



METROPOLITAN
TRANSPORTATION
COMMISSION

Coordinated Public Transit Human Services Transportation Plan Elderly and Disabled Component



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Executive Summary

Introduction/Background

This plan has been developed on behalf of the Metropolitan Transportation Commission (MTC), and its local stakeholders with an interest in human service transportation programs. MTC is both the Regional Transportation Planning Agency (RTPA) and the Metropolitan Planning Organization (MPO) for the nine-county San Francisco Bay Area, and in this capacity also serves as a designated recipient of federal transportation funding. This element of the Coordinated Plan focuses on transportation needs of older adults and persons with disabilities. It serves as a parallel effort to the low-income component already completed by MTC, and together they comprise the Coordinated Public Transit-Human Services Transportation Plan for the San Francisco Bay Area.

As described further in this document, the plan also fulfills a federal requirement enacted in 2005 through the passage of the Safe, Accountable Flexible Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU), which stipulates that starting in Fiscal Year 2007, projects funded through three SAFETEA-LU programs - the Job Access and Reverse Commute Program (JARC, Section 5316), the New Freedom Program (Section 5317) and the Formula Program for Elderly Individuals and Individuals with Disabilities (Section 5310) - are required to be derived from a locally developed, coordinated public transit-human services transportation plan. SAFETEA-LU guidance issued by the Federal Transit Administration (FTA) described the plan as a “unified, comprehensive strategy for public transportation service delivery that identifies the transportation needs of individuals with disabilities, older adults, and individuals with limited income, laying out strategies for meeting these needs, and prioritizing services.”

This Plan is intended to meet the federal planning requirements as well as to provide MTC and its regional partners with a range of strategies and a “blueprint” for implementing them, which are intended to promote and advance local efforts to improve the status of transportation for persons with disabilities, older adults, and those of low-income status.

Project Methodology

The methodology used to develop the plan included the following steps:

Conduct Literature Search and Review Best Practices: A review was conducted of recent local studies, which have examined transportation needs in the Bay Area, particularly those of elderly and disabled individuals. Secondly, a peer review was completed of other coordination activities nationwide. Findings are documented in Appendices A and B, respectively.

Establish Demographic Profile: A demographic profile of the service area was prepared using census data and other relevant planning documents. This step established the framework for better understanding the local characteristics of the study area, with a focus on persons with disabilities and older adults.

Document Existing Transportation Services: This step involved documenting the range of public transportation services that already exist in the Bay Area. These services include public fixed route and paratransit services, and transportation services provided or sponsored by social service agencies. Information about public transit and paratransit was obtained from existing resources as specified in the report, and information regarding services provided by social service agencies was collected through an inventory completed as part of this project. Appendix C provides the complete inventory results.

Conduct Outreach: Stakeholder involvement and public participation was implemented in a three-pronged approach through public outreach, stakeholder interviews, and convening a focus group to examine coordination issues in detail. Through this step, transportation gaps were identified or confirmed. Stakeholders provided input on existing barriers to coordination as well as possibilities for improvement.

Assess Needs: The needs assessment provides the basis for recognizing where—and how—service for the population groups of concern needs to be improved. The results of the needs assessment are summarized in Chapter 6, and comprehensive lists of unmet needs identified in each county are included in Appendix D.

Identify Solutions: Coupled with the need to identify service gaps is the need to identify corresponding potential service solutions. These are documented in Chapter 7.

Develop Coordination Strategies: Beyond identifying which projects or solutions could directly address transportation gaps, the final step was to consider how best to coordinate services so that existing resources can be used as efficiently as possible. These strategies outline a more comprehensive approach to service delivery with implications beyond the immediate funding of local projects, which may be short-term in nature.

A range of potential coordination strategies was identified primarily through direct consultation with a number of key stakeholders already involved in the planning and implementation of human service transportation.

Key Findings

Key findings emerging from the study are identified below.

Population Characteristics

Older Adults: In 2005, just over 11% of the Bay Area population was aged 65 or older. By the year 2030, this population is expected to increase by 162%.

Individuals with a Disability: While approximately 12% of the region's population reports a disability, 22% are living in low-income households earning less than 150% of the federal poverty level compared to only 15% of the general population.

Additional demographic information about the Bay Area's elderly and disabled populations, including data by county, is detailed in Chapter 3.

Human Service Transportation Inventory

To document transportation service currently provided in the Bay Area, an inventory was created to identify agencies that provide social service transportation, and to collect basic information about the programs. A survey was sent to public transit agencies providing ADA paratransit, as well as a range of public and private agencies providing transportation for clients, program

participants, specific populations (such as older adults), or the general public. Responses were received from 75 of the 83 agencies contacted (a 90% response rate). The inventory is intended to serve as a tool to support coordination by identifying the existing transportation resources in the region as well as documenting current service parameters, geographic coverage and beneficiaries. Service duplication or gaps in service are also noted.

Needs Assessment

Several key themes emerged from the outreach efforts, stakeholder consultation, and previous planning projects. These include:

Enhanced Fixed Route Services: For persons who can and do use the fixed route system, there is a need for additional service in rural and suburban areas, and for more direct service to key activity centers that older adults and persons with disabilities need to access. Customers also would like increased frequency to avoid long waits, and service longer into the evening and on weekends.

Enhanced Paratransit Services: Paratransit users sometimes need a level of service above and beyond what is required by the ADA, such as service provided on the same day it is requested, where and when the fixed route service does not operate, or the ability to accommodate “uncommon” wheelchairs or other mobility devices.

Connectivity: The need for better connectivity was expressed, both for inter- and intra-county travel, whether using paratransit or fixed route service. Customers also mentioned the need for better shelters and bus stops as well as other amenities at transfer sites. Some wheelchair users have difficulty making effective use of the fixed-route system and referred to needs to enhance accessibility of vehicles and the relating infrastructure, such as shelters and stops.

Information and Other Assistance: There is a need for education so that older adults and persons with disabilities can learn how to use public transit and their accessible features, and the need to provide information in a variety of formats. Likewise, there is a need to ensure drivers, dispatchers and other transit

personnel are sensitive to passenger needs, and know how to provide assistance on-board the vehicle.

Pedestrian Access and Land Use Coordination: The need to improve accessibility to and from bus stops and transfer centers (sidewalks, curb cuts, curb ramps, crosswalks) was widely voiced throughout the outreach meetings. Meeting attendees also mentioned the need to better coordinate land use development with the provision of transit service, especially in lower-density communities. The location of housing and facilities serving people with disabilities or older adults in areas that are inaccessible by transit was also cited as a source of concern.

Overlapping Transportation Needs

The transportation needs and gaps of older adults and persons with disabilities, as well as those of the region's low-income population (as identified in the low-income component of the Coordinated Plan) were reviewed. There is significant overlap or consistency in the barriers and gaps expressed by all three populations of concern. A comprehensive list of the overlapping needs is found in Chapter 6.

Potential Solutions

Potential solutions are identified to address the gaps that emerged from the outreach process and review of local plans. These suggested solutions are grouped into five categories:

- | Additions or improvements to paratransit service that exceed ADA requirements
- | Additions or improvements to demand-responsive services other than ADA paratransit
- | Additions or improvements to transit services
- | Improved access to fixed-route transit services
- | Information and assistance

These solutions represent categories of potential projects, which could be eligible for SAFETEA-LU funds subject to this plan, or other local sources of funding. Chapter 7 of the report describes the solutions in more detail, including implementation steps.

Strategies to Enhance Human Service Transportation Coordination

In addition to considering which projects or solutions could directly address transportation gaps, it is important to consider how best to coordinate services so that existing resources can be used as efficiently as possible. The following proposed strategies offer opportunities to improve coordination of service delivery, and were developed with input from key stakeholders already involved in the planning and implementation of human service transportation.

- ┆ Enhance land use and transportation coordination
- ┆ Promote enhanced pedestrian access to public transit and other alternative modes of travel
- ┆ Promote coordinated advocacy and improve efforts to coordinate funding with human service agencies
- ┆ Improve interjurisdictional and intermodal travel
- ┆ Develop and implement mobility management approaches

Successful implementation of the coordination strategies will require the joint cooperation and effort of multiple entities that may or may not have coordinated in the past. Often, a champion is needed to assume leadership and manage implementation efforts; this “champion” may vary from case to case. As illustrated in Figure ES-1, implementing some strategies may require leadership on the part of cities or other local jurisdictions, while others may be assumed by social service agencies, transit agencies, Congestion Management Agencies (CMAs), advocacy groups, MTC or designated mobility managers.

Figure ES-1 Implementation Steps for Coordination Strategies

Enhanced Land Use and Transportation Coordination	Partners/Stakeholders
Provide documentation of the issue	TBD
Document examples of policies that have effectively addressed locational decisions	TBD
Engage key stakeholders in the development of a regional strategy.	JPC, CMAs
Build on the regional FOCUS program to incentivize positive locational decisions	JPC, CMAs through T-Plus program
Promote Alternative Modes of Travel, including Improved Pedestrian Access to Transit	Partners/Stakeholders
Build upon previous MTC planning work specific to pedestrian safety, and disseminate the results to other partner organizations.	Local jurisdictions
Encourage pedestrian-related planning at the community level through community-based transportation plans (CBTPs).	MTC, CMAs
Encourage the development of countywide taxi ordinances that would enhance the provision of accessible taxi programs	Counties, CMAs
Distribute and share the results of the recently completed Marin County Enhanced Taxi Services Project with EDAC, transit and paratransit program staff and other interested stakeholders.	Marin County, PTCC Accessibility Committee, EDAC, Counties and Cities
Promote Coordinated Advocacy and Improve Efforts to Coordinate Funding with Human Service Agencies	Partners/Stakeholders
Develop a comprehensive legislative platform to address improved human service transportation coordination	MTC, Bay Area Partnership, transit agencies and other local stakeholders
Re-initiate previous MTC legislative efforts to promote human service transportation in California.	MTC, Advisory Committees, Bay Area Partnership, human service agencies, other local stakeholders
Identify a legislator willing to sponsor statewide legislation intended to address the platform defined above.	MTC, elected official(s)
Actively seek the support of partner organizations such as National Council of Independent Living (NCIL), The World Institute on Disability (WID), the Transportation and Land Use Coalition (TALC) and others to place greater emphasis on elderly and disabled transportation needs in their advocacy efforts.	Local advocacy organizations, MTC Advisory Committees
Improved Interjurisdictional Travel	Partners/Stakeholders
Prioritize connectivity improvements at transit hubs	MTC, MTC Advisory Committees, transit agencies, human service agencies
Prior to full implementation, test key connectivity improvements such as improved wayfinding signage, or 511 improvements to ensure their accessibility for senior and disabled populations.	MTC, MTC Advisory Committees, transit agencies, human service agencies
Review the status of the SB 1474 Plan (MTC Resolution 3055) to ensure respective coordination policies, such as the paratransit interagency guidelines, are accurate and being implemented.	MTC, MTC advisory committees, transit operators, PTCC Accessibility Committee, human service agencies
Mobility Management	Partners/Stakeholders
Encourage the development of Mobility Managers	TBD
Research and share examples of mobility manger models of excellence established elsewhere.	MTC, human service agencies, Transit and Paratransit Operators, PCCs
Test and implement technology that could track individual client activity on a vehicle supported with multiple fund sources.	MTC, local stakeholders

Conclusion/Next Steps

The next steps in completing this planning process include the following:

Adopt the Coordinated Plan

In November 2006, the Commission adopted MTC Resolution 3787, which documented the transportation needs and strategies specific to low-income persons. The plan built upon previous planning efforts undertaken by MTC in support of improving transportation in Bay Area communities of concern. As a first step, MTC staff will seek amendment of MTC Resolution 3787 to include the results of this planning effort. Together, they will comprise MTC's Coordinated Public Transit-Human Service Transportation Plan.

Inform SAFETEA-LU Funding Decisions

As the designated recipient of JARC and New Freedom funds for the San Francisco Bay Area Urbanized Area, MTC is required to select projects with these funds that are (1) derived from this plan, and (2) selected through a competitive procurement process. The State Department of Transportation (Caltrans) will continue to administer and be responsible to select projects for use of Section 5310 funds. Chapter 1 of this report discusses eligible uses for and recipients of these funds.

In addition, local entities can develop the transportation solutions proposed in the plan to respond to SAFETEA-LU, as well as other funding opportunities.

Plan Update

Federal guidelines indicate that at a minimum, the coordinated plan should follow the update cycles for the Regional Transportation Plan (RTP). MTC will next update its RTP in 2009, which would provide an opportunity to directly link the development of the coordinated plan with the RTP. Because projects must be derived from the plan, it may also be necessary to update or amend the list of projects to coincide with the Lifeline Transportation funding cycles, or other funding cycles specific to fund sources subject to this Plan.

Chapter 1. Introduction/Background

The purpose of this project is to prepare a Coordinated Public Transit-Human Services Transportation Plan for the San Francisco Bay Area that is consistent with the requirements of the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU). The planning effort is overseen by The Metropolitan Transportation Commission (MTC). MTC is both the Regional Transportation Planning Agency (RTPA) and the Metropolitan Planning Organization (MPO) for the nine-county San Francisco Bay Area—Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Solano and Sonoma Counties.

SAFETEA-LU was signed into law on August 10, 2005, and authorizes the provision of \$286.4 billion in guaranteed funding for federal surface transportation programs over five years (Fiscal Years 2005-2009), including \$52.6 billion for federal transit programs. Starting in Fiscal Year 2007, projects funded through three programs included in SAFETEA-LU--the Job Access and Reverse Commute Program (JARC - Section 5316), New Freedom (Section 5317) and the Formula Program for Elderly Individuals and Individuals with Disabilities (Section 5310)--are required to be derived from a locally developed, coordinated public transit-human services transportation plan. SAFETEA-LU guidance issued by the Federal Transportation Administration (FTA) indicates that the plan should be a “unified, comprehensive strategy for public transportation service delivery that identifies the transportation needs of individuals with disabilities, older adults, and individuals with limited income, laying out strategies for meeting these needs, and prioritizing services.”¹

Because considerable resources have recently been dedicated toward planning efforts that have focused on the transportation needs of low-income residents in the Bay Area, MTC staff has already completed the low-income component of the coordinated plan by synthesizing the results from these efforts. This element of the plan focuses on transportation needs of older adults and persons with disabilities. It serves as a parallel effort to the low-income

¹ Federal Register: March 15, 2006 (Volume 71, Number 50, page 13458)

component and together they comprise the Coordinated Public Transit-Human Services Transportation Plan for the San Francisco Bay Area.

SAFETEA-LU Planning Requirements

The Federal Transit Administration (FTA) issued three program circulars (FTA C9770.1F, FTA C 9050.1, FTA C 9045.1) effective May 1, 2007, to provide guidance on the administration of the three programs subject to this planning requirement. They stipulate that projects selected for funding under the Section 5310, JARC, and New Freedom programs be “derived from a locally developed, coordinated public transit-human services transportation plan” and that the plan be “developed through a process that includes representatives of public, private, and nonprofit transportation and human services providers and participation by members of the public.”

This federal guidance specifies four required elements of the plan, as follows:

1. An assessment of available services that identifies current transportation providers (public, private, and non-profit);
2. An assessment of transportation needs for individuals with disabilities, older adults, and people with low incomes. This assessment can be based on the experiences and perceptions of the planning partners or on more sophisticated data collection efforts, and gaps in service;
3. Strategies, activities, and/or projects to address the identified gaps between current services and needs, as well as opportunities to achieve efficiencies in service delivery; and
4. Priorities for implementation based on resources (from multiple program sources), time, and feasibility for implementing specific strategies and/or activities.

The three sources of funds subject to this plan are intended to improve the mobility status of persons with disabilities, older adults, and low-income individuals, as described below.

Job Access and Reverse Commute (JARC, Section 5316)

The purpose of the JARC program is to fund local programs that offer job access services for low-income individuals. JARC funds are distributed to states on a formula basis, depending on that state's rate of low-income population. This approach differs from previous funding cycles, when grants were awarded purely through Congressional appropriations, or earmarks. JARC funds will pay for up to 50% of operating costs and 80% for capital costs. The remaining funds are required to be provided through local match sources.

Examples of eligible JARC projects include, but are not limited to:

- | Late-night and weekend service
- | Guaranteed Ride Home Programs
- | Vanpools or shuttle services to improve access to employment or training sites
- | Car-share or other projects to improve access to autos
- | Access to child care and training
- | Mobility Management Activities

New Freedom Program (Section 5317)

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. The New Freedom Program seeks to reduce barriers to transportation services and expand the transportation mobility options available to people with disabilities beyond the requirements of the ADA.

New Freedom funds are available for capital and operating expenses that support new public transportation services beyond those required by the ADA and new public transportation alternatives beyond those required by the ADA designed to assist individuals with disabilities with accessing transportation services, including transportation to and from jobs and employment support services. The same match requirements as for JARC apply for the New Freedom Program.

Examples of eligible New Freedom Program projects include, but are not limited to:

- | Expansion of paratransit service hours or service area beyond minimal requirements
- | Purchase of accessible taxi or other vehicles
- | Promotion of accessible ride sharing or vanpool programs
- | Administration of volunteer programs
- | Building curb-cuts, providing accessible bus stops
- | Travel Training programs
- | Mobility Management Activities

Elderly and Disabled Program (Section 5310)

Funds for this program are allocated by a population-based formula to each state and are available for capital expenses to support the provision of transportation services to meet the special needs of elderly persons and persons with disabilities. In California, a 11.47% local match is required for the federal funds. Examples of capital expenses include, but are not limited to:

- | Buses and vans
- | Radios and communication equipment
- | Vehicle shelters
- | Wheelchair lifts
- | Computer hardware and software
- | Transit related Intelligent Transportation Systems (ITS) or other technology
- | Mobility Management Activities

Local Match Requirements

Each federal program requires a share of total program costs be derived from local sources, which cannot include federal Department of Transportation funds. Some examples of local match that can be used for any or all of the local share include: state or local appropriations; other non-DOT federal funds;

dedicated tax revenues; private donations; revenue from human service contracts; toll revenue credits; private donations; and revenue from advertising and concessions. In-kind contributions, such as donations, staff time or volunteer services, can also be counted toward the local match as long as the value of each is documented and supported, represents a cost which would otherwise be eligible under the program, and is included in the net project costs in the project budget.

Project Goals

MTC serves as the designated recipient for the urbanized portions of JARC and New Freedom funds for the region.² MTC is required to distribute these funds to local entities through a competitive process, and, starting in Fiscal Year 2007, to certify that projects funded are derived from the region's coordinated plan. The overarching goal of this planning effort, then, is to respond to SAFETEA-LU requirements for receiving these federal funds.

The plan also provides an opportunity for a diverse range of stakeholders with a common interest in human service transportation to convene and collaborate on how best to provide transportation services for these targeted populations. Specifically, the stakeholders are called upon to identify service gaps and/or barriers, strategize on solutions most appropriate to meet these needs based on local circumstances, and prioritize these needs for inclusion in the plan.

Indeed, stakeholder outreach and participation is a key element to the development of this plan, and federal guidance issued by FTA specifically requires this participation, and recommends that it come from a broad base of groups and organizations involved in the coordinated planning process, including (but not limited to): area transportation planning agencies, transit riders and potential riders, public transportation providers, private transportation providers, non-profit transportation providers, human service agencies funding and/or supporting access for human services, and other government agencies that administer programs for targeted population,

² The California Department of Transportation serves as the designated recipient for JARC and New Freedom funds in the small urbanized and rural areas, and all Section 5310 funds for the state.

advocacy organizations, community-based organizations, elected officials, and tribal representatives.³

This plan is intended both to capture those local stakeholder discussions, and to establish the framework for potential future planning and coordination activities.

Federal and State Roles to Promote Human Service Transportation Coordination

Incentives to coordinate human services transportation programs are defined and elaborated upon in numerous initiatives and documents. Coordination can enhance transportation access, minimize duplication of services, and facilitate cost-effective solutions with available resources. Enhanced coordination also results in joint ownership and oversight of service delivery by both human service and transportation service agencies. The requirements of SAFETEA-LU build upon previous federal initiatives intended to enhance social service transportation coordination. Among these are:

- | *Presidential Executive Order:* In February 2004, President Bush signed an Executive Order establishing an Interagency Transportation Coordinating Council on Access and Mobility to focus 10 federal agencies on the coordination agenda. It may be found at www.whitehouse.gov/news/releases/2004/02/20040224-9.html
- | *A Framework for Action:* The Framework for Action is a self-assessment tool that states and communities can use to identify areas of success and highlight the actions still needed to improve the coordination of human service transportation. This tool has been developed through the United We Ride initiative sponsored by FTA, and can be found on the United We Ride website: http://www.unitedweride.gov/1_81_ENG_HTML.htm
- | *Medicaid Transportation Initiatives:*

Transit Passes: Federal regulations require that Medicaid eligible persons who need transportation for non-emergent medical care be provided transportation. For many people, the most cost-effective way to provide this transportation is with public transportation. Medicaid rules now allow

³ Federal Register: March 15, 2006 (Volume 71, Number 50, pages 13459-60)

the purchase of a monthly bus pass as an allowable Medicaid program expense. While this has proven to be a cost-effective method of providing non-emergency medical transportation for Medicaid eligible persons in many states, California has yet to allow the use of Medicaid funds to purchase transit passes.

- | *Previous research:* Numerous studies and reports have documented the benefits of enhanced coordination efforts among federal programs that fund or sponsor transportation for their clients.⁴

The following chapter describes the methodology that was followed to complete this component of the plan.

⁴ Examples include United States General Accounting Office (GAO) reports to Congress entitled *Transportation Disadvantaged Populations, Some Coordination Efforts Among Programs Providing Transportation, but Obstacles Persist*, (June 2003) and *Transportation Disadvantaged Seniors—Efforts to Enhance Senior Mobility Could Benefit From Additional Guidance and Information*, (August 2004).

Chapter 2. Project Methodology

As mentioned in Chapter 1, the four required elements of a coordinated plan, as outlined by FTA in the May 15, 2007 guidance for the JARC, New Freedom and Section 5310 programs are 1) an assessment of current transportation services, 2) an assessment of transportation needs, 3) strategies, activities and/or projects to address the identified transportation needs (as well as ways to improved efficiencies), and 4) implementation priorities based on funding, feasibility, time, etc. This chapter describes the steps that were undertaken to develop these elements of the Bay Area's coordinated plan.

Literature Search/Best Practices

A review was conducted of recent local studies that have examined transportation needs in the Bay Area, particularly those of elderly and disabled individuals. The purpose of this step was to consider the findings emerging from these plans as a starting point for considering unmet transit needs. The results of the literature review are incorporated in Appendix A.

Secondly, a peer review was completed of other coordination activities nationwide, particularly focused on those in large metropolitan regions. A peer review is a useful tool for providing insight into how other regions and agencies address transportation coordination. The lessons learned based on their experience with transportation coordination provide valuable information for the San Francisco Bay area. This information was gathered directly from individuals involved in coordination activities in these areas, through questionnaires and telephone interviews asking them to describe their experiences, and supplemented with research of published plans and studies related to coordination. Appendix B documents the peer review findings and best practices.

Demographic Profile

A demographic profile of the service area was prepared using census data and other relevant planning documents. This step establishes the framework for better understanding the local characteristics of the study area, with a focus on

the two population groups subject to this component of the plan: persons with disabilities and older adults.

Document Existing Transportation Services

This step involves documenting the range of public transportation services that already exist in the study area. These services include public fixed route and paratransit services, and transportation services provided or sponsored by other social service agencies. Information about public transit and paratransit was gleaned from existing resources as specified in the report, and information regarding services provided by other social service agencies was collected through an inventory completed as part of this project. Appendix C provides the complete inventory results.

Stakeholder Involvement

Stakeholder involvement and public participation was implemented in a three-pronged approach, as described below.

Public Outreach

A series of public outreach meetings was convened in each of the nine Bay Area counties in order to directly reach members of the public, including users or potential users of public transit programs. The purpose of the meetings was to directly solicit the views and experiences of older adults and persons with disabilities regarding transportation barriers they face, and generate discussion regarding potential solutions and the criteria to be used for prioritizing these solutions. Specific efforts were made to engage non-traditional stakeholder groups, such as non-English speaking populations, Native Americans, etc. Attendees also included public and private transportation providers.

The outreach team conducting the meetings consisted of representatives from both the senior and disability communities, as well as staff from Nelson\Nygaard Consulting Associates, the consultant firm hired to complete the plan. The non-profit group TEAMS – or Transformation through Education and Mutual Support – assisted with senior outreach efforts. TEAMS, which is based in Alameda County, has extensive experience with grassroots organizing of seniors focused on mobility issues. The Berkeley/Oakland Center for

Independent Living (CIL) assisted with outreach to the disability community. The CIL, the first of its kind in the U.S., has deep roots in the disability community, and has worked extensively in the area of accessible transportation for more than three decades. This approach allowed for a pro-active approach in setting up outreach meetings, structuring the agenda, and summarizing key findings.

Stakeholder Interviews

A second strategy employed was to discuss human service transportation coordination in depth with a broad range of stakeholders with a vested interest in coordination, including representatives from human service agencies, transportation providers, advocacy organizations and others. The goals of the stakeholder interviews were established as follows:

- | Confirm barriers that may prevent effective coordination
- | Focus on potential solutions and strategies that could enhance coordination
- | Summarize the findings to identify key issues of concern, or strategies most feasible to pursue

Focus Group

Finally, the public outreach process included convening a focus group in Contra Costa County.

The goals for this meeting were to:

- | Select one county (Contra Costa) to examine transportation coordination issues in depth
- | Provide a range of stakeholders involved in human service transportation in Contra Costa County an opportunity to express their views and opinions
- | Identify successful coordination strategies and barriers that prevent effective coordination.

Contra Costa County was selected for the focus group because a few studies have recently been completed that have focused on improving transportation delivery in the county, and engaged both public transit and human services

agencies in the process. Following these studies, coordination activities between transit agencies and human service and non-profit agencies have been initiated.

In addition, MTC convened a Technical Advisory Committee (TAC), comprised of key stakeholders, to provide direct oversight for this project. The TAC met periodically throughout the project, and had an opportunity to review and provide input on key deliverables.

Needs Assessment

An important step in completing the plan was to identify transportation service needs or gaps. The needs assessment provides the basis for recognizing where—and how—service for the population groups of concern needs to be improved.

The primary focus of the outreach meetings, as described above, was to collect and synthesize information about transportation gaps and barriers faced by seniors and persons with disabilities. This information was integrated with the findings from the low-income component of the coordinated plan. The results of the needs assessment are summarized in Chapter 6, and comprehensive lists of unmet needs identified in each county are included in Appendix D.

Identification of Solutions

Coupled with the need to identify transportation gaps is the need to identify corresponding potential solutions to address them. The solutions include a range of possibilities— one solution may address several transportation gaps. Likewise, some gaps are addressed by multiple solutions. These solutions differ from specific projects in that they may not yet be fully defined, e.g. a project sponsor is not identified, or project costs are not estimated.

Coordination Strategies

In addition to considering which projects or solutions could directly address these gaps, it is important to consider how best to coordinate services so that existing resources can be used as efficiently as possible. These strategies outline a more comprehensive approach to service delivery with implications

beyond the immediate funding of local projects, which may be short-term in nature. Examination of these coordination strategies is intended to result in consideration of policy revisions, infrastructure improvements, and coordinated advocacy and planning efforts which, in the long run, can have more profound results to address service deficiencies.

A range of potential coordination strategies was identified primarily through direct consultation with a number of key stakeholders already involved in the planning and implementation of human service transportation. These stakeholders were asked to identify successful coordination efforts, as well as barriers, or additional steps that are needed to promote coordination. These strategies were then reviewed and discussed in detail at the focus group convened in Contra Costa County.

Chapter 3. Demographic Profile

The San Francisco Bay Area is a geographically diverse metropolitan region that surrounds the San Francisco Bay. It encompasses the cities of San Francisco, San Jose, and Oakland, and their many suburbs. It also includes the smaller urban and rural areas of the North Bay. Home to almost seven million people, it comprises cities, towns, military bases, airports, and associated regional, state, and national parks over nine counties connected by a network of roads, highways, railroads, bridges, and commuter rail. San Jose is now the largest city in the Bay Area and the tenth largest city in America. A map of the region is illustrated in Figure 3-1.

This chapter of the plan reports on demographic information pertaining to low income populations, older adults, and persons with disabilities in the Bay Area. Basic population characteristics of these three populations are illustrated in Figure 3-2. Additional information follows, examining the overlap among these groups; for example, the extent to which older adults are also in poverty, or have a disabling condition.

Figure 3-1 Map of Nine Bay Area Counties



Figure 3-2: Basic Population Characteristics: A Snapshot

County	Total population	% persons aged 65+	% persons w/ disability ¹	% below poverty level	% low-income ²
Alameda	1,421,308	10.1	11.6	11.0	24.1
Contra Costa	1,006,486	11.0	12.8	7.6	18.7
Marin	235,609	14.2	11.0	6.6	15.7
Napa	127,445	13.1	11.6	8.3	23.3
San Francisco	719,077	14.6	14.4	11.3	26.0
San Mateo	689,271	12.6	10.3	5.8	15.8
Santa Clara	1,669,890	10.1	9.4	7.5	17.9
Solano	395,426	10.2	13.6	8.3	22.6
Sonoma	453,850	12.2	13.8	8.1	22.2
Bay Area	6,718,362	11.3	11.7	8.6	20.6

- | 11.7% of Bay Area population reports a disability
- | 11.3% of population is aged 65 or older
- | 8.5% of population is below federal poverty level
- | 20.6% of population is below 200% of federal poverty level
- | 22% of persons with disabilities are low-income
- | 16% of older adults are low-income
- | 38% of older adults have a disability

Low Income Population

Figure 3-2 illustrates the Bay Area population by poverty level. Nearly 9% of the Bay Area population earns below 100% of the federal poverty level. In previous studies that focus on the Bay Area’s low-income population, MTC has doubled the poverty level to 200% to account for the high cost of living in the Bay Area. This percentage is consistent with several Bay Area organizations that use income to determine program eligibility such as the Bay Area Food Banks and the Women Infant and Children (WIC) program that use 185% of the federal poverty level as the benchmark to make eligibility determinations. When

¹ Disability status for persons 5 years and older

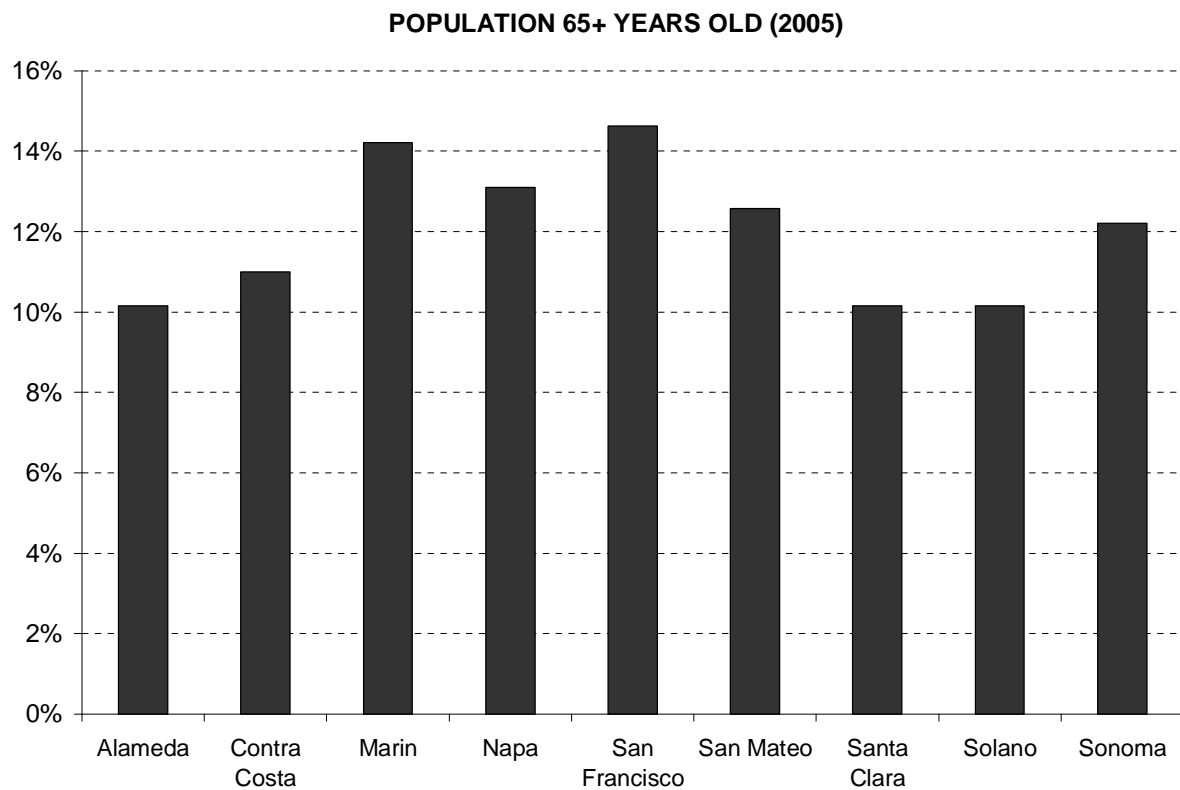
² Defined at 200% of federal poverty level

looking at this threshold, approximately 21% of Bay Area residents earn below 200% of the federal poverty level.

The Older Adult Population

In the Bay Area as a whole there were about 762,000 people age 65 or older in 2005, according to the U.S. Census's American Community Survey. For purposes of this plan, this group will be called "older adults." Older adults accounted for 11.3% of the Bay Area's population in 2005. The percentage of older adults varies considerably from county to county, from a low of 10.1% in Santa Clara and Sonoma counties to a high of 14.6% in San Francisco and 14.2% in Marin County. Figure 3-3 provides the percentages for all nine counties. These percentages mask great variation within counties. For example, within Santa Clara County there are pockets with very high concentrations of older adults.

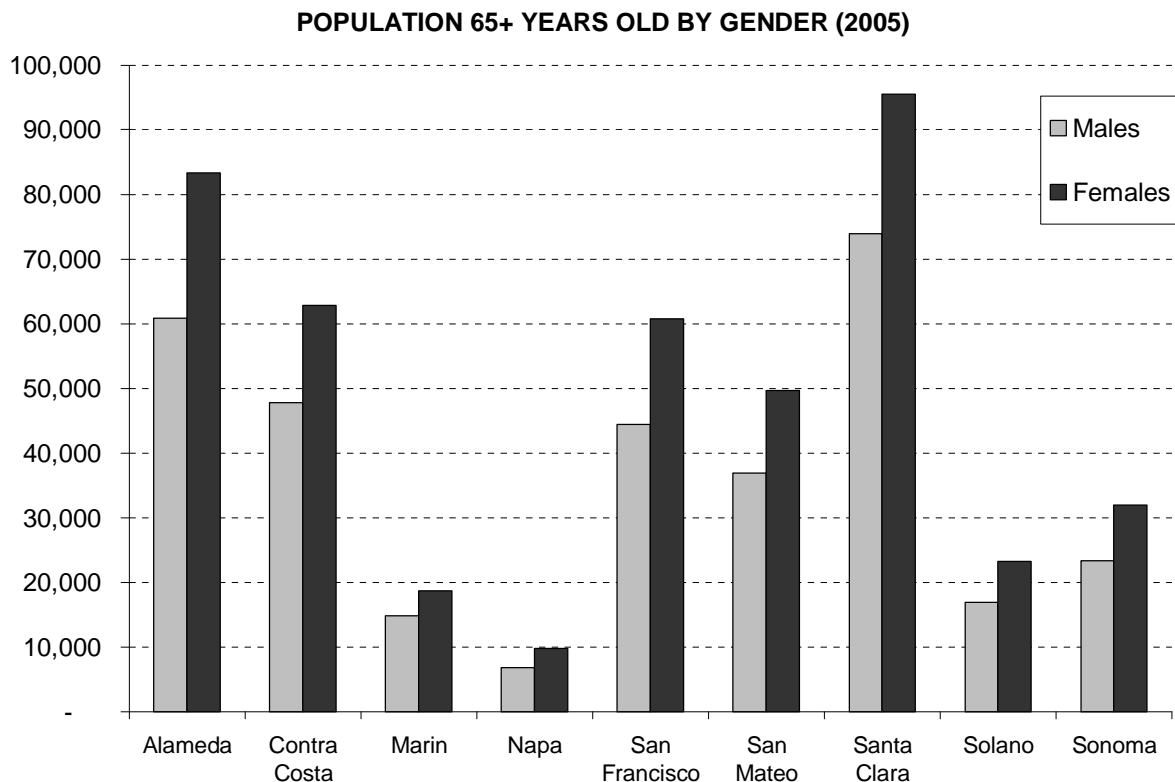
Figure 3-1: Older Adults as a Percentage of Total Population in Each County



Data Source: US American Community Survey 2005

A low percentage of older adults does not mean that there are few older adults. In fact, the largest numbers of older adults are in counties with lower-than-average percentages, including Santa Clara and Alameda as shown in Figure 3-4. There are significantly more older women than men.

Figure 3-2: Older Adult Population in Each County

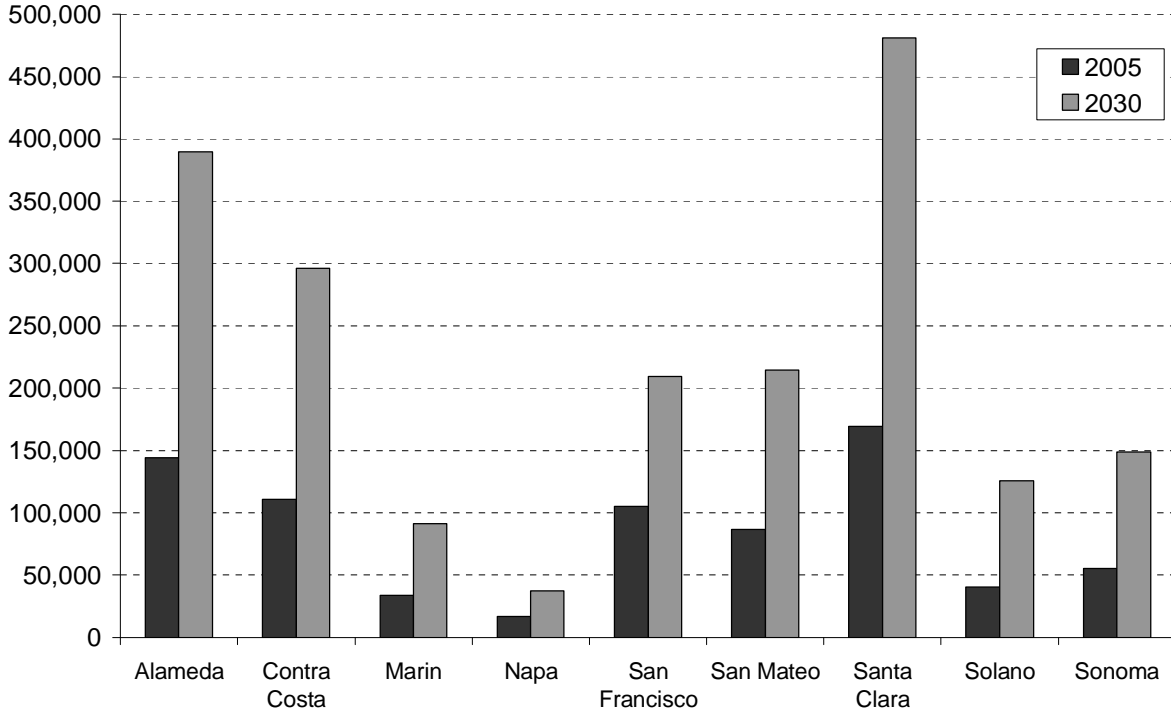


Data Source: US American Community Survey 2005

According to projections prepared by the Association of Bay Area Governments, in 2030 the older adult population will have increased by 162% compared to 2005. Figure 3-5 provides county-by-county detail. The highest growth rates are expected to be in Santa Clara and Solano counties, where the number of older adults is expected to grow by 184% and 213% respectively. In Napa and San Francisco by comparison, the number of older adults is expected to increase by 123% and 99% respectively. These totals hide differences in the composition of the older adult population. For example, San Francisco may have many more “very old” adults, 80 years and older, than other counties.

Figure 3-3: Growth in the Older Adult Population, 2005 to 2030

GROWTH IN OLDER POPULATION 2005 - 2030



Sources: U.S. Census 2005 American Community Survey, ABAG Projections 2005.

About 38% of older adults have some type of disability according to the 2005 American Community Survey, as shown in Figure 3-6. The Census definition of a disability is provided in the next section along with more detailed demographics of the disabled population. Older adults are most likely to be disabled in San Francisco and Solano counties, and least likely to be disabled in Marin County.

Figure 3-4: Older Adults with a Disability

County	Total Older Adults	Older Adults with a Disability	Percent of Older Adults with a Disability
Alameda	144,255	55,282	38%
Contra Costa	110,646	40,558	37%
Marin	33,477	9,285	28%
Napa	16,687	6,252	37%
San Francisco	105,176	45,474	43%
San Mateo	86,631	30,316	35%
Santa Clara	169,440	63,476	37%
Solano	40,180	16,725	42%
Sonoma	55,387	21,704	39%
TOTAL	761,879	289,072	38%

Source: American Community Survey, 2005

About 24% of older adults live in households with incomes less than 200% of the Federal poverty level (Figure 3-7). In general, the percent of low-income people among older adults is similar to that for the general population. The key exception is San Francisco, where 35% of older adults live in low-income households compared to 26% of all people. Similar circumstances exist for the most urbanized areas of other counties, such as Oakland, Richmond, and some parts of San Jose.

Figure 3-5 Low-Income Older Adult Population

County	Percent in Low-Income Households	
	Older Adults	All People
Alameda	27%	24%
Contra Costa	20%	19%
Marin	14%	16%
Napa	22%	23%
San Francisco	35%	26%
San Mateo	17%	16%
Santa Clara	22%	18%
Solano	23%	23%
Sonoma	22%	22%
TOTAL	24%	21%

Note: "Low income" = Living in households with income less than 200% of Federal Poverty Level
 Source: 2000 U.S. Census

About 15% of older adults live in households with no motor vehicle, as shown in Figure 3-8. By comparison, only 7% of the total population lives in households with no motor vehicle. A similar pattern exists in all nine counties. San Francisco and Alameda have the highest percentages of older adults (and others) without access to a vehicle, while Marin, Napa, Solano, and Sonoma have the lowest. Note that "access to a vehicle" does not indicate whether or not the individual is able to drive or has a license.

Figure 3-6: Older Adult Population with No Access to a Vehicle

County	Percent with No Vehicle (Older Adults)	Percent with No Vehicle (All People)
Alameda	15%	8%
Contra Costa	10%	5%
Marin	8%	4%
Napa	9%	4%
San Francisco	36%	21%
San Mateo	10%	4%
Santa Clara	11%	4%
Solano	9%	5%
Sonoma	9%	4%
TOTAL	15%	7%

Source: U.S. Census Public Use Microsample (2000)

People with Disabilities

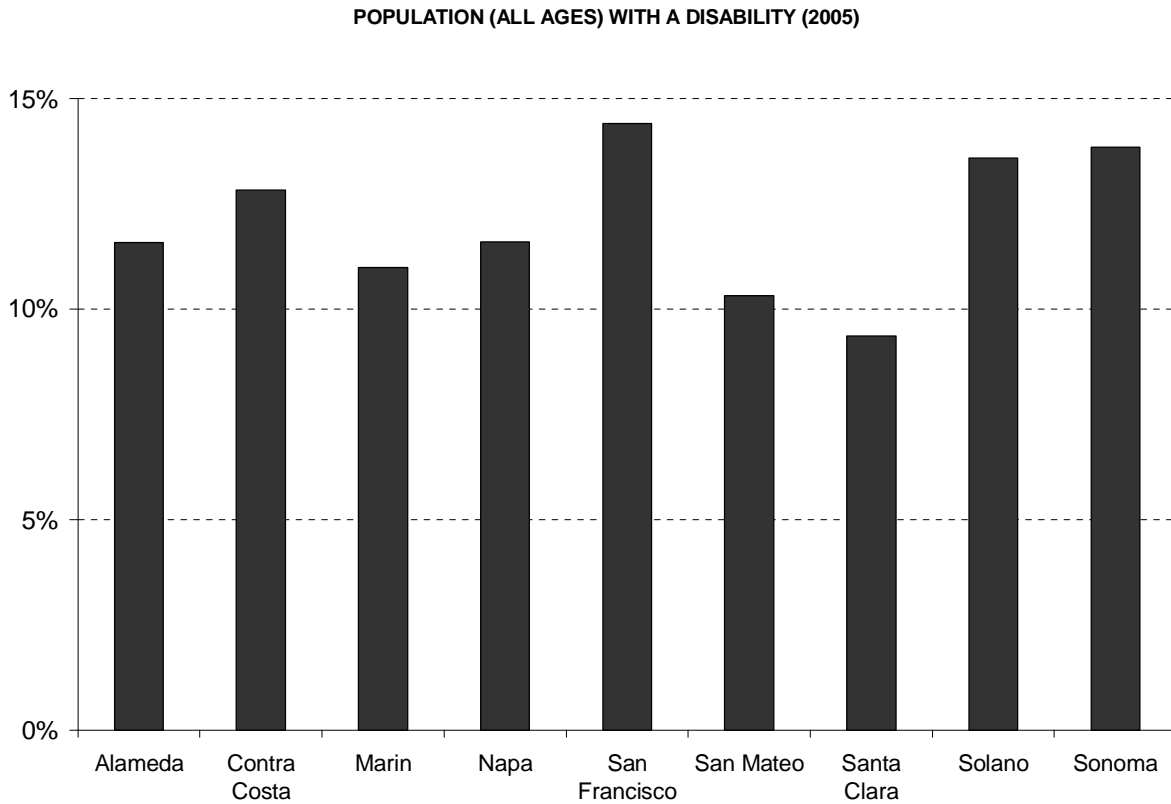
There were about 726,000 people with a disability living in the Bay Area in 2005 according to the U.S. Census’s American Community Survey. This amounts to about 12% of the population age five and older. Figure 3-9 provides detail by county.

In these figures, a person is counted as having a disability who:

- l Has long-lasting blindness, deafness, or a severe vision or hearing impairment; OR
- l Has a long-lasting condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying; OR
- l Because of a physical, mental, or emotional condition lasting 6 months or more, has difficulty learning, remembering, or concentrating; dressing, bathing, or getting around inside the home; or (if 16 years old or over) going outside the home alone to shop or visit a doctor’s office or working at a job or business.³

³ “American Community Survey/Puerto Rico Community Survey 2005 Subject Definitions,” U.S. Bureau of the Census (no date) (http://www.census.gov/acs/www/Downloads/2005/usedata/Subject_Definitions.pdf)

Figure 3-7: Percent of People with a Disability

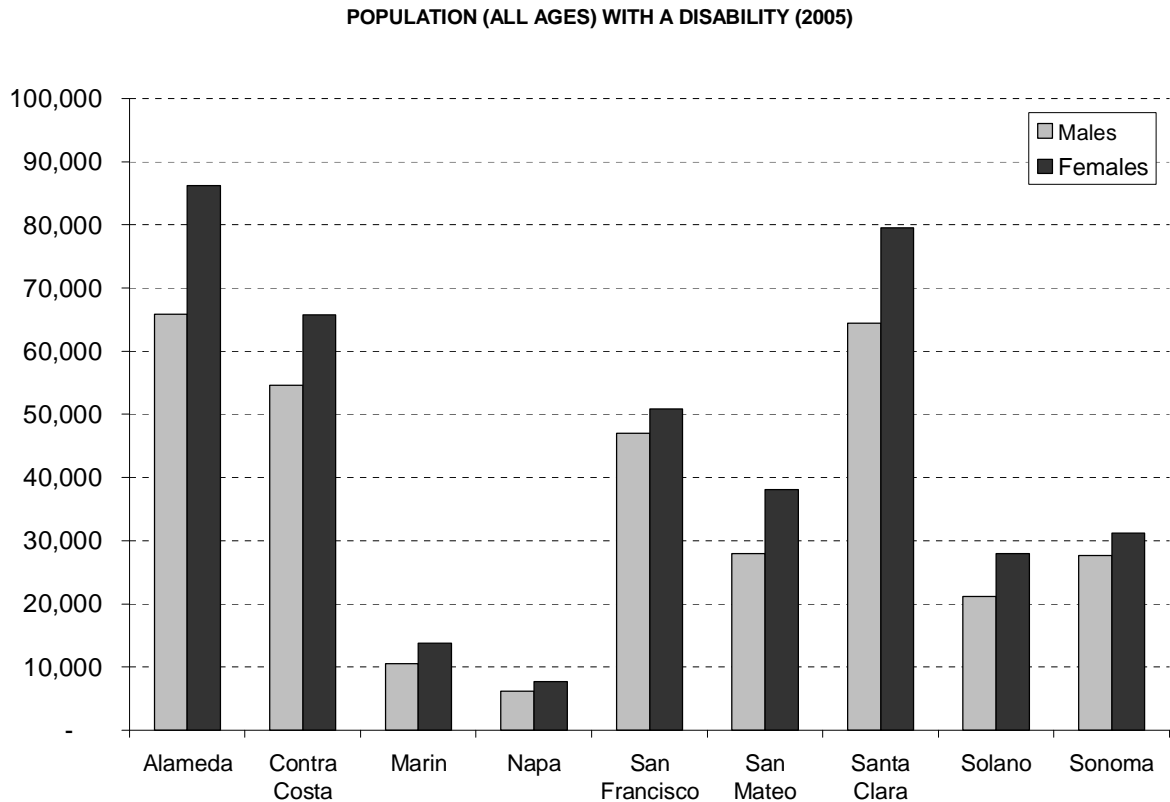


Source: American Community Survey, 2005 (Age 5 and older).

People who are disabled by this definition are not necessarily eligible for ADA paratransit, although they may be eligible for discounted transit fares.

Some counties with lower-than-average percentages have very large total numbers of people with disabilities, as shown in Figure 3-10. Notably, Santa Clara has the second highest number of people with disabilities despite having the lowest percentage. San Francisco has the highest percentage of people with disabilities. A majority of people with disabilities (55%) are female, possibly because many people with disabilities are older adults.

Figure 3-8: People with a Disability in Each County



Source: American Community Survey, 2005. (Age 5 and older).

About 22% of people with a disability live in households with income below 150% of the Federal poverty level compared to 15% for the general population. In every county, people with disabilities are more likely to be low income than the general population. About 13% of people with disabilities live in households without access to a motor vehicle. The details by county, as shown in Figure 3-11, are very similar to those for older adults as shown before.

Figure 3-9: Low Income Status and Access to a Vehicle for People with Disabilities

	Percent of Disabled in Low-Income Households	Percent of Disabled with No Vehicle
Alameda	24%	15%
Contra Costa	20	10
Marin	19	9
Napa	22	10
San Francisco	30	32
San Mateo	17	9
Santa Clara	18	9
Solano	20	8
Sonoma	23	8
TOTAL	22%	13%

Note: "Low income" = Living in households with income less than 150% of Federal Poverty Level

Source: U.S. Census Public Use Microsample (2000)

Chapter 4. Existing Transportation Resources

Public Transportation

The transportation network in the Bay Area is extensive, with more than 1,400 miles of highways, over 300 miles of carpool lanes, eight toll bridges, 19,600 miles of local streets and roads, 9,860 miles of transit routes (including some 400 miles of rail transit), five commuter ferry lines, as well as bicycle and pedestrian routes.¹ Over twenty public transit operators provide bus and rail service throughout the region.

Since the passage of the Americans with Disabilities Act (ADA) in 1990, all public transit operators are responsible to make their systems accessible and usable by persons with disabilities. This means they operate vehicles that are wheelchair accessible. Other accommodations are also required to ensure the system's full accessibility by persons with disabilities. For persons whose disability prevents use of public transit even if that system is accessible, complementary paratransit service is provided. Paratransit is required to be provided along the same routes and during the same hours that the fixed route operates.

Human Service Transportation Programs

In addition to public transit and paratransit programs, a variety of human service agencies directly provide, arrange, or otherwise sponsor transportation for their clients. Often, these programs are not well coordinated with public transit systems and, in fact, may duplicate services or overlap with them. Funding provided for transportation services are usually dedicated for a specific clientele (i.e. veterans, Medicaid eligible persons, seniors attending meal programs, etc.) and cannot easily be co-mingled with other funding sources. For the most part, these social service agencies are not primarily in the transportation business; rather, transportation is an auxiliary and not a core service.

¹ MTC Citizens Guide, http://www.mtc.ca.gov/library/citizens_guide/basics.htm

Furthermore, it is often difficult to develop an accurate and comprehensive picture of the full network of service providers, including the sources of funds used to support these services, levels of service provided, and other basic program characteristics.

One element of this planning effort, therefore, consisted of conducting an inventory in order to identify those agencies within the Bay Area that provide social service transportation, and to collect basic information about those programs. This survey effort included public transit agencies providing ADA paratransit and a range of public and private sector agencies providing transportation for clients, program participants, specific populations (such as older adults), or the general public. The inventory is intended to serve as a tool to support coordination by identifying the existing transportation resources in the Bay Area, and documenting current service parameters, geographic coverage and beneficiaries, as well as gaps and duplications in services identified by respondents.

It should be noted, however, that the inventory does not reflect the entire universe of human service transportation providers. A threshold was established for inclusion of agencies in the inventory based on the assumption that coordination efforts among operators of larger transportation programs are likely to produce the most widespread results and benefit the greatest number of people. This threshold was set as those providing 25 or more trips per day and having an annual budget of \$100,000 or more. In those cases in which the agencies contacted did not meet the trip provision and budget threshold, the survey was terminated with only agency information and a basic description of services collected. Because the inventory was limited to human services transportation, it does not include providers such as Greyhound, though services operated by Greyhound and others play important roles in the transportation system. The inventory was completed using a survey tool that was administered during January and February of 2007. Responses were received from 75 of the 83 agencies contacted (a 90% response rate).

Figure 4-1 below illustrates the 10 agencies providing the highest number of trips. It should be noted that not all agency trips were captured through the

inventory; for example, quantifying the level of service provided for non-emergency Medicaid trips has proven illusive and is not reported. Therefore, this chart represents the highest number of trips provided for those agencies that responded to the inventory.

Together, the four Regional Centers, which serve developmentally disabled individuals by transporting them to work or training sites, usually on a daily basis, provide over half the region’s human service transportation.

Figure 4-1: Agencies Providing Highest Number of Trips

Agency	Approximate number of monthly one-way trips
San Andreas Regional Center ²	120,000
SFMTA/Municipal Railway	100,000
East Bay Regional Center ³	102,000
North Bay Regional Center	92,400
Outreach ⁴	92,000
Golden Gate Regional Center	71,980
East Bay Paratransit Consortium	55,000
SamTrans	28,000
Golden Rain Foundation/Rossmoor	19,500*

* Calculated from the figure given for daily number of trips provided

The following tables summarize the range of social service and public transportation programs available in each county. In cases where a contractor provides ADA paratransit on behalf of a transit agency (for example, in the cases of Golden Gate Transit and VTA), the contractor is listed and this relationship is noted. Providers are listed in the county in which they are based, though many have service areas that cross county lines. The final table lists providers identifying multi-county service areas

² Services provided in Santa Clara, Santa Cruz, San Benito and Monterey Counties

³ Estimate based on data submitted in 2001; no recent information is available

⁴ Includes ADA paratransit, JARC, after-school transportation for low-income children, and senior transportation programs

Alameda County

Agency Name	Agency Type		Transportation Service	Cities or Counties Served
	Non-profit	Public		
Alzheimer's Services of the East Bay	X		Weekday transportation between home and Adult Day Health care facilities in Berkeley, Hayward and Oakland	Alameda County and western Contra Costa County
Bay Area Community Services	X		From high-density senior buildings to local shopping location; transportation for occasional recreation group outings	City of Oakland
Center for Elders Independence	X		Transportation for nursing home eligible individuals to adult day health care, medical appointments, social and recreational activities, and nutrition	City of Oakland, northern and central Alameda County, western Contra Costa County
City of Berkeley Division on Aging		X	Transport seniors to and from each of the three Senior Centers in Berkeley. On specific days, seniors are transported to pharmacies, grocery stores and some recreational trips.	City of Berkeley
City of Berkeley Paratransit Services		X	Limited amount of free taxi scrip, wheelchair-van vouchers, and East Bay Paratransit tickets to program registrants.	City of Berkeley
City of Fremont Paratransit		X	Door-to-door shared ride paratransit services for Fremont residents 80+ or people with disabilities; group trips for housing complexes, social clubs, and other community organizations that serve disabled individuals or seniors.	Fremont, Newark and Union City; occasional medical trips outside area
City of Hayward Paratransit Program		X	Paratransit safety net service when East Bay Paratransit is unable to serve a trip. Funds Alzheimers Services of the East Bay (ASEB) to transport Central Alameda County clients to a day program using specially trained staff.	Most Alameda County cities. Some medical trips are provided to out-of-county locations (Palo Alto, Livermore).
City of Oakland		X	Supplements ADA paratransit through taxi, wheelchair vans and shuttle services providing door-to-door subsidized service to individuals who cannot access public transportation	Cities of Oakland and Piedmont
City of Union City		X	ADA paratransit service	City of Union City and parts of Hayward, Fremont and Newark
East Bay Paratransit Consortium		X	ADA paratransit service	Western Alameda and Western Contra Costa Counties; trips to and from San Francisco

Agency Name	Agency Type		Transportation Service	Cities or Counties Served
	Non-profit	Public		
Livermore Amador Valley Transit Authority (LAVTA)		X	ADA paratransit service	Livermore, Pleasanton, and Dublin
Regional Center of the East Bay	X		Transportation to people of all ages to and from their home and day programs, Monday- Friday	Alameda County and Contra Costa County
Spanish Speaking Unity Council	X		The Unity Council will be receiving a vehicle from the 5310 program for transporting seniors from independent living facilities to a senior center and also to medical appointments.	City of Oakland

Contra Costa County

Agency Name	Agency Type		Transportation Service	Cities or Counties Served
	Private non-profit	Public		
Central Contra Costa Transit Authority (CCCTA)		X	ADA paratransit for Central Contra Costa County	Clayton, Concord, Danville, Martinez, Moraga, Orinda, Lafayette, Pleasant Hill, San Ramon, Walnut Creek; Contra Costa County
City of Antioch Senior Bus		X	City-wide paratransit service for seniors with majority of rides to and from the Antioch Senior Center; additional support trips for doctor appointments, shopping and personal services	City of Antioch
Contra Costa ARC	X		Door-to-door services (3 routes) to adults with severe developmental disabilities between home and day program, Monday through Friday; transportation for adults with severe developmental disabilities to activities in the community as part of their day program	Contra Costa County (primarily); Alameda County (Hayward only at this time)
Contra Costa County Employment & Human Services Department (CCC E&HS)		X	Provides transit tickets and passes and taxi rides; significant services for CalWORKs population, including contracted bus service to transport children to school and daycare, and a taxi-based, demand response service to transport clients to employment-related destinations	Contra Costa County
Eastern Contra Costa Transit Authority (ECCTA)		X	ADA and non-ADA paratransit	Antioch, Brentwood, Oakley, Pittsburg, and unincorporated areas of eastern Contra Costa County
Golden Rain Foundation/Rossmoor	X		Paratransit/Dial A Bus service serving downtown Walnut Creek service area, including BART	Walnut Creek, Contra Costa County

Agency Name	Agency Type		Transportation Service	Cities or Counties Served
	Private non-profit	Public		
Guardian Adult Day Health Center	X		Directly-operated vans transporting passengers between their homes and the Center; paratransit service for ADHC participants requiring accessible vehicles.	All of West Contra Costa County (Richmond, San Pablo, El Cerrito, Pinole, Hercules, and unincorporated areas such as El Sobrante)
Mt. Diablo ADHC	X		Client transportation between home and the Center (directly-operated as part of pilot project using vehicles donated by CCCTA); shopping shuttle for seniors (City of Concord)	ADHC clients are mostly from Central and South Contra Costa County. Benicia Breeze trips reimbursed for Solano County clients.
Richmond Paratransit		X	Paratransit service for seniors 65 and older and people with disabilities	Richmond, El Cerrito, El Sobrante, San Pablo, Kensington, North Richmond
Veterans Administration (Contra Costa County)		X (Federal)	Serve veterans, providing eligible patients with transportation from one V.A. to another on a free shuttle for medical appointments only	Sacramento County, Solano County, Contra Costa County, Alameda County
WestCAT		X	Paratransit serving ADA-eligible individuals, seniors over 65, and general public in inaccessible areas and on Saturdays	Pinole, Hercules, Rodeo, Crockett, Port Costa, Tara Hills, Montalvin Manor, Martinez, San Francisco, Del Norte BART station

Paratransit services are also operated by the cities of El Cerrito and San Pablo using Measure C funding. Both programs provide transportation services and subsidized fares for seniors and people with disabilities within their cities. Other transportation service providers or programs in Contra Costa County include San Ramon Senior Center, Lamorinda Spirit Service, Walnut Creek Senior Van, Pleasant Hill Senior Van, Senior Helpline Services, and the Concord Taxi Subsidy Program for seniors.

Marin County

Agency Name	Agency Type		Transportation Service	Cities or Counties Served
	Private non-profit	Public		
Golden Gate Bridge, Highway and Transportation District (GGBHTD)		X	ADA paratransit	Portions of Marin, San Francisco, Sonoma and Contra Costa Counties
Marin Transit (formerly Marin County Transit District)		X	ADA paratransit	Marin County
Senior Access	X		Contracted round-trip van service from participants' residences to day program	Majority of Marin County, excluding West Marin; a few participants from southern Sonoma County (Petaluma)
Whistlestop Wheels (WSW)	X		ADA paratransit; transportation for special programs including adult day care, Ecumenical Association for Housing, medical and senior shuttle services in Novato	Marin, Sonoma, San Francisco, Contra Costa Counties. WSW provides local public door-to-door paratransit service within Marin County under contract with Marin County Transit District (MCTD). As part of this contract, WSW also provides service between the Marin, Sonoma, San Francisco, and West Contra Costa counties on behalf of Golden Gate Transit.

Napa County

Agency Name	Agency Type	Transportation Service	Cities or Counties Served
Napa County Transportation Planning Agency (NCTPA)	Public	VINE Go paratransit service, five general public community shuttles and a flexible route service; two user-side taxi subsidy programs are offered to eligible residents	Napa Valley: Calistoga, St Helena, Rutherford, Oakville, Yountville, Napa, American Canyon, portions of Vallejo in Solano County along the VINE Route 10 and portions of Santa Rosa along VINE Route 11.

San Francisco County

Agency Name	Agency Type		Transportation Service	Cities or Counties Served
	Private non-profit	Public		
Golden Gate Regional Center	X		Provide transportation for people who cannot use paratransit because they require additional assistance or live outside of the paratransit service area	San Francisco County, Marin County, San Mateo County
Kimochi, Inc.	X		Group van services for seniors; door-to-door transportation for senior center participants, adult social day care programs, grocery shopping trips, medical trips	San Francisco (City & County)
On Lok Senior Health Services	X		Transportation for health plan participants to and from home to day health centers, medical appointments, and recreation outings	San Francisco, Fremont
Saint Francis Memorial Hospital	X		Transportation for Outpatient Treatment Departments,; discharges to home or other facilities; some transportation for seniors to doctor appointments	San Francisco
San Francisco Veteran's Administration Medical Center (VAMC)		X (Federal)	Transportation by wheelchair accessible van/gurney van and ambulance services to eligible/authorized beneficiaries; VA staffs shuttles to and from designated areas and volunteer drivers for local trips; Disabled American Veterans shuttle service to and from the VA with donated vehicles and volunteer drivers	San Francisco Bay Area and northwestern California; some service for patients in East Bay, Fresno, Palo Alto and Reno, NV areas
SFMTA/ Municipal Railway		X	ADA paratransit service (taxi, shared-ride van services called SF Access and group van provided by van and taxi providers managed by a Paratransit Broker)	San Francisco (City & County)

San Mateo County

Agency Name	Agency Type		Transportation Service	Cities or Counties Served
	Private non-profit	Public		
City of Foster City		X	The Foster City Connections Shuttle provides service within Foster City with two routes (connecting with SamTrans), Monday through Friday from 9:30 am to 3:30 pm	Foster City and some areas of San Mateo
SamTrans		X	Two ADA complementary paratransit services: Redi-Wheels and RediCoast	Bayside and coastal cities of the county
SamTrans		X	Federal Section 5311 rural transportation service	From all coastal cities to all bayside cities of the county
Senior Coastsiders	X		Provide service to seniors 60+ on the San Mateo Coastside from Montara through Half Moon Bay using two buses	San Mateo County Coastside from Montara through Half Moon Bay

Santa Clara County

Agency Name	Agency Type		Transportation Service	Cities or Counties Served
	Private non-profit	Public		
Agnews Developmental Services		X	Busing clients to workshops, school and special events	Anywhere requested by clients
Achievekids	X		Transportation for students to and from school (contracted) and directly-operated services to take students to and from community events, jobs, etc.; serve publicly-funded students (those with emotional and developmental disabilities)	Santa Clara County; Achievekids students come from San Mateo, Santa Cruz, and Alameda Counties as well, but school districts decide whether transportation provided via bus, family vehicle, or taxi vouchers
Avenidas	X		Weekly rides to a nearby supermarket; daily rides to lunch service; daily rides to senior day health facility; clients also transported through volunteer driver program	Palo Alto, Stanford, Mountain View, Menlo Park, Portola Valley, Los Altos, Los Altos Hills, East Palo Alto, Woodside, Redwood City, Atherton and occasionally Sunnyvale, Cupertino and San Jose
Outreach 5	X		Diversified community transportation program including ADA paratransit on behalf of VTA, (heavily coordinated with social service agencies, nutrition, dialysis, education, etc.); JARC, Cal-Works/Low-Income, and Senior Transportation.	All 15 cities in Santa Clara County
San Andreas Regional Center	X		Daily transportation services for 2,600 developmentally disabled consumers to and from their day program on weekdays	Santa Clara, Santa Cruz, San Benito, and Monterey Counties

⁵ Because Outreach is the paratransit provider for the Valley Transportation Authority (VTA), VTA is not included separately in the inventory.

Agency Name	Agency Type		Transportation Service	Cities or Counties Served
	Private non-profit	Public		
Veterans Administration (Santa Clara County)		X (Federal)	Rides for veterans who meet certain eligibility requirements to and from the V.A. Hospital only	Counties: Alameda, Calaveras, Monterey, San Benito, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Stanislaus, Tuolumne, Sonora

Transportation service in Santa Clara County is also provided by Heart of the Valley, Services for Seniors, which operates a no cost, volunteer-based escorted transportation service for adults aged 59 or older. Service is provided to residents of the cities of Santa Clara, Cupertino, Sunnyvale, Los Gatos, Saratoga, Monte Sereno, Campbell, and parts of West San Jose. Escorted transportation is provided for a wide variety of trip purposes, including business appointments, educational and social activities, shopping, and errands. Heart of the Valley currently has a client base of 725 individuals served by 124 volunteers.

Solano County

Agency Name	Agency Type		Transportation Service	Cities or Counties Served
	Private non-profit	Public		
Benicia Breeze		X	Taxi scrip, flexible fixed route and ADA paratransit services	Benicia, Vallejo, Pleasant Hill, Concord, Martinez in Solano and Contra Costa Counties.
City of Dixon		X	General public dial-a-ride service operating Monday through Saturday within the Dixon City limits; participates in Solano Paratransit	City of Dixon
City of Vacaville, City Coach		X	ADA paratransit	City of Vacaville only
City of Vallejo		X	ADA paratransit and taxi scrip program	Solano County, Contra Costa County
Fairfield/Suisun Transit		X	ADA paratransit	Fairfield, Suisun City, Vacaville, Vallejo
Pace Solano	X		Curb-to-curb morning and afternoon transportation service to the participants in Pace's day program for developmentally disabled adults	Day programs operate in Benicia, Vallejo, Suisun, Fairfield, Vacaville, all in Solano County
Rio Vista Delta Breeze		X	Deviated fixed route, taxi scrip, dial-a-ride services and ADA paratransit service	Rio Vista, Fairfield, Suisun City, Isleton, Antioch, Pittsburg, Solano, Sacramento and Contra Costa Counties
Solano Transportation Authority		X	Intercity ADA paratransit service between 5 cities and the unincorporated area in eastern Solano County	Fairfield, Suisun City, Vacaville, Rio Vista, Dixon, eastern unincorporated Solano County

Sonoma County

Agency Name	Agency Type		Transportation Service	Cities or Counties Served
	Private non-profit	Public		
Becoming Independent	X		Transportation for clients between home and programs	Santa Rosa, Sonoma, Healdsburg, Windsor, Cloverdale, and Rohnert Park
City of Petaluma		X	ADA paratransit	Petaluma
North Bay Regional Center (NBRC)	X		Transportation provided via a broker and multiple vendors; taxi trips and bus/paratransit tickets. Serves individuals with developmental disabilities in Sonoma, Napa, and Solano counties (6,000 clients total)	Napa, Sonoma, and Solano counties
Santa Rosa Citybus		X	ADA paratransit	Santa Rosa
Sonoma County Transit (SCT)		X	ADA paratransit along inter-city fixed-route corridors	Sonoma County

Two Sonoma County providers—Healdsburg Transit and Southwest Adult Day Services—were included in the survey but did not meet the threshold established for inclusion in the inventory. Additional agencies offering services in Sonoma County include Pride Industries, West County Transportation Agency, and Whistlestop Wheels (listed in the Marin County table).

Multi-County Providers

While agencies included in the transportation inventory are classified according to the county in which they are based, several transportation providers reported service areas that encompass two or more counties. These agencies are listed in the table below.

Respondents Identifying Multi-County Service Areas

Agency	County Classification	Cities or Counties Served
Alzheimer's Services of the East Bay	Alameda	Alameda County and western Contra Costa County
City of Hayward – Paratransit Program	Alameda	Most Alameda County cities. Some medical trips are provided to out of county locations (Palo Alto, Livermore).
City of Pleasanton Paratransit Services	Alameda	Pleasanton, Sunol, Livermore, Dublin, and San Ramon. This includes primarily Alameda County locations with limited stops in Contra Costa County for doctor appointments.
East Bay Paratransit Consortium	Alameda	Western Alameda and Western Contra Costa Counties, plus trips to and from San Francisco.
Regional Center of the East Bay	Alameda	Alameda County and Contra Costa County
Contra Costa ARC	Contra Costa	Contra Costa County (primarily) and Alameda County (Hayward only at this time)
Mt. Diablo ADHC	Contra Costa	ADHC clients come from mostly Central and South Contra Costa County but ADHC reimburses Benicia Breeze trips for Solano County clients.
Veterans Administration	Contra Costa	Sacramento County, Solano County, Contra Costa County, Alameda County
Westcat	Contra Costa	Pinole, Hercules, Rodeo, Crockett, Port Costa, Tara Hills, Montalvin Manor, Martinez, Del Norte BART station, and San Francisco
Golden Gate Bridge, Highway and Transportation District	Marin	Regional service serving portions of Marin, San Francisco, Sonoma and Contra Costa Counties
Senior Access	Marin	Majority of Marin county, excluding West Marin, but a few participants come from Southern Sonoma County (Petaluma)
Whistlestop	Marin	Marin, Sonoma, San Francisco, Contra Costa Counties
Napa County Transportation Planning Agency	Napa	Napa Valley: Calistoga, St Helena, Deer Park, Rutherford, Oakville, Yountville, Napa, American Canyon; portions of Vallejo in Solano County along the VINE Route 10 and portions of Santa Rosa along VINE Route 11
Golden Gate Regional Center	San Francisco	San Francisco County, Marin County, San Mateo County
San Francisco VAMC	San Francisco	San Francisco Bay Area and northwestern California area, but service is also provided for some patients in the East Bay, Fresno, Palo Alto and Reno, NV
Agnews Developmental Services	Santa Clara	Anywhere requested by clients
San Andreas Regional Center	Santa Clara	Santa Clara, Santa Cruz, San Benito, and Monterey Counties
Veterans Administration	Santa Clara	Alameda, Calaveras, Monterey, San Benito, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Stanislaus, and Tuolumne Counties

Agency	County Classification	Cities or Counties Served
Benicia Breeze	Solano	Benicia, Vallejo, Pleasant Hill, Concord, Martinez in Solano and Contra Costa Counties
City of Vallejo	Solano	Solano County and Contra Costa County
Rio Vista Delta Breeze	Solano	Rio Vista, Fairfield, Suisun City, Isleton, Antioch, Pittsburg, Solano, Sacramento and Contra Costa Counties
Solano Transportation Authority	Solano	Fairfield, Suisun City, Vacaville, Rio Vista, Dixon, eastern unincorporated Solano County
North Bay Regional Center	Sonoma	Napa, Sonoma, and Solano Counties

This summary of selected public or social service transportation programs serves as a valuable starting point to consider the extent to which these services completely or in part meet the transportation needs of persons with disabilities or older adults. The following two chapters (Chapter 5 and Chapter 6) explore, through direct consultation with key stakeholders and through extensive public outreach, the gaps and barriers that still exist with respect to meeting these needs.

Chapter 5. Stakeholder Involvement

Public Outreach

During the months of January through March 2007, the consultant team conducted 21 outreach meetings, attended by over 500 participants. The purpose of the meetings was to directly solicit the views and experiences of older adults and persons with disabilities regarding transportation barriers they face, and generate discussion regarding potential solutions and how these should be prioritized. The following provides an overview of the outreach meeting process.

The first step was to identify and contact organizations or existing groups willing to sponsor or host an outreach meeting. Typically, the outreach meeting was included as part of a regularly scheduled meeting (e.g., Paratransit Coordinating Council, or PCC). In an effort to identify the most appropriate groups, suggestions were sought from members of MTC's Elderly and Disabled Advisory Committee (EDAC), the Partnership Transportation Coordinating Council's (PTCC) Accessibility Committee, and the project Technical Advisory Committee (TAC). In some cases, contacts were provided by members of the outreach team, which was described in Chapter 2.

Efforts were made to reach groups that:

- | Represent diverse and fresh perspectives
- | Address multi-modal interests (i.e. use of public transit, pedestrian access, paratransit, driving)
- | Directly represent constituent groups of interest to the study
- | Have a direct interest in and can speak to transportation needs in their community
- | Are not traditionally included in outreach efforts of this nature. For example, the possibility was explored of meeting with community-based organizations and churches that work with immigrant groups in an attempt to identify the needs of Latino seniors.

Members of the outreach team also represent the communities of concern for this study: older adults and persons with disabilities. Their input was valuable in identifying agencies to host and co-sponsor the outreach meetings, and to develop the agenda and supporting materials. The matrix below lists details for the 21 meetings, including sponsoring groups and estimated number of attendees:

Figure 5-1: MTC Human Service Transportation Coordination – Outreach Meetings

Date	Time	Dur (min.)	Agency	Location	No. Attending
1/09/2007	1:30 PM	60	San Mateo PCC	San Carlos	25
1/13/2007	12:30 PM	45	Marin Indoor Sports Club (ISC)	Greenbrae	7
1/16/2007	2:00 PM	60	Sonoma County TA TPCC	Santa Rosa	37
1/16/2007	2:00 PM	60	Contra Costa County IHSS	Martinez	13
1/17/2007	1:30 PM	45	San Francisco PCC	San Francisco	32
1/22/2007	2:00 PM	60	Contra Costa County PCC	Pleasant Hill	30
2/2/2007	12:00 PM	45	Senior Coalition of Solano County	Fairfield	40
2/5/2007	1:00 p.m.	45	Santa Clara Council on Aging	San Jose	40
2/5/2007	1:10 PM	20	Solano County Family Resource Center	Fairfield	6
2/6/2007	12:15 PM	60	Alameda County East Bay Paratransit SRAC	Oakland	25
2/7/2007	1:30 PM	60	Napa PCC	Napa	15
2/7/2007	2:00 PM	60	Santa Clara PCC (VTA CTA)	San Jose	20
2/8/2007	10:00 AM	45	SF Senior Action Network	San Francisco	100
2/9/2007	10:00 AM	90	Alameda County Area Agency on Aging	Oakland	40
2/12/2007	3:00 PM	90	Marin PCC	San Rafael	20
2/14/2007	2:00 PM	50	Livermore Amador Valley Transportation Authority	Livermore	40
2/16/2007	1:30 PM	60	Paratransit Advisory Committee (Alameda)	Hayward	17
2/20/2007	3:00 PM	30	Disability Action Network, Fremont (Alameda)	Fremont	15
2/21/2007	10:00 AM	90	Sonoma Area Agency on Aging	Santa Rosa	10
2/28/2007	10:30 AM	60	Contra Costa Developmental Disabilities Council	Concord	35
3/16/2007	12:00 PM	60	Solano PCC	Fairfield	15
21 meetings				Participants:	582

Meeting Preparation

Prior to the meetings, an extensive literature review was performed in order to document previously identified issues for each of the nine counties.¹ Additional information on county-specific issues was provided by EDAC members at a meeting in December 2006. These issues, or “gaps”, were grouped by county and used as a starting point for the discussion. In addition, a set of potential criteria for evaluating potential transportation solutions was developed for presentation at the meetings. Members of the TAC provided suggestions for the evaluation criteria.

The host was contacted to verify that the meeting facility was accessible for persons with disabilities, estimate how many people would be attending, determine whether handouts in languages other than English or accessible formats were needed, and review other logistics related to the presentation. The host was provided with a written overview of the project, a list of people in their county who had expressed interest in attending, and an outline of the structure for the meeting. A flyer was developed that described the study and purpose of the outreach meeting, and provided space for individual hosts to include the time, date, and location for their meeting. This flyer included contact information for those who wished to comment but could not attend.

The study team also created a website with a very simple survey tool to allow participants to submit comments; the URL for this website was also distributed at the meetings and was included on the public flyer advertising the meetings as well as on MTC’s website. Thirty-eight comments were posted on this website.

Meeting Format

In most cases, at least two team members attended each meeting to present the material, facilitate discussion, and assist attendees with recording their comments. The agenda for the meeting was standardized but flexible, in order to respond to the time available on the agenda. Agenda items included:

¹ A list of materials reviewed is Included in Appendix A.

- | Overview of the project, including the purpose and importance of the study
- | Review of preliminary list of gaps specific to each county (or community within a county)
- | Small (2-3 person clusters) group discussion on transportation gaps and suggested solutions, with participants recording their comments on 3x5 cards
- | Large group discussion of gaps and solutions identified in the break-out groups
- | Review of the preliminary evaluation criteria to be applied to potential solutions, and
- | Comments on the evaluation criteria.

Throughout the meeting the facilitator read aloud all information being recorded to ensure that those with visual impairments could fully participate in the proceedings.

Contact information for submitting additional comments was given to all attendees, including a contact name, phone number, mailing address and email address, and the address of the web site.

Follow Up

All comments from the outreach meetings were transcribed and sent to the meeting host. Comments were also summarized for use in the plan, and are found in Appendices D and E. Comments on the evaluation criteria were transcribed separately for use during the next phase of the project.

Lessons Learned on Outreach Process

- | When trying to reach a particular interest group, being part of the agenda for an existing regular meeting is very effective. Participants already have the time scheduled and are familiar with the meeting location, the buildings are accessible, and the participants are likely to be knowledgeable about the subject. Members of the public attending the

meeting have the added benefit of learning about the hosting organization as well as the project.

- | A longer period of time would have been helpful to develop and cultivate contacts with “non-traditional” groups (e.g. Latino families referred to above, or Native American women with disabilities in North Bay Area counties). Efforts to include these groups were not as successful as those to engage other groups.
- | The small break-out groups worked well in generating discussion about what participants perceived as gaps in transportation service. This process encouraged everyone to participate, reduced repetition, ensured accuracy in the recording of ideas, and provided support for people who had difficulty writing down their ideas.
- | It is important to verify the accessibility of buildings and restrooms for meetings targeted at seniors and the disabled community. Moreover, meeting hosts should be reminded to provide transit information for the meeting location in advertising materials.
- | Sufficient time needs to be built in ahead of the meetings to ensure that accessible formats of meeting materials can be sent to those who need them – this can be up to ten days in advance of the meeting.
- | When presenting transportation gaps based on previous studies, it is important to emphasize to attendees that these may no longer be current, and may be based on perception, and not necessarily verified. The meeting is an opportunity to ensure that the information included in the study is both relevant and accurate.
- | Some flexibility should be built into the agenda to accommodate the particular interests of the group, which can’t be known until the meeting is underway.

Stakeholder Interviews

Summary of Stakeholder Interview Process

The purpose of conducting stakeholder interviews was to document the perceptions, opinions and experiences of a broad base of stakeholders,

including staff from transportation provider agencies, social service agencies, advocacy organizations and others. Second, the purpose was to gather more in-depth discussion regarding potential coordination strategies currently underway, or those that are most encouraging to pursue.

Interview questionnaires were developed and tailored to individuals or groups of individuals. Attempts to schedule an interview with the potential stakeholders were made by contacting each stakeholder either by telephone or by email. Six of the 25 potential interviewees either did not respond or chose not to participate in the interview process. Efforts were not successful to identify locally-based Medi-Cal program staff to interview. In some cases, alternate stakeholders were identified. Altogether, a total of 20 interviews were conducted with 35 stakeholders.

Figure 5-2: Stakeholder Interviews

Refugee Coordinator	Alameda County Dept. of Social Services
Project Coordinator	Alameda County Senior Injury Prevention Program
General Manager	Central Contra Costa County Transit Authority (CCCTA)
Transportation Mgr	Rossmoor Retirement Community, Walnut Creek
Transportation Coordinator	Contra Costa County Workforce
Executive Director	Senior Helpline Services, Contra Costa County
Paratransit Manager	Whistlestop Wheels, Marin County Paratransit Program
Executive Director	Napa/Solano Area Agency on Aging
General Manager	San Francisco Paratransit Program
Ex. Director	Senior Action Network
Transportation Manager	On Lok Senior Center
SamTrans, San Mateo County Human Services Agency and Aging and Adult Services, Center for Independent Living	San Mateo County
Executive Director	Outreach
Transportation Coordinators	San Andreas Regional Center
Member	California Senior Legislature and Santa Clara Council on Aging Advisory Committee
Director of Transit and Rideshare	Solano County Transportation Authority
Executive Director	Sonoma County Council on Aging
PTCC	Accessibility Committee
Staff	MTC
Executive Director	CalACT

A written summary of the interview was prepared and emailed to the interviewee with an opportunity to review and revise, if needed.

Key Findings

The following observations were offered by those participating in the stakeholder interviews.

- 1 Over the past ten years, since full implementation of the paratransit requirements of the Americans with Disabilities Act (ADA), funding partnerships between public transit and social service agencies has

greatly diminished. In cases where there are such partnerships, agencies subsidize their clients' fares but do not cover the actual cost of the trip. No arrangements were identified where a social service agency purchases the full cost of the trip.

- | ADA service requirements may have caused the deterioration of coordination—new shuttles or other services have been formed to serve people outside the service area; or, the scheduling window doesn't always work for agencies, so they start up their own service.
- | In fact, examples were presented of the opposite approach—where the public transit agency purchases services from community-based agencies, senior centers or other programs because this is less costly than providing them directly. CCCTA, for example, has provided retired vehicles to several community-based groups on the condition these agencies provide at least 50 ADA trips per month.
- | Regional Centers, who are required to provide transportation for developmentally disabled individuals within their programs, all arrange for transportation through separate contracts. Regional Center transportation accounts for a large amount of client-based trips, and significant funding supports their transportation programs, but there does not seem to be any effort to consolidate programs with local transit agencies.
- | Medicaid Non-Emergency Medical Transportation (NEMT) continues to be a complex and little-understood program. No stakeholder interviewed is currently involved in providing or arranging for Medicaid-based trips, though it is believed that many ADA clients receiving medically related transportation are, in fact, Medicaid eligible. Any significant revisions to Medicaid transportation policies will need to occur at the State level; however, MTC and/or other stakeholders may want to investigate further the extent to which medical transportation may be sponsored by counties.
- | The lack of flexible insurance policies has been identified as a barrier preventing coordination and volunteer activities from occurring.

- | Taxis could play a role in improving coordination—in most counties, there is a glaring lack of accessible taxis (or any taxis in some communities).
- | There is a need for more seamless travel in counties with multiple providers.
- | Little or no interest was expressed in consolidating services, with the exception of Solano County.
- | A range of mobility strategies needs to be considered when developing a continuum of options—including pedestrian access, and transitioning from driving.
- | Good models of coordination have recently been implemented between senior programs and public transit (Contra Costa, Santa Clara and Sonoma Counties)
- | Stakeholders have identified a range of creative potential strategies to enhance coordination, ranging from operational improvements to revising policies. The potential for successful implementation may vary from county to county, and may not be universally applicable throughout the region. When asked to identify which coordination strategies are most important to pursue, members of the Accessibility Committee did not universally agree on key strategies.

Contra Costa County Focus Group

The final step of conducting public outreach for this planning process was to convene a focus group in Contra Costa County. As mentioned in Chapter 2, Contra Costa County was selected because of previous coordination studies recently completed, and because several innovative coordination efforts have recently been implemented within the county. The goals of the focus group were to:

- | Select one county to discuss transportation coordination issues in detail
- | Hear from a range of stakeholders involved in human service transportation about their experiences with coordination

- l Learn more about successful coordination strategies that have worked, as well as barriers that prevented effective coordination

The meeting was held at the Concord Senior Center on Thursday, March 22, from 1:30-3:00 p.m. Those attending the focus group were invited to participate representing their organization and/or constituency, and efforts were taken to ensure a broad range of participation, including transit agencies, social service agencies, county staff, non-profit agencies and others. Ten persons participated in the meeting, which was also attended by five observers and two meeting facilitators.

Participants were asked to:

- l Describe their “vision” for a coordinated transportation system within Contra Costa County
- l Identify one activity or project that has proven successful in enhancing coordination
- l Identify barriers that are preventing coordination
- l Identify actions needed to remove those barriers
- l Identify coordination strategies that are most important to pursue

A summary of comments from the meeting follows.

Vision of Coordination–

A Coordinated Transportation System would result in:

- l Mobility management—a centralized system that would match needs and resources (this concept was specifically endorsed by several meeting participants)
- l Better understanding of human service agencies involved in providing or sponsoring human services transportation
- l Identification of funds and programs involved in providing transportation
- l “Breaking down the silos” of various funding requirements, which would allow more seamless transportation and the co-mingling of various fund sources

- | Establishment of comparable planning requirements for social service agencies as exist for transit programs to plan for coordinated services
- | More flexible insurance to encourage innovative new programs
- | Better land use coordination so that new developments consider proximity to transit
- | Bringing paratransit providers together to develop common transfer policies and procedures
- | Teaching people how to use transit
- | Provision of easy access to information and services

Successful Examples/Barriers to Coordination

- | Within Contra Costa County, an excellent working relationship exists between Rossmoor Senior Community, located in Walnut Creek, and the local public transit provider, Central Contra Costa Transit Authority (CCCTA). For example, ADA and Regional Transit Discount Card (RTDC) applications are processed on Rossmoor site, Rossmoor and CCCTA collaborate to provide a very successful travel training program, and Rossmoor staff has been very helpful in mentoring new programs.
- | CCCTA Vehicle sharing program—CCCTA has provided local agencies with vehicles with the expectation that those agencies provide at least 50 ADA trips per month. This has freed up capacity on CCCTA to provide additional trips, and has also resulted in a much lower cost per trip for CCCTA than if it had provided the service directly.
- | Getting stakeholders to the table—recent examples include ADA paratransit program staff meet regularly to work out operational “glitches”, and a convening of senior center staff.
- | A significant barrier is that there is a need to better understand budget and regulations specific to social service agencies. Little is known about these programs, or how to influence their willingness to coordinate.
- | The opinion was expressed that agencies that receive state or federal funds to provide transportation for their clients should be required to participate in coordination planning activities similar to those established

through SAFETEA-LU. Examples include: Regional Centers, Medi-Cal, Department of Rehabilitation, Department on Aging through the Older Americans Act, Department of Managed Care, Office of Long Term Care (oversees Adult Day Health Care programs), and school districts.

- | Often, new developments are sited without consideration to the proximity of transit. Or, social service agencies will relocate a facility that is not accessible by transit, and then expect the transit agency to provide service to them.

Steps Needed to Address Barriers Preventing Coordination

The meeting ended with an identification of strategies to address the need to better coordinate land-use decisions with public transit. Some suggested strategies include:

- | Convene a forum of planning directors, city managers, local elected officials, developers and the Homebuilders Association of America to better understand a common interest in promoting land-use and transit coordination
- | Consider imposing an impact fee for transit on new developments
- | Require developers to provide transportation if they locate a facility where transit is not currently available.

The next chapter summarizes the transportation needs of older adults and persons with disabilities noted above, as well as reviews the transportation needs identified in the low-income component of the coordinated plan to determine areas of overlap. Chapter 7 proposes specific types of transportation solutions to address transportation gaps of elderly and disabled populations. Chapter 8 proposes strategies to improve coordination for better service delivery to all three groups.

Chapter 6. Documentation of Unmet Needs

Summary of Gaps: Older Adults and Persons with Disabilities

Chapter 5 summarized the methodology employed to solicit the views of key stakeholders and members of the public to learn more about unmet transportation needs facing older adults and persons with disabilities. Several key themes emerged out of the outreach efforts, stakeholder consultation, and previous planning projects, and are described below.

Enhanced Fixed Route Services: For persons who can and do use the fixed route system, there is a need for additional service in rural and suburban areas, and for more direct service to key activity centers needing to be accessed by older adults and persons with disabilities. Customers would also like increased frequency to avoid long waits, and service longer into the evening and on weekends.

Enhanced Paratransit Services: Paratransit users sometimes need a level of service above and beyond what is required by the ADA, such as service provided on the same day it is requested (e.g. taxis), where and when the fixed route service does not operate, or the ability to accommodate “uncommon” wheelchairs or other mobility devices.

Connectivity: The need for better connectivity was expressed, both for inter- and intra-county travel, whether using paratransit or fixed route service. To promote more seamless travel, customers mentioned the need for better shelters and bus stops as well as other amenities at transfer sites. Some persons with wheelchairs have difficulty making effective use of the system and referred to the need to enhance accessibility of vehicles and the related infrastructure, such as shelters and stops.

Information and Other Assistance: There is a need for education so that older adults and persons with disabilities can learn how to use public transit and their

accessible features. There is also a need to provide information in a variety of formats. Likewise, there is a need to ensure that drivers, dispatchers and other transit personnel are sensitive to passenger needs, and know how to provide assistance on-board the vehicle.

Pedestrian Access and Land Use Coordination: Improving accessibility to and from bus stops and transfer centers (sidewalks, curb cuts, curb ramps, crosswalks) was widely voiced throughout the outreach meetings. Meeting attendees also mentioned the need to better coordinate land use development with the provision of transit service, especially in lower-density communities.

Summary of Gaps: Low-Income Persons

As mentioned previously, MTC has been engaged in extensive planning efforts to identify and address transportation needs specific to low-income persons. With the advent of welfare reform in the mid-1990s, MTC sponsored a welfare-to-work transportation plan for each of the nine Bay Area Counties, and, upon completion of the countywide plans, conducted a regional welfare-to-work plan that was adopted by the Commission in 2001. Finally, as recommended through the Regional Transportation Plan adopted in 2001, MTC embarked upon a series of community-based transportation plans in 25 low-income neighborhoods.

Each of these previous planning efforts sought to identify, through the participation of stakeholders, public outreach, surveys and other methods, transportation needs that prevent full mobility for low-income populations, especially those seeking to return to the work force. The findings from these previous planning efforts are documented fully in the low-income component of the coordinated plan, and are summarized below.

Figure 6-1 provides a comprehensive list of transportation needs or gaps that were identified through plans described above to address low-income constituencies, as well as concerns raised through public outreach convened earlier in this planning process. As Figure 6-1 indicates, there is significant overlap or consistency among the transportation barriers and gaps expressed

among the three populations of concern. Appendix E documents detailed comments received through the public outreach process for this plan.

Figure 6-1: Constituent Group

	Constituent Group	
	Low-income	Elderly/Disabled
<i>Transit Service</i>		
Spatial Gaps: transit does not always serve destinations that people need to reach, i.e. schools, employment, medical care or grocery stores. Service not available in some rural areas.	X	X
Temporal Gaps: need to increase service frequency to avoid long trips, expand hours of operation to run earlier in the morning, later in the evening, or on weekends.	X	X
Inconsistent reliability – some transit routes do not stay on-schedule	X	X
Difficult inter-jurisdictional travel –transit routes do not always transfer or connect with other services	X	X
Lack of adequate driver training, i.e. how to use accessible features, disability and cultural awareness training.	X	X
Inconsistent fare and transfer policies	X	X
Not enough wheelchair spaces on buses, need to accommodate larger wheelchairs		X
<i>Transit Amenities</i>		
Need for bus shelters, benches, and lighting at bus stops or transit centers	X	X
<i>Public Information about Transportation Services</i>		
Need to improve information via 511, websites and other methods about transit routes and schedules to make sure they are current and accurate	X	X
Transit information needs to be provided in languages other than English, and in multiple formats	X	X
Need to provide training to educate people, especially new riders, how to use transit	X	X
<i>Transportation for Youth and Children</i>		
Additional bus service is needed before and after school hours	X	
Transportation services are needed to drop children off at school or daycare.	X	
<i>Access to Autos</i>		
Strategies and incentives are needed to promote access to autos and to maintain them in safe operating order.	X	X
<i>Bicycle and Pedestrian Issues</i>		
Traffic speed regulations are not always enforced in areas frequented by pedestrians	X	X
There is the need to provide more crosswalks in intersections	X	X
Sidewalks are often in poor condition, or nonexistent, in unincorporated or rural areas	X	X
There are not enough bike lanes or securement areas for bicycles	X	
<i>Affordability</i>		
The cost of using public transit or paratransit is a problem, especially when multiple family members are transit dependent, and for youth. Taxis can also be unaffordable for low-income population	X	X
<i>Other</i>		
Unique transportation barriers exist for migrant farm workers	X	
Few or no wheelchair accessible taxis are available outside San Francisco		X
Often, a higher level of support is needed on paratransit than what is minimally required		X
Land-use and transportation policies are often not coordinated, and do not support proximity to transit	X	X
Environmental factors (BART and/or traffic noise, diesel fumes from trucks) may pose health risks	X	X

Chapter 7. Solutions to Gaps

Possible solutions have been identified to address the gaps that emerged from the outreach process and review of local plans. These solutions are based on suggestions received in the outreach process, and ideas contained in local plans. Each solution is described along with gaps that it addresses. The proposed solutions also suggest specific implementation issues. Some solutions address multiple gaps, and some of the gaps are addressed by multiple solutions. The possible solutions are grouped into five categories:

- | Additions or improvements to paratransit that exceed ADA requirements
- | Additions or improvements to demand-responsive services other than ADA paratransit
- | Additions or improvements to transit services
- | Improved access to transit services
- | Information and assistance

Six tables are provided, one for each of the five solution categories just listed, and one for solutions that fit into multiple categories. Each table summarizes all of the solutions, the gaps they address, and implementation issues that will need to be addressed.

Figure 7-1: Additions or Improvements to Paratransit that exceed ADA Requirements

Proposed Solution	Gaps Addressed	Implementation Issues
Premium services on ADA paratransit	Service beyond ADA-required areas and hours, service pending eligibility determination, same-day requests, inter-county service, shorter trip times, intermediate stops, time-certain arrivals.	Some would be operationally easy (e.g. longer hours or larger area) while others could be very complicated (e.g. intermediate stops and time-certain arrivals). Main obstacle would be cost.
Feeder service connecting to fixed-route transit	Excessive trip times for certain trips if offered as an optional service (distinct from a required mode as permitted by ADA for some customers and trips).	Need to address trip planning and coordination with transit schedules, especially for transfers from fixed-route to paratransit.

Proposed Solution	Gaps Addressed	Implementation Issues
Escorted travel on paratransit	Need for assistance by some riders who have no attendants. Also some return trip issues, picking up at large complexes.	Need to recruit, train, and retain staff and/or volunteers to perform this function.
Transfer assistance to help with multi-operator paratransit trips and transfers between paratransit and fixed-route service	Coordination problems making inter-operator trips	Limited number of locations with sufficient volume; cost of staffing.
Discounted paratransit fares	Affordability of service for people with limited incomes, high medical expenses, need for frequent trips.	Could be oversubscribed. Cost.

Figure 7-2: Additions or Improvements to Demand-Responsive Services Other than ADA Paratransit

Proposed Solution	Gaps Addressed	Implementation Issues
Demand-responsive group shopping service	Non-ADA eligible people who cannot use transit if they need to carry packages.	Good models exist.
Volunteer driver programs, including training and recruitment of drivers	Need for assistance, help carrying packages, intermediate stops such as waiting for a rider at a pharmacy or bank, shorter travel times.	Working well in some areas, but others have difficulty recruiting volunteers. Need to address insurance issues.
Taxi discount and voucher programs, including the possibility of purchase of a guaranteed level of taxi service by transit agencies	Same-day service, service pending ADA eligibility, service when ADA paratransit does not operate, travel times, travel needs of non-ADA people.	Depends on availability of quality taxi service; lack of accessible taxicabs.
Incentives or assistance for wheelchair-accessible taxicabs	Lack of taxi service accessible to wheelchair users.	Requires cooperation of taxi companies, drivers, and cities that regulate taxis. Possible use of New Freedom or other funds for accessible taxi subsidies.
Incentives or assistance to improve the quality of taxi service	Service issues limit usefulness of taxis for older people and people with disabilities.	Few models to follow. Needs cooperation of taxi companies, drivers, and cities that regulate taxis. May require financial incentives.
Help for community organizations to expand service	Lack of alternative services, financial difficulties of community organizations, insufficient vehicles, insurance issues.	Depends on community organizations with capacity and interest to provide service. Should be coordinated with ADA paratransit.
Non-emergency medical transportation for Medi-Cal patients	Lack of appropriate, affordable service, especially for dialysis trips.	If implemented by a transit operator, may require separation from ADA paratransit and resolution of issues concerning use of Federally funded equipment, competition with private sector.

Figure 7-3: Additions or Improvements to Transit Services

Proposed Solution	Gaps Addressed	Implementation Issues
Senior-friendly shuttles, jitneys, or circulators	Difficulty using transit for local trips, trips with packages, shopping carts, etc. Stops that are far from facilities or with long walks to the door.	Funding, and ensuring services are accessible for persons with disabilities.
Discounted transit fares or other subsidies beyond those already provided for seniors and people with disabilities	Affordability of some long trips, multi-operator trips.	Need to resolve eligibility, consistency among operators, impact on ADA eligibility process. Cost.
Expanded fixed route transit services	Limited or no existing public transit services in some areas, nights and evenings, and on weekends.	Feasible, but need to address cost and productivity.
Better connections between transit systems	Issues with physical access, schedule coordination, multi-operator trips to important destinations.	Feasible to address physical issues, but may require multi-agency cooperation, including cities. Schedule coordination can be difficult.
Additional wheelchair spaces on transit vehicles	Long waits if all wheelchair spaces are taken.	Depends on equipment and routes. Equipment is not always assigned to specific routes. Space may also be lacking for other passengers.
Additional driver training on accessibility issues and features	Issues with securement and passing-up wheelchair users at bus stops with no explanation.	Could be contract issues at some operators. Securement issues often involve inherently difficult to secure mobility devices.

Figure 7-4: Improved Access to Transit Services

Proposed Solution	Gaps Addressed	Implementation Issues
Infrastructure improvements	Limited access due to sidewalk condition, crossings, curb cuts, lack of bus bulbouts, sidewalk extensions, waiting areas, etc.	Implementation depends on cooperation of cities. Some transit agencies have ceded control of bus stop amenities to others. Cost.
Targeted transit route and stop adjustments	Lack of stops and routes that are convenient to destinations important to seniors and people with disabilities.	Feasible, but each will need to be examined for operational impact.
Targeted law enforcement	Traffic and parking violations near stops, which create dangerous conditions and limit access to transit.	Requires cooperation of cities, counties and police.
Pedestrian safety planning in the vicinity of transit stops.	Short crossing times and right turn on red limit access in some locations. Infrastructure improvements and law enforcement need targeting.	Requires cooperation of cities, counties and police.
Courtesy or flag stops for people with disabilities	Long distances between stops.	Feasibility will vary by type of area, availability of safe stopping locations.

Figure 7-5: Information and Assistance

Proposed Solution	Gaps Addressed	Implementation Issues
Transit information in accessible formats, including real-time information	Hard-to-read, confusing schedules; lack of alternatives for deaf, and blind or low-vision riders. Lack of user-friendly real-time information	Need to establish solutions locally in the absence of clear standards.
Improved signage at bus stops and stations	Orient senior and disabled passengers to where they are and how to get where they want to go.	Cost. Need to identify an appropriate agency or agencies
Enhanced regional information (using 511 or other means) about public transportation for paratransit users, people with disabilities, and speakers of languages other than English	Lack of live information for multi-operator trips. Very limited information in other languages.	Cost. Need to identify an appropriate agency or agencies
Enhanced local information and referral systems	Lack of comprehensive mobility information that includes resources other than conventional transit and ADA paratransit.	Information needs to be updated and verified frequently
Travel training, including orientation and mobility training and training for individuals and groups	Fear of using transit, lack of knowledge and familiarity with transit options.	Feasible
“Buddy” Programs where experienced transit riders accompany and support new riders	Fear of using transit, lack of knowledge and familiarity with transit options	Feasible
Training for older drivers	Limited knowledge of alternatives among long-time drivers; need for help planning for driving retirement.	It may be hard to add material about mobility options to nationally established driver training curricula.
Partnership with the DMV to assist people who have just lost their licenses	Limited knowledge of alternatives among long-time drivers; need for help planning for driving retirement.	Requires cooperation with DMV and funding.
Targeted marketing to encourage seniors and people with disabilities to ride transit.	Lack of knowledge, unrealistically negative perceptions that deter people from using transit.	Feasible; may require new funding.
Comprehensive mobility guides	Lack of comprehensive mobility information that includes resources other than conventional transit and ADA paratransit.	Information needs to be updated and verified frequently. Responsibility for distribution.
Increase awareness of wheelchair securement issues among transit and paratransit riders	Mobility devices that cannot be safely secured, while safe alternatives exist.	Resistance due to price, lack of standards, insurance limitations.
Transit safety education	Fear of crime on transit	Needs cooperation of police, transit security personnel, curriculum development.

**Figure 7-6: Miscellaneous
 (including solutions that fall into multiple categories)**

Proposed Solution	Gaps Addressed	Implementation Issues
Improved service quality measurement with rider participation	Gaps or limits of service quality measurement by contractors.	Requires training and monitoring to ensure objectivity.
Sharing of provider training and methods	Inconsistent quality regarding passenger assistance, transfers, etc.	Need to address issues of contractor proprietary information, different policies and equipment among systems, impact on contractor operations. May not be eligible for New Freedom funding.
Funding assistance for items such as fuel purchases	Lack of funding to specifically address fluctuations in fuel prices and alternative fuel solutions	Cost.
Funding for the development of emergency evacuation training programs	Lack of specifically designated funds for evacuation of people with disabilities	Cost
Increased funding flexibility to allow for more energy efficient vehicle purchases, for example as part of the 5310 program	Current Federal and State contracts provide limited range of vehicles for volume purchasing at discounted rates	Federal and State contracting procedures may take long time to change.
Funding for specific technological improvements such as cell phones with GPS devices	Current funding parameters do not accommodate technology that could be useful for improved service delivery, to address problems such as locating riders at large complexes	Federal and State contracting procedures may take long time to change.
Intelligent Transportation Systems (ITS) improvements	Service quality issues, problems waiting for vehicle arrivals, limited booking hours. Inability to co-mingle passengers on the same vehicle	Details about uses of technology and related customer policies need to be resolved by each operator. Development and application of cost-allocation software
County-wide mobility management, including public/private partnerships	Insurance, audit and report issues for small agencies, uncoordinated service, uncoordinated information, underutilized equipment.	Effective implementation will vary based on local structures.
Wheelchair breakdown service	No service is available in most areas, or is extremely expensive. Lack of such service may limit willingness to use transit.	Responsible entity will vary in each area.

Additions or Improvements to Paratransit that exceed ADA Requirements

I Premium services on ADA paratransit.

Premium services could respond to desires for service that exceed ADA requirements. Examples include the following types of service:

- Service beyond the ADA-required three-quarter mile corridors around transit routes. Some form of paratransit service beyond ADA-required areas would help people living in low-density and rural areas reach essential services.
- Service beyond the hours when transit routes are in operation. Extended hours would help people who cannot drive and have no way to get around after transit (and therefore also ADA paratransit) stops running.
- Interim service in the period when ADA paratransit eligibility applications are pending. Interim service would respond to needs of individuals when they first become disabled or are discharged from a hospital. Affordable, accessible transportation is generally not available before the individual is able to go through the process of obtaining ADA paratransit eligibility application materials and completing the application, and before the eligibility assessment process is completed. Under ADA regulations it can take up to 21 days to complete the eligibility process.
- Same-day requests. Same-day service would respond to a need for trips to deal with non-emergency but urgent medical appointments requiring same-day attention.
- Seamless inter-jurisdictional and inter-agency trips. Such trips would address issues related to uncoordinated fares, inaccessible transfer locations, and difficulty making reservations.
- Guaranteed exclusive rides with no stops for other passengers. This feature would help riders who cannot tolerate long ride times, especially for long-distance trips.

- Intermediate stops to allow passengers to stop en-route, for example to fill a prescription, without needing to wait for a second vehicle.
- Time-certain arrivals for jobs, training, etc.

Fares charged for premium services could exceed those charged for ADA paratransit (“premium fares”). All of these service gaps can also be met by non-ADA services run by cities or community organizations. Many of these gaps can also be addressed with other solutions described in this memo such as subsidized taxis and volunteer driver programs.

- 1 Feeder service connecting to fixed-route transit.

Feeder trips can be faster than shared-ride paratransit for certain lengthy trips and for some trips between paratransit service areas. This service, provided as an option for customers, is distinct from the mandatory feeder-service that ADA regulations permit operators to use as a service delivery method for certain passengers and trips.

- 1 Escorted travel on paratransit.

Escorted travel can overcome difficulties faced by some people using ADA paratransit. Escorts could provide assistance beyond lobby areas of buildings for those who need it. For people who live in large complexes, escorts could address problems that occur when a paratransit vehicle cannot wait in front or in clear view of the customer’s front door. Escorted travel could also help people who currently miss return trips because they have difficulty finding and staying at a designated waiting spot. (Note, some volunteer driver programs also respond to this gap.)

- 1 Transfer assistance or other measures to help with multi-operator paratransit trips and transfers between paratransit and fixed-route service.

Trips between counties or other service areas, and in some cases within counties, are difficult to make because they often require transfers between operators. These trips may require more advance notice than other trips and may require multiple calls to make reservations. Problems

with coordination of drop-off and pick-up at the transfer point inhibit travel and may result in individuals being stranded. Customers making connections between paratransit and fixed-route can also suffer from difficulties in coordination and would benefit from assistance in many cases. It may be most practical to provide transfer assistance at locations where staff is already present for other reasons.

- | Discounted paratransit fares or other subsidies for people with limited incomes.

Paratransit fares can be a significant issue for people with limited incomes, especially if they have high medical expenses or need to make frequent trips or use multiple systems requiring multiple fares. Discounted paratransit fares could be provided for people already on other means-tested programs. Subsidies for customers facing hardship could be provided through a non-profit organization.

- | Intelligent Transportation Systems (ITS) improvements that enhance service in ways that go beyond requirements of ADA.

Some ITS features, such as automated stop announcements, are being used to comply with ADA requirements (while also improving service for the general public). Others (such as automated vehicle location) are being used to improve the quality or efficiency of ADA paratransit and provide more accurate measures of service quality. Beyond these steps, ITS solutions can address issues that go beyond basic ADA compliance and service quality. For example, automated telephone technology or the Internet can be used to address the inconvenience for some riders of making reservations during regular business hours. Vehicle arrival notification, using automated phone calls or hand-held notification devices, might reduce the need to wait outside for a paratransit vehicle and reduce missed connections for passengers in large facilities or residential complexes.

- 1 Improved service quality measurement with rider participation.

Programs that involve paratransit riders in measuring service quality can spot issues missed by traditional methods and increase consumer understanding of service delivery issues. Riders are provided with data collection forms and training about the importance of objective and complete observations. A neutral party recruits riders and compiles results with assured confidentiality.

- 1 Sharing of provider training and methods to improve paratransit service quality and consistency.

Shared training on topics such as passenger assistance techniques, general principles of customer service, requirements of the ADA, complaint follow-up, coordinating transfers and multi-operator reservations have the potential to address customer issues with service quality and consistency. (Note that, to the extent such a project is limited to improving ADA paratransit service, it would not be eligible for New Freedom funding.)

Additions or Improvements to Demand – Responsive Services Other than ADA Paratransit

- 1 Demand-responsive group shopping service.

A group shopping service would help people who can use transit for many trips, but cannot use it if they need to carry packages.

- 1 Volunteer driver programs including steps that would support such programs, such as insurance, driver training, and assistance with recruitment.

Volunteer driver programs may be helpful in providing escorted transportation, transportation before the ADA eligibility process is completed, assistance with shopping trips, and many other forms of service that ADA paratransit does not provide as listed earlier under the heading “Premium services on ADA paratransit.” This category may also include programs that use paid drivers, like the Independent

Transportation Network operated in Portland, Maine. Another aspect of this program allows volunteer drivers to accumulate credits while they are driving so that they can use the credits when they need to be driven by other volunteers. However, lack of accessible vehicles may limit this option to those who do not use a wheelchair or are unable to transfer into an inaccessible vehicle.

- | Mobility Management or brokerage to coordinate currently under-used resources and help address coordination barriers.

Mobility management could expand the availability of services beyond those required by ADA paratransit by coordinating currently underused resources such as vehicles operated by assisted living facilities and other senior housing. A mobility manager might also help with insurance to cover volunteer drivers and vehicles, insurance for shared vehicles, vehicle maintenance, recruiting volunteers, compliance with reporting and audit requirements, and other issues that inhibit community-based paratransit services. A mobility manager could also provide comprehensive mobility information and connect individual riders with appropriate services.

- | Taxi discount programs

Taxi discounts would help address the lack of same-day paratransit and paratransit for people who are waiting for completion of their ADA paratransit eligibility applications. Discounted taxis can provide service at times when conventional transit service and ADA paratransit do not operate and for people with disabilities and seniors who are not ADA eligible but find transit unworkable for some trips. Taxis would provide direct rides for people who cannot endure occasional long paratransit ride times due to stops for other passengers. Taxi discounts can be provided using scrip, smart cards, vouchers, or electronic authorization by the subsidizing agency. In some parts of the Bay Area there are limited numbers of both accessible and non-accessible taxis. For this reason, the ability for wheelchair users to receive equivalent service will need to be addressed.

- 1 Incentives or assistance for taxicab companies to buy or convert accessible taxicabs.

Accessible taxicabs would extend the benefits of taxi discount programs to people who use wheelchairs and cannot transfer to a car seat. Even without discounts, accessible taxicabs would expand the transportation options of wheelchair users.

- 1 Incentives or assistance to improve the quality of taxi service for people with disabilities and seniors.

The ability and willingness of seniors and people with disabilities to use taxicabs is limited not just by price and accessibility but by service quality issues, including driver training, passenger assistance, and reluctance to accept trips that require extra effort or are unlikely to result in a tip. Local jurisdictions that regulate taxicabs do not always enforce existing local regulations and federal non-discrimination regulations.

- 1 Wheelchair breakdown service that would provide a ride home or to a repair facility for wheelchair users experiencing mechanical problems with their wheelchairs.

Such a service is lacking in many areas, and would provide an extra measure of confidence to enable wheelchair users to rely on fixed-route public transportation instead of paratransit.

- 1 Help for community organizations to expand service.

Increasing the supply of alternative services would address many of the limitations of existing paratransit services already noted. Assistance could take the form of providing retired paratransit vehicles together with maintenance or operating assistance, or simply funding the purchase of new vehicles. Assistance with insurance issues would also be helpful.

- 1 Non-emergency medical transportation for Medi-Cal patients.

Numerous proposals for providing non-emergency medical transportation (NEMT) would require regional or state action. One thing that local providers can do on their own is become NEMT providers under

existing Medi-Cal arrangements. This would address a lack of providers now available, improve access to medical care for people who have difficulty using ADA paratransit, and provide an alternative to ADA paratransit that provides a higher level of assistance, for example for dialysis patients. Since NEMT is free to the rider, this service would address issues of affordability related to frequent travel on ADA paratransit.

Additions or Improvements to Transit Services

- 1 Senior-friendly shuttles, jitneys, or circulators to shopping, medical facilities, and local services, including flexible route services.

These services can help address some of the needs for short notice or spontaneous travel that are difficult using next-day ADA paratransit reservations. They can help address the travel needs of seniors who no longer drive but are not ADA paratransit eligible. They may accommodate riders with wheelchairs or shopping carts more easily than conventional transit services. Assistance with grocery bags would help people who can use fixed-route transit for most trips, but cannot use it if they need to bring home packages.

- 1 Discounted transit fares or other subsidies beyond those already provided for seniors and people with disabilities.

This could also take the form of free transit during off-peak hours for riders with an ADA card, or very low-income riders with a Regional Transit Connection Discount Card. In the case of riders with an ADA card, the offer could extend to personal care attendants. Even with available discounts using the Regional Transit Connection Discount Card, fares can still be a problem for some people, especially for long trips involving zone fares or multiple operators. Even for trips on a single operator, very long trips can require multiple fares because of transfer time limits. An additional discount for ADA paratransit eligible riders may also be useful to encourage those with conditional eligibility to use fixed-route transit whenever possible.

- 1 Expanded fixed-route transit services in areas with limited or no existing public transit services, nights and evenings, and on weekends.

Limited service in some low-income areas and low-density areas makes it difficult for seniors and people with disabilities to travel. Limited evening and weekend service is widespread.

- 1 Better connections between transit systems especially where these are needed to reach regional medical facilities and county offices.

Limited or uncoordinated schedules and physical issues at transfer points make it difficult to reach regional facilities and county offices. This is particularly true where counties are served by multiple transit operators (such as Contra Costa, Solano, Sonoma, eastern Alameda, and rural portions of San Mateo and Santa Clara counties). Connections between counties and between buses and regional rail services also pose barriers to reaching important destinations. Coordination measures may include coordinated schedules, schedules that take into account time limitations of people making long trips, accessibility improvements at transfer points, restrooms at transfer points, and improved signage.

- 1 Additional wheelchair spaces on transit vehicles.

On some routes that are popular with customers who use wheelchairs, lack of wheelchair spaces is an issue. A particular priority would be routes with long intervals between buses, so that waiting for the bus is a hardship. Impacts on other customers, for whom space may also be an issue, would need to be considered.

- 1 Additional driver training on accessibility issues and features.

Passengers with disabilities continue to report difficulty related to proper securement and being passed up at bus stops. Aside from discouraging pass-ups and training drivers on proper mobility aid securement, training could address advising passengers about the reasons for pass ups and arranging for back-up transportation when appropriate. (A regional strategy related to wheelchair securement may also be needed.)

Improved Access to Transit Services

- Infrastructure improvements to improve pedestrian access, especially in the vicinity of transit stops.

Infrastructure improvement may include removing barriers on sidewalks, and improved or additional sidewalks, curb cuts, bus bulbouts, pedestrian crossings and signals (including audible signals and countdown signals), lighting, benches, shelters, and other pedestrian enhancements. Technological solutions akin to wayfinding devices might help blind people locate bus stops. These improvements would address problems that people have accessing transit service and also help people make some trips by walking. These improvements would help address traffic safety and fear of crime, bring existing facilities (in addition to key stations where accessibility is mandated by ADA) up to ADA accessibility standards, and create accessible pathways to transit stops. Many of these improvements would involve working with local jurisdictions.

- Targeted transit route and stop adjustments to assist seniors and customers with disabilities.

Scheduled variations in transit routes (such as commonly provided for schools or large employers) and locating bus stops based on the needs of seniors and people with disabilities, can make fixed-route service more usable and reduce dependence on paratransit. Paratransit ride data may show the locations of common destinations that customers could access by conventional transit service with minor adjustments in routes or schedules.

- Targeted law enforcement to improve pedestrian safety near transit stops in areas of special concern to older people and people with disabilities.

Crosswalk violations, parking violations, and dangerous behavior by bicyclists and skateboarders, especially in the vicinity of transit stops, make it harder for older people to use public transportation. Parking violations limit the ability of buses to pull up to the curb, making it difficult for older people and people with disabilities to board. Such law

enforcement efforts could also include education or raising awareness of bicyclists and skateboarders about the impact to these activities on seniors and persons with disabilities.

- | Pedestrian safety planning focusing on priorities for low-cost items such as retiming crosswalk signals and right-turn-on-red restrictions, as well as priorities for infrastructure improvements and targeted law enforcement in the vicinity of transit stops.

Difficult street crossings and traffic conflicts are particularly dangerous for seniors and people with disabilities trying to use transit.

- | Courtesy or flag stops for people with disabilities.

Long distances between bus stops (such as on bus rapid transit lines), often implemented to speed bus operation, may prevent people with disabilities from using bus service. Allowing passengers to “flag down” a bus between marked stops, or allowing passengers on a bus to request a “courtesy stop” between marked stops can address this issue. While some transit systems in low-density areas may permit drivers to use their judgment to identify safe stopping locations, others may need to develop more detailed policies or specific safe courtesy stop locations. Practical policies would be needed about which passengers can request stops.

Information and Assistance

- | Transit information in accessible formats.

Transit routes and schedules can be hard to read for people with limited vision and can be confusing for people unfamiliar with transit. Making information available in a wider variety of formats, standardized among transit systems, would help many older people and people with visual disabilities.

- | Enhanced regional information about public transportation for paratransit users, people with disabilities, and speakers of languages other than English.

Enhanced regional information, whether in the form of additions to 511.org and the 511 telephone information service, or by other means, would help in making trips by multiple operators and increase understanding of public transportation in general. Live information about making trips on multiple operators is currently not available.

- | Enhanced local information and referral systems to provide better access to information about transit, paratransit, and community transportation resources.

Lack of information prevents some people from using public transportation. Information about smaller programs run by cities, counties, or community groups may be confusing or difficult to find. Enhanced information and referral could address the needs of people who do not speak English and people who cannot navigate internet-based information (such as 511.org and operator web sites). Comprehensive mobility information would permit creation of one-stop information sources covering not just transportation but also housing and social services for seniors and people with disabilities. Note that such a function may also be a part of mobility management as discussed earlier.

- | Travel training and transit familiarization. In an effort to promote the independence of elderly and disabled individuals, training to ride fixed-route transit should be provided.

Seniors and people with disabilities who have never used public transportation have real concerns and fears of the unknown. Some have unrealistically negative impressions of public transportation that would be overcome by successful experiences using transit in the company of others. Relevant programs, provided free of charge, include one-on-one instruction about how to ride transit, bus buddies who ride along with new riders, group demonstrations and field trips.

- | Training for older drivers

Training for older drivers may include components to increase awareness of public transportation options, how to ease the transition from driving to alternatives, and how to maintain safe driving skills. This may include partnering with existing providers of older driver training to incorporate transit familiarization into these programs.

- 1 Partnership with the DMV to assist people who have just lost their licenses by providing information and assistance.

Seniors who may need to begin limiting their driving, or who have had their license rescinded, may be afraid to try transit because they don't know how to use it or because they have unrealistically negative perceptions of transit service. Cooperation with the DMV could help steer older people to needed assistance at the moment when license restrictions are imposed.

- 1 Targeted marketing to encourage seniors and people with disabilities to ride transit.

Promotions and programs such as free ride days, merchant sponsorships, organized field trips and "transit ambassadors" (seniors and people with disabilities who promote transit to their peers) would help seniors and people with disabilities learn about transit and how to use it. Transit ambassadors able to work with non-English speakers are also needed.

- 1 Comprehensive mobility guides, covering all mobility options for seniors and people with disabilities.

Printed or on-line mobility guides including modes other than conventional transit and ADA paratransit, such as community-based transportation, and services provided by cities and counties, would help individuals and people who provide them information.

- 1 Increase awareness of wheelchair securement issues among transit and paratransit riders.

Many riders, suppliers of wheelchairs, and medical professionals who recommend or specify wheelchairs are not aware of options for mobility

devices that are safe to use on public transportation. (Better cooperation among these groups may require regional or higher-level strategies.)

- l Transit safety education

Presentations by police officers to senior groups, in conjunction with transit agencies, can provide tips for riding transit safely and may help allay fears about crime on transit.

Evaluation Criteria

Preliminary evaluation criteria were presented at outreach meetings and have been modified based on suggestions made at the meetings. These criteria are intended to be used as a guide for evaluating projects based on the priority gaps and solutions in this plan. Ultimately, projects will be selected through a competitive process as described further in Chapter 9.

The criteria are intended to be flexible, so that differences among counties and even within counties can be taken into account. The order of presentation does not correspond to order of importance—no one category is considered more important than the others.

Federally-established requirements will also apply to specific funding sources. For example, New Freedom funds must support new public transportation services and new public transportation alternatives that “go beyond the requirements of the ADA and must (1) be targeted toward individuals with disabilities; and (2) meet the intent of the program by removing barriers to transportation and assisting persons with disabilities with transportation, including transportation to and from jobs and employment services.” (FTA C 9045.1, May 1, 2007.)

Community Criteria

- l Community support: Community support may take the form of formal endorsement by organizations and individuals, support by elected governing bodies, and connections to adopted plans.

- | Acute needs: The importance of needs will normally be reflected in community support, but also in priority designation in locally-adopted plans or policies. Acute needs may include needs of small groups who have been left unserved by other programs due to expense or other difficulties.
- | Unserved groups: Identifiable groups that are not able to use existing services may include people who face language and cultural barriers.

Financial Criteria

- | Cost: Is the overall cost of a project within a range that can realistically be funded with available sources, taking into account grants from the private or public sector or user fares/fees?
- | Cost per beneficiary: A broad range of few to many beneficiaries is compared to the cost of a program. Even though a program's total cost is low, if it reaches very few people it might still have a high cost per beneficiary. This would not necessarily eliminate a project from consideration if it ranked highly on other criteria including those listed under "Transportation Benefits Criteria" and "Community Criteria." Similarly, even though a program's total cost is high, if it reaches many people it might still have a low cost per beneficiary. It should be noted that the cost of provision of service relates to service that exceeds the ADA requirements, since ADA-required paratransit service must be provided regardless of cost considerations.
- | Funding availability and sustainability: To the degree possible, projects should have stable sources of funding to cover match requirements. In the case of pilot, demonstration, or capital projects, there should be reasonable likelihood of continued funding for operations. It is recognized that continued funding can never be guaranteed, as it is subject to budget processes, as well decisions and priorities of funders.
- | Leveraging resources: It is desirable for projects to help tap into other funding sources, especially new sources not previously available. Displacing existing funding is discouraged.

Implementation Criteria

- | Implementation time-frame: Projects that will produce results quickly are preferred, as long as they are also sustainable. Projects with long-term payoffs should have some form of measurable accomplishments in the short run.
- | Staging: Can the improvement be implemented in stages?

Coordination

- | Projects that involve coordination, for example multiple organizations working together to address a need, are desirable.

Transportation Benefits Criteria

- | Number of problems and trip types: Projects are preferred that address multiple problems and serve multiple customer groups and trip purposes.
- | Number of beneficiaries: In general, improvements that benefit many people are preferred to those that benefit few. However, the needs of relatively small groups might be considered particularly critical based on criteria under the heading "Community."
- | Unserved needs: Projects are preferred that address gaps left by other services rather than duplicating, overlapping with, or competing with other services. Note that the relative importance of various needs is a matter for local priorities as addressed under "Community."
- | Measurable benefits: As much as possible, there should be ways to measure how a project is benefiting target groups, whether in terms of numbers of people served, numbers of trips provided, improved measures of service quality, etc.

Chapter 8. Strategies to Enhance Coordination of Service Delivery

As indicated previously through this planning effort, there is significant overlap in the types of transportation gaps expressed by low-income persons, the elderly, or by persons with disabilities. Possible solutions to these gaps were grouped into five categories:

- | Additions or improvements to ADA paratransit
- | Additions or improvements to demand-responsive services other than ADA paratransit
- | Additions or improvements to transit services
- | Improved access to transit services
- | Information and assistance

These solutions represent potential projects, which could be eligible for SAFETEA-LU funds subject to this plan, or other sources of funding.

In addition to considering which projects or solutions could directly address these gaps, it is important to consider how best to coordinate services so that existing resources can be used as efficiently as possible. These strategies outline possibilities for a coordinated approach to service delivery with implications beyond the immediate funding of local projects, which may be short-term in nature. Examination of these coordination strategies is intended to result in consideration of policy revisions, infrastructure improvements, and coordinated advocacy and planning efforts, which, in the long run, can have more significant results to address service deficiencies.

As noted in Chapter 2, a range of potential coordination strategies was identified primarily through consultation with a number of key stakeholders already involved in the planning and implementation of human service transportation. Stakeholders were asked to identify successful coordination

efforts,, as well as barriers, or additional steps that are needed to promote coordination.

- | These strategies were then reviewed and discussed in detail at a focused workshop with public transit and human service agency stakeholders convened in Contra Costa County. Contra Costa County was selected because of previous coordination studies recently completed, and because several innovative coordination efforts have recently been implemented within the county.

Perhaps the most important “lesson learned” from the focus group and stakeholder consultation is that successful implementation of coordination strategies will require the joint cooperation and effort of multiple entities that may or may not have coordinated well in the past. Often, a champion is needed to assume leadership and manage implementation efforts; this “champion” may vary from case to case. Implementing some strategies may require leadership on the part of cities or other local jurisdictions, while others may be assumed by social service agencies, transit agencies, Congestion Management Agencies (CMAs), advocacy groups, MTC or, as discussed further in this memorandum, designated mobility managers.

The coordination strategies are identified as follows:

- | Enhance Land Use and Transportation Coordination
- | Promote Enhanced Pedestrian Access to Public Transit and other Alternative Modes of Travel
- | Promote Coordinated Advocacy and Improve Efforts to Coordinate Funding with Human Service Agencies
- | Improve Interjurisdictional and Intermodal Travel
- | Develop and Implement Mobility Management Approaches

Each strategy is described in more detail below, along with desired results, implementation steps needed, partners to participate in implementation, and potential barriers to implementation.

Enhance Land Use and Transportation Coordination

The need for better coordination between land use development and transportation was raised in a number of meetings in the outreach phase of this project. Examples were cited of social service agencies, medical facilities, senior housing, or employment centers that are not easily accessible by public transportation. Rather than locating key services near transit routes, often a facility will be built or relocated with the expectation that public transit can and will accommodate this location decision. For example, Contra Costa County's Health Services Homeless Program is planning to locate a one stop center and shelter for homeless individuals released from hospital in a remote industrial area that has no weekend bus service. The program, which has outgrown its current facility, is being relocated from Concord's Monument Corridor, which is ideally served by a variety of County Connection bus routes.

Major East Bay Medical Center reconsiders move to a low transit density location

Children's Hospital Oakland seriously considered relocating from Oakland to East Alameda or Contra Costa County in order to serve the needs of the growing number of families in those areas. Another reason was the relatively lower construction costs that would be involved in building a new facility rather than implementing seismic upgrades in the Oakland facility. Given the lower density transit network in the areas under consideration, current Oakland-based patients would have had a difficult time accessing the new facility if it was built. Based on a variety of considerations, including substantial input from Oakland elected officials, the hospital decided to stay and expand its existing facility. However, opposition from neighborhood residents to the expansion points to the difficulties faced by human service agencies and medical facilities that seek to locate or expand in densely populated areas.

The results of incompatible location decisions and public transit routing patterns are profound because:

- l Persons who are transit dependent have great difficulty in accessing some locations or cannot get there at all.
- l After the location decision has already been made, transit operators are put in the difficult position of needing to realign service or make a decision not to provide service at all due to lack of resources.
- l Transit-dependent residents who need to get to essential services are forced to increasingly rely on others for rides, or pushed from fixed-route public transit onto more costly paratransit services.

Furthermore, focusing efforts to encourage localities to plan and zone in such a way that essential services are clustered in transit-accessible centers could be a far more cost-effective strategy than continuing to plan and subsidize expensive and continuing expenditures on special transit services.

While the impacts of these location decisions are receiving increasing recognition among policy-makers, developing solutions to address these impacts has become particularly challenging due to the dramatic increase in construction and land costs. Financially strapped human service agencies are inclined to move to lower cost facilities in order to free up program funds for other social service expenditures.

For those wishing to influence these location decisions, it is often difficult to identify how the decisions are made and by whom, and these decision-making structures may vary considerably from one county to another. Moreover, quantifiable data on the costs and benefits of facility relocations are hard to come by. The cumulative effect of these factors is that facilities are being located with minimal public input, resulting in adverse impacts on both service clients and transit agencies. These adverse impacts can in turn serve to undermine the positive results of coordination practices proposed elsewhere in this plan.

A key to success in implementing enhanced land use and transportation coordination, then, is to identify and engage those who influence location decisions, and to educate them of the impact these decisions have for the populations of concern for this plan: persons with disabilities, older adults, and

low-income persons. As an initial phase, extensive outreach to decision-makers responsible for siting social service agencies, healthcare facilities and other important community services should be undertaken. MTC can work with the CMAs through the Transportation and Land Use Solutions (T-PLUS) Program to work with local jurisdictions to implement location decisions that favor access by public transit. In fact, MTC has recently included in its contracts with CMAs the expectation that CMAs will work with local jurisdictions to develop recommendations to implement land use findings that emerge from this plan, and to conduct workshops to assist local jurisdictions, transit agencies and health and human and social service providers implement land use findings emerging from the plan.

Another key stakeholder to engage is the Joint Policy Committee (JPC), which coordinates the regional planning efforts of the Association of Bay Area Government, the Bay Area Air Quality Management District, the Bay Conservation and Development Commission and the MTC, and pursues implementation of the Bay Area's Smart Growth Vision as expressed in the *Smart Growth Preamble and Policies and the Smart Growth Strategy / Regional Livability Footprint Project*. The JPC is a key stakeholder because of members' more direct connections with local governments; it could begin by looking at the effectiveness of policies used in other regions and states to encourage locating key services near transit services in the Bay Area.

For example, in California, Executive Order D-46-01, adopted by the governor in 2001, requires the Department of General Services to consider "sound and smart growth patterns" when locating state agencies, and to consider the following criteria:

- ┆ Siting agencies or leasing facilities in central cities or similar areas;
- ┆ Proximity to public transit; and
- ┆ Pedestrian access to retail and commercial facilities.¹

¹ National Trust for Historic Preservation (2002) State Agency Locations: Smart Growth Tools for Main Street p. 2. see: http://nthp.org/smartgrowth/toolkit_stateagency.pdf

Several other states, including Massachusetts, Maryland, Vermont, Indiana, Oregon and Pennsylvania have adopted similar and sometimes more stringent policies regarding the location of state agencies.² Pennsylvania, for example, calls for primary consideration to be given to the reuse of existing structures and downtowns when locating state agencies, and gives the state's Department of General Services power to deny requests from state agencies to locate or relocate outside of a downtown. At the federal level, Public Law 106-208, adopted in 2000, encourages federal agencies to consider locating their offices in historic properties in central cities.

From the City of Corvallis, Oregon's Transit Master Plan:

"Those seniors and persons with disabilities who can use the fixed-route bus service should be using the fixed-route bus to reduce the demand on special transportation resources. In the long range, work to minimize the need for special senior and disabled services, which will always be far less productive than the regular system. To do this, *permit new senior and disabled-oriented housing and activity centers ONLY on the primary corridors or on other major arterials where transit will be easy and logical to provide.*"

How effective have these existing federal and California policies been in improving the transit accessibility of recently opened facilities and offices? A thorough literature and policy review can help to answer these questions. Completing a similar review of the policies adopted in other states can help determine whether there are better models in effect around the country, which could be considered for the Bay Area.

Local partners are also working to enhance land use and transportation coordination. One such example is that of a partnership established between Samtrans and the County of San Mateo County. In 2000, the County of San Mateo opened a 20,000 square foot homeless shelter and parking area for employees on land leased from the San Mateo County Transit District. The site

² National Trust for Historic Preservation (2002) State Agency Locations: Smart Growth Tools for Main Street. See: http://nthp.org/smartgrowth/toolkit_stateagency.pdf

is adjacent to the District's North Base. The shelter was constructed in just a few months using a "sprung structure" of fabric over a metal frame to simplify construction. The shelter is open 5 pm – 7 am daily and closed during the day. Breakfast and dinner are served. SamTrans routes provide transportation to and from the shelter and a link to BART stations. The relationship between the homeless shelter and the operating base has been harmonious, and SamTrans worked with the FTA to allow federally funded land to be used for this purpose. The basis for agreement was that the project was a transportation-related use and fit well with the welfare-to-work and disadvantaged assistance initiatives.

Implementing this strategy involves the following steps:

- 1 Provide documentation of the issue: During the outreach phase of this planning process, participants provided compelling anecdotal evidence of the problems caused by putting social services in hard-to-reach places. An important first step is to move from anecdotes to clear, quantifiable documentation of the access problems and the high transportation costs that have resulted. Conducting a sampling of Bay Area health facilities, senior centers and social service agencies can provide compelling documentation of the difference between transit accessible and transit inaccessible locations.
- 2 Document examples of policies that have effectively addressed locational decisions: Over the past 30 years, numerous states, cities, counties and other public agencies have adopted policies that either encourage or require agencies to locate in transit-accessible locations.³ Reviewing these existing policies should serve two purposes. First, reviewing existing state and local policies would determine which policies are already in effect, how they are enforced and whether they have been effective. Second, documenting policies from other states can identify effective models that might be adopted in the Bay Area.

³ Many of these policies are aimed at multiple goals (in addition to transit accessibility), such as revitalizing city centers, preserving agricultural lands and restoring historic buildings.

- 3 Engage key stakeholders in the development of a regional strategy: Develop a new regional strategy—with county CMAs, JPC, transit agencies, health providers and local governments—to better understand and encourage effective local decisions regarding the siting of critical health facilities, senior centers, and social service programs. As an initial phase, extensive outreach to decision-makers responsible for siting social service agencies, healthcare facilities and other important services should be undertaken. This could take the form of interviews, focus groups, surveys and/or symposia. A second phase should convene a “summit” of health care professionals, planning directors, city managers, lenders, elected officials, and public transit operators in order to begin to develop elements of a regional strategy.
- 4 Build on the regional FOCUS program to incentivize positive location decisions: “Focusing Our Vision” (FOCUS) is a program to promote compact and equitable development that enhances quality of life and preserves open space. This initiative can be used to develop incentives to locate social service programs within Priority Development Areas (PDAs) in proximity to public transit, and to conduct a cost-benefit analysis that includes consideration of savings through avoided paratransit or non-emergency medical transportation costs.⁴ Another step to advance this strategy could be to develop specific tools, such as model language for local zoning codes, to identify social service facilities as “conditional uses,” with the condition that transit services appropriate to the clientele are in place.

Promote Improved Pedestrian Access to Public Transit and other Alternative Modes of Travel

Improved Pedestrian Access to Public Transit

The issue of enhanced pedestrian access to transit was raised extensively in public outreach convened for this project, and by various constituent groups. In

⁴ HIP provides federal transportation grants to cities which locate housing units near high quality transit at 30 units per acre or higher. TLC provides funding for projects that provide for a range of transportation choices, support connectivity between transportation investments and land uses, and are developed through an inclusive community planning effort.

urban areas, such as San Francisco, pedestrian safety is perceived as a key transportation issue. Residents or visitors in San Francisco are less likely to have cars than residents of other counties, and are more likely to rely on public transit, or walking to get where they need to go. On average, there is one pedestrian fatality per week in San Francisco. People age 65 and older are more likely to be killed as a pedestrian than persons from any other age group.⁵

In suburban communities, members of the public have identified the need to better synchronize pedestrian walk signals with the traffic flow, especially at multi-lane intersections that are difficult to cross. Some portions of rural areas also don't have sidewalks, which makes it difficult to get to and from public transit. Some bus stops in outlying areas may be difficult for some people, especially persons with disabilities, to navigate when passengers are required to disembark onto the shoulder of a road, on a steep hillside, etc.

California Vehicle Code Section 467.(a) A "pedestrian" is any person who is afoot or who is using a means of conveyance propelled by human power other than a bicycle. (b) "Pedestrian" includes any person who is operating a self-propelled wheelchair, invalid tricycle, or motorized quadricycle and, by reason of physical disability, is otherwise unable to move about as a pedestrian, as specified in subdivision (a).

As with land-use planning, implementing pedestrian improvements to enhance access to public transit can be challenging because usually cities or counties, and not transit agencies, are responsible for maintaining local streets and roads. Often, the best way to influence implementation of specific pedestrian improvements is through the development of city-based pedestrian plans, such as that completed by the City of Oakland.

⁵ Traffic Safety Among Older Adults: Recommendations for California, California Task Force on Older adults and Traffic Safety, Center for Injury Prevention Policy and Practice, San Diego State University.

Oakland was the first city in California, and one of the first in the nation to develop a comprehensive pedestrian plan. It can be found at:

<http://www.oaklandnet.com/government/Pedestrian/index.html>

This document highlights the importance of a viable pedestrian access to use public transit, and points out that 148,000 weekday pedestrian trips are to and from AC Transit bus lines within the City of Oakland, and an estimated 57,000 weekday pedestrian trips are to and from BART stations in the City of Oakland. The plan has developed a policy response to existing conditions, which directly address the plan's goals:

- Pedestrian safety
 - | Pedestrian access
 - | Streetscaping and land use
 - | Education

In the five years since the plan was adopted, progress has been made on three important fronts:

- | City-wide collision analyses emphasize pedestrian safety as an Oakland policy concern – the plan illuminated a problem that required a response
- | The plan provided design guidelines that introduced new design concepts that have subsequently become standardized, particularly bulb-outs and refuge islands
- | Streetscape and major development projects are now routinely reviewed against the Pedestrian Master Plan to ensure policy consistency

MTC has completed planning specific to pedestrian safety that has relevance to this plan; in particular, these include the Bay Area Pedestrian Districts Study and the Bicycle-Pedestrian Safety Toolbox.

The Bay Area Pedestrian Districts Study was commissioned by MTC in 2006 to explore the use of pedestrian districts as a concept for creating better pedestrian environments in the Bay Area. Through the development of the

pedestrian district typologies and real-life case studies, the study identifies the types and costs of pedestrian facilities that have the greatest impact on improving the pedestrian environment.

*The Bicycle-Pedestrian Safety Toolbox*⁶ contains a description of the types of policies, codes, and standards jurisdictions can adopt to improve bicyclist or pedestrian safety or encourage pedestrian and bicycle travel. Sample policy documents are provided, including General Plans, Specific Plans, Redevelopment Plans, codes and bicycle and pedestrian plans. Roles for city and county governments are outlined, along with identification of potential funding sources. The toolbox was intended as educational, and to highlight best practices and illustrative actions local agencies could undertake in order to improve pedestrian access.

Both of these resources provide practical examples and tools to assist local jurisdictions implement pedestrian improvements. Since their completion, MTC has conducted training and sponsored forums where these materials have been distributed and discussed. Efforts could also be taken to disseminate information from these studies to non-traditional stakeholders such as social service agencies who may be encouraged to become involved in the local pedestrian planning process.

Many pedestrian-related concerns and gaps have also surfaced through the Community-based Transportation Program (CBTP). Projects recommended to close these gaps may be eligible for funding through MTC's Lifeline Transportation Program (LTP). The LTP, which is administered by each county's Congestion Management Agency (CMA) or other designated entity, funds projects that will improve the mobility of low-income residents of the Bay Area, with a focus on addressing gaps emerging from CBTPs. Both the Regional and County-sponsored Bicycle and Pedestrian Programs would also be funding possibilities to advance pedestrian projects, as well as those available at the local level. However, successful implementation of these efforts will require the ownership of local jurisdictions to ensure projects are consistent with local

⁶ Both reports can be found in their entirety on MTC's web site as follows:
http://www.mtc.ca.gov/planning/bicyclespedestrians/Ped_Districts/index.htm
<http://www.mtc.ca.gov/planning/bicyclespedestrians/safety/framework.htm>

priorities, and to ensure they are successfully carried out and maintained over the long term.

In 2006, MTC adopted a policy (MTC Resolution 3765) that stipulates that projects funded all or in part with regional funds (e.g. federal, State Transportation Improvement Program, bridge tolls) shall consider the accommodation of bicycle and pedestrian facilities. These recommendations are intended to facilitate the accommodation of pedestrians, which include wheelchair users, and bicyclist needs into all projects where bicycle and pedestrian travel is consistent with current, adopted regional and local plans.

The policy further requires that MTC, its regional bicycle and pedestrian working groups, the county congestion management agencies (CMAs) and other stakeholders develop a project checklist to be used by implementing agencies to evaluate bicycle and pedestrian facility needs. MTC anticipates launching the checklist by the end of 2007 and will monitor the results to see how this policy affects future non-motorized accommodations.

The Regional Pedestrian Committee (RPC), an advisory committee to MTC, is charged with addressing pedestrian-related issues in the Bay Area. At present, it is developing a series of pedestrian planning needs that will result in a paper describing how pedestrian needs can be addressed at the regional level.

Promote Alternative Modes of Travel

A fundamental principle of MTC's Lifeline Transportation Program is the recognition that not all gaps in the transit network are effectively met through provision of additional fixed route service. The cost to increase fixed route service may be prohibitive, and inefficient if few passengers are being carried (e.g., late at night or on weekends.) Other alternatives, such as community shuttles, guaranteed ride home programs, taxis, vanpools, etc. may better address identified gaps, and be more cost effective than fixed-route transit.

An additional advantage to supporting alternative modes of service is that they can be designed and implemented specifically to address a local community's needs. For example, a new deviated route shuttle service was recently designed and implemented within the Monument Corridor of Contra Costa County to

better link health care and shopping facilities to public transit. This project emerged through the local Community Based Transportation Plan, and was designed by project stakeholders.

Members of the disability community (with the exception of San Francisco) spoke to the need for additional taxi services, especially those that are wheelchair accessible. Taxis provide a flexible approach to meeting transportation needs in that they do not require a previous reservation and often operate where and when fixed route or paratransit is not available. However, taxis are regulated at the local level, and most jurisdictions do not require the availability of accessible vehicles within the local taxi fleets. Even within a county, regulatory oversight of taxi programs is not necessarily consistent from city to city. While some counties (i.e. Alameda, San Francisco, Santa Clara) rely on taxis as an integral component of their paratransit programs, others are still exploring opportunities to better integrate taxi programs into their services.

Use of taxis can also be effective in meeting the needs of seniors who may need some special care with their travel but may not be ADA paratransit eligible. Likewise, use of taxis has been identified as a possible strategy for low-income residents traveling during off-hours, or for emergency purposes, when regular transit may not be available.

In December 2005, the Marin County Taxi Cab Joint Powers Authority adopted a county wide ordinance to regulate all taxi cab companies and drivers operating in the member municipalities. The Marin Streetlight Acquisition is a Joint Powers Authority set up to absorb responsibilities of the former Street Light JPA, including administration of street light program, abandoned vehicles, taxi regulations, and other programs.

Other counties within the Bay Area may be interested in monitoring the status of implementation of this ordinance or in using it as an example of how to consolidate or better coordinate multiple taxi programs.

The Marin County Transit District also recently completed a study on Enhanced Taxi Services for Social Service Transportation and Public Transit Programs in Marin County. The purposes of the project was to identify opportunities for enhanced taxi services in Marin County to supplement and support current and future social service transportation programs. The study was funded by MTC, and is intended to be a model to inform other counties or local jurisdictions on how to enhance taxi services within their localities.

San Leandro FLEX Shuttle

The shuttle service consists of a series of shuttle stops throughout San Leandro at key locations of interest to older adults and people with disabilities, such as residential facilities, shopping, transit and community centers. The FLEX Shuttle is available to residents who are 60 years or older or ADA paratransit eligible. In addition, the Curb-to-Curb service allows residents who qualify to call and make a reservation for the shuttle to pick them up and drop them off at a specific location within San Leandro, and is available to residents who are 75 years or older or ADA paratransit eligible.

Implementing this strategy involves the following steps:

- 1 Build upon previous MTC work focusing on pedestrian planning and safety. In particular, disseminate information resulting from the Bay Area Pedestrians Districts Study and the Bicycle-Pedestrian Safety Toolbox to cities, human service agency partners, transit and paratransit operators, community based organizations involved in MTC's CBTP, senior associations or others interested in promoting pedestrian safety. Regional non-profit agencies that focus on local development issues (i.e. Transportation and Land Use Coalition, Urban Ecology) may also have an interest
- 2 Encourage community-based transportation plans (CBTPs) as an avenue to identify and address pedestrian-related barriers at the neighborhood level. The CBTPs address a variety of transportation gaps and barriers specific to low-income communities within the Bay Area, and solutions are developed in direct consultation with neighborhood residents or advocates.
- 3 Encourage the development of county or citywide taxi ordinances that would enhance the provision of accessible subsidized taxi programs. For example, local jurisdictions authorized to issue taxi permits or licenses could provide incentives for companies and/or individual owners who provide accessible vehicles. In many communities, the issuance of new taxi permits are restricted, and preference could be given to permitting new accessible taxis.

- 4 Distribute and share the results of the recently completed Marin County Enhanced Taxi Services Project with EDAC, transit and paratransit program staff and other interested stakeholders.

Promote Coordinated Advocacy and Improve Efforts to Coordinate Funding with Human Service Agencies

The need for expanded public transit was raised more frequently in the outreach process than any other transportation barrier. Fixed route service does not always operate where or when it is needed, especially outside the urban core. There is also a critical need for additional paratransit services and funding. The region currently spends \$110 million per year to provide ADA complementary paratransit services, an increase of 5% from the previous fiscal year.⁷ Over the next two decades, the aging of the population will result in a significant increase in demand for paratransit or other specialized services. Stakeholders and outreach meeting participants support efforts to seek additional funding to allow for this expansion.

Many stakeholders also expressed the need to overcome barriers that prevent combining transportation funds with human service agency funds. Often, social service funds are dedicated to meeting the needs of a specific clientele (e.g. developmentally disabled individuals, seniors, etc.) and funding source or agency rules preclude using these funds in combination with others because of their need to ensure agency funds are appropriately utilized for their respective clients. This “silo” effect prevents effective mixing and matching of a variety of fund sources that could contribute to a more cost-effective and responsive transportation system.

Recent federal initiatives⁸ support the development of coordinated transportation programs. However, only federal transportation dollars are subject to coordination planning activities, despite the fact that the Department

⁷ MTC Statistical Summary, March 2007

⁸ *A Framework for Action*: The Framework for Action is a self-assessment tool that states and communities can use to identify areas of success and highlight the actions still needed to improve the coordination of human service transportation. This tool has been developed through the United We Ride initiative sponsored by FTA, and can be found on FTA's website: http://www.unitedweride.gov/1_81_ENG_HTML.htm

of Health and Human Services spends more on human service transportation than does the DOT, as illustrated in Figure 8-1.

Figure 8-1: Estimated Spending on Transportation Services for the Transportation-Disadvantaged by Federal Agencies in Fiscal Year 2001

Agency	Amount spent on transportation for transportation-disadvantaged (millions)	Percent of total estimate	Number of programs included in estimate	Total number of programs that provide transportation
Department of Health and Human Services	\$1,771	72.4%	10	23
Department of Transportation	\$317.3	13%	6	6
Department of Veterans Affairs	\$160.8	6.6%	3	3
Department of Education	\$135.3	5.5%	2	8
Department of Labor	\$26.4	1.1%	3	15
Department of Housing and Urban Development	\$21.7	0.9%	4	4
Department of Agriculture	\$13	0.5%	1	2
Total (for 8 agencies)	\$2,445.5	100%	29	62

Sources: GAO Summary of HHS, DOT, VA, Education, DOT, Agriculture, HUD data and estimates. ⁹

In February 2004, President Bush signed an Executive Order intended to direct federal agencies to coordinate their transportation programs. Through that Executive Order, an Interagency Transportation Coordinating Council on Access and Mobility (CCAM) was established to focus 10 federal agencies on the coordination agenda.¹⁰ CCAM launched United We Ride, a national initiative to implement the Executive Order and the Action Plan established by the CCAM. The CCAM submitted a status report to the President in 2005, which outlined actions taken to decrease duplication and increase efficiencies. CCAM has

⁹ As included in: Transportation-Disadvantaged Populations: Some Coordination Efforts Among Programs Providing Transportation Services, but Obstacles Persist, United States General Accounting Office, Report to Congressional Requesters, June 2003

¹⁰ The full text of Executive Order #13330 may be found at www.whitehouse.gov/news/releases/2004/02/20040224-9.html

focused on five key recommendations included in the 2005 Status Report, including: (1) coordinated planning, (2) vehicle sharing, (3) cost sharing, (4) performance measures and (5) demonstration grants to simplify access for consumers.

Some states have taken the initiative to formally and actively pursue coordination through the establishment of coordinating councils or other appointed groups representing public transit and social service agencies. Recent State of Washington legislation, for example, reauthorized the Agency Council on Coordinated Transportation (ACCT), which is charged with promoting coordinated human service transportation within the state of Washington. Likewise, the State of Florida has established a similar Commission charged with statewide human service coordination. Excerpts from legislative language establishing these councils follow:

2006 State of Florida Statutes: CHAPTER 427, TRANSPORTATION SERVICES (ss. 427.011-427.017)

"The Commission for the Transportation Disadvantaged; purpose and responsibilities.--The purpose of the commission is to accomplish the coordination of transportation services provided to the transportation disadvantaged. The goal of this coordination shall be to assure the cost-effective provision of transportation by qualified community transportation coordinators or transportation operators for the transportation disadvantaged without any bias or presumption in favor of multi-operator systems or not-for-profit transportation operators over single operator systems or for-profit transportation operators."¹¹

¹¹ The State of Florida administrative code regulating the Commission may be found at: <http://www.dot.state.fl.us/ctd/docs/chapter41.pdf>

SHB 1694 (State of Washington) C 421 L 07

“In 1998 the Legislature created the Program for Agency Coordinated Transportation (PACT or the Program) and the Agency Council on Coordinated Transportation (ACCT or the Council) for the purpose of improving the efficiency and coordination of transportation systems for persons with special transportation needs, and to facilitate a statewide approach to coordination that supports the development of community-based coordinated transportation systems serving persons with special transportation needs.

The Council is required to perform various duties, in coordination with stakeholders, designed to assure implementation of the Program. To that end, the Council's duties include: (1) developing guidelines for local planning of coordinated special needs transportation; (2) providing a state-level forum at which state agencies may discuss and resolve coordination and program policy issues; (3) administering and managing grant funds to develop, test, and facilitate the implementation of coordinated systems; (4) identifying barriers to coordinated transportation; and (5) recommending statutory changes to the Legislature to assist in coordinated transportation.”¹²

The State of Washington can serve as an effective model in part because the ACCT is established state legislature, and is directly accountable to the legislature. Elected officials serve on the Council, which develops an annual work plan and reports on its progress to the legislature in a formal report every two years. In addition, many of the activities undertaken by ACCT are prescribed through legislation. One recent initiative of ACCT was to establish the requirement for human service agencies to track their purchased transportation costs, an effort which can set the baseline for future coordination efforts.

In California, Caltrans intends to sponsor a planning project (Mobility Action Plan), based in part on the Washington model, that will support goals to better

¹² The full text of the legislation may be found at: <http://apps.leg.wa.gov/billinfo/summary.aspx?bill=1694>

coordinate human service transportation at the statewide level. In particular, the project would:

- | Develop a Memorandum of Understanding between the Health and Human Services Agency and the Business, Transportation and Housing Agency to support coordination efforts;
- | Develop a comprehensive funding matrix to identify agency expenditures for transportation;
- | Develop a proposal for a demonstration pilot project that would allow for the utilization of transit passes for Medicaid eligible persons needing to access medical services.
- | Establish, through a directive of the Governor, a statewide Mobility Council and Mobility Task Force.

This project could have implications for Bay Area and other state stakeholders by establishing a solid baseline of funding information for state agencies that sponsor human service transportation. It will also result in the development of a statewide transportation council, similar to the State of Washington, that will be charged with promoting coordination and, for the first time, provide a forum for statewide coordination efforts between social service and transportation agencies.

State legislation modifying state requirements for human services transportation could directly affect the ability to coordinate service delivery to seniors and persons with disabilities. Such legislation could include:

- | Direct state agencies receiving transportation funds to report on the services provided with these funds
- | Require human service programs to plan for transportation services and evaluate their performance in consultation with public transit agencies and other relevant stakeholders
- | Directly enable and encourage the use of human service funding to match transit funds or to otherwise combine their funding with other sources of funds to allow more "bang for the buck."

- i Seek to streamline other administrative barriers (i.e. purchasing or procurement rules, insurance requirements, etc.) that may impede coordination efforts at the local level

Implementing this strategy involves the following steps:

- 1 In consultation with MTC advisory committees and other local and statewide stakeholders, develop a comprehensive legislative platform as described above.
- 2 Re-initiate previous MTC legislative efforts from the mid-1990's to promote human service transportation in California. Since that time, a number of developments suggest that the present climate is more conducive to enhancing coordination efforts, including the federal United We Ride effort, new funding sources specifically designated for coordination, and Caltrans' Mobility Action Plan.
- 3 Identify key state legislators willing to sponsor statewide legislation intended to accomplish coordination objectives.
- 4 Actively seek the support of partner organizations such as National Council of Independent Living (NCIL), The World Institute on Disability (WID), the Transportation and Land Use Coalition (TALC) and others to place greater emphasis on the coordination of elderly and disabled transportation services in their advocacy efforts.

Improve Interjurisdictional and Intermodal Travel

For persons whose transit trips cross from one service area into another, the resulting transfer can be time-consuming and at times confusing. The need to improve interjurisdictional travel was raised by each of the three constituency groups, whether they use fixed route transit or paratransit. In some cases, trips may cross county lines, which may mean transferring to another service provider or even a different mode of service (for example, bus to rail, or bus to ferry). Even within some counties (i.e. Contra Costa County), the presence of multiple transit operators can trigger the need to transfer within the county.

Each of over 20 transit agencies has adopted its own fare structure and service policies, which are in some cases inconsistent with neighboring transit agencies.

In April, 2006, MTC adopted a "Transit Connectivity Plan" including a series of recommendations specific to the following:

- | The need for better signage at major transit points and transit hubs;
- | Schedule and route coordination between connecting operators;
- | Access to transit information whether via 511, web sites, or paper information;
- | The availability of "real time" transit information at key stops and stations;
- | Amenities such as benches, shelters, lighting, etc., for a more comfortable wait for connecting services; and
- | The availability of "last mile" services not otherwise provided by regular fixed route services, such as taxis or community shuttles, which can get people from a transit center or bus stop to their final destination.

The Regional Transit Connectivity Plan outlines a series of enhancements intended to improve connectivity, which are in various stages of implementation. MTC is providing funding to implement the majority of this work. MTC has also adopted Interagency Transfer Guidelines for the region's paratransit providers to improve services for paratransit customers who transfer from one system to another. These guidelines have not been evaluated or updated in several years. As a result, transit agencies may not be consistently implementing the guidelines, which can result in confusion for paratransit customers and operators alike. Although very few paratransit trips are interjurisdictional in nature, they can be costly and time-consuming to arrange for, and inconvenient and difficult for many customers.

Implementing this strategy involves the following steps:

- 1 As MTC and the transit agencies proceed to implement the connectivity improvements at key transit hubs they should take steps to ensure that

these improvements take into consideration the specific transportation needs of older adults and persons with disabilities.

- 2 Prior to full implementation, test key connectivity improvements such as improved wayfinding signage, or 511 improvements to ensure their accessibility for senior and disabled populations.
- 3 Review the status of the SB 1474 Plan (MTC Resolution 3055) to ensure respective coordination policies, such as the paratransit interagency guidelines, regional ADA paratransit eligibility program and other policies are and up to date and reflect actual practice. Support PTCC Accessibility Committee's efforts to encourage seamless paratransit transfers through greater coordination such as that resulting from the monthly meetings recently initiated by the four paratransit providers in Contra Costa County.

Mobility Management

Achieving advances in current mobility management efforts will depend on the effectiveness of the coordination and advocacy strategies cited earlier in this report. Although not a new concept, mobility management activities may now be funded through three SAFETEA-LU programs (JARC, Section 5310, New Freedom). These activities consist of short-range planning and management activities and projects for improving coordination among public transportation and other human service transportation-service providers. Mobility management is considered an eligible capital expense, which requires a 20% local match to the federal funds, rather than the 50% local match required for operating expenses.

Mobility management is intended to build coordination among existing public transportation and human service transportation providers with the goal of cost-effectively expanding the overall level of service for seniors, persons with disabilities and low income persons. According to guidance issued by FTA, eligible mobility management activities may include:

- | 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;
- | Support for short term management activities to plan and implement coordinated services;
- | The support of State and local coordination policy bodies and councils;
- | The operation of transportation brokerages to coordinate providers, funding agencies and customers;
- | The development and operation of one-stop transportation call centers to coordinate transportation information on all travel modes and to manage transportation program eligibility requirements and arrangements for customers among supporting programs; and
- | 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).
- | Testing and implementing technology that could account for individual client activity on a vehicle supported with multiple fund sources.

Establishing a Mobility Manager for a defined geographic area would help ensure that staffing resources are provided to carry out coordination activities. Ideally, a mobility manager would assume responsibility for coordinating programs, funding, information, and transportation services of all modes to meet the needs of low-income, elderly and disabled persons. A transit agency could serve as mobility manager, as could a social service agency, nonprofit agency, or a Consolidated Transportation Service Agency (CTSA).

In California, one mechanism for promoting the concept of mobility management is through the designation of CTSA's. The Social Service

Transportation Improvement Act of 1979 mandated improvements to social services transportation, and led to the designation of CTSAs. By law, CTSAs are to identify and consolidate all funding sources and maximize the services of all public and private transportation providers. CTSAs are authorized to directly claim TDA and STA funds and, in many cases, are able to leverage other human service funds by nature of this designation.

CTSAs are designated by the local Regional Transportation Planning Agency (RTPA), which is MTC for the nine-county Bay Area. Currently, there are no active CTSAs within the region. With the full implementation of the paratransit provisions of the ADA in 1996, which required transit operators to assume responsibility for the provision of complementary paratransit, the role of CTSAs changed and many were in fact assumed under the auspices of the transit agencies.

The Contra Costa Measure J Expenditure Plan supports funding for (a) managing the program, (b) retention of a mobility manager, (c) coordination with non-profit services, (d) establishment and/or maintenance of a comprehensive paratransit technology implementation plan, and (e) facilitation of countywide travel and integration with fixed route and BART.

Implementing this strategy involves the following steps:

- 1 Encourage the establishment of mobility managers. Doing so would establish a more formal mechanism for promoting coordination between human service and public transit agencies at the local level.
- 2 Through a mobility management approach, test and implement technology that could track individual client activity on a vehicle supported with multiple fund sources.
- 3 Convene a regional workshop to focus on providing technical assistance and information sharing for those interested in developing mobility management activities.

Figure 8-2 summarizes the proposed strategies and corresponding implementation steps. As recognized throughout this planning effort,

successful implementation will require the joint cooperation and participation of multiple stakeholders. For some, a clear leader has not been identified. Chapter 9 of this report proposes a series of next steps, which can serve as a starting point for launching these implementation efforts.

Figure 8-2: Implementation of Coordination Strategies

Enhanced Land Use and Transportation Coordination: Implementation Steps	Partners/Stakeholders
Provide documentation of the issue	TBD
Document examples of policies that have effectively addressed locational decisions	TBD
Engage key stakeholders in the development of a regional strategy.	JPC, CMAs
Build on the regional FOCUS program to incentivize positive locational decisions	JPC, CMAs through T-Plus program
Promote Alternative Modes of Travel, including Improved Pedestrian Access to Transit: Implementation Steps	Partners/Stakeholders
Build upon previous MTC planning work specific to pedestrian safety, and disseminate the results to other partner organizations.	Local jurisdictions
Encourage pedestrian-related planning at the community level through CBTPs.	MTC, CMAs
Encourage the development of countywide taxi ordinances that would enhance the provision of accessible taxi programs	Counties, CMAs
Distribute and share the results of the recently completed Marin County Enhanced Taxi Services Project with EDAC, transit and paratransit program staff and other interested stakeholders.	Marin County, PTCC Accessibility Committee, EDAC, Counties and Cities
Promote Coordinated Advocacy and Improve Efforts to Coordinate Funding with Human Service Agencies: Implementation Steps	Partners/Stakeholders
Develop a comprehensive legislative platform to address improved human service transportation coordination	MTC, Bay Area Partnership, transit agencies and other local stakeholders
Re-initiate previous MTC legislative efforts to promote human service transportation in California.	MTC, Advisory Committees, Bay Area Partnership, human service agencies, other local stakeholders
Identify a legislator willing to sponsor statewide legislation intended to address the platform defined above.	MTC, elected official(s)
Actively seek the support of partner organizations such as National Council of Independent Living (NCIL), The World Institute on Disability (WID), the Transportation and Land Use Coalition (TALC) and others to place greater emphasis on elderly and disabled transportation needs in their advocacy efforts.	Local advocacy organizations, MTC Advisory Committees

Improved Interjurisdictional Travel: Implementation Steps	Partners/Stakeholders
Prioritize connectivity improvements at transit hubs	MTC, MTC Advisory Committees, transit agencies, human service agencies
Prior to full implementation, test key connectivity improvements such as improved wayfinding signage, or 511 improvements to ensure their accessibility for senior and disabled populations.	MTC, MTC Advisory Committees, transit agencies, human service agencies
Review the status of the SB 1474 Plan (MTC Resolution 3055) to ensure respective coordination policies, such as the paratransit interagency guidelines, are accurate and being implemented.	MTC, MTC advisory committees, transit operators, PTCC Accessibility Committee, human service agencies
Mobility Management: Implementation Steps	Partners/Stakeholders
Encourage the development of Mobility Managers	TBD
Research and share examples of mobility manager models of excellence established elsewhere.	MTC, human service agencies, Transit and Paratransit Operators, PCCs
Test and implement technology that could track individual client activity on a vehicle supported with multiple fund sources.	MTC, local stakeholders

Chapter 9. Next Steps

This chapter outlines immediate and long-term steps required for MTC to adopt this plan.

Amend MTC Resolution 3787

In November 2006, the Commission adopted MTC Resolution 3787, which documented the transportation needs and strategies specific to low-income persons. The plan built upon previous planning efforts undertaken by MTC in support of improving transportation in Bay Area low-income communities. As a first step, MTC staff will seek amendment of MTC Resolution 3787 to include the results of this planning effort. Together, they will comprise MTC's Coordinated Public Transit-Human Service Transportation Plan.

Funding Processes for use of SAFETEA-LU Funds

As the designated recipient of JARC and New Freedom funds for the San Francisco Bay Area Urbanized Area, MTC is required to select projects with these funds that are (1) derived from this plan, and (2) selected through a competitive procurement process. The State Department of Transportation (Caltrans) will continue to administer and be responsible to select projects for use of Section 5310 funds. Chapter 1 of this report discusses eligible uses for and recipients of these funds.

JARC (Section 5316)

As the previous recipient of JARC earmarks, MTC established and funded a number of projects to improve transportation for low-income persons through the Lifeline Transportation Program mentioned in Chapter 8. Funding for the Lifeline Program is supported through a variety of funding sources, including JARC and Regional Discretionary State Transportation Administration (STA) funds. In addition, Proposition 1B Transit funds were recently directed to the Lifeline Program by Commission policy.

While MTC oversees the Lifeline Transportation Program, for the first Lifeline funding cycle, county congestion management agencies¹ (CMA) administered the program, soliciting projects through a competitive process, and prioritizing projects for funding. Each county's prioritized list of projects was submitted to MTC, where projects were matched with an appropriate fund source. MTC incorporated federally-funded projects into the Transportation Improvement Program (TIP), and allocated or otherwise disbursed funds through contractual arrangements.

MTC will evaluate the first cycle of the Lifeline Transportation Program before moving forward with the program's second cycle.

Elderly and Disabled Program (Section 5310)

The State Department of Transportation (Caltrans) remains responsible to oversee the federal Section 5310 Program. Caltrans solicits applications for use of Section 5310 funds on an annual basis. Each county prioritizes local applications and submits this prioritized list to MTC. MTC then facilitates a regional process to prioritize projects received from all nine counties, which in turn is submitted to Caltrans. Caltrans administers its own competitive process (which recognizes local priorities) to recommend a final slate of projects that ultimately is submitted to the California Transportation Commission (CTC) for approval.

New Freedom Program (Section 5317)

MTC is responsible to conduct a competitive selection process for use of New Freedom funds. As they represent a new source of funds, there is no precedent as to their use, nor any procedures in place to direct the selection process. One possibility for distributing New Freedom funds would be for MTC to issue a regional call for projects. In the call for projects, MTC could specify priority topic areas based on findings emerging from Chapters 6-8.² A selection

¹ In Santa Clara County, the Lifeline Program is jointly administered by Santa Clara County and the Valley Transportation Authority, Santa Clara's congestion management agency.

² The FTA Final Circular C 9045.1, effective May 1, 2007, suggests that the designated recipient could identify priority projects, such as accessible taxis, same-day paratransit service, etc., and solicit projects in response to the needs identified through the plan.

committee comprised of MTC staff and other stakeholders (who are not otherwise applicants of funds) could select projects based on agreed upon scoring criteria.

Another possibility would be for the New Freedom funds to be coordinated with the Section 5310 selection process. Under this scenario, each county would identify potential projects for use of New Freedom funds and submit them to MTC when they identify potential Section 5310 funds.

Finally, a relationship between the New Freedom Program and the Lifeline Transportation Program could be considered to determine possibilities for coordination.

Plan Update

Federal guidelines indicate that at a minimum, the coordinated plan should follow the four year update cycles for the Regional Transportation Plan (RTP). MTC will next update its RTP in 2009, which would provide an opportunity to directly link the development of the coordinated plan with the RTP. Because projects must be derived from the plan, it may also be necessary to update or amend the list of prioritized projects to coincide with the Lifeline Transportation Program funding cycles, or other funding cycles specific to fund sources subject to this plan.

Appendix A. Literature Review

Local Research

Following is a list, by county, of recent studies examining transportation needs in the San Francisco Bay Area, with an emphasis on the needs of elderly and disabled individuals and populations. A wide range of local agencies and organizations were contacted to be sure to identify all relevant studies.

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Figure A-1 Recent Studies Examining Transportation Needs of Elderly and Disabled Populations

MTC Coordination Plan

Literature Review – List of Previous Studies

BAY AREA		
San Francisco Bay Area Older Adults Transportation Study (OATS)	Metropolitan Transportation Commission (MTC)	2002
MTC Lifeline Transportation Network Report	MTC	2001
ALAMEDA COUNTY		
2005 Needs Assessment	Alameda County Area Aging on Aging	2005
Central Alameda County Community-Based Transportation Plan	Alameda County Congestion Management Agency	2004
West Oakland Community-Based Transportation Plan	Alameda County Congestion Management Agency	2006
Removing Paratransit Gaps in Alameda County	Alameda County Transportation Improvement Authority	2004
Study for the Viability of Taxi Use for Paratransit Services in the Tri-Valley	Livermore Amadore Valley Transit Authority	2006
Wheels Short Range Transit Plan	Livermore Amadore Valley Transit Authority	2004
Wheels Strategic Plan	Livermore Amadore Valley Transit Authority	2006
CONTRA COSTA COUNTY		
Contra Costa Paratransit Improvement Study	Contra Costa Transportation Authority/MTC	2004
Monument Corridor (Concord) Community-Based Transportation Plan	City of Concord	2006
Richmond Area Community-Based Transportation Plan	Metropolitan Transportation Commission (MTC)	2004
Concord Senior and Youth Transportation Study	City of Concord	2003
Aging-Friendly Survey and Aging-Friendly Strategic Plan	Contra Costa for Every Generation	2005
Key Informant Survey	Contra Costa County Area Agency on Aging	2003
MARIN COUNTY		
Canal Neighborhood (San Rafael) Community-Based Transportation Plan	Transportation Authority of Marin, City of San Rafael	2006
Marin County Short Range Transit Plan	Marin County Transit District	2006

Coordinated Public Transit/Human Services Transportation Plan • Elderly and Disabled Component

METROPOLITAN TRANSPORTATION COMMISSION

NAPA COUNTY		
Napa Community-Based Transportation Plan	Napa County Transportation Planning Agency	2004
Napa Healthy Aging Planning Initiative - Community Summit and Action Plan	Napa County Area Agency on Aging	2005
SAN FRANCISCO COUNTY		
On Lok Transportation Program Assessment (2000) and Action Plan (2002)	On Lok, San Francisco	2000, 2002
San Francisco Paratransit Program White Paper Analysis	San Francisco Municipal Transportation Agency	2003
SAN MATEO COUNTY		
San Mateo County Senior Mobility Action Plan	San Mateo County Transit District	2003
Strategic Plan for Accessible Transportation Services (SPATS)	County of San Mateo, SamTrans	2004
East Palo Alto Community-Based Transportation Plan	City/Council Association of Governements (C/CAG)	2004
San Mateo County Strategic Plan for Services for Older Adults and Adults with Disabilities	San Mateo County Aging and Adults Services Division	2005
SANTA CLARA COUNTY		
Santa Clara Valley Transportation Authority (VTA) Community Transportation Needs Assessment and Options Study	Santa Clara Valley Transportation Authority	2000
Gilroy Community-Based Transportation Plan	Santa Clara Valley Transportation Authority	2006
Community for A Lifetime - A 10-Year Strategic Plan to Advance the Well-Being of Older Adults in Santa Clara County	Santa Clara County Department of Aging and Adult Services	2005
SOLANO COUNTY		
Solano County Senior and Disabled Transit	Solano Transportation Authority	2004
Dixon Community-Based Transportation Plan	Solano Transportation Authority/MTC	2004
SONOMA COUNTY		
Living Longer, Living Well: A Community Report on Older Adults, Adults with Disabilities, and their Caregivers	Sonoma County Area Agency on Aging	2005
Santa Rosa Paratransit Monitoring Needs	City of Santa Rosa	2006

Appendix B. Peer Review and Best Practices

National Research



The following section is a peer review of coordination activities nationwide. A peer review is a useful tool for providing insight into how other regions and agencies address transportation coordination. The lessons learned based on their experience with transportation coordination provide valuable information for the San Francisco Bay area. This information was gathered directly from individuals involved in coordination activities in these areas, through questionnaires and telephone interviews asking them to describe their experiences, and supplemented with research of published plans and studies related to coordination. Peers were selected because they were known to represent good examples of coordination in a metropolitan area, or because their programs incorporated elements that could be replicated in the Bay Area.

This information is presented to help inform local programs about efforts undertaken by their colleagues and counterparts in other parts of the country, in order to stimulate ideas and suggest new options. In some cases, these programs may not be possible to replicate in California or the Bay Area due to funding sources or policies specific to those areas.

Information is presented on the following regions and agencies:

- | Denver-Boulder Metropolitan Area (Denver, Colorado)
- | Tarrant County, Texas
- | Heart of Texas Council of Governments
- | Capital Area Rural Transportation System (CARTS) (Austin, Texas)
- | Chicago Regional Transportation Authority
- | Maricopa Association of Governments (Phoenix, AZ)

- 1 Cuyahoga County Planning Commission (Cleveland, OH)

Denver-Boulder Metropolitan Area (Denver, Colorado)

The Regional Transit District (RTD) serves much of the developed Denver-Boulder metropolitan area, including all or part of Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, and Jefferson Counties. RTD provides a range of transit services, including:

- | Local, express, and regional fixed-route services
- | Paratransit services for ADA eligible individuals
- | Light rail transit
- | Call-and-Ride services for the general public

The core of the RTD system is within downtown Denver and along Highway 36 between Boulder and Denver. Newer suburbs have lower levels of local service, but do not have well-developed service connections to downtown Denver. RTD does not cover all of the metropolitan area. Some local communities augment RTD service with locally provided services. RTD provides some of these services, either directly or under contract, and other agencies pay for and provide the services. Paratransit service is limited in areas that provide only express or regional bus service.

Lessons Learned

- | Reducing unnecessary redundancy of service, such as more than one organization providing service to similar clients in overlapping service areas, can lead to significant cost savings without compromising service
- | Keep abreast of new funding opportunities
- | Importance of periodic face-to-face communication and presentations between providers and potential partners
- | Individuals sitting on boards of multiple service providers, where applicable, encourages collaboration
- | Importance of regional dialogue, especially to understand differences of funding availability and other factors within the region

Tarrant County, Texas

Tarrant County is an urban county located in the north central part of Texas. Fort Worth serves as the county seat to a county population of approximately 1.4 million citizens. Tarrant County is a member of the North Central Texas Council of Governments.

The primary public transit provider in Tarrant County is the Forth Worth Transportation Authority (FWTA). The service, called "The T," is provided to "member" cities but not all cities in the county are members. Many cities have insufficient funding to become members and therefore do not receive T service. As of September 2006, 36 local bus routes operate in Tarrant County and four Express bus routes provide commute service. Rail service is provided between Ft Worth, Dallas and the DFW Airport, in coordination with Dallas Area Rapid Transit (DART). Carpool/vanpool support is also provided.

FWTA provides paratransit service in the service areas of Forth Worth, Richland Hills and Blue Mound. FWTA, however, does not provide paratransit or other specialized services elsewhere in Tarrant County.

Lessons Learned

- | Explore opportunities for economies of scale – single administrative agency and operator for region reduces overhead and redundancy of service, compared to numerous grantees and operators
- | Get key organizations/stakeholders on board – funding agencies, regional/local transportation authorities, and operators
- | "Get out there" – meet potential partners face-to-face, get to know each other, communicate often and develop a persuasive message that is sensitive to their needs
- | Make changes gradually to allow potential partners to become participants as they are able, and identify interim programs and policies (such as providing more limited service and/or at a higher fare in areas that have not yet secured sufficient funding for less expensive, more comprehensive service).
- | Establish channels for regular feedback from partners and clients – quarterly surveys, online customer comment forms, etc.
- | Market program regionally – common brand, centralized phone number and website to get information and procure rides, certification and ID (for disabled, seniors, etc.), standardized policies and fare structures, etc.

Heart of Texas Council of Governments

The Heart of Texas Council of Governments (HOTCOG), established in 1966, is an organization of local governments working together voluntarily to solve mutual problems and plan for the future of the six county area including Bosque, Falls, Freestone, Hill, Limestone and McLennan counties. Currently, HOTCOG has over 80 member government agencies consisting of counties, cities, school districts, community colleges, and special districts.

Lessons Learned

- 1 According to the current program manager, key to coordination success has been developing trust and establishing effective communication, through frequent face-to-face meetings, between the COG, local governments, and human-service providers, and encouraging their continued involvement in planning and programming activities.

Capital Area Rural Transportation System (CARTS) (Austin, Texas)

Austin is the state capital of Texas with a population of almost 700,000 within the city limits and 1.4 million in the region. It is a dynamic city, with a mix of government and high-tech employees, and students, faculty and staff from the University of Texas at Austin. The region surrounding Austin remains quite rural, however, with many small cities of less than 10,000 people. Economic development in the rest of the region has not occurred as it has in Austin, requiring long distance travel for services and employment opportunities.

Lesson Learned

- 1 To ensure effective communication, CARTS periodically attends meetings scheduled by various local agencies and organizations, to discuss issues and opportunities related to their service.

Chicago Regional Transportation Authority

The Regional Transportation Authority (RTA) was created in 1974 upon the approval of a referendum by the residents of Cook, DuPage, Kane, Lake, McHenry and Will counties in northeastern Illinois. The RTA is a special purpose unit of local government and a municipal corporation of the state of Illinois. From the time of its creation, the RTA's mission has been to ensure financially sound, comprehensive and coordinated public transportation for northeastern Illinois.

The RTA system is one of the largest in North America, with over 575 million riders in 2004. The system covers 3,721 square miles with a population of 7.3 million people.

The RTA system includes:

- | The Chicago Transit Authority (CTA) provides bus and rapid transit service within the City of Chicago and to 38 suburban municipalities, with about 1.5 million weekday riders. CTA buses carry almost 1 million passengers each weekday while CTA rapid transit carries approximately 500,000 weekday riders.
- | The Commuter Rail Division (Metra) provides commuter rail service connecting downtown Chicago with 68 other Chicago locations and 100 suburban communities. Metra carries approximately 248,000 weekday riders.
- | The Suburban Bus Division (Pace) provides fixed-route bus, paratransit and vanpool services to 200 communities throughout the suburbs and from suburban locations to the City of Chicago. Pace carries approximately 119,000 weekday riders. The CTA, Metra and Pace are each led by a Board of Directors, which determine levels of service, fares and operational policies.

Lessons Learned

- | Formation of a coordinating council of providers that meets bimonthly is increasing communication between providers and those interested in becoming providers.
- | Local agencies and governing bodies often have an intimate knowledge of client needs and opportunities to meet those needs, that they can then communicate to a larger governing body or agency, such as the coordinating council of providers.
- | Likewise, successful coordination activities involve the clients themselves to get their perspective and ideas as to how to provide better service.
- | Regional agencies can help by funding local coordination efforts, offering volume-discounts on capital purchases and leasing of vehicles, and by providing technical guidance and facilitating knowledge transfer within the region (and from other regions).
- | Important for coordination efforts to address both technical and organizational issues – including potential jurisdictional, financial conflicts between providers.
- | A key to success has been collaborative teamwork amongst multiple agencies and direct involvement of funding and other lead agencies in coordination activities.
- | Knowledge transfer and leadership from individuals and organizations with prior experience can support new coordination activities
- | Identify opportunities to educate and involve potential participants in coordination who may not be interested initially.
- | Customized approach to local needs and situations may be more desirable than a universal standardized approach throughout the region.

Maricopa Association of Governments (Phoenix, AZ)

The Maricopa Association of Governments (MAG) is a Council of Governments that serves as the regional agency for the metropolitan Phoenix area. MAG provides a regional forum for analysis, discussion and resolution of issues

including areas of transportation, air quality, environment, regional development and social services.

MAG has implemented an Elderly Mobility Initiative to develop and design a transportation system that addresses the needs and issues of elder mobility in the Maricopa region. The MAG Elderly Mobility Stakeholder Group has developed 25 recommendations in the MAG “Regional Action Plan on Aging & Mobility” for creating safe and enhanced mobility options for the region’s mobility, overall quality of life and general travel characteristics.

Lessons Learned

Note: these are recommendations not yet necessarily implemented, from the “Regional Action Plan on Aging and Mobility.”

- | Develop “Family of Services” matrix to compare programs against demographics and varying needs of certain groups
- | Dedicate staff time to support regional coordinating council
- | “One stop shopping” –information system common to the region, including website, telephone number for information and/or arranging rides, etc.
- | Test new programs in pilot areas (or with one or a few organizations before rolling-out to the region)
- | Promote involvement of a variety of potential providers – private sector, faith-based community, civic groups, etc.

Cuyahoga County Planning Commission (Cleveland, OH)

The Cuyahoga County Planning Commission (CPC) performs a unique role in the Cuyahoga County community. As a successor to the Cuyahoga County Regional Planning Commission (RPC), the CPC has over a half century legacy of providing land use, zoning, development, and other planning services for the county's cities, villages, and townships; the Board of County Commissioners; and other governmental and not-for-profit organizations.

It is intended that the CPC be engaged in all facets of the county's planning and implementation activities to achieve compatibility among all units of government.

Lessons Learned

- ı Important to develop long-term, mid-term, and immediate goals and projects for implementation. Near-term successes provide early benefits and build momentum towards longer-term goals.

Key to their success was first defining transportation needs and what the responsibilities would be to meet these needs, and *then* identify which agencies and organizations are best suited to take on these responsibilities. In their region, there were some concerns about the appropriate role of regional agencies, non-profit organizations, and local municipalities. In the development of a coordination plan, there was a consensus for the need to centralize administration and establish a regional call center to broker requests for services. Initially the organization that would provide this was simply referred to as the Senior Transportation Organization. Ultimately, it was decided that it was less desirable for a public agency to take on this responsibility – a non-profit organization was established that is able to more effectively draw support from local communities and philanthropic organizations. The lead public agency was able to step aside and not feel compelled to take on this responsibility, while still providing important programmatic and funding support.

Directory - Transportation Inventory

Following is a list, by county, of agencies included in the Transportation Inventory (Appendix C).

County of Alameda

Agency Name:	First name	Last name	Phone	E-mail
Alzheimer's Services of the East Bay	Karen	Grimsich	510-644-8292	karen@aseb.org
Bay Area Community Services	Hakeim	McGee	510-272-4796	hmcgee@bayareacs.org
Berkeley Paratransit Services	Angellique	De Coud	510-981-5428	adecoud@ci.berkeley.ca.us
Center for Elders Independence (CEI)	Peter	Szutu	510-433-1150	pszutu@cei.elders.org
City of Berkeley, Division On Aging	William	Rogers	510-981-5178	WRogers@ci.berkeley.ca.us
City of Fremont Paratransit	Shawn	Fong	510-574-2033	sfong@ci.fremont.ca.us
City of Hayward - Paratransit Program	Victoria	Williams	510-583-4230	victoria.williams@hayward-ca.gov
City of Oakland	Jeffrey	Weiss	510-238-3036	jweiss@oaklandnet.com
City of Pleasanton Paratransit Services	Pam	Deaton	925-931-5367	pdeaton@ci.pleasanton.ca.us
City of Union City	Wilson	Lee	510-675-5409	wlee@ci.union-city.ca.us
East Bay Paratransit Consortium	Mary	Rowlands	510-893-5949	paratran@aol.com
LIFE ElderCare, Inc.	Lori	Vogel	510-574-2096	lvogel@ci.fremont.ca.us
Livermore Amador Valley Transit Authority	Cyrus	Sheik	925-455-7555	csheik@lavta.org
Regional Center of the East Bay	Laura	Corona	510-383-1226	lcorona@rceb.org
Spanish Speaking Unity Council ('Unity Council')	Marsha	Murrington	510-535-6900	mgm@unitycouncil.org

County of Contra Costa

Agency Name:	First name	Last name	Phone	E-mail
Central Contra Costa County Transit Authority	Cindy	Dahlgren	925-676-1976 x205	cdahlgren@cccta.org
City of Antioch Senior Bus	Brenda	Perry	925-778-1158	bperry@ci.antioch.ca.us

City of Lafayette	Mary	Bruns	925-284-5546	MBrun@lovelafayette.org
City of San Ramon	Teri	Mountford	925-973-3271	tmountford@sanramon.ca.us
Contra Costa ARC	Carol	McCrary	925-685-9742	carolmcap@aol.com
Contra Costa County Employment & Human Services Dept.	Paul	Branson	925-313-1702	pbranson@ehsd.cccounty.us
Eastern Contra Costa Transit Authority	Steve	Ponte	925-754-6622	sponte@eccta.org
Golden Rain Foundation/Rossmoor	Gretchen	Hansen	925-988-7670	ghansen@rossmoor.com
Guardian Adult Day Health Center	Peter	Behr	510-669-1007	pbehr@guardianadhc.org
Mt. Diablo ADHC	Debbie	Toth	925-682-6330	dtoth@rsnc-centers.org
Richmond Paratransit	Tina	Harrison	510-307-8030	tina_harrison@ci.richmond.ca.us
Veterans Administration (Contra Costa County)	Thomas	Bangura	925-372-2174	bangura.thomasp@med.va.gov
Westcat	Robin	Tawfall	510-724-3331	robin@westcat.org

County of Marin

Agency Name:	First name	Last name	Phone	E-mail
Golden Gate Bridge, Highway and Transportation District	Cynthia	Petersen	415-257-4415	cpetersen@goldengate.org
Marin County Transit District	Amy	Van Doren	415-499-6100	avandoren@co.marin.ca.us
Senior Access	Jennifer	Tripathy	415-897-6884	jtripathy@senioraccess.org
Senior Access/Kentfield	Brian	Stensler	415-482-4107	bstensler@senioraccess.org
Whistlestop	Jackie	Mulroy	415456-9062	jackie.mulroy@thewhistlestop.org

County of Napa

Agency Name:	First name	Last name	Phone	E-mail
Napa County Transportation Planning Agency	Deborah	Brunner	707-259-8778	dbrunner@nctpa.net

County of San Francisco

Agency Name:	First name	Last name	Phone	E-mail
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Golden Gate Regional Center	Lisa	Rosene	415-546-9222	lrosene@ggrc.org
Kimochi, Inc.	Anna	Sawamura	415-931-2294	Asawamura@kimochi-inc.org
Laguna Honda ADHC	Charles	Rivera	415-759-3360	
North & South of Market ADHC	Cynthia	Davis	415-882-7301 x11	cynthiadavis@nsmdayhealth.org
On Lok Senior Health Services	Billy	Chan	415-550-2262	bchan@onlok.org
Saint Francis Memorial Hospital	William	McMahon	415-353-6352	wmcmahon@chw.edu
San Francisco Department of Aging and Adult Services	Betsy	Eddy	415-355-6786	betsy.eddy@sfgov.org
San Francisco Veteran's Administration Medical Center	Kathy	Gotschall	415 750-6613	Kathy.Gotschall@med.va.gov
SFMTA/Municipal Railway	Annette	Williams	415 701-4444	annette.williams@sfmta.com

County of San Mateo

Agency Name:	First name	Last name	Phone	E-mail
City of Foster City	Leslie	Carmichael	650-286-3236	lcarmichael@fostercity.org
Coastside Opportunity Center	Gary	Naman	650-726-9071	gary@gan-trans.com
SamTrans	Bill	Welch	650-508-6475	welchb@samtrans.com
San Mateo County Aging and Adult Services	Shea	Muller	650-573-3527	smuller@co.sanmateo.ca.us
Senior Coastsiders	Cara	Schmaljohn	650-726-9056	CaraSchmal@aol.com

County of Santa Clara

Agency Name:	First name	Last name	Phone	E-mail
Achievekids	Michael	Gennette	650-494-1200	
Agnews Developmental Services	Anthony	Ho	(408)-451-7414	aho@agneews.dds.ca.gov
Avenidas	Ginger	Johnson	650-289-5425	gjohnson@avenidas.org
Gardner Family Health Network, Inc.	Efrain	Coria	408-918-2682	ecoria@gfhn.org
Outreach and Escort, Inc.	Kathryn	Heatley	408-436-2865	KatieH@outreach2.org

San Andreas Regional Center	Michael	Carbaugh	408-341-3444	samikec@sarc.org
Santa Clara Valley Transportation Authority	David	Ledwitz	408-321-7034	david.ledwitz@vta.org
Veterans Administration (Santa Clara County)	Linda	Hollan	650-493-5000	

County of Solano

Agency Name:	First name	Last name	Phone	E-mail
Benicia Breeze	John	Andoh	707-745-0815	jandoh@ci.benicia.ca.us
City of Dixon	Jeff	Matheson	909 678-7000	jmatheson@ci.dixon.ca.us
City of Vacaville, City Coach	Brian	McLean	707-449-5330	bmclean@cityofvacaville.com
City of Vallejo	Jeanine	Wooley	707-553-7224	jwooley@ci.vallejo.ca.us
Fairfield/Suisun Transit	George	Fink	707-428-7768	gfink@ci.fairfield.ca.us
Pace Solano	Gloria	Standafer	707-448-4574	gloria@pacesolano.org
Rio Vista Delta Breeze	John	Andoh	707-374-2878	jandoh@ci.rio-vista.ca.us
Solano Transportation Authority	Elizabeth	Richards	707-427-5109	erichards@sta-snci.com

County of Sonoma

Agency Name:	First name	Last name	Phone	E-mail
Becoming independent	Robert	Brown	707-524-6675	rbrown@becomingindependent.org
City of Petaluma	John	Siragusa	707-778-4421	jsiragusa@ci.petaluma.ca.us
Council on Aging	Jane	Doroff	707-525-0143	mowcoa@sonic.net
Healdsburg Transit	Sonja	Drown	707-431-3324	sdrown@ci.healdsburg.ca.us
North Bay Regional Center	Kim	Maasen	707-569-2034	kimm@nbrc.net
Santa Rosa Citybus	Michael	Ivory	707-543-3335	mivory@srcity.org
Sonoma County Transit	Jim	Wagner	707-585-7516	jim@sctransit.com
Southwest Adult Day Services	Janice	Duarte-Cord	707-573-4543	jcordova@friendshouse.org

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Alzheimer's Services of the East Bay

Phone: 510-644-8292

**2320 Channing Way
 Berkeley, CA 94704**

**Contact: Karen Grimsich, Executive
 E-mail: karen@aseb.org**

**FAX: 510-540-6771
 TDD:**

Type of agency	Private non-profit
Description of services	Transport individuals between their home and Adult Day Health care facility. We have 3 facilities located in Berkeley, Hayward and Oakland. Each facility has around 60 participants enrolled. All participant/riders have cognitive impairment. We run 6 vans/day for a total of 15 runs/day, Monday through Friday.
How are transportation services provided?	Provides services directly to clients Provides transit tickets or passes to clients.
Who is served?	Alameda County and western Contra Costa county Number of one-way trips per month (roundtrip =2): 1200 Average clients per month: 80
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients are disabled. Clients must be on Medicaid. Must have a verified medical reason. Must meet age requirement. Cognitive impairment
Eligibility activities	Transportation services are provided for the following purposes: Adult day health care;
Equipment	Total vehicles owned/operated: 8 Number of buses: 8 Number of vans: Number of autos: Number of lift- or ramp-equipped vehicles: 8
Transp services employees	Management, full time paid: 6 Management, part-time paid: 2 Volunteers:
Transp. services funding	TOTAL annual transportation budget: \$350,000 Main sources of operating funding: MediCal Measure B Main sources of capital funding: Cal Trans
Transp. services costs	Admin. costs : \$40,000 Capital costs: \$10,000 Operating costs: \$300,000
ADA Paratransit	ADA PT revenue miles: ADA PT Trips: ADA PT revenue hours Operation costs:

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No - in fact I think most organizations do not like to transport individuals with cognitive impairment.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Bay Area Community Services

Phone: 510-272-4796

**7901 Oakport Street, Ste. 3400
 Oakland, CA 94621**

**Contact: Hakeim McGee, Transportation
 E-mail: hmcgee@bayareacs.org**

**FAX: 510-272-4744
 TDD: 510-613-0328**

Type of agency	Private non-profit		
Description of services	Transport 62+ aged seniors from high density senior buildings to local shopping locations. We also provide transportation for occasional recreation group outings.		
How are transportation services provided?	Pays Eastshore Charter Lines to provide transportation services.		
Who is served?	City of Oakland Number of one-way trips per month (roundtrip =2): 1,100 Average clients per month: Not tracked.		
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Must live within a certain geographic area. Must meet age requirement.		
Eligibility activities	Transportation services are provided for the following purposes: Social/recreational/personal trips; To meals or nutritional counseling; Grocery shopping		
Equipment	Total vehicles owned/operated: 3		
	Number of buses: 3	Number of autos:	
	Number of vans:	Number of lift- or ramp-equipped vehicles: 3	
Transp services employees	Management, full time paid: 1		
	Management, part-time paid:		
	Volunteers:		
Transp. services funding	TOTAL annual transportation budget: \$250,000 Main sources of operating funding: City of Oakland Measure B - \$250,000 Main sources of capital funding: No consistent source, but BACS would rely on grants and private donations.		
Transp. services costs	Admin. costs : \$95,000		
	Capital costs:		
	Operating costs: \$155,000		
ADA Paratransit	ADA PT revenue miles:	ADA PT revenue hours	
	ADA PT Trips:	Operation costs:	

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

I believe that the City of Oakland offers an array of diverse services that address majority of the need in the area.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

Our service was developed to fill a service gap in our area and to my knowledge; no other service has surfaced since we began in 2002. I believe that the City of Oakland does not have a significant amount of duplication of transportation services.

MTC Coordinated Public Transit - Human Service Transportation Plan
Transportation Services Inventory

Berkeley Paratransit Services

Phone: 510-981-5428

**2180 Milvia Street
Berkeley, CA 94704**

**Contact: Angellique De Coud, Program
E-mail: adecoud@ci.berkeley.ca.us**

**FAX: 510-981-5450
TDD: 510-981-6903**

Type of agency	Public agency
Description of services	Berkeley Paratransit Services provides a limited amount of free taxi scrip, wheelchair-van vouchers, and East Bay Paratransit tickets to participants in the program.
How are transportation services provided?	Provides transit tickets or passes to clients. Provides taxi scrip/van vouchers to clientele.
Who is served?	City of Berkeley Number of one-way trips per month (roundtrip =2): 0 Average clients per month: 0
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Must live within a certain geographic area. Must meet age requirement. If under the age of 70 must be ADA certified
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types).
Equipment	Total vehicles owned/operated: 0 Number of buses: 0 Number of autos: 0 Number of vans: 0 Number of lift- or ramp-equipped vehicles: 0
Transp services employees	Management, full time paid: Management, part-time paid: 3 Volunteers:
Transp. services funding	TOTAL annual transportation budget: \$302,359 Main sources of operating funding: Meaure B - \$182,359 General Fund - \$120,000 Main sources of capital funding: N/A
Transp. services costs	Admin. costs : \$135,131 Capital costs: 0 Operating costs: 0
ADA Paratransit	ADA PT revenue miles: ADA PT revenue hours ADA PT Trips: Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

There continues to be a need for transportation services to and from health related appointments.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No there is no other organization in Berkeley that provide taxi scrip or van vouchers.

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

Center for Elders Independence (CEI)

Phone: 510-433-1150

510 17th Street, 4th Floor
Oakland, CA 94612

Contact: Peter Szutu, President and CEO

FAX: 510-452-8836

E-mail: pszutu@cei.elders.org

TDD: 510-433-1165

Type of agency	Private non-profit
Description of services	Center for Elders Independence is a Program of All-inclusive Care for the Elderly (PACE), committed to helping frail older adults maintain their independence, dignity and quality of life. CEI is a Health Plan which provides medical care, a day center, home care services and transportation.
How are transportation services provided?	Provides services directly to clients
Who is served?	City of Oakland, northern and central Alameda County, sections of western Contra Costa County. Number of one-way trips per month (roundtrip =2): 7,260 Average clients per month: 3,630
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements:
Eligibility activities	Transportation services are provided for the following purposes:
Equipment	Total vehicles owned/operated: 24 Number of buses: 20 Number of vans: 2 Number of autos: 2 Number of lift- or ramp-equipped vehicles: 22
Transp services employees	Management, full time paid: 4 Management, part-time paid: 0 Volunteers: 0
Transp. services funding	TOTAL annual transportation budget: 1,851,077 Main sources of operating funding: Medicare and Medi-Cal Main sources of capital funding: Grant-writing, fund development, private donor base, agency reserves
Transp. services costs	Admin. costs : \$277,660 Capital costs: \$100,000 Operating costs: \$1,473,417
ADA Paratransit	ADA PT revenue miles: ADA PT revenue hours ADA PT Trips: Operation costs: \$0

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

We do not have a sufficient number of vehicles to transport our clients. This problem is exacerbated by our growth. Because of the frailty and mobility impairment of our clients, we are unable to generate a high enough trip count to qualify for the number of vehicles under the FTA 5310 program that we really need, as per the application guidelines that were in effect until the 2006-2007 cycle. Opportunities for coordination in transporting clients have not been easy to find due to the following barriers: insurance coverage stipulates that our own employees operate vehicles; State regulations will not allow comingling of passengers; periods of usage of vehicles are the same across agencies; our agency has no down time in usage.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

We can see the potential for savings among agencies if there were an opportunity to coordinate such services as the group purchase of vehicle repair and maintenance; or of mobile routine maintenance and servicing, or of bulk purchase of gas. There would also be the possibility of coordinating training in such areas as CPR, first aid, hazardous materials handling, elder abuse prevention and other basic skills.

MTC Coordinated Public Transit - Human Service Transportation Plan
Transportation Services Inventory

City of Berkeley, Division On Aging

Phone: 510-981-5178

**2939 Ellis Street
Berkeley, CA 94703**

**Contact: William Rogers, Mr.
E-mail: WRogers@ci.berkeley.ca.us**

**FAX: 510-981-5220
TDD:**

Type of agency	Public agency
Description of services	We have three vans that transport seniors to and from each of the three Senior Centers in Berkeley. Currently, we are only funded for two drivers. On specific days, seniors are transported to pharmacies, grocery stores and some recreational trips.
How are transportation services provided?	Provides services directly to clients
Who is served?	Berkeley, CA Number of one-way trips per month (roundtrip =2): 350 Average clients per month:
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Must meet age requirement.
Eligibility activities	Transportation services are provided for the following purposes: Social/recreational/personal trips; To meals or nutritional counseling; transport to and from centers
Equipment	Total vehicles owned/operated: 3 Number of buses: Number of autos: Number of vans: 3 Number of lift- or ramp-equipped vehicles: 3
Transp services employees	Management, full time paid: 5 Management, part-time paid: 2 Volunteers:
Transp. services funding	TOTAL annual transportation budget: approx 200,000 Main sources of operating funding: General Fund Main sources of capital funding: General Fund and vehicle replacement program
Transp. services costs	Admin. costs : Capital costs: Operating costs:
ADA Paratransit	ADA PT revenue miles: ADA PT revenue hours ADA PT Trips: Operation costs:

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

City of Fremont Paratransit

Phone: 510-574-2033

**3300 Capitol Avenue
Fremont, CA 94538**

Contact: Shawn Fong, Paratransit Program
E-mail: sfong@ci.fremont.ca.us

FAX: 510-574-2054
TDD:

Type of agency	Public agency
Description of services	Door-to-door shared ride paratransit services for Fremont residents 80 and older or residents who are unable to use public transit because of disability or disabling health condition. Trips provided within Fremont, Newark and Union City from 8am - 6pm, Monday - Friday and 9am - 5pm on weekends. Group transportation services (shopping and social/recreational trips) are available for housing complexes, social clubs, and other community organizations that serve disabled individuals or seniors. Additionally, individual seniors who are frail or isolated due to language barriers (Mandarin, Farsi, Spanish) can participate in group outings that are facilitated by city outreach workers. Group transportation provided to destinations within 30 miles of the Fremont Senior Center and to groups of 6 or more individuals.
How are transportation services provided?	Pays MV Transportation to provide transportation services. This agency provides transportation for other agencies: Afghan Elderly Association, Friends of Children with Special Needs, Hindu Temple Provides taxi scrip/van vouchers to clientele. Provides transportation services to clients using volunteers with privately owned vehicles. Fund non-profit to provide volunteer escorts/drivers, fund meal delivery program
Who is served?	Serve Fremont residents; trips provided in Fremont, Newark and Union City. Occasional medical trips outside the service area are provided for individuals who have no other transportation resources available (dependent on vehicle availability). Number of one-way trips per month (roundtrip =2): 1400: door-to door service rides, 1100: group Average clients per month: 135 (not counting group trip riders)
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible. Clients are disabled. Must have a verified medical reason. Must live within a certain geographic area. Must meet age requirement.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types). Trips to dialysis clinics; Adult day health care; Health/medical appointments; Work; Education or training; Social/recreational/personal trips; To meals or nutritional counseling;
Equipment	Total vehicles owned/operated: 10 Number of buses: Number of autos: 2 Number of vans: 8 Number of lift- or ramp-equipped vehicles: all 8 van
Transp services employees	Management, full time paid: 2 (not including contractor's staff) Management, part-time paid: 4 (not including contractor's staff) Volunteers:
Transp. services funding	TOTAL annual transportation budget: \$967,000 (FY05-06) Main sources of operating funding: Alameda County Measure B funds; approx. \$700K Main sources of capital funding: Measure B Funds and FTA 5310 funds

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Transp. services costs	Admin. costs :	\$67,000 (FY05-06)	
	Capital costs:	0	
	Operating costs:	\$698,000	(FY05-06)
ADA Paratransit	ADA PT revenue miles:		ADA PT revenue hours
	ADA PT Trips:		Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Meeting the needs of limited English speaking paratransit riders - Adequate same day wheelchair accessible service - Cross jurisdictional travel is difficult for paratransit riders - Meeting travel demand (dialysis, adult day care, etc.) while person is awaiting ADA certification - Meeting needs of individuals who need to travel with an attendant but do not have a relative/friend/paid caregiver to assist

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

Yes, but the demand is great so I don't really see it as a duplicative effort. Not sure how to coordinate services as we are looking at ADA and non-ADA programs. Fremont is piloting an effort to providing group transportation for Union City Afghan (Farsi-speaking) residents who attend a weekly program in Fremont.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

City of Hayward - Paratransit Program

Phone: 510-583-4230

**777 B Street
 Hayward, CA 94541-5007**

**Contact: Victoria Williams, Paratransit
 E-mail: victoria.williams@hayward-ca.gov**

**FAX: 510-583-3650
 TDD: 510-247-3340**

Type of agency	Public agency
Description of services	The City of Hayward provides a separate paratransit service paid for by Alameda County Measure B funds, which is designed to serve as a back-up, or safety net, transportation service for those situations when EBP is unable to serve. Hayward also provides funding for Alzheimers Services of the East Bay (ASEB) to transport Central Alameda County clients to a day program using drivers who are specially trained members of ASEB staff. Hayward provides funding for transporting home-delivered meals to isolated and homebound seniors.
How are transportation services provided?	Pays MV Transportation, Inc. to provide transportation services.
Who is served?	Most Alameda County cities. Some medical trips are provided to out of county locations (Palo Alto, Livermore). Number of one-way trips per month (roundtrip =2): About 1,000 Average clients per month: Not available.
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients are disabled. Must live within a certain geographic area. Must meet age requirement.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types). priority given to medical trips
Equipment	Total vehicles owned/operated: Contract for the u Number of buses: Number of autos: Number of vans: Number of lift- or ramp-equipped vehicles:
Transp services employees	Management, full time paid: 1 Management, part-time paid: 1 Volunteers:
Transp. services funding	TOTAL annual transportation budget: FY 2005 - 2006 = \$811,276 Main sources of operating funding: The majority of the funding for the City of Hayward Paratransit Program is through Alameda County Measure B sales tax. Fares paid by the passengers also go toward operating transportation services. Main sources of capital funding: Not applicable.
Transp. services costs	Admin. costs : FY 2005-2006 = \$169,781 Capital costs: 0 Operating costs: \$712,411 FY 2005-2006

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

ADA Paratransit

ADA PT revenue miles: NA
ADA PT Trips:

ADA PT revenue hours
Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Out of county medical trips, Skilled Nursing Facility Group Trips and shuttles for shopping. Possibly future [Measure B] Gap funding ideas.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No. The City of Hayward coordinates with East Bay Paratransit (EBP) serving as a back-up, or safety net, transportation service for situations that East Bay Paratransit cannot serve. That includes serving riders who live or travel outside of the EBP service area and serving riders while they are waiting for the EBP certification process to be complete.

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

City of Oakland

Phone: 510-238-3036

**150 Frank H. Ogawa Plaza #435
Oakland, CA 94612-2092**

**Contact: Jeffrey Weiss, Senior Services
E-mail: jweiss@oaklandnet.com**

**FAX: 510-238-7724
TDD: 510-238-3254**

Type of agency	Public agency
Description of services	City of Oakland Paratransit supplements the mandated ADA paratransit. City of Oakland contracts with taxi, wheelchair vans and shuttles to offer a door-to-door subsidized transportation service to eligible program participants who cannot access public transportation to their medical appointments, shopping trips and daily excursions.
How are transportation services provided?	Pays Bay Area Community Services to provide transportation services. Provides taxi scrip/van vouchers to clientele.
Who is served?	City(ies) of Oakland and Piedmont Number of one-way trips per month (roundtrip =2): 4500 Average clients per month: 500
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients are disabled. Must have a verified medical reason. Must live within a certain geographic area. Must meet age requirement.
Eligibility activities	Transportation services are provided for the following purposes: Trips to dialysis clinics; Adult day health care; Health/medical appointments; Social/recreational/personal trips; To meals or nutritional counseling;
Equipment	Total vehicles owned/operated: 246 Number of buses: 3 Number of autos: 223 Number of vans: 20 Number of lift- or ramp-equipped vehicles: 23
Transp services employees	Management, full time paid: 2 Management, part-time paid: 4 Volunteers: 0
Transp. services funding	TOTAL annual transportation budget: \$1,000,000 Main sources of operating funding: Alameda County Transportation Improvement Authority (ACTIA) Measure B sales tax \$940,000 City of Oakland \$180,000 Client fares \$120,000 Main sources of capital funding: No capital funding
Transp. services costs	Admin. costs : Capital costs: Operating costs:
ADA Paratransit	ADA PT revenue miles: ADA PT revenue hours ADA PT Trips: Operation costs:

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

There are several gaps that are not met adequately: Geographical areas, unlimited same day transportation, stair assistance, evening/weekend service. Coordination is visible but there are not enough funds available to fill the needs.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

I believe there is duplication at all levels of transportation. Quality is not always equal from one service to the next or even day to day. I am not sure of the opportunities for coordination nor how coordination could solve all the concerns.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

City of Pleasanton Paratransit Services

Phone: 925-931-5367

**5353 Sunol Blvd.
 Pleasanton, CA 94566**

Contact: Pam Deaton, Recreation

FAX: 925-485-3685

E-mail: pdeaton@ci.pleasanton.ca.us

TDD: 925-417-1343

Type of agency	Public agency
Description of services	The City of Pleasanton Paratransit Service (PPS) provides door-to-door, shared-ride paratransit service for eligible Pleasanton and Sunol residents. The goal of PPS is to provide timely, safe, personalized, and convenient transportation.
How are transportation services provided?	Provides services directly to clients
Who is served?	PPS transports clients to Pleasanton, Sunol, Livermore, Dublin, and San Ramon. This includes primarily Alameda County locations with limited stops in Contra Costa County for doctor appointments. Number of one-way trips per month (roundtrip =2): 1,667 trips per month Average clients per month: 300
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible. Must live within a certain geographic area. Must meet age requirement.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types). Trips to dialysis clinics; Adult day health care; Health/medical appointments; Work; Education or training; Social/recreational/personal trips; To meals or nutritional counseling; connect to transit
Equipment	Total vehicles owned/operated: 7 Number of buses: 6 Number of autos: 0 Number of vans: 1 Number of lift- or ramp-equipped vehicles: 7
Transp services employees	Management, full time paid: 1.1 FTE managing-does not include drivers, dispatch, office staff, in-kind services such as City Attorney, Finance Officer) Management, part-time paid: 0 Volunteers: 0
Transp. services funding	TOTAL annual transportation budget: 506,966 Main sources of operating funding: For FY 2005-06 Fare Box----- \$40,400 MTC grant-----\$54,455 Measure B Tax-----\$84,700 City General Revenues---\$327,411 Main sources of capital funding: All capital funding comes from the City of Pleasanton's General Fund.
Transp. services costs	Admin. costs : \$157,353 Capital costs: Included in operating costs Operating costs: \$349,613

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

ADA Paratransit

ADA PT revenue miles: \$81,077
ADA PT Trips: 20,497

ADA PT revenue hours 6,986
Operation costs: \$506,966

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

One area of need is for cross-county/jurisdiction rides to medical services. Kaiser acute care services are located either in Walnut Creek, Hayward or Fremont and require multiple transfers on paratransit services of ill patients. It does not work well now.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

I do not see any duplication of services. When PPS is closed LAVTA's Wheels Services provides the ADA service for those PPS clients. Both agencies coordinate services to provide efficient service to riders.

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

City of Union City

Phone: 510-675-5409

**34009 Alvarado-Niles Road
Union City, CA 94587**

**Contact: Wilson Lee, Transit Manager
E-mail: wlee@ci.union-city.ca.us**

**FAX: 510-675-9885
TDD:**

Type of agency	Public agency
Description of services	Public Fixed-Route Bus Transit service within City limits of Union City. ADA Paratransit service for registered riders.
How are transportation services provided?	Pays MV Transportation to provide transportation services.
Who is served?	City of Union City for Fixed-Route Bus. City of Union City and parts of Hayward, Fremont and Newark for Paratransit. Number of one-way trips per month (roundtrip =2): 1300 paratransit, 36000 on fixed-route Average clients per month: average 30 unduplicated per DAY on paratransit. unknown on fixed-route
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types).
Equipment	Total vehicles owned/operated: 20 Number of buses: 15 Number of autos: 1 Number of vans: 4 Number of lift- or ramp-equipped vehicles: 19
Transp services employees	Management, full time paid: 3 Management, part-time paid: Volunteers:
Transp. services funding	TOTAL annual transportation budget: \$3,800,000 in FY0506 Main sources of operating funding: Passenger Fares TDA and STA operating Measure B Main sources of capital funding: FTA funds TDA capital TFCA (Air district) Amounts vary by year
Transp. services costs	Admin. costs : \$560,000 Capital costs: \$660,000 Operating costs: \$2,580,000
ADA Paratransit	ADA PT revenue miles: \$83,470 ADA PT revenue hours 8,687 ADA PT Trips: 19,848 Operation costs: \$589,184

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Same Day Trip requests are not guaranteed.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

Our Paratransit Plus service duplicates East Bay Paratransit ADA service for destinations outside of Union City. However, Union City riders prefer the quality of Union City service over East Bay.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

ADA Paratransit

ADA PT revenue miles: \$5,653,338
ADA PT Trips: 656,059

ADA PT revenue hours 368,100
Operation costs: \$25,000,000

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

- 1) same day service
- 2) an organized complimentary attendant service for riders needing to travel with an attendant who cannot be provided by the family.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

LIFE ElderCare, Inc.

Phone: 510-574-2096

**3300-B Capitol Ave
 Fremont, CA 94538**

**Contact: Lori Vogel, VIP Rides Program
 E-mail: lvogel@ci.fremont.ca.us**

**FAX: 510-574-2089
 TDD:**

Type of agency Private non-profit

Description of services VIP Rides provides volunteers that assist frail seniors and disabled adults with transportation and door through door service for doctor appointments, grocery shopping, and necessary errands.

How are transportation services provided?

Who is served?

Number of one-way trips per month (roundtrip =2):
 Average clients per month:

Eligibility for transportation services

Transportation is provided to people meeting some or all of the following requirements:

Eligibility activities

Transportation services are provided for the following purposes:

Equipment

Total vehicles owned/operated:

Number of buses:

Number of autos:

Number of vans:

Number of lift- or ramp-equipped vehicles:

Transp services employees

Management, full time paid:

Management, part-time paid:

Volunteers:

Transp. services funding

TOTAL annual transportation budget:

Main sources of operating funding:

Main sources of capital funding:

Transp. services costs

Admin. costs :

Capital costs:

Operating costs:

ADA Paratransit

ADA PT revenue miles:

ADA PT revenue hours

ADA PT Trips:

Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Livermore Amador Valley Transit Authority

Phone: 925-455-7555

**1362 Rutan Court #100
 Livermore, CA 94551**

**Contact: Cyrus Sheik, Transit Planner
 E-mail: csheik@lavta.org**

**FAX:
 TDD:**

Type of agency	Public agency
Description of services	Fixed route public transit for general public (urban bus) and ADA compliant paratransit service for eligible individuals.
How are transportation services provided?	Pays MV Transportation to provide transportation services.
Who is served?	Livermore, Pleasanton, and Dublin. Number of one-way trips per month (roundtrip =2): 4,920 Average clients per month: 1,000
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types).
Equipment	Total vehicles owned/operated: 92 Number of buses: 74 Number of autos: 0 Number of vans: 18 Number of lift- or ramp-equipped vehicles: 92
Transp services employees	Management, full time paid: 170 Management, part-time paid: 0 Volunteers: 0
Transp. services funding	TOTAL annual transportation budget: \$13,000,000 Main sources of operating funding: Fares - \$1.7M Advertising - \$0.3M Sales Tax - \$7.9M Highway Tolls - \$0.2M FTA Funds - \$1.0M Main sources of capital funding: Sales Tax - \$0.3M Highway Tolls - \$0.2M FTA Funds - \$1.5M
Transp. services costs	Admin. costs : \$1,300,000 Capital costs: \$1,500,000 Operating costs: \$10,300,000
ADA Paratransit	ADA PT revenue miles: \$369,899 ADA PT revenue hours 28,757 ADA PT Trips: 66,198 Operation costs: \$1,102,737

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Service offered within our area works pretty well, but are costly. Interagency transfers can be hard to coordinate and impose substantial 'seams' in clients' trips. Closely monitored taxi voucher programs probably offer the best opportunity to provide on-demand mobility where gaps in service exist. We are about to implement a pilot program for both taxi scrips and taxi vouchers for parts of our ADA eligible pool of clients.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

There may be some duplication due to the fact that one of our member municipalities (Pleasanton) operates its own paratransit service, whose criteria and hours of operation differ from ours. But other than that, there really isn't any duplication. These are expensive trips to provide, so nobody is going to duplicate us unless they absolutely have to.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Spanish Speaking Unity Council ('Unity Council')		Phone: 510-535-6900
1900 Fruitvale Ave, 2B	Contact: Marsha Murrington, VP Programs	FAX: 510-534-7771
Oakland, CA 94601	E-mail: mgm@unitycouncil.org	TDD:

Type of agency	Private non-profit		
Description of services	The Unity Council will be receiving a 5310 Van for transporting seniors from independent living facilities to a senior center and also to medical appointments.		
How are transportation services provided?	Provides services directly to clients		
Who is served?	Oakland Number of one-way trips per month (roundtrip =2): Average clients per month:		
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible. Clients are disabled. Clients must be on Medicaid. Must have a verified medical reason. Must live within a certain geographic area. Must meet age requirement.		
Eligibility activities	Transportation services are provided for the following purposes: Health/medical appointments; Education or training; Social/recreational/personal trips; To meals or nutritional counseling;		
Equipment	Total vehicles owned/operated: 1		
	Number of buses:		Number of autos:
	Number of vans:		Number of lift- or ramp-equipped vehicles: 1
Transp services employees	Management, full time paid: 1		
	Management, part-time paid:		
	Volunteers:		
Transp. services funding	TOTAL annual transportation budget: Main sources of operating funding: We have not started our service yet but will fund it through our senior center and facility funds Main sources of capital funding:		
Transp. services costs	Admin. costs :		
	Capital costs:		
	Operating costs:		
ADA Paratransit	ADA PT revenue miles:		ADA PT revenue hours
	ADA PT Trips:		Operation costs:

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

It is very costly for low-income seniors to access transportation that is affordable.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

NO -- we actually need more services.

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

Central Contra Costa County Transit Authority

2477 Arnold Industrial Way
Concord, CA 94520

Contact: Cindy Dahlgren, Director of
E-mail: cdahlgren@cccta.org

Phone: 925-676-1976 x
205
FAX: 925-686-2630
TDD:

Type of agency	Public agency
Description of services	Fixed route in 10 cities in the county (31 routes) and complementary ADA paratransit for Central Contra Costa County.
How are transportation services provided?	Pays Contract with Laidlaw for ADA service to provide transportation services.
Who is served?	Clayton, Concord, Danville, Martinez, Moraga, Orinda, Lafayette, Pleasant Hill, San Ramon, Walnut Creek; Contra Costa County Number of one-way trips per month (roundtrip =2): 12,000-14,000 Average clients per month: 1200+ for ADA service
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types).
Equipment	Total vehicles owned/operated: 187 Number of buses: 131 Number of autos: Number of vans: 56 Number of lift- or ramp-equipped vehicles: 100%
Transp services employees	Management, full time paid: 293 FTEs Management, part-time paid: Volunteers:
Transp. services funding	TOTAL annual transportation budget: FY 06 paratransit budget is \$4,098,0 Main sources of operating funding: For paratransit anticipated revenue in FY 07 includes: federal 5307 (\$656,875), TDA article 4.0/4.5 (\$744,516 from TDA 4.5), Measure C tax revenue (\$995,988), STA (\$412,793), Proposition 42 (\$218,445). Main sources of capital funding: For overall agency capital program in FY 07 (fixed-route), FTA 5307/STP/CMAQ (\$852,000), bridge tolls (\$126,000), also TDA 4.0.
Transp. services costs	Admin. costs : \$271,264 Capital costs: Operating costs: \$4,079,277 (purchased transportation)
ADA Paratransit	ADA PT revenue miles: \$1,343,067 ADA PT revenue hours 81,122 ADA PT Trips: 165,077 Operation costs: \$4,309,515

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

We donate our used vans to CBOs who provide E&H services. Other public transit operators should do the same. We are member of PCC, Contra Costa for Every Generation, CalACT. We support more money for ALL public transportation for ALL. We support Medi-Cal funding for non-emergency medical transportation and public operators being part of the fee for service provision of this transportation.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

We don't see a lot of duplication in our service area. But then again we don't know exactly who is doing what out there and how much money is being spent by the County (for example) on human services transportation for their clients.

MTC Coordinated Public Transit - Human Service Transportation Plan
Transportation Services Inventory

City of Antioch Senior Bus

415 West Second Street
Antioch, CA 94509

Contact: Brenda Perry, Recreation
E-mail: bperry@ci.antioch.ca.us

Phone: 925-778-1158

FAX: 925-779-2822

TDD:

Type of agency	Public agency
Description of services	We provide city wide paratransit service for seniors. A majority of rides are to and from the Antioch Senior Center. Additional support trips for medical appointments, shopping and personal services.
How are transportation services provided?	Provides services directly to clients
Who is served?	City of Antioch Number of one-way trips per month (roundtrip =2): 180 Average clients per month: 180
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible. Clients are disabled. Must live within a certain geographic area. Must meet age requirement.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types).
Equipment	Total vehicles owned/operated: 3 Number of buses: 3 Number of vans: Number of autos: Number of lift- or ramp-equipped vehicles: 3
Transp services employees	Management, full time paid: 3 Management, part-time paid: Volunteers: 10
Transp. services funding	TOTAL annual transportation budget: \$206,000 Main sources of operating funding: 95% Tri Delta 5% Fair Box Main sources of capital funding: 100% Tri Delta
Transp. services costs	Admin. costs : \$49,913 Capital costs: 0 Operating costs: \$154,017
ADA Paratransit	ADA PT revenue miles: \$40,228 ADA PT Trips: 25,342 ADA PT revenue hours 4,088 Operation costs: \$9

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

TriDelta Transit and the City of Antioch have been proactive in meeting community needs and coordinating services. This has allowed the Antioch Senior Center to benefit with batch pickups timed to meet activity times and nutrition programs. Not only has it benefited the Senior Program it has allowed the senior center to be an outlet and advocate for transitional seniors to utilize para transit services.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

Tri-Deltas administration has been creative and proactive in exploring coordinated services City wide. Investigation into joint services has led to the present arrangements. The results is shared trainings and an expanded outreach for both para transit as well as fixed route services.

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

City of Lafayette

Phone: 925-284-5546

**500 Saint Mary's Road
Lafayette, CA 94521**

**Contact: Mary Bruns, Program Coordinator
E-mail: MBruns@lovelafayette.org**

**FAX: 925-284-1549
TDD:**

Type of agency Public agency

Description of services We have one van to provide transportation to seniors and persons with disabilities who live in Lafayette, Orinda, and Moraga, CA. We take seniors to lunch at the C.C. Cafe and to errands in their city. We have one paid driver who works 20 hours a week. We are developing a team of volunteer drivers and currently have two.

How are transportation services provided?

Who is served?

Number of one-way trips per month (roundtrip =2):
Average clients per month:

Eligibility for transportation services

Transportation is provided to people meeting some or all of the following requirements:

Eligibility activities

Transportation services are provided for the following purposes:

Equipment

Total vehicles owned/operated:

Number of buses:

Number of autos:

Number of vans:

Number of lift- or ramp-equipped vehicles:

Transp services employees

Management, full time paid:

Management, part-time paid:

Volunteers:

Transp. services funding

TOTAL annual transportation budget:

Main sources of operating funding:

Main sources of capital funding:

Transp. services costs

Admin. costs :

Capital costs:

Operating costs:

ADA Paratransit

ADA PT revenue miles:

ADA PT Trips:

ADA PT revenue hours

Operation costs:

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

City of San Ramon

Phone: 925-973-3271

9300 Alcosta Blvd.
San Ramon, CA 94583

Contact: Teri Mountford, Program Manager
E-mail: tmountford@sanramon.ca.us

FAX: 925-829-6128
TDD:

Type of agency Public agency

Description of services The San Ramon Senior Center provides van service to seniors ages 55 and over to and from the Senior Center. We pick up seniors from their homes and take them home. We provide a once a week shopping shuttle and also have several trips every month.

How are transportation services provided?

Who is served?

Number of one-way trips per month (roundtrip =2):
Average clients per month:

Eligibility for transportation services

Transportation is provided to people meeting some or all of the following requirements:

Eligibility activities

Transportation services are provided for the following purposes:

Equipment

Total vehicles owned/operated:

Number of buses:

Number of autos:

Number of vans:

Number of lift- or ramp-equipped vehicles:

Transp services employees

Management, full time paid:
Management, part-time paid:
Volunteers:

Transp. services funding

TOTAL annual transportation budget:
Main sources of operating funding:

Main sources of capital funding:

Transp. services costs

Admin. costs :
Capital costs:
Operating costs:

ADA Paratransit

ADA PT revenue miles:
ADA PT Trips:

ADA PT revenue hours
Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Contra Costa ARC

4615 Clayton Road
Concord, CA 94520

Contact: Carol McCrary, Division Director
E-mail: carolmcap@aol.com

Phone: 925-685-9742

FAX: 925-685-4652

TDD:

Type of agency	Private non-profit
Description of services	Door-to-door services (3 routes) to adults with severe developmental disabilities from home to day program and visa versa. Also provide transportation for adults with severe developmental disabilities to various activities in the community as part of their day program services. Monday-Friday only
How are transportation services provided?	Provides services directly to clients Provides transit tickets or passes to clients.
Who is served?	Contra Costa County (primarily) Alameda County (Hayward only at this time) Number of one-way trips per month (roundtrip =2): 6000+ Average clients per month: 300
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients are disabled. Must meet age requirement. Must be Regional Center clients
Eligibility activities	Transportation services are provided for the following purposes: Work; Education or training; Social/recreational/personal trips;
Equipment	Total vehicles owned/operated: 30 Number of buses: 10 Number of autos: 0 Number of vans: 20 Number of lift- or ramp-equipped vehicles: 15
Transp services employees	Management, full time paid: 0 Management, part-time paid: 0 Volunteers: 0
Transp. services funding	TOTAL annual transportation budget: \$400,000 Main sources of operating funding: Funds are from the Regional Center of the East Bay. Main sources of capital funding: 5210 grants Leases from operating budget (Regional Center)
Transp. services costs	Admin. costs : \$35,000 Capital costs: \$96,000 Operating costs: \$269,000
ADA Paratransit	ADA PT revenue miles: ADA PT revenue hours ADA PT Trips: Operation costs:

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Often receive complaints from our clientele about the lack of evening and weekend transportation for their recreational pursuits.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No duplication. At times I have loaned our vehicles to Mt. Diablo Adult Ed for evening or weekend use.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Contra Costa County Employment & Human Services Dept.

Phone: 925-313-1702

**40 Douglas Dr.
 Martinez, CA 94553**

**Contact: Paul Branson, Transportation
 E-mail: pbranson@ehsd.cccounty.us**

**FAX: 925-313-1758
 TDD:**

Type of agency	Public agency
Description of services	As a social service agency for Contra Costa County, we provide a variety of transportation services, including transit tickets & passes as well as taxi rides. Our most significant services are those we have developed for our CalWORKs population. These include a contracted bus service to transport the children of our clients to school and daycare, and a taxi-based, demand response service to transport our clients to employment-related destinations. For this taxi-based service we have hired our own in-house dispatcher to receive our client's ride requests and match them with the most appropriate taxi contractor. This also helps us to control costs and track client's rides, and we are viewing this as the beginnings of a transportation brokerage system that could serve other population groups and provide other types of transportation services.
How are transportation services provided?	Pays MV Transportation and multiple taxi companies to provide transportation services. Provides transit tickets or passes to clients. Provides taxi scrip/van vouchers to clientele. Provide mileage reimbursement
Who is served?	Contra Costa County Number of one-way trips per month (roundtrip =2): 1600 Average clients per month: 1000
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Some rides are provided to foster youth and to seniors served by various programs.
Eligibility activities	Transportation services are provided for the following purposes: Health/medical appointments; Work; Education or training; child trips to school/daycare
Equipment	Total vehicles owned/operated: 6 plus contracted Number of buses: 6 contracted bus Number of autos: unkn Number of vans: Number of lift- or ramp-equipped vehicles: 6
Transp services employees	Management, full time paid: 3 consultants & 1 agency temp Management, part-time paid: Volunteers:
Transp. services funding	TOTAL annual transportation budget: \$1,100,000 estimated Main sources of operating funding: CalWORKs: \$1,000,000 Main sources of capital funding: None
Transp. services costs	Admin. costs : \$150,000 Capital costs: 0

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Operating costs: \$800,000

Contract Costs:

ADA Paratransit

ADA PT revenue miles:

ADA PT revenue hours

ADA PT Trips:

Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

The primary unmet need is rides for frail, homebound seniors who are unable to use ADA paratransit due to frailty & often cost. The primary opportunity that could be developed given today's sophisticated scheduling and back-office accounting software is a transportation brokerage system that could link various services to provide rides to a wider population range including frail home-bound seniors, and other transit dependent populations.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

There may be some duplication of services but it is not significant. However, there are many opportunities to increase cost-effectiveness (and thus increase service) that could be achieved through coordinating administrative activities and components such as maintenance, driver training, purchasing, etc.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Eastern Contra Costa Transit Authority

Phone: 925-754-6622

**801 Wilbur Ave.
 Antioch, CA 94509**

**Contact: Steve Ponte, Chief Operating
 E-mail: sponte@eccta.org**

**FAX: 925-757-2530
 TDD: 925-754-3695**

Type of agency	Public agency
Description of services	Fixed Route Paratransit (ADA and Non-ADA), Medical
How are transportation services provided?	Pays Laidlaw Transit Services to provide transportation services. Fund the Antioch Senior Bus program
Who is served?	Antioch, Brentwood, Oakley, Pittsburg, and unincorporated areas of eastern Contra Costa County Number of one-way trips per month (roundtrip =2): 8700 Average clients per month: 615
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible. Clients are disabled. Must meet age requirement. Medical
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types). Trips to dialysis clinics; Adult day health care; Health/medical appointments; Work; Education or training; Social/recreational/personal trips; To meals or nutritional counseling;
Equipment	Total vehicles owned/operated: 93 Number of buses: 69 Number of autos: 0 Number of vans: 24 Number of lift- or ramp-equipped vehicles: 93
Transp services employees	Management, full time paid: 160 Management, part-time paid: 2 Volunteers: 0
Transp. services funding	TOTAL annual transportation budget: \$16 million Main sources of operating funding: TDA 9.5 mil STA 2.9 mil Measure C 800k other 2mil Main sources of capital funding: TDA 644k FTA 5307 3.4 mil Measure C 108k
Transp. services costs	Admin. costs : \$1.9 mil Capital costs: 4.2 mil Operating costs: \$13,800,000
ADA Paratransit	ADA PT revenue miles: \$516,259 ADA PT revenue hours 43,927 ADA PT Trips: 102,678 Operation costs: \$2,333,249

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

very low income, shut in's, passenger with special needs for transportation, areas of very low population

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

Do not see any duplication of services

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Golden Rain Foundation/Rossmoor

Phone: 925-988-7670

**800 Rockview Drive
 Walnut Creek, CA 94595**

**Contact: Gretchen Hansen, Transportation
 E-mail: ghansen@rossmoor.com**

**FAX: 925-945-6304
 TDD:**

Type of agency Private non-profit

Description of services Some sort of service every day of the year. On our Paratransit (PT)/Dial A Bus (DAB) service, we vary the number of buses on the road, depending on need. This is for holidays as well. Our buses go to the downtown Walnut Creek service area, including BART when the public system is not in operation. Public transportation service to our area ends at about 6:30 pm on weekdays and we have no service on Sunday and most holidays. We provide travel training for our service as well as the public transportation service. Both have been well received by the community. Weekdays DAB 6 - 8:30 am 5:30 - 10 pm PT. Fixed routes approx. 9am - 5:30 pm, 6 am - 10 pm Saturday DAB & PT, 8 am - 9:30 pm. Sunday, DAB & PT, 9 am - 9:30 pm.

How are transportation services provided? Provides services directly to clients

Who is served? Walnut Creek, Contra Costa County
 Number of one-way trips per month (roundtrip =2): 2600 monthly (average)
 Average clients per month: unknown - we transport about 650 rides daily

Eligibility for transportation services Transportation is provided to people meeting some or all of the following requirements:
 Clients must be ADA-eligible. Clients are disabled. Must have a verified medical reason. Must live within a certain geographic area. Temporary paratransit service or family member of resident

Eligibility activities Transportation services are provided for the following purposes:
 All trips (no restrictions on destination types). some special trips for recreation such as Berkeley Rep. theater

Equipment Total vehicles owned/operated: 10
 Number of buses: Number of autos:
 Number of vans: Number of lift- or ramp-equipped vehicles: 10

Transp services employees Management, full time paid: 13
 Management, part-time paid: 1
 Volunteers: 0

Transp. services funding TOTAL annual transportation budget: \$988,055
 Main sources of operating funding:
 Transportation is primarily funded by the Home Owners Assn. HOA We've received 7 buses from 5310 Grants and are hoping to qualify for the replacement of 3 in this coming cycle.
 Main sources of capital funding:
 Home Owners Assn. fee

Transp. services costs Admin. costs : 0
 Capital costs: 0
 Operating costs: \$988,000

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

ADA Paratransit

ADA PT revenue miles:
ADA PT Trips:

ADA PT revenue hours
Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

My community is all seniors. In our area, our public transportation is provided by CCCTA. They do a great job, but we have very limited hours and days of service. All of the providers under MTC should have the same days, hours of operation. This would be a more 'seamless' service.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

Our service frees up the public services available in this area - or should.

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

Guardian Adult Day Health Center

Phone: 510-669-1007

**3905 San Pablo Dam Road
El Sobrante, CA 94803**

**Contact: Peter Behr, Administrator
E-mail: pbehr@guardianadhc.org**

**FAX: 510-669-1008
TDD:**

Type of agency Private non-profit

Description of services We run six van routes daily with our own vans to transport passengers from their homes to the Center in the morning, and back to their homes in the afternoon. We also use three paratransit agencies to transport ADHC participants who cannot get on a 15-passenger van, with an installed step, to the Center from their homes in the morning and back again in the afternoon.

How are transportation services provided? Provides services directly to clients
Pays East Bay Paratransit, Richmond Paratransit, and WestCat to provide transportation services.

Who is served? All of West Contra Costa County -- Incorporated cities include Richmond, San Pablo, El Cerrito, Pinole, and Hercules. Unincorporated areas include El Sobrante and several other areas
Number of one-way trips per month (roundtrip =2): 2730
Average clients per month: 110

Eligibility for transportation services Transportation is provided to people meeting some or all of the following requirements:
ADHC Participants

Eligibility activities Transportation services are provided for the following purposes:
Adult day health care;

Equipment Total vehicles owned/operated: 8
Number of buses: Number of autos:
Number of vans: 8 Number of lift- or ramp-equipped vehicles:

Transp services employees Management, full time paid:
Management, part-time paid: 2
Volunteers:

Transp. services funding TOTAL annual transportation budget: \$128,432 (for most recent fiscal year)
Main sources of operating funding:
1. ADHC Payments for services provided by Medi-Cal and the Veterans Administration. 2. Some ADC payments, mainly provided through a Contra Costa County respite grant
Main sources of capital funding:
Internal funds

Transp. services costs Admin. costs : \$1,200
Capital costs:
Operating costs: \$127,232

ADA Paratransit ADA PT revenue miles: ADA PT revenue hours
ADA PT Trips: Operation costs:

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

1. East Bay Paratransit takes an excessive amount of time (21 days) to approve new participants. They also do not serve all of West County.
2. Richmond Paratransit will not make as many seats available as we need for our participants.
3. There is limited service available to get people to and from their medical appointments

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

We would be happy to make our vehicles and drivers available to other organizations that could use them (and pay the costs associated with them) during our 'down' period from 10:00 a.m. to 2:00 p.m. We have made this willingness known to the Senior Transportation Forum in Contra Costa County, but so far have been unable to work anything out.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Mt. Diablo ADHC

Phone: 925-682-6330

**490 Golf Club Rd
 Pleasant Hill, CA 94523**

**Contact: Debbie Toth, Executive Director
 E-mail: dtoth@rsnc-centers.org**

**FAX:
 TDD:**

Type of agency	Private non-profit
Description of services	We provide transportation for our clients to and from the center and their homes (we provide the transportation directly, but have only been doing so since July 2006 as part of a pilot project arranged by us, Paul Branson of Contra Costa Aging & Adult Services, and Cindy Dahlgren of CCCTA who donated four vehicles). We also provide a shopping shuttle for homebound seniors (from the City of Concord) during the day (this is funded by a City of Concord grant).
How are transportation services provided?	Provides services directly to clients A few clients live in Solano County -- we reimburse those clients for Benicia Breeze trips
Who is served?	ADHC clients come from mostly Central and South Contra Costa County. Some ADHC clients are from Solano County & we reimburse their Benicia Breeze trips) Shopping shuttle riders are from the City of Concord (note: these passengers do pay a fare of \$1 per trip) Number of one-way trips per month (roundtrip =2): 284 Average clients per month: 30
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Must meet age requirement. City of Concord resident (for shopping shuttle)
Eligibility activities	Transportation services are provided for the following purposes: Adult day health care; shopping (Concord shopping shuttle)
Equipment	Total vehicles owned/operated: 1 Number of buses: 1 cutaway Number of autos: Number of vans: Number of lift- or ramp-equipped vehicles: 1
Transp services employees	Management, full time paid: Management, part-time paid: 1 person at 10-15% of time & 1 person at 20% of time Volunteers:
Transp. services funding	TOTAL annual transportation budget: Main sources of operating funding: ADHC transportation: Medi-Cal (10% of daily costs are for transportation. Medi-Cal pays \$76 per day per client) Main sources of capital funding: N/A
Transp. services costs	Admin. costs : Capital costs: Operating costs:

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

ADA Paratransit

ADA PT revenue miles:
ADA PT Trips:

ADA PT revenue hours
Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Gaps in service for ADHC participants: - Language - Service. The length of time they spend on the bus is inappropriate -- it's too long. They are frail elderly (often incontinent, have dementia, etc.) - Need door-through-door service, not curb-to-curb

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

There is not duplication. There is just a need for more transportation services. ABAG anticipates a 125% growth in the elderly population in East Contra Costa County. There is no forethought to prepare for this. Some forethought is finally starting now (e.g., work being done by the Area Agency on Aging)

MTC Coordinated Public Transit - Human Service Transportation Plan
Transportation Services Inventory

Richmond Paratransit

Phone: 510-307-8030

**2566 Macdonald Avenue
Richmond, CA 94804**

**Contact: Tina Harrison, Paratransit
E-mail: tina_harrison@ci.richmond.ca.us**

**FAX: 510-307-8080
TDD:**

Type of agency	Public agency	
Description of services		
How are transportation services provided?	Provides services directly to clients	
Who is served?	Richmond, El Cerrito, El Sobrante, San Pablo, Kensington, North Richmond Number of one-way trips per month (roundtrip =2): 950 Average clients per month: 1000	
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients are disabled. Must meet age requirement.	
Eligibility activities	Transportation services are provided for the following purposes: Trips to dialysis clinics; Adult day health care; Health/medical appointments; Work; Education or training; Social/recreational/personal trips; To meals or nutritional counseling;	
Equipment	Total vehicles owned/operated: 12	
	Number of buses:	Number of autos: 1
	Number of vans:	Number of lift- or ramp-equipped vehicles: 11
Transp services employees	Management, full time paid: 14	
	Management, part-time paid:	
	Volunteers:	
Transp. services funding	TOTAL annual transportation budget: Main sources of operating funding: Measure C funds--40% General Fund--40% Various grants--20%	
	Main sources of capital funding: Section 5310--100%	
Transp. services costs	Admin. costs : Capital costs: Operating costs:	
ADA Paratransit	ADA PT revenue miles: ADA PT Trips:	ADA PT revenue hours Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Some veterans are very old, they have no family and are unable to get a ride. They call and I have to turn them away if they're not eligible. Also, several people I talk to (who use city or county dial-a-ride) need transportation to their medical appointments in the morning but the city bus schedule sometimes prevents it (because it starts too late.)

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

Some of the vets can use the city or county dial-a-ride, but we cannot provide rides for the general public.

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

Westcat

Phone: 510-724-3331

**601 Walter Avenue
Pinole, CA 94564**

**Contact: Robin Tawfall, Asst GM
E-mail: robin@westcat.org**

**FAX: 510-724-5551
TDD:**

Type of agency	Public agency
Description of services	Fixed route services and Paratransit including ADA, senior over 65 and general public in inaccessible areas and on Saturdays.
How are transportation services provided?	Pays MV Transit to provide transportation services.
Who is served?	Pinole, Hercules, Rodeo, Crockett, Port Costa, Tara Hills, Montalvin Manor, Martinez, San Francisco, Del Norte Bart station Number of one-way trips per month (roundtrip =2): 3,924 Average clients per month:
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible. Clients are disabled. Must have a verified medical reason. Must live within a certain geographic area. Must meet age requirement. General public, Saturday and in inaccessible parts of service area.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types). Trips to dialysis clinics; Adult day health care; Health/medical appointments; Work; Education or training; Social/recreational/personal trips; To meals or nutritional counseling;
Equipment	Total vehicles owned/operated: 59 Number of buses: 43 Number of autos: 3 Number of vans: 13 Number of lift- or ramp-equipped vehicles: 55
Transp services employees	Management, full time paid: 6 Management, part-time paid: 0 Volunteers: 0
Transp. services funding	TOTAL annual transportation budget: Main sources of operating funding: Main sources of capital funding:
Transp. services costs	Admin. costs : Capital costs: Operating costs:
ADA Paratransit	ADA PT revenue miles: ADA PT revenue hours ADA PT Trips: Operation costs:

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Golden Gate Bridge, Highway and Transportation District

Phone: 415-257-4415

1011 Andersen Dr.
San Rafael, CA 94901

Contact: Cynthia Petersen, Paratransit
E-mail: cpetersen@goldengate.org

FAX: 415-257-4516
TDD: 711

Type of agency	Public agency
Description of services	Directly operated and contracted bus services; directly operated ferry services; contracted paratransit services.
How are transportation services provided?	Provides services directly to clients Pays Coach USA; Marin County Transit District to provide transportation services. This agency provides transportation for other agencies: Marin County Transit District
Who is served?	Regional service serving portions of Marin, San Francisco, Sonoma and Contra Costa Counties... Number of one-way trips per month (roundtrip =2): 365,600 bus; 165,000 ferry; 1,130 paratransit Average clients per month: unknown
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible. Your previous question did not provide a choice of
Eligibility activities	Transportation services are provided for the following purposes: public transit and public paratransit services; no trip purpose restrictions
Equipment	Total vehicles owned/operated: Number of buses: 235 Number of autos: Number of vans: Number of lift- or ramp-equipped vehicles: 233
Transp services employees	Management, full time paid: Bus: 7; PT: 5 Management, part-time paid: Volunteers:
Transp. services funding	TOTAL annual transportation budget: Bus: \$77,000,000 Main sources of operating funding: Bus: Golden Gate Bridge Tolls: 65% Fares: 25% TDA, STA, Other: 15% Paratransit: District funds: 85% Fares: 8% STA: 7% Main sources of capital funding: FTA Section 5307 84% District funds (local match) 16%
Transp. services costs	Admin. costs : Bus: \$13,200,000; PT: \$247,000 Capital costs: 0 Operating costs: \$49,947,800 Bus: \$49,300,000; PT: \$647,800
ADA Paratransit	ADA PT revenue miles: \$249,545 ADA PT revenue hours 11,802 ADA PT Trips: 12,496 Operation costs: \$895,000

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Public transportation services are not available in all areas at all times of the day. ADA services only extend 3/4 mile beyond the bus route. ADA eligible individuals who live outside the ADA service area do not have dependable access to service. Seniors who can no longer drive but are not ADA eligible do not have a service alternative. ADA paratransit does not meet the needs of employed individuals with disabilities who need to maintain a dependable work schedule. Additional dollars need to be put into social service programs and general purpose paratransit service to meet the transportation needs of individuals beyond the ADA.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services
No.

MTC Coordinated Public Transit - Human Service Transportation Plan
Transportation Services Inventory

Marin County Transit District

Phone: 415-499-6100

**70 San Pablo Avenue
San Rafael, CA 94903**

**Contact: Amy Van Doren, Transit Planning
E-mail: avandoren@co.marin.ca.us**

**FAX: 415-507-2648
TDD:**

Type of agency	Public agency
Description of services	The Marin County Transit District (MCTD) was formed by a vote of the people of Marin County in 1964 and was given the responsibility for providing local transit service within Marin County. Although MCTD has responsibility for local services, it does not own any buses or facilities and does not employ its own drivers. Instead, MCTD contracts with other providers, including Golden Gate Transit and Whistlestop Wheels for local bus and paratransit services.
How are transportation services provided?	Pays Golden Gate Transit, Whistlestop Wheels, MV Transportation, and Marin Airporter to provide transportation services. Provides transit tickets or passes to clients.
Who is served?	Marin County Number of one-way trips per month (roundtrip =2): 297,995 Average clients per month: 9,900
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible. Must meet age requirement.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types).
Equipment	Total vehicles owned/operated: 33 Number of buses: 33 Number of vans: Number of autos: Number of lift- or ramp-equipped vehicles: 33
Transp services employees	Management, full time paid: 4 Management, part-time paid: Volunteers:
Transp. services funding	TOTAL annual transportation budget: \$16,320,346 Main sources of operating funding: For Fiscal Year 05-06 Passenger Fares: \$3,150,087 Transit Development Act (TDA): \$2,575,344 State Transit Assistance (STA): \$442,678 FTA Section 5311: \$172,720 Advertising Revenue: \$372,150 GGT Paratransit Payment: \$783,185 Property Tax: \$2,361,961 Main sources of capital funding: Annualized average according to a ten year capital funding plan in SRTP. Section 5307: \$300,121 Section 5310: \$381,242 Section 5311: \$65,564 Section 5308, 5316, 5317, 5320: \$29,941 STIP: \$300,000 STAF - Regional Paratransit: \$7,485 Measure A Sales Tax Revenue: \$1,315,881 Marin Community Foundation: \$95,311 Other Local (TBD): \$176,654
Transp. services costs	Admin. costs : \$850,707 Capital costs: \$592,839

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Operating costs: \$14,876,800

ADA Paratransit

ADA PT revenue miles: \$626,196

ADA PT revenue hours 39

ADA PT Trips: 86,465

Operation costs: \$2,742,057

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

There are many more needs for transportation for the elderly and disabled than there are resources. Our paratransit services are consistently oversubscribed and we cannot always provide service to all those who request it. An example of regular service to one location, such as a dialysis center, should have its own unique transportation for their users in order to free up space on paratransit for other, less regular kinds of trips.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

The Marin County Transit District is the provider of local transit in Marin County. There are other transportation services available but no other public transportation. There is a need for better coordination with human service transportation providers to reduce duplication with our paratransit service with the hope of improving our efficiency and ability to provide service to meet the demand.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Senior Access

Phone: 415-897-6884

**1905 Novato Blvd
 Novato, CA, CA 94947**

Contact: Jennifer Tripathy, Program

FAX: 415-897-1584

E-mail: jtripathy@senioraccess.org

TDD:

Type of agency Private non-profit

Description of services We contract out our transportation needs, which include providing round-trip van service from participants residences to our day program.

How are transportation services provided? Pays Whistlestops to provide transportation services.

Who is served? Majority of Marin county, excluding West Marin A couple of participants from Southern Sonoma county, namely Petaluma
 Number of one-way trips per month (roundtrip =2):
 Average clients per month: 35

Eligibility for transportation services Transportation is provided to people meeting some or all of the following requirements:
 Need for our program service

Eligibility activities Transportation services are provided for the following purposes:
 Adult day health care;

Equipment Total vehicles owned/operated:
 Number of buses: Number of autos:
 Number of vans: Number of lift- or ramp-equipped vehicles:

Transp services employees Management, full time paid: 1
 Management, part-time paid: 1
 Volunteers: 0

Transp. services funding TOTAL annual transportation budget: \$300,000
 Main sources of operating funding:
 Main source of funding is the participants fees we receive. also a small MCF grant of 5% of the transportation cost
 Main sources of capital funding:

Transp. services costs Admin. costs : \$5,000
 Capital costs: 0
 Operating costs: 0

ADA Paratransit ADA PT revenue miles: ADA PT revenue hours
 ADA PT Trips: Operation costs:

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

The service we use does not provide transportation to West Marin, therefore missing a block of population eligible for our services

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No this service is not duplicated

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Senior Access/Kentfield

Phone: 415-482-4107

**1111 Sir Francis Drake Blvd
 Kentfield, CA 94904**

Contact: Brian Stensler, Program

FAX: 415-453-2537

E-mail: bstensler@senioraccess.org

TDD: 415-482-4107

Type of agency Private non-profit
Description of services Contract with Whistlestop Wheels
How are transportation services provided?

Who is served?
 Number of one-way trips per month (roundtrip =2):
 Average clients per month:

Eligibility for transportation services Transportation is provided to people meeting some or all of the following requirements:

Eligibility activities Transportation services are provided for the following purposes:

Equipment Total vehicles owned/operated:
 Number of buses: Number of autos:
 Number of vans: Number of lift- or ramp-equipped vehicles:

Transp services employees Management, full time paid:
 Management, part-time paid:
 Volunteers:

Transp. services funding TOTAL annual transportation budget:
 Main sources of operating funding:

 Main sources of capital funding:

Transp. services costs Admin. costs :
 Capital costs:
 Operating costs:

ADA Paratransit ADA PT revenue miles: ADA PT revenue hours
 ADA PT Trips: Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

Whistlestop

Phone: 415456-9062

930 Tamalpais Ave.
San Rafael, CA 94901

Contact: Jackie Mulroy, Director of
E-mail: jackie.mulroy@thewhistlestop.org

FAX: 415-454-1493
TDD: 415-457-4630

Type of agency	Private non-profit
Description of services	Paratransit services for elderly and disabled persons of Marin County deemed eligible under criteria set forth by the Americans with Disabilities Act; transportation for a number of special programs including adult daycare, Ecumenical Association for Housing, medical-only and senior-friendly shuttle services in Novato.
How are transportation services provided?	Provides services directly to clients This agency provides transportation for other agencies: Senior Access Provides transit tickets or passes to clients. Subsidize taxi transportation for clients
Who is served?	Marin, Sonoma, San Francisco, Contra Costa Counties Number of one-way trips per month (roundtrip =2): 12,000 Average clients per month: 600
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible. Must live within a certain geographic area. Must meet age requirement.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types). Trips to dialysis clinics; Adult day health care; Health/medical appointments; Work; Education or training; Social/recreational/personal trips; To meals or nutritional counseling;
Equipment	Total vehicles owned/operated: 53 Number of buses: 50 Number of autos: 1 Number of vans: 2 Number of lift- or ramp-equipped vehicles: 52
Transp services employees	Management, full time paid: 60 Management, part-time paid: 10 Volunteers: 0
Transp. services funding	TOTAL annual transportation budget: \$4 million Main sources of operating funding: Marin County Transit District \$3.5 million Senior Access \$240,000 EZ Rider \$100,000 Health Express \$25,000 Hamilton Shuttle \$77,000 Shopping Shuttles \$17,000 Main sources of capital funding: Marin Community Foundation - varies Marin County Transit District Golden Gate Bridge, Highway and Transportation District
Transp. services costs	Admin. costs : \$2 million Capital costs: \$500,000 Operating costs: \$2,000,000

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

ADA Paratransit	ADA PT revenue miles: \$875,741	ADA PT revenue hours 51,261
	ADA PT Trips: 98,961	Operation costs: \$3,033,000

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

There are quite a few residential facilities for elderly and disabled residents that either rely completely on Whistlestop to provide all of their program trips on a daily basis because they either can't afford to operate or staff their own transportation or refuse to. Some agencies that do have their own services leave vehicles sitting idle for most of the day. Additionally, there is almost no services available to seniors who do not qualify for ADA paratransit services. Most agencies in the county refer seniors to Whistlestop to provide transportation to them because they no longer drive but it turns out that many of these seniors are not eligible for our services. This is very frustrating for both the seniors and us. There is currently no campaign aimed at seniors who are able to ride public transportation. Public transit in this county is not very senior friendly so, of course, seniors do not look at it for transportation. In addition, many disabled people use ADA paratransit for all of their transportation needs even though they could ride public transportation because they are under the impression that Golden Gate Transit does not meet their needs on a reliable basis.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

Novato has quite a bit of service such as Novato Human Needs, Health Express, EZ Rider but since we operate two of the service and coordinate with Novato Human Needs, we feel that these services are just meeting the needs of the seniors and disabled people in the area. Other areas need similar service--both ADA transportation and senior-friendly transportation for those not eligible for ADA paratransit.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Napa County Transportation Planning Agency

Phone: 707-259-8778

**707 Randolph St, Suite 100
 Napa, CA 94559**

**Contact: Deborah Brunner, Sr
 E-mail: dbrunner@nctpa.net**

**FAX: 707-299-4195
 TDD:**

Type of agency	Public agency
Description of services	Public transit provider in Napa County, consisting of the VINE local and regional fixed route service, VINE Go paratransit service, five community shuttles and a flexible route service. In addition, two user side taxi subsidy programs are offered to eligible residents.
How are transportation services provided?	Pays Veolia Transportation to provide transportation services. Provides taxi scrip/van vouchers to clientele.
Who is served?	Serving Napa Valley: Calistoga, St Helena, Deer Park, Rutherford, Oakville, Yountville, Napa, American Canyon, portions of Vallejo in Solano County along the VINE Route 10 and portions of Santa Rosa along VINE Route 11. Number of one-way trips per month (roundtrip =2): Paratransit 2900 - 3300 Average clients per month: Paratransit 130-150 avg daily; VINE transit avg 2280-2500 daily; community shuttle 25 - 35 avg daily
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible. Clients are disabled. Must live within a certain geographic area. Must meet age requirement.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types). Trips to dialysis clinics; Adult day health care; Health/medical appointments; Work; Education or training; Social/recreational/personal trips; To meals or nutritional counseling; Group outings for qualified nursing homes, or residential complexes
Equipment	Total vehicles owned/operated: 52 Number of buses: 29 Number of autos: 0 Number of vans: 23 cutaway's Number of lift- or ramp-equipped vehicles: all
Transp services employees	Management, full time paid: 4 Management, part-time paid: 0 Volunteers: 0
Transp. services funding	TOTAL annual transportation budget: \$997.1K Main sources of operating funding: TDA, Fed, CMAQ, State Planning Funds, MTC TLC Main sources of capital funding: 5310, 5311, TDA, Fed and State
Transp. services costs	Admin. costs : Capital costs: Operating costs: \$39,240

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

ADA Paratransit

ADA PT revenue miles: \$173,981
ADA PT Trips: 33,454

ADA PT revenue hours 15,460
Operation costs: \$1,026,633

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

NCTPA currently is studying Up Valley transportation needs, services and potential alternatives.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Golden Gate Regional Center

Phone: 415-546-9222

**120 Howard Street, 3rd Floor
 San Francisco, CA 94105**

**Contact: Lisa Rosene, Chief, Social Work
 E-mail: Irosene@ggrc.org**

**FAX:
 TDD:**

Type of agency	Private non-profit
Description of services	GGRC is contracted through State DDS to serve 7500 clients in three counties. GGRC's clients are those with mental retardation, a severe handicap, severe epilepsy and autism. GGRC provides case management and programs for their clients. They only provide transportation for people who cannot use paratransit, either because they require additional assistance or because they live out of the paratransit service area. When clients request transportation, R&D (GGRC's broker) does scheduling and works with vendors to arrange it.
How are transportation services provided?	Pays R&D Transportation (broker) to provide transportation services. GGRC also reimburses parents of children under 3 yrs (w/ mental retardation, severe handicap, severe epilepsy, autism) for transportation to/from preventative/early intervention appointments
Who is served?	San Francisco County, Marin County, San Mateo County Number of one-way trips per month (roundtrip =2): 71,980 Average clients per month: 1,766
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients are disabled.
Eligibility activities	Transportation services are provided for the following purposes: to/from regional center-funded programs only (not to medical appts, etc.)
Equipment	Total vehicles owned/operated: 186 (R&D owns) Number of buses: _____ Number of autos: 9 (R) Number of vans: 177 (R&D owns) Number of lift- or ramp-equipped vehicles: 101 (R&D)
Transp services employees	Management, full time paid: 3 Management, part-time paid: Volunteers:
Transp. services funding	TOTAL annual transportation budget: GGRC receives funding per individual Main sources of operating funding: State (not sure how much \$\$) Main sources of capital funding:
Transp. services costs	Admin. costs : Capital costs: Operating costs:
ADA Paratransit	ADA PT revenue miles: _____ ADA PT revenue hours ADA PT Trips: _____ Operation costs:

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Among the community, there are a huge number of gaps: - Waiting up to two hours for a vehicle - Missing doctors appointments. Even when clients miss appointments, the appointment is charged against their Medi-Cal & Medi-Cal only pays for a certain number of appointments per month) - Missing dialysis appointments (can be life-threatening) For us at GGRC, the biggest problem is late buses.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

[Lisa is a stakeholder and an outreach meeting participant and has made other comments in those contexts.]

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Laguna Honda ADHC

Phone: 415-759-3360

**375 Laguna Honda Blvd.
San Francisco, CA 94116**

Contact: Charles Rivera,

E-mail:

FAX:

TDD:

Type of agency	Private non-profit	
Description of services	We provide transportation for ADHC participants (65-70 participants; 12-13 in wheelchairs), some are frail elderly. We pick them up at home and bring them to the ADHC programs.	
How are transportation services provided?	Pays Trans Metro to provide transportation services.	
Who is served?	San Francisco (County & City) Number of one-way trips per month (roundtrip =2): approx. 3,000 Average clients per month: approx. 70	
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Must have a verified medical reason. ADHC client	
Eligibility activities	Transportation services are provided for the following purposes: Adult day health care; if social workers request a special medical appointment they arrange it through the client's taxi scrip	
Equipment	Total vehicles owned/operated: 5 Number of buses: _____ Number of autos: _____ Number of vans: 5 Number of lift- or ramp-equipped vehicles: 5	
Transp services employees	Management, full time paid: 3 Management, part-time paid: Volunteers:	
Transp. services funding	TOTAL annual transportation budget: \$25,000 (this is a very bad estimate) Main sources of operating funding: Medi-Cal Main sources of capital funding: No capital (we have a contract)	
Transp. services costs	Admin. costs : ? Capital costs: ? Operating costs: ?	
ADA Paratransit	ADA PT revenue miles: ADA PT Trips:	ADA PT revenue hours Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

One of the issues in S.F. is a dearth of vendors. There are a lot of older adults living in the city; however, there are not a lot of vendors. Right now there is just one big vendor and a lot of little ones. We simply need more vans. Another problem in S.F. is that it's a small city in terms of size, but large in terms of getting people to and from the ADHC, especially within the one hour travel time regulation.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

There are 6-7 ADHCs in the city and there are efforts to coordinate. The services network has a representative on the Paratransit Coordinating Committee so that they are represented.

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

North & South of Market ADHC

55 Mabini St
San Francisco, CA 94107

Contact: **Cynthia Davis, Executive Director**
E-mail: cynthiadavis@nsmdayhealth.org

Phone: **415-882-7301 x 44**
FAX:
TDD:

Type of agency	Private non-profit
Description of services	We are required to provide transportation services to our clients (transport them to and from ADHC programs). We pay others to operate two different types of transportation service: a group van is operated by Med Sam and ADA paratransit is provided by Trans Metro.
How are transportation services provided?	Pays Med Sam (group van) and Trans Metro (ADA) to provide transportation services. Provides taxi scrip/van vouchers to clientele.
Who is served?	San Francisco (City & County) Number of one-way trips per month (roundtrip =2): 2600 Average clients per month: 320
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: ADHC program participant
Eligibility activities	Transportation services are provided for the following purposes: Adult day health care;
Equipment	Total vehicles owned/operated: 2 Number of buses: 2 Number of autos: Number of vans: Number of lift- or ramp-equipped vehicles: 2
Transp services employees	Management, full time paid: Management, part-time paid: 12 (transportation is small part of these people's job) Volunteers:
Transp. services funding	TOTAL annual transportation budget: ??? (can't break it out of Medi-Cal bu Main sources of operating funding: Medi-Cal (can't break out the amount of funding that is provided for transportation. We get a bundled rate from Medi-Cal) Main sources of capital funding: 2 buses were purchased with 5310 grants (the contracted operators give us a lower rate per trip because they use our vehicles)
Transp. services costs	Admin. costs : Capital costs: Operating costs:
ADA Paratransit	ADA PT revenue miles: ADA PT revenue hours ADA PT Trips: Operation costs:

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Training is so important. Drivers need to know who they are driving and how to manage the passengers' needs (dementia, medical problems, etc.) Drivers need to be trained in first aid and CPR. Also important to have enough resources so that if a bus breaks down or if there's an accident there is a good way of communicating this to ADHC and to client's family so that no one worries. We are regulated and are not allowed to have clients in transit for more than one hour in each direction. This is out of our control though because we pay others to provide transportation. We can get written up for it if our contractors don't meet the one-hour regulation though. As a 5310 grant recipient, we must report info on the 5310-funded vehicles quarterly to Sacramento (# of trips, etc.) We are dependent on carriers to provide information. There is a need for coordination in this area. As you can see, there are a lot of separate entities working together to provide transportation for our clients (ADHCs, contracted paratransit providers, government funding agencies) -- we all have to work well together, help each other. Need to find ways to keep costs down. Lots of opportunities for coordination.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No one else is bringing our clients to ADHC programs. We were approached once by a private pay company who wanted to start providing transportation services to our clients, but our clients cannot afford private pay (plus they're already eligible for free transit) -- why would they pay? Unless this service was targeted at higher income clients.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

On Lok Senior Health Services

Phone: 415-550-2262

**1333 Bush Street
 San Francisco, CA 94109**

**Contact: Billy Chan, Transportation
 E-mail: bchan@onlok.org**

**FAX: 415-292-8745
 TDD:**

Type of agency	Private non-profit	
Description of services	We are a health plan. We provide transportation for our participants - to and from their homes to the day health centers, medical appointments, recreation outings, etc. We also provide deliveries of meals, medicines and supplies.	
How are transportation services provided?	Provides services directly to clients Provides taxi scrip/van vouchers to clientele.	
Who is served?	San Francisco, Fremont Number of one-way trips per month (roundtrip =2): 11560 Average clients per month: 577	
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible. Clients are disabled. Must have a verified medical reason. Must live within a certain geographic area. Must meet age requirement.	
Eligibility activities	Transportation services are provided for the following purposes: Trips to dialysis clinics; Adult day health care; Health/medical appointments; Social/recreational/personal trips; To meals or nutritional counseling;	
Equipment	Total vehicles owned/operated: 36 Number of buses: 16 Number of autos: 0 Number of vans: 20 Number of lift- or ramp-equipped vehicles: 34	
Transp services employees	Management, full time paid: 45 Management, part-time paid: 10 Volunteers:	
Transp. services funding	TOTAL annual transportation budget: \$2,000,000 Main sources of operating funding: Main sources of capital funding:	
Transp. services costs	Admin. costs : \$200,000 Capital costs: \$170,000 Operating costs: \$1,600,000	
ADA Paratransit	ADA PT revenue miles: ADA PT Trips:	ADA PT revenue hours Operation costs:

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

One need is the availability of services. There are occasional instances when the rides that were booked do not arrive. Another complaint I hear is the length of time people have to wait for rides. It is hard for different organizations to coordinate their services and optimize their operations.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No. The population we serve is defined - they have to be participants in our health plan.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Saint Francis Memorial Hospital

Phone: 415-353-6352

**900 Hyde St.
 San Francisco, CA 94109**

**Contact: William McMahon, Van Service
 E-mail: wmcmahon@chw.edu**

**FAX: 415-750-5722
 TDD:**

Type of agency	Private non-profit
Description of services	Transport for Outpatient Treatment Departments, such as Radiation Oncology, Physical Therapy, Come & Go Surgery and Discharges to home or other facilities on an as can do basis. Some Doctor appointments for Seniors only.
How are transportation services provided?	Provides services directly to clients
Who is served?	San Francisco Number of one-way trips per month (roundtrip =2): About 800 Average clients per month: 50
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Outpatient Departments screen patients for need.
Eligibility activities	Transportation services are provided for the following purposes: Health/medical appointments;
Equipment	Total vehicles owned/operated: 6 Number of buses: _____ Number of autos: _____ Number of vans: 6 Number of lift- or ramp-equipped vehicles: 4
Transp services employees	Management, full time paid: 6 Management, part-time paid: Volunteers:
Transp. services funding	TOTAL annual transportation budget: Unknown Main sources of operating funding: All funding provided by Saint Francis Memorial Hospital. Main sources of capital funding: Unknown
Transp. services costs	Admin. costs : Capital costs: Operating costs:
ADA Paratransit	ADA PT revenue miles: _____ ADA PT revenue hours _____ ADA PT Trips: _____ Operation costs: _____

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

San Francisco Department of Aging and Adult Services

Phone: 415-355-6786

**875 Stevenson Street, 3rd Floor
 San Francisco, CA 93103**

**Contact: Betsy Eddy, Program Analyst
 E-mail: betsy.eddy@sfgov.org**

**FAX: 415-355-3683
 TDD: 415-355-6756**

Type of agency City Department

Description of services The Department provides funding to Muni accessible services to provide group van and shopping trips and some recreational trips for senior centers.

How are transportation services provided?

Who is served?

Number of one-way trips per month (roundtrip =2):
 Average clients per month:

Eligibility for transportation services

Transportation is provided to people meeting some or all of the following requirements:

Eligibility activities

Transportation services are provided for the following purposes:

Equipment

Total vehicles owned/operated:

Number of buses:

Number of autos:

Number of vans:

Number of lift- or ramp-equipped vehicles:

Transp services employees

Management, full time paid:

Management, part-time paid:

Volunteers:

Transp. services funding

TOTAL annual transportation budget:

Main sources of operating funding:

Main sources of capital funding:

Transp. services costs

Admin. costs :

Capital costs:

Operating costs:

ADA Paratransit

ADA PT revenue miles:

ADA PT revenue hours

ADA PT Trips:

Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
Transportation Services Inventory

San Francisco Veteran's Administration Medical Center

Phone: 415 750-6613

4150 Clement St.
San Francisco, CA 94121

Contact: Kathy Gotschall, Manager,
E-mail: Kathy.Gotschall@med.va.gov

FAX: 415 379-5541
TDD:

Type of agency	Federal agency	
Description of services	VA provides wheelchair accessible vans/guerney vans and ambulance services through contracted providers to eligible/authorized beneficiaries. We also have VA staffed shuttles to and from designated areas and volunteer drivers for local trips. The DAV provides shuttle service to and from the VA with donated vehicles and volunteer drivers.	
How are transportation services provided?	Provides services directly to clients Pays MV Transportation/AMR Ambulance to provide transportation services.	
Who is served?	We cover mainly the SF bay area and north western California area but also provide service for some patients in East Bay, Fresno, Palo Alto and Reno, NV areas. Number of one-way trips per month (roundtrip =2): 2000 Average clients per month: 500	
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Must have a verified medical reason. Must live within a certain geographic area. Pts with 30% or higher SC do not need to meet income thresholds.	
Eligibility activities	Transportation services are provided for the following purposes: Trips to dialysis clinics; Health/medical appointments; Hospital discharges going to SNF	
Equipment	Total vehicles owned/operated: Number of buses: Number of autos: Number of vans: Number of lift- or ramp-equipped vehicles:	
Transp services employees	Management, full time paid: 5 Management, part-time paid: 0 Volunteers: 0	
Transp. services funding	TOTAL annual transportation budget: \$3,000 Main sources of operating funding: 100% Government funded Main sources of capital funding: 100% Government funded	
Transp. services costs	Admin. costs : Capital costs: Operating costs:	
ADA Paratransit	ADA PT revenue miles: ADA PT Trips:	ADA PT revenue hours Operation costs:

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Not all of our patients qualify for our travel services or the schedules do not meet their needs. It would be very helpful for elderly or disabled pts to have more free or low fee shuttle services available to them.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

ADA Paratransit

ADA PT revenue miles: \$4,330,965
ADA PT Trips: 1,218,248

ADA PT revenue hours 403,702
Operation costs: \$19,152,359

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Transit needs that aren't served by fixed route or paratransit such as shopping trips, people who have difficulty using fixed route but aren't ADA eligible. Those who are afraid of fixed route but don't meet ADA criteria. Lots of coordination is happening in SF.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

City of Foster City

Phone: 650-286-3236

**610 Foster City Blvd.
Foster City, CA 94404**

**Contact: Leslie Carmichael, Planning
E-mail: lcarmichael@fostercity.org**

**FAX:
TDD:**

Type of agency Public agency

Description of services The Foster City Connections Shuttle is a free shuttle which provides service within Foster City with two routes. The shuttle operates Monday through Friday 9:30 am to 3:30 pm (excluding holidays). The Blue Line serves the western portion of the City and the Bridgepoint Shopping Center. The Blue Line makes a connections with the Red Line and SamTrans 251 at the Foster City Recreation Center and in other locations. The Red Line shuttle stops are the same as the Sam Trans Route 251 bus stops. The Red Line and SamTrans Route 251 provide connections to the Hillsdale Caltrain Station. The shuttle is 50% grant funded.

How are transportation services provided? Pays Peninsula Traffic Congestion Relief Alliance manages; contracts with PCA to provide transportation services.

Who is served? Foster City and some areas of San Mateo
Number of one-way trips per month (roundtrip =2): 153 weekly in 05-06
Average clients per month: 750-850 weekly

Eligibility for transportation services Transportation is provided to people meeting some or all of the following requirements:
Connections Shuttle open to general public

Eligibility activities Transportation services are provided for the following purposes:
All trips (no restrictions on destination types).

Equipment Total vehicles owned/operated: 2
Number of buses: Number of autos:
Number of vans: Number of lift- or ramp-equipped vehicles: 2

Transp services employees Management, full time paid:
Management, part-time paid: 1
Volunteers:

Transp. services funding TOTAL annual transportation budget: 155000
Main sources of operating funding:
City General Fund, C/CAG grant
Main sources of capital funding:
None.

Transp. services costs Admin. costs : \$9,100 advertising etc.
Capital costs:
Operating costs: \$145,900 (contract)

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

ADA Paratransit

ADA PT revenue miles:
ADA PT Trips:

ADA PT revenue hours
Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Receive requests for service to Millbrae BART (peak hour employer shuttles do serve Millbrae).

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No response given.

MTC Coordinated Public Transit - Human Service Transportation Plan
Transportation Services Inventory

Coastside Opportunity Center

Phone: 650-726-9071

PO Box 1089

Contact: Gary Naman, Mr.

FAX: 650-726-7096

El Granada, CA 94018

E-mail: gary@gan-trans.com

TDD:

Type of agency	Private non-profit
Description of services	First, we offer door-to-door services to the elderly, handicapped, low income and infirm from their coastside homes (including the communities of Pescadero and La Honda) and/or from Seton Coastside Hospital to their appointments, e.g., doctors, hospitals, clinics, therapy, haircuts, etc. These appointments could be in San Francisco to any and all points on the peninsula south to Palo Alto. When they are finished with their appointments we return them to point of origin. We also operate a fixed route bus service on the coast serving the communities of Half Moon Bay on the south to Moss Beach on the north under contract to SamTrans.
How are transportation services provided?	Provides services directly to clients
Who is served?	From all San Mateo County coastal cities including Pescadero and La Honda to San Francisco, Pacifica, Daly City, South San Francisco, San Mateo, Belmont, Redwood City, Palo Alto for door-to-door service (see response to previous question) to appointments. Number of one-way trips per month (roundtrip =2): 3300 including the SamTrans fixed route pas Average clients per month: 150-200 different people
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Must have a verified medical reason. Must live within a certain geographic area. Quality of life
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types). Trips to dialysis clinics; Health/medical appointments; Work; Education or training; Social/recreational/personal trips;
Equipment	Total vehicles owned/operated: 14 Number of buses: 9 Number of vans: 4 Number of autos: 0 Number of lift- or ramp-equipped vehicles: 14
Transp services employees	Management, full time paid: 11 Management, part-time paid: 1 Volunteers: 1
Transp. services funding	TOTAL annual transportation budget: 450000 Main sources of operating funding: Contracts: 60% Grants: 40% Main sources of capital funding: Gifts (Bus purchases from other agencies for \$1.00)
Transp. services costs	Admin. costs : \$25,000 Capital costs: Operating costs: \$425,000

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

ADA Paratransit

ADA PT revenue miles:
ADA PT Trips:

ADA PT revenue hours
Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

A coastside collaborative (Coastside Opportunity Center, SamTrans, Cabrillo School District) just conducted an extensive, in-depth needs assessment survey in conjunction with the Peninsula Traffic Congestion Relief Alliance. The survey showed that there is a huge, unmet public transportation need for transportation services on the San Mateo coast from nearly all classes of the clients we serve. In addition there is a strong desire from all classes residents for a frequent, predictable, reliable, on-time public transportation to serve the coastside communities from HMB to Montara. Under separate cover I will forward the survey to Therese Knudsen at MTC or you can get it from Christine Maley-Grubl at PTCRA.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

The only other agency on the coast with buses is HMB Adult Day Care Center and we work together to serve many of the same door-to-door clients, although it is my understanding that they only provide door-to-door service on the coast. They do not take clients/patients to appointments 'over the hill' in San Francisco etc. to Palo Alto as we do.

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

SamTrans

Phone: 650-508-6475

1250 San Carlos Ave.
San Carlos, CA 94402

Contact: Bill Welch, Manager, Accessible
E-mail: welchb@samtrans.com

FAX: 650-508-7945
TDD: 650-508-6448

Type of agency	Public agency
Description of services	Two ADA complementary paratransit services: Redi-Wheels and RediCoast
How are transportation services provided?	Pays MV Transportation to provide transportation services. Provides transit tickets or passes to clients.
Who is served?	San Mateo County and included cities Number of one-way trips per month (roundtrip =2): 28,000 Average clients per month: 2100
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types).
Equipment	Total vehicles owned/operated: 87 Number of buses: 47 Number of autos: 13 Number of vans: 27 Number of lift- or ramp-equipped vehicles: All exce
Transp services employees	Management, full time paid: 26 Management, part-time paid: 8 Volunteers:
Transp. services funding	TOTAL annual transportation budget: 12.9M (FY07) Main sources of operating funding: FY07 Budget Sales Tax - 7.7M Measure A - 2.5M TDA 4.5 - 1.7M Fares - 0.6M STA - 0.4M Main sources of capital funding: Federal Assistance - 83% Sales Tax - 17%
Transp. services costs	Admin. costs : 1M ADA Administration (FY07 budget) Capital costs: \$3.5M (FY07) Operating costs: \$11,900,000 (contract operator + in-house maintenance (FY07 budget))
ADA Paratransit	ADA PT revenue miles: \$2,450,000 ADA PT revenue hours 210,300 ADA PT Trips: 288,200 Operation costs: \$11,600,000

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Needs: Seniors who are not ADA eligible but cannot drive Limited public transportation in lower density areas

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

ADA paratransit is not convenient for some people. Most human service organizations do not provide transportation to their clients. Convenient intercounty transportation. Opportunities: A program like Portland's 'Ride Connection'. Volunteer driver programs. Human service agencies providing their own client transportation. Taxi vouchers for same-day rides for ADA paratransit customers. Expand Redi-Wheels capacity to avoid 'standby' scheduling of some passengers. Automated 10-minute call before Redi-Wheels pickup to reduce no-shows.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services?

No

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

San Mateo County Aging and Adult Services

Phone: 650-573-3527

225 37th Avenue

Contact: Shea Muller, Planner

FAX: 650-372-0729

San Mateo, CA 94403

E-mail: smuller@co.sanmateo.ca.us

TDD: 800-994-6166

Type of agency Public agency

Description of services We transport clients in County-owned/operated vehicles, as well as provide taxi vouchers and bus passes, to health and supportive services.

How are transportation services provided?

Who is served?

Number of one-way trips per month (roundtrip =2):
 Average clients per month:

Eligibility for transportation services

Transportation is provided to people meeting some or all of the following requirements:

Eligibility activities

Transportation services are provided for the following purposes:

Equipment

Total vehicles owned/operated:

Number of buses:

Number of autos:

Number of vans:

Number of lift- or ramp-equipped vehicles:

Transp services employees

Management, full time paid:

Management, part-time paid:

Volunteers:

Transp. services funding

TOTAL annual transportation budget:

Main sources of operating funding:

Main sources of capital funding:

Transp. services costs

Admin. costs :

Capital costs:

Operating costs:

ADA Paratransit

ADA PT revenue miles:

ADA PT revenue hours

ADA PT Trips:

Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Senior Coastsiders

Phone: 650-726-9056

**535 Kelly Avenue
 Half Moon Bay, CA 94019**

**Contact: Cara Schmaljohn, Executive
 E-mail: CaraSchmal@aol.com**

**FAX: 650-726-2911
 TDD:**

Type of agency	Private non-profit		
Description of services	We own 2 buses and provide service to seniors on the San Mateo Coastside from Montara through Half Moon Bay.		
How are transportation services provided?	Provides services directly to clients		
Who is served?	San Mateo County Coastside from Montara through Half Moon Bay Number of one-way trips per month (roundtrip =2): 600 Average clients per month: 30		
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Must meet age requirement.		
Eligibility activities	Transportation services are provided for the following purposes: Social/recreational/personal trips; To meals or nutritional counseling;		
Equipment	Total vehicles owned/operated: 2		
	Number of buses: 2	Number of autos:	
	Number of vans:	Number of lift- or ramp-equipped vehicles:	
Transp services employees	Management, full time paid: Management, part-time paid: Volunteers:		
Transp. services funding	TOTAL annual transportation budget: Main sources of operating funding: Main sources of capital funding:		
Transp. services costs	Admin. costs : Capital costs: Operating costs:		
ADA Paratransit	ADA PT revenue miles:	ADA PT revenue hours	
	ADA PT Trips:	Operation costs:	

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Achievekids

Phone: 650-494-1200

**3860 Middlefield Rd
 Palo Alto, CA 94303**

**Contact: Michael Gennette, Executive
 E-mail:**

**FAX:
 TDD:**

Type of agency Private non-profit

Description of services We serve students with emotional and developmental disabilities. We provide transportation for our students to and from school (contracted to STA) and we have a small fleet of our own vehicles to take students to and from community events, jobs, etc.

How are transportation services provided? Pays Student Transportation of America (STA) to provide transportation services.

Also have 15 vehicles of our own

Who is served? Santa Clara County (some Achievekids students come from San Mateo, Santa Cruz, Alameda Counties, but those students' school district decides if they want to transport the students with a bus, with their own vehicle, or if they want to provide taxi vouche
 Number of one-way trips per month (roundtrip =2): approx. 6,000
 Average clients per month: approx. 100

Eligibility for transportation services Transportation is provided to people meeting some or all of the following requirements:
 Clients are disabled. Students at Achievekids schools

Eligibility activities Transportation services are provided for the following purposes:
 Work; Social/recreational/personal trips; school

Equipment Total vehicles owned/operated: 15 (in our own fle
 Number of buses: Number of autos:
 Number of vans: 15 Number of lift- or ramp-equipped vehicles: approx

Transp services employees Management, full time paid: 2
 Management, part-time paid: 2
 Volunteers:

Transp. services funding TOTAL annual transportation budget: \$0.5 million to STA
 Main sources of operating funding:
 School districts

 Main sources of capital funding:
 VTA and Caltrans (funding from FTA Section 5310 program for purchase of 9 vehicles)

Transp. services costs Admin. costs :
 Capital costs:
 Operating costs:

ADA Paratransit ADA PT revenue miles: ADA PT revenue hours
 ADA PT Trips: Operation costs:

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

STA has a difficult time attracting and maintaining staff. They have trouble attracting knowledgeable and experienced drivers for kids with disabilities. STA vehicles do not have air conditioning (very difficult for students with longer drives).

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

Other organizations have similar schools with similar students, but it's not really duplicative service. The various schools talk to one another about best practices, challenges, contracts, etc. at their monthly meeting of nonpublic schools. The issue of transportation occasionally comes up. It is difficult to share vehicles though because all of their students need vehicles at the same time in a different place.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Agnews Developmental Services

Phone: (408)-451-7414

**3500 Zanker Road
 San Jose , CA 95134**

**Contact: Anthony Ho, Motor Pool Manager I
 E-mail: aho@agneews.dds.ca.gov**

**FAX: (408)451-7416
 TDD:**

Type of agency	Public agency	
Description of services	Agnews transportation department provides repairs and services to our fleet vehicles (trucks,buses) and also provides laundry, food, commissary, property delivery, and busing individuals to workshops, school and special events.	
How are transportation services provided?	Provides services directly to clients	
Who is served?	Anywhere in this state for our clients requested Number of one-way trips per month (roundtrip =2): 300 approx Average clients per month: 300 clients	
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients are disabled. Must have a verified medical reason.	
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types). Trips to dialysis clinics; Adult day health care; Health/medical appointments; Work; Education or training; Social/recreational/personal trips; To meals or nutritional counseling;	
Equipment	Total vehicles owned/operated: 100 Number of buses: 5 Number of autos: 52 Number of vans: 43 Number of lift- or ramp-equipped vehicles: 17	
Transp services employees	Management, full time paid: 7 Management, part-time paid: Volunteers:	
Transp. services funding	TOTAL annual transportation budget: 1500000 Main sources of operating funding: DDS HEADQUARTER Main sources of capital funding: DDS HEADQUARTER	
Transp. services costs	Admin. costs : \$300,000 Capital costs: \$200,000 Operating costs: \$1,000.000.00	
ADA Paratransit	ADA PT revenue miles: ADA PT Trips:	ADA PT revenue hours Operation costs:

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Avenidas

Phone: 650-289-5425

**450 Bryant Street
 Palo Alto, CA 94301**

**Contact: Ginger Johnson, Director of
 E-mail: gjohnson@avenidas.org**

**FAX: 650-328-0366
 TDD:**

Type of agency Private non-profit

Description of services We maintain three buses for the following purposes: weekly rides to a nearby supermarket; daily rides to our lunch service and daily rides to our senior day health facility. We also run a program of volunteer drivers who transport clients.

How are transportation services provided? Pays MV Transportation to provide transportation services.

Provides transit tickets or passes to clients. Provides transportation services to clients using volunteers with privately owned vehicles.

Who is served? Palo Alto, Stanford, Mountain View, Menlo Park, Portola Valley, Los Altos, Los Altos Hills, East Palo Alto, Woodside, Redwood City, Atherton and occasionally Sunnyvale, Cupertino and San Jose
 Number of one-way trips per month (roundtrip =2): 975
 Average clients per month: 94

Eligibility for transportation services Transportation is provided to people meeting some or all of the following requirements:
 Must meet age requirement.

Eligibility activities Transportation services are provided for the following purposes:
 All trips (no restrictions on destination types). Adult day health care; Health/medical appointments; Social/recreational/personal trips; To meals or nutritional counseling;

Equipment Total vehicles owned/operated: 15
 Number of buses: 3 Number of autos: 12 (v)
 Number of vans: Number of lift- or ramp-equipped vehicles: 3

Transp services employees Management, full time paid:
 Management, part-time paid: 1
 Volunteers:

Transp. services funding TOTAL annual transportation budget: 117480
 Main sources of operating funding:
 Fee revenue - \$16,023 Grant - \$13,000 General fund - \$88,457
 Main sources of capital funding:
 No capital funding recently

Transp. services costs Admin. costs : \$28,371
 Capital costs: None recently
 Operating costs: \$89,109

ADA Paratransit ADA PT revenue miles: ADA PT revenue hours
 ADA PT Trips: Operation costs:

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

1. Low-cost transportation for people who recently or temporarily find themselves in need of a wheel chair (and are not enrolled in Outreach). 2. Our volunteer service, RoadRunners, is a little high-priced for many clients, because of our need to cover operating costs. Subsidies for this service could cover this problem, in order to serve low-income people who do not qualify for Outreach.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

Currently Avenidas partners with El Camino Hospital to provide RoadRunners services from Redwood City through Mountain View (and occasionally Sunnyvale, Cupertino and San Jose). This saves duplication of scheduling, dispatching and billing. Also, we contract with MV Transportation to provide us with drivers and vehicle mainenance.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Gardner Family Health Network, Inc.

Phone: 408-918-2682

**55 E Julian St
 San Jose, CA 95112**

**Contact: Efrain Coria, COO
 E-mail: ecoria@gfhn.org**

**FAX:
 TDD:**

Type of agency Private non-profit

Description of services We provide trips to the hospital for urgent situations (e.g., medical emergencies that don't require an ambulance). In these cases, we call a taxi for the patient and we pay for it.

How are transportation services provided?

Who is served?

Number of one-way trips per month (roundtrip =2):
 Average clients per month:

Eligibility for transportation services

Transportation is provided to people meeting some or all of the following requirements:

Eligibility activities

Transportation services are provided for the following purposes:

Equipment

Total vehicles owned/operated:

Number of buses:

Number of autos:

Number of vans:

Number of lift- or ramp-equipped vehicles:

Transp services employees

Management, full time paid:
 Management, part-time paid:
 Volunteers:

Transp. services funding

TOTAL annual transportation budget:
 Main sources of operating funding:

Main sources of capital funding:

Transp. services costs

Admin. costs :
 Capital costs:
 Operating costs:

ADA Paratransit

ADA PT revenue miles:
 ADA PT Trips:

ADA PT revenue hours
 Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

Outreach and Escort, Inc.

Phone: 408-436-2865

926 Rock Ave, Suite 10

Contact: Kathryn Heatley, CEO

FAX: 408-382-0470

San Jose, CA 95131

E-mail: KatieH@outreach2.org

TDD: 408-436-0155

Type of agency	Private non-profit
Description of services	Diversified community transportation programs serving ADA paratransit riders, Welfare-to-Work (CalWORKs) participants, children of Welfare-to-Work participants, low-income adults and other non-ADA paratransit eligible seniors. Additionally, agency operates a case management/benefits assistance program for seniors and a vehicle repair program for Welfare-to-Work (CalWORKs) participants.
How are transportation services provided?	<p>Pays multiple organizations to provide transportation services.</p> <p>This agency provides transportation for other agencies: As broker, hundreds of agencies in the County sign their clients up for select programs</p> <p>Provides transit tickets or passes to clients. Provides taxi scrip/van vouchers to clientele. Provides transportation services to clients using volunteers with privately owned vehicles. We provide free transit pass through ADA; Senior Transportation gives out actual monthly passes and 'virtual scrip' for taxi rides; our volunteer program is small</p>
Who is served?	<p>All 15 cities in Santa Clara County</p> <p>Number of one-way trips per month (roundtrip =2): 90,000 average</p> <p>Average clients per month: 6,000 plus</p>
Eligibility for transportation services	<p>Transportation is provided to people meeting some or all of the following requirements:</p> <p>Clients must be ADA-eligible. Clients are disabled. Must live within a certain geographic area. Must meet age requirement.</p>
Eligibility activities	<p>Transportation services are provided for the following purposes:</p> <p>All trips (no restrictions on destination types). Trips to dialysis clinics; Health/medical appointments; Work; Education or training; Social/recreational/personal trips; To meals or nutritional counseling;</p>
Equipment	<p>Total vehicles owned/operated: 247</p> <p>Number of buses: 13 Number of autos: 110</p> <p>Number of vans: 124 Number of lift- or ramp-equipped vehicles: 137</p>
Transp services employees	<p>Management, full time paid: 5</p> <p>Management, part-time paid:</p> <p>Volunteers:</p>
Transp. services funding	<p>TOTAL annual transportation budget: \$32,400,000</p> <p>Main sources of operating funding:</p> <p>State TDA, JARC, MTC Lifeline Program, County of Santa Clara CalWORKs program, Older Americans Act, Community Development Block Grant Program, tobacco settlement funds, local cities, foundations and private donations.</p> <p>Main sources of capital funding:</p> <p>5310 program</p>

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

Transp. services costs	Admin. costs :	\$740,000	
	Capital costs:	\$260,000	
	Operating costs:	\$31,400,000	
ADA Paratransit	ADA PT revenue miles:	\$6,200,000	ADA PT revenue hours 445,000
	ADA PT Trips:	1,025,000	Operation costs: \$28,000,000

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

There is a need to broker/mobility manage more services as agencies have clients who may not qualify for existing programs. There is a significant need for more transportation for both low-income and seniors in general (regardless of income level); disabled programs other than paratransit; more programs for the economically disadvantaged; before and after-school transportation for school-age children; medical transportation including very young children; improved level of Medicaid services from the State level down; and more programs that can serve any/all of these customers at the same time in a coordinated manner. There is a lack of mandate on the federal, state, and local levels that requires all human service agencies and public agencies (e.g., Departments of Rehabilitation, Education, Health & Human Services, etc.) to identify the funds they receive for transportation and how they are utilized, so they can be better leveraged through coordination of services. Opportunities to coordinate are hampered by fragmented contracting, regulations, funding sources, etc. from the top down in the State.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No duplication problems. There is an overall lack of resources for all of these types of community transportation programs and lack of infrastructure in the state to allow for efficient and creative leveraging/coordination. Each public agency tends to have exclusionary language or other factors that make coordinating transportation resources a challenge.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

San Andreas Regional Center

Phone: 408-341-3444

**P.O. Box 50002
 San Jose, CA 95150**

**Contact: Michael Carbaugh, Business
 E-mail: samikec@sarc.org**

**FAX: 408-376-0586
 TDD:**

Type of agency	Private non-profit
Description of services	San Andreas purchases daily transportation services for 2604 developmentally disabled consumers to and from their day programs on weekdays. They are taken to their programs between 8-10 am and taken home between 2-4 pm.
How are transportation services provided?	Pays Mv Transportation and Laidlaw (Santa Cruz) and about 20 other contractors to provide transportation services. Reimburse for paratransit trips via VTA
Who is served?	San Andreas serves consumers in Santa Clara, Santa Cruz, San Benito, and Monterey Counties. Number of one-way trips per month (roundtrip =2): 120,000 Average clients per month: 2600
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients are disabled.
Eligibility activities	Transportation services are provided for the following purposes: Education or training; San Andreas funded day program and work training programs
Equipment	Total vehicles owned/operated: We do not own o Number of buses: Number of autos: Number of vans: Number of lift- or ramp-equipped vehicles:
Transp services employees	Management, full time paid: 2 Management, part-time paid: Volunteers:
Transp. services funding	TOTAL annual transportation budget: 10000000 Main sources of operating funding: San Andreas contracts with the California Dept of Developmental Services for all funds. FY 2006-07 funding for transportation services will be approximately \$10 million. Main sources of capital funding: N/A
Transp. services costs	Admin. costs : Capital costs: Operating costs:
ADA Paratransit	ADA PT revenue miles: ADA PT revenue hours ADA PT Trips: Operation costs:

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

The ADA paratransit services in Monterey, Santa Cruz, and San Benito Counties do not always meet the needs of consumers with developmental disabilities. The ADA service in those counties is limited when compared to Santa Clara County. ADA subscription services in all 4 counties meet the need of about 300 consumers on a daily basis with approximately 90% being served in Santa Clara County. Expanded ADA paratransit services would help offset San Andreas' cost of providing transportation. More coordination with San Andreas and the ADA transit providers in each county could be helpful. There are now 2 separate systems for transit for consumers.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

San Andreas has provided transportation services for developmentally disabled consumers for the past 25 years. Within the last 5-10 years the increase in ADA paratransit has helped offset the cost of this service. The legal mandate for San Andreas (California Lanterman Developmental Services Act) requires that we refer consumers for generic funded services (ADA paratransit) before funding the service ourselves. This has worked increasingly well as ADA services have improved. Developmentally disabled consumers have the same entitlement to ADA paratransit (when eligible) as any other citizen of the county. More fixed route travel training services for the consumers may be helpful.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Santa Clara Valley Transportation Authority

Phone: 408-321-7034

**3331 North First Street
 San Jose, CA 95134**

**Contact: David Ledwitz, Management
 E-mail: david.ledwitz@vta.org**

**FAX: 408-955-9754
 TDD: 408-321-2330**

Type of agency	Public agency
Description of services	VTA is a public transportation provider for Santa Clara County providing bus, light rail, and ADA paratransit services.
How are transportation services provided?	Pays Outreach & Escort, Inc to provide transportation services.
Who is served?	Santa Clara County including these cities: San Jose, Santa Clara, Sunnyvale, Campbell, Cupertino, Los Gatos, Los Altos, Los Altos Hills, Mountain View, Palo Alto, Morgan Hill, Milpitas, Gilroy, Saratoga, Monte Sereno, and unincorp Santa Clara County. Number of one-way trips per month (roundtrip =2): 92021 Average clients per month: 5983
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types). JARC eligible trips for JARC participants
Equipment	Total vehicles owned/operated: 240 Number of buses: 0 Number of autos: 80 Number of vans: 160 Number of lift- or ramp-equipped vehicles: 160
Transp services employees	Management, full time paid: 57 Management, part-time paid: 0 Volunteers: 10
Transp. services funding	TOTAL annual transportation budget: \$25,609,468 (ADA Paratransit + JAR Main sources of operating funding: TDA funds \$25M Main sources of capital funding: 5310 program funds Local Funds \$1.33M
Transp. services costs	Admin. costs : \$4,122,432 Capital costs: \$1,327,109 Operating costs: \$22,457,389
ADA Paratransit	ADA PT revenue miles: \$6,125,878 ADA PT revenue hours 425,079 ADA PT Trips: 981,098 Operation costs: \$25,000,000

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Dialysis trips are currently being handled by ADA paratransit as standard trips. Due to the post-appointment medical nature of dialysis trips, a coordinated social service-medical trip provision may be needed for some dialysis recipients vs. standard public ADA paratransit services. This assessment also applies to other sensitive medical treatments and post-hospitalization discharge transportation requirements. Homeless passengers would benefit from personally designed assistance and information regarding transportation to and from social service providers and housing facilities. Many homeless passengers are not accessing housing facilities and are using public transit vehicles to take the place of housing.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

VTA encourages the provision of social service / agency clientele specific trips by agencies providing care to designate client groups. This encouragement and related assistance is provided by VTA staff through the 5310 application process where applicants propose coordination activities with other social service transportation providing agencies in order to compete for 5310 program funding.

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 Transportation Services Inventory

Veterans Administration (Santa Clara County)

Phone: 650-493-5000

3801 Micanda Ave
 Palo Alto, CA 94306

Contact: Linda Hollan, Transportation
E-mail:

FAX:
TDD:

Type of agency	Federal agency
Description of services	Provide rides for vets who meet certain eligibility requirements to and from the V.A. Hospital only.
How are transportation services provided?	Pays MV to provide transportation services. Provides taxi scrip/van vouchers to clientele.
Who is served?	Counties: Alameda, Calaveras, Monterey, San Benito, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Stanislaus, Tuolumne, Sonora Number of one-way trips per month (roundtrip =2): 500 Average clients per month: 300-400
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients are disabled. Must have a verified medical reason. 30% Service Connectivity (as rated by V.A. doctors) -- note: this is more strict than ADA eligibility requirements
Eligibility activities	Transportation services are provided for the following purposes: only to V.A. hospital
Equipment	Total vehicles owned/operated: 13 Number of buses: Number of autos: Number of vans: 13 Number of lift- or ramp-equipped vehicles: 13
Transp services employees	Management, full time paid: 2 Management, part-time paid: Volunteers:
Transp. services funding	TOTAL annual transportation budget: 3000000 Main sources of operating funding: Federal Government - \$3 million Main sources of capital funding: No capital (vehicles are provided by contractor)
Transp. services costs	Admin. costs : ??? Capital costs: 0 Operating costs: \$2,800,000
ADA Paratransit	ADA PT revenue miles: ADA PT revenue hours ADA PT Trips: Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

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There are a lot of vets who do not meet the criteria needed to receive transportation -- they are borderline. They may meet ADA eligibility requirements but they don't meet ours (very strict). Also, some vets are housebound and they need rides to medical appointments outside of the V.A. hospital. We receive calls every day from vets like this and I have to turn them down. It is very difficult.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

As long as MV can service the contract that they have with the VA, we don't mind sharing MV's vans.

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

Benicia Breeze
250 East L Street
Benicia, CA 94510

Contact: John Andoh, Transit Services
E-mail: jandoh@ci.benicia.ca.us

Phone: 707-745-0815
FAX: 707-747-8115
TDD: 711 through C

Type of agency Public agency

Description of services Provide taxi scrip, fixed route, flexible fixed route and ADA paratransit services.

How are transportation services provided? Pays MV Public Transportation, Inc to provide transportation services.

Provides transit tickets or passes to clients. Provides taxi scrip/van vouchers to clientele.

Who is served? Benicia, Vallejo, Pleasant Hill, Concord, Martinez in Solano and Contra Costa Counties.
Number of one-way trips per month (roundtrip =2): 8415
Average clients per month: 701

Eligibility for transportation services Transportation is provided to people meeting some or all of the following requirements:
Anyone

Eligibility activities Transportation services are provided for the following purposes:
All trips (no restrictions on destination types).

Equipment Total vehicles owned/operated: 13
Number of buses: 13 Number of autos: 0
Number of vans: 0 Number of lift- or ramp-equipped vehicles: Lift

Transp services employees Management, full time paid: 21
Management, part-time paid: 4
Volunteers: 0

Transp. services funding TOTAL annual transportation budget: 1488393
Main sources of operating funding:
TDA - 70% Farebox - 20% Misc Revenue - 10%

Main sources of capital funding:
FTA 80% TDA 20%

Transp. services costs Admin. costs : \$126,379
Capital costs: \$161,000
Operating costs: \$1,201,014

ADA Paratransit ADA PT revenue miles: \$109,563 ADA PT revenue hours 8,453
ADA PT Trips: 16,366 Operation costs: \$434,879

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

There is a need for coordinated paratransit and taxi scrip services in Solano County. The system is very

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

framnted.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

City of Dixon

Phone: 909 678-7000

**600 East A Street
 Dixon, CA 95620**

**Contact: Jeff Matheson, Recreation and
 E-mail: jmatheson@ci.dixon.ca.us**

**FAX: 707 678-0960
 TDD:**

Type of agency	Public agency
Description of services	The City of Dixon operates a general public dial-a-ride service operating M-F within the Dixon city limits. The service provides both ADA and general public service. The city also participates in intracity service operated by the Solano Transportation Authority which provides services between Fairfield and Sacramento with stops in Vacaville, Dixon, and Davis. The city also participates in Solano Paratransit, which provides ADA service to Solano County.
How are transportation services provided?	Provides services directly to clients Pays STA intracity and solano paratransit to provide transportation services. Provides taxi scrip/van vouchers to clientele. Provides transportation services to clients using volunteers with privately owned vehicles.
Who is served?	City of Dixon Solano County Number of one-way trips per month (roundtrip =2): 5000 Average clients per month: 5,000
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: general public
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types).
Equipment	Total vehicles owned/operated: Number of buses: 6 Number of autos: Number of vans: Number of lift- or ramp-equipped vehicles: 6
Transp services employees	Management, full time paid: 2 Management, part-time paid: Volunteers:
Transp. services funding	TOTAL annual transportation budget: 611808 Main sources of operating funding: TDA-\$517,365 Main sources of capital funding: TDA FTA Section 5311
Transp. services costs	Admin. costs : \$139,000 Capital costs: \$12,000 Operating costs: \$465,808
ADA Paratransit	ADA PT revenue miles: ADA PT revenue hours ADA PT Trips: Operation costs:

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Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Weekend inter city and intra city service

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

City of Vacaville, City Coach

Phone: 707-449-5330

650 Merchant Street
Vacaville, CA 95688

Contact: Brian McLean, Transit Manager
E-mail: bmclean@cityofvacaville.com

FAX: 707-449-5346
TDD:

Type of agency	Public agency		
Description of services	City Coach is Vacaville's public transit service. We provide fixed route and paratransit services within the city of Vacaville.		
How are transportation services provided?	Pays Laidlaw Transit Service to provide transportation services.		
Who is served?	City of Vacaville only. Number of one-way trips per month (roundtrip =2): 420 Average clients per month: 900		
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible.		
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types).		
Equipment	Total vehicles owned/operated: 18		
	Number of buses: 12	Number of autos:	
	Number of vans: 6	Number of lift- or ramp-equipped vehicles:	18
Transp services employees	Management, full time paid: 3		
	Management, part-time paid: 23		
	Volunteers:		
Transp. services funding	TOTAL annual transportation budget: 3000000		
	Main sources of operating funding: FTA - 80%, TDA - 20%		
	Main sources of capital funding: FTA - 80%, TDA - 20%		
Transp. services costs	Admin. costs : \$588,927		
	Capital costs: \$646,749		
	Operating costs: \$2,250,614		
ADA Paratransit	ADA PT revenue miles: \$76,501	ADA PT revenue hours: 6,751	
	ADA PT Trips: 14,537	Operation costs: \$383,597	

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

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Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No. There is very little duplication of service between our Paratransit service and the Solano Paratransit service (operated by Fairfield).

MTC Coordinated Public Transit - Human Service Transportation Plan

Transportation Services Inventory

City of Vallejo

Phone: 707-553-7224

555 Santa Clara Street
Vallejo, CA 94590

Contact: Jeanine Wooley, Administrative
E-mail: jwooley@ci.vallejo.ca.us

FAX: 707-648-4691
TDD:

Type of agency	Public agency
Description of services	We provide ferry services, fixed route paratransit and a taxi scrip program.
How are transportation services provided?	Pays MV Transportation to provide transportation services. Provides transit tickets or passes to clients. Provides taxi scrip/van vouchers to clientele.
Who is served?	Solano County Contra Costa County Number of one-way trips per month (roundtrip =2): Average clients per month: 200
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible. Clients are disabled. Clients must be on Medicaid. Must have a verified medical reason. Must live within a certain geographic area. Must meet age requirement.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types). Trips to dialysis clinics; Adult day health care; Health/medical appointments; Work; Education or training; Social/recreational/personal trips; To meals or nutritional counseling;
Equipment	Total vehicles owned/operated: 76 Number of buses: 60 Number of autos: 4 Fer Number of vans: 12 Number of lift- or ramp-equipped vehicles: 76
Transp services employees	Management, full time paid: 5 Management, part-time paid: 1 Volunteers:
Transp. services funding	TOTAL annual transportation budget: 25M Main sources of operating funding: TDA STA Main sources of capital funding: 5307
Transp. services costs	Admin. costs : Capital costs: Operating costs:
ADA Paratransit	ADA PT revenue miles: ADA PT revenue hours ADA PT Trips: Operation costs:

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Fairfield/Suisun Transit

Phone: 707-428-7768

**2000 Cadenasso Drive
 Fairfield, CA 94533**

**Contact: George Fink, Transit Manager
 E-mail: gfink@ci.fairfield.ca.us**

**FAX: 707-426-3298
 TDD:**

Type of agency	Public agency	
Description of services	We provide fixed route, commuter route and paratransit.	
How are transportation services provided?	Pays MV Transportation to provide transportation services. This agency provides transportation for other agencies: Solano Transportation Authority	
Who is served?	Fairfield, Suisun City, Vacaville, Vallejo Number of one-way trips per month (roundtrip =2): 2701 Average clients per month: Unable to determine unduplicated	
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible.	
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types). Trips to dialysis clinics; Adult day health care; Health/medical appointments; Work; Education or training; Social/recreational/personal trips; To meals or nutritional counseling;	
Equipment	Total vehicles owned/operated: 14 Number of buses: _____ Number of autos: _____ Number of vans: _____ Number of lift- or ramp-equipped vehicles: 14	
Transp services employees	Management, full time paid: 4 Management, part-time paid: Volunteers:	
Transp. services funding	TOTAL annual transportation budget: DART: \$565K; Solano Paratransit: \$5 Main sources of operating funding: DART: TDA Article 8 - \$400,000; Suisun City - \$100,000 / Solano Paratransit: Cost sharing arrangements w/ cities - \$500,000 / Senior Volunteer Driver Program: TDA Article 8 - \$44,000 Main sources of capital funding: FTA 5307 (80%) and TDA (20%)	
Transp. services costs	Admin. costs : DART: \$116K; Solano Paratransit: \$66K; Senior Volunteer Drive Capital costs: 0 Operating costs: \$890,000 DART: \$445K; Solano Paratransit: \$440K; Senior Volunteer Driver Program \$5K	
ADA Paratransit	ADA PT revenue miles: DART - 115,296; ADA PT Trips: 18,576	ADA PT revenue hours Operation costs: \$885,000 DART: \$445K; Solano Paratransit: \$440K

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

More operating funds are needed that are stable from year to year. The farebox recovery ratio as a performance indicator does not fit all conditions.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Pace Solano

Phone: 707-448-4574

**419 Mason St #118
 Vacaville, CA 95688**

**Contact: Gloria Standafer, Transportation
 E-mail: gloria@pacesolano.org**

**FAX: 707-448-6892
 TDD:**

Type of agency Private non-profit

Description of services We provide curb-to-curb services for the participants in our day program for developmentally disabled adults

How are transportation services provided? Provides services directly to clients

Who is served? Our day programs operate in Benicia, Vallejo, Suisun, Fairfield, Vacaville, all in Solano County
 Number of one-way trips per month (roundtrip =2): 4,000
 Average clients per month: 350

Eligibility for transportation services Transportation is provided to people meeting some or all of the following requirements:
 Clients must be ADA-eligible. Clients are disabled. Must meet age requirement. Must attend Pace Solano Day Program

Eligibility activities Transportation services are provided for the following purposes:
 Health/medical appointments; Work; Education or training; Social/recreational/personal trips; To meals or nutritional counseling;

Equipment Total vehicles owned/operated: 40
 Number of buses: 24 Number of autos: 0
 Number of vans: 20 Number of lift- or ramp-equipped vehicles: 22

Transp services employees Management, full time paid: 2
 Management, part-time paid:
 Volunteers:

Transp. services funding TOTAL annual transportation budget: 1157000
 Main sources of operating funding:
 North Bay Regional Center - \$872,000 Grants, donations, subsidy from other agency funds - &285,000
 Main sources of capital funding:

Transp. services costs Admin. costs :
 Capital costs:
 Operating costs:

ADA Paratransit ADA PT revenue miles: ADA PT revenue hours
 ADA PT Trips: Operation costs:

Agency comments on gaps and coordination opportunities

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

More readily available transportation services for Senior Citizens. We receive many phone calls from senior citizens asking if we can transport them to doctors appointments, etc., unfortunately we are unable to assist, because of our Day Program regulations.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

Our services are not duplicated by public agencies. Many of our passengers require one-on-one assistance because of the types of disabilities we transport. Our drivers must verify care givers are present before leaving a passenger.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Rio Vista Delta Breeze

Phone: 707-374-2878

**1 Main Street
 Rio Vista, CA 94571**

**Contact: John Andoh, Transit Coordinator
 E-mail: jandoh@ci.rio-vista.ca.us**

**FAX: 707-374-5319
 TDD: 711 Through C**

Type of agency	Public agency
Description of services	Provide deviated fixed route, taxi scrip and dial-a-ride services. Contract for ADA paratransit service.
How are transportation services provided?	Pays MV Public Transportation, Inc to provide transportation services. Provides transit tickets or passes to clients. Provides taxi scrip/van vouchers to clientele.
Who is served?	Rio Vista, Fairfield, Suisun City, Isleton, Antioch, Pittsburg, Solano, Sacramento and Contra Costa Counties Number of one-way trips per month (roundtrip =2): 1907 Average clients per month: 115
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Anyone
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types).
Equipment	Total vehicles owned/operated: 4 Number of buses: 4 Number of autos: Number of vans: Number of lift- or ramp-equipped vehicles: 4
Transp services employees	Management, full time paid: 0 Management, part-time paid: 1 Volunteers: 0
Transp. services funding	TOTAL annual transportation budget: 232830 Main sources of operating funding: TDA - 80% Misc Revenue - 10% Farebox - 10% Main sources of capital funding: FTA - 80% TDA - 20%
Transp. services costs	Admin. costs : \$67,125 Capital costs: \$118,000 Operating costs: \$16,5275
ADA Paratransit	ADA PT revenue miles: \$6,123 ADA PT revenue hours 180 ADA PT Trips: 42 Operation costs: \$6,910

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Better coordination among transit operators in Solano County. Eliminate transfers and different fare policies.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services
none.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Solano Transportation Authority

Phone: 707-427-5109

**One Harbor Center
 Suisun City, CA 94585**

**Contact: Elizabeth Richards, Director of
 E-mail: erichards@sta-snci.com**

**FAX: 707-424-6074
 TDD:**

Type of agency	Public agency
Description of services	Manage Solano Paratransit, which provides intercity paratransit service between 5 cities and the unincorporated area in eastern Solano County.
How are transportation services provided?	
Who is served?	Fairfield, Suisun City, Vacaville, Rio Vista, Dixon, eastern unincorporated Solano County Number of one-way trips per month (roundtrip =2): 900 Average clients per month:
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements:
Eligibility activities	Transportation services are provided for the following purposes:
Equipment	Total vehicles owned/operated: 10 Number of buses: 8 Number of autos: Number of vans: 2 Number of lift- or ramp-equipped vehicles: 10
Transp services employees	Management, full time paid: 1 Management, part-time paid: Volunteers:
Transp. services funding	TOTAL annual transportation budget: 600,000 Main sources of operating funding: TDA by various funding partners for Solano Paratransit. Some5310 and STA for vehicle purchases. Main sources of capital funding: STAF and 5310
Transp. services costs	Admin. costs : Capital costs: Operating costs: 0
ADA Paratransit	ADA PT revenue miles: ADA PT revenue hours ADA PT Trips: Operation costs: \$0

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Becoming independent

Phone: 707-524-6675

**1425 Corporate Center Parkway
 Santa Rosa, CA 95402**

**Contact: Robert Brown, Director of
 E-mail: rbrown@becomingindependent.org
 g**

FAX: 707-524-6792

TDD:

Type of agency	Private non-profit
Description of services	We provide our clients with transportation from home to day programs and from their programs to their homes.
How are transportation services provided?	Provides services directly to clients
Who is served?	Santa Rosa, Sonoma, Healdsburg, Windsor, Cloverdale Rhonart Park Number of one-way trips per month (roundtrip =2): 2,370 Average clients per month: 158
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible. Clients are disabled.
Eligibility activities	Transportation services are provided for the following purposes: Work; Education or training; Social/recreational/personal trips;
Equipment	Total vehicles owned/operated: 58 Number of buses: 14 Number of autos: 11 Number of vans: 27 Number of lift- or ramp-equipped vehicles: 17
Transp services employees	Management, full time paid: Management, part-time paid: 17 Volunteers:
Transp. services funding	TOTAL annual transportation budget: Main sources of operating funding: north bay regional center \$53.81 Main sources of capital funding:
Transp. services costs	Admin. costs : Capital costs: Operating costs:
ADA Paratransit	ADA PT revenue miles: ADA PT revenue hours ADA PT Trips: Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

City of Petaluma

**555 N. McDowell
 Petaluma, CA 94954**

**Contact: John Siragusa, Transit Manager
 E-mail: jsiragusa@ci.petaluma.ca.us**

**Phone: 707-778-4421
 FAX: 707-776-3799
 TDD:**

Type of agency	Public agency
Description of services	We provide fixed route and paratransit services.
How are transportation services provided?	Pays Petaluma People Services to provide transportation services. Provides transit tickets or passes to clients.
Who is served?	Petaluma Number of one-way trips per month (roundtrip =2): 4000 Average clients per month: 250
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types).
Equipment	Total vehicles owned/operated: 9 Number of buses: _____ Number of autos: _____ Number of vans: 9 Number of lift- or ramp-equipped vehicles: _____
Transp services employees	Management, full time paid: 15 Management, part-time paid: Volunteers:
Transp. services funding	TOTAL annual transportation budget: 1200000 Main sources of operating funding: TDA = \$150,000 STA = \$50,000 Farebox = \$48,000 Main sources of capital funding: TDA = \$50,000 STA = varies
Transp. services costs	Admin. costs : \$300,000 Capital costs: \$200,000 Operating costs: \$600,000
ADA Paratransit	ADA PT revenue miles: \$11,000 ADA PT revenue hours 7,500 ADA PT Trips: 1,920 Operation costs: \$650,000

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

There is good coordination between SCT and and Whistle Stop

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Council on Aging

Phone: 707-525-0143

**730 Bennett Valley Road
 Santa Rosa, CA 95404**

**Contact: Jane Doroff, Director Meals & Day
 E-mail: mowcoa@sonic.net**

**FAX: 707-525-0454
 TDD:**

Type of agency Private non-profit

Description of services

How are transportation services provided?

Who is served?

Number of one-way trips per month (roundtrip =2):
 Average clients per month:

Eligibility for transportation services

Transportation is provided to people meeting some or all of the following requirements:

Eligibility activities

Transportation services are provided for the following purposes:

Equipment

Total vehicles owned/operated:

Number of buses:

Number of autos:

Number of vans:

Number of lift- or ramp-equipped vehicles:

Transp services employees

Management, full time paid:

Management, part-time paid:

Volunteers:

Transp. services funding

TOTAL annual transportation budget:

Main sources of operating funding:

Main sources of capital funding:

Transp. services costs

Admin. costs :

Capital costs:

Operating costs:

ADA Paratransit

ADA PT revenue miles:

ADA PT revenue hours

ADA PT Trips:

Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Healdsburg Transit

Phone: 707-431-3324

**133 Matheson St.
 Healdsburg, CA 95492**

**Contact: Sonja Drown, Transit Supervisor
 E-mail: sdrown@ci.healdsburg.ca.us**

**FAX: 707-431-3158
 TDD:**

Type of agency

Description of services We operate a in-city deviated fixed route service Monday - Saturday and a general door-to-door dial-a-ride service Monday - Friday.

How are transportation services provided?

Who is served?

Number of one-way trips per month (roundtrip =2):
 Average clients per month:

Eligibility for transportation services

Transportation is provided to people meeting some or all of the following requirements:

Eligibility activities

Transportation services are provided for the following purposes:

Equipment

Total vehicles owned/operated:

Number of buses:

Number of autos:

Number of vans:

Number of lift- or ramp-equipped vehicles:

Transp services employees

Management, full time paid:
 Management, part-time paid:
 Volunteers:

Transp. services funding

TOTAL annual transportation budget:
 Main sources of operating funding:

Main sources of capital funding:

Transp. services costs

Admin. costs :
 Capital costs:
 Operating costs:

ADA Paratransit

ADA PT revenue miles:
 ADA PT Trips:

ADA PT revenue hours
 Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

ADA Paratransit

ADA PT revenue miles:
ADA PT Trips:

ADA PT revenue hours
Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

With the sheer numbers involved, there's no way to meet needs. We could line up 400 people today (riders). Sonoma County Transit couldn't keep up. Everyone wants rides at the same time (8:00am, 4:00pm). The bus system has budgetary issues all the time. People have to ride 2-3 hours each way. There just isn't enough money to feed the system to make it as efficient as possible.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No--I think they are serving different groups. NBRC has approached local paratransit as a vendor--NBRC could buy trips from them.

MTC Coordinated Public Transit - Human Service Transportation Plan
 Transportation Services Inventory

Santa Rosa Citybus

Phone: 707-543-3335

**100 Santa Rosa Ave rm 6
 Santa Rosa, CA 95402**

**Contact: Michael Ivory, Transit Planner
 E-mail: mivory@srcity.org**

**FAX: 707-543-3326
 TDD: 707-543-3926**

Type of agency	Public agency
Description of services	We provide an in-house fixed route service and contracted paratransit service.
How are transportation services provided?	Provides services directly to clients Pays MV Transportation to provide transportation services.
Who is served?	Santa Rosa Number of one-way trips per month (roundtrip =2): 200,000 Average clients per month: 200,000
Eligibility for transportation services	Transportation is provided to people meeting some or all of the following requirements: Clients must be ADA-eligible.
Eligibility activities	Transportation services are provided for the following purposes: All trips (no restrictions on destination types).
Equipment	Total vehicles owned/operated: 44 Number of buses: 30 Number of autos: 3 Number of vans: 11 Number of lift- or ramp-equipped vehicles: 41
Transp services employees	Management, full time paid: 14 Management, part-time paid: Volunteers:
Transp. services funding	TOTAL annual transportation budget: 9,722,524 DO/PT Main sources of operating funding: 5307 25% TDA 40% STA 25% Sales tax 10% Main sources of capital funding: 5307 1/3 TDA 2/3 STA
Transp. services costs	Admin. costs : \$1,381,619 Capital costs: \$1,466,706 Operating costs: \$5,454,222
ADA Paratransit	ADA PT revenue miles: 224,373 ADA PT revenue hours 18,091 ADA PT Trips: 50,159 Operation costs: \$704,933

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

There are a number of service agencies and residential facilities that depend on the city purchased transportation to provide service to their participants. A coordinated effort among local non-profits, service agencies, and

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

governmental entities would lessen the capacity burden on the purchased system allowing improved service to the entire area.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

No, there are very few organizations that provide full ADA service. There are a few residential facilities that have non-accessible vehicles but they rely on the purchased ADA service for compliant service. Expanded volunteer opportunities and training as well as escorted service may help.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

MTC Coordinated Public Transit - Human Service Transportation Plan
Transportation Services Inventory

Southwest Adult Day Services

Phone: 707-573-4543

**684 Benicia Drive
Santa Rosa, CA 95409**

**Contact: Janice Duarte-Cordova, Medical
E-mail: jcordova@friendshouse.org**

**FAX: 707-576-6637
TDD:**

Type of agency Private non-profit

Description of services We have 4 paratranist vans that we use to transport our clients to and from our adult day program. We also coordinate rides with MV and Volunteer Wheels for our clients.

How are transportation services provided?

Who is served?

Number of one-way trips per month (roundtrip =2):
Average clients per month:

Eligibility for transportation services

Transportation is provided to people meeting some or all of the following requirements:

Eligibility activities

Transportation services are provided for the following purposes:

Equipment

Total vehicles owned/operated:

Number of buses:

Number of autos:

Number of vans:

Number of lift- or ramp-equipped vehicles:

Transp services employees

Management, full time paid:

Management, part-time paid:

Volunteers:

Transp. services funding

TOTAL annual transportation budget:

Main sources of operating funding:

Main sources of capital funding:

Transp. services costs

Admin. costs :

Capital costs:

Operating costs:

ADA Paratransit

ADA PT revenue miles:

ADA PT revenue hours

ADA PT Trips:

Operation costs:

Agency comments on gaps and coordination opportunities

Describe transportation needs not being met, and opportunities to coordinate to meet those needs.

MTC Coordinated Public Transit - Human Service Transportation Plan Transportation Services Inventory

Is there duplication of services in your area? How can it be reduced through coordination of administration or services

Appendix D. Unmet Needs by County Gap Analysis

The studies listed in Appendix A, Literature Review, were reviewed to develop a preliminary list of gaps in service for elderly and disabled populations. This summary will be supplemented by information during outreach with stakeholders and transit users. Note that gaps identified in these studies have not been independently verified, and though the studies reviewed are relatively recent, some are several years old (as early as 2000) and conditions may have changed since they were published.

Types of Service Gaps

Gaps were classified according to the follow categories:

- | Spatial gaps – Are there origins, destinations, or larger areas not served by transit and/or paratransit?
- | Temporal Gaps
 - Hours of operation – Is transportation via transit necessary or highly desirable outside of current service hours / days of week?
 - Frequency – Is more frequent transit service needed to make certain types of trips?
- | Connectivity – Is there difficulty transferring between transit or paratransit services?
- | Paratransit beyond ADA requirements – Are there needs for paratransit service beyond the ADA-mandated level of service?
- | Knowledge and information – What difficulties are there obtaining information about services offered, routes and schedules, or arranging trips? This would include telephone-based services, websites on the internet and signage and maps, including information at transfer centers.
- | Pedestrian access to destinations and transit – Are amenities missing that prevent or hinder people from traveling to and from transit stops, such as missing or damaged sidewalks, lack of curb ramps, etc.?

- i Other – Are there other gaps in transit or paratransit service beyond the categories listed above?

Gaps in the Bay Area

Spatial gaps

- | In some counties, public transit and paratransit services are limited or not available in outlying suburbs and rural areas

Temporal Gaps

Hours of operation

- | Transit service is often limited during off-peak periods when many seniors and disabled prefer to travel.
- | More frequent service is needed to avoid transfers and/or long waits and travel times.

Connectivity

- | Many trips require transfers between operators, which can be confusing to plan and difficult to complete.
- | Centralization of medical services is increasing the need for multi-operator trips.
- | Because supplemental services are often run by cities and community organizations, they are often not coordinated, have limited service available, and may be limited to travel within a city, or available only to a specific clientele.

Paratransit beyond ADA Requirements

- | Many users of paratransit cannot travel independently on paratransit. Without personalized assistance, paratransit may not be usable by persons who are particularly frail or subject to confusion.
- | Limitations on subscription travel can require frequent reservations, which can be difficult for some users.

Knowledge/Information

- | Information on the full range of alternative modes, including transit, paratransit, and community-based services, can be difficult to find or confusing, especially when seniors initially realize that they need alternatives.
- | Seniors' and disabled individuals' ability or willingness to use transit may be limited by inconsistent announcement of stops and confusing presentation of information (e.g. rolling destination signs, wrapped buses).

Pedestrian access to destinations and transit

- | Additional amenities, such as shelters and benches, are needed.
- | In some places, access to the transit system is difficult because of barriers (e.g., lack of curb cuts, inaccessible stops).
- | Even on accessible vehicles, accessibility features such as lifts, wheelchair securements, etc. don't always accommodate persons with disabilities, or do not accommodate larger wheelchairs.

Other

- | Despite reduced fares on transit, some low-income seniors and people with disabilities have difficulty affording transportation.
- | Some persons need training or assistance in using fixed route transit.
- | Small, federally funded agencies and volunteers that provide rides are limited by concerns about liability, rules about drug testing and allowable tax deductions, and difficulty recruiting volunteers.
- | There is a need for a range of alternatives to be developed and coordinated through DMV, public transit agencies, and senior centers to help people transition from driving to other transportation options
- | There is a need for integrated planning between programs serving persons with disabilities or older adults and transportation services.

Gaps in Alameda County

Spatial gaps

- | Cherryland (an area with a high concentration of board-and-care facilities housing seniors and people with disabilities) has a spatial gap in terms of transit service.
- | Residents of West Oakland need better transportation to medical appointments and grocery stores because neighborhood-based services aren't available.

- | Residents of the East Bay hills lack reliable transportation options—recent service cuts by AC Transit have eliminated some service in this area, which also has restricted availability of paratransit services.
- | Some medical facilities (dialysis centers) are not accessible by public transit/paratransit.
- | BART is generally considered to provide high quality of service, but serves a limited geographic area, and it is often difficult (and costly) to get to BART or get from BART to final destinations. BART is perceived to be the primary regional transit system, but it does not serve many communities, including the cities of Emeryville and Alameda. BART stations should be recognized as hubs, not just destinations, with increased efforts to provide easier and less costly transfers to local transit at both origins and destinations.

Temporal Gaps

Frequency

- | Older adults in West Oakland would like more frequent daytime bus service.
- | There is a lack of transit coverage with reasonable frequency in some East Oakland locations.

Hours

- | Older adults in West Oakland would like more bus service on weekends, at night and early in the morning.

Paratransit beyond ADA Requirements

- | Countywide, on-demand and same day service for medical return trips is the top priority for improvement.
- | Need additional capacity on city-based paratransit for non-medical trips, such as group and weekend trips (Central and South County).

- | Paratransit riders sometimes need additional assistance such as help carrying groceries inside house.

Connectivity

- | Paratransit service is difficult between cities. Passengers indicated that it is particularly difficult to arrange transportation between counties, not knowing who to call, and often finding that significant advance notice (up to 2 weeks, in some cases) is necessary to schedule a trip.

Pedestrian access to destinations and transit

- | Better facilities are needed for walking and wheelchair travel (sidewalks, street lighting, trees, stop signs, signals, etc.).
- | Sidewalks are lacking in Cherryland (the ADA limits AC Transit's ability to drop off passengers where it is not safe for them to walk).
- | Some senior riders have reported that the new AC Transit buses are more difficult to board.

Knowledge/Information

- | Need for improved consumer information about paratransit and other transportation options, including information in different languages (North, South, East County).
- | As noted above, passengers reported that it is particularly difficult to arrange trips between counties, with multiple phone calls necessary and not enough communication and coordination between service providers in different counties.

Other

- | Older adults in West Oakland need (1) more special services (taxi, van, shuttle, paratransit) for seniors & the disabled; and (2) neighborhood shuttle service that takes residents and workers to West Oakland

destinations (grocery shopping, BART, etc.) and to downtown, Emeryville and Jack London Square.

- | There is a lack of accessible taxis, particularly in Central County.
- | Older adults in West Oakland would like less expensive BART and bus tickets/passes.
- | Need for improved mobility for ambulatory and non-ambulatory consumers, such as through travel escorts (North, South and East County).
- | Need for home access improvements (North county).
- | Personal safety is a concern with public transportation and ADA paratransit (including safe waiting places for paratransit riders at destinations). Seniors and disabled riders feel that their safety is especially threatened because drivers are hesitant to enforce priority seating for them on buses with passengers who are unruly or threatening.
- | The cost of paratransit is problematic for low-income riders.
- | Seniors and disabled passengers reported being ridiculed by drivers and passengers, and even passed up by drivers, because they are slow to get on and off the bus.
- | East Bay Paratransit is highly valued and much appreciated. Passengers generally feel it is affordable, but many of them have also reported frustrating negative experiences with service, including not being picked up (or being picked up much later than expected), and being able to get to appointments but not being able to get home.
- | Seniors and disabled passengers indicated that emergency or other short-notice trips are the most difficult to arrange, due to advance notice requirements and limited ability to make last minute adjustments to schedules.

Gaps in Contra Costa County

Spatial gaps

- | Residents expressed a need for service beyond the three-quarter mile limit of existing ADA Paratransit service areas. There is a small but growing ADA eligible population residing outside the service area and the senior population outside the service area is growing at a faster rate than within the service area.
- | CCCTA has limited service to outlying areas of its service area .
- | Some medical facilities (dialysis centers) are not accessible by public transit/paratransit.

Temporal gaps

- | Hours – There is a need for evening service to the Concord Senior Center.

Connectivity

- | The distances from seniors' homes to transportation hubs is too far.
- | Six medical centers were identified as being frequent destinations for Concord seniors, and needing better direct transportation:
 1. County Hospital in Martinez – the main hospital for lower-income people or those with limited health insurance
 2. Mt. Diablo Hospital in Concord
 3. John Muir Medical Center on Ygnacio Valley Road – the main trauma center for the area
 4. Shadelands, a Kaiser Facility in Walnut Creek
 5. Kaiser Facility in Martinez
 6. Rossmoor Clinic for the elderly, in Walnut Creek.
 7. Four separate bus systems (transit districts) make coordination difficult, which makes it difficult for persons to use public transportation.

Pedestrian access to destinations and transit

- | Need better facilities for walking and wheelchair travel (stop signs, signals, etc.).

Knowledge/Information

- | Seniors and/or people with disabilities do not know about the full range of transportation options available to them.
- | Spanish-speaking residents identified language barriers related to the following:
 - a. Getting a driver's license
 - b. Getting transit information or publicity about LINK paratransit service and other specialized transportation options
 - c. Awareness about discount fares such as free fare hours for seniors on CCTA
- | Non-English speakers and non-verbal riders have difficulties using LINK paratransit service

Paratransit beyond ADA Requirements

- | Not all seniors or persons with disabilities are eligible for ADA paratransit service, but still have limited mobility and need transportation.
- | Paratransit riders sometimes need additional assistance such as help carrying groceries inside the house.

Other

- | Personal safety is a concern with public transportation and ADA paratransit (including safe waiting places for paratransit riders at destinations).
- | The cost of paratransit is problematic for low-income riders.

Gaps in Marin County

Spatial gaps

- | Access to and from West Marin (including communities such as Bolinas and Point Reyes station) is difficult, with limited or no public transit available.
- | It is difficult for Canal neighborhood (San Rafael) residents to take transit to medical facilities, including Kaiser Terra Linda and Marin General.
- | There is limited transit access to ferries from within Marin, to be able to take advantage of this regional transportation connection.

Temporal gaps

- | Weekend service is very limited or not available in some areas of Marin County.

Paratransit beyond ADA requirements

- | A key challenge in Marin County is maintaining service mandated by the ADA, with increasing demand for this service, while still providing at least a safety net of services to those outside of the ADA service area.
- | A number of senior housing facilities are located outside of the ADA mandated paratransit service area.

Pedestrian access to destinations and transit

- | Sidewalks in the Canal neighborhood in San Rafael have accessibility issues. Sidewalks are too narrow, and limited right-of-way is further blocked by vegetation, utility poles and fire hydrants (specific instances include Front, Medway, Belvedere, and Novato Streets).
- | Many intersections are missing curb ramps.
- | Cars are often parked across the sidewalk blocking the pedestrian right-of-way
- | ADA accessibility needs to be improved for bus stops.

Other

- | There is a need for more ADA accessible taxis.

Gaps in Napa County

Spatial gaps

- | Service is insufficient in and between American Canyon and other communities not located within the core service area (City of Napa).
- | Medical centers are far from senior communities and the trend is toward more regional facilities, which can require a trip across service boundaries.

Temporal gaps

- | Hours - weekend service is very limited or not available within Napa County.

Connectivity

- | Connections with other transit services are limited; more frequent service is needed especially within Vallejo, where connections to other parts of the region can be made.
- | Too often transfers between multiple systems (even for short trips) are necessary for ADA paratransit service.

Paratransit beyond ADA requirements

- | More flexible paratransit scheduling is needed.

Pedestrian access to destinations and transit

- | Transportation services and local streets are not designed to accommodate seniors or persons with disabilities. Sidewalks are in poor condition and there are no benches or other places to sit and rest.

Knowledge and information

- | Seniors and/or people with disabilities do not know about the full range of transportation options available to them.

Other

- | Low-income seniors and persons with disabilities need strategies to offset the cost of transportation to healthcare and grocery stores

Gaps in San Francisco County

Connectivity

- | Improved connectivity and fare integration is needed to transfer to regional transit and paratransit transportation services.

Paratransit beyond ADA Requirements

- | Support is needed for escorted trips for especially frail people who need a travel companion.
- | Increased coordination between transit and paratransit services is needed.
- | Patients traveling to and from hospitals lack affordable transportation service (other than ambulances).
- | Residents in residential care facilities do not have transportation services.
- | With capping of the taxi scrip program, same-day service is not available for many paratransit consumers.

Knowledge and Information

- | Seniors and people with disabilities are not aware of existing transportation services - there is a need for more education / transit training

Access to Destinations and Transit

- | Longer crossing times, upgraded signals and more visible crosswalks are needed, and increased driver education, awareness and sensitivity to pedestrian safety is also necessary.
- | Senior centers are not always accessible; difficult to find space to locate facilities close to transit, and locations that are close to transit can be on busy, hard-to-cross streets.
- | Pedestrian safety needs to be addressed at light rail crossings
- | Safety also needs to be increased at bus stops.

Other

- | Although transit service is more extensive than in other counties, there is a need for smoother, more reliable transfers.
- | People need help getting up and down steps of homes and apartment buildings.
- | There is a need for neighborhood taxi stands and taxi stands that are more accessible to destinations. Curb space can be unavailable for taxi/van drivers assisting passengers from the vehicle to their destination; they are not allowed to park in a blue zone.

Gaps in San Mateo County

Spatial gaps

- | There are relatively high concentrations of older people in areas that are difficult to serve with transit and are far from services and shopping. These neighborhoods include:

Areas west of I-280 in the Northern part of the county

Foster City

West Menlo park

Low density "hills" areas

- | Only six cities (Brisbane, Daly City, Millbrae, Foster City, Menlo Park and East Palo Alto) have community transit services to address the local needs of seniors and people with disabilities that are not met by SamTrans, Caltrain, or BART.
- | Transit and paratransit services are very limited in west county, towards the coast.

Pedestrian connections and amenities

- | In many areas, poor pedestrian amenities make it difficult for seniors or people with disabilities to walk (or go by wheelchair) to local stores and services. These conditions include missing sidewalks, poorly maintained sidewalks, a lack of curb ramps and medians, confusing intersections, and short crossing times for wide streets, etc.
- | Poor pedestrian amenities also make it difficult to access bus stops.

Frequency

- | Service is infrequent or not available when some seniors and people with disabilities need to travel – evenings, weekends, etc.

Paratransit service that exceeds ADA requirements

- | Some seniors and people with disabilities who live in areas with limited bus and rail service and do not drive are not eligible for ADA Paratransit (Redi-Wheels).
- | Some people with disabilities need personalized assistance (escort service) that is not available on Redi-Wheels.
- | Residents of the county's 26 Skilled Nursing Facilities have a limited level of mobility and need a higher level of service than is provided through existing ADA paratransit service.
- | Sometimes people with disabilities need transportation service on shorter notice than is currently available. Sometimes people have urgent needs for services before the ADA eligibility process can be completed (e.g. for hospital discharges).
- | Improved regional transportation services are needed, to San Francisco, Santa Clara County and beyond.

Knowledge and information

- | Language barriers make it difficult for seniors and adults with disabilities to use existing public transit services.
- | Comprehensive information about alternatives to driving is not easily available for seniors and people with disabilities.

Other:

- | There is limited assistance for seniors transitioning from driving to transit.

Gaps in Santa Clara County

Spatial gaps

- | South County has limited transit service.
- | Seniors in Gilroy would like more service within local neighborhoods.
- | Seniors in Gilroy would like improved connections to housing and shopping.
- | Persons living in the hills are especially isolated, far from transportation services.

Connectivity

- | Countywide, there is a lack of coordination between bus and light rail schedules
- | There is also opportunity for increased coordination among senior centers in the provision of transportation services.
- | County to county transit services and connections could be improved.

Paratransit beyond ADA Requirements

- | There is a need for escorted transportation (paratransit) for seniors, including those without disabilities.
- | Growing concern is seniors who are unable to use VTA or Outreach due to confusion, frailty, or language barriers for non-English speakers.

Pedestrian access to destinations and transit

- | Seniors in Gilroy would like improved pedestrian facilities.
- | Walking and travel by wheelchair can be difficult/dangerous on busy streets; crossing times are too short.

Knowledge and information

- | Language barriers make it difficult for non-English speaking older adults to get to where they want to go.

Other

- | Seniors in Gilroy would like more agency-provided rides to services, discounts on taxi services, a community helper/escort program and volunteer driver programs.
- | Seniors are often unable to use VTA or Outreach due to confusion, frailty, or language barriers for non-English speakers.
- | Physical assistance is needed for seniors to be able to board public transit.
- | Outreach (paratransit) is too costly for many seniors.
- | Same day urgent trips are not affordable.
- | Liability issues for volunteer drivers serving frail elderly must be addressed to make these services more viable and cost-effective.

Gaps in Solano County

Spatial gaps

- | Trips to obtain health care are the biggest challenge for the County's senior and disabled residents
- | Transportation for urgent same-day medical trips is a high priority
- | Dixon residents are concerned about paratransit service for health-care related trips for non-disabled riders (especially non-disabled seniors).

- | Medical transportation is difficult for residents of Benicia, Dixon, Rio Vista and Vacaville. Transportation to medical facilities is particularly difficult in the following locations:
 1. Dixon residents need improved access to medical services in Yolo County, including paratransit service to medical appointments in Davis.
 2. Rio Vista residents must travel outside Rio Vista to medical appointments, which can be difficult.
 3. Vacaville residents are in close proximity to Kaiser, but there are poor transit connections to the facility.

- | It is difficult to use transit to travel from outside Fairfield to the Fairfield Senior Center.
- | Rio Vista's senior and disabled residents would like additional transit service to Fairfield (on a day other than just Friday) and to the Pittsburg/Bay Point BART station.
- | A shopping shuttle is a high priority for senior and disabled county residents.

Temporal gaps

- | Hours – Additional transit and paratransit services are needed earlier and later during the day, and on weekends, especially Sunday.

Frequency

- | Buses do not run frequently enough (on weekdays or weekends)

Connectivity

- | Connections are difficult
- | Need to use multiple systems (even for short trips) on ADA paratransit

Pedestrian access to destinations and transit

- | Difficult to walk to and/or wait at stops
- | Desire for safer pedestrian crossings

Knowledge and information

- | Seniors and/or people with disabilities do not know about the full range of transportation options available to them.

Gaps in Sonoma County

Spatial gaps

- | The large size of the county makes it difficult to provide transit service.
- | There is limited or no public transportation in some of the rural areas of Sonoma County, including especially West County. Many seniors in West County (including Guerneville, Sebastopol, Forestville and remote coastal communities such as Sea Ranch and Cazadero) are physically isolated from needed services. Many are on fixed incomes and cannot afford to relocate and winters are particularly difficult periods of isolation due to power outages and flooding.
- | Sonoma County's natural boundaries present unique challenges for service delivery. Santa Rosa, as the urban center of the county, provides many health and social services, but access to these services from outlying areas can be difficult.
- | There is a need for increased bus service directly into neighborhoods so that people don't have to walk as far to catch a bus.

Temporal Gaps

- | Hours of operation - increased weekend, evening and holiday bus service is needed.

Paratransit beyond ADA requirements

- | It is difficult to make last minute reservations for paratransit service.

Pedestrian access to destinations and transit

- | Not possible for some persons to walk the distance to public transit stops.
- | Benches are needed at bus stops to sit on and wait.

Knowledge and information

- | There is the perception among some people that it is too difficult to navigate the bus system

Other

- | There is a need for more volunteer drivers and improved service, especially to serve areas outside of the current service area.

Appendix E. Public Comments

Public Comments by County

MTC Coordinated Public Transit – Human Services Transportation Plan

Below are all the comments collected from participants in Outreach meetings, through the web site, or phoned in, grouped by County and sorted by category. All comments are input exactly as worded, and all duplicates have been kept, but are sorted so they list consecutively. Where writing was illegible, the “best guess” was entered in angle brackets <x>.

This section will be completed following public input on the draft Final Report.

To facilitate organizing the large amount of information gathered, gaps were categorized under the following types: Connectivity, Facilities, Funding, Information, Organization, Other, Paratransit beyond ADA (PB-ADA), Spatial, Temporal, Vehicles.

Suggested solutions are denoted by a “-s” following the category.

Alameda County

Total people attending meetings: ~75

Comments from

- the web site with county of "Alameda" selected
- Alameda SRAC PCC Meeting, February 6, 2007
- Alameda County Area Agency on Aging Meeting, February 16, 2007
- Disability Action Network (DAN), Fremont Library Meeting, February 20, 2007
- City of Hayward Paratransit Program Meeting, February 16, 2007
- Livermore Amador Valley Transportation Authority, February 14, 2007

Gap Type	Comment
Connectivity	Provision of transportation on discharge from hospital
Connectivity	<A> big gap in service because hospital doesn't know what time discharge will be. Need free discharge transportation to home.
Connectivity	Regional trips are difficult – 2 week reservations needed for some transit districts.
Connectivity	Regional – accessibly at last minute, or one day in advance easier planning transfer to other systems.
Connectivity	At this time 11 & 14 busses turn from S. Livermore onto Pacific Ave. and then turns on Dolores. It would be easier and convenient to go to the end of Pacific Ave. (in front of Senior Complex) and turn around and pick up passengers. Also go to the end of S. Livermore Ave. & pick up Arbor Vista customers. More people would ride the regular Wheels buses if this were implemented
Connectivity	Make 11 & 14 do end of Pacific Ave, turn around and down Delores and continue on.
Connectivity	Need route pass through on Pacific Ave. to reach seniors to get to library services, etc. = maybe shuttles>>
Connectivity	Poor connections to BART
Connectivity	Coordinate bus schedules for inter-city trips
Connectivity	Low income clinics poor connections
Connectivity	Cross-town bus connections long transfer times
Connectivity	Would like to go to Burlingame without transferring two times each way.
Connectivity	Transfer points (e.g. BART)
Connectivity	No "dropped" rides at transfer points!!
Connectivity	Problems with cross jurisdictional/county travel (for Paratransit service)
Connectivity	Crossing between counties is difficult on Paratransit.
Connectivity	Reduce # transfers <on> – Paratransit.
Facilities	BART restrooms are <u>not</u> clean.
Facilities	Curb cuts <for people with> visual problems.
Facilities	Missing sidewalks <are a problem for people with disabilities and semoprs>
Facilities	Parking @ hospitals – parking & pick-ups
Facilities	Need for curb cuts
Facilities	Make the street sidewalks and curb cuts better so you don't have to get a ride
Facilities	Add-ons can cause delays that make riders late
Facilities	people need to be realistic in their expectations.
Facilities	Need some bus berths closer to station entrance alongside Iron Horse Trail north of station – southbound.
Facilities	Bus stops need more lighting
Facilities	More lighting needed at bus stops.
Facilities	Lighting along Pacific Ave.
Facilities	Springtown Blvd., no seats/shelters, poor lighting, (lots of seniors)
Facilities	Bus benches need to be restored where they have been removed.
Facilities	Lack of shelters & benches at bus stops.
Facilities	Contra Costa BART Stations are unsafe, especially at night. Sometimes there isn't an agent there
Facilities	Restore benches where they have been removed, to provide place to sit and wait for bus.

Gap Type	Comment
Facilities	Businesses close – you have to wait outside for Paratransit – sometimes in the rain.
Funding	New Freedom Funds are for <u>any</u> “public transportation alternatives beyond ADA” – <u>NOT</u> just Paratransit.
Funding	Should also point out how limited the amounts of new funding <are>
Funding	Cuts in transit may leave people without service where it <is cut>
Funding	No money, no I.D. –<“Goodbye” Janet> –very much trouble. No transportation <to> BART station – no money – bad area, go home!
Funding	Using per unit cost favors people who are easy to serve so include the cost of not providing the ride
Funding	Curb to <u>door</u> support
Funding	Paratransit too expensive.- \$1.75 each way - need for lower daily rate or discount for high quantities of tickets
Funding	Please don't raise Paratransit fee because it would be too expensive to visit doctor and hospital
Funding	The coming rate increase will make it so hard to those on fixed income. Their checks only go so far. I myself spend over \$30. a month going to church, shopping and doctors. I live alone and have no family at all that take me places. I rely totally on Dial-A-Ride. Increased rates will keep me at home with no way to get around.
Funding	Cost prohibitive for people who are very low income, making multiple stops for childcare, work, shopping services, etc.
Funding	Share vehicles by overcoming insurance issues, to save costs.
Funding	Para transit unaffordable
Funding	BART is prohibitively expensive.
Funding	Local service should not be reduced to fund express bus service.
Funding	and that no one knows what happens with their funding after 2009.
Funding	<\$ ok but hope doesn't inc. again too soon>. <Cost of Paratransit ok, but hope it doesn't increase too soon>.
Funding	Housing agencies' help <is> <focused> on low income; not good <advice> <service> for more middle class people who might need to relocate.
Funding	Cost
Funding	No Medicare/MediCal reimbursement system exists to cover the cost for people receiving dialysis several times a week.
Funding	Identify ways to increase efficiency of operations to make best use of limited funds.
Funding	Specialized transportation is expensive \$ on a limited budget.
Funding	Cost of Paratransit prices.
Funding	What will the cost be for any of the three area's?
Funding	Cost of all transportation adds up when we use it regularly.
Information	Need for improved information and in other languages.
Information	Information
Information	Communication
Information	Non-English / limited English speakers being able to access and use Paratransit service not just having info in other languages.
Information	511 does not work well – difficult to navigate – need more access to real people to talk to.
Information	Drivers improving but still earning appropriate pick-up points.
Information	Braille route numbers on benches
Information	Have “public services” officers e.g. Police, Fire etc. Promote public transit and become more public transit conscious.
Information	Have “Free Ride” days for School youth to “Hook them Young”
Information	Information needs to be made more readily available to people with language barriers.
Information	Train dispatchers so they can give drivers better directions
Information	Lack of Publicity
Information	Education needed about priority pick-up or drop-off time.
Information	Develop senior and other volunteer driver programs, with defined driver qualifications and efficient operations (to minimize costs).
Information	Need better oversight of drivers, and better methods to let management know about problems.
Information	Don't know where to get San Francisco disability pass that gives you discount on BART & MUNI.
Information	Who to report to when riders do not vacate seat (ask passenger to move).
Information	Better training (customer service, safety) for Paratransit drivers.

Gap Type	Comment
Information	Attendants: finding one is a problem, paying <is> a problem. Not being able to read materials.
Information	O & M <Orientation & Mobility> training Lions Rehab
Information	Housing managers should inform residents on shuttles
Information-S	Travel training needed for seniors & people with disabilities (group and 1:1); address specific concerns for low vision, deaf/hearing impaired, frail/mobility impaired etc.
Information-S	Riders need a one page cheat sheet that lists all of the transportation services available: Include: city based programs East Bay Paratransit/link.
Information-S	Bus information sporadic at BART stations
Information-S	Post schedules inside major shopping malls, churches e.g. Stoneridge, COSTCO and other private and public high traffic locations
Information-S	Improve navigation of 511 telephone system, especially for those with disabilities and language barriers, and make it easier to contact a live person when needed.
Information-S	Travel training for seniors and people with disabilities is needed to get them off of Paratransit when possible.
Organization	Maintain key service.
Organization	More services for youth with disabilities.
Organization	Driver shortage.
Organization	Difficulty recruiting, retaining & training drivers for small & large Paratransit operators (especially Class B Drivers).
Organization	Need for drivers of vans. How do we establish program to keep driver(s)?
Organization	Lack of vendors for quick repair of wheelchair lifts.
Organization	More taxis- & better dispatching.
Organization	BAC's <Hakin> has started recreational bus service
Organization	City programs are more limited
Organization	Hard for drivers to find rider. Rider finds driver. Driver can call cell <phone> of rider if <he/she> can't find <them>. Cell phone ownership <important>
Organization	Return trips difficult to schedule - need to coordinate better with medical service providers.
Organization	Staff and others making decisions about service should actually be using the service more often.
Organization	Eligibility
Organization	No systems set up for Non-English speakers and the disabled to get rides.
Organization	Need one person we can contact in case we have problems with Para transit or drivers of Para transit. Something needs to be done with dispatch – not dependable! (Paratransit - Dial A Ride)
Organization-S	Financial incentives for drivers that will provide the service.
Organization-S	Share training programs with other organizations, to save costs.
Other	Help riders be more pro-active, when possible.
Other	Use shuttle between Vineyard Village & Wal-Mart on Tuesdays, Nob Hill on Wednesdays BUT less use for Safeway on Thursdays
Other	<Janet> in vehicle – people inside had <u>gone home</u> . Dangerous <situation> – driver couldn't find <them>.
Other	Reduce price of taxi vouchers to support growing Senior population.
Other	Drivers not courteous.
Other	Special services for students?
Other	Bus drivers need to see that seniors and disabled are seated before moving vehicle.
Other	These needs youth with disabilities
Other	Service for Deaf Blind <is needed>.
Other	Inclusion of consumer in the evaluation rating process
Other	Ensure that all stake holders are included
Other	Ensure that all age groups of people with disabilities are included
Other	<Need for better> taxi services.
Other	Seniors need to meet with dispatchers for a discussion both ways
Other	H bad attitudes- I have observed at least 3 occasions – rudeness and non-compassion for the senior riders. I think employees, especially drivers, need training in TLC and being compassionate
Other	Some drivers have "crappy" attitudes (Some riders have reduced to tears by drivers)
Other	Livermore doesn't seem to be really interested in helping seniors

Gap Type	Comment
Other	Allow escort (or info about it "riders")?
Other	Medical return trips
Other	Medical appointments
Other	More available group trips.
Other	Improve safety for school kids.
Other	Reservations operators – some could be more courteous though some are great.
Other	Paratransit dispatchers should be more courteous and better trained. Drivers need better training to help disabled riders, and need to be more courteous.
Other	Escorts to assist seniors with shopping – doctor appointments – loading and unloading groceries.
PB-ADA	Group trips for Skilled Nursing Facilities & independent housing, & assisted living facilities and any group.
PB-ADA	Grocery <delivery> in house <taxi drivers> helps people with disabilities.
PB-ADA	Need for travel escorts.
PB-ADA	Designated Paratransit stops at frequented locations (medical facilities, colleges, etc.)
PB-ADA	Supporting senior and disabled mobility is important for their health (not just access to medical care, but also physical and social activity), and the health of the community.
PB-ADA	No wheelchair breakdown service in Contra Costa County.
PB-ADA	For people who don't look disabled, it is hard to get a space to sit down on transit.
PB-ADA	Riders/drivers should not assume that people do not have a disability. <Simply because they don't appear disabled>.
PB-ADA	Paratransit Issues
PB-ADA	Buses get too crowded, which prevents people with disabilities and seniors from getting a seat.
PB-ADA	Paratransit taxi <needed>.
PB-ADA	Outside ¾ mile
PB-ADA	Service hours should be expanded to later in the evening – local and regional.
PB-ADA	Shorter more direct trips <on Paratransit>.
PB-ADA	Taxi schedules are not adhered to <no AC Transit for an hour then two arrive at once>.
PB-ADA	Longer hours of operation in evenings and weekends.
PB-ADA	Senior Housing Sites in Livermore not connected to easy transportation (Costs drive location of senior complexes.)
PB-ADA-S	Service access (i.e. amount of trip needs & quick access to transport) for people awaiting ADA certification.
PB-ADA-S	Assistance to people that need to go beyond lobby areas, i.e. 10th floor of office building or doctor's office.
PB-ADA-S	Volunteers to go with people – high school clubs, church volunteers.
Pedestrian Access	Some areas with transit/paratransit service do not have sidewalks, including Maxwell Park and Simpson/Makolumne neighborhoods.
Pedestrian Access	Improve safety in areas surrounding bus-stops near senior centers.
Spatial	Need for bus service. No service to Cerebral Palsy Center
Spatial	Special Event: Alternative routing when special events are going on, i.e. <stores> parties – City of Hayward/Chamber.
Spatial	Designated dialysis service and other regular trips.
Spatial	Pacific Avenue, long walk to services from stop
Spatial	Need transportation directly to Civic Center and library
Spatial	Transportation to Our Savior Lutheran School
Spatial	Need direct bus to Civic Center = including the library
Spatial	Gardella Plaza, We need transportation to the Transit Center. WE would like a bus stop; that is closer.
Spatial	Gardella Plaza seniors need transportation services – shuttle or taxi vouchers.
Spatial	Out of area Kaiser service
Spatial	Can't get to Del Valle Regional Park
Spatial	No transportation from Gardella Plaza to transit center (only Para transit)
Spatial	Shuttle to churches from senior communities
Spatial	The AC Paratransit goes to Orinda BART. When it was very cold and I wanted to be let out at Safeway, I was told they don't go there – even though it is across the street.

Gap Type	Comment
Spatial	Often difficult to get to recreation sites, such as Chabot Science Center.
Spatial	Need better service to Oakland Hills.
Spatial	Could Emery-Go-Around stop on San Pablo?
Spatial	Can't get to P. Senior Center (Sunol Blvd.)
Spatial	Service to Hills (especially to support <u>social</u> trips).
Spatial	Can't get to Social Security and other basic support services in Hayward, only basic services provided in Livermore
Spatial	Gap in service getting to Sunol and Nob Hill in Pleasanton
Spatial	Hilly areas in El Cerrito that are not adequately served by public transit
Spatial	Need transportation from East Ave. to Apartments on Pacifica
Spatial	Future HOV lanes in median of I-580 should have direct access ramps at least to Hacienda Drive and the future SR
Spatial	84 (????) over cross
Spatial	City program bring into service area
Spatial	Busses from Livermore and Central via I-580 could leave freeway at Hacienda Drive, go to Dublin Blvd., enter station grounds berth north of station entrance, exit to Owens Drive, then Hacienda Drive and I 580 bound exit. Fit in with future HOV lanes.
Temporal	Driver <should> check itinerary with passengers & <have> ability to adjust.
Temporal	Medical return trips – Paratransit directly related to hours of bus/BART service.
Temporal	Highland Hospital is not being served efficiently / no dedicated pick-up point for return trips and timing issues <needs> more service coordination / provisions and procedures for hospital discharges <i.e.> information clerk assisting with discharge program.
Temporal	Difficult to transfer between AC transit bus routes, due to limited 2-hour transfer time.
Temporal	Medical Appointments in Martinez, Walnut Creek Palo Alto (Stanford and VA) take too long
Temporal	Doctor's Hospital San Ramon, Highland Hospital in San Leandro (Medical) take too long
Temporal	Dispatchers need to know true time of getting on and off and distances
Temporal	Information about where scheduled ride should have estimated time of arrival.
Temporal	Affordable same day device for wheelchair riders <is needed> (i.e. urgent care, emergency care).
Temporal	AC Transit often not on schedule.
Temporal	<u>Long</u> lead time to schedule regional trips between agencies.
Temporal	Last two months Paratransit not as responsible. Rider was so late he missed his class.
Temporal	Hayward: Same day service weekends as on weekdays. Area is well – served.
Temporal	Long waits for transfer from BART to bus.
Temporal	Organization of <u>scheduling</u> is poor sometimes, it keeps rider on vehicle too long. Have more direct trips.
Temporal	Being on Time
Temporal	Primary issue in dialysis is <when> the person <is> ready to go <their ride is not always there>. To do that on time performance is affected for other riders. Providers of dialysis don't know or care if transit is there for patients.
Temporal	Medical Gap: In an emergency while in your pick-up window going or returning, you need to go to the hospital but <you are> not provided with a ride home from the emergency clinic because of the same day rule. For Medical/Dental: Sometimes the appointment time extends beyond your pick-up time because of unexpected procedures <then> it is hard <or> impossible to get a return ride.
Temporal	There needs to be a clear time schedule for the rider, driver and dispatch. It will make trips run smoother and faster.
Temporal	No service on weekends and evenings, especially holiday and Sundays.
Temporal	Lack of public transit/Paratransit service on holidays, weekends and evenings.
Temporal	Same – day wheelchair accessible service <needed> throughout county.
Temporal	Weekend service for seniors to go various places <is needed>.
Temporal	Drivers – problem of not being able to find patient <when it is> time for return. If patient isn't ready, too bad!
Temporal	30 minute pick-up window is too long.
Temporal	Time spent taking public transit greatly exceeds that of driving.
Temporal	Service hours do not support times some people need to go to work.

Gap Type	Comment
Temporal	Scheduling ride home – difficulty. Could same company pick-up as drop-off? Generally good service.
Temporal	Weekday & Saturday transportation to Chabot College that starts in time to get to class by 8:00<a.m.>, leaves throughout the day – until 10:30p.m. – into the Hills (Hayward).
Temporal	Trips to emergency room without ambulance (and other immediate trips).
Temporal	Emergency wheelchair transportation service v. key-maintain.
Temporal	Safety improvements at <u>night</u> .
Temporal	Destinations to Tracy, Oakland, Walnut Creek take too long.
Temporal	Shuttles to BART too infrequent
Temporal	I live in Torrey Pine Way in Livermore and work at City Hall. I can ride my bike to work faster than taking the bus
Temporal	Later night schedules from Stoneridge Mall to all points in Livermore- Many lower income people subsidize their income with jobs ant eh mall.
Temporal	Regular late nigh service from BART to Livermore
Temporal	Timing of transfers between and around town to medical clinic. Need more flexible services for getting seniors to
Temporal	WE need BART shuttle to BART continuously from Livermore and back
Temporal	Need same day shuttle service!
Temporal	Seniors are left waiting often. This is very hard on seniors.
Temporal	Not enough time to spend at stores
Temporal	Fixed route to Kaiser too long
Temporal	6 a.m. Kaiser Appointments Return trips from college
Temporal	<Paratransit> same day service issues / meetings ending early or no time given. Same day exceptions for meetings and appointments ending early.
Temporal	Consistency – e.g. long wait, then two buses with no wheelchair lift.
Temporal-S	Explore extension of 2-hour transit time to ensure transfer still valid during longer trips.
Vehicle	Internet...
Vehicles	Care and consideration of the number and size of riders in sedan <should be given> to cause a more comfortable ride. A choice should be given of van or sedan.
Vehicles	Paratransit needs better equipment (rains inside some Paratransit busses).
Vehicles	All busses need to be better maintained. Wheelchair lifts don't work.
Vehicles	Often times <u>wheelchair lifts</u> are broken & rider waits for functional vehicle.
Vehicles	AC <Transit> bus drivers are reluctant to put lift stairs down or they claim that the lift is broken. They pull off before you have a chance to sit.
Vehicles	Need 2 busses round trip on 15 route.
Vehicles	BART, Paratransit and AC Transit not clean or dry.
Vehicles	Sedan floor mats are slippery especially when wet
Vehicles	Wheelchair users can't carry groceries on shuttle

Comments from the website

Gap Type	Comment
Connectivity	One of the biggest needs for the seniors I deal with is paratransit that will take people across county lines. It is necessary to understand that someone who lives in Antioch may be getting care at UCSF and may not be healthy enough to take BART and Muni to get there. I live in Alameda County and am a social worker for seniors, serving all six Bay Area counties.
Connectivity	There needs to be an easier way for residents to take paratransit from one county to another. Transfers can often be very confusing.
Connectivity	Dear Mr. Washington, I am writing you on behalf of BORP, Bay Area Outreach & Recreation Program. BORP provides sports and recreational opportunities for individuals with physical disabilities. I am writing you to support the idea of using a portion of the New Freedom Funds for innovative projects like the Ed Roberts Campus. The Ed Roberts Campus will create a one stop shopping type experience for the disabled community seeking services from a variety of resources. As such, the Ed Roberts Campus will be a very efficient way to deliver services to the disabled community. BORP will be managing an accessible fitness center at the Ed Roberts Campus as well as use the ERC as the starting point for our Outings and Adventure trips. Sincerely, Rick Spittler, Executive Director, BORP
Connectivity	The main problem many seniors and disabled people have with current paratransit systems is that they often won't take people across county lines. This requires people to transfer from one form of transportation to another and/or wait for another paratransit vendor to pick them up at a transfer point. This makes trips very long and sometimes impossible. Given the make up of the Bay Area, people often get services somewhere other than in their immediate area. Second, there needs to be a debit card approach so people don't have to pay separately each time they change forms of transportation. A one card fits all would be helpful. Third, people are often stuck in their homes because they cannot maneuver down stairs or need someone to knock on the door to pick them up. A paratransit system that will do door to door service is necessary for people with disabilities and/or hearing loss and/or frailty. Fourth, each town as well as each county has funding for little programs that no one knows about. There should be a central registry of all subsidized programs where one can look to see what is available in a given location. As a social worker, I do not always have the information to give clients and I know that clients don't know where to begin to find out what is available.
Facilities	My name is David. I'm taken Bart to School every weeks. I think that there should be extra elevator because I'm using a wheelchair. The elevators becomes smelly and many times broken down. Especially the elevator at the Embarcadero station. I see the same dirt previous day, does anyone bother clean this up?. Why it so hard to get buy Muni ticket? I mean I had to go to different agents before someone actually point to the right place. Many time I rode the bus, either in Eastbay or San Francisco some bus drivers don't know how to secure the wheelchair down. I think that all drivers should be training to secure the wheelchair on the bus. The drivers are good people. Even though they (I think don't have proper trained) tried to secure the wheelchair down. Many time some of them don't even know how to use the equipment. Two years ago, at the Daly Bart station, the bus driver. She was a friendly person. She tried to use the wheelchair lifter. She pressed every buttons. I know she did not know what she was doing. Luckily another bus, I went to the second bus. The lifters many times broke down a lot. I have to wait for another bus
Organization	As a Social Service Coordinator in Senior housing seniors come to me for assistance in getting paratransit...the process is not easy to discern. County and City and Bus and/or Taxi Vouchers...and one who has had them for 15 years is asked to reapply...coordinating is difficult without an overall picture of transportation and options.
Organization	I am a Medical Social Worker and encounter a variety of individuals with transportation needs. One major issue I have observed is that there is a 21 day waiting period after submitting an application for paratransit (East Bay Paratransit) and being eligible for the service. While I can understand the reason for this, it puts individuals who have become unexpectedly disabled at a significant disadvantage. It seems like this waiting period could be shortened and/or the service could be initiated while eligibility is being verified (i.e., give the individual the benefit of the doubt). The paratransit services are not that convenient that would make them

Gap Type	Comment
	<p>so desirable as to have "able bodied" folks abuse this. Often when a person has something unexpected happen they may have critical medical appointments within this 21 day period.</p> <p>There are paratransit services at the city level which often are set up to assist with the cost of paratransit or can "fill the gap" during the 21 day waiting period. However the application requirements and specific service varies widely among municipalities. Additionally, one particular city (Berkeley) requires a great deal of documentation as part of the application which is often very difficult for an individual who has become unexpectedly disabled to procure.</p> <p>Essentially it is quite difficult for a disabled person to complete these applications without additional support; and those with limited support are often the people who need such services the most.</p>
Organization	<p>Sometimes the processing of paper work is extremely long to access services. If there was a way help shorten the process it would help more individuals to use the service.</p>
Other	<p>Our Deaf seniors in Fremont Oak Gardens do not have quality transportation. Service for the deaf is totally overlooked.</p>
Other	<p>The Computer Technologies Program would like the New Freedom funds to be used in the SF Bay Area region for projects such as the Ed Roberts Campus, at the Ashby BART station.</p> <p>CTP, one of the partners of the ERC will offer employment training and services for people with disabilities. Accessible transportation for our students and staff with disabilities is such a high priority. CTP also relies on volunteers from bay area business to assist us in finding successful job placements for our students. This transit hub will be convenient, attracting more volunteers. CTP expects more student enrollment due to accessible public transit and easy access to other services.</p>
Other	<p>What will the cost be for any of the three area's?</p>
Other	<p>Being disabled, I use cycling, AC Transit, BART and sometimes Union City Transit to get to get to work. (I substitute teach at various locations there.) I would like to provide in-depth input to your survey, but feel I would need to know more about the current services offered, the assessment of needs (including instruments of measurement--or is this survey the primary tool?), priorities for change, and what strings may be attached to the funding. Also, please explain what is meant by using the plan to leverage for additional funding. With that knowledge, I feel I can provide informed feedback worth using</p>
PB-ADA	<p>As a social worker working with disabled adults and the elderly, I have found dissatisfaction with the current Paratransit services that are available in Alameda County. The primary reports that I hear from clients are related to 1) reliability - they often report missing appts. and waiting hours to be picked up for the return trip 2) cost - currently the service costs more than a bus. After working in SF Co., I believe that Alameda County residents would benefit from having taxi scrip which would allow them to use mainstream taxis at a reduced cost. This would at least address the reliability problem. In regards to the cost, I believe that the Paratransit vehicles should not cost more than a normal bus trip. Alternatively, Paratransit could sell a monthly "pass" - perhaps with a capped number of rides a month? This would allow individuals on a fixed income to budget for the month. Frequently I find that clts at the end of the month don't have the money they need for Paratransit services.</p>
PB-ADA	<p>I would like buses that have lifts for people who use walkers - people such as myself. AC Transit's new Van Hool buses only have ramps in the middle of the bus and they have to be activated by a hand device used by the driver. Furthermore disabled passengers have to sit in the MIDDLE of said buses.</p>
PB-ADA	<p>Re: Paratransit. Make it more welcoming to disabled riders. There are many potential riders who need to be encouraged with free ride days, first rider days, minimal waits for the van (always), respectful and courteous drivers (always). Thank you</p>
PB-ADA	<p>The Tri-City area of Union City, Newark and Fremont were able to create a program for qualified elderly and disabled people to have a volunteer escort go with them to the grocery store or a doctor appt. when riding paratransit. This is a huge unmet need in other parts of Alameda County as many people are able to ride paratransit alone but need a little bit of help to maneuver their wheelchair once they get to the doctor's office or carry some groceries and help them get through the check out line at the store. Also, paratransit is serving many, many people but a lot of riders have unreasonable lengthy waits for their drivers and have reported that in some instances the drivers don't show up at all.</p>
Temporal	<p>As a Social Work Intern, I work with the disabled and frail elderly in Alameda County. Some of my clients experienced excessively long waits and rides with paratransit. Additionally, your collaboration with City Planning to develop communities with doctors, pharmacies, grocery shopping and senior housing within the</p>

Gap Type	Comment
	same mall or block would greatly aid the mobility impaired. Locating such communities near BART or a public transit hub would expand the world of the disabled.
Temporal	Destinations to Tracy, Oakland, Walnut Creek take too long.
Temporal Other	<p>I see the following problems with Alameda County Paratransit: *Operators that schedule the rides only speak English</p> <ul style="list-style-type: none"> *Poor customer service, don't have a lot of patience *program is not set up to meet the needs of seniors with dementia *the waiting period to be picked up is too long * it takes about 2 hours to go from Fremont to Oakland and another 2 hours to return--that's too long

Contra Costa County

Total people attending meetings: ~78

- Contra Costa County Public Authority for IHSS, January 16, 2007
- Contra Costa PCC, January 22, 2007
- One comment from the web

Gap Type	Comment
Connections	Connections – timely – more busses waiting for connections when disabled
Connections	Connections are a problem should be able to be picked up and taken to destination - Not go through hub and then ???? to get a 9:30 – I will be picked up @ 8 and I can't get app.'s <usually> until 9
Connections	Connections difficult
Connections	Transportation hub far from home, shuttle service needed
Connections	Transportation hubs too far from home Need shuttle service to connect with med appt's, chores, etc.
Connectivity	¾ mile minimum w/ in 8VC areas
Connectivity	Crossing service area paratransit connections
Connectivity	Difficult to cross county
Connectivity	Gaps in transfers when more than one service involved
Connectivity	Make transfer between service areas/providers easier
Connectivity	Multiple transfers necessary.
Connectivity	Transfers are not synchronized
Connectivity	Transfers can be a problem
Connectivity	Transfers not well timed
Facilities	Convenient bus stops
Facilities	Covered bus stop at San Pablo Ave and 23rd Street West County
Facilities	Handicapped parking issues esp. at medical facilities. Not enough handicapped spaces
Facilities	Innovative use of technology ex.. Smart elevators
Facilities	Lack of infrastructure in East Co.
Facilities	Marsh Drive Bus stop North Concord
Facilities	Need for more fixed route stops
Facilities	No bus stop near Markham Nature area in Concord. – Cowell Rd.
Funding	Fare structure 50Cents one / free/ ./ \$1.50/ \$ 3.50 confusing and out of reach
Funding	Finding a cost effective way to provide public transit in low density areas.
Funding	Funding Need to identify all funding sources (not just public transit \$) and all options now on the street (CBO, Human Services, Volunteer, Non Profit, faith-based)
Funding	Funds to subsidize taxi for cities
Funding	Lack of funding to create a robust public transit system
Funding	Link is too expensive
Funding	Para Transit \$ too expensive
Funding	Para Transit too expensive in Central County
Funding	Please take a look at Medicaid brokerage programs, Seattle-King co. has one that covers the State of Washington, I don't believe CA has one.
Funding	Poverty level person have no funds to afford paratransit Affordable car sharing

Gap Type	Comment
Funding	Users should be reminded of the cost (full cost to the tax payer)
Information	911 responders do not include significant others – must follow using public transportation
Information	Complicated to understand prices of multiple para transit agencies
Information	For people who go to dialysis without a companion – the driver will go in and push up the patient. This is good.
Information	Hard for blind people to identify houses and bus stops
Information	Lack of knowledge about how much money is being spent by social service agencies and “non transit” organizations on transportation for their clients/program enrollees and how to better utilize these resources
Information	Perception of transportation – educate public transit riders
Information	Seniors who have never used public transportation have real concerns/fears of unknown
Information-S	Need a county wide travel training program with \$
Information-S	Need more travel/mobility training to get more people on busses if they can
Inter-County	Alternatives to 911, especially in East C C
Inter-County	No incentives to cities to include transit in growth plans – too many cul-de-sacs, walled communities, wide arterials, low density housing, lack of mixed use (no sidewalks/bike lanes) discourages pedestrians= transit
Organization	Affordable car-sharing
Organization	Coordinate volunteer programs
Organization	Need a mobility management center
Organization	Need for coordination between systems including smaller programs
Organization	No evaluation plan for emergencies
Organization	Solution: Volunteer driver program
Organization-S	Need a county wide mobility management/brokerage to coordinate resources
Organization-S	One size does not fit all! What about volunteer driver programs. (They need financial and human resources)
Other	Clinic or hospital pick-up of individuals with appointments
Other	Coordinate 911 – doesn't serve all elders in need
Other	Fixed route drivers insensitive to disabled riders; insufficient regulations ensuring policy
Other	Medi-cade Brokerage Program
Other	Safety from crime is an issue in some areas- especially at night
Other	Safety Issues
Other-S	City Planners need to require new developments to include public transportation
PB-ADA	Coordination between paratransit systems
PB-ADA	Why can't operators cross lines w/in region, keep track + reconcile at end of year who owes who what?
Pedestrian access	Bus stops with pedestrian access
Pedestrian access	Curb cuts East County
Pedestrian access	Curbs West County
Pedestrian access	Inaccessible bus stops East County, South County
Pedestrian access	Need for countdown signals
Pedestrian access	Need sidewalks and other pedestrian improvements
Pedestrian access	No sidewalks East County
Pedestrian access	Overall issue of barriers to path of travel for wheelchair users.
Pedestrian access	own/subdivision planning, Universal accesses sidewalk design, “garage scape” Houses built without sidewalks, Without building community
Pedestrian access	Pedestrian overpasses, sidewalk barriers and maintenance issues

Coordinated Public Transit/Human Services Transportation Plan • Elderly and Disabled Component

METROPOLITAN TRANSPORTATION COMMISSION

Gap Type	Comment
Pedestrian access	Poor sidewalks
Pedestrian access	Telephone utility poles as barriers, need more curb cuts
Pedestrian access	Traffic issues impacting pedestrians at crossing
Population served	Lack of inclusion of everyone who needs transit = not just E & H What about the low income mom with 3 kids and no car? Why should E&H get better / worse?
Spatial	Bus connection to Manteca from East County
Spatial	difficult in getting to Alta Bates Hospital in Berkeley on public transit – too many transfers
Spatial	East County – “Getting services over the hill
Spatial	Getting Seniors “over the hill” East County
Spatial	Have to transfer from San Pablo to Pinole
Spatial	John Muir Orthopedic Hospital – no bus stop nearby – must use paratransit
Spatial	need to transfer between East County (Pittsburg) and Concord (Central County)
Spatial	Need transportation to Wal Mart in Pittsburg
Spatial	San Ramon Medical Center South Center
Spatial	Severe problem in accessing public transit for Kaiser-Oakland and Richmond and Doctor’s in Pinole.
Spatial	Very limited services to the Delta region
Temporal	Busses don’t run often enough East County
Temporal	East county needs evening transportation for events
Temporal	Emergency transportation
Temporal	Excessive trip time paratransit (2hours)
Temporal	If trip is too long for any reason it can be difficult for people with disabilities
Temporal	Lack of public bus services evenings-holidays-Sundays
Temporal	Length of time or wait
Temporal	Multi appointment of client is expensive and taxing to client . Need a door to door accommodation that is not costly and also time saving
Temporal	Need 380 and 387 on weekends East County
Temporal	Need bus more often than once an hour
Temporal	Night and weekends Central County
Temporal	Night time events in Antioch and Pittsburg
Temporal	On Demand Taxi for “emergency” needs
Temporal	On medical appointments – if Dr. doesn’t see me in time – the <????> will come + push me up + can’t wait for me
Temporal	Richmond often doesn’t have same day service available even though it used to
Temporal	To get to AC meeting at Martinex – must take bus + Antioch BART – BART to Concord the bus from concord to Martinez takes 2 hours
Temporal	Transfer times too long
Temporal	We need weekend service We need shuttle service between Dr’s office + hospitals
Vehicles	Accessible taxis
Vehicles	Need for wheelchair accessible taxis
Vehicles	Wheel chair tie-downs not always in operation or drivers not knowledgeable to use the tie downs
Comment from the web	In some areas DIAL-A-RIDE used to transport only WITHIN cities, leaving ill seniors sitting at the city boundary, waiting for cabs to complete their journey. Also, the public transportation commuters need to be able to arrive at work promptly. Can realistic schedules be devised? While I live in one county, I work in another; as many public transportation commuters.

Marin County

Total people attending meetings: ~27

- Marin PCC Meeting, February 12, 2007
- Marin Indoor Sports Club (ISC), January 13, 2007
- Comments from the web site with county of “Marin” selected
- Input from the Marin County Transit District

Gap Type	Comment
Connectivity	Bus service to ferries to coordinate with ferry service
Connectivity	Ferry & buses don't always connect time-wise.
Connectivity	Lack of transit to the ferry terminals from all areas of county. Sol: increase accessibility for pedestrians & parking at Ferry Larkspur terminal
Connectivity	More transfers than before – used to be fewer transfers.
Connectivity	Poor bus connections to ferry
Connectivity	SMART with ferry service; weekend service; more frequency of bus routes (1/2 service)
Connectivity	There is no seamless system
Facilities	No place to sit/no protection from elements
Facilities	The attendee has filed a law suit against the Town of Ross because of the lack of curb cuts and ramps.
Facilities-s	Make up one bus stop standard that will be used @ all stops > mirror image of bus stop @ GGB Golden Gate Bridge
Funding	Funding shortfalls: Not enough for fixed route and paratransit. Protection for spillover revenue (state budget)
Funding	Proposition 8 money is not being used properly
Funding-s	*Use unused vehicles to fill “gaps”—problem is insurance.
Funding-s	Auto donation to rides service in exchange for rides for life
Funding-s	Co. could supply fuel for volunteer drivers
Funding-s	Consider funding for a countywide mobility manager who would work to improve the flow of information and problem solving regarding mobility issues.
Funding-s	Coordination among providers to share vehicles/insurance issues—need policy change (umbrella?)
Funding-s	Cost-reduction strategies (i.e. gas cards co.-insurance)
Funding-s	Develop better service through measure A funds
Funding-s	EJ Grants, CalTrans MTC > TOD to help out Marin Coty not only Canal
Funding-s	Free transit for seniors/disabled during non-peak hours
Funding-s	Fund Intelligent Transportation Systems (ITS) improvements such as automatic vehicle location (AVL) and other technologies that would assist with trip information; trip planning; paratransit reservations, scheduling and dispatch.
Funding-s	Funding for travel training programs for seniors and disabled who can use fixed route transit
Funding-s	Funds to subsidized fares/voucher administration
Funding-s	Gas tax transportation \$ spillover funds – (\$617 million) proposed to be diverted
Funding-s	Hospitals & dialysis centers need to provide transit for patients. Sol> Medicare—bill them!
Funding-s	Increase funding for fixed-route transit so that routes can be expanded or added that can serve locations where there are more elderly and disabled riders
Funding-s	Increase funding for paratransit service
Funding-s	Increase funding for paratransit vehicles – lower the local match required
Funding-s	Lrg % of pop that can pay for serv.

Gap Type	Comment
Funding-s	Need \$ for gas cards
Funding-s	Need for umbrella insurance policies so existing services can cooperate with each other, share clients, use volunteers
Funding-s	Subsidized taxi fare for ill or disabled people (Novato)
Funding-s	Suggestion: Marin Co. self + insure like SF
Funding-s	Suggestion: talk to Garamendi -MCTD has covered vehicles But too expensive to do all.
Information	Small # programs assisting seniors & disabled & <u>the ones that are available are unknown.</u>
Information	The available <programs that assist seniors and disabled> are unknown.
Information-s	Fund senior driving training to increase driver safety as well as assistance to those who have lost their licenses
Information-s	Improve transit information including visual aids – kiosks and wayfinding signage
Information-s	Information re: shuttles—PR/mktg of transportation services -more targeted mailings
Information-s	Need “targeted mailing” to people who would use the various programs
Information-s	Need <travel> training for seniors & disabled
Information-s	Provide training for taxi drivers about working with seniors and provide monetary incentives for those drivers and owners to participate in taxi programs.
Inter-county	Can't get to MTC meetings in Oakland from Marin County. Driving it's 45 minutes. On the bus, Terra Linda to central SR, the 40 to El Cerrito, then onto BART to Oakland. No straight route.
Inter-county	Whistlestop will take him to MTC, but E. Bay Paratransit will not bring him all the way home. Goes to El Cerrito / del Norte.
Organization	Board or Commission for taxis Marin made up of public not agencies
Organization	Communication gaps between <illegible> paratransit services—especially <S.Rosa> & East Bay
Organization	If Marin CIL is not providing adequate service, people can call CIL in Berkeley and get service.
Organization	Lack of coordination among paratransit services.
Organization	There are four different agencies in Marin – Marin DPW, which oversees the Marin County Transit District (MCTD) and Transportation Authority of Marin (TAM), and then Golden Gate Transit (GGT). All these agencies mean inefficiencies, diversion of funding, and non-transparent planning.
Organization	too many residential facilities w/o ability to fund own transport depend on paratransit. Sol. Need their own vehicles or share vehicles w/other facilities and all resources available
Organization-s	(Seattle, Kings Co.) Use retired PT vehicle - receiving agency provide % age of trips to donor's clients
Organization-s	Allow San Fran, Oakland, Berkeley, etc. taxi co's vie for Marin County permits.
Organization-s	Increase volunteer transportation programs
Other	City of San Rafael prime lead example for county to follow!
Other	Drivers need better training, they drive around lost.
Other	Look for a way to offer transportation for developmentally disabled on an immediate need basis—sudden illness—no time to arrange days ahead with Whistlestop.
Other	Other: Too many studies, too much <bureaucracy>.
Other	Transit time is still too long for frail <&> chronically ill elderly to use paratransit services.
Other	What happens in xx <times> of emergency
Other-s	Carpool programs for seniors
Other-s	Have a volunteer org. who asks “public” to use their own car(and insurance) and volunteer to transport seniors, etc. for a certain period of time
Other-s	Increased bus stop & more frequent stops (Novato)
Other-s	Jitneys on a micro-business/self-employed basis

Gap Type	Comment
Other-s	Long commute times on transit—heavy traffic commute hours—Solution: 1. <buses> on highway shoulder. 2. multimodal transit—rail & trail
PB-ADA	Disabled folks not certifiable
PB-ADA-s	need Community shuttle service for non-drivers (transit-dependent)—for “out-of-range (beyond ¾ miles) seniors, disabled & other non-drivers
PB-ADA-s	Community shuttle service—transit dependent/general purpose addition capacity for ADA and senior paratransit service (beyond ¾ mile, evenings weekends)
PB-ADA-s	Extend Marin County mandated ADA to <u>two</u> miles from fixed route (or more). Just consider a wider profile.
Pedestrian access	<Ped> limits to ASA access on Sidewalks No sidewalks
Pedestrian access	I live in Tam Valley, right off Shoreline Highway; just up a steep hill @ a blind corner. The hill is too steep for wheelchairs to navigate without zig-zagging. Wheelchairs cannot be seen by drivers turning onto my street. There is no crosswalk at my corner. There is no sidewalk on the north side of Shoreline Hiway. There is not a usable (full-width) path of access from Pine Hill to Tam Junction on the South Side of Shoreline.
Pedestrian access	In Novato, ½ block from City Hall, De Long Ave., north side, the sidewalk ends, then there are 3 utility poles in the dirt. Completely impassible by wheelchairs. <See our photo library for stop# 699 - VT>
Pedestrian access	No sidewalks <limit ADA accessibility>
Pedestrian access	On Civic Center Drive, east on N. San Pedro, several ramps have utility poles placed in the ramps. < See our photos for stop # 599; may be fixed by now >.
Pedestrian access	Sidewalks: not enough funding available. not enough staff to enforce current laws
Pedestrian access	There are no sidewalks in Tam Valley. The bus stop is over 3.4 mile away, so paratransit won't come up that far.
Pedestrian access-s	Improve pedestrian and disabled accessibility with improvements to sidewalks, walkways, intersections and bus stop improvements.
Spatial	Can't get to the ferries on fixed-route because there are no workable shuttles to the ferries.
Spatial	Cannot get from S. Marin (Mill Valley) to Marin General as they used to on the old route 211. You have to take the 29 north to San Rafael, then come south. It's a 2-hour trip.
Spatial	No public transit to get to public meetings.
Spatial	North bay taxi-wheelchair service is good—hope it is inter-county
Spatial	Spatial Gaps: limited ferries—not enough—& lifts break down
Spatial	There is no direct fixed-route to College of Marin as there used to be (the old 1)
Spatial-s	Amen to limited shuttle routes—how about partnerships between MTA & various cities/counties. Buses go down major N/S routes, shuttles/jitneys go E/W.
Spatial-s	Community shuttle service for non-senior, non-disabled, people who do not drive (transit <illegible>) (Novato)
Spatial-s	Services should be provided door-to-door, not curb-to-curb. Whistlestop Wheels does this.
Temporal	Additional capacity for ADA and seniors paratransit—increased hours & weekends (Novato)
Temporal	Fixed route transit takes too long. For example, from Terra Linda to Greenbrae is over an hour on the bus on weekends (about 10 minutes by car). It takes too long to get anywhere if you actually have to run your life.
Temporal	Fixed-route used to be usable, is no longer. Whistlestop takes too long.
Temporal	Golden Gate needs to drastically increased hours seven days to Marin General for all people regardless of income level or where they live. (Marin General Hospital)
Temporal	I am the one who broke the barrier against having people using wheelchairs as ushers at various theatres, & the Opera House & Davies Hall in SF. Now, because of limited evening svc of <Golden> Gate Transit <to>, I can no longer take paratransit to see any performance, much less usher!!! What a good example I am!!!
Temporal	Lack of bus service to Marin General Hospital Patients get turned loose when buses are not running No Sunday service

Gap Type	Comment
Temporal	Limited ferries
Temporal	Redo local bus times to meet all ferries
Temporal	Temporal Gaps: What emergency transportation services are available (i.e. Louisiana-style problem)
Temporal-s	Emergency transportation esp. same day
Temporal-s	Greater frequency & local service more than 1x per hour
Temporal-s	There are no mid-day shuttles on N. San Pedro to get people to central San Rafael transit center. If there was a mid-day shuttle, then all those people in the convalescent homes and senior housing on that street could get paratransit.
Temporal-s	A continuous bus system running 24/7 through out county of Marin
Vehicles	Accessible car-sharing
Vehicles	Gaps <in> Marin. Not enough accessible taxis subsidized! Solution: taxi ordinances to require cab companies to provide accessible taxis
Vehicles	Have insufficient equipment, insufficient tie-downs. Are in bad repair and are "filthy". Drivers wear filthy uniforms. (E. Bay Paratransit)
Vehicles	Not enough accessible taxis; 2 accessible vehicles, i.5 trained drivers.
Vehicles	Programs assisting seniors & people with disabilities lack "accessible" vehicles.
Vehicles	This project has been "under study" for almost 10 years & no accessible taxi svc has really gotten off the ground
Vehicles-s	Increase accessible taxi services – more funding to purchase vehicles

Comments from the website:

I am a care manager for the Marin MSSP program. All of my clients are elderly, low income and have multiple health problems. For the past approximately two years, I repeatedly have gotten bitter reports from my clients as to the poor service of the Marin Whistlestop Wheels. Common complaints are that they have to ride for very long periods of time while other passengers are picked up or delivered to their destinations, that the van arrives earlier or later than planned, that WW calls at the last minute and changes the time. The most common complaint is that, following the medical appointment, the client may wait up to 2 hours for the WW van to arrive to take them home. Our program often ends up having to pay for taxi rides, which are very expensive, as our clients cannot tolerate the long rides and the long waits for the WW van.

I am a Care Manager with the Jewish Family and Children's Services in Marin County, San Rafael. In my caseload I have many disabled adults, between the ages of 18 and 95, with a variety of disabilities, including walking with a cane or a walker to being wheelchair bound. These clients have many transportation needs, from medical appointments to grocery and other shopping, to therapy appointments and socialization opportunities. They often live far from family members, and the available transportation options are mostly limited to Whistlestop and Drivers on Call. Neither of these services are a viable way for them to get their transportation needs met: Whistlestop often adds between 3 and five hours of waiting/driving time to their appointments, which makes the length of time they have to be out in community too long for them. Along with their outward appearance of disability, there exists a great inner weakness, a loss of physical and mental stamina that renders them homebound, unable to withstand a seven or eight-hour outing. Taxi service is expensive, and for some impossible, both financially and practically, as the taxi will not accommodate an electric wheelchair. Public transportation presents the same difficulties.

What is needed is a service which can provide more rapid transit from their homes to their appointments. This will require a greater number of wheelchair accessible vans than Whistlestop is providing. What is also important to note is that Whistlestop drops the client off at the entrance to their doctor's office, and many cannot open the door, nor do they have the mental capacity to remember where in the building the doctor's office is located.

For these people it is very important that someone accompany them all the way into the office. Then, as the weather may be cold or raining, they should not have to be waiting out of doors for pick-up. Perhaps a vibrator, such as is used in restaurants would be helpful for them to be notified that the bus or van has arrived.

Thank you for helping the disabled and infirm members of our community.

How much will it cost the taxpayers to get Nelson Nygaard to go away, paying them to do something has not worked. From non accessible meetings, to policy development like the accessible taxi's that is thirty years out of date to hiring Connie Sorter whose work has ensured poverty for thousands of people with disabilities. The company is for ever studying which means nothing is ever done. We did focus groups independent of public funding years ago and it is still the same, only worse. The money spent on this could actually be used to help people instead of continuing to ask the disability community to sacrifice its ability to get to work so a few policy leaches can make a living studying how they are going to. It would not be so sick if Nelson Nygaard led the way in better benefits so we can eat while they make money studying us forever.

We need accessible taxis and a transit system that has reasonable headways so you can actually use it to get somewhere during a day. Trips on public transit take far too long because of too many transfers, long wait times, attrition of service or no service to some areas. Same is true of paratransit. They don't serve those which public transit doesn't serve. That locks alot of people living in outlying areas access to public transit, particularly if they are elderly, poor or disabled or for some other reason cannot drive. Their only choice is to hitch hike out of those outlying areas if their cars break down or they can't call a friend or neighbor or they have to go somewhere and can't drive. This really needs to be rectified, and soon. We have passed measure A to improve our transit system, and yet I have seen no improvement at all!! Instead, more cutbacks are occurring and the whole situation is truly outrageous!!

Napa County

Comments from the Napa PCC Meeting, February 7, 2007 (~15 people attending). There were no other meetings in Napa, and no comments from the web.

Gap Type	Comment
Connectivity	Amtrak bus goes to Martinez where he wants to go, but won't take him unless he has a train ticket. Even when he does, not all of the Amtrak buses are wheelchair-accessible.
Connectivity	Connections to Vallejo need to be improved; also connection to the mall in Fairfield.
Facilities	Public (not staff) bathrooms at the bus station
Facilities	Some facilities are not accessible, and the only way a person can access, i.e. Napa Valley College, is with a personal attendant.
Facilities	Street problems need to be addressed to each <u>city</u>
Information	More funds for outreach; mailers with bus routes, maps, info for entire Napa County
Information	Weekend service is available, however, many seniors are not aware or they choose not to use the services on the weekends.
Other	At capacity, especially at peak times.
Other	Community-based programs rely on subscripive trips for access to their services.
Other	Policy / accessibility that reflects Olmstead decision for keeping people in the community.
PB-ADA	Service lacking in all communities are – non-ADA trips for elderly. Transit-dependent elderly who are <u>not</u> disabled have unmet door-to-door services.
PB-ADA-s	NCTPA is acquiring new software, Trapeze, that will assist in filling gaps
PB-ADA-s	NCTPA is instating a new no-show policy that should free up seats.
Pedestrian access-s	The VINE consumer advisory committee (VCAC) has a subcommittee that has selected many parts of the county that need bus stops and shelters.
Spatial	(and cost) Cost of transportation to the healthcare (Drs and clinics) – special bus
Spatial	Rural counties such as Napa have fixed-route needs between service areas that are not being met.
Spatial-s	Napa <u>City</u> Flex Ride
Temporal	Ⓐ Non-ADA eligible don't have enough service
Temporal	Excess transportation times for communities not located within core service area, due to capacity issues and Ⓐ growth and congestion
Temporal	Need better transportation for non-ADA's seniors on the paratransit
Temporal-s	Currently NCTPA has an RFP to hire an organization to redo the (fixed-route) schedule.
Vehicles	Ⓐ taxi service for people in wheelchairs
Vehicles	No taxi wheelchair service

San Francisco County

More than 132 people attended two meetings, with additional comments received online.

- San Francisco PCC Meeting, January 17, 2007 (32 people attending)
- San Francisco Senior Action Network February 8, 2007 (approx. 100)
- Comments from cards translated from Chinese
- Comments from the web site with county of "SF" selected

Gap Type	Comment
Connectivity	Connect with BART and other transit comp<an>ies to make schedules work. I.e., get off the BART at 3:15, and the bus left at 3:14.
Connectivity	Create system so that all areas of the city are well covered, especially by cabs
Connectivity	Eliminate transfers from San Francisco Paratransit and Redi-Wheels
Connectivity	Hospital discharges coordination and transporting
Connectivity	Taxi services as safety net for fixed rate users who have great difficulty using fixed rate
Connectivity	Use SF model of collaboration
Connectivity-S	Solution: For admission and discharge, ER's (should) to use non emergency medical transportation. There (are) many companies in SF – use smaller companies they are more efficient and less costly for tax payers
Facilities	Enforcement of taxi stand regulations so cabs can get to curb (get rid of lines)
Facilities	Paratransit vehicles able to use bus stops to board & off-board.
Facilities-S	Audio pedestrian signals and products that are universally designed to include all people and abilities.
Facilities-S	Create mini taxi stops at senior locations
Funding	\$
Funding	A merit pay-incentives for quality service
Funding	Grant process can conflict with sustainability goals
Funding	How to advocate for more \$ in New Freedom (and others)
Funding	Increasing funding must be a priority (Pelosi)
Funding	Need to know cost before measuring community support
Funding-S	Funding incentives to for profit providers of ramp taxi services. Including drivers, medallion holders and companies
Funding-S	Incentive pay for ramp taxi drivers – 5 – 1- per wheelchair pick-up
Funding-S	Incentives/rewards for service providers. Public rating for taxi companies for service to special needs committees
Funding-S	Raising salaries of Paratransit drivers
Information	511 include all bus info!
Information	Education/between social workers & hospital staff for transportation needs when leaving the hospital disabled
Information	The taxi driver should tell the passengers that he was the assigned to service said passenger
Information-S	A lot of people don't know what kinds of special services are available for seniors and handicapped people– more information and publicity should be provided.
Information-S	More outreach and opportunities to provide information regarding problems experienced
Medical	Assistance with persons of Dialysis from home to destination.
Medical	Availability for hospital discharges
Medical	Gurney service to and from hospital or medical treatment.
Medical	Need transit for hospital discharges

Gap Type	Comment
Medical	Pick up from hospitals when you have a procedure and can't go home by yourself by transit.
Medical	Transportation for people going home after an out-patient procedure: Hospitals won't let you go home unless somebody comes to get you. So I have to find somebody with a car to take me home. We need some form of transit for people in that situation.
Operations	Also the bus driver should announce verbally "front section is for seniors". The signs are posted but they choose not to read it. Too many times I see young people are not yielding to the elderly especially to the handicap.
Operations	Fare subsidies for low-income seniors and disabled
Operations	Gaps – Reliability (lack) hinders usage
Operations	Have drivers pull to curb (not 3 ft away) to step onto curb < bus?>
Operations	Have drivers to ask young people to give front seats to older people to sit down, not watch them to try to stand and swing from the strap on the bus.
Operations	Lift caps on taxi scrip programs
Operations	No 14 bus says Daly City on front, but often the sign on bus is changed while in transit to Lowell.
Operations	Problem: When bus stops are of island type (Market "F" Line etc) and are totally taken up with passengers waiting to board. The bus may stop, open the door for would-be passengers, at beginning of island, close the doors and take off without picking up would-be passengers actually waiting at the end of island.
Operations	Quicker implementation of single fare mechanism Translink
Operations	The only thing I object to is the driver will be talking on the cell phone. And the second thing I don't like is a driver will "visit" with "friend" while driving. Most drivers are very courteous.
Operations	To be fair to most of the bus drivers they do a good job. But too many of them let non-paying persons on the bus. Even those persons on the buses who ride these buses many times know many who get on without paying a fare. These persons are paid to see that persons pay the fare, but need to do a better job.
Operations	Waiver allowing seniors and persons with disabilities to call for taxi service that is accessible and accepts their method of payment.
Operations-S	Muni bus #4 almost empty on California (has #1 already). Use money for other routes that need more service (#33, #43, #44)
Organization	(Out of control fraud) Too much fraud with out of control
Organization	Debit card swipe for cabs
Organization	Enforce Muni ADA regulations lower steps, etc. Also buses have to stop at stop
Organization	Have incentive programs funded to encourage ramp taxis to see benefit in assisting
Organization	Incentivize ramp taxi drivers
Organization	Lion's Center (should not be) taking tickets (away) from seniors
Organization	Sensitivity training for all individuals involved with transportation for people with disabilities and elderly
Organization	Urgent need for taxi service centralized/computerized dispatch accountability/ enforcement for timely pick-up
Organization	Use of catchment area for senior services
Organization-S	Accessible cabs should be able to cross county borders if accessible cabs are not available in that county.
Organization-S	Improve communication between transit companies and the passengers
Organization-S	Improve drivers training
Other	Also – Educate your drivers to be polite and caring. If you want less cars downtown pls try and improve the bus service. More buses are better than less. I hate waiting and freezing. I love riding the bus. J
Other	Enforcement of ordinances to create a safe and healthy environment around transit shelters.
Other	Get Muni to go to the curb to let people off.
Other	Husband and wife (of) 25 years or more accepted for taxi scrip. One die(s) other has to reapply and start all over new. Reapply – wait for approval, hopefully (at) the time (the spouse) is not thinking of transportation. Should be able to move into slot for taxi scrip and continue using. At this time, they are not thinking of transportation until it's needed again.

Gap Type	Comment
Other	Mandatory pick-up of seniors and persons with disabilities <by> taxi operators.
Other	Measures to improve safety at bus stops.
Other	Measures to make transit safer for seniors and persons with disabilities
Other	Muni drivers need more sensitivity training to lower steps for physical handicapped. Especially hard if they stop way out in the street – not at the curb – despite no cars blocking!
Other	Other passengers could report inappropriate behavior of bus drivers
Other	The ability of ramp or sedan taxi to stop, unload and transport disabled passenger without getting ticket while parked in blue zone. Like a special unloading placard (that says) “good for 10 minutes”
Other	Training
Other	Vehicle ticketing in loading zones
Other	We need affordable and reliable paratransit services!
Other-S	Training and election of drivers that are more sensitive to the needs of the seniors/disabled population
Pedestrian access	Cell phone, driving, walking, seniors driving
Pedestrian access	Enforce sidewalk repair problems so people can get to bus stops safely
Pedestrian access	Enforcement of laws regarding parking, bi-cycles and skateboards
Pedestrian access	Enforcement of xwalk laws for pedestrians
Pedestrian access	Implementation of ADA standards for length of ramps for accessibility – otherwise highly dangerous.
Pedestrian access	Improve infrastructure of cross walks and boarding areas (fill potholes)
Pedestrian access	Longer timing of lights to cross street
Pedestrian access	Need for longer crossing times, upgraded signals
Pedestrian access	No turn on red lights, (unsafe for pedestrians)
Pedestrian access	Service staff to help frail and handicapped to door of destination
Pedestrian access	Unfortunately the stopping points for our buses have moved to the middle between two streets rather than at the end of the street – how would you like to climb a hill with a crutch or your walking stick just to get on your bus?
Pedestrian access-S	Longer time limit for pedestrian cross walk light signal
Pedestrian access-S	Transit bulbs to be installed to create better access and continued flow of traffic.
Spatial	(There) May be pockets not adequately served. Maybe less emphasis on big numbers
Spatial	The taxi driver should fetch the passenger in accessible places where passenger cannot walk
Spatial	The Third Street Light Rail was originally planned to extend to Chinatown, near Clay Street, but I have heard recently that due to financial consideration, the plan may be aborted. The extension project should go on, it will be beneficial in the long-term, do not be too short-sighted and prejudicial.
Spatial-S	Buses to re-route closer to senior housing / centers.
Spatial-S	Busses should make stop near senior centers and nursing homes.
Temporal	Additional group shopping trips, etc
Temporal	Improve ramped taxi service, to eliminate long waits
Temporal	More taxi service GPS on all cabs
Temporal	Please read and digest. After 9am, the buses are few. I have to wait 45 min for a bus on Sutter and Buchanan to take me downtown or sometimes to the doctor. We need more buses to run 15 min apart. Muni is to serve the public.
Temporal	Save day service for urgent needs
Temporal	Sometimes a bus will show up – and a couple of minutes another bus will show up – poor scheduling – however, I think Muni is the best thing invented since Bubble Gum!
Temporal	They don't stagger their busses. #22 bus runs through with 3 buses. If you miss the last bus then you have to wait more than ½ hour if the next bus will even show up. Sometimes the bus won't even stop if you're the only person there even though the bus is very empty.

Gap Type	Comment
Temporal	Transportation increase in East Bay Paratransit
Vehicles	All taxis be accessible
Vehicles	Vans that open on the curb side of the street

Comments from the website:

Gap Type	Comment
Other	I am a social worker at Jewish Family and Children's Services, working with adults under age 60 with disabilities. I would like more information on this study, how we can participate and potentially benefit. Thank you.
PB-ADA Temporal	Paratransit services would be much more useful to seniors and disability if they assisted clients in getting out of their homes; actually coming to the front door and helping them out to the vans, and then assisting them in to their destination. Increasing the reliability of the services is also needed. Too many seniors that I work with are reluctant to use paratransit services because they have had negative experiences: paratransit either not coming to pick them up or being too late. This keeps seniors and those with disabilities isolated in their homes and prevents them from using other services in the community.

San Mateo County

San Mateo PCC Meeting, January 9, 2007; no online comments as of 3/28/07.

Gap Type	Comment
Connections	Poor connections with BART and CalTrain
Facilities	Weather shelters needed
Funding	GGRC goal for people to become independent is not served by transportation resources. Need more resources.
	Lack of use of 5310 money in San Mateo County
	Need more dedicated funding for ADA paratransit
Information	Alternative language needs for seniors (lower priority)
	Communication gap about all services – buses, trains, etc.
	Gap between counties about communication. Don't know about services in other counties – how to transfer
	Improve public awareness
	Need comprehensive Information and referral telephone hot line for assessment and referral to all services for seniors and persons with disabilities (housing, paratransit, etc.)
	Need for customers to understand service parameters (i.e., paratransit ride time)
	Need web site with comprehensive transportation information (public, private, social services, other counties)
Inter-county	Inter-county transportation – length of time
	Need options for inter-county trips for ADA-eligible riders
Organization	Need a countywide non-profit agency to coordinate public and human service transportation. Find and train volunteers, access funding not available to public agencies, and develop volunteer services, including escort services.
	Need more private non-profit based volunteer ride programs to augment fixed route / ADA paratransit and fill gaps
	Problem: School transportation on the Coastsides (Cabrillo School District) is limited. Costs \$300+ per family per year to support school buses.
Other	Higher density along El Camino corridor
PB-ADA	¾ mile limit gap – for example, Redi-Wheels doesn't travel beyond ¾ mile of fixed route. No service for people living beyond ¾ mile, for example, La Honda
Pedestrian access	Curb cuts – need to be highly visible, painted bright colors
	Identify curb cuts – not enough of them, need on both sides of the street
Population served	Also, concerns over those residents who fall between the cracks and are not qualified for paratransit services.
	Chronically ill – unable to drive, need transportation
	Mandatory evaluation after 70 years of age
	Mental Health patients – non-violent – need understanding; meds and condition prevent them from driving!
	Social stigma to using transit – Asian community especially – overcome “pride”
Reservations	(a way to) Communicate with waiting driver – “I'm here and coming”
	Call forwarding
	Longer hours for Redi-Wheels reservations, and more operators
	More paratransit reservationists
	Reduce / eliminate “stand-by” Redi-Wheels rides
Spatial	Door-to-door service
	Gap – BART to San José

Gap Type	Comment
	Inability to get true door-to-door service within large properties / complexes: - info shared on specific locations within large properties / complexes - charge provider with responsibility
	No transportation provided to work sites. RediWheels is not reliable for work trips, and clients cannot wait independently for Redi-Wheels. Work sites are far-flung (e.g. HOPE in E. Menlo Park).
	RE: new developments – shuttle system within a new complex has to be considered i.e., new Mariner’s Island proposal. Developers should consider this before building. <Note: This could refer to service, or to the ability to accommodate larger vehicles as stated in another comment>.
	Shuttle service
Temporal	<u>Gaps:</u> Paratransit demand exceeds capabilities Inconsistent timing for agency routes pick-up and drop-off <u>Solution:</u> purchase call-ahead software Free public transportation for everybody – bus service and paratransit
	Loss of Opportunity Center on Coastside – less hours, e.g., no evening service
	Medical trips on the same day
	More bus service routes on rural SMC
	More service, more vehicles
	Need same-day reservations (like Outreach) for Redi-Wheels
	Same < level? > of service Coastside as Bayside
	Same-day service
	Service gaps: - not enough vendors - use of existing vendors exceeds 1.5 hour travel time limit - Redi-Wheels fills the gap sometimes - TT sometimes useful
Vehicles	<Increase> capacity to meet the needs of consumers with larger mobility devices, difficult pick-up locations (access).
	Also, the city should work with SamTrans in obtaining vans and/or shuttle.
	Need more accessible cabs or other private transportation options
	Spec < ify > vehicles to accommodate scooters

Santa Clara County

Santa Clara County outreach meetings:

- Santa Clara PCC (VTA / CTA) Meeting, February 7, 2007 – 20 attendees
- Santa Clara Council on Aging Meeting, February 5, 2007 – 40 attendees
- Comments from the web site with county of “Santa Clara” selected

Gap Type	Comment
Connectivity	Better connections on busses
Connectivity	Better service on outreach connections
Connectivity	Inter-county trips don't work well—should be more user-friendly.
Connectivity	It is very hard to make Paratransit trips to neighboring counties, e.g. to Oakland or to the coast.
Connectivity	Outreach made available for social events, better connections on busses, better response time of Outreach, Trains – no help with baggage – no public bus light rail connection
Facilities	VTA should budget for bus stop improvements, giving priority to stops used by a lot of people with disabilities.
Facilities-s	VTA have a budget for bus-stop shelters place bus shelters (as a priority) at stops for disabled riders & seniors (not done currently, where clear channel, since they are providing)
Funding	Affordability of transit service.
Funding	Affordability: significant barrier to low income seniors is cost of public transit & paratransit services
Funding	Funding requirements should not be so stringent that 5310 recipients are unable to serve their own clientele properly, or so stringent that agencies are discouraged from applying for funding.
Funding	I have heard that other cities in Northern CA have Senior transportation models that work i.e. Roseville but we don't know how these are funded.
Funding	Outreach is very interested but insurance costs are a large impediment
Funding	Same Day Urgent.- Not affordable
Funding	Santa Clara County Board of Supervisors states no funding for Senior transportation. We are trying to encourage them to establish a coalition of Community and business leadership to identify needs and sources of funding
Funding	The expense of providing service is increased by the fact that different funding services have different eligibility requirements, multiple reporting requirements, and multiple audits. These things also make it hard to coordinate.
Funding-s	Dial a Ride: picked up to take you to a bus line or light rail
Funding-s	Outreach asked if the City of San Jose would cover the cost of insurance for volunteer drivers for this project to move forward
Funding-s	Some Sr. Cts. offer limited van transportation to seniors in the neighborhood of a center. Can this service be expanded. A modest investment would go a long way
Funding-s	Use jitney size bus for Los Gatos, Winchester to Wimbledon to Wedgewood to Lora
Information	Access to transportation for non-English speakers
Information	Explosive growth of very low income non-English people with disabilities and Seniors. Language barriers for providing services.
Information	Help for the rapidly growing number of non-English speaking, low-income seniors—includes transportation and assistance with obtaining services of all kinds.
Information	We did not see a report on the trial project or “taxi tickets” that was initiated 6 months ago.
Information	White House Conference on Aging. California delegation made transportation #1 we need to work both together we need to work on providing transportation for those seniors that have decided to give up their keys and not drive anymore and still want to remain active in the community and not become isolated

Gap Type	Comment
Information-s	Call-Out service for paratransit whereby an automated phonecall is generated to alert disabled/senior riders that their ride is <u>X</u> # of minutes away from picking them up.
Information-s	Would like "call outs" alerting Paratransit riders when their vehicle is coming.
Organization	Create a priority, Implementation of any plan, can a prestigious committee be organized to coordinate the above suggestions, seniors without drivers licenses
Organization	Issue of liability for volunteer driver serving frail elderly – have to cover volunteers?
Organization	There needs to be statewide coordinating council and organized legislative advocacy by MTC and others to obtain dedicated funding for transportation for seniors and people with disabilities. (Katie Heatley promised to send e-mail with more on this and other issues.)
Organization	VTA policy requiring mandatory tie-downs means that courtesy stops delay buses.
Organization-s	Catholic Charities provides transportation to medical appointments and grocery shopping in So. County (Gilroy), volunteer driver remains with client – not available for personal trips, i.e. beauty appts. Limited number of trips per month.
Organization-s	Coordination countywide of projects like "road runners" for hospital Srs can get trans to Dr. appt and left hanging to get home - need a one hour window
Organization-s	More use of volunteer drivers – assigned to 1 or 2 seniors to take shopping or physician etc.
Organization-s	Please do not limit solutions to bus/transit Suggest that you look at alternatives i.e. volunteer drivers
Organization-s	Seniors who give up their drivers' license need help. Best bet are volunteer drivers organized by neighborhood Help is needed primarily with liability issues
Organization-s	the City of San Jose Dr. Citizens Commission has explored with VTA & Outreach a volunteer driver program
Organization-s	Use volunteer-driver, demand-response service to take senior home from shopping because of difficulties carrying groceries.
Other	All of the gaps identified for the City of Gilroy are applicable to the City of San Jose as well as the rest of Santa Clara County. They seem to come directly from the survey addressed in "Community for a Lifetime", the ten-year strategic plan for seniors in the City of Dan Jose and the County as a whole.
Other	Bus drivers don't call out stops.
Other	Continuation of door-to-door service for paratransit permanently.
Other	Coordination requirements need to make allowance for user groups that it may be problematic to mix, for example teens with severe emotional issues who are being taken to jobs.
Other	Fulfill mandate to transport srs who can't drive or shouldn't drive, but don't yet qualify for paratransit
Other	Implementation - ASAP
Other	It appears that any rural residing person has problems with transportation – I think Gilroy should collect the support to provide trans- and ask the County to set standard
Other	Outreach for social events
Other	The items listed for Gilroy are true for most other areas as well.
Other	VTA and Outreach <ol style="list-style-type: none"> 1. too costly for seniors 2. language barriers 3. timeliness of Outreach 4. Lack of assistance for seniors, wheelchairs and other on VTA 5. Safety – restraining belts for wheelchairs 6. problem with connections, transportation, to Valley Medical Hospital in San Jose
PB-ADA	Continue door-to-door Paratransit.
PB-ADA	Cooperative agreement to bring people from home to medical-facilities. Medical transportation that exceeds ADA.

Gap Type	Comment
PB-ADA	Dialysis patients may miss their Paratransit ride home because they have not been released by the center due to continued bleeding.
PB-ADA	Door to door service.
PB-ADA	Getting home from medical facilities is a problem if you don't have someone to accompany and wait with you, since Outreach only goes to the lobby door to pick up.
PB-ADA	Paratransit doesn't make connection to BART.
Pedestrian access	Crossing lights are not long enough for people with disabilities.
Pedestrian access	Gilroy's safety commission should be contacted regarding unsafe pedestrian issues.
Pedestrian access	Lack of curb cuts and <crowns>on roads are barriers to wheelchair users and visually disabled.
Pedestrian access	People who use wheelchairs and with visual impairments need to use Outreach because of sidewalk barriers—e.g. trees, cobblestones, and bricks in Palo Alto.
Pedestrian access	Problem with the location of bus stops serving senior centers in the City of San Jose i.e., Northside Community Center. North 6 th street in San Jose has a low-income senior facility co-located. When the center was remodeled, the bus stop was moved but now that the center has been re-opened, the bus stop is now too remote. Seniors are unable to shop for groceries or fill prescriptions as they are unable to walk to the nearest public transit. VTA is reluctant to return the bus stop to the front of the center because they are not convinced that he ridership from this stop would make it worth the effort. The senior residents brought this issue to the City of San Jose Senior Commission last year and it has still not been resolved. Due to the lack of funding, the senior transportation Pilot Program through Outreach has been unable to serve these needy people.
Pedestrian access	Saratoga Shopping Center has no paths for people in wheelchairs.
Pedestrian access	Sidewalk improvements in San Jose
Pedestrian access	Sidewalks near emergency exits, for example from movie theaters, are sometimes not accessible (lack curb cuts).
Pedestrian access	There are no provisions for people who use wheelchairs to get around in some shopping centers.
Pedestrian access-s	Lengthen time on signal lights to allow slower people to cross safely. Also show seconds
Pedestrian access-s	Review programs to assure pedestrian signal lights/timers give adequate time for each intersection
Pedestrian access-s	Yellow lights/& crossing times must be longer
Population served	All seniors do not qualify for paratransit yet have similar transportation needs. Must also have demand-response system for seniors
Population served	Many frail seniors need escorted assistance
Population served	Many seniors have asked for escorted transportation that includes help shopping, etc.
Population served	Most seniors do not use fixed-route public transit. There needs to be transit solutions beyond fixed-route solutions; for example, demand-response, volunteer driver, etc
Population served	Riders for non-disabled seniors who have voluntarily surrendered their driving license
Population served	Transportation needs of seniors who are not disabled but have given up their drivers licenses
Population served	Transportation to senior centers especially if you do not qualify for Outreach
Population served	People who do not qualify for Outreach – something to cover the gap – all senior coverage
Population served-s	City of San Jose Sr. Citizens Commission is exploring Paratransit for Seniors who are not disabled but should no longer be driving. We do not want them to be deprived of socialization and doctor visits. We have explored a volunteer driver program that originated in Portland Maine that has been implemented there and also in Charleston, Orlando & Santa Monica, CA. The State of California is looking to implement this program Statewide.
Spatial	County to county transportation for IHSS workers and for seniors and disabled who need resources (medical, day health, day care, shopping, whatever in other county

Gap Type	Comment
Spatial	Courtesy stops closer to riders' destination.
Spatial	Door to door service to include the companion (included in the fare)
Spatial	Getting to activities and events
Spatial	Gilroy certainly needs help. But the < > outline omits numerous major population centers, such as East San Jose. We need to be sensitive to the < > Filipino and Chinese elders
Spatial	More "courtesy stops" on fixed-route (i.e. not at bus stops for convenience of wheelchair users).
Spatial	Near grocery store – mail boxes
Spatial	Not just South County – although south county has some dire needs and should be addressed – the entire county has need for all of the service gaps – costs need to be adjusted for all – coordinated services must be appropriate for all
Spatial	Outreach survey of seniors found that 90% need demand responsive transportation to medical appointments because they cannot rely on fixed-route transit to get them there on time (but transit works okay for the trip home since it is not as time critical). Also 85% need a ride home from grocery shopping, including help with packages.
Spatial	Paratransit goes where fixed routes does not go.
Spatial	Transportation to church/temple/etc.
Spatial	What does it mean for transportation between senior centers?
Spatial-s	Easier courtesy stops where a senior or disabled person can request a stop (drivers refuse) between two designated bus stops.
Temporal	Better arrangement for return trips from doctors—it's hard to predict when you'll be ready to return.
Temporal	Cut backs in fixed-route service are a problem. Can take a bus to go to some places, but by the time one returns home, the bus is no longer running.
Temporal	Decrease the length of ride time for Paratransit.
Temporal	Emergency service – cannot predict ahead for service
Temporal	Increased paratransit capacity to allow for more subscription service on paratransit.
Temporal	Issues of doctors' appointment pick-up time is hard to establish. How can we handle, we need clarification.
Temporal	Same day affordable medical/dental appts very important!
Temporal	Same day urgent trips are a problem for agencies – maybe discounts on taxi service would help
Temporal	Timeliness of service: seniors can not depend on fixed-route to get them there in time. Alternate solution, demand-response, to get them more reliably on time.
Temporal	Transportation for urgent medical appointments.
Temporal	Would like shorter ride times on Paratransit (i.e. shorter than allowed under ADA).
Temporal-s	A service to help people who are stranded because the last bus of the evening never arrives.
Temporal-s	Emergency service to take wheelchair users home if their chairs have broken down or they have been in an accident.
Vehicle	Designate a place on buses for small shopping cart.
Vehicle	Mandatory tie-down.
Vehicles	Ability to get on and off busses, with walker
Vehicles	Area (dedicated) on bus for small shopping carts, stroller, etc. so they could be stored out of aisle and not in the wheelchair seating area.
Vehicles	Focus on light rail not necessarily helpful as fixed routes don't travel where riders need to go quickly or efficiently – why not smaller busses running more frequently
Vehicles	Hard to get on and off trains for disabled

Solano County

Solano County outreach meetings - total people attending meetings: approximately 60

- Solano County Senior Coalition, February 2, 2007 – 40 attendees
- Solano Family Resource Network, February 5, 2007 – 6 attendees
- Solano County PCC, March 16, 2007 – 15 attendees (approx.)

Gap Type	Comment
Connectivity	Coordination
Connectivity	Cost – multiple fares between systems
Connectivity	No Connectors between cities
Connectivity	Rio Vista only has service to Fairfield (County seat)1 day a week
Connectivity	Trilogy in Rio Vista – no shuttle service or access to health care, no shopping service
Connectivity	Need for connections from N.E. county to Sacramento County for medical trips
Connectivity	Paratransit between Dixon and Benicia needs to be improved – more.
Connectivity	Connections are difficult
Facilities	Fear of violence
Facilities	Inadequate lighting
Facilities	No cover or protection for long waits
Facilities	Access – doors at Fairfield Transportation Center
Facilities	Accessible covered waiting stops with technology
Funding	Multiple fares between cities
Funding	Taxi from Rio Vista to Fairfield is \$50.00 one way
Funding	Transportation vouchers very limited
Funding-s	Benicia Community Action Council provides gas cards for emergency transportation (one time per year). Senior volunteer drivers; however, very limited eligibility
Funding-s	Change Federal criteria for medical facilities to be able to use funds to provide transportation
Funding-s	Having a voucher system for skilled nursing facilities, Sr. Housing, Assisted Living Sr. organizations to be used at the discretion of the staff for transport
Funding-s	Partnership Health Plan offers MediCare HMO plan for low-income seniors & disabled. 6,300 eligible in Solano County. No cost, no premiums, co-pays or deductibles. Covers transportation to medical appointments/routine 20 one way trips/yr. – arranged through their transportation department. Taxi or paratransit as needed. No restriction on cost or length of trips
Funding-s	There needs to be a universal voucher that seniors and disabled people can use on multiple systems and the systems figure out who pays for the trips.
Funding-s	Transportation vouchers
Funding-s	Universal Solano County Transportation pass (like SF)
Funding-s	Use a voucher system to allow existing transportation groups for seniors
Funding-s	Use medical funding to pay for taxis
Funding-s	Use of ambulance - use existing “for profit” transportation for “non profit” for a lesser fee Better coordination of services
Funding-s	Voucher program where sr. can pay friend or neighbor to transport
Information	Communication is needed between providers so senior can be directed to correct provider
Information	Need to recruit help from various service providers in getting info re: appts (ambulance drivers, ER workers)
Information	No bus schedules in Spanish
Information	First Aid center, policy booth, emergency call at transfer centers.
Information-s	Explore why seniors don't access the transportation services that do exist
Information-s	More outreach and transportation options

Gap Type	Comment
Information-s	Need for someone to identify and work with those in need to fill applications to receive transportation services
Information-s	Need help with paratransit applications
Information-s	Orientation of new immigrants
Information-s	Post available transportation to a particular medical site so people can make appts. At the same time
Inter-county	Inter-county transit- have to wait in Napa > not realistic for frail seniors
Organization	Funding silo's – can't commingle funds
Organization	Rio Vista –Dixon shuttle is under used
Organization	Vallejo transportation bus drivers don't pick up passengers in wheelchairs because it puts them behind schedule and they are penalized
Organization	Advancement of elderly driver process and programs
Organization	Need for conversation, coordination, and communication between MTC and other adjacent regions
Organization	Multiple systems confusing (paratransit and fixed route) – fewer systems so that it is less confusing for consumers
Organization	Vision impaired – know what bus stops @ stop. Do drivers announce stop. Braille at consistent place.
Organization-s	Support and expand existing transportation services – esp. the volunteer driving programs (faith in Action, Yara in Dixon, Fairfield Volunteer program)
Other	My recent experience with V.V.'s Ride with Pride. I needed a driver 3 times a week to take me from home to physical therapy at 770 Mason a 7 min. trip I need a driver to pick up 1:45 pm and a return at 2:15 pm on Mon. Wed. and Fri. for a three week period. But I was never able to arrange this even though I offered to pay for the service
Other	Need more options for accompaniment during health visits as well as to and fro.
Other	Highway 12 improvement
Other	I-80 <and I-680> bridge approach
Other	All items on preliminary list are pertinent
Other-s	Companion to travel with them
Pedestrian access	Cross walk light is too short for people w/ wheelchairs to get across the street
Reservations	In Vallejo the paratransit application process takes up to 6 weeks- we need somehow to have an application same day approval for those people in skilled nursing facilities to go out to doctors appointments or a voucher program for anyone in a skilled nursing facility
Reservations	Paratransit so full that srs. have to make appts a week + ahead and have to wait for hours at a time
Spatial	Agree with all those identified on the preliminary list
Spatial	Assistance with ambulating door to door – not just on or off the vehicle
Spatial	Issues of how long you have to wait to get paratransit ride home. Sometimes hours
Spatial	Lack of transportation for out of county services, esp. medical/health services + esp in Dixon and Rio vista
Spatial	Need for door to door service
Spatial	Flag stop <increase> in all cities
Spatial	Concern must be focused also on individuals with different levels of disability accessing place of work, industrial parks
Spatial	Dixon services
Spatial-s	More door to door, 1 on 1, flexible schedules
Spatial-s	More door-to-door services, not only for paratransit
Spatial-s	Rio Vista and Dixon need shuttles to county services
Spatial-s	Trilogy shuttle service/ require Senior housing to provide shuttles
Spatial-s	Vallejo – Runabout transportation for seniors and disabled, some paratransit with lifts
Temporal	Buses don't start early enough (courts, medical appointments), or continue late enough (evening services, work)
Temporal	From Rio Vista or Vacaville you only have a 3 hour span of availability (11AM – 2pm) for appointments in Fairfield. If the court or county office is behind schedule you are stranded. If you don't show up for court you may be arrested.

Gap Type	Comment
Temporal	Long turnaround waiting to be picked up
Temporal	Secondary transportation – people go to doctor but have no ride to do other errands during the wait for the original transportation to return
Temporal	Vallejo paratransit – you must call one week in advance. This doesn't work when you need same day or same week transportation
Temporal	Weekend Service Gaps – weekend mobility improvements thru more fixed route, paratransit, or taxi services
Temporal	Workplace set-up, i.e. shifts, weekend jobs, to coincide with the schedule of city bus, paratransit, etc.
Temporal	Need better transportation on Sundays in Benecia.
Temporal	Buses do not run often enough or long enough (early/late).
Temporal	Simplify fixed route schedules
Temporal-s	Have medical providers try to schedule block appointment for a group of seniors from Dixon or Rio Vista – coordinate the health trips
Vehicles	Getting from Solano County to Bay Area is a lengthy process, Train from Davis to Richmond/BART is great except trying to climb up to train from street is very steep. While Amtrak does have handicap access there is seldom anyone there to assist seniors/disabled to board and it takes about 3 hours to get from Davis to Oakland
Vehicles	Need more medical vans and wheelchair vans
Vehicles	There is not a very good taxi service – it is expensive
Vehicles	Internal design of buses for people with disabilities and seniors (VanHool – no)
Vehicles	Appropriate size of vehicles for times when fewer people ride
Vehicles	More subsidized taxi – ADA taxis

Sonoma County

This document consolidates and summarizes public comment from Sonoma County outreach meetings. Total people attending meetings: ~35 at AAA and ~37 at TPCC.

- Sonoma Paratransit Coordinating Committee – January 16, 2007
- Sonoma County Area Agency on Aging – February 21, 2007
- Comments from the web site with county of “Sonoma” selected
- A letter submitted to the Sonoma AAA

Gap Type	Comment
Connections	Coordinated paratransit: 1. hours 2. Ride prices coordinated 3. Hand-to-hand transfers, free fares Coordinate churches for rides to services Consolidate holiday services Centralized reservation services for connections (Frontier Rides)
Connections	Transfer policy – paratransit: City / county schedules and policies are inconsistent. It’s easy to get stuck. Either have a “hand-off” rule, or abolish transfers.
Facilities	(Silverman) Benches and shelters (from weather) at bus stops – seniors <u>cannot</u> (in most cases) stand for any length of time.
Facilities	< Road conditions > Health and safety of paratransit drivers – we need accessible roads – they are dangerous in West County. – too narrow - too steep - winter is a big concern - gap is in road infrastructure.
Facilities	Bathrooms
Facilities	Bus stop on opposite side (Santa Rosa Ave.) <i>This was described as “the situation on Santa Rosa Avenue – where you could go but you couldn’t come back.”</i>
Facilities	Bus stops have problems themselves
Facilities	Bus stops need SHADE (trees preferred)
Facilities	Bus stops need to <u>face</u> buses to see them coming
Facilities	Buses: shelters are few and far between.
Facilities	Facility (fixed bus stops) <i>may be referring to bathrooms</i>
Facilities	No benches or shelters
Facilities	Rest rooms when you get <u>off</u> the bus? (Not coin operated. These must be clean and safe and someone <u>there</u> to keep it clean.)
Facilities	Restroom availability
Facilities	Restrooms at bus stops – rest stops?
Facilities	Seats at bus stops should be positioned to allow person waiting to see sign on upcoming bus
Facilities	Seats at bus stops are uncomfortable (bumps, rocks)
Facilities	Security
Facilities	Shelters – are inconvenient, many don’t meet ADA
Facilities	Stones hurt on benches; cement benches are slanted horizontally
Facilities	Wheelchair accessibility
Facilities-s	Bus provide printed list of restrooms available for each stop. Probably need map for available restrooms.
Facilities-s	Bus provides printed list of available restrooms at various stops; provide directions to available restrooms
Facilities-s	Food/coffee
Facilities-s	More restrooms at bus stops
Facilities-s	More seating to WAIT for a bus

Gap Type	Comment
Facilities-s	More shelters at bus stops
Funding	Federal funds available for capital but much less for operating.
Funding	Funding
Funding	Money gap – not enough to address all of the issues.
Funding-s	\$10 per gallon gasoline
Funding-s	I am a student at both Sonoma State University and Santa Rosa Junior College. I would like fees to be used for public transportation as available and grant reinstated with Sonoma State University.
Funding-s	Increase the cost of driving to subsidize public transportation
Funding-s	More \$ to volunteer transportation programs. →Inc leverage → quick solution
Funding-s	Triage to use \$ for one limited urban area
Information	Commitment to independence – independence to dependence
Information	Lack of education re: using the bus.
Information	Lack of information how transportation agencies differ and/or interact together. If elders can't know how to use the system how can we indoctrinate them to the "new and better" bus system of Sonoma County?
Information	Language barriers
Information	Networking <? Computer?>
Information	Psychological <transition from> independence to dependence
Information	Psychological gap – transition
Information	Psychological transition
Information	Seniors feel trapped – they can't drive at night or at all. They don't understand the complicated bus system and fear the transit mall. They don't understand how to get to medical appointments.
Information	Stop announcements by drivers difficult to understand for senior riders
Information	Too many transportation jurisdictions
Information	Transition program?
Information	Transition to dependence
Information	Transportation counselor at the DMV
Information –s	Need for transit education for seniors as soon as they learn they are losing their driver's license.
Information-s	(Silverman) W/ new regulations re. seniors from DMV – there will be more seniors who will not be driving – <u>must</u> have some program(s) in place such as those written up on website for Beverly Foundation.
Information-s	1(800) centralized number – too much fragmentation
Information-s	Better training of drivers / public in behavior management
Information-s	Coordinated agency training on how to use the bus system.
Information-s	Coordinated effort with DMV to educate elderly about transit when their licenses are not renewed.
Information-s	DMV needs to assist and encourage senior drivers to use public transit and provide information about training programs, schedules, etc.
Information-s	DMV transit counseling and planning for loss of keys
Information-s	DMV transportation counselor when licenses are turned in
Information-s	Driver patience / people willing to deal with dev<elopmentally> dis<abled>
Information-s	Elderly need coordination and education on transit
Information-s	Governmental education
Information-s	Improve mobility / buddy system to get seniors/disabled more comfortable with transit.
Information-s	User-friendly coordinated one-stop directory of services/areas of coverage
Information-s	Ways of keeping people driving safely longer

Gap Type	Comment
Information-s	Why are seniors not using the bus? Need to address this issue. Engage DMV to counsel seniors re: public transportation. Have this take place when a senior's driver's license is revoked. Encourage a "bus buddy" system. Who is funding it?
Inter-County	Lack of connectivity between public transit systems in 9 Bay Area counties.
Organization	Flexibility and trust at the local level
Organization	Liability fears
Organization	Little or no coordination among schedule of various bus agencies, including paratransit
Organization	Need for funded volunteer driver program in rural areas
Organization-s	(Silverman) Important – look at Beverly Foundation and ITN websites
Organization-s	(Silverman) very important to have a <u>volunteer system</u> of transportation (a la ITN and Beverly Foundation) with volunteer drivers that are available 24/7
Organization-s	"good Samaritan law" to protect volunteers who drive
Organization-s	"ITN" from Portland Maine is another program but costs \$125K to get off the ground and rides for seniors cost \$5-\$8.
Organization-s	Buddy system
Organization-s	Bus driver buddy < <i>not sure what this means</i> >
Organization-s	Centralized county-wide paratransit One stop shop for seniors Transit hub € funded - Transit Coordinators – coordinate volunteer wheels, city bus system, etc. to include <u>bilingual</u>
Organization-s	Collaboration / central
Organization-s	Coordination between City and County transportation
Organization-s	County of Sonoma "Transportation Case Manager"
Organization-s	Debit card < Translink or similar>
Organization-s	Debit card for fare, rather than needing exact change
Organization-s	Develop list (models) for covering insurance for volunteer drivers including use of community health center in the county for insurance coverage.
Organization-s	Develop statewide insurance pool that addresses the need to have low cost insurance for volunteers, taxi vehicles, and drivers, transit, social service agencies. Mechanics can work on other agency vehicles so vehicles can be shared, rides can be assigned to taxis, volunteers can drive those who need it.
Organization-s	Expand Volunteer Wheels – make it easier to use (currently 5 – not 4, not 6 – day)
Organization-s	Family and friends incentives – parking vouchers
Organization-s	Family transport incentives
Organization-s	Liability for volunteer drivers (good Samaritan law)
Organization-s	Pool of available drivers for cost.
Organization-s	Pool resources – Transportation District – eliminate duplication of services
Organization-s	Standardize fares
Organization-s	Use the model of the Beverly Foundation (Helen Kirschner). Located in Pasadena, an <i>excellent</i> method of senior transportation, for use in small/rural areas as well as large cities (Portland). See web site: www.beverlyfoundation.org . A first-rate site for info on senior transportation rides for seniors, \$0 - \$2. (Silverman)
Organization-s	Volunteer driver program
Organization-s	Volunteer drivers – liability issues – legislation
Organization-s	Volunteer Wheels gap and vehicles owned – good Samaritan law
Organization-s	Volunteers

Gap Type	Comment
Organization-s	We live in the country. We age. Then we want the convenience of living in the city. There is not enough money to bring transportation to everyone that wants it. So you either bring the seniors into the city or find and coordinate volunteers to move the seniors back and forth. Perhaps there could be some funds available to purchase small, efficient and easy to access vehicles that could be used by the volunteers to transport seniors. Drivers should be certified and provided with liability waivers.
Other	<paratransit is a > Compliance program, not a service program
Other	Availability
Other	Compliance vs. service
Other	Compliance vs. Service
Other	Enforcement of bus rules – rowdy kids using handicapped seats
Other	Intent of the law vs. regulation
Other	Isolation breeds addiction < <i>this person spoke about how when seniors are unable to get out, they start to self-medicate with alcohol and prescription medications, making mobility an important component in psychological health</i> >
Other	Moms with children are as limited as seniors in getting bus service.
Other	Need for independence
Other	Prevent isolation
Other	Priorities: Should look at Sonoma County AAA priority population in area plan. Rural isolated. Minority low income. May be others.
Other	Seniors need a transportation system for low-income individuals
Other-s	Local drivers to pick up people at bus stops – signs at stops with “Downtown Santa Rosa – Oakmont”, etc. opportunity for drivers to pick up riders going to those destinations.
Other-s	Stop giving free days to only able-bodied people, such as Spare the Air < days >, and making paratransit pay. This is <u>discrimination</u> .
PB-ADA	(Silverman) paratransit covers some seniors with medical problems – does <u>not</u> cover seniors w/o medical problems
PB-ADA	¾ mile limit
PB-ADA	¾ mile re-visited – more need for service in rural areas
PB-ADA	Extend beyond ADA minimum requirements, even < if > it means ST Clara and San Mateo fare
PB-ADA	GAP: Outside ¾ mile folks – how can we get them in?
PB-ADA	Gaps on transportation: no service beyond ¾ mile
PB-ADA	Service beyond ¾ mile or comparable hours
Pedestrian access	Cross walks from bus stops
Pedestrian access	Crosswalks too dangerous on Santa Rosa Ave.
Pedestrian access	Dangerous crosswalks
Pedestrian access	Inc. walkability for seniors
Pedestrian access	Lack of safety for pedestrians and bicycles, which is a viable form of transportation for seniors/disabled. Only 1% of Federal transportation \$\$ are spent on peds and bicycles.
Pedestrian access	Sidewalks are not uniform – should be standardized
Pedestrian access	To have a person walk ¾ mile location in unincorporated areas - no sidewalks.
Pedestrian access -s	Yellow flashing lights – island in the middle

Gap Type	Comment
Population served	Seniors are 1/5 of population in Santa Rosa 33,000 – to double by 2020. Highest priorities: 1) greatest numbers, 2) most vulnerable
Reservations	Lack of accessible transportation for health care visits for seniors and disabled. Caregivers and community-based services are trying to fill the burden of the transportation gaps.
Reservations	Problem scheduling ride.
Reservations	Schedule pick up times. Areas < that > vehicles travel too.
Reservations	Urgent medical appt. for persons with major medical problems and/or psych appts (prescription)
Reservations-s	Having a van or minibus that would go daily to the city SR < Santa Rosa > to bring pts. to the different hospitals with a return trip later in the day. Could make several drop-offs and pick-ups.
Spatial	(Bob Silverman, OATS 570-2121) distance to bus stop for seniors (ages 70-96) in SR Mobile home parks – can be up to ½ mi. how to these people get to public transit? Must depend on friends.
Spatial	Difficulty in getting to and from public transportation sites. Many of our clients suffer from physical disabilities that preclude walking more than a few steps or cognitive disorders that make navigating or remembering time schedules impossible.
Spatial	Geography, density of population, urban design – cities designed for <u>autos</u> , not <u>people</u>
Spatial	Healthy non-driving seniors need transportation to non-medical appt and social events
Spatial	Lack door-to-door services
Spatial	Lack of coordination of existing resources/systems (e.g., senior centers). Use centers as hubs à San Mateo model
Spatial	Lack of door-to-door service
Spatial	Lack of rural transit and paratransit, esp. elderly
Spatial	Lack of service from the Guerneville / West County areas into Santa Rosa, where the majority of providers are located.
Spatial	Need for assistance getting from the house to the vehicle and from the vehicle into the appointment location. Many of our clients do utilize the paratransit services available but still require assistance in this manner.
Spatial	No other options beside road vehicles (e.g., rail, streetcars) – urban design
Spatial	Outside city limits county transit not available and too far from transit route to be eligible for paratransit. Would like to see paratransit eligibility expand beyond ¼ of a mile from transit routes. To have a person walk ¾ mile location in unincorporated areas - no sidewalks.
Spatial	Paratransit – lack of service in west (Sonoma) County
Spatial	Population outside the regular (#24) bus line.
Spatial	Seniors unable to make it to bus stops (Distance)
Spatial-s	Circulating bus from Sr housing / mobile home communities
Spatial-s	Circulator buses to subsidized senior housing
Spatial-s	Door-to-door service
Spatial-s	Door-to-door transportation
Spatial-s	Need increased number of “personal drivers” and “Circulator routes” to: mobile home communities, assisted living communities, subsidized senior living complexes.
Spatial-s	Non-fixed routes
Spatial-s	People can't get to bus stop, ½ mile Solution – golf carts in mobile <home> parks
Spatial-s	San Mateo senior center model – use as hubs
Spatial-s	Senior centers as bus hub for seniors
Spatial-s	Senior centers as transportation hubs
Spatial-s	Unify transportation hub for ride coordination
Temporal	Extensive amount of traveling and waiting time required.
Temporal	Lack of late night service to accommodate social events or support groups that meet in the evenings.

Gap Type	Comment
Temporal	Lack of service early in the morning or late in the evening to be able to get to 8:00 AM, or home from 6:00 PM, appointments.
Temporal	Lack of service in evening, weekends, and holidays
Temporal	Rhonert Park – Cotati weekends stops at 5pm (hinders social No more student subsidy for Sonoma State College. < lot > of mature students and its <fragile> at JC's; needs to be institutionalized
Temporal	Routes circle and take too long. Not frequent enough service. It's easier to get to the Bay Area than to local destinations on holidays. Need evening and weekend service.
Temporal	Scheduling – can get a bus outgoing, but not home
Temporal	Sunday bus schedule in Santa Rosa begins at 10:00am and church services at 9:30. Would like to see bus start earlier.
Temporal	Transportation on Sunday to church from 8am to noon. Suggest agencies to work with, drivers to hire or buses to travel before 10am.
Temporal	Tricycle – may get ride 1-way but not back. Leaves client stranded, often in the evening.
Temporal	Waiting time
Temporal	Waiting time for transportation
Temporal-s	Buses stop running too early. Buses are not running on national holidays. Extend services of public transportation for evening hours and holidays.
Temporal-s	More nighttime transportation
Vehicle	Some people lose the ability to sit for extended periods of time. They need to be able to get up and walk around. They want to be able to go to the Bay Area, Sacramento, Stockton, even to LA and San Diego on public transit.
Vehicles	2 wheelchair limits on most buses
Vehicles	2-wheelchair slots (<i>there are only 2 per bus</i>)
Vehicles	<u>Basic problem – West Sonoma County NO TAXI SERVICE</u> that is economically viable for the company <u>and</u> economically affordable for our <u>seniors, NON DRIVING FOR WHATEVER REASON.</u>
Vehicles	Group trips for w/c users needed (more than 2 w/c positions).
Vehicles	High cost of taxis: \$25 Sebastopol to Santa Rosa each way by cab, \$50 Guerneville to Santa Rosa
Vehicles	Love DMV and taxi chits idea
Vehicles	Luggage on paratransit? Region-wide policy needs to be developed
Vehicles	No taxi service in <Sels - maybe Sebastopol?.> - have to pay for them to come from Santa Rosa.
Vehicles	Not enough w/chair spots on public transportation buses
Vehicles	Not enough wheelchair spots on public transportation
Vehicles	Travel needs (i.e. luggage) for paratransit users. Different regional policies.
Vehicles	Wheelchairs – only 1 or 2 spots on the bus
Vehicles-s	Accessible taxis – AC Taxi – Kevin Crowe
Vehicles-s	Bridging the drop-off points using "jitney" type service. Door-to-door issue.
Vehicles-s	Commercial taxi at reduced rate
Vehicles-s	Gitneys
Vehicles-s	Jitneys of the past to run people to bus stops
Vehicles-s	More wheelchair slots
Vehicles-s	More wheelchair slots on buses
Vehicles-s	More wheelchair spots on public transportation
Vehicles-s	Possible grants or other regular funding to support a <u>commercial taxi service</u>
Vehicles-s	Subsidize liability insurance bonds for local taxis
Vehicles-s	Taxi discount

Gap Type	Comment
Vehicles-s	Taxi to get people to central location
Vehicles-s	Taxi vouchers and expand taxi service
Vehicles-s	Use of jitneys to take people to bus stops