Consolidated Findings from Regional Forums on Transportation



Helping Shape the State Action Plan for a Coordinated Transportation System



The University of Connecticut A.J. Pappanikou Center for Excellence In Developemental Disabilities Education, Research and Service



PLAN FOR THE ACHIEVEMENT OF TRANSPORTATION COORDINATION IN HUMAN SERVICES

BACKGROUND

In February 2004, President Bush issued an Executive Order intended to improve coordination in human services transportation. The order sought to enhance access to transportation for people with disabilities, stating that "...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."

An increasing number of Connecticut residents are unable to get to work, run errands, participate in community, religious and political activities or access medical care because they lack reliable, accessible transportation. According to the 2002 National Organization on Disabilities/Harris Surveys of Americans with Disabilities, nearly a third of Americans with disabilities have inadequate access to transportation, compared to 10% of those without disabilities. This problem affects more than half a million citizens with disabilities in Connecticut as well as a rapidly increasing population of older adults.

This report provides a glimpse into the lives of people with disabilities who are faced with a fragmented, confusing, and inadequate system of transportation. Many of their concerns are mirrored in a June 2005 paper from the National Council on Disability on the state of transportation in the United States, which found that many people with disabilities "cannot shop, socialize, enjoy recreational or spiritual activities, or even leave their homes."

NTRODUCTION

The Federal Interagency Coordinating Council on Access and Mobility, in partnership with the Federal Transit Administration (FTA), the Departments of Health and Human Services (HHS), Labor (DOL) and Education (DOE), developed "United We Ride." This initiative is aimed at creating a seamless, comprehensive and accessible system of transportation for all people who need it, including people with disabilities. The plan will lay the foundation for local partnerships to generate common sense solutions, helping states and communities overcome obstacles to the coordination of transportation systems. In Connecticut, the Department of Transportation (ConnDOT) and the Office of Policy and Management are working to create a state specific plan to coordinate accessible transportation options in the state. The following agencies are involved:

- · The Department of Social Services, which provides emergency and non-emergency medical transportation
- The Bureau of Rehabilitation Services
- Area Agencies on Aging
- The Board of Education and Services for the Blind
- The CT Commission on the Deaf and Hearing
 Impaired
- The Department of Education

- The Department of Labor
- The Department of Veterans Affairs
- The Department of Mental Retardation
- The Department of Mental Health and Addiction Services
- The Department of Children and Families

In 2005, The University of Connecticut A.J. Pappanikou Center for Excellence in Developmental Disabilities Education, Research and Service (UCEDD) 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 state's plan. The grant provided funds for a series of seven Regional Forums for consumers with disabilities who use transportation services. Invitees came from urban, suburban and rural areas of Connecticut and represented a wide variety of disabilities including spinal cord injury, visual and hearing disabilities, developmental disabilities, acquired brain injuries, psychiatric disabilities, and intellectual disabilities.

One hundred forty five individuals with disabilities, transit district representatives, local advocates and others attended seven forums in Groton, Manchester, Torrington, Newington, Hamden, Mansfield and Bridgeport. Participants responded to four specific questions:

- What programs/services/initiatives have you seen work well in Connecticut or elsewhere?
- What are the biggest gaps/barriers/obstacles you have experienced?
- What do you see as your needs for training and customer service?
- What do you see as the most important areas for action?

Attendees formed small discussion groups to share personal stories as well as stories of friends and colleagues. If individuals did not have an opportunity to share all of their ideas they were encouraged to share comments in writing, either during the forum or at a later date. Consumers who were unable to attend the Regional Forums in person provided input via conference calls.

Based on these discussions, four major priorities for action emerged





PRIORITIES FOR ACTION

- 1 Community Access
 - 2 Collaboration
 - Education and Training



1 CommunityAccess

"I had to go to my doctor's office at noon for a 3:00 appointment because that was the only transportation available."

Access to all aspects of community life provides an opportunity for citizens to become valued and contributing members of their communities. This is as important to people with disabilities as it is to other residents of a community. However, because of inadequate transportation services, many people with disabilities cannot participate in the community life many of us take for granted.

Access to medical care: Many individuals found it difficult to get to medical appointments in and out of town. Either transportation was unavailable or the pick-up and drop-off times did not coordinate well with doctor's office hours. In addition, many people reported that they were unable to get to a pharmacy in order to get a prescription filled.

Cost: The cost for transportation other than fixed route and Paratransit can be prohibitive. A round trip provided by Non-Emergency Medical Transportation (NEMT) to Medicaid recipients to/from medical appointments routinely costs \$300 and up. In addition, such transportation is sometimes unreliable, arriving late or not at all. One person commented that if funds were used more efficiently, there would be more money for other services. It would be cheaper to use cab companies if they were encouraged to get accessible vehicles and regulations permitted contracting with them.

Limited weekend and evening services: Most people reported that transportation coverage was inadequate for evenings and weekends, both within and between towns. Many people spoke of their difficulty getting to social and civic activities, to their child's school events, to jobs, to places of worship or to visit family and friends. Accessible services frequently do not go to community locations such as the mall.

Environmental barriers: Forum participants reported environmental problems including a lack of adequate signage (including font sizes too small for individuals with low vision), shelters that were inaccessible for someone in a wheelchair, a lack of curb cuts at bus stops, and poorly maintained facilities. Although newer buses are set up to drop passengers using wheelchairs off at a curb, when a curb is not available, the angle of the ramp or lift is too steep to navigate. The turning radius inside the bus is too tight for some power wheelchairs, forcing the use of more costly transportation services.

Limited transportation within and between communities: Major cities are frequently not interconnected, and forum participants reported difficulty transferring between the seventeen existing Transit Districts. Many Dial-A-Ride services are limited to city limits. Some services that extend past town boundaries only go to specific destinations. An example: a local post office may be 11 miles away, but a trip to get to one might be 50 miles. Although the nearest post office might be in the next town, geographic limitations obligate people to go to the post office in a downtown area 50 miles away that is served by mass transit.

Inefficient connections: Several participants noted that having all fixed routes on a hub and spoke system is inefficient; a trip that should take 10 minutes takes an hour or longer. There are not enough inter-modal connections, such as between the bus and the train. Transferring can be very complicated, resulting in travelers taking the wrong bus or becoming stranded.

Regional concerns: Connecticut Transit recently cut back routes, particularly in suburban areas. Therefore, while it may be possible to get into a city from a suburban area in the morning, getting back may be a problem as many suburban routes end in the early afternoon or evening. Rural areas such as the Northwest and Northeast corners of the state have additional difficulties providing transportation due to the large, sparsely populated service area. Many communities are not able to provide any transportation because they cannot meet the local match requirement for existing programs.

2 • Collaboration

"Why do I see so many agency vans with just one person in them?"



Municipal and agency officials who attended the forums spoke of being unable to fulfill requests for transportation due to restrictions in regulations, even when vehicles were available. Several agencies reportedly provide transportation to the same location for different groups, creating redundancy and inefficiency. Strict eligibility guidelines result in limited transportation options for individuals who are meet the requirements of one agency and not another. Coordination of transportation services would increase cost-efficiency in addition to expanding the pool of riders served.

The Connecticut Department of Transportation, working with the Office of Policy and Management, has made a commitment through "United We Ride" to improve the coordination and collaboration of all State agencies that provide transportation services.



Federal funding allocations: Sections 5310, 5307 and 5311 of the Federal Transit Act do not work together to coordinate resources for individuals. Rigid regulations restrict transportation to specific programs, limiting what is available under those specific guidelines. Changes to these regulations to allow more flexibility and coordination require efforts from policy makers; however most individuals do not realize their impact and therefore do not comment or advocate for these changes.

State agency regulations: Transportation regulations limit resource sharing and many available programs cannot overlap. For example, the Department of Social Service regulations limit the populations that can be served in various programs. Temporary Assistance for Needy Families (TANF) funds are to be used for TANF recipients only--even if someone else needs a ride to the same place at the same time.

Town-specific restrictions: Many agency and municipal vehicles sit idle during some part of the day or week. A number of municipalities run individual Dial-A-Ride programs with limited coverage areas. Neighboring towns often run multiple transportation services under a variety of departments to similar destinations; this could be accomplished much more efficiently by pooling resources and working together to get people where they need to go. Zoning stipulations influence where buses can and cannot stop or where human services providers can be located.

3 • Education and Training

"Sometimes it takes a long time to get on or off the bus because the driver doesn't know how the lift works!"

Discussions at the Transportation Forums revealed significant information gaps across the state. Transit companies are unaware of programs in neighboring towns and do not disseminate information about alternative transportation choices. Providers lack training in regulations governing passengers with disabilities and the safe use of equipment.

SEATS 10

Local policy makers may be misinformed about program regulations and limit services based on this misinformation. Forum attendees were often surprised to learn from providers who came to the forums about programs and services available to them, or about potential financial assistance or tax breaks. Consumers not familiar with transportation options said they avoid using public transit due to fearfulness and unfamiliarity with the system.



Provider Training: There is a critical need for training and education among drivers and staff, including dispatchers and maintenance workers. Attendees indicated that not all drivers follow regulations about letting people with disabilities board and exit the bus first, causing friction between passengers who have seated themselves in areas required for wheelchair users. Some drivers and dispatchers were reported to be insensitive to the needs of people with disabilities. Passengers complained of rudeness and impatience on the part of drivers with customers who take longer than others to enter or exit a vehicle. Training is needed on how to let people off properly, how to use tie downs, how to provide transportation to someone with a guide or service dog and how to communicate with people who are deaf or who are unable to read. The possibility of a certification and a recertification process for drivers was suggested.

Consumer Education: Potential passengers don't know what is already available. They frequently find navigating difficult because they cannot read the transit maps, can't hear the directions, don't get accurate information, and get overwhelmed by the process. In regions and communities where services or programs <u>do</u> exist, they are often unknown to consumers.



"The bus driver didn't tie down my chair properly, and when we went around a corner my wheelchair tipped over!"



Individuals with disabilities do not always feel safe as passengers. Safety issues, such as reliability of equipment and properly attached tie-downs on both fixed route and Paratransit vehicles, were felt to be a priority. Vehicles need to be maintained appropriately and lifts need to work. Drivers and passengers could benefit from having an additional person in the vehicle to provide assistance. Forum participants described a variety of incidents in which their wheelchairs were inadequately secured, causing fearfulness and a reluctance to use public transit.



Unsafe use of equipment: A ride on an "accessible van" can be uncomfortable and even unsafe. Consumers reported a lack of compliance with safety procedures or improper use of equipment, especially among smaller providers. High lifts or insecure tie downs on accessible vans can be frightening and dangerous to consumers.

Poor incident reporting: Drivers do not always report incidents, despite mandated reporting requirements. Individuals who take transportation should be taught the "complaint process;" for example, in the New Haven area, if a passenger is denied a ride with 24 hours notice they can contact the Office of Disability Services for assistance. Individuals also need to know the process for filing a complaint, the process used to investigate the complaint, and what the final resolution was.

Unsafe access: Bus shelters are often inaccessible for someone in a wheelchair because bench seats get in the way, or they have no seats, no overhead protection and no cooling or heating system. In the winter, snow is often left blocking access at bus stops.

What is working?

While there were strong complaints from many, some forum participants felt that public transportation and Paratransit (ADA Transportation and non-ADA Paratransit services such as Dial-A-Ride) presently met their specific needs, although this varied greatly from one town to another.

• Some communities, transportation companies and "Ride Share" programs have worked on providing transportation for individuals to get job training or to get to and from work. For example, rides are available for free through Job Access for the first six weeks of work in some areas.

• Another example is the Vista Vocational and Life Skills Center in Westbrook which has its own transportation and wants to expand it. There is increasing collaboration between Vista and other organizations that provide transportation in the region.

• There are also communities across Connecticut that have made strides locally to provide transportation for their residents. For example, an initiative is being developed to form a collaboration of the United Way agencies in Southeastern CT in order to coordinate their transportation services. Other local and regional efforts mentioned during the forums are described in an addendum to this report under the heading of "Examples of Local and Regional Best Practices."



Conclusions and Recommendations

Connecticut is a diverse state with rural communities, dense urban areas and large suburban regions. U.S. Census 2000 identified more than 546,000 people ages five and older with disabilities in Connecticut; 162,000 of them were over the age of 65. The issues, experiences and concerns in this report reflect the needs of this large and underserved population. The coordination of fragmented services is a crucial step in addressing these needs through a more efficient utilization of existing resources.

• Expand public transportation services to serve all Connecticut citizens and meet the mandate of the February 24, 2004 President's Executive Order on Human Service Transportation Coordination. Expand geographic and time-of-day limits on Paratransit services. Explore low-cost alternatives such as accessible taxis to reduce reliance on expensive medical transport vehicles. Increase weekend service to allow greater access to the community for anyone who does not drive or is looking for alternative transportation to combat high fuel costs.

• Mandate disability awareness and safety training using people with disabilities as trainers to improve the quality of existing and future service. Increase education of both consumers and service providers, including drivers and dispatch, to increase ridership on existing routes. Support more frequent inspections and proper maintenance of equipment to ensure the safety of consumers.

 Support collaboration between state agencies, towns and community service providers to increase costefficiency and allow more flexibility of services. Use ConnDOT's United We Ride to address the regulatory barriers among federally funded transportation programs, coordinate regional initiatives, and lay the foundation for local partnerships and generate common sense solutions to an issue that affects not just people with disabilities, but all citizens of Connecticut.

TERMS USED IN THIS REPORT

ADA

Americans with Disabilities Act: Passed by the Congress in 1990, this act mandates equal opportunities for persons with disabilities in the areas of employment, transportation, communications and public accommodations. Under this Act, most transportation providers are obliged to purchase lift-equipped vehicles for their fixed-route services and must assure system-wide accessibility of their demand-responsive services to persons with disabilities. Public transit providers also must supplement their fixed-route services with Paratransit services for those persons unable to use fixed-route service because of their disability.

Dial-A-Ride

Town-specific and geographically limited transportation in specially-equipped vans for elderly persons (60 years of age or older) and persons with disabilities who are not able to access public transportation.

Fixed route

Transit services where vehicles run on regular, pre-designated, pre-scheduled routes, with no deviation. Typically, fixed-route service is characterized by printed schedules or timetables, designated bus stops where passengers board and alight and the use of larger transit vehicles.

Paratransit

Types of passenger transportation that are more flexible than conventional fixed-route transit but more structured than the use of private automobiles. Paratransit includes demand-response transportation services, subscription bus services, shared-ride taxis, car pooling and vanpooling, jitney services and so on. Most often refers to wheelchair-accessible, demand-response van service.

Section 5307

The section of the Federal Transit Act that authorizes grants to public transit systems in all urban areas. Funds authorized through Section 5307 are awarded to states to provide capital and operating assistance to transit systems in urban areas with populations between 50,000 and 200,000. Transit systems in urban areas with populations greater than 200,000 receive their funds directly from FTA.

Section 5309

This section of the Federal Transit Act authorizes discretionary grants to public transit agencies for capital projects such as buses, bus facilities and rail projects.

Section 5310

The section of the Federal Transit Act that authorizes capital assistance to states for transportation programs that serve the elderly and people with disabilities. States distribute Section 5310 funds to local operators in both rural and urban settings, who are either nonprofit organizations or the lead agencies in coordinated transportation programs.

Section 5311

This section of the Federal Transit Act authorizes capital and operating assistance grants to public transit systems in areas with populations of less than 50,000.

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For additional information, or to receive copies of individual reports from each of the Transportation Forums, please contact Jayne Kleinman or Jessica Jagger at the University of Connecticut Center on Disabilities at 1-860-679-1500.