Joint Finance/Programs-Health Committee Meeting Transcript

August 29, 2019

THE CHIILDREN'S TRUST JOINT FINANCE AND PROGRAM SERVICES, HEALTH COMMITTEE MEETING

The Children's Trust Joint Finance and Program Services, Health Committee Meeting was held on August 29, 2019, commencing at 9:30 a.m., at 3150 Southwest 3rd Avenue (Coral Way), Miami, Florida 33129. The meeting was called to order by Kenneth Hoffman, Chair.

COMMITTEE MEMBERS:
Kenneth C. Hoffman, Chair
Dr. Magaly C. Abrahante
Nelson Hincapie
Javier Reyes
Pam Hollingsworth
Laura Adams
Constance Collings
Mary Donworth
Richard Dunn
Lourdes Gimenez
Com. Barbara Jordan
Tiombe Bisa Kendrick-Dunn
Shanika Graves
Leigh Kobrinski

STAFF:

Bevone Ritchie

Donovan Lee-Sin

Imran Ali

James Haj

Juliette Fabien

Lisanne Gage

Lori Hanson

Maria-Paula Garcia

Muriel Jeanty

Rachel Spector

Sabine Dulcio

Sheryl Borg

Stephanie Sylvestre

Vivianne Bohorques

William Kirtland

Guests:

Lisa Blair

Natalia Cap

Leslie Rosenfeld

Dalia Rosales

PROCEEDINGS

(Recording of the meeting began at 9:30 a.m.)

MR. HOFFMAN: I'd like to call the meeting to order. Okay, we have a very busy agenda today, so let's get started.

First, we're going to have a brief Board meeting to discuss two items, and then we'll dive into the strategic plan for the rest of our time together.

Before we get to the formal business of the meeting, I'd like to welcome Beth Edwards. Beth is going to be replacing Dr. Lawther in her position, representing the Miami-Dade counsel of Parent Teachers Association, Parent Teacher Students Association. Beth is currently vice president and will become president of that organization as Dr. Lawther steps off to run for the School Board. So congratulations to both. Dr. Lawther will be on the Board in the first TRIM hearing, but we invited Beth to come to familiarize herself with the Board and the strategic planning process.

Also, in a few minutes we'll be discussing two candidates who applied for the at-large Board seats. I think all of you know that the Trust suffered a great loss two weeks ago when Gus Barreiro died. Many of us have personal stories or remembrance of Gus. I

can't think of a better of way of describing Gus and remembering him than in the words of our founder, Dave Lawrence, when he said, “Gus was simply one of the finest people I’ve ever known. Loved people, and they loved him. A heart and soul for service.” And Gus truly was a public servant. He’ll be missed dearly not only by the Trust, but by the community as a whole. And I’d like to thank Jim and the rest of the staff for everything they’ve done to help the Trust cope with this tragedy. We do plan to bring before the Board, at a later date, something to honor Gus. But for now I’d just appreciate it if we can observe a moment of silence in his honor. Thank you.

So, on to the business of the meeting, thank you. Are there any public comments, Muriel, for Board retreat?

MS. JEANTY: No public comments.

MR. HOFFMAN: No public comments. Okay, so the first action item, we had a bylaws committee, on the agenda, Susan?

MS. NEIMAND: Okay, so you have in front of you a set of bylaws. If you would look at pages 4 and 7, the exceptions portion on page 4, you can read in green, that is underlined, the change, and what is stricken is in red. So what has been changed has to

do with the Nominating Committee. And specifically what is being changed is that -- okay, you can read it. I mean, I don't want to read it. Do you want me to read it? So it will now say, "upon arrival by the Board of an organization to fill either such seat, a Board clerk shall notify the approved organization and request that the organization designate an individual to fill such seat. The Board shall review the organization serving in a locally recognized faith-based coalition and local alliance for coalition engaged in cross-system planning on health and social service deliberated counter seats every six years to reevaluate." And this has to do with the fact that we added groups this year into the total composition of the Board. So this identifies exactly what would happen in that situation.

MR. HOFFMAN: Can I just clarify? We didn't add any groups. The groups had previously been specifically designated in the ordinance. And as a result in the change of an ordinance, approximately a year ago, the names of the individual groups were changed to be faith-based organization and health organization. And they were generic, so we needed to change the bylaws to make sure there was a procedure in place to identify these organizations from time to

time, as a Board.

MS. NEIMAND: And the changes are that we removed the term limits to these positions and we've added language to reevaluate the organizations identifying to fill these positions every six years. So that is the change that was recommended and voted on by the Nominating Committee.

The second page, on page 7, and the following changes you can see the cross outs and the additions. But basically in sum, what was done was remove the requirement to submit notifications of absences in writing prior to meetings. We understand life happens and people have responsibilities. We changed the number of absences deeming resignation from the Board from three within a fiscal year to three consecutive absences, for a total of five absences within a fiscal year. So we made it sort of more open for people to be able to come to the Board meetings. We moved language related to excusing absences for a good cause and removed language related to notifications sent to Board members related to absences. So this was clarified and made much more open in terms of respecting the Board members. So those were the changes.

MR. HOFFMAN: Any discussion or do we have a

motion to adopt the changes to the bylaws?

MS. HOLLINGSWORTH: So moved, Hollingsworth.

MS. GRAVES: Commissioner Jordan, moved it. Second.

MS. HOLLINGSWORTH: Second, Hollingsworth.

MR. HOFFMAN: Any discussion?

(NO VERBAL RESPONSE)

MR. HOFFMAN: All those in favor?

(WHEREUPON, the committee members all responded with “aye.”)

MR. HOFFMAN: Opposed?

(NO VERBAL RESPONSE)

MR. HOFFMAN: Motion carries.

We’ll move on to the Nominating Committee recommendations. Mary Donworth is going to take that role to report on the Nominating Committee.

MS. DONWORTH: Good morning, everyone. There were two vacancies created with resignations of Rodester Brandon and Tony Esteven [phonetic]. These positions were advertised from June 17th to July 19th. There were a total of 26 applications that were received. The Nominating Committee met on July 23rd to review the applications and after the screening process decided to interview eight applicants. The Nominating Committee met again on August 21, 2019 to

interview the candidates. After the interviews, the Committee is recommending that Matthew Arsenal and Dr. Monique Jimenez-Herrera fill the two vacancies. Mr. Arsenal is presently the CFO of Baptist Health and will bring a health perspective to the Board. Dr. Herrera is a psychologist and is the department head of social sciences at Miami-Dade College. She has worked with children and adolescents in various settings and brings a much needed skill to the Board for this compilation.

Can I get a motion to approve these two candidates?

MS. HOLLINGSWORTH: So moved, Hollingsworth.

MR. DUNN: Second.

MS. DONWORTH: All those in favor?

(WHEREUPON, the committee members all responded with “aye.”)

MS. DONWORTH: Motion passes. Thank you.

MR. HOFFMAN: Okay, that then concludes the business part of the meeting. So for the next few hours, we’re going to focus on the Trust strategic plan. Similar to last year’s retreat, it’s going to be a Board driven session with majority of time spent listening to input from you. This is not intended as a full review of the strategic plan or to revise a

plan at this time. As you know, we're currently in the second year of a five year funding cycle for most of our initiatives, which are in alignment with the current plan. And so we approach the middle of the current funding cycle, we did a more robust strategic planning review with the goal of adopting any changes to the plan before the next funding cycle begins. And it's when we start letting out the RFP's for the cycle. Everyone will have an opportunity to participate in that process. So you have something to look forward to next year.

I know all of you have read and are familiar with the current strategic plan, but just to make sure, we're going to start with an overview of key elements of the plan, led by our own Dr. Laurie Hanson. Laurie will focus in particular on our prior investment areas and key results. After the overview, we'll divide into smaller breakout groups focused on three topics: early childhood, school-aged youth, and special populations. Each group will spend time on each of the three topics with the goal being to facilitate dialogue among Board members about the opportunities and challenges that may impact The Children's Trust strategic planning in these areas, as well as to elicit policy guidance to inform future priority

investments and results.

Finally, with all of your input in hand, staff will organize the results. You will have an opportunity to review the entire Boards input, as well as the vote on the top priority investment areas and issues that have been identified by the Board. Staff has put in a lot of hard work to make this a meaningful day for us, and in case we lose some of the Board before the end of the meeting or run out of time, I want to take this opportunity to thank all of our staff, and in particular, Dr. Hanson, for putting this session together for us. Thank you.

I'd also like to thank three of our Board members who volunteered to facilitate the group discussions. That's Pam Hollingsworth, Mary Donworth, and Mark Trowbridge. Thank you. I also want to recognize that our newly appointed director that's shown up, Dr. Herrera, welcome to the Board. So with that, I'm going to turn it over to Dr. Hanson.

DR. HANSON: Okay, so you have at the top of your agenda some of the results we hope to achieve today. So as Ken said, we just want to make sure with new people coming on that there's a clear understanding about what's in the strategic plan, what are our priority investments in the key results that we see.

We want you to have a chance to have some meaningful conversations, so we're going to be breaking you into small groups and having you rotate through some topical discussions. And then gather your input in a couple of different ways. At the end of each small group session, you'll be sort of putting your top issue or idea or thought on a sticky note that you'll need that we'll then collect together and bring back to show you at the end. And then at the end, you'll also be able to prioritize some of those topics, as a group.

So for new Board members, we do have a few extra, I think we were distributed a few meetings ago or probably several meetings ago now because we're starting to work on our next annual report, but this is our most recent annual report of our results. So many of you may have got a copy of this previously. We'll make sure that the new people, you can come and get a copy here. And you also have in your papers that you got today, a few select slides from the PowerPoint that I'm going to be going through, that I thought you might want to have for reference as we go through those. And then your data placemats, which we're going to review in a bit.

So I'm not going to read to you the slides. I

think you are familiar with our mission and our vision. And you're aware that with the Boards governments and guidance, the Trust staff execute on this mission and vision, but we only can do that in partnership with the community service providers and other partners across the community to make things happen. Within our strategic plan we describe a number of core values or foundational values to The Children's Trust. And the most foundational one, I'm going to kind of go in this slide from the bottom up, is all children are our children. So, The Children's Trust really does serve the entire community of Miami-Dade County.

And then if you move up to the next level, so what do we mean by the whole child? It's really important to focus on children's social, educational, economic and environmental backgrounds. All of those things have an impact on whether our vision can be realized, that every child is reaching their full potential. However we balance that blue foundational box with the construct and really important factor in, especially our community, that vulnerable populations and neighborhoods sometime need additional resources. So we fund more programs, more densely, high poverty areas across our community. We pay special attention

to children with special healthcare needs. Children and youth with disabilities, children in foster care, involved in criminal justice, experiencing homelessness. Those sorts of things that we know contribute to disparity and challenges for growth and development. So it's a balance to honor these two things, but they're both critically important. Another sort of foundational practice and value that the Trust has had is the belief that evidence based practices can ensure our best chance to success with children and families.

And then the top level of things are really related to the fact that we know it's critical to invest early in Early Childhood, but you can't just do that and then drop off, right, so it's also as equally important to sustain investments across the developmental continuum, to continue to support children and their families. Partnership is critical because we know not one single program or organization can accomplish these allottable vision and mission statements that we have alone, right. So we work with other systems, other funders, and as I mentioned, our service providers, to make this work happen. Aspects of that involve our community engagement team that's out there really working on an empowerment model to

help residents and neighborhoods take on projects to improve things from what they see that's needed. To coordination and integration across our funded service providers, realizing that one funded program may not need all the needs of a family they come in contact with, that there's probably another program that maybe can address some of the other needs.

The continuous learning mindset. So we want to have a growth mindset. We want to be strength based on always learning from what we're doing. We feel like that is going to yield us the highest quality services and the best return on the investments that we make.

So the next two slides, which you have printouts of, are just a reminder of our key results, the headline results that are a part of our strategic plan. These are results that are important to a number of organizations across our community and we work with those people to coordinate on these. We kind of have it divided in two. The first set are the community and family supports that are needed to facilitate child well-being. So we know that high quality early childcare environments are critical, you know, 90 percent of a child's brain is developed in its first five years. They need a really high quality

environments from in their homes and in their formal childcare facilities. We know that access to regular care early on can actually prevent many challenges later related to health, both, physical health and mental health. And that most critically children need nurturing and involved parents to give them the best chance of success.

So what is it that we mean by child well-being? This is the set of five community results that we have selected in our strategic plan to seek for children. They kind of stand across different domains of child development from learning to physical fitness and activities, to appropriate behavior and successful transition to adulthood. And I just want to note that these are broad results that we seek. These are measured through something that we call community indicators. Typically, there are more than one indicator available, there’s more than one measuring a community available to give us information about any one of these results. So what we do is we try to gather what’s available related to each result and examine those together to give us a sense on how we’re doing as a community on these different headline results. We do annual updates to a set of community indicators that we track, that are in that annual

report, to the Board of County Commissioners, that we produce every year. Florida Kids Count, also puts on a report card on a regular basis. So there's lots of information out there to sort of give us a sense of how we're doing. And I'll just say, again, it takes a coordinated effort of the whole community to achieve the results at the population level that we're looking for. So no one entity moves these needles alone, but we are definitely part of a rich community in Miami-Dade County that is seen as important.

So what do we do with our funding to kind of work towards these results. The next slide shows our priority investment areas. These are the seven areas that are outlined in our current strategic plan. These are also categories in our budget. So we have most of these activities and funding investments rooted in prevention strategies. We put things in categories to make a budget, but again, just to acknowledge that these things relate to one another. They sometime overlap. They certainly should be mutually supportive of each other. There are things we're doing, for example, in health that relate to early childhood health. And so that relates to early childhood development and so forth. So typically we're looking at how these things are interacting

together, but then when we present the information to you, you can see them clearly defined in these categories.

Now, the next slide has kind of a lot information on it. You have a printout of it. But this really basically is a crosswalk to show you the relationship to the two things we just talked about. Our priority investment areas and are headline community results. So as you can see, as I've kind of said a couple times already, it's not a one to one relationship, it's a many to many relationships. So most of our investments relate to multiple result areas. Just as an example, you can see that our youth development programs are focused on academic success, healthy physical activity, appropriate behavior, and successful transition to adulthood. So there's multiple aspects going on there.

And the next slide has even more information on it, but I really want to highlight a couple of key points about how our community indicators, our community results relate to our program level activity and our program evaluation and our measurement of the results of our program investments. We plugged in an examples, so this just has an example of one of the investments that we made. A major investment, after

school programs. And as you can see, this investment relates to multiple results that we have, academic achievement, physical activity, appropriate behaviors. This relationship, though, is not a direct cause and effect. It's a contribution relationship. So the work at a program level is contributing to us moving in this direction for our community. What we do for the consumers of our programs is helping across the county to move towards these goals that we have. But we also have to recognize that these goals that we have, the results on the right-hand side of this slide, are influenced by many factors beyond the program that they -- beyond the three hour after school program that they go to. There's a lot of discussion and I know in the past about social determinants of health. The influence of neighborhood and your zip code and how that influences the opportunities that you have. And so we have to recognize that it's not in a vacuum, that this is happening, that this program is happening.

Also, our programs don't serve every child in Miami-Dade County. So we have more than half a million children under 18 in our community and are serving a very small fraction of that. In our after school and summer programs, there's about 30,000 kids

a year. So we know that's going to, you know, we have to have the appropriate responsibility and attribution there. Our community results, though, are guiding stars, right. This is the north star of where we want our program efforts to be focused. So ideally what we do when we pick the measures that we're going to track in a program, is we have to align those measures to the results that we're seeking in a community. So that way we can kind of always keep a track on how well are we serving the -- that 30,000, we should definitely be holding ourselves accountable for in terms of the measures that we see as our valued measures.

So we want to just make sure we avoid the trap of looking at, okay, well you had a teen pregnancy prevention program that served 5,000 teens and did the teen pregnancy rate go up or down. You have to look at the teen pregnancy rate within those 5,000 teens that you worked with, not at the community level. But, with that said, we have to hold ourselves, and I say the royal ourselves, are the Children's Trust and our community partners, our policy makers, our legislators, our other community service providers responsible for these guiding stars, these overall community results that we want to see for children in

the community.

This next slide just gives you a snapshot of where is the funding. Using those categories, again, recognizing that there's categories of what's happening in those sort of overlapping, they relate to one another. This shows you a visual, our largest investment is youth development. However, we have made significant increases in parenting and early childhood with the Board's guidance over the past two to three years prior, in the input and the solicitations that were put out the last cycle. We have, as you know, an annual budget process that determines our budget. You guys have kind of been through that. We're coming up on the end of that now with the TRIM hearings. And we announce in the budget, are typically tied to our funding cycles, which come through competitive solicitations. And right now we are, for the most of our major initiatives, entering this second year of a five year cycle.

So I'm going to pause there and see if you have any clarifying questions about those overview slides about our headline results, our investment areas, how those connect to one another, and the budget breakdown.

MR. KIRTLAND: Excuse me.

DR. HANSON: Yes?

MR. KIRTLAND: You mentioned something about zip codes, and I was thinking is there any gap available that provides the highest concentrated areas of challenges per zip code?

DR. HANSON: Absolutely. And I promise I did not ask him to ask that question. But when we start to walk through the placemats that you have in front of you, you will notice on the back of each one there are maps that have different sets of data on them. And I will go through these with you as soon as we finish.

Any clarifying questions on this?

MR. HAJ: So just to be clear, we will be able to see if third graders are reading at grade level and the partners that we fund will give us that data? Because I know in the past, and I don’t know if it’s in grades, or how will we know that they are indeed reading at grade level?

DR. HANSON: Well, right now our programs collect their own reading measures, pre-imposed for their program. And they look at -- they look at two things, they look at both the level at which children are at and then they also look at growth, like did they change or improve over the course of the program. So

we've had access to that data in our own ego-system for our programs. Now we have started a partnership with the school district to, through their research review community, to be able to look at the school data connecting to our students. We aren't in that place totally yet, but we're definitely looking toward more integrated data partnerships, and we've done a little more in the early challenges phase around integrating data to look at sort of what kind of kindergarten readiness factors resulted later school success. So yes, those are the kinds of things we are looking to try to make connections with.

MR. HAJ: So we won't be able to see the grades just yet?

DR. HANSON: Not yet. But we're getting there.

Yes?

MR. HOPE: Steve here. So I attended a Board meeting for language and prevention. There was a presentation on the ACEs, Adverse Child Experiences. And they talked about given those experiences, it can have a significant impact on the development of a child in the early stages. So seeing that we have 90 percent budget allocated to early child development, do you believe that there should be a higher allocation in that category trying to address some of

the issues at the earlier stages, whereas you have about 39 percent in youth development?

DR. HANSON: I'm going to pause on that question. I'm going to ask you to bring that question to your small group discussion. That's exactly the kind of input and thoughts that we want to get from you. Right now I would just like to make sure that for the slides that you have, that we've gone through, is there any other clarifying questions? Because I do want to make sure before you go to the breakout sessions, that I've given you a little bit of an overview walkthrough of what's on these. There's a lot of information here.

COMMISSIONER JORDAN: In the strategic planning session, this session, I understand we're going to have breakout sessions, but are we going to have an opportunity in this session, where we have a collective Board, to kind of throw out concepts and ideas that we feel should be a part of the overall? Or do we come back together and do that at the end of the session when maybe half of the room is gone?

DR. HANSON: Well, hopefully everyone -- but, yes, our plan was that -- its difficult in a room this large to have everyone have the discussion time that's needed, so that's why we are splitting into the small

groups for sharing your ideas. We're going to -- you're going to put them on the sticky note, we're going to have notetakers in every room, then we're going to bring that information back in here to show it to you all and have you summarize and do a gallery walk and see what other ideas -- also, as you rotate through the sessions, you will see the notes from the people who were in the room before you on that topic, so you can say, yes, I second that idea, you know, I want to add this idea. That's how we designed this.

COMMISSIONER JORDAN: Okay, because the concern that I have is that the Board serves as a policy board. And in serving as a policy board, it's one thing to break up into groups and come up with ideas that help with programming. But what's said in policy, that to me needs to encompass as the entire Board and not just be something that's checked off in a small group and then it may or may not be adopted without having the entire Board be a part of it. I bring this up because a few meetings ago I raised an issue regarding childcare services. And I then asked for information from Early Learning Coalition and they provided me with all of the information regarding all of the centers. I asked for the same information from Head Start. And they provided me with all the

subjects they had. One of the things I found and I'm not sure about Early Learning Coalition is that with the Head Start, more than 40 percent of the parents are not working. And part of the reason, and this is what I brought up in the meeting, part of the reason that they're not working is because, for the most part, the childcare centers close at three o'clock and the public schools. And at four o'clock at the centers. Parents who have a job work until five o'clock or six o'clock. If your children stay beyond three o'clock or four o'clock, those parents have to pay for the children to stay. And to me that needs to be a policy decision or a policy discussion with this Board about do we want to have a policy where we have expanded hours.

As a matter of fact, I met with Amir yesterday because we were talking about Head Start. I mentioned to him that when I came through Head Start as a teacher, we had shifts, 7-3, 8-4, 9-5, 10-6. And you may have had two people coming on at seven and two people who stay from 10-6. But it allowed the parents an opportunity to have a job. Now I know we have Pre-K and other program funding sources, but what I had found is that those sources are being used to supplement as opposed to expand the hours so that

parents can work. To me that's a policy discussion this entire Board needs to have. And not just be relegated to a group.

MR. HOFFMAN: Commissioner Jordan, thank you. I think that this is precisely the type of issue that we want discussed by the Board. As Lori said, in format, we're all going to rotate through the groups in different areas and then get together and talk about the results. So I do think that there's an opportunity, but as we designed the session, felt it was better to identify some of those issues. And this is precisely one of the ones I think has been preidentified as a discussion topic. So to do that, and then bring it back to the full Board, and have a robust discussion.

COMMISSIONER JORDAN: Well, I have about five hundred.

DR. HANSON: That's great. That's great.

MR. HOFFMAN: Perfect.

DR. HANSON: We want to get them all down. If we need to follow up as well, we plan to bring back at the end we'll have the gallery walk, we'll have some prioritization, we'll have all your input. And then depending on where that lands us, we'll be following up in different ways. We can't pursue that yet

because we need to see what comes up and how many things and is it related to a specific -- we did work groups in the past, topical work groups to work on ideas. So it's definitely not intended to just be -- first of all, it's not intended to just be programmatic input. We are looking for your policy input. You all wear different hats in the community. You have different experiences that you bring to the table and we hope that you will all bring those fully to the table today. And then inform us. Really, we're framing these discussions around strategic opportunities and challenges.

So your example is a perfect example of a major challenge in the community with the system of care, around early childcare and Head Start. And then so what are the opportunities there to work on that issues. So I think it's a perfect example of the kind of thing we'd like to see generated in the small group discussions and then brought back into the larger fold.

DR. ABRAHANTE: On the slide that compares the children and youth and the different components, the one with the little squares. That one.

DR. HANSON: Uh-huh.

DR. ABRAHANTE: I think in the succeed

academically section, the early childhood development box needs to be filled in for sure. Because that is a key piece and the Commissioner was just talking about that. Of that piece. So I would make that recommendation.

DR. HANSON: Yes. We kind of have that under the ready for kindergarten, that the more that a child is ready --

DR. ABRAHANTE: But it goes beyond kindergarten.

DR. HANSON: [crosstalk] it's all pre-preparations that contributes to academic success.

DR. ABRAHANTE: But as you know, it goes beyond kindergarten. The impact of what the child receives in early childhood --

DR. HANSON: Absolutely.

DR. ABRAHANTE: -- stays with that child forever.

DR. HANSON: Absolutely. Although we were just trying to hone in on the top -- I mean, I could probably make an argument that every box on this picture should be filled in, right, and then it, you know --

MS. GIMENEZ: Well, that was going to be my comment for parenting. It has to be every box because the parents critical in any of these categories, whether they're successful and they're healthy. If a

parents going to take their child to the doctor, their child's not going to receive the medical care or mental care that he or she needs.

DR. HANSON: Right. Absolutely.

MS. GIMENEZ: So that's where we draw the line as to how important it is and to which area.

DR. HANSON: Yeah, yeah.

MS. KENDRICK-DUNN: And going back to that, because I had the area that says meets recommended levels of physical activity, I think parent definitely has to be involved with that. And then early childhood because this physical activity, which relates to physical and mental health, is going, and emotional health. If you start this early and you make this something as natural for a child, then maybe we'll have better health outcomes with certain groups of people in our community. But it needs to start when their kids go.

I think that for the physical activity, all the areas should be checked, even the family and neighborhood supports because communities need to be held responsible for making sure that our youth are not sitting and on the phone playing video games, whatever. And then the transition to adulthood, I think parenting because I don't think you ever stop

being a parent because your child turns 18. That support is needed. But I think parenting, and I think early childhood development, and then health and wellness because without that health piece, you can go into adulthood and struggle with health. And we know that we can prevent so many health chronic medical conditions that we see with certain populations of children if we start early.

DR. HANSON: Absolutely. So you guys have totally gotten the message of how all these things are really interrelated. So I appreciate that. I want to now just -- I'm going to say a couple of words about two of our investment areas that were in that circle, have to do with community awareness and advocacy and professional development. And we basically see these as sort of foundational investment areas. You might recall from the budget slide, these are very small percentages of our budget, about four percent in each. But we see these as critical sort of infrastructures supports to all the other areas that we're working in. So the connection, collaboration, learning, all of those things amongst our programs are important sort of processes to be happening to keep moving our results forward. So we want advocacy for good public policy, we want residents to know what services are

available. We want appropriate program for motion. We want to empower the community residents through community engagement. And then cross fund collaboration to leverage other resources. We have a number of capacity building efforts and particularly fostering small CBO capacity building and of course our research evaluation and innovation investments are really important for the learning aspect of what we're doing. But then, so our three areas for the breakout sessions as you can see on your agenda, have to do with early childhood. And by that I don't mean just one of the seven boxes of early childhood development, I mean all of what we do that relates to children from birth to school entry basically, so the year that they turn five.

School aged youth, again, relating to all that we do for kids that once they're in school until they complete school. And then special populations. So we have a number of vulnerable populations that we mentioned earlier that we know need our additional attention. I want to -- there's a lot of information on these data placemats. I want to first say thank you to my team that worked on these. Some people are in here, some people are not, but we worked hard to bring some available information. I'm going to walk

you through the structure of what's on here. But I also just want to emphasize that I don't expect you all to fully digest everything that's on these, you know, basically three pages, front and back of lots of detailed information. This is not a one and done information resource. This should be a lasting resource to you as reward to be data informed in your thinking, but also kind of gives you an idea the kind of information we can bring. So if you have questions and things that maybe aren't answered on here, you can let us know. We can make sure we're bringing the right information to you to help you in your guidance and policy development.

And so with that, I wanted to make sure that we reviewed these in here. We have only about ten or fifteen minutes left and we're supposed to start our rotations. But I want to answer clarifying questions about these in here while we're all together. So I'll just walk you through this structure.

On the side that looks more horizontal, like a placemat, the gray bar just reminds you of the investments that relate to that age group or to that set of special populations. In the other side of the document, we have sort of three sections. We have the top section that sort of gives you some rational.

This is typically based on research that we have gotten from other national and return on investment research about why this is important, why this area is important. The middle section really brings you some highlighted community indicators related to that area. And then the bottom section is a selection of some of our program results that we thought were important to highlight. And I'm just going to show you the back, that when you flip it over, because our county is shaped long and skinny and tall, we have to turn our placemats over to be able to see the biggest map possible. And so we have three maps. Each one has a different background on it. the background is noted by the shades of gray that are there. And then each map has a separate set of docs on it. There's some demographic information at the top of each map that relate to either early childhood, school age or special populations.

And so on the early childhood map, for example, what we have put on here is kindergarten readiness rates is the background and the dots are the programs we fund that serve the early childhood population. In the school age map, the background is third grade reading levels. And the dots are the programs that serve school age kids. And then in special

populations, you kind of have what I call our confetti map. So this is all the dots, everything we fund. And in the background is poverty.

So those are the three sets of maps that you have. And then what I'm going to do now is pause, give you a few minutes to be scanning over some of the information that's on here and asking any clarifying questions if something doesn't make sense.

MR. REYES: So on the 45 percent of children, Miami-Dade County, where more than 9,000, we know what the zip codes for these 9,000 children are?

DR. HANSON: Yes. And in fact, for our book club expansion, we have prioritized 11 specific zip codes where we actually looked at four different data sets. We looked at poverty, we looked at school readiness data, we looked at third grade reading levels. To Dr. Abrahante's point, that this has a lasting early childhood result.

And then we looked at our EBI data, which is our early development inventory that we collected in partnership with the school system a few years ago. That gives us actually a breakdown of developmental, five developmental domains of how kindergartners are looking. And we said which are the zip codes that have three or four of those indicators that are in the

wrong place, the wrong direction. The encouraging thing is we have 67 plus zip codes. We have a lot of zip codes, 11 zip codes. Only one zip code had all four of those indicators, you know, not where we would like to see them. Ten additional zip codes had three. So those 11 zip codes, for kids who are birth to five, in those 11 zip codes, I think it's about 30,000 kids, 35,000 kids under five in those 11 zip codes. So now we're talking about 350,000 and 550,000 children in total, right, 27 percent of those are birth to five. But now we're saying, hey, there's this 35,000 set of kids, let's be somewhat strategic and focus in. So we're using data in those ways to look at that vulnerable support population aspect.

MR. HOPE: Last year at the, I think it was at the strategic planning meeting, a similar map was presented that highlighted certain geographic areas that were underserved and had some of the greater challenges. And I think at the time the discussion was how do we reallocate resources to address those specific communities that were highlighted on the map that had, I would say, some severe issues. Can you talk a little bit to what was presented then at the last meeting and now? In terms of have funds been reallocated to those areas, and what types of results

have we seen.

DR. HANSON: Yeah, the most similar map to the one that you're talking about is the special populations map. This is the map that has poverty in the background. The map that you're referencing from last year was the child rearing vulnerability was what we used in the background. That one actually takes into account like ten or 12 different factors related to family structure and family economic status and so forth. What was missing from that map that I think you all didn't have at the time was the dots that are on this map. The services and what they are and where they're in place. So we added that here so you can see what's in place in the places where there's more challenge related to poverty.

What I would say is that services are not the answer to all the challenges we see in the community. Hopefully I don't fall down dead because I work here at The Children's Trust, where the main thing we do is fund services. But many of the challenges in our community are rooted in history, they're connected to early childhood adverse experiences, they go outside of the boundaries of just, oh, you don't know how to read, let's give you a reading tutor and now you know how to read. There's a lot of reasons and root causes

behind why things look the way they look. And so I think that we are involved in many partnerships around the community that are looking at these issues and trying to work on things in a more systematic way. Partnering with community neighborhoods for them to look at what they're own challenges are and what they believe solutions might be useful. And so we're using, in that community engagement model that our community engagement team uses, which really puts a lot, tries to share the power of what are the ideas for improvement. So yes, we make sure that services and resources are available. That's part of the equation for sure, a very important part of the equation. Making sure people know about them, but also then engaging with the community around those challenges.

MR. KIRKLAND: To somewhat expand on Steve's comments, question, how do you measure the success impact of the reallocation of refocusing the funds? How is that done? What tool is used to determine if we make an impact in a positive way?

DR. HANSON: Well, as a whole, The Children's Trust, we look at whether we made an impact on these community factors. And what I can tell you is that on most of the key indicators that relate to children's

growth and development, if you look at a 15 year trend line, on many, many of these factors, we're doing well in terms of our progress, the direction, the change is happening. We're not doing so well in terms of where we've gotten to yet, right. We're not where we want children to be yet. And where we're also not doing so well is if you start to disaggregate that data, you see many disparities. And so we need to have more sophisticated approaches to reducing those disparities. And when we look at our data, we need to look deeper in the data, not just the high level, everybody's performance is here.

MR. HOPE: Just a quick follow-up question. So the vulnerability map was designed to highlight us some of the key areas that needed to be addressed. So one year later, it would be helpful to get an idea, this is where we were, this is the actions that we took, this is where we are at this point in time, so that we could determine whether or not as an agency, the Board needs to look at maybe allocating additional funding, or maybe looking at whether or not the strategic direction that we're implementing is addressing some of those areas identified from last year.

DR. HANSON: Yes. Well, so this year what we

decided to do, was because that index is very difficult to kind of kick apart 12 different factors on the map at the same time, especially when you then add all the different initiatives that we fund. We brought you back a map that shows you poverty and then what we thought was most related to the early childhood, school aged, you know, we picked two. There's a million that we could pick from, but we picked kindergarten readiness and third grade reading as those factors that we thought you should pay attention to and that are more directly related. We can't change single parent household. What we could work on is reading. We can work on school readiness and the whole child. We can work on ACEs, we can work on parenting support. So we try to kind of update our maps for you this year. And we have two minutes now before we need to have you guys shifting into your breakout sessions.

On the last slide in your printout, you have this slide. So that it tells you sort of where the different topic areas are. So we're in the training room now. Conference room A is this conference room on this side. And conference room B is the one over here in the lobby. And we're going to have you, each of you will have a Board member in there that's

facilitating your discussion. You're going to have staff members taking notes on the computer and on flip charts so that you can bring the flip charts back in here. You're going to talk specifically about the opportunities that exist, so specific existing opportunities, not just I wish this was here, but something that you know of that could be within reach of the Trust that you can take advantage of. A strategic policy or investment. And then challenges. Again, specific challenges or thrusts that might hinder our current implementation of our strategic plan or things that we need to be aware of going forward that might be current issues. That's what we want to hear from you. You're going to divide your time in each group to talk about both of those things. And so I'm going to invite you now, for the Board members only, to count off by three's, and then you'll go to the separate rooms.

Okay, so one's are going to start in conference room B.

MS. JORDAN: Do you rotate?

DR. HANSON: Yes. So the topic will stay in the room and you will go to each room. Yes. So the one's will start in conference room B. Let's have the two's stay here, and let's have the three's go to conference

room A.

(Thereupon, short break was had.)

MR. HOFFMAN: So, in any event, if you can fill that out before you leave and turn it in the front table or leave it at your table, that will be great.

So I want to turn it over to Lori. I thank everybody for their participation. I think if you've been in all three rooms now, you know that we gathered a lot of information. Some of it we'll have to filter after the meeting, but I think the purpose of this next exercise and session is to get a little bit more aware in terms of the Boards priority are. Again, there's a lot of information that we gathered, but we'll do what we can.

MS. HANSON: Yes. So thank you everybody for moving around and sharing your main ideas. I'm going to just tell you sort of what we have where. So on this side we have some of the notes from the opportunities and challenges related to early childhood. This one is a summary of the ones that came up in the school age discussion. And this, our most diligent group, special populations challenges and opportunities.

What we've done here is taken all your sticky notes that you put your topics on at the end of each

group and its color coded. So pink is from the early childhood session, blue is from the school age session and green, yellow/green from the special populations. I see we got more than one per person, probably inaccurate, but they all fit on the chart so we're good. And then the boxes that are on this poster are our seven priority investment areas. Right, these are our seven essentially budget categories. They overlap. Remember we talked about that in the beginning, they relate to one another. So that's why I'm not freaking out that there's only one sticky note in the parenting box because I know that, you know, even here where you're talking about other things and mental health and addressing special needs an special populations, that involves parents, right. So don't get too freaked out about that, but really what we wanted to see is just a visual snapshot, right. Where are your heads? Where are your discussion points laying out on the categories from parenting, early childhood development, youth development, health and wellness, family and neighborhood supports? This is where we do a lot of our place based, neighborhood based, special populations, work, community awareness and advocacy, program and professional development. And then we

have one box for other, right.

So there's some ideas that you guys came up with that related across, right. Some people talked about continuative care and essentializing connection, holistic approach to services. So we felt like that kind of came over here in its own box because it touches everything. So, also what we attempted to do, if you see sticky notes touching each other, that means they're similar ideas, right, so they're connected, they came up from more than one person as a top issue.

So, what we want to do now is give you a few minutes -- also, each Board member should have been given a little paperclip set of three dots. If somebody doesn't have one tell me. Make sure you have three dots. One has a number one, one has a number two, and one has a number three. What we're going to ask you to do is, you all went through all the groups and some of the groups you got to see the notes already from the prior sessions, but if you were in an earlier session for that topic, you might have not yet seen the ideas that were generated by the groups after you.

So we're going to invite you to do what we call a gallery walk. Go and look at what the early

childhood things say, chat with people about what you see, go and read the -- you have to step up closer to read them. Review what you see over here on, looks like the U.M., someone was from U.M. here, orange and green. And see what came up with the special population groups. After you kind of rotated to look at those three, bring your dots over here and put your one, two, three dot in one of these seven squares. If you want to put one, two and three all in the same square, you can do that, okay. You have those three dots. But if you have sort of two or three things that are really important to you, rank order them in your head and put your dots accordingly.

Does that make sense? Any questions?

Okay, so try to split yourselves evenly so that you're not all crowded up. It's quite crammed with all the furniture in here, but --

MR. HOFFMAN: I think the important thing here is, again, we're trying to give the staff some direction and inquiry. This is not the end of this process. We will, in the, probably not in the next Board meeting, but the Board meeting following, we'll have a further discussion on some sort of a policy, issues that have been identified.

MS. HANSON: Yes.

MR. HOFFMAN: And sometime in the interim staff will help us by kind of identifying what the priorities were.

MS. HANSON: Yes. We'll summarize this back. You can see it here a little bit, but we're going to put it all together and feed all this information back to you. As Ken said, the next set of Board meetings is TRIM. There's a short Board meeting before the first TRIM hearing, so that's a quick turnaround meeting. And its really focused on the critical business of the Board has for approving the budget and millage rate. So we will be talking about this again at the October Board meeting and we'll have some information back out to you guys before that.

Good?

MR. HOFFMAN: Yes.

MS. HANSON: Okay, thank you.

Feel free to move around.

(Thereupon, short break was had.)

MS. KOBRINSKI: Shanika and myself are the attorneys assigned to The Children's Trust Board. Basically what's coming up in September is we're going to have two hearings. They're called the TRIM

hearings. TRIM stands for Truth in Millage. And so we're going to be having a TRIM hearing on September 9th, and then a second one on the 16th.

And so what the TRIM is, is basically the Florida statue that allows the county to set up The Children's Trust. Steps for the mechanism by which the Children's Trust can get a percentage of the property taxes, the property taxes in the county. And the statue sets up half of that millage, at .5. And so, The Children's Trust, every year, adopts a rate of what percentage they're going to charge for the millage tax for all the property in Miami-Dade County. And based on that, The Children's Trust gets income that allows it to distribute the money for children's services in the county. Allows the Children's Trust to operate. Allows us to designate the services. It's all the funding that we make in use, priority decisions, that this money allocations based on.

So the first TRIM budget hearing is going to be on the 9th. And the first thing that's going to happen is that they're going to ask the Board to set the millage. And once the millage is set and adopted, tentative millage, and then they're going to adopt the tentative credited. So based on that

millage, we'll know what that budget is. I believe the tentative rates have already been adopted by the Board back in July when there was discussion about the budget at that time. So the first hearing is really more of a formal proceeding. There probably won't be a lot of discussion, but it will be starting at 5:01 per the Florida statue. And we'll allow public comment period. And then following that, there's kind of a script for the proceedings that we'll go through. The Board will adopt the millage rate and then they'll adopt the budget. And the same thing will kind of happen at the second one. It's kind of a similar formula. So once we've adopted the tentative, a notice is given out to the public about what the millage rate is that The Children's Trust is considering adopting. And then the 16th hearing they'll adopt a final, a final millage and a final budget rate. And that will be sent to the property appraiser and at that point that's when the taxes take effect.

So you'll hear what's called a rollback rate. And a rollback rate is where the Board adopts a millage that's, kind of maintains the previous years funding at the same level. This year, I believe, The Children's Trust is considering adopting an increased

rate. I don't remember the exact calculation. So they're going to be increasing the millage rate, so they'll take in more funding. And you know it's very important that there's a quorum at the Board because if there's no quorum, there's not going to be money coming into The Children Trust, so we stress that it's very important for you to be present. And also that the Board actually do with their tasked with doing, which is adopting the millage, adopting the budget.

This is a set formula, a process, and without it there's no way The Children's Trust can continue to operate without the funding stream.

Is there any questions about this? This is just kind of a brief introduction about what's coming up in the next few meetings.

MS. GRAVES: We also just wanted to take a brief moment about Board members in your bubble, as a member of this Board. So you will, at some point, have your initial Board member orientation that will be provided by the Trust, but after that initial Board member orientation, there is also an ethics training. So the commissioner on ethics will come in and do a comprehensive training.

Part of that, we just want to talk about roles

and responsibilities, what's expected of Board members. If you need assistance with anything, who you can contact. So I believe the Trust has executive staff members who are assigned to all the Board members to -- if you have any questions, but you can also contact Leigh or I. But one of the biggest and most important roles that you have as a Board member is these are public dollars and public funds that you are allocating and authorizing to be used. And so we always have to keep in mind that you have a fiduciary responsibility. What does that mean? That you can't have a conflict with interest, that you have to look at what the statute and the ordinance that authorizes the creation of the establishment of the Trust to exist, allows.

You also have to know, like, so the Trust is subject to Sunshine Laws. What is Sunshine? Everything has to be open to the public, so two Board members cannot meet outside of a publicly noticed meeting to discuss matters that they may vote on as members of The Children's Trust. In addition to that, you have public records. So the public records law applies to you as a member of the Trust. If you send emails or documents, a member of the public can say Children's Trust, we want that. Even if you sent

a text message, if it's about Children's Trust business, those electronic records are covered.

And so we have suggested that you steer away from text messages because sometimes people automatically delete them. If you do text, then you have to keep a record of that. It could be a screenshot, you could print it out, but sometimes that's not really practical and it's difficult to do because texting is so dynamic, you do it, you do it, you do it, and you just forget about it. Or unless you're like me, you keep everything and so then you can't find anything. But those two are like two of the biggest issues.

And we'll go back to Sunshine just for one quick minute because it's so easy to violate Sunshine without any intention. And there are criminal and civil penalties for violations if you violate Sunshine. There has even been, I recall, one person who was in prison, in jail for Sunshine violation. Now that is really the outer end of the spectrum, but we just want everyone to know that it is a possibility.

So, Sunshine violations, if staff contacts you about a Board item and you say -- I'll give an example of a Sunshine violation that we had before, I

believe, last year. The Trust was working on bylaws, changes to the bylaws. We had several versions. The chair at that time had a draft, she gave it to staff. Staff then spoke to another member of the Board, showed that member, the chairs revisions and drafts. That member, the second board member made additional revisions and those additional revisions were then given back to the chair. That was a Sunshine violation. Because staff was used as a conduit, although unintentionally, to communicate two different board members impressions of what they wanted to do with the bylaws outside of a publicly noticed meeting. Who would have ever thought that would be -- it could happen, but it happens. And so we always error on the side of being overly conservative and say that if staff presents something, just take it. One board member -- if you want to send something to the Board, send it to staff, staff can send that to the entire Board. It won't be a violation as long as there's no feedback until the publicly noticed meeting.

MS. HANSON: Just on the public records, like she said, you know, maybe you want to have an email folder for all of your email notifications for Children's Trust staff about The Children's Trust, so

you can just folder it and preserve it. You could also copy Muriel on everything, she's the clerk for the Board. That's another way of preserving communication. The Children's Trust doesn't get a lot of public records requests, but it could. And in that case we want to be able to easily retrieve it and provide it. So just kind of set it aside and we won't have to deal with that.

MS. GRAVES: So when you have your ethics training, the commission on ethics will go in more detail about it. But until -- and it will be about the conflict of interest and public ethics ordinance, the citizens bill of rights, which has special duties and obligations of Board members in there for the public. It will be Sunshine public records and a few other laws. But until then, if you have any questions, feel free to contact either of us, we'll be happy to help, and welcome to the Board.

MR. HAJ: Thank you. Any questions?

Thank you, everybody.

(Whereupon, at 10:40 a.m., the meeting was adjourned.)

CERTIFICATE OF REPORTER

STATE OF FLORIDA

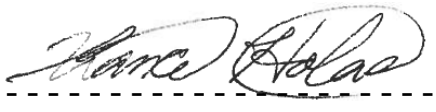
COUNTY OF MIAMI-DADE

I, XIANCE HOLAS, court reporter and Notary Public do hereby certify that the foregoing proceedings were taken before me at the time and place therein designated, and that the foregoing pages numbered 1 through 53 are a true and correct record of the aforesaid proceedings.

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

Under penalties of perjury, I declare that I have read the foregoing certificate and that the facts stated herein are true.

Dated this 20th day of September 2019.



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