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1	BEFORE THE PUBLIC EDUCATION COMMISSION
2	STATE OF NEW MEXICO
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9	TRANSCRIPT OF PROCEEDINGS
10	PUBLIC INPUT MEETING HEALTH LEADERSHIP HIGH SCHOOL
11	August 21, 2012 9:20 a.m. 6600 Palomas Avenue, Northeast
12	Albuquerque, New Mexico
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20	REPORTED BY: Cynthia C. Chapman, RMR-CRR, NM CCR #219 Bean & Associates, Inc.
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1	APPEARANCES
2	COMMISSIONERS:
3	MR. M. ANDREW GARRISON, Chair
4	MS. CAROLYN SHEARMAN, Vice Chair MR. EUGENE GANT, Secretary
5	MS. CARLA LOPEZ MR. VINCE BERGMAN
6	MR. MICHAEL CANFIELD MS. MILLIE POGNA
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8	MS. KELLY CALLAHAN, Director, Charter School Division
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THE CHAIR: The Chair will call the Public 1 2 Education Commission community input meeting back into session. I want to make some clarification. 3 Ι 4 originally called a ten-minute break. And then we 5 thought that we had advertised to the public that we had these specific times. So I was going to wait 6 7 until 9:30.

And now we looked at the fine print. 8 The 9 times denotes -- the time denotes that the times 10 will depend on the length of the previous hearing 11 and will begin as soon as the previous hearing is 12 completed. For any of you familiar with our 13 calendar this week, there's a lot of seat time 14 behind the wheel. So we need to get down to Las Cruces, Columbus, Deming, Alamogordo, Carlsbad, 15 16 et cetera, by the end of the week. So we're going 17 to go ahead and continue now.

I would like to ask that the Health 18 19 Leadership Academy go ahead and make your way up to 20 the front. But I have a few more things to read. 21 So no rush. I'm going to go ahead and read about 22 the process of the community input hearing. The Commission will ask each applicant or 23 24 group to present at this table in front. The 25 applicant will be given 20 minutes to present their

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1	application in the manner they deem appropriate.
2	The Commission will not accept any written
3	documentation from the applicant, but the applicant
4	may use exhibits to describe their school, if
5	necessary. However, the setup time for exhibits
6	will be included in the 20 minutes.
7	Then, following the applicant's
8	presentation, the local school district
9	representative or representatives will be given five
10	minutes to comment on the application.
11	Subsequently, the Commission will allow 20 minutes
12	for public comment. And I already have the sheet
13	here and people have signed in.
14	And then, finally, the Commission will be
15	given 45 minutes to ask questions of the applicant.
16	Commissioners, are you ready to proceed?
17	(Commissioners so indicate.)
18	THE CHAIR: For the record, please state
19	your names and your titles, and then also the names
20	of the founders of your school.
21	MR. HILL: Good morning, Commissioners.
22	My name is Everette Hill. I'm one of the cofounders
23	of the Health Leadership High School.
24	MR. MONFILETTO: Good morning. My name is
25	Tony Monfiletto, and I'm also a cofounder of Health

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1 Leadership High School.

2	MS. DURAN-BLAKEY: My name is Gabriella
3	Duran-Blakey, and I am a founder of Health
4	Leadership High School.
5	THE CHAIR: And please introduce any other
6	folks. Is there any other folks from your board
7	here this morning or anyone you wanted to introduce?
8	MS. DURAN-BLAKEY: Lisa James is here.
9	She's the president of our board.
10	THE CHAIR: Good morning.
11	MS. JAMES: Good morning.
12	THE CHAIR: You will have 20 minutes to
13	present information about your application, and
14	please proceed.
15	MS. DURAN-BLAKEY: Good morning. Again,
16	I'm Gabriella Duran-Blakey, and I'm the principal of
17	Health Leadership High School. And I just wanted to
18	take a minute to explain my personal interest in
19	this school.
20	I have been involved in public education
21	for about 14 years; twelve of those have been in the
22	school system here in Albuquerque. And I I feel
23	like the schools do a great job for 60 percent of
24	the kids. I'm a product of the public schools here.
25	And I think that it worked for me.



However, when I look at 40 percent of the 1 2 students that we are losing, I'm very concerned about that. And I'm looking for solutions on how we 3 4 can engage students in school and how we can create 5 communities that are responsive to our students. So my personal interest kind of sparked 6 7 with the idea of a school that was targeting those 8 kids and that I'm very concerned about. And, 9 further, with my personal interest in it: My father 10 is a retired educator. My mom is a retired nurse. 11 And so when I started hearing about the Health 12 Leadership School, that was a personal interest to 13 me, because of the way that I grew up with 14 conversations about health and education at the 15 dinner table. 16 And so that, to me, speaks to how I became 17 a successful person. And I'd like to provide that social capital to students the best way that we can. 18 19 And I feel that Health Leadership High School is 20 opening those opportunities for students in the way 21 that the founders have designed the school.

The need for the health professions is evident here in Albuquerque. According to -especially if we look at the Hispanic population. According to Newsweek, 14.2 percent of the U.S.

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1	population is Latino, but only 6.4 percent of
2	Latinos make up the health community.
3	It's very important that we increase the
4	number of minority health-care workers in the
5	sector in the health sector. And, in fact,
6	research shows that health-care workers that are
7	from underrepresented minority groups are more
8	likely to care for minority patients and serve in
9	high poverty, underserved communities. And this is
10	very important in our community here in Albuquerque
11	that we have role models from the community that are
12	giving the health back to the community.
13	Also, if you look at New Mexico in
14	general, 32 of our 33 counties in New Mexico are
15	federally designated as "health professions
16	shortage" areas, medically underserved areas or
17	populations, according to the federal government.
18	The current nursing shortage in New Mexico is
19	roughly 1,000, but is expected to be 2,800 by 2015.
20	Some of my interest in looking at Health
21	Leadership High School looks at the current system
22	and what we offer to those students and what we can
23	offer in Health Leadership High School.
24	The first difference is in the students
25	served. Currently, we do have offerings of a
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1 college-bound program for health professions. It's
2 very competitive. Students apply for it; students
3 are successful. But it's that 60 percent of the
4 students that are doing well that it's targeted to.

5 The nursing program, for example, at the Career Enrichment Center is a very competitive 6 7 program that students apply to. It's successful 8 with those students. But we're looking at the 9 students on the other side of the spectrum that 10 we're not serving and that we're losing in the So our clientele of students that we're 11 system. 12 looking at are from the ages of 14 to 24, and 13 they're off-track to graduate.

Another example of the curriculum that is different with our school is in a lot of current models, it's more of a career academy, where you take electives, usually, your junior year, in the health profession. And so you can take electives that engage students in learning more about those health careers.

But we know from our research that most students drop out in eleventh -- ninth to tenth grade. So by eleventh grade, students are pretty on track. If they make it to eleventh grade, then we're pretty sure that they're going to be able to



push themselves through to make it to graduation. However, our curriculum is different in the fact that we're targeting students in their ninth-grade year, students that are off-track to graduate, not the competitive program, and that the lens of health is embedded into the projects of the school.

8 We also have industry partners that don't 9 just serve as an advisory role but are co-creators 10 They work with the teachers to in the curriculum. 11 develop curriculum and projects and to create a 12 responsive and adaptable curriculum. We have 13 360-degree support that Mr. Hill will speak to. And 14 rather than having pullout help when students need to see a social worker or need to see a counselor, 15 16 it's actually embedded into the school, and it's a 17 part of the everyday culture, that we're all taking 18 care of each other and we're responsive to each 19 other's needs.

Professional development is key in the successful schools and what we're giving as far as support to teachers. We all know that teachers are the number-one cause for students to really be successful in the classroom on a day-to-day basis with their interaction with their students.

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1Current the current model has one day every2semester to provide professional development to3teachers. In our model, we have six weeks of4professional development built into the calendar5year. And we also have two weeks or two hours,6excuse me a week of professional development with7the teachers. And we have an on-site health coach8who would be at the school every day to help9teachers in providing relevant curriculum.10Again, our student population. To be a11little more specific about how we're different,12one-third of our students will have dropped out of13high school; two-thirds of the students will be in14grades nine through 12; and 80 percent of our15students will be off-track to graduate.16The school will actually operate from179:00 a.m. until 9:00 p.m., with our reengagement18center serving students who we're pulling back into19school that have dropped out.20The curriculum has been developed over the21course of about three months, and two days,22specifically, with industry partners to look at how23we can integrate what the industry came up with,24three sectors of health: Determinants, delivery25systems and clients. And those three sectors will		
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be embedded into the curriculum so that when students come out of the school, they are well-known about each of those topics, and they can work in the sector, depending on what their interest is on any of those three topics.

6 For example, if we were to look at just 7 the client care, and students were interested in 8 serving clients as part of the health sector, we 9 would look at an example of an early childhood 10 center that's doing a great job in responding to 11 child -- to children's needs. And we would break 12 that down into the content areas.

So, for example, in math, students would look at the statistics of poverty and early literacy. And so that would be how they would learn math. But it would be the concept through the lens of health care serving clients and looking at the early childhood center.

For science, they could look at food composition and break down what healthy food is and look at the chemicals that are put into food that we put into our bodies. And that would be part of a science curriculum.

And, in humanities, it would be a great opportunity for teachers to have students examine



1 media literacy through the eyes of serving clients 2 and through the lens of the health -- of the early 3 childhood center.

Mr. Hill is going to speak to the 360-degree support that we offer to students along with the community engagement that's an integral part of making this school successful.

8 MR. HILL: Thank you, Gabriella. So my 9 role on the team has been to look at not only the 10 engagement of students, but also how the school 11 portends to engage the community at large. And at 12 the heart of that, internally in the school is 360 13 And this is the idea that we're not only support. 14 interested in the academics for the young people who would come to the school, but we're interested in 15 16 them holistically in terms of the entire 17 development.

So built into the school day are 18 19 advisories, where teachers have an opportunity to 20 counsel students during the day and really get to 21 We've all really come to understand know them. 22 over -- I've been doing community-based work for 23 over 20 years now -- that when you recruit a young person into a program or a school, you're really 24 25 recruiting their entire family. And so we work to



1 try to provide supports directly for the student,
2 but also to reach out into their families to provide
3 them supports that will help to create a pathway to
4 academic success for each one of those students.

5 At the heart of the 360 support is something -- terminology around youth development 6 7 called "positive youth development." This has been built into the framework of this school. 8 Positive 9 youth development really expresses the idea that 10 every young person is an expert, if nothing else, in 11 their own experience, and that we -- as those who 12 want to develop a responsive institution, we have an 13 obligation to meet students where they are and to 14 really take the time to understand their sense of their own expertise around their education, what 15 their educational needs are, and then take what we 16 17 learned from them and integrate that with what we know about them academically. 18

So that, again, we're really working to try to determine which pathways are going to be best for them to be successful, and then how do we, as educators, community members, and people who care about their success, determine the best ways to leverage our own activities and supports to help them be successful.



I have to say one of the things that's 1 2 been really important for me is that we continue to talk about the school not being an institution or an 3 4 island unto itself, that it has to be a good 5 community member, and that there has to be a measure of reciprocity between the school itself and the 6 7 community, not only in the community in which it sits, but also within the communities that all of 8 9 the students come from.

10 And so on this campus, we would also have 11 a community engagement center. And the community 12 engagement center would serve multiple functions. 13 But one of the functions would be to create that 14 space where community members have access to the school and that we have an opportunity to be able to 15 16 really assess for their talent, gifts, and skills, 17 and try to find ways for them to play a part in the educational environment within the school. 18

Within the CEC, the work of building out those industry partnerships also happens, so that when students are ready for their internships, that we've insured that there are sites for them to be placed working with industrial partners, that there are opportunities for them to really delve into the work that they've actually done around their



1 projects.

2	And so within the pillars of the school,
3	curriculum, 360 support, and community engagement,
4	each one of these pillars has a very specific role
5	to play; but they're also integrated in terms of the
6	framework and supports that they provide for each of
7	the students that that we would have at the
8	school itself.
9	As I'm speaking of those pillars, that is
10	part of the model that this school, Health
11	Leadership High School, is modeled on, the ACE
12	Leadership High School, in many of the basic or
13	functional ways in terms of its design. And so I'd
14	ask Mr. Monfiletto to talk about the school design
15	and replication.
16	MR. MONFILETTO: Thanks, Everette. Good
17	morning, everyone. I'm Tony Monfiletto. I'm the
18	principal of ACE Leadership High School and one of
19	the co-founders of Health Leadership High School.
20	And one of our goals with Health Leadership High
21	School is to provide as much support and capacity
22	for the school as possible. So ACE Leadership High
23	School was designed with the idea of having other
24	schools that could be partners with us as we grow;
25	our school, and then Health Leadership High School,

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so that they're both excellent schools and they have
 partners to work with.

3	And some of the things that we will share
4	in common practice with Health Leadership High
5	School is the three pillars of our design. So
6	learning by doing, because we serve a community of
7	kids that have been disengaged from school that
8	really need to be hands-on learners, experiencing
9	project-based learning in their schools. And so our
10	schools share that value and practice in our own
11	schools.
12	Second, 360 support, which was part of
13	what Mr. Hill talked about: Bring resources
14	together so that there's a the pathway to
15	learning for our kids will be through support, that
16	kids will get what they need to be successful in
17	school.
18	And third, community engagement, which
19	Mr. Hill talked about as well. So we share those
20	practices, and we'll come together and work together
21	to make our schools better as partners.
22	Other things that we share will be a
23	diploma that has currency in the market. It's very
24	important to us that when our students graduate,
25	there's a pathway to employment for our students.



Now, we believe our students will be prepared for 1 2 But, because we serve a community college and work. of kids that need to know why their diploma matters, 3 4 we need to have a pathway to employment for our kids 5 if they choose to go that direction at graduation. So both of our schools are committed to that for the 6 7 young people that we serve. 8 Second, as Gabriella pointed out, we'll 9 serve a community of young people that are 14 to 24, 10 that need, as I said, support, active learning, and 11 a pathway to employment. 12 We'll have -- we'll invite in one of the 13 community agencies from the community where we 14 ultimately locate to co-locate with us, as the Sawmill Advisory Council is located with us, so we 15 16 have a community partner in our building with us 17 helping us understand the needs of the community so 18 that we can be good neighbors and good partners with 19 community around us. 20 We'll share a common calendar so that we 21 can share professional development and leadership 22 opportunities for our faculties. 23 So we really think of this as a 24 partnership and another school as being partners 25 with us.



1	Our reengagement program is a program that
2	goes from 4:30 in the evening to 9:00 at night.
3	That reengagement program is developed and intended
4	for young people that have dropped out and are
5	returning to school. It shares the same principles
6	as the day school; so support, hands-on learning,
7	community engagement. It's just that program
8	happens in the evening so that we can accommodate
9	young people that are working during the day and
10	that have a lot in their lives going on, and they
11	need the flexibility of being able to go to school
12	at night.
13	Next, I want to visit with you a little
14	bit about why we think this model works. Recently,
15	we received a grade from the state at ACE Leadership
16	High School that was initially came out as an F.
17	It was re it was reevaluated and moved to a D.
18	The reason why it was reevaluated was because we've
19	had such good success at graduating our students in
20	our reengagement center. So our we actually
21	received an A for our ability to graduate young
22	people.
23	Some of the things we found when we look
24	looked at our grade, I think, speak to the power of
25	the school. And I'd like to just visit with you



1	about some of the those things that we heard when we
2	looked at our grade. Our school educates about
3	285 students at ACE Leadership. Of those students,
4	about 90 percent of them are in the lowest
5	25 percent of performing students in the state.
6	When we looked at the growth of the scores
7	of our of our 90 percent of our students who were
8	in the lowest 25 percent of students across the
9	state in their performance, what we found was that
10	our students increased reading and math scores at
11	double what would be exceptional, as predicted by
12	the state.
13	So if you looked at the math scores, our
14	students gained 5.7 points in math. The State tells
15	us that a remarkable growth in math would be two
16	points. In reading, they gained 3.7 points in
17	reading. The State tells us that a remarkable
18	growth in reading would be 2 points. Our kids are
19	the lowest performing kids in the state, and they're
20	achieving at levels that no one predicted and that
21	are really exceptional. And it's because we've
22	engaged them in a new way of practical, hands-on,
23	experiential education.
24	The next thing I'd like to talk about is
25	that if you looked at our performance compared to

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similar schools like ours -- so a similar clientele 1 2 of young person -- we are in the top 16 percent of schools serving kids that are similar to the kids 3 4 That's only -- that's after two that we serve. 5 years of experience here in Albuquerque. So we feel like we are meeting our 6 7 mission. We are serving the most vulnerable, most 8 at-risk students, and they're learning at levels 9 that are above what was predicted by the State, and 10 are really remarkable in their success. 11 If you were to -- the way that the grade 12 is calculated, it doesn't reward that kind of growth 13 for the majority of our students. So we think we've 14 been successful, and we're a mission-driven organization that's serving the kids who we're 15 16 intended to serve, transitioning -- we transitioned 17 35 out of 36 of our graduates into either college or 18 apprenticeship last year at ACE Leadership. So we 19 believe the model is working. It's serving the kids 20 who need us the most. And we believe it's worth 21 replicating in the Health Leadership. 22 Next, I just want to mention our -- our 23 partnership with Health Leadership High School. 24 It's not a binding contractual relationship. It's a 25 We will share common practice. partnership.

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Gabriella is going to be interning with us for a 1 2 year to learn how to run a school like Health Leadership High School. That work is funded by a 3 4 grant from the Kellogg Foundation to prepare her 5 for -- to run the school. And as I said, this is a partnership 6 7 relationship through the Professional Development 8 Center at ACE Leadership, as opposed to a binding 9 contractual relationship. 10 Okay. It's been really nice talking to 11 you this morning, and I know I'm nervous, because I 12 put two watches on this morning before I got here. 13 I thought I was beyond being nervous about this. 14 But anyways, I'm glad to be here, and thanks for listening to me. 15 16 THE CHAIR: Thank you for your 17 presentation. If I could ask the applicants to go ahead and move away for a second so we can have the 18 19 local school district come up, if they have any 20 comments. And, of course, for the record, please 21 state your name and the role you play at the local 22 school district. And you will have five minutes to 23 comment about the Health Leadership High School once

24 25

I put pressure on her. Now it's going to

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Cordy is ready.



1 go all south.

1	go all south.
2	MS. MENAPACE: Everybody is watching.
3	MR. TOLLEY: I'm going to cheat. I'm Mark
4	Tolley. I'm director of Charter and Magnet Schools
5	for APS.
6	MS. MENAPACE: I'm Carrie Robin Menapace.
7	I'm a policy analyst for Albuquerque Public Schools.
8	MR. HENDRICKSON: I'm Ruben Hendrickson,
9	I'm Executive Director of Budget and Planning.
10	MR. TOLLEY: That's as much as I'm going
11	to cheat.
12	THE CHAIR: Yes, it was.
13	COMMISSIONER CANFIELD: Why don't we have
14	Tony do it? He's got two watches.
15	THE CHAIR: You may proceed. We have a
16	timer. You're off the hook, Cordy. Oh, wait.
17	Start. There you go. Proceed.
18	MS. MENAPACE: Mr. Chairman, members of
19	the Commission, we would just like to remind you of
20	the two general comments that we made to you
21	previously dealing with funding sources, and also
22	with facilities, and the \$3 billion of assessed need
23	in Albuquerque Public Schools and our locally
24	authorized charters.
25	On the Health Leadership Institute,

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specifically, Mr. Tolley is going to give you a rundown on the issues we have with that particular charter school.

4 Just briefly, the Charter MR. TOLLEY: 5 School Act speaks to innovation and to bringing something different to a school district. 6 In 7 respect to what Mr. Monfiletto has done with this 8 school, this is an entirely different application 9 and a new school. Don't have students yet. They 10 haven't actually opened. So this will be a whole 11 different program.

12 The Health Leadership High School plans to 13 prepare unserved students from disenfranchised 14 communities for careers in the health-care field. This program is not different and it's not 15 16 innovative. APS currently offers Certified 17 Practical Nursing programs, Certified Nursing Assistant programs, forensic programs, medical 18 19 technician programs, premedical programs, advanced 20 premedical programs, and EMT, or Emergency Medical 21 Technician, programs. APS has agreements with all 22 local hospitals to provide practical experience for 23 all these programs. And, in addition, APS has a 24 concurrent enrollment with the Central New Mexico 25 Community College that allows any of our high school

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students to pursue credits in health-related college 1 2 classes while they're attending their high schools. The second part of the Health Leadership 3 4 Academy, they plan to serve poor students from low 5 socioeconomic families that are between 14 and 24 years of age. And in discussions with the 6 7 principal, she told me they would plan to be located 8 in Albuquerque's South Valley. And they also spoke 9 to family engagement. 10 APS now has a new family engagement policy. Goal 3 of our Board of Education goals is 11 12 family engagement. And the principals are all 13 required by the superintendent to all make 14 individual engagement plans, not only at our traditional schools, but all our charters. 15 16 Currently, the South Valley has these 17 schools serving at-risk students, all in the same Rio Grande High School; Atrisco Heritage High 18 area: 19 School; School on Wheels Alternative; Robert F. 20 Kennedy Charter School; El Camino Real Charter 21 School; Nuestros Valores Charter School; New America 22 School, a charter school; La Académia de Esperanza Charter School; Gordon Bernell Charter School; South 23 24 Valley Academy Charter School; and South Valley 25 Preparatory Charter School; all in the same areas



serving socioeconomic families, low socioeconomic 1 2 families and students between 14 and 24 years of 3 age. 4 All of them, or most of them, include 5 night programs and programs to identify these kids and serve their particular needs. 6 7 APS is not opposed to parents being able 8 to choose the very best education possible for their 9 We're not opposed to hard-working students. 10 educators following their dreams and convictions to 11 open schools that are similar, which provide unique 12 and innovative educational programs. However, we 13 are opposed to the belief that APS and other 14 districts don't provide those unique and innovative programs for their students. 15 16 We also are very worried about the 17 dissolving of programs by stretching too thin. By 18 providing duplicate programs across the community, 19 you all of a sudden have students spread out to 20 where there's not enough students or fiscal 21 opportunities to provide a lot of programs. 22 MS. MENAPACE: I think, Mr. Chairman and 23 members of the Commission, we're basically asking 24 you all to consider sort of a cost-benefit analysis. 25 Is the benefit of opening a charter school that is



1 offering a lot of the same programs that do already 2 exist in Albuquerque really worth the cost of 3 diluting those sources -- diluting those resources 4 and having a bigger burden for facilities and 5 funding in the long run?

6 I think that we are very interested in 7 expanding the programs that we already have. I 8 think that we can have very meaningful partnerships 9 in order to do that. But there may not be a 10 necessity to create an entirely new school in order 11 to do that expansion.

12 And I think that there is a commitment 13 from Albuquerque Public Schools to continue to meet 14 the needs of the students who want to pursue these fields, pursue these academic opportunities, and 15 16 that's something that we're very interested in 17 doing. We just don't know if opening a new charter school is worth the cost that it may impose upon the 18 19 state and the community. Thank you very much for 20 your time.

THE CHAIR: Thank you. We will now hear public comment from the community in Albuquerque. We have several folks that have signed up to speak. And I am going to remove any board members from -of the school who has applied from that list. Lisa



James? 1 2 MS. JAMES: Yes, sir. 3 THE CHAIR: So I'll remove you. Thank 4 you. 5 The first person is Judith -- and I'm having trouble with the last name there -- M.D. 6 7 That'll probably qualify you. 8 DR. KITZES: Okay. My last name is 9 pronounced "Kitzes," and it is unusual. I'm up 10 first? 11 MS. CHAVEZ: How many minutes, 12 Commissioner? 13 THE CHAIR: Give me one moment. I'm going 14 to give each person two minutes to speak. And you 15 may begin. 16 DR. KITZES: Okay. I'm first on the list 17 because I was first here; it's not because of my My M.D -- I have an M.D., and I have also a 18 M.D. 19 Masters of Public Health, which I think are relevant 20 to the conversation here. I'm on faculty at the 21 University of New Mexico School of Medicine. I'm 22 involved in faculty education development and 23 curriculum development. 24 And we have worked with Tony in terms of 25 him being a speaker and involved in our educational SANTA FE OFFICE

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day at the medical school. We are very excited 1 2 about his model of education based on active learning. And I heard previously that there are 3 4 other schools here, charters that the APS feels will 5 meet the needs of the students; but I also hear that Tony's model is a little different. And as a public 6 7 health professional, his model incorporates public 8 health philosophy.

9 I don't know about the other schools. 10 What I heard was they give certifications in certain 11 kinds of degrees. They come out with a person who's 12 technically skilled in this degree. What I hear 13 different with this school in the model, and why we 14 support it -- why I support it -- is that it is a public health model, and we need to be able to bring 15 these kids back in. We need these children to come 16 17 back into the health-care system to be providers for their communities. 18

19 I'm also -- I've been here since 1977 as a 20 resident of the State of New Mexico. I had two 21 children that went through the public health -- "the 22 public health" -- the APS system. I was pleased 23 with that. However, I am very aware that we have 24 40 percent of our students who are not making it. 25 THE CHAIR: Thank you very much.



MS. CHAVEZ: Mr. Chairman, there are two 1 2 individuals that would wish to speak if you would 3 allow them to sign up. 4 UNIDENTIFIED SPEAKER: Actually, three, 5 four --MS. CHAVEZ: That's not going to happen. 6 7 THE CHAIR: I'm going to continue with this list, and I'll make a decision after we're 8 9 Mary Dudley, Ph.D. Good morning. done. 10 DR. DUDLEY: Good morning. Thank you for 11 this opportunity to talk. I'm Dr. Mary Dudley, and 12 it's a pleasure to endorse this project. I've been 13 a South Valley resident, my husband and I, for more 14 than 40 years. My husband is a Presidential Awardee in math instruction from Rio Grande High School. 15 That's a national award which we were pleased to 16 17 receive from then President Clinton. We have children who were educated in APS 18 19 schools. They attended Navajo, Harrison, Ernie 20 Pyle, and Rio Grande High School, and went on to achieve academic success. They aren't the typical 21 22 They are that minority that Tony talked students. 23 about. They were students who were well supported 24 and had everything that we could give them, plus 25 parents who were totally devoted to education. Ι

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1	was working on my Ph.D. while they were in school.
2	My own professional interests are in early
3	childhood education, and I've always pursued a
4	research question which still intrigues me, and that
5	is how we can reach the needs of diverse students in
6	public education. I'm not defining diversity in
7	terms of only ethnicity and linguistic diversity,
8	but rather in children's learning styles, in their
9	past and present experiences in education, their
10	expectations for themselves, the families they come
11	from, their family structure, their families'
12	experiences with school, their families' income
13	level, their families' comfort level with involving
14	themselves in public schools or in any school.
15	That's the diversity I think this project
16	proposes to address. And I know about the
17	effectiveness of Gabriella Duran-Blakey in her past
18	experience as a an educator and as an
19	administrator. I'm also well aware of her family's
20	history, because I worked with Mr. Duran, Don Duran,
21	who was my daughter's principal when he was
22	principal at Ernie Pyle, and I worked with his wife,
23	María Duran, Gabriella's mother, when she was a
24	nurse at the same clinic where I was assisting as a
25	parent educator.



1 MS. CHAVEZ: Excuse me, Mr. Chairman. 2 Time is up. I am sorry. 3 THE CHAIR: Thank you very much. 4 DR. DUDLEY: Pleasure to meet you. 5 THE CHAIR: David Bower. Good morning, 6 sir. 7 DR. BOWER: Good morning. Thank you. My name is David Bower. 8 I am currently the coordinator 9 of the internship part of the Educational Leadership 10 Program at UNM. I'm also a former principal from 11 APS. And I would like to speak briefly about 12 leadership and express my support for Gabriella 13 Duran-Blakey as principal of Health Leadership High 14 School. 15 I have known Gabriella for many years. I 16 know her ability and experience. This summer, she 17 was a student in two of my doctoral classes at University of New Mexico in educational leadership. 18 19 Gabriella is currently a candidate for the degree of 20 Doctor of Education, and she hopes to complete her 21 program within the next three to four semesters. 22 As a professor and as a former principal, 23 I know the research on leadership and student 24 The Wallace Foundation is a great source success. 25 of some of that information. One of the articles I



particularly value says that effective leadership makes a difference in improving learning, and that leadership is second only to teaching among school-related factors in the impact on learning.

5 The article -- or others authors of this article go on to say that good leaders do three 6 7 things to support schools: One is setting the 8 direction, charting a course that everyone 9 understands, establishing high expectations, and 10 using data to track progress; second, by developing 11 people, providing teachers that everyone in the 12 system will support; and, third, by making the 13 organization work, insuring that the conditions and 14 incentives in school support rather than inhibits teaching and learning. 15

16 From my experience as a principal and as a 17 professor, I know that the knowledge and skills of the principal are critical to the success of the 18 19 school. I think that the board for Health 20 Leadership High School has made an excellent choice in choosing Gabriella Duran-Blakey as their 21 22 I think that she will insure the success principal. 23 of this school. And I'm sure that you and the 24 Public Education Department want successful schools. 25 I highly endorse her as principal.



THE CHAIR: Thank you, sir. 1 Matt 2 Cross-Guillen. Good morning, sir. MR. CROSS-GUILLEN: Good morning. My name 3 4 is Matt Cross-Guillen. I'm an environmental health 5 educator with Bernalillo County. Thank you for your 6 time this morning. 7 I do speak in support of the school. Ι have been to an information session and a few 8 9 conversations with the administration. And while 10 the educational model that they are using looks 11 outstanding, I'm going to refer to their three 12 domains for their curriculum. We have heard talk 13 about health care and preparing students for those 14 careers. However, I'd like to remind everyone that 15 health is more than health care. And the unique feature of this school is one of these domains in 16 17 looking at what's called the "determinants" and using health as a lens for education. 18 19 You heard that other schools within 20 Albuquerque prepare students for health-care fields. 21 And they may well be doing a fantastic job. 22 However, teaching through a different lens, given that of health lens, of all subjects, is greatly 23 24 needed. 25

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If you would like to see, there is a

1 plethora of scientific information about the health 2 status of this country. If our country or state was 3 an individual, we'd be in the ER. We're in a crisis 4 mode. And we need a new model. I believe this is a 5 piece, a model, to teach with a new lens, that of 6 health. Thank you.

7 THE CHAIR: Thank you very much. Andrew8 Werth.

9 MR. WERTH: Hello. My name is Andrew 10 Werth, and I am the transition coach with ACE 11 Leadership High School. I've been in that position 12 since April. And prior to that, I had worked for 13 six years with an architecture firm, so I have --14 and then prior to that, I was also a teacher. So bringing the educational and the professional sides 15 to ACE Leadership. 16

17 And in my position, I am supporting students in moving from the high school setting to 18 19 jobs, apprenticeships, and college programs. But 20 what I've been really struck by in my experience so 21 far at ACE is the holistic exposure that students 22 receive to the profession. And, particularly, 23 that's possible because of the partnerships that the 24 school fosters with the architecture, construction, 25 engineering fields.



1	I'm seeing that parallel with the Health
2	Care Leadership High School, and noting that that
3	again, that model is very powerful in immersing the
4	students in the language, the skills that will be
5	needed. And then in the cultures of those
б	professions, what I've also found is that the
7	students, given that very authentic and holistic
8	setting, are very inspired and kind of see a
9	pathway, a very tangible pathway, that they can move
10	from being a ninth-grader or a tenth-grader or
11	eleventh-grader or twelfth-grader onwards to
12	volunteer opportunities, engagement with the
13	community, which will build their skill set and also
14	exposure to the given profession, whether it's
15	health care, architecture, construction, or
16	engineering, onwards to other opportunities;
17	internships, then moving on to apprenticeships,
18	jobs, and/or a college career.
19	So, again, I am very much in support of
20	the health-care high school model, given the
21	successes that I'm seeing at the ACE Leadership High
22	School. Thank you.
23	THE CHAIR: Thank you, sir. Gilbert
24	Perez.
25	MR. PEREZ: Hello.



Good morning, sir. 1 THE CHAIR: 2 Good morning. My name is MR. PEREZ: Gilbert Perez, science teacher for the reengagement 3 4 program at ACE. I've been an instructor for the 5 last 28 years, 27 of the first years at APS. The last year, I had the pleasure of working at ACE 6 7 Leadership. During this time, I've been a science 8 9 teacher for the reengagement program, students from 10 17 to 24. I feel that our school has a very -fosters a safe learning environment in which our 11 12 students gain confidence, are able to succeed. 13 Because of our approach, I feel that our plus-30 14 graduates from last year gained a lot of confidence, a lot of motivation, authentic skills that employers 15 16 are looking for, and have made higher learning a 17 possibility back into their life. The feedback that we've gotten from our 18 19 employers has been positive of the people that we 20 placed. The employers say that these kids are 21 coming with authentic skills, well-rounded students, 22 and that, from that, I'm very, very proud of. 23 And, lastly, I feel that APS is very well 24 intended, but I feel that focuses on a system, on a 25 And I feel that our school focuses on group.



individuals, and we touch those kids individually. 1 2 Thank you for your time. 3 THE CHAIR: Thank you, sir. Adrian 4 Pedroza. 5 MR. PEDROZA: Good morning, Board. I'm 6 Adrian Pedroza with the Partnership for Community 7 Action. 8 MS. MONTOYA: Buenos días. Yo soy Perla 9 (Ms. Montoya speaks in the Spanish Montoya. 10 language.) 11 MR. PEDROZA: My name is Perla Montoya. I'm a volunteer at Partnership for Community Action. 12 13 She lives in Adobe Acres in the South Valley of Albuquerque. 14 We have been doing public health and 15 16 educational reform work in Albuquerque over the last 17 20 years. We're strong supporters of good, quality 18 public education. We believe that the new Health 19 Leadership High school would add to this quality of 20 education. The health leadership personnel on staff 21 has been coming out to community groups over the 22 past six months and have engaged hundreds of people 23 to get their input over the design of this Health 24 Leadership High School. 25 Overwhelmingly, parents like Perla are

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1 saying that they're extremely excited at the opening 2 of this school. They have provided input as to what 3 they would like to see in the school, what needs it 4 would meet for their children, for the students that 5 they're seeing in their community. And this input 6 has been given to Health Leadership High School, and 7 is going to be incorporated into the design.

They understand that public schools are 8 9 the primary servers of their children's education. 10 However, they also understand that traditional 11 public schools, APS public schools, cannot be 12 everything to all students. And so they're excited 13 at this innovative approach that's student-centric that will specifically meet their interest and their 14 children's interest in health-related fields. 15

16 On the way up, Perla was mentioning how 17 she has been talking to other parents throughout -over the past few months and how they are very 18 19 excited at the possibility of the school opening, 20 because there's a lot of interest in the health 21 field. They recognize that there's a gap. There's 22 a need for bilingual health-care workers. And the 23 parents that she's been talking to are excited that 24 their students might have this opportunity to enter 25 a health career through Health Leadership High

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1 School.

2	We strongly believe that that they have
3	done it the right way, this school, and has gotten
4	community input the way a school should be for the
5	beginning stages. The school, I truly believe, has
6	been designed by community groups, by members like
7	Perla Montoya of the community, and also by
8	people other stakeholders within the industry.
9	MS. CHAVEZ: Excuse me, Mr. Chairman.
10	Time's up.
11	THE CHAIR: Thank you very much.
12	COMMISSIONER SHEARMAN: Thank you.
13	THE CHAIR: Please keep the clock going.
14	Those folks that had wanted to sign up, please come
15	up here and do so. The clock is ticking. Make sure
16	it's legible.
17	I also want to remind everyone that, as I
18	see more than three coming up and this is
19	community input. So it will not include ACE
20	Leadership staff or faculty or board members.
21	The Chair seems to have been in error and
22	skipped a "Bryan Guillen." Would you come up,
23	Brian? I'm going to give you the full two minutes
24	because you had signed in previously. Come on up.
25	Good morning.



1	MR. GUILLEN: Good morning. Good morning,
2	everyone. My name is Bryan Guillen, and I am a
3	graduate from ACE. Earlier this morning, we've been
4	hearing a lot of talk about the 40 percent of
5	students that are now on track to graduate. I speak
6	for not only myself, but on behalf of that
7	40 percent, seeing as I was part of that 40 percent.
8	I went to Valley High School for two years
9	and then dropped out my sophomore year. And I was
10	out of school for a year and then decided to go back
11	to school. I went to ACE. And by going to ACE,
12	I've gained so much, not only in terms of knowledge,
13	but in relevant experience that pertains to my value
14	in the workforce.
15	I've been able to be placed in internships
16	with architecture firms and fully take advantage of
17	my interests in architecture. And I can't see any
18	other student that was put in my position not take
19	full advantage of this opportunity, seeing as it's a
20	health high school.
21	THE CHAIR: Thank you very much.
22	MR. GUILLEN: Thank you.
23	THE CHAIR: We have four minutes left.
24	I'm going to give a minute each for the following
25	folks. Come on up. Mark Padilla. Good morning,
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sir.

1

2	MR. PADILLA: Good morning, Mr. Chair,
3	members of the Commission. My name is Mark Padilla
4	I'm a vice president of a health-care company here
5	in Albuquerque, and also the president of the
6	New Mexico Association of Health Plans. A couple of
7	things I'm going to tell you real quick is, number
8	one, health the health-care sector is not just
9	about clinical jobs. It's about administrative jobs
10	like I have.
11	I've been in this field for over 20 years.
12	And I don't see patients, don't do anything
13	clinical. So it's more than just the clinical
14	positions. And cost-benefit analysis, I've actually
15	been to Amy Biehl and actually been to the ACE
16	Leadership High School. And when you look at the
17	eyes of those students, I think that's where you see
18	the result of your cost-benefit analysis.
19	And lastly, I just want to tell that you
20	Tony and Gabriella are, in my opinion, some of the
21	shining stars of educators that we have here in
22	New Mexico. And I urge you to support them in this
23	very important school. Thank you.
24	THE CHAIR: Thank you, sir. Victor
25	Chavez.

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42 MR. CHAVEZ: Good morning. 1 2 THE CHAIR: Good morning. One minute, 3 sir. 4 Well, thanks for the minute. MR. CHAVEZ: 5 I appreciate it. I'm here because I care about education in this community. And it started when a 6 7 friend of my son's was graduating from West Mesa and 8 was proud of the fact that there were going to be 9 350 of them graduating. And I was surprised because 10 of a school of 2,400 kids. Nine hundred fifty were 11 in his freshman class. That's how many dropped out. 12 That's what this school is about. APS is 13 doing fine. Keep doing what you're doing. It's 14 about the kids that are dropping out. And working with the kids at ACE, I see them change. 15 They're 16 kids who walk up to you, shake hands with you, ask 17 you about you, look you in the eye and tell you what they're doing. They're building a bank in 18 19 Los Alamos. 20 It's a great method, and it's great for 21 the kids, and the results are phenomenal. This is 22 an opportunity to expand it into health. My best 23 friend just had bypass surgery, was in the hospital 24 for a week. Out of the six or seven nurses that he 25 dealt with, one was from Albuquerque. All the rest



were flown in to treat our patients here in town. 1 2 We need this. I think the results could be very positive. And I know that what Tony has 3 4 been doing at ACE works. 5 MS. CHAVEZ: Mr. Chairman, time's up. Thank you, sir. 6 THE CHAIR: Patricia 7 Montoya. And next will be Patsy Nelson, if you want 8 to move up. Go ahead. 9 MS. MONTOYA: Good morning, members of the 10 I'm Patricia Montoya. I'm a registered Board. 11 nurse. I've had the privilege of serving as a 12 Secretary of Health in the State of New Mexico, as 13 well as the Commissioner for Children, Youth, and 14 Families under the Clinton Administration, where I was over the program for children in trouble, 15 16 runaway and homeless youth. 17 And so, again, to -- in respect to other comments made about APS, I think APS does what it 18 19 can best do, being so large. But we have a need in 20 this community and in this state. And I have to tell you, if you're not aware, we do have 30 out of 21 22 33 counties that continue to be underserved by 23 health professionals. When we take a look at the 24 economy, when we look where the jobs are in the 25 future, they are in health care -- it was mentioned

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earlier, not just the health professionals, but 1 2 health careers. And so I want to applaud Tony Monfiletto and the folks that have been involved 3 4 with creating this Health Leadership High School, 5 because we need to start at the younger years to 6 really inspire them. 7 MS. CHAVEZ: Mr. Chairman, time is up. 8 MS. MONTOYA: Thank you. 9 THE CHAIR: Thank you, ma'am. Patsy 10 Nelson. Good morning. 11 MS. NELSON: Good morning. Good morning, Mr. Chair, members of the Commission. 12 I'm Patsy 13 Nelson. I'm a parent and a grandparent of students 14 in APS. My children graduated from this school district and are doing well. But -- and I also 15 represent the New Mexico Alliance for School-Based 16 17 Health Care. And we represent the school-based 18 health centers in New Mexico. 19 I am proud to say that the Health 20 Leadership High School will have a school-based 21 I think it's absolutely the right health center. 22 thing to do to have on-site health care for kids, 23 both behavioral and physical health care. It will 24 also give them an opportunity to practice their 25 skills. It will build their health literacy so that

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they can understand health risks so that they can 1 2 understand how to navigate the health system, and so 3 that they can understand self-care. 4 I don't think we can afford not to invest 5 in this kind of innovation and an intensive program that will prepare our students for careers in 6 7 health -- in the health professions. Thank you. THE CHAIR: 8 Thank you. 9 MS. CHAVEZ: Time is up. 10 THE CHAIR: Perfect timing. I want to 11 make note -- I want to thank everyone who came to 12 And I apologize for the tight schedule sign up. 13 that we did not allow a few folks to speak that 14 signed up. Chris Sturgis, LaDonna Hopkins, Tomas Atencio, Synthia Dominguez and Ray Rodriguez, came 15 16 in support, and I just want that stated for the 17 record. We're now to the Public Education 18 19 Commission's question period. I'd like to ask the 20 applicants to come back up to the front table. 21 THE CHAIR: Good morning. This will be 22 45 minutes of questions from PEC Commissioners. And 23 the chair has the floor open for questions. 24 Commissioner Gant. 25 COMMISSIONER GANT: Mr. Chair, members,

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let me get something straight here. All four of you 1 2 are on the board for this school? MR. MONFILETTO: Oh. Go ahead. 3 MR. GALLEGOS: Mr. Chairman, I'm on the 4 5 board. I'm Diego Gallegos. 6 COMMISSIONER GANT: And you're with ACE? 7 MR. MONFILETTO: I am. 8 COMMISSIONER GANT: And you're with ACE? 9 MR. HILL: I'm independent. 10 COMMISSIONER GANT: I'll be frank. Ι 11 would have preferred to hear from the applicant, 12 period. 13 MS. DURAN-BLAKEY: Well, the founders are 14 Mr. Hill and Mr. Monfiletto. 15 COMMISSIONER GANT: You're the founders, 16 I'll start asking my questions. I was -okay. 17 never mind. 18 I notice, in your second sentence, 19 Executive Summary, it says, "We will serve 14 to 24 20 years of age." What happens after 24? I mean, by 21 State law, you can take someone like myself, who's 22 almost 70 years old, and you have to accept me. So 23 you've limited yourself to the age of 24. What if a 24 kid -- a gentleman walks in, or a lady walks in, at 25 26? What are you going to do then? 30?



MR. MONFILETTO: So Mr. Chairman and 1 2 Mr. Gant, we would take a student over 24. Our --3 our recruiting and our messaging to the community is 4 that we're designed for 14 to 24, but we wouldn't 5 deny somebody who was over 24. COMMISSIONER GANT: So what is your design 6 7 set that you -- you tell people you're only going to 8 take them up to 24. What's so specific about 24? 9 MR. MONFILETTO: We think that there are 10 also opportunities outside of -- outside of the 11 high-school domain where those students could be 12 served as well. But we -- like I said, we wouldn't 13 take that -- we wouldn't not take them if they came. 14 COMMISSIONER GANT: You have a note on 15 Page 37, according to my -- on the application that 16 deals with -- it's paragraph 21, bowlegs 1, 17 bowlegs D, and it deals with you're going to go out and get "X" diagnostic and ancillary services by 18 19 contract? Is what I -- is that what I'm reading? 20 MR. MONFILETTO: Mr. Chairman and 21 Mr. Gant, yes, sir. 22 COMMISSIONER GANT: So SLPs, nurses, 23 diagnosticians, all of that? 24 MR. MONFILETTO: (Indicates.) 25 COMMISSIONER GANT: So I go to the budget.

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And I try to find a budget line there that would 1 2 support the costs for that -- I asked a question 3 earlier of the other applicant. Are you really 4 aware of the rate for a contract SLP? 5 MR. MONFILETTO: Mr. Chairman and 6 Mr. Gant, we are. We currently provide services in 7 that way at ACE Leadership. So we're familiar. 8 COMMISSIONER GANT: But do you think your 9 budget here supports all those professionals that 10 you're going to need for IEPs, et cetera? 11 MR. MONFILETTO: Mr. Chairman and 12 It's based on historical Mr. Gant, we believe so. 13 evidence from running ACE Leadership. So we feel 14 like we've got the right number there. 15 COMMISSIONER GANT: I note that you're 16 going to contract a nurse, and the nurse is going to 17 be on location. 18 MR. MONFILETTO: (Indicates.) 19 COMMISSIONER GANT: Okay. That eliminates 20 one of my other questions. 21 I noted you didn't put any money in for 22 substitute teachers to cover sick leave and other 23 leave. There's no funding allowed -- or in your 24 budget. 25 So, Mr. Chairman and --MR. MONFILETTO:



I'll keep going, if that's okay. I -- from our 1 2 experience, our kids respond better to teachers they know and other staff that they know at school. 3 So 4 having an unknown person with whom the kids are 5 unfamiliar isn't a good substitute arrangement for 6 us. We'd rather have those classes substituted 7 8 from other folks on staff, as opposed to someone 9 that they don't know and are unfamiliar with. So 10 we'll cover those classes with our other faculty. 11 COMMISSIONER GANT: And who are the other 12 staff? 13 MR. MONFILETTO: So there's social 14 workers, assistant principals, folks like that. COMMISSIONER GANT: Are social workers 15 certified teachers in the State of New Mexico for 16 17 subject material? 18 MR. MONFILETTO: Not -- they're able to 19 substitute. They're not able to teach a class. 20 A question I just have to ask, because ACE 21 has been very involved with this applicant. Why 22 didn't you just make it one school? Why are we 23 going through having extra administration, extra 24 cost, extra facilities -- the list is endless, you 25 Why don't we just have one set of know.

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administration and one school? 1 2 MR. MONFILETTO: Well, Mr. Chairman, 3 that's a great question. We thought about that. 4 And we -- we believe that a small school, 5 400 students or 430 students, is a more effective school for the kids. So when you grow -- when you 6 7 have an at-risk population, as we do, a large school doesn't serve them well. So we feel like 400 is the 8 9 right -- or so is the right number of kids for a 10 school. And so having independent schools is 11 12 better for the kids and better for the institution. 13 COMMISSIONER GANT: It also helps your 14 budget, right? You get a small school adjustment? Well, Mr. Chairman and 15 MR. MONFILETTO: 16 Mr. Gant, we specifically designed the school to be 17 430 students, so that we wouldn't have any 18 small-school-size adjustment funding. 19 COMMISSIONER GANT: But if you don't get 20 up to the 400, you will fall into the small school 21 adjustment. 22 MR. MONFILETTO: Mr. Chairman, I'm 23 confident we will have more demand than we have 24 spaces. 25 COMMISSIONER GANT: That wasn't my



1 question.

2 MR. MONFILETTO: If we don't succeed, then 3 that's true.

4 COMMISSIONER GANT: Go on to another 5 Commissioner. I know I have other questions.

6 THE CHAIR: Questions on this side? 7 Commissioner Bergman. I'll make it there one of 8 these days here.

9 COMMISSIONER BERGMAN: Thank you, 10 I would like to explore the relationship Mr. Chair. 11 between ACE Leadership High and this new school, 12 beyond your obvious immersion in the application 13 process and everything. Because I note, on Page 65, 14 that your application stated no governance 15 relationship will exist between HLHS and any other 16 organization.

17 And then on your application -- and 18 unfortunately, the page number didn't print out. 19 The application prompt is 4-B-5 and starts to 20 describe the school's strategic vision. I think it was down in the latter part of the application. 21 22 I'll read you the part of the first sentence that 23 says, "The strategic vision of HLHS is to create a The second sentence 24 gradual growth plan." Okay. 25 says, "Growth will take place over four years, and



based on the plan executed by ACE Leadership High
 School, revenues should be sufficient to account for
 expenditures."

The third sentence says, "Also, given the significant experience of ACE Leadership High School staff, the school expects to easily achieve its enrollment objectives."

8 Now, that sounds to me like ACE Leadership
9 High School is running this school. Enlighten me a
10 little bit about that.

11 MR. MONFILETTO: So, Mr. Chairman, 12 Mr. Bergman, thanks for that question. What we 13 intended in the application was to show that we have 14 experience in the development of schools, and that, from our experience, we believe that the growth 15 trajectory of the school and other questions that 16 17 are in the application, we can answer, because we've been there before. I don't have any intention of 18 19 running the school. That's why it has a separate 20 board, a separate principal, a separate 21 administrative structure. 22 But what we do have is experience. And so we wanted to lend that experience to the 23 24 application.

25

COMMISSIONER BERGMAN: Okay. And one of



your comments you made just before we got into this 1 2 part, you said, "We would take a student..." -- in answer to Mr. Gant's question -- over 24. 3 "We" were 4 the one answering the question. It sounds like "we" 5 are "you." MR. MONFILETTO: I'm going to have 6 7 separation anxiety, Mr. Bergman, after the school 8 shows up. But it's intentionally set up to be 9 governed separately and distinctly from ACE 10 Leadership. I don't have any control over the work of the school or the board of the school or 11 12 anything. 13 COMMISSIONER BERGMAN: I understand. And 14 I know you're trying to plant schools. I understand And one other thing, Mr. Chair. 15 that. Here, aqain, 16 this was also on Page 65. It says, "HLHS will 17 become a member of the High School Leadership Network and receive services through that 18 19 affiliation." Now, I'm not the budget expert on 20 this panel, so I'll leave that to the other folks. 21 So I know some money was budgeted for that. 22 What exactly serves as this network and 23 who are they? 24 Mr. Chairman and MR. MONFILETTO: 25 Mr. Bergman, we have -- we've learned a lot about

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project-based learning, student support, community 1 2 engagement. And our goal is to have the calendars of the school overlap so that our teachers are 3 4 available to each other during those times when the 5 school is not in session and when we have professional development time. 6 7 And our chief goal is to be able to bring 8 the faculties together so that they can learn 9 together about those things that we do by 10 project-based learning, student support, and 11 community engagement. 12 So our goal is really to share resources, 13 share professional development, share expertise. 14 COMMISSIONER BERGMAN: So this network somehow is under your umbrella, also? 15 Is that --MR. MONFILETTO: So the network is the 16 17 connector. So we provide the connection. ACE 18 Leadership just provides the connection between the 19 faculty at Health Leadership and the faculty at ACE 20 Leadership. 21 COMMISSIONER BERGMAN: But it is -- is 22 it -- is it an organization? Is it somehow -- how 23 is it formulated? 24 MR. MONFILETTO: Good question. So 25 it's -- it is a component of the charter at ACE

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Leadership High School. So when ACE Leadership High 1 2 School was written and approved, it had a professional development center within it. 3 And the 4 professional development center within the school is 5 responsible for providing expertise to other schools and to support other schools. 6 7 COMMISSIONER BERGMAN: Okay. So the 8 professional development aspect is within this HSLN 9 [verbatim]? Thanks, guys. Thank you, Mr. Chair. 10 MR. MONFILETTO: The question is tricky. 11 So thank you. 12 Thank you, Commissioner THE CHAIR: 13 Commissioner Canfield. Bergman. 14 COMMISSIONER CANFIELD: Thank you, Good morning. Good afternoon. I just 15 Mr. Chair. 16 had a couple of questions. And, actually, some of 17 the folks that spoke on your behalf really demonstrated some of that and answered some of that. 18 19 This one is for -- Gabriella, right? You mentioned 20 in your opening remarks that you engage industry 21 partners. And I'm -- I apologize. I didn't write 22 down the term you used. But you said you go a 23 little bit further in engaging industry partners. 24 And obviously, you had some of those 25 partners today that explained and answered some of

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my questions. But can you elaborate on what does it 1 2 mean that you go the extra -- I forget the term you 3 used -- but you go a little further in engaging 4 industry partners? Can you elaborate on that? 5 MS. DURAN-BLAKEY: Sure. So --Commissioner, I -- in a traditional setting, we'll 6 7 usually ask people from the industry for their input 8 or let them know what we're doing to kind of keep 9 them informed as advisory partners. So that's in 10 kind of the traditional setting that they spoke to 11 as what's offered in the district now. 12 This goes a little deeper. And you can 13 tell by the comments that were made that a lot of 14 work is done from the community to build the curriculum for the school. So we're responsive to 15 the needs in the health community to build the 16 17 curriculum. I might know about education and a little bit about health. 18 But I need to know from 19 the experts in the health field in order to make 20 sure that our students are successful in going into 21 those careers. 22 And so we have to develop the curriculum 23 with the needs that the health community needs in 24 the next five to ten years, so when our students 25 come out of school, they're successful in the

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community. And so it's not just a partnership where 1 2 we have, you know, a meeting once every six months; but we need each other; we rely on each other; the 3 4 industry relies on the school, and the school relies 5 on the industry to make sure that we're responsive to the students that we're serving. 6 7 The school is the platform that's 8 connecting the students and the industry together. 9 So those conversations and the work we do together 10 is very important to the success of the school and, 11 ultimately, for the students to be able to go into 12 the work world. 13 COMMISSIONER CANFIELD: So can you give me 14 an example of that with an industry partner, UNMH or UNM, or can you give me an example of how that would 15 16 work? 17 MS. DURAN-BLAKEY: So we spent two days --I think it's -- we have to be cognizant to know 18 19 that's a broad -- the health field is very broad, 20 and we don't want to just partner with one person or 21 one community, but make sure that everybody is 22 together at the table. So, in a way, we're also a 23 platform for bringing the health community together. 24 Often -- in several fields, we work in isolation. 25 So, you know, we are serving as a platform to bring



1 all of those communities together.

2	We spent two days with various health
3	professionals, Presbyterian, UNMH, Bernalillo
4	County, all of these different sectors in the
5	industry, to develop what it looks like for somebody
6	to what they need from a graduate from Health
7	Leadership High School, what skills, what knowledge,
8	what attributes do they need in order to be
9	successful in the next five to ten years and be able
10	to serve the community right? and have a job.
11	So it's those are the conversations
12	that we've done so far. And it's been very
13	important. In order to develop the skills and
14	knowledge and attributes that we need our students
15	to know, we have to hear from the people in the
16	industry.
17	COMMISSIONER CANFIELD: Okay. One more
18	question, Mr. Chair, if I could. Of course, your
19	application is supposed to demonstrate an unmet need
20	in the community. And we've heard that APS has
21	certain programs right now. And I applaud your
22	serving the the dropout the dropout students.
23	I think that's very admirable, and we appreciate
24	that. But as far as the health-related industry, do
25	you have any specifics about the unmet need as far



as what's currently being provided to help prepare 1 2 our students for that industry? Do you have any specifics on that or anything you can help me 3 4 understand better that there is an unmet need? In, specifically, to 5 MS. DURAN-BLAKEY: 6 the health community or -- because I think that the 7 school district spoke to two different types of 8 clientele that we're bringing together; right? So 9 there's the at-risk students that we're losing, the 10 40 percent of kids. And then there's the health 11 industry. 12 COMMISSIONER CANFIELD: And I get the 13 at-risk, and I appreciate that. So help me with the 14 health. 15 MS. DURAN-BLAKEY: The health industry, 16 for example, the CEC program that exists now, has 17 about 150 students that apply for the program, 50 of which they take, 30 of which finish the program. 18 19 They are licensed as LPNs. And LPNs are not able to 20 work at Presbyterian, for example. An LPN license 21 doesn't allow you to work in that field. 22 So there is a need -- a broader need 23 beyond an LPN-competitive nursing program for the 24 health field. And that's given by the conversation 25 we've had with our industry partners as to what they

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1 need in students that are coming out.

3that we all know that there is a greater need to4what makes health intriguing to me is that there's a5greater need beyond making our students successful6in the job market, but making them healthy people.7So I think that the health school provides an8opportunity for our students not only to be9successful in the career, but to be successful as10individuals in their community, to become healthy11individuals, and to be preemptive about their12health, and so that we're not waiting until people13get sick to need medical care.14And the more that we can work with our15students to bring that knowledge into their16community and into their families, I think that17we're providing another type of success beyond just18training them for a licensed program.19COMMISSIONER CANFIELD: Thank you. Thank20you, Mr. Chair.21THE CHAIR: Thank you, Commissioner22ComMISSIONER LOPEZ: Given that the school23grading system and test scores are limited, what24other you give other certificates at ACE? What	2	And more specifically to health, I think
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20 you, Mr. Chair. 21 THE CHAIR: Thank you, Commissioner 22 Canfield, Commissioner Lopez. 23 COMMISSIONER LOPEZ: Given that the school 24 grading system and test scores are limited, what	18	training them for a licensed program.
THE CHAIR: Thank you, Commissioner Canfield, Commissioner Lopez. COMMISSIONER LOPEZ: Given that the school grading system and test scores are limited, what	19	COMMISSIONER CANFIELD: Thank you. Thank
 22 Canfield, Commissioner Lopez. 23 COMMISSIONER LOPEZ: Given that the school 24 grading system and test scores are limited, what 	20	you, Mr. Chair.
23 COMMISSIONER LOPEZ: Given that the school 24 grading system and test scores are limited, what	21	THE CHAIR: Thank you, Commissioner
24 grading system and test scores are limited, what	22	Canfield, Commissioner Lopez.
	23	COMMISSIONER LOPEZ: Given that the school
25 other you give other certificates at ACE? What	24	grading system and test scores are limited, what
	25	other you give other certificates at ACE? What



kind of certificates will people get at Health 1 2 Leadership? MR. MONFILETTO: Mr. Chairman and 3 4 Ms. Lopez, our -- over the next year, we'll be 5 working with providers, employers, to come up with a certificate that they would accept as an entry-level 6 7 certificate into employment. So our goal is that 8 every student, when they graduate, can transition 9 into either a public health position -- so a 10 community health worker, working in a health-care 11 system, data, record-keeping, working in the 12 hospital itself, or clinic, or in a nurse's 13 assistant or other role, where they actually work 14 with clients. 15 COMMISSIONER LOPEZ: So what providers are 16 you working with? 17 MR. MONFILETTO: So we're currently 18 working with University of New Mexico Hospital, 19 First Choice; their clinics have 12 clinics. We've 20 been working with Presbyterian Healthcare. And 21 Bernalillo County? -- yeah, okay, Bernalillo County 22 Department of Health. 23 COMMISSIONER LOPEZ: And they're on board 24 with creating a certificate that will then provide 25 jobs?



MR. MONFILETTO: Mr. Chairman, this year 1 2 is going to be spent on teasing out what that certificate should have in it. And because our --3 4 our curriculum is rooted in what they tell us they 5 need, we believe that we're going to be able to have a certificate that's going to allow for entry-level 6 7 employment for our graduates. 8 COMMISSIONER LOPEZ: Okay. Thank you. 9 THE CHAIR: Thank you, Commissioner Lopez. 10 Commissioner Shearman. 11 COMMISSIONER SHEARMAN: Yes, yes. Good 12 morning. I'm looking at your vision statement, 13 third sentence. "The focus will be to work with low-income children of color who have not been 14 successful in traditional schools." 15 16 Correct me if I'm wrong. I don't think a 17 public school can exclude anyone based on color or 18 anything else. What -- can I ask what prompted you 19 to put that statement in there? 20 MR. MONFILETTO: I can answer that. So Mr. Chairman and Ms. Shearman, we looked at the city 21 22 overall. And we looked where the greatest health 23 need was in the city. So Bernalillo County did a 24 study of health determinants across Albuquerque. 25 And what they found was that the greatest health

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1	need was in the South Valley, that that is the
2	community that is in the most need of a health of
3	a health care and health profession school.
4	When we looked at the South Valley, we
5	looked at the demographics of the South Valley, and
6	the people most in need and the people most in need
7	are poor people of color in the South Valley. So we
8	would never say no to an applicant who was who
9	didn't fit that demographic. But our focus is on
10	the kids who need us the most, and the community
11	with the greatest health disparities that needs us
12	the most.
13	COMMISSIONER SHEARMAN: That really
14	bothers me; I have to tell you. To have that
15	statement written in your application says, to me,
16	you do intend to exclude some student groups.
17	That's the way I read it. And I you're saying
18	it's not. But it truly concerns me that it's in
19	writing.
20	My great-granddaughters, whose last name
21	is "Rodriguez," are not children of color. They're
22	lighter than I am. Their dad sometimes asks if
23	they're his. But the point is, color has nothing to
24	do with who you are. And that really, really
25	bothers me. I would hope you would take that out.

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My next question is, would you tell me 1 2 again, Gabriella, about the professional 3 development? You said two days a week, you will 4 have --5 MS. DURAN-BLAKEY: One day a week for two 6 hours. 7 COMMISSIONER SHEARMAN: One day a week. 8 So all the teachers are pulled out of the 9 classrooms. 10 MS. DURAN-BLAKEY: So the students have left school. 11 12 COMMISSIONER SHEARMAN: That was my 13 question. Where are the students when this is going 14 on, or what part of the day does this occur? MS. DURAN-BLAKEY: So the students -- and 15 16 this is based on a model that is very successful at 17 ACE Leadership. So the students have -- have 18 been -- they finished their day, and the teachers 19 stay for two hours for professional development. 20 And part of the importance of that is because it is 21 project-based learning, and we can't do the -- you 22 know, touch-and-go of professional development. Ιt 23 has to be responsive and adaptive. And so the 24 teachers really need that time together. 25 COMMISSIONER SHEARMAN: So it's after the

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1 students have completed their day.

2	MS. DURAN-BLAKEY: After the students have
3	left, uh-huh. I noticed in your budget, on line
4	item oh, under 2600, 54610, Rental of Land and
5	Buildings, in year one, you have nothing. In year
6	two and so on to year five, you have \$125,000.
7	What could you explain that to me?
8	MR. MONFILETTO: So Mr. Chairman and
9	Ms. Shearman, we are our facility costs are we
10	intend to lease a building. And those facility
11	costs would be paid for by the lease reimbursement
12	program. So we don't intend we don't believe
13	that we'll need operating funds for facility costs.
14	COMMISSIONER SHEARMAN: I'm sorry.
15	Operation funds for what?
16	MR. MONFILETTO: For facility costs. We
17	don't think we will need that.
18	COMMISSIONER SHEARMAN: Okay. Tell me,
19	when a student graduates from your high school, what
20	jobs could they get?
21	MS. DURAN-BLAKEY: That's a good question.
22	So, again, the health field is so broad that we're
23	hoping that they would have the skills, knowledge,
24	and attributes based on what the needs are of the
25	industry to be successful in whichever domain that

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MAIN OFFICE 201 Third NW, Suite 1630 Albuquerque, NM 87102 (505) 843-9494 FAX (505) 843-9492 **1-800-669-9492** e-mail: info@litsupport.com 1 they choose.

2	So, again, we have the three domains of
3	health that were developed and worked with our
4	partners with the industry. And students would, by
5	their junior or senior year, start to find which
6	domain they are interested in and which domain we
7	can start setting them up with internships,
8	regarding that.
9	So, for example, if they were really
10	interested in clients as a domain, we could start
11	focusing them on projects that really work on their
12	skills in working with clients in the health field,
13	along with pairing them up in internships so that
14	they could become a provider, right, working with
15	clients.
16	They also might be interested in more of
17	the system care, and they might be interested in
18	working at working on health plans or working with
19	the health system. And so our goal is that we make
20	it broad enough, and we're not pigeonholing students
21	that they have to choose one license program, but
22	we're opening the opportunities to them to pick
23	whichever one in the three domains that they're well
24	prepared to go into.

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COMMISSIONER SHEARMAN:

25



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Thank for you

that. Let's just say, though, that at the end of 1 2 their high school years, this student is not able to 3 go on to college or any other training at that time, 4 and they want to use their health training that 5 they've gotten in your school to go get a job. Tell 6 me what specific job one of your students might get. 7 MS. DURAN-BLAKEY: So, for example, a 8 specific job they might get is to be a nurse tech. 9 They can go into -- going into the field beginning 10 as a nurse tech and doors open up. 11 COMMISSIONER SHEARMAN: What is a nurse 12 tech? 13 MS. DURAN-BLAKEY: So they would work on, 14 like, drawing blood, taking blood pressures, doing initial service to patients before they are seen by 15 16 a provider. 17 COMMISSIONER SHEARMAN: Is that the same as a nurse's aide? 18 19 MS. DURAN-BLAKEY: It's a little bit 20 different, but it's similar. 21 COMMISSIONER SHEARMAN: A step up, maybe? 22 MS. DURAN-BLAKEY: No, different. 23 COMMISSIONER SHEARMAN: I think that's it. 24 Thank you, Mr. Chairman. Thank you. 25 THE CHAIR: Thank you, Commissioner

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1 Shearman. Commissioner Gant.

2	COMMISSIONER GANT: A couple of more
3	questions, Mr. Chair, if I may on the budget. In
4	Other Purchased Services, under Function 2300,
5	55400, we have \$50,000 starting in the second year
6	for advertisement, and \$50,000 the next, and it
7	drops off down to \$2,500, back up to \$43,000.
8	What's that what is all that money going to be
9	used for in the second, third, fourth year?
10	Advertisement? It says "Advertising."
11	MR. MONFILETTO: So, Mr. Chairman,
12	initially, it's to communicate that the school is in
13	the community to people who live there. So our
14	ability to let people know that we exist and that
15	we're open for business and that we take students
16	who are up to 24 years old, that it's free, all
17	those kinds of things that the community needs to
18	hear from us.
19	But we don't believe that's going to be
20	something that is going to be ongoing. We think
21	that, because of our word-of-mouth reputation and
22	our community partners, that the need to advertise
23	is going to go away. That's the reason for the
24	sharp decline.
25	COMMISSIONER GANT: You're recruiting



1 students.

2	MR. MONFILETTO: That's true, initially.
3	COMMISSIONER GANT: Do you understand HB 2
4	and how you cannot use SEG for recruiting students?
5	MR. MONFILETTO: We do.
6	COMMISSIONER GANT: And you just said you
7	were going to use it for recruiting students.
8	MR. MONFILETTO: We know that legislation
9	was passed in the last session. And if that we
10	will insure that we use those funds aligned with the
11	language in House Bill 2. And if we are not able to
12	do that, we won't spend it for that purpose.
13	COMMISSIONER GANT: So you know we have to
14	vote on your application on what we see here.
15	MR. MONFILETTO: (Indicates.)
16	COMMISSIONER GANT: Not what you may want
17	to do in the future. Okay? Who's going to clean
18	the restrooms? Who's going to clean the halls? You
19	don't have any funding set aside for custodians.
20	MR. MONFILETTO: Mr. Chairman, it's in the
21	Contracted Services line for building maintenance, I
22	believe.
23	COMMISSIONER GANT: That's building
24	maintenance. That's not custodian. There's a
25	difference.



MR. MONFILETTO: Yeah, there is. And we 1 2 think we can cover -- we think that that place-holder will take care of maintenance as well. 3 4 COMMISSIONER GANT: All right. Back to 5 the application. Where is it? Well, I don't see it, whatever I did with it. There it is. Under 6 7 paragraph 3-D, bowlegs 4, Speech and Language 8 Therapist, I hope that's the same as a pathologist. 9 You're not starting your speech language services 10 until the third year. Why? 11 MR. MONFILETTO: So, Mr. Chairman, we have 12 it under Contracted Services. We won't be employing 13 the speech language therapist until the third year. 14 COMMISSIONER GANT: Oh, interesting. I qo back to the budget. And it says, "Speech Therapist 15 16 starting at \$50,000 in year three, salaried." So 17 you are hiring a speech therapist in the third year 18 for \$50,000 -- so you're not hiring. Which is it? 19 Contract or salary? 20 MR. MONFILETTO: So in the initial years, it's contract services. But we believe we would 21 22 need to place somebody actually on staff in the 23 third year. 24 COMMISSIONER GANT: Okay. Then I ask, why 25 aren't you -- these other very important

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professionals, why aren't you putting the rest of 1 2 them on salary, like diags, PTs, OTs, counselors, psychological counselors, audiologists, 3 4 interpreters? 5 MR. MONFILETTO: We think that demand for 6 speech therapy is going to be much higher than the 7 demand for the other ancillary services, which is 8 the reason why we think it's necessary to have that 9 person on staff. The other services aren't as 10 prevalent; the need isn't as high, from our 11 experience. 12 COMMISSIONER GANT: All right. Thank you. 13 Thank you, Mr. Chair. 14 THE CHAIR: Thank you, Commissioner Gant. 15 Commissioner Bergman? 16 COMMISSIONER BERGMAN: One follow-up 17 question, Mr. Chair. Thank you. Thank you, Mr. Chair. 18 19 Let's just explore something, as you 20 answered Commissioner Shearman there, about what 21 your students could go into if they wanted to go to 22 work immediately after they graduate from high 23 school. We all know that college prep and college 24 readiness are big talking items now in education. Ι 25 would hope that you're wanting your students,

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actually, as many as possible, to go on to college 1 2 and get those higher paying jobs, get a nursing degree or something like that. Can you just expand 3 4 on that for me for a second? MS. DURAN-BLAKEY: Correct. Well, of 5 6 course, we want to prepare them at the highest 7 expectation possible; right? So I'm going in 8 assuming that every child that walks in through the 9 doors of the school are going to college, and it's 10 our job to make sure that they get there. 11 If they choose not to go, then that's something that they chose to do because of life 12 13 circumstances or something else that came in the 14 But preparing them, we're preparing them all way. to be college and career-ready, which means it's up 15 to the student to decide which way they want to go, 16 17 not up to the school to decide for them. 18 COMMISSIONER BERGMAN: Absolutely, because 19 college isn't for everybody, obviously. 20 MS. DURAN-BLAKEY: Right. But they should 21 be able to make that decision. 22 COMMISSIONER BERGMAN: But you're going to be counseling them trying to encourage them at least 23 24 to --25 MS. DURAN-BLAKEY: Right.



COMMISSIONER BERGMAN: -- expand 1 2 themselves or grow or however you want to word it? 3 MS. DURAN-BLAKEY: And growing them as an 4 individual so that they believe in themselves enough 5 to know that they can do whatever they want to do, or that they're capable of doing, because we've 6 7 prepared them within the school to be able to do 8 In a lot of our personal experiences, we may that. 9 have that at home, where our parents -- kind of grew 10 up to kind of just go to college or prepared us. 11 But for some students, the school has to be the 12 ones, with the community, that are building the 13 students up to do that. 14 COMMISSIONER BERGMAN: That's important, 15 because the demographic you say you're going for, 16 sometimes they're not getting the encouragement in 17 their environment to think bigger -- think that they 18 can achieve over what they've been told. You can't 19 achieve any more than that. Right, right. 20 MS. DURAN-BLAKEY: And 21 that's what Mr. Hill spoke to earlier in the 22 presentation as far as making it very asset-based with positive youth development to make sure that 23 24 students are given that opportunity. 25 COMMISSIONER BERGMAN: Okay. Thank you.



1 Thank you, Mr. Chair.

1	mank you, mr. chair.
2	THE CHAIR: Thank you, Commissioner
3	Bergman. Go back to Commissioner Shearman. Follow
4	up.
5	COMMISSIONER SHEARMAN: Thank you. Just
6	one last question. I'm looking at Page 71 of your
7	application. And under "Instruction," \$52,000 times
8	five teachers, annual amount equals to Level 2
9	teachers with 11 years experience, and so forth.
10	However, looking on the budget, you have four
11	teachers. In the first year, four teachers,
12	\$208,000. And that does come out to \$52,000 each.
13	But I'm looking for that fifth teacher.
14	MR. MONFILETTO: Mr. Chairman, I don't
15	have the budget in front of me. I'm sorry. I can't
16	answer that. I'd be happy to answer it after I've
17	had a chance to sit down and look at it. I don't
18	know it in that detail.
19	COMMISSIONER SHEARMAN: Let me just ask
20	this. What was the founders' intent to start school
21	the first year, with how much teachers?
22	MR. MONFILETTO: Mr. Chair and Madame
23	Shearman, it's five.
24	COMMISSIONER SHEARMAN: Five. Okay.
25	Thank you, Mr. Chairman.



1	THE CHAIR: Thank you, Commissioner
2	Shearman. Are there any other questions from
3	Commissioners? Seeing none, I have one question.
4	And it's related to it's related to the comments
5	that were made earlier on on the differentiation
6	between health care, which we know as a system of
7	sick care, like, I can triage a parent. I can let
8	them know what they need to fix, if it's blood
9	pressure, cholesterol, et cetera. On the front end,
10	it's, unfortunately, in America called alternative
11	health care. It shouldn't be an alternative; it
12	should be a primary system of building looking at
13	that holistic model of building healthy citizens.
14	And I know it's sometimes very, very hard
15	to quantify. But if you would, tell me how your
16	program I heard the mention of a health coach
17	earlier how is the culture being built to look at
18	fitness, to look at nutrition, to incorporate the
19	six dimensions of wellness when you're looking at
20	social wellness, occupational wellness, spiritual
21	wellness, physical wellness, intellectual wellness,
22	emotional wellness? It really gets big in and of
23	itself if you just look at the front end of, "I
24	don't want to enter that sick care system."
25	So, if you could, just the general

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1 question of how are you going to build that culture 2 in your programming?

MR. MONFILETTO: Mr. Chairman, I'd like to 3 4 start, but I know everybody else has an opinion 5 about that. That's a really important part of our design. So it's really vital that the school be 6 developed with the values and the ethos of health, 7 8 healthy citizens and healthy communities. And in 9 order to do that, we need to understand, in a really 10 deep way, about what makes communities healthy and 11 what makes people healthy.

12 And so that -- those values need to 13 permeate the school. It's like at ACE Leadership 14 High School, where you are only as good as your word when you're a contractor. 15 Your reputation is 16 everything in the world of contracting. And we 17 teach our kids about knowing how to build a reputation so that they can work when they get out 18 19 I wouldn't necessarily know that -- how of school. 20 valuable that was if I didn't work with contractors 21 all the time who told me about that.

We, because of our partnerships, are going to be working with people from the health sector, public health, individual health, so that we can develop systems at the school that promote

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1	people's the students' health, but also the
2	community's health. When they go home, they're able
3	to communicate what it's like to be healthy in their
4	own community because of what they've learned at
5	school, the way they've been developed at school.
6	I don't know if you want Diego?
7	MR. GALLEGOS: Chairman Garrison, I would
8	like to also speak to that. That was one of the
9	biggest draws to me when I decided to become a
10	member of the governing council of Health Leadership
11	High School, the idea that if we can help the young
12	people to know more about what a healthy lifestyle
13	could be like, what a healthy life could be like,
14	and that they and we, the school, could share that
15	with their families, was a big draw for me.
16	I've been in the South Valley my entire
17	life. My family has been there since the 1600s. I
18	know the problems we have in terms of health in the
19	South Valley, and they are significant. My brother
20	sat in the first family health center that we had in
21	the South Valley. It wasn't that long ago that we
22	did not have any health services in the South
23	Valley.
24	So we are, in many ways, a very unhealthy
25	community. Having an opportunity for our young

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people to learn and to help teach their own families 1 2 about healthy living, healthy life styles, is a 3 really important part. 4 So as governing council members, we intend 5 to make sure that that is one of our goals is to 6 make sure that we not only help the young people, 7 but help their families to not only be healthier, 8 but to engage our health systems in a more effective 9 way. 10 Chairman Garrison, I would also MR. HILL: 11 say, I haven't been in the South Valley since the 12 1600s, but --13 THE CHAIR: Don't mention the Mud Run, or 14 you --Exactly. Just the last 20 15 MR. HILL: 16 But in addition to the partners that years or so. 17 we talked about earlier who are helping us to not only understand the sector, but to build curriculum 18 19 and to build some of the certificates that will be 20 accessible for jobs for kids when they graduate, 21 there are other community partners, like Centros 22 Avila in the Valley, and Casa de Salud, who are 23 smaller community-based health providers who -- who 24 have developed ways to deliver some of the practices 25 of some of these determinants of health that we're

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1 talking about.

2	They're not just sick-care systems, but
3	are really focused on preventative health and
4	focused on kind of holistic ways to be healthy in
5	one's life and lifestyle. And that does permeate
6	the school as well, from morning meetings to young
7	people actually doing calisthenics in the morning,
8	so that they're not only ready for their day in the
9	classroom, but that they're part of a culture that
10	promotes health.
11	So along with the traditional partners,
12	like UNMH and Presbyterian, there are also those
13	community-based, smaller clinics that we're
14	partnering with as well.
15	THE CHAIR: Thank you very much. Any
16	other questions from Commissioners? Seeing none,
17	any member of the public, including the applicants,
18	may submit written input following this hearing.
19	Written comments can be sent to the Commission via
20	the Public Education Department main Web site, at
21	ped.state.nm.us, through the following: The
22	Calendar listing on the front PED Web page, through
23	the Public Comments section on the front PED Web
24	page. Using the link ped.state.nm.us/comments, you
25	will be directed to an e-mail format in which to

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write your comment. Make sure you identify the 1 2 school you're commenting on in the drop-down menu. Please note that any written input must be 3 4 received by no later than close of business on the 5 third business day following the hearing on the б application you wish to comment on. 7 I want to thank you for your presentations 8 and for your hard work on your application. Does 9 anyone need a brief recess? We're going to take a 10 ten-minute recess, and then we'll move forward with 11 the next school, which is the Electus Academy. 12 Electus, you are welcome to come set up up front 13 during the break time. We're in recess. 14 (Proceedings concluded at 11:00 a.m.) 15 16 17 18 19 20 21 22 23 24 25 SANTA FE OFFICE MAIN OFFICE 119 East Marcy, Suite 110 201 Third NW, Suite 1630 Santa Fe, NM 87501 Albuquerque, NM 87102 (505) 989-4949 Inc. FAX (505) 843-9492

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8	matter therein stated.
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10	hand on August 29, 2012.
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