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**PUBLIC TRANSIT – HUMAN SERVICES
TRANSPORTATION COORDINATION PLAN FOR
GREENE, MIAMI, MONTGOMERY, AND
PORTIONS OF NORTHERN WARREN COUNTY,
OHIO**

BEST PRACTICES IN COORDINATION

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BEST PRACTICES IN COORDINATION

This memorandum describes and defines coordination transportation strategies. Efforts to coordinate transportation services in a variety of regions similar to the Miami Valley region (Greene County, Miami County, Montgomery County and the Cities of Springboro, Carlisle and Franklin in Warren County) are described. Local best practices in coordination are also noted.

COORDINATION: WHAT IS IT?

Coordination is a **technique for better resource management**, in which improved organization strategies are applied to achieve greater cost-effectiveness in service delivery. **Coordination is about shared power**, which means **shared responsibility**, **shared management**, and **shared funding** among the agencies involved in the coordinated efforts. Coordination also involves sharing the **benefits** of its application among the coordination partners.

Coordination of transportation services is best seen as “**a process** in which two or more organizations (that may not have worked together previously) interact to jointly accomplish their transportation objectives. Coordination is like many other political processes in that it involves power and control over resources, and coordination can be subject to the usual kinds of political problems and pressures, such as competing personalities and changing environments” (Burkhardt et al., 2004). Coordination of transportation services usually involves forging partnerships among agencies that typically did not previously work together in delivering transportation services. Such agencies often include various human service transportation providers and public transit authorities.

Coordination can improve transportation services by eliminating duplicative efforts and improving the efficiency of transportation operations. Coordinating transportation means doing better (obtaining more results, such as trips) with existing resources. It requires that professionals from various human service and public agencies work together with persons from different agencies and backgrounds.

When transportation resources are coordinated in a community, it is usually done with the expectation of positive outcomes. By working for greater efficiency in the use of transportation resources, coordination can **lower the costs of providing services**. Most communities apply these cost savings to increase the numbers of trips served, thus **increasing overall service effectiveness**. The combination of increased efficiency and increased effectiveness can create great improvements in unit costs, such as costs per trip, per mile, or per hour. The range of benefits commonly observed from coordinated transportation services includes the following:

- Lowered trip costs for travelers and for human service agencies;
- Extended service hours;

- Services now provided to new areas or new communities and to more people;
- More trips made by persons needing transportation;
- Services more responsive to customers' schedules, points of origin, and destinations;
- Greater emphasis on safety and customer service;
- More door-to-door service; and
- More flexible payment and service options.

There are three kinds of outcomes that can be expected from coordinated transportation services: First, coordination changes **institutional structures** (numbers of providers, funding sources used, etc.) **and services** (service types, hours per day, areas covered, etc.). Next, these structural outputs are reflected in the **performance measures** typically used to assess transportation services (efficiency, effectiveness, and cost-effectiveness). Finally, these changes lead to **beneficial outcomes** such as increased consumer satisfaction, and greater community mobility and its associated benefits, such as increased health and well-being, more economic activity, and decreased institutionalization.

The coordination process has a well-defined sequence of implementation activities or stages, similar to those applied in marketing, operations research, and other disciplines. Several of these stages may be in process at the same time. These implementation steps (Burkhardt, Nelson, et al., 2004) are listed below:

- **Step 1 – Initiate the Improvement Process.** Form a task force or steering committee and decide to move forward.
- **Step 2 – Analyze Existing Conditions.** Understand issues, needs, and circumstances, and define local conditions.
- **Step 3 – Establish Focus, Consensus, and Direction.** Agree on the problem, develop a consensus, and set a direction.
- **Step 4 – Design Alternative Courses of Action.** Develop alternative coordination strategies.
- **Step 5 – Assess Alternative Options.** Evaluate the alternatives and select the coordination option to implement.
- **Step 6 – Implement the Preferred Choice.** Formulate action plans and implement coordinated transportation services.
- **Step 7 – Evaluate and Improve the System(s) Implemented.** Review and evaluate progress.

All of these steps are geared toward better management of scarce resources, which means reducing duplication and overlaps and increasing efficiency and effectiveness. **Powerful coordination strategies for reducing the inefficiencies** that are often found in uncoordinated transportation operations result in

- reducing the number of drivers and the total driver wages paid,
- reducing the number of vehicles and other capital costs, and
- reducing administrative staff and administrative labor costs.

Powerful coordination strategies for **increasing service effectiveness**, all of which will attract more riders, include

- extending service hours and boundaries,
- offering services that are more responsive to customer needs, and
- offering higher quality and safer services.

PEER REGION COMPARISONS

A peer review is a useful tool for providing insight into how other regions and agencies address transportation coordination. The lessons learned from experiences with transportation coordination in other regions provide valuable information for the Miami Valley area.

To select regions for review, the consultant team relied on a list of regions with which the Miami Valley Regional Planning Commission has compared itself in the past. These regions are in varying stages of conducting their human service transportation coordination efforts; the status of each of their efforts is described below. The regions reviewed, as identified by the principal city, are:

- Birmingham, Alabama
- Cincinnati, Ohio
- Cleveland, Ohio
- Grand Rapids, Michigan
- Hartford, Connecticut
- Kansas City, Kansas
- Louisville, Kentucky
- Pittsburgh, Pennsylvania
- Portland, Oregon
- Rochester, New York.

After evaluating the status of coordination in each of these areas, several key coordination projects were chosen in order to highlight the successes and challenges experienced

in regions where coordination efforts have made significant progress in both planning and implementation.

Focal points of this review included coordinated transportation services between public transit and human service providers, methods for organizing and delivering services, staffing and program administration, marketing and other lessons learned that agency staff were willing to share about their coordination experience.

Overall, agency staff were willing to share qualitative information about their agency's coordination activities, although they were often unable to provide quantitative data to support anecdotal information about ridership growth or cost savings. Information about the history of their programs, the rationale for coordinating services and the factors leading to their success was very instructive. These examples of coordination projects provide valuable lessons for the Miami Valley area in developing a coordinated plan and in identifying pilot projects for implementation.

Birmingham, Alabama

The Regional Planning Commission of Greater Birmingham (RPCGB) and Birmingham Area Metropolitan Planning Organization (BHAMMPO),¹ in conjunction with United Way of Central Alabama, recently completed the regional Human Service Transportation Coordination Plan and submitted it to the Federal government in June of 2007. The Draft of the plan was completed in December of 2006. The plan itself was prompted by the Alabama Department of Transportation and the Alabama Association of Regional Councils, the state organizing agency of regional MPOs. The plan covers the MPO's two-county service area, which includes Jefferson and Shelby Counties.

The current plan has built on past efforts. Earlier recent efforts had stemmed from the United We Ride program, though the present plan was ultimately mandated by SAFETEA-LU. There were also significant efforts in the 1990s that resulted in structural changes. In 1995, a Coordinated Social Service Agency Transportation Study had made recommendations that eventually consolidated services under ClasTran, a group formed by the also newly-created Birmingham Regional Paratransit Consortium and organized by United Way of Central Alabama. Rural and urban services provided by both county governments as well as many services previously provided by social services agencies were amalgamated under the ClasTran umbrella, which has since moved more toward a brokerage structure and away from direct provision of services. ClasTran brokers services in Jefferson, Shelby, Walker and St. Clair Counties.

Although the current plan's relatively recent approval means that significant implementation actions have not yet been taken, representatives involved in the process point to benefits from the planning process itself. First and foremost, more agencies are talking to one

¹ RPCGB provides a full-time staff to the Birmingham Area MPO, which is the transportation planning authority for the region, resulting in a close linkage between the two. RPCGB is the recipient of 5310, 5316 and 5317 funds.

another and communicating as a part of a broader involvement in transportation coordination efforts. Moreover, more agencies were involved at the end of the plan process than were at the beginning, especially programs for the elderly and Medicaid. The Planning Commission also highlights the improved understanding between themselves and human service organizations, which was helpful in identifying the gaps and needs in transportation, particularly in rural areas.

The process also experienced a setback. The regional transit agency, Birmingham Jefferson County Transit Authority, actually withdrew from the coordination process. They found that, after JARC had converted to formula funding, their funding would be decreased from \$1.3 million to just \$300,000, and they would be in competition with human service organizations for these funds. In order to offer an incentive for the transit authority to come back to the table, the Planning Commission has agreed to split the 10% funding allotment for administration costs with the transit authority so that the transit authority can co-administer the process with the Commission. This appears to be going forward as intended.

Cincinnati, Ohio

Cincinnati recently completed its Coordinated Human Service Transportation Plan process in August 2007. The plan was led by the Ohio – Kentucky – Indiana Regional Council of Governments (OKI), the Cincinnati-area MPO. The OKI region covers four counties in Ohio (Butler, Clermont, Hamilton and Warren), three counties in Kentucky (Boone, Campbell and Kenton) and Dearborn County in Indiana. OKI is also the designated JARC and New Freedom recipient. As part of the process, more than 40 providers were interviewed to determine the scope of existing services. The following goals were set for the process:

- Goal 1 - Assess transportation needs for individuals with disabilities, older adults and persons with limited incomes;
- Goal 2 - Inventory available services that identifies areas of redundant service and gaps in service;
- Goal 3 – Create strategies to address the identified gaps in service;
- Goal 4 – Identify coordination actions to eliminate or reduce duplication in services and strategies for more efficient utilization of resources;
- Goal 5 - Prioritize implementation strategies.

Based on these goals, an action plan was determined and carried out, including a series of public workshops used to shape the coordination planning process. OKI will be responsible for coordinating JARC and New Freedom funds based on the Coordinated Plan. The plan also identifies the most important regional gaps in transportation for each of the target populations, with the proviso that applications for JARC and New Freedom funds that address these gaps will receive a higher score than those that do not.

Transit Alliance of Butler County

Although Cincinnati has just recently completed its coordination planning process, there is a strong example in the region of a working coordination brokerage system: the Transit

Alliance of Butler County (TABC). TABC is an initiative spurred by the Butler County Regional Transit Authority (BCRTA) designed to eliminate duplicative efforts in transportation and streamline operations among various human service transportation providers in the county. The BCRTA was a catalyst in organizing transportation coordination beginning in 2002. They were able to bring approximately 60 different human service organizations to the table to form an inter-agency task force to discuss issues in coordination and provision of services to older adults and persons with disabilities. A seven-member steering committee made recommendations to the commissioner of BCRTA. They recommended that BCRTA apply for funding for coordination, and ultimately received \$64,000 to do so. That grant was used to create a centralized call system that was implemented in May of 2006.

Today, the TABC has a nine-member board of partnering providers that have agreed to commit cash or in-kind donations to the operation of the service. The model of operation is social service agency-based, but, unusually, the service is open to the general public, including but not limited to persons with disabilities, older adults, and low income persons. Agencies using the Transit Alliance for brokerage all have operations within Butler County although some may also serve destinations in other counties. Vehicles remain owned and operated by the partnering agency, but other functions are handled centrally, thereby reducing costs and overhead. Participating agencies can set their own prices for the trips they provide.

The TABC service now has a number of responsibilities and functions, made possible by the sponsorship of partnering agencies. These include:

- Centralized information – a one-stop shop for transportation needs and questions.
- Centralized scheduling and dispatch for vehicles.
- Identification of available capacity on vehicles and the nature of each participating service.
- Fare information and management.
- Ride-matching into existing under-capacity services.

TABC applied for non-profit status and was awarded the designation in May of 2007; BCRTA is the fiscal agent for the service. Down the road, TABC hopes to own and operate all of the vehicles in the system – shifting most of the responsibility to the central dispatch.

Challenges and Lessons Learned

The TABC remarks that, despite their great successes (see below), they have experienced some difficulties in initiating their call center. They indicated that there were challenges in organizing the system and coordinating partner agencies. There were some turf issues (services crossing jurisdictional boundaries); conversations needed to be handled delicately on these sensitive topics. Furthermore, the call volume in the six first months of operation was somewhat low, but the agency was able to improve the situation with marketing and advertising. They specifically credited the fact that they asked partnering agencies to take a more active role in referring their clients to the service in improving the call volume. Moreover, in order to increase capacity and expand service, the call center actually merged operations with another organization.

Furthermore, the process is made more difficult because the service is still in the process of determining exactly what the unmet needs are in the area, and determining how best they can be served. None of the agencies in the area who provide transportation have ever documented unmet transportation needs – this is being done “on the fly” as the service center evolves. Now, if the TABC scheduling center is unable to make a trip for a customer, they collect that information and record it.

There are three types of trips that the center still has a great deal of difficulty in providing due to funding constraints. These are employment-related trips (i.e. daily trips to jobs) due to their repeating nature, medical appointments that are not tied to a particular agency, and social/recreation trips. (The inability to serve social / recreational trips is being alleviated to some extent by the addition of a new shopping shuttle service.) Moreover, it is not always affordable to provide rides to some people on the existing network of services available. The TABC is working with the County MRDD Board to remedy this. For example, if the MRDD Board’s shuttles have the capacity to serve an extra trip on a route that is already being run, the TABC service may try to co-schedule (and ask the provider how much they wish to charge) in order to get that extra person back and forth at an affordable price.

Successes

The Transit Alliance related five specific points which it considered to be its best achievements in initializing the service:

- Achieving two key milestones in the development of the ultimate product: achievement of non-profit status; and shifting control of TABC’s finances to BCRTA to streamline accounting.
- Matching and coordinating the services of two shopping shuttles that significantly improved quality and capacity for users (see below).
- Increasing the number of calls they served, ramping up service.
- Overcoming a social environment that was hostile to transit and introduced transit into the minds of the public as a valuable and needed service.
- Increasing the amount of discussion between agencies and inspired them to think critically about 1) serving their clients in the best possible way, and 2) the potential benefits of coordination.

Previously, two shopping shuttles had serviced the area, one operated by BCRTA and one by ARC. The ARC shuttle was over-capacity; often, clients were being told they would have to wait. On the other hand, the BCRTA shuttle had excess capacity. The BCRTA was persuaded to extend the shopping shuttle’s service from 2 days per week to 5 days per week; clients formerly using ARC would have to pay a fee for this service, but were more consistently able to get aboard a shuttle. The results were very positive. The client list grew from 40 users in total to over 300 clients, resulting in a more balanced usage of capacity on both services.

When TABC applied for the initial grant to undertake coordination planning, there were specific performance metrics built into the award. Semi-annual reports must be conducted and a strategic plan must be produced. TABC collects both qualitative and quantitative data for this

process, including input from member organizations and perspectives from a quality assurance standpoint.

Cleveland, Ohio

Overview

Work on Cleveland's human service transportation plan began in the spring of 2007 and is currently underway. Northeast Ohio Areawide Coordinating Agency (NOACA), Cleveland's MPO is the lead agency in the process. NOACA's region includes five counties. NOACA is responsible for the administration of 5316 and 5317 funds for the whole region, and also administers 5310 funds for Cuyahoga, Lake and Lorain Counties. ODOT administers 5310 funds for Geauga and Medina Counties, the more rural areas of the region. NOACA has held public meetings and regional workshops and has conducted stakeholder and public surveys over the course of this past summer. They expect to have the product in draft form by late fall, at which point it will undergo a public comment period and, ultimately, adoption. According to NOACA, when completed, the plan will:

- provide an assessment of available transportation services;
- provide an assessment of transportation needs of older adults, individuals with disabilities and people with low incomes;
- include strategies and activities to address the identified needs of the target populations; and
- prioritize the identified strategies and activities for implementation, based on resources, feasibility and time.

The following example presents a snapshot of a successful coordination program in Cuyahoga County which has resulted in cost savings for the participating agencies.

Senior Transportation Connection of Cuyahoga County

Cuyahoga County, which includes part of the Cleveland metro area in its borders, has engaged in a human service transportation coordination process for a number of years. Planning efforts in the County that took place between 1998 and 2000 first underscored the need to coordinate services to address the needs of older adults. In 2003 and 2004, the Cuyahoga County Planning Commission and the County Department of Senior and Adult Services developed the Cuyahoga County Strategic Plan for Senior Transportation. This action-oriented plan laid out the needs and gaps in service for senior transportation and ultimately led to the creation of a centralized service to coordinate transportation options for seniors. The first iteration of this service was called FIRST; eventually, this was succeeded by the Cuyahoga County Senior Transportation Connection (STC) in 2005.

STC has two main means of creating a coordinated program:

1. Centralized management and operational structures.

2. Integrated scheduling and dispatch using Trapeze software at one call center for all participating local municipal and nonprofit providers.

STC handles calls from seniors seeking transportation; then schedules vehicles to accommodate those rides, which are still owned and operated by the municipalities that participate. (Two human service organizations also participate, but are currently inactive as transportation providers.) The participating organizations pay a fee to the call center based on usage. This system greatly reduces overlap in overhead costs such as telephone scheduling personnel.

From the day that STC began offering services, it was clear that partnering agencies benefited from significant cost savings. Moreover, there was much better communication among the agencies themselves; this result was evident through the planning process. Most of the providers partnered with STC are municipal service providers who give rides only within their own jurisdictional boundaries. STC has had to overcome some “turf war” issues where providers wish to expand their service areas or offer rides that cross boundaries, but home agencies don’t want the competition. In spite of this geographically complex situation, STC has managed to unite providers under one banner and information source.

The STC project is presently at about the 40% mark towards completion. When it has reached the end of its 5-year implementation plan, scheduled for 2010, STC will have switched to a model wherein it owns and operates all the vehicles formerly possessed by the individual agencies and municipalities.

Grand Rapids, Michigan

The Rapid (the Grand Rapids area transit agency) is the lead agency for coordination planning in the Grand Rapids region. The regional MPO, the Grand Valley Metropolitan Council, covers a service area of six counties. GVMC is the designated recipient of 5310 funds. The Rapid, also known as the Interurban Transit Partnership, is the designated recipient of 5316 and 5317 funds. Both entities use a process for prioritizing projects to be funded by these programs that is included in the Transit Improvement Program for the region, and the process for creating this plan is led by GVMC as part of the Long Range Transportation Plan (LRTP) for the region. Therefore, project prioritization is a response to the goals outlined in the LRTP.

Coordination planning efforts are handled by the transit agency. Their coordination efforts began about 3 years ago, but it took a while for the program to get running. Before the human service transportation coordination process started, it was initially found that there were many agencies that provided transportation but that access to these transportation providers was hindered by a lack of a clearinghouse or central source of information. Monthly meetings took place between involved agencies and stakeholders, including transit providers, and eventually a consultant was hired to produce a plan.

Centralized Service Center

In early 2007, The Rapid initiated its centralized program called RideLink. The RideLink collaboration offers a centralized call and scheduling system for participating agencies. Currently, agencies can elect to subscribe all or some of their vehicles to the program. The original intent was to increase capacity and reduce costs for the participating agencies with more service made available by reducing overhead costs of scheduling and dispatch. This was to be accomplished by making a central, single call and dispatch center while each of the participating agencies maintains their own fleets and outreach staff, thereby saving resources on the administrative and telecommunications overhead and making the process simpler for users. The six participating agencies are senior social service agencies located in Kent County, with the local Area Agency on Aging (AAoA of Western Michigan) playing a key stakeholder and organizing role. (There is also a county-wide job access transportation program called County Connection that is funded through JARC.)

The program began with all six participating agencies and grew so quickly that the program had to be slowed down. The service was overwhelmed with calls from all of the senior social service agencies' clients and had to be scaled back to just one agency, which was then increased by one participating agency per month until all six agencies were back on board. In spite of this setback, the service achieved successes from the start: in the one month in January of 2007 that all the services were united by the RideLink program, they handled more calls and rides than all the services had handled individually, even though they had hit their capacity ceiling.

Staff at the Rapid involved with the process noted that there were many behavioral changes necessary from both participating agencies as well as clients. In some cases, agencies provided clients with specialty services such as half-day outings that coupled a doctor's visit with lunch and recreational time. Some clients were accustomed to using the same driver for regular appointments or other trips and had a difficult time accepting that trips might need to occur at different times or with different drivers and would need to be scheduled in a new way.

Lessons Learned

After an eight-month period of growing, RideLink is now active as a central community transportation clearinghouse. On the other hand, the project is still only about 10% of the way along to its full anticipated functionality. When it reaches its full potential, the service hopes to include *all* vehicles from *all* agencies in the area, including every type of agency.

Advice to other agencies looking to promote coordination, particularly in the form of a call center, stems from the experience of having to scale back operations. The number of calls and amount of effort required to initialize the service resulted from unexpected popularity – it was not foreseen that the service would reach clients so quickly. RideLink recommends starting small and building up operations over time – incrementally increasing the number of vehicles handled and the number of clients transitioned to the new service. They suggest a staggered launch in this way might help to ease clients and agencies into the program while offering the central system a chance to adjust its operations slowly. They recommend a long time frame for this process.

Other advice comes from The Rapid's experience with agencies and clients. They encouraged lead agencies to sit down and talk with stakeholders and prospective participants before getting to the point of being forced to take action. One of the major unexpected fears that The Rapid had to overcome among its partner human service organizations was the worry that joining RideLink would result in the organization actually losing rides and that the "big transit agency" would absorb them. RideLink recommends planning early to increase awareness and information among potential participating agencies and to be sensitive to the fears and needs of them and their clientele.

Finally, RideLink also experienced unexpected difficulty when it came to tracking information about each of their partner agencies. The agencies each kept track of records and scheduling in a different way: some used computer printouts, others had online record systems using Excel or other software, while still others used a "Post-It note system" where rides were not so numerous as to preclude hand-written documentation of scheduling.

Hartford, Connecticut

The Capital Region Council of Governments, the Hartford MPO, has recently finished its Locally Coordinated Human Service Transportation Plan and submitted it in July 2007. This is the first such effort for the region. Connecticut is somewhat unusual in that the designated recipient for JARC and New Freedom funding is the State rather than the MPOs. Since the recipient for these funds must demonstrate coordination among services, the HSTP is therefore actually a statewide plan. The model for this process is a tiered system in which five regions have coordinated individually and their products are fused into one planning document by the state. The region that the Capital Region Council of Governments, the Hartford MPO, has planned for also includes two other MPOs: Central Connecticut Regional Planning Association and Mid-State Regional Planning Association. CRCOG works with ConnDOT on programming for Section 5310 and 5317 funds, and with local transit providers and stakeholders by way of the Northcentral Connecticut Jobs Access Taskforce for JARC funds.

The Hartford area has had a very active Jobs Access program and associated Task Force, but all the monies that they receive are directed by the State DOT. There is also a system of town Dial-a-Rides, each of which services its own municipalities, only sometimes crossing jurisdictional boundaries. In Connecticut, the relative power of localities is rather high. There is a great deal of potential for a coordinated system that crosses boundaries and talks will begin this fall about how the town Dial-a-Ride systems might be amalgamated in some ways and efficiencies introduced.

CRCOG was the lead agency in the regional participation process and spearheaded the coordination efforts which included major participation from the transit system, Hartford Connecticut Transit, and the ADA operator, Greater Hartford Transit District. There was a great deal of involvement from human service transportation providers. In order to recruit the widest possible breadth of agencies to participate, CRCOG initiated conversations with every human service organization who had ever applied for 5310 funding. They also contacted the Dial-a-Ride administrators for each town and the Jobs Access Task Force administrators. They then "leapfrogged" communications by asking each of those groups who else might be interested in

getting involved, including other providers and human service organizations of which the organizers were previously unaware.

Now that the process is completed, CRCOG is looking toward an update in one year's time as well as expanded connections with human service transportation providers. CRCOG points to improved understanding on their part as to the function, difficulties, strengths and challenges faced by human service transportation providers in the region as an outcome of their planning process. The State has also received a grant under the Medicaid Infrastructure Grants (MIG) program to conduct a study of the transportation barriers affecting people with disabilities and aging persons. MIG grants are awarded to states to fund programs and projects that increase work opportunities and incentives for persons with disabilities under the Ticket to Work – Work Incentives Improvement Act. However, under the terms of the MIG grant, CRCOG is not required to incorporate the elements of the State Human Services Transportation Coordination Plan into that effort, fueling concerns that the two plans will not be integrated.

Kansas City, Missouri-Kansas

Building on Existing Plans

Kansas City's coordination plan is unique in that it is actually a chapter of the Long-Range Transportation Plan (LRTP) for the city. The lead agency is MARC, the Mid-America Regional Council, Kansas City's MPO that covers nine counties and 120 cities across two states. The plan was submitted around June of 2007 and is awaiting District 6 FTA division approval. Before submission, it was also reviewed by several committees of MARC.

The public participation process in Kansas City has a long history and a substantial momentum. For example, MARC is the managing partner and fiscal agent for an ongoing, highly active community involvement and collaboration forum called OneKCVoice, which is devoted entirely to streamlining the public participation process for all types of projects. In adding the Human Service Transportation Coordination element as part of the city's long-range plan, MARC hoped to capitalize on the existing stakeholder web that had already galvanized for other planning projects.

Coordination Plan

The coordination planning process involved multiple levels of government partnership, as well as a high level of federal participation. The effort was bi-state (Kansas and Missouri) and included 8 counties and 126 municipalities. Moreover, in tapping the existing participant network, the plan used a common set of stakeholders, many of whom had been involved since the early 1970s. These included 5310 applicants, associations of elders, and agencies who serve varying types and levels of disabilities. According to MARC, SAFETEA-LU changed little in the regulatory/participatory environment, but rather made a formula of what once was an earmark. (See below for a description of changes in funding streams.)

The plan's main thrust is to use the competitive selection process to pick projects for Elderly & Disabled, JARC and New Freedom funds that will support the vision and goals of the LRTP. Although there are presently no "project" items on the list, such as a centralized dispatch and scheduling center, or plans to further organize new service organizations, the plan aims to address the *environment* in which the project selections take place. Each year, the 5310 procedure generates a project ranking product that lists recommended items for funding (see below).

Plan leaders at MARC indicated that, although they took advantage of the existing public participation operations and networks for the region, the process still generated new voices at the table. On the other hand, for this to take place there was also a great deal of slowing down so that new people could be brought up to speed – not all stakeholders had the same level of prior participation or information.

JARC Funds

In the Kansas City Region, the allocation of JARC funding dropped drastically when the program changed from earmark to formula, from \$3 million to \$1 million annually. Although MARC states that it was aware that the earmarked nature of the fund meant that the situation could change at any time, it had not anticipated such a drastic reduction in funds. In response, MARC states that they hope that the competitive project selection process will stimulate an infusion of local dollars from those municipalities who can support mobility of their local residents, in keeping with the LRTP.

In summary, Kansas City's unique program elements include:

- The Coordination Plan is included as a chapter of the general Long Range Transportation Plan.
- A competitive selection of projects supports elements of the LRTP.
- There is a lengthy history of active stakeholder inclusion and engagement feeding the process.
- Non-project-specific – the plan does not specific individual projects but rather aims to improve the environment in which decisions are made.
- The competitive selection process attempts to stimulate an infusion of municipality matching dollars to support projects.

Funding Responsibilities

Kansas City's status as a bi-state MPO has resulted in significant impacts on the administration of related funds for the region. Section 5310 funds are administered by state agencies in both states. In Missouri, MoDOT asks MARC to weigh in on 5310 funding decisions, providing an opportunity for local input. 5310 applications are presented by agencies, who are asked to demonstrate the unavailability, inadequacy and/or inappropriateness of existing services and operations to address the needs for which the vehicles are being requested. All applications must be derived from (incorporated with) the Human Service Transportation Coordination Plan. These testimonials are ranked by members of the MARC Special Transportation—Job Access Partnership (STJAP), and the ballots averaged to produce an overall

result. In Kansas, 5310 funds are channeled through the Coordinated Transit Districts by the Kansas State DOT, and therefore MARC's participation in that process is limited to inclusion of locally-awarded 5310 projects in the region's TIP.

JARC funds and New Freedom funds are officially designated to the Kansas City Area Transportation Authority. However, MARC plays a key role in these funding processes as a joint producer of the coordinated plan. For JARC funds, MARC consolidates applicants and selects sub-recipients to receive funding. These funds are also channeled through the STJAP for prioritizing.

Louisville, Kentucky

Evolution of the Coordinated Plan

The Transit Authority of River City (TARC), the regional transit agency, is the lead agency for the coordination planning program in Louisville. In spring of 2005, TARC and Metro United Way initiated a series of workshops aimed at brainstorming ways to improve regional transportation and to begin talking to stakeholders. Human service organizations and other transportation providers were invited to attend. At these meetings, a steering committee of approximately 15 people was formed from a mix of human service organizations and other transportation providers; they continued to meet every month over the course of a year. The committee began unofficial work on a coordinated plan.

In spring of the following year, a "transportation summit" was held where the Regional Mobility Council and other stakeholders were invited to hear presentations from several experts from across the country who had engaged in planning efforts of their own, including representatives of Easter Seals Project ACTION and the ACCESS Program from Pittsburgh. In the fall of 2006, the steering committee became known as the Regional Mobility Council (RMC), and came to act as a stakeholder advisory group for coordination planning purposes. Very quickly, in light of the new requirements of SAFETEA-LU, the RMC put together a somewhat more official coordinated plan in order to satisfy JARC and New Freedom requirements for coordination. This was a draft document that continued to be revised as time went on and is still in draft stage. As of early 2007, TARC is the designated recipient of JARC and New Freedom funds. Currently, there is a subcommittee of the Regional Mobility Council working on devising the competitive selection process for those two federal funding programs. The first draft of these policies was presented in July of 2007 and is currently undergoing revisions. Administration of 5310 funding is conducted by the Louisville Red Cross.

US Department of Transportation ITS Grant

In parallel to this "traditional" coordination planning process, Louisville was also selected by the US DOT as one of eight US cities that received grants to demonstrate how Intelligent Transportation Systems (ITS) may be used to increase coordination and improve transit services for persons with disabilities and older adults. For Louisville, the plan is to design a centralized call center where various types of transportation providers can amalgamate their overhead costs (e.g. dispatch and scheduling). Once those plans are completed (the deadline is

June 2008), between one and three of the cities may receive federal grants to actually implement these plans. Although this is a fully separate program from the main SAFETEA-LU-mandated coordination planning, the design of the call center must capitalize on existing stakeholder connections and consensus-building, and will in turn advance those connections as well. This process will involve a great deal of stakeholder networking and participation-building. Although the process has not yet resulted in many tangible products, people are very interested in the results of the design process.

Advice

TARC indicated that their overall plan process (both the work of the Regional Mobility Council and the design commission grant) resulted in more communication among human service organizations. The transportation summits were a key feature in galvanizing interest in coordination among agencies and focusing the efforts of the RMC.

Pittsburgh, Pennsylvania

Coordinated Planning Process

Pittsburgh's efforts toward human service transportation coordination began in the late 1970s. A major product of these efforts has been the ACCESS transportation brokerage service, described in detail below. The Pittsburgh area has also engaged in a more recent transportation coordination process spearheaded by a committee called the Access to Work Interagency Cooperative (ATWIC). ATWIC is overseen by representatives of Southwestern Pennsylvania Commission, Port Authority of Allegheny County and the Three Rivers Workforce Investment Board. A JARC grant that has been used to support the operations of ATWIC for three years total will expire in 2008 and it is likely that the group will be incorporated into one of the three oversight organizations at that time in order to continue its work.

Originally created in 1997, ATWIC originally grew out of an initiative of the Pittsburgh Foundation in response to welfare reform legislation. Stakeholders drawn together by the Pittsburgh Foundation quickly noted that a key challenge to unemployed and underemployed persons was transportation. ATWIC's service area is the same as that of Pittsburgh's MPO, the Southwestern Pennsylvania Commission (SPC), covering a service area of ten counties including Allegheny, the location of the City of Pittsburgh. ATWIC's role has been to bring together the various services available throughout the 10-county area to one table to discuss ways that movement throughout the region can be made easier. An Executive Committee of private and public stakeholders meets monthly to bridge the gaps of a transportation network that must serve one highly urban central county and nine predominantly rural ring counties efficiently and effectively.

ATWIC is responsible for regional transportation coordination as well as oversight of 5310, 5316 and 5317 funding for the region. (Port Authority of Allegheny County is the designated recipient of 5316 (JARC) funds and is the fiscal agent but ATWIC handles programming and functional aspects.) ATWIC has already produced a document entitled

“SWPA JARC Regional Transportation Plan” that details their efforts to coordinate services regionally. Multiple county- and regional-level stakeholders are represented for each of the ten counties and discussions include both paratransit and fixed-route service topics. This document is therefore a reflection of an ongoing coordination process facilitated by ATWIC rather than a one-time effort.

Project selection is a fairly open process and ATWIC has funded twelve projects consistently for several years, nine of which provide direct transportation services and three of which supplement transportation-related needs (such as workforce development and travel training). Projects must be derived from the needs of the locally coordinated plan. In addition to conducting coordination planning and project funding, ATWIC’s work has resulted in a number of tangible benefits. For example, as a result of meetings organized by ATWIC, three county and regional services agreed to accept transfers from each other in order to facilitate cross-county travel. One major recent challenge that will likely continue in ATWIC’s work in the future is a significant funding crisis that has affected Pennsylvania, resulting in unsteady funding streams for local match dollars, particularly affecting JARC programs.

Although the task force was originally geared toward jobs access transportation, the plan covers coordination of many transportation services, including human service paratransit. Coordination activities among and between all participating services in the region, as well as the coordination of projects to be supported through the aforementioned funds, is described in this document. ATWIC will likely expand its scope and attempt to include planning for New Freedom funds in its scope of responsibilities and to increase the broadness of planning. ATWIC is also in the process of completing its Human Service Transportation Coordination Plan in fulfillment of the region’s SAFETEA-LU obligation. The plan will be finalized around the end of 2007, and will include reference to the New Freedom funds.

ACCESS Overview

ACCESS is a decentralized brokerage that has provided coordinated, shared-ride, door-to-door paratransit service in Pittsburgh and the rest of Allegheny County since 1979. The service was originally started under an UMTA Service and Methods Demonstration Grant covering 1978-1982 as an attempt to show how legal obligations to provide specialized transportation services can be fulfilled by contracting and coordination between existing human service transportation providers and purchasers. The Port Authority of Allegheny County (PAT) contracts with Access Transportation Systems, operated by a subsidiary of Veolia Transportation, as a broker.

ACCESS links customers of over 125 subscribed human service agencies with its contracted providers (seven for-profit and three non-profit) by providing centralized customer service, reservations, scheduling, dispatch and eligibility screening. In 1982, the Port Authority assumed complete financial responsibility for ACCESS, and the service continues to meet local obligations to provide service to persons with disabilities, elderly persons and Medicaid customers under the Americans with Disabilities Act and other legislation. Overall, the service provides approximately 1.8 million ADA, senior and agency rides per year on 457 vehicles.

The ten carriers operate out of thirteen separate facilities and serve customers within Allegheny County to destinations up to 1.5 miles outside the county border. Trips are organized within the framework of a system of 198 equally-sized zones across the service area. All customers are assigned to carriers according to their zone and all trips are co-mingled. Fares are paid for by the customers using scrip (vouchers for travel) purchased directly from ACCESS. Although scrip may be purchased by the general public regardless of eligibility, this is rarely done as the cost of the scrip varies depending on status. These fares can then be used with any of the services, enhancing the seamlessness of the operation. In addition to eligibility/status, fares are also dependent on the number of zones traveled; as the customer boards, the driver will tear off the appropriate number of tickets for the trip. Customers must call in with one day advance notice.

Benefits of ACCESS

As a result of its long history of efforts to improve and maximize ride-sharing opportunities as well as to share administrative costs among providers (taking advantage of economies of scale), ACCESS has achieved substantial efficiency in service provision at a low cost. The service has built strong local support arrangement that takes advantage of the efficiencies of the private sector while maintaining high standards of service quality. These standards are tracked annually, and performance measures include:

- On-time performance
- Complaints per 100,000 trips
- Vehicle condition
- Responsiveness
- Target revenue passengers per billable hour per provider.

Overall cost savings from the brokerage operation (as opposed to the continuation of pre-coordination operations) are estimated at as much as 46%.

Portland, Oregon

Coordinated Plans

Over the past eight years, Portland's Tri-Met (the major operator of transit services in the area) has produced a series of coordination plans for Elderly and Disabled Transportation, Human Service Transportation and Employment Access. The most recent Coordinated Plan, produced in December of 2006, united the contents of the Tri-County Elderly and Disabled Transportation Plan and Employment Transportation Services Plan and developed a very specific implementation action plan for short- and long-term projects to improve specialized transportation and coordination among the region's providers.

The new Coordinated Plan essentially fuses the contents of the two other plans into a new plan that both meets the coordination requirements of the JARC and New Freedom programs and

remains true to the contents of the component plans. Human service transportation coordination in the Portland metropolitan area is particularly cohesive due to several factors:

- The process of producing formal coordinated plans has been ongoing since 2000.
- Leadership in coordination has been present in a formal way since at least 1988 with the initiation of the Ride Connection service.
- The level of interaction between agencies, stakeholders and transit operators has been very high; agencies have been proactive in fostering discussion.

Tri-Met receives input on plans, policies and programs from a Committee on Accessible Transportation (CAT), of which at least 51% of members are persons with disabilities or elders.

ADA Complementary Paratransit

Portland's Tri-Met service is the transit authority for the three-county urban region, offering fixed-route transportation including light rail and bus. They also operate LIFT, the ADA complementary service for their fixed-route transit. LIFT provides door-to-door services, as well as exceeding mandated service hours, thereby exceeding the minimum requirements for ADA.

Tri-Met owns the vehicles used for the service, but contracts out the operation of the vehicles through three separate agreements with private contractors, including MV Transportation and Laidlaw, who are reimbursed on a service hour basis. Tri-Met handles user eligibility verification as well as reservation handling and scheduling using computer software that assigns trips to various manifests. Tri-Met's LIFT budget for FY 2006-07 totals \$24.6 million, and the average cost per trip is about \$22 per trip (which does not include capital costs). Total ridership has reached approximately 1.2 million rides per year.

Ride Connection

Ride Connection is the Portland area's human service transportation brokerage. The service began in 1988 as an effort to unite transportation options available to persons with disabilities and older adults. It coordinates over 30 human service and volunteer transportation providers in the metropolitan area with the goal of delivering services effectively to users and in a cost-efficient manner to providers. The service has become an integral part of the provision of services in the Portland area. Elderly and ADA rides are frequently co-mingled on these services.

Ride Connection is responsible for a wide range of coordination and other duties for the agencies serving persons with disabilities and older adults. Ride Connection eliminates much of the overhead cost of running separate services by offering centralized call-handling and scheduling of rides. Ride Connection has a role in identifying needs in the community and enhancing awareness of these needs in the community, as well as leading the community of providers and assisting in their operations where needed. More recently, Ride Connection has increased the number of direct services it provides, including RideWise Travel Training for new riders.

Medical Transportation

Tri-Met also operates a Medical Transportation Program that includes Medicaid trips. Tri-Met is the broker for Medicaid trips on behalf of the State of Oregon. For this service, Tri-Met contracts with about 55 separate vendors, including private non-profit agencies, private for-profit agencies, taxi companies, and others. Vendors submit invoices electronically to Tri-Met and are reimbursed on a weekly basis. In turn, Tri-Met contracts directly with the State Department of Health and Human Services to provide medically-related trips to Medicaid-eligible persons. (The SDHHS provides eligibility certification and permits Tri-Met to access its eligibility database.) Tri-Met then schedules the ride and arranges the trip. Approximately 50,000-55,000 trips are provided each month; about 30% of these are taken on fixed-route transit via bus passes provided. The service area for Medicaid trips is larger than for ADA trips, and there are 50 – 60 transportation providers under contract in the 3-county area for Medicaid service. Paratransit Medicaid trips are rarely co-mingled with trips made on the Ride Connection service by older adults and persons with disabilities.

Other Social Service Agency Transportation

In addition to the LIFT program and the Medicaid brokerage, Tri-Met also provides, under contract, client-specific trips for developmentally disabled persons through the County's Department of Aging and Disability Services. Ridership for this service is about 166,000 annually.

Rochester, New York

Coordinated Plan

Rochester's plan process is currently underway; the plan is essentially complete and the draft document is under review. The Genesee Transportation Council (GTC), Rochester's MPO, covers a four-county area in the Rochester region for many transportation planning functions.

The human service transportation coordination plan is primarily the responsibility of the Rochester Genesee Regional Transit Authority (RGRTA), the major regional transit operator, which works closely with GTC. Working with a private consultant, RGRTA identified agencies and providers, both private and public, as well as workforce development groups, to participate in a steering committee which totaled 23 members.

The committee met monthly on a public basis to inventory existing transit options and to identify gaps in current service, including areas with a lack of service or no service at all. The major strategies contained within the new plan are the following:

1. Address gaps in transit in the suburbs.
2. Expand weekend and evening service in suburban and rural areas.
3. Improve communications between public transit providers and customers.
4. Improve access to information about private providers of transportation.

5. Facilitate public transit connections across jurisdictional boundaries.
6. Continue support for specialized transportation services and volunteer services where public transit is not available or appropriate.
7. Facilitate coordination and cooperation among public transit and human service transportation providers with a goal of reducing cost and making operations more efficient.

Partly in response to the strategies enumerated above, the RGRTA has elected to expand its ADA paratransit service area. The current service connects passengers from origins to destinations within $\frac{3}{4}$ mile of existing fixed-route transit lines. That service radius will be expanded to a $2\frac{3}{4}$ mile radius, effectively increasing the service area by 58%.

This is the first effort to create a coordinated plan in Rochester. Previously, RGRTA had received JARC money but there had been no coordination of services. RGRTA had, however, worked with the City of Rochester and the Monroe County Department of Social Services to deliver services. RGRTA continues to receive JARC funds while GTC receives 5310 and 5317 funds.

When the plan is implemented, the progress and benefits will be measured using a number of metrics, including:

- JARC-funded projects
 - Cost per ride
 - Number of employment opportunities accessed
 - Number of persons who benefit.
- New Freedom-funded projects
 - Number of people using the service to origins and destinations after the 2-mile radius increase
 - The number of certified eligible users.

Rochester Genesee RTA advises that the 23-member steering committee was too large and that a smaller number of participating groups would have been preferable. They indicated that although the plan is still in revision, the area has experienced a greater interest in coordination and a greater awareness of the benefits of coordination among agencies and individuals.

Southeastern Michigan

The **Suburban Mobility Authority for Regional Transportation (SMART)** is the suburban transit operator for three counties in southeast Michigan, covering a service area of 1,200 square miles. (Service within the city of Detroit is provided by a separate system funded and operated by the city's Department of Transportation.)

SMART operates 419 vehicles in fixed route and paratransit service, taking people to and from Detroit to Wayne, Oakland, and Macomb counties. In addition, SMART's Community

Partnership Program helps fund coordinated transportation services operated by 50 local communities with an additional 137 vehicles, which primarily serve people who are elderly or disabled. SMART coordinates with the communities by giving them local property taxes earmarked for transit and a percentage of the federal dollars SMART receives. Its three ombudsmen develop unique plans with each community. SMART's paratransit vehicles and the vehicles operated by the Community Partnership Program make about the same number of trips per day — 2,000 daily trips in each system. Therefore, the Community Partnership Program has allowed SMART to double the mobility of riders in its three-county service area. SMART now uses more than 600 buses and provides 11 million rides per year, an all-time high, and is setting records in every sector of their business. The system has also become a model for other transit systems looking to make big changes.

Through SMART's Community Partnership Program, SMART decentralized that which could be provided most effectively by the communities and centralized what SMART could do best. This helped improve service at the local level without spending more money. In 2002, the cost of the Community Partnership Program was \$7 million. Without this program, the services operated by SMART would have cost an additional \$2.7 million, for a total cost of \$9.7 million. Figures for later years are not available at this time but are expected to show even greater savings.

LOCAL EXAMPLES OF COORDINATION PRACTICES

Introduction

The Project Team has completed an assessment of current transportation providers and purchasers in the MVRPC region. One purpose of this assessment was to identify local examples of coordination best practices in the region, particularly those that could be built upon and replicated. This information was derived from interviews with the participating agencies and documentation that they have provided.

Greene County

The major transportation provider in Greene County is the Greene County Transit Board, known as Greene CATS. They provide countywide service to the general public and clients of human service agencies using a combination of demand responsive and flex route services. Greene CATS also provides trips that go beyond county borders.

One of the most important findings regarding Greene CATS is that they are the sole provider for two of the three major transportation purchasers in the county – the Board of Mental Retardation/Developmental Disabilities (MRDD) and the Department of Job and Family Services (DJFS). The other major purchaser – Greene County Council on Aging (COA) – has a contract with Greene CATS, but they have not used the service recently since they have other options including senior center transportation which they support through grants. The COA and they also has contracts with two private providers (Easy Transport and People's Ambulette).

Greene CATS also provides transportation services for a major regional transportation purchaser – the Bureau of Vocational Rehabilitation (BVR) which has a regional office in Xenia. The BVR Xenia Office is responsible for services provided in Clinton, Darke, Greene and Miami counties. They have indicated that they would be interested in purchasing more service from Greene CATS, but they are under the impression that Greene CATS is at the limit in providing service.

Greene County provides a good example of local coordination between public transit and human service agency transportation. This is due in large part to the origins of Greene CATS as a coordinated brokerage operation serving human service agency clients. Under the current operation where Greene CATS provides transportation for the general public, they also continue to provide all of the transportation services for two of the three major transportation purchasers in the county – MRDD and DJFS – and with one major regional transportation purchaser – BVR. The annual revenue from all of Greene CATS contracts with human service agencies amounts to approximately 75% of their operating costs, demonstrating the importance and extent of service provided to human service agency clients.

The transportation fees and trip rates between Greene CATS and both MRDD and DJFS shows that Greene CATS are based on fully allocated costs of providing the service and historical data on ridership, vehicle miles, and vehicle hours. Both contracts have provisions for adjustments in billing rates based on actual experience regarding the demand for services. There is also a fuel cost adjustment, providing for a 0.5% increase in trip rates and fees for any month for every 10% increase in the cost of fuel above the average for June 2007. Otherwise the trip rates and fees remain the same.

Through these contracts, Greene CATS has been able to develop a fair and equitable arrangement for providing transportation to the major purchasers and their human service agency clients. This expertise and experience will be beneficial to other transportation providers interested in originating or expanding their service to meet the needs of local human service agencies.

In addition to Greene CATS, the Area Agency on Aging, a regional transportation purchaser, has a contract with the Xenia Adult Recreation and Service Center (a relatively large transportation provider operating 10 vehicles) to provide medical transportation for seniors.

No other examples of local coordination have been identified in Greene County.

Miami County

One of two major transportation providers in the county is the Miami County Transit System (MCT). They provide demand responsive countywide service to the general public and clients of human service agencies. Under certain conditions, MCT will also provide service beyond county borders. MCT operates a fleet of 14 vehicles providing an estimated 50,000 trips annually, based on the first six months of 2007.

As in Greene County, MCT is the provider for the only transportation purchaser in the county – DJFS. The contracts between MCT and DJFS provide for Medicaid (non-emergency medical transportation) trips, work and training related trips, and Title XX services for low income clients.

The other major transportation provider in Miami County is Riverside MRDD which operates 11 vehicles and provides an estimated 66,000 trips annually using paid drivers. The primary purpose of this transportation service is to bring adult clients to and from their workshops.

To a certain extent, the Miami County coordination effort is a more limited version of the Greene County coordination program, in that MCT has only been able to work out a contract with DJFS, because MRDD is operating its own transportation program. The various contracts between MCT and DJFS demonstrate that MCT has based their trip rates on fully allocated costs of providing the service. MCT has been in discussions with other agencies in the county (e.g., Veterans Services) regarding the possibility of becoming their transportation provider.

The experience of MCT in the development of its coordination effort is also likely to be of interest to other transportation providers interested in originating or expanding their service to meet the needs of local human service agencies.

No other examples of local coordination have been identified in Miami County.

Montgomery County

The situation in Montgomery County is different from those in Greene and Miami counties where the transit agency is under contract to provide transportation for the clients of various human service agencies. The transit agency in Montgomery County -- the Greater Dayton Regional Transportation Authority (GDRTA) -- does provide transportation for many agency clients when those clients are able to use GDRTA fixed route services, or when they are eligible to use GDRTA ADA Paratransit services (Project Mobility). While there is no county-wide coordination similar to that provided in Greene and Miami counties, there are a number of interesting examples of coordination efforts taking place at the sub-county level.

The Senior Transportation Expansion Project (STEP)

The largest of these coordination efforts is the Senior Transportation Expansion Project (STEP) which assists existing senior transportation projects to expand their services and helps to initiate new transportation programs. The funding for STEP comes from the county Human Services Levy. The MVRPC has taken a leadership role in STEP and has hired a Senior Transportation Coordinator to help implement the program. STEP can offer participating transportation providers the following:

- Ride reimbursement – as an incentive to increase ridership, STEP will provide a subsidy of \$11.00 for every additional one-way ride compared to the same month in the previous year.

- Volunteer recruiter – STEP will reimburse a recruiter at \$12 per hour for up to ten hours a week to find volunteer drivers.
- Additional financial assistance – this funding is made available from GDRTA for specific expenses that will assist in coordination, and is approved at the discretion of MVRPC.
- The STEP coordinator has begun receiving requests regarding individuals in need of transportation and in turn refers those to local transportation providers.

There are a number of agencies that are full participants in the program and others that participate at differing levels.

The City of Kettering's Lathrem Senior Center

One key agency that has been a full participant in STEP is the City of Kettering's Lathrem Senior Center. They have been at the forefront of collaborative efforts, including the hosting of meetings with other non-participating senior centers to discuss the benefits of expanded Senior Transportation and the hosting of training programs for their volunteer drivers as well as those from other participating agencies.

The STEP program has allowed the Kettering Center to expand their service area, thus providing more destination options for their seniors. They charge a nominal distance-based fee for the longer distance trips. This is an example of a coordination effort that addresses one of the key transportation needs of the focus population involving the need to travel to destinations beyond the most local jurisdictions.

Kettering has also taken a lead role on two other initiatives that will enhance coordination efforts in the region. The first of these involves a joint effort with Project Mobility. Under the proposed arrangement, Kettering would transport Project Mobility riders who are traveling within the Center's service area, thereby reducing the passenger loading on Project Mobility. Kettering will charge one-half of their regular fare to the passenger, with the other half reimbursed by GDRTA. This cost will represent a large savings to the GDRTA compared to the cost of transporting the passenger on Project Mobility, and Kettering will benefit through the increased trip volume which should reduce their overall cost per trip. If this experimental arrangement works, it could be replicated with other transportation providers in Montgomery County.

Kettering's second initiative was the result of their effort to provide services to seniors living in the City of Moraine, which has no transportation program for older adults. Under the proposed arrangement, Kettering would provide administration, reservation and routing services for a several days per week transportation program in Moraine. Moraine will provide a city car and driver for individual trips, while Kettering will provide a bus and driver for Moraine group grocery shopping trips and for those individual trips requiring an accessible vehicle. Moraine will reimburse Kettering for the cost of the services provided.

The initiation of this program was hampered by questions of liability involving Kettering's operation of vehicles in the City of Moraine. Representatives of the City of Kettering were able to bring this issue to the attention of the state legislature. As a result, an amendment to the applicable statute was enacted in the summer of 2007 which will provide a city, township, etc. with all the defenses and immunities that political subdivisions currently possess, even though that subdivision is performing governmental and/or proprietary functions on behalf of another political subdivision. This amendment will facilitate the initiation of the Moraine service and will serve as an example for other coordination efforts involving cities/townships throughout the region and the state.

The Wesley Community Center

In addition to the Kettering Center, there is one other transportation provider agency that can serve as an example of a local coordination effort in Montgomery County – the Wesley Community Center. The Wesley Center is a participant in the STEP program, but they cannot be reimbursed for rides associated with expansion because they are receiving other county funds for their transportation program. The Wesley Center has done an excellent job of obtaining contracts to provide transportation for a wide variety of human service agencies as evidenced by the following:

- Area Agency on Aging – Wesley Center is under contract to provide all Nutrition Transportation in Montgomery County for clients requesting transport service to congregate meal sites. Wesley also provides Medical Transportation to PASSPORT clients who have been authorized and scheduled by AAA case managers. (PASSPORT is Ohio's Home- and Community-Based Services (HCBS) waiver program for older people "in their efforts to remain at home for as long as is reasonably possible and to be fiscally responsible to Ohio taxpayers.")
- Montgomery County Job and Family Services – Wesley provides non-emergency medical transportation (NEMT) for Medicaid clients as authorized and scheduled by MCJFS.
- Montgomery County Human Services Levy – funds are used by Wesley to transport frail elderly seniors who make Personal Assistance Transportation requests that come directly into the Center office.
- United Way of Dayton – grant funds are used to supplement the Personal Assistance Transportation requests that come in directly from frail elderly seniors.
- STEP – Wesley will accept referrals from STEP to provide rides for eligible seniors in parts of Montgomery County that are not currently served by other providers participating in the STEP program.

In addition to these programs, Wesley has established a vehicle sharing program known as Community Share Transportation. Under this program, Wesley vehicles are made available for usage by other profit and non-profit organizations. Wesley requires an official agreement between both parties specifying conditions of use and terms of reimbursement. Vehicles are

generally available after 3:00 pm on weekdays and on weekends. Vehicle drivers must meet all Wesley driver qualification and training requirements.

SUMMARY

This report has examined coordinated transportation services around the United States that operate in communities considered as peers to the Miami Valley region. Key coordination projects were chosen in order to highlight the successes and challenges experienced in regions where coordination efforts have made significant progress in both planning and implementation.

The coordination and partnership arrangements that typify best practices in coordinated transportation services have focused on functions that will be important in the Miami Valley region, including

- Centralized information – a one-stop shop for transportation needs and questions.
- Centralized scheduling and dispatch for vehicles.
- Identification of available capacity on vehicles and the nature of each participating service.
- Fare information and management.
- Ride-matching into existing under-capacity services.
- Coordinating with other long-range transportation planning efforts.
- Providing a framework for competitively selecting projects for Federal and state funding programs that support the coordination effort.

The kinds of achievements that coordination has demonstrated in these other communities include

- Increasing the number of trips they serve.
- Increasing the extent and the quality of service.
- Encouraging more communication among human service agencies and transportation providers; this should eventually lead to a high level of interaction.
- Overcoming a social environment that was hostile to transit and introduced transit into the minds of the public as a valuable and needed service.
- Increasing the amount of discussion between agencies and inspired them to think critically about 1) serving their clients in the best possible way, and 2) the potential benefits of coordination.

The kinds of cautionary advice offered by some of these other communities included

- Starting small and building up operations over a substantial period of time – incrementally increasing the number of vehicles handled and the number of clients transitioned to the new service. A staggered launch could help ease clients and agencies into the program while offering the central system a chance to adjust its operations slowly.

- Encourage lead agencies to sit down and talk with stakeholders and prospective participants before taking action. Other communities have noted the fear that in joining the coordination process, smaller agencies would lose rides and that the “big transit agency” would absorb them.
- Understand that various agencies each kept track of records and scheduling in their own ways: some may use computer printouts, others may have online record systems, and others may still be using pencil and paper techniques.

There are several current examples of coordination within the Miami Valley region that can be used as a foundation for further efforts. In Greene County, Greene CATS operates as a consolidated transportation service that provides trips under contract to two of the three major transportation purchasers in the county. In Miami County, Miami County Transit provides trips for the Department of Jobs and Family Services, the major transportation purchaser in the county. In Montgomery County, the Senior Transportation Expansion Project, the City of Kettering’s Lathrem Senior Center, and the Wesley Community Center all offer transportation with various coordination attributes. Miami Valley decision-makers should build on this foundation to emulate the coordinated transportation successes found in other communities.