UTA Specialized Transportation Plan Phase 1 Report
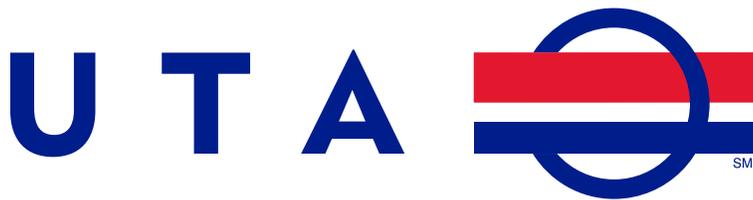
UTA

RLS & Associates, Inc.

LSC TRANSPORTATION CONSULTANTS, INC.

COMPREHENSIVE SPECIALIZED TRANSPORTATION PLAN

Introduction

The Coordinated Mobility Department of Utah Transit Authority (UTA) has collaborated with human service transportation providers across the Wasatch Front for the past five years. Several plans have assessed conditions and outlined strategies to address gaps in the network of transportation services. However, there has been no means or support for a comprehensive plan that would solve transportation challenges in their entirety. These transportation challenges are unresolved because of their complexity. While transportation seems like a simple task, developing and managing comprehensive transportation services with the least possible gaps to meet the most needs, with funding from multiple resources requires cooperation between operators, information sharing, trust, communication, policy changes at all levels of government, and funding.

The Comprehensive Specialized Transportation Plan seeks to assess the existing conditions for coordinated specialized transportation (Phase 1) and develop a comprehensive service delivery scenario as a solution to addressing the identified gaps and barriers (Phase 2). With this plan, UTA and its partners and stakeholders can focus on strategically working in a single, comprehensive direction that will make the most efficient use of existing resources and funding while providing the best possible transportation for the Wasatch Front.

UTA produced new Mobility Plans in 2017 for each of three regions with Local Coordinating Councils (LCCs) in the Wasatch Front; and the Utah Ride Link Transportation Provider Report (July 2019) documents existing transportation providers serving the entire region. Each of these plans include details about the unmet needs and existing transportation services available for seniors, individuals with disabilities, and others. Specialized transportation service descriptions in this plan are based on a combination of previous planning efforts and new research. The previous coordinated transportation plans include goals for addressing needs, but stop short of quantifying the cost and resources needed to implement a comprehensive strategy that would address the existing gaps and challenges.

Successful results of previous planning efforts include creation of Utah Ride Link (utahridelink.com) which is a technology platform funded by the Federal Transit Administration (FTA) and operated by UTA. The website is a tool to coordinate and provide resources with '1-click' to anyone seeking to plan a trip within the Wasatch Front. For individuals or agencies looking to schedule a trip, the Utah Ride Link Trip Planner provides a centralized database containing transportation resources from participating transportation providers along the Wasatch Front to quickly and easily identify trip options that can meet the needs of the potential rider.

In addition to trip planning, Utah Ride Link *(utahridelink.org)* provides information about available funding programs, travel training, volunteer driver programs, alternative transportation solutions, and more for agencies that are investigating transportation options for clients or considering participation in the UTA coordinated mobility effort. Utah Ride Link is a useful trip planning tool that helps to remove the gaps in access to transportation that are sometimes created because potential riders do not know how to find available transportation services. However, if transportation is not available during the time of day or day of the week when the ride is needed, or if there are no services to meet the mobility needs of the rider (such as door-to-

door or wheelchair accessible service), or if the passenger fare is more than the individual can afford, then the gap in mobility is still a barrier for the potential rider.

This study is intended to analyze and identify the gaps in services and unmet needs and to suggest services or service coordination approaches to overcome them. It is possible that additional funding or changes in funding requirements for specialized transportation will be needed in order to make the necessary changes. Therefore, this study also seeks to identify existing transportation expenses for specialized services as well as their revenue streams. With this combination of data and information, UTA and its stakeholders will be able to collectively decide on the most appropriate comprehensive approach to reducing or removing gaps in mobility for older adults and individuals with disabilities.

Methodology and Overview

The information included in Technical Memorandum #1 was collected through research of existing data and statistics, extensive stakeholder involvement through interviews and surveys, and public outreach including community presentations, surveys, and focus groups. The following list provides an outline of the contents of Technical Memorandum #1. Each section includes an overview of the approach to specific data collection and analysis.

Section 1: Current Situation Report

Chapter 1: Demographic and Socio-Economic Conditions

Chapter 2: Inventory of Existing Transportation Services

Section 2: Stakeholder Assessment

Chapter 3: Public and Stakeholder Input

Stakeholder Interviews

Public Surveys/Meetings

Focus Group Meetings

Chapter 4: Gaps and Barriers Identification

Chapter 5: Case Studies

CHAPTER 1: DEMOGRAPHIC AND SOCIO-ECONOMIC CONDITIONS

Demographic and socio-economic conditions impact a person's choices of transportation mode. Typically, age, income, and disability status are strong indicators of specialized transportation needs and eligibility. Likewise, the locations with high population densities of these population groups often generate the highest levels of demand for fixed route and demand response specialized transportation services.

For the purpose of this study, older adults are defined as individuals age 65 and older. Older adults have a higher likelihood of using public or human service agency transportation services, or relying on friends or family members to drive them to appointments or daily errands. Income is also an indicator of a person's likelihood to use public or human service agency transportation if it is available. Shared ride services are often more cost effective than owning and operating a car. For the purpose of this report, households with low incomes are defined as earning less than $49,000

per year, according to the 2016 5-Year American Community Survey income categories.

Mobility limitations caused by a disability are also indicators of a person's likelihood to use specialized

Exhibit 23. Study area
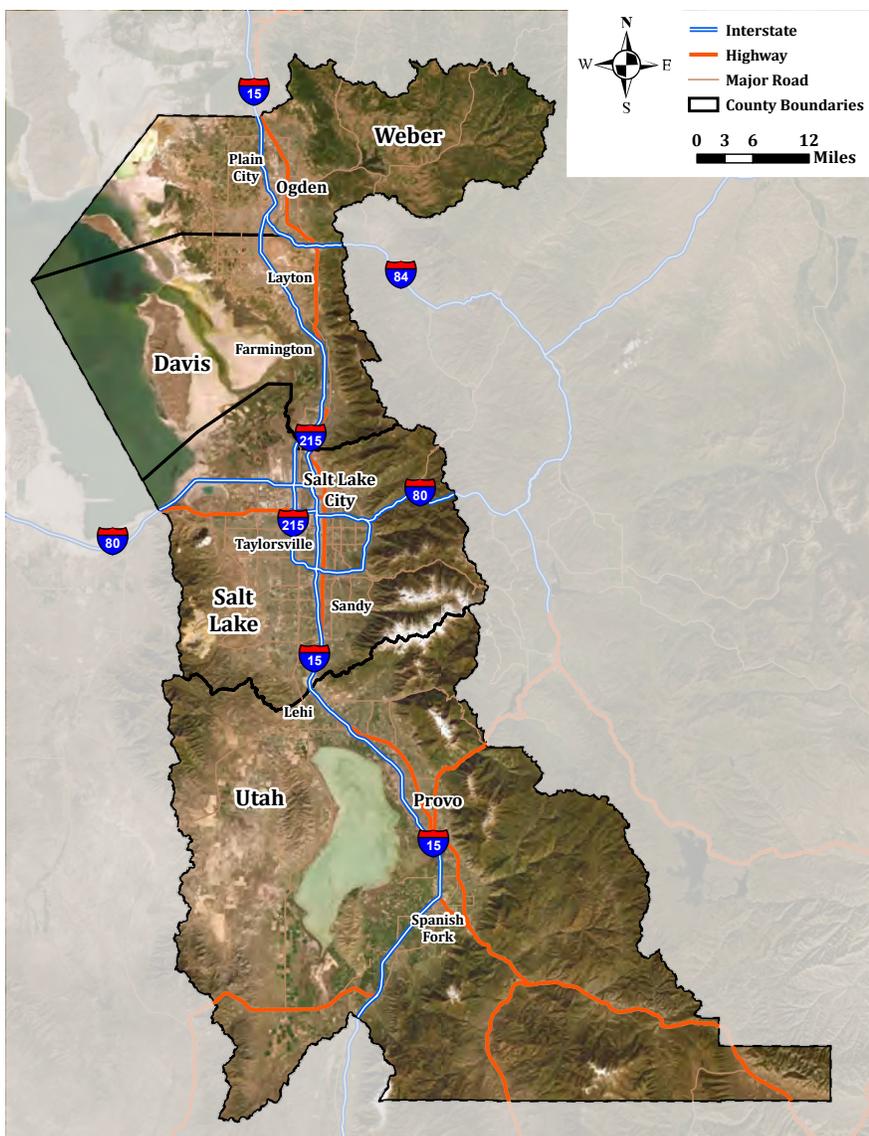
transportation including vehicles that are wheelchair accessible or services that pick-up/drop-off at the curb or door, or have a bus stop within ¼ mile or less of the person's residence. Accurately measuring the geographic densities of individuals with mobility limitations is challenging because the U.S. Census Bureau does not segregate the nature of a person's disability. Therefore, data includes all types of disability reported to the Census, even if it does not involve a mobility limitation. Furthermore, the smallest level of data about the geographic location of individuals with disabilities is the Census Tract level. Data was not available by acre, as listed in the previous maps.

The geographic area included in this plan includes Weber, Davis, Salt Lake, and Utah Counties. All of these counties are part of the larger Wasatch Front where just over 75 percent of Utah's population is concentrated.[1] Data for each target population group were aggregated by acre and used for the analysis of existing demographic and socio-economic conditions.

Weber County

Weber County is Utah's fourth-most populous county and it is part of the Ogden-Clearfield Metropolitan Statistical Area as well as the Salt Lake City-Provo-Orem Combined Statistical Area. The county seat and largest city is Ogden. It is located north of Davis County and represents the northern boundary of the study area for this report.

[1] 2010 U.S. Census Bureau data.

OLDER ADULT POPULATION

The highest densities of older adult populations are in Roy, Riverdale, South Ogden, Ogden, and North Ogden. Moderately high and low-densities are scattered throughout the county, primarily between I-15 and US 89.

Exhibit 24. Weber County older adults
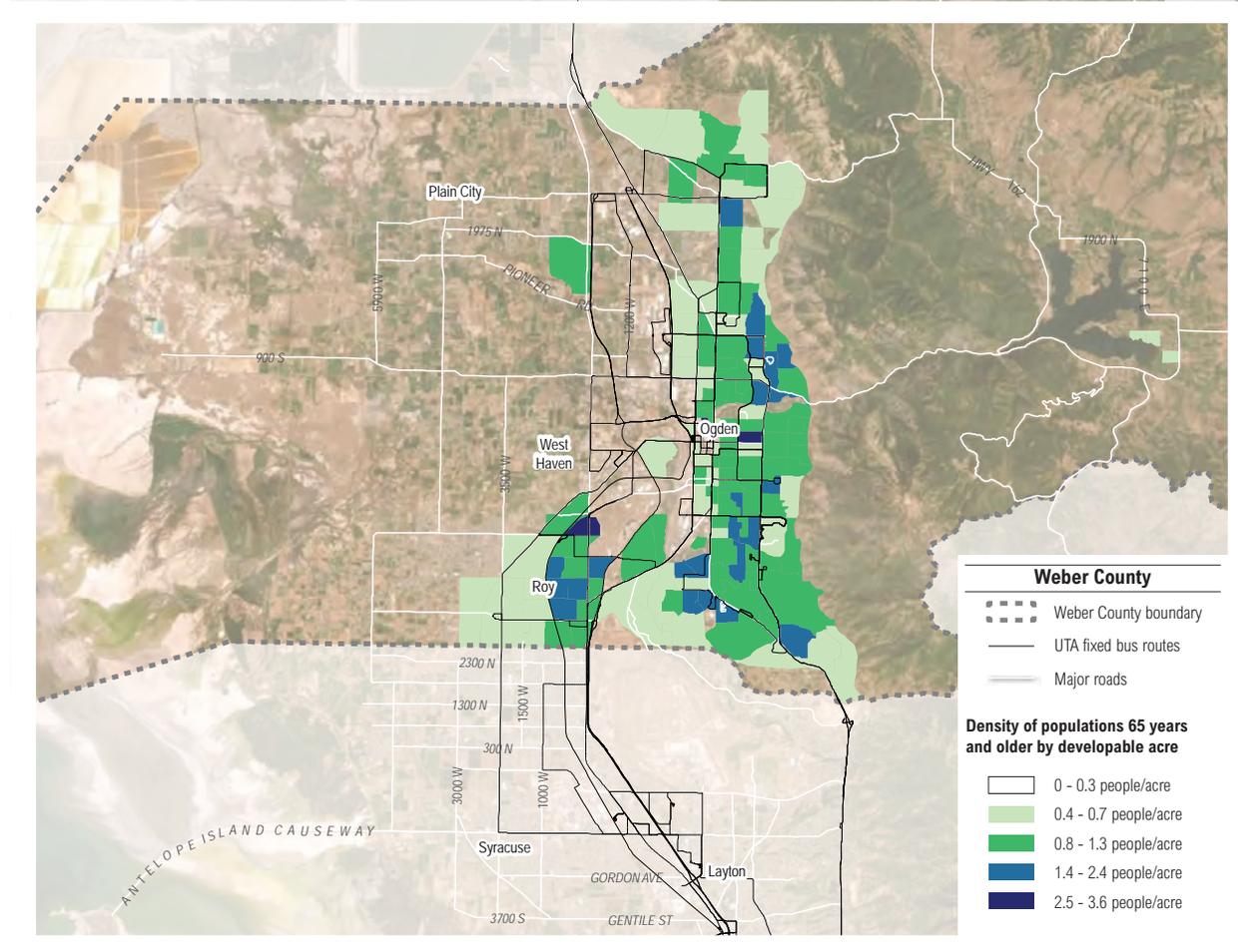
HOUSEHOLDS WITH LOW INCOMES

The highest densities of households with low incomes are located in Ogden and South Ogden.

Moderately high densities are in those communities as well as in Roy (east side), Riverdale, and North Ogden.

Exhibit 25. Weber County low income households

Weber County

- ┄┄ Weber County boundary
- ─── UTA fixed bus routes
- ─── Major roads

Density of low income households (< $49,000/year*) by developable acre

- 0 - 0.5 households/acre
- 0.6 - 1.4 households/acre
- 1.5 - 2.4 households/acre
- 2.4 - 4.2 households/acre
- 4.3 - 10.3 households/acre

Data derived from 2016 5-Year ACS income categories
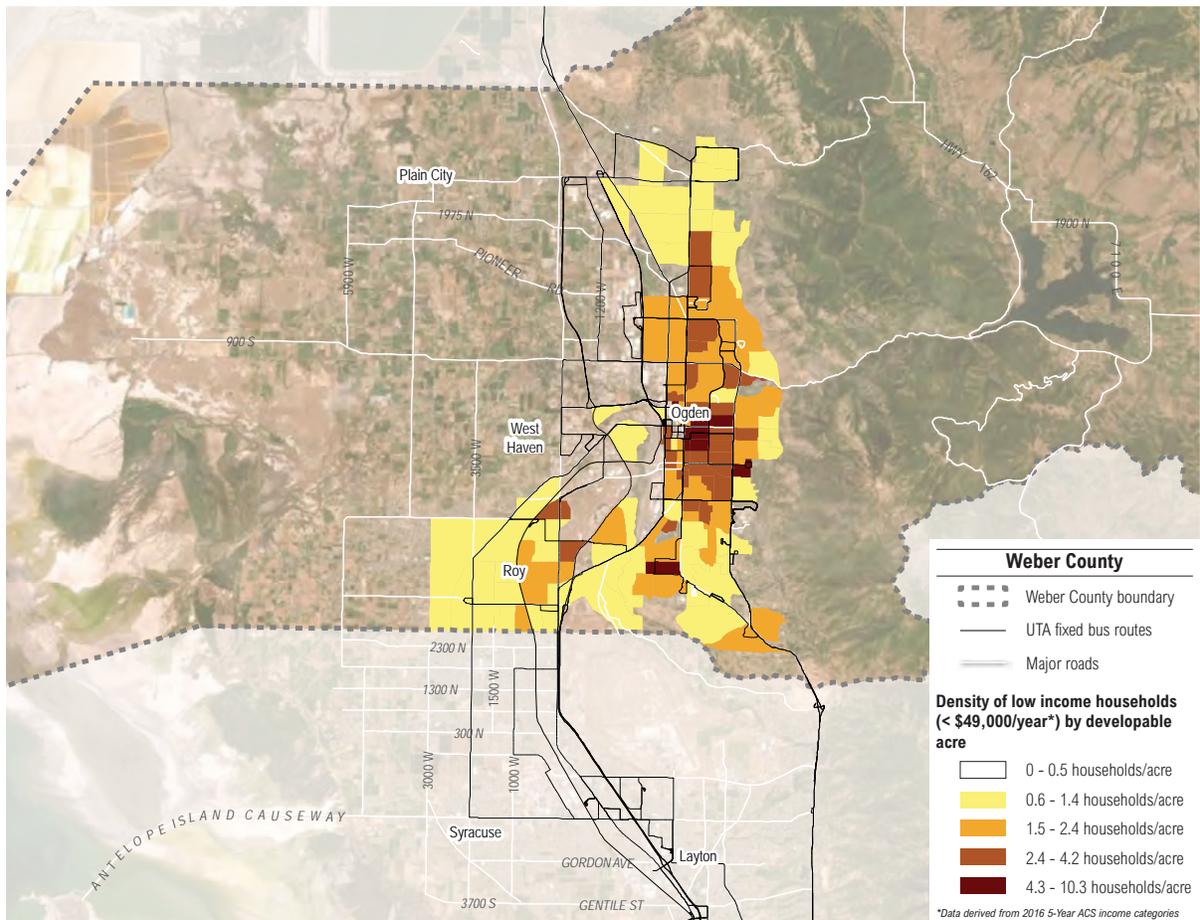
INDIVIDUALS WITH DISABILITIES

In Weber County, the highest densities of individuals with disabilities are in Ogden. Moderately high densities are also present in Roy.

When population density is low, demand response or volunteer transportation is usually the most cost-effective mode of service. But it is important to note the possibility of needing an accessible vehicle to serve trip needs.

Exhibit 26. Weber County individuals with disabilities
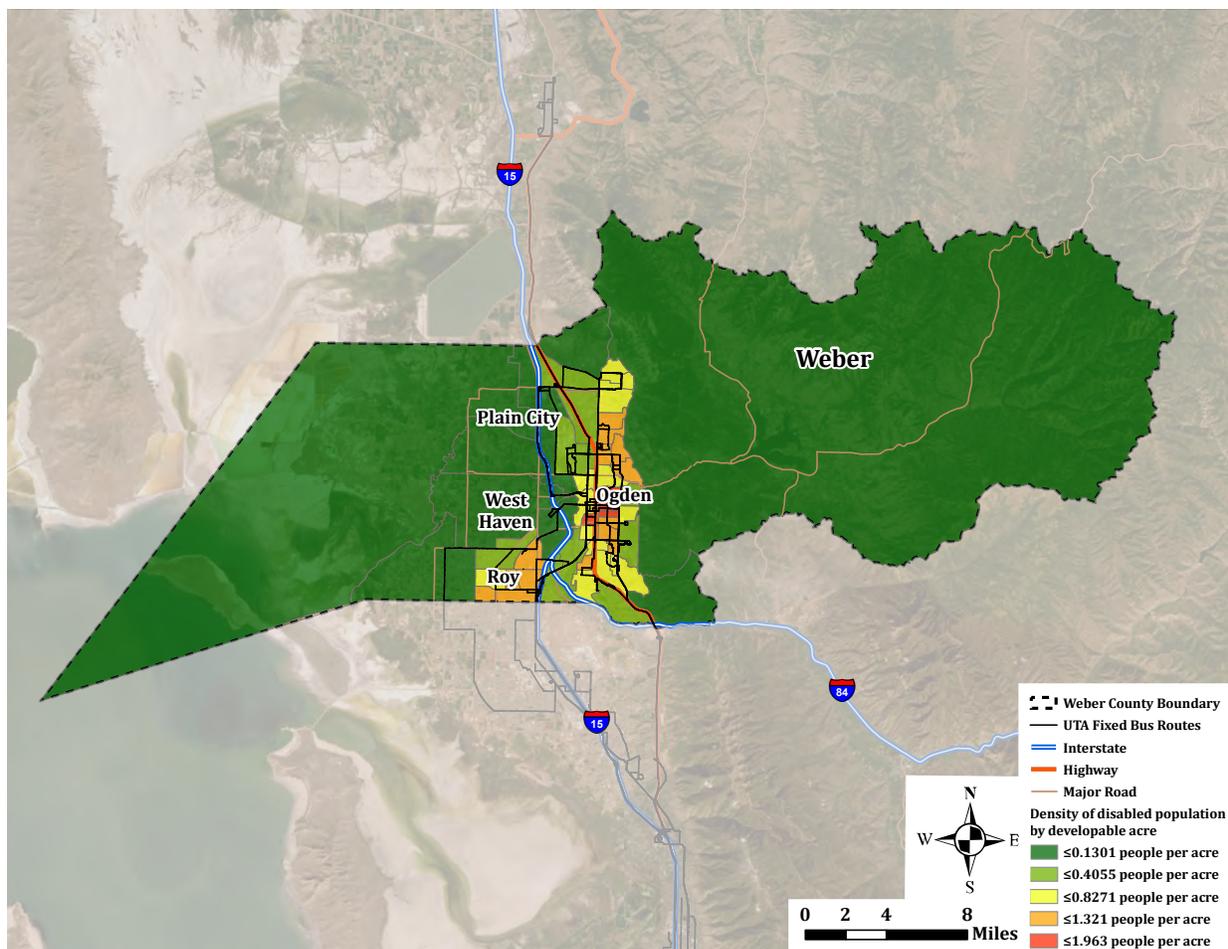
Davis County

Davis County is located north of Salt Lake and south of Weber Counties. It is Utah's smallest county with only 223 square miles of land area. However, it is the third largest county in population with 248,000 residents living in 15 communities. Davis County has a network of suburban communities and small towns with diverse employment opportunities.[2]

OLDER ADULT POPULATION

In Davis County, the highest concentrations of individuals age 65 and older are near Interstate 15 (I-15), in and around the communities of North Salt Lake, Bountiful and Centerville. Scattered high-density areas are also located in northern Davis County in and around Kaysville, Layton, Sunset, and Roy. Moderate to low densities of older adults are present along I-15 through the Farmington area and also in the areas east of I-15.

Exhibit 27. Davis County older adults

---
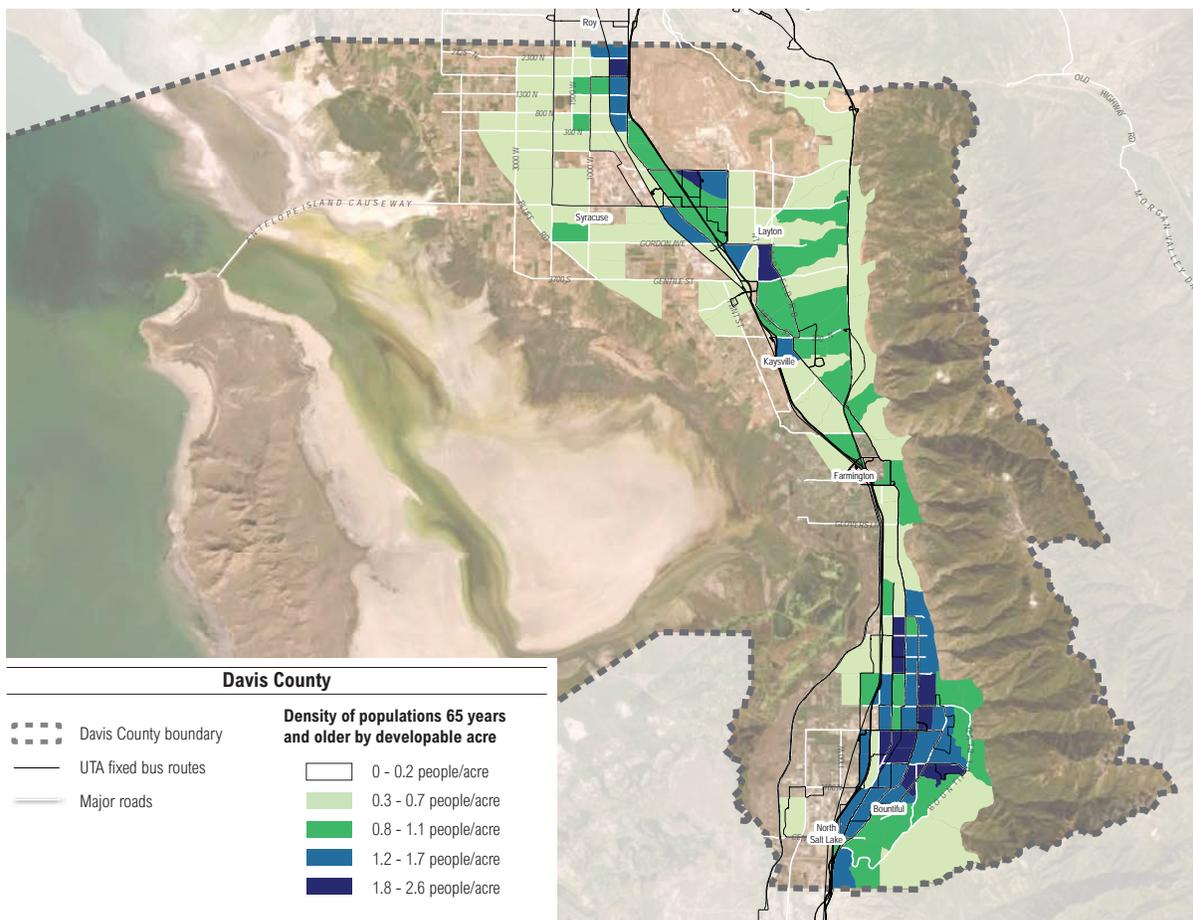
[2] www.daviscountyutah.gov/county-info/county-history

HOUSEHOLDS WITH LOW INCOMES

In Davis County, areas with highest or moderately high densities of low-income households (defined as less than $49,000 per year) are located near I-15 in the communities of North Salt Lake, Bountiful, Kaysville, Layton, and Sunset.

Exhibit 28. Davis County low income households

Davis County

- Davis County boundary
- UTA fixed bus routes
- Major roads

Density of low income households (< $49,000/year) by developable acre

- 0 - 0.3 households/acre
- 0.4 - 0.8 households/acre
- 0.9 - 1.4 households/acre
- 1.5 - 2.2 households/acre
- 2.3 - 3.5 households/acre

Data derived from 2016 5-Year ACS income categories
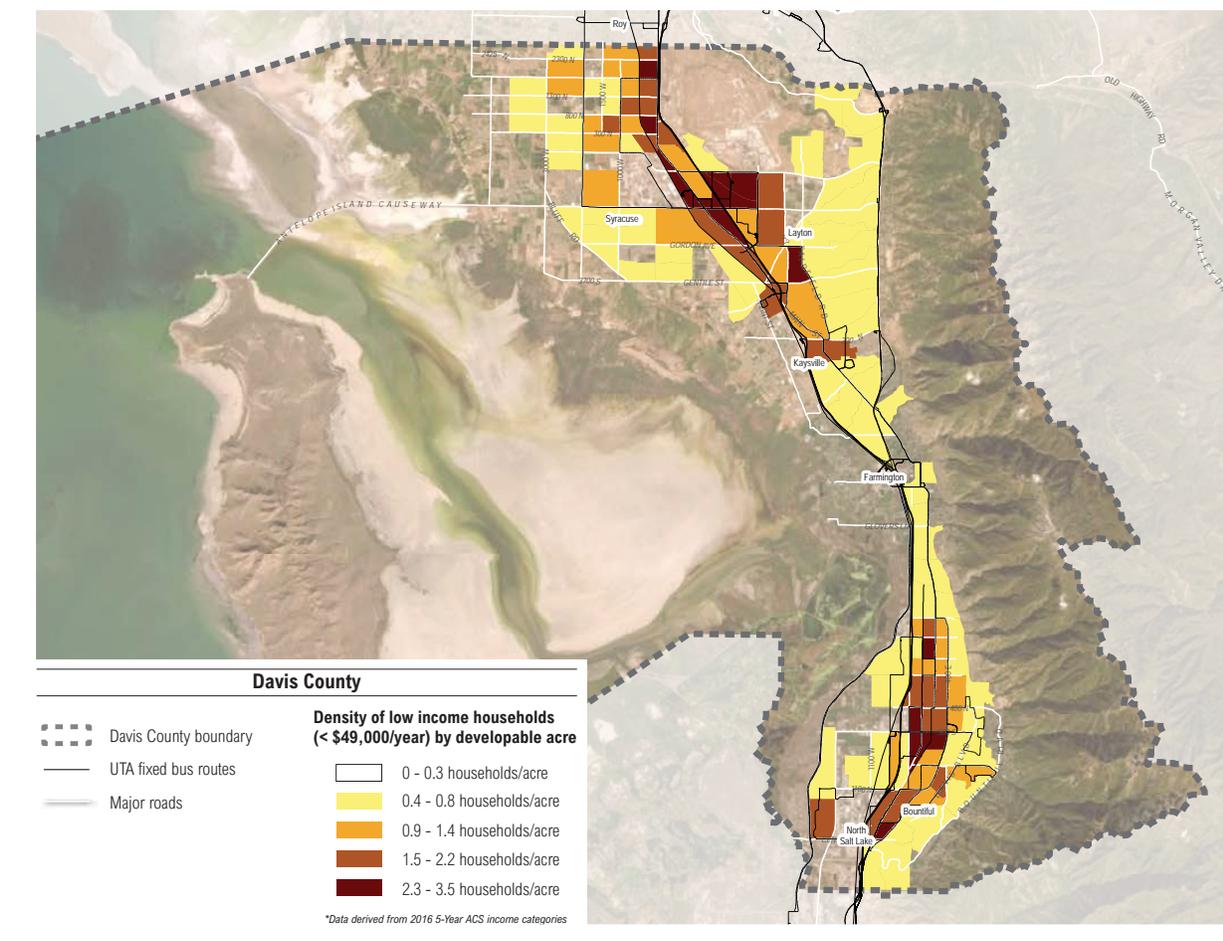
INDIVIDUALS WITH DISABILITIES

In Davis County, the highest densities of individuals with disabilities is in the area of Syracuse and Layton and also in and around Bountiful and North Salt Lake. The Farmington and Kaysville areas have lower densities.

Exhibit 29. Davis County individuals with disabilities
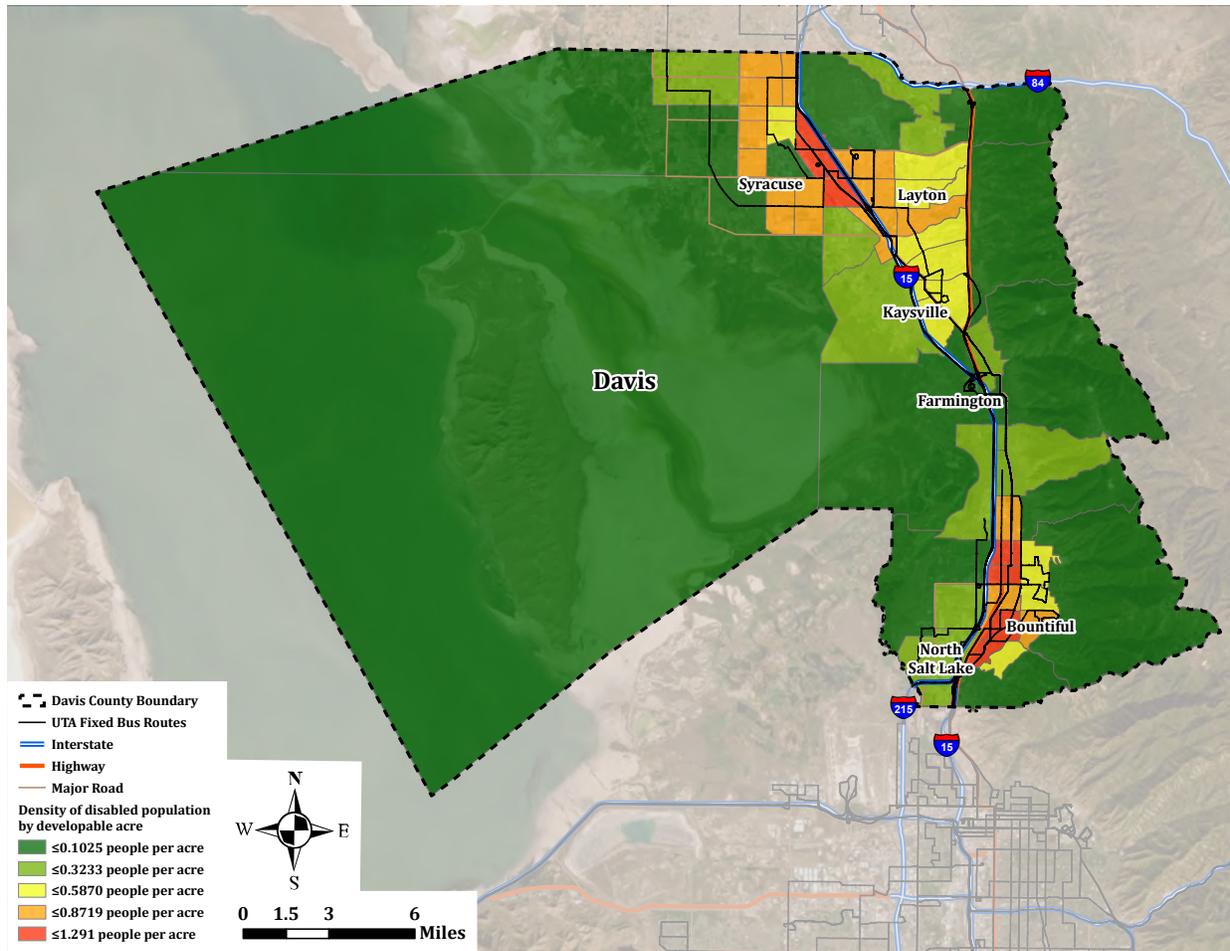
Salt Lake County

Salt Lake County is the most populous county in Utah, with 1.15 million people in 2018. It is also home to the state capital, Salt Lake City. The county is served by three Interstate Highways and one U.S. Highway, as well as one major expressway. US-89 enters from Davis County to the north and merges with I-15 in Draper. I-15 and I-80 intersect just west of Downtown Salt Lake City. The Legacy Parkway connects with I-215 at the north end of the valley, providing an alternative route into Davis County.

OLDER ADULTS

The highest densities of older adults are located in the north and central areas of Salt Lake City. There are numerous acres with moderately high densities in and around Cottonwood Heights, Holladay, Murray, Millcreek, Salt Lake City, Taylorsville, and West Valley City. Moderate densities exist throughout these same communities as well as in Draper, Sandy, West Jordan, South Jordan, Riverton, and Bluffdale.

Exhibit 30. Salt Lake County older adults
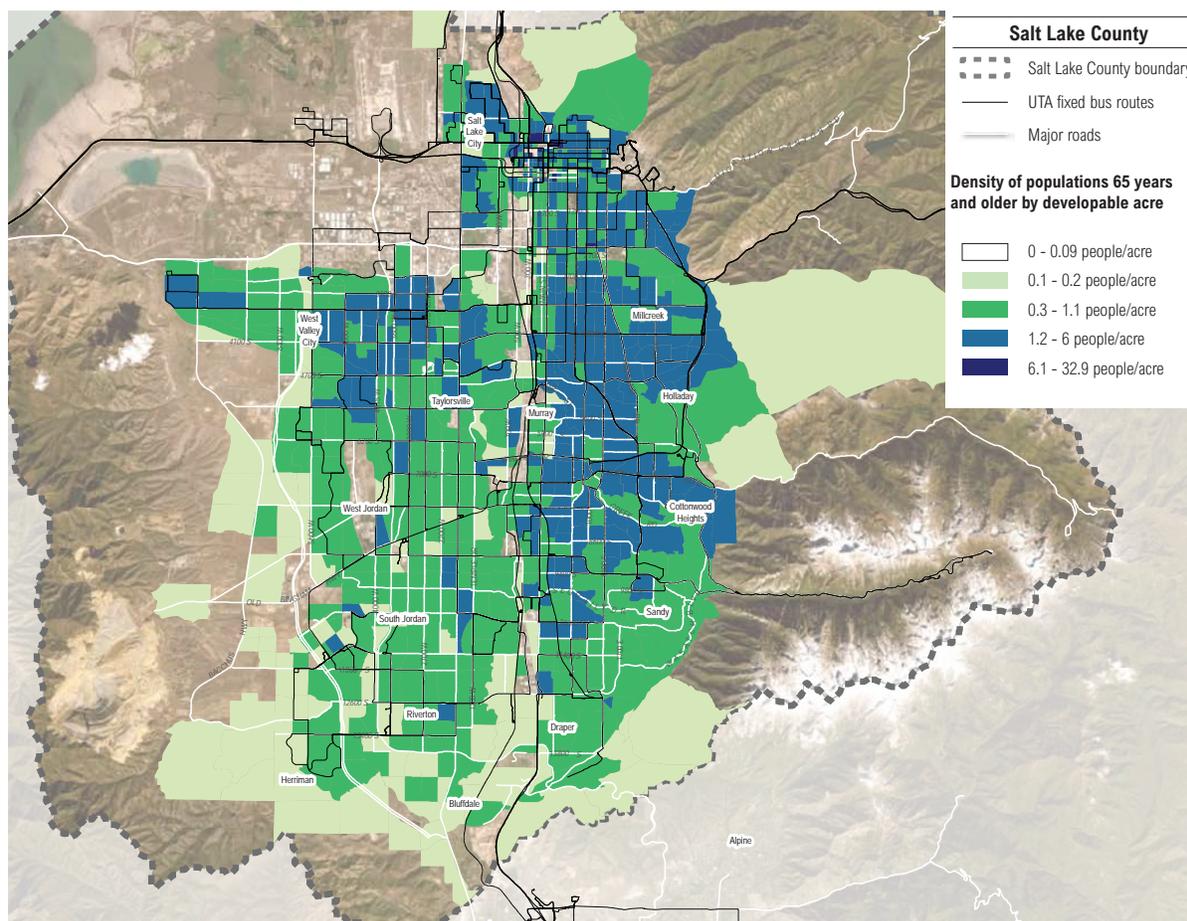
HOUSEHOLDS WITH LOW INCOMES

The distribution of households with low incomes (earning less than $49,000 per year) is very similar to the distribution of older adult densities. Therefore, it is likely that many of the low-income households also have at least one adult age 65 or older. The highest densities of households with low incomes are located in the north and central areas of Salt Lake City. There are numerous acres with moderately high densities in and around Cottonwood Heights, Holladay, Murray, Millcreek, Salt Lake City, Taylorsville, and West Valley City. Moderate densities exist throughout these same communities as well as in Draper, Sandy, West Jordan, South Jordan, Riverton, and Bluffdale.

Exhibit 31. Salt Lake County low income households
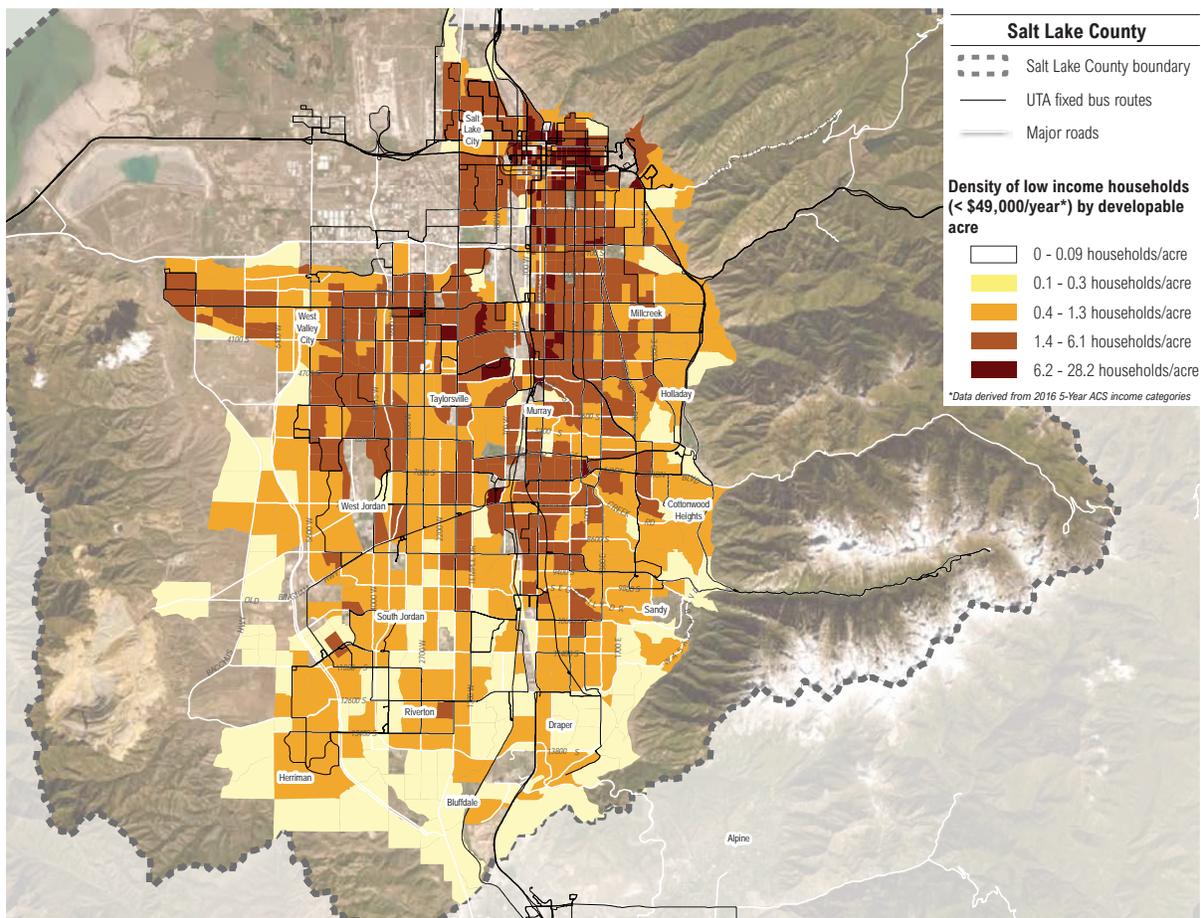
INDIVIDUALS WITH DISABILITIES

The highest densities of individuals with disabilities are located in northern Salt Lake City. Moderate densities are scattered throughout Salt Lake City and the surrounding communities. Lower densities are located in the southern and western portions of the county.

Exhibit 32. Salt Lake County individuals with disabilities
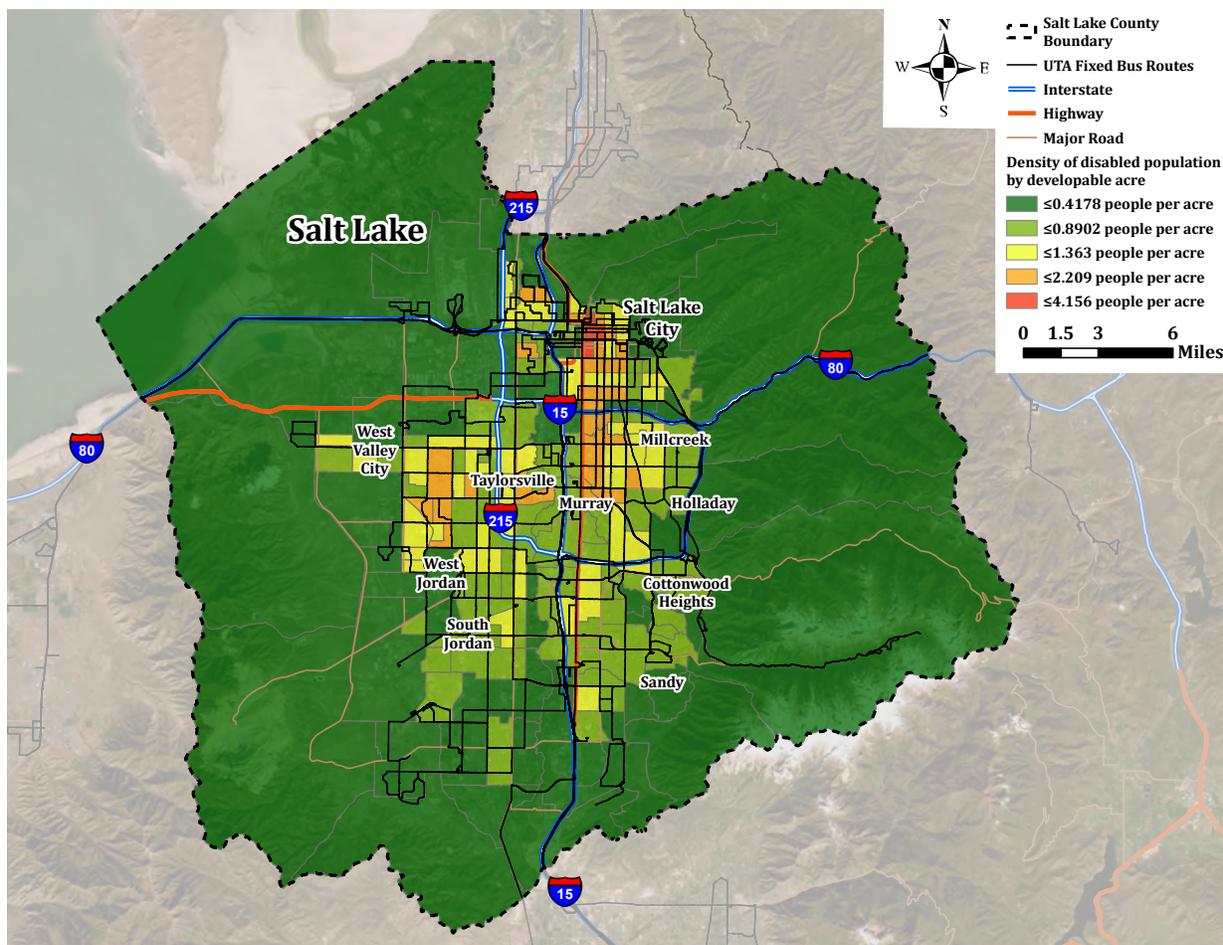
Utah County

Bordering Salt Lake County to the south, Utah County is the second most populous county in the state. The county seat is Provo, which is also the state's third-largest city. Utah County is part of the Provo-Orem Metropolitan Statistical Area as well as the Salt Lake City-Provo-Orem Combined Statistical Area.

OLDER ADULTS

Utah County's population is relatively young. In 2018, the median age of all people in Utah County was 25. The highest densities of older adults are in Orem and American Fork. Moderately high densities of older adults are also in Orem, and American Fork, as well as in Springvale, Lehi, and Alpine. The areas around Lehi, Highland, and north of Lindon as well as south of Provo tend to have lower densities of older adults.

Exhibit 33. Utah County older adults
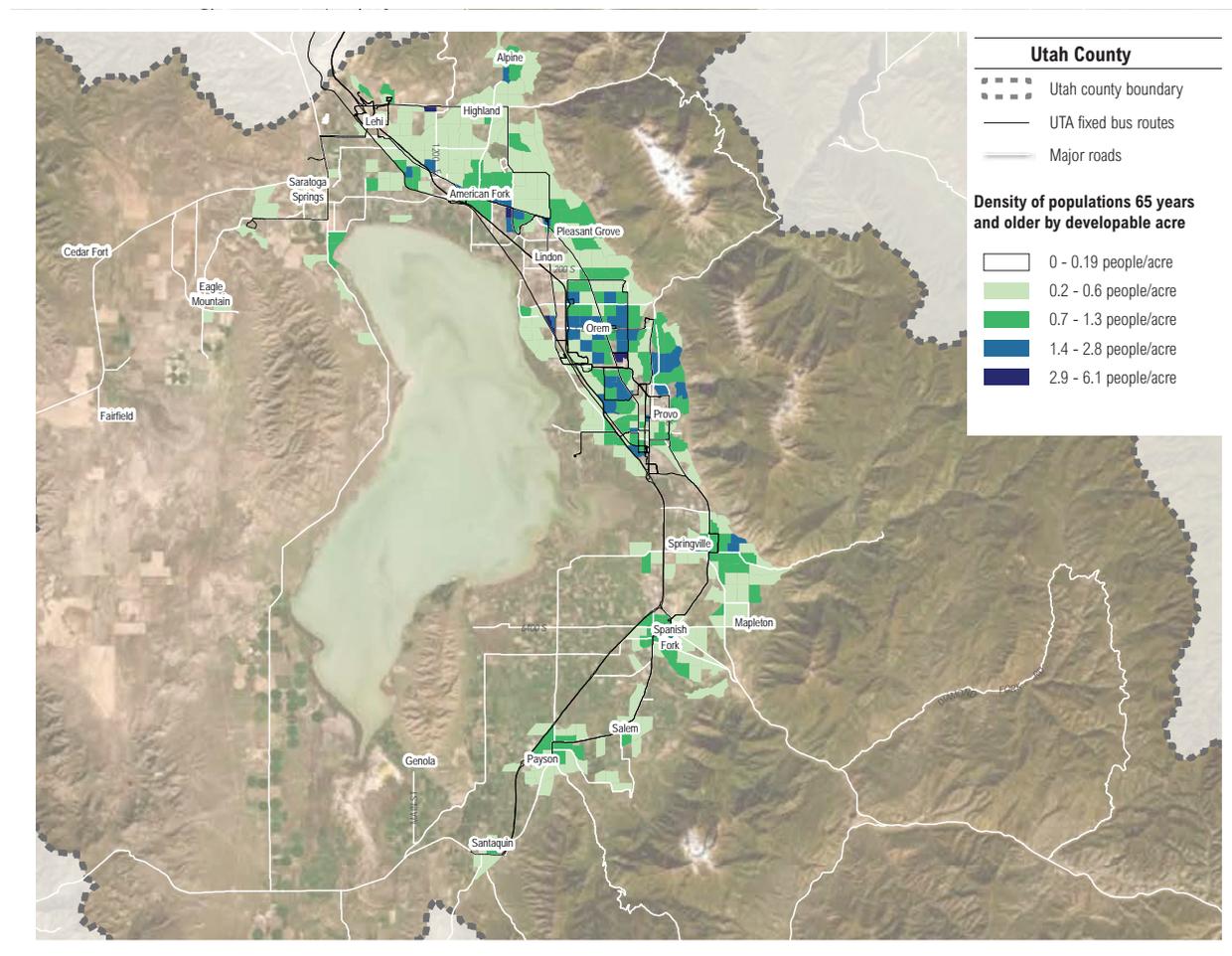
HOUSEHOLDS WITH LOW INCOMES

According to the American Community Survey 2018 5-year estimates, the median household income in Utah County was $68,374 (approximately $6,000 higher than the U.S. median household income). By

contrast, Provo is the location with the most acres of high-density households with low incomes (less than $49,000 per year). Some moderate to high-density acres also exist in American Fork, Pleasant Grove, and Orem.

Exhibit 34. Utah County low income households
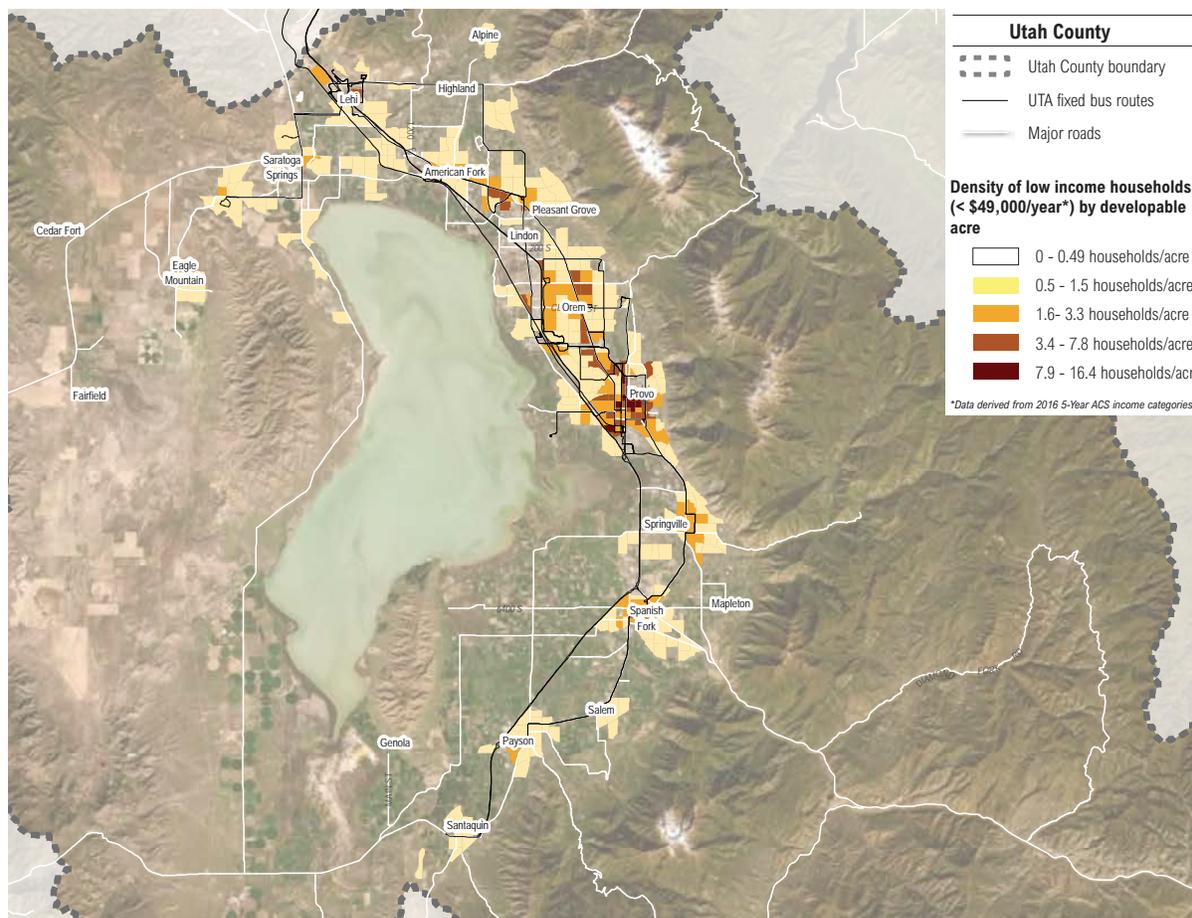
INDIVIDUALS WITH DISABILITIES

Areas with the highest densities of individuals with disabilities are in American Fork, Pleasant Grove, Orem, and Provo. Moderate densities of individuals with disabilities are in Spanish Fork. Based on demographic information these areas along with those identified with high densities of older adults will generate the highest demand for specialized transportation services in Utah County.

Exhibit 35. Utah County individuals with disabilities
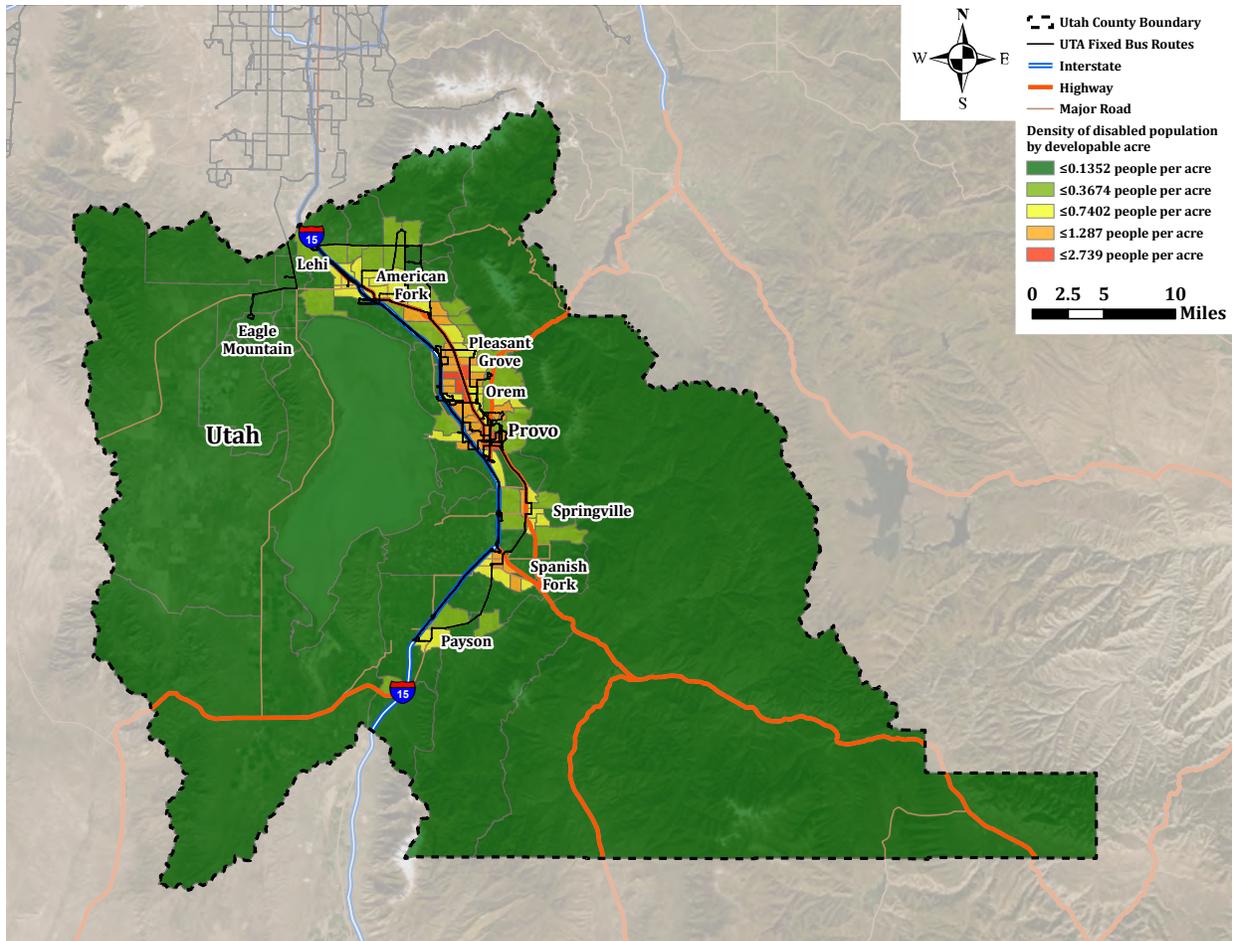
CHAPTER 2: INVENTORY OF EXISTING TRANSPORTATION SERVICES

Regional Transportation Service Overview

The inventory of transportation providers serving the Wasatch Front includes public, non-profit, human service agency and private transportation services. In total, there are approximately 100 organizations that provide transportation for seniors, individuals with disabilities, people with low incomes, and veterans in the Wasatch Front. As illustrated in the following exhibit, a significant portion of the available services provides transportation for seniors and most of those transportation programs are operated through publicly funded senior centers or senior companion programs. Transportation programs operated for individuals with disabilities or people with low incomes include public and private non-profit, government, and private for-profit agencies. Most of the transportation programs supporting individuals with low incomes or people with disabilities are operated by public non-profit agencies. Together this mosaic of specialized transportation services supports mobility options for eligible population groups.

Exhibit 36. Count of agencies serving the target populations
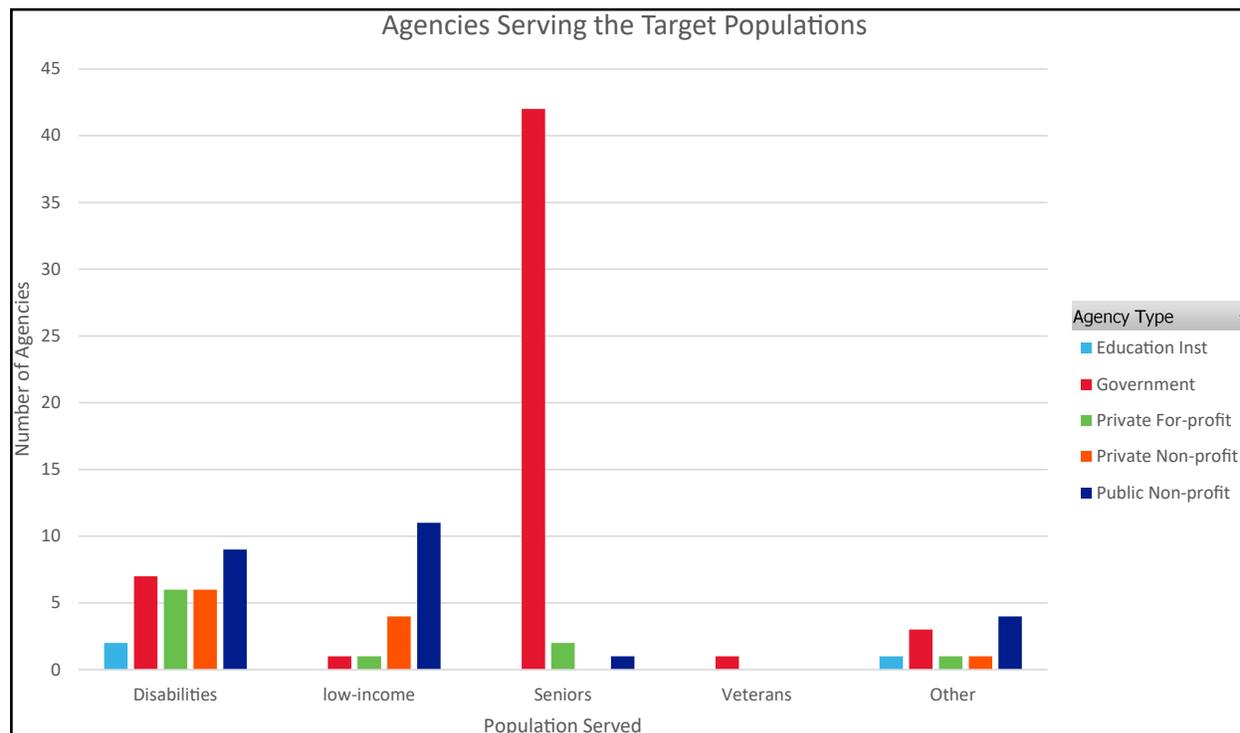
Source: UTA Survey, 2015.

The following paragraphs briefly describe the types of transportation services that are included in the above noted chart and analyzed in this study.

Utah Transit Authority (UTA) public transportation services are the heart of the region's transportation network. With its various modal options, UTA offers options for anyone traveling within the service area including routes and services in Salt Lake, Davis, Weber, and Utah Counties.

Specialized transportation programs and services offered by other agencies were created to address the gaps in public transit services with more specialized programs that meet the specific needs of unserved or underserved populations. Some of the gaps that specialized transportation services sought to address include trips with origins or destinations outside of the UTA bus routes and ADA paratransit service area boundaries; door-to-door trips for people with mobility limitations preventing them from accessing UTA fixed routes; on-demand transportation for trips that cannot be scheduled in advance or to address the need for travel directly from origin to destination; and/or group trips to meet agency program client needs. Additional information about UTA services and programs as well as their coordination with other providers and programs is provided in the following paragraphs.

Human service agencies (HSAs) represent one of the primary types of organizations that have developed specialized transportation programs to fill gaps and unmet transportation needs. HSA transportation programs provide rides to individuals who meet specific eligibility requirements such as older adults, individuals with disabilities, and/or people with low incomes. They are operated by public or private non-profit organizations that provide transportation as an ancillary service to their clients or an eligible segment of the population. An example of an HSA program in the Wasatch Front is vehicles operated by Senior Centers to bring passengers to/from nutrition sites and/or to run errands. These trips are typically operated within a limited geographic service area immediately surrounding the senior center and with limited hours of operation. Some, but not all, of these programs have wheelchair accessible vehicles.

In the case of senior nutrition program transportation, the service is funded, in part, with Federal Older Americans Act funds that are allocated through the Administration on Aging to the Utah Department of Human Services and then passed through to county departments for senior services. Funds are specifically designated for senior nutrition program support. Some programs also utilize Federal Transit Administration Section 5310 Grant Program funding to purchase vehicles for transporting seniors.

Non-emergency medical transportation (NEMT) for Medicaid eligible trips are also funded through the Department of Human Services and managed through the Medicaid Waiver program, UTA, or through the statewide transportation brokerage agreement.

Veterans also have access to transportation programs that are funded locally or at the Federal level. These programs typically operate with volunteer drivers and are regional, offering service in multiple counties and to veterans who are traveling to appointments at the Veterans Affairs Medical Center.

Many **Public or Private Non-Profit** agencies provide transportation for their eligible members or consumers because other available transportation programs do not meet their needs. These agencies often operate services with specialized aspects such as drivers with additional training for unique passenger requirements, or single passenger per trip services for passengers that may need a direct trip due to health or other

conditions. Non-profit organizations often develop transportation programs to fill the gaps that cannot be served by other agencies.

Finally, **private transportation** services such as taxis, medical transportation services, and transportation network companies (TNCs) provide specialized transportation for older adults and individuals with disabilities as well as for the general public. Private companies exist on passenger fares and/or contracts with public or private entities.

Together, this network of transportation options supports mobility in the Wasatch Front for trips that are not completed with a personal vehicle, friend or family member.

Local Transportation Provider Inventory

Information about local transportation services was collected through interviews with transportation program staff, an on-line provider survey, and review of recently completed surveys and studies

conducted by the UTA. The intent of the interview process was to document existing characteristics and levels of transportation services for each organization and to discuss future plans for service changes that would address gaps and unmet needs. The interview process also sought to identify existing sources of revenue that support the transportation services provided by each agency so that potential opportunities for maximizing the utilization of local, state, and federal resources that support transportation. The following paragraphs and charts outline the results of the inventory. Detailed inventory information about key participating transportation providers is included in the appendix. Key transportation providers are those organizations that operate a significant amount of public or human service agency transportation services for older adults, individuals with disabilities, and people with low incomes.

Table 11 summarizes the list of key public and human service agency transportation providers serving each county in the Wasatch Front. The

Table 11. Local Public and Human Service Agency Transportation Providers

Davis and Weber Counties	Utah County	Salt Lake County	Regional/Statewide
▲ Enable Utah	▲ Ability First Utah	▲ Bear-O-Care	▲ Utah Developmental Disabilities Council
▲ PARC	▲ Enable Utah	▲ Columbus Center	■ ● Utah Department of Human Services
▲ Roads to Independence	▲ TURN Community Services	▲ Utah Independent Living Center	▽ Utah Transit Authority Paratransit
■ Davis County Health and Senior Services	▲ ■ ● United Way of Utah County	▲ Work Activity Center	
■ Davis County Meals on Wheels	■ Mountainland Association of Governments (Aging and Family Services)	■ Aging and Adult Services	
■ Weber County Human Services (Senior/Aging Services)	▫ Utah County Veterans Services	▫ Disabled American Veterans	
■ Weber County Senior Companions	▽ Destination Services		
▫ Continue Mission	▽ Kids on the Move (Head Start)		
▫ Disabled American Veterans			

▲ people with disabilities   ■ older adults   ● people with low income   ▫ veterans   ▽ other

transportation programs within each of these agencies serves a specific geographic area and, other than UTA, passenger eligibility is based on individual agency or program funding requirements. Eligibility requirements for each program are identified by the symbols. This table does not include private operators which also serve a very important role in the network of transportation services.

The following paragraphs describe the transportation services available in each county and regionally (across multiple counties). As illustrated in the discussion, each county has a unique approach to addressing the local specialized transportation needs. Some programs operate autonomously while others maximize opportunities to work with partners through contractual agreements in an effort to maximize service efficiency and cost effectiveness while sustaining strong customer service.

Public Transportation

UTA services include more than 100 bus routes, TRAX and FrontRunner rail services, travel training, flex bus, streetcar, bus rapid transit, Americans with Disabilities Act (ADA) paratransit, vanpool, volunteer voucher programs, and innovative mobility. The variety of transportation options offered by UTA handle an impressive 44.5 million+ passenger trips per year and satisfy the day-to-day transportation needs in the greater part of the region. The service area covers the majority of Salt Lake County, and reaches into significant portions of Davis, Weber, and Utah Counties. As previously stated, UTA public transportation is the core of the transportation network for the region and it provides a variety of service modes for the general public as well as specialized services for eligible individuals with disabilities.

Primary funding sources for UTA public transit services include a combination of Federal Transit Administration (FTA) formula grants, a portion of local sales tax, and passenger revenues. UTA also

manages the FTA Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities grant program for the region which supports mobility management activities including travel training and voucher programs. The Section 5310 program also supports the purchase of vehicles for eligible non-profit organizations serving seniors and individuals with disabilities. The Section 5310 program also supports mobility management activities.

UTA services that benefit individuals with disabilities and older adults are outlined in the following bullet points. Additional discussion of UTA's role in individual counties is provided under each county's heading.

▶ **Coordinated Mobility** exists to coordinate and provide resources among human service entities to efficiently maximize transportation for seniors, individuals with disabilities, and other groups with unmet transportation needs. UTA coordinates customer groups, service providers and funding agencies resulting in a more efficient transportation delivery service. To learn more about transportation options that are available through Coordinated Mobility, visit Utahridelink.org.

▶ **Innovative Mobility** at UTA involves development of ridesharing, microtransit, Mobility-as-a-Service, connected vehicles, and mobility-on-demand. It incorporates public-private partnerships to enhance transportation options to fill the gaps and unmet needs in the public transit structure.

▶ **UTA Paratransit** is designed for people whose functional abilities require individualized transportation service. Trips can be scheduled in advance and provide riders with curb-to-curb transportation. The fleet includes wheelchair-accessible buses and vans. Riders must be approved through an in-person interview and abilities assessment. The service area is within ¾ mile of UTA fixed route services.

▶ **UTA Fixed Routes** are operated throughout Box Elder, Weber, Davis, Tooele, Salt Lake, Summit, and Utah Counties. Riders can choose

from more than 120 bus routes. The fleet is comprised of efficient diesel, hybrid-electric and compressed natural gas (CNG) buses, as well smaller paratransit and flex route buses. Routes operate on a fixed schedule and route.

▶ **UTA Flex Route** buses combine the convenience and affordability of public transit with the ability to access off-route destinations. The buses run on a fixed route and schedule, but passengers can request a deviation or a special stop up to ¾ mile from a regular route. Deviations are available to all riders but need to be scheduled no less than two hours before the trip and no more than seven days in advance.

▶ **Non-Emergency Medical Transportation** for Medicaid-eligible trips are provided by UTA. Passengers use a Punch Pass to validate fares. UTA calculates a percent via an annual onboard survey and formula accepted by DHS for payment. Logisticare provides Medicaid trips UTA cannot perform.

▶ **Streetcar** services is Utah's first modern trolley. The S Line connects residential and commercial areas in Sugar House and South Salt Lake City. It is a two-mile line that connects with TRAX and bus lines.

▶ **Bus Rapid Transit (BRT)** uses specialized/ articulated buses that run in dedicated traffic lanes to efficiently transport large numbers of riders to their destinations. There are two BRT lines: 1) Utah Valley Express – a 10-mile line in Provo and Orem; and 2) 35 MAX – a 9-mile line connecting Magna and West Valley to the Millcreek TRAX Station.

▶ **Vanpool**, UTA leases vans to individuals who travel to and from similar locations. Most vanpools have 7 to 15 passengers and they split the cost evenly.

▶ **Travel Training** is provided by UTA to teach passengers how to navigate fixed routes, TRAX and FrontRunner. Travel training allows customers to travel independently by helping them to gain an understanding of UTA bus and train systems, maneuver their mobility aid on and off buses and trains, get to specific destinations or general usage, and more.

Additional information is provided under the Regional Transportation heading in this chapter.

Davis and Weber Counties Public and Human Service Agency Transportation Service Characteristics

Specialized transportation services for individuals with disabilities, older adults, and veterans are operated locally in Davis and Weber Counties. These programs incorporate volunteers and agency staff using agency-owned vehicles.

UTA operates public transportation in some portions of the counties (see map), and private ride hailing services (taxis, Uber, and Lyft) are available.

TRANSPORTATION FOR OLDER ADULTS

Davis County Health Aging and Adult Services

Adults age 60 or older are eligible for Davis County Health transportation services for trips within Davis County. Davis County Health promotes and protects the health and well-being of Davis County residents and their environment. Aging and Adult Services hosts programs that include medical appointment transportation, Meals on Wheels, and senior activity centers.

▶ Approximately 100 people per day are transported to and from the senior centers.

▶ Up to 30 people per month are turned down each month because Davis County Health does not have the capacity to provide transportation for all eligible requests.

Senior Activity Centers and Medical Appointment Transportation

Senior Center transportation is provided in Davis County to and from three senior centers, field trips, and group shopping trips. A separate program provides non-emergency medical trips to appointments and pharmacy. Davis County Health attempts to connect with UTA for trips going

Exhibit 37. Webster and Davis system map
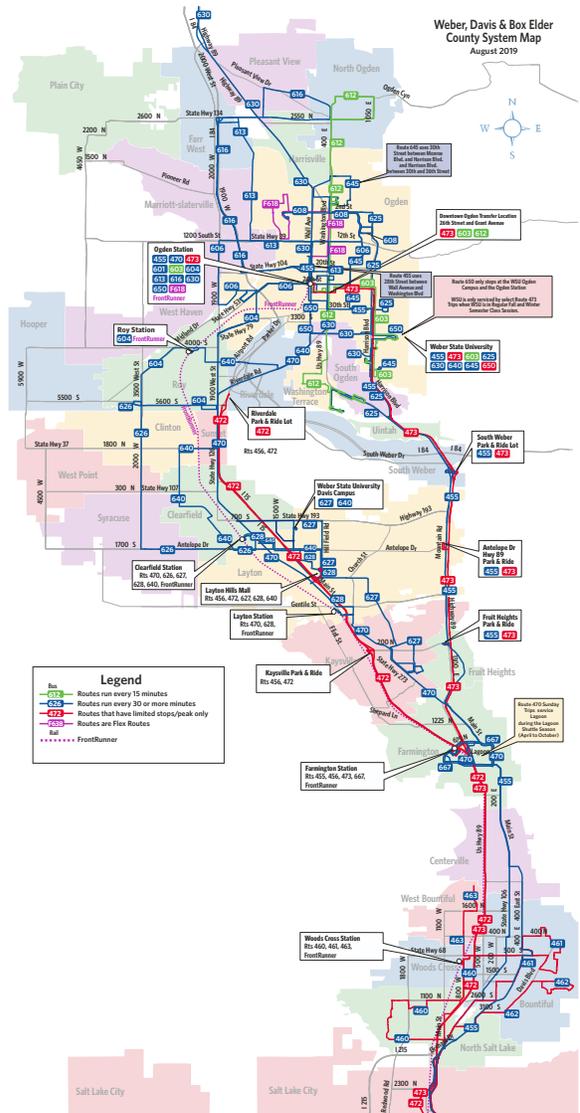
outside of Davis County, such as to the Veterans Affairs Medical Center. Connections to TRAX/ FrontRunner are most common.

▶ Hours of Operation: Monday through Friday, 9:00 AM to 3:00 PM.

▶ Staff: Davis County Health has 2 full-time and 1 part-time drivers.

- ► Fleet: One 12-passenger van; several 14-16 passenger cutaway buses; and several minivans are available in the fleet.
- ► 12,987 annual trips to/from senior centers
- ► 4,367 annual medical transportation trips

Voucher Program

The Volunteer Driver Voucher Program is available through a partnership with UTA for older adults in Davis County who verify that they cannot use other available services or that the trip they need is outside of regular hours of operation or service area boundaries for agency operated transportation. Voucher recipients are responsible for identifying an eligible volunteer driver.

- ► Approximately 588 vouchers are issued to date. However, not all of the vouchers are used. Unused vouchers are not funded. A total of 799 one-way trips were funded with the vouchers.

Table 1. Davis County Older Adult Transportation Performance and Financial Information

Agency Program	Eligibility	Annual Hours	Annual Miles	Annual Trips (one way)	Annual Costs	Funding Resources
Senior Center	Age 60+ to Senior Center	265,812	38,496	12,987	$56,544	Older Americans Act Title III-B and FTA Section 5310
Medical	Age 60+ to non-emergency medical and pharmacy	Approx. 2,040	Not Available	4,367	$146,795	
Volunteer Driver Vouchers	Age 60+ with no other options	N/A	N/A	799	$3,437.35	Davis Health matches 50% with 5310 funds. UTA designates a portion of Prop 1 funds.
Total		**267,852**	**38,496+**	**17,942**	**$203,339+**	

*Weber County Human Services,
Senior and Aging Services*

The Ride

Weber Human Service Agency serves Weber and Morgan Counties. Transportation services offered by the agency are limited to Weber County. "The Ride" senior transportation program is mainly for seniors (age 60+) who are Weber County residents. Transportation is offered as a last resort if the individual has no other options. Trips are prioritized across five levels of priority. Dialysis has top priority.

▶ Hours of Operation: 8:00 AM to 3:00 PM, Monday through Friday.

▶ Staff: 2 full-time managers; 13 part-time drivers.

▶ Fare: $4.00 per round trip suggested donation.

▶ Approximately 45 seniors ride each day.

▶ Approximately 60% of the trips are for medical appointments.

▶ The Ride also transports clients to their volunteer sites, senior centers, grocery stores, and/or food pantries.

▶ The program has become a critical community resource for seniors, including seniors with Limited English Proficiency.

Weber County Volunteer Driver Voucher Program

Weber Human Service Agency is a site for the voucher pilot program in partnership with UTA. This program is designed to allow senior participants to arrange their rides with a driver of their choice who is reimbursed for mileage by UTA. Senior participants must be over age 60, living in Weber or Morgan County, and have no access to other transportation reimbursement programs. Weber Human Services is administering the program as an in-kind contribution.

▶ If there were additional funding to allow caseworkers to help and train people to use the program, there would be more clients.

Table 2. Weber County Older Adult Transportation Performance and Financial Information

Agency Program	Eligibility	Annual Hours	Annual Miles	Annual Trips (one way)	Annual Costs	Funding Resources
The Ride	Weber County residents age 60+	Not Available	Not Available	20,000	$300,000	27% Federal 3% State 38% Weber County 7% SSBG 5% Donations 20% Other WHS Programs
Volunteer Driver Voucher Program	Weber County residents age 60+	Not Tracked	Not Tracked	910 one-way trips	$3,293.15	Weber Health matches 50% with 5310 funds. UTA designates a portion of Prop 1 funds.
Total				**20,000**	**$303,293**	

TRANSPORTATION FOR INDIVIDUALS WITH DISABILITIES

Public Transportation

Transportation for individuals with disabilities of any age is provided for the eligible public in Davis and Weber Counties by UTA Paratransit (within ¾ mile of a fixed route) and by three human service agencies. UTA paratransit services are outlined under the regional transportation services heading later in this chapter. Older adult transportation services listed above also provide transportation for individuals with disabilities who are age 60 and older.

EnableUtah

EnableUtah is a nonprofit organization in Ogden, Utah that helps individuals with disabilities and special needs find meaningful community employment. EnableUtah offers programs customized for each of the 200 plus individuals it works with. The organization assists with job training, education, daily living skills, and support for finding a customized career in the community.

▶ Hours of Operation: Based on agency programs and client needs.

▶ Service Area: Outside of UTA paratransit boundaries and within Weber County.

▶ Staff: EnableUtah Job Coaches and staff drive the agency's vehicles. There is no employee dedicated to driving or scheduling.

Pioneer Adult Rehabilitation Center (PARC)

Pioneer Adult Rehabilitation Center (PARC) is a Community Rehabilitation Program administered by the Davis County School District. PARC provides services to individuals with disabilities along the Wasatch Front based on individual needs and choices. The program occupies a 40,000 square-foot state-of-the-art facility in Clearfield serving close to 400 clients annually. Employment is provided based upon availability and type of work. PARC helps individuals with career planning and evaluation, employment training, and placement.

Table 12. Davis and Weber Counties Transportation for Individuals with Disabilities Performance and Financial Information

Agency Program	Eligibility	Annual Hours	Annual Miles	Annual Trips (one way)	Annual Costs	Funding Resources
EnableUtah	Individuals with Disabilities	Varies by program need	2,400	2,640	Not available—part of program costs	Utah DSPD; Private Pay; and Vocational Rehabilitation

FTA Section 5310 Program funding for a vehicle |
| **PARC** | Individuals with Disabilities | Varies | Not Available | 67,430 | $673,092 | Vocational Rehabilitation: Utah DSPD; Hill AFB contract;

FTA Section 5310 Program funding for 2 vehicles |
| **Total** | | | 2,400+ | 70,070 | $673,092+ | |

▶ Hours of Operation: 8:00 AM to 4:00 PM, Monday through Friday.

▶ Service Area: Wasatch Front.

▶ Staff: 48 drivers (3 are just drivers, the others are staff who also drive).

▶ 115 employees work at Hill AFB.

▶ 7 employees work in the community.

▶ Approximately 278 employees work at PARC's Clearfield facility.

## Salt Lake County Public and Human Service Agency Transportation Service Characteristics

Salt Lake County is the most populous in the region and also home to most major destinations for healthcare, employment, and entertainment. Significant levels of specialized transportation services for the general public, individuals with disabilities, older adults, and veterans are operated locally in Salt Lake County with trips circulating within county boundaries and reaching out across the region. Available services incorporate human service agencies, private transportation operators, public transit.

PUBLIC TRANSPORTATION

Utah Transit Authority (UTA)

Salt Lake County residents, visitors, human service agencies, and employers benefit from the innovative, flexible, and affordable family of services organized and operated by UTA. With bus routes, rail, vanpool, and demand response or on-demand transportation options available seven days a week, there are viable options for travel around and through the county.

Exhibit 1. UTA microtransit service area
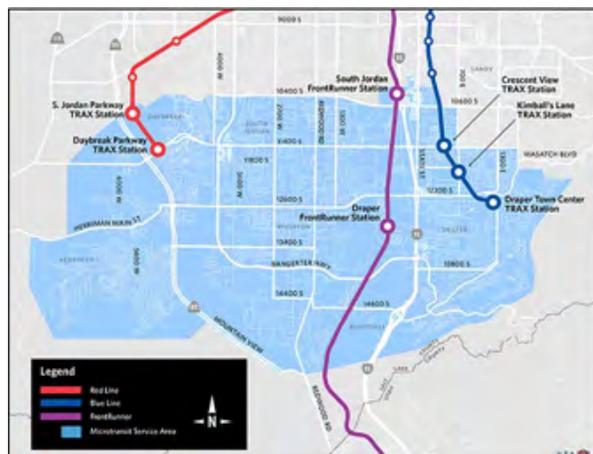
UTA Microtransit Pilot

UTA's Innovative Mobility Solutions Team has partnered with Via on a Microtransit Pilot program for one year beginning on November 20, 2019. The microtranist program is an on-demand, shared ride pilot designed to expand access to UTA services throughout the zone, to improve mobility for all users, and to provide a quality customer experience. According to Via, program utilization and cost per ride improved as average weekday ridership increased by 49% between December and January. (January 2020 UTA Microtransit Pilot Project Evaluation, Via)

▶ Eligibility: General public

▶ Service Area: southern Salt Lake County: 65 square miles in the cities of Bluffdale, Draper, Herriman, Riverton and South Jordan. The service area includes seven TRAX and FrontRunner stations and will help UTA study effective first-and last-mile connections to its bus and rail services. Trips must start and end within the designated service area.

▶ Passengers pay for the ride in the Via app using a credit or debit card. Passengers can also pay using a valid UTA ticket or pass.

TRANSPORTATION FOR OLDER ADULTS

Salt Lake County Aging and Adult Services

Aging and Adult Services is a division of the Salt Lake County Department of Human Services. The Independent Aging program helps older adults age in place, rather than living their final years in a residential facility. The program operates two critical services: Meals on Wheels and Rides for Wellness.

► Meals on Wheels runs 1200 meals a day, and another 800 meals are provided daily at nutrition sites within the Senior Centers.

► Rides for Wellness provides rides for older adults (age 60+) with no other means of transportation to critical medical appointments. The program delivers 200-plus rides a day, with an uptick in riders that use wheelchairs. The program primarily uses Priuses and wheelchair accessible minivans. Larger vans are available as needed.

  ▷ Hours of Operation: 8:30 AM to 4:00 PM, Monday, Tuesday, Wednesday, and Friday; and on Thursday between 9:30 AM and 4:00 PM.

  ▷ Staff: 1 part-time scheduler; 1 part-time manager; 3 full-time drivers; volunteer drivers also transport seniors using their own cars or agency-owned vehicles. The Aging Program also contracts with a local taxi company, UTE Cab, to fill 40% of the Rides for Wellness Program rides.

The Active Aging program includes 16 Senior Centers in Salt Lake County and health promotions. The Senior Centers are staffed by Salt Lake County, but some are owned by the cities they are located in. In some cases, the city supplies the van and Senior Services supplies the driver. When the city vehicle is down, they can use a Senior Services vehicle if the driver has gone through the required training. Generally, senior center transportation programs are available only to pick up passengers and bring them to/from the center for nutrition.

More information about transportation provided at the senior centers can be found at slco.org/aging-adult-services/senior-transportation/.

Salt Lake County Senior Center Transportation:

► Columbus Senior Center

  ▷ 8:30 AM to 2:00 PM, Monday-Friday

  ▷ South Salt Lake only with trips to 2531 South 400 East, South Salt Lake City

► Draper Senior Center

  ▷ Monday-Friday

  ▷ Draper only

► Friendly Neighborhood

  ▷ 8:00 AM to 2:00 PM, Monday-Friday

  ▷ Trips to 1992 South 200 East, Salt Lake City

► Harmon Senior Recreation Center

  ▷ Monday-Friday

  ▷ Trips to/from the Center and within West Valley City only

► Eddie P. Mayne Kearns Senior Center

  ▷ Monday-Friday

  ▷ Trips available upon request

  ▷ Kearns area

► Liberty Senior Center

  ▷ Monday-Friday

  ▷ Trips to/from the center upon request

► Magna Kennecott

  ▷ 8:00 AM to 2:00 PM, Monday-Friday

  ▷ Magna area

► Midvale Senior Center

  ▷ 7:00 AM to 4:00 PM, Monday-Friday

  ▷ Call in advance to schedule a trip

  ▷ Midvale residents only

► Millcreek Senior Center

  ▷ 8:00 AM to 2:00 PM, Monday-Friday

  ▷ Call in advance to schedule a trip

- ▶ Mt. Olympus Senior Center
  - ▷ Monday-Friday
- ▶ Murray Senior Recreation Center
  - ▷ Funded and operated by Murray City
- ▶ River's Bend Northwest
  - ▷ 8:00 AM to 9:15 AM and 1:00 PM to 2:30 PM, Monday-Friday
  - ▷ Reserve 24 hours in advance
- ▶ Riverton Senior Center
  - ▷ Trips to/from the senior center, Monday-Friday
  - ▷ Reserve 24 hours in advance
  - ▷ Riverton area
- ▶ Sandy Senior Center
  - ▷ Monday-Friday
  - ▷ Taxi available at 11:00 AM for nutrition
  - ▷ Sandy area

- ▶ South Jordan Senior Services and Community Center
  - ▷ Monday-Friday
  - ▷ Trips available from/to home in South Jordan to the Center
- ▶ Sunday Anderson Westside
  - ▷ 8:00 AM to 2:00 PM, Monday-Friday
  - ▷ Trips available from/to home and the Center
- ▶ Taylorsville Senior Center
  - ▷ 8:30 AM to 1:00 PM, Monday-Friday
  - ▷ Call by 5:00 PM the day before
- ▶ Tenth East Senior Center
  - ▷ Monday-Friday
  - ▷ Trips to nutrition at the center
- ▶ West Jordan Senior Center
  - ▷ Monday-Friday
  - ▷ West Jordan area

Table 3. Salt Lake County Older Adult Transportation Performance and Financial Information

Agency Program	Eligibility	Annual Hours	Annual Miles	Annual Trips (one-way 2018)	Annual Costs	Funding Resources
Rides for Wellness	Age 60+ with no other transportation options	Not available	Not available	50,938		County General Fund (53%); Older Americans Act, Medicaid (25.6%); State Grants (11.5%); Federal Revenue Contracts (5.8%); Project Income (3%); Other (0;8%); Local Govt. Grants (0.3%)
Senior Centers	Age 60+ and within service area boundaries of the center	Not available	Not available	54,077		
Total				105,015	Pending	

TRANSPORTATION FOR INDIVIDUALS WITH DISABILITIES

Bear O Care

Bear O Care is a private non-profit organization that provides a community approach to caring for individuals with multiple disabilities by building on and supporting the existing strength of families and caregivers. The agency operates vehicles to provide client-based transportation. Most services are between home and the program.

► Hours: 6:30 AM to 4:30 PM, Monday through Friday.

► Service Area: Salt Lake and Davis Counties

► Staff: 3 drivers, 4 bus aides.

► Passengers: Serving approximately 24 passengers per week. Transporting clients to and from home and the program on weekdays. Outings on weekends approximately twice a month and occasionally on weekdays.

► Vehicles: 5 vehicles

► Budget: Transportation costs are not tracked separate from program costs.

Columbus Center

Columbus Center is a private, non-profit service provider for individuals with intellectual and cognitive disabilities. The center offers day programs and residential group homes with 24/7 care.

► Door-to-door transportation is provided in-house.

► Staff: No dedicated drivers. Drivers are staff who have other primary responsibilities and transportation has become part of what they do.

► Most clients are from Salt Lake County and a few come from Davis and Summit Counties.

► All Columbus Center facilities are located in the UTA's service area.

► A number of Columbus Center clients qualify for UTA paratransit services.

► Revenue: Columbus Center receives $18,720 in revenue from DSPD per year. The annual budget shortfall for transportation is approximately $11,280.

Utah Independent Living Center

Utah Independent Living Center (UILC) is a private non-profit organization. The mission is to assist persons with disabilities achieve greater independence by providing services and activities which enhance independent living skills and promote the public's understanding, accommodation, and acceptance of their rights, needs and abilities.

► Staff: UILC staff drive vehicles to transport consumers who are unable to use public transit or other means of transportation.

► Vehicles: Fleet includes wheelchair lift-equipped vehicles.

► UILC provides in-house transportation for classes and outings for people without other transportation options on a first come, first served basis.

► UILC provides information about UTA's Paratransit, mainline bus and TRAX routes.

UTA Paratransit

UTA paratransit services are available within ¾ mile of the UTA fixed route for eligible riders. Additional details are provided in the regional transportation section of this chapter.

Work Activity Center

The Work Activity Center enriches the lives of people with disabilities by actively providing opportunities for independence and individual growth. Individuals with disabilities are provided with employment, training, residential, and day services.

▶ Hours: 8:00 AM to 4:00 PM, Monday through Friday.

▶ Staff: 14 paid drivers, other staff are cross trained to drive.

▶ Passengers: 145 clients receive transportation.

    ▷ Approximately 60 clients ride on a daily basis.

▷ Another 90 individuals ride UTA routes to/ from the Center.

▷ Approximately 40 people are part of the residential programs and have support staff that drive them.

▶ Vehicles: 11 wheelchair accessible vehicles and 1 non-accessible vehicles.

Table 4. Salt Lake County Transportation for Individuals with Disabilities Performance and Financial Information

Agency Program	Eligibility	Annual Hours	Annual Miles	Annual Trips	Annual Costs	Funding Resources
Bear O Care	Clients with disabilities	3,900	15,600	18,000	$183,600	DSPD/ Medicaid
Columbus Center	Clients with disabilities			39,000 to 52,000	$30,000	DSPD/ Medicaid
Utah Independent Living Center	Clients with disabilities	Pending	Pending	Pending	Pending	Pending
Work Activity Center	Individuals with disabilities	15,084	28,488	4,500 (apprx.)	$450,000	DSPD/ Medicaid Waiver; FTA Section 5310 grant for operating and capital
Total		**15,864+**	**75,288+**	**46,000– 58,000+**	**$480,000+**	

UTAH COUNTY PUBLIC AND HUMAN SERVICE AGENCY TRANSPORTATION SERVICE CHARACTERISTICS

The majority of public and human service agency transportation in Utah County is operated under a contractual agreement with United Way of Utah County.

United Way of Utah County

United Way's mission has evolved out of necessity to provide services where there were no other providers. About 40 years ago, the agency got involved in transportation to pool resources. It has grown to where they now operate a fleet of 37 vehicles. United Way operates multiple services under four contracts:

1) Contracts with UTA to operate UTA paratransit in Utah County.

2) Contracts with Senior Centers.

3) Contracts with Utah Valley Rides – a pilot program.

4) Contracts with TURN Community Services.

Each of these programs is described below.

UTA Paratransit in Utah County

▶ Hours: 5:30 AM to 10:00 PM, Monday through Friday.

▶ Staff: 1 full-time and 4 part-time dispatchers; 9 full-time and 19 part-time drivers.

▶ Eligibility: Riders must be certified through the UTA mobility center and live within ¾ mile of a UTA transit service.

Senior Center Transportation in Utah County

▶ Transportation is organized through Mountainland Association of Governments (MAG) to provide services for seniors going to nutrition programs and other scheduled activities. Senior Centers include: Springville,

Provo, Orem, Pleasant Grove, American Fork, and Lehi.

▶ Hours: 7:30 AM to 1:30 PM, Monday through Friday.

▶ Staff: 5 part-time drivers; dispatchers are shared with other contracts.

▶ Vehicles: 4 vehicles.

Utah Valley Rides – Pilot Program

▶ Hours: 8:30 AM to 2:00 PM, weekdays.

  ▷ Provo/Orem area: Monday, Wednesday, Friday

  ▷ Pleasant Grove/American Fork area: Thursdays

▶ Staff: 5 volunteer drivers; 1 part-time dispatcher plus shared dispatch with other contracts.

▶ Eligibility: Adults age 65 and older who live in the transportation area. Any trip purpose is eligible.

▶ Vehicles: 2 dedicated vehicles

TURN Community Services

▶ Hours: Provo/Orem area: Monday, Wednesday, Friday; Pleasant Grove/American Fork: Thursdays.

▶ Staff: 5 part-time drivers; dispatchers are shared with UTA paratransit contract.

▶ Eligibility: TURN clients travel to and from a TURN agency building.

▶ Vehicles: 3 dedicated vehicles and 5 vehicles shared with UTA paratransit.

TRANSPORTATION FOR INDIVIDUALS WITH DISABILITIES

Ability First Utah

Ability First Utah is an independent living center. Transportation is provided for program participants to activities and training and monthly shopping trips. Ability First also directly provides travel training for FrontRunner, TRAX, and UTA fixed

route buses. If additional capacity is needed, Ability First will use United Way transportation services.

► Hours: Monday through Friday, based upon training programs and activities.

► Vehicles: 2 vehicles in Provo and 1 van in Jaub County (south of Utah County).

Table 5. Utah County Specialized Transportation Performance and Financial Information

Agency Program	Eligibility	Annual Hours	Annual Miles	Annual Trips	Annual Costs	Funding Resources
UTA Paratransit	Assessed and approved by UTA and live within ¾ of a mile of an UTA route in Utah County	24,696	447,912	53,148	$1,504,536	UTA Contract
Senior Centers	Older Adults	6,504	64,452	16,224	$130,152	Title III and Title XX funding along with contracts from senior centers for operations; Section 5310 grant with 20% match for vehicles.
Utah Valley Rides	Older Adults	1,248	10,536	5,520	$153,648	Federal JARC grants with UTA match; Section 5310; and local match.
TURN Community Services	TURN clients	7,800	24,144	17,676	$90,000	Contract with TURN Community Services
Ability First Utah	Ability First clients	Pending	Pending	Pending	Pending	Pending
Total		**40,248**	**547,044**	**92,568**	**$1,878,336**	

Regional Public, Human Service Agency, and Veteran Transportation

Public transportation and services for veterans in the Wasatch Front is provided on a regional level, meaning that the service area includes multiple counties. All of the transportation services discussed in the previous sections of this chapter provide service within a specific community or county. The following organizations operate multi-county services.

PUBLIC TRANSPORTATION

Utah Transit Authority (UTA)

UTA provides public transportation for the Wasatch Front. For the purpose of this study, the analysis will focus on UTA paratransit services operated in Salt Lake, Davis, Weber, and Utah Counties. The UTA paratransit service in Utah County is operated under contract to United Way of Utah County. UTA Paratransit in Weber and Davis Counties is contracted with MV Transit. And UTA contracts with Tooele County to operate the two Flex Routes and an on-demand service.

▶ Service Area: Service is available within ¾ miles of a UTA fixed route.

▶ Staff: Approximately 120 paratransit drivers in Salt Lake County and an additional 60 drivers systemwide.

▶ Eligibility: Riders must be certified through the UTA mobility center.

  ▷ There are approximately 4,400 eligible riders throughout the service area. The number of eligible riders is increasing each year.

  ▷ Approximately 1,000 applications are processed each year.

▶ Vehicles: Approximately 150 paratransit buses systemwide.

TRANSPORTATION FOR VETERANS

Veterans who are age 65 or older or have a disability are eligible for many of the human service agency programs listed in this chapter in addition to programs designed specifically for veterans. Transportation for veterans is regional or statewide in nature in large part due to the Salt Lake VA Medical Center which is located in Salt Lake City. Where public transit is available in the Wasatch Front, veteran organizations attempt to coordinate the veteran's trip needs with public transit services and schedules. UTA provides passes to Utah County Veterans Services and Provo City purchases UTA passes for veterans in Utah County. While there is not a stop at the Salt Lake VA Medical Center campus, the closest bus stop is less than ¼ mile from the VA campus.

Continue Mission

Continue Mission serves veterans with physical, mental or emotional injuries by providing year-round recreational events. The agency provides transportation to group outdoor activities.

▶ Service Area: Salt Lake County and northern Utah communities.

▶ Riders: Served 649 individual trips and 63 group rides with 247 passengers in 2019.

▶ Staff: 3 part-time volunteer drivers.

▶ Vehicles: Using vehicles donated by UTA. Receiving a vehicle in Spring 2020 through UTA from a Section 5310 grant.

Disabled American Veterans (DAV)

The DAV is a congressionally chartered organization that serves members with a VA medical certification. The DAV is a nonprofit charity that provides a lifetime of support for veterans of all generations and their families, nationally helping more than 1 million veterans in positive, life-changing ways each year.

▶ Hours: 3 to 5 days per week, depending on volunteer availability.

► Annually, the organization provides more than 600,000 rides to veterans attending medical appointments and assists veterans with well over 200,000 benefit claims.

► In 2018, DAV helped veterans receive more than $20 billion in earned benefits.

► DAV's services are offered at no cost to all generations of veterans, their families and survivors.

► 19 vans are currently on the road statewide.

  ▷ 1,200,000+ miles driven in 2018 for the Utah Chapter.

When DAV buys a van, it is delivered to Salt Lake Veterans Affairs (VA). The VA accepts it and provides gas and maintenance, while DAV provides the driver. Once the Odometer gets to 150,000 miles, the VA returns the van to DAV, and expects a replacement vehicle at the DAV's cost.

Table 6. Regional Public Specialized and Veterans Transportation Performance and Financial Information

Agency Program	Eligibility	Annual Hours	Annual Miles	Annual Trips (one way)	Annual Costs	Funding Resources
UTA Paratransit	Individuals with functional mobility limitations	180,342	2,798,928	394,816	$18,695,571	FTA grants; Medicaid; Property Tax; Passenger Fares
Continue Mission	Veterans going to and from group outings	Not available	Not available	896 (approximately)	$117,000	Donations; UTA operating and vehicle replacement grants.
Disabled American Veterans	Veterans going to appts at VA Medical Center	1,292 (average)	117,312	Not available	Not available	UtDAV funding to replace vehicles; donations; fundraising; and USVA Federal funding.
Total		**181,634+**	**2.92M+**	**396,752+**	**$18.81M+**	

UTA Paratransit data source: 2018 National Transit Database, Demand Response Mode

TRANSPORTATION FOR INDIVIDUALS WITH DISABILITIES

Roads to Independence

Roads to Independence is a non-profit agency providing programs for individuals with disabilities. Programs include Nursing Home Transition, Assistive Technology and Home Modification Services, and Independent Living Services (ILS).

The Volunteer Driver Voucher Program allows individuals in Ogden with a disability to get rides from a person of their choosing to appointments and other approved destinations. Consumers will receive a voucher and then give it to their driver who can submit it for reimbursement at a rate of $5.00 for trips less than 14 miles or $0.35 per mile for trips over 14 miles.

The Independent Living Services program includes transportation as well. The ILS program can assist in identifying ways to overcome transportation as a barrier by assessing available options to transportation. Assistance could include help signing up for UTA Paratransit services, setting individuals up with UTA Travel Training, or enrolling individuals in the Volunteer Driver Transportation program.

Table 7. Regional Public Specialized and Transportation for Individuals with Disabilities Performance and Financial Information

Agency Program	Eligibility	Annual Hours	Annual Miles	Annual Trips (one way)	Annual Costs	Funding Resources
Roads to Independence	Individuals with Disabilities	Not tracked	Not tracked	180	$1,885	RTI matches 50% of voucher with Section 5310 funds and UTA designates a portion of Prop 1 funds

Reservations and Scheduling

Each transportation service operates with specific trip scheduling procedures and policies. Some of the agencies utilize technology to aid schedulers and/or passengers with scheduling trips. Other agencies use informal procedures such as calendars and Excel spreadsheets to keep track of trip requests and schedules. Regardless of the procedures and technology, trip scheduling requires administrative time and represents at least a marginal expense for each agency. In Utah County, the United Way represents a consolidated dispatch for four specialized transportation services. It is likely that the consolidated dispatch improves administrative efficiency of scheduling transportation in the county by sharing a facility, staff, phones, and software across multiple programs.

Recognizing the potential efficiencies that could be gained through shared scheduling and dispatching, UTA participated in a joint software development project to build upon the current functionality of RidePilot software for scheduling transportation across multiple providers. RidePilot enables participating agencies to track driver's credentials, track vehicle maintenance, and schedule and track daily trips. It also includes the ability to track vehicle capacity and driver availability. UTA made RidePilot available to interested transportation providers in the region. As indicated below, some of the human service agency providers are currently using the technology while others have opted to continue with existing scheduling procedures.

Table 8 summarizes the various procedures for scheduling trips and the types of scheduling technology used by the various agencies.

Table 8. Trip Reservation Requirements and Scheduling Technology

Agency	Trip Scheduling Procedures or Policies	Technology Used for Trip Scheduling/Dispatching
Ability First Utah	Staff schedule trips by hand.	No formal scheduling technology is used.
Bear O Care	Staff schedule trips based on client needs. Schedules to/from home to the center remain relatively unchanged from day to day.	No formal scheduling technology is used.
Columbus Center	Trips are scheduled by staff within the Center's departments based on client needs.	No formal scheduling technology is used.
Continue Mission	Staff schedule trips by hand.	No formal scheduling technology is used.
Davis County Health	3 business days advance notice, but will try to handle last minute requests	Paper manifests made from an in-house program from Davis County.
Disabled American Veterans	Coordinator at the VA gets calls one day in advance and creates the schedules. He sends it to the local driver.	Not provided.
EnableUtah	Client Services Manager creates trip roster 1 week before service is needed. Trips are generally the same from week to week. Supported Employment Manager coordinates vehicle utilization schedule for Job Coaches	An Excel sheet or RidePilot are used for scheduling.
PARC	There is a monthly calendar of activities that clients sign up for. Most of the trips are the same from day to day. Only 7 individuals get customized transportation.	Internal calendars are used for scheduling.
Salt Lake County Aging and Adult Services	Rides are scheduled by the scheduler one week in advance. Trips fulfilled by the taxi company are sent over one day in advance.	CTS software and tablets are used on the vehicles. Meals on Wheels drivers use large cell phones, and other vehicles use tablets.
United Way of Utah County	Trapeze scheduling program connects to tablets in vehicles with two-way radios for back-up.	Trapeze scheduling program and RidePilot scheduling programs are used.
UTA Microtransit	Trips are scheduled by the passenger using the Via app.	Via app is used for scheduling.
UTA Paratransit	UTA schedulers accept calls to schedule rides.	Trapeze

Agency	Trip Scheduling Procedures or Policies	Technology Used for Trip Scheduling/Dispatching
Utah Independent Living Center	Pending	Pending
Weber Human Services	5 business days advance notice	RidePilot is used.
Work Activity Center	Scheduling and dispatch are done by hand. Fixed routes are scheduled based on the individual's home address; on-demand trips are scheduled through a vehicle check out procedure.	Scheduling is done by hand.

Mobility and Assisted Living Centers (ALC)

In addition to the public and human service agency transportation programs, a number of assisted living centers in the region also provide specialized transportation services for older adults and individuals with disabilities. Assisted Living Centers are considered in this analysis because residents often receive Medicaid benefits that include transportation for non-emergency medical purposes. Also, Assisted Living Centers often operate in-house transportation programs specifically for the purpose of transporting residents.

WHAT IS ASSISTED LIVING?

ALCs must be licensed[3], by the Utah Bureau of Health Facility Licensing and Certification. This data does not include independent living facilities, which are not licensed by UBHFLC. Note, however, that many ALCs are part of a Continuing Care Retirement Communities that include independent living options, such as Cedarwood at Sandy or Pacifica Senior Living.

There are different classifications of assisted living and skilled nursing facilities. Two types are included in the stakeholder — Assisted Living Levels 1 [AL1]

and 2 [AL2] facilities — although a case could be made for skilled nursing facilities [SNF], the term many people associate with nursing homes. AL1 is a less nursing-intensive type than AL2: AL1 residents must be able to evacuate under their own power. AL2 in turn is a bit less nursing intensive than SNF. There are 164 AL1 and AL2 facilities in the four-county area. The consultant team contacted them, focusing on the communities with the largest number of residents. Nineteen of the 20 largest communities are AL2.

RESEARCH RESULTS

Six ALCs representing 647 residents (average 108 residents) responded to the survey. All were AL2 in type. Notably, all had at least one vehicle operated for resident transportation, and all hired staff specifically as drivers, and all ALCs had at least one wheelchair-accessible vehicle. Three of the ALCs had two vehicles, typically a handicapped-accessible minibus and a car. ALCs seemed to be willing to transport residents for any reason, within reasonable distance, most often on weekdays.

When asked about other mobility options in use, such as UTA or human service agencies, five responses were received from the six ALCs. Two answered that services did stop at their facility. One stated that stops at the facility were rare. Two answered no. Of the two ALCs that said had stops

---

[3] Utah's ALC regulations are available at aspe.hhs.gov/system/files/pdf/110621/15alcom-UT.pdf

from outside mobility services, both said only one or two residents used them on a typical weekday.

None of the ALCs had a voucher program for other mobility services, although one ALC did once offer vouchers on a temporary basis when the ALC's bus was broken. All ALCs reported that transportation costs were part of the monthly rent; there were no surcharges for use of the ALC's transportation options.

ALCs reported a wide variety of answers when asked about the number of passenger-trips they provided every month. Because the question was asked for an estimate of this number, the variability may be accounted for by the off-the-cuff estimates. Overall, the six ALCs representing 647 residents estimated 1,243 monthly passenger-trips.

Only two ALCs responded to a request for their annual operating budget for their transportation program. This could be because transportation is included in the program fee/cost paid by the consumer and is not a separate line item in the ALC's budget. Therefore, ALCs may not be accounting for all transportation expenses a regular basis. One ALC, with about 100 residents, cited an

annual budget of $45,000. The other ALC, also with about 100 residents, cited a transportation budget of $3,500. These responses are too few in number and too wide in range to be elucidating. The wide discrepancy between estimated transportation budgets may be due to differences in how the expenses were estimated. Budgets may not include all driver salaries, insurance costs, maintenance, and indirect expenses associated with providing transportation.

LIMITATIONS

This research was limited by a few factors. The focus on largest ALCs was helpful for an overview, but is only part of the picture. Smaller ALCs are probably far less likely to own transport vehicles and instead rely on other mobility options. As noted above, only ALCs were contacted, so independent living facilities [ILFs] that house seniors are not part of this sample, although they may represent a sizeable number of residents needing mobility assistance. SNFs were also excluded, although the resident at a SNF is probably less likely to need trips for shopping or even medical appointments.

SECTION II: STAKEHOLDER ASSESSMENT

CHAPTER 3: PUBLIC AND STAKEHOLDER INPUT

Assessment of unmet specialized transportation needs for older adults and individuals with disabilities was strategically planned to ensure extensive opportunities for participation from the targeted groups. The first step was to interview key stakeholder organizations that represented older adults, individuals with disabilities, and people with low incomes in each county. The three Local Coordinating Councils (LCCs) for Davis and Weber Counties, Salt Lake County, and Utah County provided the foundation for outreach because the LCCs were established with the purpose of monitoring specialized transportation and mobility needs. In addition to LCC members, the team interviewed other affiliated agencies and individuals including Disabled American Veterans, Veterans Affairs, local hospitals, private assisted living centers, homeless shelters, and agencies providing refugee assistance. Collectively, these key stakeholders represent public and human service agency transportation service providers and a cross section of individuals most likely to use specialized transportation services. A summary of outreach activities and results are provided in this chapter.

Key Stakeholder and Public Input Opportunities

The planning team and the UTA Coordinated Mobility Department organized the targeted approach to public input. The goal of the key stakeholder and public input process was to inform older adults and individuals with disabilities, and the agencies that serve them, about the purpose of the study and to gain their input into the unmet transportation needs that exist in their local communities. Ultimately, the key stakeholder and public input process involved four activities, as follows:

1) **Key Stakeholder Interviews:** Interviews with agencies and organizations that serve older adults, individuals with disabilities, and

people with low incomes were critical to understanding how the network of available transportation services is functioning and identifying the unmet transportation needs. Twenty-nine key stakeholder interviews were conducted.

2) **Workshops:** The team facilitated 23 workshops at local senior centers and human service agencies throughout the entire region.

3) **Focus Groups:** Three focus groups were facilitated across the region. The purpose of the focus groups was to delve deeper into the issues raised during stakeholder interviews and the workshops. Focus groups allowed for dedicated time with a smaller group of individuals to discuss the most significant specialized transportation challenges faced by older adults and individuals with disabilities.

4) **Public Survey:** The public survey was available on-line and in paper format. Surveys were distributed at senior centers, human service agencies, through Meals on Wheels, and advertised on the UTA website. In total, 673 public surveys were collected.

The following charts outline the schedule and participation in workshops and focus groups. Results are discussed at the end of this chapter.

Key Stakeholder Interviews

Table 9 outlines all key stakeholders that provided input into the needs assessment. Stakeholder interviews took place during the fall of 2019 and focused on identifying the aspects of the existing network of specialized transportation services that are working and the gaps in services that are creating mobility challenges for the targeted population groups. The unmet needs and gaps in transportation services identified by key

stakeholders are summarized in the next chapter. Detailed information provided by each agency is provided in the appendix.

Table 9. Key Stakeholder Interviews

Agency Interviewed	Counties Served	Agency Type/Eligibility
Ability First Utah	Utah	Private Non-Profit/Individuals with Disabilities
Bear-O-Care	Salt Lake	Private Non-Profit/Individuals with Disabilities
BRAG (Bear River Area of Governments)	Weber	Council of Governments/General Public
Catholic Community Services	Salt Lake	Private Non-Profit/Refugee
Columbus Center	Salt Lake	Private Non-Profit/Individuals with Disabilities
Continue Mission	Davis and Weber	Private Non-Profit/Veterans
Davis County Health and Senior Services	Davis	Public Non-Profit/Older Adults
Disabled American Veterans	State-wide	Charitable Service Trust/Veterans
Enable Utah	Davis and Weber	Private Non-Profit/Individuals with Disabilities
Intermountain Medical Center	Regional	Hospital/General Public
Local Coordinating Councils: Davis/Weber, Salt Lake, and Utah Counties	Davis, Weber, Salt Lake, and Utah	Coordinating Council/Individuals with Disabilities, Older Adults, General Public
Mountainland Association of Governments (Aging and Family Services)	Utah	Council of Governments/Older Adults
Odyssey House of Utah	Salt Lake	Private Non-Profit/Transitional Services
Roads to Independence	Davis and Weber	Private Non-Profit/Individuals with Disabilities
Salt Lake County Aging and Adult Services	Salt Lake	Public Non-Profit/Older Adults
Salt Lake Regional Medical Center	Regional	Hospital/General Public
TURN Community Services	Utah	Private Non-Profit/Individuals with Disabilities
United Way of Utah County	Utah	Private Non-Profit/Low Income, Older Adults
University of Utah Health	Regional	Hospital/General Public
Utah County Veterans Services	Utah	Public Non-Profit/Veterans
Utah Dept. of Human Services, Division of Services for People with Disabilities (DSPD)	State-wide	State Government/Individuals with Disabilities
Utah Development and Disabilities Council	State-wide	State Government/Individuals with Disabilities
Utah Independent Living Center	Salt Lake	Private Non-Profit/Individuals with Disabilities
Utah Transit Authority, Paratransit	Salt Lake, Davis, Utah	Public Non-Profit/Individuals with Disabilities

Agency Interviewed	Counties Served	Agency Type/Eligibility
Veterans Affairs Salt Lake City Health Care	State-wide	Federal Government/Veterans
Wasatch Front Regional Council (mobility manager)	Salt Lake, Davis, Weber, Utah	Metropolitan Planning Organization/General Public
Weber County Senior Companions	Weber	County Government Office/Older Adults
Weber Human Services (Senior/ Aging Services)	Weber	County Government Office/Older Adults
Work Activity Center	Salt Lake	Private Non-Profit/Individuals with Disabilities

Workshops

Twenty-three presentations about the study were facilitated throughout the planning area between November 2019 and January 2020. The public input opportunities were scheduled during senior nutrition programs, at a Veterans Affairs Medical Center waiting room, and at human service agencies. Because the plan is focused on addressing challenges related to specialized transportation for older adults and individuals with disabilities, public input opportunities were concentrated on locations where individuals most likely to be impacted by the plan would be gathering.

Results from the workshop discussions are included in the summary of public survey results, in the following section. Input from workshops and surveys is combined because surveys were collected during workshops to gather a written record of participation.

Table 10. Public Input Workshop Locations and Attendance

Workshop Location	Date	Attendees
American Fork Senior Center	11/19/2019	23
Columbus Senior Center	11/19/2019	30
Davis County Health and Senior Services	11/20/2019	31
Davis County Meals on Wheels	Dec 19	(surveys distributed)
Eddie P. Mayne Kearns Senior Center	11/22/2019	30
Friendly Neighborhood Senior Center	11/22/2019	10
Harman Senior Center	11/20/2019	20
Liberty Senior Center	11/21/2019	20
Magna Kennecott Senior Center	11/19/2019	200
Midvale Senior Center	1/7/2020	52
Mt. Olympus Senior Center	11/22/2019	30
Murray Heritage Senior Center	11/22/2019	20
Orem Friendship Center	11/21/2019	86
PARC	11/19/2019	(surveys distributed)
Palmer Court – The Road Home	1/1/2020	10
Provo Senior Center	11/19/2019	57
Rivers Bend Senior Center	11/27/2019	25
Riverton Senior Center	11/21/2019	20
Roads to Independence	11/19/2019	20
Roy Hillside Senior Center	11/15/2019	20
Salt Lake County Meals on Wheels	1/1/2020	(surveys distributed)
Spanish Fork Senior Center	11/18/2019	83
Taylorsville Senior Center	11/20/2019	40
Union Gardens	1/1/2020	(surveys distributed)
Utah Independent Living Center	11/19/2019	20
VA Hospital	11/20-21/19	30
Weber County Senior Companions	1/17/2019	(surveys distributed)
Weber Human Services Meals on Wheels	Jan 20	(surveys distributed)
West Jordan Senior Center	1/8/2020	35
Work Activity Center	Jan 20	(surveys distributed)

Focus Groups

Focus groups were facilitated by the consulting team with a representative groups of older adults and/or individuals with disabilities. The focus groups were facilitated at the following locations:

- ▶ Columbus Center
- ▶ UTA Committee on Accessible Transportation
- ▶ International Rescue Committee
- ▶ TURN Dreams

A brief summary of each focus group is provided in the following paragraphs.

COLUMBUS CENTER FOCUS GROUP

On January 6, 2020, the consulting team met with key staff at Columbus Center to discuss transportation needs and challenges faced by Columbus Center clients and other individuals with disabilities in the Salt Lake City area. Key points from the discussion are listed below.

- ▶ The following actions would help address the gaps in the transportation network for individuals with disabilities:
  - ▷ More frequent service on UTA.
  - ▷ Expanded UTA public transportation and ADA paratransit service area to include outlying suburban areas like Draper and Herriman, where bus routes are more sparse. "The corners of the valley are off limits," there are several employers in Draper who would like to work with Columbus Centers' clients, but it is difficult to get the clients close to those locations.
  - ▷ Longer service spans so that clients could work later hours would improve employment opportunities. Some opportunities for employment that would be available to clients are not possible because clients cannot get home at the end of their shift.

- • There is a work program location at 1180 West and 2600 South in Woods Cross (Central Laundry). Passengers can ride the Flex Trans to get to work but they will have issues using UTA to take people/pick-up passengers at the work site.
- ▷ An easier way to reserve trips would help.
- ▷ More training for drivers would be helpful, so they are more comfortable serving people with special needs. Sometimes drivers do not understand what the clients want, or how to make them more comfortable.

UTA COMMITTEE ON ACCESSIBLE TRANSPORTATION (CAT) FOCUS GROUP

On February 4, 2020, the consulting team conducted a focus group meeting with the UTA CAT Committee to discuss experiences with using specialized transportation as a person with mobility limitations. Discussion topics are listed below:

What transportation hurdles are experienced by people with mobility challenges in the Wasatch Front?

- ▶ It's difficult to get transportation outside UTA's service area. Some CAT members live outside the reach of bus routes and outside the ¾-mile range of paratransit.
  - ▷ Example: one member of the CAT Committee lives in Vineyard and needs to travel frequently for doctor appointments and other daily needs. He is outside the ¾-mile boundary for paratransit, and often needs to travel up/down or cross Geneva Road in his mobility device. Conditions for pedestrians and people in mobility devices on Geneva Road are inadequate/uncomfortable.
  - ▷ Other dead zones include the Aquarium, IKEA, Rose Park, Foothill between 2200 South-3900 South (there is a bus route

but you can't get off the bus on Foothill/ Wasatch in some areas).

▶ Using systems like Uber/Lyft as a substitute for public transit is too expensive, particularly for people with disabilities on a fixed income.

▷ Members had heard about the Via microtransit experiment and were interested in its potential, especially once concerns about payment arrangements were addressed (UTA tickets/passes can be used as payment). So far, this group has not had experience using the microtransit service, as their members do not live within the pilot program area.

▶ It takes a lot of time to travel via transit for daily needs. Some buses only come 1-2Xs/hour, they don't always run on weekends, and they don't run later into the night. This limits the accessibility of many destinations for people who rely on transit.

▶ There is a lack of knowledge regarding available transit services, and especially for resources for people who have visual impairments. It is noted that UTA Travel Trainers could help with this challenge.

▶ The Trip Planner app is confusing for some people and it doesn't provide adequate and reliable directions or landmarks.

▷ For instance, some parts of the app use street names without supporting coordinate information. For a person who is visually impaired and who relies on being able to count cross streets or gauge distances to know where to go, they need to know the coordinate information of the streets. The grid system in the Salt Lake area should be integrated into the trip planner with coordinates.

▶ A centralized information bank would be helpful. Sometimes riders call in to the BUS INFO line with a problem or an issue and the call center operators don't know how to advise a rider with a visual impairment (although

participants also said that the customer service staff is generally really good).

▷ For example, someone with a visual impairment called in to BUS INFO because a bus stop had been temporarily moved due to construction. When asked where the bus stop was, the call center operator said "well you should be able to see it." Operators should instead be able to say that the stop is located at a certain coordinate (i.e., 2150 South State Street), or some distance away from the NE/SW corner of the intersection.

▷ GPS locator for bus stops – one member mentioned an app that helps visually-impaired people locate key locations (e.g., water fountains, shops, etc.) at airports by making a beeping sound when their phone is pointed in the right direction. GPS technology is there, but an application that could be used to help locate bus stops using the GPS coordinates is not available.

▶ For paratransit, the requirement to schedule trips 24 hours in advance is tricky. Same-day scheduling would be preferred.

▶ A shorter pick-up time window for paratransit pickup times would also be helpful for passengers.

▶ Contacting riders via text message with route delays or updates would also be helpful, rather than relying on Twitter for updates. Many CAT committee members don't use Twitter but would be able to sign up for text updates for certain routes/circumstances to get information. It is noted that UTA may be contacting riders via text message, but some respondents perceive that communication about route delays and updates is an issue.

▷ Change days are stressful for people in average circumstances, but can be particularly stressful for people with cognitive disabilities or those on the autism spectrum who are routine-oriented and can panic when faced with changes to that routine.

What is working well with the transportation network, from the perspective as a transit user and also a CAT committee member?

- ▶ TRAX lines are really helpful for travel between multiple communities; it comes often, runs on weekends, and runs late.

- ▶ Paratransit customer service works well. Most employees are well trained in working with people with disabilities, and most drivers are really nice and helpful.

  - ▷ Example: One day program participant was going to have to drop out of her activity center because the timing of her ride home wasn't working, and the paratransit driver/customer service worked with her family to change the timing of pick-up/drop-off so she could stay in the program she liked.

- ▶ UTA service coverage is generally pretty good, although north/south access is better than east/west.

- ▶ They like the 15-minute service frequency because they know that they won't have to wait long for the next bus.

- ▶ FrontRunner is nice; they like the free WIFI, cleanliness, comfortable seats, and air conditioning.

How to change/improve the service if there were more funding available?

- ▶ Run more service to outlying areas.

  - ▷ West Jordan and Copperton were specifically mentioned.

- ▶ More frequent service within the core of the urbanized area and a longer service span – especially for buses, which provide a greater geographic range than the rail corridors.

- ▶ More routes in Utah County.

- ▶ Operate FrontRunner on Sundays.

- ▶ Electrify the buses.

INTERNATIONAL RESCUE COMMITTEE FOCUS GROUP

On Friday, January 31, 2020, the consulting team conducted a focus group discussion with International Rescue Committee (IRC) case managers on what they hear are the barriers to transit for refugees.

- ▶ Many clients express frustration with paratransit drivers not waiting for them if they are running a little late getting out the door.

- ▶ The fixed route buses have too tight of a schedule with the transfers that are often required.

- ▶ There are apartments at 1700 South and Riverside Drive (Riverview Apartments) that many of the clients live in. In the past there was a fixed bus route on 1700 South, but now that route has switched to 2100 South. This has made it very difficult for the people living at the Riverview Apartment complex to use transit now.

- ▶ The apartments at 700 West and 6880 South (Canyon Crossing at Riverwalk) also house many IRC clients and that area has very poor transit connections. There are many sidewalks missing along 700 West. In order to access the Fashion Place West TRAX station clients must walk along Winchester Street which has narrow sidewalks and no overhead lighting.

- ▶ Clients have a difficult time working with bus drivers when they would like to use the Medical Voucher Bus Passes. For the client to transfer using that voucher program, they must get a receipt, but often the bus drivers don't understand what they need, so they either don't give them a receipt, or just start driving away. The case managers recommended some type of bus driver training on this, so the IRC clients don't feel so intimidated.

- ▶ Important destinations that IRC case workers would like to send clients because there are good jobs available:

- ▷ Northwest Quad area (lacks transit connections)
- ▷ Southwest Davis County
- ▷ The manufacturing centers on the north side of Salt Lake City
- ▶ IRCs "rule of thumb" for the distance they are willing to try and send their clients for work is within a 45-minute travel shed of their homes (all transportation modes considered).
- ▶ IRC has tried the UTA sponsored vanpool, but they didn't feel like it was very successful, and it was costly.

TURN COMMUNITY SERVICES

Turn Community Services is a private non-profit organization supporting adults with intellectual disabilities. The agency has facilities in Provo, Richfield, and Brigham City. On behalf of its clients, the agency described the following transportation characteristics that they would like to see improved.

- ▶ Turn would like to see the ¾ mile limit for paratransit eliminated or expanded to at least one mile. Possibly some other type of service could fill the gap beyond the paratransit service zone.
- ▶ Turn would like to expand transportation service to Eagle Mountain and Saratoga Springs area.
- ▶ Outlying cities (Payson, Spanish Fork, Eagle Mountain, Saratoga Springs) need more transportation services.
- ▶ Utah Valley Rides is limited to Provo, Orem, and Lynden. Possibly, flex-route or microtransit could fill the gap.
- ▶ More/Better information sharing to the general public about available services would be beneficial to clients and their families.

Public Survey Results

The following charts and paragraphs outline the results from the public survey about transportation needs and gaps in services. The survey was distributed November 2019 through January 2020. The results are based on a total of 673 completed surveys collected online and on paper. Surveys were distributed during workshops and on the UTA website. Several human service agencies also distributed surveys to clients and their family members, including distribution to homebound participants of the Meals on Wheels Programs in Salt Lake, Utah, and Weber Counties.

REGIONAL RESULTS

Charts 3.1 through 3.5 provide an overview of survey results at the regional levels. Survey results are organized by topic area and by location.

*Age and Mobility Limitation Status of Survey Respondents*

The intent of the survey is to understand transportation needs of older adults and individuals with disabilities. Therefore, outreach was targeted to these segments of the population. As illustrated in Exhibit 2, most survey respondents in each county were within the targeted population groups.

Exhibit 2. Age of Respondent by County

County	60 or older	40-59	19-39
Davis	56	9	7
Salt Lake	221	18	13
Utah	85	1	1
Weber	129	9	11
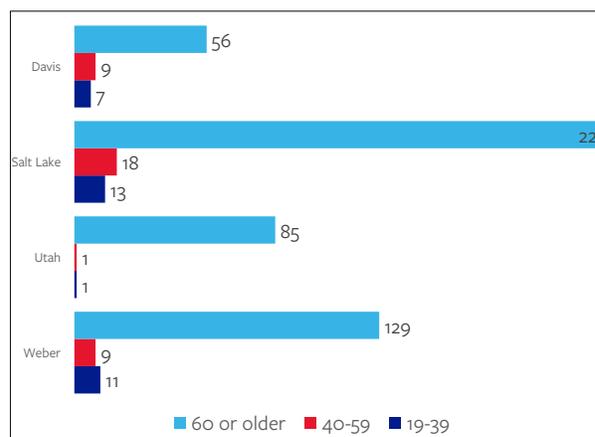
The number of individuals that reported having a mobility limitation that impacts their ability to drive or access transportation services in each county is indicated in Exhibit 3. In Davis and Utah Counties, the participation of individuals with and without mobility limitations was relatively equal. In Salt Lake County, more participants did not report a mobility limitation (139) compared to those who did have a mobility limitation (102). And, in Weber County, more respondents reported having a mobility limitation (90) compared to those who did not (52).

**Exhibit 3. Respondents Needing a Mobility Device and/or Assistant**
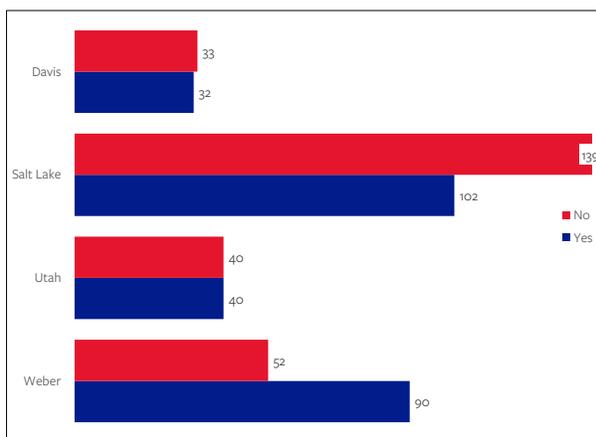
Transportation Expenses and Household Income

The Housing and Transportation Index calculated by the Center for Neighborhood Technology (CNT) measures the affordability of an area by taking into account the local costs of housing and transportation. The index is intended to provide the true cost of housing decisions. However, for the purpose of this study, it also indicates the burden of transportation costs on a household income. In the Wasatch Front Regional Council Area, annual transportation costs are approximately $12,900. Therefore, transportation makes up approximately 21 percent of a typical household expenses. In Utah County (outside of the Wasatch Front Regional Council area), annual transportation

costs are slightly higher at approximately $15,700; transportation costs are approximately 25 percent of the typical household income.

In the Wasatch Front and Utah County, residents are spending approximately 43 and 51 percent of their household income, respectively, on housing and transportation. Traditionally, when the combined cost of housing and transportation exceeds 45 percent, the affordability declines.

**Exhibit 4. Monthly Household Transportation Expenses**
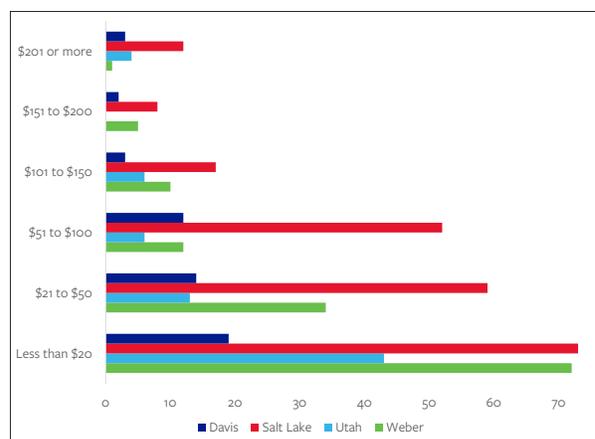
Survey respondents were asked to estimate the amount of money they spend per month on personal transportation. Expenses could include any mode of transportation including owning and driving a personal vehicle, riding with family or friends, volunteer transportation, human service agency, public, or private transportation services.

Transportation expenses are higher in Salt Lake and Davis Counties, according to survey respondents. More than half, 54 percent, of Weber County residents and 60 percent of Utah County residents are spending less than $20 per month on transportation. In Salt Lake and Davis Counties, about one-third of respondents are spending less than $20 per month, and nearly one quarter, 23 percent, of respondents are spending between $51 and $100 per month on transportation.

Low cost transportation options available in the Wasatch Front include riding with family or friends, volunteer driver programs, and public or human service agency programs. Where the low-cost options are not available on a regular basis, survey respondents ride with family and friends or stay home. Fortunately, most communities in the Wasatch Front offer at least a limited amount of low-cost transportation options. However, the challenges to finding affordable transportation increase for individuals who need to travel with a mobility device and/or an assistant. Qualitative feedback from the survey results indicates that many people rely on family members or friends for rides to medical appointments and the grocery store and this is how they control transportation-related expenses.

As illustrated in Exhibit 5, 22 to 29 percent of survey respondents earn a household income of less than $12,500 per year. Another 21 to 38 percent of respondents earn a household income of between $12,500 and $22,500 per year. In each county, a large majority of respondents live alone or with one other adult in the household. Davis, Weber, and Salt Lake Counties had the highest percentages of respondents in the lowest income bracket. Utah County respondents earned slightly higher incomes and had the highest percentage of respondents earning $12,500 to $22,500 per year. Utah County had the lowest percentage of respondents earning more than $22,500 per year compared to the other counties in the region.

Exhibit 5. Annual Household Income
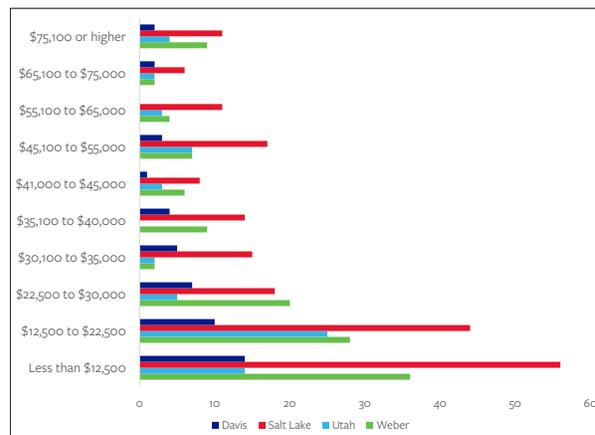
Modes of Transportation

Residents in the Wasatch Front are fortunate to have several transportation options including public transportation, human service agency programs, senior center programs, and private transportation services. Each option varies in price and level of service. For example, public transportation options are typically less expensive than private transportation services, but they may not offer a direct trip from Point A to Point B. Senior and human service agency programs are typically free (or donation based) for the passenger and are therefore less expensive than public transit. However, agency-sponsored transportation services often have less capacity/availability and more limited hours and days of service. Therefore, passengers must choose the options that meet their needs. Exhibit 6 illustrates a comparison of transportation services used by respondents in each county. Respondents who marked the "other" and "not applicable" categories primarily rode with family or friends or drove themselves. In each county, most respondents used a service provided by UTA, rode with family members/friends, or drove.

Exhibit 6. Modes of Transportation
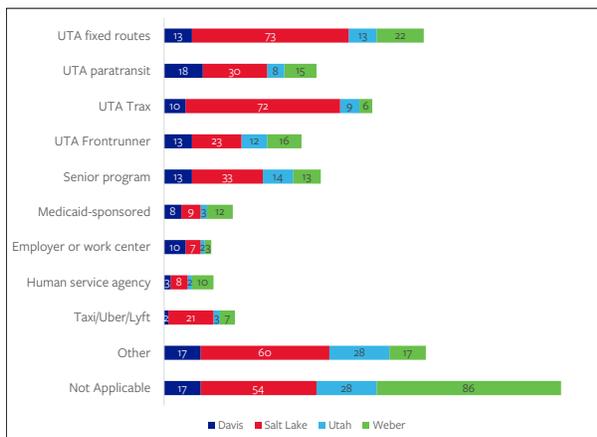
Gaps in Access to Transportation

Exhibit 7 and Exhibit 8 illustrate the temporal and spatial gaps in access to transportation indicated by survey respondents. Only the respondents that said that they sometimes do not have transportation when they need it were asked to clarify the time of day and day of week when that ride is needed. Understanding these facts will help transportation planners to identify times and days when additional service may be needed.

Most respondents indicated that they need transportation and do not have it between 8:00 AM and 6:00 PM; the peak in unmet trip needs occurs between 12:00 PM and 3:00 PM. These mid-day hours are traditional hours for medical and human service agency appointments and nutrition programs at senior centers.

Exhibit 7. Time of Day When Rides are Most Often Needed and Not Available
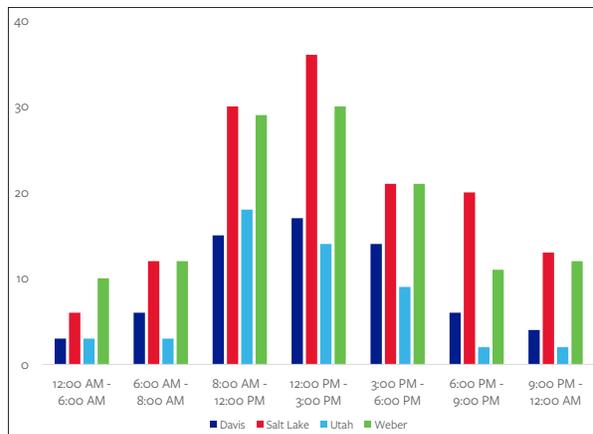
Unmet trip needs occur every day of the week, but are highest on weekdays. More than 10 percent of respondents need transportation on Sundays in Weber County and on Saturday in Davis and Salt Lake County. On weekdays, unmet transportation needs occur for 14 to 18 percent of respondents in each county.

Exhibit 8. Days of the Week When Rides are Most Often Needed and Not Available
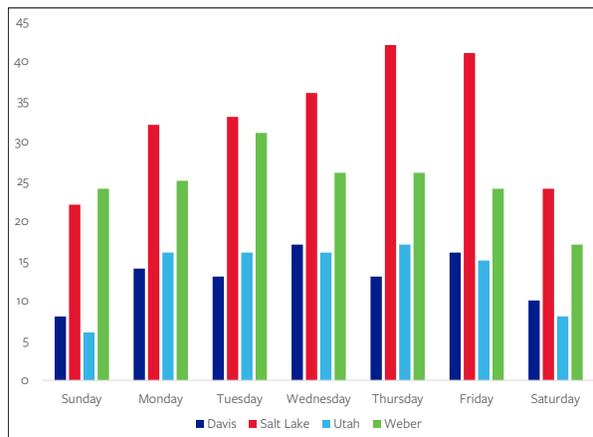
Exhibit 9 illustrates the activities that the respondents who sometimes do not have a ride are missing due to their lack of transportation. In all counties, medical and dental appointments were the most commonly listed trips that are not taken due to lack of transportation. Shopping (including grocery shopping) was also listed by more than 10 percent of respondents in each county who sometimes do not have transportation. Social and recreational trips ranked third highest across all counties. Transportation to health and wellbeing services and activities can be the difference in a person's ability to age in place and maintain a healthy lifestyle.

Exhibit 9. Trips Not Taken because of No Transportation

Trips Not Taken because of No Transportation
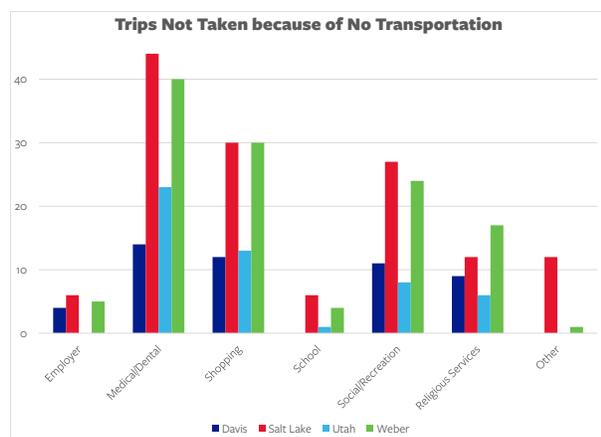
It is also worth noting that the survey results revealed that many of the people who stated that they always have a ride when they need it are relying on family and friends for that ride. Family members and friends also have other priorities and the person who needs a ride is most likely scheduling their travel around the needs of the person who can drive them (i.e., after the person is finished working for the day). The reliance on family and friends who work during traditional business hours may be another reason for the peak in unmet transportation needs for medical appointments and shopping during the mid-day.

As discussed in Chapter 2, transportation services are available during the mid-day on weekdays in all counties. Nonetheless, some individuals do not have a ride when they need it. This could be a result of the type of transportation services available to them not being accessible due to a mobility limitation (i.e., vehicles are not wheelchair accessible or the person cannot walk to the nearest bus stop). The barrier could also be related to the cost of the trip being unaffordable or the respondent is fearful or unaware of available shared-ride transportation options.

The reason for not using public, private or human service agency transportation services is explored in Exhibit 10. In all counties, the most common reason for not using available transportation services was that family members or friends drive them. The second most common answer was that the nearest bus stop is too far away for them to walk from their origin and/or destination. Most of the "other" responses were a variation of riding with friends and family members.

Exhibit 10. Reasons for Not Using Public, Private, or Agency Transportation Services
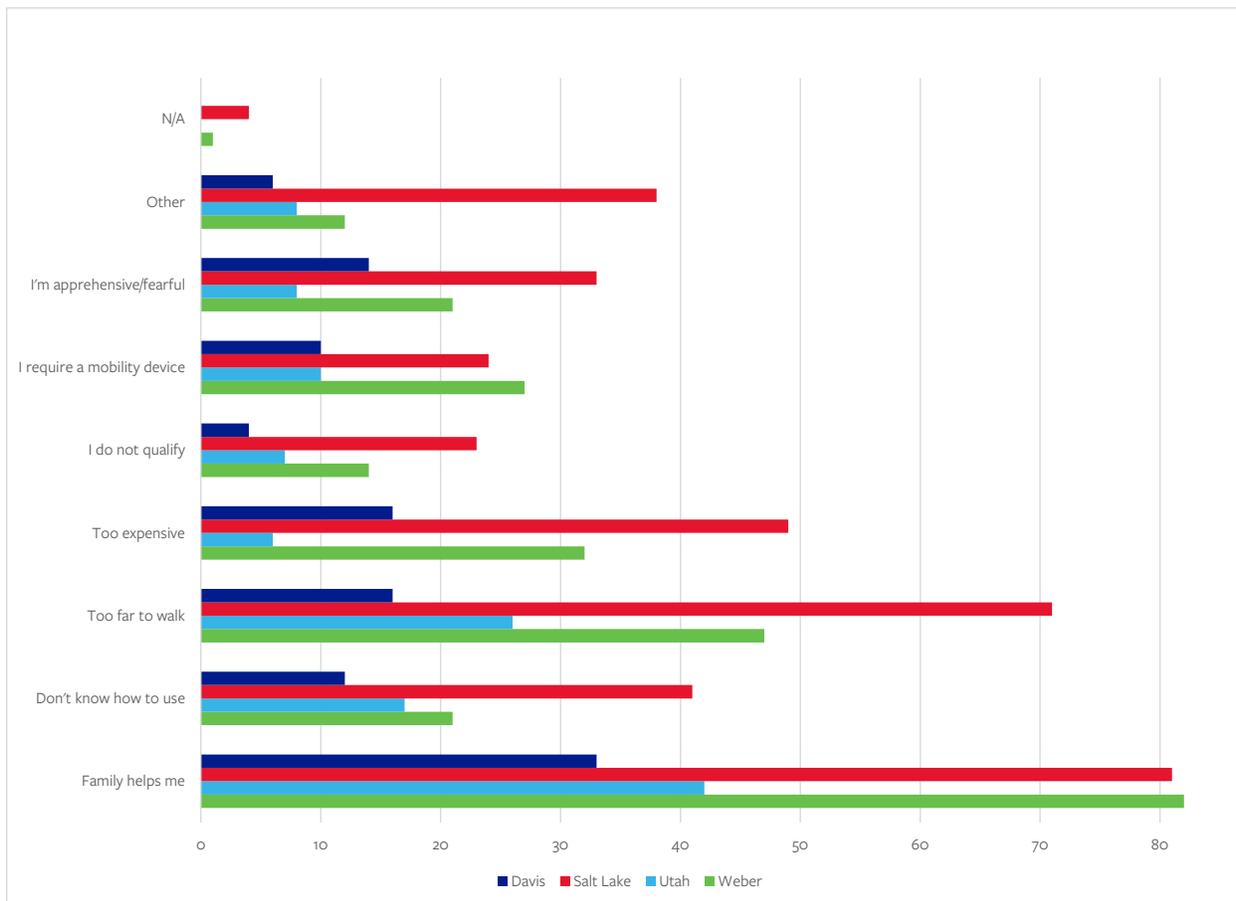
It is noteworthy that several people also indicated that they do not ride transportation services because they are apprehensive or fearful or because they require a mobility device and an accessible vehicle is not available to them.

It is also important to note that in Salt Lake, Davis, and Weber Counties, the price of using available transportation services was cost prohibitive for survey respondents. In Utah County, price was less of a barrier compared to other reasons. In Salt Lake County, unless a family or friends are driving them, the number one reason those questioned do not use transportation services is that it is too far to walk.

Conclusions

The assessment of unmet specialized transportation needs for older adults and individuals with disabilities was strategically planned to ensure extensive opportunities for participation from the targeted groups. Stakeholder input was sought for the purpose of understanding the gaps and unmet transportation needs that are unserved or underserved within the existing network of services. Outreach involved discussions and surveys with older adults, individuals with disabilities and their families. Outreach also involved one-on-one and groups discussions with human service agencies and other organizations that serve the targeted population groups through direct services and by providing funding for program support.

In total, nearly 700 surveys were collected along with completion of 23 group presentations, four focus groups, and one-on-one interviews with 29 transportation stakeholders from across the study area. The gaps and barriers identified through the outreach efforts are discussed in Chapter 5.

CHAPTER 4: GAPS AND BARRIERS IDENTIFICATION

Interviews with human service agency program directors, drivers, advocates, and specialized transportation providers shed light on the most significant limitations to the existing network of transportation services in the region from a service provider perspective. Public survey results and focus groups provide valuable feedback from the perspective of the rider or potential rider.

This chapter outlines the themes from formal conversations and surveys collected during the outreach phase of the planning process. In some cases, the interviewee or meeting/focus group participant identified the biggest transportation challenges faced by their clients. In other cases, participants suggested potential solutions to specific gaps. The commonly cited challenges and potential solutions are discussed in this chapter.

Summary Assessment of Gaps and Needs

The following paragraphs categorize the identified gaps, needs, and challenges into categories. The categories were created in response to the feedback received from stakeholders through interviews, meetings, and survey responses.

SPATIAL GAPS

A spatial gap in service happens when transportation is not available between where the person needs to originate the trip and the destinations. Spatial gaps can include destinations that are just a short distance outside of the UTA service area, but too far to walk. They can also include trips that are not eligible due to funding restrictions or other agency policies that limit jurisdictional boundaries such as to city or town limits. Spatial gaps were the most frequently mentioned challenges to specialized transportation in the Wasatch Front. The specific examples are listed below:

▶ Many stakeholders requested an expansion of the UTA service area for paratransit beyond the ¾ mile boundary of existing routes, especially in the more outlying suburban areas like Draper and Herriman where bus routes are more sparse.

"The corners of the valley are off limits."

▷ There are several employers in Draper that would employ individuals with disabilities but fixed route or paratransit bus service is not available to support employment trips.

▷ Important destinations that the International Rescue Committee (IRC) case workers would like to send clients because there are good jobs available but there are no direct bus routes. IRCs "rule of thumb" for the distance they are willing to try and send their clients for work is within a 45-minute travel shed of their homes (all transportation modes considered). The potential employers include:

▷ Northwest Quad area (lacks transit connections)

▷ Southwest Davis County

▷ The manufacturing centers on the north side of Salt Lake City

▶ The Sephora warehouse on the west side of Salt Lake City (around 6200 West and California Avenue) has committed to having 30 percent of its workforce be people with disabilities. They want to achieve that goal within the next five years. (The workforce will be several thousands of people.) There is not good public transportation to this part of Salt Lake City, which includes large warehouses run by Stadler Rail and UPA. There needs to be a transportation solution to connect individuals with disabilities and people with low incomes

to these large employment corridors along the city's west side.

▶ The first/last mile issue is significant. Access to jobs in industrial areas is a challenge because bus access is limited. There may be a fixed route bus stop near a destination, but not close enough for the passenger to walk the distance between the stop and the door.

▷ For example, Intermountain Healthcare Central Laundry – The nearest bus stop is one mile away. This is a good employer for entry level positions but the last mile is not possible or a deterrent for some potential employees.

▷ Stakeholders suggest looking at where low paying jobs are compared to lower income and unemployed people as a way to improve service.

▶ The ¾ mile boundary for paratransit impacts people, particularly when UTA changes a route and the service boundaries change.

▶ Utah Valley Rides' Monday, Wednesday, Friday transportation service area is too limited.

▶ Public survey respondents indicated that the bus stop being 'too far to walk' was a leading reason for not using public transportation services. This was the second most common barrier for survey respondents in each county.

▶ This issue was particularly important for veterans using UTA to access the Salt Lake Veterans Affairs Medical Center.

▶ Agencies serving individuals with disabilities could expand the Employment Choice Program if employment was more accessible with specialized or public transportation options.

▷ Currently 9 percent of PARC clients' time is spent in the community, and the goal is 25 percent.

▶ Weber County does not have enough curb-to-curb transportation services for seniors.

▶ Expand to the Eagle Mountain and Saratoga Springs area.

▶ Payson, Spanish Fork, Eagle Mountain, Saratoga Springs need more service.

TEMPORAL GAPS

A temporal gap in service is created when transportation is not available at the time of day or day of the week when it is needed. Temporal gaps were generally identified through the public survey input and will differ by county based on the level of available services. In Davis, Weber, and Utah Counties most specialized transportation services that are available at low or no cost to the rider operate on weekdays and do not cover mornings or evenings. Weekday hours support access to local medical appointments but may not support

employment or social outings. The key points related to spatial gaps are as follows:

▶ Survey respondents indicated that they most often need a ride and do not have one between the hours of 8:00 AM and 6:00 PM.

  ▷ Many of these individuals rely on family and friends as their primary source of transportation. Family and friends often work during these hours and are not available to provide rides to medical appointments or grocery shopping during the day.

▶ Many demand response transportation services require as much as one week or as little as 24-hours advance reservations. Options for same-day transportation are needed for last minute or unplanned trips.

▶ A shorter pick-up window for paratransit pick-up times would be helpful for passengers. The long pick-up window is difficult for passengers who are not able to sit and wait for an extended time and for those who are trying to schedule multiple trips in a single day.

  ▷ The two-hour time frame for a paratransit trip is a big obstacle for paratransit users. For example, if they need to get to work at 8:30, the pick-up will be between 6:30 AM or 7:00 AM. Microtransit might be a solution to that issue.

▶ Passengers on UTA prefer the 15-minute service frequency on fixed route buses or TRAX.

▶ Other passengers prefer a longer frequency so that they have time to transfer from one bus to another.

▶ Sunday service on FrontRunner would benefit Utah, Davis, and Weber County residents.

AFFORDABILITY

Affordability of transportation services refers to the affordability to the passenger. Price of riding specialized transportation services was another key issue raised by agencies and survey respondents alike. Funding sources that support specialized transportation will be discussed in more detail in the Phase 2 report. However, the needs assessment results indicate that there is room for improvement in this area even with the existing subsidies that create a savings to the passenger. Key points raised during the outreach efforts are outlined below:

▶ Reducing passenger fares on UTA paratransit was the primary need mentioned by several agencies that represent individuals with disabilities.

▶ In the Wasatch Front Regional Council area and in Utah County, annual household transportation costs range from $12,900 to $15,700 per year.

  ▷ According to the Housing + Transportation Index, residents are spending 43 to 51 percent of their household income on the combined costs of housing and transportation. Traditionally, when the combined cost of housing and transportation exceeds 45 percent, the affordability of living in the area declines.

▶ Twenty-nine percent of survey respondents earn a household income of less than $12,500 per hear.

▷ One-third of survey respondents in Salt Lake and Davis Counties spend less than $20 per month on transportation and one-fourth of respondents spend between $51 and $100 per month.

▶ Low cost transportation options available in the Wasatch Front include riding with family, friends, volunteer driver programs, and public or human service agency programs.

▷ Fortunately, most communities in the Wasatch Front offer at least a limited amount of low-cost transportation options. However, challenges to finding affordable transportation increase for individuals who need to travel with a mobility device and/or an assistant.

ELIGIBILITY REQUIREMENTS

Human service agency programs are funded by various Federal and state funding sources. Restrictions on eligibility of passengers, trip purpose, and service area are often associated with those funds. As a result, human service agencies with differing missions are duplicating transportation services, particularly outside of the UTA service area boundaries and/or for trips that are not appropriate for public transit. This fact creates a potential duplication of services and expenses that could result in less specialized transportation or less-efficient use of vehicles and transportation staff.

▶ Voucher programs are an example of a service with eligibility requirements. For individuals who are eligible for these programs, they fill an important gap.

▷ However, stakeholders indicate that rides for people under age 60 and who do not otherwise qualify could also benefit from voucher programs if they existed.

▷ These programs are particularly important in rural areas or outside of the public transit service area.

▷ Voucher programs for employment trips were suggested during the outreach effort.

FUNDING

Funding to support human service agency and public transportation programs is derived from Federal, State, and local public grant programs and taxes.

▶ The population of older adults is increasing and putting more demand on services that support mobility of seniors.

▶ DSPD's transportation program implements Medicaid waiver services, the largest of which is the Community Support program. This program provides transportation to 5,000+ people with developmental disabilities. They do not have resources to support individualized trips, but Medicaid will soon require DSPD to provide support for people to make individual trips to separate locations at different times, etc., which is a big change from what they've done in the past. The new Medicaid requirements do not come with funding to pay for additional staff support for those individualized trips. Many of those customers could learn to ride fixed route transit independently with some training resources, but there is a small group that would still need a companion to help them ride transit.

▶ Public transportation could be an option for more individuals with disabilities but many agencies continue to directly operate specialized transportation because their clients are not capable of independently transferring between buses or navigating the public transportation services alone. Some of these agencies would like to send more clients to UTA paratransit but feel that more funding for passenger training and/or aides would be necessary.

Summary of Potential Solutions

Stakeholders in the region are actively involved in solving the transportation challenges faced by their consumers. As such, many offered potential solutions to address the gaps in transportation.

▶ Additional public transportation stops/ expanded bus routes in Weber County, and expanded paratransit service to ¾ mile around the extended bus routes would make paratransit more accessible to everyone who lives there.

▶ Some stakeholders also suggested expanding the UTA paratransit service area boundaries to at least one mile.

▶ Donating vehicles or leasing older UTA vehicles to non-profit agencies would allow these agencies to provide more affordable services to their clients.

▶ An expansion of Utah Valley Rides and possible flex routes or microtransit could help to address the gaps in services in Utah County.

▶ More and better information to the general public about where transportation services are available.

▶ Expansion of on-demand microtransit may help to address first/last mile challenges throughout the area.

▶ People who need services would like more flexible ways to use transportation. Group van trips for individuals with disabilities are not the answer anymore. Perhaps microtransit-type services would provide more advantages.

▶ Expansion of volunteer driver voucher programs will benefit individuals who need transportation when or where specialized services are not available.

▶ Coordination to use additional resources such as agency vans that sit idle in the middle of the day, in the evenings, or on weekends.

Level of Coordination Between Agencies

During the interview process, key stakeholder organizations were invited to discuss their real or perceived level of involvement in coordinated transportation planning with UTA or other agencies. Most agencies felt that they could play a bigger role in coordinated transportation efforts. UTA is leading the way in coordination across multiple agencies.

CHAPTER 5: CASE STUDIES

The following case studies were identified based on similarities with the Wasatch Front. The selected case studies represent innovative services implemented to embrace opportunities for new modes of transit, shared rides, volunteer transportation services, and more.
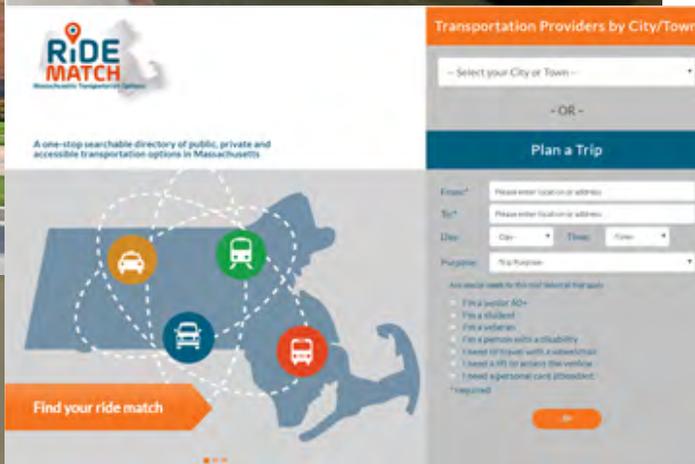
Program: Sacramento Regional Transit District – SmaRT Ride

Location: Sacramento, CA

Service area population: 1.7 million

Fixed route ridership: 10.5 million

Demand response ridership: 486,000

Light rail ridership: 10.3 Million

In February of 2018 Sacramento Regional Transit District (SacRT) launched SmaRT Ride, a 6-month microtransit pilot program in Citrus Heights, a sprawling suburb of Sacramento, with a population density of just over 6,000 people per square mile. SmaRT Ride replaced "CityRide" and the service was open to all. The program was launched in just four months using Transloc technology with the goal of using technology to connect more people to more places. The initial cost for the six-month pilot program was $25,000 and was based on a license fee per month and vehicle fee of $400–$500. The curb-to-curb service was operated using SacRT equipment (27-foot cutaway minibuses) and personnel from the Community Bus Services Division (34 operators). All trips must have origins and destinations within the SmaRT Ride zone or to designated locations outside of the zone, such as a rail station. Service began operating between 7 AM and 7 PM but was soon expanded to 6 AM to 9 PM due to demand. Within two months of the launch of SmaRT Ride, average daily ridership doubled to 60 trips daily as compared to the former "Cityride" service. One quarter of users were booking the trip through the Smartphone app. There were no trip denials and fewer cancellations and no-shows.

Best Practices
- Microtransit
- Quick Implementation
- Embracing Technology

Exhibit 11. Top: SmaRT Ride Vehicle used in the Curb-to-Curb service. Bottom: SmaRT Ride vehicle used by Via to Operate the Corner-to-Corner Service

The pilot project was deemed a success and in July 2018 two additional microtransit zones were added using a grant from the Sacramento Transportation Authority. These two zones operate using a curb-to-curb service with SacRT equipment and operators. In January of 2020, six new service zones were added using a corner-to-corner model where passengers are picked up and dropped off at the nearest corner or virtual bus stop (SacRT reports these are typically within a block or two of where it would be if curb-to-curb service were operated). With the launch of the new corner-to-corner service, SacRT changed technology vendors from Transloc to Via. SacRT does not directly operate the corner-to-corner service; Via is operating the six new zones. All together SmaRT Ride is utilizing 42 vehicles,

making it the largest on-demand microtransit system in the United States.

SmaRT Ride operates on weekdays only, with varying service hours for each zone that range from 6 AM to 10 PM. Trips can be booked either through the Smartphone app, online at ondemand.sacrt.com, or by calling dispatch (during business hours only). Due to the nature of the service, all reservations must be made on the day of travel; no trips can be scheduled ahead of time. Wait times are reported as being as little as a few minutes to more than an hour during the peak times (mid-day). One-way fares are the same as bus and light rail fares, $2.50, unless an individual is eligible for a discounted fare ($1.25). Groups of five or more traveling to and from the same locations are free. Fares can be paid onboard with cash at the time of pick-up, in advance using the SacRT mobile payment app ZipPass, or the Connect Card (smart tap and go card). The SmaRT Ride app used to reserve a trip cannot be used to purchase fares.

Exhibit 12. Citrus Heights MicroTransit Map

While SmaRT is operated both in-house and by Via, paratransit services required under the Americans with Disabilities Act are contracted out to Paratransit, Inc. SacRT paratransit services are currently contracted out, but beginning June 28, 2020 they will be bringing the services in-house, including the mobility training programs. This will allow them to leverage more technology and

innovations and incorporate SmaRT Ride into the paratransit services.

Exhibit 13. Via Mobile App
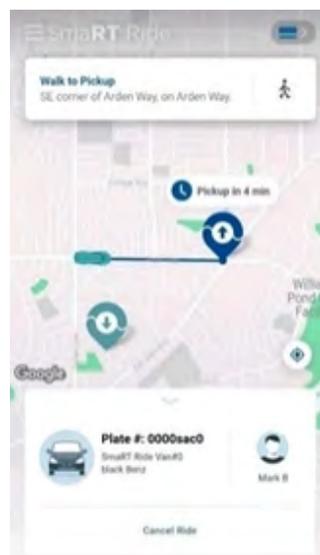
CHALLENGES

► Training operators and dispatchers on the new scheduling software

► Educating riders on how to use the new mobile app

► Cannot reserve service ahead of time

► Getting contracted operators on-board with the technology

► Longer wait times than the agency would like

► Fare payment is not integrated into reservation app

BENEFITS

► Same-day service

► Real-time vehicle location reduces anxiety about when to expect the vehicle

► Utilizing in-house operators and vehicles eliminated any potential union concerns

► Removes the need for paper manifests

► Ridesharing and re-batching of trips is possible throughout the day

► Access to useful data and statistics on travel patterns

► Fewer cancellations and no shows

LESSONS LEARNED

► Extensive outreach is needed to educate existing dial-a-ride customers on how to use the new app. This includes reaching out to every individual registered for the existing service and reservationists notifying all customers calling to book rides about the new service.

► A strategic marketing plan is needed to inform the public of the new service including press releases, news articles, extensive media coverage, and community outreach.

► New branding of the service is recommended to get the attention of the community. This includes new bus wraps with distinct colors.

► Integration into the existing fare collection system is recommended for a smoother transition.

Program: Denver Regional Mobility and Access

Location: Denver, CO

Service area population: 2.3 million

Fixed route ridership: 70.5 million

Demand response ridership: 1.2 million

Light rail ridership: 11.7 million

The Denver Regional Mobility and Access (DRMAC) is the regional coordinating council (RCC) for the seven-county Denver metropolitan area and facilitates each of the eight local coordinating councils (LCCs) for transportation providers, users and advocates. DRMAC was established after the Colorado State Coordinating Council was formed in 2005 to improve mobility and to ensure efficient and effective use of public funding. The state coordinating council, in partnership with the Colorado Department of Transportation (CDOT), provides seed funding to develop RCCs and LCCs. The grants are fully funded using Federal transit Administration (FTA) funds with no required match for an organization that establishes the L/RCC. The seed funding is available for two years and must result in the development of an action plan for coordination. After the action plan is developed, the R/LCC can apply for Sections 5310 and 5311 funding to support defined programs included in the regional transit plan.

While the DRMAC has regional priorities, each LCC has developed local goals and priorities and most meet monthly. In addition to assisting the LCCs with meeting their goals and publishing a resource guide to transportation in the Denver metropolitan area, DRMAC offers a variety of educational workshops and trainings and developed the Transit Advocate Task Force (TATF). The TATF attends transit themed meetings in the Denver metropolitan area to represent DRMAC and advocate for transit and elderly/disabled communities, participate in work groups and committees, and provide a summary of relevant issues to DRMAC. Past trainings/workshops that DRMAC has offered include disability etiquette for transportation providers, transportation options workshop for human services providers, compassion fatigue for transportation staff, travel training, transit advocacy training, transportation options for older adults, ADA coordinator training, mandatory reporter training, and training on service animals and the ADA.

> **Best Practices**
> ● Local Coordinating Councils

Exhibit 14. Example DRMAC Coordinated Calendar of Events for the Region
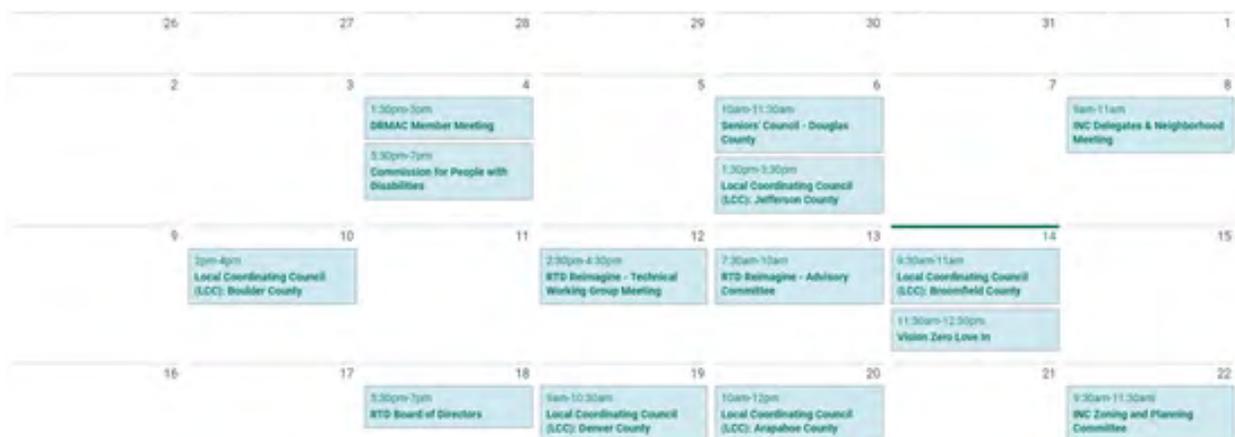
CHALLENGES

▶ Strong local control

▶ Resources are limited

BENEFITS

▶ Educational workshops

▶ Sharing of resources beyond county lines

▶ Funds available to start coordinating councils

LESSONS LEARNED

▶ Regular meetings are important to continue to capture interest.

▶ While RCCs can help promote regional goals, LCCs are needed in states with strong local control.

▶ RCCs can help LCCs (which often follow county lines) share resources and ideas when resources are stretched thin.

▶ RCCs work well to bring together entities that having differing boundaries such as transit providers, planning agencies, and varying area agencies, such as agencies on aging, social and human service agencies, etc.

Program: Flint Mass Transportation Authority

Location: Flint, MI

Service area population: 356,000

Fixed Route Ridership: 4.2 Million

Demand Response Ridership: 500,000

Light Rail Ridership: N/A

Flint Mass Transportation Authority's (MTA) 'Your Ride Plus' is an innovative, personalized approach to providing non-emergency medical transportation (NEMT) through mobility management focused on consumers with behavioral health needs. Built on partnerships with elected officials, non-profit transportation brokers, the Department of Health and Human Services, community health providers, and hospitals, Your Ride Plus is a compilation of programs including travel training, mobility management, technology to improve the customer experience and provide personalized trip planning. The program was developed to provide a higher level of specialized service for consumers. It is funded through partnerships with medical providers, Medicaid, partner organizations, private foundations, and FTA Section 5310 grants. It has been documented that reliable transportation to medical appointments is critical to improving health outcomes and reducing health disparities, yet 90% of mental health consumers using Medicaid in Flint did not have access to a car. Medical providers were willing to pay for the program to ensure that patients made it to appointments. The service is provided through the transportation broker, Michigan Transit Connection, via an agreement with MTA. The mode of service is demand response and must be scheduled in advance. The initial service utilizes seven vehicles, one mobility manager and three to five contracts. It

is anticipated to grow to seventy vehicles, six mobility managers and more contracts to create a coordinated seamless medical transportation system. The initial program costs $200,000 per year to operate but is anticipated to grow to $1 million per year to operate with expansion.

Exhibit 15. MTA Your Ride Plus Vehicle

CHALLENGES

▶ Building ridership

BENEFITS

▶ Mobility management

▶ Person-centered trip planning

▶ Reduced anxiety regarding accessing appointments

Best Practices
● Non-Emergency Medical Transportation
● Partnerships
● Scheduling Technology

As part of the NEMT toolbox, MTA offers Rides to Wellness, a program that provides accessible transportation to six medical facilities not served by the bus system. It was established in September of 2016 and was the outgrowth of a 2015 Health Care Access Mobility Design Challenge Grant to improve local coordination and access to health care resulting from the municipal water crisis. For Rides to Wellness, MTA partnered directly with regional healthcare providers to fund mobility management, door-to-door service, and same day service for

eligible individuals going to medical or other health and wellness-related appointments. The program uses MTA drivers and automatic dispatching that allows for same-day trip requests and arrival within 30-minutes. Proprietary software was built for this program and it includes an online scheduling portal for hospital staff to schedule trips. The program has recently grown to include a Vets to Wellness component.

To be eligible, customers must be associated with one of the partner agencies. Service is available Monday through Friday 8:00 AM to 4:30 PM. Pickups are available at six local medical offices and service is provided to the downtown Transfer Center for $0.85. Rides to Wellness for agency clients is operated through service agreements with local agencies and medical providers who pay a rate of $15 per trip. MTA considers this a premium service, and the partner agencies cover the fully allocated cost per trip. The program became a success and in three years grew from 169 trips monthly at launch to 10,000 trips monthly in June 2019. With the growth of the program, MTA has pursued a number of grants to increase capacity, written by a staff grant administrator and the program director. The Federal Transit Administration (FTA) awarded the MTA a $310,040 grant to support the Ride to Wellness Initiative in September 2016. The Flint Jewish Federation donated $40,000 in March 2017. The Michigan Department of Transportation awarded a $603,500 Michigan Mobility grant for Vets for Wellness in October 2018. In 2019 the program received a $734,000 Innovative Coordinated Access and Mobility (ICAM) grant from the FTA to continue developing software that blends ride-hailing and NEMT. The program began with one mobility manager, one community partner, and three vehicles but grew within seven months to two mobility managers, six community partners, and 26 vehicles.

The Rides to Wellness program now operates at an annual budget of $3 Million. In December 2019, they provided 13,000 trips in a month, and the program averages 700 trips a day. Eighty drivers and five Mobility Navigators are employed, in addition to the Program Director. The Mobility Navigators are funded with Section 5310 Mobility Management money, which also pays for vehicle purchases and IT-related equipment. Revenue from partner organizations, including Medicaid reimbursements, private foundation funds, and some farebox revenue cover the operational expenses.

CHALLENGES

▶ Growing ridership puts a pressure for procuring more vehicles

▶ Capital costs and funding for additional vehicles

▶ Restrictions to who can use programs

BENEFITS

▶ Transportation access to medical appointments

▶ Self-sustaining with respect to operating costs

▶ Medical providers are able to book transportation online at the time of scheduling the medical appointment

▶ Same-day service

LESSONS LEARNED

▶ There are several federal grant opportunities to develop programs that include technology solutions.

▶ Hospitals are potential funding partners; savings can be realized by replacing expensive taxi services to get patients to programs.

▶ Services need to be flexible; the original Rides to Wellness same-day service did not have fast enough response times (less than 30 min) to make it comparable to TNCs.

▶ Hold listening sessions with local healthcare providers to understand unmet needs and identify opportunities for partnering.

▶ Potential performance measures to track are: the number of people who use the service, the reduction in missed appointments, improved communication between medical providers and

transit providers, and reduction in emergency
room visits.

Provider: Big Blue Bus

Location: Santa Monica, CA

Service area population: 12.1 million (LA metro area)

Fixed route ridership: 13.2 million

Demand response ridership: 21,000

Light rail ridership: 18 million (Expo Line LA metro)

In July 2018, Big Blue Bus (BBB) partnered with WISE & Healthy Aging, a nonprofit social services organization, and Lyft to establish Mobility on-Demand Every Day (MODE), replacing the existing traditional on-demand Dial-A-Ride (DAR) service for seniors and individuals with disabilities living in Santa Monica. A comprehensive review of services found that the existing DAR was costly to operate ($22.45 per trip), highly subsidized, and over-utilized in the mornings, but underutilized the rest of the day. By overhauling the DAR program, rebranding it as MODE, and partnering with Lyft, BBB was able to replace the existing service that required advanced reservations with same-day service that improved the customer experience and reduced the cost to operate. The service is available city-wide with trips provided through Lyft Shared rides or MODE accessible vans (owned by BBB). Service is available weekdays between 8:00 AM and 6:00 PM, Saturdays 8:30 AM – 3:30 PM, and Sundays 8:00AM-1:30 PM. Registered individuals are charged the regular Lyft rates if they travel outside of Santa Monica, outside the span of the program, or do not select a shared ride.

To be eligible for the service, individuals must register and attend one of the monthly MODE meetings to learn about the program and fill out the application. BBB collects the application, which includes information on the email and phone number the applicant used to register on the Lyft app and coordinates with Lyft to automatically charge the MODE fare if the trip meets the program parameters. Once registered, individuals can take up to 30 one-way trips per month. Trips can be booked either through the app, online or by calling dispatch. Individuals requiring door-to-door service or wheelchair accessible vehicles (WAV) must call the MODE call center to schedule the trip; Lyft vehicles are not used.

All fares must be paid in advance, either through the Lyft app when booking the trip or by depositing funds into an account managed by BBB; no onboard fares are collected. Initially fares were $0.50, but due to increased ridership, were quickly (within 10 months) raised to $1.50 in order to sustain the program. Additionally, BBB offers low-income fares (typically half price) for all fare media, including MODE. While BBB does use Transit Token for mobile payments on the bus system and is part of the regional TAP card program, these are not available for use with MODE.

To procure the services, BBB budgeted $600,000 annually for the program and released an RFP. The

Best Practices
- TNC partnership
- Same day demand-response
- Late night service
- First-mile last-mile

Exhibit 38. MODE Marketing

contract BBB entered into with Lyft and Campus Saferide (reservation and dispatch for unbanked customers and accessible vehicles) is a three-year contract with a one-year renewal option. Funding for the program is through Proposition A Local Return Transportation funds. The $600,000 per year operating budget is an increase of $120,000 over the previous DAR annual budget. BBB reports that while trips booked through Lyft cost the agency half ($12.06) of a traditional DAR trip, the program has spurred an increase in ridership, which overwhelmed the budget and led to limiting it to 30 one-way trips per person per month (as compared to the original 60 allowed). The budget had accounted for an increase (doubling) in ridership but did not anticipate the overwhelming popularity of the program.

The program took off quickly and within two months, 80% of all rides were completed using Lyft vehicles. Within nine months, ridership nearly tripled from the previous year. Monthly ridership in the program grew steadily; by March 2019, there were 5,500 trips taken monthly. Not only did ridership increase, but the number of registered individuals doubled between July 2018 and March 2019 to 1,600 individuals.

CHALLENGES

- ▶ Trips requiring WAV or door-through-door service cannot be taken using Lyft; individuals must call the MODE call center and schedule a pick-up

- ▶ Same-day trips requiring WAV or door-through-door service are not available on weekends; reservations must be made in advance

- ▶ Non-smartphone customers overwhelm the call centers

- ▶ Only half of customers have smartphones

- ▶ Customers with pre-existing Lyft accounts

- ▶ Poor rider ratings

BENEFITS

- ▶ Lower cost per trip

- ▶ Drivers do not handle cash

- ▶ Same-day service

- ▶ Vehicle tracking and predictive arrival times for customers

- ▶ Increased ridership

- ▶ Mobile payment

- ▶ Improved mobility for the region

In June 2016, BBB established Blue at Night as part of their Evolution of Blue campaign to improve connections to the new Expo Light Rail Line using both BBB vehicles and taxis. In 2017, however, BBB entered into a contract with Lyft to operate the service. The service is available Friday and Saturday nights from 8:00 PM to 3:00 AM to/from all E Line stations in Santa Monica and is open to everyone. To use the service, individuals enter a promotional code into the Lyft app and select a shared ride or use the Transit app to plan a trip to/from a Santa Monica Expo Line Station. Using the Transit app, individuals can plan qualified trips that combine a trip on the E Line and Lyft and automatically apply the promo code. Each month an individual can take up to 20 trips on Blue at Night.

Exhibit 16. Blue at Night Map

In Santa Monica, bus service operates until just after midnight, and the lack of evening bus service on Fridays and Saturdays when the E line operates until 3 AM was a major concern for Santa Monica residents when the E line was launched.

CHALLENGES

▶ No alternative option for customers without smartphones or unbanked customers

▶ Late night service is available for those needing accessible vans but not same-day

BENEFITS

▶ Integrated Transit trip planning app

▶ First-mile/last mile connections

▶ Trips can be reserved in advance or on-demand

LESSONS LEARNED

▶ In order to reduce no-shows, charge a fee. BBB charges a $5 fee to the rider for each no-show.

▶ If setting up accounts for unbanked customers or those who cannot use Lyft to take the trip,

require a minimum deposit into the account each time to limit transactions.

▶ Extensive outreach is required to educate the customers about how to use the system. BBB held one-on-one in-person meetings with all 3,000 existing DAR customers to educate them about MODE. All trips to the meetings were fully paid by BBB through Lyft (BBB set up the Lyft rides) in order to familiarize individuals with the new service.

▶ Provide a temporary overlap of services if transitioning between traditional demand-response and the new service model. The transition period is most important for seniors and individuals with disabilities.

▶ Senior populations are more wary of using credit/debit cards than younger age cohorts; in fact, groups such as the Congress for California Seniors advises against it.

▶ Education is needed not only on how to use the service but on good customer service behavior in order to maintain good rider ratings in Lyft. BBB had to work with customers to close existing accounts if poor ratings existed and open new accounts.

▶ Ensure the contract with the transportation network company (TNC) is set up so that the transit agency can receive the data needed to meet National Transit Database (NTD) reporting requirements. Additionally, require that the TNC provide some level of disaggregation of the data to allow analysis of travel patterns and peak travel times.

▶ Local engagement and support from senior and disability commissions helped promote the program and engage new and existing customers.

▶ Institute a limit on the number of trips per person per month in the beginning because utilization may increase past the original budget as ridership grows (potentially rapidly). While the overall cost per trip is reduced with growing ridership, the increased number of

trips puts a strain on the budget resulting in the need for service modifications (limiting trips, raising fares, requiring all trips via Lyft be booked under shared-rides, increase minimum age).

▶ Even though many passengers switched over to using the Lyft app, the demand on the call center did not decrease as much as anticipated due to the high-percentage of non-smartphone users (50%) and customers needing door-to-door service (25%).

▶ Prior to launching the program, it is important to document WAV needs, not only of the individuals in wheelchairs, but also those who need some level of assistance from drivers such as loading bags, folding walkers, or getting into or out of a vehicle. These individuals will most likely elect to continue using WAV and not the TNC for trips.

▶ Coordinate with the appropriate human/social agencies to identify low-income individuals who are eligible for free smartphones.

Program: MassDOT Regional Coordinating Councils

Location: Statewide (18 RCCs)

Service Area population: 6.9 million statewide

Fixed Route Ridership: N/A

Demand Response Ridership: N/A

Light Rail Ridership: N/A

Massachusetts uses 18 regional coordinating councils (RCCs) comprised of transportation providers, planners, human service providers, and advocates to collaborate and identify and address regional transportation needs. While the boundaries do not follow those of the regional transit authorities, the region lead/contact is frequently an individual from the regional transit authority or planning agency. The RCCs were launched in 2013 through a collaborative effort with Massachusetts Department of Transportation (MassDOT) Rail and Transit Division and the Executive Office of Health and Human Services (EOHHS) MassMobility initiative. They were created after the Community, Social Services and Paratransit Transportation Commission recommended reform to address coordination and efficiency. The RCCs are funded using FTA Section 5310 funds for mobility management as well as state funds in the Commonwealth of Massachusetts Mobility Assistance Program (MAP).

Each RCC is different and reflects local priorities. They are responsible for identifying unmet needs, developing regional priorities, building coalitions, coordinating existing services, communicating with MassDOT, planning agencies and other state agencies, and raising awareness of the role transportation plays in the community. To increase collaboration, boundaries are not rigid, and towns can participle in more than one RCC. RCCs have worked on initiatives including: conducting needs assessment/surveys for transportation, compiling local inventories of transportation data, partnering with regional transit authorities on grant applications, creating ride-matching databases, developing educational material about how to use transit/ride hailing, launching travel training programs, and operating transportation services.

Exhibit 17. Ride Match, a statewide inventory of transportation providers.
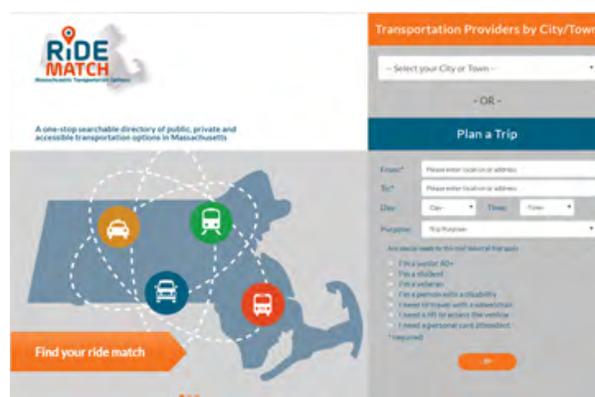
Exhibit 18. Quabog Connector, a demand response service that Supplements service gaps in fixed route transit service

Best Practices
- Mobility Management
- Regional Coordinating Councils

While there is no dedicated funding, and formation and participation is voluntary, the RCCs have successfully received grants through the state community grant program, Massachusetts Rural Technical Assistance Program (RTAP), workforce development programs, community development block grants, and TNC disbursements through a state tax. For example, the Quaboag Valley RCC jointly applied for, and received, a grant with the local transit authority to pilot a microtransit system.

The RCCs are one element of MassMobility, an initiative to increase mobility for the elderly, disabled, veterans, low-income commuters, and others with transportation needs in the state. The other elements of MassMobility include Mobility Management and community transportation coordination. Mobility managers help increase awareness of community transportation, provide travel training assistance, and act as advocates to policymakers on community transportation, mobility, and access. The community transportation coordination initiative helps agencies partner together to share vehicles and drivers and dispatch or coordinate rides. For example, organizations in Attleboro formed a consortium to help employees and consumers get transportation when the bus is not operating. Using grant funding, participating agencies can use the funds to pay for Uber rides when public transit is not operating. In the Berkshires, Councils on Aging collaborated to offer medical transportation to seniors and those with disabilities in neighboring towns without transportation access.

CHALLENGES

▶ Grant funding may be tied to a specific population group

▶ Competing interests within a region

▶ Lack of state funding for the regional mobility manager for each RCC has led many having dual positions

BENEFITS

▶ Regionalized priorities

▶ Collaboration

▶ Vehicle sharing

▶ Joint grant applications

▶ Information, knowledge and best practices sharing

▶ Increased integration with transit planning

Exhibit 19. Ride-hailing class for seniors as part of the TRIPPS program to connect seniors to transportation options launched by the Boston RCC

LESSONS LEARNED

▶ Make sure there are no gaps between RCCs, i.e., that each town is a member of at least one RCC.

▶ While grants can help fund certain programs, there is a level of overhead and time associated with having regional mobility mangers for each RCC. Often this individual cannot devote as much time as desired to promoting the goals and objectives of the RCC or applying for grants to fund programs.

▶ Without new funding, the sustainability of community transportation is in jeopardy, especially due to ever-increasing demand and current funding constraints.

▶ Advocacy is improved when multiple organizations work towards the same goals.

Program: Eastern Connecticut Transportation Consortium

Location: Eastern CT

Service area population: 438,213

Fixed route ridership: 1.1 million

Demand response ridership: 36,000

Light rail ridership: N/A

The Eastern Connecticut Transportation Consortium, Inc. (ECTC) is a private non-profit 501(c)3 formed through a partnership between the Southeastern Connecticut Council of Governments, Frank Loomis Palmer Fund and Bodenwein Public Benevolent Foundation in 1992.The ECTC serves 41 towns and communities in eastern Connecticut. The purpose of ECTC is to serve seniors, low income individuals or families, and individuals with physical and mental disabilities by promoting the coordination and consolidation of paratransit services.

ECTC operates and coordinates a variety of programs. ECTC promotes and educates the public on the variety of transportation options available for the region through a website and attending events. The website acts as a clearing house with information that ranges from program descriptions and eligibility requirements to information on driver training and where to find accessible vehicle rentals. Additionally, ECTC has an active Facebook page, frequently posting information regarding transportation events, new transportation services being offered, major road closures with heavy traffic impacts, and service alerts for the local transit systems.

Exhibit 20. ECTC at Local Senior Resources Healthy Living Expo Promoting Programs

The ECTC operates demand response transit programs in member communities for the elderly and disabled, is the contracted ADA paratransit provider for the local transit system, coordinates a volunteer medical dial-a-ride program, manages the mobility program, identifies transit barriers, looks for ways to create partnerships and close service gaps, and provides vouchers to subsidize taxi, livery, and wheelchair accessible rides. Where feasible, attempts are made to group an agency's needs with other agencies that provide transportation in the same general vicinity or to the same client group. This collaboration enables agencies to offer additional services to clients without greatly affecting the current transportation services. ECTC also makes its vehicles and drivers available for contracting to human service agencies, which helps agencies that only need use of a vehicle on a part-time basis by reducing the costs through the sharing of operating expenses with other agencies.

Best Practices
- Coordinating Public and Private Funding
- Vehicle Sharing
- Public Outreach

Each program is funded separately, and funding comes from multiple sources including Title III funds (federal funds for English language acquisition and enhancement), the FTA Section 5310 funds and the Connecticut Department of Transportation. In 2018, the operating budget for ECTC was approximately $1.1 million.

CHALLENGES

▶ Program-specific funding

▶ Having enough staff to manage operations, coordinate programs, and promote services

▶ Attracting and retaining drivers

BENEFITS

▶ Resource sharing

▶ Lower operating costs

▶ Variety of programs

▶ Clearinghouse of transportation programs in the region

Exhibit 21. Guide Created by ECTC. The guide provides information and contact information for public transit, medical transportation, specialized transportation, mobility services, dial-a-ride, veterans transportation, commuter and carpool services, taxis, accessible vehicle rentals, transportation network companies, intercity bus services, bicycle programs, and other helpful services.
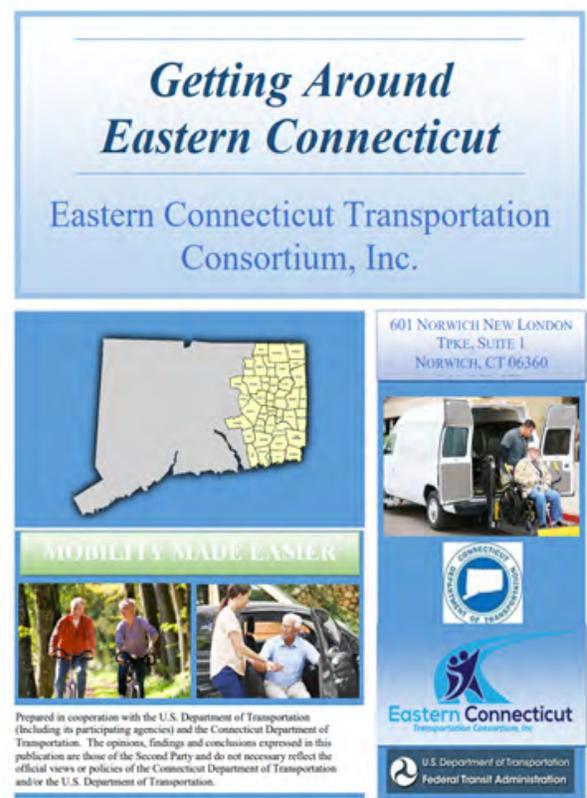
LESSONS LEARNED

- ▶ Through sharing resources with other agencies, every agency reduces operating costs. This coordination process helps to achieve higher levels of efficiency in the use of public and private funds.

- ▶ To improve the mobility of the region, information should be provided not only on the variety of multimodal programs available to transport individuals but also where accessible vehicles can be rented.

- ▶ Private funding programs such as foundations can be used to provide seed money to start a transportation consortium but are unlikely to be long-term support for operations.

- ▶ In order to promote the programs and existence of the organization, it is crucial to go out to the community and relevant events.

- ▶ A strong social media (weekly postings or better) presence helps promote the organization.

- ▶ Conduct a survey with the populations served to better understand transportation barriers and services that could be implemented to eliminate the barriers.

Program: National Volunteer Transportation Center and Volunteer Transportation Center

Location: Nationwide/Northern New York

Service area population: N/A

Fixed Route Ridership: N/A

Demand Response Ridership: N/A

Light Rail Ridership: N/A

The National Volunteer Transportation Center (NVTC) was established in 2014 with a database of volunteer transportation programs throughout the country. Today, there are over 700 programs in the database that provide more than 5 million trips annually. NVTC was founded by AlterNetWays, the Beverly Foundation, Community

Best Practices
● Volunteer Drivers
● First-mile/Last-mile

Transportation Association of America, Ride Connection, and VIS Volunteers Insurance. It has become a national model for volunteer driver programs and a resource for planning, organizing and operating volunteer transportation programs. NVTC also collects and develops information and technical resources and creates online educational programs.

NVTC has developed handbooks to recruit and retain drivers, fact sheets about different aspects of volunteer transportation service, information on trends, reports on best practices, risk management, safety, and worksheets and exercises that program managers and drivers can use to keep track of data and plan trips. In addition to print material, NVTC has developed a free online training course for volunteer drivers about communicating with passengers, safety, distracted driving, and liability and insurance.

Exhibit 39. VTC Volunteer Driver Advertisement on Local Transit Bus

Exhibit 22. NVTC Driver Handbook

September 2018

VOLUNTEER DRIVER RECRUITMENT and RETENTION EXPERIENCE and PRACTICE

A Handbook Prepared by
The National Volunteer Transportation Center

Presented by Toyota

NATIONAL VOLUNTEER TRANSPORTATION CENTER
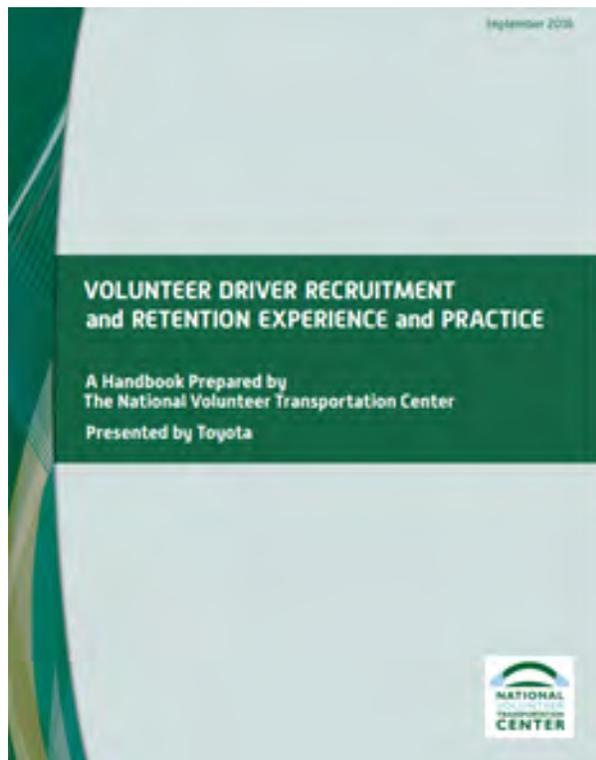
CHALLENGES

▶ Keeping the database up to date

▶ Funding for programs is often community-based

BENEFITS

▶ Centralized location for materials

▶ Educational/training programs

▶ Sharing of best practices

The Volunteer Transportation Center (VTC) is a non-profit organization established in 1989 to provide rides throughout northern New York to residents who have no other transportation alternatives for accessing health, social, and other destinations. This organization uses 250 volunteer drivers to provide transportation to health, wellness and other critical needs. Volunteer drivers use their own vehicles, must be willing to drive four hours a week, have a clean driving record,

and pass a thorough background check. Volunteer drivers provide medical trips through the Access to Care program, first-mile/last-mile transportation to bus stops, and scheduled transportation for trips related to social determinants of health, filling in the gaps the local deviated fixed route system cannot fill. The first-mile/last-mile program was launched in 2018 and is a free service. Between January and August of 2019, there were over 2,600 trips provided, with the largest percentage being for access to employment. The program is funded using FTA Section 5311 funds and there is no current cap on the number of trips it can provide. The Access to Care program began in May 2019 with a $154,000 grant through the Adirondack Health Institute to address social determinants of health for low-income patients. As of September 2019, there were 209 unique individuals who had taken over 800 trips.

In 2018, VTC volunteers drove 5,749,065 miles and 253,389 hours to provide 158,065 trips. In 2018, VTC operated on a budget of $5.3 million, of which 5% was from grants and fundraising; 10% from a contract with Transitional Living Services of Northern New York; and the remaining from a contract with Department of Social Services. Sixty-two percent of the funding is used to reimburse volunteer miles ($0.58 per mile). The majority of the service operated by VTC is through the Medicaid brokerage system for NEMT. Medicaid funding is used to pay for volunteer driver trips for medical appointment purposes.

CHALLENGES

▶ Medicaid trips are a large percentage of trips and there are limitations to where individuals can go. Grocery, employment and trips that reduce social isolation are not allowed

▶ Driver reliability

▶ Accessible vehicles

▶ Finding a host organization that oversees the program and performs the administrative work

BENEFITS

▶ Volunteer drivers are cost effective

▶ Volunteers set own hours, so weekend and late-night trips are possible

▶ Fills in location and service gaps

LESSONS LEARNED

▶ Volunteer drivers should fill in the gaps of the existing transportation system, not compete with it.

▶ Require a minimum of hours for volunteering each month or week.

▶ Provide consistent and uniform training to all volunteer drivers that includes driver safety and passenger sensitivity.

▶ Scheduling rides using software allows for easier tracking and reporting of data but has an initial upfront cost.

Next Steps

Phase 2 of the study will involve a process of developing a comprehensive strategy to coordinate specialized transportation services in a manner that addresses the identified unmet needs and gaps in services that continue to exist. The comprehensive strategy will involve participation from multiple key stakeholders. Solutions will be based on the needs assessment activities.

In addition to the facts presented in this report, the consultant team is researching the impact of access to transportation has on the medical community as well as the utilization of different types of transportation (public, private, non-profit) for non-emergency medical transportation and other trips operated out of hospitals and assisted living centers. Information will be incorporated into the Phase 2 plan.