

Program Services and Childhood Health Committee Meeting Transcript

October 4, 2018

1	THE CHILDREN'S TRUST PROGRAM SERVICES
2	AND CHILDHOOD HEALTH COMMITTEE MEETING
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4	The Children's Trust Program Services and Childhood
5	Health Committee Meeting was held on Thursday, October
6	4, 2018, commencing at 3:30 p.m., at 3250 S.W. 3rd
7	Avenue, The United Way, Ryder Room, Miami, Florida
8	33129. The meeting was called to order by Pam
9	Hollingsworth, Committee Chair.
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11	Committee Members
12	Pam Hollingsworth, Early Learning Coalition Lileana de Moya, Gubernatorial Appointee
13	Marissa Leichter, Gubernatorial Appointee Dr. Daniel Bagner, Florida International University Rodester Brandon, At-Large Board Member Tiombe-Bisa Kendrick-Dunn, Gubernatorial Appointee Frank Manning, Florida Department of Juvenile Justice Mary Donworth, United Way of Miami-Dade Shanika Graves, Assistant County Attorney Leigh Kobrinski, Assistant County Attorney
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16	
17	deigh Robinski, Assistant County Actorney
18	STAFF:
19	Imran Ali
20	Deborah Robinson
21	Donovan Lee-Sin
22	Juana Leon
23	Juliette Fabien
24	Lori Hanson
25	Muriel Jeanty, Clerk of the Board

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STAFF (continued):
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     Rachel Spector
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     Sabine Dulcio
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     Tatiana Canelas
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     Vivianne Bohorques
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     William Kirtland
 7
     Yesenia Reyes
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 9
         GUESTS:
     Lyse Deus
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     Judy Schaechter
     Lesley Mendoza
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     Betty Alonso
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     Diana Venturini
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     Dr. Katie Hart
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                            PROCEEDINGS
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                 (Recording of the meeting began at 3:30
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    p.m.)
                 MS. HOLLINGSWORTH: Welcome to the October
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     4th Program Services and Childhood Health Committee
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    meeting. It's been a little while since we met, so it's
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    good to see everybody today. We're a little bit spread
     out today, but good afternoon to everyone.
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                 Muriel, do we have any public comments for
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    today's meeting?
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                 MS. JEANTY: No public comment.
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                 MS. HOLLINGSWORTH: Okay, very well. Then
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     let's move on to the approval of the July 5th, 2018
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    minutes. We do have quorum, yes? Yes, we do,
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    beautiful.
                 Thank you.
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                 May I have a motion to approve the July 5th
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    minutes?
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                 MS. DE MOYA: So moved.
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                 MS. HOLLINGSWORTH:
                                     Thank you. And a
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     second?
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                 MR. MANNING: Second, Frank Manning.
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                 MS. HOLLINGSWORTH: Thank you. All those in
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     favor?
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                 (WHEREUPON, the Board members all responded
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    with "aye".)
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                 MS. HOLLINGSWORTH: Any opposed?
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                 (NO VERBAL RESPONSE.)
                 MS. HOLLINGSWORTH: The minutes are
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     approved. Okay. Before we move on to the resolutions,
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     we have a video for you.
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                 MR. ALI: It relates to the first
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     resolution.
                 MS. HOLLINGSWORTH: And it does relate to
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     the first resolution.
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                 (THEREUPON, A VIDEO WAS PLAYED.)
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                 MS. HOLLINGSWORTH: Thank you. What a
12
     terrific video. They were some really great and
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     high-performing young folks. So that's a nice seque
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     into our first resolution for today's meeting.
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                 Resolution 2019-A: Youth Advisory Committee.
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     Per The Children's Trust approved budget, this
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     resolution seeks authorization to continue to operate
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     the Children's Trust Youth Advisory Committee, expand
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     its members and increase the number of meeting sites.
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                 May I have a motion?
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                 MS. DONWORTH: So moved, Donworth.
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                 MS. HOLLINGSWORTH: Thank you. And a
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     second?
                 MS. DE MOYA: Second.
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                 MS. HOLLINGSWORTH: Thank you. Are there
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1
     any recusals?
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                 (NO VERBAL RESPONSE.)
                 MS. HOLLINGSWORTH: Moving on to discussion
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     or comments regarding this resolution.
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                 DR. BAGNER: I just have a question.
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     are the students recruited for this program? Do they
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     target schools, particularly high-risk neighborhoods, or
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     is it just a general recruitment program?
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                 MR. LEE-SIN: For the Youth Advisory
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     Committee, participation is open to all high school
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     students in the County. We actively go out to -- I
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     think we've been to nearly 85 schools since summer 'til
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    now.
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                 But historically, we've had participation
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     from kids in public school, charters, private school, so
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     it's open to all.
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                 MS. HOLLINGSWORTH: Thanks, Donovan.
                                                       Any
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     other questions, points of discussion?
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                 (NO VERBAL RESPONSE.)
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                 MS. HOLLINGSWORTH: Hearing none, all those
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     in favor?
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                 (WHEREUPON, the Board members all responded
23
    with "aye".)
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                 MS. HOLLINGSWORTH: Are there any opposed?
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                 (NO VERBAL RESPONSE.)
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                 MS. HOLLINGSWORTH: The motion carries.
     Resolution 2019-B: Authorization to negotiate and
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     execute a contract with the Public Health Trust of
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     Miami-Dade County d/b/a Jackson Health System, in
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 5
     partnership with the University of Miami Miller School
     of Medicine, to implement Miami's Injury Free Coalition
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     for Kids, a national model for injury prevention
     programming, and to replace the Injury Free Mobile unit,
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     in a total amount not to exceed $524,000.00, for a term
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     of 11 months, commencing November 1, 2018 and ending
     September 30, 2019.
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                 May I have a motion, please?
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                 DR. BAGNER: So moved, Bagner.
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                 MS. HOLLINGSWORTH:
                                     Thank you. And a
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     second?
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                 MS. DONWORTH: Second, Donworth.
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                 MS. HOLLINGSWORTH: Are there any recusals
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     for this resolution?
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                 (NO VERBAL RESPONSE.)
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                 MS. HOLLINGSWORTH: Okay. As we move into
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     discussion, I see that Dr. Schaechter is here. Would
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     you like to say a few words about this project, Dr.
     Schaechter?
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                                  Thank you.
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                 DR. SCHAECHTER:
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                 MS. HOLLINGSWORTH: Would you approach the
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podium, please. You can bring your colleague if you'd
like. The name of your organization, please.

DR. SCHAECHTER: Judy Schaechter, Injury
Free Coalition for Kids, which is a collaborative
between Jackson Memorial Hospital and Health Center and
the University of Miami.

We've been -- thank you for having us and thank you for all the work that you do for this initiative. We have been doing injury intervention for children. Childhood injury is the leading cause of death and acquired morbidity disability among children, and we've been doing this in Miami-Dade County, throughout the County, for about 20 years.

We thank the Children's Trust for the partnership in doing that. We have not asked -- we haven't had an increase in funding for well over 10 years.

And part of what we do is with a big red Injury Free Mobile that travels throughout the County and provides training to parents and providers and service workers and law enforcement and health care providers as well in three languages.

We do that on the interior, which is done like a home with what we now call simulation and hands-on learning so that people can find the incorrect

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thing, a cord that's dangling near a crib that might cause a strangulation, maybe an Ajax container that really looks like parmesan cheese, and learning how to secure those dangling cords or keep those poisons away.

We also do child passenger safety, so car seat trainings for those who would become instructors, as well as providing the training right to parents and getting them a car seat, if necessary, and booster seats and reinforcing things about child passenger safety for kids who are about eight years of age or less.

We are available to everyone who wants to work with us and partner with the Children's Trust, the home visitors and the other service providers. We would like to go back to add more direct services for parents which we know is a valid, evidence-based program.

And we want to add in some things that are not necessarily new injuries but the spikes are coming off, in terms of suicide prevention. We've always done some guideline prevention but we think that that can be bolstered.

Poisoning prevention, which now has to do with things like liquid marijuana, edible marijuana and the opioid epidemic. So that's a bit of an overview of what we're doing. This does contain funding for a new bus. Ours is how old -- 20 years old. That's how long

we've been using it.

MS. DEUS: Thirteen years.

DR. SCHAECHTER: So we got a retired passenger City bus from Miami-Dade County and rehabbed it, and now it is not only looking old but it's currently not moving, so we really do need a bus, so we want to use that to reinstate some of the interiors that have been doing for parents and service providers as well as increasing capacity for health care providers and other first responders so that they can carry the message further.

We also want to update in terms of how we can get our message out with social media and other forms of media to move this further. We're happy to take any questions -- she's the backbone but she's always quieter than I am.

MS. HOLLINGSWORTH: State your name, please.

MS. DEUS: Lyse Deus.

MS. HOLLINGSWORTH: Thank you.

MS. DE MOYA: Dr. Schaechter, just to be clear, the resolution says that the bus is 30 years old. It's 20, so we need to correct that. And is the bus being refurbished or are you getting a brand-new bus?

DR. SCHAECHTER: So, we looked at all the

options in terms of refurbishing it only on -- well, the

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interior and exterior, because things look extremely tired and it's hard to engage people.

MS. DE MOYA: Sure.

DR. SCHAECHTER: And then we realized that we had to redo all of the engine, which it's really been kept -- it was fully retired, like, not reused, so it was going to go, and we've had one of the people on our staff is really great at maintaining that all these years. And it died about two or three weeks ago.

So, we discussed the cost-effectiveness, and I think staff on the Trust agree that it was most cost-effective to get a new bus. We also talked about having another used bus, and that this would be the best, most efficient way, the most cost-effective way to do it. As it is now, we're not sure because we don't have a bus.

MS. DE MOYA: So, I was just wondering, and the reason I was asking is, there's a lot of, like -- not a lot, there's only a few -- but vocational technical schools that have auto mechanics and things like that, that maybe the bus could be donated for the students to practice fixing engines and working on it, because I know sometimes they're looking for, especially a bus. Cars are easy.

DR. SCHAECHTER: It's a super idea. And at

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the moment, it is with a mechanic, I think, with the 1 County. And we would like to tow it so that we can use 2. the interior. We can't take it out. Once we have a new 3 bus, I think we would entertain that. We talked about 4 using it as a backup for when it gets -- the new one 5 gets serviced, but I think we can certainly entertain 6 7 that. MS. DE MOYA: Okay. Thank you. 8 9 MS. DEUS: (Indiscernible) Thirty years 10 (indiscernible) plus the transit (indiscernible) prior 11 to. 12 MS. DE MOYA: Okay. So then the correction 13 is not needed. 14 DR. SCHAECHTER: It's 30 but it's been ours 15 for 20. 16 MS. DE MOYA: Okay. Thank you. I just 17 wanted to make sure the resolution read correctly. 18 MR. BRANDON: So, with one bus, how -- can 19 you help me understand how you're covering the entire 20 County? 21 DR. SCHAECHTER: Yeah, so we have actually 22 been doing -- we, as a team, with two other folks that

been doing -- we, as a team, with two other folks that have been doing trainings where the bus isn't always necessary so she'll go out to them.

But we bring it throughout the County on two

different locations. So it might be a health fair but
it might be a school and it might be a house of worship.

MS. DEUS: It's been everywhere. We do baby showers, day care. We're not limited as long as they have the space.

DR. SCHAECHTER: And we should probably mention that there is a match that we think will be secured this month from the Health Foundation of South Florida because the bus cost itself is above what we're asking from you, and that would be \$100,000.00 for the bus. They're going to talk to us about also operational going forward and it looks like they're going to go back home because we're very optimistic.

MS. HOLLINGSWORTH: Thank you. Any other questions for Dr. Schaechter or Ms. Deus?

DR. BAGNER: Sure, yes. So, I'm just going to say, I think this is really important work, so I'm really happy to see you doing this. I'm curious if you could speak a little more to how you're targeting particular under-served neighborhoods where unintentional injuries are much, much higher and how you're targeting those communities more specifically.

DR. SCHAECHTER: So, some of that is based on historic data and ongoing data in terms of finding those places. So, I will tell you that there have been

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other times when we had multiple sources of funding, we were able to employ injury epidemiologists for about 10 years and working with the Department of Health to actually create those maps of where not only injury is more but which specific types of injury and what neighborhoods and how to do that.

That doesn't change too much from time to time, so we are using our prior data to identify hot spots in combination with other things. So the County actually had some data in terms of pedestrian injuries.

We have often met with things like League of Cities to find out what key stakeholders are looking for and what systems are responsive to what they're looking at, as well as law enforcement, of course, and so that's where we go.

We have -- in addition to Haitian descent, we have Cuban and Nicaragua, so that's how we're able to do everything in three languages and be culturally appropriate. And so we will, I think partnership is important, true to the Children's Trust, of serving all children. We'll go anywhere to research injury. But it is true that we target places where injury is highest and very often that correlates based on data that's not just ours but nationally with low-income areas.

MS. DONWORTH: How many people do you see a

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year?
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                 DR. SCHAECHTER: It depends on which
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     activity.
                 MS. MENDOZA: Overall, we see about a
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     thousand a year.
                 DR. SCHAECHTER: So, how many car seats --
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     car seat checks?
                 MS. MENDOZA: 300 car seat checks.
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                 MS. HOLLINGSWORTH: Thank you. Thank you
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10
    very much.
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                 DR. SCHAECHTER: And I just want to say, you
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    know, 1,000 people may be a whole lot more children.
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     Thank you.
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                 MS. HOLLINGSWORTH: Thank you. All those in
15
     favor?
                 (WHEREUPON, the Board members all responded
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17
     with "aye".)
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                 MS. HOLLINGSWORTH: Are there any opposed?
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                 (NO VERBAL RESPONSE.)
                 MS. HOLLINGSWORTH: The motion carries.
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     Resolution 2019-C, authorization to negotiate and
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     execute a contract renewal with Nova Southeastern
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     University for capacity building for school nurses
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     around oral health screening, prevention, and referral,
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     in a total amount not to exceed $166,667.00 for a term
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of eight months commencing November 1, 2018, and ending
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 2.
    June 30, 2019.
                 May I have a motion, please.
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                 MR. BRANDON: So moved, Brandon.
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                 MS. HOLLINGSWORTH: Thank you. Second?
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                 DR. BAGNER: Second, Bagner.
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                 MS. HOLLINGSWORTH: Do we have any recusals?
                 (NO VERBAL RESPONSE.)
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                 MS. HOLLINGSWORTH: And we move to
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    discussion.
                 MS. DE MOYA: I have a question.
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     somebody could just refresh my memory. Do we not fund
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     someone already other than this resolution to support
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     the school nurses? Isn't there an organization that
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    does oral health screenings, right?
                 MS. FABIEN: That's this organization,
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    that's Nova.
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                 MS. DE MOYA: It's this one. So it's the
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     same one?
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                 MS. FABIEN: Yes.
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                 MS. DE MOYA: Okay. But now they're going
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    to be supporting school nurses in addition to what they
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    do?
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                 MS. FABIEN: So, this contract, it's an
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     integration of oral health into our school health
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programs, so what they do is train the nurses on how to 1 2. do assessment, apply fluoride varnishes, so they work with the school health team in order to implement this 3 contract. 4 MS. DE MOYA: So, they don't do the 5 screenings separately? 6 7 MS. FABIEN: So, they don't perform the screening. They train the nurse on how to do the 8 9 screening. 10 MS. DE MOYA: It's always been that way? 11 MS. FABIEN: Yes. 12 MS. DE MOYA: Okay, sorry, I mean --13 DR. HANSON: But if I could interject --MS. DE MOYA: Is this different somehow? 14 15 DR. HANSON: No. What's different is that we voted to approve for us to release a solicitation 16 17 that includes direct oral health services. It's out 18 right now, in fact, today. And so you're going to see 19 those recommendations coming, you know, separately. 20 You probably saw this most recently in May 21 because we needed more time. So the contract was 22 expiring, so we added three months and then we, you

exemption because the infrastructure is already in place to do the training with the nurses in the school health

know, and so now, we're taking this piece of the health

for this piece.

But the other piece is being competitively solicited to put services, direct oral health screening and preventive services out in the community. So that's going to be coming back as recommendations once we release those.

MS. DE MOYA: And that's new, okay. That's why I was a little confused, because I thought I had seen this --

DR. HANSON: Yes. You approved the solicitation and then you approved the extension, and now we have this piece -- and you're going to see one more piece after this, and then we'll get it all aligned.

MS. DE MOYA: Okay. Thank you.

MS. HOLLINGSWORTH: Thank you. Further discussion?

MS. KENDRICK-DUNN: I think I e-mailed with Stephanie about this, but she told me -- I just was wondering about the fluoride varnishes, because there is some controversy around the use of fluoride because I believe it's a toxin in these children.

So, I was just wondering if Nova is using something else in addition to fluoride, if the parents decide that they do not want to consent. She said that

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parents can say "no." But if they say "no," is there any other option besides using the fluoride?

MS. FABIEN: So, I would say about the safety concern, and we have research done about it but never proven, that it was -- because I think the concentration, it's a little bit past 0.000 something but it's not too much different from what's in the toothpaste so it's safe.

And we have many studies out there showing it's safe to apply. To answer your question about the parents, and that's not something that we do behind the surface. They will say, I have my rinses, we don't need this. They would not say, oh, we don't want the varnish. We haven't seen that.

But we have surfaces that are available. If they say they don't want the varnish application because we had an oral health assessment, and then they say, the child needs to see, because you would be surprised as to the type of cases you would see. And then they would get a referral to, like, a dental provider for assessment and treatment.

MS. HOLLINGSWORTH: So, in other words, there is no replacement if a parent opts out of fluoride for health concerns, but other kinds of referrals can be made?

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                 MS. FABIEN:
                              Exactly.
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                 MS. KENDRICK-DUNN: Is it possible, I mean,
     if the Trust has looked at the research, I mean, is it
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    possible to share that? Because, I mean, I've seen some
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     research that said otherwise. I mean, I understand
     about the fluoride but, I mean, if the research can be
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     shared with me, I would appreciate it.
                 MS. FABIEN: Absolutely.
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                 MS. HOLLINGSWORTH: Thank you. Further
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     discussion?
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                 (NO VERBAL RESPONSE.)
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                 MS. HOLLINGSWORTH: All those in favor?
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                 (WHEREUPON, the Board members all responded
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     with "aye".)
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                 MS. HOLLINGSWORTH: Any opposed?
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                 (NO VERBAL RESPONSE.)
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                 MS. HOLLINGSWORTH: The motion carries.
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     Resolution 2019-D, authorization to release a
19
     competitive solicitation of $882,168.00 for continued
2.0
     reading enhancement services, in alignment with the
21
     Board's strategic plan with a new 5-year funding cycle
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     to begin October 1, 2019.
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                 May I have a motion?
                 MS. DONWORTH: So moved, Donworth.
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                 MS. HOLLINGSWORTH: Thank you. A second?
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first-graders.

Second, Brandon. 1 MR. BRANDON: 2. MS. HOLLINGSWORTH: Are there any recusals? (NO VERBAL RESPONSE.) 3 MS. HOLLINGSWORTH: Open for discussion. 4 MS. KENDRICK-DUNN: So I have a question 5 regarding the students or the children that will receive 6 7 these services. So, I'm just wondering, for some of the students who may be classified, let's say, with a 8 9 disability, like a learning disability, who may have an 10 IEP or a 504 plan. But how is that aligned with the services that are going to be given here? 11 12 I'm just wondering if, like, does the staff 13 receive any additional training related to students that 14 have specific learning disabilities, let's say, reading, 15 because you would treat those children differently, versus a child that does not have a learning disability. 16 17 DR. HANSON: So, this solicitation would 18 only be for rising kindergarten, rising first and rising 19 second-graders. So we're talking about the young end of

second-graders. So we're talking about the young end of the spectrum and that distribution is towards -- because it focuses on prevention and very early intervention, skews towards the rising kindergarten and rising

We added rising second-graders. This is probably the third funding cycle that we're doing this.

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And I think we added them in after the first funding cycle because we found some of the first-graders that came back the next summer still needed some help.

So, certainly, there are probably a small percentage of kids who are already identified. But generally, what we find is that in this certain population, they haven't yet made it through all the levels of evidence that are required for the school system to get identified fully for these kinds of services or diagnoses.

So, actually, we've been sort of helping -the first couple of years, we recognized, hey, there are
some kids that end the summer and really it would be
great if we could tell whoever they're going to be
coming to in the fall, this is what happened in the
summer, this is where they're at, this is what they
responded to or didn't.

And so we actually, in the first two years of this initiative, we laid that groundwork with the reading specialists in the district. And then because this program is operated currently by folks who are licensed psychologists, so they have the background in the assessment, we were able to lay some of those agreements down about what kind of documentation needs to be, you know, what is it that they need for the

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district to see, to be able to put in the child's file and have it, you know, have it kind of count, if you will, as the tier-2 intervention, that maybe, you know, shows that they need to have a tier-3 intervention.

So, those are the types of -- it's been -- that's on a parental consent, you know, individual child/parental consent level. And then separately from that, there is also a research review agreement with the district for us to be able to compare, you know, get school system data and be able to track some of the results of the work over time.

MS. KENDRICK-DUNN: Do you know how many of the children that have been serviced or classified under such -- because it's very true what you said about, you know, sometimes it takes a while for the children to go through the process maybe for the SLD.

But we do have quite a number of kids that come in as developmentally delayed, so they've been in the system since grades three, four and five, so they don't even get re-evaluated until -- legally, they don't have to re-evaluate them until they turn -- well, it has to be before six. Sometimes it's after six.

DR. HANSON: I can look into what numbers we have on that. Because we're putting these services in place in our existing summer camps, you know, depends on

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who signs up for the summer camps, what the population 1 2. looks like and the questions that we currently ask about developmental delay and need for accommodation, 3 especially for children in our after-school and summer 4 5 programs are a little bit different than, you know, specific diagnosis that does definitely ask about 6 challenges in areas like learning. 7 So, I could see if we could get some 8 information on that or just even find out how many kids 9 10 are having this connection that I mentioned as well. 11 MS. KENDRICK-DUNN: That would be good because --12 13 DR. HANSON: I have that -- I've read that 14 number in our report. I just don't have it off the top 15 of my head. 16 MS. KENDRICK-DUNN: That would be good because I think it would be helpful, you know, for the 17 18 ones that do have the developmentally delayed classification. 19 20

DR. HANSON: Dr. Hart is here. I was trying to look around the corner but I couldn't tell if she was here. Dr. Hart is here, although this is not really pertinent to this resolution because this is to release the new solicitation. So I think for the next resolution, Dr. Hart could speak to the operation of the

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current program. Does that make sense?
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 2.
                 MS. HOLLINGSWORTH: Sure. Thank you. Any
     other discussion?
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                 (NO VERBAL RESPONSE.)
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                 MS. HOLLINGSWORTH: Hearing none, all those
 5
     in favor?
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 7
                 (WHEREUPON, the Board members all responded
     with "aye".)
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 9
                 MS. HOLLINGSWORTH: Any opposed?
10
                 (NO VERBAL RESPONSE.)
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                 MS. HOLLINGSWORTH: The motion carries.
12
     Resolution 2019-E, authorization to negotiate and
13
     execute a contract amendment to extend the current
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     12-month contract with Florida International University
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     Board of Trustees, Center for Children and Families
     (FIU), for reading enhancement services, for an
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     additional five months, increasing the amount by
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     $623,767.00, for a total amount not to exceed
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     $1,505,935.00, for a term of 17 months, commencing May
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     1, 2018, and ending September 30, 2019.
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                 May I have a motion?
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                 MR. BRANDON: I'll move it, Brandon.
23
                                     Thank you. A second?
                 MS. HOLLINGSWORTH:
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                 MS. DONWORTH: Second, Donworth.
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                 MS. HOLLINGSWORTH: Thank you. Recusals?
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DR. BAGNER: Bagner, FIU.

MS. HOLLINGSWORTH: Okay. Thank you. And as we move into discussion, Dr. Hart, would you like to approach the podium, please. Your name and agency, please.

DR. HART: Dr. Katie Hart from FIU and the Center for Children and Families. I'm the program director for the Summer Reading Explorers Program.

MS. HOLLINGSWORTH: Thank you. Tell us a little bit about the program and then I think the committee may have some questions.

DR. HART: Okay. So, we've been funded by the Trust since 2013 and what started as a part of the Read-to-Learn initiative to help get all of our struggling readers up to grade-level reading by third grade.

So, we know that that starts early and we've really targeted, in our first two years, the implementation of our rising kindergartners and our rising first-graders. It's a really preventative approach.

So, we train -- I call them "our army" -- army of tutors who primarily are teachers in Miami-Dade County Public Schools and they dedicate their summers to implementing these now tiered reading supports for our

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youngest learners.

So, we currently serve rising kindergartners, rising first-graders and rising second-graders who are at and below grade-level reading. They receive six weeks of reading intervention services that are what we call "tier-2," which means small groups, so no more than five children in a group with then a certified teacher or trained reading interventionist.

We have had a record close to 10,000 children now served within this initiative, which is incredible. We increased the number of sites and the number of children that we served here in this last year, and are projected to serve 2,250 this upcoming summer and across close to 70 sites that are funded by the Children's Trust.

We also, in the last cycle of funding, began working with the early childhood programs that are part of Quality Counts and through that, have been able to focus on even our younger learners who are getting ready for kindergarten.

We've seen tremendous growth in their reading skills throughout the summer. It certainly is preventing that summer slide, giving them a boost where they wouldn't be able to get a boost otherwise.

And if you have children and have tried to 1 2. get them tutoring services in the community, we provide this completely free of charge, at no cost for the 3 family through the generous funding that you all have. 4 So they're getting incredible reading supports during 5 the summer where they really would not be getting it 6 7 elsewhere. MS. HOLLINGSWORTH: Thank you, Dr. Hart. 8 9 Questions? 10 MR. BRANDON: Do the students come to you, 11 to FIU during the summer? DR. HART: That's a great question. 12 13 they do not. We go to them. So, we are working out in 14 the Trust-funded summer and the early childhood programs 15 that are already funded by the Trust, exactly. And so we are working -- our tutors come 16 17 from all over the County and are often serving the 18 communities in which they live or teach. And many of 19 them actually choose to go back to the communities that 20 they also teach in because they see the gap from summer 21 to summer when kids aren't getting the intervention that 22 they need, so we're really -- we're going to them. 23 MR. BRANDON: You said you have an army of 24 tutors. How many are out there? 25 DR. HART: There are 42 tutors that are

across the County.

MS. KENDRICK-DUNN: I have a question.

Going back to what you mentioned about the Quality

Counts that tutor some of the children within some of

the programs related to Quality Counts, so what about

the children that -- our youngest children within the

school district, for example, that have disabilities and

do you have them as young as three?

So, do some of the tutors go out to the children that are developmentally delayed? Say that some of the kids -- you know, when we evaluate them, we can clearly see before they turn five or six, that they're at-risk for reading challenges because now with phonics -- so, you can kind of predict that, so --

DR. HANSON: Can I interject a question about that? Are they in your programs during the summer?

MS. KENDRICK-DUNN: Sometimes. It depends on the IEP, because if the team feels like they need extended school year, "ESY" it's called, then, yes. And then some, if they don't have ESY, but it depends on the needs.

DR. HANSON: I think that in the past, we've worked -- Deborah Robinson has worked closely as the senior manager with the school system, school operations

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that decide sort of which schools might be open in the summers.

We've also definitely worked to get the flyers out to people to know, like, you know, where are some of the more intensive reading -- we've even had some conversations about that.

And then last summer, we actually had some parents calling us saying, you know, I want my kid to get this component, right, so where -- which Trust -- you know, where is the Trust program near me that's going to have this, because not all of our camps have it.

You know, we have probably, you know, hundreds, you know, more than in the hundreds -- between a hundred and two hundred different summer sites operating. And as you heard, this one is in, you know, probably 50 to 70 different sites, depending on how many kids are in each of those sites.

So, yes, so right now, we're focusing on our existing infrastructure of where the kids are, recognize that, like, even though we require kind of a tier-1 group, everybody, if it's some group literacy activity throughout the summer every day, that's not enough for some kids.

And when we saw that that was something that

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we could try to fill, we first filled it in our funded programs. The next, as you heard mentioned, that we went out was to use our affiliated programs, so we don't directly fund those child care sites that are part of our quality improvement initiative.

But, you know, they're connected to the Trust through that quality improvement initiative. So, yeah, we would have to look at what other opportunities. But this level of funding, I think, it's kind of in the infrastructure.

So, what we would like to do is drive maybe, you know, especially if you have kids that don't have the extended year but are in need of summer, right, how can we get those parents referred into our camps, you know, really and asking for these services in our camps, and then also get all the other great things that come with the Trust summer camp.

MS. KENDRICK-DUNN: When you're talking about prevention, and I do believe 100 percent in prevention. And I think it's a need. I can say that. I mean, I know that the program -- the school program can't fill all the needs of all the young children in the County.

But we do have a lot of children that come in developmentally delayed, so we already have them on

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the radar long before kindergarten. So, we already know that many of them are going to most likely struggle with their reading.

DR. HANSON: Now, is there a central point of contact at the district to reach, like, those kids that would be the summer before their kindergarten year?

MS. KENDRICK-DUNN: Maybe. It might be, like, it might be multiple people.

DR. HANSON: Can we -- can we follow up on that and see if we can figure out a structured way to make that connection?

MS. KENDRICK-DUNN: Yes.

MS. DE MOYA: I just want to make a comment. I think I can be heard regardless of this but -- I think that this attests to the discussion that we had recently that there's a lot of other initiatives that the Trust is involved in when it comes to children with disabilities, that we have to find a way for parents to know.

And I think that that's, you know, I'm glad you brought that up because we did have discussion about another program the other day, that if parents don't know, then how are we going to get those services to the kids. I think we have to do a better job of making sure that the information is getting to the parents.

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DR. HART: We would also ask, just to add to
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     the previous conversation about how many referrals that
     we've made to the district on an annual basis as part of
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     then this evidence early on that children need
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     additional support.
                 Last year, we made 150 referrals to the
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     district. What we're doing now is working with our
     district partners to make sure that there's follow-up
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     through on those referrals, and we hope that we -- we
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     are in contact this year with the additional referrals
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     from last contract year.
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                 This past summer, we are still in the
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     process of putting in those paperworks because
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     essentially, you're preparing the documents and reports
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     about each of the children and their response to
     intervention as part of that.
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                 MS. KENDRICK-DUNN: Thank you.
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                 MS. HOLLINGSWORTH: Thank you, Dr. Hart.
     All those in favor?
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                 (WHEREUPON, the Board members all responded
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     with "aye".)
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                 MS. HOLLINGSWORTH: Any opposed?
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                 (NO VERBAL RESPONSE.)
                 MS. HOLLINGSWORTH: The motion carries.
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                                                           The
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     final resolution, Resolution 2019-F, authorization to
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negotiate and execute a contract amendment with
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     ConnectFamilias, to expand immigration services to youth
     living in Miami-Dade County, in a total amount not to
 3
     exceed $140,000.00, for a term of 10 months commencing
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 5
     October 1, 2018 and ending July 31, 2019, in a new total
 6
     amount of $640,000.00.
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                 May I have a motion, please?
                 DR. BAGNER: So moved, Bagner.
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                 MS. HOLLINGSWORTH: Thank you. A second?
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                 MS. KENDRICK-DUNN: Second, Kendrick-Dunn.
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                 MS. HOLLINGSWORTH: Thank you. Are there
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     any recusals?
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                 (NO VERBAL RESPONSE.)
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                 MS. HOLLINGSWORTH: Moving into discussion.
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                 DR. BAGNER: Just make a comment.
     could not be a more opportune time to fund something
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     like this, so I'm really happy we're doing this.
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                 MS. HOLLINGSWORTH: Thanks. All those in
     favor?
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                 (WHEREUPON, the Board members all responded
21
     with "aye".)
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                 MS. HOLLINGSWORTH: Opposed?
23
                 (NO VERBAL RESPONSE.)
                 MS. HOLLINGSWORTH: The motion carries.
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                 MS. DE MOYA: I just -- it's fine but I have
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a question. In this last paragraph, it says that the expansion of services is different from helping youth applying for asylum. I'm just wondering, how is it different?

MS. ALONSO: My name is Betty Alonso. I'm the president/CEO of ConnectFamilias, and I brought along our partner on this, which is Leslie Mendoza, the director of CABA, the Cuban American Bar Association.

We know the social service side of this. We know the need in the community. And I'll let that technician question around legal, I'll let the attorney answer it, although I may, so that I don't misspeak.

MS. DE MOYA: Okay. Thank you.

MS. MENDOZA: Thank you, committee members, and thank you so much for having us here today. To answer your question, the difference between special immigrant juvenile status and asylum is two different things.

Asylum is fear of returning to your own country. And under the current administration, there have been a lot of cuts to what is considered a valid asylum application.

Mainly, one of the main differences is before, they used to allow for domestic violence. So, if children were being abused by parents or by any other

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relative, that they may quality for asylum, recently,

Jeff Sessions announced that that was no longer going to

be valid.

Also, they are not approving asylum based on threats from gangs or extortion from gang members in the home country. Asylum rates are now about 15 to 20 percent of all asylum applications are approved which, in my opinion, is very low, and that is at best.

Special immigrant juvenile status is a visa which is a direct pathway to citizenship where the child can become a legal permanent resident. And after the visa allows you to become a legal permanent resident and after you're a resident, in five years, you can apply for citizenship.

So, a wonderful visa, and we've been working with that visa -- I started working with that in 2004 in New York. And when we moved to Miami here in 2013, I began working, trying to get that for children in Miami.

We've been very successful. We've been working with the state courts, with Judge Bernstein, with the dependency courts. And we've done hundreds of them here in Miami-Dade County and it has proven to be -- given us much greater odds.

The thing about special immigrant juvenile status is that cases have to be brought forth before the

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children turns 18 years of age. If not, there is no jurisdiction in order to get this relief.

MS. DE MOYA: So, I understand the difference that you just explained. But the services, how are the services that you're providing different for each population?

MS. MENDOZA: For the legal, in terms of legal, when it's asylum, it's a purely immigration process. And when it's SIJ, it's a hybrid immigration and a state court process because you have to get the predicate order from the state courts.

So that's why there's an even greater need for the Trust to fund something like this because even private immigration attorneys do not know how to do this method. Many private immigration attorneys are not licensed in Florida and therefore cannot do this. So, we have a lot of demand for SIJ.

MR. ALI: So, how many kids in the dependency system do you serve?

MS. MENDOZA: Not all of the kids have to be in dependency in order to qualify for this. If they're being cared for by a family member, you could get the predicate order necessary through temporary custody or through a paternity order in family court. So not necessarily all kids will be in dependency.

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1 MR. ALI: So, how many foster kids do you 2 service?

MS. ALONSO: So, I can't answer that question. Since we're going to baseline this now, what we're saying is, we're going to start this with 100 kids. That was the request.

We're going to be able to report to you that number at the end of this 10-month period. We're going to see where they're truly coming from. We started working with CABA as part of our original last year, really doing the subcontractors.

We were seeing some of the concern on immigration issues with the families we were working with and we subcontracted them. And it was through our work together that we learned about this visa.

We also learned about the opportunity. And in that discussion, we also realized that there needed to be an additional focus on this because no one was taking a look at this.

So, this is going to be very innovative in the sense that you all are the first ones that are taking this under consideration to fund. We're going to see what happens.

We're going to be able to have a larger and a more robust story with actual data on this and then be

able to come back and say, this is what we're finding.

We know that 100 is a low-ball number for this

community, especially countywide, considering the need.

But we want to make sure that when we start, we start something that has quality, that it's worked out and that we're able to work out those kinks, because we're both coming at this from each other's expertise and now we're going to combine this.

And that's the other piece that hasn't been done before. It's either only legal or only support services. The two have not come together for integration. And we want to make sure that we're tying it back in to the programs not only that you're funding but other programs in the community where those children are living because the County is quite wide and geographically and just traffic alone, right, it's going to be difficult.

So, we want to make sure that we're working with all of the partners and start to build some kind of referral and start to understand what those actual needs additional for legal are.

MS. MENDOZA: And another example of how this is also going to be is normally, the children that seek this relief are in some sort of removal proceeding. But through this effort, we're also going to contact

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kids that are in school that may not necessarily be in removal proceedings but that they qualify for the visa.

That's where the inspiration came, when we received a phone call from Southridge Senior High, a social worker, a boy who has been in all AP classes but had overstayed a visa and had been abandoned by both parents. Actually, his father was deceased, had been abandoned been mom and was just thinking -- he was here from Haiti and he was on-board for wonderful scholarships.

And they called us three weeks prior to his 18th birthday when the social worker realized what was going on. And thankfully, we were able to get him his documents and now he has his green card.

So that's where the inspiration from this came. And we said, wait, we have to not only concentrate on the ones that are in removal but the ones that have been here studying, such as this wonderful young boy from Haiti who now has his green card.

MS. ALONSO: And that also allows us to get in front of the Dreamer Act because we don't know what's happening. There's a lot of kids sitting in their classrooms right now that may be eligible in this. So we will work with All Children Together programs.

We will work with all of you to really start

1 to also educate and start to see where these kids are.

2 | And once we have a better idea for that, we will come

3 | back to you in 10 months, or maybe sooner, right, as we

learn more and say, this is what we're seeing, this is

5 | what we know now.

But right now, some of those questions, and I'm being very transparent, are not -- we're not able to answer yet.

MS. MENDOZA: And the difference between this and the Dreamer Act is that this SIJ visa has been around since early 1989, I believe. As I said, I've worked on it since 2004 and it is a direct pathway to citizenship. It's not just that they're getting a temporary permission to stay or a work permit. It's a direct pathway to citizenship.

MS. LEICHTER: I just want to add, Imran, there are still a lot of kids in dependency that qualify for this visa. As you know, there's a great need and I've seen CABA's great work. I work for foster care, and we actually recognize you for your -- so I know that they do great work.

My question is, though, I also know AIJ does this. So, I'm curious to know how you guys decide who represents which children. AIJ is Americans for Immigrant Justice.

MR. ALI: Stephanie has reached out to AIJ
also to offer a similar amount of money. But they were
so overwhelmed they couldn't take it at this time, so we
just went ahead and did it with ConnectFamilias.

MS. LEICHTER: My question is a little
different.

MS. ALONSO: So, I think this may help you.

We work with AIJ as part of our partnership already.

They have actually done this for us, so we're already tapping into what they already do. And I would imagine that communication will get strengthened as we roll this out.

The other part about their -- we saw that.

We know that the Children's Trust is reaching out to

them as well. We've had a long history of working with

them. I think CABA has as well. So, I think that is

also part of that ongoing partnership. It's just the

way it's rolling out right now.

MS. MENDOZA: The other thing is, since 2014, we've worked with AI Justice. And what we do is, we divide, so we cover different judges.

MS. LEICHTER: Okay. That was my question.

MS. MENDOZA: Yes, so we cover different judges. We cover Judge Dao (phonetic). We cover Judge Horn. And, you know, when we spoke to them about going

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into schools, we cannot really do that at this time, as 1 2. you correctly pointed out. But we coordinate with them all the time. We do trainings together, you know. 3 We're always calling each other to strategize. 4 MS. DE MOYA: So, you refer to "children." 5 So, I'm assuming you're talking about children up to the 6 age of 18. Are you considering children from 18 to 22 7 with disabilities like the Trust does? 8 MS. MENDOZA: We can. The caveat is that 9 10 part of the visa -- for the SIJ visa is under the age of 11 21. 12 MS. DE MOYA: Under 21? 13 MS. MENDOZA: Under 21. But the problem is 14 that the court has to have jurisdiction over the child, 15 and we have to get the predicate order from a juvenile court with jurisdiction. 16 17 So, sometimes, if they are in the dependency

So, sometimes, if they are in the dependency system and jurisdiction has been extended, then absolutely, by all means, we can because the federal law is until 21, and you just have to file an application prior to the children turning 21.

So, if the child is able to obtain jurisdiction somehow, we can. If there is no jurisdiction, sometimes we will be able to get into probate. This was definitely much easier when I was in

New York because in New York, the juvenile courts have 1 jurisdiction until 22. But here, that's the only 2. caveat, but there are ways that we can. 3 MS. LEICHTER: I think they do if they have 4 a disability until 22. 5 MS. DE MOYA: Yes. 6 7 MS. MENDOZA: Okay, then, yes. MS. LEICHTER: I know extended foster care 8 lasts until 22 instead of 21 if the child has a 9 10 disability. I don't know if that --11 MS. DE MOYA: It's the day before their 22nd 12 birthday. So, 21, but --13 MS. ALONSO: And the aim is to identify 14 these kids before they turn 18, so if there does need to 15 be an extension on that, we're also aware of that and working on that with those children. 16 17 Because what we don't want to find is 18 ourselves in a place because of age, because the child is disabled and no one has taken care of the other 19 20 piece, that they were not able to do that. So that's 21 part of what we will also be looking at and we're going 22 to try to find these kids as soon as possible -- as 23 young as possible. 24 MS. KENDRICK-DUNN: I have a question. Ιf

someone wanted to contact you, I mean, do you -- do you

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take information with people who pick up the phone?

Like, I work in a high school. I know we have children that have these issues and they're considered -- oh, my God -- like, unaccompanied minors.

MS. MENDOZA: That's exactly why I'm here today in front of all of you. Because as we have -- as word has spread about us, and clearly I'm sure you could tell this is my passion, helping these children, I get more and more calls every day and I can't say "no."

So, we need more staff. And on top of it, we need to work with ConnectFamilias to be able to guide them once they have their legal status. So, we could continue getting legal status but they could have someone explaining to them, okay, now this is the next step, you know, get your driver's license, apply for it, you know, and so forth and so forth, so provide some mentoring guidance to these children.

So, you know, just as mentioned the boy from Southridge, then news spread and we got a call from Homestead Senior High School. So I was there at Homestead Senior High School. There were two girls. I can't look at them and say, no, I'm sorry, we're not going to do it. Obviously, we're going to -- we have to do it. That's why I'm here asking all of you for your support. We want what's best for these children. We're

here to help.

MS. KENDRICK-DUNN: If you have not been in contact with the school district, with the school social worker, that information probably should go to them because I know for sure, our social workers are probably at the front line of making sure that this actually happens.

MS. ALONSO: Yes. So, one of the things that we have discussed is exactly that, is going out to each of the schools or going out to the meetings where the social workers are or going out to key meetings where school administration is and letting them know.

Without a program, without -- as Leslie is explaining, there was a call and we can't say "no," our heartstrings. This allows us, as ConnectFamilias, to expand countywide and not be limited to geographic area because that also has happened to us.

So then we take, you know, it's okay, we'll take them anyway. But we also have that ability now to say, there is a program. Before this, it was almost ad-hoc.

MS. MENDOZA: We work a lot with Diana
Venturini. So, we work a lot with Diana Venturini and
she's been sending us referrals. But the thing is that
we always see, you know, what a difference it makes.

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And then we're, like, we need another attorney that can fully be on-board and we can go and find these, because we see where there's one child that we got the green card for, you know, years ago, when he was 15. He was able to then get health insurance and apply for Obamacare. So when they found a tumor in his head, he was able to have the surgery.

So it makes such a lifelong difference. And when we meet, you know, wonderful kids in school, we want to go out and find all these kids and we want to help all these kids. So, once we have the staff, we're ready to roll that out.

MS. ALONSO: And again, remember, this is the pilot, right? We're going to work out. We're going to go figure this out. If you have information, we want to work with you.

If you have suggestions on who we should be going to meet with, if you have suggestions on where we should be doing it, we want to build it and co-design it with you, because this is an opportunity that is in front of us and it's so timely for our community, and there are so many kids who would benefit from that.

MS. HOLLINGSWORTH: Thank you.

MR. ALI: Thank you very much.

MS. HOLLINGSWORTH: I'd like to thank

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today's speakers. Thank you very much. I'd like to thank today's speakers for all of the rich information that you've provided regarding the programs that you operate on behalf of the Children's Trust.

And I'd also like to thank the committee for the particularly robust discussion and consideration of today's resolutions. And moving on to Imran for the CEO report.

MR. ALI: Thank you. Jim sends his apologies for not being here. He's out of town. So, today's report, I just wanted to do a few reminders. We have a Board chair reception. As you know, on the 22nd will be Laurie's last meeting as chair of the Board, and she will no longer be a member of this Board also.

So we're having a reception immediately after the meeting across the street, so you'll get more information, and we hope all of you can attend to say "goodbye" to her.

On the 28th, we have the Spooky Symphony. It is our usual annual event, and this year, the venue has changed to the Miami-Dade County Auditorium from 4:00 to 6:00.

On November the 5th, we have the Dave

Lawrence, another book signing and reception that is

being hosted by City National Bank. I think the branch

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is Le Jeune Road, so we hope that if you missed the last
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     one, you'll be able to attend this upcoming one.
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                 That's it. Thank you very much.
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                 MS. HOLLINGSWORTH: Thank you. Ladies and
     gentlemen, we are adjourned.
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                 (Whereupon, at 4:28 p.m., the meeting was
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     adjourned.)
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1	REPORTER'S CERTIFICATE
2	
3	STATE OF FLORIDA:
4	COUNTY OF MIAMI-DADE:
5	
6	I, Fernando Subirats, Court Reporter and Notary Public in and for the State of Florida at Large, do
7	hereby certify that I was authorized to and did report the proceedings in the above-styled cause; that the
8	foregoing pages, numbered from 1 to 49, inclusive, constitute a true and complete record of my notes.
9	I further certify that I am not a relative, employee,
10	attorney or counsel of any of the parties, nor am I a relative or employee of any of the parties' attorney or
11	counsel connected with the action, nor financially interested in the action.
12	interested in the detroit.
13	Dated this 31st day of October, 2018.
14	James a, Selvierto
15	Fernando Subirats
16	Court Reporter
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