

Regionalization

Case Studies of Success and Failure in Massachusetts

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A Pioneer Institute White Paper



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Foreword

Regionalization is a perennial favorite. In its various incarnations – inter-local agreements, shared services, regionalism – it is popular in theory and universally acknowledged to save money but not as widespread as one might expect. The urge to regionalize goes through periods of intense interest when budgets are tight, then is frequently ended by bureaucratic inertia and parochialism.

...if so many people are for regionalization, why is it that regional approaches are the exception rather than the rule?

Once again, Massachusetts is in a period of great interest in regionalization. Cities and towns face ongoing budget challenges as local aid continues to lag (on an inflation-adjusted basis) behind levels from earlier this decade. Employee compensation costs continue their inevitable upward march. And higher levels of disclosure about unfunded liabilities for pensions and retiree healthcare place further pressure on budgets. These constraints exist in the context of a hard cap on property tax revenues.

Communities also face increasing pressure on the service side as well. State and federal mandates require more specialized skills and stricter compliance standards. Many communities suffer from a lack of qualified citizens with an interest in participating on boards and committees.

Within this framework, regionalization is a more compelling choice than ever. Yet, if so many people are for regionalization, why is it that regional approaches are the exception rather than the rule? Why aren't state and local officials tripping over themselves to implement regionalization more broadly? Why have proposed regionalization schemes failed to garner adequate support? Why have some efforts been disbanded or dissolved? What diminishes the support of community leaders for regional approaches?

These are some of the questions we posed as we undertook a study of what worked and why, and what did not work and why not? The goal of these case studies is to examine successes and failures in order to strengthen and quicken the adoption of future regional approaches.

The attempts to regionalize fire services on the South Shore are emblematic of the obstacles faced by regionalization. Despite a study on cost savings and implementation, this attempt foundered because of funding disparities between large and small communities, an unwillingness to relinquish local control of budgets and services, and resistance by employees – both union and management – to change. It is also a warning sign for future efforts that, once the fiscal crisis passed, so did the impetus to increase the efficiency of fire services in these South Shore communities.

Similarly, attempts to regionalize police and fire dispatch services in MetroWest foundered. Despite a study detailing millions in potential savings, resistance from union and management employees, as well local control issues, ended the effort.

...funding disparities, an unwillingness to relinquish local control, and resistance by employees - both union and management - to change.

Nevertheless, the future for consolidated dispatch services appears to be brightening. Our case study on Berkshire County's consolidated 911 dispatch service highlights how smaller communities across the county receive state-of-the-art dispatch services at a tremendous savings to the participating municipalities. And with the recent passage of a cell phone surcharge to fund other 911 dispatch consolidation efforts, Berkshire County's model will likely be replicated in other areas.

Other success stories provide valuable lessons for other municipalities considering regionalization efforts. The Nashoba Associated Boards of Health serves as a long-standing example of how shared services can be both cost effective and provide greater depth and duration of services. Originally seeded with a foundation grant, Nashoba allows a collection of small, lightly populated towns to use economies of scale to access full-time, highly qualified public health services that would otherwise be unavailable.

Within each success story, some small setbacks are instructive. For example, Westford exited the Nashoba structure once its population reached 20,000 and demand for services increased, relative to the other participants. Another example, the Metropolitan Area Planning Council's purchasing pools suffered an initial setback due to an overly wide dispersal of participants. It now operates four separate purchasing pools, consisting of contiguous communities with similar profiles, which use their combined purchasing powers to save their members over \$2 million per year.

...success stories provide valuable lessons for other municipalities considering regionalization efforts.

By learning from missteps and being responsive to members, successful regionalization projects offer a customer focus that is often missing from institutions created by legal fiat. In Hampshire County, a Council of Governments was formed to provide services in the wake of the dissolution of county governments. It has proven to be markedly more cost-effective than the entity it replaced and has offered local communities a higher degree of control.

The Education Cooperative (TEC) provides a similar level of cost-effective services that are responsive to local needs. TEC allows a number of communities to pool their resources and

provide special education services to students. It is currently expanding its array of services into joint purchasing and member demand.

Lastly, we profile the provision of Veterans' Services, a state mandate which allows smaller communities to share the services of a single agent. Like most regionalization projects, these efforts allow communities to achieve economies of scale and provide a greater level of resources than would be possible on their own.

From these case studies, we draw the following conclusions:

- Cost savings and better service – Although the cost benefits from regionalization are clear, the ability to provide better service is equally important.
- Encourage organic growth–Calls for more regionalization can, unfortunately, be seen as calls for a return to the county system or another state mandate. Most successful regionalization efforts have grown from the bottom-up, organically, not from a state-mandated collection of communities. As a positive example, the successor entity to Hampshire County government has proven to be more directly accountable, more flexible, and far thriftier than the county.
- State incentives are important but not enough – The Commonwealth has provided seed money, in many cases, to permit feasibility studies for communities to analyze potential savings and service level changes from regionalization. But these studies (while almost universally positive about the benefits) have not been enough to get some communities on board.
- Jurisdictional disputes and union opposition remain obstacles – These two factors, spanning both management and labor, continue to block many sensible regionalization efforts.

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Recent state efforts are a step in the right direction, but more must be done. In recent years, the state has passed laws to make it easier to enter into regionalization agreements, funded some technical assistance, and provided a dedicated revenue pool for 911 dispatch consolidation. But more needs to be done.

The case studies that follow outline a series of carrots and sticks that the state can use to advance strong regional proposals:

- Develop transparent cost breakdowns and definitions that can be used across municipalities to identify service areas where regional approaches might have the strongest cost savings impact.
- Continue small grants for feasibility studies.
- Use state grant and funding programs (library grants, school building etc.) to provide bonus funding (or prioritization) for those communities implementing regionalization.
- Develop best practice standards (across cost and service levels) for certain municipal services. Tie state aid formulas to compensate at best practice standards, not actual cost.
- Develop an array of possible regionalization opportunities and agreement templates that communities can access.
- Communicate with public sector unions that cost-savings (and service improvement) are inevitable and in their long-term interest.
- Offer technical assistance through state agencies and quasi-public entities (like regional planning authorities) to serve as third party mediators during the negotiation of regionalization agreements.

Regionalization makes more sense than ever. Pressure on state and local budgets means that our attachment to home rule across 351 jurisdictions is a costly artifact that needlessly drains money

from more effective uses. The attached case studies highlight successes and, perhaps more importantly, failures in regionalization that are intended to illuminate the way for future regionalization efforts.

- *Jim Stergios*

I. South Shore Shared Fire Services

An Ambitious Attempt Felled Before Implementation

In the early 1990s, officials in five towns on the South Shore of Boston took advantage of a state grant encouraging municipalities to explore regionalization efforts and launched a study to assess the feasibility of combining their fire and rescue services. The towns were looking for ways to cut costs in tight fiscal times and heightened regulatory requirements, such as the implementation of Enhanced 911. What they learned from the detailed study was that they could improve their emergency services and save up to a half million dollars a year by forming a single fire district incorporating all five towns, but getting there was a whole different story.

Despite their stated best intentions, town officials in the end relegated a 284-page feasibility study and outline for combining services to gather dust in the bin of good ideas never implemented. When you talk with those involved, they attest to their support of the regionalization effort, and all point to factors beyond their control as blocking implementation.

The five South Shore towns – Cohasset, Hingham, Hull, Norwell, and Scituate – formed a committee in the early 1990s to consider developing a shared fire service. The towns, all of which are in Plymouth County, except for Norfolk County’s Cohasset, accessed state grant funding to pay for a \$30,000 feasibility study of the shared fire services concept. The Seaside Fire and Rescue Service study, performed in 1993 by Oregon-based M.D.I. Inc. (subsequently renamed Emergency Services Consulting, Inc.), included assessments of the individual fire departments as well as an analysis of the feasibility of differing levels of consolidation or merging of the five jurisdictions or portions of their service delivery.

In developing the feasibility recommendations, the study included analyses of management, delivery systems, training programs, fire prevention programs and services, apparatus inventory and maintenance, and station location and inventory.

A driving force of the regionalization efforts was, according to the report, “the lack of a well developed long-term strategic plan to address future needs of fire and rescue service delivery in the area.” Local officials at the time say that municipal financial crises also prompted the push toward regionalization, as did the recently implemented federal regulations requiring the implementation of E-911, which had some towns, such as Cohasset, scrambling to meet the new requirements and looking to other towns to share the burden of delivering the new service.

“There was constant discussion – let’s regionalize this, let’s regionalize that,” says Scituate Selectman Joseph Norton, a 25-year veteran on his town’s board and an avid promoter of regionalized services. “The fire study went about as far as anything.”

While the town fire departments were well regarded by the public, officials feared that the growing costs of emergency service delivery, including meeting E-911 mandates, coupled with increasing municipal budget constraints, presented serious future fiscal threats. Each of the towns, according to the report, had faced critical budget reductions over recent years, including for their fire departments.

The study’s major findings included that the towns were conducting capital improvement and replacement programs for fire and emergency equipment but were not funding them to the needed levels, and that some of the required administrative and support functions were not being performed at all or were being carried out by inappropriate personnel, exposing the fire departments to increased legal liabilities.

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The extensive report recommended merging the five districts to eliminate duplicative administrative functions and provide greater support for program areas such as emergency response, fire prevention, emergency preparedness, apparatus and facilities. Combining administrative and support services would gain efficiencies in resource allocation and reduce the risk of liability exposure, according to the report. Alternatively, if the towns decided against forming a single shared fire and rescue district, the report recommended that at the very least the participating towns should consolidate some basic functions such as training and records management, and developing a shared training facility.

Despite their stated best intentions, town officials in the end relegated a 284-page feasibility study and outline for combining services to gather dust in the bin of good ideas never implemented.

To accomplish the recommendation for a unified fire district incorporating all five towns, the study's authors recommended the towns appoint a task force to look at and plan shared service delivery in the areas of a regional dispatching system, emergency management, training, support services, and special services. In addition to developing a final recommendation for the towns to adopt, the task force would also be charged with the responsibility of forming and implementing intergovernmental agreements to implement the plan. The report included a step-by-step process for achieving consolidation over a two-year period, and cautioned that although the towns would not likely see any substantial savings in the first year, they would realize an estimated \$442,000 annual benefit in future years.

Despite this favorable fiscal analysis and step-by-step guide toward implementing a regionalized fire and rescue service, the effort never got off the ground. According to then-Cohasset selectman

Merle Brown, participating towns had a broad disparity in funding levels for emergency services – from Norwell with its on-call fire service to Hingham with its staffed, multi-stationed department. In Brown's view, this budgeting disparity was a primary stumbling block for implementation of the study's recommendations. The lower-budget towns saw an added expense of putting up additional resources to match higher-spending towns, whereas the higher-budget towns saw themselves as carrying the fiscal load to fund upgraded services for the smaller towns.

“The towns just don't want to give up control of their [budget] authority, which is unfortunate,” says Brown. “We worked very hard on it, but we couldn't get the towns to agree... We tried all sorts of ways to get people to work together.”

Brown says the efforts to achieve some success out of the study included looking at a four-town collaborative, then three and two towns, to no avail. Cohasset also pursued various alternative regionalization efforts around particular services with subgroups of the five towns, especially around regionalizing E-911 services. But, again, these efforts proved unsuccessful. One town rejected the idea of sharing E-911 dispatching out of concern that their dispatchers wouldn't be familiar with the streets of Cohasset, whereas another town refused because it had two 911 dispatch centers – one at fire station headquarters and one at the police department – and wanted nothing to do with integrating Cohasset's combined fire and police calls, according to Brown. Indeed, it was not uncommon for individual towns at the time to debate the merits of combining their own police and fire dispatch services, much less consolidating services with other towns.

The authors of the Seaside Fire and Rescue Service study urged that although the towns were focused on cost cutting as the primary public benefit for consolidating services, they should also recognize the importance of the longer-range

benefits of improved efficiency and enhanced effectiveness and service delivery. In addition to its broad recommendations, the study also touched on more particular – and more sensitive – areas, such as developing and locating a new central facility and decommissioning some existing fire stations and pieces of equipment to eliminate duplication of coverage and future maintenance costs. Discussion of where to locate a new fire station and which existing fire stations to close became another roadblock, according to Norton, because implementing coverage from a regional approach meant that some towns might lose a station while others could gain a station.

“Everybody talks about regionalization, but when it comes down to it, no one wants to give up their dog officer, their veteran’s agent, or what have you,” says Norton. “When it comes to implementation, it’s a tough sell.”

The authors of the study acknowledged that there would be challenges to regionalization. The list of “unforeseen obstacles and obstructions” included: fire chiefs’ resistance, elected officials’ concern over loss of local control, community reaction, establishing financial parity among participating communities, difficulty in funding capital improvements, career employees’ support or opposition, and impact bargaining with the unions. Fifteen years after the study, its recommendations seem to have broad support, but at the time they were presented, they appear to have run the gamut of obstacles and obstructions.

As former Hingham Fire Chief Richard Wehter recalls, the feasibility study set out a positive course of action that would have brought savings to the towns, protected jobs, and gained staffing efficiencies – including at the chief level – through attrition. Regionalization of the five towns’ fire and rescue services was the best course of action, and one that the fire chiefs supported. But in his view, these advantages fell on deaf ears among the political leadership.

“Basically, the politicians didn’t want to give up their authority,” says Wehter. “New England is Yankee territory, and town fathers don’t like to give up control.”

The politicians, however, have a different recollection. In addition to the roadblocks presented by budget inequities and discussions about fire station placements and closings, selectmen Brown and Norton saw strong resistance among the labor force, even with the assurances of no job losses. “I don’t want to say it [regionalization] can’t get done without union support, but it can’t get done without union support,” says Norton.

Everybody talks about regionalization, but when it comes down to it, no one wants to give up their dog officer, their veteran’s agent, or what have you...When it comes to implementation, it’s a tough sell.

Charles Cristello, town administrator in Hingham, agrees opposition from the firefighters’ union leadership presented an obstacle, but also points to an improved municipal fiscal outlook. “What started as a big fiscal crisis, as time went by, abated, and it wasn’t that big of a crisis,” says Cristello. “And the old bugaboo about not being in control of your own fire department took hold.”

Perhaps the most befuddled of all the players in this story of a failed regionalization effort is the study’s lead author, Jack Snook, president of Emergency Services Consulting, Inc. He recalls the shift in momentum occurring when meeting with a young fire chief in one of the member towns to explain the recommended command structure and his secondary role but clear path to succeed within a few years in the newly formed entity. That, says Snook, is when the support among the chiefs, and other leaders, began to deteriorate.

“We thought we had a viable situation, and I think they did too,” says Snook. “We expected for all

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the right reasons this would work, but it didn't. It came unraveled by personalities.”

Among the varying opinions as to the breakdown of the South Shore shared fire services effort, Cohasset's selectman Brown offers perhaps the best analysis of the disparity between broad support of the theory but utter failure on implementation – the group never even got so far as appointing a task force.

“When you start telling people in regionalizing that you have to do this or you have to do that,” says Brown, “that's when you get into trouble.”

II. MetroWest Emergency 911 Dispatch

Cost Savings Stopped by Bureaucratic Obstacles

In 1993, municipalities across Massachusetts prepared for a planned 911 emergency response system upgrade. The changes would, among other things, require cities and towns to replace outdated equipment and put their systems on the same radio frequencies. The upgrade provided the impetus for addressing issues that were sorely in need of attention. In the Boston suburb of Natick, for example, some fire dispatch radio equipment was as much as 32 years old.

Since the upgrade would require communities to invest in costly new equipment just as the Commonwealth was emerging from a deep recession, 13 towns west of Boston got together to explore the possibility of achieving savings by investing in a single regional 911 call answering and dispatch system.

Not only did each town have its own dispatch system, most had a separate public safety answering point (PSAP) for police and fire. That meant two sets of personnel, operating and equipment costs. Even though the combination of police and fire calls was not enough to keep a single dispatcher in most towns busy for 20 minutes out of every hour in most towns, emergency lines had to be manned 24 hours a day, seven days a week. Many of those answering the calls were uniformed personnel, which cut down on the number of police and firefighters that could be deployed to their primary functions.

Armed with a \$55,000 grant from the state Executive Office of Community Development, the 13 communities hired a consultant to consider the possibility of joining together to form a single regional network to provide 911 emergency dispatch services. To perform the study, the

municipalities hired Bernie Ebstein Associates, who had worked on the same issue in other parts of the country. Time was of the essence. Ebstein’s report came out in late spring of 1993 and 911 upgrade plans had to be filed with the Commonwealth by July 1.

The Ebstein report described four viable options:

1. Centralized call answering and dispatch of all emergency services for the 13 communities. All Incoming 911 calls for the region would be answered by dedicated call takers. They would enter pertinent information into the facility’s computer-aided dispatch (CAD) system and route incident information to the appropriate radio dispatcher.
2. Consolidated 911 call answering and fire/EMS dispatch; individual police dispatch. All call answering would be consolidated into a single PSAP. Fire/EMS dispatch would be consolidated, but police services would be dispatched from the 13 individual police facilities.

The table below shows a projected cost summary of the alternatives in 1993 dollars:

Option	Capital Cost	Operating Cost	5-Year Total	10-Year Total
1: Centralized answering/dispatch	\$2,199,122	\$2,024,764	\$12,576,038	\$23,256,668
2: Centralize police only	\$3,018,259	\$3,396,160	\$20,423,579	\$38,338,323
3: Three regional centers	\$1,850,838	\$2,529,186	\$14,812,916	\$28,154,372
4: Maintain 13 systems	\$2,755,192	\$3,065,683	\$18,466,817	\$34,638,295

3. Consolidation of regional 911 emergency services in three centers. Regional call answering and dispatch services would be provided from three independent PSAPs in the region, two of which would be located in existing facilities in Framingham and Marlborough.

4. Maintain 13 independent PSAPs. Some communities would combine police and EMS/fire into a single function.

Over a decade, centralized 911 emergency services would have saved the 13 communities nearly \$5 million over the next most efficient option (three regional centers), and more than \$11 million over maintaining 13 separate operations. Other advantages of regionalization were that the plan would use specialized, highly trained dispatch personnel (the numbers didn’t count benefits associated with freeing up uniformed personnel to conduct police and fire business) and a new state-of-the-art CAD system that would serve all the communities.

Like many of the proposed changes, regionalization would require modification of radio systems. A back-up system would have to be developed in case the system went down. Finally, the use of leased operating lines would reduce reliability and control over the system, but regionalization also created an incentive to upgrade radio systems for better inter-agency coordination.

The regionalization plan was a grassroots effort developed collaboratively by officials from the 13 towns. Nonetheless, it still encountered stiff political resistance.

Obstacles to Implementation

Despite its many advantages, a number of classic obstacles doomed the original effort to regionalize MetroWest 911 emergency services. In other states, county government routinely administers regional efforts. But with the abolition of most of county government in Massachusetts, it was unclear who would ultimately be responsible for the consolidated operation.

Relinquishing local control also proved to be a problem. Many selectmen, police and fire chiefs were reluctant to hand over the operation of a system that is at the heart of local government.

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Citizens, who liked the idea of having people they know and who know their town in sensitive public safety positions, often shared that attitude.

Many fire chiefs were particularly reluctant to regionalize 911 emergency services. Police calls are far more frequent than fire calls. In Natick, which is representative of the other towns, dispatchers fielded calls for an average of 18.7 minutes out of every hour. Of that time, 15.7 minutes was typically taken up by police calls, even though emergency medical calls go to fire departments. Because fire calls were less frequent, required more specialized equipment and had more complex response plans, many fire chiefs were concerned that a regional system would result in mistakes and delays that added up to diminished service quality.

Over a decade, centralized 911 emergency services would have saved the 13 communities more than \$11 million over maintaining 13 separate operations.

There was also opposition from powerful police and fire unions. “It was hard enough just getting police and fire together,” said former Natick Deputy Town Administrator Mike Rourke. He also noted that “dispatch duty gave older police officers and firefighters or those with a non-job related injury a place to land.” Even though the plan would not have resulted in the loss of any police or fire jobs, the unions saw it as a take away. They wanted to engage in impact bargaining and be compensated for the loss.

Separate from the politics, privacy issues, the use of differing protocols and sometimes-incompatible technology also proved to be obstacles to regionalization.

The obstacles to the single regional service slowly but inexorably ate away at support for the plan. One-by-one, towns dropped out. Finally, only Natick and Needham were left. From a political

point of view, combined dispatch for two non-contiguous towns was hard to sell (though not an issue in terms of technology). Substantively, two communities didn’t provide economies of scale sufficient to merit the necessary capital investment, and the proposal was abandoned.

MetroWest Emergency 911 Today

Despite the failure of the 1993 combined dispatch plan, advances in technology and a worsening municipal fiscal crunch have combined to change the face of emergency services in the 13 MetroWest communities over the last 15 years. Today, dispatch centers are highly sophisticated, complex, computerized operations. Those technological advances have necessitated the highly trained, specialized dispatchers that were one of the benefits of regionalization in 1993. The days of uniformed police and fire personnel answering phones are largely gone. In Natick, the police contract now prohibits it.

Budget pressures have forced the resolution of other issues. Today, virtually all the communities have a single PSAP for police and fire. With police calls far outnumbering fire and EMS, most municipalities have a single operation run by the police chief. Over time, fire chiefs have become more comfortable with this arrangement.

While some of the goals of regionalization have been achieved by technology and some of the obstacles eliminated in response to budgetary pressures, technological advances have also reduced obstacles that impeded the plan’s progress 15 years ago. There will likely always be local sentiment for having neighbors manning the phones, but improved mapping capability has reduced the legitimate concerns around having dispatchers who know a community well. According to Natick Police Chief Dennis Mannix, who runs his town’s 911 operation and has been a long-time supporter of regionalizing 911 services, “Technology, elimination of the uniformed police and fire personnel answering

phones and combined police and fire PSAPs make [regionalization] more doable than ever.”

Looking Ahead

Chief Mannix may not be the only one who thinks so. At the end of the 2008 legislative session, a bill was passed and signed by Governor Patrick that will raise the wireless surcharge by 45 cents per line per month and apply a 75-cent per line per month surcharge on other users (such as voice over Internet protocol). The legislation will generate an estimated \$28.6 million annually to provide incentive grants to cities and towns to develop regionalized 911 PSAPs and communication centers.

Technology, elimination of the uniformed police and fire personnel answering phones and combined police and fire PSAPs make [regionalization] more doable than ever.

To distribute the grants, a Regional Public Safety Answering Point and Regional Emergency Communications Center Incentive Grant Program will use a formula that applies a specified percent of total 911 surcharge revenue to recipients based on the number of municipalities to be served by a regional PSAP or emergency communication center.

Today, the ideal regional 911 emergency dispatch service for MetroWest might not look exactly like the plan put forward in 1993. Technology provides more flexibility to phase in such a system. Hybrid approaches that would achieve many of the desired efficiencies but maintain some local control are also possible. Still, any proposal would need to be accompanied by a political strategy to sell the idea and a plan to educate local stakeholders and citizens.

Regionalized emergency 911 service is currently a reality in less densely populated parts of the Commonwealth, such as Berkshire County and

Cape Cod. The combination of technological advances and a deepening municipal finance crunch may yet bring it to fruition in MetroWest and other parts of Massachusetts.

III. Berkshire County 911 Dispatch

Providing Smaller Communities With Better Service at Lower Cost

Prior to March of 2006, emergency 911 dispatch service for 20 towns in Berkshire County operated out of a room in the basement of the Superior Court building, using anything but the latest technology. The system had once operated under the direction of the county commissioners, but with the phase-out of county government in Massachusetts, Berkshire County Sheriff Carmen Massimiano offered to take it over.

Jack Quinn, a superintendent in Massimiano's office, remembers one time when they got a notice from Con Edison that demand for electricity was outstripping supply, and the company would have to alternate shutting down different parts of the grid to avoid a major blackout. The temporary electricity shut down required officials to turn to an army surplus generator. With the wind chill making it feel like 60 below zero, they found the generator frozen and had to use space heaters to get it going.

In 2004, state Executive Office of Public Safety officials came out to look at the Berkshire 911 operation. Despite Massimiano's best efforts to upgrade the system, they were understandably appalled by what they saw. The Commonwealth made grant money available for 911 upgrades, and Berkshire County was among the recipients, receiving \$1 million in 2005.

A new emergency 911 system was up and running at the Sheriff's Office, Berkshire County Jail and House of Correction in March 2006. As of the summer of 2008, Berkshire County Sheriff's Office Communications Center is still the only recipient of the 2005 grants to have a new operation up and running. Rather than waiting for the Commonwealth, the office used its own

construction crew to complete the job, which they did for \$950,000, returning \$50,000 to state taxpayers.

Around the same time, Berkshire received a \$1.4 million grant from the federal Office of Homeland Security for a technology upgrade. This is particularly important in Berkshire County, where the mountainous topography and poor cell phone reception necessitate microwave technology. Snowmobiles and sometimes even helicopters are needed to get to mountaintop towers in winter.

The Berkshire County Emergency 911 System Today

The result of the state and federal grants is a state-of-the-art facility that is light years ahead of the old courthouse basement. The secure location reduces the possibility of sensitive public safety information falling into the wrong hands.

The system now serves 23 towns, some of them outside Berkshire County, and it is the back-up system for nine other municipalities, including the city of Pittsfield.

The facility is staffed by highly trained, certified dispatchers. When a call comes in, the dispatcher clicks on a "recommendation" tab. From there, s/he clicks on the type of call from an extensive menu of choices and a "run list" comes up telling the dispatcher who and what to send to address the situation described by the call. To keep the so-called run plans accurate, the daily availability of staff and equipment in each community is continuously updated.

The facility is also one of 12 District Control Centers in the Commonwealth. It has Reverse 911 capability, which means that it can broadcast notifications in addition to receiving calls. It can also serve as a back-up emergency operations center.

Paying for a State-of-the-Art Regional System

State and federal grants made building the new facility possible, but they don't provide the funding needed to run it. The Sheriff's Office charges assessments to the 23 communities the service covers, based on population. The biggest costs are software upgrades and maintenance of phone lines and other technology. Other expenses are dispatcher training and recertification.

Of course, the regional system also generates substantial savings. The towns share just one set of personnel and operating costs and they benefit from shared capital costs as opposed to having to acquire and continuously upgrade multiple sets of expensive technology. Comparing the impact on communities that participate in the regional service to those that don't, Sheriff Massimiano said, "Lenox got a state-of-the-art dispatch center for \$20,000, while Dalton recently paid \$1 million for 911 upgrades." The \$20,000 refers to Lenox's annual assessment, while the \$1 million was the cost of complying with an emergency 911 upgrade required by the Commonwealth in 2007.

But the assessments don't come close to paying the full cost of operating the system, leaving the Sheriff's office to absorb about a \$250,000 chunk of the annual cost. When asked why they don't just up the assessments, officials say the towns couldn't afford it and they want as many communities as possible to participate.

Sheriff's Office officials estimate they will receive a grant of about \$80,000, but believe the Commonwealth should fill the gap between grants, the revenue generated by assessments and the cost of delivering regional 911 service.

Who's In, Who's Out

Sheriff Massimiano's ideal Berkshire emergency 911 system would include every community in the county except Pittsfield. (The current facility

would need to be expanded to serve the region's largest city, which has a population of about 45,000.)

Each city or town that doesn't participate seems to have its own reason why. Walter Atwood, chairman of the Great Barrington Board of Selectman is blunt about the reasons why his town, which is located in the southwest corner of the Commonwealth, isn't one of the 23 towns that take part. "Police were afraid they were going to lose their jobs; that's why they're against it." Atwood says the police played on local fears, arguing at town meeting that residents would be better served by dispatching done by people who know the community. The small town is a throwback to an earlier era of 911 emergency dispatching. Not only does it have its own dispatch service, but police and fire operate separate PSAPs.

The regional system also generates substantial savings. The towns share just one set of personnel and operating costs and they benefit from shared capital costs as opposed to having to acquire and continuously upgrade multiple sets of expensive technology.

Great Barrington's argument is a hard one to make on the merits. First, the kind of sophisticated mapping technology used by the Berkshire County Sheriff's Communications Center makes the issue moot. Secondly, Great Barrington's approach not only results in unnecessary duplication and cost, but it also takes away precious police and fire capacity by forcing police and firefighters to work dispatch. With police receiving about four times as many emergency calls as fire in Berkshire County, the system is even more inefficient for firefighters.

John Morocco, director of public safety for the city of North Adams, tells a very different story of why his city chooses not to participate. An old mill town that is transforming itself into an arts

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center, North Adams is the second largest city in the area with a population of just under 15,000.

Morocco is quick to praise the Sheriff's operation, but notes that North Adams' size, the population density and existence of the Massachusetts College of Liberal Arts all add up to more call volume than could be served comfortably by the regional 911 dispatch service. "With the bulk of our population in a 1.5 mile radius and a volume of 30,000 calls per year, it just wouldn't work for us," he says.

If indeed North Adams generates 30,000 annual police, fire and emergency medical calls, it is far more than any of the communities that currently participate in the regional service. With a total of just under 5,000 calls, Lenox was the busiest of the participating municipalities, according to fiscal 2008 figures. The Berkshire County Sheriff's Office Communications Center fielded a total of just under 49,000 calls during the fiscal year.

North Adams also seems to take a more modern and rational approach to dispatch service than does Great Barrington. The city has combined police and fire service, which it shares with the neighboring towns of Clarksburg and Stamford, Vermont. Morocco says they also use modern voiceless technology.

The three towns that began participating in the Sheriff's Communications Center after it was updated did so without much controversy. "It was either that or raise taxes," said Jack Quinn.

Enabled by advances in technology, regionalized emergency 911 services are common in many parts of the country. But in Massachusetts, Berkshire and Cape Cod are the only areas in which relatively large areas are served by a large network. Part of the reason is New England's long history of local control. Another reason is politics, which was a key barrier to the ultimately failed efforts to regionalize 911 services in 13

towns west of Boston during the 1990s.

Today, in more densely populated areas in eastern Massachusetts, police chiefs are often responsible for combined police and fire dispatch centers. The success of the Berkshire County Sheriff's Office Communications Center has depended largely on Massimiano's willingness to step in, take over the system and absorb the associated costs. With the demise of regional government in the Commonwealth, one barrier to its replication is figuring out just who will bear ultimate responsibility for delivering the service.

IV. Nashoba Associated Boards of Health

State-backed regionalization efforts have come and gone in Massachusetts, with varying degrees of success. But one such effort, conceived nearly 80 years ago as a public-private partnership, continues today to provide a lesson in building and sustaining the delivery of regionalized, multi-town boards of health services.

The Nashoba Associated Boards of Health, headquartered in Ayer, was founded in 1930 when 14 area towns joined together under a foundation-funded demonstration project aimed at showing how rural towns could improve their health services delivery by working with neighboring communities. Years earlier the state legislature, recognizing that small towns faced difficulties in meeting the mandate of delivering public health services through local boards of health, passed new legislation allowing towns to join together to hire health officers and support staff to provide these services on a regional basis. The enabling legislation adopted in 1927, Chapter 111, Section 27A, provided that “[t]wo or more towns may, by vote of each, form a district for the purpose of employing therein a health officer and necessary assistants and clerks, all of whom shall be appointed and may be removed by a joint committee composed of the boards of health of said towns.”

Under this new legislation, the state’s public health commission partnered with the New York-based Commonwealth Fund to launch a demonstration project of regionalized health services in the Nashoba Valley area of central Massachusetts. The Commonwealth Fund, a philanthropic foundation established in 1918 for the purpose of improving health care services, sponsored the project by underwriting the costs of the program during the demonstration period spanning the first five years. The participating towns included Ashby, Ayer, Bolton, Boxborough, Dunstable,

Groton, Harvard, Littleton, Lunenburg, Pepperell, Shirley, Stow, Townsend, and Tyngsborough.

Detailed historical information about the founding of what was originally called the Nashoba Health District is difficult to come by, according to current Agency Director James A. Garreffi. An account of the founding of the organization written by a Harvard University student in the 1940s asserts that the delivery of local health services in the 14-town area varied widely in quantity and quality and was carried out with little supervision, except occasional help from the state’s Department of Public Health. To improve the health services delivery to these towns, the new 42-member Nashoba Health District’s executive committee (composed of the three health board members from each participating town) hired a medical director, sanitary inspector, laboratory technician, and a clerk.

Following the fully funded five-year demonstration period, five of the participating towns withdrew rather than begin paying membership fees for the until-then-free health services provided by the Nashoba Health District. However, other towns petitioned to join the organization in subsequent years. And before fully withdrawing its support, the Commonwealth Fund in 1937 paid for the construction of a new headquarters for the fledgling association in Ayer.

Over the intervening years, the Nashoba Associated Board of Health grew to 19 members at its largest point, according to Garreffi. In recent years membership has remained stable, with 14 member towns for more than two decades following the withdrawal of Westford in the 1980s. The current member towns include Ashby, Ashburnham, Ayer, Berlin, Bolton, Boxborough, Dunstable, Groton, Harvard, Lancaster, Littleton, Lunenburg, Shirley, and Townsend.

The Nashoba Associated Boards of Health includes an environmental division at its

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headquarters in Ayer and the Nashoba Nursing Service and Hospice in Shirley. An informative Web site serves as a resource and clearinghouse for member towns and the association's services. Local health administrators and residents can download applications for a variety of needs, from a range of food service permits to septic disposal and camp permits. A "Locate a Sanitarian" directory provides contact information and availability for the half-dozen environmental staff employed by Nashoba Associated Boards of Health.

In addition, the organization's Web portal provides links and access to a range of environmental and health-related resources from other agencies, and the Nashoba Nursing Service & Hospice pages provide personalized introductions to its two staff nurses as well as basic helpful information.

Officials from member towns say services provided by Nashoba Associated Boards of Health

Officials from member towns say services provided by Nashoba Associated Boards of Health are essential and cost effective.

are essential and cost effective. "Budget questions have been raised about other regionalization efforts, but not with the Nashoba Boards of Health," says Townsend Finance Committee Chairwoman Andrea Wood, whose 30 years of local government experience includes serving on the town's board of selectmen.

"They have all the expertise that we can't afford to hire. We have always gotten good value."

Eric Hayden, a professor of finance and economics at UMass-Boston's College of Management, has studied the issue of regionalizing public health services statewide and concludes that Nashoba's longevity is likely the result of a combination of small town needs as well as their similarities.

"Rationally, it makes sense," Hayden says, pointing to the "very part-time" staff found in small towns of under 10,000 residents. "The idea in economics is economies of scale. It's hard to imagine that all these towns could be delivering services efficiently" on their own.

Indeed, when the Nashoba Valley towns were surveyed in 1930 for the Commonwealth Fund in preparation for the demonstration project, a report from the Massachusetts Department of Public Health notes that they found "an overall likeness of the towns and [a] 'uniformly neat, and well-kept appearance.'" All the current participating towns range in size from 3,000 to 10,000 residents, according to Garreffi, who in addition to his administrative duties serves as a health agent for several towns in the association.

Townsend pays approximately \$20,000 per year to the Nashoba Associated Boards of Health for its environmental services, which include septic tank and well inspections. "I couldn't touch a sanitarian for that," says Wood of the town hiring its own staff to carry out the mandated services.

The town also pays about \$27,000 annually for the association's nursing services, which include items such as flu shots and blood pressure screening clinics. About five years ago, Townsend dropped the association's mental health services because it found it didn't have sufficient need for them, Wood says.

Peter Cassinari, a 42-year veteran of the Littleton Board of Health and current chairman of the Nashoba Associated Boards of Health's Executive Committee, says his town uses the association's environmental, restaurant inspection, and nursing services and has seen few assessment increases. He stresses the convenience and coverage of having an organization such as Nashoba Associated Boards of Health working with a local board of health.

“You have people who are always available,” says Cassinari. “For example, you never have to worry about vacations or illnesses.” Nashoba Associated Boards of Health makes it possible for the town to have services available on a consistent basis for the 8,900 residents of Littleton, Cassinari says.

While officials talk about the value that Nashoba Associated Boards of Health brings to their community in delivering board of health services, there is little talk of this regionalization effort saving money. Garreffi admits that, in addition to there being little historical data about the Nashoba Associated Boards of Health, the organization has “not really been tracking the effectiveness” of its services. “The individual communities may do that to see if they are getting a good deal,” he says.

“These small communities worry about their budgets, but our assessments don’t change much, making it easy for them to budget for,” says Garreffi. Assessments to the member towns account for about a third of the Nashoba Associated Boards of Health’s budget, according to Garreffi. The rest is generated by fees to residents and businesses for services rendered.

Sandy Collins, the Director of Health Care Services for the Town of Westford, says her first charge when she was hired in 1986 was to evaluate the efficiencies of the town’s membership in the Nashoba Associated Boards of Health. Westford at the time was using the association’s mental health, nursing, dental, and environmental services, but it was already pulling out of the latter service area.

“When I came on board I started researching what we were getting for our money,” Collins says, detailing the town’s involvement in the organization. “I’m a firm believer that regionalization works in some situations.... We just felt like the funding we were paying didn’t get us the services. We got much more by hiring our own.”

Westford, which withdrew from the Nashoba Associated Boards of Health, experienced a substantial increase in population from approximately 10,000 residents in the late 1970s to 20,000 today.

“I hesitate to talk about this because we are really fighting for regionalization. It just wasn’t efficient in this case,” says Collins, citing as an example the fee for mental health services that the town was not fully using. “The need for regionalization depends entirely on what you have in your community and your staffing.”

Collins found, for example, that hiring a nurse dedicated to the town provided better service than contracting with Nashoba Associated Boards of Health. The arrangement also provided greater local control, she says.

As for Garreffi and Nashoba Associated Boards of Health, the key to continuing the success of the program is to maintain a highly flexible structure that is responsive to local needs and enables the organization to grow and consolidate according to the member towns’ needs. “Nashoba Associated Boards of Health is as big as it needs to be,” he says.

V. Metropolitan Area Planning Council

Filling A Need for Regionalized Procurement Services

When the Metropolitan Area Planning Council was established by statute as a state agency in 1963, the organization had a stated purpose to serve as a governmental entity to secure and administer federal grant funding on a regional basis, particularly in the area of transportation. Forty-five years later, the MAPC has evolved into much more than a planning agency and funding conduit. In a state where local leaders often look hesitantly at regionalization efforts, the MAPC has gained credibility in advocating collective municipal efforts by developing and delivering practical, cost- and time-saving services to municipalities.

Among the most notable of these efforts is the MAPC's collective purchasing programs and consortiums. In 1998 the organization founded the Regional Services Consortium Project, aimed at providing a forum where local government procurement administrators could collaborate to share information and resources and ultimately save money for their local communities. Today the program includes four regional purchasing consortiums, ranging in size from eight to 13 cities and towns, and oversees collective procurement programs for office supplies; public works services and materials; police and public works vehicles; homeland security and public safety; and water leak detection services.

In 2007, according to the agency's calculations, MAPC's collective purchasing programs facilitated the procurement of \$54.3 million in office supplies and furniture, highway maintenance services and materials, and public safety and public works vehicle purchases. MAPC officials estimate that, combined, these consortiums save participating towns at least \$2

million annually, but they contend it is difficult to accurately calculate the full value of these programs because some of the savings are hard to quantify. For example, municipalities participating in the office supplies purchasing program received discounts off of catalog list prices of 20 to 55 percent before joining a consortium, which grew to an average of 68 percent after entering the program, according to the MAPC.

The agency's public works program bids out approximately two dozen highway related goods and services such as guardrails, concrete and paving materials, numerous earth materials, street sweeping, and catch basin cleaning. This collective bidding process saves consortium towns an estimated 10 percent off of their highway maintenance and repair costs.

MAPC officials and participating members say the collective procurement services provide valuable efficiencies and save staff time that would otherwise be spent developing bid specifications and conducting their own procurement processes. These efficiencies lead to real savings in staff time and the timely delivery of needed goods and services.

MAPC's success in promoting and developing collaborative efforts among municipalities is in part due to its legal standing. The MAPC is one of 13 Massachusetts regional planning agencies and, under the Public Works and Economic Act of 1965, is a federally designated economic development district. The district includes 101 cities and towns, and the agency is governed by representatives from each municipality, gubernatorial appointees, and state and City of Boston officials. In 1971 state lawmakers amended MAPC's enabling legislation to give the organization the standing of a municipal entity. As such, the organization has, under state statute, the same procurement powers as any city or town in the Commonwealth.

According to Deputy Director Stephen McGoldrick, the key to MAPC's success in building regionally based purchasing consortiums is its unique ability to serve as a neutral municipal entity with the administrative resources to lead the collaborative process. State procurement regulations require that in a purchasing collaborative, an individual municipality must take the lead for statutory and administrative purposes. Without a neutral facilitator, an individual municipality would have to spearhead the collaborative process, requiring the city or town to take on a greater workload to benefit other municipalities. Not only are cities and towns reluctant to take on additional responsibilities and expend precious resources to benefit other municipalities, according to McGoldrick, but also participating towns are reluctant to yield such authority to a neighboring community.

What we sell is release from the administrative workload of procurement, administrative support, and an outstanding price.

Indeed, even the MAPC's efforts to found and expand its Regional Services Consortium Project were viewed skeptically at the outset. "When we started this, there was a lot of suspicion from the cities and towns," says McGoldrick. "After we've been here for a while, the reaction is 'where have you been?'"

MAPC's Regional Services Consortium Project expanded quickly after its founding a decade ago. Today the organization's four regionally based purchasing groups include the 11-member South Shore Regional Services Consortium, 10-member North Shore Coalition, 8-member Metro Northwest Regional Services Consortium, and 13-member Metro Mayors Collation. Consortium members capitalize on their geographic proximity and economies of scale to achieve greater buying power, and the groups' memberships and services

expand and contract depending on the needs of participating cities and towns.

"Obviously, with the issues facing our municipalities – with increasing expenses and declining revenues – we have to look at how we can save," says Thomas Younger, town administrator for Belmont. The town uses MAPC's purchasing consortiums to get deep discounts off catalog prices for office supplies, takes advantage of its financial card services, and is considering joining the organization's public works program.

Younger is a strong advocate for municipalities working together when purchasing goods and delivering services. He stresses the importance of physical proximity in making regionalization efforts work and warns against consortiums becoming too large as to lose their geographic advantages. Belmont first started working cooperatively with next-door Lexington looking for ways to save money. The towns subsequently invited other towns to join, and the purchasing collaborative came to include Arlington, Bedford, Billerica, Burlington, Chelmsford, and Wilmington. In addition, Belmont has developed shared animal control services with Lexington and Bedford, and is considering developing shared nursing services with Lexington.

"In these economic times, it makes sense for cities to combine forces and save money," says Younger. "You've got to have aggressive management in these times. No community can be an island. You can't just sit there by yourself. If you try to be 351 cities and towns, it's not going to work."

Steve Daly, director of MAPC's Regional Services Consortium Project, reinforces Younger's assessment and takes it step further by listing three basic requirements for a successful consortium – close physical proximity for greater shared interests and bidding leverage, strong central municipal administrative leadership, and a willingness to work together. Daly and Younger

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cite a failed consortium effort that included a cluster of towns around North Reading but stretched from Bedford to Rockport as helping to shape their collaborative approaches. Many of the towns shared little in common, and the broad geographic reach discouraged aggressive competitive bidding for public works services. The consortium could not sustain itself, according to Daly, and became a learning experience for MAPC's Regional Services Consortium Project.

To participate in the consortium project, municipalities pay a nominal annual membership fee that provides them access to a range of collaborative services provided by MAPC staff devoted to the project. For each member community, the chief administrative officer serves as a trustee for the consortium. Trustees meet regularly to develop an agenda for the group, which is then pursued by MAPC staff working with consortium leaders and subcommittees.

This town-led collaborative process, in which needs as well as possible solutions are identified by municipal officials themselves, is important to navigating the often thorny issues around municipal cost-cutting and local control, according to McGoldrick. Developing successful regional consortiums and purchasing pools requires looking to municipal leaders themselves.

"We don't make it [the collaborative process] happen, but we help them [municipalities] make it happen," says Daly. "We make the arrangements."

Rather than imposing a predetermined program, this bottom-up approach ensures buy-in from participating cities and towns and produces cost-effective solutions particularly suited to their demographic and geographic characteristics.

Among the services MAPC staff provides are coordinating regional forums on government policy, purchasing, and service delivery issues; partnering with the municipalities and consortiums

on inter-local initiatives; and facilitating municipal employee training programs. Perhaps most importantly, the MAPC staff also executes the collective procurement process for the member municipalities.

The experience and success of MAPC's Regional Services Consortium Project has led to the organization developing additional collaborative purchasing programs and becoming a leading resource for cities and towns in eastern Massachusetts looking to gain efficiencies in purchasing goods and services. One of MAPC's fastest growing and most successful services has been in the procurement of police, public safety, and public works vehicles for municipalities in conjunction with the 300-member Greater Boston Police Council. For a 1.5 percent charge – \$300 for a typical police cruiser – MAPC facilitates the purchases for participating municipalities via standardized procurement specifications that speed the process. The organization provides all the administrative services to comply with state procurement laws and tracks the process.

MAPC officials estimate that, combined, these consortiums save participating towns at least \$2 million annually.

"What we sell is release from the administrative workload of procurement, administrative support, and an outstanding price. It may not be the absolute lowest price, but it will be the most cost-effective price," says McGoldrick, adding that MAPC's bid procurements have never faced a legal challenge, which can add substantial additional costs and delays for a city or town.

MAPC leaders tout the benefits of time saved by staff that would otherwise be entangled in the highly regulated public procurement process. The savings in human resources can then be applied to other needs. And the MAPC also

emphasizes that their procurement programs save dollars through high-volume discounts and heightened competition among vendors for the large contracts.

Woburn Police Chief Philip Mahoney, who sits on the Greater Boston Police Council and is president of the Northeast Massachusetts Law Enforcement Council, says his city uses the MAPC to purchase cruisers and public works vehicles, with good results.

“There is a small cost to that, but it’s paid back a thousand times, and I think we get a good price,” Mahoney says. “It allows you as a manager to spend more time on the day-to-day work of the department.”

In 2007 MAPC facilitated the procurement of \$15.3 million worth of International trucks and special-purpose vehicles for municipal public works departments and \$5 million in Ford, Chevy, and Dodge cruisers and sports utility vehicles for police departments. The program has been so successful, according to Daly, that the MAPC is now working with fire chiefs to develop standardized procurement specifications to purchase fire apparatus and ambulances.

MAPC’s menu of services has also grown to include providing regionalized administration and procurement in the area of homeland security. Working with the Northeast Massachusetts Homeland Security Regional Advisory Council, the MAPC serves as fiduciary and conducts all the procurement, planning, and administrative activities for the 85-member organization, performing everything from sitting in on meetings to ensuring all the council’s activities meet federal guidelines.

Members of the homeland security council say the MAPC’s expertise in regionalized service delivery and procurement have been invaluable in relieving the heavy administrative burden that comes with Homeland Security funding

and advancing the efforts of the council. “If [the MAPC] weren’t available, to put this on one city or town, I don’t think they would be very happy,” says Watertown Police Chief Edward Deveau, president of the council.

The MAPC continues to look at other areas where it can offer municipalities additional efficiencies, particularly in areas that overlap or where towns are conducting part-time services, according to Daly.

“It’s a very fluid kind of environment,” Daly says of the Regional Services Consortium Project, explaining that they adapt their programs and services to meet the needs of participating municipalities. “We’ve developed an extensive portfolio of services that municipalities can choose from. It’s kind of an a la carte approach.”

VI. The Hampshire County Council of Governments

When state lawmakers warned of phasing out county government and encouraged communities to prepare for the move, local officials in Hampshire County took the challenge seriously, according to Pennington Geis, administrator for the current regional Council of Governments. Knowing that many of the small towns in the area could not go it alone when it came to delivering some basic services, local officials worked with outgoing county commissioners to develop a new approach to regionalized service delivery. The result, according to Geis, was the formation of a more dynamic, responsive, and, ultimately, entrepreneurial entity than its predecessor.

The Hampshire Council of Government (COG) came into legal existence on Jan. 1, 1999, under Massachusetts General Law 34B, §20(b), after voters in each of the 20 Hampshire municipalities approved its formation. The COG is one of only two such regionalized service delivery organizations in the state; the other is the Franklin Council of Governments. The Hampshire COG's primary focus was to continue delivering needed services previously performed by its county government that were not transferred to the state or other agencies. These services included snow plowing and road maintenance, operating the county-owned Hampshire Care nursing home in Leeds, and, most importantly according to local officials, continuing the highly successful health insurance program for public employees that now serves 61 municipalities in three counties.

"It's a little different than towns getting together to regionalize services," says R. Oliver Wiley, the COG representative from Chesterfield, of the founding of this regionalized service delivery coalition. "In this case, it's what's left over from when the state decided to do away with county government... Considering many factors, I think it operates well – quite well, actually."

The COG is an improvement from the former county government system, according to Geis, because it moved decision-making from a three-member county commission to a more democratic board that has direct representation from each member town. Representation on the council is also proportional to the size of the towns. Belchertown, for example, has four elected representatives on the council, and Granby has two. This arrangement, according to Geis, gives everyone a stakehold in the decision-making process.

"Towns saw [the COG] as a vehicle for their interests as opposed to perpetuating a county government system," says Geis. "Participating towns voiced the needs of their own communities," creating new services the COG could provide on a regional basis. She cites the example of a small town raising the issue of finding it difficult to fund and keep a part-time building inspector, a concern shared by other towns, which resulted in the COG developing a program to provide building inspection services to member towns. Services such as building inspection are self-funded in that fees collected by the COG staff go to the agency rather than to the town.

By all accounts, the COG's regionalized services provide participating towns with substantial savings. According to Wiley, the COG group purchasing services for schools and highway departments alone more than cover tiny Chesterfields' (population 1,200) membership fees. And that doesn't fully capture the savings of the considerable staff time freed up not having to oversee complex requests for proposals or bid processes. Kenneth Elstein, a COG councilor from much larger Belchertown (population 13,000), says the COG's group purchasing program saved his town about \$100,000 a year at a time when the COG membership fees for his town were \$40,000 annually.

The COG's cooperative purchasing program, started under the county system and now more than 25 years old, serves a variety of governmental departments and entities in Berkshire, Franklin, Hampden, and Hampshire counties. In fiscal year 2007 alone the COG processed \$4.4 million in goods and services purchasing, with an estimated savings of nearly \$850,000 to the participating entities.

The COG's group health and life insurance program is among the other services most frequently mentioned as being an invaluable asset for area municipal governments. The insurance program started with approximately 20 towns and became self-funded in the mid-1990s, according to Geis. Today the cooperative insurance program includes 61 public employers in Hampshire, Franklin, and Hampden counties and saves the participating towns and school systems approximately \$1.5 million annually, according to Geis. The success of the program lies in the fact that it has been able to keep annual insurance increases in the single digits, while municipalities across the Commonwealth were seeing budget-busting double-digit annual inflation, according to Geis.

The COG is an improvement from the former county government system, because it moved decision-making to a more democratic board that has direct representation from each member town.

The COG also offers members surplus federal equipment at a substantial savings, building inspection and zoning enforcement services, and a regionalized tobacco control program that serves 33 towns in Franklin, Hampshire, and Worcester counties. Although savings in these areas may be small, they provide towns with the ability to fulfill mandated or otherwise beneficial services that they could not muster independently.

Despite municipal savings, the COG faced a considerable challenge following legislative approval of its charter in 1999. A number of primarily larger towns, which had been required to participate in the transition from county government and whose voters approved their membership, subsequently moved to withdraw from the COG, believing that smaller towns were getting a greater benefit from the organization, according to Geis. In the years following the 1999 establishment of the COG, the towns of Amherst, North Hampton, Hadley, South Hadley, Hadfield, Hatfield, Ware, and Wothington withdrew.

An analysis of the return on investment by COG members conducted by Geis found that, indeed, smaller towns were achieving greater economic benefits than were larger towns. Membership in the COG was providing a positive return on investment to all its members, but while smaller towns were seeing a \$7-\$8 return for every membership dollar they put into the COG, the larger towns, which already had some economies of scale in place, were seeing a return of approximately \$1.80 for every dollar spent on COG membership, according to Geis.

The withdrawal movement also took hold in other towns. An article on the town meeting warrant in Belchertown in 2003 called for the town to leave the COG, but it was beaten back. "There was a serious effort to pull us out [of the COG] but that was defeated at town meeting," says Elstein, who adds that he joined the council as a representative for his town the following year to work toward strengthening it.

The withdrawal of a third of the towns from the COG – many larger towns paying greater, pro-rated dues – appears to have sparked a measure of self-preservation among remaining council members, which included Belchertown, Chesterfield, Cummington, Goshen, Granby, Hunnington, Middlefield, Pelham, Plainfield, Southampton, Westhampton, and Williamsburg.

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In an effort to quell the threat of further withdrawals from the COG, the council looked at reducing the membership assessments on the remaining member towns.

COG membership fees for each municipality were assessed by a formula in the authorizing state legislation based on the size of the town, with a maximum of \$40,000 annually for any town. Rather than grapple with restructuring the assessment formula to keep the remaining larger towns in the COG at the risk of alienating the smaller towns that now made up some 90 percent of the council, the council in 2004 proposed making it economically infeasible to withdraw from the council.

In fiscal year 2007 alone the COG processed \$4.4 million in goods and services purchasing, with an estimated savings of nearly \$850,000 to the participating entities.

A provision in the charter requires member towns provide a one-year notice before leaving the COG, meaning that a proposal to withdraw that comes before a town meeting still requires the town to pay that year's annual dues before withdrawal takes effect the following year. Looking to stanch the withdrawal movement, the COG adopted a 4-for-1 membership deal for its members, thereby eliminating any immediate savings from withdrawing. Under this fee structure, the payment of one year's annual dues covers four years of membership in the COG. For Belchertown, for example, that meant that payment of the \$40,000 membership fee for a year (due even if town meeting voted to withdraw) covered three additional, free, years of membership. The end result was that the cap on member town dues effectively became \$10,000 annually.

"In principal a town could withdraw on a one-year notice," says Elstein. "But [with this fee

structure] it became ridiculous for any town to withdraw."

The 75 percent reduction in fees appears to have accomplished the goal of stabilizing membership by preventing further withdrawals from the council. Local politics, however, appear to remain a challenge for some towns to continue their participation in what by all accounts is a beneficial membership. In the town of Williamsburg, for example, selectmen in 2006, at the recommendation of the local finance committee, endorsed a town meeting article to withdraw from the COG to eliminate the membership fee line item from the annual budget. For Eileen Stewart, the council representative for the town, the local proposal was penny-wise but pound-foolish.

"I think small towns are super penny pinchers," says Stewart, explaining that the local finance committee saw other more immediate, tangible uses for the membership dues such as a new police cruiser. By the time the article reached the town meeting floor, however, it was an orphan, with no one speaking in favor. Williamsburg remained in the COG.

"I don't think we did enough to tell people why they needed us," says Stewart of why towns withdrew or looked at withdrawing. She suggests the COG failed to market its benefits. "It's clear as a bell to me why we need regional government."

Stewart points to additional programs like the shared landfill and prisoner lockup as examples of where Williamsburg and other similar-sized towns can't provide services individually and need a collective effort. In the case of public safety, were it not for a shared lock-up facility, a single weekend arrest in Williamsburg, for example, would pull part-time police staff from the streets to guard the prisoner. The COG was instrumental in advocating for and planning a shared, multi-town lockup that is now operated by the sheriff's office, according to Stewart.

A silver lining in the threat of membership withdrawal, however, was an effort by the COG to become more entrepreneurial to cover reduced membership fees, which in fiscal year 2007 were a mere \$37,206 for a program budget of \$45 million, according to the council's annual report. In March 2006, the COG rolled out a new electricity distribution service, selling power to participating members and other towns in the region. Hampshire Power began operation with the towns of Granby and Goshen as its first customers and expanded rapidly, offering Real Time Rate and profit sharing options. According to the COG's fiscal year 2007 annual report, Hampshire Power provided electrical services to 34 towns and districts in Hampshire, Franklin and Hampden counties and to five businesses.

For those who chose the profit-sharing option, Hampshire Power paid back nearly \$48,000 in profit rebates with the participating entities. Belchertown selected the Real Time Rate option, which applies the actual hourly market rate for each hour's usage during the meter cycle, and saved some \$150,000 in the first year of its participation, according to the COG annual report.

These savings to local municipalities provided further fiscal evidence of the need for and advantages of regionalized services in the area, says Elstein. Equally important, though, for Elstein and the COG, was that the electricity program provided the council with a reliable source of income via administrative fees and profit share to offset the reduction in membership fees. The new program stabilized the COG and protected the continued delivery of its other, highly valuable services, such as health and life insurance. Hampshire Power has been so successful that the COG is looking to extend its services to Berkshire and Worcester counties and expand its services to include green energy plans and supplying residential power through municipal aggregation, according to the COG annual report.

"It seems to me that in most of America, the trend has been toward ... regionalization," says Elstein, who cites multiple examples of regionalized services being formed out of necessity, such as for the distribution of Homeland Security funds. "In Massachusetts, the need for regionalism is so clear that they forced the creation of a number of ad hoc organizations that are interconnected in complex ways."

Hampshire Power seems to have sparked new hope for the long-term success of the council and its regional services, and it may have some former COG members eyeing a return to the council.

"If we can survive for another few years and get this electrical program going, then I think we will see people come back," says Stewart, suggesting that a well-funded COG will be an attractive investment for other municipalities.

Indeed, in Hadley, which withdrew from the COG but now buys its electricity from Hampshire Power, Town Administrator David Nixon keeps an eye out for an opportunity to rejoin the council.

"We looked at [rejoining] very seriously, but the town finances were such that we could not take advantage of that at that time," Nixon says, explaining that Hadley is involved in other regionalization efforts. "The concept of regionalization is attractive. The problem is getting the scratch together to do it."

On the other hand, Geoffrey Rogers, who is the regional director of services for the COG and runs the Hampshire Power program, doesn't see towns lining up to join the COG anytime soon. "We're trying to function as a business," he says. Municipalities in the region will likely take the same approach, looking to gain efficiencies through the COG's program offerings without paying membership dues, regardless of how small or large they are.

VII. The Education Cooperative

Taking Collaboration to the Next Level

The Education Cooperative (TEC), located in Dedham, Mass., is one of 32 regional education collaboratives in the state that helps local school districts fulfill their statutory education requirements. Although the collaboratives were born out of necessity to meet new mandated education services, they have grown as a resource for local school districts to access regionalized services and supports that save money and provide greater efficiencies. And according to some proponents, these collaboratives have potential for providing even more regionalized services.

Most of the state's education collaboratives were established in the mid-1970s in response to passage of the state's special education law, Chapter 766, in 1972. The law, An Act Further Regulating Programs For Children Requiring Special Education and Providing Reimbursement. Therefore, required school districts to provide free, appropriate education to all children with special needs, in the least restrictive environment, regardless of their disability. Because of the frequently low incidence of students with certain special needs in individual districts, schools looked for ways to work with neighboring districts to fulfill this requirement. At the time, according to the state's Department of Education, local districts were experiencing shrinking school enrollments and increasing costs, which encouraged them to view educational collaboratives as a cost-effective way to address these challenges.

In response to the local districts' interest in working together to meet the requirements of the new special education law, the state two years later in 1974 enacted legislation authorizing school committees to approve agreements for joint educational activities with other school districts. The legislation, Chapter

40, Section 4E, although spurred by the new special education requirements, provided the greater benefit of helping districts broaden and improve other school programs and opportunities for students, according to the Department of Education. Vocational education, low-incidence regular education programs, staff development, and school services also became recognized as areas where the fledgling collaboratives could provide local districts with improved services and efficiencies.

Education collaboratives were believed to be a temporary solution but now serve more than 250 municipalities and school districts in the state, encompassing over 6,000 public school students in the full range of education programs, according to the Department of Education.

TEC was founded in 1980 to serve suburban communities west and southwest of Boston. Today the cooperative consists of 15 members, including Canton, Dedham, Dover, Framingham, Holliston, Hopkinton, Medfield, Natick, Needham, Norwood, Sherborn, Walpole, Wayland, Wellesley, and Westwood. With a budget of approximately \$7 million, most of which is generated by special education tuition, TEC's services include a range of special education programs, alternative schools, professional development and licensure, internship opportunities, cooperative purchasing, and other resources that support administrators, teachers, and students.

Most of TEC's approximately 125 personnel are devoted to delivering special education services to member districts. TEC hires the necessary teachers and staff according to the special education needs of the member districts and works with its membership to identify physical space in the district schools to host TEC's classes and programs. TEC's special education services include multi-handicapped programs; speech, occupation, and physical therapy; programs for the deaf and hard of hearing; and early childhood

screening, among others. Member districts that have a low incidence of special needs students in particular areas can choose to send their students to a TEC-designated program.

In addition, TEC operates three alternative schools designed for middle and high school students. The schools – the Phoenix School, TEC High School, and TEC Learning and Vocational Center – provide a variety of learning environments and services to support a range of student needs, from higher-level students with difficult past school experiences, to developmentally delayed students or those with complex learning, behavioral and emotional issues.

Dr. Sandra Einsel, director of pupil services for the Walpole Public School, says local districts need education collaboratives like TEC to provide the required special education services more efficiently and cost-effectively, particularly among the lowest incident populations.

There's no way that an individual town can compete with the purchasing power of a collaborative on the big-ticket items.

“When you have just a handful of children with a variety of different needs, it makes sense to access your collaborative,” Einsel says. “If you have only one child who is quadriplegic and medically fragile, it doesn't make sense for you to develop your own program and hire your own staff.”

Although Einsel doesn't track the savings that TEC services provide Walpole schools, she estimates that the collaborative's tuition charges for special education may be about half the cost of building an in-house program for a low-incident special needs student. Using the example of the quadriplegic and medically fragile child, Einsel estimates that the cost of hiring a teacher and part-time aide and providing the necessary health insurance and nursing services for the child would approach twice the TEC's tuition of

\$40,000 to \$45,000.

Education collaboratives across the state tend to develop specialties in different areas, according to Einsel, and TEC has earned a reputation for cutting-edge services for special needs students. In addition to its existing programs, according to Einsel, TEC provides districts with more individually focused special education services. “If I say I need this, they will build it for me,” she says.

While TEC's so-called bread-and-butter is its special education services, Executive Director John Connolly points to the peripheral services offered by TEC and other collaboratives that show real potential for delivering services on a regional basis. One such program is the TEC's cooperative purchasing program, which has grown to be among the largest and most successful run by an education collaborative, according to Connolly. The program provides member and non-member districts with the increased leverage of collective bidding in six areas: paper, office, classroom, art, and commuter supplies; cafeteria supplies; athletic equipment and supplies; custodial supplies; fuel oil; and natural gas. The largest of these groups – paper and office supplies – last year included 650 items, 58 participating school districts and nearly \$5 million in purchases, according to TEC staff and statistics. The cafeteria supplies cooperative purchasing program included 43 participating towns buying some 350 products, including milk, bread, grocery items, and paper goods.

Norwood Schools Superintendent Edward Quigley says his district has consistently used TEC's cooperative purchasing programs for items such as cleaning supplies, cafeteria products, sporting goods, and paper primarily for the thousands of dollars in annual cost savings, with an added bonus of saving staff time. “On occasion we have done spot checks on the pricing of certain items, and TEC always comes out ahead,” Quigley says, adding that the cooperative's prices

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are often lower than the state's bid list. "There's no way that an individual town can compete with the purchasing power of a collaborative on the big-ticket items."

Connolly says TEC's purchasing power gets collaborative members discounts of up to 70 percent off of catalogue prices for paper and office supplies, and the program collectively saves school districts millions of dollars. Under the program, TEC staff prepares bid packages for the various categories with input from the participating school districts as to their needs, and once a vendor is selected, the vendor works directly with the local district.

...local districts need education collaboratives like TEC to provide the required special education services more efficiently and cost-effectively, particularly among the lowest incident populations.

"This program is more user friendly," says Maureen DeChristoforo, purchasing coordinator for TEC. "A lot of the school districts find the state procurement system a little complicated."

TEC offers the cooperative purchasing services free to its members and for the nominal sum of \$600 for non-members, which may explain why 56 school districts currently participate in the program. "We literally save schools millions of dollars," says Connolly.

But Connolly and participating members agree that special education services and cooperative purchasing programs are only the veneer of what makes educational collaboratives such as TEC successful. At the heart is an organization that provides the framework for shared thinking across school-related functions, which breeds collaborative thinking. TEC has some 35 so-called "job-alike" programs that provide forums for education-related professionals to share job

challenges and experiences with their regional peers. These groups range from superintendents and various levels of school principals to specialty teachers, food service managers, and financial administrators.

For Canton's Dr. John D'Auria, TEC's superintendents job-alike program has been invaluable in helping him transition to the school district's top job. Even with 37 years of previous education experience under his belt, D'Auria says TEC's job-alike program has made a significant difference. "From a personal perspective, it ties me together with other area superintendents to share ideas around education and finance," D'Auria says. "It's been pretty substantial for me so far."

But "so far" is not enough for TEC's Executive Director Connolly. He wants to spread the word and suggests that the current menu of services offered by TEC is just a starting point: "The beauty of a collaborative is that no idea is a bad idea. If two or more districts need something, we can do it for them."

VIII. Veterans Services

Serving Veterans Through Different Approaches

Massachusetts seeks to provide its 400,000 veterans with some of the nation's most comprehensive benefits. Many of the services are available to veterans and their dependents with incomes up to 200 percent of the poverty level, or about \$1,600 per month. A few others are open to all veterans.

State law requires every municipality in Massachusetts except Boston to hire a veterans' service officer (VSO). The VSO's duties include locating veterans, advising them of their rights and benefits, helping them apply for and receive state and federal benefits, posting and holding regular office hours, and serving as the primary contact for questions from veterans and their families about benefits like housing, fuel assistance, employment and vocational opportunities, medical care, education and burial expenses. They also often help veterans access social services, such as help with substance abuse.

The state Department of Veterans Services can outline standards for a VSO's performance, but the officers work for municipalities. Massachusetts Undersecretary of Veterans Affairs Coleman Nee says they serve as a combination of "friend, case worker, social worker and motivator."

Routine Regionalization

The law allows two or more contiguous towns to share a veterans' service officer, and each town with a population of more than 12,000 is required to either employ a full-time agent or form a district with at least one other community. To avoid situations in which they grow too large to effectively service their caseload, districts must be approved by the state Secretary of Veterans Affairs.

Of 351 cities and towns in Massachusetts, about 135 share VSOs. Those municipalities are broken into 29 districts. The districts range from a number of instances in which two towns share an agent, to a district of 25 small towns in the central and western part of the Commonwealth. All of Cape Cod shares an agent, as do the towns on Martha's Vineyard, together with the island community of Gosnold.

Unlike some other services, the sharing of VSOs among municipalities has generally not been controversial, though the communities that comprise a district routinely change. For example, Winchendon in 2004 decided to withdraw from a district and have its own agent.

When towns share a VSO, s/he generally sets up regular office hours in each town, rather than maintaining a single, centrally located office. The reason is to increase local visibility. Many veterans are either reluctant to ask for help or unaware that it's available. This approach does present a logistical challenge and many agents will use a home office as their base of operations. Responsibility compensating agents who serve multiple municipalities is usually apportioned based on population.

The requirement that communities have or share a VSO was brought to people's attention in the last year when a Boston television station found eight communities around the Commonwealth, including Governor Patrick's town of Milton, that were not providing any services to veterans. After the report aired, Lt. Gov. Timothy Murray, Secretary of Veterans Services Thomas Kelley and Attorney General Martha Coakley jointly sent a letter to municipal leaders in January 2008 reminding them of their obligations under Chapter 115 of Massachusetts General Laws. The letter asked mayors, city and town managers and selectmen to send the name of their city or town veterans' service officer to the Massachusetts Department of Veterans Services by March 1st.

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The presence of the Attorney General's name on the letter was a none-too-subtle hint that there would be consequences for failing to comply.

Secretary Kelley has since sent a follow-up letter, and Nee reports a high rate of compliance.

Reaching Out

The rule requiring communities with populations of over 12,000 to either have a full-time VSO or be part of a district is meant to insure against veterans being neglected, but some bristle at what they call a one-size-fits-all approach. For example, Westborough Veterans' Service Officer George Perry volunteers that the town is not in compliance with Chapter 115.

The town has a population of about 18,000, but Perry says he has only eight clients. Rather than become part of a district, the town has chosen to keep Perry part-time and have him perform a range of services that exceed state requirements and are often delivered by different departments in other towns.

In addition to ensuring the receipt of state and federal veterans' benefits, he helps veterans obtain fuel assistance, food stamps and other social services. Perry is in charge of the town's Veterans and Memorial Day parades, maintains the cemetery and serves as the burial agent for veterans. He administers a variety of programs specifically designed to assist newly returning veterans, such as "Helmets to Hard Hats," which helps them find jobs in the construction industry.

Neil McGuirk, who is the veterans' services officer for a five-town district in central Massachusetts defends the law. He argues that an officer with only eight clients in a town of 18,000 isn't proactively seeking out veterans in the community. Westborough could comply with the law by joining with at least one other community and employing a full-time veterans' services officer.

Although Undersecretary Nee says most communities are doing a good job, there are a number of municipalities and districts that serve fewer veterans than they should. In those cases, the Department of Veterans Affairs' first approach is to provide assistance to cities, towns and districts about how to get the word out that the services are available. "There are a number of best practices models out there that communities can look at," Nee says.

Some argue that outreach isn't part of the job, but Nee disagrees, saying that outreach is part of the "spirit of the law." He argues that outreach is particularly important because so many potential beneficiaries are unaware that veterans benefits extend to widows and dependents. "If you walk into any senior center and ask whose husband was a veteran, a lot of hands will go up," Nee says.

Westborough's Perry agrees that outreach is part of the job. He says his office places ads in the local paper about the services they offer, he works with the local senior center and participates in regular breakfasts there that inform seniors of the services various town departments can provide. He also works with the local Veterans of Foreign Wars and American Legion posts, and information about veterans' services is posted on the town website. His assistant even hosts "Veterans' Corner," a local cable access show focused on veterans' issues. "Chapter 115 was written to protect the indigent," Perry says. "Westborough is an affluent town and there just aren't a lot of people here who qualify for benefits."

As for compliance with Chapter 115, Perry says the message he got was that no enforcement action would be forthcoming. The bottom line is that state officials know Westborough is providing its veterans with appropriate services, and action would only be taken against towns that were not.

Money spent by cities and towns on qualifying veterans' benefits is subject to a 75 percent state reimbursement. Completing the appropriate

paperwork to make a municipality's case for reimbursement is an important part of the work of veterans' services officers. It recently became clear that failure to complete the paperwork can be a problem when it was learned that the town of Barre and another central Massachusetts district hadn't received any state reimbursements in several years. Nee points out that municipalities are required to file monthly paperwork with the Commonwealth even if they aren't claiming reimbursement. The Department of Veterans Services has developed software to simplify online submission of documentation.

Like many areas of government that generally operate under the radar, closer scrutiny has uncovered some problems in the provision of services to Massachusetts veterans. But there is little evidence that the sharing of veterans' services officers is responsible for the problems. The issues surrounding the provision of veterans' services have more to do with taking the time to make sure it doesn't slip through the cracks than whether municipalities provide the services on a regional basis.

■ Regionalization

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