



**COLORADO**  
Department of Education

Colorado State Board of Education

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TRANSCRIPT OF PROCEEDINGS  
BEFORE THE  
COLORADO DEPARTMENT OF EDUCATION COMMISSION  
DENVER, COLORADO  
October 8, 2014, Part 1

BE IT REMEMBERED THAT on October 8, 2014,  
the above-entitled meeting was conducted at the Colorado  
Department of Education, before the following Board  
Members:

Paul Lundeen (R), Chairman  
Marcia Neal (R), Vice Chairman  
Elaine Gantz Berman (D)  
Jane Goff (D)  
Pam Mazanec (R)  
Debora Scheffel (R)  
Angelika Schroeder (D)



1 CHAIRMAN LUNDEEN: Please call the roll.

2 MS. MARKEL: Elaine Gantz Berman.

3 MS. BERMAN: Here.

4 MS. MARKEL: Jane Goff.

5 MS. MARKEL: Paul Lundeen.

6 CHAIRMAN LUNDEEN: Good morning.

7 MS. MARKEL: Pam Mazanec.

8 MS. MAZANEC: Here.

9 MS. MARKEL: Marcia Neal.

10 MS. NEAL: Here.

11 MS. MARKEL: Dr. Scheffel.

12 MS. SCHEFFEL: Here.

13 MS. MARKEL: Dr. Schroeder.

14 MS. SCHROEDER: Here.

15 MS. NEAL: Has Jane called?

16 MS. MARKEL: Jane has called. And member

17 Goff is on the way here. We'll be delayed slightly. Our

18 mics good? Sorting out tech issues here.

19 MS. NEAL: Mic's good. Yep.

20 CHAIRMAN LUNDEEN: Who would like to lead us

21 in the pledge of allegiance? Keith?

22 ALL: I pledge allegiance to the flag of the

23 United States of America and to the Republic for which it

24 stands. One Nation under God, indivisible, with liberty

25 and justice for all.



1 CHAIRMAN LUNDEEN: Thank you very much. Are  
2 you ready?

3 MS. NEAL: Ready as I'll ever be.

4 CHAIRMAN LUNDEEN: Is there a motion to  
5 approve the agenda?

6 MS. NEAL: I move to approve the agenda as  
7 published.

8 CHAIRMAN LUNDEEN: Is there a second? Dr.  
9 Schroeder. All in favor or without opposition. The  
10 agenda -- hearing no opposition the agenda is adopted.

11 MS. NEAL: I move to place the following  
12 matters on the consent agenda.

13 CHAIRMAN LUNDEEN: Thank you.

14 MS. NEAL: Regarding disciplinary  
15 proceedings concerning -- 13.01, regarding disciplinary  
16 proceedings concerning an application, charge number  
17 2012EC703, instruct department staff to issue a Notice of  
18 Denial and appeal rights to the applicant pursuant to 24-  
19 4-104CRS.

20 13.02, regarding disciplinary proceedings  
21 concerning an application, charge number 2012EC1120,  
22 dismiss the charge against the applicant and instruct the  
23 commissioner to sign the settlement agreement.

24 13.03, regarding disciplinary proceedings  
25 concerning an application charge number 2013EC761,



1 instruct the department staff to issue a notice of denial  
2 and appeal rights to the applicant pursuant to 24-4-4-  
3 104CRS.

4 13.04, regarding disciplinary proceedings  
5 concerning an application, charge number 2013EC1649,  
6 instruct department staff to issue a notice of denial and  
7 appeal rights to the applicant pursuant to 24-4-104CRS.

8 13.05 regarding disciplinary proceedings  
9 concerning a license, charge number 2013EC1733, instruct  
10 the commissioner to sign the settlement agreement.

11 13.06, regarding disciplinary proceedings  
12 concerning an application, charge number 2013EC3099,  
13 instruct department staff to issue a Notice of Denial and  
14 appeal rights to the applicant pursuant to 24-4-104.

15 13.07, approve three initial emergency  
16 authorizations as set forth in the published agenda.

17 13.08, approve one renewal emergency  
18 authorization as set forth in the published agenda.

19 13.09, approve Centennial's R-1 teacher  
20 Induction Program as set forth in the published agenda.

21 14.01, approve Clear Creek RE-1 school  
22 district's request on behalf of Georgetown Community  
23 School for a waver from state statutes as set forth in  
24 the published agenda.

25 14.02, approve Jefferson County RE-1 -- R-1



1 school district's request on behalf of Jefferson Academy  
2 Charter School for a waiver from state statutes as set  
3 forth in the published agenda.

4 14.03, approve Thompson School District's  
5 request on behalf of Loveland Classical School for a  
6 waiver from state statutes as set forth in the published  
7 agenda.

8 14.04, approve Thompson School District's  
9 request on behalf of New Vision Charter School for waiver  
10 from state statutes as set forth in the published agenda.

11 14.05, approve West End RE-2 School  
12 District's request on behalf of Paradox Valley Charter  
13 School for a waiver from state statutes as set forth in  
14 the published agenda.

15 14.06, approve Jefferson County's R-1 School  
16 District's request on behalf of Rocky Mountain Academy of  
17 Evergreen -- for something here. For a waiver from state  
18 statutes as set forth in the published agenda.

19 14.07, approve Jefferson County RE-1 -- R-1  
20 School District's request on behalf of Two Roads Charter  
21 School for a waiver from state statutes as set forth in  
22 the published agenda.

23 15.01, approve school year 2014-'15 English  
24 Language Proficiency Program's distribution of funds  
25 under the English Language Proficiency Act as set forth



1 in the published agenda.

2 15.02, approve school year 2014-'15  
3 distribution of professional development in student  
4 support program funds under the English Language  
5 Proficiency Act as set forth in the published agenda.  
6 This is the end of the consent agenda.

7 CHAIRMAN LUNDEEN: That is a proper motion.  
8 Is there a second? Dr. Scheffel. It's moved and  
9 seconded. Without objection the motion shall carry. Ms.  
10 Markel.

11 MS. MARKEL: Good morning, Mr. Chair,  
12 members of the board, (indiscernible).

13 CHAIRMAN LUNDEEN: Microphone.

14 MS. MARKEL: Good morning, everyone. IN  
15 your packet today you have the updated events calendar.  
16 I'd like to remind you that tomorrow afternoon, while  
17 it's not a board meeting or event, the early childhood  
18 convening is taking place at 1:00 on Lowry Campus, and I  
19 know that some of you have indicated that you would be  
20 able to attend that, and I just wanted to bring that to  
21 your attention as a reminder.

22 In addition to the events calendar you have  
23 your updated expense report. For Section 7 of today's  
24 agenda you have copies of the two sets of rules that will  
25 be before you for rulemaking hearing. The rules



1 concerning the administration of the CDR Grant Program  
2 and the rules concerning the administration of the School  
3 Health Professional Grant Program. Those rulemaking  
4 hearings will occur in just a few minutes this morning.

5 In Section 10, for the visit from the  
6 Colorado Charter School Institute, you have a copy of  
7 their PowerPoint for their presentation to you.

8 In Section 12.02 you have a copy of the  
9 current legislative priorities where you'll be discussing  
10 with Jennifer Mellow later this morning, or perhaps this  
11 afternoon. Proposed legislative priorities for this  
12 upcoming legislative season.

13 In Section 15, you have copies of the Alpha  
14 summary, along with the attached funding charts, which  
15 were (indiscernible) the consent agenda. Which  
16 (indiscernible) just voted on.

17 In 16.01 you have a copy of the School  
18 Readiness Assessment PowerPoint setting forth the three  
19 proposed assessments, which will be before you for action  
20 later today.

21 And finally, in Section 17, you have a copy  
22 of your strategic plan, update PowerPoint, along with the  
23 CDE 2014-'15 performance plan. And that's the end of my  
24 report unless there are questions.

25 CHAIRMAN LUNDEEN: Elaine?



1 MS. BERMAN: Just to really -- can you make  
2 sure we all have the address of the Lowry Conference  
3 Center?

4 MS. MARKEL: Yes, I will send it to you.

5 MS. BERMAN: Thanks.

6 CHAIRMAN LUNDEEN: And just to acknowledge,  
7 I regret that I have a pre-existing commitment, I won't  
8 be able to be there. There any other questions for  
9 Carrie regarding today's business? Okay, then we head  
10 into some rulemaking hearings.

11 Colorado State Board of Education will now  
12 conduct a public rulemaking hearing for eh rules for the  
13 administration of the Instruction in Cardiopulmonary  
14 Resuscitation in Public Schools Grants Program. State  
15 Board approved the notice of rulemaking at it's August  
16 13, 2014 board meeting. A hearing to promulgate these  
17 rules was made known through publication of -- or, yeah,  
18 of a public notice on August 24, 2014 through the  
19 Colorado Register and by state board notice on October 1,  
20 2014.

21 State Board is authorized to promulgate  
22 these rules pursuant to Article 9, Section 1, Colorado  
23 Constitution, and Sections 22-2-1061A and C. 22-7-4091.5  
24 and 22-1-129 and 22-1-125.5 of the Colorado Revised  
25 Statutes. Mr. Commissioner.





1                   COMM. HAMMOND: Thank you, Mr. Chair, and  
2 I'll turn this over to Ms. Rebecca Holmes and Sarah  
3 Matthews who will just lead you through this. We talked  
4 to you about this at the last board meeting when we gave  
5 -- when we gave notice for the rulemaking hearing today.  
6 But the act requires us to generate rules and especially  
7 around the grant program that we outlined at the last  
8 meeting, so Rebecca.

9                   MS. HOLMES: Thank you, Mr. Chair.

10                  CHAIRMAN LUNDEEN: Please, go ahead.

11                  MS. HOLMES: Good morning. So, we have two  
12 sets of opportunity for public comment on two separate  
13 rules for grantmaking today, both of which came from the  
14 2014 legislative session. The first is a public comment  
15 as part of the rulemaking process for the CPR and AED  
16 Grant Program to schools.

17                  This grant, of course, requires the  
18 promulgation of rules for the implementation of the  
19 program. This program does come from state funds and it  
20 is intended to train students and coaches in CPR, and  
21 Sarah Matthew will give you a brief overview, and then I  
22 don't believe we have any public comments scheduled.

23                  CHAIRMAN LUNDEEN: No one's signed up at  
24 this point. I would point out that public comment is  
25 welcome. If anyone would like to speak please let us



1 know. Go ahead, Rebecca. I'm sorry. Rebecca is handed  
2 to you. Please proceed.

3 MS. HOLMES: Thank you. So, the CPR AED  
4 Grant Program, we base the rules strictly on statute. We  
5 are granting \$250,000 of state funds to schools and  
6 districts to train students and staff in cardio-pulmonary  
7 resuscitation and auto external defibrillator training.

8 The coaches also need to be certified as in  
9 statute for CPR and AED, and the certification is a  
10 slightly longer and more intensive program. We based the  
11 coaching staff positions that were required to be  
12 certified on the CHASA list of athletic coaches. And  
13 those coaches would not include volunteer coaches. So, I  
14 don't think there's really anything else that we need to  
15 -- I think that's pretty much it. Yes?

16 UNKNOWN SPEAKER: What's the CHASA list of?

17 MS. HOLMES: The CHASA list of athletic  
18 coaches was a list of approved athletics that they  
19 oversee.

20 UNKNOWN SPEAKER: So, it's about the sport  
21 rather.

22 MS. HOLMES: It would be more about sports,  
23 and less about debate, and we have had that question come  
24 up. So -- any other questions?

25 CHAIRMAN LUNDEEN: Other questions? Okay.



1 Is there anyone present to testify? No, crickets. So,  
2 this concludes, then, the rulemaking hearing for the  
3 rules for the administration of the Instruction in  
4 Cardiopulmonary Resuscitation in Public School's Grants  
5 Program. Is there any further discussion among board  
6 members?

7 We have two opportunities at this juncture,  
8 one, if we are unanimous in our thought, we can adopt  
9 these rules at this point. If we'd like to consider them  
10 further, we can evaluate them further and take a vote  
11 next month. Prepare to move forward, a motion is then in  
12 order. Madam Vice Chair.

13 MS. NEAL: I move to approve the rules for  
14 the administration of the Instruction of Cardiopulmonary  
15 Resuscitation in --

16 CHAIRMAN LUNDEEN: Just say CPU.

17 MS. NEAL: Thank you -- in Public Schools  
18 Grant Program.

19 CHAIRMAN LUNDEEN: That's a proper motion.  
20 Is there a second? Seconds all over. We'll take Elaine.  
21 Elaine hasn't seconded in a while. Is there any  
22 objection? Hearing none, motion carries. And I believe  
23 you two are going to stay at the dais here, or the table?

24 MS. HOLMES: Yes.

25 CHAIRMAN LUNDEEN: State Board of Education



1 will now conduct a public rulemaking hearing for the  
2 rules for the administration of the School Health  
3 Professional Grant Program, 1CCR301-97. State board  
4 approved the notice of rulemaking at it's August 13, 2014  
5 board meeting. The hearing to promulgate these rules was  
6 made known through publication of a public notice on  
7 August 25, 2014 through the Colorado Register, and by  
8 state board notice on October 1, 2014.

9 State Board is authorized to promulgate  
10 these rules pursuant to Article 9, Section 1, Colorado  
11 Constitution and sections 22-2-1061 and a and c. 22-7-10  
12 -- I'm sorry. 22-7-409 subsection 1.5 and 22-96-101 et  
13 sec of the Colorado revised statutes. Commissioner.

14 COMM. HAMMOND: Thank you, Mr. Chair. This  
15 was initiated through the marijuana money that the state  
16 is receiving (indiscernible) sets forth a variety of  
17 programs, and it requires us to have a grant program, and  
18 these are the rules. In accordance with statute and  
19 guidance that we've received that we're going to put  
20 forth.

21 We talked about this at the last board  
22 meeting, so I have Sarah and Matthew -- Sarah, Matthew  
23 and Rebecca Holmes talk about this some more and answer  
24 any of your questions.

25 MS. HOLMES: Thank you, Mr. Chair.



1 CHAIRMAN LUNDEEN: Please, proceed.

2 MS. HOLMES: So, you may recall this is \$2  
3 1/2-million from the marijuana tax revenue, and that tax  
4 revenue is split into two buckets, so of course there is  
5 the first bucket. Where up to 40-million goes to BEST,  
6 and that is the program where we've not yet met, as a  
7 state, that \$40-million threshold.

8 There is, however, a second excise tax, and  
9 that is the money where \$2 1/2-million has been carved  
10 out by the governor's office in the legislature to  
11 address, obviously, ideally the prevention of marijuana  
12 use among youth. The way that the legislation chose to  
13 do that was through a School Health Professionals Grant  
14 that allows schools and school districts to staff up  
15 their health professionals that can work on behavioral  
16 health, and particularly around drug abuse and drug  
17 prevention.

18 So that's where this \$2 1/2-million is  
19 aimed. This is a grant program and a set of rules where  
20 we have received extensive public input and public  
21 comments, some of which I know you'll hear today, and  
22 Sarah can give you a brief overview around some issues in  
23 the rules in two particular areas of public  
24 (indiscernible).

25 UNKNOWN SPEAKER: Mr. Chair.



1 CHAIRMAN LUNDEEN: Please, proceed.

2 UNKNOWN SPEAKER: Thank you. So, for the  
3 rules for this grant we did try to stay close to statute  
4 with two notable exceptions. The first is that we added  
5 family education to the student and staff education piece  
6 because through public comment it was reflected that  
7 substance abuse programs are more effective when they are  
8 inclusive of families.

9 The second is that we add in an assurance  
10 for the Health Kids Colorado Survey, because the data  
11 collected through the survey was collected this past fall  
12 prior to legalization of recreational marijuana. And,  
13 therefore, it will serve as baseline data.

14 In 2013 the state selected schools to  
15 participate from over 115 school districts in a random  
16 sample, about 90 percent of those districts selected in  
17 the state sample agreed to participate in the survey  
18 representing over 100 Colorado districts. Over 250  
19 schools participated with the state, and over half of  
20 those participating schools actually chose to over-sample  
21 and do their entire district in a census so that they  
22 would get school-level and district level data reports  
23 out of that.

24 We also added that we were then able to --  
25 we will then be able to see the impact of the



1 legalization of recreational marijuana and its effect on  
2 our youth. The governor's office has also called out  
3 this data that they will be tracking for this very same  
4 reason. We did not want to introduce a separate and  
5 duplicative survey to schools that would add burden on  
6 their surveys.

7 So those are the two added -- add-ons that  
8 we put into the rules that were not in legislation.

9 CHAIRMAN LUNDEEN: Any direct questions at  
10 this point? We do have some public comment. Dr.  
11 Schroeder.

12 MS. SCHROEDER: I would -- I would, because  
13 I know very little about this, I would just like to know  
14 are there some highly regarded programs for teaching  
15 substance abuse and are they -- do we make  
16 recommendations at CDE? How does a district, once they  
17 get the results from the survey, make the application and  
18 indicate what program they want -- they want to  
19 implement? Is there a battery of acceptable --?

20 UNKNOWN SPEAKER: Mr. Chair.

21 CHAIRMAN LUNDEEN: Please.

22 UNKNOWN SPEAKER: Thank you. So, it was  
23 called out in statute that they would need to use an  
24 evidence-based program, and there is a list of those on  
25 the SAMHSA website but --



1 MS. SCHROEDER: On the what website?

2 UNKNOWN SPEAKER: ON the SAMHSA website.

3 With substance abuse and mental health services  
4 administration. That's where --

5 MS. SCHROEDER: Is that national?

6 UNKNOWN SPEAKER: Yes.

7 MS. SCHROEDER: Thank you.

8 UNKNOWN SPEAKER: However, we define -- we  
9 did not define evidence-based programing in statute. Or  
10 it was not defined in statute, and we chose not to  
11 further define it, because we know that districts will  
12 probably name programs that they would choose to best  
13 meet their student's population, and then we could  
14 determine at that point if they were evidence-based  
15 programs.

16 MS. SCHROEDER: Okay, so when they apply  
17 then you do look at what it is that they hope to  
18 implement.

19 UNKNOWN SPEAKER: Right.

20 MS. SCHROEDER: And then compare that to  
21 what is generally accepted.

22 UNKNOWN SPEAKER: Right.

23 MS. SCHROEDER: Thank you.

24 UNKNOWN SPEAKER: Thank you.

25 CHAIRMAN LUNDEEN: Okay, other questions





1 before we go into the public testimony portion? No? Dr.  
2 Scheffel, go ahead.

3 UNKNOWN SPEAKER: (indiscernible)

4 CHAIRMAN LUNDEEN: Absolutely. We'll take  
5 public testimony and then we can discuss it further, then  
6 we have again the option to either vote unanimously or  
7 hold over for 30 days to consider further and vote at the  
8 November meeting.

9 So, a number of people have signed up. If  
10 there are others who have not signed up, but have  
11 interest, please let the staff know. The first person  
12 signed up is Elizabeth Clark.

13 When you come up to speak, please step to  
14 the lectern, speak into the microphone, state your name,  
15 whom you represent if you represent an organization, or  
16 where you're from if you don't represent an organization,  
17 and please limit your comments to three minutes. Staff  
18 here will let you know how you're doing on time.

19 MS. CLARK: Okay. Thank you, good morning.

20 CHAIRMAN LUNDEEN: Good morning.

21 MS. CLARK: My name's Elizabeth Clark, and  
22 I'm the Colorado Director to the National Association of  
23 School Nurses. I've been a school nurse in Colorado for  
24 the past 20 years, and I have a great deal of experience  
25 with substance abuse issues and students in Colorado



1 schools. I'm currently working in the Boulder Valley  
2 School District as the School Medicaid Coordinator, which  
3 is an administrative position.

4 I really wanted to share some important  
5 things about the School Health Professional Grant. We in  
6 Boulder have participated in the Healthy Kids Colorado,  
7 and there's some really concerning data for our district.  
8 Our students have higher than national trends in several  
9 areas, including alcohol use, binge drinking, ever used  
10 marijuana, current marijuana use, current cocaine use,  
11 ever used ecstasy, smoked cigarettes at school, drank  
12 alcohol at school, offered drugs at school, and alcohol  
13 and drugs before last sex.

14 And I wanted to make sure I included that to  
15 make sure you're all listening, because usually if you  
16 mention sex then, you know, I know you're with me.

17 MS. NEAL: Right.

18 MS. CLARK: And, you know, we really feel  
19 that this data is extremely valuable, because we do have  
20 a baseline to know where we are and where we're moving  
21 forward. And our district actually did oversample. They  
22 included all the middle schools and high schools in our -  
23 - in our school districts, so we'll have some really good  
24 data to move forward.

25 As a school nurse, when I was in middle



1 schools and high school, there wasn't a day passed that I  
2 talked to a student about substance abuse issues, and  
3 often at times would also talk to their parents. I had  
4 one incident I had a student who came in late to school,  
5 wasn't feeling well, of course, comes down to see the  
6 school nurse, so we do our typical routine, checked his  
7 temperature, wasn't running a fever, had him lay down,  
8 pulled a little curtain around him, let him rest for  
9 about 10 minutes, and the plan is then you re-check them  
10 and you send them back to class. Usually they're fine,  
11 you know.

12 Well, this young man, when we pulled the  
13 curtain back, there was a very strong odor, smelled like,  
14 kind of like, burning rope. And I thought, hmm, think I  
15 better let my administrator know. So I contacted the  
16 building principal, and he checked the student and had,  
17 you know, checked his pockets, had a pipe with some  
18 marijuana on him, and he reported to us that him and his  
19 mother had smoked it on the way to school that morning in  
20 the car.

21 So, this is a very, very important issue for  
22 our students in Colorado, and it's really critical that  
23 we include families in this education process to support  
24 the prevention of drug use, and then also for those  
25 students who are actively using to provide intervention



1 services for them.

2 So, I just want to say to you how important  
3 it is to have school health professionals such as school  
4 nurses in schools to provide these desperately needed  
5 prevention and intervention services, and school nurses  
6 don't work alone. We work with counseling staff, social  
7 workers, school psychologists. It's a team approach.  
8 You know, we can't do this alone. We need to work  
9 together to provide these services for students.

10 I do believe that the rules for the school  
11 health professional grant program should be adopted, and  
12 this is a positive program to support our youth in  
13 Colorado. Thank you.

14 CHAIRMAN LUNDEEN: Thank you. Tim Garland.

15 MR. GARLAND: Chairman Lundeen, members of  
16 the board, commissioners, great to be here today. My  
17 name is Tim Garland, I am the Colorado Springs School  
18 District 11 Counseling Chair in Doherty High School. And  
19 I'm -- my principal is with me, Keven Gardner, from  
20 Doherty High School.

21 We, as educators, are charged with preparing  
22 students for a world yet to be imagined. WE prepare  
23 students academically, personally, socially, get them  
24 ready for college, careers, get them ready for the  
25 workforce. We are in the kid business. We try to work



1 on the whole person of the student, and so health  
2 concerns are very, very important, because they do impact  
3 how a student engages with school, and their learning.

4 We, just over a month ago, or just under a  
5 month ago, we had a tragedy at our school. One of our  
6 students walked into the building and took his life. It  
7 shook us. It shook our community. I won't like to you  
8 about that, and it was -- it was a very tough time to  
9 work through that, that day. And the days that followed.  
10 I don't wish that upon anybody.

11 And so, it really has brought to our  
12 attention the need for working on the whole students, not  
13 just the academics. IN fact, what can we do to help  
14 break down those barriers? To the learning process?

15 Out of respect for this student I'm not  
16 going to talk about his situation. Indicators were not  
17 there. He was a happy student. But in other cases, many  
18 students are dealing with a lot of behavioral health,  
19 social emotional issues. 90 percent of completed  
20 suicides are represented -- have those issues  
21 represented.

22 In Colorado we have 20-25 percent of  
23 students are dealing with things such as anxiety,  
24 depression, substance abuse, things of that nature, and  
25 even worse. And so my charge, actually, my goal, is to



1 request more resources in terms of personnel, to work on  
2 programs and training for our students and for our staff,  
3 so that we can help better understand the symptoms and  
4 signs of some of these things going on in their lives  
5 that are creating barriers to education.

6 We also need to reach out to parents. I  
7 appreciate what Elizabeth said. We need to align all  
8 these resources and work together as a community, but  
9 often times parents do not feel that their -- they don't  
10 know where to turn, and they feel alone and isolated. We  
11 want to make sure that they're part of our community, as  
12 well.

13 So, a lot of -- a lot of these partnerships  
14 can happen within the school, but I would also ask that  
15 there's -- there are -- is a need to include partnerships  
16 in the behavioral health world. We have a, like, Peak  
17 View Behavioral Health in Colorado Springs is becoming  
18 such a great patterner for us. Looking at reaching out  
19 to the schools and helping us create this population,  
20 this culture, this positive culture for learning. Thank  
21 you.

22 CHAIRMAN LUNDEEN: Thank you, Tim. Skyler  
23 Copit (ph), or Copit, please correct me on the  
24 pronunciation of your name.

25 MS. COPIT: Co-pit. Can you hear me okay?



1 CHAIRMAN LUNDEEN: Yes, we can. Welcome.

2 MS. COPIT: All right. Good morning. My  
3 name is Skyler Copit, I attend Arapaho High School in  
4 Centennial, and I am a Teen Action Councilmember of Rise  
5 Above, Colorado. Rise Above is a statewide organization  
6 that empowers teens to live a life free from drug abuse.  
7 The teen action council is a group of 24 youth from  
8 across the state who are passionate about informing our  
9 peers about the science and stories behind drug abuse and  
10 addiction.

11 I'm here to speak to my feelings about  
12 behavioral health issues in teens going untreated because  
13 of a lack of funding in schools. Teens suffer from a  
14 variety of things, including, but not limited to,  
15 depression, suicidal behavior, cutting, emotional  
16 reaction to academic difficulties, drug abuse,  
17 relationships, domestic violence, pressure to perform,  
18 peer pressure, anxiety over the future, and other  
19 emotional concerns.

20 I've been trained in effectively reaching  
21 teens to promote informed decision-making around drug use  
22 through education. I am committed to being an advocate in  
23 co-leading a community and school prevention programs.

24 This morning I'm going to share three major  
25 life-changing events that occurred over the fall semester



1 of my sophomore year. On September 13, 2013 a friend of  
2 mine I had the privilege of knowing since kindergarten  
3 took his life at the young age of 16. It is hard to  
4 comprehend when, in a time of desperation and need, how  
5 this young man was unable to reach out. He was under so  
6 much pressure that he withdrew into himself. Students  
7 need to understand that they are not alone in their  
8 feelings. Schools are the perfect place to cultivate  
9 this understanding, because even though he had so many  
10 people that cared for him, he lacked the skills to ask  
11 for help. Had our school had the funding to encourage  
12 small groups, counselors and teacher-student  
13 relationships, then perhaps many of the troublesome  
14 issues could be ameliorated.

15 On October 26, 2013 a precious friend of  
16 mine who was under the influence of drugs and alcohol was  
17 skitching. Skitching is when you hitch a ride holding  
18 onto -- by holding onto a motor vehicle while on a  
19 skateboard. My friend crashed and suffered severe brain  
20 trauma. Had he been afforded the time to truly  
21 understand the implications of abusing substances int his  
22 extremely dangerous and risky way, this incident may have  
23 been avoided.

24 On December 13, 2013 a senior at Arapaho  
25 High School shot and killed Claire Davis. 200 feet away





1 gunshots sound a lot like a giant wrestling mat dropping  
2 from a first story building to a hard wood floor.

3 Barring any serious psychopathology, alternatives to his  
4 suspension prior to his actions on December 13th should  
5 have been considered to contain violence. It is easy to  
6 place blame, but how is a student to learn anything by  
7 eliminating him from the school environment?

8           Maybe if these issues were addressed when  
9 they made their appearance a preventative effort could  
10 have shown him that not all was lost, and that there is a  
11 future. Perhaps the shooting of Claire Davis could have  
12 been averted.

13           We need professional school staff that can  
14 help build in social and emotional skills. Increased  
15 funding and support from the school board would be an  
16 impetus for professionals to work with students to ensure  
17 they were getting the professional help and support that  
18 all adolescents need.

19           My hope is that the school board would be  
20 willing to take a look at what can be achieved and  
21 accomplished from early prevention. The initial costs  
22 required to assist professionals to help these students  
23 by building their abilities to navigate the challenges of  
24 adolescents, would be worth it, and in the long run,  
25 would save money, time and effort. Perhaps even avert



1 another disaster. Thank you.

2 CHAIRMAN LUNDEEN: Thank you. Amy Engleman  
3 (ph).

4 MS. ENGLEMAN: Good morning.

5 CHAIRMAN LUNDEEN: Good morning.

6 MS. ENGLEMAN: My name is Amy Engleman, and  
7 I hold a doctorate in educational psychology, and I  
8 manage the teen outreach for Rise Above, Colorado, a  
9 state-wide teen drug abuse prevention organization.

10 My purpose today is to convey how vitally  
11 important school behavioral health promotion is for  
12 preparing all students for college, career, and life.  
13 First, I want to commend you all and your predecessors  
14 for adopting comprehensive health education standards  
15 back in 2009. As the state's content specialist for  
16 almost two years I know that the schools with the most  
17 aligned health curricula rely on the expertise of their  
18 school health professionals. Especially when it comes to  
19 behavioral health components of these standards, such as  
20 social emotional wellness, and substance use and violence  
21 prevention.

22 Most districts and schools, though, do not  
23 have the funding for their school health professionals to  
24 dedicate the time to schoolwide prevention in addition to  
25 managing their caseloads for IEPs, chronic disease



1 management, and academic guidance. This grant begins to  
2 fill a void in our education system's capacity to truly  
3 support student's academic engagement and success.

4 National data show that these components of  
5 comprehensive health education are essential, because our  
6 students show signs and symptoms of behavioral health  
7 issues at significantly higher rates than the rest of the  
8 country. In terms of substance use their experience of  
9 major depressive episodes and committing and attempting  
10 suicide.

11 Students in every corner of our state are  
12 lashing out for help and building their skills to cope  
13 with the challenges of adolescents in the 21st century,  
14 which now includes a culture of legalized recreational  
15 marijuana. Although behavioral health is not the primary  
16 role of schools, we know that safe and healthy learners -  
17 - students learn better.

18 A recent meta-analysis found that students  
19 who receive explicit social emotional instruction have  
20 test scores in core subjects 11 percentage points higher  
21 than the peers who do not receive this instruction.

22 Social emotional learning focuses on the highly  
23 marketable soft skills that core subjects do not address  
24 such as collaboration, conflict, and stress management.

25 Behavioral health promotion directly impacts students and



1 educator's time on task, as it significantly reduces  
2 students' delinquent behaviors such as bullying,  
3 substance abuse, and truancy.

4 The ripple affects of addiction, violence  
5 and suicide create an immense emotional and economic toll  
6 on schools as well as families and communities.

7 Unmet behavioral health needs often result  
8 in expensive crisis management through day treatment,  
9 hospitalization, or correctional facilities. School-  
10 based behavioral health is a cost-effective warning  
11 system allowing school health professionals to identify  
12 early signs in order to connect families to the help they  
13 need to mitigate major behavioral health issues and  
14 tragedies.

15 Colorado knows the impact of trauma all too  
16 well, and I implore you to hear the cries of help and  
17 improve the rules for this grant program as they stand in  
18 order to equip schools with the professional staffing to  
19 holistically support their students in building the  
20 skills necessary for college, career, and life. Thank  
21 you.

22 CHAIRMAN LUNDEEN: Thank you. Casey  
23 McAndrew.

24 MS. McANDREW: Hello, my name is Casey  
25 McAndrew, and I'm here representing the Youth Action



1 Board at Children's Hospital. The Youth Action board has  
2 15 members from 4 different high school districts and 8  
3 different high schools are represented. And last year we  
4 focused on reducing mental health stigma in high schools  
5 and middle schools.

6 The board has come to mean so much to me,  
7 because the mental health of teenagers is an extremely  
8 personal issue in my life, as I myself was once committed  
9 to a psychiatric hospital. Fortunately, I have such a  
10 strong relationship with my friends and my family that I  
11 was able to ask them for help, but I know that many  
12 others aren't so lucky. And this is why we need to teach  
13 behavioral health topics in schools.

14 There is a strong connotation between mental  
15 health and substance abuse. Suicide is the third leading  
16 cause of death in the United States, resulting in  
17 approximately 4600 deaths each year. Out of the 316.1-  
18 million people who live in the United States, 4600 may  
19 not seem like a lot. However, I would like each and  
20 every one of you to imagine that one of these 4600 people  
21 was a close friend or family member, their death would no  
22 longer just be a statistic to you.

23 And now I would like for you to imagine that  
24 you are the parents of one of the 157,000 children who  
25 have received medical care for self-inflicted injuries.



1 Imagine holding your child's hand as they're taken away  
2 from you, and this is why we need to teach behavioral  
3 health topics in schools.

4 I'm one of the lucky ones, I knew how to ask  
5 for help, but so many people don't. I encourage that you  
6 promote the teaching of coping, strategies seeking help,  
7 and signs and symptoms in order to help prevent this  
8 epidemic that is killing our youth. Thank you.

9 CHAIRMAN LUNDEEN: Thank you, Casey.  
10 Paulette Goswick (ph). Please correct me on your name,  
11 I'm sorry.

12 MS. GOSWICK: Goswick.

13 CHAIRMAN LUNDEEN: Goswick, welcome.

14 MS. GOSWICK: Good morning. My name is  
15 Paulette Goswick, and I'm the Director of Health and  
16 Wellness for the Douglas County School District. I'm  
17 happy to be here. I also would echo the sentiments of  
18 all the other speakers that the rules should be adopted  
19 for the following reasons. When we had SAFE and Drug-  
20 free money in the school district we were able to do some  
21 prevention and intervention things with students with  
22 that money. That money was taken away about five years  
23 ago, and since then that prevention in particular has  
24 fallen off, and unfortunately the intervention needs have  
25 gone up.



1                   We have recently done the Healthy Kids  
2                   survey in our district also, and we also sampled and  
3                   found that 50 percent of our high school students admit  
4                   to using alcohol, and 25 percent admit to using  
5                   marijuana. For the first time we have had elementary  
6                   students bringing marijuana products to school. We have  
7                   never seen that before. And one of the student's  
8                   sentiment was -- to the school administrators when she  
9                   was questioned as to why she would do that, "It's legal."  
10                  So, we really do feel that we need to step up our  
11                  prevention efforts.

12                  This year the school district has adopted  
13                  safety as a fourth leg of their strategic plan, and  
14                  because of that we have got -- opened up a department  
15                  under my care of prevention and intervention. And I'm  
16                  very excited about it, but we are grossly underfunded,  
17                  and at this point are doing what we can with a small  
18                  amount of money. This grant would add to that possibly  
19                  even another whole person or more so that we could  
20                  increase our prevention methods in particular around the  
21                  problems that we foresee given the marijuana  
22                  legalization.

23                  So, again, I implore you to adopt this grant  
24                  as stated in the rules and thank you for your time.

25                  CHAIRMAN LUNDEEN: Thank you. Laurie



1 Selgado (ph), and then anyone else who didn't sign up or  
2 would like to or fill open -- the floor is open following  
3 Laurie.

4 MS. SELGADO: Good morning.

5 CHAIRMAN LUNDEEN: Good morning.

6 MS. SELGADO: My name is Laurie, thank you  
7 for allowing me to offer a story of a parent perspective.  
8 I live in Colorado Springs with my husband and four  
9 children, all of whom are aged 14 and all of whom are in  
10 the 9th grade. After serving as an Airforce pilot I  
11 became a teacher at college, high school and junior high  
12 levels, and I'm now pursuing my PhD.

13 Well, now that you've heard my credentials,  
14 which I noticed are similar to many of your credentials,  
15 I want you to wipe them away from this story, because  
16 none of it mattered when mental illness crept into our  
17 family.

18 At first it was easy to pass off my son's  
19 behaviors as a phase, "Oh, he'll grow out of it. Oh,  
20 he's only 4, or 7, or 10." I had heard about bipolar, but  
21 that didn't happen to children. Right? I have since  
22 learned that this process of normalization, or finding  
23 explanations within your own experiences, is quite  
24 common. You try to make everything fit into what you  
25 know, struggling to explain what you can't understand.





1                   Our life slowly normalized into a hellish  
2                   existence. And I hate to admit, but there were days  
3                   where I started to believe that my son might be  
4                   possessed. We tried turning to others, but they didn't  
5                   understand, and together we were sort of like a bunch of  
6                   blind men trying to explain an elephant. "Your son is a  
7                   bad kid. You're a bad parent." And we began to despair,  
8                   because the tools that the school seemed to have were  
9                   suspension and expulsion. And we began to believe that  
10                  our only recourse was going to be through the legal  
11                  system, through the courts, through the prisons, or  
12                  through the rehab centers.

13                  But we were fortunate, some of our blindness  
14                  was lifted by books, some by a very few school  
15                  professionals who were brave enough and kind enough to  
16                  help us break the cycle of normalization.

17                  So, I ask you today to please ensure that  
18                  families are not excluded from the rulemaking process.  
19                  Please find ways for families and schools and health  
20                  professionals to partner together and shed light on the  
21                  links between a child's mental health, their potential  
22                  for substance abuse, and their success in school and in  
23                  life.

24                  As a teacher I know that this type of  
25                  partnership did not increase my workload or add to my job



1 description, just the opposite. It helped me help my  
2 students.

3 Thank you for listening to my story and  
4 thank you for your service as you craft a rulemaking  
5 process that will benefit the whole child. If you have  
6 any questions, I'm happy to answer them.

7 CHAIRMAN LUNDEEN: Thank you. Is there  
8 anyone else present to testify on this issue? Please,  
9 step forward, state your name.

10 MS. KENNEDY: Hi. I'm Heather Kennedy, and  
11 I am a, I guess (indiscernible) Youth Engagement  
12 Coordinator at Children's Hospital. I'm also a  
13 researcher for the Creative Arts Therapy Program there,  
14 and I help co-facilitate the Mental Health Youth Action  
15 Board, of which Casey is an amazing, talented member.

16 And I just had to speak on behalf of the  
17 Mental Health Youth Action Board, which represents now 15  
18 teens from 4 different school districts, and last year we  
19 simply asked the teens, "We want you to have your  
20 antennas up." They didn't know necessarily what mental  
21 health was, because no one had ever told them. They knew  
22 that there was significant problems in their schools, and  
23 they came to us week after week after week as we had  
24 discussions and they had their antennas up, and what  
25 their antennas, or ears, caught was that no one at their



1 schools knew how to help somebody in need. They didn't  
2 even know if they person -- or when they would need help,  
3 or what it would look like if they were to ask for help.  
4 They were scared, they were confused, and they didn't  
5 even know how to deal with their own personal emotions.

6 And these are teens who have experienced  
7 mental health and some who had not mental health issues,  
8 and so we offered a training call to Youth Mental Health  
9 First Aid, which is a CPR-like training to help with  
10 young people in crisis. And I personally -- I was  
11 trained in youth mental health first aid in, well, mental  
12 health first aid in 2009, and I never, as an adult, never  
13 used those skills. We trained our teens in February of  
14 last year, and the day after they complete the training a  
15 teen texted me and said, "Thank you so much for teaching  
16 me those skills. I helped save my friend's life." They  
17 used it the very next day. These teens need the skills  
18 on how to both understand their own emotions, and how to  
19 help others.

20 I'm also an advocate for young people and  
21 involving all young people in all the programs, policies  
22 and practices that impact their lives, so I would  
23 encourage you to think about how young people can be  
24 involved not only in understanding and advocating for  
25 which programs get implemented in their schools, but also



1 what kinds of things we say about mental health, and  
2 engaging in people in those decisions.

3 And, lastly, I just thought I'd mention that  
4 the caller -- Children's Hospital's strategic plan, as  
5 part of the public health impact pyramid, identified that  
6 prevention is a core need, in order to reduce the amount  
7 of mental health kind of crises that we deal with. And  
8 yet, we're not well positioned to that at Children's  
9 Hospital, and we must rely on our partners and prevention  
10 is a large part of making the biggest difference for the  
11 greatest number do reduce significant mental health  
12 crises. Thank you.

13 CHAIRMAN LUNDEEN: Thank you very much.  
14 Anyone else wishing to testify on this issue? Okay,  
15 seeing none, I'll come back to the board. Questions,  
16 conversation?

17 MS. NEAL: I had a few comments. I was  
18 thinking as they're -- thank you all very much for your  
19 testimony, because you brought a lot of things to mind  
20 that we needed to hear. I'm sure the irony is not lost  
21 on anyone that we're providing this program with  
22 marijuana money, but as long as it's there we're -- we  
23 need to take advantage of it.

24 I just appreciate all of you, and what you  
25 had to say, and it made me think about a lot of things,



1 like mental health and teen substance abuse, which comes  
2 first, you know, if it's the chicken or the egg. And I  
3 assume it happens both ways, but I just wanted to thank  
4 you all for testifying. You really made it real for me,  
5 and I imagine for most of us.

6 CHAIRMAN LUNDEEN: Questions? Pam? Oh,  
7 sorry. Angelika, we'll come back to you.

8 MS. MAZANEC: Yes, thank you all for your  
9 comment. I'm wondering what will it look like, this  
10 involving of family in schools? Mental health and  
11 behavioral counseling. I'm just wondering how it is  
12 you're going to -- how that's going to look. I mean, is  
13 it -- are -- is -- are the school counselors going to be  
14 actually counseling entire families, or are these group  
15 kinds of presentations for families?

16 MS. HOLMES: Mr. Chair. That is, I think,  
17 highly at the discretion of local school boards once they  
18 take the money and staff these professionals in terms of  
19 how they encourage their professionals to work with  
20 parents, if that's using these evidence-based programs,  
21 many of which do have parent education components around  
22 identifying and preventing substance abuse.

23 I'd ask Sarah just to read the line in the  
24 rule that has had the parent addition to it.

25 UNKNOWN SPEAKER: Sure, sorry. I had it



1 (indiscernible)

2 CHAIRMAN LUNDEEN: Yeah, Angelika go ahead  
3 and comment while she's looking that up.

4 MS. NEAL: Oh, I think she's ready.

5 CHAIRMAN LUNDEEN: Okay, please proceed  
6 then.

7 UNKNOWN SPEAKER: So, the line in rule says  
8 that the education provider's plan to use the grant  
9 monies, including the extent to which the grant monies  
10 will be used to increase the number of school health  
11 professionals at recipient secondary schools and to  
12 provide substance abuse and behavioral healthcare  
13 services at recipient's secondary schools, including  
14 screenings, referrals to community organizations, and  
15 training for students, families and staff on substance  
16 abuse issues. And that -- do you want the number.

17 CHAIRMAN LUNDEEN: What's the cite on that?

18 UNKNOWN SPEAKER: 2.012(b). That's --

19 MS. MAZANEC: And can I ask a follow up?

20 CHAIRMAN LUNDEEN: Please, go ahead.

21 MS. MAZANEC: So, given what you just said,  
22 that would still -- all of what you just said is really  
23 up to the school districts, the organizations that they  
24 refer to, it's all going to be by local school district.  
25 Okay.



1                   COMM. HAMMOND: That clearly falls in the  
2 domain of (indiscernible) control on this particular  
3 issue.

4                   CHAIRMAN LUNDEEN: So, the root -- let me  
5 just kind of follow up, because I'm curious. The root  
6 issue trying to get at is to promote the engagement of  
7 family, Pam, is what you're seeking? Or we have --  
8 because I'm wondering if, in the crafting, you know,  
9 because this really is about the approval of a grant  
10 application, and so the crafting of the grant application  
11 says, hey, we give you bonus points if you're, in fact,  
12 engaging family in a significant way. Is that what  
13 you're driving at, Pam, trying to get at?

14                  MS. MAZANEC: Or if you plan to?

15                  CHAIRMAN LUNDEEN: Yeah to --

16                  MS. MAZANEC: Yeah. Well, I was actually --  
17 I was just trying to draw that -- what it would look like  
18 if they're trying to expand the service that they are  
19 providing currently in the -- in counseling in school  
20 districts. I just wanted to know what that was going to  
21 look like per school district, or whether there was an  
22 overarching plan for how it would look. So --

23                  MS. HOLMES: Mr. Chair.

24                  CHAIRMAN LUNDEEN: Please.

25                  MS. MAZANEC: I got the answer I was looking



1 for, so it's a political --

2 MS. HOLMES: Okay. I'll just add, its' not  
3 really bonus points, it's listed there as a minimum  
4 condition of an application.

5 CHAIRMAN LUNDEEN: Okay. Other questions?  
6 Dr. Scheffel? Oh, I'm sorry I'm -- forgive me.  
7 Angelika, twice passed over, I'm coming to you at this  
8 point.

9 MS. SCHROEDER: I do want to ditto my  
10 colleague Marcia's remarks. I really appreciate all the  
11 speakers coming forward and sharing with us. I have a  
12 better understanding. I have a technical question that  
13 got me worried a little bit. When you said that you've  
14 added in family, and that it wasn't in the law, we have  
15 had rules tossed back to us before by --

16 UNKNOWN SPEAKER: I believe the Ledge  
17 Council.

18 MS. SCHROEDER: The Ledge Council, so are we  
19 at risk on that, do we need to think about requesting  
20 something from the legislature in order to ensure that  
21 this stays in there? Because it seemed to be your  
22 priorities, I think it mirrors ours, to make it a more  
23 comprehensive effort. Having known families that have  
24 dealt with kids and substance abuse, the parents have  
25 some real understanding needs as well. It's very clear





1 to me. But are we going to get into a back and forth,  
2 Robert, do you think, or --?

3 COMM. HAMMOND: We've talked about -- go  
4 ahead.

5 MS. HOLMES: Mr. Chair, that addition  
6 largely came from expertise in the mental health field  
7 who have expertise in drug abuse and then -- in drug  
8 prevention and have cited evidence around the efficacy of  
9 family involvement.

10 We've worked repeatedly with the Governor's  
11 Office who essentially is overseeing the distribution of  
12 these grant dollars, and they've indicated at every stage  
13 that they're comfortable with that addition.

14 MS. SCHROEDER: So, we have an argument to  
15 make with -- to -- with Ledge Council.

16 MS. HOLMES: Certainly.

17 COMM. HAMMOND: Mr. Chair.

18 CHAIRMAN LUNDEEN: Please.

19 COMM. HAMMOND: We do, and I think it's a  
20 prevailing argument, that from everything we've talked  
21 about this it makes sense -- it -- we think it's aligned,  
22 and if we are challenged on it, it's -- we can make a  
23 case, because it is appropriate.

24 MS. SCHROEDER: Okay. I just wanted to be  
25 sure that we were prepared for that. Thank you.



1                   COMM. HAMMOND: Uh-huh, but anything, when  
2 we go through that process, anything can come back, but  
3 we'll have to explain it. And if we do, I think we can  
4 prevail on this issue.

5                   MS. SCHROEDER: Okay, thanks.

6                   UNKNOWN SPEAKER: Mr. Chair, what I would  
7 add to that is procedurally Ledge Council works with us  
8 as far as the timing and we'll -- and they find  
9 (indiscernible) far as the department doesn't believe at  
10 this time that they do, there's always time for us to  
11 seek a legislative fix.

12                  MS. SCHROEDER: Good. Okay, great. Thank  
13 you.

14                  CHAIRMAN LUNDEEN: Dr. Scheffel.

15                  MS. SCHEFFEL: I also wanted to echo thanks  
16 for these great presentations. It's so instructive to  
17 the issues that are our kids are facing in schools. I  
18 just have three clarifying questions, the first is, am I  
19 correct that each grant will then define what behavioral  
20 healthcare services are offered and how they're offered?  
21 Is that right? And so, these are broad outlines, but the  
22 local application will define that?

23                  MS. HOLMES: Mr. Chair. That's correct.

24                  MS. SCHEFFEL: Okay. And then two other  
25 questions then. How is the -- how are the grants



1 assessed for effectiveness, or how do we know they're  
2 working? I see a couple metrics here, the number of  
3 school health professionals hired, the incidents of drug  
4 use and whether it decreases or not, maybe the number of  
5 trainings. Again, does each grant put forth an  
6 assessment plan that is linked to how effective the  
7 monies were used?

8 CHAIRMAN LUNDEEN: Please.

9 MS. HOLMES: Mr. Chair, thank you. Yes,  
10 they would be able to do their own assessment, and we  
11 just would be asking for those at the state level.

12 MS. SCHEFFEL: Those three metrics, okay.  
13 And then finally how about the privacy issues on the part  
14 of the student and the parents? How is that addressed?  
15 Are there any guidelines? I don't see any guidelines in  
16 this document.

17 MS. HOLMES: There were no guidelines around  
18 privacy in the statute. Certainly districts have policies  
19 in place around the privacy of students who are  
20 experiencing either just prevention training or direct  
21 services, but that's not listed in statute, has not been  
22 put into rule, but certainly could be reviewed as part of  
23 a grant application.

24 MS. SCHEFFEL: So, does it make sense to add  
25 something like that into this -- in these rules, or --?



1 I mean, how does it make its way in for the protection of  
2 the kids and the parents?

3 MS. HOLMES: Mr. Chair. At this stage we  
4 would add it not in rule, but in the grant review  
5 process, which takes place between now and December.

6 MS. SCHEFFEL: So that would be in the RFP.

7 MS. HOLMES: Correct.

8 COMM. HAMMOND: And we can do that.

9 MS. SCHEFFEL: Are there any guidelines at  
10 CDE that outline the kind of language that would be in  
11 the RFP?

12 COMM. HAMMOND: Yeah, we can do -- we won't  
13 collect any -- we're not collecting any personally  
14 identifiable information, and it would be at the  
15 district, but we can add that protection as a part of the  
16 RFP given all the other stuff we have on privacy. I feel  
17 comfortable with that.

18 MS. SCHEFFEL: And is it from the lens of  
19 protecting kids when that's needed, but also giving  
20 parents a window into what's happening? I mean, I don't  
21 know how that language looks. Sometimes the parents and  
22 the kids are sort of separate, and the parents don't --  
23 aren't privy to what's going on. Other times, I mean,  
24 there's a judgement call as to whether or not they should  
25 be. But the question is how do you think about those



1 privacy issues. Advocating for parent rights, but also -  
2 -

3 UNKNOWN SPEAKER: We have to talk about  
4 that, because that's pretty much a local control  
5 decision, and not -- that particular matter. I mean, we  
6 can cover some of that, but it still is up to a district.

7 MS. SCHEFFEL: So, there's no guidelines  
8 that would be in the RFP on our end that we typically use  
9 on these kinds of grants?

10 UNKNOWN SPEAKER: No. NO.

11 MS. SCHEFFEL: All right, thank you.

12 CHAIRMAN LUNDEEN: Other questions,  
13 comments? Elaine?

14 MS. BERMAN: Thank you to all the people who  
15 spoke, you really did a superb, powerful job. You were  
16 talking about that there are two pots. So, in this pot  
17 that we've been allocated 2-million, how big is that pot?

18 CHAIRMAN LUNDEEN: These are the pot pots  
19 we're talking about.

20 MS. NEAL: Yes.

21 MS. BERMAN: Oh, yes. Yes, yes, yes.

22 CHAIRMAN LUNDEEN: Just wanted to be clear.

23 UNKNOWN SPEAKER: The opportunity for puns  
24 here is --

25 MS. BERMAN: Amount, how big is that amount.



1 MS. HOLMES: Mr. Chair.

2 CHAIRMAN LUNDEEN: Please.

3 MS. HOLMES: I had hoped that Andrew  
4 Freedman would be here from the Governor's Office, he's  
5 not. Sarah, do you know that number?

6 UNKNOWN SPEAKER: I do not. I know we were  
7 allocated 2.5-million. I don't know in -- I don't know  
8 how the overall budget went. I believe that they've  
9 landed at 16-million, but I would want to double check  
10 that.

11 MS. BERMAN: Well, I probably could make my  
12 point without knowing the exact number, and hopefully  
13 this will get to the ears of Andrew Freeman and others in  
14 the Governor's Office. I would strongly urge every,  
15 single speaker who came today to get in front of the  
16 people that make the decisions about how much money,  
17 because in my opinion 2.5-million is not enough. For the  
18 work that you have just described, and the importance of  
19 the issue and the need that's out there, there should be  
20 considerably more marijuana money allocated for this  
21 issue. So, I commend everybody, you're doing very hard  
22 work, and let's get more money. And I'm fine with the  
23 rules.

24 CHAIRMAN LUNDEEN: Okay. Other questions,  
25 comments? Okay, so procedure. Let's just make -- I want



1 to make sure that we're all clear on where we're at  
2 procedurally. We've got emergency rules in place on this  
3 now, so this is bumping forward under those emergency  
4 rules. We, as a board, have an option if we're  
5 completely comfortable and unanimous at this point, to  
6 move at this point. If we'd like another 30 days,  
7 there's 30 days baked into the cake, so to speak, on this  
8 already. But we want to move forward, or --? Interested  
9 in taking --? All right, so let's --

10 (Meeting adjourned)

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C E R T I F I C A T E

I, Kimberly C. McCright, Certified Vendor and Notary, do hereby certify that the above-mentioned matter occurred as hereinbefore set out.

I FURTHER CERTIFY THAT the proceedings of such were reported by me or under my supervision, later reduced to typewritten form under my supervision and control and that the foregoing pages are a full, true and correct transcription of the original notes.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 25th day of May, 2019.

/s/ Kimberly C. McCright  
Kimberly C. McCright  
Certified Vendor and Notary Public

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