Dane County Purchase of Service (POS)
Leadership Coalition
HHN Presentation
October 8, 2020

POS Overview

History of POS:
- September 22, 2014 – POS leaders, POS Board members and other stakeholders met with Lynn Green and DCDHS staff to review the Baker Tilly audit report and the DCDHS prioritized list of recommendations
- October 2014 – May 2015 - Coalition/Consortia Chairs were asked to use a similar process used by DCDHS to prioritize the Baker Tilly recommendations with their respective coalitions.
- June 2, 2015 – first POS/DCDHS meeting held.
- On-going – the group meets monthly/as needed to address the purpose and priorities listed below.

POS Membership:
Key leaders representing Homeless Services, Children Youth and Families Consortium, Elderly Services Network, Recovery Coalition of Dane County, and Physical Disabilities. The Developmental Disabilities Coalition had been an active member until 2018 and the implementation of Family Care. DCDHS is represented by the Human Services Director and key financial and program leaders.

Since COVID, the group has informally expanded to include more POS representatives in order to share ideas and solutions.

There has been discussion to more formally expand membership to ensure inclusive voice throughout POS. COVID has delayed this process.

Purpose of POS Leadership: To develop and enhance the partnership between DCDHS and POS and work collaboratively on solutions for Dane County's Human Services System

POS Priorities: (following are the shared priorities across POS Coalitions. Each coalition has additional priorities focused on their specific area(s) of focus.
1. Continue to build strong relationships and partnerships across coalitions to strengthen the human services system of care in Dane County. That all areas are interconnected and reliant on the other and need adequate funding.

2. Continue to build a partner relationship with DCDHS, County Executive and the County Board (and its committees). Focus on Baker Tilly recommendations had been a regular focus of the POS meetings through 2018. DCDHS concluded their work on the Baker Tilly Priorities they had identified.
   - In an effort to address relationship building and partnership development, guests to the POS meetings have included County Executive Parisi (annual), DCDHS - Fiscal Services (now a regular attendee), Board Supervisors/HHN/Personnel and Finance/Board Chair (annual), DCDHS Leadership, Wesley Sparkman - Office of Equity and Inclusion, and other community partners involved in similar work and who have a stake in a vibrant human services system in Dane County.
3. COLA
   - COLA – annual need among POS to prevent deterioration of human service and keep vital services available to those in need throughout Dane County.
   - Since 2016 a COLA has been provided and been well received, appreciated, and has been beneficial. The COLA has been used to increase salaries, cover increased cost of health insurance and employee benefits, and fill other financial needs of agencies. Its impact has varied across agencies. Small agencies have received as little as $200 as a result of the COLA so impact is small. Since the increase is only on County GPR, it doesn't cover the full cost of salary increases or benefits but helps.
   - Although still a priority for POS, we understand that this may not be possible in the current environment for the 2021 budget.
4. Inclusion and Equity – Agencies are committed to becoming more diverse to better represent and meet the diverse needs of the consumer population. Partnering with Dane County to build capacity is a priority.
5. Human Services Reserve
   - POS is interested in partnering to explore the use of these funds. If these are one-time funds, how can they best be used to support the human services system?
6. Living Wage – POS is supportive of the Living Wage. Over 1500 support staff were positively impacted by the Living Wage until full Family Care integration occurred. It has less of an impact on other POS agencies since hourly rates for most staff are above the Living Wage.
7. Medicaid – this includes reimbursement models and rates as well as CCS.

8. Continued leadership initiating coordination/collaboration among funding entities on a unified comprehensive community vision of responsibility & to increase efficiencies in administrative reporting & data requirements (i.e. Dane County, City and United Way).
9. Creative and innovation funding sources - Exploring how foundations, health systems, corporations and others play a part in the human services funding model.
10. Dane County further explore more efficient contracting and compensation models
11. Human Service Board partnership