

**High Schools & Careers:  
The New Value Proposition  
Tuesday, April 29, 2008  
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>>MR. MALONE: Good morning, everybody. If Mark doesn't mind,

we would like to try to get started.

Well, good morning, good morning. I'm thrilled to be here. Very excited. My name is David Malone. In my real life, I'm the president and CEO of the financial services company called Gateway Financial Group.

I have the pleasure of welcoming you to the High School and Careers and New Value Proposition Summit, probably because, like everybody else in this room, this has become a passion of mine. I spend an awful lot of time working on this, and no matter what sorts of solutions we ever work around as business people, at the end of the day, if we can't focus on fixing our education system, we just aren't going to make any real progress. So I'm convinced this is the way to go.

When I heard last spring, I think it was, that the Jewish Healthcare Foundation was considering this Summit, I knew this was the right place to house it. I don't know how many of you are familiar with Karen Feinstein and her posse, but they have a remarkable track record for success, energy, and excitement, and I'm very appreciative of their efforts today.

I wear an awful lot of hats in my life. Sometimes I feel like Sybil. I Chair the Chamber of Commerce which represents businesses among the Allegheny County Conference. I'm Chair of the Pennsylvania State Workforce Investment Board, which is an advisory entity to the governor. My board has about 40 people, which include organized labor, educators, and so on, among the United Way board, Jewish Healthcare Foundation's youth place, and so on. So you get an idea of I have a reasonably unusual life. But my clients present an even significantly different view of the world.

Our business services only high-income, high-net worth. So for someone to advertise their business with our firm, they have to be remarkably successful at business interest, in the U.S., far East, and so on.

And no matter where I go, the subject that always comes up is workforce development. Everyone, every business owner, every one of these entities that I mentioned, have issues that are indigenous to their own specific portion of the world, but all the of them share a concern about workforce development; including, by the way, our friends over in the far East who spend far more time and far more money trying to solve this problem than we are here in the U.S.

And as I travel around, various people that are working on these issues, what I find is there are remarkable success stories, but they are isolated in that we haven't managed to bring together the right people to create a cohesive and significant cooperation and sharing of experience to try to solve this problem in the way that I think we need to. And I expect that today we are going to have significant outcomes from these discussions.

In addition to the staff and the Jewish Healthcare Foundation, we have some great supporters of this Summit, and I need to especially thank those who are willing to pay for our coffee and so on today. So thank you very much to the Robert Wood Johnson Foundation, the Lumina Foundation, the Pittsburgh Foundation, the Benedum Foundation, Three Rivers Workforce Investment Board, and Jewish Healthcare Foundation. Their money, along with the partnership with the Allegheny County Conference on Community Development and the United Way, have made this day possible.

As important as their support is obviously your presence. On a national/local level we need to focus on how to educate our kids for careers that make sense individually and for the economy.

We are going to hear from Bill Daggett, and I don't know who hasn't heard from him yet. If you haven't, he reminds me of your -- if you had a summer

house and you wanted to open it in the spring and you opened the windows and all this light comes in. He just has this perspective on life and issues that's different from anywhere else in the world and how to solve it. And he is a great speaker.

Our Pittsburgh Public School has a five-year graduation rate of 64 percent, and many of you from major cities would have the same sort of statistics in your city. Three of four -- or of kids that enroll in four-year institutions do not end up -- do not graduate or find employment in jobs that require a four-year degree.

And as I travel around and talk to different business people, we have an enormous number of jobs that are yet unfilled, primarily by those that require technical degrees. That's a remarkable disconnect that I can't quite understand.

As Chair of the business, my focus has been on regional economic development. It was never my intention to get involved in education and workforce, and if you were to talk to any of my teachers, you might find that this passion of mine is -- I don't even know the word because I wasn't paying attention when I was in high school.

(LAUGHTER)

But I will tell you about a very disturbing conversation I had the other day. A friend of mine is a CEO of a Fortune-500, one of the top-five companies in America, and I said, "What's up with your workforce development?" And he said, "Globally, our workforce is up 15 percent, and it's down 7 in this region." I said, "How much of the 15 is domestic?" And he said, "Almost none." I said, "What's the problem, where you have growth there and not here?" He said, "We cannot find anyone who can do the work we need to do. We are willing to train, we are willing to invest, partner, do whatever we have to do to keep those employment figures in the U.S. up."

I need to tell you that, in 1991, I had that same conversation from Motorola.

1991. That's how long this problem has been in existence for major corporations, and they have made real investments in trying to solve the problem and haven't done it.

I believe that the reason is that money will not solve the problem. It's meetings like this and you people that can talk to each other and focus on ideas, just simple, logical ideas, and change the dialogue, change what America talks about today, and I think we can solve our problem.

At any rate, I think I digress. By the way, if you are here because you want to enjoy the breakfast and lunch and the camaraderie and you think you are not going to work hard, then you haven't met Karen and her gang. You will be challenged today. You are expected to work hard. We need, obviously, to make sure that each of us is heard, that dialogue is thorough, that thoughts are completed. But at the end of the day, it's probably getting to the point where we need to stop talking about ideas and we need to start implementing.

I can tell you that, around the world, there are meetings like this going on everywhere, and whenever they make decisions, especially in the far East, to move forward, they just do it. I was in Xian recently, I was talking to the mayor, and he said, "We are having is a problem with education and with housing." "What's your solution?" He said, "We're building eight more universities," on top of the 96 they have and moving these people here and these people here and those people here. And it will be done in two years. We sort of don't focus like that.

And, by the way, lest you think I'm jealous of the far East education system, they have no patience for any Special Ed. or learning disability. So I hope we don't go in the direction they are going, but we need to know they are our competitors, and that's what they are doing, and they are doing it all day.

I am pleased to introduce Mr. Mark Roosevelt. I don't know how many of

you have had an opportunity to meet him. He's more than forward-thinking. He is visionary. He has no right doing what he is doing. He is not trained in education. He is a lawyer by trade. He has been an elected official. He is a great orator. He is really trying to make an impact on a system that's desperate for help. He has had to close 20 schools already. He has introduced a performance -- paid for performance compensation package to his principals. He has brought a team of experts, and he's always interested in advice. And we are always more than willing to give it to him!

(LAUGHTER)

Mark, I'd like you to come up here. I'd like to thank all of you for coming today and really encourage you to open your minds and your hearts and understand this battle needs solved today. We can't wait till next week. I think that's the attitude Mark has. And, again, I welcome you and I welcome Mark.

(APPLAUSE)

>>MR. ROOSEVELT: Good morning. That was actually quite sedate for David, I don't know if you realize. David and I have known each other a long time. We used to play basketball against each other in high school.

(LAUGHTER)

What is funny, Karen? Yeah, David, she doesn't think you played basketball!

Good morning, everybody. It's a pleasure to be with you, and I wish I could be with you all day. Instead, Derek -- Derek Lopez -- our Chief of High School Forum, will be with you all day. I don't quite understand. I have to go back to our cabinet meeting; Derek gets to skip it.

I also want to introduce Bill Isler, who is the President of our School Board. My salary review is coming up soon. Bill has a family, a lovely wife, Marty, your brilliant son James --

(LAUGHTER)

I have been given eight minutes, but I will try to be even briefer, because in my business -- and I'm not a flatterer, those of you who know me know that -- it don't get no better than Daggett. He gets it. He helps other people get it. And, I guess, if I had to be negative, folks, man, not enough people who count, unfortunately, even despite what David said, get it. Follow this presidential campaign. I have my own candidate; I'm sure you have your own candidate. But how much have you heard in this campaign that really speaks to what is causing America to lose ground against our international competitors? Almost nothing.

And, in fact, Broad and Gates and others have been putting 50 million dollars into a campaign called ED in '08, which was supposed to have brought education to the fore in the campaign. It hasn't done so.

I'll just do my own quick schpiel on that and talk about it and then give you Daggett, which is what you will really need.

We don't have a job crisis in this country, we have a skills crisis. We don't have a job crisis in Pittsburgh so much as we have a skills crisis. We import other people from other places to do jobs in Pittsburgh, which makes absolutely zero sense, considering the folks that we have.

The political dialogue, the programmatic realities, are not meeting the substantive realities of the situation. And we live in an economy that is now relentlessly cruel to undereducated people. Relentlessly cruel to undereducated people.

So, after 40 years up until, maybe, I don't know -- Mr. Daggett would know better -- of making progress on the racial economic gap, on wealth inequality, for the last 20-some years, we have been in reverse. And unless we do something about it, it's going to accelerate even more.

We are watching the income gap between Africans and Latinos increase

rather than decrease -- I mean versus white folks -- and it's because of skills.

It's because in this economy, if you have a high school degree, that doesn't mean anything. Or if you're a high school dropout, there just aren't places that you can go anymore to earn sixty grand with good benefits to bring up a family.

Those jobs are gone.

And regardless of what gets said in Michigan during primary season, they are not coming back. So what are we doing about it? David is right, this has been on the forefront of the national agenda since the Nation at Risk, it's been a quarter century, and we are still losing ground.

Folks, if you are tipping-point theorists -- and when Dr. Daggett does this presentation, he gives you a whole lot of truth and then tries to give you a little dial-up of optimism. But let's be honest, if we don't make dramatic changes and make them fairly soon, we are looking back from post-tipping-point, folks. We are not approaching the tipping point; we are looking at it from the other side.

So, in Pittsburgh, we are doing aggressive -- I mean, David, I would love it if you would run for school board, because I think you would say we are not moving fast enough, which is probably unfortunately true. We are moving as fast as we can.

Dr. Daggett is famous for rigor and relevance. We are working very hard to put rigor and relevance into our school system. But we are also focusing a lot on expectations, which would be the third thing I would add to that. Folks, we stopped about 20 years ago having fair, ambitious expectations for urban children, especially kids of color. And that is bigotry.

You know, in the suburban communities, people talk about the homework crisis, kids are doing four hours of homework, it's interfering with the violin lessons. In my community, I meet with the kids, and some aren't asked to do homework, some don't do homework. It's wrong.



One of the messages we have to do and change is a complicated discussion. When you start talking about change, that hits people in ways they don't want. But we need to work harder. Our school systems need to work harder and smarter. Our administrators and teachers need to work harder and smarter and have better expectations. And our parents need to value education more, and our kids need to work harder. We live in a culture that celebrates swagger over work and celebrity more than anything. And those are the messages that we send our kids, which are not the right messages.

So we are thrilled in Pittsburgh, we are lucky in Pittsburgh, we are blessed in Pittsburgh, to have support, not only from the Jewish Healthcare Foundation, which has been very supportive of work that we're doing to try to make career-to-work possibilities for our kids in the healthcare profession, and we are greatly going to expand it.

We have with us today Charlestta Deason -- is that the right pronunciation?

>>DR. DEASON: That's fine.

>>MR. ROOSEVELT: From DeBakey High School in Houston. I think she will have an announcement fairly soon about joining us in Pittsburgh, won't you?

(LAUGHTER)

Because we need to have a similar type of school here. And you'd be the perfect person to come up and do that with us.

We have been given so much, but the big thing we have been given in Pittsburgh is the Pittsburgh Promise. And, folks, do not underestimate this. We are not good enough at celebrating things in Pittsburgh, but we will be that city in this country that says to every single one of our public high school graduates in the city, not just for the next 10 years, but in perpetuity, that if you graduate high school with adequate academic success, we will guarantee you have the money

to go to college. Not two thousand dollars, not one thousand dollars, but ten thousand dollars a year for college if you can pass a graduation exam that shows you are prepared for college, which is part of the thing.

That is a tremendous gift from the Pittsburgh community to our children. And now what it is up to us to do is make more and more of our kids what we are calling Promise Ready. We are going to build everything around the Pittsburgh Promise, around making our kids see that education after high school is an essential part of life. And, by that, we do not necessarily mean a four-year liberal arts education. We may mean technical schools of all different kinds and variety.

But as Dr. Daggett will tell you, the requirements for that education -- and as Julia Stewart, who runs this program for us in Pittsburgh, will tell you -- are extremely similar, if not in some cases higher than they are for a liberal arts education.

So there is nothing about career and technical education that gives kids an opt-out from doing the work in high school that is necessary to become literate and competent with numbers.

So we are very, very, very excited about what we are doing. We are very grateful to all the support that the community has given us. It's hard work. We are headed in the right direction. It's going to take more time than we would like, but that's the nature of the work.

And I thank all of you. I look out and see so many of you who have done so much to help us, and we are very, very grateful.

Enough out of me. Bill Daggett. I get -- I'm on a lot of e-mail groups with educators around the country and other people, and if I get one more e-mail from someone saying, "Have you seen Daggett's presentation? I just saw him in Memphis or in Houston" or in something.

There is a lot of buzz about Bill Daggett. And the reason is, he gets it. And

he gets it deeply, and he has a way of communicating to people how essential this is. And the other good thing about him -- and this really matters when you're Mr. Doom-and-Gloom -- is he's funny!

(LAUGHTER)

He is actually very funny. You got to be funny, folks, when you're talking about the realities of how much we have slipped and how much we are going to have to do to regain our footing.

He is a change agent in the honest and true sense of that word. He came to Pittsburgh to kick off our high school reform effort about two years ago, and we had about 600 people at the O'Reilly Theater; our principals, a lot of senior people in the Pittsburgh Public Schools, a lot of teachers, and they were blown away. I had been trying to get them to see how much we needed to change. Daggett did more in that three hours than I had been able to do in the previous three months.

So, Karen, as usual, you've got the right guy here. And it's my pleasure to introduce to you with the phrase that I think matters more than anything else in American life today: A truth teller, Dr. Daggett.

(APPLAUSE)

>>DR. DAGGETT: Thank you, Mark. Good morning to everyone.

>>AUDIENCE: Good morning.

>>DR. DAGGETT: You can do better. Let's try again. Good morning!

>>AUDIENCE: Good morning!

>>DR. DAGGETT: Thank you. I'm delighted and honored to be here.

Mark, thank you for those very kind comments.

Let's begin with an observation. Number one: I am never politically correct. Maybe Mark isn't either, for all I know. So if you don't like what I say, be glad by the end of the day you never have to see me again. If you like it, at least

embrace it.

And let me tell you how I began a speech just recently. I had a group of governors, and if you have a lot of governors, you have a lot of media. So I began my presentation that day by saying, "I'm sick and tired of the media and the political arena in this country of beating up on public education!" Folks, this nation has made a sport out of it.

And let me begin my observation to all the non-educators in the room. Our schools in this country are not getting worse. We have graduated, nationwide, a higher percentage of 18-year-olds last year than any year in our nation's history, and most people don't know that. We did it despite the fact that those kids had more state standards and state tests to take than a decade ago God thought could be created!

We did it despite the fact that, as a nation, we have been more diversified and with diversity throughout the nation, with an absolute change to schools.

So a more complex group of kids with more requirements. And we are graduating more of them. So why the rhetoric about failure of our schools?

You need to know my personal bias. My personal bias is our schools are not failing. Here is the problem: The world outside of school is changing four to five times faster than the rate of change inside a school. And what we have in this country is not a failing school system by traditional standards. We have a system that is unable to keep up with the world beyond school. We have a skill gap and, Mark, you made the observation, we have a skills gap. Absolutely correct.

Our kids, in some ways, are the best educated ever, but simultaneously the worst off. And I'm worried about those kids being the worst off. Why? Because I have five children and ten grandchildren. Now, by the

way, my kids are older than your kids, because my kids are older than many of you in the audience. My kids are 34, 35, 36, 37, and 38. You can laugh if you want!

(LAUGHTER)

All I can tell you is it's better than 11, 12, 13, 14, and 15!

(LAUGHTER)

Okay. And I actually like to evaluate schools, and I'm going to ask you this morning to do something that's maybe surprising to you. I'm going to ask you not to think about businesses. You know why? You got a great, great report. Simon prepared a report I hope you have read. It is as good as any I've seen. It lays out with clarity the issues in the healthcare field that kind of permeate the American workplace.

It is a great report, and we have tons of people in the breakouts that are going to be able to articulate what they believe about the skill gap, the skills kids need. I'm going to ask you to look at it from a different perspective in my opening comments.

I'm going to ask you, instead of thinking about the skill gap, and what happens to -- what business needs -- I'm going to ask you to think about students. See, I want to suggest to you, the biggest single change, Mark's teachers in his School District change, and teachers in every School District in this country face, is the kids are fundamentally different. The 21st century learner is truly different than the 20th century learner.

These kids are different. They are wired differently. And we need to understand that. I'm going to use a computer model. Everybody remember the term "input, processing, output"? If we look at schools, the input is the kids. I want to suggest to you they are fundamentally different.

Output, this report lays it out. The world is changing. Mark made reference to it. You can't leave school today unskilled and be able to be support yourself in

a family. Input is different, output's different. The problem is processing.

I mean, you want to have a revolution in an American high school? Try to change a bell schedule and see what happens to them!

(LAUGHTER)

Try to change the school calendar by two days. We'll have four committees over six months to discuss all those issues. Mark, try to close the schools. See what happens to you! Our schools look more like 1980 than unlike 1980. That's the issue.

It's with that push that led me now through years ago to chair a national group. I think we have a representative from the Council of Chief State School Officers. Every state in the country has a state Superintendent or in your state a State Secretary of Education or a Commissioner of Education.

The 50 are called the Council of Chief State School Officers. That organization and my organization came together three years ago and we decided to try to go out across America and find the nation's highest performing schools, given their social economic characteristics. And, I say, given social-economic characteristics, because if you give me poverty, nine out of ten times I'm going to give you a lower performance.

So we took all 16,000-plus high schools in the country, broke them into three categories: Put a third in poverty, a third average wealth, a third affluent. Put very detailed rubrics to evaluate schools. We are very, very fortunate to get substantial financial support from the Bill and Melinda Gates Foundation. We put research teams together, we went out across America, and we found the nation's highest performing schools and we evaluated them.

And we found two things. You can have a great elementary school in America and a bad high school, but you will never have one of the nation's best high schools unless you got one heck of an elementary, middle, and high school

program defined.

So, one other twist I'm going to give you today. If you are here to talk about high schools, you got to talk about K-12. You cannot talk about high schools in isolation.

Second thing we found: Highest performing schools in the country, they are usually based upon tradition, charismatic leadership. A number of things that are not transferable, necessarily, to another community.

Every community's got their own DNA. Every school's got its own DNA. That led us now to 18 months ago initiate a second national study which, in some ways, may be more important for this discussion today. And that is, not the nation's highest performing schools, but the nation's most rapidly improving schools.

Schools that each year seem to be making -- using the business term -- continuous progress. Substantial continuous progress. Why is that a better model for you to look at? Because everybody can approve. You can't necessarily become the top 25. But every school in America can be randomly improving.

And when you look at it, you begin to learn certain messages, and central to those messages are things like health career programs seem to permeate those schools. Workforce development programs permeate those schools. And I'll show you why in a few moments. And what you are going to find is that there are a lot of different kinds of programs, and I listed a few up on the screen.

And here's the problem: In this room -- now I'm going to begin to get politically incorrect -- in this room, we have advocates for every one of these kind of programs. And, forgive me, I don't think you ought to start talking about those programs.

See, what I would suggest to you, I can find marvelous examples of

extraordinary successes in every one of them, and can I find total failures in every one of these.

The issue is not the organizational structure you necessarily put in place. The issue is what happens at the point of contact between teacher and student. The issue is instruction. Good instruction. Good instruction that is academically rigorous, but also relevant.

And once you are committed to rigorous and relevant curriculum, you can create successes in a wide variety of programs. I'm afraid when you get to your breakouts, you are going to be debating, "Is school-to-work better than tech prep; is tech prep better than traditional career tech voc. ed. programming; should we have a voc. ed. program or should we have a charter school?"

Folks, we spend our whole time talking about the institutional battles. And I want to suggest to you, it's a much lower priority than making sure you figure out what happens at the classroom level.

As we have watched the high performing schools, they basically go through three stages, and whatever you are going to do in health careers, you need to look at three stages.

First one is: Why do we need to change? Why isn't the old programs -- why aren't they good enough? What do we need to change? And then, ultimately, how do you do it? I'm going to begin with the "how."

How many in the room have a son or daughter who is one of the following: They are a pre-teen, a teen, or in their early 20s? How many in the room have a child of that age?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Hands way up! Good.

All of you that just raised your hands, how many of you hope that some time in the next decade the person you just raised your hand about becomes



independent?

(LAUGHTER)

>>AUDIENCE: (RAISING HANDS).

>>DR. DAGGETT: Now, look at the five levels of what I call The Application Model, and please read it for a moment.

What two numbers on this list will the students need to become competent at in order to become independent? Is it one and two, or four and five?

>>PARTICIPANT: Four and five.

>>DR. DAGGETT: Four and five. I spent 11 years of my life heading up a division curriculum in testing in the state of New York. Anybody ever hear of the New York State Regents Examination?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: That's my background, folks. I understand state testing, therefore I understand PSSAs in your state. I understand your state testing program and understand it well. You have -- sorry, educators, if you don't want to hear this -- you have a pretty good state testing program, for what state tests can do.

Because what two numbers on this chart do state tests measure?

>>PARTICIPANT: One and two.

>>DR. DAGGETT: One and two or four and five?

>>PARTICIPANT: One and two.

>>DR. DAGGETT: One and two. And what two numbers do the kids need to be independent?

>>PARTICIPANT: Four and five.

>>DR. DAGGETT: Four and five. Doesn't mean there is anything

wrong with the test. You can't get to four and five if you don't have one and two. You cannot apply knowledge you don't have this. But if knowledge is all you have, we are going to see the impact of it.

In just a few minutes, we're going to do something that's going to surprise you. I have a whole bunch of kids that are going to walk into this auditorium. They are all college-prep seniors. And what they have in their hands are three different sets of tests they have recently taken: A college prep exam in mathematics -- twelfth grade college-prep students -- one in science, one in Social Studies.

For the educators in the room, they are going to ask you what you taught when you began your career. For the non-educators, they are going to ask you what your college major was. Then they are going to give you a twelfth grade college-prep test they have recently taken in a discipline you did not major in.

(LAUGHTER)

We are going to ask you to take it for 30 minutes.

I've got some teachers who have agreed to take the test. I think you know we have the Press in the room.

(LAUGHTER)

They have been very supportive. We have agreed tomorrow to release your test scores by name.

(LAUGHTER)

Good news! I'm only kidding! Suddenly everybody had urgent phone calls to make!

(LAUGHTER)

Let's be completely honest. How would you do? Good or bad? How would you do, folks? If you think you would do well, try it. But you know what? You did it when you were in school! You know how I know that? You wouldn't be

here today if you didn't.

Why could you do it back then but you can't today? Let's complete the statement. If you don't use it --

>>PARTICIPANT: You lose it!

>>DR. DAGGETT: Ladies and gentlemen, what is career-based programs all about? It's very simple. It's taking academic skills that traditionally have been taught to level one and two and teaching them to level four and five. Because the flip side of it is -- if you don't use it you lose it -- the flip side of it is if you use it and learn how to apply it, you retain it.

It's a methodology we are talking about here. It's a way you develop deep and rich working knowledge of critical skills and knowledges.

Now, to drive that home, let's go back. How many of you were in your present careers way, way, way, way back in 1983?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Doesn't seem so long ago to some of you in this room. Anybody know what national report came out 25 years ago this month about American education?

>>PARTICIPANT: Nation --

>>DR. DAGGETT: The Nation At Risk.

>>PARTICIPANT: -- At Risk.

>>DR. DAGGETT: Twenty-five years ago, we were really frightened as a nation because one nation had technologically passed us by. Anybody know what nation that was that, technologically? In '83, Nation At Risk, had passed us by and was beginning to economically overtake us because of their technological advancements? Japan. How many in the room are old enough to remember the 1960s?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Okay. Some of you are clearly too young.

(LAUGHTER)

And a couple back here didn't raise their hands must have been doing things in the '60s that made the whole decade look like a blur to them!

(LAUGHTER)

What did 'Made in Japan' mean in the 1960s?

>>PARTICIPANT: Junk.

>>DR. DAGGETT: Junk. Shoddy workmanship. What did it mean by 1983?

>>PARTICIPANT: Quality.

>>DR. DAGGETT: World class! How did that do it in two decades? 1983? Nobody was talking about India and China. Today, while they don't play by our rules, they are becoming our fiercest economic competitors.

>>PARTICIPANT: Yeah.

>>PARTICIPANT: Uh-huh.

>>DR. DAGGETT: How did they do it in two decades? Ten years from today, India and China are not our fiercest competitors. All you got to do is look at their demographic one-child-per-family policies and you begin to see they got some extraordinary issues.

I'm willing to bet anybody that wants to bet me, ten years from today we are standing in this room, we are talking about Indonesia and Vietnam who are economically going to chew us alive more than Japan did in '83.

But, America, our schools still look like '83. I'm sorry. And I'd like to respectfully remind this audience that no nation since Roman Empire days has remained the preeminent economic world power for more than a hundred years. 1600s, it was the Spanish. 1700s it was the Dutch. 1800s, it was the British.

1900s, it was America.

But you know what today's millennial children believe? They believe it is a birthright -- I will show you some survey data -- that they shall have at least what mom and dad have, if not more. And, forgive me, sometimes we forget how affluent we are as a nation.

Are you aware that we spend, in this nation, right now, more per year per pet cat and per pet dog than the world spends per year per child?

>>PARTICIPANT: That's true.

>>DR. DAGGETT: We just take it for granted. Well, high performing schools -- we got to do some things differently.

It led to them saying, "But our kids don't seem to know what to do when they don't know what to do." And these are the kids that do well in school. Our kids don't know what to do and they don't know what to do.

What is a career based program about? It is, forgive me, it's teaching common sense.

>>PARTICIPANT: That's right.

>>DR. DAGGETT: So the application of knowledge borders on common sense. Let me show you a little short video and, as you watch the video, I want you to think whether you can identify a couple people you might know who could be right on the escalator with these two people.

(FILM)

>>DR. DAGGETT: Can you turn that up back there, please? Got to turn the volume up.

>>STAFF: It's up.

>>DR. DAGGETT: Okay. Well, I'm not sure why it's -- let me -- he just said, "Oh, that's not good!" She said, "Oh, I don't need this, I'm already late."

(LAUGHTER)

And he says, "Do you have a telephone?" She says, "No." He then says, "Help! There are two people stuck on an escalator and we need help!" And she just simply responds, "Help!"

(LAUGHTER)

And he says, "Well, guess there is nothing else left to do but to wait."

Forgive me. How many of you can think of somebody you work with when you see these two people?

(LAUGHTER)

Okay. If they are with you, point to them so I know who they are!

(LAUGHTER)

What we are hearing is a lot of the kids -- especially the kids who do well in school -- you know what they do? They do school. And that led to this movement that seems to permeate a lot of schools across the country called rigor and relevance.

And it begins with this. How many in the room have an education background?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Anybody recognize this by a different name?

Bloom's Taxonomy. It's like one-on-one days. We learned that there was six levels of learning. By the way, Bloom never called it Bloom. He called it Knowledge Taxonomy. For the knowledge education people, think of it as academic rigor, from low level to high. Second taxonomy is the taxonomy I just gave you.

What is rigor and relevance? It's putting rigor or Bloom's up the left-hand side, from no rigor to very high rigor; from no application on the bottom to applying knowledge in real world predictable problems and situations.

Break it into four quadrants. I want you to try to remember where

these four quadrants are. Because as the day unfolds, I'm going to ask you, on occasion, are we talking about an A quadrant here or a B or a C or a D.

A is low-level knowledge with no application. We have, under contract, evaluated every state's testing program in the country, including Pennsylvania's. Virtually every question on your state program is in the A quadrant. It's basic knowledge with no application. And why is it that? That is the state of our paper-and-pencil testing.

B is low-level knowledge with a lot of real world application. That's traditional vocational education. A lot of real world application of basic knowledge. "Vocational education" in the old days; today called "career and tech ed."

C, very sophisticated knowledge without much of any relevance to it. It's called college prep.

(LAUGHTER)

Sorry! D, very sophisticated knowledge with a ton of real world application.

I want to suggest to you, what your career based programs need to be, whether it's health careers or any other areas, you need to get kids to D. Right now, the state test has got us caught in A. You got to get them to D.

Now, with B and D, application of knowledge, real world problems, it works better. Let me show you why. Here are four standards right out of Pennsylvania's ninth grade math standards, your state. I want everybody in the room to read them. These are Pennsylvania ninth grade math standards required in this state.

Everybody got them?

I'm going to ask you in a moment to raise your hands. Anyone who would have a hard time doing one or more of these -- and I'm not embarrassed to tell you

I'd have a hard time with a couple of them.

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Somebody who doesn't raise their hands, we're going to have a little fun with you. How many in the room have a hard time doing one or more? Don't be shy.

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: This is ninth grade math, for all of you that say that we have such terribly low standards.

Let me give you four other ones. I want everybody in the room to read these. How many find these four easier than the previous four?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Almost everyone in the room. Ladies and gentlemen, I just gave you the exact same four math standards twice. The first four were math in isolation, disconnected from anything except math itself. The second four were anchored in real world, everyday applications that people understand.

This is the most important one-liner of my presentation to you: Relevance makes rigor possible for most kids. It's that simple. Relevance makes rigor possible for most kids.

What is a health careers program about? Bringing relevant applications to academics. By the way, it's not only careers. Are there kids that love the arts? Can I teach math and science through the arts?

>>PARTICIPANT: Yes.

>>DR. DAGGETT: Can I teach them through health applications?

>>PARTICIPANT: Yes.

>>DR. DAGGETT: I got a little six-year-old grandson who lives in Charlotte, North Carolina, who thinks he's the next Ben Roethlisberger. He loves the



Pittsburgh Steelers and he loves football. He is in the tenth percentile in height and weight, but he thinks he is going to be a professional football player.

(LAUGHTER)

Anybody in the room ever play football?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Are you aware there was never a pass play in football that is not a math problem?

His first grade teacher has kids being able to solve this problem: Go out 20 feet, go to the left 25 degrees, and I'll hit you on four. Anybody's ever played football knows what I'm talking about. That's a fifth grade math concept that his first grade teacher who has all the little boys who love football understanding.

I got a 7-year-old grandson who loves the arts. He's got a teacher teaching math and science at a very advanced level through the arts.

See, what I want to suggest to you is, be careful. Be careful in how you design your program here. What is important is not a job-specific skill for a teenage student. The job specific skill will change before the kid's out of school.

What will not change is the importance of understanding increasingly sophisticated academics and knowing how to apply them. And how do you teach this sophisticated academics? You teach it through an application that excites the kid.

Relevance makes rigor possible. That's why the issue is instruction; not the latest name of the program you may stick up. See, those -- those debates are usually about the adults.

By the way, why does this all work? Because most people are better at B and D than they are at A and C. It's that simple. Most people are better at B

and D than they are at A and C. Most people are better at the application of knowledge than they are theory in isolation.

Now, there are some people better at A and C, but they are not normal people --

(LAUGHTER)

-- and you know what they become!

>>PARTICIPANT: Mathematicians.

>>DR. DAGGETT: University professors! Sorry, professors in the audience!

Now, if you think we are teaching to B and D, let me show you a survey called Student Voice. We have done it with a group called the Qualia Institute and in the Council of Chief State School Officers just slightly under 500 thousand students this year in this survey.

"I enjoy school." 500 thousand kids nationwide! "Teachers make school an exciting place to learn!" Would you want to be there? "School is boring." Last one, "Learning can be fun!" However, "My teachers have fun at school." No way!

(LAUGHTER)

See, a health careers program would turn that data around if the kid loved health careers, wouldn't it?

"I am encouraged to be creative at school." "My class helps me understand what is happening in the -- in my everyday life."

They see no connections. It's become all A and C. It's become all A quadrant. They are bored out of their ever-loving minds, is what the kids are telling us.

"I put forth my best effort at school." "Getting good grades is important to me" -- I'm just not going to put forth my best effort to do that! By the way, you will

notice that all the data is much worse consistently -- is much worse -- for males than it is for females, which is a real crisis in this country.

“School is a welcoming and friendly place,” “Teachers care about my feelings,” “I’m proud of my school.” The data goes on and on.

One of the things you might want to talk about in your breakout is the importance of listening to students. Now, I’m not saying that students know always what’s best for them. That’s not what I’m saying. But I think we need to understand where the kids are, what they believe. Because if we don’t turn these perceptions of kids around, you’re never going to turn your schools around.

Change process. Let’s go back to ‘why.’ Why do I need to change? I think you have to consider two things. It’s that input/output/processing. What will students need? You’ve got it, and we got people in the room that understand it.

I ask you to also understand the 21st century learner. These kids are different. How different are they? This time I’m going to actually give you a test. This one takes 12 seconds.

We have used this test with over a hundred thousand adults in the last several months in the country, and we have also used this test with elementary school students, about thirty thousand of them. As I give you the test -- and some of you have heard me in the last year, you have seen the test, you don’t count. How many in the room have seen this test?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Okay. All of you who have seen it, you don’t count. You just watch the others.

All I want you to do is one thing for 12 seconds. I’m going to put two basketball teams up here. One team has got white shirts on, one team has black

shirts on. For 12 seconds, you got to do just one thing and one thing only. You got to count the number of passes the team in white shirts make. Which shirt?

>>PARTICIPANT: White.

>>DR. DAGGETT: White. Okay. Now, I caution you, it moves really fast. Okay? And when I turn it on, right over here on the left-hand side, there is going to be a pass halfway in motion. Count that as pass number one. Okay? Alrighty? What shirted team?

>>PARTICIPANT: White.

>>DR. DAGGETT: White. Here we go. Watch closely, because it moves fast.

(FILM)

>>DR. DAGGETT: Okay. Hey, Robert, could you tell your hundred colleagues what you thought about my gorilla?

>>PARTICIPANT: What you thought about your gorilla?

>>DR. DAGGETT: No, what did *you* think about my gorilla?

>>PARTICIPANT: What gorilla?

>>DR. DAGGETT: You didn't see my gorilla? Can you help him, James?

>>PARTICIPANT: Well, actually I thought the gorilla was a school administrator.

(LAUGHTER)

>>DR. DAGGETT: Okay. Leon, what did you think over here? Is it Leon?

>>PARTICIPANT: Loren.

>>DR. DAGGETT: Sorry, Loren.

>>PARTICIPANT: I've seen it before.

>>DR. DAGGETT: Of those who have never seen the video before,

those who have never seen the video before, how many of you saw the gorilla?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Okay. About 7 or 8. Let's try again.

(FILM)

(LAUGHTER)

>>DR. DAGGETT: James, did you see him this time? Huh? And Robert, did you see him? How many in the room think the second movie was different than the first?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Same video!

All right. Those who have seen it before? Just replayed it. Over a hundred thousand people watched it. About five percent of adults see the gorilla and get the number of passes correct the first time they see this video. About five percent.

We have shown it to about thirty thousand elementary school children ages 5 to 10. About ninety percent of 5- to 10-year-olds see the gorilla, get the number of passes correct, first time. Adults: five percent. Kids: ninety percent.

Why? I'll come back. Let's see how you did on counting, at least. How many time of you got 11 or 12 passes? Good, a few. How many counted 13? 14?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: 14, 15? At least, you got to admit, the group is also fairly challenged in basic counting.

(LAUGHTER)

How many counted 16?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Okay. Those that counted 16 were all drinking heavy last night! The answer is 15.

How many people who have never seen this video before, how many of you counted 15 passes and saw the gorilla? Everyone just stand up just for a second.

>>AUDIENCE: (STANDING)

>>DR. DAGGETT: Okay. First of all, three of you. So out of about a hundred or so, less than five percent. Those three people are the only people functioning at the equivalent of a 5- to 10-year-old!

Now, why is it, why can the kids get it and we can't? How many of you have tried to play a young person in a video game? Can you come close to competing?

>>PARTICIPANT: No.

>>DR. DAGGETT: Have any of you had this experience with a young person? They have been talking to you, looking you straight in the eye, and text messaging at the same time? You know what the kids spend the weekends doing? Multi-tasking. You know what they are doing after school? They are multi-tasking. They are playing with the videos, they are text messaging, watching a little TV at the same time.

They are doing three or four things and all that technology! They have a lot of graphics! Pretty exciting, pulling information from a lot of different places! Bang, bang, bang! All exciting!

And then the next morning they show up at a class and they get a teacher who, to them, seems -- slow -- and -- boring.

(LAUGHTER)

Have -- I -- made -- my -- point? Would -- you -- like -- me -- to --

>>PARTICIPANT: Stop!

>>DR. DAGGETT: Stop?

(LAUGHTER)

Sorry! I'm in charge!

(LAUGHTER)

Be -- obedient -- because -- you're -- with -- me -- till --

(LAUGHTER)

-- June!

Ladies and gentlemen, don't get angry with me. We have lost a generation of kids in this country. They live in a technological world. They interact with it constantly. In schools, we have confused motivated students with obedient students. You're not looking for motivated kids; you're looking for obedient kids.

How do I know that? I looked at the survey data of your kids. They are bored out of their ever-loving minds! And we have a tendency to do what every generation has done.

In fact, my wife recently said I have become my grandparents, as I look at my grandchildren, about what they should be doing. See, these kids live in a technological world.

1983, the Nation at Risk, we knew we were behind as a nation. Japan passed us by, but I remind you, 1983, we didn't even have e-mail yet. It wouldn't even become a concept for eight more years. Couldn't have e-mail until there was a World Wide Web. An Englishman, his name is Timothy Berners-Lee, created the World Wide Web that made e-mail possible. We didn't have web pages. They didn't exist. Google wasn't even a word yet.

IPods were two decades away from being created and we knew we were behind. Laptops, the first one wouldn't come out for five more years, and it would weigh 34 pounds!

Digital cameras didn't exist, Doppler Radar didn't exist, cell phones didn't exist. Dent cards didn't exist. Today's children cannot imagine a world without it. They are truly natives to that technological world. You and I are, at best, immigrants. Let's fast forward to the turn of the century. And, by the way, the turn of the century is not 1900.

(LAUGHTER)

The turn of the century is 2000. Blogs didn't exist! 72 percent of teenagers today are on a blog at least once a day. Most common place kids go for information, singly outstrips every other source, is Wiki's. And, forgive me, there are some amongst you who don't even know what they are, literally, and we are here to design a program for those kids? It's the Wikipedias.

By the way, just because it's in Wikipedia doesn't mean it's correct.

>>PARTICIPANT: Of course!

>>DR. DAGGETT: Yeah, to the kids, of course; but reality, no!

What are the skill sets you need?

Tagging didn't exist, text messaging didn't exist, Myspace didn't exist. By the way, Myspace, 78 percent of 16- to 18-year-olds have either Facebook or Myspace. See, to you and I, we think of technology and we think of words. We think of e-mail. We think of web pages. To today's youth, technology is social networking. E-mail is actually on a dramatic decline with young people; are you aware of that? It's all social networking. Do we understand the implications of that?

By the way, you are going to design an education program and not understand that whole world? PDAs didn't exist, we hadn't broken the gene code yet.

To kids, that's their world. And then they show up. They get ready to be prepared for that world in a classroom that looks like this.



What are career programs all about? It's moving the classroom from this to this.

(Indicating on screen: 'Input, processing, output.')

It's connecting up with the kids, with relevant skills that are transferable. And they work. We have been pushed by the Nation At Risk, the No Child Left Behind. But, I'm sorry, folks, those skills more look more like 1980 than not like 1980. What are the skills process, what is it they are going to need?

Well, they are going to need a rich and deep background in science. The problem is, the real world doesn't function anymore in biology, chemistry, physics. It's biochemistry. It's nano-technology. The problem we got is we are regulated, certified, tenured, and contracted around a system well-designed around the 20th century.

If you get serious about a career-based program, you are going to begin to say, you know what? The science doesn't quite line up in the real world with the science I took when I was in school. And, by the way, the science I took in school was all A and C; health careers is all B and D.

At least a substantive curriculum change. Mathematics is very important, but I suggest to you it's the application of mathematics. Technology, I mean, folks, the kids know the technology better than you and I do. What they don't understand is how to effectively use it in terms of applications, in terms of ethics, in terms of morals. They don't understand it. And we are not even talking about it. In fact, how many in the room own a PDA?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Or a Blackberry? Anyone got one with them?

>>PARTICIPANT: Yes, sir.

>>DR. DAGGETT: That you could hand me? Thanks, sure. I'll take

more, I got five kids, ten grandkids!

(LAUGHTER)

>>DR. DAGGETT: How many in the room own something like this?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Great. Can you get mail on them, folks?

>>PARTICIPANT: Yes.

>>DR. DAGGETT: Total Internet access?

>>PARTICIPANT: Yeah.

>>DR. DAGGETT: Okay. Where are the educators in the room?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Do you let the kids bring these in and use these when they are taking the PSSA's, the state tests?

>>AUDIENCE: (LAUGHTER)

>>PARTICIPANT: No!

>>DR. DAGGETT: For very good reason. Because what might they do if they had these when they are taking the state tests? What could they do?

>>PARTICIPANT: Cheat.

>>DR. DAGGETT: Exactly. How would they cheat?

>>PARTICIPANT: Look up information.

>>DR. DAGGETT: They'd text message each other. What else?

>>PARTICIPANT: Access the Internet.

>>DR. DAGGETT: They would go online finding the answer. These darn kids might either use resources or work with others!

(LAUGHTER)

>>PARTICIPANT: Didn't see that coming!

>>DR. DAGGETT: Have we lost our ever-loving minds? What do you want kids to do once they enter the workplace?

>>PARTICIPANT: Use resources and work with others!

>>DR. DAGGETT: In school, we call it?

>>PARTICIPANT: Cheating!

>>DR. DAGGETT: Folks, we have a problem. What's your health careers programs about? Teaching kids how to work with others. Teaching kids how to use resources.

Your health careers program is to teach you how to move beyond the state tests. Not to be better at the state test; to move beyond it. See, the state test should be the beginning line; not the end line of public education. But we have made it the end line.

Interpersonal skills will be key, decision-making will be key. Got to teach them to be B and D.

One more piece and I will wrap this up and we move to a panel to react and get you involved in the discussion. Let me ask you, is reading important today? Yes or no?

>>PARTICIPANT: Yes.

>>DR. DAGGETT: A little or a lot?

>>PARTICIPANT: A lot.

>>DR. DAGGETT: To educators in the room, I bet you you know the research on reading. You want to do a good job in teaching reading? You teach reading in the 'blank' area. What word did I leave out? Anyone in the room?

>>PARTICIPANT: Content.

>>DR. DAGGETT: Content. Every educator knows the research. See, in the health careers, they are going to have to have a working knowledge of vocabulary, aren't they? I can't teach that working knowledge of vocabulary until

I've taught the program.

They won't have the words. They will not only not have the words, they won't have the conceptual framework that those words fit within. It's called teaching reading in the content area.

Ladies and gentlemen, every advancing industrialized nation in the world that is now beginning to pass us by has taken the research from American education about reading, which says, if you want to do a good job in teaching reading, teach in the content area. I can't teach reading in the content area until they got the content.

Every high school and middle schoolteacher in the nation we are dealing with -- India, China, Vietnam, Indonesia -- every teacher is teaching reading in the content area. Not here in America. We stopped teaching reading in sixth grade.

In America, by every international comparison, we are in the top three countries in the world in reading by fourth grade. Are you aware of that? We are in the top three. Every nation in the world by fourth grade. By eighth grade, we are in the middle of the pack. And by twelfth grade, we are at the absolute back of the pack. Why? We stopped teaching it.

See, health careers is not simply learning health careers. It's learning how to read in that field. It's learning the vocabulary and how to apply the vocabulary. Why is that so important?

There is a process for measuring reading. It's called the Lexile Framework. Lexile. It's a 2000-point scale. If you think of a yardstick, the yardstick has 36 inches in it. An inch is an inch; doesn't matter where the measure falls. Well, a 2000-point scale for measuring reading last year, 75 high schools nationwide, we went in and looked at the eleventh and twelfth grade English language arts class from 75 high schools, including five in the state of

Pennsylvania. We did it with the Council of Chief State School Officers and the Bill and Melinda Gates Foundation, and took everything kids were asked to read to determine what level, and this is where they fell. And that tells you nothing in and of itself.

That's the middle two quartiles. By the way, we use only the middle two quartiles because we don't want to be pulled by extremes. We then followed those kids to college and looked at their freshmen and sophomore courses in literature, see what they had to read in college. Didn't matter if they attended community college, an ivy league school, liberal arts college. Followed the kids into all those colleges, and this is where the materials fell.

Next thing we looked at is all the other high school curriculum, other than English language arts, and all the stuff kids had to read in eleventh and twelfth grade in every other discipline, and this is where it falls.

Ladies and gentlemen, the English Language Arts departments in every high school we have looked at in the country has the lowest reading requirement of any American discipline in high schools.

Now, don't confuse volume of materials with level of difficulty. They read more stuff in English Language Arts, but it's the lower level. And you know what? Few people understood that. People kind of think, well, English Language Arts is some kind of definition of excellence in the area of reading. It is not.

What discipline do you think had the highest reading requirements in American high schools?

>>PARTICIPANT: Social studies.

>>DR. DAGGETT: Social Studies is second from the bottom.

>>PARTICIPANT: Science.

>>DR. DAGGETT: Science is second from the top.

>>PARTICIPANT: Math.

>>DR. DAGGETT: Math is third from the top. Highest reading requirements: Career and tech ed.

>>PARTICIPANT: Hmm...

>>DR. DAGGETT: Career and tech ed. has got the highest reading requirements. You know why? How many of you in this room, to this day, still have your DVD and VCR clocks going 12:00, 12:00? You got the manuals, can't you read?

>>AUDIENCE: (LAUGHTER)

>>DR. DAGGETT: I got a question. Who are you going to put in the health career based programs; kids who are struggling academically? It's got the highest reading requirements. It's got very sophisticated math and science requirements. Because you know what? Forgive me, I bet you a ton of people came to this meeting today thinking about we were talking about a program for somebody else's child, because your child was going to go to a four-year university.

We followed the kids to college, other than English Language Arts. Went to the college Language Arts, into the other disciplines in college. Followed them to the military, entry level enlistees. Now, in the military, they are very prescriptive in what they want, so the white bar isn't very big, but it's quite high.

We then went, 75 communities, hundred parents each – 7,500 parents nationwide of teenagers -- and simply said, "Give us the ten most important things you think your son or daughter needs to be able to read in order to become independent. You want your kids to become independent? What do they got to be able to read?"

>>PARTICIPANT: 1040.

>>DR. DAGGETT: The 1040, David, is the number one thing we got.

The 1040 form! They got to read that to be independent? How about insurance information? How about student loan applications?

>>PARTICIPANT: Consumer credit.

>>DR. DAGGETT: The list is long. This is where it falls.

Next thing we did: 10 employers, each of 75 communities, 750 employers nationwide. We say, "Give us what you want entry-level workers to read." What level worker?

>>PARTICIPANT: Entry.

>>DR. DAGGETT: Entry level. That's where it is. Please compare entry level, personal use in the military, to your high school standards. And we are the only industrialized nation left that chooses to teach reading in our middle schools and high schools.

Health career programs, you darn well better teach reading. Here's the problem. Your teachers don't know how. So before we run off thinking about what we might do, you're going to have to figure out a one-, three-, and five-year professional development plan to train these teachers to teach the skills they need in the 21st century if they are ever going to share them with the kids.

See, when I was a high school teacher, I thought you taught reading by giving reading assignments. I didn't know how complicated it was.

By the way, there is the SATs, ACTs, and Advanced Placement tests. We did that with college boards. Do you understand what I'm showing you?

Higher education has a lower reading requirement than entry level jobs, personal use, and the military. So if you have a son or daughter that's struggling academically and you don't know where to send them after school so they can be successful, you can't let them go to the military, you can't let them be on their own, you can't let them get a job. You got one that's struggling

academically? Send them to higher ed. It's true data.

We have a totally distorted perception. By the way, 20 years ago, the data was the opposite. What's happening to the demographics of this number of young people? Is it going up or down, folks?

>>PARTICIPANT: Down.

>>DR. DAGGETT: Down. Anybody in the room know any college anywhere accepting fewer students now than they did five years ago? Because what are -- what's the greatest single pressure college trustees put on university presidents? Fill the seats!

>>PARTICIPANT: Enrollment.

>>DR. DAGGETT: Because if I don't fill the seats, what don't I get?

>>PARTICIPANT: Money.

>>DR. DAGGETT: I don't get money, I can't keep my institution afloat. So what has slowly, gradually, virtually every higher ed. institution done for ten straight years despite all the rhetoric? Slowly, gradually lowering admission standards. It's called supply and demand. There are fewer students, but I need more of them in the workplace, pushed by technology and global competition. About five years ago, passed higher education in terms of the academic skills that are needed.

I'm afraid we come to the table with a distorted view. We come with a view of the schools we attended and what life was like then. Life is no longer like that. The kids are different. The workplace is different. We need fundamentally different solutions in education.

My hat is off to the organizers. Health career approach, right on the money. But the debate, as I close, cannot be a debate about which type of program should we pick. The debate needs to start with what happens, has to happen, at the point of instruction between student and teacher. Higher skills,



more relevant skills, different delivery system.

And finally, remember, you are preparing young people for a career; not simply an entry level job, and the skill sets are different.

With that, I'm going to ask the panelists to join me up on the table. We are going to ask the three panelists to review with us some of their thoughts. Candace and Peter and Charlesetta.

What we are going to do for a little while now is, I'm going to ask them a series of questions and, after each question, we are going to invite the audience -- first, invite them to interact with each other. And then we are going to ask the audience for any questions, comments, observations you would like to make.

We are going to keep this going till about 10:30. We will take a little break, and then, most importantly, you are going to go off to your breakout groups. And in those breakout groups, that is absolutely the most important part of the day. What we are going to be asking you to do is roll up your sleeves and give as thoughtful advice as you can on a variety of questions. At the end of the day, we'll be coming back from the breakout groups, and we'll get reports out, and then we'll try to summarize what we think we heard you say in the breakout groups.

And based upon what you say in the breakout groups, I'm going to close the session with a suggested plan of action. Next steps, what should you do. But what you should do is not going to be based upon what I just said. Nor is it going to be based upon what our three panelists say. It's going to be based upon what you say, and all we are doing is priming the pump up here.

We have three very, very different type of panelists in terms of backgrounds and experiences. I'm going to briefly give you an introduction of

them, and then I'm going to ask each of them to take a minute or so and just kind of tell us a little bit about what you do. So each of you will see, in effect, how their experience and biases -- we all have our own bias -- may influence whatever suggestions they give us throughout the rest of the morning.

First one is Candace Burns. Candace, welcome.

>>MS. BURNS: Thank you.

>>DR. DAGGETT: Candace is the Director of Workforce

Development for the Dana Farber Cancer Institute in Boston. Intriguing to me is -- Tom Payzant is a good friend of mine, you must know Tom from your previous job. He was Superintendent in Boston.

Candace served as the Director of the Boston Public School Partnership Program, which is sponsored by Mass. General. She had really spent her career in kind of connecting up workforce and education issues.

Our next panelist Peter Stansbie. Peter came the furthest. He is from Wales and is here representing the U.K. He is the Director of Organizational Development for Skills for Health in -- he is from the Sector Skills Council in U.K.

He is a former CEO, and a number of health services areas -- nationally -- and was the national CEO of the National Health Service Program for U.K. earlier in his career. His work is also heavily in the area of workforce connected up to education, especially in the health care area.

Charlesetta Deason, Dr. Deason is the person I know the best on the panel. She runs, in my opinion, one of the nation's absolutely most phenomenal high schools. And that's why Mark, this morning, was trying to say she will come to Pittsburgh. She is not about to leave DeBakey, I would guess. Am I right, Dr. Deason?

>>DR. DEASON: That's right.

>>DR. DAGGETT: Even though Mark would love to have her. She

has been there for 18 years. If you remember the heart surgeon, Michael DeBakey, this school is named after him. It's a marvelous school.

Let me just give you a bit of statistics, and you'll see why it's a marvelous school. 28 percent of the children in that school are Asian-American. 36 percent are African-American. 28 percent are Asian-American. 8 percent are white.

They graduate -- and it's a big high school -- 100 percent of their graduates. 100 percent. Last year, 99 percent of those graduates went on to college, and one percent went into the military.

A difficult group of kids in terms of their background. Graduating a hundred percent, hundred percent going on. Extraordinary success story.

The three of them are going to give us different perspectives and, to help understand our perspectives, I'm going to begin with Candace. I'm going to ask them to spend a minute or so and give us a little bit about what you do and maybe even your belief systems.

>>MS. BURNS: Absolutely. First of all, thank you for the opportunity to come and speak before you today. Again, you know, my background is actually in marketing and communications, and I am not an educator.

I grew up in the Boston area and I got involved with this work because I'm passionate about providing young people with opportunities; opportunities that they might not have because their parents aren't in a situation where they can connect them with opportunities. Perhaps they are not doctors, attorneys, or lawyers where they can have the opportunity to get some experiential learning that many kids do have.

So, I started working in this area of workforce development first at

Mass. General Hospital as the Director for School Partnership Initiatives. So what we do, and what I did at MGH and most recently at Dana Farber -- I have been there six months -- is providing the Institute and the industry with more skilled, prepared, and a more diverse workforce. That's what we are about doing.

And we do that by working with the leaders within the school systems, working with the leaders within the hospitals, to develop programs, initiatives. They all don't look alike; they look very different. But the goal, again, is to provide meaningful learning experiences for young people.

And because we work primarily -- my work is with Boston U's students that attend Boston Public Schools -- it's primarily working with underserved and under-represented youth. So that's the work that I do.

>>DR. DAGGETT: Thanks, Candace. Peter?

>>MR. STANSBIE: Thanks. Thanks for inviting me. It's great to be here. I'm a strange beast in that I have nothing to do with education. I'm just a health manager. And I ended up, through a series of events, being a director of what is essentially a workforce development organization for the two million people employed in health in the U.K. We cover the U.K. and we cover all of the employees in health and all of the employers working in health.

In the U.K., about 80 percent of our employees are in the National Health Service, which is social medicine, funded pretty well completely by taxation, free at the point of delivery. And something like -- well, over 95 percent of health is provided through that National Health Service. The other 20 percent is independent, private, and voluntary.

But by far, the largest employer is the National Health Service. Our problems are much like yours. If you look at the figures, very similar problems with slightly worse on basic skills than you, believe it or not. But pretty well everything else is the same.

About ten years ago, our government decided that if we were going to compete in the world economic market, every sector of the economy had to do something in terms of increasing skills and flexibility of its workforce.

So it created these things called Sector Skills Councils. Skills for Health is one of those and works exclusively in health. Our aim is to improve the flexibility of the workforce, improve the skills of the workforce and, of course, to make sure that we can get people coming into the workforce who currently are not in the workforce.

We have a huge demographic problem. I am the representation of the workforce in the U.K. I am getting old. And, increasingly, we have fewer young people coming through. And the challenge for all of us is fewer people coming through into the workforce, into education. And so, of course, competition for everybody to get those people.

In health, we have a real issue about bringing people in. We need people with what you would call four-year degrees. For us, they are three years, apart from doctors, who are five. But we need other people as well.

And in fact, at the moment, we have lots of people who've got professional and degree qualifications through a strange system in which, because the government gave health service more money, increased employment -- increased training places -- only to find that the money ran out, and then there was no jobs for those people.

We have lots of professional people. But the demand from employers is for people coming into the lower -- the low-grade jobs. We have about an eight percent gap in terms of employment for all employers because they simply cannot get the skills they need at those levels.

So our challenge is, how do we get the skills up? How do we get the

people there? And for young people, how do we get them interested, engaged, and skilled? Increasingly, this young generation don't want to do healthcare and social care. They want to do other things. So our challenge is, how we do that? And how do we do that with our young people and bring them into the workforce? And with the skills -- and, like everybody else, I guess, who is here, I'm passionate about those young people because, believe it or not, I used to be one.

(LAUGHTER)

And that's where I am.

>>DR. DAGGETT: Thanks, Peter. Dr. Deason?

>>DR. DEASON: Good morning. I, too, want to express my thanks to the Jewish Healthcare Foundation and all of you for inviting me here today.

Briefly, I would like to just share with you how this work started in Houston. Mr. Michael DeBakey, as many of you may know, is 99 years old now and will be 100 in September, just recently received the National Congressional Gold Medal in Washington. I was fortunate enough to be there last week to share that with him.

He was one of the organizers, along with the School District, of founding this school. And the purpose then, 35 years ago, was to -- the issue, I should say, was that there was a very, very dire need for nurses in the Houston area, with Dr. DeBakey being the surgeon and very involved at Baylor College of Medicine, first President of Baylor.

He approached the School District with this idea of what is it, what can we do to increase the number of nurses in our city? Because we really need them in the hospitals, specifically, and particularly, minority nurses.

So that was the beginning of the genesis of this school. At that time, it was not necessarily, quote, college preparatory, but needing to fill that need of those nurses at that time.

So the school has only had two principals. The first one was the founding principal, started with the school in 1972. I came on board in 1989. And to share a little more with you, the founding principal just passed away two weeks ago. So we lost him. But at any rate, that was the beginning.

Then, over time, it was discovered that we -- the curriculum needed to be a lot more rigorous than what it was. It was just basic. Your basic curricula with some emphasis on healthcare and providing those students with the necessary skills to go directly to the workforce with nursing.

With the need changing, the curricula changed and, of course, it became much more rigorous, embracing the four quadrants that Dr. Daggett talked about. As a matter of fact, our school was one of the first schools to be selected. At that time he referred to them as "model schools," and we were in that first group.

The work, then, we went from that to having specialized courses in the medical sciences, health science, technology, which really -- I was sitting there listening to his presentation, and it just sounded like a history of where we evolved from and where we are today.

Again, the population is one that is under-represented in many areas; 50 percent free or reduced lunch group of students. But I think what I'm most proud of is the environment that has been created on the campus and with the school and what the mission really is.

The community, the medical center, as you know, Texas Medical Center in Houston, is purported to be the largest medical center in the world, so we do have a great resource. The school is very close to the Medical Center.

And with the public relations kind of campaign we have built over the years, all of those institutions embrace what we do. So the students do have an opportunity to have cutting edge, hands-on kinds of relevant experiences in the

Texas Medical Center.

So it really is a wonderful place to be. The kids are highly engaged, enjoy what they are doing. We have the -- we face the same challenges with the teaching methodologies and keeping teachers trained and ready and prepared to meet the needs of the ever-growing technological students who are so advanced there. So we are not escaped from that either. We do have staff who really does need to -- and we are working with them to get on board with where the students are that technology just passed us up.

2001 was our first graduating class of the students who I referred to at that time as "The Digital Children." When they came as ninth graders, we were just, like, "Where did these kids come from?" They were totally different! That quickly, from the class of '99 to the class of 2000, those students who graduated at that time.

And the data will show, now -- and I am going to quickly say this and stop -- that those students, that first group of Digital Children that we struggled with so hard, they were discipline problems, quite capable, but just different kids. So it dawned on us as we continued to watch them and observe and look at our skill sets, what the teachers had versus what they had. It was just -- it just hit us. These were the first kids who are coming to us as high schoolers who were born with all the technology, the Nintendos and what have you. So we quickly tried to address that on the scale that we could do, we could address it at that time.

And those kids now, every single one of them, either had there at the end of the four years -- after they graduated -- either had an undergraduate degree or was highly engaged in a technical field someplace in the Houston area, from the data we were able to receive from their universities and workplace.

So those kids managed to get -- to become successful, although we simply could not meet their needs, and they were a challenge for us. So it is real,



what Dr. Daggett just described. So thank you for indulging me.

>>DR. DAGGETT: Thank you. I'm going to ask the panelists a question. We'll start with Candace and go straight across the panel, then I'll ask them if they want to ask clarifications to each other. Then I'm going to open the floor up to any questions you have.

And this first general theme, which is there are so many different things we could be doing with young people today, as the three of you reflect on what makes a quality healthcare-related program, what do you think are the most important experiences our students would have to have to benefit the most from our programs? Candace?

>>MS. BURNS: So, when I think about the most beneficial experience that a student can have, I have to say that it's not necessarily going to be a one-size-fits-all. And that's one of the things I can appreciate about the programming that we have been able to set up within the various healthcare institutions in Boston. I mean, we are doing it, but several of our sister and partner organizations are doing great work as well.

So, you know, I also think about our programs are designed currently for high school students. That's what our resources can support. But I think it's important as institutions that we realize that the earlier we can plant the seed, that we can begin exposure to this idea of pursuing a healthcare career and start engaging these students the earlier -- the sooner in their education, the better.

When I was at MGH, Mass General, we had a program designed for middle school students to begin. We had a science fair mentoring program where students were coming over to our hospital once a week, partnering, they were working or being mentored by one of our staff in a research lab. And then during the summer -- it's one of the unique aspects of the MGH program -- we were actually hiring graduating eighth graders for summer internship experiences,

14-year-olds were actually working at our hospital.

Again, our programs at Dana Farber focus on high school students. Not every student can work after school, for whatever reason, or wants to work after school. So we have one-day job shadowing experiences for some students. There are schools that perhaps cannot accommodate some students being able to work at the schools. But they do have a six-week senior internship project. So we are able to set up internship experiences for -- and design programs specifically for those schools.

And then, I think our proudest opportunity is really working with students that are able to work in our academic internship-year experiences, where they work 10 to 15 hours a week after school. They are really able to engage and get an idea of what the workplace is all about. It's not only learning the technical aspects of a department or specific job, but it's about learning work ethics, showing up on time, being engaged, being a team player, learning how to cheat, as Bill would say, utilizing resources, and working with team members.

So I think to create an ideal work experience is really engaging the school, the leaders, and identifying what their needs are, and being able to develop programs that are going to meet those needs. Okay? That's what I would say.

>>DR. DAGGETT: Great. Thanks, Candace. Peter?

>>MR. STANSBIE: I think the most important thing is that we give them an experience. The answer is in the question, really. So often with young people, what we give them is theoretical academic education, and perhaps we show them some pictures.

What I think we need to give them is to be able to touch and feel what health is about. For us, it's important in terms of getting the people that we need to be nurses, doctors, other professionals.

It's also about showing the other 50 percent of the jobs that we have, and for me, how exciting that can be. I think, you know, people who -- young people who go to school, then get into a very different environment when they go to any workplace. But in health, it's an incredibly different environment. And for me, trying to explain to them some of the difficulties, some of the challenges, but the real excitement that you get at all levels of that is crucial.

Clearly, if you try to get a breadth of students in there, you need a breadth of experience, so that you are showing that health is not just about doctors and nurses. By the way, doctors and nurses are critical and important and all of those things, and I love them dearly, but there are other people in health. And that breadth of experience, I think, is critical.

If we are to get people in -- okay, into the startup jobs, because from that, moving through from those startup jobs into other exciting jobs because they have got the skills, I guess, that, for me, is the really critical thing. It's yes, taking education. We need people who've got the basic skills and literacy, numeracy. They teach us about technology these days, but all of those basic skills. But then the ability to apply that in a work setting, in a setting which is different, which is challenging, which has all of the things that Candace has said about team work, simply turning up, and, "Am I turning up on time," and getting them to experience that. If we could do that, we could have a workforce that does that and build on that.

>>DR. DAGGETT: Thanks, Peter.

>>DR. DEASON: What I would like to add to that is the fact that when -- all of our students, it's a nine through twelve school, and we have an integrated curriculum where it's not "this group is over here and that group is there." We feel that everything we offer is very, very important, and in order to produce the graduates that we have produced.

Therefore, there is a specialized health science or medical science subject in each -- at each grade level. The introductory part is integrated at the freshman level and so forth. Then the courses become more sophisticated and more application, if you will, in interaction with the healthcare teams in the Medical Center as well as other institutions in and around the Houston area.

So that requires a special kind of scheduling. Our students who come to us -- and I didn't clarify initially -- our school is a magnet school. So those students who come to us, they have already thought somewhere in their mind or someplace they are interested in some facet of the healthcare profession.

That really does make the job a lot easier. Because for the most part, they are there. Some of them make that decision after the ninth grade, having gone through the introductory course, "No, I really don't want to do this, I really don't think I want this high school experience." While others, many more, will say, "Gosh, I don't really want to do this, but this is going to be good for me, whatever I choose to do down the line."

So we usually retain them from the ninth grade. At the end of the ninth grade, if they stay and make that decision, they are going to stay. And they may go either way. But the important thing is, they have been exposed to one of the most comprehensive health science-based college preparatory and/or workforce education that you will find anywhere.

So it is interesting to them, number one. They realize that when they become juniors, they are going to be able to shadow certain people and certain professions, and they are going to learn more about that.

They come with all kinds of ideas of what it is about the healthcare field "I think I want to do, I would like to do." So we try really, really hard to stay on top of what's available to us in the community, keep those relationships going

with those institutions in and around the Houston area.

I was sharing last night with one of the participants, we -- the hardest area for us to crack was the medical examiner's office. So we finally were able to get students into this location, for those students who are interested in forensic medicine and whatever.

Remember, this is mostly exposure. Generating the interest of what it is they think they want to do and helping them to understand the importance and what a great career and/or high education area this could be for them.

So our focus really is exposure more than actually doing. They get an opportunity to do and observe things in many, many areas, areas that I can't even mention this morning because it's so vast and so much.

With the healthcare changing as much -- field changing as much as it is, we are just very fortunate, again, to be in a place where our students can actually observe and see these things. And in some cases, they -- their perceptor, what we call their mentors -- they are able to actually do some things, depending on that site.

And, again, it comes back to with teenagers being teenagers, we are constantly helping them to understand the responsibilities that they share in order for us to maintain the program that we maintain. They've got to set a higher standard for their behavior, and that is number one. Because, as many of you may know and have had experience, there aren't very many outside people who really want to be bothered with our teenagers and our high school age students.

So we have been very, very fortunate to help the students to understand that through counseling, course work, and the kinds of things we do. So that when they go out to the Medical Center and those various places, they realize that this is a special opportunity, and we are not going to do anything to blow that.

Many of them also understand that our school was named for Dr. DeBakey in 1996. They understand what a legend he is, and we are constantly working in our orientation and our conversations with our students, "You must never ever do anything to embarrass this man. He's a living legend, and you can never do anything that will cause him to second guess why did he ever put his name on this school." And that's a big sell. I mean, that is difficult to do with teenagers.

But I have to say to you this morning, we have not, to my knowledge, had any misbehavior in that area which, again, calls for a higher level of thinking and behaving.

I want to share with you, Bruce Perry, who is in the audience this morning, he told me last night, he did visit me some years ago. Bruce, five years ago maybe?

>>PARTICIPANT: (RAISING HAND)

>>DR. DEASON: And he is from Sacramento, and he has a program up and running. I'm very happy about that. We have people visit us but we never really get the results with the information. Did it help? Did it? No? But Bruce shared that with me last night, and it really was rewarding to hear from him, so that's an overview of what we do.

>>DR. DAGGETT: Thanks. I think one unifying thing we heard is the importance of real world experiences. We also heard this: This issue of strong academics that underpin it. And we also heard that in those real world experiences, it's not just the traditional job-specific skill; but it's the concept of work ethic, working as a member of the team, respect, responsibility. Is that kind of capturing it?

Rather than having you react to each other -- the themes are pretty uniform -- I want to open the forum up to questions from the audience.

Questions, comments, observations? If you would just raise your hands, we have a mike and we will pick it up. Got a couple of them over here.

>>PARTICIPANT: Hi. Dave Fretwell. There is something that has been implicit, or ex -- not explicit -- in your comments and what's been going on here is, how do young people make career decisions? And we haven't addressed that. We are talking about it as if the decision is kind of already made, and you have been touching on it.

But I have in my hand here a paper called "Career Guidance and Public Policy, Bridging the Gap, OECD." And the World Bank and IMF did case studies in 55 countries about how to address this issue, which is underneath everything we have been talking about. Interesting, the United States was not involved in this study; the U.K. was.

How do -- I would just like the panel to respond -- how do we deal with career decision-making, and not the first one, because careers are ongoing? What do we do? And you have mentioned some specifics, but who affects it? How do you deal with this? How do you teach people and help young people make career decisions, that process throughout their life?

>>DR. DEASON: Well, I would like to give a shot at that in terms of our referring to going back to what I said initially about the grade level-specific course work that we have at our school. The introductory course, of course I didn't go into details of what that includes, but that addressed somewhat the issue that you are speaking of. It gives the students the opportunities to see and look at all the possibilities that's in the healthcare field. That's a part of that program.

At ninth grade, they aren't sure yet. I mean, but the exposure of what is available and what it takes to get there, seeing the actual -- seeing persons who are practicing in those areas, that's kind of the way -- beginning of trying to make

that clearer in their heads and help them to understand what's possible.

I -- I think, you know, it's going to be somewhat of an individual decision. The information is there. It's imported by professionals, they see them. They come in and out of that course as ninth graders to the classroom. They are not out in the field at that point. They learn about medical ethics, medical terminology, and all of that is integrated into their science courses and math courses and English courses throughout the four years that they are there. So that's kind of how we do it.

>>MR. STANSBIE: I don't know about most of you, you don't look that young to me --

(LAUGHTER)

-- but my career choice at 16 was a ten-minute interview that went something like, "Yeah, you are going to get some exams, you should go and work in a bank or an office."

And for me, that was a life-changing experience -- not till I was a lot older. Because what it made me realize is if this was the sort of career advice people were getting, it was wholly inadequate.

We are, just as a government initiative, changing our exam system to something called 14-to-19 Diplomas, all-around Sector Skills. So there is one for Health and Public Services.

So what we have got to do is to help people before they are 14 -- I just had to check what ninth grade was, by the way, sorry about that -- before they are 14 to have a range of options explained to them about careers, about life, about what they might do. Because if you don't do it before they are 14, they are going to have to make these choices.

Now, I -- looking back and knowing my kids as they have grown up, I'm not sure at that age that's easy. But it does mean the schools -- your high schools,



our secondary schools -- have got to start when the pupils come to say, "This is not education for the sake of education, but what is life going to be for you."

And certainly, that didn't happen with me. I guess it happens a lot more now, thank goodness, but that's going to be the crucial issue.

Then, I think, you have got to design those programs around some of the things that Charlesetta was saying, in terms of saying, "It's not working." If the experience shows, "This is not what I want to do," you haven't closed the other option. That the experiences that you have given people, the education you have given people, can then move to something else.

Because certainly, at that age, you're learning, you are getting different experiences. And then you might want to change. But, of course, as someone said -- David, I don't know if it was you -- that then does not change at 19. It changes at 26 or 35. So all of the things we then do have got to build on that to say, "Okay, so, you did this last year, but that's not there anymore."

Now, it's interesting coming to this hotel when the steel workers are here. And the part of Wales that I am from, it was heavy industrial steel works and coal mining. And, in fact, in Warwickshire, where I worked, it was the same. Those industries disappeared. And yet we had people; not only the people who actually had been miners and steel workers, but their children, saying, "Well, I can't do anything else. I cannot do anything but go down and mine, or work in the steel industry."

And not only they were saying it, their children were saying it. Because that was their experience. That was their expectation. And it seems to me we have got a lot of work to do. And people are saying move through this before 14, past 19, to say actually these are the options. There is a real choice out there, there is real excitement out there. Let's make it possible to do other things.

>>DR. DAGGETT: Okay. Candace, you want to add to that?

>>MS. BURNS: Sure. You know, it's interesting. Because we do, we have programs that are very specifically designed for students that know -- and it's amazing -- that some students just know that they want to be a healthcare provider. They want to be that. And we have a track to identify those students and to support those students in achieving that.

There are some of our other programs, for example, that we have a summer jobs program where we open it up to any and all students. Yes, we want to see individuals that are interested in healthcare careers, but the unique thing about our healthcare industry and the institutions that I've worked for, that there are mini cities within a city. So you can have an interest in accounting, in finance, in marketing, in business, and still have a career within a healthcare facility. You don't just have to be limited to the clinical aspects of healthcare. And we try to educate young people when they come through our doors in the vast experience that they can receive.

I mean, we have a photo -- someone that's interested in photography can have the opportunity to work in a photo lab within our healthcare facility.

So, you know, we are the business of healthcare, and our programs are designed, again, to attract and get more young people into the healthcare industry. But, again, our industry is extremely vast and we can probably meet the needs of a variety of career interests.

>>DR. DAGGETT: In the state of New York, now 20 years ago, we passed a new requirement called Home and Career Skills. Grade six, seven, and eight, every student must take ten weeks of home and career skills, and it includes four major components.

First one is the relationship between work and lifestyle and life opportunities. Second major component is we look at the 16 career clusters,

employment opportunities, preparation needs. Third one is we talk a lot about the difference between careers and jobs. And the final one, which is interesting that we have added since -- we didn't originally have it -- is we talk about your opportunities as an entrepreneur versus working for someone else. And by the way, how many in the room are entrepreneurs, actually work for yourself?

>>AUDIENCE: (RAISING HANDS)

>>DR. DAGGETT: Yeah, because often what happens is this type of meeting is we bring in representatives from big organizations and, if you look at the employment trends in the future, we got to teach these kids a lot more about the opportunities and challenges of an entrepreneur, and we are not doing it too well.

I'm going to take one more question from the audience. We'll try to then ask the panel for quick response, and then we'll move on to some other questions. In the back?

>>PARTICIPANT: I work with a number of students from seven county areas, and my challenge is getting those experiences for the students who are not associated with a particular health tech program, to get them into hospitals to see that. Because of HIPAA laws, how do you overcome work with that one individual from an outlying school that's not a part of the a bigger system?

>>DR. DAGGETT: Obviously, Peter, you may have some issues to respond, but it relates so much to our individual state and national laws that prohibit us from doing that here.

>>MR. STANSBIE: Yes, we are in the same position in the U.K. We have real problems getting people up until 18 into actual healthcare settings because of privacy laws and laws to protect children and minors.

One of the interesting things we are doing is something we call

Health Tech. And various schools have found buildings which they have converted to -- basically, to stage sets. So part of it is an ambulance, part of it is an emergency room, part of it's a ward. And we actually bring in health sector employees and we create a work-type environment.

And that allows them -- students -- and we bring groups of students, often people who wouldn't normally be associated with looking at health experience and health work, into those settings.

And, I mean, it's fascinating. There is one that's set up as an old person's home, and they are shown a film about this old person and their life, and then, literally, the curtains draw back and they are in this old person's bedroom, and there is the old person, lying on the floor. And they have to go in and think well, what would they do? So.

So what we are having to do is actually create these experiences outside of an environment which law means we can't take people in. I think you can do some of that. I think the other thing is, what I hear Charlesetta doing, is bringing in mentors, bringing in people who can explain and show.

If you can then take people into the work environment, and you can, but it's difficult, and it's particularly difficult, I think, for the nondoctors; nurses, radiologists, et cetera, the accountants, the engineers, the cleaners.

But if you can do that again as well, that's great. But I think this Health Tech, we have had some really interesting experiences of bringing people and giving them this experience. So that's something we are trying to do to get over these issues.

>>DR. DEASON: And I may add, in addition to that, this is a public relations campaign. Those persons involved in the programming and who are trying to get the outreach, you've got to really work hard at making community,

the medical community and others, who will have to help us with this. We simply cannot do it as educators. We must have their help and assistance. And that will differ from community to community. But I will certainly challenge you that this is a big piece of this in order to get those kinds of experiences for students.

>>DR. DAGGETT: One more. Let's take one quest question over here.

>>PARTICIPANT: Yes. I'm Dr. Roth, from University of Pittsburgh and UPMC. I have an interest in the panel commenting on the following: Can health related materials in the earlier grades -- in elementary school, in middle school -- can the presentation of that content, perhaps coupled with a certain amount of experience appropriate to that age group, stimulate and assist students in the acquisition of the basic skills that they will need, really, for any career?

But it's a generalizable issue; reading, arithmetic, the basic skills, which are still building blocks for the skills that they will need to enter the health careers.

In other words, I'm interested in linkage. What is the opportunity within the school system to link health related materials, experiences, or what have you, as actual teaching materials in the acquisition of skills, just like Dr. Daggett presented in the area of sports or art?

>>DR. DAGGETT: I know it's to the panel, but I'm going to begin a reaction because we spent so much time on that issue. Remember earlier, I said we identified the nation's highest performing schools and the nation's most rapidly improving schools? Schools like DeBakey? What we have done, with support from the Gates Foundation, is we have gone in and found that they are doing precisely what you are describing. They use the real world experience to provide a relevant framework to teach academic rigor -- relevance making rigor

possible.

And we've got what we call Gold Seal lessons. We literally have about 18 thousand Gold Seal lessons now that we have gathered from all the high performing schools around the country, put them in a sharable format, and make them available to other schools.

Because you can do it. The challenge is the teacher doesn't know how to apply the very discipline they are teaching. And you can't use just one application, because you'll have -- especially if you're in a middle school -- you might have five kids that like healthcare and you got three kids that like agriculture and two kids that like football and six kids the that like the arts.

So what we do is suggest they teach an academic concept and let the student pick what real world application they would like to use to apply that in the lessons and materials. And all we are at the International Center is kind of traffic cops and say, "Here are the materials if you want to use them."

At the end of the day, I'll put out some information where you can connect up to get some of those materials if you want them.

>>MS. BURNS: I'll preface this by saying again, I'm not an educator, but I think our educators need to begin to think sort of outside the box. So I think it's a fabulous idea to be able to go in and teach that type of curriculum. And then wouldn't it be ideal to have someone in that industry, a physician or anyone, be able to go in and sort of teach what area topic that's being discussed.

Because there are so many healthcare professionals that would love the opportunity to support the initiatives that we do. But for whatever reason they don't have the time, the resources, what have you. But could they give up a morning? Or could they give up an opportunity to go into a classroom?

We have a number of individuals that do that and would love the opportunity to do that if given the invitation and the appropriate support as well to

be able to present the necessary information.

>>DR. DAGGETT: I'm going to move on and ask a general question to the panel. We'll then, again, ask the audience for any additional questions in the time remaining. The question I have for each of the panel -- and I think, Peter, we'll start this time with you -- is what can we do to create support for this type of program, health careers? Where do you go to get support? How do you create that support?

And my premise is that if you talk to school Superintendents today, they are absolutely inundated with the requirements of the federal No Child Left Behind, getting students ready for the test. And to step back and gain support for a new program that is not mandated becomes very, very difficult. How do you gain that support?

>>MR. STANSBIE: Yeah. I mean, I think that's a challenge for all of us. Certainly, education in the U.K. is -- appears to be driven by state -- in our case -- national tests. And there are big issues around that and how useful it is and everything else. But they are there. They have to be delivered.

It seems to me that it goes back to your view, really, Bill, of schools needing to change. Because schools cannot be islands. I guess you know that better than me. But the real -- I think the real push for this has got to come from groups of organizations from the schools, yes; from employers, yes; because employers have a real interest in what's coming out of all of this. From other agencies, from those agencies that provide funding.

In our country, we have agencies that are really committed to funding for ongoing education, and that's got to go back into the school system.

From parents, from those parents who are interested -- all of those people saying, actually, what's important here, at every level, at primary school, at

middle school, at secondary school, is that we are building up partnerships that let our children understand that the education they are getting leads them to, yes, good academic standards, but a good lifestyle, a good ability to do what they want to do, and a good ongoing career.

So it seems to me that there is a real challenge here. I think then, of course, there is a challenge in providing legislators, politicians, that actually simply passing state tests is not enough in the 21st century, and then get behind.

Some of you will know, when Tony Blair came to power -- you will have heard of Tony Blair -- when he came to power, he said, "There are only three critical things: Education, education, and education." And he then went on to prove that there were twenty other things that were more important.

>>AUDIENCE: (LAUGHTER)

>>MR. STANSBIE: It seems to me that's a critical challenge for us. That when you get the partnerships there, you've got to get the politicians behind you.

(LOUD NOISE)

I don't know if it's me that's whistling or somebody else.

And that's going to be a real challenge for all of us. I do think you've got to get employers there. In health, you have to, because you need your employers to give you that experience, to give you that breadth.

And they are busy people. They've got lots of other calls on their time. But if you can find them, they are really good value, and they will do things that really you didn't think you could do. So that's what I would say.

>>DR. DAGGETT: Okay. Candace or Charlesetta?

>>DR. DEASON: I will just add what I said earlier. If this is a real issue for all of us, and it is, you heard the data this morning, and we can't do it all. None of us can do it all alone. So we've got to engage our communities and make



this a very important issue and a critical issue for the community, and they really do need to hear either Dr. Daggett's presentation, your key decision makers, to make this a real action for the community.

We see the rising need for healthcare providers. The data is there. So, again, I would just say we've got to engage our communities and, clearly, parents as well to make this happen.

But we can't just talk. We've got to do something. I mean, it's time for action. So I hope that, at the end of the day, we will -- we will come up with some real solutions that could be replicated and implemented in our various communities.

>>MS. BURNS: And it is about engaging others, as you said, engaging parents, engaging the community. We are fortunate to have a Workforce Investment Board, the Boston Private Industry Council -- I believe Chris Smith, the representative from the PIC, is here, who, you know, is really a leader in Boston in engaging community, engaging the government, leaders, and city government, to take this work seriously. This whole idea of workforce development, not only for youth, but in the areas of adults as well.

And it's with that support that, you know, we are able to do the work that we do, both in the schools and in the business. Having that strong Workforce Investment Board behind us is key to strategic success. So.

>>DR. DAGGETT: Good. Let's go back out to the audience. And way in the back? And then this lady up here in the front in the red.

>>PARTICIPANT: Thank you. My name ask Greg Roberts, and I'm a funder. So I have a question. As we sort of wait on the sidelines for school reform to happen -- it's taking really slow for it to happen -- what are we going to do about the young people that are in failing schools but have an interest in careers?

What is the industry response to doing some best practice models that don't necessarily include the nine-to-three hours but does include some enhancements, some mentoring?

The issue right now is, it's almost like when I talk to the college access folks, they wait till eleventh grade to start their programs to get kids in college when, then, 75 percent of the kids are already gone. A Philadelphia Risk Factor Study says if a kid has two risk factors by 12 years old, they have a 90 percent particular rate that they won't finish high school.

So what are we going to do around middle school and young people that are not in the career high schools or the small high schools if they want to have access to this career?

And, secondly, if these are young people that don't have good experiences with our healthcare system -- their introduction to healthcare is an emergency room, and you know what that experience can be like.

So how do we sort of change this around so that young people will be interested in this career at a younger age and more focused than on a developmental process instead of waiting for schools to reform them so that young people have access?

>>DR. DAGGETT: I'll begin and then ask the panel to add. What we found a lot in the high performing schools in the country is, preceding any type of enrollment in a program, they are in some type of summer program, weekend program, and typically through a community based organization more than it is a school.

And even things like Boy Scouts and Girl Scouts, Boys Club, Girls Clubs. All kinds of programs like that in a variety of cities around the country we have found. Panel?

>>MR. STANSBIE: No, you go first. It's a hard question!

(LAUGHTER)

>>DR. DEASON: I appreciate the gentleman's comment on not having time to wait until schools reform themselves. That's -- that was really profound to me. And I'll just go back to what Dr. Daggett just said and what I previously said.

It will take all of us, and we've got to make our needs known. And you're absolutely right, and we can't wait until they are in high school to make these decisions. So downstream is very important.

And back to the social organizations in our community, it will take all of us, again. And that includes the Girls and Boys Clubs and the Boy Scouts and making that -- but they have got to know that we've got a problem.

So I'll go back to that as well. We've got to make that known in our communities that there is a problem regarding having sufficient healthcare workers in the future.

>>MS. BURNS: I'm going to -- you know -- I'm in a very unique city, Boston. You know? It's -- the culture is academics and teaching and learning. And so, with our partnerships, we don't necessarily -- well, first, in terms of our healthcare institutions, I can say probably most of our high schools and even some of our middle schools are touched in some way by a partnership with one of the hospitals in the Boston community.

We recognize that we are not going to be able to do this work alone. We try to develop programs, again, that are going to meet the needs of all -- of all students, and we don't necessarily partner with career schools at Dana Farber. Our school partnerships vary. We partner with three specific schools. We don't believe in sort of reaching out to all, because we want to develop a strong relationship with our schools. So we limit it.

We have relationships with -- one is a vocational/technical school. One is a general -- general, regular academic high school. And then the third is a school specifically for the math and science -- math and science students. And, again, our programs are uniquely designed to meet the needs of those particular students and staff at those schools.

So, again, we are not going to be able to do everything for all kids. But we recognize that we do have to be creative in being able to reach some of the young people and under-served and under-represented people that you have talked about.

And a lot of it is, with that exposure, we are able to sort of break down those barriers that currently exist between the healthcare and some of our under-served communities by giving that exposure to young people at an early age.

>>MR. STANSBIE: I'm not -- I don't really know that I can add too much to that, because the environment is so different in the U.K. in terms of health.

But I think where the environment isn't different is that we are losing young people who don't see the need for ongoing education to the age that all of the politics see the need for ongoing education.

I'm not an educator. I was once a governor of a school, a chairman of governors, and I had to deal with a disciplinary problem for a young boy. He was about 15 and he looked about 26, and he was bigger than me. And we had to exclude him. We had to get him out of school. And we were talking to him, and I said, "Look, what do you want to do?" And he said, "Oh, I know what I want to do." He said, "I want to go and work with my uncle and put roofs on houses."

And what I suddenly realized was, this guy knew exactly what he wanted to do. He could go and do it now, he was doing it at weekends. He was

earning money, and yet he was forced to come to school, which he couldn't see -- excuse me -- couldn't see had any relevance to him.

So we had lost him from school. He gained nothing. And he would go at the end of when he could leave, which was about a year's time, and work for his uncle, which he was doing now because we had excluded him from school.

And it struck me then that we haven't got this right, have we? And I don't think that's just a challenge for schools, folks. I think it's a challenge for employers. I think it's a challenge for communities. And, again, I think it's a challenge for the politicians.

How do you keep these people? How do you keep them interested so that they can carry on learning? I guess, like lots of you, I know people who weren't very good academically at school who've gone on to good careers and actually found that, academically, they are better than they ever thought they were at school.

So, for me, the answer, if I've picked up the vibes to that question, is not just in the school system; it's in society. In terms of how do we get these people to recognize that there is something there that doesn't mean you've got to do something that's boring and tedious till you're 18.

Gosh, that got a lot of hands.

>>DR. DAGGETT: And this lady has been patiently waiting to ask a question for white a while, so I need to go to her.

>>PARTICIPANT: Yes. Is this on?

>>DR. DAGGETT: It's on.

>>PARTICIPANT: No, no.

>>DR. DAGGETT: Go ahead. I'll repeat your question if they can't hear.

>>PARTICIPANT: My question goes back to Dr. Daggett, the comments that you made about inputs. Now, we are working with youth who are very high-tech. And now we are trying to get them in terms of the final output into careers that are interesting, that really meet their needs and their interests.

And that a real important point in that process is at the instruction, what happens a lot of times in the classroom. And that's a real key issue. And I wanted to go back to Dr. Deason -- Deason, yes -- because she talked in terms of seeing that millennial generation coming through the classroom.

And somehow they were able to, number one, become aware that you have a different person -- audience -- and then the individuals delivering the instruction somehow were nimble enough to look at changing, to then decide how Do we attract and engage a new team that's coming along.

What were some steps that your teachers went through? Because change is going to continue. I mean, every generation is going to be different. So I think if we're looking at some new ways, we need to look at how to make that classroom setting nimble and ready to change as the audience changes.

>>DR. DAGGETT: And before the panel responds, I want to remind the panel, we only got about seven or eight minutes left here, because that's a question we could spend an hour on if we're not careful here. I'm going to give a quick response and then go to Dr. Deason.

High performing schools seem to look at students differently than other schools. In most schools, we find that the kids increasingly are coming to school in America to watch their teachers work.

(LAUGHTER)

And teachers are working real hard, got a lot of things to do. But learning is an active process. So this concept of 'student as worker' is really central in the high performing schools. In fact, a lot of schools don't call them

students anymore; they call them 'learners,' and it's a subtle but important shift.

As you do that, the key thing you got to do is figure out what to take off the plate because the teacher's got too many item standards they are trying to cover.

In a high performing school, they are dumping about a third -- discipline by discipline, course by course -- of what they were teaching to focus on mostly what is central and get the kids to actually use that information in a more active way rather than a passive way.

>>DR. DEASON: Brazellia, what we did was by chance. We did not realize what we hit at that time was the real issue with the students.

We were seeing a difference in their behavior and the way they did not process things that we thought that they -- what we -- just had a year or two before.

So it was with that that we brought our team together and brought some students as well to say why you're different from what your predecessors were. "Tell us what's going on here."

And they, the students, told us what was happening for the most part. So we took off on that. Had to take teachers -- have teachers more training, because at that time it was more than Powerpoint presentations that they had become accustomed to. And in some cases, many teachers were not doing the minimal of that, and I was included in that.

So it just caught us by surprise, and as we continued to look at what was happening with their behavior was different from the previous students, and it just -- it just hit us like a Mac truck! And so we just worked through that by listening to students.

We have a student advisory committee, and those students were just

as smart as any -- or capable -- of any students we had had before, but it's just that they were not -- they were not learning.

So we are still working with that, because the kids now, these students are different from what those students were, as you saw some of the technology that Dr. Daggett talked about.

So it's just trying to keep up and keeping teachers on -- willing and ready to embrace the change, the different learners that we have. Truly, we really have different learners. So for someone who has been in the classroom 25 years or longer, they may not be comfortable with that. Especially when the student is teaching the class, from a technology base of standpoint. So that's in a brief response.

>>DR. DAGGETT: Peter or Candace, anything to add?

>>MS. BURNS: I would just add that, you know, when we look at our workplace, many of the individuals that are managing leading the departments are, you know, not as exposed to technology as the younger generation coming along.

And so in order for anybody to come into -- to come into our programs as a mentor, as a supervisor in a training, that we may need to go through that, and we do talk about that.

And what we say is, take advantage of that knowledge and allow them to come in and maybe create some new systems or do that hip Powerpoint, you know, that you're not used to, instead of those plain black and white slides. Allow them to come in and jazz it up a little. Use that new technology, that new knowledge that young people have to bring.

>>DR. DAGGETT: Okay. We are going to break in a couple of minutes, and you are going to begin the real work which is, you are going to go in with your facilitator, try to come back with some very specific recommendations



to us. Not general; very specific recommendations. The panel will be circulating in and out of the rooms if you have questions for us as you go through that.

But before you break, I'm going to turn back to the panel, I'm going to give them each one minute to give all of you -- before you go to your breakout groups -- a word of advice. And the word of advice is not "Panel, what should they talk about, what should they put in their program," but "What should they avoid doing? What shouldn't we put in one of these programs that your experiences tell you ultimately get you in trouble?"

Any panel member want to respond?

>>DR. DEASON: Hmm...

>>MR. STANSBIE: Yeah, um, don't not go into educational health! I think, for me, the real thing that I want to avoid is the age that we are talking about, just making people feel this is the only thing, that if they don't do well in this, they can't move. That if they don't like this, they can't move. If they find that actually their friend down the road is doing something that turns them on much more, they can't move. If we block in at 14 to 19, then I think we are going to miss something out.

>>DR. DAGGETT: Good advice, Peter.

>>DR. DEASON: I would suggest that we keep the options broad. You know, from healthcare administration to -- you name it -- there are over 500 careers now, specialties or more, in the health field. So I would not be so specific as to students couldn't think through what is possible. Because it hasn't been invented yet, what is possible for some of them. So we have to be bold with that, I think.

>>MS. BURNS: And I would say sort of avoid that one-size-fits-all approach. Be create -- avoid not being creative, I guess I should say. Avoid not

thinking outside the box. Every -- programs need to work for those that we serve, and it's going to look different for different organizations.

>>DR. DAGGETT: And mine is, more is less, do a few things really, really well rather than coming back with a long laundry list of what you think you can accomplish in a very short period of time.

With that, we are going to move into break. On your name tags, it tells you what group you're with. You've got the program. We look forward to seeing you all back here at 2:15 this afternoon! Go work, folks!