



**Program Services and Childhood Health  
Committee Meeting Transcript**

**March 2, 2023**

THE CHILDREN'S TRUST  
PROGRAM SERVICES AND CHILDHOOD HEALTH COMMITTEE MEETING  
(IN PERSON QUORUM WITH SOME VIRTUAL ATTENDANTS)

## MEETING MINUTES

**CERTIFIED  
ORIGINAL**

The MDC Children's Trust Meeting, Program Services and Childhood Health Committee Meeting was held on Thursday, March 2, 2023, commencing at 3:30 p.m., at 3250 Southwest 3rd Avenue, United Way, Ryder Room, Miami, Florida 33129. The meeting was called to order by Pamela Hollingsworth, Chair.

## AUDIO TRANSCRIPTION

## BOARD MEMBER APPEARANCES:

PAMELA HOLLINGSWORTH, Chair

KAREN WELLER, Vice Chair

DR. EDWARD ABRAHAM

LAURA ADAMS

BR. DANIEL BAGNER

MARY DONWORTH

GILDA FERRADAZ

LOURDES GIMENEZ

MARISSA LEICHTER

1 DR. CLARA LORA OSPINA

2 LEIGH KOBRINSKI

3

4 STAFF MEMBER APPEARANCES:

5

6 AMANDA GORSKI

7 BLAKE BROWN

8 CAROL BROGAN

9 DANIELLE BARRERAS

10 GARNET ESTERS

11 IMRAN ALI

12 JACQUES BENTOLILA

13 JAMES R. HAJ

14 JUANA LEON

15 KATHLEEN DEXTER

16 LISANNE GAGE

17 LISETE YERO

18 NATALIA ZEA

19 RACHEL SPECTOR

20 TATIANA CANELAS

21 WILLIAM KIRTLAND

22 YESENIA REYES

23 YULIET ALFONSO

24

25

## 1 GUEST APPEARANCES:

2

3 GUERLINE ANDERSON, Borinquen Medical Centers

4 SACHA FILS, Cayuga Centers

5 HELEN VILORIO, Girl Power Rocks, Inc.

6 MELISSA WHITE, KBCF

7 ANDREW BRITTON, Key Biscayne Community Foundation

8 ABNER REYES, La Viña del Señor

9 TERRI MORALES, La Viña del Señor – Kidz XL

10 DANNIELLE DIXSON, Miami Lighthouse for the Blind

11 and Visually Impaired

12 PRECIOUS BAKER, Jessie Trice Community Health

13 System

14 EDNA LORENA POLO, Jessie Trice Community Health

15 System

16 VIVIANE CUZWE, CHI

17 JOANNE PIERRE, Jessie Trice Community Health

18 System

19 MARIA FERRARIS, University of Miami

20 LISA ST. PHILUS, Jessie Trice Community Health

21 System

22

23

24

25

1           P R O C E E D I N G S

2       (Thereupon, the following proceedings commenced  
3 at 3:30 p.m.)

4           MS. HOLLINGSWORTH: Good afternoon,  
5 everyone. We're going to get started in just a  
6 moment.

7           Good afternoon, everyone. We're going to  
8 get started. Welcome. Good to see everyone  
9 here today.

10          Do we have any public comments?

11          MS. LEON: No public comments.

12          MS. HOLLINGSWORTH: Okay. Thank you very  
13 much. So, we will begin. Committee members,  
14 our first order of business is the approval of  
15 the January 12th, 2023, Program Services and  
16 Childhood Health Committee minutes. By now, you  
17 will have had an opportunity to review the  
18 minutes which are in your packet.

19          May I have a motion to approve the minutes  
20 as presented?

21          MS. FERRADAZ: I move for approval,  
22 Ferradaz.

23          MS. HOLLINGSWORTH: Thank you. Second?

24          MS. WELLER: Second. Weller.

25          MS. HOLLINGSWORTH: Okay. First, Ferradaz,

1 second, Weller. All those in favor?

2 (Chorus of aye.)

3 MS. HOLLINGSWORTH: Any opposed? The  
4 minutes are approved. Thank you for moving up  
5 on my screen.

6 So, we move -- we move now to the  
7 resolutions. Resolution 2023-A. Authorization  
8 to negotiate and execute contracts with six  
9 providers identified herein to deliver  
10 comprehensive school-based health services in a  
11 total amount not to exceed \$16,250,000 for a  
12 term of 12 months, commencing July 1, 2023, and  
13 ending June 30, 2024. Subject to funding  
14 appropriations, and also to request  
15 authorization to use funds from the initiative  
16 to leverage federal funding through the Low-  
17 Income Pool program, also known as LIP.

18 May I have a motion, please?

19 MS. DONWORTH: So moved, Donworth.

20 MS. HOLLINGSWORTH: Thank you, Donworth. A  
21 second?

22 MR. ABRAHAM: Second, Abraham.

23 MS. HOLLINGSWORTH: Second is Abraham. Are  
24 there any recusals? Hearing no recusals.

25 Moving to a discussion, feedback from the

1 committee. Let me just briefly remind you that  
2 this county-wide school -- school health program  
3 is implemented in collaboration with Miami-Dade  
4 County Public Schools and the Department of  
5 Health.

6 It has provided -- it is provided in 145  
7 school health suites across 1 -- 141 Miami-Dade  
8 County Public Schools with a collective student  
9 population of nearly 108,000. For this current  
10 year, from the start of the school year, which  
11 is through early December, the programs have  
12 delivered the following services.

13 52,000 students served through more than  
14 110,000 school health visits, and about 26,300  
15 BMI screenings, and nearly 24,000 vision  
16 screenings. And as a reminder, the Low-Income  
17 Pool comprises a broad allotment of State and  
18 federal funding, primarily through  
19 intergovernmental transfers from local  
20 governments matched by federal funds through  
21 AHCA.

22 And with that the floor is open for the  
23 committee feedback. Dr. Abraham?

24 MR. ABRAHAM: Yeah. So, I think this is a  
25 great program. When I was discussing it, or

1 thinking about it at some point, just looking at  
2 the staffing would be good. Just to make sure  
3 that the staffing is appropriate in the clinic.  
4 People will be using nurses, the mental health  
5 professionals, social workers, and everybody  
6 correctly, given the volume of students in each  
7 of the clinics, for example, that are being  
8 seen.

9 So, at some point, I just think it needs to  
10 be revisited, not because -- it's a wonderful  
11 program, no question at all about that, but just  
12 to make sure that it's operating in the most  
13 efficient way possible.

14 MS. HOLLINGSWORTH: Thank you, Dr. Abraham.

15 MR. BAGNER: Madam Chair, in a similar or  
16 related comment. I was wondering if there was  
17 information. I saw that there was very clear  
18 information about how many kids were referred  
19 and then actually received follow-up services  
20 for vision. I think it was for BMI scores and  
21 for oral hygiene, or oral -- oral healthcare,  
22 but not for mental health. Mental said, X  
23 number of kids were referred, but we don't know  
24 how many were actually received services like  
25 the others.



1 Do -- do we have that information, or can  
2 we find that information out?

3 MS. WELLER: So, we -- so, we do have --

4 MS. HOLLINGSWORTH: Your mic's not on,  
5 Karen. Maybe you can lean to another?

6 And just to remind you to, please keep your  
7 mics on. Keep your mics on green today.

8 MS. WELLER: It is on green.

9 MS. HOLLINGSWORTH: It is now.

10 MS. WELLER: So, we do have the numbers  
11 referred and we did say where they have been  
12 referred to. From there is up to the referral  
13 agency to actually do that following -- follow-  
14 up. So, exactly who comes back and actually  
15 does go to the --

16 MR. BAGNER: Right. I mean, we have the  
17 information for -- it seems like there's the  
18 information provided for the other areas of  
19 physical health, right? It says, like, X number  
20 of children were referred, and X number of  
21 children actually received services. So, I'm  
22 just wondering if we can know how many actually  
23 received those referral to mental health  
24 services.

25 MS. WELLER: We can find that out.

1 MR. DUNN: Yeah. Laura.

2 MS. ADAMS: Yeah. I was just going to add  
3 that the reason that you see that receipt for  
4 vision is because we actually pay for this  
5 vision services, the vision -- services and the  
6 glasses. We pay for that, so then they report  
7 to us and the services that they deliver.

8 When we make referrals for BMI, we don't  
9 automatically get a letter back. The nurses  
10 have to reach out.

11 So -- so, the referral follow-up is an area  
12 where we've been working with the -- with the  
13 nurses on, but it's -- they reach out to the  
14 providers, but if the providers or the parents  
15 don't get back to them and say, yep, they saw  
16 the doctor, or yes they got -- also, I just  
17 wanted to add specifically about mental health.

18 Some -- sometimes, I won't say many times,  
19 but I think more times now than in the past,  
20 those referrals are not going out into the  
21 community somewhere because the school system  
22 has built a very robust mental health division  
23 department. I'm not sure what their right --  
24 what the label is for the unit, but they've  
25 hired lots of mental health staff in the past

1 several years.

2 We added 40 mental health professionals, as  
3 you would recall, to this initiative, I think, a  
4 cycle or so ago. So, a lot of the services get  
5 given either by our health team or by another  
6 school mental health professional, so then it's  
7 not really sort of an external referral that  
8 would be tracked in the same way.

9 MR. BAGNER: Right. That all makes sense.  
10 I just -- wouldn't it be possible to just ask  
11 the families, ask the children that we refer,  
12 hey, did you get your services we referred you  
13 to? Just a simple yes, no. And then -- I mean,  
14 we're referring to so many kids and -- and it  
15 would just be helpful to make sure that those  
16 referrals and those screenings are paying off,  
17 and they're actually getting the support they  
18 need.

19 MS. ADAMS: Absolutely. Yeah.

20 MR. BAGNER: I think, I brought that up  
21 before so I'm just -- that's why -- about this  
22 initiative.

23 MS. ADAMS: We have been working on that in  
24 Our Family and Neighborhood Support  
25 Partnerships, building out some supports within

1 the system that we built to help automate and  
2 track more of those community referrals. Just  
3 that hasn't hap --transferred over to all the  
4 other initiatives yet. Yeah, that -- that are  
5 involved in referrals, but yes.

6 MR. BAGNER: That'd be -- I mean specific  
7 to that mental health because it seemed like for  
8 the others based on the reasons you provided, we  
9 have those data because those are things we paid  
10 for, but the metal health is particularly  
11 important.

12 MS. HOLLINGSWORTH: Thank you, Dan.

13 For the feedback from the committee?

14 Hearing none. All those in favor?

15 (Chorus of aye.)

16 MS. HOLLINGSWORTH: Are there any opposed?

17 The resolution carriers.

18 Resolution 2023-B. Authorization to enter  
19 into a purchase agreement with University of  
20 Miami Department of Pediatrics to support the  
21 Pediatric Mobile Clinic in providing  
22 comprehensive healthcare -- health services  
23 throughout Miami-Dade County in a total amount  
24 not to exceed \$100,000 for a term of 12 months,  
25 commencing July 1, 2023, and ending on June 30,

1 2024.

2 May I have a motion, please?

3 MS. GIMENEZ: So moved, Gimenez.

4 MS. HOLLINGSWORTH: Thank you, Gimenez. A  
5 second?

6 MS. WELLER: Second, Weller.

7 MS. HOLLINGSWORTH: Second is Weller. Are  
8 there any recusals?

9 Moving now to discussion. I'll remind you  
10 that this Pediatric Mobile Clinic aims to reduce  
11 healthcare disparities by providing  
12 comprehensive medical care to underserved  
13 children. Furthermore, it promotes a healthy  
14 lifestyle through education in the communities  
15 served until families can secure permanent,  
16 long-term healthcare.

17 And you would have seen some activities  
18 that took place on -- between January 2022 to  
19 November 2022, in your packet.

20 Feedback, observations, discussion from the  
21 committee? Hearing none. All those in favor?

22 (Chorus of aye.)

23 MS. HOLLINGSWORTH: Are there any opposed?

24 The resolution carriers.

25 Resolution 2023-C. Authorization to

1 negotiate and execute a contract with Miami  
2 Lighthouse for the Blind and Visually Impaired,  
3 Inc., for a comprehensive vision program for a  
4 term of 12 months, commencing July 1, 2023, and  
5 ending  
6 June 30, 2024, and a total amount not to exceed  
7 \$500,000.

8 May I have a motion, please?

9 MS. DONWORTH: So moved, Donworth.

10 MS. HOLLINGSWORTH: Thank you. First is  
11 Donworth. A second?

12 MR. BAGNER: Second, Bagner.

13 MS. HOLLINGSWORTH: Second is Bagner --  
14 Bagner. Are there any recusals?

15 And moving to discussion with a good  
16 reminder that vision impacts a child's physical,  
17 cognitive, and social development, and good  
18 vision predicts better academic achievement for  
19 school-aged children. Early identification of  
20 vision problems is critical to a child's health  
21 and school outcomes.

22 This program is countywide and is  
23 implemented by Miami Lighthouse for the Blind  
24 and Visually Impaired. And during the first  
25 five months of the current contract year, the

1 number of eye examinations completed is 3,009,  
2 and eyeglasses provided are 1,606.

3 Feedback? Conversation from the committee?

4 Hearing none. All those in favor?

5 (Chorus of aye.)

6 MS. HOLLINGSWORTH: Are there any opposed?

7 The resolution carries.

8 Moving to Resolution 2023-D. Authorization  
9 to negotiate and execute contracts with three  
10 providers identified herein to deliver oral  
11 health preventive services in a total amount not  
12 to exceed \$548,014 for a term of 12 months  
13 commencing  
14 October 1, 2023, and ending September 30, 2024.

15 May I have a motion, please?

16 MR. ABRAHAM: So moved, Abraham.

17 MS. HOLLINGSWORTH: Motion is Abraham. And  
18 a second?

19 MS. LORA OSPINA: Second, Lora Ospina.

20 MS. HOLLINGSWORTH: Thank you. Lora --  
21 Lora Ospina. Are there any recusals?

22 MS. WELLER: Recusal, Weller. I am for the  
23 Florida Department of Health.

24 MS. HOLLINGSWORTH: Thank you, Karen.

25 Other recusals? All right. Then moving to

1 discussion. Feedback from the board?

2 MS. FERRADAZ: Madam Chair --

3 MS. HOLLINGSWORTH: From committee?

4 MS. FERRADAZ: -- I have -- I see that the  
5 number contract and -- and the actual children  
6 served in '21, '22, there -- the actual children  
7 served was a lot lower than the contract number.  
8 I was wondering if we need to do more -- more  
9 outreach or what -- what the reason for that  
10 was?

11 MS. HOLLINGSWORTH: Staff? Thank you.

12 MS. BROGAN: Carol Brogan, the Children's  
13 Trust Associate Director. One of the reasons  
14 was during this time period, we still had a lot  
15 of the COVID precautions in place. So, in that  
16 early school year, if a child had a cough, they  
17 couldn't be seen. There were so many -- there  
18 were a lot of reasons behind that given that the  
19 child was scheduled to be seen that day, they  
20 couldn't be seen on that day.

21 So, we -- now things are improving a lot in  
22 that area, but we still have a lot of those  
23 precautions. And every agency provider has  
24 different criteria that they are abiding by for  
25 the children to be seen.



1 MS. HOLLINGSWORTH: Thank you. Any other  
2 questions, observations from the committee?

3 Hearing none. All those in favor?

4 (Chorus of aye.)

5 MS. HOLLINGSWORTH: Are there any opposed?

6 Resolution carries.

7 Resolution 2023-E. Authorization to  
8 negotiate and execute a contract with the Public  
9 Health Trust of Miami-Dade County d/b/a Jackson  
10 Health System, in partnership with the  
11 University of Miami Miller School of Medicine,  
12 to implement Miami's Injury Free Coalition for  
13 Kids in a total amount not to exceed \$445,000  
14 for a term of 12 months, commencing October 1,  
15 2023, and ending September 30, 2024.

16 May I have a motion, please?

17 MS. GIMENEZ: So moved, Gimenez.

18 MS. HOLLINGSWORTH: Moved by Gimenez, and a  
19 second?

20 MR. BAGNER: Second, Bagner.

21 MS. HOLLINGSWORTH: Second is Bagner. Are  
22 there any recusals?

23 MS. LORA OSPINA: Recusal, Lora Ospina. I  
24 work for the Public Health Trust.

25 MS. HOLLINGSWORTH: Okay. That's one

1      recusal. Other recusals?

2           Okay. Let's move into discussion. As you  
3      are no doubt aware unintentional injuries are a  
4      leading because of ER visits, hospitalizations,  
5      and death among children in the United States.  
6      The Injury Free Coalition for Kids is among the  
7      country's most effective injury prevention  
8      models, and it is a national -- a national  
9      program developed with funding from the Robert  
10     Wood Johnson Foundation.

11           The Children's Trust Funds, the Public  
12     Health Trust of Miami, d/b/a Jackson Health for  
13     countywide injury prevention and education  
14     services, which are provided virtually and in-  
15     person at learning centers and schools and in  
16     the injury-free mobile unit, and that unit  
17     travels throughout the county for events and  
18     scheduled visits with agencies funded by the  
19     Children's Trust.

20           Thoughts, feedback, questions from the  
21     committee?

22           MR. BAGNER: It's more of a comment than a  
23     question. As you said, this is addressing the  
24     leading cause of morbidity and mortality in  
25     kids. So, we're -- we're allocating 444 --

1 \$445,000, \$445,000, which in retrospect to other  
2 things, does not seem like a lot. I'm wondering  
3 if we were to have more funding potentially go  
4 to this route, what are areas that we can target  
5 more here?

6 What are things we're not doing as part of  
7 this initiative that we can be doing more of?

8 MR. BAGNER: Madam Chair, if I may?

9 Dan, as you know, we're in the midst of RFP  
10 cycles. So, we have parent -- YDs coming back  
11 to you. Parents go out the door. The next  
12 thing that we want to reconvene is the health  
13 committee this summer to really look at what Dr.  
14 Abraham has talked about our staffing levels of  
15 the clinics and our entire health movement two  
16 years ago, but to really look at the entire  
17 health portfolio.

18 So, we had this spread out again with  
19 parenting -- with FNSP. Now we're at YD,  
20 parenting going out to the door, small CBL.  
21 There's a couple of next month, but in the  
22 summertime, really take a look at the  
23 comprehensive pretty much all the resols in  
24 front of you, of what more can we do.

25 Is it more money? Is it leveraging

1 additional funds? Is it utilizing our own --  
2 our current funds and seeing how can we get  
3 greater reach in this community.

4 So that really is looking at telemedicine  
5 and everything else, and how can we -- how can  
6 we do better for all children in this community,  
7 so that's coming -- I don't want to put Laura on  
8 the spot, but sometime in summer or fall, is  
9 really kind of looking at -- it's going to be a  
10 heavy lift, and we need the bandwidth to do it  
11 with staff, and that's the next big overall  
12 portfolio review.

13 MR. BAGNER: All right. Thank you.

14 MS. GIMENEZ: I have a question.

15 MS. HOLLINGSWORTH: Yes.

16 MS. GIMENEZ: Maybe staff can answer  
17 regarding, do we have any data how students,  
18 children of different ages, are being impacted  
19 by the fentanyl and drugs that is coming across  
20 the border? Do we have that? Do we talked to  
21 children about any pills that you find in your  
22 house do not take the pill? You know, are we  
23 giving -- because I don't see, as you were  
24 saying, Dan, maybe that's an area that we can  
25 focus on and --

1 MS. ADAMS: I think one of the areas that  
2 they -- that is one of the top, you know,  
3 mortality, morbidity is around poisoning, which  
4 would address the pills in the household issue,  
5 or I guess, pills on a park bench or wherever,  
6 you know, kids might come into contact with.  
7 There is a county task force around opioid work  
8 -- opioid epidemic, and we are part of that task  
9 force.

10 I don't know a specific date or related to  
11 kids. I do know that there's, you know, of all  
12 the adults that have either overdosed or have --  
13 are fighting addiction. Many of those people  
14 are parents, and the kids are affected in that  
15 way as low as potentially through prenatal  
16 exposure, so some of our prenatal programs that  
17 we're trying to push more in the parenting, you  
18 know, portfolio focus around health issues. And  
19 then I would just tag back to say, in terms of  
20 the amount of money here, that the strategies  
21 that we use for injury prevention are lower-cost  
22 strategies.

23 So, you know, PR messaging can reach more  
24 people for less money. We're not doing, you  
25 know, individual education, and we've also used

1 strategies of trying to reach through our -- our  
2 direct service programming. So, for example,  
3 all of our home visitors that are funded through  
4 parenting go through a training with this --  
5 this contractor as part of Trust Academy on home  
6 safety, for example, what do you want to be  
7 noticing and looking for when you're in a home  
8 that you might be able to just point out and,  
9 you know, as safety risks to kids in the  
10 household?

11 So, yeah, I think that -- yeah, can we be  
12 looking at more -- this organization is very  
13 data-driven, as you can imagine, being based at  
14 a hospital and university. So, they are always  
15 kind of looking at the top causes of death and  
16 morbidity for kids and trying to adapt, you  
17 know, what they're doing in that respect. But  
18 great point, Jim, that we also -- and back to  
19 Dr. Abraham as well. We want to be looking at  
20 the health strategic planning some time in the  
21 coming months with you guys and call back the  
22 committee.

23 MS. HOLLINGSWORTH: Thank you, Laura.

24 Further comments from the committee?

25 Hearing none. All of those in favor?

1 (Chorus of aye.)

2 MS. HOLLINGSWORTH: Are there any opposed?

3 The resolution carries.

4 And our final resolution for today,

5 Resolution 2023-F. Authorization to amend

6 resolution 2022-61, and the current funder

7 collaboration agreement with Key Biscayne

8 Community Foundation with a contract term of

9 October 1, 2022, to September 2023, to increase

10 the contract amount by \$75,000 for the launch of

11 an additional Fab Lab Miami site for a new total

12 contract amount not to exceed 200,000.

13 Additionally, authorization to renew,

14 negotiate, and execute a contract with Key

15 Biscayne Community Foundation in an amount not

16 to exceed \$125,000 for the contract term of

17 October 1, 2023, to September 30, 2024.

18 May I have a motion, please?

19 MS. WELLER: So moved, Weller.

20 MS. HOLLINGSWORTH: Moved by Weller.

21 Second?

22 MS. LEICHTER: Second, Leichter.

23 MS. HOLLINGSWORTH: Thank you. A second by

24 Leichter. Are there any recusals?

25 And moving to discussion. As you know, the

1 Fab Lab is an effort by the Key Biscayne  
2 Community Foundation to expand access to STEAM  
3 for children in Miami-Dade's most underserved  
4 neighborhoods. An additional funding is being  
5 requested to this resolution to expand Fab Lab  
6 and may -- and Fab Lab Miami Makerspace and  
7 STEAM programming to the southern sector of  
8 Miami-Dade County and Homestead City with a  
9 focus, I believe, relating to -- help me out  
10 with a terminology. It was a term I'd not  
11 --

12 MS. WELLER: Agrotechnology.

13 MS. HOLLINGSWORTH: Agrotechnology, not a  
14 term I heard before. Thank you very much and  
15 fitting, indeed.

16 Feedback, observations, questions from the  
17 committee?

18 MS. ZEA: Madam Chair, I have a question.  
19 So, for the next contract term of October 2023  
20 to September 2024, they're not going to need the  
21 \$200,000 like they needed for the previous year?

22 MR. HOFFMAN: Natalia, this is an  
23 expansion.

24 Do you want --

25 MS. ZEA: The funds thing.



1 MS. ZEA: The \$75,000 in funds would be the  
2 Children's Trust component. We have other  
3 funders we're supporting, so it'd be the Trust  
4 component for the new site, but there are --  
5 essentially, what we're doing is that will cover  
6 us through the end of 2024 if it's the 75 for  
7 the South Dade site and the original 125. So,  
8 we feel comfortable with what's being proposed,  
9 and then we may be coming back at the end of  
10 2024, '25 back to that \$200,000 number. That's  
11 essentially what we've discussed.

12 MS. FERRADAZ: It says an amount not to  
13 exceed 12500 for '23 to '24. So, we're only  
14 doing the 125,000 for the -- for the following  
15 year?

16 MS. ZEA: So, my understanding is that with  
17 the 75 that we -- we're comfortable all the way  
18 to the end of 2024. So, it -- yes, because the  
19 75 is going to get expanded in this fiscal year.

20 MS. FERRADAZ: Okay. So, they're not going  
21 to need that for next year?

22 MA. ZEA: Well, it will be the non-startup  
23 cost to get through that year, and then we would  
24 circle back because at that point there would be  
25 two sites that were fully up and running to

1 maintain but thank you for -- for catching that.

2 Okay. Okay. Thank you.

3 MS. HOLLINGSWORTH: Thank you, Natalia.

4 For the questions, feedback from the committee?

5 Hearing none. All those in favor?

6 (Chorus of aye.)

7 MS. HOLLINGSWORTH: Are there any -- are

8 there any opposed? The resolution carries.

9 And punting to you, Jim, for the CEO

10 Report.

11 MR. HAJ: Madam Chair, the first one on  
12 there is Certificate Achievement for Excellence  
13 of Financial Reporting. We talked about it at  
14 the finance committee. We're going to do a  
15 report back to -- at the full board meeting, but  
16 I just wanted to congratulate Bill and the  
17 finance team, and actually, all the members of  
18 the Trust and this board.

19 This is the highest honor in government and  
20 county, and we received -- not only did we  
21 receive it this year, but we have now received  
22 it ten consecutive years. This is our tenth  
23 year receiving this award. It really goes back  
24 -- we are stewards of taxpayer money. We take  
25 this seriously.

1       The board has given us specific  
2 instructions, we work with a finance committee  
3 and our team to make sure that everything that  
4 the -- the brand that we talked about, the  
5 Trust, that we are a trusted in the community.  
6 We are trusted with taxpayer funds.

7       Huge honor. You know, we'll go more into  
8 this at the full board meeting. Going into  
9 these resols and next to bullets, pretty much  
10 what we covered. We have the health mobile  
11 units, all six of them, seven of them. We had  
12 one more join.

13       I think there's six that'll be here before  
14 the board meeting, so if you can come half an  
15 hour earlier, we'll have them parked across the  
16 street in a parking lot, that they will all be  
17 on display, the injury prevention bus, the UL  
18 mobile clinic, and all the other ones that we  
19 offer because I think it's great to see what  
20 you're -- what you are approving, live, that  
21 they'll be here right across the street.

22       So, if you come a little bit earlier -- and  
23 talk -- Ken talked about -- you do approve these  
24 resols, but we want -- we wanted the board to  
25 get back out to the field trips to see the great

1 work that's happening in the community.

2 The first one is next week at the Fab Lab  
3 that went into Resol 2023-F that you just  
4 approved. This is the one that Belafonte  
5 TACOLCY from 10:00 to 11:00. We would love to  
6 have as many board members to come and see --  
7 see this. And what Natalia was talking about  
8 that this has been expanded down to the deep  
9 south and then to follow April 12th would be the  
10 next one too at the YMCA from 3:00 to 4:00.

11 Champions for Children, our signature  
12 event. We're hoping to have 1,000 people in the  
13 room on April 27th. It's in your calendars.  
14 Our RSVPs will be coming shortly before you.  
15 Another highlight, one of our signature  
16 programs, Young Talent Big Dreams the finale is  
17 Saturday, May 13th at 7:00 p.m., where you will  
18 see the great talent of youth in this community  
19 displayed. Madam Chair, that's it for me.  
20 Thank you.

21 MS. HOLLINGSWORTH: Thank you very much.  
22 And with that we are adjourned. Have a good  
23 evening, everyone.  
24 (Thereupon, the proceedings concluded at 4:00  
25 p.m.)

1 CERTIFICATE OF TRANSCRIPTION  
2

3 The above and foregoing transcript is a true and  
4 correct typed copy of the contents of the file, which was  
5 digitally recorded in the proceeding identified at the  
6 beginning of the transcript, to the best of my ability,  
7 knowledge and belief.

8 *Cecil Clark*  
9

10 Cecil Clark, Notary Public

11 February 15, 2023  
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