

Human Services Transportation Plan



"INCREASING INTERCONNECTIVITY THROUGH MOBILITY AND ACCESS"

REGION 7

**Cass, Christian, Logan, Mason, Menard, Morgan,
Sangamon and Scott Counties**

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This Plan was produced for the counties of Cass, Christian, Logan, Mason, Menard, Morgan, Sangamon and Scott, with assistance from various human service agencies, transportation providers, local elected officials and the general public.

A Component of our Area's Regional Vision

A Program of the Western Illinois Regional Council (WIRC)

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EXECUTIVE SUMMARY

There was a time in history when people of the United States had a variety of options when deciding how to travel from one place to another. People often walked on sidewalks, rode bicycles, hopped a train or waited for a bus to take them to their places of employment, medical appointments or simply to do their day-to-day activities. In the years post World War II, the dependence on the automobile changed our transportation landscape and our lifestyles in the system we know today. As people became more accustomed to traveling in their personal automobiles, the demand for more government support and funding to improve our interstates and roads increased. In addition, our once heavily utilized public transportation systems began to deteriorate with lack of ridership and lack of financial support.

In more recent years, the importance for multi-modal transportation has been at the forefront of many initiatives from rebuilding the economy to protecting our environment. The use of trucks and automobiles as our primary source of transporting goods, services and people has proven to be a very costly facility. As gas prices, cost of insurance and traffic congestion increase, people are aware of the need to go back to alternative means of transportation.

Public transportation in the United States has not ceased to exist in all forms. Many agencies have transportation services embedded in the core functions of their organizations. Many of these agencies are in the health and human services field and their mission is to assist certain populations in their day-to-day needs. This could include providing a ride to the senior center for an elderly person, taking a person with a disability to a medical appointment, or taking a cancer patient to radiation or chemotherapy treatments. There are other organizations that have developed solely to provide transportation and their functions may include transporting people to and from work, assistance with after school sports leagues, as well as human service related transportation. All of these organizations have found a way to provide a service, which was once very prevalent in our country and is just as needed now for a variety of populations as it was back then.

The US Government Accounting Office, in a Report to Congress in June 2003, identified sixty-two federal programs that fund transportation. The Department of Health and Human Services has twenty-three, the Department of Labor has fifteen, the Department of Education has eight, the Department of Transportation has six and a total of ten in other agencies. Approximately ten of these programs fund transportation in Region 7. The Department of Health and Human Services and the Department of Transportation have been working together since the mid-1980's to promote increased coordinated services.

New Federal Transit Administration (FTA) guidelines require all human service related transportation providers to submit a locally developed transportation coordination plan in order to be eligible for federal funding. This new requirement has given transportation providers the opportunity to work together for the common goal of providing transportation to the transit dependent.

SECTION 1: INTRODUCTION AND PURPOSE OF THE PLAN

ROLE OF THE PLAN

On February 24, 2004, President Bush signed Executive Order 13330 on Human Services Transportation Coordination that directed multiple federal departments and agencies to work together to ensure that transportation services are seamless, comprehensive and accessible. The goal is to reduce duplication among federally-funded human service transportation services, increase the efficient delivery of such services and expand transportation access for individuals with disabilities, older adults and persons with low-incomes within their own communities.

In conjunction with Executive Order 13330, in August of 2005 Congress passed the Safe, Accountable, Flexible and Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU), reauthorizing the surface transportation act TEA 21 (the Transportation Equity Act for the 21st century). SAFETEA-LU guarantees \$244.1 billion in funding for highways, highway safety and public transportation. SAFETEA-LU represents the largest surface transportation investment in our nation's history.

The Intermodal Surface Transportation Efficiency Act of 1991 (ISTEA) and the Transportation Equity Act for the 21st Century (TEA-21) met the nation's changing transportation needs during the term of their legislation. SAFETEA-LU builds on this foundation by supplying funds and building a framework for investments needed to maintain and grow our transportation infrastructure. SAFETEA-LU promotes efficient and effective federal surface transportation programs by focusing on transportation issues of national significance, while giving state and local transportation decision-makers' flexibility for solving transportation problems in their communities.

Per the reauthorization of transportation funding under the federal transportation act of SAFETEA-LU, transit-related projects selected for funding under the following programs:

- Section 5310 Formula Program for Elderly Persons and Persons with Disabilities,
- Section 5316 Job Access and Reverse Commute (JARC), and
- Section 5317 New Freedom Program,

must be "derived from a locally developed, coordinated public transit-human services transportation plan (HSTP)" that must be "developed through a process that includes representatives of public, private and non-profit transportation and human services providers, and participation by members of the public." These federal programs and projects derived for them must be a part of a HSTP that addresses the comprehensive mobility needs of a community.

While the plan is only required in communities seeking funding under one or more of the three specified FTA programs, a HSTP should also incorporate activities offered under other programs sponsored by Federal, State and local agencies to greatly strengthen its impact.

Transportation projects receiving funds through 5316 and 5317 federal programs will be competitively selected at the local level by a Regional Transportation Committee (RTC) and at the state level by a State Oversight Committee (SOC). The SOC will select from projects that are recommended by the RTC for funding consideration.

SAFETEA-LU Requirements: Federal Transit Administration (FTA) Programs

Elderly Individuals and Individuals with Disabilities (Section 5310)

The Section 5310 program was established in 1975 as a discretionary capital assistance program. In cases where public transit was inadequate or inappropriate, the program awarded grants to private non-profit organizations to serve the transportation needs of elderly persons and persons with disabilities. FTA (then the Urban Mass Transportation Administration, UMTA) apportioned the funds among the States by formula for distribution to local agencies, a practice made a statutory requirement by the Intermodal Surface Transportation Efficiency Act (ISTEA). In the early years of the program, many of the sub recipient non-profit agencies used the vehicles primarily for transportation of their own clients. Funding for the Section 16(b)(2) program, as it was then known, ranged between \$20-35 million annually until the passage of ISTEA in 1992, when it increased to the \$50-60 million range.

ISTEA also introduced the eligibility of public agencies under limited circumstances to facilitate and encourage the coordination of human service transportation. Increasingly, FTA guidance has encouraged or required coordination of the program with other federal human service transportation programs.

In lieu of purchasing vehicles, acquisition of service in order to promote use of private sector providers and coordination with other human service agencies and public transit providers was made an eligible expense under ISTEA. Other provisions of ISTEA introduced the ability to transfer flexible funds to the program from certain highway programs and the flexibility to transfer funds from the Section 5310 program to the rural and urban formula programs.

The goal of the Section 5310 program is to improve mobility for elderly individuals and individuals with special needs throughout the country. Toward this goal, FTA provides financial assistance for transportation services planned, designed and carried out to meet the special transportation needs in all areas - urbanized, small urban and rural. The program requires coordination with other federally assisted programs and services in order to make the most efficient use of federal resources.

Federal grant money can be designated to a local sub recipient in the form of a private non-profit organization, if public transportation services are unavailable, insufficient or inappropriate; or a governmental authority that is approved by the State to coordinate services for elderly individuals and individuals with disabilities or certifies that there are no non-profit organizations readily available in the area to provide public transportation services.

Funds for the Section 5310 program are available for capital expenses as defined in Section 5302(a)(1) to support the provision of transportation services to meet the special needs of elderly persons and persons with disabilities.

Job Access and Reverse Commute (JARC) (Section 5316)

The Job Access and Reverse Commute (JARC) program was established to serve welfare recipients and low-income families, helping individuals successfully transition from welfare to work and reach needed employment support services such as childcare and job training activities. JARC was established as part of the Transportation Equity Act for the 21st Century (TEA-21),

passed in 1998, to address the transportation challenges faced by welfare recipients and low-income persons seeking to get and keep jobs.

With the passage of SAFETEA-LU, JARC funding is allocated by a formula to States for areas with populations below 200,000 persons, and to designated recipients for areas with populations of 200,000 persons and above. The formula is based on the number of eligible low-income and welfare recipients in urbanized and rural areas. The formula-based program is intended to provide an equitable funding distribution to States and communities as well as stable and reliable funding in order to implement locally developed, coordinated public transit-human services transportation plans. FTA continues to provide maximum flexibility to communities in designing plans and projects to meet the transportation needs of low-income individuals and welfare recipients.

The goal of the JARC program is to improve access to transportation services to employment and employment related activities for welfare recipients and eligible low-income individuals throughout the country. Toward this goal, FTA provides financial assistance for transportation services planned, designed, and carried out to meet the transportation needs of eligible low-income individuals in all areas - urbanized, small urban, and rural. The program requires coordination of Federal assistance programs and services in order to make the most efficient use of Federal resources.

In non urbanized areas or small urban areas under 200,000 in population, the designated recipient is the State agency designated by the chief executive officer of a State to receive and apportion amounts under JARC that are attributable to the State for small urbanized and non urbanized areas. A subrecipient may be a local government authority, non-profit organization, or operator of public transportation services that receives a grant under JARC indirectly through a recipient. Funds are available for capital, planning, and operating expenses that support the development and maintenance of transportation services designed to transport low-income individuals to and from jobs and activities related to their employment.

The Section 5316 program was established to serve welfare recipients and low-income families, helping individuals successfully transition from welfare to work and reach needed employment support services such as childcare and job training activities. JARC was established as part of the Transportation Equity Act for the 21st Century (TEA-21), passed in 1998, to address the transportation challenges faced by welfare recipients and low-income persons seeking to get and keep jobs.

New Freedom Program (Section 5317)

The New Freedom Program is a new program authorized in SAFETEA-LU to support new public transportation services and public transportation alternatives beyond those required by the Americans with Disabilities Act (ADA) of 1990.

Individuals who are transportation-disadvantaged face different challenges in accessing services depending on whether they live in urban, rural or suburban areas. The geographic dispersion of transportation-disadvantaged populations also creates challenges for human service programs hoping to deliver transportation for their passengers.

The President has included funds for the New Freedom program in the annual budget request to Congress since FFY 2003; however, it was not until the enactment of SAFETEA-LU that Congress authorized funding. Funding was first appropriated for the transportation provision in FFY 2006. The New Freedom program is intended to fill the gaps between human service and public transportation services previously available and to facilitate the integration of individuals with disabilities into the workforce and full participation in the community.

The New Freedom formula grant program aims to provide additional tools to overcome existing barriers facing Americans with disabilities seeking integration into the work force and full participation in society. Lack of adequate transportation is a primary barrier to work for individuals with disabilities. The 2000 Census showed that only 60% of people between the ages of 16 and 64 with disabilities are employed. The New Freedom formula grant program seeks to expand the transportation mobility options available to persons with disabilities beyond the requirements of the ADA.

In non-urbanized areas or small urban areas under 200,000 in population, the designated recipient is the state agency designated by the chief executive officer of a state to receive and apportion amounts under New Freedom that are attributable to the state for small urbanized and non-urbanized areas. A subrecipient may be a local governmental authority, non-profit organization or operator of public transportation services that receives a grant under the New Freedom program indirectly through a recipient.

The New Freedom program provides funding for capital and operating programs and services that go *above and beyond* what is required by the transportation section of the ADA. Programs must also be designed to assist individuals with disabilities with accessing transportation services, including transportation to and from jobs and employment support services.

The charts below provide the annual amounts for JARC and New Freedom funding in Illinois by population category.

<u>New Freedom Program Amounts in SAFETEA-LU</u>					
	FFY 06	FFY 07	FFY 08	FFY 09	Total FFY06 - 09
<u>Large Urbanized Areas</u> (> 200,000 population)	\$ 3,322,952	\$ 3,533,295	\$ 3,756,952	\$ 3,994,768	\$ 14,607,967
<u>Small Urbanized and Rural</u> (<200,000 population)	\$ 814,611	\$ 866,176	\$ 921,005	\$ 979,304	\$ 3,581,096

<u>Job Access Reverse Commute Program (JARC) Amounts in SAFETEA-LU</u>					
	FFY 06	FFY 07	FFY 08	FFY 09	Total FFY06 - 09
<u>Large Urbanized Areas</u> (> 200,000 population)	\$ 4,841,922	\$ 5,148,416	\$ 5,474,310	\$ 5,820,834	\$ 21,285,482
<u>Small Urbanized and Rural</u> (<200,000 population)	\$ 1,256,845	\$ 1,336,403	\$ 1,420,998	\$ 1,510,947	\$ 5,525,193

*Amounts for FFY 07 - FFY 09 are based on an average growth of 6.3% per year for both the JARC and NF program funding.

Required Elements of the HSTP:

Projects competitively selected for funding shall be derived from a HSTP that minimally includes the following elements at a level consistent with available resources:

- An assessment of available services that identifies current transportation providers (public, private, and non-profit);
- An assessment of transportation needs for individuals with disabilities, older adults and people with low incomes;
- Strategies, activities and/or projects to address the identified gaps between current services and needs, as well as opportunities to improve efficiencies in service delivery; and
- Priorities for implementation based on resources, time and feasibility for implementing specific strategies and/or activities identified.

The Region 7 HSTP is designed to outline:

- A tool for human service agencies and transportation providers to identify coordination opportunities;
- A context for continuing and broadening communication between human service agencies and transportation providers;
- A comprehensive listing of transportation priorities.

The Region 7 HSTP has three major components:

Background on special needs transportation coordination in the region and a demographic profile of each county within the region.

A view of **regional mobility today**, analyzing transportation resources, regional origins and destinations, existing transportation services, needs, gaps and what is currently happening to coordinate services.

A **vision of mobility in the future**, examining anticipated demand for service, and laying out strategic goals and objectives for the next five years.

REGIONAL FRAMEWORK

In the fall of 2006, the Illinois Department of Transportation - Division of Public and Intermodal Transportation (IDOT-DPIT) embarked on the initiative to develop the State of Illinois HSTP. One of the requirements of the HSTP is to divide the state into regions. In order to determine the best approach of dividing the state into regions, IDOT-DPIT conducted a series of public outreach meetings. It was determined that the best way to divide the state into regions was to not fragment existing or potential transit systems. Total population per county was also considered when determining regional boundaries.

Through the public process, IDOT-DPIT defined 11 planning regions throughout the state that will be used as a framework for developing the HSTP plans. The completed HSTP plans will be sent to the state for review and will then be implemented into a statewide HSTP.

To implement the HSTP regional plans, IDOT-DPIT and the Illinois Association of Regional Councils (ILARC) formed a partnership under which the state association's member regional planning commissions contracted to house Regional Transportation Planning Coordinators. Once the prospect of hiring Regional Transportation Planning Coordinators was approved, IDOT-DPIT sought to place five full-time and two part-time equivalent Regional Transportation Planning Coordinators, based on ILARC recommendations.

IDOT-DPIT contracted with the Western Illinois Regional Council (WIRC) to carry out planning and programming requirements for Regions 4 and 7. For this plan, the WIRC is the designated rural planning organization responsible for coordinated transportation planning in Region 7, which includes the counties of Cass, Christian, Logan, Mason, Menard, Morgan, Sangamon and Scott.

The contract, on behalf of the Illinois counties mentioned above and comprising the geographic area of Region 7, referred to the purpose of creating a HSTP in fulfillment of the provisions of SAFETEA-LU, and for prioritizing and recommending projects for federal transit funds to IDOT-DPIT.

The contract focuses on three main objectives:

SAFETEA-LU requires the establishment of a locally-developed, coordinated public transit human services transportation plan for projects that receive funding through Section 5310 (Elderly and Individuals with Disabilities), Section 5316 (Job Access Reverse Commute) and Section 5317 (New Freedom); and

SAFETEA-LU requires the development of a HSTP to include involvement of a Regional Transportation Committee (RTC) with representation from public, private and nonprofit transportation and human service providers, and participation by the public; and

IDOT has designated the WIRC to assist the RTC in carrying out planning and programming requirements for Region 7 in cooperation with the state. WIRC has entered into a contract with IDOT for transit planning purposes.

HSTP Regions: Downstate Area

The Human Service Transportation Plan (HSTP)



- Region**
- One*
 - Two*
 - Three*
 - Four*
 - Five*
 - Six*
 - Seven*
 - Eight*
 - Nine*
 - Ten*
 - Eleven*
 - Urbanized Area*



November 2006:
IDOT Division of Public and
Intermodal Transportation

REGIONAL TRANSPORTATION COMMITTEE (RTC) MAKE-UP

The HSTP is required to be developed and adopted through a comprehensive participation process that includes representatives from public, private and non-profit transportation and human service organizations, as well as the general public, regional planning agencies and public officials that represent counties within Region 7.

IDOT-DPIT developed a process to establish a Regional Transportation Committee (RTC) to help guide the planning process. All of the regions defined within the Illinois HSTP will use the same guidelines when forming their respective RTC. This uniformity will help bring together plans being conducted throughout the state, while allowing for unique solutions to the similar and not so similar needs and gaps found in various regions across the state.

The WIRC began developing a RTC in August of 2007. Approximately 200 individuals, organizations and stakeholders were contacted by mail and requested to participate in the development of the HSTP. Agencies contacted were those that represent or provide service to individuals who have public or specialized transportation service needs, including older adults, individuals with disabilities and low income individuals, local businesses, county boards, economic development corporations, University of Illinois Extension offices, local schools and universities, public and private transportation providers and the general public. Mailings were followed up by e-mails and phone calls.

The initial list of proposed RTC members began as a total of 60 people. However, the RTC for Region 7 was predetermined to hold a total of 25 members. The issue of having too many people on the RTC was solved by inviting all interested parties to the “kick-off” meeting, where participants were grouped by county and left to decide amongst themselves as to who would be the best representative per county and target population to serve on the RTC. The following table shows the RTC make-up for Region 7:

County	Local Elected Official	Transportation Operator	Human Service Agency	Urban Representative
Cass	David Parish (1)*	Patricia Brewer (2)	Julie Hubbard (2)	
Christian			Julie Hubbard (2)	
Logan	Michael McIntosh (1)	Angela Stoltzenburg (5)	Mark Hilliard (5)	
Mason	Steve Waterworth (1)	Curt Jibben (5)	Devin White (3)	
Menard	Anne Smith (4)		Dara Worthington (2)	
Morgan	Dick Rawlings (1)	Jean Jumper (5)	Larry Whewell (3) Dan Little (5)	
Sangamon	Linda Wheeland (1)	Kate Downing (2)	Karen Schainker (2)	
Springfield		Linda Tisdale (5)		Dale Schultz (1)
Scott		Jean Jumper (5)	Donna Mitchell (2)	
Number of Members	6	6	8	1
Total	21			
Total Possible	25			

*The numbers in parentheses refer to target populations and are identified below.

- (1) Represents General Public
- (2) Represents Older Adults 65+
- (3) Represents Individuals with Disabilities
- (4) Represents Person with Low Incomes
- (5) Represents All Populations Identified Above

Membership and Affiliation

David Parrish	Board Chairman, Cass County
Patricia Brewer	Director, Cass County Council on Aging
Julie Hubbard	Executive Director, Area Agency on Aging for Lincolnland
Michael McIntosh	Board Member, Logan County
Steve Waterworth	Mason County Representative
Angela Stolzenburg	Executive Director, Central Illinois Economic Development Corp.
Mark Hilliard	Administrator, Logan County Health Department
Dick Rawlings	County Commissioner, Morgan County
Jean Jumper	Director, West Central Mass Transit District
Larry Whewell	Director of Administrative & Outreach Marketing, Jacksonville Area Center for Independent Living (JACIL)
Dan Little	Director, Morgan/Scott/Cass Community Services
Kate Downing	Senior Transport, Senior Services of Central Illinois
Karen Schainker	Executive Director, Senior Services of Central Illinois
Curt Jibben	Administrator, Mason County Health Department
Devin White	Independent Living Specialist, JACIL
Anne Smith	Director, Menard County Housing Authority
Dara Worthington	Director, Menard County Senior Transport
Linda Tisdale	Executive Director, Springfield Mass Transit District
Dale Schultz	Transportation Planner, Springfield Sangamon County Regional Planning Commission
Donna Mitchell	Field Rep, Area Agency on Aging for Lincolnland
Linda Wheeland	Planner, Springfield Sangamon County Regional Planning Commission

KEY RTC MILESTONES

First Meeting: October 9, 2007, Senior Services of Central Illinois, 701 West Mason, Springfield

Purpose: To bring a comprehensive group of transportation service providers and consumers together in an attempt to begin the planning process toward creating a HSTP.

Agenda: Introduction of the HSTP

- Discussion of Job Access Reverse Commute (JARC) and New Freedom Programs
- Purpose and Responsibility of the Regional Transportation Committee (RTC)
- Nomination and Selection of RTC Members
- Establish RTC Calendar

Key Findings: It was pointed out that there is a need for a HSTP at the state and regional level. The group also discussed that there should be a connection between members of the RTC and local transportation committees and that the make-up of the committee should focus on the populations affected more than on counties specifically.

Second Meeting: October 24, 2007, Senior Services of Central Illinois, Springfield

Purpose: To gather input from committee members on existing rural transportation needs and to begin developing an inventory of existing transportation services.

Agenda: Develop an Inventory of Existing Transportation Services
Discuss Current Transportation Needs
Share Updated JARC and New Freedom Program Information
Designation of Convener and Co-Convener

Key Findings:

- For Morgan, Scott and Brown Counties, a need exists for extending weekend hours for dialysis, as well as enhancing senior bus service. There are employees from Morgan and Scott Counties needing transportation to and from Cass and Brown counties for employment opportunities, mainly Excel and DOT Foods.
- In Mason County there is a lack of the resources needed to foster a program that meets the daily transportation needs of the general public and the elderly for daily living activities such as grocery shopping. There is a need to transport dialysis patients from Mason County to outlying counties. There is a lack of service availability for populations other than seniors.
- In Springfield/Sangamon County there is a need for extending and sustaining night service in the urban area. There is a need to expand and meet the growing demand of urban clients needing access to paratransit services, as well as dialysis. College students need access to public transportation. There is a need to bring rural residents to the urban area for medical purposes.
- There is a need to transport clients from Logan to Mason and back for dialysis. There is a need to transport low-income individuals to jobs. The only service that provides this opportunity is through CIEDC, but only for those individuals 60 and over. There is no service for anyone else under that age range. There is a need for Logan County residents to get to Springfield for various reasons. Logan has two colleges and no public transportation access for students. There is a need to transport persons to mental and medical health appointments.
- There is a huge need to get people from Menard County to Springfield for employment, health care (especially dialysis), education, shopping and recreation, especially for those who are low income or senior citizens. Dara expressed concern about the unemployment

rate in Menard County due to the fact that residents in Menard County have a disadvantage for accessing opportunities.

- In addition to medical and other essential transport, the senior population in all of Region 7 needs access to the simple life activities such as shopping and recreating,. Public transportation cannot meet these ‘spur of the moment’ needs and generally non-existent Sunday transport availability.

Third Meeting: November 19, 2007, Senior Services of Central Illinois, Springfield

Purpose: To discuss proposed projects and begin to develop the HSTP for Region 7.

Agenda: Further Discussion of Transportation Needs in Relation to Survey Results
Discuss Projects
Discuss Plan Development

Key Findings:

- Menard County is considering the submission of a planning grant that would include the coordination of Logan and Mason Counties in the future.
- West Central Mass Transit District (WCMTD) is considering a project to serve both seniors and individuals with disabilities.

During this meeting, survey results were discussed. The key findings from this discussion were the identification of reoccurring themes. Those themes were translated as major needs and concerns and are as follows:

Needs/Concerns

- (1) Employment transportation
- (2) Lack of availability for all target populations, as well as the general public
- (3) Lack of availability for medical appointments
- (4) The need for extending operating hours
- (5) The need for more efficient scheduling practices
- (6) Lack of funding
- (7) Lack of vehicles

Solutions

Expanding service hours and service availability through coordination between current transportation providers and human service agencies

Fourth Meeting: December 13, 2007, Menard County Community Room, Petersburg

- Menard County is requesting a planning grant that will be implemented in three phases.
 - Phase 1: To hire a consultant to do needs assessment studies.
 - Phase 2: To implement plan according to found needs, including extending service from Menard County into rural Sangamon, and from there working with Springfield Mass Transit District to get individuals to the urban areas.
 - Phase 3: To look at extending service into Cass, Logan and Mason Counties.

Not only does Menard County have a group dedicated to strengthening its long-term vision for transportation, but also there is extensive support toward this effort from all surrounding counties.

- West Central Mass Transit District is requesting an operating grant to extend hours and types of staff for the following reasons:
 - Morgan County has a large population of individuals who are deaf and/or blind and who have special transportation needs, such as the need for escorts.
 - Morgan and Scott Counties have a large number of nursing homes whose elderly residents need special attention, such as the need for escorts.
 - They are requesting operating assistance to cover the cost of paid employees because employees have more training than many volunteers, and the issue of liability is lost when an employee is hired as opposed to using volunteers.

Grid of RTC Goals/Obstacles for August, September, October, November and December 2007

Activities	Intermediate Objectives for the Quarter	Long-term Goal	Time Frame	Goal Accomplished (Yes, No) List highlights and/or obstacles to the planning process
<p>Obtained 5310, 5311 and SOC lists from IDOT.</p> <p>Obtained DHS, WIB, economic development and other stakeholder information from the internet.</p> <p>Made phone calls to clarify county board representatives.</p> <p>Compiled information onto an Excel Spreadsheet.</p>		<p>Read program materials, meet IDOT Plan staff and learn position requirements and expectations.</p> <p>Develop a comprehensive mailing list that reflects the diversity of stakeholders in the region.</p>	3 mo	<p>Yes. Have become familiar with literature, including 5310, 5311, 5316 and 5317 programs, as well as the HSTP planning process.</p> <p>Have attended all relevant trainings.</p> <p>Yes. Have a comprehensive list of over 200 names and addresses.</p>
<p>Began networking with agencies to solicit committee members, site locations, etc.</p> <p>Developed meeting agendas.</p> <p>Created presentation materials.</p>	Make contact with the SSCRPC.	Organize a stakeholder committee and develop a regular schedule of meetings and begin the meeting process.	2 mo	Yes. The kick-off meeting was held as scheduled; 18 people attended and a core RTC was formed. The second meeting was held mid-Oct. to discuss JARC, New Freedom and HSTP Plan development.
<p>Tally results from the inventory survey.</p> <p>Collect data and incorporate GIS technology.</p>	Develop a spreadsheet format for entering and analyzing data.	Develop timeline for Plan development, initiate data gathering in relation to needs/gaps, and begin formulating the Plan.	3 mo	No. Progress has been made this quarter as five surveys have been collected and information is ready to compile into a spreadsheet.
<p>Developed a rough draft of the Plan.</p> <p>Four more surveys were collected, making the total nine surveys.</p> <p>Incorporated GIS technology into the Plan.</p>	<p>Created a list of needs and gaps identified from RTC meetings.</p> <p>Compile survey results and share findings with RTC.</p>	Analyzed survey, committee input and maps to determine strategies.	3 mo	Yes. A rough draft has been formulated and project goals have been identified.
<p>Collected and reviewed JARC and New Freedom grant applications.</p> <p>Hold a meeting to vote on project proposals.</p>	Through the RTC, scored and prioritized projects and listed them in the RPOP.	Continuation of RTC meetings for review and endorsement of the HSTP as a final document to be amended as projects and time warrant.	1 mo - scoring; 2 years - reviewing	<p>Yes. Projects have been scored, prioritized and placed within the RPOP of the HSTP for the region.</p> <p>Future meetings have been discussed and are TBA.</p>

OTHER PUBLIC INVOLVEMENT

A public informational workshop was held on Wednesday, May 23, 2007 in Jacksonville, Illinois. The purpose of the workshop was to gather feedback related to the process being initiated for the development of the HSTP and RTC for Region 7. A total of 22 people were in attendance and a total of 9 open-ended surveys were collected.

Input generated from the workshop was good. The majority of discussion was about the make-up of the RTC. Two scenarios were shared as to the preferred make-up of the RTC. The first scenario suggested that each county would get three representatives, one local elected official (county), one human service representative and one transit operator; whereas the second scenario suggested each county get one representative. The favored scenario for RTC makeup would include three representatives per county, and would also include one member at large, possibly a member from the City of Springfield, to represent the urbanized area. This scenario consists of an 18-tripartite member board.

In addition to the above, WIRC staff fostered extensive press coverage. All local media throughout Region 7 were contacted as to the happenings of the RTC and the HSTP. Clips of the kick-off meeting were televised and the Regional Transportation Planning Coordinator was interviewed for several local newspapers and radio stations.

SURVEY INSTRUMENT

In conjunction with public outreach meetings and the public informational workshop, a survey was used to gather data. The survey was designed by IDOT-DPIT to obtain relevant coordination information and opinion of stakeholders (refer to Appendix A). The survey was sent to a large number of both current transportation providers and agencies/organizations that have a need for transportation services for their clientele/customers. The survey was also available on the IDOT website for agencies choosing to respond via email. Surveys were administered and collected throughout the months of June through November 2007. A total of nine surveys from agencies representing all but one (Christian) of the eight counties were returned. During the months of November and December, the WIRC staff met with the RTC to review survey results and prepare projects for funding consideration.

The survey, the public outreach meetings and the informational workshop all had a fairly good cross section of transportation service providers, human service agencies, businesses, organizations and other stakeholders. In addition, many of the eight counties in Region 7 were reasonably well represented in all of the activities. In addition to the survey, meetings and workshop, WIRC staff drew further insights from conversations with the general public.

UPDATES

The planning horizon is 2007-2011. Periodic updates to the plan are anticipated. It is recommended that the plan be reviewed for updates using the following benchmarks:

- Federal or state policy that impacts access to services
- Local changes that affect the service
- Periodic review and update, including a required review and update every two years

SECTION II: INVENTORY

PROFILE OF SERVICE PROVIDERS

Existing Transportation Systems in Regions 7

This section of the plan will provide an inventory of what agencies, organizations and businesses are currently providing transportation to their clientele or consumers within Region 7. A thorough description of the services provided by the two public transit systems is included in this section. Other transportation services that operate within the region will be discussed to a lesser extent, as well as agencies and businesses that provide transportation assistance to their own clientele. The list below should not be thought of as a definitive list of what transportation is provided within the Region, as there are sure to be some that have been missed.

Public Transit Providers

At this writing, public transit service is available for two of the eight counties in Region 7:

- Morgan (WCMTD)
- Scott (WCMTD)

Sangamon County is the only county with funded public transit in a city location only:

- Springfield (Springfield Mass Transit District)

Counties currently not served by countywide public transit are:

- Cass
- Christian
- Logan
- Mason
- Menard

Public Transit Systems

West Central Mass Transit District (WCMTD)

WCMTD provides service to Morgan and Scott Counties. The service area has a combined population of over 42,000 residents and covers 819.68 total square miles. WCMTD provides service via four 14-passenger vehicles, plus two 11-passenger vehicles engaged in door-to-door demand/response service.

Springfield Mass Transit District (SMTD)

SMTD was created in 1968 by referendum and is governed by a 7-member board. The District operates 41 peak hour buses on 13 fixed routes. The service area includes the City of Springfield and 3 surrounding townships, which have a combined urbanized population of 131,246 and covers a service area of 72 square miles. Service to residents with disabilities is provided by SMTD.

Section 5310 Elderly and Disabled Program Capital Assistance Programs

Currently Region 7 has fifteen organizations that have 5310 Program vehicles. They are as follows:

Cass County

- Cass County Council on Aging
- Cass County Mental Health
- Inglesia del Nazareno

Christian

- Senior Citizens of Christian County

Logan

- Central Illinois Economic Development Corporation

Menard

- Menard County Senior Transport

Morgan

- West Central Mass Transit District
- Barton W. Stone Home
- Pathway Service Unlimited, Inc.

Sangamon

- Springfield Mass Transit District
- Capitol Retirement Village
- The Hope School
- Senior Services of Central Illinois
- Mental Health Centers of Central Illinois

Scott

- West Central Mass Transit Sistrict

Section 5311 Nonurbanized Area Formula Program

The Section 5311 Program is intended to ensure that all Americans, including those who live in nonurbanized areas, have access to transit to meet basic mobility needs. One public transit system in Region 7 currently receives 5311 funding:

- West Central Mass Transit District.

HISTORY OF COORDINATION

What Is Coordinated Transportation?

Coordinated transportation is when multiple organizations work together to their mutual benefit to gain economies of scale, eliminate duplication, expand service and/or improve quality of service in order to better address transportation needs of individuals that the agencies serve.

Coordination Opportunities:

Coordination of transit services could include anything from simple sharing of training resources to full integration of services. The appropriate level of coordination must be determined on a case-by-case basis. In general, there are four levels of equipment and facilities coordination:

1. Communication: Involves recognizing and understanding problems, and discussing possible solutions between individuals from various agencies who are in a position to influence transportation developments within their jurisdiction.

2. Cooperation: Involves working together in a cooperative way, with individuals or agencies retaining their separate identities. This can be sharing of training resources, vehicle procurement or fuel contracts, or arranging a ride for a client using a different service.

3. Coordination: Involves bringing together independent agencies to act together to provide a smooth interaction of separate transportation systems. Individual provider funds, equipment, facilities, and services are used in concert to enhance delivery and efficiency of services. Agencies retain their individual identities. Examples of coordinating transportation include:

- Identifying barriers to coordination in the regulatory environment and advocating for change.
- Making greater use of technology to match transportation users to transportation providers and trip scheduling.
- Finding ways to group riders on the same vehicle even when they are sponsored by different funding agencies.
- Leveraging purchasing power for vehicles, fuel, maintenance or training.
- Sharing training resources.

Regardless of the type of coordination, it should involve consultation with a broad range of stakeholders, such as transportation providers, human service agencies and people with special transportation needs.

4. Consolidation: Involves joining together or merging agencies for mutual advantage. This is a fully integrated system, and individual agency identity is no longer maintained. Because each community and region is unique, the appropriate level of coordination is what project partners are comfortable with, and what is best for the customer.

Coordination Efforts in Region 7:

A comprehensive approach to meeting mobility needs is happening in the region through the development of this document: the Region 7 HSTP. The challenge in this region however is the low service numbers and the long distances that must be traveled for rides – better referred to as economies of scale. The physical inventory is there and tapping those vehicles and drivers to coordinate services is the challenge. Barriers do make this difficult to accomplish, but not impossible to attain if regulations and rules were loosened providing some flexibility to the systems. However, the facilitation of the process through a Regional Transportation Planning Coordinator does help to increase the probability of formalizing coordination and cooperation.

Before the development of the Region 7 HSTP, there were some formal interagency agreements in place, but for the most part coordination and cooperation was done on an informal basis. Although the HSTP is a new approach to coordination of transportation services on a regional scale, many public transportation operators and human service agencies have been informally working together locally to find solutions to public transportation needs.

It is important to note that not all transportation providers and human service agencies have provided input as to the history of their coordination efforts, however a summary of past and current coordination efforts within Region 7 is provided below.

The majority of public transportation operators in Region 7 work with human service agencies as part of their mission. It is not uncommon for transportation operators to work with their local:

- Health Department
- School District
- Chamber of Commerce
- Area Agency on Aging
- Housing Authority
- Center for Independent Living
- University or Community College
- Community Action Agency
- Salvation Army
- American Red Cross
- YMCA and/or YWCA
- Employment Service Agency
- Senior Citizens Council
- Mental Health Center
- Governmental Units
- Community and Economic Development Office
- Hospital
- U of I Extension Office
- Volunteer Agency

In working with these agencies, transportation operators learn about existing needs within the communities. They are also able to provide a higher level of service to their clientele. Some counties have regular communications about these issues through a collaborative effort. For example, some counties have a type of Interagency Council that meets on a monthly basis to discuss issues within the human service sector. At these meetings, members of the Interagency Council are encouraged to give a report of progress made as it relates to the matter at hand.

In addition, agency efforts are ongoing to educate the public regarding the difference in the kinds of transportation options available. It is with hopes that through the development of the HSTP, coordination will occur electronically through agency website links so that the general public and those with special needs can more readily access information online.

SECTION III: NEEDS ASSESSMENT

DEMOGRAPHIC ANALYSIS

Region 7 is located within the mid-central section of Illinois and is not part of a metropolitan area. The majority of the region is considered rural with pockets of urbanized areas. The only urbanized area in the region is Springfield with a population of 111,454. The second largest municipality in the region is Jacksonville with an estimated population of 18,940.

The 2000 US Census Bureau estimated the population of Region 7 to be 339,878. Persons in the 65 years and older category represented 46,774 or 13.76% of the region’s population; persons in the low-income population category (individuals whose family income is at or below 150 percent of the poverty line) represented 30,702 or 9.03% of the region’s population; and persons with a disability status (over 5 years of age) represented 55,106 or 16.21% of the region’s population.

According to the 2000 US Census Bureau, the total number of households for the region is 136,626. Of those households, 10,334 or 7.56% do not have a vehicle. Nearly half of the region’s population is considered rural: 84,561 or 47.07%. For the majority of the counties in Region 7, population trends are expected to plummet at an average of –2.5% over the next few years. On the other hand, the counties of Cass, Menard and Sangamon are expected to see a 1.23% growth over the next few years.

Chart Showing Demographic Data of Target Populations by County and Region

County	Population	Population Aged 65+	Percent of Population Aged 65+	Low-Income Population	Percent Low-Income	Disabled Population	Percent Disabled	Households	No Vehicles	Percent No Vehicles	Rural Population	Percent Rural Population
Cass	13,695	1,981	14.65%	1,606	11.73%	2,320	16.94%	5,347	310	5.80%	7,540	55.06%
Christian	35,372	5,734	16.21%	3,197	9.04%	6,112	17.28%	13,921	1,079	7.75%	15,332	43.35%
Logan	31,183	4,216	13.52%	2,170	6.96%	4,825	15.47%	11,113	599	5.39%	12,896	41.36%
Mason	16,038	2,607	16.26%	1,528	9.53%	2,722	16.97%	6,389	362	5.67%	9,514	59.32%
Menard	12,486	1,504	12.05%	1,101	8.82%	1,631	13.06%	4,873	214	4.39%	9,407	75.34%
Morgan	36,616	5,240	14.31%	3,227	8.81%	6,352	17.35%	14,039	1,189	8.47%	13,012	35.54%
Sangamon	188,951	24,635	13.04%	17,340	9.18%	30,322	16.05%	78,722	6,487	8.24%	27,586	14.60%
Scott	5,537	857	15.48%	533	9.67%	822	14.85%	2,222	94	4.23%	5,537	100.00%
Region 7	339,878	46,774	13.76%	30,702	9.03%	55,106	16.21%	136,626	10,334	7.56%	100,824	29.66%

Compile by WIRC, Source: US Census Bureau

The total number of public transportation systems in Region 7 is three, with only two of those offering countywide transportation for the general public: West Central Mass Transit District for both Morgan and Scott Counties. Ironically, although nearly 30% of the region’s population is rural, the majority of public transportation is only offered in major city locations such as Springfield and Jacksonville.

The major employers in Region 7 are the Cass County government and Cargill Meat Solutions in Cass (Beardstown), St. Vincent’s Memorial Hospital and Illini Metals in Christian (Taylorville), Eaton Electrical and Weyerhaeuser in Logan (Lincoln), Darling International in Mason (Havana), the local school district in Menard (Petersburg), Emi Music Distribution and Hertzberg New Method in Morgan (Jacksonville), the State of Illinois and Memorial Health

System in Sangamon (Springfield) and the local school district in Scott (Winchester). Other major employment services in the region are manufacturing, distribution/transportation, health care and agriculture.

MAJOR TRIP GENERATORS PROFILES

According to the survey and in conjunction with communications with the Region 7 RTC, the following are the major locations that persons in need of public transportation, mainly older adults, individuals with disabilities and persons with low incomes, go. The following is informational and in no particular order:

Cass

-
- Springfield, Medical Appointments
 - Jacksonville, Various Appointments
 - Beardstown, Various Appointments
 - Rushville, Various Appointments
 - Beardstown, Lunch Restaurants

Logan

-
- Medical Services, Springfield/Bloomington
 - Dialysis Center, Lincoln

Mason

-
- Pamida (retail), Havana
 - County Market, Havana
 - Oney’s (grocery) in Mason City
 - Alco (retail), Havana
 - Dollar General, Havana

Morgan

-
- Passavant Hospital, Jacksonville
 - Wal-Mart, Jacksonville
 - Shop-Ko, Jacksonville
 - Walgreens, Jacksonville
 - Festival Foods, Jacksonville
 - Rushville/Quincy/Jacksonville/Springfield for Medical Services
 - Beecher Hi-Rise, Jacksonville
 - Retail/Grocery/Beautician, Mt. Sterling/Rushville/Quincy/Jacksonville
 - Education, Mt. Sterling
 - Work Sites, Mt. Sterling
 - Recreation, Mt. Sterling

Sangamon

-
- Dialysis, Chemo/Radiation, Medical Appointments, Springfield
 - Memorial Hospital
 - St. John’s Hospital
 - Senior Center, Springfield
 - East Side Stores/Restaurants (Wal-Mart, Lowes)
 - West Side Stores/Restaurants (Wal-Mart, Lowes)
 - Grocery Stores throughout Springfield
 - Pharmacies throughout Springfield
 - Beauticians throughout Springfield

Scott

-
- Hospital/Dialysis, Jacksonville/Springfield
 - Wal-Mart, Jacksonville

INFORMATION GENERATED FROM RTC COMMUNITY ASSESSMENT

As a starting point for identifying and discussing needs, RTC members spoke about known needs throughout their respective county and/or agency. A list of the needs discussed is as follows:

- “There is a need for extending weekend hours for various reasons such as dialysis and enhancing senior bus service. There are employees from Morgan and Scott Counties needing transportation to and from Cass and Brown counties for employment opportunities, mainly Excel and DOT Foods.”

- Jean Jumper
West Central Mass transit District

Proposed Solutions: The consideration of agencies cooperating together, such as with the WCMTD, and crossing county lines to increase and enhance service and to address service needs and deficiencies.

- “There is a lack of the resources to foster a program that meets the daily transportation needs of the general public and the elderly to daily living activities such as grocery shopping. They have a need to transport dialysis patients from Mason County to outlying counties. Mason lacks service for populations other than seniors.”

- Curt Jibben
Mason County Health Department

Proposed Solutions: To communicate with existing nearby transportation service in order to discuss expansion into Mason County. A voucher program for older adults with mobility issues, as well as the general public might allow greater ridership. Seniors would feel more confident using a voucher when asking for a ride from a volunteer, as this would be a means of ‘payment’. A voucher program would save time, money and limited resources.

- “There is a need for extending and sustaining night service in the Springfield, small urban area. There is a need to expand and meet the growing demand of urban clients needing access to paratransit services, as well as dialysis. College students need access to public transportation. There is a need to bring rural residents to the urban area for medical purposes.”

- Linda Tisdale
Springfield Mass Transit District

Proposed Solutions: A program that coordinates service to bring outside city and rural counties’ residents into the urban area and transports them back would be a more efficient use of resources. A pilot project has been started to provide night service.

- “There is a need to transport clients from Logan to Mason and back for dialysis. There is a need to transport low-income individuals to jobs. The only service that provides this opportunity in Logan County is through CIEDC, but only for those individuals 60 and over. There is no service for anyone else under that age range. There is a need for Logan County residents to get to Springfield for various reasons. Logan has two colleges and no public transportation access for students. There is a need to transport persons to mental and medical health appointments.”

- Angela Stoltzenburg,
Central Illinois Economic Development Corporation

Proposed Solutions: Developing a transportation program utilizing Department of Human Services (Public Aid) programming as can be incorporated in cooperation with existing services.

- “There is a huge need to get people from Menard County to Springfield for employment, health care (especially dialysis), education, shopping and recreation, especially for those who are low income or senior citizens. There is an alarming unemployment rate in Menard County due to the fact that residents in Menard County have a disadvantage for accessing opportunities.”

- Dara Worthington
Menard County Senior Transport

Proposed Solutions: Working cooperatively with SMTD to develop a transit program to get people to jobs, appointments and school. Also offering paratransit services.

- “The senior population needs access to the simple life activities such as shopping and recreating, in addition to medical and other essential transport. Public transportation cannot meet these ‘spur of the moment’ needs and generally non-existent Sunday transport availability.”

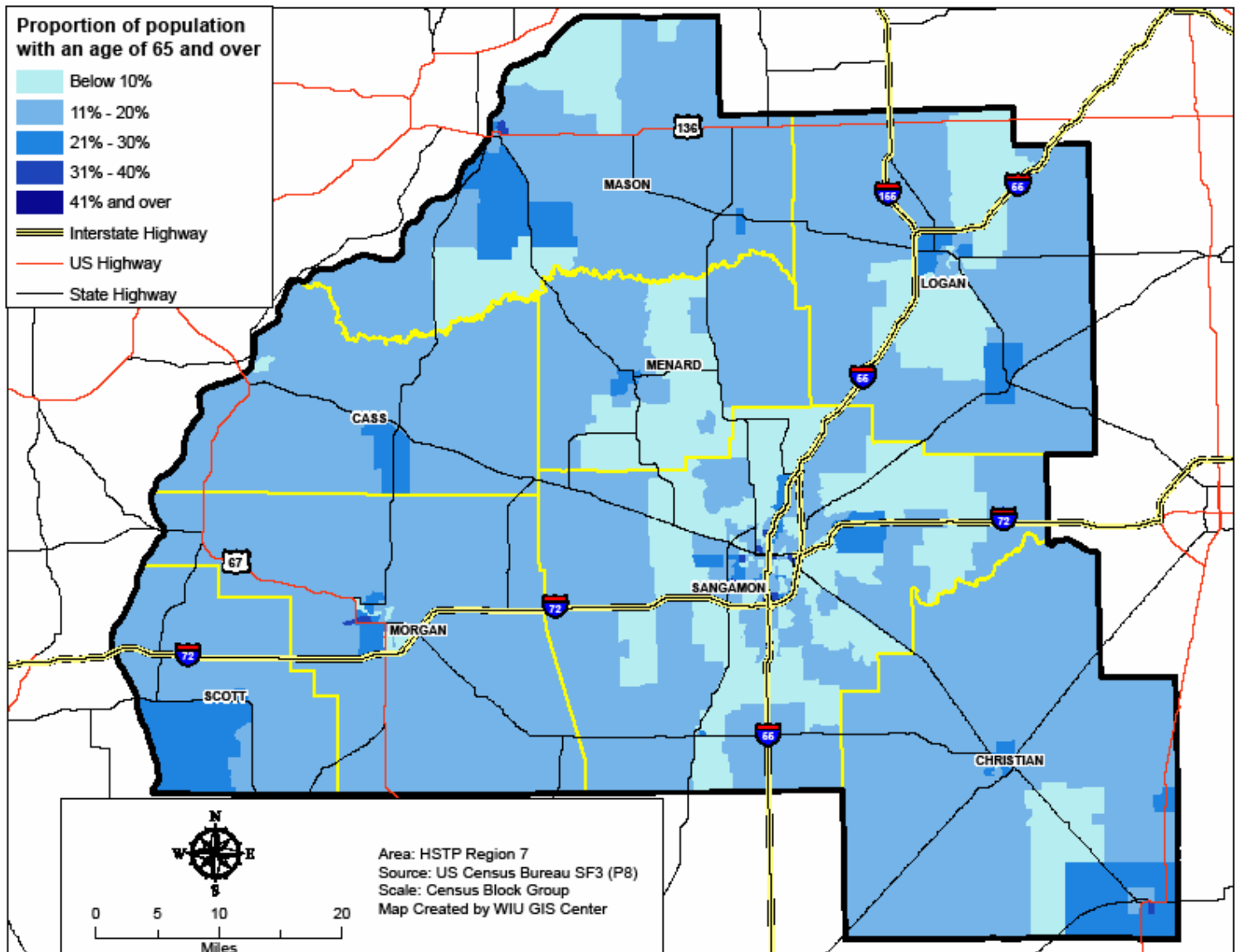
- Donna Mitchell
Area Agency on Aging for Lincolnland

Proposed Solutions: Coordination between agencies and across county boundaries in the project development process.

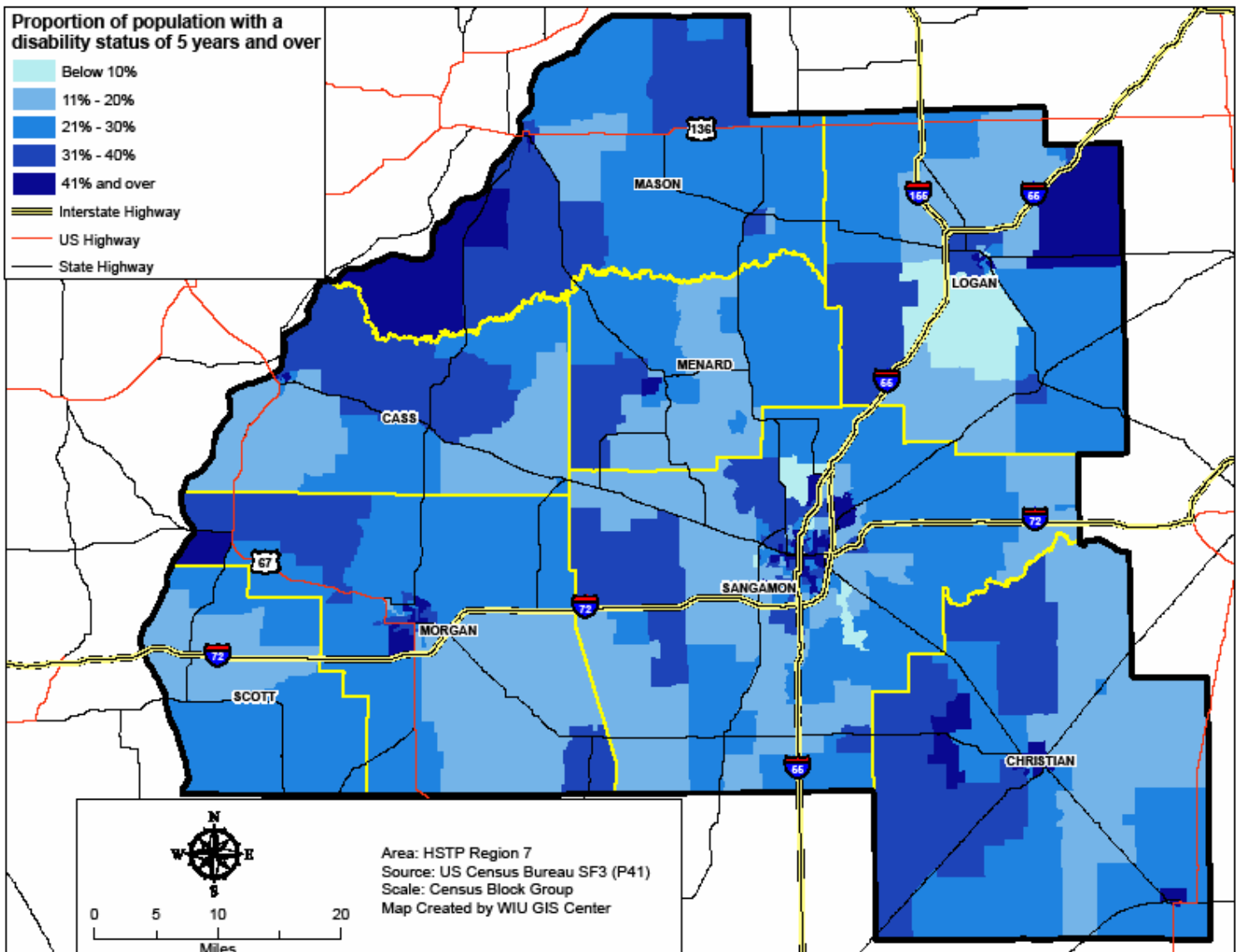
GIS MAPS

The following maps represent the target populations (elderly, disabled and low-income) by census block. This information will help to recognize needs as they relate to identifiable gaps in service.

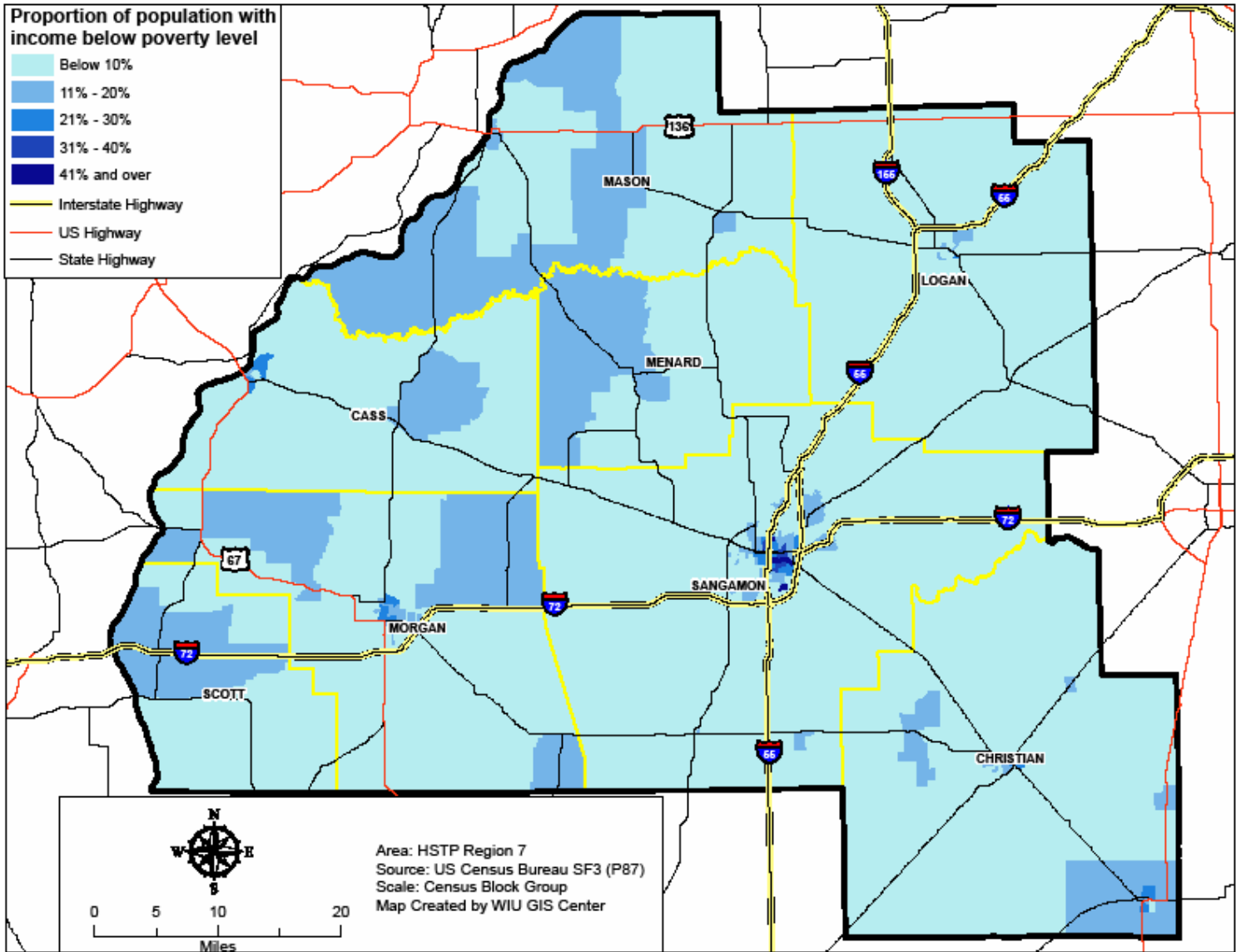
Elderly



Individuals with Disabilities



Individuals with Low Income



SECTION IV: GAP ANALYSIS

IDENTIFICATION OF GAPS IN SERVICE

Transit services are currently lacking in rural areas. People often live in rural areas or edges of cities due to lower-cost housing options. In many communities, a lack of transportation stands in the way of receiving adequate medical attention for some citizens. These persons are often older, disabled and poor. To provide cost-effective service to the largest population, transit agencies typically provide more frequent service in urban areas. Even within transit service areas, service levels in some areas may not meet travel needs of people. For example, ADA-Para transit service only extends three-quarters of a mile beyond the fixed-route transit system, or demand/response service may require the rider to call days ahead to schedule a ride.

People with special transportation needs that live outside the three-quarters of a mile boundary are unable to obtain service. The senior transportation provider tries to fill these gaps, but cannot provide service to everyone who needs a ride. There are also people who are eligible for ADA Para transit services, but need a higher level of service than the transit agency provides (e.g., door-to-door or door-through-door). Human-service agencies typically provide a higher level of service, but are often designated for a specific target population or specific destination type.

Operation Efficiency, Needs and Gaps: Lack of Funding

Coordination results in efficiencies, which in turn result in a lower cost-per-unit of service. Building infrastructure for coordination requires an upfront investment. Without this investment, communities cannot do work, invest in technology or build community infrastructure to realize efficiencies. Effective coordination builds on existing resources and infrastructure utilizing fixed-route transit system as the backbone and filling in transportation gaps with other community transportation services. Funding is insufficient to meet needs for expanding fixed-route service and equivalent Para transit service.

Many Para transit services are funded locally through FTA Section 5311 Rural Formula funds. This is a mandated service due to required compliance with civil rights laws. Since this is a required service without a separate funding base, it impacts funding for fixed-route service, resulting in the potential for a decrease in fixed-route service to maintain minimum levels of ADA-Para transit service. This discourages expansion of Para transit service beyond the minimum necessary to comply with ADA-laws.

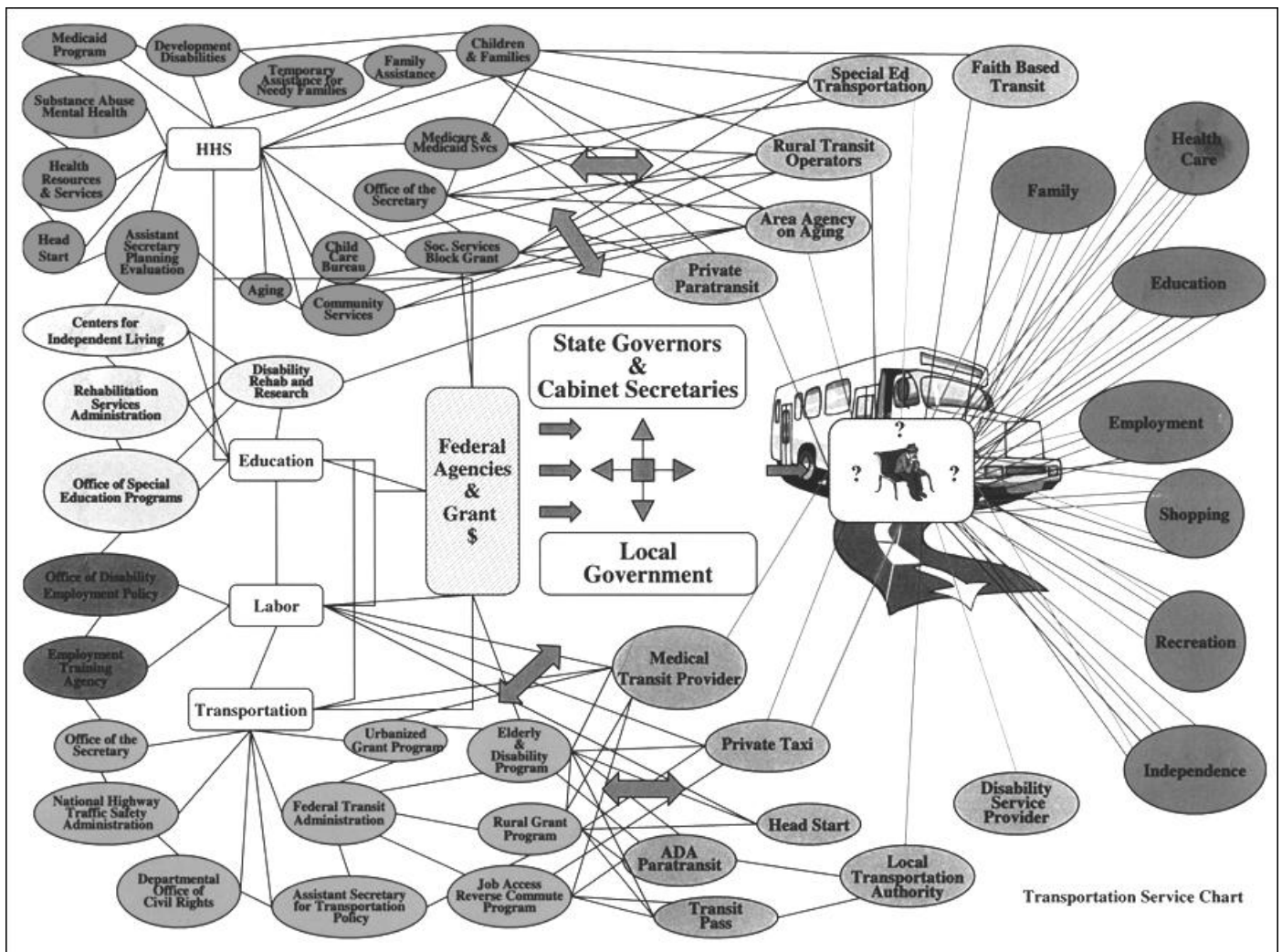
IDENTIFICATION OF SERVICE DUPLICATION

Various sources of funding restrict different transportation services to specific populations for specific purposes. This results in service duplication and redundancy in multiple areas, including:

- Vehicles from different agencies may be traveling in the same corridor at the same time, but offer different services and may not pick up additional riders.
- Schools, transit systems and Medi-Cal brokers operate their own training programs for drivers.

- Schools, transit systems and other transportation providers have their own in-house maintenance programs for vehicles.
- Brokers, transit systems, senior programs and other agencies each have their own call center for people to call to arrange for transportation.
- Schools, transit systems and community providers purchase vehicles and equipment individually.
- Each transportation system has different eligibility requirements. A person who may qualify for more than one type of service may need to apply for several different programs, with each having different requirements and processes.

The reason for this complexity is that instead of having one agency administer transportation programs for all populations, there are 62 federal programs that fund hundreds of state programs and thousands of local agencies.



Federal Transit Administration Transportation Service Chart
 Source: Federal Transit Administration, 2003

IDENTIFICATION OF AREAS SHOWING SERVICE NEEDS

When comparing and analyzing the maps above in conjunction with the demographic data chart, there is overwhelming evidence that certain areas of the region are underserved in terms of public transportation for the target populations.

- According to the GIS Census Block maps, low-income populations live more or less within cities and towns, the elderly population lives more or less in pockets throughout the region and the disabled population is spread over each portion of the counties throughout the region.
- Mason County stands out as one of the top counties where a high percentage of its population is made up of older adults, persons with low-income and individuals with disabilities. They do not have a public transportation system in place, but they do have a major roadway, making accessibility to major cities, such as Lincoln, Peoria or even Springfield easier than not.
- Cass County too stands out, as an area with a high percentage of persons with special transportation needs. Although there is a lack of public transportation in the county, they are surrounded by counties who do offer service: Brown, Morgan and Sangamon, and have major roadways to access those services.
- Menard County too is evidently underserved. There are high percentages of poor, elderly and disabled populations within Menard County. The neighboring county of Sangamon offers transportation service to persons with disabilities, through Springfield Mass Transit District. There is a possibility that Menard County can contract with Springfield Mass Transit District for service.
- Christian County too has a high percentage of persons in need throughout its borders. The good thing about Christian County is that there are major highways equally dispersing out from the heart from the center city and hub of the county, Taylorville. The possibility of service contracts with Sangamon County is strong, as well as taking advantage of any 5311 funds.

SECTION V: STRATEGIES/IMPLEMENTATION

The objective of the HSTP is to provide a framework for improvements to current transportation systems. Strategies addressed in this plan are determined to be the most effective way to provide transportation services to those in need, while increasing efficiency and making the best use of available resources. These efforts cannot be accomplished by any one agency – it will require participation by multiple human-service agencies, transit providers, transit passengers, regional planners and the community at large to accomplish these objectives. The following strategies and recommendations were identified during development of this plan. Note that strategies are short-range and are based on a 1 – 5 year horizon:

Expanding Agency/County Participation with the ICCT

In 2003, the Governor and General Assembly created the Interagency Coordinating Committee on Transportation (ICCT) to help transportation-dependent individuals in Illinois access adequate, consistent, convenient, safe and efficient transportation options. The ICCT Clearinghouse is based at the Rural Transit Assistance Center of the Illinois Institute for Rural Affairs at Western Illinois University, which continues to be a great resource for technical assistance to Illinois communities. The Illinois Rural Transit Assistance Center (RTAC) offers shared training resources and driver training programs. These resources are available to human-service agencies and transit providers that are currently not served or are underserved by existing public transportation. RTAC fulfills its mission through providing training, technical assistance and research, as well as the promotion public and specialized transportation in rural areas.

The ICCT recently released their Transportation Coordination Primer, which provides a step-by-step methodology any community can use to develop a coordinated transportation system. This nationally recognized Primer is an easy to understand, straightforward process that includes the development of a Transportation Planning group, identifying stakeholders, needs and resources, and the creation of a System Model and Action Plan.

To meet new federal coordinating requirements, IDOT is requiring that all new counties interested in applying for Section 5311 funding for fiscal year 2008 and beyond, complete Step One through Step Three of the Five Step Transportation Coordination Primer. All applications for new service funding will be required to submit this information. This includes new counties interested in starting their own public transportation system or new counties that are interested in being annexed by an existing 5311 grantee. Therefore, the RTC recommendation is that all counties that do not have existing public transportation look into participation with the ICCT.

Shared Use of Vehicles

A primary goal in SAFETEA-LU is shared usage of vehicles. In Region 7 this is a difficult issue due to the fact that there are so few vehicles to share. An alternative is to establish community-wide coordinated dispatching systems and vehicle sharing arrangements. This allows for all vehicles in use to accommodate all types of passengers at all times. Often referred to as “ridesharing,” this technique ensures a highly cost-effective application of driver and vehicle resources. When properly applied, it can solve a number of the problems associated with non-coordinated transportation systems, such as overlapping routes, duplication of service, inefficient route design and poorly timed schedules.

Reduce Operating Costs

Cooperative purchasing programs could help reduce operating costs for transit providers. Several transit providers in the State currently purchase fuel at a reduced rate from a county's fleet maintenance facility. This type of cooperative purchasing could include contracts with other vendors for operating supplies such as tires and parts. The RTC recommendation is that transit providers strive to develop joint purchasing programs for items such as fuel, operating supplies and other expenses related to vehicle operations.

Create Transit Friendly Amenities

Studies show that older adults may be more likely to take public transportation if they feel safe walking to a bus stop, and if travel information is easy to obtain. Improvements to facilities and amenities at transfer stations can provide a "user friendly" environment for riders. The RTC recommendation is for transit providers to identify special needs and incorporate these needs into capital improvements and facility upgrades such as benches and bus shelters. Joint use and sponsorship of bus shelters should be considered to increase "user friendly" transit stops throughout the region and reduce costs to individual agencies.

Increase Public Awareness of Transit through Outreach and Marketing Strategies

Informing the community on human services transportation and special transportation needs requires marketing and direct outreach to the community. The RTC recommendation in the short term is that transportation operators and human service agencies implement marketing strategies addressed in the short-range implementation of the HSTP. Possible strategies for increasing public awareness and outreach may include:

- Transportation providers could contact medical offices within the community to discuss how they can work together to meet the community's needs. Public transportation can improve a patient's mobility, thus reducing costly emergency care. Accurate service referral assistance to riders and caseworkers helps riders to choose a transportation mode that best meets their needs. Transportation referrals should be available on websites and by telephone contact.
- Non-emergency medical transportation providers could establish a committee to inform healthcare providers on mobility options in the community.
- The RTC could provide a current list of transit providers to the Department of Motor Vehicles for individuals and/or seniors that may lose their driver's license.
- Transit providers and human-service agencies with Internet websites could include web links to other transportation providers and services. Additionally, it is recommended that transit providers and human-service agencies maintain an updated community resource file for transit referrals.

Develop Volunteer Driver Programs

Volunteers escort clients to their appointments and offer support and encouragement. Often they provide the link to a better life by helping them to access the resources that can help them out of poverty or resolve a medical need. The Retired and Senior Volunteer Program (RSVP) in Hancock County is an example of an established volunteer program in which transportation is a prioritized service. Recent RSVP survey results indicated that people and agencies inquire about help with transport to doctor appointments, therapy and home delivered meals all of the time.

The RSVP Transportation Program responds to the needs of the area's elderly residents for transportation service when family, friends, neighbors and senior vans are unavailable. Volunteers provide this service and use their own vehicles to drive and escort passengers. Passengers may reimburse the volunteer driver for gas and expenses according to their ability to do so. It is recommended that the RTC, in conjunction with WIRC, research resources available to fund volunteer driver programs, and to seek potential agencies to administer a trained volunteer driver program.

Reduce Inter-Jurisdictional Transportation Restrictions

An efficient coordination process must be established and maintained for identifying, reviewing and resolving inter-jurisdictional transportation concerns throughout the Region. Performance measures and goals of the Region 7 HSTP should be adopted into county and local government long-range planning documents and development review policies and standards. It is recommended that the RTC, in conjunction with the WIRC, actively participate in planning processes throughout the region to ensure planning efforts are coordinated.

Recruit New Members to the Regional Transportation Committee (RTC)

It is further recommended to continually recruit new RTC members who are involved in transit-related activities.

FEASIBILITY OF PROJECTS/IDENTIFIED SOURCES OF FUNDING/TIMELINE FOR IMPLEMENTATION

Develop an Action Plan that clearly identifies the actions to be taken; the projects to be implemented and the persons/ agencies responsible for making the specified activities happen.

To Be Inserted At A Later Date

SECTION VI: REGIONAL PROGRAM OF PROJECTS (RPOP)
Projects listed below are in order from highest to lowest score per prioritization process.

**New Freedom
 FFY 06 - 07**

Submitted by: Western Illinois Regional Council

APPLICANT	PROJECT TYPE	PROJECT DESCRIPTION	FED SHARE	LOCAL SHARE	TOLL REVENUE CREDITS	TOTAL COST
WCMTD	Operating	See Below**	\$37,665.00	\$28,360.00	\$9,305.00	\$66,025.00

**Total Funding
 Requested \$37,665.00**

**Job Access and Reverse Commute
 FFY 06 - 07**

Submitted by: Western Illinois Regional Council

APPLICANT	PROJECT TYPE	PROJECT DESCRIPTION	FED SHARE	LOCAL SHARE	TOLL REVENUE CREDITS	TOTAL COST
WCMTD	Capital Rolling Stock & Operating	See Below**	\$229,970.00	\$137,945.00	\$26,025.00	\$367,915.00
Menard County	Planning	See Below**	\$40,000.00		\$10,000.00	\$40,000.00

**Total Funding
 Requested \$269,970.00**

****Project Descriptions**

New Freedom – West Central Mass Transit District (WCMTD)

This project requests operating funds to extend the hours of the senior, public and paratransit service and to provide services above and beyond the requirements of the ADA by providing personal assistants or escorts on our vehicles to assist frail elderly and people with disabilities in navigating difficult buildings, finding offices within buildings, carrying groceries and sundries to and from the vehicle, lending a steadying arm when conditions warrant extra care and providing Saturday and Sunday services to allow individuals to get to dialysis, social functions and to attend the church of their choice within the service area, in cases where said church cannot provide appropriate transportation. WCMTD is proposing to hire and train four part time escorts and to increase hours of operation by adding six hours on Saturday (7 a.m. – 1 p.m.) and six hours on Sunday (8 a.m. – 2 p.m.).

Job Access and Reverse Commute – West Central Mass Transit District

This project is requesting capital funding for two medium duty paratransit vehicles and operating funds to cover the cost of two drivers to operate service from 5 a.m. to 8 a.m., 1 p.m. to 4 p.m. and 5 p.m. to 8 p.m. seven days a week. This service will provide employees with reliable transportation to job opportunities at times outside the regularly scheduled hours of operation, such as to catch early morning and late evening shifts and to assist with transportation to and from jobs outside the Jacksonville/South Jacksonville city limits, thereby providing both area employees and employers with additional opportunities.

Job Access and Reverse Commute – Menard County

This project is requesting to secure a grant for the purpose of planning. With planning funds, Menard County intends to further study the needs and possibilities to ensure that the final program is well planned and responsibly implemented through utilization of an experienced consultant. The overall goal is that of serving low-income residents by providing a means of transportation to Sangamon County for employment and employment related activities. In addition, through a planning process, Menard County hopes to expand service to include Mason and Logan Counties.

POLICY DOCUMENT ADDRESSING GOALS AND OBJECTIVES TO IMPROVE TRANSPORTATION SERVICES

The Region 7 Human Services Transportation Plan and its Regional Transportation Committee was created to identify target populations, assess transportation needs and develop strategies to address those needs. The first round of the planning process was accomplished through monthly meetings and plan development. During this time, committee members shared feedback about their respective counties and the Regional HSTP Coordinator generated a document that reflected key findings. The plan also illustrates GIS maps used to identify gaps in service and demonstrates a list of prioritized projects devised to improve the Region's public transportation services.

Establishing a State Oversight Committee (SOC)

In order to meet the program requirements outlined in SAFETEA-LU, which include statewide competition for areas of the state with populations less than 200,000, IDOT will establish a State Oversight Committee. The State Oversight Committee will aid in the administering of these programs and agree on policies that related to project evaluation and selection, and project inclusion in the State Transportation Improvement program (S-TIP).

Member Agencies / Organizations of the SOC:

NAME	ORGANIZATION	PHONE	EMAIL
Mr. Ed Heflin	Rural Transit Assistance Center, IIRA	800.252.2362	EL-Heflin@wiu.edu
Mr. Bert Webber	Illinois Dept on Aging	217.785.3364	bert.weber@illinois.gov
Ms. Catalina Soto	Illinois Department of Human Services	312.793.1747	Catalina.soto@illinois.gov
Ms. Mickey Rendok	Illinois Department of Healthcare and Family Services	217.524.7413	Mickey.Rendok@illinois.gov
Ms. Brenda Sherwood	Illinois Department of Commerce and Economic Opportunity	312.814.3631	bsherwood@illinois.gov
Ms. Carolyn Brown Hodge	Office of Lieutenant Governor Pat Quinn	217.557.9469	carolyn.brownhodge@illinois.gov
Ms. Susan Poludniak	Springfield-Sangamon County Regional Planning Commission	217.535.3110	susanlp@co.sangamon.il.us
Ms. Kelly J. Murray	Illinois Association of Rural Councils	217.528-5331	iacbm@msn.com
Ms. Linda W. Podeschi	Illinois Public Transportation Association	217.522.4782	lpodeschi@ipta-net.org
Ms. Dawn Piper	Rural Transit Assistance Center, IIRA	800.252.2362	DC-Piper@wiu.edu
IDOT STAFF			
David Spacek	Illinois Department of Transportation – Public & Intermodal	312.793.2154	David.Spacek@illinois.gov
Natashia Holmes	Illinois Department of Transportation - Public & Intermodal	312.793.3307	Natashia.Holmes@illinois.gov
Laura Calderon	Illinois Department of Transportation - Public & Intermodal	217.524.1761	Laura.Calderon@illinois.gov
Les Nunes	Illinois Department of Transportation - Programming & Planning	217.785.2994	Leslie.Nunes@illinois.gov
Norm Johnson	Illinois Department of Transportation - Programming & Planning	217.782.4725	Norman.Johnson2@illinois.gov

Main Roles and Responsibilities of the SOC:

- Endorsement of the model template to be used in each planning region to aid in HSTP plan development.
- Endorsement of policies and procedures for JARC and New Freedom project selection, evaluation and incorporation into the S-TIP; and endorsement of evaluation criteria for JARC and New Freedom proposed projects (competitive selection).
- Assist in the review, evaluation, and recommendation to DPIT of Section 5316 and Section 5317 projects to be included in the State TIP.

CONCLUSION

Coordination is often touted but often misunderstood, thus lessening its potential benefits. Coordination is a technique for better resource management. It means working together with people from different agencies and backgrounds. It requires shared power: shared responsibility, management, and funding. Much transportation functions, including planning, purchasing, vehicle operations, maintenance and marketing, can be coordinated. Typical goals for coordinated transportation services are reduced unit costs, increased ridership and improved cost effectiveness. Coordination is effective in reducing service duplication and improving resource utilization. Coordinating transportation services has been called “the best way to stretch scarce resources and improve mobility for everyone.”

Coordinating transportation services offers substantial benefits to many communities, but significant investments of time and energy may be required before the desired results are achieved. Coordinating transportation functions is best understood as a political process, which, like many other political processes, may involve changing environments, conflicts regarding power and control over resources, and competing goals or personalities. Effective transportation coordination requires a focus on the entire community (even on multiple communities and levels of government).

Individuals who may not be used to talking to or working with each other will need to develop the increased levels of trust, respect and confidence that will permit them to share responsibilities. A willingness to be open-minded about changing long-standing operating procedures is often needed. Once these conditions are met, a wide range of coordinated transportation benefits is then possible. Mobility strategies begin with an understanding and commitment among local community leaders, elected officials, transportation managers and human service agencies that meet the needs of older adults and persons with special needs are critical. Increased mobility increases independence and improves the quality of life for all citizens.

The first step to coordination is “cooperation.” Cooperation means two or more agencies working together toward a common end. Many transportation providers in the community are already informally cooperating. This Human Services Transportation Plan is the next step in the effort to work together. It is with hopes that this plan will bump up the level of cooperation to mean actively coordinating services throughout the region.

Careful planning can allow a community to meet the regulatory, budgetary and service needs of each participating agency, while improving client and community needs. The investment of time and thought at state, local and regional levels will result in a lower cost of individual trips, and provide more trips to more places. By working together, we can improve the transportation system and delivery of services to our community members.

For any plan to work there must be flexibility to respond to constant change. Successful coordination efforts are those that remain focused and maintain momentum in ever-changing environments. A circumstance can change and require a whole new transportation plan. The Western Illinois Regional Council is committed to being an active partner along with the Regional Transportation Committee, various transit providers and human-service agencies to implement coordination strategies addressed in this plan, at the present and in the future.

RELATED LINKS

- Section 5310 Circular -- http://www.fta.dot.gov/laws/circulars/leg_reg_6622.html
- Section 5316 Circular -- http://www.fta.dot.gov/laws/circulars/leg_reg_6623.html
- Section 5317 Circular -- http://www.fta.dot.gov/laws/circulars/leg_reg_6624.html
- United We Ride -- <http://www.unitedweride.gov/>
- American with Disabilities Act – <http://www.ada.gov/pubs/ada.htm>
- IDOT--Division of Intermodal Transportation -- <http://www.dot.il.gov/dpit/index.html>
- Illinois Institute of Rural Affairs – <http://www.ira.org/outreach/rtac.asp>
- Illinois Public Transportation Association – <http://www.ipta-net.org/>
- Illinois Association of Regional Councils – <http://www.ilregionalcouncils.org/>
- Western Illinois Regional Council – <http://www.wirpc.org/>

APPENDICES

APPENDIX A: SURVEY INSTRUMENT

ORGANIZATION CHARACTERISTICS AND SERVICES PROVIDED

The first set of questions has to do with the general characteristics of your organization and the general nature of the services provided.

1. Identification of Organization:

- a. Organization Name: _____
- b. Address: _____
- c. City/Town: _____ County: _____ State: ____ Zip: _____
- d. Telephone: _____ Fax: _____
- e. Name and Title of Individual Responding to Survey: _____
- f. E-mail of Respondent Contact: _____
- g. Agency Website: _____

2. Please check the box that **best** describes your organization. (*Check only one.*)

- | | |
|---|---|
| <input type="checkbox"/> a. Publicly Sponsored Transit Agency | <input type="checkbox"/> i. University |
| <input type="checkbox"/> b. Social Service Agency – Public | <input type="checkbox"/> j. Faith Based Organization |
| <input type="checkbox"/> c. Social Service Agency – Nonprofit | <input type="checkbox"/> k. YMCA/YWCA |
| <input type="checkbox"/> d. Medical Center/Health Clinic | <input type="checkbox"/> l. Red Cross |
| <input type="checkbox"/> e. Nursing Home | <input type="checkbox"/> m. Private School |
| <input type="checkbox"/> f. Adult Day Care | <input type="checkbox"/> n. Neighborhood Center |
| <input type="checkbox"/> g. Municipal Office on Aging | <input type="checkbox"/> o. Taxi/Wheelchair/Stretcher |
| <input type="checkbox"/> h. Nonprofit Senior Center | <input type="checkbox"/> p. Other: |

3. What are the *primary* and *secondary* functions/services of your organization? (*PLEASE READ—Check box for primary and shade in box for secondary.*)

- | | |
|---|--|
| <input type="checkbox"/> a. Transportation | <input type="checkbox"/> j. Diagnosis/Evaluation |
| <input type="checkbox"/> b. Health Care | <input type="checkbox"/> k. Job Placement |
| <input type="checkbox"/> c. Social Services | <input type="checkbox"/> l. Residential Facilities |
| <input type="checkbox"/> d. Education | <input type="checkbox"/> m. Income Assistance |
| <input type="checkbox"/> e. Counseling | <input type="checkbox"/> n. Screening |
| <input type="checkbox"/> f. Day Treatment | <input type="checkbox"/> o. Information/Referral |
| <input type="checkbox"/> g. Job Training | <input type="checkbox"/> p. Recreation/Social |
| <input type="checkbox"/> h. Employment | <input type="checkbox"/> q. Homemaker/Chore |
| <input type="checkbox"/> i. Rehabilitation Services | <input type="checkbox"/> r. Other: |

4. Who is the legal authority to receive the funds (i.e. who is the grantee)?

- a. Local government department or unit (city or county)
- b. Private nonprofit organization
- c. Mass Transit District
- d. Private, for-profit

e. Other (Specify):

5. What is the geographic service area for the organization? If you have a map of the service area, please attach a copy to this survey.

- Countywide only (Specify County or Counties):
 Citywide only (Specify):
 Both city and countywide (Specify):
 Other (Specify):

6. Does your organization impose eligibility requirements on those persons who are provided transportation? (Check one.)

Yes No

If yes, please define those basic requirements below (e.g., Medicaid only, low-income only, destination purpose, etc).

7a. Is your organization involved in the *direct operation* of transit for the *general public*? (Check one.)

Yes No

b. Is your organization involved in the *direct operation* of transit for *human service agency clients*? (Check one.)

Yes No

8a. Does your organization *purchase transportation* on behalf of the *general public* from other service providers? (Check one.)

Yes No

b. Does your organization *purchase transportation* on behalf of *human service agency clients* from other service providers? (Check one.)

Yes No

If the answer to either Question 7a. or 7b. is “Yes,” then continue on to Question 9 of the survey. If the answer to both 7a. and 7b. is “No,” but the answer to 8a. or 8b. is “Yes,” Skip to Question 29 and continue the survey. If the answer to all questions in Questions 7 and 8 is “No,” Skip to Question 31 and continue the survey.

TRANSPORTATION SERVICES PROVIDED

Service Providers Only

In this section, explain the various methods by which your organization delivers public transit or human service agency transportation. Exclude meal deliveries or other non-passenger transportation services that may be provided.

9. Which mode of transit service delivery best describes your methods of service delivery? (Check all that apply.)

- a. Fixed route (fixed path, fixed schedule, with designated stops)
- b. Demand response (includes casual appointments and regular clients attending daily program activities)
- c. Route and/or point deviation
- d. Taxi
- e. Other (Specify):

10. In what manner does your organization directly provide, purchase, operate, or arrange transportation? (Check all that apply.)

	<i>(Check All That Apply)</i>	
a) Personal vehicles of agency staff (i.e. caseworker uses an agency vehicle to transport clients)		
b) Agency employees using agency owned fleet vehicles		
c) Pre-purchased tickets, tokens, passes for other modes of paratransit/transit		
d) Reimbursement of mileage or auto expenses paid to clients, families, or friends		
e) Volunteers		

Mode of Transportation	Services for the General Public	Client Only Services
f) Information and referral about other community transportation resources		
g) Operate own transportation program using agency owned vehicles and staff (i.e. driver, dispatcher or transportation designated personnel uses agency vehicle to transport clients)		
h) Other (Describe in space provided below)		

Please describe any other methods in which your organization delivers transportation services not previously checked in Question 10a through 10g.

11. Please provide the following information regarding the vehicle fleet used in the provision of transportation services provided directly by your agency. The vehicle type(s) used include the following:

Vehicle Type	Total Number	Total Capacity	Number Owned	Number Leased	No. Owned or Leased: Wheelchair Accessible
a) Sedans					
b) Station wagons					
c) Minivans					
d) Standard 15-passenger vans					
e) Converted 15-passenger vans (e.g., raised roof, wheelchair lift)					
f) Light-duty bus (body-on-chassis type construction seating between 16-24 passengers)					
g) Medium duty bus (body-on-chassis type construction seating over 22 passengers with dual rear wheel axle)					
h) School bus (yellow school bus seating between 25 and 60 students)					
i) Medium or heavy duty transit bus					
j) Other (Describe):					

Note: "Number Owned" and "Number Leased" should add to equal "Total Number."

12. What type of communications device/system is used? (Check all that apply.)

- Cellular phones
- Two-way mobile radios requiring FCC license
- Pagers
- Mobile data terminals
- Other (describe):
- None

13. Define the level of passenger assistance provided for users of your transportation service. (Check all that apply.)

- Curb-to-curb (i.e., drivers will assist passengers in and out of vehicle only).

- Door-to-door (*i.e.*, drivers will assist passengers to the entrance of their origin or destination).
- Door-through-door (*i.e.*, driver will assist passengers to inside destination).
- Drivers are permitted to assist passengers with a limited number of packages.
- Drivers are permitted to assist passengers with an unlimited number of packages.
- We provide personal care attendants or escorts to those passengers who require such services.
- Passengers are permitted to travel with their own personal care attendants or escorts.

14. What are the daily hours and days of operation for your transportation services? Check days and list hours of operation in the space provided.

	Mon	Tues	Wed	Thu	Fri	Sat	Sun
Transportation service begins:	_____	_____	_____	_____	_____	_____	_____
Transportation service ends:	_____	_____	_____	_____	_____	_____	_____

15. How do clients/customers access your transportation services?

- There are no advance reservation requirements.
- Clients/customers must make an advance reservation (*e.g.*, by telephone, facsimile internet, arrangement through a third party, etc).

16. If advance reservations are required, what notice must be provided?

- We use a real-time reservation policy.
- Customers/clients must call for a reservation 24 hours before travel.
- Customers/clients must call for a reservation two days before travel.
- Customers/clients must call for a reservation three days before travel.
- Customers/clients must call for a reservation four days before travel.
- Customers/clients must call for a reservation five days before travel.
- Customers/clients must call for a reservation one week before travel.
- Other (Define):

17. Will you accommodate a same day or late reservation if space is available?

- Yes N

Explain:

RIDERSHIP

The following questions have to do with client/patron caseload and/or client ridership.

18. Please provide your organization’s annual passenger statistics. If possible, use data for the most recently completed 12-month period for which data is available. Complete questions (a) through (f).

a)	Total number of persons ¹ provided transportation		
b)	Total number of passenger trips ² (most recent fiscal year)		
c)	Estimated number of trips ² which the riders use a wheelchair		

In the above table, use the following definitions:

- ¹ A "person" is an unduplicated count of individuals receiving service (a person riding the vehicle 200 trips per year is counted as one person).
- ² A "trip" equals one person getting on a vehicle one time. Most riders make two or more trips a day since they get on once to go somewhere and then get on again to return.

Answer the following questions about figures provided in the table above:

- d) Are ridership figures exact?
- e) Are ridership figures estimates?
- f) Time period for counts or estimates:

ANNUAL EXPENDITURES AND REVENUES

The following questions concern your **transportation** funding sources and annual revenues and expenditures.

Unduplicated Persons/ Passenger Trips	Services for the General Public	Client Only Services
--	--	---------------------------------

19. Does your organization charge a fare or fee for providing transportation services?

- Yes No

If yes, what is the fare/fee?

20. Does the organization provide any discounts for the elderly or persons with disabilities?

- Yes No

If yes, what is the discount?

21. Does your organization accept any donations from seniors to offset the cost of providing transportation services?

- Yes No

If yes, what is the suggested donation amount?

22. What are the beginning and ending dates of your organization's fiscal year?

Beginning: _____ Ending: _____

23. What are your transportation operating revenues? (see fact sheets on fares and revenues for further explanation)

Category	Actual, FY 2006
Transportation Operating Revenues – List Individually	
a) Fares Collected from Passengers Through Cash, or Tickets/Tokens Purchased by Passengers (Include Client Fees and/or General Public Fares Here)	
b) Revenues Collected From Cash or Ticket/Tokens Purchased by Third Parties on Behalf of Passengers	
c) Reimbursements for Services Obtained from Third Parties (e.g., Medicaid Reimbursements)	
d) City Government Appropriations	
e) County Government Appropriate	
f) State Government Appropriation (e.g., DOAP)	
g) Federal Grants: DOT-FTA	
1) FTA Section 5307	
2) FTA Section 5311	
3) FTA Section 5310	
4) FTA Section 5316 (JARC)	
5) FTA Section 5317 (New Freedom)	
h) Federal Grants: non-DOT	
1) Temporary Assistance for Needy Families (TANF)	
2) Title IIIB-(Older Americans Act)	
3) Medicaid-Title XIX	
4) Social Services Block Grant-Title XX	
5) DOL Welfare to Work	
6) Workforce Investment Act	
7) Community Services Block Grant	
8) Community Development Block Grant	
9) Administration on Developmental Disabilities	
10) Mental Health Programs	
11) Vocational Rehabilitation Programs	
12) Other (List)	
g) Advertising	
h) Contributions (specify)	
i) Donations (specify)	
j) Other, not listed above (Explain)	
Total Transportation Revenues – Total	

Other comments on organization revenues?

24. Did you receive any capital revenues during FY 2006 for transportation (e.g., facilities, vehicles, technology, etc.)?

Category	Actual, FY 2006
Transportation Capital Revenues – List Individually	
a) DOT-FTA	
1) FTA Section 5307	
2) FTA Section 5309	
3) FTA Section 5311	
4) FTA Section 5310	
5) FTA Section 5316 (JARC)	
6) FTA Section 5317 (New Freedom)	
7) FTA Other (list)	
b) Non-DOT (please see previous list under operating and specify)	
8)	
9)	
10)	
b) Taxes	
c) Funds received from:	
1) State	
2) County (list county)	
3) City (list city)	
d) Fundraising	
e) Contributions from Charitable Foundations, etc.	
f) Other, not listed above (Explain)	
Total Transportation Capital Revenues – Total	

Other comments on organization capital revenues?

25. What are your transportation operating and capital expenses?

Category	Actual, FY 2006 (or most recent)
Transportation Operating Expenses – List Individually	
1) Transportation administration (non-operating personnel)	
2) Transportation operations (drivers, mechanics, fuel, etc.)	
3) Transportation maintenance (facilities and equipment) Note: If you have included these expenses under #2, do not include them again.	
Total Operating Expenses	
b) Transportation Capital Expenses	
Total Transportation Operating and Capital Expenses	

Other comments on organization expenses?

29. What do you see as the greatest barriers to mobility in your service area? (Check all that apply).

- Having to plan ahead
- Lack of service
- Lack of vehicles
- Lack of operating dollars
- Hours of operation
- Service boundaries
- Do not prefer to mix populations (i.e. disabled with non-disabled)
- Funding restrictions to provide service
- Turf issues
- Other (please specify below)

30. What elements of the existing transportation network provide the most useful mobility options in your service area? (Check all that apply).

- Accessible vehicles
- Coordination efforts
- Mass Transit District (ability to cross county lines)
- Volunteers/someone who can provide transportation
- Information and referral service
- Toll-free number
- Other (please specify below)

31. What issues, if any, have your coordination efforts encountered? (Check all that apply).

- Billing and payment
- Insurance
- Driver qualifications
- Policies
- Different vehicles
- Other

Please give further detail on the boxes checked above.

32. In your opinion, what do you see is the *greatest obstacle* to coordination and mobility in your service area?

33. In your opinion, what *enhancement is most needed* to improve the coordination of public transit and human service transportation in your service area?

34. In your community, do you know if an organized group has been formed to look at coordination among transit providers, human service agencies and riders of public transit?

Yes No

If yes to Question 36, has your organization actively participated in this group?

Yes No

Please give the name of the group and/or contact information if available.

35. In your opinion, is there sustained support for coordinated transportation planning among elected officials, agency administrators, and other community leaders?

Yes No

If yes, please identify persons and/or contact information, if available.

36. In your opinion, do you and members of the governing board perceive there to be real and tangible benefits to be realized if local organizations worked together to better coordinate the delivery of services?

Yes No

If yes, what are the potential benefits in your opinion?

If there are any other issues, concerns, or information relevant to this issue, please feel free to address them in the spaces below.

Thank you for your cooperation!

APPENDIX B: SURVEY RESULTS

I. ORGANIZATION DESCRIPTION

1. Name of Organization

Cass County Council on Aging - Beardstown
Scott County Health Department - Winchester
West Central Mass Transit – Jacksonville
Mason County Health Department – Havana
Hope Institute for Children and Families- Springfield
Senior Services of Central Illinois- Springfield
Central Illinois Economic Development Corporation (CIEDC)- Lincoln
Jacksonville Area Center for Independent Living- Havana
Menard County Senior Transportation and Community Services - Petersburg

2. Type of Agency/Organization

Cass County Council on Aging: Nonprofit Social Service Agency
Scott County Health Department: Medical Center/Health Clinic
West Central Mass Transit: Publicly Sponsored Transit Agency
Mason County Health Department: Non Profit Social Service Agency
Hope Institute for Children and Families: Private School
Senior Services of Central Illinois: Nonprofit Social Service and Senior Center
CIEDC: Nonprofit Social Service Agency
Jacksonville Area Center for Independent Living: Social Service Nonprofit
Menard County Senior Transportation and Community Services: Publicly sponsored transit agency for seniors only and govt. nonprofit housing authority

3. Primary and Secondary Functions of Organization

Cass County Council on Aging: Transportation/Information and Referral
Scott County Health Department: Health Care/Education
West Central Mass Transit: Transportation
Mason County Health Department: Health Care/Homemaker and Chore
Hope Institute for Children and Families: Education
Senior Services of Central Illinois: Transportation/Social Services/Counseling
Information/Referral/Recreation/Social/Nutrition
CIEDC: Transportation/Social Services
Jacksonville Area Center for Independent Living: Social Services
Menard County Senior Transportation and Community Services: Primary-social services and secondary-transportation

4. Grantee

Cass County Council on Aging: Transportation Program
Scott County Health Department: Local Unit of Government
West Central Mass Transit: Mass Transit District
Mason County Health Department: Local Unit of Government

Hope Institute for Children and Families: Private non profit organization
Senior Services of Central Illinois: Private non profit organization
CIEDC: Private nonprofit organization
Jacksonville Area Center for Independent Living: Private nonprofit organization
Menard County Senior Transportation and Community Services: Local government department or unit

5. Geographic Area of Service

Cass County Council on Aging: Cass County and Rural Areas
Scott County Health Department: Scott County
West Central Mass Transit: Morgan and Scott counties (Brown survey sep.)
Mason County Health Department: Both city and countywide
Hope Institute for Children and Families: Services for kids from across Illinois
Senior Services of Central Illinois: Sangamon, Logan, Mason and Menard counties and headquartered in Springfield
CIEDC: Countywide only-Logan, Mason, Menard, Piatt, DeWitt and Fulton
Jacksonville Area Center for Independent Living: Mason, Scott, Morgan and Cass
Menard County Senior Transportation and Community Services: Menard County

6. Eligibility Requirements for Transportation/Define

Cass County Council on Aging: Yes- Seniors 60+ and Physically Disabled
Scott County Health Department: No
West Central Mass Transit: No
Mason County Health Department: No
Hope Institute for Children and Families: Yes, must be a student of the Institute
Senior Services of Central Illinois: Yes, 60 years of age; living in Sangamon Cty
CIEDC: Yes, 60 years or older
Jacksonville Area Center for Independent Living: No response
Menard County Senior Transportation and Community Services: Yes, 60 years of age for Senior Transportation System and Menard County residents-IDOT guidelines and residents of Menard County

7. Direct Service Operation for General Public/Human Service Agency Clients

Cass County Council on Aging: Yes
Scott County Health Department: No
West Central Mass Transit: Yes
Mason County Health Department: Yes
Hope Institute for Children and Families: No
Senior Services of Central Illinois: Yes
CIEDC: Yes
Jacksonville Area Center for Independent Living: No
Menard County Senior Transportation and Community Services: Yes

8. Purchase Transportation for Clients/General Public from Other Providers

Cass County Council on Aging: No

Scott County Health Department: No (**skipped to question #30 per instructions**)

West Central Mass Transit: No

Mason County Health Department: No

Hope Institute for Children and Families: Yes (**skipped to question #28**)

Senior Services of Central Illinois: Yes

CIEDC: No

Jacksonville Area Center for Independent Living: Yes (**skipped to #28**)

Menard County Senior Transportation and Community Services: No

II. TRANSPORTATION SERVICES PROVIDED (Providers Only)

9. Mode of Service Delivery

Cass County Council on Aging: Fixed Route

West Central Mass Transit: Demand/response including casual and regular daily activities

Mason County Health Department: Fixed route; demand response including casual and regular daily activities; route and/or point deviation

Senior Services of Central Illinois: Demand/response including casual and regular daily activities

CIEDC: Demand/response including casual and regular daily activities

Menard County Senior Transportation and Community Services: Specific monthly dates of service for communities

10. How Services are Purchased, Operated, Arranged, etc.

Cass County Council on Aging: For clients only- Agency employees using agency owned fleet vehicles; information and referral about other resources

West Central Mass Transit: Operate own transportation program using agency owned vehicles and staff

Mason County Health Department: For clients only-personal vehicle of agency staff; agency employees using agency owned fleet for general public; volunteers for general public; information/referral for general public; and operate own transportation program using agency owned vehicle and staff

Senior Services of Central Illinois: Services for both General Public and Clients- Agency employees using agency owned fleet vehicles; information/referral about other community transportation services; operates own transportation program using agency owned vehicles and staff

CIEDC: Services for the general public- Agency employees using agency owned fleet vehicles; information/referral about other community transportation services; operates own transportation program using agency owned vehicles and staff

Menard County Senior Transportation and Community Services: Responses to this survey are based upon services rendered by Menard Senior Transport. Menard Caring provides volunteer on an as needed demand basis. Area churches and Menard County Housing provide transportation for their individual clients/members.

11. Description of Fleet

Cass County Council on Aging: One Minivan; 7 person capacity; owned; wheelchair accessible and One Medium Duty; 11 person capacity; owned; wheelchair accessible

West Central Mass Transit: Three converted 15 passenger vans, 42-person capacity, one agency owned/2 leased and all three are wheelchair; 2 medium duty buses, 44 person capacity, both are leased and wheelchair accessible; one 10 passenger Para transit vehicle, 10 person capacity, owned and wheelchair accessible

Mason County Health Department: One 15 passenger standard van, agency owned and not wheelchair accessible

Senior Services of Central Illinois: Three minivans, 19 person capacity, all agency owned; One standard 15 passenger van, 13 person capacity, agency owned

CIEDC: Two agency owned, 6 passenger sedans; two agency owned, 3 passenger minivans

Menard County Senior Transportation and Community Services: One 15 passenger standard van, agency owned; one converted 15 passenger van, with 6 person capacity, agency owned and wheelchair accessible

12. Type of communication devices/systems used.

Cass County Council on Aging: Cellular Phones

West Central Mass Transit: Two way mobile radios requiring FCC license

Mason County Health Department: Cell phones and two-way mobile requiring FCC license

Senior Services of Central Illinois: Two way mobile radios requiring FCC license

CIEDC: Two way mobile radios requiring FCC license

Menard County Senior Transportation and Community Services: Cellular phones

12a. Level of passenger assistance provided for users of transportation service.

Cass County Council on Aging--Door to door: drivers will assist passengers with to the entrance of their origin or destination, inside their destination, limited number of packages, unlimited number of packages, and passengers are permitted to travel with their own personal care attendants or escorts.

West Central Mass Transit—Curb to Curb: drivers will assist passengers in and out of vehicles only; Door to door: drivers will assist passengers with to the entrance of their origin or destination; drivers are permitted to assist with limited number of packages; and passengers are permitted to travel with their own personal care attendants or escorts.

Mason County Health Department: Door to door: drivers will assist passengers with to the entrance of their origin or destination, limited number of packages, and agency provides personal care attendants and escorts for those passengers requiring these services.

Senior Services of Central Illinois: Door to door: drivers will assist passengers with to the entrance of their origin or destination, limited number of packages, and passengers are permitted to travel with their own personal care attendants or escorts.

CIEDC: Door to door: drivers will assist passengers with to the entrance of their origin or destination, limited number of packages, and passengers are permitted to travel with their own personal care attendants or escorts.

Menard County Senior Transportation and Community Services: passengers are permitted to travel with their own personal care attendants or escorts.

13. Hours and days of operation.

Cass County Council on Aging --Monday through Friday from 8:00A to 4:00P

West Central Mass Transit: Monday through Friday from 6:30 AM to 6:30 PM and Saturday from 8:00 AM to 2:00 PM

Mason County Health Department: Monday thru Thursday from 7:00A to 4:00P and Friday from 7:00 AM to 12 noon

Senior Services of Central Illinois: Monday through Friday from 7:30A to 4:00P

CIEDC: Monday through Friday from 8:00AM to 4:30PM

Menard County Senior Transportation and Community Services: M-F; 8A to 5P

14. Method clients or customers use to access transportation services.

Cass County Council on Aging --Customers must make an advance reservation.

West Central Mass Transit-- Customers must make an advance reservation.

Mason County Health Department—Clients/customers must make advance reservations.

Senior Services of Central Illinois- Both no advance and advanced reservations

CIEDC: Clients/customers must make advance reservations

Menard County Senior Transportation and Community Services: Clients and customers must make advance reservations

15. Notice needed for advance reservations.

Cass County Council on Aging --24 hours before travel but same day if space permits

West Central Mass Transit—Real time reservation policy

Mason County Health Department—Customers/clients must call for a reservation two days before travel and on a first come, first served basis

Senior Services of Central Illinois- Customers/clients must call for a reservation three days before travel and are encouraged to call for any immediate availability

CIEDC: Customers/clients must call for reservation 24 hours before travel

Menard County Senior Transportation and Community Services: Other-We encourage early reservations however attempt to meet all possible requests as submittal

16. Will accommodate same day or late reservations if space is available.

Cass County Council on Aging--Yes

West Central Mass Transit-- Yes

Mason County Health Department—Yes

Senior Services of Central Illinois- Yes

CIEDC: Yes

Menard County Senior Transportation and Community Services: Yes

III. RIDERSHIP

17. Annual passenger statistics.

Cass County Council on Aging—200 client passengers

West Central Mass Transit—1690 total general public; 34,697 total passenger trips; and 700 trips with wheelchair riders

Mason County Health Department—No response

Senior Services of Central Illinois: 600 total persons; 19,000 total passenger trips; 1200 estimated trips where riders use a wheelchair (ridership figures are not exact but estimates for a 12 month period)

CIEDC: 450 total client transports; 15,000 total passenger trips; 12,000-estimated wheelchair trips (ridership figures are estimates for the period 10/1/06-9/30/07)

Menard County Senior Transportation and Community Services: 163 client only persons; 4455 total passenger trips; and 900 estimated trips. The ridership figures are exact for the time period 10/1/06 to 9/30/07.

IV. ANNUAL EXPENDITURES AND REVENUES

18. Fare or fee for providing transportation.

Cass County Council on Aging—Seniors are suggested price and disabled are charged a reasonable fare

West Central Mass Transit: Yes- \$1.50 one way with advance reservation and within the city limits; \$2.50 one way outside of city limits; and \$5.00 one way outside of county

Mason County Health Department: Yes; yet to be determined

Senior Services of Central Illinois: No

CIEDC: No

Menard County Senior Transportation and Community Services: Yes, there is a suggested donation based upon the distance traveled.

19. Discounts Offered to the Elderly or Persons with Disabilities

Cass County Council on Aging: No

West Central Mass Transit: No

Mason County Health Department: No

Senior Services of Central Illinois: N/A

CIEDC: Yes

Menard County Senior Transportation and Community Services: No

20. Donations Accepted from Senior to Offset Cost of Providing Transportation

Cass County Council on Aging—Yes

West Central Mass Transit: Yes and are not limited to senior clients

Mason County Health Department-- Service will be a set fee

Senior Services of Central Illinois: Yes, \$3.00 per round trip

CIEDC: Yes, \$2.00 suggested donation

Menard County Senior Transportation and Community Services: Yes, the donation becomes 100% program income.

21. Fiscal Year

Cass County Council on Aging: No answer

West Central Mass Transit: July 1st through June 30th

Mason County Health Department: December 1st thru November 30th

Senior Services of Central Illinois: October 1 thru September 30th

CIEDC: January 1st thru December 31st

Menard County Senior Transportation and Community Services: 10/1/07-9/30/08

22. Operating Revenues

Cass County Council on Aging: \$6000 in fares collected from passengers; \$34,322 in federal monies from TANF; \$24,955 in donations; and \$7300 from in-kind for a total of **\$72,577**. The donations are not enough to this year to cover the matching funds

West Central Mass Transit: \$19,034.46 fares collected from passengers; \$11,520.19 revenues from cash, tokens, etc. purchased by third parties on behalf of passengers; \$133,029.20 from State appropriation (DOAP); \$78,723 federal Section 5311 grant. Total operating revenues of **\$242,306.85**

Mason County Health Department: Not applicable- new service

Senior Services of Central Illinois: \$16,061 fares collected from passengers at \$3 per round trip; \$877 from SS Flex; \$79,430 from Section 5310 for 11 passenger paratransit minivan; \$75,661 fro Title IIIB; \$1150 from donations; \$75,122 from CB1/CB2 gen revenue funds; \$5981.40 from United Way. Total Transportation Revenues of **\$254,282.40**

CIEDC: No response

Menard County Senior Transportation and Community Services: \$14,435 state govt. appropriation; \$7000 contributions; and \$2500 donations; Total transportation revenues of **\$23,935**.

23. Any Capital Revenues Received for FY 2006

Cass County Council on Aging: No Answer

West Central Mass Transit: No

Mason County Health Department: Not applicable-new service

Senior Services of Central Illinois: Not applicable

CIEDC: No response

Menard County Senior Transportation and Community Services: \$14,435 from the county; \$2500 from charitable foundations; and \$7000 in program income for a total of **\$23,935**.

24. Transportation Capital and Operating Expenses

Cass County Council on Aging: \$35,572 for non-operating transportation administration personnel; \$22,064 for transportation operations such as drivers, mechanics, etc.; \$9641 for transportation maintenance such as facilities and equipment; and \$7300 for in-kind transportation capital expenses for a total of **\$72,577**

West Central Mass Transit: \$66,755 for non-operating transportation administration personnel; \$413,141.05 for transportation operations such as drivers, mechanics, etc. for total of **\$209,898.05**

Mason County Health Department: Not applicable-new service

Senior Services of Central Illinois: Not applicable

CIEDC: No response

Menard County Senior Transportation and Community Services: Transportation admin is in-kind; transp operations is \$35,580.26 for a total of **\$35,580.26**.

25. Any Third Party Payments to Pay for Transportation

Cass County Council on Aging: No

West Central Mass Transit: No

Mason County Health Department: No (**skipped to question #30**)

Senior Services of Central Illinois: Yes, due to the loss of a wheelchair van, we use flex plan monies to pay for rides for wheelchair clients

CIEDC: No (**skipped to question #28**)

Menard County Senior Transportation and Community Services: No (**skip to #30**)

26. Describe Third Party Purchases If Applicable

Cass County Council on Aging: NA

West Central Mass Transit: N/A

Senior Services of Central Illinois: Access/RST-three trips purchased at \$60 per round trip for \$200 paid during last fiscal year

V. ASSESSMENT OF NEEDS/COORDINATION

27. Five Destinations that Customers/Clients Travel to Most

Cass County Council on Aging: Doctors appointments in Springfield with pm peak; various appointments in Jacksonville with am peak; various appointments in Beardstown and Rushville with a mid-day peaks; and noon meals in Beardstown with mid-day peak

West Central Mass Transit: Hospital in Jacksonville with 45 weekly riders; Wal-Mart in Jacksonville with 35 to 40 weekly riders; Schools in Jacksonville with 35 to 40 weekly riders; Dialysis in Jacksonville with 15 to 20 weekly riders; and Beecher Hi-Rise in Jacksonville with 20 to 25 riders

Senior Services of Central Illinois: Dialysis/chemo/radial for Springfield/Sangamon County with 9-10:30 am peak, 12-1 mid-day peak and 2:30-3:30 afternoon peak; Doctors appointments, senior center, groceries, and beauty salon trips all have a Springfield destination with 9-10:30 am peak, 12-1 mid-day peak and 2:30-3:30 afternoon peak

28. Greatest Barrier to Mobility in Service Area

Cass County Council on Aging: Lack of operating dollars

West Central Mass Transit: Having to plan ahead; lack of vehicles; lack of operating dollars; and funding restrictions to provide services. We need more operating dollars and vehicles to serve the rural parts of the county. Rides are 40 minutes each way and we can't keep up with the Jax/South Jax traffic when using few vehicles on county rides.

Hope Institute for Children and Families: Lack of vehicles; do not prefer to mix populations such as disabled with non-disabled; and funding restrictions to provide service.

Senior Services of Central Illinois: Lack of vehicles, lack of operating dollars, hours of operation and funding restrictions for services provided

CIEDC: Lack of operating dollars and funding restrictions for services provided

Jacksonville Area Center for Independent Living: Lack of service

29. Elements in Service Area Providing the Most Useful Mobility Options

Cass County Council on Aging: Accessible vehicles; coordination efforts; and information and referral services

West Central Mass Transit: Accessible vehicles; coordination efforts; mass transit district ability to cross county lines; and information/referral service

Hope Institute for Children and Families: Other- We are unable to use the transportation network and have to do our own transport for all off campus activities
Senior Services of Central Illinois: Volunteers/someone who can provide transportation and information/referral service
CIEDC: Accessible vehicles
Jacksonville Area Center for Independent Living: No response

30. Any Issues that Coordination Efforts Have Encountered

Cass County Council on Aging: Other-personnel having clients ready to go at time of pick-up
Scott County Health Department: Other-Knowing what is available and to whom in addition to a contact number for available services
West Central Mass Transit: Other-Turf issues. Historically there have been issues with the Senior Bus Service. However, granted the 2008 Title III Transportation grant so these issues might go away.
Mason County Health Department: Billing and payment; policies
Hope Institute for Children and Families: Other- We do not access because of special needs of our population.
Senior Services of Central Illinois: Policies-differing needs of target population
CIEDC: No response
Jacksonville Area Center for Independent Living: No response
Menard County Senior Transportation and Community Services: We have not, thus far, attempted this type of project, therefore we have no experience with encountering specific issues.

31. Greatest Obstacle to Coordination and Mobility in Service Area

Cass County Council on Aging: Need for more funding
Scott County Health Department: No response
West Central Mass Transit: Turf issues and the ability to enter into agreements with those institutions that are currently providing transportation who want us to provide it instead (regulatory i.e., charter). Also, the lack of operating funds, increases in insurance and fuel costs, and the need for additional vehicles.
Mason County Health Department: \$\$\$
Hope Institute for Children and Families: We do not access public transportation.
Senior Services of Central Illinois: Ability to blend and change already established policies and routines
CIEDC: No response
Jacksonville Area Center for Independent Living: Lack of public transportation
Menard County Senior Transportation and Community Services: Funding is the greatest issue with the needs of the community far surpassing our ability to meet them.

32. Enhancement Most Needed to Improve Coordination and Service Delivery

Cass County Council on Aging: More funding
Scott County Health Department: Getting word out on available services
West Central Mass Transit: No other public transit provider to speak of so should not be an issue next year. Do need additional buses and money for insurance, fuel and operations staff.

Mason County Health Department: \$\$\$ for handicap vehicles, coordinator salary and general operating expenses.

Hope Institute for Children and Families: Significant increase, supports, and equipment: wheelchair accessible vans, buses, etc.

Senior Services of Central Illinois: More of all transport and rural extended routes

CIEDC: Availability of transportation to individuals under 60 years of age

Jacksonville Area Center for Independent Living: No response

Menard County Senior Transportation and Community Services: No response

33. Any Organized Groups Looking at Transit Provider Coordination

Cass County Council on Aging: No

Scott County Health Department: No

West Central Mass Transit: Yes and have been an active participant and are it

Mason County Health Department: No

Hope Institute for Children and Families: No

Senior Services of Central Illinois: No

CIEDC: No

Jacksonville Area Center for Independent Living: No

Menard County Senior Transportation and Community Services: No and yes, our group has spearheaded this group project. Menard County Housing Authority- Anne Smith at 217/632-7723 and Menard County Community Services- Dara Worthington at 217/632-4412.

34. Opinion that There is Effort Among Community Leaders, etc. to Coordinate

Cass County Council on Aging: No

Scott County Health Department: No

West Central Mass Transit: Yes—the Jacksonville Mayor Ron Tendrick; Village of South Jacksonville President Gordon Jumper; and Morgan County Commissioner Dick Rawlings

Mason County Health Department: Yes, with no one listed

Hope Institute for Children and Families: No

Senior Services of Central Illinois: Yes

CIEDC: Yes, county board members

Jacksonville Area Center for Independent Living: No

Menard County Senior Transportation and Community Services: Yes, our elected officials are supportive of the effort to provide rural transportation while at the same time reminding us of the fact that there are no local funds for this effort.

35. Benefits to Coordination in the Delivery of Services and Description

Cass County Council on Aging: Yes-all local organizations help with donations but still not enough dollars to cover required match

Scott County Health Department: Yes- access to social and health services

West Central Mass Transit: Yes- coordination provides equal access to transportation for each and every individual in the community regardless of age, ability, and economic status

Mason County Health Department: Yes

Hope Institute for Children and Families: No

Senior Services of Central Illinois: Yes, but even more important is the support of the clientele

CIEDC: Yes

Jacksonville Area Center for Independent Living: Yes, transportation within and outside of the county for all persons.

Menard County Senior Transportation and Community Services: Yes, coordination always benefits all parties involved in the process in that they have a vested interest in the service, community, etc.

36. Other Issues to Discuss

Cass County Council on Aging: We need to know where to turn to for more funding to operate this very important program for seniors and the disabled.

Scott County Health Department: Not applicable

West Central Mass Transit: No additional answers here

Senior Services of Central Illinois: No additional answers here

CIEDC: No additional answers

Jacksonville Area Center for Independent Living: No additional answers

Menard County Senior Transportation and Community Services: No additional responses.

APPENDIX C: RTC MEETING MINUTES

RTC Region 7 Kick-Off Meeting, October 9, 2007

ATTENDEES:

Dara Worthington	Menard County Senior Transport
Michael McIntosh	Logan County Board
Joyce Rodgers	Springfield Mass Transit District Trustee
Karen Schainker	Senior Services of Central Illinois
Devin White	Jacksonville Area Center for Independent Living, Mason County
Patty Brewer	Cass County Council on Aging
David Parish	Cass County Board Chairman
Pam Aymer	Senior Services of Central Illinois
Donna Mitchell	Area Agency on Aging for Lincolnland
Dale Schultz	Springfield Sangamon County Regional Planning Council
Kate Downing	Senior Services of Central Illinois
Mike Polson	Tazwood Mental Health Center
Ron Hopwood	SMTD disability advisor
Anne Smith	Menard County Housing Authority
Linda Tisdale	Springfield Mass Transit District
Julie Hubbard	Area Agency on Aging for Lincolnland
Larry Whewell	Jacksonville Area Center for Independent Living
Jean Jumper	West Central Mass Transit District

STAFF PRESENT: Suzan Nash, Executive Director, Western Illinois Regional Council
Sarah Campbell, HSTP Coordinator, Western Illinois Regional Council

Call to Order

Ms Nash called the meeting to order at 5:02 PM at the Senior Services of Central Illinois Conference Room.

Welcome and Introductions

Attendees signed in. Ms Nash introduced herself and gave a brief welcome to all and instructed everyone to go around the room and introduce themselves. Ms Nash then went through a packet of information that was provided. Ms Nash then introduced Miss Campbell as the HSTP Coordinator.

New Business

Introduction of the Human Services Transportation Plan (HSTP)

Ms Nash gave background information on the HSTP, as well as Western Illinois Regional Council's (WIRC) role in the Plan. Ms Nash pointed out how Miss Campbell was hired to facilitate the HSTP planning process and discussed the regions that the WIRC is responsible for in the planning process. Ms Nash then turned the meeting over to Miss Campbell. Miss Campbell provided an overview of the HSTP, detailing the goals of the plan and the aspects involved.

Discussion of Job Access Reverse Commute (JARC) and New Freedom Programs

Miss Campbell explained what the JARC and New Freedom programs were and provided examples of rural projects. She then described the application process that agencies must follow

when submitting project applications. Emphasis was placed on the time sensitive scheduling for application submittal.

Two questions were asked at this time: whether or not services being proposed can cross regions and what can be done per the planning component in the JARC program? Miss Campbell responded that she would be attending an application workshop on October 18 and 19 in which she would request answers to these questions. She also referred the group to the IDOT website for further specific information.

Purpose and Responsibility of the Regional Transportation Committee (RTC)

Miss Campbell described the purpose of the RTC in the HSTP process. She then stated the responsibilities of the members serving on the RTC. Miss Campbell presented the mandated model for the make-up of the RTC. Sarah also mentioned the State Oversight Committee and its role in the process. A question was raised as to the requirement that an agency must be receiving Section 5311 monies in order to be a representative on the RTC. Both Suzan and Sarah indicated that this would be another question raised at the upcoming meeting.

Nomination and Selection of RTC Members

At this time, Ms Nash read out loud those names that have been proposed as members to serve on the RTC per their respective county.

Designation of Convener, Co-Convener and Secretary

Staff and attendees chose to wait until the next RTC meeting to select officers.

Establish RTC Calendar

The location, time and frequency of future meetings were discussed. Springfield was proposed as a location for the rest of the year and the group approved this. Early evening meetings were suggested and approved by all members. It was agreed on that the frequency of meetings should take place close together and a date was set for the next meeting of October 24th. The next meeting will take place shortly after the Pre-Application meeting, where new information about the JARC and New Freedom funding programs will be shared. Miss Campbell will then share this information with the RTC at the next meeting.

Adjournment

With there being no further business to discuss, Ms Nash adjourned the meeting at 6:04 PM..

RTC Region 7 Second Meeting, October 24, 2007

ATTENDEES:

Angela Stoltzenburg	Central Illinois Economic Development Corporation
Dara Worthington	Menard County
Michael McIntosh	Logan County Board
Karen Schainker	Senior Services of Central Illinois
Devin White	Jacksonville Area Center for Independent Living
Donna Mitchell	Area Agency on Aging for Lincolnland
Dale Schultz	Springfield Sangamon County Regional Planning Commission
Kate Downing	Senior Services of Central Illinois
Anne Smith	Menard County Housing Authority
Linda Tisdale	Springfield Mass Transit District
Jean Jumper	West Central Mass Transit District
Steve Waterworth	Mason County
Curt Jibben	Mason County Health Department
Mark Hilliard	Logan County Health Department
Dan Little	Morgan, Cass, Scott (MCS) Community Services
Dick Rawlings	Morgan County Commissioner

STAFF PRESENT: Suzan Nash, Executive Director, Western Illinois Regional Council
Sarah Campbell, HSTP Coordinator, Western Illinois Regional Council

Call to Order

Ms. Nash called the meeting to order at 5:03 PM at the Senior Services of Central Illinois Conference Room. Ms. Nash introduced herself and gave a brief welcome to all and instructed everyone to sign in and then go around the room and introduce themselves. Ms. Nash then commented on the materials handed out and asked for everyone to take them home and look them over. Ms. Nash then introduced Miss Campbell and turned the meeting over to her.

Review of Meeting Notes

Miss Campbell asked if anyone had anything to add or comment on regarding the meeting notes from the previous meeting (October 9, 2007). All approved the format and content of the notes.

Old Business

Selection of Convener and Co-Convener

Miss Campbell asked if anyone would like to volunteer to be the Convener and Co-Convener. Karen Schainker volunteered Kate Downing as the Convener. Steve Waterworth volunteered to be the Co-Convener.

Questions from October 9, 2007

A handout of questions and answers from the Pre-Application Class/HSTP Plan Development Training at IDOT on October 18 & 19 was included in the packet and discussed. Miss Campbell briefly discussed each question. Regarding question 2 under Region 7 on the handout, Miss Campbell commented that the eligible "planning activities" would be announced at a later date. Comments were made about whether or not FFY 2006 and FFY 2007 monies were allocated or rolled over. It was decided that IDOT will decide on the distribution of FFY 2006 and FFY 2007 monies in relation to the amount of applications they receive with this first round of projects. Linda Tisdale supplied an explanation of Toll Revenue Credits to the group.

New Business

New Information

A handout noting highlights drawn from the Pre-Application Class/HSTP Plan Development Training was discussed. Comments were made about the prioritization of projects. Dale Schultz clarified the concept of project prioritization and explained the total number of eligible and fundable projects as they relate to JARC and New Freedom and rural areas vs. urban areas per region. Karen Schainker suggested that for next year, maybe the RTC could present projects by the various areas, including the make-up of the area and services provided and needed. Ms. Nash addressed this by reiterating that the deadline for this round of projects and plan development will not allow for thorough research, but that it will create a base from which a more thorough and tailored planning process will take place the second time. Ms. Nash then made the announcement that IDOT, through RLS consulting firm, will develop a prototype for us to plug our information into and develop a Plan. Linda Tisdale then asked whether or not there were criteria for prioritizing projects. Miss Campbell stated that it is the responsibility of the RTC to develop a review instrument for project prioritization. Dale Schultz suggested the RTC use the same criteria that the State Oversight Committee will be using as they rank projects. The group agreed.

Timelines of importance were also discussed. Applications are due by December 5th and the RTC will be reviewing and prioritizing the applications between December 5th through December 28th. The top ranked projects and endorsed HSTP are to be sent to IDOT by January 4th.

Existing Transportation Services

A list of existing transportation systems compiled by the American Public Transportation Association was handed out. The RTC was asked to look over the material and add and/or delete information as it applies. This handout will be the start of the initial Inventory of Services per the Plan's Report Format.

Identification of Transportation Needs

Maps showing percentages of target populations per county were shared as a starting point to identifying needs. Steve Waterworth asked about the accountability of certain projects and whether or not one project would be considered more valuable than another. Linda Tisdale commented that funders would be looking at ridership and mobility needs in general, as opposed to identifying populations. At this time, RTC members were asked to go around the room and speak about known needs throughout their respective county and/or agency. A list of the needs discussed, and possible ways of addressing these needs, is as follows:

Morgan, Scott and Brown Counties – *Jean Jumper, WCMTD; Danny Little, MCS Community Services; Dick Rawlings, Morgan County*

Needs: There is a need for extending weekend hours for various reasons such as dialysis and enhancing senior bus service. There are employees from Morgan and Scott Counties needing transportation to and from Cass and Brown counties for employment opportunities, mainly Excel and DOT Foods.

Proposed Solutions: Jean Jumper stated that the consideration of agencies working together, such as with WCMTD, and crossing county lines would be a way to increase and enhance

service and to address service needs and deficiencies. Both Mr. Little and Mr. Rawlings indicated their support for endeavors being undertaken by Ms. Jumper on behalf of their counties and clientele.

Mason County – *Curt Jibben, Mason County Health Department; Steve Waterworth, Mason County; Devin White, JACIL (Havana)*

Needs: There is a lack of the resources to foster a program that meets the daily transportation needs of the general public and the elderly to daily living activities such as grocery shopping. They have a need to transport dialysis patients from Mason County to outlying counties. They lack service for populations other than seniors.

Proposed Solutions: Steve Waterworth suggested thinking outside of the box of traditional tools and that a voucher program might be helpful to older adults with mobility issues. He noted that seniors would feel more confident using a voucher when asking for a ride from a volunteer, as this would be a means of ‘payment’. He also mentioned that a voucher program might save time, money and limited resources.

Springfield/Sangamon County – *Kate Downing, SSOCI; Karen Schainker, SSOCI; Linda Tisdale, SMTD; Dale Schultz, SSCRPC, Urban Representative*

Needs: There is a need for extending and sustaining night service in the urban area. There is a need to expand and meet the growing demand of urban clients needing access to Para transit services, as well as dialysis. College students need access to public transportation. There is a need to bring rural residents to the urban area for medical purposes.

Proposed Solutions: The City of Springfield will be initiating three fixed routes for evening and Para transit services on a pilot basis. A program that brings outside the city and rural counties’ residents into the urban area and transports them back could be a program which would be a more efficient use of resources.

Logan County – *Michael McIntosh, Logan County Board; Angela Stoltzenburg, CIEDC*

Needs: There is a need to transport clients from Logan to Mason and back for dialysis. There is a need to transport low-income individuals to jobs. The only service that provides this opportunity is through CIEDC, but only for those individuals 60 and over. There is no service for anyone else under that age range. There is a need for Logan County residents to get to Springfield for various reasons. Logan has two colleges and no public transportation access for students. There is a need to transport persons to mental and medical health appointments.

Proposed Solutions: One possibility is to consider developing a transportation program utilizing Department of Human Services (Public Aid) programming as can be incorporated.

Menard County– *Dara Worthington, Menard County; Ann Smith, Menard County Housing Authority*

Needs: There is a huge need to get people from Menard County to Springfield for employment, health care (especially dialysis), education, shopping and recreation, especially for those who are low income or senior citizens. Dara expressed concern about the unemployment rate in Menard County due to the fact that residents in Menard County have a disadvantage for accessing opportunities.

Proposed Solutions: Menard County lacks the resources to offer and maintain a public transportation system; they are very interested in working cooperatively with SMTD to develop a transit program to get people to jobs, appointments, school and offering Para transit.

Scott County– Donna Mitchell, AAAL

Needs: Donna expressed that the senior population needs access to the simple life activities such as shopping and recreating, in addition to medical and other essential transport. Public transportation cannot meet these ‘spur of the moment’ needs and generally non-existent Sunday transport availability.

Proposed Solutions: Discussion again centered on the potential for coordination between agencies and across county boundaries in the project development process.

Call for Projects: JARC and New Freedom

Miss Campbell proceeded to explain what JARC and New Freedom are and provided some examples of eligible activities under those programs. Both Linda Tisdale and Jean Jumper gave explanations of what the New Freedom program meant by “beyond ADA requirements”. Dale Schultz also mentioned that discussions at the October informational meeting indicated projects ranging from \$20,000 to \$80,000 should be targeted for submission in this cycle.

Schedule next RTC Meeting

Ms. Nash summed up the meeting, noting that going around the room and talking about needs helped identify certain coordination opportunities, as well as needs assessment. Ms. Nash then talked about scheduling the next meeting and mentioned that further discussing project ideas, bringing in a rough draft application for discussion and talking about the review process were all possible agenda items. Miss Campbell also announced the Applicant Application Review meeting tentatively scheduled for November 14th at the IDOT building in Springfield. The Committee decided to schedule the next RTC on Monday, November 19th at 5:00 pm at the Senior Services of Central Illinois Community Room.

Adjournment

With there being no other business to discuss, Ms. Downing adjourned the meeting at 6:38 PM.

RTC Region 7 Third Meeting, November 19, 2007

ATTENDEES:

Jean Jumper	West Central Mass Transit District (WCMTD)
Dara Worthington	Menard County Senior Transportation
Michael McIntosh	Logan County Board
Larry Whewell	Jacksonville Area Center for Independent Living (JACIL)
Devin White	JACIL - Menard County
Mark Hilliard	Logan County Health Department
Angela Stoltzenburg	Central Illinois Economic Development Corporation (CIEDC)
Kate Downing	Senior Services Of Central Illinois (SSOCI)
Linda Tisdale	Springfield Mass Transit District (SMTD)

Linda Wheeland
Dale Schultz
Anne Smith
Dan Little

Sangamon County
Springfield-Sangamon County Regional Planning Commission
Menard County Housing Authority
MCS Community Services

STAFF PRESENT: Suzan Nash, Executive Director, Western Illinois Regional Council
Sarah Campbell, HSTP Coordinator, Western Illinois Regional Council

Call to Order

RTC Committee Convener Jean Jumper called the meeting to order at 5:00 PM at the Senior Services of Central Illinois Conference Room (SSOCI). Everyone introduced themselves and stated their respective representation on the Committee.

Old Business

Review of Meeting Notes

Convener Jumper asked if there were any changes to the notes. Angela Stoltzenburg stated that she is on the RTC from CIEDC, which represents Logan, Mason and Menard counties, and not to the exclusivity of any one county as may be implied in the diagram of the committee's composition. That having been noted and since the notes are informational only, formal approval is not required.

Further Discussion of Transportation Needs

Suzan Nash stated that at this time, the discussion would focus on the needs and concerns of the region, any potential projects being considered for submission and information for Sarah to include in the plan in relation to projects. Coordination is a central piece of this whole discussion and application process. Suzan referred to the handout in the packet that was a compilation of the roundtable discussion at the last meeting where each member expressed their opinion on voids and the needs within the region and their respective areas. She also referred the members to the handout, which was a tabulation of the HSTP survey responses. She asked the members to look this information over and then discuss. At this time, Suzan summed up the expressed needs/concerns as follows: the need for more senior citizen transportation; transportation to employment; the lack of availability due to current operators' service hours; and the lack of availability of transportation for medical and non-emergency medical related transportation. Generally, the Committee agreed with this summary.

Knowing that coordination is a key element of this whole HSTP process, Nash stated that some possible solutions to the above stated needs and concerns would be coordination of services between those currently providing transportation services to those unserved areas through expansion of existing operating hours and service availability. This is a key element of this whole process, to look at ways to expand services to those areas and populations not currently being served.

New Business

Project Discussion

At this time, Convener Jumper asked everyone at the table to discuss any projects that they are aware of being considered for submission in this round of the JARC and New Freedom

application process. The time constraints on this application round were discussed, with applications being due to Sarah by December 5th. In light of that, those who expressed the potential for submission of an application at this time included:

Anne Smith, Menard County Housing Authority, indicated that given the fact that the applications are due in approximately two weeks, she is considering the submission of a planning grant. This would allow more time to explore project potential and in consideration of coordination opportunities.

Linda Tisdale, SMTD, indicated that they are still reviewing whether they have a project and considering applying or not.

Jean Jumper, WCMTD, is considering a project to serve both seniors and individuals with disabilities. Her concern was where to find the match, knowing that the match for operating is 50%, and it is her understanding that while not capping the amount an entity can apply for, the general spoken range for a funding match request has been \$20,000 to \$50,000.

Mark Hilliard, Logan County Health Department, indicated that whether or not they apply is still under consideration, but unless there is a more coordinated effort, they probably won't apply.

With no further comments on potential projects, Nash stated that it is her understanding that each region has the potential to submit two prioritized projects each for its rural and urban areas, if the region contains an urban area. For Region 7, Springfield is the obvious urban area.

Plan Development Discussion

The next item on the agenda was the discussion of the plan development. Sarah presented a Power Point and referred the Committee to the relevant handout. She discussed the key points of the plan, summarizing the required elements and sections. She focused on the goals and priorities area stating that the HSTP is designed to look at gaps, be a tool to broaden coordination opportunities and communication, assess the needs of persons who are elderly, disabled and with limited income, develop strategies to more efficiently utilize available transportation resources and develop a comprehensive listing of transportation priorities.

Sarah asked if there were any comments on the list. Hearing none, she moved on to the other components of the plan. She next focused on Section V, looking at strategies and implementation, stating that these are ideas that she came up with and all are on the table for review and discussion. Some mentioned were: shared use of vehicles, reducing operating costs, improved coordination, making seamless connections, increasing revenue resources and developing a volunteer driver program. It was questioned what making easy connections meant, and when it was explained, it was decided to change the wording to 'making seamless connections' and possibly merging this statement into the changed 'eliminating inter-jurisdictional transportation restrictions'.

Sarah completed her presentation of the handout. There was an extended discussion of tracking of clients who are turned away due to the lack of available transportation service and prioritizing of projects. Next, Sarah went on to mention that she would have a rough draft of the plan

available for the Committee to review at its next meeting, as she will need the Committee's endorsement for submission. Jean then asked the Committee to review the Power Point plan related handout and make suggestions on any revisions or additions to Sarah via email.

Other Business

Nash indicated that project proposals are due to Sarah by December 5th. It is Sarah's plan to copy and two-day express mail any proposals received to the RTC and have them in the mail by December 6th. This should give the RTC adequate time to review prior to any scheduled meeting. At the review meeting, time must be allotted for a brief presentation by any applicants on their proposed project. The application review sheet in the handout packet was discussed briefly, and this will be used as the evaluation tool.

Nash requested that the email address list be reviewed for accuracy, in addition to verifying the current mailing addresses for everyone. She indicated that prior to the mail out, staff would be confirming mailing addresses. Suzan mentioned at this time that the HSTP staff would be doing more correspondence through email. As appropriate, hard copies will be sent. However, meeting notices, minutes and other information, when pertinent, will be sent via email. With discussion completed, the meeting was set for 2:00 pm on Thursday, December 13th at the Menard County Hillside Terrace Meeting Room in Petersburg.

Adjournment

With there being no other business to discuss, Jean adjourned the meeting at 6:15 PM.

APPENDIX D: ELIGIBLE ACTIVITIES UNDER JARC AND NEW FREEDOM

Job Access Reverse Commute (JARC) Program -- Eligible Activities

In the conference report accompanying SAFETEA-LU, the conferees stated an expectation that FTA would “continue its practice of providing maximum flexibility to job access projects that are designed to meet the needs of individuals who are not effectively served by public transportation, consistent with the use of funds described in the *Federal Register*, Volume 67 (April 8, 2002)” (H.R. Report 109–203, at Section 3018 (July 28, 2005)). Therefore, eligible projects may include, but are not limited to capital, planning and operating assistance to support activities such as:

- a) Late-night and weekend service;
- b) Guaranteed ride home service;
- c) Shuttle service;
- d) Expanding fixed-route public transit routes;
- e) Demand-responsive van service;
- f) Ridesharing and carpooling activities;
- g) Transit-related aspects of bicycling (such as adding bicycle racks to vehicles to support individuals that bicycle a portion of their commute or providing bicycle storage at transit stations);
- h) Local car loan programs that assist individuals in purchasing and maintaining vehicles for shared rides;
- i) Promotion, through marketing efforts, of the:
 - (1) Use of transit by workers with non-traditional work schedules;
 - (2) Use of transit voucher programs by appropriate agencies for welfare recipients and other low-income individuals;
 - (3) Development of employer-provided transportation such as shuttles, ridesharing, carpooling; or
 - (4) Use of transit pass programs and benefits under Section 132 of the Internal Revenue Code of 1986;
- j) Supporting the administration and expenses related to voucher programs. This activity is intended to supplement existing transportation services by expanding the number of providers available or the number of passengers receiving transportation services. Vouchers can be used as an administrative mechanism for payment to providers of alternative transportation services. The JARC program can provide vouchers to low-

income individuals to purchase rides, including (1) mileage reimbursement as part of a volunteer driver program, (2) a taxi trip, or (3) trips provided by a human service agency. Providers of transportation can then submit the voucher to the JARC project administering agency for payment based on pre-determined rates or contractual arrangements. Transit passes for use on fixed route or Americans with Disabilities Act of 1990 (ADA) complementary paratransit service are not eligible. Vouchers are an operational expense which requires a 50/50 (Federal/local) match;

- k) Acquiring Geographic Information System (GIS) tools;
- l) Implementing Intelligent Transportation Systems (ITS), including customer trip information technology;
- m) Integrating automated regional public transit and human service transportation information, scheduling and dispatch functions;
- n) Deploying vehicle position-monitoring systems;
- o) Subsidizing the costs associated with adding reverse commute bus, train, carpool van routes or service from urbanized areas and nonurbanized areas to suburban work places;
- p) Subsidizing the purchase or lease by a non-profit organization or public agency of a van or bus dedicated to shuttling employees from their residences to a suburban workplace;
- q) Otherwise facilitating the provision of public transportation services to suburban employment opportunities;
- r) Supporting new mobility management and coordination programs among public transportation providers and other human service agencies providing transportation. Mobility management is an eligible capital cost. Mobility management techniques may enhance transportation access for populations beyond those served by one agency or organization within a community. For example, a non-profit agency could receive JARC funding to support the administrative costs of sharing services it provides to its own clientele with other low-income individuals and coordinate usage of vehicles with other non-profits, but not the operating costs of the service. Mobility management is intended to build coordination among existing public transportation providers and other transportation service providers with the result of expanding the availability of service. Mobility management activities may include:
 - (1) The promotion, enhancement, and facilitation of access to transportation services, including the integration and coordination of services for individuals with disabilities, older adults, and low-income individuals;
 - (2) Support for short term management activities to plan and implement coordinated services;
 - (3) The support of State and local coordination policy bodies and councils;

- (4) The operation of transportation brokerages to coordinate providers, funding agencies and customers;
 - (5) The provision of coordination services, including employer-oriented Transportation Management Organizations' and Human Service Organizations' customer-oriented travel navigator systems and neighborhood travel coordination activities such as coordinating individualized travel training and trip planning activities for customers;
 - (6) The development and operation of one-stop transportation traveler call centers to coordinate transportation information on all travel modes and to manage eligibility requirements and arrangements for customers among supporting programs; and
- s) Operational planning for the acquisition of intelligent transportation technologies to help plan and operate coordinated systems inclusive of Geographic Information Systems (GIS) mapping, Global Positioning System technology, coordinated vehicle scheduling, dispatching and monitoring technologies as well as technologies to track costs and billing in a coordinated system and single smart customer payment systems (acquisition of technology is also eligible as a stand alone capital expense).

New Freedom Program – Eligible Activities

The list of eligible activities is intended to be illustrative, not exhaustive. Recipients are encouraged to develop innovative solutions to meet the needs of individuals with disabilities in their communities.

New Public Transportation Services Beyond the ADA The following activities are examples of eligible projects meeting the definition of new public transportation:

- a) Enhancing paratransit beyond minimum requirements of the ADA. ADA complementary paratransit services can be eligible under New Freedom in several ways as long as the services provided meet the definition of “new:”
 - (1) Expansion of paratransit service parameters beyond the three-fourths mile required by the ADA;
 - (2) Expansion of current hours of operation for ADA paratransit services that are beyond those provided on the fixed-route services;
 - (3) The incremental cost of providing same day service;
 - (4) The incremental cost of making door-to-door service available to all eligible ADA paratransit riders, but not as a reasonable modification for individual riders in an otherwise curb-to-curb system;
 - (5) Enhancement of the level of service by providing escorts or assisting riders through the door of their destination;

- (6) Acquisition of vehicles and equipment designed to accommodate mobility aids that exceed the dimensions and weight ratings established for common wheelchairs under the ADA and labor costs of aides to help drivers assist passengers with over-sized wheelchairs. This would permit the acquisition of lifts with a larger capacity, as well as modifications to lifts with a 600 lb design load, and the acquisition of heavier-duty vehicles for paratransit and/or demand-response service; and
 - (7) Installation of additional securement locations in public buses beyond what is required by the ADA.
- b) Feeder services. New “feeder” service (transit service that provides access) to commuter rail, commuter bus, intercity rail, and intercity bus stations, for which complementary paratransit service is not required under the ADA.
 - c) Making accessibility improvements to transit and intermodal stations not designated as key stations. Improvements for accessibility at existing transportation facilities that are not designated as key stations established under 49 CFR 37.47, 37.51, or 37.53, and that are not required under 49 CFR 37.43 as part of an alteration or renovation to an existing station, so long as the projects are clearly intended to remove barriers that would otherwise have remained. New Freedom funds are eligible to be used for new accessibility enhancements that remove barriers to individuals with disabilities so they may access greater portions of public transportation systems, such as fixed-route bus service, commuter rail, light rail and rapid rail. This may include:
 - (1) Building an accessible path to a bus stop that is currently inaccessible, including curbcuts, sidewalks, accessible pedestrian signals or other accessible features;
 - (2) Adding an elevator or ramps, detectable warnings, or other accessibility improvements to a non-key station that are not otherwise required under the ADA;
 - (3) Improving signage, or wayfinding technology; or
 - (4) Implementation of other technology improvements that enhance accessibility for people with disabilities including Intelligent Transportation Systems (ITS).
 - d) Travel training. New training programs for individual users on awareness, knowledge, and skills of public and alternative transportation options available in their communities. This includes travel instruction and travel training services.

New Public Transportation Alternatives Beyond the ADA The following activities are examples of projects that are eligible as new public transportation alternatives beyond the ADA under the New Freedom Program:

- a) Purchasing vehicles to support new accessible taxi, ride sharing, and/or vanpooling programs. New Freedom funds can be used to purchase and operate accessible vehicles

for use in taxi, ridesharing and/or van pool programs provided that the vehicle has the capacity to accommodate a passenger who uses a “common wheelchair” as defined under 49 CFR 37.3, at a minimum, while remaining in his/her personal mobility device inside the vehicle, and meeting the same requirements for lifts, ramps and securement systems specified in 49 CFR part 38, subpart B.

- b) Supporting the administration and expenses related to new voucher programs for transportation services offered by human service providers. This activity is intended to support and supplement existing transportation services by expanding the number of providers available or the number of passengers receiving transportation services. Only new voucher programs or expansion of existing programs are eligible under the New Freedom Program. Vouchers can be used as an administrative mechanism for payment of alternative transportation services to supplement available public transportation. The New Freedom Program can provide vouchers to individuals with disabilities to purchase rides, including: (a) mileage reimbursement as part of a volunteer driver program; (b) a taxi trip; or (c) trips provided by a human service agency. Providers of transportation can then submit the voucher for reimbursement to the recipient for payment based on pre-determined rates or contractual arrangements. Transit passes for use on existing fixed route or ADA complementary paratransit service are not eligible. Vouchers are an operational expense, which requires a 50/50 (Federal/local) match.
- c) Supporting new volunteer driver and aide programs. New volunteer driver programs are eligible and include support for costs associated with the administration, management of driver recruitment, safety, background checks, scheduling, coordination with passengers, and other related support functions, mileage reimbursement, and insurance associated with volunteer driver programs. The costs of new enhancements to increase capacity of existing volunteer driver programs are also eligible. FTA notes that any volunteer program supported by New Freedom must meet the requirements of both “new” and “beyond the ADA.” FTA encourages communities to offer consideration for utilizing all available funding resources as an integrated part of the design and delivery of any volunteer driver/aide program.
- d) Supporting new mobility management and coordination programs among public transportation providers and other human service agencies providing transportation. Mobility management is an eligible capital cost. Mobility management techniques may enhance transportation access for populations beyond those served by one agency or organization within a community. For example, a non-profit agency could receive New Freedom funding to support the administrative costs of sharing services it provides to its own clientele with other individuals with disabilities and coordinate usage of vehicles with other non-profits, but not the operating costs of the service. Mobility management is intended to build coordination among existing public transportation providers and other transportation service providers with the result of expanding the availability of service. Mobility management activities may include:

- (1) The promotion, enhancement, and facilitation of access to transportation services, including the integration and coordination of services for individuals with disabilities, older adults, and low-income individuals;
- (2) Support for short term management activities to plan and implement coordinated services;
- (3) The support of State and local coordination policy bodies and councils;
- (4) The operation of transportation brokerages to coordinate providers, funding agencies and customers;
- (5) The provision of coordination services, including employer-oriented Transportation Management Organizations' and Human Service Organizations' customer-oriented travel navigator systems and neighborhood travel coordination activities such as coordinating individualized travel training and trip planning activities for customers;
- (6) The development and operation of one-stop transportation traveler call centers to coordinate transportation information on all travel modes and to manage eligibility requirements and arrangements for customers among supporting programs; and
- (7) Operational planning for the acquisition of intelligent transportation technologies to help plan and operate coordinated systems inclusive of Geographic Information Systems (GIS) mapping, Global Positioning System Technology, coordinated vehicle scheduling, dispatching and monitoring technologies as well as technologies to track costs and billing in a coordinated system and single smart customer payment systems (acquisition of technology is also eligible as a stand alone capital expense).