

2019 – Closing a Decade ... and a Century

It's often said that as we age, time seems to pass more quickly. That certainly seems to be the case as we close 2019 and wrap up yet another decade of public health service, not to mention a century in Hamilton County. But, more on that later.

The 10-year period between 2010 – 2019 has seen significant progress and change in the roles and operation of public health. The Centers for Disease Control and Prevention (CDC) characterizes public health as *the science of protecting and improving the health of people and their communities. This work is achieved by promoting healthy lifestyles, researching disease and injury prevention, and detecting, preventing and responding to infectious diseases.*

While these fundamentals remain the same, the way we go about protecting and promoting good health has changed markedly over the last decade. For instance, early in the decade, Hamilton County Public Health launched its WeTHRIVE! initiative to jump-start the battle against obesity while promoting physical activity and other healthy practices.

WeTHRIVE! creates a culture of health, safety, and vitality throughout Hamilton County. What started with 50 people in three priority communities in 2009 has expanded to impact more than 300,000 people throughout 26 communities. This still-growing movement, which provides a framework to communities for healthy living, is a result of sustainable thinking from the start.

During the early part of the decade, the Affordable Care Act became law. This legislation provides access to critical healthcare services, often for some of the most vulnerable members of society. Critical healthcare services for those previously unable to receive it is good for not only those receiving the care, but also for everyone around us.

The last decade also introduced many of us to some of the most difficult economic times of our lives. A “perfect storm” in a downturn in the economy and a lingering recession caused many of us in public service to do more with less while finding ways to increase efficiency. Hamilton County Public Health responded by realigning our inspection territories and services to make the best use of reduced funding while continuing to maintain the top-notch service our citizens and licensees expect and deserve. We also continued to increase our use of technology, making neighborhood-level health data available on our website to be used by individuals and communities to advance healthy practices.

National accreditation for public health departments became a reality during the decade. Hamilton County Public Health completed the intensive process, becoming the first public health agency in Southwest Ohio to achieve this designation. Part of the accreditation process included completing a community health needs assessment. We also brought in key influencers in our County, from healthcare and community leadership to non-profit representatives, to help us shape our response to the assessment. The Public Health Advisory Council ensures that we consistently consider the needs of all when developing healthy policies and practices.

Fighting Disease

Infectious disease prevention continues to be at the core of the services we provide. *Cincinnati Magazine* perhaps said it best as they covered our tuberculosis (TB) program: “It’s always impressive when a public health crisis is averted before the public even knows it exists.”

As times have changed and we have become a more global society, some of the diseases of the past have made their way back into our view. We have seen active TB cases in some of our immigrant communities, which is always a critical challenge. We have also seen a resurgence in diseases like measles and mumps, largely among unvaccinated communities. This resurgence further solidifies the need for comprehensive vaccination education and administration. Regardless of the decade, we cannot take our eye off the ball when it comes to infectious disease. We must remain diligent in our vaccination programs to move toward eradication of these preventable diseases.

While we're discussing infectious disease, the last decade found us faced with a potentially catastrophic disease in the Ebola outbreak on the African continent. Public health put on a full court press to understand the disease and put procedures in place for healthcare and the public, should a case of the disease reach Hamilton County. We drilled preparedness exercises, worked closely with our partners in healthcare, and set up cooperative networks to deal with every eventuality. Fortunately, we have not seen Ebola in Hamilton County, but given the transient nature of our society, a case showing up here is not out of the question. Given the work that has gone into preparing for this disease, we are confident that systems are in place to minimize harm.

We were also faced with a mosquito-borne disease that has not yet made its way to southwestern Ohio – Zika. The mosquito that carries the Zika virus has not yet been found in Hamilton County. However, the mosquitoes are close enough to have caused us to prepare for its possible arrival. Similar to the preparation we were part of with Ebola, public health learning and preparedness increased exponentially so that if we are faced with this virus, we will know how to react.

Another disease that has risen to the top of public health concern is the chronic disease of addiction. Our Narcan Distribution Collaborative has distributed more than 20,000 doses since the program began, in an effort to blanket the region with this overdose-reversing drug. Overdose deaths have begun to decline during the past year, however, we still have a long way to go.

In the area of syringe services, The Exchange Project has distributed well over 600,000 syringes over the past two years. Each syringe exchanged means one fewer syringe on the street or playgrounds, reducing the damage caused by accidental needle contact. As a result, our cases of hepatitis A have declined from the outbreak status declared early in 2019. New HIV infections in Hamilton County have also declined.

The fight against opioid use disorder is a marathon, not a sprint. While we have started to bring overdose and secondary infection numbers down, there is still much to do. We need to continue to expand treatment capacity and make sure that those suffering from opioid use disorder can get into treatment when they are ready. Medically-assisted treatment is the “gold standard” in fighting opioid use disorder. The more treatment opportunities available, the more people we can get into recovery.

As I mentioned, disease prevention is at the core of public health practice. I would be remiss if I didn't mention the diseases caused by tobacco use. The past decade ushered in some powerful new laws designed to reduce the risks of tobacco use and prevent youth from acquiring the habit. The Smoke Free Workplace Program requires places of employment and public venues to be smoke free. The recently-enacted Tobacco 21 legislation raises the legal age for tobacco purchase to 21. Both of these are significant steps to reducing the damage caused by tobacco. We still have a long way to go, but these are encouraging steps.

Oral Health

Research has identified significant links between oral infections and a host of diseases, including cardiovascular disease, stroke and diabetes. In fact, studies show that nearly half of U.S. adults are affected with periodontitis (periodontal or gum disease) and more than 90 percent of us have dental caries (cavities).

We have introduced an Oral Care Coalition to take a deep dive into the cause and effect of poor oral health and lack of access to dental care. The Coalition has developed a comprehensive plan, which we will launch in 2020 with the intent to begin bringing oral care up to the standards for general health care.

Health Equity

Health equity is a principle by which everyone is able to achieve their maximum level of health. While this sounds simple, there are many barriers. These include income, where you live, race, and a host of other factors.

Public health values every person equally. Everyone deserves access to health care and healthy living practices, regardless of social status. I urge you to visit our website (hcph.org) and look for our health equity report – the first of its kind in Hamilton County. This report took an in-depth look into the factors affecting health and provides an excellent roadmap for reducing the inequities inherent in our society. Public health is working to level the playing field for everyone. After all, good health should be attainable for all.

Environmental Hazards

Environmental hazards are also areas for public health concern. The past decade saw us jump into action in two particular environmental cases. The first was an oil spill at the Glen Oak Nature Preserve in western Hamilton County. We were part of a remediation team that worked to ensure air and water quality in the aftermath of the spill.

Western Hamilton County is also the location of a recreational facility that accumulated a considerable amount of potentially harmful lead from shooting activities. Hamilton County Public Health worked closely with environmental partners to guide the clean-up efforts and return the facility to safe, usable status.

Hamilton County Board of Health

What we do certainly could not be accomplished without the support and leadership from the Board of Health. Current members are: Dr. Kenneth Amend, Jim Brett, Dr. Elizabeth Kelly, Tracey Puthoff, Esq., and Mark Rippe. During the last decade, Tom Chatham retired from the Board and we thank him for his service.

The Board of Health develops and passes regulations that affect the health of Hamilton County. The last 10 years have seen our Board pass regulations dealing with school environmental safety; adding medical gas inspections to our service offerings; and overhauling sewage regulations.

100 Years of Public Health

Finally the end of this decade also marked 100 years of service for Hamilton County Public Health and public health departments across Ohio.

The first meeting of the Hamilton County Board of Health occurred September 26, 1919, following passage of Ohio's Hughes Law and the Griswold Act. The Griswold Act created minimum requirements for local health departments in every community of the state and became the operational foundation for the Hamilton County General Health District.

Prior to 1919, each municipality or township in Ohio operated as its own health district, employing part-time, little-educated public health employees on salaries averaging \$4-10 per week. More than 2,100 health districts existed in Ohio in the first two decades of the 1900s, with little oversight from the State Board of Health.

Since 1919, public health in Ohio, as well as the rest of the U.S., has been credited with a litany of life-changing initiatives. Average life expectancy in the 20th century increased by 30 years. The CDC attributes 25 years of this increase directly to public health.

At the dawn of the 20th century, infectious diseases like smallpox, diphtheria, typhoid, polio and cholera were common. Public health began a massive effort toward vaccination and sanitation. That's precisely why we seldom hear about these diseases today.

In the early part of the century, maternal and infant mortality were commonplace. Public health and its initiatives behind improved hygiene and nutrition, availability of antibiotics, access to health care, and advances in maternal and neonatal medicine have decreased infant mortality by 90 percent and maternal mortality by 99 percent.

What about tobacco use? Many of us remember the days when smoking was glamorized, physicians recommended cigarette brands and advertising touted the benefits of smoking. How times have changed! Since the groundbreaking 1964 U.S. Surgeon General report on smoking, attitudes have shifted and smoking is no longer the socially-accepted habit of the past. Millions of lives have been lengthened by reduction in tobacco use.

The automobile certainly became a way of life for Americans in the 20th century. Public health has been a leader in championing safer automobiles, from engineering practices to seatbelts to car seats for children.

These are just a few of the public health initiatives implemented over the past 100 years. There are many others. However, public health does not have the luxury of resting on our laurels. The next 100 years will provide significant and complex challenges as we continually work to create a healthier environment and ultimately, continue to lengthen lives.

Stay healthy!

Tim Ingram
Hamilton County Health Commissioner

2019 Program Highlights

Community Health

Birth Records Issued	11,810
Death Records Issued	23,005
Communicable Diseases Reported	1,874
Communicable Disease Outbreaks	67
Emergency Medicine Points of Dispensing Sites	92
Tuberculosis Screenings	1,270
Active Cases of Tuberculosis	64
Harm Reduction	
Number of Visits	12,836
New Clients Served	6,389
Syringes Exchanged	318,921
HIV Tests Administered	467
Hepatitis C Tests Administered	265
Referrals to Treatment	38
Current Exchange Locations/Added	8/3
Narcotic Distribution Collaborative	
Doses Distributed	29,252
WeTHRIVE! Communities/Added	26/2

Environmental Health

Backflow Surveys Completed	71
Food Service Inspections	5,749
Food Safety Training – Individuals Trained	1,109
Lead Investigations Completed	12
Medical Gas Inspections	129
Nuisance Inspections	2,258
Plumbing Permits Issued	3,847
Rabies Quarantine Notices Sent	745
School Inspections	308
Sewage Treatment System (STS)	
Inspections/Re-inspections	14,567
Swimming Pool/Spa Inspections	1,205
Tattoo/Piercing Facility Inspections	44
Waste Facility Inspections	352

Frequently Requested Information

Customer Service and Important Phone Numbers

Main Number	(513) 946-7800
Administration/Health Commissioner's Office.	(513) 946-7822
Main Fax	(513) 946-7890

Web and Social Media

Hamilton County Public Health Online	www.HCPH.org
Follow us on Twitter	@HamCoHealth
Join us on Facebook	www.fb.com/HamCoHealth
YouTube	www.youtube.com/HamCoHealth
WeTHRIVE! SM	www.WatchUsThrive.org

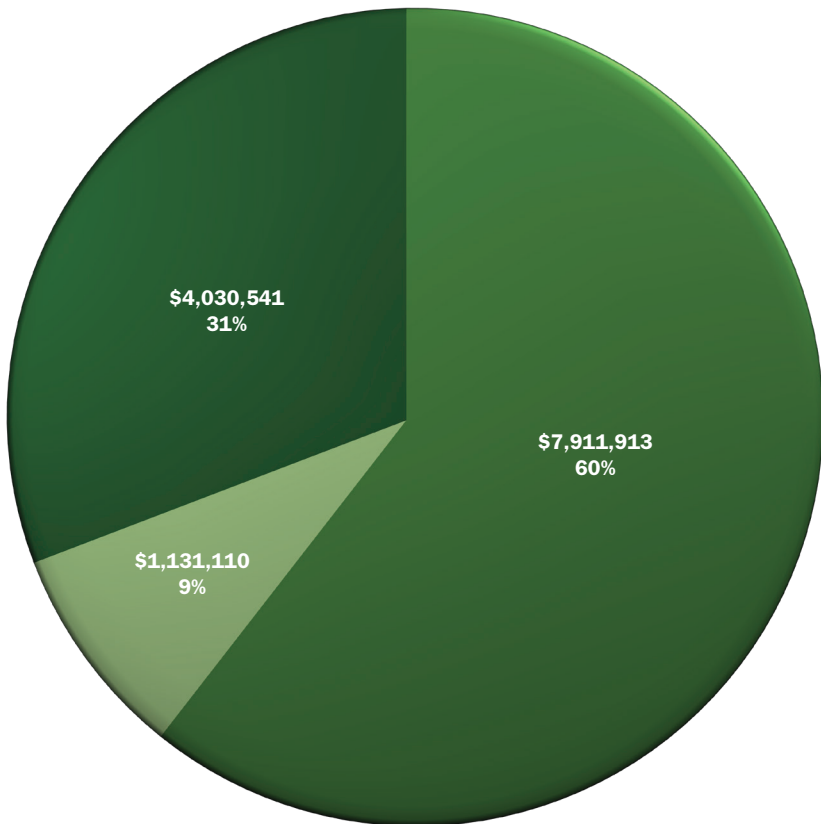
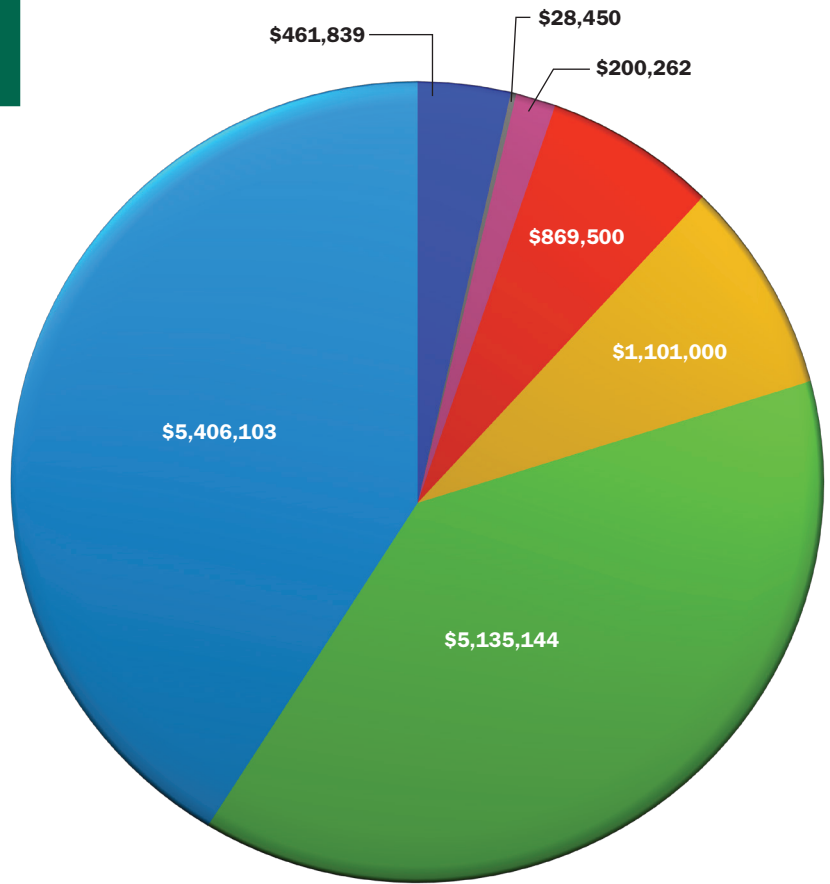


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2019 Revenues & Expenditures

2019 REVENUES

● Fees & Permits	\$5,406,103
● Grants & Contracts	\$5,135,144
● TB Control-Indigent Care Levy /Levy for Harm & Oral Care.	\$1,101,000
● Cities, Townships, Villages	\$869,500
● State Subsidies	\$200,262
● Donations	\$28,450
● Other Revenue	\$461,839
Total Revenues	\$13,202,298



2019 EXPENDITURES

● Personnel Services	\$7,911,913
● State & Other Agency Fees	1,131,110
● Operating Expenses.	4,030,541
Total Expenditures	\$13,073,564