

MDC THE CHILDREN'S TRUST  
PROGRAM SERVICES & CHILDHOOD HEALTH  
COMMITTEE MEETING

The Children's Trust Program Services & Childhood Health Meeting was held on Thursday, January 11, 2018, commencing at 3:26 p.m., at 3250 SW 3rd Avenue, Miami, Florida 33129. The meeting was called to order by Pamela Hollingsworth, Chair.

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BOARD MEMBERS:

Pamela Hollingsworth, Chair

Karen Weller, Vice Chair

Dr. Daniel Bagner

Rodester Brandon

Dr. Antonia Eyssallenne

Gilda Ferradaz

Tiombe-Bisa Kendrick-Dun

Marissa Leichter

Dr. Marta Perez

Laurie Weiss Nuell

Shanika Graves

Leigh Kobrinski

\* \* \*

- 1 STAFF:
- 2 Ana Sanchez
- 3 Bevone Ritchie
- 4 Blanch (Theresa) Johnson
- 5 Dalia Garcia
- 6 Deborah Robinson
- 7 Garnet Esters
- 8 Imran Ali
- 9 James Haj
- 10 Juana Leon
- 11 Juliette Fabien
- 12 Lisa Pittman
- 13 Lori (Katherine) Hanson
- 14 Maria-Paula Garcia
- 15 Marisela D'Windt
- 16 Muriel Jeanty
- 17 Patricia Leal
- 18 Rachel Spector
- 19 Stephanie Sylvestre
- 20 Tatiana Canelas
- 21 William Kirtland
- 22 Yesenia Reyes
- 23 Yurena Driggs
- 24 Zafreen Jaffery
- 25 \* \* \*

- 1 GUEST:
- 2 Florella Christie
- 3 Lynne Kunins
- 4 Octavia Woods
- 5 Karla Gottliob
- 6 Iris Kohn
- 7 David Solowitz
- 8 Sarah Mikhail
- 9 Lisa Gwynn
- 10 Isabel Chica
- 11 Kria Perez
- 12 Matthew Sheary
- 13 Obed Jauregui
- 14 Veronica Fernandez
- 15 Daniela Santana
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PROCEEDINGS

(Recording of meeting began at 3:26 p.m.)

MS. HOLLINGSWORTH: Do we have any public comments?

MS. KUNINS: Yes.

MS. HOLLINGSWORTH: We have Lynn Kunins from Flipany here with us today. Welcome.

MS. KUNINS: Happy New Year.

MS. HOLLINGSWORTH: Happy New Year to you.

MS. KUNINS: Good afternoon committee. My name is Lynn Kunins. I am the CEO and President at Flipany. And again, Happy New Year. I just wanted to say hello to you guys. We are the food and nutrition contractor with the Children's Trust funded by the Children's Trust or the Children's Trust sites.

And in months and weeks passed, you guys have always said well where's the food. Here's the food. So today, we have for the youth tomorrow, there after school power snack is what we call it. They will be getting a whole wheat wrap, turkey, spinach with a side of carrots and a side of sliced oranges. It all comes in that little box. I have brought you all one. I had one for lunch myself because I ran out of time today. I

1 welcome you to come. I didn't bring any milk, I figured  
2 we're good. So I brought you water instead of the milk.  
3 But we would have the fat free and one percent milk that  
4 would accompany the meal. I did want to give you guys a  
5 quick update on the food and nutrition program just  
6 while I'm here.

7           We are serving a lot of kids, a lot of food,  
8 and it's fantastic. And more importantly it's healthy.  
9 All of these sites that are eligible, that are  
10 Children's Trust funded, we only have six left that we  
11 are attempting to convert, that qualify for eligibility.  
12 If they move or they go to a different location, they  
13 have to be approved through the state and so on and so  
14 forth. So there's only six left to approve.

15           We are providing meals, which is a supper, and  
16 maybe a snack, maybe not, at 28 of your sites. We have  
17 35 sites that just get a snack, which isn't a too  
18 important meal, so maybe they get crackers and cheese.  
19 We are working with these sites, since they don't have  
20 the capacity to receive a full supper, which is a hot  
21 meal.

22           To receive this, what we call power snack,  
23 because it's five components and it includes all of your  
24 food groups. It is equivalent to a supper, where it's  
25 more food, and we heard from a lot of you guys from the

1 past, that the kids just aren't getting enough to eat.  
2 With that we're serving about 3900 kids a day with snack  
3 and supper. And we're drawing down, excuse me, oh yeah.  
4 I have a pretty good outdoor voice. So now I yell at  
5 you guys. And I did just a basic snapshot. Four years  
6 ago, before we were managing the projects, the  
7 Children's Trust was paying about \$50,000 a month for  
8 food to sites that weren't being covered by the  
9 Department of Health. Two years ago, it was about  
10 \$35,000 a month.

11 We now over the last year, have brought the  
12 non-eligible site food reimbursement cost to about  
13 \$17,000 a month. That's out of pocket from Children's  
14 Trust. Flipany is drawing down from the Department of  
15 Health. Approximately a \$120,000 a month in  
16 reimbursement for food procurement for the kids in  
17 Miami-Dade County. So we were super thrilled about that  
18 and without your support, we wouldn't be able to draw  
19 all those dollars. And again, that's per month, that's  
20 not per year. That's per month, each month we're  
21 feeding the kids and drawing down the dollars.

22 The last thing I wanted to show you, part of  
23 our project is we do nutrition education. So we created  
24 this fun activity book for staff and parents. We give  
25 this to all of your staff when they come to our

1 nutrition education training. Some of you may have  
2 heard of CATCH, Go, Slow, Whoa evidence based curriculum  
3 nutrition education. The Go is eat these foods all the  
4 times. Slow is eat these foods sometimes. Whoa is your  
5 cakes and cookies and pastries. We are a never say no  
6 to everything always. Everything is okay sometimes and  
7 that's really our message. So I brought this for you,  
8 the game. I will leave it up here, you guys.

9           Every single site we printed 200 of these.  
10 Every site gets them with the laminated cards so that  
11 they can do the game and the kids learn how to play the  
12 game by themselves, so that they can self-start when  
13 they get into their programming if they're waiting for  
14 something else. We also have fitness dice, which I  
15 didn't bring, which are a lot of fun. You throw them,  
16 it says 15 pushups and everybody does 15 pushups. Two  
17 new kids throw the dice and they're big fluffy pillows.  
18 So just a quick little update wanted to share with you  
19 guys. Thank you so much for your support. And please  
20 grab a power snack. Thank you.

21           MS. HOLLINGSWORTH: Thank you so much. Thank  
22 you so much for everything that you do for our children.  
23 And thank you for bringing us some healthy food. We  
24 look forward to partaking. Are there any questions for  
25 Lynn?

1 MS. KUNINS: Does anybody want one? I'll  
2 bring it to you while you're seated?

3 MS. HOLLINGSWORTH: Don't be shy. Thank you.  
4 We're going to move on to the approval of the minutes  
5 for November 2, 2017.

6 MS. HOLLINGSWORTH: May I have a motion to  
7 approve the minutes?

8 MR. BRANDON: So moved. Brandon.

9 MS. HOLLINGSWORTH: Thank you and a second?

10 DR. PEREZ: Second. Perez.

11 MS. HOLLINGSWORTH: Any discussion?

12 MS. HOLLINGSWORTH: All those in favor?

13 (WHEREUPON, the Board members all responded  
14 with "Aye")

15 MS. HOLLINGSWORTH: Any oppose?

16 MS. HOLLINGSWORTH: Okay thank you. And  
17 moving forward to resolutions. We have seven  
18 resolutions for your consideration today. Beginning  
19 with resolution 2018-A: Authorization to negotiate and  
20 execute third and final contract renewals with eight  
21 providers to deliver summer camp programs for elementary  
22 and middle school children in Miami-Dade County, each  
23 for a term of six months commencing March 1, 2018 and  
24 ending August 31, 2018. For a total annual amount not  
25 to exceed \$1,851,599.00

1 MS. HOLLINGSWORTH: May have a motion?

2 DR. PEREZ: Perez.

3 MR. BRANDON: Brandon second.

4 MS. HOLLINGSWORTH: We have a second. Any  
5 recusals?

6 DR. BAGNER: Recusal Bagner. Employed by FIU.

7 MS. HOLLINGSWORTH: Moving in to discussion.  
8 You'll find the dashboards for these eight providers in  
9 your attachments.

10 MS. HOLLINGSWORTH: With no discussion, all  
11 those in favor?

12 MS. GRAVES: Give me a second before the vote.  
13 There's an item that UM is included on. So Dr.  
14 Eyssallenne --

15 DR. EYSSALLENNE: Hang on one second. Oh, yes  
16 you're right. I was looking for it, didn't see it.  
17 Recusals.

18 MS. GRAVES: It's in the recusal. Thank you.

19 MS. HOLLINGSWORTH: All those in favor?

20 (WHEREUPON, the Board members all responded  
21 with "Aye")

22 MS. HOLLINGSWORTH: Any oppose?

23 MS. HOLLINGSWORTH: The motion passes.

24 MS. HOLLINGSWORTH: Resolution 2018-B:  
25 Authorization to negotiate and execute a third and final

1 contract renewal with Florida International University  
2 Board of Trustees, Center For Children and Families and  
3 to increase funding by \$200,000.00 for reading  
4 enhancement services within summer and after-school  
5 programs for a term of 12 months commencing May 1, 2018  
6 and ending April 30, 2019, for a new total amount not to  
7 exceed \$882,168.00.

8 MS. HOLLINGSWORTH: May I have a motion?

9 MS. LEICHTER: Leichter.

10 MS. HOLLINGSWORTH: And a second.

11 DR. PEREZ: Second, Perez.

12 MS. HOLLINGSWORTH: Any recusals?

13 DR. BAGNER: Bagner again employed by FIU.

14 MS. HOLLINGSWORTH: Any discussion?

15 MS. HOLLINGSWORTH: With no discussion all  
16 those in favor?

17 (WHEREUPON, the Board members all responded  
18 with "Aye")

19 MS. HOLLINGSWORTH: Any oppose? The motion  
20 carries.

21 MS. HOLLINGSWORTH: Jim should I punch you to  
22 set this one up before or after I read the resolution?

23 Jim: Maybe after.

24 MS. HOLLINGSWORTH: Very well, Resolution 2018-  
25 C: Authorization to negotiate and execute a contract

1 and memorandum of understanding for the second year of  
2 the truancy reduction component of Together for Children  
3 with Miami-Dade County, Miami-Dade County Public  
4 Schools, and the Foundation for New Education  
5 Initiatives, Inc., for a term of 18 months commencing  
6 February 1, 2018 and ending July 31, 2019, in an amount  
7 not to exceed \$1,320,000.00 to support the program.

8 MS. HOLLINGSWORTH: May I have a motion?

9 MS. FERRADAZ: So moved, Ferradaz.

10 MS. HOLLINGSWORTH: And a second?

11 DR. PEREZ: Perez.

12 MS. HOLLINGSWORTH: Are there any recusals?

13 MS. KENDRICK-DUNN: I think I do ma'am.

14 MR. HAJ: Review it as well?

15 MS. KENDRICK-DUNN: Yes.

16 MS. HOLLINGSWORTH: And moving on to  
17 discussion.

18 MR. HAJ: As you recall last year, there was  
19 great amount of youth violence and gun violence in the  
20 neighborhoods and we convened partnerships with the  
21 school system county and about forty partners dealing  
22 with juvenile justice. The state attorney, all of the  
23 major partners in the community came together saying  
24 enough is enough. And we worked together as a group  
25 rebuilding the framework.

1           Three main components, maybe more, but one  
2 component was the attendance in the early intervention  
3 on attendance, and that is the one that the trust ran  
4 with. We brought it before you last year. We came back  
5 last October, I believe, for a no cost extension to end  
6 through January. So now we're here for the renewal and  
7 we're asking for a renewal instead of a 12 month to go  
8 to an 18 month renewal, to align with next year's school  
9 calendar as well. So we finish out this school year and  
10 go into next school year.

11           In the first year of the program, and again a  
12 lot of it was -- it took us some time to ramp this thing  
13 up and it really kicked off in the beginning of this  
14 year, but in the first year of the program, 5,320  
15 elementary school children have been served across 33  
16 schools. 5,042 have been conducted and 117 truancy  
17 child study meetings took place. And I think one of the  
18 critical components when we were dealing with this as a  
19 large group, dealing with all the community state  
20 holders is the care coordination and coordination of  
21 efforts to get to those families. When a kid does not  
22 show up to kindergarten, first, or second grade, it's  
23 not that the kid doesn't want to be there, it's that the  
24 families hurting in some way shape or form.

25           So how do we get the services to those

1 families to help them. So we have been working with our  
2 family strengthening our neighborhood support providers,  
3 that the trust does fund, and working with the care  
4 coordination and referring services to them. And so  
5 far, this year, we have 165 referrals to our providers,  
6 and I think that is the piece if we continue to do that  
7 right. I know this is still halfway through the first  
8 year of the program, but I think that is the piece if we  
9 do that well we find out the families, what the needs  
10 are, and provide them the services they need, that we  
11 can help move the need on these communities.

12 MS. HOLLINGSWORTH: I just like to add, thank  
13 you, Jim. I just like to add, that I remember the first  
14 presentation that we received not so long ago, when we  
15 were first considering Together For Children and it's a  
16 very exciting initiative. As somebody that works in the  
17 early education field, of course I expressed the  
18 excitement about expanding it. But knowing that there's  
19 a focus on truancy and having a very clear sense of how  
20 truancy relates to that birth to school, to K to 12th  
21 continuum and the importance of maintaining, literally  
22 getting the children to school. I'm very excited to  
23 continue to support this initiative and very pleased to  
24 report that the early childhood expansion is well  
25 underway with Together For Children. I just wanted to

1 mention that today.

2 MS. NUELLE: I just wanted to say that I was  
3 very pleasantly surprised and pleased with the numbers.  
4 When I reviewed it, I was asking are these really the  
5 numbers because knowing that it really didn't get  
6 started until this academic school year. So I was very  
7 encouraged and pleased by that. So I'm glad to see it -  
8 - continuing to support that.

9 DR. BAGNER: I don't mean to be the Debbie  
10 Downer here, but I do have some concerns. I highly  
11 applaud the efforts. I think certainly during early  
12 childhood efforts underway. My concern here is --  
13 sounds like a lot of kids who identify with truancy  
14 problems. A lot of kids who are referred. We don't  
15 even know if these kids followed up on the referrals,  
16 right. So we have 165 kids who are referred. We don't  
17 even know if they actually got the referrals and if  
18 there is sort of any effect on attendance. The  
19 attendance alone which is probably pretty easy to  
20 collect.

21 So my concerns are kind of that and the  
22 combination with the high cost of this one year  
23 contract. I know this one is 18 months, but at a one  
24 year level is \$800,000.00, again which is about twice as  
25 much as most contracts, from my understanding. Without

1 any sort of data suggesting what's happening. If any of  
2 these kids are getting services and if that's affecting  
3 the thing that we're trying to change. So I give those  
4 concerns with this, particularly since its one year and  
5 a lot of money.

6 MR. HAJ: Dr. Bagner you're right, when we  
7 started this initiative, this was going to be a data  
8 driven initiative. The data will be coming and we're  
9 looking at bringing it back to the summer with the  
10 results. It only has been five months, we do not have  
11 the complete data, but in the summer we'll have a full  
12 report of what impact we have made and has the  
13 attendance been impacted.

14 DR. BAGNER: I think also just some  
15 information about where the funds are allocated. So I  
16 know it's primarily staff, but I imagine data on and I  
17 spoke with Gloria about this. I know that data is  
18 collected on when kids don't show up, so we can identify  
19 and I assume is some sort of program that kind of  
20 highlights which kids are the ones that have high  
21 numbers of absenteeism. But how much time is going into  
22 that and like how is that laid out. It's a lot of money  
23 at play and I know there're 33 schools, but I'm curious  
24 where the money is being spent.

25 MR. HAJ: And I agree with you. The money is

1 being spent at hundred percent on I believe it's eight  
2 or nine social workers. That is where the money is  
3 being spent by personnel, but we will get additional  
4 data. Vivian and Donavan, who are not here today, will  
5 reach out to you either tomorrow or early next week of  
6 where we're at now and will bring that full report to  
7 the board later on at the very end of the year in the  
8 summer.

9 MS. HOLLINGSWORTH: And the fund is to move  
10 from 33 to 39. So adding an additional six schools.

11 MS. HOLLINGSWORTH: Further discussion?

12 MS. LEICHTER: I just want to say something.  
13 I think something to think about is like the long-term  
14 commitment to this issue. As we all know the gun  
15 violence is still happening. It was just one the news  
16 last night in Homestead two teenagers killing another  
17 teenager. And it's great that we're targeting these  
18 kids while it's 2018, 2017, 2018, and they're 5, 6, 7,  
19 8, 9 years old, but what happens when these kids become  
20 11 and 12 and 13 and 14 and this program has dropped or  
21 we don't fund it anymore. It's just I think consistency  
22 is very important, and I don't know if we're looking in  
23 the long run, of whether or not this is a program that  
24 can be sustained. That's all I have.

25 MS. HOLLINGSWORTH: Thank you.

1 DR. BAGNER: To add to that. I agree  
2 wholeheartedly, I think the efforts toward prevention of  
3 violence related to a gun issue is critical. I've said  
4 this before and your reaction was strong, in that we  
5 talked about predictors of gun violence. And one of  
6 those biggest predictors is access to guns and yet  
7 nothing of what's going on in this effort is dealing  
8 with that issue. And I know there are challenges with  
9 that, but if we want to change gun violence, to decrease  
10 gun violence, we need to do something about access to  
11 guns.

12 MS. HOLLINGSWORTH: Thank you, Dan. Further  
13 discussion?

14 MS. HOLLINGSWORTH: All those in favor?

15 (WHEREUPON, the Board members all responded  
16 with "Aye")

17

18 MS. HOLLINGSWORTH: Any oppose?

19 MS. HOLLINGSWORTH: Motion carries.

20 DR. PEREZ: May I say something now that the  
21 vote was taken.

22 MS. HOLLINGSWORTH: Yes Dr. Perez.

23 DR. PEREZ: As you know, this is something  
24 that I agree very much with Dr. Bagner and also, I am  
25 very curious because when we were presented with this,

1 we were told that the scholars would meet and I don't  
2 know that the scholars -- I know they met one day. One  
3 of the things I have been advocating is that the  
4 scholars, when they present us with the research, then  
5 let's do what is working. This is a program about  
6 truancy, which is wonderful, it's a wonderful program,  
7 however the issue was not even about violence in  
8 schools. It wasn't about violence with children. It  
9 wasn't about violence by children. It was about  
10 children being killed on the streets, often times  
11 because their parents were involved in whatever gangs or  
12 whatever and the children were the victims.

13 So again, that is where the -- I thought the  
14 research would take us. How do we prevent that? What  
15 we do for that? And yes, if you're saying the only  
16 thing that we can do is as a truancy program, hopefully  
17 there'll be other things that we do, but once again I  
18 think we put the horse before the carriage, because we  
19 should have had illuminated scholars present to us  
20 first, and then create the programs. Thank you.

21 MS. NUEL: I just want to add that going back  
22 whatever is going on two years, I think when this topic  
23 first presented itself to us. This part, the Together  
24 for Children is one component that the trust partnered  
25 with and that's why I continue to ask for reports,

1 because obviously this is a prevention program which  
2 isn't going to have any effect on violence on the  
3 streets today and it's already been two years.

4           It's been very slow going and for lots of good  
5 reasons, but I think there are lots of other efforts and  
6 I like to say we need to work within these communities  
7 and work with committees to empower them and support  
8 them and what they need. If they go somewhere and say  
9 if you shoot yourself, I don't really think it's going  
10 to be that effective. And so a lot of community work  
11 has been done and that's why I was asking for a report  
12 when we had our retreat. What are all the efforts?  
13 This is just that one piece and I think all the comments  
14 were really important in terms of the planning and going  
15 forward and thinking. So they got launched, like I said  
16 I was surprised and happy to see so many people  
17 identified. I kind of felt like, weren't we doing this  
18 anyway, if someone was missing 20, 30 days of school a  
19 year, but apparently it just wasn't a coordinated  
20 effort.

21           So they were identified and nothing happened,  
22 but it has to be comprehensive. So I think all the  
23 comments were good, but the trust is doing a lot of  
24 things on a lot of different levels. And we can bring  
25 that back and continue to discuss it, because I think

1 it's one of the most important issues in our county or  
2 in our country.

3 MS. DUNN: I'd like to make a comment as well  
4 or maybe a question. The funding for the social workers  
5 I guess, that's going to be hired for this program. In  
6 the schools already and that's every school, we have  
7 social workers that are assigned and sometimes community  
8 involvement specialists I think we call them, but that  
9 will do truancy like a lot of the stuff that's being  
10 done here that we have staff in schools that already do  
11 these things. So I'm wondering for the schools that  
12 have the social workers in their schools are they  
13 working with the existing social workers at the schools?  
14 I'm just wondering if there's a duplication of services  
15 here because this is all done.

16 I sit at meetings and the first thing when a  
17 child is referred for a behavior issue, the first thing  
18 that we look at is attendance. Because with special  
19 education, you cannot classify let's say for example,  
20 has thirty absences the intervention, right away needs  
21 to be something has to happen with the attendance and we  
22 refer back to the social worker, the one that works at  
23 the school.

24 MR. HAJ: These social workers, you do have  
25 social workers in schools, but these social workers are

1 just focusing on the attendance intervention piece.  
2 They're working -- you have eight social workers, I  
3 believe the number is eight. Working at 33 an hour,  
4 staying in schools by five. Just a couple of -- to  
5 follow up on different areas.

6 We did look at the data. When we first  
7 started meeting and we started looking at the  
8 perpetrators and the victims and we started back  
9 tracking in data. All the way down to kindergarten, it  
10 really was the attendance emulating through schools with  
11 pretty much all of them. That's our main focus. This  
12 is a very data driven approach. We sat with the state  
13 attorney's office, with the police, with everybody else  
14 and looked through everybody's data to find out what are  
15 their trends. We saw some other things, but this is the  
16 one piece that the trust compiled. The other piece with  
17 the older kids and the JSV has taken over. There are  
18 other different departments put Together For Children.  
19 This truancy piece is just the one piece that the trust  
20 has picked up on. There are other components of this  
21 initiative. But we will get you the data on the current  
22 social workers and what the social workers are doing. I  
23 don't have that with me at this time.

24 MS. DUNN: I just want to say I also agree  
25 with Dr. Bagner as well. I have the same concerns, this

1 is a lot of money and I know it's kind of early, but I  
2 would like to eventually see the outcomes. That this is  
3 something that is really effective. Because the issues  
4 within the communities.

5 MR. HAJ: And if I may, one last thing. On  
6 one of the comments you had made last year or two years  
7 when we first brought this initiative, you said that it  
8 cannot be a dropped-out approach. We have again, I  
9 don't even know the number now, over 120 community  
10 meetings and the communities have developed community  
11 action plans. It needs to be a group effort. So part  
12 of the trust, one of our initiatives to, is our  
13 community engagement team. Is being out there having  
14 community town hall meetings, developing community  
15 action plans. I believe at this time all the  
16 communities have developed their action plans to help  
17 move this thing forward.

18 DR. PEREZ: If I can just add to that. All of  
19 those community meetings have been supported and  
20 facilitated with the assistants of two faculty members.  
21 One from Mary and one from FIU, I believe. Who've been  
22 supporting the effort to help build capacity within  
23 those community groups to think about impact and  
24 outcome. And setting up project models and designing a  
25 community plan that can be measured and tracked.

1           So a lot of those roots are also organizing  
2 themselves to apply for funding, as you know we have a  
3 lot of funding out and coming out. They're thinking  
4 about what are those specific issues in and their causes  
5 and needs in their communities. And in organizing to  
6 kind of come together and develop resources. So I just  
7 wanted to answer to that question, what I know about  
8 some of the research involvements because I know that  
9 they have been doing that of their own contributions as  
10 well as maybe some of them have been able to get some  
11 relief time from their universities to support this work  
12 in the community with the children's groups. And then  
13 the other point I wanted to make, that this model that  
14 we're funding is one building block. Thank you Laurie,  
15 for pointing it out. There are many other building  
16 blocks being funded from other sources. But it's also  
17 not just a brand new unknown model that we're  
18 implementing here.

19           Actually a number of years ago, in previous  
20 service partnership funding cycles with the contract  
21 that we had with the city of Miami actually. They  
22 implemented the same truancy intervention model. It was  
23 a very successful model. The data that we collected  
24 then definitely showed an impact on attendance which was  
25 the most immediate target outcome. So that's part of

1 why we were inclined as the Trust to pick this piece as  
2 one of the pieces that we wanted to support. We do look  
3 forward to having a full school year's worth of data by  
4 the end of this school year. And I think it would be  
5 great to come back and share some more concrete outcomes  
6 and results.

7 MS. HOLLINGSWORTH: We look forward to it.  
8 Thank you Laurie.

9 MR. BRANDON: James can I just have some  
10 clarification as you've been going to these meetings.  
11 Is there any discussion, I know no one wants to talk  
12 about it and it's a third rail of politics, and I'm not  
13 a politician. I'm not afraid to talk about it. Is  
14 anyone talking about access to guns because that's a big  
15 piece here that no one's talking about.

16 MR. HAJ: I haven't been to all 120 meetings,  
17 but I'm sure it came up. That is a discussion, that is  
18 reality. But that really is why we're trying to get the  
19 community action plans to do it because it's not going  
20 to happen from the top. It's how can the communities  
21 get involved and take ownership of their community.  
22 We're not going to be able to change the judiciary of  
23 these communities without the community getting  
24 involved. But there is directly as the gun issue has  
25 come up and been debated at a large stage, not that I'm

1 aware of.

2 MR. BRANDON: I remember our first meeting  
3 when Deputy Mayor was here they listed the predictors of  
4 gun violence and of course then they talked about all  
5 these wonderful programs that they're doing. And  
6 nothing involved anything related to access to guns.

7 MS. GRAVES: The Florida legislature has  
8 preempted local governments from doing anything within  
9 the realm for guns. So if anything changes as far as  
10 laws for gun access, it has to start with the Florida  
11 legislature or the federal government. So that is an  
12 area that is strictly preempted. There's nothing that  
13 the counties or the cities can do, as it relates to gun  
14 access and gun laws.

15 MS. NUELL: And actually this January board  
16 meeting we were having a presentation when we changed  
17 the board meeting and this person couldn't come. But  
18 the chair of pediatrics at UM was coming to present and  
19 some of that talk was about guns. She's going to come  
20 back another time. So we can at least get some of that  
21 research data, that kind of thing to have a better  
22 understanding of that from at least an academic point of  
23 view.

24 MR. BRANDON: We can certainly lobby for that.  
25 I think has taken over that side of things. We can

1 certainly lobby for those things. Legislature -- we  
2 have that. It's sort of part of the trust, right?

3 MS. HOLLINGSWORTH: Dr. Perez?

4 MS. PEREZ: I would like to -- again have --for  
5 example when this was presented to the school board,  
6 Siaf, he's from FIU, a wonderful young man who was going  
7 to be sort of the liaison for this. I would like to  
8 hear from him to tell us what the researchers have come  
9 up with because again it all, I guess as Dr. Bagner  
10 said, we should hear the effectiveness or some sort of  
11 reassurance if this is not just doing what my colleague  
12 here has said, more of what we've already been doing.  
13 It isn't comforting to me, to hear that the city of  
14 Miami has done this program and we're emulating this  
15 program. When most of the problems are in the city  
16 Miami or within the city. So if the city of Miami had  
17 this program, It just seems, but maybe I'm wrong. It  
18 seems other things need to be done.

19 MS. HOLLIGNSWORTH: Thank you. And Laurie  
20 just to include --. When will we be coming back to the  
21 board?

22 MS. NUELL: I'm not sure we would have to talk  
23 to the program about when the end of the school year  
24 data would be available. And you may want to also pair  
25 it with when our next update on the overall children's

1 initiatives is going to come out. So sometime in the  
2 summer months.

3 MS. HOLLINGSWORTH: Thank you so much. Moving  
4 on to resolutions 2018-D: Authorization to fund the  
5 University of Miami for a maximum amount of \$150,000.00  
6 to support one third of the costs of the pediatric  
7 mobile clinic.

8 MS. HOLLINGSWORTH: And may I have a motion?

9 DR. PEREZ: Motion Perez.

10 MR. BRANDON: Second Brandon.

11 MS. HOLLINGSWORTH: Any recusals?

12 DR. EYSSALLENNE: Eyssallenne, University of  
13 Miami.

14 MS. HOLLINGSWORTH: And discussion. You will  
15 note that at your seat you have photos of the new  
16 improved van. Very exciting. And once the van is  
17 complete and on the road, Jim tells me that it will be  
18 coming to the trust?

19 MR. HAJ: Yes. This is a current van and  
20 there will be a new and improved van that will be  
21 purchased. And at the Board Meeting as soon as we can,  
22 we'll put it out there so that the Board Members can  
23 tour the van.

24 MS. HOLLINGSWORTH: Any discussion?

25 MS. GRILLO: Jim, your saying van you mean.

1 And will our logo be on it?

2 MR. HAJ: Our logo will be wrapped all over  
3 it.

4 MS. HOLLINGSWORTH: All those in favor?  
5 (WHEREUPON, the Board members all responded  
6 with "Aye")

7 MS. HOLLINGSWORTH: Any oppose?

8 MS. HOLLINGSWORTH: The motion carries.

9 MS. HOLLINGSWORTH: I'm going to refer to the  
10 Vice Chairman's resolution.

11 MS. WELLER: Resolution 2018-E: Authorization  
12 to negotiate and execute contracts with the Early  
13 Learning Coalition of Miami-Dade/Monroe and the United  
14 Way of Miami-Dade for match funding for the federal  
15 Early Head Start-Child Care Partnership grant in a total  
16 amount not to exceed \$1,333,334.00, for a term of up to  
17 16 months commencing April 1, 2018 and ending July 31,  
18 2019.

19 MS. WELLER: Do I have a motion?

20 DR. BAGNER: So moved, Bagner.

21 MR. BRANDON: Second Brandon.

22 MS. WELLER: Any recusals?

23 MS. HOLLINGSWORTH: Recuse Hollingsworth. I  
24 work for the Early Learning Coalition.

25 MS. GRILLO: And recuse Grillo. I work for

1 United Way.

2 MS. WELLER: Okay. Any discussion.

3 MR. HAJ: Vice Chairman, I just want to point  
4 out that this is an exceptional exciting for our one  
5 million dollar investment. We will average 13.3 million  
6 dollars in federal funds for 1,070 early head starts.  
7 So that's for infancy coverage.

8 DR. BAGNER: And just to clarify, these go  
9 directly towards the slots for each individual comment.

10 MS. WELLER: All in favor?

11 (WHEREUPON, the Board members all responded  
12 with "Aye")

13 MS. WELLER: Oppose?

14 MS. WELLER: The motion carries.

15 MS. HOLLINGSWORTH: Resolution 2018-F:  
16 Authorization to execute a no-cost contract extension  
17 with the University of Miami for external evaluation  
18 services related to Quality Counts, for a term of 12  
19 months, commencing January 1, 2018 and ending December  
20 31, 2018.

21 MS. HOLLINGSWORTH: May I have a motion?

22 DR. PEREZ: Motion Perez.

23 DR. BAGNER: Second Bagner.

24 MS. HOLLINGSWORTH: Any recusals?

25 MS. EYSSALLENNE: Eyssallenne with the

1 University of Miami.

2 MS. HOLLINGSWORTH: As we move into discussion  
3 I'd like to invite Dr. Veronica Fernandez up to say a  
4 few words about the evaluation.

5 MR. HAJ: Chairman thank you. Veronica and  
6 Rachel if you can both chime in on this and if you don't  
7 mind Chairman can they do it from --

8 MS. HOLLINGSWORTH: Absolutely. Seated  
9 position is fine.

10 MS. FERNANDEZ: So we were here about a year  
11 ago to request funds for the evaluation. It is well  
12 underway. It has taken us quite some time to get the  
13 data organized and analyzed, so that we're able to start  
14 to decimate some of the findings that we have, so we  
15 would be able to come before you during the meeting that  
16 you're going to have in March or April, to give a more  
17 formal presentation with our findings. But we thought  
18 it would be a good time to provide you with some  
19 highlights and a little bit of an explanation as to why  
20 we're asking to extend our contract. We're not asking  
21 for any new dollars, just a little bit more time to  
22 spend the dollars that have been allocated to the  
23 evaluation.

24 So in terms of the time that it has taken to  
25 get the work done, of course the resolution was passed

1 in January. The University of Miami takes some time to  
2 get things going. The contract was executed so there  
3 was some delays in getting our work going and then once  
4 we did, we had some planning time and then we started to  
5 get into the field and collect data. Since then we have  
6 collected a fair amount of data. We've first started  
7 with the folks who are doing this work.

8           So the managers, the administrators, and the  
9 quality improvement specialists, that are on the ground  
10 trying to understand the first question that we asked  
11 them. An extensive survey was essentially is 'is  
12 quality counts working', there answer was as a system  
13 not so much, but as individual components, yes. So we  
14 dug deeper into that to understand what was meant. And  
15 some of the things they talked about was that quality  
16 counts as you know, is a program evaluation. A program  
17 is assigned a rating, but it is essentially based on  
18 mostly teacher level interventions. So you have folks  
19 going in, coaches working with individual teachers,  
20 providing scholarships to individual teachers. But when  
21 those ratings take place, those ratings are a random  
22 selection of program classrooms. So it may not be the  
23 case that the programs, that the classrooms are selected  
24 randomly for the purposes of determining the rating, are  
25 the ones that were necessarily participating in the

1 scholarships, the coaching, and the incentive support.

2           So one of the things that the trust has been  
3 doing in order to help with that, is the decision made  
4 by the Early Learning Coalition of the trust, is that  
5 the quality improvement specialists are going out and  
6 conducting observations in the remaining portion of the  
7 classrooms. So there is a hundred percent of the  
8 classrooms being represented. So although the rating  
9 only represents the random selection, we do have  
10 comprehensive understanding of the interaction quality  
11 that is happening across all classrooms.

12           So that was already underway that I think is  
13 helpful, but we dug a little deeper to understand what  
14 are the components that they say are working, that may  
15 not necessarily be captured in the rating. We asked a  
16 lot of questions about individual components and we  
17 decided that the best way to understand this is a  
18 process to zoom in and conduct a case study. Where we  
19 identified programs that were very -- and came up with a  
20 plan of what's it going to take in order to improve  
21 efforts or improve quality within these programs,  
22 because we are not seeing quality change, especially in  
23 these kind of areas year after year. So we worked very  
24 closely with the Early Learning Coalition, with the  
25 trusts, and along with all of the partners; FIU, Family

1 Central, and the United Way to think about what's it  
2 going to take.

3 We identified some promising practices that  
4 they identify as being effective in the field and also  
5 supported by the national literature that was effective.  
6 So things like coaching, focus, professional  
7 development, around what we're measuring. Something  
8 like making the most of classroom interaction,  
9 communities of practice, and engaging leadership in the  
10 work that we're doing. And then helping to understand  
11 what is the process that's happening.

12 And some of the things we found was that as you  
13 know these were really tiny programs. So they're  
14 initial baseline class scores, the classroom assessment  
15 scores system was well below the national averages even  
16 in low income samples. And well below what we call  
17 thresholds, which is sort of the tipping point, at which  
18 we start to see positive association with children's  
19 outcomes. So these we were really needy programs.  
20 Essentially what happened is part of the case studies,  
21 the goal of the case study wasn't to see the change,  
22 because it was such a short period of time, but to  
23 really think about what it would take. And one of the  
24 things we learned, is that we have to point all of our  
25 resources towards the program if we want it to be

1     successful.

2             So instead of providing support as a many for  
3     services, we want a program that is really planning to  
4     be successful. Coaching has to happen there,  
5     professional development, scholarships, communities of  
6     practice all have to be centered around this program  
7     very intensely, during a period of time so that they can  
8     benefit from all of these services at once. Rather than  
9     sort of having the quality improvement specialists  
10    attend to their entire case load at the same time.

11            What we end up seeing is that they're an inch  
12    deep and a mile wide, so they're checking in with all  
13    their programs and they're keeping in touch with all  
14    their programs, visiting all their programs, but the  
15    intensity isn't quite there with the coaching. So we  
16    found that to be something that is was really critical  
17    to focus on. We measured all of the for knowledge of  
18    teacher child interaction, which is what MMCI focuses  
19    on. The good news is that there was improvement in MMCI  
20    wasn't huge, but it was significant. And we measure  
21    these other factors right, because it's not just the  
22    programs that you're getting, and it's not just the  
23    coaching. But what is the motivation or the readiness  
24    of the program to make changes.

25            So we measure that as well. What are the

1 beliefs around the appropriate practices that these  
2 teachers and the school leadership have? What is the  
3 role of leadership? Do teachers in that program feel  
4 supported by their leadership? And that is something  
5 promising that we found, that these teachers in these  
6 programs, even though quality is low and even though  
7 they're in poverished neighborhoods, they do feel  
8 supported by their directors. That's something that was  
9 positive that we cared for. And we also asked about  
10 their sense of support and communities of practice in  
11 their own centers, that were actually occurring  
12 intervention and that wasn't quite as happening as  
13 extensively.

14 So essentially over the course of, I would say  
15 the seven months that we were actively collecting data  
16 and engaged in the intervention, we went to some  
17 planning. We've been able to collect a lot of data. In  
18 the next presentation I'll present you with a breakdown  
19 of all the assessments we collected, and how many of  
20 those assessments were collected. Just to give you an  
21 idea in terms of the managers' survey and QIS survey, we  
22 had about 55 those we conducted focus groups with  
23 provider groups. We interviewed the coaches, and  
24 technical assistance, implementers. We interviewed the  
25 folks who were responsible for implementing the

1 communities of practice. We interviewed the  
2 facilitator, who is responsible for processing wages.  
3 Which is the wage up limit we have in the community.

4 We've conducted 36 class observations in the  
5 field. We've conducted about 66 assessments of  
6 knowledge of teacher child interaction quality. COP  
7 content knowledge about 37. Readiness for change 49.  
8 And right now, the most recent survey that we have out,  
9 is directly to providers. So we're getting the  
10 perspective of the directors, the owners, and the  
11 teachers. And we have a pretty good response rate its  
12 open for -- it's supposed to close tomorrow, but I might  
13 give it another little nudge to motivate folks.

14 We have 284 directors or owners that have  
15 responded to that and it's been online. So that was a  
16 really good response rate for an online survey. And for  
17 the teachers survey we have 358. So we have over 600  
18 responses for that online survey. So we are really  
19 excited to dig into those data. They ask questions  
20 about individual components of quality counts that they  
21 proceed as being effective, and how those components  
22 have impacted and quality within their programs and what  
23 are their incentives. What are the barriers to quality  
24 in their programs? What are things that incentivize  
25 them to participate in the program, and what are the

1 ones to incentivize them to remain in the program? Just  
2 to understand the perspective of the folks that are on  
3 the ground receiving the services.

4 In addition to the folks that are implementing  
5 the work within our communities. So I think we have a  
6 pretty comprehensive grasp on everyone's perspective and  
7 now we have a very hard task of putting it all together  
8 and making sense of it. Something that's important to  
9 think about is that from the very beginning when we ask  
10 the folks, the quality improvement specialist, the  
11 managers, is quality counts working, they were very  
12 directive in saying as system not so much, but as a  
13 component level I think we identified the pieces that  
14 work.

15 So as we are thinking about what quality counts  
16 is going to continue to be, we've talked a lot with the  
17 trust and The Early Learning Coalition what the state is  
18 doing. As you know Florida is segmented. We have Early  
19 Learning Coalitions all over the state that are doing  
20 things very differently. Well the state is putting  
21 forward develop a model for promoting quality across our  
22 state, but not necessarily a quality rating system. But  
23 sort of a quality rating system and it seems smart for  
24 us to align ourselves with that state model as much as  
25 possible, because it will give us access to a lot more

1 resources and training. And most importantly money. It  
2 allows us to leverage state dollars to bring more  
3 dollars into our community, in addition to the  
4 investments we're already making locally.

5 So the biggest change that we come from  
6 aligning to the state model is a tier reimbursement  
7 system. So what is that mean, it means money directly  
8 going to providers, which we know is critically  
9 important and is one of the biggest deficits that we  
10 have in our community. And one of the biggest barriers  
11 that we have for implementing quality.

12 For a long time there was a provider group, I  
13 don't know if you remember when quality count started,  
14 there was a provider group that said 'yes quality  
15 counts, but quality also costs'. We are being asked to  
16 do more, but not really necessarily being provided with  
17 money in our pockets. So yes there are trainings, and  
18 yes there are support to allow us to buy furniture, but  
19 money wasn't going directly to the providers. So a tier  
20 reimbursement system that is tied to quality would allow  
21 for some incentivizing to occur depending on the quality  
22 rating. So of course there are problems with  
23 incentivizing money, especially when we're talking about  
24 ratings and quality.

25 But I think in terms of what it makes sense to,

1 does it make sense to align I think we're all thing that  
2 yes it does. And that might be a direction that we're  
3 moving toward. Of course I don't make those decisions,  
4 but I say we, the trust. Any questions?

5 More details will come in April and March, but  
6 I'm happy to hear the questions that you have. I may  
7 not be able to be able to answer them today, because I  
8 don't have my presentation prepared or all the data  
9 analyzed, but if I know the types of questions you have,  
10 I'm happy to incorporate those into my presentation and  
11 answer them.

12 MS. HOLLINGSWORTH: Thank you for everything.  
13 Rachel?

14 MS. SPECTOR: I would just add that along with  
15 looking at the results from the evaluation and all the  
16 work that we're doing, we're also actively working with  
17 our current partners and other state coalers to get  
18 input. We're also working closely with Brittany  
19 Perkins, who's the CEO of Florida Children's Counsel,  
20 and another national expert on financing. So that we  
21 can work on the best way to align ourselves with the  
22 state model. So we're gathering a lot of input from  
23 many different important state holders to pave our way  
24 forward. And we will be coming back as well in March or  
25 April to see the approvals and move forward.

1 DR. BAGENER: I'm pleased to see stuff  
2 happening. I'm excited to learn more and it's great to  
3 see the trust fund evaluation and find out what we're  
4 doing and is it working. I'd like to see more of that.

5 MS. SPECTOR: Thank you.

6 MS. HOLLINGSWORTH: All those in favor?

7 (WHEREUPON, the Board members all responded  
8 with "Aye")

9 MS. HOLLINGSWORTH: Any oppose?

10 MS. HOLLINGSWORTH: The motion carries.

11 MS. HOLLINGSWORTH: Resolution 2018-G:  
12 Authorization to expand up to \$35,000.00 in addition to  
13 \$24,999.00 paid to Gina Austin Stuart, for IT test  
14 management services to support The Children's Trust in  
15 various technological efforts, over a term of seven  
16 months, commencing October 11, 2017 and ending May 31,  
17 2018.

18 MS. HOLLINGSWORTH: May I have a motion?

19 MR. BRANDON: So moved, Brandon.

20 MS. HOLLINGSWORTH: And a second?

21 DR. BAGNER: Second, Bagner.

22 MS. HOLLINGSWORTH: Any recusals?

23 MS. HOLLINGSWORTH: Discussion?

24 MS. HOLLINGSWORTH: We have no discussion.

25 MS. HOLLINGSWORTH: All those in favor?

1 (WHEREUPON, the Board members all responded  
2 with "Aye")

3 MS. HOLLINGSWORTH: Any oppose?

4 MS. HOLLINGSWORTH: The motion carries.

5 MS. HOLLINGSWORTH: That completes the  
6 resolution for this meeting. Moving on to Jim.

7 MR. HAJ: I just have one quick comment. As  
8 you know, Champions For Children will be coming up in  
9 June. So if you know anyone who's very deserving make  
10 sure they apply.

11 MS. NUEL: Do you have a date for that?

12 MR. HAJ: Tentative. June 14th. As soon as  
13 we finalize that we'll get it to the Board.

14 MS. HOLLINGSWORTH: With that ladies and  
15 gentlemen we are adjourned. Thank you everyone.

16 (Whereupon, at 4:21 p.m. the meeting  
17 concluded.)

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CERTIFICATE OF REPORTER

STATE OF FLORIDA  
COUNTY OF MIAMI-DADE

I, Emilie Brave, Court Reporter, and Notary Public in  
and for the State of Florida at Large, do hereby certify  
that I was authorized to and did report the proceedings  
in the above-styled cause; that the foregoing pages,  
numbered from 4 to 41, inclusive, constitute a true and  
complete record of my notes.

I further certify that I am not a relative, employee,  
attorney or counsel of any of the parties, nor am I a  
relative or employee of any of the parties' attorney or  
counsel connected with the action, nor financially  
interested in the action.

Signed this 11th day of January 2018.

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Emilie Brave  
Court Reporter