

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

COORDINATED TRANSPORTATION ACTION  
PLAN UPDATE

February 2, 2012

prepared by the

Miami Valley Regional Planning Commission

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## EXECUTIVE SUMMARY

The purpose of transit and human service transportation is to get people where they need to go as conveniently and efficiently as possible. This is especially true for people who are transportation disadvantaged; the elderly, people with disabilities and people who can't afford to keep a reliable car on the road. Our Region is getting older and incomes for many have stagnated or fallen. The number of people with disabilities is increasing, and the lifespans of people with disabilities is getting longer. A greater percentage of our population will need transportation assistance in the coming years. At the same time, public resources are shrinking and many agency budgets are tightening.

*A Vision for Transportation Coordination for the Miami Valley: The purpose of coordination efforts should be to create a transparent and customer-friendly regional transportation system made up of a variety of transportation operators, funders and providers that matches a particular trip need with the lowest-cost, most appropriate transportation option.*

Lowest cost means both the cost for the individual and the cost for the larger community and particular funding agencies. Most appropriate service should be based on a wide-variety of factors, including convenience, directness of travel, availability, special accommodations and sensitivity and expertise in addressing special needs. Often, the most appropriate option will be a transit vehicle. Sometimes it will be a senior center or other human service agency van. It could be a private ambulette or taxi service. It could also mean a screened and trained volunteer using his or her own vehicle, or a neighbor, family-member or friend simply offering a ride.

The job of those involved in transportation coordination is to look beyond the service they operate to help the Region's residents get where they need to go. We can accomplish this by becoming increasingly familiar with each other's services, using knowledge and technology to locate transportation options and referring clients to the service that best meets their needs for a given trip.

We must also work to make sure that the assets we have in terms of vehicles, drivers, scheduling, dispatch and maintenance are well-utilized. Vehicles can and should carry clients of multiple agencies. Contracting should be explored as a possible alternative to each agency acquiring and operating a fleet of vehicles. Coordination of training, maintenance, storage, dispatching and a host of other issues should be actively pursued. New and innovative services should be explored and when appropriate, added to the Regional mix.

This effort will be ongoing. The system won't ever be perfect and the needs will continue to evolve. But as a Region, we need to keep our focus on the purpose: getting the people where they need to go as cost-effectively and in the most appropriate manner as possible.

This Public Transit-Human Services Transportation Coordination Plan, originally adopted in 2008, provided recommendations for improving transportation options for the elderly, people with disabilities and people of low income in Greene, Miami, Montgomery, and portions of Northern Warren County, Ohio. The plan was updated in 2012 in conjunction with the update of the MVRPC Long-Range Transportation Plan.

The major purposes of this update are to continue to ensure compliance with Federal funding regulations which require that a local coordination plan be developed and periodically updated in order to qualify for the Section 5310 Specialized Transportation Program for the Elderly and People with Disabilities, the Section 5316 Job Access and Reverse Commute program and the Section 5317 New Freedom program. The second and more important goal is to improve transportation options in the study area for low-income persons, the elderly, persons with disabilities, and others. The original plan addressed three major issues:

1. How can the effectiveness of existing resources be improved?
2. What kinds of additional resources can be applied to current transportation needs?
3. What steps are necessary to meet the travel demands of the future?

This update is addresses five major topics :

1. Purpose of the Update
2. Status of Mobility Needs and Coordination Efforts
3. Miami Valley Transportation Services
4. Significant Transportation Issues and Efforts to Address Those Issues
5. Focusing Limited Resources to Meet the Most Pressing Challenges

Coordination offers a powerful approach toward better management of scarce resources, which means reducing duplication and overlaps and increasing efficiency and effectiveness. Key coordination strategies reduce the inefficiencies that are inherent in uncoordinated transportation operations that typically result in unmet travel demands and some duplication of efforts. Coordination is also a powerful strategy for increasing service effectiveness, which means attracting more riders by actions such as extending service hours and boundaries, offering services that are more responsive to customer needs, and offering higher quality and safer services. In the first three years of the Plan, the most progress has been made in expanding service or adding new service, and in coordinating non-operating activities such as training and screening of drivers.

Current coordination efforts in the region that offer promising opportunities for further coordination include the Senior Transportation Expansion Program in Montgomery County which is funded by the Montgomery County Human Services Levy, public funding for GDRTA, activities of Miami Valley Regional Planning Commission, which offers staff, facilitation, and training resources, passenger transfers at Greater Dayton Regional Transit Authority hubs with other transportation providers, and transportation purchase of service agreements involving Greene CATS, GDRTA, Project Mobility, and various human service agencies. These activities do form a solid foundation for future

coordination efforts, but they are not sufficient by themselves to produce the level of coordination needed for transportation services in the region.

Since adoption of the original plan in 2008, county coordination councils have been formed in Greene, Miami and Montgomery Counties. Mobility Managers have been hired in Greene and Montgomery Counties. Cross-county service has been increased and some new service has been added. An online Provider Directory was created as part of the original plan and is being used by the United Way, the Area Agency on Aging and other human services agencies as their primary source for making transportation referrals. This Directory is currently a static pdf document, but a New Freedom grant has been awarded to convert the Directory into a searchable website.

Much more needs to be accomplished. Transportation demands in these counties are still not met in a comprehensive fashion across the region. This lack of a region-wide coordinated approach still results in service gaps, service overlaps, and a lower than possible level of cost-effectiveness in transportation services. Continued demographic and settlement patterns are likely to exacerbate these problems in the future. Development patterns in the Region between 2000 and 2010 showed a continued move outward away from communities served by fixed-route transit.

As of January of 2012, it is apparent that there is still much more work to do. Progress has been made by improving transportation options for some residents through successfully funding JARC and New Freedom projects, assisting providers in the Region in applying for and receiving vehicles through the Specialized Transportation program, and investing in infrastructure that supports fixed-route transit in Montgomery County. Transit agencies in Greene and Montgomery counties have also been able to expand services to low-income individuals and people with disabilities by implementing operational projects specifically targeted to those populations. This is particularly important because public transit is the backbone of the transportation system for non-drivers in the Region.

However, little progress has been made in improving true operational coordination among providers, like sharing vehicles, carrying clients of several agencies on one vehicle, brokering trips, etc. There could be many reasons for this lack of progress. Most human services agencies serve particular clientele as defined by their agency mission (the elderly, people with mental health issues, people with developmental disabilities, etc.). The concept of mixing those clienteles may be intimidating. Many agencies may still want to have the convenience of their own vehicles for the same reasons that many individuals like to own their own car; you control it, it is there when you need it, you don't have to make arrangements to get somewhere. There could be concerns about liability, maintenance, and other issues. Many agencies do not recognize the full cost of vehicle ownership and operation and therefore don't see the value of contracting or vehicle sharing.

Low-income non-drivers depend primarily on public transit for employment-related transportation, which works best for day time employment when the passenger resides near a bus route and the employer is near a bus route.

However, transportation options to jobs outside of a transit agencies “home county” or which start or end late in the evening or very early in the morning are severely limited. Of the 340,650 households in the Dayton metro area, about 25,785 do not own an automobile, according to a report released in August of 2011 by the Brookings Institution’s Metropolitan Policy Program. Of those, about 4,000 households, or 16 percent, do not live in neighborhoods with good access to transit, according to the report.

Since many of the jobs being created in the Region are in newer suburbs not served by fixed-route transit, and there are capacity issues in both Greene and Miami Counties that make it difficult to provide subscription work trips to everyone on demand responsive service, people without automobiles often cannot access those jobs.

In addition, the average age in the Region continues to rise more rapidly than the national average, increasing the percentage of seniors who will need supplemental transportation. Many of these seniors live in suburban and rural settings which could be expensive and difficult to serve by traditional transit service. While there appears to be some slowing of the suburbanization of the Region due to the downturn in the housing market, there are still increasing numbers of people living in neighborhoods where a private car has traditionally been essential to getting around.

To address the issue of senior mobility, community-based senior transportation programs have been established in multiple communities, and those efforts are supported in Montgomery County by the Senior Transportation Expansion Project (STEP), a coordinated effort funded by Montgomery County Frail Elderly funds, administered by MVRPC and implemented by multiple community-based senior transportation programs. Community-based senior transportation programs also operate in Greene County and on a smaller scale in Miami County.

Some of these senior transportation programs have existed for many years, but several new programs have been started since the original Coordination Plan was adopted. However, demographic trends suggest that these programs will be insufficient to keep pace with the rapid aging of the Region’s population. It is expected that this issue will peak between 2025 and 2035 when the baby boom cohort enters the period of transportation dependency, which usually begins around age 80, but can be much earlier for individuals experiencing health issues which effect driving. Since rates of disability increase with age, it is often difficult to distinguish between a service for the elderly and a service for people with disabilities. Seniors, especially those on fixed incomes with disabilities that impact driving, are going to need more reasonably-priced, convenient transportation options in order to remain independent and connected to the community.

## Regional Priority Issues

While there are many gaps in transportation services that need to be addressed and improvements that can be made, six areas have emerged that deserve specific attention over the next four –year-period and beyond:

1. the increasing demand for dialysis-related transportation and transportation for other repetitive medical treatments such as chemotherapy and physical rehabilitation;
2. the aging of the Region’s population and the growing transportation needs of seniors who limit or stop driving, or those who should do so;
3. the need for people with disabilities, the elderly and people of low income to be able to access employment, medical, educational and shopping destinations in an efficient manner, including trips that cross jurisdictional boundaries;
4. the need to complete essential sidewalks, curb cuts and other elements of the pedestrian infrastructure, especially along fixed and flex-route transit lines in order to make transit more accessible and appealing to the target populations;
5. the growing number of low-income residents who need transportation to jobs, medical appointments and other activities, and the fact that more of these low income individuals are living in suburban and rural settings with limited transportation options;
6. and an overarching emphasis on coordination among agencies, funders and users, to ensure cost-effective use of the Region’s transportation assets. Coordination should be emphasized to combine clients of various agencies on single vehicles, and to coordinate operations such as dispatching, maintenance, and driver training. (see Appendix D) Coordination will be encouraged and rewarded in all funding governed by this plan.

## Part 1

Purpose of This Update:  
Planning Requirements, Related Funding and  
Methodology

## **Introduction and Methodology – 2012 Update**

In 2008, the Miami Valley Regional Planning Commission Board of Directors adopted the Public Transit Human Services Transportation Coordination (HSTC) Plan for Greene, Miami, Montgomery and northern Warren Counties (Coordination Plan). The plan was a culmination of ten months of work conducted primarily by MVRPC staff and WESTAT, a nationally-recognized consulting firm with particular expertise in transportation coordination and the challenges faced by “transportation disadvantaged individuals.” Federal programs define the transportation disadvantaged as individuals who cannot drive due to age, disability or extreme poverty (unable to afford to keep a reliable car on the road). The original 2008 Public Transit Human Services Transportation Coordination Plan for Greene, Miami, Montgomery and northern Warren Counties and related planning documents can be found at:

<http://www.mvrpc.org/transportation/hstc/coordination-plan>

This update of the Public Transit Human Services Transportation Coordination (HSTC) Plan for Greene, Miami, Montgomery and northern Warren Counties was prepared in-house by MVRPC staff with input from the HSTC Update Steering Committee and was timed to coincide with the update of the Region’s Long Range Transportation Plan update. Much of the original demographic research, mapping and analysis done in 2008 is still accurate and relevant and is referenced in this update. That mapping and analysis remains accurate and was not redone as part of this update. The original maps and data analysis concerning population distribution, the target populations, and popular origins and destinations can be found at:

<http://docs.mvrpc.org/hstc/AreaAndPopulationAnalysis.pdf>.

A Regional Steering Committee for the Plan Update was formed to provide input and to review of this document. In addition, County Coordinating Committees and the general public were invited to provide input and to review the draft update. The Regional Steering Committee met four (4) times, with an average of twenty-five (25) people in attendance. The committee made recommendations on the content of the update, identified current issues and reviewed the draft Plan Update. Public meetings were held on 3/6/2012 and eleven (11) citizens attended that meeting to provide input on the draft plan. The plan was also available on the website at [www.mvrpc.org](http://www.mvrpc.org) and the link to the draft plan was advertised widely to the public.

### **Study Area**

The original Plan and this update both focus on Greene, Miami, Montgomery and northern Warren Counties, Ohio. The map below shows the population distribution in 2000 for the study area and for neighboring Preble County. Because sub-group data from the 2010 census was not yet available at the time of the update, and because the population distribution and trends in the Region have remained stable since 2008, maps were not revised for this update.

Greene, Miami, Montgomery, Preble, and Northern Warren Counties:  
Total Population, Persons per Square Mile, 2000

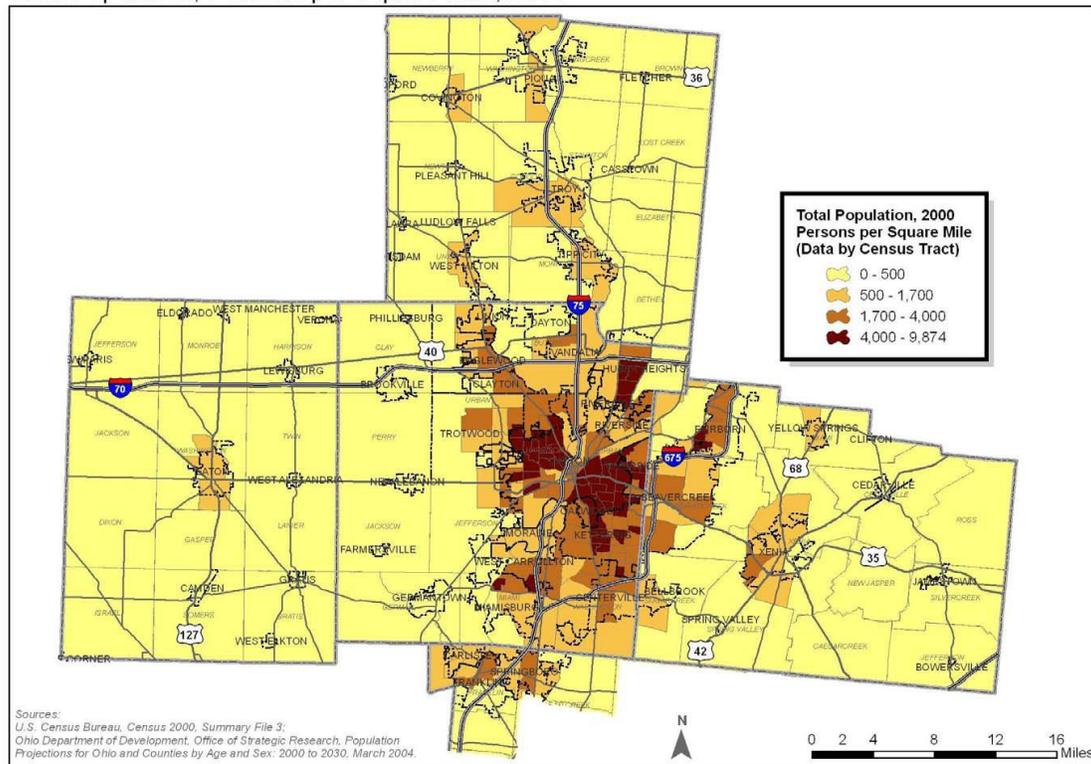


Figure 1

## Purpose of the Coordination Planning Effort and this Plan

The HSTC plan was developed in 2008 in response to a Federal Transit Administration mandate that requires the development of a “locally-developed transportation coordination plan” in order to receive funding from three Federal Transit Administration programs:

- the Section 5310 Specialized Transportation Program for the Elderly and People with Disabilities,
- the Section 5316 Job Access and Reverse Commute program and
- the Section 5317 New Freedom program.

These three programs share the goal of improving transportation for three specific populations: the elderly, people with disabilities and people of very low income. These populations are considered “transportation disadvantaged” by the federal government.

MVRPC is the designated recipient for the 5316 and 5317 programs and conducts solicitations annually to competitively award those funds. MVRPC assists the Ohio Department of Transportation to advertise the 5310 program and does the initial scoring

of the applications for that program. More about the federal role in transportation coordination can be found at: [www.unitedweride.gov](http://www.unitedweride.gov) .

While the funding requirements of these three programs provided the impetus to develop the plan in 2008, the real purpose of this planning effort is to improve transportation for the target populations and to make better use of the transportation resources in the Region through improved coordination of efforts.

## **Plan-related Funding**

Below are short descriptions of the Section 5310, 5316 and 5317 programs and updates on the local impacts of those programs since 2008. It is important to note that Congress has not passed a long-term transportation reauthorization bill, and that there are no guarantees that these programs will be included in an eventual bill, or if included, will be at similar levels to prior years. The ongoing financial challenges at the Federal, State and Local levels will doubtless impact transportation in the years to come.

### **Formula Program for Elderly Persons and Persons with Disabilities: Section 5310 (Federal Transit Administration, US DOT)**

Section 5310, the Formula Program for Elderly Persons and Persons with Disabilities program, provides formula funding to States for the purpose of assisting private nonprofit groups and certain public bodies in meeting the special transportation needs of seniors and persons with disabilities. Funds are apportioned based on each State's share of population for these groups of people and are primarily to be used for capital expenses but may include purchase-of-service agreements. This program requires coordination with other federally assisted programs and services in order to provide the most effective use of federal resources. Not-for-profit, public transit, and/or specialized human service providers are awarded funds, by States, to purchase buses, vans, and related capital items, and to engage in the purchase of transportation service contracts.

Funds are obligated based on the annual program of projects included in a statewide grant application. The State agency ensures that local applicants and project activities are eligible and in compliance with Federal requirements, that private not-for-profit transportation providers have an opportunity to participate as feasible. The program requires a coordinated planning process with other Federally-assisted programs and services (such as is provided in this Action Plan). Once FTA approves the application, funds are available for state administration of its program and for allocation to individual sub-recipients within the state. More information about the Specialized Transportation Program can be found at: <http://www.mvrpc.org/transportation/hstc/specialized> .

A list of active 5310 Specialized Transportation vehicles in the study area can be found in Appendix C of this update.

*Update: Since the Coordination Plan was adopted, organizations in the MVRPC Metropolitan Planning Area have been successful in obtaining twenty-one (21) accessible vehicles through the Ohio Department of Transportation's statewide 5310 solicitation process to replace or add to the regional fleet of specialized vehicles. In the last two solicitations prior to the plan's adoption (2006 and 2007), the Region received no vehicles.*

*Currently, there are twenty-nine (29) 5310 vehicles operating in the study area which are titled to the Ohio Department of Transportation. In addition, there are multiple high mileage/older vehicles that are still in operation but are no longer a part of the 5310 program because the title has been transferred to the local agency. A list of all 5310 vehicles which are currently in operation in the study area is available in Appendix A of this document. This fleet of specialized vehicles represents a significant asset to the region, and one that could be better utilized through enhanced coordination efforts. Agencies which operate these vehicles are encouraged to look for ways to cooperate with other agencies which serve the elderly and people with disabilities.*

*Riders from various agencies could travel on the same vehicle and agreements for sharing the costs of those trips could be established. There are limited examples of this happening in the Region. It is unclear why more sharing and coordination of these vehicles doesn't happen. As stated elsewhere it could be a matter of habit, convenience or concerns about liability or other issues. More should be done to make sure that these vehicles are fully utilized. One desired outcome of this update is to raise awareness of this fleet of vehicles and to encourage more coordinated use of this fleet*

**Job Access and Reverse Commute Program: JARC, Section 5316  
(Federal Transit Administration, US DOT)**

Job Access grants are intended to develop transportation services to assist welfare recipients and other low-income individuals get to and from jobs and training. Reverse Commute grants are designed to develop transit services to transport workers living in urban centers to suburban and rural job sites. JARC grants are intended for communities where the low income population is at least 150% of the poverty level. Grants may finance a wide variety of capital projects and operating costs of equipment, facilities, and associated capital maintenance items related to providing access to jobs (including the purchase of transportation services); promote the use of transit by workers with nontraditional work schedules; promote the use by appropriate agencies of transit vouchers for welfare recipients and eligible low income individuals; and promote the use of employer-provided transportation including the transit pass benefit program. Program activities include information sharing, interagency coordination, technical assistance, best practice documentation, and demonstrations of innovative services and coordination planning. Emphasis is placed on projects that use mass transportation services. JARC grants require annual reports that include performance measures. More information about the JARC program can be found at: [http://docs.mvrpc.org/hstc/jarc\\_Fact\\_Sheet.pdf](http://docs.mvrpc.org/hstc/jarc_Fact_Sheet.pdf)

*Update: Since the plan was adopted, more than \$2.1M in JARC funding has been awarded to organizations and jurisdictions in the MVRPC Metropolitan Planning Area. That amounts to 100% of the regional allocation for JARC for the FY 2006, 2007, 2008, 2009, 2010 and 2011. These funds are being used, in part, to provide Mobility Management services, operate additional transit service to jobs and job-related services, construct bus shelters in low-income neighborhoods, and to administer the grant solicitation process. JARC funds help to fund Mobility Management efforts in both Greene and Montgomery Counties, and have helped to establish Coordination Councils in those counties.*

A summary of JARC New Freedom allocations and awards for the period 2006-2011 can be found in Appendix C of this update.

**Section 5317: New Freedom Program  
(Federal Transit Administration, US DOT)**

The Department of Transportation may make grants under this section to a recipient for new public transportation services and public transportation alternatives that assist individuals with disabilities with transportation; these activities must be beyond those required by the Americans with Disabilities Act of 1990. Transportation to and from jobs and employment support services can be included. Federal funds for capital projects under this section may not exceed 80 percent of the net capital costs of the project; Federal funds for operating assistance may not exceed 50 percent of the net operating costs of the project. Expenditures such as funding wheelchair accessible taxis and purchase of transportation services are allowable under this program.

New Freedom projects must be coordinated with activities Section 5310, 5316, and with related activities under programs of other Federal departments and agencies. Beginning in fiscal year 2007, 5317 recipients need to certify that the projects selected were derived from a locally developed, coordinated public transit-human services transportation plan (such as this plan); and the plan was developed through a process that included representatives of public, private, and nonprofit transportation and human services providers and participation by the public. New services must not have existed nor had funding committed before August 10, 2005, to be eligible. New Freedom grants require annual reports that include performance measures. More information about the New Freedom program can be found at:

[http://docs.mvrpc.org/hstc/newFreedom\\_Fact\\_Sheet.pdf](http://docs.mvrpc.org/hstc/newFreedom_Fact_Sheet.pdf)

*Update: Since the plan was adopted, more than \$1.3M in New Freedom funding has been awarded to organizations and jurisdictions in the MVRPC Metropolitan Planning Area. That amounts to 100% of the regional allocation for New Freedom for the FY 2006, 2007, 2008, 2009, 2010 and 2011. These funds are being used, in part, to provide Mobility Management services, operate additional service for people with disabilities to medical, shopping and social destinations, install or upgrade sidewalks, curb cuts and crossing signals in order to make fixed route buses more accessible to people with disabilities and to administer the grant solicitation process. New Freedom funds help to fund Mobility Management efforts in both Greene and Montgomery Counties, and have helped to establish Coordination Councils in those counties*

A summary of JARC New Freedom allocations and awards for the period 2006-2011 can be found in Appendix C of this update.

## Part 2

# Status Update of Mobility Needs and Coordination Efforts in Greene, Miami, Montgomery and Northern Warren Counties

## Regional Characteristics

### Population Analysis and Trends for the Target Populations

In addition to enabling the Region to access the federal funding programs above, the Coordination Planning process provides a forum to discuss, research and improve transportation services for the target populations. The intent of the federal planning mandate is to encourage the most efficient use of specialized transportation resources (vehicles, drivers, fuel, dispatching, etc.) and to identify significant gaps in service for both people who depend on these services today and also those who will depend on them tomorrow. In 2008, great time and effort was taken identifying and mapping concentrations of the target populations, frequent destinations of those populations and identifying the services that were already in the community.

This type of situation analysis provided a region-wide look at the issue of specialized transportation for the elderly, people with disabilities and people of very low-income.

That original work can be found at:

<http://docs.mvrpc.org/hstc/AreaAndPopulationAnalysis.pdf> . In addition, projections were made for each of the target populations through 2030. Because sub-group data from the 2010 census was not available at the time of this update, and because no significant changes in distributions of those populations are apparent, the original maps and projections were not updated for this plan.

Some of the findings of the original analysis included:

- An increasing numbers of seniors with transportation needs will be found throughout the Region, many in hard-to-serve suburban and rural locations.
- An increasing number of people with disabilities with transportation needs will be found throughout the Region, many in hard-to-serve suburban and rural locations. The number of people with disabilities will increase in part due to the aging process, as there is a positive correlation between disability and age.
- A relatively stable low-income population will be concentrated primarily in the central city and inner ring suburbs, but will expand into newer suburbs as well.

*Update: Recent media coverage has highlighted the spread of poverty into the suburbs, sometimes to communities with extremely limited transportation options. Discussions with local elected officials and with human services agencies substantiate this observation. It appears that a significant number of low-income people are moving to suburbs from the central city and that more long-time suburban residents are falling into poverty due to the weak economy. Increased demand for food assistance and other services traditionally associated with poor inner city neighborhoods are also being reported in suburban settings.*

- Many low income individuals currently live near fixed or flex-route services. However, those services do not always connect to desired destinations, including employment and medical destinations. In Greene and Miami counties where transit is primarily demand-responsive service, transit is available county-wide, though capacity issues make it difficult for low-income individuals to depend on transit to get to a job.

*Update: The hours and frequency of service often make it difficult to use public transit for transportation to work, especially in the evenings and on weekends. As poverty spreads to suburban and rural areas, more poor people are living in settings not served by fixed route transit. In addition, the poor economy and the fact that many retailers are now located in suburban Greene and Miami Counties have resulted in the decrease of sales tax revenue to GDRTA, resulting in some service cuts and higher fares. Service cuts tend to be made on routes serving less densely-populated rural and suburban locations, further limiting the options available to non-drivers in those locations*

- Many of the newer medical facilities and employment centers are being located in suburban locations not currently served by fixed route transit.

*Update: Recent openings of medical facilities along I-675 in particular are in areas not historically served by fixed route transit. This can be a challenge both for transit-riders seeking treatment and for those seeking employment at those facilities.*

- It is difficult for non-drivers to cross county lines to reach medical, employment and other destinations.

*Update: Some progress has been made in crossing county lines, especially from Miami and Greene counties to Montgomery County. However, it is still difficult for transit riders in Montgomery County to reach rapidly growing areas in Greene, Miami and northern Warren Counties, both because of financial and system constraints on the GDRTA and, in some cases, concerns of local jurisdictions which limit access to these high-growth areas.*

The 2010 census, locally gathered data and anecdotal evidence confirm these findings of the 2008 report. Population loss from the central city continues, though the growth outward from new development has slowed, perhaps temporarily, due to the slowdown in the housing market. Regionally, population growth has been nearly flat since the original study. In 2011, Ohio was ranked number 48 out of the 50 states in terms of population growth.

As seen in Figure 2, population distribution projections for the year 2030 show a very similar pattern to actual distribution in the year 2000. (Figure 1) However, any additional growth of total population will likely be in suburban and rural parts of the Region with flat or declining growth in the central urbanized area.

Greene, Miami, Montgomery, Preble, and Northern Warren Counties:  
Total Population, Persons per Square Mile, 2030

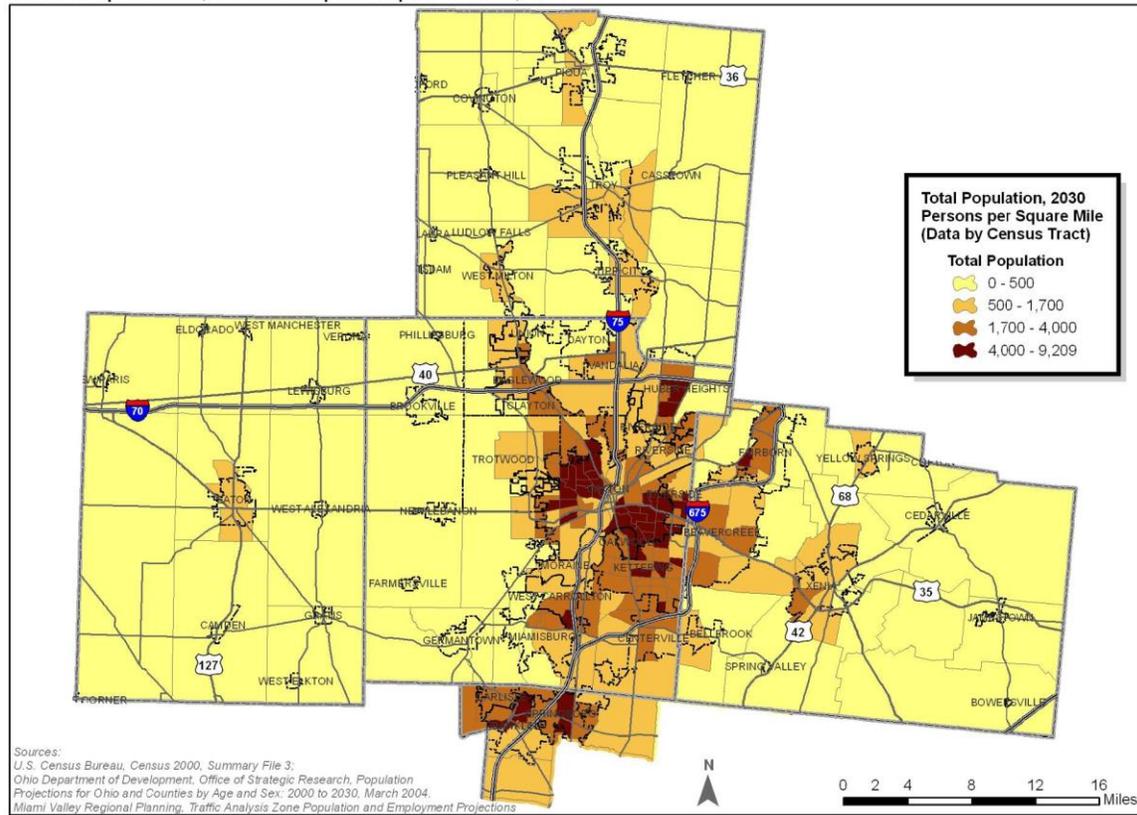


Figure 2

Figure 3 below shows the percentage change of the total population through 2030. The basic pattern is of population loss in the central city and older suburbs and flat to low growth in other parts of the Region.

This presents the Region with two realities that will make it increasingly challenging to address the needs of transportation-dependent populations. While the greatest concentration of seniors, people with disabilities and people in poverty will remain in the City of Dayton and inner-ring suburbs, there will also be an increase of all of these populations in suburban and rural areas in large part due to the aging of the population and the struggling economy.

Because it is more difficult to serve non-drivers in less-densely populated suburban and rural areas, more coordinated and creative solutions will need to be developed to serve these parts of the Region. In addition, loss of tax base in Montgomery County will make it more challenging to provide transportation to the concentrations of seniors, people with disabilities and people in poverty who live in the City of Dayton and older suburbs. The people with the greatest needs and fewest options will largely remain in older

communities which will struggle to provide services, including transportation, due to declining tax revenues.

Greene, Miami, Montgomery, Preble, and Northern Warren Counties:  
 Percentage Change of the Total Population per Square Mile, 2000-2030

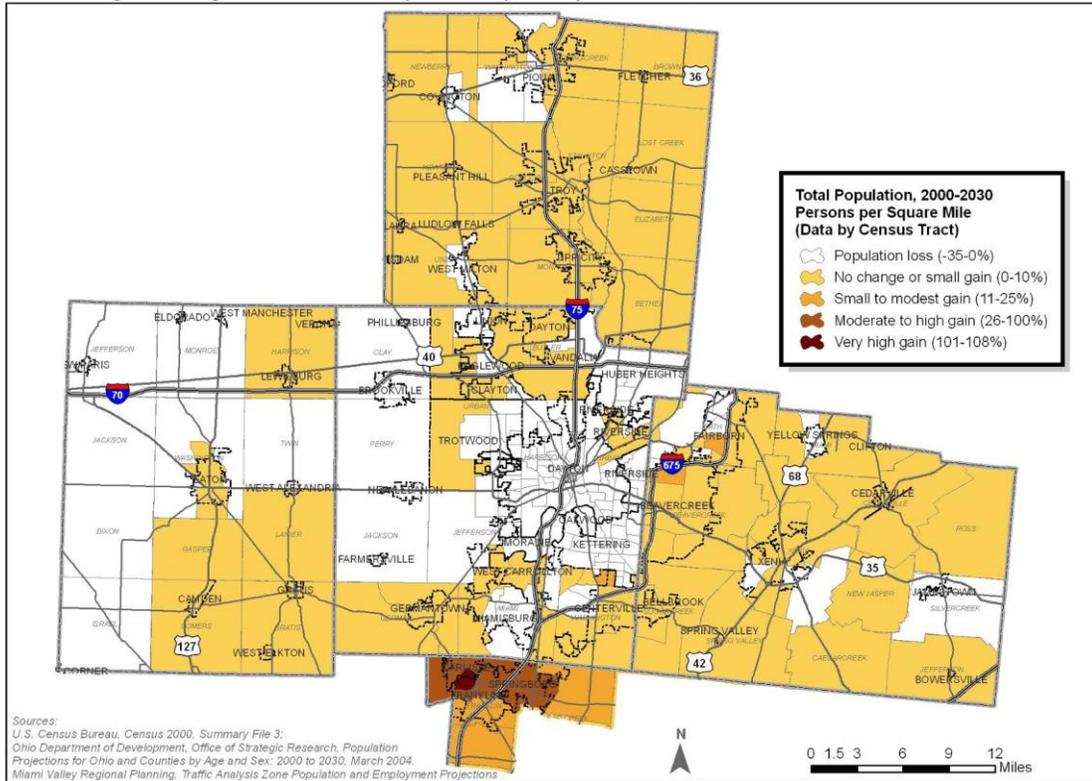


Figure 3

## **Distribution of Senior Population**

National research shows that, contrary to popular belief, the elderly tend to “age in place.” Since many of the newer suburbs in the study area were built to accommodate the desires of the “Baby Boom,” those suburbs are increasingly populated by people in their 60s and above. Many of these suburban neighborhoods have no regularly-scheduled transit service. As seniors begin to cut back on driving, or stop driving all together, other transportation options will be needed to allow them to reach shopping, medical and social destinations. Many of these seniors will have little or no experience with public transit or other transportation options beyond the private automobile. They have relied almost exclusively on their own automobiles and the transition to driving less or not at all will present a challenge to individuals and the community.

Those growing old in more urbanized areas in Montgomery County should have better access to transit because of the well-established bus services in the urbanized area. In addition, many City of Dayton residents have used transit earlier in their lives, so may be more comfortable with taking the bus than seniors who have lived in suburban settings most of their lives, and who have limited experience with transit. In fact, some parts of the urbanized area in Montgomery County are the most “transportation-rich” areas in the Region, with overlapping fixed-route GDRTA service, ADA paratransit service and human-services transportation available to residents. Transportation options may be part of what is drawing some older residents back to the urbanized areas, including downtown Dayton and inner-ring suburbs like Kettering.

In 2011, a seniors group in the City of Riverside entered into a contract with the Wesley Center (located in West Dayton) to provide transportation to nutrition sites for Riverside senior citizens. This use of existing resources (vehicles, drivers, etc.) is a good example of a coordinated effort to address the growing need for senior transportation.

Figure 4 below illustrates the distribution of the elderly in our Region as of 2000. At the time of this update, sub-group data from the 2010 census was not available. The concentrations of the elderly as shown by this map are still accurate in 2012.

Greene, Miami, Montgomery, Preble, and Northern Warren Counties:  
Seniors (Ages 65+) per Square Mile, 2000

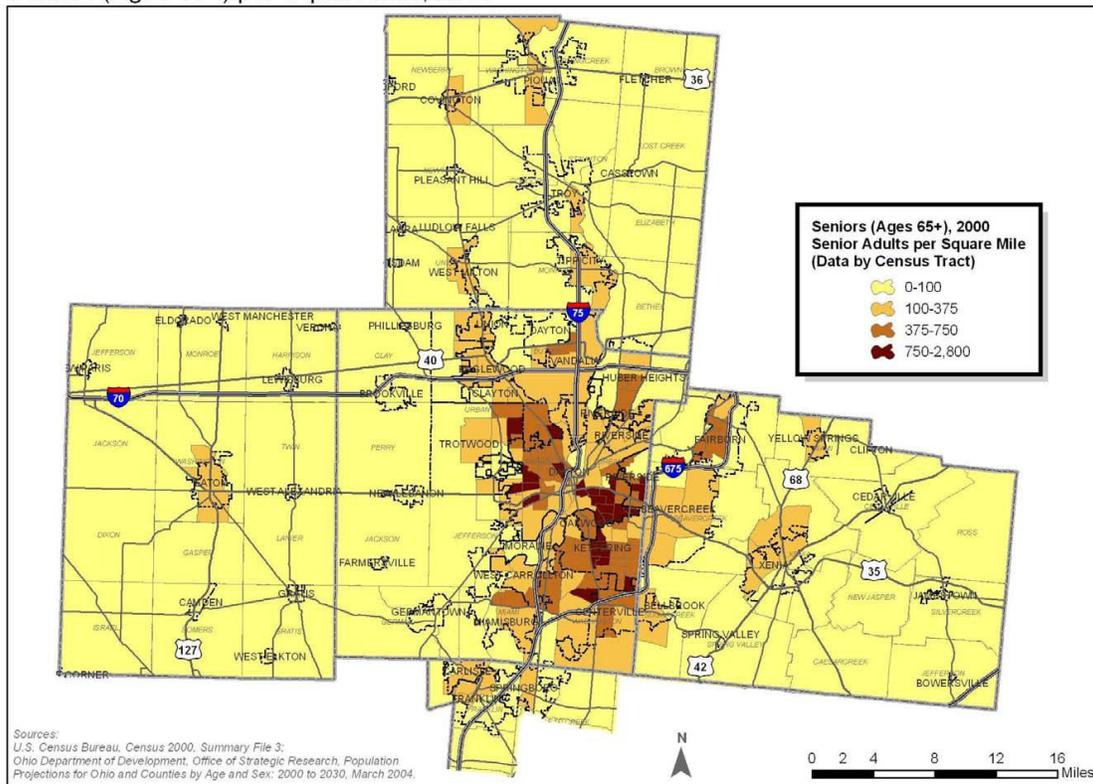


Figure 4

Some of the largest percentage increases in the senior population by 2030 will occur in northern Warren County and in western Greene County, as illustrated in Figure 5 below. However, the greatest concentrations of people over 65 will remain in the City of Dayton and the surrounding older suburbs.

Many communities in the Region already have existing supplemental senior transportation programs, often operated by a senior center or a non-profit, which will be strained by the increase in non-driving seniors. In some communities, no supplemental senior transportation currently exists. These communities will need to decide if and how to serve non-driving seniors as that population grows. The expanded use of volunteer drivers and innovative ride scheduling technology could be part of a solution to the challenge of a growing non-driving senior population.

Greene, Miami, Montgomery, Preble, and Northern Warren Counties:  
Seniors (Ages 65+) per Square Mile, 2030

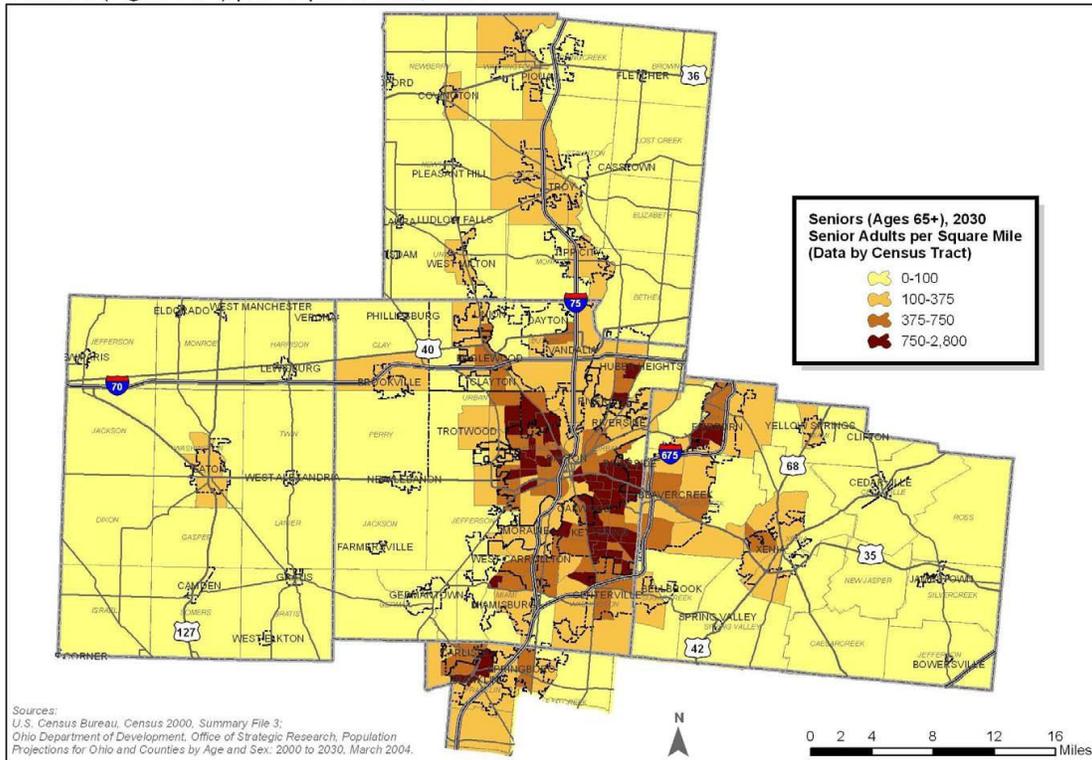


Figure 5

### Distribution of People with Disabilities

The distribution of people with disabilities in the Miami Valley in 2000 was similar to the distribution of senior citizens, with the highest concentrations of people with disabilities residing in the urban core of the City of Dayton and older suburbs, as shown in Figure 6 below. In 2000, one in six Miami Valley residents reported one or more long-lasting physical or mental disability. By 2030, that number is projected to be one in five.

The concentration of people with disabilities in the urban parts of Montgomery County means that the majority of that population has access to both fixed route bus service and Project Mobility, the paratransit service provided by GDRTA.

In Greene and Miami Counties, people with disabilities who cannot drive are primarily served by demand-responsive or flex-route services offered by Greene CATS and Miami County Transit. In Greene County, Greene CATS provides transportation to people with developmental Disabilities through contracts with the Greene County Board of Developmental Disabilities. All transit services in the Region which serve people with disabilities currently experience capacity issues, especially at peak times.

Greene, Miami, Montgomery, Preble, and Northern Warren Counties:  
Population (Ages 5+) with Disabilities per Square Mile, 2000

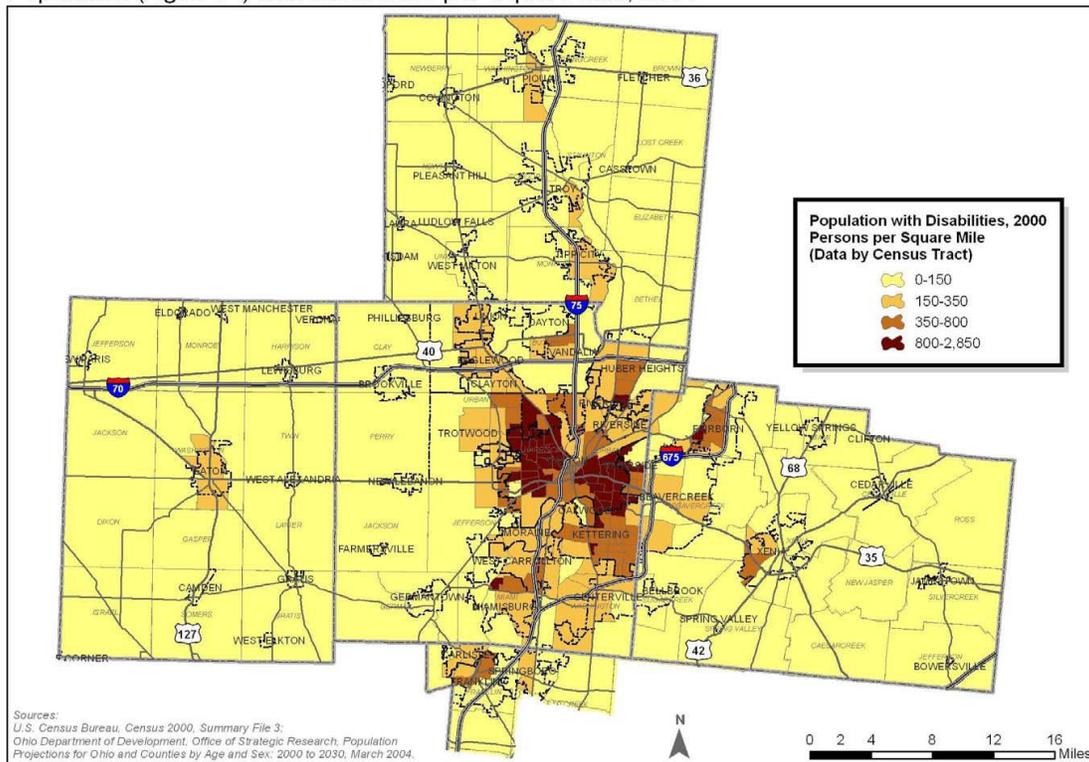


Figure 6

The population with disabilities was projected to grow by about 15% between 2000 and 2030. That projection should increase even more when extended to 2040. Because disability rates show a positive correlation with age, the rate of disability will increase in parallel with increase in average age in the Region. While the greatest concentrations of people with disabilities will remain in the urban core of Dayton and older suburban cities like Kettering and Fairborn, the percentage increase in people with disabilities will be greatest in the same suburbs which will experience the greatest percentage increase in senior citizens.

Many individuals who have not had disabilities during their lives will experience disabilities in old-age. Some of these disabilities will impact their ability to drive. Since many Miami Valley residents live in car-dependent neighborhoods, this increase in age-related disabilities will make reaching common destinations like shopping areas, medical facilities and recreational amenities difficult to access for a growing number of residents.

Other trends, like the rapid increase in people diagnosed with Autism and the number of people with disabilities who require dialysis, will present new challenges.

Providing transportation options for these growing populations in both the older parts of Montgomery County and in suburban and rural parts of the Region will present

challenges. In Montgomery County, the cost of providing paratransit service through Project Mobility will likely continue to consume an increasing share of GDRTA’s budget.

Greene, Miami, Montgomery, Preble, and Northern Warren Counties:  
Population (Ages 5+) with Disabilities per Square Mile, 2030

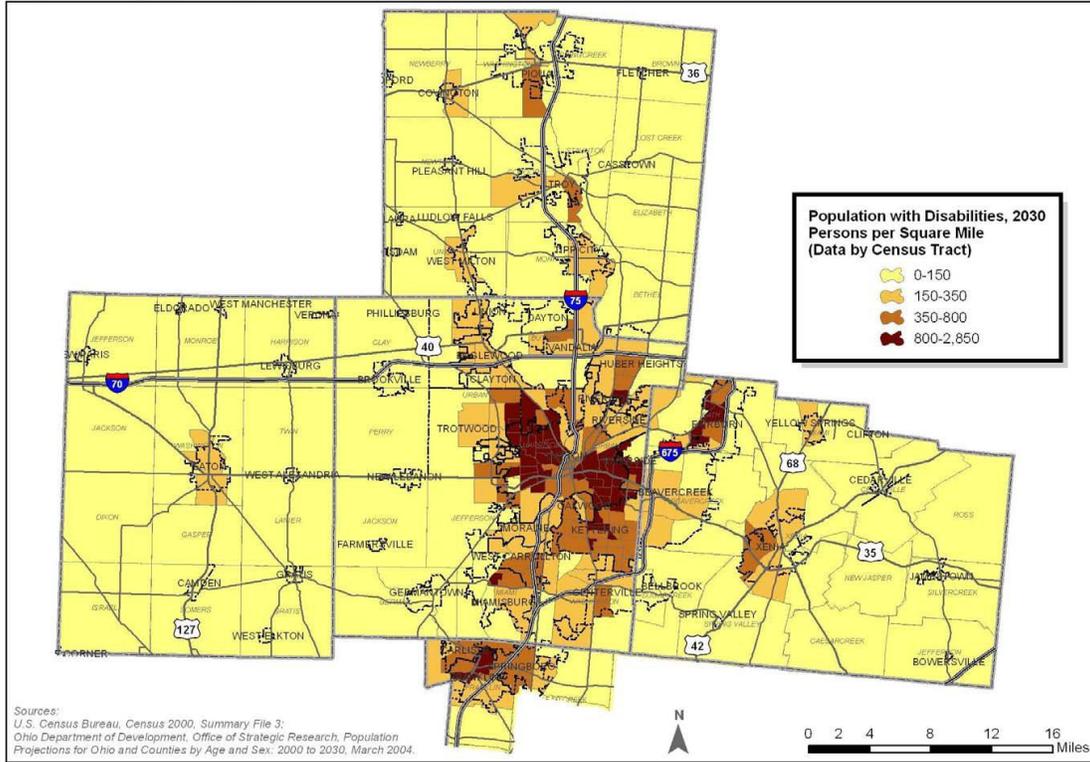


Figure 7

### Distribution of People in Poverty

The highest concentration of people in poverty in 2000 was also in the City of Dayton, as seen in Figure 8. As housing prices have continued to fall in the City due to an over-supply of housing stock, outmoded housing and continued migration to the suburbs, the City and certain older suburbs have become the lowest-cost housing alternative for people in poverty. Also, the urban core has historically been where much of the Region’s subsidized housing has been located. Recently there has been a greater effort to “scatter” subsidized housing more equitably across the Miami Valley, but much of that housing stock still remains in the City of Dayton.

In addition, many previously owner-occupied houses have been converted into rental properties as owners with means have chosen to relocate outside the City of Dayton. This trend is also true in older suburbs like Kettering, Trotwood, West Carrollton and other inner-ring suburbs.

Greene, Miami, Montgomery, Preble, and Northern Warren Counties:  
Persons below the Poverty Level per Square Mile, 2000

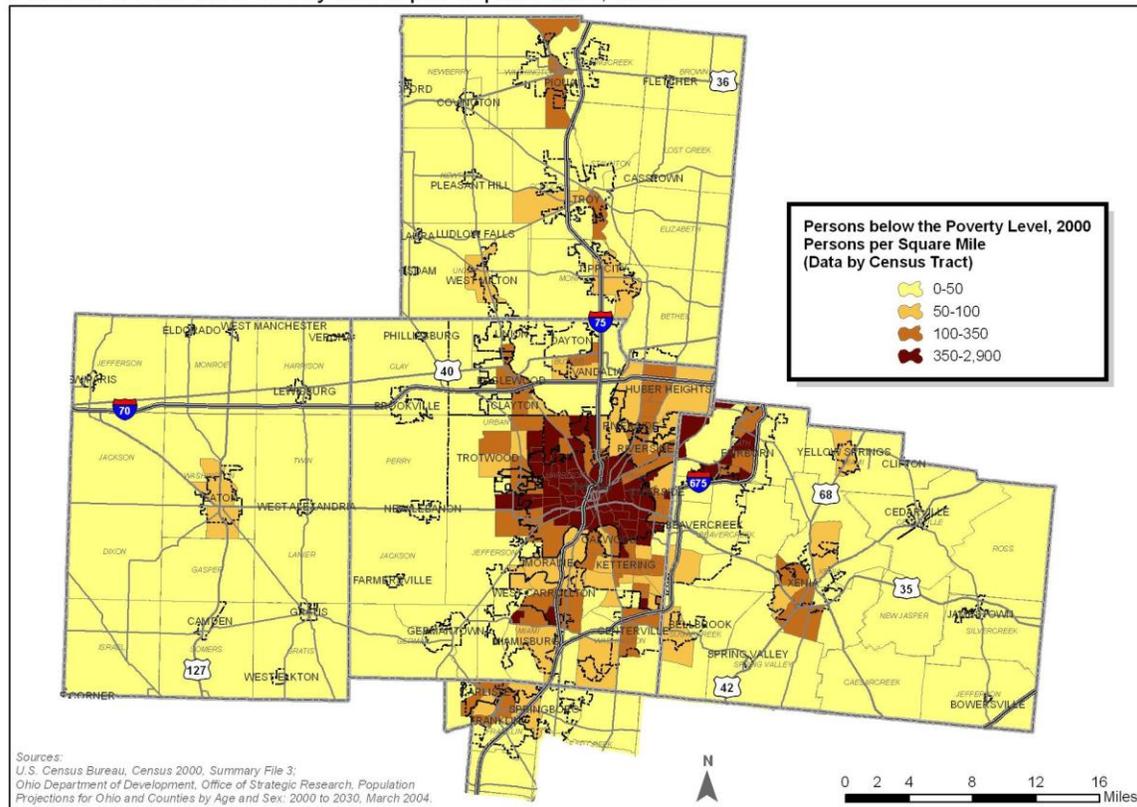


Figure 8

The concentration of poverty is projected to be fairly similar through 2030, though there is evidence of more residents in suburban communities “falling into poverty” due to the weak economy, falling house prices, lack of health insurance, under-water mortgages and other factors. This trend is accompanied by continued outward migration from the City by some low-income individuals who are taking advantage of falling housing prices in the suburbs and conversion of some previously owner-occupied houses to rental properties in those communities. These trends, along with the effort to disperse subsidized housing throughout the Region, will mean more people of low income residing in suburban settings.

Please note: projections for people in poverty are more difficult to make than for seniors and people with disabilities because much depends on the economy and the local job market, rather than simple demographic trends. Therefore, the projections made for people in poverty more closely reflect the projections made for the total population, showing flat-to-low growth in most parts of the Region, and high growth in areas of rapidly growing population. In some cases, these projections are problematic and should be considered with caution. For example, the rapid growth in poverty in northern Warren County that is illustrated in Figure 9 is more of reflection of total population growth in that part of the Region than any specific data concerning the spread of poverty.

Greene, Miami, Montgomery, Preble, and Northern Warren Counties:  
Persons below the Poverty Level per Square Mile, 2030

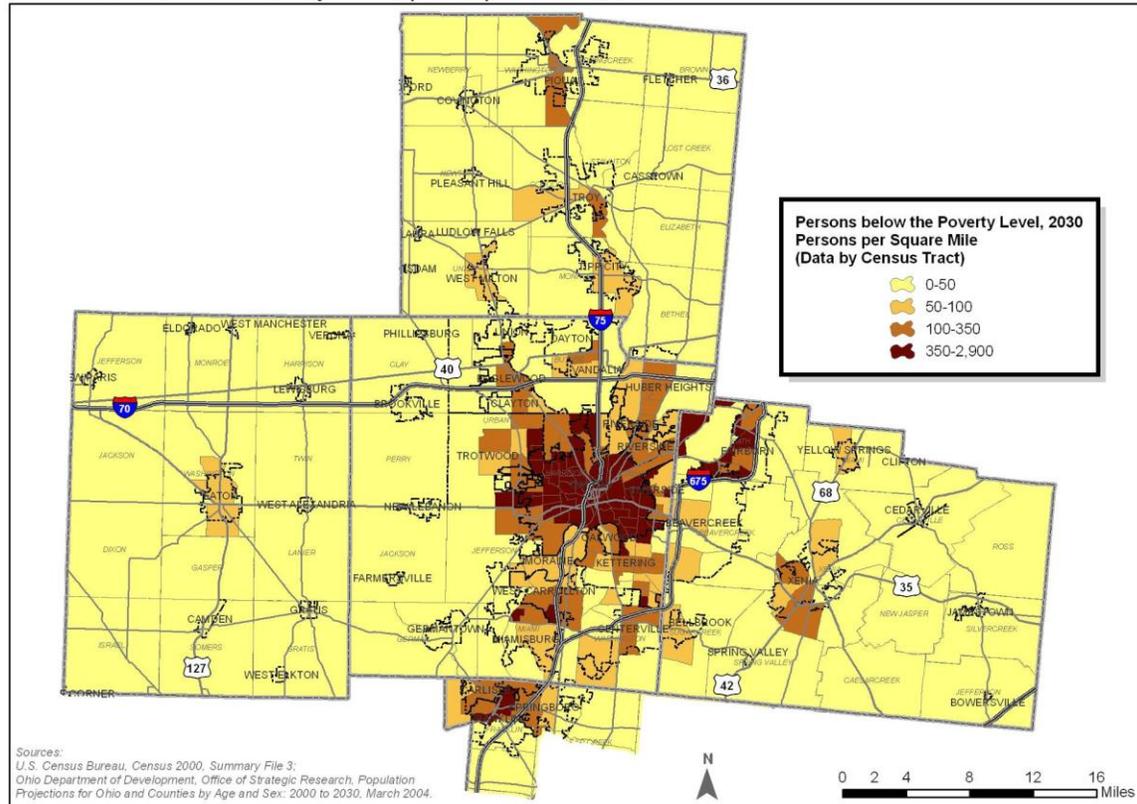


Figure 9

**Concentrations of Individuals with Multiple Needs**

Often, one person fits into all three of the transportation-disadvantaged categories: (over 65, with one or more disability and income below the poverty line). These individuals in particular will require consistent access to affordable transportation in order to have access to healthcare, employment, shopping and community activities. Transit and human services transportation provides a vital link to individuals who otherwise can become increasingly isolated in their own homes due to age, disability and poverty.

The largest concentrations of those with multiple needs will likely remain in the older, more urban parts of the Region which have recently lost significant tax base due to falling property and sales tax receipts, which will make providing all services, including transportation more challenging.

## Part 3

# **Miami Valley Transportation Services**

## Transportation Resources in the Miami Valley

In 2008, the HSTC Plan stated that the current transportation situation in the Miami Valley region could be summarized as follows:

- Auto travel accounts for most (the vast majority) of trips.
- Human service transportation programs focus on the clients of individual agencies, often for extremely limited geographic areas and trip purposes
- Public transit agencies serve individual counties (or portions thereof)
- Traveling across county boundaries is difficult unless you drive.
- In the Miami Valley Region, three transit agencies provide public transportation opportunities to the residents of their respective counties — Montgomery, Greene, and Miami. There is little public transportation service in Northern Warren County.

The above description remains accurate in 2012. Some specialized transit routes and services have been added using grant funding, but transit service in Montgomery County has actually been cut back due to funding constraints. Service in Greene and Miami Counties has remained fairly stable, with the exception of new services being offered in Greene County using JARC, New Freedom and CMAQ funding.

### Transportation Provider Report

*Update: In 2008, an extensive inventory of transportation providers was conducted by the project consultants. The results of that inventory can be found at: <http://docs.mvrpc.org/hstc/TransportationProviderReport.pdf>. The Provider Inventory formed the basis for the creation of an online Regional Directory of Transportation Providers: <http://www.mvrpc.org/sites/default/files/hstcproviderdirectory.pdf>. The Directory is hosted on MVRPC's website and is the first comprehensive source of information about transit, non-profit, and human services transportation providers in the Region. The Directory contains listing for 25 transportation providers and is updated on a regular basis by MVRPC staff. A link to the updated Directory is sent to over 500 contacts on the Human Services Transportation Coordination interest list at least quarterly. The Directory is now used as the primary source for referrals for transportation by both the United Way 211 service and the Area Agency on Aging "Questions on Aging" information line.*

*The most significant change to the provider list has been the addition of three (3) new senior transportation services in suburban communities in Montgomery County. Washington Township/Centerville, Vandalia and Huber Heights have all added service through their respective senior centers since 2008. These programs were established with the assistance of the Frail Elderly Committee using funds from the Montgomery County Human Services Levy. The funds are administered by MVRPC as part of the Senior Transportation Expansion Project (STEP). MVRPC staff provides technical assistance to existing and new senior programs to expand transportation options for seniors in Montgomery County.*

For the purpose of this update, the extensive fleet inventory process was not replicated. The online Directory has been kept current since 2008, and additional providers have been added to the directory as needed. Currently, the Directory is being expanded and improved through the use of JARC and New Freedom funds.

The Directory is updated when providers make changes to hours of operation, costs, service areas, etc. When significant updates occur, members the HSTC contact list are sent a link to the revised Directory. There are over 500 individuals in that contact list. A more extensive, searchable version that will include transit agencies, human services transportation providers and private providers of public transportation should be available in 2012. The new version of the Directory will be designed for the general public, human service agencies and other advocates to be able to more easily find what options exist for getting “from here to there” in the Miami Valley.

## **Key Transit Resources**

Descriptions of the transit services provided by the public transit systems in the study area can be found in Chapter 3 of the 2008 Coordinated Transportation Action Plan: <http://docs.mvrpc.org/hstc/FinalRegionalActionPlan.pdf> . Updated descriptions of each service appear below.

### **Greene County**

- Key Provider: Greene CATS
- Travel days: every day of the week
- Travel hours: 6:00 am to 9:00 pm
- Services offered:
  - Demand responsive (based on sufficient advance notice and capacity)
  - Flex -route service for all residents who can access the route, and for all persons who can be picked up or dropped off within  $\frac{3}{4}$  of a mile from the route
- Destinations:
  - Anywhere in Greene County
  - Limited destinations in Montgomery County

In Greene County, the key features of transportation services can be said to be that:

- Greene CATS provides 158,000 trips per year, primarily to agency clients.
- Service open to the general public, including seniors, disabled, low-income
- Greene CATS provides county-wide service plus some limited service to Montgomery County destinations.
- Additional service is needed for the general public.

*Update: A significant improvement to the public transportation system since 2008 has been the addition of additional flex routes operated by Greene CATS. Flex routes run on a regular schedule and route, but can “flex” up to ¾ mile off of that route at a rider’s request. Flex routes now connect the major population centers in Greene County (Xenia and Fairborn) with each other as well as with the GDRTA hub in downtown Dayton, Sinclair Community College, Children’s Hospital and Miami Valley Hospital.*

*The flex-route to downtown Dayton operates on a 90-minute headway from approximately 6:00 AM to approximately 6 PM, five days a week. This service allows Greene CATS customers to connect with GDRTA and access any destination which GDRTA serves. Information concerning Greene CATS services, including Flex Routes can be found at: <http://www.co.greene.oh.us/greenecats/>*

## **Miami County**

- Key Provider: Miami County Transit System (MCTS)
- Travel days: every day (more limited weekend service)
- Travel hours: 5:00 am to 6:00 pm Monday- Friday 8:00am to 2:00 pm Saturday
- Services offered:
  - Demand responsive (requires 24-hour advance notice; reservations accepted subject to availability)
- Destinations:
  - Anywhere in Miami County

In Miami County, the key features of transportation services can be said to be that:

- MCTS provides 50,000 trips per year within the county for general public and agency clients
- Miami County MRDD provides 66,000 trips per year for MRDD clients
- MCTS provides county-wide service but no service to regional destinations
- Same day trips are given when available. Denial rate is low.
- Additional service is needed for the general public, particularly extended evening and weekend hours.

*Update: Since 2008, service in Miami County has remained fairly stable. Miami County Transit has added a connection to GDRTA Route 17 in Vandalia and travels into Montgomery County in both Vandalia and Huber Heights to reach popular destinations. Information concerning Miami County Transit Services, including connections to GDRTA, can be found at: <http://co.miami.oh.us/A55969/mcounty.nsf/All/Transit>*

## Montgomery County

### Greater Dayton Regional Transit Authority (GDRTA)

- Travel days: every day of the week
- Travel hours: 4:15 am to 1:36 am
- Services offered:
  - Fixed route, fixed schedule public transit service
  - ADA paratransit service.
- Destinations:
  - Urbanized portions of Montgomery County
  - Warren County Transit Services (WCTS) connects to GDRTA Transit Center in southern Montgomery County
  - Greene County CATS provides service to GDRTA's Wright Stop Plaza Transit Center from Xenia weekdays from 7am-5:30pm

### Project Mobility

- Sponsor: Greater Dayton Regional Transit Authority
- Travel days: every day: same as GDRTA
- Travel hours: same as GDRTA: 4:15 am to 1:36 am
- Services offered: ADA paratransit service
  - Limited to eligible persons with disabilities who cannot use regular fixed route transit services and can be picked up or dropped off within  $\frac{3}{4}$  of a mile from the route
  - Demand responsive (based on 24-hour advance notice)
  - Door through door.
- Destinations: same as GDRTA
- Within  $\frac{3}{4}$  mile either side of GDRTA routes in Montgomery County's urbanized areas.
- Passengers are assessed to determine Project Mobility eligibility and can be found to be eligible, not eligible or conditionally eligible for the service
- Currently, anyone who has been approved for Project Mobility can present a valid Project Mobility ID and receive a "Free Ride on Fixed Route"

In Montgomery County, the key features of transportation services can be said to be that:

- GDRTA provides 9,000,000 fixed route transit trips per year for general public riders.
- Project Mobility provides 225,000 demand-responsive trips per year for pre-qualified persons with disabilities who live near fixed routes.
- Montgomery County MRDD provides 392,000 annual trips.
- 8 other agencies each provide more than 3,000 annual trips.
- Trips are more often available for seniors than other groups of persons with special transportation needs.

Update: A significant innovation since 2008 was the introduction of the Free Ride on Fixed Route program for any Project Mobility eligible individual. This program has the dual goals of encouraging the independence of people with disabilities by making fixed-route the most desirable transportation option whenever it is feasible, and slowing the growth of Project Mobility, thus conserving transportation resources.

Project Mobility currently costs riders \$3.50 each way. Thus, by choosing to ride fixed route for free when possible, a Project Mobility-eligible rider can save \$7.00 on a round trip. Many riders who were reluctant to try fixed route have been encouraged to do so by this direct financial benefit. Since a paratransit ride is much more expensive for the RTA to provide than an additional fixed-route ride, this program can be a win-win for the rider and the RTA. The program also frees up Project Mobility resources so that riders who do use the ADA paratransit service can be better served.

Also, GDRTA has used JARC funding to add service to the Gateways Men's homeless shelter, which connects residents with the Montgomery County Job Center and the GDRTA Transit Center, making it possible for individuals to seek employment throughout the GDRTA service area. A route was also extended to provide access to the Life Enrichment Center; a rapidly-growing faith-based non-profit serving low-income individuals.

Another JARC-funded innovation is the Transit Access program, which works with non-profits to identify riders who can qualify for discounted tokens for job-related trips. Either the rider or the sponsoring non-profit can pay the discounted token price if the token is used for transportation to a job interview, or to a job.

GDRTA is currently helping to identify and complete pedestrian infrastructure improvements that are making fixed route more accessible to people with disabilities. New Freedom funds have been used to add sidewalk, improve curb cuts and add "pedestrian pads" that connect the sidewalk to the curb at stops that were previously in a grassy tree lawn. . These connections make bus stops more accessible to individuals who use mobility devices. The local match for these projects is typically being provided by the local jurisdictions in which the project is built. While these infrastructure improvements were not emphasized in the original plan, these projects are consistent with the recommendation that public transit be the "backbone" of the transportation system. Access to fixed route increases the independence of people with disabilities by allowing them to move freely throughout the community. In addition, increased access to fixed route lowers demand on Project Mobility, freeing up valuable capacity for trips that cannot currently be taken on fixed route. Information concerning GDRTA's services, including Project Mobility, can be found at: <http://www.i-riderta.org/>

## **TRANSIT FUNDING IN THE MIAMI VALLEY**

Funding for transit and human services transportation comes from a variety of different sources in the Miami Valley. Certain federal funding is allocated on a population-based formula, which has been agreed to by the three agencies and is administered by MVRPC. The 2010 census will likely impact the distribution of those funds.

Otherwise, the three transit agencies within the Region are funded in quite different ways.

### **Greater Dayton Regional Transit Authority**

The Greater Dayton Regional Transit Authority (GDRTA) receives funding from several sources: Montgomery County sales tax; fares, the State of Ohio, and the federal government. Fares pay about 14% of the total amount needed to operate the agency. The Montgomery County Sales tax funds more than 50%; State of Ohio funds less than 1%; and the federal government provides funding which includes capital monies and grants, comprising the remaining dollars needed.

RTA's 2010 operating budget was \$57 million and was based upon keeping service, fares and costs at current levels. Between the 2009 and 2010 operating budgets RTA utilized \$7.8 million in federal Stimulus funding in order to balance the budgets without further cuts in service or fare increases. No additional Stimulus funding is expected for 2011 and beyond. Declines in income from Montgomery County sales tax (RTA's primary source of income) and minimal state funding continue to be the agency's biggest problems. Anticipated income from the dedicated tax in 2010 was approximately \$28.2 million, the same level as in 1996.

Declining revenues, especially from the State of Ohio and sales taxes within Montgomery County, forced the authority to raise fares and reduce service levels in 2009. Many changes were made within the organization to ensure the agency was operating as efficiently as possible before service was reduced. These changes included:

- RTA fixed route (big bus) and Project Mobility operations merged
- More than \$1 million in administrative/operating expenses eliminated
- Combined the RideLine call center with Project Mobility's call center
- Eliminated 93 jobs, 30 in management/administration
- Implemented/negotiated wage freezes (currently in second year)
- Benefit cost sharing by employees increased
- Reduced contracted services including Project Mobility certifications and numerous facility support contracts

## **Greene County Transit Board (Greene CATS)**

The Greene County Board of Commissioners is the Designated Recipient for Federal Transit Administration (FTA) and Ohio Department of Transportation (ODOT) urban public transit funding. The Greene County Board of Commissioners selected the Greene County Transit Board to be the Direct Applicant for these funds. The Greene County Transit Board handles all of its fiscal matters. All the financial audits for Greene CATS have been excellent, with no negative findings.

Greene CATS receives capital funding from the Federal Transit Administration (FTA) and the Ohio Department of Transportation (ODOT). Greene CATS receives contract revenues from MRDD and JFS, as well as other agencies. Greene CATS also receives fares for service, paid by riders.

Greene County provides a wide range of in-kind support to Greene CATS, including: the use of the County's fueling depot, legal counsel from the County Prosecutor's Office, computer systems administration, use of the County phone system, assistance by the Personnel Office and overall guidance and advice.

Greene CATS' finances consist of:

Total revenues for 2010 were \$2,913,192. The revenues were broken down as follows:

- Farebox 1.29%
- FTA capital cost of contracting 15.38%
- FTA other grants 17.48%
- ODOT capital cost of contracting 1.05%
- Local match for grants 0.60%
- Greene County Dept of JFS 7.38%
- Greene County Board of DD 55.16%
- OH fuel excise tax rebate 0.85%
- Other 0.82%

Greene CATS also receives in-kind support from the County in the form of IT assistance, legal counsel, use of the fuel pumps, use of the phone system, etc.

Greene CATS has a fleet of 34 buses, and in 2010 carried 135,978 one-way passenger-trips and operated 911,528 vehicle-miles.

Greene CATS contracts with First Transit to provide the day-to-day operations and maintenance.

## **Miami County Transit**

Miami County Transit receives funding from limited sources. Local share is provided solely from the Miami County Commissioners General Fund. These monies match federal and state grants. Miami County Transit receives contract revenue from Miami County JFS. About 10% of MCT revenue is rider fares.

Miami County Transit's Operating Budget for 2011 budget was just over \$1 million. Within the parameters of this budget, MCT has been able to maintain steady and dependable levels of service and retain employees, and has not had to increase fares. In 2009 MCT utilized approximately \$790,000 of American Recovery and Reinvestment Act funds to purchase 6 new buses, software, and build a new facility.

## **KEY PROGRAMS THAT FUND HUMAN SERVICES TRANSPORTATION**

Human services transportation is funded from a wide variety of sources, including local, federal and state funds. In 2008, WESTAT provided a detailed inventory of possible sources of transportation funds, along with a best practices summary of how other regions fund transportation. That report identified sixty-four (64) federal programs that provide at least some support for transportation.

That report can be found at:

<http://docs.mvrpc.org/hstc/FinancialAndFundingOptionsMemo.pdf>

*Update: The most significant change in transportation funding since 2008 has been the availability and use of JARC and New Freedom funds in the form of regional formula allocations. As the Designated Recipient for these funds, MVRPC has conducted solicitations and awarded 100% of the Region's allocation for the years FY2006 – FY 2011. While it has sometimes been challenging to find local matching funds for projects, these two FTA programs are being used to improve transportation services for low-income job seekers and for people with disabilities. The Region has also been successful in acquiring vehicles through the Specialized Transportation program which is administered by the Ohio Department of Transportation. Information concerning vehicles acquired through the Specialized Program and projects funded with JARC and New Freedom allocations can be found in the Appendix B and C of this update, respectively.*

*The Senior Transportation Expansion Project in Montgomery County continues to be funded through Montgomery County Human Services funding, a local property tax. MVRPC applies for and manages these local funds on an annual basis.*

## **Part 4**

# **Summary of the Most Significant Transportation Issues Facing Non-Drivers in the Miami Valley and Efforts to Address Those Issues**

## Transportation Issues for Non-Drivers: a Progress Report

In terms of their impacts on transportation services, the most important demographic considerations that were identified in the original plan in 2008 are the following:

- Projected population changes will create greater travel demands for non-drivers.
- A substantial growth in populations with transportation needs is projected.
- Most of this projected growth will be in suburban areas.

These considerations all remain true at the time of this update in 2012.

The most significant observations regarding transportation resources in 2008 were that:

- Current transportation services are fragmented.
- Non-drivers have few travel options.
- Non-drivers find it difficult to make trips that cross county lines
- There is little coordination of today's services; this lack of coordination creates service gaps and overlaps, creating substantial system inefficiency
- No one knows or manages the entire travel options picture
- Current public and agency services need improvement
- There are reported difficulties in obtaining rides.
- Full cost accounting is not generally practiced.
- The number of rides provided could be improved

The above observations also remain largely true in 2012, though some progress has been made in many areas. Below is a brief summary of progress, or lack of progress, that has been made for each issue area.

- Transportation options remain fragmented,  
*Progress: Regional Transportation Directory is now available online and interagency referrals and connections have increased. Information about travel options is more easily available and there is a project underway to create a user-friendly, searchable website of all travel options in the Region.*
- Non-drivers still have few travel options:  
*Progress: additional flex-routes have been created in Greene County along with expanded travel options for people with severe disabilities. Additional services/routes for low-income job-seekers have been established in Montgomery County. The addition of Project Mobility Premium Service offers accessible transportation outside of Project Mobility's traditional service area to locations like the Dayton International Airport. Also, three new senior transportation programs in suburban Montgomery County have been created since 2008, increasing the travel options for non-driving seniors.*
- Non-drivers find it difficult to make trips that cross county lines  
*Progress: enhanced connections among the three transit agencies have been created making cross-county travel a little easier, especially for Greene County*

*residents needing to travel to Montgomery County. However, the ongoing growth of commercial activity outside of the urban core continues to be a challenge for non-drivers trying to access employment, commercial, educational and medical services in suburban settings.*

*Obstacle: Public transit services tend to be within a county, with limited service to neighboring counties. The original HSTC plan identified significant destinations that are often inaccessible to non-drivers from neighboring counties. While some progress has been made, especially for Greene County residents to access services and employment in Montgomery County via the Xenia to Dayton flex-route established by Greene CATS, it is more difficult for Montgomery County residents to reach destinations in outlying suburban counties. GDRTA has proposed expanding service to commercial, medical and educational destinations in Greene County, but at the time of this update has not been able to reach agreement with the City of Beavercreek concerning provision of service or placement of bus stops.*

- *There is little coordination of today's services; this lack of coordination creates service gaps and overlaps, creating substantial system inefficiency. Minimal Progress: Little progress has been made on operational coordination and vehicle sharing, with the exception of contractual services between social service agencies and Greene CATS and a recent agreement between the Wesley Center and Riverside Seniors for the Wesley Center to provide transportation for seniors in the City of Riverside to group nutrition sites. The Wesley Center also provides transportation to Medicaid recipients and the frail elderly through a contract with Montgomery County. Miami County Transit also provides transportation to Job and Family Services clients through a contract with Miami County JFS.*
- *No one knows or manages the entire travel options picture. Progress: At the regional level, transportation information has been centralized in the Regional Directory of Transportation Providers available on MVRPC's website: <http://www.mvrpc.org/transportation/hstc/hstc-provider-directory> The Directory is now used by the United Way 211 service and the Area Agency on Aging Questions on Aging help line. This directory is currently a static pdf document. However, a New Freedom grant was awarded to Greene CATS to oversee the conversion of the directory to a searchable database that can be more easily accessed by human service agencies and the general public.*

*Due to MVRPC's role in developing and updating this Coordination Plan and its ongoing involvement in the solicitation process for the Specialized Transportation, JARC and New Freedom programs, MVRPC has become a centralized source for information concerning transit and human services transportation, funding sources and best practices, and maintains a HSTC interest list of over 500 individuals. However, it remains true that no one entity actively manages regional travel options.*

*At the county level, Mobility Managers have been hired in Greene and Montgomery counties and Coordinating Councils have been formed in Greene, Miami and Montgomery counties. These councils meet either quarterly or as needed, and thus far attendance has been sporadic. These councils could be better utilized to as forums to manage and improve travel options. The Mobility Managers from Greene and Montgomery County meet regularly in a Mobility Managers' forum to identify opportunities for regional coordination. This forum is also attended by the Executive Director of Miami County Transit and coordinated by MVRPC staff..*

- **Current public and agency services need improvement**  
*Progress: Individual agencies have improved services and added capacity, largely through the use of JARC and New Freedom funding. Also, additional specialized vehicles have been added to the regional fleet through the 5310 program. Coordinated screening and training of volunteer drivers has also helped to improve services offered by senior centers.*
- **There are reported difficulties in obtaining rides.**  
*Progress: There are more options available in some communities, as noted elsewhere in this update. However, it is still particularly difficult to obtain rides on weekends and evenings, to out-of-county destinations, from rural settings and at peak times due to capacity and funding issues*
- **Full cost accounting is not generally practiced.**  
*Minimal Progress: It is still difficult for many human service agencies to estimate their full cost of providing transportation. This causes problems in applying for grants or when trying to contract between agencies. Transit agencies in the Region practice full-cost accounting which provides the basis for contracting with human services agencies in Miami and Greene counties. Some of the larger social service agencies also account for the total cost of providing transportation, enabling them to enter into contracts to provide transportation. However, many smaller agencies still think only in terms of fuel and drivers' wages, making the cost they perceive for providing transportation artificially low.*
- **The number of rides provided could be improved.**  
*Progress: additional rides for the elderly are being provided through STEP effort in Montgomery County and through the New Freedom-funded programs in Greene County for people with severe disabilities. Flex routes in Greene County have added additional capacity and these routes are productive. There are still capacity issues at peak hours in all counties. Even though GDRTA has been forced to reduce some service and raise fares since 2008, transit ridership has continued to increase in Montgomery County. New JARC routes in Montgomery County have provided additional rides to residents of the Men's Homeless Shelter.*

General observations in the 2008 study included the following: “There are some specific travel issues in this region that need to be recognized and resolved. First, it remains hard to cross county boundaries unless you drive; better regional public transit connections are still needed. Good transportation is lacking for late-shift and some other part-time workers. Additional transportation is needed at night and on weekends. Schedules are not frequent enough on some routes. Some advance reservation times are excessive, depressing the demand for transportation services. Finally, transportation is not recognized as a high-priority issue by key local or regional decision-makers.” For the most part, that assessment remains accurate in 2012, though some progress has been made on all issues.

Additional transportation issues were identified by the Regional HSTC Update Steering Committee in June of 2011. These include (in unranked order):

- Last minute requests for transportation cannot be filled or result in very expensive solutions (ex: calling an ambulance to get to a scheduled hospital visit, or a cab to go to the grocery.)
- The inability to come up with local matching funds to take advantage of federal (and other) grants is a common problem
- Providing out-of-county trips, especially out of Region trips is very expensive and hard to do
- Difficulty getting Work Experience Participants to jobs
- Continuing increase in the number of dialysis trips
- Getting WSU students to medical appointments off campus, especially in Greene County
- Providing trips to services in neighboring counties
- The disparity between the cost of providing a trip and the fares charged – ie: fares cover only a small percentage of the cost of a trip, especially a trip on Project Mobility
- The inability to start discussions on how to network/coordinate services without resolving the issue of costs first.
- Lack of transportation options for non-seniors for medically-related trips. (chemotherapy, physical therapy, etc.)

Other issues that have been identified outside the work of the committee, include the transportation needs of military families, veterans and veterans’ families, and the need for better services to area colleges and universities. Greene CATS in particular is actively working on both of these issues.

## **COORDINATION EFFORTS**

### **EXISTING TRANSPORTATION COORDINATION EFFORTS IN 2008**

There were a number of coordination efforts in place in 2008 in the region that offered opportunities for further coordination. Those efforts included:

- The Senior Transportation Expansion Program (STEP) which helps to fund senior transportation programs through a grant from the Montgomery County Human Services Levy, and coordinates screening and training of drivers, funded in part by a grant from the Greater Dayton Area Hospital Association.
- Montgomery County Human Services Levy and GDRTA public funding, which provides local revenue to support both public transit and human services transportation
- MVRPC, which provides administrative staff, facilitation, and training resources for regional transportation efforts.
- Passenger transfers at GDRTA hubs with other transportation providers; for example, at the South Hub with Warren County Transit System and the Eastown and Downtown hubs with Greene CATS, Transportation purchase of service agreements
  - With Greene CATS and various human services agencies
  - With GDRTA and Project Mobility and taxi companies when extra capacity is needed
  - Inter-agency agreements
- MVRPC's activities as the designated recipient for Federal funds for specialized transportation have resulted in the agency becoming more knowledgeable of and involved in specialized transportation issues across the Region.

Public transit contracts with private-sector companies to provide day-to-day transit operations in both Greene and Miami counties.

### **NEW COORDINATION AND MOBILITY ACTIVITIES SINCE 2008**

There are a number of new efforts to improve transportation for the non-drivers in the Region. Many of these activities have been funded through the JARC and New Freedom programs governed by this plan. Others are local efforts that are making better use of existing resources. These efforts have been mentioned elsewhere in this update, but are summarized below:

- regional and county-based Transit Coordination meetings attended by Mobility Managers of the respective transit agencies and staff of MVRPC;
- emphasis on coordination in the Sections 5310, 5316 and 5317 solicitation and award process;
- GDRTA and Greene CATS administer JARC and New Freedom grant application process for other agencies and jurisdictions, ensuring access to the TEAM grant management system;

- coordination meetings at the county level in three MPO counties;
- Greene CATS transfers at the GDRTA Hub in downtown Dayton, and other Greene CATS stops in Montgomery County, including at Sinclair College, Children's Hospital and Miami Valley Hospital
- agreements among some agencies to provide back-up service, loan vehicles, etc. as part of the 5310 vehicle acquisition process;
- the Wesley Center's Community Share program which makes vehicles available to other community groups on a short-term lease basis;
- wide usage of the Regional Provider Directory by United Way, the Area Agency on Aging and other agencies to locate the appropriate transportation providers for their clients;
- travel training opportunities in coordination between the transit agencies and public schools, senior centers and other agencies. GDRTA and Greene CATS are working in partnership on travel training issues to ensure that special populations in both counties are familiar with both systems;
- use of local municipal funds as match with JARC and New Freedom to make the transit system more accessible to people with disabilities and low-income individuals by construction or improvement of sidewalks leading to bus stops and by the construction of bus shelters in low-income neighborhoods;
- the existing GDRTA Community Grants program that funds transit amenities and other projects has been strengthened through the addition of JARC and New Freedom funding which is targeted for projects that improve access to transit for target populations;
- continuing discussions on how to expand volunteer transportation for seniors on evenings and weekends;
- an agreement between the City of Riverside's senior program and the Wesley Center for the Wesley Center to provide transportation to Riverside seniors to group nutrition sites;
- Rob's Rescue, a Greene County effort to provide training and equipment to emergency first responders who may encounter individuals with physical and intellectual disabilities. This effort is led by Greene CATS and was identified as a need when a vehicle carrying people with disabilities was involved in a minor accident. First responders who reported to the scene were not prepared to assist the disabled passengers, because the ambulance was not accessible and the crew had not received specialized training; and
- enhanced information sharing and referral between public transit agencies and human services agencies, especially in Greene County where Greene CATS now brokers trips for JFS clients, scheduling trips both on Greene CATS and on Xenia Senior Center vehicles.

While these activities are not sufficient by themselves to produce the level of coordination needed to optimize transportation services in the region, they do represent progress and form a solid foundation for future coordination efforts. While it is difficult to focus on new approaches during these challenging financial times, shrinking funding for many agencies in the Region may provide added incentive to coordination discussions.

## Part 5

### What's Next? Coordinating Limited Resources to Meet the Most Pressing Challenges

## **TRANSPORTATION OPTIONS FOR THE REGION**

As part of the Regional Action Plan developed in 2008, WESTAT primarily made general recommendations concerning future transportation options for the target area of Greene, Miami, Montgomery and northern Warren counties. Those recommendations can be found beginning on page 17 of the Regional Action Plan which is available here: <http://docs.mvrpc.org/hstc/FinalRegionalActionPlan.pdf> .

Since 2008, progress has been made on a variety of individual recommendations, primarily at the local and county level. Issues of county-based funding, local control and resource limitations have made pursuing large-scale coordination or consolidation difficult. However, it is important to note that the transportation needs of people with disabilities, the elderly and people of low-income are often regional in nature. One major recommendation of the original 2008 report was to move to a more regional approach toward transportation.

## **MOVING TOWARD A REGIONAL APPROACH**

Efforts continue to move toward a more regional approach to Public Transit and Human Services Transportation. Those efforts include, but are not limited to:

- refinement of the Transportation Provider Directory, which is in the process of being converted from a static document to a truly searchable tool that can be used by advocates, agencies and riders to help match travel needs with travel resources throughout the Region. The conversion project is funded by a New Freedom grant. The current static version of the directory is already being used by the United Way and the Area Agency on Aging as the primary referral source for transportation requests. The Directory can be found here: <http://www.mvrpc.org/sites/default/files/hstcproviderdirectory.pdf> ;
- the establishment of Mobility Management positions in Greene and Montgomery Counties and the establishment of a Regional Mobility Managers' Forum which meets regularly to promote cross-county efforts and innovation;
- the sharing of GDRTA bay space at the Downtown, East and West and South hubs with transit and human services agencies from other counties;
- the establishment of a regularly scheduled flex-route operated by Greene CATS that links Xenia and Fairborn and connects to prime destinations in downtown Dayton, including the GDRTA hub, Sinclair College and Miami Valley hospital;
- connections between Miami County Transit and Greater Dayton RTA within Montgomery County;
- continuing discussions of extending GDRTA service to employment, educational and medical destinations outside of Montgomery County;
- efforts to expand and enhance the Senior Transportation Expansion Project both inside and outside of Montgomery County and efforts to provide weekend and evening service to seniors across the Region;

## **PROPOSED REGIONAL ACTION PLAN FOCUS AREAS 2012 - 2016**

In 2008, WESTAT made multiple recommendations concerning potential projects and action steps to reach a more robust, coordinated regional human services transportation system. These recommendations can be found beginning on page 35 of the Regional Action Plan: <http://docs.mvrpc.org/hstc/FinalRegionalActionPlan.pdf>.

While much progress has been made to improve service, to make fixed route service more accessible through infrastructure improvements, to improve cross county connections and to upgrade the fleet of specialized vehicles in the Region, less progress has been made on cross-agency and cross-county coordination due to historical, financial and political challenges.

This update provides the opportunity to re-focus both on larger coordination issues and to address specific high-priority issues that are a challenge to the Region. Six specific issues have emerged that since implementation of the original 2008 plan. These issues will require significant attention in the next four years and beyond. These issues are:

1. the increasing demand for dialysis-related transportation and transportation for other repetitive medical treatments such as chemotherapy and physical rehabilitation;
2. the aging of the Region's population and the growing transportation needs of seniors who limit or stop driving;
3. the need for people with disabilities, the elderly and people of low income to be able to access employment, medical, educational and shopping destinations in an efficient manner, including trips that cross jurisdictional boundaries;;
4. the need to complete essential sidewalks, curb cuts and other elements of the pedestrian infrastructure, especially along fixed and flex-route transit lines in order to make transit more accessible and appealing to the target populations;
5. and the growing number of low-income residents who need transportation to jobs, medical appointments and other activities, and the fact that more of these low income individuals are living in suburban and rural settings with limited transportation options.
6. and an overarching emphasis on increased coordination among agencies, funders and users to ensure cost-effective use of the Region's limited transportation assets. This coordination should include operational coordination such as combining clients of various agencies on single vehicles, as well as coordination of functions like maintenance, dispatching and driver training. (see Appendix D)  
Coordination efforts will be encouraged and rewarded in all funding opportunities governed by this plan.

This update encourages coordinated efforts to address these specific high-priority issues, including the establishment of working groups in each issue area. The table below outlines a starting point for working groups in each area.

### Priority Issue Action Plan

Priority	Lead Agency	Potential Partner Agencies	Potential Strategies
Dialysis and other ongoing medical transportation needs (cancer treatment, rehabilitation, etc.)	Regional: MVRPC  County-level: Transit Agencies	<ul style="list-style-type: none"> <li>• Dialysis Centers</li> <li>• GDAHA</li> <li>• Individual Hospitals</li> <li>• Rehabilitation Centers</li> <li>• Human Services Agencies</li> <li>• Senior Centers</li> </ul>	<ul style="list-style-type: none"> <li>• Address transportation issues earlier in the treatment planning process</li> <li>• Consider proximity when assigning patients to treatment.</li> <li>• Increased use of specially-trained volunteer drivers</li> <li>• Establish funding partnership between healthcare partners and transportation providers.</li> <li>• Innovative private-sector services</li> <li>• Technology-assisted ride matching</li> </ul>
Growing transportation needs of senior citizens throughout the Region	MVRPC	<ul style="list-style-type: none"> <li>• Area Agency on Aging Senior Centers</li> <li>• Senior centers</li> <li>• American Automobile Association</li> <li>• AARP</li> <li>• Hospitals</li> <li>• Other healthcare providers</li> </ul>	<ul style="list-style-type: none"> <li>• Encourage “natural network” to help with transportation (family, friends, neighbors)</li> <li>• Increased use of volunteer drivers</li> <li>• Transit education and encouragement programs</li> <li>• Greater emphasis on transportation planning for individuals</li> <li>• Technology-assisted ride matching</li> </ul>
Cross-jurisdictional access issues for all	Transit agencies	<ul style="list-style-type: none"> <li>• Individual jurisdictions</li> </ul>	<ul style="list-style-type: none"> <li>• Transit connections across county lines</li> </ul>

target populations		<ul style="list-style-type: none"> <li>• Human services agencies</li> <li>• MVRPC</li> </ul>	<ul style="list-style-type: none"> <li>• Access agreements (transit agencies and jurisdictions)</li> <li>• Technology-assisted ride matching</li> </ul>
Transit-related infrastructure improvements	Greene CATS and GDRTA	<ul style="list-style-type: none"> <li>• MVRPC</li> <li>• Individual jurisdictions</li> <li>• ACCESS Center and other advocacy groups</li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing identification of high-priority infrastructure improvements</li> <li>• Appropriate use of the GDRTA community grants program, JARC and New Freedom funding and local jurisdiction sidewalk programs.</li> <li>• Enforcement of the MVRPC Complete Streets Policy</li> </ul>
Increasing numbers and geographic disbursement of low-income individuals with transportation needs	Transit agencies	Human service agencies and advocates Job and Family Services Specific employers	<ul style="list-style-type: none"> <li>• Use of JARC funding to increase service</li> <li>• Expanded transit service in all counties</li> <li>• Technology-assisted ride matching</li> </ul>

Figure 10

**Recommended Changes in the JARC, New Freedom and Specialized Transportation Solicitation Process**

Federal regulations require that funding for three programs: Specialized Transportation for the Elderly and Disabled (5310), Job Access Reverse Commute (5316) and New Freedom (5317), be “consistent with a locally developed coordinated transportation plan.” This update provides the opportunity to improve the linkage between those programs and the coordinated plan by:

1. Specifically seeking applications for projects that address the six regional priorities identified above.
2. Revising the project application to award additional points for projects based on how much impact a project is likely to have on one or more of those six priorities.
3. Re-emphasizing the importance of coordination in the application process and reflecting that emphasis in the scoring of projects.
4. Encouraging joint applications involving two or more agencies in addressing regional priorities.

**CONCLUSION**

Much has been accomplished since April 2008 to improve transportation services for people with disabilities, the elderly and people with low incomes in Greene, Miami, Montgomery and northern Warren Counties. However, there are still many challenges, gaps in services and obstacles for non-drivers in the Miami Valley. This update attempts to highlight both the progress that has been made and what needs to be done in the next four years and beyond to improve both mobility options and the coordination of specialized transportation.

Ohio in general, and the Miami Valley in particular face many challenges, including the aging of the population, rapid growth in the need for medically-related transportation, the weak economy and the lack of adequate resources to meet all the transportation needs of the target populations. Due to limits on available funding, we must do a better job of both focusing efforts and coordinating limited resources. This update identifies six priority issues that must be addressed. There are other issues beyond these six that need attention, but if significant progress can be made in these six focus areas, life for the transportation disadvantaged members of the community will improve significantly.

To make progress, regional and county coordination councils and special issue working groups will need to meet regularly and explore new ways to share resources and connect services. Mobility Managers will need to continue to assist clients to find the transportation services that best meet their needs. The JARC and New Freedom application, solicitation and selection process will need to be revised to give priority to projects which address the priorities outlined in this update. Best practice research and better use of new technologies will need to be employed.

Transportation Coordination is an ongoing process that can result in better transportation for people with disabilities, seniors, people of low income and the general public. That is the ultimate goal of this Transit and Human Services transportation Coordination update.

## Appendix A

### Coordination Plan Update – Regional Steering Committee

The following agencies and individuals were invited to participate in the Steering Committee

AARP Ohio	Sanford Holmes
Access Center (The)	Melody Burba
Anton’s Transportation	Anthony Smith
Area Agency on Aging PSA 2	Pat Mayer
C I Lathrem Senior Adult Center	Leander Hall
CareSource Management Group	Kim Gibson
City of Kettering	Ken Collier
Community Action Partnership	Rita Daily
Dialysis Center of Dayton	Tara Cumbow
Goodwill Easter Seals Miami Valley	Michelle Caserta
Greene County Council on Aging	Karen Puterbaugh
Greater Dayton RTA	Mark Donaghy,
Allison Ledford, Michael Perry	
Greene County Department of Developmental Disabilities	John LaRock
Greene County Job & Family Services	Paul Brown
Greene County Mobility Manager	Bryce Bookmiller
Greene County Transit Board (Greene CATS)	Rich Schultze
Kettering Medical Center Network	Kari Mallory
Miami County Council on Aging	Sara Tarzinski
Miami County Department of Job & Family Services	Carol Morgan
Miami County Transit	Regan Conrad
Miami Valley Regional Planning Commission	Bob Steinbach,
Kjirsten Frank	
Montgomery County Job & Family Services	Vary Welch
Preble County Job & Family Services	Becky Sorrell
Troy United Fund	Lucy DiSalvo
United Way of Greene County	Mary Gillis
United Way of the Greater Dayton Area	Sandy Williams
Warren County Transit	Jerry Haddix
Xenia Adult Recreation & Service Center	Judy Baker

## Appendix B

### Agencies with active 5310 vehicles

#### Greene County – Active 5310 Vehicles

Organization	Community	Number of Vehicles	Phone Number
Beavercreek Enrichment Association	Beavercreek	One (1)	(937)-429-3186
Golden Age Senior Citizens Center, Inc.	Xenia	Four (4)	(937) 376-4353
Senior Citizen Alliance of Beavercreek	Beavercreek	One (1)	937) 426-6166
Senior Citizens Association of Metro Fairborn	Fairborn	Two (2)	(937) 878-4141
United Church Homes - Trinity Community of Beavercreek	Beavercreek	One (1)	(937)-426-8481

#### Miami County – Active 5310 Vehicles

Organization	Community	Number of Vehicles	Phone Number
Sunrise Center for Adults, Inc.	Piqua	Two (2)	(937) 778-3680

Montgomery County – Active 5310 Vehicles

Organization	Community	Number of Vehicles	Phone Number
Community Action Partnership of the Greater	Dayton	Two (2)	( 937) 341-5000
Eastway Behavioral Healthcare Corporation	Dayton	Three (3)	937) 496-2000
Goodwill Easter Seals of Miami Valley	Dayton	Two (2)	((937) 222-9872
Hithergreen Senior Center of Centerville-Washington Township	Dayton	One (1)	(937)-435-2415
Kettering Parks Foundation	Kettering	Four (4)	(937) 296-2454
Mary Scott Nursing Center *	Dayton	One (1)	(937) 278-0761
Miami Valley United Methodist Mission Society 1	Dayton	One (1)	(937) 263-3556
Wesley Community Center, Inc. 4 *	Dayton	Five (5)	(937) 263-3556
Vandalia Parks and Recreation	Vandalia	One (1)	(937) 898-1232

## Appendix C

### Summary of JARC New Freedom Allocations 2006-2011

#### JARC – NEW FREEDOM FUNDS REGIONAL ALLOCATION 2006-2011 (includes 10% Administrative)

	5316 - JARC	5317- New Freedom
2006	303,522	174,045
2007	319,945	202,124
2008	346,607	218,340
2009	406,826	251,681
2010	388,973	274,010
2011	388,388	248,286
<b>Total</b>	<b>\$2,154,261</b>	<b>\$1,368,486</b>

#### JARC – NEW FREEDOM FUNDS AVAILABLE FOR SOLICITATION 2006-2011

	Available for Solicitation - 5316 JARC	Available for Solicitation – 5317 New Freedom	Administration (J and NF)
2006	\$273,170	\$156,640-	\$47,756
2007	\$287,950	\$181,911	\$52,206
2008	\$311,946	\$196,506	\$56,494
2009	\$366,143	\$226,512	\$65,850
2010	\$350,075	\$246,609	\$66,298
2011	\$349,549	\$223,457	63,667
<b>Total</b>	<b>\$1,938,833</b>	<b>\$1,231,635</b>	<b>\$240,848</b>

#### JARC – NEW FREEDOM FUNDS AWARDED FY2006-2011

Fund Year	Awarded 5316 JARC	Awarded 5317 New Freedom	PoP Date	Board Approval
2006	\$273,166	\$156,566	5/29/2008	6/5/2008
2007 – 1 <sup>st</sup>	\$287,260	\$108,065	10/30/2008	12/4/2008
2007 – 2 <sup>nd</sup>	- 0 -	\$73,846	3/11/2009	4/16/2009
2008 – 1 <sup>st</sup>	\$151,345	\$42,540	10/14/2009	12/3/2009
2008 – 2 <sup>nd</sup>	\$159,898	\$153,892	4/5/2010	5/6/2010
2009 - 2010	\$716,219	\$473,121	10/19/2010	1/6/2011
2011	\$349,549	\$223,457	12/5/2011	
<b>Total awarded</b>	<b>\$1,937,437</b>	<b>\$1,231,487</b>		

I.

JARC Project Summary by Project Type  
FY2006-FY2011

Mobility Management/Travel Training	Total: \$191,810 # of Projects 3	9 %
Capital: Transit access improvement/ infrastructure (Bus shelters in low-income neighborhoods)	Total: \$57,394 # of projects 3	2.5 %
Operating/Service	Total: \$1,640,086 #of projects 10	77%
Administration/ Project selection	Total: \$215,425 # of projects 3	10%
Capital: Equipment - vehicles	Total: \$36,060 # of projects 1	1.5 %
<b>Total</b>	<b>\$2,140,775</b>	<b>100%</b>

New Freedom Project Summary by Project Type  
FY2006 - FY2011

Mobility Management/Travel Training	Total: \$402,580 # of Projects 8	29%
Capital: Transit access improvement/ infrastructure (sidewalks, curb cuts, bus pads)	Total: \$503,518 # of projects 10	37%
Operating/Service	Total: \$318,510 #of projects 10	23%
Administration/ Project selection	Total: \$136,848 # of projects 4	10%
Capital: Equipment	Total: \$6,819 # of projects 2	1%
<b>Total</b>	<b>\$1,368,275</b>	<b>100%</b>

**APPENDIX D**

**COORDINATION EFFORTS WORKSHEET**

Coordination is cooperation in the delivery of transportation services. Coordination occurs when individuals and organizations work together to expand one or more transportation-related activities. Coordination can be as simple as referrals about transportation choices among several agencies or it can be as complex as a fully consolidated community transportation system serving human service agencies. Below is a list of activities in which your organization may participate. Please mark all appropriate categories for which your agency provides the services listed below to other agencies. Backup documentation from the agencies purchasing or receiving the services must be provided.

	<b>Trips</b>	<b>Scheduling</b>	<b>Receive Referrals</b>	<b>Backup Service*</b>	<b>Training</b>	<b>Maintenance</b>	<b>Procurement</b>	<b>Storage Facilities</b>	<b>Insurance</b>
<b>Senior Transportation Services</b>									
Title IIIB Older Americans	<input type="checkbox"/>		<input type="checkbox"/>						
Passport and Caregiver	<input type="checkbox"/>		<input type="checkbox"/>						
<b>Disabled Transportation Services</b>									
DD clients	<input type="checkbox"/>								
Mental Health Clients	<input type="checkbox"/>								
Other	<input type="checkbox"/>								
<b>Government Entities</b>									
Medicaid Transportation	<input type="checkbox"/>		<input type="checkbox"/>						
Job Access Reverse Commute	<input type="checkbox"/>		<input type="checkbox"/>						
Local Public Transit System	<input type="checkbox"/>	<input type="checkbox"/>							
City, County	<input type="checkbox"/>	<input type="checkbox"/>							
Law Enforcement	<input type="checkbox"/>								
Emergency Services	<input type="checkbox"/>								
<b>Private Entities</b>									
Senior Residential Facilities	<input type="checkbox"/>			<input type="checkbox"/>					
Disabled Residential Facilities	<input type="checkbox"/>			<input type="checkbox"/>					
Veterans Service Organizations	<input type="checkbox"/>			<input type="checkbox"/>					
Medical Facilities	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>					
Adult Day Care Facilities	<input type="checkbox"/>			<input type="checkbox"/>					
Vocational Rehab Services	<input type="checkbox"/>		<input type="checkbox"/>						
<b>Other Organizations</b>									
	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>					

This page is a worksheet to help agencies identify coordination opportunities. Do not return with the Proposal.