Chairperson, Board of Health

December 2, 2025 Meeting Attendance/vote sheet

[illegible]

x ***Present***

Yay

Nay

Absent

Didn't vote but present

M *Move*

2nd *Second*

STAFF

Dr. Grant Mussman-Commissioner
Sa-Leemah Cunningham (clerk)
Dr. Maryse Amin
Debi Smith
Antonio Young
Kim Wright
Dr. Camille Jones
Chante Randolph
Dr. Michelle Daniels
Ian Doig
John Sanders
Trisha Blake
John Kachuba
David Miller
Jose Marques
Marla Fuller
Ashanti Salter

[illegible]

DATE: January 23, 2026
TO: Board of Health Members
FROM: Dr. Grant Mussman, Health Commissioner
SUBJECT: Health Commissioner Executive Summary

Quarterly Performance Metrics

These are not from our strategic plan, but from our performance agreement with the city manager's office

Performance Agreement measures		Q1	Q2
Environmental Health	80% of mold CSRs closed timely (within 90 days)	84%	100%
Environmental Health	Number of Mold Complaints	321	323
Health Education and Promotion	Meet at least 90% of demand for cribs to eligible clients who contacted CHD	80.10%	100%
Health Education and Promotion	Number of Cribs distributed	121	285
CDU	90% of outbreak reports uploaded within 30 days of outbreak being resolved (2 Incubation periods)	100	100%
CDU	# of outbreaks reported	7	1
MCH	75% of newly enrolled prenatal clients will receive a face-to-face within 30 days (Community Health	92%	88
MCH	# newly enrolled prenatal clients		
CCPC	50% of providers have 3rd next available appointment within desired range	24%	Data Pending
CCPC	# of patients seen	26408	
LPP	80% of lead risk assessments have first contact with ooccupant made within 3 business days	76%	70%
LPP	# of lead referrals for elevated blood lead levels	17	27

Update on Facilities Master Plan actions

Facility	Ownership	Status	Strategy	Current Movement toward goal	Sequence
Ambrose Clement Health Center	Lease	Good Condition	Maintain	Negotiating Lease to add Dental; Design is 95% complete by milestones, bidding for construction forthcoming (priority)	1
Bobbie Sterne Health Center	Lease	Requires investment	Renovate or Divest	Awaiting admin building resolution: Public Engagement, Surveys, and Employee input indicate issues but no pressing desire to move out of neighborhood	
Braxton Cann Health Center	Lease	Good Condition	Maintain		
Millvale Health Center	Lease	Requires investment	Maintain	Recently signed a new multi-year lease	
Northside Health Center	Owned	Requires investment	Maintain / Renovate	Negotiating contract with architect for major renovation	3
Price Hill Health Center	Owned	Requires investment	Maintain / Renovate	Conceptual design completed, Have retained architect who is working on full design for	2
Administrative Facility -- B&K	Owned	Obsolete; investment not justified	Divest	Examining property market; evaluating buildings as they come on the market. 655 Plum unsuitable. Currently evaluating property in uptown, time frame 2-5 years	Concurrent
3301 Beekman (Lead Prevention)	Owned	Obsolescent	Undecided	Awaiting admin building resolution	
3845 Dooley	Lease	Obsolescent	Exit Lease	Awaiting admin building resolution	

EMERGENCY

**Cincinnati Board of Health
Resolution No. 2026-__**

**RESOLUTION
BOARD OF HEALTH OF THE CITY OF CINCINNATI**

A RESOLUTION of the Board of Health of the City of Cincinnati, amending Board of Health Resolution No. 2025-004 to correct the fees applicable to the licensing of low-risk mobile retail food establishments and low-risk mobile food service operations.

WHEREAS, Ohio Revised Code Sections 3717.21 and 3717.41 require all food service operations (“FSOs”) and retail food establishments (“RFEs”) operating in Cincinnati to obtain an annual license from the Board of Health of the City of Cincinnati; and

WHEREAS, on September 23, 2025, the Board of Health passed Resolution No. 2025-004, which amended Board of Health Regulation No. 00079, “Fees Retail Food Establishments; Food Service Operations,” to update licensing fees for FSOs and RFEs; and

WHEREAS, Resolution No. 2025-004 also established new licensing fees for mobile FSOs and mobile RFEs, in accordance with the new risk-level classifications established in the Ohio Administrative Code (“OAC”); and

WHEREAS, pursuant to OAC Sections 3701-21-02.1(A)(4) and 901:3-4-03(A)(4), the licensing fees for “low risk” mobile FSOs and mobile RFEs must be set at 50% of the licensing fees applicable to “high risk” mobile FSOs and mobile RFEs; and

WHEREAS, Resolution No. 2025-004 must be amended to ensure that the licensing fees for “low-risk” mobile FSOs and mobile RFEs are precisely 50% of the corresponding “high-risk” mobile FSO and mobile RFE fees; and

BE IT RESOLVED by the Board of Health of the City of Cincinnati, State of Ohio:

Section 1. That the amended text of Board of Health Regulation 00079 set forth in Section 1 of Board of Health Resolution No. 2025-004, which modified the fees applicable to food service operations and retail food establishments, is hereby deleted in its entirety and replaced with the following:

§00079—Fees Retail Food Establishments; Food Service Operations

The cost of a license for a Retail Food Establishment or Food Service Operation as defined in Section 3717.01 of the Ohio Revised Code shall be any amount determined pursuant to Sections 3717.45 and 3717.25 of the Ohio Revised Code, plus the following license fees, based on the risk levels established in Ohio Administrative Code Sections 3701-21-02.3 and 901:4-4-05:

(A) Retail Food Establishment/Food Service Operation Fees

1) < 25,000 ft.²

Risk Class Level 1	\$323.00 <u>\$331.00</u>
Risk Class Level 2	\$364.00 <u>\$374.00</u>
Risk Class Level 3	\$700.00 <u>\$719.00</u>
Risk Class Level 4	\$889.00 <u>\$914.00</u>

2) ≥ 25,000 ft.²

Risk Class Level 1	\$468.00 <u>\$481.00</u>
Risk Class Level 2	\$493.00 <u>\$507.00</u>
Risk Class Level 3	\$1,760.00 <u>\$1,809.00</u>
Risk Class Level 4	\$1,867.00 <u>\$1,918.00</u>

(B) Fees for Temporary Food Service Operations / Retail Food Establishments
(per single event, not to exceed a maximum of five consecutive days) ~~\$220.00~~ \$175.00

(C) Fees for Mobile Food Service Operations

1) High Risk	\$154.00 <u>\$159.00</u>
2) Low Risk	\$77.00 <u>\$79.50</u>

(D) Fees for Mobile Retail Food Establishments

1) High Risk	\$154.00 <u>\$159.00</u>
2) Low Risk	\$77.00 <u>\$79.50</u>

(E) Fees for Vending Food Service Operations ~~\$13.89~~ \$14.29

(F) Facility Review/Equipment Specification Fees For New Construction or Major Changes (for example: structural changes; installation of new equipment; operational changes such as converting the building use or type of food service; or modifying facilities that have not previously been licensed as a food service).

1) < 10,000 ft.²

Risk Class Level 1	\$200.00
Risk Class Level 2, 3 & 4	\$400.00

2) $\geq 10,000 \text{ ft.}^2$

Risk Class Level 1	\$300.00
Risk Class Level 2, 3 & 4	\$600.00

(G) Facility Review/Equipment Specification Fees For Minimal Changes (such as floor layout alteration, equipment placement, or facilities that have not been operated in over a year as a food service).

1) $< 10,000 \text{ ft.}^2$

Risk Class Levels 1	\$100.00
Risk Class Levels 2, 3 & 4	\$200.00

2) $> 10,000 \text{ ft.}^2$

Risk Class Levels 1	\$150.00
Risk Class Levels 2, 3 & 4	\$300.00

(H) Facility Review/Equipment Specification Fees
\$100.00 for Change of Ownership only

(I) Any such fee or portion of such fee retained by the Board of Health shall be paid into a special fund as provided in Sections 3717.45 and 3717.25 of the Ohio Revised Code and used only for the purpose of administering and enforcing Sections 3717.01 to 3717.99 of the Revised Code.

(J) If a license fee is received by the Board of Health after March 1 of each year, a penalty of 25 percent of the applicable fee for that year shall be imposed and paid as provided in Sections 901:3-4-02 and 3701-21-02 of the Ohio Administrative Code. This subsection does not apply to Mobile Food Service Operations, Temporary Food Service Operations, Mobile Retail Food Establishments, Temporary Retail Food Establishments, or to a new Food Service Operation or Retail Food Establishment that opened for business subsequent to March 1 of that year.

Section 2. That the Health Commissioner and his designee(s) are authorized to do all things necessary and proper to comply with the terms of this Resolution.

Section 3. That all terms of Resolution No. 2025-004 not amended by this ordinance remain in full force and effect.

Section 4. That this ordinance shall be an emergency measure necessary for the

preservation of the public peace, health, safety, and general welfare and shall, subject to the terms of Article II, Section 6 of the Charter, be effective immediately. The reason for the emergency is the need to promptly correct the licensing fees applicable to low-risk mobile food service operations and low-risk mobile retail food establishments to ensure compliance with Ohio law and to avoid confusion or improper fee assessments during the current licensing period.

ADOPTED: _____, 2026

Ashlee Young, MPH
Chairperson, Cincinnati Board of Health

Dr. Grant Mussman, MD, MHSA
Health Commissioner
Cincinnati Board of Health

New language underscored. Deleted language indicated by strikethrough.

Healthy Communities Programs



Tiffany White, MPH, RD, LD, CLC
Program Manager
Tiffany.White@Cincinnati-OH.gov

Live-Work-Play Cincinnati (LWPC) 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.



CPR hands-only training from American Heart Association during heart health month



Healthy Communities team with guest speaker, Sherry Hughes.

Scan QR Code to Join
LWPC Email List!



LiveWorkPlayCoalition@Cincinnati-OH.gov

Infant Vitality Program

Ensuring every baby thrives well past their first birthday.

- Community outreach and education.
- Cribs for Kids - 1,141 cribettes annually
- 2,300 Sweet Cheeks diapers in 2025
- Tidal Babe period supplies



Malina Harris BS, CTTS
Infant Vitality Coordinator
Malina.Harris@Cincinnati-OH.gov

Tobacco Free Living Program

Addressing tobacco-related health disparities through community-based education and tobacco policies.

- Tobacco and Vape education.
- Smoke-free policy development:
 - Multi-unit housing.
 - Workplace.
- Referrals to 1-800-QUIT-NOW and My Life My Quit



Bemnet Melaku, MPH
Tobacco Free Living Coordinator
Bemnet.Melaku@Cincinnati-OH.gov

Tobacco 21 Program

Issues licenses and monitors tobacco retailers through inspections and underage buy compliance checks.

- Tobacco retail licensing.
 - 309 identified retailers – 229 renewed, 53 expired, 20 unlicensed, 7 incomplete renewals
- Underage buyer compliance checks.
 - Current pass rate – 88%



Allyn Griffith, MA, EHSIT
Environmental Health Specialist-in-training
Allyn.Griffith@Cincinnati-OH.gov

Behavioral Health & Recovery Supports

Providing health education to at risk individuals & connecting Cincinnati residents with a history of addiction to supportive services.

- Linking at risk Cincinnatians to health services through community outreach and mentor programs.
- Barbershop Initiative.
- Addiction services & recovery supports.
 - New in 2026: Coaching Boys Into Men



Eric Washington, BA
Men's Health Coordinator
Eric.Washington@Cincinnati-OH.gov



Active Living Program

Identifying and eliminating barriers to physical activity to improve mental and physical health.

- Neighborhood active living assessments.
- Pedestrian and bicycle infrastructure improvements.
 - 2025 Carthage Traffic Calming & [Roll Hill Traffic Garden](#)
 - 2026 Updates to SRTS plan & trail improvements in Carthage
- AAP Put A Lid On It! Bike helmet program.
- Youth Education Series (Y.E.S.) on Pedestrian Safety.



Scott Dean, MPH
Active Living Coordinator
William.Dean@Cincinnati-OH.gov

Food Equity and Healthy Eating Program

Increasing food access and distribution to communities which have been historically underserved.

- Neighborhood healthy eating assessments, outreach and education.
- Client choice food distributions and health fairs.
- Cincy Freeze & Feed program.
- Monthly food equity newsletter.
- Produce Perks distribution sites.



Jasmine Robinson, BA, CCHW, CTTS, CLC
Food Equity Coordinator
Jasmine.Robinson@Cincinnati-OH.gov

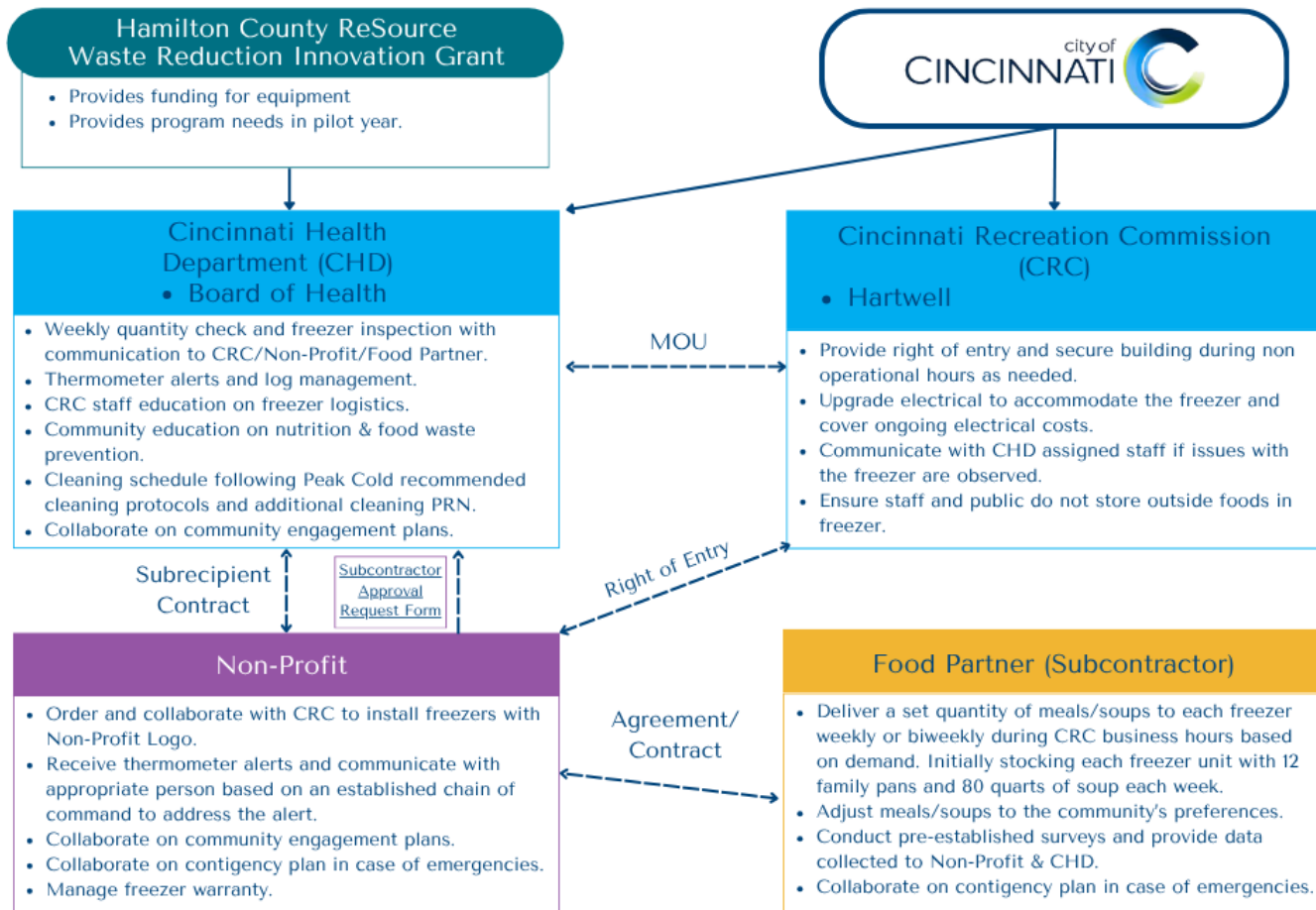
Cincy Freeze & Feed Program

Free access freezers, provided through a Hamilton County Waste Reduction Innovation grant, placed strategically at multiple Cincinnati Recreation Commissions in collaboration with La Soupe and 2 Non-Profit Organizations.

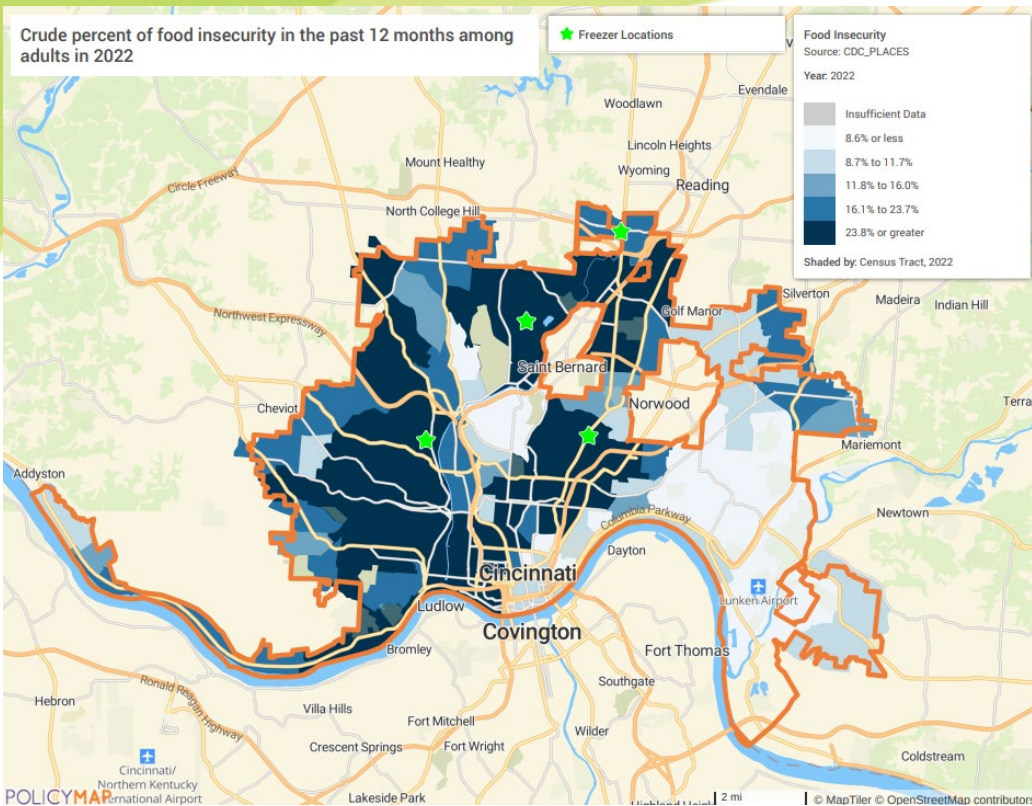
- Minimize food waste. (Roughly 17% of all waste)
- Reduce food insecurity in historically marginalized communities.
- Provide nutrition education.
- Connect to additional resources.
- Strengthen community trust.



COMMUNITY FREEZER PROGRAM



Cincy Freeze & Feed Program Locations



CareSource & La Soupe:

- Millvale CRC (45225 and 45223)
- Hirsch CRC (45229)

Food for the Soul & La Soupe:

- Hartwell CRC (45216)

Food for the Soul Only:

- Winton Hills CRC (45232)

Cincy Freeze & Feed Program

- Hartwell CRC (45216) Pantry
 - Creating Healthy Communities grant through ODH.
 - Supporting Wellness At Pantries (SWAP)

SWAP® Guide
Supporting Wellness At Pantries

Food Category	Choose Often		Choose Sometimes		Choose Rarely	
	Servings per Week	Examples	Servings per Week	Examples	Servings per Week	Examples
Fruits and Vegetables	1-2	1/2 cup	1-2	1/2 cup	1-2	1/2 cup
Grains	1-2	1/2 cup	1-2	1/2 cup	1-2	1/2 cup
Protein	1-2	1/2 cup	1-2	1/2 cup	1-2	1/2 cup
Dairy	1-2	1/2 cup	1-2	1/2 cup	1-2	1/2 cup
Non-Dairy Alternatives	1-2	1/2 cup	1-2	1/2 cup	1-2	1/2 cup
Beverages	1-2	1/2 cup	1-2	1/2 cup	1-2	1/2 cup
Meat/Seafood	1-2	1/2 cup	1-2	1/2 cup	1-2	1/2 cup
Processed and Packaged Snacks	None		1-2	1/2 cup	1-2	1/2 cup
Desserts	None		None		1-2	1/2 cup

*Use the added sugar value when available on the Nutrition Facts label. If it is not available, use the total sugar value. The following are the limits for all categories except fruit and vegetables and dairy.

Unlabeled: Examples include baby food, nutritional supplements, protein powders.

None: Products

SWAP is a program of Connecticut Foodshare

YOUR LOGO





Cincy Freeze & Feed

Collaboration to cut food waste, increase access, & build healthy communities.

Freezer Locations for Free Meals



Avondale Freezer



Hartwell Freezer



Millvale Freezer



Winton Hills Freezer



How Are We Doing?



Feedback on Freezer Meals



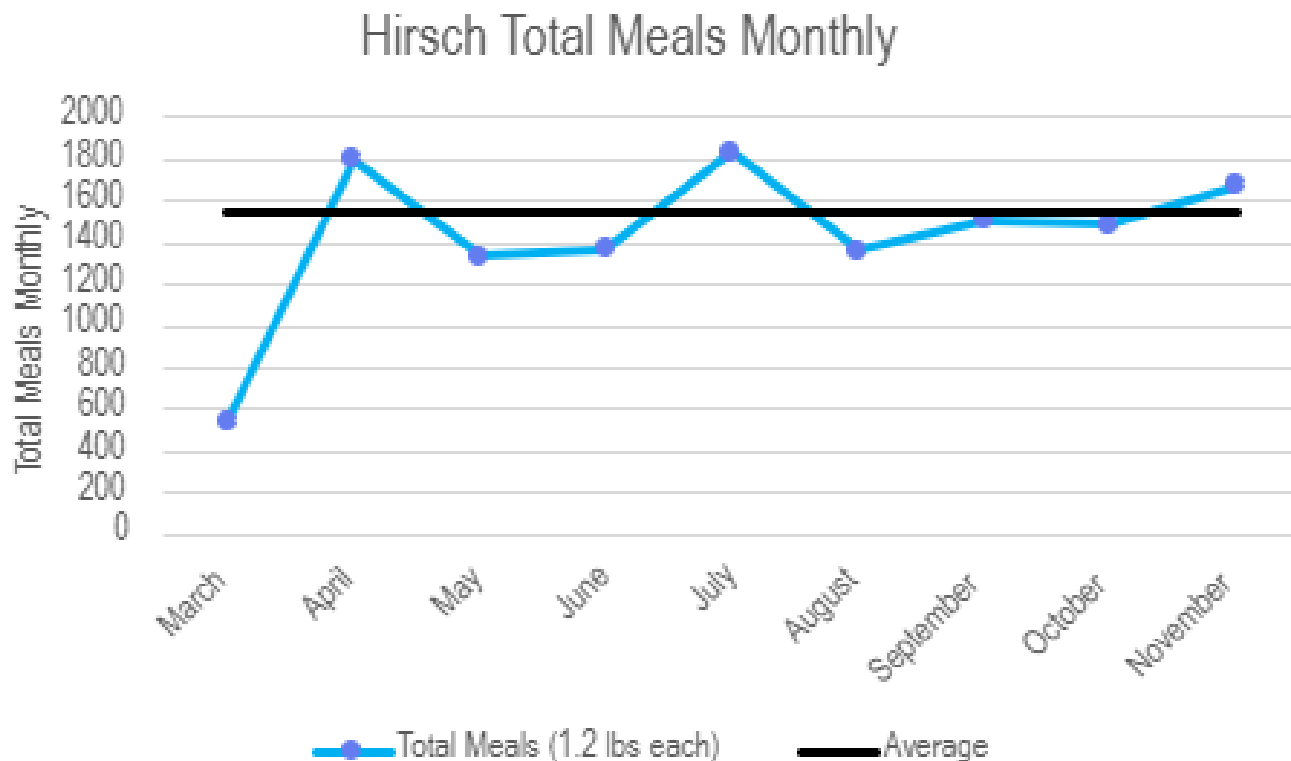
Para Español / Pour le français

Cincy Freeze & Feed LinkTree

View on mobile



Cincy Freeze & Feed Program Data

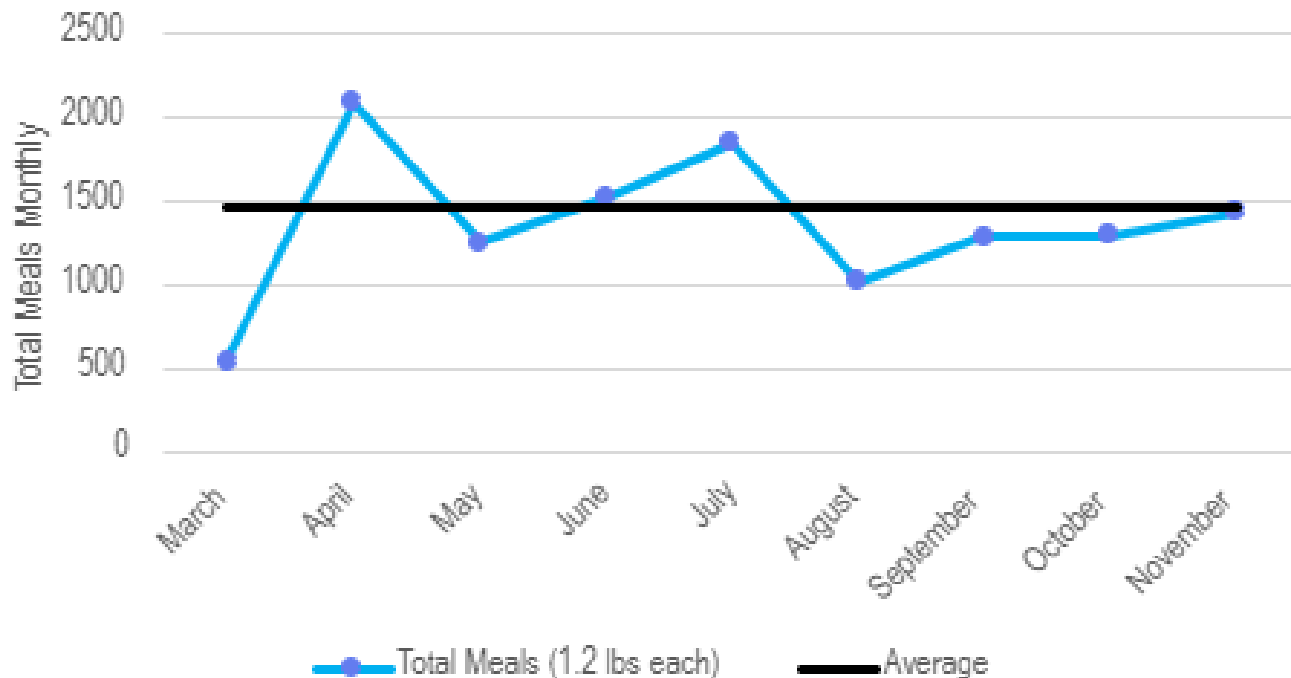


**March 2025 to
November
30th – 12,940
meals and
15,528 lbs. of
food diverted
from the
landfill.**

*March data begins 3/24/2025.

Cincy Freeze & Feed Program Data

Millvale Total Meals Monthly



March 2025 to November 30th – 12,317.5 meals and 14,781 lbs. of food diverted from the landfill.

*March data begins 3/24/2025.

Building Community Trust through Cincy Freeze & Feed

Cincy Freeze and Feed program opens first freezer in Millvale

Updated: Apr. 10, 2025 at 2:29 PM EDT



**'A fundamental right' |
How two freezers aim to
improve lives in two
Cincy neighborhoods**



Photo by: WCPO

Thank You!



Tiffany White, MPH, RD, LD, CLC
Program Manager
Tiffany.White@Cincinnati-OH.gov

City of Cincinnati Board of Health Finance Committee

Kiana Trabue, Chair of the Board of Health Finance Committee, called the Tuesday, January 20, 2026 Finance Committee meeting to order at 5:00 pm

Roll Call

Members present: Kiana Trabue, Jagdish Bhati, Dr. Camille Jones (5:02 pm), John Kachuba, Mark Menkhaus, Dr. Grant Mussman, and Joyce Tate

Topic	Discussion	Action/Motion
Approval of Minutes	The Chair asked Committee members if everyone had the opportunity to review the minutes from November 18, 2025. <u>Motion:</u> That the Board of Health (BOH) Finance Committee approves the minutes from November 18, 2025.	Motion: Mr. Bhati Second: Ms. Trabue Action: Passed
Review of Contracts for BOH Approval:	Ms. Trabue began reviewing contracts going to BOH for approval. Ohio Association of Community Health Centers 65x10834 Ms. Tate presented and explained that this contract is funded by the State of Ohio, to provide training and preceptorship opportunities for health professionals within our health centers. Several of our nurse practitioners participated in this program. Approximately five to six nurse practitioners regularly precept nurse practitioner students, and other providers participate on an occasional basis. While the number is not large, some of our other providers also take on professional health students from time to time. Ms. Tate provided an example, noting that Dr. Mussman has had students rotate through, and when these students qualify under the program, we receive credit for their participation. Motion: That the BOH Finance Committee recommends approval. Susan Tilgner 65x10840 Dr. Amin explained the proposed extension of an existing contract with Susan Tilgner in the amount of \$30,000 to provide accreditation support services. The organization will be renewing accreditation this year, and Ms. Tilgner serves as a technical expert to assist with documentation and compliance. It was clarified that this is not a permanent hire; the goal is to have an internal accreditation coordinator in place by the end of the contract term. While accreditation experience exists internally, there is currently no designated backup. Motion: That the BOH Finance Committee recommends approval. FQHC 340B Compliance 65x10841 Mr. Miller presented to approve a contract with an independent auditing firm for the 340B program. During the most recent HRSA 340B audit (conducted November 2023, with results received September 2024), HRSA recommended that FQHCs periodically engage an independent firm to audit both compliance and fiscal opportunities related to the 340B program. The audit results were largely positive,	Motion: Mr. Bhati Second: Dr. Jones Action: Passed Motion: Dr. Jones Second: Mr. Kachuba Action: Passed Motion: Mr. Bhati Second: Dr. Jones Action: Passed

	with two findings. One billing issue was resolved, and the second finding recommended engaging an independent auditor to review current compliance and internal controls. The independent audit would focus on diversion prevention, policies and procedures, internal auditing processes, and overall HRSA compliance. After consulting with other FQHC directors statewide, this firm was consistently recommended and determined to be the best option. In response to a question regarding timing, it was noted that the audit is separate from the 340D rebate program and that required auditing procedures must remain in place regardless of future changes. A decision is expected by April 1, with the audit likely occurring later in the fiscal year. Mr. Menkhaus noted that contracts are typically not brought to the Board for approval unless they exceed \$15,000; however, this contract, at \$14,750, was presented due to its proximity to the threshold. He also noted that, as outlined in the packet, travel expenses would be reimbursed if the auditors were required to travel to Cincinnati. Motion: That the BOH Finance Committee recommends approval.	
Review of Contracts for BOH Information:	Ms. Trabue began reviewing the following contract, going to BOH for information. Working in Neighborhoods 65x10845 Ms. White presented on the Creating Healthy Communities Grant entering its second year. During the first year, a policy, systems, and environmental scan was conducted in the Beekman Corridor to identify desired healthy eating and active living improvements. While several active living initiatives were already underway, the community identified a need to focus on healthy eating, specifically through the development of community gardens due to limited access to fresh food. Planning and collaboration have occurred over the past year, with the community garden network gaining momentum beginning in October at the start of the current grant cycle. The project serves multiple neighborhoods, including South Fairmount, North Fairmount, Millvale, South Cumminsville, and English Woods.	
Financial Update	Mr. Menkhaus provided an overview of the financial statement for the period ending in December 2025. • Total Revenue: Revenue at the end of December was \$38,325,051.41. Which is a 29.08% increase from December of 2024. Expenses as of December 2025 totaled \$33,237,034.47 which is a 4.56% increase from December 2024. Total net gain after the capital revenue transfer was \$7,031,016.94. Total Expenses: • 7100 - Personnel increased by 7.35%. 7500-Fringes saw a corresponding increase of 4.56%. The increase is attributed to the increase in the employer contribution retirement rate (this increased from 19.79% to 23.83%). This is also attributable to the 5% COLA all AFSCME employees received at the end of September. AFSCME also received a one-time	

	payment of \$1,500. This one-time payment totaled \$415,500 for the Health Department. • 7200 - Contractual Services saw a decrease of 9.13% (12.16% increase in October). • 7300 - Materials & Supplies decreased by 1.02% (20.43% increase in October). The differences are due to the timing of invoices paid. In FY26 we paid Cross Country Staffing \$9,760.10 as of December, yet in FY25 we paid Cross Country Staffing \$171,088.03 as of December. In FY26 we paid Cardinal Health \$1,000,918.58 as of December, yet in FY25 we paid Cardinal Health \$779,936.96 as of December. We also expensed \$500,000 to Greater Cincinnati Community Shares in FY26, this was not an expense in FY25. • 7400 - Fixed Costs decreased by 4.85% (17.66% increase in October). The increase is the timing of invoices paid. In FY26 we paid Ochin \$467,288.23 as of December, yet in FY25 we paid Ochin \$568,630.00 as of December. We also expensed \$80,000 to Hamilton County in FY26, but in FY25 we expensed \$50,000. • 7600 - Property increased by 317.66% (370.45 increase in October). The increase is due to the renovation at the Price Hill Clinic and the sink hole at the Bobbie Sterne parking lot. Total Available: \$7,031,016.94	
New Business	N/A	
Public Comment	Mrs. Mitchell stated that as of 5 p.m. today, no questions or comments from the public were received.	

Meeting Adjourned: 5:27 pm

Next Meeting: **Tuesday, February 17, 2026, 5 p.m.**

Minutes prepared by Shurdina Mitchell

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

Board of Health Finance Committee Roll Calls for January 20, 2026:

	Roll Call	Minutes	Ohio Association of Community Health Centers 65x10834	Susan Tilgner 65x10840	FQHC 340B Compliance 65x10841	Working in Neighborhoods 65x10845 (Informational Only)
Mr. Jagdish Bhati	Y	MY	MY	Y	MY	-
Dr. Camille Jones	Y	A	2Y	MY	2Y	-
Mr. John Kachuba	Y	Y	Y	2Y	Y	-
Mr. Mark Menkhaus Jr.	Y	Y	Y	Y	Y	-
Dr. Grant Mussman	Y	Y	Y	Y	Y	-
Ms. Joyce Tate	Y	Y	Y	Y	Y	-
Ms. Kiana Trabue	Y	2Y	Y	Y	Y	-

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

Others present: Shurdina Mitchell (Clerk), Dr. Maryse Amin, David Miller, Dr. Ashanti Salter and Tiffany White

Preparation Date 10/17/2023

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 **Ohio Association of Community Health Centers**

Contract # **65x10834**

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

Initiator Person & Phone # **Joyce Tate, 513-357-7361**

Division Head & Phone # **Grant Mussman, 513-357-7215**

Division **Health/CCPC**

Type of Contract/Agreement ☐ Accounts Payable ☒ Accounts Receivable
☐ Service Contract (no \$) ☐ Lease

Funding Source ☐ General Fund ☐ Grant Fund ☐ Other Funding

Action Required: ☒ Board Approval ☐ Board Information

CONTRACT DOLLAR AMOUNT

Original Amount **Up to \$50,000.00**

TERM

Original Term Start Date **7/1/2025** End Date **6/30/2027**

EXECUTIVE SUMMARY

Ohio Association of Community Health Centers entered into a contract with the Ohio Department of Health, where the ODH agreed to provide funding to facilitate clinical education placement and training of students (can include medical, dental, APRN, Physician Assistants, and Behavioral health providers—LCDC III/LIDC, LMFT, LSW/LISW, LPC/LPCC) in FQHC's.

Term is from 7/1/25-6/30/2027. Dollar amount is up to \$50,000.00 based on clinical rotation hours reported quarterly.

Consultant will serve as support in training CHD's Accreditation Coordinator for a year from February 1, 2026, through December 31, 2026, for a maximum of 20 hours per month for 12 months at an hourly rate of \$150.00 (\$30,000.00).

Scope of Services

Consultant Responsibilities

The Consultant shall provide technical assistance and advisory services to support the Cincinnati Health Department's (CHD) ongoing compliance with the Public Health Accreditation Board (PHAB) requirements. Services shall include, but are not limited to, the following:

- Serve as technical assistance support to the CHD PHAB Accreditation Coordinator to maintain compliance with PHAB standards and requirements, including post-accreditation activities (CHD accredited May 14, 2021).
- Provide feedback, guidance, and technical assistance to the Accreditation Coordinator and Health Commissioner regarding PHAB Annual Reports, reaccreditation preparation, and related accreditation documentation.
- Conduct research and prepare written summaries, analyses, or guidance on PHAB-related topics as mutually agreed upon by the parties.
- Review, revise, and/or prepare reports and accreditation-related documents as needed, including but not limited to the Community Health Improvement Plan (CHIP).
- Participate in regular virtual meetings with the Accreditation Coordinator to discuss progress, deliverables, and ongoing accreditation needs. In-person meetings may occur upon mutual agreement of the parties.
- Track accreditation-related activities performed under this Agreement and submit a detailed monthly invoice to CHD documenting services provided.

CHD Responsibilities

CHD shall support the Consultant's performance of services by:

- Scheduling and participating in regular virtual meetings with the Consultant, as mutually agreed upon.
- Providing timely access to relevant information, data, records, and documents necessary for the Consultant to perform the Scope of Services.

Reviewing, editing, and returning draft documents or deliverables within a reasonable timeframe to support project timeline

Preparation Date January 5, 2026

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	FQHC 340B Compliance		
Contract #	65x10841		
Person and Division responsible for administering contract/grant/lease:			
Initiator Person & Phone #	David Miller, 513-357-7357		
Division Head & Phone #	Joyce Tate, 513-357-7361		
Division	Health		
Type of Contract/Agreement	☒ Accounts Payable	☐ Accounts Receivable	
	☐ Service Contract (no \$)	☐ Lease	
Funding Source	☐ General Fund	☐ Grant Fund	☐ Other Funding
Action Required:	☒ Board Approval	☐ Board Information	

CONTRACT DOLLAR AMOUNT

Original Amount **\$14,750**

TERM

Original Term Start Date **Upon execution** End Date **Upon completion of audit**

EXECUTIVE SUMMARY

The Cincinnati Health Department (CHD) would like to enter into an agreement with FQHC 340B Compliance for 340B audit services. FQHC 340B Compliance will review CHD's current 340B policies and procedures to ensure compliance with both OPA and HRSA guidelines. In addition, they will give recommendations from their experience with other best practice health centers to strengthen the 340B policies and procedures.

The proposed cost and structure of this engagement is as follows:

340B Audit:

Audit Scope: 340B drugs administered in a six-month period (as is the scope in a HRSA OPA audit) or a twelve-month period if elected by the Health Center.

Test Work: 200 claims tested (contracted pharmacy claims, in-house pharmacy claims, clinic administered drug

claims) with EHR access; only 100 claims without EHR access.

Estimated time of completion: 4-6 weeks offsite and 1-2 days onsite

Service	Price
Complete 340B Program Audit (Includes all items listed in description box above)	☐ \$14,750
Onsite Audit (Estimated travel cost sent after kick off) (plus reimbursement for travel expenses, if performed remotely no travel expenses will be accrued)	☐
\$6,000 due upon execution of the engagement letter, balance due upon report issuance	

DATE: January 20, 2026

TO: City of Cincinnati Board of Health Finance Committee

FROM: Mark Menkhaus, Jr., CFO

SUBJECT: Fiscal Presentation 2026

FINANCIAL STATEMENTS REVIEW FOR THE FISCAL YEAR 2026 – DECEMBER

2026 December Highlights:

- Revenue at the end of December was \$38,325,051.41. Which is a 29.08% increase from December of 2024. Expenses as of December 2025 totaled \$33,237,034.47 which is a 4.56% increase from December 2024. Total net gain after the capital revenue transfer was \$7,031,016.94.

Year over Year:

- As of December, we had \$80,919.44 in overtime compared to December of 2024's total of \$90,700.69. Neither year as of December had any disaster overtime.
- We received an additional capital revenue transfer in the amount of \$1,786,000 in the month of December. The FY26 total amount is \$1,943,000. In FY25 we received a total of \$2,187,000.
- 7100-Personnel increased by 7.35%. 7500-Fringes saw a corresponding increase of 4.56%. The increase is attributed to the increase in the employer contribution retirement rate (this increased from 19.79% to 23.83%). This is also attributable to the 5% COLA all AFSCME employees received at the end of September. AFSCME also received a one-time payment of \$1,500. This one-time payment totaled \$415,500 for the Health Department.
- 7200- Contractual Services saw a decrease of 9.13% (12.16% increase in October), and 7300- Materials & Supplies decreased by 1.02% (20.43% increase in October). The differences are due to the timing of invoices paid. In FY26 we paid Cross Country Staffing \$9,760.10 as of December, yet in FY25 we paid Cross Country Staffing \$171,088.03 as of December. In FY26 we paid Cardinal Health \$1,000,918.58 as of December, yet in FY25 we paid Cardinal Health \$779,936.96 as of December. We also expensed \$500,000 to Greater Cincinnati Community Shares in FY26, this was not an expense in FY25.
- 7400-Fixed Costs decreased by 4.85% (17.66% increase in October). The increase is the timing of invoices paid. In FY26 we paid Ochin \$467,288.23 as of December, yet in FY25 we paid Ochin \$568,630.00 as of December. We also expensed \$80,000 to Hamilton County in FY26, but in FY25 we expensed \$50,000.
- 7600-Property increased by 317.66% (370.45 increase in October). The increase is due to the renovation at the Price Hill Clinic and the sink hole at the Bobbie Sterne parking lot.

Cincinnati Board of Health Financial Statement for the period of December

	FY26 Actual	FY25 Actual	Variance
Revenue			
8236-Pools/Spa	\$3,151.25	\$1,642.50	91.86%
8237-Household Sewage System	\$20,845.00	\$25,043.00	-16.76%
8239-Tatto/ Body, Environmental Waste License Fee	\$10,425.00	\$5,275.00	97.63%
8241-Food Service (Mobile-Temporary)	\$41,545.00	\$54,391.94	-23.62%
8242-Vending Machine Licenses	\$55.56	\$53.76	3.35%
8244-Food Establishments	\$56,053.50	\$104,017.25	-46.11%
8249-Food, NOC	\$45,547.25	\$27,314.50	66.75%
8432-Vending Machine Proceeds	\$0.00	\$0.00	0.00%
8536-Grants\State	\$1,185,207.53	\$486,406.25	143.67%
8556-Grants\Federal	\$4,076,412.30	\$6,253,553.41	-34.81%
8563-Bd of Ed Svc (School Nurses Sal.)	\$304,330.12	\$1,747,068.61	-82.58%
8564-Ham Co Service	\$102,533.32	\$89,885.27	14.07%
8571-Specific Purpose\Private Org.	\$6,000.00	\$153,097.86	-96.08%
8617-Non-Department Fringe Benefit Reimbursement	\$1,563.10	\$1,085.76	43.96%
8618-Overhead Charges Indirect Costs	\$60,700.00	\$61,340.00	-1.04%
8731-Birth & Death Certificates	\$292,477.24	\$262,186.24	11.55%
8732-Vital Stats - Other	\$4,916.57	\$3,556.15	38.26%
8733-Self-Pay Patient	\$523,212.86	\$459,615.22	13.84%
8734-Medicare	\$3,056,322.36	\$2,663,184.15	14.76%
8736-Medicaid	\$9,373,601.85	\$2,810,571.63	233.51%
8737-Private Pay Insurance	\$702,346.73	\$617,342.64	13.77%
8738-Medicaid Managed Care	\$5,173,113.32	\$3,376,659.19	53.20%
8739-Misc. (Medical rec.\smoke free inv.)	\$466,552.03	\$1,048,532.13	-55.50%
8784-Private Lot Litter & Weed	\$0.00	\$0.00	0.00%
8811-Unclaimed Remains	\$5,572.00	\$0.00	0.00%
8914-Bond/Note Proceeds	\$1,786,000.00	\$0.00	0.00%
8917-Deferred Sewer Assessment Collections	\$0.00	\$226.60	-100.00%
8932-Prior Year Reimbursement	\$54,629.32	\$185,076.65	-70.48%
% That is attributable from 416	\$10,971,938.20	\$9,253,189.99	18.57%
Total Revenue	\$38,325,051.41	\$29,690,315.70	29.08%
Expenses			
71-Personnel	\$18,078,394.81	\$16,841,032.17	7.35%
72-Contractual	\$4,187,947.48	\$4,608,591.71	-9.13%
73-Material	\$2,084,594.99	\$2,106,071.37	-1.02%
74-Fixed Cost	\$1,155,366.40	\$1,214,200.65	-4.85%
75-Fringes	\$7,179,196.41	\$6,885,126.53	4.27%
76-Property	\$551,534.38	\$132,054.19	317.66%
Total Expenses	\$33,237,034.47	\$31,787,076.62	4.56%
Net Gain (Losses)	\$5,088,016.94	(\$2,096,760.92)	342.66%
8936-Transfer	\$1,943,000.00	\$2,187,000.00	
Total Available	\$7,031,016.94	\$90,239.08	7691.54%



Date: 1/27/2026

To: MEMBERS of the BOARD of HEALTH

From: Grant Mussman, MD MHSA, Health Commissioner

Copies: Leadership Team, HR File

Subject: PERSONNEL ACTIONS for January 27, 2026 BOARD of HEALTH MEETING

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

GRACE BIERMAN

DIETETIC TECHNICIAN

CCPC

(New Position)

Salary Bi-Weekly Range:

\$2,154.85 to \$2,276.35

Grant Fund

Grace Bierman is a graduate from Cincinnati State and Technical and Community College and is a registered Dietetic Technician. She has 2-years of work experience as a DTR providing nutrition assessments and education to families. She is interested in increasing her knowledge in breastfeeding and is excited about the breastfeeding educational and teaching opportunities that WIC provides.

MATTHEW DOWLER

**ENVIRONMENTAL HEALTH
SPECIALIST-in-TRAINING**

CHES

(Promotional vacancy)

\$2,477.48 to [Click or tap here to](#)

enter text.

Revenue Fund

The Cincinnati Health Department Food Safety Program is proud to announce Mathew Dowler has accepted a position in our department. Mr. Dowler has military experience as a sergeant in the U.S. Marine Corp and is a 2025 graduate of the University of Cincinnati with a bachelor's degree in biology. We are excited to welcome Mathew to our team!

KEYARA GREEN

DENTAL ASSISTANT

CCPC

(New Position)

Salary Bi-Weekly Range:

\$2,154.85 to \$2,276.35

Grant Fund

Keyara Green graduated from a dental assistant program in 2025 from Fortis College. She has worked at Aspen Dental since 2024 and has experience working in pediatrics and general dentistry. Her references indicated she was a fast learner, a strong employee and a great assistant. She is eager and open to learning dental at an FQHC and we think she will be a great asset to the Cincinnati Health Department dental program

PERSONNEL ACTIONS for January 27, 2026 , BOARD of HEALTH MEETING
Page 2 of 2

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

JASMINE NELSON **ENVIRONMENTAL HEALTH** **CHES**
SPECIALIST-in-TRAINING

(Promotional vacancy)

\$2,477.48 to [Click or tap here to enter text.](#)

Revenue Fund

Salary Bi-Weekly Range:

The Cincinnati Health Department Food Safety Program is proud to announce Jasmine Nelson has accepted a position in our department. Ms. Nelson has a master's degree in public health from the University of Alabama-Birmingham; she has worked for the Northern Kentucky Health Department and most recently at the Center for Disease Control as an epidemiologist. We are excited to welcome Jasmine to our team!

EDNA NICHOLSON **CASEWORK ASSOCIATE** **CCPC**
(Transfer vacancy)

Salary Bi-Weekly Range: \$1,920.34 to \$2,035.37 Grant Fund

The City of Cincinnati Primary Care would like to hire Edna Nicholson as a Case Work Associate. Ms. Nicholson is a graduate of Hughes High School and has over ten years of experience serving as a Case Management Assistant. Ms. Nicholson has a desire to serve the community, and her skills, knowledge, and empathy will be an asset to the CCPC Operations team.

PROMOTION

WILLIAM ROBB **PUBLIC HEALTH NURSE 3** **NURSING**

(Promotional vacancy)

Salary Bi-Weekly Range: \$3,532.79 to \$3,897.48 General Fund

Registered Nurse with 32 years of service in the City of Cincinnati Health Department, experienced in pediatric and adult assessments, case management, immunizations, and physician-ordered procedures. Background includes field, clinic, and school nursing, Employee Health Services, and current work in the CMH division. Strong collaborator with multidisciplinary teams and committed to improving community health. Seeking to apply extensive institutional knowledge and public health nursing experience in the Public Health Nurse 3 role.

DATE: January 20, 2026

TO: Cincinnati Health Department Board of Health

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

SUBJECT: January 2026 Communicable Disease Report

Respiratory Activity as of 1/20/2026

- Nationally, respiratory activity data was last updated on January 16, 2026 on the [CDC website](#):
 - The amount of acute respiratory illness causing people to seek health care is moderate.
 - Seasonal influenza activity remains elevated across the country.
 - RSV activity is elevated in many areas of the country.
 - Nationally, COVID-19 activity is increasing from low levels.
 - Nationally, wastewater activity level for COVID-19 and influenza is moderate and RSV is low.
 - During week 1 of 2026, Influenza A made up 93.0% of positive tests reported by clinical laboratories nationwide and Influenza B was 7.0%. Subtyping performed by public health laboratories resulted in Type A: 89.7% H3N2, 10.3% H1N1, and Type B 100% Victoria lineage.
 - Susceptibility studies conducted by CDC showed:
 - High levels of resistance to the adamantanes (amantadine and rimantadine) persist among influenza A(H1N1)pdm09 and influenza A(H3N2) viruses (the adamantanes are not effective against influenza B viruses). Therefore, use of these antivirals for treatment and prevention of influenza A virus infection is not recommended and data from adamantane resistance testing are not presented.
 - There have been 32 pediatric deaths reported nationwide.
 - Nationally, influenza vaccination rates continue to be lower in 2025-2026 than the prior 6 years.
 - CDC respiratory vaccine recommendations can be found [here](#).
- Statewide, ODH is reporting statewide respiratory activity through 1/10/2026 on its [dashboard](#). Influenza, RSV and COVID hospitalizations are all trending down, however, RSV hospitalizations in Hamilton County are trending up.

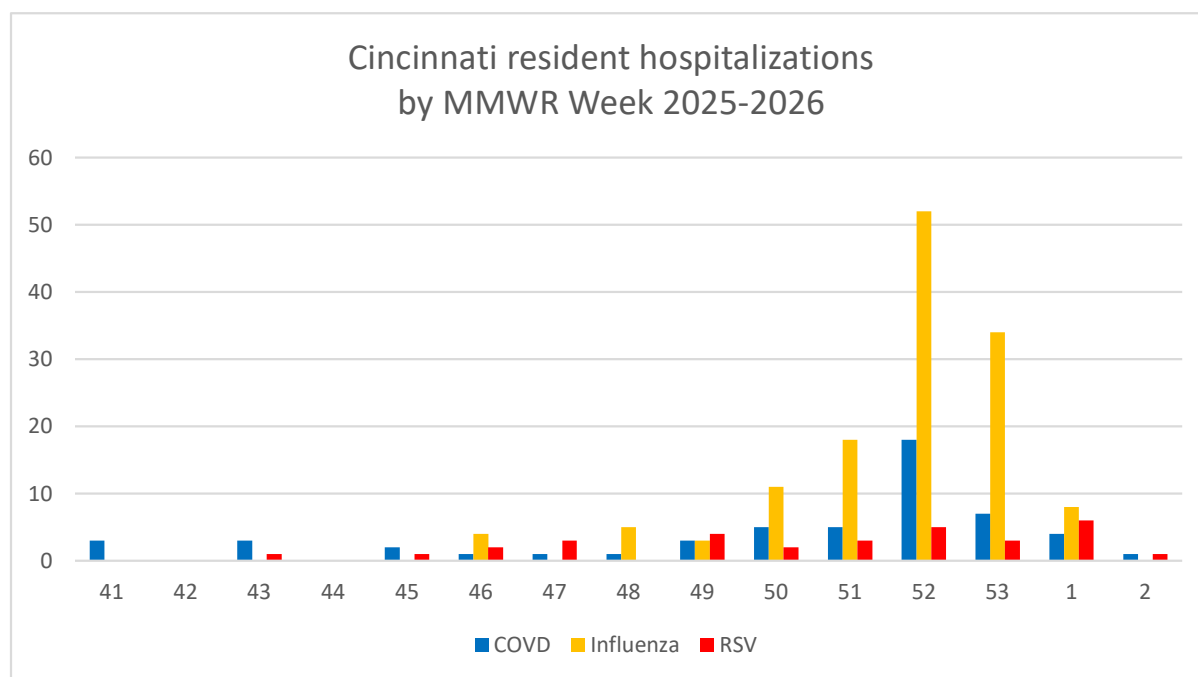
Respiratory virus wastewater monitoring data is shown in the table below:

Updated 1/20/2026

Respiratory Virus	US	Ohio	Greater Cincinnati	
			Mill Creek	Little Miami
COVID-19	Moderate	Moderate	Moderate	Moderate
Influenza	Moderate	Low	High	Low
RSV	Low	Low	Low	Low

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

Respiratory hospitalizations in Cincinnati residents appear to be trending down since week ending 12/27/2025, according to data from the Ohio Disease Reporting System (ODRS) and statewide COVID and RSV associated hospital surveillance:



Demographic data for the total reported hospitalizations this season are in the table on the following page:

2025-2026 Respiratory Virus Associated Hospitalizations in Cincinnati Residents as of 1/20/2026*									
Demographics by virus		COVID	%	Flu	%	RSV	%	Total	%
Sex	Male	22	40.74	58	42.96	16	51.61	96	43.64
	Female	32	59.26	77	57.04	15	48.39	124	56.36
Ethnicity	NonHispanicOrNonLatino	47	87.04	113	83.70	29	93.55	188	85.45
	HispanicOrLatino	*	*	*	*	*	*	10	4.55
	Unknown	*	*	14	10.37	*	*	22	10.00
Race	Asian	*	*	*	*	*	*	*	*
	Black	26	48.15	70	51.85	17	54.84	113	51.36
	White	28	51.85	37	27.41	13	41.94	78	35.45
	Other	*	*	27	20.00	*	*	27	12.27
	Unknown	*	*	*	*	*	*	*	*
Age	0-4	*	*	12	8.89	13	41.94	29	13.18
	5-24	*	*	22	16.30	*	*	31	14.09
	25-64	18	33.33	49	36.30	*	*	68	30.91
	65+	31	57.41	52	38.52	*	*	92	41.82
Total		54	24.55	135	61.36	31	14.09	220	100

* Sources: Ohio Disease Reporting System (ODRS) and state-wide respiratory -associated hospitalization surveillance

All data is provisional and subject to change. Numbers <10 withheld

Communicable Disease Investigations in December

CHD investigated 73 (75) communicable disease reports in December 2025. You can find the reports meeting confirmed and probable case definitions included in the December Monthly Infectious Disease Surveillance Summary in the board's packet. This data is also updated each month on the Communicable Disease Dashboard that is located on the website: [Communicable Disease Unit - Health](#).

Outbreak Response

CHD's Communicable Disease Control and Prevention Unit investigated 4 new outbreak reports (OB) in December:

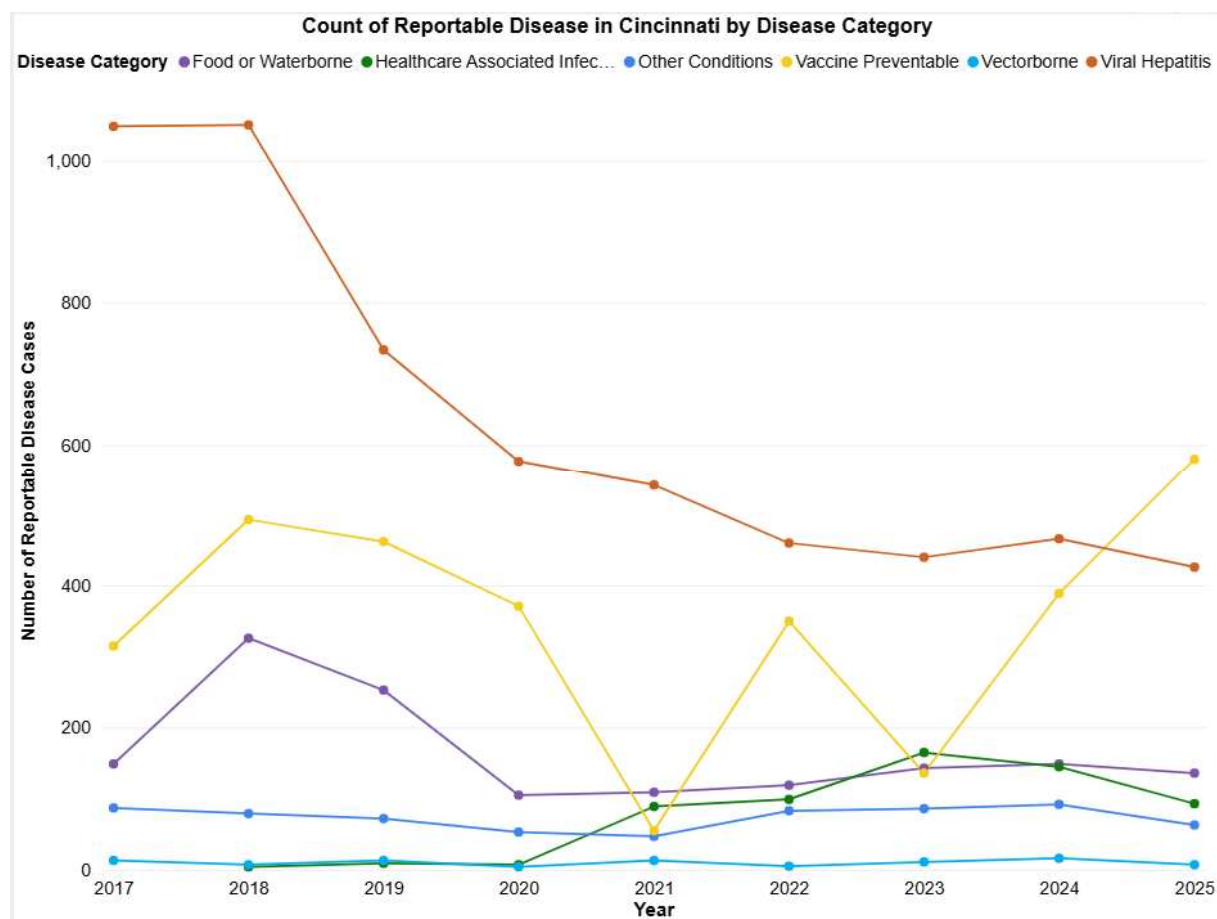
- 2 COVID-19 OBs in healthcare settings
- 1 COVID-19 OB in a behavioral health setting
- 1 Influenza OB in a healthcare setting

Hospital-associated Legionellosis Outbreak update

CHD continues to work with hospital representatives, ODH and CDC, as the facility continues testing and remediation efforts. There have been a total of 6 cases of Legionnaires' Disease associated with the facility at the time of this report.

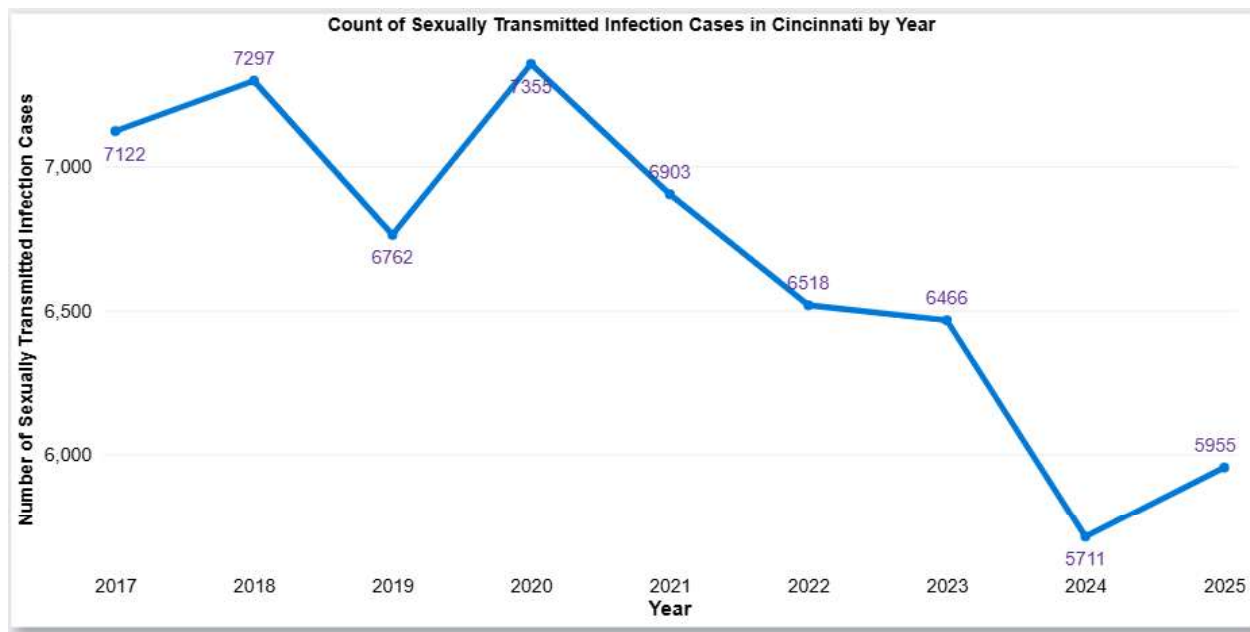
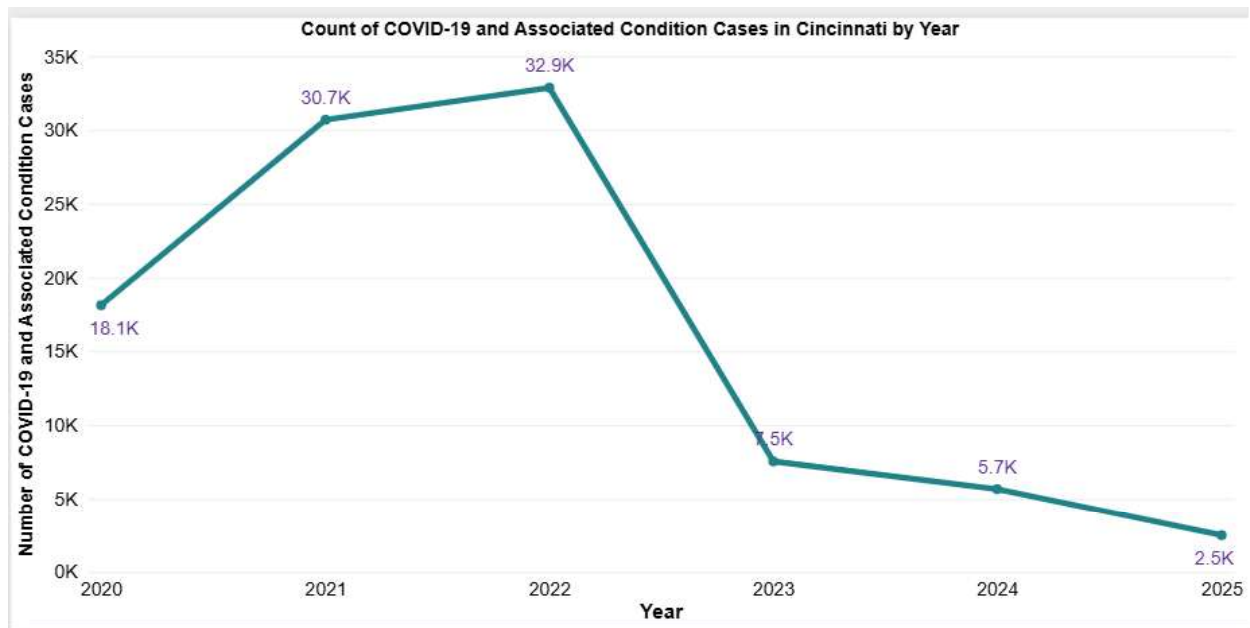
Communicable Disease Annual Counts by Category

2025 Counts are preliminary and subject to change. From the CHD CD dashboard last updated on 1/7/2026, trends are available to illustrate where the largest increases or decreases have been (2017-2025).



In the above screenshot, Vaccine Preventable diseases, in yellow, appear to be rising since the historic lows experienced during the COVID-19 pandemic. The largest driver being influenza-associated hospitalizations, which reached a high of 486 in 2025. The greatest decrease over time is clearly illustrated in the Viral Hepatitis category, here in red. Chronic Hepatitis C represents the largest decrease, having dropped from 912 new cases in 2018 to a total of 325 new cases in 2025. Chronic Hepatitis B, however, has risen from a low of 69 new cases reported in 2020 up to 93 new cases reported in 2025.

Withheld from the chart are COVID-19 and Sexually Transmitted Infections, which are illustrated in the screenshots on the next page. As of October 1, 2025, COVID-19 is no longer reportable in Ohio. The 2025 count is the number of cases reported through the end of September.



Overall STIs were trending down since 2020. The largest driver of the increase from 2024 to 2025 was Chlamydia, rising from an 8 year low of 3467 new cases reported in 2024 to 3722 new cases reported in 2025. New Syphilis cases continued trending down and have dropped from a high of 417 (all types) in 2023 to 239 new cases counted in Cincinnati residents in 2025. Cincinnati resident STI and tuberculosis reports are investigated by the Hamilton County Health Department.

Trends for all reportable diseases in Cincinnati and summary demographics for sex, race, and age category can be viewed on the CD dashboard available to the public by link on the CHD Communicable Disease Unit program page: [Communicable Disease Unit - Health](#).

Date: January 27, 2026

To: Board of Health

From: Grand Mussman, MD, Health Commissioner

Subject: Health Commissioner's Report, Reflects December 2025

WIC Updates December 2025

1. The WIC caseload has decreased by approximately 730 over the past 3 months. Reasons could include the government shutdown which may have incorrectly portrayed WIC as not operating, the cold weather and the holidays. Staff are reaching out to families who have missed appointments over the past couple months to get them rescheduled.
2. We have hired our first Dietetic Technician. We are very excited about this new position option for the WIC program since recruiting Dietitians has been difficult.
3. Breastfeeding rates:
 - Initiation rate – 65.21%
 - Breastfeeding at 6 months – 37.77%
 - Breastfeeding at 1 year – 27.92%
 - We have 3 Breastfeeding Peers now which will increase the breastfeeding information and contacts with our families to hopefully increase our breastfeeding rates. Our in-person Breastfeeding Classes attendance is steadily increasing each month.
 - We are starting an in-person Breastfeeding Class at our Hamilton Ave office in March.
4. The WIC Program performed 17,866 hemoglobin tests in 2025.
5. In 2025, WIC provided 4,627 Urgent Maternal Warning Signs information to pregnant and post-partum women.

Community Health and Environmental Services (CHES) Updates for CHD BOH Meeting 1.27.2026

Community Health and Environmental Services (CHES) updates:

- The Cincinnati Health Department's Lead Program was awarded a \$4,440,000 Housing and Urban Development Lead Remediation Grant to continue the work of providing lead remediation for eligible Cincinnati residents.
- Dr. Amin has worked on two recent publications as senior author regarding COVID-19 research. One manuscript in collaboration with Ohio Department of Health and Metropolitan Sewer District and another manuscript in collaboration with Cincinnati Children's Hospital Medical Center:
 - Servello, D.; Korach-Rechtman, H.; Bessler, S.M.; Partridge, D.; Turner, C.; White, M.; Bohrerova, Z.; Stiverson, J.; Chalasani, P.; Kellar, J.; Leasure, E.; Haubner, S.; Rehman, S.; Wright, K.; **Amin, M.** Effectiveness, Feasibility and Seasonality of Subsewershed Disease Surveillance in Socially and Economically Diverse Areas of Cincinnati, Ohio, in 2023 and 2024; Insights from Laboratory and Rapid Testing Analysis. *Water* **2026**, *18*, 158. doi: [10.3390/w18020158](https://doi.org/10.3390/w18020158)
 - High Household Transmission Among Asymptomatic Contacts Across Pandemic Waves in Cincinnati, Ohio. Katherine Bowers; Stefanie Benoit; James Rose; Andrew F. Beck; Alonzo T. Folger; Tara N. Calhoun; Melissa E. Day; Andrew Lovell; **Maryse Amin** *Epidemiologia* 2025, Volume 6, Issue 4, 91.
- Cincinnati Health Department is continuing the partnership with The Health Collaborative to conduct the Cardiovascular Collaborative with City of Cincinnati Leveraged Support Funding related to identifying next steps aimed at increasing life expectancy with cardiovascular disease.
- Cincinnati Health Department continues to meet with the Cincy CHIP action teams on the five priorities set for the next three years. 1) Access to Care, 2) Mental and Behavioral Health, 3) Nutrition and Food Access, 4) Infant Vitality, 5) Housing. More information in the Accreditation section.
- Alternative Response to Crisis (ARC) pilot diverting low acuity 911 calls to a behavioral health and EMT team is continuing in the Cincinnati community, more information can be found with the link below:

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

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](https://www.cincinnati-oh.gov))

2023 Annual Lead Report:

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

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

Deaths for 2020:

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

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

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

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

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

Provisional deaths for 2021:

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

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

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

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

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

Provisional deaths for 2022:

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

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

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

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

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

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

Provisional deaths for 2023:

City 2023 = 29

County (minus the city) 2023 = 29

Total Hamilton County 2023 = 58

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

City of Cincinnati = 4,122

Hamilton County births outside of the City limits = 5,912

Hamilton County inclusive of the City = 10,034

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

City of Cincinnati IMR = 7.04 per 1,000 live births

Hamilton County outside the City limits = 4.91 per 1,000 live births

Hamilton County IMR = 5.78 per 1,000 live births (inclusive of the city numbers)

Provisional deaths for 2024:

City 2024 = 33

County (minus the city) 2024 = 35

Total Hamilton County 2024 = 68

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

City of Cincinnati = 4,099

Hamilton County births outside of the City limits = 5,894

Hamilton County inclusive of the City = 9,993

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

City of Cincinnati IMR = 8.05 per 1,000 live births

Hamilton County outside the City limits = 5.94 per 1,000 live births

Hamilton County IMR = 6.80 per 1,000 live births (inclusive of the city numbers)

Provisional deaths for 2025:

City 2025 = 40

County (minus the city) 2025 = 29

Total Hamilton County 2025 = 69

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

City of Cincinnati = 3,413

Hamilton County births outside of the City limits = 4,961

Hamilton County inclusive of the City = 8,374

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

City of Cincinnati IMR = 11.72 per 1,000 live births

Hamilton County outside the City limits = 5.85 per 1,000 live births

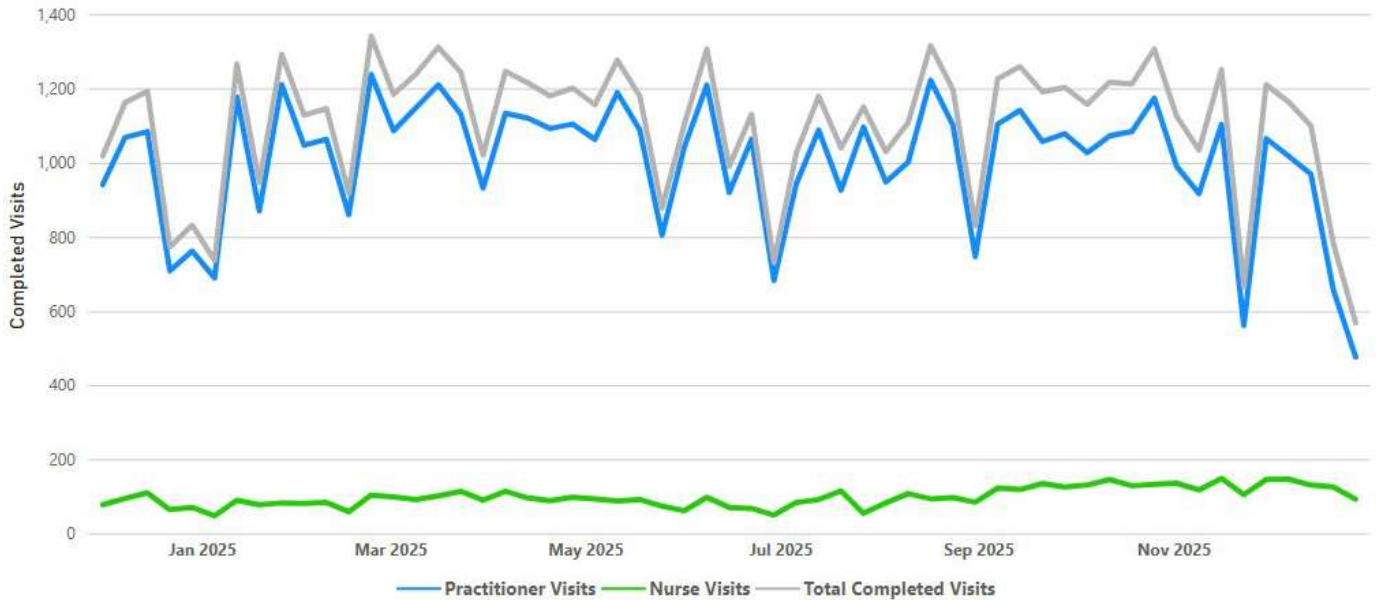
Hamilton County IMR = 8.24 per 1,000 live births (inclusive of the city numbers)

CCPC UPDATE

Community Health Centers

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

CCPC Visit Counts by Week - All Locations



December Visits by Health Center

● Monthly Visits Last Year ● Monthly Visits

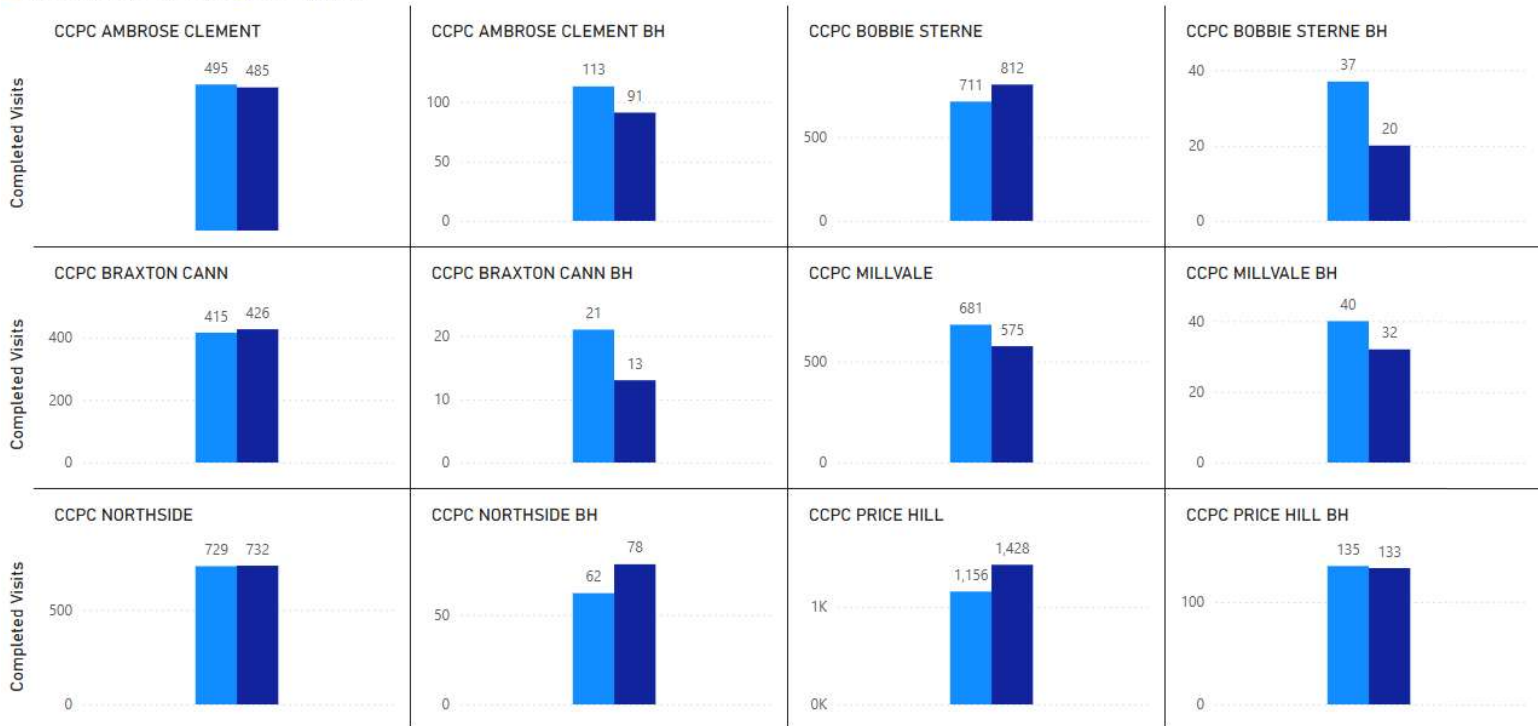
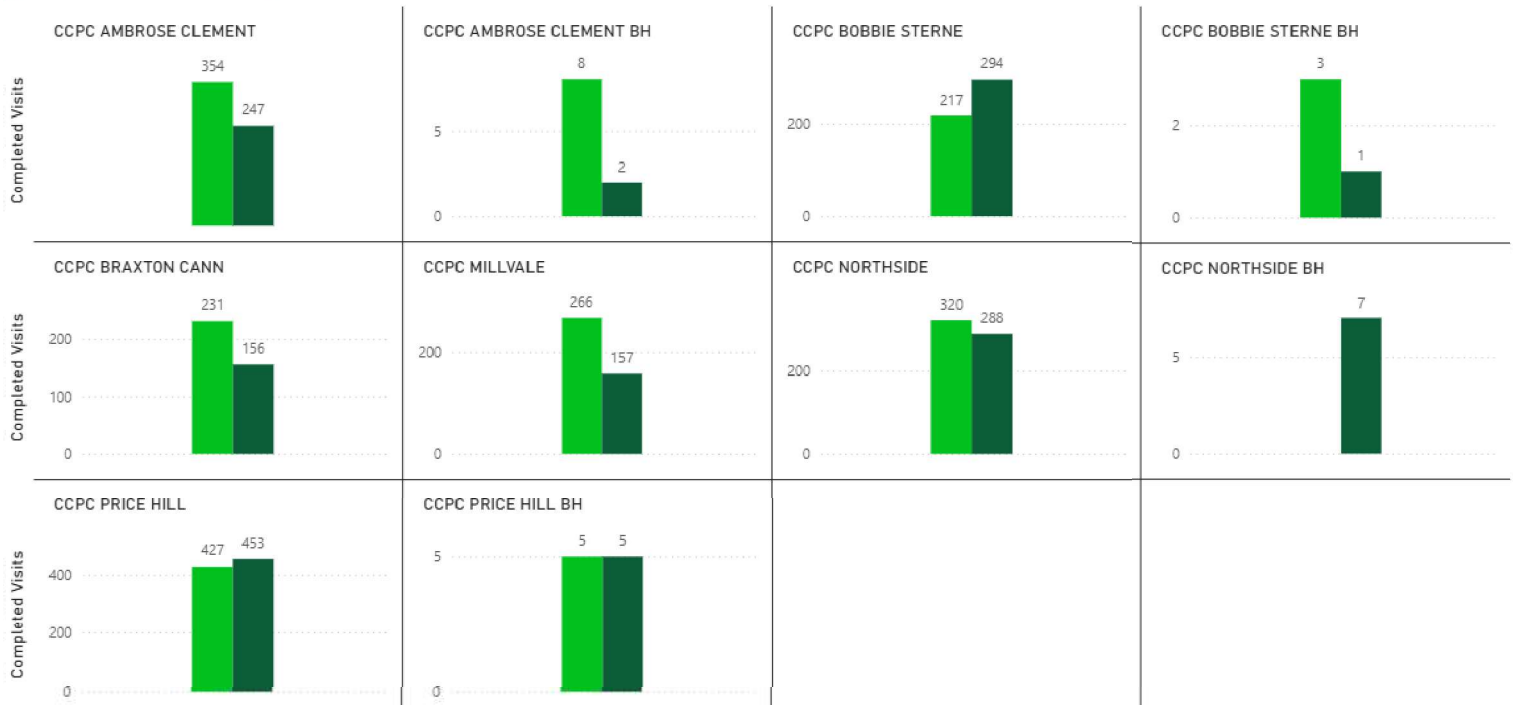


Figure 2. Number of Completed Patient Visits by Location for December 2025

Figure 3. Number of Completed Patient Visits by Location for Fiscal Year to Date
Figure 4. Number of New Patient Visits by Location for Fiscal Year to Date

FYTD Visits by Health Center
FYTD New Patients by Health Center

● New Patients FYTD Last Year ● New Patients FYTD



Pharmacy

FYTD Pharmacy Fills by Health Center

● Total Fills FYTD Last Year ● Total Fills FYTD

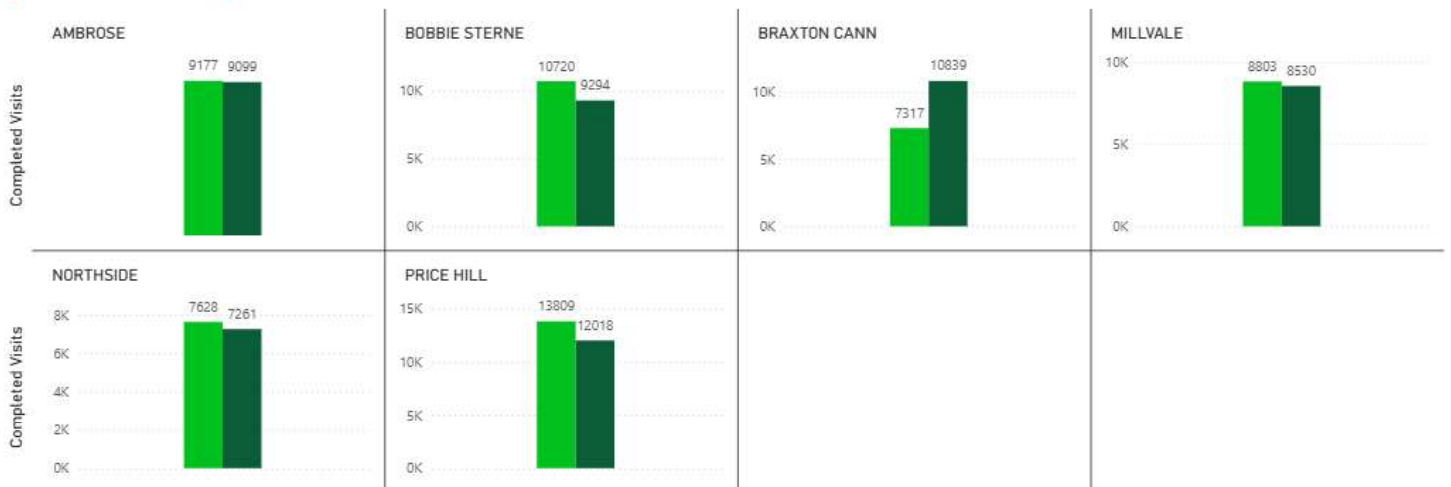


Figure 5. Number of Pharmacy Fills for September 2025 and FYTD

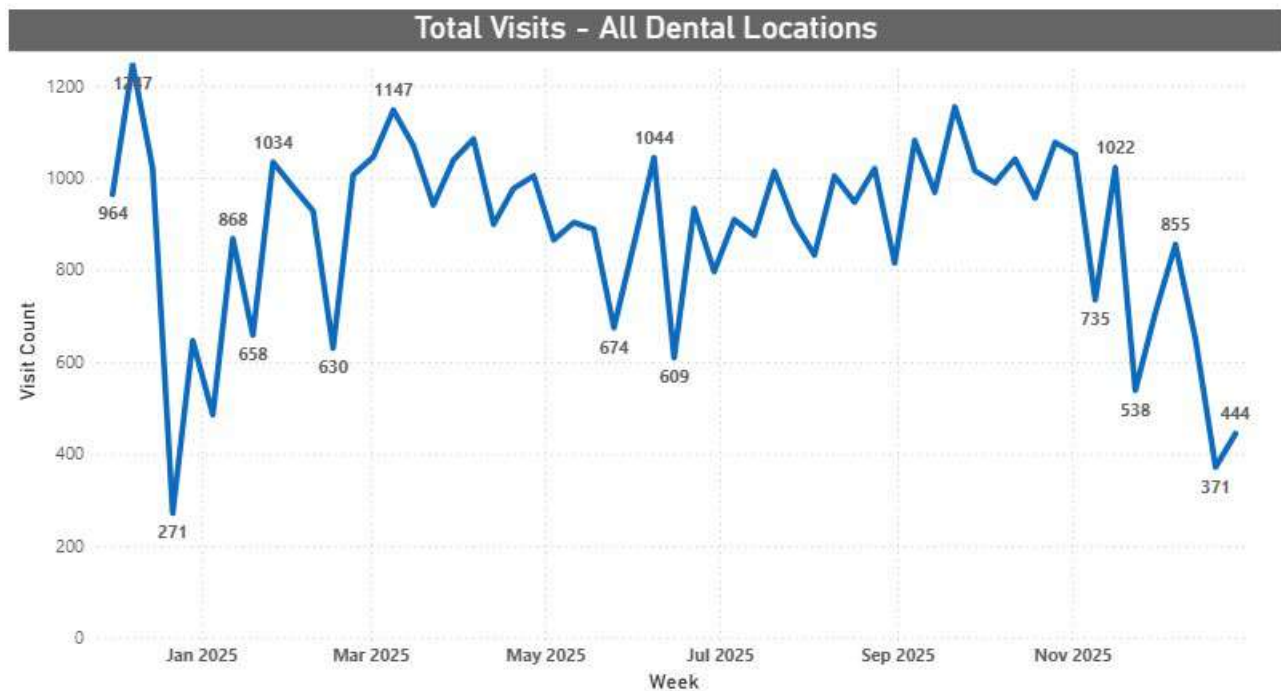
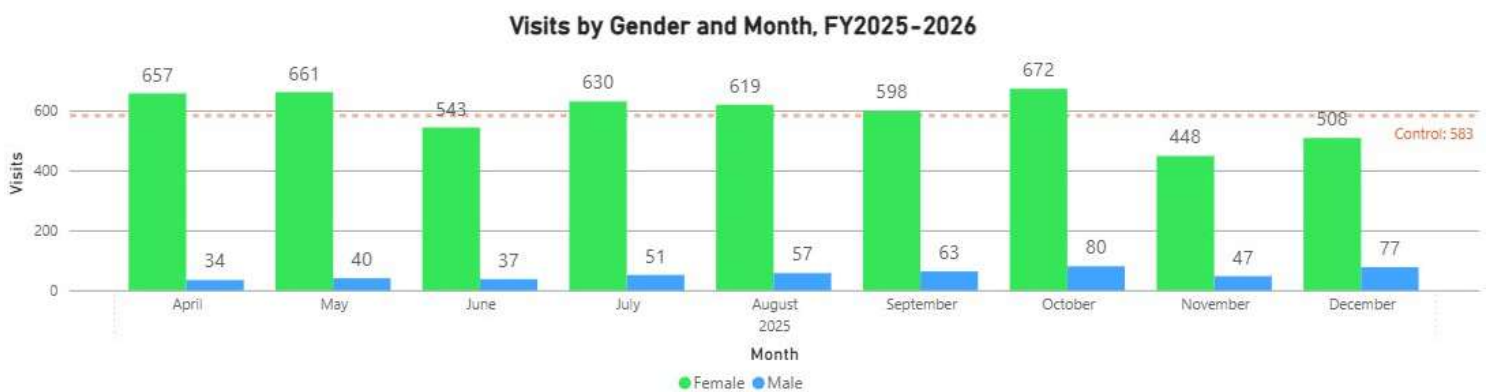


Figure 6. Number of Completed CCPC Dental Visits for All Locations

Reproductive Health and Wellness Program (RHWP) Data Report

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



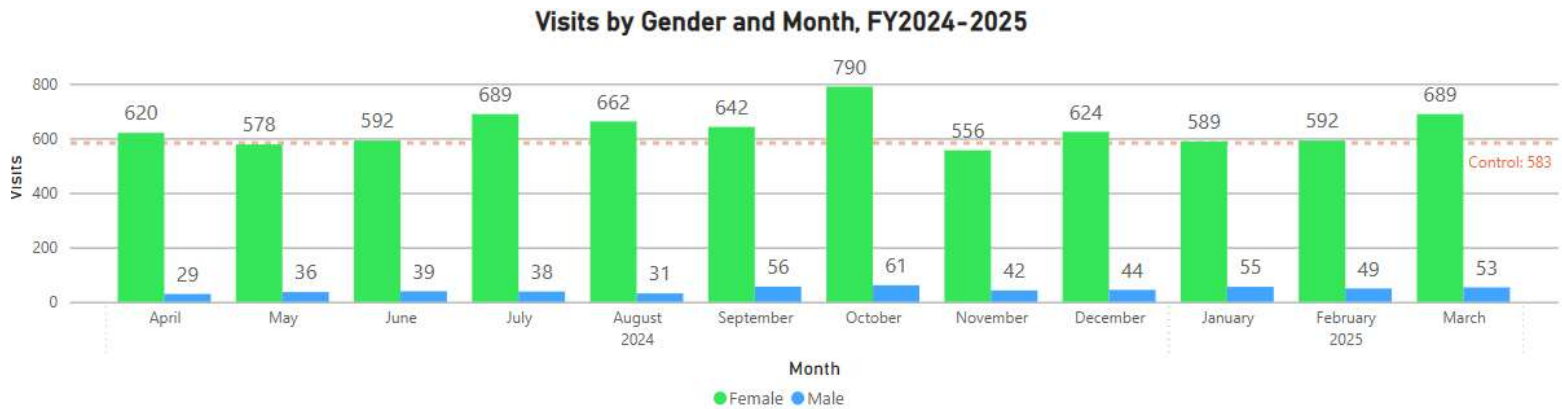


Figure 1b. City of Cincinnati Primary Care Health Center Reproductive Health Visits by Gender and Month, Fiscal Year 2024 – 2025

FY24/25 Visits with Men: 533 patients

FY24/25 Visits with Women: 7623 patients

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

FY24/25 Control (Expected) Visits: 7000 patients

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

Fiscal Year 2025 – 2026

FY25/26 Visits with Men: 486 patients

FY25/26 Visits with Women: 5336 patients

FY25/26 Visits Combined (men/women): 5822 patients

FY25/26 Control (Expected) Visits: 5,247 patients

FY25/26 Visits as % of Control Total: 110.9%

Figure 2a. Long-acting Reversible Contraception (LARC) (Intrauterine Devices) provision by Month and Insurance Type for patients seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2025 – 2026

LARCs by Month (IUD), FY2025-2026

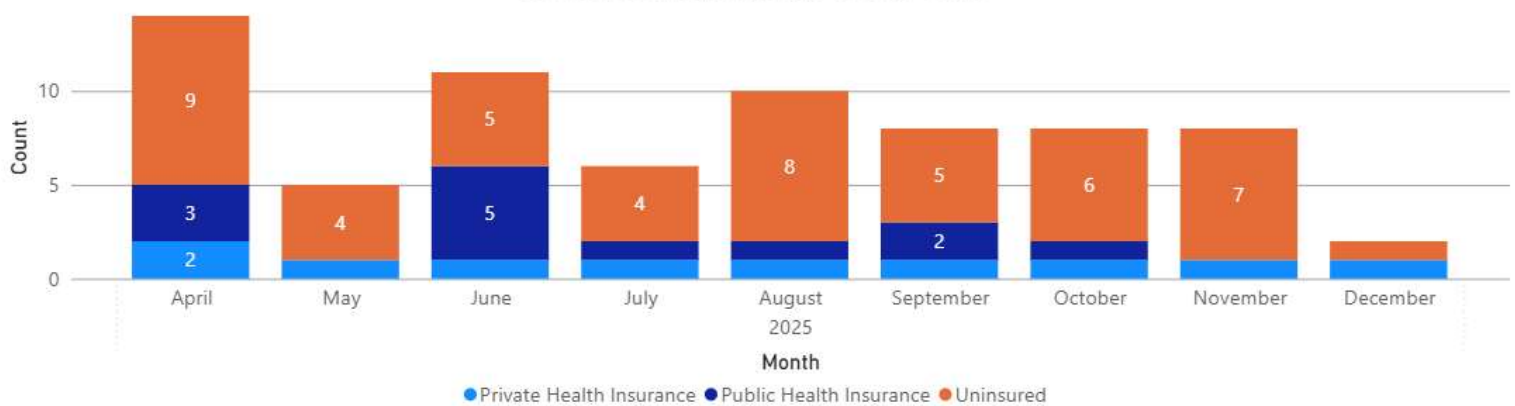


Figure 2b. Long-acting Reversible Contraception (LARC) (Intrauterine Devices) provision by Month and Insurance Type for patients seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2024 – 2025

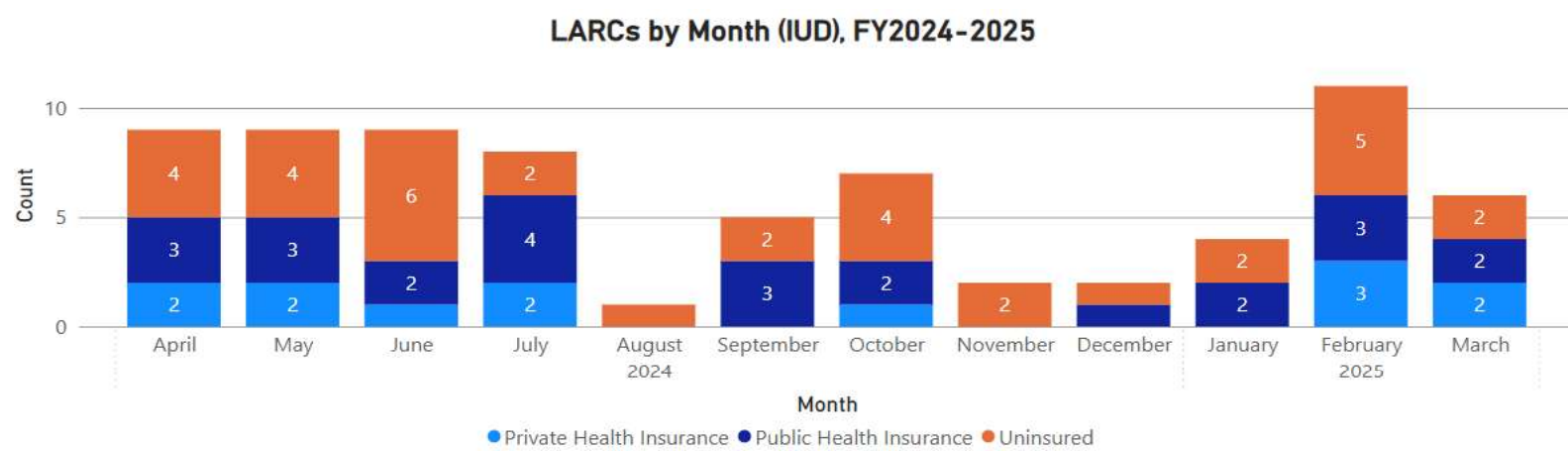


Figure 3a. Long-acting Reversible Contraception (LARC) (Implants) provision by Month and Insurance Type for patients seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2025 – 2026

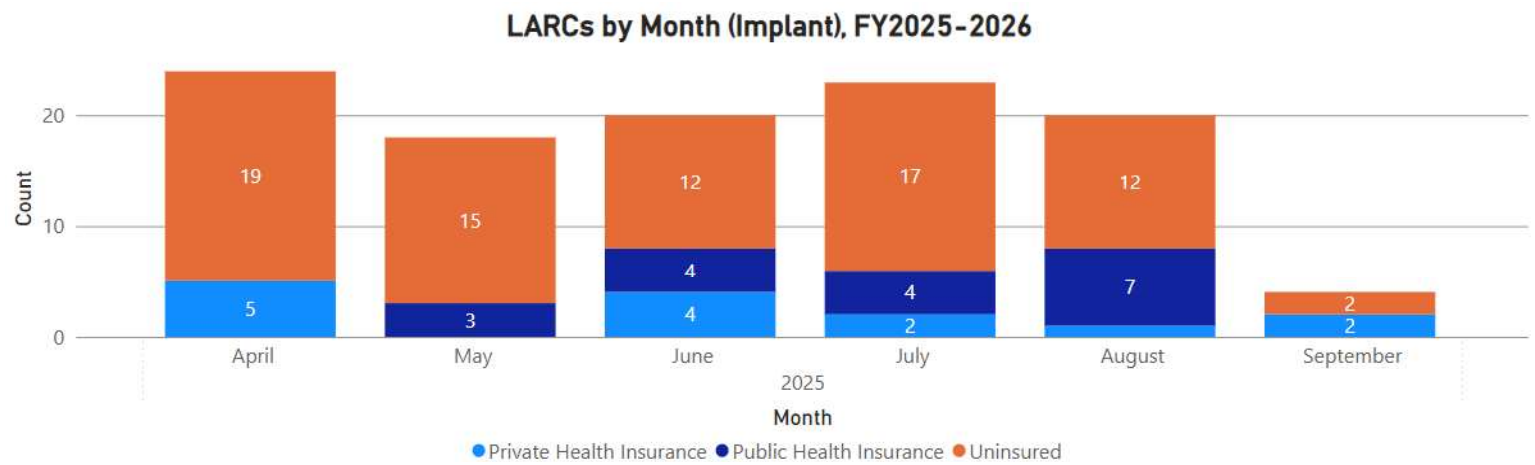


Figure 3b. Long-acting Reversible Contraception (LARC) (Implants) provision by Month and Insurance Type for patients seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2024 - 2025

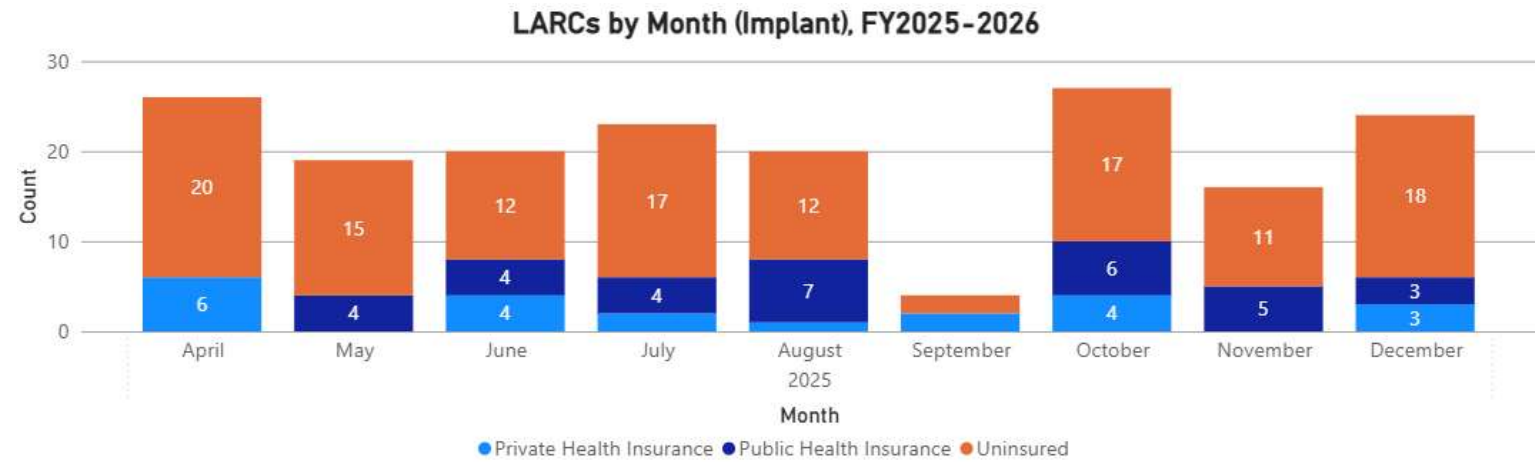


Table 1. Selected Demographic Characteristics of Unduplicated RHWP Patients, December 2025

	Female	% in col.	Male	% in col.	Total	% in col.
Race						
AI/AN	7	1.38%	0	0.00%	7	1.20%
Asian	6	1.18%	1	1.30%	7	1.20%
Black	222	43.70%	62	80.52%	284	48.55%
PI/HN	7	1.38%	0	0.00%	7	1.20%
Unknown	74	14.57%	1	1.30%	75	12.82%
White	190	37.40%	13	16.88%	203	34.70%
Ethnicity						
Hispanic	218	42.91%	3	3.90%	221	37.78%
Non-Hispanic	290	57.09%	74	96.10%	364	62.22%
Income						
<=100% FPL	437	86.02%	54	70.13%	491	83.93%
101-249% FPL	63	12.40%	12	15.58%	75	12.82%
>=250% FPL	8	1.57%	11	14.29%	19	3.25%
Insurance						
Private	53	10.43%	14	18.18%	67	11.45%
Public	177	34.84%	20	25.97%	197	33.68%
Uninsured	278	54.72%	43	55.84%	321	54.87%
Age (years)						
<15	2	0.39%	0	0.00%	2	0.34%
15-49	480	94.49%	69	89.61%	549	93.85%
>50	26	5.12%	8	10.39%	34	5.81%
Limited English						
No	425	83.66%	22	28.57%	447	76.41%
Yes	83	16.34%	55	71.43%	138	23.59%

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

	Female	% in col.	Male	% in col.	Total	% in col.
Health Center						
Ambrose Clement	84	16.54%	57	74.03%	141	22.56%
Braxton Cann	28	5.51%	0	0.00%	28	5.03%
Bobbie Sterne	96	18.90%	10	12.99%	106	15.70%
Millvale	54	10.63%	1	1.30%	55	8.69%
Northside	66	12.99%	7	9.09%	73	16.92%
Price Hill	180	35.43%	2	2.60%	182	31.10%

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

Accreditation

PHAB Action Plan Update:

In September 2025, CHD received its Reaccreditation Readiness Assessment Feedback report from the Public Health

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

Cincy CHIP Update:

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

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

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

Regional CHNA and CHIP Update:

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

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

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

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

Quality Improvement/ Quality Assurance

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

GET VACCINATED GRANT- MONTHLY DATA TABLE 2024-2025										
MONTH	RM 0-18 Years	RC 0-18 Years	IQIP Initial Site visit With office	IQIP 2 M Follow up	IQIP 6 M Follow up	IQIP 12 M Follow up	MOBI	TIES	PERI HEPB NEW CASES	PERI HEPB CLOSED CASES
July	785	872	0	2	2	0	4	1	0	0

August	868	922	0	0	4	0	1	1	2	3
September	950	1261	0	0	5	1	14	14	0	0
October	840	1621	6	0	1	4	3	2	1	0
November	961	1531	4	0	2	4	5	5	1	0
December	703	1339	1	7	0	0	3	3	2	1
January										
February										
March										
April										
May										
June										
TOTAL										

RM=reminders to families for immunizations now due

RC=recalls to families behind on immunizations

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

MOBI=Maximizing Office Based Immunization education presentation for providers

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

Peri HEPB=Peri-natal Hepatitis

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

September- 41 in person school trainings

October- 56 in person school trainings

November- 17 in person school trainings

December- 27 in person school trainings

Healthy Communities Program – Tiffany White

Live Work Play Cincinnati Coalition A multi-sector coalition that works to improve health outcomes by addressing health-related social needs and social determinants of health at the community level.		
Date of Meeting	Location & Presentations	Next Steps
December 3, 2025	The all-member December meeting was the annual partner share-out. Coalition members shared their 2025 successes and 2026 goals for collaborative opportunities. - December Newsletter - January Newsletter	Next in-person meeting is March 3rd, 10:15 AM – 12:15 PM Walnut Hills Library NEW meeting frequency: in-person all coalition meetings will be quarterly (March, June, September, and December) on the first Wednesday of each month. Subcommittees will be held virtually each month.
Creating Healthy Communities Grant Implementation of strategies to improve healthy eating and active living in multiple Cincinnati neighborhoods. Strategies include: 1 pedestrian infrastructure strategy in Carthage, 1 food pantry strategy in Hartwell, 1 recreation/playground in Roll Hill/E. Westwood, and 2 Policy, System, and Environmental assessments in the Beekman Corridor.		
# of Meetings	Location & Presentations	Next Steps
See Food Equity and Active Living Sections for more details.	Carthage – Planning work began for Millcreek trail improvements to connect Carthage business district to Caldwell Nature preserve. Safe Routes To School (SRTS) Plan Update – coordination with CoC DOTE to gather crash data. Beekman Corridor – garden network development and community garden improvements.	Carthage – Convene community group to influence environmental changes in Carthage. SRTS – Meet with CPS to identify prioritized schools. Beekman Corridor – Confirm garden upgrade supplies and develop a procurement plan.

Infant Vitality – Malina Harris

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

	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	
Sweet Cheeks Diaper Program		
# distributed since last report	Project Partners and Status	Next Steps
100 diapers have been distributed since the last BOH report.	Partners: Sweet Cheeks Diaper Bank HCAN, Mercy Health, Health Vine, UC Women's Center, Hamilton County OEI, Cincinnati Health Department Home Health, WIC ----- Status: Active	Plan: Families have been referred to other agencies to receive diapers Agency is currently going through restructuring the program, so diaper ordering is currently on pause. Meeting frequency: Last Meeting: 1/11/25 Next Meeting: 1/2026
CAT- The Cincinnati-Hamilton County Community Action Team The mission of the Cincinnati-Hamilton County Community Action Team is to optimize equitable health outcomes for women, infants, children, and families in Cincinnati-Hamilton County through collaboration, education, and action. This group meets monthly.		
# of meetings since last report	Project Partners and Status	Next Steps
3-Last Meeting: 6/26/25	Partners: Hamilton County ----- Status: Active	Plan: Discuss the results of the Maternal & Child Health Survey. The work Group is being reconfigured and will meet on a quarterly basis. Meeting frequency: Quarterly Next Meeting: 12/11/2025
OIPP/CIAG- Ohio Injury Prevention Partnership: Child Injury Action Group The function of the Child Injury Action Group (CIAG) is to identify priorities and strategies to reduce child injury in Ohio. The CIAG has identified focus areas to address in their five-year strategic plan including teen driving, traumatic brain injury, safe sleep, youth suicide and child passenger safety.		
# of meeting since last report	Project Partners and Status	Next Steps

5	Partners: Ohio Department of Health Status: Active	Plan: Strategic Plan Update Shared progress on the standardized data presentation the subcommittee members will be able to brand as their own and share within their respected communities. The presentation includes quantitative and qualitative data from multiple reporting sources (OPAS, CFR, etc.), representing all of Ohio. Presented on current work being done in the Infant Vitality Program. Meeting frequency: Quarterly Next Meeting 12/11/25
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Program supported projects/ meetings:

11/18/25- Cincy Freeze and Feed Program Event
11/20/25- Non-Discrimination training
11/20/25- Cradle Cincinnati Meeting
12/2/25- Quarter 5 DCY TA meeting
12/2/25- Fatherhood Collaborative meeting
12/5/25- AmeriHealth Luncheon
12/9/25- Molina Healthcare Baby shower
12/10/25- Steering Committee End of Year Celebration
12/11/25- CIAG Safe Sleep Subcommittee Meeting
12/11/25- Hamilton County Public Health CAT Meeting
12/23/25- NICH a New Era in Infant Survival Webinar
1/6/26- Site Visit at Kids Thrive
1/8/26- Human Milk Collective Impact Forum
1/14/26- Live Work Play Subcommittee 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
0	Produce Perks, Winton Hills Community Church and Council, Mustard Seed Farm, and Last Mile Food Rescue. Status: Inactive (began 5/15/25- 21 families signed up)	Weekly produce distributions to enlisted families and other community members. Meeting frequency: as needed for planning Project expected to begin in May (aligns with harvesting season)

Cincy Freeze & Feed

The Cincinnati Health Department (CHD) Healthy Communities Program will partner with the Cincinnati Recreation Commission (CRC) Hirsch and Millvale locations to implement a pilot community freezer program.

# of Meetings Since Last BOH Report	Project Partners and Status	Next Steps
12	CRC, La Soupe, CareSource, Food for the Soul, and Hamilton County ReSource ----- Status: Active (4 freezers installed)	Weekly freezer checks conducted to determine stock and cleaning needs. Meetings frequency: standing weekly meetings to discuss general project updates and workflow.

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
4	CCHMC, Freestore Foodbank, Hamilton County ReSource, La Soupe, and more. ----- Status: Active	Network planning for food distribution in the City of Cincinnati including non-instructional school day initiatives; communications team discussions' current project funding covers works in Avondale, East and Lower Price Hill (expansion into Roll Hill coming soon) 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
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1	Newsletter sent to community members and partners by the end of the 2 nd week of each month. Posted on FEC site routinely ----- Status: Active (last sent on 11/14/25 to 291 individuals)	Continue to update newsletter content and layout to meet the reader's needs Meeting frequency: included in monthly program meeting with HCP program manager and health counselor supervisor as well as needed meetings scheduled with SAFE's SSF Communications team for discussion/ review
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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
4	Meet with other department champions, stay informed on city-wide engagement updates, and share resources with colleagues ----- Status: Active (schedule conflict for October- next meeting on 11/20/25)	Complete the engagement tour series with CHD information; participate in internal CHD engagement discussions Meeting frequency: standing monthly meetings with full group and additional meetings as needed based on active projects or requests

Creating Healthy Communities Grant (Healthy Eating)

Implementation of strategies to improve healthy eating and active living in multiple Cincinnati neighborhoods. Made possible with ODH grant funding.

Strategies include: 1 food pantry strategy in Hartwell and Environmental assessments in the Beekman Corridor.

# of Meetings Since Last BOH Report	Project Partners and Status	Next Steps
16	Food for the Soul (FFTS), Cincinnati Recreation Commission (CRC), Working in Neighborhoods (WIN), Civic Garden Center (CGC), and representatives from several Beekman corridor gardens.	Hartwell: Standing weekly meetings to discuss pantry needs and updates. Conduct consistent assessments to measure levels of effectiveness and community impact. Beekman Corridor: As needed garden improvement discussions to evaluate individual garden needs and to develop a garden workshop series to strengthen community education on maintenance practices.

Program supported projects/ meetings:

11/17/25: WCPO Interview for Winton Hills Cincy Freeze & Feed grand opening

11/18/25: Winton Hills Cincy Freeze & Feed grand opening event

11/20/25: Ohio Board of Nursing Advisory Group on Certified Community Health Workers Meeting

11/21/25: CRC: Hartwell freezer/ pantry cleaning and stock check

11/21/25: CRC: Winton freezer cleaning and stock check

11/21/25: CRC: Millvale freezer cleaning and stock check

11/21/25: CRC: Hirsch freezer cleaning and stock check

11/25/25: LWPC R.I.S.E Subcommittee Meeting
12/2/25: Fatherhood Collaborative of Hamilton County Meeting
12/3/25: Live Work Play Cincinnati Coalition meeting
12/9/25: LWPC R.I.S.E Subcommittee Meeting
12/10/25: CHD QI Steering Committee End of Year Celebration
12/23/25: LWPC R.I.S.E Subcommittee Meeting
1/6/26: Winton Hills Collaboration discussion completed with Feed the Soul/ Hamilton County ReSource
1/9/26: C.I.T.I. Camp collaboration discussion
1/9/26: CRC: Hartwell freezer/ pantry cleaning and stock check
1/9/26: CRC: Winton freezer cleaning and stock check
1/9/26: CRC: Millvale freezer cleaning and stock check
1/9/26: CRC: Hirsch freezer cleaning and stock check
1/12/26: LWPC CHAMPS Subcommittee Collaboration Meeting
1/13/26: LWPC R.I.S.E Subcommittee Meeting
1/14/26: LWPC ACCESS Subcommittee Collaboration Meeting
1/16/26: CRC: Millvale freezer cleaning and stock check
1/16/26: CRC: Hirsch freezer cleaning and stock check
1/16/26: CRC: Hartwell freezer/ pantry cleaning and stock check
1/16/26: CRC: Winton freezer cleaning and stock check
1/16/26: Winton Hills Intentional Food Access Meeting

Tobacco Free Living (TFL) – Bemnet Melaku

Project/ Meeting Title: New Employee Training		
1/9/2026	Completed NEO	

Program supported projects/ meetings:

12/12/25: AHA intro meeting
12/17/25: Interact for Health intro meeting
12/19/25: Shop With A Cop
12/23/25: LWPC R.I.S.E Subcommittee Meeting
12/23/25: NRT Program intro meeting
12/30/25: STAND/T21 Policy Development meeting
1/7/26: OACHC Tobacco Cessation Pilot Meeting
1/8/26: Hamilton County Addiction Response Coalition meeting
1/8/26: Smoking Cessation Meeting
1/12/26: LWPC CHAMPS Subcommittee Collaboration Meeting
1/13/26: LWPC R.I.S.E Subcommittee Meeting
1/14/26: LWPC ACCESS Subcommittee Collaboration Meeting
1/20/26: ALA intro meeting
1/21/26: CRC Queen City SWISH presentation meeting
1/28/26: CTTs Training

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

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

	246- Retailers Licensed 309- Identified retailers 309 – 2025 TRL Inspections Completed 301 2025 Underage Buy Attempts Completed, 79% Compliance 63 2026 Underage Buy Attempts Completed, 66% Compliance	Plan: - Continue Inspections until further notice. - Continue Issuing Citations for Non-licensed Retailers after Education - Hire additional underage buyer(s)
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Worksite Wellness & Active Living – Scott Dean

ODH Creating Healthy Communities Grant (Carthage) Supportive pedestrian infrastructure for Carthage. The goals being to increase the proportion of adults and adolescents that walk or bike to get to places and to reduce the proportion of adults, adolescents and children with obesity.		
# of Meeting since last report	Project Partners and Status	Next Steps
3	Partners: Identified 36 partner agencies ----- Status: Active Working with community on neighborhood improvements. Starting preliminary meetings to finalize work for year 2 CHC grant.	- Continue pushing usage of the CAGIS Pedestrian Hazard map we created for the community to track issues and pushing utilization of neighborhood physical activity survey - Received update on desired playground equipment and working to see what is feasible for our grant to cover and how to proceed. - Working with community on creating plan to host and event to clean and clear Heritage Walk trail section that straddles Mill Creek - Additional traffic calming measures to be installed during year 2 of CHC 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

3	Partners: Cincinnati Public School (CPS), Tri-State Trails, Green Umbrella: Green Schoolyards Team ----- Status: Active Year 2 CHC geared around Safe Routes to School Planning	- Continuing work with principal to secure bicycles from Ethel Taylor - Curriculum completed and being reviewed by Green Schoolyards coordinator and CPS curriculum team for updates. - Starting to plan for possible professional development day surrounding Traffic Garden Curriculum so all traffic gardens in the district can be utilized - Continuing to work with DOTE and CPS on updating School Travel Safety Plan Meeting frequency: Monthly
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Program supported projects/ meetings:

12/15/25 – CHC weekly group meeting
 12/15/25 – Outdoor learning curriculum team meet-up
 12/16/25 – Garden workshop series meeting
 12/16/25 – Cr(eat)e culinary studio meeting
 12/16/25 – Public engagement meeting
 12/16/25 – Green schoolyards webinar
 12/17/25 – Traffic Garden Curriculum meeting
 12/17/25 – Beekman corridor garden meeting
 12/17/25 – Safe Routes to School (SRTS) meeting with DOTE
 12/17/25 – Strategic partnerships for greener schools meeting
 12/17/25 – Healthy Communities group meeting
 12/19/25 – Meeting with CCHMC to discuss collaboration on work in Village of Roll Hill
 12/23/25 – CHC Group Weekly Meeting
 1/6/26 – CHC Group Weekly Meeting
 1/6/26 – Public engagement meeting
 1/7/26 – Beekman corridor garden meeting
 1/8/26 – Traffic Garden Curriculum meeting
 1/9/26 – Beekman corridor garden meeting with Keep Cincinnati Beautiful (KCB)
 1/12/26 – CHAMPS Subcommittee meeting
 1/12/26 – CHC Healthy Eating Networking call
 1/13/26 – CHC Group Weekly Meeting
 1/14/26 – Review SRTS project with Healthy Communities Intern
 1/14/26 – Safe Routes to School (SRTS) meeting with DOTE
 1/15/26 – Impact Award: Neighborhood hubs workgroup meeting

Behavioral Health and Recovery Services - Eric Washington

Men's Health – Eric Washington

Project/ Meeting Title: Open for ADDITIONAL MEETING		
# of Meetings Since Last BOH Meeting	Project Partners and Status	Next Steps:
1 Meetings	Partners: Recovery Ohio Drug Trends Monthly Meeting	Continue to utilize shared information to better serve communities through emerging trends, patterns, insights, and outcomes related to Ohio's drug epidemic. Plan: The meeting was created to provide decision makers across diverse public sectors with information sharing opportunities and actionable intelligence on emerging trends, patterns,

	Status: Ongoing	insights, and outcomes related to Ohio's drug epidemic. Meeting frequency: Monthly x1
Project/ Meeting Title: Brother You're on My Mind and Youth Mentoring Program		
# of Events Since Last BOH Meeting	Project Partners and Status	Next Steps: Monthly safe and supportive space to address topics around: Mental, Spiritual, Physical Health, Chronic Disease, Child Support, Resources =
1 Meeting	Partners: Omega Psi Phi – Barbershop Talk Series and Youth Mentoring Status: Ongoing	Plan: Continue to provide a safe and supportive space for men to meet monthly to have open conversations and to provide mentorship to The Youth Mentorship Program Meeting frequency: Monthly x1
Project/Meeting Title: Harm Reduction Committee y		
# of Events Since Last BOH Meeting	Project Partners and Status	Next Steps: Monthly meeting with community partners to discuss Harm Reduction efforts
1 Meeting	Partners: Monthly meeting with community partners Status: Ongoing	Plan: To continue to provide update on Harm Reduction in Hamilton County Meeting frequency: Monthly x1
Project/ Meeting Title: Recovery \Ohio Drug Trends Monthly Meeting		
# of Meetings Since Last Meeting	Project Partners and Status	Next Steps: Continue to share and provide updates as needed
	Partners: State of Ohio Partners (200+) Department of Mental Health and Addictive Services: The Stepping Up Initiative is a national initiative targeted at reducing the number of people with mental illnesses in jails. Status: Ongoing	Plan: Monthly Drug Update - The ONIC consists of criminal intelligence analysts and computer forensic specialists providing investigative, analytical, and data management support to local law enforcement agencies and drug task forces throughout Ohio Meeting frequency: Monthly x1

*Distribution of Narcan - 6

Program supported projects/ meetings:

11/24/25 – Behavioral Health and Recovery Support Update
 11/25/25 - CHC Weekly Meetings - Year 2
 12/1/25 - Community Freezers Cincy
 12/2/25 - CHC Weekly Meetings - Year 2
 12/2/25 - Fatherhood Collaborative of Hamilton County Meeting
 12/2/25 - Health Communities QI Overview

12/3/25 – LWPC Coalition Meeting
12/4/25 - Community Health and Resources Day Sponsor
12/5/25 - AmericHealth Community Meeting
12/5/25 - Avondale Education Project Meeting
12/9/25 – CBIM and 1:1 Meeting J. Berry
12/9/25 – Monthly Update Meeting – Men’s Health
12/9/25 = Program Overview/Update New Hire
12/17/25 - Healthy Communities Group Meeting
12/18/25 - AAEW Large Group
12/23/25 - CHC Weekly Meetings
12/24/25 – 1:1 Performance Evaluation
12/31/25 A-1 Stigma Holiday Meeting
1/5/26 - Cincy Freeze & Feed (Winton)
1/6/26 - CHC Weekly Meetings
1/8/26 - Hamilton County Addiction Response Coalition's January Engage & Exchange
1/12/26 - Community Freezers Cincy
1/12/26 - Cincy Freeze & Feed (Winton)
1/13/26 - CHC Weekly Meetings
1/13/26 - Monthly Update Meeting – Men’s Health
1/14/26 - OneOhio Recovery Foundation Statewide Meeting
1/14/26 - LiveWorkPlay Subcommittee Meeting
1/14/26 - Goal setting - Uncover your why, what and how
1/15/26 – Wellness Recovery Action Plan (WRAP)
1/15/26 –AAEW Large Group
1/15/26 - Wellness Recovery Action Plan (WRAP) Day 2
*In partnership with Hamilton County Public Health – Harm Reduction

Recovery Services/Community Outreach – Justin Berry

Project/ Meeting Title – Community Outreach Details/ description		
# of ...	Project Partners and Status	Next Steps

Meeting and Community Members reached) 72	Partners: GCB, City Gospel, Heroin Coalition Team, CCRC, Step Stone and DeCoach, First Step Home, Treatment Team, CRC Rec Center, Our daily Bread), Good Sam's, UC Hospital, 20/20, Tender Mercies, Glenwood Behavioral, Status: (Ongoing) Narcan- 11 kits passed out in community (Due to cold weather didn't pass out much)	Plan: Meeting frequency: (Monthly and Bi-Monthly) These winter months are a bit more difficult because extremely cold temps are present and there are a lot of people dealing with homelessness. Cincinnati does not have a lot of resources for things such as homelessness and dealing with keeping people warm during these months. I spent a lot of time passing out things to clients so that they could be more prepared for cold weather. I daily passed out things such as handwarmers, socks and any donated items that I might have come across.
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MONTH: (2025)	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Open cases:	84	78	76	68	68	70	64	59	68	59	62	59
3.5-9 µg/dL case mgt & follow-up: *	7&1 7	12/ 10	18/1 2	17/1 5	25/1 2	22/1 2	19/1 2	14/1 0	26/1 2	21/8	12/1 1	16/10
10+ µg/dL case mgt & follow-up:	5&1 0	3&1 0	1/10	5/7	6/11	4/13	3/10	2/9	4/8	3/9	3/7	2/12
Risk assessments:	5	2	5	0	3	3	2	1	7	3	2	1
Orders issued:	3	1	1	0	3	5	1	0	4	3	4	0
Clearances EBL:	2	1	2	0	1	0	3	0	2	1	1	4
Clearances GRANT:	9	13	10	13	11	4	8	4	0	6	1	1
Owner meetings EBL:	1	0	1	0	1	1	0	2	3	3	0	2
Owner meetings GRANT:	1	1	2	2	2	1	2	2	0	2	0	1
Compliance checks EBL:	38	32	30	28	30	14	17	25	13	10	10	30
Compliance checks GRANT:	3	3	5	4	4	1	6	2	2	3	0	1
Contractor mtgs EBL:	0	0	0	0	0	0	0	1	1	1	0	1
Contractor Meetings GRANT:	0	2	3	1	1	1	0	4	5	1	1	0
Filed for prosecution:	0	0	0	0	0	1	0	0	0	0	0	1
LIRAs:	1	0	1	3	3	0	0	3	2	1	0	0
Grant apps uploaded (ODH & ODD / HUD)	0	0/1	0/3	1/0	0/1	0/3	0/2	0/0	0/0	0/0	1/0	0/0
Case Update w/ Lead Clinic:	9	8	7	6	7	8	5	5	7	10	7	8
Affidavit of Fact	0	0	0	0	0	0	0	0	0	0	0	0

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

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

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

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

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

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

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

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

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

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

November/December 2025 BOH Report
Emergency Preparedness/Safety

Meetings, Grants, and Employee Safety

Attended monthly Emergency Response Coordinator meeting November 14.
Attended monthly Emergency Response Coordinator meeting December 12.
Attended the three cities Safety Committee meeting December 16.
Attended the TriState Disaster Preparedness Council meeting December 19.

Training, Exercises, and Improvement Plans

Staff observed the Hamilton County Homeland Security and Emergency Management Agency's shelter set up drill November 5.

Response/Preparedness Activities

Nothing to report.

Cincinnati Vital Records and Statistics Program

Monthly Dashboard for November 2025

Vital Records received payment for 33 affidavits, where staff assisted customers with birth certificate corrections using the affidavit process.

Vital Records staff assisted 10 families with a paternity affidavit process to add the father to a birth certificate.

Vital Records received payments for 106 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.

November 2025	Kiosk	Web	Vital Chek
Birth Certificates	1056	1468	358
Death Certificates	104	1032	63
Total Payments	\$26,073	\$61,266	\$9,577



Monthly Dashboard for December 2025

Vital Records received payment for 21 affidavits, where staff assisted customers with birth certificate corrections using the affidavit process.

Vital Records staff assisted 10 families with a paternity affidavit process to add the father to a birth certificate.

Vital Records received payments for 76 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.

December 2025	Kiosk	Web	Vitalchek.com	Mail
Birth Certificates	1122	1498	449	-
Death Certificates	82	775	69	-
Total Payments	\$26,969	\$54,677	\$11,741	-



Cincinnati Vital Records Forecast 2026 – 2030

In 2026, all Ohio local vital statistics offices will be authorized to issue any Ohio death certificates, regardless of the place where the death occurred. This statewide policy change removes Cincinnati Vital Records office’s advantage as the primary issuer for deaths occurring within City of Cincinnati limits. As a result, customers will increasingly choose offices with lower fees, easier access, free parking and longer hours. It is projected that if no strategic changes are implemented, Cincinnati Vital Records may lose 35 – 40% of its order volume by 2030.

Expected Outcomes

- Customers will choose offices with better parking, longer hours and lower prices
- Funeral homes will shift to more convenient offices and lower prices

Projected Order Decline

2026 - 14,000 - 15,000
2027 - 16,600 - 13,200
2028 - 11,300 - 12,000
2029 - 10,200 - 11,000
2030 - 9,200 -10,000

Strategic Intervention

- Reduce price
- Open a satellite (reliability)
- Resolve online ordering delays
- Establish funeral home partnerships
- Guarantee same day pick up
- Designate a staff member to serve as liaison for funeral homes
- Improve customer service

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



Reportable Condition by Category ³	2025 December	2025 Year to Date (YTD)	2024 December	2024 YTD	2024 Rate	Cincinnati 5 Year Average Rate (2020-2024)	Ohio 5 Year Average Rate (2019-2023)
Food- or Waterborne	10	136	1	136	46.92	239.48	284.02
Botulism					-	0.32	0.01
Campylobacteriosis	1	29		26	8.36	54.32	91.71
Cryptosporidiosis		10		17	6.11	20.89	20.73
Cyclosporiasis		1		1	0.32	1.29	3.68
<i>E. coli</i> , Shiga Toxin-Producing O157:H7		4		7	2.57	19.29	21.71
Giardiasis		9		12	4.50	24.43	16.49
Hepatitis A (<i>also vaccine-preventable</i>)		1			-	1.61	16.82
Hepatitis E				1	0.32	0.64	0.06
Legionellosis - Legionnaires' Disease	2	15		7	2.89	19.93	28.18
Listeriosis		3			-	2.25	1.42
Salmonellosis	7	35		32	10.93	52.72	59.04
Salmonella Typhi (travel associated)				1	0.32	0.64	0.36
Shigellosis		20		21	6.75	29.25	13.48
Vibriosis (not cholera)		5		2	0.64	1.93	2.55
Yersiniosis		4	1	9	3.21	8.04	7.10
Vectorborne		7		17	5.46	16.38	34.07
Chikungunya Virus Disease*				1	0.32	0.32	0.15
Dengue				2	0.64	0.96	0.31
Lyme disease		4		5	1.61	6.43	28.52
Malaria*		2		8	2.57	7.07	2.74
Spotted Fever Rickettsiosis		1			-	0.96	1.43
Ehrlichiosis-Ehrlichia chaffeensis					-	0.32	0.63
Anaplasmosis-Anaplasma phagocytophilum				1	0.32	0.32	0.29
Vaccine-Preventable	126	619	1	345	121.18	474.12	323.84
COVID-19-associated hospitalization	4	19			-	-	-
<i>Hemophilus influenzae</i> , invasive disease		6		7	2.25	14.46	11.19
Influenza-associated hospitalization	105	486		256	89.68	360.66	279.59
Mumps				1	0.32	1.29	1.20
Pertussis	1	41		34	12.54	16.07	20.79
Meningococcal disease – Neisseria meningitidis		2			-	0.32	0.44
RSV-associated hospitalization	13	20					
<i>S. pneumoniae</i> , invasive (abx susceptible/unknown)	3	31	1	27	9.00	56.25	-

<i>S. pneumoniae</i> , invasive (abx resistant)		10		9	3.21	14.14	-
Varicella (chickenpox)		4		11	4.18	10.93	10.63
Viral Hepatitis	25	426	2	420	147.86	1266.8	601.08
Hepatitis B, acute (<i>also vaccine-preventable</i>)		3		7	2.57	8.36	5.58
Hepatitis B, chronic, newly identified (<i>also vaccine-preventable</i>)	4	93		81	28.61	189.33	81.84
Hepatitis B, perinatal					-	0.32	0.03
Hepatitis C, acute		4		1	0.32	13.18	8.93
Hepatitis C, chronic, newly identified	21	325	2	328	115.40	1050.15	504.70 (combined chronic and perinatal rate)
Hepatitis C, perinatal		1		3	0.96	5.46	
Healthcare Associated Infections (HAIs)⁴	12	97		128	45.32	288.34	33.35
Carbapenemase-Producing Organisms (CPO) (includes colonization screenings)	5	41		33	11.25	55.29	26.32
<i>Candida Auris</i> (includes colonization screenings)	7	56		95	34.07	233.05	7.03
Other Conditions	1	47		70	1839.93	37132.45	31129.23
Coccidioidomycosis		2		2	0.96	4.82	1.02
Creutzfeldt-Jakob Disease				1	0.32	0.64	0.96
Meningitis, bacterial (not <i>N. meningitidis</i>)		4		18	4.18	14.14	5.76
MPOX		2		3	0.96	10.29	3.57
<i>Staphylococcal aureus</i> - intermediate resistance to vancomycin (VISA)					-	0.96	0.20
Streptococcal, Group A, invasive	1	31		32	11.25	71.04	34.40
Streptococcal, Group B, newborn		2		3	0.96	5.14	2.73
Toxic Shock Syndrome (TSS)					-	0.96	0.06
Tuberculosis ²		6		11	3.86	18.64	6.49
Typhus Fever					-	0.32	-
Sexually Transmitted Infection²	499	6063	471	5844	1859.87	14579.68	4121.60
Chlamydia infection	306	3723	269	3469	1109.62	8511.81	2465.52
Gonococcal infection	159	1894	163	1793	570.88	4704.96	1083.04
Human Immunodeficiency Virus (HIV)	16	141	13	165	46.93	334.62	344.30
Syphilis - congenital	1	4	1	5	1.61	7.71	2.27
Syphilis - early	2	51	8	89	28.93	262.62	-
Syphilis - primary		20	2	40	11.89	122.79	67.56 (primary and secondary combined rate)
Syphilis - secondary	2	37	4	59	19.61	194.79	
Syphilis – stage unknown	8	57	3	73	23.79	142.08	158.91 (total syphilis rate)
Syphilis – unknown duration or late	5	136	8	151	46.61	298.30	
TOTAL CONFIRMED AND PROBABLE CASES	673	7395	475	6960	4066.58	53996.66	36527.13
Outbreaks (Investigation Started)	2025 December	2025 YTD	2024 December	2024 YTD	2024 Rate	Cincinnati 5 Year Average Rate (2020-2024)	
Dermatologic		6	1	6	2.25	7.39	

Gastrointestinal		6		4	1.29	6.43	
Respiratory	3	34	1	61	23.79	315.98	
Other		2		5	2.25	2.57	
Unknown					-	0.32	
TOTAL OUTBREAKS (INVESTIGATION STARTED)	3	48	2	76	29.57	332.69	

- 1) Confirmed and probable cases reported by health care providers and laboratories among residents of the City of Cincinnati by date of event (most frequently, the date of event is the date of illness onset).
*Cases acquired through international travel
 - 2) Sexually transmitted infections, human immunodeficiency virus (HIV), and Tuberculosis cases are investigated and reported by the Hamilton County Public Health Department.
 - 3) List includes only reportable conditions for which at least one case was reported in either year; the full list of reportable conditions in Ohio can be found at <https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/infectious-disease-control-manual>
 - 4) Healthcare Associated Infections (HAIs) are infections that patients get while or soon after receiving health care. More information about HAIs can be found at <https://www.cdc.gov/healthcare-associated-infections/about/index.html>
- All Cincinnati data is provided through the Ohio Disease Reporting System – **All data is provisional and subject to change.**
 - Case rates use the U.S Census Bureau’s 5-year average population estimates for Ohio and Cincinnati and are per 100,000 residents.
 - Ohio case counts were obtained from DataOhio’s Summary of Infectious Diseases in Ohio dashboard: <https://data.ohio.gov/wps/myportal/gov/data/view/summary-of-infectious-diseases-in-ohio?visualize=true> and Ohio Department of Health’s Data & Statistics page: <https://odh.ohio.gov/explore-data-and-stats>
 - Any dash (-) indicates there was no available data at the time this report was published due to lack of cases from 2019-2024.
 - On October 1, 2025, the reportable conditions rule changes went into effect in Ohio and are reflected in the October report.

CITY OF CINCINNATI ENVIRONMENTAL HEALTH REPORT

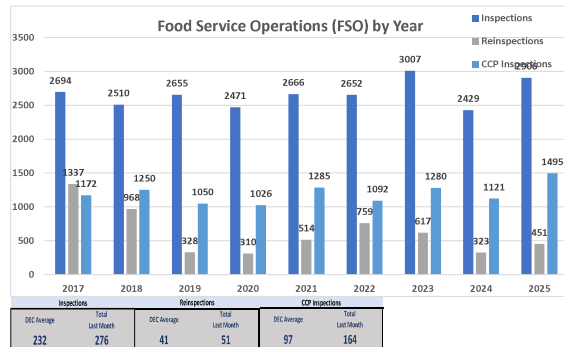
Environmental Health

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

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

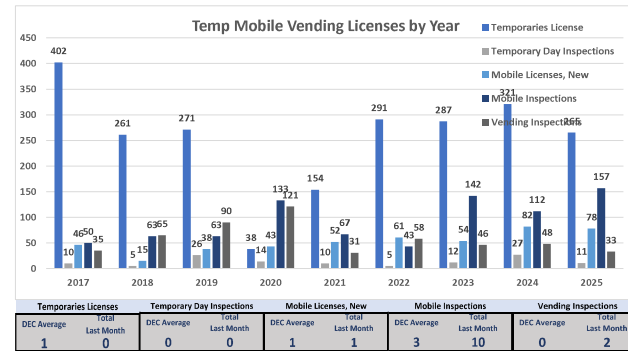
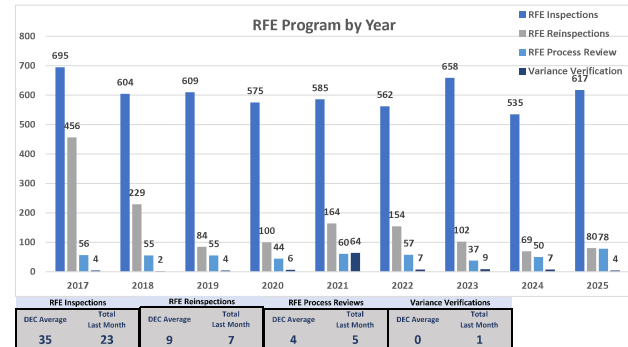
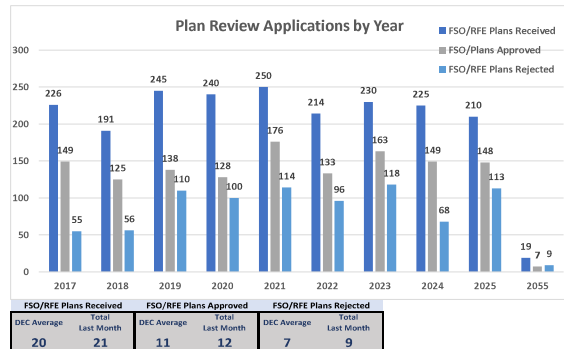
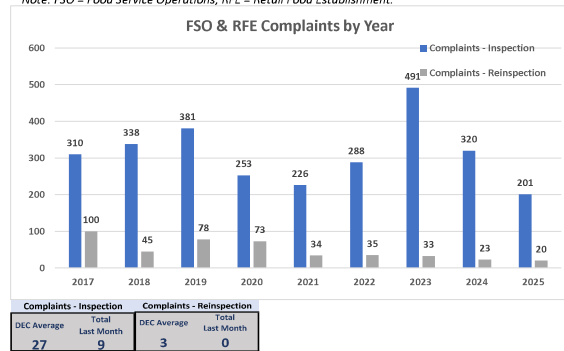
FOOD INSPECTION PROGRAM

The Food Safety Program hired two inspectors (REHSIT's). They will start Feb 1, 2026. There were not any temporary licenses issued this month.



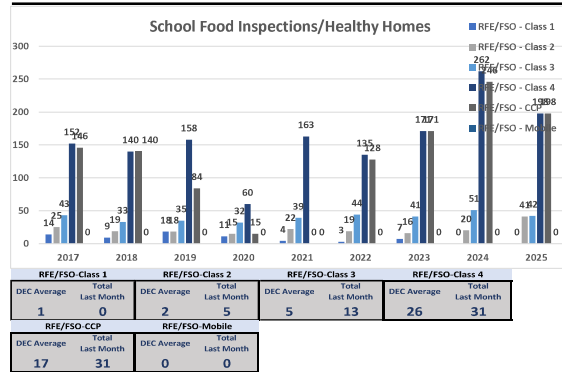
*Note: CCP = Critical Control Point Inspections.

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

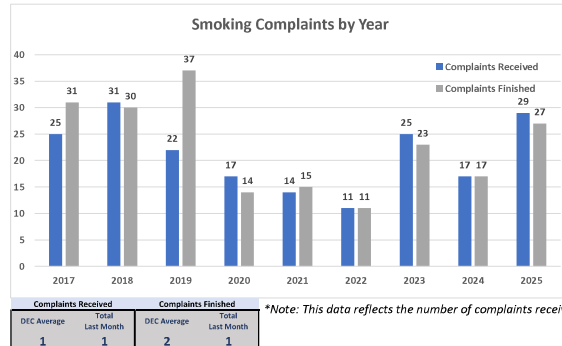
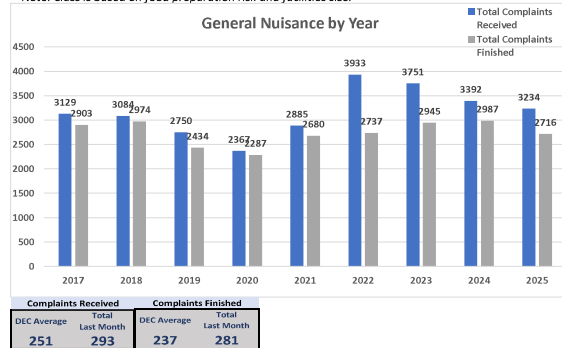


HEALTHY HOMES PROGRAM

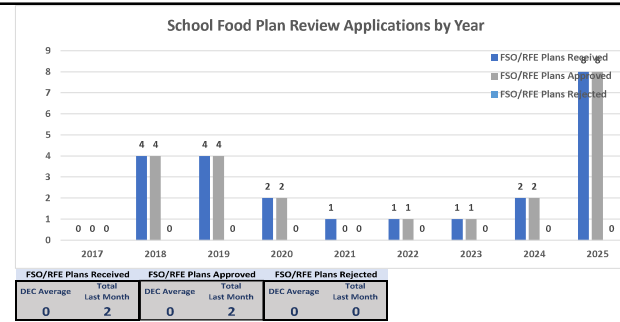
Healthy Homes team completed all school environmental and FSO inspections for the year. Job Corps quarterly inspection was completed.



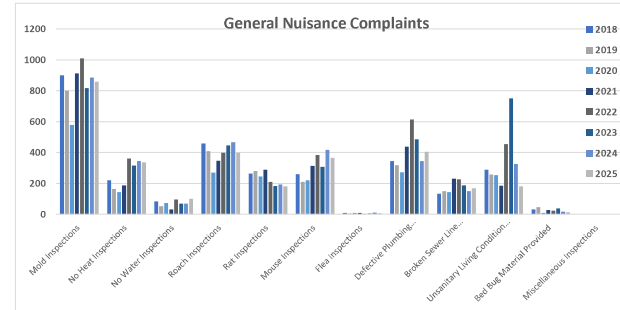
*Note: Class is based on food preparation risk and facilities size.



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



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



ENVIRONMENTAL WASTE PROGRAM

The Waste staff completed the 3rd round of body art inspections. Cincinnati Transfer Station and Whitton Recycling were licensed for the 2026 year.

