



Board of Directors Meeting

May 13, 2024

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The Children's Trust
Monday, May 13, 2024
3250 S.W. 3rd Avenue (Coral Way)
United Way - Ryder Room
4:00 p.m. - 6:00 p.m.

Board of Directors Meeting

Board of Directors
(Present)

- Kenneth C. Hoffman, Chairperson
- Pamela Hollingsworth, Vice Chair
- Matthew Arsenault, Treasurer
- Marissa Leichter, Secretary
- Dr. Edward Abraham
- Islamiyat Nancy Adebisi
- Dr. Daniel Bagner
- Hon. Dr. Dorothy Bendross-Mindingall
- Cathy Burgos
- Silvia Castellanos
- Norie Del Valle
- Reverend Richard P. Dunn II
- Jacqueline Exceus
- Gilda Ferradaz
- Valrose Graham
- Mindy Grimes-Festge
- Hon. Keon Hardemon
- Maria Norton
- Ashna Paudel
- Dr. Clara Lora Ospina
- Javier Reyes

President & CEO
James R. Haj

County Attorney's Office
Leigh Kobrinski
Assistant County Attorney

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S T A F F

Amanda Gorski	Bevone Ritchie
Carol Brogan	Danielle Barreras
Felix Becerra	Garnet Esters
Grettel Suarez	Imran Ali
Jacques Bentolila	James R. Haj
Joseh Chillemi	Juana Leon
K. Lori Hanson	Lindsay Francois
Lisete Yero	Michele Mordica
Natalia Zea	Patricia Leal
Rachel Spector	Sebastian del Marmol
Tatiana Canelas	Tiffany Singh
Victoria Gandul	Wendy Duncombe
William Kirtland	Ximena Nunez
Juliette Fabian	

1 VICE CHAIR HOLLINGSWORTH: So hello
2 again and good afternoon. We are going to
3 get started. If we can move the agenda up
4 a little bit on the screen so I can see
5 what comes next. There we are

6 So welcome, Everyone. We are so
7 glad to see you all today. We are
8 waiting for -- actually, I think we now
9 have quorum. Welcome. Glad to see you.
10 We are going to start today with a
11 real treat. As you'll recall, we did not
12 meet last month. We were all front and
13 center at the -- not an empty seat in the
14 house for Champions for Children's awards.
15 Wonderful, wonderful day. And if we
16 could cue up the video to remind us of all
17 the great things that unfolded last month
18 at the Champions for Children's award.

19 (Thereupon, the video was played as
20 follows).

21 "It's Champions finally. The day
22 I've been waiting for. The one day of the
23 year that we get to elevate all of our
24 community partners that are doing such a
25 great job everyday. Come on, join us!

1 Let's go in.

2 "Truly an amazing event. You know,
3 one time a year we come together with all
4 the leaders, all the childhood advocates
5 in the community, 1300 strong sold out
6 event to celebrate those people who do the
7 work day in and day out, who grind, who do
8 not get recognition. Today we're able to
9 recognize them on a large stage. Miami is
10 very special to have, in the middle of
11 the day, 1300 people, leaders in the
12 community, come out and say we know the
13 importance of children and families, and
14 we stand as a community in support of
15 children and families is profound and we
16 should be very proud of that.

17 "We're here at the 18th annual
18 Champions for Children to honor some of
19 our premiere programs and individuals
20 providing services to the children of
21 Miami-Dade County.

22 "I am powerful. I am love. The
23 best part of today's event was
24 watching Zoe Terry get a standing ovation
25 for excellence in youth leadership,

1 because the youth show the rest of us
2 what's possible. All of us feel like we
3 need to do more with our day jobs when we
4 look at the kind of accomplishments some
5 of these kids have and Zoe deserves
6 every single accolade that she gets.

7 "At the Children's Trust, we care
8 very much about making sure that youth are
9 empowered, to not only read and excel, but
10 to advocate for other youth.

11 "Among all the hustle and bustle,
12 the very important work that we're doing,
13 we need to take time to get together to
14 celebrate among communities all the do
15 gooders here in South Florida, and
16 congratulations to all the honorees.

17 "I'm sorry he is not with us today,
18 but I actually believe he is with us.
19 Programs like this saves children's
20 lives."

21 VICE CHAIR HOLLINGSWORTH: Terrific.
22 Thank you.

23 And before we move to the Nominating
24 Committee meeting report, I would like to
25 share another bit of good news, and I'd

1 like you to join me in congratulating Ken,
2 who received the Silver Medallion award,
3 and this award honors outstanding leaders
4 in our community, who have dedicated their
5 lives to promote diversity and building an
6 inclusive and just society.
7 Congratulations. Well deserved.
8 Excellent.

9 And let's move to Dan for the
10 Nominating Committee report.

11 COMMITTEE CHAIR BAGNER: Thank you,
12 Madam Vice Chair.

13 So some of you may not be aware, but
14 Mark Trowbridge resigned from the Board
15 recently. He wanted to really focus on
16 his recovery, on his health. And so, as
17 you all know, we nominated him and voted
18 for him to be chair of the Trust, so that
19 opened up a vacancy.

20 So an e-mail was sent out by Jim for
21 soliciting a chair for the Board on
22 April 17th, and the deadline was
23 April 26th. We received three Board
24 Director nominations to nominate Ken, to
25 my right, to continue or come back into

1 this role -- I don't want to say continue,
2 come back into this role for now, and Ken
3 graciously agreed. And the Nominating
4 Committee met right before this meeting,
5 and we unanimously approved and voted in
6 favor of Ken to serve as our chair.

7 So, as such, do I have a motion to
8 approve Ken Hoffman's nomination to serve
9 as Board chair from May 2024 through
10 April 2026?

11 VICE CHAIR HOLLINGSWORTH: In unison.

12 COMMITTEE CHAIR BAGNER: In unison.
13 Lots of nominations. Thank you. I hear
14 -- did we get that, a motion and a second?
15 Any discussion? Comments?

16 BOARD MEMBER SALVER: He didn't turn
17 out right, though? I think the positions
18 on the Board are two -- I mean, three
19 two-year terms, so he might have took his
20 name out of the running after the second
21 two-year term. So you're giving him
22 basically his last two-year term.

23 COMMITTEE CHAIR BAGNER: Well, we're
24 still waiting on a legal opinion on that,
25 so, yeah, but that is correct. And

1 because Mark Trowbridge was sworn in as
2 chair, even though he didn't preside over
3 this meeting, we're waiting legal, right,
4 decision on --

5 MS. KOBRINSKI: He has one final
6 two-year term. He did not exercise the
7 third two-year term, so this would be it.
8 This is the start of it. If you want to
9 go beyond that, then you'll need a legal
10 opinion --

11 COMMITTEE CHAIR BAGNER: Then we'll
12 need -- okay, thanks for the
13 clarification.

14 BOARD MEMBER SALVER: I only have one
15 more question. Does Mark get to put his
16 chairmanship on his resume?

17 COMMITTEE CHAIR BAGNER: He did get
18 sworn in.

19 BOARD MEMBER SALVER: Anyway, I hope
20 he has a full and speedy recovery, yeah.

21 COMMITTEE CHAIR BAGNER: Thank you,
22 Isaac.

23 Any other comments? Questions?

24 BOARD MEMBER DUNN: Just an old
25 cliche, if it ain't broke, don't fix it.

1 COMMITTEE CHAIR BAGNER: Thank you.
2 I don't know if we can top that. Anyone
3 else?

4 Okay, well, with that, all in favor?

5 COLLECTIVELY: Aye.

6 COMMITTEE CHAIR BAGNER: Any opposed?
7 Alright, congratulations, Ken. You can
8 step in the hot seat and serve as Chair
9 again.

10 CHAIRMAN HOFFMAN: Is this working?
11 I'll take this seat for right now. First
12 of all, I didn't know this place would go
13 to the dogs, if I (inaudible).

14 VICE CHAIR HOLLINGSWORTH: Mr. Chair,
15 we have saved you a seat front and center,
16 if you'd join us.

17 CHAIRMAN HOFFMAN: I appreciate it.
18 Thank you. I'll take it from here for
19 right now. I don't plan on spending
20 another six years in this position. I did
21 agree to take on the role. I have an
22 unserved term, so thank you, though.

23 So back onto the Board meeting then.

24 VICE CHAIR HOLLINGSWORTH: Yes.

25 CHAIRMAN HOFFMAN: We had a -- I

1 don't think that you officially canceled
2 the executive committee meeting, Pam.

3 VICE CHAIR HOLLINGSWORTH: Repeat
4 that, please?

5 CHAIRMAN HOFFMAN: Did you officially
6 cancel the executive committee meeting?

7 VICE CHAIR HOLLINGSWORTH: No.

8 CHAIRMAN HOFFMAN: So we had a
9 schedule Executive Committee meeting, of
10 which I was not a member today, just in
11 case we were unable to take a quorum, and
12 since we have a quorum, the Executive
13 Committee meeting is hereby cancelled.

14 As usual, I want to remind everybody,
15 if you're going to speak, please turn on
16 your microphone, and if you're not
17 speaking, please turn it off.

18 In addition, if you need to recuse
19 yourself from a resolution, please make
20 sure to state your name, and agency and
21 the reason for the refusal.

22 I did also want to congratulate the
23 staff about the Champions for Children.
24 It was really a terrific event. I don't
25 know, Jim, what the final count was in

1 terms of participants, but it was
2 definitely a full room and a lot of
3 energy.

4 Do we have Silvia here? Oh, there
5 you are. I want to welcome Silvia
6 Castellanos. She's recently appointed to
7 the Board by Governor DeSantis as one of
8 the gubernatorial positions. She's a
9 director of external affairs for Banyan
10 Community Health Center, in Miami. And
11 from 2019 to 2023, she served as regional
12 representative for the executive office of
13 the governor. And before that, as a
14 senior legislative aide for the Florida
15 House of Representative. She has a
16 bachelor's degree in political science
17 from Florida International University and
18 a master's degree in Public Administration
19 from Florida State University.

20 Welcome.

21 BOARD MEMBER CASTELLANOS: Thank you.

22 CHAIRMAN HOFFMAN: If you'd like, you
23 can say something, but you don't need to.

24 BOARD MEMBER CASTELLANOS: Well,
25 thank you so much for having me. I look

1 forward to working with each and every one
2 of you to continue to improve the lives of
3 the families and children of Miami-Dade
4 County, so thank you so much.

5 CHAIRMAN HOFFMAN: Thank you.

6 I want to congratulate Ashna Paudel.
7 She's our Board representative from the
8 Miami-Dade Student Government Association.
9 At 17 years old, she just received her
10 associate of arts degree from Miami Dade
11 College. Not only that, she graduated
12 with a 4.0 and highest honors. So she'll
13 be attending University of Pennsylvania in
14 the fall and plans to be a premed student.
15 Congratulations. Now she just has to
16 graduate high school.

17 I want to congratulate Lourdes Diaz
18 on receiving the 2024 Public School Alumni
19 Achievement award. It's actually going to
20 be presented this evening by the Education
21 Fund, which provides private sector
22 leadership and support for innovation in
23 public education.

24 A couple other Board items. We have
25 two other gubernatorial board seats that

1 are in process and expected to be filled
2 over the summer. Also, this will be Maria
3 Norton's last Board meeting. Thank you,
4 Maria, for your service. You'll maybe
5 come back at a later day for your service
6 award. She's been the representative of
7 the Miami-Dade Council of PTA, PTSA, and
8 her term as president will be expiring at
9 the end of May. And you're also welcome
10 to say something now, if you'd like.

11 BOARD MEMBER NORTON: Thank you,
12 Everyone, for the wonderful two years.
13 It's been an honor. I've learned a lot of
14 what the Trust does for all of the youth
15 in Miami-Dade and I continue to look
16 forward to learning some more about it.
17 Thank you so much.

18 CHAIRMAN HOFFMAN: Thank you.

19 Finally, as we head into the meeting
20 agenda, we have four resolutions grouped
21 together as part of a consent agenda. If
22 you remember, any director is entitled to
23 pull a resolution from the consent agenda.

24 As we discussed at the Board retreat,
25 we're trying to do this in a thematic way.

1 We'll have a presentation by staff, a
2 detailed background on all the
3 resolutions, so that the directors have a
4 good understanding of the strategic
5 framework and why they're grouped
6 together.

7 I encourage you to ask questions
8 after the presentation. And then after
9 the presentation, the resolutions will be
10 brought to a vote.

11 I'm sorry? Okay.

12 Do we have any public comments?

13 MS. LEON: We do not have any, Mr.
14 Chair.

15 CHAIRMAN HOFFMAN: Okay.

16 Then we'll go to the approval of the
17 minutes of the March 18th board meeting.

18 SECRETARY LEICHTER: Good afternoon,
19 Everyone. I hope you had an opportunity
20 to review the minutes from the March 18th
21 Board of Directors meeting.

22 Do I have a motion to accept those
23 minutes?

24 BOARD MEMBER REYES: So moved, Reyes.

25 SECRETARY LEICHTER: Second?

1 BOARD MEMBER ABRAHAM: Second,
2 Abraham.

3 SECRETARY LEICHTER: Any discussion
4 about those minutes? All in favor?

5 COLLECTIVELY: Aye.

6 SECRETARY LEICHTER: Any opposed?
7 Motion passes.

8 CHAIRMAN HOFFMAN: So we have on the
9 agenda a special appreciation award for
10 Nelson Hincapie for his outstanding
11 service on the Children's Trust Board.

12 Nelson, until recently, was on the
13 board I think almost my entire tenure as a
14 director. He's been a strong and vocal
15 advocate for foster children, the foster
16 children system. We already miss you,
17 Nelson, but your voice is still heard
18 here. So come on up. I mean, if you want
19 to say something as well.

20 MR. HAJ: Mr. Chair, thank you.

21 So I got to meet Nelson when I was
22 appointed as CEO. And there are people
23 that just touch your lives that you come
24 in contact with. And, Nelson, I
25 appreciate you and your heart. You talk

1 about a child advocate fighting for foster
2 care and children and families in this
3 community. Nelson is the poster child.
4 He's dedicated his life. He's now with
5 the Miami Dade College, but throughout his
6 career, has been dedicated to children and
7 family. And, Nelson, you have made an
8 impact at the Trust and throughout this
9 community. And he has an extremely
10 beautiful family. He's a very blessed
11 man. And he has a great book, too, if you
12 haven't read his book yet, to read his
13 book about the obstacles and his journey
14 and how he's turned his life to something
15 very special. Congratulations, my friend.

16 MR. HINCAPIE: Thank you. Thank you,
17 Everyone. It was really an honor to be
18 here and to advocate for children in
19 foster care. I remember a time when many
20 here used to say that children in foster
21 care were the responsibility of the State,
22 and we've come a long, long way and it's
23 really great to see. Now I'll be
24 advocating for Miami Dade College for
25 sure.

1 CHAIRMAN HOFFMAN: Okay. And now
2 I'll turn it over to Matt Arsenault for
3 the Finance Committee report.

4 COMMITTEE CHAIR ARSENAULT: Thank
5 you.

6 On May 2nd, Finance & Operations
7 Committee met, and one of the items was
8 brought forth. It's Resolution 2024-36,
9 which is authorization, negotiate and
10 execute a contract with the Miami
11 Foundation, acting as a fiscal agent for
12 match funding award to the community-based
13 Care Alliance of Miami-Dade County. In a
14 total amount not to exceed \$64,000, for a
15 term of 12 months, commencing October 1,
16 2024, and ending September 30, 2025.

17 Can I get a motion?

18 BOARD MEMBER SALVER: I'll move it,
19 Salver.

20 COMMITTEE CHAIR ARSENAULT: Second?

21 BOARD MEMBER BAGNER: Second, Bagner.

22 COMMITTEE CHAIR ARSENAULT: Thank
23 you.

24 Are there any recusals?

25 BOARD MEMBER FERRADAZ: Recusal,

1 Ferradaz. I am on the board of the
2 Community Care Alliance.

3 BOARD MEMBER DEL VALLE: Recusal, De l
4 Valle, United Way is also on the board.

5 COMMITTEE CHAIR ARSENAULT: Okay. Is
6 there any discussion or question on the
7 resolution? Hearing none, we'll put it to
8 a vote. All in favor, please say aye?

9 COLLECTIVELY: Aye.

10 COMMITTEE CHAIR ARSENAULT: Any
11 opposed? The resolution carries. Thank
12 you.

13 Back to you, Mr. Chair.

14 CHAIRMAN HOFFMAN: Then on to the
15 Programs Committee meeting report. Before
16 the report, we'll have a presentation by
17 Jim and staff.

18 MR. HAJ: Mr. Chair, thank you.
19 We're going to do a presentation. Coming
20 out of the Board retreat, one of the --
21 one of the sentiments of the Board was the
22 additional presentations to how we do our
23 work, and we have four resos in front of
24 you dealing with Family Strengthening, so
25 I'd like Bevone to present on the four

1 resos, your first four resos on the
2 Program committee. I don't know where --
3 oh, Bevone.

4 MS. RITCHIE: Good afternoon,
5 Everyone. Bevone Ritchie. Next slide
6 please.

7 So what I'm going to share with you
8 this afternoon, I'm going to be as brief
9 if possible, because the format is giving
10 you some information about each of the
11 initiatives that are before you for your
12 approval and then giving you some data
13 related to those.

14 So they -- we collectively call these
15 family services, because what they do is,
16 they support parents and caregivers, and
17 they use research informed and
18 evidence-based strategies to provide
19 support to these families.

20 They are Resolution 37, which is
21 Parenting and Family Strengthening; Family
22 Neighborhood Support Partnerships, which
23 is 38; Health and Public Family Benefits
24 Enrollment, which is 39, and 211.

25 Okay, next. Next slide.

1 So I wanted to talk to you a little
2 bit about why we invest in parenting.
3 Research shows that effective, consistent
4 and supportive parenting prepare children
5 for a lifetime of success. You know all
6 parents typically have questions about and
7 concern about their children, but
8 sometimes they don't have a trusted source
9 to get the information support. So we, at
10 Children's Trust, our goal is to be that
11 trusted source of parenting information
12 for our community and we want them to come
13 to us when they seek these answers.

14 Next.

15 And how do we do this? Next slide.
16 So we -- back one. Go back one, two. The
17 other way.

18 So parenting -- we offer parenting on
19 a continuum of care. We provide parenting
20 services so that children are supported by
21 nurturing relationships and involved
22 families, right? And we do this through
23 evidence-based and promising -- practice
24 programs, right, which we call EBPs. We
25 do so in group-based format. So we do so

1 through home visitation. And then we
2 provide the opportunity to meet the needs
3 of families by providing it either in
4 person or in a hybrid format. We don't
5 allow all of our programs to just be
6 virtual, because we've learned from some
7 of the data in our survey parents wanted
8 more in-person services, so we provide
9 that.

10 Staff are typically trained in the
11 curriculum. They require certification
12 for many of them and we also provide the
13 opportunity to provide screening services.
14 We have a requirement for some of our
15 programs for child development and
16 parental depression screening for a select
17 number of programs.

18 Next slide.

19 So we have 45 funded programs, and
20 what we do is, we provide services to both
21 children and families. Some programs have
22 specific activities for children, while
23 some other curriculums are only for the
24 parent. And, to date, if you -- I want to
25 call attention to -- we're in the first

1 year of parenting and family strengthening
2 programs. So the data that I'm going to
3 present to you is from October 23rd, start
4 of the contract, up until March. So these
5 numbers represent the numbers of service
6 to date, so we have served a total number
7 of 6,866 families to date.

8 Next slide.

9 So we fund on a continuum. So that
10 means the population we serve range from
11 the universally available, and one of the
12 slides we sort of glazed over, indicated
13 that we do have a current solicitation out
14 and that's for our universally available
15 program called parent club. We're not
16 addressing that, because we have an open
17 solicitation.

18 What we are presenting to you today
19 in the parenting and family strengthening
20 space is the programs that work in the
21 selected and indicated population.

22 So for selected, those are families
23 that need a little bit more support, and
24 we do sort of multi-series, group-based or
25 individual programming, and these are the

1 EBPs that we serve in this particular
2 space and the number of families that we
3 serve.

4 And to note that 37% of families
5 report at least one child with
6 disabilities. So we don't have an
7 individual requirement for the children,
8 as I noted, not all families serve
9 children. There are some curriculum that
10 have children included, but we do require
11 that they support families with children
12 with disabilities.

13 And then the more indicated
14 population are those that need more of our
15 clinical services. These are
16 evidence-based programs, such as healthy
17 families, PCIT, that work on things such
18 as behavioral challenges. And, again, if
19 you noted, we have high percent of
20 supporting children with disabilities in
21 these programs, and those are the numbers
22 served to date.

23 Next.

24 Additional data on this is just to
25 give you a highlight of the number of

1 children served. One of the things that
2 I've previously mentioned was that we
3 offer both developmental and sort of pre
4 and postnatal screening to address mental
5 health supports to families. So this sort
6 of highlights the level of screening
7 that's provided and the follow-up that we
8 offer.

9 So, for example, for the
10 developmental screening where we used
11 tools such as the ASQ, and the ASQSE, 17%
12 of those that were screened had concerns
13 leading to referrals, and each of the
14 individual providers have a process to
15 refer families to get more in depth or
16 individualized detailed assessment. And
17 for the postpartum depression screen,
18 which we use the health questionnaire, 3%
19 yielded concerns for referral.

20 And if you noted, the Board approved
21 a recently and moving beyond depression,
22 so we have sort of a direct referral for
23 these families who need interventions that
24 are doing postpartum depression. And just
25 to note that for the depression screening,

1 we've moved to a tool that support both
2 depression screening both for mothers and
3 fathers. So the tool is sensitive enough
4 to support the whole family as it relates
5 to depression concerns.

6 Next slide.

7 So we -- these are sort of the -- I'm
8 sharing the outcomes, and just to
9 highlight two of them. Between October
10 and March, 94% of parents caregiver
11 includes their parenting skills. And
12 another one I just want to highlight is
13 that 86% of children and youth decrease
14 problem behavior or maintain appropriate
15 behavior.

16 Next slide.

17 So we recently initiated parental
18 surveys that the outcomes data that I
19 presented to you before, the providers are
20 responsible for testing and administering
21 those measures. This is a survey that
22 goes to the participants in the program.
23 They receive it. And this represents the
24 early -- we began this in January. And
25 this represents the early results.

1 If you notice, we have that lovely
2 99% of the 482 survey responded strongly
3 agree, right, that they learned, they
4 gained skills, that the staffing are
5 engaging and the activities are very
6 helpful.

7 Next. Okay.

8 And so how do families access our
9 programs? They do so, they oftentimes
10 it's word of mouth, but we also have a
11 Find a Program on our website, so you can
12 go and search to see what's close to you,
13 or you can search by word to see if
14 there's a particular subject matter that
15 you're interested and you can get the
16 contact information to contact these
17 programs.

18 Next.

19 Next resolution is Resolution 24-38,
20 Family Neighborhood Support Partnerships.
21 Next. So we are in -- we're currently
22 operating in year two of this program. We
23 shifted recently and we focus more on a
24 strength-based approach where we provide
25 individualized care coordination and

1 wraparound support to families that are in
2 need.

3 And one of the things that we did
4 when we shifted to this strength-based
5 approach was, we changed our terminology
6 around the care coordinators. So instead
7 of calling them peer coordinators, we call
8 them success coaches. You know, we were
9 looking at the results that we sought.
10 And then we thought it was really
11 important to call natural helpers. These
12 are individuals who might have experienced
13 some of the challenges the families have
14 and the support that they need, so they
15 are part of the program.

16 We have Standard Operating
17 Procedures, and we use a common assessment
18 tool, and we have a data system and we
19 shifted to also including that we
20 recognize that families range in their
21 needs. So we didn't put a number of
22 participants on the program, but what we
23 did is, we said let's look at your hours,
24 and we want you to be a certain level
25 engaging in working directly with

1 families. So that's one of the metrics
2 that we use.

3 And we also provide family
4 stabilization funding to meet the needs of
5 these emergency needs of families.

6 Next. Next. Yeah.

7 So what are the populations that we
8 serve? So they are both population
9 specific and neighborhood specific service
10 levels. So it ranges from children of
11 incarcerated parents, youths experiencing
12 immigrant challenges, families living with
13 significant disabilities. The majority of
14 our programs are programs that are more
15 neighborhood-based, so they are children
16 and youths residing in neighborhoods
17 affected by poverty, crime, unemployment,
18 community violence and trauma.

19 Next.

20 So we have 22 agencies funded for
21 \$13.9 million, and some of these programs
22 also provide more -- in addition to the
23 required services, they provide additional
24 activities. And I'll tell you a little
25 bit more about what those additional

1 activities might be in the next slide, in
2 upcoming slides, right?

3 So as I mentioned before, these
4 programs are operating in year two, and
5 we're about a year and a half into the
6 program. And we're -- as last year, we
7 focused a lot on training on the Standard
8 Operating Procedures, training on the
9 assessment tool, which requires
10 certification before you could implement
11 it and getting hiring in those sorts of
12 things.

13 This year, we've hit the ground
14 running, and service delivery has ramped
15 up significantly for the second year. And
16 as you see, by the numbers, around family
17 served and the children and youths served.
18 So you see that we're doing much better in
19 this year, and this represents only half a
20 year, about a half a year of data.

21 Next.

22 And this just represents the fact
23 that we are serving along the ages from
24 birth all the way up to 18, and 18 plus,
25 because we have special populations that

1 we support, including the foster care
2 community, and 72% of families screens
3 were eligible for these services. We do
4 provide information on referral as a part
5 of this. So even though they aren't
6 eligible, they can -- they get a small
7 level of services, right? And we're
8 supporting 41% children with disabilities.

9 Next.

10 All right. So this is just
11 information about the referrals. So part
12 of the support is to connecting families
13 to service. And if you see the top
14 referrals that our families are in need of
15 basic need, they're in need of housing,
16 they're in need of mental health support,
17 right? So the chart on the right
18 represents the level of completed
19 referrals. So we're connecting families
20 to services. And the program and the
21 staff of the program are meeting families'
22 needs.

23 Okay, next.

24 So the portion of additional
25 activities, as I mentioned, for families

1 that a lot of these programs -- I think
2 this year all programs have additional
3 activities. And, you know, it's a
4 partnership approach. Programs are
5 assessing yearly, meeting the needs of the
6 participants and they change. So whereas
7 in year one, you might have seen more
8 academic programs this current year, the
9 highest need is for mental health
10 services, and the others that are
11 displayed there.

12 Next. Okay.

13 As I mentioned, we have 500,000
14 available for family stabilization, in the
15 FNSP available to all the participants
16 that are receiving care coordination. And
17 last year, we used \$270,000 to support
18 primarily housing and utility needs where
19 you can see 60% of the support through
20 family stabilizing funding was in housing
21 and utilities. And probably is no
22 surprise to the group here knowing what's
23 happening in Miami-Dade County.

24 Next.

25 As it relates to goals of the family,

1 it is sort of reflective of the family
2 stabilization as well that housing
3 stability, school achievement, basic
4 needs, family functioning, thee are the
5 goals that the families are working
6 towards. And you can see 92% of families
7 achieved or made progress towards their
8 success goals.

9 Next.

10 So the third resolution, Resolution
11 39, Health Public Benefits Enrollment.
12 Next. So these are public benefits that
13 are available in our community, and the
14 families can qualify for them. And what
15 we do is, we have none community-based
16 organizations that provide \$1.6 million in
17 annual funding to support enrollment and
18 tracking of the disposition in these
19 benefits, and these public benefits and we
20 collectively hope to enroll more than
21 6,500 families. That's a number that we
22 contract for for the nine providers.

23 Next. Okay.

24 And, again, this is a first year
25 contract. We're operating at around six

1 months. And the data that you're going to
2 see is for October through March, right?
3 So though we have the goal of the
4 contracted goal of 6,500 plus, to date,
5 the program has served 3,948 participants,
6 and they have a rate of 82% of the
7 families successfully being enrolled in
8 these available public benefits.

9 I share with you in a couple of
10 slides, what are some of the benefits, so
11 you have an idea of what we're speaking
12 to. We put a financial value on the
13 benefits. And you see of those that we
14 successfully enroll, it is more than
15 \$300,000 value to our community.

16 Next.

17 What are some of the benefits? So we
18 do the most common or the top five
19 benefits that are approved, these 3,948
20 participants, was health insurance, right?
21 So particularly child health insurance,
22 though it's a family benefit enrollment,
23 we include -- we start off with a child
24 and see if there are others in the family.
25 SNAP, which is assistance, food

1 assistance, and then adult education and
2 employment, and so forth, as indicated in
3 the chart.

4 Next.

5 And you'll see where we're providing
6 service throughout the County, the map
7 identifies where the primary
8 concentration, but we are delivering
9 services throughout Miami-Dade County with
10 the nine providers.

11 Next. Okay.

12 And the last resolution that I'm
13 going to speak to is Resolution 40, which
14 is -- next, is our help line, which is
15 through Jewish Community Services and the
16 211 help line, trained counsellors use
17 online services directly to provide
18 information and referrals for health and
19 human services in Miami-Dade County. The
20 directory is rich with resources. You see
21 over 4,000 resources. There are over a
22 thousand agencies. And you can access
23 this service by either calling 211 or
24 doing an online search. And you see that
25 we have more than 4,000 -- 49,000 callers

1 were assisted with their needs, and you
2 see that there's a lot of online searches
3 as well, over 91,000 online services, and
4 we also provide enhanced advocacy
5 services. This is where there are
6 families that have multiple needs and need
7 more additional follow-up. So there were
8 4,000 enhanced advocacy calls.

9 Next.

10 So what are families calling about?
11 Again, these should not be surprising,
12 because housing is a critical need in our
13 community as well as mental health, food,
14 so they are reaching out to 211, with a
15 rich list of community-based agencies to
16 get connected to these services.

17 Next slide.

18 So in order to -- and what we do is,
19 we want to know how well our provider is
20 doing this. So there's two ways that we
21 do that. We have an independent shopper,
22 a secret shopper that does calls. And, as
23 you see, 95% of the calls are found to be
24 satisfactory overall. And then in
25 addition to that, 211 also has a phone

1 survey at the end of the session, where
2 the individual on the end of the call is
3 asked to report on how well, and 88% of
4 callers during the first six months of
5 implementation would recommend 211.

6 Next.

7 I did want to highlight for the first
8 time the Trust partnered with Miami-Dade
9 County. Miami-Dade County Public Schools
10 and Jewish Community Services of South
11 Florida create the more summer camp
12 choices initiative to bring awareness to
13 the hundreds of free or low cost summer
14 camp options for children and youth.

15 And we use a comprehensive marketing
16 campaign, which resulted in a 400%
17 increase in the online services to 211.org
18 from our previous years, and the
19 initiative also led to 40% increase in
20 calls to 211. So we're thinking of new
21 ways to use our resources to inform the
22 community about what 211 can offer, okay?

23 And thank you for your time. That's
24 the end of my presentation.

25 CHAIRMAN HOFFMAN: Any questions?

1 BOARD MEMBER ARSENAULT: Can I ask a
2 question on Resolution 39?

3 CHAIRMAN HOFFMAN: Yeah.

4 BOARD MEMBER ARSENAULT: In the
5 presentation, you said the value of the
6 benefits is \$300,000. Could you maybe
7 elaborate on that? 'Cause the expected
8 cost is 1.5 million, if you can elaborate
9 on that 300,000 in value.

10 MS. RITCHIE: So we do have a
11 formula, we have a formula -- and I would
12 look to Lori to specifically indicate that
13 formula. So we attach a value to the
14 benefit that we -- that is gained for the
15 participant, so that number represents
16 that number. It represents a time period,
17 so it does not represent the whole year of
18 service. It only represents up until
19 March.

20 MS. HANSON: Correct. Lori Hanson
21 with the Trust.

22 And the number is not only
23 representing a six-month number, whereas
24 the funding amount is a 12-month funding
25 amount. It's only a subset of the

1 benefits that can be monetized as well, so
2 not all benefits can be monetized. I have
3 to get the list of which ones, you know,
4 have a monetary value. Like if you
5 qualify for an X amount of dollars of
6 nutrition assistance, right, that can be
7 calculated into a formula. So we've done
8 just for the subset that we can actually
9 quantify. So it's not the full set of
10 benefits that people are enrolled in, so,
11 yeah, but we can provide that list of
12 which benefits are included in that
13 formula. It's always a little bit
14 underreporting of the total and then it
15 catches up at the end of the year to the
16 total.

17 BOARD MEMBER ARSENAULT: But in you
18 guys' experience, the providers are
19 actually hitting the targets in the number
20 of enrollees that you guys targeted here
21 in the resolution?

22 MS. RITCHIE: Yeah, they are in task
23 this year to do that. I would say it's a
24 new funding cycle. In the past, pandemic
25 presented challenges for families, and

1 also because there were so many
2 pandemic-related extensions of benefits,
3 you know, you didn't have to go back to
4 get approvals, right?

5 BOARD MEMBER REYES: There's a lapse
6 of Medicaid now.

7 MS. RITCHIE: Yes. So now it shot
8 up, because those sort of holds that you
9 didn't have to go back in, now they're
10 requiring you to reenroll or re-up your
11 benefit, we're seeing the numbers go up.

12 BOARD MEMBER REYES: Thank you.

13 CHAIRMAN HOFFMAN: Reverend Dunn.

14 BOARD MEMBER DUNN: Yes. As it
15 relates to the parenting piece that you
16 shared with us, what dictates or drives
17 those recipients who are chosen? Is it
18 based on family composition? Is it based
19 on neighborhood zip code, i.e. race,
20 ethnicity? What dictates or drives that?

21 MS. RITCHIE: Yeah. So all of our
22 parenting programs are voluntary. So
23 families who need services seek out.
24 That's why part of what we do is make it
25 known that we have these services, right?

1 So I shared with you the search feature.
2 Anyone who's interested in receiving
3 services that have a care giving
4 relationship, that could be grandparents,
5 that could be an uncle or, you know, other
6 type of relationships, they reach out to
7 the list of funded programs, and if
8 there's availability and they meet
9 eligibility criteria, because some
10 programs do have eligibility requirements,
11 they are welcome to apply and enroll in
12 these programs.

13 BOARD MEMBER DUNN: Can I ask an
14 additional question to that answer you
15 gave?

16 Is there opportunities or are there
17 recruiters involved who can go into those
18 said areas? Because many -- not making an
19 excuse, but many people are not aware, as
20 you stated, of the services that are
21 provided, possibly no fault of their own,
22 and maybe they're not being reached. They
23 may not have availability of computers or
24 whatever.

25 Are there recruiters that go into

1 said targeted areas that show a need for
2 such services?

3 MS. RITCHIE: So many programs do
4 have a relationship. They develop
5 partnership relationships for the purpose
6 of enrollment and recruitment. Many
7 programs have individuals as part of their
8 responsibility is to recruit and look for
9 families, right? So many of our programs
10 use community opportunities, such as
11 health fairs, such as different community
12 activities, to use that as an opportunity
13 to recruit for programming. Sometimes
14 they'll reach out to the Trust, and ask
15 us, do we know of other organizations that
16 are looking for individuals to partner
17 with for services. So there are multiple
18 ways that we try to connect the need with
19 the service that are available.

20 CHAIRMAN HOFFMAN: Okay.

21 Yes, Dan.

22 BOARD MEMBER BAGNER: Yeah. So,
23 first, I just want to commend, related to
24 the parenting, go commend the staff and
25 implementing evidence-based parenting

1 program. That's important. And I will
2 say to the late Dr. Pelham, who was
3 awarded Champions for Children's award, he
4 was one of the pioneers in pushing that at
5 the Trust, so I commend the Trust for
6 making sure those programs are
7 evidence-based.

8 That said, kind of along similar
9 lines to the Reverend, you had mentioned
10 the comment about remote delivery and you
11 said that they're either in person or
12 hybrid. I will say I know maybe some
13 families prefer in person. Most of my
14 research actually currently, and a lot of
15 our research where we work, we're doing a
16 lot of remote work, and we're showing
17 pretty excellent effects of remote
18 delivery for a lot of these parenting
19 programs that work just as well as in
20 person and can decrease a lot of the
21 barriers that some families have to come
22 into a clinic.

23 I just wanted to hear a little more.
24 Is there some plan that maybe allow for
25 fully remote service delivery?

1 MS. RITCHIE: Yeah. So we don't have
2 fully remote. And the hybrid, you must at
3 least have one session that's in person,
4 right? So we've seen a lot of challenges
5 in building rapport with families, and
6 also we've listened to the information
7 from the survey, right, where parents were
8 really needing to connect.

9 So we work with each of the programs
10 that request hybrid to come up with, what
11 does that look like for you, for your
12 program? So it's individualized. So a
13 PCIT might say, on session one, where
14 we're collecting some information and
15 data, that's the first session that we use
16 as the in-person session and all the
17 others are delivered remotely.

18 BOARD MEMBER BAGNER: Okay. Not to
19 beat a dead horse, but I will challenge to
20 say there's no evidence to suggest that
21 relationship building is enhanced by in
22 person. So I would encourage staff to
23 maybe consider programs that might be
24 willing to say, well, some of our services
25 are going to be in person or hybrid, maybe

1 we might have some families that prefer or
2 would like fully remote. So I don't know
3 if that's allowable, but I would encourage
4 us to think about that.

5 MS. RITCHIE: And I would tell you
6 there's an art to delivery of in-person
7 services. What we do is, we do go out.
8 We look at programs. We also have what is
9 called a CAT team. So we look to fidelity
10 to the model, which includes delivery in
11 the virtual space. And there have been
12 individuals that can deliver the programs
13 really well, but we've seen some
14 challenges in delivery of the program in a
15 virtual format for some providers.
16 Doesn't mean that it cannot be done at
17 all. It just means that we took all of
18 that data into consideration when we came
19 up with the policy.

20 BOARD MEMBER DUNN: One last comment.

21 CHAIRMAN HOFFMAN: Yes.

22 BOARD MEMBER DUNN: Is there a
23 partnership such with Miami-Dade County
24 Public Schools counsellors, who,
25 oftentimes, in my brief stint as a

1 semi-counselor, who often see firsthand
2 these problems that exists between
3 children and family, whether it be mental
4 health, whether it be poverty, whether it
5 be single mother trying to, you know,
6 raise, take care of a whole family, you
7 know, with situations all over the place.

8 Is there some type of relationship,
9 or deliberate or intentional effort to try
10 to perhaps work with the Miami-Dade Public
11 Schools or some Miami-Dade Public Schools
12 counsellors, who are in some of these
13 targeted areas, because there are a
14 plethora of issues that we see almost on a
15 daily basis.

16 MS. RITCHIE: Yeah. I mean, we have
17 partnerships, particularly for our
18 universally available parenting programs.
19 We partner with the Parent Academy, Angel
20 Rodriguez, to support delivery of services
21 in school. School sites can be a partner
22 for any of these programs, and some of our
23 providers do deliver programs. We
24 currently don't have a particular
25 partnership with the counselors, but we do

1 have relationships with many of our
2 school-based programs that refer out, as
3 necessary, and build those relationships
4 so that we can connect our programs.

5 These programs vary, the types of
6 services range, so oftentimes it requires
7 these individualized approach to make sure
8 that we're connecting the right individual
9 to the right resources that are available.

10 BOARD MEMBER DUNN: Last, and this is
11 more of a comment. Per note conflict, I
12 would like to see how perhaps in my small
13 sphere of being involved in Miami-Dade
14 County Public Schools, how I could maybe
15 connect, if you will, some of those
16 resources to some of our children and
17 families.

18 MS. RITCHIE: Okay.

19 BOARD MEMBER DUNN: I don't know if
20 that's a policy.

21 MS. RITCHIE: No. I think our
22 providers would be happy to engage and
23 develop additional partnership to support
24 the families or meet the needs of
25 families.

1 BOARD MEMBER DUNN: Okay. I don't
2 know what's the proper procedure moving
3 forward. I don't want to cross any lines,
4 but I want in terms of -- I would love to
5 involve per my principal, per the School
6 Board, per the Miami-Dade County ethical
7 guidelines, I would like to involve my
8 school, for sure, because I see it
9 everyday. Everyday. And it's
10 overwhelming, it really is.

11 And I don't want to be on soap box,
12 but you can see if there's no intervention
13 immediately that the future doesn't look
14 too good. I don't know.

15 MR. HAJ: Pastor, we'll follow-up.
16 Just so you know, too, we also present at
17 the student services conference, when they
18 bring all the counselors together from the
19 school system for that so they know what
20 services are available in their community,
21 in their neighborhood. I'm not sure if we
22 presented this year to the student
23 conference. They meet during the PD days
24 to bring all the counsellors together, and
25 we use that mechanism to address the

1 counselors. And if we haven't done it
2 this year, we will be getting on their
3 schedule. We'll reach back out to you.

4 BOARD MEMBER DUNN: Okay. I
5 appreciate it. That's how I was actually
6 hired into the Miami-Dade County Public
7 Schools, through the student services,
8 special services support specialist,
9 whatever that is.

10 BOARD MEMBER EXCEUS: Can I add in a
11 comment? I want to join the discussion.

12 So I think a good idea would be maybe
13 if there's a PDF printed out of all the
14 services provided to the school that the
15 Reverend is mentioning. So as an
16 advocate, I know that the process for
17 caregivers, depending on, let's say, the
18 service provider would be through the
19 caregiver giving consent to the counselor,
20 the Trust counselor, and having that
21 consent form so the parents can, you know,
22 also have that counselor to reach out to
23 the, let's say, the child.

24 So is it possible to facilitate all
25 the services provided in that area versus

1 that Trust counselor at that location of
2 the school having to do the search, if
3 it's a bit time consuming. Is there a
4 printout, like a PDF or something, we can
5 forward to the Reverend to have it
6 available?

7 MS. RITCHIE: So we don't have a
8 printout. I think the best source of
9 finding information it's two places, 211,
10 right, and through the find a program.
11 The reason I say this, many of our
12 programs operate on a cohort base, meaning
13 they have particular schedules of when
14 they're offering services, right? So,
15 let's say they're offering a cohort that
16 run 12 weeks long, right? That
17 information -- you're not going to get
18 that detail. You will need that detail by
19 calling the program and finding out when
20 they're offering services, where they're
21 offering services, 'cause it could be over
22 here. And some programs have the
23 opportunity to say, okay, you would like
24 for us to work with your population. They
25 might have the ability to create a cohort

1 that is supportive of a particular group
2 of parents.

3 MS. ZEA: Mr. Chairman, may I add one
4 point?

5 CHAIRMAN HOFFMAN: Yes.

6 MS. ZEA: From the community
7 engagement perspective, we've actually
8 been doing a lot of work in the last year,
9 specifically with FNSP that support, that
10 holistic support that we know families
11 need as well as benefits enrollment. And
12 actually we've been meeting with several
13 folks in the County in terms of putting
14 this information in public housing
15 complexes, putting it in neighborhood
16 centers that are already being served. We
17 certainly ongoing we are speaking with the
18 school system, but taking note of your
19 suggestion and definitely we'll follow-up
20 as it relates specifically to the
21 counsellors.

22 And, really, you're also going to see
23 coming up in the next few months a
24 campaign that is focused around FNSP and
25 benefits enrollment so there's a little

1 bit more universal understanding of what's
2 available, but to Bevone's point, not
3 every program is a fit for every family,
4 but it is a start. It gets a little more
5 awareness there.

6 BOARD MEMBER BURGOS: If I may.

7 CHAIRMAN HOFFMAN: Yes.

8 BOARD MEMBER BURGOS: I love the
9 recommendation that's been given by
10 Natalia. I think that it's extremely
11 important to bring the services to the
12 families. So when you do have a
13 partnership with public housing as well as
14 community action human services you remove
15 the barriers, so that's a piece that I
16 think is important to really formalize
17 that relationship with the County. And,
18 of course, it's a part of the Mayor's no
19 wrong door approach, right, to really
20 develop a continuum of care.

21 CHAIRMAN HOFFMAN: Thank you,
22 Everyone.

23 Any other comments, questions?

24 Great.

25 So we'll move on to the consent

1 agenda, which consists of Resolutions
2 2024-37 through 2024-40. I have one minor
3 correction, a Scribner's error, in
4 2024-38, in the paragraph at the end
5 dealing with delegation authority. The
6 reference to resolution is instead of
7 2017-18, it's 2017-88.

8 Do I have a motion for the consent
9 agenda.

10 BOARD MEMBER ABRAHAM: So moved,
11 Abraham.

12 CHAIRMAN HOFFMAN: Second?

13 BOARD MEMBER DEL VALLE: Second, Del
14 Valle.

15 CHAIRMAN HOFFMAN: Okay. Any
16 recusals?

17 VICE CHAIR HOLLINGSWORTH: Recuse,
18 Hollingsworth. One of the designees the
19 agency where I am employed, the CEO sits
20 on their Board of Directors.

21 BOARD MEMBER BAGNER: Recuse, Bagner,
22 employed by FIU, which I think is involved
23 in one of the resolutions.

24 CHAIRMAN HOFFMAN: Any other -- hold
25 on, any other recusals? Okay.

1 BOARD MEMBER SALVER: I just have a
2 comment and a question. I spoke to the
3 County attorney with us, Leigh. When
4 folks -- and I confirmed it with her, so
5 correct me if I'm wrong, but folks that
6 are going to be recusing themselves on an
7 item really shouldn't be involved in
8 discussing the item. They should, you
9 know, remain silent during, you know, any
10 deliberations of the item.

11 In this case, we had a presentation
12 prior to going to the consent agenda, but
13 it would be appropriate for anybody that's
14 recusing themselves not to involve
15 themselves in the discussion of the Board
16 regarding those items, which will be voted
17 upon, 'cause your words could obviously
18 influence the outcome of the vote.

19 The other, you know, the question
20 that I had was the last sentence of, you
21 know, the first three resolutions, which
22 is request for delegation of authority to
23 adjust pay program partners. I'm not used
24 to seeing that. At least I don't remember
25 being used to seeing that.

1 But can you explain to me from an
2 administrative standpoint what that means
3 and how it works, because it feels, like,
4 we're just kind of delegating our duties
5 back to staff.

6 MR. HAJ: Sure. And, Jack, I'm going
7 to ask you to chime in possibly Isaac has
8 follow-up.

9 So the practice has been, when we
10 bring a resolution for approval, there are
11 times that we have to change the
12 subcontractors. So to give us the ability
13 to change the subcontractors, as we have
14 in the last 20 years, we've never come
15 back to the Board. The last year, we
16 started talking about this, that it does
17 need Board approval or the Board authority
18 for me to make changes to the
19 subcontractor.

20 So this is allowing us to make
21 changes. There may be providers, who, for
22 one reason, have to move from one school
23 to another or different location. This
24 gives us the ability to move the
25 subcontractors and we have an amendment

1 report that does come back to the Board.

2 There's criteria, and we'll be
3 talking about the procurement policies
4 coming back to Finance next month, there's
5 criteria what needs to be reported back to
6 the Board and what does not need to be
7 reported back to the Board regarding
8 amendments, but this just gives us the
9 ability to move the subcontractors, if
10 needed.

11 BOARD MEMBER SALVER: Okay. So it
12 really doesn't have to do with the
13 finances of each?

14 MR. HAJ: So we don't -- we cannot
15 change the dollar amount. We cannot
16 change -- there are certain criteria that
17 we cannot change without coming for Board
18 approval, but within that dollar amount,
19 if we have to change a location or a
20 certain delivery, that we have the ability
21 to do so.

22 CHAIRMAN HOFFMAN: Okay. Any other
23 discussion? Questions?

24 MS. ZEA: Jim, the location of the
25 services, I don't think is included in

1 this delegation at this point. That's
2 contemplated in the procurement.

3 MR. HAJ: It is, but there are
4 certain -- again, per the reso, and I
5 don't know the reso number, there are
6 certain things we have to bring back to
7 the Board and there's certain things we're
8 allowed to move and bring back to the
9 Board to report quarterly in our amendment
10 report.

11 But, again, there will be further
12 discussion starting with the finance
13 committee in the next couple of months
14 leading up to the procurement policy on
15 this.

16 BOARD MEMBER SALVER: Thank you.

17 CHAIRMAN HOFFMAN: Yes.

18 BOARD MEMBER HARDEMON: Thank you.

19 In Resolution 2024-38, it identifies
20 that we are waiving the formal competitive
21 procurement process to negotiate contract
22 with 22 providers. Is there a list --
23 well, first, are there other providers
24 that we decided not to renew with? And,
25 if so, where do we find a list of those

1 providers?

2 MR. HAJ: Bevone.

3 MS. RITCHIE: I believe this refers
4 to any of the ones that have paid
5 providers associated with them.

6 MS. FABIAN: Yes. So to Jim's point,
7 but we're trying -- those are the
8 languages provided by assistant county
9 attorneys. There's some changes we make
10 from when we bring the contract the first
11 time for -- let's say, when we have a
12 solicitation process, we bring, you know,
13 this is what the applicant put. Like they
14 put everything in the world. But during
15 negotiation, based on the amount of money
16 they receive, we negotiate and tweak
17 certain things. And based on legal
18 opinion we receive from the assistant
19 County Attorney's Office, they say we
20 probably need to add those two languages
21 when we make such, you know, major
22 changes. That doesn't change the intent
23 of the RFP. We still have to come back to
24 the Board for certain things. That's the
25 resolution that Jim was referring to give

1 him authority to change certain things.

2 So until such time we, you know,
3 clarify things in the procurement policy
4 to make it clear what is staff authority
5 versus what the Board explicitly need to
6 approve, the advice we received is to
7 include those two languages.

8 BOARD MEMBER HARDEMON: Please.

9 CHAIRMAN HOFFMAN: That wasn't your
10 question.

11 BOARD MEMBER HARDEMON: Correct.

12 MS. FABIAN: Well, you asked for the
13 waiver. In terms of waiver, there's
14 another part in terms of if we drop
15 people.

16 BOARD MEMBER HARDEMON: Right. What
17 I'm trying to figure out is if -- and here
18 we're speaking to specifically 22
19 providers that we are waiving the
20 procurement process for, and these are
21 renewals.

22 And so my question is, were there any
23 other providers that were not renewed that
24 we can't see here that are not in
25 consideration for?

1 MS. *****: No, we haven't dropped
2 any providers. When we do that, we
3 include that in the reso as well. Like in
4 March, I think we dropped one provider to
5 the resolution. We identified why we
6 dropped the provider and was included in
7 the reso, so...

8 BOARD MEMBER HARDEMON: Thank you.

9 CHAIRMAN HOFFMAN: Any other
10 questions or comments?

11 Okay. Hearing none, all those in
12 favor?

13 COLLECTIVELY: Aye.

14 CHAIRMAN HOFFMAN: All those opposed?
15 The motion carries.

16 Turn it over --

17 BOARD MEMBER BAGNER: Yeah. Now that
18 the resolution has been voted on, can I
19 ask for clarification to Isaac's point
20 before?

21 So if we're in a discussion, but we
22 have to recuse ourselves from the
23 resolution, should we not be speaking to
24 that discussion either? Can we just have
25 a County attorney --

1 MS. KOBRINSKI: We can get
2 clarification from the Commission on
3 Ethics. Your rules don't require you to
4 leave the room if you have a conflict. .
5 You have to announce it.

6 This was a little different, because
7 you had a presentation and then you were
8 speaking generally. And I don't recall if
9 you were speaking specifically about your
10 reso that you had to recuse on or one of
11 the other ones that was on the consent
12 agenda, but we can seek guidance from the
13 Commission on Ethics about how to handle
14 that going forward. For now, you've
15 announced your conflict, and, no, I don't
16 think there's any (inaudible).

17 BOARD MEMBER SALVER: I was just
18 going to say, Dan, that I didn't hear him
19 speak to the resolution as much as saying,
20 which I know he was speaking about the
21 program, but that they were using
22 evidence-based programming, and it was not
23 to a specific program or anything else.
24 So I think it was a more generic comment,
25 not intending to support a particular

1 resolution.

2 And that's one of the reasons why I
3 objected to this format to begin with,
4 'cause I think it's -- I don't think it's
5 in -- you know, I don't think it's best
6 practices to take \$50 million worth of
7 resolution in a consent agenda, you know,
8 because of issues like this. You know, in
9 other words, each item was not presented
10 specifically. It was presented as a
11 package. You know, beautifully presented
12 by Bevone. And, you know, we -- you know,
13 it wasn't segmented. You know, it's
14 enough that we're approving 45 providers
15 and 22 providers in bulk.

16 You know, I think, you know, we
17 should be -- you know, items of this
18 nature, which total up to \$23 million and
19 15 million or 14 million, should be taken
20 separately, so we can bifurcate folks that
21 have a conflict of interest, take them out
22 of the discussion and vote properly on
23 each one.

24 CHAIRMAN HOFFMAN: Commissioner.

25 BOARD MEMBER HARDEMON: I must say

1 that's opinion, right? You can take a
2 large sum of money and handle it in a
3 consent agenda, if you'd like. It is a
4 consent agenda, however, each item is
5 separate. So if you want to pull a
6 certain item to discuss, you have all the
7 right to do that. This Board can.

8 I would suggest that if you have a
9 conflict with an item, you should not
10 speak to that item, and that's why the
11 comment is made about the generic. The
12 generic comment about how you move forward
13 on things is perfectly allowable, but if
14 there's an item, you should not be pro or
15 con or voting on that item. You should
16 not lend any sort of lens of support or
17 nonsupport, if you will, for a particular
18 item.

19 But I'll tell you, I mean, that was a
20 long presentation. We could have easily
21 gone through each and every item without
22 having gone through that long
23 presentation, right? And we don't
24 necessarily need the presentation.
25 Really, this Board can decide how it wants

1 to move forward with hearing or not
2 hearing items, but, you know, each and
3 every item one by one is a daunting task
4 as well, especially if we were getting
5 public comment. We're lucky here we don't
6 get a lot of public comment, but we can
7 particularly, you know, get a room full of
8 people who want to talk for a couple of
9 minutes on every single item, that could
10 happen as well.

11 So I think, you know, the body is
12 doing pretty good in that sense, but we
13 just need to be very keen. If you've ever
14 done this to the point where you're going
15 to be criticized in the front of the Miami
16 Herald, you just have to be very much
17 aware that you should not be commenting on
18 things that you have a potential conflict
19 on. That is all.

20 CHAIRMAN HOFFMAN: I will say that,
21 at the recent strategic planning session,
22 the Board retreat, that one of the
23 comments that the Board discussed was
24 having more presentation so that the Board
25 understood a little bit more as a whole

1 what the Board was voting on.

2 We do have obviously committee
3 meetings where directors can show up to
4 their particular committees, but as many
5 of you know, we have a Board that rotates
6 through for various reasons.

7 So we can find a balance, I'm sure,
8 but I do agree that any director, Isaac,
9 you can pull all the items from the agenda
10 in the future, if you don't feel it's
11 appropriate, because of the amount or
12 number of providers, but we're still
13 wanted to try it out, at least when I was
14 chair, because we felt it would make it,
15 A, more efficient, but also, B, a little
16 bit more educational to the Board as to
17 what they're voting on. And, in this
18 case, they were thematically together in
19 terms of what we're voting on.

20 BOARD MEMBER ARSENAULT: I would just
21 be curious for counsel to advise the
22 group. Just because, I mean, the makeup
23 of this Board is we brought experts in the
24 community, right, so how do we strike that
25 balance with allowing them to provide

1 their expertise on that, whereas we're not
2 going to have one provider providing
3 throughout the entire community? So I
4 would just like to strike that. I
5 wouldn't want, as a part of this, a legal
6 and reasonable comment to be made by an
7 expert that is part of this Board be
8 silenced because of this, so I would look
9 to the County to help guide us so
10 directors do feel comfortable, when
11 appropriate, in speaking on that. That
12 would be my thought.

13 CHAIRMAN HOFFMAN: You want to speak
14 to that?

15 MS. KOBRINSKI: I'm not the
16 Commission on Ethics, so I'm going to have
17 to defer to them, but I think we should
18 talk to them about proper scopes of
19 presentations and discussion.

20 I would assume they would say, if
21 you're not speaking about a specific
22 resolution, or for or against something,
23 you're talking more general, that that
24 would be sufficient.

25 The Trust does have an appearance of

1 impropriety standard, which is higher than
2 most conflicts of interest. So, you know,
3 if at any point it appears that there's a
4 conflict, then, you know, Board Members
5 should be cautious and act accordingly.

6 CHAIRMAN HOFFMAN: I do think what
7 the Commissioner said was clear, if you
8 are recused from a resolution or a
9 resolution that's going to be presented,
10 we should not speak at this point unless
11 we have the advice of the County attorney.

12 Any other comments on that one? I'll
13 turn it over to Dr. Bagner.

14 BOARD MEMBER BAGNER: All right.
15 This was brought to me because of a
16 conflict for our chair of our committee.

17 Resolution 2024-41. This is an
18 authorization to negotiate and execute a
19 single source contract with Miami-Dade
20 Family Learning Partnership for Reach Out
21 and Read early literacy programming, in a
22 total amount not to exceed \$700,000 for a
23 term of 12 months, commencing October 1,
24 2024, and ending September 30, 2025.

25 BOARD MEMBER HARDEMON: So moved.

1 BOARD MEMBER BAGNER: Thank you.

2 Do I have a second?

3 BOARD MEMBER SALVER: Seconded,

4 Salver.

5 BOARD MEMBER BAGNER: Great. Just a

6 bit background. Reach Out and Read is a

7 national --

8 MS. KOBRINSKI: Any recusals?

9 BOARD MEMBER BAGNER: Oh, thank you.

10 Any recusals?

11 VICE CHAIR HOLLINGSWORTH: Recusal.

12 The CEO of the agency where I'm employed

13 is the board chair of the Family Learning

14 Partnership.

15 BOARD MEMBER BAGNER: Any other

16 recusals? Okay.

17 Reach Out and Read is a national

18 model. It's endorsed by the American

19 Pediatrics and Champions of Positive

20 Effects of reading daily and engaging a

21 language, rich activities with young

22 children within positive parent

23 interactions. The program trains medical

24 providers on the importance of early

25 relationships, about the foundation for

1 healthy brain development and emergence of
2 early literacy and social/emotional skills
3 and provides books to the providers to
4 give to families.

5 The Miami-Dade Family Learning
6 Partnership holds exclusive distributor
7 rights for Reach Out and Read in Florida.
8 And the national Reach Out and Read Center
9 awards this distinction, and it's an
10 essential component of The Children's
11 Trust Early Literacy Parenting support and
12 offers a unique opportunity to encourage
13 early relationships and literacy through
14 the trusted pediatric care providers.

15 So with that, any comments,
16 questions? Okay, hearing none, all those
17 in favor?

18 COLLECTIVELY: Aye.

19 BOARD MEMBER BAGNER: Opposed?

20 Resolution passes unanimously.

21 Back to you, Madam Chair.

22 VICE CHAIR HOLLINGSWORTH: Thank you,
23 Dan.

24 Resolution 2024-42. Authorization to
25 negotiate and amend a contract with the

1 Miami-Dade County Community Action and
2 Human Services Department for local match
3 funding for the Federal Early Head Start
4 Child Care Partnership, the EHS-CCP grant,
5 to add an additional \$400,000 of match
6 funding, contingent upon a federal funding
7 award, making the total contract amount
8 \$1,250,000, for a term of 12 months,
9 commencing October 1, 2024, and ending
10 September 30, 2025.

11 May I have a motion, please?

12 BOARD MEMBER BURGOS: Recusal.

13 VICE CHAIR HOLLINGSWORTH: Thank you.

14 BOARD MEMBER SALVER: I'll move it.

15 VICE CHAIR HOLLINGSWORTH: Thank you.

16 And a second?

17 BOARD MEMBER BENDROSS-MINDINGALL:

18 Second, Mindingall.

19 VICE CHAIR HOLLINGSWORTH: Okay.

20 Very well. Now recusals, please.

21 BOARD MEMBER BURGOS: Cathy Burgos,
22 chief community services officer for the
23 office of the Mayor. Community Action
24 Services is one of the departments within
25 my portfolio. Thank you.

1 VICE CHAIR HOLLINGSWORTH: Thank you,
2 Ms. Burgos.

3 Further recusals?

4 BOARD MEMBER HARDEMON: See, this
5 always goes back to the question when we
6 asked do Miami-Dade County Commissioners
7 need to recuse themselves on items such as
8 this.

9 MR. HAJ: Well, this based on the
10 former ethics opinion, Cathy, you do not
11 need to recuse, and, Commissioner, you do
12 not need to recuse on this.

13 BOARD MEMBER BURGOS: Okay. Better
14 to be safe than sorry.

15 MS. KOBRINSKI: You're welcome to, if
16 you'd like to.

17 BOARD MEMBER SALVER: I have a
18 question, Ken. So what is the difference
19 between these items, which were taking
20 separately, and the consent -- like why
21 aren't these items -- why aren't these
22 part of the consent agenda? Like what was
23 the difference between the items in the
24 consent agenda and these items?

25 MR. HAJ: The way we group the

1 consent is they need to be, like,
2 like-minded or grouped. For that, we saw
3 in front of you were regarding parent
4 strengthening and family strengthening.
5 There were a group. There was a common
6 theme with those.

7 BOARD MEMBER SALVER: But 211 line is
8 a 211 line.

9 MR. HAJ: It's still within our
10 initiative family strengthening.

11 BOARD MEMBER SALVER: Where are those
12 in the four?

13 MR. HAJ: Yes. That's why we brought
14 those four as a group.

15 VICE CHAIR HOLLINGSWORTH: Thank you.

16 Moving on now to discussion. Since
17 1965, the Federal Head Start program has
18 provided comprehensive early education and
19 support services for 3-and-4-year-old
20 children living in families earning below
21 the poverty level. In recognition of the
22 importance of the earliest years in
23 children's development, the Early Head
24 Start program was established in 1994 to
25 serve children from birth to three years

1 of age. In 2024, the Federal Government
2 made available \$100 million to expand
3 Early Head Start services nationally.
4 These funds will be awarded competitively
5 to grantees nationwide to expand access to
6 high quality comprehensive services for
7 infants and toddlers living in families
8 earning below the federal poverty level.
9 Local match contributions are continued --
10 are contingent, pardon me, on a successful
11 award.

12 Directors, comments, feedback on this
13 resolution? Hearing none, all those in
14 favor?

15 COLLECTIVELY: Aye.

16 VICE CHAIR HOLLINGSWORTH: Are there
17 any opposed? The resolution carries.

18 Resolution 2024-43. Authorization to
19 execute a funder collaboration contract
20 with the U.S. Soccer Foundation to support
21 the continuation of the Soccer for Success
22 program and the expansion of the Just Ball
23 program, in a total amount not to exceed
24 \$300,000, for a term of 14 months,
25 commencing August 1, 2024, and ending

1 September 30, 2025.

2 May I have a motion, please?.

3 BOARD MEMBER GRIMES-FESTGE: Move.

4 VICE CHAIR HOLLINGSWORTH: Second?

5 BOARD MEMBER DUNN: Second, Richard
6 Dunn.

7 VICE CHAIR HOLLINGSWORTH: Thank you.

8 Are there any recusals? With no
9 recusals, moving to discussion.

10 The selection of the Miami-Dade
11 County, of Miami-Dade County as a host for
12 the 2026 FIFA World Cup, presents a unique
13 opportunity to expand upon the
14 longstanding partnership between the U.S.
15 Soccer Foundation and The Children's
16 Trust, through its Miami-Dade Soccer
17 initiative. This initiative intends to
18 create a long-term legacy of soccer in the
19 community. Also giving youth from
20 under-resourced and underserved
21 communities safe places to play in an
22 effective an relevant programming.

23 The Trust soccer initiative, together
24 with Griffin Catalyst and a host of
25 community-based partners, is improving the

1 lives of 10,000 -- ten's of thousands of
2 youths living in under-resourced areas
3 across the County. The goal here is to
4 improve the health and well being of at
5 least 36,000 children by 2020 -- by 2030.

6 Feedback? Comments?

7 Mindy.

8 BOARD MEMBER GRIMES-FESTGE: I just
9 want to say, I was at the opening of the
10 U.S. Soccer Foundation, underneath I-95,
11 and it was amazing how many families were
12 there with their children. It was just
13 excitement, and, you know, I was glad to
14 see so much of that happening. And, you
15 know, thinking about how we can do that in
16 other communities, I think that's what we
17 need to do, because it really brought out
18 families and children. Families were able
19 to meet other families, the kids were all
20 playing together and it gave them some
21 experiences that they otherwise may never
22 have had. So I just wanted to say that.

23 VICE CHAIR HOLLINGSWORTH: Thank you
24 for your comment.

25 Further comment? Pastor.

1 BOARD MEMBER DUNN: I appreciate your
2 comments.

3 Years ago, the Reverend Jesse Jackson
4 made a statement in terms of African
5 Americans. He said, "We do best what we
6 do most." And what tends to happen, when
7 we get outside of the sphere of what we're
8 accustomed to, i.e. football, basketball,
9 we start venturing in other areas, we do
10 tend to do better. So this is an
11 opportunity for an expansion, if you will,
12 or exposure to something different.

13 I'm not going to get into it, but it
14 speaks of -- it just blows away the
15 statement years ago by Jimmy the Greek,
16 and I won't go into it. I think some of
17 us may be familiar with that statement.
18 That was just totally preposterous, just
19 totally out of line, but we do best what
20 we do most.

21 And when you look at the love of
22 soccer, particular -- particularly among
23 our Hispanic and Haitian communities, I
24 think it's a big opportunity that we need
25 to take advantage of.

1 VICE CHAIR HOLLINGSWORTH: Thank you,
2 Pastor.

3 BOARD MEMBER DUNN: Thank you.

4 VICE CHAIR HOLLINGSWORTH: Further
5 feedback from the Board? Hearing none,
6 all those in favor?

7 COLLECTIVELY: Aye.

8 VICE CHAIR HOLLINGSWORTH: Are there
9 any opposed? The resolution carries.

10 Back to you, Mr. Chair.

11 CHAIRMAN HOFFMAN: Okay. Thank you.

12 I'll turn it over to Jim for the CEO
13 report.

14 MR. HAJ: Chair, thank you. I'll be
15 brief.

16 Last Saturday, Young Talent Big
17 Dreams, was at Actors Playhouse, we saw
18 talent across this community showcased in
19 a very big way. 286 kids tried out
20 throughout the course of several months.
21 117 -- 72 -- 117 hit the semifinals and
22 the finals took place last weekend. And
23 we normally have Champions of Children,
24 the person who's presenting it by one of
25 the finalists that are up there. To

1 Natalia, Ximena, and her team, thank you
2 for putting that together.

3 Monthly media highlights. Great work
4 around the community. They're in your
5 packet as well as the amendment report,
6 quarterly report.

7 Financial disclosures have been sent
8 to you electronically to the Board. It's
9 a little new this year. It's a little --
10 it's electronic. There's a lot of
11 information now that they're asking for,
12 so please those are due by July 1st.

13 And important, TRIM 1, TRIM 2,
14 September 9th and September 16th, that we
15 have Board attendance. They're on your
16 calendars.

17 And just for all the mothers on the
18 Board, who hopefully had a belated Happy
19 Mother's Day. Thank you.

20 BOARD MEMBER SALVER: Ken.

21 CHAIRMAN HOFFMAN: Yes.

22 BOARD MEMBER SALVER: I just want to
23 make a comment on -- we're all -- well, I
24 know I already have to do it, but
25 everybody on the Board has to file a Form

1 6. Is that not correct?

2 CHAIRMAN HOFFMAN: That's correct.

3 BOARD MEMBER SALVER: Okay, yeah. So
4 just FYI, I mean, you know, all elected
5 officials know about Form 6. Form 6 is
6 not a little different than it was before.
7 It's a lot different than it was before.
8 There is a tremendous -- and I'm saying
9 this as an expert, 'cause I am a CPA, and
10 I made a presentation, you know, statewide
11 about Form 6 from an elected official's
12 points of view, and it is a lot of detail.
13 You know, it's not, like, general, you
14 know, what your -- I mean, it analyzes
15 your income from every source. It
16 analyzes all your assets, all your debts,
17 your net worth, et cetera, et cetera. And
18 when you push send on that program, you're
19 doing it under the penalties of perjury.
20 So, you know, Form 6, it's quite different
21 than Form 1, which we are used to filing.
22 And just fasten your seatbelt when you see
23 it, because you need to prepare it. You
24 need to do it right. So I just wanted to
25 add that.

1 CHAIRMAN HOFFMAN: Yes.

2 BOARD MEMBER BENDROSS-MINDINGALL:

3 Thank you.

4 Just to give kudos to Natalia and the
5 group, we're going to save a lot of lives,
6 Jim, especially with the swim programs.
7 And I understand that the Mayor and
8 Commissioners, especially this guy sitting
9 next to me, his district, we met there,
10 and the children were anxious to show us
11 that they could swim. There was one who
12 cried real hard for his mommy, and they
13 told me that at the end of the day, he
14 would be swimming. So I thank you all for
15 moving on that as rapidly as you did. And
16 check out the parks and let's see if we
17 can encourage more participation. That
18 will be helpful. Thank you very much.

19 CHAIRMAN HOFFMAN: Great.

20 Any other comments before we close?

21 Thank you, All. Meeting is adjourned.

22 MR. HAJ: Thank you, Mr. Chair.

23 (Thereupon, at 5:25 p.m., the meeting
24 was adjourned).

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CERTIFICATE OF REPORTER

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

I, Lorena Ramos, National Registered Professional Reporter, do hereby certify that I was authorized to and did stenographically report the proceeding of the Board of Directors meeting, held on the 13th day of May 2024; and that the foregoing transcript, pages 1 through 79, is a true record of my stenographic notes.

DATED this 06/03/2024 in the City of Miami, Miami-Dade County, Florida.

Lorena Ramos

LORENA RAMOS, COURT REPORTER
Registered Professional Reporter