

CLERK'S SUMMARY OF MEETING AND OFFICIAL MINUTES  
MIAMI-DADE COUNTY BEHAVIORAL HEALTH ADVISORY BOARD (BHA)  
NOVEMBER 7, 2024

The Behavioral Health Advisory Board (BHA) convened a meeting at the Stephen P. Clark Government Center, 111 Northwest First Street, Miami, Florida 33128, in Conference Room 18-1, on November 7, 2024, at 10:00 a.m.

**I. CALL TO ORDER**

Senator Garcia called the meeting to order at 10:05 a.m.

**II. ROLL CALL & INTRODUCTIONS**

The following BHA members were present:

~Dr. Tiffany Amrich, Psychologist, Community Action and Human Services Department (CAHSD);

~Major Melissa Barosela, Miami-Dade Police Department;

~Ms. Karen Annunziato, State Attorney's Office;

~ Mr. Manny Sarria appeared on behalf of Ms. Victoria L. Mallette, Homeless Trust;

~Mr. Carlos J. Martinez, Miami-Dade Public Defender;

~Ms. Laura M. Naredo, South Florida Behavioral Health Network;

~Ms. Lauren Rabbito, Juvenile Services Department;

~Ms. Vicki Sabharawal, Vice President and Chief Executive Officer, Public Health Trust (PHT);

~ BHA Vice Chairwoman Sally Alayon, Miami-Dade Public Schools; and

~ BHA Chairman, Senator Rene Garcia, Miami-Dade County Board of County Commissioners

Ms. Edith C. Wright, Miami-Dade Corrections & Rehabilitation Department, was excused.

In addition to the BHA members, the following staff members were present:

~Ms. Tania Avellanet, Assistant Director, CAHSD;

~Ms. Amanda Dominguez, Mental Health Facility Program Manager/BHA Liaison, Community Action and Human Services Department;

~Assistant County Attorney Shanika Graves;

~Ms. Iraida Mendez-Cartaya, Chief of Staff for District 13;

~Mr. Eduardo Tamborrel, Administrative Officer II, CAHSD;

~Mr. Kevin Roque, Administrative Officer II, CAHSD; and

~Ms. Zorana Milton, Deputy Clerk, Clerk of the Board

**III. PUBLIC'S REASONABLE OPPORTUNITY TO BE HEARD**

Chairman Garcia opened the reasonable opportunity to be heard. Seeing no one come forward to speak, the reasonable opportunity to be heard was closed.

**IV. COMMUNITY PRESENTATIONS**

Ms. Amanda Dominguez, Mental Health Facility Program Manager, CAHSD, reported that while there were no community presentations set on today's (11/7) agenda, she had received a proposal for a presentation on "Project Opioid." She stated if approved, the presentation would be added to the next Behavioral Health Advisory Board (BHA) meeting agenda.

The BHA members unanimously agreed to include the "Project Opioid" presentation on the next agenda.

**V. NEW MEMBERS/PROSPECTIVE MEMBERS**

- a. **Ordinance 4A adding the designation of Fire Rescue, a representative with expertise in Post-Traumatic Stress Disorder (PTSD) and requiring a DCF designation on to this Board was passed on October 16, 2024**

Chairman Garcia revisited prior discussions about filling two (2) vacant seats. He noted that members had previously proposed designating one seat for an expert in Post-Traumatic Stress Disorder (PTSD); with the second seat designated to a representative from the Fire Department. Chairman Garcia emphasized the importance of filling the vacant seats and asked Board members to provide their recommendations.

Ms. Dominguez reviewed the background of the PTSD candidate under consideration and outlined the specific expertise required for each of the BHA's remaining vacant positions. Ms.

**VI. APPROVAL OF MINUTES**

- a. **A motion to approve the meeting minutes for July 15, 2024**

Vice Chairwoman Sally Alayon moved to approve the July 15, 2024, Behavioral Health Advisory Board (BHA) minutes, as presented. This motion was seconded by Ms. Vicki Sabharwal and, upon being put to a vote, passed by a vote of 10-0 (Ms. Edith Wright was absent).



**VII. OLD BUSINESS /NEW BUSINESS**

**a. Directive Report No. 01: Information-Sharing Data Management Systems and Public Awareness Campaigns**

Ms. Amanda Dominguez, Mental Health Facility Program Manager, Community Action and Human Services Department (CAHSD), reported findings from staff's review of data software systems used by other municipalities. She noted that many systems faced limitations due to patient confidentiality restrictions and referenced a mental health-screening program in the State of Illinois that used a comprehensive zip code-based screening tool to collect county-level data. Ms. Dominguez highlighted the significant challenges with data collection and system integration and asked the providers present at today's (11/7) meeting about their experiences with software integration.

Mr. Carlos Martinez, Miami-Dade Public Defender, explained if the objective was to compile aggregate data, much of this information already existed across various organizations. He proposed creating an interface to integrate the data, identify gaps, and locate the missing information. Mr. Martinez discussed the importance of determining the scope of the problem, understanding the extent of the gaps, and developing strategies to address them. He also noted that leveraging existing resources was a more cost-effective approach.

Chairman Garcia referenced the previous meeting's discussion about implementing unique identifiers to track service access, emphasizing the need to monitor how all individuals, not just those experiencing homelessness, were utilizing treatment and services.

Dr. Tiffany Amrich, Psychologist, Community Action and Human Services Department (CAHSD), expressed concerns about the challenges of inter-agency connections highlighting the difficulties in identifying and collaborating with different providers. She also noted that individuals seeking assistance faced similar challenges in locating available services.

Mr. Martinez pointed out that, contrary to popular belief, the Health Insurance Portability and Accountability Act (HIPAA) was not an obstacle to tracking clients. He explained that the issue could be addressed by having providers include a consent process to authorize information sharing. Mr. Martinez stated the proposed solution would require both a technical component and an operational framework to implement the consent process effectively.

Mr. Manny Sarria, Assistant Director of the Miami-Dade Homeless Trust, provided a brief overview of the entity's data-sharing process with Jackson Health System (JHS) for tracking services provided to individuals experiencing homelessness. He noted that while JHS was willing to share information with the Homeless Trust, JHS was not willing to share data directly with sub-recipients, which were the non-profit service providers. To address this limitation, Mr. Sarria explained that the identifier used in the Homeless Management Information System was configured to send alerts to the sub-recipients, ensuring they could access necessary information indirectly.

In response to Ms. Dominguez's inquiry about creating a behavioral health care directory, Dr. Amrich explained that the directory would enhance accessibility by allowing both managing entities and community members to access information about available providers and organizations.

Dr. Tiffany Amarich moved to create a comprehensive database or Behavioral Health Services directory, including public and private providers. This motion was seconded by Ms. Laura Naredo, and upon being put to a vote, passed by a vote of 10-0 (Ms. Edith Wright was absent).

Later in the meeting, Chairman Garcia asked that a gap analysis be incorporated in the motion to establish the Behavioral Health Directory.

Ms. Laura M. Naredo, South Florida Behavioral Health Network, clarified that the initiative had two distinct components: a directory and a data-sharing system. She explained that private providers were required to register with both the Department of Children and Families (DCF) and the managing entity, while publicly funded providers operated under the managing entity's oversight, with DCF-licensed providers included in the system. Chairman Garcia requested that staff obtain the DCF provider list to begin compiling the directory and inquired about the possibility of ranking providers. He requested that members develop recommendations for evaluating providers and their services for discussion at the next meeting.

In response to Chairman Garcia's comments, Ms. Vicki Sabharawal, Vice President and Chief Executive Officer, Public Health Trust (PHT), explained that different bodies regulated other providers, requiring adherence to specific rules. She suggested including information in the database about each provider's regulatory body, accreditation, and inspection reports.

Ms. Lauren Rabbito, Juvenile Services Department, highlighted programs offering dual diagnosis services and suggested including a disclaimer within the database to reference external websites.

Mr. Martinez asked whether the 211 information was linked to/or accessible by providers, suggesting it could be used to fill in data gaps.

Chairman Garcia reiterated the goal was to centralize the information and to educate the community about the available services.

In response to Ms. Dominguez's question about the scope of the directory, Chairman Garcia clarified that it would encompass the entire county.

Mr. Sarria referenced "Unidas" as a resource that cataloged services by zip code and suggested evaluating it as a potential resource-sharing tool.

Later in the meeting, a staff member clarified that "Unidas" was a Department of Children and Families (DCF) website rather than an application.

Major Melissa Barosela, Miami-Dade Police Department (MDPD) informed the Board that MDPD had compiled a comprehensive list of social and victim services organized by category, and offered to share this list with the Board members as a starting point.

Ms. Jen Herrera and Ms. Carolyn Acosta, founders of First Alarm Foundation, presented information about the foundation, which raised awareness about PTSD among first responders.

Chairman Garcia stated that once the directory was completed and approved, it would be added as a link on the Miami-Dade County website and promoted to the community.

Dr. Amrich recommended verifying the resources and links prior to creating the provider list, noting that in the past many were found to be inactive.

Discussion ensued between Chairman Garcia and Board members regarding issuing individuals a unique identifying number.

Ms. Naredo explained that without a unique identifier system, social security numbers were used for billing and DCF tracking purposes. She noted that while providers might generate their own internal identification numbers for records, social security numbers were used to track individuals through the public system to monitor their service history and provider interactions.

Ms. Sabharwal highlighted the challenges of tracking the indigent population, reiterating the need for a system to track individuals across the entire network.

Following extensive discussions regarding methods for tracking individuals' service and medical records, Chairman Garcia asked Board members and staff to research tracking systems used by other counties and organizations.

Ms. Dominguez suggested establishing a sub-committee to gather information to create the Behavioral Health Directory.

Ms. Alayon moved to establish a Behavioral Health Directory Sub-committee. This motion was seconded by Mr. Martinez, and upon being put to a vote, passed by a vote of 10-0 (Ms. Edith Wright was absent).

Ms. Dominguez discussed countywide behavioral health campaigns and initiatives.

#### **b. Open discussion for other pertinent matters by the Board**

Mr. Eduardo Tamborrel, Special Projects Administrator, CAHSD, gave a brief presentation on staff's efforts to promote a rapid-response "warm line", a national lifeline, and to increase public awareness of these 24/7 hotlines. He reported that he had contacted the Miami-Dade County Communications and Customer Experience Department (CCED) about launching a month-long Countywide campaign, estimated at \$250,000, to include visual media, marketing materials, and radio and television advertisements (see Exhibit A). Mr. Tamborrel emphasized that the primary goal was to raise awareness of these services.

Ms. Sabharwal recommended creating a provider directory before launching the marketing campaign.

Chairman Garcia highlighted the importance of determining the cost of a media and public awareness campaign.

Assistant County Attorney (ACA) Shanika Graves noted that there were opportunities to collaborate with other groups in the county to leverage funds. She explained that other boards utilized emails, free social media platforms, and community events, which were less costly alternatives. ACA Graves discussed her experience with Children's Trust's events and suggested aligning the Board's initiatives with other community organizations and activities. She also noted that behavioral health awareness information could be shared through the County's weekly employee email communications.

Chairman Garcia emphasized that while the goal was to create a unified marketing effort, essential information should be gathered first. He stated that the Board would prioritize completing the Behavioral Health Directory before researching campaigns used by other departments, providers, and boards to develop a cost-effective marketing strategy.

Discussion ensued between Dr. Amrich and Ms. Dominguez about previous proposals for a public campaign addressing mental and behavioral health stigma, including initiatives for stigma reduction and prevention. During this discussion, a staff member recommended using inclusive language in the advertising campaign, suggesting phrases such as "substance use disorder" and "living with" rather than "suffering with" or "those people."

Chairman Garcia requested a list of non-offensive terminology be compiled and provided to Ms. Dominguez for further consideration and discussion at the next BHA meeting.

Mr. Martinez discussed the service gaps affecting Public Defender clients and suggested conducting an inventory to identify these gaps. He explained that the issues included insufficient funding and delays in connecting clients to necessary services and reported some clients in crisis were being housed in jail due to a lack of available beds in treatment facilities.

Discussion ensued between Chairman Garcia and Ms. Sabharwal regarding the availability of short-term and long-term beds in hospitals or treatment facilities, highlighting the shortage of long-term beds.

Chairman Garcia emphasized the importance of conducting a comprehensive needs assessment to address the community's overall requirements.

A DCF staff member explained that plans had been discussed to perform sequential mapping and a gap analysis, which would include outpatient facilities.

Chairman Garcia noted he was eager to demonstrate to the State of Florida the efforts to address mental and behavioral health.

A DCF staff member suggested that managing entities give a presentation on the Recovery-Oriented System of Care to the Board, ensuring that everyone was informed about its activities.

Chairman Garcia noted that the Board's intent was to support community providers and ensure they had robust, centralized information and programs, so people would know exactly where to go for services. He also asked Board members to reach out to Ms. Dominguez to discuss the Behavioral Health Directory Subcommittee and its membership.

Following comments by a DCF representative, which outlined plans for sequential mapping and gap analysis of outpatient facilities, Chairman Garcia expressed his desire to highlight these mental and behavioral health initiatives to the State of Florida.

The DCF representative recommended that staff arrange for managing entities to present information about the Recovery-Oriented System of Care program to the Board.

Chairman Garcia emphasized that the Board's primary goal was to support community providers by creating comprehensive, centralized information and programs to help individuals locate services. He concluded by requesting Board members to contact Amanda Dominguez regarding participation in the Behavioral Health Directory Sub-committee.

ACA Graves advised that while Board members could hold virtual discussions with proper public notice under Sunshine Law requirements, any voting would require in-person meetings including actions by the Sub-committee.

#### **VIII. ANNOUNCEMENTS**

Ms. Amanda Dominguez, Mental Health Facility Program Manager, proposed that the next Behavioral Health Advisory (BHA) Board meeting be scheduled for January 27, 2024.

#### **IX. ADJOURNMENT**

Seeing no further business come before the Behavioral Health Advisory (BHA) Board, the meeting was adjourned at 11:10 a.m.

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Senator Rene Garcia, Chairman