

Plan for the Achievement of Transportation Coordination in Human Services

# CONNECTICUT FORUMS ADDITIONAL COMMENTS

June - August 2005

## HELPING SHAPE THE STATE ACTION PLAN FOR A COORDINATED

### TRANSPORTATION SYSTEM

THIS FORUM WAS FUNDED UNDER A GRANT FROM THE CONNECTICUT COUNCIL ON DEVELOPMENTAL DISABILITIES TO THE UNIVERSITY OF CONNECTICUT A.J. PAPPANIKOU CENTER FOR EXCELLENCE IN DEVELOPMENTAL DISABILITIES EDUCATION, RESEARCH, AND SERVICE

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#### **BACKGROUND AND INTRODUCTION**

As stated in President Bush's Executive Order on Human Service Transportation Coordination released in February 2004, "Transportation plays a critical role in providing access to employment, medical and health care, education, and other community services and amenities. The development, implementation, and maintenance of responsive, comprehensive, coordinated community transportation systems are essential for persons with disabilities, persons with low incomes, and older adults who rely on such transportation to fully participate in their communities."

In response to this directive the Connecticut Department of Transportation is committed to following through on this federal initiative through a grant entitled *United We Ride*. Developed jointly by the Federal Transit Administration (FTA), and the Departments of Health and Human Services (HHS), Labor (DOL) and Education (DOE), *United We Ride* is a human service transportation coordination initiative intended to break down the barriers among federally funded transportation programs, set the stage for local partnerships that generate common sense solutions, and help states and communities overcome obstacles to coordination of transportation systems.

The Framework for Action, developed by the FTA is a coordination self-assessment tool that states and communities can use to identify areas of success and highlight the actions still needed to improve the coordination of human service transportation. Core elements of the Framework for states include (1) evaluating the degree of existing State leadership and partnership; (2) determining whether current transportation resources have been identified, transportation needs have been assessed, and a strategic plan has been developed; (3) assessing the degree of customer focus; (4) identifying cost-sharing arrangements; (5) determining technology needs; and (6) assessing the extent of community-level mobility management arrangements. Using the Framework as a springboard, the Connecticut Department of Transportation (ConnDOT), working with the Office of Policy and Management and the Department of Social Services, is committed to developing a workable, consumer-driven, and cost effective plan for the coordination of

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inclusive, accessible transportation in the state.

In order for this Transportation Coordination initiative to be successful it must be based on the needs of all of the people who use the system, including people with disabilities. The University of Connecticut A.J. Pappanikou Center for Excellence in Developmental Disabilities Education, Research and Service (UConnUCEDD) has received a grant from the Connecticut Council on Developmental Disabilities to work with ConnDOT and other transportation partners to ensure the interests of people with disabilities are represented in the action plan. The funding from this grant is being used to support a series of Regional Forums for consumers with disabilities who use transportation services. Invitees represent a wide range of disabilities and come from urban, suburban and rural areas of Connecticut. Conference calls will be set up in order to get input from consumers unable to attend the Regional Forums in person.

#### THE PROCESS

Seven PATHS Forums were held in Groton, Manchester, Torrington, Newington, Hamden, Bridgeport and Mansfield. Information was distributed about The CT Department of Transportation's United We Ride initiative, the Kennedy Center of Greater Bridgeport travel-training initiative for individuals who are elderly or who have disabilities and Information about the travel training provided by the Board of Education and Services for the Blind for individuals who are legally blind.

Four specific questions were asked of participants who attended the forums. In addition responses were received from other individuals via email and phone. The following is a summary of these additional comments.

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WHAT PROGRAMS/SERVICES/INITIATIVES HAVE YOU SEEN WORK WELL EITHER IN CONNECTICUT OR ELSEWHERE?

- Paratransit has worked
- Washington D.C. uses zoned taxi fares
- The Red Top Cab in Virginia has accessible taxis
- Vermont has a Ticket to Ride program
  - It comes from 5311 or 5310 money -- which is from the Department of Transportation (federal money that state gets)
  - Each County in Vermont has set up a volunteer driver program; the local transportation providers recruit volunteer drivers who get paid based on how many miles they drive
  - Some of the money from the transportation budget for people who are elderly and people with disabilities is set aside for this program; any person who is elderly or who has a disability can apply for the ticket to ride program
  - The individual has an account with a set amount of money to use for the year; when a person wants a ride they can take the bus and just give the driver their name or show a ticket to ride card
  - If you want door to door service you can call up the transportation company and tell them where you want to go and they will find a driver for you

WHAT ARE THE BIGGEST GAPS/BARRIERS/OBSTACLES YOU HAVE EXPERIENCED?

• The cost for transportation is very high

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- Ambassador charges \$500 even if there are two people in the van; the transportation is often unreliable and late.
- Problems with transportation under Medicaid/SAGA include:
  - DSS has contracted with for-profit transportation brokers who get paid a fixed amount to provide transportation services and then proceed to increase profits by restricting access to transportation to medical appointments by denying requested rides or making the paperwork for rides so burdensome that people don't follow up
  - DSS no longer provides transportation to get to independent providers not paid for by Medicaid, even if the services are of a type DSS pays for in a clinic setting (e.g., psychologists, podiatrists)
  - There is no coverage at all for transportation to get to medical appointments under the SAGA medical program
  - Because the SAGA medical program was significantly cut back last year, people
    now sometimes have to go significant distances to get to a SAGA-participating
    provider, and the lack of any transportation makes this even more of an obstacle
    to needed medical care
  - When transportation is provided to medical appointments under Medicaid, there
    are sometimes very long waits at the provider's office to get picked up
- The inefficiency of the Connecticut transit bus system is a major barrier
  - "The City Bus" or in the lexicon of the D.O.T. "fixed route service" takes too long to get from one point to another (three hours to get from South Windsor to Hartford)
  - People are often exposed to extreme elements of weather such as cold in wintertime, heat in summertime, and the occasional thunderstorm
  - Snow often blocks the path during transfers between bus routes

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- The DATCO Dial-A-Ride program is hard to schedule and must be done far in advance
  - "I had to go at noon for a 3:00 appointment. I have stamina problems and they will not allow me to ride flat (tilt in space)"
- The application process for Dial-A-Ride is rigorous and is three pages long
- There are no modifications to sidewalks in New Britain
- The vans do not always have air conditioning
- Taking the bus results in being in a "bad neighborhood" at dusk
- "I cannot go to the movies or Real Art Ways"
- It is not possible to get from Avon to Newington
- It is not possible to get from Newington to the Hospital for Special Care although you can get to New Britain Memorial
- There is no transportation in Bolton and Colchester
- "There is no transportation on weekends to visit my husband in a nursing home because Valley Transit does not run on the weekends. It is also not possible to bring my husband home for a meal because the cost is prohibitive"
- Public transportation for people who live in the rural Northeast is nonexistent; if you
  don't drive a vehicle, you are stranded, with limited opportunities to even get to a
  grocery store
  - This impacts where people can live, whether they can work or whether they can

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get to support groups, centers or organizations that provide assistance to people with disabilities

 This lack of transportation in this region impacts the ability of people with disabilities to work, to be involved in their community, to contribute -quality of life is diminished for people with disabilities of all ages who are not able to utilize personal transportation

#### WHAT DO YOU SEE AS YOUR NEEDS FOR TRAINING AND CUSTOMER SERVICE?

The community needs to be more sensitive to the needs of people with disabilities. There is a great deal of insensitivity on the part of the vast majority of the general public, and disability professionals in regard to using the Connecticut transit fixed route system. There is doubt that professionals and the general public understand what fixed route public transit is like for people with disabilities. Professionals are not considering issues like power chairs being damaged by rain, or people with suppressed immune systems being unable to wait outside in the elements for a bus.

#### WHAT DO YOU SEE AS THE MOST IMPORTANT AREAS FOR ACTION?

- Develop more efficient models of transportation which will maximize productivity and social involvement
- Define Taxi fares by zone rather than by mile like they do in Washington D.C.
  - For instance, in D.C., you can go anywhere in the District for \$15 dollars one
    way for folks with cognitive or intellectual disabilities, this type of fare system

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could help eliminate confusion, and give people a more efficient option

- Accessible Cabs- determine why companies like Red Top Cab in Virginia have made some of their vehicles accessible; What was in it for them? Could CT companies be motivated to follow Red Top's lead?
- Define why non-emergency medical transportation companies are able to charge so much money per ride - are these rates determined by the D.O.T. or is this a case of private companies gouging citizens with disabilities because they can? Is there leverage for change?

#### **NEXT STEPS**

In October 2005, Forum attendees will be invited to attend Transportation Institute. This day-long Institute on Transportation will be organized to review and consolidate recommendations from the seven Forums, foster cross-agency collaboration, develop action steps, and formalize the formation of Technical Advisory Committees. Invitees to the Institute will include: consumers; representatives of State Agencies such as the Office of Policy & Management, Department of Social Services, Department of Mental Retardation, BESB, DMHAS and other relevant agencies; key legislators; and representatives from the Office of the Governor.

Priority areas for action will be developed. These will be based on the priorities identified through the Regional Transportation Forums by consumers. The list will be narrowed down by Institute attendees to a maximum of five top priorities around which Technical Advisory Information/Committees can be formed.

The Technical Advisory Committees will assist the State in the development and implementation of a State Human Services Transportation Action Plan.

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