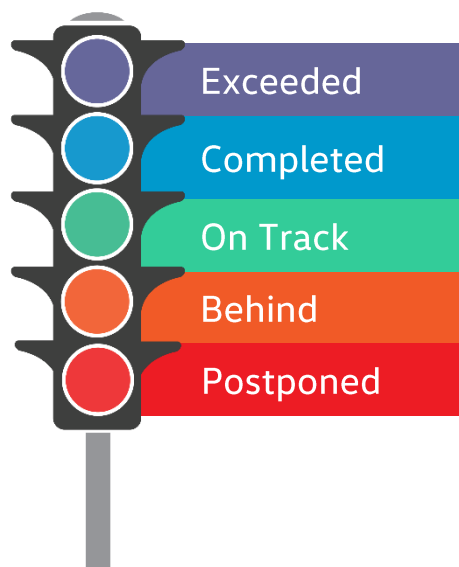


PROGRESS REPORT KEY:



Exceeded: Above benchmark.

Completed: Benchmark met.

On Track: Progressing as anticipated.

Behind: Behind benchmark.

Postponed: Delayed or re-prioritized.

QUARTERLY PROGRESS REPORTING | OVERALL PRIORITY STATUS

	PRIORITY AREA 1: CHRONIC DISEASE & OBESITY	
	PRIORITY AREA 2: MATERNAL, INFANT, & CHILD HEALTH	
	PRIORITY AREA 3: MENTAL HEALTH & ADDICTION	
	PRIORITY AREA 4: HIV & SEXUALLY TRANSMITTED INFECTIONS	
	PRIORITY AREA 5: ORAL HEALTH	





PRIORITY AREA 1 – CHRONIC DISEASE & OBESITY

STATUS

GOAL 1: More people in Hamilton County will have access to healthy foods and safe opportunities for physical activity.

Healthy eating and active living strategies are primarily operationalized through Hamilton County Public Health's (HCPH) WeTHRIVE!SM initiative ([WatchUsThrive.org](https://www.watchusthrive.org)). Staff who work with the WeTHRIVE! communities, schools, and child care providers began reviewing population and health data to assist in determining the priority communities for engagement in place-based healthy eating and active living strategies as part of the CHIP pilot. Priority communities will be selected during the next progress period. Grant funding that supported the WeTHRIVE! child care initiative ended on 9/30/2020. Staff are developing a plan to keep the child care work moving forward without funding. The CHIP pilot will be an opportunity to trial identified child care sustainability strategies, as well as to identify ways to better integrate child care providers into WeTHRIVE! community and school efforts. Lastly, staff continued to identify creative ways to engage WeTHRIVE! communities while also providing support to HCPH's response to the COVID-19 pandemic. A [resource list](#) was developed and shared on the WeTHRIVE! website, which included resources for physical activity, nutrition, basic needs, mental health services, among others. An email was received from a family thanking the staff for the COVID/physical activity resource, which provided creative ways to stay safe and active over the summer.



GOAL 2: Fewer people in Hamilton County will report using tobacco products.

Tobacco-free living strategies are operationalized through a grant from the Ohio Department of Health (ODH) and HCPH's WeTHRIVE! initiative. The tobacco public health educator was re-assigned to coordinate contact tracers for COVID-19, which slowed progress during the reporting period. Other public health educators provided support during this transition process in an effort to keep tobacco-related work moving forward. One tobacco counter-marking campaign focusing on exposures to secondhand smoke; 97,399 media impressions were documented. A new public health educator was hired mid-August to implement tobacco-free strategies within priority communities identified in HCPH's Tobacco Prevention & Cessation grant from ODH. Having a full-time staff person will facilitate greater progress during the next progress period.





GOAL 1: More babies in Hamilton County will celebrate their first birthday.

The Ohio Equity Institute (OEI) addresses key drivers of inequities in infant mortality and prioritizes the populations most vulnerable to experience poor birth outcomes. OEI Navigators continued utilizing online outreach efforts, as well as phone/video intakes as a way to continue offering services during the COVID-19 pandemic. The OEI Navigators documented 614 hours of outreach during the progress period and reached 1,448 individuals through various outreach methods. Seventy-three pregnant women were screened for eligibility, of which 69 were eligible for navigation services. The OEI grant year ended on 9/30/2020. The total number of women served during the grant year was 204 – a 217 percent increase in number of women served from the previous grant year! In addition, 86 percent of pregnant women served were African American (priority population for OEI navigation services). Success, in part, is attributed to a new partnership with UC Health, where an OEI Navigator enrolls pregnant women that visit the emergency room into navigation services. The follow-up process of the UC Health OEI Navigator was adapted to allow for support from HCPH's OEI Navigators to complete some of the follow-ups in an effort to manage caseloads and increase communication among the OEI Navigators to ensure the pregnant moms are best supported. OEI Navigators distributed cloth masks during community outreach. COVID-19 Contact Tracers referred pregnant women to OEI Navigators and made them aware of available navigation services. Additionally, the Cradle Cincinnati Policy Committee signed letters in support of SB 238 (Medicaid coverage for doula services), SB 327 (implicit bias in healthcare), and SB 326 (designating May as Maternal Mortality Awareness month). Pregnant women and their families successfully utilized the first 50 Housing Choice Vouchers from the Cincinnati Metropolitan Housing Authority (CMHA). An additional 50 vouchers were committed by CMHA; however, financial impact of COVID-19 significantly impacted the roll-out process. The committee is working with CMHA to improve the process for accessing the vouchers, ways to secure additional funding, as well as other opportunities to improve the housing and eviction crisis in Cincinnati worsened by the COVID-19 pandemic.



During the progress period, the Fetal and Infant Mortality Review (FIMR) team continued to improve the program's data management system. HCPH staff involved in maternal and child health work were recruited to join an in-house team to resume case reviews. The FIMR team also developed a no-contact maternal interview process. As such, the FIMR team reviewed 8 cases and completed 3 maternal interviews.

All Child and Fatality Review (CFR) activities remained on pause. The intention is to utilize a secure virtual platform to resume CFR case reviews during the next progress period. Confidentiality agreements will be updated to reflect the virtual format and signed by CFR case review team members before activities resume.





GOAL 1: Fewer Hamilton County residents will die of opiate-related overdose deaths.

During the progress period, 820 Narcan® kits were distributed to first responders, community members, and through mail order request. A partnership with the Hamilton County Sheriff's Office, Healing Communities, Talbert House, and One City for Recovery to visit inmates weekly to determine interest/need for Narcan® continued. This partnership is also working to expand distribution to those recently released through various courts. HCPH was awarded a two-year Naloxone Infrastructure grant from ODH to provide additional Narcan® kits for targeted distribution. Additionally, grant was received from Interact for Health to expand harm reduction services into Price Hill in an effort to reach African American and LatinX communities.

HCPH's harm reduction staff continued to build out the peer workforce development program as part of the Overdose Data to Action (OD2A) grant. There will be five cohorts for the year; each cohort will last approximately 6-9 months in length depending on need. The first cohort of 10 participants will begin on 10/5/2020. There were so many program referrals that additional referrals were put on hold; the first three cohorts are already full!

Five community focus groups were held in Price Hill and facilitated by community partner, Cohear. Results will be used to inform efforts to engage the community in harm reduction services. Additionally, the OD2A grant requires each grant funded site to lead a peer-to-peer learning session for other funded sites across the country. HCPH will focus on efforts to utilize peer recovery professionals in harm reduction initiatives. The first learning session will be held on 10/23/2020. Lastly, daily overdose surveillance reporting will be moved to an online portal beginning in October. The portal will allow individuals to manipulate the data to understand overdose trends in various sub-populations by demographics.



GOAL 2: Fewer people who inject drugs will contract an infectious disease in Hamilton County.

The Syringe Services Program (SSP) continued to find innovative ways to provide lifesaving supplies to clients while minimizing exposure risk for clients and staff during the COVID-19 pandemic, including the increased use of social media and texting service. The SSP served 3,472 clients of which 840 were considered new clients. A total of 242,925 syringes were exchanged. The SSP encourages clients to get tested by educating them on the importance of knowing their Hepatitis C and HIV status. There were 25 Hepatitis C and 57 HIV tests administered. A new vehicle was purchased to assist with providing "pop-up" services to SSP clients. Two new certified peer recovery specialists were hired to work on the SSP. The peer recovery specialists play a critical role in gaining trust of clients, as well as providing a connection to the recovery community. Lastly, discussions with the Cincinnati Veterans Affairs (VA) continued around opening an SSP. Resources and data collection tools will be shared with the VA to ensure consistency of operations.





PRIORITY AREA 4 – HIV & SEXUALLY TRANSMITTED INFECTIONS

STATUS

GOAL 1: Prevent HIV & Syphilis infection and related illnesses among Hamilton County residents.

HIV & STI prevention strategies are primarily operationalized through grant funding from ODH. Similar to other priority areas, several barriers were encountered as a result of the COVID-19 pandemic. HCPH and partners were not able to provide testing in community locations due to restrictions and health concerns. Most community events where outreach efforts would have occurred were postponed or cancelled. In addition, individuals did not receive testing at medical offices or emergency rooms due to fear, reductions in appointments (to accommodate social distancing requirements), and patient restrictions. Despite these challenges, the HIV & STI prevention team maintained testing services with limited walk-in testing times and by appointment. Of the individuals tested, 2.4 percent of tests conducted were positive. Because of fieldwork restrictions, client intervention occurred via phone or virtually. Ninety-three percent of clients newly diagnosed with HIV were engaged in infectious disease care; a Disease Investigation Specialist (DIS) interviewed 94 percent of new HIV cases within 30 days. With regard to syphilis, 87 percent of new cases were interviewed by a DIS within 14 days of assignment, and 93 percent of cases were started on treatment within 14 days of assignment. Furthermore, HCPH entered into a partnership with Cohear, a local community engagement and strategy firm, to gather community feedback on how to better reach and serve populations at higher-risk for HIV and STIs. This information will be used to inform upcoming social marketing and health promotion efforts.



PRIORITY AREA 5 – ORAL HEALTH

STATUS

GOAL 1: Hamilton County residents will have improved access to oral health care.

The Oral Health Coalition (OHC) continued its advisory role with the Ohio Department of Medicaid (ODM) and the Ohio Dental Association's (ODA) Medicaid Working Group. Through these connections, oral health inequities in Hamilton County are heard and can be remedied at the state level (and thus having a greater impact for improvement across Ohio). The OHC continued to support the DentaQuest Transition process. Managed Care Organization (MCO) providers saw noticeable improvements related to reimbursement. However, coding issues caused incorrect reimbursements or denials. Several codes continued to be denied or down coded by DentaQuest; progress on these items are taking longer to remedy and requirement involvement from CareSource and ODM to mediate. Additionally, the OHC provided a letter of support the development of an Oral Health Consortium. The Oral Health Consortium would include a three-phase rollout (streamline patient access via social worker patient navigators; expand residencies within UC Health to include specialists; and expand into oral health research). Lastly, the OHC prepared to promote "Dental Care Connect," an online local job-posting site designed to make it easier for safety net organizations to find dental professionals.



A STATEMENT ABOUT COVID-19

On March 9, 2020, Governor Mike DeWine signed Executive Order 2020-01D, declaring a state of emergency in Ohio to protect the well-being of residents from the dangerous effects of COVID-19. The emergency declaration, coupled with the need for public health emergency response and recovery, may delay progress over the duration of this plan. Hamilton County Public Health and its partners will make every effort to implement strategies outlined within the 2020-2023 Community Health Improvement Plan. Progress will be closely monitored to determine if priority areas and benchmarks need to shift as we work to protect Hamilton County residents during the COVID-19 pandemic.

CONTACT US!

Hamilton County Public Health
250 William Howard Taft Rd
Cincinnati, Ohio 45219
P. (513) 946.7800

HCPH.org

WE'RE SOCIAL!

Follow us on your favorite social media platform
@HAMCOHEALTH



**HAMILTON COUNTY
PUBLIC HEALTH**

PREVENT. PROMOTE. PROTECT.



DATE ISSUED: 10/28/2020