MICHIGAN DEPARTMENT OF TRANSPORTATION

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James P. Pitz, Director

URBAN AND PUBLIC TRANSPORTATION

Philip F. Kazmierski, Deputy Director



FINAL REPORT

SENIOR AND HANDICAPPER ASSESSMENT PROJECT

prepared by

MICHIGAN CONSULTANTS

MICHIGAN STATE TRANSPORTATION COMMISSION

William C. Marshall, Chairperson Rodger D. Young, Vice Chairman Hannes Meyers, Jr. Stephen F. Adamini Shirley E. Zeller Nansi Irene Rowe

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<u>PREFACE</u>

This assessment of the transportation needs of seniors and handicappers was prepared by Michigan Consultants, 426 W. Ottawa Street, Lansing, Michigan. The firm was assisted in the area of survey data computerization and analysis by S. W. Chan Associates, of Lansing, Michigan.

The consulting project was performed under contract with the Bureau of Urban and Public Transportation (UPTRAN), Michigan Department of Transportation (MDOT).

All findings and recommendations are those of the consultant, and are not necessarily endorsed or supported by the Michigan Department of Transportation.

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CHAPTER ONE

PROJECT OVERVIEW

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<u>CHAPTER I</u>

PROJECT OVERVIEW

INTRODUCTION

It is indisputable that seniors and handicappers face significant mobility challenges in daily life. The automobile is the dominant source of transportation in this nation, but many seniors and handicappers either cannot drive or do not have an automobile available on a daily basis.

The manner in which state aided transportation programs assist senior and handicapped citizens in meeting the challenges has been a prominent UPTRAN concern for over a decade. In the interest of expanding its understanding of the changing needs and demands for specialized transportation, the Department commissioned this study.

FORMAT OF THIS REPORT

This first chapter summarizes the purpose of the project, lists the primary information sources, provides a list of the key findings, and offers recommendations.

The second chapter discusses in greater detail the central data gathering effort of the project -- a survey of local opinion leaders in the senior and handicapper transportation field in Michigan. The actual computer print-outs and bar charts for the data, which total over five hundred pages in length, have been provided separately. The third chapter identifies three transit programs in Michigan which merit special recognition for their efforts regarding transit for seniors and handicappers.

Chapter four lists the documents studied in the detailed review of five documents UPTRAN required as part of this project. The written review has previously been submitted.

Chapter five reviews the Specialized Services proposals, submitted during the annual application process, with regards to present services in those areas and summarizes these findings.

INFORMATION SOURCES

The information gathered in the study came from several sources, including:

- 1. A survey of local and regional opinion leaders.
- 2. A review of the information provided in the Specialized Services applications.

- 3. A review of UPTRAN operating data on local programs.
- 4. A review of a variety of previously published documents, including five documents specifically identified by UPTRAN, and other documents identified by the consultant.

Each of the information sources is briefly introduced below.

Item 1 — Opinion Leader Survey

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The major activity of the project was a survey of local and regional opinion leaders. The concept was to expand the traditional approach of assessment (census data and service provider statistics). This new component includes, in an organized fashion, the views of individuals in Michigan who are involved in the field and have a special appreciation for the importance of viable transportation services. Such a survey had not previously been undertaken.

The survey concentrated on the portion of the state outside of the Wayne-Oakland-Macomb area; that area of the state is presently undergoing a very extensive needs analysis.

The results of the opinion leader survey are discussed in detail in Chapter II of this report.

Item 2 — Review Of Specialized Services Program Applications

Significant information was obtained from a review of the Specialized Services applications submitted to UPTRAN during the first two program cycles. This information provided useful data regarding present services. The thoroughness of the information varied greatly between applicants.

Item 3 - MDOT Public Transit Operating Data

UPTRAN operating data was reviewed to obtain a sound understanding of the number of rides provided to various market segments at present, and the distribution of funds.

Item 4 — Previously Published Documents

A variety of documents have previously been developed which address in some manner the general issue of an assessment of the transportation "needs" of seniors and handicappers. Five specific documents were identified by UPTRAN, and the consultant used computer search techniques to identify others. This material aided in assuring a solid base for the recommendations provided in this report.

KEY DATA AND INFORMATION

In this segment, abbreviated lists are provided of what are believed to be the most pertinent data identified as a result of this project.

Items From Opinion Leader Survey

To fully appreciate the value, and the limitations, of the survey data, it is important to read Chapter II of this report. It is particularly important to appreciate that the survey was composed of five different groups of respondents. The results within each group are actually more interesting, and perhaps more valid, than the totals for all respondents. A sample of some of the most interesting findings of the survey includes:

- * The top priority for service improvement, as compared to other alternatives, was expanded demand-response service; the second priority was expanded use of volunteer drivers.
- * When items were rated on their own importance, expanded service area stood out as a top concern, along with more dial-a-ride and expanded inter-county service.
- No interest was shown in expanded line-haul services.
- * Handicappers exhibited a much stronger interest in services which relate directly to employment, than other groups in the survey.
- Fares are not shown as a major concern, the average price suggested by respondents was \$.91 per ride. The representatives of senior and handicapper groups suggested higher average prices than other respondents.
- * The most severe impediment for ambulatory seniors and handicappers, was getting up or down stairs, getting in and out of the seat, and no bus in area of trip origination.
- * Representatives of handicapper concerns exhibit a much poorer view of transit services for handicappers than other respondents.
- * The most important operational impediment was lack of knowledge.
- * Transit authorities were strongly viewed as the preferred entity to receive increased state transit funds.

Items From Past Senior and Handicapper Studies

A wide variety of reports and data compilations were reviewed. A sampling of the statistics which stood out are listed below.

- In Michigan, census data compiled by UPTRAN estimates that there are 1,244,674 individuals who are either age 62 or above, or are younger and are classified as handicapped. Summed together, without double counting, the total represents approximately 13.4% of the state population.
- * Wayne county represents approximately 28% of the above total, adding Macomb and Oakland counties provides a tri-county total of over 44%. Inclusion of Kent and Genessee finds that these five counties represent over one-half of the state's senior and handicapper population.
- * A survey sponsored by the Michigan Office of Services to the Aging found that 13.6% of the respondents (age 60 and above) reported they did not have a car available.
- * Participants in the OSA study ranked transportation as the most important public program.

According to statistics from the National Health Interview Survey, over 17% of Americans age 18 or older report some form of physical limitation. 13.3% of Americans between the ages of 18 to 64 report a physical limitation. 2.1% of the population between ages 18 to 64 report that the limitation is severe enough to need assistance of other persons in "activities of daily living" or assistance in "instrumental activities of daily living".

Items From Program Operation Statistics

- * When all MDOT funded state operating assistance for public transit is considered, UPTRAN calculates that over 70% flows to the tri-county region of southeastern Michigan.
- * The Specialized Services program represents only a small amount of the MDOT funds which provide transportation services to seniors and handicappers.
- * Michigan has approximately 2,287 public transit buses available for operation by local public transit programs. Approximately two-thirds of these are operated by the 13 "urbanized" systems.
- In 1988, UPTRAN calculates that a total of 91,208,000 public transit rides were provided, with 24% of the riders being either seniors or handicappers or both.

PRIMARY FINDINGS

The discussions in the following chapters detail the findings from each of the information gathering efforts. Here, the findings items which the consultant views as being the most important and the most relevant to policy makers are listed.

In general, the findings are not considered surprising. Yet, they do emphasize a need for policy makers to ask themselves if appropriate goals and objectives for senior and handicapper transportation now exist, and whether the proper long-term programs are receiving priority.

Finding #1:

The State Has Developed An Extensive And Well Received Network Of "Door-to-Door" Services.

Services exist in both urban and rural areas. Over 500 small buses are operating. More applicants exist for the Specialized Services program than can be funded. Where services operate, the survey strongly suggests that the overall reliability is not seen as a major barrier to usage. The passenger fare is not perceived as a major problem. Perhaps an even better indicator of concept approval is the 47 communities which have passed millages to help with financing the transit services.

Finding #2:

The Need Clearly Exists For Expanded Dial-a-Ride Types Of Service.

The major problem seen with the current network is that it simply is not extensive enough. Almost one-third of the seniors in a survey conducted by the Office of Services to the Aging stated that a transportation program for seniors did not exist in their area. As noted, more applicants exist for the Specialized Services program than can be funded. It appears particularly limited in the Wayne-Oakland-Macomb metropolitan area -- where over 44% of the seniors and handicappers in the state reside.

Finding #3:

For handicappers, the issue of daily work travel is dominant.

This is not a surprising statement, yet when the general emphasis of state and local programs is reviewed, the priority of work travel is not apparent. Throughout the opinion leader survey those involved in some manner of service provision and the spokespeople for senior groups emphasized expanded service area and week-end service concerns, while handicapper representatives placed a comparatively higher priority on greater service within present service areas. For example, where "expanded week day hours" was the top priority on a comparative basis for the handicapper groups, it was the seventh priority for the entire group of survey respondents.

Finding #4:

MDOT has not developed clear goals and numerical objectives for service availability for seniors and handicappers.

MDOT has played a key role in seeing the growth in Michigan of one of the largest demand-responsive efforts in the nation. State legislation, along with federal legislation and rules, make several direct references to the importance of seniors and handicappers. Nevertheless, clear service goals do not exist. Development of such goals is necessary to tie together the various programs, rules, and budget allocations.

Finding #5:

The Long-Term Distribution Of Funds Does Not Mesh With The Perceived Needs Or Desires Of The Seniors And Handicappers.

This study reviewed only the seniors' and handicappers' situation, and therefore cannot draw specific conclusions regarding the importance of bus service to other groups. Yet, it is clear that demand-response is the type of service which the groups focused upon desire.

This situation is of particular fascination to the consultant, who also participated in various organization consulting issues for the Specialized Services program.

Finding #6:

The Amount Of Local Planning And Needs Assessment For The Specialized Services Program, With Regard To Seniors And Handicappers, Appears To Exceed That Performed For The Traditional Line Haul Based Systems.

The review of the Specialized Services applications found widely varying detail. Yet, on average, the detail appears to surpass that provided in the operating plans for the largest urban areas, specifically the Detroit area. The urban areas receive a much larger portion of state financial assistance, but they also serve a much larger proportion of the senior and handicapper population.

The review of UPTRAN programs, coupled with the geographic breakdown of the opinion leader survey, and other studies, finds that rural services for seniors and handicappers may actually be superior in mid-sized cities and many rural areas than in the most populated cities.

Finding **#7**:

<u>There Exists A Definite Need For Transportation To Medical Services</u> (Often In Other Counties), Which Is Not Being Adequately Addressed At This Juncture.

The senior and handicapper population is growing in Michigan. Inter-related with this phenomenon are the advances in high technology medicine. Unfortunately, not all hospitals possess the equipment required to provide the needed treatment. Indeed, many smaller hospitals are closing. This creates a situation for many where trips must be taken on an ongoing basis to hospitals, which, in many cases are in other counties. Furthermore, the medical condition, or general mental awareness, of the individuals makes the use of an escort vital regardless of the type of transit vehicle and schedule.

The transportation laws and programs of the state do not easily accommodate this need. It is not totally clear whether the responsibility for the service rests in MDOT, or with DSS.

It is definitely possible that the most appropriate service form for this medical transportation need is to subsidize volunteer drivers. DSS has a program which allows such funding for ADC clients. This addresses only part of the group needing medical transportation. The senior representatives in the opinion survey ranked expansion of volunteer transportation as their top priority.

RECOMMENDATIONS

As a needs analysis, with an opinion leader survey being the key component, a large number of program oriented recommendations do not stem directly from the analysis. Several themes do emerge, however, which merit identification.

It is understood that given the existing structure of local authority with regard to state transportation revenues, and that other state departments are also involved in transportation, the recommendations are not necessarily within the power of MDOT to directly implement.

RECOMMENDATION #1:

MDOT SHOULD ESTABLISH CLEAR SERVICE GOALS AND NUMERICAL OBJECTIVES FOR SENIORS AND HANDICAPPERS.

Opinions leaders, while sharing certain disagreements, speak with one voice regarding the importance of transportation. The state, through MDOT and the local transit agencies, allocates significant sums to the provision of service. Several programs are operated by MDOT, plus many human service providers have their own programs.

A central set of goals and objectives do not exist. Their establishment would serve to greatly assist program development and evaluation, and serve as a unifying source for all programs.

They should be specific enough to be able to serve as focal points for evaluation efforts.

RECOMMENDATION #2:

FUTURE TRANSIT BUDGET PRIORITIES AT THE LOCAL AND STATE LEVEL SHOULD REFLECT THE INCREASING DESIRE AND NEED FOR DEMAND-RESPONSIVE SERVICES.

This recommendation follows directly from the survey findings, the review of Specialized Service program applications, and the review of other studies. Certainly line-haul buses have a key role in urban transit services, yet the time may have passed where they should overwhelmingly dominate program expenditures.

RECOMMENDATION #3:

AN EQUIVALENT, OR GREATER, AMOUNT OF ATTENTION SHOULD BE PLACED ON THE TRADITIONAL FUNDING AND SERVICES OF LARGE URBAN AREA TRANSIT SYSTEM, AS COMPARED TO THE SPECIALIZED SERVICES PROGRAM.

Budget allocations, and population distributions, clearly exhibit that the key to providing better services to the seniors and handicappers groups rests with the regular program operating dollars allocated by the state. This is where the large scale dollars are, the geographic areas these funds flow to are where a majority of the people live. Yet, it appears to the consultant that more attention is being given to the Specialized Services program from state and local senior and handicapper opinion leaders than to the primary transit funding source.

The Specialized Services program plays a valuable role, but it would be a mistake for this relatively modest program to receive greatly disproportionate attention.

RECOMMENDATION #4:

THE MANNER IN WHICH TRANSIT SERVICES IN AN AREA MEET THE EMPLOYMENT NEEDS OF HANDICAPPERS SHOULD BE A MANDATORY COMPONENT OF ALL LOCAL PLANS AND GRANT APPLICATIONS.

MDOT publishes rules for each program. These rules must take into more specific account the employment issue. To the extent possible, local programs receiving state dollars should be held accountable for the manner in which they address the employment issue.

RECOMMENDATION #5:

SEVERAL RECOMMENDATIONS WERE MADE BY THE CONSULTANT IN A PROGRAM CONSULTING REPORT REGARDING THE SPECIALIZED SERVICES PROGRAM. MDOT SHOULD FINALIZE CONSIDERATION OF INSTITUTING THOSE RECOMMENDATIONS FOR THE SPECIALIZED SERVICES PROGRAM, AND EXPAND THE BASIC CONCEPTS TO OTHER PROGRAMS.

The recommendations in that report are supported by the findings of this assessment project. The concepts are included in the first four recommendations provided above. The items from the Specialized Services report which merit repeating here include:

- * A formal written policy and strategy should be developed for addressing the needs of seniors and handicappers, with the Specialized Services program being but one component.
- * A formal program evaluation system should be implemented.
- * Goals and objectives should be established for senior and handicapper mobility.
- A portion of the Specialized Services funds (such as \$100,000) should be set aside annually for innovative program tests; inter-county services to medical centers, perhaps utilizing the concept of reimbursing volunteer drivers in personal cars, are likely candidates for use of this money. Any volunteer based effort should be coordinated closely with DSS.

CHAPTER TWO

OPINION LEADER SURVEY ANALYSIS

CHAPTER II

OPINION LEADER SURVEY ANALYSIS

SURVEY CONCEPTS

An opinion leader survey was conducted of key individuals in Michigan. Previous state surveys had obtained information from transit providers, and to a limited extent from active and potential transit users, but a cross-section of opinion leaders had not, to our knowledge, previously been obtained. Given that activists in the area often are not service providers, and their assessment of the needs can vary significantly from those of providers, this survey is seen as a very useful endeavor in attempting to better understand needs. The results are extremely interesting.

Those receiving the survey were identified by UPTRAN, with the assistance of the Specialized Services' Ad Hoc Committee members. A guiding concept was to obtain a wide representation of viewpoints.

The list, however, was not intended to be, or is represented to be, exhaustive in nature. Without question, there exist other individuals and groups who have valuable comments to make. Yet overall, given budget constraints, the mailing list was seen to represent a useful and fair cross-section of opinion leaders in the senior and handicapper transportation field.

The data tables provided on the following pages represent the 82 responses received by the consultant before the deadline of August 12, 1989.

The data gathered was placed into a computer, thereby allowing detailed breakdowns of responses by the type of respondent and by region of the state. This was an essential task, for by analyzing the information within various groupings, concerns regarding the balance of the total survey are alleviated.

An additional number of survey responses were received after the deadline. Their answers could not be formally included in the computerized tables if the project was to be completed within this fiscal year. The consultants have, however, compared the late responses to the tables; the trends shown in the charts would not be modified if the late responses were included.

The responses to the narrative questions are discussed in the later portion of this Chapter, and have been included in our considerations.

The on-time returns represent a response rate of far better than 50%. This was seen as very acceptable for a survey of this nature. This is particularly true when deficiencies in the mailing list (not within the control of the consultant) are considered. In addition, given the objective of obtaining information from committed opinion leaders, reluctant responses to such a survey are not necessarily desirable.

MAJOR GROUPS

The survey included the following groups:

- A. Public transit operators who did not participate in the Specialized Services program.
- B. Centers For Independent Living.
- C. Area Agencies on Aging.
- D. Selected Departments of Social Services.
- E. Local Advisory Committees.

Further information concerning each group is now provided.

A. <u>Public Transit Managers Who Did Not Participate In The Specialized</u> Services Program.

A limited number of counties did not have applications submitted for the Specialized Services program. The reasons likely related to one of two extremes: if a county had a comprehensive program, which utilized more attractive UPTRAN funding opportunities, the program would likely not be necessary; the second type would be a county with a very limited present effort, which did not have the time, public interest, or potential matching funds, to apply.

In that these areas would not be represented in the information gathered by Specialized Services application system, UPTRAN requested that transit managers in these areas be asked to participate in the opinion survey. A list of those counties the survey was mailed to is provided at the conclusion of the Chapter. In the tables which are provided in this report, the group is abbreviated to "SPT", for Select Public Transit managers. The term "select" is important. Again, not all public transit officials were included in the survey.

The responses from this group is definitely useful, but two very important qualifications must be noted. The first is that this group does not necessarily represent all public transit operators. For example, by the very nature of the group, the largest counties are not represented. Secondly, the managers who actually did respond may tend to represent areas where services are above average, with the type of committed management who have the time (or make the time) to answer a voluntary survey. Such a group may tend to produce lower assessments of the degree of a problem, and a higher assessment of the quality of a present service, than those who did not respond.

It should also be noted that the group represented a relatively small component of the total number of respondents.

B. <u>Centers For Independent Living.</u>

Centers for Independent Living operate at eleven sites in Michigan, concentrating on the needs of handicappers. The mailing list, provided by the Michigan Commission on Handicapper Concerns, is included at the conclusion of this Chapter.

It merits note that not all areas of the state are represented by CILs. There may tend to be an urban bias in the answers.

C. <u>Area Agencies On Aging.</u>

The network of AAAs covers the entire state. The directors of the agencies have been involved with the issue of transportation and seniors for many years.

The mailing list was supplied by the State Office on Aging.

D. County Offices Of The Michigan Department Of Social Services.

DSS offices are frequently involved with the transportation problems faced by their clients. A sample of 15 offices were selected to receive the survey.

E. Local Advisory Committees.

Each transit agency is required to have a functioning local advisory committee. In that the group has never previously been surveyed, UPTRAN experienced some difficulty in assembling a mailing list. It is not possible to determine if the individual was influenced by the transit manager when completing the survey. The LACs for the SEMTA-SMART region were not included, that region is presently the subject of a very intensive needs analysis.

The Chart on the following page exhibits the percentages of the entire response group represented by each of the sub-groups. As noted previously, even though the overall group (generally termed the "entire" group) is weighted towards the PTs and the LACs, computerization of the data allows the individuals responses of each of the groups to be separately reviewed and considered.

REGIONAL DIVISIONS

The survey was designed to address input from throughout Michigan, with the exception of the SMART area in southeastern Michigan---Wayne, Oakland, and Macomb counties. These three counties are presently the focus of a very extensive, separate, needs analysis.

For analytic reasons, responses were divided between three Michigan regions, "UPPER", "MIDDLE", and "LOWER". The map and histograms on the following pages note the divisions. Some respondents served programs or agencies in more than one region. This leads to a higher sum for the total regional count than the number of actual individual respondents.



Respondent Distribution By Geographical Regions

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SURVEY FORM

A copy of the survey is included at the conclusion of the Chapter.

Survey questions fell into three categories:

Questions requiring a short narrative answer.

Questions which require a rating of a need or problem.

Questions which require a comparative ranking of problems or needs versus each other.

The consultants were extremely pleased by the diversity of ratings of problems shown within the individual survey responses.

A normal concern when using an instrument of this nature is that an advocate might choose to simply declare that almost everything is a major problem, and refuse to make comparative judgements. This potential problem <u>did not</u> occur. Clearly, respondents considered each item individually, and were not reluctant to note when an item simply was not a major concern.

SURVEY RESULTS

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All data results are provided in the separate statistical document. This document, which provides regional and sub-group breakouts of all data questions, and bar-charts of frequencies, totals over 500 pages. The reader who desires to explore the survey results more deeply may wish to review that document.

In this section, we analyze only the most important findings, particularly those which relate to UPTRAN policy considerations.

As noted previously, it is important to review results within each group, not simply the average response of all respondents. This is necessary to alleviate concerns regarding the weighting of the groups.

Viewpoints Towards Public Transit Services

Question 13 of the survey asked respondents to provide their rating of public transit for various types of users. The results are provided in Table A, on the following page.

Overall, "good" ratings were generally given, with only taxi service being given a clearly low rating by the entire group.

The most extreme differential was in the service for handicapper category, where the ratings from the select public transit group and the Local Advisory Council group varied widely from the those of the Centers for Independent Living group. Clearly, these representatives of handicappers hold a much lower viewpoint of the manner in which public transit serves the needs of handicappers, than the manner in which others view the situation.

It is important to note that the "SPT" and "LAC" groups may be skewed to areas where good services do, indeed, exist.

TABLE A

VIEWPOINTS TOWARDS PUBLIC TRANSIT SERVICES

SURVEY QUESTION 13 (Coded as D1.1 through D1.4)

"Please Circle The Ranking That Best Represents Your View Of These Public Transit Services."

Ranked from Poor (1) to Excellent (5)

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ITEM	<u>ENTIRE</u>	<u>SPT</u>	<u>CIL</u>	<u>AAA</u>	<u>DSS</u>	LAC
For The Average Citizen	3.2	3.6	3.2	3.1	2.8	3.1
For Seniors	3.1	3.9	2.4	2.2	2.7	3.3
For Handicappers	3.1	4.2*	1.8*	2.5	2.6	3.2
Taxi service	2.3	1.9	3.2	2.3	1.7	2.4
Services Compared To Three Years Ago

The survey asked respondents to rank present public transit services for seniors and handicappers against services three years prior.

Essentially across the board, services were seen as improved, somewhat improved, or much improved. Not a single respondent ranked services much worse, and only approximately 12% ranked services "somewhat worse".

The LAC respondents were noteworthy in having an extremely positive reaction. Over one-third ranked services as "much improved".

The results may be slightly skewed by the possibility that those actively involved with a service, even in an advisory capacity, may tend to believe their involvement has improved the situation. In addition, by the nature of the mailing lists and the emphasis of the project, very few respondents came from the tri-county area of southeastern Michigan.

Barriers For Ambulatory Seniors And Handicappers

The consultants believe that there is occasionally a tendency in the transportation field to categorize the issue of those with physical impairments as the "wheelchair lift" issue. Certainly, for a vehicle to serve a wheelchair user, a lift is an absolute necessity. Yet, seniors and handicappers with other impairments also face significant barriers to transit use.

Therefore, the survey included a special question where respondents were asked to reply based on the needs of ambulatory seniors and handicappers.

The responses are summarized in Table B on the following page.

The items can be categorized into three groupings:

- ** existence of the service to meet the needs (destination desired, origination desired).
- ** barriers relating to physical aspects of bus usage (steps, seat, getting to the stop).
- ** quality factors if the service is used (comfort, reliability, etc.).



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TABLE B

BARRIERS FACING AMBULATORY SENIORS AND HANDICAPPERS

SURVEY QUESTION 15 (Coded as D3.1 through D3.11)

"We Would Like Your Opinion Concerning The Relative Importance of Various Physical and Operating Barriers Faced By Ambulatory Seniors and Handicappers."

ITEM	ENTIRE	<u>SPT</u>	<u>CIL</u>	<u>AAA</u>	<u>DSS</u>	<u>LAC</u>
Getting to & from bus stop	3.1	2.6	3.0	4.2*	2.4	2.9
Waiting for bus	2.6	1.9	3.4	3.8	2.5	2.2
Seeing name or route number	2.3	1.6	2.6	3.3	2.0	2.1
Getting up or down steps	3.3*	2.8*	4.0	4.0	3.2	3.2
Getting in & out of seat	3.3*	1.7	2.6	2.9	2.3	2.3
Discomfort	2.1	1.5	2.8	2.7	2.2	2.0
No bus in area of trip orig	3.3*	2.2	4.2*	3.9	3.7*	3.3
Route does not serve destina.	3.2	1.8	3.8	3.5	3.6	3.3*
Unreliable	2.1	1.6	2.2	2.8	2.0	1.9
Qualify	1.7	1.0	1.8	2.3	1.4	1.7
Too Crowded	1.5	1.2	1.8	2.1	1.4	1.5

Ranked from Minor Barrier (1) to Major Barrier (5)

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The items with the highest problem ratings were "getting in and out of seat", and "getting up or down steps". These are significant factors for UPTRAN to consider in future bus purchases. The existence of a wheelchair lift alone simply does not address all physical barriers of bus use.

"Getting to and from the bus stop" also had a relatively high ranking. Which emphasizes the value of demand-response service. Interestingly, this item had a 4.2 ranking from the Area Agencies on Aging, the single highest ranking of any of the items for any of the sub-groups.

Availability of service items also ranked high. Both "no bus in area of trip origination", and "route does not serve destination" were high scorers for the total respondents. They also both received particularly high scores from the Centers for Independent Living Group.

Interestingly, quality of operation factors received scores suggesting that they are relatively minor barriers for the ambulatory group. Items such as reliability, overcrowding, and need to qualify, all received scores which suggest they are not seen as important barriers.

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Even though the caution always exists that the data should not be over-interpreted, it appears that where the service exists, and serves the origination and destination needs, and is physically accessible, the service provided is seen as doing a good job regarding operations.

A follow-up part of the same question referred to three aspects of demand-response service. The aspects were "scheduling", "hours or operation", and "advance reservation required". Hours of operation had the highest barrier ranking, consistent with the findings of the previous part of the question.

Table C provides that data.

Relative Importance Of Service Improvements

A key endeavor for the survey was to encourage participants to make relative comparisons of various options. This was seen as critical to moving the effort from the realm of simply identifying problems, to actually being a tool to develop recommendations.

Eleven possible items were listed. In order to evaluate the answers in a direct manner, a scoring system was developed. When a respondent named the item as the most desirable option, it received three points, the second most desirable received two points, the third one point. Scores were then summed for the entire group, and for each sub-group.

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TABLE C

BARRIERS FACING AMBULATORY S & H continued

-ITEMS RESTRICTED TO DEMAND RESPONSE SERVICE-

Continuation of Survey Question 15, previously described in Table B, With Respondents Asked To Restrict Their Viewpoints For The Following Items To Demand Response Service Only.

ITEM	ENTIRE	<u>SPT</u>	CIL	<u>AAA</u>	<u>DSS</u>	LAC
Scheduling	2.7	1.9	3.4	3.5	3.4*	2.4
Hours of Oper.	3.1*	2.3*	4.0*	4.1*	3.2	2.8*
Advance Reserva. Required	2.4	1.6	3.2	3.2	2.8	2.2

Table D provides the results in terms of relative rankings. The places, from first to eleventh, are provided for the entire survey group. The top three for each sub-group.

The top ranked item, when the entire group was summed, was "more demand-response service". This is even more noteworthy when "more line haul" was seen as the last placed item. UPTRAN may desire to pay particular attention to this response when considering future budget outlays.

A close second for the entire group was "expansion of volunteer services". This item is particularly interesting when the sub-groups are reviewed. It was the top ranked item for the AAAs and the LACs, while being near the bottom for the each of the other three groups.

The choice of "expanded week-day hours" by the CILs might be interpreted as suggesting that they place very high importance on transportation to employment opportunities.

Another noteworthy item, for all groups, was the low relative ranking for lower fares. This issue is discussed further in the responses to other concerns.

TABLE D

RELATIVE IMPORTANCE OF SERVICE IMPROVEMENTS

SURVEY QUESTION 16 (Coded as D5.1 through D5.11)

"After Reviewing The List Below of Various Types of Service Improvements, Please Provide The Number 1 Next To the Item Which You View As The First Priority, The Number 2 Next To The Second Priority, and the Number 3 Next To Item Of Third Priority. It Is Understood That Even Though An Item May Not Be In Your Top Three, You May Still View It As A Useful Improvement."

ITEM	<u>ENTIRE</u>	<u>SPT</u>	<u>CIL</u>	<u>AAA</u>	<u>DSS</u>	<u>LAC</u>
Lower Fares	8					
More Line Haul	11					
More Dem-Response	1*			3	1*	1*
Expanded week- day hours	7		1*		1*	
Expanded week- end hours	6	1*	2			-
Expanded service area	5		3			
More lift equip	, 8				1*	
Improved reliab.	10					
Escorts	4	2	3			3
Inter-county	3	2		2		
Volunteer expan.	2			1*		1*

Individual Ranking Of Service Improvements

As a follow-up to the relative ranking of items, the survey then asked each of the key items to be rated, with regards to services improvements, on a scale from not very important to very important. This method is used to enhance the findings of a question which asks for relative rankings.

Table E, on the following page, provides the findings.

The top ranking item for the entire group of respondents was "more service to outlying areas". It had the highest ranking of any item for the public transit, DSS, and LAC groups, and also scored as being of significant importance to the CIL and AAA groups.

The item, when worded "expanded service area" did not receive nearly as high a relative ranking when the previous question (data supplied in Table D) directly compared the potential improvement to other options. This may be attributed to the slightly differing wording. This may also be attributed to the possibility that even though it is a need that everyone recognizes, it does not rank on a relative basis -- when a choice had to be made -- as directly as important as other items.

The concern with volunteers again exhibited a wide differential between groups. AAAs provided an average score of 4.6, the SPT group 1.9. This is somewhat of an extraordinary differential for a survey question of this nature.

TABLE E

INDIVIDUAL RANKING OF SERVICE IMPROVEMENTS

SURVEY QUESTION 17 (Coded as Items D6.1 through D6.11)

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"For Each Of The Types Of Service Improvements, Please Rank Each On A Scale of 5 (Very Important) To 1 (Not Important)."

ITEM	<u>ENTIRE</u>	<u>SPT</u>	<u>CIL</u>	<u>AAA</u>	<u>DSS</u>	<u>LAC</u>
Lower fares	2.5	1.9	2.4	2.5	2.9	2.5
More line haul	2.6	1.7	3.2	2.4	3.1	2.8
More dial-a-ride	3.5	3.2	4.6*	4.1	3.5	3.3
More week day	3.1	2.5	4.6*	3.3	3.4	3.0
More week end	3.2	2.9	4.6*	3.3	3.5	3.0
More services to outlying areas	3.9*	3.5*	3.8	4.2	4.1*	3.9*
More lift-equipped	2.8	1.8	3.6	3.3	3.0	2.9
Improved reliab	2.8	2.6	4.0	2.8	3.1	2.6
Escorts	3.1	2.8	3.2	3.8	2.6	3.1
Inter-county	3.5	3.1	4.0	4.2	3.4	3.4
More volunteers	3.2	1.9	2.6	4.6*	3.1	3.2
AVERAGE	3.1	2.5	3.7	3.5	3.2	3.1

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We again feel it wise to note that caution must be used to draw conclusions regarding the "entire" group of respondents. It is interesting to consider, though, that the average score of 3.1 for all items suggests the value that is placed on the issues as a whole.

The SPT group exhibited a significantly lower average score than the other groups. Again, while this may be due to a completely different view of the issues, it may also be attributed to the fact that respondents in the sub-group may come from areas with public transit services which are more comprehensive than the average community in the state.

Lower fares again had the lowest individual score. It is fairly clear that opinion leaders believe that while the issue of lower fares is not necessarily unimportant, it is far less important than the availability of service.

Operational Impediments

The survey included a question which dealt solely with operational impediments. Overall, the operational aspects named in the survey were not seen as major impediments.

The results are provided in Table F.

The item with the highest score, was "lack of knowledge". It received the highest single score within any of the groups, a 4.4 from the CIL.

Fares were not seen as an impediment. This reaffirms the information from the previous questions. It perhaps is even more interesting for this set of responses, because of the nature of the wording of the question.

TABLE F

OPERATIONAL IMPEDIMENTS

SURVEY QUESTION 18 (Coded as D7.1 through D7.6)

"Various Impediments Exist To The Use Of Public Transit Service Which Are Distinct From The Vehicles, The Type Of Service, And The Availability Of Service. Please Provide Your Rankings Of The Following Items."

Ranked from Not an Impediment (1) to Major Impediment (5)

ITEM	<u>ENTIRE</u>	<u>SPT</u>	<u>CIL</u>	AAA	DSS	<u>LAC</u>
Fares	2.4	1.8	2.7	2.9	2.6	2.3
Fear of Crime	2.2	1.3	2.2	3.6*	2.5	1.9
Lack of Knowledge	3.1*	2.8*	4.4*	3.0	2.7	3.2*
Pride/Embarrass.	2.4	2.5	2.6	2.4	2.4	2.3
Fear of becoming lost	2.1	1.4	2.8	2.3	1.9	2.3
Lack of braille or large print	2.3	1.3	2.6	2.7	3.0*	2.3

MDOT Technical Assistance

The consultants sought to determine if there were technical assistance services which UPTRAN could provide or expand which would be seen as useful by those answering the survey.

The results are provided in Table G.

Of the four items listed, on average all were scored as at least "useful", by the entire group.

The top item was "training for managers", followed very closely by "training for drivers". UPTRAN may desire to enhance their present efforts in these areas, and also consider the cost and value of training for dispatchers and a statewide conference on the subject of seniors and handicappers transportation.

TABLE G

MDOT TECHNICAL ASSISTANCE

SURVEY QUESTION 19 (Coded as D8.1 through D8.4)

"Separate From The Continuing Issue Of Additional Funding, MDOT Is Interested In Services Which Might Be Provided Which Can Improve The Efficiency Of Present Services. Please Provide Your Ranking Of Whether The Following Actions Would Be Helpful Or Not."

Ranked from not useful (1) to very useful (5)

ITEM	<u>ENTIRE</u>	<u>SPT</u>	<u>CIL</u>	<u>AAA</u>	DSS	<u>LAC</u>
Training for managers	3.7	3.8	4.0	3.6	3.6	3.6
Training for dispatching	3.3	3.2	3.4	3.5	3.4	3.3
Driver training	3.7	3.8	4.0	3.6	3.4	3.6
Conference	3.1	3.5	3.4	2.9	2.6	3.1

Proper Fare

The survey asked respondents to suggest what they thought was the proper fare for using a door-to-door transit service bus. The most common response was the range between 0.75 to 1.00. Not a single response suggested that the fare should be free. Less than 11% felt the charge should be above 1.00.

The mean for the entire group was \$0.91. Interestingly, the two sub-groups with the highest mean figures were the CILs and the AAAs. The SPT sub-group had the lowest mean figure, at \$0.72.

Use Of Additional State Funds

The survey desired to ascertain which types of entities should receive state dollars if more became available. A scoring system (3 points for the top score, then 2, then 1) was used to produce comparative rankings. Key sub-group results are provided in Table H.

Transit authorities received the highest score from the "entire" group. The category also received the highest score from four of the individual groups, the exception being AAAs.

The "private non-profit" category had the second highest score, and "volunteer drivers" third.

Neither "private for profit" nor "for profit taxi" placed in the top three for any group.

TABLE H

USE OF ADDITIONAL STATE FUNDS

SURVEY QUESTION 21 (Coded as Item D10.1 through 10.6)

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"If Additional State Funds Could Be Made Available, Targeted For Seniors And Handicappers, Which Type Of Operating Organization Would You Most Like To Be The Recipient (please place a "1" next to the first priority, and the number "2" next to the second, etc.)."

ITEM	<u>ENTIRE</u>	<u>P.T.</u>	CIL	AAA	DSS	LAC
Transit Authority	1*	1*	1*	3	1*	1*
Private for profit	5					
Private non-profit	2	2	2	1*	2	2
For profit taxi	6					
Volunteer drivers	3			2	3	3
Direct subsidies to individuals	4	3	3			

Ordinal Rankings

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Most Common Complaint

The survey included a request for a narrative answer concerning what is the most common complaint heard concerning transportation. The results are summarized, by county, below.

QUESTION: "What is the most common complaint expressed to your agency concerning transportation?"

RESPONSE

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Alcona:	-	Distances to services inside and outside of the County.
	-	Lack of public transportation.
Allegan:	-	Lack of cross-county and out-of-county transport.
Barry:	-	Lack of transportation for rural areas.
Benzie:	-	Scheduling conflicts.
Calhoun:	-	Existing transportation does not service the outlying areas of the County, or the City of Battle Creek.
Cass:	-	Lack of availability.
	-	Funds needed for long distance transportation for medical needs as well as local transportation for shopping.
Charlevoix:	-	No major concerns.

FINAL REPORT --- SENIOR AND HANDICAPPER ASSESSMENT PROJECT Responses to Question #12 (cont.):

Chippewa: - No weekend service for church, shopping, hospital, etc..

Clare: - Lack of locating transportation. County transit does not run to all areas every day.

- Length of time spent on bus is long.
- Response time too long.
- Clinton: -. Need for immediate, inexpensive, door-to- door transportation.
 - Transportation needed from Clinton to the City of Lansing.
 - Pre-scheduling requirements.

Eaton: - Inability to provide transportation exactly when requested.

- Transportation needed from Eaton to the City of Lansing.
- Need for immediate, inexpensive, door-to- door transportation.
- Pre-scheduling requirements.
- Genesee: Not enough demand response service.
 - Lack of transportation in out-county areas.
 - Unavailability and unreliability of demand response.
 - Weekend service needed.

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Responses to Question #12 (cont.):

Gladwin: - Lack of availability (passenger wanting a bus sooner than available).

- Gogebic: Buses too old, and not as comfortable as they could be.
 - Buses too cold in the winter and exhaust fumes in the buses.
- Hillsdale: Length of runs too long.
 - Lack of seat restraints for all handicapped individuals.
 - Not available in rural areas.
 - Lack of services on the weekend.
 - Insufficient service for out of region medical appointments.
- Ingham: Need for immediate, inexpensive, door-to- door transportation.
 - Transportation needed from Rural Ingham areas into the City of Lansing.
 - Pre-scheduling requirements.
- Ionia: The drivers are not being compensated while providing service to the clients with their own vehicles.
 - Total lack of getting transportation except via individual drivers.

Responses to Question #12 (cont.):

Iosco: - Weekend service needed.

Jackson: - Lack of availability.

Length of runs too long.

- Lack of seat restraints for all handicapped individuals.
- Not available in rural areas.
- Lack of service on weekend.
- Insufficient service for out-of-county medical appointments.

Kalamazoo: - Lack of promptness for pickups.

- Limited hours of delivery of service (i.e. want evening and weekend ride availability).
- Kalkaska: Seniors having to stay too long in town or waiting too long.

Out-County service area, not being able to obtain service at their demand.

FINAL REPORT --- SENIOR AND HANDICAPPER ASSESSMENT PROJECT Responses to Question #12 (cont.):

Kent: - Geographic boundaries for Line-haul and Go- Bus.

- The need to make appointments well in advance.
- The transportation sources often do not run past certain times.

- The least expensive resources have no way to assist those that need it (the only resources that can assist are \$35.00/trip.
- Bus never on time for pick-up.
- Not enough money to provide necessary transportation for all seniors who request it.
- Lake: Lack of public transportation.
 - People would like to have shopping and recreational transportation.
- Lapeer: Unavailability and unreliability of demand response.

Leelanau: - Not available evenings and weekends.

- Takes too long to get to destination (limited number of runs of public transit).
- Lenawee: Lack of transportation in rural areas.

- Lack of service on weekend.

- Insufficient service for out-of-county medical appointments.

Responses to Question #12 (cont.):

Manistee: - Lack of availability.

Marquette: - Delays in picking up passengers who "call back" from medical appointments when they are unable to make a specific return reservation.

Mason: - Lack of availability.

- As much as a 30 minute wait for demand response service.

- Scheduling.

Lack of county-wide transportation / out- county areas need to be served.

Mecosta:

- Need for out-of-county transportation. Cancer patients are unable to drive themselves to their treatment appointments. All radiation treatments are given outside of the county.
 - Scheduling.
 - Should deliver meals to homebound at a rate to not jeopardize the homebound seniors "meals-on-wheels" project.

Montcalm:

- Lack of funding for transportation program.

Responses to Question #12 (cont.):

Muskegon: -	Clients inabilit	y to afford decent	transportation.
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- Scheduling/time table.
- Not available to rural areas, and what is available is costly.

- Newaygo: Lack of public transportation.
 - Human service agencies do not have adequate financial resources to meet the level of need of activities of daily living.
- Oceana: Lack of public transportation.
 - Transportation that is available is costly.
 - Scheduling.

Ontonagon: - Need for Sunday service for church runs.

- Osceola: Should deliver meals to homebound at a rate not to jeopardize the homebound senior "meals-on-wheels" project.
- Ottawa: Lack of transportation in rural areas.
 - Transportation that is available is costly.
 - Limited range and operating times of public transportation.
 - Scheduling.

Responses to Question #12 (cont.):

Presque Isle: - No evening hours other than for the AFC homes.

- Roscommon: A need for evening hour transportation, extended weekend hours, and the possibility of a taxi service.
- Saginaw: Inadequate transportation especially in rural areas where it is non-existent.
 - Expanded service hours needed.
 - Cost/timeliness.

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- Sanilac: Detours on side roads to reach destination.
- Schoolcraft: Inability or unwillingness of public transit operators to physically assist handicapped persons.
 - Insufficient operating time. Expanded service hours needed.

Shiawassee: - Unavailability and unreliability of demand response.

• Lack of public transit service.

Responses to Question #12 (cont.):

Van Buren: - Availability inconsistent and	unreliable.
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- Out-of-county transportation is very limited.
- Funds need to be provided for long distance transportation for medical needs as well as local transportation for shopping.
- Not available when needed.
- Lack of accessible, low cost transportation services.

COPY OF SURVEY FORM

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A copy of the survey form is provided on the following pages.

OPINION LEADER SURVEY SENIOR AND HANDICAPPER TRANSPORTATION NEEDS

A. WE WOULD FIRST LIKE TO REQUEST INFORMATION CONCERNING THE RESPONDENT AND THE RESPONDING ORGANIZATION.

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1.	Your name:
2.	Position:
3.	Organization Represented:
4.	Address:
5.	Telephone: ()
6.	The Geographic Area This Response Applies To:
7.	Do you deal frequently with the issue of transportation?
	Yes or No:

8. Do you serve on any transportation advisory boards? If yes, please name: _____

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- 10. Does your organization subsidize transportation for any clients? Yes or No: If yes, please briefly describe (including a description of the source of funds used to subsidize transportation):

11. Does your organization directly operate any vehicles? If yes, please briefly describe the following:

Number of lift equipped vehicles: _____

Additional space is provided below to provide additional information in response to question #11.

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B. WE WOULD NOW LIKE TO OBTAIN YOUR VIEWPOINT ON VARIOUS TYPES OF TRANSPORTATION NEEDS AND PROBLEMS.

A

- 12. What is the most common complaint expressed to your agency concerning transportation?
- 13. Please circle the ranking that best represents your view of these transit services:

	Poor		Good	E	xcel- lent
Public transit service for average citizen	1	2	3	4	5
Public transit service for seniors	1	2	3	4	5
Public transit service for handicappers	1	2	3	4	5
Taxi service	1	2	3	4	5

14. Please place a mark next to the item which best describes your view of how public transit services, as they particularly related to seniors and handicappers, <u>compare</u> to the services of three years ago:

Much improved	
Somewhat improved	
improved	200 maintaine 100 000 mm
Somewhat worse	
Much worse	

15. It is understood that in order to properly serve the needs of wheelchair users, a transit service must take various design considerations into mind. In this question, however, we would like your opinion concerning the relative importance of various physical and operating barriers faced by <u>ambulatory</u> seniors and handicappers

		Minor Barrier		Barrie	er Ba	Major Barrier	
	Getting to and from bus stop.	1	2	3	4	5	
	Waiting for bus.	1	2	3	4	5	
×	Seeing the name or route number	1	2	3	4	5	
	Getting up or down steps	1	2	3	4	5	
	Getting in and out of of seat	1	2	3	4	5	
	Discomfort while riding	1	2	3	4	5	
	No bus in area of trip origination	1	2	3	4	5	
	Bus route does not serve desired destinations.	1	2	3	4	5	
	Unreliable	1	2	3	4	5	
	Qualify for service	1	2	3	4	5	
	Too crowded	1	2	3	4	5	
(T	HE FOLLOWING QUESTIONS ARI	E FOR	DEMAND	RESPONSE	SERVICE	ONLY)	
	Scheduling	1	2	3	4	5	
	Hours of operation	1	2	3	4	5	
	Advance reservation required	1	2	3	4	5	

C. IN THIS SECTION. WE DESIRE YOUR OPINIONS CONCERNING VARIOUS TYPES OF POTENTIAL SERVICE IMPROVEMENTS. AND THEIR POTENTIAL IMPACT ON SENIORS AND HANDICAPPERS.

16. After reviewing the list below of various types of service improvements, please provide the number 1 next to the item which you view as the first priority, the number 2 next to the second priority, and the number 3 next to item of third priority. It is understood that even though an item may not be in your top three, you may still view it as a useful improvement.

____ Lower fares

- ____ Additional line haul service
- ____ Additional demand response service
- ____ Expanded week day hours
- Expanded week end hours
- ____ Expanded service area
- ____ More lift equipped vehicles
- ____ Improved reliability
- ____ Provision of escorts
- ____ Inter-county service
- ____ Expansion of the use of volunteer drivers with personnal automobiles

17. For each of the types of service improvements, please rank each on a scale of 5 (very important) to 1 (not important)

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	Not Very Important		Important	Impo	Very ortant
Lower fares	1	2	3	4	5
Expanded line haul	1	2	3	4	5
Expanded dial-a-ride	1	2	3	4	5
Expanded week day hours	1	2	3	4	5
Expanded week end hours	1	2	3	4	5
Expanded services to outlying areas	1	2	3	4	5
More lift-equipped vehicles	1	2	3	4	5
Improved reliability	1	2	3	4	5
Provision of escorts	1	2	3	4	5
Inter-county service	1	2	3	4	5
Expanded use of volur teer drivers with personnal cars)- 1	2	3	4	5

Other, please describe: _____

18. Various impediments exist to the use of public transit service which are distinct from the vehicles, the type of service, and the availibility of service. Please provide your rankings of the following items.

	Not an Impedim	ent	Impe	Major Impediment	
Fares	1	2	3	4	5
Fear of crime while waiting for service or while using	1	2	3	4	5
Lack of knowledge of service	1	2	3	4	5
Pride/embarassment	1	2	3	4	5
Fear of becoming lost	1	2	3	4	5
Lack of braille or large print information	1	2	3	4	5

19. Separate from the continuing issue of additional funding, MDOT is interested in services which might be provided which can improve the efficiency of present services. Please provide your ranking of whether the following actions would be helpful or not

	Not Useful				Very Useful
Training for managers of small bus services	1	2	3	4	5
Training in central dispatching	1	2	3	4	5
Driver training	1	2	3	4	5
Statewide conference on S & H transit	1	2	3	4	5

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20. What do you feel the fare should be for a senior or handicapper using a door-to-door transit service bus in your area (assuming available)?

21. If additional state funds could be made available, targetted for seniors and handicappers, which type of operating organization would you most like to see be the recipient (please place a "1" next to the first priority, and the number "2" next to the second, etc.).

____Transit Authority ____Private For Profit Bus Company ____Private Non-Profit ____Private For Profit Taxi ____Volunteer Drivers ____Direct Subsidies to Individuals

22. Please provide any additional comments you desire concerning the transportation needs of seniors and handicappers.

NAMES OF THOSE SURVEYED

AREA AGENCIES ON AGING:

Paul Bridgewater, Director, Detroit Area Agency on Aging, 100 Michigan Building, 220 Bagley, Detroit, MI 48226

Nel Thompson, Director, Senior Alliance, Inc., 3850 Second St., Suite 160, Wayne, MI 48184

Joseph Ham, Director, Southcentral Michigan Commission on Aging, 8135 Cox's Dr., Suite 1C, Portage, MI 49002

Valaria Conerly, Director, Valley Area Agency on Aging, 708 Root St., Room 110, Flint, MI 48503

Mohammed Khan, Director, Region 7 Area Agency on Aging, 1200 N. Madison Ave., Bay City, MI 48708

Sue Schuler, Director, Northeast Michigan Community Service Agency, 2373 Gordon Rd., Alpena, MI 49707

Rosanne Richards, Director, Region 14 Council on Aging, 315 W. Webster, Muskegon, MI 49440

Ms. Sandra Reminga, Director, Area Agency on Aging, 29508 Southfield Rd., Suite 100, Southfield, MI 48076

Mary Marshall, Director, Region 2 Commission on Aging, P.O. Box 646, Adrian, MI 49221

Robert Dolsen, Director, Region 4 Area Agency on Aging, 2919 Division St., St. Joseph, MI 49085

NAMES OF THOSE SURVEYED Continued

Roxanna Peterson, Director, Tri-County Office on Aging, 500 W. Washtenaw, Lansing, MI 48933

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Lawrence Murray, Jr., Director, Area Agency on Aging of Western Michigan, Inc., Two Fountain Place, Suite 540, Grand Rapids, MI 49503

Kathryn Kumkoski, Director, Region 11 Area Agency on Aging, 118 N. 22nd St., Escanaba, MI 49820

Area Agency on Aging Association of Michigan, 115 W. Allegan, Suite 610, Lansing, MI 48933

CENTERS FOR INDEPENDENT LIVING:

James Magyar, Director, Ann Arbor Center for Independent Living, Inc., Georgetown Mall, 2568 Packard Rd., Ann Arbor, MI 48104

Donald Lozen, Director, Rehabilitation Institute Center for Independent Living, 4 East Alexandrine, Suite 104, Detroit, MI 48201

Gayle Miller, Director, Grand Rapids Center for Independent Living, Hope Rehabilitation Network, 3375 Division, S. Grand Rapids, MI 49508

Christopher Visscher, Director, ARC/OC, Lakeshore Center for Independent Living, 246 S. River, Office 5, Holland, MI 49423

Karen Duckworth, Director, Kalamazoo Center for Independent Living, 833 W. South St., Kalamazoo, MI 49007
|

NAMES OF THOSE SURVEYED Continued

Jean Golden, Director, Center for Handicapper Affairs, 918 Southland, Lansing, MI 48910

Rebecca Shuman, Director, ARC/Midland, 810 E. Ashman, Midland, MI 48640

Frank Bublitz, Director, Blue Water Center for Independent Living, 1723 Military, Port Huron, MI 48060

Nancy Jachim, Director, Center for Independent Living Serving Oakland/Macomb Counties, 6044 Rochester Rd., Troy, MI 48098

Tony Benavides, Director, Cristo Rey Hispanic Center for Independent Living, 1717 High St., Lansing, MI 48906

LOCAL BUS TRANSPORTATION SERVICE PROVIDERS:

Dickinson/Iron Counties, John Meade, Director, UPCAP/Area Agency on Aging, 118 N. 22nd St., Escanaba, MI 49829

Gogebic County, James Meade, Director, Gogebic County Public Transit, 100 E. Aurora, Ironwood, MI 49938

Ontonagon County, Vicki Perryman, Director, Ontonagon County Public Transit, 149 Airport Rd., Ontonagon, MI 49953

Grand Traverse County, Ron Crummel, Executive Director, Northwest Senior Resources, Inc., 1609 Park Dr., P.O. Box 2010, Traverse City, MI 49685

NAMES OF THOSE SURVEYED Continued

Mason County, Dick Collins, Director, Ludington Mass Transportation Authority, 410 E. Dowland, Ludington, MI 49431

Montcalm County, Mitch Anna, Director, Dept. of Community Services, 900 E. Kent St., Greenville, MI 48838

Huron County, Bob Peterson, Director, Huron Transit Corp., 115 Scott St., Bad Axe, MI 48413

Antrim County, Robert Straw, Director, Antrim County Transportation, P.O. Box 120, Bellaire, MI 49615

Charlevoix County, Art Saworski, Transportation Coordinator, Charlevoix County Public Transit, P.O. Box 725, Boyne City, MI 49712

Clare County, Ken Haskell, Clare County Public Transit Corp., 4175 N. Clare Ave., Harrison, MI 48625

Kalkaska County, Ron Kea, Manager, P.O. Box 1046, US-31 North, Kalkaska, MI 49646

Wexford County, Sheila Newpower, Manager, Cadillac/Wexford Transit Authority, 500 N. Mitchell, Cadillac, MI 49601

Gladwin County, Dennis Vannest, Gladwin City/County Transit, 621 Weaver Ct., P.O. Box 496, Gladwin, MI 48624

Berrien County, Dennis Schuh, Berrien County Planning Dept., Berrien County Courthouse, St. Joseph, MI 49085

LOCAL BUS TRANSPORTATION SERVICE PROVIDERS (continued):

Cass County, Larry Shaw, Director, Dowagiac Dial-A-Ride, P.O. Box 430, Dowagiac, MI 49047

Iosco County, Walter Burger, Iosco Transit Corp., 1036 North Aulerich, E. Tawas, MI 48730

Oscoda County, George Kibbe, Manager, Oscoda County Public Transit, County Building Annex, Mio, MI 48647

Chippewa County, Judy Walsh, Executive Director, Eastern Upper Peninsula Transportation Authority, 119 Culley Rd., Kincheloe, MI 49788

Delta/Menominee Counties, Leona St. Vincent, Deputy Director, Menominee/Delta/Schoolcraft Community Agency, Inc., 507 First Ave., N. Escanaba, MI 49829

Tuscola County, Charles Spaulding, Treasurer, Caro Transit Authority, 317 S. State St., Caro, MI 48723

Ogemaw County, Pat Kangas, Manager, Ogemaw County Public Transit, P.O. Box 39, W. Branch, MI 48661

Roscommon County, Frank LaPrade, Manager, Roscommon Mini Bus System, P.O. Box 39, West Branch, MI 48661

Chippewa/Luce/Mackinac Counties, Tom Johndrow, Chippewa/Luce/Mackinac Counties Community Action Agency, P.O. Box 70, Sault Ste. Marie, MI 49783

Schoolcraft County, Kevin Swanson, Manager, Schoolcraft County Public Transportation, 300 Walnut, Manistique, MI 49854

<u>NAMES OF THOSE SURVEYED</u> <u>Continued</u>

DEPARTMENT OF SOCIAL SERVICES OFFICES:

Gideon Robarge, Director, Alcona County - DSS, 205 N. State St., P.O. Box 586, Harrisville, MI 48740

Susan Bailey-Carman, Director, Allegan County - DSS, 2233 33rd St., Allegan, MI 49010

Ronald Rogers, Director, Calhoun County - DSS, 190 E. Michigan, P.O. Box 490, Battle Creek, MI 49016

Kay Williams, Director, Cass County - DSS, 130 N. Broadway St., P.O. Box 277, Cassopolis, MI 49031

Richard Aldrich, Director, Clare County - DSS, 160 E. Beech St., Drawer 469, Harrison, MI 48625

Charles Williams, Director, Genesee County - DSS, 125 E. Union St., P.O. Box 1620, Flint, MI 48502

Benson B. Beck, Director, Iosco County - DSS, 2145 E. Huron Rd., East Tawas, MI 48730

Lloyd D. Fett, Director, Jackson County - DSS, 301 E. Louis Glick Hwy., P.O. Box 3007, Jackson, MI 49204

Evert W. Vermeer, Director, Kent County - DSS, 415 Franklin, S.E., Grand Rapids, MI 49507

NAMES OF THOSE SURVEYED Continued

DEPARTMENT OF SOCIAL SERVICES (continued):

Terry McHoskey, Director, Leelanau County - DSS, 102 E. Madison St., P.O. Box 427, Millside Building, Suttons Bay, MI 49682

Robert Ernst, Director, Mason County - DSS, 1110 S. Washington, P.O. Box 370, Ludington, MI 49431

Paul Henrikson, Director, Muskegon County - DSS, 376 Apple Ave., Box 999, Muskegon, MI 49443

Walter Kwiatkowski, Director, Osceola County - DSS, 220 E. Church St, P.O. Box 63, Reed City, MI 49677

Ernest J. Smith, Director, Saginaw County - DSS, 411 E. Genessee, P.O. Box 5070, Saginaw, MI 48605

Douglas E. Kraatz, Director, Schoolcraft County - DSS, P.O. Box 339, Room 154, Courthouse, Manistique, MI 49854

John Altena, Director, Van Buren County - DSS, C.R. 681, P.O. Box 7, Harford, MI 49057

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CHAPTER THREE

EXEMPLARY SYSTEMS

EXEMPLARY SYSTEMS

Highlighted in this section of the report are specific transit systems located in the study area that make exemplary efforts in serving seniors and handicappers. One transit system was selected from each of the following categories: Urban, Nonurban, and Specialized Services.

The criteria used in selecting the three systems included:

- Duration of operation.
- Area served.
- Availability of service to both seniors and handicappers.
- Number of lift equipped vehicles in relation to the total number of handicapped persons in area served.
- Hours of service.
- Attempts made to identify and address additional needs of seniors and handicappers.

The transit systems which were selected from those operating in the study area, for their exemplary efforts to meet the needs of seniors and handicappers include:

Urban:	Kalamazoo Metro Transit System
Nonurban:	Crawford County Transportation Authority
Specialized Service :	Delta-Menominee Community Action Agency

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Kalamazoo Metro Transit System

The Kalamazoo Metro Transit System (MTS) is an Urban system, owned and operated by the City of Kalamazoo under the direction of the transit authority. It has been in operation since 1973. MTS serves the communities of Kalamazoo, Comstock, Kalamazoo Township, Parchment and Oshtemo, with service subcontracted in Portage (representing a population of approximately 154,990).

In FY-1986, MTS vehicles logged approximately 1.2 million miles and provided over 1.9 million rides. It is estimated that approximately 22% of the transit system's ridership represent seniors and handicappers.

MTS has an inventory of 47 vehicles, all of which are lift equipped. This includes:

32 - 1980 RTS, 36 passenger

14 - 1979 RTS, 36 passenger

1 - 1980 Chance, 23 passenger

Service is provided during the week, from 6:00 a.m. to 7:00 p.m., as well as on Saturdays, with a total of thirteen line-haul routes used. The Kalamazoo Area ranked second among all counties, in regards to the number of accessible vehicle hours of public transportation service provided per eligible user (based on 1986-87 data).

A comprehensive survey was conducted by the County's Transportation Advisory Council to analyze the unmet needs of seniors and handicappers in the County. Based on the unmet needs identified, the Local Advisory Council has established a specific plan of action to address these needs. Many of the additional services proposed focus on the expansion of the County Care-A-Van service, however, future objectives of the transit providers in the Kalamazoo Area include exploring the feasibility of including Metro Transit more directly in the provision of specialized services programs for seniors and handicappers in Kalamazoo County.

Crawford County Transportation Authority

The Crawford County Transportation Authority is a Nonurban system, providing demand-response public sector bus transportation services within Crawford County. CCTA has been providing transit service since 1976, representing one of the first county-wide transit systems in the state.

During FY-1986, CCTA's 16 vehicles logged over 381,000 miles, providing approximately 122,800 rides. This represents nearly 13 trips per citizen in Crawford County annually. Based on more recent data (9/88 audited clientele characteristics), it is estimated that approximately 21% and 5% of the riderships is comprised of seniors and handicappers, respectively.

CCTA's has an inventory of 14 buses, 8 of which are lift-equipped. A description of the lift-equipped vehicles is as follows:

1 -	1984 GMC, 20 passenger	1 -	1985 C	HEVY, 18 passes	nger
1 -	1985 CHEVY, 20 passenger	2 -	1986 CHEVY, 13 passenger		
1 -	1987 CHEVY, 21 passenger	1 -	1988	CHAMPION,	13
			passenger		
1					

1 - 1988 WHEELED, 21 passenger

The system operates seven days a week. Weekday hours of operation range from 5:30 a.m. to 6:30 p.m. Weekend operations commence at 7:45 a.m. on both Saturday and Sunday. The closing time for Saturday operations is 5:00 p.m., with the corresponding time for Sunday operations being 4:00 p.m.

Through the recent efforts of the County's Coordination Committee, specific unmet needs of the County's seniors and handicappers have been identified. These needs encompass 1) well planned short excursions from nursing homes, and 2) near direct transportation for seniors to and from hot meals programs. The CCTA is now taking responsive actions to address these needs.

Delta-Menominee Community Action Agency

Transportation service for seniors in the Delta and Menominee County area is provided primarily by the Menominee-Delta-Schoolcraft Community Action Agency Senior Citizens Program. In addition, the Community Mental Health Agency (Maniaci Center) provides transportation services to handicapped clients in Delta County and sub-contracts with the Community Action Agency with transportation for clients after hours and weekends. The Community Action Agency has been providing transportation services since 1975.

The Community Action Agency transported 2,352 unduplicated seniors, totaling over 37,000 client trips during the October 1, 1986 through September 30, 1987 fiscal year. These trips were provided to the senior centers for nutrition meals and activities, personal business, and medical appointments.

The Maniaci Center transported 81 unduplicated handicapped clients, totaling over 33,000 client trips between this same time period. The primary purpose of these trips was to get clients to the Activity Center and Lakestates Industries and to individual work sites, medical appointments and some social/recreational trips.

The Community Action Agency has six senior centers and six satellite centers in Delta and Menominee Counties. All of the nine lift equipped vehicles which are operated by the CAA, are located at these various senior center locations. The following is a listing of the location of each center, the number of vehicles they operate and hours of operation.

DELTA

Hermansville

Nel 19

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		Days of	Hours of
City	Vehicles	Operation	Operation
Escanaba	3	M,T,W,Th,F	8:00am-4:30pm
Gladstone	2	M,T,W,Th,F	8:00am-4:30pm
Rock	1	M,T,W,Th	8:00am-4:30pm (except Tues 8:00am-1:00pm)
MENOMINEE			
City		•	
Menominee	1	M,T,W,Th,F	8:00am-5:00pm
Stephenson	1	T,W,Th,F	8:00am-5:00pm

Limited transportation services is also provided to the satellite centers, located in Perkins, Cornwell, Wells, Bark River, Ford River and Perronville.

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M,T,W,Th,F

8:00am-4:00pm

CHAPTER FOUR

REVIEW OF EXISTING STUDIES AND LAWS

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<u>CHAPTER IV</u>

LIST OF OTHER STUDIES AND LAWS REVIEWED

Early in the project, a review was submitted to MDOT concerning five key documents identified by the Department.

These items included:

- 1. Michigan Needs Assessment of the 60 and Over Population (1986), Michigan Office of Services to the Aging.
- 2. SEMTA Elderly/Disabled Plan Update (1987).
- 3. Act 51, of the Public Acts of 1951, as amended.
- 4. Census data compiled by MDOT (1988), "Seniors and Handicappers in Michigan by County".
- 5. Planning, Services for Transportation-Handicapped people, "Data Collection Manual, USDOT, (1983).

In the interest of brevity, this material is not repeated in this document.

It is also noteworthy that a variety of other documents were reviewed by the consultant in performing the project.

CHAPTER FIVE

NEEDS IDENTIFIED IN SPECIALIZED SERVICES' PROPOSALS

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CHAPTER V

NEEDS IDENTIFIED IN SPECIALIZED SERVICES PROPOSALS

Presented on the following pages of this report is a listing of specific needs identified in the applications submitted as part of the Specialized Services Program (this includes both funding cycles of the Program).

Page V-1

<u>ALGER</u>

- No transportation in Grand Marais area.
- Transportation to Munising limited to one day a week.
- Mental Health needs additional transportation for clients participating in various programs.

<u>ALLEGAN</u>

- Service hours unable to meet medical and social needs.
- Out-of-county medical facilities cannot be reached.
- Community Mental Health cannot meet demand with only one lift-equipped vehicle.
- Limited medical care in Saugatuck Township results in a need for transportation to Holland.
- Senior Center in Holland cannot be accessed without expanded transportation services.
- Unanticipated down time of vehicles presents problems for ACRDC.
- Individuals cannot participate in ACCMHS programs due to a lack of transportation service.

ALPENA/ALCONA

- Transportation cost prohibitive for some clients of NEMROC.
- Transportation service is needed for adult day care clients and visually impaired clients (including door-to-door service).
- Transportation for developmentally disabled clients of the AMA Intermediate School District is needed to allow them to participate in recreational activities.

<u>BARRY</u>

- Additional weekend and evening service hours are needed.
- More flexibility is needed for out county areas of Hastings for those seeking medical treatment.
- Additional out county transportation service is needed in general.
- Transportation is needed for transportation to meal sites in communities other than Hastings.
- Demand response service is needed for communities other than Hastings.
 - Linkages need to be established with other transit providers in neighboring counties.

<u>BAY</u>

Transportation service is needed to medical centers located in the Cities of Saginaw and Midland.

BAY/ARENAC

- Arenac County presently does not operate a transit system.
 - Expansion of Bay-Arenac Intermediate School District's Vocational Program has resulted in a need for additional transportation services. The Grandparents Program, administered by the School District, is also in need of transportation services.

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A trainer is needed to assist prospective employees to use the transit system.

<u>BARAGA</u>

Additional transportation service is needed for those attempting to get to meal sites, medical facilities, shopping centers, and other destinations.

BENZIE

- Expanded service hours to include Saturday transportation is needed.
- Cross-county transportation agreements soon to be implemented will increase demand, and require that additional service be provided.

<u>BRANCH</u>

- Many seniors and handicappers are not served as a result of the limited service area (five mile radius of the City of Coldwater).
- Weekend service is needed, especially for those attempting to get to church services and places of employment.

<u>CALHOUN</u>

- The Community Action Agency of S. Central Michigan can not accommodate persons in wheelchairs, nor meet all of the requests for transportation. This includes those in Albion and Battle Creek.
- Seniors and handicappers in Marshall have access only to destinations within the City, given the existing services provided by the Marshall Dial-A-Ride.
 - With the exception of limited volunteer service, the seniors and handicappers in both Homer and Tekonsha have no transportation service available.
- Calhoun County Mental Health cannot meet all of the transportation needs of its clients.
- Battle Creek Transit does not service many of the areas (destinations) desired within the Cities of Battle Creek and Albion. It often requires a two week lead to schedule a ride. Additional service hours are also needed for transport to recreational areas.
- In FY-1990, Michigan National Bank will no longer offer funds to operate two Independence for Life vans (which provided almost 10,000 rides to seniors in Battle Creek in 1988).

<u>CHEBOYGAN</u>

- Transportation services provided by the Dept. of Social Services and the County's Council on Aging are not sufficient to meet existing needs (especially in regards to medical appointments).
 - A Dial-A-Ride system is needed which would combine the fixed route systems offered by Lamplighters and Senior Centers.

- A Dial-A-Ride system is needed to service the transportation needs of seniors and the handicapped, encompassing the entire county.

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<u>CHIPPEWA</u>

Additional demand-response service is needed to relieve peak hour rush (lift equipped).

<u>CLINTON</u>

- Residents of the Hazel I Findlay Manor need access to medical appointments and to community programs (CRV cannot meet existing needs).
- Transportation services is needed for clients of the Clinton County Home Health Care to medical appointments in Lansing and St. Johns.
- Transportation for non-medical needs is lacking in the County.
- Out-of-county trips are difficult to schedule for clients of the County's Senior Citizen Office. Tri County Limo is often times cost prohibitive.
- Services need to be expanded to Maple Rapids, Fowler, Ovid and Elsie.
- Additional transportation services are needed for residents of the two senior apartments and ten AFC homes in St. Johns (for organized activities).
- Additional transportation services are to transport seniors to the County's eight nutrition and social sites.

- North Central Community Mental Health service has clients in need of transportation to counselling sessions.
- Area long term nursing homes have clients in need of transportation for well planned short excursions.
- Crawford County Commission on Aging has clients in need of transportation to hot meals programs.

<u>DELTA</u>

- Clients of senior centers in the County are in need of transportation in the evenings and on weekends.
- Additional transportation services are needed for clients of both the CAA and the County's various mental health programs.
- The Maniaci Center has numerous clients in need of transportation to work sites, medical facilities, counseling, social activities, and other destinations.

DICKISON/IRON

- The Adult Day Care Centers in Iron Mountain and Kingsford need transportation services to expand its existing client base.
- Additional transportation services are needed for clients of the Iron County Medical Care Facility, for basic living needs.

<u>EATON</u>

Transportation service is needed for medical trips into Lansing for individuals needing lift equipped vehicles (noon to 5:00 p.m. / Monday - Friday).

- Clients of both the Eaton Intermediate Schools and Eaton County Counseling Center need transportation service from Peckham Rehabilitation Center in Lansing. The Eaton County Counseling Center has also identified clients in need of transportation from Peckham, to destinations outside of the present service area.
- The County's Senior Citizen Office and Dept. of Social Services has identified 36-52 client trips per month which are outside of the current service provision capabilities.

<u>EMMET</u>

- An escort is needed for assisting clients to and from the bus.
- Expanded hours and expanded staggered shifts are needed, especially those coming into the hospital for tests.
- It is difficult to pick up persons in the north part of the County and give them enough time in the City of Petoskey to accomplish their tasks.
- Additional transportation services needed for evening events.
- Expanded service hours needed for clients of Char-Em Intermediate School District.
- The N. Michigan Community Mental Health Services Board has a need for lower rates for its clients (possibly a special pass system). Page V-8

Much of the rural area of the County is not provided service by the MTA's Your Ride service.

There is not service past 7:00 p.m. (Monday-Friday) and no service on weekends, which is a recurring complaint.

Passengers are finding it difficult to arrange rides on Your Ride in Flint and Burton, since the buses are running at capacity much of the time.

The need to transfer to various buses to get to a specific destination is a problem for the senior and handicapped.

Special assistance is needed for some persons with mental and/or physical disabilities.

Additional training is needed for both drivers and telephone staff, to effectively address the special needs of the senior and handicapped.

MTA dispatchers need to be cross-trained to handle Your Ride calls.

A quicker turnaround on reservations is needed, as well as a means for handling emergency needs which circumvent the usual reservation system.

A subscription service for regular passengers is desired.

A need exists to better identify the Your Ride transportation, since both public and privately owned vehicles are used.

- Both McLaren and St. Joseph Hospitals have indicated a need for transportation for outpatient treatment and rehabilitation for individuals who cannot afford transportation or not well enough to transfer vehicles.
- Low income senior clients of the McKinley Community Center in Flint cannot afford the Your Ride service on a regular basis.
- Hispanic clients of the Kraphol Senior Center in Mt. Morris are in need of lower rates and bi-lingual driver(s).
- Transportation service is needed for the Jewish Social Service's kosher meal program (twice a week).
- Expanded service hours are needed for clients of the Carman-Ainsworth Senior Citizens Centers.
- Clients of the Genesee Federation of the Blind are in need of additional transportation services for general purposes, and reduced fares.

- The Hasselbring Community Center would like to expand its service hours to include special outings for its seniors.

GRATIOT

- Additional transportation services are needed to transport the senior and handicapped to:
 - evening physician's appointments
 - shopping centers
 - Dept. of Social Services
 - Senior food sites

- Senior Center
- Social Security Office
- rehabilitation facilities
- church services Saturday and Sunday
- recreational areas and social events
- support groups
- medical facilities in out-county areas.
- Weekend hours to handle Saturday and Sunday appointments with physicians, shopping, and Sunday worship services are also needed.

<u>GOGEBIC</u>

- Some of the outlying areas of the County do not receive daily service, while others receive only bi-weekly service.
- An expanded demand-response service is needed to serve those which cannot find a feasible bus schedule that will accommodate their needs.
- Out-county service is needed for some senior and handicapped persons, for specialized medical treatment.

GRAND TRAVERSE

- Special assistance is needed for some seniors and handicappers to access public transportation.

HILLSDALE

- There is no countywide public transit system operating.
- Additional evening and weekend transportation service provided by Key Opportunities is needed for handicapped clients served by this organization.

- Additional transportation services, in general, are needed for seniors in the County which are presently being served on a limited basis by volunteers.

HOUGHTON/KEWEENAW

- Additional transportation services are needed to expand employment and job training opportunities for handicapped residents (i.e. expanded evening and weekend service, increase capacity, and expanded service area).
 - Transportation service is needed for seniors and handicappers interested in participating in the Work Exchange program in Copper Harbor.
- Seniors and handicappers are in need of transportation from Houghton to Copper Harbor for various purposes.
- Seniors and handicappers from Keweenaw County are in need of transportation to the Houghton/Hancock area for medical services, visits, shopping and recreation.

<u>INGHAM</u>

- It is estimated that 46% of the senior and handicapped transportation needs are not being met.

<u>IONIA</u>

- Expanded Dial-A-Ride service is needed for those persons which do not live within the Cities of Ionia or Belding.
- Expanded Dial-A-Ride service is also needed for those which are in need of transportation to a destination outside of Ionia or Belding. Page V-12

- Sixty to seventy percent of the requests for services from senior clients are to destinations outside of the County (i.e. Grand Rapids, Ann Arbor, Greenville, Lansing and Carson City).

<u>ISABELLA</u>

- The greatest unmet need in the County is the absence of an Act 51, Specialized Services and/or 16(b)(2) provider.
- Insufficient market numbers and/or revenue amounts precludes comprehensive rural service.
- ICTC cannot spread its general public resources any thinner to further address the unmet needs of seniors and handicappers in the County.
- Several senior and/or handicapped persons are in need of transportation to and from service industry jobs, however, existing ICTC service hours do not meet their schedule. Private service would not be feasible.

<u>JACKSON</u>

- Coordinated and centralized scheduling and dispatch service inclusive of all agencies and organizations for client medical appointments is needed between the hours of 8:00 a.m. and 5:00 p.m..
- Coordinated and regularly scheduled transit service between Jackson, Chelsea, Ann Arbor and Lansing is needed for client medical care appointments between the hours of 7:00 a.m. and 5:00 p.m..

Evening and weekend transit service for specialized program services, as well as social, recreational and civic outings is needed, from the hours of 6:00 p.m. and 10:00 p.m. evenings, and 7:00 a.m. and 10:00 p.m. weekends.

- Expanded demand-response service is need for all clients between 6:00 a.m. and 10:00 p.m. Monday through Saturday.
- Expanded County contracted service is needed for demand-response, through the utilization of more units.

KALAMAZOO

- Additional capacity for wheelchair trips during peak hours is needed.
- Additional senior meal site transportation service is needed.
- Additional out-county transportation service is needed.
- Expanded demand-response service for weekends and evenings is needed.
- Shuttle service between Jackson, Chelsea, Ann Arbor and Lansing for medical care appointments is needed.
- Centralized and coordinated transportation scheduling and dispatch service for all agencies and organizations is needed.

<u>KALKASKA</u>

Disabled clients of the Department of Mental Health either spend long periods of time on a bus or have a long waiting period before making a connection.

- Transportation service is needed for those wishing to attend Sunday church services.
- Clients of the Alternative Education program are in need of transportation to and from the program.

<u>KENT</u>

- Out-county special transportation is needed for seniors and individuals with disabilities throughout the area beyond GRATA's GO! service boundary, including access to the Grand Rapids metro area.
- Inter-county special transportation service is needed for eligible persons in eastern Ottawa County to provide access to the Grand Rapids metro area.
- Additional transportation to senior centers in the Grand Rapids metro fringe and out-county areas is needed.
- Expanded transportation is needed to competitive employment for persons with disabilities, whose trips cannot be accommodated within the geographic and/or time-of-day limits of present GO! Bus service.
- The only transportation services available county-wide are restricted to medical trips, or employment trips for handicappers. Services for medical trips are not wheelchair accessible.
- Based on 1980 census data, it is estimated that 18 percent of all seniors and 23 percent of all handicappers in the County reside in areas where virtually no special transportation is available.
- Late afternoon and evening travel is still beyond the scope of transportation services provided by human service agencies and volunteers in many areas of the County.

Additional transportation services are needed for those which cannot be served by the American Red Cross, which turns down more than 100 trip requests per month due to the lack of capacity. $(\cdot \cdot)$

- With the expansion of supported employment programs, additional special transportation is needed.
- Additional transportation to the Sparta Senior Center in northwest Kent County is needed.

LAKE

- Additional transportation services are needed for persons not covered under agency funding, for transportation to out lying hospitals and specialist offices.
- Senior citizens are in need of transportation from the nearest emergency facility (18 miles away) after regular service hours.
- Funds are not available for seniors and handicappers to the nearest shopping malls and social environments.
- Sunday transportation is needed, as well as service on holidays for Sunday services, etc..
- Expanded senior meal transportation is needed.
- Seniors and handicappers are in need of assistance boarding and exiting the buses, lifting packages, etc..
- Twenty seven percent of the senior and handicapped residents live out of the service area, and are often times unable to take advantage of the programs sponsored by Five Cap.

- Special olympic participants are in need of additional transportation services to events out of the normal service area.
- Client of Substance Abuse Service, Inc. are in need of transportation services to and from counseling and treatment.
- Lake County Mental Health clients are in need of transportation services to appointments, workshops, etc..

<u>LAPEER</u>

- There is a critical need for transportation service for seniors and handicappers outside the GLTA service area from 7:00 a.m. to 5:00 p.m., Monday through Friday.
- There is a moderate need for transportation service for seniors and handicappers all day Saturday and Sunday, encompassing both the non-GLTA service area and the existing service area.
- There is a moderate need for transportation service for seniors and handicappers encompassing the entire County, from 5:00 p.m. to 8:00 p.m., Monday through Friday.
- There is a strong need for specialized transportation service in the M-24 corridor.
 - Ongoing deinstitutionalization of handicapped persons at the Oakdale Regional Center is resulting in a greater demand for special transportation service throughout the County.

LENAWEE

Transportation service is needed for group trips in and out of the county for seniors and handicappers.

There is a need for the operation of a shuttle bus once a month for seniors and handicappers from some of the smaller communities to the City of Adrian. .

- Expanded service is needed for clients that use wheelchairs.
- Expanded service is needed for seniors and handicappers to allow them to participate in workshops which are not located in the existing service area.
- More routes are needed in the County to service the needs of clients of the County's senior centers.
- Expanded evening and weekend transportation service is needed.
- Transportation service is needed for additional educational, social and recreational activities.

LIVINGSTON

- Expanded hours of transportation service for seniors and handicappers is needed, to include both evening and weekend service.
- Additional transportation service is needed for seniors and handicappers located in the less urbanized areas, which are rarely reached by the existing volunteer services provided.
- Approximately 300 clients of the County's family group homes are in need of transportation service beyond the present service hours during the week and weekends.

Expanded transportation services are needed to reach the many seniors and handicappers located outside of the existing service area in this very rural and sparsely populated area.

MANISTEE

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- Transportation service is needed for Sunday services.
- Additional service schedules are needed to the West Shore Community College, as well as for seniors/handicappers interested in participating in the People First program.
- Transportation is needed for therapeutic, recreational and educational excursions.
- Seniors and handicappers are in need of special assistance during transit.
- Additional emergency and medical transportation service is needed throughout the County for seniors.
- Transportation to Munson Medical Center is needed.

MARQUETTE

- Clients of the Marquette Community Mental Health Board are in need of transportation to and from Adult Basic Education Services, Community Based Rehabilitation, and a Work Center.
- Evening transportation is needed for seniors and handicappers, to destinations outside of the City of Marquette.

Clients of the senior centers in the County need transportation service on a group basis encompassing various activities.

<u>MECOSTA</u>

- Out-of-county medical transportation is needed for the County's seniors and handicappers, as well as evening and weekend service.
- Expanded transportation services are needed to meet the present demand for volunteer transportation service administered by the County's Commission on Aging.
- Additional transportation services are needed for seniors and handicappers for various social activities.
- Expanded transportation services are needed to and from the County's mental health facilities.
- County transportation needs to be expanded to include service to four nutrition sites.
- Expanded transportation services are needed for seniors and handicappers so that they can participate in public hearings (out-of-county), educational programs, church, as well as various civic and social activities.

MENOMINEE/DELTA

- Expanded transportation to include evening and weekend service is needed for seniors and handicappers.
- There are unmet transportation needs for both the Community Action Agency and Mental Health programs.

Additional transportation service is needed for clients of the Maniaci Center, including service to and from:

- programs at the Activity Center;
- work sites;
- medical appointments;
- counseling; and
- social activities.

MIDLAND

- Midland County currently does not have a county-wide transportation system.
- Additional transportation service is needed to meet the demands placed on the County's Council on Aging, including transportation for persons residing outside of the City of Midland.
- Only 13 of 31 human service agencies directly provided transportation service for their clients in 1986, which exemplifies the potential unmet needs present.

MISSAUKEE

- Seniors and handicappers have no access to line-haul or demand-response transportation.
- Transportation service is needed for handicappers which reside outside of the Lake City area.

MONROE

- Out-of-county medical transportation is needed for senior and handicappers, as well as expanded ETS hours at senior centers and at the Comprehensive Services for the Developmentally Disabled.
- Expanded ETS service is also needed for rural areas of the County (i.e. Ida, Temperance, and Dundee-Milan).

MONTCALM

- Out-of-county transportation is needed for seniors and handicappers to medical facilities.
- Alzheimer patients are in need of transportation service to the Community Mental Health Services' specialized day programming.
- Demand response service will be needed to handle the transportation needs of clients of the respite care center located at Community Mental Health Services.

- Transportation is needed to nutrition sites, recreational areas, cultural events, and senior clubs.
- Expanded transportation is needed for disabled veterans to medical facilities in Battle Creek, Saginaw, Allen Park and Ann Arbor.
- Affordable transportation to specialty hospitals such as those in Ann Arbor and Detroit is needed for physically handicapped and those with serious and/or terminal diseases.

MONTMORENCY

- At present, transportation service is limited to three days a week (8:00 a.m. to 4:00 p.m.), leaving a wide gap of non-service. Page V-22

- Transportation service offered by the Red Cross has been consistently overbooked for the last 6 months.
- Additional transportation service is needed for Alzheimer and Dementia patients of area respite care providers.
- Additional transportation service is needed to handle the additional demand created as a result of area hospitals cancer and cardiac treatment capabilities.
- Evening and weekend service is needed for seniors and handicappers throughout the County.
- Except for service along the West Michigan route, by the Red Cross, there is no service Monday, Wednesday and Friday in the rural townships.
- Service in the out-county areas is severely limited due to the limited availability of vehicles for demand response service.

<u>NEWAYGO</u>

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- There are no public transit services in the County.
- Additional services are needed to provide transportation to urban sites where employment opportunities are more prevalent for the developmentally disabled.
- Additional service is needed for shopping trips, as well as special events.

Newaygo Area ARC vans are at capacity presently, which transport developmentally disabled adults to adult education classes and seniors to meal sites.

<u>OCEANA</u>

- Clients of the Medical Care Facility are in need of transportation service to shopping centers, church services, special events, appointments, and weekend events. Family and volunteer service cannot meet the present demand.
- Demand-response service is needed for clients of the Progressions Work Center.
- Clients of CAAP are in need of transportation service to medical appointments and shopping centers.
- DSS volunteers are not able to accommodate individuals in wheelchairs or in need of a lift vehicle.
- Demand-response service is needed for transporting seniors and handicappers to medical facilities, during non-emergency cases.
- As the only special transit provider, the Oceana Council on Aging's lift bus is in great demand and cannot meet all of the needs of the senior and handicapped persons of the County.

<u>OTSEGO</u>

- Expanded service is needed for current meals on wheels programs to reach persons residing in the East and West sections of the County.
- Special assistance is needed for seniors and handicappers upon arrival in any capacity.

- A shuttle service is needed to transport seniors and handicappers to and from medical buildings, businesses, etc., within the City limits.
- Special assistance is needed for mentally handicapped workers as well as client of the Gaylord Opportunity Center, on a problem basis only (i.e. aide would ride with specific clients for a few days).

<u>OTTAWA</u>

The County is presently pursuing a county-wide transit system, however, seniors and handicappers are in need of services in the interim.

PRESQUE ISLE

- Evening services are needed.
- Presque Isle County Council On Aging would like to be able to coordinate service with NEMROC and their clients, and to expand its coordinated efforts with Presque Isle Extended Care and Mental Health.

SAGINAW

- Additional out-county transportation is needed in all areas and for all services.
- Expanded service hours are needed for transporting seniors and handicappers to medical appointment, senior centers and social services.

<u>SANILAC</u>

Expanded transportation services are needed beyond the present hours of 10:00 a.m. and 2:00 p.m..

- Additional transportation services need to be made available for those persons which must presently be turned away by DSS.
- Transportation service is needed for those who live outside of the present pilot Dial-A-Ride program.

<u>SHIAWASEE</u>

- No public transit service is available.
- Information supplied by County agencies indicates the need for regular mid-day transportation service to medical, shopping and service centers.

ST. JOSEPH

- The existing service to seniors is extremely limited, which operates from 10:00 a.m. to 2:00 p.m. to a distance of three miles from the city limits of Three Rivers and Sturgis.
- Seniors are not being served in the Pigeon/Constantine area.
- Clients of the ARCH Workshop and other citizens with disabilities are in need of transportation services to allow them to take advantage of employment opportunities.