Board of Health Meeting

Tuesday, March 25, 2025

Agenda

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

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

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

- Vote: **Motion to Approve** the Minutes from February 25, 2025, Board of Health Meeting.
- Vote: **Motion to Approve** the Minutes from March 6, 2025, Board of Health Meeting.

Old Business

6:10 pm – 6:20 pm Commissioner's Report – Dr. Maryse Amin

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

6:30 pm – 6:40 pm Healthy Homes Presentation—Ms. Angela Uran

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

- Vote: **Motion to Approve** Clark Schaefer Hackett—Contract 55x0556, 3rd Amendment

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

7:00 pm – 7:05 pm Personnel Actions—Dr. Maryse Amin

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

New Business

7:05 pm – 7:10 pm Additional New Business and Public Comments

7:10 pm Adjourn

Next Meeting April 22, 2025

[Mission]

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

CINCINNATI BOARD OF HEALTH
BOARD OF HEALTH MEETING
February 25, 2025

Ms. Ashlee Young, Chair of the Board of Health, called February 25, 2025, meeting of the Cincinnati Board of Health to order at 6:00 p.m.

I. **ROLL CALL:**

Board Members Attending: Dr. Jennifer Forrester, Ms. Raynal Moore, Mr. Ken Patel, Ms. Ashley Young

Absent: Mr. Jagdish Bhati, Dr. Mary Carol Burkhardt, Edward Herzig, Dr. Christopher Lewis, Ms. Kiana Trabue

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

AGENDA PACKET → FEBRUARY-BOH-AGENDA-PACKET-2.25.25.PDF			
ITEM	**TOPIC**	**RESPONSIBLE PARTY**	**ACTION/MOTION**
Minutes	Unable Vote on Minutes due to lack of Quorum	Ms. Sa-Leemah Cunningham	**n/a**
Old Business			
Commissioner's Report	Discussion Items: Memo included in the agenda packet. Dr. Grant Mussman shared a brief commissioner's update with the Board. **Dr. Nick Taylor steps in as interim Dental Director** • Dr. Mussman announced that after 5 years of excellent leadership as Dental Director, Dr. Novais has stepped down to resume clinical practice. Dr. Novais' tenure has included several important milestones, including the impending completion of the Robert's Dental Center and the Implementation of the EPIC Wisdom system. • Dr. Mussman informed the board that while the team is recruiting for a new director, Dr. Nick Taylor has agreed to step in as interim Dental Director.	Dr. Grant Mussman	n/a

	• Dr. Taylor joined CHD in 2021 after 9 years at Healthsource of Ohio and has been providing critical support to Dr. Novais in a variety of areas including QI work and implementation of a new EMR system for the dental program. He practices at Bobbie Sterne Dental Center. **Biannual Budget Process Continues** • Dr. Mussman informed that the team had been engaged in the biennial budget process for FY 26 and 27. • The city manager anticipated completion and release in Mid-May • The team worked through budget scenarios with the Office of Budget and Evaluation. **CHD continues to have access to Federal Funds** • Per Dr. Mussman, the Cincinnati Health Department continued to not be greatly impacted by interruptions in federal funding. • Out of a total budget of approximately $70 million, the Cincinnati Health Department receives over $10 million in Federally sourced grants every year. • This figure does not include Medicaid reimbursement, which was approximately $21 million in 2024. • Generally, the team has continued to have access to these resources other than our refugee health program grant, which was $184,000.00 per year. That program is currently suspended. **<u>Questions</u>** • Mr. Patel asked Dr. Mussman if any of that $10 million was at risk based on the nature of the grants. ○ Dr. Mussman believes there is no particular risk associated with the federal grant package compared to others. He did not see any specific vulnerabilities but acknowledged the difficulty of making predictions.		

Communicable Disease Unit (CDU) report: What's Bugging Us	**Discussion Items:** Memo and presentation included in the agenda packet. Ms. Wright presented her report, Communicable Disease Unit (CDU): What's Bugging Us to the board. **Highlights** • COVID-19, influenza, and RSV remain top concerns. • CDU responded to seven respiratory illness outbreaks in January, including COVID-19, flu, RSV, and pertussis. • Nine total outbreaks were investigated in January; February cases include six new flu outbreaks and one GI outbreak. • Two GI outbreaks were reported in January, one confirmed as norovirus in a daycare. • Likely person-to-person transmission, not linked to food establishments. • Norovirus spreads through direct contact, contaminated surfaces, or undercooked shellfish. • Preventative measures include handwashing, disinfecting surfaces, and staying home when sick. • Ohio has high emergency room visits and wastewater viral activity levels. • Flu hospitalizations: 72 in Cincinnati in January, similar to last year's 79 cases. • COVID-19 hospitalizations: 24 in January. • Most hospitalized flu patients (93.7%) were unvaccinated. • Hospitalization rates are highest among children and older adults. • Ohio's flu vaccination rate (39.3%) is below the national average (45%) and well below the 70% target. • Flu vaccine coverage has declined, with many adults (32.2%) and parents (55.3%) hesitant to vaccinate. • The first pediatric flu death in Ohio this season was reported, with 68 nationwide. • Flu deaths are trending up (2.6% of total deaths), while COVID-19 deaths are declining (1.3%). • Current flu severity is higher than pandemic years (2021–2023) but not yet at pre-pandemic levels (2017–2019). • The flu season remains ongoing, with potential for further increases in hospitalizations and deaths before May.	Dr. Kim Wright	n/a
Technical Environmental Services Presentation	**Discussion Items:** Presentation included in the agenda. Dr. Mussman provided an overview of the department's structure, highlighting where the Technical Environmental Program fits within the organization. He outlined the reporting hierarchy,	Mr. Robert Smith	n/a

	noting the three assistant health commissioners overseeing community health, nursing, and healthcare delivery. He then focused on Dr. Amin's section, which includes Environmental Services, Vital Statistics, Communicable Disease Epidemiology, Lead Poisoning Prevention, and the Healthy Communities Program. Within Environmental Services, led by Mr. Antonio Young, the Technical Environmental Program operates alongside Waste Management, Food Safety, and Healthy Homes. Dr. Mussman then turned it over to Mr. Smith to explain the specifics of the Technical Environmental Program.
	
	Mr. Robert Smith, Supervising Environmental Health Specialist, gave a presentation about Technical Environmental Services to the board.
	
	Highlights
	• Technical Environmental Services is one of four environmental health programs under Antonio Young in the Community Health and Environmental Services Division.
	• The team includes a supervisor, one Senior Environmental Health Specialist, five Field Specialists, one Customer Relations Representative, and Seasonal technicians for mosquito and swimming pool programs.
	• Mosquito Surveillance & West Nile Virus Program
	  ○ Operates June–October, setting 15-20 traps weekly at 68 locations citywide.
	  ○ Targets Culex mosquitoes, primary carriers of West Nile virus.
	  ○ Nearly 10,000 mosquitoes were trapped last year; 24 pools tested positive.
	  ○ No human cases reported in jurisdiction.
	  ○ Educational outreach on mosquito prevention (e.g., removing standing water, using repellents).
	  ○ Larvicide treatment (mosquito dunks) used in stagnant water areas on city-owned and vacant properties.
	  ○ Funded in part by Ohio EPA grants, including salary and mileage for a mosquito technician.
	• Sewer Baiting & Rodent Control Program
	  ○ Responds to resident complaints of rats in sewers and properties.
	  ○ Specialists place bait in sewers to control rodent populations.
	  ○ Preemptive baiting before major events (e.g., Taste of Cincinnati, Findlay Market).
	  ○ Program has existed since at least 1954.		

	• Household Sewage Program
	  ○ Licenses and inspects ~500 homes with septic systems.
	  ○ Homes not connected to city sewers, using soil absorption or aerobic treatment systems.
	  ○ Newer systems are subject to Ohio EPA regulations, requiring annual servicing and sampling.
	  ○ Registers ~25 companies for septic system maintenance and installation.
	• Rabies Control Program
	  ○ Investigates 500–700 animal bites annually. Last year: 538 dog bites, 65 cat bites, 66 bat encounters.
	  ○ Domestic animals quarantined and verified for rabies vaccination.
	  ○ Stray or wild animal incidents referred to Communicable Disease Unit for rabies treatment assessment.
	  ○ Ships rabies specimens (primarily bats) to the Ohio Department of Health for testing.
	  ○ One rabid bat detected last year (typical rate: 1–2 per year).
	• Vector Control Program
	  ○ Licensed pest management professionals provide rodent and pest control services to city departments and parks.
	  ○ Treats ~27 city locations monthly, including parks, health clinics, City Hall, and other public buildings.
	  ○ Responds to residential complaints about bats and raccoons in rental properties.
	• Swimming Pool & Recreational Water Safety Program
	  ○ Licenses and inspects all commercial pools, spas, and spray grounds.
	  ○ Includes hotel, apartment, country club, and Cincinnati Recreation Commission facilities.
	  ○ Specialists trained as Certified Pool Operators.
	  ○ Seasonal technicians test water chemistry and collect lab samples.
	• The Technical Environmental Program handles challenging environmental tasks, often in harsh conditions.
	• The staff is highly experienced and dedicated, with many employees serving over a decade.
	• The program prioritizes public health, disease prevention, and community safety.
	• Appreciation expressed for the Board's continued support.		

Finance Committee & Finance Update	It was decided by the board chair and legal representative, Ian Doig, that due to the lack of Quorum finance contracts could not be voted on and at the continuation meeting, Mr. Menkhaus would present the finance report and the finance contracts to be voted on.	Mr. Mark Menkhaus Jr.	n/a
Personnel Actions	Unable Vote on Personnel Actions due to lack of Quorum	Dr. Grant Mussman	**n/a**
New Business			
Executive Session	No Executive Session due to lack of Quorum	Ms. Ashlee Young	**n/a**
Voting Actions	Per Ian Doig, Board of Health Legal Representative, due to the lack of quorum (only 4 board members present) suggested adjourning the meeting until a later date when a quorum can be obtained. Ms. Young agreed and moved to adjourn the meeting. **Motion to Approve** adjournment of this meeting until a later date and time when a quorum can be obtained as determined publicly noticed by administration.	Ms. Ashley Young & Mr. Ian Doig	**M: Ms. Ashlee Young** **2nd: Mr. Ken Patel** **Action: 4-0 Passed**
Additional New Business and Public Comments	**Public Comments** • There were no public comments.	Ms. Ashlee Young	n/a

6:42 p.m. adjourned.

Next meeting: Continuation meeting to complete voting actions-Thursday, March 6, 2025, at 6pm via Zoom.

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

Minutes Approved by:

_____
Sa-Leemah Cunningham
Cincinnati Board of Health Clerk

_____
Ashlee Young
Chairperson, Board of Health

CINCINNATI BOARD OF HEALTH
BOARD OF HEALTH MEETING
March 6, 2025

Ms. Ashlee Young, Chair of the Board of Health, called March 6, 2025, continuation meeting of the Cincinnati Board of Health (from the 2.25.25 meeting) to order at 6:00 p.m.

I. **ROLL CALL:**

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

Absent: Dr. Chris Lewis, Ms. Raynal Moore

Others Present: Ms. Sa-Leemah Cunningham, Mr. Ian Doig, Dr. Maryse Amin, Mr. John Dunham, Dr. Yury Gonzales, Mr. Mark Menkhaus Jr, Dr. Grant Mussman, Ms. Ashanti Salter, Ms. Joyce Tate, Ms. Kim Wright, Mr. Antonio Young

AGENDA PACKET → FEBRUARY-BOH-AGENDA-PACKET-2.25.25.PDF			
ITEM	**TOPIC**	**RESPONSIBLE PARTY**	**ACTION/MOTION**
Minutes	**Motion** that the Board of Health approves the minutes from January 28, 2025, Board of Health Meeting. *(Dr. Jennifer Forrester Joined after the first contract vote)*	Ms. Sa-Leemah Cunningham	**Motion**: Mr. Jagdish Bhati **2nd:** Ms. Kiana Trabue **Action: 6-0 Passed**
Old Business			
Finance Committee	**Discussion Items:** Documents included in the agenda. Mr. Mark Menkhaus Jr. presented the contracts that were discussed and presented at the Board of Health Finance Committee Meeting to the Board. **Get Vaccinated Ohio Grant-Public Health Initiative—Contract 65x10771** • Mr. Menkhaus explained the Get Vaccinated Ohio Project is a state funded competitive grant designed to support activities that will improve and sustain immunization rates in children under two years of age, school-aged children and adolescents. Grant activities will include immunization assessment, targeted reminder, and recall, identifying disparities/inequities affecting low immunization levels, educational activities involving families and providers, assuring schools report vaccination rates and school education, and assuring the vaccination of high-risk infants exposed to hepatitis B disease as methods of	Mr. Mark Menkhaus Jr.	**Vote:** Contract 65x10771 **Motion:** Dr. Edward Herzig **2nd**: Mr. Jagdish Bhati **Action: 6-0 passed** **Vote:** Contract 55x10769 **Motion:** Mr. Jagdish Bhati **2nd**: Mr. Ken Patel **Action: 7-0 Passed**

	increasing immunization rates for both public and private immunization providers. The Project's focus is on expanding education (peer to-peer and family), assessment activities and reminder/recall. The Project provides peer-to-peer education utilizing the Maximizing Office Based Immunization (MOBI) program, Teen Immunization Education Session (TIES) and immunization assessment services utilizing the CDC tool: Immunization Quality Improvement for Providers (IQIP) program in the private and public sector. The Project contracts with Western Nursing to provide nursing support for MOBI, TIES and IQIP services in the county. The GV Grant supports a Perinatal Hepatitis B Prevention Project which provides perinatal case identification, follow up/ education to pregnant females and provider education. • The outcome measure for this grant is to achieve and maintain the Centers for Disease Control (CDC) National Immunization Rate of 90% for two-year-old children and 80% for adolescents. In 2024, CHD Health centers achieved 90-95% immunization rate for children by age two. This exceeds the 2023 Ohio rate of 71%. The CHD health centers achieved 91%-100% adolescent rates for 13-year-old for the following vaccines: HPV #1, Meningococcal, and Tdap. The Up-to-Date HPV Ohio rate is 63.4% and CHD is 59%-77%. In 2024, of practices assessed in the public/private community, immunization rates for two-year-old children at individual offices were between 25%-88% with an HPV up to date range of 8-65%. Through community outreach, education and assessment in the public and private sector, the GV team will work with community providers within the region to increase the community rates until 90% of children are immunized by age two and 80% for adolescents. **National Association of County and City Health Officials (NACCHO)—Contract 55x10769** • Mr. Menkhaus explained that the goal of this project is to strengthen the capacity for healthcare IPC by piloting and adapting tools and best practices utilizing Project Firstline resources. All awardees, regardless of cohort, will: o Complete an initial assessment to identify IPC-related training needs. o Participate in monthly calls with NACCHO to monitor progress, facilitate peer-exchange, and provide technical assistance. o Identify, adapt and implement at least four existing Project Firstline tools and resources as part of specific outreach, education, or training activities for		

	healthcare facilities in the jurisdiction or locality ○ Participate in evaluation-related activities to track and measure progress towards expressed outcomes; ○ Attend an in-person convening; and ○ Submit an end-of-project report. **Motion to Approve** Get Vaccinated Ohio Grant-Public Health Initiative—Contract 65x10771 **Motion to Approve** National Association of County and City Health Officials (NACCHO)—Contract 55x10769		
Finance Update	**Discussion Items:** Memo and materials were included in the agenda. Mr. Menkhaus updated the board that the 2024 Medicaid Maximization payment had arrived in the amount of $4,489,000 and will reflect in the February 2025 Medicaid numbers—the board will see a spoke. Mr. Menkhaus gave an update on CHD Financials for January 2025 and Year over Year. **Highlights** • Revenue total was $34,518,192.51, decreased 4.74%. ○ Private Pay Insurance decreased by 4.27%. ○ Medicare increased by 0.86%. ○ Medicaid decreased by 45.06%. ○ Medicaid managed care increased by 43.68%. ○ Self-Pay patients increased by 1.91%. ○ Board of Ed Svcs (School Nurse's Salary) decreased by 34.54%. ○ Grants/Federal increased by 43.56%. • Expenses were $36,701,800.99, an increase of 1.76%. ○ Property expenses decreased 45.96%. ○ Personnel expenses increased by 4.09%. ○ Contractual costs increased by 1.77%. ○ Material costs increased by 11.74%. ○ Fixed costs decreased by 30.73%. ○ Fringes increased by 3.62%. **The total available is $3,391.52, decreased by 98.84%**	Mr. Mark Menkhaus Jr.	n/a
Personnel Actions	**Motion to Approve** the personnel actions dated February 25, 2025.	Dr. Grant Mussman	**Motion:** Dr. Edward Herzig **2nd:** Mr. Ken Patel **Action: 7-0 passed**
New Business			

Executive Session	Ms. Young updated the board that there was no longer a need to go into an Executive session due to personnel actions being expired and deadline being missed due to lack of quorum at 2.25.25 BOH meeting.	Ms. Ashlee Young	n/a
Additional New Business and Public Comments	**Public Comments** • There were no public comments.	Ms. Ashlee Young	n/a

6:21 p.m. adjourned.

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

Meeting can be viewed at: https://archive.org/details/boh-2-3-6-25

Minutes Approved by:

_____
Sa-Leemah Cunningham
Cincinnati Board of Health Clerk

_____
Ashlee Young
Chairperson, Board of Health

February 25, 2025 & March 6, 2025 Meeting Attendance/vote sheet

Board Members	Roll Call on 2.25.25	Roll Call on 3.6.25	1.28.25 BOH Meeting Minutes	Get Vaccinated Ohio Grant-Public Health Initiative-Contract 65x10771	National Association of County and City Health Officials (NACCHO)-Contract 55x10769	Personnel Actions Dated 2.25.25	Adjourn meeting and continue at a later date on 2.25.25
Mr. Jagdish Bhati		x	M	2nd	M		
Dr. Mary Carol Burkhardt		x					
Dr. Jennifer Forrester	x	x					
Dr. Edward Herzig		x		M		M	
Dr. Christopher Lewis							
Ms. Raynal Moore	x						
Mr. Ken Patel	x	x			2nd	2nd	2nd
Ms. Kiana Trabue		x	2nd				
Ms. Ashlee Young	x	x					M
Motion Result:	No Quorum reached	Quorum	Passed	Passed	Passed	Passed	Passed

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

STAFF	
Dr. Grant Mussman-Commissioner	x
Sa-Leemah Cunningham (clerk)	x
Antonio Young	x
Ian Doig	x
Mark Menkhaus Jr.	x
Dr. Ashanti Salter	x
Kim Wright	x
Joyce Tate	x
Dr. Maryse Amin	x
Jose Marques	x
Dr. Nick Taylor	x
Chante Randolph	x
Robert Smith	x

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CINCINNATI
HEALTH DEPARTMENT

Communicable Disease Prevention and Control
What's Bugging Us?

Board of Health Presentation
3/25/2025

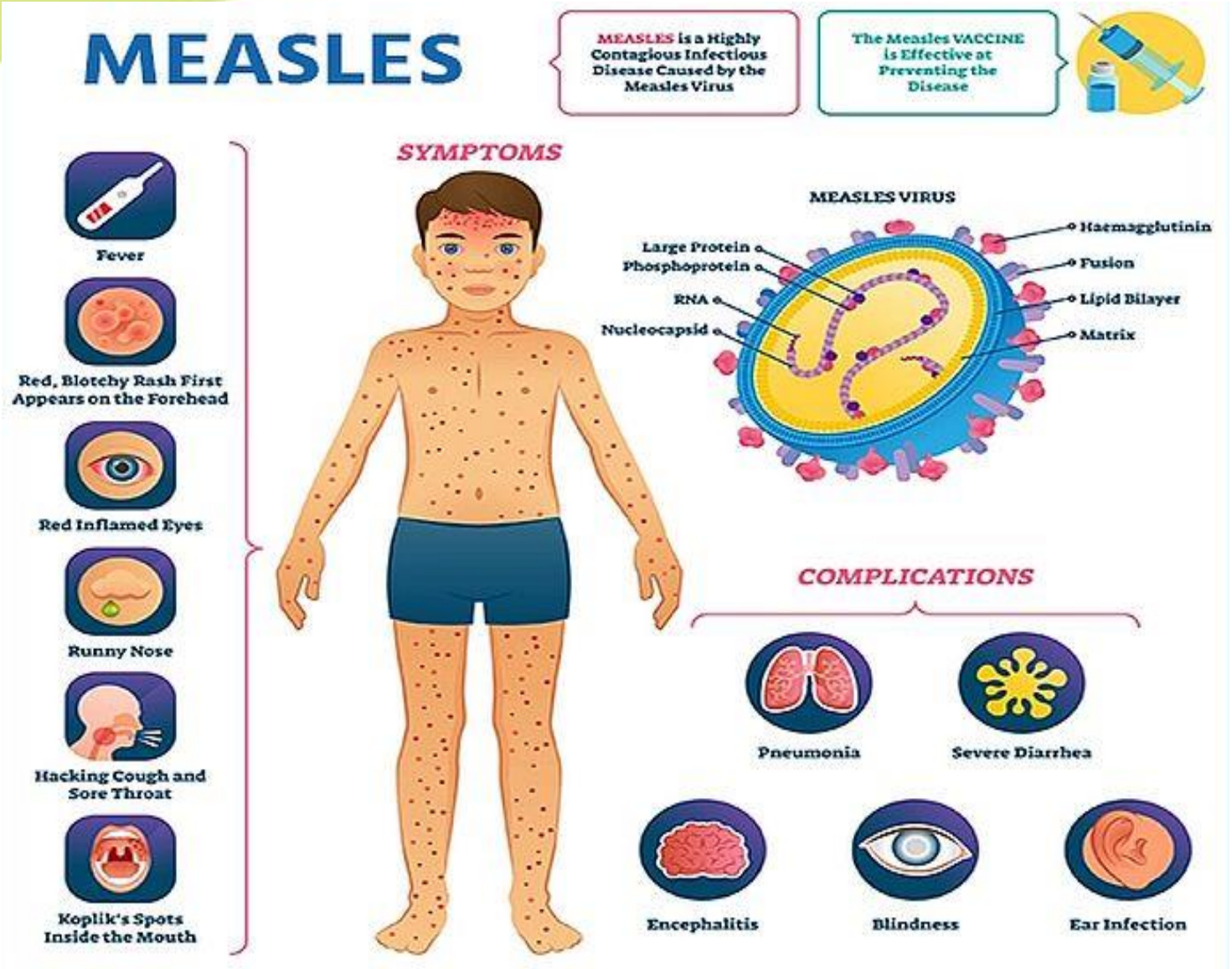

Image Credit Global measles threat continues to grow - Caribbean News Global

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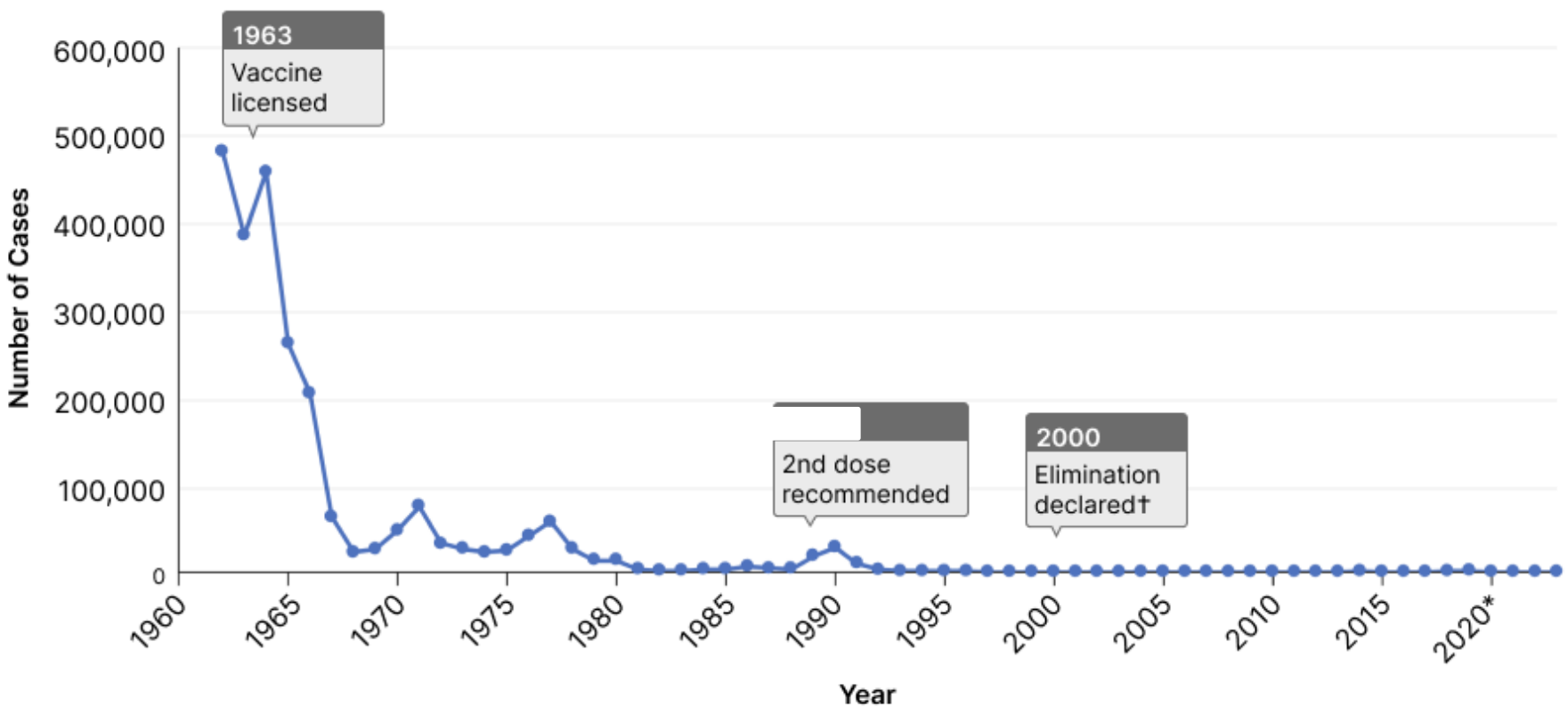
Background

Reported Measles Cases in the United States from 1962 – 2023*



Measles Cases and Outbreaks | Measles (Rubeola) | CDC

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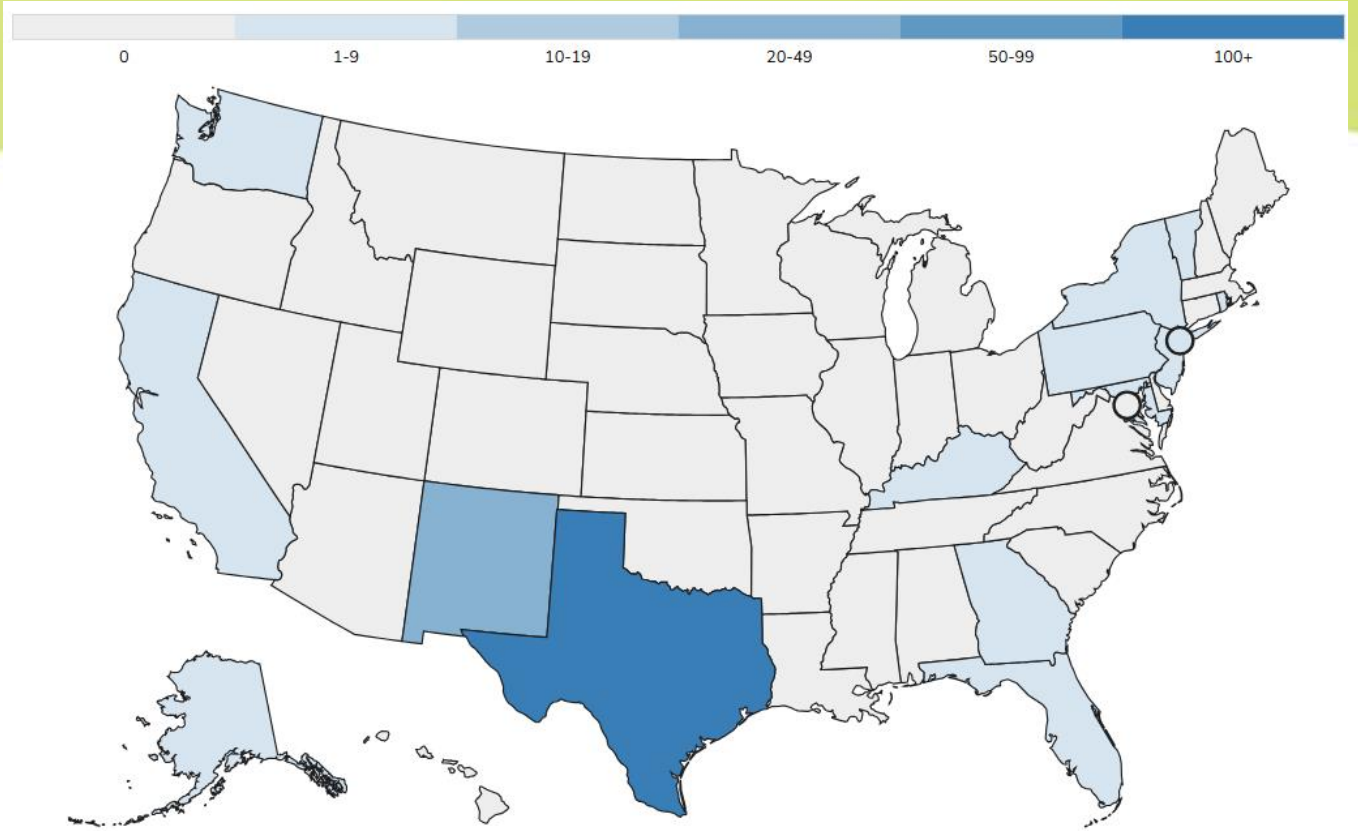
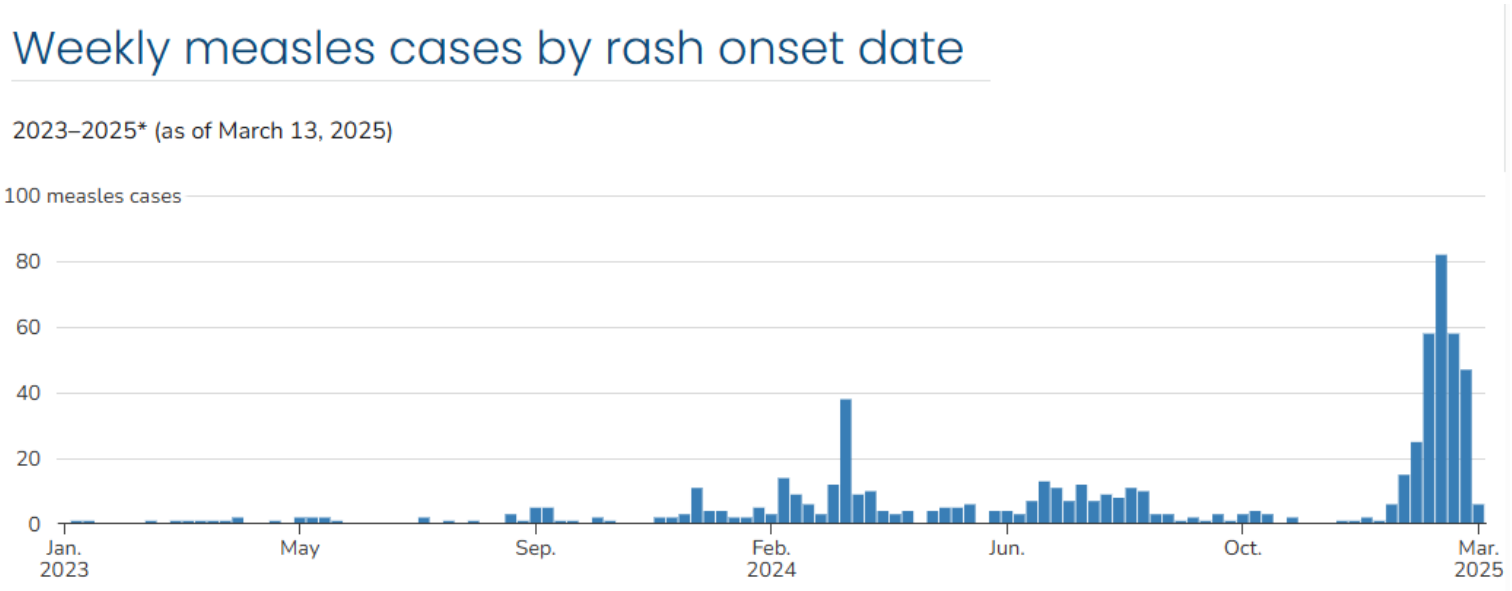
United States Measles Activity In 2025





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Public Health Interventions and CDU Preparedness

Response to Cases/Exposure

- Isolation
- Quarantine
- Prophylaxis
- Monitoring
- Testing

Prevention

- Communication and Education
- Immunization
- Early Detection

Preparedness

2024 Regional Planning, Workshop

2024 Tabletop Exercise with School Health, CPS

2024 Planning Meetings with CCHMC, UC, Xavier

2025 CCHMC Coffee with Colleagues

Outbreak Assessments

Identifying At Risk Communities

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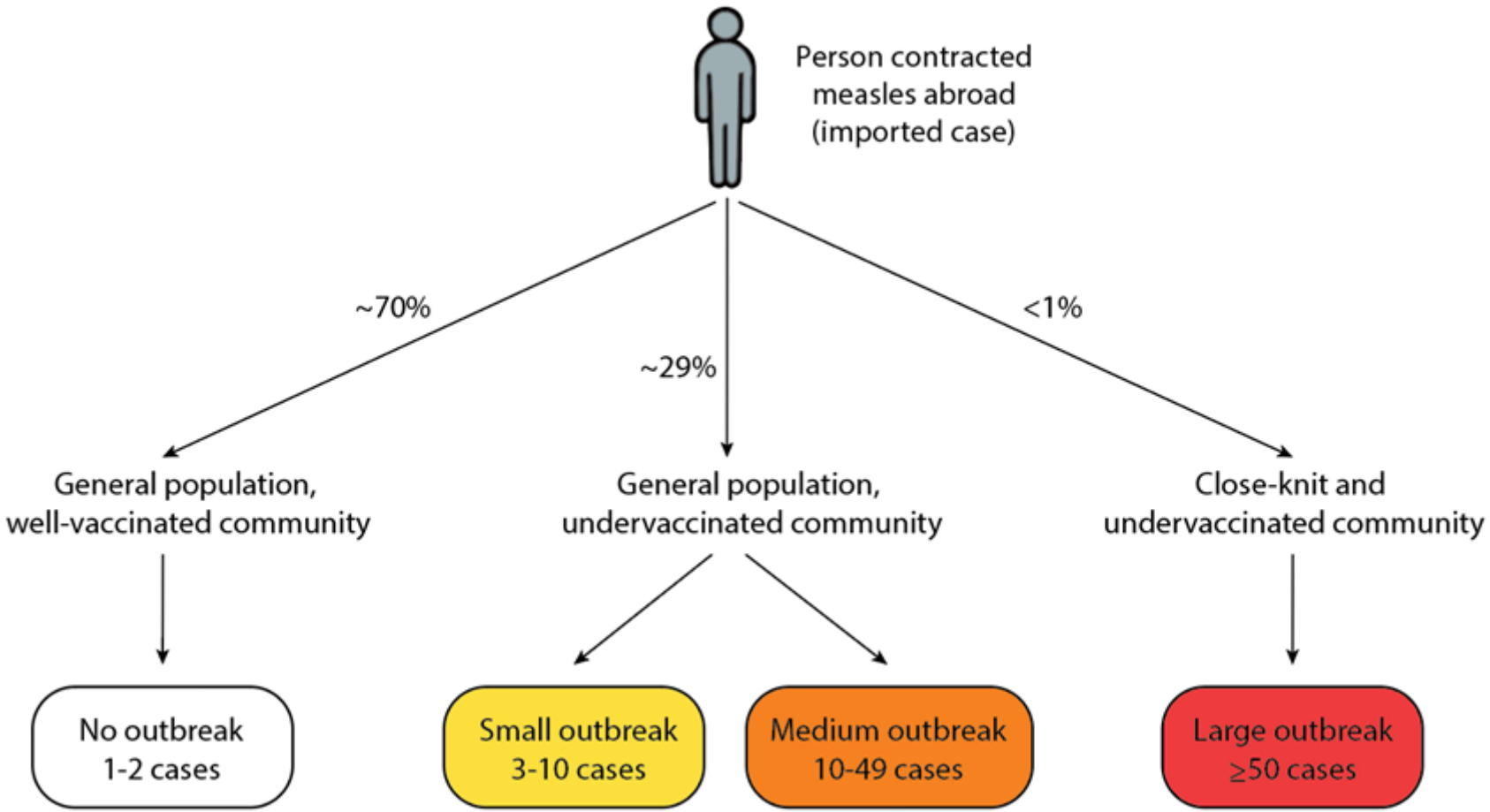
Factors That Determine Measles Outbreak Likelihood and Size



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Significant Measles Outbreaks in the United States Since 2000

Measles Outbreak Associated with a Migrant Shelter — Chicago, Illinois, February–May 2024 | MMWR

Notes from the Field: Measles Outbreak — Central Ohio, 2022–2023 | MMWR

Public Health Actions to Control Measles Among Afghan Evacuees During Operation Allies Welcome — United States, September–November 2021 - PMC

Transmission dynamics of and insights from the 2018–2019 measles outbreak in New York City: A modeling study | Science Advances

Containing a measles outbreak in Minnesota, 2017: methods and challenges - PubMed

A Measles Outbreak in an Underimmunized Amish Community in Ohio | New England Journal of Medicine

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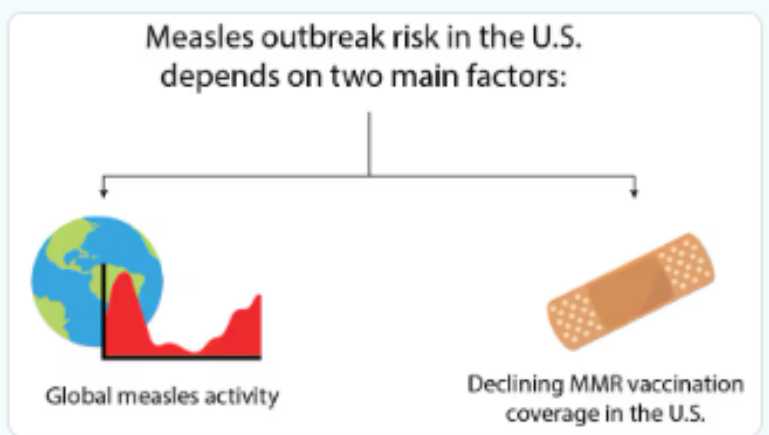
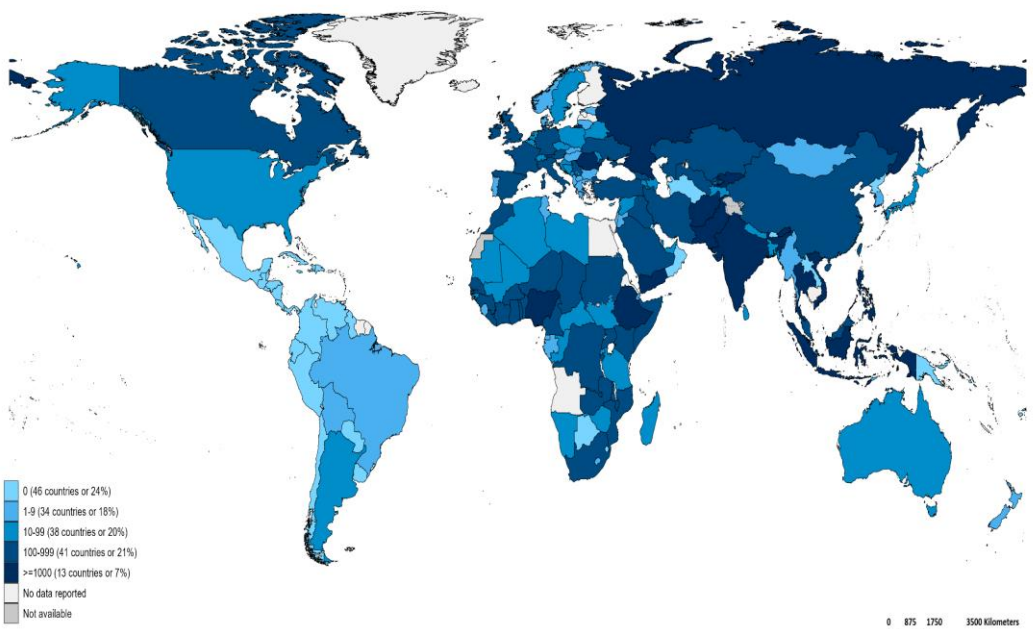
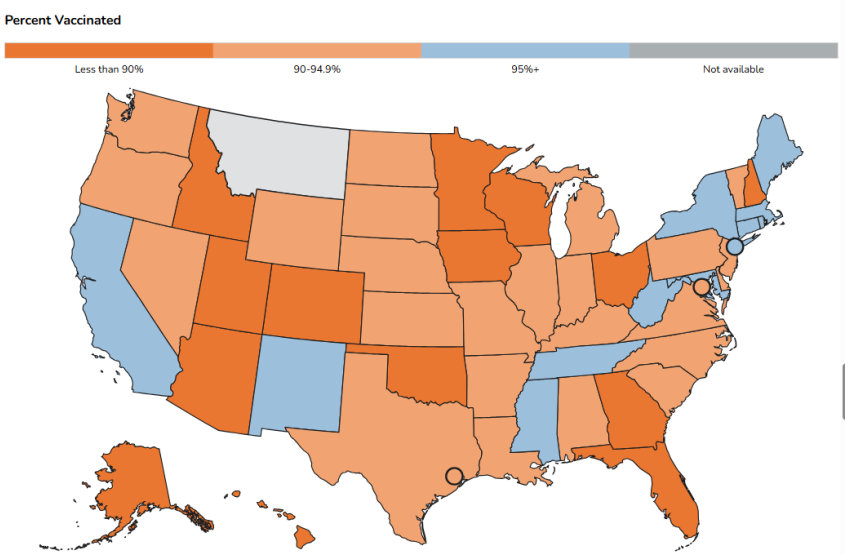
Outbreak Forecasting







World Health Organization

Data source: IVB Database

Disclaimer: The boundaries and names shown and the designations used on this map do notimply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

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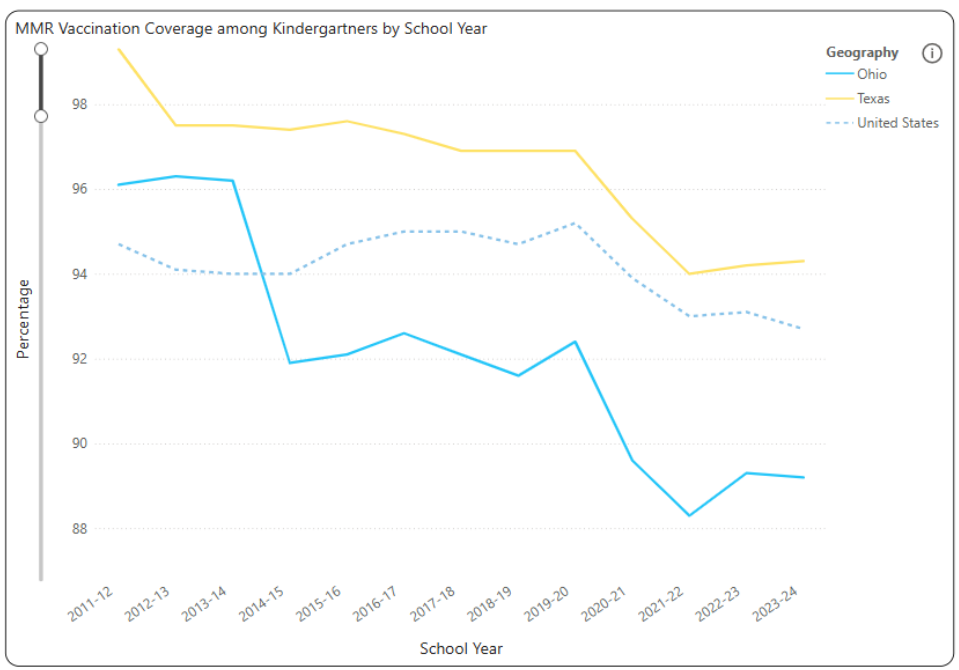
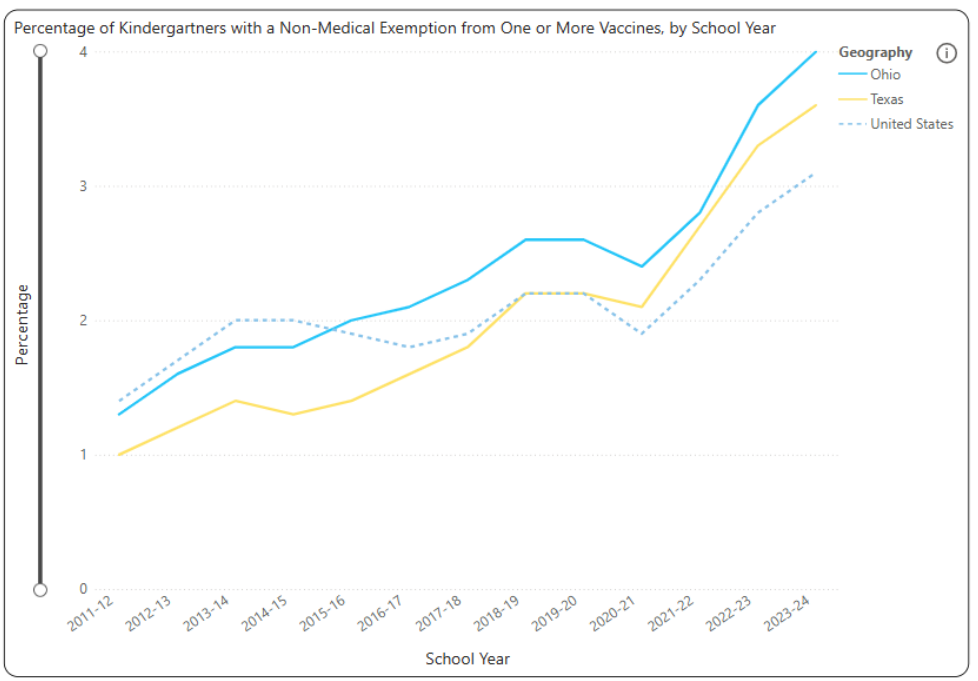
Immunization Rates and Exemptions
Ohio, Texas, United States





Vaccination Coverage

•During the 2023-2024 school year, vaccination coverage among kindergartners in the U.S. decreased for all reported vaccines from the year before, ranging from 92.3% for diphtheria, tetanus, and acellular pertussis vaccine (DTaP) to 92.7% for measles, mumps, and rubella vaccine (MMR).

Exemptions

•During the 2023-2024 school year, exemptions from one or more vaccines among kindergartners in the U.S. increased to 3.3% from 3.0% the year before.

•Exemptions increased in 40 states and DC, with 14 states reporting exemptions exceeding 5%.

Source: Vaccination Coverage and Exemptions among Kindergartners | SchoolVaxView | CDC

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Other Groups at Risk

- Students at post-high school educational institutions
- International travelers
- Healthcare personnel
- Close contacts of immunocompromised people
- People with HIV infection
- Adults who know they got the killed (inactivated) measles vaccine

Measles Vaccination for Specific Groups | Measles (Rubeola) | CDC

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References

Centers for Disease Control

https://www.cdc.gov/measles/index.html

Ohio Department of Health

https://odh.ohio.gov/know-our-programs/vaccine-preventable-diseases/resources/measles

https://odh.ohio.gov/know-our-programs/infectious-disease-control-manual/section3/section-3-measles

World Health Organization

https://www.who.int/health-topics/measles#tab=tab_1

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Thank you

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

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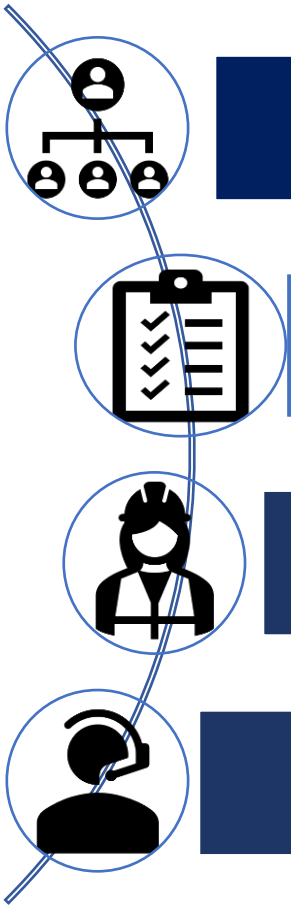
Healthy Homes Office

Board of Health Presentation

March 25, 2025

Who We Are



- Supervising Environmental Health Specialist
- 2 Senior Environmental Health Specialists
- 7 Environmental Health Specialists
- Customer Relations Representative (CRR)

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Recreational Vehicle Park

- One RV Park located in the city opened in 2021
- EHS conducts yearly inspection
- State mandated through Ohio Department of Health

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Manufactured Home Park

- Have one manufactured home park in the city
- EHS conducts a yearly inspection
- Contract for this program is with the Ohio Department of Of Commerce

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JobCorps

- EHS conducts quarterly inspections of both the residential areas as well as the classrooms
- Have a contract with JobCorps as these inspections fulfill their requirement from the Department Of labor

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Transient Accommodations

- License and inspect 30 hotels annually
- This is done under BOH 000-11

city of CINCINNATI
HEALTH DEPARTMENT

School Inspections

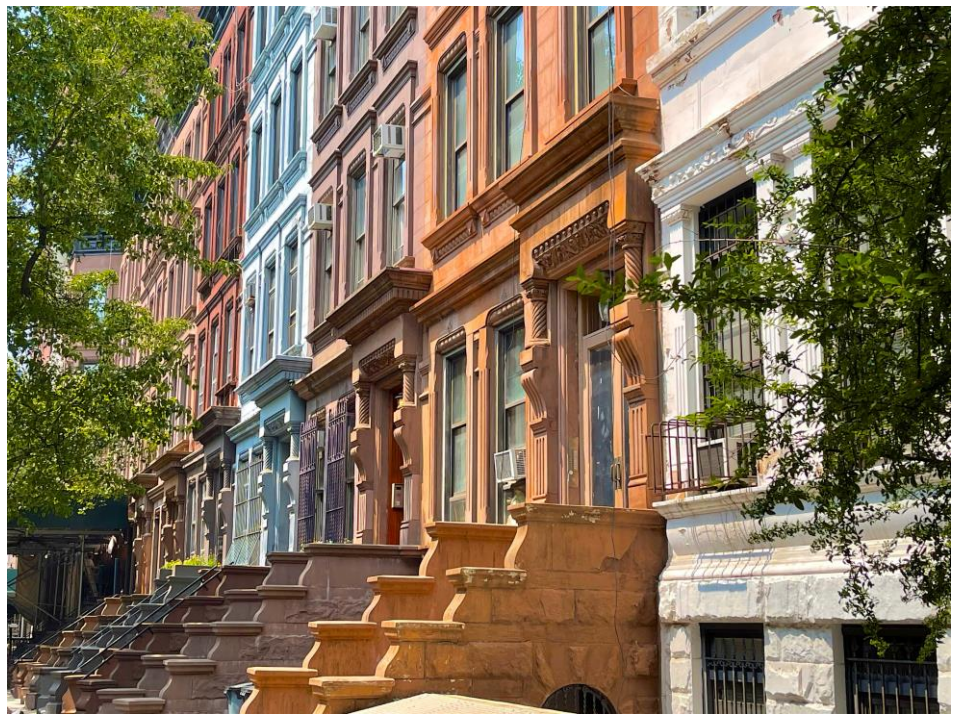
The City of Cincinnati has 138 schools (public, private, charter)

- EHS conducts 2 types of inspections: environmental and FSO
- All schools are inspected twice during the school year

city of CINCINNATI
HEALTH DEPARTMENT

Nuisance Complaints

- EHS team responded to 3400+ housing nuisance complaints in 2024
- Perform onsite inspections, issue BOH orders, escalate enforcement through civil citations and/or prosecution
- Work with law on recent litigations and settlement agreements



city of CINCINNATI
HEALTH DEPARTMENT

Shelter Inspections

- Checklist for the environmental and food service portion
- Coordinated visits with the compliance officer for Strategies To Prevent Homelessness.

city of CINCINNATI HEALTH DEPARTMENT

Smoke-Free Workplace

- EHS conducts investigations for smoking complaints
- This program is a contract with Ohio Department of Health

city of CINCINNATI HEALTH DEPARTMENT

Collaborations

- CLEAR Children's Hospital
- Placed Based Initiatives Manager within CMO
- IMPACTU with Antonio Young and Sonya Williams
- Community outreach

city of CINCINNATI
HEALTH DEPARTMENT

city of
CINCINNATI
HEALTH DEPARTMENT

Healthy Homes Offices

Bobbie Sterne Health Center
1525 Elm St., 3rd Floor
cincinnatihealthhealthyhomes@cincinnati-oh.gov
(513) 352-2908

Preparation Date March 10, 2025

CINCINNATI HEALTH DEPARTMENT CONTRACT AND GRANT INFORMATION SHEET

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

Vendor	**Clark Schaefer Hackett**
Contract #	**55x0556 – 3rd Amendment**

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

Initiator Person & Phone #	**Mark Menkhaus, Jr., 513-357-7469**
Division Head & Phone #	**Mark Menkhaus, Jr., 513-357-7469**
Division	**Health**

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

____ Service Contract (no $) ____ Lease

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

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

CONTRACT DOLLAR AMOUNT

Original Amount	**$345,000**
1st Amendment Amount	**$460,000**
2nd Amendment Amount	**$498,300**
3rd Amendment Amount	**$405,000**
Total Amount	**$1,708,300**

TERM

Original Term	Start Date	**10/13/2014**	End Date	**6/30/2017**
1st Amendment	Start Date	**01/26/2016**	End Date	**6/30/2025**
2nd Amendment	Start Date	**01/26/2016**	End Date	**6/30/2025**
3rd Amendment	Start Date	**Upon execution**	End Date	**6/30/2028**

EXECUTIVE SUMMARY

The agreement is between Clark Schaefer Hackett and the Cincinnati Health Department for the Cost Report Audits.

Clark Schaefer Hackett will audit the Ohio Department of Job and Family Services Federally Qualified Health Center Cost Report (the "Cost Report") for Cincinnati Health Department Federally Qualified Health Centers.

DATE: March 25, 2025

TO: City of Cincinnati Board of Health

FROM: Mark Menkhaus, Jr., CFO

SUBJECT: Fiscal Presentation 2025

FINANCIAL STATEMENTS REVIEW FOR THE FISCAL YEAR 2025 – FEBRUARY

2025 February Highlights:

- Revenue as of the end of February was $43,926,708.66. Which is a 6.36% increase from February of 2024. Expenses as of February 2025 totaled $42,337,951.20 which is a 3.73% increase from February 2024. Total net gain after the capital revenue transfer was $3,775,757.46.

Year over Year:

- As of February, we had $108,848.46 in overtime compared to February of 2024's total of $114,573.77. As of February 2025, we have not had any disaster overtime, while February 2024 had a total of $401.97 in disaster overtime.

- We received our FY24 Medicaid Maximization payment in the amount of $4,489,660 on February 18, 2025.

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

- 7100-Personnel increased by 5.04% (4.09% increase in prior month). This increase is due to COLAs for non-represented and AFSCME staff. 7500-Fringes saw a corresponding increase of 5.07% (3.62% in the prior month). The increase is also attributed to the calendar year 2024 having 27 pay periods. This only happens every 10 years.

- 7200- Contractual Services saw a decrease of 0.37% (1.77% increase in the prior month), and 7300- Materials & Supplies increased by 33.34% (11.74% increase in prior month). The increases are due to the timing of invoices paid. In FY25 we paid Western Nursing $151,720.50 as of February, yet in FY24 we paid Western Nursing $402,750.52 as of February. In FY25 we paid Cardinal Health $1,450,157.95 as of February, yet in FY24 we paid Cardinal Health $686,275.17 as of February. We also expensed $250,000 to Community Learning Center Institute in FY25 that was not expensed in FY24.

- 7400-Fixed Costs decreased by 33.26% (30.73% decrease in prior month). The decrease is the timing of invoices paid. In FY25 we paid Talbert Services $29,071.56 as of January, yet in FY24 we paid Talbert Services $472,113.91 as of February. In FY25 we paid Hamilton County $80,000.00, yet in FY24 we paid Hamilton County $210,125.00 as of February.

- 7600-Property decreased by 14.87% (45.96% decrease in prior month).

Cincinnati Board of Health Financial Statement for the period of February

	FY25 Actual	FY24 Actual	Variance
Revenue			
8236-Pools/Spa	$1,642.50	$2,943.23	-44.19%
8237-Household Sewage System	$43,343.00	$42,454.00	2.09%
8239-Tatto/ Body, Environmental Waste License Fee	$42,071.00	$59,176.00	-28.91%
8241-Food Service (Mobile-Temporary)	$54,467.44	$104,298.00	-47.78%
8242-Vending Machine Licenses	$94.08	$88.34	6.50%
8244-Food Establishments	$121,060.25	$11,878.75	919.13%
8249-Food, NOC	$37,028.95	$50,240.65	-26.30%
8432-Vending Machine Proceeds	$0.00	$0.00	0.00%
8536-Grants\State	$754,330.83	$1,282,486.39	-41.18%
8556-Grants\Federal	$7,895,843.61	$5,703,725.42	38.43%
8563-Bd of Ed Svc (School Nurses Sal.)	$1,747,068.61	$2,701,031.21	-35.32%
8564-Ham Co Service	$88,959.51	$167,131.26	-46.77%
8571-Specific Purpose\Private Org.	$151,097.86	$848,719.89	-82.20%
8617-Non-Department Fringe Benefit Reimbursement	$1,236.01	$732.65	68.70%
8618-Overhead Charges Indirect Costs	$61,340.00	$0.00	0.00%
8731-Birth & Death Certificates	$356,255.50	$346,456.80	2.83%
8732-Vital Stats - Other	$6,342.27	$2,824.91	124.51%
8733-Self-Pay Patient	$606,172.26	$587,635.89	3.15%
8734-Medicare	$3,402,903.52	$3,430,198.74	-0.80%
8736-Medicaid	$8,526,711.72	$6,948,052.82	22.72%
8737-Private Pay Insurance	$781,043.02	$803,351.43	-2.78%
8738-Medicaid Managed Care	$5,540,498.57	$4,037,117.80	37.24%
8739-Misc. (Medical rec.\smoke free inv.)	$1,274,011.32	$1,143,251.62	11.44%
8784-Private Lot Litter & Weed	$0.00	$0.00	0.00%
8811-Unclaimed Remains	$0.00	$0.00	0.00%
8914-Bond/Note Proceeds	$0.00	$1,227,000.00	-100.00%
8917-Deferred Sewer Assessment Collections	$226.60	$342.49	-33.84%
8932-Prior Year Reimbursement	$185,076.65	$426,768.00	-56.63%
% That is attributable from 416	$12,247,883.58	$11,373,965.50	7.68%
Total Revenue	$43,926,708.66	$41,301,871.79	6.36%
Expenses			
71-Personnel	$22,648,265.22	$21,561,684.94	5.04%
72-Contractual	$5,844,055.24	$5,865,740.27	-0.37%
73-Material	$3,066,344.05	$2,299,725.48	33.34%
74-Fixed Cost	$1,411,708.59	$2,115,313.99	-33.26%
75-Fringes	$9,104,809.91	$8,665,364.42	5.07%
76-Property	$262,768.19	$308,654.87	-14.87%
Total Expenses	$42,337,951.20	$40,816,483.97	3.73%
Net Gain (Losses)	**$1,588,757.46**	**$485,387.82**	227.32%
8936-Transfer	**$2,187,000.00**	**$1,227,000.00**	
Total Available	**$3,775,757.46**	**$1,712,387.82**	120.50%

Interdepartmental Correspondence Sheet

Date: 3/25/2025

To: MEMBERS of the BOARD of HEALTH

From: Grant Mussman, MD MHSA, Health Commissioner

Copies: Leadership Team, HR File

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

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

KIMBERLY BETTS	**MEDICAL ASSISTANT**	**CCPC**
(Transfer vacancy)		
Salary Bi-Weekly Range:	$3,224.59 to $3,720.68	Grant Fund

The City of Cincinnati Primary Care would like to hire Kimberly Betts as a Medical Assistant. Ms. Betts graduated from Kaplan College and has over five years of experience as a Medical Assistant. Prior to becoming a Medical Assistant, Ms. Betts worked as a State Tested Nursing Assistant (STNA). Her skills and knowledge will be an asset for the City of Cincinnati Primary Care – Bobbie Sterne Health Center.

CATHERINE BLINCO	**DENTIST**	**CCPC**
(Transfer vacancy)		
Salary Bi-Weekly Range:	$6,170.69 to $7,908.46	Revenue Fund

Dr. Catherine Blincoe is a graduate of Columbia University College of Dental Medicine in May 2024 where she received her Doctorate of Dental Surgery. She is currently completing an Advanced Education in General Dentistry Residency at the University of Cincinnati Dental Center. During dental school, Dr. Blincoe led the dental team of the Columbia-Harlem Health and Medical Partnership, an initial point-of-care clinic for the uninsured, low-income population of West Harlem. During her residency, she has had experience serving both adult and pediatric patients with advanced dental disease. She has provided preventive dentistry, operative dentistry, periodontics, prosthodontics, oral surgery and endodontics. She has completed rotations in public health dental centers and Cincinnati Children's specialty clinics. Dr. Blincoe has a passion for working with underserved populations and will provide valuable services to Cincinnati Health Department dental patients.

ASIA HUDSON	**DENTAL ASSISTANT**	**CCPC**
(Retirement vacancy)		
Salary Bi-Weekly Range:	$3,224.59 to $3,720.68	Revenue Fund

Asia Hudson has over 6 years of dental experience as a dental assistant. She has worked in pediatrics and general dentistry. Ms. Hudson has over 6 years of experience as a chair side dental assistant with endo and restorative dentistry. She has a wide range of experience, and we think she will be a great asset to the Cincinnati Health Department dental program.

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

SARTH PATEL **DENTIST** **CCPC**

(Transfer vacancy)

Salary Bi-Weekly Range: $6,170.69 to $ 7,908.46 Revenue Fund

Dr. Sarth Patel is a graduate of University of Louisville School of Dentistry (May 2024) where he received his Doctorate in Dental Medicine. He is currently completing an Advanced Education in General Dentistry Residency at the University of Cincinnati Dental Center. In dental school and during his residency, he has had experience serving both adult and pediatric patients with advanced dental disease. He has provided preventive dentistry, operative dentistry, periodontics, prosthodontics, oral surgery and endodontics. He has completed rotations in public health dental centers and Cincinnati Children's specialty clinics. Dr. Patel has a passion for working with underserved populations and will provide valuable services to Cincinnati Health Department dental patients.

BINITA SATPATHY **DENTIST** **CCPC**

(Resignation vacancy)

Salary Bi-Weekly Range: $6,170.69 to $7,908.46 Revenue Fund

Dr. Binita Satpathy is a general dentist who completed her Doctorate of Dental Surgery in May of 2021 as well as her Advanced Education in General Dentistry Residency at Meharry Medical College. She is currently a general dentist at an FQHC in Nashville, Tennessee and has spent the majority of her career focusing on providing care in a public health setting serving Medicaid and uninsured patients. She has experience working with refugees and serves both adult and pediatric patients with advanced dental disease. She has provided preventive dentistry, operative dentistry, periodontics, prosthodontics, oral surgery and endodontics. Dr. Satpathy has a passion for working with underserved populations and will provide valuable services to Cincinnati Health Department dental patients.

TENDER-LEA SMITH **MEDICAL ASSISTANT** **CCPC**

(Transfer vacancy)

Salary Bi-Weekly Range: $3,224.59 to $3,720.68 General Fund

The City of Cincinnati Primary Care would like to hire Tender-Lea Smith as a Medical Assistant. Ms. Smith graduated from Ross Medical Education Center in 2017. Her experience working as a Medical Assistant in urgent care and addiction services will be valuable as she transitions to the primary care setting. Her skills and knowledge will be an asset for the City of Cincinnati Primary Care – Ambrose Clement Health Center.

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

WIC Updates February 2025

1. The WIC caseload in February was 15,158.
   Women: 3,421
   Infants: 3,856
   Children: 7,881
2. February breastfeeding initiation rate for WIC infants was 64.3%. Breastfeeding at 6 months was 38.1%. Breastfeeding rates have been steady. WIC continues to offer on-line and in-person breastfeeding classes along with walk-in hours for breastfeeding assistance.

Community Health and Environmental Services (CHES) Updates for CHD BOH Meeting 3.25.2025

Community Health and Environmental Services (CHES) updates:

- Cincinnati Health Department partnered with the City Manager's Office to launch a medical debt relief project in response to Mayor Pureval's Financial Freedom Blueprint
- Cincinnati Health Department continues to meet with the Cincy CHIP action teams on the five priorities set for the next three years. 1) Access to Care, 2) Mental and Behavioral Health, 3) Nutrition and Food Access, 4) Infant Vitality, 5) Housing. More information in the Accreditation section.
- Alternative Response to Crisis (ARC) pilot diverting low acuity 911 calls to a behavioral health and EMT team is continuing in the Cincinnati community, more information can be found with the link below:

Alternative Response to Crisis (cincinnati-oh.gov)

Epidemiology

Epidemiology Data Briefs and Educational Guides:

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

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

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

C:\Users\KIMBER~1.WRI\AppData\Local\Temp\msoA228.tmp (cincinnati-oh.gov)

2022 Annual Lead Report:

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

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

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

The finalized number of births for 2020 (births extracted from Ohio Resident live births database (by residence city/county) as of 9.20.22):
City of Cincinnati = 4,220
Hamilton County births outside of the City limits = 6,110
Hamilton County inclusive of the City = 10,330

The finalized infant mortality rate for 2020 based on our current numbers:
City of Cincinnati IMR = 10.4 per 1,000 live births
Hamilton County outside the City limits = 5.4 per 1,000 live births
Hamilton County IMR = 7.5 per 1,000 live births (inclusive of the city numbers)

Provisional deaths for 2021:
City 2021 = 41
County (minus the city) 2021 = 24
Total Hamilton County 2021 = 65

The provisional number of births for 2021 (births extracted from Ohio Resident live births database (by residence city/county) as of 2.9.23):
City of Cincinnati = 4,111
Hamilton County births outside of the City limits = 6,154
Hamilton County inclusive of the City = 10,265

The provisional infant mortality rate for 2021 based on our current numbers:
City of Cincinnati IMR = 10.0 per 1,000 live births
Hamilton County outside the City limits = 3.9 per 1,000 live births
Hamilton County IMR = 6.3 per 1,000 live births (inclusive of the city numbers)

Provisional deaths for 2022:
City 2022 = 47
County (minus the city) 2022 = 42
Total Hamilton County 2022 = 89*
*three deaths OOJ excluded

The provisional number of births for 2022 (births extracted from Ohio Resident live births database (by residence city/county) as of 2.28.24):
City of Cincinnati = 4,155
Hamilton County births outside of the City limits = 6,034
Hamilton County inclusive of the City = 10,189

The provisional infant mortality rate for 2022 based on our current numbers:
City of Cincinnati IMR = 11.3 per 1,000 live births

Hamilton County outside the City limits = 7.0 per 1,000 live births
Hamilton County IMR = 8.7 per 1,000 live births (inclusive of the city numbers)

Provisional deaths for 2023:
City 2023 = 29
County (minus the city) 2023 = 29
Total Hamilton County 2023 = 58

The provisional number of births for 2023 (births extracted from state database (by residence city/county) as of 10.28.24):
City of Cincinnati = 4,122
Hamilton County births outside of the City limits = 5,912
Hamilton County inclusive of the City = 10,034

The provisional infant mortality rate for 2023 based on our current numbers:
City of Cincinnati IMR = 7.04 per 1,000 live births
Hamilton County outside the City limits = 4.91 per 1,000 live births
Hamilton County IMR = 5.78 per 1,000 live births (inclusive of the city numbers)

Provisional deaths for 2024:
City 2024 = 33
County (minus the city) 2024 = 34
Total Hamilton County 2024 = 67

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

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

CCPC UPDATE

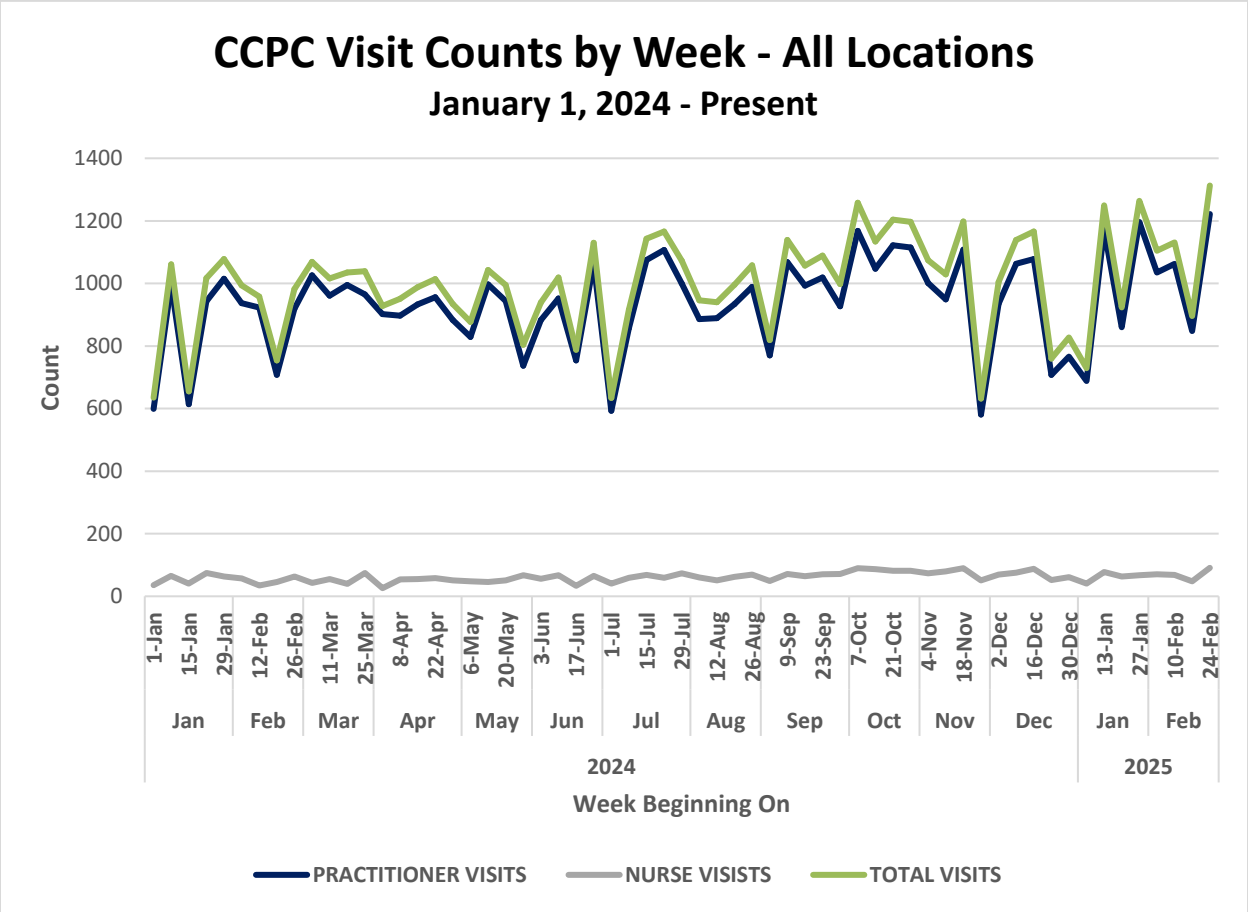


Figure 1. Number of Completed Patient Visits to All CCPC Community Health Center Sites

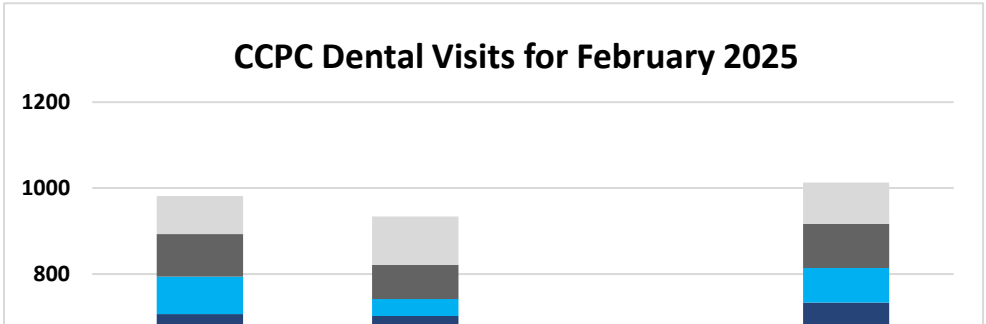
Table 1. Number of Completed Patient Visits by Location for February 2025 and FYTD

CCPC Community Health Centers	2/3	2/10	2/17	2/24	Feb 2025 Total	Feb 2024 Total	2025 FYTD Total	2024 FYTD Total
VISITS	**1035**	**1063**	**848**	**1222**	**4168**	**3487**	**33833**	**29959**
AMBROSE CLEMENT	114	132	104	131	481	288	3828	1579
AMBROSE CLEMENT BH	25	23	32	32	112	77	989	688
BRAXTON CANN	90	52	107	119	368	363	3089	3102
BRAXTON CANN BH	4	9	5	6	24	0	64	0
ELM ST. BH	4	14	0	15	33	12	365	105
ELM ST.	194	199	125	211	729	619	5610	5523
MILLVALE	134	157	120	145	556	469	4463	4433
MILLVALE BH	9	9	9	12	39	26	317	384
NORTHSIDE	175	124	117	202	618	517	5232	4450
NORTHSIDE BH	17	15	14	20	66	19	241	285
PRICE HILL	243	296	196	293	1028	918	8618	8165
PRICE HILL BH	26	33	19	36	114	179	1017	1245
NEW PATIENTS	**65**	**80**	**58**	**72**	**275**	**230**	**2248**	**1763**
AMBROSE CLEMENT	14	18	14	6	52	23	372	109
AMBROSE CLEMENT BH	0	0	0	0	0	1	10	11
BRAXTON CANN	7	7	8	14	36	18	278	206
BRAXTON CANN BH	0	0	0	0	0	0	0	0
ELM ST. BH	0	0	0	0	0	0	4	1
ELM ST.	10	11	5	6	32	25	278	238
MILLVALE	11	7	13	6	37	59	376	442
MILLVALE BH	0	0	0	0	0	0	0	0
NORTHSIDE	6	14	6	19	45	39	362	285
NORTHSIDE BH	0	0	0	1	1	0	1	8
PRICE HILL	17	23	12	20	72	63	562	454
PRICE HILL BH	0	0	0	0	0	2	5	9

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

CCPC PHARMACY LOCATION	2/3	2/10	2/17	2/24	Feb 2025 Total	Feb 2024 Total	2025 FYTD Total	2024 FYTD Total
NUMBER OF FILLS	**2468**	**2194**	**1989**	**2709**	**9360**	**8735**	**76002**	**74041**
AMBROSE CLEMENT	459	384	296	573	1712	1056	12391	9326
BRAXTON CANN	302	210	301	341	1154	1229	9595	10716
ELM ST.	448	402	349	434	1633	2033	13940	17240
MILLVALE	327	370	279	375	1351	1350	11580	11244
NORTHSIDE	306	197	294	326	1123	1130	9941	9184
PRICE HILL	626	631	470	660	2387	1937	18555	16331

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



Reproductive Health and Wellness Program (RHWP) Data Report

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

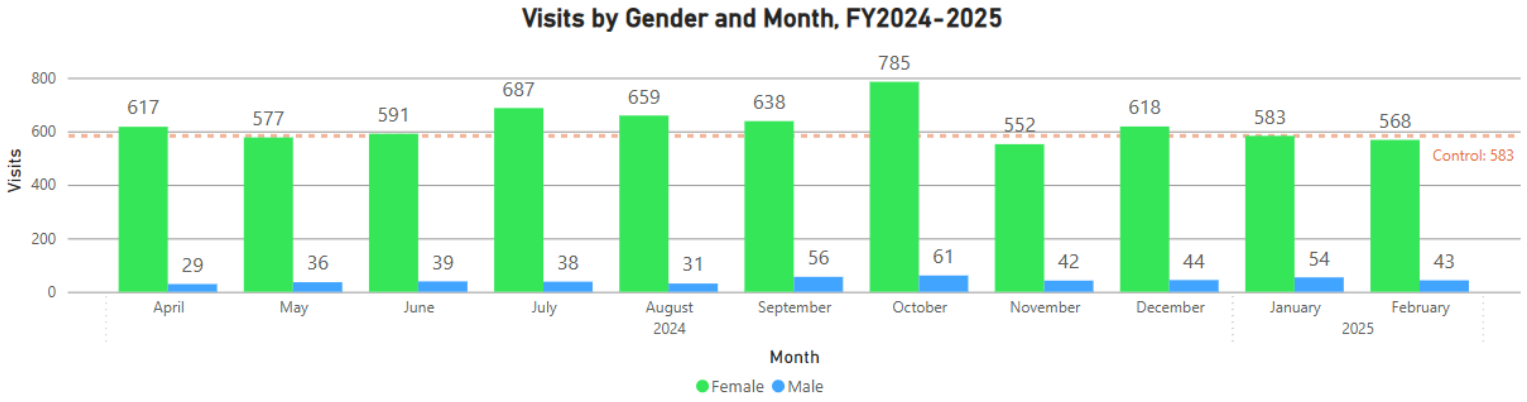
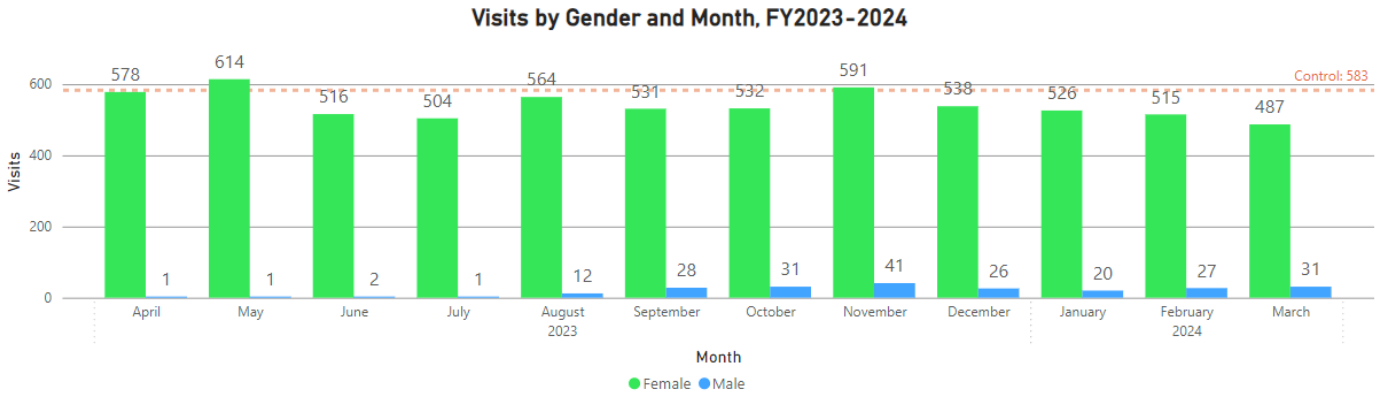


Figure 1b. City of Cincinnati Primary Care Health Center Reproductive Health Visits by Gender and Month, Fiscal Year 2023 – 2024



FY23/24 Visits with Men: 221 patients
FY23/24 Visits with Women: 6496 patients
FY23/24 Visits Combined (men/women): 6717 patients
FY23/24 Control (Expected) Visits: 7000 patients
FY23/24 Visits as % of Control Total: 96.0%
FY24/25 Visits with Men: 473 patients
FY24/25 Visits with Women: 6875 patients
FY24/25 Visits Combined (men/women): 7348 patients
FY24/25 Control (Expected) Visits: 6413 patients
FY24/25 Visits as % of Control Total: 115.0%

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

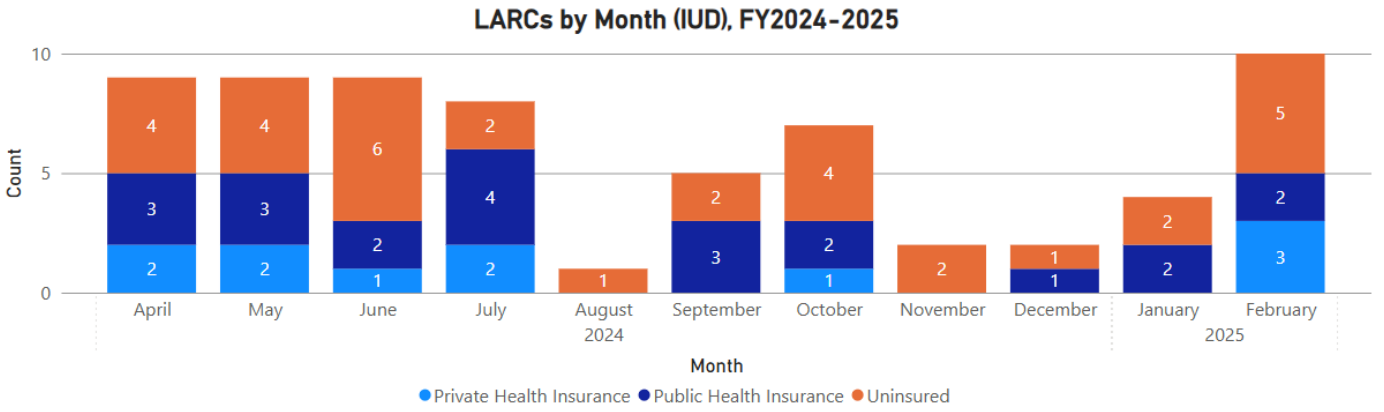


Figure 2b. Long-acting Reversible Contraception (LARC) (Intrauterine Devices) provision by Month and Insurance Type for patients seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2023 – 2024

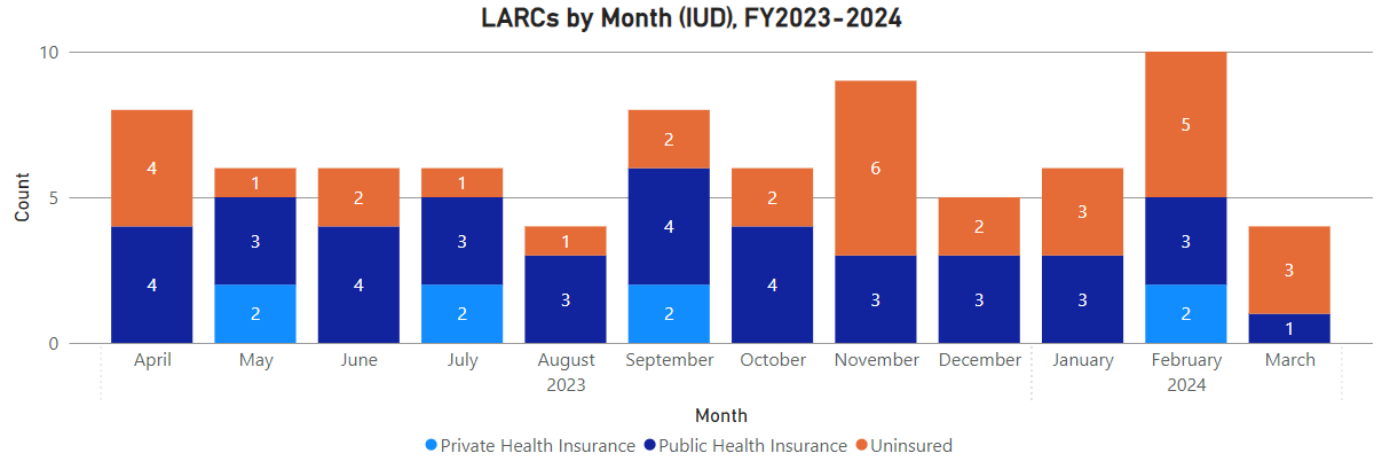


Figure 3a. Long-acting Reversible Contraception (LARC) (Implants) provision by Month and Insurance Type for patients seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2024 – 2025

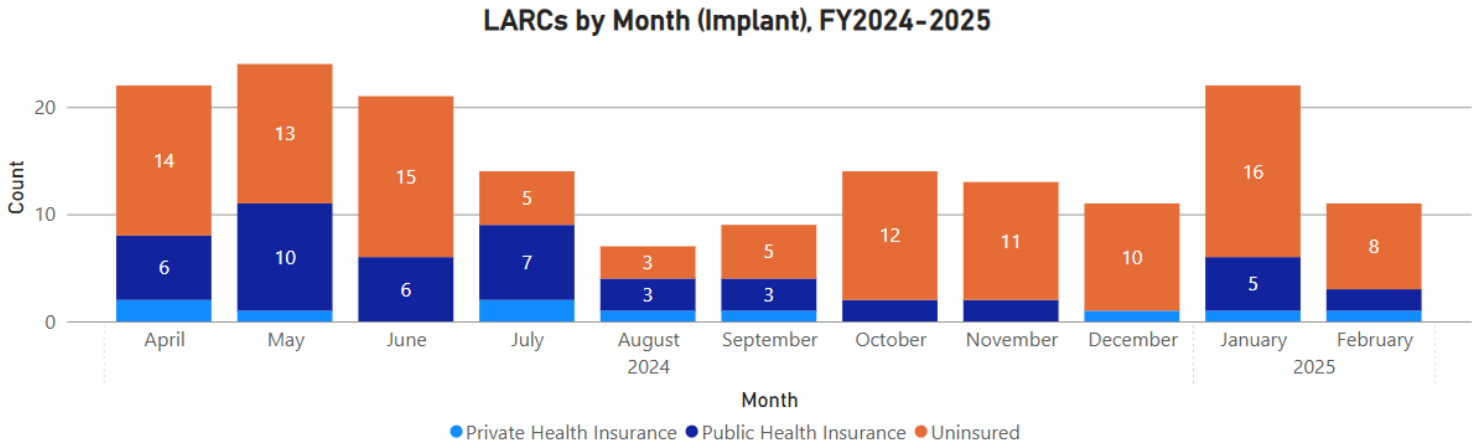


Figure 3b. Long-acting Reversible Contraception (LARC) (Implants) provision by Month and Insurance Type for patients seen at our City of Cincinnati Primary Care Health Centers, Fiscal Year 2023 - 2024

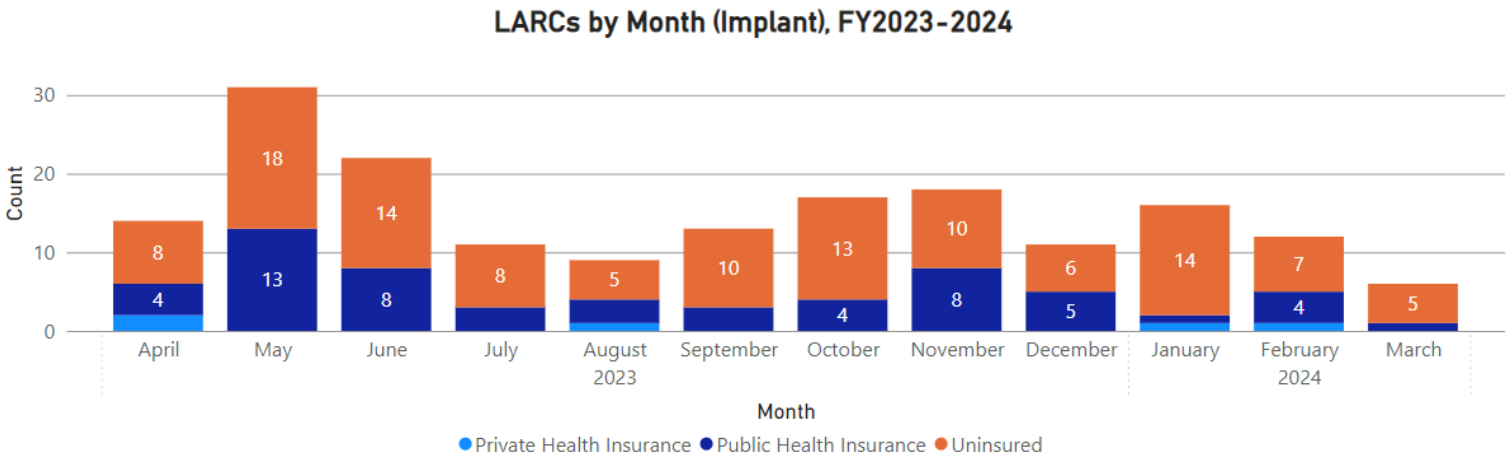


Table 1. Selected Demographic Characteristics of Unduplicated RHWP Patients, February 2025

	Female	% in col.	Male	% in col.	Total	% in col.
Race						
AI/AN	12	2.11%		0.00%	12	1.96%
Asian	12	2.11%	1	2.33%	13	2.13%
Black	258	45.42%	34	79.07%	292	47.79%
PI/HN	17	2.99%		0.00%	17	2.78%
Unknown	81	14.26%	4	9.30%	85	13.91%
White	188	33.10%	4	9.30%	192	31.42%
Ethnicity						
Hispanic	223	39.26%	2	4.65%	225	36.82%
Non-Hispanic	345	60.74%	41	95.35%	386	63.18%
Income						
<=100% FPL	*will report next month when HHS table is updated					
101-249% FPL						
>=250% FPL						
Insurance						
Private	74	13.03%	9	20.93%	83	13.58%
Public	213	37.50%	12	27.91%	225	36.82%
Uninsured	281	49.47%	22	51.16%	303	49.59%
Age (years)						
<15	0	0.00%		0.00%	0	0.00%
15-49	523	92.08%	35	81.40%	558	91.33%
>50	45	7.92%	8	18.60%	53	8.67%
Limited English						
No	310	54.58%	42	97.67%	352	57.61%
Yes	258	45.42%	1	2.33%	259	42.39%

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

	Female	% in col.	Male	% in col.	Total	% in col.
Health Center						
Ambrose Clement	83	13.51%	26	60.47%	109	17.84%
Braxton Cann	18	3.17%	1	2.33%	19	3.11%
Bobbie Sterne	124	21.83%	3	6.98%	127	20.79%
Millvale	55	9.68%		0.00%	55	9.00%
Northside	108	19.01%	13	30.23%	121	19.80%
Price Hill	180	31.69%		0.00%	180	29.46%

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

Accreditation

PHAB Action Plan Update:

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

CHD CHA Update:

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

Cincy CHIP Update:

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

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

The CHIP Behavioral Health Action Team:

The Behavioral Health team is seven weeks into their classroom instruction of the Sources of Strength curriculum and the feedback to date has been great. The team is excited and looking forward to brainstorming ideas on how to implement and expand this pilot into a permanent program throughout the Cincinnati school district.

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

On February 26th, CHD along with other regional stakeholders consisting of hospitals/health systems, community-based organizations, philanthropy, health plans, and federally qualified health centers met to begin the process of developing a collective health agenda around the three regional priorities listed above.

Quality Improvement/ Quality Assurance

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

GET VACCINATED GRANT- MONTHLY DATA TABLE 2024-2025										
MONTH	**RM 0-18 Years**	**RC 0-18 Years**	**IQIP Initial Site visit With office**	**IQIP 2 M Follow up**	**IQIP 6 M Follow up**	**IQIP 12 M Follow up**	**MOBI**	**TIES**	**PERI HEPB NEW CASES**	**PERI HEPB CLOSED CASES**
July	570	642	0	0	0	0	0	0	0	2
August	906	1124	0	0	6	2	10	10	0	0
September	786	1176	1	0	5	5	17	15	2	3
October	822	1214	6	1	0	4	5	6	1	0

November	909	1329	3	0	0	2	5	3	2	0
December	687	1120	1	6	0	5	1	2	1	0
January	651	1013	3	0	0	2	1	1	1	0
February	767	1196	3	2	0	1	4	4	0	0
March										
April										
May										
June										
TOTAL										

RM=reminders to families for immunizations now due

RC=recalls to families behind on immunizations

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

MOBI=Maximizing Office Based Immunization education presentation for providers

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

Peri HEPB=Peri-natal Hepatitis

***JULY- MOBI, TIES, (7/18) and IQIP (7/30) required ODH training completed. ..training required PRIOR to initiating MOBI,TIES,IQIP outreach**

October -Immunization Coverage Disparities report submitted

December- Immunization Coverage Disparity Education Plan submitted

February- 2025-2026 Get Vaccinated grant application submitted

Healthy Communities Program – Tiffany White

Live Work Play Cincinnati Coalition A multi-sector coalition that works to improve health outcomes by addressing health-related social needs and social determinants of health at the community level.		
Date of Meeting	**Location & Presentations**	**Next Steps**
2/5/2025	2533 Kemper Ln., Cincinnati, OH 45206 **Guest Presentation:** Cherished Heart Doulas **February newsletter sent to 120+ members 2/11/2025.**	**Next meeting is March 5, at** MSD Admin Building 1081 Woodrow Street - Room 106 **Meeting frequency: 1st Wednesday of each month.**

Infant Vitality – Malina Harris

ODH- Cribs for Kids Subgrantee The Ohio Department of Health (ODH), Bureau of Maternal, Child and Family Health is partnering with Cribs for Kids® and local organizations throughout Ohio to provide Cribettes® and safe sleep education to eligible families.		
# of families served since last report	**Project Partners and Status**	**3** **Next Steps**
89 families	**Partners:** All In Cincinnati, Bethany House Services, Cherished Hearts CPR Family, Community Action Agency, Cradle Cincinnati Connections (CCC), Crossroad Health Center, First Step Home, Greater Cincinnati Behavioral Health Services, Healthcare Access Now (HCAN),Healthy Homes: Block by Block (Community Matters),Healthy Moms & Babes, Helping Young Mothers Mentor, Inc., Home Health/CHD, Interfaith Hospitality Network of Greater Cincinnati (IHNGC),Mercy Health – Perinatal Outreach Program, Nurse Family Partnership/ECS-Pathways to Home, Rosemary's Babies Co., Santa Maria Community Service, Sigma Gamma Rho Sorority, Inc. Su Casa Hispanic Center, The Children's Hospital/ECS, The Children's Home of Cincinnati/ECS/Costars, The Christ Hospital, The Community Builders (TCB),TriHealth, The Salvation Army, University of Cincinnati Medical Center (UCMC)/Hoxworth/Women's Center, WIC, Women's Center of Ohio, TriHealth --- **Status: Active**	**Plan:** Cribs for Kids and DCY contracts have been approved. Awaiting paperwork to be received to sign. **Meeting frequency: ODH TA Meetings are Quarterly.** Last meeting 12/3/24 Meetings are Quarterly Next Meeting 3/4/25
DCY		
# distributed since	**Project Partners and Status**	**Next Steps**

last report		
150 diapers & 1 potty training kit have been distributed since the last BOH report.	**Partners:** Sweet Cheeks Diaper Bank HCAN, Mercy Health, Health Vine, UC Women's Center, Hamilton County OEI, Cincinnati Health Department Home Health, WIC --- **Status: Active**	**Plan:** **Families have been referred to other agencies to receive diapers** Planning Diaper drive at one of the CHD Health Centers during a health fair. Facility has moved to Walnut Hills. **Meeting frequency:** Last Meeting: 1/11/25 Next Meeting: 1/2026
CAT- The Cincinnati-Hamilton County Community Action Team The mission of the Cincinnati-Hamilton County Community Action Team is to optimize equitable health outcomes for women, infants, children, and families in Cincinnati-Hamilton County through collaboration, education, and action. This group meets monthly.		
# of meetings since last report	**Project Partners and Status**	**Next Steps**
1-Last Meeting: 10/24/24	**Partners:** **Hamilton County** --- **Status: Active**	**Plan:** Discuss the results of the Maternal & Child Health Survey. The work Group is being reconfigured and will meet on a quarterly basis. **Meeting frequency: Quarterly** Next Meeting: 3/27/25
OIPP/CIAG- Ohio Injury Prevention Partnership: Child Injury Action Group The function of the Child Injury Action Group (CIAG) is to identify priorities and strategies to reduce child injury in Ohio. The CIAG has identified focus areas to address in their five-year strategic plan including teen driving, traumatic brain injury, safe sleep, youth suicide and child passenger safety.		
# of meeting since last report	**Project Partners and Status**	**Next Steps**
12/12/24	**Partners:** **Ohio Department of Health** --- **Status: Active**	**Plan:** Strategic Plan Update Shared progress on the standardized data presentation the subcommittee members will be able to brand as their own and share within their respected communities. The presentation includes quantitative and qualitative data from multiple reporting sources (OPAS, CFR, etc.), representing all of Ohio. Presented on current work being done in the Infant Vitality Program. **Meeting frequency:** Quarterly Next Meeting 3/13/25

Program supported projects/ meetings:

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

2/12/25- Safe Sleep Training with Bethany House
2/12/25- Women's Equity Community of Practice Meeting

Food Equity (Healthy Eating)- Jasmine Robinson

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

# of Meetings Since Last BOH Report	Project Partners and Status	Next Steps
2	Produce Perks, Winton Hills Community Church and Council, and Mustard Seed Farm --- **Status: Active**	Plan for 2025 distribution and events by meeting with community members and leaders to determine space for distribution and how to best align with community needs. **Meeting frequency:** as needed for planning

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

# of Meetings Since Last BOH Report	Project Partners and Status	Next Steps
10	CRC, La Soupe, CareSource, Food for the Soul, and Hamilton County ReSource --- **Status: Active** (award received)	Complete contracts with CareSource and plan kick-off event. **Meetings frequency:** standing weekly meetings for contract negations, promotion discussions, and general project updates.

Systems to Achieve Food Equity (SAFE) Network
a sub-network of All Children Thrive made up of individuals and organizations committed to improving food security in Cincinnati to ensure that all children have the food that they need to grow, develop, learn, and thrive.

# of Meetings Since Last BOH Report	Project Partners and Status	Next Steps
3	CCHMC, Freestore Foodbank, Hamilton County ReSource, La Soupe, and more. --- **Status: Active**	Network planning for food distribution in the City of Cincinnati including non-instructional school day initiatives; current project funding covers works in Avondale, East and Lower Price Hill (expansion into Roll Hill coming soon) **Meeting frequency:** 3rd Thursday of every month --- Stakeholder meeting to report on organizational updates, events, and needs working towards food equity in Cincinnati. **Meeting frequency:** 1st Thursday of every

		month
Food Equity Program Newsletter Each month, the Food Equity Coordinator sends a newsletter that includes local food related events such as food/produce distribution sites, pop ups, cooking improv learning sessions and more.		
# of Meetings Since Last BOH Report	**Project Partners and Status**	**Next Steps**
2	Newsletter sent to community members and partners by the 2nd Tuesday of each month. Posted on FEC site routinely --- **Status: Active**	Continue to update newsletter content and layout to meet the reader's needs **Meeting frequency**: included in monthly program meeting with HCP program manager and health counselor supervisor as well as needed meetings scheduled with SAFE's SSF Communications team for discussion/ review
Department Engagement Champions Engagement Champions play a crucial role in shaping the city's culture. Engagement Champions will be at the forefront of driving meaningful change within the city's engagement practices.		
# of Meetings Since Last BOH Report	**Project Partners and Status**	**Next Steps**
2	Meet with other department champions, stay informed on city-wide engagement updates, and share resources with colleagues --- **Status: Active**	**Meeting frequency:** standing monthly meetings

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

Tobacco Free Living (TFL) – Courthney Calvin

Project/ Meeting Title: Youth Vape Presentation **Educate Cincinnati youth on the dangers of e-cig use.**		
Date and # of Students	**Project Partners and Status**	**Next Steps**
Total Amount of Students Educated: 65 72	**Partners:** Midway School Clark High School	**Plan:** **To present preventative tobacco education for youth. Present the opportunity to take over the vape disposal program.** **Meeting frequency:** As Needed

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

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

Tobacco 21/Tobacco Retail License (TRL) -

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

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

Worksite Wellness & Active Living – Scott Dean

Healthy Eating Active Living (HEAL) Capacity Building Grant for Carthage is now the **ODH Creating Healthy Communities Grant**
Supportive pedestrian infrastructure for Carthage. The goals being to increase the proportion of adults and adolescents that walk or bike to get to places and to reduce the proportion of adults, adolescents and children with obesity.

# of Meeting since last report	Project Partners and Status	Next Steps

16	**Partners:** Identified 36 partner agencies --- **Status: Active** Working with community on neighborhood improvements. Procuring wayfinding signage and traffic calming measures in the near future, so working with community to make selections.	• Continue pushing usage of the CAGIS Pedestrian Hazard map we created for the community to track issues • Push out completion of Neighborhood Physical Activity survey • Have Carthage Community Complete Artist questionnaire to help narrow down artists to design street mural **Meeting frequency: Monthly with additional meetings as needed**
Y.E.S on Bike & Pedestrian Safety and ODH Creating Healthy Communities grant The aim of this education series is to increase youth knowledge around the responsibilities of pedestrians, cyclists, and drivers to create a culture of safe transportation in neighborhoods. The goals of the CHC grant are to increase the proportion of adults and adolescents that walk or bike to get to places and to reduce the proportion of adults, adolescents and children with obesity. We also are trying to increase the proportion of community members that engage in aerobic and muscle strengthening activity.		
# of Meeting since last report	**Project Partners and Status**	**Next Steps**
13	**Partners:** Cincinnati Public School (CPS), Tri-State Trails, Green Umbrella: Green Schoolyards Team --- **Status: Active** Finalized pilot curriculum and began presentations. Continuing to find partners to present to Working with Roll Hill to establish new Traffic Garden	• Meeting with school partners to conduct engagement on design and selection of traffic garden. • Continue work on developing a comprehensive curriculum. • Conducting comprehensive community engagement with students and parents. **Meeting frequency: Monthly**

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

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

Behavioral Health and Recovery Support

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

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

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

Community Outreach – Justin Berry

Project/ Meeting Title – Community Outreach
Details/ description

# of ...	Project Partners and Status	Next Steps
2 Meeting and Community Members reached) 49	**Partners:** GCB, City Gospel, Heroin Coalition Team, CCRC, Step Stone and DeCoach, First Step Home, Treatment Team, CRC Rec Center, Our daily Bread), God Sam's, UC Hospital, 20/20, **Status: (Ongoing)** Nacarn- 12 kits passed out in community	**Plan:** **Meeting frequency:** (Monthly and Bi-Monthly) Passed out a lot of gloves and socks to client. Tried working with multiple agencies to provide shelter temporarily for some of the clients living outside. This is going to be a ongoing battle but it has to happen.

MONTH: (2025)	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Open cases:	84	78										
3.5-9 µg/dL case mgt & follow-up: *	7/17	12/10										
10+ µg/dL case mgt & follow-up:	5/10	3/10										
Risk assessments:	5	2										
Orders issued:	3	1										
Clearances EBL:	2	1										
Clearances HUD:	9	13										
Owner meetings EBL:	1	0										
Owner meetings HUD:	1	1										
Compliance checks EBL:	38	32										
Compliance checks HUD:	3	3										
Contractor mtgs EBL:	0	0										
Contractor Meetings HUD:	0	2										
Filed for prosecution:	0	0										
LIRAs:	1	0										
Grant apps uploaded (ODH /ODD/HUD)	0	0/1										
Case Update w/ Lead Clinic:	9	8										

Affidavit of Fact	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.

February 2025 BOH Report
Emergency Preparedness/Safety

Meetings, Grants, and Employee Safety
Attended DHE Countering Weapons of Mass Destruction BioWatch Program Office Biodetection needs analysis meeting February 6.
Attended SWOPHR Emergency Response Coordinator Workgroup Meeting February 7.
Attended the Cincinnati World Cup BioWatch special event deployment meeting February 19.
Attended the BioWatch Kentucky Planning Team meeting for BioWatch deployment at Thunder over Louisville and Kentucky Derby February 19.

Training, Exercises, and Improvement Plans
Conducted a tabletop exercise with multiple CHD work units, Cincinnati Fire Department, Cincinnati Public Schools, and other partner agencies to test capabilities to respond to a chemical release in the City of Cincinnati, February 4.
Attended the Southwest Ohio Public Health Region Chempack exercise development meeting February 10.

Response/Preparedness Activities
No Activities to report.

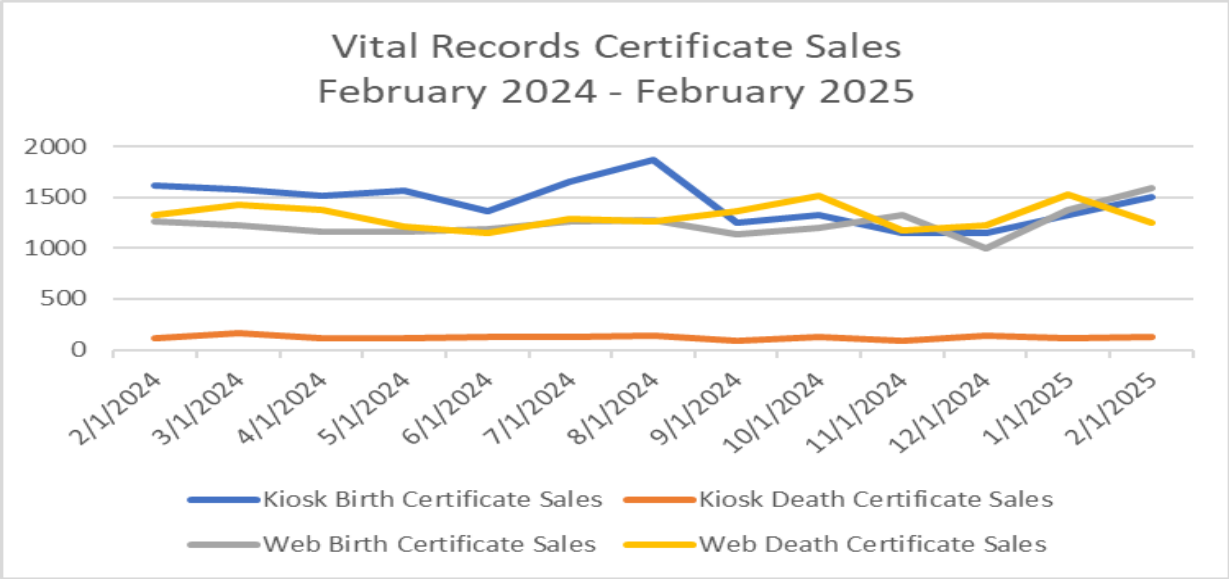
Vital Records received payment for 43 affidavits, where staff assisted customers with birth certificate corrections using the affidavit process.

Vital Records staff assisted 15 families with a paternity affidavit process to add the father to a birth certificate.

Vital Records received payments for 174 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.

February 2025	Kiosk	Web	Vitalchek.com	Mail
Birth Certificate	1497	1584	359	11
Death Certificate	131	1254	135	41
Total Payments	$35,591	$69,228	$8,034	$1,358



DATE: March 18, 2025

TO: Cincinnati Health Department Board of Health

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

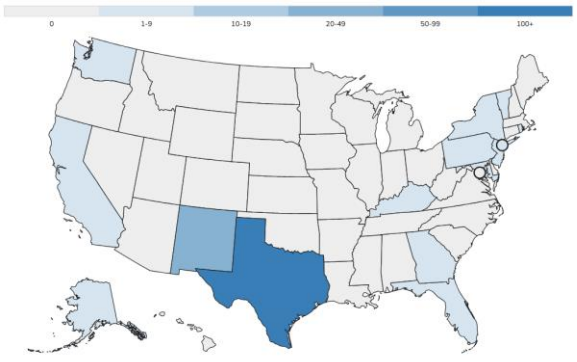
SUBJECT: March 2025 Board of Health Communicable Disease Report

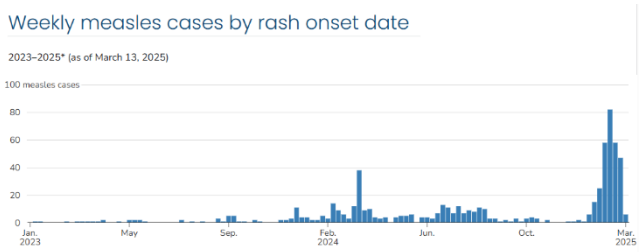
What's Bugging Us?

Measles

According to the Centers for Disease Control (CDC) as of March 13, 2025, a total of 301 confirmed measles cases were reported by 15 jurisdictions: Alaska, California, Florida, Georgia, Kentucky, Maryland, New Jersey, New Mexico, New York City, New York State, Pennsylvania, Rhode Island, Texas, Vermont, and Washington (this number does not include probable measles cases).

By comparison, there were a total of 285 confirmed cases reported in all of 2024. There have been 3 outbreaks (defined as 3 or more related cases) reported in 2025, and 93% of current cases (280 of 301) are outbreak-associated. For comparison, 16 outbreaks were reported during 2024 and 69% of cases (198 of 285) were outbreak-associated. Of the 2025 cases so far, 95% were not vaccinated or unknown vaccination status. There have been 50 hospitalizations and 2 deaths. As of this report, Ohio has not yet reported any confirmed cases in 2025. Cincinnati has only reported 2 cases of measles since it was eradicated in the United States in 2000. Both cases were associated with travel outside of Ohio, one occurred in 2001 and the last case that occurred in a Cincinnati resident was in 2012.





CHD Response and Preparedness Efforts

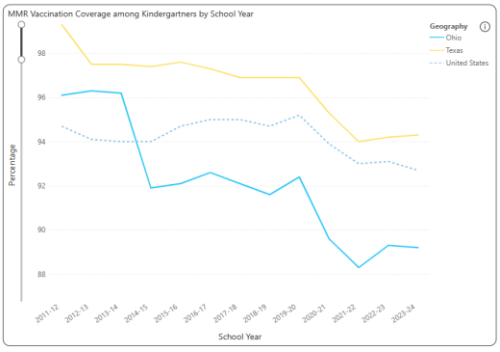
CHD responded to a very large number of measles exposures in 2024, which included 5000+ people exposed by an infectious person at a Disney on Ice event held at the Heritage Bank Center on March 8th of last year and Cincinnati residents who were exposed while traveling outside of the city. Fortunately, no new cases developed after the exposures in our

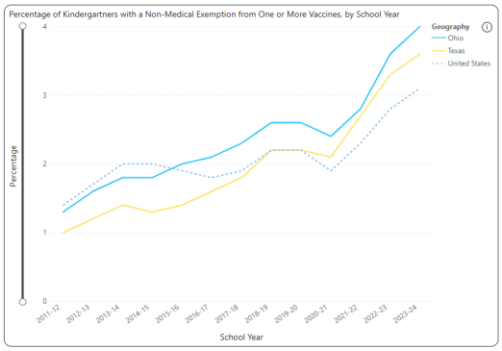
city in 2024. CHD's Communicable Disease Unit spent a lot of time last spring preparing for measles cases: working with our regional partners who held a provider education workshop, planning and participating in a measles tabletop with our school health team and Cincinnati Public Schools officials which helped identify resources that would be needed, communication channels, impact of isolation and quarantine, employee health and continuity of operations. CDU provided regular timely updates to our providers as well as regional updates, media advisories were issued when we needed to reach large numbers of people quickly who were exposed (such as at a local airport, or large event), surveys were created to collect information from large numbers of people, so they could be assessed by the health jurisdictions where they lived and monitored for symptoms, and an Epi-X was issued during the Disney on Ice exposure to alert other states to report cases that were associated with the event. Measles planning meetings were held with Cincinnati Children's Hospital Medical Center (CCHMC), the University of Cincinnati's Student Health team, and Xavier University, to name some of the ways CHD prepared for measles cases and outbreaks in 2024.

This year our commissioner has been a featured speaker during "Coffee with Colleagues" Measles Town Hall sponsored by CCHMC that took place March 13th. CDU nurses will continue to offer testing services for people who are being monitoring for symptoms after they have been exposed to measles, to help keep potentially infectious people out of our emergency rooms, where significantly more people might be exposed, continue to have planning and readiness assessment exercises with our local schools, explore outreach options to home schooled families and groups who may be hesitant to receive MMR vaccinations, and continue to share regular local updates with healthcare providers.

Immunization Rates and Exemptions

When considering the immunization rates of local kindergarteners, Ohio reported recently the immunization rate in Kindergartners entering school this year was only 85.4% of required immunizations and an estimated 88.3% MMR immunization rate down from 92.7% reported in 2024. Medical exemptions have remained steady, around .2% of Kindergartners in Ohio, while non-medical exemptions have risen from 1.3% in 2012 to 4.0% in 2024. For comparison, the below CDC School Vax View graphs illustrate MMR immunization trends and exemption trends in Ohio, Texas, and the United States. It is not clear to what extent Ohio schools are enforcing the requirements. These numbers do not reflect children who are home schooled or attend alternative non-accredited schools, so the true number is likely even lower.

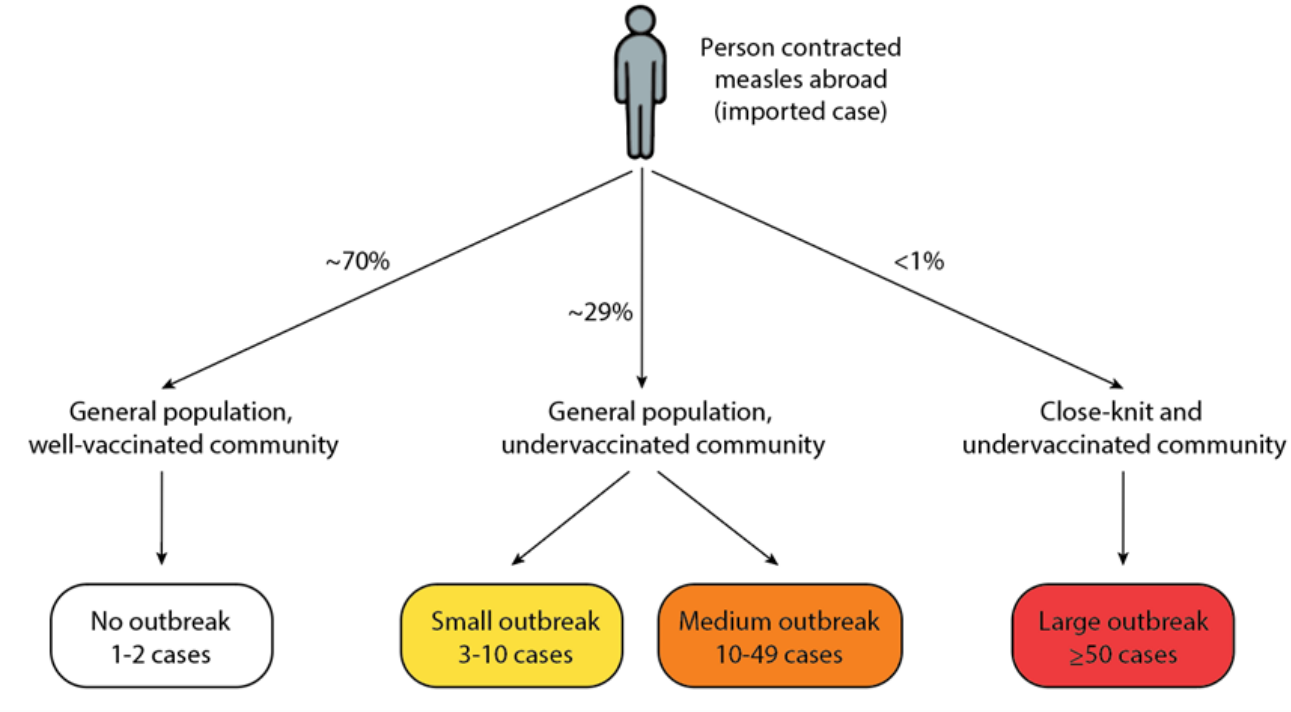




Preparing for Outbreaks

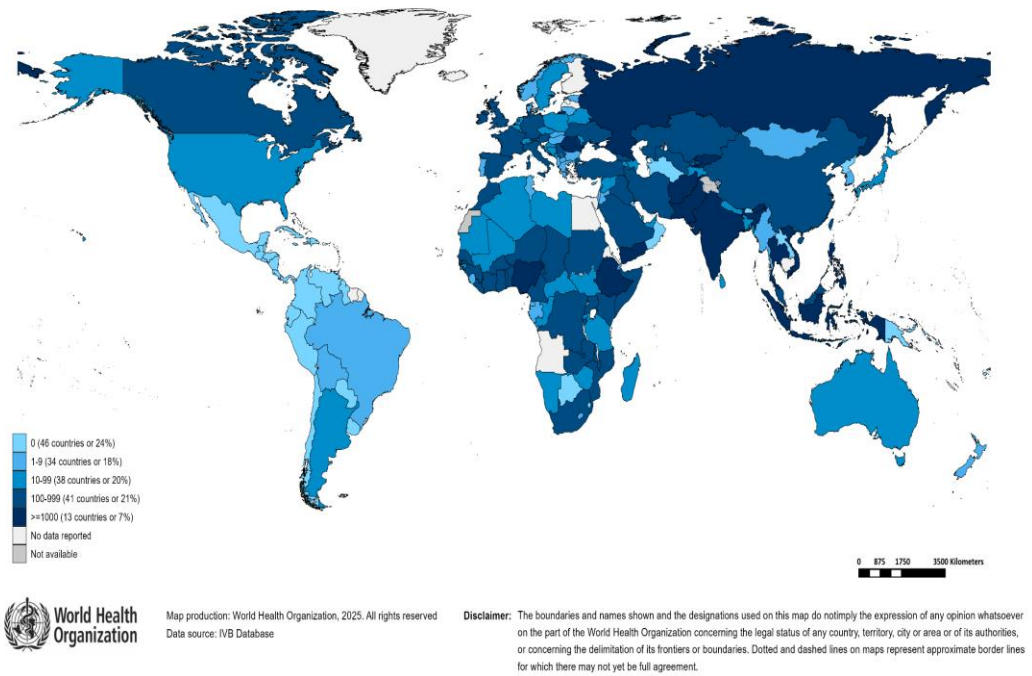
Could an outbreak happen in Cincinnati? According to outbreak forecasting guidance, outbreaks are more likely when there is more global measles activity occurring and the local immunization rates are below 95%. An outbreak is defined by the CDC as 3 or more cases associated with the same setting. With many people planning to travel during the Spring Break, odds are increasing that our jurisdiction may have a new imported case. The odds of

a large outbreak resulting from an imported case lie in how likely it is the unvaccinated segments of our population will be exposed.



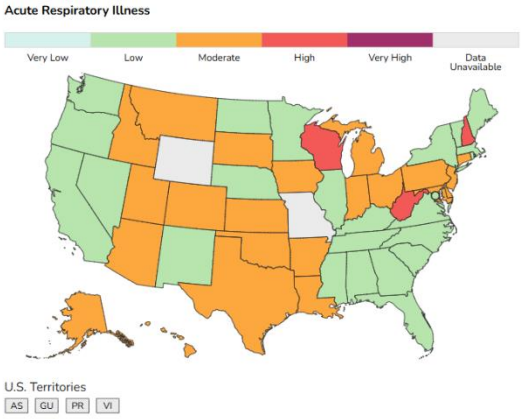
[Assessing Measles Outbreak Risk in the United States | NCIRD | CDC]

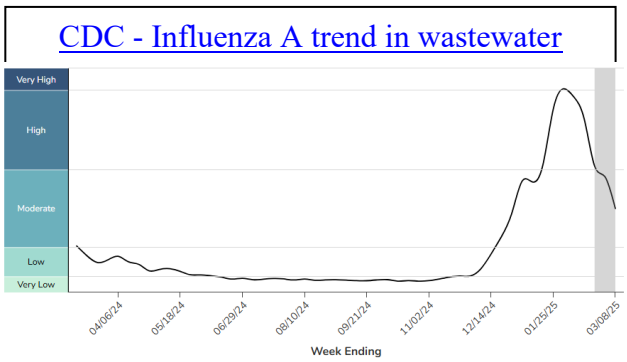
World Health Organization Measles: Global Measles Activity in the last 6 months



Seasonal Respiratory Viruses

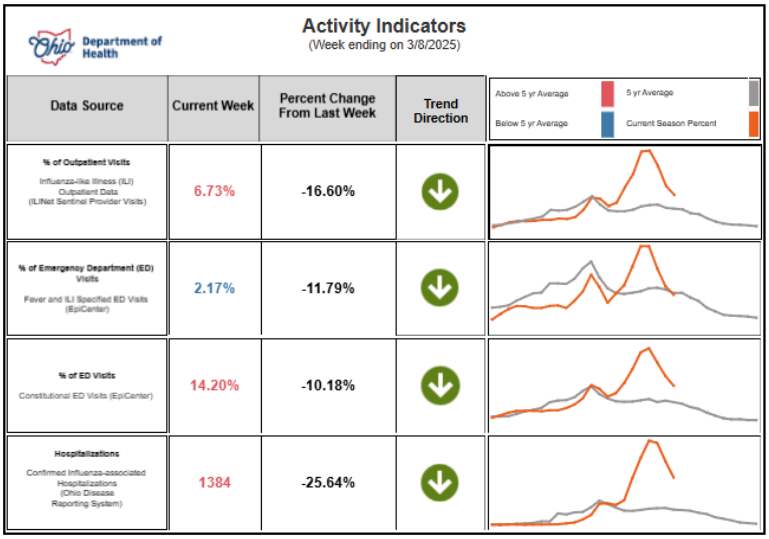
Acute Respiratory Illness is reported as moderate in Ohio as of the March 14, 2025 CDC update, down from very high levels levels reported last month. Nationally wastewater viral activity levels of influenza A are noted to be moderate and declining as well.





Data last updated on March 12, 2025 and presented through March 8, 2025. View this dataset on data.cdc.gov.

Influenza: CHD continues to track influenza-associated hospitalizations as an indicator of flu severity in the community. CHD reported 239 in the month of February. Last year there were 137 reported in February. ODH reports all influenza-like illness activity indicators are decreasing as of the update on 3/8/2025.



Outbreak Response

CHD's Communicable Disease Control and Prevention Unit investigated 13 outbreaks in February:

- 7 Influenza outbreaks (healthcare and school settings)
- 3 COVID-19 outbreaks (3 in healthcare settings)
- 3 Gastrointestinal illness outbreaks (healthcare and daycare settings)

CITY OF CINCINNATI COVID-19 REPORT

Updated 3/14/2025

KEY METRICS

TOTAL CASES	TOTAL DEATHS
95937	824
74697 Confirmed / 21240 Probable	705 Confirmed / 119 Probable

Total Hospitalized	Median Age	Age Range
3659	34	0 - 107
Males	**Females**	**Onset of Symptoms**
40508	54556	1/5/2020 - 3/12/2025

Active Cases	Recovered Cases
323	94773

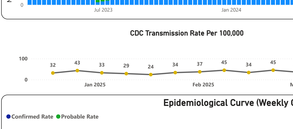
7 Day Cumulative New Cases Per 100,000: 25.7

DATA SHOWN FOR TODAY REFLECTS PAST 24 HOURS
*DATA IS PROVISIONAL CONTINGENT UPON COMPLETION OF CONTACT TRACING AND CONFIRMATION OF JURISDICTIONAL RESIDENCE
**IN ACCORDANCE WITH THE NEW CDC GUIDELINES, THE CDC EXPANDED (PROBABLE) CASE DEFINITION IS INCLUDED IN THIS REPORT. SEE: https://www.cdc.gov/coronavirus/2019-ncov/covid-data/faq-surveillance.html
***Presumed recovered cases is defined as cases with a symptom onset date/test date +21 days prior who are not deceased. Active cases are defined as cases with a symptom onset/test date +21 days.
****Jurisdictional transfers added based on the date they were originally reported to the local health department. These are not classified as new cases.
*****For more information including detailed maps of City of Cincinnati data, please visit https://insights.cincinnati-oh.gov/stories/s/VHF-5X9
******Transmission indicator based on CDC defined criteria
STATE DATA SOURCE: OHIO DISEASE REPORTING SYSTEM (ODRS)

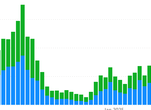
city of CINCINNATI HEALTH DEPARTMENT

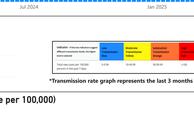
WEEKLY NEW CASE INFORMATION

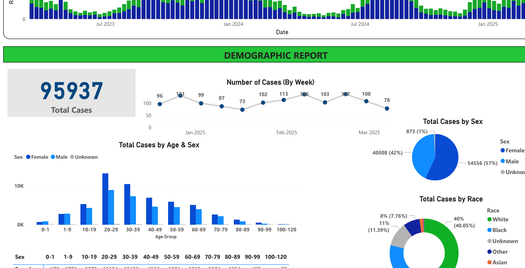
Total New Cases	New Confirmed	New Probable
78	50	28

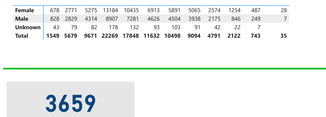


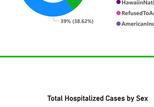
Sex	0-1	1-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89
Female	1	5	8	12	3	3	10	4		
Male	2	3	2	4	7	2	4	5	2	1
Total	2	4	7	12	19	5	7	15	6	1



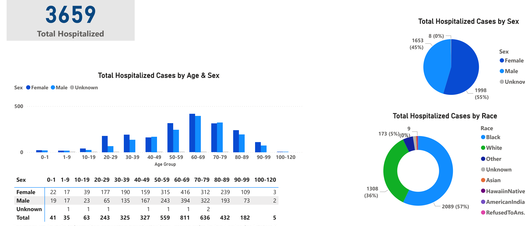






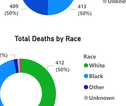


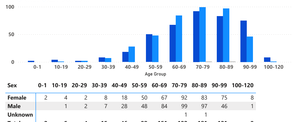
*Transmission rate graph represents the last 3 months

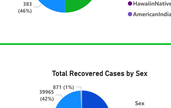


DEMOGRAPHIC REPORT

95937 Total Cases

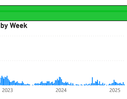


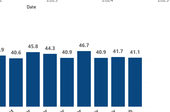




Sex	0-1	1-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90-99	100-120
Female	678	2771	5275	13184	10435	6913	5891	5065	2574	1254	487	28
Male	828	2829	4314	8907	7281	4626	4504	3938	2175	846	249	7
Unknown	43	79	82	178	132	93	103	91	42	22	7	
Total	1549	5679	9671	22269	17848	11632	10498	9094	4791	2122	743	35

3659 Total Hospitalized

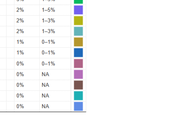




Sex	0-1	1-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90-99	100-120
Female	22	17	39	177	190	159	315	416	312	239	109	3
Male	19	17	23	65	135	167	243	394	322	193	73	2
Unknown	1		1			1	1	1	2			
Total	41	35	63	243	325	327	559	811	636	432	182	5

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

824 Total Deaths



Sex	0-1	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90-99	100-120
Female	2	4	2	8	18	50	67	92	83	75	8
Male		1	2	7	28	48	84	99	97	46	1
Unknown							1	1			
Total	2	5	4	15	46	98	151	192	181	121	9

94773 Total Recovered

Sex	0-1	1-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90-99	100-120
Female	673	2757	5254	13153	10393	6874	5808	4970	2457	1166	411	20
Male	819	2820	4166	8888	7256	4585	4443	3837	2061	740	200	6
Unknown	43	79	82	178	132	93	103	91	41	21	7	
Total	1535	5656	9642	22219	17781	11552	10354	8898	4559	1927	618	26

ADDITIONAL COVID-19 INFORMATION

%Hospitalized

3.8% of Total Cases

0.9% Case Fatality Rate

Regional COVID-19 Variant Report

The graphic below represents genomic surveillance by the CDC for the United States
Variant proportions can be found at https://covid.cdc.gov/covid-data-tracker/#variant-proportions
*Updated 03/14/2025

Weighted and Nowcast Estimates in United States for 2-Week Periods in 11/10/2024 – 3/1/2025

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

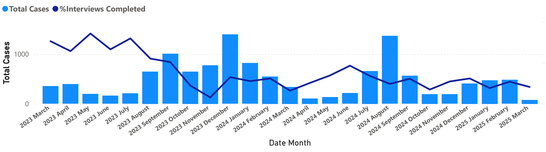
Nowcast Estimates in United States for 2/16/2025 – 3/1/2025

USA

WHO label	Lineage #	%Total	95%PI
Omicron	LF.8.1	42%	31–54%
	XEC	31%	24–38%
	KP.3.1.1	6%	3–9%
	MC.10.1	5%	2–12%
	MC.28.1	3%	1–12%
	LF.7	3%	2–4%
	XEC.4	3%	1–5%
	XEQ	2%	1–5%
	MC.1	2%	1–3%
	LB.1.3.1	2%	1–3%
	XEK	1%	0–1%
	MC.19	1%	0–1%
	KP.3	0%	0–1%
	KS.1	0%	NA
	LB.1	0%	NA
	KP.1.1.3	0%	NA
	KP.2.3	0%	NA

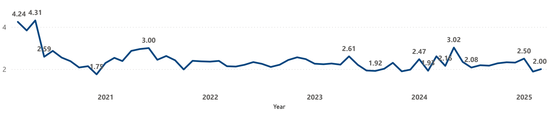
KEY METRICS

Total Cases and %Interviews Completed by Month



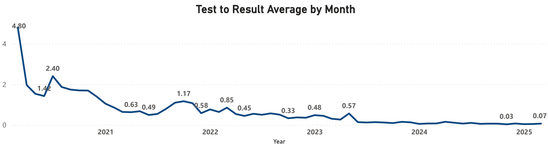
Year	%Interviews Completed	Total Cases
2020	57.1%	17113
2021	30.8%	32806
2022	27.7%	31805
2023	39.7%	7620
2024	31.3%	5557
Total	**35.2%**	**95937**

Symptom Onset to Test Average by Month



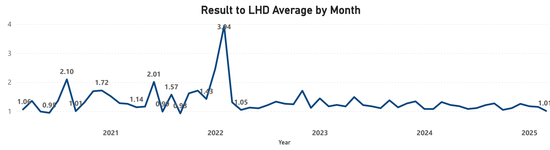
Year	Symptom Onset to Test Average
2020	2.43
2021	2.41
2022	2.30
2023	2.12
2024	2.25
2025	2.16
Total	**2.34**

Test to Result Average by Month



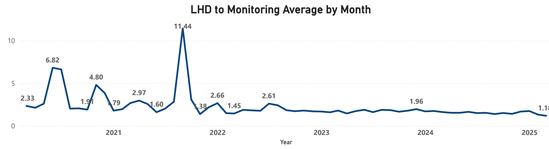
Year	Test to Result Average
2020	1.69
2021	0.84
2022	0.62
2023	0.23
2024	0.07
2025	0.05
Total	**0.82**

Result to LHD Average by Month



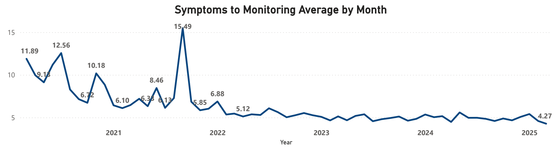
Year	Average of Result to LHD
2020	1.55
2021	2.06
2022	2.24
2023	1.59
2024	1.41
Total	**1.95**

LHD to Monitoring Average by Month



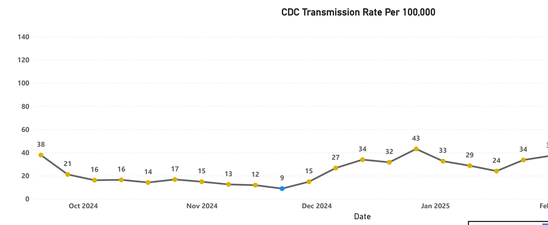
Year	Average of LHD to Monitoring
2020	4.16
2021	3.06
2022	2.09
2023	1.76
2024	1.57
Total	**2.86**

Symptoms to Monitoring Average by Month



Year	Average of Symptoms to Monitoring
2020	9.67
2021	7.32
2022	5.72
2023	4.90
2024	4.98
Total	**6.86**

CDC Transmission Rate Per 100,000

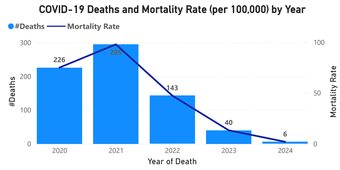


COVID-19 Mortality Data

710 #COVID-19 Deaths

39.26 Total Pop. Mortality Rate

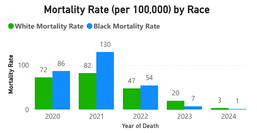
COVID-19 Deaths and Mortality Rate (per 100,000) by Year



37.27 White Mortality Rate

46.33 Black Mortality Rate

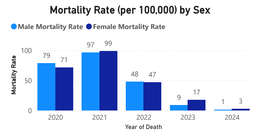
Mortality Rate (per 100,000) by Race



38.95 Male Mortality Rate

39.55 Female Mortality Rate

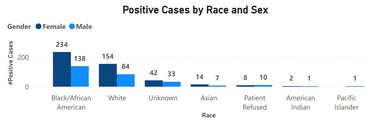
Mortality Rate (per 100,000) by Sex



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

City of Cincinnati Primary Care COVID-19 Information

Positive Cases by Race and Sex



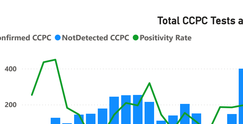
728 Total CCPC Confirmed Cases

5258 Total CCPC Tested

13.8% CCPC Positivity Rate

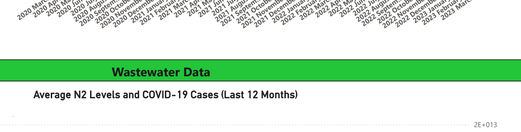
Positive Cases by Sex

Positive Cases by Race



Positive Cases by Age Group

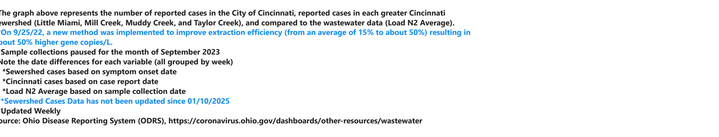
Total CCPC Tests and Positivity Rate



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

Wastewater Data

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



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

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

city of CINCINNATI HEALTH DEPARTMENT

Reportable Condition by Category[3]	2025 February	2025 Year to Date (YTD)	2024 February	2024 YTD	2024 Rate	Cincinnati 5 Year Average Rate (2020-2024)	Ohio 5 Year Average Rate (2019-2023)
Food- or Waterborne	**7**	**18**	**9**	**18**	***46.92***	***239.48***	***284.02***
Amebiasis					-	1.93	0.56
Brucellosis					-	-	0.12
Botulism					-	0.32	0.01
Campylobacteriosis	4	6	3	5	8.36	54.32	91.71
Cryptosporidiosis				1	6.11	20.89	20.73
Cyclosporiasis					0.32	1.29	3.68
E. coli, Shiga Toxin-Producing O157:H7					2.57	19.29	21.71
Giardiasis				2	4.50	24.43	16.49
Hepatitis A (*also vaccine-preventable*)					-	1.61	16.82
Hepatitis E					0.32	0.64	0.06
Legionellosis - Legionnaires' Disease	1	2	1	1	2.89	19.93	28.18
Listeriosis					-	2.25	1.42
Salmonellosis		2	1	2	10.93	52.72	59.04
Salmonella Typhi (travel associated)					0.32	0.64	0.36
Shigellosis		2	1	3	6.75	29.25	13.48
Vibriosis (not cholera)		2	1	1	0.64	1.93	2.55
Yersiniosis	2	4	2	3	3.21	8.04	7.10
Vectorborne		**1**	**4**	**5**	***5.46***	***16.38***	***34.07***
Chikungunya Virus Disease*					0.32	0.32	0.15
Dengue			1	1	0.64	0.96	0.31
Lyme disease					1.61	6.43	28.52
Malaria*		1	3	4	2.57	7.07	2.74
Spotted Fever Rickettsiosis					-	0.96	1.43
Ehrlichiosis-Ehrlichia chaffeensis					-	0.32	0.63
Anaplasmosis-Anaplasma phagocytophilum					0.32	0.32	0.29
Vaccine-Preventable	**252**	**371**	**143**	**235**	***121.18***	***474.12***	***323.84***
Hemophilus influenzae, invasive disease	2	2	1	1	2.25	14.46	11.19
Influenza-associated hospitalization	239	332	137	216	89.68	360.66	279.59
Mumps			1	1	0.32	1.29	1.20
Pertussis	7	17			12.54	16.07	20.79
Meningococcal disease – Neisseria meningitidis					-	0.32	0.44

S. pneumoniae, invasive (abx susceptible/unknown)	4	14	3	12	9.00	56.25	-
S. pneumoniae, invasive (abx resistant)		5	1	2	3.21	14.14	-
Varicella (chickenpox)		1		3	4.18	10.93	10.63
Viral Hepatitis	**51**	**107**	**35**	**73**	***147.86***	***1266.8***	***601.08***
Hepatitis B, acute *(also vaccine-preventable)*		1			2.57	8.36	5.58
Hepatitis B, chronic, newly identified *(also vaccine-preventable)*	6	17	3	13	28.61	189.33	81.84
Hepatitis B, perinatal					-	0.32	0.03
Hepatitis C, acute					0.32	13.18	8.93
Hepatitis C, chronic, newly identified	45	89	31	59	115.40	1050.15	504.70 (combined chronic and perinatal rate)
Hepatitis C, perinatal			1	1	0.96	5.46	
Healthcare Associated Infections (HAIs)[4]	**7**	**34**	**18**	**31**	***45.32***	***288.34***	***33.35***
Carbapenemase-Producing Organisms (CPO)	2	3	5	6	11.25	55.29	26.32
Candida Auris	5	31	13	25	34.07	233.05	7.03
Other Conditions	**658**	**1190**	**564**	**1523**	***1839.93***	***37132.45***	***31129.23***
COVID-19	654	1177	557	1505	1811.33	36976.57	31053.01 (3-year rate, 2020-2023)
Coccidioidomycosis		1		1	0.96	4.82	1.02
Creutzfeldt-Jakob Disease					0.32	0.64	0.96
Hemolytic uremic syndrome (HUS)							0.23
Meningitis, aseptic	2	3	1	2	6.11	22.82	17.15
Meningitis, bacterial (not *N. meningitidis*)			1	1	4.18	14.14	5.76
MPOX			1	2	0.96	10.29	3.57
Multisystem Inflammatory Syndrome in Children (MIS-C) associated with COVID-19					-	6.11	3.65
Staphylococcal aureus - intermediate resistance to vancomycin (VISA)					-	0.96	0.20
Streptococcal, Group A, invasive	2	8	4	9	11.25	71.04	34.40
Streptococcal, Group B, newborn					0.96	5.14	2.73
Toxic Shock Syndrome (TSS)					-	0.96	0.06
Tuberculosis[2]		1		3	3.86	18.64	6.49
Typhus Fever					-	0.32	-
Sexually Transmitted Infection[2]	**569**	**1270**	**478**	**982**	***1859.87***	***14579.68***	***4121.60***
Chlamydia infection	349	773	291	577	1109.62	8511.81	2465.52
Gonococcal infection	184	395	128	291	570.88	4704.96	1083.04
Human Immunodeficiency Virus (HIV)	9	31	15	27	46.93	334.62	344.30
Syphilis - congenital	1	1		1	1.61	7.71	2.27
Syphilis - early	9	16	10	21	28.93	262.62	-
Syphilis - primary	1	4	6	9	11.89	122.79	

Syphilis - secondary	3	16	7	15	19.61	194.79	67.56 (primary and secondary combined rate)
Syphilis – stage unknown	8	10	7	12	23.79	142.08	158.91 (total syphilis rate)
Syphilis – unknown duration or late	5	24	14	29	46.61	298.30	
TOTAL CONFIRMED AND PROBABLE CASES	**1544**	**2991**	**1251**	**2867**	***4066.58***	***53996.66***	***36527.13***
Outbreaks (Investigation Started)	**2025 February**	**2025 YTD**	**2024 February**	**2024 YTD**	**2024 Rate**	**Cincinnati 5 Year Average Rate (2020-2024)**	
Dermatologic		1	1	2	2.25	7.39	
Gastrointestinal	3	3	1	2	1.29	6.43	
Respiratory	10	16	14	24	23.79	315.98	
Other					2.25	2.57	
Unknown					-	0.32	
TOTAL OUTBREAKS (INVESTIGATION STARTED)	**13**	**20**	**16**	**28**	***29.57***	***332.69***	

1) Confirmed and probable cases reported by health care providers and laboratories among residents of the City of Cincinnati by date of event (most frequently, the date of event is the date of illness onset). *Cases acquired through international travel
2) Sexually transmitted infections, human immunodeficiency virus (HIV), and Tuberculosis cases are investigated and reported by the Hamilton County Public Health Department.
3) List includes only reportable conditions for which at least one case was reported in either year; the full list of reportable conditions in Ohio can be found at https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/infectious-disease-control-manual
4) Healthcare Associated Infections (HAIs) are infections that patients get while or soon after receiving health care. More information about HAIs can be found at https://www.cdc.gov/healthcare-associated-infections/about/index.html

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

CITY OF CINCINNATI ENVONMENTAL HEALTH REPORT

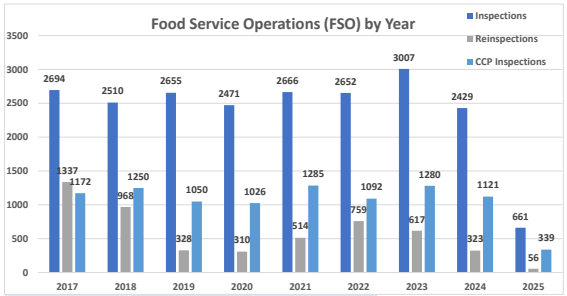
Environmental Health

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

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

FOOD INSPECTION PROGRAM

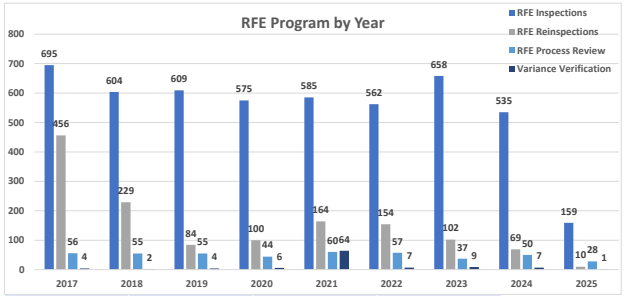
The Food Safety Program completed 2nd round inspections and are currently receiving license renewal fees, which are due March 3, 2025.



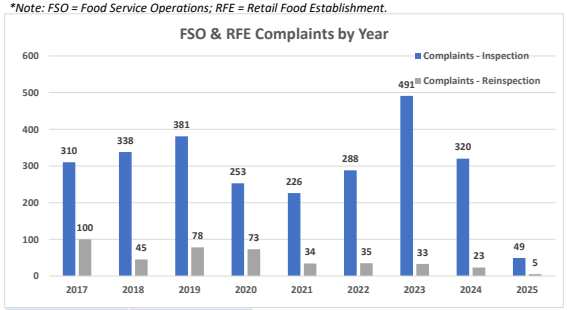
Inspections		Reinspections		CCP Inspections	
FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month
254	289	49	18	108	142

*Note: CCP = Critical Control Point Inspections.

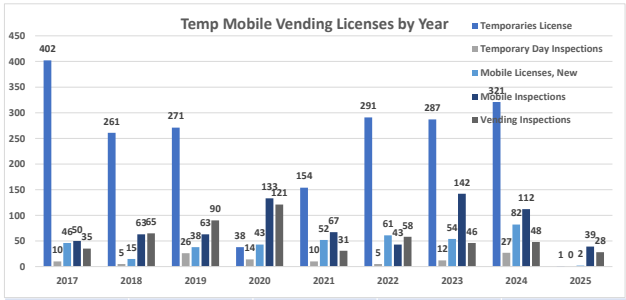
*Note: FSO = Food Service Operations; RFE = Retail Food Establishment.



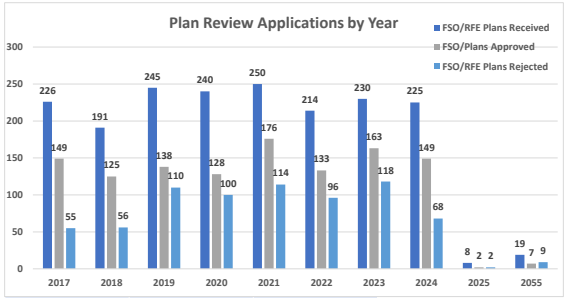
RFE Inspections		RFE Reinspections		RFE Process Reviews		Variance Verifications	
FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month
55	90	12	5	6	17	1	1



Complaints - Inspection		Complaints - Reinspection	
FEB Average	Total Last Month	FEB Average	Total Last Month
28	23	5	1



Temporaries Licenses		Temporary Day Inspections		Mobile Licenses, New		Mobile Inspections		Vending Inspections	
FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month
2	1	1	0	1	1	8	22	32	26

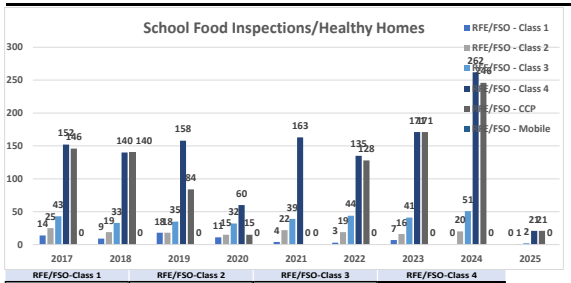


FSO/RFE Plans Received		FSO/RFE Plans Approved		FSO/RFE Plans Rejected	
FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month
19	0	11	0	8	0

ServSafe Training Classes		PIC Training Classes	
FEB Average	Total Last Month	FEB Average	Total Last Month
0	0	1	0

HEALTHY HOMES PROGRAM

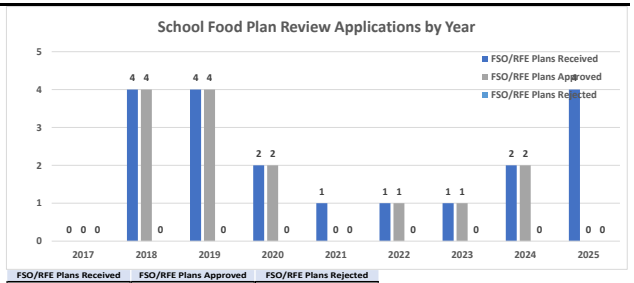
A Healthy Homes staff member presented at city hall to high school students for a career day. We are continuing to work on building the platform for CagisEdge/Accela.



RFE/FSO-Class 1		RFE/FSO-Class 2		RFE/FSO-Class 3		RFE/FSO-Class 4	
FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month
0	0	0	1	0	1	3	4

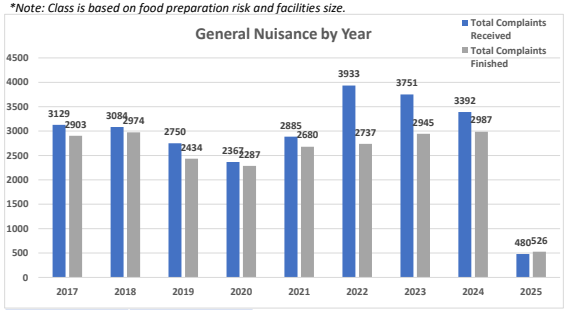
RFE/FSO-CCP		RFE/FSO-Mobile	
FEB Average	Total Last Month	FEB Average	Total Last Month
0	4	0	0

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

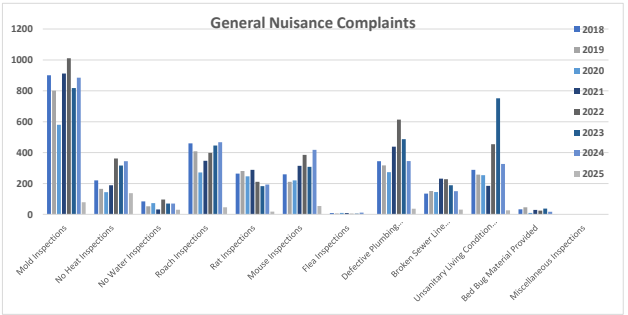


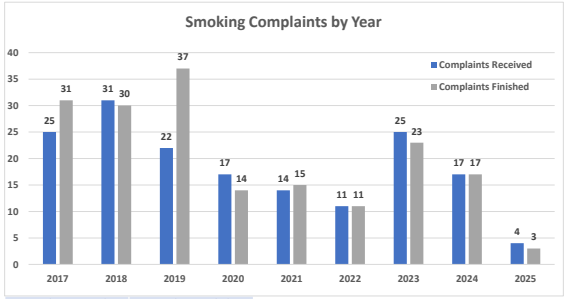
FSO/RFE Plans Received		FSO/RFE Plans Approved		FSO/RFE Plans Rejected	
FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month
0	4	0	0	0	0

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



Complaints Received		Complaints Finished	
FEB Average	Total Last Month	FEB Average	Total Last Month
203	184	204	229



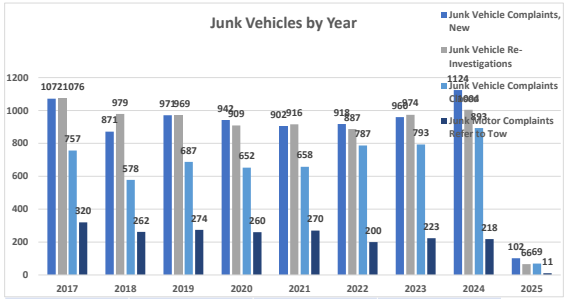


Complaints Received		Complaints Finished	
FEB Average	Total Last Month	FEB Average	Total Last Month
2	3	2	2

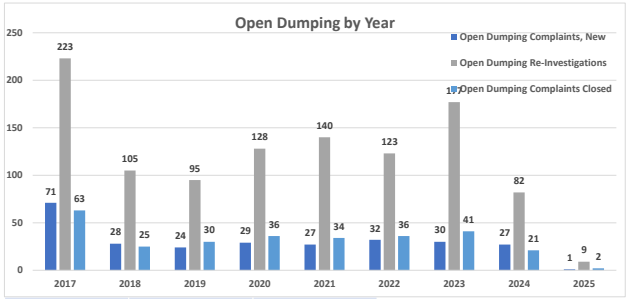
**Note: This data reflects the number of complaints received for the entire city*

ENVIRONMENTAL WASTE PROGRAM

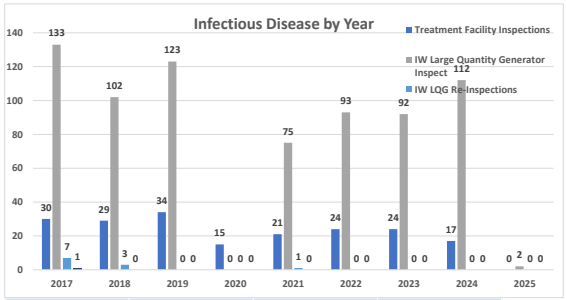
The Waste Unit licensed one Temporary Body Art Event that took place in February at the Rhinegiest Brewery. One new Body Art Establishment was licensed.



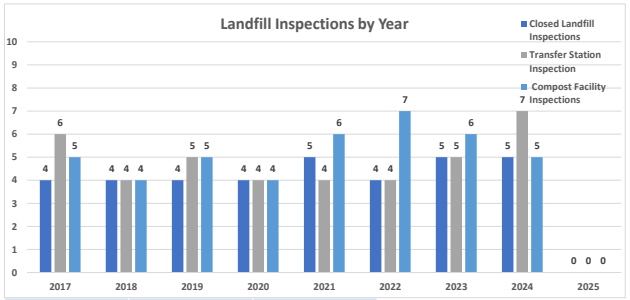
Junk Vehicle Complaints, New		Junk Vehicle Re-investigations		Junk Vehicle Complaints Closed		Junk Motor Complaints Refer to Tow	
FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month
63	67	62	40	49	40	15	9



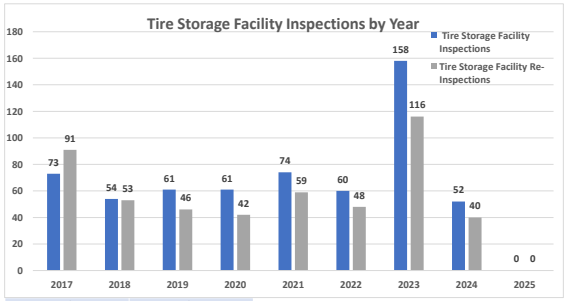
Open-Dumping Complaints		Open-Dumping Re-Investigations		Open-Dumping Complaints Closed	
FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month
3	1	7	5	2	0



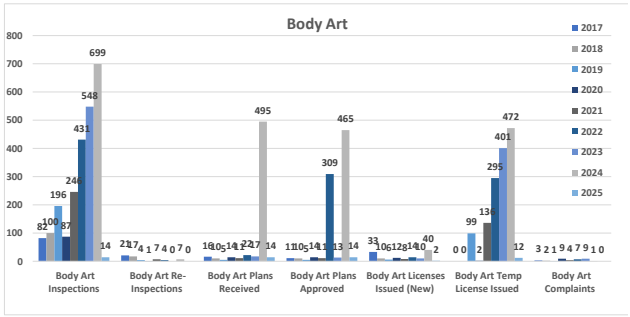
Treatment Facility Inspections		IW Large Quantity Generator Inspections		IW LQG Re-Inspections		IW Complaints	
FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month
0	0	2	2	0	0	0	0



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



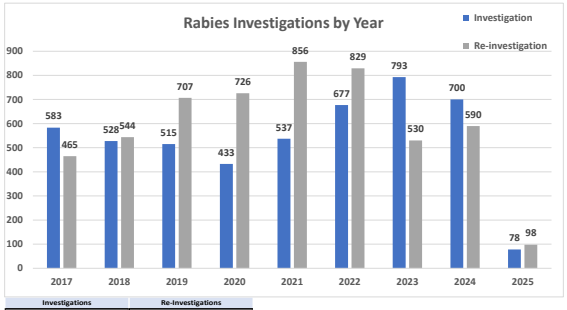
Tire Storage Facility Inspections		Tire Storage Facility Re-Inspections	
FEB Average	Total Last Month	FEB Average	Total Last Month
1	0	0	0



TECHNICAL ENVIRONMENTAL SERVICES (TES)

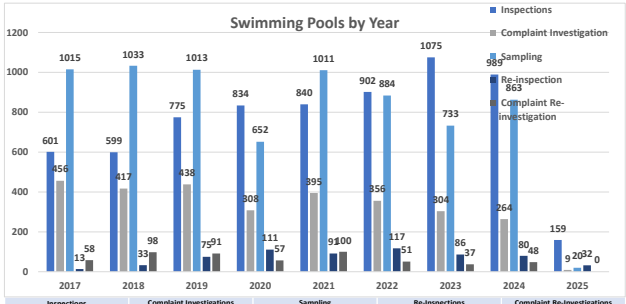
The Technical Staff was trained and received streetcar track access badges ahead of downtown sewer baiting. The Supervisor presented on TES programs at the February Board meeting.

Rabies Investigations by Year



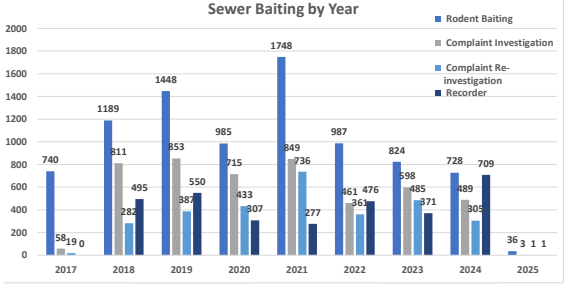
Investigations		Re-Investigations	
FEB Average	Total Last Month	FEB Average	Total Last Month
39	42	35	35

Swimming Pools by Year



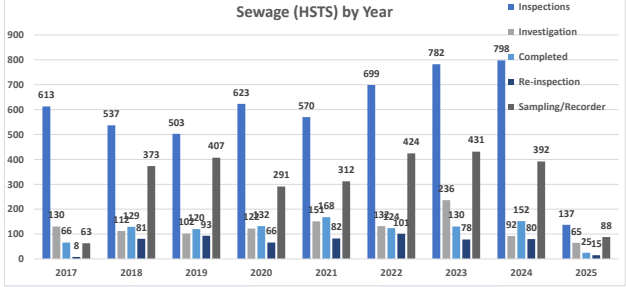
Inspections		Complaint Investigations		Sampling		Re-Inspections		Complaint Re-Investigations	
FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month
34	85	4	5	4	10	5	17	4	0

Sewer Baiting by Year



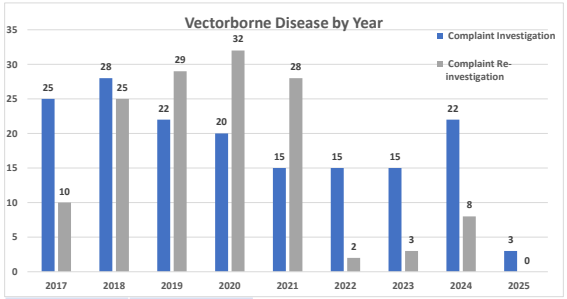
Rodent Baiting		Complaint Investigations		Complaint Re-Investigations		Recorder	
FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month
42	24	27	1	16	0	17	0

Sewage (HSTS) by Year



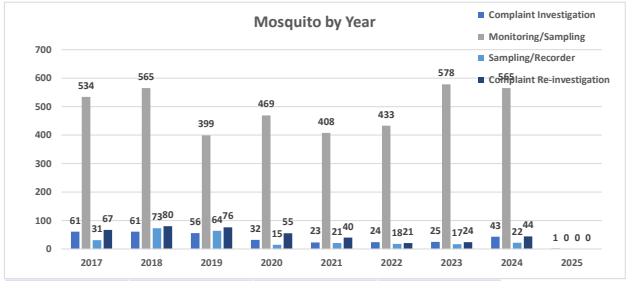
Inspections		Investigations		Completed		Re-Inspection		Sampling/Recorder	
FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month	FEB Average	Total Last Month
57	76	55	62	29	25	9	4	57	49

Vectorborne Disease by Year



Complaint Investigations		Complaint Re-Investigations	
FEB Average	Total Last Month	FEB Average	Total Last Month
1	1	2	0

Mosquito by Year



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