

Mercy Health Sciences Pathways Junior and Senior High School:

Executive Summary

December 2020

I. The Call: A Need for Mercy

The times in which we live call for much.

The devastating path of COVID-19 – with health and economic impacts far crueler in breadth and intensity in marginalized communities - has elevated the need for an educated and diverse public health workforce. It has laid bare the need for jobs that can meaningfully contribute to better health outcomes in these communities, and flourish in a rapidly changing COVID-19/post-COVID-19 economy.

The recent series of tragic deaths at the hands of law enforcement intensifies the need to dismantle systems of racial oppression, and give rise to a more inclusive vision for America, one which finally applies the original ideals of this nation to all people. The need for systems-level reform to undo centuries of brutal racist actions and policies in all facets of our lives – from education to health care to housing to policing to countless others – will demand that our country is led by an educated and activated populace. We need more young people capable – at the most basic and the most human level – of persuading others’ hearts and minds to believe in and to act upon anti-racism.

Indeed, the times in which we live call for mercy and justice.

In reading these signs of the times, the Sisters of Mercy - through the Mercy Education System of the Americas (MESA), a body entrusted with overseeing its sponsored schools - has only deepened its resolve to work with its 54 international schools, 34 of which are in the United States, all to amplify the voices of the marginalized. MESA believes that the concerns of the marginalized are all of our concerns, their needs are our needs, and – in terms of providing an education - their children are our children. It is a belief that Catherine McAuley’s original effort to address poverty now finds its contemporary expression in the complexity and interconnectedness of the Critical Concerns of the Sisters of Mercy of the Americas: Women, Racism, Immigration, Earth, Non-violence.

This understanding is expressed in the following description of Racism

We believe racism is an evil affecting us all. We work to mobilize sisters and associates in recognizing and dismantling institutional racism in order to become an anti-racist multicultural community. We advocate for upholding the voting rights of marginalized Americans and for a fair criminal justice system, and point out racism wherever it exists.¹

It is undeniable that the good and just work of amplifying these voices in MESA’s schools must continue; MESA remains as committed to that necessary and transformative work today, as it did nearly two hundred years ago, when the founder of the Sisters of Mercy - Catherine McAuley - opened the House of Mercy on Lower Baggot Street in Dublin, Ireland.

¹ For a further description of the Critical Concerns and resources for incorporating into school curriculum, see Mercy Education System of the Americas, Critical Concern Resources, available at <https://mercyedu.org/resources/educational-resources/critical-concerns-resources/>. (Last Visited June 2020).

It is also undeniable that the structural aspects of operating a MESA school serving low income students in 2020 make this extremely challenging.

The families that certain MESA schools serve – families at or near the poverty line - simply cannot pay the full cost of educating their children in MESA schools, and the staff that work within our schools – their commitment total, their labors herculean – deserve a just wage. Other revenue centers – most prominently, the generosity of private philanthropy to fund operating expenses – are at best unpredictable and at worst dwindling in our communities that need them the most. MESA, like the rest of the Catholic school sector in the last thirty-five years, has not been immune to the closure of its schools, with COVID-19 playing a major role in accelerating the closure of a MESA-sponsored school in the spring of 2020.

And yet, now more than ever, the times call for mercy and justice. It calls for the unique strengths, the time-honored traditions and the deeply-held beliefs of the Sisters of Mercy.

It is with this acknowledgement of where the need is – to be in greater solidarity with, to raise the voices of, to be an advocate for, and to provide a viable future for families and children of color – that MESA believes that now is a seminal moment in its history. It is a moment for not simply holding onto its past, with its current schools that are courageously keeping the flame of Mercy aglow in a world that needs its warmth and light. MESA also believes it is a moment to claim a stake in the future and to re-imagine how a new school can both transform a community and function using a more structurally viable financial model.

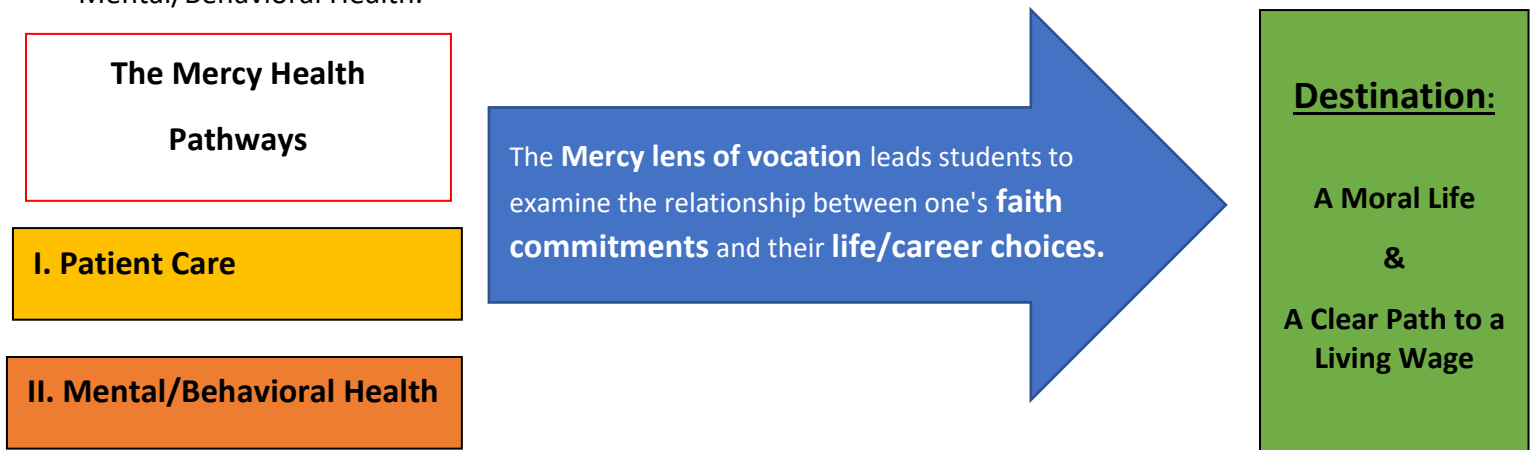
The proposed school in this design plan – Mercy Health Sciences Pathways Junior and Senior High School – is just such a stake in the future – a future with more hope, a future with more love, a future with more mercy.

II. The Response: Mercy Health Sciences Pathways Junior/Senior High School

Mercy Health Sciences Pathways Junior and Senior High School (“Mercy Health”) will be a Catholic career and technical junior/senior high school sponsored by the Sisters of Mercy, which will prepare historically marginalized students for both the health sciences workforce and post-secondary educational success.

Within a 21st century learning environment, Mercy Health will provide a Catholic education and a comprehensive, academic, career and technical school experience aligned to career pathways in the health sciences. In the Mercy tradition, the school lives the Gospel in word and action and promotes service to others. Harnessing the support of a diverse and collaborative group of school stakeholders – including students, families, educators, the community, industry and institutes of higher education – a Mercy Pathways graduate will be a highly competent, compassionate, and contributing member of the global community, ready to dismantle social inequities and embrace the dynamism of the times in which they live.

Mercy Health students will be empowered to pursue their fullest academic and personal potential in the Mercy tradition of promoting love and mercy for all. To that end, we believe a student’s agency to become their best selves should be organized around rigorous Health Pathways: a six-year approach that prioritizes extensive career interest/exploration in a health sciences field in a student’s 7th through 10th grade years and specialization/application for a specific health-related position in their 11th/12th grade years. Students can choose one of two pathways – sufficiently broad to provide a range of experience and yet organized in specific sequences – which are described as 1) Patient Care and 2) Mental/Behavioral Health.



In both of these pathways, Mercy Health is guided by both the *spiritual* (shaping students to hear and to live the call of the Gospel), and the *practical* (providing students with a clear path to a living wage upon graduation).² As a result, the programmatic arc for the school necessitates a graduated and deepening exposure to a specific health-related career interest, one that we intend to accomplish in the following manner:

² For our working definition of “living wage,” used throughout this School Design Plan, please see the section of this plan entitled “Why Pathways, Why Now.”

Table 1: Arc of a Mercy Health Student

	Phase 1: Explore	Phase 2: Define and Decide		Phase 3: Specialize and Apply
Grade(s):	7 th /8 th	9 th	10 th	11 th /12 th
Goal:	Beginning to explore the different health-related fields through low-stakes, integrated activities.	Examining the skills, knowledge, and passions needed to pursue successful careers in health-related field, through small-scale project-based learning investigations, culminating in their tentative selection of one of the two health pathways: I. Patient Care II. Mental & Behavioral Health	Deepening learning about the explicit content and skills associated with their pathway. These experiences will help students decide whether to move deeper into their tentatively selected pathway or pivot to another pathway.	Enhancing aptitudes and interests in their pathways learning in increasingly explicit industry-related courses, to take place at the high school itself or within the context of a dual credit ³ experience. Preparing for and experiencing intensive internship at an industry site.
Place of Learning:	✓ Mercy Health Junior High	✓ Mercy Health Senior High	✓ Mercy Health Senior High	<ul style="list-style-type: none"> ✓ Mercy Health Senior High ✓ Industry Internship ✓ Institute of Higher Education (if applicable) ✓ Industry Certificate Granting Body (if applicable)

³ Dual credit is defined as a program that “allows high school students to take college level courses; these courses may be taught on the campus of a postsecondary institution, through distance education, or on a high school campus (excludes Advanced Placement (AP) and International Baccalaureate (IB) programs).” See *Table H153. Percentage of fall 2009 public school ninth-graders in 2012 whose school counselors report that their school offers dual credit programs*, National Center for Education Statistics, available at <https://nces.ed.gov/surveys/ctes/tables/h153.asp> (Last Visited June 2020)

With the centrality of the path to a living wage in mind, students will graduate from the Mercy Health pathways with significant progress toward – if not gain all requirements of entry into - a “middle skills” job. A middle skills job is one which necessitates skills that typically come from training beyond high school, but not as credit-intensive as a bachelor’s degree. The Mercy Health model is one in which graduates will receive the bulk of that training while in high school.⁴ This middle skills job is one that can be put to immediate use as it 1) will provide the student with a significantly better paying job than the student otherwise would have yielded with a typical high school diploma, 2) will help the student shoulder the costs of pursuing post-secondary education, and more importantly, 3) will steward the students’ interest in that specific pathways with post-secondary education.

Table 2: The Alignment of the Two Health Pathways to a Living Wage
Color Indicates Progress Toward Median Living Wage Based Upon Pathway

	Over 110% of Living Wage
	Over 90%, and up to 110% of Living Wage
	Over 75%, and up to 90% of Living Wage
	Over 65%, and up to 75% of Living Wage
	Over 50%, and up to 65% of Living Wage

Living Wage	Pathway	Sample Position Upon Graduation from High School (as a result of Pathways)		Sample Position Upon Graduation from a Subbaccalaureate Occupational Program ⁵ (as a result of Pathways)		Sample Position Upon Graduation with Bachelor’s Degree (as a result of Pathways)	
		Title	Wage	Title	Wage	Title	Wage
\$24.39 hour	1. Patient Care	Physical therapist aides and Home Health aides	\$12.98	Physical Therapist Assistant	\$28.26	Registered Nurse	\$35.24
		Medical assistants	\$16.73	Occupational Therapy Assistant	\$29.57	Clinical Laboratory Technologist	\$25.54
		Phlebotomists	\$17.07	MRI Technologist	\$35.29	Dietician/Nutritionist	\$29.46
	2. Mental/Behavioral Health	Psychiatric Aides	\$14.96	Exclusively Transition to Bachelor’s Degree	Social Worker (Family)	\$22.78	
		Social and Human Service Assistants	\$16.86		Social Worker (Other)	\$29.44	
		Community Health Workers	\$19.40		Health Educator	\$26.55	

⁴ For further reading on the critical role of middle skills jobs in the United States economy, See *Who Can Fix the Middle Skills Gap*, Harvard Business Review, available at <https://hbr.org/2012/12/who-can-fix-the-middle-skills-gap> (Last Visited June 2020) and *Pathways to Middle-Skill Allied Health Care Occupations*, Issues in Science and Technology, available at <https://issues.org/pathways-to-middle-skill-allied-health-care-occupations/> (Last Visited June 2020).

⁵ A subbaccalaureate credential – typically an industry certificate or associate’s degree – provides “skills that require additional training beyond high school, but less than a bachelor’s degree.” For further study, see *Trends in Subbaccalaureate Occupational Awards: 2003 to 2015*, National Center for Education Statistics, available at <https://nces.ed.gov/pubs2018/2018010.pdf> (Last Visited June 2020)

III. The Plan: The Launch of Mercy Health

Before March of 2020, the planning and design process for Mercy Health had included promising and extensive dialogue with potential local stakeholders - including Catholic ordinaries and school superintendent - who had expressed considerable interest in being the inaugural location for Mercy Health. These exploratory and energized conversations were put on hold with the advent of COVID-19, with both dioceses and MESA understandably taking stock of the pandemic’s impact on their institutions. MESA, however, has confidence that – once there is some societal settling, if not breakthroughs (health-wise, economic-wise) – the need for Mercy Health, let alone the underlying financial and programmatic underpinnings, will continue to be substantial.

To that end, MESA’s current and best thinking – again, assuming some societal settling in the coming years – is that Mercy Health could launch as early as the fall of 2022. In this timetable, the student enrollment growth plan would begin with 7th and 9th grades, and grow to a 7th-12th model in four years, in alignment with the following enrollment table:

Table 3: Student Enrollment Plan for Mercy Health Sciences Pathways Junior/Senior High School					
	2022-23	2023-24	2024-25	2025-26	2026-27
Total Enrollment	177	348	461	568	568
Senior High School					
12 th Grade				107	107
11 th Grade			113	113	113
10 th Grade		119	119	119	119
9 th Grade	125	125	125	125	125
Junior High School					
8 th Grade		52	52	52	52
7 th Grade	52	52	52	52	52

In order to deliver on this ambitious enrollment plan, specific benchmarks must be met in the planning and design of the school. Each of the below represents important conditions for the school to open. That being said, there are a few benchmarks which are absolutely essential, and therefore, the attainment of these goals (marked in red) by the date stipulated must be accomplished in order for this project to move forward.

Table 4: Key Benchmarks for the Launch of Mercy Health

Integral Component for Launch	Time Period ⁶					
	Fall 2020 [20 to 24 Months from Launch]	Winter 2021 [18 to 20 Months from Launch]	Spring – Summer 2021 [12 to 18 Months from Launch]	Fall 2021 [9 to 12 Months from Launch]	Winter 2022 [6-9 Months from Launch]	Spring-Summer 2022 [0 to 6 Months from Launch]
<i>I. Diocesan Support</i>	Goal: Socializing Mercy Health Model with Interested Dioceses Driver: MESA	Goal: Solidifying Agreement with Dioceses (including facility support) Driver: MESA	Goal: Engaging Diocese – and Building Relationships with Diocesan Leadership - to Ensure Key Areas of Partnership (enrollment support, facility support, alignment/support with local fundraising). Driver: MESA (until Founder Named)	Goal: Continue to Engage Diocese – and Build Relationships with Diocesan Leadership - to Ensure Key Areas of Partnership are in Place. Driver: Founder		
<i>II. Founding Leadership/Staffing</i>	Goal: Initiating Recruitment of Founding President of Mercy Health Driver: MESA	Goal: Selecting Founding President of Mercy Health Driver: MESA	Goal: Rooting Founding President of Mercy Health in the Mercy charism Driver: MESA/Founding President	Goal: Rooting Founding President – and Founding Leadership Team and Staff of Mercy Health in the Mercy charism. Driver: MESA/Founding President		

⁶ The time period includes 1) dates as scheduled against a Fall 2022 launch and 2) months prior to launch (lest there is a COVID-19 delay impacting a Fall 2022 launch).

	Fall 2020 [20 to 24 Months from Launch]	Winter 2021 [18 to 20 Months from Launch]	Spring – Summer 2021 [12 to 18 Months from Launch]	Fall 2021 [9 to 12 Months from Launch]	Winter 2022 [6-9 Months from Launch]	Spring-Summer 2022 [0 to 6 Months from Launch]
<p><i>III. Founding Leadership/Staffing</i></p> <p><i>(Continued)</i></p>			<p>Goal: Initiating recruitment and Selection of Director of Admissions, Director of Community Partnerships, and Executive Assistant.</p> <p>Driver: Founding President</p>	<p>Goal: Initiating recruitment and Selection of Principal; training of Principal to being as early as practical.</p> <p>Driver: Founding President</p>	<p>Goal(s): Initiating recruitment and Selection of Founding Assistant Principal for Junior High, as well as Director of Finance; initiate recruitment of founding faculty and staff.</p> <p>Driver: Founding President/Principal</p>	<p>Goal: Complete Selection of Staff; training and preparation of staff for launch of Mercy Health</p> <p>Driver: Founding President/Principal</p>
<p><i>IV. Founding Board</i></p>	<p>Goal: Seek individuals who would be willing to serve on an advisory (planning and design) board</p> <p>Driver: MESA (and Founding President, if selected)</p>		<p>Goal: Select Founding Board Chair (potentially from advisory board)</p> <p>Driver: Founding President and MESA</p>	<p>Goal: Selecting of the Founding Board (potentially from advisory board), ensuring key constituencies with expertise in the following:</p> <ul style="list-style-type: none"> - Mercy Mission and Identity, - Financial Accounting (including knowledge of public voucher), - Philanthropy, - Local Partners (Hospitals, Colleges, etc.), - Commercial Real Estate, and - Catholic School Leadership <p>Driver: Founding President and MESA</p>		
<p><i>V. Enrollment</i></p>	<p>Goal: Conducting Initial Enrollment Analysis to Understand Demand</p> <p>Driver: MESA</p>		<p>Goal: Securing “Intent to Enroll” from Families of 90 students (~50% of entering student body)</p> <p>Driver: Founding President</p>	<p>Goal: Securing “Intent to Enroll” from Families (67% of entering student body)</p> <p>Driver: Founding President/Director of Admissions</p>	<p>Goal: Securing Commitments from Families (90% of entering student body)</p> <p>Driver: Founding President/Director of Admissions</p>	<p>Goal: Securing Commitments from Families (100% of entering student body)</p> <p>Driver: Founding President/Director of Admissions</p>

	Fall 2020 [20 to 24 Months from Launch]	Winter 2021 [18- to 20 Months from Launch]	Spring – Summer 2021 [12 to 18 Months from Launch]	Fall 2021 [9 to 12 Months from Launch]	Winter 2022 [6-9 Months from Launch]	Spring-Summer 2022 [0 to 6 Months from Launch]
<i>VI. Facility</i>	Goal: Initiate Facility Feasibility Study to Identify Possible Sites Driver: MESA	Goal: Initiate Negotiations for Securing Facility Driver: MESA	Goal(s): Securing Agreement for Facility; Initiate Construction or Reconfiguration to Tailor Space to Mercy Health Model Driver: Founding President	Goal: Continue Construction or Reconfiguration Driver: Founding President	Goal: Finalize Construction and Reconfiguration; Initiate Move into Facility Driver: Founding President	Goal: Complete Move into Facility Driver: Founding President
<i>VII. Fundraising</i>	Goal: Engage in Outreach to Philanthropy Interested in Mercy Health both Capital Requirements (e.g. improvements to facilities) and Operational Requirements (e.g. support of schools’ budget in growth to capacity) Driver: MESA		Goal: Secure Commitments from Philanthropy for Capital Requirements and Operational Requirements Necessary for School Launch Driver: Founding President		Goal(s): Secure Commitments from Philanthropy for Capital Requirements and Operational Requirements Necessary for School (In Growth to Capacity); Initiate recruitment and selection of Director of Development Driver: Founding President	
<i>VIII. Hospital Partnership⁷</i>	Goal: Initiate Feasibility Study to Identify Potential Hospital Partnership Driver: MESA		Goal: Secure Partnership Agreement with Hospital (internships, work-based learning opportunities, shadow days, etc.); Initiate recruitment and selection of Director of Community Partnerships (and Internships). Driver: Founding President		Goal: Engage Hospital – and Build Relationships with Hospital Leadership - to Ensure Key Areas of Partnership Driver: Founding President/Director of Community Partnerships	
<i>IX. Early College & Industry Certificate-Granting Institutional Partnerships</i>	Goal: Initiate Feasibility Study to Identify Local College(s)/Industry Credential-Granting Institutions (in which Mercy Health students can pursue training/coursework) Driver: MESA		Goal: Secure Partnership Agreement with Local College(s)/Industry Credential-Granting Institutions; Initiate recruitment and selection of Director of Community Partnerships (and Internships). Driver: Founding President		Goal: Engage Local College(s)/Industry Credential-Granting Institutions – and Build Relationships with Leadership Within Entities - to Ensure Key Areas of Partnership Driver: Founding President/Director of Community Partnerships	

⁷ It should also be noted that the industry-theme of this school plan – health sciences - is also a powerful legacy ministry of the Sisters of Mercy. For a description of the work of the Sisters of Mercy in health – including the founding of hospitals, which could potentially serve as partnering institutions for this new school - see *History and Heritage*, Mercy, available at <https://www.mercy.net/about/history/> (Last Visited June 2020).

IV. The History: A New Model of Mercy Education

Mercy education has a long and rich history of working with those who on the margins of society, who oftentimes lack access to both economic mobility and racial equality.

The roots of Mercy education lie in Ireland in the ministry of Catherine McAuley, the founder of the Sisters of Mercy, and her coworkers. In September of 1827, Catherine McAuley opened the first House of Mercy on Baggot Street in Dublin, Ireland, as a school for poor young girls and a residence for homeless girls and women. Faithful to Catherine’s legacy, that commitment to respond to the needs of this world with love and with mercy is the current which still runs throughout all Mercy efforts today.

This call to see the world not as it is, but as what can still become - lived through the Mercy approach to prayer, communal life, advocacy, corporate engagement and, as most germane to this plan, education – are synthesized in the Critical Concerns of the Sisters of Mercy. We see this commitment in MESA (Mercy Education System of the Americas), a body entrusted with overseeing the schools sponsored by the Sisters of Mercy in the United States as well as in Argentina, Belize, Guam, Honduras, Jamaica, and the Philippines. We see this commitment in schools like, in particular, Mercy Career and Technical High School in Philadelphia, a one-of-its-kind Catholic high school founded in 1950 that provides career and technical education and training in an environment that promotes spiritual values, moral development, and service to others.

It is against this backdrop of history that MESA began to look to the future with an essential question: Is there an opportunity now – at this time when Catholic schools are becoming more scarce for families in need – to consider the founding of a new school rooted in the Gospel and charism of the Sisters of Mercy and propelled by a new generation? In February 2019, MESA formed an initiative exploration team – referred in this document as the “MESA Design Team” – that set out to answer this question.

The product of that exploration is this school design plan, a school model which is:

- **Rooted** in the Critical Concerns of the Sisters of Mercy,
- **Responsive** to the Needs of the Community (in which the school will be located),
- **Patterned** on Existing MESA School Models,⁸ and
- **Sustained** on Public Vouchers.

⁸ In particular, the MESA School Design Team wishes to thank Mercy Career and Technical High School in Philadelphia, and the leadership of that school, Sister Rosemary Herron. There are many elements within this school plan which draw directly from their pioneering work as a visionary school for Catholic career and technical education.

Why Health Pathways, Why Now

I. Introduction: The Path to a Living Wage

Mercy Health Pathways Junior and High School (“Mercy Health”) – as detailed in this plan - is a bridge which unites the powerful tradition of educating the whole person for which the Sisters of Mercy have long been recognized, with a future of Catholic high schools that is different in both *type* (oriented explicitly to stewarding a student’s career interests) and *structure* (grounded in a revenue stream that is far more financially viable than other MESA schools). Put another way, our MESA School Design Team fixed its gaze on a *type* of school that could prepare students for careers in occupations that will pay family-sustaining wages, with an underlying *structure* for the school that would be funded largely by reliable sources of public revenue (via a vouchers/state tax scholarship model).

To the latter, the structure of the school, narrowing the potential location of the school to either Ohio or Florida was a relatively easy calculus: both states have in place economically substantial and politically safe private school voucher models, and just as important, both states have clear paths for new schools to access those vouchers.

To the former, the type of school, the MESA School Design Team looked to both the current living wages in these two states and the employment trends and economic forecasts in these states, in order to determine the industry-themed pathways for a new school. We defined living wages for a family – using the nationally recognized Living Wage Calculator from MIT – of one adult and one child. The results showed the need for a high school that would put its students on a trajectory to make more than \$48,000 per year.⁹

Living Wage in Florida
To support their family, a parent of one child must earn:
\$25.47/Hour
\$52,978/Year

Living Wage in Ohio
To support their family, a parent of one child must earn:
\$23.31/Hour
\$48,485/Year

⁹ See the MIT *Living Wage Calculation for Ohio*, Living Wage available at <https://livingwage.mit.edu/states/39>, and the MIT *Living Wage Calculation for Florida*, Living Wage, available at <https://livingwage.mit.edu/states/12> (last viewed on June 13, 2020).

And yet, the Mercy Design Team understood that simply considering industry-themed pathways for positions that grossed at least \$48,000 in these two states - without taking a close look at future economic forecasts – would be preparing our potential students for a world that was, and not a world to come.¹⁰

II. Health Sciences as the Industry-Theme

After analyzing employment forecasts provided by the United States Bureau of Labor Statistics – and the complementary Florida and Ohio statewide employment forecasts - it became evident that the industry-themed pathways for this potential new school should be health sciences. In its most recent report considering the employment forecast for our country for the next ten years, the Bureau of Labor Statistics noted that “the fastest growing” industry/sector in the country lies in health sciences, at a rate which exceeds by 25% the second fastest growing sector (educational services).¹¹ As the Bureau points out, this projected growth is “mainly due to an aging population, leading to greater demand for healthcare services.”¹² Nearly 5% of all health care positions nationwide (over 900,000 positions) go unfilled, due to not enough skilled and prepared professionals entering the health care professions.¹³

It is no surprise then that health sciences is *the* occupational area which has seen the greatest increase in secondary school course taking; the most recent United State Department of Education study noted that from 1990 to 2009, students accessing health sciences CTE course increased by 222%.¹⁴ This same report also powerfully noted that 81% of students who pursued a CTE course of study in health sciences were enrolled in post-secondary education within two years of graduation, the second highest in all CTE fields.¹⁵ Moreover, health sciences is now the leading field of study for subbaccalaureate occupational awards, which is inclusive of both industry certificates/credentials or an associate’s

¹⁰ It should be noted that an important additional consideration was taken into account before deciding upon health science as *the* industry theme for the proposal school: the per pupil cost for the launch and operation of a career and technical education (CTE) school. For example, the costs of launching a new traditional “trade” school (carpentry, plumbing, etc.) are probably prohibitively expensive, whereas the costs for launching a health science school more viable. For an understanding of the significant costs for starting a traditional CTE program, see *Start a career-tech program leading to an industry-recognized credential*, Ohio Department of Education, available at <http://education.ohio.gov/Topics/Ohio-s-Graduation-Requirements/Industry-Recognized-Credentials/Start-a-new-career-technical-education> (Last Visited June 2020).

¹¹ See *Employment Projections: 2018-2028 Summary*, United States Bureau of Labor Statistics, available at <https://www.bls.gov/news.release/ecopro.nr0.htm> (Last Visited June 2020).

¹² See *Healthcare Occupations*, United States Bureau of Labor Statistics, available at <https://www.bls.gov/ooh/healthcare/home.htm#:~:text=Employment%20of%20healthcare%20occupations%20is,of%20the%20other%20occupational%20groups> (Last Visited June 2020).

¹³ See *Job openings levels and rates by industry and region, seasonally adjusted*, United States Bureau of Labor Statistics, available at https://www.bls.gov/news.release/jolts.t01.htm#jolts_table1.f.1 ((Last Visited June 2020). For a regional example, see *In-demand jobs go unfilled because workers lack skills: Team NEO report*, Cleveland Plain Dealer, May 7, 2019, available at https://www.cleveland.com/business/2018/05/in-demand_jobs_go_unfilled_bec.html (noting that in northeast Ohio “Physicians and surgeons and nurse practitioners were also in demand, but so were other [health care] positions requiring less training including medical records and health information technicians, which often require a certificate and several technologists positions, which often require associates degrees”).

¹⁴ See *National Assessment of Career and Technical Education: Final Report to Congress*, United States Department of Education, available at https://s3.amazonaws.com/PCRN/uploads/NACTE_FinalReport2014.pdf (Last Visited June 2020).

¹⁵ See id. at Exhibit 6.4 (located on page 90).

degree.¹⁶ Indeed, of the 30 fastest growing occupations in the United States, 18 are in health-related fields. Moreover, these high-growth health-related occupations provide a window into how the Mercy Design Team considered the build-out of specific health sciences pathways, and therefore, are shared in the following table.

Table 6: Health Sciences as The Fastest Growing Sector in America (2018- 2028)¹⁷

Rank in Terms of 30 Fastest Growing Occupations in the United States	Specific Employment Within Health Sciences	Median Hourly Wage (in 2019)	Median Annual Wage (in 2019)
19	Physical therapist aides	\$12.98	\$27,000
20	Medical assistants	\$16.73	\$34,800
18	Phlebotomists	\$17.07	\$35,510
23	Massage therapists	\$20.59	\$42,820
21	Substance abuse, behavioral disorder, and mental health counselors	\$22.23	\$46,240
11	Physical therapist assistants	\$28.26	\$58,790
26	Respiratory therapists	\$29.49	\$61,330
5	Occupational therapy assistants	\$29.57	\$61,510
30	Nursing instructors and teachers, postsecondary	\$35.87	\$74,600
10	Speech-language pathologists	\$38.04	\$79,120
12	Genetic counselors	\$39.37	\$81,880
25	Physical therapists	\$43.00	\$89,440
17	Health specialties teachers, postsecondary	\$46.79	\$97,320
9	Nurse practitioners	\$52.80	\$109,820
7	Physician assistants	\$53.97	\$112,260
3	Home health aides	—	—

¹⁶ See *Students in Subbaccalaureate Health Sciences Programs: 2015–2016*, National Center for Education Statistics, available at <https://nces.ed.gov/pubsearch/pubsinfo.asp?pubid=2020055> (Last Visited June 2020). See also *Trends in Subbaccalaureate Occupational Awards: 2003 to 2015*, National Center for Education Statistics, available at <https://nces.ed.gov/pubs2018/2018010.pdf> (Last Visited June 2020) (noting that "the largest proportion of subbaccalaureate occupational credentials were certificates in health sciences [23 percent of these credentials], followed by associate's degrees in health sciences [14 percent].").

¹⁷ See underlying data available at *Fastest Growing Occupations*, Bureau of Labor Statistics, available at <https://www.bls.gov/emp/tables/fastest-growing-occupations.htm> (Last Visited June 2020). Note that median wage data was unavailable for home health aides. Additionally, note that hourly wage was calculated using annual wage divided by the number of hours used by MIT's Living Wage calculator. Lastly, though the Bureau lists 18 health-related positions in their fastest growing occupations list, two are only tangentially related to health sciences, and are not included in our analysis.

The above – alongside the other specific state labor trends that we considered¹⁸ - revealed that many of these health sciences positions have median wages well *below* the living wage, in the United States at large and, more germane to our analysis, in both Ohio and Florida. For the positions that had median wages at or above the living wage, a more extensive educational attainment was necessary for entry into the occupation. The below table overlays the educational attainment required for entry into these high-growth occupations.

Table 7: Mapping Fastest Growing Health Sciences Occupations Against Educational Attainment Required for Entry

Fastest-Growing Health Sciences Occupations	Median Hourly Wage (in 2019)	Median Annual Wage (in 2019)	Educational Attainment Required for Entry
			With Shade of Orange Corresponding to Extent of Education – Lightest (Least Amount of Education) to Darkest (Most Amount of Education)
Home health aides	—	—	High School Diploma or equivalent
Physical therapist aides	\$12.98	\$27,000	High School Diploma or equivalent
Medical assistants	\$16.73	\$34,800	Post-Secondary Non-Degree Award
Phlebotomists	\$17.07	\$35,510	Post-Secondary Non-Degree Award
Massage therapists	\$20.59	\$42,820	Post-Secondary Non-Degree Award
Substance abuse, behavioral disorder, and mental health counselors	\$22.23	\$46,240	Bachelor's Degree
Physical therapist assistants	\$28.26	\$58,790	Associate's Degree
Respiratory therapists	\$29.49	\$61,330	Associate's Degree
Occupational therapy assistants	\$29.57	\$61,510	Associate's Degree
Nursing instructors and teachers, postsecondary	\$35.87	\$74,600	Bachelor's Degree
Speech-language pathologists	\$38.04	\$79,120	Master's Degree
Genetic counselors	\$39.37	\$81,880	Master's Degree/Professional Degree
Physical therapists	\$43.00	\$89,440	Doctoral/Professional Degree
Health specialties teachers, postsecondary	\$46.79	\$97,320	Doctoral/Professional Degree
Nurse practitioners	\$52.80	\$109,820	Master's Degree
Physician assistants	\$53.97	\$112,260	Master's Degree

¹⁸ See *Long-Term Employment Projections (for the State of Ohio)*, Ohio Department of Jobs and Family Services, available at <https://ohiolmi.com/home/Projections> (Last Visited June 2020), and *Employment Projections (for the State of Florida)*, Florida Department of Economic Opportunity, available at <https://floridajobs.org/workforce-statistics/data-center/statistical-programs/employment-projections> (Last Visited June 2020).

With the goal of providing all Mercy Health students a clear path to a living wage, the Design Team then shifted its focus to other higher-growth, well-paying positions in health sciences – positions whose training and, for some, industry certification process could largely be completed while in high school. In essence, Mercy Health would be both preparing its graduates - *immediately* upon graduation – for entry into a higher-paying job in health sciences, and providing its graduates far greater financial flexibility in their pursuit of post-secondary studies.

III. Defining the Two Health Sciences Pathways

As a result, in developing our specific program model, we looked at higher-growth¹⁹ positions in health care which necessitate either only a high school diploma or a post-secondary non-degree. We included the latter – positions necessitating a post-secondary non-degree award – as oftentimes high school students are able make significant progress, if not meet all the requirements, of the non-degree award while in high school. The below chart notes these positions:

Table 8: Higher-Growth Health Sciences Positions Potentially Available to Mercy Health Graduates Upon Graduation

Color of Occupation Indicates Progress Toward Median Living Wage

	Over 75%, and up to 100% of Living Wage
	Over 65%, and up to 75% of Living Wage
	Over 50%, and up to 65% of Living Wage

Health Care Occupation	Median Annual Wage (in 2019)	Median Hourly Wage (in 2019)	Educational Attainment Required for Entry <small>With Shade of Orange Corresponding to Extent of Education</small>	For Occupations That Require a Postsecondary Nondegree Award, Can Nondegree Award Be Pursued <u>While</u> in High School Through a Partnership with Local College/Certification Program?
Physical therapist aides	\$27,000	\$12.98	High school diploma or equivalent	
Veterinary assistants and laboratory animal caretakers	\$28,590	\$13.75	High school diploma or equivalent	
Orderlies	\$28,980	\$13.93	High school diploma or equivalent	
Nursing assistants	\$29,660	\$14.26	Postsecondary nondegree award	YES

¹⁹ Note that this determination of “higher-growth” eliminated a number of traditional positions which are now in statistically decline (e.g. medical transcriptionist).

**Table 8: Higher-Growth Health Sciences Positions
Potentially Available to Mercy Health Graduates Upon Graduation
(Continued)**

Health Care Occupation	Median Annual Wage (in 2019)	Median Hourly Wage (in 2019)	Educational Attainment Required for Entry With Shade of Orange Corresponding to Extent of Education	For Occupations That Require a Postsecondary Nondegree Award, Can Nondegree Award Be Pursued <u>While</u> in High School Through a Partnership with Local College/Certification Program?
Psychiatric aides	\$31,110	\$14.96	High school diploma or equivalent	
Psychiatric technicians	\$33,780	\$16.24	Postsecondary nondegree award	YES
Pharmacy technicians	\$33,950	\$16.32	High school diploma or equivalent	
Medical assistants	\$34,800	\$16.73	Postsecondary nondegree award	YES
Social and human service assistants	\$35,060	\$16.86	High school diploma or equivalent	
Phlebotomists	\$35,510	\$17.07	Postsecondary nondegree award	YES
Medical equipment preparers	\$37,440	\$18.00	High school diploma or equivalent	
Opticians, dispensing	\$37,840	\$18.19	High school diploma or equivalent	
Healthcare support workers, all other	\$38,460	\$18.49	High school diploma or equivalent	
Dental assistants	\$40,080	\$19.27	Postsecondary nondegree award	YES
Community health workers	\$40,360	\$19.40	High school diploma or equivalent	
Licensed practical and licensed vocational nurses	\$47,480	\$22.83	Postsecondary nondegree award	YES
Surgical technologists	\$48,300	\$23.22	Postsecondary nondegree award	YES

Therefore, we intend to build our two pathways – Patient Care and Mental/Behavioral Health – to include the high-growth, higher-wage occupations listed above, as they will provide Mercy Health graduates with a promising position upon or shortly after graduation. Moreover, these occupations will provide graduates with the financial flexibility to pursue post-secondary studies, whether in health sciences or beyond, removing an obstacle for why low-income students do not pursue college.²⁰ As a reminder, our goal is not for these occupations to be terminal positions for our graduates, but instead, to be gateways into positions – available after post-secondary studies - that will ultimately provide a living wage.

The specific occupations - for which Mercy Health will prepare its graduates - will be predicated on the state, regional and local context in which the school ultimately resides. Additionally, the staffing required for the breadth and depth of offerings will also be a significant driver.²¹ The two most important conditions in this local context will be:

- 1) The availability of, and choices within, **local colleges** where Mercy Health students can engage in dual credit courses and pursue industry credentials, so that our students will make progress in, if not complete all necessary coursework/training for a middle skills occupation *while in* high school,²² and similarly,
- 2) The availability of, and choices within, state-approved **industry-credential granting institutions**, again where Mercy Health students can pursue industry credentials, so that our students will make progress in, if not complete all necessary coursework/training for a middle skills occupation *while in* high school.

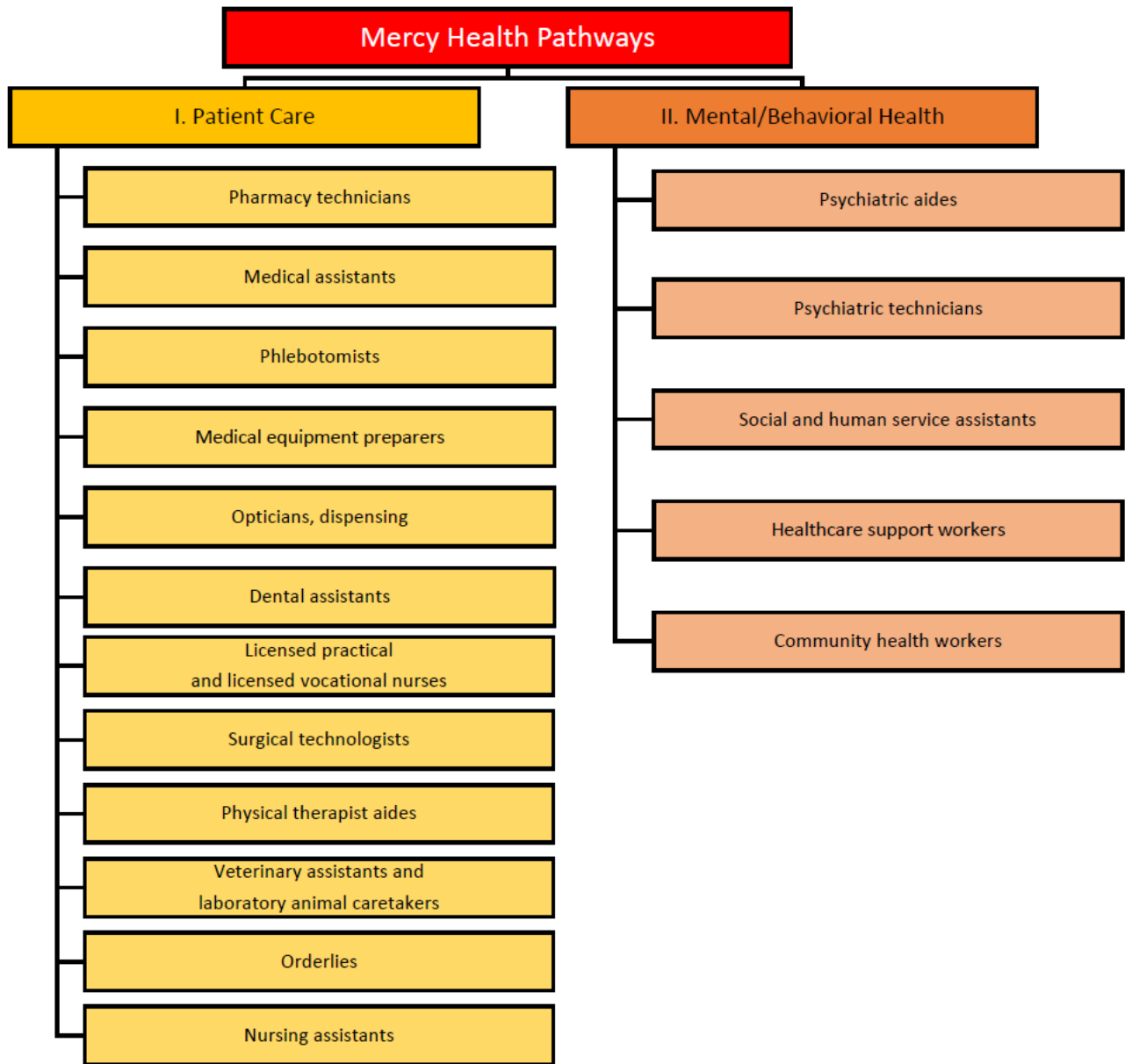
Using the above list of “Higher-Growth Health Sciences Positions Potentially Available to Mercy Health Graduates Upon Graduation,” we can begin to see what occupational training programs would fit under the respective two pathways. The below is a representation of where all of these occupations would sit within the two pathways.

²⁰ It is important to note that health science is the CTE field where high school graduates are most likely to continue to pursue with a postsecondary degree. See *National Assessment of Career and Technical Education: Final Report to Congress*, United States Department of Education, available at https://s3.amazonaws.com/PCRN/uploads/NACTE_FinalReport2014.pdf (Last Visited June 2020) (noting that “Completion of a postsecondary degree or certificate in the same field was most common among high school graduates who concentrated in health sciences.”)

²¹ The staffing model for the school is described in detail in the “Human Capital” section of this school design plan.

²² Nearly 90% of CTE programs across the country offer dual-credit courses. See *Table H153. Percentage of fall 2009 public school ninth-graders in 2012 whose school counselors report that their school offers dual credit programs*, National Center for Education Statistics, available at <https://nces.ed.gov/surveys/ctes/tables/h153.asp> (Last Visited June 2020)

**Table 9: Occupations that The Two Pathways Could Include
(Depending Upon Local Context)**



Mission, Core Values and Graduate Profile of Mercy Health Sciences Pathways High School

Our Mission

Why we exist as a school: enduring truths about our school that have no expiration date

Mercy Health Sciences Pathways High School is a private, Catholic career and technical junior/senior high school sponsored by the Sisters of Mercy, which prepares historically marginalized students for both the health sciences workforce and post-secondary educational success.

Within a 21st century learning environment, we provide a Catholic education and a comprehensive, academic, career and technical school experience aligned to career pathways in the health sciences. In the Mercy tradition, we live the Gospel in word and action and promote service to others.

Harnessing the support of a diverse and collaborative group of school stakeholders – including students, families, educators, the community, industry and institutes of higher education – a Mercy Health Pathways Junior/Senior High School graduate will be a highly competent, compassionate, and contributing member of the global community, ready to dismantle social inequities and embrace the dynamism of the times in which they live.

Our Core Values

What we believe: fundamental values that are central to the *instruction, the culture* and *the structure* of our school, and reflect how we want to move toward our mission

- ❖ We believe that every individual has inherent **worth** and **dignity**.
- ❖ We believe that **spiritual and moral development** is absolutely essential.
- ❖ We believe that our students are blessed with **gifts** that can be served through vocational education.
- ❖ We believe that **risk taking** is essential for school improvement.
- ❖ We believe that within a **culturally diverse** environment we can build respect for one another's background, and work to undo systemic oppression.
- ❖ We believe that life-long learning is a **shared responsibility** of students, teachers, family, and community.
- ❖ We believe that all students are an **investment** in the future.
- ❖ We believe that we are called to the mutual benefits that come with **assisting** others in their needs.

Our Graduate Profile

What we seek for our graduates and how we will measure our success

A Mercy Health Graduate at Graduation Will Have the Following Knowledge, Habits of Mind and Skills...

...As Evidenced by These Measures.

Knowledge	Habits of Mind	Skills	Measurements
<ul style="list-style-type: none"> Strong faith and a sense of moral decency. Marketable competencies for employment opportunities. Relevant academic foundations to pursue post-secondary education. Clear knowledge of self, self-worth, and one's role in the global community. 	<ul style="list-style-type: none"> Compassion and a willingness to serve others. A positive and reliable work ethic. A professional approach to their chosen career. Respect for diversity and an advocate for equity. Perseverance in honoring commitment. The desire to live as a responsible citizen within a global community. The courage for creative risk-taking. 	<ul style="list-style-type: none"> Decision-making skills to live responsibly. Technological skills to compete in an ever-changing environment. Language skills to communicate effectively. Life skills to succeed in the workplace and/or in post-secondary institutions. 	<p>Authentic Assessments of Student Success</p> <p>2/4 Year College Placement/Graduation Rates</p> <p>Internships</p> <p>State Testing Results</p> <p>Graduation/Dropout/Attrition Rate</p> <p>Early College Completion Rate (including Number of College Credits Earned During Time at Mercy Health)</p> <p>Industry Certifications/Badges in the Students Chosen Health Pathway</p> <p>Salary of Graduates 1 Year, 3 Years and 5 Years [After Graduation]</p>