

CHAPTER 3

Assessment of Transportation Needs and Gaps

Assessment of Community Support for Transit

Transportation options in each county of the Greater Region are offered through multiple providers and receive varying levels of support from the general public. All counties in the region receive fiscal support for transit from one or more of the following federal/local government agencies:

- Federal Transit Administration (FTA) 5311 (Rural Area Public Transportation)
- FTA 5307 (Urban Area Public Transportation)
- FTA 5310 (Enhanced Mobility of Seniors and Individuals with Disabilities)
- County Commissioners
- City Officials

Transit providers also receive financial support from community agencies including:

- Job and Family Services
- Area Agency on Aging
- Community Foundations
- Grant Monies
- Local Economic Development Partnerships
- Chamber of Commerce

As a requirement for the federal funding received, all counties in the region have a locally developed Coordinated Public Transit-Human Services Transportation Plan. The GRMI Coordinated Plan utilized the work of the local Mobility Managers and agencies that established these local plans as a starting point to review and develop the transit needs and challenges for the region. Each involved outreach, surveying, and stakeholder input, and they incorporated their own local level needs and gaps assessments. In addition to the local outreach, MVRPC as a Regional Coordinating Agency (RCA) held additional stakeholder interviews, hosted public meetings, and rode along with transit users to directly observe and discuss the regional level needs.

According to FTA guidelines, community support is essential and required for any coordinated plan to be approved and adopted. The planning process must include participation by seniors, individuals with disabilities, representatives of public, private, and nonprofit transportation and human services providers, and other members of the general public. Stakeholders should have opportunities to be actively involved in the decision-making process at key decision points, including, but not limited to, development and approval of the proposed coordinated plan.

Individuals are encouraged to attend local planning committees, public participation meetings, and focus groups. Notices or fliers in centers of community activity, newspaper or radio announcements, email lists, website postings, and invitation letters to other government

agencies transportation providers, human services providers, and advocacy groups are strategies for outreach. Per FTA guidance, groups and organizations that are included in planning meetings include:

Transportation partners:

- Area transportation planning agencies, including Metropolitan Planning Organizations (MPOs), rural planning organizations (RPOs), regional councils, associations of governments, state departments of transportation, and local governments;
- Public transportation providers, including American Disability Association (ADA) paratransit providers and agencies administering the projects funded under FTA urbanized and rural programs;
- Private transportation providers, including private transportation brokers, taxi operators, van-pool providers, school transportation operators, and intercity bus operators;
- Nonprofit transportation providers, including volunteer programs;
- Past or current organizations funded under the Section 5310, JARC, and/or the New Freedom programs; and
- Human service agencies funding, operating, and/or providing access to transportation services.

Passengers and advocates:

- Existing and potential riders, including both general and targeted population passengers (individuals with disabilities and seniors);
- Protection and advocacy organizations;
- Representatives from independent living centers; and
- Advocacy organizations working on behalf of targeted populations.
- Human Service partners:
- Agencies that administer health, employment, or other support programs for targeted populations. Examples of such agencies include but are not limited, to departments of social/human services, employment one-stop services, vocational rehabilitation, workforce investment boards, Medicaid, community action programs (CAP), Area Agency on Aging (AAA), Developmental Disability Council, community services board;
- Nonprofit human service provider organizations that serve the targeted populations;

Job training and placement agencies;

- Housing agencies;
- Healthcare facilities; and
- Mental health agencies.

Other:

- Security and emergency management agencies;
- Tribes and tribal representatives;
- Economic development organizations;
- Faith-based and community-based organizations;
- Representatives of the business community (e.g., employers);
- Appropriate local or state officials and elected officials;
- School districts; and
- Policy analysts or experts.

Of these groups, direct support and input for the GRMI Coordinated Plan came from transportation providers, passengers and advocates including seniors and individuals with disabilities, human service partners, the local Mobility Managers and ODOT Office of Transit. Several local elected officials and business community representatives also gave input and expressed their support for the outcomes of the plan process. The other agencies particularly Faith-based organizations and the business community including health care companies represent both challenges and opportunities for further collaboration.

Support for public transportation is often limited by people's own lived experiences with commuting in single occupancy vehicles and lack of experience with shared ride services. At the agency and societal levels, collaboration, education, and information sharing is a prominent need to further the work of transportation coordination. These needs translate directly into several of the GRMI Plan goals.

Public Meetings and Focus Groups

A variety of agencies hosted and facilitated a total of 35 local meetings and focus groups as seen in **Table 9: Public Participation and Focus Group Meetings Held in Each County** to discuss the unmet transportation needs and gaps in mobility and transportation. Of those meetings, 219 people participated, 28 identified as a senior, and 25 identified as an individual with a disability. More information about the meetings is available upon request.

During the meetings, lead agencies presented highlights of past coordinated transportation in the region. The planning committees discussed past activities that have helped to address some of the unmet transportation needs and gaps in services for the area.

Following the initial presentations, stakeholders were asked to review the gaps in transportation services and needs from the individual county level coordinated plans to identify new needs or transportation gaps that may have been overcome due to collaborative work in the county. The focus of the discussion was primarily transportation for older adults, individuals with disabilities, and people with low incomes, however additional mobility options for the general public were examined.

Table 9: Public Participation and Focus Group Meetings Held in Each County

County	Lead Agency	Total Meetings	Total Participants	Identified as Senior	Identified as Disabled
Champaign	Catholic Social Services of the Miami Valley (CSSMV)	4	40	6	6
Clark	Clark County-Springfield TCC	6	32	4	3
Darke	CSSMV and SafeHaven	4	42	2	10
MPO (Greene, Miami, Montgomery)	Miami Valley Regional Planning Commission	13	38	7	2
Preble	Preble County Council on Aging	3	25	5	3
Shelby	CSSMV	3	18	2	0
Regional	MVRPC	2	24	2	1
TOTAL		35	219	28	25

Source: MVRPC

Participants in the various meetings discussed the following six mobility issues to achieve, preserve, avoid, or eliminate through coordination:

- Access to Medical and Wellness Transportation
- Access to Health, Food, and Wellness Transportation
- Employment Transportation
- Seniors and Individuals with Mobility Limitations
- Funding Limitations/Issues
- Cross County Transportation

As goals were developed for the GRMI Plan, the input users gave regarding these topics was used to create strategies and action steps in order to address the resources necessary, such as additional fleet or expanded transit hours, for transportation providers to overcome these mobility challenges.

The GRMI planning committee compiled all of the focus group data at the individual county level and reviewed it for commonalities to help establish regional unmet needs and gaps in service. The results for the common unmet needs across the region are identified in **Table 10: Identified Regional Unmet Needs**. Additional information regarding the individual county level unmet needs can be found in **Appendix D: Summary of Unmet Needs**.

Table 10: Identified Regional Unmet Needs

Regional Unmet Needs
Lack of funding for operations
Ability to handle last minute calls
Crossing jurisdictional boundaries
Ability to efficiently replace aging vehicles

Source: MVRPC

Surveys

In addition to public meetings and focus groups, lead agencies overseeing the update of the local coordinated plans, distributed surveys to the general public to better understand transportation needs in the Region. Surveys can be an effective way to engage those who may not be able to attend public meetings, especially seniors and individuals with disabilities. The surveys were disseminated in a variety of ways including mail-outs, online postings via social media and transit agency web pages, and hard copies were made available at various human services agencies and transit hubs.


Throughout the eight-county Region, over 1,600 individuals participated in surveys at the county or MPO level, 37% identified as a senior, and 26% identified as an individual with a disability as shown in **Table 11: Survey Responses**. This information can be particularly important to evaluating the survey results as these populations combined account for more than 60% of the potential ridership throughout the region. A more detailed description of the issues discussed in each county are presented in the narrative within the following pages. Although different versions of surveys were used in each county, all focused on the following transportation issues. County survey templates can be reviewed upon request.


- Commonly visited destination
- Possible changes to make transportation more appealing
- Purpose for using transportation
- Type of transportation used in last year
- Unmet needs
- Availability of transportation information


Table 11: Survey Responses

County	Total Respondents	Identified as Senior	Identified as Disabled
Champaign	79	68%	41%
Clark	1,036	44%	15%
Darke	92	17%	23%
MPO (Greene, Miami, Montgomery)	300	23%	26%
Preble	95	34%	22%
Shelby	86	38%	31%
TOTAL / AVERAGE	1,688	37%	26%

Source: MVRPC

 In Champaign County, of the 79 surveys returned, 33% of the individuals said they currently drive, while 37% said they no longer drive. However, only 16% of the respondents indicated they own a vehicle. Thirty-eight percent of the respondents indicated they rely on family and/or friends for transportation and 38% indicated they take public transit for appointments. Transportation availability on nights and weekends, as well as the ability to schedule last minute trips, are the largest needs expressed in the surveys. There is also a need for transportation options traveling outside of the county.

 In Clark County, surveys reflect that 89% of the general population utilizes their personal vehicle as their primary mode of transportation; riding with a friend was the second highest mode at 43%. Of the 15% who identified as an individual with a disability in need of accessible transportation, 75% responded that they do not own a vehicle. Approximately half of the respondents said they are familiar with the public transportation options in Springfield, yet the majority (76%) of respondents replied that they have never utilized public transportation. Furthermore, 72% responded that they were not familiar with local human service transportation options; of those who were aware, 40% do not qualify for the services. The top needs identified for transportation were shopping (88%), medical appointments (85%), to visit friends/family (76%), dining (67%), and recreational activities (63%). These results indicate that the majority of rides needed are for recreational/social/leisure activities.

 Of the 92 respondents in Darke County, the majority of individuals (75%) reported that they currently drive while only 60% responded that they own a vehicle. Furthermore, 29% of individuals indicated they rely on family/friends for transportation and 11% reported they rely on public transit. Transportation availability during nights, weekends, and outside the city limits of Greenville were identified as the largest needs in the county. There is also a need for county-to-county transportation as well as options for individuals with low-income.



In the MPO (Greene, Miami, and Montgomery counties) covered by MVRPC, more than half of the 300 people who participated in the survey indicated that they have transportation for medical/dental, shopping, employment, recreation, and faith-based activities most of the time. However, about half of respondents also indicated that they sometimes or always lack access to destinations outside of their county of residence. Furthermore, 30% or more of survey respondents indicated they sometimes or always lack transportation to, medical/dental, faith-based activities, government services shopping, human services or recreation. Less than half of the surveyed public reported they “always” have the transportation they need, and that percentage dips significantly for college/university trips, child care access, senior center and human service agency appointments, and trips going outside the counties. Transportation planning programs administered by MVRPC are currently set up to address the needs for access to senior centers and human service agency appointments, but not the need for child care access, college/university, or trips going outside the county (other than van-pools).

There are various challenges to getting a ride for anyone who did not “always” have access to transportation options. Challenges cited by survey and public input meeting participants range from lack of knowledge about the transportation resources that are available, to affordability or accessibility. In some cases, the reason for not having transportation when they needed it were related to the hours of the day when the ride was needed and the lack of available transportation options during those hours (i.e., needing a ride late at night or early in the morning). In other situations, the challenges were related to the transportation provider not having the capacity to provide the trip when it was needed, or the cost of the trip being prohibitive. Still, other feedback pertained to individuals not using the transportation services that are available because they were fearful of using the available services.



In Preble County, the majority of survey respondents (87%) reported that their main mode of transportation was driving themselves or riding with friends/family. There is no public transportation. However, 71% percent of survey respondents reported that they would use it if it was available when they needed it and had no other option. The Preble County Council on Aging (PCCOA) provides another transportation option for county residents. Those who qualify for this service (40%) utilized it while 27% did not qualify. When transportation was available, 69% of individuals used it for medical appointments and 49% used it for shopping, grocery, and/or pharmacy trips. According to those who completed the survey, the top three unmet needs were public transportation, education of transportation services, and the availability of immediate rides. Those who do seek out transportation information tend to call the provider directly (41%), access information via websites (25%), or get referrals from community organizations such as churches or the senior center (18%).



In Shelby County, of the 86 surveys returned, 42% of individuals reported that they currently drive while 58% reported that they do not. Forty-one percent of individuals also reported that they utilized a personal vehicle, while 72% rely on friends/family. Furthermore, 45% reported that they relied on public transit. Respondents expressed that the biggest need is for extended transportation option including availability on nights, weekends, and holidays. They also reported a need for transportation to appointments outside of the county.

The data from these surveys and focus groups were further utilized during the GRMI planning process to establish a SWOT Analysis, develop regional goals and determine priorities for transit providers. This work took place over a period of eight months with the GRMI Planning Committee and was further refined by MVRPC to begin the draft of the Greater Region Transportation Coordination Plan. The public participation process to complete this effort can be reviewed in an accompany document to the plan, GRMI Public Participation.

Furthermore, steps were taken to refine the plan and goals to ensure there was clear alignment with ODOT's vision while still retaining the voice and identity of each individual county. As the RCA, MVRPC worked with Mobility Managers, transit providers, and additional stakeholders to make these adjustments. Changes were presented to the GRMI Council for discussion and to ensure the document accurately reflected the region.

