



CareerSource Hillsborough Pinellas Workforce Solutions Committee Minutes

CareerSource Hillsborough Pinellas

5/14/2025 1:00 PM EDT

@ 4350 W Cypress Street, Suite 875 , FL 33607 / Zoom

Attendance

Committee Members Present:

Warren Brooks, Elizabeth Gutierrez (remote), Mark Hunt (remote), Michael Jalazo, April Neumann, Jeremy Robinson (remote), Elizabeth Siplin (remote), Kenneth Williams (remote), Mercedes Young, Dr. Brian Mann (remote), Brian Nathan (remote)

Absent:

Members: Benjamin Friedman, Esther Matthews, Ocea Wynn, Dr. Cynthia Johnson

CSHP Staff: Anna Munro, Jay Burkey (remote), Sheila Doyle, Jason Druding (remote), Chad Kunerth, Keidrian Kunkel, Michelle Moeller (remote), Lysandra Montijo (remote), Maritza Morales (remote), Michelle Schultz (remote), Don Shepherd, Tammy Stahlgren, Michelle Zieziula

Others: Jonathan Wolf -Hillsborough County Gov. (remote), Paul Casebolt- EDSI

I. Call to order, Welcome and Roll Call (Presenters: Warren Brooks)

Scott Brooks called the meeting to order at 1:00 p.m. There was a quorum present.

II. Public Comments (Presenters: Warren Brooks)

Members of the public may raise their virtual hand during the Public Comment portion of the meeting. Members of the public who do so will be acknowledged by the Chair and provided up to three minutes to make public comment.

There was none.

III. Action / Discussion Items

A. Approval of the Minutes - March 13, 2025

Motion:

To approve the minutes of the March 13, 2025, Workforce Solutions Committee Meeting.

Motion moved by Mark Hunt and motion seconded by Michael Jalazo. Motion carried.

B. Eligible Training Provider List Policy (Presenters: Michelle Schultz)

Motion:

To approve CareerSource Hillsborough Pinellas staff recommend approval of the Eligible Training Provider List (ETPL) Policy.

Motion moved by Mark Hunt and motion seconded by Michael Jalazo. Motion carried.

C. Approval of New Training Providers and New Programs (Presenters: Anna Munro)

Motion:

To approve Coding Clarified Academy's new training provider application to include their respective training program and CNA Training and Testing Center dba Career Training Institute application for the two new training programs for inclusion on CSHP's ETPL.

Motion moved by Dr. Brian Mann and motion seconded by Kenneth Williams. Motion carried

D. Related Party Contract and New Training Program (Presenters: Melissa Carroll)

Related Party Training Provider Agreement:

Ultimate Medical Academy amount not to exceed \$160,000.

April Neumann was identified as having a conflict of interest and was notified prior to the meeting.

April Neumann verbally abstained from voting and left the room during the vote and discussion.

Necessary related forms have been completed - Form 8B and Exhibits C & D

Motion:

To approve Ultimate Medical Academy's Renewal ITA Agreement to include the 12 continued training programs and the addition of one (1) new training program, for a total amount not to exceed \$160,000 for the period 7/01/2025 to 6/30/2026, contingent on approval of FloridaCommerce.

Motion moved by Michael Jalazo and motion seconded by Mark Hunt. Motion carried.

FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME—FIRST NAME—MIDDLE NAME Neumann, April	NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE CareerSource Hillsborough Pinellas Workforce Board
MAILING ADDRESS 4350 W. Cypress Steet Suite 850 Hillsborough	THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF: <input type="checkbox"/> CITY <input checked="" type="checkbox"/> COUNTY <input type="checkbox"/> OTHER LOCAL AGENCY
CITY Tampa, Florida 33607	NAME OF POLITICAL SUBDIVISION: Hillsborough and Pinellas County
DATE ON WHICH VOTE OCCURRED	MY POSITION IS: <input type="checkbox"/> ELECTIVE <input checked="" type="checkbox"/> APPOINTIVE

WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112.3143, Florida Statutes.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112.3143, FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office **MUST ABSTAIN** from voting on a measure which would inure to his or her special private gain or loss. Each elected or appointed local officer also **MUST ABSTAIN** from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government agency) by whom he or she is retained (including the parent, subsidiary, or sibling organization of a principal by which he or she is retained); to the special private gain or loss of a relative; or to the special private gain or loss of a business associate. Commissioners of community redevelopment agencies (CRAs) under Sec. 163.356 or 163.357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not prohibited from voting in that capacity.

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law. A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

ELECTED OFFICERS:

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are abstaining from voting; *and*

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

APPOINTED OFFICERS (continued)

- A copy of the form must be provided immediately to the other members of the agency.
- The form must be read publicly at the next meeting after the form is filed.

IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:

- You must disclose orally the nature of your conflict in the measure before participating.
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the agency, and the form must be read publicly at the next meeting after the form is filed.

DISCLOSURE OF LOCAL OFFICER'S INTEREST

I, April Neumann, hereby disclose that on May 14th, 20 25 :

(a) A measure came or will come before my agency which (check one or more)

- ☐ inured to my special private gain or loss;
- ☐ inured to the special gain or loss of my business associate, _____ ;
- ☐ inured to the special gain or loss of my relative, _____ ;
- ☒ inured to the special gain or loss of Ultimate Medical Academy, by whom I am retained; or
- ☐ inured to the special gain or loss of _____, which is the parent subsidiary, or sibling organization or subsidiary of a principal which has retained me.

(b) The measure before my agency and the nature of my conflicting interest in the measure is as follows:

Related party contract votes for Individual Training Accounts (ITA) Agreement with Ultimate Medical Academy.

If disclosure of specific information would violate confidentiality or privilege pursuant to law or rules governing attorneys, a public officer, who is also an attorney, may comply with the disclosure requirements of this section by disclosing the nature of the interest in such a way as to provide the public with notice of the conflict.

05/06/25

Date Filed

April Neumann

Signature

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10,000.

EXHIBIT D
DISCLOSURE AND CERTIFICATION OF
CONFLICT OF INTEREST IN A CONTRACT

I, April Neumann, a board member an employee of the board (circle one) hereby disclose that I, myself / my employee / my business / my organization / OR "Other" (describe) _____

(circle one or more) could benefit financially from the contract described below:

Local Workforce Development Board: CareerSource Hillsborough Pinellas - Region 28

Contractor Name & Address: Ultimate Medical Academy (UMA) - 1255 Cleveland St. Clearwater, FL 33755

Contractor Contact Phone Number: (727) 298-8685

Description or Nature of Contract: ITA Training Provider Agreement

Description of Financial Benefit*: Employee of organization

For purposes of the above contract the following disclosures are made: The contractor's principals**/owners***:

(check one)

☒ have no relative who is a member of the board or an employee of the board, OR

☐ have a relative who is a member of the board or an employee of the board, whose name is:

The contractor's principals**/owners*** ☒ is ☐ is not (check one) a member of the board. If applicable, the principal's/owner's name is: April Neumann

April Neumann
Signature of Board Member/Employee

April Neumann

Print Name

5.6.25

Date

* "Benefit financially from a contract" means the special private financial gain to a member, a special private financial gain to any principal which retains the member, the special private financial gain of the parent organization or subsidiary of a corporate principal which retains the member or the special private financial gain to any member's relatives or business associate or to a board employee and such benefit is not remote or speculative.

** "Principal" means an owner or high-level management employee with decision-making authority.

*** "Owner" means a person having any ownership interest in the contractor.

NOTICE: CONFLICTS OF INTEREST REGARDING BOARD MEMBERS AND BOARD EMPLOYEES MUST BE DISCLOSED PRIOR TO THE BOARD'S DISCUSSION OR VOTING TO APPROVE THE CONTRACT. BOARD MEMBERS WHO BENEFIT FINANCIALLY OR BOARD MEMBERS OR EMPLOYEES OF THE BOARD WHO HAVE A RELATIONSHIP WITH THE CONTRACTING VENDOR MUST ABSTAIN FROM VOTING DURING THE PERIOD OF TIME THE VOTES ARE CAST, AND THE CONTRACT MUST BE APPROVED BY A TWO-THIRDS VOTE OF THE BOARD WHEN A QUORUM HAS BEEN ESTABLISHED. COMPLETION OF THIS FORM DOES NOT IN ANY WAY SUPERSEDE OR SUBSTITUTE FOR COMPLIANCE WITH CONFLICT OF INTEREST DISCLOSURE REQUIREMENTS OF SECTION 112.3143, FLORIDA STATUTES, OR SECTION 101(f), WIOA.

EXHIBIT C
CONTRACT INFORMATION FORM

This form is to disclose a conflict or potential conflict and to seek approval of a contract involving a conflict or potential conflict of interest of board members or employees. All requested information is required. Failure to provide complete information may result in disapproval of the contract.

I, Barclay Harless, hereby certify the following information regarding a contract that was approved by a two-thirds (2/3) vote of a quorum of CareerSource Hillsborough Pinellas (CSHP) and will be executed and implemented immediately after receiving the State's approval in compliance with section 445.007(11), Florida Statutes.

Identification of all parties to the contract: Ultimate Medical Academy and CSHP

Contractor Name & Address: Ultimate Medical Academy (UMA) - 1255 Cleveland St. Clearwater, FL 33755

Contractor Contact Phone Number: (727) 298-8685

Contract Number or Other Identifying Information, if any:

Contract Term: 07/01/2025 thru 6/30/2026 (Will not auto-renew.)

Value of the Contract with no extensions or renewals exercised: \$160,000

Value of the Contract with all extensions and renewals exercised: N/A

Description of goods and/or services to be provided under the Contract: ITA Training Provider Agreement

Method of procurement for the contracted goods and/or services, if applicable:

This institution is a current approved training provider on the State and local ETPL and applied via the ETP Portal.

Name of board member or employee whose conflict of interest required the board's approval of the contract by two-thirds (2/3) vote: April Neumann

The nature of the conflicting interest in the contract: Employee of the organization

The board member or employee with the conflict of interest ☐ did ☐ did not (check one) attend the meeting(s), including subcommittee meetings, at which the board discussed or voted to approve the contract.

If the board member or employee with the conflict of interest attended the meeting(s), including subcommittee meetings, at which the board discussed or voted on the contract, the board member or employee abstained from voting.

I further attest that the following is being provided with this form:

a. A certified board membership roster listing all members on the board at the time of the vote on the approval of the contract with a vote tally indicating attendance or absence at the meeting(s), including subcommittee meetings, and for those in attendance, the affirmative and negative votes and abstentions for each member.

b. Consistent with the procedures outlined in section 112.3143, Florida Statutes, the dated and executed conflict of interest form that was submitted at or before the board meeting(s) in which a vote related to the contract took place, for board member/employee who has any relationship with the contracting vendor.

c. A draft copy of the related party contract and amendments, as applicable.

d. Documentation supporting the method of procurement of the related party contract, for contracts that require competitive selection / procurement process.

e. A copy of the board meeting and committee meeting minutes that document the discussion and approval of the related party contract (including the name of the contractor and the value of the contract). The minutes must clearly reflect the verbal disclosure of the conflict during the meeting.

I certify that the information above is true and correct.

Barclay Harless
Signature of Board Chairperson / Vice Chairperson*

Barclay Harless
Print Name

E. Training Provider Scorecard (Presenters: Chad Kunerth)

The committee held a working session to begin shaping the Eligible Training Provider List (ETPL) scoring rubric and gathering member feedback.

Key Discussion Points:

- Reviewed a draft Training Provider Scorecard aimed at evaluating provider performance.
- Recommended adding enrollment numbers alongside completion rates to better assess effectiveness.
- Agreed to include additional data columns for a more comprehensive evaluation.
- Supported developing a structured scoring rubric to ensure objective, unbiased decisions regarding provider eligibility.
- Emphasized the importance of holding training programs accountable for outcomes.

Next Steps:

- The draft scoring rubric will be emailed to committee members for further review.
- Feedback will be discussed at the next Workforce Solutions Committee meeting.

IV. Information Items

A. WIOA Primary Indicators of Performance: PY 2425 Q2 (Presenters: Chad Kunerth)

An overview of the Primary Indicators provided, noting that the program's measures exceed expectations in all but one area, achieving an 88% overall attainment rate.

B. REACH Performance Review: PY 2425 Q2 (Presenters: Chad Kunerth)

A summary of the REACH Performance for PY 2425 Q2 was reviewed. Currently we are in sixth place, scoring 93.54 A.

V. Adjournment

The meeting adjourned at 2:00pm. Minutes prepared by Tammy Stahlgren, Executive Administrative Assistant.

A. Next Workforce Performance Meeting - TBD