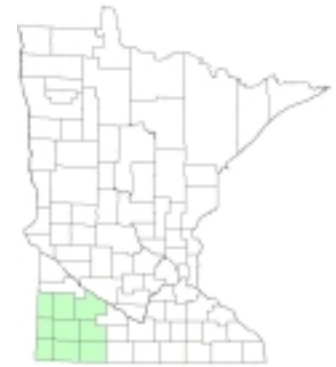


**PUBLIC TRANSIT - HUMAN SERVICE COORDINATION PLAN
SW REGION**



Section 4: Strategies and Implementation

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United We Ride Framework for Action to building the fully coordinated transportation system self assessment tool identifies five areas to assess:

1. Making things happen by working together (local, state and federal agencies and organizations working together to support coordinated transportation).
2. Taking stock of community needs and moving forward (Inventory, Obstacles and Barriers, and Gaps)
3. Putting customers first (input from the users and representatives of users - user friendly accessible information sources, travel training and consumer education programs, seamless payment system that is cost effective, customer satisfaction, marketing and communication).
4. Adapting funding for greater mobility (strategy for tracking financial data across programs, automated billing system to support seamless system).
5. Moving people efficiently (arrangements between diverse transportation providers to offer flexible services that are seamless to customers, coordinated, centralized dispatch).

In Southwest Minnesota, we have been working on making things happen by working together. With the new direction of encouraging coordination and addressing barriers to coordination at the federal and state levels, we will be able to make more things happen by working together. The SW Regional Public Transit - Human Service Transportation Coordination Plan is a work in progress. It provides an inventory on known resources and has identified obstacles, barriers as well as gaps in transit or access to transit.

The strategies for implementation will take into account putting customers first, adapting funding for greater mobility and to move people efficiently. Many specific gaps were identified from nine general categories of gaps at the September 15, 2006 transit coordination Workshop and are listed at the end of this section.

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|---|--|--|
| <ul style="list-style-type: none"> ○ Desired Transit hours ○ Desired Destinations ○ Boundaries | <ul style="list-style-type: none"> ○ Communication ○ Escort Services ○ Volunteers | <ul style="list-style-type: none"> ○ Choices ○ Insurance ○ Other Gaps |
|---|--|--|

Workshop participants prioritized six strategies at the September 15, 2006 meeting to incorporate into the plan (a full list of the specific gaps at the end of this section).

Prioritized strategies to address the identified gaps in service are as follows:

1. **Choices:** Develop and Implement Mobility Management for Public Transit and Human Services Transportation Coordination in Southwest Minnesota 70 points (8 votes, 6 at #1, 2 at #2)

2. **Insurance:** Clarify liability regulations and policies regarding shared / coordinated vehicles, drivers and volunteers: 35 points (5 votes, 2 at #1, 3 at #2)
3. **Choices:** Develop and implement a coordinated transit system. 30 points (3 votes, 3 at #1, 0 at #2)
4. **Transit Hours:** Lower the cost of transportation to clients through coordination and information 25 points (5 votes, 0 at #1, 5 at #2)
5. **Destination:** Address issues of crossing boundaries to provide quality and seamless service: 25 points (4 votes, 1 at #1, 3 at #2)
6. **Transit Hours:** Increase transit service hours where most appropriate: 10 points (1 vote, 1 at #1, 0 at #2)

The Technical Team met on October 18, 2006 and consolidated the draft strategies into two main strategies: Mobility Management and Clarification of liability regulations and policies and are identified on pages 3-6 of this section.

The draft Plan was posted on the SRDC website www.swrdc.org on October 20, 2006 for review and comment. The comments are attached to the end of section 1 as part of the public input process and documentation process. The draft Plan was presented to the SRDC Transportation Committee on November 13, 2006 and brought before the SRDC Board of Directors on December 14, 2006 for approval.

Coordination Strategies that enhance service delivery, reduce duplication, and / or increase coordination and are fiscally constrained

Priority Strategy #1: Develop Mobility Management model, based on criteria and identified gaps for Public Transit and Human Services Transportation Coordination in Southwest Minnesota.

Action Steps for Strategy #1	Who will do this?	When?
1. Seek Funding to Develop Mobility Management model in SW Minnesota	SW Technical Team	December 2006
a. Seek funding to plan the development of a Mobility Management model, sources may include: New Freedom, Section 5310, and JARC funding		
2. Develop Mobility Management model for SW Minnesota.	SW Technical Team	June 2007
a. Clarify / define the meaning of Mobility Management and its needs in Southwest Minnesota		
b. Define Service Area(s) of Mobility Management (within SW and with the rest of the state)		
c. Identify the existing barriers that prevent Mobility Management from being implemented		
d. Define Mobility Manager roles - include but not limited to:		
o Problem solver		
o Develop common standards - area wide for everything (i.e. Volunteer Driver Training)		
o Work with medical community, to define needs and role with transit coordination		
o Develop a Marketing and Education Plan		
o Advocate for funding, coordinate existing funding sources, and seek new funding		
o Develop a tool for continued gap identification and feedback to systems.		
o Develop a tool for evaluation by system users (agency and client)		

Priority Strategy #2: Implement Mobility Management for Public Transit and Human Services Transportation Coordination in Southwest Minnesota.

Action Steps for Strategy #2	Who will do this?	When?
1. Seek funding to implement Mobility Management model.	Technical Team	July 2007
a. Seek funding to implement Mobility Management model, sources may include: New Freedom, Section 5310, and JARC funding		
b. Hire and train Mobility Manager(s)	Technical Team involvement	September 2007
c. Seek training for Mobility Manager (s)		
2. Develop a Coordinated Transit System.	Technical Team and Mobility Manager	January 2008 and on-going
a. Develop ways for transit systems to increase their coordination with each other		
b. Identify options for transit to cross boundaries		
c. Develop selection of choices for clients for cost effective rides <ul style="list-style-type: none"> o Target larger business for car pools o Research Van Pool (i.e. VPSI www.metrocommuterservices.com) o Assist with Bulletin board posting at businesses for shared rides o Research vehicle loan programs o Use Public Funded vehicles, such as Section 5310, when not in use to fill service hour gaps for elderly and disabled individuals o Develop coordination or shared vehicle use with organizations that have Section 5310 vehicles or other public funded vehicles to provide affordable accessible transportation beyond current transit system serviceplan hours and / or boundaries as need is identified o Research other coordination measures for potential implementation o Advocate shared use with: <ul style="list-style-type: none"> o The existing 5311 Transit Systems to fill service hour gaps, back up vehicles, etc. o Other organizations that require accessible transportation. o When an eligible organization identifies need and applies for a Section 5310 vehicle, other alternatives are to be documented as unfeasible, and the Section 5311 Transit System must identify why they will be unable to fill the transit need before an application will be considered for funding by the MnDOT District Screening Committee 		

Action Steps for Strategy #2 (continued)	Who will do this?	When?
3. Lower the cost of transportation to clients through coordination and information	Mobility Manager	2008 & on-going
a. Identify gaps in service hours that can be met cost effectively		
b. advocate pooling rides		
c. Seek funding and use of smaller accessible vehicles that are more cost effective for service in remote rural areas		
d. Develop an Education / Awareness Plan which includes: <ul style="list-style-type: none"> o Acknowledging current behavior patterns and resistance to change o Quality of life for seniors, low income, disabled and public. 		
e. Increase the awareness of local decision and policy makers with consistent data on public dollars spent on transportation and system efficiencies		
f. Identify inconsistencies in public information sources		
o Work with www.Minnesotahelp.info on inconsistencies in database		
o When incorrect / inaccurate data or information on websites is found, contact the website to correct the information or provide link to a website where up to date accurate information is managed.		
o Work to make phone book listings consistent so users and potential users can find transportation resources.		
g. Begin working with other public entities who have transportation needs to fill gaps (i.e. school districts)		
h. Seek innovative coordination possibilities		

Action Steps for Strategy #2 (continued)	Who will do this?	When?
4. Address issues of crossing boundaries to provide quality and seamless service (service area, state lines, funding)	Mobility Manager and Technical Team	2008 and on-going
a. Identify resources and barriers (time, funding, rolling stock, responsibilities)		
b. Educate and Inform Decision and Policy Makers on resources and coordination advantages and barriers so gaps can be filled		On-going
c. Education for:		
o Accessing transit for Human Service Agencies, Medical Community and Public.		
o Transit Systems on vulnerable adults and sensitivity issues.		
d. Develop systems with consistent software and hardware for common use, web-based, and training to use it (Region-wide and statewide)		
o Identify what technology systems currently have and what works well.		
o Seek funding to implement technology upgrades for a common use, web-based software program, hardware, and training for its use.		
e. Develop Regional Pool of Volunteer Drivers	Mobility Manager	2008
o Develop consistent volunteer driver training and management.		
o Develop protocols for volunteers		
o Identify and seek volunteers willing to cross boundaries for extended hours.		
o Recruit more volunteer drivers		

5. Increase transit service hours where most appropriate.	Mobility Manager and Technical Team	2008
a. Conduct needs analysis to identify: <ul style="list-style-type: none"> o Possible use of Volunteer Drivers to extend current system hours. o Identify job related transit gaps which maybe filled with ride share or coordinated transit (beyond current system capabilities) 		
b. Develop Pilot Program where most need is identified for extended hours and / or service.		
c. Seek funding sources for pilot program in one or two transit systems.		
d. If volume merits expand to other transit systems.		
e. Seek funding from businesses and organization / agencies that benefit from increased service hours.		
f. Educate public about value of increased hours.		

Priority Strategy #3: Clarify regulations and policies regarding shared / coordinated vehicles, drivers and volunteers.

Action Steps for Strategy #3	Who will do this?	When?
1. Identify specific regulations and policies that prohibit or inhibit the coordination of rides.	SW Technical Team	2007
2. Inform, increase awareness of decision makers of the impact of policies and regulations that prohibit and inhibit the coordination of rides and advocate for change	Technical Team	2007
a. Develop White Paper to share with elected officials, and be used as a legislative platform. Include: Volunteer driver liability clarification (risk), HIPAA, etc.	SRDC / MNRAA / Technical Team	November 2006
b. Contact the decision makers and allies that can impact the regulations and policies: <ul style="list-style-type: none"> o Local level: decision and policy makers, allies such as local agencies and public, etc. o State level: ICTC; MN Department of Transportation (MN/DOT); MN Department of Human Services (DHS); Minnesota Department of Health; Minnesota Association of Area Agencies on Aging, MN Department of Commerce (DOC), MN County Insurance Trust (MCIT), League of Cities; Transportation Alliance; MN Transit Association, Association of Minnesota Counties (AMC), etc. o National level: Legislators, Federal Highway Administration, United We Ride, National Association of Regional Organizations. (NADO), etc 		
c. Coordinate forum to increase awareness of the impact of rules and regulations on coordination and costs of rides.		
d. Attend Transit Day on the Hill with legislative agenda		

Specific Gaps in Southwest Minnesota: September 15, 2006 SW Regional Meeting

■ Desired Transit hours

- ⇒ Early morning
 - Especially medical
 - Work
- ⇒ Evenings
 - Education
 - Lab, hospital
- ⇒ Weekends
- ⇒ Overlapping requests - capacity to meet requests
- ⇒ Holidays
- ⇒ 24 hours 7 days (9)
- ⇒ Shift rotations
- ⇒ Church service
- ⇒ Ambulance bring in and no way home
- ⇒ 2 day notice for U-Care Blue Rides

■ Desired Destinations

- ⇒ Any medical (1)
- ⇒ Sioux Falls
- ⇒ Out of county
- ⇒ County to county (3)
- ⇒ Spencer
- ⇒ Out of state
 - Medical
 - Plane
- ⇒ Metro
- ⇒ Mankato
- ⇒ Rochester
- ⇒ Willmar
- ⇒ St Cloud
- ⇒ Event specific destinations
 - Prom
 - Wedding
 - Funerals
- ⇒ Retail centers
- ⇒ Mental health treatment
- ⇒ Continuing education
- ⇒ Treatment centers
- ⇒ Legal

■ Boundaries

- ⇒ State
- ⇒ County
- ⇒ Regulatory, i.e. charter regulations (1)
- ⇒ Private entity ownership
- ⇒ Funding (5)
- ⇒ Management Plan, Transit Plan
- ⇒ Scheduling
- ⇒ Volunteer drivers may not drive long distances or late at night

■ Communication

- ⇒ Rider coach for 1st time riders
- ⇒ Language

- ⇒ Technology communication - within the systems
- ⇒ Lack of Understanding (1)
- ⇒ Unaware of service
- ⇒ Idea - X-mas letter - ride coupons
- ⇒ Different names for transit systems
- ⇒ Phone book listings - not consistent
- ⇒ Some daycares don't share transportation
- ⇒ Chambers - are they talking about transit
- ⇒ Staff turnover
- ⇒ Between organizations (2)
 - Employers - college kids don't have cars
 - Between systems / cars and stakeholders
- ⇒ Point of contact - Nice to have one number to call
- ⇒ Small groups - re travel training (Transit 101)

■ Escort Services

- ⇒ Rider companion / Buddy
 - Takes risk off driver
 - Needs more notice to schedule
- ⇒ Personal Care Attendant (PCA)
- ⇒ Package carrier
- ⇒ Levels of service
 - Door to door
 - Station to station
 - Curb to curb
 - Door through door
- ⇒ Car seats
- ⇒ Creates funding gaps (cost of extra rider, etc)
- ⇒ Language
- ⇒ Age - young to old
- ⇒ Use of STS un-necessarily
- ⇒ Need help through all levels of care
- ⇒ Education from providers to transit about frail / sick clients needs (1)
- ⇒ Service animals

■ Volunteers

- ⇒ Reliable vehicles
- ⇒ Background checks
 - ⇒ Stay with client
- ⇒ Too few good volunteer (1)
- ⇒ Age and good sight
- ⇒ Liability
- ⇒ Training - good
- ⇒ Availability
- ⇒ Lack of notice for rides
- ⇒ Driving to large cities

- ⇒ Costs
- ⇒ Regulations and standards - do they allow
- ⇒ Limited incentives
 - High risk with volunteers
 - i.e. Insurance, Rides after you can't drive, Transport family members
- ⇒ Confidentiality
- ⇒ Selective
 - long trip vs short
 - This client vs that one
- ⇒ Fragile riders and drivers
- ⇒ Language
- ⇒ Cultural differences
- ⇒ Can't provide wheelchair rides
- ⇒ Willingness to drive long distances
- ⇒ Cell phones

■ Choices

- ⇒ Use neighbors & friend for free
- ⇒ Riders not having payer sources (8)
- ⇒ Program limitations
- ⇒ Mobility Manager - Point of contact - People need help to make choice (2)
- ⇒ Time - capacity issues - resources (1)
- ⇒ Fees vary (1)
 - Cost to provide service
 - Cost to use service
- ⇒ Type of ride limits choice - i.e. timing wheelchair accessibility at time needed vs availability
- ⇒ Limited options
- ⇒ Clients able to choose, choose the higher cost option
- ⇒ Criteria / Regulations
- ⇒ People liking only 1 option
 - Choice of mode
 - Favorites (volunteer drivers, bus drivers)
- ⇒ Unwillingness for providers to coordinate (4)
- ⇒ Territorial
- ⇒ Insurance
- ⇒ Don't know they have choices

■ Insurance

- ⇒ Based on numbers (volunteers, buses)
- ⇒ Cost
- ⇒ Limitations - underwriters (1)
- ⇒ Board
- ⇒ Ownership (i.e. NH - extra cost for every driver)
- ⇒ Certifications, trainings, Screenings
- ⇒ Liability (4)
 - Client
 - No fault

- Umbrella coverage or not
- Pure volunteer coverage
- Our drivers -vs- your drivers, Insurance regulations
- Minnesota Regulations are different (1)
- Cost to get insurance to go over state lines
- Sharing drivers / vehicles
- If county has MCIT (Minnesota County Insurance Trust) - combining overages?

■ Other Gaps

- ⇒ No Incentive to partner / coordinate (1)
- ⇒ # of trips - territorial
- ⇒ Lack of time to coordinate
- ⇒ Software / technology (3)
 - Affordability
 - Software does not talk to each other
- ⇒ Need for more volunteers
 - Generational divide (younger volunteers are more educated on liability)
 - Volunteers are selective (on who they take and where)
- ⇒ Riders give up when they've been turned down once
- ⇒ Fear of not wanting to complain, don't communicate
- ⇒ No transit community formed, no sense of oneness at the county board level
- ⇒ Medical providers should coordinate appointment with residence