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Transportation
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400

Coordinated Public Transit-Human Services Transportation Plan

Connecting Communities through Coordination

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Executive Summary

Project Summary

The Regional Transportation Authority (RTA) conducted a planning effort to identify and recommend regional and local strategies that encourage the most effective use of available community transportation services to enhance mobility for the region's older adults, persons with disabilities and persons with low incomes. This planning effort is known as *Connecting Communities through Coordination*. The scope of the project covered the seven counties of Cook, DuPage, Lake, Kane, Kendall, McHenry, and Will, and builds upon the existing coordination plans in the region that have been developed, or are in the process of being developed. In part, *Connecting Communities through Coordination* is driven by the Safe, Accountable, Flexible, Efficient Transportation Equity Act – A Legacy for Users (SAFETEA-LU). This federal transportation act requires regions to establish locally-developed, coordinated public transit-human services transportation plans in order to access three specific Federal Transit Administration (FTA) funding programs (see below). The planning effort is also being driven by current coordination successes gained both in the Chicago metropolitan region and nationally, as well as by policy statements from the Federal Interagency Coordinating Council on Access and Mobility that encourage more broad-based coordination of community transportation services that are funded by other Federal sources. Accordingly, the planning effort has two primary goals: 1) to meet the federal requirements associated with receiving FTA funding sections 5310, 5316 and 5317; and 2) to develop a regional resource that supports and encourages local coordination efforts. There are, therefore, three major projects associated with *Connecting Communities through Coordination*:

- A transportation needs assessment for persons with disabilities, older adults and persons with low incomes in the study area;
- A menu of locally appropriate coordination and mobility strategies to address the unmet needs of those three target populations; and
- A revamped process whereby project proposals requesting FTA Section 5316 and 5317 funding are elicited, evaluated, and (for those selected) funded.

Federal Planning Requirements and Policies

As mentioned above, SAFETEA-LU requires the preparation of coordination plans for entities that will access specific FTA funds. The three FTA funding programs include:

- **FTA Section 5310 – Transportation for Individuals who are Elderly and Individuals with Disabilities.** This program provides capital funding for private, non-profit entities (and if none, public entities) that are involved in transporting older adults and persons with disabilities.
- **FTA Section 5316 – Job Access and Reverse Commute Program (JARC).** This program provides funding for projects/services that improve access to transportation services to employment and related activities for welfare recipients and eligible low-income individuals and to transport residents of urbanized and non-urbanized areas to suburban employment opportunities.

- **FTA Section 5317 – New Freedom Program.** This program provides funding for projects/services that provide new public transportation services and public transportation alternatives beyond those required by the Americans with Disabilities Act (ADA).

The stated goal of this requirement is to maximize these three programs' coverage by minimizing the duplication of services. Components of the plan must include, at a minimum:

- an assessment that identifies public, private, and non-profit entities that currently provide transportation services to persons with disabilities, older adults, and people with low incomes, and the availability of those services;
- an assessment of transportation needs for persons with disabilities, older adults, and persons with low incomes, and gaps in service; this assessment may be based on the experiences and perceptions of the planning partners or on more sophisticated data collection efforts;
- strategies and/or activities to address the identified gaps and achieve efficiencies in service delivery; and
- relative priorities for implementation based on resources, time, and feasibility for implementing specific strategies/activities identified.

SAFETEA-LU also stipulates that the coordination plan be developed through a process that includes representatives of public, private and non-profit transportation and human services providers, and participation by the public.

Work Plan, Methodology, and Products

The project work plan and research methodology followed the federal requirements. Initial efforts involved primary and secondary research tasks that included reviewing existing coordination efforts and plans, inventorying existing services, preparing a needs assessment and identifying redundant services and gaps in existing services. Data collection was followed by analytic tasks that involved identifying and recommending strategies to address redundant services and gaps in services, and developing recommendations for policies and strategies for future program years.

In the case of developing recommendations for future programmatic years, note that the SAFETEA-LU horizon reaches only through the FFY 2009; thus, the recommended process developed for this Plan extends only through September 2009. These recommendations also focus on just the JARC program and the New Freedom program, as Section 5310 is administered by the Illinois Department of Transportation (IDOT). As such, RTA has no direct role in the administration of this program; however, RTA has recommended to IDOT that as part of the process of considering Section 5310 funding requests from entities within the study area, that IDOT require or give more weight to applications that are consistent with strategies and needs identified in the Plan.

The project also involved a comprehensive public participation effort that was conducted in concert with the requirements of SAFETEA-LU. This effort included establishing and meeting with a Project Advisory Committee, interviewing stakeholder organizations throughout the region; conducting county-based workshops and themed focus groups; issuing periodic press releases; establishing a dedicated project website; and providing opportunities for comment on the final products. The Project Advisory Committee was composed of regional and local stakeholders

representing the three target populations; the three service boards, planning organizations, and representation from all seven counties.

In addition to this Executive Summary and the draft final Plan, the interim supporting products of this project included the following:

- Task 2 Technical Memorandum: Overview of Community Transportation Coordination – Planning and Services (March 2007)
- Task 3 Technical Memorandum: Inventory of Available Services (May 2007)
- Task 4 Technical Memorandum: Trip Origins and Destinations (May 2007)
- Task 5/6 Technical Memorandum: Service Redundancies, Gaps and Unmet Needs, and Relevant Strategies (May 2007)
- Task 7/8 Technical Memorandum: Regional Policies and Strategies and Recommendations for Future Programmatic Years (June 2007)

All of these documents were used in the construct of this Plan. All of these documents, including the Executive Summary and the draft final Plan were reviewed by the Project Advisory Committee. Input from Project Advisory Committee members was used to revise the documents as needed. The revised documents were posted on the RTA's project website for additional comment from the general public.

Summary of Community Transportation Services

There is a multitude of existing community transportation services available in the seven-county study area, ranging from large regional transit operators to small local providers. As part of this study, an inventory of existing services was developed using a combination of existing research and a web-based provider survey administered by the project team. These are summarized below. A table listing the region's community transportation services (for which information was obtained) is available in the final Plan.

- **Regional Transportation Authority (RTA)** – The RTA provides financial oversight and regional planning -- including coordination -- for regional public transportation operators ("service boards") in Northeastern Illinois: Chicago Transit Authority, Metra, and Pace.
- **Chicago Transit Authority (CTA)** – CTA operates buses as well as subways and elevated rapid transit primarily within the City of Chicago and forty surrounding suburbs. The CTA operates 1,190 rail cars over eight routes and 222.6 miles of track, and has approximately 2,100 buses that operate over 154 routes. All 154 bus routes are fully accessible to customers with disabilities. CTA has used JARC funding to implement new reverse commute bus routes and to extend hours on its Orange and Purple Lines.
- **Metra** – Metra is the commuter rail division of the RTA. It operates 11 fully-accessible rail lines that serve over 240 stations throughout the six-country area of Northeast Illinois. Metra has co-funded reverse commute shuttle services to/from suburban rail stations and established a reverse commute train to North Cook and Lake County using JARC funding.
- **Pace** – Pace is the suburban bus division of the RTA. Pace is responsible for (1) ADA paratransit services throughout the region, (2) the Taxi Access Program (TAP) in Chicago,

(3) co-funding Dial-a-ride services throughout the region – many of which are operated in a coordinated fashion by Pace operations contractors; and (4) vanpool programs – including the Advantage Vanpool program that provides vehicles to agencies providing services to persons with developmental disabilities. Pace also has been involved in JARC projects; this has included reverse commute bus routes and shuttles connecting suburban Metra stations with employment concentrations.

- **Illinois Department of Healthcare and Family Services (HFS)** – HFS is one of the largest providers of transportation in Illinois through administration of Medicaid (Title XIX) funding and in particular, non-emergency medical transportation (NEMT) services. HFS' call center contractor, First Transit, operates the call center (for the entire state) in Lombard. First Transit staff estimates that there are approximately 500 transportation service providers in the study area, most of whom are private for-profit carriers.
- **Area Agencies on Aging** – Transportation for seniors is funded in part with Federal Title IIIB funding which, in Illinois, is distributed by the Illinois Department of Aging to 13 Area Agencies on Aging (AAAs) around the state, three of which are in the study area: the Chicago Department of Aging, Suburban (Cook County) AAA, and Northeast Illinois AAA. The CDOA purchases a limited amount of service on Special Services and otherwise provides a senior shuttle service and a senior building transportation service. The other two AAAs provide funding to several township/municipality services and senior center transportation services, including dial-a-ride services, taxi subsidy services, and volunteer driver programs.
- **Township and Municipal Sponsored Services** – There are approximately 100 township and municipal sponsored community transportation services in the study area. These services primarily include a combination of dial-a-ride services and taxi subsidy programs.
- **Local Human Service Transportation Programs** – There is also a network of approximately 70 human service transportation programs in the study area that were identified as part of this study. Local human service transportation programs include organizations that fund or operate transportation services for clients and specific segments of the population.

Coordination Activities and Challenges

Successful coordination efforts being pursued in each of the seven counties include:

- Regional, multi-agency coordination councils that meet regularly to discuss and address public transit and human service transportation issues.
- Pace co-sponsors and in several cases, operates (through a contractor) many township and municipal level dial-a-ride programs. In many cases, the management/operation of these dial-a-ride programs and ADA paratransit operations are coordinated.
- Groups of townships working together to provide sub-county regional services. Providing dial-a-ride service as a multi-jurisdiction entity effectively expands service coverage and increases the service area.

DuPage County has been at the forefront of coordination activity in the region, stemming back to activities in the mid 1990s. In addition to the above activities, the Ride DuPage program, weaving in human service agency and municipal trips, has been consolidated with the management/operation of ADA paratransit and dial-a-ride programs, while the Pilot II taxi subsidy

program provides additional cross-boundary mobility options for sponsored individuals. Ride-In-Kane, a new project partially sponsored with both New Freedom and JARC monies, is largely based on the successful experiences in DuPage County.

Among the many of the challenges facing organizations that sponsor/operate/coordinate community transportation services is the lack of *sustainable* long-term funding sources, especially as demand for service outstrips the supply of service. Such concerns frequently develop out of the most successful services that do the best job of addressing traveler needs and thus tend to stimulate demand for additional services. This appears to be a concern common to nearly all service providers, inclusive of township, municipal and human service organizations. The conundrum is that the more an organization relies on one local funding source, the more tenuous the service becomes if that funding disappears, is significantly reduced, or simply cannot be counted on from year to year. Thus, the identification of more stable and sustainable funding sources is high on the list of significant needs mentioned by most of these organizations.

Service Redundancies, Service Gaps, and Unmet Needs

With over 170 services and a study area population of 8.2 million, it is not surprising that service redundancies were identified in nearly every county in the study area. Our analysis suggests that redundant services are most likely to occur under the following circumstances:

- Transportation services oriented towards specific programs or populations that operate within the catchment area of a broader, more comprehensive service.
- Municipal and village sponsored transportation services that are provided in locations where township or regional dial-a-ride services already exist.
- Local community transportation services, including human service transportation programs and publicly sponsored dial-a-ride services, frequently overlap with ADA services for certain populations and during specific operating times.

Service gaps and unmet needs persist despite on-going efforts to improve the quality of community transportation services through innovative use of resources and equipment. Limitations on the way service is provided include:

- **Lack of centralized information** – At least two counties currently offer a central resource listing available transportation services; in both cases, transportation directories list services available within the sponsoring county only. The lack of centralized information outside of these areas means there is no single source for individuals seeking to find transportation options, eligibility requirements, fares and service hours, nor is there a regional directory providing information on transportation services available in the wider Chicago area.
- **Spatial limitations** – Limitations on community transportation operating areas were observed in every county in the study area. This means travelers face challenges crossing municipal, township or county boundaries to access regional service areas, especially employment centers. Limitations on community transportation services are especially significant in rural areas.

- **Temporal limitations** – Service hours on most public dial-a-ride services are limited to weekdays during normal business hours, typically between 9 a.m. and 5 p.m. These service hours do not effectively support employment and make it difficult for individuals seeking local connections to regional transportation infrastructure. Weekday hours also creates gaps for travelers during weekends.
- **Program eligibility and trip purpose restrictions** – Many of the existing dial-a-ride services, including ADA paratransit services, are available to subsets of the three target populations. As a result, some populations, especially individuals with low incomes, have limited access to the transportation resources. Other transportation programs are limited to taking people to/from medical appointments, or only to specific programs.

Unmet needs and gaps in services were also identified in association with service quality, issues of affordability and other miscellaneous issues. These gaps and unmet needs include:

- Demand for many community transportation services exceeds the supply and capacity of local providers making it difficult for users to schedule trips.
- Same-day service requests typically can not be accommodated, except through taxi subsidy programs.
- Limited ability to book subscription service makes it difficult for individuals traveling to regularly scheduled trips, such as employment.
- Concerns over the quality of service were voiced across the study area.
- The recent fare increases for Special Services and TAP have presented some affordability issues for some ADA paratransit customers and especially those who use these services regularly, if not daily.
- Subsidized taxi programs do provide opportunities for individuals to cross township and municipal borders, but high per trip costs to the traveler mean taxi programs are most appropriate for occasional travel.

Strategies to Address Shortcomings

We identified a series of coordination and mobility strategies that offer potential application to the study area. Our objective with these strategies is not to develop a regional or county-based coordinated service plan, but rather to enhance understanding of the opportunities and challenges associated with individual strategies that are relevant to the region.

The following text provides an overview of the relevant strategies identified as part of this study. We have grouped strategies based on likely implementation timeframe and type of strategy.

Shorter Term Strategies

We identified nine coordination strategies that could likely be implemented in a six to twelve month timeframe, once financial resources are awarded. These short term strategies are grouped by strategy type that share key implementation and funding characteristics. These shared attributes are briefly described and individual strategies presented.

- **Information and information technology**. Information and information technology offer potential to improve access to or enhance the delivery of existing services. The key challenges for implementation involve establishing support and buy-in from decision makers and partner organizations. Funding for these strategies will be available via most of the major FTA programs.
  - ***Centralize information*** -- develop a single directory of transportation providers on the county and regional level.
  - ***Utilize tools that improve productivity*** – use new software to improve service productivity and cost efficiency.
- **Alternative mobility and service options.** These strategies tend to work best as part of a portfolio of mobility options. Including end users in service design and developing a comprehensive communication strategy will work to increase success. These options lend themselves to traditional funding sources as well as non-profit and for-profit partnerships.
  - ***Establish/expand volunteer driver/escort programs*** – expand service effectiveness by developing or expanding volunteer driver programs to handle trips that are more expensive to serve through more traditional means;
  - ***Establish/expand taxi subsidy programs*** – expand service through taxi programs where vouchers pay for all or part of a taxi ride;
  - ***Introduce community bus routes*** – increase travel options that do not require call-in reservations by creating short, fixed-route services for seniors and persons with disabilities that are tailored to their trip patterns;
  - ***Introduce flexible transit services*** – increase service coverage (and provide an alternative to paratransit) by allowing transit buses to deviate from base route to pick up or drop off passengers on request;
  - ***Introduce agency/employment tripper services*** – enhance mobility options by adding scheduled deviations to major trip generators such as job training locations, senior centers, or employment centers at key times;
  - ***Expand reverse commute strategies*** – improve access to suburban employment centers from urban and rural locations.
- **Financing strategies.** One financing strategy is included in the list of potential short term coordination strategies.
  - ***Accelerate reimbursement*** – provide a perpetual "bridge loan" to solve prospective cash flow problems for community transportation operators as an incentive to become Medicaid non-emergency medical transportation carriers.

Longer Term Strategies

We identified ten coordination strategies that would likely require twelve months or more to implement. Similar with the short term strategies, key issues shared across strategy groups are discussed, followed by a synopsis of the individual strategies.

- **Contracting and consolidation.** Contracting and consolidation strategies work to create cost-efficiencies by sharing resources and administration and increasing purchasing power. Generally speaking, they require a longer implementation timeframe because of the time associated with changing business practices and developing agreement and contractual terms across independent agencies. In most cases funding is available through the larger federal programs.
  - ***Joint purchasing*** – orchestrate group purchase of capital equipment and services, such as vehicle maintenance, driver training, drug and alcohol testing or insurance;
  - ***Share resources*** – share capital and operational resources, such as vehicles, vehicle maintenance functions , storage and support functions;
  - ***Contract with agency operators*** – purchase service from community transportation operators with excess capacity;
  - ***Contract with common providers*** – allow a single transportation provider to co-mingle sponsored trips with other trips from other contracts;
  - ***Consolidate functions*** – merge call center functions and possibly some service delivery functions under one entity.

- **Service improvements.** Strategies to improve service convenience can have a profound impact on customer mobility. The most significant implementation challenges associated with any service improvements are funding and commitment. Service improvement projects are challenged because they require on-going funding sources and most federal programs fund operating expenses at 50%, meaning local sources must sponsor the remaining 50% of service costs. Some non-FTA sources include federal programs outside of the Department of Transportation, community foundations and member cooperatives.
  - ***Improve service convenience*** – enhance access and mobility by increasing and expanding existing services, including spatial and temporal service, same-day service and increased driver assistance.

- **Strategies that improve physical access.** Strategies associated with improving the accessibility involved in making accessibility improvements to transit and inter-modal stations that permit a wider spectrum of the population to physically access these locations. Implementation challenges are associated with making sure the project is designed, funded and executed effectively and efficiently. Making accessibility improvements is considered to meet the eligibility for New Freedom funds, so long as the projects are clearly intended to remove barriers that would otherwise have remained. In addition, several of the major FTA programs permit accessibility improvements.
  - ***Improve access to non-key rail stations*** – improve access to regional infrastructure by making non-key rail stations accessible to persons with disabilities;
  - ***Improve access to fixed-route bus stops*** – improve accessibility to existing fixed-route bus services by making safety and access improvements to fixed-route bus stops.

- **Information technology.** Technological tools that aim to support and enhance public transit and human service transportation develop alongside new coordination strategies. The most significant obstacle associated with implementing new technology, especially in cases where technology is under development, is training staff to operate and manage the systems and integrating new systems with older technologies. Hardware and software that support coordination strategies are eligible for capital funding under the New Freedom program.
  - ***Utilize tools that improve data integrity*** – technological improvements that enhance fare collection, reporting, billing, cost allocation and sharing.
  - ***Utilize tools that support live dispatch*** – software systems that offer dynamic trip scheduling and routing.

Federal and Regional Goals

The development of the Plan stems from several goals. Some of these goals are derived from federal regulations and policies; these include the following:

- To ensure an uninterrupted flow and appropriate level of JARC and New Freedom program funding to the region by ensuring that the Plan fully complies with the SAFTEA-LU regulations and with the spirit and intent of the JARC and New Freedom programs.
- To establish a framework by which proposed projects requesting JARC and/or New Freedom program funding can be elicited, evaluated and (within the constraints of the funding available for the region) funded through a competitive selection process that is fair and equitable, well-advertised, and inclusive.
  - However, the FTA specifically notes that "equitable distribution" refers to "equal access to, and equal treatment by, a fair and open competitive process" and that the result of such a process "may not be an 'equal' allocation of resources among projects or communities". FTA guidance also states that it is possible that some areas may not receive any funding at the conclusion of the competitive selection process.
- To ensure that all components of the Plan have benefited from a comprehensive public involvement effort that has effectively reached out to public, private, and non-profit transportation providers, human services providers and other stakeholders representing persons with disabilities, older adults, and persons with low income, and the general public.
- To craft a plan that will encourage not only coordination among services supported by JARC and/or New Freedom program funding, but also coordination among the broad array of community transportation services in the seven-county region.
- To ensure that the process for adopting the plan includes the endorsement of the Project Advisory Committee.

Additional goals and objectives were derived from public input and especially from the Project Advisory Committee. These included the following:

- To ensure that proposed projects specifically address unmet needs identified in the HSTP.
- To ensure that project applications identify a local "hard" match.

- To ensure that proposals for new projects vs. continuation or expansion of existing projects (that have been successful or have made progress) be given equal weight.
- To give more weight to projects which address more severe needs.
- To give more weight to projects that are regional in scope or otherwise involve multiple counties or jurisdictions.
- To give more weight to projects which are based on strategies identified in the HSTP.
- To give more weight to projects that reduce/minimize duplication of existing services and to projects that utilize or improve access to existing transportation services.
- To give more weight to projects which coordinate with existing public and private human service agency transportation providers or reflect partnerships with non-transit entities and/or private for-profit or non-profit carriers.
- To give more weight to projects that can be implemented quickly (thereby maximizing use of funding).
- To give more weight to projects which are sustainable after JARC/New Freedom funding is depleted, e.g., where local funding source(s) have committed funding for a longer term.
- To give more weight to projects that demonstrate cost efficiency in terms of unit cost of service output, of service consumed, and/or a unit cost reduction of service consumed.
- To give more weight to projects that will increase economic opportunities for individuals with disabilities and persons with low income.

Project Selection Process and Criteria

As the agency designated to receive JARC and New Freedom funding for the region, the RTA is required to:

- conduct an area-wide competitive selection process;
- certify a fair and equitable distribution of funds resulting from the competitive selection process[1];
- certify that the Program of Projects selected was derived from a locally developed, coordinated public transit-human services transportation plan;
- certify that local plans are developed through a process that included representatives of public, private, and non-profit transportation and human services providers and participation by the public;
- manage all aspects of grant distribution and oversight for sub-recipients receiving funds under this program; and
- submit reports as required by FTA.

[1] FTA notes that equitable distribution refers to equal access to, and equal treatment by, a fair and open competitive process. The result of such a process may not be an 'equal' allocation of resources among projects or communities. It is possible that some areas may not receive any funding at the conclusion of the competitive selection process. This means that in any year, there will not be a pre-allocation of funds earmarked for each county and/or for each or any service board. Indeed, the only amount of funds that may be earmarked would be for a selected multi-year project from a preceding year.

With these responsibilities and the above objectives in mind, a schedule for the federal fiscal years 2007-2009 was developed, noting that funding for federal fiscal year (FFY) 2007 must be obligated to a specific project within the year of apportionment plus two additional years. Therefore, FFY 2007 funds must be obligated by September 2009. In summary, the selection process improves upon the existing process in a number of key ways:

- It provides more information to prospective applicants; this includes goals, eligible projects, and activities, eligible applicants, selection criteria, timetables, description of the selection committee, available funding, local match guidelines, the performance monitoring program, and answers to other frequently asked questions.
- The RTA will issue a Call for Projects, utilizing a database of over 3,500 organizations that was compiled as part of this project, and will hold a pre-application seminar open house.
- The selection process will utilize evaluation criteria that was developed as a part of this project and that reflected the federal/regional goals stated above and reflected input from the Project Advisory Committee.
- The RTA will invite each unsuccessful applicant to a separate debriefing session designed to assist the applicant in understanding why a particular project was not chosen and to gain insights from the applicant on how the process may be improved.
- The Selection Committee, in concert with the CMAP Human Services Committee, will review the Selection Criteria after each round of selections to identify any areas that need clarification or revisions for the following year's program. Members of the Project Advisory Committee will be invited to attend and offer input.

The evaluation criteria was developed based on the federal requirements and on the goals set forth above and further refined based on input from the Project Advisory Committee. These proposed criteria will be used in ranking project applications for projects applying for JARC (FTA Section 5316) funding, and/or New Freedom (FTA Section 5317) funding. These criteria, however, are subject to further review and refinement to assure consistency with the Program Management Plan (PMP) and the RTA JARC/New Freedom Application that were under development at the time this plan was finalized. The final version of the PMP, criteria, and application will be made available to prospective applicants and posted to the RTA's website.

The evaluation criteria will be split into 5 sections addressing pre-requisites that must be met, criteria that apply to both JARC and New Freedom projects, criteria that apply to JARC projects only, criteria that apply to New Freedom projects only, and bonus criteria.

Chapter 1. Introduction

1.1 Project Summary

The Regional Transportation Authority (RTA) conducted a planning effort to identify and recommend regional and local strategies that encourage the most effective use of available community transportation services to enhance mobility for the region's older adults, persons with disabilities and persons with low incomes. This planning effort is known as *Connecting Communities through Coordination*. The scope of the project covered the seven counties of Cook, DuPage, Lake, Kane, Kendall, McHenry, and Will (See Figure 1-1), and builds upon the existing coordination plans in the region that have been developed, or are in the process of being developed.

In part, *Connecting Communities through Coordination* is driven by the Safe, Accountable, Flexible, Efficient Transportation Equity Act – A Legacy for Users (SAFETEA-LU), the federal transportation act that requires regions to establish locally-developed, coordinated public transit-human services transportation plans in order to access three specific Federal Transit Administration (FTA) funding programs. The planning effort is also being driven by current coordination successes gained both in the Chicago metropolitan region and nationally.

Accordingly, the planning effort has two primary goals: 1) to meet the federal requirements associated with receiving FTA funding sections 5310, 5316 and 5317; and 2) to develop a regional resource that supports and encourages local coordination efforts. There are, therefore, three major products associated with *Connecting Communities through Coordination*:

- A transportation needs assessment for the three target populations, namely persons with disabilities, older adults and persons with low incomes;
- A menu of locally appropriate coordination strategies; and
- A revamped process for regional organizations applying for the three targeted FTA funding sources.

This planning effort included extensive public involvement. In addition to creating a Project Advisory Committee (reflective of both the geographic and target communities), the public involvement program included stakeholder interviews, workshops, focus groups, press releases, and a dedicated website that provides information about the study and elicits feedback from the general public. A synopsis of the public involvement efforts is available in Appendix A.

1.2 Federal Planning Requirements and Policies: SAFTEA-LU

The federal transportation bill known as SAFETEA-LU, passed in 2005, requires the preparation of coordination plans for entities that will access FTA funds. SAFETEA-LU states that projects funded from the following three programs must be derived from a locally developed, coordinated public transit-human service transportation plan. The stated goal is to maximize the three programs' coverage by minimizing the duplication of similar, overlapping services. SAFETEA-LU also stipulates that the plan be developed through a process that includes representatives of public,

private and non-profit transportation and human services providers, and participation by the public. The three FTA funding programs include:

1. **FTA Section 5310 – Transportation for Individuals who are Elderly and Individuals with Disabilities.** This program provides formula funding to states for capital projects to assist in meeting the transportation needs of the elderly and persons with disabilities. This funding, available to public entities and private, non-profit entities involved in transporting seniors and persons with disabilities, has historically been used for capital expenditures, typically for accessible vehicles. Approximately $3.7 million was allocated to the seven-county region in calendar year 2006. The grants were awarded to 55 organizations and provided 47 vehicles.[2]

2. **FTA Section 5316 – Job Access and Reverse Commute Program (JARC).** The JARC program provides formula funding for projects that assist individuals with low incomes and other individuals with transportation services to access jobs and employment-related activities. A list of projects eligible for JARC funding is provided in Appendix C.

3. **FTA Section 5317 – New Freedom Program.** The New Freedom Program (NF) provides formula funding for new public transportation services and service alternatives beyond those required by the Americans with Disabilities Act (ADA). The New Freedom program aims to provide additional tools for persons with disabilities seeking to overcome existing barriers integrating into the work force and participating fully in society. A list of eligible projects under the New Freedom Program is shown in Appendix C.

Proposed guidelines in the September 6, 2006 FTA circulars for the Sections 5316 and 5317 programs define a coordination plan as one that must include, at a minimum:

- an assessment that identifies public, private, and non-profit entities that currently provide transportation services to persons with disabilities, older adults, and people with low incomes, and the availability of those services;
- an assessment of transportation needs for persons with disabilities, older adults, and persons with low incomes, and gaps in service; this assessment may be based on the experiences and perceptions of the planning partners or on more sophisticated data collection efforts;
- strategies and/or activities to address the identified gaps and achieve efficiencies in service delivery; and
- relative priorities for implementation based on resources, time, and feasibility for implementing specific strategies/activities identified.

[2] IDOT, CY06/2004 CVP Application Awards Program.

1.3 Project Coordination

The consulting team coordinated with staff from IDOT, which is developing a similar process for eliciting and evaluating applications for Section 5316 and 5317 grants from downstate applicants. Also, while IDOT continues to be responsible for 5310 grant applications, it was logical to ensure that IDOT checks to make sure that 5310 grant applications from the seven-county Northeast Illinois region are in concert with established regional / local coordination plans and strategies. The consulting team also coordinated with the state-level Inter-agency Coordinating Committee on Transportation (ICCT).

1.4 Project Work Plan and Study Methodology

The project work plan and research methodology was composed of the following steps:

Task 1: Develop Detailed Work Scope and Schedule.

Task 2: Review Coordination Plans in the Region – The study team reviewed existing coordination plans and conducted interviews with regional public transit agencies and planning organizations, human service agency organizations, and counties/municipalities.

Task 3: Inventory Available Services – This task involved developing an inventory of community transportation services. Sources included inventories from past/current planning efforts, other inventories, and a web-based survey.

Task 4: Conduct Transportation Needs Assessment – The transportation needs of persons with disabilities, older adults, and persons with limited incomes were identified by examining census data, Pace trip data, survey results, stakeholder interviews and data from Workforce Investment Boards.

Task 5: Identify Redundant Services and Gaps in Service – Using results from Tasks 2 through 4, together with input collected from the county workshops, redundant services and gaps in services were identified.

Task 6: Identify and Recommend Strategies to Address Redundant Services and Gaps in Service – This task involved identifying potential "best practice" coordination strategies appropriate to the region.

Task 7: Develop Recommendations for Policies and Strategies – The study team identified and documented policies and strategies with potential to eliminate or reduce the duplication of services, fill service gaps, and provide more efficient community transportation services and resources.

Task 8: Develop Recommendations for Future Program Years – The study team recommended program goals and guidelines for the distribution of Section 5310, 5316, and 5317 funding in the seven-county region, as well as guidelines for the oversight of services that receive this funding.

Task 9: Prepare Executive Summary and Draft Final and Final Reports

Task 10: Conduct Public Participation Plan – Throughout the project, a comprehensive public participation effort was conducted, including:

- establishing and meeting with a Project Advisory Committee;
- interviewing stakeholder organizations throughout the region;
- conducting county-based workshops and themed focus groups;
- issuing periodic press releases;
- establishing a dedicated project website; and
- providing opportunities for comment on the final products.

1.5 Organization of Draft Final Plan

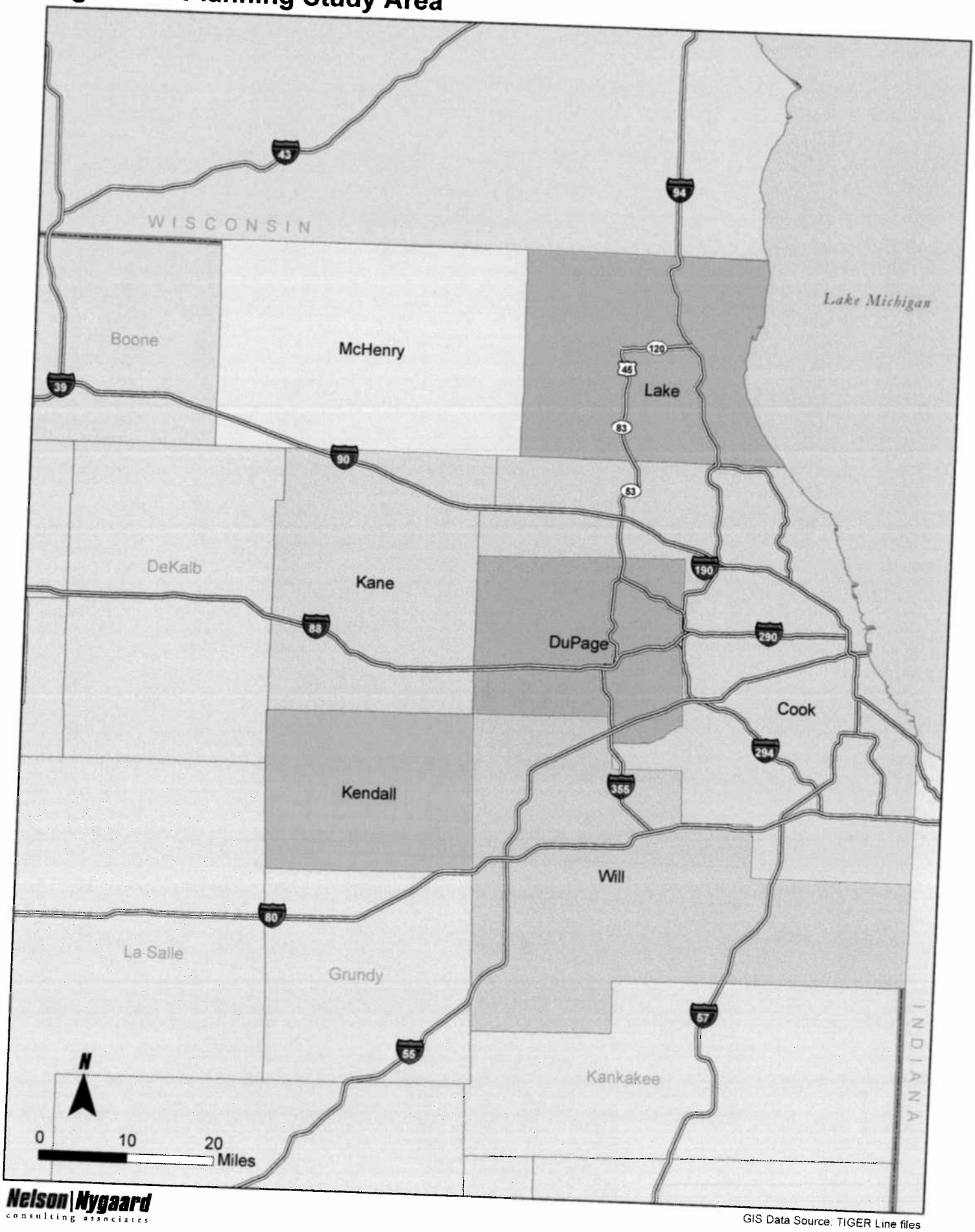
This Draft Final Plan is organized as follows:

- **Chapter 1: Introduction to the Study** – This chapter provides a summary of the project, project goals and relevant federal policies. It also includes the project work plan.
- **Chapter 2: Overview of Study Area, Available Services and Needs Assessment** – This chapter includes an overview of the regional transportation services, coordination efforts and existing service redundancies, needs, and gaps.
- **Chapter 3: Strategies to Address Service Redundancies, Service Gaps, and Unmet Needs** – This chapter presents relevant coordination and mobility strategies that offer regional potential to address identified needs and gaps in existing services.
- **Chapter 4: Priorities for Implementation** – This chapter presents an overview of Section 5316 and 5317; the regional Section 5316 experience to date; and program goals and guidelines for the distribution of Section 5316 and 5317 funding.

The draft final Plan also includes three appendices, submitted under a separate cover:

- **Appendix A:** Provides a synopsis of the public involvement effort.
- **Appendix B:** Includes an overview of existing community transportation services area.
- **Appendix C**: Includes a list of eligible projects under FTA Section 5316 and 5317 funding programs.

Figure 1-1 Planning Study Area



Nelson|Nygaard
consulting associates

GIS Data Source: TIGER Line files

Chapter 2. Overview of Study Area, Available Services and Needs Assessment

2.1 Overview of Study Area

The geographic scope of this project contains the Regional Transportation Authority service area which is comprised of the six counties of Cook, DuPage, Kane, Lake, McHenry, and Will, plus Kendall County which is outside of the RTA service area but in the catchment area of Chicago Metropolitan Agency for Planning. There are currently more than 8.1 million people living in the seven-county study area. Approximately 16% are persons with disabilities, 11% are aged 65 and above and 24% are individuals with low income. This information is shown for each county and for the study area in Figure 2-1. As shown, with the exception of Cook County, the proportion of persons with disabilities and older adults is relatively consistent across the suburban counties. Individuals with low income represent a larger portion of the total population of Cook County as well as Kane and Lake Counties, but are roughly 10-15% in the other suburban counties.

Figure 2-1 Total Population and Proportion of Target Populations

County	Total Population	Percent of Population		
		With Disabilities	Aged 65+	With Low Incomes
Cook	4,942,123	19.7	11.7	30.0
DuPage	904,161	12.2	9.8	10.7
Kane	364,135	15.3	8.4	19.0
Kendall	50,006	12.2	8.5	10.2
Lake	573,127	13.4	8.5	16.0
McHenry	237,897	11.4	8.0	11.9
Will	452,931	12.8	8.3	13.6
Summary	8,146,975	15.9	10.7	24.2

Source: US 2000 Census

Year 2000 populations for persons with disabilities and older adults are shown in Figure 2-2 together with a 10-year forecast growth based on data prepared by CMAP. This data shows that the population of persons with disabilities and older adults will greatly increase in several counties. Populations in Kane, McHenry and Will counties, for example, are forecast to increase between 21 and 37%, while the population of persons with disabilities and older adults in Kendall County is anticipated to nearly double.

Figure 2-2 2000 Population and 10-Year Forecasted Growth by Target Populations

	Persons with Disabilities		Older Adults	
	2000 Population	10-Year Forecast Growth (%)	2000 Population	10-Year Forecast Growth (%)
Cook	1,383,295	5.0%	603,891	3.9%
DuPage	174,604	3.5%	81,312	3.2%
Kane	90,926	21.0%	31,683	27.5%
Kendall	10,725	89.1%	4,455	91.1%
Lake	133,759	10.5%	51,836	13.0%
McHenry	51,076	25.1%	9,935	26.4%
Will	103,032	36.3%	39,219	36.8%
Total	1,947,417	8.7%	832,331	7.9%

Source: CMAP

2.2 Assessment of Available Services

The seven-county study area contains a multitude of transportation services, ranging from large regional transit operators to small local providers. As part of Task 3 for this study, the study team developed an inventory of existing services using a combination of tools including a web-based provider survey. A summary table listing all community transportation services in the seven-county region is provided in **Appendix B**. This section provides an overview of the largest regional transportation organizations that fund and operate community transportation services, as well as a brief summary of the smaller, local providers.

Regional Transportation Organizations and Service Providers

Regional Transportation Authority (RTA)

The RTA provides financial oversight and regional planning—including coordination—for regional public transportation operators ("service boards") in Northeastern Illinois: Chicago Transit Authority (CTA), Metra, and Pace. As the transportation funding body for the region, the RTA has also been involved in overseeing the ADA paratransit services in the region, which currently is comprised of two services, "Special Services" in the CTA service area and "Pace ADA Paratransit" in the Pace service area. (These services are both described in detail later in this chapter.) Since 1993, the RTA has also directly provided the ADA rider eligibility certification function for the region. In conjunction with this role, the RTA purchases paratransit trips from Pace for ADA paratransit applicants.

Overview of the CTA[3]

The Chicago Transit Authority (CTA) is the operator of buses as well as subways and elevated rapid transit primarily within the City of Chicago and forty surrounding suburbs. On an average weekday, nearly 1.6 million rides are taken on CTA, providing 81% of the public transit trips in the six-county region. The CTA operates 1,190 rail cars over eight routes and 222.6 miles of track, and has approximately 2,100 buses that operate over 154 routes and 2,529 route miles. All 154 bus routes are fully accessible to customers with disabilities. Lifts and ramps on all buses are available for use upon request by anyone who has trouble with steps, even temporarily. The catchment of people living or working within ¾ of a mile of a bus stop is approximately 3.5 million.

From 1981 through June 2006, the CTA also operated paratransit services, including Special Services, a shared-ride, door-to-door service, and the Taxi Access Program (TAP), a taxi subsidy program available to Special Services customers. Beginning in 1992, Special Services served as the CTA's response to its ADA complementary paratransit obligation. For most of these years, Special Services was provided through turn-key contracts with three private carriers (Cook-DuPage Transportation, SCR Transportation, and Art's Transportation). Per House Bill 1663, passed in July 2005, Pace took over the responsibility for Special Services and TAP, and hence assumed these Special Services contracts on July 1, 2006.

Overview of Metra[4]

Metra is the commuter rail division of the Regional Transportation Authority. Metra operates 11 fully accessible rail lines that serve over 240 stations throughout the six-country area of Northeast Illinois. In 2006, Metra's system served over 84.3 million passenger trips. Metra serves approximately 310,000 weekday passengers on 735 revenue trains. On weekends, approximately 106,000 passengers travel on 435 revenue trains. Ridership was up in 2006 by 5.2% over 2005 levels.

Overview of Pace[5]

Pace, the suburban bus division of the RTA, provides fixed-route bus service, express bus service, dial-a-ride paratransit services and vanpool/subscription bus service throughout the RTA region outside of the CTA service area. Pace serves an area of 3,518 square miles with 5.2 million residents, encompassing a wide range of demographic groups, activity centers, and travel and development patterns. Since July 1, 2006, it also assumed the responsibility for ADA paratransit service throughout the RTA region (in adding Special Services to the ADA paratransit services it was already providing outside the CTA service area) as well as the Taxi Access Program.

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[3] Source information used for this Overview section included: RTA Regional ADA Paratransit Plan for Persons with Disabilities, CTA website www.transitchicago.com, CTA Bus & Rail Map, June 2006, and CTA JARC applications for 2006.

[4] Sources: RTA Regional ADA Paratransit Plan for Persons with Disabilities, January 2006; Metra website www.Metrarail.com; *A Guide to Metra-Your Regional Commuter Railroad*; and Metra JARC applications for 2006.

[5] Sources: RTA Regional ADA Paratransit Plan for Persons with Disabilities, January 2006; Pace Profile 2007, www.pacebus.com; Pace 2020-Blueprint for the Future; DuPage Area Transit Plan 2020, Oct. 2002; and Pace JARC applications.

Pace's Paratransit operations now include five components:

- **ADA Paratransit Services in the Pace Service Area** – In 2005, Pace provided 458,774 ADA paratransit trips. Pace's ADA paratransit operations in the Pace service area may best be described as a decentralized operations model of eight service areas, each with its own contractor. There are three carriers that serve the eight service areas: Laidlaw has 4 contracts; MV Transportation has three contracts; and Veolia Transportation (formerly ATC) has one contract.
- **Non-ADA Paratransit Services in the Pace Service Area** – Pace's dial-a-ride services consist of 62 programs that provide curb-to-curb, next-day service to general public residents of some communities and senior and disabled residents of others. These dial-a-ride programs are provided in 79 of the 114 townships in Pace's service area. For some communities, dial-a-ride service is the only form of public transportation available and is typically open to the general public. In other communities, dial-a-ride service was developed as a supplement to fixed-route and ADA services, and is limited to senior citizens and persons who have disabilities. Dial-a-ride projects are funded jointly by Pace and local villages, townships, and in the case of Ride DuPage, human service agencies.
- **Pace's Vanpool Services** – Pace's Vanpool program is comprised of four different programs, with the Advantage Program most relevant to this study. The Advantage Program provides a transit alternative to persons with disabilities that commute on a regular basis to work sites or rehabilitative workshops. This program not only provides service to persons who might otherwise request ADA paratransit service from Pace, it also is an alternative for those people living outside the ¾ mile ADA paratransit service area.
- **ADA Paratransit Services in the CTA Service Area (Special Services)** -The Special Services program began in 1981. As discussed, this paratransit service was initially operated in-house by the CTA. With the advent of the ADA in 1990, Special Services became the CTA's ADA complementary paratransit service. Hence, Special Services is provided where and when CTA's fixed-route (mainline) bus and rail services are provided to persons who, because of their disability, are unable to use or access bus and rail services. On July 1, 2006, responsibility for Special Services (and the Taxi Access Program) was transitioned to Pace.
- **Taxi Access Program (TAP)**[6] – Pace, in cooperation with the City of Chicago, provides two taxi subsidy programs which allow certified ADA paratransit-eligible persons to travel in taxis at reduced rates for trips that originate in the City of Chicago. The two programs are called the Taxi Access Program (or TAP) and Mobility Direct.

Overview of State & Regional Human Service Transportation

Department of Healthcare and Family Services (HFS)

The Department of Healthcare and Family Services (HFS) is one of the largest providers of transportation in Illinois. Included in its responsibilities is Medicaid (Title XIX) funding and in particular, non-emergency medical transportation (NEMT) services. In June 2001, HFS implemented the Non-Emergency Transportation Service Prior Approval Program (NETSPAP) in Cook County; on May 1, 2004, NETSPAP became a statewide program. The focus of NETSPAP is to assure that participants who are eligible for transportation receive the appropriate level of

[6] Source: RTA ADA Paratransit Plan, Technical Memorandum #1.

transportation services to necessary medical care, that there is a uniform application of transportation policies, and that payment is made only for medically necessary transportation. First Transit is currently under contract to manage NETSPAP and staffs a call center located in Lombard. In 2004, HFS estimated that 85,000 Medicaid recipients received NEMT and that 3 million one-way passenger trips were provided statewide at an average cost of $19 per trip.[7]

Area Agencies on Aging[8]

Transportation for seniors is funded in part with Federal Title IIIB funding which, in Illinois, is distributed by the Illinois Department of Aging to 13 Area Agencies on Aging (AAAs) around the state. Each AAA is responsible for delivery of services to seniors in its area, including transportation. Each AAA develops an Area Plan which details these services, noting that each Area Plan must be approved by the Illinois Department of Aging. Each AAA makes the decisions about what to fund and how to deliver the services. Federal Title IIIB funding requires a local match. In Illinois, this local match is provided partially by the state at about 5%, which is used for both administration match (at 65%) and service match (at 35%). The greater portion of the local match that is required to deliver services is generated by local communities. By statute, rider donations can not be used as part of the local match; instead, they are to be used for service expansion. In the seven-county region, there are three AAAs:

- Chicago Department of Aging (City of Chicago) – CDOA has four transportation programs listed on its website, but only one, Emergency Medical Transportation Services, is funded with Title IIIB funds.
- Suburban AAA (suburban Cook County) – The Suburban AAA provides Title IIIB funds to ten transportation programs in 2006. Organizations receiving transportation funding include local units of government, senior centers, and human service agencies.
- Northeastern Illinois AAA (DuPage, Lake, Kane, Kendall, McHenry and Will Counties) – NIAAA funds senior transportation through human service agencies, Case Coordination Units and local units of government.

Township and Municipal Sponsored Services

There are slightly more than 100 township and municipal sponsored community transportation services in the study area. These services include a combination of community bus service, dial-a-ride services, and taxi subsidy programs. Most services are limited to township or municipal boundaries, with exceptions allowed to regional medical facilities. There are, however, several sub-regional services where groups of townships are collaborating to provide dial-a-ride services for larger service areas. Some services are available to members of the general public with others available to targeted segments of the population, typically persons with disabilities and older adults.

In many cases, dial-a-ride services are provided jointly by local governments and Pace and administered as part of Pace's existing contracts with service providers. The level of Pace subsidy to townships and municipalities varies by region; each contract was negotiated independently at

[7] *Potential and Feasibility for Coordination of Transportation Services in Illinois*, prepared by Transystems for the Illinois Council on Developmental Disabilities, May 2006.
[8] Source: Interviews with CDOA, Suburban AAA, and NIAAA staff.

different times. A general overview of the number of township and municipal sponsored community transportation services available by county and by type are listed in Figure 2-3.

Figure 2-3 Township and Municipal Sponsored Community Transportation Resources

	Dial-A-Ride Programs	ADA Paratransit Service Contracts	Taxi Programs
Cook	26	4	5
DuPage	15*	1	17
Kane	8	1	0
Kendall	0	0	0
Lake	14	2	2
McHenry	9	1	0
Will	6	1	0
Total	78	10	24

Source: Nelson/Nygaard Consulting Associates; See Appendix B for full details
* Includes Ride DuPage

Local Human Service Transportation Programs

There is also a network of approximately 80 human service transportation programs in the study area, including organizations that fund or operate transportation services for clients and specific segments of the population. The majority of these services provide transportation to/from medical facilities and specific programs and services, including employment and job-related activities. A listing of human service organization community transportation services is provided in Figure 2-4.

Figure 2-4 Human Service Organization Sponsored Community Transportation Resources

	Human Service Sponsored Services
Cook	36
DuPage	7
Kane	2
Kendall	0
Lake	8
McHenry	11
Will	4
Regional	14
Total	82

Source: Nelson/Nygaard Consulting Associates
See Appendix B for full details

On-going Coordination Activities

Successful coordination efforts are currently being pursued in each of the seven counties. Regional successes that have been achieved with some level of consistency across the study area include:

- Several counties have regional, multi-agency coordination councils that meet regularly to discuss and address public transit and human service transportation issues. Counties that have demonstrated support for coordination and that have on-going coordination committees devoted to addressing these issues typically had more, and more diverse, community transportation services.
- Pace co-sponsors and in several cases, operates (through a contractor) many township and municipal level dial-a-ride programs. Combining operations contracts under a single contract is an effective coordination strategy that works to improve operational efficiency and lower program costs.
- Most of the counties have examples where groups of townships are working together to provide sub-county regional services. Providing dial-a-ride service as a multi-jurisdiction entity effectively expands service coverage and increases the service area.

Organizations involved in some of the successful on-going coordination efforts expressed a concern over the need for a sustainable, long-term funding source to support their local and regional success stories. Such concerns frequently develop out of the most successful services that do the best job of addressing traveler needs and concerns and thus tend to stimulate demand for additional services.

2.3 Assessment of Needs and Gaps

Service redundancies were identified in nearly every county in the study area. In most cases, service redundancies were identified as examples of multiple services available for one or more population sub-groups and at specific times of day, locations and trip types. Our analysis suggests that redundant services are most likely to occur under the following circumstances:

- Transportation services are oriented towards specific programs or services. For example, in areas where public parks and recreation agencies have vehicles to shuttle program participants from their homes to the program site, such transportation services were frequently redundant with township and/or municipality sponsored dial-a-ride services. Similar cases were also identified among human service agency transportation programs. While the motivation for offering reliable transportation is to meet specific program needs, such services nevertheless frequently overlap with other transportation programs.
- Municipal and village sponsored transportation services are frequently provided in locations where township or regional dial-a-ride services already exist. In many cases, redundant municipal services resulted from the geographic conundrum created by a situation where a single municipality, located within parts of four townships, each of which may offer service only within their individual township boundaries, may mean an individual can not easily travel within municipal borders. Such fragmented service delivery, however, creates a situation requiring multiple, often redundant services.
- In many cases, local community transportation services, including human service transportation programs and publicly sponsored dial-a-ride services overlap with ADA services. Such overlaps typically occur for certain individuals, along specific routes and during specific times of the day.

Service Limitations, Gaps, and Unmet Needs

Service limitations, gaps and unmet needs were identified in each of the seven counties that comprise the study area. Service gaps and unmet needs persist despite on-going efforts to improve the quality of community transportation services through innovative use of resources and equipment.

Centralized Information

At least two counties currently offer a central resource listing available transportation services; in both cases transportation directories list services available within the sponsoring county only. The lack of centralized information outside of these areas means there is no single source for individuals seeking to find transportation options, eligibility requirements, fares and service hours, nor is there a region-wide directory providing information on available community transportation services.

Ideally, resource directories should be developed for each county individually as well as compiled into a regional directory. Resource guides should be updated annually and available in hard copy at several locations, on-line, in multiple formats and languages and potentially incorporate interactive trip making/scheduling options.

Spatial Limitations

Spatial limitations in community transportation were observed in every county in the study area. In most cases the limitations resulted in similar types of service gaps:

- Township and municipal sponsored dial-a-ride services are typically limited to the sponsoring jurisdictions' boundaries, with some exceptions allowed, typically for medical facilities. Limiting travel to township or municipal borders, even in cases where services are provided by groups of townships and municipalities, makes it difficult for some travelers to access educational, medical, service, shopping and employment centers outside of their dial-a-ride service area.
- Community transportation services are especially limited in rural areas. Recognizing that serving rural areas with population densities often results in low productivity and high per trip costs, there are unmet needs for individuals living in these areas seeking travel to/from local and regional service areas.
- Many areas provide subsidized taxi programs, which do provide opportunities for persons with disabilities, older adults and sometimes individuals with low incomes to cross township and municipal borders. Such services, however, are most appropriate for occasional travel. High per trip costs to the traveler, even with the subsidy, mean taxi services typically can not support daily employment trips.

Temporal Limitations

Service hours on most public dial-a-ride services are limited to weekdays during normal business hours, typically between 9 a.m. and 5 p.m. Across the study area, temporal limitations create service gaps for travelers:

- A lack of weekend service – Dial-a-ride services are generally not available, or are much more limited, on weekends. While some ADA paratransit services and human service transportation is provided, these services are typically not available to all members of the target populations.

- Service hours are not typically structured to effectively support employment. Many employment opportunities, particularly for persons with low incomes, require that transportation be available before 9 a.m., after 6 p.m., and on weekends.

- Service hours that start at 9 a.m. and end at 5 p.m. also make it difficult for individuals who are seeking local connections to regional transportation infrastructure such as Pace and Metra in order to access regional services, find employment or attend job training services in neighboring counties or in downtown Chicago.

Program Eligibility and Trip Purpose Limitations

Program eligibility and trip purpose limitations also result in gaps and unmet needs in existing services. For example:

- Many of the existing dial-a-ride services are available to subsets of the three target populations. As a result, some populations, especially individuals with low incomes, have limited access to the transportation resources.
- ADA paratransit services are only available to ADA certified customers. Human service transportation programs are likewise available to program clients only.
- Several transportation programs are limited to taking people to/from medical appointments. Recognizing that medical trips are essential, an unmet need voiced across the study area is a lack of opportunities for people to make quality of life trips to go shopping, conduct personal errands or visit friends and families.

Service Quality and Miscellaneous Issues

Unmet needs and gaps in services were also identified in association with service quality, issues of affordability and other miscellaneous issues. These gaps and unmet needs include:

- Demand for many community transportation services exceeds the supply and capacity of local providers making it difficult for users to schedule trips. Many operators struggle to balance demand for same-day requests and subscription trips with the need to provide service to a wider population.

- Same-day service requests typically can not be accommodated, except through taxi subsidy programs.

- Limited ability to book subscription service. The ADA paratransit services and many of the dial-a-ride services limit subscription trips. Without the ability to book on-going regular trips, riders can not be ensured regular rides. This limits their usefulness of the service for work or school trips that have set schedules.

- Concerns over the quality of service were voiced across the study area. In most cases, people reported concerns with taxis showing up on time (or showing up at all), as well as with driver training and familiarity with the program clientele and program operations.

- The recent fare increases for Special Services and TAP have presented some affordability issues for some ADA customers and especially those who use these services regularly, if not daily.

Chapter 3. Strategies to Address Service Redundancies, Service Gaps, and Unmet Needs

3.1 Introduction

This chapter provides an overview of coordination and mobility strategies that offer potential application to the study area. We have grouped strategies based on likely implementation timeframe: (1) short term strategies that could reasonably be implemented between six to twelve months (or less) once financial resources are in-hand and (2) longer term strategies that require more than one year to implement. Within each of these sections, we further categorized strategies into groups based on similar funding and implementation characteristics. Accordingly, information on funding and implementation is presented by type of strategy, followed by a one-page overview describing the relevant strategies. The overview includes (1) a description of the strategy; (2) local and regional applications of the strategy; (3) expected benefits; (4) obstacles; and (5) a national and/or regional best practice which exemplifies the strategy.

3.2 Shorter Term Strategies

We identified nine coordination strategies that could likely be implemented in a six to twelve month timeframe, once financial resources are awarded. These short term strategies are further grouped into the following categories:

- Information and information technology;
- Alternative mobility and service options; and
- Financing strategies.

Information and Information Technology

There are two short term strategies that use information and technology to support or improve coordination. These two strategies involve centralizing information and utilizing tools that improve productivity.

Implementation and Service Delivery

The key challenges associated with such strategies include establishing support and buy-in from decision makers and partnering organizations, and preparing for "real-world" repercussions as information is applied and incorporated into everyday operations. This is true for tools that improve productivity and centralize information across counties.

Developing, implementing, and maintaining a centralized directory of community transportation resources brings additional challenges because there are a significant number of services operating in the Chicago region, each of which has unique characteristics. In addition, many services will change their service parameters over time.

While any number of agencies likely have the capacity and skills to prepare a directory, best practice models show that the directories are most effective when prepared by a reliable organization with a regional scope and reputation, as well as a proven ability to partner with counties, municipalities, and other public and private community transportation operators and sponsors. For the directory to be successful, the project sponsor ideally would commit to updating and maintaining the directory for a specified period of time. An ideal organization would also have the capacity to obtain private sector and/or institutional support, through donations or advertisements, to help off-set costs associated with preparing and updating the directory.

Funding

Information and information technology strategies require less investment and can usually be completed with staff resources. This is particularly true for the Non-Dedicated Vehicle Model, a tool for improving productivity. Software to run this model can be downloaded free-of-charge from the TRB website.

As the primary purpose of a centralized transportation information resource is to enhance consumer knowledge of existing services, creation of a transportation directory would be an allowable mobility management expense. All major FTA programs will permit mobility management expenses, including:

- Section 5307 (Urban formula program)
- Section 5309 (Major Capital)
- Section 5310 (Elderly and Persons with Disabilities Program)
- Section 5311 (Non-urbanized Area Formula Program – Kendall County only)
- Section 5316 (JARC)
- Section 5317 (New Freedom)

The federal share of mobility management costs may not exceed 80% of the net cost of the activity.

Centralized Information

Create a comprehensive directory of available community transportation services for each individual county and/or for the entire seven-county region. Ideally the centralized information will be available in multiple languages and formats, including potentially web-based or telephone formats.

Expected Benefits

- Improves access to available services locally
- Supports and facilitates regional travel
- Benefits clients and human service organizations

Potential Obstacles

- Multitude of services means developing and updating information to one source will be challenging
- Requires lead organization to take responsibility for county-level and/or regional directory
- Information requires on-going maintenance

Application in the Region

There is currently no regional directory of community transportation services. Five of the seven counties do not have a centralized directory. Only DuPage and Kane counties have county-specific directories, available in hard copy format and on their respective websites. A key challenge for both counties is to keep their respective directories updated and relevant.

Overview of National/Regional Best Practices

Hard Copy Directory. Access Services, Inc., serving as Los Angeles County's Consolidated Transportation Service Agency (CTSA), publishes the Directory of Specialized Transportation Services. This is a comprehensive compilation of service and eligibility information on some 200 social service, public, medical, and commercial agencies offering transportation services within Los Angeles County.

Telephone Referral. Since 1992, Access Services, Inc. has also provided a telephone referral service called RIDEINFO that provides callers with quick and accurate referrals to over 200 public, private, and human service specialized transportation providers in Los Angeles County.

Website Directory. The transit information website created by the North Texas Transit Cooperation Association for the Dallas/Fort Worth area is a searchable directory of regional transit providers with basic contact and service information provided for each county or each region.

Multilingual Directory. The Toronto Transit Commission (TTC) offers multi-language transit information in more than **70** languages. Information can be obtained on-line or by telephone.

Tools that Improve Productivity

Paratransit operations are frequently called upon to increase service productivity and improve cost efficiency and reinvest "savings" into expanded service. Two operations concepts that focus on improving productivity and cost efficiency but that have not been widely adopted by paratransit operators include: (1) crafting a dedicated vehicle run structure that better matches the temporal demand profile; and (2) assigning to non-dedicated vehicles (e.g., taxis) trips that otherwise negatively affect the productivity of the dedicated fleet.

These concepts are not standard practice among paratransit operators because no reliable tools are available. A new software application was specifically designed to help with these two needs. The software is available, along with a user manual, on the TRB website.

Expected Benefits

- Improve service delivery and increase service productivity
- Examine different operating scenarios
- Reduce paratransit service costs

Potential Obstacles

- New tool that needs more testing
- Achieve internal buy-in from planning and operations staff
- Requires staff resources to learn model and collect and format data to operate it

Application in the Region

The model offers potential for any paratransit service in the region, including services in urban, suburban and rural areas.

Overview of National/Regional Best Practices

Non-Dedicated Vehicle (NDV) Model. The Non-Dedicated Vehicle (NDV) model was developed as part of TCRP B-30. This excel-based model, which is available free-of-charge from the TRB website, uses service information and data readily available for local parameters, such as driver/vehicle shifts, local labor practices (work shifts), driver costs, pay premiums for difficult shifts, operating and cost data, passenger trip length distributions, driver/vehicle run start and end times, passenger demand data by time of day, and availability and cost of non-dedicated vehicles.

Alternative Mobility and Service Options

The short term coordination strategies include opportunities to introduce new services or types of services as a way to expand mobility options for the target population. They primarily rely on existing resources and most would not (as individual strategies) require significant operational resources. They include:

- Establishing/Expanding Volunteer Driver/Escort Programs;
- Establishing/Expanding Taxi Subsidy Programs;
- Introducing Community Bus;
- Introducing Flexible Transit Services;
- Introducing Agency/Employment Tripper Services; and
- Expanding Reverse Commute Strategies.

Implementation and Service Delivery

Although these strategies include a variety of options and service designs, regional and national best practice models have many common attributes among implementation models. Each of these mobility strategies is best viewed (and implemented) as part of a portfolio of services, which work together to enhance mobility and accessibility, rather than as individual solutions.

Any service improvement or change, for example, increases its chances for success by (1) including end users in service design; (2) developing a communication and outreach strategy to educate and inform users about the new service or service change and (3) collecting and, as necessary, acting upon feedback after the improvement has been available for a few months.

Funding

The proposed strategies in this section represent a diverse group of transportation options that lend themselves to both traditional and non-traditional funding options. Programs aimed at the development or expansion of volunteer/escort services have benefited from community based efforts to attract local foundation and/or faith based organizational funding. Flexible transit services and other community based transit service options are candidates for traditional FTA and existing (local) transit funding mechanisms. These types of service are also potential candidates for New Freedom funding if the service can enhance mobility for persons with disabilities. Shuttle services to suburban employment trip generators may make suitable candidates for JARC funding. Similarly, expanded reverse commute projects are typical of the types of services that have historically been funded under the JARC program. Additionally, local organizations should not overlook the potential for developing partnerships with local and state one-stop centers to develop unique funding arrangements.

Volunteer Driver/Escort Programs

Volunteer driver programs typically provide mileage reimbursement to individuals that operate their own vehicles when they take individuals to medical appointments or other services, thereby negating the need for additional labor and capital costs.

Volunteer escort programs have volunteers accompanying riders to/from their destination on transit or paratransit.

Expected Benefits

- Increase schedule flexibility and reduce costs
- Develop program advocates in community
- Volunteers can provide physical and emotional support to riders

Potential Obstacles

- Recruiting and retaining volunteers can be challenging and requires on-going effort/attention
- Some shifts are hard to cover with volunteers
- Fuel costs and vehicle insurance can prohibit use of volunteers
- Insurance coverage may limit participation for some
- Most volunteer drivers are limited to ambulatory passengers

Application in the Region

There are several community transportation services in the region that are largely volunteer-based. Workshop input suggests that volunteer driver programs are an important resource in cost effectively transporting individuals whose mobility needs are difficult to meet with traditional transit or paratransit alternatives or whose travel needs include origins or destinations beyond these service areas. As such, there is great potential for the expansion of this strategy in less dense areas. However, there are numerous examples of successful volunteer driver programs in suburban and urban areas (see best practices below) suggesting that this strategy can be employed throughout the seven-county region.

Overview of National/Regional Best Practices

Ride Connection in Portland, Oregon is a non-profit, community service organization run for and by older adults that developed a volunteer driver program to meet the special needs of older adults. Ride Connection includes a network of over thirty agencies and over 370 volunteers providing in excess of 358,000 annual rides to 10,500 individuals, and is considered one of the best volunteer transportation services on the west coast.

Escorted Transportation Services Northwest (ETS/NW) in the Northwest Suburbs of Chicago uses volunteers to pick up clients at their homes, provide escort to the appointment, wait during their appointment, and return the client home.

Taxi Subsidy Programs

Taxi subsidy programs typically involve an arrangement between a sponsoring organization (or its agent) and a participating taxi company or companies. These programs accept and accommodate requests from sponsored customers, clients, or residents and/or accept vouchers provided by the sponsoring organization to riders as partial payment for the trip. Most taxi subsidy programs focus on seniors and/or persons with disabilities residing within the sponsoring municipality (or agency service area), but some are available to general public residents as well. Human service agencies that employ this strategy generally limited taxi subsidies to agency clientele or program participants.

Expected Benefits

- Provide same-day service
- Effective for unanticipated travel and evening and weekend hours
- Effective for trips outside of service area
- Offer way to set/control subsidy per trip
- Effective in low-density areas

Potential Obstacles

- Requires good communication among all parties
- Need to establish fraud-protection mechanisms
- Dearth of taxi companies in less urban areas within the region
- Dearth of accessible taxicabs

Application in the Region

Taxi subsidy programs are not new to the region. The largest one is the Taxi Access Program in Chicago. Several municipal-based dial-a-ride and some human service agency client transportation services are, in actuality, taxi subsidy programs. With the success of using taxis in DuPage County (both in an integrated fashion for Ride DuPage and a supplemental fashion in Pilot II), other collar counties are looking to replicate these strategies as they coordinate their paratransit services.

Overview of National/Regional Best Practices

The DuPage County Pilot II Subsidized Taxi Service is a nearly county-wide, user-side taxi subsidy program. Each sponsor defines its eligibility criteria and decides how much to charge for a voucher/coupon that is worth $5.00 towards a taxi fare. Service is available 24 hours per day, 365 days per year anywhere in DuPage County.

The Regional Transportation District (RTD) in Denver established the access-a-Cab service in response to a high denial rate on paratransit services and to reduce the per trip cost of its ADA paratransit service. Customers call RTD's ADA paratransit call center (managed by First Transit) to request an access-a-Cab trip. Trips cost a flat $7.00 per trip.

Community Bus Routes

Community bus routes, also known as "service routes," are fixed-route, fixed-schedule transit routes. They have a number of features that distinguish them from regular fixed-route bus routes; primarily that the routes and level of service are designed around the origins and destinations and needs of older adults and persons with disabilities.

Community bus routes can be an effective way to divert paratransit users to a lower subsidy per trip service that also provides more convenience (no request required). While designed to address local circulation needs of these target populations, these routes also can connect with more regional services (bus/rail). Community bus routes typically use small, low floor buses able to operate on neighborhood streets, enter driveways and parking lots. The focus is on front-door convenience at the expense of direct routing. Emphasis is on convenience, ease of use, and highly-personalized driver service.

Expected Benefits

- Enhanced travel options, especially in areas that lack fixed-route service
- Increases traveler independence
- Potential to streamline fixed-route service
- May reduce demand for paratransit services

Potential Obstacles

- Funds must be secured for capital, administrative and operating expenses
- Need to develop service, implementation and marketing plan

Application in the Region

Community bus routes have the greatest applicability and success rate in medium to high-density areas with local, short-distanced demand generators, and in communities where they can link high density housing to shopping, medical, and public services. In suburban communities, community bus routes can also be used to connect concentrations of seniors and/or people with disabilities with nearby shopping and medical areas, and to the Metra station, such as those in the Romeoville and Bolingbrook areas. Currently, these residences are not served by any fixed-route service. In urban or suburban settings, service might be provided a few days a week initially to assess the level of demand and could expand to daily service as the demand builds.

Overview of National/Regional Best Practices

Broward County (Florida) Transit established community bus routes in 15 communities to (1) provide more and more convenient mobility options for seniors and persons with disabilities; (2) divert ADA paratransit trips to a less costly service; and (3) streamline regional services. The operation has been successful in achieving all of these goals.

A local, albeit more limited, example of a community bus route is the Chicago Department of Aging's (CDOA) Senior Shuttle service. These weekly services link various senior residences to participating grocery stores. Partial funding is provided by grocery stores.

Flexible Transit Services

A flex route is a route that has specific time points, but that can go "off route" (up to a certain distance) between those time points in order to pick up or drop off people at their homes or other locations. Flexible transit services usually fall into two categories: 1) Route deviation – the bus operates along a fixed route with a fixed schedule but may deviate to pick up or drop off customers within a certain distance from the route, returning to the route at or as near as possible to the point of exit, before continuing on the route; and 2) Point deviation – the bus may operate along any path to serve "in-between" requests, as long as the bus gets to the next scheduled bus stop on time.

Expected Benefits

- Provide an alternative service in less-densely populated areas where fixed-routes are not feasible
- Expands service coverage without ADA paratransit obligation
- Can be used to test demand and build ridership for eventual fixed-route service

Potential Obstacles

- More complicated than fixed-route for operators and dispatchers
- More difficult to stay on schedule
- Requires educating passengers
- Need to study and evaluate cost differentials between flex and fixed-route services

Application in the Region

Flexible transit would appear to be most appropriate in lower-density areas with dispersed origins and destinations, such as rural areas or in suburban areas at the end of a regular bus route. Another area within the region that might benefit from a flexible transit service is in Joliet where it could replace unproductive Pace bus routes. Another potential "target" would be linking the Batavia Apartments in northwestern Kane County to common demand generators in Elgin. In this case, buses pass by low-income housing, but do not stop because of the roadway design. A flex route that could deviate into the apartment complex would likely generate ridership and provide access for residents.

Overview of National/Regional Best Practices

Omni Ride in Stafford and Prince William Counties in Northern Virginia was implemented because (1) the service area's suburban densities could not support fixed-route service; (2) there was no major focus of travel (origins and destinations were dispersed); (3) the viability of fixed-route service was limited by the road network and lack of sidewalks; and (4) there were limitations on available funding.

Mountain Line Transit serving Morgantown, West Virginia has 17 routes that deviate on request for persons with disabilities. This deviation service was introduced to replace a prior system of separate fixed-route and ADA paratransit services.

Agency/Employment "Tripper" Services

Regular "tripper" service typically involves the scheduled deviation of fixed-route buses in order to accommodate the needs of school students and personnel at key bell times only. These stops become part of the routes' schedules. The only other real qualifier for this "tripper" service is that these buses must be open to the general public.

Using this type of service as a template, some transit systems have provided tripper service to human service agencies or employment centers that are located near, but not on routes, at times when clients or employees are going to/from these destinations. Sometimes, only a minor deviation may be needed, e.g., to let off or pick up agency clients on the agency side of a busy street.

Expected Benefits

- Reduce demand for paratransit service and lower system-wide costs
- Increase service options and improve mobility

Potential Obstacles

- Requires multi-agency agreement on service characteristics, cost sharing, etc.
- Other obstacles may arise depending on time and distance associated with service change

Application in the Region

Opportunities for tripper services in the seven-county region are most likely to be in areas, such as McHenry County, where longer distance fixed-route services connect urban areas. Such routes could include scheduled trips to regional facilities such as senior centers, hospitals, or job training classes or to coincide with class schedules, event times or clinic times. Adding these specialized trips could help improve route productivity and offer members of the target populations a transportation alternative that does not require scheduling rides or higher fares. Tripper routes may also reduce demand for paratransit services.

Overview of National/Regional Best Practices

The Lane Transit District (LTD) in Lane County, Oregon has a route that makes a scheduled deviation to Goodwill Industries at key times when there is a lot of demand from riders with disabilities. The transit staff at Lane Transit worked closely with the Goodwill staff on timing, and keeps in contact with Goodwill to make sure that any changes in program start and end times are accommodated. LTD staff report that 7,750 trips are served per year.

Reverse Commute Strategies

Reverse commuting is a strategy to link people with job opportunities in the suburbs. One of the primary reasons for high inner-city unemployment is the fact that many lower wage scale or entry-level jobs are increasingly being created in the suburbs. This "spatial mismatch" between where workers live and where/when jobs are located calls for innovative transit solutions. Some possible strategies include creating new reverse fixed routes or new shuttle services linking stations or hubs to employment sites/areas and reverse-commute vanpools, plus strategies such as guaranteed ride home services and child transportation services.

Expected Benefits

- Opens suburban job markets to urban residents, especially transit-dependent individuals
- Partnerships with employers may provide opportunities to reduce costs

Potential Obstacles

- Most strategies can be relatively easily implemented but require financing
- Reverse commute strategies may require partnerships with employers

Application in the Region

The service boards recognize the importance of reverse commuting in their service area and consider it a priority in meeting the commuter needs. Feeder shuttle service to/from Metra stations is a major component of the Pace service area, although there are some locations where shuttle service or bus routes could better address reverse commute needs. Pace has nine reverse-commute vanpools; most focus on employers or destinations in Cook County and are "urban" vanpools that begin at the train station. In these cases vanpool riders take the train or bus to a Metra station and then take a van to their job. CTA has also experienced success with reverse commute strategies; using JARC funds, CTA extended existing operating hours services to match reverse commute and second shift work schedules.

Overview of National/Regional Best Practices

New Reverse-Commute Fixed-Route. In 2001 the Los Angeles Metropolitan Transportation Authority (MTA) initiated a successful express bus service that starts in downtown in the mornings and travels to the San Fernando Valley suburbs.

Feeder/Distributor Shuttles at Suburban Rail Stations. Metra operates the P-8 free shuttle from an origin within ¾-mile of a non-accessible station to the next accessible station, enabling persons with disabilities access to the rail services.

Reverse-Commute Vanpools. The Philadelphia Unemployment Project (PUP) operates a reverse commute vanpool program. PUP pays for gas and insurance; vans are driven by vanpool members.

Guaranteed Ride Home. In the Washington DC area, Commuter Connections offers free services such as regional ride matching and Guaranteed Ride Home programs.

Child Transportation Services. The Chattanooga Area Regional Transportation Authority (CARTA) provides demand-response transit service to day care facilities and to schools. Vans are equipped with on-board monitors to protect young children traveling to and from day care without parents.

Financing Strategies

One financing strategy is included in the list of potential short term coordination strategies; accelerating reimbursement. The objective of this strategy is to cover the potential cash shortfall problems of community transportation operators wishing to also provide Medicaid non-emergency medical transportation (NEMT).

Implementation and Service Delivery

The key implementation issues associated with this strategy are multi-fold. In the first case, a project sponsor would need to set up a lending program that provides short term "bridge" loans to new Medicaid operators for a specified period of time. Lending eligibility criteria must be clearly established, including the types of providers eligible to participate, the terms of the loan, and the penalties associated with not meeting loan terms. Ideally, a project sponsor would also work closely with human service transportation providers to help articulate specific needs and Medicaid-eligible passengers. New service providers should demonstrate how they address these needs and fill service gaps. This will need to be done in conjunction with becoming certified as a new NEMT provider. In addition, program sponsors should anticipate and address potential concerns raised from existing NEMT providers over new entrants to the market.

Funding

As noted above, the establishment of a revolving lending program to provide bridge funding is essential to the success of this type of strategy. The funds to seed the lending bank typically come from local and state governments. Potential sources to fund this program include Section 5317 and Medicaid.

Accelerating Reimbursement

This strategy is specifically designed to encourage private, non-profit human service agency operators to become Medicaid non-emergency medical transportation (NEMT) providers by reducing the time associated with getting paid to provide the service. Currently service providers wait approximately 4 to 5 months before being reimbursed; this lag period can pose a cash-flow barrier to entry for some potential providers. Thus, the strategy would be to provide, in effect, a perpetual short-term loan for private, non-profit community transportation providers that covers this lag period, hence allowing these providers to become Medicaid NEMT carriers.

Expected Benefits

- Provides statewide Medicaid NEMT call center with more, less expensive options
- Allows local service providers another fully-funded revenue source
- Encourages ridesharing
- Improves system cost efficiency

Potential Obstacles

- Administrative obstacles associated with being a Medicaid provider (vehicle inspections and insurance requirements)
- Potential complaints from existing operators about competition

Application in the Region

There are currently Medicaid non-emergency medical transportation (NEMT) providers in the region who are struggling with delayed reimbursement from the Department of Healthcare and Family Services (HFS). According to the Rich Township Transportation Service (RTTS), it is not uncommon for these providers to experience delays of up to 4-5 months for reimbursement. RTTS has been a Medicaid provider since 2005 because it was already carrying Medicaid-eligible trips that could receive full funding. With HFS reimbursing full costs associated with Medicaid trips, RTTS is able to stretch its other funding sources (from Pace, the township, and municipalities within the township) to keep up with other demand. While Rich Township is able to cover cash flow with other revenue sources, other agencies interested in becoming Medicaid providers may not. This strategy offers potential for existing private, non-profit community transportation providers in urban and suburban areas alike, but would be especially helpful (to HFS/First Transit) in communities where there is a dearth of for-profit Medicaid NEMT providers.

Overview of National/Regional Best Practices

There are numerous cases of transit agencies advancing payment to contractors and reconciling in areas to circumvent cash-flow issues. For example, the State of South Carolina, through its Department of Transportation, had a fund for transit providers who contracted with human service agencies to ensure that the provider organizations have adequate cash flow. In other situations, such as the Transit Disadvantaged program in Florida, contract brokers will bill Medicaid directly for services while compensating providers directly in accordance with contract payment cycles. The brokers typically use electronic billing methods to expedite payment from the state Medicaid office.

3.3 Longer Term Strategies

We identified ten coordination strategies that have a longer implementation time frame and would likely require twelve months or more to implement. The strategies are grouped into the following four categories:

- Contracting and consolidation
- Service improvements
- Strategies that improve physical access
- Information technology

Contracting and Consolidation

Among the longer term strategies, five pertain to techniques associated with changing current business practices. The contracting and consolidation strategies work to create cost-efficiencies by sharing services, purchasing power and administrative resources. They include:

- Joint Purchasing;
- Sharing Resources;
- Contracting with Agency Operators;
- Contracting with Common Service Providers; and
- Consolidating Functions.

Implementation and Service Delivery

Generally speaking, contracting, purchasing and consolidation issues require a longer implementation time frame due to time associated with changing business practices and developing agreement and contractual terms across independent agencies. Once these agreements are in place, implementation can be achieved within three to six months. An exception to this is consolidating service delivery functions; successful implementation of this strategy requires not only legal and contractual agreements but also new physical, technological and personnel systems.

Funding

In most cases funding for contracting and consolidation issues is available through the larger federal grant programs; indeed most federal programs are designed to reward grant applications that demonstrate how additional services can be purchased by utilizing existing capacity of existing operations.

Contracting and consolidation strategies by definition offer business models that seek to maximize existing funding. This principle is further evidenced with new regulations regarding local match requirements under most FTA programs. When a coordination program involves the provision of service under contract, the revenues earned by the FTA-funded service provider may be used as local match (as opposed to fare box and related income), even if the source of the contract funds are from another federal program.

Joint Purchasing

Joint purchasing focuses on coordinating functions commonly undertaken by multiple organizations as a way to achieve greater cost efficiency and eliminate redundant activities. Community transportation operators, for example, could consolidate vehicle maintenance, purchase of insurance, driver training, and substance abuse testing. Through group-purchasing of common products or services, participating entities may increase purchasing power, and receive preferential service and prices.

Expected Benefits

- Agency level cost savings
- More consistent operating procedures
- Shares administrative functions rather than resources or services, therefore, may be more easily implemented
- Opportunity to build and develop trust across agencies

Potential Obstacles

- Requires lead agency to champion
- Administrative costs to lead agency may be prohibitive
- Some agencies may have entrenched procurement/purchasing requirements
- Joint purchase of some items may require large initial expenditure

Application in the Region

Pace has effectively implemented joint purchasing of vehicles, fuel and computer hardware/software for its consolidated ADA and dial-a-ride paratransit operations. For other organizations, opportunities for sharing resources are wide-open, especially among agencies that are funded by a common source. Specific strategies applicable to both human service agencies and municipal providers may include bulk fuel purchases and/or group insurance.

Overview of National/Regional Best Practices

Maintenance. DARTS in Dakota County, Minnesota maintains vehicles for 80-90 organizations. DARTS recognized the need for reasonably priced, high quality maintenance services and in an effort to offset internal maintenance costs, successfully marketed maintenance services to other providers.

Fuel. The Kanawha Valley Regional Transit Authority (KRT) in Charleston, West Virginia implemented a bulk purchase fuel program that allowed tax exempt public and non-profit entities receiving FTA funds to purchase lower cost fuel from KRT. KRT administers the program for qualified eligible recipients.

Insurance. In Washington State, the Non-Profit Insurance Program (NPIP) administers a Joint Insurance Purchasing program. NPIP members jointly purchase insurance and claims adjustment, risk management consulting, and loss prevention services. Primary benefits are lower insurance premiums and stable access to the insurance market.

Computer Hardware and Software. DARTS (see above) orchestrated the joint purchase of Trapeze upgrades and new hardware for several of its counterpart county-based providers serving other suburban counties in the Twin Cities area.

Sharing Resources

This strategy involves the shared purchase and/or use of resources such as vehicles and facilities; support services such as software, driver training, drug testing, program management; and policies, procedures, and implementation plans.

Expected Benefits

- Lower per trip costs
- Increased vehicle productivity
- Improved service quality

Potential Obstacles

- Requires lead agency to champion
- Turf issues associated with sharing vehicles due to high costs of purchasing, operating and maintaining vehicles
- Reluctance to share agency funded vehicles
- Requires quality control, monitoring and cost allocation systems

Application in the Region

There are considerable human service agencies and public organizations in the seven-county study area that provide transportation services to ensure individuals can participate in specific programs. Oftentimes, vehicles used by these types of programs have "downtime" when vehicles are not in operation. By sharing resources, program sponsors may use township/municipal dial-a-ride vehicles (or services) to transport clients. Within the region, this strategy is especially applicable to urban and to some suburban areas where there is a larger set of community transportation service providers that can potentially band together. However, there is no reason why a regional approach to sharing certain resources could not be attempted.

Overview of National/Regional Best Practices

Vehicle Sharing. DARTS, Dakota Area Resources and Transportation Services, in West South Paul, Minnesota, is a private, non-profit human service agency with 37 vehicles. DARTS shares the operation of a Section 5310 vehicle with the City of Farmington Senior Center and St. Michael's Church. DARTS applied for the 5310 vehicle, paid the local match, and pays insurance and maintenance costs. DARTS operates the vehicle Monday through Thursday. The City of Farmington Senior Center operates the vehicle on Fridays and for special after hours and weekend events, providing the driver and paying for fuel and a maintenance and insurance fee. St. Michael's Church operates the vehicle on weekends using volunteer drivers; they pay for the fuel. All drivers operating the vehicle must complete DARTS drivers' training program and be certified by DARTS.

Software Sharing. DARTS also allows other community transportation service providers to use its paratransit scheduling software via a multiple-site license of Trapeze PASS. One organization, The Elder Ride, accepted DARTS' offer and now rents Trapeze PASS from DARTS.

Contracting with Agency Operators

Contracting with agency operators involves taking advantage of down-time associated with some services and using this excess capacity to satisfy unmet demand at other organizations. Accordingly, those needing to expand capacity could purchase service from human service agency operators with idle vehicles or excess capacity.

Expected Benefits

- Increased efficiency in service delivery
- Lower per trip costs
- Maximizes fleet utilization
- Increased revenues for organizations that "sell" excess capacity
- Improved service quality for clients through increased service options

Potential Obstacles

- Concern among existing ADA service providers who may be reluctant to give up a portion of the market
- Ensuring potential agency contractors are familiar with ADA regulations such that the services are administered according to agency standards.

Application in the Region

Regionally, significant coordination between ADA and dial-a-ride services through Pace contractors or Pace-funded vehicles already exists. Locally, two human service agencies, Open Door and the Veterans Administration, purchase service from another agency, the Fox Valley Older Adults. A potential application in the region may be in eastern Will County and southern Cook County where the Pace ADA operation typically has lower-than-average productivity because of the expansive areas that need to be covered. Eastern Will Senior Citizens Center (EWSCC) could potentially serve as an auxiliary contractor and improve productivity of the ADA fleets by serving out of the way trips for the Pace ADA operation.

Overview of National/Regional Best Practices

In Norwalk, Connecticut, to meet its ADA paratransit obligation, the Norwalk Transit District (NTD) utilizes external resources before expanding to its directly-operated fleet. NTD accordingly contracted with five different agencies to provide ADA service, filling unused capacity on the contracting agency vehicles. This has resulted in lower rates per hour for NTD and creates revenue for subcontractors as vehicles would otherwise be idle.

In Boston, Massachusetts, the MBTA contracts with four operators to provide ADA paratransit service. One operator, the Greater Lynn Senior Services (GLSS), is allowed by the MBTA to co-mingle ADA paratransit trips with its own senior trips, creating service efficiencies through shared rides. In return, the MBTA gets a preferred per trip rate for ADA paratransit service.

Contracting with Common Service Providers

Sponsoring agencies using common non-dedicated service providers may allow the co-mingling of their customers/clients between agencies as long as service standards are not violated. By allows co-mingling of their riders, the sponsoring agencies get preferential rates. The characteristic of this strategy that distinguishes it from a more consolidated approach is that one or more sponsors have uncoordinated contracts with a common vendor.

Expected Benefits

- Increase efficiency of vehicle operations
- Decreases the cost per trip
- Increases local or regional capacity

Potential Obstacles

- Requires strict policy directive from administering agency and adoption of policy by participating agencies
- Requires administrative oversight, performance monitoring and fraud control efforts

Application in the Region

With the exception of Rich Township, there is currently no co-mingling of Medicaid non-emergency medical transportation (NEMT) with other community transportation services within the seven-county study area,. There are, however, numerous private, for-profit contractors in the region that provide NEMT that could be harnessed for other types of community transportation. This is similar to the use of taxi companies in the Ride DuPage program. The converse, using existing community transportation resources to carry Medicaid NEMT trips, also holds promise. For example, there are existing community transportation providers, such as the Eastern Will Senior Citizens Center, that may be interested in becoming a Medicaid provider if co-mingling of these trips with their existing client trips is allowed.

Overview of National/Regional Best Practices

In Dakota County, Minnesota, compatible ADA, senior, job access and group-home trips sponsored by different agencies through separate contracts with DARTS (see above), are co-mingled on DARTS vehicles, rather than being served by four different fleets.

In the Denver metropolitan area, LogistiCare, the regional Medicaid broker, allows its clients' non-emergency medical transportation trips to be co-mingled with other trips sponsored through other contracts with one of its vendors, Special Transit, that serves Boulder.

Consolidating Functions

The consolidation or merger of various operating functions under a single operating entity is considered the highest level of transit coordination. The two most common approaches are (1) to consolidate call center functions (reservations, scheduling, and even dispatching) under a call center manager or broker; and (2) to consolidate call center functions plus some or all of the service delivery functions.

Expected Benefits

- Creates cost-efficiencies by consolidated trip reservations and scheduling staff
- Maximizes opportunities for ride sharing
- Improves service delivery and customer satisfaction
- Potentially provides leverage to securing additional federal funding
- Cost savings translate into increased service

Potential Obstacles

- Requires champion agency to take on consolidation and support idea
- Once implemented, requires leadership, on-going attention and committed staff
- Turfism issues arise over service quality, loss of control and "place" in community
- Requires project governance, cost allocation/reimbursement models and service delivery standards

Application in the Region

This strategy would is applicable to the more urbanized parts of the study area; while potentially more complicated to organize, the diversity of existing services there also means greater potential benefits. At the same time, the success of Ride DuPage in a more suburban setting, and the upcoming Ride-In-Kane project, both of which are designed around a coordinated call center using the local Pace operator as a building block, suggests the model has applicability in collar counties as well. Note too that there is already a regional, and statewide, call center in place for Medicaid non-emergency medical transportation trips.

Overview of National/Regional Best Practices

Consolidated Call Center Functions. The Senior Transportation Connection (STC) in Cleveland, Ohio is a central entity managing and coordinating countywide delivery of transportation services. STC routes trips and assigns trips to the appropriate provider. Trip orders are conveyed by fax or electronically to contract providers.

Consolidated Service Delivery (Centralized Model). In DuPage County, Pace's operations contractor, Veolia Transportation, manages the call center and operates a dedicated fleet, taking reservations for both ADA and dial-a-ride customers and scheduling them onto its fleet, co-mingling the trips when it is efficient to do so.

Consolidated Service Delivery (Decentralized Model). The Port Authority of Allegheny County (PAT) in Pittsburgh contracts with Veolia Transportation as a broker. Veolia, in turn, contracts with private and non-profit carriers who perform reservations, scheduling, and dispatching for distinct service areas. Customers are assigned to carriers based on their zone and all trips are co-mingled; fares are also dependant on zone and use scrip and cashless fares.

Service Improvements

Strategies to improve service convenience can have a profound impact on customer mobility. While we referenced service improvements as a single strategy, there are in reality a variety of techniques and methods to enhance customer convenience including:

- Expanding the days and/or hours of service;
- Expanding the service area for pick-ups and drop-offs and/or adding destinations;
- Providing door-to-door assistance (as compared with curb-to-curb assistance) globally throughout the region; and
- Offering same day service by reducing the advance notification period.

Implementation and Service Delivery

Among the most significant implementation challenges associated with any service improvements are funding and commitment. Many transit providers are reluctant to take on the additional costs associated with new services without reliable, sustainable funding sources. Once funding is secured, however, most transit providers have the skills and tools to improve and expand services. We have categorized this strategy as a longer term strategy recognizing the time associated with increasing operational capacity.

Funding

As discussed, an essential component of implementing service improvements is identifying and securing reliable and sustainable funding. This is true for new and/or expanded service. Unlike capital projects with largely fixed implementation costs, service improvements require on-going funding sources. Some of the national and regional best practices which have been able to offer high levels of service typically are able to do so by either identifying a reliable local funding source such as state, municipal or institutional funds and/or by charging higher fees for premium services. Some of the non-FTA funding sources that may be examined for their potential to support service improvements include:

- Other federal programs – The Federal Interagency Coordinating Council on Access and Mobility has identified 64 federal programs that support passenger transportation; 56 of these programs are administered by seven departments exclusive of the Department of Transportation.
- Community foundations – A number of service projects use foundation grants as seed or start-up funding for coordination projects, especially programs that can demonstrate expanded mobility for specific target populations.
- Local membership cooperatives – In some parts of the country, communities have worked together to form membership cooperatives to participate in the design, implementation and funding of community transportation services.

Improving Service Convenience

Strategies to improve service convenience can have a profound impact on customer mobility. They include; (1) Temporal expansion of service – expanding the days and/or hours of service; (2) Spatial expansion of service – expanding the service area for pick-ups and drop-offs, and/or adding destinations beyond the established pick-up area; (3) Upgrading level of driver assistance – providing door-to-door assistance; and (4) Same-day service – reducing the notification period to enable same-day requests.

Expected Benefits

- Enhance customer accessibility, mobility and convenience
- Provide opportunities to additional mobility options and greater ease of travel

Potential Obstacles

- Expanding service convenience requires additional financial resources
- Requires educating and training staff and customers to maximize benefits associated with cost
- Expanded driver assistance may encounter liability, training, union and service issues

Application in the Region

There are potential applications for each of the customer convenience strategies across the region as most parts of the region in both urban and suburban areas could benefit from increasing service hours and geographic coverage. Outside of the Special Services area, few services offer door-to-door assistance or allow same-day service.

Overview of National/Regional Best Practices

Temporal expansion of service. The Alameda-Contra Costa Transit Authority (AC Transit) extended the hours and days-of-week operations for five bus routes connecting low-income areas of Oakland with employment centers near the Oakland International Airport and downtown.

Spatial and temporal expansion of service, and upgrading level of driver assistance (door-to-door). Special Transportation Services (STS) in Miami/Dade County, Florida, and ACCESS in Pittsburgh/Allegheny County, Pennsylvania are brokered paratransit services that provide county-wide ADA paratransit services beyond the required ¾-mile corridors.

Upgrading level of driver assistance (door-through-door). Metro Mobility provides transportation for people with disabilities on a "first-door-through-first-door" basis.

Spatial expansion and same-day "premium" service. The Santa Clara Valley (California) Transportation Authority's (VTA) ADA paratransit service provides one-way trips within the service area for $3.50/trip. Premium service (travel outside the service area, same-day service and open-ended returns) is available for a surcharge.

Strategies that Improve Physical Access

Strategies associated with improving accessibility involve making infrastructure improvements to transit and inter-modal stations that permit a wider spectrum of the population to physically access these locations. We have identified two strategies that involve improving accessibility of non-key rail stations and at fixed-route bus stops.

Implementation and Service Delivery

Making physical changes to non-key rail stations and/or fixed-route bus stops requires considerable planning to ensure the project is designed, funded and executed effectively and efficiently. This is especially true if improvements require construction that will inconvenience existing travelers or otherwise disrupts existing service schedules. Physical improvements are also expensive.

National and regional best practice models demonstrate that accessibility improvements require considerable commitment and leadership on the part of the lead agency and on-going public education and outreach. Companion public education campaigns should initially focus on informing existing travelers about project timelines and goals. Subsequent education campaigns must target populations and markets to which the projects are directed.

Funding

Making accessibility improvements to transit and inter-modal stations not designated as key stations is considered to meet the eligibility for New Freedom funds, so long as the projects are clearly intended to remove barriers that would otherwise have remained. One key factor in determining eligibility of New Freedom funds for these types of enhancements is that the project did not have an identified funding source as of August 10, 2005, as evidenced by inclusion in the Transportation Improvement Plan (TIP) or the STIP. In other words, if not for the New Freedom Program, these projects would not have consideration for funding and proposed service enhancements would not be available for individuals with disabilities.

In addition, several other FTA programs permit accessibility improvements including:

- Section 5307 (Urban formula program)
- Section 5309 (Capital)
- Section 5310 (Elderly and Persons with Disabilities Program)

Most FTA programs permit a higher rate of federal participation (90%) in the incremental costs of mobility enhancement projects.

Accessibility Improvements at Non-Key Rail Stations

Making accessibility improvements to transit and inter-modal stations not designated as key stations is considered to meet the eligibility for New Freedom funds, so long as the projects are clearly intended to remove barriers that would otherwise have remained.

In many situations, improving the accessibility of non-key stations in a service area may play a significant role in easing the travel burden for people with disabilities. Non-key stations are much more likely to be "partially accessible" due to their location and traffic volume as compared to key stations. However, often it is the non-key station that is most critical to the travel pattern of these transportation disadvantaged individuals.

Expected Benefits

- Increases mobility and travel options for persons with disabilities
- Reduces demand for ADA paratransit service and improves system-wide costs

Potential Obstacles

- Improvements are typically expensive
- Long lead time with potential for disruptions to existing service and travelers

Application in the Region

During the past three years, Metra made substantial accessibility improvements to six of the eight non-key stations along the South Chicago Branch of the Metra Electric Line. The two remaining stations will be improved during 2007. Non-key stations on Metra's other branch lines are potential projects for accessibility improvements.

Overview of National/Regional Best Practices

Boston has the oldest subway system in North America, thus it is a prime candidate for accessibility upgrades. The Massachusetts Bay Transportation Authority (MBTA) started working toward achieving station accessibility in 1990. Since that time, MBTA has made 73 of its 80 key stations accessible, allocated the construction funds for the remaining seven, and has begun making dozens of non-key stations accessible as part of station modernization projects. In 2006 the MBTA entered an agreement with the Boston Center for Independent Living that called for increased funding for elevator improvements, accelerated purchases of low-floor buses and buses with lifts, management and training initiatives, and new public address systems.

Improving Access to Fixed-Route Bus Stops

Improving the accessibility of and access to fixed-route bus stops involves first examining bus stops (and especially those used or potentially used by significant numbers of older adults and/or persons with disabilities) and evaluating if improvements could help make stops more accessible. Potential infrastructure improvements may include removing barriers on sidewalks, improving or adding sidewalks, adding curb cuts, adding or improving pedestrian crossings and signals (including audible signals and countdown signals), and adding signage, lighting, benches, shelters, and other pedestrian enhancements, especially in the vicinity of bus stops. In addition, technological solutions akin to way-finding devices might help blind people locate bus stops.

Expected Benefits

- Encourage use of fixed-route system
- Reduce reliance on paratransit service
- Secondary impacts associated with community development and enhanced safety

Potential Obstacles

- Physical improvements require financing and typically have a long lead time
- Many improvements require prioritization, funding and commitment from local authorities

Application in the Region

Improving accessibility around fixed-route transit services has two key applications in the study area:

- In existing urban areas, there are several transit stops where accessibility could be enhanced with improved infrastructure. In many cases, stops may also benefit from improved maintenance.
- In the rapidly growing areas, new development and fixed-route services should incorporate transit-oriented design principles and accessibility standards to ensure new development is safely and easily accessed by all members of the community.

Overview of National/Regional Best Practices

An Easter Seals Project ACTION project developed a Bus Stop Accessibility and Safety Toolkit that is designed to help transit agencies develop an inventory of bus stops, assess the accessibility and safety of each bus stop and access to that bus stop, and create an action plan to address shortcomings. HART in the Tampa area has recently used this toolkit to put together such an inventory. DART in Dallas is in the process of surveying all of its bus stops, including taking a photograph of each stop location.

Information Technology

Technological tools that aim to support and enhance public transit and human service transportation services develop alongside new coordination strategies and hence are eligible for funding under some of the federal programs. Our list of relevant strategies includes a series of technological tools; the two with a longer implementation timeframe are tools that improve data integrity; and tools that support live dispatch.

Implementation and Service Delivery

The most significant obstacle associated with implementing new technology, especially in cases where new technology is being developed, is training staff to operate and manage the technology as well as integrating new systems with older technologies. Similar with other strategies, best practice models suggest that implementation must be done carefully, especially when consumers are involved. Technological projects are likewise best achieved by demonstrating success on a smaller scale, learning from and building on success before implementing new tools system-wide.

Other implementation lessons involve ensuring front-line staff and end-users are involved throughout the project, including design and testing and that all potential users are sufficiently trained in the system. Many operators experienced with implementing new technology also underscore the importance of allocating sufficient time for new technologies to be developed, examined and fully tested before bringing them into the main stream.

Funding

Hardware and software that support coordination strategies are eligible for capital funding (requiring a 20% local match) under the New Freedom program.

Tools that Improve Data Integrity, Fare Collection, Cost Sharing/Allocation, Billing/Reporting, and Transfers

MDT/AVL Technology – Incorporating mobile data terminals (MDTs) and automatic vehicle locating system (AVL) technology into paratransit services to track vehicle movements.

Automated Cost Allocation of Co-Mingled Trips – Automated cost allocation of co-mingled trips involves tracking the live (or "real") travel time or mileage for each trip.

Centralized Fare Collection – Allow centralized fare accounts to be maintained for each customer (individual or agency) with fares collected automatically as trips are taken.

Smart Card Technology – Client and eligibility information could be stored on a card, which is swiped in (or held in proximity of) a reader as riders board and exit the vehicles.

Expected Benefits

- Improved system management and reduced administrative costs
- Increased service efficiency and enhanced service delivery

Potential Obstacles

- Start up costs may be significant
- Requires training staff to operate and manage technology
- Must integrate new and old systems

Application in the Region

Pace is already using several technologies to manage paratransit operations and shares some technology such as Trapeze software with ADA/dial-a-ride contractors. Pace has also installed MDT/AVL equipment on much of the paratransit fleet provided to contractors. Pace plans to implement similar technologies for Special Services service area. Management technologies, such as Trapeze software, may be relevant tools for some of the larger township and human service sponsored dial-a-ride programs, especially services that are not operated as part of Pace contracts.

Overview of National/Regional Best Practices

MDT/AVL Technology and Trip Sponsorship. The ADA/dial-a-ride and Ride DuPage services in DuPage County utilize a version of Trapeze (supplied by Pace) in conjunction with MDT/AVL capabilities that automatically record the location and arrival and departure times of vehicles.

Automated Cost Allocation. Outreach, the ADA paratransit broker in Santa Clara County, California uses a version of Trapeze that allocates shared trip mileage among sponsors.

Centralized Fare Collection. The MBTA in Boston, Massachusetts and Outreach in Santa Clara County have a centralized fare collection system for its ADA paratransit customers.

Smart Card Technology. The Client Referral, Ridership, and Financial Tracking (CRRAFT) system provides flexible reporting capabilities that support various agencies in New Mexico.

Tools that Support Live Dispatch

Live dispatch refers to automated dispatching systems. Such systems are critical for large paratransit services wanting to allow for same-day travel requests; one of the most frequent unmet needs cited in the workshops. Live dispatch, especially for large systems, necessitates a software system that incorporates reservations and scheduling capabilities with current or predicted vehicle location information. Information may be transmitted to the system via MDT/AVL equipment to facilitate dynamic, "live" dispatching of unscheduled trips to vehicles.

Expected Benefits

- Live dispatch enables same-day shared ride service
- Increases service efficiency and reduces cost
- Offers method to replace unproductive bus routes

Potential Obstacles

- System requires significant cost
- May further increase costs by increasing service demand
- Requires investment in staff training
- Requires agency-wide buy-in

Application in the Region

The primary application of live dispatch in the seven-county study area is if Pace or any of its municipal partners migrates from advance requests to same-day. A potential regional application would be conducting demonstration sites for the software, starting in areas with unproductive fixed-route service. In the Joliet area, for example, unproductive fixed-routes could be replaced with same-day general public dial-a-ride service. At the point where more than a few dial-a-ride vehicles are required, the Call-n-Ride system may be appropriate.

Overview of National/Regional Best Practices

Digital Dispatch System. Some Access Services contractors in Los Angeles, California use a live dispatch system called Digital Dispatch System or DDS, on several of their vehicles providing ADA paratransit service. DDS dispatches unassigned trips to vehicles based on their location and current assignments.

Call-n-Ride (CnR). The Regional Transportation District (RTD) in Denver has established 14 neighborhood-based same-day/immediate-request, general public dial-a-ride services. These services are in locations that are approximately 4 by 6 miles in area and that can not support fixed-route service. To date, CnR service requests have gone right to the driver's cell phone. In response to higher demand, the RTD has commissioned software to enable multiple CnR vehicles to operate in a service area in a way that is transparent to the user (single phone number) and streamline trip requests, scheduling, and system management.

Chapter 4. Priorities for Implementation

4.1 Overview of Federal Funding Programs

The Safe, Accountable, Flexible, Efficient Transportation Equity Act – A Legacy for Users (SAFETEA-LU) is a federal transportation bill that requires regions to establish locally-developed, coordinated public transit-human services transportation plans in order to access three specific FTA funding programs. SAFETEA-LU states that projects funded by these programs must be derived from a locally developed, coordinated public transit-human service transportation plan. The stated goal is to maximize the three programs' coverage by minimizing the duplication of services. SAFETEA-LU also stipulates that the plan be developed through a process that includes representatives of public, private and non-profit transportation and human services providers, and participation by the public.

The three funding programs are summarized below, along with excerpts from the March 29, 2007 Federal Register covering the three programs, and from the May 1, 2007 guidance circulars from the FTA.

1. **FTA Section 5310 – Transportation for Individuals who are Elderly and Individuals with Disabilities.** This program "provides funding, allocated by a formula, to States for capital projects to assist in meeting the transportation needs of older adults and persons with disabilities. The State administers the program." This funding is available to private, non-profit entities (or if none exists in a given service area, public entities) that are involved in transporting seniors and persons with disabilities. Section 5310 funding has historically been used for capital expenditures, and typically for the purchase of accessible vehicles.
2. **FTA Section 5316 – Job Access and Reverse Commute Program (JARC).** "The JARC program was established to address the unique transportation challenges faced by welfare recipients and low-income persons seeking to get and keep jobs. With many new entry-level jobs located in suburban areas, low-income and/or welfare recipients have found it difficult to access these jobs from the inner city, urban and rural neighborhoods on a daily basis. Further, many entry-level jobs require working late at night or on weekends when conventional transit services in many communities are either reduced or non-existent. Finally, many employment-related trips are complex for low-income persons, often involving multiple destinations, including reaching childcare facilities and other services as part of the trip." With these challenges in mind, "**the goal of the JARC program is to improve access to transportation services to employment and related activities for welfare recipients and eligible low-income individuals and to transport residents of urbanized and non-urbanized areas to suburban employment opportunities.**" Activities related to employment might be educational opportunities or training that directly contribute to job attainment. Toward this goal, the FTA provides financial assistance for transportation services planned, designed, and carried out to meet the transportation needs of eligible low-income individuals and of reverse commuters regardless of income. Access to funds from this program requires coordination with federally-assisted programs and services in order to make the most efficient use of federal resources. Examples of such projects include fixed-route services oriented to reverse commuters and/or at times specific

to access lower wage jobs; shuttle services to/from rail stations; ridesharing activities such as vanpool or carpools, and mobility management efforts.

3. **FTA Section 5317 – New Freedom Program (NF).** "The purpose of the New Freedom program is to provide new public transportation services and public transportation alternatives beyond those required by the Americans with Disabilities Act (ADA) that assist individuals with disabilities with transportation, including transportation to and from jobs and employment support services." The New Freedom formula grant program aims to provide additional tools to overcome existing barriers facing persons with disabilities who seek integration into the work force and full participation in society, noting that "lack of transportation is a primary barrier to work for individuals with disabilities." Thus, the New Freedom program "**seeks to reduce barriers to transportation services and expand the transportation mobility options available to persons with disabilities beyond the requirements of the ADA.**" Examples of public transportation services that go beyond the ADA requirements include expansion, spatially or temporally, beyond what is minimally required; the provision of same-day service; door-through-door service; vehicles and equipment that accommodate larger mobility aids; feeder services; accessibility improvements at non-key stations; and travel training. New initiatives, therefore, may include the purchase of accessible vehicles for accessible taxi, ridesharing and/or vanpooling programs; administration of new voucher programs; the support of new volunteer driver/aide programs; and development of new mobility management and coordination programs among public transportation providers and other human service agencies providing transportation.

This Human Services Transportation Plan (HSTP) focuses on the JARC program and the New Freedom program, as Section 5310 is administered by the Illinois Department of Transportation (IDOT). As such, RTA has no direct role in the administration of this program; however, RTA has recommended to IDOT that as part of the process of considering Section 5310 funding requests from entities within the study area, that IDOT require or give more weight to applications that are consistent with strategies and needs identified in the Northeastern Illinois HSTP.

As the designated agency, RTA has the following administrative responsibilities in the management of both JARC and New Freedom programs:

- conducting an area-wide competitive selection process;
- certifying a fair and equitable distribution of funds resulting from the competitive selection process (However, the FTA specifically notes that "equitable distribution" refers to "equal access to, and equal treatment by, a fair and open competitive process" and that the result of such a process "may not be an 'equal' allocation of resources among projects or communities". FTA guidance also states that it is possible that some areas may not receive any funding at the conclusion of the competitive selection process);
- certifying that each project selected was derived from a locally developed, coordinated public transit-human services transportation plan;
- certifying that local plans are developed through a process that included representatives of public, private, and non-profit transportation and human services providers and participation by the public;
- managing all aspects of grant distribution and oversight for sub-recipients receiving funds under this program; and
- submitting reports as required by FTA.

4.2 Regional JARC Project Experience

JARC funds were initially included in the 1998 Transportation Equity Act of the 21st Century (TEA-21) as a companion program to welfare reform. TEA-21 funded JARC with $750 million nation-wide to be spent over five years between the federal fiscal years 1999 – 2003. The Chicago metropolitan area was well positioned to participate in the earliest rounds of JARC because discussions about local mobility needs and access to employment sites for low-income persons were already being discussed by the CATS (Chicago Area Transportation Study) Community Mobility Task Force. The first year of the JARC funding program resulted in 14 submitted proposals in the region of which five "first tier" projects were funded for a total of nearly $2.2 million. These five projects also included consolidated groups of projects, such as a series of smaller projects grouped into the Chicago Area Job Access and Transit Enhancement Plan. First year project sponsors and funding amounts included the RTA ($152,500), Chicago Housing Authority ($273,000) Chicago Area Job Access and Transit Enhancement Plan ($1.5 million), African American Leadership Partnership ($150,000) and DuPage County ($119,000).

Although the Chicago region continued to receive JARC funding throughout TEA-21's lifespan, there was increasingly less local control of how funds could be allocated due to Congressional earmarking. By FY 2003 the entire JARC program had become funded through discretionary or earmarked projects. Congressional earmarking continued until the passage of SAFETEA-LU which called for JARC funds to be apportioned by formula. An overview of historical JARC funding levels in the Chicago metropolitan region together with key project sponsors is provided in Figure 4-1.

Figure 4-1 Historical Overview of JARC Funding in Northeastern Illinois

Fiscal Year	Funding Level	Project Sponsors
1999	$2.2m	CTA; Pace; Metra; Chicago Housing Authority; African American Leadership Partnership; DuPage County
2000	$2.0m	University of Illinois Chicago; Illinois Community College Board; DuPage Federation; DuPage Department of Human Services
2001	$0.6m	CTA; Pace; Metra
2002	$2.5m	CTA; Pace; Metra; City of Chicago; DuPage County
2003	$1.0m	CTA; Pace; Metra; DuPage County
2004	$0.6m	DuPage County; Ray Graham Association
2005	$1.1m	DuPage County; Ray Graham Association; Illinois Statewide
2006	$3.0m	Pace; Kane County; Metra; CTA

Source: FTA Federal Register Notices per FTA website

The study team reviewed these projects to ascertain the key factors in the success of a program. Significant factors common to successful programs include the following:

- **Partnerships with transit service boards.** Service board access to financial, operational and management resources help ensured that new services or projects are supported as they build and sustain the momentum necessary for success.
- **Establish a broad base of funding support.** Local project sponsors must identify the remaining half of project costs (for operating projects), exclusive of fares or other revenues generated by the service. The most successful JARC projects in the Chicago region included services that were developed with a broad range of funding partners.
- **Support new services with strong marketing.** Marketing/promotional efforts to raise awareness especially among job seekers, job developers and job placement organizations, and to garner employer and community buy-in are essential.
- **Conduct on-going evaluation of service ridership/productivity.** Several successful projects evolved by tailoring services in response to user and sponsor feedback. Collecting timely information allows sponsors to track route success and progress and refine services as needed. Evaluation results also support marketing and outreach campaigns.

Other noteworthy strategies included the following:

- Shuttle services were more successful when they served a concentration of employers/employees. Generally, successful programs served a minimum of 3-4 major employers clustered within close proximity to each other and to the station. Service planners were most successful when they examined the commuting patterns of employees together with the concentration of employers to closely align shuttle use, hours of job site operations and existing rail schedules.

- Effective shuttle services also considered traffic congestion, distances from stations to job sites, and connections with other modes of transportation, and then examined the resulting total travel time required for the commute trip. Our research suggests that shuttle travel time less than thirty minutes in addition to the time on train, time to travel to originating station, and any connecting/waiting time are most effective; otherwise total commuting time is burdensome to the employee.

- Cooperation and collaboration between different sectors, transit, and job access-interested stakeholders are essential. An effective transportation advisory panel or committee that includes the interests of different sectors and interest groups in the region contributes significantly to project success. Likewise, involving customers in the design of JARC service also increases the chances of project success. Understanding and incorporating the expectations and priorities of the customer ensures the service is designed appropriately.

4.3 Regional Goals, Policy and Guidance

Federal Goals and Objectives

The goals of this HSTP that stem from federal regulations and policies are:

- To ensure that the HSTP fully complies with the SAFETEA-LU regulations and with the spirit and intent of the JARC and New Freedom programs as stated in the FTA guidelines to ensure an uninterrupted flow and appropriate level of JARC and New Freedom program funding to RTA for the region.
- To establish a framework by which proposed projects requesting JARC and/or New Freedom program funding can be elicited, evaluated and (within the constraints of the funding available for the region) funded through a competitive selection process that is fair and equitable,[9] well-advertised, and inclusive.
- To ensure that the inventory of services, assessment of unmet needs, the menu of strategies to address those unmet needs, the prioritization of those strategies, and the process for eliciting, evaluating, and selecting JARC and New Freedom projects are derived from a public involvement effort that has effectively reached out to public, private, and non-profit transportation providers, human services providers and other stakeholders representing

[9] FTA notes that equitable distribution refers to equal access to, and equal treatment by, a fair and open competitive process. The result of such a process may not by an 'equal' allocation of resources among projects or communities. It is possible that some areas may not receive any funding at the conclusion of the competitive selection process. This means that in any year, there will not be a pre-allocation of funds earmarked for each county and/or for each or any service board.

persons with disabilities, older adults, and persons with low income, and the general public.

- To craft a plan that will encourage not only coordination among services supported by JARC and/or New Freedom program funding, but also coordination among the broad array of community transportation services in the seven-county region. Through the myriad benefits of coordination, the ultimate goal is to as efficiently as possible address the unmet needs of persons who rely on community transportation services.
- To ensure that the process for adopting the plan includes the endorsement of the Project Advisory Committee, which is composed of a group of stakeholders that includes representatives from the three service boards, the MPO, and human service agencies and advocacy organizations representing persons with disabilities, older adults, and persons with low income, and otherwise reflects broad geographic representation throughout the region.

Regional Goals and Objectives

Additional goals and objectives were voiced by members of the Project Advisory Committee in the course of developing evaluation criteria. These included the following:

- To ensure that proposed projects specifically address unmet needs identified in the HSTP.
- To ensure that project applications identify a local "hard" match.
- To ensure that proposals for new projects and proposals for the continuation or expansion of existing projects (that are successful or have made progress) be given equal weight.
- To give more weight to projects which address the most severe needs.
- To give more weight to projects that are regional in scope or otherwise involve multiple counties or jurisdictions.
- To give more weight to projects which are based on strategies identified in the HSTP.
- To give more weight to projects that reduce/minimize duplication of existing services and to projects that utilize or improve access to existing transportation services.
- To give more weight to projects which coordinate with existing public and private human service agency transportation providers or reflect partnerships with non-transit entities and/or private for-profit or non-profit carriers.
- To give more weight to projects that can be implemented quickly (thereby maximizing use of funding).
- To give more weight to projects which are sustainable after JARC/New Freedom funding is depleted, e.g., where local funding source(s) have committed funding for a longer term.
- To give more weight to projects that demonstrate cost efficiency in terms of unit cost of service output, of service consumed, and/or a unit cost reduction for service consumed.
- To give more weight to projects that will increase economic opportunities for persons with low income.

4.4 Project Selection Process

Proposed FFY 2007-2009 Schedule

The proposed schedule for the federal fiscal years 2007-2009, Figure 4-2, is depicted on the following page. The federal fiscal year (FFY) runs from October 1 through September 30. Therefore, federal fiscal year 2007 began on October 1, 2006 and runs through September 30, 2007. Funding for FFY 2007 must be obligated (funds that have been committed by contract to a specific project) within the year of apportionment plus two additional years. Therefore, FFY 2007 funds must be obligated by September 2009.

The schedule depicts each of the next three program years (FFY 2007 in red, 2008 in blue, and 2009 in green) culminating with the expiration of SAFETEA-LU. Once the HSTP is completed, the FFY 2007 program will begin, followed immediately by the FFY 2008 program. This will allow the region to "catch up" to the appropriate program year by the end of the FFY 2009 program. Each of the steps is described in more detail in the Program Process section following Figure 4-2.

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2008									2009											
Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
must be obligated by Sep, 2010)						Federal Fiscal Year 2009 (funding must be obligated by Sep, 2011)														
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Figure 4-2 FFY 2007-2009 Schedule

FFY 2007-2009 Schedule

STEP	Action	Venue	Lead	2006 Oct	2006 Nov	2006 Dec	2007 Jan	2007 Feb	2007 Mar	2007 Apr	2007 May	2007 Jun	2007 Jul	2007 Aug	2007 Sep	2007 Oct	2007 Nov	2007 Dec	2008 Jan	2008 Feb
				Federal Fiscal Year 2007 (funding must be obligated by Sep, 2009)												Federal Fiscal Year 2008 (fu				
FFY2007 Only	Development of HSTP		PAC																	
FFY2007 Only	Endorsement of HSTP		PAC											●						
FFY2007 Only	Adoption of HSTP		RTA Board												●					
1	Program Website Launched / Updated		RTA												●					
2	JARC/NF Program Application Developed / Updated		RTA												●					
3	Program Management Plan (PMP) Updated		RTA													●				
4	Call for Projects Issued		RTA													●				
5	Program Open House Held	RTA	RTA													●				
6	Applications Received		RTA															●		
7	Screening of / Follow-up on Applications Conducted		RTA															●		
8	Consultation with FTA Regional Office		RTA															●		
9	Selection Criteria Applied / Program of Projects (POP) Developed		Selection Committee															●		
10	Presentation of POP	CMAP HS	CMAP / RTA																●	
	Presentation of POP	CMAP Trans	CMAP / RTA																●	
	Endorsement of POP	CATS Policy	CMAP / RTA																●	
11	Approval of POP	RTA Board	RTA																	●
12	Award Letters and Applicant Instructions Issued		RTA																	●
13	Program of Projects entered into TIP	CMAP Policy	RTA / CMAP																	●
14	Rejection Debriefings Conducted	RTA	Selection Committee																	●
15	Agreements Executed (between RTA and recipients)		RTA																	
16	FTA Grant Application Submitted		RTA																	
17	Projects Initiated		Applicants																	
18	Review of Selection Criteria		Selection Committee																	
19	Program Monitoring / Reporting		RTA																	

LEGEND

PAC	Project Advisory Committee
RTA	Regional Transportation Authority
RTA Board	RTA Board
IDOT	Illinois Department of Transportation
CMAP	Chicago Metropolitan Agency for Planning
CMAP Board	CMAP Board
CMAP HS	CMAP Human Services Committee
CMAP Trans	CMAP Transportation Committee
CATS Policy	CATS Policy Committee
Selection Committee	Made up of 2 staff members each from RTA and CMAP, and 1 from IDOT

● FFY 2007 Program
● FFY 2008 Program
● FFY 2009 Program

Program Process

The following proposed program process was developed based on the Federal and Regional Goals and Objectives described in Section 4.3. The initial steps for the FFY 2007-2009 program process are to develop, endorse and adopt the HSTP. It is expected that the HSTP will be fully developed and endorsed by the PAC by its July 30 meeting. Adoption of the HSTP by the RTA Board will take place on September 13, 2007.

Below is a brief discussion of the 19 steps of the process:

Step 1 – The RTA will launch a comprehensive program website explaining all aspects of the programs including goals, eligible projects and activities, eligible applicants, selection criteria, timeline of the selection process, description of the selection committee, available funding, and local match guidelines.

Step 2 – The program application will be developed to achieve consistency with the federal application and to provide the information necessary to evaluate the proposals in accordance with the selection criteria. The application will include sections for identification of a local cash match, line item detail for operating/capital funding, letters of support, and demographic information to address federal requirements.

Step 3 – The RTA will update and submit the required Program Management Plan (PMP) to the FTA.

Step 4 – The RTA will issue a Call for Projects utilizing the CMAP database that was used for the FFY 2006 program (the database includes over 3,500 organizations) and the database of contacts developed throughout the development of the HSTP. Links to the program website, the date of the open house, and the due date for the application will be included.

Step 5 – A program open house will be held for prospective applicants and other interested parties to discuss program goals, eligible projects and activities, selection criteria, process timeline, local match guidelines, and the respective responsibilities of applicants when "partnering" with a RTA Service Board (direct recipient) or with a non-Service Board Provider (sub-recipient).

Step 6 – Applications received will be organized into an RTA internal database for further processing.

Step 7 – RTA staff will conduct an extensive screening process to ensure all information on the application is complete and accurate and will follow-up with applicants as needed.

Step 8 – The RTA will consult with the FTA as necessary to confirm eligible projects and activities and to ensure that local match proposals are in-line with FTA expectations.

Step 9 – The Selection Criteria that will be included in the Program Management Plan (PMP) will be applied to proposed projects by a Selection Committee made up of 5 individuals (2 from RTA, 2 from CMAP, and 1 from IDOT-Division of Public and Intermodal Transportation). Individuals on the Selection Committee will be knowledgeable about Northeastern Illinois and specialized transportation services. The Selection Committee will produce a proposed Program of Projects that

will be developed in accordance with the application of the selection criteria and the Program Management Plan.

Step 10 – The proposed Program of Projects will be presented for information only to various CMAP committees, which will "endorse" the Program.

Step 11 – The proposed Program of Projects will be presented to the RTA Board for adoption.

Step 12 – Upon adoption of the Program of Projects by the RTA Board, award letters with detailed instructions will be forwarded to successful applicants.

Step 13 – The RTA will submit the Program of Projects to CMAP for inclusion in the TIP.

Step 14 – The RTA will invite each unsuccessful applicant to a separate debriefing session designed to assist the applicant in understanding why a particular project was not chosen.

Step 15 – The RTA will work with successful applicants to execute appropriate agreements. In accordance with Federal Transit Administration regulations, the Service Boards are eligible to be direct recipients of JARC and New Freedom funds and as such can enter into supplemental agreements with the RTA and apply directly to the FTA. Non-Service Board successful applicants who are not partnered with a Service Board are considered sub-recipients and will enter into a grant agreement with the RTA.

Step 16 – Once all appropriate agreements are executed, the RTA will submit the program year grant application to the FTA.

Step 17 – Once the RTA grant application is approved by the FTA, sub-recipients may initiate their projects. Service Boards that act as direct recipients may initiate projects once their applications are approved by the FTA or may consider initiating projects prior to FTA approval by exercising the pre-award authority available to them as a direct recipient.

Step 18 – The Selection Committee, in concert with the CMAP Human Services Committee, will review the Selection Criteria to identify any areas that need clarification or revisions for the following year's program. Members of the Project Advisory Committee will be invited to attend and offer input.

Step 19 – RTA staff is in the process of developing monitoring and reporting procedures for all successful applicants. This will include frequent contact between the RTA and applicants to ensure projects remain on schedule. There will also be an ongoing program effort to identify and document the circumstances of all projects that are implemented.

Evaluation Criteria

The set of evaluation criteria, shown in Figure 4-3, was developed based on the federal requirements and on the goals set forth in Section 4.3. It was further refined based on input from the Project Advisory Committee. These proposed criteria will be used in ranking project applications for projects applying for JARC (FTA Section 5316) funding and/or New Freedom (FTA Section 5317) funding. These criteria, however, are subject to further review and refinement to assure consistency with the Program Management Plan (PMP) and the RTA JARC/New Freedom

Application that were under development at the time this plan was finalized. The final version of the PMP, criteria, and application will be made available to prospective applicants and posted to RTA's website.

The criteria will not be used for Section 5310 project applications, as IDOT administers the 5310 program. However, projects that also address unmet needs of older adults will be favorably considered for 5316 and 5317 funds via the awarding of additional points.

The evaluation criteria are split into 5 sections (A through E) as follows:

Section A:	Application Pre-Requisites
Section B:	Evaluation Criteria that Apply to Both JARC and New Freedom Projects
Section C:	Evaluation Criteria that Apply to JARC Projects Only
Section D:	Evaluation Criteria that Apply to New Freedom Projects Only
Section E:	Extra Bonus Criteria

Each criterion in Sections B through E has a point value. The relative point values among the various criteria were derived based on local input, and especially the input of the Project Advisory Committee. For most of these criteria, the full point value is awarded or not. For other criteria, there is a sliding scale of points, depending either on the degree to which a criterion is met or based on a comparison of proposals.

Both new projects and existing and operational and capital projects have the potential to "earn" the same maximum number of points (300, including extra bonus points).

Once all applications are scored using the evaluation criteria, the Selection Committee will develop a preliminary Program of Projects.

Figure 4-3 Proposed Evaluation Criteria

	Section A: Application Pre-Requisites	Yes	No
1a	Proposed New Freedom program project addresses unmet transportation needs of persons with disabilities seeking integration into the workforce and full participation in society.		
1b	Proposed JARC program project addresses unmet transportation needs of Welfare recipients, eligible low-income persons and other individuals in urbanized areas seeking employment or employment-related activities in suburban areas.		
2	Project application identifies and addresses an unmet need identified in HSTP. *This should include (1) a description of the project (2) identification of the unmet needs (which is/are addressed by the project), (3) how the project will address the unmet need(s), e.g., in terms of serving new riders, a new area, a new day and/or times, a higher frequency, less advance notice, more driver assistance, etc.; and (4) an estimated quantification of benefits. Any additional obligations, e.g., the provision of ADA complementary paratransit as a result of implementing a new fixed bus route in a previously unserved area, should be noted.*		
3	Project application identifies one or more local funding sources and evidences that that source or sources is/are committed to supplying the necessary local match for the project for (at least) the duration of the project.		
4	Project is consistent with FTA guidelines on eligible projects and activities.		

If all "Yes", move to Section B. If one or more "No", project is not eligible for funding.

	Section B: Evaluation Criteria that Apply to Both JARC and New Freedom Projects	Points Available	Points Assigned
1a	Project provides a new service (1) where or when no other existing similar service is available; and (2) that links high concentrations of target population with key destinations, activity centers, or key sector employers (and/or concentrations of employers) where no such link previously was provided and at appropriate travel times.	0 or 20	
1b	Project expands on an existing successful pilot project or otherwise provides continued operating funding for a service which is already in operation. *Existing project achieved projected ridership = 20 points;* *Ridership has increased (compared to pre-project ridership) but has not achieved projected ridership = 10 points*	0, 10 or 20	

	Section B: Evaluation Criteria that Apply to Both JARC and New Freedom Projects	Points Available	Points Assigned
2	Severity of need addressed by the project: *No such service/linkage/coordination currently exists in area = 20 points* *Service/linkage/coordination exists but not in time period = 10 points* *Service/linkage/coordination exists for area/time period but not for specific trip purposes and/or specific programs = 10 points* *Service/linkage/coordination exists for area/time period and for most trip purposes/programs, but does not accommodate riders requiring high-level of service and/or same-day service = 10 points*	0, 10 or 20	
3	Project employs one or more strategies that provide: Regional service/linkage/coordination = 20 points Multi-county service/linkage/coordination = 10 points Multi-municipality (but intra-county) service = 5 points No service/linkage/coordination beyond municipality or program = 0 points	0, 5, 10, or 20	
4	Project employs one or more strategies included in the HSTP, or otherwise demonstrates innovation.	0 or 20	
5	Project replicates strategy proven successful elsewhere within the region	0 or 20	
6	Project utilizes, or provides access to, non-duplicative public transportation resources. *Points will not be awarded to a proposed project that duplicates an existing service. Points may be awarded if proposed project duplicates a portion of the service but otherwise meets a specific unmet need not addressed by the existing service. Points will be awarded for a proposed project that utilizes all or part of existing services or provides access to these services, e.g., a shuttle service to a Metra station.*	0 or 20	
7	Project utilizes or coordinates with existing public and private human service agency transportation providers; or reflects partnerships with non-transit entities and/or private non-profit / for-profit operators.	0 or 20	
8	Project starts providing services within a short time-frame. *Within 6 months =20 pts; 6-12 months=10 pts; longer than a year=0 pts*	0-20	
9	Project is sustainable past identified project period. *Applicant-identified sources have committed to continue their levels of funding and have stated that their levels of support may increase if project is successful.*	0 or 10	
10a	Operations cost ranking on service output – measured in cost per vehicle service hour. **(For <u>operational</u> projects only; rail, bus (fixed-route, flex, shuttle) projects and paratransit projects will be ranked separately.)** *Lowest unit cost gets 20 points, next lowest 18 points, etc. If more than 10 applications, those ranked lower all get 0 points.*	0-20	

	Section B: Evaluation Criteria that Apply to Both JARC and New Freedom Projects	Points Available	Points Assigned
10b	Operations cost ranking on service consumed – measured in cost per trip **(For operational projects only; rail, bus (fixed-route, flex, shuttle) projects and paratransit projects will be ranked separately.)** *Lowest unit cost gets 20 points, next lowest 18 points, etc. If more than 10 applications, those ranked lower all get 0 points.*	0-20	
11a	Ranking of cost efficiency improvements– measured in terms of reduced cost per trip **(For capital projects that have a direct impact on operations cost. Rail, transit (fixed-route and flex) projects and paratransit projects will be ranked separately.)** *Highest reduction of unit cost gets 20 points, next highest 18 points, etc. If more than 10 applications, those ranked lower all get 0 points.*	0-20	
11b	Ranking of other cost/benefits – measured in terms of cost per severity of need addressed, using point values from #2 of Section B. **(For capital projects only. Rail, transit (fixed-route and flex) projects and paratransit projects will be ranked separately.)** *Lowest unit cost gets 20 points, next lowest 18 points, etc. If more than 10 applications, those ranked lower all get 0 points.*	0-20	
12	Agency and/or agency contractor(s) qualifications and experience (including key personnel) demonstrate that they have the technical and managerial capabilities and experience to conduct the project / operate the service. *Qualifications and experience of agency / contractors (5 pts)* *Qualifications and experience of key personnel (5 pts)*	0, 5 or 10	
13	Project promotes likely economic opportunities for persons with disabilities and/or persons with low income.	0 or 20	
	Subtotal – Section B	**240 (max)**	

Utilize Section C for JARC applications and Section D for New Freedom applications

	Section C: Evaluation Criteria that Apply to JARC Projects Only	Points Available	Points Assigned
1	Estimated number of (entry level / lower wage) jobs accessed as a result of the project. **(Rail, transit (fixed-route and flex) projects and paratransit projects will be ranked separately.)** *Highest number gets 20 points, next highest 18 points, lowest gets 2 points. If more than 10 applications, those ranked lower all get 0 point.*	0-20	
	Subtotal – Section C	**20 (max)**	

	Section D: Evaluation Criteria that Apply to New Freedom Projects Only	Points Available	Points Assigned
1	Estimated number of persons with disabilities served as a result of the project. **(Rail, transit (fixed-route and flex) projects and paratransit projects will be ranked separately.)** *Highest number gets 20 points, next highest 18 points, lowest gets 2 points. If more than 10 applications, those ranked lower all get 0 point.*	0-20	
	Subtotal – Section D	**20 (max)**	

	Section E: Extra Bonus Criteria	Points Available	Points Assigned
1	Project also addresses unmet needs of older adults	0 or 10	
2	Project applications include letters of support from key stakeholders	0 or 10	
	Subtotal – Section E	**20 (max)**	

Regional
Transportation
Authority

Coordinated Public Transit-Human Services Transportation Plan

Connecting Communities through Coordination

Appendices

September 2007

Submitted by:

Nelson|Nygaard
consulting associates

in association with:
RLS & Associates
Res Publica Group
MDS, Inc.
Nelson Development

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Appendix A Public Involvement Effort

A.1 Summary of Public Involvement Effort

Federal transit law, as amended by SAFETEA–LU, requires that projects selected for funding under the Job Access Reverse Commute and New Freedom programs be "derived from a locally developed, coordinated public transit-human services transportation plan" and that the plan be "developed through a process that includes representatives of public, private, and non-profit transportation and human services providers and participation by members of the public."[1]

The Federal Transit Administration (FTA) *suggests* the following as potential tools and strategies to involve various stakeholders who can provide insights into local transportation needs, and assurance that their opinions will be considered in the outcome of the development of the coordinated plan document.[2]

- Community planning session
- Self-assessment tool
- Focus groups
- Survey
- Detailed study and analysis (inventories, interviews, GIS)

Adequate outreach should be made to allow for participation, and "the lead agency convening the coordinated planning process should document the efforts it utilized, such as those suggested above, to solicit involvement."[3]

The RTA, as the designated recipient of FTA JARC and New Freedom funding in the study area, is responsible for certifying that participation requirements have been met. Hence in preparing this report, the goal is that the inventory of services, assessment of unmet needs, the menu of strategies to address that unmet need, the prioritization of those strategies, and the process for eliciting, evaluating, and selecting JARC and New Freedom projects all are subject to scrutiny from a range of stakeholders as part of a comprehensive Public Involvement Effort (PIE). This PIE has involved the creation of a Project Advisory Committee (reflective of both the geographic and target communities) to review and comment on all deliverables. The public involvement program includes stakeholder interviews, workshops, focus groups, press releases, and a dedicated website that provides information about the study and elicits feedback from the general public.

This planning effort has included extensive public involvement. The public participation effort made use of the United We Ride framework for the public participation process. The United We Ride program is a federal initiative undertaken by eight branches of the government to facilitate the coordination of community transportation services.

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[1] Page V-1, FTA Circular 9050.1 The Job Access and Reverse Commute (JARC) program guidance application instructions, May 1 2007

[2] Chapter V - Section 2, Item d, ibid.

[3] Page V-7, ibid.

The table below is a summary of the Public Involvement Effort (PIE) undertaken throughout the various tasks of the planning exercise. Further, a short description of each component of the PIE is provided in accordance with the FTA recommendations detailed above.

Chapter	PIE Component	Dates	Description
2	Project Advisory Committee (PAC)	January – July 2007	• 20 members • 6 meetings • Oversees PIE process
3	Stakeholder meetings and interviews	January – February 2007	• 69 interviews in 7 counties • Organizations represented range of target constituencies • Provided information on existing services and coordination efforts
4	Workshops	April 2007	• 8 workshops across 7 counties • Solicit pubic feedback and ideas
5	Focus Groups	June 2007	• 6 meetings with different organizations serving three target constituencies
6	Public Announcements	February – June 2007	• RTA Website • RTA Press Releases • Media Coverage
7	Contact Database	Ongoing	• 1,264 individuals listed • Data sorted by target population

A.2 Project Advisory Committee

A Project Advisory Committee (PAC) was created to include senior-level policy and decision makers from the seven counties included in the scope of the study, as well as those from advocacy/service organizations that reflect the three target populations (elderly, disabled, and low-income).

The PAC served as a sounding board for ideas and strategies that are developed through the public participation process.

In addition to attending monthly meetings, the goals of forming the PAC were to:

- Provide the project team with counsel and guidance throughout the project
- Assist in reaching key individuals who represent or provide services to the target populations, transportation service operators, and advocacy groups
- Provide county-specific guidance for those areas
- Offer recommendations on public transit-human services transportation coordination and assist with awareness-building efforts to drive participation at public workshops

The process for adopting the plan included the endorsement of the PAC.

The 20 members of the PAC are listed below, along with a meeting schedule and Minutes of those meetings.

Member	Organization
Bill Baltutis	TMA of Lake-Cook
Virginia Chandler	Metra
Tom Chefalo	Lake County
Dia Cirillo	Work, Welfare & Families (Center for Tax and Budget Accountability)
Patricia Douherty-Wildner	Community Economic Development Association of Cook County (CEDA)
Susan Friend	South East Association for Special Parks and Recreation (SEASPAR)
Jacky Grimshaw	Center for Neighborhood Technology (CNT)
Elsa Gutierrez	Chicago Transit Authority (CTA)
Erica Interrante	Illinois DOT (IDOT)
Mary Keating	DuPage County
Steve Lazzara	Will County
Chris Manheim	McHenry County
Walt Meyers	Northeast Illinois Area Agency on Aging
Lynn O'Shea	Kane County Association for Individual Development (AID)
Russell Pietrowiak	Chicago Metropolitan Agency for Planning (CMAP)
Dave Snell	Pace
Karen Tamley	Mayor's Office for People with Disabilities (MOPD)
Kerwin Terry	Council for Jewish Elderly
David Thigpen	Chicago Urban League
Jeff Wilkins	Kendall County

Meetings

- January 31, 2007
- February 26, 2007
- March 26, 2007
- May 21, 2007
- June 25, 2007
- July 30, 2007

January 31, 2007 PAC Meeting Minutes

Attendees

Project Advisory Committee Members

- Chris Manheim, McHenry County
- Dave Snell, Pace
- Dia Cirillo, Work, Welfare & Families (a division of the Center for Tax and Budget Accountability)
- Pat Douherty-Wildner (via phone), Community Economic Development Association of Cook County (CEDA)
- David Thigpen, Chicago Urban League
- Elsa Gutierrez, CTA
- Natashia Holmes, IDOT
- Jacky Grimshaw, Center for Neighborhood Technology
- Jeff Wilkins, Kendall County
- Karen Tamley, Mayor's Office for People with Disabilities
- Steve Lazzara, Will County
- Lynn O'Shea, Kane County Association for Individual Development (AID)
- Mary Keating, DuPage County
- Russell Pietrowiak, CMAP
- Susan Friend, South East Association for Special Parks and Recreation (SEASPAR)
- Tom Chefalo, Lake County
- Virginia Chandler, Metra
- Walt Meyers, Northeastern Illinois Area Agency on Aging

Others

- Will Rodman, Nelson\Nygaard Consulting Associates
- Bethany Whitaker, Nelson\Nygaard Consulting Associates
- Dave Bayless, Res Publica Group
- Jay Ciavarella, RTA
- Barbara Lesser, RTA

1. Background

Jay Ciavarella from RTA thanked everyone attending the meeting, noting that 18 of the 20 committee members were present. He introduced himself as the project manager and encouraged committee members to introduce themselves, discuss their respective roles, and relationship to transportation coordination. Patricia Douherty-Wildner joined the meeting by phone.

2. Work Program & Scope

Will Rodman from Nelson\Nygaard discussed the federal context and framework for the project, presented the work program and outlined individual project steps, except for public involvement. Will said the three main work products that would be produced as a result of this study include: 1) an assessment of existing gaps and redundancies in the existing services; 2) strategies to address

gaps and redundancies; and 3) goals and evaluation criteria for services and project funding. Will emphasized that one of the project goals was to develop a clear set of criteria so funding applicants will know exactly how their projects will be evaluated. This criteria will include the extent to which identified strategies address identified gaps and redundancies.

Dave Bayless from Res Publica introduced the public involvement elements of the project, which includes an extensive set of stakeholder interviews, county level workshops, a website and press releases. There will also be six "theme based" focus groups. Themes will emerge from the analysis, especially after Task 4, the needs assessment.

3. Project Advisory Committee Roles and Responsibilities

Will outlined the roles and responsibilities of the Project Advisory Committee emphasizing that they will be called upon to provide input, guidance and council throughout the project and that he wants the final product to be their plan, reflecting local comments, input and consideration.

One of the key roles of the Committee will be to review the products produced by the consultant team. The anticipated process is for the consultant team to produce deliverables to the RTA, the RTA will review briefly and distribute to the Committee 1-2 weeks in advance of a committee meeting for discussion at the meeting.

It was also noted that the Project Advisory Committee will be a key resource for planning the public outreach as well as finding and encouraging participation at the events. Several of the Committee members have already helped identify individuals and organizations to be interviewed or surveyed.

Dave Bayless also noted that the PAC members will be called upon to suggest recommended venues for the workshop sites. Will Rodman added that the United Way of Metropolitan Chicago has offered to host the workshop in Chicago.

4. Project and Committee Meeting Schedule

It was noted that this coordination study requires a significant amount of work in a short time line; ideally the project would have an 18 month timeline, but the study needs to be completed in six months. This will allow our region to access the available federal funds again next year. This fact has influenced how the work program is organized; it also influences expectations for the Project Advisory Committee, including the need to meet monthly.

The Committee agreed to meet on the last Monday of every month from 2:00 – 3:30 p.m., noting one meeting may fall on a public holiday (Memorial Day). The Committee also agreed to meet downtown. CMAP offered to host the meeting at their facility.

5. Comments and Questions from Committee Members

Several questions were raised during the last part of the meeting:

- It was noted that committee members may submit comments to the RTA (Jay) if they are unable to attend meetings in person. Jay will voice those comments for the member(s) not able to attend.

- Project visioning, including creation of project goals and expectations will take place during a couple of key steps in the project, after the needs assessment is completed and strategies are explored. The team also expects that some visioning will occur during the county-level workshops and during the best practice/national model review.
- Another topic that was raised was if there would be discussion of expectations of baseline mobility for special populations. The consultants explained that the end product of the study is not a service plan but rather a process for the application, approval and distribution of plans and funding that will meet the needs identified in the study.
- A key objective and requirement of the study is that recommendations are tied to local objectives and reflect local circumstances and need. This will be accomplished by analyzing the demographics in terms of both absolute number and density of targeted populations (i.e., seniors, persons with disabilities, and persons with limited incomes) and an analysis of where people are traveling and superimposing this information with the perception of needs and gaps gained through stakeholder interviews and community outreach.
- The end goal of the project is to stratify needs and strategies as much as possible – thematically, geographically, by target populations – to help grant applicants know what they need to address and how their application will be evaluated – not only on its own merits but also in comparison with other projects and counties.
- The needs assessment will include both abstract needs and barriers/obstacles to achieving those needs.
- Barriers will be examined in terms of coordination in general as well as in terms of specific relevant examples that have regional applications.
- All data, materials, reports, processes, etc. will be available to the Illinois DOT so that downstate projects and efforts can be coordinated with this study.
- Locally, stakeholder interviews, county-level workshops and the Project Advisory Committee meetings will be the primary vehicles for coordination between county-level human service and transportation organizations.
- The consultant teams' objective is that no one calls the RTA and says "I didn't have an opportunity to comment or provide input to this project".
- There will be a general feedback form on the project website.
- Project materials will be made available in Spanish and the consultant team is open to including the Spanish speaking population in other ways, such as focus groups.
- Preliminary schedules for the county level workshops will be distributed sooner rather than later to provide ample time to plan and organize.

6. Meeting Wrap Up

Jay wrapped up the meeting right on time, noting that this first meeting was the easiest.

February 26, 2007 PAC Meeting Minutes

Attendees

Project Advisory Committee Members

- Chris Manheim, McHenry County
- Dia Cirillo, Work, Welfare & Families (a division of the Center for Tax and Budget Accountability)
- Pat Douherty-Wildner, Community Economic Development Association of Cook County (CEDA)
- Elsa Gutierrez, CTA
- Kerwin Terry, Council for Jewish Elderly
- Natashia Holmes, IDOT
- Steve Lazzara, Will County
- Lynn O'Shea, Kane County Association for Individual Development (AID)
- Mary Keating, DuPage County
- Susan Friend, South East Association for Special Parks and Recreation (SEASPAR)
- Tom Chefalo, Lake County
- Virginia Chandler, Metra

Others

- Will Rodman, Nelson\Nygaard Consulting Associates
- Dave Bayless, Res Publica Group
- Jay Ciavarella, RTA

1. Welcome

Jay Ciavarella from RTA welcomed those in attendance and explained that the purpose of the meeting was to discuss progress with the provider survey, the status of Technical Memorandums 3 and 4, Technical Memorandum 2, the upcoming workshops, and the direction of the selection process and criteria for future programs.

2. Update on Provider Survey

Will Rodman from Nelson\Nygaard updated the PAC on the provider survey, noting that a total of 139 completed surveys have been returned out of a total of 337. This represents a response rate of 41%, consistent with expectations. Will noted that the survey responses are being analyzed and will form the basis of the inventory to be provided in Technical Memorandum 3. The inventory will also include other sources, including data and information collected from Pace, the counties, and the University of Illinois at Chicago.

3. Update on Technical Memorandums 3 and 4

Will explained that Technical Memorandum 3 would include an inventory of services broken down by county. The deliverable will also include a profile of each service, including information on service area, project sponsor, target population, and other data. Technical Memorandum 4 will include demographic information and a needs assessment broken down by county and by the three target populations. The needs assessment will include information gleaned from stakeholder interviews, discussions with PAC members, and others. Will noted that the completion of these two deliverables will allow Nelson\Nygaard to identify gaps and redundancies in services for the target populations, to be completed as part of Technical Memorandum 5.

The PAC raised several questions on how the information in Technical Memoranda 3 and 4 would be portrayed. There was a discussion that involved several PAC members requesting that future deliverables reflect the use of fixed service by the targeted populations (low income, older adults & people with disabilities). Many members mentioned that it was not apparent, in Technical Memorandum 2, that fixed bus and rail route service is a viable option currently being used and can be part of the solution/recommendation for the transit gaps to be identified. Will noted that Nelson\Nygaard is currently reviewing different methods to portray the information on maps but that the ultimate focus will be on comparing the inventory of services with the needs assessment in order to come to some conclusions on what gaps and redundancies exist. This will be accomplished through tabular and spatial analysis, or a combination of both.

4. Discussion of Technical Memorandum 2

Will explained that the purpose of Technical Memorandum 2 was to document the history of coordination in the region. The intent is to "get a lay of the land", or overview of the region's efforts to date. The PAC offered several comments on the draft:

- It was noted that the discussion of the 2006 selection process and criteria was premature and did not belong in this deliverable. In addition, the PAC requested that Nelson\Nygaard elaborate more on past JARC projects to gain a better understanding of what has or has not been successful. It was agreed that these two points would be covered in the deliverable for Task 8, tentatively scheduled for completion in June.
- It was noted that in some cases, the document may overstate the progress of coordination in certain areas of the region. The consultant agreed to review the text and revise appropriately.
- There was no reference to the efforts of the Illinois Coordinating Committee on Transportation (ICCT) and the consultant agreed to include a section in the introduction.
- Community colleges need to be part of the analysis (as demand generators) in future deliverables.
- Some PAC members expressed the need to clarify this effort with other ongoing RTA initiatives, including Moving Beyond Congestion.

Jay reiterated the deadline for final written comments on Technical Memorandum 2 is Friday, March 2.

5. Workshops

Dave Bayless from Res Publica reiterated the goals of the upcoming workshops; to create awareness and understanding of the project, provide information about regional and national coordination experiences, share project findings, and to encourage input. A discussion ensued on the format of the workshops. Some PAC members expressed an interest in an "open house" setting, while others favored a more structured, or "workshop", approach. PAC members noted that the format may be different depending on the county; as some areas are further ahead then others on coordination of transportation services. The need for gathering input from the general public was discussed and it was agreed this was necessary. PAC members agreed that the goal of the workshops should be to gather as much information into the ongoing planning process as possible and to explore the mobility needs of the target populations. Dave agreed to review the comments received and provide the PAC with a 1-2 page summary of the approach to be taken for the workshops.

6. Future Selection Process and Selection Criteria

Jay explained that this would be the first in a series of discussions with the PAC on these subjects. The approach is to continue the dialogue on this issue at every future PAC meeting. Jay noted that the RTA Board is interested in the progress being made on these issues and that a briefing is tentatively scheduled for June. Will requested that the PAC provide the RTA with some preliminary thoughts on four specific issues related to this topic; selection process, pre-requisites for applying, selection criteria, and weighting for selection criteria. The PAC raised a question on the Section 5310 program. Jay explained that, based on previous discussions with IDOT, the State will continue to administer the 5310 program. Applications for 5310 funding will be reviewed for conformity with the northeastern Illinois HSTP to ensure that applicants are making an effort to coordinate services and eliminate duplication of services.

7. Next Steps

Jay reiterated that final comments on Technical Memorandum 2 are due to the RTA by Friday, March 2. The next PAC meeting will be held on Monday, March 26 from 2:00 – 3:30 p.m. An agenda and materials for review will be sent to the PAC by March 21.

March 26, 2007 PAC Meeting Minutes

Attendees

Project Advisory Committee Members

- Chris Manheim, McHenry County
- Dave Snell, Pace
- Elsa Gutierrez, CTA
- Jacky Grimshaw, Center for Neighborhood Technology
- Jeff Wilkins, Kendall County
- Jennifer Smith, CEDA (for Patricia Douherty-Wildner)
- Kerwin Terry, Council for Jewish Elderly
- Steve Lazzara, Will County
- Lynn O'Shea, Kane County Association for Individual Development (AID)
- Mary Keating, DuPage County
- Russell Pietrowiak, CMAP
- Tom Chefalo, Lake County
- Virginia Chandler, Metra
- Walt Meyers, Northeastern Illinois Area Agency on Aging

Others

- Will Rodman, Nelson\Nygaard Consulting Associates
- Laura Peck, Res Publica Group
- Jay Ciavarella, RTA
- Erica Interrante, IDOT

1. Welcome

Jay Ciavarella from RTA welcomed those in attendance and explained that the purpose of the meeting was to discuss Technical Memoranda 3 and 4, the upcoming workshops – content and logistics, and the direction of the selection process and selection criteria for future programs. Jay also explained that up until now, deliverables have focused on identifying existing conditions and they thus lacked analysis. Beginning with Technical Memorandum 5, the deliverables will focus more on analysis in order to develop recommendations and strategies. The deliverables will also be shorter in length.

2. Discussion of Draft Technical Memorandum 3

Will Rodman from Nelson\Nygaard explained to the PAC that Technical Memoranda 3 and 4 are interim products to get to the unmet needs. Both memos have their shortcomings due to the available data. With regard to receiving comments from PAC members on the memoranda, Will made it clear that the RTA is looking only for significant items that were missed. For example, if something has changed dramatically from a 3 year-old report, they would like to know that. They are not looking for ridership figures that may differ slightly from those reported or a service start and end time that is slightly different. Will also explained that they chose to map things the way they are only for analytical purposes. He stated that the maps are interim tools, moving forward to Task 5.

The purpose of Technical Memorandum 3 is to document what community transportation services are available where and when, and for whom and for which trips. There were 10 sources – 4 sources provided general service characteristics, generational and service statistics, funding sources, revenue and cost. Most of the other sources provided a general description or just listed the service. Each chapter is made up of:

- An introduction to the county, a list of services and service profiles by category and summaries
- 2 maps showing weekday/weekend availability of services
  - Pace routes and ADA paratransit service areas
  - Metra stations
  - In Cook County they show the CTA service area as a whole
- 1 regional map of human service agency services
  - listed county-wide and regional services, but did not map
  - sub-county services are mapped

Several themes were highlighted including the observation that seniors and persons with disabilities have access to more services than persons with low incomes. However, many services have fairly limited service areas.

PAC members offered several comments on the draft. It was noted that there is a tremendous amount of information in these memoranda and they were curious as to what information is useful and what is not. Will explained that the collection of this data was necessary to make recommendations on ways to better coordinate service. The PAC also raised the possibility of summarizing spending for service so that the region is able to say, "at a minimum" we spend this amount on service. It was agreed this would be included in the revised document. Dave Snell mentioned that the ADA buffer on weekends appears to be the same as that on weekdays and Will agreed to investigate the maps in question. Kerwin Terry raised the issue of Medicaid providers being included in the inventory. Will and Jay agreed to work together to request information again from First Transit (the consultant team was not successful in their repeated attempts to get this information).

Jay asked that final comments from PAC members be submitted directly to the RTA by April 6, 2007.

3. Discussion of Draft Technical Memorandum 4

Will Rodman stated that the purpose of Technical Memorandum 4 is to document trip origins and destinations of the three target populations: persons with disabilities, older adults and persons with low incomes. The maps per county are based on census data. They also used data available from CMAP to portray 10 year projections for persons with disabilities and older adults. Will clarified that these would be 5 year projections, meaning that the projections would take us to 2010, noting that the horizon of SAFETEA-LU is 2009.

One of the main findings that is consistent across the region and the country as a whole is that the older adult population is growing fast. Will also stated that seniors over 65 are increasingly more mobile, their demand for community transportation services will increase dramatically, and short of an infusion of money, the coordination of services to stretch the funding dollar is no longer just a smart idea, it's an essential strategy.

For trip destinations, 3 sources were used:

- ADA trip destinations where automated trip data was available – CTA service area, N/S/W Cook, DuPage and Lake Counties.
- Other destinations came from a mixture of the survey, stakeholder interview and web-listed searches
- Employer data from the regional Workforce Investment Boards (WIB) – labor classifications that employ low and semi-skilled labor listed by city and employers that employed 250+ total employees.

There were two limitations. The data was not available by time of day like the ADA trips are. These destinations were listed on county-based maps, often straddling other counties to display trip destinations beyond county boundaries. Will also noted that there is a summary chapter at the end of the memo, which lists observations by county.

Mary Keating stated that since the 2000 census there has been a 50% increase in individuals living below the poverty line in DuPage County and it's now a very different landscape. Will stated that they will include projections for each county and that they will add a notation, or some sort of disclaimer, at the top of the memo warning of this discrepancy.

Other members noted that there was no congruency with the listing of large employers. Russell Pietrowiak mentioned that he can add in the retail component from the NIPC forecast. Will also noted to please send in comments regarding local flavor, since they are not aware of some of these deeper issues happening in each county. PAC members were encouraged to supply information and data on destinations in their respective counties, including but not limited to hotels, industrial parks, and shopping malls.

Mary indicated that right now in DuPage County, there is very little unmet need, due in large part to the success of Ride DuPage. She did stress that this may change unless a sustainable funding stream can be obtained for the service. Jay directed the consultant team to stress this point up front in the next deliverable, Technical Memorandum 5, which will compare the inventory of services with the trip patterns of the three target populations.

Jay asked that final comments from PAC members be submitted directly to the RTA by April 6, 2007.

4. Workshops

Laura Peck from Res Publica Group gave a summary of the logistics for the County Workshops. She let all PAC members know that each of the workshops have been coordinated and scheduled and locations are confirmed and listed on the handout. She explained that each of the workshops will be split into two halves. The first half will be the stakeholder portion and the second half will be a public participation portion in the form of an open house. The duration of each of these sections depends on each county and is noted on the sheet, as well.

Laura noted that there are 3 workshops within Cook County – one in the City of Chicago, North Cook County and South Cook County – one form letter went to all organizations in Cook County asking them to choose one of the three workshops to attend. Close to 600 invitation letters went out on Friday March 23, 2007 and Res Publica is coordinating the RSVPs and is already starting to get responses. The Mayor's Office for People with Disabilities and the Office on Aging sent the invitation letter to their listserves on Tuesday March 27.

Laura again requested mailing lists for McHenry County and DuPage County. Laura will work with Chris Manheim and Mary Keating to get more invitation lists. Jay requested that PAC members attend at least one of the workshops and there was a good response from those in attendance.

Jay mentioned that the RTA will arrange for second language interpreters, if necessary. Will Rodman explained that the content of the stakeholder workshops is to verify the findings of Tasks 3 and 4 and to elicit good ideas for strategies to coordinate, or further coordinate, services. There will be a power point presentation during both the stakeholder and open house portions.

5. Future Selection Process and Selection Criteria

Jay stated that the PAC's homework will be to review (and rank, where noted) the 2007-2009 selection process and criteria, which will be emailed to the PAC.

6. Next Steps

Jay reiterated that final comments on Technical Memoranda 3 and 4 are due to the RTA by April 6 and the deadline for comments on the selection process and criteria handout is April 13. The next PAC meeting will be held on May 21.

May 21, 2007 PAC Meeting Minutes

Attendees

Project Advisory Committee Members

- Dave Snell, Pace
- Elsa Gutierrez, CTA
- Jacky Grimshaw, Center for Neighborhood Technology
- Jeff Wilkins, Kendall County
- Jennifer Smith, CEDA (for Patricia Douherty-Wildner)
- Natashia Holmes, IDOT
- Steve Lazzara, Will County
- Lynn O'Shea, Kane County Association for Individual Development (AID)
- Mary Keating, DuPage County
- Russell Pietrowiak, CMAP
- Tom Chefalo, Lake County
- Walt Meyers, Northeastern Illinois Area Agency on Aging
- Jason Osborn, McHenry County (for Chris Manheim)
- Dia Cirillo, Work, Welfare & Families, a division of the Center for Tax and Budget Accountability
- Susan Friend, SEASPAR
- Karen Tamley, MOPD

Others

- Will Rodman, Nelson\Nygaard Consulting Associates
- Erica Interrante, IDOT
- Jay Ciavarella, RTA
- Joe Voccia, RTA

1. Welcome

Following introductions, Jay Ciavarella from RTA welcomed those in attendance and announced that the RTA has re-aligned existing staff resources to more effectively manage and administer both the 2006 and future JARC/NF programs. Jay also noted that Technical Memoranda 3 and 4 will be posted to the project website by the end of the week and will remain as drafts. Any feedback received will be folded into the final HSTP.

2. Summary of Workshops and Focus Group Plan

Will Rodman from Nelson\Nygaard summarized the workshops held in April. A total of 8 workshops were held with about 140 people attending. Input was used to refine Tech Memos 3 and 4, and was also incorporated into the Tech Memo 5/6. Will also thanked the PAC members who were able to attend the workshops. Will noted that all workshop attendees have been entered into the project database that will be used in further outreach efforts. Currently, there are 1262 contact names in the database. Will announced that the Nelson\Nygaard team is planning to hold 6 focus groups of customers from the three target populations and covering different topics. Input will be used to verify Task 5 findings on unmet needs, and to elicit customer reactions to specific strategies identified in Task 6. The focus groups will be held during the week of June 4.

3. Draft 2007-2009 Process and Criteria

Jay walked the PAC through the handout and explained that the PAC will have several chances to comment on the process and criteria. Jay noted that the draft was developed from comments received following some brainstorming that occurred during the two previous PAC meetings. Jay first explained the process and highlighted the fact that the RTA will be striving to do more outreach at both the beginning and end of the process. The intention is to avoid some of the issues that arose with the 2006 program. Jay also mentioned that the process and criteria focused on JARC and New Freedom projects, and that IDOT would still be responsible for Section 5310 grants. Jay also suggested that IDOT develop a criterion for review of Section 5310 grant application originating in the seven-county region weighting more heavily applications that conform to the HSTP plan. The PAC asked for clarification on Step 7 and raised the possibility of the RTA conducting applicant presentations to describe their projects further. Jay responded that Step 7 will cover the follow-up that will be needed. Natashia Holmes noted that the process should include a step that adds the program of projects to the TIP. Jacky Grimshaw asked about the composition of the evaluation committee. Jay responded that the RTA is currently thinking that it will be a 5-person committee, comprised of two RTA staff, two CMAP staff, and one IDOT staff.

Will then explained the underlying methodology on how the criteria itself was developed, stating that it was developed from both stakeholder and PAC comments and a review of some other national practices. The PAC offered many suggestions that included:

- adding criteria or point values for projects that incorporate coordination – and in particular mobility management strategies;
- incorporating a Title VI screen;
- incorporating as a criterion severity of need;
- branching criteria for different types of projects (capital vs. operating),
- reducing the point value of service output and service consumed (B10 and B11); and
- eliminating the criteria focused on smaller budgets, but incorporating as a criterion non-quantifiable benefits (such as those that stem from nonservice-oriented projects).

The PAC also suggested that the consultant team run some of the 2006 applications through the criteria as a test.

Jay asked that comments on the handout from PAC members be submitted directly to the RTA by June 1, 2007. The handout will then be revised and distributed to the PAC in advance of the next meeting on June 25.

4. Discussion of Draft Technical Memorandum 5/6

Will summarized the content included in the Draft of Technical Memorandum 5/6. The document highlights service redundancies, gaps and unmet needs on a county-by-county basis, and offers relevant strategies for the region to pursue. Will pointed out that strategies were organized into coordination strategies, "other" strategies designed to improve the mobility of the three target populations, and IT strategies that support the above strategies. Jay asked that comments on Technical Memorandum 5/6 from PAC members be submitted directly to the RTA by June 1, 2007. The document will then be revised and posted to the project website as a draft. Mary Keating of DuPage County mentioned that, at first glance, the unmet need for DuPage County as identified in the report was in line with her view.

5. Next Meeting

Jay reiterated that final comments on the Selection Process and Criteria handout and Technical Memorandum 5/6 are due to the RTA by June 1. The next PAC meeting will be held on June 25.

June 25, 2007 PAC Meeting Minutes

Attendees

Project Advisory Committee Members

- Dave Snell, Pace
- Elsa Gutierrez, CTA
- Lynn O'Shea, Kane County Association for Individual Development (AID)
- Mary Keating, DuPage County
- Russell Pietrowiak, CMAP
- Walt Meyers, Northeastern Illinois Area Agency on Aging
- Dia Cirillo, Work, Welfare & Families, a division of the Center for Tax and Budget Accountability
- Susan Friend, SEASPAR
- Karen Tamley, MOPD
- Virginia Chandler, Metra
- Chris Manheim, McHenry County

Others

- Will Rodman, Nelson\Nygaard Consulting Associates
- Erica Interrante, IDOT
- Jay Ciavarella, RTA
- Joe Voccia, RTA

1. Welcome

Jay Ciavarella from RTA welcomed those in attendance and announced that following today's meeting, there would be a final PAC meeting to be held on Monday, July 30. The RTA and Nelson\Nygaard will present the draft Plan for review and discussion at the meeting.

2. Summary of Focus Groups

Will Rodman from Nelson\Nygaard announced that 6 focus groups were held in early June. The focus groups were held throughout the region with 8 to 10 participants at each. The focus groups were targeted to elicit feedback and reactions to preliminary strategies contained in Technical Memorandum 5/6 and included groups for people with disabilities, older adults, low income individuals, and the Hispanic population. Will reported that the focus groups confirmed many of the strategies and reinforced some of the views expressed at the county-based workshops held in April. A detailed summary of the focus groups will be included in the final Plan.

3. Discussion of Draft Technical Memorandum 7/8

Will provided an overview of Draft Technical Memorandum 7/8. The first part of the draft focuses on regional policies and strategies. The second part of the draft includes recommendations for future program years. The regional policies and strategies are presented based on implementation timeframe; short term being 6-12 months and long term being 12 months or longer. An overview of the funding programs (Section 5316 JARC and Section 5317 New Freedom) is included along with an overview of past regional experience with JARC. Also included are regional goals, policy and guidance and the proposed process, project evaluation and selection criteria, all of which were derived from the Federal requirements and PAC input.

Will highlighted some of the goals presented in Chapter 6. He summarized the 5 key goals that stem from the federal regulations and indicated that the planning process being followed is in compliance:

1. Ensure the HSTP fully complies with SAFETEA-LU regulations
2. Establish a framework for a competitive selection process
3. Ensure that the HSTP was developed from a comprehensive public involvement effort
4. Encourage coordination among services supported by Section 5316 and5317 funding but also among the broad array of community transportation services in the planning area
5. Ensure that the HSTP includes regional and target population representation input

Joe Voccia of the RTA highlighted some of the changes to the proposed process based on comments received on the document discussed at the May 21 PAC meeting. This discussion included matching requirements, Title VI strategies, and multi-year funding. Will highlighted some of the changes to the proposed selection criteria based on the previously distributed document. There were several specific comments on the criteria that were discussed. The RTA requested that additional comments and feedback be submitted by June 29.

4. Final Plan Outline / Remainder of Project Schedule

Jay distributed a one page project schedule and final plan outline. The details are provided below:

<u>Remaining Project Schedule</u>

June 29 Comments due to RTA on Draft Technical Memorandum 7/8

July 18 Draft Final Plan distributed to PAC

July 30 Final PAC Meeting

- Presentation of Draft Final Plan

Aug. 3 Final comments due to RTA on Draft Final Plan

Aug. 13 CMAP Human Services Committee Meeting

- Presentation of Final Plan for information only (nonvoting)
- PAC members encouraged to attend

Sept. 13 Final Plan adopted by RTA Board of Directors

Final Plan Outline

1) Executive Summary

- Compiled from all previous deliverables
- Underlying goals are to meet FTA requirements for the development of the HSTP, and to provide meaningful guidance and direction to potential project sponsors seeking strategies and tools that will help improve mobility and coordination

2) Introduction

- Compiled from all previous deliverables
- Project summary, goals, scope and methodology, report organization

3) Overview of Study Area: Available Services and Needs Assessment

- Compiled from Tech Memos 2-4 and 5/6
- Assessment of available services, on-going coordination activities, existing available services (supplemented by appendix B), regional needs assessment, and identification of service redundancies, gaps, and unmet needs

4) Identification and Analysis of Relevant Coordination/Mobility Strategies

- Compiled from Tech Memos 5/6 and 7/8
- Coordination, mobility, and technology related strategies

5) Priorities for Implementation

- Compiled from Tech Memo 7/8
- Overview of Federal funding programs, regional experience with funding programs, proposed process, project evaluation, and selection criteria

6) Appendices

- Appendix A: Documentation of all Public Involvement Efforts
- Appendix B: Inventory of Available Services
- Appendix C: List of Eligible Projects

5. Next Meeting

Jay reiterated that final comments on Draft Technical Memorandum 7/8 are due to the RTA by close of business Friday, June 29. The next PAC meeting will be held at the RTA on July 30.

July 30, 2007 PAC Meeting Minutes

Attendees

Project Advisory Committee Members

- Elsa Gutierrez, CTA
- Erica Interrante, IDOT
- Lynn O'Shea, Kane County Association for Individual Development (AID)
- Mary Keating, DuPage County
- Russell Pietrowiak, CMAP
- Tom Chefalo, Lake County
- Virginia Chandler, Metra
- Dia Cirillo, Work, Welfare & Families, a division of the Center for Tax and Budget Accountability

Others

- Jay Ciavarella, RTA
- Joe Voccia, RTA
- Natasha Holmes, IDOT
- Will Rodman, Nelson\Nygaard Consulting Associates
- Bethany Whitaker, Nelson\Nygaard Consulting Associates
- Dave Bayless, Res Publica Group

1. Welcome

Following introductions, Jay Ciavarella from RTA welcomed those in attendance and thanked everyone on the committee for their time and effort over the last eight months. Jay explained the meeting would start with an overview of the draft final Plan.

2. Discussion on Draft Final Plan

Will Rodman and Bethany Whitaker from Nelson\Nygaard presented the organization, format, and key highlights of the draft final Plan organization, appendices, and Executive Summary. Will explained how the findings from the different tasks and different technical memoranda "mapped" into the specific chapters of the Plan, and noted that the sections focusing on needs and strategies focused not on individual counties but rather the commonalities throughout the region. Will also mentioned that while there is still some subjectivity embedded in the criteria included in the Plan, the criteria is much more objective and detailed than that used in this past year's process, and did reflect the PAC's input and expressed objectives. He added that this criteria should be regarded by the PAC as an on-going work in progress, that it may be tweaked upon upcoming reviews by the FTA and RTA Board, and that it may be adjusted after the first cycle of proposal evaluations.

After this introduction, Jay opened the floor for PAC member comment on the Plan. One PAC member asked if the RTA will allow some flexibility in the selection process given that the criteria is new and may contain elements that under or overstate intended goals. Jay said while he

recognizes the process will not be perfect, he expects it to be an improvement over last year. He also added that there was no requirement for this process to be included in the HSTP, but the RTA felt strongly that the process and selection criteria should be a locally-driven product as well.

Jay and Joe Voccia explained that the RTA will be preparing a Program Management Plan (PMP). The HSTP is the big picture document and framework for the region, while the PMP provides the framework for implementing the program, and monitoring the progress of selected projects.

Joe led a discussion about Title VI requirements, how they relate to JARC and New Freedom funding, and how each of the service boards must look at their system as a whole to see how they each comply with these requirements. Joe noted that Title VI will be addressed in the PMP to ensure that the process is open and available to everyone and protects disadvantaged populations, and that JARC and New Freedom projects focus on these same populations. He also made the point that applicants for such funding will compete in an open process with equal access to funds, and that the RTA does not anticipate any Title VI issues connected with the HSTP.

There was also discussion about the use of volunteer services as in-kind match and if that is consistent with the PAC's intention of encouraging the promotion of sustainable projects. Federal regulations make it clear that local match should be something you would otherwise have to pay for; thus the value of volunteer driver hours and any other non-reimbursed expense incurred by the volunteer drivers may be allowed. The RTA said they may consider using volunteer driver resources as matching resources as a demonstration project but this issue requires more research.

Another PAC member said they hope to continue this type of dialogue with lots of stakeholders at the table as the program is implemented.

3. Next Steps

Jay explained that comments on the draft final Plan are due on Friday, August 3. Key future dates for the project include:

- August 13 – RTA presents HSTP to CMAP Human Services Committee
- September 13 – HSTP goes to RTA board for adoption

If the plan is adopted, the RTA will move ahead on the schedule included in the Plan.

4. PAC Endorsement of the Plan

Jay said he wanted to give each PAC member a chance to provide final input into the planning process and asked if they personally endorsed the plan. PAC members went around the room and voiced their opinions. Each of the PAC members present endorsed the Plan.

Key comments on the study process and products included:

- Several individuals expressed appreciation for the planning process, saying it was very inclusive of a lot of different perspectives and voices. Others complimented the plan and planning process as objective, balanced and done well.

- Several of the members liked how the document can also be used for future regional and county-based coordination planning. One individual noted that while the plan was a good resource, it might have included some more detailed information for each County.

- One PAC member noted that the RTA did a good job getting the right people at the table. Another member was pleasantly surprised at how the PAC came together as "one voice" with a regional perspective, despite the varied constituencies represented.

- Another member also expressed strong support for continuing to meet and to keep the dialogue going as the process is implemented. Jay noted that the RTA is currently reviewing some options.

5. Closing

Before the meeting adorned, IDOT presented a brief update on the statewide process.

Jay thanked everyone for attending the meeting as well as their participation and effort over the course of the project. Will also thanked the PAC members for their contributions and help throughout the project, adding that the Plan is a stronger document because of their input.

A.3 Stakeholder Meetings and Interviews

Key points gleaned from stakeholder interviews, organized by county, are summarized below.

Cook County

Interviewees

- Alice Segal, Director of Community Affairs, Anixter Center
- Wayne Kulick, Countryside Association for People with Disabilities
- Tony Paulauski, Executive Director, ARC of Illinois
- Oswaldo Rangel and Maria Talis, Pilsen One-Stop Center, Illinois Department of Employment Security
- Jonathan Lavin, CEO, Age Options
- John Robinson, Paratransit customer, HUD, RTA Advisory Board, Illinois Center for Rehab Advisory Board, Illinois Center for Rehab foundation
- Debra Strickland, Director, Developing Communities Project
- Chad Higgins, Case worker, Goodwill of Metro Chicago
- Barbara Brun, City of Chicago Department of Aging
- Laurie Dittman and Doreen Bogus, Mayor's Office of Disabilities
- Ann Hogan, Cook County Workforce Investment Board (South and Western Suburban)

On-Going Coordination Activities

There is an ad-hoc committee on transit coordination that has met with Rep. Julie Hamos of Evanston to introduce new coordination legislation to address transportation quality and maximize funding opportunities. Moreover, Pace is attempting to organize coordination meetings and activities with advisory boards. A noted resource for coordination planning was the Interagency Coordinating Transportation Committee report to the Governor and General Assembly.

Existing Services

Some of the key points noted about existing transit service in Cook County included:

- *Availability of major services*: Many respondents reported their clientele rely on the major transit services such as CTA, Pace, and Metra, as well as specialized services.
- *Gaps in service quality*: Despite a high overall impression of transit service in Cook County, multiple respondents indicated that there were problems with geographic coverage, service hour coverage (particularly for 2nd and 3rd shift workers and reverse commuters) service speed, and on-time performance/timeliness of both fixed-route and curb-to-curb services.
- *Private services:* An employment assistance agency indicated that some larger employers in the region will offer shuttle services for disadvantaged employees to get to work, including temp agencies, UPS, and Suburban Job Link.

- *Senior Shopping Shuttles*: These shuttles are administered by the Mayor's office, serving 104 senior residences throughout the City of Chicago.
- *Cost*: The cost of fuel and day-to-day operations is a major barrier to enhancing transportation service and maximizing effectiveness.

Needs/Duplications

- *Few duplications*: Respondents, particularly social service agencies indicated that there were few areas of service overlap – in fact, there were significant areas with a lack of coverage.
- *Excess capacity:* One respondent reported that community and church vans are sometimes underutilized.
- *Taxi service*: Taxis can be a good alternative to specialized transit services but are frequently unavailable when needed; some problems with driver training were cited.
- *Funding sources*: Although current streams of funding for specialized transit were good, more new and dedicated sources are needed to close the gaps in service.
- *Service area restrictions*: In some cases, geopolitical boundaries (e.g. township lines) act as a barrier to provision of effective transit services.
- *Barriers to coordination*: Barriers to coordination included service quality concerns, large scale agencies addressing the needs of elderly and disabled persons, and differing cost and funding structures.

Goals/Ideas

- *Regular meetings:* Several respondents indicated that regular meetings between human service agencies, major transit providers, and citizens, would be a good way to increase dialogue and understand each others' issues and concerns. This should include public outreach and meetings in outlying communities.
- *Service coverage*: Increasing the service coverage areas of both fixed-route transit and demand responsive service would allow people on the fringe to access jobs, shopping and medical appointments, particularly at off-peak times. Employment assistance agencies stated that service to outlying areas and providing owl service would be desirable especially for low income people.

DuPage County

Interviewees

- Carol Simler, Executive Director, DuPage PADS (non-profit, homeless interests)
- Jody Hefler, Senior Services Coordinator, Village of Glen Ellyn
- Cathy Ficker-Terrill, Ray Graham Association (non-profit, developmental disabilities – children and adults)
- Carmen Caruthers, Manager, Transportation and Planning Operations, City of Naperville
- Angela Bentsen, Director of Senior Services, Naperville Township

- Lois Biggins, Lisle Township
- Lorene Pesole, Ellen Finegan, and Mary Thorpe, DuPage Co. Health Department

On-Going Coordination Activities

DuPage County has an active and well established Inter-Agency Planning Coordination Council (IAPCC) that has been responsible for many of the successful coordination projects in DuPage County, including Ride DuPage and the Pilot II subsidized taxi program. Both the IAPCC and its programs are models for other counties, regionally and nationally. The IAPCC benefits from having many of the same members participate over time. It includes several sub-committees, including an outreach committee that aims to connect to additional human service transportation providers.

Existing Services

Communities in DuPage County including the County government, offer residents some of the highest level of community transportation services in the seven-county study area, especially those communities that participate in the Ride DuPage program. Ride DuPage is the County's coordinated human services – public transit service. The Ride DuPage program, as sponsored by Naperville and Lisle provides 24-hour, 7 day per week service to their resident older adults and persons with disabilities, without any service area limitation. The fare for this service is based on distance traveled.

Most townships and some municipalities in DuPage County also have their own dial-a-ride program and/or subsidized taxi programs. Several of the individuals interviewed reported problems with the Pilot II taxi subsidy program, primarily associated with taxi drivers refusing to take the vouchers. In many cases human service programs also have vehicles or provide transportation services; and in some of these cases human service transportation will overlap with municipal or township dial-a-ride programs.

Needs/Duplications

- *Sustainable/Reliable funding*: Several respondents, especially Ride DuPage program sponsors, noted the need for consistent, reliable funding sources so that the existing level of service can be maintained.
- *Information*: DuPage County has a developed county inventory of available community transportation resources. This is a well-established resource, but could be improved with more and more diverse formats, e.g., language, such as foreign language and electronic formats.
- *Vehicles*: Some of the human service organizations feel establishing more transparent methods for obtaining new vehicles is essential.
- *Service gaps*: Among those groups who experienced a service gap were low-income young persons (due to ineligibility for Medicaid taxi service), and the elderly and the disabled, who desired more effective and expanded transit services.

Goals/Ideas

- The major goal among stakeholders in DuPage County is finding sustainable funding for existing transportation programs. As demand increases, sponsors are increasingly challenged by funding.
- Major goals revolved around two themes: obtaining new vehicles for fleet updates while minimizing cost, and improving the general public transit situation (including fixed-route services and those provided by Pace)

Kane County

Interviewees

- Danise Habun, Hanover Township / TIDE Initiative
- Lynn O'Shea, Kane County AID
- Jerry Murphy, Mental Health & Mental Retardation Service
- Lynn Bosley, United Way of Elgin
- Thomas Mihenlic, River Valley Workforce Investment Board
- Joyce Helander, Day One Network
- Holly Smith, Kane County
- Reesha Oliver, Transportation Supervisor, Hanover Township
- Neil McMenamin, PADS Program
- Gene Dempsey, Coalition of Citizens with Disabilities

On-Going Coordination Activities

The Kane County Paratransit Coordinating Council (KCPCC) was formed in October 2003, and produced a resource guide for seniors and people with disabilities in 2004.

Most notably, the KCPCC recently prepared a successful JARC/NF funding application (with Pace) to fund the Ride-in-Kane program, a coordinated transportation service that will build on the success of Ride DuPage, using similar organization and structure including a centralized dispatch service to eligible Kane County residents. This program will begin in late summer 2007. The council continues to meet, involving 30 stakeholders.

Existing Services

- While several townships have local dial-a-ride services, several townships, especially those located in the southwest portion of the County do not have any paratransit or community transportation services.
- A combination of rural and urban areas means large buses are unsuitable, and population density too low for fixed routes in suburban areas.
- There is a lack of transit to areas where job opportunities are growing rapidly and, in those areas with transit, services end too early for those with late shifts.

Needs/Duplications

- Securing long-term funding for the new Ride-in-Kane program is a principal challenge. More broadly, maintaining momentum for coordination over a number of years is critical.
- Defining service areas according to County and municipal borders is not always consistent with the travel needs of County residents and there is an inequity in the availability of services between municipalities.
- Paratransit operating hours are frequently too short and do not adequately reflect passenger needs.
- There are currently gaps in public awareness of available transit and paratransit services; need for education about public transportation, more accessible information and better marketing. Brochures are being created for Ride-in-Kane.
- Fixed-route service is often inappropriate given harsh weather conditions and uncovered bus stops, especially for persons with disabilities.

Goals/Ideas

- Multiple transfer hubs outside traditional downtown to aid accessibility to peripheral locations.
- Agencies that assist the same population could establish van service between relevant locations.

Kendall County

Interviewees

- Jeff Wilkins, Kendall County
- Alan Zaeske, Fox Valley Older Adults
- Dr. Amal Tokars, Kieth Belemas, and RaeAnn Van Gundy, Kendall Health Department

On-Going Coordination Activities

Interviewees in Kendall County are planning to develop a transit system in Kendall County; there are currently very limited community transportation services in the County. Kendall County is optimistic about coordination; they are learning from Kane and DuPage counties. The current planned transit system was designed through a working group that consisted of representatives from several agencies and stakeholders.

Existing Services

A couple of human services organizations based outside of Kendall County serve Kendall County residents. One of these, Fox Valley Older Adults based in DeKalb County also provides a minimal level of services in Kendall County as far east as Plano. Taxi service is very limited in the county.

Needs/Duplications

Lack of sufficient transportation encourages agencies such as the Health Department to provide outreach services rather than serve clients on site, limiting their scope of service. It would be good to integrate those services that are expanding – specifically Workforce Investment Board and Senior Services – into the emerging coordinated transportation system.

Goals/Ideas

Ideal transportation system would be inclusive not exclusive, and address the systematic segregation which is seen to undermine cost effectiveness and create issues of social justice. The proposed transit system includes a combination of fixed-route and dial-a-ride services designed to efficiently serve the more urban and rural parts of the county.

Lake County

Interviewees

- Dorothy Russell, Catholic Charities of Lake County
- Carolyn Guthman, Lake County Council for Seniors/AARP
- Kay Starostovic, President, Lake County Coordinated Transportation Committee, Grant Township Supervisor, Grant Township Senior Committee
- Krista Erickson, Lake County Center for Independent Living
- Tom Chefalo, Lake County Planning Department
- Vicky Gordon, Lake County Workforce Investment Board
- Ted Byers, United Way of Lake County

On-Going Coordination Activities

There is a county-wide, multi-organization coordinating group, the Lake County Coordinated Transportation Services Committee, that was created and formalized in May, 2006. The Lake County Coordinated Transportation Services Committee is currently working with several other county level advocacy groups, including the Lake County Council for Seniors and Getting to Work in Lake County so that they will be more unified and better organized. Other coordination efforts include the Lake County Workforce Investment Board and Work, Welfare and Families (WWF) efforts to develop a coordinated transit plan called, "Getting to Work in Lake County".

Existing Services

In addition to Pace fixed routes, CTA, and Metra, human services agencies provide some community transportation services, but reported that they face certain challenges in serving their clients. The road structure in Lake County makes it difficult to make convenient connections for some trips, and providers reported inadequate funds to properly operate full-time service. In addition, most of the transit service coverage is limited to set corridors clustered around the eastern part of the County and as such miss the people living in the outlying areas. Stakeholders found that Pace is unable to fill in the gap; there are areas of the county (particularly the west and north)

with inadequate service, especially on weekends. One respondent indicated problems with disabled accessibility at transit stops and the paths to get there.

Needs/Duplications

- *Boundaries*: Many respondents noted that many of the existing dial-a-ride services do not provide service across town boundaries
- *Lack of service*: Respondents complained of a lack of service in the area; duplication was not considered a problem. Some noted the difficulty in providing fixed-route transit in Lake's rural environment. In one case, three townships chipped in to purchase a Pace bus to run service to their communities
- *Operating funds*: Respondents indicated that funds were inadequate to properly maintain services
- *Trip purposes*: There is a need to provide rides to seniors for varying trip purposes, including medical appointments and pharmacy trips
- *Information*: Respondents indicated that community information and marketing about transit was poor

Several respondents indicated barriers to coordination and other associated problems included:

- Differing fare structures between the major transportation providers (Pace, Metra, CTA) made coordination difficult when multiple providers were needed
- Transportation to specialized medical appointments poses a problem for coordination when certain vendors refuse service at those times, particularly on weekends – scheduling particularities are a barrier
- While some partners networked or collaborated with one another, there was a stated need for coordination among transportation users and providers

Goals/Ideas

The Lake County Coordinated Transportation Committee suggested:

- *Collaboration among umbrella groups*: Including Lake County Partners, Lake County Transportation Alliance
- *Referendum*: Another idea might be to consider a county referendum for senior services

McHenry County

Interviewees

- John Labaj, Deputy County Administrator, McHenry County
- Jason Osborn, McHenry County Department of Transportation
- Donna Schaefer, McHenry County Supervisor
- Celia Reed, Pioneer Center for Human Services
- Dean Karamangianis, Pioneer Center for Human Services

- Tom Riley, Pioneer Center for Human Services
- Carl Martens, McHenry County Workforce Investment Board

On-Going Coordination Activities

The McHenry County Transit Plan Implementation Task Force is a leader in the effort to develop more and better transit resources in McHenry County. The Task Force is currently seeking funding for transit plan elements and aims to improve coordination between various human service organizations. McHenry County and the McHenry County Department of Transportation are united with the Task Force in this effort. In general, interest in County and regional coordination has been strong, although one stakeholder stated that identification of needs and overlaps is beyond the reach of individual organizations, indicating that a broader umbrella program of coordination assessment would be more effective.

The Task Force will look to JARC and New Freedom funding programs to obtain funds for a centralized call center, including renovations and the installation of automated scheduling and dispatch software. Calls for service would be channeled through the center and brokered to various providers, including accessible van, bus, or taxi. Cost sharing arrangements will need to be developed to facilitate this practice, a process that will require extensive coordination between agencies.

Existing Services

The presence of Pace in the county is fairly low and, due to its rural nature, it is anticipated that more intensive fixed-route transit would be difficult to introduce. Therefore, present efforts are aimed at filling in gaps via coordination of human services organizations rather than at expansion of scheduled bus routes.

Needs/Duplications

Stated needs and duplications included:

- *Coordination:* The installation of the proposed call center will require intensified efforts at coordination to unite the various organizations involved and to develop a cost-sharing structure
- *Capacity:* There is a need to improve transit capacity, especially among the elderly and disabled, particularly at mid-day
- *Service quality:* Respondents from Pioneer Center, a care agency for persons with mental illnesses, indicated that Pace services were sometimes excessively slow for their clients, or that contractors were sometimes insufficiently trained to deal with the mentally disabled

Goals/Ideas

The McHenry County Transit Plan Implementation Task Force feels that smaller rather than larger efforts toward improvement of transit would be the most effective way to achieve results. The proposed call center is at the forefront of this endeavor.

Will County

Interviewees

- Ken Noth, Executive Director, Eastern Will County Senior Service
- Shari Nagel, Trinity Services
- Loren Cherne, The Council
- Susan LaTour, Will County Legal
- Barbara Collins, Catholic Charities Daybreak
- Cindy Ketcham, Veterans Assistance Commission
- Matthew Lanoue, Cornerstone Services
- Maureen Pool, Will County Center for Community Concerns
- J.D. Ross, Will-Grundy Medical Clinic
- Barbara Birchler, Habitat for Humanity
- Kelly McKenzie, Will-Grundy Center for Independent Living
- Kris Toll, Morning Star Missions
- Charlene Lockowitz, Crisis Line
- Marge Zajicek, Senior Services Center
- Mike Hennessy, United Way of Will County

On-Going Coordination Activities

There are many examples of coordinated activities in Will County. Trinity Services, a major provider of transit services for the disabled, has previously engaged in a coordination effort with the RTA, including a time-of-day ridership analysis. Riders benefited several years ago when Pace allowed automatic eligibility certification for Trinity clients rather than requiring a separate – and cumbersome – process that no longer exists. Trinity also coordinates rides with Easter Seals and United Cerebral Palsy. Coordination mainly exists within the county with minimal activity outside the County borders in Cook County.

Other examples of collaboration exist. One respondent mentioned the CATS Task Force (for seniors and people with disabilities) and the Community Mobility Task Force (Chicago Metropolitan area). Many agencies met to provide input on the Eastern Will County Rail study. Several interviewees indicated a wide range of agencies with similar services network on a fairly regular basis. The degree and level of transportation coordination varied – in some cases, services were arranged contractually between a provider and a funder (such as the Chicago Department of Aging contract with Pace). The Community Services Council is a group of 70 local service agencies who participate on a voluntary basis and meet periodically to discuss issues of common concern.

Some stakeholders were aware that coordination efforts had been undertaken in the past, but were unsure of specifics. Some felt that these efforts were not transparent – few could remember what had become of them. Social service agency staff felt strongly that continued progress on this study was important because coordination has enormous potential. A final body of note, the Will

County Governmental League, is a transportation committee that meets monthly and may be a good forum for addressing transportation coordination.

Existing Services

- *Pace*: Pace is a major local transit service, but its service cutoff at 5:00 p.m. poses a challenge to local mobility especially for working people.
  - The fact that the Dial-a-ride service will not cross township boundaries hinders ridership, a problem noted by multiple stakeholders.
  - Curb-to-curb service is not adequate for all riders; some require door-to-door assistance.
- *Taxi Access Program*: The Taxi Access Program is a voucher service that has experienced very high demand in recent years.

Needs/Duplications

- *Duplication*: Several respondents noted that there were other, sometimes smaller organizations providing very similar service.
- *Funding*: Organizations cited lack of funding as a barrier to extending and enhancing services.
- *Information:* Several agencies suggested that getting information about transit out to the public was a problem, particularly for persons in need who were unaffiliated with an agency. More travel training would help people transition from demand response service to fixed-route service.
- *Service shortcomings*: Many agencies in Will County indicated that, for a variety of reasons, the present services were difficult for their clients to use. Reasons included:
  - Pace services do not cover 2nd and 3rd shift workers, especially in the industrial corridor (late night/owl service was a suggested remedy)
  - Flexibility of service: fixed routes can be circuitous and require long ride times, including the need to make multiple transfers and some routes not directly serving job locations
  - Bus transfer facility is inconveniently located downtown
  - Lack of subscription service or advance scheduling for Pace paratransit

Goals/Ideas

- *Coordination lead agency:* Trinity Services would be interested in serving as a lead in enhancing coordination in the County and to better network with the various providers. They suggested that RTA would make a good partner agency.
- *Information*: There was a strong feeling that there was a lack of public information and that improving upon informational materials and distribution methods (including public meetings) would be very useful. An information clearinghouse was suggested to provide one source for all transit information in one publication or by one service.

Regional Services

Interviewees

- Russell Pietrowiak, Chicago Metropolitan Agency for Planning (CMAP)
- Elsa Gutierrez, Chicago Transit Authority
- Lester Foster, First Transit
- Juan Salgado, Institute for Latino Progress
- Virginia Chandler, Metra
- Walt Meyers, Northeastern Illinois Area Agency on Aging (AAA)
- David Snell, Tom Groeninger, and Lorraine Snorden, Pace
- Joe DiJohn, University of Illinois – Chicago/ Urban Transportation Center
- Elio Montenegro, United Way of Metro Chicago
- Edward Ruebensam, Jesse Brown VA Medical Center
- Pam Heavens, Center for Independent Living
- Larry Dawson, Illinois Department of Commerce and Economic Opportunity (DCEO)

On-going Coordination Activities

Pace

- Merging ADA paratransit services and Dial-a-ride services into sub-regional contracts
- Shifting Chicago Department of Aging trips to Special Services from ADA Paratransit, where they can be provided at lower cost
- Merging human service agency trips into sub-regional contracts and creating opportunities for "co-mingling" e.g. Ride DuPage and Ride-in-Kane
- Collaboration with county paratransit coordinating councils resulted in several sponsors sharing in the local match for projects recently-awarded JARC funding

Metra

In partnership with Lake-Cook Transportation Management Association (TMA) Shuttle Bug service has grown to ten routes, operated by Pace and coordinated with rail schedules. The firms served by the buses contribute about 35% of the operating costs.

Illinois Department of Human Services

The Interagency Coordinating Committee on Transportation (ICCT) developed a database of transportation providers and produced a report exploring potential approaches to coordination.

Illinois Department of Healthcare and Family Service

Procured a statewide broker – First Transit – to handle non-emergency Medicaid trips

Sub-regional Councils

There are six sub-regional councils in suburban Cook County and five in the six collar counties. Meet regularly for cooperative decision-making and obtaining sub-regional consensus before being brought to the regional Council of Mayors Executive Committee for debate.

Existing Public Transit Services

Pace

In addition to providing fixed-route suburban bus service, Pace provides five forms of paratransit.

- ADA paratransit mirrors Pace fixed-route services: 458,774 trips contracted in eight service areas to three total vendors using Pace vehicles
- Non-ADA paratransit services such as municipal-sponsored dial-a-ride and agency-sponsored services: 62 programs providing 1,929,426 trips on Pace vehicles and taxis. Costs are only partially borne by Pace
- The Advantage Vanpool Program

Metra

70% of Metra's 237 stations are accessible. For those which aren't accessible, free shuttle service is provided for individuals from within ¾-mile of the non-accessible station to the next accessible station, provided there is no other accessible public transport within ¾-mile of the non-accessible station.

CTA

All 154 bus routes are fully accessible. Pace has responsibility for providing the following:

- ADA paratransit on behalf of the CTA in the CTA service area (formerly Special Services). Contracts with three private carriers provided 1,673,628 trips in FY 2005.
- Taxi Access Program providing $13.50 taxi vouchers to ADA-eligible individuals for $5 purchase price, comprising 631,286 trips. Mobility Direct is a component of this which provides such service for subscription (regular weekly) trips.

Numerous human service agencies and institutions directly provide customized transportation to their clients. First Transit estimates there are 500 providers of transportation in the RTA service area, for example:

- Jesse Brown VA Medical Center operates shuttle buses to community-based outpatient clinics
- Numerous temporary employment agencies provide their own transportation for workers; and Northeast Illinois Area Agency on Aging provided 29,000 units of transportation across the collar counties, through taxi vouchers, volunteer driver programs and partner organizations

Needs/Duplications

- A recent analysis of the Taxi Access Program found that the convenience of the program was not fostering the expected savings in transferring trips from ADA paratransit to this less costly alternative
- CTA Paratransit (formerly Special Services) is listed in the rider guide as curb-to-curb but functions as door-to-door
- All Pace's services are operating at or near capacity: 63 trips were denied in 2005, contrary to policy, due to capacity constraints
- Pace fixed-route service hours insufficient, and paratransit only required to mirror these services
- CMAP believed that the RTA's selection process for JARC and New Freedom funding in 2006 was very subjective with little input from local entities
- All groups sought reforms to the selection process of JARC and New Freedom projects

Goals/Idea

CMAP staff offered the following comments:

- Project sustainability should be included in the selection criteria
- A combination of old and new projects should be recommended for funding annually
- Project evaluation should be quantitative to ensure greater objectivity, and evaluating success should be a monthly, public process, sensitive to a lack of operating statistics for new projects
- Priority should be given to projects with a solid local match
- Coordination should be viewed as a means to increase mobility, not decrease costs

Metra staff said that a portion of program funds should be set aside to sustain previously funded projects, and the criteria should be:

- Priority for joint projects
- Total volume of jobs being reached—not just low income
- Cost per trip/subsidy per trip
- Sustainability of project

Pace staff offered the following comments:

- Priority should be given to projects which are innovative or expand existing services
- Credit should be awarded for joint partnerships which demonstrate coordination
- Oral interviews should be part of the application process
- Rejected applications should receive feedback and guidance

CTA staff suggested that criteria for selection should consider:

- Cost per rider to provide service
- Subsidy per rider
- Impact on minority population
- Ease of project implementation

A.4 Open House Workshops

A total of eight public workshops were held in April 2007 and over 150 people attended. Workshops were held in Kane, McHenry, Lake, DuPage, and Will counties. There were also three workshops held in Cook County, one in the north Cook area, one in south Cook, and one in the City of Chicago. The purpose of the workshops was to present preliminary findings to key stakeholders and members of the general public and to gather additional input. An overview of key input and revisions can be found in the table on the next page.

McHenry Workshop, April 19th, 2007

Lake County Workshop, April 18th, 2007

County	Input and Revisions
Cook City of Chicago	• More curb-to-curb service needed • Need centralized dispatch coordination • Simple extension of ADA coverage from ¾ to 1.5 miles would remedy service gaps
Cook North suburbs	• Participation too low for meaningful input
Cook South suburbs	• Better coordination in municipalities that overlap multiple townships. • Need centralized database of eligible services
DuPage	• There is a serious lack of transportation services for medical appointments and prescriptions. • Suggestion to add a volunteer driver and a family mileage reimbursement program to Ride DuPage.
Kane and Kendall Joint workshop	• Central communication hub to coordinate the needs of riders with available transportation vehicles • There need to be new ideas for targeting new funding sources and services for low-income residents
Lake	• Service coverage insufficient to cover temporary work assignments and non-regular shifts. • Need centralized database of eligible services and comprehensive trip planner
McHenry	• Limited access to educational institutions and opportunities • Most services inconvenient for non-regular shift workers • There needs to be a higher level of driver assistance and flexible routes. • Need centralized database of services beyond web access
Will	• There should be plans to connect low-income housing with industrial and service industry jobs. • Volunteer driver programs should be explored

A.5 Focus Groups

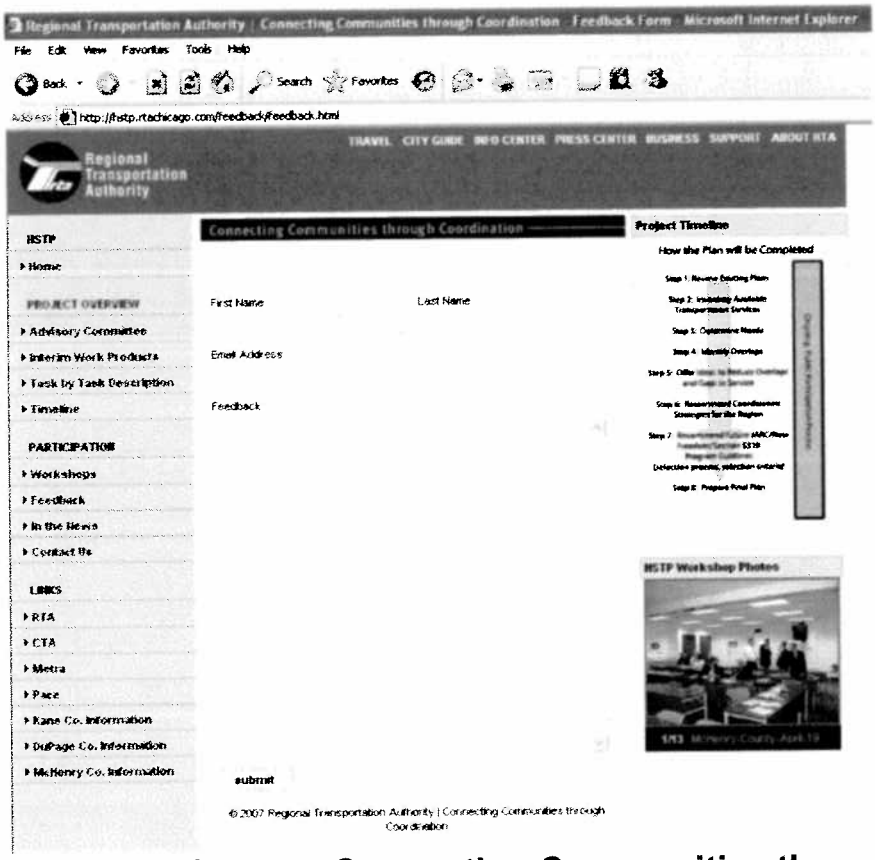
In order to garner additional information about the specific transportation services and needs for the three constituent user groups (elderly, persons with disabilities and persons with low-incomes), six focus group meetings were held in early June 2007. An overview of key findings is provided in the table on the next page.

Countryside Association Focus Group

Organization	Constituency	Principal Findings
Countryside Association for People with Disabilities	Persons with Disabilities Collar counties	• Individuals use Pace paratransit, Countryside Association vans and rides from family in order to access this institution and employment sites from their homes. • Lack of bus services and inability of local transit services to cross jurisdictional boundaries are principal concerns. • Would favor telephone services specifically for people with special needs, enhanced subsidized taxi service and volunteer driver programs, and volunteers or ambassadors to assist use of fixed-route transit.
Access Living	Persons with Disabilities Chicago	• Negative experience and perception of Pace paratransit due to reliability issues and excessive journey times, creates reluctance to commit to employment or volunteer positions. • Inadequate dissemination of service information through internet and vehicle posters: group would prefer personalized messages to home via phone or mail. • Would favor expansion of taxi voucher programs to enhance independence and allow trips for recreational/social purposes.
Community and Economic Development Association (CEDA)	Spanish language speakers Regionwide	• Limited access to automobiles, all use CTA bus and rail frequently while looking for work or commuting to part-time jobs, subject to unreliability and inconvenient transfers. • Would like more extensive Spanish translation, Hispanic staff at CTA and cultural education for CTA staff. • Would favor reverse commute express buses between Chicago and inner suburbs, as well as information on carpool/vanpool options.
Community and Economic Development Association (CEDA)	Persons involved in workforce development Regionwide	• Principal challenge is low-income persons traveling between suburban communities. • Many are frequently unable to take jobs due to lack of sufficient transportation service: multiple transfers, short service hours and uncoordinated bus and rail schedules. • Would favor expanding vanpool and guaranteed ride home programs.
Schaumburg Township Senior Services	Older Persons West and NW Cook County	• Feel that mobility needs are not met due to limits on service area and hours of operation. • Uses taxis but faces poor service due to short trip lengths requested. • Would favor centralized information and enhanced community bus service.
Eastern Will County Senior Services	Older Persons NE Will County	• Highly informed on how to use service to access medical services, generally satisfied. • Centralized telephone service with operators rather than automated answering desired. • Would favor using resources to increase scope of transportation service, especially in the evenings and on weekends.

A.6 Public Announcements

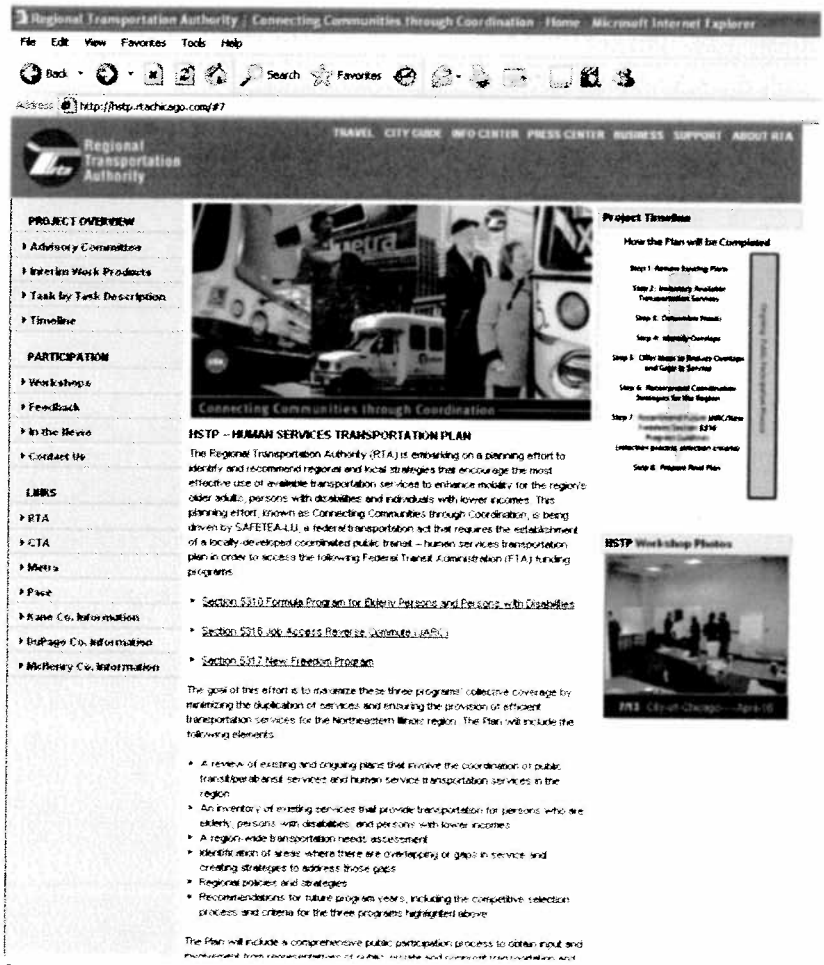
Opportunities for public involvement were encouraged through the dissemination of information on the planning process through various channels. Frequent updates on the planning process were posted to a RTA hosted website, including preliminary findings and information on how to participate directly in future stages. See Figures below for screenshots from this website.



Comment form on Connecting Communities through Coordination Website

This website also featured an interactive tool to solicit feedback from the public online. Submissions to the website yielded the following input to the planning process:

- Transit fares excessive for those on low incomes, who tend to use cash payments which are the highest possible.
- Bus routes need to consider serving regional malls to provide access to important retail options.
- Bus service for the disabled is not extensive enough in suburbs to make it useful.
- Paratransit services which do not cross county lines create inconvenient gaps in service for commuting trips. Intra-county alternative destinations may be further than alternative destinations in adjacent counties.
- Duplication of service exists in many areas in the region.



Introduction page to Connecting Communities through Coordination Website

A.7 Press Releases and Media Coverage

The RTA produced and circulated two press releases during the planning process. The first, in February 2007, announced the launch of the website and the beginning of the Connecting Communities through Coordination planning effort. The second pertained to the eight open house workshops held in April 2007. Both are included below.

The Daily Herald, Chicago's largest suburban newspaper, featured a profile of the planning effort in late February and an article in early April pertaining to the Lake County public workshop. The Naperville Sun also announced the DuPage workshop. The *Connecting Communities through Coordination* planning effort was also profiled in RTA's InTransit magazine in March 2007.

The workshops were also announced via "community calendars" in each of the respective locations. Participation was also encouraged by publicity via the organizations affiliated to members of the PAC. For example, the Center for Neighborhood Technology (CNT) circulated information through its Transit Future initiative; Jacky Grimshaw at the CNT is a PAC member.

DATE: February 19, 2007

CONTACT: Diane Palmer, Director of Communications, RTA, 312-913-3282

RTA LAUNCHES EFFORT TO MAXIMIZE COORDINATION OF HUMAN SERVICES TRANSPORTATION FOR DISABLED, ELDERLY AND LOW-INCOME INDIVIDUALS

Connecting Communities Through Coordination planning effort to span seven counties
Chicago – The Regional Transportation Authority's (RTA) today announced that it has launched a comprehensive, seven-county planning initiative geared toward strengthening the coordination of existing public transit and human services transportation.

The planning effort, known as ***Connecting Communities Through Coordination***, aims for better coordination of existing transportation services by inventorying existing service, assessing mobility needs, identifying potential gaps in service and recommending strategies to ensure that transportation services are delivered effectively and efficiently to the area's disabled, elderly and low income residents. Better coordination of these transportation services will enable the RTA and regional stakeholders to maximize the use of every resource and every dollar. The planning effort is expected to last several months and will cover Cook, DuPage, Kane, Kendall, Lake, McHenry and Will counties.

"When we encourage more efficient use of available services that bring enhanced mobility to our residents, the RTA and the entire region is able to stretch already scarce resources to the greatest extent possible," said Stephen Schlickman, RTA's Executive Director. "By demonstrating that there is a true regional plan to move forward, the RTA and its service providers are better positioned to make the best use of available federal dollars in future years."

Connecting Communities Through Coordination will include a comprehensive public participation effort to obtain input, feedback and direction from representatives of public, private and nonprofit transportation and human service providers. In the coming weeks, RTA will announce several county-based public workshops to share information with and gather ideas from members of the general public, particularly people with disabilities, older adults and individuals with lower incomes, to ensure their voices are heard.

"It is our goal to make ***Connecting Communities Through Coordination*** a plan that is developed by and for the people and organizations we serve," said Schlickman. In addition to public workshops, the RTA will be meeting with key regional stakeholders, interviewing advocacy groups and surveying transportation providers to seek recommendations on how to better coordinate services across municipal and county lines. "To fulfill our goal of making this a truly regional plan, we are counting on robust participation from everyone who has a stake in well-coordinated and efficient transportation service," Schlickman said. The coordination planning effort was prompted by provisions in the federal Safe, Accountable, Flexible, Efficient Transportation Act, a Legacy for Users (SAFETEA-LU), which provides funding for Federal surface transportation programs through FY 2009. SAFETEA-LU requires the establishment of a locally developed, coordinated public transit human services transportation plan in order for the northeastern Illinois region to access specific federal funding programs.

The project team includes members of the RTA, regional stakeholders, and a nationally-renowned transportation consulting team led by Nelson\Nygaard and Associates. The ***Connecting Communities Through Coordination*** web site can be found at hstp.rtachicago.com.

DATE: April 9, 2007

CONTACT: Diane Palmer, Director of Communications, RTA, 312-913-3282

RTA ANNOUNCES OPEN HOUSES TO HELP IMPROVE COORDINATION OF PUBLIC TRANSIT SERVICES

Connecting Communities Through Coordination planning effort covers seven-county region in northeastern Illinois

Chicago – The Regional Transportation Authority (RTA) has announced a planning effort called ***Connecting Communities Through Coordination*** designed to improve coordination of existing transportation services in northeastern Illinois. In launching the project, stakeholder information already has been sought to determine the current status of service coordination, identify the inventory of available community services and assess the transportation needs of persons with disabilities, older adults, and persons with limited incomes. Now, the RTA needs the public's help for verifying the findings to date and encouraging ideas to improve service coordination and efficiency in the region while avoiding service redundancies. Better coordination of these transportation services will enable the RTA and regional stakeholders to maximize the use of every resource and every dollar, especially as the agency's Moving Beyond Congestion strategic plan is underway.

"We are conducting these public open houses in order to identify coordination strategies for our entire service area and to ensure that everyone has a chance to participate in creating our regional plan," said Steve Schlickman, RTA Executive Director. "We realize that by gathering community input and striving for well coordinated and efficient transportation services that we will be able to make the most of existing limited resources and position our region to benefit from future federal funding." The ***Connecting Communities Through Coordination*** project serves the counties of Cook, DuPage, Kane, Kendall, Lake, McHenry and Will.

During the open houses, the RTA will seek input from and participation by the general public – particularly from persons with disabilities, older adults and persons with lower incomes to ensure their voices are heard. The RTA will distribute informational materials and have personnel on hand to listen to comments and answer questions. Staff from Nelson/Nygaard, a nationally-renowned transportation consulting team, will facilitate the open houses.

The coordination planning effort was prompted by provisions in the federal Safe, Accountable, Flexible, Efficient Transportation Act: a Legacy for Users (SAFETEA-LU) that provides funding for Federal surface transportation programs through FY 2009. SAFETEA-LU requires the establishment of a locally-developed and coordinated public transit human services transportation plan in order for the northeastern Illinois region to access specific federal funding programs.

The ***Connecting Communities Through Coordination*** web site is hstp.rtachicago.com and includes results of the planning effort to date along with a section for suggestions and feedback.

PUBLIC OPEN HOUSE LOCATION AND DETAILS

City of Chicago
Monday April 16, 2007 from 6:00 p.m. – 7:00 p.m.
United Way of Metropolitan Chicago, 1st Floor Conference Room
560 W. Lake St., Chicago, IL

Northern Cook County
Monday April 16, 2007 from 6:00 p.m. – 7:00 p.m.
Oakton Community College, Room 1604
1600 E. Golf Rd., Des Plaines, IL

Southern Cook County
Tuesday April 17, 2007 from 6:00 p.m. – 7:00 p.m.
Tinley Park Village Hall, Rooms C & D
16250 S. Oak Park Rd., Tinley Park, IL

Lake County
Wednesday April 18, 2007 from 5:30 p.m. – 7:00 p.m.
Libertyville Township Center, Meeting Room
359 Merrill Court, Libertyville, IL

Will County
Wednesday April 18, 2007 from 6:00 – 7:00 p.m.
Joliet Historical Museum, Caterpillar, Inc. Auditorium
204 N. Ottawa St., Joliet, IL

Kane/Kendall County
Thursday April 19, 2007 from 5:00 p.m. – 7:00 p.m.
Kane County Government Center, 1st Floor Auditorium
719 S. Batavia Ave. Building A, Geneva, IL

McHenry County
Thursday April 19, 2007 from 5:00 p.m. – 7:00 p.m.
Mc Henry County College, Rooms B166 & B167
8900 US HWY 14, Crystal Lake, IL

DuPage County
Thursday April 26, 2007 from 10:30 a.m. – 12:00 p.m.
Wheaton Park District Community Center, Lower Level
1777 S. Blanchard Rd., Wheaton, IL

If attendees require auxiliary aids or services, such as an American Sign Language Interpreter or written materials in accessible formats, please contact Jay Ciavarella at 312-913-3252 (voice), 312-913-3122 (TTY) or ciavarellaj@rtachicago.org **at least 48 hours in advance of the workshop**.

A.8 Participation by County

Connecting Communities through Coordination included a wide variety of public outreach efforts; as a result numerous individuals and organizations participated in study projects and provided information, comment or feedback on study products. Contact information for participants from various aspects of the public involvement effort was managed through a central database, which aided efforts to identify and reach out to three target populations. This database will be used to facilitate ongoing communication and participation in the study, including review of study findings and recommendations as well as implementation.

Participation in the study included attending project advisory committee meetings, stakeholder interviews, workshops, and focus groups. An overview of participation in the study is provided in the following table; this table lists the number of individuals and/or organizations by county who participated in any of the study activities.

Participation Level by Population

County	Multiple Populations	Disabled	Older Adults	Low Income	Total
Cook	194	20	25	115	**353**
DuPage	47	10	56	6	**119**
Lake	71	26	18	49	**164**
McHenry	77	0	24	5	**106**
Will	94	7	21	10	**132**
Kane/Kendall	263	44	62	21	**390**
Total	**729**	**107**	**206**	**206**	**1264**

Appendix B Summary of Existing Services

Shown by County and by Type of Service

Cook County	Type	General Public	Disabled Persons	Older Adults	Low Income Persons	Other Qualities	Extended Service Hrs	Annual Ridership (1)	Fleet Size
Village of Crestwood	D	X					No		
Village of Elk Grove	D	X					Sa	32,828	5
Lemont Township	D	X					Sa		1
Leyden Township	D	X					No	14,843	4
Village of Norridge	D	X					Sa/Su		
Orland Park	D	X					Sa		
Village of Park Forest	D	X					Sa		3
Village of Schaumburg	D	X					Sa/WD		
Village of University Park	D	X						25	
Barrington	D		X	X			No	3,749	2
Barrington Park District	D			X		Program	Varies		2
Bloom Township	D		X	X			No	28,000	8
Village of Forest Park	D		X	X			No		
Hanover Township	D		X	X					
Hometown	D		X	X			No	1,718	
Lyons Township	D		X	X			No		
Village of Morton Grove	D/T		X	X			No	8,944	2
Village of Mt. Prospect	T		X	X			N/A	N/A	N/A
New Trier Township	D/T		X	X					
Northfield Township	T		X	X	X		N/A	4,800	N/A

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R = Ride DuPage	WD = Weekday evening hours until 8PM or later
H = Human Service Agency Client Transportation Programs	Sa = Saturday hours
T = Taxi/Transit Subsidy Programs	Su = Sunday hours

Cook County	Type	General Public	Disabled Persons	Older Adults	Low Income Persons	Other Qualities	Extended Service Hrs	Annual Ridership (1)	Fleet Size
City of Oak Forest	D			X			No		2
Oak Park Township	D		X	X			No		4
Palatine Township	D		X	X			No		
City of Palos Hills	D		X	X			No	13,000	2
Rich Township	D		X	X			Sa		
Schaumburg Township	D		X	X			No		7
Village of Skokie	D		X	X			No	20,283	4
Stickney Township	D		X	X			No	20,000	5
Village of Tinley Park	D			X			No		3
Worth Township	D		X	X			No		
Special Services	A		X				Sa/Su/WD	1,673,628	
Taxi Access Program	A**						24/7	631,286	N/A
North Cook Operations	A		X				Sa/Su/WD	129,324	
South Cook Operations	A		X				Sa/Su/WD	154,801	
West Cook Operations	A		X				Sa/Su/WD	64,217	
Alexian Center for Mental Health	H		X						1
American Residential Care	H		X						2
Aspire of Illinois	H		X						9
Avenues for Independence	H		X						6
Blue Cap	H		X						3
Center on Deafness	H		X						2
Clearbrook Center	H		X						12
Garden Center for the Handicapped	H		X						3

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** While available to ADA paratransit customers in the City of Chicago, TAP is not considered to be an ADA paratransit service as it is an exclusive-ride, same day service.

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Cook County	Type	General Public	Disabled Persons	Older Adults	Low Income Persons	Other Qualities	Extended Service Hrs	Annual Ridership (1)	Fleet Size
Kenneth Young Centers	H		X						2
LaGrange Area Special Ed Dept.	H		X						4
Lakeside Center	H								3
LARC	H		X						3
Little City Foundation	H		X						21
Misericordia Heart of Mercy	H		X						
New Hope Center	H		X						18
Parklawn Services	H		X						8
Search Developmental Center	H		X						10
Seguin Services	H		X						2
Sertoma Centre, Inc.	H		X						24
Shore Community Services	H		X						1
Southstar Services	H		X						13
Southwest Community Services	H		X						7
Southwest Disabilities Service	H		X						7
St. Colletta's of Illinois	H		X						9
United Cerebral Palsy	H		X						1
Victor C. Neuman	H		X						1
The Visions	H		X						8
Chicago Dept of Aging	H			X					
Leydon Family Services	H			X					
South Suburban Senior Services of Catholic Charities	H			X					
Southwest Suburban Center for the Aging	H			X					
Thornton Township	H			X					
West Suburban Senior Center	H								
The British Home	H			X					3
Country Club Hills	H			X			No		
Hyde Park Neighborhood Club	H		X	X	X		No		1

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Abbreviations
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DuPage County	Type	General Public	Disabled Persons	Older Adults	Low Income Persons	Other Qualities	Extended Service Hrs	Annual Ridership (1)	Fleet Size
Addison Township Dial-A-Ride	D	X					No	3458	
Village of Bensenville Dial-A-Bus	D	X					Sa		
Bloomingdale Township Dial-A-Ride	D	X					Sa/Su	28,132	
Wayne Township Dial-A-Ride	D	X					No	3,400	
City of Wood Dale Dial-A-Ride	D	X							
Downers Grove Township Dial-A-Ride	D		X	X			No	11,751	
Milton Township Dial-A-Ride	D		X	X			Sa	10,637	
Winfield Township Older Adults and Disabled Bus	D		X	X			Sa		
York Township Senior Transportation Service	D			X			No	1,900	
Naperville/Lisle Partners	R		X	X			24/7	35,412	
Village of Glen Ellyn	R		X	X			24/7		
DuPage County Health Department-	R						24/7		
DuPage County Human Services	R						24/7		
DuPage County Senior Services	R						24/7		
DuPage County Transportation to Work Program	R						24/7		
Addison Township	P		X	X			24/7	N/A	N/A
Village of Burr Ridge	P		X	X			24/7	N/A	N/A
Village of Carol Stream	P		X	X			24/7	N/A	N/A
City of Darien	P		X	X			24/7	N/A	N/A
City of Elmhurst	P		X	X			24/7	N/A	N/A
Village of Glen Ellyn	P		X	X			24/7	N/A	N/A
Lisle Township	P		X	X			24/7	N/A	N/A
Naperville Township	P		X	X			24/7	N/A	N/A

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Abbreviations
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DuPage County	Type	General Public	Disabled Persons	Older Adults	Low Income Persons	Other Qualities	Extended Service Hrs	Annual Ridership (1)	Fleet Size
City of Warrenville	P		X	X			24/7	N/A	N/A
Wayne Township	P		X	X			24/7	N/A	N/A
City of Wheaton	P		X	X			24/7	N/A	N/A
Village of Willowbrook	P		X	X			24/7	N/A	N/A
Village of Woodridge	P		X	X			24/7	N/A	N/A
Village of Downers Grove	MT		X	X			24/7		N/A
Village of Lisle	MT		X	X			No		N/A
Village of Lombard	MT		X	X			24/7		N/A
Villa Park	MT		X	X			No		N/A
Village of Westmont	MT		X	X			24/7		N/A
DuPage County ADA Operations	A		X				Sa/Su/WD	17,249	
DuPage Center For Independent Living	H		X						
Lifelink Corporation	H		X						
Older Adults Rehabilitation Services	H		X	X					
Range of Motion	H		X						9
Ray Graham Association	H		X						18
SASED	H		X						5
Spectrum/Little Friends Inc.	H		X						15

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Kane County	Type	General Public	Disabled Persons	Older Adults	Low Income Persons	Other Qualities	Extended Service Hrs	Annual Ridership (1)	Fleet Size
Batavia Township	D	X					No		1
Northwest Kane County	D	X					No	1,094	1
Aurora Township	D		X	X			Sa		
Dundee Township	D		X	X			No	6,994	
City of Elgin	D		X	X			No	27,771	3
Hampshire/Burlington Township Senior Citizens Van	D		X	X			No		
St. Charles/Geneva Dial-A-Ride	D		X	X			No		
Village of Algonquin Senior Bus Program	D			X			Sa		
Kane County	A		X			Other	Sa/WD	22,430	
Easter Seals Jayne Shover Center	H		X						
Veterans Administration Commission	H					Other			

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Lake County	Type	General Public	Disabled Persons	Older Adults	Low Income Persons	Other Qualities	Extended Service Hrs	Annual Ridership (1)	Fleet Size
North Lake Expansion DAR	D	X					No	829	
Vernon Township DAR	D	X					No	3,496	
Central Lake County DAR	D		X	X			No	7,765	
Ela Township DAR	D		X	X			No	10,154	
Fremont Township DAR	D		X	X			No	1,053	
Lake Forest / Lake Bluff Senior	D/T		X	X			No		2
Center DAR and Taxi Subsidy Program	D		X	X					
Moraine Township Door-to-Door	D		X	X			No		1
Northeast Lake / Warren Twp. DAR	D		X	X			No	10,384	
Northwest Lake DAR	D		X	X			No	20,642	
Southwest Lake DAR	D		X	X			No	2,677*	
Special Recreation Services of Northern Lake County	D		X	X		Program	Varies		
Wauconda Township Senior Bus	D			X			No		
Waukegan Township DAR	D			X			No		
Fox Lake and Grant Township Taxi Subsidy Program	T		X	X			No	1,114	
West Deerfield Twp Hospital Taxi Subsidy Program	T		X	X		Highland Park Hospital patients	No		N/A
North Lake County Operations	A		X				Sa/Su/WD	59,612*	
Southeast Lake County Operations	A		X				Sa/WD		
Center for Enriched Living	H		X				Varies		1
Lake County CIL	H		X				Varies		1
Lamb's Farm	H		X				Varies		1

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Lake County	Type	General Public	Disabled Persons	Older Adults	Low Income Persons	Other Qualities	Extended Service Hrs	Annual Ridership (1)	Fleet Size
Northpointe Resources, Inc.	H		X				Varies		5
Warren Special Recreation Association	H		X				Varies	1,000*	2
Catholic Charities Senior Services	H			X			No	4,233	
ElderCARE at Christ Church	H			X			No	2,250*	62
Lake County WIB	H				X				

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McHenry County	Type	General Public	Disabled Persons	Older Adults	Low Income Persons	Other Qualities	Extended Service Hrs	Annual Ridership (1)	Fleet Size
City of Crystal Lake DAR	D	X					Sa	50,106	
East McHenry County DAR	D	X					No	5,437	
East McHenry County- Intercity Midday Services	D	X					No	19,173	
City of Harvard DAR	D	X					No	6,500*	
Marengo/Riley Township DAR	D	X					No	2,198	1
City of McHenry DAR	D	X					Sa	30,498	
City of Woodstock DAR	D	X					Sa/Su	35,971	4
Village of Lake-in-the-Hills	D		X	X			No	1,204	
McHenry Township DAR	D		X	X			No	6,500	3
McHenry County ADA Paratransit Operation	A		X				No	107	
Family Service & Community Mental Health Ctr.	H		X				No	~6-7,000	
Horizons for the Blind	H		X						1
McHenry County Mental Health Board	H		X				Varies		
Northern Illinois Special Recreation District	H		X			Program	Varies		6
Family Alliance	H/T			X			No	12,000	
Senior Services	H			X			24/7	1,869	1
McHenry County Housing Authority	H				X				
McHenry County PADS	H				X		Sa/WD	3,200	
Centegra Health System	H					Patients	No	7,000	4
Veterans Assistance Commission	H					Veterans	No	2,594	3
McHenry County Workforce Investment Board	T				X		N/A	N/A	N/A

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Will County	Type	General Public	Disabled Persons	Older Adults	Low Income Persons	Other Qualities	Extended Service Hrs	Annual Ridership (1)	Fleet Size
Frankfort Township DAR	D	X					No	11,194	6
Southwest Will DAR	D	X					No	545	2
University Park DAR	D	X						25	
Central Will DAR	D		X	X			No	48,843	8
DuPage Township DAR	D		X	X			No	12,154	3
Eastern Will County DAR	D		X	X			No	32,000	7
Will County ADA Paratransit	A		X				Sa/WD	10,926	
Cornerstone Services	H		X				24/7	323,460	49
Individual Advocacy Group	H		X				Varies		
Trinity Services	H		X						115
United Cerebral Palsy of Will County	H		X						1

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Regional/Multi-County Service	Counties Served	Type	General Public	Disabled Persons	Older Adults	Low Income Persons	Other Qualities	Extended Service Hrs	Annual Ridership (1)	Fleet Size
Advocate Good Shepherd Hospital	Most of Lake, SE McHenry, Cook (Barrington)	H					Hospital patients	No	~3,000	
American Cancer Society- Fox Valley	Kane, Kendall, and McHenry; also LaSalle and DeKalb	H					Cancer patients	No		
Association for Individual Development	Suburban Cook, DuPage Kane, Kendall	H		X				Sa/Su/WD	156,756	43
Council of Jewish Elderly	Cook and Lake	H			X			No	66,937	19
Countryside Association for People with Disabilities	Northern Cook and Lake	H		X				No		
Escorted Transportation Services Northwest	NW Cook and portions of Southern Lake	H			X			Sa/WD		
Faith in Action	McHenry County, portions of Lake and Kane	H						Sa/Su	550	
For Seniors Only	Cook and Lake	H			X			Sa/WD		
Fox Valley Older Adults Services	DeKalb and NE Kendall	H			X			No	20,000	6
Helping Hand Rehab Center	Western Cook and Eastern DuPage	H		X				No		10
Home of the Sparrow	Cook, DuPage, Lake, McHenry, Will	H/T				X		24/7	7,930	
Medicaid NEMT	All seven counties	H				X	Medicaid recipients		252,000	
Open Door Rehabilitation Center	DeKalb and parts of northwest Kendall and southwest Kane Counties	H		X			Program			
Pioneer Center	All counties in region	H		X			Program	No	60,000	18

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Appendix C - Eligible Projects under Section 5316 JARC and 5317 New Freedom Programs

Section 5316 JARC

Eligible projects under JARC may include, but are not limited to:

- late-night and weekend service;
- guaranteed ride home service;
- shuttle service;
- expanding fixed-route mass transit routes;
- demand-responsive van service;
- ridesharing and carpooling activities;
- transit-related aspects of bicycling (such as adding bicycle racks to vehicles to support individuals that bicycle a portion of their commute or providing bicycle storage at transit stations);
- local car loan programs that assist individuals in purchasing and maintaining vehicles for shared rides;
- promotion, through marketing efforts, of the:
  - use of transit by workers with nontraditional work schedules;
  - use of transit voucher programs by appropriate agencies for welfare recipients and other low-income individuals;
  - development of employer-provided transportation such as shuttles, ridesharing, carpooling; or
  - use of transit pass programs and benefits under Section 132 of the Internal Revenue Code of 1986.
- supporting the administration and expenses related to voucher programs;[4]

[4] This activity is intended to supplement existing transportation services by expanding the number of providers available or the number of passengers receiving transportation services. Vouchers can be used as an administrative mechanism for payment to providers of alternative transportation services. The JARC program can provide vouchers to low-income individuals to purchase rides, including (1) mileage reimbursement as part of a volunteer driver program, (2) a taxi trip, or (3) trips provided by a human service agency. Transit passes for use on fixed-route or Americans with Disabilities Act of 1990 (ADA) complementary paratransit service are not eligible. Vouchers are treated as an operational expense which requires a 50/50 (Federal/local) match.

- acquiring Geographic Information System (GIS) tools;
- implementing Intelligent Transportation Systems (ITS), including customer trip information technology;
- integrating automated regional public transit and human service transportation information, scheduling and dispatch functions;
- deploying vehicle position-monitoring systems;
- subsidizing the costs associated with adding reverse commute bus, train, carpool van routes or service from urbanized areas and nonurbanized areas to suburban work places;
- subsidizing the purchase or lease by a non-profit organization or public agency of a van or bus dedicated to shuttling employees from their residences to a suburban workplace;
- supporting new mobility management and coordination programs among public transportation providers and other human service agencies providing transportation. Mobility management activities may include:[5]
  - the promotion, enhancement, and facilitation of access to transportation services, including the integration and coordination of services for individuals with disabilities, older adults, and low-income individuals;
  - support for short-term management activities to plan and implement coordinated services;
  - the support of state and local coordination policy bodies and councils;
  - the operation of transportation brokerages to coordinate providers, funding agencies and customers;
  - the provision of coordination services, including employer-oriented Transportation Management Organizations' and Human Service Organizations' customer-oriented travel navigator systems and neighborhood travel coordination activities such as coordinating individualized travel training and trip planning activities for customers;
  - the development and operation of one-stop transportation traveler call centers to coordinate transportation information on all travel modes and to manage eligibility requirements and arrangements for customers among supporting programs; and
  - operational planning for the acquisition of intelligent transportation technologies to help plan and operate coordinated systems inclusive of Geographic Information Systems (GIS) mapping, Global Positioning System technology, coordinated vehicle scheduling, dispatching and monitoring technologies as well as technologies to track costs and billing in a coordinated system and single smart customer payment systems (acquisition of technology is also eligible as a stand alone capital expense).

[5] SAFETEA-LU specified that mobility management expenses are eligible under all FTA grant programs as a capital cost (e.g., 80 percent Federal participation). Mobility management techniques may enhance transportation access for populations beyond those served by one agency or organization within a community. For example, a non-profit agency could receive JARC funding to support the administrative costs of sharing services it provides to its own clientele with other low-income individuals and coordinate usage of vehicles with other non-profits, but not the operating costs of the service. Mobility management is intended to build coordination among existing public transportation providers and other transportation service providers with the result of expanding the availability of service.

- otherwise facilitating the provision of public transportation services to suburban employment opportunities.

The labor protection provisions of Section 5333(b) apply to the JARC program.

Section 5317 New Freedom

Examples of the types of eligible service include, but are not limited to:

- **New Public Transportation Services Beyond the ADA.**
  - Enhancing paratransit beyond minimum requirements of the ADA. ADA complementary paratransit services can be eligible under New Freedom in several ways as long as the services provided meet the definition of "new." Eligible projects may include:
    - expansion of paratransit service parameters beyond the ¾-mile required by the ADA;
    - expansion of current hours of operation for ADA paratransit services that are beyond those provided on the fixed-route services;
    - the incremental cost of providing same day service;
    - the incremental cost of making door-to-door service available to all eligible ADA paratransit riders, but not as a reasonable modification for individual riders in an otherwise curb-to-curb system;
    - enhancement of the level of service by providing escorts or assisting riders through the door of their destination;
    - acquisition of vehicles and equipment designed to accommodate mobility aids that exceed the dimensions and weight ratings established for common wheelchairs under the ADA and labor costs of aides to help drivers assist passengers with over-sized wheelchairs;[6] and
    - installation of additional securement locations in public buses beyond what is required by the ADA.
  - Feeder services. New "feeder" service to commuter rail, commuter bus, intercity rail, and intercity bus stations, for which complementary paratransit service is not required under the ADA.
  - Making accessibility improvements to transit and intermodal stations not designated as key stations. Improvements for accessibility at existing transportation facilities that are not designated as key stations established under 49 CFR 37.47, 37.51, or 37.53, and that are not required under 49 CFR 37.43 as part of an alteration or renovation to an existing station, so long as the projects are clearly intended to remove barriers that would otherwise have remained. New Freedom funds are eligible to be used for new accessibility enhancements that remove barriers to individuals with disabilities so they

[6] This concept would permit the acquisition of lifts with a larger capacity, as well as modifications to lifts with a 600 lb design load, and the acquisition of heavier-duty vehicles for paratransit and/or demand-response service.

may access greater portions of public transportation systems, such as fixed-route bus service, commuter rail, light rail and rapid rail. This may include:

- building an accessible path to a bus stop that is currently inaccessible, including curb cuts, sidewalks, accessible pedestrian signals or other accessible features;
- adding an elevator or ramps, detectable warnings, or other accessibility improvements to a non-key station that are not otherwise required under the ADA;
- improving signage, or wayfinding technology; or
- implementation of other technology improvements that enhance accessibility for people with disabilities including Intelligent Transportation Systems (ITS).

- Travel training. New training programs for individual users on awareness, knowledge, and skills of public and alternative transportation options available in their communities. This includes travel instruction and travel training services.

- **New Public Transportation Alternatives Beyond the ADA**. The following activities are examples of projects that are eligible as new public transportation alternatives beyond the ADA:
  - Purchasing vehicles to support new accessible taxi, ride sharing, and/or vanpooling programs. New Freedom funds can be used to purchase and operate accessible vehicles for use in taxi, ridesharing and/or van pool programs. The vehicles must be able to accommodate a passenger who uses a "common wheelchair" as defined under 49 CFR 37.3, at a minimum, while remaining in his/her personal mobility device inside the vehicle, and meeting the same requirements for lifts, ramps and securement systems specified in 49 CFR part 38, subpart B.
  - Supporting the administration and expenses related to new voucher programs for transportation services offered by human service providers. This activity is intended to support and supplement existing transportation services by expanding the number of providers available or the number of passengers receiving transportation services. Only *new* voucher programs or expansion of existing programs are eligible under the New Freedom Program. The New Freedom Program can provide vouchers to individuals with disabilities to purchase rides, including: (a) mileage reimbursement as part of a volunteer driver program; (b) a taxi trip; or (c) trips provided by a human service agency. Transit passes for use on existing fixed-route or ADA complementary paratransit service are not eligible. Vouchers are an operational expense which requires a 50/50 (federal/local) match.
  - Supporting new volunteer driver and aide programs. New volunteer driver programs are eligible and include support for costs associated with the administration, management of driver recruitment, safety, background checks, scheduling, coordination with passengers, and other related support functions, mileage reimbursement, and insurance associated with volunteer driver programs. The costs of new enhancements to increase capacity of existing volunteer driver programs are also eligible. FTA notes that any volunteer program supported by New Freedom must meet the requirements of both "new" and "beyond the ADA."
  - Supporting new mobility management and coordination programs among public transportation providers and other human service agencies providing transportation. Mobility management is an eligible capital cost. Mobility management techniques may

enhance transportation access for populations beyond those served by one agency or organization within a community. Mobility management activities may include:

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

The labor protection provisions of Section 5333(b) do not apply to New Freedom Programs funds.

Regional Transportation Authority
ADA Oversight and Technical Assistance Plan

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Purpose

The Regional Transportation Authority (RTA) ADA Oversight and Technical Assistance Plan (the Plan) describes the RTA's role in providing oversight and technical assistance activities related to ADA compliance for all modes of public transportation within the six-county region. This Plan updates and replaces the 2008 RTA ADA Paratransit Oversight Plan and broadens the scope to include more attention to fixed route accessibility issues rather than to focus solely on ADA Paratransit service.

The primary goals of the Plan are:

1. To ensure that the region's transit system is compliant with U.S. Department of Transportation (DOT) ADA requirements including ADA paratransit, as well as fixed route services and facilities.
2. To promote equity throughout the region with regard to the delivery of accessible fixed route and ADA paratransit services.
3. To maximize the use of accessible fixed route services by people with disabilities and older adults.
4. To ensure cost-effective ADA paratransit service delivery.

The remainder of this document includes relevant background information, a description of the RTA's oversight and technical assistance functions, and the activities designed to ensure the Plan is properly implemented.

Background

The Americans with Disabilities Act of 1990 (ADA) is civil rights legislation designed to ensure equal access to employment, public accommodations, telecommunications and transportation for people with disabilities. The DOT's ADA regulations stipulate that all new vehicles purchased for general public fixed route transit service are to be made accessible to persons with disabilities, and that key and new rail stations are to be made accessible as defined by the regulations.

ADA complementary paratransit service must be provided within a ¾-mile corridor of fixed route bus service and within a ¾-mile radius of "L" rail stations. The ADA definition of fixed route systems includes CTA and Pace buses, and CTA "L" trains that are "operated along a prescribed route according to a fixed schedule." In contrast, ADA complementary paratransit is

not required along commuter bus and commuter rail corridors, as defined in the regulations (e.g., Pace Bus on Shoulder routes or Metra commuter rail).

It is important to note that ADA paratransit is intended to be a "safety net" for individuals with disabilities who cannot use fixed route bus and rail services for some or all of their trips. As such, ADA paratransit services are required by DOT regulations to operate during the same days and hours as the fixed route service available in the area, fares cannot be more than twice the non-discounted fare, along with certain other service criteria that must be met to be compliant with the ADA. A consultant study completed in 2008 and on-going reviews confirm that the service offered by Pace meets the ADA regulatory requirements.

RTA has administered the ADA Paratransit Certification Program since 1993. The current process typically includes an in-person interview and assessment(s) of the applicant's functional ability to independently use fixed route bus and "L" train services. Per the ADA regulations, an eligibility determination must be made within 21 days of receiving a completed application. Applicants may be given full eligibility to use ADA paratransit for all trips, conditional eligibility to use ADA paratransit for some of their trips as determined during the certification process, or denied eligibility for ADA paratransit service.

In 2010, the RTA implemented a mail-in recertification process for certain applicants who have (1) three consecutive unconditional (All Trips), (2) 80 or older at time of their most recent certification for All Trips, (3) severe and profound cognitive or intellectual disability that precludes independent travel or (4) severe and complex medical conditions that require trained assistance/intervention and aren't expected to change/improve significantly.

As required by the ADA, the RTA also administers an appeals process for anyone who is denied eligibility for some or all of their trips.

As noted above, the ADA does not require commuter rail systems to operate complementary paratransit systems. However, Metra does provide what is called P-8 service (short for paragraph 8 of the Jones II Consent Decree). P-8 is a shuttle service from a qualified origin to the next closest accessible station. Metra does this at no additional charge to the passenger and does not require certification of disability status. Reservations may be made any time the day before the ride is needed or with as little as three hours' notice when necessary. Service is operated under an agreement with Pace.

The Plan: RTA Oversight and Technical Assistance Functions

Rosemary Gerty is RTA's General Manager, Regional Accessibility, based in the Planning Department and Market Development Department. She coordinates the ADA-related oversight and technical assistance activities for the RTA and serves as an "in-house consultant" for accessibility-related topics. She also oversees the RTA's ADA paratransit appeals process. She has spent most of her career working with accessibility-related issues for all modes and for more than a decade served as an FTA compliance review team leader and assessor for ADA

paratransit, fixed route stop and route identification announcements, fixed route lift/ramp maintenance and reliability, and key and new rail station reviews.

Oversight

In northeastern Illinois, ADA paratransit service had been operated by both CTA and Pace since 1992. In July 2005, the RTA Act was amended by the Illinois General Assembly to establish that Pace would be responsible for the provision of all ADA paratransit services effective July 1, 2006 and that the RTA would be responsible for the funding, financial review and oversight of all ADA paratransit services that are provided by the RTA or any of the Service Boards. The RTA Act was again amended by the Illinois General Assembly in January 2008. The legislation stipulates the following RTA oversight activities:

- Beginning in 2008, the RTA is to provide its Board with a written determination of the projected annual costs of ADA paratransit services that are required to be provided pursuant to the Americans with Disabilities Act of 1990 and its implementing regulations.
- The RTA is to conduct triennial financial, compliance, and performance audits of ADA paratransit services to assist in the determination (these reviews are separate from the Federal Transit Administration's (FTA's) Triennial Review process).

Additionally, as part of the FTA's Triennial Review process, RTA is required to monitor regional ADA compliance activities in this region as part of its ADA oversight responsibilities. As noted above, the RTA is also responsible for meeting ADA requirements related to ADA paratransit certification and related activities.

Technical Assistance

In addition to oversight, Ms. Gerty provides technical assistance to help the Service Boards and other RTA departments to achieve and maintain compliance with the ADA and promote regional accessibility for all modes of public transit. She is coordinating RTA's "Fixed Route First" initiative to increase the use of fixed route services, particularly by people with disabilities and older adults.

She interacts regularly with RTA staff and the Service Boards to provide technical assistance in support of regional accessibility initiatives. Some examples include development and implementation of the ADA priority seating signage project, providing guidance to the RTA Interagency Signage Project, performing ADA compliance reviews of new rail stations as requested, and serving as a resource on ADA- and accessibility related topics. She also works closely with Pace operations staff responsible for managing the ADA paratransit program.

Oversight and Technical Assistance Activities

RTA's oversight and technical assistance activities related to this Plan include, but are not limited to, the following:

- **ADA Paratransit Data Analysis and Performance Measures** – The RTA Finance and Performance Management Department receives monthly cost and ridership data from Pace, which is included in monthly and quarterly reports to the RTA Board. The RTA Planning and Market Development Department works with the Finance and Performance Management Department to assist with analysis of ADA paratransit performance reporting to monitor cost-effective service delivery.

- **RTA Audit Plan** – The RTA Audit Department works with the Planning and Market Department and Finance and Performance Management Department to identify areas for audit/review as required by the RTA Act. The Five-Year Audit Plan includes a Triennial Audit of the ADA Paratransit Certification Program. The last review was completed in 2012. The next Audit will be conducted in 2015, according to the Audit Plan cycle. Pace also conducts annual financial audits of all of its programs.

- **Annual Budget Process** – The Finance and Performance Management Department manages the annual budget process and works with the Planning and Market Development Department to evaluate Pace's annual business plan and ADA paratransit service budget request.

- **ADA Certification Program and Travel Training Program** – The RTA Customer Service Department administers the ADA Paratransit Certification and Travel Training programs, and maintains monthly operating statistics. As noted elsewhere, these programs provide regular reports to the ADA Coordinating Committee, ADA Transit Access Advisory Committee, and RTA management documenting program statistics and performance measures.

- **ADA Paratransit Certification Program Review** – The Finance and Performance Management Department completed a review of the RTA's ADA Certification Program in 2011. The findings and recommendations have been reviewed and are being implemented, as appropriate. Detailed statistics are maintained and analyzed by the Customer Service Department on a monthly basis.

- **RTA Transit Access Advisory Committee** – The RTA Customer Service Department staffs the RTA Transit Access Advisory Committee (formerly the ADA Advisory Committee), which meets quarterly. Accessibility-related updates and policy-related discussions are provided to this committee.

- **Service Board ADA Advisory Committees** – RTA staff regularly attend the RTA, Pace, and CTA ADA Advisory Committee meetings. Meeting documentation is maintained to track current service-related and customer service quality issues.

- **"Fixed Route First" and Fixed Route Accessibility** – The RTA actively works to promote the development of accessible fixed route services and facilities through on-going technical support and ADA compliance reviews. A Fixed Route First Market Development and Marketing Plan is under development and will be implemented beginning in late 2013.

Structure and Organization

Successful execution of the ADA Oversight and Technical Assistance Plan require a cooperative effort on the part of the RTA and the Service Board, specifically the active participation of the ADA Coordinating Committee and establishment of an ADA Staff Working Group as described below:

- **ADA Coordinating Committee** – The purpose of the executive level ADA Coordinating Committee is to provide oversight and policy direction for the implementation of ADA and paratransit legislation and regulations. The Committee serves as a forum for communication and decision-making on long-term policy matters related to system accessibility for people with disabilities. The Committee includes the executive director/presidents of RTA, CTA, Metra, and Pace, and is chaired by the RTA Executive Director. In addition, each agency is asked to name a board representative interested in accessibility-related issues, and to include other senior staff representation as needed. The Committee typically meets twice a year with a focus on providing oversight and decision-making related to policy-level and budget issues including, for example:

    - Reviewing and recommending annual ADA paratransit operating and capital programs submitted to the RTA for funding.
    - Monitoring ADA compliance for paratransit, fixed route bus, and rail services pursuant to state and USDOT regulations, including FTA Triennial Reviews and mode-specific Federal Transit Administration (FTA) ADA Compliance Reviews.
    - Reviewing and recommending long-range strategic plans for ADA paratransit service.
    - Reviewing and recommending long-term strategies for improving bus and rail accessibility in the region.

- **ADA Staff Working Group** – Through establishment of an ADA Staff Working Group, the RTA and the Service Boards will work cooperatively to ensure the Oversight and Technical Assistance Plan is followed. The Staff Working Group will be chaired by the RTA General Manager, Regional Accessibility and will include core staff from the RTA, CTA, Metra, and Pace who are responsible for ADA / accessibility-related activities. From time-to-time other staff may be invited to participate based on the nature of the topic under discussion. The group will perform the following activities:

    - Meeting as needed but not less than quarterly to support the goals and activities of the ADA Coordinating Committee.

- Providing a staff-level forum for providing technical assistance and implementing accessibility initiatives, as appropriate. Preparing periodic updates of ADA compliance / activities for all modes.
- Analyzing proposed ADA/accessibility-related strategic planning, operating, and budgetary initiatives for all modes and report findings and recommendations to the ADA Coordinating Committee, as needed.

Summary

The intent of this document is to describe the activities undertaken by the RTA to ensure that this region is providing public transit service that both meets the regulatory requirements of the Americans with Disabilities Act as well as promotes development of accessible programs and facilities that are consistent with the spirit of the ADA and the tenets of good customer service and independent travel. Toward that end the RTA will continue to actively provide oversight and technical assistance for ADA paratransit service and will work with the Service Boards to support efforts to increase the development and usability of accessible fixed route services by people with disabilities and older adults.

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Review of the RTA ADA Paratransit Eligibility Certification Program

FINAL REPORT

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Executive Summary

The Regional Transportation Authority (RTA) administers and manages the process used to determine if individuals qualify for ADA paratransit service, which is provided throughout the region by Pace Suburban Bus (Pace). The RTA has administered the process since the implementation of ADA paratransit services in 1993.

A comprehensive review of the RTA's ADA Paratransit Certification Program was conducted by a team of national ADA experts. The main purposes of the review were: (1) to verify and test that the program was thorough and accurate in its determinations, and complied with federal requirements; (2) to document the costs of the current program; (3) to collect best practice information from other large city systems; (4) to provide recommendations for program improvements, particularly for making conditional eligibility and trip-by-trip eligibility decisions; and (5) to develop business case analysis factors to allow RTA to make an informed decision whether to continue to administer the program or transfer the program to Pace.

Overall Findings

Overall, it was found that the RTA's ADA Certification Program is very well designed and administered. Thorough and detailed policies and procedures have been developed, staffs at the RTA and CAU are well trained, and the current policies are implemented consistently. The program is also very well organized. Given the volume of application received and the number of determinations made each year, this organization is vital for ensuring a timely and accurate process and protecting the civil rights of applicants and riders.

In general, the process was also found to be accurate and thorough. First-hand observations and a review of 100 randomly selected determinations did not identify applicants found eligible who should have been denied. In the few cases where there was some question about a decision it was whether an applicant might have been found Conditional rather than All Trip eligible (i.e., able to use fixed route service some of the time under certain conditions rather than eligible for all trips requested).

While the RTA process finds only 1-2% of applicants Not Eligible, it is the opinion of the review team that this is not a sign of laxness in the process, but of direct and indirect screening of applicants at the front end and applicant self-selection out of the process. This screening and self-selection is illustrated in Figure ES.1. On average, about 1,825 individuals call the RTA ADA Eligibility Helpline each month inquiring about ADA paratransit eligibility. Staff discusses and explains eligibility to these callers and 84% are sent application forms (16% decide they are probably not eligible). Of the 1,533 individuals who are sent applications each month, only 1,330 complete the application and call to schedule an in-person interview. This represents "self-selection" out of the process by another 11% of the individuals who initially called to inquire about eligibility.

This self-selection is due in part to the additional understanding of ADA paratransit eligibility that provided by the application material and the information brochures that are included in the packets. Of the 1,330 individuals who schedule in-person interviews each month, about 1,108 keep the appointment and continue in the process. This represents a second "self-selection" out of the process by some individuals. Finally, of the 1,108 individuals who participate in interviews and assessments each month, 1,097 are found to have some level of eligibility. Altogether, there is an active and "self-screening" of about 40% of the individuals who initially inquire about eligibility. *If individuals do pursue eligibility to the end of the process, it appears highly likely that they do in fact have a significant disability or health condition that affects independent travel on the fixed route system.* Data collected from other systems which also report effective up-front screening processes also indicated that only about 1-2% of all applicants who complete the process are found Not Eligible. This is very similar to the rate of Not Eligible determinations made by the RTA.

Figure ES.1 Illustration of Level of Applicant Screening and "Self Selection"

Percent of All Interested Persons/ Applicants Per Month	Number of Interested Persons/ Applicants Per Month		Information/ Activity/Action
100%	**1825** Inquiries About ADA Paratransit Eligibility		
↓	↓	←	RTA Staff Discuss and Explain ADA Paratransit Eligibility
84%	**1,533** Applicants Sent		
73%	**1,330** Interview Appointments Scheduled		
↓	↓	←	Applicants Elect Not To Pursue Eligibility
61%	**1,108** Interviews Conducted		
↓	↓	←	Interviews, Assessments and Follow-Up
60%	**1,097** Applicants Found Eligible -- 80% All Trips -- 18% Conditional -- 2% Temporary		

Another indication that the current process is doing a good job of strictly limiting eligibility to individuals who meet the regulatory criteria is the per capita rate of eligible

riders (0.7% of the total population of the area). As shown in Table ES.1, the Chicago area is slightly below the average rate of registrants per capita when compared to other large city systems. This is an indication that the current RTA process is accurately registering only those who meet the regulatory criteria for ADA paratransit eligibility.

Table ES.1 Total Registrants and Registrants per Capita for Selected Large City Transit Systems

System/ City	Service Area (Sq.Miles)	ADA Paratransit Registrants	Population (millions)	Registrants per Capita (%)	In-Person Assessments?
RTA - Chicago	1,335	45,000	6.8	0.7%	Yes
MTA - Baltimore	1,795	18,000	2.1	0.9%	Yes
MBTA - Boston	729	61,000	2.5	2.4%	No
BCT - Broward Co.	410	14,288	1.8	0.8%	Partial
DART - Dallas	689	10,626	2.4	0.4%	Yes
MTA - Houston	1,285	17,412	2.8	0.6%	Yes
RTC – Las Vegas	280	13,199	2.0	0.6%	Yes
LACMTA - Los Angeles	1,621	77,647	11.6	0.7%	Yes
NJT – New Jersey	3,353	17,760	5.4	0.3%	Yes
MTA - New York City	321	123,027	8.0	1.5%	Yes
SEPTA - Philadelphia	2,200	15,534	3.3	0.5%	Partial (30%)
King County Metro - Seattle	2,134	30,000	1.9	1.6%	Partial (95%)
WMATA - Washington DC	692	20,716	3.3	0.6%	Yes

Sources: National Transit Database; 2009 New York City Paratransit Peer Report; and consultant team interviews

The cost per application received, when compared to other similar systems, was found to be higher than average. However, the cost per determination made was reasonable (see Table ES.2). One major reason for the higher costs per application received is that in-person interviews and assessments are conducted at five separate locations throughout the RTA area. Other systems conduct interviews and assessments from one central location. Transportation costs incurred by the RTA are also high—partly due to the extremely large service area relative to other systems and the distances traveled to and from the Assessment Centers.

Table ES.2 Certification Cost Comparison Per Application and Per Determination

					Program Cost		Transportation Cost	
System	Applications	Determinations	Progam Cost	Trans. Cost	Per Application	Per Determination	Per Application	Per Determination
RTA - Chicago	12,673	13,298	$3,367,000	$1,735,000	$266	$253	$137	$130
King County Metro - Seattle	9,166	5,095	$1,701,000	$391,000	$186	$334	$43	$77
RTC - Las Vegas	5,637	5,515	$748,000	$332,000	$133	$136	$59	$60
SEPTA - Philadelphia	4,362	4,000	$819,000	$64,000	$188	$205	$15	$16
Mean					$169	$225	$39	$51
Median					$186	$205	$43	$60

Notes:

1. Data for RTA-Chicago, RTC-Las Vegas, and SEPTA-Philadelphia is from 2010. Data for King County Metro-Seattle is from 2009. With the same process used in Seattle in 2010, it is expected that unit costs did not change significantly.
2. Numbers between the agencies may contain inconsistencies because they each compile data in different ways. The review team attempted to address these differences and develop as consistent a set of numbers as possible. The numbers provide a high level of comparison of relative costs.

   Las Vegas RTC costs exclude operational costs of the agency, but include contractor facility costs.
   King County costs exclude overhead, technology, software and storage costs;
   SEPTA contract costs include travel training, but exclude operational costs. 30% of SEPTA determinations are based on in-person assessments (in contrast to almost 100% for the other three systems);
   RTA administrative costs include staff and appeals, but exclude operational costs since these are largely excluded from the other systems
3. The number of applications and determinations is almost the same for RTA–Chicago since all applicants who appear for in-person interviews/assessments bring a completed application with them.
4. The number of applications and determinations is almost the same for RTC-Las Vegas since applications are completed at the time applicants come in for in-person interviews and assessments
5. The variation in applications versus determinations in RTA-Chicago, RTC-Las Vegas, and SEPTA-Philadelphia is due to determinations made for applications submitted in the prior reporting year.
6. The number of determinations is significantly smaller than applications in King County Metro-Seattle because applications are first sent to the transit agency for review and screening. Applicants are called and some decide not to pursue the process. Other applicants agree to have in-person interviews/assessments scheduled, but then no-show these appointments and drop-out of the process.
7. Transportation costs are treated separately from program costs because of the large RTA service region resulting in longer distances traveled. In addition, some programs do not do in-person assessments for all applicants, but conduct an interview by phone with follow-up documentation. SEPTA uses this approach.

Given the size of the RTA area, though, it would be a significant inconvenience to applicants to require that they all come to a central location. Transporting applicants to and from a single interview/assessment site would also be more costly.
Another reason for RTA's higher cost is that, in addition to the five interview and assessment sites, there is a central office and staff for reviewing all information collected and making a final determination. In Las Vegas, transit agency staff and contractor staff are co-located. Transit agency staff conducts the initial interview and contractor staff performs assessments as needed. Both staffs then consult on observations made and information collected and a final determination is made. Co-location of transit agency and contractor staff appears to allow for a more streamlined review. In Seattle and Philadelphia, where transit agency staff and contractor staff are also in separate locations, the cost per determination is similar to the RTA costs.

While the RTA's process, which incorporates in-person interviews and assessments, is more costly than in some other cities, the benefits of the RTA's more thorough process seem clear. Most large city transit agencies use an in-person interview and assessment process to determine ADA paratransit eligibility. And, as shown in Table ES.1 above, the percent of the population that has applied for and been determined ADA paratransit eligible ranges from 0.3% to 1.6%. Only one large city system is still known to make eligibility determinations based solely on a paper application – the MBTA in Boston. The result: Boston has over 61,000 individuals certified as ADA paratransit eligible – 2.4 % of the population, which is more than three times the rate in the Chicago area.

Table ES.3 shows the operating costs that might be incurred with higher registration rates if it is assumed that certifying additional individuals as ADA paratransit eligible would result in increased use of the service. Just a 0.1% increase in the registration

Table ES.3. Estimated Registered Riders and Annual ADA Paratransit Operating Costs in the RTA Area For Various ADA Per Capita Registrant Rates.

ADA Registrants Per Capita (%)	Est. Total # of ADA Paratransit Eligible Riders	Est. Annual ADA Paratransit Operating Costs
0.7% (current situation)	45,000	$119,674,702 *(1)*
0.8%	51,400	$136,770,000
0.9%	57,900	$153,900,000
1.0%	64,200	$170,700,000
1.1%	70,700	$188,100,000
1.2% (half of the Boston MBTA rate)	77,100	$205,200,000

(1) Current situation costs are based on reported 2009 NTD operating cost plus certification program cost

rate, from 0.7% to 0.8%, would mean 6,400 additional registered ADA paratransit riders and an increase in operating costs of over $17 million per year. If the RTA were to go back to a paper application process and experience registration rates even half those reported in Boston (1.2%), the result could be an increase to 77,100 registered ADA riders and an operating cost of over $205 million per year. The cost of administering a thorough eligibility determination program is relatively insignificant in comparison.

Recommendations

While the overall RTA ADA Certification Program is effective in ensuring that ADA paratransit service is provided to individuals who qualify under the federal regulatory criteria, and determination results are accurate and thorough, several recommendations are made for further strengthening the process.

Short-Term Recommendations

Recommendations to consider in the short-term include:

Carefully Monitor Application Demand and Determination Capacity: The number of individuals applying for ADA paratransit eligibility in 2010 increased 17.3% over 2009 and 25% over 2007. The number of Certifiers at the RTA has remained unchanged since 2007. The RTA took several actions in 2010, including contracting for temporary staff, to accommodate this increase. Still, Interim Eligibility had to be granted to 706 applicants to meet the federal requirement that service be provided in the interim if determinations are not made in 21 calendar days. Granting Interim Eligibility creates extra administrative work and adds to the cost of the process. It is recommended that the RTA carefully examine opportunities to increase efficiencies in the certification procedures (see recommendations below) as well as ensuring that staffing levels are adequate to meet demand.

Expand Use of Mail-In Recertifications: The RTA typically requires riders to recertify every four years. A simplified Mail-In Recertification is offered to riders whose eligibility is unlikely to change in the future. The Mail-In Recertification process does not require riders to go through additional future in-person interviews or assessments. This simplified process is much less burdensome on riders and much less expensive for the RTA. In 2010, the RTA determined that 1,093 riders who were scheduled for recertification could use the simplified Mail-In process. This was 12% of all riders scheduled for recertification. Other systems reported extending simplified recertification to between 50% and 75% of riders scheduled for recertification. It was estimated that the RTA could save between $160,000 and $430,000 on an annual basis in contractor assessment costs and transportation to and from assessment sites if Mail-In Recertifications were used by between 20% and 40% of those up for recertification. It is recommended that the RTA consider expanding the eligibility criteria for use of this simplified recertification process.

Revise Existing Interview and Assessment Protocols: In 2010, the RTA granted Conditional eligibility to 18% of applicants. Riders who are Conditionally eligible can use fixed route services under certain conditions. While the 18% rate for the RTA is higher than most transit systems, it is somewhat low when compared to other top processes in the country. Four of the five other systems surveyed, all considered to be strong programs, reported conditional determinations ranging from 25% to 30%. The number and percentage of applicants granted Conditional-Variable eligibility also seems high. First-hand observations of interviews also found that the questions used to identify variable disabilities were somewhat general. Specific recommendations are included in the report for changes to interview and assessment protocols that should increase the rate of Conditional eligibility. These recommendations propose revised procedures and protocols to determine the maximum distances that applicants can travel to get to and from bus stops, the gathering of more information about current use of fixed route services, and more accurately assessing variable disability and health conditions.

Simplify the Current Conditions of Eligibility: While the list of types of eligibility granted by the RTA is logical and complete, it is overly structured and complex. This complexity can make the conditions more difficult to understand in an operational context. The types of eligibility granted by other systems studied were also complete, but were presented in a more straightforward, understandable way. It is recommended that the RTA consider simplifying the way that eligibility types are recorded and reported.

Expand Recruitment of Candidates for Travel Training Program: Currently the RTA Travel Training Program serves individuals with disabilities who have applied and been found eligible for ADA Paratransit. If individuals would like to participate in travel training, they must first apply for ADA paratransit services to gain access to the RTA Travel Training Program. This is not necessarily the case in other transit systems, many of which either provide additional training to groups of seniors and others who do not require intensive one on one trainings, or coordinate these trainings with other entities. The RTA should explore the possibility of opening up the travel training program to individuals who are not applying for paratransit eligibility, but could nevertheless benefit from the training.

Increase Integration of Eligibility and Travel Training Programs: The RTA should also explore the benefits of a greater integration between the eligibility screening process and recruitment of travel training candidates. In some other systems, a portion of applicants who participate in functional assessments meet with travel trainers immediately after the assessment to discuss the possibility of participating in travel training. If it appears as though the registrant could benefit from the training, and if the person is interested, the trainer can initiate the process at that time. By including this discussion as an integral part of the assessment, other systems report increased rates of travel training participation. Increased participation in travel training leads to increased ability to use the fixed route system and can therefore reduce reliance on paratransit.

Longer-Term Recommendations

Four longer-term recommendations are also offered for the RTA's consideration. As previously noted, the RTA certification program is overall a highly effective program. The recommendations provided below offer potential ideas to further enhance the program and to help reduce pressure on rising costs as application demand increases. The recommendations should be more fully analyzed to ensure that they represent the proper balance between program efficiency and effectiveness.

Consider Moving to a Paperless Process: With over 135,000 paper files and 13,000 applications per year, the RTA should study the costs and benefits of moving to a paperless process. All documentation provided by applicants could be scanned and all interview and assessment information entered directly into rider files. Doing this will have an initial cost, but may be cost-effective in the long-run. The exact costs and payback period should be studied.

Consider Fewer Assessment Sites: This longer-term recommendation is included primarily as an option for lowering the cost of the Certification Program. The costs associated with the operation of five assessment sites appears to be one of the factors that contributes to the higher than average costs for ADA paratransit eligibility certifications at the RTA.

Given the size of the RTA area, the review does not recommend moving to one, central assessment site. However, it may be possible to have three full-time sites rather than the current arrangement of three full-time and two part-time (one day per week) sites. The sites could include one in the City of Chicago, one to the northwest of the City that could serve City residents on the north side as well as residents in the north and northwestern suburbs, and one southwest of the city to service City residents on the south side as well as those in the suburbs to the south and west.

The costs and benefits of consolidating to three full-time sites would need to be carefully examined and would need to consider:

- The lowered overhead and administrative costs of a smaller number of sites;
- The increased transportation costs for bringing some riders longer distances to assessment sites;
- Public reaction to having fewer sites.

The last point could be a significant issue. Public input received as part of the study indicated that most stakeholders felt that more rather than fewer assessment sites were needed.

Consider Shifting Responsibility for Arranging Appointments and Transportation to the Assessment Contractor: The RTA currently employs staff who schedule appointments and arrange transportation. It may be more efficient and cost-effective to ask the assessment contractor to perform these tasks. Riders would arrange appointments directly with the contractor, rather than having the RTA staff act as a go-

between for this function. It could possibly streamline the handling of transportation issues if the contractor dealt directly with the provider of transportation, rather than resolving issues in conjunction with RTA staff.

Further study of this option would be needed to consider:

- The added administrative and staff costs for the contractor to perform these tasks
- The savings in staff and administrative costs at the RTA
- Reassignment of work tasks within the RTA Certification Program.

The RTA would also have to ensure that the contractor had access to databases needed to enter applicant information collected during the appointment scheduling process.

Consider Creating Standalone, "One-Stop" Transportation Assistance Centers: Finally, the RTA should consider establishing one-stop Transportation Assistance Centers that combine a variety of services for assisting seniors and persons with disabilities with appropriate transportation options. The centers could offer ADA paratransit eligibility determination services, travel training services, reduced fare ID services, and could be coordinated with county agencies to provide information and eligibility services for other county-based transportation programs.

If there were a reasonable number of centers (e.g., the three centers discussed above), the RTA could consider placing Certifiers at each location. The Certifiers could accept and review application forms brought by applicants to the centers. They could also conduct the initial interviews and determine if functional assessments were needed. The contractor staff would then perform any assessments needed. Once any assessments were completed, the RTA and contractor staff could review and share observations and information and arrive at a final determination decision.

Co-locating RTA and contractor staff at these centers could potentially streamline the process. It would also provide Certifiers with first-hand contact with applicants, which should help them with making final determinations. A staffing analysis would need to be conducted to determine the feasibility and benefits of this approach.

In addition to locating Certifiers at the centers, the RTA could consider assigning Travel Training Program staff to work at the centers. Applicants for ADA paratransit eligibility would be provided more immediate access to information about the program. If the function of the centers was expanded to include services other than ADA paratransit, it would also give Travel Training Program staff access to more individuals who may benefit from these services. It could also build relationships with other agencies and programs that might locate their transportation information and eligibility services at the centers.

Establishing three standalone Transportation Assistance Centers might also fit well with paratransit service redesign and call center plans being considered by Pace. One of the options being considered by Pace, as part of a concurrent study of paratransit

service design, is the creation of three paratransit subregions and the establishment of central call centers in each subregion. While the Transportation Assistance Centers would not necessarily be co-located with the call centers, they could be located to serve the subregions that might be created.

Expanding ADA paratransit eligibility determination assessment sites to become more holistic Travel Assistance Centers is the latest trend in eligibility determination in the industry. Tri-Met in Portland, Oregon and Valley Metro in Phoenix are two of the large transit systems that have decided to take this approach. This approach would also be consistent with the concept of "mobility management," which is being broadly pursued across the country.

Additional study and analysis would be needed if the RTA chose to move in this direction. Some of the issues that would need to be considered would include:

- What functions and staff would need to be maintained centrally and what functions and staff could be at the standalone centers?
- How would records and data be centralized? Would the development of a paperless process be needed?
- What other county-based, local or state services might be provided at the centers and are the agencies responsible for these programs interested in a coordinated approach?
- What would be the additional costs of creating more extensive, coordinated centers and what funding might be available to support this option?

Business Case Analysis

Finally, the review developed a detailed business case analysis framework to assist the RTA in determining whether the ADA Paratransit Certification Program should remain at the RTA or be relocated to Pace. Several key decision factors are identified and data for each is presented. The factors include:

- **External Issues** (External Stakeholder Input, Potential Risks of Transfer)
- **Organizational Issues** (Compatible with Agency Mission, Consistent with Agency Philosophy, Consistent with Function of Agency, Suitable with the Organizational Structure, Organizational Synergies)
- **Process Issues** (Effectiveness of Implementing Trip-by-Trip Eligibility and Fixed Route Usage, Ease of Program Modifications, Efficiency of Data Transfer, Location of the Eligibility Review Board, Thoroughness and Accuracy of Eligibility Determination)
- **Costs** (One-Time Transfer Costs, Incremental Costs of Eligibility Function)

A decision matrix summarizing information and data for all of these factors is provided to assist the RTA in making an informed decision about the location of the program.

1 Introduction

This report presents the findings and recommendations of a review of the Chicago Regional Transportation Authority's (RTA) ADA Paratransit Certification Program. The review was conducted for the RTA by a consulting team made up of national ADA paratransit experts from TranSystems Corp., Nelson\Nygaard Consulting Associates, Inc., and Fish Transportation Group. The main purposes of the review were to:

1. verify and test that the program was thorough and accurate in its determinations, and complied with federal requirements
2. document the costs of the current program
3. collect best practice information from other large city systems
4. provide recommendations for program improvements, particularly for making conditional eligibility and trip-by-trip eligibility decisions
5. develop business case analysis factors to allow RTA to make an informed decision whether to continue to administer the program or transfer the program to Pace.

The first part of the review involved a complete analysis and assessment of the current ADA Paratransit Certification Program. Public information and application materials were collected and reviewed. The staffing and organization of the program were analyzed. All aspects of the process, including primary as well as ancillary functions and processes, were documented and a detailed work flow chart was prepared. Process outcomes, and the types of eligibility granted were also documented.

The second part of the review focused on the costs of the program. All in-house, as well as contractor costs, were identified. The cost of transporting applicants to and from interviews and assessments was also identified. Physical assets used by the RTA and contractors to manage and conduct the process were also cataloged.

Information about eligibility determination processes used by other large transit agencies was also collected. To provide a useful comparison and to identify other practices that might be applicable to the RTA program, information was collected from other large city systems that use thorough, in-person eligibility determination processes—similar to the process used by the RTA.

Using the information collected on the RTA program as well as other programs, the review then considered the strengths and weaknesses of the current program and developed recommendations for improved performance. The review also answered 11 specific questions raised by the RTA. These were:

1. Is the current program in compliance with ADA and RTA rules and regulations?
2. For each regulatory or RTA requirement, does the current Program meet, not meet, or exceed the requirement?
3. Are current interview/assessment sites accessible, appropriate, and are the locations convenient to applicants?

4. Are current assessment tools appropriate and relevant to the functional ability to use fixed route service in the RTA area?
5. Are interview/assessment center staff adequately qualified and trained?
6. Are policies, procedures and contract provisions for the scheduling of interviews/assessments and policies regarding applicants who do not appear for scheduled appointments appropriate and in compliance with ADA regulations?
7. Are recertification policies and procedures, including criteria and factors utilized to determine recertification intervals, appropriate and in compliance with ADA regulations?
8. Are decisions to proceed with physical/cognitive assessments complete, appropriate and timely?
9. Is there a disconnect between the type of eligibility granted and its associated criteria?
10. Is it realistic to screen for trip eligibility and to enforce decisions about trip eligibility when scheduling the delivery of service?
11. Can certain conditional eligibility criteria be developed that are more cost effective to use in the actual delivery of service?

Finally, the review considered whether the program should be housed at the RTA or at Pace Suburban Bus (Pace), the service board responsible for providing ADA paratransit service in the RTA region.

This Draft Final Report summarizes the work, findings and recommendations of the review. Sections 2 through 6 provide background information about the RTA ADA Paratransit Certification Program. Section 2 provides an overview of how the current program works. Section 3 provides information about the types of eligibility granted, and key process statistics and outcomes--including an estimate of the number of future applications that can be expected. Section 4 then provides information about current staffing and workflow. Section 5 provides information about the costs of the program and the major assets of the RTA used in conducting program activities. And Section 6 provides first-hand observations of the program by the TranSystems review team.

Section 7 then provides information about the ADA certification programs at selected other large city transit systems. The processes used at these systems are described, the outcomes of the processes are detailed (number of registered riders, determination outcomes), program costs are identified, and efforts to implement conditional (trip-by-trip) eligibility are described.

Section 8 then provides a summary of findings and recommendations. This section first provides review team opinions of the compliance of the current program with federal ADA regulations associated with making ADA paratransit determinations. The section then provides answers to the key questions of particular interest to the RTA and Pace (noted above). Short and long-term recommendations for possible program enhancements and improvements are then provided.

Finally, Section 9 addresses the question of whether the program should remain at the RTA or be relocated to Pace. A "business case analysis" is conducted. Important and relevant decision factors are first identified and described. The factors are then used to analyze the advantages and disadvantages of each option. A decision-matrix, summarizing the factors and the analysis is then provided. The decision-matrix is intended to provide the RTA with all of the relevant information needed to make an informed decision about the future location of the program.

2 Overview of the Current Program

This section provides an overview of the current RTA ADA Paratransit certification program.[1] The process used to accept and process applications is described. Information about RTA staff and contractors involved in the current process is provided. Process flow charts that indicate work flow throughout the process are included. Eligibility determination outcomes and information about the number of individuals who have been certified as ADA paratransit eligible are provided. The costs of the current program, and assets used to operate and manage the program, are detailed.

2.1 Description of the ADA Paratransit Eligibility Determination Process

Initial Contact, Application Form, and Scheduling of Appointments

The RTA informs the public about ADA Paratransit Eligibility and about how to apply in several ways. A brochure titled "Applying for ADA Paratransit Service" is available and is widely distributed throughout the community. The brochure is available in standard print, large print, audio tape, Braille, and Spanish. Information about eligibility and the process for applying is also available online at www.rtachicago.com. Information is also available by calling 312-663-HELP (4357), or TTY: 312-913-3122 weekdays from 8:30 a.m. to 5:00 p.m. These numbers are widely advertised in RTA public information materials.

Individuals interested in applying for ADA Paratransit Eligibility are directed by RTA public information to call the RTA's ADA Paratransit Certification Office (the ADA Paratransit Helpline) to request an ADA Paratransit Application form or with general questions about the process. Helpline agents explain ADA paratransit service and the criteria for eligibility. Early in the conversation, they ask "Do you have a disability that prevents you from using the fixed route trains and buses?" If callers are unsure or ask for additional information, they explain that ADA paratransit service is for individuals with disabilities who, because of their disability or health condition, are not able to use CTA trains or regular CTA or Pace city buses.

Helpline agents consider whether the caller is from the City of Chicago or from a suburban community. If callers are from the suburbs, the agents explain that ADA paratransit service is only provided to and from places that are within ¾ of a mile of fixed bus routes. They tell callers to contact Pace (and provide a telephone number) if they are not sure if the place they live or places they travel to are within ¾ mile of a bus route. The Pace Customer Relations phone number is provided. This additional

[1] For more detailed information on the current process, see Technical Memorandum #1, "Review of the Current Process."

explanation is not provided if callers give an address within the City of Chicago. It is assumed that all addresses within the City are in the ADA paratransit service area.

If callers indicate they would like to pursue eligibility, they are sent a packet of material that includes an application form as well as a brochure titled "Applying for ADA Paratransit Service." The brochure contains a description of "Public Transportation Services for Customers with Disabilities." It notes that all buses are equipped with lifts, kneelers, or ramps, that "L" train stations are being made accessible, that drivers call out stops, and that priority seating is available. It mentions the State of Illinois Circuit Breaker program, People with Disabilities Ride Free Program, and that seniors can ride fixed route free, and it encourages seniors and persons with disabilities to use the fixed route system.

The brochure then provides a description of the ADA Paratransit Service and summarizes key service policies (area, hours, advance reservation requirement, fares, etc.). It provides answers to several "Frequently Asked Questions," including who is eligible (the federal criteria are noted), what types of eligibility are granted (the difference between unconditional and conditional eligibility is explained), and service in the suburbs or where there are no fixed route buses (it notes that service is not provided in areas that are more than ¾ of a mile of fixed route buses or L trains).

The ADA Paratransit Application form is eight pages long. It is designed to gather general information about the applicant and initial functional ability information. More detailed functional ability information is then gathered in the interview and functional assessment portions of the process.

It is important to note that the application form does not require individuals to get and submit information from professionals verifying their disability or health condition. While this is a common part of many applications, there was strong sentiment in the RTA area when the ADA eligibility process was first developed in the early 1990s against a process that relied too heavily on information from medical professionals. This sentiment continued when the process was revised in the late 1990s and the current process was developed.

Current riders are sent a letter and application material two months prior to the date that their eligibility is scheduled to expire. They are instructed to complete the application, and then call for an interview appointment. They are reminded to leave adequate time for the process to be completed.

In most cases, once applicants have received and completed the ADA Paratransit Application form, they call the RTA Certification Office to schedule an in-person interview. When they call and follow the phone options, they are directed to one of the RTA's Screening Clerks. Depending on the needs of applicants, Screening Clerks schedule an appropriate appointment time. Screening Clerks enter information about interviews that are scheduled into the Interview Scheduling Page of the computer program developed by the RTA to manage the process.

Applicants who are recertifying and whose eligibility is not scheduled to expire for some time are scheduled approximately one month prior to the expiration date. This reserves times for applicants with more immediate needs (new applicants or those seeking recertification whose eligibility is close to expiring).

Once interviews have been scheduled, key information is repeated back and confirmed with applicants. Screening Clerks then inquire if transportation is needed to the interview site. The RTA has an Intergovernmental Agreement (IGA) with Pace for the provision of transportation to and from interview/assessment sites. Pace handles these trip requests separate from the ADA paratransit service that it provides in the region. Applicants are generally not transported together with ADA paratransit riders. When appropriate, taxis are used to transport City of Chicago applicants going to Chicago sites.

If applicants indicate that transportation is needed, Screening Clerks enter information needed to schedule the trips into the Trip Scheduling Page of the RTA's eligibility computer program.

Once trip information is entered, Screening Clerks repeat back and verify key trip scheduling information. They then provide applicants with important information to prepare them for their appointments. This includes:

- Letting them know they will get a confirmation letter;
- Letting them know that Pace will provide transportation (if applicable) free of charge and will call them the day before the appointment with a scheduled pickup time;
- Asking if oxygen is used and, if so, instructing them to bring at least a four hour supply;
- Reminding them to bring completed application forms to the interview;
- Reminding them to bring a photo ID to the interview;
- Letting them know that they can bring statements from health care or other professionals supporting their application if they think this will be helpful;
- Letting them know that the appointment should take about 60 to 90 minutes;
- Informing them that a decision will be made and they will be notified in writing within 21 days following the interview and if a decision has not been made they will be provided transportation on an interim basis until a decision is made.

Appointment confirmation letters are then prepared and sent to applicants. To minimize appointment no-shows, RTA staff also makes reminder calls seven days before appointments if the wait time for the appointment is more than two weeks away. As noted above, Pace also calls the day before appointments with the exact pickup times.

Each day, the Lead Screening Clerk prepares lists of interview appointments for each interview site. She also prepares a list of applicants who have requested transportation for transmittal to Pace. The transportation list is sent to a staff person in Pace's downtown Chicago office who has been designated to coordinate transportation related

to the eligibility process. The appointment lists are sent to the Interview Site Coordinator for distribution to each site.

Once lists have been sent to the Interview Site Coordinator and to Pace, the Lead Screening Clerk coordinates information flow regarding any changes. For example, if an applicant calls and cancels an appointment, she contacts Pace as well as the appropriate site. Or, if an address provided to Pace cannot be geocoded in Pace's paratransit scheduling software, she contacts applicant to double-check the address, obtain cross-street information, or otherwise assist Pace in addressing the scheduling issue.

Interviews and Functional Assessments

The RTA contracts with Community Alternatives Unlimited (CAU), a private non-profit organization that conducts in-person interviews and assessments. CAU was established 30 years ago as a case management agency. It provides various case management services to promote independent living. A primary mission of the agency is to assist seniors and people with disabilities to enable them to remain independent in the community. The agency also provides family case management related to maternal and child health.

Managers at CAU indicated that the interview and assessment service provided to the RTA fit well with their mission and experience. It was noted that they also serve as an agent to the State of Illinois to provide pre-admission screening of individuals for various state services and programs. Managers also noted that they currently work with communities in the RTA area to improve transportation services, which could tie-in with informing applicants for ADA paratransit eligibility of other travel options.

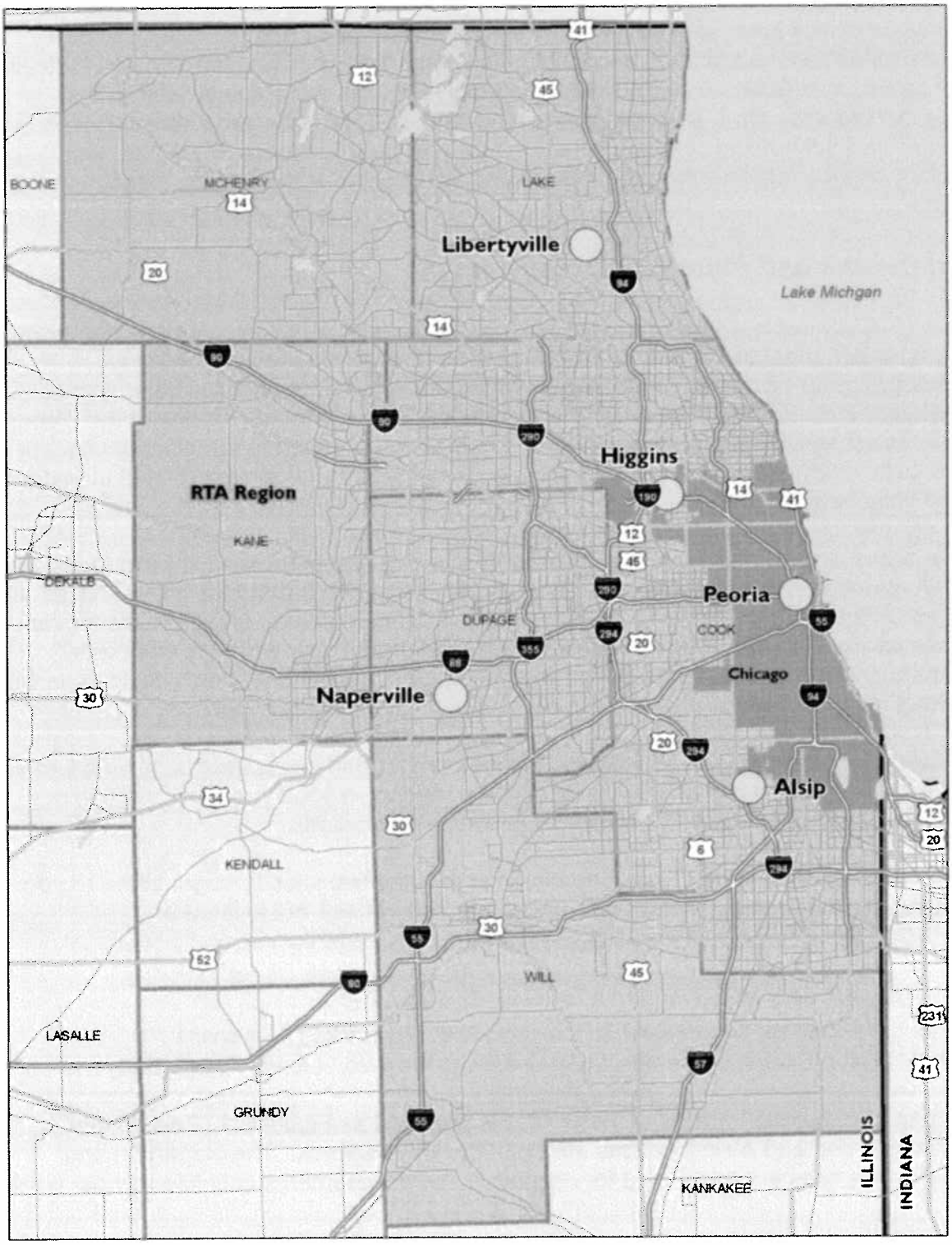
Assessors hired by CAU, who perform the interviews and assessments, have a variety of social service backgrounds. Several have degrees in social work and psychology. Others have education and experience in special education.

With RTA review and approval, CAU has established five sites throughout the region where interviews and assessments are conducted. These are located at:

- O'Hare Plaza, 8765 W. Higgins, Chicago ("Higgins")
- Peoria Place, 310 S. Peoria Street, Chicago ("Peoria Street")
- Creek Side Plaza, 12270 S. Pulaski, Alsip ("Alsip")
- Washington Corners, 47 E. Chicago Ave. Naperville ("Naperville")
- Hilltop Executive Center, 1580 S. Milwaukee Ave., Libertyville ("Libertyville")

A map showing the location of these sites is provided as Figure 2.1. The Higgins, Peoria Street, and Alsip locations are open five days a week. The Naperville and Libertyville sites are each used for interviews and assessments only one day per week.

Figure 2.1 Map of Interview and Assessment Sites



When applicants arrive at one of these sites, they are greeted by CAU staff and are directed to a waiting area. The waiting areas at each site are equipped to show a video about accessible fixed route services, paratransit services, and travel training services that was created by the RTA. The video, which runs on a continuous loop, is intended to make applicants aware of fixed route bus and train accessibility improvements and the flexible travel opportunities provided by these services.

All applicants participate in an in-person interview conducted by a CAU Assessor. Prior to interviews, applicants are photographed and the photos are attached to their files for later use in making ID card if they are determined eligible.

Assessors review the information contained in the application forms completed by applicants. They explain the interview and assessment process to applicants and then conduct the interview. A standard Interview Guide has been developed by the RTA to help ensure that certain information is collected from all applicants and to ensure consistency in the information collected.

Assessors also make general observations about abilities noted during interviews. This might include issues with walking to and from the interview, ability to understand and answer questions independently, distractibility or other behavioral issues, etc.

If appropriate and potentially helpful, Assessors also explain the possible benefits of travel training and explore interest in travel training.

Finally, Assessors review information about most frequent trips provided in the application form and confirm that the information is complete and accurate.

For applicants whose primary disability is related to vision, the RTA and CAU have developed a Supplemental Interview Guide to specifically address travel issues typically experienced by these individuals. Assessors use this guide to get more information on type and extent of vision loss, and functional abilities specific to riders with vision disabilities (area of travel familiarity, street crossing abilities, environmental issues such as low light and glare, etc.).

At the time of the review, the RTA and CAU were also working on a supplemental interview guide for applicants with psychiatric disabilities.

Once interviews are completed, Assessors determine if one or more functional assessments would be useful and appropriate. If the interview provides adequate information to make a thorough and accurate decision, the applicant is thanked for their cooperation and escorted back to the waiting area for their ride home. If Assessors feel that more information is needed, one or more of the following functional assessments is performed:

Physical Functional Assessment – Assessors observe applicants as they walk along a prescribed route and navigate potential path-of-travel barriers. At each site there is both an indoor route and an outdoor route. The outdoor route is used whenever appropriate. The indoor route is used in times of extreme weather.

While still in the assessment center, Assessors first ask applicants to get on and off a bus lift that has been placed at the center. Applicants also are asked to step up and down a mock-up of a curbed sidewalk. The typical outdoor course is set up to include additional curbs and curb-cuts, street crossings, and uneven terrain. The outdoor course is measured to permit Assessors to walk with applicants up to half a mile (2,640 feet). If applicants are unable to walk the full distance, their maximum walking distance and the time it took for them to travel this distance is noted. Assessors look for and note changes in walking speed, changes in gait, and signs of shortness of breath, discomfort or distress. These observations are used to limit the assessments when appropriate and are then noted on the assessment forms. If applicants are able to walk a full 2,640 feet in 32 minutes without signs of distress (a goal established by the RTA based on national guidelines), distance is not then considered a limiting factor. Assessors also observe applicants crossing streets and measure the time it takes them to cross a 60 foot wide street. The goal associated with this portion of the assessment is 20 seconds (again based on national guidance).

Throughout the assessment, Assessors observe gait and balance. Using several specific measures taken from a widely used test (the Tinetti Gait and Balance Test), Assessors score overall gait and balance.

Cognitive Functional Assessment (FACTS) – If the application and interview information indicate a cognitive disability, specifically an intellectual disability, applicants are asked to participate in a cognitive assessment. The RTA uses the Functional Assessment of Cognitive Transit Skills (FACTS) for these assessments. This tool was developed by Easter Seals Project ACTION for FTA and is considered the only tool that has been validated specifically to test cognitive abilities to use fixed route transit services. The test was validated for individuals with intellectual disabilities (formerly called mental retardation). The test simulates a simple (one vehicle) trip and a more complex trip that involves a transfer. It also tests community safety skills. A detailed score sheet captures results throughout the test and a total score is developed. The testing instructions then provide guidance on likely abilities for various score ranges.

Mini-Mental State Exam (MMSE) – If the application and interview information indicate potential issues with memory (e.g. dementia or traumatic brain injury (TBI)), applicants are asked to complete a Mini Mental State Exam (MMSE). The MMSE is a longstanding tool used to determine mental awareness and memory loss. It is commonly administered following accidents, strokes, and head injuries. It involves answering several questions such as the date, city, and current location, and performing tasks such as counting backward by sevens starting at 100, and copying a geometric design. The testing instructions then include score ranges that suggest good, fair, or poor mental awareness and memory.

RTA Review and Determination

CAU staff enters all information from the application form received from applicants into the RTA's certification database. Information gathered during the interview and assessments are recorded on the appropriate paper forms (not entered directly into the database).

Within one business day, CAU sends the RTA complete files for all applicants seen. The files include the original application form, completed interview forms, any assessment forms that were completed, and any supplemental documentation including a copy of a photo ID card and a photo for the ADA Paratransit ID card. When files are received at the RTA, they are distributed to the Screening Clerks. The Screening Clerks prepare an applicant file by assessment site and date. Any past applications and determinations are pulled from the file room (by the Clerk who manages all files). If applicants are already in the system and are applying for recertification or reapplying, the new application is simply made a part of the current file. New files are created for new applicants and a unique ID number is assigned. The ID numbers are generated by the Certification Database when applications are marked as complete by CAU staff. The Office Specialist properly labels the file with the applicant's name and ID number. Once properly assembled and labeled, the files are given to the ADA Certification Coordinator. The Coordinator then assigns sets of files to each Certifier for review. Files from each of the five CAU sites are distributed among the Certifiers so that all work with files from all of the sites.

The Certifiers review all the information in the record. As needed, they can contact the CAU Assessor who performed the interview and/or assessments for clarification. They can also contact one of the professionals identified by applicants in the application form for additional information or verification of disability, if needed. When named professionals are contacted, Certifiers typically fax a copy of the Release of Information form signed by applicants so that professionals can provide the information. Certifiers document any additional information obtained.

Based on the information in the file and any follow-up information collected, Certifiers then make a determination of eligibility. In particularly difficult cases, the Certifier assigned the file will seek input from one of the other Certifiers or from a Supervisor.

Making determinations includes drafting the language that will go in each letter. Standardized letters are used for applicants with All Trips eligibility. For determinations that find applicants conditionally eligible or eligible on a temporary basis, this means drafting detailed language explaining the reasons for the decision and making it clear when applicants will be able to call and request ADA paratransit rides. For determinations that find applicants not eligible, this means drafting specific language explaining the reasons for the decision. This detailed explanation is required by the U.S. Department of Transportation (DOT) ADA regulations.

Files with Certifier determinations are then forwarded to the Office Specialist. For All Trips determinations, the Office Specialist uses letter templates in the system to prepare the final letters to applicants. For other eligibility determinations, specific language drafted by the Certifiers is inserted into the appropriate letter template before the file is given to the Office Specialist. Templates have been prepared for various types of conditional eligibility, temporary eligibility, and for Not Eligible determinations. Alternate formats are produced if requested by an applicant.

The Office Specialist also coordinates the production of photo IDs for individuals determined eligible. She takes photos from the applicant files and forwards them to Screen Check NA, the contractor used by the RTA for ADA paratransit ID cards as well as ID cards for several other RTA programs. The photo is sent along with applicant information that needs to go on the ID card and name and mailing address information for the applicants. Screen Check NA produces the ID cards and mails them directly to applicants. Letters of determinations sent to applicants inform them that their ID cards will arrive in seven to 10 days.

Recertification Requirements

ADA paratransit eligibility is typically extended to applicants for a period of four years. This applies to most riders determined All Trips eligible or Conditionally eligible. Individuals granted Temporary eligibility are given shorter periods of eligibility, appropriate to the expected duration of their temporary disability or health condition. Individuals receiving treatment that could affect their functional ability in the short-term, or who are being referred to the RTA's Travel Training Program, might also be given a shorter period of eligibility appropriate to the period of treatment or training.

RTA staff regularly prepares reports listing riders whose four-year eligibility is scheduled to expire. Two months before the scheduled expiration, all currently eligible riders are sent a letter reminding them that they need to reapply if they want to continue to use the service. Application forms, in formats appropriate to each rider's information needs, are sent with the letters. The same process used to make initial determinations (application form, in-person interview, and appropriate functional assessments) is used to make recertification decisions.

Mail-In Recertifications

Beginning with 2010 expirations, the RTA implemented a new streamlined recertification process for certain riders who had already been determined unconditionally eligible and whose type of eligibility was almost certain not to change. These riders are now allowed to simply mail back a completed application form to update the information in their file and to be used to evaluate for recertification. This streamlined "Mail-In Recertification" process is available to existing riders who meet the following criteria:

1) 85 or older in the year of certification and certified for All Trips

2) Severe or profound mental retardation (18 yrs of age or older) or advanced Alzheimer's or dementia such that the individual requires supervision for most or all activities
3) Highly complicated medical condition/disability such that the individual not only requires assistance for travel but may need additional skilled medical intervention during travel, and the condition is not expected to improve (18 or older)
4) Three consecutive All Trips certification since the start of the in-person process and age at time of 1st certification was at least 18

Certifiers identify who qualifies for mail-in recertification at the time of the determination and marks the certification database that in-person recertification is not required. When the recertification mailing list is generated, those individuals marked as eligible for mail-in recertification are mailed a different reminder letter and application.

To date, this option has been extended to a relatively small number of riders applying to be recertified. For 2010 expirations, a total of 1,093, riders were identified as being eligible for this streamlined process, which is about 12% of the total due for recertification in 2010.

This new process has the potential to both reduce the burden of recertification for applicants as well as reduce the cost of the certification process for the RTA. Over time, more individuals with All Trip eligibility should meet the criteria of having gone through the process at least three times. The RTA might also want to consider expanding the criteria to identify other riders whose functional ability and eligibility is very unlikely to change in recertification. Information about policies at other transit systems was requested and is described in Section 7. Thoughts on possible expansion of the Mail-In Recertification option are presented in Section 8.

Appeals of Initial Determinations

Applicants who are found not eligible as well as applicants whose eligibility is limited in some way (e.g., conditional or transitional eligibility) are informed that they have a right to appeal the decision. Information about the appeal process and instructions for filing an appeal are included in the determination letters to these applicants.

When appeals are requested, the Manager of the Certification Program also reviews the file and the determination. This internal review is done to make sure that the determination is appropriate before the RTA and the applicant spend the time and money to participate in a formal appeal.

Federal ADA regulations require that there be a "separation of authority" between those making initial determinations and those hearing appeals and making appeal decisions. That is, there should not be a direct line of authority between those who are involved in the initial decision and those who are hearing appeals. To meet this requirement, the

appeal process at the RTA is managed by staff in the Legal Department, which is organizationally separate from the Planning Department.

When appeals are requested, staff in the Legal Department convenes an Eligibility Review Board (ERB) to hear the appeals. The ERB is structured as follows:

- One employee from the RTA not in a direct line of authority with those in the Certification Office (typically an employee in the Legal Department);
- One person selected by the RTA from a pool of people previously identified as possible ERB members by the RTA's ADA Advisory Committee; and
- One person from the pool of potential ERB members chosen by the above two individuals.

Typically every two years the RTA invites the ADA Advisory Committee to identify individuals to fill the pool of potential ERB members. These individuals are nominated by themselves or others and asked to submit statements of experience and qualifications. RTA staff then screens the applications and conducts phone interviews with prospective ERB pool members. The candidates are then submitted for approval by the ADA Advisory Committee. The top four (and sometimes five) vote getters comprise the second position listed above. The remaining candidates typically are used to select the third ERB panel member position. Selected individuals are then provided with training in the ADA requirements and in the RTA's eligibility determination process.

Transmission of Eligibility Information to Pace

Each weekday, RTA staff downloads the complete file of newly eligible riders to Pace, along with any additions and changes to the existing database (e.g., updated information about mobility aids, changes of address, etc.). Pace uploads the file and syncs it with its own master rider file. The sync is programmed to identify any updated records and overwrite the old information in the existing file.

The RTA Certification Office is also the point of contact for any changes to current rider information. If Pace or its ADA paratransit service providers become aware of changes in telephone numbers, addresses, types of mobility aids used, or other information, they direct riders to contact the RTA Certification Office. Pace and the service providers do not independently make these changes to their rider records. The master certification database at the RTA is the official record of rider information. New information called in by riders is then transmitted each weekday to Pace via computer download.

As noted above, the RTA also takes every opportunity to determine if rider information needs to be updated. At every contact with riders (e.g., when riders call for interviews or regarding recertification) questions about latest addresses, phone numbers, types of mobility aids, and other information are asked. At the time of recertification, information from applications is also used to update the record.

The Certification Program Computer System and Databases

The RTA has developed two custom databases that support the ADA Certification Program—a Scheduling Database and a Certification Database.

The Certification Database is a custom web-enabled database developed by an outside IT consultant. The Scheduling Database is an Access database developed in-house by a previous certification program staff member. The linked databases are both supported in-house by an RTA IT Specialist. The Certification Database includes all information related to applicants and the certification process including name and demographic/contact information as well as information entered by CAU from application forms, information entered by RTA staff on assessments and final decisions, etc. The Scheduling Database contains information related to the application process including interview scheduling, transportation scheduling, etc. The RTA also has a separate Travel Training Database that is partially linked to the Certification Database.

Three separate servers are now used to run the ADA databases. One server houses the Certification Database web application and is used to manage information received and transmitted via the worldwide web. Information from the five CAU assessment sites is channeled through this server. This server is also used to transmit daily applicant information to Pace. A second server houses the Certification Database as well as the Travel Training Database. A third server is now used to house the Scheduling Database Access application and database. In the near future the RTA hopes to re-develop the Scheduling Database Access application to a web application. This will allow for better performance and enhance security.

Database Issues

Prior to and during the review, a few possible issues regarding the computer system and the transmission of rider information to Pace were raised. These issues were examined to determine their impact, to see if they had been resolved, and to consider possible synergies in data management that might exist if the Certification Program was relocated to Pace.

Interview and Transportation Scheduling – It was noted that there is not always consistency in the information between the interview scheduling page and the transportation scheduling page. This happens because some of the information is entered in two separate places and there can be data entry errors and the current system does not completely link and examine the information for consistency. As a result, the Lead Intake Screening Clerk has to complete a cross-check of all interview scheduling and transportation scheduling information each day before the information is transmitted to Pace and the five assessment sites. Consideration should be given to creating some cross-check links in the system

Daily Transmission of Eligible Rider Data to Pace – Occasionally, RTA indicated that the daily download of rider information will fail to process. This happens when other large computer jobs at the RTA are occupying server capacity. It was noted that this happens only once every two to three months. When it does happen, the rider information is updated the following day.

Completeness of Rider Data Transmitted to Pace – An issue with the completeness of rider information transmitted to Pace was raised early in the review. It was indicated that certain information about rider categories and sub-categories of eligibility were not being transmitted and received by Pace. This issue was discussed with Pace IT and Operations staff. It was determined that information about all categories and sub-categories of eligibility is being transmitted and received. The issue appears to be more one of interpreting the conditional eligibility information and structure. Pace staff noted, though, that the various categories and sub-categories have been discussed with and explained by RTA staff and Pace staff now has a better understanding of the categories and the various levels of eligibility conditions.

Accuracy of Rider Information Transmitted to Pace – Early in the review, Pace staff also mentioned that rider information is sometimes out of date. Specifically, it was noted that mailing address information could be inaccurate. As a result, when Pace sends information to riders some of the letters or notices are returned as undeliverable. This issue was discussed with both Pace and RTA staff. It was noted that RTA staff verify rider information on file at each new contact (calls for recertification, calls to schedule interviews, etc.). A process has also been established with Pace to capture outdated information identified during mailings or in daily operations. Pace instructs its contracted service providers to tell riders to call the RTA to update information in the file whenever outdated information is discovered. If Pace or its service providers obtain new information (e.g., a new phone number given during the reservations process) they can also forward the information to the RTA so that the master record can be updated. Staff felt that the processes that had been established were working and that if a problem still exists, it was a matter of Pace staff and service contractors following the established process more consistently. It should also be noted that this is an issue in any system where a master rider record is kept, and information about riders is gathered at multiple points in the operation. This is also a common issue in ADA paratransit services because of the somewhat transient nature of the population and frequent address and phone number changes.

Inability to Sometimes Link New Rider Data at Pace – Finally, it was noted that sometimes the latest rider information transmitted does not link to existing rider files at Pace and the existing rider files fail to update. After exploring this further with Pace IT staff, it was determined that the problem was being caused by the fact the riders might elect not to provide a social security number when they recertify or that errors in previously recorded social security numbers were updated, resulting in a different unique identifier number created for that rider. The data syncing process at Pace then does not work because the new and old identification numbers for the rider do not match. Pace IT staff indicated that they noted this as an issue for a short period of time

when there appeared to be an increase in the number of applicants opting for alternative numbers in lieu of SSNs. Pace staff also indicated that a procedure for syncing the records in a different way had been developed.

2.2 Travel Training Program

RTA's Travel Training Program, which began in 1993, was brought in-house in 2005. The program is now located in the Regional Accessibility Division of the Planning Department. The Travel Training Program includes a Manager (Accessibility), along with five full-time Travel Trainers and a Travel Training Coordinator (a new position to be filled).

With the exception of persons with vision disabilities, all training is now provided by RTA staff. Travel training for persons with vision impairments is provided through a contract with Chicago Lighthouse for the Blind.

Since 2005, about 600 referrals have been processed in-house by the RTA Travel Training Program. About 30% of trainee referrals complete the whole travel training program. Whereas in the earlier years the number of annual referrals was about 75 to 90, more recently that number has grown to approximately 100. Many individuals used to drop out because of the long wait lists, but this situation has now been addressed with the addition of new staff.

Identifying Travel Training Candidates Through the Eligibility Certification Process

The ADA Paratransit eligibility application form includes questions about whether an applicant has had travel training before and whether they are interested in travel training now. Most travel training candidates are recruited through responses to this question or from the interview process. The travel trainers each rotate once a month through all the assessment sites, reminding Assessors about the availability of travel training. As a result, the Assessors discuss travel training with interested applicants or those who might benefit from travel training and indicate in the write-up to the Certifiers whether an applicant is interested in travel training. The Certifier then follows up with interested applicants. If an applicant does not want travel training, even though the assessment indicates that they could benefit from the training, they are not pressured to participate. This approach is in accordance with federal guidelines that do not allow transit agencies to require or pressure individuals to take travel training.

While applicants are participating in travel training, their eligibility determination is "temporary unconditional eligibility," which allows them to use paratransit for all of their trips during the training period. After training is completed, a final certification decision is made based on the outcomes of training combined with the original information collected from the application and interview and assessment process. For some participants, their final certification may be more limited than the unconditional eligibility that was temporarily granted. The Accessibility Manager felt that this certification

change at the end of training may be inhibiting some applicants and riders from participating in the Travel Training program because they mistakenly associate their participating in training with restrictions on their eligibility. He recommended instead that participants receive the certification decision they would have gotten if they had not requested travel training, but to make that certification temporary. The Accessibility Manager felt that this approach would result in less dramatic changes in eligibility in some cases, which could create a more positive community response to travel training.

Travel Training Sessions

Training is typically conducted on weekly intervals although a small number of individuals receive more frequent training. The reason for this approach is to allow individuals to forget what they've learned during the week so that they can build up more sustained memory over time. Trainings average about ten weekly sessions per person. About 60% of trainees have a cognitive disability, with the remainder having physical disabilities. At any one time each of the trainers has a caseload of approximately 15 individuals.

The trainings consist of three parts:

a) Pre-training assessment, in which the trainer discusses the trainee's functional abilities and limitations, and establishing goals for travel training;
b) Classroom training, which includes use of web sites, maps, and schedules to identify which stations/stops are accessible. The classroom training also includes development of community skills, and how to ask for help when the individual is lost; and
c) Field sessions, which are based on the "demonstrate, prompt, and shadow" model

After the training is complete, the trainer and trainee review goal sheets to determine which of their planned goals have been met. The process is completed with a narrative by the trainer indicating which trips the trainee is able to conduct independently and whether there are continuing limitations. In addition, information that will be useful to the Certifier, such as whether the trainee can generalize the skills learned from each trip, is provided. The trainee signs off on the goals sheets, which are then submitted to the Certifier along with a Closing Report.

Cost-Effectiveness of the Travel Training Program

Currently, the RTA Travel Training Program tracks participants' rough estimates of new fixed route trips they are taking post training. At six months and one year following the completion of each participant's travel training, RTA contacts the participant to ask how many new one-way trips they are taking on fixed route in an average week as a result of travel training. This number is then multiplied by 52 (weeks) and then by $40 (average cost of a one way trip on paratransit) to estimate the savings gained as a result of training. With these assumptions noted, the program manager has calculated rough estimates for the cost savings as more than $750,000 annually.

Across the country, travel training programs have proven to almost always be cost-effective. Seattle Metro estimated a net savings from Transit Instruction to be more than $1 million (after the subtraction of transit instruction costs). This calculation is based on the trip patterns of individuals who would otherwise be taking the repeat trips that they are trained for on paratransit. It does not include additional trips that they would otherwise be taking on paratransit, and is therefore considered to be a conservative number.

3 Process Outcomes and Statistics

This section provides information about determination outcomes (i.e., types of eligibility granted). It also provides information about the number of public inquiries received, applications received, determinations made, and other key program statistics.

3.1 Determination Outcomes

Reviews of applications for ADA paratransit eligibility can result in several different types of determinations. Table 3.1 on the following page shows the categories of eligibility currently used by the RTA. These include:

All Trips – This type of eligibility is granted to individuals who, because of their disabilities, cannot be reasonably expected to independently use fixed route services under any conditions.

Transitional – This type of eligibility is granted to individuals who are prevented from using fixed route services because of physical barriers in the fixed route transit system or in the community. The determination is termed "transitional" since it is expected that barriers in the system or in the community will eventually be removed. There are two types of Transitional eligibility:

> **Transitional (Accessible Bus or "L")** – This type of eligibility is granted to individuals who can use accessible buses and "L" service, but are prevented from using fixed route when the bus routes or "L" stations they need to use are not yet accessible. Since all CTA and Pace buses are now accessible, this category is now typically used for individuals who cannot enter "L" stations that are not yet equipped with elevators.
>
> **Transitional (Curb Cuts)** – This type of eligibility is given to individuals who can travel to and from bus stops and train stations in places where there are curb cuts, but who are prevented from using fixed route service if the routes to and from the stops or stations they need to use are not equipped with curb cuts.

Conditional – Variable Disability – This category of eligibility is given to applicants whose functional ability to use fixed route varies day-to-day. There are three sub-types of Conditional – Variable Disability as well as sub-sub-types within these.

> **Good Day/Bad Day** – This type of eligibility is given to individuals whose disability can affect them differently each day. If the distance they are able to manage to get to and from stops is shorter on "Bad Days," the distance subtype is specified. Or, if they need accessible buses and "L" stations on "Bad Days," this is indicated.
>
> **Treatment Day/Non-Treatment Day** – If applicants cannot use fixed route service on days when they are receiving treatment (e.g., dialysis, radiation, chemotherapy) because the treatment affects their functional ability, this type of eligibility is granted. Again, if their maximum travel distance is shorter on these

Table 3.1 ADA Certification Eligibility Categories

Category and Sub-Category Codes	Category and Sub-Category Descriptions
1	**All Trips**
4	**Transitional**
4A	Accessible Bus and "L"
4B	Curb Cut
4C	Non-Standard Wheelchair
2	**Conditional – Variable Disability**
2A	Good Day/Bad Day
2A1	Distance to bus stop/"L" station
2A2	Needs accessible equipment
2B	Treatment Day/Non-Treatment Day
2B1	Distance to bus stop/"L" station
2B2	Needs accessible equipment
2C	Dusk to Dawn
3	**Conditional – Orientation**
3A	Trip(s) not eligible for paratransit
3B	Trip(s) eligible for paratransit
3C	Transfer trip
5	**Conditional – Winter Months**
5A	Temperature
5B	Ice/snow
6	**Conditional – Summer Months**
12	**Conditional – Path of Travel**
12A	Distance to Bus Stop/"L" Station
12A1	One and a half blocks
12A2	One block
12A3	Two blocks
12A4	Three blocks
12B	Sidewalks
12B1	Condition/absence of sidewalk
12C	Street Crossing (type of intersection)
12D	Seat At Bus Stop
8	**Temporary – Training**
9	**Temporary – Disability**
11	**Temporary – Interim**
10	**Not Eligible**

days, this distance subtype is specified. Or, if accessible buses and "L" stations are needed, this is indicated.

Dusk to Dawn – This type of eligibility is given to applicants with vision disabilities who are affected by what is sometimes called "night blindness" - their vision is impaired in low light conditions.

Conditional – Orientation – This type of eligibility is given to individuals who can use fixed route for certain trips (e.g., trips that they have successfully learned to make on the bus or train). It is also granted in cases where individuals generally can use fixed route, but there are specific trips they cannot make via the bus or train. Finally, this category is used if individuals have the ability to make simple trips by fixed route (i.e., that don't involve a transfer), but are unable to make trips that require a transfer. The three sub-categories of eligibility under this general category apply to these three specific examples and are self-explanatory:

Trip(s) Not Eligible for Paratransit
Trip(s) Eligible for Paratransit
Transfer Trip

In addition to granting this category and sub-category of eligibility, the specific trips that can or cannot be made are identified in the determination letter sent to applicants and in the determination file.

Conditional – Winter Months – This category of eligibility is used when applicants have disabilities or health conditions that prevent travel in cold temperatures or when there is ice and snow. The appropriate subcategory is noted based on the travel limitations:

Temperature – a person with limited feeling in their extremities who is at risk traveling in cold weather, or a person with a chronic obstructive pulmonary disease that is aggravated in cold weather

Ice/Snow – a person who uses a wheelchair and cannot get to and from transit stops or stations in snow and ice, or a person with poor balance who is at high risk of falling when walking on ice and snow

To make this category more operational, the RTA tells applicants with this type of eligibility that they can request paratransit service from November 15 to March 15, or at other times of the year when the temperature is forecasted to be 40 degrees Fahrenheit or below.

Conditional – Summer Months – This category of eligibility is given to applicants whose disability prevents use of fixed route services in very hot temperatures (e.g., someone with a cardiac condition who is at high risk if attempting to travel by bus or train in hot weather). To make this category more operational, the RTA tells applicants with this type of eligibility that they can request paratransit service from July 15 to August 31, or at other times of the year when the temperature is forecasted to be 85 degrees Fahrenheit or above.

Conditional – Path of Travel – This category of eligibility is used when applicants' ability to use fixed route is related to distance or other path of travel requirements. There are four sub-types within this category:

Distance to Bus Stop/"L" Station – Used when applicants are able to travel only certain distances to get to and from bus stops and train stations. The maximum distance they are able to travel independently is then specified within this sub-category:

One block
One-and-one-half blocks
Two blocks
Three blocks

Sidewalks – This sub-type of eligibility is given to applicants who have the ability to use fixed route when there is a safe, accessible path of travel, but are prevented when there are no sidewalks or the sidewalks are in poor and inaccessible condition. The specific barriers (e.g., "uneven or broken pavement") are described in the determination letter and in the determination file.

Street Crossings – This sub-category of eligibility is used when applicants are able to safely navigate certain street crossings, but cannot manage others. The specific type of street crossing or intersection that poses a barrier is detailed in the letter of determination and in the determination file (e.g., "unusually wide"/"very busy streets").

Seat at Bus Stop – This sub-category is used for applicants who can use fixed route service when there are seats at the stops they need to use because they are unable to stand for up to 10 minutes.

Temporary – Training – This type of eligibility is granted if applicants are participating in orientation and mobility training, travel training elsewhere, or are interested in the RTA Travel Training Program. These applicants are given eligibility for one year and most are referred to the RTA Travel Training program. At the end of this period of time, any feedback from the RTA travel trainers or other travel training or mobility and orientation program would be considered and a longer-term determination would be made. It is important to note that federal regulatory guidelines do not allow transit agencies to require travel training. So, if applicants do not participate in the travel training that is offered, their longer-term eligibility is based on their current travel abilities without the training.

Temporary – Disability – This type of eligibility is granted if applicants indicate a short-term disability or health condition, or if they are receiving treatment and there is a likelihood that their functional ability could improve in the short-term. If the applicant needs longer-term eligibility, they are referred for an IDR for an updated assessment of functional abilities.

Temporary – Interim – This category is used if eligibility determinations are not made within 21 calendar days of the completion of interviews and any required functional

assessments. Federal regulations require that interim service be provided starting on the 22nd day and continuing until a final determination is made.

Not Eligible – Applicants are determined to be Not Eligible if it is felt that they can independently use fixed route services to travel throughout the service area in all environmental conditions, and their travel by fixed route is not significantly limited by their disability or health condition.

It is important to note that many riders who have been granted Conditional eligibility may have several sub-types of Conditional eligibility. For example, a rider who uses a wheelchair might have Transitional eligibility (since accessible buses and "L" stations, and curb cuts are needed). This same rider might then also have Conditional-Winter Months eligibility (since he cannot travel through snow and ice). And this rider might have Conditional-Path of Travel eligibility (since sidewalks in good condition are needed and there may be a maximum distance that can be traveled).

3.3 Trip Screening and the Path of Travel Program

While 18% of RTA certified customers are determined to be conditionally eligible, almost all of them receive all trips requested, due to the lack of a formalized trip screening program. In addition, more than half of conditionally eligible registrants have Good Day/Bad Day eligibility (see Table 3.7), which further limits the potential for routine trip screening. Pace currently conducts limited trip screening for about 70 individuals who have only winter/summer conditions, and both RTA and Pace have taken initial steps to try to expand the trip screening function.

With the aid of an intern, in 2010 RTA conducted an exploratory project known as the Path of Travel Database Project. The project focused on identifying path of travel barriers faced by the most frequent conditionally eligible riders. Pace provided the names of the most frequent riders, with an emphasis on subscription riders. The intern then determined whether the trip could be taken on fixed-route based on '*goroo*,' the RTA trip planning application. Using internal mapping software, the path of travel from origin to destination was then drawn on a map. A field inspection was conducted of each route segment from home to transit, and transit to destination, and then barriers were labeled and coded, and entered into a database. RTA plans to refine the project to determine a process for trip screening for path of travel that can be implemented in the near future.

The universe of potential riders who could be referred to fixed-route service through trip screening is limited to the 18% who have conditional eligibility. However, for those riders within this subset of registrants who are subscription or frequent users of the system, diversion of trips off paratransit could represent a significant savings. Moreover, the application of the conditional eligibility category would convey an important message about the role of paratransit as a safety net for those who cannot use fixed-route service, rather than a more convenient alternative to fixed-route. In order to fully explore the potential savings that could accrue from trip screening, RTA

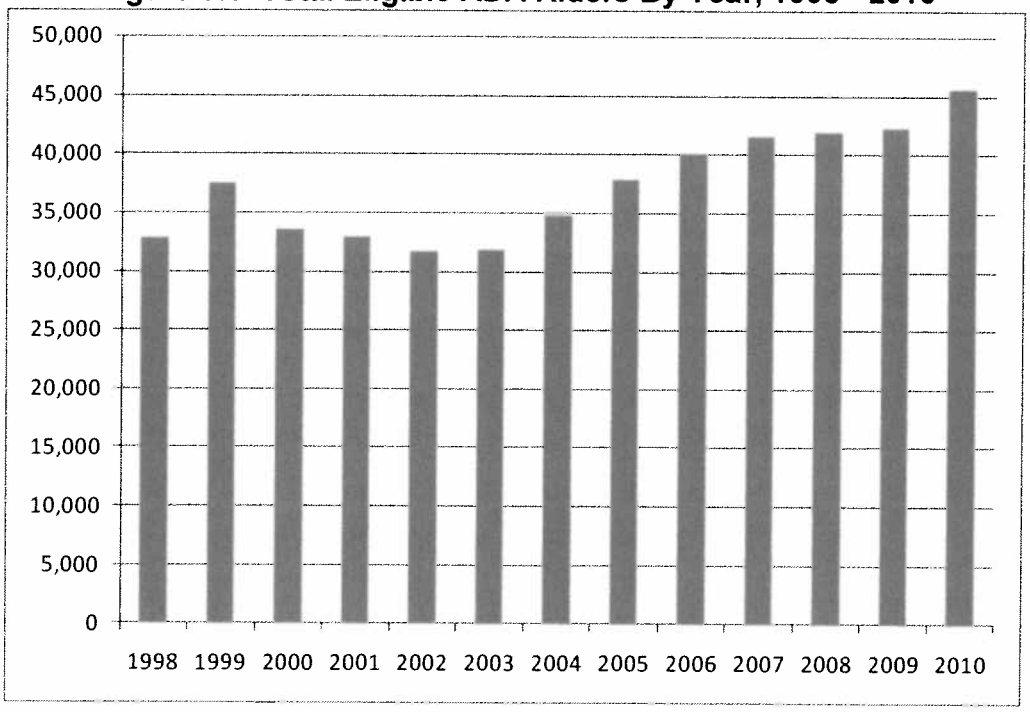
should examine the ridership patterns of those registrants who have conditional eligibility. Identifying those who are frequent paratransit riders will provide a more accurate estimate of the potential savings than is currently available.

3.3 Key Program Statistics

Total Eligible Riders

Figure 3.1 shows the total number of individuals certified as ADA paratransit eligible in the RTA area from 1998 through 2010. The numbers are as of December 31 of each year.

Figure 3.1 Total Eligible ADA Riders By Year, 1998 - 2010



Year	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Total ADA Eligible Riders	32,777	37,509	33,563	33,019	31,722	31,903	34,749	37,926	40,047	41,583	41,910	42,334	45,625
% Increase		14.4%	-10.5%	-1.6%	-3.9%	0.6%	8.9%	9.1%	5.6%	3.8%	0.8%	1.0%	7.8%

There were 32,777 eligible riders in 1998. In 1999, the number of eligible riders increased by 14% to 37,509. In 2000, the RTA implemented the current in-person interview and functional assessment process. The number of eligible riders decreased over the next three years by 11%, 2% and 4% to 31,722 and remained relatively constant between 2002 and 2003. From 2004 through 2007, the number of eligible riders increased between 4% and 9% per year. In 2006, there were a total of 40,047 eligible riders. From 2007 through 2009, the number of eligible riders continued to grow, but at a much more modest rate – between 0.8% and 4% per year. More

significant growth was experienced between 2009 and 2010. In this last year, the number of eligible riders increased by 6%, to its current level of 45,625.

Call Volume and Applications Sent and Returned

To get an idea of the number of calls handled by the Certification Office, telephone reports for the month of November 2010 were obtained and reviewed. The number of calls answered in each of the call groups was identified. Note that this does not include calls that went directly to managers or other staff by persons dialing the extensions directly. In November, there were a total of 5,416 calls answered in the two main call groups, which are the Helpline call group and the Intake (Interview) call group. The distribution of calls was as follows:

Helpline calls	3,133
Intake calls	2,283
Total	**5,416**

There were also 1,043 calls that went to the Application Request voice mail.

To get a sense of how many calls to the ADA Helpline, the Application Request Voice Mail, and to the Customer Service Representatives were for general information, requests for applications, or other purposes, and the number of applications sent as a result of the calls, the review team asked the staff to keep logs of all calls and applications sent for a one week period (January 24-28, 2011). Each staff person recorded whether the call was a "general paratransit service inquiry," a specific request for an application, or other general purposes. The results of this sample of calls are shown in Table 3.2.

Table 3.2 Calls by Type and Applications Sent

Type of Call	# of Calls	% of Total Calls	Applications Sent	% Callers Sent Apps.
General Service Inquiry	57	7%	22	39%
Application Request	466	53%	419	90%
Other General Call	350	40%	0	0%
TOTAL	**873**	**100%**	**441**	**51%**

For this sample week, a total of 873 calls were either answered by the Helpline Operator and the Customer Service Representatives, or returned to callers who had left a voice mail message. Fifty-seven (57) calls started off as general inquiries about the ADA paratransit service (7% of all calls), and 22 of these callers (39%) were sent an application once the call was completed. Another 466 of the calls (53%) started off with callers specifically requesting application forms. At the end of these calls, 419 applications were sent (90%). Finally, there were 350 "other" calls (reduced fare, etc.), which totaled 40% of all calls. None of these callers were sent application forms.

Counted together, 523 service inquiry calls and application request calls were received, and 441 applications were sent (84%). These numbers suggest that the Helpline Operator and the Customer Service Representatives do a good job of discussing the ADA paratransit service and explaining ADA paratransit eligibility to callers. Application forms are not just automatically sent.

Table 3.3 provides more information about the total number of application forms sent out in recent months. Data for the period from January through June, and October through December 2009 was obtained. As shown, a total of 9,986 applications were mailed out (about 1,110 per month) during this nine month period in 2009. Data was also obtained for the first nine months of 2010. From January through September 2010, a total of 13,796 applications were sent, or an average of 1,533 per month.

Table 3.3 also shows the number and percentage of applications returned for these two nine-month periods in 2009 and 2010. In 2009, 79% of all applications mailed out were completed and turned in at the time of interviews. This rate of completion was somewhat lower in 2010, with only 69% of applications completed and returned. On average, 73% of all applications sent were completed and returned in these two years.

Table 3.3 Applications Mailed and Returned (Jan-June and Oct-Dec 2009, and Jan-Sept 2010)

	Applications Sent	Applications Received	% Received
2009			
Jan-Mar	3,118	2,518	81%
Apr-Jun	3,046	2,668	88%
Oct-Dec	3,822	2,726	71%
Subtotal 2009	*9,986*	*7,912*	79%
2010			
Jan-Sept	13,796	9,452	69%
Totals	**23,782**	**17,364**	73%

Additional review of recertification applications sent and returned also showed that the return rate for this subset of total applications is lower. An average of 838 recertification applications were mailed each month in 2009 and an average of 760 recertification applications were mailed each month in 2010. The return rate for recertification applications was 43% in 2009 and 50% in 2010.

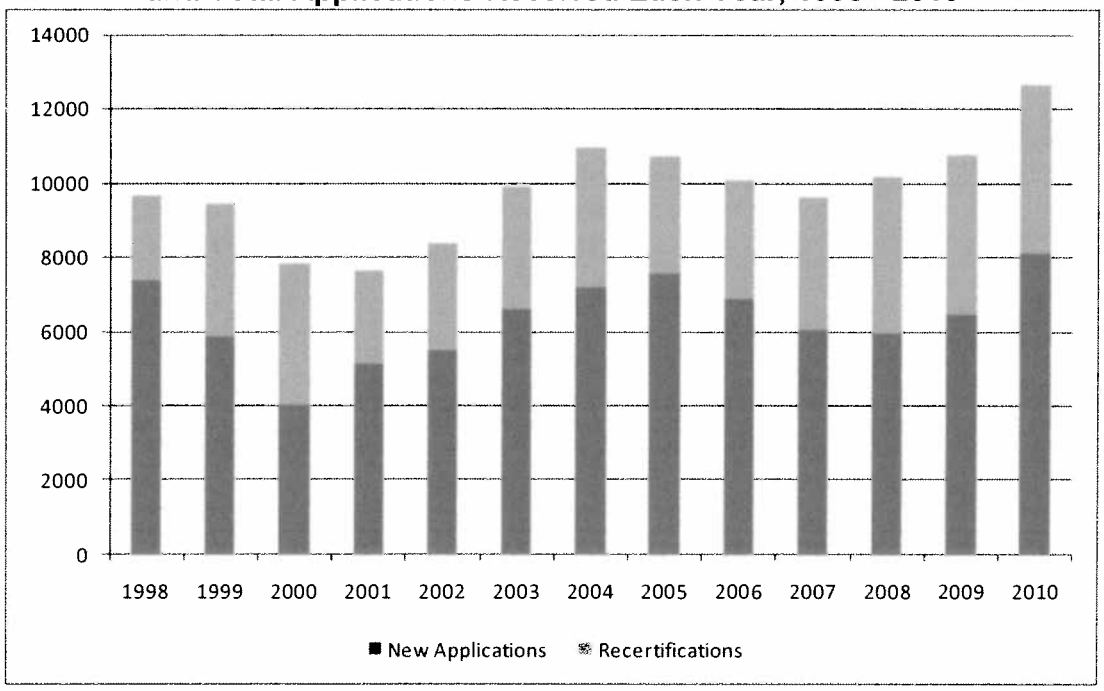
Number of Applications Received and Determinations Made

As described in Section 2.1, applicants submit completed applications at the time they appear for in-person interviews. The applications, together with information from the interviews and assessments, are then reviewed by RTA Certifiers and eligibility determinations are made at a later time. In any given calendar year, the number of applications received versus determinations made might vary somewhat. This depends

on the time required to make determinations as well as on the volume of applications received at various times throughout the year.

Figure 3.2 shows the number of applications received each year by the RTA's ADA Paratransit Certification Office from 1998 through 2010. In 2000 and 2001, the first two years of the new in-person process, the number of applications ranged from 7,657 to 7,822. It is likely that when the new process was introduced, some potential applicants delayed applying until they became more comfortable with the idea of in-person interviews and assessments. This is reflected in the number of new applications in those years, which fell dramatically in 2000 and increased somewhat in 2001. From 2002 through 2004, the number of applications increased to between 8,409 and 10,990 per year, as individuals who delayed applying in 2000 and 2001 likely requested certification.

Figure 3.2 New Applications, Recertification Applications, and Total Applications Received Each Year, 1998 - 2010



	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
New Applications	7364	5865	4021	5137	5486	6617	7183	7560	6870	6041	5968	6439	8112
Recertifications	2298	3591	3801	2520	2923	3319	3807	3175	3230	3597	4225	4364	4561
Total Applications	9662	9456	7822	7657	8409	9936	10990	10735	10100	9638	10193	10803	12673
% Change		-2.1%	-17.3%	-2.1%	9.8%	18.2%	10.6%	-2.3%	-5.9%	-4.6%	5.8%	6.0%	17.3%

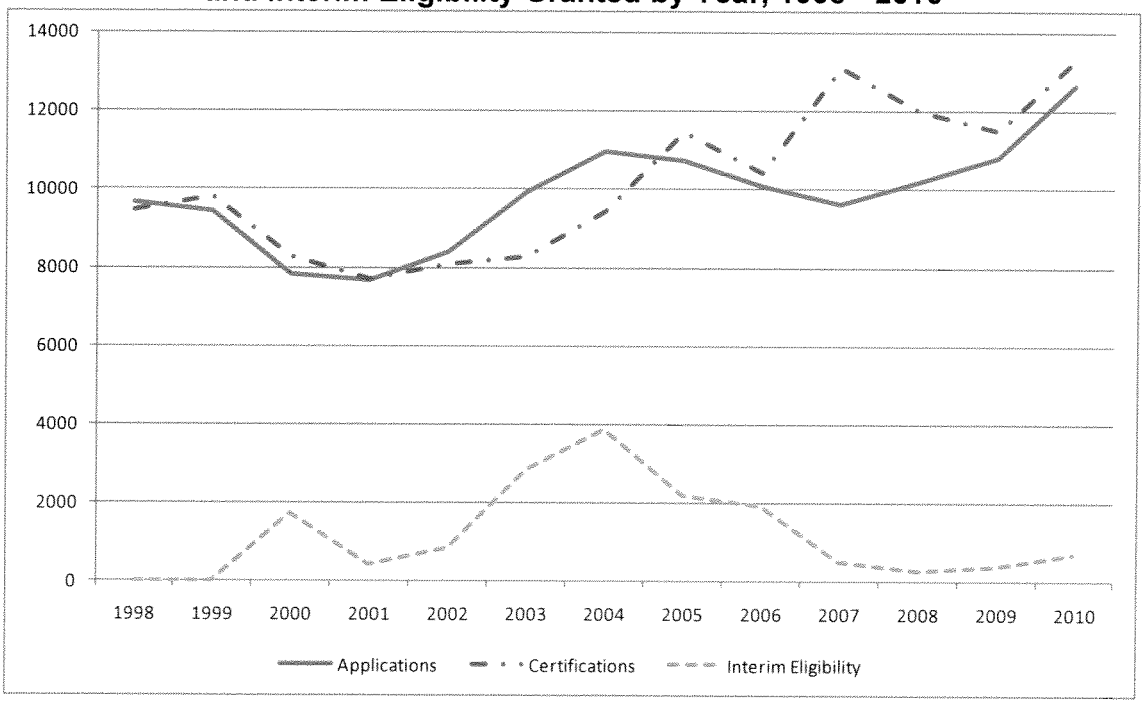
From 2005 through 2009, the number of applications first dropped to a more historically typical number and then grew at a modest rate, somewhat reflecting the natural growth in the population of seniors and persons with disabilities. During these years, between 9,638 and 10,803 applications were received each year. In 2010, the RTA experienced

a significant increase in the number of applications. A total of 12,673 applications were received, which was a 17.3% increase over the number in 2009.

The ratio of new to recertification applications has changed over these past 13 years. Much of this variation is due to the differences in new applications each year (as noted above). The number and percentage of recertification requests has also varied somewhat by year, but in recent years has grown at a regular rate, reflecting the increased number of eligible riders in the system who then recertify as needed. From 2006 through 2010, recertifications have accounted for between 32% and 41% of all applications, and have averaged 37% of all applications over this time period.

Figure 3.3 compares the total number of applications received each year to the total number of certification decisions made each year. It also shows the number of riders who were granted Interim eligibility because a final decision was not made within 21 calendar days (as required by federal regulations).

Figure 3.3 Applications Received, Certification Decisions Made, and Interim Eligibility Granted by Year, 1998 - 2010



	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Applications	9662	9456	7822	7657	8409	9936	10990	10735	10100	9638	10193	10803	12673
Certifications	9463	9832	8298	7725	8104	8277	9428	11473	10428	13131	12013	11528	13298
Interim Eligibility	NA	NA	1712	442	865	2850	3874	2178	1940	503	281	389	706

From 1998 through 2002, the number of certification decisions made per year closely tracked the total number of applications received. There was some small difference, about 100 to 400, that was due mainly to fluctuations in the timing of receipt of

applications and processing of applications during the calendar year reporting periods. Beginning in 2003, though, as a result of the significant rise in applications, the number of certification decisions began to lag well behind the number of applications received. In 2003, there were about 1,500 to 1,600 fewer determination decisions than applications received that year. This was caused by a delay in increasing internal staffing to meet the unexpected demand. The delay was due partly to the suddenness of the increase and a need to determine if this was a short-term or longer-term phenomenon, but also, to some degree to the lack of flexibility and complexities of budgeting, hiring and contracting in a public agency.

While the RTA always met the federal regulations that require that service be provided on a temporary basis if decisions are not made within 21 calendar days, a new category of eligibility – "Temporary-Interim" – was created in 1997 to address this growing issue. Statistics on the number of riders granted this type of eligibility starting in 2000 are shown in Figure 2.5. This type of eligibility was used 1,712 times in 2000. The number dropped to 442 in 2001 and increased somewhat to 865 in 2002. Uses of Interim Eligibility increased between 2003 and 2006 (ranging from 3,874 in 2004 to 1,940 in 2006) as the number of applications received in these years increased sharply. With added staffing at the RTA in 2006, as well as a leveling out of the total number of applications, far fewer riders were granted Interim Eligibility from 2007 through 2009. With the significant increase in applications received in 2010, and without increased RTA staffing, the number of individuals receiving Interim Eligibility has again started to increase in 2010.

It is important to note that granting Interim Eligibility has an impact on in-house Certification Office workload and costs. Individuals are granted Interim Eligibility for three-month periods. When this happens letters have to be processed to these riders. Call volume also increases as these individuals may be confused about their situation and then regularly call to get clarification or check on the status of their eligibility. As time passes, it also becomes more difficult for RTA Certifiers to obtain clarifying information on interview and assessment information and results.

Granting Interim Eligibility can also have a negative customer service impact. Riders may be provided unlimited service under the Interim Eligibility category for several months. They may then be determined Not Eligible or Conditionally Eligible, and their right to use the service taken away or reduced. Even if reasonable and appropriate, it creates an expectation and reliance on the service that can have a very negative impact on riders.

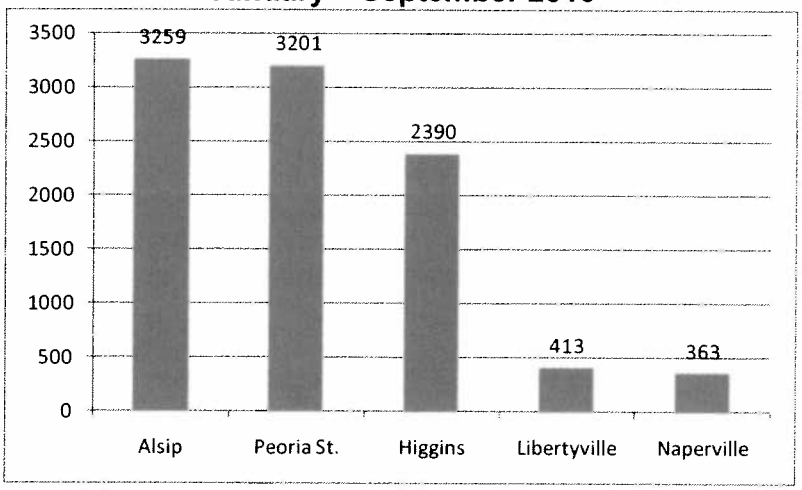
It is therefore in the best interest of the RTA and its riders to maintain adequate staff and contractor capacity to process applications and make determinations of eligibility in a timely way. Given recent increases in the number of applications, RTA should look carefully at opportunities to increase efficiencies in the certification process (such as increasing the number of simplified mail-in certifications) to reduce some of the pressure on staff time. Staffing and demand management options are discussed in more detail in Section 8.

Applications Received By Assessment Site

Figure 3.4 shows the volume of work performed at each of the five contractor assessment sites. Total applications submitted at each site for the period from January 1 through September 30, 2010 are shown.

Alsip, Peoria, and Higgins, the three full-time sites that serve mainly Chicago and Cook County applicants, received 8,850 of the 9,626 total applications (92%) submitted during this period. This reflects the fact that about 80% of riders in the system reside in the City of Chicago. About 8% of applications submitted were received at the Naperville and Libertyville sites (about 4% each).

Figure 3.4 Applications Submitted by Month by Site, January – September 2010



Interview and Assessment Data

Table 3.4 shows the number of interviews scheduled, the number canceled in advance, the number that were cancelled on the day of appointment (same-day cancels), and the number no-showed. Data represents the first six months of calendar year 2010. Same-day cancels did not start being tracked until September 2009.

Table 3.4 Interviews Scheduled, Cancelled, and No-Showed January through June, 2010

Interviews Scheduled	8,211	
Advance Cancels	307	4%
Same-Day Cancels	363	4%
No-Shows	873	11%

For this six-month period, a total of 8,211 interviews were scheduled by RTA staff. Of these, 307 (4%) applicants canceled in advance, another 363 (4%) canceled on the day

of the appointment, and 873 (11%) were no-showed. It is interesting to note that 11% of scheduled appointments were no-showed even though Pace calls riders the evening before to give them exact pickup times.

Table 3.5 shows the types, number and percentage of interviews and assessments performed when applicants do appear for in-person. This data is for the period from January through August 2010.

Table 3.5 Number and Percentage of Interviews and Types of Functional Assessments Performed, January through August, 2010

Interviews Conducted	8,531	
Physical Assessments	5,821	68%
Cognitive Assessments	461	5%
Mini Mental Status Exams	1,284	15%

During this eight-month period, a total of 8,531 interviews were conducted. CAU Assessors also performed 5,821 physical functional assessments. Assuming all applicants are interviewed, this suggests that 68% of all applicants participate in a physical functional assessment.[2] Assessors also conducted 461 cognitive functional assessments (5% of all applicants), and 1,284 Mini Mental State Exams (15% of all applicants). It is estimated that functional assessments are not needed for about 30% of all applicants. Some applicants participate in two or more assessments.

Determination Decisions and Types of Eligibility Granted

Eligible/Not Eligible - Determination records for the three-month period from October 1 through December 31, 2010 were reviewed to determine the number of applicants granted some type of eligibility versus the number found Not Eligible. During this period, a total of 3,615 eligibility determinations were made. Of these, 3,587 applicants were granted some type of ADA paratransit eligibility (99%). A total of 28 individuals were found to be Not Eligible (1%).

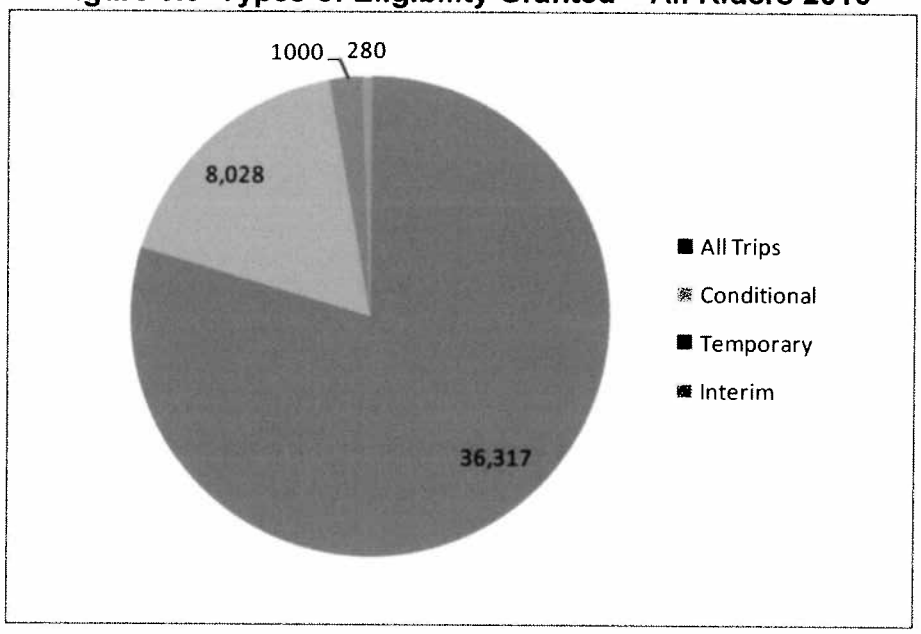
Types of Eligibility Granted – To determine the types of eligibility granted, the full database of all riders was queried and sorted by eligibility type. For simplicity, this first query determined the broad, first-level categories of eligibility. The results are shown in Table 3.6 and Figure 3.5. Of the 45,625 eligible riders in the system as of December 31, 2010, a total of 280 (0.6%) have Interim eligibility. The RTA does not consider Interim eligibility a final type of eligibility and counts these riders separate from those for whom final decisions have been made. A total of 45,345 individuals have been granted a type of final eligibility. Of these, 36,317 (80%) have All Trips eligibility; 8,028 (18%) have some form of Conditional eligibility; and 1,000 (2%) have been granted Temporary eligibility.

[2] A very small number of applicants participate only in assessments and not interviews. The number of these would not significantly change the percentages shown.

Table 3.6 Types of Eligibility Granted, All Eligible Riders, as of Dec. 31, 2010

	# of Riders	% of Riders
All Trips	36,317	80%
Conditional	8,028	18%
Temporary	1000	2%
Subtotal	*45,345*	*100%*
Interim	280	0.6%
TOTAL	**45,625**	

Figure 3.5 Types of Eligibility Granted – All Riders 2010



To further understand the exact types of eligibility within the broad categories of Conditional and Temporary, the rider database was queried by sub-category. This information is provided in Table 3.7. Note that because riders can have several types of Conditional eligibility, the total number of times that each sub-category shows as having been granted far exceeds the total number of riders who have some type of Conditional eligibility.

The most common condition of eligibility used is "Ice/Snow." Seventy-six percent (76%) of riders with Conditional eligibility have this as one of their conditions. The second most common condition is "Good Day/Bad Day," which is in the eligibility of 56.8% of Conditional riders. The need for curb cuts and sidewalks is included for 39% and 39.9% of Conditional riders, respectively.

Table 3.7 Riders By Eligibility Sub-Categories

Eligibility Type	# of Riders	% of All Conditional
TOTAL: CONDITIONAL	**8,028**	**100.0%**
Conditional-Transitional		
Accessible Bus/"L"	11	0.1%
Curb Cuts	3,132	39.0%
Non-Standard Wheelchair	273	3.4%
Conditional-Variable Disability		
Good Day/Bad Day	4,559	56.8%
Treatment day	214	2.7%
Dusk to Dawn	342	4.3%
Conditional-Orientation		
Trips Not Eligible	168	2.1%
Trips Eligible	9	0.1%
Transfer Trips	253	3.2%
Conditional-Winter Months		
Temperature	903	11.2%
Ice/Snow	6,101	76.0%
Conditional-Summer Months	470	5.9%
Conditional-Path of Travel		
One Block	2,777	34.6%
One and a Half Blocks	5	0.1%
Two Blocks	1,666	20.8%
Three Blocks	267	3.3%
Sidewalks	3,203	39.9%
Street Crossings	396	4.9%
Seat at Bus Stop	4	0.0%
Temporary-Disability	782	9.7%
Temporary-Training	218	2.7%

In terms of maximum travel distance for riders with Conditional eligibility, 34.6% have been determined able to only walk or wheel one block to get to and from stops or stations. Note that if this is for riders a with Variable Disability certification, this would be the maximum distance they are able to manage on a "Good Day." Another 20.8% of Conditional riders with endurance issues have been found able to travel up to two blocks. Only 3.3% of Conditional riders with distance limitations noted in their certification have been determined able to manage three blocks.

The other sub-categories are used for only a small percentage of Conditional riders.

Application Processing Time

Federal ADA regulations require that interim service be provided to applicants if eligibility decisions are not made within 21 calendar days of the "receipt of completed applications." In the RTA process, most applications are "completed" at the time of the interview appointment. For regulatory compliance purposes, it is therefore important to consider the elapsed time between the interview appointment and final determinations.

Table 3.8 provides this information for calendar year 2010. As shown, 91% of all determinations were made within 21 days of the receipt of completed applications. In 1,190 cases, the determinations took more than 21 days. Note that this number is higher than the number of individuals given Interim eligibility (706) as noted in Figure 2.5. This is because in some cases, even though determinations take more than 21 days, the ability of applicants to use the service is not affected. This is the case when applicants are recertifying well before their current eligibility is scheduled to expire.

Table 3.8 Elapsed Time From Receipt Of Applications To Final Determinations, Calendar Year 2010

Elapsed Time	# of Determinations	% of All Determinations
1-5 Days	717	6%
6-10 Days	3,380	26%
11-15 Days	2,516	20%
16-21 Days	5,048	39%
>21 Days	1,190	9%
TOTALS	**12851**	100%

While not specifically mentioned in the federal regulations, it is also important to consider the time elapsed between calls from applicants who have completed the application form and are seeking an interview appointment and when the interview is scheduled. Table 3.9 shows this information by calendar quarter for the last quarter of 2009 through the third quarter of 2010. As shown, the majority of interviews are scheduled more than 21 days after applicants call to request appointments. From October 2009 through June 2010, between 80% and 88% of all appointments were scheduled more than 21 days from requests. This was down somewhat in the third calendar quarter of 2010, with 54% of interviews schedule beyond 21 days and 46% in 21 days or less.

Table 3.9 Elapsed Time From Request for Interview Appointment To Actual Appointment Date, October 2009 – September 2010

	Oct-Dec 2009		Jan-Mar 2010		Apr-Jun 2010		Jul-Sept 2010	
Elapsed Time	# of Appts.	%	# of Appts.	%	# of Appts.	%	# of Appts.	%
1-5 Days	8	0%	15	0%	11	0%	7	0%
6-10 Days	43	1%	44	1%	104	3%	351	10%
11-15 Days	109	3%	70	2%	153	5%	490	14%
16-21 Days	507	15%	333	9%	375	11%	772	22%
>21 Days	2,624	80%	3,309	88%	2,676	81%	1,930	54%
TOTALS	**3291**	100%	**3771**	100%	**3319**	100%	**3550**	100%

As noted in Section 2.1 of this report, RTA staff attempt to manage this situation by reserving the closest appointment dates for new applicants or those whose current eligibility is due to expire. Applicants whose eligibility will not be affected by a delay in the process are typically given appointments 30 days or more from the time they call.

To get a better sense of the actual wait times experienced by applicants, records of appointment availability were reviewed for selected periods of time over the last 8 months. Availability of appointments in May, August, November, and December 2010 were noted. Specifically, the shortest possible wait time until an available appointment time was noted. The information obtained is shown in Table 3.10. In May 2010, appointments could not be made in less than 14-18 days at three of the sites and 27-42 days at the other sites. In August 2010, wait times were reduced somewhat, but still excessive at some sites. Waits of 6-14 days were experienced at most sites, but were still at least 21 days at one site. It was noted that CAU began hiring and training additional Assessors during this period. Additional appointments were added at the busiest sites, and adjustments were made in the way applicants were assigned to sites in order to make greater use of less busy sites. With these adjustments, wait times were reduced even further by the end of 2010. In November and December, appointments were often available in 6-13 days, and sometimes requiring a minimum of 15-16 days wait.

Table 3.10 Days Until First Available Appointment by Site

Site	Mon 5/10	Wed 5/19	Tues 5/25	Wed 8/4	Tues 8/31	Tues 11/9	Wed 11/24	Thur 12/2	Wed 12/8
Alsip	42	39	36	20	21	10	7	13	7
Higgins	18	17	14	8	9	8	8	12	11
Peoria	32	27	26	15	13	6	7	6	6
Libertyville	15	18	20	6	14	7	6	15	12
Naperville	18	14	9	9	13	10	16	15	11

Appeals and Appeal Outcomes

Table 2.11 shows the number of appeals requested and the outcomes for calendar year 2009 as well as the first nine months of 2010. It also shows the number of requested appeals that are withdrawn by applicants before the scheduled ERB hearing, the number that were changed in the administrative review process before the scheduled ERB hearing, and the number of ERB hearings held. For the hearings held, it then shows the number and percentage of times that the initial determination is upheld and the number and percentage of times it is changed.

As shown, a total of 61 appeals were requested in calendar year 2009. Given that there were 11,528 eligibility determinations that year, and estimating that about 20% of these (or about 2,306) were decisions other than All Trips (Conditional or Not Eligible) this represents about 2.6% of these determinations. Ten appeal requests were withdrawn before an ERB hearing could be held. Hearings were held and decisions made for the other 51 requests. In 25 cases (49%), the initial determination decision was upheld by the ERB. In 26 cases (51%), the initial decision was changed.

From January through September 2010, 42 appeals were requested. Given that there were 9,452 eligibility determinations during that nine-month period, and again estimating that about 20% (or about 1,890) were decisions other than All Trips, about 2.2% of all Conditional or Not Eligible determinations were appealed. Two appeal requests were withdrawn before an ERB hearing could be held. Two more were changed after an in-house administrative review. The Program Manager reviews all appeal files before they are sent to the ERB for hearings in order to avoid the time and expense of hearings whenever possible, and to more quickly rectify any errors that might have been made. A total of 38 hearings were held and decisions made. In 28 cases (74%), the initial determination decision was upheld by the ERB. In 26 cases (26%), the initial decision was changed.

Table 3.11 Appeal Statistics, Jan-Dec 2009 and Jan-Sept 2010

	Jan-Dec 2009	%	Jan-Sept 2010	%
Appeals Requested	61		42	
Appeals Withdrawn	10	16%	2	5%
Changed on Admin. Review	0	0%	2	5%
Hearings Held	51		38	
Decisions Made	51		38	
Initial Determ. Upheld	25	49%	28	74%
Initial Determ. Changed	26	51%	10	26%

3.4 Estimated Future Demand

An estimate of the number of applications for ADA paratransit eligibility that will likely be received by the RTA over the next five years (2011-2015) was developed. This estimate was based on past trends in the number of applications per year. It also considered projected increases in the numbers of seniors and persons with disabilities in the region that were recently developed for the RTA. Finally, it considered the level of ADA paratransit ridership currently provided and the likelihood of latent, unmet demand.

Figure 3.2 above shows the number of applications received from 1998 through 2010. As explained, there were significant fluctuations in the number of applications received each year from 1998 through 2005. The current eligibility process, which for the first time required in-person interviews and assessments, was introduced in 2000. During the first two years of the new process, the number of applications submitted dropped significantly. It is likely that some potential applicants were waiting to learn more and feel comfortable with the new process before applying. A reverse affect was experienced from 2002 through 2005. A large number of applications were received (likely caused by riders who had delayed now beginning to apply). From 2006 through 2008, the trend in demand for ADA paratransit service stabilized to some degree. The number of applications fell slightly in 2007 and then increased slightly in 2008 and 2009. In 2010, a significant increase in applications was experienced. One possible explanation for the increase is an increase in referrals from local human service and disability agencies experiencing budget shortfalls and no longer able to provide transportation to clients. This theory is supported by statements from CAU site staff who indicated increased applications from clients of agencies serving persons with intellectual disabilities.

To predict application volume over the next five years, trends since 2006 were considered. This past period excludes the atypical swings in demand caused by the introduction of the new process. It also coincides with the transition of ADA paratransit operating responsibility to Pace. And it captures the most recent trends in increased demand.

Figure 3.6 on the following page shows the number of applications received per year from 2006 through 2010. A trend line is then fitted to the graph and the trend line is extended through 2015. A formula for the trend line was then computed and is shown. Using this trend line formula, an estimate of the likely number of applications per year from 2011 through 2015 is then calculated. These estimates are shown in Table 3.12. The projection for 2011 is that about the same number of applications will be received as in 2010 (12,600 in 2011 compared to 12, 673 in 2010). For 2012, it is estimated that about 13,200 applications will be received, a 5.0% increase over 2010 and 2011. In 2013, the estimate is that about 13,800 applications will be received, a 4.8% increase over 2012 and a 9.2% increase over 2010. In 2014, the trend line suggests that about 14,500 applications will be received, an increase of 4.6% over 2013 and a 14.2%

Figure 3.6 Applications Received 2006-2010 and Trendline Through 2015

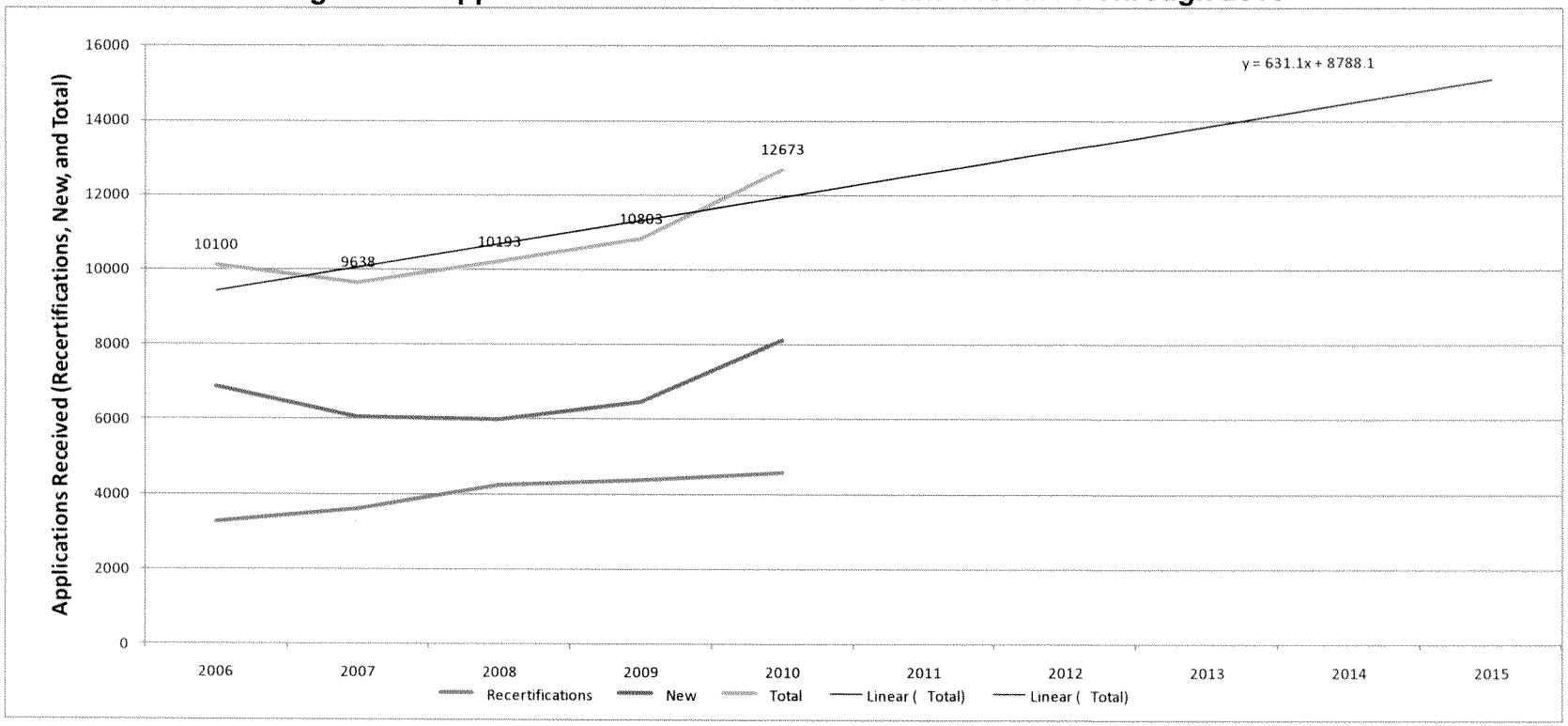


Table 3.12 Estimated Application Volume 2011-2015

	2011	2012	2013	2014	2015
Predicted No. of Applications	12600	13200	13800	14500	15100
% Increase Over Prior Year	-0.6%	4.8%	4.5%	5.1%	4.1%
% Increase Over 2010	-0.6%	4.2%	8.9%	14.4%	19.2%

cumulative increase over 2010. And in 2015, it is estimated that about 15,100 applications will be received, a 4.4% increase over 2014 and a cumulative increase of 19.1% over 2010.

Steady growth in the demand for ADA paratransit service is supported by a recent study of the population of seniors and persons with disabilities in the RTA area. This study, titled "Analysis of the RTA Seniors and People With Disabilities Ride Free Programs" developed population forecasts for 2010 to 2015. It suggested that there would be a 25% increase in the percentage of persons 65-74 years of age in this five year period, a 2% increase in the percentage of persons 75-84 years of age, and an 11% increase in the percentage of persons 85 and older. Given that a high percentage of seniors, particularly seniors in the oldest age brackets, report having disabilities that affect independent travel, the report predicted there would be an increase in the number of persons with disabilities in the region. For the period from 2010 to 2015, the report suggests that the number of people with disabilities will increase from 1,656,114 to 1,737,734 (a 4.9% increase).

A steady, natural increase in demand, rather than a continuation of the rapid increase experienced in 2010, is also supported by the current level of ADA paratransit service in the region. A national model used for predicting ADA paratransit demand was run by the review team to determine the level of latent demand in the RTA area. This model, developed through research conducted by the Transportation Research Board, uses population of the service area, household income data, paratransit fare levels, and eligibility process information to generate ridership estimates. The model estimated ADA paratransit ridership of 2,466,463 one-way passenger trips per year for the RTA area. This is slightly lower than the actual ridership, reported by Pace to be 2,785,569 one-way passenger trips in 2009 (NTD, 2009). This suggests that the service is not significantly constrained and that the rapid increase in applications in 2010 is likely a short-term aberration due to the current economic situation. A return to a steadier, natural growth in demand, as predicted by the trend line in Figure 2.4, seems reasonable.

It should be noted that since this analysis was completed in early 2011, the RTA certification program has experienced a significant increase in applications for the first half of the year rather than the 0.6% decreased estimated in the projection. ADA paratransit ridership has also increased during the same period. **Therefore, the projections made in this report, and the recommendations related to them, need to be used with caution and may need to be adjusted based on actual results for 2011.**

4 Staffing and Work Flow

This section provides a summary of the RTA staffing and organization of the certification program. It also describes the volume and flow of work managed by this staff.

4.1 RTA Staffing and Organization

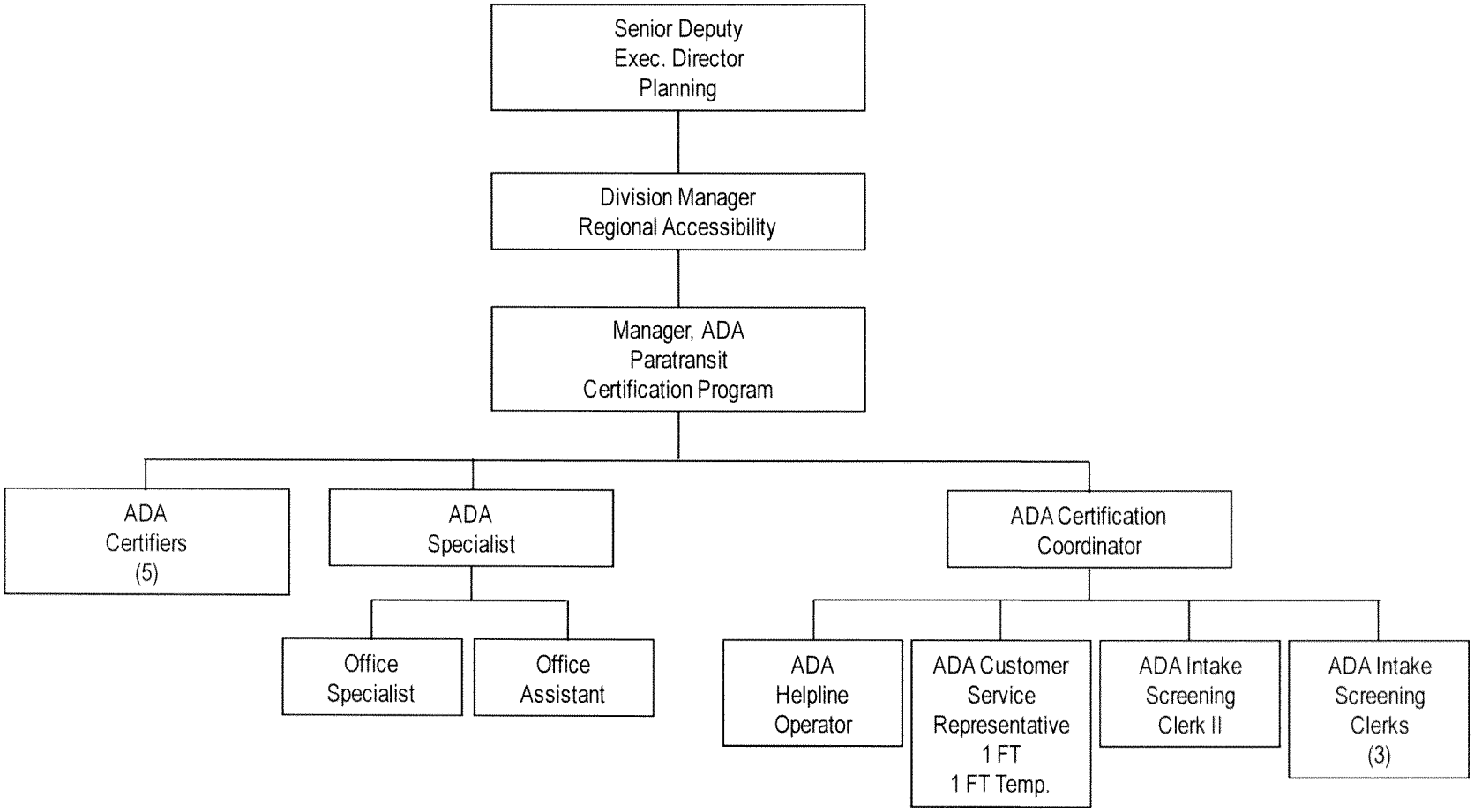
Organizationally, the Certification Office is within the RTA's Department of Planning. The Manager of the Office reports to the Division Manager for Regional Accessibility who reports to the Senior Deputy Executive Director for Planning. Following is a summary description of the roles and responsibilities of each employee in the Certification Office. Figure 4.1 on the following page identifies the staff and organizational structure of the RTA's ADA Paratransit Certification Office. At the time of the review, there were 16 full-time RTA employees and one full-time temporary employee working in the Certification Office.

The **ADA Paratransit Certification Program Manager** is responsible for overall functioning and management of the office. She Establishes policies and procedures for the office, is responsible for budgeting and planning for the office, and prepares regular reports on the program needed for effective management and for planning. She also manages all contracts with outside contractors including Pace, coordinates appeal activities with the Legal Department staff, coordinates with the RTA's Information Technology staff to maintain computer operations of the office, and coordinates with other Regional Accessibility staff on travel training efforts. The Program Manager is responsible for office hirings and performance reviews within the office, and directly supervises the ADA Certification Coordinator, the five Certifiers, and the ADA Specialist.

The **ADA Certification Coordinator** assists the Manager with the daily functioning of the office. The Coordinator is responsible for tracking and monitoring workflow to ensure timely determinations, prepares regular reports on the program needed for effective management and for planning, assists the Manager in measuring and ensuring the quality of work by employees and contractors, assists the Manager in responding to internal and external questions and requests, and responds to comments and complaints from applicants. The Coordinator also directly supervises six full-time employees—the ADA Helpline Operator, the ADA Customer Service Representatives, and the Screening Clerks. He assists these staff in addressing any problems that arise in responding to public inquiries, the day-to-day scheduling of interviews or transportation of applicants.

Basically, the day-to-day functioning of the office is organized in two groups: one under the direction of the Manager and the other under the direction of the Coordinator. The Coordinator manages functions associated with initial contact with applicants and the public, general customer service issues, the scheduling of interviews and assessments,

Figure 4.1 RTA ADA Certification Program Staff and Organizational Chart



and arranging transportation to and from interview appointments. The Manager oversees the entire unit and directs the staff that makes eligibility determinations, processes determination letters, and maintains all files. The employees in the group supervised by the Coordinator have the following responsibilities:

- **ADA Helpline Operator**: This person is the program's primary point of contact with the public and potential applicants. The Operator answers incoming voice and TTY calls on the ADA Helpline, provides general information about ADA paratransit service and the certification process, provides information about the Reduced Fare and Ride Free Programs and other municipal and public transportation services, and makes appropriate referrals and provides contact information. The Operator also takes application requests and forwards these requests to mailing house, updates applicant demographic data in the system at the request of applicants, riders, and Service Boards, processes requests for brochures and application forms, routes calls to other staff as appropriate, and processes and distributes the mail to the office.
- **ADA Customer Service Representative**: This person assists the Operator in responding to public inquiries and requests. The Customer Service Representative handles calls on the Helpline requiring Spanish translation, returns calls that have gone to the application request voice mail, the Interview Line voice mail, and the Seniors Ride Free voice mail. She handles questions related to the Seniors Ride Free Program and the difference between this program and ADA paratransit, makes "7 day advance" reminder calls on interview appointments, provides coverage of incoming calls on the ADA Helpline and the Interview Scheduling Line, as needed, assists in sending out brochures and applications, prepares and sends out interview appointment confirmation letters on a daily basis, and provides Spanish translation of determination letters and program materials.
- **Temporary Customer Service Representative**: This position has recently been added to assist with the increased volume of calls and application requests in recent years. This temporary employee assists the full-time Customer Service Representative with calls, messages, and information processing including inquiries about ID card problems. She also provides back-up to the ADA Helpline Operator as needed.
- **ADA Intake/Screening Clerk I:** There are three Screening Clerk I positions. As described earlier in this section, the Screening Clerks take calls from and schedule interview appointments for applicants who have completed the ADA Application Form, perform pre-screening to minimize scheduling of inappropriate appointments, determine the type of appointment needed (new, recertification, reapplication), and schedule appointments to the appropriate sites. The Screening Clerks determine if transportation is needed and, if so, obtain and enter information needed to schedule rides to and from appointments. The Screening Clerks also review all application files received from three full-time assessment sites for completeness and accuracy, and work with program and site staff to resolve errors and omissions. One Intake Screening Clerk also

handles data entry of mail-in recertifications and scheduling In-Depth Review (IDR) appointments[3].

- **ADA Intake/Screening Clerk II**: This person functions as the Lead Screening Clerk. She generates and checks final lists of appointments for accuracy and then forwards these lists to the Assessment Site Coordinator, generates and checks the final list of rides needed to and from appointment sites and transmits the list to Pace, communicates any same-day changes or issues in appointments and rides to the sites and Pace, and works with Pace and sites to resolve transportation issues (late trips, no-shows, incorrect or unknown addresses) or appointment problems. The Screening Clerk II also generates random unique tracking numbers as requested by the Screening Clerks for use in lieu of Social Security Numbers, schedules interview appointments for applicants who have completed the ADA Application Form, assists the Screening Clerks in handling difficult issues or questions; and reviews application files from the two part-time assessment sites.

The employees in the group supervised by the Certification Program Manager have the following responsibilities:

ADA Specialist: This person supervises the two office clerks and performs a variety of tasks in support of the Program Manager and other staff. Typical duties include supervising and coordinating the work of the Office Assistant and Office Specialist, trouble-shooting computer hardware/software issues, and providing technical computer system support for office staff. The ADA Specialist also prepares application-related form letters, prepares reports, logs, and referral memos for various program activities, and acts as liaison with various vendors for ordering of program materials. She produces letters and information in alternative formats (audio tape, Braille) as needed, coordinates preparation and mailing of certification/recertification letter packets and processing photos for ID production, coordinates the process to ensure compliance with records retention requirements, and coordinates maintenance of office equipment and systems.

Office Specialist: The Office Specialist is primarily responsible for preparing and sending determination letters and packets. Typical tasks include assembling certification and recertification letter packets and preparing them for mailing, preparing all photos and ID-related reports for transmittal to ID contractor, preparing labels for application files as they are assembled, providing back-up assistance with application file preparation and data entry, and preparing All Trips determination letters on direction from Certifiers.

Office Assistant: The Office Assistant has primary responsibility for maintaining all active and inactive application files. To ensure that files are not misplaced or lost, all other employees in the program go through the Office Assistant to request and obtain files. All employees also return files to the Office Assistant for refiling. Specific duties include pulling application files as requested, pulling prior files for recertification or reapplication applicants and giving them to Scheduling Clerks to combine with current

[3] An IDR is a follow-up review which can be requested by the RTA for use in the appeal process, or to update functional information following a temporary disability certification.

applications to create a complete record for use by Certifiers. The Office Assistant is also responsible for filing and refiling application files, pulling and preparing inactive files for off-site storage, managing the off-site storage process, photocopying files for appeals; Photocopying files for IDRs and travel training referrals, and assisting other staff with preparation of letters and other clerical duties as needed.

ADA Certifiers: Five ADA Certifiers are responsible for making final eligibility determinations. Certifier duties include reviewing all information in the files assembled by the Screening Clerks. This includes the completed application form, the completed in-person interview form, all functional assessment forms, the summary form completed by CAU Assessors, and any other documentation or information provided by applicants; Contacting CAU Assessors, third-party professionals, applicants and/or verifying professionals named by applicants for clarifications or additional information as needed. Certifiers are then responsible for making written determinations, documenting the decision rationale in the Certification Database, and preparing the determination descriptions to be included in letters to applicants. Additional duties include entering eligibility dates and categories in Certification Database, providing input to other Certifiers on difficult determinations, identifying applicants who might benefit from travel training, processing travel training referrals, and monitoring training results. Finally, Certifiers respond to post-determination inquiries from applicants and/or their representatives, testify at Appeal Hearings, participate in regular meetings and trainings to discuss recent determinations (to maintain consistency); and periodically meet with CAU Assessors to observe and discuss the interview and assessment process and documentation provided by the Assessors.

4.2 Process Flow Chart

Figures 4.2 and 4.3 are process workflow charts for the ADA Certification Program. Figure 4.2 is for work completed in the RTA Certification Office, and Figure 4.3 is for work completed by CAU. The volumes of work in each area of the program are shown. The flow of work and decision points in the process are also illustrated. Note that the workflow shows the number of calls, applications, and determinations for an average month. The monthly numbers are then based on certification decisions in 2010. While the number of applications received is always slightly different from the number of certifications completed (sometimes higher and sometimes lower), for simplicity the workflow was based on average certifications completed.

As shown in Figure 4.2, there are two main work inputs into the RTA ADA Certification Office. These are calls from potential new applicants and currently eligible riders, and interview and assessment files from Community Alternatives Unlimited (CAU). Given that there were 13,298 certification decisions in 2010, and assuming that over time there are an equal number of determinations for the number of completed applications, it is estimated that CAU submits about 1,108 completed applications, interview forms and assessment files to the Certification Office for review each month. After checking for completeness and assembling the file record (including gathering existing files for applicants with the assistance of the Office Assistant), a similar number of files are

Figure 4.2 Process Workflow Chart for RTA ADA Certification Office

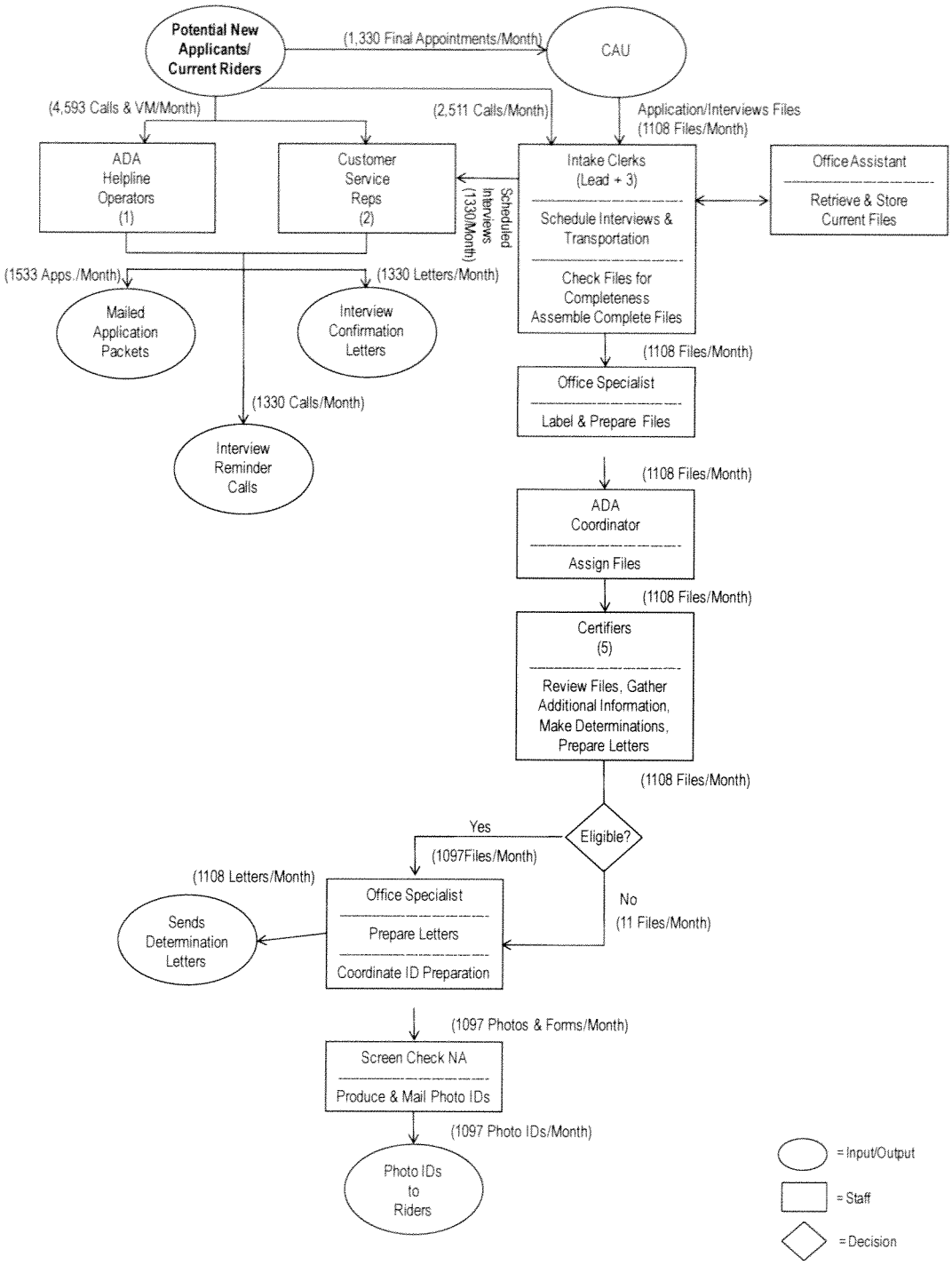
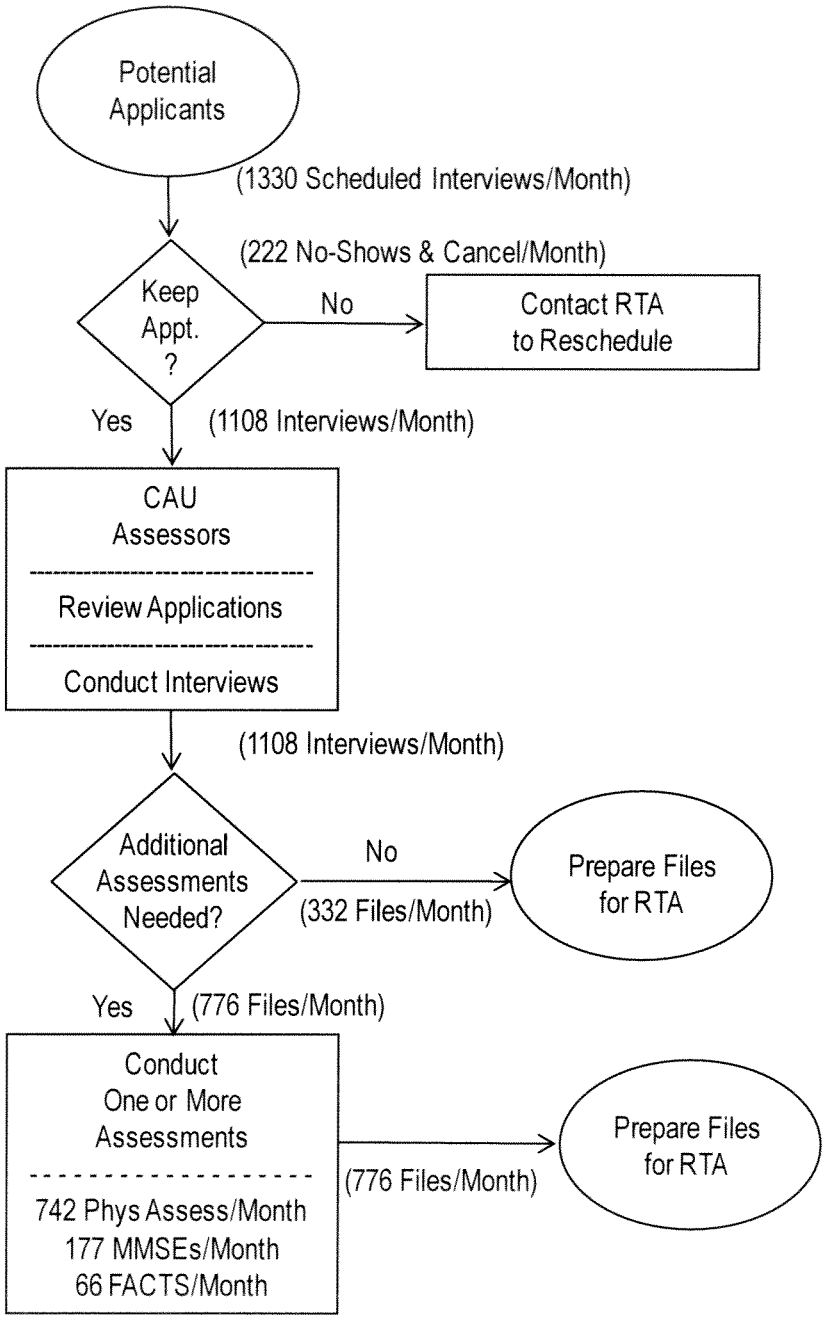


Figure 4.3 Process Workflow Chart for Community Alternatives Unlimited (CAU)



forwarded to the Office Specialist for labeling and final assembly. These labeled files then go to the ADA Coordinator, who distributes them to the five Certifiers. The Certifiers review the files, gather additional information as needed, make final determinations, and enter appropriate documentation and eligibility data into the Certification Database. If they find applicants to be eligible for All Trips, the files are forwarded to the Office Specialist who prepares and sends determination letters. If Certifiers find applicants Conditionally or Temporarily Eligible, or Not Eligible, determination letters are prepared by the Certifiers and forwarded to the Office Specialist for mailing. In 2010, an average of about 1,097 applicants were granted some form of eligibility each month and about 11 Not Eligible determinations were made. The Office Specialist also coordinates the production of photo IDs for applicants granted eligibility. About 1,097 photos along with reports are forwarded to ScreenCheck NA each month. This contractor then produces and mails about 1,097 photo IDs to eligible customers each month.

In addition to this workflow related to completed application files received, Certification Program staff also handle calls from the public, send out application forms, and schedule interviews and needed transportation. This workflow is also shown in Figure 2.8. As noted in Section 3.3, a total of 5,416 calls were answered in the two main call groups at the Certification Office in November 2010 (3,133 to the Helpline group, and 2,283 to the Intake group). Another 1,043 voice mail messages were handled by the Helpline Operator and CSRs. In November 2010, a total of 1,394 applications were sent out. This was 91% of the 1,533 monthly average for 2010. The November call volumes were therefore adjusted up by 10% to estimate average monthly call volumes. This suggests an average of 4,593 calls and voicemails to the Helpline group (Helpline Operator and CSRs) in an average month in 2010. It also suggests an average of 2,511 calls to the Intake group (Intake Clerks) per average month in 2010. In response to these calls, the Helpline Operator and CSRs mailed out about 1,533 application packets each month in 2010 (13,796 – see Table 2.3).

The Intake Clerks also arranged about 1,330 final interview appointments per month in 2010. This estimate is based on 1,108 determinations per month times 1.2 (to account for a 20% cancel and no-show rate). This represents the number of appointments sent to CAU three days in advance. Far more interviews are actually arranged leading up to this final number, but many are cancelled and rescheduled. Once the interviews are scheduled, the CSRs also sent a similar number of interview confirmation letters and make a similar number of interview reminder calls each month.

Figure 4.3 above shows the workflow at CAU in a typical month. As noted above, about 1,330 interview appointments are scheduled each month. About 20% of these are no-showed or cancelled. The other 1,108 applicants submit application forms and participate in in-person interviews at CAU. After the interviews, CAU Assessors determine if one or more types of functional assessments should be performed. If not, the files are prepared for transmittal to the RTA. About 30% of all appointments involve only an interview, or about 332 per month. If additional information is needed, one or more functional assessment is conducted. About 742 physical functional assessments

are performed each month, about 177 MMSEs are administered each month, and about 66 FACTS tests are given each month. Once the interview and any applicable assessments are completed, CAU Assessors enter pertinent data into the Certification Database and prepare the full files for transmittal to the RTA.

It should be noted that the workflows illustrated in the above two figures represent the primary tasks of the Certification Office – handling calls from the public, sending out applications, scheduling interviews, reviewing applications and interview/assessment files from CAU, and sending out determination letters and photo ID reports. A number of other tasks are not reflected in the charts. These include:

- Preparing files to go to Legal Department staff for appeals (about 50 per year);
- Referring applicants to the RTA Travel Training Program (about 218 per year);
- Sending out Interim eligibility letters (706 in 2010);
- Responding to rider complaints and public inquiries;
- Evaluating and resolving any problems or discrepancies with ID cards, service related eligibility or mobility data, or other related issues;
- Updating eligible customer demographic or other data;
- Records retention activities;
- Preparing In-Depth Review (IDR) referrals and scheduling IDR appointments (mainly to evaluate applicants for four-year certification after Temporary Eligibility has been granted);
- Working with Pace and CAU in responding to same-day transportation or interview appointment issues;
- Making community presentations and responding to community service organization inquiries and requests;
- Managing the contracts with CAU, Pace, the Lighthouse for the Blind, and other program vendors; and
- General management and administration of the Program.

5 Program Costs and Assets

This section documents and analyzes cost data for the ADA paratransit eligibility certification program. All costs attributable to the paratransit certification program in each functional area, including contractors and the appeals process were documented. Additionally, future costs have been estimated along with future relocation costs as inputs to consider whether the program should be housed at the RTA or at Pace. Based on the existing cost information, a future scenario of costs was prepared using an estimate of the number of future applications (as presented in Section 3.4). This information was also used to estimate the one-time start up costs for a potential transfer of the program from the RTA to Pace.

5.1 Methodology

A template of all costs associated with ADA paratransit certification was prepared and submitted to the RTA. On-site interviews were conducted during the week of December 6, 2010, with follow-up discussions through December and January. During the on-site interviews, the consultants met with various RTA staff to review cost categories and available data. Where possible, cost items specific to the certification process were used. For cost items that are recorded as general RTA expenses, costs were allocated to the certification unit based on per unit estimates, such as per employee ("head") or per square foot.

A summary of the cost data for the ADA paratransit certification program is presented in Table 5.1 for 2009 (actual), 2010 (actual), and 2011 (budget). Overall costs for 2010 were higher than previous years due to an increase in applications. Each specific cost item is described in the following sections.

5.2 Staff and Benefits Costs

Salary costs were provided by the RTA reflecting actual salary expenses. Position descriptions were also provided by the RTA with minimum, mid, and maximum salary ranges for each position in the ADA paratransit certification program.
The following cost items were included under the salary and benefits category:

- *ADA staff salaries and benefits*: costs provided directly from RTA for actual salary and benefits costs. No major changes from existing to 2011 budget.
- *IT staff salaries and benefits*: costs provided directly from RTA for actual salary and benefits costs. Assumes 15% support from IT, network programmer and telephone administrator. No major changes from existing to 2011 budget.
- *Legal staff salaries and benefits*: costs provided directly from RTA for actual salary and benefits costs. Assumes 10% support from legal staff directly related to appeals process. No major changes from existing to 2011 budget.

Table 5.1 RTA ADA Paratransit Program
Cost Related Data – Summary of Costs

CATEGORY/ITEM	INITIAL CERTIFICATION			APPEALS/ERB		
STAFF COSTS	**2009**	**2010**	**2011 Budget**	**2009**	**2010**	**2011 Budget**
ADA Staff - Salaries	$663,977	$700,891	$711,564			
ADA Staff - Benefits	$394,177	$443,091	$517,847			
IT Staff - Salaries	$37,773	$37,207	$37,773			
IT Staff - Benefits	$16,611	$16,320	$19,675			
Legal Staff - Salaries	$0	$0	$0	$25,579	$25,195	$25,579
Legal Staff - Benefits	$0	$0	$0	$11,074	$12,822	$13,268
Indirect Support Staff - Salaries	$22,913	$22,615	$23,370			
Indirect Support Staff - Benefits	$10,013	$10,471	$12,153			
Temporary Help	$20,340	$26,731	$25,000			
Staff Training Costs	$4,001	$625	$1,000			
Travel Costs	$2,078	$2,229	$2,500			
OPERATIONAL COSTS						
Rent/Utilities Allocation	$130,074	$141,579	$177,783			
IT Allocation	$92,666	$98,297	$80,371			
Office Supplies/Services Allocation	$55,458	$62,559	$55,991			
Outside Design, Production, Printing	$27,713	$33,462	$36,000			
Mailing House	$39,053	$55,788	$54,000			
Postage - in-house	$10,000	$15,000	$15,000			
Film	$10,901	$13,723	$3,600			
Translation/interpreter fees	$11,511	$5,805	$13,000			
ID Card Production		$40,643				
Formal Hearings				$9,097	$5,935	$6,000

Table 5.1 cont. Summary of Costs

CONTRACTOR COSTS						
Cost for interviews/assessment sites - annual fixed fee	$579,128	$646,392	$646,392			
Cost for interviews/assessments sites - variable costs	$1,036,480	$1,417,027	$1,439,608			
Transportation to/from assessment sites	$1,182,067	$1,735,275	$1,800,000			
Other Consulting/Professional Services (contractual certifiers)	$6,890	$22,971	$63,400			
TOTAL	$4,353,824	$5,548,702	$5,736,027	$45,750	$43,952	$44,847

- *Indirect support staff salaries and benefits*: costs provided directly from RTA for actual salary and benefits costs. Assumes 0.3 FTE support from finance, administration, communications, and planning staff. No major changes from existing to 2011 budget.
- *Temporary Costs*: Actual expenses for temporary help that is compensated through a temporary agency. 2010 included one customer service temporary staff person. No major changes from existing to 2011 budget.
- *Staff Training Costs*: Actual expenses. No major changes from existing to 2011 budget.
- *Travel Costs*: Actual costs for local travel and conferences. No major changes from existing to 2011 budget.

Fringe benefits include FICA, unemployment compensation, workers compensation, vacation, group, life, medical insurance, pension, employee fare check, recruitment, employee recognition and other benefits.

5.3 Operational Costs

Operational costs are those direct costs related to the actual operation of the certification program. This includes items such as rent, utilities, phones, office supplies, postage, printing, and film.

The following cost items were included under the operational costs category:

- *Rent/Utilities*: Costs based on a square foot calculation related to the actual space allocated to the certification program. The 2010 calculation was based on nine months of rent/utilities costs for the second floor square foot space and three months of rent/utilities costs for the 15th floor square foot space. The 2011

budget was based solely on the 15th floor square footage. Cost includes shared space and storage areas.

- *IT/Telephone*: Costs based on head count allocation method. Includes computer software, hardware, software licenses, maintenance, support, telephone, and internet.
- *Office supplies/services*: Costs based on head count allocation method. Includes messenger, express mail, data services, office equipment maintenance, office and other supplies, furniture, property, liability insurance, security, public meetings, advertising, and records storage.
- *Outside design, production, and in-house printing*: Actual printing and production expenses. 2011 budget based on 2010 application levels.
- *Mailing House (outside printing and postage)*: Based on actual expenses. The Mailing House prints and direct mails applications. Due to increased applications in 2010, actual expenses were much higher previous years. 2011 budget based on 2010 application levels.
- *In-House Postage*: Based on actual expenses. RTA staff estimates mailing 1,000 – 1,500 determine notices/letters per month. Similar to mailing house expenses, costs increased in 2010 due to increased applications. 2011 budget based on 2010 levels. RTA postage budget includes first class for recertification notices and business reply for other mailings.
- *Film*: Based on actual expenses for film for ID card photos. 2011 budget anticipates much lower costs due to changing to digital cameras.
- *Formal Hearing (appeals)*: Based on actual costs for applicant appeals related to the Eligibility Review Board (ERB), such as per diems and training for ERB members. No changes from existing to 2011 budget.

5.4 Contractor Costs

Contractor costs include costs for the interview/assessment sites, contracted certifiers, transportation to and from the assessment sites, translation/interpreter fees, and ID card productions. As noted in Section 2, the RTA has contracts with several companies that assist with various aspects of the certification process. These companies and the cost provisions of their contracts are briefly described below.

Community Alternatives Unlimited – Interviews and Functional Assessments

The contract between the RTA and CAU provides for payment of fixed costs plus per unit costs. Unit costs have been established for in-person interview, physical functional assessments, FACTS tests, and MMSEs. A unit cost has also been established for an In-Depth Review, which as noted above is a follow-up review which can be requested by the RTA for use in the appeal process and more often to update functional information following a temporary disability certification. The fixed costs and unit rates established in the contract are:

- Fixed Cost $53,866 per month

- Interviews — $54 per completed interview
- Same-Day Cancels — $20 for scheduled interviews cancelled the same day
- No-Show Interviews — $20 for scheduled but no-showed interview
- Physical Assessments — $54 per completed physical functional assessment
- FACTS Tests — $54 per completed FACTS test
- MMSEs — $30 per completed MMSE
- In-Depth review — $54 per completed In-Depth Review

In 2010, the RTA reimbursed CAU $646,392 for fixed costs and management services, and $1,417,027 for interviews and assessments. Similar fixed costs are projected in Table 2.1 for 2011. Variable costs are increased slightly based on the projected number of applications.

Pace Suburban Bus – Provision of Transportation to and From Interviews

The RTA has an Intergovernmental Agreement (IGA) with Pace for the provision of transportation to and from interview/assessment sites. The IGA provides for reimbursement on a per hour basis for van services and on zone basis for taxi trips (using the established taxi zone rate set by Pace for the region). Pace is also paid an administrative fee for handling and arranging the trips of 30% of the total direct service cost. In calendar year 2010, the average cost per trip for all trips provided – taxied as well as van trips including the 30% administrative fee – was about $72.00.

In 2010, the RTA reimbursed Pace a total of $1,735,275 for transportation to and from assessment sites. The 2011 budget is based on 2010 levels.

Lighthouse for the Blind - Braille Materials and Travel Training

The RTA has a contract with the Lighthouse for the Blind for the production of public information and determination materials in Braille. In 2010, a total of $5,805 was paid to the Lighthouse for these production services.

The RTA also contracts with the Lighthouse for the Blind to assist with the Travel Training Program. Individuals with vision disabilities who require specialized orientation and mobility instruction are referred to the Lighthouse. The Lighthouse conducts pre-training assessments, full training for individuals who are identified as appropriate candidates, and one month follow-ups once training has been completed. RTA reimburses the Lighthouse $100 per pre-training assessment, $900 per trainee fully travel trained, and $55 per one month follow-up. An administrative reimbursement of $225 per trainee referred is also provided. The current contract provides for up to $38,000 in travel training services to be provided over a two year period.

Table 2.1 shows actual expenses for audio and Braille translation fees and ASL interpreters in 2010. While costs went down in 2010, the 2011 budget anticipates higher costs.

ScreenCheck NA – Preparation and Mailing of Photo IDs

Finally, the RTA has a contract with ScreenCheck NA for the production and mailing of ID cards. The contract with ScreenCheck NA includes a unit cost per ID card and a monthly fixed fee. In 2010, ScreenCheck NA was reimbursed $40,643 for this service.

Other Consulting Costs

Primary cost in this category is cost for the contracted certifier. Actual costs for 2010 were $22,971. With increased applications in 2010 expected to continue in 2011, more contracted certifier time will be needed and costs are anticipated to be much higher in 2011.

5.5 Cost Summary

Cost information was collected for 2009 and 2010, and the agency 2011 budget. Based on the information provided by the RTA, the annual cost for the ADA paratransit certification program was calculated. Using the number of annual applications for each of these years, a per application cost was derived. Table 5.2 presents the annual costs by cost category and the per application cost.

Table 5.2 RTA Paratransit Certification Costs per Application

	2009 Actual	2010 Actual	2011 Budget
Annual Staffing Costs	$1,171,883	$1,260,180	$1,350,882
Annual Operational Costs	$377,376	$466,856	$435,745
Annual Appeals Cost	$45,750	$43,952	$44,847
Annual Contractor Costs	$1,622,498	$2,086,390	$2,149,400
Annual Transportation Costs	$1,182,067	$1,735,275	$1,800,000
Annual Program Cost	$4,399,574	$5,592,653	5,780,874
Annual Applications	10,803	12,673	12,600
Cost per Application	$407	$441	$459

5.6 Assets

The assets of the program were also documented. This information was needed to determine what assets might be transferred to Pace should the program be transferred,

and what new assets might be needed. An inventory of assets used by staff in evaluating and determining ADA paratransit eligibility was conducted using the following methods:

- On-site interviews with RTA and CAU staff during the week of December 6, 2010.
- Tours of RTA and CAU property during the week of December 6, 2010.
- Completion of an asset inventory form by RTA and CAU staff.

When assembling the inventory from these sources, any questions concerning assets were answered by RTA staff in January and February.

ADA Certification Program Assets

The assets located at the RTA and used for the determination of ADA paratransit eligibility can be generally grouped into two categories: technology assets and office furnishings assets. Each category is described below.

Technology Assets

The technology assets used as part of the ADA paratransit certification program are presented in Table 5.3.

Table 5.3 Technology Assets

Item	Quantity	Purchase Price	Age (years)	Transferable
Phones	18	$326	6	No
Computer Monitors	18	$189 (average)	4.6 (average)	No
Computer[1]	18	$959 (average)	3.5 (average)	No
Xerox Work Centre 5645 Photocopier	1	Leased	N/A	No
HP Color Laser Jet 3600 Printer	1	$859	1	No
HP Laser Jet 4200 Printer	1	$699	2	No
Canon Laser Class 9000L Fax Machine	1	799	3	No
Document Shredder	1	$1515	2	No

Office Furnishing Assets

These assets include two offices and 15 workspaces dedicated to staff assisting with the ADA eligibility process at the RTA. Each office includes the following items:

- Desk and chair
- Two guest chairs

- Filing cabinets
- Book cases

Each workspace includes the following items:
- Desk and chair
- Under desk 3 drawer file
- Under desk 2 drawer file
- Overhead bin and shelf

In addition to office furniture used for office and work spaces, there are other office furnishings. These include:
- Office supply shelving
- Record storage shelving
- Five drawer file cabinets (3)
- Three drawer file cabinets
- Printer stands (2)
- Table for fax machine

Office Furnishing Costs

The purchase price and age of the office furniture located at the RTA was not provided. It is assumed that all new furniture will be purchased if the ADA paratransit certification function is moved to another location.

CAU Assets

CAU has assets at its five interview and assessment locations that are dedicated to their contract with the RTA. These assets can be generally grouped into three categories:
1. Assessment related
2. Technology assets
3. Office furnishings

Assets are either provided by the RTA or have been purchased with RTA funds and can be transferred to another location if needed.

The assessment-related assets include an informational DVD and mock lift, curb and bus steps. Each of these assets is located at all 5 locations except for the mock bus steps. These are only located at the Libertyville and Naperville locations. These assets are provided by the RTA and could be transferred to a different assessment location.

Table 5.4 provides a list of technology related assets located at CAU locations.

Table 5.4 CAU Technology Related Assets

Item	Quantity	Purchase Price	Age (years)	Transferable
Instant Camera	8	Provided by RTA	N/A	Yes
TV/DVD	5	$200-$400	Varies	Yes
Desktop Computer	12	$1,000	1	Yes
Laptop Computer	6	$1,750	1	Yes
Fax Machine	2	$105	1	Yes

Table 5.5 presents a list of office furnishings that CAU has indicated could be transferred to another location.

Table 5.5 CAU Office Furniture Assets

Item	Quantity	Purchase Price	Age (years)	Transferable
Cubicle	9	$450-$500	4	Yes
Steel Cabinet	9	$300	3	Yes
Table	6	$150-$200	1-3	Yes
Steel Desk	1	$500	2	Yes
Chair	4	$150	4	Yes
Folding Wall	1	$15,750	1	Yes
Power Front Door	2	$3,750-$4,270	1-4	Yes
Refrigerator	5	$250-$350	5-7	Yes
Microwave	5	$110-$150	5	Yes

5.7 Estimated Cost of Assets

Since many of the assets located at the RTA are unlikely to be moved if the ADA paratransit certification function is relocated, the cost to purchase new assets was estimated based on typical costs and are shown in the Table 5.6.

The current Automated Call Director (ACD) used by the RTA has reached the end of its useful life. Regardless of where the ADA paratransit certification function is located, a new ACD needs to be purchased.

Table 5.6 Estimated Asset Costs

Item	Quantity Needed	Estimated Price	Estimated Start-up Cost
Phones	18	$200	$3,600
Computer Monitors	18	$200	$3,600
Desktop Computers	18	$900	$16,200
Photocopier	1	Lease	N/A
Color Laser Printer	1	$850	$850
Black & White Laser Printer	1	$900	$900
Fax Machine	1	$700	$700
Workstations[4]	15	$2,000	$30,000
Office Furniture[5]	2	$1,900	$3,800
Other Furniture[6]	N/A	$4,000	$4,000

5.8 Future Program Cost Estimates

Based on the $441 cost per application as previously presented in Table 5.2, the cost for future years was estimated. As noted in Section 3, there was a significant increase in the number of applications received in 2010, which appears to be continuing into 2011. Additional staff are needed to meet the current demand. One additional Certifier is needed and the temporary Customer Service Representative position needs to be made a permanent position to meet the current demand. These additional staff costs were factored into the future cost projections. It should be noted that Section 8 contains recommendations for ways that the current process might be streamlined to help offset the need for future additional staff related to the forecast of increased demand. It is estimated that salary plus benefits for the ADA Certifier would range from $69,800 to $96,100. The estimated salary plus benefits for the full time Customer Service position is $43,000 to $50,800.

These two additional positions would increase the cost per application to $450 (from $441 in 2010). This rate was applied to all future years, so no inflation rate was applied. The projected costs are also based on current contract rates and the projected number of applications. Should the rates change or the actual number of applications change, the actual costs would also change, as well as accounting for inflation. Cost estimates for 2011 through 2015 are presented below in Table 5.7.

[4] Workstation is similar to current ones located at the RTA. Price does not include installation.
[5] Office furniture includes desk, chair, guest chairs, 2 bookcases, and 2 filing cabinets. Price does not include installation.
[6] Includes office supply shelving, printer stands, filing cabinets and a table.

Table 5.7 Estimate ADA Certification Program Costs, 2011 – 2015

	2011	2012	2013	2014	2015
Projected No. of Applications [(1)(2)]	12,600	13,200	13,800	14,500	15,100
Cost per Application (2010)	$450	$450	$450	$450	$450
Projected ADA Paratransit Certification Program Costs [(3)]	$5,670,000	$5,940,000	$6,210,000	$6,525,000	$6,795,000

(1) Number of applications rounded to nearest 100.

(2) As noted in Section 3.4, since this analysis was completed in early 2011 the RTA certification program has experienced an increase in applications for the first half of the year rather than the 0.6% decreased estimated in the projection. ADA paratransit ridership has also increased during the same period. **Therefore, the projections made in this report, and the recommendations related to them, need to be used with caution and may need to be adjusted based on actual results for 2011.**

(3) Program costs rounded to nearest $1,000.

5.9 Program Relocation Costs

This section estimates a one-time start-up cost for transferring the ADA paratransit certification program from the RTA to Pace. This estimate addresses only the certification unit and does not include travel training or the ERB/appeals process. One-time start up costs identified would include costs for building-out adequate space to accommodate the staff and equipment, costs to move and assemble equipment and supplies, costs to replace equipment that is not transferred or is in immediate need of replacement, and potential costs for differences in benefits packages between the RTA and Pace.

Moving/Build-Out Costs

The RTA ADA paratransit certification unit was recently relocated from the 2nd floor of the current building to the 15th floor. The cost for this move gives an indication of the activities and costs required to relocate this program to Pace. Table 5.8 summarizes the activities and associated costs included in the move from the 2nd floor to the 15th floor: Note that these costs will be different depending on the location the certification program is moved to and the associated build-out expenses related to the new location.

Assets

The cost to relocate the paratransit certification function to Pace was estimated by combining the estimated costs for required assets. Assets to be acquired by Pace to

operate the ADA paratransit certification program at existing (2010) levels are presented below in Table 5.9. A photocopier will also need to be leased in addition to assets that are purchased.

Table 5.8 RTA ADA Paratransit Certification Relocation Costs 2nd to 15th Floors

ITEM	COST [1]
Assemble Workstations	$8,000
Dismantle, Move, Reassemble, and Expand Files Storage System	$9,000
Move/Interfile ADA Dept. Records	$7,000
Move Office Equipment & Personnel	$4,000
Remodeling ADA staff offices (1,500 sf)	$68,000
Remodeling Storeroom and File room (700 sf)	$7,000
TOTAL	**$103,000**

[1] Costs rounded up to nearest $1,000.

Table 5.9 Estimated Asset Relocation Expenses

ASSET	TOTAL COST [1]
Phones	$4,000
Phone software upgrade	$45,000
Computer Monitors	$4,000
Desktop Computers	$17,000
Color Laser Printer	$1,000
Black & White Laser Printer	$1,000
Fax Machine	$1,000
Workstations	$30,000
Office Furniture	$3,000
Other Furniture	$4,000
TOTAL	**$110,000**

[1] Costs rounded up to nearest $1,000.

Salaries and Benefits
Should the ADA paratransit certification program be relocated from the RTA to Pace, this would include not only program assets, but existing RTA personnel as well. There are currently 16 staff positions (plus two temporary staff and contracted staff) at the RTA. Since the RTA and Pace each have their own compensation and benefits package, there will be some differences that would need to be addressed with a move.

Salaries
Should the ADA paratransit certification program be transferred to Pace, it was assumed that each current RTA staff would be compensated at a base salary equal to the salary currently being paid at the RTA. Therefore, no salary costs are included in the onetime start up costs. Future salary increases would be based on Pace salary grades for each position.

Benefits
A summary table of RTA benefits compared to Pace benefits was prepared. The major differences between RTA benefits and Pace benefits are related to medical/dental insurance costs, life insurance costs, holiday/PTO days, and transit benefits, as described below.

- *Medical/Dental/ insurance costs*: Pace plan requires higher individual employee contribution than RTA plan.
- *Life Insurance*: Pace plan requires higher individual employee contribution than RTA plan.
- *Holiday/PTO days*: RTA offers 12 holiday and 12 PTO days for a total of 24 paid days. Pace offers 6 holidays and 15 PTO days for a total of 21 paid days.
- *Transit benefits*: RTA offers transit benefits applicable to CTA, Pace, or Metra. Pace offers transit benefits only to Pace services.

A total cost impact of these differences cannot be determined without a complete analysis by individual employee. However, a summary of the cost implications related to these differences is presented in Table 5.10.

Table 5.10 Benefits Comparison, RTA vs. Pace

Category	Item	RTA Employee Contribution	Pace Employee Contribution	Monthly Cost Difference	Yearly Cost Difference
Medical	PMO:				
	Employee	$25.69	$77.05	$51.36	$616.32
	Emp + Child	$59.13	$174.33	$115.20	$1,382.40
	Emp + Spouse	$61.61	$185.55	$123.94	$1,487.28
	Family	$91.48	$201.59	$110.11	$1,321.32
	HMO:				
	Employee	$0.00	$34.93	$34.93	$419.16
	Emp + Child	$15.00	$91.59	$76.59	$919.08
	Emp + Spouse	$20.00	$97.50	$77.50	$930.00
	Family	$25.00	$105.95	$80.95	$971.40
	HMO Blue Adv.				
	Employee	$0.00	$29.90	$29.90	$358.80
	Emp + Child	$0.00	$78.43	$78.43	$941.16
	Emp + Spouse	$0.00	$83.53	$83.53	$1,002.36
	Family	$0.00	$90.74	$90.74	$1,088.88
Dental	Employee	$0.00	$3.38	$3.38	$40.56
	Emp + Child	$0.00	$8.15	$8.15	$97.80
	Emp + Spouse	$0.00	$8.15	$8.15	$97.80
	Family	$0.00	$8.15	$8.15	$97.80
Days Off	Holiday	12	6	6	
	PTO	12	15	-3	
Transit Benefits		varies	varies	varies	

6 First-Hand Observations of the Program

In addition to reviewing program policies, materials, and reports, and interviewing program staff, the review team observed several interviews and assessments at the five sites. The review team worked with RTA staff to randomly select 100 recently completed determinations for review. Application files were reviewed and, where questions were noted, were discussed with the RTA Certifiers who had made the determinations. Following is a summary of observations for each of these activities.

6.1 First-Hand Observations of Interviews and Assessments

A total of 13 interviews/assessments were observed, completed by eight different CAU Assessors. Some applicants participated in more than one functional assessment. In total, 13 interviews, 9 physical functional assessments, 4 FACTS tests, and 1 MMSE were observed.

Interviews

Overall, CAU Assessors appear to do an excellent job of interviewing applicants. The interviews are very professional and relaxed. The Assessors engage applicants successfully and encourage a free flow of information. While being sure to cover all applicable sections of the interview guide, Assessors quickly focus on the key travel abilities and limitations of applicants.

Assessors capture general information about current fixed route use, but do not always follow-up with more specific questions about current use of buses and trains. For example, they might note that an applicant "uses fixed route buses twice a week," but they do not always ask and record which buses are typically used, or which trips applicants currently make by bus or train. This added detail could be very useful in making trip-by-trip eligibility decisions. If certain frequent trips were known to be able to be made by bus or train, and if applicants indicated they could make these trips in different environmental condition, the trips could be entered into rider conditions of eligibility under a "Conditional – Trips Not Eligible" category. Even if it was determined that the trips could only be made in certain conditions (e.g., non-winter months), both categories of eligibility could be listed and the trips could still be screened. This apparently was not being done because the current "Conditional – Orientation – Trips Not Eligible" category was used mainly for riders with cognitive or vision disabilities who had learned to use fixed route service through travel training.

The initial question about variable disability conditions is sometimes too broad. Typically, the Assessors asked something like "Do you have some days that are good days and some days that are bad days?" It is asked in a way that would lead most applicants (or just about anyone) to indicate that there are days when they feel better than others.

There also appears to be a lot of duplication in questions about maximum walking distance under various conditions. Applicants are first asked for the maximum walking distance on a "good day." Then, if they indicate they have good days and bad days (which virtually every applicant we observed said was the case), they are asked for the maximum distance on a "bad day." Then, when asked about effects of temperatures, they are asked about the maximum distance on "bad weather days." Finally, when asked about the effects of snow and ice, they are asked about the maximum walking distance on "snow/ice days." The cumulative effect of all these distance questions seems to get applicants and Assessors thinking in terms of limitations in endurance rather than maximum abilities.

Recommendations

It is recommended that Assessors change the way they ask about variable disability conditions. We would recommend that applicants first be asked an initial, general question about maximum walking distances, then asked something like "Are you able to go this distance on most days?", and then ask for a lesser distance only if applicants indicate they often cannot go this maximum distance most of the time. For temperatures, applicants should be asked if their "Ability to travel in the community is significantly limited by hotter or colder temperatures" and all answers should be followed up on to clarify specifically why it is related to the disability or health condition (since most people would simply not prefer to travel outside on very hot or cold days). If travel is prevented, because of the disability, by hot or cold temperatures, this should be noted. More detail about travel distances in hot or cold temperatures is not needed. The determination should either be that they can or cannot (because of disability) travel in these conditions. The questions related to snow/ice should be the same. The determinations only need to determine if applicants can travel outside when there is snow or ice. Applicants affected by snow/ice will be so affected for any reasonable distance – either they will be at unreasonable risk of falling or not; or they will be able to propel a mobility aid or not; or they will be able to detect travel paths or not.

In theory, there may be a lesser distance that applicants can travel when temperature issues or snow and ice are present. In practice, though, it was noted that once applicants indicated that temperature or snow/ice were issues, the maximum distances indicated under these conditions were almost always very limited (i.e., "to curb"). There did not seem to be much utility in trying to gather this level of detail. And, on the other hand, trying to gather this detail was complicating the discussion and identification of meaningful variable conditions.

Assessors sometimes would also ask about the maximum walking distance "to get to bus stops or train stations." This can automatically build a bias into the answers provided by applicants. The initial question about distances that can be traveled should be broad and general, such as "How far are you able to walk/wheel when you go out?"

Decisions to Administer Functional Assessments

In two of the observations, Assessors made a decision to only conduct interviews. In the other 11 observations, Assessors made decisions to administer one or more functional assessments. In each case, the choice of assessments appeared appropriate. In nine cases, there was a need to document physical functional ability – particularly maximum walking distance, walking speed and balance. In the four instances where the FACTS test was administered, there were reported intellectual issues. And in the one case where the MMSE was administered, there were possible issues with memory.

Physical Functional Assessments

CAU Assessors did a good job of deciding when to ask participants to participate in a physical functional assessment. In the four cases where physical functional assessments were not administered, it was clear that the applicants were All Trip eligible, or that the type of disability did not raise issues of physical functional ability.

Assessors did a good job of explaining the assessment to applicants at the outset. This is important for obtaining observations that mimic what applicants can do when routinely traveling in the community (rather than when traveling as part of a "test").

The outdoor courses at two of the five sites had limitations that probably impact the assessments. At Higgins Road, the assessment course involves walking around the small cul-de-sac at the entrance to the office building. Applicants have to walk around the same route four times, each time passing right by the entrance back into the building. The route also does not have a street crossing that simulated a real urban environment. On the assessment observed at this site, the applicant asked to go back in after one trip around, even though it seemed that she could have easily gone farther. At Libertyville, the route is completely within the parking area of the facility since the entrance from the street into the facility is up a very steep slope that cannot be negotiated to get back to the street (and the street does not have a sidewalk even if Assessors and applicants could get to the street). Again, it does not have a street crossing of any type.

On the other hand, the outdoor routes at three of the sites were quite good. The route at the Peoria Street site involves actual street crossings in downtown Chicago and sidewalks in various states of repair. The route can also be completed without passing by the entrance to the assessment center too many times (some repetition is good so that the assessment can easily be stopped if necessary). The one drawback that was noticed with the Peoria route was that the first curb cut encountered on the route is not ADAAG compliant. It has an uneven transition from the bottom of the cut to the street, which can be difficult for applicants to navigate. On one of the outdoor physical functional assessments observed, an applicant who uses a manual wheelchair got stuck at this spot because of the difficult transition combined with a small amount of snow and

ice on the ramp. If the curb cut had been compliant, she would have had no difficulty. Her difficulty with the curb cut was noted by the Assessor and considered in the final decision by the Certifier.

The Naperville assessment route was also quite good, with applicants asked to walk along the sidewalks on Washington Street in Naperville and across side roads to Washington Street. The route leads to a bus stop on Washington (which adds to the reality of the assessment), and only requires two cycles for a full, four block distance assessment. The only minor drawback on this route is that the street crossings are all uncontrolled and the side streets crossed have almost no traffic.

The Alsip location has a fair outdoor course, which includes traveling from the strip mall in which the assessment center (Alsip Square) is located, out to South Pulaski Street, and along the sidewalk on Pulaski to a Pace bus stop. Because Pulaski can be very busy and is very wide, it is not used for assessing street crossing ability. The "street crossing" is assessed at one of the access roads within the mall parking area. Four blocks along this route can also be completed in only two cycles.

There was also some variation in the features and limitations of the indoor routes, used during extreme weather days. The indoor route at Higgins Road was good, with long corridors within the office complex that could be used. The availability of an indoor route at Libertyville was also good, with two long indoor corridors in the complex. The layout of the route had some issues, though. Applicants were asked to walk down one short hall, double back past the assessment office door, turn around and pass the office door again, walk past the elevators and down a second corridor, and return and repeat. This route had to be repeated two times. If completed twice, applicants passed by the assessment office door six times, which could lead applicants to want to end the assessment.

The indoor route at Naperville was somewhat limited. It involved traveling around a short indoor loop of corridors that would need to be repeated four times to simulate four blocks (which becomes very repetitive).

The indoor routes at Alsip and Peoria Street are very limited. There are no long indoor corridors that can be used at either of these sites. So the indoor assessment involves walking applicants around the very limited office space (and the small corridors just outside the office in the case of Peoria).

The two review team members who observed the nine physical functional assessments noted the following:

Assessors did a good job of adding comments to the assessment forms that are important for interpreting the specific assessment measurements. They consistently indicated whether they felt applicants were giving maximum effort, and noted observations about changes in walking speeds or gait.

Assessors did a good job of observing and noting abilities to navigate curbs and curb cuts, and walking speeds and street crossing times.

A few of the Assessors did a good job of carrying on a casual conversation with applicants along the routes. This is important for simulating travel in an actual transit environment and keeping applicants from focusing on the walk as a "test." In a couple of cases, though, conversation was very limited and typically only involved the Assessors asking the applicants "How do you feel?" or "Can you continue or would you like to go back?" or "Are you feeling short of breath?" Such questions are important when Assessors notice a change in gait or walking speed or signs of distress, but it seemed that often the Assessors would ask mainly because they had reached a certain spot on the route (such as one of the repetitive turns in the indoor course). Questions like "Can you continue or would you like to go back?" were sometimes asked as the applicants were passing by the assessment office door or main entrance (as the route often doubled-back).

In three of the nine physical assessments observed, the review team members felt that applicants probably could have traveled further. In two cases, applicants indicated they would like to go back to the office after being asked for the first time if they could continue or would they like to go back. Neither appeared to have changed their pace or gait significantly or showed signs of distress, and one person even quickened her pace on the return to the office. The third person was being assessed on a very cold day in January and appeared to elect to return more due to the cold than for any endurance reasons. Her maximum walking distance was indicated by the Assessor to be one and a half blocks even though she had a cognitive disability, indicated using one known bus route to go to and from the mall, and indicated traveling at least two blocks each way to get to and from this bus. It should be noted that in this case, the RTA Certifier appropriately discounted the notes related to endurance and granted "Conditional – Orientation – Transfer trips" eligibility, but the notes from the Assessor indicated a maximum walking distance of only "1+" blocks in cold weather.

While applicant safety needs to be of utmost importance, and our observations were limited, it still seemed that full potential in terms of walking distance was not being obtained in the physical functional assessments. Most Assessors did not seem to encourage applicants to go further if no signs of distress or changes in pace or gait were noted. Most discontinued the assessment at the first indication from applicants that they wanted to return to the office. These indications from applicants sometimes came as a result of Assessors asking if they wanted to continue when there did not seem to be any obvious signs of distress.

It was also noted that Assessors did not record walking times at intervals along the assessment route. This is recommended in the Easter Seals Project ACTION (ESPA) guidance on conducting physical functional assessments. The ESPA guidance suggests that the elapsed time be recorded at 330' intervals along the route. This is important for documenting whether the walking speed of applicants is slowing as the distance increases (an important factor in setting maximum walking distance). This was

discussed with the CAU and RTA managers. It was indicated that a decision was made not to have Assessors carry a clipboard to make these types of observations in real time. It was explained that this was decided partly for safety reasons (to allow Assessors to have both hands free should assistance be needed), and to minimize the perception of being closely observed and recorded. Information collected from other systems, though, indicated that Assessors typically carry either a clipboard or a small note pad and do make distance, time, and other observations along the way.

Recommendations

It is recommended that the protocol and guidance for determining maximum walking distance be reviewed. Communications between the Assessors and applicants, in particular, should be reviewed to ensure that maximum efforts are being encouraged. The assessment routes should also be evaluated and adjusted where possible to reduce the number of times that applicants pass by the entrance to the assessment sites. An approach for recording times at 330' intervals, as recommended by ESPA and done by other systems contacted, should also be developed.

FACTS Tests

Three different CAU Assessors were observed administering the FACTS test to applicants with intellectual disabilities. A total of four FACTS tests were observed. In all four cases, the Assessors appeared to be well versed in administering the test, followed the script meticulously, and scored the test accurately and appropriately. They also engaged applicants in the test and, in cases where it was needed, discontinued the test when the applicant's abilities were exceeded.

MMSEs

Only one MMSE was observed. In this one case, the Assessor seemed well versed in how to administer the test. She explained the purpose of the test and was very professional in the way she asked the questions (the test can sometimes be considered disrespectful if not well explained or administered – this was not the case in the instance observed).

6.2 Review of 100 Sample Determinations

As part of the review, two review team members examined a random sample of 100 completed determinations. The determinations included 8 of the 13 applicants whose interviews and assessments had been observed first-hand (five were observed during the same site visit as the file reviews and final determinations had not been made at the time of the selection of files). The sample also included 92 determinations completed in early January 2011. Samples were drawn randomly for determinations completed by four of the RTAs five Certifiers (the fifth Certifier had retired when this part of the review was performed).

The random selection closely mirrored the types of determinations typically made. Two of the 100 sample determinations found applicants Not Eligible, which is very similar to the 1-2% systemwide average. The types of determinations reviewed in the random sample also were similar to the eligibility of all riders in the system, as shown below.

	Sample	All Eligible Riders
All Trips	79%	80%
Conditional	14%	18%
Temporary	7%	2%

The members of the review team first examined all information in the files. This included the application form, interview form, any forms completed for assessments conducted, the "Eligibility Observations" (summary) form completed by the CAU Assessors, any additional information gathered by the Certifiers or submitted by applicants, and final determination letters and documentation. The file review considered whether appropriate decisions were made by CAU staff about the types of assessments (if any) that should be performed. It also considered whether the information in the file supported the final determination made by the RTA Certifiers.

A subset of the 100 files was then identified. These included files where the review team had questions about the determination that was made. The team members then met with each Certifier to discuss these files. Based on the file review and these follow-up discussions, the team members identified files where they felt a different decision might have been appropriate or where additional information might have been useful.

Observations and Findings

Of the 100 sample determinations reviewed, four were Mail-In Recertifications, eligibility was clear and there were no questions about the decisions to allow applicants to apply using this simplified process. In another 24 cases, interviews were conducted but no functional assessments were administered. In 23 of these cases, the information in the file supported the decision to only conduct interviews. Given the health conditions and the disabilities reported and documented, functional assessments did not appear to be needed. In most of these cases, applicants either had severe physical disabilities and could not independently propel their mobility devices, or had significant and apparent intellectual or cognitive disabilities. The review team questioned only one of the cases where the Assessor elected to not administer any functional assessments. The applicant had some vision loss, but no specific visual acuity information was provided. The applicant was denied eligibility without an assessment. It may have been appropriate to have the applicant participate in the physical functional assessment to observe whether the level of vision loss affected travel along the assessment route (likely an unfamiliar area). The observations may have been helpful in supporting the decision.

In 62 of the 72 cases where some form of functional assessment was completed, physical functional assessments were administered. In eight cases, the FACTS test

was administered. In 18 cases, the MMSE was administered. Note that the number of physical, FACTS and MMSE assessments do not total to 72 (the number of applicants participating in some form of functional assessment) since several applicants participated in more than one type of assessment. In each case, the types of health conditions and disabilities indicated and the interview documentation appeared to support the decisions to administer these particular types of assessments.

In 78 of the 100 sample cases reviewed, the final decisions appeared to be clearly supported by the information in the files and in 22 cases the review team noted some questions. A high percentage of applicants of the 78 presented with significant health conditions and disabilities. Some had significant intellectual or memory limitations and the determinations were very clear. Others had multiple health conditions, very limited mobility, and these decisions were also very obvious.

The review team discussed the 22 cases about which there were questions with the RTA Certifiers who had made the final eligibility decisions. In 21 of these cases, the review team members determined based on these discussions that the Certifiers had made appropriate decisions given the information in the files, or information they subsequently collected. In only one case did the review team leave the discussion feeling that a different decision might have been appropriate. This case involved an applicant with vision loss and an intellectual disability. All Trip eligibility was granted. The review team felt that Conditional-Orientation-Transfer Trips, and Conditional-Path of Travel-Street Crossings eligibility might have been more appropriate.

The discussions with Certifiers about nine other determinations also raised some questions about the information collected and used in the determinations. Based on the information in the files, the decisions of the Certifiers appeared correct, but there was some question about the accuracy of the assessments or use of fixed route that might have been explored further in the interviews. One common issue was that the process sometimes did not seem to document the maximum walking abilities of applicants. A second issue was that applicants sometimes indicated use of certain fixed routes, but this was not fully explored and made part of the final determination where appropriate.

Finally, the review of 100 sample determinations also identified a few other cases where information from professionals verifying the existence of claimed health conditions, or the extent of those health conditions, would have been helpful. A significant number of applicants reported non-apparent disabilities and health conditions such as arthritis and back or hip or knee pain. Documentation of these health conditions would have been helpful in verifying the claimed limitations in function.

Overall Findings

Overall, the review found that RTA Certifiers do a very good job of making accurate eligibility determinations. In the vast majority of cases examined, the decisions appeared to be appropriate given the information in the file.

In a few instances, potential issues with the information obtained in the interviews and assessments were noted. Certifiers appeared to often rely heavily on the maximum walking distance documented in the physical functional assessments. In a few instances, it appears that Assessors may not have identified the maximum ability of applicants. In other cases, reported use of fixed route services did not appear to be fully explored in the interviews. And in a few cases, it may have been helpful to have professional verification of the disabilities reported and the functional abilities observed.

It is important to note, though, that these observations are based primarily on an interpretation on a selected number of application files. None of the information presented is determinative. However, the review suggests further examination of these issues to make the current process, which appears to be very thorough, even stronger and more accurate.

7 Certification Programs at Other Selected Systems

This section provides information about the ADA paratransit certification programs in four selected large city transit systems. The systems were selected based on a number of factors, but primarily the incorporation of in-person assessments and implementation of trip screening for those who are determined conditionally eligible. A fifth (smaller) system – Utah Transit Authority (UTA) – also was included because of its experience with conditional eligibility and trip screening practices.

The review team, with input from RTA staff, developed a list of questions to be addressed to ADA paratransit systems to identify trends and best practices in these systems' eligibility processes. A short questionnaire was sent to each system prior to the telephone interview. Telephone interviews were conducted with representatives of each system, and in some instances follow-up documentation was submitted to the team. Following are some of the highlights from this system comparison:

- Like RTA, most systems that have adopted in-person assessments for their eligibility process require that all or almost all applicants appear in-person, at least for their initial certification. Las Vegas, Pittsburgh and Utah require all initial applicants to participate in in-person interviews, and to participate in assessments as needed, based on the outcome of the interviews. Seattle asks 95% of initial applicants to appear in-person. Philadelphia requires in-person assessments of only those applicants whose eligibility cannot be clearly determined based on a review of a paper application and telephone follow-up (about 30%).
- In two of the systems examined (Las Vegas and Utah), transit agency staff, co-located with contracted staff, perform the initial interview and make the decision to perform additional assessments as needed. This provides transit agency staff, who make the final determination of eligibility, with a better understanding of applicant issues. In Pittsburgh, Philadelphia and Seattle, contractor staff performs the initial interview and forwards results to transit agency staff for review in making the final determination.
- Functional assessments share many similarities across cities, but in contrast to RTA, most other systems document distance covered at specific intervals in the physical assessment, together with time taken to cover these distances.
- Similar to RTA, assessment cancellation and no-show rates of 20 to 25% are fairly common among transit systems conducting in-person assessments.
- Agencies report different approaches to the renewal process: some maintain cost savings on assessments by using a simple renewal by mail for the majority of registrants, while others maintain that since a significant proportion of existing registrants fail to renew when told they need to appear in-person, this represents a cost savings to the agency. The RTA does simplified, Mail-In Recertifications for about 12% of riders.

- As with RTA, a relatively small number of transit agencies apply eligibility conditions, but those that do have found this to be a valuable use of the agencies' resources. Over time more transit properties have begun to implement conditional eligibility as a means of more effectively using the resources available to provide ADA services. The RTA, along with the agencies selected for comparison in this report, is at the forefront of this effort. However, on a cautionary note, UTA indicated that the implementation process for applying conditional eligibility can be lengthy and should be viewed as an iterative process, with customization required along the way.
- The proportion of registrants per capita is lower for RTA than in most other cities, which is generally a positive indicator of eligibility program effectiveness, although it could be due to many factors. One possible explanation for the low ratio is due to the effectiveness of the RTA's eligibility program in clarifying the purpose of ADA paratransit services during the initial telephone contact with prospective applicants.
- The two Pennsylvania systems included in this review (SEPTA and ACCESS) have noticeably small registration bases due to availability of the comprehensive lottery-funded senior transportation program in that state, which subsidizes 85% of the paratransit trip cost for anyone 65 and older, regardless of disability status.
- RTA has a higher proportion of unconditional eligibility determinations than other systems in the sample. Four of the five systems surveyed found between 25% and 30% of applicants conditionally eligible. This range also seems typical based on the review team's broader experience. The RTA finds about 18% of applicants conditionally eligible. Some increase could be expected with the implementation of recommendations made in this report.

7.1 Survey Sample

Table 7.1 shows the paratransit systems that were included in our sample, and their eligibility program characteristics. Although UTA was included in the sample, the team largely limited information gathering for this system to the trip screening function since the registration base is so much smaller than Chicago's. ACCESS in Pittsburgh also has a small registration base, but was included due to the agency's comprehensive approach to trip screening implementation. For each system, the following information was gathered. In some instances, more information was available from a recent peer survey effort. To the extent that this information was relevant to the current study, it has been included in this document.

- A description of the determination process
- Policies regarding interview cancellations and no-shows
- Recertification policies and approaches
- Eligibility outcome data
- Types of conditional eligibility
- Implementation of conditional/trip-by-trip eligibility
- Overall cost
- Cost per interview; per assessment
- Support technologies

Table 7.1 Transit Systems Surveyed

System/City	ADA Eligibility Process	Conditional/Trip Eligibility
RTA Chicago, IL	100% in-person interviews and assessments	Conditions established; almost no implementation
RTC Las Vegas, NV	100% in-person interviews and assessments	Conditions established; No implementation
King County Metro Seattle, WA	Paper application with in-person interviews/ assessments for 95% of applicants	Conditions established; Moderate implementation
ACCESS Pittsburgh, PA	100% in-person interviews and assessments	Conditions established and fully implemented for all trips
SEPTA Philadelphia, PA	Paper application with 30% in-person interviews and assessments	Conditions established; Significant implementation
UTA Salt Lake City, UT	100% in-person interviews and assessments	Conditions established; Moderate implementation

7.2 Process Descriptions

Regional Transportation Commission (RTC), Las Vegas, NV

The RTC provides ADA paratransit service in the greater Las Vegas area, which has a population of about 2,000,000. RTC reported receiving 5,637 applications for ADA paratransit eligibility in its most recent reporting year.

ADA paratransit eligibility applicants call the RTC to schedule an in-person interview and assessment appointment. The RTC does not send an application form in advance and applicants are not required to bring a completed application to the interview. RTC Eligibility Specialists conduct the interviews. Besides entering applicants' responses directly into the computer, the Specialists also add general observations (applicant's responsiveness, comprehension, behavior, vision, etc.). At the end of the interview, the RTC Eligibility Specialist determines if the information obtained in the interview, and any documentation of disability provided by the applicant, is sufficient to make an eligibility determination. If the information is sufficient, the interviewer will record the recommended determination and the process is complete. This is typically the case for applicants who are unconditionally eligible.

If the Eligibility Specialist feels that additional information is needed, the applicant is referred to a contracted Evaluator for a functional assessment. Applicants with physical disabilities are asked to participate in a physical functional assessment, which involves navigation of an outdoor course. The course is located in the immediate vicinity of the assessment center, and includes a simulated crossing of a very wide street, timed traffic signals, and an area of dirt and stones along the sidewalk. The assessment also

includes FACTS tests for applicants with cognitive disabilities, and Mini Mental Exams for applicants with dementia or traumatic brain injuries.

King County Metro (Seattle, WA)

King County Metro provides ADA paratransit service in Seattle and throughout the King County service area, which includes a population of more than 1.9 million. Metro reported receiving 9,166 applications for ADA paratransit eligibility in its most recent reporting year. Of these only 5,356 (58%) completed the full evaluation process, due to the multiple steps required, as described below.

Metro's Accessible Services contracts with Harborview Medical Center (HMC) to conduct in-person assessments with almost all applicants. Metro's process is unusual compared to other systems because of the strong emphasis placed on educating potential applicants about ADA paratransit and the eligibility process at the first point of contact. As a result, a significant proportion (67%) of initial callers choose to either not submit applications or do not complete the entire eligibility process.

HMC conducts an indoor interview and outdoor assessment in the neighborhood of the medical center. HMC does not use the FACTS test for people with cognitive disabilities, but they are taken on the outdoor assessment to determine their capabilities after being asked questions that are similar to the FACTS test.

While the proportion of referrals for in-person assessments has increased dramatically (from 35% in 2002 to 95% in 2010), Metro has found that the comprehensive telephone interview still provides an important benefit to both callers and the transit agency. The agency has estimated that if all callers were automatically referred for an in-person assessment, it would cost Metro an additional $876,000 per year.

ACCESS (Pittsburgh and Alleghany County)

The eligibility process used in Pittsburgh is widely considered one of the early pioneers in the implementation of in-person assessments, and is the basis for many of the best practice elements that are incorporated in the Project ACTION manual. However, one significant caveat that must be considered in the comparison of Pittsburgh's eligibility outcomes to those in other systems is that there is a comprehensive lottery-funded senior transportation network available throughout Pennsylvania. This program is widely used by seniors who would otherwise apply for ADA paratransit eligibility. As a result, the volume of ADA paratransit applications in Pittsburgh is very small for the population that it serves, and the proportion of senior applicants is relatively small compared to other systems. The total number of ADA paratransit eligible registrants was only 4,288 in December 2010, of whom only 14% are over 65, in contrast to other systems where typically the majority of registrants fall into that age category. ACCESS reported making only 540 determinations of ADA paratransit eligibility per year.

The application procedure involves a number of steps. When the applicant calls the customer services department, the staff person determines in a brief conversation

whether the basis of the application is physical, cognitive, visual, psychiatric, or seizures, or a combination thereof. This ensures that the applicant gets the correct forms for Professional Verification. Based on the completed application, staff determine if an interview alone by ACCESS staff will suffice, or which type of functional assessment would be the most appropriate. The office environment in which the initial phase of the assessment is conducted is very basic and fitted out at low cost, since the greater emphasis is placed on evaluating the applicant in the "real world" environment in the neighborhood where the agency is located.

SEPTA CCT Connect (Philadelphia, PA)

SEPTA's ADA paratransit program is known as CCT (Customized Community Transportation) Connect. It serves an area of 2,200 square miles, and a population of approximately 3.9 million. SEPTA reported receiving 4,362 applications for ADA paratransit eligibility in its most recent reporting year. Similar to the program in Pittsburgh, all information related to eligibility needs to take into account the fact that SEPTA also provides a senior transportation program to Philadelphia seniors, known as "Shared-Ride", which has 62,000 registrants.

When a person calls Customer Service to inquire about paratransit, staff determines whether they meet the basic eligibility requirements; if they live in Philadelphia County; and, if they are 65 years of age and would therefore also qualify for the Shared Ride program. When the completed application is submitted, it is forwarded to an evaluator. The evaluator reviews applications, makes a preliminary determination, and makes two attempts to get information from the professionals listed in the application. Approximately 30% of applicants are referred to three contractors for functional assessments. Functional assessments are conducted outdoors unless there is inclement weather or the applicant refuses an outdoor assessment.

Utah Transit Authority (Salt Lake City, UT)

Due to the relatively small scale of UTA's eligibility function (4,000 registrants and about 924 determinations per year), this system was not selected as one of the primary programs for comparison with RTA. However, UTA staff were interviewed to gain an understanding of the agency's approach to conditional eligibility and the mechanisms that have been implemented to conduct trip eligibility screenings. These are described later in this chapter, but some of the relevant elements of the UTA process include the following:

- The eligibility (Special Service Business Unit) and service delivery (Operations) departments of the agency have intentionally been separated to avoid the appearance of service constraints influencing eligibility determinations
- Eligibility terms are provided for five years when an individual undergoes their second eligibility screening
- Full eligibility screenings last from one hour for existing registrants to two hours for new applicants

- UTA began implementing trip screening about five years ago, but it was a year long process that required substantial effort to identify candidates, conduct training and education of riders
- UTA experienced a substantial decline in ridership when in-person assessments were introduced. However, since this was part of a more comprehensive program that included the introduction of free fixed-route fares and travel training, the exact impact of in-person assessments is not easy to determine

7.3 Eligibility Staffing in Other Systems

All the eligibility programs in the study sample use Physical and/or Occupational Therapists to conduct their functional assessments. Table 7.2 indicates the level of staffing at each of the programs.

7.2. Staffing Levels at Other Systems

System	Number and Role of Eligibility Staff
Las Vegas RTC	RTC staff: 8 FTE's • ADA Certification Supervisor manages the overall program • Office Specialist schedules interview appointments and administrative tasks • Lead Eligibility Specialist reviews all information, makes final decisions, follows-up with professionals, and sends out letters • Three Eligibility Specialists conduct interviews • Mobility Trainer conducts travel training • SAFE Coordinator responds to requests for securement straps and places them on mobility aids Contractor Staff: • 4 FTE's including Program Manager and 2.5 FTE Evaluators
King County Metro	8.5 FTE King County Metro (excludes support from IT, budgeting, contract, and Service Quality staff) • ADA Certification Administrator • Transportation Planner (1.5 FTE) • Lead Customer Service Coordinator • Customer Service Coordinators (4) • Administrative Specialist 8 FTE Harborview Medical Center Department of Rehabilitation Medicine • Program Manager • Evaluators (4) • Patient Service Specialists (2) • Transportation Resource Specialist 11 FTE Transit Options staff • Program Manager • Transit Instructors (7) – travel training • Mobility Specialists (3) – pathway reviews (environmental assessments)

Table 7.2 cont. Staffing Levels at Other Systems

System	Number and Role of Eligibility Staff
Pittsburgh ACCESS	• 1 FTE ADA Eligibility Coordinator (reviews new applications; manages recertification process; conducts FACTS) • Less than 1 FTE (portions of two individuals' time) devoted to FACTS mental health exam • 0.4 FTE Trip eligibility function
Philadelphia SEPTA	SEPTA Customer Service unit: • ADA Eligibility Coordinator (2 FTE) • ADA Appeals Coordinator (1 FTE) • Evaluators, new applications (2 FTE / 2 part-time) • Evaluators, recertifications (6 part-time / interns) • Front Desk / Data Entry Assistant (1 FTE) • Assessment Scheduler (1 FTE) • Assessment Agencies / Contractors (3 FTE) Functional assessments are contracted out to the physical therapy departments at three entities: • Moss Rehabilitation (83% of assessments) • Mercy Hospital (14%) • Bryn Mawr Rehabilitation (3%)

7.4 Eligibility Outcomes

Table 7.3 below provides the eligibility outcomes for each of the systems surveyed:

Table 7.3 Determination Outcomes of Systems Surveyed

System/City	Eligibility Outcomes				
	Unconditional	Conditional	Temporary	Denial	Other
RTA Chicago, IL	80%	18%	2%	1%	N/A
RTC Las Vegas, NV	46%	30%	13%	9%	< 1% *
King County Metro Seattle, WA	70%	29%	Not reported	<1%	N/A
ACCESS Pittsburgh, PA	52%	29%	8%	11%	N/A
SEPTA Philadelphia, PA	38%	54%	2%	2%	4% **
UTA Salt Lake City, UT	63%	25%	6%	<1%	6% ***

* Non-ADA eligibility
** Pending determination
*** 2% Incomplete, 4% non-compliant mobility aid

7.5 Eligibility Process Policies

No-Shows

A significant minority of ADA paratransit applicants do not appear for their in-person assessments, or cancel their appointments too close to the time to reschedule. For three systems where data are available (Las Vegas, Pittsburgh and Philadelphia), the combined no-show/cancellation rate is between 20 % and 27% of scheduled assessments.

Transit agencies indicated that they have established policies to reduce the impact of assessment no-shows. In Las Vegas, no penalty is applied to new applicants who do not appear for their assessments. If they are recertifying, they are given the opportunity for one more appointment, and if they do not show up for that one they are removed from the registration list and required to reapply. In King County Metro, staff call applicants twice before sending a "no contact" letter indicating the certification process has stopped since the applicant has not responded to attempts to contact them. If the applicant responds to the letter, the certification process will continue. Applicants are allowed to cancel/no show their in-person evaluation three times before the contractor returns the application to Metro staff.

In Philadelphia, SEPTA staff makes three attempts to schedule an assessment. After the second attempt a letter is sent asking the applicant (or customer up for recertification) to call the Customer Service office. If there is no response or the individual refuses to reschedule, the evaluator is notified and the assessment process is cancelled.

Recertification

Due to cost considerations and the confidence in the initial in-person determinations, a number of systems in the study sample have limited the requirement for in-person recertifications. In Pittsburgh, about 75% of recertifications are conducted via a mail-in process, and more than half of Las Vegas recertifications are also handled via mail.

In Las Vegas, the RTC has developed a detailed list of criteria that can allow riders to be recertified by mail. This includes riders with three or more eligibility conditions, riders who are 80 years of age or older, riders with vision disabilities who cannot cross streets, riders with severe dementia or mental retardation, and riders who can travel 660' or less. For the minority of those recertifying who are required to come in, a significant proportion participate in just an interview rather than a functional assessment. This approach has represented a cost savings to the agency, since 50% of those who are required to renew by mail do not respond.

The King County Metro recertification process is similar to the original functional assessment process due to the assumption that circumstances change in mobility aid(s)

and/or functional skills. Metro considered extending the eligibility term from three to five years as a cost savings measure. However, the agency determined that 700 eligible individuals did not reapply for eligibility on an annual basis, representing 12,000 trips (based on their actual trip patterns in a 60 day period). Based on this calculation, it was determined that requiring recertification every three years was a sound practice and should be continued.

Eighty-five percent (85%) of Pittsburgh's ACCESS registrants receive a three year eligibility term. For the remainder, analysts have determined in the initial process that an unconditionally eligible registrant's condition is not expected to change. These registrants are not required to come in for a recertification assessment, but rather receive a two-sided form that essentially updates their information. For most others, a longer form is sent, but only 25% of all recertification applicants come in for an assessment, and these are usually individuals who have started using a mobility aid which enables them to have greater functionality.

In Philadelphia, SEPTA registrants are given three year eligibility terms, unless they have significant mental retardation or are totally blind and unable to be travel trained, in which case they are given 5 years of eligibility upon recertification.

Conditional Eligibility

Conditional eligibility is routinely applied in Seattle, Pittsburgh, Philadelphia and Salt Lake City, and Las Vegas plans to initiate trip screenings before the end of this year. It should be noted that many transit systems in the U.S. have yet to apply conditional eligibility, although the trend is towards greater implementation. Systems studied in this report generally have between 12 and 14 conditional categories, although King County Metro has over 20. Following is a listing of some of the key categories that are used by transit agencies in applying conditional eligibility:

- Street barriers (e.g. lack of sidewalks or curb cuts)
- Distance
- Slope
- Seasonal
- Snow/ice
- Temperatures
- Darkness
- Need for transfers on fixed-route
- Travel trained
- Dialysis

Transit agencies use a variety of approaches to apply eligibility conditions. King County Metro staff compiles a list of all conditionally eligible riders using Access for the same trip three times within three months, which is forwarded to the control center contractor. The contractor performs a "pathway review" to determine if the individual would actually be able to negotiate the paths between the nearest transit stops and their points of origin and destination. The control center contractor then makes a recommendation to

Metro. A mobility planner in the Accessible Services ADA Certification group then calls the customer about the review and sends a letter with the detailed results. If any specific trip is determined to be accessible using regular public transit, the rider is given a written 30 day notice that the trip is accessible and will no longer be available on paratransit. The rider is also sent accessible bus and pathway routing directions. Most customers call back for clarification or to raise issues. The mobility planner counsels the customer about how to make the trip by transit, provides information about transportation alternatives, offers to set up a program of transit instruction, and explains how to request an appeal or recertification. Accessible Services staff have estimated about 22,000 trips were not taken on Access in 2009 due to the pathway reviews, representing an annual savings of $844,798 in Access operating costs.

In Pittsburgh, ACCESS applicants are given very specific information about their eligibility to ensure that both reservationists and the riders have a common understanding of which trips are eligible. Since 2005 ACCESS has been applying eligibility conditions on all trips requested by those with conditional eligibility. ACCESS has found that about 29-35% of applicants are determined conditionally eligible, but they only take about 18% of the trips, and about half of those are standing orders. This proportion of trips has not changed in nearly ten years. So the screening process, while not insignificant, is not as substantial as is commonly assumed. ACCESS generates regular reports about conditional and feeder trips so that they can evaluate the barriers that create eligibility. If these can be addressed, the agency tries to implement mitigations such as making bus stops accessible, installing traffic signalization and curb cuts. The agency has had only limited success in this effort – but knowing why people need to use paratransit is helpful in planning efforts.

SEPTA uses twelve categories of conditional eligibility. Almost all conditions are applied in the provision of service. Trip by trip screening is usually applied if the person lives in an area with architectural barriers (i.e. no pavements or curb cuts). In general, CCT Connect provides the trip until staff can determine if the barriers do exist; and/or if it makes sense operationally to provide "feeder service" to/from an accessible boarding location, or to provide the full trip.

7.6 Cost Comparison with Other Systems

This section presents a general comparison of RTA eligibility costs with three other systems that were included in the review (see Table 7.4). Pittsburgh's ACCESS program has been excluded because of the special arrangement that the agency has with its eligibility contractor, which results in exceptionally low costs, and the small number of annual determinations. The Utah Transit Authority is also excluded because of the relatively small number of determinations made per year compared to the other systems. **It is important to note that a direct comparison of costs is not possible when examining each of the systems. This is due to the fact that systems may collect data differently, and in some instances the information is simply not available in the exact same format**. In the comparison below the team has attempted to address these differences and noted where discrepancies remain. However, while

noting these caveats, the information does allow for a high level comparison of the relative costs of the eligibility functions at each system.

In making a comparison of costs with other systems, the team distinguished between costs per application and cost per determination. The reason for this distinction is that application forms are received at different stages of the process in the various programs. For example, the RTA and the RTC in Las Vegas do not receive applications until applicants appear for in-person interviews and assessments. Since determinations are then made for all applicants who appear for interviews/assessments, the number of determinations made per year is therefore similar to the number of applications received. In the case of King County Metro in Seattle, applications are first sent to the transit agency for review. At this point, transit staff call applicants to discuss the appropriateness of their application and some applicants withdraw from the process. Other applicants agree to schedule in-person interviews/assessments, but then no-show these appointments and withdraw from the process. The number of final determinations is therefore much smaller than the number of applications received. Since Seattle incurs significant costs to do the initial screening and contacts, measures of costs for both applications received and determination made is needed to fairly portray the unit costs in this case.

In addition, the transportation costs of different programs vary considerably. For example, transportation costs at SEPTA are relatively low per application and per determination because only 30% of applicants are asked to participate in in-person interviews and assessments. The cost of transportation is divided by all applications received and determinations made, though, which makes the number artificially low. To get a better sense of the cost of transportation per round-trip for an in-person interview/assessment, the figures shown should be multiplied by 3.3.

On the other hand, transportation costs at the RTA are high partly due to the extremely large service area relative to the other systems and the distances traveled to and from the Assessment Centers. In order to account for these differences, Table 7.4 provides information on the transportation component separate from the program cost.

As indicated in Table 7.4, costs per application were considerably higher for RTA than for the other three systems, whether transportation is included or not. However, in terms of costs per final determination, King County Metro costs are higher than that of RTA's.

One major reason for the higher costs in the RTA system is that in-person interviews and assessments are conducted at five separate locations throughout the RTA area. Each of the other systems in Table 7.4 conducts interviews and assessments from one central location. Given the size of the RTA area, though, it would be a significant inconvenience to applicants to require that they all come to a central location. Transporting applicants to and from a single interview/assessment site would also be more costly.

Table 7.4 Certification Cost Comparison Per Application and Per Determination

					Program Cost		Transportation Cost	
System	Applications	Determinations	Progam Cost	Trans. Cost	Per Application	Per Determination	Per Application	Per Determination
RTA - Chicago	12,673	13,298	$3,367,000	$1,735,000	$266	$253	$137	$130
King County Metro - Seattle	9,166	5,095	$1,701,000	$391,000	$186	$334	$43	$77
RTC - Las Vegas	5,637	5,515	$748,000	$332,000	$133	$136	$59	$60
SEPTA - Philadelphia	4,362	4,000	$819,000	$64,000	$188	$205	$15	$16
Mean					$169	$225	$39	$51
Median					$186	$205	$43	$60

Notes:

1. Data for RTA-Chicago, RTC-Las Vegas, and SEPTA-Philadelphia is from 2010. Data for King County Metro-Seattle is from 2009. With the same process used in Seattle in 2010, it is expected that unit costs did not change significantly.
2. Numbers between the agencies may contain inconsistencies because they each compile data in different ways. The review team attempted to address these differences and develop as consistent a set of numbers as possible. The numbers provide a high level of comparison of relative costs.

   Las Vegas RTC costs exclude operational costs of the agency, but include contractor facility costs.
   King County costs exclude overhead, technology, software and storage costs;
   SEPTA contract costs include travel training, but exclude operational costs. 30% of SEPTA determinations are based on in-person assessments (in contrast to almost 100% for the other three systems);
   RTA administrative costs include staff and appeals, but exclude operational costs since these are largely excluded from the other systems
3. The number of applications and determinations is almost the same for RTA–Chicago since all applicants who appear for in-person interviews/assessments bring a completed application with them.
4. The number of applications and determinations is almost the same for RTC-Las Vegas since applications are completed at the time applicants come in for in-person interviews and assessments
5. The variation in applications versus determinations in RTA-Chicago, RTC-Las Vegas, and SEPTA-Philadelphia is due to determinations made for applications submitted in the prior reporting year.
6. The number of determinations is significantly smaller than applications in King County Metro-Seattle because applications are first sent to the transit agency for review and screening. Applicants are called and some decide not to pursue the process. Other applicants agree to have in-person interviews/assessments scheduled, but then no-show these appointments and drop-out of the process.
7. Transportation costs are treated separately from program costs because of the large RTA service region resulting in longer distances traveled. In addition, some programs do not do in-person assessments for all applicants, but conduct an interview by phone with follow-up documentation. SEPTA uses this approach.

A second major reason for RTA's higher cost is that, in addition to the five interview and assessment sites, there is a central office and staff for reviewing all information collected and making a final determination. In Las Vegas, which has one site, transit agency staff and contractor staff are co-located. Transit agency staff conducts the initial interview and contractor staff performs assessments as needed. Both staffs then consult on observations made and information collected and a final determination is made. Co-location of transit agency and contractor staff appears to allow for a more streamlined review. In Seattle and Philadelphia, where transit agency staff and contractor staff are in separate locations, the cost per determination is higher.

It is important to note that regardless of whether transit agency and contractor staff are co-located or are in separate locations, it is recommended that transit agencies maintain control of the final eligibility determinations. All of the other systems studied have transit agency staff review all information collected and make the final determinations. This oversight role is even more important at the RTA, where central review of work done at five contractor sites is important for maintaining consistent and correct determinations.

Another reason for lower costs at SEPTA is due to the fact that the majority of determinations are not based on in-person assessments. This results in lower average contractor and transportation costs, although arguably the more accurate determinations RTA expects to achieve through in-person assessments should counter-balance the short-term cost savings.

Finally, the lowered cost per application at Seattle Metro, but higher cost per determination, is due to the fact that Metro has a multi-tiered screening process for applicants. A three-question postcard must first be completed and returned. An application form must then be completed. Follow-up calls are also made to applicants to discuss the eligibility criteria and other local, non-ADA transportation options. Referrals to the assessment contractor are only made if individuals decide to pursue the process after the post card, application, and telephone call. All applications received, even if eligibility is not pursued and no interview or assessment is performed, are factored into the average cost shown in Table 7.4. At the RTA, applications are brought with applicants to interview/assessments. Like Seattle, there is still screening that occurs and many individuals who call requesting an application or who are sent an application opt out of the process along the way. These contacts are not counted in the average for the RTA in Table 7.4, though, since the screening takes place before an application is received.

Cost/Benefit of Current Process

It should be noted that while doing in-person eligibility determinations is more costly than simple paper application processes, there are significant benefits to the current process. First, in-person processes have been found to be much more thorough and accurate. Paper application processes tend to find 90% or more of all applicants

unconditionally eligible, few if any applicants conditionally eligible, and few not eligible.[7] Systems that use in-person interviews and functional assessments also tend to experience a greater degree of applicant "self-selection." Typically, 30% of more of those individuals who would otherwise have completed a paper application do not pursue eligibility if an in person interview or functional assessment is required. For these reasons, almost all large city transit systems now use some form of in-person interview and/or functional assessment process as part of ADA paratransit eligibility determinations.

Applicant self-selection and more accurate determinations also translate to lower ADA paratransit certification rates. Table 7.5 provides information about service area characteristics (area and total population) as well as the number of ADA paratransit eligible riders for a broad range of systems. Information for the three larger systems examined as part of this study (Seattle, Las Vegas, and Philadelphia) is included. Information is also provided for several other large systems, including cities that the RTA typically considers peers for paratransit service (Baltimore, Boston, New York City, and Washington DC). It should be noted that data in this table are drawn from a number of sources, generated between 2008 and 2010.

All of the systems shown use in-person interviews and assessments to help make ADA paratransit eligibility determinations, except the Boston MBTA. For systems other than the Boston MBTA, the rate of ADA paratransit registrants per capita ranges from 0.4% to 1.6%, and averages 0.8%. The Boston MBTA has 61,000 ADA paratransit eligible riders for a population of only 2.5 million, which translates to 2.4% of the total service area population (three times higher than the average). This significant variation from the norm appears to be related to the fact that Boston is one of the few large cities that still uses a simple paper application to determine ADA paratransit eligibility.

A few of the other variations from the norm appear to be related to local circumstances. For example, the ADA paratransit service provided by New Jersey Transit (NJT) is statewide and supplements local paratransit services operated by counties. NJT's lower per capita ADA registration rate is most likely due to the fact that many individuals only register with NJT if they need inter-county transportation. Otherwise, they tend to use only the local county services. Similarly, Philadelphia has a low per capita ADA registrant rate most likely because of the lottery-funded senior transportation program in Pennsylvania. Many seniors do not apply for ADA paratransit eligibility in Pennsylvania because their needs are met by this alternate program. The higher per capita rate in New York City is likely due to the heavy reliance of city-dwellers on public transit services in general.

The per capita ADA registrant rate in Chicago of 0.7% is close to and just below the 0.8% average for systems with in-person processes (again, all systems except Boston). This suggests that, overall, the current process is accurately determining who is ADA paratransit eligible.

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[7] See TCRP Synthesis 30: ADA Paratransit Eligibility Certification Processes, Transportation Research Board, 1998.

Table 7.5 Total Registrants and Registrants per Capita for Selected Large City Transit Systems

System/ City	Service Area (Sq.Miles)	ADA Paratransit Registrants	Population (millions)	Registrants per Capita (%)	In-Person Assessments?
RTA - Chicago	1,335	45,000	6.8	0.7%	Yes
MTA - Baltimore	1,795	18,000	2.1	0.9%	Yes
MBTA - Boston	729	61,000	2.5	2.4%	No
BCT - Broward Co.	410	14,288	1.8	0.8%	Partial
DART - Dallas	689	10,626	2.4	0.4%	Yes
MTA - Houston	1,285	17,412	2.8	0.6%	Yes
RTC – Las Vegas	280	13,199	2.0	0.6%	Yes
LACMTA - Los Angeles	1,621	77,647	11.6	0.7%	Yes
NJT – New Jersey	3,353	17,760	5.4	0.3%	Yes
MTA – New York City	321	123,027	8.0	1.5%	Yes
SEPTA - Philadelphia	2,200	15,534	3.3	0.5%	Partial (30%)
King County Metro - Seattle	2,134	30,000	1.9	1.6%	Partial (95%)
WMATA - Washington DC	692	20,716	3.3	0.6%	Yes

Sources: 2009 National Transit Database; 2009 New York City Paratransit Peer Report; and consultant team interviews

The cost implications of thorough and accurate ADA paratransit eligibility determinations are significant. The annual operating cost for ADA paratransit service in the RTA area was $119,674,702 in 2009 based on the National Transit Database report plus the cost of the certification program. These costs were incurred to serve the 45,000 registered riders which make up 0.7% of the total population. Table 7.6 shows the operating costs that might be incurred with higher registration rates if it is assumed that certifying additional individuals as ADA paratransit eligible would result in increased use of the service. Just a 0.1% increase in the registration rate, from 0.7% to 0.8%, would mean

6,400 additional registered ADA paratransit riders and an increase in operating costs of over $17 million per year. If the RTA were to go back to a paper application process and experience registration rates even half those reported in Boston (1.2%), the result could be an increase to 77,100 registered ADA riders and an operating cost of over $205 million per year. The cost of administering a thorough eligibility determination program is relatively insignificant in comparison.

Table 7.6. Estimated Registered Riders and Annual ADA Paratransit Operating Costs in the RTA Area For Various ADA Per Capita Registrant Rates.

ADA Registrants Per Capita (%)	Est. Total # of ADA Paratransit Eligible Riders	Est. Annual ADA Paratransit Operating Costs
0.7% (current situation)	45,000	$119,674,702
0.8%	51,400	$136,770,000
0.9%	57,900	$153,900,000
1.0%	64,200	$170,700,000
1.1%	70,700	$188,100,000
1.2% (half of the Boston MBTA rate)	77,100	$205,200,000

8 Summary of Findings and Recommendations

This section provides a summary of findings and recommendations. Answers to the questions contained in the RFP are provided. Overall observations and findings are then included. Recommended actions for the RTA's consideration, both short-term and longer-term are also provided.

8.1 Answers to Key Questions

The RTA's RFP for this review contained ten specific questions. Following are the review team's answers based on the observations made, materials and data examined, and analysis performed.

Question #1: Is the current program in compliance with ADA and RTA rules and regulations?

In the opinion of the review team, the answer to this question about compliance is "Yes." Six specific areas of compliance, covering all major regulatory requirements, were considered. Table 8.1 describes each of these regulatory requirements and indicates the findings in each area. More detail on the analysis behind each finding is provided in Technical Memorandum #1.

Table 8.1 Findings Regarding Regulatory Compliance

Regulatory Requirement	Description	RTA Process Compliant?
Use of Regulatory Criteria for Eligibility	Does the process apply the criteria for eligibility included in the regulations and strictly limit eligibility to these criteria?	Yes
Accessible Information and Communications	Are individuals provided information and communications in accessible formats upon request?	Yes
Timely Processing of Applications	Are decisions made within 21 days of receipt of a completed application or interim service provided after 21 days?	Yes (see comments)
Documentation of Determinations	Are individuals provided with documentation of the decisions as required by the regulations?	Yes
Recertification	Are recertification requirements reasonable?	Yes
Appeals Process and Policies	Does the process provide for and hear appeals in accordance with regulatory requirements?	Yes

While the review found that the RTA meets all regulatory requirements, some issues were noted in one area—the timely processing of applications. The RTA processed 91% of all applications within 21 days of their receipt in 2010. There were, however, 9% of applications that required more than 21 days to process. To meet the regulatory requirement, the RTA has established an "Interim" category of eligibility. The review team also had some concerns about recent evidence of long waits for in-person interview appointments. While this portion of the process is not specifically mentioned in the USDOT regulations, recent reviews of ADA paratransit services by the FTA indicate that excessive waits for interview appointments are considered a compliance issue. As indicated in Section 3 of this report, 81-88% of all applicants waited more than 21 days for an interview appointment in the first half of 2010 because of an unexpectedly large increase in application volume from the prior year. This was reduced to 54% by the end of 2010 and efforts to make appointments available in a more timely way are continuing in 2011. Appointments are now routinely available in 6-16 days.

Question #2: For each regulatory or RTA requirement, does the current Program meet, not meet, or exceed the requirement?

In the opinion of the review team, "Yes," the program currently meets all requirements. Federal regulations for the ADA paratransit certification process are fairly straightforward. Processes either meet or do not meet them. For example, the requirement to provide certain documentation in determination letters is either met or not met. Similarly, the requirement to have a "separation of authority" between the initial determination process and the appeal process is either met or not met.

The only part of the process where possible compliance issues were noted was with the timely scheduling of appointments for interviews and assessments. The RTA should continue to work with CAU to ensure that the capacity exists to schedule appointments in 7-10 days and no more than two weeks.

Question #3: Are current interview/assessment sites accessible, appropriate, and are the locations convenient to applicants?

As shown in Figure 2.1 in Section 2, there are currently five interview/assessment sites. Multiple sites pose a challenge for ensuring determination consistency and are more costly to operate, but appear to be necessary given the extremely large ADA paratransit service area. There also is a trade-off between overhead costs for multiple sites and the added transportation costs that would be incurred transporting applicants to fewer, more centralized sites. Inconvenience to applicants also needs to be considered.

In the opinion of the review team, the current sites provide maximum convenience to applicants. Three of the five sites are located to be convenient to applicants from the north, central and southern parts of the City of Chicago. Given that all three are full-time sites, while the two suburban sites are each only open one day per week, most of the capacity in the program is geared to applicants from Chicago and Cook County.

This is appropriate given that about 80% of the trips are made by riders who live in the City of Chicago.

At the same time, the sites are located to be convenient to applicants from the suburbs as well. The Higgins site balances convenience to north side of Chicago as well as the north and northwest suburbs. The Alsip site balances convenience to applicants from south side of Chicago as well as southern Cook and Will counties. And the part-time operation of sites in Libertyville and Naperville offer convenience to applicants in the far north and western suburbs.

While it is the feeling of the review team that having five sites in the current locations was reasonable, the RTA may wish to undertake a more in-depth logistical analysis of the locations. This study could examine transportation as well as operating costs for a different mix, number and location of sites. It could also consider impacts on ride times for applicants. Such a study could more fully assess the costs and benefits of having five sites at the current locations, versus fewer sites or different locations.

In terms of ADA accessibility, the review found some minor design features that did not fully meet the ADAAG requirements, but found that all five of the current sites are usable by persons with disabilities. Some minor issues with accessibility were noted (see Technical Memorandum #1), but all five sites were usable by applicants with all types of disabilities.

Finally, some issues were noted with the Higgins Road and Libertyville locations in terms of providing appropriate outdoor routes for physical functional assessments. Alternative routes at these locations should be considered, and if more appropriate routes are not possible, alternative site locations should be considered.

Question #4: Are current assessment tools appropriate and relevant to the functional ability to use fixed route service in the RTA area?

In the opinion of the review team, "Yes," the current tools are appropriate and relevant. All four tools used by the RTA and CAU – the interview guide, the physical functional assessment, the FACTS Test, and the MMSE – are designed to obtain information about functional abilities specific to use of fixed route transit services. The interview guide is very complete in examining all possible issues related to fixed route use. The physical functional assessment is designed using national guidelines developed for the FTA by Easter Seals Project ACTION (ESPA). The FACTS Test is considered the best tool for assessing cognitive ability to use fixed route transit services (and the only tool validated specifically for this purpose). And the MMSE is widely used in the medical and other industries to measure awareness and memory (both important skills for using fixed route service).

While the tools are appropriate and relevant, the review team did identify a few areas where the tools could be improved to strengthen the thoroughness of determinations.

- The types of questions used in the interview to determine whether applicants have a variable disability might be revised to distinguish between general variations in how applicants feel and significant variations in functional ability related to disability.
- Questions about the effects of temperature and snow/ice on fixed route use might be simplified to indicate whether applicants can travel at all in these conditions, rather than specific walking distances under these environmental conditions.
- Additional follow-up questions when applicants indicate current or past use of fixed route services should be considered to fully document the bus routes and trips that applicants agree can be made by fixed route. The Summary form completed by Assessors could also have a place where trips currently made by fixed route could be listed.
- Protocols for identifying maximum walking distance in the physical functional assessments should be revisited. These protocols should be designed to ensure applicant safety first and foremost, but also need to do a better job of encouraging maximum reasonable effort. Note: Implementing these protocols might require changes in the qualifications of staff performing the physical functional assessments (see answer to the next question below).
- The physical functional assessment "routes" at the Higgins Road, Libertyville, and Alsip sites should be reconsidered to better simulate the typical environment encountered traveling to and from bus stops and "L" stations.

Specific suggestions for each of these possible improvements are discussed in Section 6.

It is also worth noting that the current RTA process does not require applicants to submit information from licensed professionals verifying the claimed disabilities or health conditions. Instead, they are asked to provide the names of two professionals who can be contacted by the RTA Certifiers on an as needed basis. Four of the five other systems surveyed do require information verifying disabilities/health conditions as part of the written application. The one system that does not – RTC in Las Vegas – encourages applicants to bring verification documentation to the in-person interview and requires that it be brought by applicants indicating a vision disability (visual acuity statement required), psychiatric disability, or seizures. The review of 100 sample determinations indicated that RTA Certifiers sometimes contact named professionals for verifying information, but more often than not do not pursue this information. The review team recommends that the RTA reconsider incorporating more verifications of disabilities and health conditions into the process – either by requiring this verification as part of the application for certain non-apparent disabilities and health conditions, or pursuing it in more cases as final decisions are made by Certifiers.

Question #5: Are interview/assessment center staff adequately qualified and trained?

The review found that CAU Assessors have degrees in social work, psychology, special education, or similar fields of study. These backgrounds and their work experience make them highly qualified and competent in conducting person-centered, detailed and thorough interviews (a critical part of making accurate determinations). CAU has also developed a thorough training program to ensure proficiency in the RTA ADA Certification Program requirements, use of the interview and assessment tools, ADA regulatory definitions of ADA paratransit eligibility, and quality customer service. First-hand observations found that Assessors did a very good job interviewing applicants, administering the FACTS test, and administering the MMSE.

It is the opinion of the review team that one possible area of improvement is in the administration of the physical functional assessments. It should be noted that all five of the other transit systems surveyed reported using physical therapists (PTs) or occupational therapists (OTs) to conduct physical functional assessments. These types of professionals are also recommended by ESPA in its guidance on conducting in-person functional assessments. PTs and OTs are specifically trained to observe and evaluate balance, gait, and physical functional abilities. They are probably the best professionals for assessing maximum physical functional abilities while also ensuring applicant safety.

CAU has a physical functional therapist on retainer who provides training to its Assessors in conducting safe and appropriate physical functional assessments. It is the opinion of the review team, though, that this job-specific training does not fully substitute for the extensive training and experience of licensed PTs and OTs. Without this career training and experience, it is only natural and appropriate that the current CAU Assessors err on the side of applicant safety when performing physical functional assessments. This could be contributing to the very limited maximum walking distances documented by the current physical functional assessments.

Question #6: Are policies, procedures and contract provisions for the scheduling of interviews/assessments and policies regarding applicants who do not appear for scheduled appointments appropriate and in compliance with ADA regulations?

In the opinion of the review team, the answer to this question is "Yes." As detailed in Section 2, applicants call the RTA (Intake Screening Clerks) to schedule interview appointments once they have filled out application forms. The Intake Screening Clerks manage appointments at all five sites as well as any needed transportation to and from the sites. The Screening Clerks obtain basic information about disability needed to plan for the likely types of assessments to be performed. They also provide important reminders to applicants for properly preparing for the interviews/assessments. The RTA

also sends confirmation letters of scheduled appointments and makes phone calls 7 days prior to scheduled appointments, if the appointments are more than two weeks away, in an effort to minimize no-shows. Pace also calls applicants with scheduled transportation the day before appointments to provide an exact pick-up time (which also provides another reminder about the appointments).

Still, it was noted that about 20% of applicants cancel or no-show scheduled appointments. This is typical, though, not only for ADA eligibility processes that include in-person interviews and assessments. It is also typical for general ADA paratransit trip scheduling.

When applicants no-show scheduled appointments, or cancel on the same day of the appointment, the RTA reimburses CAU at the rate of $20 per no-show or same-day cancel. This is appropriate given that CAU must schedule adequate staffing capacity to conduct the scheduled interviews and assessments. If this payment were not made, CAU or other contractors would simply build these costs into other rates in a competitive procurement process. Making the payment directly allows CAU to cover the actual sunk costs rather than having to estimate the cost of lost reimbursements due to no-shows or same-day cancels. Typically in a competitive bidding process, contractors build in extra contingencies when there are these types of unknown variables. Payment of actual sunk costs avoids this possibility.

The review identified some relatively minor process improvements that might be considered when scheduling interviews. In addition to the many reminders now provided to applicants by Intake Screening Clerks and follow-up appointment confirmation letters, the following reminders might also be added:

- Inform applicants that they may participate in functional assessments that involve going outdoors and instruct them to be sure to dress appropriately.
- Instruct applicants to bring the mobility aids they typically use when traveling in the community to the interview/assessments.

Question #7: Are recertification policies and procedures, including criteria and factors utilized to determine recertification intervals, appropriate and in compliance with ADA regulations?

The review team believes the recertification interval is appropriate, but it is recommended that the RTA expand the use of Mail-In Recertifications.

The ADA regulations give transit systems flexibility to decide whether applicants need to reapply periodically. They also give systems the flexibility to set appropriate recertification periods. In Appendix D of the regulations (the interpretation and guidance section), USDOT recommends recertification and suggests a period of between 1 and 3 years. Most transit agencies, however, provide eligibility for between 3 and 5 years. Requiring recertification every one or two years is considered by most systems to be overly burdensome on riders and would unduly raise the cost of the certification program.

The RTA policy is to grant full-term eligibility for 4 years. This is exactly in line with other systems across the country and is appropriate.

The RTA also has established a Mail-In Recertification process for riders whose functional ability is highly unlikely to improve and who are already All Trips eligible. This is considered an industry best practice and is beneficial to both riders and the RTA as it saves on the cost of recertification. As detailed in Section 2, this process was implemented starting with 2010 expirations. The criteria for eligibility to submit a Mail-In Recertification are:

1) 85 or older in the year of certification and certified for All Trips
2) Severe or profound mental retardation (18 yrs of age or older) or advanced Alzheimer's or dementia such that the individual requires supervision for most or all activities
3) Highly complicated medical condition/disability such that the individual not only requires assistance for travel but may need additional skilled medical intervention during travel, and the condition is not expected to improve (18 or older)
4) 3 consecutive All Trips certification since the start of the in-person process and age at time of 1st certification was at least 18

In 2010, a total of 1,093 riders were eligible to use this streamlined process. It is likely that more riders will qualify over time as they go through the process for a third time.

The RTA has approached this simplified recertification process with some caution, which is appropriate. It is the opinion of the review team, though, that there are many more current riders whose functional ability is likely not to improve over time and that the barriers for these riders are likely not to change. There is an opportunity to reduce certification program costs by expanding eligibility for this simplified process. Expanding the use of Mail-In Recertifications would also reduce the burden on more riders whose eligibility is unlikely to change. A more flexible criteria for eligibility that might be considered is:

- Riders who have gone through the process once, have been determined All Trip eligible, and whose functional ability is not likely to improve over time.

CAU Assessors might be asked to indicate in their summary notes whether they feel the applicant should qualify for mail-in recertification. RTA Certifiers could then review the type of disability, assessment record, and Assessor recommendation and make a final decision.

Two of the other systems that were contacted as part of the study indicated extensive use of simplified recertification procedures. The RTC in Las Vegas indicated that approximately half of all recertifications are done with a brief paper application and without in-person interviews and assessments. They also noted that this had resulted in significant savings. ACCESS in Pittsburgh indicated that about 75% of recertifications are completed using a brief two-page paper application form.

As described in Section 3.3, in 2010 RTA processed a total of 12,673 applications, of which 4,561 (or 36%) were for recertification. In 2010, 1,093 riders whose eligibility was expiring were identified as being eligible for the simplified Mail-In Recertification process. This was 12% of all riders up for recertification. A total of 377 of these 1,093 riders then actually returned a Mail-In Recertification application—a 34% response rate. This represented about 8.3% of all recertification applications received (377/4,561). Had the RTA processed a larger percentage of recertification applications through its Mail-In Recertification process, significant cost savings could have been realized (see Table 8.2). The table shows potential savings for contractor and transportation costs assuming 20%, 30% or 40% Mail-In Recertification rates, based on the actual rate of 8.3% for FY 2010. For example, if 20% of recertifications were done through the mail-in process, an additional $159,430 may have been saved, at 30% an additional $295,318, and at 40% an additional $431,206 may have been saved.

Table 8.2 Potential Savings from Expanding Eligibility for Mail-In Recertifications

	FY 2010 Actual @ 8.3%	FY 2010 @ 20%	FY 2010 @ 30%	FY 2010 @ 40%
Total Applications	12,673	12,673	12,673	12,673
Total Recertifications	4,561	4,561	4,561	4,561
Mail-In Recertificaitons	377	912	1,368	1,824
% Mail-In Recertifications	8.3%	20%	30%	40%
Increase in Mail-In Recertifications	n/a	535	991	1,447
Potential Contractor Cost Savings ($162/application)	n/a	$86,670	$160,542	$234,414
Potential Transportation Cost Savings ($136/application)	n/a	$72,760	$134,776	$196,792
Total Potential Cost Savings by Increasing Mail-In Recertifications	n/a	$159,430	$295,318	$431,206

The savings presented in Table 8.2 represents only savings in contractor costs for not having to perform interviews and assessments, and savings in transportation to and from assessment sites. It does not include internal savings from lowered staff costs. Decisions based on Mail-In Recertification forms would require less Certifier time than

determinations that involved in-person interviews and assessments. Mail-In Recertifications also would not require Intake Screening Clerk time to arrange appointments and transportation. To estimate these potential additional savings, the RTA could determine the amount of time required for full recertifications versus Mail-In Recertifications and estimate the difference in staff time that would be required in future years. Actual savings would depend, though, on personnel decisions about staffing levels and may only be achieved over time.

Question #8: Are decisions to proceed with physical/cognitive assessments complete, appropriate and timely?

The review team concluded that, "Yes," decisions to proceed with physical/cognitive assessments were complete, appropriate and timely. This question was considered as the review team observed 13 interviews/assessments first-hand at the five assessment sites. Eight different CAU Assessors were observed and the decisions each made about assessments was noted. Decisions about which assessments to perform were also considered in the review of 100 random determination files. Decisions about proceeding with assessments were deemed complete, appropriate and timely in all 13 of the interviews/assessments observed first-hand. Decisions were also deemed complete, appropriate and timely in 99 of the 100 randomly selected files that were reviewed. In one case, the review team felt that an applicant who reported low vision (but who was not legally blind) should have been asked to participate in a physical functional assessment. This applicant was determined Not Eligible and it would have been helpful to have documentation of ability to negotiate the physical assessment route to support the finding.

Question #9: Is there a disconnect between the type of eligibility granted and its associated criteria?

In the opinion of the review team, "No." The review found that the RTA closely follows the ADA regulatory criteria when making ADA paratransit eligibility determinations. The types of eligibility granted are then directly connected to these regulatory criteria. Transitional eligibility directly reflects "Category 2" regulatory criteria. Conditional-Orientation and certain types of Conditional-Variable Disability eligibility directly reflect "Category 1" regulatory criteria. Conditional-Winter Months, Conditional-Summer Months, Conditional-Path of Travel, and certain sub-categories of Transitional and Conditional-Variable Disability directly reflect "Category 3" regulatory criteria.

While the types of eligibility granted connect to the appropriate criteria, the way that the RTA records and catalogs types of eligibility is somewhat complicated. From an organizational perspective it is very orderly and logical. Similar types of sub-sub-conditions (e.g., "one block," "two blocks") are combined into sub-categories (e.g., "Distance to Bus Stop/"L" Station"), which are then combined into the main categories (e.g., "Conditional-Path of Travel"). From an operational or rider perspective, though, the many categories and sub-categories might be confusing. The types of conditional eligibility used by other systems surveyed are somewhat more straightforward (see

Section 7 and Technical Memorandum #1). The lowest-level (most descriptive) types of conditions are simply included in a lengthy list of possible conditions, rather than organizing these conditions into categories. This more simplistic approach also avoids somewhat arbitrary assignment of certain conditions to categories (e.g., in the RTA scheme, a need for curb cuts is contained in the "Transitional" main category of eligibility, when it could just as readily be included in the "Conditional-Path of Travel" category).

It should be noted, though, that while the RTA's method of recording and cataloging conditions is more involved and complex, significant efforts have been made to present and describe conditions of eligibility to applicants in a concise and understandable way. The letters of determination crafted by RTA staff, particularly the letters conferring conditional eligibility, are about the best the review team has seen in its work with many transit agencies. And the FTA recently requested copies of sample letters prepared by the RTA to use in national trainings on ADA eligibility determination.

It is also important to note that while the system is elaborate, it in no way inhibits the implementation of trip-by-trip eligibility. It was noted that operations staff at Pace at one time were somewhat confused by the way the RTA catalogs conditions of eligibility, but have worked with RTA staff to develop a better understanding of the system. Interviews conducted as part of this review indicated that Pace staff now have a good understanding of how to interpret the conditions of eligibility to be able to apply them to trip-by-trip determinations.

Question #10: Is it realistic to screen for trip eligibility and to enforce decisions about trip eligibility when scheduling the delivery of service?

A common misunderstanding about implementation of trip eligibility is that it must be done as part of the scheduling of trips. In fact, in systems that have implemented trip-by-trip eligibility, 90% of the trip screening process is performed separate from the trip scheduling process.

The recommended way to implement trip-by-trip eligibility is as follows:

- The specific trips to be assessed are identified (sometimes starting with frequently made trips for cost-effectiveness);
- The exact abilities and eligibility conditions of the riders whose trips are being screened are extracted from the master rider file;
- Rider abilities and conditions are compared to trip specifics and determinations of eligibility are made;
- The eligibility of trips is entered into rider files (e.g., "10 Main Street to 50 Elm Street – Paratransit Eligible," or "10 Main Street to 100 Oak Street – Not Paratransit Eligible");

When accepting and scheduling trip requests, reservationists check to see if the riders are conditionally eligible (simply a code that appears in the rider information on the trip

booking screen). If riders are shown to be conditionally eligible, reservationists call-up a trip list for these riders (similar in structure to the trip history lists already being used in Trapeze). A list of all trips evaluated is provided, with an indication of whether they are paratransit eligible or not paratransit eligible. If the trip being scheduled is on the list as eligible, it is booked. If it is on the list as not eligible, riders are told that the trip has been evaluated and it has been determined it can be made on fixed route. If the trip being requested does not appear on the list (meaning it has not yet been evaluated), it is considered eligible by default and is booked. As noted above, building trip lists for riders with conditional eligibility could begin with subscription or frequently made trips.

Sometimes, the decisions made about trip eligibility outside of the scheduling process are straightforward. For example, riders might have specific trips listed under "Conditional-Orientation-Trips Not Eligible for paratransit" that have been identified through the determination process as being able to be made by fixed route. Or, riders might have "Conditional-Winter Months," or "Conditional-Summer Months" as their only conditions of eligibility.

In other cases, the decisions made outside the scheduling process are slightly more involved. For example, for riders with "Conditional-Orientation-Transfer Trips" eligibility for the trip in question might need to be run through the fixed route trip planner to see if it involves a transfer. Or, riders might have "Conditional-Variable Disability-Treatment Day/Non-Treatment Day" eligibility and the days of treatment would need to be identified for reservationists.

In some cases, making trip eligibility decisions takes more effort. This is the case when trips are being screened for riders who have "Conditional-Path of Travel" eligibility. In these cases, operations staff must determine if the specific path-of-travel issues that confer eligibility exist for the trips being evaluated. If distance is the only condition, this might be done using mapping or fixed route trip planning software. However, if the conditions are things like a need for sidewalks or curb cuts, or certain types of streets or intersections that can or cannot be crossed, it is typically necessary to conduct an on-street assessment. Staff would need to walk the routes to and from the bus stops that would be used to determine if these barriers exist. If they do, the trip would be eligible. If not, the trip would be entered in the system as not eligible.

While this might seem excessive, it should be noted that a high percentage of all trips are subscription trips and that most riders have frequent, repeat trips that they make on paratransit. One on-street assessment impacts many trips per week and per year for these riders.

It is important to note that it is not necessary to develop a complete catalog of all sidewalks, curb cuts, and streets and intersections by type in order to begin doing trip-by-trip eligibility. Instead, a "one-person, one-trip-at-a-time" approach can be taken. Over time, it might help to catalog the on-street assessments performed so that the information can be used for other trips that are along these same routes. However, it is not necessary to have this kind of catalog to get started.

At the outset of this description of trip-by-trip eligibility, it was noted that 90% of the decision is made outside the trip scheduling process. There are some things that do still need to be addressed at the time that trips are scheduled. These include weather conditions and dusk/dawn issues. For riders with multiple conditions that include weather or dusk/dawn, it will be necessary for reservationists to determine if the weather or time is an issue for the trips being requested. So, for example, the on-street review of a trip for a rider with both path-of-travel and weather related conditions might need to indicate that it has been determined "Not paratransit eligible except in winter months." Reservationists would still need to consider whether the trip requested is during the time period defined by the RTA as "winter months."

It is also important that riders should be contacted each time it is determined that a trip is "Not paratransit eligible." Riders should not learn that trips can no longer be requested by paratransit when they call to book trips. Instead, a call should be made followed by a letter indicating that the trip has been evaluated and that it has been determined that it can be made by fixed route. It is best practice to also provide a "trip plan" showing exactly how the trip can be made on the bus or "L." Some systems even offer to have staff or travel trainers accompany riders on the first trip by fixed route to make sure there are no unforeseen barriers and to assist riders in becoming familiar with using the fixed route service.

This description of trip-by-trip eligibility is not intended to suggest that there are a high number and percentage of trips that can be screened and can be found to be able to be made by fixed route. It is important to realize that 80% of eligible riders have All Trip eligibility. For the 18% of riders with conditional eligibility, it should be noted that 56.8% have as one of their conditions "Conditional-Variable-Good Day/Bad/Day" which means that only the rider will be able to determine if it is a bad day and the conditions likely attached to a bad day are so limiting that use of fixed route is highly unlikely.

Still, though, there are certain types of conditional eligibility that could be easily applied. For example:

- 87.2% of conditionally eligible riders (15.7% of all riders – about 7,163 current riders) have "Conditional-Winter Months." Of these, 903 (11.2% of all conditionally eligible riders) have a temperature issue and therefore would not also have Conditional-Variable eligibility. Trip decisions for these riders should be relatively straightforward. The remaining 6,101 individuals in this category may also have Conditional-Variable eligibility. Given that about half of all conditional riders have Conditional-Variable as part of their eligibility, and assuming this is evenly distributed across other categories of eligibility, trip decisions for another 3,000 riders in this category should be relatively straightforward.
- 5.9% of conditionally eligible riders (1.1% of all riders – about 502 riders) have "Conditional-Summer Months" eligibility. The vast majority of these riders are eligible based on a temperature issue and do not also have Conditional-Variable eligibility. Trip eligibility for these riders should be relatively straightforward.

- 2.1% of conditionally eligible riders (0.4% of all riders – about 182 current riders) have "Conditional-Orientation-Trips Not Eligible" eligibility. Given that the primary disability for these riders is cognitive or visual, most likely do not also have Conditional-Variable eligibility, which would have trip eligibility decisions relatively straightforward.
- 3.3% of conditionally eligible riders (0.6% of all riders – about 274 current riders) have "Conditional-Orientation-Transfer Trips" eligibility. The large majority of these riders likely do not also have Conditional-Variable eligibility, which would make trip determinations relatively straightforward.
- 2.7% of conditionally eligible rider (0.5% of all riders – about 228 current riders) have "Conditional-Variable Disability-Treatment Day" eligibility which only requires that the days of treatment be noted in the system to then do trip eligibility.

Finally, systems that have implemented trip-by-trip eligibility note that it communicates an important message to conditionally eligible riders. It helps to reinforce the notion that ADA paratransit is only meant to be used when fixed route service is not a reasonable option. Over time, these systems report that riders will begin to make appropriate trip decisions without the transit agency needing to screen their trips. On the other hand, continuing to provide paratransit for all trips for riders with conditional eligibility perpetuates reliance on ADA paratransit.

Question #11: Can certain conditional eligibility criteria be developed that are more cost effective to use in the actual delivery of service?

In the opinion of the review team, the answer to this question is "No." The RTA already identifies and records the types of conditional eligibility that are easy to apply – trips that are currently being made on fixed route, trips that are "familiar or unfamiliar," and "transfer trips." In addition, the RTA already has simplified conditions related to the weather by conferring eligibility for broad seasons like winter and summer (some systems do day to day weather analysis rather than these broad categories).

While the review team's opinion is that the current conditions are about as "operationally friendly" as they can be, the review did identify efforts that can be made to support trip-by-trip eligibility. These are:

- Review the protocol used to grant "Conditional-Variable Disability-Good Day/Bad Day" eligibility. This category essentially requires that trips be "self-screened" by riders. It should only be granted when functional ability varies significantly because of the disability or health condition. The review found that 56.8% of all riders with conditional eligibility in the RTA area have this as one of their conditions. This seems relatively high. Data from other systems was requested for comparison, but as of the date of this draft report no comparable data had been provided. Still, it is recommended that the RTA reconsider the current protocol for identifying variable disability conditions. More detailed suggestions are described in Section 6.

- Review the protocol and staff capabilities associated with identifying maximum walking distance to and from bus stops/"L" stations. As noted in Section 6, first-hand observations of the assessment process indicated that CAU Assessors may not currently be identifying appropriate maximum walking distances. This documentation of relative short maximum distances appears to influence Certifier decisions to grant All Trip eligibility when conditional eligibility might be more appropriate, or to set conditions of walking distance that are too short. Table 8.3 compares the maximum walking distances set as conditions of eligibility by the RTA (from Section 3) with those set by the RTC in Las Vegas (based on an analysis done by the RTC at the review team's request – see Section 7). While not dramatically different, the analysis shows that a higher percentage of riders in the RTA area are found able to travel only one block. The RTC finds many more riders able to travel up to 1.5 blocks, and the RTA finds slightly more riders able to travel two blocks. Note that both systems find very few riders able to travel more than two blocks to get to and from fixed route stops and stations, which indicates the limited functional abilities of individuals who apply. While the differences seem subtle, the ability to walk two versus one block can have a significant impact on the availability and use of fixed route service and on trip eligibility decisions.

Table 8.3 Comparison of Maximum Walking Distances Set As Conditions of Eligibility By the RTA and the RTC (Las Vegas)

Maximum Distance	# of RTA Riders with Distance as a Condition	% Of All Riders with Distance as a Condition	% of RTC Rider Sample with Distance as a Condition	% Of All Sample
One block	2,777	59%	32	32%
One and a half blocks	5	1%	40	40%
Two blocks	1,666	35%	26	26%
Three blocks	267	5%	1	1%
Four Blocks	NA	NA	1	1%
TOTALS	**4,715**	**100%**	**100**	**100%**

- Expand the current category of Conditional-Orientation-Trips Not Eligible to include any trips identified by applicants that are currently being made on fixed route. The current category is used mainly for applicants who have received training to learn to make certain trips by fixed route (e.g., mainly riders with cognitive or vision disabilities). Riders with other types of disabilities often indicate in interviews that they use fixed route service for certain trips. This information should also be recorded under a "Trips Not Eligible" category. One way to do this would be to change the first level category of Conditional-Orientation to be Conditional-Specific Trips. The subcategories of Trips Not Eligible for Paratransit, Trips Eligible for Paratransit, and Transfer Trips would then fall under this broader category and would be used for any applicants who identify certain trips that can or cannot be made on fixed route.

8.2 Overall Observations and Recommendations

Overall, it was found that the RTA's ADA Certification Program is very well designed and administered. Thorough and detailed policies and procedures have been developed, staffs at the RTA and CAU are well trained, and the current policies are implemented consistently. Considerable efforts are made to ensure consistency in determinations. Both the RTA and CAU have implemented a "Gold Standard" evaluation process to check consistency on an ongoing basis. The program is also meticulously organized. Given the volume of application received and the number of determinations made each year, this organization is vital for ensuring a timely and accurate process.

In general, the process was found to be accurate and thorough. The first-hand observations and review of 100 randomly selected determinations did not identify applicants found eligible who should have been denied. In the few cases where there was some question about a decision it was whether an applicant might have been found Conditional rather than All Trip eligible.

It is the opinion of the review team that the low percentage of applicants found Not Eligible (1-2%) is not a sign of laxness in the process, but of direct and indirect screening of applicants at the front end and applicant self-selection out of the process. This screening and self-selection is illustrated in Figure 8.1.

On average, about 1,825 individuals call the RTA ADA Eligibility Helpline each month inquiring about ADA paratransit eligibility. Staff discusses and explains eligibility to these callers and 84% are sent application forms (16% decide they are probably not eligible). Of the 1,533 individuals who are sent applications each month, only 1,330 complete the application and call to schedule an in-person interview. This represents "self-selection" out of the process by another 11% of the individuals who initially called to inquire about eligibility. This self-selection is due in part to the additional understanding of ADA paratransit eligibility that provided by the application material and the information brochures that are included in the packets. Of the 1,330 individuals who schedule in-person interviews each month, about 1,108 keep the appointment and continue in the process. This represents a second "self-selection" out of the process by some individuals. Finally, of the 1,108 individuals who participate in interviews and assessments each month, 1,097 are found to have some level of eligibility. Altogether, there is an active and "self-screening" of about 40% of the individuals who initially inquire about eligibility.

If individuals do pursue eligibility to the end of the process, it appears highly likely that they do in fact have a significant disability or health condition that affects independent travel on the fixed route system. Seattle Metro, which also reports an effective screening process, finds only about 1% of all applicants who complete the process to be Not Eligible. This is very similar to the rate of Not Eligible determinations made by the

RTA. Two of the other five systems surveyed (Utah Transit Authority and SEPTA in Philadelphia) also reported Not Eligible rates of only 1-2%.

Figure 8.1 Illustration of Level of Applicant Screening and "Self Selection"

Percent of All Interested Persons/ Applicants Per Month	Number of Interested Persons/ Applicants Per Month		Information/ Activity/Action
100%	**1825** Inquiries About ADA Paratransit Eligibility		
↓	↓	←	RTA Staff Discuss and Explain ADA Paratransit Eligibility
84%	**1,533** Applicants Sent		
73%	**1,330** Interview Appointments Scheduled		
↓	↓	←	Applicants Elect Not To Pursue Eligibility
61%	**1,108** Interviews Conducted		
↓	↓	←	Interviews, Assessments and Follow-Up
60%	**1,097** Applicants Found Eligible -- 80% All Trips -- 18% Conditional -- 2% Temporary		

Another indication that the current process is doing a good job of strictly limiting eligibility to individuals who meet the regulatory criteria is the per capita rate of eligible riders (0.7% of the total population of the area). As shown in Table 7.5, the Chicago area is slightly below the average rate of registrants per capita when compared to other large city systems who use in-person interviews and assessments to determine ADA paratransit eligibility, and which are considered to have thorough processes. This is an indication that the current RTA process is accurately registering only those persons who meet the regulatory criteria for ADA paratransit eligibility.

The benefits of an in-person process are also obvious when the outcomes at other systems are considered. Most large city transit agencies use an in-person interview and assessment process to determine ADA paratransit eligibility. And, as shown in Table 7.5, the percent of the population that has applied for and been determined ADA paratransit eligible ranges from 0.3% to 1.6%. Only one large city system is still known

to make eligibility determinations based solely on a paper application – the MBTA in Boston. The result: Boston has over 61,000 individuals certified as ADA paratransit eligible – 2.4 % of the population, which is more than three times the rate in the Chicago area.

Other Observations and Recommendations

While the overall RTA ADA Certification Program is effective in ensuring that ADA paratransit service is provided to individuals who qualify under the federal regulatory criteria, and determination results are accurate and thorough, the review includes several recommendations for further strengthening the process.

- With the steady increase in the number of applications per year, and the significant increase in 2010 (up 17.3% over 2009), RTA needs to act to ensure that there is adequate capacity to make determinations in a timely way and avoid going back to a situation where there were significant numbers of Interim determinations. Matching capacity to demand can be done through a combination of increasing staff to meet the increased demand as well as examining ways to make the current process more efficient. To meet the current increase in demand with additional staff, it is our opinion that one more Certifier should be hired at this time. The Customer Service Representative who is working as a temporary employee should also be made a permanent employee.
- The main short-term alternative to increasing staff, as identified earlier in this section, would be to expand the use of Mail-In Recertifications. As indicated in Table 8.2, expanding the guidelines for this simplified process could increase the number of Mail-In Recertifications by almost 1,500 if 40% rather than 8.3% of riders up for recertification used this process. If Certifiers did not have to be as involved in these more straightforward determinations, this could help alleviate the demand on certifier time as application volumes increase. Other staff might be used to review and process these simplified recertifications.
- The percentage of applicants found conditionally eligible by the RTA (18%) is higher than most transit systems that do little or no conditional eligibility. It is somewhat low, though, when compared to other top processes in the country. Four of the five other systems surveyed, all considered to be strong programs, reported conditional determinations ranging from 25% to 30%. It is the opinion of the review team that reviewing and revising the protocols used to determine maximum travel distance, and gathering more information about current use of fixed route services, would likely bring the RTA into this more typical range.
- The number and percentage of applicants granted Conditional-Variable eligibility also seems high. First-hand observations of interviews also found that the questions used to identify variable disabilities were somewhat general. Specific suggestions for improving this part of the interview process are provided in Section 6.
- While the list of types of eligibility granted by the RTA is logical and complete, they are overly structured and complex. This can make them more difficult to understand in an operational context. The types of eligibility granted by other systems studied were also complete, but are presented in a more

straightforward, understandable way. It is recommended that the RTA consider simplifying the way that eligibility types are recorded and reported.

- The databases developed for and used to manage the Certification Program are detailed and complete. They do a good job of recording and tracking applicants and determinations throughout the process. Some efficiencies could be gained, though, by better linking the data fields that track interview appointments with the data fields that are used to arrange transportation. Currently a daily manual cross-check of the information recorded in these two databases is needed to make sure there is consistency between appointments scheduled and transportation arranged.
- Currently the RTA Travel Training Program serves individuals with disabilities who have applied and been found eligible for ADA Paratransit. So if an individual would like to participate in a structured travel training program in this region, they have to first apply for ADA paratransit services to gain access to the RTA Travel Training Program. This is not necessarily the case in other transit systems, many of which either provide additional training to groups of seniors and others who do not require intensive one on one trainings, or coordinate these trainings with other entities. The RTA should explore the possibility of opening up the travel training program to individuals who are not applying for paratransit eligibility, but could nevertheless benefit from the training.

  RTA should also explore the benefits of a greater integration between the eligibility screening process and recruitment of travel training candidates. For example, at Tri-Met (in Portland, OR) and in other systems, a portion of applicants who participate in a functional assessment meet with a travel trainer immediately after the assessment to discuss the possibility of participating in travel training. If it appears as though the registrant could benefit from the training, and if she or he is interested, the trainer can initiate the scheduling process at that time. By including this discussion as an integral part of the assessment, Tri-Met has successfully increased the rate of travel training participation.

Longer-Term Recommendation

Four longer-term recommendations are also offered for consideration. All are longer-term because they would require either changes to the contract for interview and assessment services, significant personnel changes or technology purchases at the RTA, or both. General information about the possible advantages and implementation issues of each is provided here. Further study is recommended to explore these options in more detail.

Consider Moving to a Paperless Process

With over 135,000 paper files and 13,000 applications per year, the RTA should study the costs and benefits of moving to a paperless process. All documentation provided by applicants could be scanned and all interview and assessment information entered

directly into rider files. Doing this will have an initial cost, but may be cost-effective in the long-run. The exact costs and payback period should be studied.

Consider Fewer Assessment Sites

This longer-term recommendation is included primarily as an option for lowering the cost of the Certification Program. As indicated in Section 5, the costs associated with the operation of five assessment sites appears to be one of the factors that contributes to the higher than average costs for ADA paratransit eligibility certifications at the RTA.

Given the size of the RTA area, we do not feel it would be appropriate to have only one assessment site. However, it may be possible to have three full-time sites rather than the current arrangement of three full-time and two part-time (one day per week) sites. This could include one site in the City of Chicago, one site to the northwest of the City that could serve City residents on the north side as well as residents in the north and northwestern suburbs, and one site southwest of the city to service City residents on the south side as well as those in the suburbs to the south and west.

The costs and benefits of consolidating to three full-time sites would need to be carefully examined and would need to consider:

- The lowered overhead and administrative costs of a smaller number of sites;
- The increased transportation costs for bringing some riders longer distances to assessment sites;
- Public reaction to having fewer sites.

The last point could be a significant issue. Public input received indicated that most stakeholders felt that more rather than fewer assessment sites were needed.

Consider Shifting Responsibility for Arranging Appointments and Transportation to Assessment Contractor

A second recommendation that might help reduce costs in the long-run would be to shift responsibility for arranging interview and assessment appointments and transportation to and from the assessment sites to the assessment contractor. This proposal would allow riders to arrange appointments directly with the contractor, rather than having the RTA staff act as a go-between for this function. It could possibly streamline the handling of transportation issues if the contractor dealt directly with the provider of transportation, rather than resolving issues in conjunction with RTA staff.

Further study of this option would be needed to consider:

- The added administrative and staff costs for the contractor to perform these tasks.
- The savings in staff and administrative costs at the RTA.
- Reassignment of work tasks within the RTA Certification Program.

The RTA would also have to ensure that the contractor had access to databases needed to enter applicant information collected during the appointment scheduling process.

Consider Standalone, "One-Stop" Transportation Assistance Centers

Finally, the RTA should consider establishing one-stop Transportation Assistance Centers that combine a variety of services for assisting seniors and persons with disabilities with appropriate transportation options. The centers could offer ADA paratransit eligibility determination services, travel training services, reduced fare ID services, and could be coordinated with county agencies to provide information and eligibility services for other county-based transportation programs.

If there were a reasonable number of centers (e.g., the three centers discussed above), the RTA could consider placing Certifiers at each location. The Certifiers could accept and review application forms brought by applicants to the centers. They could also conduct the initial interviews and determine if functional assessments were needed. The contractor staff would then perform any assessments needed. Once any assessments were completed, the RTA and contractor staff could review and share observations and information and arrive at a final determination decision.

Co-locating RTA and contractor staff at these centers could have benefits to the application process by providing Certifiers with first-hand contact with applicants, which should help them with making final determinations. The process would be similar to that used by the RTC in Las Vegas. A staffing analysis of the cost impacts and potential benefits of such an approach would need to be undertaken.

In addition to locating Certifiers at the centers, the RTA could consider assigning Travel Training Program staff to work at the centers. Applicants for ADA paratransit eligibility would be provided more immediate access to information about the program. If the function of the centers was expanded to include services other than ADA paratransit, it would also give Travel Training Program staff access to more individuals who may benefit from these services. It could also build relationships with other agencies and programs that might locate their transportation information and eligibility services at the centers.

Establishing three standalone Transportation Assistance Centers might also mesh well with paratransit service redesign and call center plans being considered by Pace. One of the options being considered by Pace, as part of a concurrent study of paratransit service design, is the creation of three paratransit subregions and the establishment of central call centers in each subregion. While the Transportation Assistance Centers would not necessarily be co-located with the call centers, they could be located to serve the subregions that might be created.

Expanding ADA paratransit eligibility determination assessment sites to become more holistic Travel Assistance Centers is the latest trend in eligibility determination the

industry. Tri-Met in Portland, Oregon and Valley Metro in Phoenix are two of the large transit systems that have decided to take this approach. A press release photograph describing the new center in Phoenix is provided as Figure 8.2. This approach would also be consistent with the concept of "mobility management," which is being broadly pursued across the country.

Additional study and analysis would be needed if the RTA chose to move in this direction. Some of the issues that would need to be considered would include:

- What functions and staff would need to be maintained centrally and what functions and staff could be at the standalone centers?
- How would records and data be centralized? Would the development of a paperless process be needed?
- What other county-based, local or state services might be provided at the centers and are the agencies responsible for these programs interested in a coordinated approach?
- What would be the additional costs of creating more extensive, coordinated centers and what funding might be available to support this option?

Figure 8.2. Press Release and Photograph of Valley Metro (Phoenix, AZ) Mobility Center

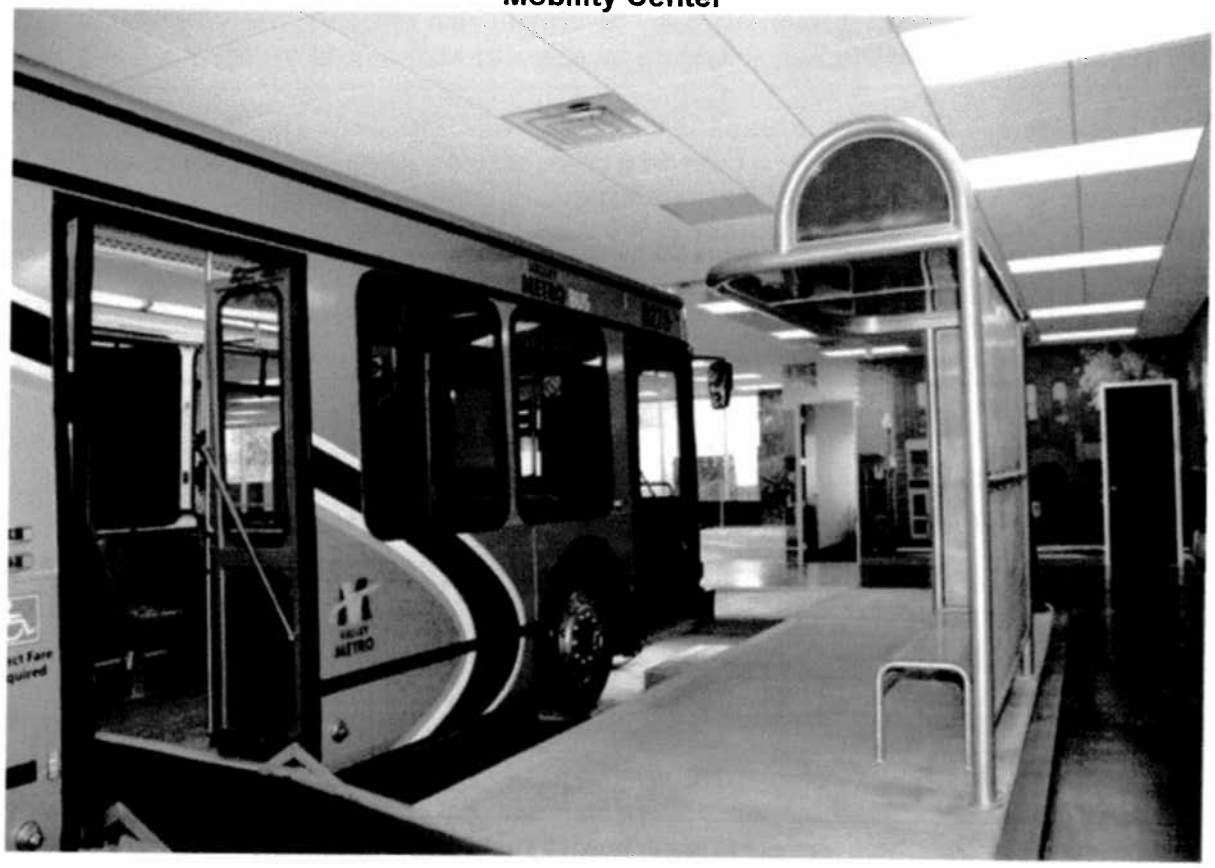

Figure 8.2, cont.

Valley Metro Press Release (from Metro Magazine, February 23, 2011):

On Wednesday, Phoenix-based Valley Metro opened a new Mobility Center, a regional facility that will help make travel easier for thousands of passengers who may need additional assistance navigating the transit system.

There are more than 11,000 Valley Metro passengers currently eligible for the Americans with Disabilities Act (ADA) designation, allowing them reduced fares on the bus and light rail system and access to paratransit or Dial-a-Ride services in the Valley.

"Our goal was to build a facility that simulated our actual transit environment in the metro Phoenix area," said David Boggs, Valley Metro executive director. "The Center, which is modeled after similar structures in Los Angeles, Orange County, Las Vegas and Salt Lake City, allows passengers the opportunity to try transit before they actually ride to see if it's feasible for them."

Following years of research, several studies and case studies from peer cities, Valley Metro's board of directors approved the development of a Mobility Center in 2010 that would not only provide in-person eligibility determinations but offer travel training and other programs making the transit system more accessible to local residents.

Completed this month, unique features of the Mobility Center include a full-sized 40-foot bus and bus shelter set against a backdrop of life-size photo murals depicting various transportation modes, including light rail. Various pavement and sidewalk treatments are incorporated into the assessment center giving a realistic environment for navigating local communities.

In this process, riders that are seeking ADA certification will utilize a customer focused in-person process. The intent is to improve how evaluations occur for ADA service and better match passengers with transit needs. It is anticipated that there will be 400 to 500 ADA eligibility determinations processed each month. Operations of the facility is funded by Proposition 400, the regional, half-cent sales tax approved by voters in 2004 that helps build and provide transportation projects in Maricopa County.

8.3 Public Input Requirements

It is important to note that the federal ADA regulations require public input if significant changes are made to ADA paratransit service policies. Minor changes to protocol, such as the questions asked to determine variable conditions, can be made administratively without input. However, more significant changes, such as requiring professional verification of disability as part of the written application or using physical and/or occupational therapists for physical assessments, would require public input. If the RTA

pursues the recommendations contained in this technical memorandum, it is advised that the more significant, non-procedural changes be vetted before the ADA Advisory Committee. Once advisory committee input is received, broader public input should also be obtained, including a public hearing, before any significant changes are implemented.

9 Possible Relocation of Program to Pace: Business Case Analysis

The question of a possible relocation of the program to Pace has arisen given recent changes to the structure or ADA paratransit services in the region. Prior to July 1, 2006, ADA paratransit services were operated by both Pace and the Chicago Transit Authority (CTA). To help ensure consistency in the determination of eligibility for these services, RTA administered the ADA Paratransit Certification Program for both agencies. Beginning on July 1, 2006, Pace began operating ADA paratransit services throughout the entire region. The question of whether determination of ADA Paratransit Eligibility should also be conducted by Pace has therefore been raised.

This section presents a Business Case Analysis of this option. It describes the approach that was used to develop the analysis. The various factors that need to be considered are discussed. A Decision Matrix that summarizes information for each decision factor is provided.

It is important to note that a final recommendation on the organizational location of the ADA Paratransit Certification Program is not provided. That decision appropriately rests with the RTA. Instead, this section provides a detailed summary of the various factors and potential costs and benefits that should be considered by the RTA in making this decision.

9.1 Approach

The following tasks were performed to develop the Business Case Analysis:

- Stakeholders were interviewed for input on key factors and considerations
- Input was also requested from members of the Legislature
- Using Stakeholder and Legislator input, key factors to be considered in the Business Case Analysis were developed
- Each factor was analyzed using information gathered throughout the study and input obtained from stakeholders and members of the Legislature

Stakeholder Interviews

The review team first obtained input from various stakeholders. This included internal stakeholders—managers and staff at the RTA, Pace and CTA. Each internal stakeholder was interviewed as part of the analysis. Interviews were conducted in confidence to ensure frank opinions.

Input was also obtained from external stakeholders. Working with the RTA, a list of external stakeholders to be interviewed was developed. Each of these external

stakeholders was then contacted and a brief summary of the study was provided. Interviews were then requested and scheduled—again in confidence.
As part of the outreach to external stakeholders, a letter was e-mailed by RTA Legislative Affairs to all Illinois Legislators representing the RTA service area. This letter briefly explained the ADA legislation and a history of the region's ADA paratransit certification program. The letter asked Legislators to provide input on whether the eligibility determination function should remain at the RTA or be transferred to Pace.

Detailed input from stakeholders is incorporated in the discussion of specific decision factors presented in the next section. The following statements provide a general representation of the range of feedback received from all stakeholders.

- Customer Related Issues
  - Consumers don't seem to have many complaints about the process.
  - More locations for certification would be preferred. On the suburban end, comments were made about how far people have to travel to get to an assessment site. On the City end, comments were made about the desire to have additional sites closer to downtown Chicago.
  - "Best interest of the riders" should be kept in mind while designing the process
  - Would encourage 'secret shopper' type review of the eligibility process to have an unbiased opinion of what is going on.
  - Certification process should provide more resources such as travel training at the point of certification. This can lead to encouraging more eligible users to use accessible fixed route service for their travel.
  - City applicants feel more represented with the eligibility at the RTA rather than at Pace.
  - Consider more "one-stop" certification (ADA, reduced fare, etc)
  - More openness to consumer input / feedback should be encouraged (RTA is seen as more open than Pace).

- Certification-Related Issues
  - ADA functional requirements should be strictly enforced.
  - Making progress on implementing trip-by-trip eligibility is important because the value of the certification process that is in place is that it provides the basis to do this type of screening but for the most part is not being implemented to date.
  - Consider having decisions made by the contractor's assessors or otherwise streamlining the process between the contractor and the RTA.

- Organizational Issues
  - CTA maintains a responsibility to make sure that ADA service is provided, which leans against moving the certification process to necessarily coincide with operational responsibility.
  - RTA pushes to do other regional functions, yet seems to be not sure about this one – seems contradictory.

- If RTA doesn't do things like this, what is the value of the organization?
- Might lessen some of the tensions between Pace and RTA if the ADA certification determination was done by Pace.
- Split opinions, and no strong feeling either way, on whether co-locating the eligibility process and operations would be a good idea. Some say marginally yes, others say marginally no.

9.2 Business Case Analysis – Key Factors

Input on the key factors to be considered in deciding the location of the ADA Paratransit Certification Program was requested during internal and external Stakeholders interviews and as part of the outreach to Legislators. A preliminary list of factors was presented and discussed. Input on other factors that should be added to the list was then invited. Based on these discussions, the following list of factors was developed. Factors are grouped into four general categories—external, organizational, process, and costs.

External Issues

External Stakeholder Input: This factor provides a summary of the input received from stakeholders outside of the transit agencies as well as key internal decision leaders. An understanding of external perspectives is an important part of the business case given the public / political nature of the transit business.

Potential Risks of Transfer: Any change in a program has the potential for risk. Sometimes risk can result from not making a change as well. Identifying the source of that risk allows an informed business decision to be made.

Organizational Issues

Compatible with Agency Mission: This factor identifies how well the ADA paratransit certification program fits with the mission of the RTA or Pace.

Consistent with Agency Philosophy: Agency philosophy with respect to transportation for people with disabilities is described in this factor.

Consistent with Function of Agency: This factor addresses how the ADA Paratransit Certification Program fits with the function of the agency.

Suitable with the Organizational Structure: This factor addresses the organizational structure at each agency as it relates to the ADA Paratransit Certification Program.

Organizational Synergies: The extent to which the ADA Paratransit Certification Program has synergies in each of the organizations is identified.

Process Issues

Effectiveness of Implementing Trip-by-Trip Eligibility and Fixed Route Usage: The ability to take the ADA paratransit certification process to 'the next level' and more fully implement trip-by-trip screening and encourage fixed route transit use when possible is considered here.

Ease of Program Modifications: This factor identifies the ease of making modifications to the ADA Paratransit Certification Program based on where it is located.

Efficiency of Data Transfer: The outcome of the eligibility process is data that can allow trip-by-trip screening to take place. This factor looks at issues of data transfer from the location that does the eligibility determination to the place where the trip screening takes place.

Location of the Eligibility Review Board: The location of the Eligibility Review Board vis a vis the initial eligibility determination is discussed in this factor.

Thoroughness and Accuracy of Eligibility Determination: The goal of the ADA Paratransit Certification Program is to develop accurate eligibility determinations. This factor discusses any impact on eligibility outcomes that might arise based on location.

Costs

Transfer Costs (one-time): This factor discusses the one-time costs associated with transferring the ADA paratransit certification program from the RTA to Pace.

Incremental Costs of Eligibility Function: The other component of costs is the incremental amount of cost associated with a new organizational location.

Each of these factors is analyzed below. Information gathered from the review of the current program is included in this analysis. Input from internal and external Stakeholders and Legislators is also incorporated.

External Issues

External Stakeholder Opinions

In general, stakeholder feedback differed based on whether they were associated with a transit agency or not. Those not associated with an agency seemed to have knowledge of ADA paratransit but limited familiarity or opinion about the eligibility program, and this can be interpreted favorably. External stakeholders from the suburbs seemed to have a general (yet not strong or supported) feeling that it might make sense to have the eligibility function at Pace because they were operating the service. At the same time,

they expressed an understanding of the potential perception of conflict that could emerge.

People associated with transit agencies (RTA, CTA and Pace) seemed to see both positives and negatives with transferring the function.

Overall, there seemed to be general satisfaction among the external stakeholders contacted with the current job that the RTA was doing in making ADA paratransit eligibility determinations. There seemed to be a general trust in the independence and objectivity of the agency and in the fairness of the decisions. This is not always the case in systems across the country where eligibility determination can become an issue of contention between the disability community and transit agencies.

Given recent increases in the cost of ADA paratransit service, there was some feeling among a few of the stakeholders that some individuals currently using the service might be able to use fixed route services and that stricter determinations of eligibility might be possible. The low rate of denial of applicants was sometimes cited.

A few stakeholders, particularly those representing the City of Chicago, expressed strong reservations about the Certification Program being transferred to Pace. These stakeholders noted that 80% of the current riders of the ADA paratransit service lived in the City of Chicago. Some concern was expressed about having additional authority for services for these riders transferred to an agency whose main mission, and whose Board, largely represents suburban residents. Concern was also expressed that greater control over this portion of the ADA paratransit service might also lead to greater conflicts over regionwide funding.

Some concern was also expressed about having eligibility and operations within the same agency. Most mentioned that at a minimum, there could be a perception of a less fair process. Some indicated that with the financial pressures of operating the service, it might be harder for Pace to make objective eligibility decisions. There might be more of a tendency to administer the program as a "gate-keeping" function and "demand management" function than as a process that should be looking to identify the abilities and limitations of riders with disabilities.

Taken as a whole, overall stakeholder opinions were either neutral or slightly in favor of keeping the ADA Paratransit Certification Program at the RTA.

Potential Risks of Transfer

If the program were maintained by the RTA, there would be no transfer and no associated risks of transfer.

Transfer of the program to Pace would have some significant potential risks. These risks would not necessarily manifest themselves, but should be considered because of the potential to turn into difficult public relations issues. One risk would be that some of

the current staff might elect not to remain with the program if the main certification office were to be relocated. This would be the case, in particular, if the new location were not in downtown Chicago and changed the required commute of key employees. A loss of staff experience, which was identified in Technical Memorandum #1 to be a major strength of the current program, would be a set-back to the program. There currently is a strong, long-term, experienced staff.

A second risk would be that there could be public opposition from riders who live in Chicago and/or officials who represent Chicago residents. There is already some concern over the fact that Pace is making operating decisions that affect City of Chicago riders. Adding the critical function of deciding eligibility for the service could exacerbate these concerns.

Having the agency that operates the service make eligibility decisions could also lower the level of community trust in the fairness of the process. There is likely to be a perception that Pace would not be able to be truly objective in making eligibility decisions because of the significant financial pressures that are likely to continue into the future.

Beyond perceptions, there is also a risk that the objectivity of the process could be affected if the process were transferred to Pace. Even if staff did not overtly let financial concerns influence decisions, simply being in an environment where these concerns were constantly expressed, could inadvertently influence decisions.

There is also risk of public backlash to implementation of trip-by-trip eligibility if the process were to be relocated to Pace. This would be particularly true if this implementation were to take place shortly after the transition. If more trips are determined ineligible right after the transition, this could be perceived as evidence that Pace is unfairly reducing people's access to the service. Keeping the process at the RTA might make for a smoother transition into trip eligibility.

Finally, there is a risk that a further separation of ADA paratransit from the CTA could impact long-term commitments to maximizing the accessibility and usability of fixed route services by persons with disabilities. The cost of ADA paratransit service is one of the main incentives for encouraging maximum accessibility and use of fixed route services. The more the modes are split between Pace and the CTA, the less incentive CTA will have to make extra efforts to increase the usability of the fixed route service. There is a somewhat more direct connection with CTA if the program is maintained by the RTA.

Consideration of this business case factor favors keeping the ADA paratransit certification program at the RTA.

Organizational Issues

Compatibility with Agency Mission

The RTA's mission is to administer planning, funding and oversight of public transportation programs in the region, and to manage regionwide programs. Consistent with this mission, the RTA currently administers several regionwide programs, including the reduced fare and free ride programs. It has also become more involved in regionwide transit information in recent years. Administering the ADA Paratransit Certification Program fits well with this mission. ADA paratransit eligibility impacts both major service organizations – CTA and Pace – and having the RTA perform this service in a consistent way for both clearly fits within the agency's mission.

On the other hand, while Pace has recently been given responsibility for operating ADA paratransit services throughout the region, its underlying mission is to provide public transportation in the suburban communities.

The link created by the ADA between fixed route services and complementary paratransit services is also important to consider. The ADA requires that all entities that operated non-commuter fixed route service also provide complementary paratransit service. This tie between the two services creates an incentive to ensure that fixed route services are as accessible and usable as possible. Paratransit demand is directly impacted by the level of accessibility and usability of the fixed route service. By transferring responsibility for ADA paratransit services in Chicago to Pace, this link has been affected. Responsibility for fixed route access still rests with the CTA while ADA paratransit responsibilities now are at Pace. While CTA has been diligent in meeting its obligations to make fixed route services accessible, not being responsible for ADA paratransit could affect the level of "extra" efforts to make fixed route services (and/or local infrastructure) accessible—above and beyond the requirements of the law. Transferring the ADA paratransit certification function could further weaken this natural link between fixed route and ADA paratransit. Keeping the program at RTA provides a better link to future CTA accessible fixed route efforts.

The recent switch in service provision responsibility from CTA to Pace also has created some issues in the representation of ADA paratransit riders by service provider boards. While 80% of the riders of the ADA paratransit program live in the CTA service area, decisions about their service are being made by officials from the suburbs. There is no formal contract or mechanism between Pace and CTA that would allow political representatives and officials from the CTA area to hold Pace accountable for the service decisions made regarding its residents. Transferring the critical function of eligibility – deciding who can and who cannot get service – could create additional questions of representation and accountability.

There are still unresolved issues between CTA and FTA about the CTA's legal responsibility to provide complementary ADA paratransit service. Since the CTA still

potentially has responsibility, (if not operating responsibility currently) further separation from the eligibility function by having it at Pace raises legitimate concerns.

Consideration of this element of the business case analysis would support keeping the ADA paratransit certification program at the RTA.

Consistent with Agency Philosophy

Proper administration of an ADA paratransit certification program requires that the administering agency be:

- Committed to fully protecting the civil rights of persons with disabilities
- Supportive of independence and integration of services for persons with disabilities, which means maximum accessibility to fixed route services and facilitating use of fixed route services
- Committed to delivering quality services to persons with disabilities in a responsible, cost-effective manner

Both the RTA and Pace have a longstanding record of commitments in all of these areas. As the oversight agency for the region, the RTA has a longstanding commitment to civil rights programs and services for persons with disabilities. RTA's ADA paratransit certification process has for almost 20 years been identified as one of the models in the country for accurately identifying rider abilities and promoting maximum integration and independence. Efforts to provide travel training services also demonstrate this philosophy and commitment.

Similarly, Pace has a longstanding commitment to riders with disabilities. This is reflected in both a very accessible fixed route system as well as in its extensive and accessible paratransit operations.

Examination of this business case factor suggests that it is neutral. There do not appear to be significant differences in agency commitment and philosophy regarding services for riders with disabilities.

Consistent with Function of Agency

The RTA was created to provide regional planning, funding, and oversight, and to administer regionwide programs. It has several programs that are similar to the ADA paratransit certification program, and has successfully managed the program since the passage of the ADA.

Pace is a service delivery agency and has limited experience administering eligibility determination processes. While it did administer a pre-ADA eligibility process for pre-ADA paratransit services, it has not administered a process with the complexity of ADA paratransit eligibility. While it has been given responsibility for operation of the ADA

paratransit service throughout the region, it does not operate fixed route services throughout the region (which have a natural synergy with paratransit under the ADA). Pace also does not have responsibility for managing administrative programs such as the ADA certification program for the region.

Consideration of this business case factor suggests that the ADA paratransit certification program is more consistent with the types of services and functions performed by the RTA than those performed by Pace.

Suitable with Organizational Structure

The current ADA paratransit certification program has been part of the RTA's organizational structure since 1992. The RTA has a long history of successfully managing this program. It also is integrated organizationally with the regional travel training program and with the Eligibility Review Board (appeals) processes. In addition, several components of the program have been cited nationally as best practices.

On the other hand, as a service delivery agency, the proper location of the program within Pace is more of an issue. During interviews with various managers at Pace, there was no agreement to date on where the program would be located if it were to be transferred. Our recommendation would be that it not be part of the Operations Division, as this could be perceived by the community as inherently biased. There would likely be a strong feeling that eligibility decisions were made in a way that would "manage demand" and keep costs in check (even if this was not the case). And there is the potential that staff located in that Division might be influenced in their decision-making by financial considerations.

Regardless of where the program was finally housed, it would be a somewhat new type of function for Pace. Pace has limited experience administering paratransit eligibility, and no experience with more complex ADA paratransit eligibility, since that responsibility has been with the RTA since the passage of the ADA.

Consideration of this business case factor would support keeping the program at the RTA.

Organizational Synergies

Given that Pace now operates ADA paratransit service throughout the region, also housing eligibility determination at Pace might provide some theoretical synergies. The flow of information about riders would be within the same organization. Any initiatives that involve both the support of operations and the certification program, such as trip eligibility, might also be more consistently pursued. However, as explained below, the detailed process review (see Technical Memorandum #1) did not identify and concrete examples of synergies or any information transfer issues.

To minimize public concern over possible conflicts and decision biases, Pace indicated that the ADA Paratransit Certification Program would likely not be housed in the Operations Division at Pace. If housed in another organizational unit, a transfer of rider information would be needed between the two divisions. The Division that manages the eligibility determination process would still need to use the customized software created by RTA to support the program. The software used by Pace for operations (Trapeze) is not designed at this time to fully manage an eligibility process like the one currently in place. Therefore, there would still need to be a transfer of data between the Divisions at Pace and between the two computer systems. There may be some benefit with these transfers happening between different divisions within the same organization, rather than between organizations, but given the electronic transfer of information now in place, this would be minimal. The review considered several reported issues with effective data transfer and concluded that all had been resolved by staff at the RTA and Pace. The review also found that there is currently an effective level of communications between the RTA Certification Office and Pace for arranging rides to assessment centers, making changes to rider master files, and for other administrative matters.

Also, there are potential organizational synergies between the ADA paratransit certification program and the regional Travel Training Program that is housed at the RTA. Information gained about applicants through travel training can help inform subsequent eligibility determinations. There is also a potential to further integrate eligibility determination and travel training into broader "travel options" and "mobility management" efforts.

There are also synergies between the certification program and the Eligibility Review Board (appeals) process that is at the RTA. Theoretically, these processes would function more smoothly within the same organization, although as argued above, with modern communications and technology, there is little difference in the effectiveness of communication between offices within the same agency compared to communications between offices at different agencies.

Consideration of this business case factor does not clearly support either locational option. While there are theoretical synergies, no concrete benefits have been identified. There are also other potential synergies with maintaining the program at the RTA.

Process Issues

Effectiveness of Implementing Trip-by-Trip Eligibility and Increasing Fixed Route Usage

Because Pace now operates ADA paratransit service throughout the region, there could be some synergies between the eligibility determination program and paratransit operations. As noted above, these would not necessarily be related to the management and administration of the program (i.e., data transfer and communications), but possibly to future implementation of trip-by-trip eligibility. This would theoretically be the case

since any efforts at trip-by-trip eligibility that would involve both the eligibility staff and operations staff could more easily be carried out if within the same organization.

It should be noted, though, that the review of the current program did not identify any limitations in the ability to implement trip-by-trip eligibility as a consequence of the program currently being housed at the RTA. As detailed in Technical Memorandum #1, the RTA has done a good job of managing the program and making eligibility determinations in a way that allows trip eligibility to be implemented at the operations level. The program does identify riders who are conditionally eligible. It identifies conditions with a level of specificity that makes trip decisions possible, and it effectively transmits the kind of rider information to Pace that is required to do trip-by-trip eligibility.

The review identified some difficulties with initial attempts to implement trip-by-trip eligibility. This is not atypical in the industry. At this point, very few transit systems have reported great success with trip eligibility. Even those reporting the greatest success have found the number of riders who can be served by fixed route to be relatively small. The difficulties experienced do not appear to be related to the way that eligibility determinations are currently being made, but more to developing an appropriate approach that can be carried out in day-to-day operations.

The review did identify some steps that can be taken by the RTA to develop information that might be more helpful in implementing trip eligibility. These suggestions get to some of the intricacies of the protocols used to do assessments, though, and in no way would be affected by whether the process was housed at the RTA or Pace. We expect that the recommendations could be implemented with equal success by the RTA or Pace.

Consideration of this factor would favor a transfer to Pace, but again only slightly and for theoretical reasons rather than for any lack of potential existing now between the RTA and Pace.

Ease of Program Modifications

Program modifications that impact operations (and vice versa) now require close communication between RTA and Pace. For the most part the review found that there is good communication between the RTA staff and Pace staff on issues related to the eligibility determination program. It could however be potentially easier to make modifications if both functions were located at Pace.

On the other hand, modifications that impact the Travel Training Program or the Eligibility Review Board program, both of which are located at the RTA, are easier to make because these programs are now housed together.

A major recommendation of this study is that the ADA paratransit certification program be combined with travel training and trip planning to more broadly address the travel needs of seniors and persons with disabilities. It is recommended that the current

assessment centers, which now focus exclusively on ADA paratransit service, provide applicants and potential applicants with a broader array of travel options. This approach represents the latest trend in systems across the country and holds significant promise for managing the costs of ADA paratransit services in the long-run. Modifying the current ADA paratransit certification program to be a more holistic, mobility management approach would likely be easier if the program was kept at the RTA. The other major elements of a broader mobility management approach – travel training, and trip planning – are located at the RTA. The RTA would also be in a better position to promote fixed route and paratransit options throughout the region (both CTA and Pace services).

Consideration of this factor is viewed as neutral with respect to organizational location.

Efficiency of Data Transfer

At the outset of the review, several potential data transfer issues were raised. This included:

- The reliable transmission of eligible rider information from the RTA to Pace
- Format and completeness of the rider information transferred
- Maintenance of accurate master rider records

Each of these issues was discussed at length with Pace staff. None were found to be related to the fact that data has to be transmitted between agencies. Daily transmissions of rider data from RTA to Pace were found to be very reliable. Pace staff also noted that full and complete records were being received. Issues with the maintenance of master rider records were found to be more related to the nature of the population being serviced (frequent address and phone number changes). The fact that the certification program was housed at an agency separate from operations did not appear to be contributing to any of the issues cited.

It was also noted that even if the certification program were transferred to Pace, eligibility records would likely still need to be electronically transferred. This would be so since the software used in operations does not have the required functionalities to support the certification program. The same issues would likely exist even if the program were located at Pace.

Consideration of this business case factor suggests that it is neutral. Data maintenance and transfer issues would be similar regardless of where the program was located.

Location of Eligibility Review Board

The RTA has successfully administered the Eligibility Review Board (appeals) process since the inception of ADA paratransit services in the region. The process meets federal regulatory requirements and is widely regarded as being independent and fair. It is understood that

even if responsibility for the certification program is transferred to Pace, the Eligibility Review Board process will remain at the RTA. Keeping this important appeal process at the RTA would be important to help offset possible public concerns about the fairness of decisions if made at Pace.

Thoroughness and Accuracy of Eligibility Determinations

The review found that the RTA is doing a very good job of making accurate and thorough eligibility determinations. Determinations were found to be fair and appropriate and the process was ensuring that only those whose disability prevents use of fixed route were being certified as ADA paratransit eligible. As detailed in Technical Memorandum #1, about 44% of individuals who initially inquire about the service "self-select" out of the eligibility process once the program has been fully explained by RTA staff and individuals have reviewed materials sent by RTA staff. The low denial rate for those who complete the process appears to be related to this high "self-selection." The low denial rate is similar to other systems studied that do up-front screening and require in-person interviews and assessments. About 18% of those who are made eligible are found to be able to use fixed route service some of the time. This is higher than in most systems, but could be slightly higher (perhaps in the 20-30% range). Recommendations were made in the study for strengthening this part of the process. These recommendations could be implemented with equal effectiveness by either RTA or Pace and the likelihood of successful implementation would not vary based on the location of the process.

The determination procedures and protocols were found to be well defined and structured. They are utilizing the best available tools in the industry for making thorough and accurate determinations. It is recommended that they not be changed significantly. Placing the process at Pace would therefore not result in any significant change to the way that determinations are done. The relatively minor suggestions made in the study for strengthening the process could be implemented with equal effectiveness by Pace or RTA.

A change in program location is not seen to affect this factor.

Cost Issues

Transfer Costs (one-time)

As detailed in Technical Memorandum #2, one-time start up costs associated with a transfer of the program to Pace would include costs for building-out adequate space to accommodate the staff and equipment, costs to move and assemble equipment and supplies, costs to replace equipment that is not transferred or is in immediate need of replacement, and potential costs for differences in benefits packages between the RTA and Pace.

The RTA ADA paratransit certification unit was recently relocated from the 2nd floor of the current building to the 15th floor. The cost of this move was $103,000. This included moving the files, equipment, personnel, remodeling of the offices and the storeroom as well as assembling workstations. These costs were for a move within the current RTA building, and did not identify costs that would be incurred to move to another building. We have estimated costs of moving to another building to be approximately $4,000 based on a breakdown of an inter-building move recently made by TranSystems in Schaumburg. The total estimated moving/build-out costs to relocate from RTA to Pace is estimated to be ***$107,000.***

Additional one-time costs of assets due to program relocation are estimated at ***$110,000*** (see Technical Memorandum #2). This includes phones, phone software, computers, monitors, printers, fax, workstations, and furniture as none of these assets are deemed to be transferable. The one-time moving and asset costs therefore are estimated to total about ***$217,000***.

A phone system upgrade that will cost an estimated $45,000 is also expected. This cost is something that will have to be incurred whether the program stays at the RTA or moves to Pace. It is therefore not included in this business case analysis. This cost should remain as part of the asset cost calculation, but it should be noted that it will be incurred regardless of program location. It should only be removed if trying to assess a net change in program cost.

Moving the ADA Paratransit Certification Program from the RTA to Pace would include not only program assets, but existing RTA personnel as well. There are currently 16 staff positions (plus two temporary / contracted staff) at the RTA. Since the RTA and Pace each have their own compensation and benefits package, there will be some differences that would need to be addressed with a move. It was assumed that each current RTA staff would be compensated at a base salary equal to the salary currently being paid at the RTA. Therefore, no salary costs are included in the onetime start up costs. Future salary increases would be based on Pace salary grades for each position. The major differences between RTA benefits and Pace benefits are related to medical/dental insurance costs, life insurance costs, holiday/PTO days, and transit benefits. A total cost impact of these differences cannot be determined without a complete analysis by individual employee.

In total, it is estimated that one-time transition costs would be about ***$217,000***. Keeping the ADA Paratransit Certification program at RTA would avoid these transfer costs.

Incremental Costs of Eligibility Function

A transfer of the process from RTA to Pace would have little if any impact on the ongoing cost of administering the ADA Paratransit Certification Program. Salary structures, benefits, and benefit costs are very similar, so no differences in labor costs are expected. Pace would also be administering the same contract with CAU for in-person interviews and assessments, so no change in contractor costs is expected.

Equipment and technology costs would also be the same regardless of where the program is located. The Trapeze system that is used by Pace to manage the operation of the ADA paratransit service does not have the functionalities needed to manage an eligibility determination process as complex as the one currently in place. While Trapeze markets an Eligibility Module that Pace could purchase, this module is designed more for use by systems that use simple paper applications and that do not have in-person interviews and assessments. It would be far more cost-effective to continue to use the RTA's Certification Database to administer the program than to consider significant customization to the standard Trapeze product. Consequently, we do not see any cost savings from synergies between the technologies and systems used in operations and eligibility determinations.

We also do not foresee differences in the cost of providing transportation to and from assessments sites. Pace already manages the contracts for this transportation, so no change in the structure or basic costs of the service are expected. There has been some recent discussion about the administrative costs that Pace charges RTA for managing the transportation to assessment sites. If Pace administered the eligibility determination program, these costs would still exist. They would likely be incorporated into the overall internal cost of the program.

Consideration of this business case factor suggests that it is neutral. Ongoing costs for making eligibility determinations would be the same regardless of where the program was located.

9.3 Summary Decision Matrix

The decision matrix on the following pages summarizes the information collected for each of the business case analysis factors. Each key factor is presented as a row in the matrix. The important findings and considerations should the ADA Paratransit Certification Program remain at the RTA are then summarized in the column titled "Remain at the RTA." The important findings and considerations should the program be transferred are then presented in the column titled "Transfer to Pace." The last column in the matrix suggests whether the analysis generally favors keeping the program at the RTA or transferring it to Pace.

The various data and information collected for each factor is presented in total, without screening by the TranSystems review team. The various overall factors are also not weighted by the review team in terms of relative importance. As agreed, a final recommendation as to the location of the ADA Certification Program is not included. Instead, the information is presented in total to allow the RTA to consider the relative importance of each factor and use the information to make an informed decision.

Regardless of whether the program remains at RTA or is relocated to Pace, the recommendations in Section 8 should be strongly considered to enhance the value of the certification program for people with disabilities and the operating agencies.

9.1 External Factors

SHEET 1 OF 2

Element	Remain at the RTA	Transfer to Pace	Notes
External Stakeholder Opinions	Seems to be mostly working well. There should be more locations for people to get their certification. Riders and the community appear to have no issues with the current process. There appears to be community trust in the objectiveness of the process. Some noted the low rate of applicant denial and were concerned about the thoroughness of the process since—not understanding that because 44% of applicants "self-selection" out of the process due to up-front screening and the assessment process, those who come in for in-person interviews are very likely to have significant mobility limitations. Stakeholders, particularly from the city, raised concerns that 80% of riders live in the CTA area, yet transportation decisions for these riders rest with the Pace Board which is made up largely of officials from suburban communities. Moving the eligibility function could exacerbate these concerns.	Some stated "might make sense at Pace," although they had a difficult time articulating a specific rationale. Some stated concerns about perceptions that Pace could "manage" costs by controlling eligibility process. Suburban stakeholders have trust in Pace. City stakeholders feel moving paratransit certification functions to Pace leaves their ridership politically unrepresented.	**Neutral to Slightly Favoring Remaining at the RTA.** General satisfaction with and trust of current process. Some concern among City stakeholders with moving more paratransit responsibility to Pace.

9. 1 EXTERNAL FACTORS (continued)

Element	Remain at the RTA	Transfer to Pace	Notes
Potential Risks of Transfer	No risk because no change	Loss of some community trust in the process due to real or perceived biases of the operating agency making eligibility determination. Potential public opposition from riders living in the CTA area to transferring more responsibility for services in the CTA area to Pace. Greater public opposition to implementation of trip-by-trip eligibility if done after program has been transferred to Pace. Possible change to philosophy of program (more "gate-keeping" than independent and objective). Potential long-term risk of less commitment to fixed route accessibility by CTA. Potential loss of key knowledgeable staff critical to the operation of certification process created by change in job location.	**RTA**. Favors keeping at RTA. There are potential risks to transferring the function.

9.2 Organizational Factors

SHEET 1 OF 3

Element	Remain at the RTA	Transfer to Pace	Notes
Compatible with Agency Mission	RTA's mission is regionwide and fits with regionwide eligibility determination program (also reduced fare certification and Travel Info Center) CTA still bears a responsibility in FTA's eyes to make sure ADA paratransit service is provided, so retaining the function with RTA keeps CTA connected. More direct link between RTA and CTA in terms of responsibility to the 80% of ADA paratransit riders who live in the CTA area	Fits with recent transfer of responsibility for ADA paratransit service throughout the region to Pace. Overall mission, however, remains service in suburban communities. Further separation of organizational responsibility for fixed route and ADA paratransit in Chicago could weaken the link created by the ADA between these two services. A lack of financial responsibility for ADA paratransit could affect investments and efforts to improve fixed route access and use by persons with disabilities. Some inconsistencies in rider representation; 80% of ADA paratransit riders do not reside in Pace's service area.	**RTA.** This factor suggests RTA as the agency to do regionwide eligibility
Consistent with Agency Philosophy	RTA has longstanding philosophy to promote use of fixed route service by persons with disabilities, which is vital to proper ADA paratransit eligibility determination. RTA, as the oversight agency for the region; has a longstanding philosophy of meeting transportation civil rights requirements	Pace also has a longstanding philosophy of accessible fixed route services, as well as extensive and accessible paratransit services. Similar commitment to civil rights compliance.	**Neutral.** Both agencies have a longstanding commitment to quality services for persons with disabilities, accessible fixed route service, and compliance with civil rights requirements.

9.2 ORGANIZATIONAL FACTORS (continued)

Element	Remain at the RTA	Transfer to Pace	Notes
Consistent with Function of Agency	Administrative functions of the RTA are consistent with function of ADA eligibility determination. Oversight function of the RTA fits well with ADA paratransit certification program, which must be performed in a way that protects the civil rights of applicants.	Historic and underlying function of agency is service delivery in the suburbs. Since Pace currently operates the paratransit service for the region, it could be said that there would be a tighter relationship between the service and eligibility if Pace were to manage the eligibility function	**RTA.** This factor favors keeping the function at the RTA.
Suitable with Organizational Structure	RTA currently has ADA paratransit certification and travel training reporting to the same manager. RTA has managed the eligibility process successfully since 1993. Is well integrated into the organizational structure.	To help ensure neutrality in decisions, suggested and assumed that eligibility would not be in the Operations Division. Other divisions at Pace do not currently perform this type of function. Would be new to agency. No history of doing ADA paratransit eligibility.	**RTA.** This factor favors keeping the process at the RTA.

9.2 ORGANIZATIONAL FACTORS (continued)

SHEET 3 OF 3

Organizational Synergies	Natural and important synergies exist between ADA paratransit eligibility determinations and travel training. Synergies also exist between the certification program and the Eligibility Review Board (appeal) process in terms of records and files transfer. Review found good data transfer and communications between RTA and Pace now, benefits likely to not be significant.	Potential synergies with Operations Division, which now operates the regionwide ADA paratransit service. Any initiatives that involve both operations and eligibility determination (e.g., trip-by-trip determinations) could be pursued under consistent direction. Largely theoretical, though. No concrete benefits identified. Communications and data transfer would be between divisions within the same agency, rather than between agencies.	**Neutral**. Potential synergies, but largely theoretical. No actual, concrete benefits identified. Possible slight advantage to transferring function to Pace. More hypothetical than substantive, as review did not identify information flow or data issues that needed increased organizational synergies.

9.3 PROCESS FACTORS

Element	Remain at the RTA	Transfer to Pace	Notes
Effectiveness of Implementing Trip-by-Trip Eligibility and Increasing Fixed Route Usage	Benefits of keeping ADA paratransit certification program together with Travel Training, which has had success in promoting fixed route use Organizationally, RTA is in better position to promote regionwide fixed route options (both within the CTA area and Pace area) through the eligibility determination program. Categories of eligibility created by RTA currently designed to be detailed enough to allow for trip-by-trip eligibility determinations. Some potential improvements were identified, but there was no indication that the location of the program at RTA has inhibited the development of a process that promotes trip-by-trip determinations or maximum fixed route use.	Because Pace has direct budget responsibility for the provision of ADA paratransit services, there may be more urgency to pursue maximum implementation of trip-by-trip eligibility. It does not appear that the basic process for making eligibility determinations, or the types of eligibility granted, would change to any great degree. Potential longer-term disadvantage to more completely separating ADA paratransit from fixed route service in the CTA area. Requirement to provide ADA paratransit creates a strong incentive to make fixed route service as usable as possible by persons with disabilities. This link has been partially broken with the assignment of ADA paratransit service in the CTA area to Pace.	**Neutral**. Current determinations accurate and complete enough for trip determinations. Location of program likely would not affect ability to implement trip eligibility. Some potential issues with links to accessible fixed route service in the CTA area if program transferred to Pace.

9.3 PROCESS FACTORS (continued)

Element	Remain at the RTA	Transfer to Pace	Notes
Ease of Program Modifications	Program modifications that affect both eligibility determinations and travel training are easier with certification program at RTA. Modifications that affect both initial eligibility determinations and the appeal process also now easier with program at RTA. Transitioning the eligibility program to a more holistic "travel center" incorporating "mobility management" options would be easier with the program located at RTA since the other major pieces of this approach (travel training, trip planning, etc.) are now located at the RTA.	Potential for easier modifications to things that involve staff from both the eligibility determination process and operations, since both would be housed together.	**Neutral.** Each has advantages depending on what aspects of eligibility determination program might need to be modified.
Efficiency of Data Transfer	Requires daily transfer of data from RTA to Pace. Found to be very reliable and efficient, though. With current technology, transfer between agencies no more cumbersome than transfer within agencies. Some interest at the RTA of having the applicant files stored electronically	Would still require transfer of data from division within Pace doing eligibility to the Operations Division. Current software system would still need to be used since Trapeze not designed to handle eligibility process as complex as the current program.	**Neutral**. No real data transfer issues identified and no real benefit by having the process at Pace.

9.3 PROCESS FACTORS (continued)

Element	Remain at the RTA	Transfer to Pace	Notes
Location of Eligibility Review Board	RTA has successfully administered the ERB since the inception of ADA services in the region. Widely accepted as objective and fair in the community.	Should remain at the RTA if the initial eligibility determination function moves to Pace for "separation of function" and perception of independence.	**No Change**
Thoroughness and Accuracy of Eligibility Determinations	Current process found to be quite accurate and thorough. Current process uses the most effective tools developed in the industry. Low denial rate found to be the result of effective "self-selection" by potential applicants and screening by RTA staff. About 44% of individuals who call to ask about eligibility do not complete the process. Persons who continue all the way to in-person assessments highly likely to have significant mobility limitations. Similar very small denial rate found at other systems that have in-person processes and effective up-front screening.	Not likely to see any change in determination outcomes. Recommendations made in the review for strengthening the process could be implemented with equal effectiveness and ease by RTA or Pace.	**Neutral.** No significant changes in eligibility determination outcomes would be expected from a change in program location.

9.4 Cost Factors

SHEET 1 OF 2

Element	Remain at the RTA	Transfer to Pace	Notes
Transfer Costs (one-time)	No transfer costs.	One-time costs include moving/build-out costs, asset relocation expenses. Moving/build-out costs are estimated at $107,000. Asset relocation expenses were estimated at $110,000 to operate the paratransit certification program at 2010 levels. No change is anticipated for salary costs. Minimal differences in benefit costs are expected—while benefits are generally similar at both agencies, there are some differences. An analysis would be required for each individual staff member to determine the implication of these differences. Pace would need to purchase new servers to store data – cost not identified.	**RTA**. Keeping the process at RTA would avoid transition costs, estimated at approximately $217,000, plus the cost of additional servers needed to store eligibility data (not identified).

9.4 COST FACTORS (continued)

Element	Remain at the RTA	Transfer to Pace	Notes
Incremental Costs of Eligibility Function	No impacts if process remains at RTA.	No savings or added ongoing costs. Salaries and benefits similar at Pace and RTA. No technology or equipment cost changes. Same transportation cost, even though operated at Pace. Would still need dedicated staff in Operations to arrange and deliver trips for applicants and to manage contracts with service providers.	**Neutral**. No significant differences in long-term costs of administering the program after initial transition. Regardless of location, ways to reduce transportation costs to assessment sites should be explored.