PREPARED FOR GENESEE TRANSPORTATION COUNCIL

GENESEE-FINGER LAKES REGION COORDINATED PUBLIC TRANSIT-HUMAN SERVICES TRANSPORTATION PLAN UPDATE

AUGUST 2011

NELSON
NYGAARD

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Executive Summary

Plan Overview and Methodology

The Safe, Accountable, Flexible, Efficient, Transportation Act: A Legacy for Users (SAFETEA-LU) was passed in 2005 and requires the establishment of locally developed, coordinated public transit-human service transportation plans as a condition for receiving funding for Federal Transit Administration (FTA) sponsored human service transportation programs.

In the Genesee-Finger Lakes Region, the December 2007 Plan was prepared by the Rochester Genesee Regional Transportation Authority (RGRTA) in coordination with GTC; the County Area Transit System (CATS) of Ontario County; not-for-profit transportation providers such as Medical Motor Services, LifeSpan, and local chapters of NYSARC; county offices of aging and human/social services departments; and the Workforce Investment Boards (WIBs) in the region.

This Plan Update aligns with existing requirements for updating the region's coordinated public transit/human services transportation plan (every four years), consistent with Federal Transit Administration circular 9070.1F.

The objective is to revisit the previous plan, update local and regional transportation needs and continue to develop a more efficient, integrated and coordinated network of service. The update expands upon initiatives currently underway and identifies additional recommendations to improve the coordination of public transportation for persons with disabilities, seniors, and low income job seekers.

The focus of the coordinated planning requirements in SAFETEA-LU is on funding programs used to sponsor human service transportation services. The three target programs include FTA Section 5310 Capital Assistance Program for Elderly Persons and Persons with Disabilities, FTA Section 5316 Job Access and Reverse Commute (JARC) and FTA Section 5317 New Freedom Program. This Plan Update seeks to examine the mobility of existing target populations, inventory existing services, and document unmet needs and gaps in the network.

Existing Conditions

In order to understand where the target populations live, where they travel, and how they get there, the first chapters of the plan examine existing conditions. These steps included a demographic analysis, a compilation of major destinations, and a listing of existing transportation providers.

Demographic Analysis and Major Destinations

The first steps in the Plan analyze demographic data from the Census at the block group level for the region. For analysis purposes, the region was divided into three subregions: the Central Region, comprised of Monroe County; the Eastern Region, comprised of Ontario, Seneca, Wayne and Yates counties; and the Western Region, comprised of Genesee, Livingston, Orleans and Wyoming counties.

Figure ES-1 Coordinated Plan Organization of Nine County Region

Data Sources: Genesee Transportation Council

The maps created in this demographic analysis process give a sense of the size, spatial distribution and growth of these populations in the nine county region. Three counties are experiencing a slow decrease in population, and most are growing more slowly than New York State or the country as a whole. Still, there are a few areas of more rapid growth in Ontario and Seneca counties. Populations are largely concentrated in the cities and towns, but high need areas emerged in more remote block groups in southern Livingston and Wyoming counties as well as in southern Yates and Seneca and eastern Wayne counties.

Existing Providers

The Plan documents a total of 104 providers across the region. Forty-four (44) of these serve the Central Region, 27 the Eastern Region, and 33 the Western Region. Eight of the nine counties in the region are served by a public transit system. Monroe County is served by the Regional Transit Service through the Rochester Genesee Regional Transportation Authority (RGRTA). Six other counties are served by the regional subsidiaries of the RGRTA - Genesee, Livingston, Orleans, Seneca, Wayne and Wyoming. Ontario County operates the County Area Transportation System independently of the RGRTA. Yates County has no public transportation, but substantial progress has been made in the last year toward establishing service through the Arc of Yates.

Each county's transit system is complemented by at least one major nonprofit transportation provider. These providers strengthen the local networks and provide service in areas or to populations that public transit is unable to serve. These nonprofits may serve geographic areas

unreached by transit or are able to provide a higher level of service, such as door-through-door, that public transit cannot provide.

In comparing areas of high need with existing providers, most areas, with the exception of Yates County, are served by fixed-route or demand-response transportation. However, these services may not be able to fill the unmet needs of these areas for a variety of reasons, including time of day, level of service needed, or service area. These unmet needs are examined in more detail later in the Plan.

Existing Coordination

Stakeholders and focus group participants in the region are generally highly aware of these unmet needs and service gaps. Many nonprofit providers often work closely with county agencies and the local transit services to share information and coordinate service on some level to begin addressing these needs. Some counties have highly coordinated systems; for instance, Livingston County employs a transportation coordinator in their Department of Social Services. Monroe County also has a strong network of nonprofits led by Medical Motor Service that together employ a mobility manager for the county. Other counties do not formally coordinate, but share information and can refer clients to the appropriate transportation services.

The health community is also involved in coordinating transportation in the region. For example, at the county level, the Yates County Health Planning Council has been working with the Yates Arc as the Arc takes steps to develop public transportation in the county. At the regional level, the Finger Lakes Health Services Agency and the SAGE Commission have named transportation as a major focus area and developed recommendations for improvement to regional transportation coordination.

New York State Medicaid Restructuring

The possible restructuring of New York State's Nonemergency Medical Transportation service delivery system has the potential to greatly affect local transportation service delivery in the Genesee-Finger Lakes Region. Medicaid transportation has been structured as a county-by-county operation in the past, but currently, the State is putting together a pilot regional service delivery model in the Hudson Valley. Local Departments of Social Services do not know how such a restructuring will affect their service delivery models and thus their ability to coordinate at the county level if the state decides to regionalize Medicaid delivery systems in the Genesee-Finger Lakes Region in the coming years.

Unmet Needs and Service Gaps

Within the nine-county region, there is quite a variety in levels of existing coordination efforts; yet several consistent themes across the study area arose from research in this study. Feedback from stakeholder interviews, focus groups, the background document review, and the provider survey were all utilized to compose the discussion of unmet needs and service gaps. The primary themes are summarized below:

- Information –Members of the public and professionals alike are unaware of many transportation programs available to them or to their clients.
- Geography – Rural areas are very difficult to serve because of the long distances between points and low densities of residents.

- Crossing County Borders – Some regulatory and coordination factors make cross-county trips challenging.
- Dialysis Transportation – Many clients and agencies have problems scheduling dialysis appointments at times that allow them to use public transportation modes. This is especially true for those without a dialysis clinic in their county. As a result, dialysis trips can be very long and very expensive for an individual or a funding agency.
- Door-through-door Level of Service - Public demand response systems are not able to provide assistance to riders with heavy bags or who need additional support getting from the curb into their destinations. Some nonprofit and private providers do provide this level of service, but some counties lack a provider able to assist door-through-door.
- Employment Transportation – For many individuals, public transportation is not an option for work. The issue is primarily the hours of operation; most public transportation begins too late to accommodate early shifts and/or ends too early to accommodate later shifts.
- Non-Medicaid Medical Trips – If individuals do not qualify for Medicaid or are not clients of organizations that provide or sponsor transportation, transportation options are very limited.
- Regional Medical Trips – Trips to Rochester, Syracuse, Buffalo, and other nearby urban centers can be very difficult to serve, especially for non-Medicaid populations.
- Staff Time/Funding – Carving out time to focus on coordinating transportation is difficult to nearly impossible for most county staff.

Strategies for the Region

Seventeen (17) strategies for the Genesee-Finger Lakes Region were devised to address the unmet needs and gaps identified in this plan. Strategies range from short-term local initiatives to long-term regional projects and cover a range of modes, populations, policies, and investments. It is important to note that while these strategic initiatives are new to the region, improvements to the quality and effectiveness of existing specialized transportation services and volunteer transportation services in areas where public transit is not sufficient or appropriate is one of their key benefits. As such, the continued support for and support for the continuous improvement of, existing services is integral to their success.

Figure ES-2 Summary of Strategies

The following summarizes potential strategies that will help improve mobility for older adults, persons with disabilities and persons with low incomes.

	Strategy	Strategy Overview
1	Continuation of Support to Existing Services	The Genesee-Finger Lakes region has a strong network of existing providers that fill gaps in the transportation systems where public transit is not able to provide sufficient service. Supporting these organizations, including specialized services and volunteer programs, should remain a priority for meeting regional needs.
2	Bus Stop Improvements	Provide bus shelters and other amenities at bus stops, transit hubs or transfer points.
3	Centralized Call Centers	As a complement to the county mobility manager (#5), a centralized call center puts information access for all county transportation operations in one place, with one phone number for residents to call to schedule a ride.
4	Centralized Resource Directory	Centralized resource directories are very helpful to consumers, human service agency staff, and advocates who need to find and/or arrange transportation for members of the target populations (low income, seniors, and persons with disabilities) online.
5	County Mobility Managers	A mobility manager could be an individual, a group of individuals or an organization that provides a wide variety of mobility management functions for consumers, human service agency staffs, and/or for community transportation providers.
6	Facilitate New Partnerships	Partnerships with private or other nonprofit organizations can increase ridership as well as provide sponsorship for transit routes. Examples of Arc partnerships exist in Upstate. Other partnerships with private employers and retailers, such as grocery stores and farms, can also be pursued.
7	Innovative Transit Service Designs	Provide fixed route/fixed scheduled bus service designed to serve senior destinations by improving proximity of bus stops. Neighborhood scale vehicles are used to navigate smaller roads and to be able to access the front entrances of senior-oriented facilities and shopping destinations. Open to all with emphasis on seniors.
8	Job Access Strategies	Create and operate specialized transportation services to create direct links between neighborhoods/parts of counties and key hard to reach employment markets

	Strategy	Strategy Overview
9	Marketing and Information Campaigns	In many areas there is a lack of awareness and/or a negative perception of available public transportation services. In conjunction with a directory of services (#4), a marketing campaign can begin to change awareness and attitudes.
10	Regional and County Coordinating Councils	Create focal points for coordination and mobility management activities. Regional and County coordinating councils could assist in implementing the regional- and county-scale recommendations included in this plan and assist and encourage the implementation of local initiatives.
11	Regional Mobility Management Network	Create a training and support network for county mobility managers in the region. Training could provide mobility managers with background skills and networking opportunities. Network could at first facilitate information sharing, but could eventually become a regional body coordinating rides and other resources.
12	Regional Technology Network	Equip county transportation networks with technology to link all into a regional network. This network could be used primarily as an information resource for other counties or as a tool for coordinating shared rides.
13	Senior Transportation Network	Support efforts to establish a network of seniors interested in paying for high quality, door-to-door service through a membership organization to which seniors pay dues.
14	Taxi Subsidy Programs	Provide reduced fare vouchers to older adults, persons with disabilities and persons with low incomes to allow for more trip flexibility and increased travel coverage as needed; may also be used to support off-peak employment opportunities. Encourages use of lower-cost travel modes and supports expansion of accessible and community car fleet.
15	Transit Service Expansion and Improvements	Create new services and/or expand existing services to provide service to new areas, expand service hours and/or expand options in area with limited service. New/expanded services may include new options for late-night or weekend service. Build on opportunities to coordinate existing services to maximize efficiency and ridesharing.
16	Travel Training	Design programs to train individuals to use fixed-route and/or dial-a-ride public transit. Increasing use of public transit will increase mobility for individual and reduce reliance on higher cost transportation modes.
17	Volunteer Driver Program	Set up a network of volunteer drivers to help transport individuals with special needs or those traveling longer distances. Strategy may be most effective in more rural parts of the Genesee-Finger Lakes Region.

As a final step for this Plan Update, key stakeholders and steering committee members identified priority strategies. These strategies fall into the three categories listed below:

- **Regional and County Mobility Management**: including information sharing, inter-county operations, and scheduling/ridematching technology improvements. The short-term should focus on individual County mobility managers; as more County-level mobility managers or transportation coordinators are put in place, this should expand to a regional network.
- **Information**: Marketing and information campaigns are needed to welcome new riders into the system, while making it easy for them to figure out and use the system. These campaigns should include multiple languages. Travel Training and Bus Buddies are low cost programs that could be implemented immediately. These should be coupled with training riders to go to multiple destinations on one trip.
- **Service Improvements**: Though budgets are constrained at every level of government, demand for transit service is growing as are effective service delivery options. As a result, providers need to remain vigilant for opportunities to expand services where needed in order to meet the needs of an increasingly elderly and diverse population. Long-term focus should be on both medical and non-medical (social and shopping) trips. Where new services are needed, they should only be implemented if sustainable funding structures can be identified.

Chapter 1. Introduction

Overview

Developing integrated human service transportation programs and coordinating delivery of these services is a concept that many states have been working towards for many years. Coordination received increased attention when the Safe, Accountable, Flexible, Efficient, Transportation Act: A Legacy for Users (SAFETEA-LU) was passed in 2005. This Act required the establishment of locally developed, coordinated public transit-human service transportation plans as a condition for receiving funding for Federal Transit Administration (FTA) sponsored human service transportation programs. Partially resulting from SAFETEA-LU's increased requirements, research performed by the National Conference of State Legislatures[1] indicates that *some* level of transportation coordination efforts exist in all 50 states and the District of Columbia.

The concept behind coordination is that by working together, streamlining as many aspects of service delivery, and/or jointly managing or administering disparate programs, human service transportation systems overall can become more productive, efficient and effective. While a wide range of coordination strategies have proven successful, most research suggests that coordination is most likely to be successful when participating agencies and organizations agree to a set of clear goals and objectives, and the respective roles and responsibilities of individual agencies are well defined. In most cases, strong, effective leadership has also been a key factor in both starting the coordination process as well as leading to successful implementation of coordination strategies.

At this point in time, more than five years after the passage of SAFETEA-LU, many municipalities and regions are looking to move beyond their initial planning efforts with more focused efforts on implementation and/or addressing more structural barriers to coordination. It is against this backdrop that the Genesee Transportation Council (GTC), working together with a Steering Committee of local stakeholders, decided to update the existing Coordinated Public Transit-Human Services Transportation Plan for the Genesee-Finger Lakes Region, which was adopted by the GTC Board in December 2007. The objective of this effort is to revisit the previous plan, update local and regional transportation needs and continue to implement and strive towards development of a more efficient, integrated and coordinated network of service.

The GTC and its regional partners retained Nelson\Nygaard to lead the technical aspects associated with updating the coordinated plan. The planning process is intended to be not only a technical effort, but also to develop a broad framework for future coordination efforts and work with the region to transition projects from planning into implementation.

[1] Farber, N.J. & Reed, J.B. (2010). State Human Service Transportation Coordinating Councils: An Overview and State Profiles, *National Conference of State Legislatures*.

Methodology

SAFETEA-LU prescribed a clear process for developing a coordination plan. Plans must be based on locally identified needs and prioritize projects and services for funding and implementation. Federal guidance requires that projects competitively selected for funding be derived from a coordinated public transit-human service plan that, at a minimum, consists of the following elements:

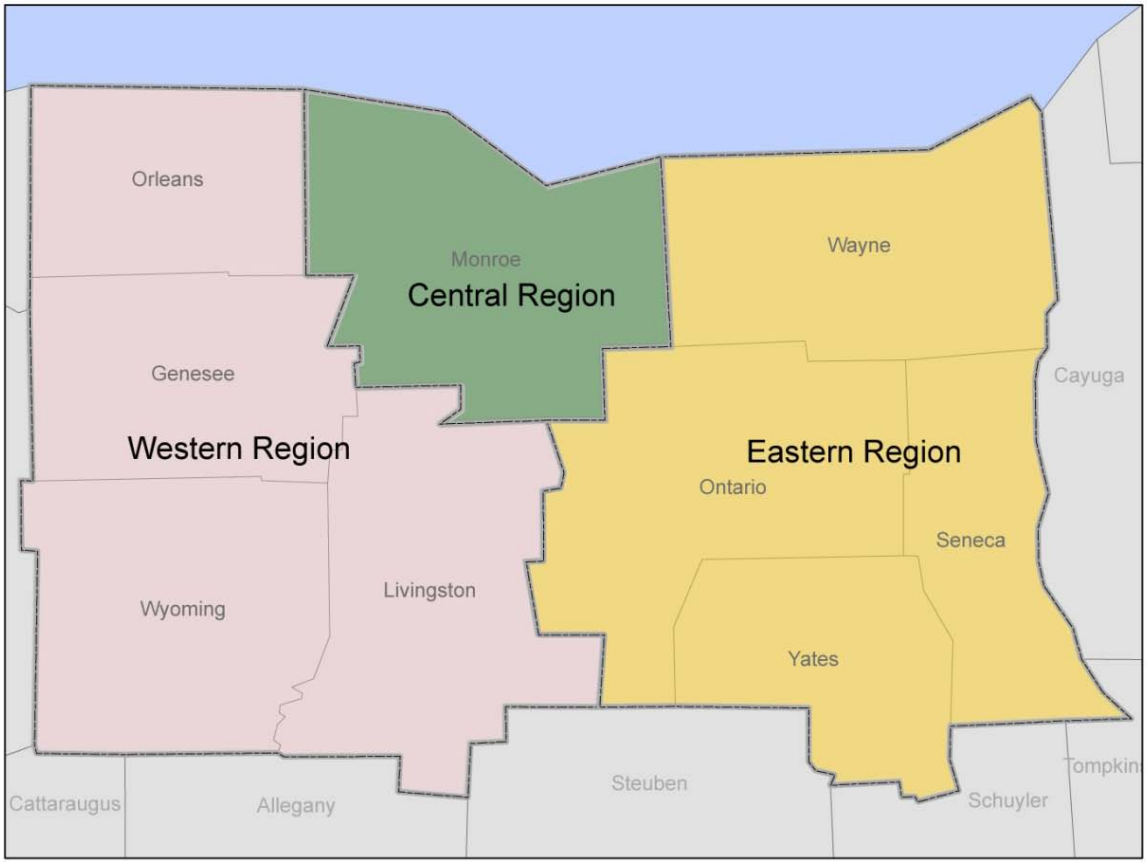
- An inventory of available services that identifies current transportation providers (public, private, and non-profit).
- An assessment of transportation needs for individuals with disabilities, older adults, and people with low incomes.
- Strategies, activities and/or projects that address the identified gaps between current services and needs and identify opportunities to improve efficiencies in service delivery.
- Priorities for implementation based on resources (from multiple program sources), time, and feasibility for implementing specific strategies and/or activities identified.

Nelson\Nygaard developed a methodology to update the Coordinated Public Transit-Human Services Transportation Plan for the Genesee-Finger Lakes Region that adheres to the prescribed federal process, but also builds on previous work so that that resulting process best positions the region for successful funding and implementation. As a result, we have organized our study around the following approach:

- Close collaboration with a Steering Committee comprised of regional stakeholders. The Steering Committee is tasked with reviewing study materials, discussing potential strategies and encouraging participation in the study from local constituents.
- An analytical assessment of regional demographics, activity centers and travel patterns. Most of the information for this assessment came from the U.S Census.
- Development of an inventory of existing transportation services and service providers. Information for this inventory was collected both from interviews with members of the local communities, focus groups, as well as a survey distributed to local contacts and participants in the outreach process.
- A series of focus groups and interviews held at each county. The focus groups brought together individuals with a stake in public transit and/or human service transportation, including service providers, human service agency staff, employers and representatives from the medical community. These groups were a critical aspect in identifying existing services, unmet needs and potential strategies.
- A series of public meetings and workshops which were used to vet potential strategies and help the region prioritize projects for funding and implementation.

Given the geographic size of the region and the diversity of land forms (i.e. urban, suburban and rural), the region was divided into three regions: the Central Region (Monroe County and the City of Rochester), the Eastern Region (Wayne, Ontario, Yates and Seneca counties) and the Western Region (Orleans, Genesee, Wyoming and Livingston counties) (see Figure 1-1). The regional subdivisions were used to help organize mapping and analytical efforts as well as group needs and potential strategies.

Figure 1-1 Coordinated Plan Organization of Nine County Region



Data Sources: Genesee Transportation Council

Report Organization

The update is organized into six chapters immediately following this introductory chapter:

Chapter 2: Demographic Profiles includes a demographic profile of older adults, persons with disabilities, and people with limited incomes in the region. This information establishes the framework for better understanding the local characteristics of the region and of each county, with a focus on the three target population groups.

Chapter 3: Major Destinations documents the major destinations for the three population groups in the region. The destination groups include senior centers, human service agencies, hospitals, dialysis centers, shopping centers, and colleges and universities. A full listing of the mapped destinations is available in Appendix B.

Chapter 4: Existing Transportation Services documents the array of public and community transportation services that exist in the region. The chapter begins with summaries of the county public transportation subsidiaries in across the region and concludes with a section on community transportation services.

Chapter 5: Unmet Needs, Existing Coordination and Potential Coordination presents the findings from the study's outreach activities and analysis to date. Much of this analysis takes into

account perceptions of unmet need as reported in previous planning studies, and as expressed in focus groups and by interviewed stakeholders and the survey respondents.

Chapter 6: Identification of Coordination Strategies describes strategies proposed to address the unmet needs listed in Chapter 5. The strategies draw from examples across the US and describe how the practice can be applied in the Genesee-Finger Lakes region.

Chapter 7: Prioritized Strategies for the Region includes further implementation considerations for groups of prioritized strategies, as decided upon by the Steering Committee.

Appendix A: Background Document Review lists the documents reviewed as preparation for this study and as a reference for analysis.

Appendix B: List of Major Destinations lists the destinations mapped in Chapter 3.

Appendix C: Overview of Human Service Transportation Funding summarizes federal and state funding programs that can be used to support human service transportation services.

Appendix D: Liability Issues and Volunteer Drivers briefly describes legal considerations for volunteer driver programs.

Chapter 2. Demographic Profiles

Introduction

The focus of the coordinated planning requirements in SAFETEA-LU is on funding programs used to sponsor human service transportation services. The three target programs are described in more detail in Appendix C of this report, but are named as follows:

- FTA Section 5310 Capital Assistance Program for Elderly Persons and Persons with Disabilities
- FTA Section 5316 Job Access and Reverse Commute (JARC)
- FTA Section 5317 New Freedom Program

As a first step in the planning process, therefore, we look to understand the size, spatial distribution and growth of these populations in the nine county region. This chapter includes a brief overview of population growth in the nine-county region before providing a more detailed perspective on the individual populations using these programs.

Key Findings from Demographic Analysis

- Several counties of the region are experiencing a slow decrease in population, and many are growing more slowly than New York State or the country as a whole. Still, there are a few areas of more rapid growth in Ontario and Seneca counties.
- With the exception of Monroe County, which includes both urban and suburban areas, most of the nine-county region is rural. Rochester is the regional hub and home of specialized services and amenities.
- The rural landscape is punctuated with the small cities of Batavia (Genesee County), Canandaigua and Geneva (Ontario County), as well as numerous villages located throughout the nine-county region. Most individual counties have at least one regional center that is home to medical, educational and social services. In many cases, however, the nearest regional center geographically may be in a contiguous county.
- In general the population of the nine-county region is marginally older than New York State as a whole or the United States. However, the region has a lower percentage of persons with a disability or a low income as compared to New York State or the nationwide average.
- Individual counties, however, may have higher concentrations of the target populations. Seneca and Yates counties, for example, include more older adults, persons with disabilities and persons with low income than the region as a whole or the national average.
- The rural composition of the region means that population densities are very low outside of the Central Region. Consequently, outside of Monroe County, concentrations of older adults, persons with disabilities and persons with low incomes are only observed in the small cities, towns or villages.
- The data and census block groupings obscures the fact that there are older adults, persons with disabilities and persons with low incomes living outside of the small cities, towns or villages.

Regional Overview

At the time of this writing only basic population data is available from the 2010 Census. To provide insight into overall population growth and decline, this data is used in Figure 2-1 and 2-2. Details specific to age, disability and income - at the block group level - must be derived from 2000 Census data. Accordingly, the estimates of target populations included in Figure 2-3 and the detailed maps beginning with Figure 2-4 are based on year 2000 data. It is recognized that the distribution and percentages of the target populations may have changed between 2000 and 2010. However in all cases, the best and most accurate data was used to describe the region's population notwithstanding these limitations.

Like many metropolitan regions in the Rust Belt, the greater Rochester region has largely seen slower population growth and some decline over the decade since the last Decennial Census in 2000. The population for the region grew by 1.5% in the last decade. Three of the nine counties in the Genesee-Finger Lakes Region - the three western-most counties - experienced a decline in population from 2000 to 2010, with the greatest rate of decline occurring in Orleans and Wyoming counties (both -2.9%). Five counties grew in population, with Ontario County showing the most robust growth rate at 7.7%, and Seneca County second at 5.7%. The remaining counties showed growth rates less than New York State as a whole, which grew by 2.1 % over the same period, except for Yates at 3.0%. Wayne County neither gained nor lost population in the last decade. The US by more than 9.7% between 2000 and 2010.

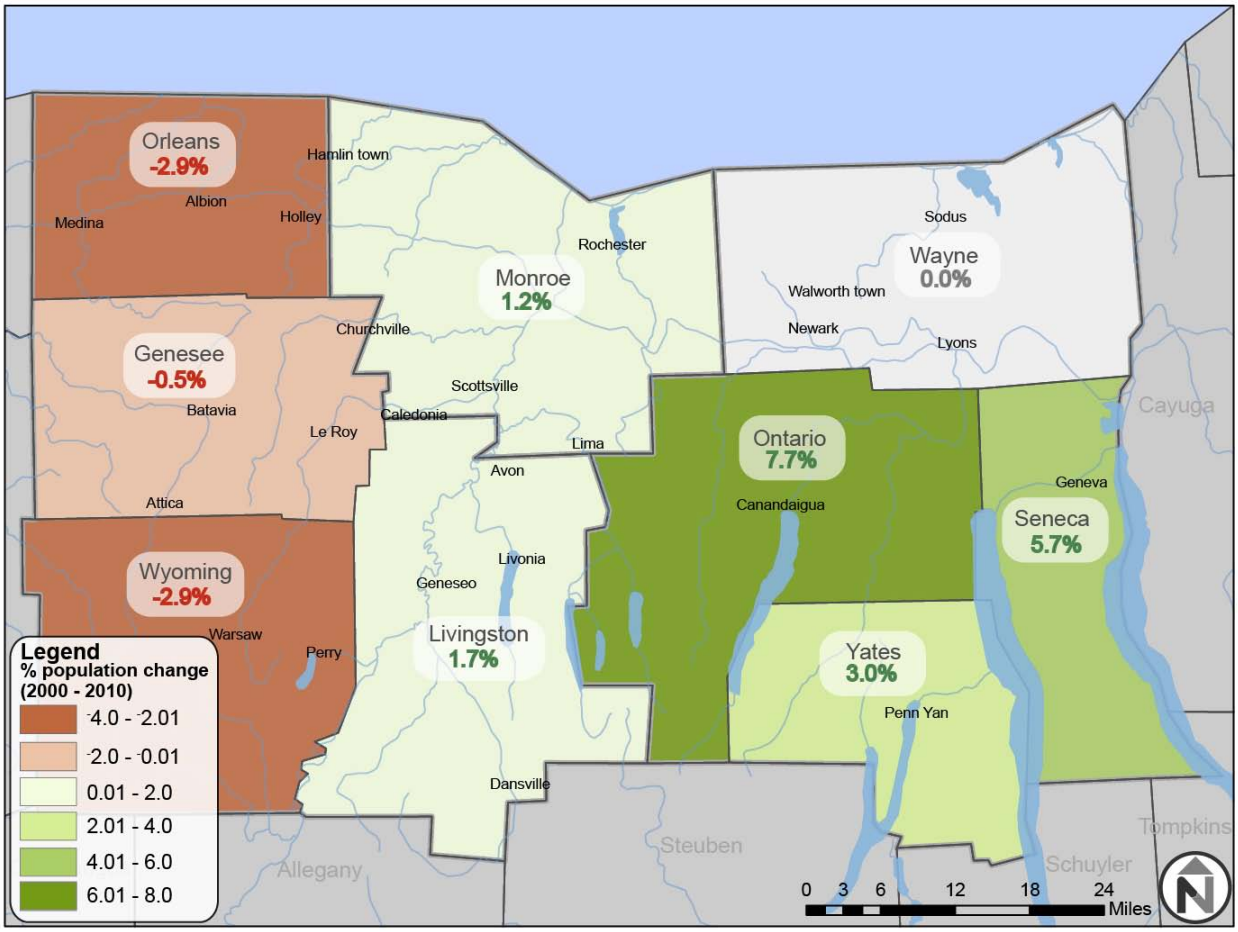
Figure 2-1 lists the growth rates by county between 2000 and 2010. Figure 2-2 displays the same data in a map. The Genesee-Finger Lakes Region's population grew by 1.5%.

Figure 2-1 Growth Rate by County 2000 - 2010

County	Total Population (2000 Census)	Total Population (2010 Census)	Growth Rate 2000-2008
Genesee	60,370	60,079	-0.5%
Livingston	64,328	65,393	1.7%
Monroe	735,343	744,344	1.2%
Ontario	100,224	107,931	7.7%
Orleans	44,171	42,883	-2.9%
Seneca	33,342	35,251	5.7%
Wayne	93,765	93,772	0.0%
Wyoming	43,424	42,155	-2.9%
Yates	24,621	25,348	3.0%
Region	1,199,588	1,217,156	1.5%

Data Sources: US Census 2000 and 2010

Figure 2-2 Growth Rate by County 2000 - 2010



Data Sources: US Census 2000 and 2010; Genesee Transportation Council

Demographic Analysis by Region

The following sections discuss demographics in each part of the region as well as the subpopulations of older adults, persons with disabilities, and persons with low income.

Central Region (Monroe County)

The Central Region consists of Monroe County and is home to the City of Rochester, the metropolitan center of the Genesee-Finger Lakes area. Monroe County had a total population of 735,343 in the last Decennial Census, though that population dropped slightly to 732,175 by 2008. Much of the population decline in the area took place from the City of Rochester itself, with the suburban population remaining more stable than the city and even growing in some areas. With the current population, 61% of the Genesee-Finger Lakes Region lives in the Central Region.

Of these, the percentage of population over 65 was 13%, identical to the nine-county region but slightly higher than the state and nation, in which older adults comprise 12.9% and 12.4% of the

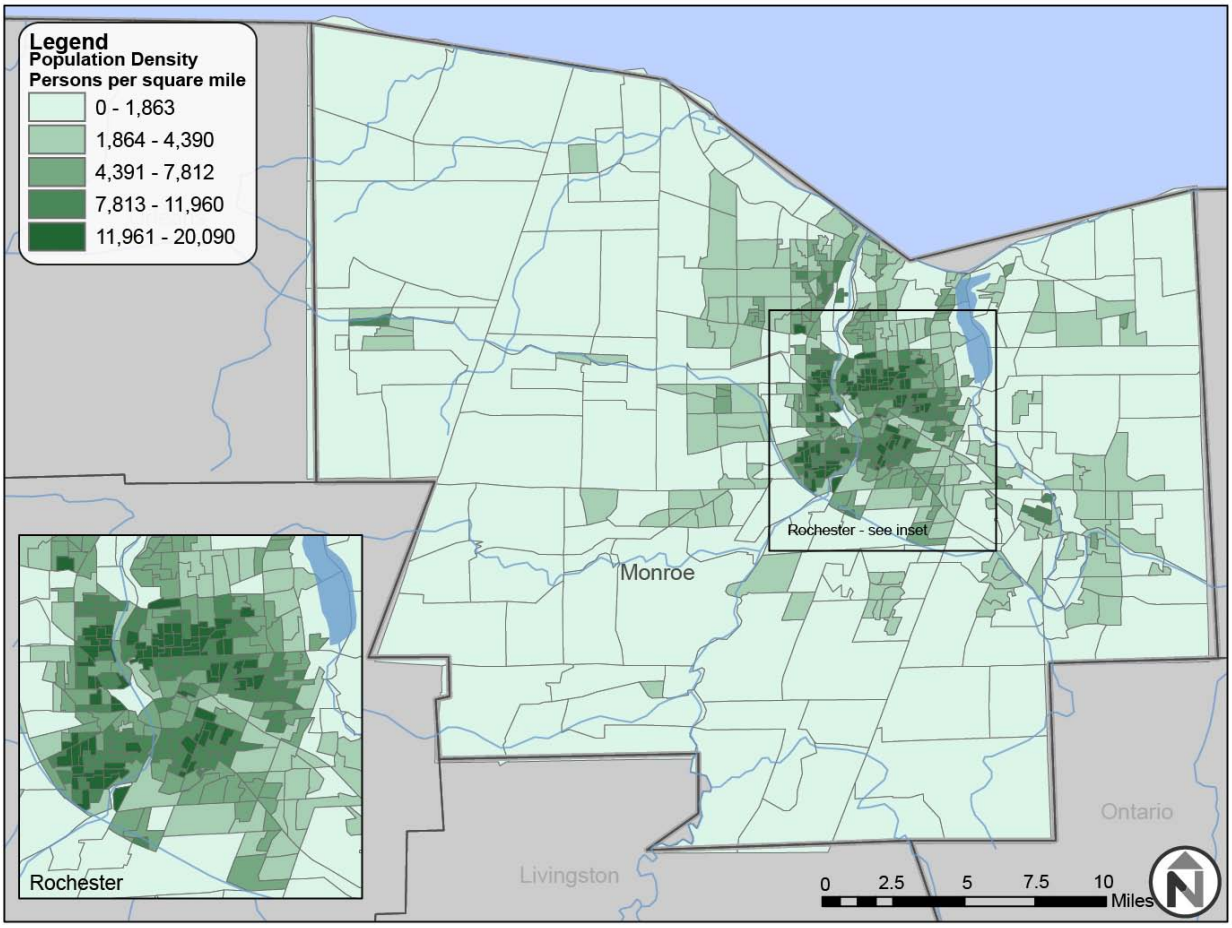
populations, respectively. Persons with a disability comprised 17.6%, also the same as the region's but lower than the state's at 19% and nearly equal to the nation's, at 17.7% in that year. Monroe County had a higher percentage of persons with low income than the region, as well as more households without a vehicle. However, there was a lower percentage of persons with low income than in New York State 14.2% in the same year, and the US, 12%. Percentage of households with access to a vehicle, at 11.5%, was just over one-third that of New York State (29.7%), but slightly higher than the national average (10.3%).

Figure 2-3 Target Populations in Monroe County (2000)

County	Total Population (2000 Census)	% Over 65	% Persons with Disability	% Persons with Low Income	% Households without Vehicle
Monroe	735,343	13.0%	17.6%	11.2%	11.5%
Region	1,199,588	13.0%	17.5%	10.3%	9.8%
New York State	18,976,457	12.9%	19.0%	14.2%	29.7%
United States	281,421,906	12.4%	17.7%	12.0%	10.3%

Data Sources: US Census 2000

Figure 2-4 Population Density in Monroe County (2000)



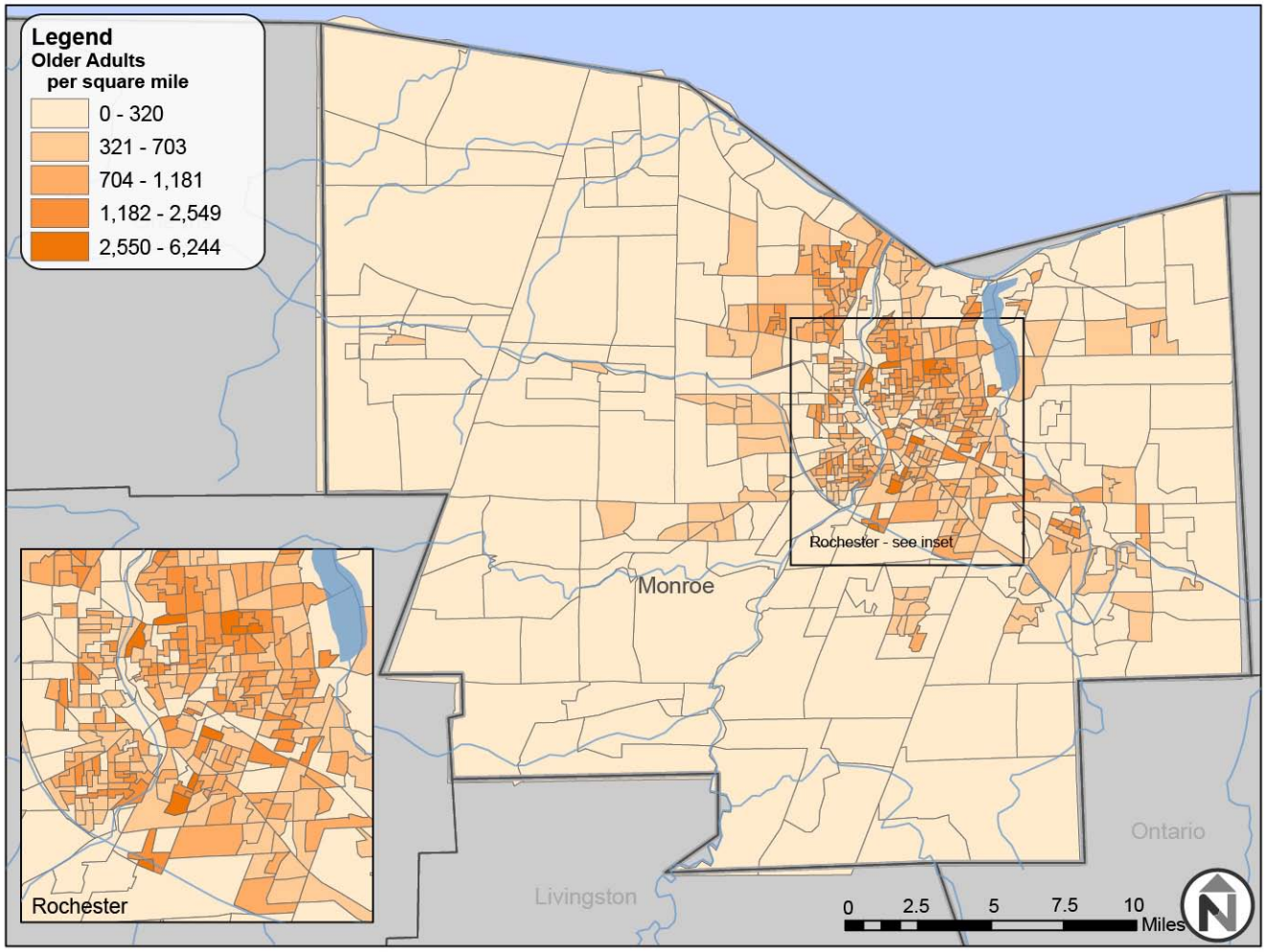
Data Sources: US Census 2000; Genesee Transportation Council

The following maps show the density of persons per square mile by subpopulation, within each Census block group – older adults, persons with disabilities, and persons with low income. As a comparison, Figure 2-4 shows population density for the total population. In Monroe County, the block groups with the highest densities are in central and southwestern Rochester. The inset displays Rochester more closely, showing higher densities north of Clifford Avenue/Empire Boulevard, west of the Genesee River, and in the southwest neighborhoods of Mayor's Heights and the 19th Ward, just north of the airport.

Older Adults

With nearly 38,000 older adults, Monroe County has the highest number of seniors in the region, though not the greatest percentage of the population (13%). Older adults show a slightly less concentrated pattern than the overall population in the county. There are several block groups in the northern part of Rochester with very high concentrations of older adults, but in general, this subset of the population appears to be more spread out than the overall population.

Figure 2-5 Older Adults in Monroe County (2000)

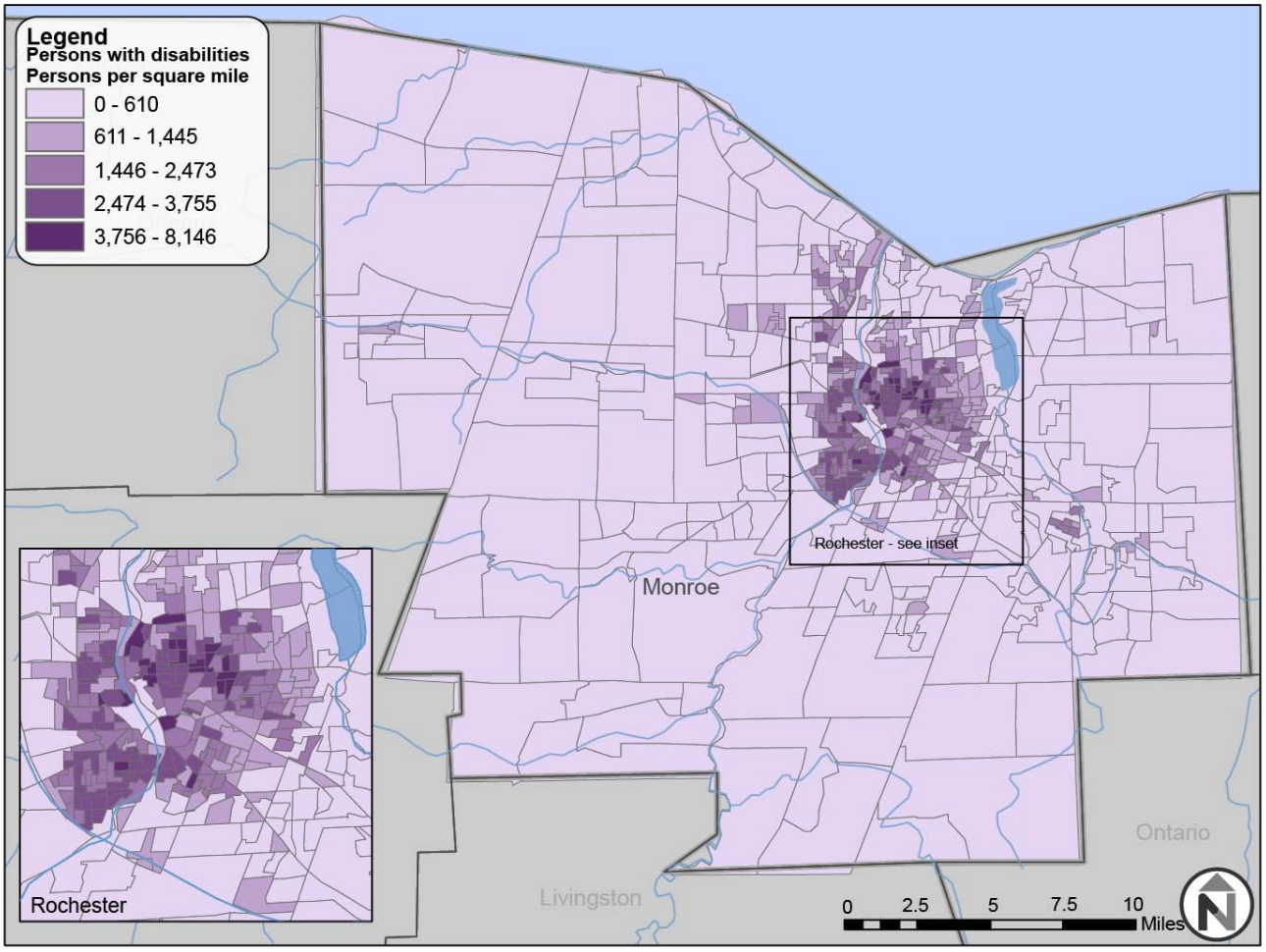


Data Sources: US Census 2000; Genesee Transportation Council

Persons with Disabilities

Unlike older adults, persons with disabilities in the Central Region are more concentrated than the overall population. Several block groups north of Downtown and along the eastern bank of the Genesee River show very high densities of persons with disabilities.

Figure 2-6 Persons with Disabilities in Monroe County (2000)

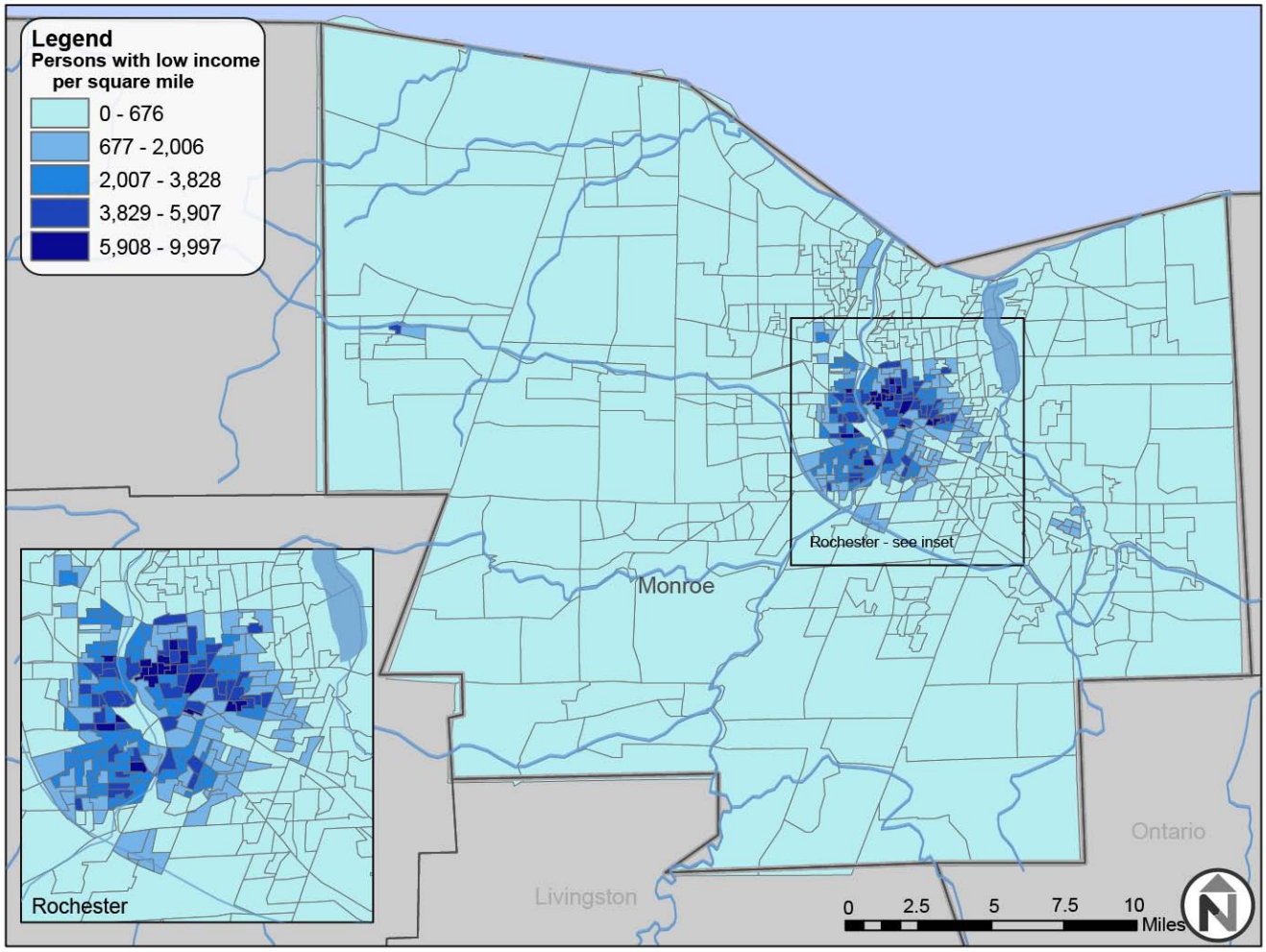


Data Sources: US Census 2000; Genesee Transportation Council

Persons with Low Income

Block groups with a high percentage of persons with low income are the most concentrated of all of the subpopulations and of the overall population in the Central Region. The vast majority of block groups with high concentrations of persons with low income are clustered in a group north of Downtown and east of the Genesee River. There are a handful of high-density block groups west of the river and just north of the airport, but most are in central Rochester.

Figure 2-7 Persons with Low Income in Monroe County (2000)

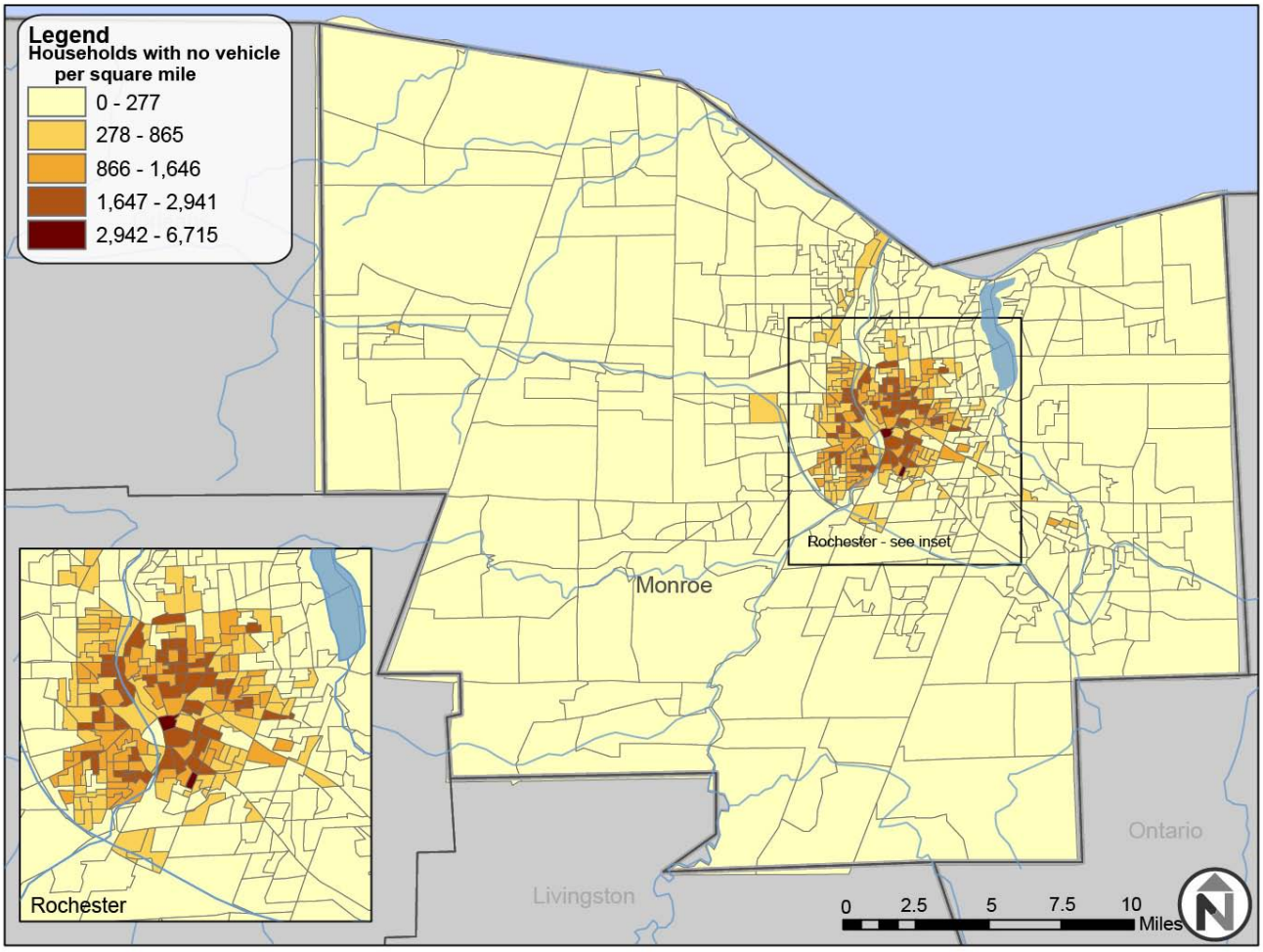


Data Sources: US Census 2000; Genesee Transportation Council

Households with No Vehicle

Households without access to a vehicle are centralized in Rochester, but not as concentrated as persons with low income. A few block groups with a high percentage of households with no vehicle are outside of Rochester, and only two block groups have a very high concentration of households with no vehicle relative to the rest of the city.

Figure 2-8 Households with No Vehicle Available in Monroe County (2000)



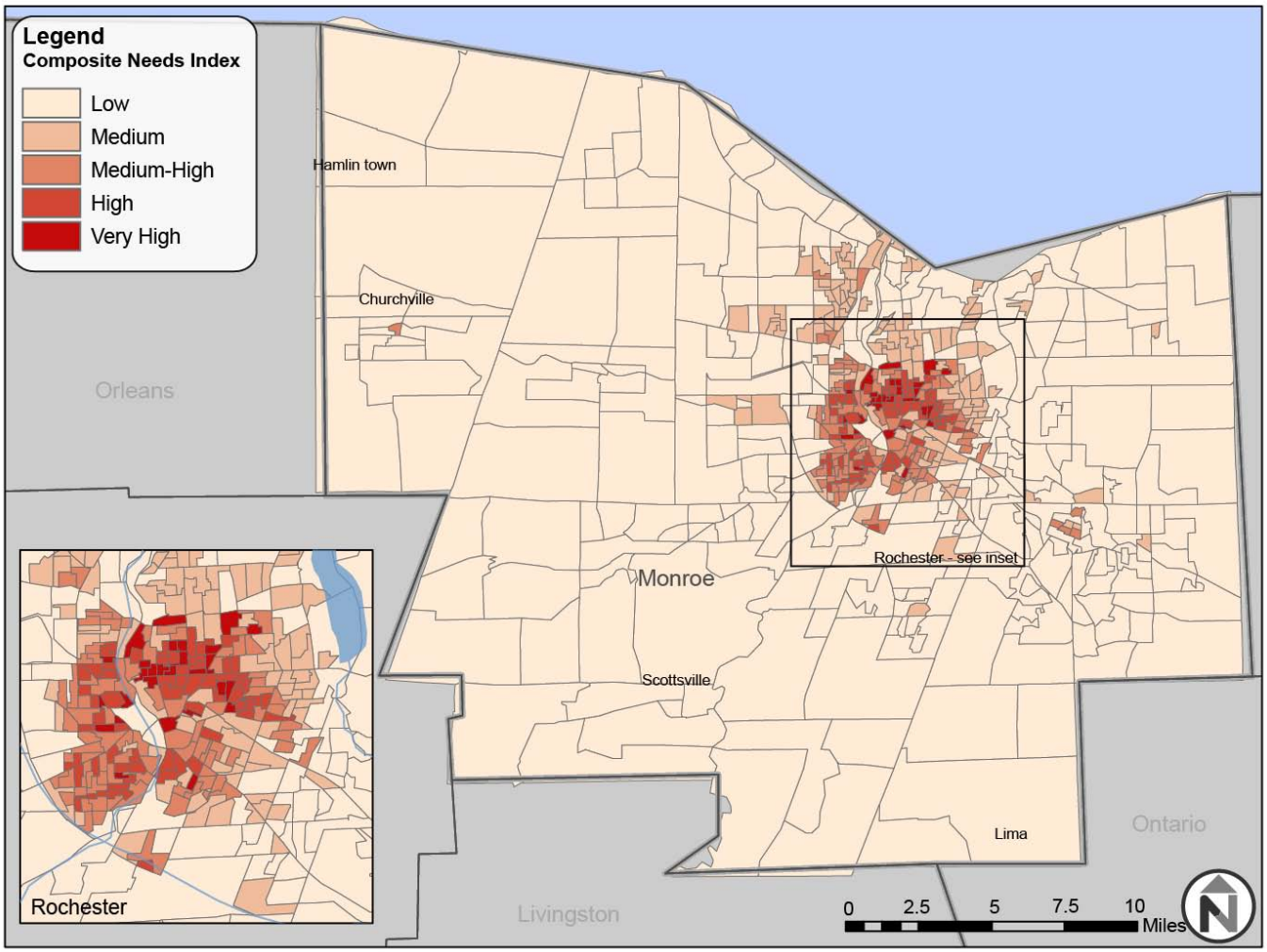
Data Sources: US Census 2000; Genesee Transportation Council

Composite Needs Index

Figure 2-9 shows the Composite Needs of the Central Region. This metric combines the older adults, persons with disabilities, and persons with low income in the region to determine level of need by block group. Similar to the patterns seen in the previous maps, this map shows that the highest needs areas are in Downtown Rochester, especially the block groups in the northern portion of the city and also west of the Genesee River.

This map displays the needs index for Monroe County as determined by Census data. Chapter 5 will discuss unmet needs in more detail as a result of this demographics analysis, available transit services, and feedback from county stakeholders and the focus group.

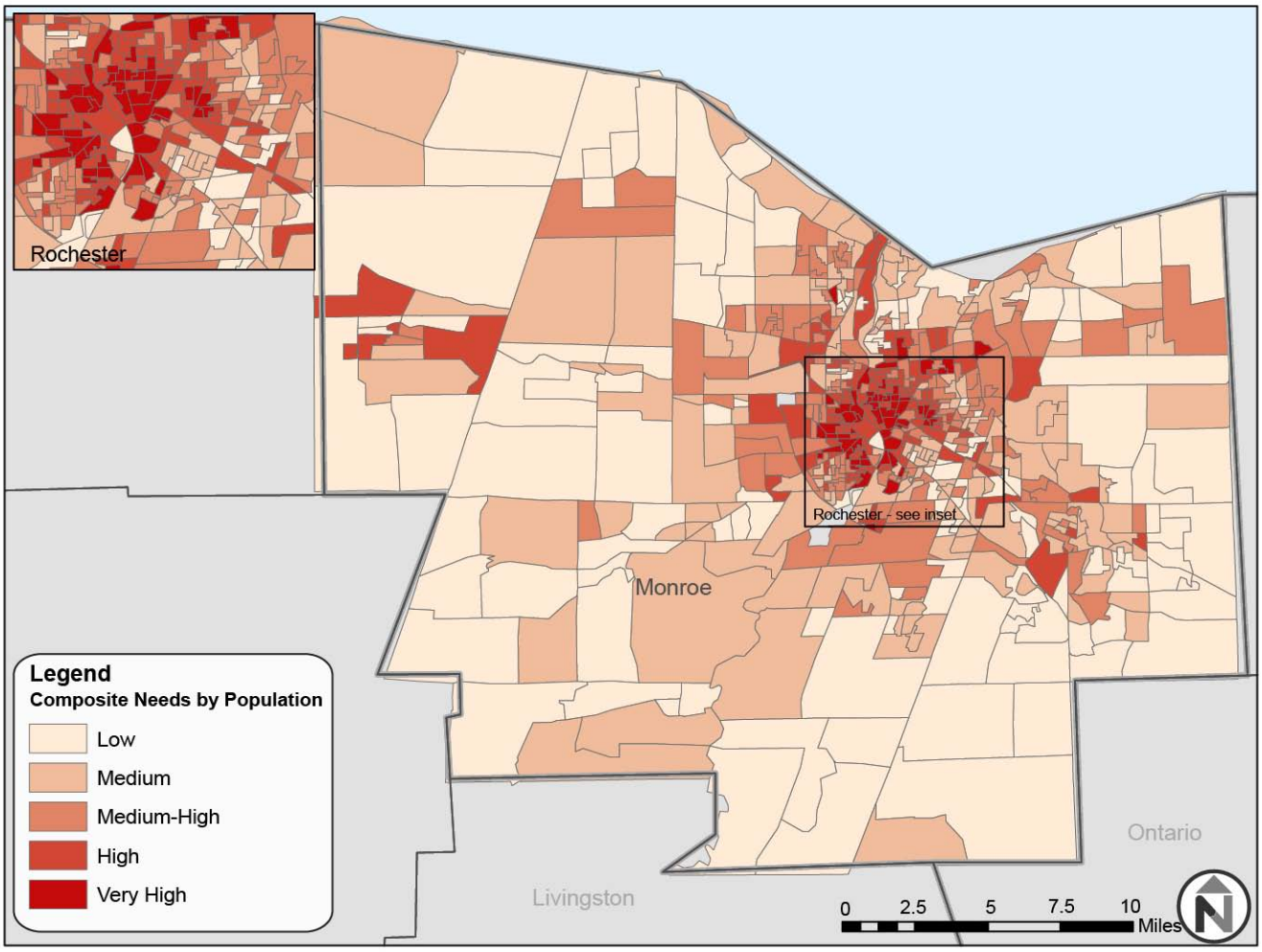
Figure 2-9 Composite Needs Index for Monroe County



Data Sources: US Census 2000; Genesee Transportation Council

The following map shows the total number of individuals listed in the older adult, persons with disabilities or persons with low income categories as a percentage of the total number of inhabitants in a block group. There is some overlap of these populations, and this map is meant to give a general idea of where need may be higher relative to the total population. This map illustrates that while density of need may be highest in Downtown Rochester, as shown in Figure 2-9, high needs also exist near Brockport, in Irondequoit and in the first ring suburbs of Rochester.

Figure 2-10 Need as a Percentage of Total Population



Data Sources: US Census 2000; Genesee Transportation Council

Eastern Region

The Eastern Region contains Ontario, Seneca, Wayne and Yates counties. The total population in the region was 251,952 in 2000 and 254,210 in 2008, a change of just under 1%. Ontario and Seneca counties are the only two counties in the nine-county region experiencing growth; Wayne and Yates are declining in population. The region's 2008 population comprises 21% of the Genesee-Finger Lakes Region's total population.

The Eastern Region overall had a slightly higher percentage of older adults (14%) and persons with disabilities (18%) than the nine-county region (13%, 17.5%), New York State (12.9%, 19%) and the US (12.4%, 17.7%). But the Eastern Region had a slightly lower percentage (10.1%) of persons with low income than the region (10.3%), the state (14.2%) and the nation (12%), and a much lower percentage of households without a vehicle (7.8% to regional 9.8%, state 29.7%, and nation 10.3%).

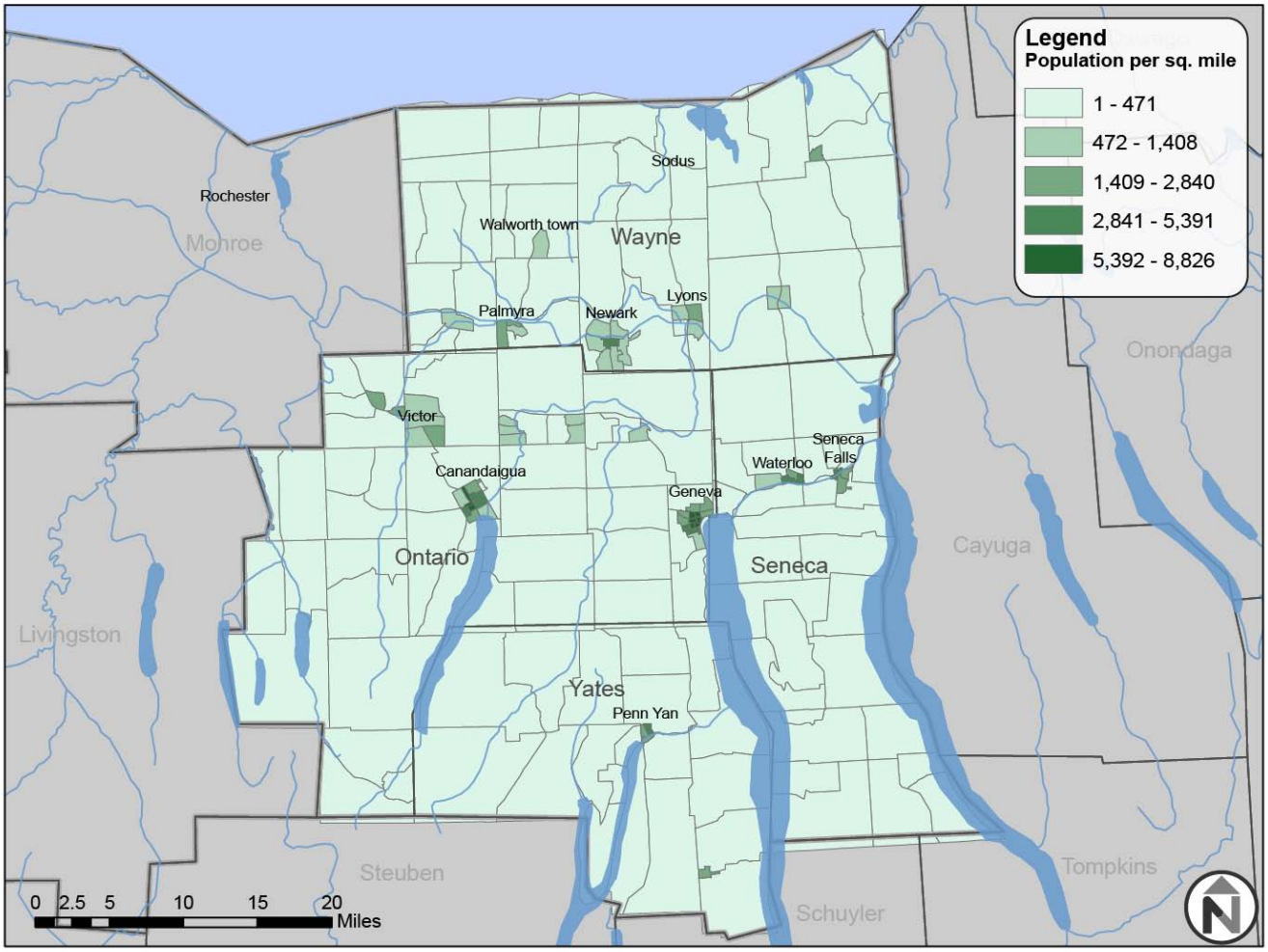
Figure 2-11 Target Populations in Counties of the Eastern Region (2000)

County	Total Population (2000 Census)	% Over 65	% Persons with Disability	% Persons with Low Income	% Households without Vehicle
Ontario	100,224	13.2%	16.6%	7.3%	7.3%
Seneca	33,342	15.1%	19.2%	11.5%	7.7%
Wayne	93,765	12.1%	16.6%	8.6%	6.4%
Yates	24,621	15.6%	19.6%	13.1%	9.9%
Total	251,952	14.0%	18.0%	10.1%	7.8%
Region	1,199,588	13.0%	17.5%	10.3%	9.8%
New York State	18,976,457	12.9%	19.0%	14.2%	29.7%
United States	281,421,906	12.4%	17.7%	12.0%	10.3%

Data Sources: US Census 2000

Population density in the Eastern Region is fairly sparse, with several pockets of density in Canandaigua and Geneva, and smaller densities in Victor, Newark, Waterloo, Seneca Falls, and Penn Yan.

Figure 2-12 Population Density in the Eastern Region (2000)

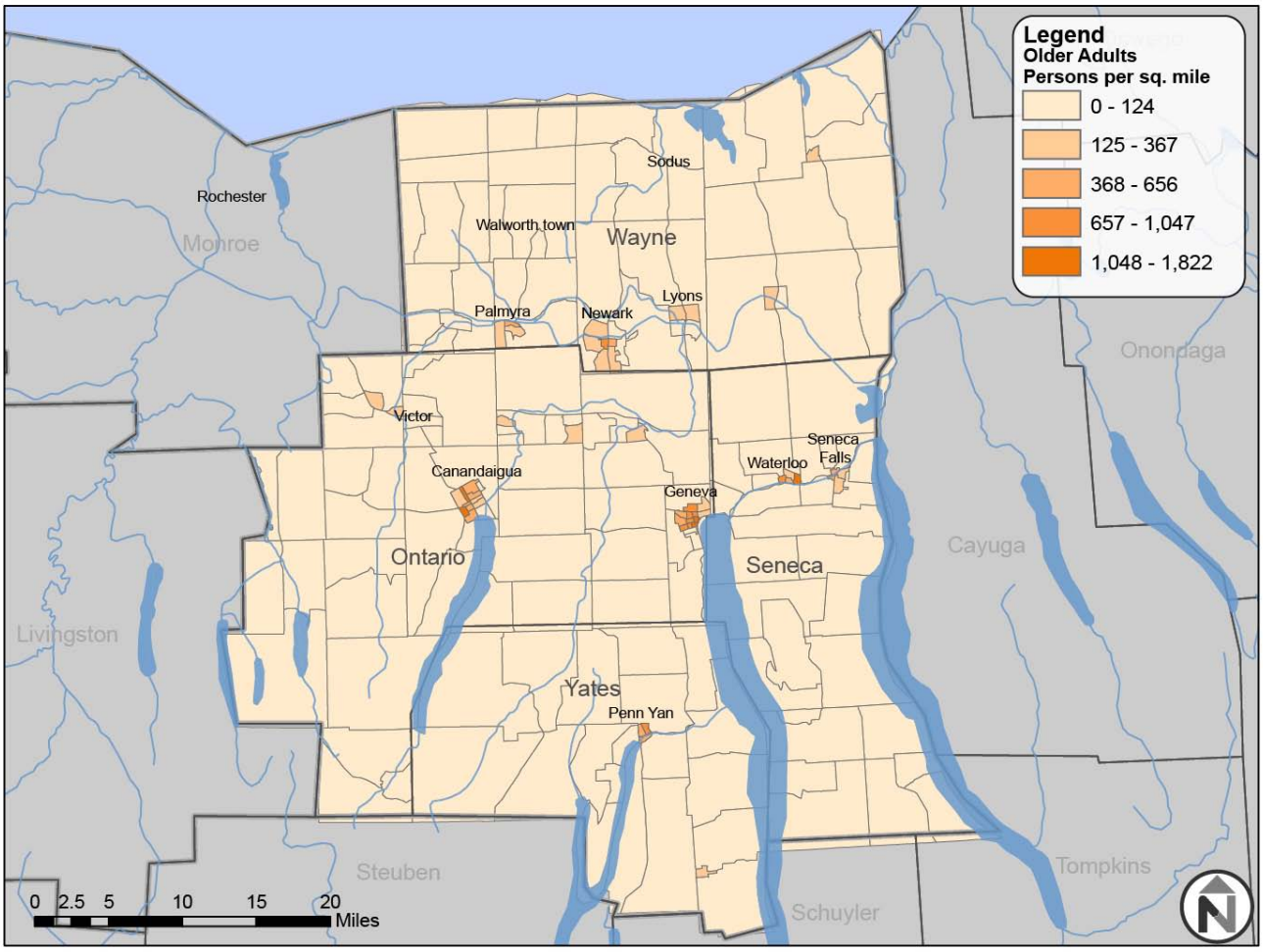


Data Sources: US Census 2000; Genesee Transportation Council

Older Adults

The density of older adults by block group is similar to the Eastern Region as a whole, but with a few differences. There is a lower density of older adults than overall population in several block groups in Victor, Lyons, and Waterloo. Towns with the highest concentrations of older adults are Canandaigua, Geneva, Waterloo, and Newark.

Figure 2-13 Older Adults in the Eastern Region (2000)

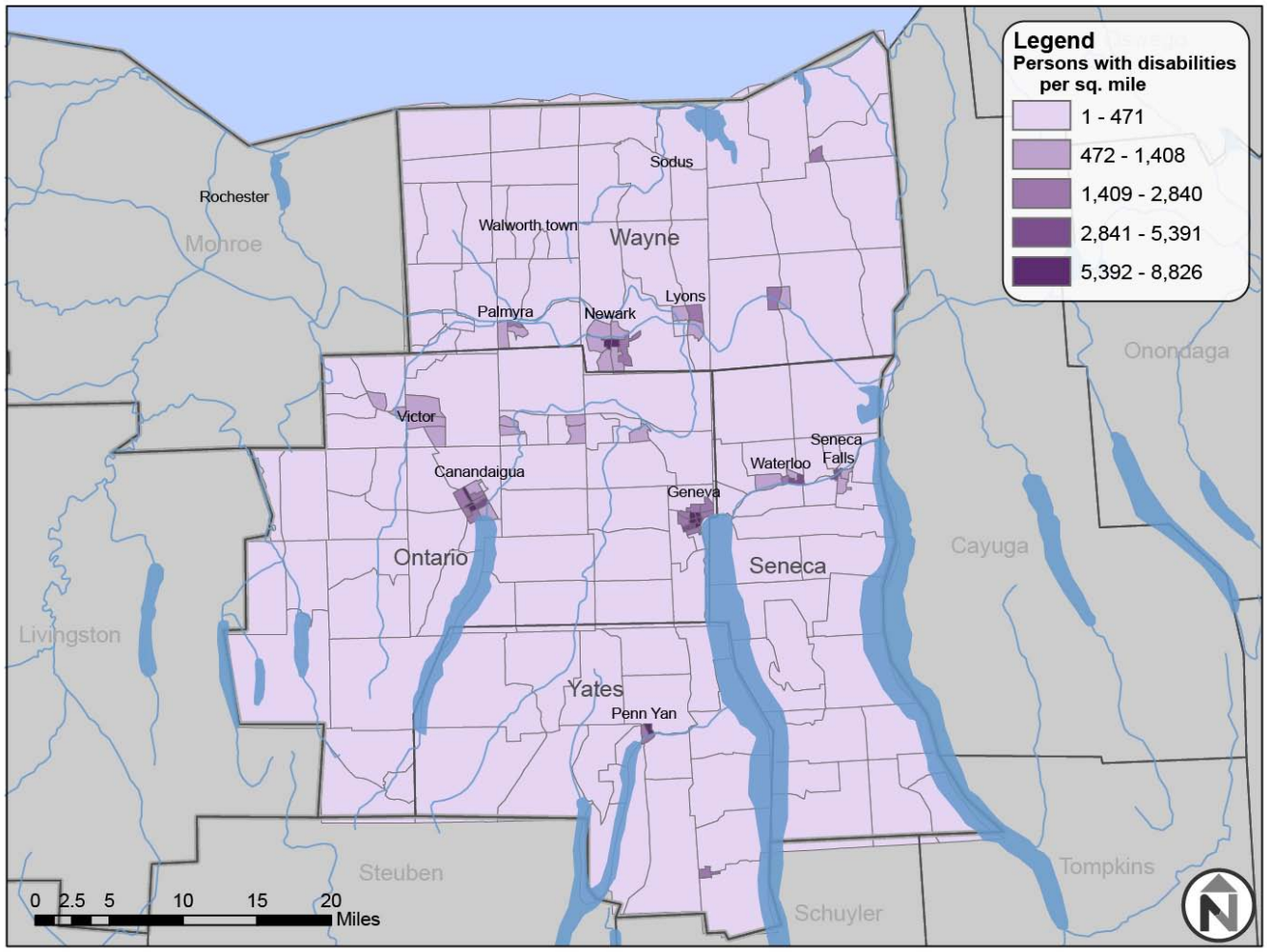


Data Sources: US Census 2000; Genesee Transportation Council

Persons with Disabilities

Block groups with the highest densities of persons with disabilities are in Geneva and Newark, with pockets of high concentration in Penn Yan and Canandaigua. In comparison to the overall population density, there are fewer block groups in Victor with high densities of persons with disabilities, and slightly fewer surrounding Geneva, though Geneva itself has high concentrations.

Figure 2-14 Persons with Disabilities in the Eastern Region (2000)

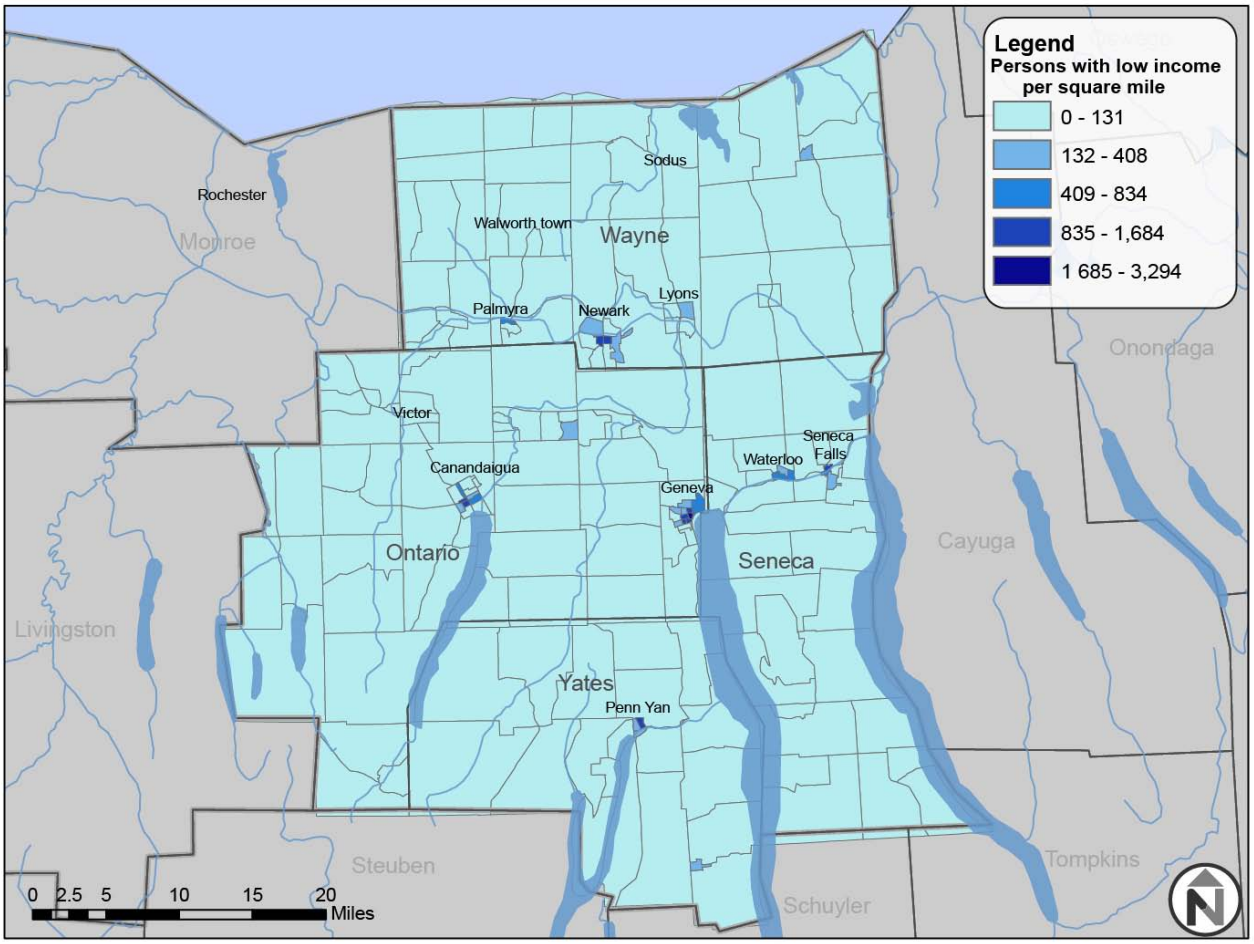


Data Sources: US Census 2000; Genesee Transportation Council

Persons with Low Income

The towns with the highest densities of persons with low income are Geneva, Penn Yan, Seneca Falls, and Newark. There are several block groups in Canandaigua and Waterloo with higher densities relative to the surrounding block groups, as well. Victor shows less density of low income individuals than overall population density, as does Palmyra and Lyons.

Figure 2-15 Persons with Low Income in the Eastern Region (2000)

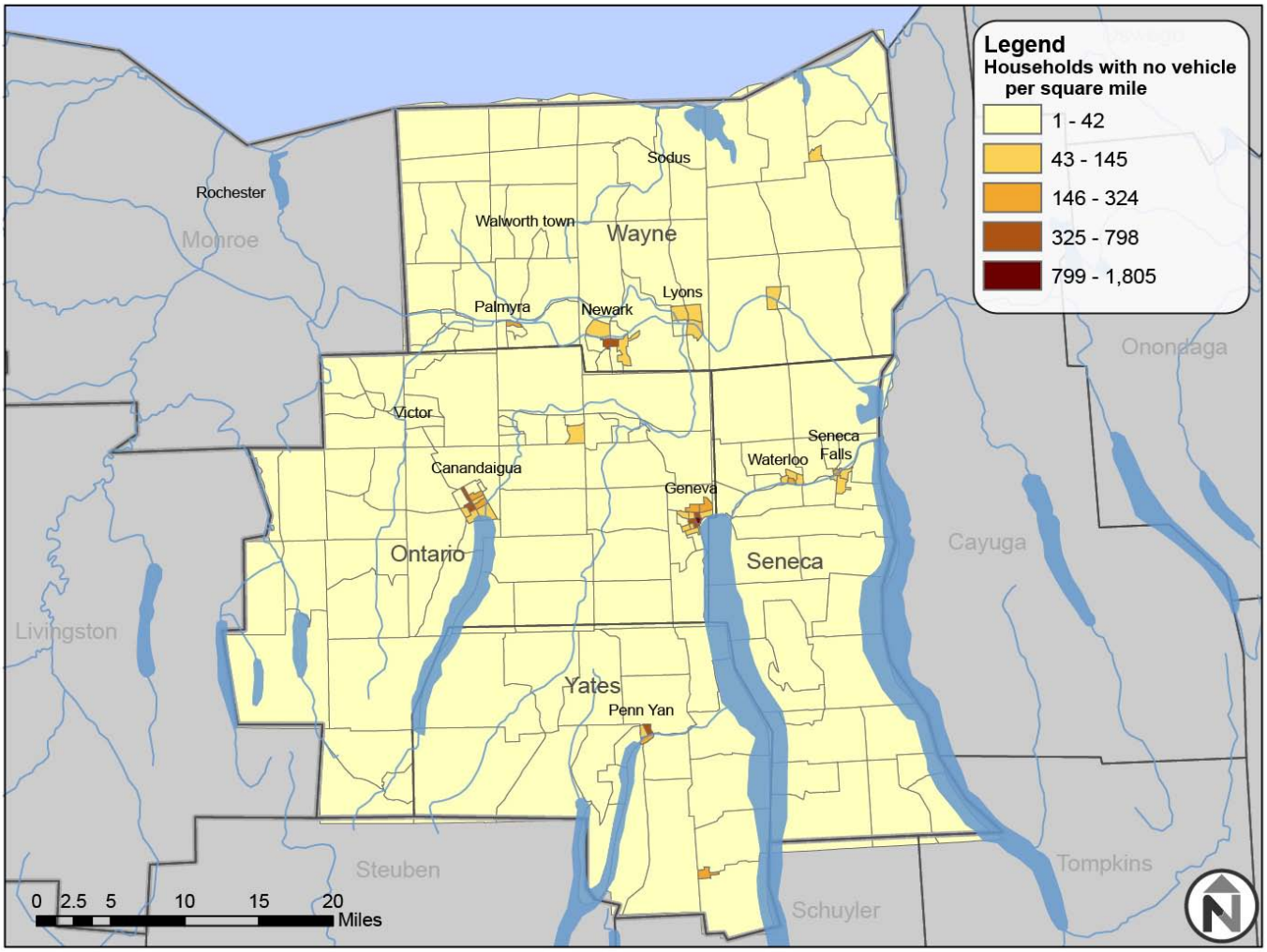


Data Sources: US Census 2000; Genesee Transportation Council

Households with No Vehicle

Block groups in Canandaigua, Geneva, and Penn Yan showed high densities of households without access to a vehicle. Some towns that showed high population densities overall, such as Victor, Palmyra, and the outskirts of Canandaigua, showed less density of households without a vehicle.

Figure 2-16 Households with No Vehicle Available in the Eastern Region (2000)

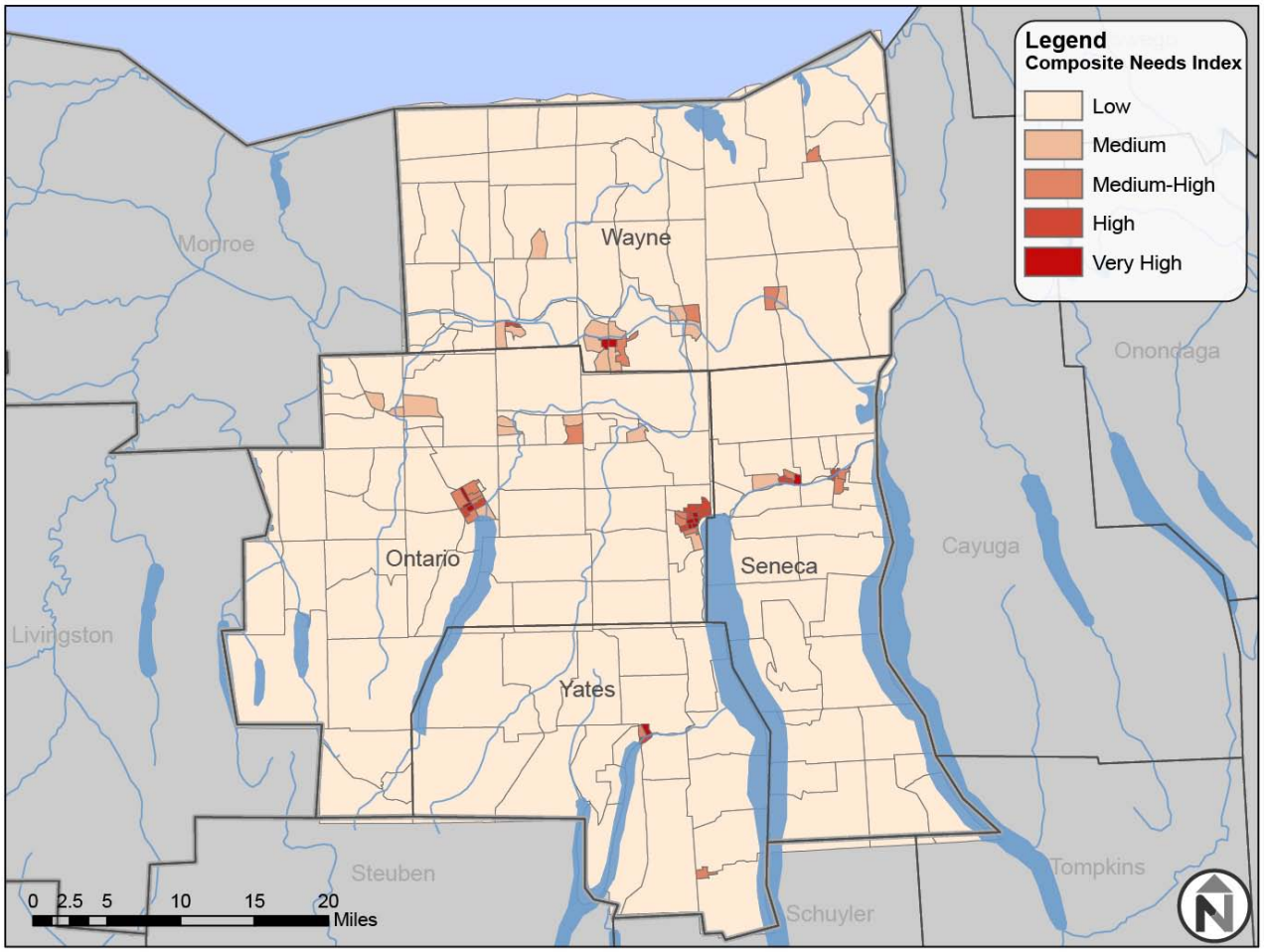


Data Sources: US Census 2000; Genesee Transportation Council

Composite Needs Index

In the Composite Needs Index, the towns with the most block groups of high need density are Canandaigua, Geneva, Newark, and Waterloo, with some block groups of very high concentration in Penn Yan. Still, there are likely other pockets of need in the more rural areas, but this need is diffused by very large Census block groups. Chapter 5 will further detail needs discussed in focus groups and with stakeholders, which will capture the need in rural areas not displayed in Census data.

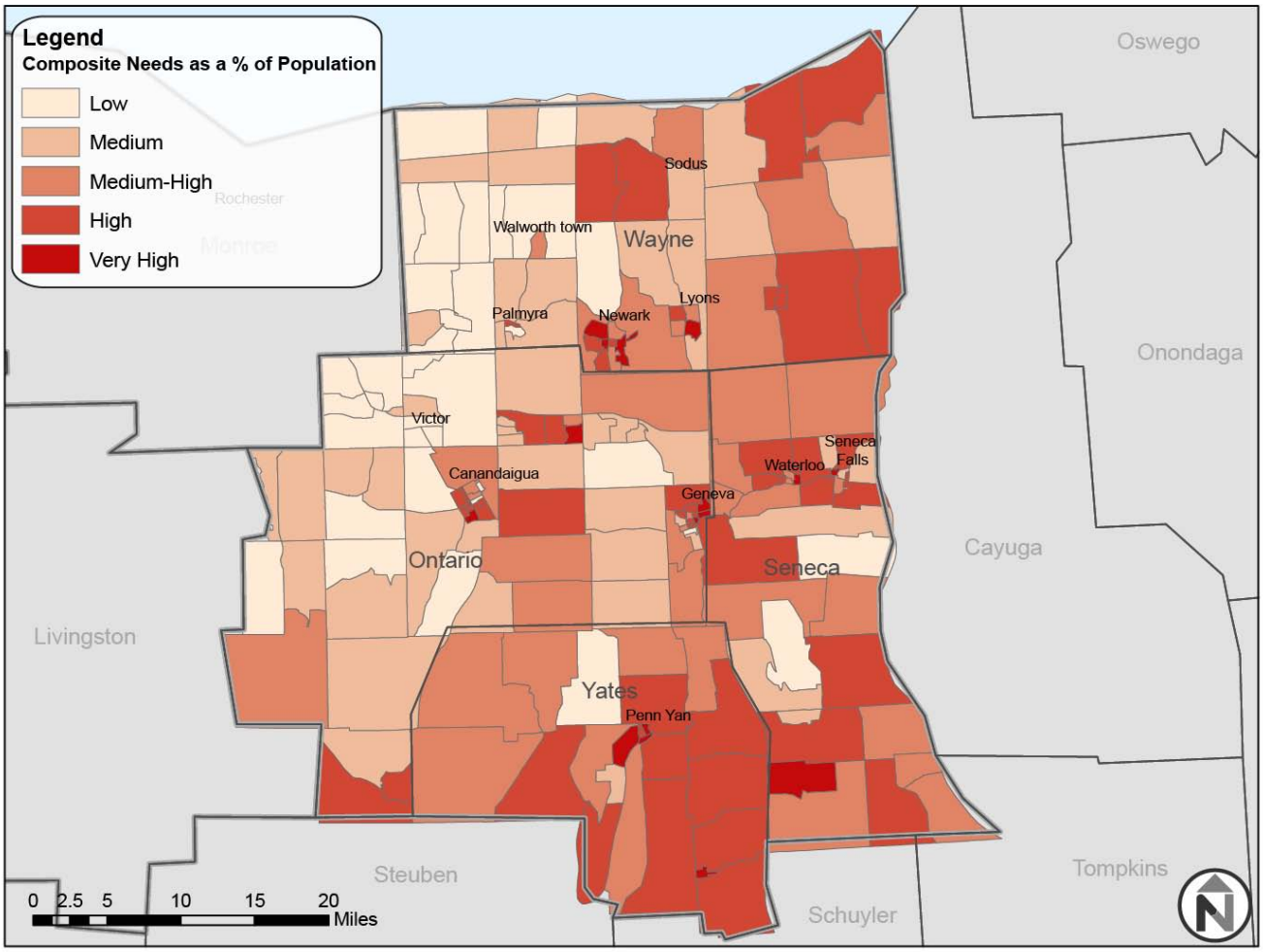
Figure 2-17 Composite Needs Index in the Eastern Region (2000)



Data Sources: US Census 2000; Genesee Transportation Council

Figure 2-18 illustrates higher areas of need in rural block groups, showing need as a percentage of the total population in the block group. Southern Yates, eastern Wayne, and many portions of Seneca County, especially the Ovid area, show high need. As mentioned, this is a general illustration of where need may exist, since the total populations of older adults, persons with disabilities and persons with low income may overlap.

Figure 2-18 Need as a Percentage of Total Population



Data Sources: US Census 2000; Genesee Transportation Council

Western Region

As of the 2008 Census estimates, 18%, or 205,477 individuals, of the nine-county regional population lives in the Western Region. The Western Region has a lower percentage of older adults (12.5%) than the region overall (13%) and lower than New York State (12.9%), but nearly the same as the nation (12.4%). However, the Western Region had a higher percentage of persons with a disability (18%) than the region (17.5%) and nation (17.7%), but still lower than the state overall (19%). A smaller percentage of the population lives under the poverty line (9.3%) compared to the region (10.3%), state (14.2%) and nation (12%). Far fewer households do not have access to a vehicle in the Western Region (6.3%) than in the nine-county region (9.8%), state (29.7%) or nation (10.3%).

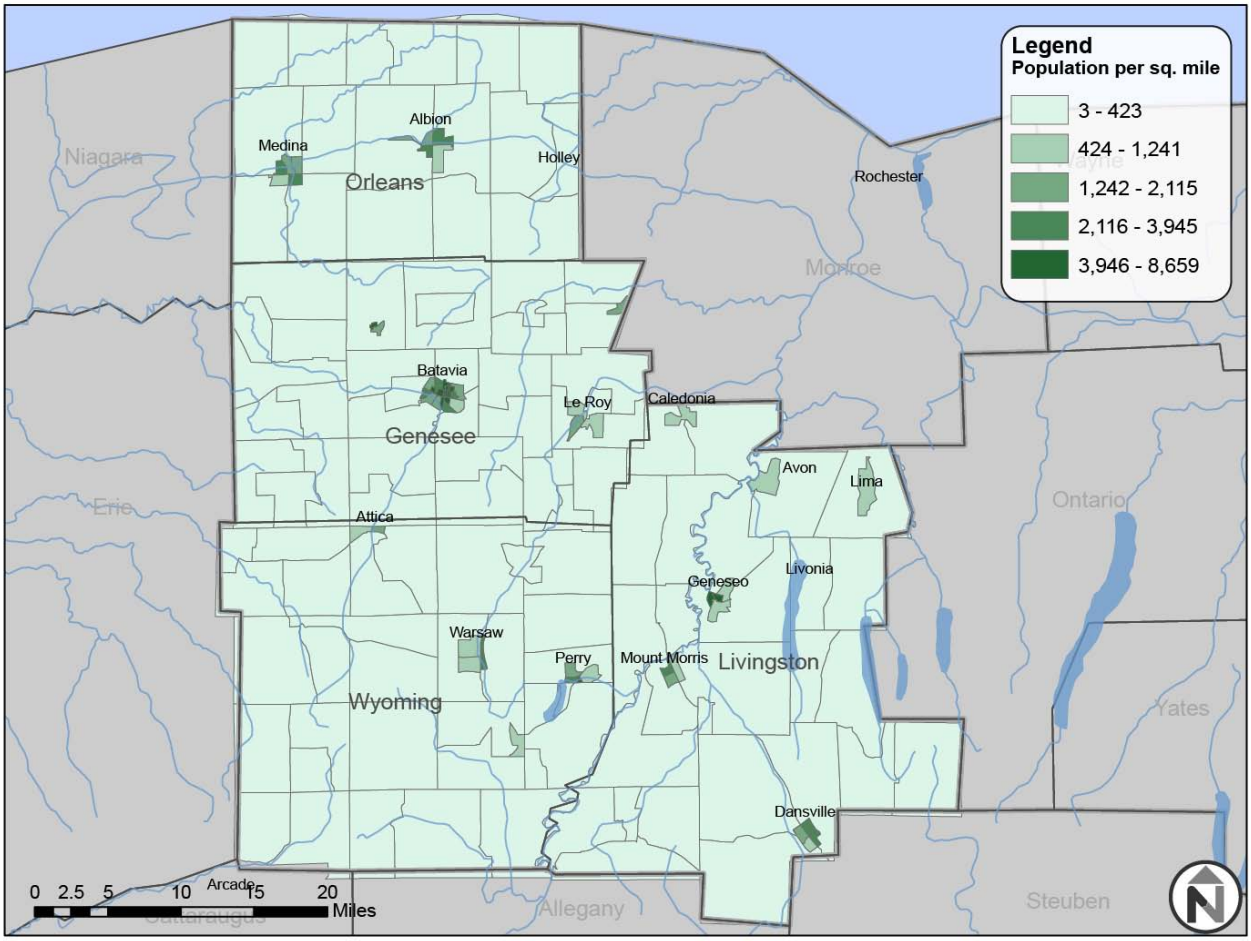
Figure 2-19 Target Populations in Counties of the Western Region (2000)

County	Total Population (2000 Census)	% Over 65	% Persons with Disability	% Persons with Low Income	% Households without Vehicle
Genesee	60,370	14.3%	17.0%	7.6%	7.5%
Livingston	64,328	11.4%	17.2%	10.4%	5.7%
Orleans	44,171	12.4%	19.8%	10.8%	6.2%
Wyoming	43,424	12.1%	17.9%	8.4%	5.9%
Total	212,293	12.5%	18.0%	9.3%	6.3%
Region	1,199,588	13.0%	17.5%	10.3%	9.8%
New York State	18,976,457	12.9%	19.0%	14.2%	29.7%
United States	281,421,906	12.4%	17.7%	12.0%	10.3%

Data Sources: US Census 2000

The largest number of high density block groups are clustered in Batavia, with other clusters in Medina and Albion. Several high density block groups are also in Geneseo. As in the Eastern Region, rural areas have very large block groups, and pockets of population density, as well as density of transportation need, can often be obscured in the large block groups.

Figure 2-20 Population Density in the Western Region (2000)

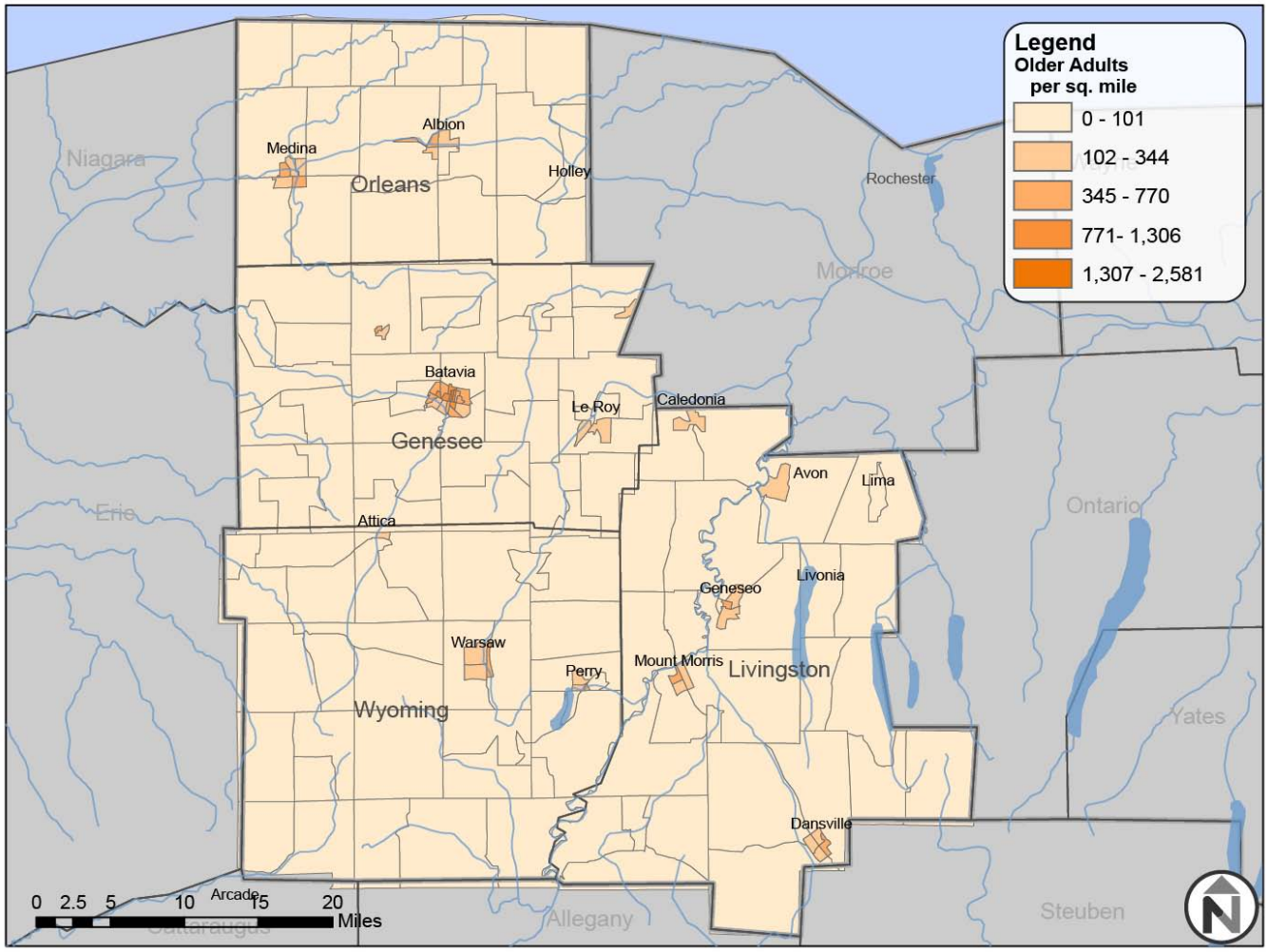


Data Sources: US Census 2000; Genesee Transportation Council

Older Adults

As with the overall population density, the main densities of older adults in the Western Region are in Batavia and Medina, with some concentration in Albion, Warsaw, Mount Morris, Geneseo, and Dansville.

Figure 2-21 Older Adults in the Western Region (2000)

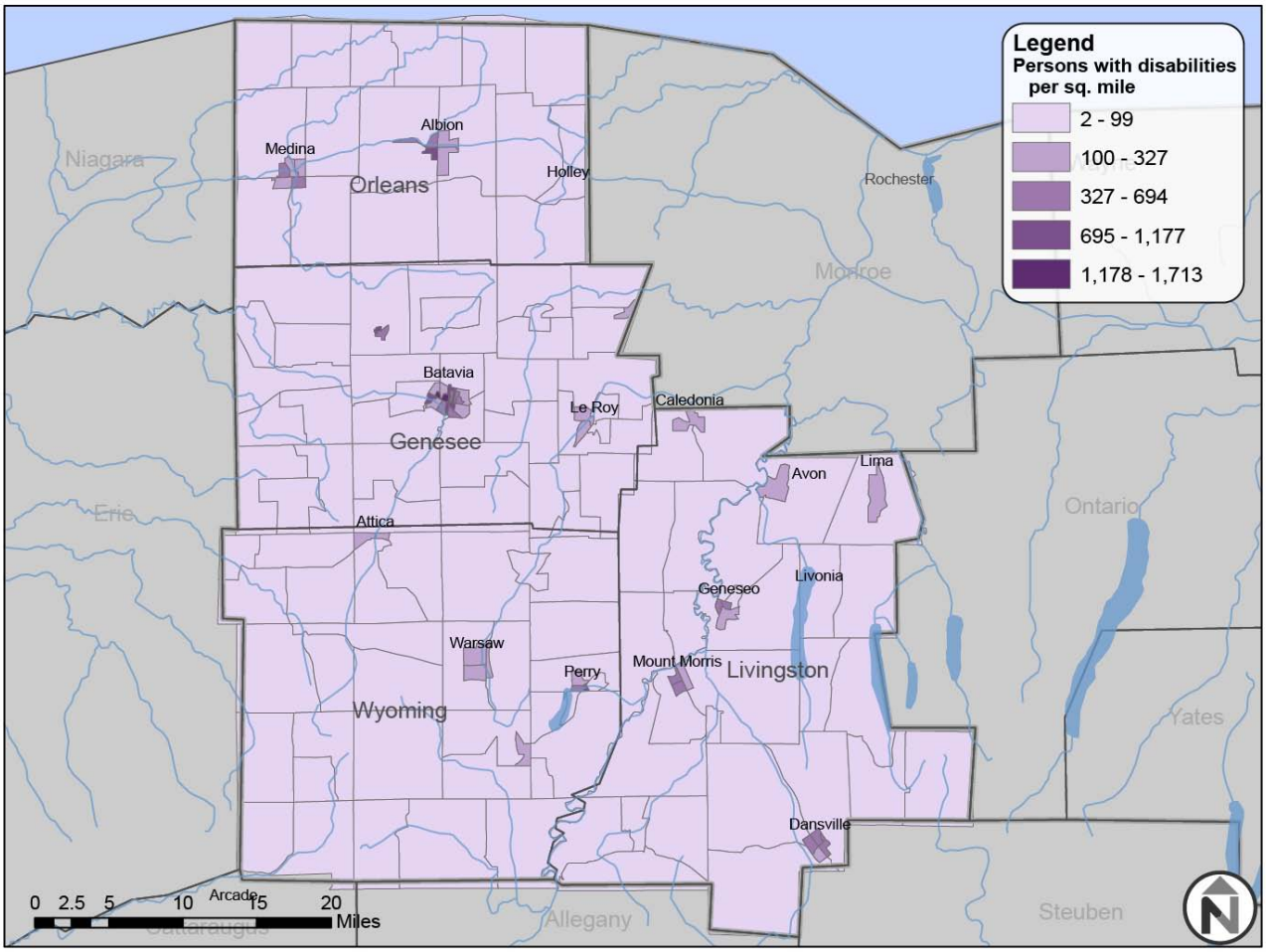


Data Sources: US Census 2000; Genesee Transportation Council

Persons with Disabilities

Albion and Batavia show several block groups with very high densities of persons with disabilities. Unlike the overall population density, there are only a few block groups in the central part of Batavia and one in southwest Albion with very high densities. There are many block groups with relatively high densities surrounding the town centers, densities, similar to the overall population density map. This suggests that the population of persons with disabilities is more concentrated in the centers of towns than at the edges of towns. Medina, Geneseo, Mount Morris, and Dansville also contain some block groups with relatively high concentrations.

Figure 2-22 Persons with Disabilities in the Western Region (2000)

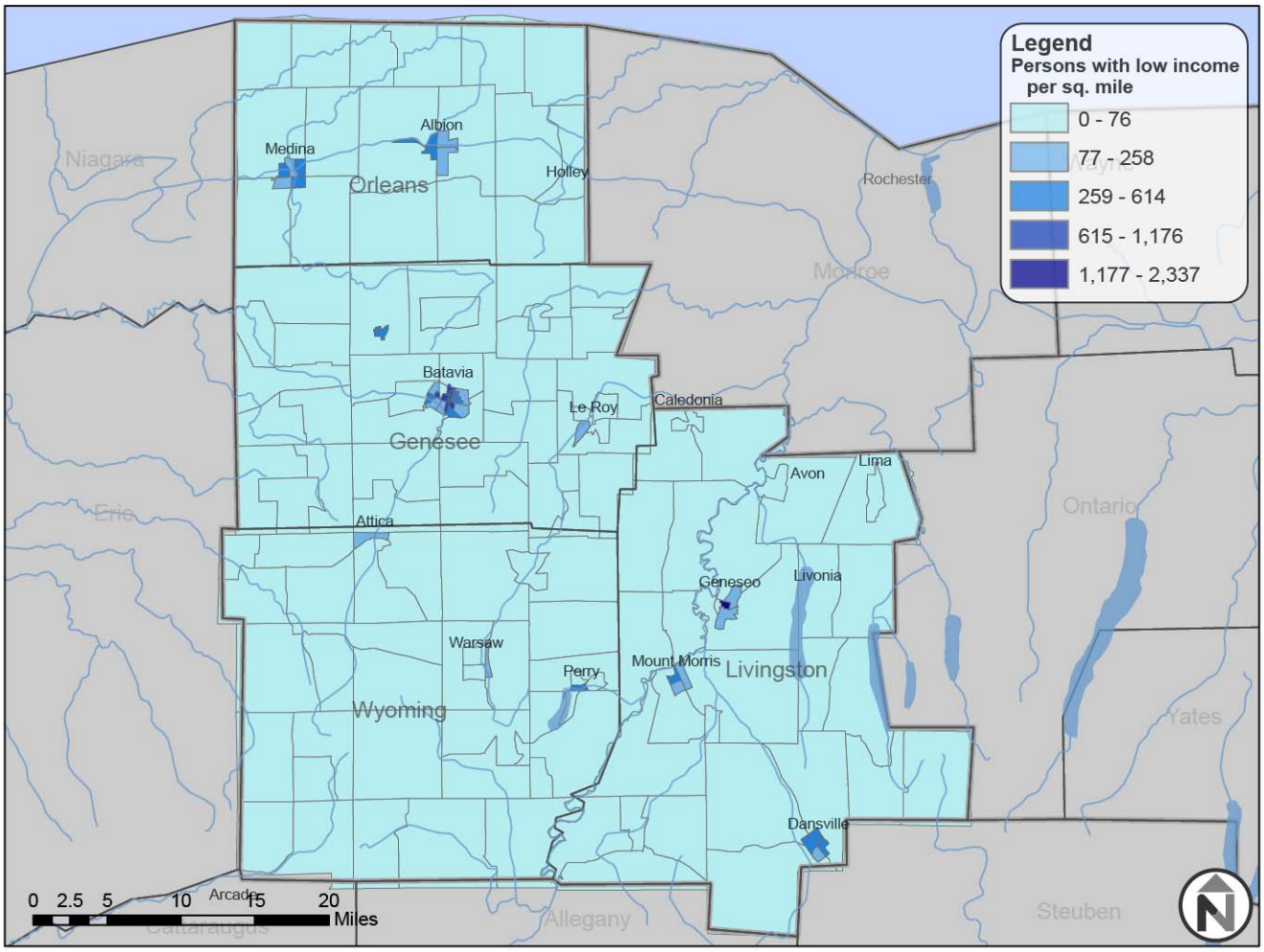


Data Sources: US Census 2000; Genesee Transportation Council

Persons with Low Income

The block groups with the highest percentages of persons with low income are in Batavia and Geneseo, with other pockets of relatively high density in Dansville, Albion, and Medina. Warsaw has a relatively high population density compared to its surrounding block groups, but a low density of low income individuals compared to the surrounding areas.

Figure 2-23 Persons with Low Income in the Western Region (2000)

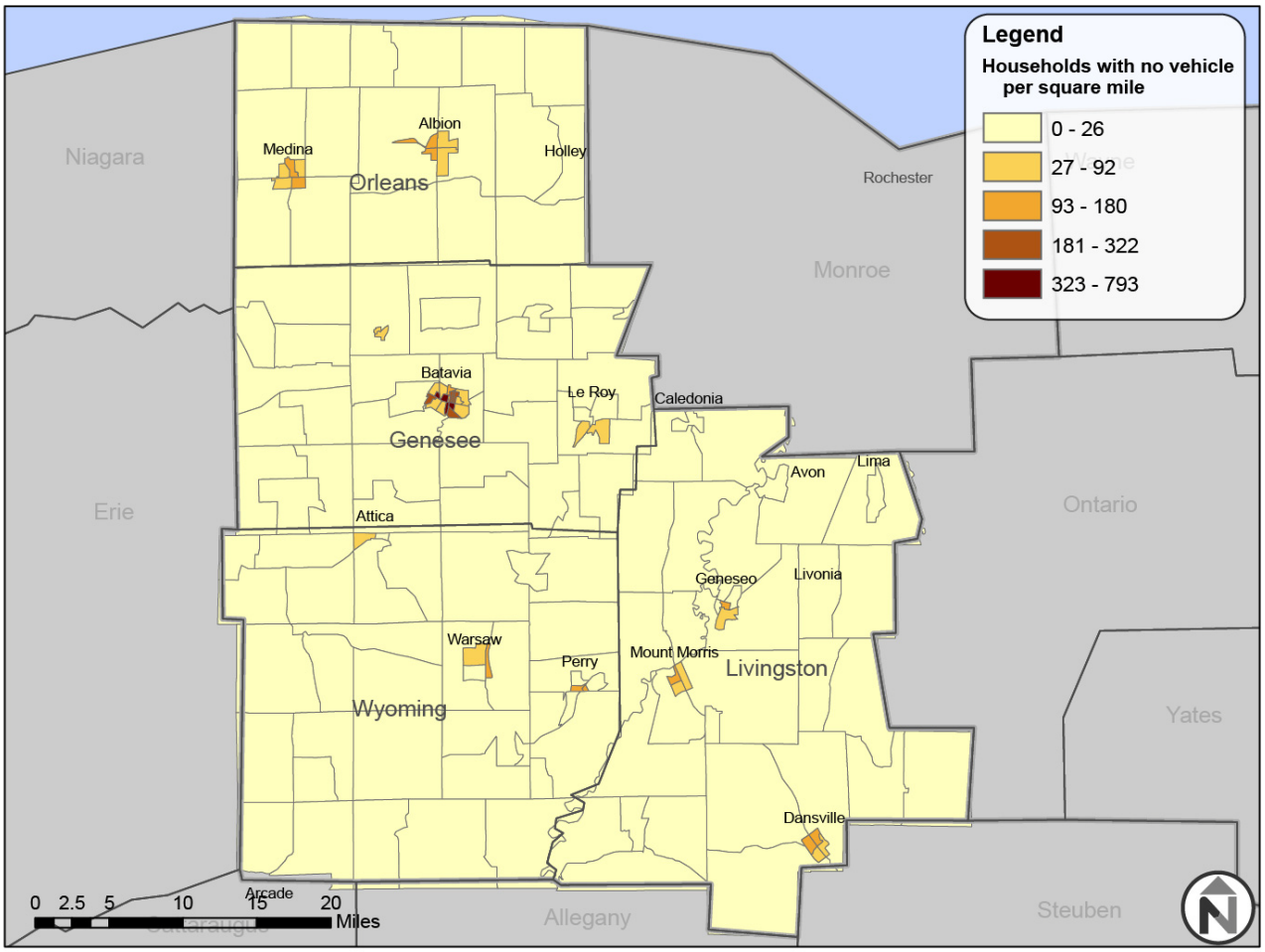


Data Sources: US Census 2000; Genesee Transportation Council

Households with No Vehicle

Nearly the only town with significant percentages of households with no vehicle available is Batavia. Medina, Albion, Dansville, and Mount Morris show higher percentages of households with no vehicle than the surrounding block groups, but Batavia contains block groups with a much higher percentage than the others. Within Batavia, the block groups with high percentages are clustered in the center, more concentrated than in the population density map.

Figure 2-24 Households with No Vehicle Available in the Western Region (2000)

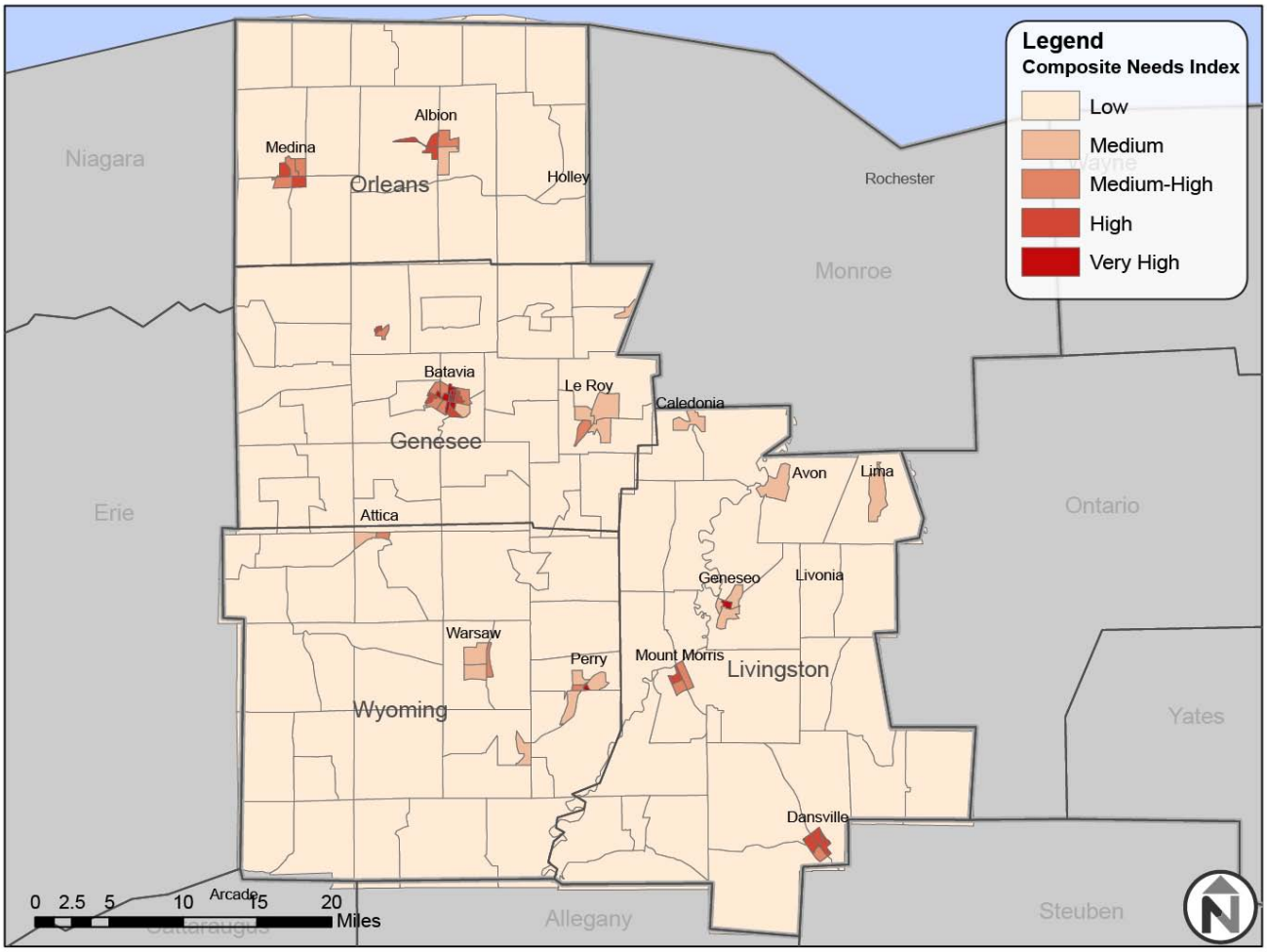


Data Sources: US Census 2000; Genesee Transportation Council

Composite Needs Index

The primary areas of need are shown in Figure 2-23 to be Batavia, Dansville, Albion, and Medina, with some high needs block groups in Mount Morris and Geneseo.

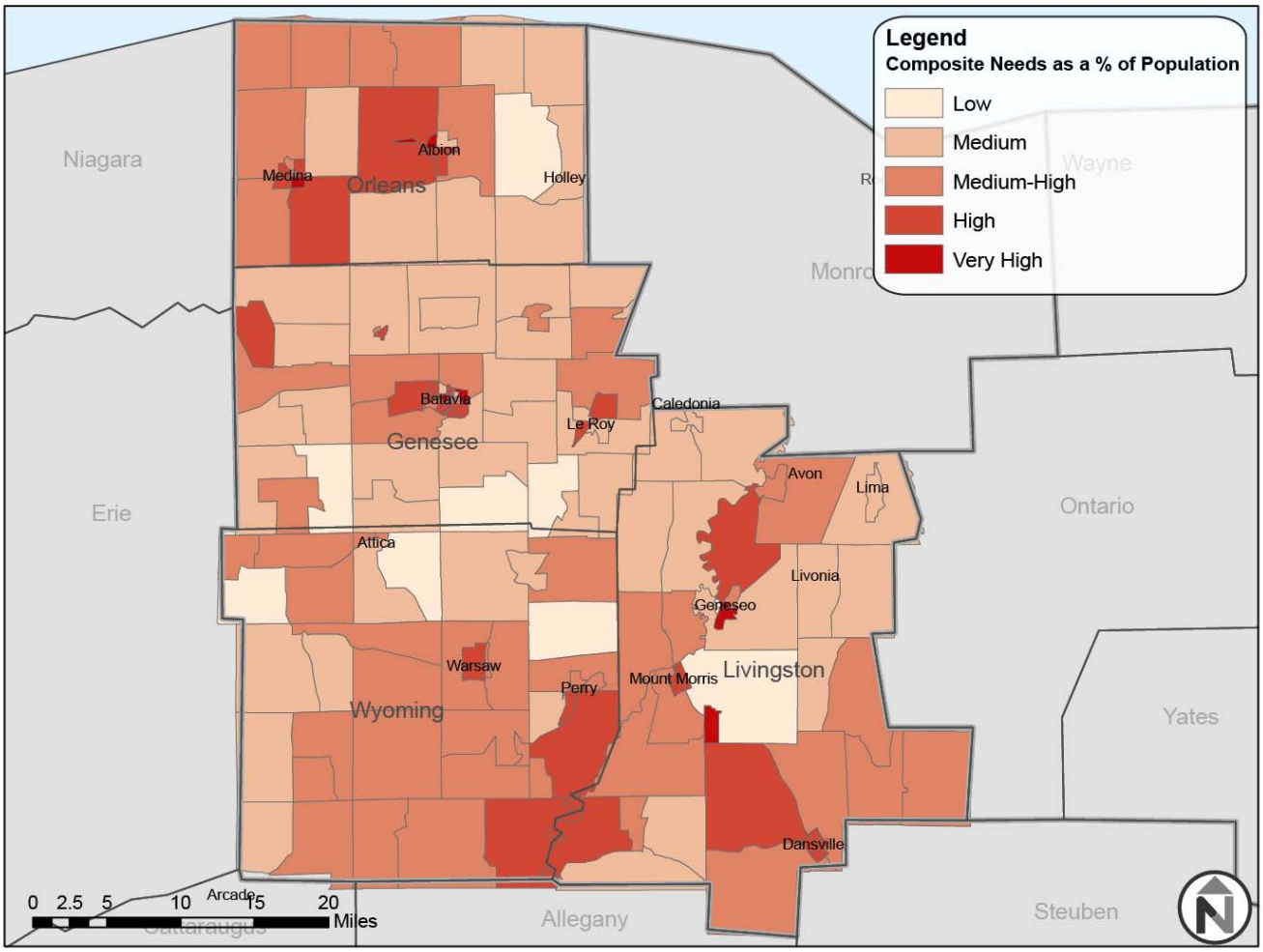
Figure 2-25 Composite Needs Index in the Western Region (2000)



Data Sources: US Census 2000; Genesee Transportation Council

Showing total target populations as a percentage of the total population in the block group, higher areas of need appear in Medina and Albion and surrounding block groups, as well as southeastern Wyoming County and southern Livingston County. Since many individuals may fall into more than one of the three target populations, this map is intended to broadly indicate potential need.

Figure 2-26 Need as a Percentage of Total Population



Data Sources: US Census 2000; Genesee Transportation Council

Chapter 3. Major Destinations

The study team mapped major destinations in each county by category. The resulting maps display the places the target populations of older adults, persons with disabilities, and persons with low income are most likely to travel. They include hospitals and medical centers, dialysis centers, human service agencies (Departments of Social Services and Offices for the Aging), senior centers, and major shopping centers. For the eight primarily rural counties in the study area, grocery stores and other retail destinations were mapped. In Monroe County, where retail destinations are much greater in number, only the major shopping malls were mapped.

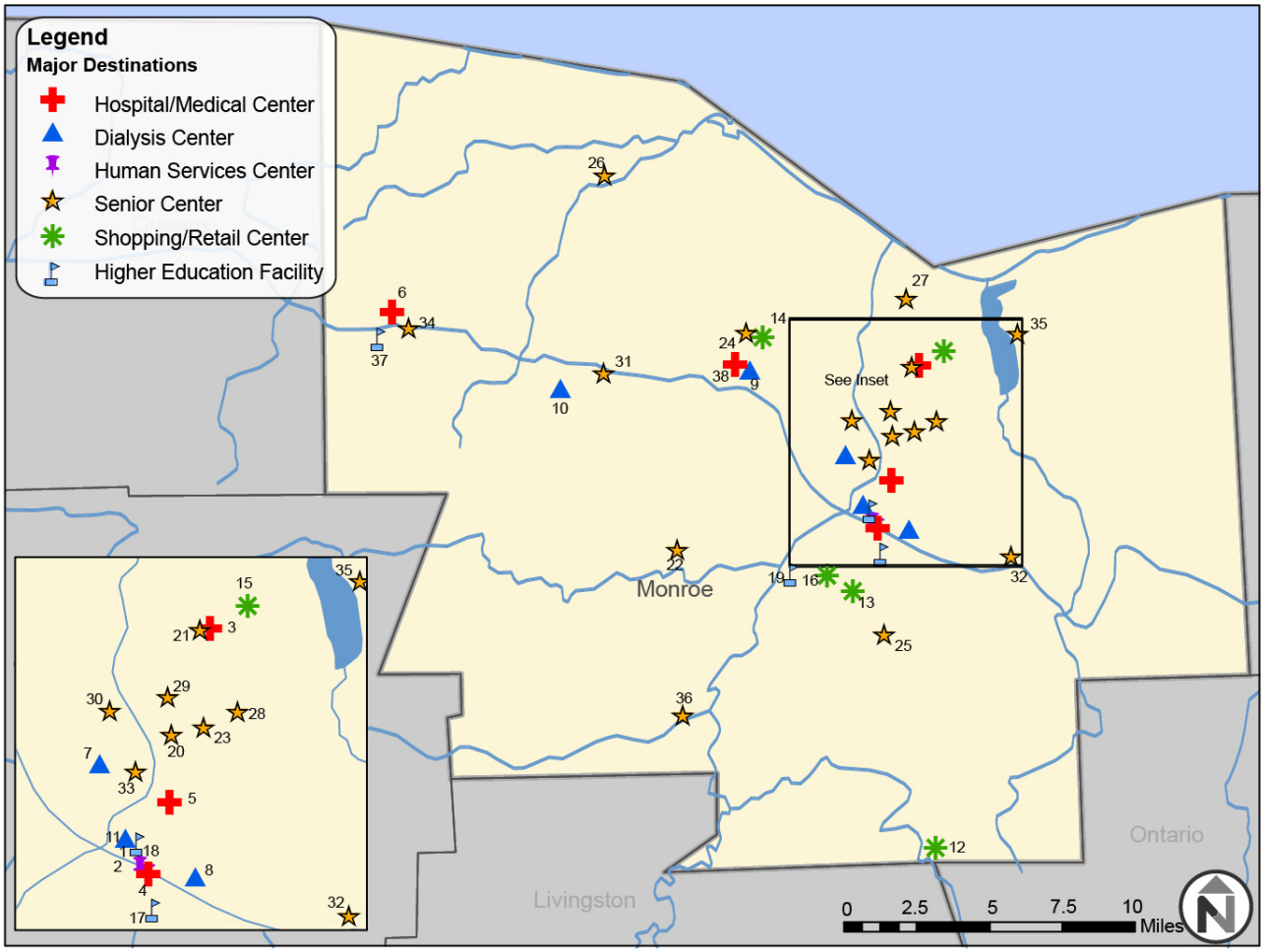
Key Findings

- Destinations are clustered in major towns and villages within each county.
- Some counties have no dialysis centers (Seneca, Wayne, Wyoming and Yates) or hospitals (Seneca), and residents must travel to other parts of the region or outside of the region for these services.
- Many major services are located across county boundaries; some individuals may not be able to access these services if they must cross a county boundary, due to regulations about transportation service areas; for instance, some individuals living in the distant suburbs of Rochester may be closer to medical services in Victor, but must be brought into Rochester instead. In some cases, an individual may travel further to access a service within their own county instead of traveling to a much closer destination nearby, but in another county.
- Many counties have one or two towns with a majority of destinations; however, some, especially Wayne County, have destinations spread across a number of small towns or villages, making transportation service difficult to plan and fund.
- Many destinations in Rochester are in the city's core, but a large number exist in the outlying suburbs and communities where less transit service is available.

Central Region

Destinations in Monroe County are primarily located in Rochester, though several important facilities like senior centers are available in the more suburban parts of the county. Three of the five dialysis centers are near Downtown, and the three primary hospitals are also in Rochester itself. Retail centers, here represented by malls, mainly fall just outside of central Rochester.

Figure 3-1 Major Destinations in the Central Region



Data Sources: Genesee Transportation Council; New York State Office for the Aging; Nelson\Nygaard

No.	Name
1	Monroe County DSS
2	Monroe County Office for the Aging
3	Rochester General Hospital
4	Monroe Community Hospital
5	Highland Hospital
6	Lakeside Memorial Hospital
7	Andrew J. Kirch Dialysis Center
8	New York Dialysis
9	Unity Dialysis Center
10	Unity Dialysis Center
11	Univ of Rochester Medical Center
12	Honeoye Falls Market Place
13	The Marketplace Mall
14	The Mall At Greece Ridge
15	Irondequoit Mall
16	South Town Plaza
17	Monroe Community College
18	University of Rochester
19	Rochester Institute of Technology

No.	Name
20	Centro de Oro Senior Center
21	CFC Older Adult Resource Center
22	Chili Senior Center
23	Community Place of Greater Rochester
24	Greece Community and Senior Center
25	Henrietta Senior Center
26	Hilton Senior Center
27	Irondequoit Senior Center
28	LIFESPAN Downtown
29	MARC of Baden St.
30	Northwest Rochester Senior Center
31	Ogden Senior Center
32	Pittsford Senior Center
33	Southwest Senior Center
34	Sweden Senior Center
35	Webster Senior Center
36	Wheatland Senior Center
37	SUNY Brockport
38	Unity Hospital

Data Sources: New York State Office for the Aging; Nelson\Nygaard

Eastern Region

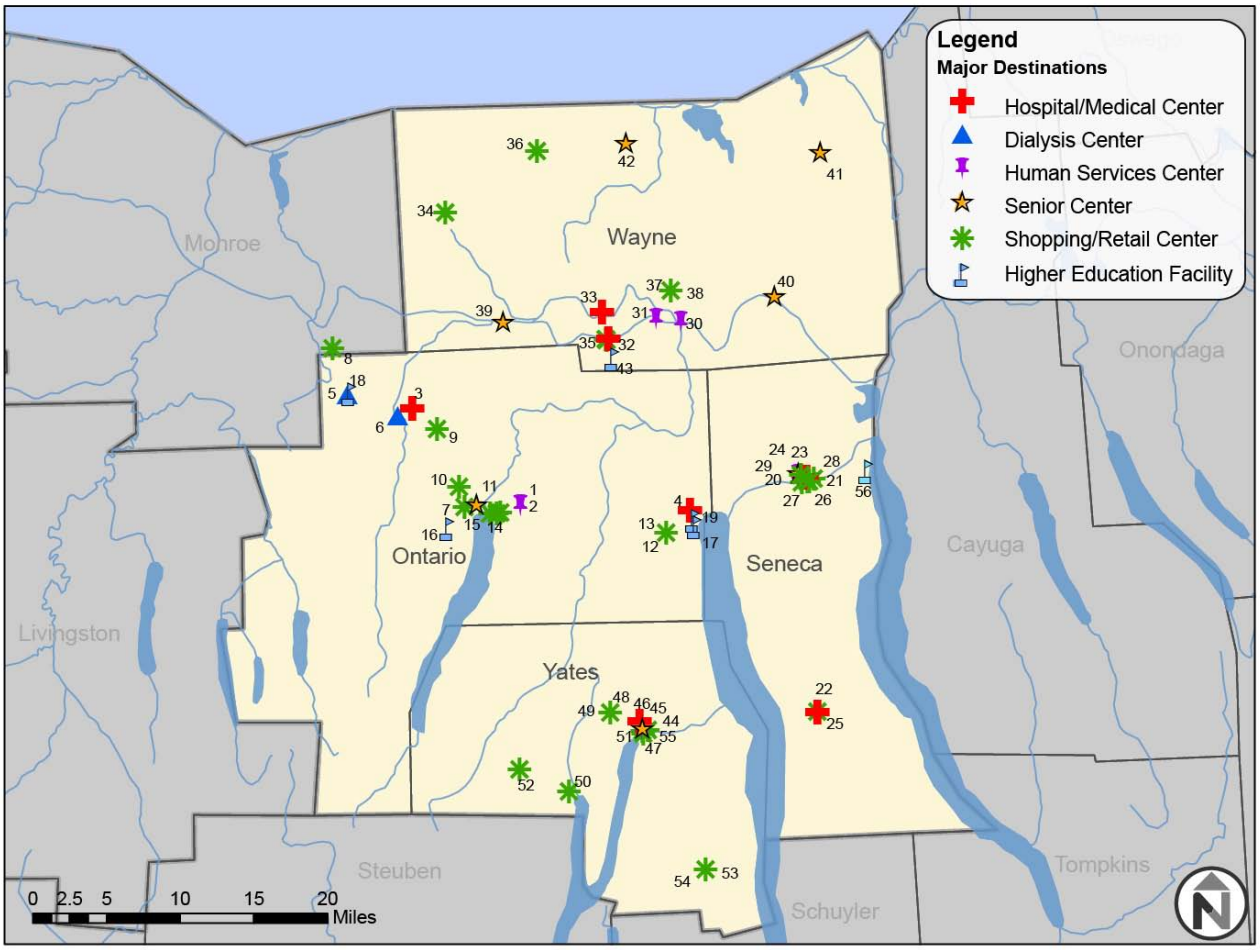
Destinations in the Eastern Region are sparser than in Monroe County, but more destinations are available in the rural parts of the four counties than in the Western Region, which is much more concentrated.

Ontario County is home to the most destinations, with the main concentration in Canandaigua. Wayne County has several towns with a few services, though in the northeast part of the county, there are few destinations, especially for shopping. Between the lakes in southern Seneca County, there are few destinations, with Seneca Falls the focus of most services. Similarly, Penn

Yan in Yates County holds most of the destinations, though a few grocery stores are located in the more rural areas.

The only dialysis centers in the Eastern Region are in Ontario County, close to the Monroe County border. There are dialysis centers outside of the study area in Auburn (Cayuga County) and Ithaca (Tompkins County), but no other facilities available to residents of Wayne, Seneca, and Yates counties. Several medical centers are available in all but Seneca County, though, not all specialized services are available in these facilities. Some specialized services likely require a trip into Rochester, Syracuse or Ithaca.

Figure 3-2 Major Destinations in the Eastern Region



Data Sources: Genesee Transportation Council; New York State Office for the Aging; Seneca County Planning Department; Nelson\Nygaard

No.	Name
1	Ontario County DSS
2	Ontario County Office for the Aging
3	Thompson Health: Urgent Care Center
4	Geneva General Hospital
5	Eastview Dialysis Inc
6	Finger Lakes Dialysis Center
7	Wegmans
8	Eastview Mall
9	Wade's Market
10	TOPS Friendly Markets
11	Aldi
12	Walmart Supercenter
13	BJ'S Wholesale Club
14	Rank's Iga
15	Golden Spot Senior Center
16	Finger Lakes Community College - Canandaigua
17	Finger Lakes Community College - Geneva
18	Finger Lakes Community College - Victor
19	Hobart and William Smith Colleges
20	Seneca County DSS
21	LifeCare
22	Ovid Medical Office
23	Seneca County Office for the Aging
24	Sauders Store
25	Ovid's Big M
26	Tops Food Market
27	Walmart
28	Aldi

No.	Name
29	Seneca County Senior Center
30	Wayne County DSS
31	Wayne County Office for the Aging
32	Clifton Springs Hospital & Clinic
33	Newark-Wayne Community Hospital
34	TOPS Friendly Markets
35	Save-A-Lot
36	Breens IGA
37	Wegman's
38	Aldi
39	Palmyra Senior Center
40	Clyde Senior Center
41	Wolcott Senior Center
42	Sodus Senior Center
43	Finger Lakes Community College - Wayne County
44	Yates County DSS
45	Yates County Office for the Aging
46	Soldiers & Sailors Memorial Hospital
47	P&C Food & Pharmacy
48	Aldi
49	Morgan's Grocery
50	Crooked Lake Mercantile
51	Hillcrest Bulk Foods
52	Bob & Irv's Shursave Food Shop
53	Martinis Shurfine
54	Crystal Valley Bulk Foods
55	St. Mark's Terrace
56	NY Chiro College

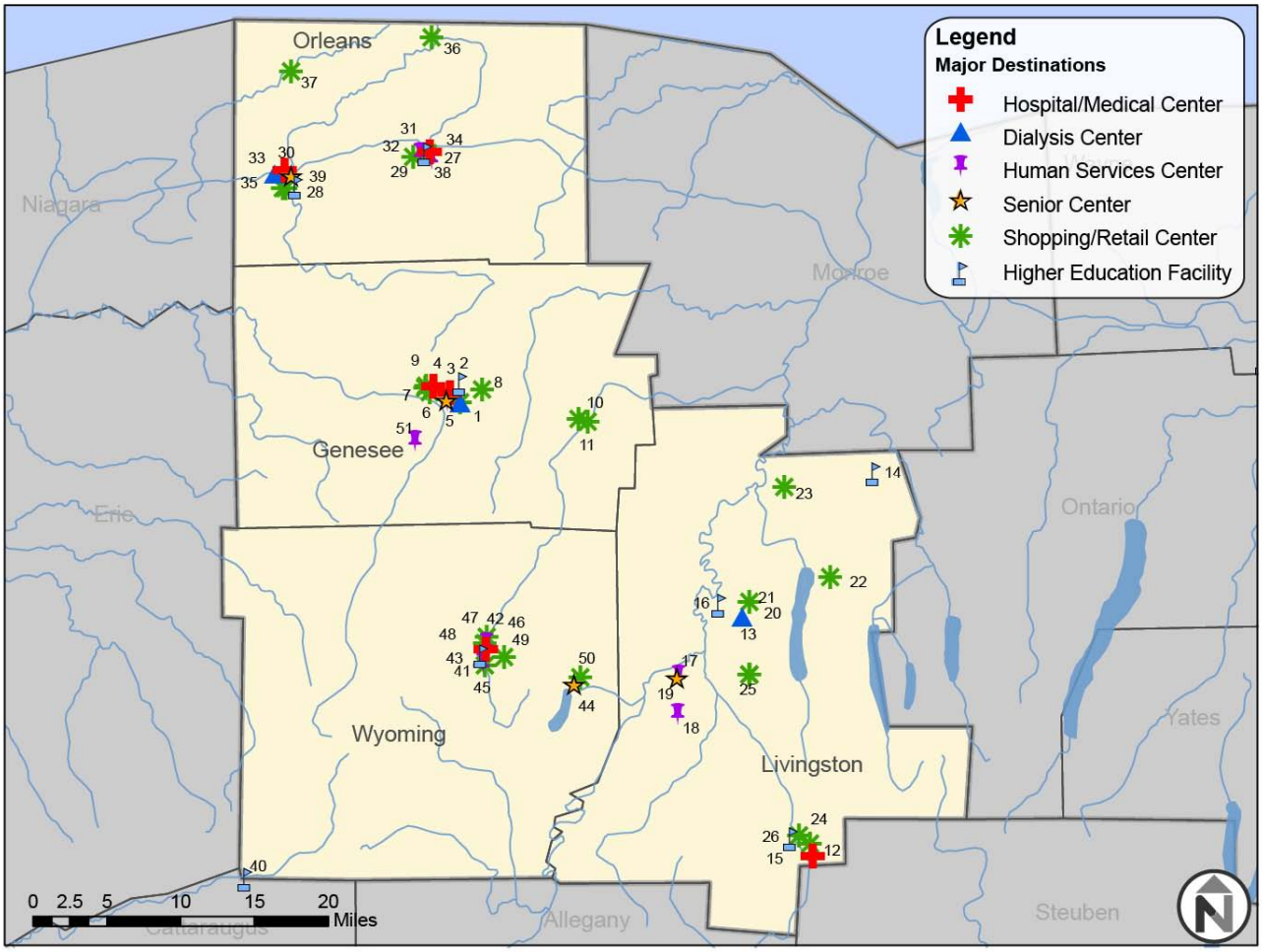
Data Sources: New York State Office for the Aging; Seneca County Planning Department; Nelson\Nygaard

Western Region

The majority of major destinations in the Western Region were in Batavia and Warsaw, with some density of destinations in Medina and Albion in Orleans County. In each county, most destinations are concentrated in the main towns or villages, with the rural areas having little access to any type of services; this is especially true in Wyoming County where destinations are exclusively contained in Warsaw and two in Perry. Genesee County is similarly focused on one city, Batavia, for most of its destinations, while Orleans County has a few in rural areas. Livingston County is slightly more polycentric.

There are three dialysis centers in the Western Region, one each in Medina, Batavia, and Dansville. There is no dialysis center in Wyoming County. While there are medical centers in each county, not all specialized services are available in these facilities, as in the Eastern Region. Many of these services require travel to Rochester or west of the study area into Buffalo.

Figure 3-3 Major Destinations in the Western Region



Data Sources: Genesee Transportation Council; New York State Office for the Aging; Livingston County Department of Social Services; Nelson\Nygaard

No.	Name
1	Medina Memorial Health Care System: Lake Plains Renal Dialysis
2	Genesee Community College - Batavia
3	VA Western Ny Healthcare System
4	United Memorial Medical Center
5	Batavia-Genesee Senior Center
6	Walmart Supercenter
7	TOPS Friendly Markets
8	Arrow Mart
9	BJ's Plaza
10	Save-A-Lot
11	TOPS Friendly Markets
12	Noyes Memorial Hospital
13	Noyes Dialysis Center
14	Genesee Community College - Lima
15	Genesee Community College - Dansville
16	SUNY Geneseo
17	Livingston County DSS
18	Livingston County Office for the Aging
19	Swan Senior Center
20	Wegmans - Geneseo
21	Aldi
22	West's Shurfine Food Mart
23	TOPS Friendly Markets
24	Save-A-Lot
25	Walmart Supercenter

No.	Name
26	TOPS Friendly Markets
27	Genesee Community College - Albion
28	Genesee Community College - Medina
29	Strong Memorial Hospital
30	Medina Memorial Hospital
31	Orleans County DSS
32	Orleans County Office for the Aging
33	Medina Senior Center
34	Walmart Supercenter
35	TOPS Friendly Markets
36	Brown's Berry Patch
37	Pennysaver Market
38	TOPS Friendly Markets
39	Aldi
40	Genesee Community College - Arcade
41	Genesee Community College - Warsaw
42	Wyoming County Community Health
43	Wyoming County DSS
44	Perry Senior Center
45	Wyoming County Office for the Aging
46	Save-A-Lot
47	TOPS Friendly Markets
48	Lantz's Bulk Foods
49	Warsaw Big M
50	Perry Food Market IGA
51	Genesee County DSS

Data Sources: New York State Office for the Aging; Livingston County Department of Social Services; Nelson\Nygaard

Chapter 4. Existing Transportation Services

This chapter describes the transportation services available in each of the three regions of the Genesee-Finger Lakes study area. Transit services are discussed as well as community transportation services. “Community transportation service” refers to human service organizations, government agencies or nonprofits that serve specific clientele, typically focusing older adults, persons with disabilities, or persons with low income. Community transportation is typically not fixed-route and caters more specifically to the needs of clients with higher levels of service and door-to-door trips.

This chapter is primarily an inventory of services; Chapter 5 describes the needs and gaps that exist among these services and in each county.

Key Findings

- Eight of the nine counties in the region have public transportation services available. Seven of these are operated through the Rochester-Genesee Regional Transportation Authority (RGRTA) and one (Ontario County) by the County itself.
- The services operated through RGRTA and Ontario County CATS operate for the most part as independent systems, though some of the transit systems work together to offer transfer points between county-based services. One or two inter-county routes are available; for instance, some routes on Rochester’s Regional Transit Service do extend into Livingston and Ontario counties. A few of the other counties cross borders to access major destinations, such as Seneca Transportation Service into Geneva in Ontario County.
- Each county has an Arc, most with a fleet of vehicles, serving the Arc’s population of persons with developmental disabilities. In some counties, the Arc utilizes the public transportation service to carry its clients to various destinations. In others, the Arc has taken on the role of a public transportation operator and carries members of special populations or the general public who are not Arc clients.
- Other nonprofits and some community-minded for-profit agencies supplement the transportation networks in most counties. Community Action organizations are important parts of the network in many counties, such as Orleans, Genesee and Wyoming. Medical Motor Service and several of its partner agencies serve many needs in Monroe County beyond what the RGRTA is able to do.
- All counties have some type of Medicaid transportation available. In some cases, the county Medicaid administrator in the Department of Social Services uses in-house transportation services where available. In others, Medicaid trips are provided by the public transportation agency or other partners.

Below is a brief description of each type of service discussed in this chapter.

Fixed-Route Bus Service

Fixed-route bus service is regularly scheduled public transportation services (i.e., bus service) that operate between two or more pre-determined points. Fixed-route transit is attractive because scheduled service means it is easy to understand and can carry the largest and

broadest range of passengers. Fixed-route services often have high hourly operating costs, but if they successfully attract passengers, costs per trip can be much lower than other services. The challenges associated with fixed-route services are that it is difficult to schedule service so that it meets the needs of all markets and most travelers will have to adjust travel patterns slightly to work within the scheduled service.

Deviated Fixed-Route

Another challenge associated with fixed-route service is that because the route is fixed, some people will have to walk to and from the service. A potential solution to this challenge is to allow vehicles to travel off-route to access locations a pre-determined distance (typically one-tenth to three-quarters of a mile) from the main corridor, i.e. deviated fixed-route. Passengers call in advance to schedule a deviation and sometimes are charged a premium fare to travel off-route. Route deviation service offers tailored services but is somewhat more expensive to operate because service schedule times are slightly longer. Marketing is typically an essential ingredient to successful deviated fixed-route service; the concept is not always familiar to passengers and many individuals need encouragement to use it.

Dial-A-Ride/Demand Response Service

Dial-A-Ride services are demand response systems that respond to passenger needs. Most systems designate a service area and respond to traveler requests within that area. Passengers must schedule their trip in advance (typically at least 24 hours) and travel between pre-determined locations. Passengers are typically charged a premium for the service. While hourly costs for Dial-A-Ride service may be lower than fixed route transit, per passenger trip costs are typically much higher. These types of services are typically preferred over fixed-route services when demand is less than 8-10 passengers per hour, depending on the service area.

Demand response services can serve a variety of populations, depending on eligibility criteria. Some serve the general public or have contracts with local jurisdictions to serve specific populations. Some also serve as the ADA paratransit provider.

ADA law requires that any public transit agency providing fixed route service must also accommodate the needs of persons with disabilities, typically through a demand response service, also called a “complementary” service. Typically, agencies have an application process to determine eligibility for ADA paratransit, which sometimes involves an individual’s doctor or a physical evaluation.[2]

Flex-Services

Flex-Route service is a hybrid of traditional fixed-route service and demand responsive service. At one or both ends, buses provide curbside pick-ups and drop-offs within designated Flex-Route service areas on a demand-responsive basis. In other locations, Flex-Route service operates on a fixed schedule in the same manner as traditional bus service. This allows scheduled connections to be made to and from other services. Traditional features of Flex-Route service include one or more designated stops with scheduled arrivals and departures. Flexible features

[2] “Paratransit” can also be used as a blanket term for any system that is not fixed route, including taxis, demand response, and ADA services.

include curb-to-curb[3] service within the Flex-Service area. Flex-Routes can be an effective way to provide service to areas where population and employment densities make traditional fixed route service difficult. The demand-responsive feature of the service allows a larger area to be served and improves the attractiveness of public transportation.

Rochester-Genesee Regional Transportation Authority (RGRTA)

The Rochester-Genesee Regional Transportation Authority (RGRTA) is the regional transportation authority covering the nine-county study area. It is an umbrella organization that oversees the Regional Transit Service (RTS) in Rochester as well as six subsidiary regional systems in Genesee, Livingston, Orleans, Seneca, Wayne and Wyoming counties. In 2010, the RGRTA served more than 17.7 million trips per year across all systems; the vast majority (95% or 16.8 million) of these trips were within the RTS system.

Central Region

The Regional Transit Service is the public transit system serving the City of Rochester and parts of Monroe County. Complementary ADA paratransit service is provided by Lift Line. Monroe County also has a mobility manager who works with several organizations in the county.

Transit Services

Regional Transit Service (RTS)

The Regional Transit Service (RTS) is the public transit system serving the greater Rochester area and parts of Monroe County. RTS operates approximately 40 routes in its service area of the City of Rochester and surrounding suburbs, with a fleet of 253 buses and over 590 employees. Ridership on RTS increased last year, totaling 16,825,791 trips in 2009-2010, making 2010 its year of highest ridership in the last two decades.

RTS operates on Monday-Friday from 5:00 AM to 1:00 AM and on Saturdays and Sundays from 6:00 AM to 12:00 AM. The adult cash fare is $1.00, and several unlimited and discounted fare products are available. Children ride for half fare, as do seniors from Monday-Friday between 9:00 AM and 3:30 PM, weekdays after 6:30 PM and all weekend.

RTS also provides commuter services through a system of approximately 25 Park and Rides in the outer ring suburbs, including Brockport, East Rochester, Fairport, Penfield, Webster, Henrietta, Avon, Perinton, Eastview, Newark (Wayne County), Lyons (Wayne County), Hamlin and Hilton. RTS connects with regional subsidiaries in selected towns, including Webster (WATS) and Brockport (OTS), and with Ontario County CATS in Victor.

RTS offers travel training programs focused on its Dial-A-Ride services, and also has “Train the Trainer” programs for agencies interested in having a trainer in-house. The programs cover trip planning, reading a bus schedule, fare payment, and general navigation techniques.

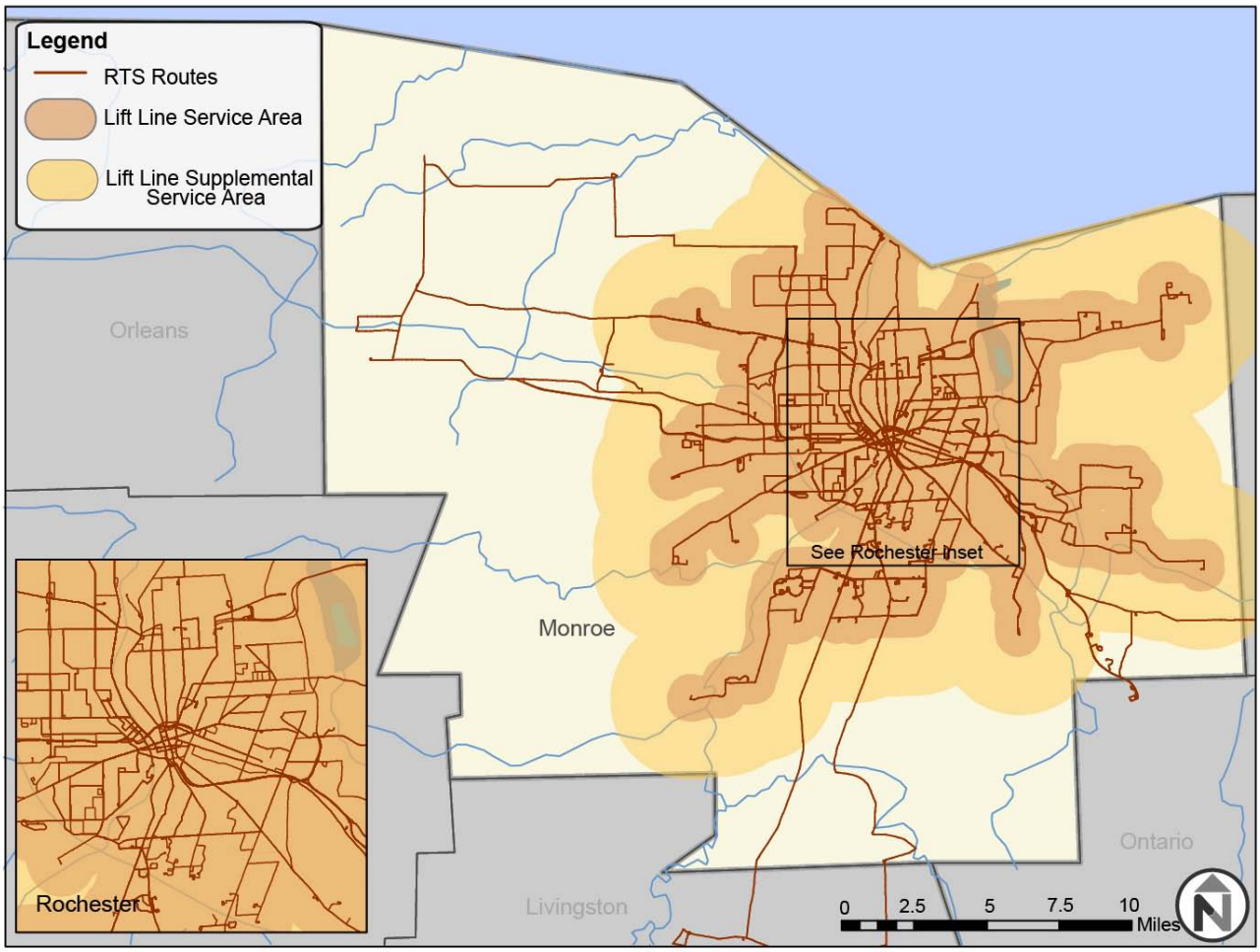
[3] Curb-to-curb service assumes the bus picks up and drops off the passenger at the curb in front of their home or destination. This is different from door-to-door service which implies that the passenger will get picked up (or dropped off) at their door and not be required to wait at the curb for the bus.

Lift Line

Lift Line is the complementary ADA paratransit service in the RTS service area and is a shared ride, curb-to-curb service. Lift Line is available to persons with a qualifying disability who are unable to use the system's fixed route service. Eligibility is determined through an application process with the RGRTA. Passengers must call between one and three days in advance of a trip; the call center is open every day from 8:00 AM to 5:00 PM.

Trips must begin and end within the Lift Line service area, which extends ¾ mile on either side of RTS fixed routes, per ADA law, with the exception of Park and Ride Routes. The RGRTA was recently awarded a federal New Freedom grant to serve a supplemental service area extending 2 ¾ miles from fixed routes. Service is available during the same hours as fixed route service, operating Monday through Friday from 5:00 AM to 1:030 AM and on Saturdays and Sundays from 6:00 AM to 12:00 AM. Fares for trips up to one mile are $1.50; up to three miles, $1.75, up to 20 miles, $2.00; and over 20 miles, $4.00. Same-day service is available for an additional fee of $6.00. Trips within the new Supplemental Service Area also require a surcharge of $6.00. Personal Care Attendants ride for free. Ridership on Lift Line in 2009-2010 was 179,670. Lift Line operates 48 vehicles and employs 102 people.

Figure 4-1 Transit Routes in the Central Region



Data Sources: Rochester Genesee Regional Transportation Authority; Genesee Transportation Council

Community Transportation Services

The following is a description of the major community transportation services and sponsors in the Central Region. Figure 4-2 lists a full inventory of transportation services in the county.

Medical Motor Service

Medical Motor Service is a nonprofit transportation provider that has been operating in the Rochester area since the 1919 and was incorporated in 1946 as Medical Motor Service. Medical Motor Service has about 150 drivers, both full-time and part-time, and 185 employees total. They provide approximately 1,800-1,900 trips per day.

Medical Motor Service has about 40 primary organizations that purchase service, and over 80 programs for which it provides transportation, including foster care, dialysis patients, adult day care clients, nursing home residents, and specific clients such as Settlement Houses, FaithLink, Fidelis Insurance, the Monroe Plan for Medical Care, the Jewish Home, St. Ann's, and the Legacy Living Center.

Since 1978, Medical Motor Service has provided trips for senior center meals for the Monroe County Office for the Aging.

TRAC

TRAC is the transportation program provided by Eldersource, a senior services information and referral program run jointly by Lifespan and the Catholic Family Center. Seniors can call one line to find out which transportation programs they are eligible for and to receive help arranging a ride. Medical Motor Service also plays a planning role in the partnership, and TRAC is soon expanding to include more than just seniors. TRAC has been funded by a Greater Rochester Health Foundation grant for two years and is a recipient of a recent New Freedom grant, in partnership with Lifespan, the Catholic Family Center, and Medical Motor Service.

Department of Social Services / Medicaid

Fee-for-service Medicaid non-emergency transportation (NEMT) is administered through a brokerage contract with the Medical Answering Service (MAS) in Syracuse. MAS conducts eligibility screening and assigns rides to a network of trip providers in the Rochester area.

The Arc of Monroe County

The Arc of Monroe County operates 126 vehicles to transport its clients to day programs, to and from work sites, and to job development programs.

Figure 4-2 Community Transportation Providers in the Central Region

Organization/Service	Service Area	Service Hours	Eligible Riders	Eligible Trip Purposes	Fleet Size	Annual Number of Trips
Monroe County						
Able Medical Transportation	Upstate New York	Not available	Not available	Not available	Not available	Not available
ABVI-Goodwill	Monroe	Not available	Persons with disabilities (Blind/Visually impaired)	Not available	Not available	Not available
American Cancer Society	Monroe	Not available	Cancer patients	Not available	Not available	Not available
Arc of Monroe County	Monroe County	24 hours/day	Clients	Not available	126 (3 sedans, 25 minivans, 55 15-passenger vans, 6 wheelchair-accessible vans, 4 light-duty buses, 33 cutaway wheelchair buses)	487 clients (2010)
Browncroft Neighborhood Association – On Your Way	Browncroft Neighborhood	Not available	Live in Browncroft Neighborhood/ receive Browncroft Crier	Not available	Not available	Not available
City East Senior Transportation Ministry	Monroe	Not available	Not available	Not available	Not available	Not available
Community Place of Greater Rochester	Monroe County, one program Livingston County	M-F Various hours	Clients of program	Not available	Not available	410 clients (2010)
Continuing Developmental Services, Inc.	Monroe County, portions of Ontario County	M-Sa 5 AM – 8 PM Su 8 AM – 8 PM	Clients (developmental disabilities)	Not available	Not available	Not available
Disabled Veterans (only ambulatory)	Monroe	Not available	Veterans	Not available	Not available	Not available

Organization/Service	Service Area	Service Hours	Eligible Riders	Eligible Trip Purposes	Fleet Size	Annual Number of Trips
DOVE	15-20 mile radius of Webster	Not available	Not available	Not available	Not available	Not available
East Rochester	East Rochester	Not available	Not available	Not available	Not available	Not available
Easy Street Express; Leon Haswell	Monroe	Not available	Not available	Not available	Not available	Not available
Elderberry Express	Within 10 mi. of Pittsford; Village and Monroe County	Not available	Not available	Not available	Not available	Not available
FaithLink	Irondequoit	Not available	FaithLink clients	Not available	1	Not available
FISH, SEA- (Southeast Area Friends in Service Here)	14607; 14610; 14618; 14620	Not available	Not available	Not available	Not available	Not available
FISH, Greece (Friends in Service Here)	Charlotte; Greece	Not available	Not available	Not available	Not available	Not available
FISH, HF-L (Honeoye Falls-Lima Friends in Service Here)	Honeoye Falls/Lima; N & W Bloom-field; Mendon	Not available	Not available	Not available	Not available	Not available
FISH, R-H (Rush-Henrietta Friends in Service Here)	Rush; Henrietta; West - Henrietta	Not available	Not available	Not available	Not available	Not available
The Friendly Home	Monroe County	7 days – 7 AM – 8 PM	Residents of the Friendly Home or Linden Knoll, Inc. (Nursing homes)	Any	1 wheelchair-accessible 15-passenger van	5,684 (2010)
Gates, Town of	Gates	Not available	Not available	Not available	Not available	Not available
Genesee Transportation	Upstate NY	Not available	Not available	Not available	Not available	Not available
Good Samaritan	Irondequoit	Not available	Not available	Not available	Not available	Not available
Greece Senior Care	Greece	Not available	Older Adults	Not available	Not available	Not available

Organization/Service	Service Area	Service Hours	Eligible Riders	Eligible Trip Purposes	Fleet Size	Annual Number of Trips
Heritage Christian Services	Rochester region; Buffalo region	7 days - 7 AM – 10 PM	Agency clients (individuals with developmental disabilities)	Not available	244 (40 sedans, 6 station wagons, 103 minivans, 13 12-passenger vans, 57 wheelchair vans, 15 cargo vans, 10 other)	225,387 (2010)
Jewish Family Service	Monroe	Not available	Not available	Not available	Not available	Not available
Lifetime Assistance, Inc.	Monroe County and portions of Genesee County	M-F 7 AM – 5 PM	Clients (developmental disabilities)	Agency activities	Not available	Not available
Lift Line	Monroe County within ¾ mile of RTS fixed route	M-F 5 AM – 12:30 AM Sa, Su 5:30 AM – 12:30 AM	ADA-qualifying disability	Any	48	179,670 (2010)
Marge's Trolley	Monroe	Not available	Not available	Not available	Not available	Not available
Medicab	Monroe	Not available	Not available	Not available	Not available	Not available
Medicaid Transportation	Monroe County	Not available	Medicaid recipients	Medical	Not available	Not available
Medical Motor Service	Monroe County	M-F 6:30 AM – 9 PM Sa 7 AM – 9 PM Su 7 AM – 8 PM	Variety of eligibility depending on program	Varies	123 (34 sedans, 24 minivans, 7 15-passenger vans, 54 light-duty bus, 4 medium-duty bus)	488,554 (2010)
Monroe Meditrans	New York State	Not available	Not available	Not available	Not available	Not available
Monroe County Office for the Aging	Monroe County	Varies with agency	Older adults over 60	Varies with agency	N/A – transportation funding agency	81,243 trips arranged in 2010
Out & About; Maureen Morgan	Monroe	Not available	Not available	Not available	Not available	Not available
Penfield Symphony	Penfield	Not available	Not available	To Symphony concerts	Not available	Not available

Organization/Service	Service Area	Service Hours	Eligible Riders	Eligible Trip Purposes	Fleet Size	Annual Number of Trips
Rochester Philharmonic Orchestra	Monroe	Not available	Not available	To Philharmonic concerts	Not available	Not available
Rochester Medical Transportation	Monroe	Not available	Not available	Medical	Not available	Not available
Services for Seniors	Monroe	Not available	Older Adults	Not available	Not available	Not available
SOFI Elderbus (Senior Options for Independence)	Fairport/Perinton residents only	Not available	Older Adults	Not available	Not available	Not available
STAR (Catholic Family Center); STAR – Estrella	Monroe	Not available	Not available	Not available	Not available	Not available
St. Ann's Community	Monroe County, portions of Wayne County	M-F 7 AM – 5 PM	Residents of St. Ann's Housing/Nursing Facility or Day Program clients	Any	10 (1 sedan, 1 station wagon, 1 minivan, 7 light-duty buses)	34,809 (2010)
WASPS	Webster School District	Not available	Not available	Not available	Not available	Not available
Webster United Methodist Church	Webster, Ontario, NY	Not available	Not available	Not available	Not available	Not available

Data Sources: Rochester Genesee Regional Transportation Authority; Genesee Transportation Council; TRAC Program; Nelson\Nygaard Provider Survey

Eastern Region

Two counties in the Eastern Region, Seneca and Wayne, have public transit operated by regional subsidiaries of the RGRTA. Ontario County is the only county in the Genesee-Finger Lakes Region with public transit service that is not affiliated with the RGRTA. The County Area Transportation Service (CATS) operates public transit in Ontario County. Yates County does not have any public transit service at this time.

Transit Services

Seneca Transit Service (STS)

Seneca Transit Service (STS) is the local subsidiary of the RGRTA in Seneca County. STS operates three routes in the county, serving the towns of Seneca Falls and Waterloo, and the City of Geneva (in Ontario County) as well as towns further south, Lodi and Ovid. One route serves Seneca Falls, one Waterloo/Geneva, and one traverses the length of the county, with northbound and southbound sections. Fare is $1.00. Service is available Monday through Friday, with service generally operating hourly between 7:00 AM and 6:00 PM.

Dial-A-Ride service is available throughout the county; due to the extreme geography of Seneca County, the Dial-A-Ride service area is broken into a northern and southern section, dividing along Route 336. Dial-A-Ride service is $3.00 each way and must be scheduled at least one day before the ride.

Complementary ADA paratransit is also available for individuals with a qualifying disability. Passengers must call at least one day in advance, and trips must be within the ¾ mile zone around a fixed route, per ADA law. Service is available during the same hours as fixed route, Monday through Friday.

Ridership was 74,864 in 2009-2010. STS operates 10 buses and employs 13 people.

Wayne Area Transit System (WATS)

The Wayne Area Transportation Service (WATS) is the RGRTA subsidiary for Wayne County. WATS also operates nearly 20 routes for the general public and for human service agencies in the county, including, among others, seniors, dialysis, and veterans. WATS is one of Wayne County's non-emergency medical transportation providers for Medicaid recipients.

WATS operates loop routes around the county for the general public, serving 26 towns, Monday through Friday from 6:00 AM to 7:00 PM. A fixed route along Route 31 is also available. In addition to these, WATS has a Route 104 Connector Service for commuters traveling into Rochester. The route connects to an RTS Park & Ride in Webster in Monroe County. Fares for all fixed-route services are $1.00. Demand response service for seniors and the disabled is available throughout the county for $1.50.

Complementary ADA paratransit is available as a route-deviation service within ¾ mile of fixed routes. Passengers may call one to 14 days in advance to request a route deviation. WATS has a number of contracts with county agencies as well as private companies. They do adult day transportation, much of the county's Arc transportation, mental health day treatment, and veterans transportation. WATS also contracts with seven farmers in the county to transport workers both to work and for medical appointments. This is primarily in August through November.

WATS operates several grocery shuttles, available free to seniors in certain jurisdictions; some are also open to the public. The grocery stores subsidize these shuttles. A grocery shuttle operates in the following jurisdictions and days: Lyons/Newark, Tuesday; Palmyra/Macedon, Thursday; Marion, Tuesday.

Several medical and other specialized services utilize WATS to transport their clients. A medical shuttle to Rochester is available Monday through Friday. Another medical shuttle runs to Geneva and Clifton Springs on Tuesday, Thursday, and Friday. A dialysis shuttle runs to Victor on Tuesday, Thursday, and Saturday. Trips to the VA Hospital in Canandaigua are made Monday and Wednesday. Finally, trips to the Canandaigua Happiness House, Finger Lakes Community College, and Canandaigua medical facilities are made Monday through Friday.

Ridership on WATS was 160,000 in 2009-2010, the second highest of the regional subsidiaries behind Livingston County. About 30% of the ridership is general public trips. WATS operates 33 buses and employs 31 people, including 10 full-time drivers, 18 part-time drivers, and three operations staff.

County Area Transportation Service (CATS)

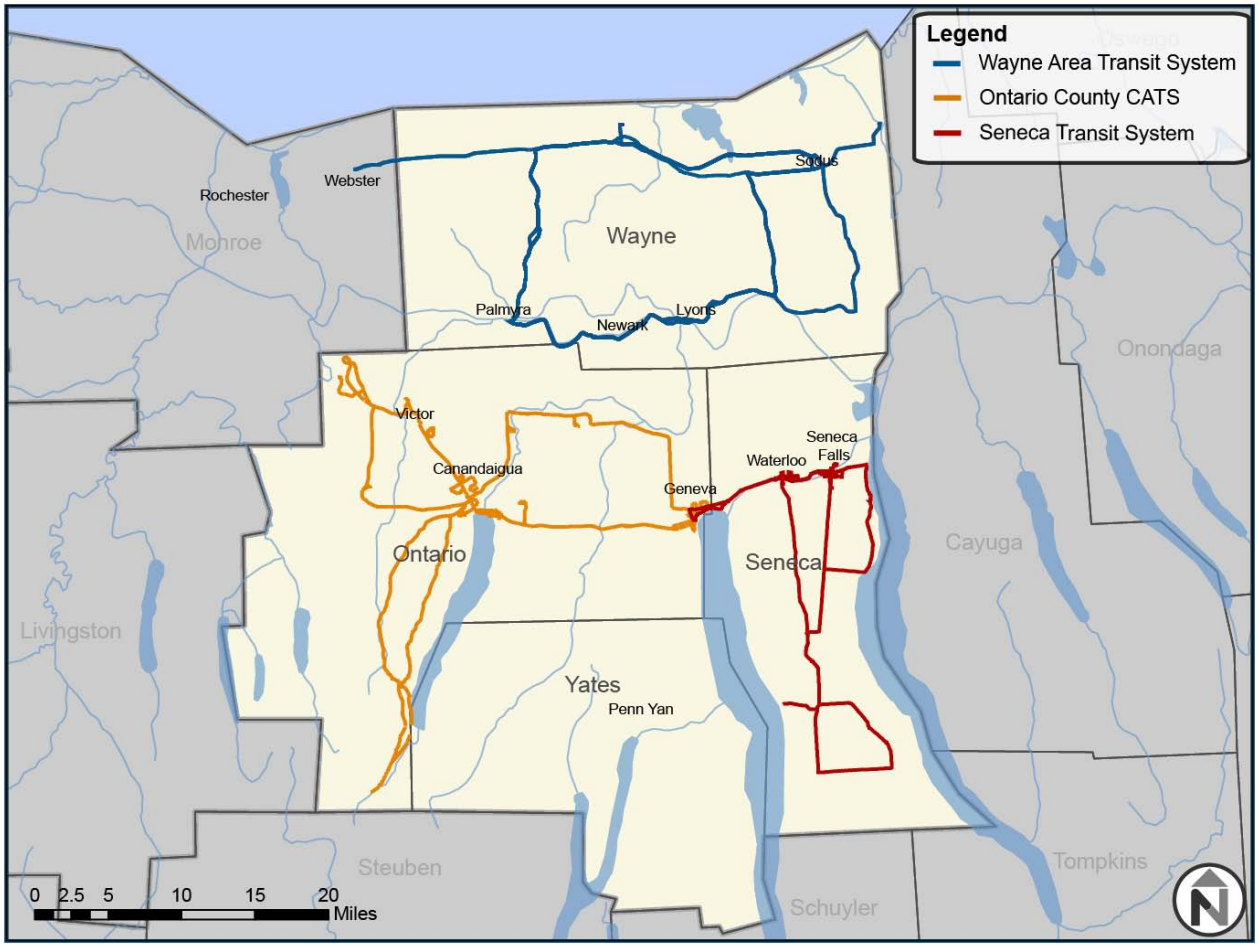
County Area Transportation Service (CATS) operates in Ontario County and is the only county system in the region that is not operated by the RGRTA. Services include a combination of inter-county and intra-city/town fixed route services as well as demand response Dial-A-Ride service, all of which operate within Ontario County.

Through December, 2010, public transportation services were provided by CATS, under contract to First Transit. Beginning January 1, 2011, CATS is run by a new operator – MV Transportation.

CATS fixed-route service primarily centers around Canandaigua with a transit hub at City Hall on Main Street in downtown Canandaigua. Routes operate according to a “loop and pulse” system, meaning nearly all routes are coordinated to depart from City Hall at the same time; ensuring passengers can transfer between services. CATS also operates Dial-A-Ride service to Ontario County residents where fixed-route service is not available. The service is available Monday through Friday from 7:00 AM to 7:00 PM. Passengers must call CATS 24 hours in advance to schedule a trip. Fares are based on zones and range between $5.00 and $10.00 per person per trip.

CATS is in the process of developing a medical shuttle to Strong Memorial Hospital in Rochester.

Figure 4-3 Transit Routes in the Eastern Region



Data Sources: Rochester Genesee Regional Transportation Authority; Genesee Transportation Council

Community Transportation Services

The following is a description of the major community transportation services in the Eastern Region. Figure 4-4 lists a full inventory of transportation services in the four counties.

The Arc of Ontario County

The Ontario County Arc has become a major partner in the transportation network of Ontario County. The Arc provides transportation to its clients, but has recently worked with the County to open up its work center routes to the general public. A description of this project is available in Chapter 5.

Seneca-Cayuga Arc

The Seneca-Cayuga Arc operates transportation for its clients in Seneca and Cayuga counties. Seneca Transit provides some trips for the Arc, as well. The Arc has received a New Freedom grant to open several of its work routes to additional populations of riders in Seneca County. Further detail about this project can be found in Chapter 5.

Seneca County Office for the Aging

The Seneca County Senior Center Inc. contracts with the Seneca County Office for the Aging to provide a transportation program for seniors 60 years or older. This program provides a high level of service to assist the seniors with grocery shopping, medical appointments, trips to the pharmacy, banking and other similar tasks. While public transportation is available in Seneca County, the Center is able to provide door-to-door assistance to seniors who may require help getting to and from the vehicle as well as help in carrying their purchases. (STS can only provide curb-to-curb service). The Senior Center staff is also available to work directly with medical offices and other facilities to schedule appointments for seniors. This enables the Center to help eliminate long waiting periods for senior citizens who may be in poor health. The Center also assists seniors with alternative forms of transportation when it is unable to meet their needs.

Transportation is offered from approximately 8:30 AM – 3:00 PM Monday through Friday, for a suggested round-trip fare of $0.50 one way within town/village and $5.00 within a radius of 20 miles. The Center has one sedan and one eight-passenger van for transporting seniors, and provided approximately 4,000 one-way trips in 2010.

Wayne County Department of Social Services

DSS in Wayne County has two full time transportation staff and six vehicles and drivers who transport clients to medical appointments. DSS utilizes WATS for some selected trips, as well. In the past few years, the number of Medicaid clients eligible for service has increased drastically; demand for transportation service has greatly outpaced available resources.

Wayne County Department of Aging and Youth

The Department of Aging and Youth (DA&Y) has two vehicles which it uses to transport seniors to meal sites several days per week. It also works with WATS to provide client transportation, including dialysis trips which DA&Y helps subsidize one per week per client.

Wayne County Arc

Wayne County Arc operates a large fleet for its clients, transporting them to work, day sites and other appointments. The Arc also contracts with WATS to provide a large amount of its longer-distance trips.

Yates County Department of Social Services

The Department of Social Services arranges trips for its Medicaid recipients, primarily utilizing the Office for the Aging transportation service, private companies, and Yates Arc. Approximately 11,735 passenger trips occurred in 2005.

Yates County Arc

The Yates County Arc has a large fleet of vehicles and provides trips for its clients within Yates County. Like some other Arcs in the region, the Arc is applying for authorization from the State of New York to be a public transportation provider. Further detail on this project is provided in Chapter 5.

Finger Lakes Addiction Counseling and Referral Agency

The Finger Lakes Addiction Counseling and Referral Agency (FLACRA) arranged approximately 1,300 passenger trips in 2005. FLACRA operates in the five-county Finger Lakes region.

Figure 4-4 Community Transportation Providers in the Eastern Region

Organization/Service	Service Area	Service Hours	Eligible Riders	Eligible Trip Purposes	Fleet Size	Annual Number of Trips
Ontario County						
Arc of Ontario County	Ontario County	Not available	Arc clients; general public	Day treatment, work sites, appointments; any for general public	Not available	Not available
Canandaigua Veterans Club, Inc.	Canandaigua and surrounding area	M-Th 4 PM – 7 PM	Veterans living in Canandaigua	Not available	Not available	500 (2010)
Happiness House	Ontario, Wayne, Yates, Seneca, Steuben, Livingston counties	M, W, F 9 AM – 3 PM T, Th 9 AM – 6 PM	Clients (persons with traumatic brain injuries)	Group agency trips	17 (5 sedans, 1 minivan, 2 15-passenger vans, 10 staff cars)	520 (2010)
Ontario CATS	Ontario County	M-F 7 AM – 7 PM	General public; Medicaid recipients; older adults over 60	Any	Not available	Not available
Victor Association of Cultural and Performing Arts	Ontario, Wayne, Monroe, Seneca, Livingston counties	M-F 7 AM – 5 PM	Clients (Medicaid eligible for day hab services)	Agency activities	8 (3 15-passenger vans, 4 wheelchair-accessible medium-duty transit bus, 1 staff car)	15,000 (2010)
Seneca County						
Finger Lakes Addictions Counseling and Referral Agency	Not available	Not available	Agency clients	Treatment and training	5; Purchase STS bus passes	Not available
Seneca-Cayuga Arc	Cayuga and Seneca counties	Not available	Arc clients (500 in Seneca Co.); DHS clients	Sheltered workshop; health clinic; medical; day treatment and DayHab; medical for DHS clients	89	48,606 (2000)

Organization/Service	Service Area	Service Hours	Eligible Riders	Eligible Trip Purposes	Fleet Size	Annual Number of Trips
Seneca County Department of Human Services	Seneca County	Not available	Medicaid recipients; veterans; youth for summer programs		17; Contracts with Seneca-Cayuga Arc; Purchases STS bus passes	7,800
Seneca County Mental Health	Seneca County	Not available	Not available	Counseling and treatment appointments	4; Contracts with Lakeview Mental Health	2,660
Seneca County Office for the Aging	Seneca County	M-F 8:30 AM – 3 PM	Seneca County residents over 60 who are frail	Nutrition sites; medical; shopping	2 (1 8-passenger van, 1 sedan) - door-through-door assistance; Purchases service through STS	4,000 (2010)
Seneca Transit Service	Seneca County, portions of Ontario County	M-F 6:30 AM – 6 PM	General public	All	10 (1 minivan, 7 light-duty bus, 2 medium-duty bus)	30,000 (2010)
Wayne County						
Rotary Cancer Drivers (Volunteer)	Not available	Not available	Cancer patients	Not available	Not available	Not available
Wayne Area Transportation Service	Wayne County (Medical to Monroe, Ontario and Seneca counties)	M,W,F 6 AM – 7:30 PM T, Th 2:30 AM – 7:30 PM Sat 2:30 AM – 4:30 PM	General public	All	33 (1 minivan, 24 light-duty bus, 8 medium-duty bus)	160,000 (2010)
Wayne County Arc	Wayne County	M-F 6 AM – 9 PM	Arc clients	Day treatment, work sites, appointments	49 (8 sedans, 2 station wagons, 21 minivans, 8 15-passenger vans, 3 wheelchair-accessible 15-passenger vans, 2 light-duty buses, 5 medium-duty buses)	49,000 (2010)

Organization/Service	Service Area	Service Hours	Eligible Riders	Eligible Trip Purposes	Fleet Size	Annual Number of Trips
Wayne County Department of Aging and Youth	Wayne County	Not available	Wayne County residents over 60	Agency programs (meal sites)	2 minivans	Not available
Wayne County Department of Social Services	Wayne County	Not available	Medicaid recipients	Medical	2 minivans	Not available
Wayne County Nursing Home	Not available	Not available	Nursing home residents	Not available	Not available	Not available
Wayne County Veterans Services	Not available	Not available	Veterans	Not available	Not available	Not available
Yates County						
Keuka College	Not available	Not available	Students	Not available	Not available	1,250
Lakeview Mental Health	Not available	Not available	Mostly Medicaid recipients	Not available	Not available	16,067
Penn Yan Manor Nursing Home	Not available	Not available	Residents	Not available	Not available	472
Yates Arc	Yates County	Not available	Arc clients	Day treatment, work sites, appointments	41	51,153
Yates County Office for the Aging/ Pro-Action of Steuben and Yates Counties	Yates County, portions of Ontario County	M-F 8 AM – 4:30 PM	Yates County residents over 60	Not available	4 (2 minivans, 2 12-passenger buses)	5,855 (2010)
Yates County Veterans Service	Yates County, portions of Ontario County	Not available	Veterans	Medical	Volunteer	531

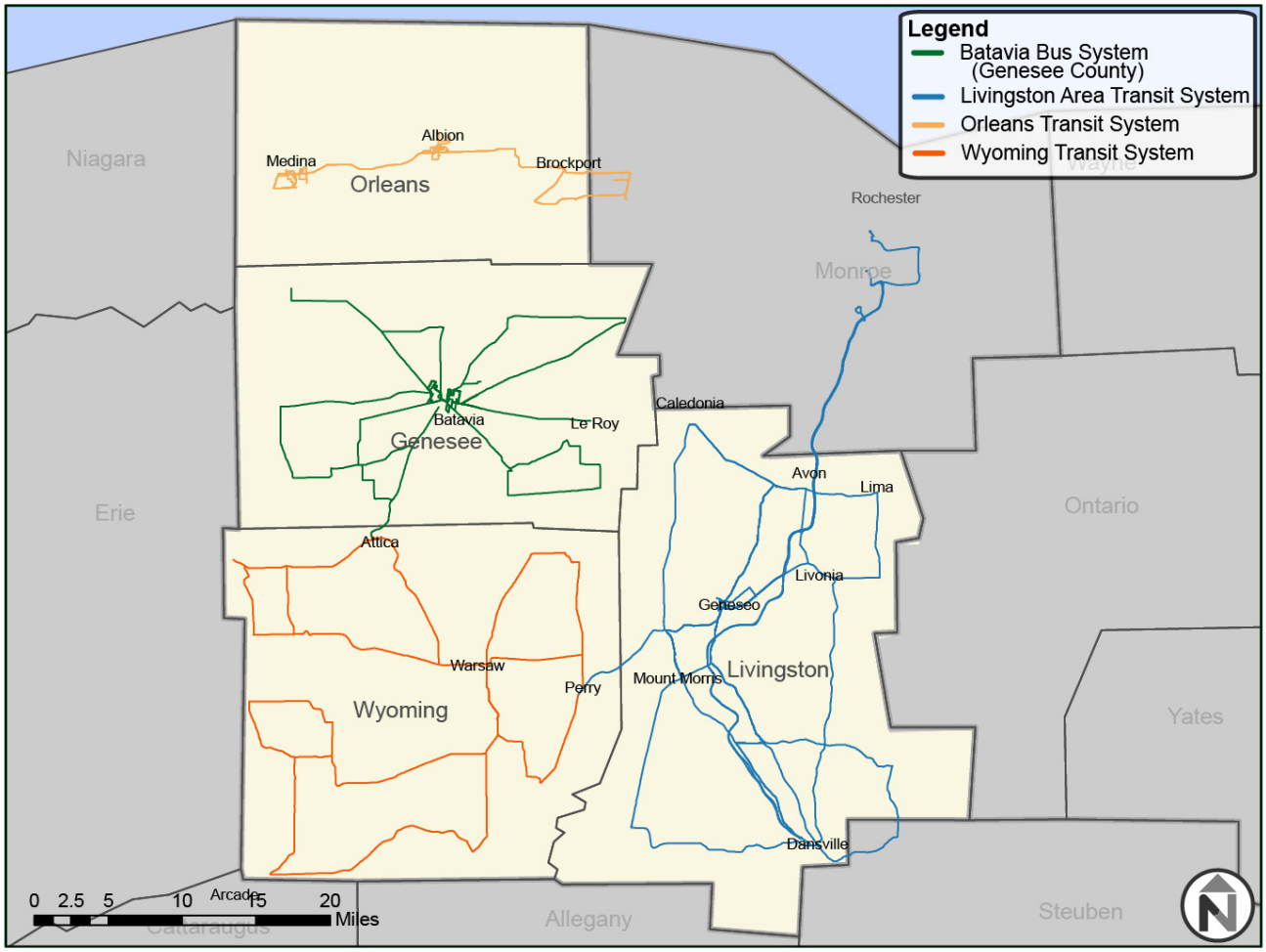
Data Sources: Rochester Genesee Regional Transportation Authority; Genesee Transportation Council; TRAC Program; Nelson\Nygaard Provider Survey

Western Region

All four counties in the Western Region have public transit services operated by subsidiaries of the RGRTA. Batavia Bus Service, Livingston Area Transportation Service, Orleans Transit Service and Wyoming Transit Service all provide intra-county connections with a few inter-county routes.

Transit Services

Figure 4-5 Transit Routes in the Western Region



Data Sources: Rochester Genesee Regional Transportation Authority; Genesee Transportation Council

Batavia Bus (BB)

Batavia Bus (also called the B-Line) is the Genesee County subsidiary of the RGRTA and is the oldest of the rural operators, with Dial-A-Ride service beginning in 1971. Ridership on the Batavia Bus Service in 2009-2010 was 63,127 riders. The B-Line operates a fleet of 12 buses and employs 16 people.

The B-Line operates three loop routes in Batavia as well as daily service to and from LeRoy. In Batavia, service operates from 6:00 AM to 6:00 PM Monday through Friday. The fare is $1.00 for these routes, and discounts are available for older adults and persons with disabilities most hours of the day. The LeRoy Connection provides four trips between Batavia and LeRoy per day for a fare of $3.

Dial-A-Ride service is available in Batavia on weekdays from 8:00 AM to 4:00 PM within a ¾ mile radius of transit routes. County-Wide curb-to-curb service is also available in twelve communities in the county: Alabama, Alexander, Attica, Bergen, Bethany, Byron, Corfu, Darien, Elba, Oakfield, Pavilion, and Pembroke. Fare is $3, but only $1.50 for older adults and persons with disabilities. Each community is served one day per week with trips into Batavia. Dial-A-Ride service is available within the Village of LeRoy on Thursdays from 11:30 AM to 1:30 PM. Fare is $1.

Livingston Area Transportation Service (LATS)

The Livingston Area Transportation Service (LATS) is the largest RGRTA subsidiary in the Genesee-Finger Lakes Region outside of Rochester, with an annual ridership of nearly 270,000 in 2009-2010, a majority of which is SUNY Geneseo affiliates. With 29 employees and 29 buses, LATS operates nine routes throughout the county, including a medical shuttle into Rochester. Dial-A-Ride service is available in Avon, Dansville, and Mount Morris Monday through Friday and between all other communities in the county on specific days of the week. Dial-A-Ride service requires calling 24 hours in advance to reserve a pick up. Fare is $2.00 on the fixed routes. On Dial-A-Ride within a community, fare is $1.00, but between communities, $2.00.

LATS also operates complementary ADA paratransit service during the service hours that LATS fixed routes are in operation.

In late 2010, LATS and WYTS (see below) hired a joint General Manager, with individual operations managers remaining at each separate transit system.

Orleans Transit Service (OTS)

Orleans Transit Service is the local subsidiary of the RGRTA in Orleans County. OTS operates fixed routes in Medina and Albion, with service between the two towns as well as to Brockport. OTS also operates shuttles within Brockport to serve the campus of the State University of New York there. SUNY Brockport subsidizes these routes to assist its students with their transportation needs. The routes are open to the public with a fare of $1.00, but are free for SUNY students. Fares within Albion or Medina are also $1.00; fares between Albion and Medina are $2.00, and between Albion and Brockport, $3.00. OTS also offers weekend service to Rochester and Greece on Saturdays, through Brockport. In 2009-2010, ridership was 68,106. OTS operates nine buses and employs 16 people.

OTS operates Dial-A-Ride service Monday through Friday throughout the county. Reservations must be made at least one day in advance. Fare is $3.00.

Complementary ADA paratransit service is also available within a ¾ mile of any fixed route and during the same operating hours as the fixed routes. Trip requests must be made at least one day in advance. ADA service is available to individuals with a qualifying disability.

Wyoming Transit Service (WYTS)

The Wyoming Transit Service is the local subsidiary of the RGRTA for Wyoming County. WYTS operates a fixed route service in the Village of Warsaw and three route-deviation loops

throughout Wyoming County. Dial-A-Ride service is available in Warsaw, Arcade, and Perry. All services are available Monday through Friday. The route-deviation services and Dial-A-Ride require a call at least one day in advance to schedule a pick up. The fixed route in Warsaw is $1.00. Route deviation fares are $2.00, and Dial-A-Ride fares are $1.50.

WYTS also operates complementary ADA paratransit service in Warsaw during the same hours as the fixed route. Fare is $1.50. Ridership in 2009-2010 was 86,343. WYTS operates 20 buses and employs 23 people.

Community Transportation Services

The following is a description of the major community transportation services in the Western Region. Figure 4-6 lists a full inventory of transportation services in the four counties.

Community Action Transportation System (CATS)

Community Action Transportation System (CATS) is a nonprofit transportation organization that operates in Orleans County and Genesee County under contract with various county programs. The organization operates different programs in each county. (This CATS is unrelated to the CATS in Ontario County discussed in the Eastern Region section.)

In Orleans County, CATS operates a variety of programs for county agencies, including employment, farm workers, dialysis, Medicaid, veterans, and seniors.

In Genesee County, CATS also operates services for seniors and persons with disabilities.

Livingston County Transportation Broker

The Livingston County Department of Social Services has a transportation broker on staff to coordinate transportation for DSS clients. The broker also coordinates transportation for clients of a number of county agencies and formulates partnerships with other agencies in the county in order to address the transportation needs of special needs populations.

The Arc of Genesee

The Arc of Genesee provides a range of services for clients, who are individuals with disabilities residing in Genesee County. The Arc offers transportation for clients to agency programs at agency sites, from any residence in Genesee County. Clients may be transported to agency sites, medical appointments and to recreational activities. The Arc operates 62 vehicles, 18 of which are wheelchair-accessible. Over 250 clients utilize the service.

The Arc of Livingston-Wyoming

The Arc of Livingston-Wyoming has worked closely with Livingston County's transportation broker in recent years to transport not only Arc clients but also dialysis clients on behalf of the county. It is an involved partner in coordination activities.

The Arc has 11 full-time transportation staff, including a Transportation Director, two dispatchers, two safety officers, five mechanics and a garage manager. Eighty (80) drivers are employed on a per diem basis, as well as 10 bus aides. The Arc operates 160 vehicles total, providing approximately 1,300 trips per day.

The Arc of Orleans

The Arc of Orleans County contracts its transportation to Community Action of Orleans County (CATS, above).

Caring Harts

Caring Harts is a private wheelchair and stretcher car service operating in Wyoming and Erie counties. It is the only operation in Wyoming County that provides door-through-door service and a high level of service to its clients. It is currently working with Erie County to better coordinate service and apply for a 5310 vehicle in conjunction with a nonprofit. The vehicle would offset costs, allowing them to charge less per trip.

SUNY Geneseo

SUNY Geneseo contracts service to LATS for its students, which operates during the school year for faculty, students and staff. All routes are also open to the general public. Service is providing from campus to Geneseo, Wegman's and Walmart, as well as to major destinations in Rochester on the weekends.

Wyoming County Department of Social Services

The Wyoming County DSS operates several vehicles to take clients to medical appointments. It also supplies trip reimbursements and utilizes Caring Harts and WYTS to transport clients to appointments.

Wyoming County Office for the Aging

The Office for the Aging in Wyoming County has two vehicles to transport seniors to in-county medical services. It also provides out-of-county medical trips through a network of volunteer drivers. The Office is talking with WYTS about providing transportation to senior nutrition sites.

Figure 4-6 Community Transportation Providers in the Western Region

Organization/Service	Service Area	Service Hours	Eligible Riders	Eligible Trip Purposes	Fleet Size	Annual Number of Trips
Genesee County						
Batavia Bus Service (BBS)	Genesee County	M-F 6 AM – 6 PM (Batavia) M-F 8 AM – 4 PM (Dial-A-Ride)	General public	All	12 buses	63,127 (2010)
Community Action of Orleans and Genesee Inc. (CATS)	Orleans and Genesee counties	M-F 6 AM – 6 PM (Earlier for dialysis) Sa – Varies (dialysis only)	Medicaid recipients, older adults, Arc clients	Not available	40 (3 minivans, 14 light-duty buses, 12 medium-duty buses, 1 heavy-duty bus, 10 staff cars)	48,609 (2010)
Genesee Arc	Genesee County, portions of Orleans and Wyoming counties	M-F 6 AM – 9 PM Sa, Su Limited, upon client request	Arc clients	All	62 (18 wheelchair-accessible)	250 clients (2010)
Genesee County Department of Mental Health	Not available	Not available	Not available	Not available	Not available	Not available
Genesee County Department of Social Services	Genesee County, portions of Monroe and Erie counties	M-F 8 AM – 5 PM	Medicaid recipients	Medical	7 (6 sedans, 1 minivan)	16,192 (2010)
Genesee County Office for the Aging	Genesee County	M-F 8-9:30 AM, 3-4:30 PM (Adult day) T-Th 9 AM – 2:30 PM (BBS contracted)	Genesee County residents over 60	Medical; Social adult day care	8 (volunteer cars) Subcontracted services	1,256 (2010)

Organization/Service	Service Area	Service Hours	Eligible Riders	Eligible Trip Purposes	Fleet Size	Annual Number of Trips
Livingston County						
Arc of Livingston-Wyoming	Livingston and Wyoming counties, portions of Alleghany and Steuben counties	M-F 6 AM – 7 PM Sa, Su 6 AM – 4 PM	Arc clients; other agency clients such as older adults and persons with developmental disabilities	Varies by program	160	330,000 (2010)
Catholic Charities of Livingston County	Livingston County	Varies by provider	Varies by program	Varies by program	95 (volunteer/staff cars)	Not tracked (Primarily referral)
Livingston Area Transportation Service (LATS)	Livingston County, Rochester (medical only)	M-F 6:30 AM – 6:00 PM	General public	All	29 buses	270,000 (2010)
Livingston County Department of Social Services	Livingston County	M-F 6:45 AM – 6 PM	Variety of clients (Medicaid, persons with disabilities, TANF, employment, adult/child protective services)	Varies by program	9 (4 minivans, 1 15-passenger van, 4 volunteer driver vehicles)	30,328 (2010)
Orleans County						
Arc of Orleans County	Orleans County	M-F 6 AM – 6 PM	Arc clients (persons with disabilities)	To workshops and treatment facilities	Contracts with CATS	Not available
Community Action of Orleans and Genesee Inc. (CATS)	Orleans and Genesee counties	M-F 6 AM – 6 PM (Earlier for dialysis) Sa – Varies (dialysis only)	Older adults	Varies by program	40 (3 minivans, 14 light-duty buses, 12 medium-duty buses, 1 heavy-duty bus, 10 staff cars)	48,609 (2010)
Genesee Council for Alcoholism and Substance Abuse	Orleans Co.	Not available	Persons with chemical dependency	Not available	1	Not available

Organization/Service	Service Area	Service Hours	Eligible Riders	Eligible Trip Purposes	Fleet Size	Annual Number of Trips
Genesee/Orleans ACE Employment Services	Genesee and Orleans counties	Not available	Clients (Persons with mental illness)	Agency-related activities; workshops; training; job interviews	1	Not available
Iriquois Job Corps	Not available	Not available	Clients (students)	Not available	11	Not available
Living Opportunities of DePaul	Orleans Co.	Not available	Orleans Co. residents with mental illness	Not available	1	500
Orchard Manor Nursing Home	Erie, Genesee, Monroe, Niagara, Orleans counties	Not available	Nursing home residents	Medical	2	Not available
Orleans County Department of Social Services	Orleans County	Not available	Medicaid recipients; Domestic Violence program clients	Medical trips	Contract with CATS	Not available
Orleans County Mental Health	Orleans County	Not available	Mental Health clients	Medical; case work; Day Treatment programs; clinic appointments	Case worker private vehicles; Contract with CATS	Not available
Orleans County Office for the Aging	Orleans County	Not available	Older Adults	Medical, shopping, nutrition site	Contract with CATS	Not available
Orleans Transportation Service (OTS)	Orleans County	M-F 7 AM – 5:30 PM	General public	All	9 buses	68,106 (2010)
Rides Unlimited	Erie, Monroe, Niagara, Orleans counties	Not available	Not available	Not available	15	Not available
Rural Opportunities, Inc.	Orleans and surrounding counties	Not available	Clients (Migrant and seasonal farm workers)	Agency programming; job interviews	2	Not available

Organization/Service	Service Area	Service Hours	Eligible Riders	Eligible Trip Purposes	Fleet Size	Annual Number of Trips
Wyoming County						
Caring Harts	Erie and Wyoming counties	Mon-Sat 5 AM – 11 PM	All	Any	10 (Wheelchair and stretcher vehicles)	45,000
Arc of Livingston-Wyoming	Livingston and Wyoming counties, portions of Alleghany and Steuben counties	M-F 6 AM – 7 PM Sa, Su 6 AM – 4 PM	Arc clients; other agency clients such as older adults and persons with developmental disabilities	Varies by program	106 (8 sedans, 78 minivans, 5 wheelchair-accessible conversion vans, 15 staff cars)	330,000 (2010)
Peer Wheels (Volunteers)	Not available	Not available	Mental health clients	Medical, out-of-county	Not available	Not available
Wyoming County Department of Social Services	Wyoming County (also into Rochester)	Not available	Medicaid recipients	Medical and dental	10 (3 minivans, 7 sedans)	Not available
Wyoming County Office for the Aging	Wyoming County, some out-of-county	Not available	Wyoming County residents over 60	In-county trips through agency-owned vehicles, out-of-county through volunteer drivers	2 vehicles (1 wheelchair-accessible)	Not available
Wyoming Transportation Service (WYTS)	Wyoming County	M-F 7 AM – 6 PM (Fixed route) M-F 7 AM – 5 PM (Dial-A-Ride)	General Public	All	20 buses	86,343 (2010)

Data Sources: Rochester Genesee Regional Transportation Authority; Genesee Transportation Council; TRAC Program; Nelson\Nygaard Provider Survey

Chapter 5. Unmet Needs, Existing Coordination, and Potential Coordination

Within the nine-county region, there is quite a variety in levels of existing coordination efforts; yet several consistent themes across the study area arose from research to date. This chapter discusses each county, listing unmet needs and gaps in the current human service transportation systems. The last section of the chapter begins to outline very general potential coordination partnerships. Feedback from stakeholder interviews, focus groups, the background document review, and the provider survey were all utilized to compile the following text.

Existing Coordination and Unmet Needs

Regional Coordination and Unmet Needs

Developing a balanced regional approach to human service transportation is a primary goal of this study. Research to date has uncovered a number of key themes across the region, which will be necessary to address in order to create this balanced approach:

Information – Though many counties have well-developed transportation networks, a concern in every county in the region is disseminating information about these services. Members of the public and professionals alike are unaware of many transportation programs available to them or to their clients.

Geography – Rural areas are very difficult to serve because of the long distances between points and low densities of residents. Even in Rochester's suburbs, service can be costly for seemingly low ridership.

Federal Funding Programs – Some organizations relayed in focus groups that they perceive the regional distribution of operating funds as less favorable to rural areas because the distribution mechanism only takes population into consideration. Without taking distance or geography into consideration, rural areas will receive less than it costs to operate a transit system. The process is also perceived as less favorable to nonprofit operators or organizations.

Involvement of Health Community – Health planning commissions and funding organizations, such as the Finger Lakes Health Services Agency and the SAGE Commission, play a major role in coordination in some counties and in the regions they address (FLHSA and the SAGE Commission covers Chemung, Livingston, Monroe, Ontario, Schuyler, Seneca, Steuben, Wayne and Yates counties). Transportation is becoming a central issue for many different members of the health community and is a rising cost. County or regional commissions have provided the platform for the discussion about transportation in several counties.

Crossing County Borders – Most transit providers have state approval to transport individuals in only one county, and many governmental programs must transport clients to services within the county of a client's residence, even if a closer service exists across the county border. Further, many county transit systems do not coordinate fixed-route transfers, where transfers exist, making regional travel on transit a potentially laborious process.

Several specific examples included traveling between Monroe and Wayne counties, Monroe to Orleans counties, between Seneca and Wayne counties, and between Wayne to Ontario counties. In some instances, the trip may be possible on fixed-route service but requires many hours to make due to wait times at transfers.

Dialysis Transportation – Some counties have undertaken significant coordination with local dialysis clinics to group chair times of clients who use public transportation to get to their appointments. However, most have problems scheduling dialysis appointments at less inconvenient times, especially those without a dialysis clinic in the county. Dialysis trips can be very long and very expensive, for both the transit provider and the client.

Employment Transportation – Some individuals are able to make the existing systems work where their commuting hours fall into the existing transit service hours. Others are accommodated – on a case-by-case basis – by specialized services in their counties, such as CATS in Orleans County, which is able to transport some workers in the early hours with their existing dialysis runs. However, for many individuals, public transportation is not an option for work. The issue is primarily the hours of operation; most public transportation begins too late to accommodate early shifts and ends too early to accommodate later shifts. Also, many workers must stop at their day care provider or run other errands on the way to or from work.

Non-Medicaid Medical Trips – If individuals do not qualify for Medicaid or are not clients of organizations that provide or sponsor transportation, transportation options are very limited. For counties with limited general public transportation services available, this non-Medicaid population often slips through the system's cracks.

Regional Medical Trips – Trips to Rochester, Syracuse, Buffalo, and other nearby urban centers can be very difficult to serve, especially for non-Medicaid populations. Some organizations have a regional trip on certain days of the week or for certain populations, like veterans; but in overall, traveling to a regional medical center is extremely difficult for some individuals.

Door-through-Door Assistance - Many frail elderly and persons with disabilities require assistance to board a vehicle or transport packages into their homes. Public transit operators are not allowed to provide this high level of assistance to passengers, and where other services are not available, many individuals are not able to make trips. Further, some individuals with visual impairments may be able-bodied to get to a curb-side vehicle, but may not be aware the vehicle is there, especially in busier urban settings.

Staff Time/Funding – Most involved county and agency staff are aware of the needs in their communities. However, carving out time to focus on coordinating transportation across agencies is difficult to nearly impossible in most counties. Many have made considerable strides even without a full-time staff member leading the way, but the prospects of gaining county approval for a new hire are very slim in most cases. This limitation stymies much of the momentum among potential coordinating partners.

RGRTA Staff/Support/Funding Limitations – There has been a consistent decrease in state aid for the RGRTA, and the trend seems likely to continue. Expanding service in rural areas or investing in regional projects may be difficult in the future.

Taxi Service - Taxi companies are very limited in some rural areas and where available, do not always fulfill the need for safe, affordable, same-day service. The lack of accessible cabs and

perceptions of poor service quality limit the utility of taxis to individuals as well as agencies who may want to contract with them.

State-Level Issues

New York State Medicaid

The State of New York is looking at the potential of revamping Medicaid transportation, which has been structured as a county-by-county operation in the past. Local Departments of Social Services do not know how such a restructuring will affect their service delivery models if the state decides to regionalize Medicaid delivery systems in the area in the coming years.

In late 2010, the New York State Department of Health (DOH) issued a Request for Proposals (RFP) for a regional Medicaid broker in the Hudson Valley area in an effort to contain or reduce state Medicaid expenditures. The RFP includes the counties of Albany, Columbia, Fulton, Greene, Orange, Montgomery, Putnam, Rockland, Sullivan, Ulster, Warren, Washington, and Westchester. The RFP states that New York State is looking to move toward more regionalized models for Medicaid transportation service delivery in order to save on administrative functions such as screening and prior authorizations for trips.

Heretofore, the state delegated Medicaid authority to each county, leaving the local Departments of Social Services to procure transportation brokers and establish rates, which the state DOH would approve. This new model, for which the Hudson Valley project is a pilot, would centralize some of this authority and create regional Medicaid transportation brokerages, relieving the county offices of cumbersome administrative duties.

Some stakeholders in the Genesee-Finger Lakes Region expressed strong support for regionalization of Medicaid transportation. It is believed that this structure would eliminate county barriers and create cost efficiencies, especially for those trips in which a client is taken to a distant facility that is in the county instead of a nearby facility in a different county. Other stakeholders did not believe that this structure would benefit their Medicaid transportation programs. One of the rural counties believed that their rigorous screening process would be compromised if a larger call center less familiar with the county residents and local context were to screen trip requests instead. Two rural counties in the GTC region are already among the counties with the lowest cost per trip in the state. They worry this restructuring will cost their counties more in the end.

The State DOH's RFP stated that service would begin in the spring of 2011 for the Hudson Valley regional brokerage, though this transition had not occurred as of July 2011. No RFP had been issued for any other region in the state as of July 2011, but this regional model may greatly affect service delivery in New York State and in the Genesee-Finger Lakes Region in the future.

New York State Office for the Aging / Department of Health Initiatives

In the past, the New York State Office for the Aging and the Department of Health were not working cooperatively to develop policy for the state's programs and funding streams targeting older adults. Traditionally, the Department of Health only focuses on medical transportation, and is not involved in the important quality of life trips that lessen the need for more intensive care for seniors. The Office for the Aging focuses on Aging-in-Place initiatives as beneficial to senior health. The two departments are beginning to coordinate policy more formally, which allows local

Offices for the Aging to deliver services in a more comprehensive way, but some counties still saw this state policy coordination as a barrier to local service delivery.

Central Region

As an overall system, the Central Region has substantial coverage, especially in comparison to the other counties. Still, unmet needs and barriers to service coordination exist. For instance, even with the available transportation options, a LifeSpan survey of 470 seniors in 2007 found that 23% of respondents were forced to cancel medical appointments because of lack of transportation. RTS covers Rochester's core very well, but special needs client groups are still left with few transit options. A strong network of independent nonprofits has come together to fill in gaps in the system where RTS or Lift Line is not able to meet residents' needs. This group has accessed funding for a mobility manager, who is housed at Eldersource, a collaboration between LifeSpan and Catholic Charities. This core group has been able to access funding to continue their coordination efforts, but there is still much to address in Monroe County.

Unmet Needs

- Volunteer Drivers and Liability – Liability is a major barrier for volunteer driver pools. One organization recently established minimum insurance requirements for their volunteer drivers.
- Dialysis Transportation – Hospital social workers schedule chair times for dialysis at times when transportation is not available, and transportation providers as well as Monroe County's mobility manager have not been able to work with hospitals to change this procedure.

  Dialysis transportation can also be very expensive for some clients, especially seniors, even with the fare reduction that Medical Motors offers. Lift Line is not always available at the hours needed, with some dialysis appointments set for 6:00 AM.
- Information – Residents do not know what is available or where to go to get information about transportation. Many seniors get around through rides with neighbors, churches, or other social contacts and are not aware that public transportation is available.

  There is also a need for more coordination of services among existing nonprofits, with more formal communication that supports mobility management programs.
- Quality-of-Life Trips – Very few services provide social transportation for seniors. Medical Motors and STAR do them, but other than these, many seniors cannot make these quality-of-life trips.
- Cross-County Borders – Traveling across county borders is nearly impossible for many clients due to regulatory barriers. This ends up costing more in cases where medical facilities or destinations are closer to a client's home than one that is in the same county.
- Client Affiliation – Medicaid clients in Monroe County are generally well-served with transportation services. However, Medicare-only clients and others who are not on Medicaid may often slip through the cracks.
- Demographic Needs – The demographic analysis in Chapter 2 shows a high percentage of transit dependent populations in Downtown Rochester, especially in the northern sections and west of the Genesee River.

- Perceptions of Transit – Riding transit is not the first choice for most individuals; residents will not take the bus unless they have no other option. Some residents are uncertain about how to use the bus and fear getting lost.

  There is a perception that Lift Line is not reliable enough for their clients to use. Clients have to schedule several days in advance, and some are only eligible seasonally.

- Federal Funding Programs – Some participants have noted that there are more restrictions for nonprofits or non-public transit operators to access federal funding. One example discussed was the four vehicle limit for 5310 recipients.

- Same-Day Transportation – There is limited affordable service for same-day or last-minute door-to-door transportation. There are also no accessible taxicabs in Rochester for persons who use wheelchairs.

- Lift Line – Some Lift Line riders have difficulty scheduling their trips at the time needed during the allowed ADA window of one hour on either side of the requested time. Rides can be difficult to schedule if not requested several days in advance. The Lift Line eligibility process can be very difficult for many individuals.

  The seasonal eligibility window (November 1st – March 31st) does not accommodate many clients' seasonal mobility issues. For instance, snow removal on sidewalks can be an issue even in October; also, some riders have heat-related issues and should be considered for other eligibility windows.

- RTS – Some study participants reported that the wheelchair lifts on some RTS buses do not always work; however, RTS does have a strict policy not to allow buses from going out on the road if the wheelchair lift does not operate. A participant also reported that some drivers do not stop for individuals who use wheelchairs and are waiting for the bus. When this type of incident occurs due to a bus being at full capacity and unable to stop, the RTS has a policy of sending a vehicle to pick up the client and take them to their destination.

  Some participants reported that the hub-and-spoke system takes a very long time for cross-town trips. Others discussed their need to travel to outlying communities like Fairport, Webster and Penfield that only have RTS bus service to a park and ride. Workers who travel to client homes in these outlying communities and who do not have access to a car have difficulty reaching their destinations.

- Taxi Service - Some organizations use taxis frequently; some, such as ABVI, have a contract with a particular cab company. Still, this contract does not guarantee service quality.

Existing Coordination

- Foundation Grant and New Freedom Grant – Several groups attended an Easter Seals-sponsored program several years ago, including the Monroe County Office for the Aging, LifeSpan, Catholic Charities, and Medical Motor Service. The group put together a blueprint mobility management plan for the region. The Greater Rochester Health Foundation funded a two-year project to begin coordinating services in Monroe County (2008-2010). Medical Motor Service has used part of this money to purchase AVL systems for some of its vehicles.

Medical Motors is the lead agency with the RGRTA to enhance mobility management in the region and is the recipient of a New Freedom grant. This new project will be operated by Eldersource, a collaboration between LifeSpan and the Catholic Family Center. United Way is matching the funding, and there is a large volunteer transportation component. The grant is for $100,000. Eldersource utilizes 2-1-1 for its TRAC service, a transportation referral service.

All aforementioned groups are working together with the Ad Council to develop a marketing plan for the TRAC service.

- Senior Shopping – The Monroe County Office for the Aging and the Ibero-American Action League have applied to the National Center for Senior Transportation to provide shopping transportation for older adults in a low income section of northern Rochester.
- Wegman's Supermarkets – Wegman's sponsors a transportation program targeted to seniors and persons with disabilities. These trips are provided by Medical Motor Service and amount to 5,700-6,000 trips per month around the Rochester area. Wegman's also gives a corporate donation for capital expenses to Medical Motors.

Eastern Region

Two counties in the Eastern Region, Ontario and Wayne, have the second and third highest populations behind Monroe County in the region (103,850 and 94,600, respectively) and each have strong transportation networks serving these populations. The remaining two, Seneca and Yates, have the two lowest populations in the study region (34,169 and 24,591, respectively) and fewer providers than Ontario and Wayne. All four, however, have unmet needs and gaps in their systems and can benefit from more coordinated and collaborative systems.

Many clients in the Eastern Region not only need to travel to Rochester for some trips, but also east to Syracuse or south to Ithaca. The multiple orientations of services in the larger region make planning challenging. From a demographic standpoint, as shown in the Composite Needs Index in Chapter 2, the pockets of greatest need are in Newark, Canandaigua, Geneva, Waterloo, and Penn Yan.

Ontario County

Ontario County has the only independent transit system in the region, which has given the county a bit more flexibility in route planning and meeting its population's needs. County planning staff work with several primary partners, including the Arc, to coordinate service planning and develop solutions to the county's transportation needs. Several current projects are substantially changing transportation service delivery in the county. However, several needs and gaps are still apparent as the county works towards improving its system.

Unmet Needs

- Cost, Funding, and Staff Time – Many people cannot afford to use the CATS system, especially seniors who are on a very limited income. The Office for the Aging does subsidize some trips, like dialysis, at 50%, but with the service cost of $60 per week, many still find it very expensive.

The Department of Social Services did have funding for bus passes to employment through the TANF program Community Solutions for Transportation (CST), but the funding is no longer available.

A primary barrier to a lot of the transportation coordination projects in the county is staff time at the County offices.

- Employment Trips – Employment trips are a major problem for many residents of the county. The bigger employers can be difficult to get to geographically. For 2nd and 3rd shift workers, the hours of CATS operation do not accommodate both directions of their needed travel. Even some 1st shift workers cannot get to their jobs early enough using CATS.
- Information – Many residents are not aware of all of the transportation services available in the county. With many of the new changes coming to CATS, CATS is planning an advertising campaign, conducting outreach through radio, newspaper ads, and other local channels.
- Services for Frail Elderly – Getting on and off buses is very difficult for the frail elderly; they are very afraid of falling and getting hurt.

Existing Coordination

- Dialysis – The Office for the Aging currently coordinates with CATS through a small contract for dialysis patients. Dialysis clients are accommodated on Dial-A-Ride.
- Arc Coordination with General Public Rides – CATS is opening up Arc work center routes to the public. This is a major coordination project and is meant to help serve rural areas. There will be no charge to the public, but the County will reimburse Arc for any public clients carried. The project is funded through a New Freedom grant.
- Coordination with Major Destinations/Employers – Wegman's has a senior shopping shuttle in the county, much like the one in Livingston County.

  The County has discussed some of these transportation needs with employers and is working on making employment destinations more accessible. The Victor Chamber of Commerce has asked the County for help with a survey of employers regarding transportation, which the county will be conducting in the future.

Seneca County

Seneca County's difficult geography stands out as a challenge even among the eight rural counties in this study. With major out-of-county destinations in three disparate areas – Rochester, Syracuse, and Ithaca – and long distances in the north-south geography with very small communities, covering the county geographically is difficult. The Seneca Transit Service (STS) has become an important piece of the county's transportation network since it began service six years ago. Another major service provider is the Seneca-Cayuga Arc, which is beginning to implement a New Freedom grant that has the potential to change the county's transportation network greatly. Taking unmet needs and system gaps into account while planning this effort, as well as working closely with STS, will be critical to meeting the needs of Seneca County residents.

Unmet Needs

- Geographic Constraints – Seneca County has a difficult geography for transit service, and there is a north-south divide in orientation. Individuals in the north generally orient toward Rochester or Syracuse for out-of-county services; the south generally toward Ithaca or Watkins Glen. Some also travel to Buffalo for services. There are fewer destinations in the south end of the county, and as a result fewer transportation services. Many residents are frustrated by this lack of service.

  Seneca County is rural, with very small towns and very low densities, making travel difficult. There are a few churches with volunteer driver programs, but for some, it is still very difficult to get to destinations.

- Out-of-County Travel – Crossing county lines can be difficult for clients; for instance, a test facility in Ontario County is not accessible to people who are not Medicaid clients.

  Seneca County does not have many major destinations in-county aside from local shopping like grocery stores. For many services, residents have to leave the county, and a county-wide transit system does not meet that need. About half of the Arc clients' doctors are not in Seneca County; many are in Geneva in Ontario County. STS does have a route to Geneva, but does not have the operating authority to go east into Cayuga County.

  Dentists who accept Medicaid are largely outside of Seneca County, many in Auburn.

  Transfers between services or at county lines are difficult, though connections do exist. Residents would like to see better links with Tompkins, Cayuga, Schuyler and Wayne counties.

- Employment Transportation – Some individuals need transportation to and from work in the off hours, when STS is not available. This group is small, however, and providing transportation for them would not be cost effective for STS. Many entry-level workers and Amish residents use the Dial-A-Ride service that STS provides.

  The Wheels to Work program, which helps low income individuals purchase vehicles, is going to be cut by the State, creating a new population of individuals with travel needs.

- Perception of Transit – It was reported that many residents of Seneca County are afraid to use the bus or do not want to. One example reported that some high school students use STS Dial-A-Ride, but often request to be dropped off out of sight of the other students.

- Expanded STS Service – STS recently discontinued service to the outlet mall because the ridership was very low. Many residents work at the mall, but locals going shopping did not use the transit service.

  Weekend and some evening transportation is necessary for residents to access some employment opportunities and shopping.

Existing Coordination

- Seneca-Cayuga Arc New Freedom Grant – The Seneca-Cayuga Arc received a New Freedom grant to implement a ride share program, opening up some Arc routes to older adults, persons with disabilities and persons with low income. The Arc is still in the planning stages for this grant. The grant is available for three years for start-up costs, after which the program will be self-sustaining.

  This grant will eventually work with both STS and the transit system in Cayuga County. Vehicles will be equipped with Mobile Data Terminals (MDTs) and the system will have Automatic Vehicle Location (AVL) to optimize vehicle utilization. The Arc is currently working out wrinkles in the system and training its drivers to use the system. The Arc will use the software Flex T for this AVL system.

- Arc-STS / County Coordination – STS does some Arc transportation currently, but only for work trips.

  The Arc does some dialysis appointments for the Department of Social Services clients. Three Arc drivers are “public transportation drivers” and take clients up to Strong Hospital in Rochester and University Hospital in Syracuse.

- Coordination with Other Counties – STS has two stops where they link with CATS in Ontario County, at Exchange Street and the hospital in Geneva. STS and CATS communicate to let the other know if the bus will be late so that the other bus can wait for riders who are transferring.

- Employment Transportation – STS has attempted to work with some major employers in Auburn, but the employers were not interested in subsidizing a route for their workers. The RGRTA did not approve the route because there was no guarantee of ridership.

Wayne County

Wayne County has several well-established transportation providers; Wayne Area Transportation Service (WATS) is the largest provider, having contracts with a large number of county agencies, private nonprofits, and private employers. In this way, Wayne has a somewhat programmatically coordinated system, although some other large providers still operate mostly independently from WATS. Many members of the county's transportation network recognize the potential for cost savings in a more coordinated system, but funding has been a barrier to setting up a single coordinator or county effort. Transportation service and vehicles are generally available in Wayne County, but as funding becomes even more constrained, coordinating the various elements of the system will be paramount to retaining the quality of service in the county.

Unmet Needs

- Evening Hours – Evening hours are difficult for many people to find transportation. Available services end too early for them to be used for evening activities or evening work shifts.
- Trip Type – There is a need for more services for medical appointments and employment transportation, especially to job training sessions. There are not enough services for people trying to access employment. Also, there is only one hospital in Wayne County; most medical trips must travel out of the county to other hospitals.
- Funding – There are plenty of vehicles and existing transportation services in Wayne County, but funding operations is a major issue. Funding is the primary issue for WATS services and for all WATS routes.

  The Department of Aging and Youth takes seniors to meal sites three times per week, in which participation increases 60%, but the Department lacks funding to provide this service every day. WATS was helping transport seniors to nutrition sites, but had to stop because of funding issues.

  Dialysis trips are $13 round trip for private pay customers (those unaffiliated with a sponsoring program). Medicaid is the only available funding program that covers the entire cost; Aging and Youth is able to cover one trip per week for its clients going to dialysis. WATS has 30 dialysis clients total, and most all are self-pay.

  Several programs have been cut recently, greatly limiting the amount of transportation aid some departments have. The TANF Community Solutions to Transportation program was completely eliminated, and the NYS Office for the Aging transportation budgets were cut by 50%. State funding is expected to be increasingly difficult to acquire.
- Grant Limitations – Grants only fund projects for a certain number of years. Any project must be sustainable beyond that time, because the funding is only available for two or three years.

  The mechanism used to allocate transit funding is seen as difficult for rural areas. Amounts are based on the number of individuals in a certain jurisdiction, with no consideration given to the distances transportation systems must cover in order to access the population and major destinations.
- Geography – Wayne County is very rural – the county is the same size as Monroe but with a fraction of the population, dispersed across the county. Serving this dispersed

population is very difficult. There has not been a comprehensive study to determine areas of need in the county

- Department Coordination – Each department is primarily concerned with the department's own clients more than coordinating service. This results in some programs paying more than is necessary for transportation. Some stakeholders have expressed the need to set up a group that meets regularly to discuss transportation issues.
- Information and Perception of Transit – There is a lack of public awareness of WATS among the population at large. Most generally understand the fixed route system once they are aware that it is available, but many do not know about or understand all of the specialized services that WATS has available. Moreover, many residents do not want to ride the bus in Wayne County.
- Demographic Changes – Aging-in-place initiatives will change where seniors are living and what their needs will be. Aging-in-place creates more transportation need in more dispersed locations, and keeping up with this need in the future will be very important. Even now, there are sometimes not enough volunteer drivers to help with programs like home meal delivery.

Existing Coordination

The County departments have an informal network of providers and an informal referral system, but there are also some formal coordination projects.

- JARC Grant – WATS did have a JARC grant that Wayne County applied for (at WATS' request) to fund Welfare to Work. The project ran from 2009-2010 but the funding has been fully used. Since there is no more funding, the County may have to discontinue the program.
- WATS Contracts and Coordination Projects – WATS and DSS worked together to coordinate a route along the northern corridor that would serve some Medicaid trips as well as general public trips. The route travels to Rochester twice per day, five days per week. Medicaid clients pay a certain rate and the private pay customers pay a regular transit fare. The route has been operating for five years and is used by mostly self-pay customers.

  WATS shares a maintenance facility with the county and gets fuel at county cost.

Yates County

Yates County is the only county in the study area without a public transportation system. Members of the existing human service transportation network have been interested in establishing some type of service, and the Yates Arc has taken on a major leadership role in this capacity. With public transit funding through the mortgage tax likely continuing to be a contentious issue for the county, working with the Arc to develop a system may be the path Yates takes toward developing a public transportation system. In the meantime, many transportation needs exist in the county, where residents have the fewest mobility options of any in the region. Though Yates does not have a Transportation Coordinating Council, the Yates County Health Planning Council meets monthly, and transportation is a major point of discussion.

Unmet Needs

- Public Transportation – Yates County has no public transportation service. Accessing County services like workforce development in Penn Yan is not possible from outlying towns like Dundee without some type of private transportation.
- Veterans and Demographic Changes – The number of returning veterans is growing quickly in Yates County and will continue to do so as individuals return from Iraq and Afghanistan. This population will likely have a high level of medical needs. The County has only a patchwork arrangement for transporting veterans to the VA's in Syracuse and Buffalo.
- Funding – As the state looks to limit jurisdictions' abilities to tax, the County will have to struggle with ways to keep quality-of-life services without those services being a County financial responsibility. A property tax cap will make funding additional services extremely difficult.
- Employment Transportation – There is limited access to employment and GED/Community College classes for some residents of Yates County, especially in pockets of poverty such as Dundee. Some families only have one vehicle, limiting the opportunities a spouse or adult child can take advantage of. Some children in this area have only seen their small community and are not exposed to other parts of the county or state. The County has discussed the possibility of a satellite office in this area, but with limited funding, it may be difficult.
- Mennonite Community – Yates County is home to a large Mennonite community which does not use personal automobiles for transportation. An informal network of drivers exists to serve this community when they have needs that cannot be met with other transportation options such as horses and buggies or bicycles. Some of these drivers charge very high rates for transporting individuals from the Mennonite community because there are no other options. This community would benefit from public transportation services that are less expensive.

Existing Coordination

- Strategic Plan for Yates County 2007 – Many focus group participants were part of the 2007 transit feasibility study for Yates County. The County did not want to raise the mortgage tax another 0.25% to become part of the RGRTA subsidiary group. The

mortgage tax discussion would be even less successful now because of the economy, and the state may pass legislation making it harder for jurisdictions to raise taxes.

- Pro-Action/Yates County Office for the Aging – Pro-Action coordinates with some other county programs, such as Medicaid, to transport clients. They transport seniors 60 and over to medical appointments and into Rochester when necessary. Pro-Action has been able to work with doctors and dialysis clinics to schedule appointments and chair times that accommodate the Pro-Action transportation schedule. Clients have all gotten over their fear of riding transit vehicles and of being left at an appointment or doctor's office.
- Yates County Arc Public Transportation Plan – The Yates County Arc has applied to the state to become a public transportation provider, for which it must have the authority designated by NYSDOT. The Arc sent in the proposed routes, which are 10 existing Arc routes that have legs with no passengers. State Transportation Operating Assistance (STOA) funding may be able to help assist in putting this system together. The Arc will also be able to access public transportation funds. The Arc should know by August of 2011 if they have been approved to be a public transportation operator by the state, after which the Arc board must approve any changes in Arc transportation operations.

  Initially, Yates Arc applied to be a provider with two contracts from Yates County: through Yates County Medicaid and through the Finger Lakes Alcohol Counseling and Referral Agency (FLACRA). The State DOT already inspects Arc buses, and many of the other elements are in place for the Arc to begin operating as a public transportation provider.

  At the beginning, the Arc will not comingle populations from different programs, meaning that they will not transport Arc clients with other populations that are utilizing Arc buses. They will consider going to places like Geneva in Ontario County if they get approval from the state, but as a starting point, they are just planning to operate on existing Arc routes.

  Steuben County began operations by starting small. The Arc has consulted with Steuben County and Ontario County on their experiences with coordinating Arc and public transportation. When the Yates County held meetings several years ago, the Mennonite population came to meetings to discuss their transportation needs. The Arc may eventually be able to meet the needs of this population, but they are planning to start small and build from there. Steuben County also has been able to provide for their Amish population, which they were not aware was a needs group until after they began service.

  The Yates Arc is a member of the Yates County Health Planning Council, which meets monthly and has been kept abreast of the Arc's plans. This groups includes FLACRA, the Department of Social Services, Community Services, Soldiers and Sailors Memorial Hospital, Community and Migrant Health, and the Housing Council, among others. Participants in the Coordinated Plan focus group who are not members of the Health Planning Council were very excited to hear about the prospect of public transportation in the county, but acknowledged that it takes a couple of years to get services up and running.

  Staff at the Arc is very familiar with the software VersaTrans, which could be utilized for coordination activities in Yates County.

Western Region

The Western Region has four transit systems and a greater population than the Eastern Region, making service coordination for most counties more easily within reach. The divide in orientation between Rochester and Buffalo for all but Livingston County can crimp transportation resources and make planning difficult. Livingston County benefits from a county-wide transportation broker, and Genesee County has a Transportation Coordinating Council that regularly meets. Wyoming County has a strong set of providers but needs a more cohesive network, and Orleans County is just beginning to establish more coordinated partnerships among its providers. In the demographic analysis in Chapter 2, the Composite Needs Index for the Western Region indicated the highest levels of need in Batavia, Medina, Albion, Dansville, and Mt. Morris.

Genesee County

Genesee County has a Transportation Coordinating Council that meets regularly to discuss issues and plan for county-wide transportation needs. Staff from various departments sit on this council, and though a chair from the Department of Aging heads the effort, no full-time transportation coordinator exists to take on these duties on a coordinated, county-wide scale. The county recently completed a survey of residents about transportation needs and is poised to take on more coordination and study. A major barrier to advancing coordination is staff time and funding. Meanwhile, the county has several significant transportation gaps and unmet needs in its existing provider network.

Unmet Needs

- Wheelchair-Accessible Service – There is limited wheelchair-accessible service in the county. Due to lack of funding, the new Independent Living Center is unable to provide transportation to clients. Until July of 2010, clients were able to ride in the center's wheelchair-accessible van. Presently, the only service for out-of-town wheelchair-accessible trips beyond private pay services is CATS. Batavia Bus can be difficult to use for clients who use wheelchairs. There is curb-to-curb service in the county, but not door-to-door.
- Out-of-County Trips – Trips to destinations outside of the county are challenging, and out-of-county trips to accommodate individuals using wheelchairs are even more challenging. Batavia Bus does not provide out-of-county service, and transit services in the surrounding counties do not enter Genesee County.
- Evening Hours/Transit – For those taking transit to employment, there is a gap in transit service in the evenings and on weekends. For DSS clients, jobs are often at odd hours, so clients may be able to take transit for one direction of their trip, but not the other.
- Staff Time – Staff time for long-term planning is limited. Staff for other tasks, such as managing transportation programs, is also somewhat limited. DSS has one dedicated transportation staff member who also manages their volunteer driver program. The Office for the Aging also has volunteer drivers and has two staff members who are involved in managing this program. Getting a county-wide one-call center in place is a goal, but getting the planning time and funding required for this has been difficult.

- Geographic Challenges – Rural area clients are difficult to get to; the rural populations get very little transit service.

  The county is geographically split: the eastern part of the county is Rochester-oriented, and the western part, Buffalo-oriented. This makes transportation service planning very difficult. Still, Genesee County benefits from having one center, Batavia, and not multiple nodes like Wayne County.

- Land Use – Some residential facilities have very good access to amenities and other destinations, but there is a lot of development that occurs far from transit routes and far from other destinations. The County has a smart growth plan, but local municipalities make the final land use decisions. Since they are not involved in transportation, they do not always take into account the ramifications of land use decisions on the transportation system.

- Regulatory/Programmatic Barriers – Some county agencies are siloed, and some attendees felt that they could all benefit from working more closely. Many of these programs are constrained by regulations that govern their funding streams and eligibility.

- Funding – Batavia Bus had planned an out-of-county medical service, but it was deemed too expensive. Projecting ridership for new services is very difficult.

  The County funds transportation, but the towns and municipalities that benefit from the service do not contribute.

Existing Coordination

- Transportation Coordinating Council and Grant Application – Genesee County is working towards a more coordinated system through its Transportation Coordinating Council. The County applied for funding through the GTC to hire a mobility manager to take on coordinating duties full time.

- Resident Survey – In addition to this grant proposal, the County conducted a survey of over 450 residents in the fall of 2010 to help determine level and type of transportation need in the county. A few results of the survey are:

  - Respondent primary mode of travel:
    - 65% of respondents drive alone
    - 34% ride with family
    - 22% ride with friends
    - 15% use B-line
    - 5-6% use taxi service/ DSS Volunteer Medical Transportation
    - 4% use CATS
    - 2% other

  - Medical appointments are the #1 reason people use transportation services; a distant 2nd is grocery/pharmacy and a close 3rd is shopping.

  - Other than using other types of transportation, reasons the respondents did not use public transit – “routes don’t serve my needs”; “inconvenient”; “not aware of available services.”

- The vast majority of out-of-county trips are for medical reasons, with the primary destinations being Monroe County, then Erie County, then Orleans County.
- Sixty-five (65%) of respondents who need out-of-county transportation assistance cannot get a ride.

Livingston County

Livingston County has the distinct benefit of a full-time transportation broker to manage its human service transportation network. This broker is an employee of the Department of Social Services (DSS) but works with all of the members of the county's transportation network to develop programs that fill gaps in the system. The broker's position has enabled the county to develop successful coordination programs such as a medical shuttle to Rochester and coordinated dialysis transportation. Unmet needs still do exist in the county, however, and are detailed below.

Unmet Needs

- Trip Type – A major need in the county is elderly social trips. Many services provide trips for medical appointments or grocery shopping, but there are few for social trips.
- LATS – LATS provides county-wide service but cannot meet all clients' needs for a variety of reasons. Rural transit service is especially difficult and costly to provide. Several needs relating to LATS were discussed, including:
  - Many people have to wait for long periods of time for their bus or for their ride.
  - Similarly, many clients at the Department of Health clinics have long waits or evening appointments and cannot use LATS for both to and from trips. In some cases, LATS can take a client to an appointment, but DSS has to send drivers to pick them up.
  - There are few options for after hours or weekend transport. Service stops too early on weekdays to accommodate some needs, and some routes are not available on Friday. There is no service to county residents within the county on weekends.
  - There is a perception that LATS routes are not flexible enough to accommodate residents' needs.
- Employment Transportation – Many jobs are not 9-5, and many are off-hours. Since LATS stops at 5:00 PM, some individuals cannot use it for their employment trips.

  Some members of the focus group would like to see more direct routes, that travel straight from Dansville to Geneseo, for instance, or other more direct routing in the county.
- Staff Time – Catholic Charities has 25 volunteer drivers, and more staff is needed to help coordinate the drivers. With 1.5 or 2 additional staff members to work with volunteer drivers, Catholic Charities could serve a large number of additional clients.
- Out-of-County Trips – Agencies may be forced to utilize services farther from a client's home but in the county rather than a closer facility that is in another county.

Existing Coordination

- County Transportation Broker – Livingston County established a county transportation broker within its Department of Social Services (DSS) following the completion of the Strategic Plan for Public Transportation in Livingston County in 2001. The broker assigns DSS clients needing transportation to one of several transportation providers in the county.

  In addition to these primary duties, the transportation broker has undertaken several coordination projects in conjunction with other organizations and agencies in the county in recent years, including:

  - A medical shuttle takes clients to Rochester on Tuesdays and Thursdays; a major educational effort was undertaken to make this project a success, primarily in advising clients to make their medical appointments at the appropriate times. Any resident may ride the Medical Shuttle for a cost of $13 round trip.
  - A senior shopping shuttle is partially sponsored by Wegman's, two days/week and travels between Mt. Morris and the Wegman's.
  - In 2008, the Arc of Livingston and Wyoming received a New Freedom grant to take dialysis patients to their appointments. This required cooperation between the county's transportation broker, the Arc, and the dialysis clinic. Though the dialysis clinic does have difficulty scheduling chair times around the available transportation, they have worked together to create a successful program.

Orleans County

Orleans County has the newest transit system of any county in the study region, having been in operation for only a few years. In that time, it has been able to develop some partnerships with different organizations in the region and to coordinate with the nonprofits CATS, the other major transportation operator in the county. Coordination currently occurs in a more informal way, with no agency or individual serving as a central point of contact. Some providers are interested in developing partnerships with employers or major trip attractors like those that exist in other counties.

Unmet Needs

- Evening Hours/Transit Service – Bus services only run until 6:00 PM, and often medical appointments, classes at GCC, work shifts and other services are later in the evening. More service coverage is also needed. OTS used to operate a route to Batavia that accommodated the students, but had to discontinue it due to low ridership.
- Out-of-County Trips and Transfers – Medicaid trips and the veterans' service can cross county lines; CATS also accommodates seniors on scheduled Medicaid trips as there is space available. However, there are few options for non-Medicaid individuals to use a transportation service out of the county. Out-of-county service to Niagara, Genesee and Monroe counties is needed.

OTS connects to RTS in Brockport but there is no schedule coordination. Only a few riders travel to Brockport in the morning on OTS. It is not possible to use transit and get to Rochester early enough for work because of the connecting schedule.

- Employment Trips – Members of the workforce on the 2nd or 3rd shifts have difficulty getting to and/or from work. Workers on the 2nd shift can often get there using transit services, but cannot get home. Conversely, 3rd shift workers cannot get there, but would be able to use transit on the way home. Even some 1st shift workers cannot get to work on time using transit.

  A particular difficulty is working parents who must drop a child off and/or pick up at day care. Many day care facilities are off the OTS routes, and parents must wait for sometimes long periods of time for the next bus.

- Information – Information and advertising could be improved; for instance, there is no OTS schedule at the hospital for patients to use to plan their trip home or find out how to get to their next appointment.

- Client-based Services – Transportation services for mental health are very limited in the county. Also, non-Medicaid seniors have few transportation options.

- Bus Shelters – Bus shelters are needed along OTS routes for clients who must wait, especially for routes that are near day care facilities.

Existing Coordination

- SUNY Brockport – SUNY Brockport subsidizes the OTS route that serves their campus. There are approximately three trips per day to and from Albion. RTS has connecting service Monday through Saturday.

- Farm Labor and Employment – CATS operated an ARRA-funded employment transportation program for one year. The program helped individuals overcome one of the biggest barriers to employment. However, since the ARRA funds ran out, the program ended in September 2010. CATS also transported farm workers for which the farm paid; this included some medical trips for workers, also paid for by the employer.

  CATS takes six to seven people to work Monday-Friday. These individuals are fit into the existing dialysis runs early in the day.

- Prison to Work – CATS and OTS partner to transport four current inmates from the women's prison. CATS picks them up in the morning, and OTS takes them back in the evening. CATS pays their OTS fare.

- Veterans Transportation – The Veterans Association has five vans which it operates on grants with volunteer drivers; however, the vans are not wheelchair accessible which can be a great difficulty for some veterans. The Association provides maintenance and gas reimbursements. There are 4,000 veterans in Orleans County, and the VA provides approximately 1,500 trips per year, to hospitals as far as Buffalo. Riders must be going to a VA facility to get a ride.

Wyoming County

Wyoming County has a number of providers in their human service transportation network, most of whom coordinate informally to meet the needs of residents. No central transportation coordination exists for the county, but the existing providers work together to meet needs on a client-by-client basis (Wyoming Transportation Service, the private organization Caring Harts, the County Office for the Aging, and the Livingston-Wyoming Arc). The network also benefits from interest and some funding from Wyoming County Community Action, which is involved in transportation planning but is not a direct provider. Though there is a strong informal network of providers, the transportation needs in Wyoming County are significant.

Unmet Needs

- Level of Assistance – Caring Harts is the only service that provides door-through-door service. Other services cannot go inside the clients' houses or help them into a building at their destination. The county needs a stair chair with a tread to assist clients with special needs to get in and out of their homes. As aging-in-place initiatives become the preferred model, this is becoming a major issue.
- Funding and Fares – Many clients who do not receive Medicaid have a difficult time paying for transportation service or cannot afford it at all.
- Information – Many residents of the county do not know what types of transportation services are available to them or that there is a public transportation system at all. Many veterans also are not aware of programs available to transport them to medical appointments.
- Social/Shopping Trips – Many seniors need transportation for grocery shopping or other quality-of-life trips. Many clients call for that type of trip, but there aren't many services that can do this.
- Out-of-County Trips – Only private pay, Medicaid or volunteer services are available for out-of-county trips. Many services, such as dialysis, are only available in other counties.
- Geography – The elderly need transportation service covering a greater geographic area of the county. They spend a lot of time on the bus now traveling between stops. Seniors do take the bus, but on the fixed route loops, they have to wait long periods of time for the bus to come back around.
- Assistance for Vehicle Repairs – Another need in the county is assisting car owners with repairs. Though this is not technically part of the FTA funding study pertaining to this Coordinated Plan, it is still important to note that money for gas or to pay senior car insurance is very important to keep an individual mobile.
- Veterans Transportation – The Department of Veterans Services in Wyoming County does not have a fleet of vehicles. The Department does coordinate appointments to the Batavia VA, but there is a need for in-county transportation for veterans to medical appointments not at the VA hospitals. Another problem is getting the word out to veterans that transportation is available to them.

- Evening Hours on WYTS – There is limited access to transportation outside of the fixed schedule of WYTS. Lack of transportation in the evening hours can significantly reduce the ability of clients to look for work or access jobs.

Existing Coordination

Organizations have an informal referral system among themselves, but few formal coordination arrangements beyond purchasing rides on WYTS for clients or agency referrals.

- Dialysis Transportation – Caring Harts works with dialysis clinics to schedule appointments for clients based on available transportation. Still, some dialysis clinics and clients can be inflexible about appointment times.
- Community Action Grants/Funding – Community Action has funds available for programs, including $40,000 last year for medical transportation, but they only spent 50% of it. The grants available can categorize medical need as an emotional illness or stress, as well, since the foundation believes that preventative measures can be funded to avoid costs in the future.

Potential Coordination Partnerships

Several potential coordination efforts arose from project outreach efforts such as the survey, focus groups, and stakeholder interviews. Most fall into four general categories, briefly described below. Specific recommendations will be developed at a later stage in the study.

Information Dissemination and Public Awareness

As mentioned earlier in this chapter, public awareness of available transportation services is limited. Every county focus group pointed out the need for more public education and information dissemination, and some discussed specific projects that could improve awareness.

Members of the Livingston County focus group were very enthusiastic about establishing a central database of transportation services that would be available to the public and useful to both professionals in the human service transportation industry and also for their clients. The database would be the logical next step for the county, since they coordinate many services already.

Wyoming County discussed the possibility of putting together an informational brochure, both for members of the public and for employees of various agencies who work on client transportation. Wyoming County Community Action may be able to put together a brochure with information about available services, which would be a major short-term step toward a more coordinated network of services.

Travel training can improve public awareness and public willingness to use transit, which is a major problem in many counties. In Monroe County, both RTS and the Association for the Blind and Visually Impaired both already have travel training programs, but other programs could help some seniors or other clients overcome the uncertainty of using the bus. Wyoming and Yates counties also expressed enthusiasm for travel training as a great way to initiate new riders to the services and help encourage individuals, especially seniors, to use public transportation.

Centralized Call Centers and County Transportation Coordinators

Two counties, Monroe and Livingston, have some type of centralized call center and a transportation coordinator or mobility manager who supports multiple transportation programs for a diverse group of clients. Nearly all of the other counties in the region list this type of coordinator or central call center as an essential step in strengthening their county transportation networks.

Monroe County has utilized outside funding to set up its centralized system, – a Greater Rochester Health Foundation and a new New Freedom grant – and Livingston County has been able to have county staff member from the Department of Social Services. Funding a full time staff person is a major barrier to hiring a transportation coordinator for several counties, and two were interested in studying human service transportation funding streams and expenditures in their counties to help prove that a coordinator would be a cost-saving venture. Two other counties have begun researching other avenues for funding or housing a coordinator, such as a local Community Action organization or the Arcs, which would be able to access federal grants for 80% of the cost through the New Freedom program.

A centralized call center could simply be run through a coordinator's office, or could require a bit more investment. Existing 2-1-1 services may be helpful to establishing call centers. The 2-1-1 lines are already used for this in Monroe County and outside the region in Erie County. A call center would not necessarily be located in a county itself; if a more regional location made sense financially, calls could be fielded from anywhere.

Regional Mobility Management Collaborative

Several stakeholders and counties are interested in creating a regional network of mobility managers/transportation coordinators. This concept is a stated goal in the SAGE Commission Transportation study for the region and would be a natural outgrowth of setting up mobility managers or transportation coordinators in each county, as discussed above.

Creating multiple county partnerships could be one step toward a region-wide system. One mobility manager or transportation coordinator could serve two or three counties as appropriate and would be a way to conserve funding if necessary. Alternatively, two or three counties with established transportation coordinators could begin working together, as is occurring informally among many counties already, and eventually build to a region-wide network. In the future, such a network could be the basis for joint purchases such as computers or other capital and could be an important resource for training and regional planning.

Utilizing technology to network these points of contact in the region can greatly increase the capacity and effectiveness of the current human services transportation network. As other counties in the region work to develop more coordination, counties with more coordinated systems could offer invaluable guidance and advice. With some type of technology network to link them, the cross-county barriers would become more manageable.

Program Partnerships and Sponsors

A number of transportation providers – primarily the existing public transit operators – are looking for ways to meet needs through partnerships with organizations in their service area. Some private companies, such as Wegman's Supermarkets, sponsor trips to and from their stores in several counties in the region, including Monroe, Ontario, and Livingston. Several counties, including Orleans and Wyoming, are meeting with other groceries stores about their willingness to

be involved in similar programs. Some grocery store chains, especially Wegman's and Big M, are very receptive to community needs, and some other larger chains are not.

Many transit operators have met with employers in their counties about the possibility of employer-sponsored shuttles or subsidized routes. In most cases, the employers are not interested because they do not see a need among their existing employees. However, WATS in Wayne County has contracts with seven different farmers to transport seasonal workers to and from work as well as to any necessary medical appointments. Orleans Transit Service is hoping to implement this type of employer sponsorship and support, as well.

Also in Orleans County, OTS and Genesee Community College (GCC) are in discussions about the possibility of GCC subsidizing the route between the Albion and Medina Campuses in some way to support student travel. GCC has conducted a student survey which showed that students would like to pay $1 for trips (OTS charges $2). SUNY Brockport sponsors a similar OTS route that connects Albion to Brockport for SUNY students.

In most counties, the Arcs play a major role in the transportation network. Some counties, like Ontario and Livingston, have devised partnerships with the Arcs to transport other passenger groups such as county dialysis clients, seniors, or the general public. The Arcs of both Seneca-Cayuga and Yates counties are in the early stages of putting these types of programs together, and stakeholders in Wyoming County are interested in the possibility of working with the Arc of Livingston-Wyoming to implement similar services.

As state operating funding becomes more scarce, these types of partnerships are critical to maintaining service and meeting local transportation needs.

Chapter 6. Identification of Coordination Strategies

Introduction

Chapter 5 outlined unmet needs and service gaps in the transportation network of the Genesee-Finger Lakes Region. A brief summary of the regional needs and gaps discussed is provided below. The strategies proposed in this chapter respond to these needs and gaps with alternatives designed to support the region's unique characteristics while drawing on successful examples of coordination strategies drawn from across the country.

- Information –Members of the public and professionals alike are unaware of many transportation programs available to them or to their clients.
- Geography – Rural areas are very difficult to serve because of the long distances between points and low densities of residents.
- Crossing County Borders – Some regulatory and coordination factors make cross-county trips challenging.
- Dialysis Transportation – Many clients and agencies have problems scheduling dialysis appointments at times that allow them to use public transportation modes. This is especially true for those without a dialysis clinic in their county. As a result, dialysis trips can be very long and very expensive for an individual or a funding agency.
- Door-through-door Level of Service - Public demand response systems are not able to provide assistance to riders with heavy bags or who need additional support getting from the curb into their destinations. Some nonprofit and private providers do provide this level of service, but some counties lack a provider able to assist door-through-door.
- Employment Transportation – For many individuals, public transportation is not an option for work. The issue is primarily the hours of operation; most public transportation begins too late to accommodate early shifts and/or ends too early to accommodate later shifts.
- Non-Medicaid Medical Trips – If individuals do not qualify for Medicaid or are not clients of organizations that provide or sponsor transportation, transportation options are very limited.
- Regional Medical Trips – Trips to Rochester, Syracuse, Buffalo, and other nearby urban centers can be very difficult to serve, especially for non-Medicaid populations.
- Staff Time/Funding – Carving out time to focus on coordinating transportation is difficult to nearly impossible for most county staff .

Like all other elements of this plan, the numerous focus groups, stakeholder interviews, the community workshop and public meetings, and the provider survey provided input into formulating these strategies and tailoring them to the region's specific needs. After the initial strategies were developed, members of the Steering Committee held a working session to review unmet needs, brainstorm additional strategies, and address implementation details for some of the more complex projects on the list.

Another important resource for this plan is the region's draft Long Range Transportation Plan (LRTP). Several recommendations from the LRTP reinforce the strategies in this Coordinated Plan Update. Among the most pertinent are:

- Create a mobility management program that coordinates existing and future services
- Improve connections between existing RTS, RGRTA regional systems and Ontario CATS services
- Improve Advanced Public Transportation Systems technologies and capabilities to other RGRTA systems and the Ontario CATS
- Coordinate regional initiatives with the 511 NY program to include information on more state travel options
- Improve crosswalks, sidewalks and curb cuts
- Regularly assess public transportation services based on current and projected needs
- Encourage the development of specialized transportation services supplied by nonprofits and private operators
- Initiate the Greater Rochester Regional Commuter Choice Program to provide the public the opportunity to save money and reduce pollution by accessing commuting options other than the single-occupancy vehicle

Strategies for the Genesee-Finger Lakes Region

The subsequent pages show a summary table of the strategies with summary data for each. Following the table are descriptions of individual strategies. For each strategy a lead agency has been suggested to initiate action. The agencies listed are merely possible lead agencies and should in no way preclude other agencies or organizations from leading an effort to address a particular strategy. Costs are also broadly estimated to give potential grantees an idea of what to anticipate in terms of a financial commitment. Potential funding sources refer to the funding programs for which projects are likely to be eligible. These have been determined based on experience from across the nation to provide examples of cities and regions where similar programs have been implemented. In addition to these new initiatives, the Plan recommends the continued support of specialized transportation services and volunteer transportation services in areas where public transit is not sufficient or appropriate through Section 5310, 5316 and 5317 and other funding sources.

Figure 6-1 Summary of Potential Strategies

The following summarizes potential strategies that will help improve mobility for older adults, persons with disabilities and persons with low incomes.

	Strategy	Possible Lead Agency/Champion	Estimated Costs (Capital or Operating)	Potential Funding Sources	Strategy Overview
1	Continuation of Support to Existing Services	Federal/State Existing providers	Varies by program	JARC New Freedom 5310 Municipal, state, or federal agency funding Foundation funding	The Genesee-Finger Lakes region has a strong network of existing providers that fill gaps in the transportation systems where public transit is not able to provide sufficient service. Supporting these organizations, including specialized services and volunteer programs, should remain a priority for meeting regional needs.
2	Bus Stop Improvements	RTS RGRTA regional systems Ontario County CATS	Ped Signals $8,000-$12,000 Bus shelters $3,000-$5,000 Curb cuts $1,500	New Freedom Municipal, county, state or federal agency funding	Provide bus shelters and other amenities at bus stops, transit hubs or transfer points.
3	Centralized Call Centers	RGRTA regional systems Ontario County CATS County Human Service Departments County Transportation Coordinating Councils Nonprofit organizations	New staff for two-person call center $125,000	New Freedom Municipal, county, state, or federal agency funding	As a complement to the county mobility manager (#5), a centralized call center puts information access for all county transportation operations in one place, with one phone number for residents to call to schedule a ride.
4	Centralized Resource Directory	County Human Service Departments County Transportation Coordinating Councils Nonprofit organizations	Development costs for basic directory $15,000 to $75,000	JARC New Freedom	Centralized resource directories are very helpful to consumers, human service agency staff, and advocates who need to find and/or arrange transportation for members of the target populations (low income, seniors, and persons with disabilities) online.

	Strategy	Possible Lead Agency/Champion	Estimated Costs (Capital or Operating)	Potential Funding Sources	Strategy Overview
5	County Mobility Managers	RGRTA RGRTA regional systems Ontario County CATS County Human Service Departments County Transportation Coordinating Councils Nonprofit organizations	Annual full-time salary between $45,000 - $65,000	JARC New Freedom Municipal, state, or federal agency funding Foundation funding	A mobility manager could be an individual, a group of individuals or an organization that provides a wide variety of mobility management functions for consumers, human service agency staffs, and/or for community transportation providers.
6	Facilitate New Partnerships	RGRTA regional systems Ontario County CATS County Arcs	Public Transit – up to $75-80 per hour; Van/shuttle service – between $50 and $60 per hour	Private employers and businesses RGRTA Ontario County CATS	Partnerships with private or other nonprofit organizations can increase ridership as well as provide sponsorship for transit routes. Examples of Arc partnerships exist in Upstate. Other partnerships with private employers and retailers, such as grocery stores and farms, can also be pursued.
7	Innovative Transit Service Designs	RGRTA RGRTA regional systems Ontario County CATS Nonprofit organizations	Public Transit – up to $75-80 per hour; Van/shuttle service – between $50 and $60 per hour	JARC New Freedom Municipal, state, or federal agency funding Private businesses (i.e., supermarkets)	Provide fixed route/fixed scheduled bus service designed to serve senior destinations by improving proximity of bus stops. Neighborhood scale vehicles are used to navigate smaller roads and to be able to access the front entrances of senior-oriented facilities and shopping destinations. Open to all with emphasis on seniors.
8	Job Access Strategies	RGRTA regional systems Ontario County CATS County Human Service Departments Nonprofit organizations	Van/shuttle service – between $50 and $60 per hour.	JARC New Freedom	Create and operate specialized transportation services to create direct links between neighborhoods/parts of counties and key hard to reach employment markets

	Strategy	Possible Lead Agency/Champion	Estimated Costs (Capital or Operating)	Potential Funding Sources	Strategy Overview
9	Marketing and Information Campaigns	RGRTA RGRTA regional systems Ontario County CATS County Human Service Departments County Transportation Coordinating Councils Nonprofit organizations	As low as $5,000 to over $25,000	New Freedom County/municipal funding Private foundations or organizations Nonprofit organizations	In many areas there is a lack of awareness and/or a negative perception of available public transportation services. In conjunction with a directory of services (#4), a marketing campaign can begin to change awareness and attitudes.
10	Regional and County Coordinating Councils	County Human Service Departments County Transportation Coordinating Councils Nonprofit organizations	Primarily staff time	N/A	Create focal points for coordination and mobility management activities. Regional and County coordinating councils could assist in implementing the regional- and county-scale recommendations included in this plan and assist and encourage the implementation of local initiatives.
11	Regional Mobility Management Network	RGRTA RGRTA regional systems County Human Service Departments County Transportation Coordinating Councils Nonprofit organizations	Annual costs between $50,000 - $100,000	New Freedom Other Federal transportation funds	Create a training and support network for county mobility managers in the region. Training could provide mobility managers with background skills and networking opportunities. Network could at first facilitate information sharing, but could eventually become a regional body coordinating rides and other resources.
12	Regional Technology Network	RGRTA RGRTA regional systems Ontario County CATS County Human Service Departments County Transportation Coordinating Councils Nonprofit organizations	Capital costs between $40,000 and $50,000 per county and annual support fee of $5,000 per county	New Freedom County/municipal funding Foundation funding	Equip county transportation networks with technology to link all into a regional network. This network could be used primarily as an information resource for other counties or as a tool for coordinating shared rides.

	Strategy	Possible Lead Agency/Champion	Estimated Costs (Capital or Operating)	Potential Funding Sources	Strategy Overview
13	Senior Transportation Network	Private citizens Nonprofit organizations	None for public sector	Participant dues	Establish a network of seniors interested in paying for high quality, door-to-door service through a membership organization to which seniors pay dues.
14	Taxi Subsidy Programs	County Human Service Departments County Transportation Coordinating Councils Nonprofit organizations	Administrative costs between $10,000 - $50,000; Subsidy costs vary by amount and number of participants	JARC New Freedom	Provide reduced fare vouchers to older adults, persons with disabilities and persons with low incomes to allow for more trip flexibility and increased travel coverage as needed; may also be used to support off-peak employment opportunities. Encourages use of lower-cost travel modes and supports expansion of accessible and community car fleet.
15	Transit Service Expansion and Improvements	RGRTA regional systems Ontario County CATS Community Transportation Providers	Public Transit – up to $75-80 per hour; Van/shuttle service – between $50 and $60 per hour	JARC	Create new services and/or expand existing services to provide service to new areas, expand service hours and/or expand options in area with limited service. New/expanded services may include new options for late-night or weekend service. Build on opportunities to coordinate existing services to maximize efficiency and ridesharing.
16	Travel Training	RGRTA RGRTA regional systems Ontario County CATS County Human Service Departments Nonprofit organizations	Varies by program – with Mobility Manager in place simple programs as low as $5,000	JARC New Freedom	Design programs to train individuals to use fixed-route and/or dial-a-ride public transit. Increasing use of public transit will increase mobility for individual and reduce reliance on higher cost transportation modes.
17	Volunteer Driver Program	County Human Service Departments County Transportation Coordinating Councils Nonprofit organizations	With Mobility Manager in place, may be as low as $5,000	New Freedom	Set up a network of volunteer drivers to help transport individuals with special needs or those traveling longer distances. Strategy may be most effective in more rural parts of the Genesee-Finger Lakes Region.

1. Continuation of Support to Existing Services

Supporting existing transportation providers and programs that provide specialized transportation and volunteer transportation services in areas where public transit is not sufficient or appropriate is critical to maintaining a strong regional network. Organizations that currently receive federal and state funding to provide services should continue to be supported, as many are critical links in the system's mobility network. Many that receive 5310 vehicles rely on the program for vehicle acquisition.

Expected Benefits / Needs Addressed

- Maintains existing levels of service
- Ensures existing needs and gaps continue to be met

Potential Obstacles and Challenges

- Requires matching funding from sponsoring agency (20%)

Application for the Genesee-Finger Lakes Region

Many counties in the region benefit from strong nonprofit or volunteer partners to fill needs where the public transit systems are unable. In both urban and rural areas of the study region, many nonprofits have been providing transportation service for decades, some before the RGRTA regional systems were in place.

Examples of Best Practices

Community Action of Orleans and Genesee Transportation Service (CATS) contracts with a number of agencies in both Orleans and Genesee counties. In Orleans County, CATS provides trips for Medicaid clients, veterans, seniors, farm workers, and dialysis patients. In Genesee County, CATS provides transportation to seniors and persons with disabilities.

Medical Motors is a critical partner in Monroe County's transportation network. Medical Motors provides transportation for over 80 different programs in the Rochester region, including not only trips for various senior and medical centers, but programs requiring highly specialized driver training, like foster care transportation. Beyond its contracted services, Medical Motors has been a leader in the county as one of three agencies to partner and acquire New Freedom funding for mobility management.

Costs

Costs to support these existing service vary by program.

Possible Lead Organizations

- GTC
- County departments
- Existing providers
- Nonprofit organizations

2. Bus Stop Improvements

Improving the accessibility of and access to fixed-route bus stops involves first examining bus stops (and especially those used by or potentially used by significant numbers of older adults and/or persons with disabilities) and evaluating if improvements could help make stops more accessible. Potential infrastructure improvements may include improving or adding sidewalks, removing barriers on sidewalks, adding curb cuts, adding or improving pedestrian crossing and signals (including accessible signals and countdown signals), and adding signage, lighting, benches, shelters, and other pedestrian enhancements, especially in the vicinity of bus stops. In addition, technological solutions akin to wayfinding devices might help persons with visual impairments locate bus stops. This strategy also works well with the travel training/bus buddy program and travel trainers can work with transit agencies to identify and correct bus stops with high needs.

Expected Benefits

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

Potential Obstacles

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

Application for the Genesee-Finger Lakes Region

In many parts of Rochester and especially in the towns in rural counties, street accessibility could be enhanced with improvements such as sidewalks, crosswalks, curb cuts, and lighting. Bus stops also influence the overall accessibility of the bus system. Older adults and persons with disabilities can more easily use public bus transportation if stops are equipped with benches, shelters and information. In other cases, accessibility would benefit from improved maintenance, especially during the winter. The region's Long Range Transportation Plan includes both accessibility improvements and improved snow clearance at bus stops as recommendations.

Examples of Best Practices

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

Costs

Costs to improve access to bus stops will be determined by the type of improvements undertaken as well as site specific factors. As a point of reference, traffic signals typically cost between $8,000 and $12,000; shelters $3,000 to $5,000 and curb cuts from $1,500.

Potential Funding Sources

New Freedom funding may be used to advance projects that would enhance the accessibility of the fixed route bus system. RGRTA also has funding for capital improvements for its subsidiaries.

Possible Lead Organizations

- New York State Department of Transportation
- RGRTA and regional systems
- Ontario County CATS
- County Departments of Public Works
- County Departments of Transportation
- Municipalities that own, operate and/or maintain transportation facilities adjacent to bus stops.

3. Centralized Call Centers

The array of transportation services, eligibility criteria and contact information can be confusing for individuals trying to find information about a ride. Creating one number for residents to call for information and reservations for trips can greatly streamline the process for consumers. All of the existing operators would continue to operate in the present configuration. However, all information and reservation functions would be turned over to the coordinated call center. This may result in some cost savings for existing providers and may result in greater efficiency in the execution of this function.

Expected Benefits / Needs Addressed

- Can create cost efficiencies by consolidated trip reservations and scheduling staff
- Maximizes opportunities for ride sharing
- Improves service delivery and customer satisfaction
- Provides one number for clients to call to access service

Potential Obstacles and Challenges

- Requires project governance, cost allocation/reimbursement models and service delivery standards
- Requires champion agency to take on consolidation and support idea
- Once implemented, requires leadership, on-going attention and committed staff
- Existing providers may not want to outsource reservation function

Application for the Genesee-Finger Lakes Region

Several counties already have or are currently exploring the possibility of creating a centralized call center that would provide information and reservation services to county residents. Ideally, call centers would build on existing partnerships and leadership within each county and would maximize existing resources. Where one organization has already set up a call center for its own trips, it may make sense to continue building on existing infrastructure and technology.

It may be necessary under this option to ensure that trip assignment rules are developed to ensure that the contractor does not exhibit bias in the assignment of trips where multiple provider assignment opportunities exist. Where there is coordination software available, such as RouteMatch, this process can be automated and creates instant documentation of a fair selection process.

Another option for creating a simpler call system is utilizing the existing 211 service available in the region. ABVI is the lead agency for the 211 system in the Finger Lakes Region. The 211 system is available to connect residents with information about human services in the region and can route calls about transportation to the appropriate agency. The City of Rochester also has a 311 system for accessing city services and getting information. The Monroe County mobility manager is linked in to this system; the Livingston County transportation broker is linked in to the larger 211 system and receives referral calls through the network. Tapping into these existing networks could help centralize access to information for residents looking for transportation services.

Further, centralized call centers can also have a web presence, coupled with a centralized information directory, trip planning services, or ridesharing services. The GTC is developing a regional commuter choice website to help expand resident's travel options in the region; a call center could utilize similar technologies for individuals seeking out service options.

Examples of Best Practices

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

Oregon Department of Transportation. The Oregon DOT partnered with the Department of Health and the Department of Elderly Services to create centralized call centers to assist residents who are clients with various agency programs. One number can be utilized to reserve rides in any of the agencies. The call centers are also equipped with cost allocation software, which saves administrative costs for billing. Employees of the call centers work with all departments to ensure that their knowledge of client needs and services is thorough and up to date.

Costs

Costs for a two-person call center and supervisor spending part of his/her time overseeing the operations are approximately $125,000. Capital costs can vary widely depending on the type of technology used, from a telephone system to coordination software.

Costs to centralize information, train staff at a variety of agencies, and educate the public would be staff time. A mobility manager could facilitate this process.

Potential Funding Sources

- New Freedom - if part of duties of mobility manager

Possible Lead Organizations

- Various County Departments

4. Centralized Resource Directory

Centralized resource directory programs are designed to assemble information about available public, nonprofit, and private sector transportation resources in a single location, source, or directory. In many communities, there are services available for low income individuals, seniors, and persons with disabilities, but it is up to the consumer to find out hours and days of operation, availability, eligibility, and how to access such services. In a centralized resource directory, information regarding all available providers is assembled in a single place. The directory can be in written, published form or in a searchable online database format. Centralized directories serve as a tremendous resource for consumers, human service staff and case workers, and advocates.

Expected Benefits / Needs Addressed

- Provide a "one-stop" resource for all public and private transit services and human service agency transportation
- Provide easy contact and eligibility information enabling consumers and advocates alike to identify potential service providers for specific members of the target populations
- Particularly useful in larger communities with a large number of public and private sector transportation resources

Potential Obstacles and Challenges

- Requires a comprehensive data collection effort to create the directory
- Keeping the directory up-to-date has proven problematic in other areas
- Consumers must be aware that the directory exists in order to be useful

Application for the Genesee-Finger Lakes Region

The Genesee-Finger Lakes Region has several listings of community transportation service providers, but none provide a comprehensive listing of available transportation services for the entire region. Even some counties are limited in their ability to provide comprehensive data. Most existing directories tend to be oriented around a specific population such as older adults. In addition, there are few resources that provide a full description of available services, and include information on eligibility and access.

A centralized directory of community transportation services may be a published document or database of transportation services that can easily be accessed by individuals seeking services, and/or by agencies seeking to advise clients about resources. As necessary, the centralized information may also be available in a variety of formats, such as large print, multiple languages and accessible formats for the blind. An agency looking to create a centralized directory can build on transportation inventories prepared as part of this Coordinated Plan Update. Directories can be compiled on a county-by-county level and on a regional level. This strategy is well-suited to the work of a county or regional mobility manager.

Examples of Best Practices

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

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

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

Costs

Depending on the level of branding, media, and type of design, development and production costs can range from $15,000 to $75,000.

Potential Funding Sources

Central resource directories facilitate enhanced access to services by the general public, including the elderly, low income, and persons with disabilities. This actively is expressly permitted under FTA Section 5317 "New Freedom" Program funding as a mobility management strategy. Additionally, the program circular specifically lists the development and operation of one-stop transportation traveler call centers to coordinate transportation information on all travel modes and to manage eligibility requirements and arrangements for customers among supporting programs. Identical language appears in the program guidance for the FTA Section 5316 JARC Program. Importantly, as a mobility management strategy, this activity could be funded with 80% Federal participation.

Possible Lead Organizations

- Various County Departments
- Nonprofit organizations
- Regional organizations

5. County Mobility Managers

Designating a mobility manager to support service coordination is a concept that has gained significant traction in New York State in recent years. Using New Freedom and JARC funds, many areas have funded mobility managers to support coordinated community transportation services. A mobility manager could be an individual, a group of individuals or an organization that provides mobility management functions for consumers and provide a range of services, such as:

- Develop, maintain, and disseminate a centralized directory of community transportation resources;
- Staff a help line and provide trip planning services;
- Provide ride-matching functions;
- Lead coordination planning efforts, potentially organizing (or chairing) a coordination council.

A mobility manager, therefore, may take on a variety of different functions and/or be sponsored by a variety of organizations. Mobility managers are typically found at the county or regional level; however, there is nothing to preclude mobility managers serving through nonprofit organizations.

Expected Benefits / Needs Addressed

- Ensures staff resources are available to implement mobility and coordination strategies
- Creates community resource to promote existing and available resources
- Can highlight mobility challenges and opportunities and raise awareness
- Implements programs and creates awareness that can result in improved effectiveness and efficiency

Potential Obstacles and Challenges

- Individual will need to adopt an entrepreneurial approach and be well supported by key institutions and organizations to be effective
- Individuals will likely need training and support
- Requires matching funding from sponsoring agency (20%)

Application for the Genesee-Finger Lakes Region

Several of the functions that a mobility manager might undertake throughout the region are reflected by many of these strategy sheets. In particular, despite the fact that there are several ongoing programs aimed at supporting older adults, persons with disabilities and persons with low income, there is often little knowledge and understanding that these programs exist and/or how they work. One potential application in the region is to establish county-based mobility managers deployed to build on the inventory created in this study and understand existing resources, subsequently expand awareness of these options. Two counties are already served by mobility managers - Livingston and Monroe.

In addition, the NY State Medicaid office is currently studying the potential of transitioning the non-emergency medical transportation program from a county-based system to a regional one. Currently, no regions have been delineated with the exception of a pilot project, taking place in the Hudson Valley. A mobility manager may help a county bring a local perspective to that process that will be essential throughout the transition process.

Finally, the New York State Office for the Aging is currently producing a plan for future service delivery that includes establishing a mobility management position in each county.

Examples of Best Practices

The State of Wisconsin Department of Transportation used New Freedom funds to sponsor several mobility managers around the state and is supporting them with ongoing technical training and networking sessions. Wisconsin created a flexible program that allows a variety of agencies to sponsor mobility managers; in this way individual counties and communities are allocating resources that best meet their local challenges and opportunities. As a result, mobility managers are being sponsored by organizations and agencies ranging from county offices on aging, regional planning commissions, healthcare resource centers and nonprofit organizations. The role of the mobility manager also varies by location; some mobility managers are focused on local trip coordination efforts while others are setting up coordinated service networks and structures. The Wisconsin Department of Transportation has also set up a year-long series of training sessions to ensure mobility managers have access to technical skills and resources.

Costs

The annual salary cost of a (single) mobility manager in the Genesee-Finger Lakes Region (overhead and program function cost additional) might range between $45,000 and $60,000. Depending on the mobility manager's exact assignments, it may be staffed as a part-time position reducing annual salary costs to between $30,000 and $35,000.

Potential Funding Sources

The cost of funding a mobility manager is allowed under both Section 5316 (JARC) and Section 5317 (New Freedom) under the presumption that the mobility manager provides functions pertinent to each program. In each case, this is considered to be a capital cost, and hence, Federal funds from these programs are available at an 80/20 match. Some other states, such as Wisconsin, have been able to use other Federal transportation programs, including the Rural Transportation Assistance Program (RTAP) to help establish, train, and support a network of mobility managers.

Possible Lead Organizations

- County departments
- Nonprofit organizations

6. Facilitate New Partnerships

Working with local businesses on a case-by-case basis to cater transportation services to their clientele or employee base can result in reduced costs and increased mobility. Especially in rural areas where major destinations are more limited and coverage is an issue, these sponsored routes can fill a need that would otherwise not be addressed.

Expected Benefits

- Potential to subsidize routes with private funding
- Increased/guaranteed ridership on some routes

Potential Obstacles

- Some businesses are unwilling to participate

Application in the Genesee-Finger Lakes Region

Many existing service providers already partner with local businesses to provide specialized services to their clients. Still, there are many more opportunities with private businesses to create partnerships, especially with major employers and shopping areas such as grocery stores.

Where partnerships do exist between agencies, contracts and trip costs should be carefully negotiated and monitored to ensure fair cost allocation and assurance of the least cost, most appropriate mode for riders.

Examples of Best Practices

Wayne Area Transportation System (WATS). WATS has a number of contracts with county agencies as well as private companies. They transport individuals in programs such as adult day transportation, the county's Arc transportation, mental health day treatment, farm employees, and veterans. WATS also contracts with seven farmers in the county to transport workers both to work and for medical appointments. Wegman's subsidizes routes to all senior homes twice per week; which cost-effectively improves service and provides improved cost-recovery for WATS. WATS also transports many dialysis patients for the county's Medicaid program.

Ontario County CATS. Ontario County CATS has partnered with the Ontario Arc to provide general public rides to rural areas of Ontario County. Public passengers will board existing routes alongside Arc clients during Arc's existing hours of operation, generally 7:00 AM to 10:00 AM and 2:00 PM to 4:00 PM. For the most part, these routes originate and/or conclude at a main stop on CATS Route 4, which facilitates public passengers' transfers to the rest of the CATS fixed route system. These ARC routes are particularly beneficial because they open up service to many rural areas not currently served by the fixed route system.

Costs

Operating costs are about $75-$80 per hour for fixed route, $50-$60 per hour for shuttle service.

Potential Funding Sources

- JARC
- New Freedom

- Private businesses

Possible Lead Organizations

- RGRTA and regional subsidiaries
- Nonprofit Providers
- Private businesses

7. Innovative Transit Service Designs

Specialized transit services can include community bus routes and shopping shuttles, both of which target a specific community or population.

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

Expected Benefits

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

Potential Obstacles

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

Application for the Genesee-Finger Lakes Region

Community bus routes have the greatest applicability and success rate in medium to high-density areas with local, short-distanced demand generators, and in communities where they can link high density housing to shopping, medical, and public services. In suburban communities, community bus routes can also be used to connect concentrations of seniors and/or people with disabilities with nearby shopping and medical areas, and to rail stations. Such a strategy might be applicable to neighborhoods in Rochester that are not well connected to some major destinations. Service might be provided one day per week in each community initially.

Special event or seasonal buses could also be used in some communities. For instance, the Concerts in the Park series in Point Breeze in Orleans County are weekly events throughout the summer. Buses could be used to transport residents from Albion and Medina to these seasonal events.

Overview of Best Practices

Wegman's Supermarkets. Wegman's subsidizes routes in several counties in the study region, typically on specific days of the week and to/from specific neighborhoods. Many of these routes have been operating for years and are very popular.

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

The **Chicago Department of Aging's (CDOA) Senior Shuttle** service is a weekly service that links various senior residences to participating grocery stores. Partial funding is provided by the grocery stores.

Costs

Costs for a shuttle service typically range between $50 and $60 per hour.

Potential Funding Sources

- New Freedom
- STOA

Possible Lead Organizations

- RGRTA transit systems
- Nonprofit transportation providers
- Various County Departments

8. Job Access Strategies

This strategy focuses on linking people, and especially those with lower incomes, with job opportunities. Some possible strategies include establishing shuttle services that link transit hubs to employment sites/areas; and ridesharing and vanpool services, along with supporting strategies such as guaranteed ride home services and child transportation services.

Expected Benefits

- Opens job markets to low income and other transit-dependent individuals
- Partnerships with employers may provide opportunities to reduce costs
- Directly supports other regional priorities, such as workforce development

Potential Obstacles

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

Application in the Genesee-Finger Lakes Region

In the outer counties of the region, many residents work at a handful of large employers, but the costs of operating a service would be too high to provide a route. Especially where there are large farms or industrial businesses that have operating hours outside of the typical transit hours, job access routes can be particularly helpful. Partnering with major employers may be a way to help subsidize a special trip early or late in the day for employees. Ridesharing systems such as the Greater Rochester Regional Commuter Choice program currently under development may also assist in linking people with jobs.

JARC funds have been used in the past to sponsor a shuttle route connecting Wayne County residents with employment opportunities. The shuttle was operated through a local nonprofit development corporation involved in neighborhood workforce issues. Other funds have been used in Orleans County by Orleans County CATS for a job access program.

Access to job training can also be part of this strategy. Training providers such as Genesee Community College campuses, Monroe Community College campuses and BOCES all could be served by better transit access. BOCES on Buffalo Road was served by RTS fixed route at one time, but ridership was too low to continue service. Since job training is a temporary need, service other than fixed route may be appropriate.

Examples of Best Practices

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

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

Costs

Costs for shuttles vary greatly depending on operating characteristics. Hourly operating costs for shuttle services typically range between $50 and $60 per hour. Operating costs include driver wages, gasoline, light maintenance, management/supervision and basic level of dispatch.

Potential Funding Sources

- JARC
- Private employers

Possible Lead Organizations

- RGRTA and regional subsidiaries
- Ontario County CATS
- Nonprofit providers

9. Marketing and Information Campaigns

Marketing materials and informational campaigns can be as simple as distributing program information to human service staff and clients or as complex as a highly coordinated and sophisticated regional marketing campaign that builds on existing public transit brands in the region. Public transportation has the distinct disadvantage of competing against a well established system geared towards use of the private automobile, so marketing this alternative is difficult in many areas. Further, many residents are not aware of and do not understand the existing transportation systems available to them. Marketing and information campaigns can create awareness of transit as a community asset. Materials should be created with individuals with low vision in mind.

Expected Benefits / Needs Addressed

- Creates awareness of services for eligible clients
- Can shift perceptions to transit as a community resource

Potential Obstacles and Challenges

- Needs continuous updating if detailed service information (i.e., schedules) is included
- Sophisticated, comprehensive marketing campaigns can be costly

Application for the Genesee-Finger Lakes Region

Information sharing can be facilitated on a county-level to increase awareness of available services. Many counties already maintain a listing of available services, and some agencies make presentations at various organization meetings to discuss transportation services. Marketing campaigns should be more focused on a specific message and would likely require coordination among a larger group of agencies, such as the county transit service and human service transportation organizations.

Examples of Best Practices

Portland Area Comprehensive Transportation System (PACTS), Portland, ME. The Portland Area Comprehensive Transportation System (PACTS), in cooperation with the Greater Portland Council of Governments (GPCOG), saw the need for a singular transit map and timetable covering the greater Portland area and developed a regional guide and publication for transit patrons. The guide presents information for all operators in the area, including Greater Portland Transit District METRO, South Portland City Bus, Casco Bay Island Transit District, Intercity Shuttle-Bus, Zoom Turnpike Express, and the Amtrak Downeaster. Also included in the design is general rider information such as fares and agency contact numbers, as well as information on connecting to transit beyond the Portland area.

Costs

Costs for marketing campaigns can vary widely. Major factors that influence cost include the type of media (online or print), the kinds of brochures and maps produced, the number of providers included, the number of routes and services, the complexity of any schedules included and the sophistication of the branding desired. Some smaller scale information campaigns can be as little as $5,000, and some larger campaigns that include more complex marketing materials and maps can be $25,000 or more.

Potential Funding Sources

- New Freedom
- Private foundations

Possible Lead Organizations

- RGRTA and regional subsidiaries
- Ontario County CATS
- Nonprofit organizations
- County agencies
- County coordinating councils

10. Regional and County Coordinating Councils

Stakeholder participation is fundamental to increasing coordination in a region. Establishing coordinating councils at the county and regional level ensures that a group of stakeholders regularly meets to discuss coordination and mobility issues. These councils provide the building blocks for all of the strategies proposed in this chapter.

Expected Benefits / Needs Addressed

- Ensures that one body is responsible for addressing transportation needs in the community or region
- Enhances local/regional awareness of transportation needs and mobility issues
- Provides a vehicle for implementing strategies, facilitating grants and educating the public and professionals

Potential Obstacles and Challenges

- Maintaining momentum with an ad-hoc group, prior to the hiring of a mobility manager, can be challenging

Application for the Genesee-Finger Lakes Region

Many counties, such as Genesee and Livingston, have Transportation Coordinating Councils already. In others, the focus groups held for this Coordinated Plan Update can serve as a starting point for council membership, and these groups should continue to meet and facilitate discussions about local and regional issues.

Developing coordinated transportation systems requires ongoing oversight and attention. While there are several, fairly straight-forward coordination strategies that may be adopted in the short run, many of the strategies that offer the greatest benefits also require a longer term effort. Establishing a county coordination council can help local agencies and individuals prioritize and oversee the implementation of coordination strategies. A regional coordination council can do the same for the broader region, as well as help share experiences. The timing for establishing county and regional coordination councils is ideal; local and state level fiscal challenges mean that many programs will be looking for ways to save. Several programs, such as Medicaid, may also be changing in the near future. Creating a forum to discuss the impacts and opportunities associated with these changes could prove to be vital.

In addition, several of the other strategies identified in this section, such as mobility managers and regional technologies, complement the coordinating council approach.

Examples of Best Practices

New Hampshire recently developed a State Coordinating Council and Regional Coordinating Councils to facilitate local and state coordination. The SCC hosts a mobility summit every year and works closely with the RCCs to develop service directories, branding and a number of other regional initiatives.

Costs

The cost to organize meetings would largely be administrative staff time. This is a task that could be handled by a county mobility manager.

Potential Funding Sources

If part of mobility management, New Freedom funding could be used.

Possible Lead Organizations

- Genesee Transportation Council
- Various county agencies
- Nonprofit organizations

11. Regional Mobility Management Network

Individuals or organizations that are hired to provide mobility management functions are often assuming new responsibilities and implementing new programs. The job, therefore, requires an entrepreneurial approach and assumes a significant amount of on-the-job training. As a result, mobility managers typically benefit from ongoing technical support and opportunities to meet with and learn from other mobility managers. Training and networking opportunities may be sponsored by the agency or organization funding a mobility manager position, or consortium of agencies benefiting from mobility manager's efforts.

Moreover, in the Genesee-Finger Lakes region, this type of consortium would be especially useful since there are many cross-county issues that need to be addressed by more than one county. Not only could the network serve training and support functions, but it would also be the essential vehicle for regional mobility management and human service transportation planning.

Expected Benefits / Needs Addressed

- Ensures staff has skills and resources to do their jobs
- Supports coordination across mobility programs
- Can highlight mobility challenges and opportunities and raise awareness

Potential Obstacles and Challenges

- Training requires additional funding
- Requires sponsoring agency with resources to coordinate training program across disparate agencies

Application for the Genesee-Finger Lakes Region

Mobility managers in the Genesee-Finger Lakes Region could potentially be deployed to accomplish a variety of functions and programs. Ultimately, however, all managers would be working towards the same goal. A training and networking program, therefore, could be used to set up an over-riding structure for a mobility management program as well as support individual mobility managers.

Examples of Best Practices

Recognizing that many mobility managers were new to their position and hence require training and support to be effective, the Wisconsin Department of Transportation drew upon different Federal funding programs, including Rural Transportation Assistance Program (RTAP) funds, to create an ongoing technical training and networking sessions for its county and regional-based mobility managers. WisDOT developed a human service transportation planning toolkit for mobility managers and set up a series of day-long training sessions on topics such as cost-allocation, scheduling, networking and outreach. WisDOT has also sponsored out-of-state training for mobility managers, including attendance at relevant national conferences.

Costs

The cost to train and support several mobility managers is estimated to be between $30,000 and $100,000 per year. Sponsoring coordination and networking meetings can be accomplished for less.

Potential Funding Sources

Depending on the type of training and mobility management function, Section 5316 (JARC) and Section 5317 (New Freedom) may both be used to support training programs. As discussed, mobility management strategies have been classified as a capital expense by the FTA and thus federal funding may be available to fund up to 80% of the program costs.

Possible Lead Organizations

- Genesee Transportation Council, RGRTA
- County Coordinating Councils
- Nonprofit organizations

12. Regional Technology Network

In order to maximize coordination efficiencies and streamline trip assignment and billing, a regional technology network is a sophisticated step in making this coordinated system possible. Sharing data and information can be a first step for counties and smaller systems, with the ultimate goal of a linked network that can facilitate cross-county trips and least-cost, most appropriate mode selection.

Expected Benefits / Needs Addressed

- Enhances existing community transportation resources
- Creates more efficient transportation operations and supports local operators to help them use their resources more effectively
- Streamlines communication, information sharing, and billing processes

Potential Obstacles and Challenges

- Software products may be expensive for smaller systems to purchase
- Full interfacing capabilities of different types of software may be difficult to achieve

Application in the Genesee-Finger Lakes Region

Several transportation providers have software systems that they use for route planning or brokering trips. For existing software, creating interfaces that can "talk" to each other may be a challenge, depending on the software. However, many agencies already use RouteMatch, which is popular among smaller systems and has a sophisticated coordination module that could be used. The RGRTA has indicate that it is exploring the possibility of acquiring RouteMatch for its regional transit operators.

Examples of Best Practices

South Central Nebraska. A local transit agency created a program called Reach Your Destination Easily (RYDE) in South Central Nebraska, along with the state, several counties, and local and regional organizations. RYDE coordinates specialized transportation services to maximize efficiencies and vehicles utilization. The program includes radio communication equipment and computer-aided dispatch, scheduling and billing software. The program is also planning to install GPS units in the vehicles to take advantage of the software's vehicle location and routing assistance.

Flagler, St. John and Putnam counties, Florida. A demonstration project using an FTA Rural ITS grant coordinated various counties and agencies through a computer-aided dispatch system. The counties coordinated transit service for a number of sponsoring programs, including job training, employment, medical services and rehabilitation, across the three counties. Putnam County utilizes an automated vehicle location system already, which is being integrated into the dispatch system, and ensuring compatibility with this existing system was critical to success.

Costs

Software costs can vary depending on the complexity of the system and the number and type of modules desired. However, linking existing systems would likely require professional consulting services, depending on the number of systems being linked.

Potential Funding Sources

Capital software purchases are allowed under Section 5317 (New Freedom) under the presumption that the system provides functions pertinent to the program. This is considered to be a capital cost, and hence, Federal funds are available at an 80/20 match.

Other ITS or private foundation grants may be available to assist with the purchase of software.

Possible Lead Organizations

- GTC, RGRTA
- Various county departments
- Nonprofit organizations

13. Senior Transportation Network

The needs of the growing senior population are diversifying, and as more and more older adults are not able to drive, different types of services are being designed to fill unique needs. Private membership networks of seniors have begun forming to provide transportation with a higher level of service than may be available through public programs. These networks are for seniors who are able to pay more for transportation. Many networks require dues to be paid, or seniors can be volunteer drivers and bank miles for future use.

Expected Benefits / Needs Addressed

- Can take pressure off agencies that subsidize senior transportation
- Provides a high level of service to seniors who can afford to pay

Potential Obstacles and Challenges

- Developing a network of volunteer drivers can be a challenge

Application in the Genesee-Finger Lakes Region

Senior advocates in Rochester voiced strong support for this initiative. These private networks tend to flourish in higher income area with a high percentage of seniors, and several neighborhoods in the suburbs of Rochester would be appropriate areas for this type of network.

Examples of Best Practices

ITN America. The Independent Transportation Network (ITN) is a nationwide nonprofit organization that allows seniors to become members and pay for rides in a variety of ways. Seniors can trade in their cars to pay for rides or serve as a volunteer driver and bank credits for their future needs. They provide door-to-door service. There are currently 16 ITN affiliates nationwide, providing about 50,000 rides each year through volunteer drivers and other staff.

Costs

There is no cost to the public sector for implementing this program.

Potential Funding Sources

- Private donations and dues

Possible Lead Organizations

- Private citizens
- Nonprofit organizations

14. Taxi Subsidy Programs

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

Expected Benefits

- Provide same-day if not immediate service
- Effective for unanticipated travel and evening and weekend hours
- Effective for trips outside of service area or "under-served" areas
- Effective way to "divert" more expensive paratransit trips to a less expensive mode
- Can set/control subsidy per trip and/or overall budget
- Opportunity to infuse accessible vehicles into the market

Potential Obstacles and Challenges

- Requires well-managed / controlled taxi car companies
- Few accessible taxicabs
- Participation of non-employee drivers is dependent on their not losing revenue by participating (vs. general public patrons)
- Requires good communication among all parties
- Need to establish fraud-protection mechanisms

Application for the Genesee-Finger Lakes Region

Taxi subsidy programs are a staple in both urban and rural settings in several states. While not as prevalent, there are a growing number of human service agencies tapping into such programs as well. While there are fewer cabs in the rural counties, finding even one trusted company in the taxi industry and building a relationship can result in a successful program.

Taxi companies and car services will be most interested in such a program where the programs can deliver a steady stream of business and where the administrative requirements are not overly cumbersome for the driver and the company.

Examples of Best Practices

access-A-Cab (a-a-C) in Denver. The Regional Transportation District (RTD) in Denver established the access-a-Cab service in response to a high denial rate on paratransit services and to reduce the per trip cost of its ADA paratransit service. Customers call RTD's ADA paratransit call center to request a trip. Requests are then forwarded to the taxi company of choice. RTD pays $7.00 for each trip. With centralized call intake, RTD has been able to decrease the administrative labor required to oversee this program.

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

Costs

A more localized program that is a part of a county-based mobility management effort might cost between $5,000 and $25,000 to administer. The subsidy cost depends on the detail of the subsidy per trip, which ranged between $5.00 and $8.00 among the three examples above. The total available budget for taxi or car service subsidies can be controlled with a daily ceiling, allowing trips on a “first-come, first serve” basis, as per the policy in Denver.

Potential Funding Sources

Perhaps the most obvious sources of funding to implement such a program are Section 5317 (New Freedom) as such a program is a new program and does go beyond the minimum requirements of the ADA, in offering same-day service and service beyond the ADA service area. Section 5317 funding is also available for a mobility manager, noting that the Federal share of mobility management costs may not exceed 80 percent of the net cost of the activity. Section 5316 may also come into play if this service offers access to/from employment services or training (e.g., guaranteed ride home or as a feeder service to a train station).

A potential sponsor might also look at this as a way to reduce the current cost of paratransit if it believes that it can divert trips to such a service.

Possible Lead Organizations

- County agencies
- Medicaid
- Hospitals
- Nonprofit organizations
- Community transportation providers

15. Transit Service Expansion and Improvements

The benefits of service expansion are quite clear. Members of the three target populations would be able to access more services, more programs, more job opportunities and be able to take more trips for shopping, recreation, social services and attend faith-based activities.

The most common types of service expansions include: (1) Expanding the days and/or hours of service; and (2) Expanding the service area for pick-ups and drop-offs, and/or adding destinations beyond the established pick-up area.

Expected Benefits / Needs Addressed

- Expanded travel opportunities
- Enhanced customer accessibility, mobility and convenience
- Potential to expand travel opportunities for members of general public as well as target populations
- Enhances perception of transit as community resource

Potential Obstacles and Challenges

- Service improvements require ongoing operating costs; therefore, agencies may be reluctant to start new services
- Transit services are expensive to operate, ranging from $50-$60 per hour for small vehicles and up to $75-$80 for RTS service.
- Requires educating and training staff and customers to maximize benefits

Application for the Genesee-Finger Lakes Region

The RTS system covers a vast number of the Rochester's neighborhoods, but many who live in the more remote sections of the suburbs can find it difficult to travel on public transit during later hours and on the weekends. In the more rural, counties, the service area is so large that coverage is a critical issue, and many individuals who may have access only have it for limited hours or days of the week. For some, this limits their ability to access job opportunities, evening events, classes, or a host of other opportunities. Evening hours, especially, were raised as a critical issue in the focus groups in the rural counties.

There are also local examples of agencies that have created new types of public transportation services, such as the flexible services being planned in Ontario County (see below) that offer a more cost effective way to meet some of the transportation needs of rural residents.

One of the unique aspects of NY State is the STOA program, which provides public transportation funding based on the number of passengers carried and miles traveled. This funding source has helped encourage partnerships in several parts of the State because agencies providing *agency* transportation that are able to open their doors to members of the public can earn funding to support their service. This type of partnership also greatly increases the amount of available public transportation service in a rural area. Several counties in New York have successfully used this strategy, including Ontario County.

Finally, establishing better connections between existing transit services can greatly enhance a transit-dependent individual's ability to travel in the region. A few connections do exist between systems; for example. Ontario CATS connects to RTS in Victor and STS in Geneva, with drivers coordinating by cell phone if the bus is running behind. However, most other systems do not link

to RTS or to neighboring county systems. Timed transfers or even simply driver-to-driver coordination could create better connections for riders.

Examples of Best Practices

Ontario County, NY. In response to the high cost of offering county-wide dial-a-ride services, the Ontario County transit system (CATS) is in the process of transitioning some of its dial-a-ride services and some of its low performing fixed-routes into flexible routes. These new services will have fixed time points at each end of the route, but will travel to any location between the time points to pick up travelers. As a result, passengers are guaranteed to arrive at their destination at a set time but do not have to travel long distances to get to/from the route. As a result, the service has potential to serve higher need travelers and offer timed connections to other regional transit services. This type of service is in the planning stage but has proven to be successful in other parts of the nation.

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

Costs

The Genesee-Finger Lakes Region bus service costs approximately $75-$80 per hour to operate. Smaller van services operated by independent vendors are typically lower and range between $50 and $60 per hour. In both cases, hourly operating costs are inclusive of direct and indirect costs associated with operating services.

Potential Funding Sources

- JARC (if used to support employment or set up reverse commute travel opportunities)
- 5311
- STOA

Possible Lead Organizations

- RGRTA and regional subsidiaries
- RGRTA Capital Improvements funding
- Other transportation service providers

16. Travel Training

In some cases individuals do not access services or rely on higher cost modes such as paratransit because they lack confidence or experience to use the fixed-route system. Travel training may be promoted as a marketing strategy to encourage key consumer groups (i.e., older adults) to use public transit; or it may be targeted towards frequent users of paratransit to encourage individuals to use lower-cost fixed route services, as appropriate to the individual's circumstances. To support individuals transitioning to fixed route, some transit systems have instituted a highly personalized travel training program referred to as a "bus buddy" program. A "bus buddy" program involves not only training individuals to use fixed-route but also pairing individuals with a volunteer who will travel with them on the bus or subway until the individual gains sufficient confidence to travel independently

Expected Benefits / Needs Addressed

- Encourage and support use of local fixed-route services
- May reduce demand for paratransit services
- Increase awareness and use of a variety of community transportation services
- May support other regional priorities, such as workforce development
- Build good community will through the establishment of a corps of volunteers who act as advocates for the transit system

Potential Obstacles and Challenges

- Some audiences and individuals may require specialized training
- Requires multiple-agency cooperation to identify training opportunities
- Training may require support from agencies that perceive no, or minimal, long-term gain
- Volunteer retention can be an issue, creating an ongoing need to train new volunteers

Application for the Genesee-Finger Lakes Region

The RGRTA has a travel training program specific to its LiftLine customers. This program also includes a "train the trainer" piece in which individuals can receive training from the RGRTA and return to their organizations to lead training sessions. These models could be replicated for the fixed-route service, as well, using senior centers and other local organizations. In the outer counties, travel training could be a part of regular program activities for various agencies, such as senior centers, independent living centers, or other organizations.

Additionally, as the population continues to grow older, driving will no longer be an option for more and more individuals. Helping them find alternatives will be critical. A "bus buddy" program, therefore, can help new riders build confidence with the system over time. The Genesee-Finger Lakes Region also has an extensive network of community-based organizations that could help build a network and develop a "bus buddy" program.

To address the ongoing need for door-through-door assistance on transportation services, which public transit is not able to provide, volunteers could also serve as assistants on existing transportation services. Using the bus buddy model, volunteers could be paired with individuals needing extra assistance to use existing services.

Examples of Best Practices

New York City Department of Education District 75 (City-wide) Travel Training Program, The Department of Education provides one-on-one travel training for eligible high school students with severe mental or physical disabilities throughout the city. Members of the staff accompany the student on their specific commuting route, up to a 2-hour trip each way, for up to two weeks. The program generally serves 30 students per month, including those with severe mental disabilities, learning disabilities, cerebral palsy, autism, emotional distress, other physical disabilities and hearing impairment. Up to ten years afterward, approximately 87 percent are still traveling on public transit alone. Since 1970, the program has served 11,000-12,000 people with severe disabilities.

RGRTA - RTS Travel Training. RTS offers travel training programs focused on its Dial-A-Ride services, and also has "Train the Trainer" programs for agencies interested in having a trainer in-house. The programs cover trip planning, reading a bus schedule, fare payment, and general navigation techniques.

Out and About Travel Training Program, Ann Arbor Transportation Authority (AATA) "The Ride," Ann Arbor, Michigan - AATA/The Ride offers free, personalized, one-on-one travel training instruction for seniors and/or people with physical or mental disabilities who want to learn to ride AATA buses. Group orientation sessions are also available. Topics in the training include requesting information, trip planning, reading schedules, boarding and exiting from buses, using the wheelchair lift and securement system, fare discounts, payment and stranger awareness

Road to Independence, CSTA, Frederick, Maryland – CSTA holds half-day training sessions that teach people with disabilities how to use public transportation. The program includes a short video and a personalized training session to review transit schedules and fares. Participants "graduate" from the class with an accompanied trip on the bus.

Lane Transit District Bus Buddy Program. Lane Transit District (LTD) in Eugene, OR, operates a one-on-one training initiative called the Bus Buddy Program. The Program teaches seniors how to ride the bus in a relaxed way by breaking down barriers and building confidence. LTD recruits regular bus riders to serve as volunteers, known as Bus Buddies, and partners with local senior centers to match individual seniors with these volunteers. Bus Buddies teach seniors about the LTD transit system, as well as how to plan trips and navigate routes. Each Bus Buddy and senior then ride the bus together. Afterward, the pair discusses the trip and the Bus Buddy answers any remaining questions about using public transportation in Eugene.

Paratransit, Inc. Mobility Training Program. Paratransit, Inc. operates a Mobility Training Program in Sacramento, CA, that offers specialized training for seniors and people with disabilities who may have difficulty traveling on Sacramento Regional Transit (RT) buses and light rail vehicles. Training is usually provided in a one-on-one setting, but is also done in small groups for facilities such as senior housing complexes. Training includes familiarization with the Sacramento RT system, route planning, use of wheelchair lifts and securement devices, landmark identification, bus rules, and safety issues. The agency has six full-time trainers who teach hundreds of individuals each year how to ride the bus and use light rail.

Costs

Costs for travel training programs vary by program structure, but can be as low as $5,000 if implemented by a mobility manager. Managing a volunteer group of bus buddies would also cost little if implemented by a mobility manager.

Potential Funding Sources

- New Freedom (if specifically oriented towards persons with disabilities)
- JARC (if designed to support employment)

Possible Lead Organizations

- Counties – Various Departments

  Nonprofit organizations

17. Volunteer Driver Programs

Volunteer drivers are individuals who volunteer to drive people who lack other mobility options. A sponsoring organization, such as a transportation provider, human service agency or other entity often helps match volunteer drivers with individuals who need rides. A volunteer driver will typically use their private vehicle but will be reimbursed, usually based on mileage driven, by the sponsoring agency. Sponsoring agencies may also arrange for insurance coverage. Volunteer driver programs have proven to be an effective and important resource to help supplement community transportation programs.

Expected Benefits / Needs Addressed

- Provide low cost transportation option
- Some programs will reimburse friends or family members for providing rides
- Volunteers can provide a flexible source of transportation that can be useful for longer distance, out of area trips

Potential Obstacles and Challenges

- Setting up a volunteer driver network requires time and effort to recruit, screen, train, and reward volunteer drivers
- Riders need to be introduced to and appreciate concept of volunteer drivers
- Real or perceived driver liability and insurance issues

Application for the Genesee-Finger Lakes Region

Volunteer driver networks are currently utilized in many parts of the Genesee-Finger Lakes Region, primarily through nonprofit networks. Volunteer driver networks can be an incredibly useful resource in rural areas, but must be well-managed to be effective. The issues of liability and insurance can be difficult; some areas have best practices to address these (See Appendix A, volunteer driver issues). Retaining volunteers is also an issue - one participant at a public meeting suggested creating incentive programs such as local car wash coupons or other perks for drivers.

Examples of Best Practices

Independent Transportation Network (ITN), Maine. ITN was first established in Portland, Maine as a means of providing seniors with rides in exchange for trading in the cars they rarely used. The value of the donated car is credited to the senior's debit account, which is drawn on each time a ride is requested (averaging $8 per ride). The account can be contributed to by family members or friends through cash donations, volunteering their time or donating their own cars. Seniors who are still able to drive may volunteer and receive credit for future rides when they are no longer able to drive themselves, a sort of "transportation social security." The rides may be used for medical appointments, shopping trips or social visits or events. Maine has enacted legislation that enables ITN to sell its surplus vehicles and reinforces an earlier law prohibiting insurance companies from raising premiums for volunteer drivers.

Community Inclusion Driver (CID). The Community Inclusion Driver strategy was developed for Easter Seals Project ACTION as a way to make use of volunteer drivers in a rural setting. While the CID strategy focuses on increasing mobility for persons with disabilities in rural areas, the approach could be used for seniors and persons with disabilities in urban areas as well. The CID strategies involves a partnership between a transportation providers, a customer and

individuals who are willing to act as volunteers drivers. The provider establishes program and eligibility guidelines, information materials, training, record-keeping, and reimbursement payments. The customer is responsible for identifying suitable volunteer drivers (although the transportation provider may assist or recruit drivers themselves). The volunteer driver is responsible for providing proof of a valid license and a properly registered and insured vehicle.

Costs

Most volunteer driver costs would be linked to mileage reimbursements, which vary greatly by the number of trips and miles driven. Managing a network of volunteer drivers can be a function of a county mobility manager, whose salary can be paid for through New Freedom funds.

Potential Funding Sources

If services target persons with disabilities, New Freedom funds can be utilized to pay for managing a volunteer driving network.

Possible Lead Organizations

- County agencies
- Nonprofit organizations

Chapter 7. Prioritized Strategies for the Region

During the development of this Plan, key stakeholders, members of the public, and steering committee members identified a number of strategies which can be prioritized within the three categories listed below:

- **Regional and County Mobility Management**: including information sharing, inter-county operations, and scheduling/ridematching technology improvements. The short-term should focus on individual County mobility managers; as more County-level mobility managers or transportation coordinators are put in place, this should expand to a regional network.
- **Information**: Marketing and information campaigns are needed to welcome new riders into the system, while making it easy for them to figure out and use the system. These campaigns should include multiple languages. Travel Training and Bus Buddies are low cost programs that could be implemented immediately. These should be coupled with training riders to go to multiple destinations on one trip.
- **Service Improvements**: While everyone acknowledges constrained budgets, demand for transit service is growing as are effective service delivery options. As a result, providers need to remain vigilant for opportunities to expand services where needed in order to meet the needs of an increasingly elderly and diverse population. Long-term focus should be on both medical and non-medical (social and shopping) trips. Where new services are needed, they should only be implemented if sustainable funding structures can be identified.

It is important to note that while the strategic initiatives described below are new to the region, improvements to the quality and effectiveness of existing specialized transportation services and volunteer transportation services in areas where public transit is not sufficient or appropriate is one of their key benefits. As such, the continued support for and support for the continuous improvement of, existing services is integral to their success.

Regional Mobility Management

The Steering Committee voiced strong support for the creation of a Regional Mobility Management Network. Many stakeholders agreed that several of the fundamental problems associated with current efforts are clustered around issues of education, awareness and coordination. Creating a regional mobility management program, therefore, offers an opportunity to dedicate resources to make information available across and between programs and projects, across local and regional geographies, and between clients and available services. As a result, mobility management helps connect complementary programs available in different departments and counties. For example, the Riverland Region, a five-county area of Southwest Wisconsin, used a New Freedom grant to establish a regional mobility management entity called LIFT. LIFT does not provide transportation, but connects any resident in the five-county area with the appropriate provider for their particular trip. LIFT utilizes contracts with agencies and providers as well as software to maintain a current database, provide information, and assign trips.

The draft Long Range Transportation Plan for the region also prioritizes mobility management, stating that a key outcome of the mobility management program would be to "create greater

efficiencies as all public transportation services would be considered in a centralized manner" (pp. 100-101).

For the Genesee-Finger Lakes Region, a mobility management program would consist of four primary elements:

- **Regional and County Coordinating Councils** to plan mobility management activities at the local and regional scales.
- **County Mobility Managers** to carry out the plans and initiatives of the Coordinating Councils and serve as local resources for transportation services and customers.
- **Regional Mobility Management Collaborative** to bring together county mobility managers, provide support and training, and collaborate on regional projects.
- **Regional Technology Network** to link databases and software of participating mobility managers, counties and organizations, enabling information sharing, coordination, and cross-county trip planning.

This section describes each of these four elements and implementation considerations.

Regional and County Coordinating Councils

Several counties already have a Transportation Coordinating Council that meets regularly to discuss county-wide transportation issues. All counties have some type of informal referral system, and therefore most involved individuals are familiar with each other and with the general availability of transportation services in their respective counties. Members of the focus groups that assisted in the development of this plan as well as the county representatives to the project Steering Committee could provide a starting point for initiating this dialogue. These ad-hoc groups could then be transitioned into more formal Coordinating Councils that meet regularly.

On the regional level, the organizations represented through the project Steering Committee should continue efforts to improve collaboration and to advance the implementation of the initiatives identified in this plan. The successful implementation of many of these strategies will depend on the continued communication and cooperation of these organizations that could be facilitated by a Regional Coordinating Council.

Some potential roles of Coordinating Councils are:

- Decide what coordination strategies should be pursued locally and/or regionally and develop and implement action plans to advance the specific selected strategies at the county and regional level.
- Lead/be involved in coordination grant application efforts.
- Select, guide, assist, and monitor a lead entity (organization or person) to serve as the mobility manager for the county/region.
- Work with the respective regional and county Coordinating Councils, providing feedback from the local communities to the region and vice-versa.
- Set up a network to support peer-to-peer training on key strategies, use of funding and implementation.

Coordinating Councils should be composed of regional representatives of the state funding agencies, representatives from other purchasers of service, representatives from service

providers, representatives from other stakeholder organizations, and potentially one or two private individuals representing the riding public. Some Coordinating Councils may find it beneficial to create Memoranda of Understanding between the participating entities and adopt by-laws to govern the processes of council activities.

County Mobility Managers

One of the main appeals of mobility managers is the flexibility of the job description – organizations may use a mobility manager to conduct outreach, coordinate policy or support operations. They can be full- or part-time staff positions, may be housed in a range of organizations or government agencies; and could be assigned in a variety of geographic configurations. This flexibility is especially pertinent in the Genesee-Finger Lakes region, where there is a diversity of population densities, transportation services, coordination leadership, and involved agencies. The key requirement associated with establishing a mobility manager is that the assigned individual work on projects and programs that improve mobility and accessibility. Mobility managers can be funded through JARC and/or New Freedom grants and are considered a capital/administrative expense, which means they are eligible for 80% Federal funding and require only a 20% local match.

Two counties are already served by mobility managers - Livingston and Monroe. In Monroe County, the mobility manager works for Eldersource, a partnership between the nonprofits LifeSpan, the Catholic Family Center, and Medical Motors. The Monroe County mobility manager began as an information coordinator for older adults in Monroe County, but recently expanded to serve other target populations in the county, such as persons with disabilities. The other mobility manager in the region serves as Livingston County's Transportation Coordinator and is employed by Livingston County's Department of Social Services. The Livingston County Transportation Coordinator, operating on a county-wide level, has been able to implement several coordinated initiatives in the county and increase access to services for Livingston County residents.

Several other counties in the region are taking steps to hire a Transportation Coordinator who would effectively serve as a mobility manager for the county. For counties that see this step as a longer-term goal, a mobility manager could be employed in the interim to cover two or more counties where there are similarities in travel patterns or population needs. Especially for counties with smaller populations, this may be a solution that could be implemented in the near term.

One of the advantages of the mobility management program is that it may begin operations as soon as mobility manager is hired. Furthermore, because several of the strategies identified as part of the Coordinated Plan Update represent potential projects for a mobility manager, once an individual is hired they may begin implementation on some of these strategies. Salaries for mobility managers range from around $45,000 - $60,000 per year plus benefits, depending on the individual's experience. Assuming an 80% grant from the federal government, local funding requirements for the position may be as low as $9,000 to $12,000.

Regional Mobility Management Network

Given the interest and need for mobility management services, there is potential that multiple mobility managers will be funded and assigned to different political and geographic capacities throughout the Genesee-Finger Lakes Region.

Ideally, therefore, as the mobility management program develops, an organizational and management framework would also emerge to collectively support and link these individuals and their efforts. The organizational structure would need to be flexible enough to support a diversity

of individuals, organizations and goals, yet also be consistent enough to direct efforts, set broad goals and identify target audiences. Ideally, the framework would also support mobility managers with information, resources and contacts and provide opportunities for networking, information sharing and training.

A training program may provide training in a variety of topics, recognizing that in some cases training programs may only be applicable to a subset of the wider group of mobility managers. Regularly scheduled meetings can be used to create networking opportunities and likewise can provide an opportunity for mobility managers to teach others about their successes and influence on mobility in their community. On-going training programs to support mobility managers will improve the success of the individual managers and strengthen the wider mobility management program. The New York State DOT hosts training and networking sessions for mobility managers across the state, though on a less regular basis than would be necessary in the Genesee-Finger Lakes Region.

During the development of this plan it was apparent that a number of individuals in the region already serve in leadership/mobility management capabilities and could likely bring the local knowledge and enthusiasm necessary to effectively serve as a regional mobility manager. This individual could facilitate training sessions, organize the larger network of mobility managers and be a champion to better meeting the mobility needs of the region.

Regional Technology Network

Software for transportation service delivery can be a means of tracking/reporting data and automating the reservations, scheduling, and dispatch functions. Such scheduling systems can increase vehicle utilization and staff productivity. In addition to these functions for in-house transportation services, some software systems also have coordination modules that enable different services and providers to conduct a number of coordination tasks, from simply sharing data and information to assigning trips and automatically allocating costs. A regional technology network would allow different transportation providers across the region to communicate with each other, opening up a wealth of possibilities for coordinating rides. This has the potential to increase access to funding sources and realize savings for individual agencies and local governments.

Several agencies in the region already use software for operations, brokering trips, or other coordination. The variety of software programs that are used are listed in Figure 9-1 below. This list is by no means exhaustive - there are likely other types of software used in the region.

Figure 7-1 Existing Software Utilized in the Region

Service	Technology/Software Brand
RTS	Trapeze TIDE
LiftLine	Trapeze Automated Vehicle Location (Planned)
LATS	Automated Vehicle Location (Planned)
OTS	Automated Vehicle Location (Planned)

Service	Technology/Software Brand
Other RGRTA regional services	None
Medical Motor Service	RouteMatch
Ontario County CATS	RouteMatch
Livingston-Wyoming Arc	VersaTrans
Seneca-Cayuga Arc	Flex T (In process)
Yates Arc	VersaTrans (Planned)

None of the RGRTA regional systems currently have trip planning software, but the draft Long Range Transportation Plan lists the Livingston Area Transportation System (LATS) and the Orleans Transportation System (OTS) as future recipients of AVL systems. RGRTA is also exploring purchasing RouteMatch for some of its other regional subsidiaries.

Medical Motor Service uses RouteMatch and has AVL for a number of its vehicles. Ontario County CATS transitioned to a RouteMatch system in early 2011. Many Arcs, including the Livingston-Wyoming Arc and the Yates Arc, use VersaTrans for route planning. The Seneca-Cayuga Arc began installing Flex T in late 2010/early 2011 and will be using it to coordinate with Seneca Transit Service and Centro of Cayuga County. Both Medical Motors and Seneca-Cayuga Arc received a 5317 grant to fund these software purchases.

These various systems all serve specific purposes at their respective organizations. Some offer web portals that customers and other transportation providers can use to send and receive trip information, and some may interface with other software programs to enable coordinated trip planning. Creating linkages between the existing systems and learning how to make them "talk" to each other could rapidly increase the amount of information sharing that occurs between providers. These linkages could also be key to realizing significant cost savings for a variety of transportation programs across the region.

Information Systems

Despite the abundance of public transit systems and programs across the region, many residents have limited experience or understanding of how these systems work. Increasing awareness and understanding of available services is a key step toward increasing utilization of services and enhancing regional mobility.

There are three primary elements of the overarching strategy:

- **Marketing and information systems** to educate the public, industry professionals, elected officials, and other stakeholders about existing services and eligibility. Developing systems involves not only educational materials but also increased use of technology to support access.
- **Travel training and bus buddies** to promote better understanding of how to use the service and increase comfort of taking transit.

- **Coordinating councils and mobility managers** to ensure all levels of the government and agency networks are informed about the existing networks of service, opportunities to work together and efforts to improve accessibility and mobility.

Marketing and Information Campaigns

Information campaigns entail public outreach and educational programs to enhance awareness of and appreciation for transportation services. A marketing campaign involves branding and the production of supporting materials to communicate a message about the services. Each are important for fostering community support for the transportation networks both at the county and regional levels.

A great first step for both the individual counties and the region is to develop a central transportation service directory. As discussed, some counties have lists particular to one client type, and others have lists of commonly used providers, but there are no comprehensive directories of available services. The inventory in this Coordinated Plan Update can be used as a starting point. A useful service directory includes:

- Eligibility requirements
- Contact information
- Service hours
- Service area
- Service type (Dial-A-Ride, fixed route)
- Fare

Maintaining current information can prove challenging; however, compiling and maintaining a directory is a task well suited to a new mobility manager.

Developing a communications plan for public outreach can also be a helpful tool in public awareness and education campaigns. A campaign to advertise the transit system and encourage use should be an ongoing effort, educating residents about their options and about the various systems' successes. Establishing transportation services as a community asset will help develop the social and political will to support continued and improved transportation services.

This educational campaign is not only for the public, but also for agencies making policy decisions. Discussing the effects of land use decisions on transportation systems with municipal decision-makers is critical, especially as the population ages. Also, agencies that site new facilities should be made aware of the way these decisions will affect transportation. Especially in the rural counties, transit agencies already traveling long distances to senior facilities or other types of services will find accommodating new facilities in distant locations even more difficult as costs increase along with the population needing to be served.

Marketing campaigns typically involve a targeted message and could be used to advertise one particular service - such as a new travel training program - or a more general message to encourage transit use.

Travel Training

People who have never used public transportation often have real concerns and fears about using the public transportation network. A training program that teaches consumers how to use

public transportation and become confident transit riders can help encourage use of public transit. Travel training may be promoted as a marketing strategy to encourage key consumer groups (i.e., older adults) to use public transit; or it may be targeted towards frequent users of paratransit to encourage individuals to use lower-cost fixed route services, as appropriate to the individual's circumstances. This type of travel training is already available for LiftLine users through the RGRTA.

An important element associated with program success is marketing. Many individuals are not aware of travel training services available to them or members of their community. Nor do they necessarily understand how they work. Special effort should be made to advertise short travel training sessions, which would include map and schedule reading, and more involved, one-on-one services. A mobility manager could undertake advertising these services as part of a larger mobility mission, be it neighborhood-based or specific to a population group.

Travel training programs could be implemented at many levels of the transportation service system. The RGRTA may also seek funding to expand their travel training program. Other potential sponsors include County departments, non-profit organizations and other community organizations. A local mobility manager could coordinate these programs for specific populations or neighborhoods. In addition, because the FTA considers travel training part of mobility management, such programs can be funded as a capital expense with 80% funding. Depending on the populations served, New Freedom funding or JARC funding could be used to support travel training activities.

Travel training programs can range considerably; they may be based on a single, short session covering basic skills to multiple sessions provided over an extended time period. Likewise, a program may concentrate on a single skill, such as riding the bus or offer more comprehensive training that includes the full range of available services, including learning to use online trip planning tools. An important element of training is human contact, which can eliminate the intimidation factor associated with traveling on transit. Mobility Managers are logical resources for getting a travel training program organized and operated; this is true for Mobility Managers working in specific neighborhoods or with specific populations.

Potential types of travel training programs include:

- **Basic Training Sessions** - Many types of travel training focus on navigating complicated schedules and maps, and a short afternoon session reviewing transit literature is often enough to give many individuals the confidence to ride transit alone. Including training for online trip-planning sites, such as 511 NY, can be very useful for encouraging individuals to travel independently. Senior centers are an ideal setting for these types of sessions. Funding could also be used to train individuals who will in turn provide training services to senior centers or local organizations.
- **One-on-one Training Sessions -** Many individuals, especially persons who use wheelchairs or live with other types of disabilities, find that multi-session, individualized route planning and practice are necessary to travel independently on transit. These training sessions can involve a range of step-by-step guidance, including using wheelchair lifts and elevators, negotiating difficult transfers, and knowing how to take alternative routes during service interruptions.
- **Bus Buddies** – A bus buddy program involves pairing individuals with a bus buddy, who will travel with them on the bus until the individual gains sufficient confidence to travel independently. This type of program provides even more individualized training than an intensive program and thus has more extensive administrative and management

requirements. It has proven to be very useful in expanding individual mobility. Bus buddies are usually volunteers.

Some agencies have further supported wheelchair users riding transit with a wheelchair breakdown service. Similar to a Guaranteed Ride Home (GRH) program, this service would provide a ride home for wheelchair users experiencing mechanical problems with their wheelchairs. Much like GRH, the service is typically not widely used by individuals, but does provide people an extra measure of confidence. Thus, wheelchair users are more confident relying on fixed-route public transportation over paratransit, knowing they can get picked-up if necessary. Individuals who are able to use fixed-route service are often encouraged by an increased sense of freedom and flexibility.

Coordinating Councils and Mobility Managers

Coordinating Councils and mobility managers serve as the primary educators for government representatives, local decision-makers, political leaders, and the general public. Their role in facilitating the information sharing and education process is critical for building an understanding of services available and for fostering a sense of transportation as a community resource. Members of Coordinating Councils and mobility managers can help plan and execute educational campaigns, make presentations and hold training sessions throughout the community, present testimony at relevant governmental hearings, and generally serve as a source of centralized information for the community.

Service Improvements and Diversification

Transportation providers in the Genesee-Finger Lakes Region have implemented a number of innovative strategies to improve and expand transportation services in their respective communities. Replicating these examples across the region can help to fill in the gaps in service found in many communities and create a more connected network.

Several important pieces of service improvement and diversification should be examined:

- **Innovative Partnerships** are the central tenet of coordination. Identifying a need and locating a resource in another organization that can help fill that need allows communities to provide more service and potentially save money.
- **Innovative Services** refer to service designs that are tailored to a specific gap in service or need. These services can be hybrids of the more traditional fixed-route and demand-response services, such as flex routes and deviated fixed routes.
- **Funding** is highly constrained in the Genesee-Finger Lakes Region, but several communities in New York State have been able to expand service with the aid of existing state and federal funding programs.

Innovative Partnerships

A number of transportation providers in the region have developed innovative partnerships to help lower costs, provide more service and coordinate resources. Providers have partnered with local employers, local businesses, other government agencies and nonprofit providers to maximize the strengths of participating programs.

Wayne Area Transit Service (WATS) has more than 20 contracts with different organizations and businesses in Wayne County. WATS has sought out partnerships with government partners, local

farmers and county nonprofits, proving that by using WATS, these organizations would save on their transportation costs. The contracts typically provide WATS with ridership and enable WATS to keep providing service on routes that may otherwise not have enough riders. Orleans County is currently working with Genesee Community College to develop potential service strategies for GCC students using Orleans Transit System (OTS).

The Arcs are important transportation partners in several counties, including Ontario, Yates, Livingston, Wyoming, and Seneca. Arcs typically have large fleets of vehicles that are not in use for a number of hours in the day, depending on the Arc's programming. As discussed, the Ontario Arc recently became a public transportation provider in New York State and is now able to transport members of the general public in Ontario County to complement Ontario CATS service. Yates Arc is in the process of establishing itself as a public transportation provider, with the ultimate goal of providing service to the public. This development is especially beneficial because Yates County does not have any public transportation service. Yates Arc initiated the process of partnering with government agencies to support their application to be a public transportation provider in order to fill the need for transportation in the county. The Seneca-Cayuga Arc is also in the process of opening routes to non-Arc populations in Seneca County. The Seneca-Cayuga Arc also provides some dialysis trips for patients in Seneca County.

In Livingston County, the county's Transportation Coordinator has worked closely with the Livingston-Wyoming Arc to devise special services for certain populations in the county. The Livingston-Wyoming Arc transports dialysis patients for the County's Department of Social Services, using vehicles that are not in use and providing essential trips for patients.

County currently working with their Arcs should consider potential opportunities to further coordinate and improve services and counties not already working closely with the local Arcs should explore the potential for such partnerships.

Finally, though many county agencies and nonprofits have established strong partnerships with their local transit system, in most cases these relationships would benefit through increased coordination and information sharing. On the government agency side, for human service clients that are able to use transit services instead of in-house agency vehicles or taxi services, utilizing available transit services has the potential to greatly reduce costs. Transitioning clients to transit requires an education process, and travel training or bus buddies may be very helpful in this instance. Coordinating Councils and mobility managers can also help facilitate this process with their knowledge of existing providers and local needs.

Innovative Services

Both demand-response and fixed-route transit services exist in the region, with many counties using demand-response services to cover rural areas. Other types of services can be explored to fill in the gaps where service isn't available, or is only available one or two days per week or for limited hours, as many rural county demand-response services are.

A key challenge associated with fixed-route service is it requires people to walk to and from the service. A **deviated fixed-route** service can be a potential solution to this challenge, allowing vehicles to travel off-route to access locations a pre-determined distance (typically one-tenth to three-quarters of a mile) from the main corridor, i.e. deviated fixed-route. Offering route deviations also satisfies ADA requirements and can reduce overall service costs. Deviated fixed-route service usually works by requiring passengers to call in advance to schedule a deviation, especially if they want to be picked up at a location that is off of the main route. Many systems also charge a premium fare to travel off-route. Route deviation service offers tailored services as

compared with regular fixed-route services but will provide slightly less service for the same cost, because offering deviations requires longer service schedules. Marketing is also an essential ingredient to successful deviated fixed-route service; the concept is not always familiar to passengers, and many individuals need encouragement to use it. Deviated fixed-routes have similar operating costs as fixed-route, except ADA service is not needed. However, given that deviations are allowed, service cannot be scheduled as tightly, so the service is typically slightly less productive.

Flex-Route services are a hybrid of traditional fixed-route service and demand response service and are typically operated in one of two ways: As a structured but flexible bus route, but at one or both ends of a trip, the bus travels offroute to provide curbside pick-ups and drop-offs within a designated area. A service may offer demand response service (i.e. door-to-door pick-ups) between 9:00 AM and 9:30 AM in Geneseo, for example. At 9:30 AM the bus leaves from Geneseo traveling to Dansville and arriving at 10:00 AM. The bus then will bring people to their desired destinations from 10:00 to 10:30 AM. Another way that flex service can be structured is to designate a service area with one or more pick-up points and scheduled times. Following our previous example, the Flex Route might stop at SUNY Geneseo on the hour. Passengers can call in advance to request a pick-up or drop-off at home, or walk to SUNY and 'catch' the bus. Travel would be permitted anywhere within Geneseo.

Advantages of flex-routes are that they are often effective at providing service to areas where population and employment densities make traditional fixed route service difficult. The demand response feature of the service allows a larger area to be served and improves the attractiveness of public transportation. Flex-services, however, can be difficult for some riders to understand and use. Similar to other services, operating costs are estimated at roughly $60 per hour and include fuel, insurance, driver wages, vehicle maintenance and some scheduling, dispatching and marketing services. Because flex-routes allow time to travel off-route, fewer trips can be scheduled during the same time period as compared with fixed-route service, thus the overall service levels are lower. Depending on the number of passengers carried, however, the service may be more productive. Ontario County CATS is in the planning stages of developing deviation/flex routes in its system.

Other types of innovative service include **shopping shuttles, community bus routes,** and **tripper buses**. These are services that target a specific need in the community, either a specific population, a specific time period or to and from specific locations. One example in the Genesee-Finger Lakes Region is Medical Motors shopping shuttles, which operate in a number of communities in Monroe County, in partnership with Wegman's Supermarkets. These routes are targeted to seniors and persons with disabilities and are extremely popular.

A community bus service is a fixed route between major destinations in a small neighborhood or community, often targeted towards popular destinations for a specific population, such as seniors. Often, these buses operate one or two days per week in a community, allowing seniors to go to the pharmacy, the bank, or shopping, depending on the route. Community bus routes can be an effective way to divert demand-response users to a lower subsidy per trip service that also provides more convenience (no request required). While designed to address local circulation needs of these target populations, these routes also can connect with more regional services (bus/rail). Community bus routes typically use small, low floor buses able to operate on neighborhood streets and enter driveways and parking lots. The focus is on front-door convenience at the expense of direct routing. Emphasis is on convenience, ease of use, and highly-personalized driver services.

Tripper buses are timed to add capacity to a certain route or destination, such as school bell times. Tripper buses follow a scheduled bus along a fixed route to pick up additional passengers when the scheduled bus is full to capacity. Tripper services are typically used at school bell times or other events.

Funding

One of the advantages that New York State has relative to other states is that it has developed an effective cost sharing arrangement to support transit in rural areas. This allows the cost of the service to be divided among different funding sources based on ridership. As a result it creates a clear incentive for service coordination. There are several counties in New York, most notably Steuben, which has taken full advantage of this cost sharing arrangement. Locally, Ontario County is also pursuing this approach by partnering with the Ontario Arc to provide general public trips in rural areas of the county. Implementing this type of shared service approach requires willing partners and a cost sharing agreement at the very least, but is most easily implemented with software that can automate the process of tracking trips and mileage and bill multiple parties accordingly. In the counties within the RGRTA system, software could greatly streamline the partnerships already in place.

Statewide Transportation Operating Assistance (STOA) is a New York State formula fund issued to public transit operators based on the number of passengers and number of miles they serve. The current formula is $0.405 per passenger, $0.69 per vehicle mile. In order to collect STOA, an agency must be identified by the county as a public operator. Funds received through this program may be counted as part of the local match required by federal grants. For example, should the independent operator write an application for a $100,000 5316 JARC grant to add new routes for job access, and the local share must be $50,000 for operations, then any STOA money the operator is receiving counts towards the $50,000.

In the Genesee-Finger Lakes Region, STOA is not available to transit systems in the RGRTA. As a transit authority, the RGRTA receives a direct appropriation from the state legislature, whereas county-based public transportation providers are eligible to receive formula-based STOA funds directly from the state. However, if an independent operator identifies a gap in service or proposes to implement connecting service in one of the counties that has RGRTA systems, STOA funds may be available to that service, provided that all of the other requirements are met. For instance, Oswego County Opportunities is an independent operator in Oswego County providing, among other programs, connecting service to CENTRO routes entering the county. To access STOA funds, Oswego County Opportunities had to go through the state's process for becoming a public transportation provider and fulfill all other requirements. STOA funds could potentially be used to fund partnerships with independent operators in one of the six counties within the RGRTA network that have significant service gaps, as long as the service does not overlap existing transit service and the service meets with the approval of NYSDOT and the RGRTA.

The Federal Transit Authority (FTA) programs that provide funding for public transportation services typically will only match operating costs at 50% of the deficit (i.e. 50% of the cost of the service after fares have been included in the calculation). The STOA program also helps funds public transportation and pays based on the miles driven and passengers carried. Despite these programs, local governments still must provide matching funds, which may range between 20% - 30% depending on the service design.

Expanding service hours and/or service areas for public transit is one of the more expensive strategies identified as a priority recommendation during the development of this plan. Still, this may be one of the most cost-effective ways to increase mobility and accessibility. Funding streams include JARC, if the service is used to support employment, and potentially New Freedom, if the service is used to solely support persons with disabilities and goes beyond the requirements of ADA. New Freedom program guidance provides that expanding transit service to the public-at-large is not fundable under New Freedom. JARC funding, on the other hand, can be used to fund transit services that benefit the public-at-large if those services increase access to employment or job training. In addition, JARC funds may be matched by other Federal programs as long as the funds do not originate from the Department of Transportation (DOT). Thus, Department of Labor (Welfare to Work), Health and Human Services, Temporary Aid to Needy Families (TANF), and Medicaid funds can be used as local match.

Appendix A. Document Review

The following plans and publications were reviewed as part of this study:

"Aging in Place in Upstate New York" *Upstate New York Regional Review.* Volume Number 2, Issue Number 2, 2007

Coordinated Public Transit-Human Services Transportation Plan for the Genesee-Finger Lakes Region, 2007

Genesee County Resident Survey, 2010

Genesee-Finger Lakes Regional Planning Council Regional Population Forecasts, 2003

New York State Department of Health Hudson Valley Regional Medicaid Broker Request for Proposals, 2010

New York State Office for the Aging Population Projections

Ontario County CATS Fixed Route Evaluation

Orleans County Strategic Plan for Public Transportation, Orleans County "Building Rural Capacity" Transportation Task Force, 2002

Rochester-Genesee Regional Transportation Authority Annual Report 2009-2010

Seneca County Public Transportation Study, Genesee Transportation Council, 2002

Strategic Plan for Public Transportation in Genesee County, Genesee County and Rochester-Genesee Regional Transportation Authority, 2002

Strategic Plan for Public Transportation in Livingston County, Livingston County Board of Supervisors and Rochester-Genesee Regional Transportation Authority, 2001

Strategic Plan for Public Transportation in Wayne County, Wayne County Board of Supervisors and Rochester-Genesee Regional Transportation Authority, 2003

Strategic Plan for Public Transportation in Wyoming County, Wyoming County Board of Supervisors and Rochester-Genesee Regional Transportation Authority, 2003

Strategic Plan for Public Transportation - Yates County, 2007

Appendix B. Lists of Major Destinations

Major Destinations in the Central Region

No.	Name	Type	County	Address	City
1	Monroe County DSS	Human Service	Monroe	111 Westfall Rd #660, Rochester, NY 14620, USA	Rochester
2	Monroe County Office for the Aging	Senior Center	Monroe	435 East Henrietta Road	Rochester
3	Rochester General Hospital	Hospital	Monroe	1425 Portland Ave, Rochester, NY 14621, USA	Rochester
4	Monroe Community Hospital	Hospital	Monroe	435 E Henrietta Rd, Rochester, NY 14620, USA	Rochester
5	Highland Hospital	Hospital	Monroe	1000 South Ave, Rochester, NY 14620, USA	Rochester
6	Lakeside Memorial Hospital	Hospital	Monroe	156 West Ave, Brockport, NY 14420, USA	Brockport
7	Andrew J. Kirch Dialysis Center	Dialysis	Monroe	89 Genesee St, Rochester, NY 14611, USA	Rochester
8	New York Dialysis	Dialysis	Monroe	2400 Clinton Ave S, Rochester, NY 14618, USA	Rochester
9	Unity Dialysis Center	Dialysis	Monroe	1561 Long Pond Road #302	Rochester
10	Unity Dialysis Center	Dialysis	Monroe	5 Land Re Way	Spencerport
11	Univ of Rochester Medical Center	Dialysis	Monroe	601 Elmwood Ave # 675	Rochester
12	Honeoye Falls Market Place	Shopping	Monroe	166 County Road 94, Honeoye Falls, NY 14472, USA	Honeoye Falls
13	The Marketplace Mall	Shopping	Monroe	1 Miracle Mile Dr, Rochester, NY 14623, USA	Rochester
14	The Mall At Greece Ridge	Shopping	Monroe	Greece Ridge Center Dr, Rochester, NY 14626, USA	Rochester
15	Irondequoit Mall	Shopping	Monroe	285 Medley Centre Pkwy, Rochester, NY 14622, USA	Rochester
16	South Town Plaza	Shopping	Monroe		Rochester
17	Monroe Community College	Education	Monroe	1000 East Henrietta Road	Brighton
18	University of Rochester	Education	Monroe	60 Crittenden Boulevard	Rochester
19	Rochester Institute of Technology	Education	Monroe	1 Lomb Memorial Drive	Rochester
20	Centro de Oro Senior Center	Senior Center	Monroe	817 East Main Street	Rochester
21	CFC Older Adult Resource Center	Senior Center	Monroe	800 Carter Street	Rochester

No.	Name	Type	County	Address	City
22	Chili Senior Center	Senior Center	Monroe	3235 Chili Ave.	Rochester
23	Community Place of Greater Rochester	Senior Center	Monroe	145 Parsells Avenue	Rochester
24	Greece Community and Senior Center	Senior Center	Monroe	3 Vince Tofany Blvd.	Greece
25	Henrietta Senior Center	Senior Center	Monroe	515 Calkins Road	Henrietta
26	Hilton Senior Center	Senior Center	Monroe	59 Henry Street	Hilton
27	Irondequoit Senior Center	Senior Center	Monroe	154 Pinegrove Avenue	Irondequoit
28	LIFESPAN Downtown	Senior Center	Monroe	25 Franklin Street	Rochester
29	MARC of Baden St.	Senior Center	Monroe	86 Vienna Street	Rochester
30	Northwest Rochester Senior Center	Senior Center	Monroe	71 Parkway	Rochester
31	Ogden Senior Center	Senior Center	Monroe	200 South Union Street	Spencerport
32	Pittsford Senior Center	Senior Center	Monroe	3750 Monroe Avenue	Pittsford
33	Southwest Senior Center	Senior Center	Monroe	10 Cady Street	Rochester
34	Sweden Senior Center	Senior Center	Monroe	133 State Street	Brockport
35	Webster Senior Center	Senior Center	Monroe	979 Bay Road	Webster
36	Wheatland Senior Center	Senior Center	Monroe	22 Main Street	Scottsville
37	SUNY Brockport				

Major Destinations in the Eastern Region

No.	Name	Type	County	Address
1	Ontario County DSS	Human Service	Ontario	3010 County Complex Dr, Canandaigua, NY 14424, USA
2	Ontario County Office for the Aging	Senior Center	Ontario	3010 County Complex Dr, Canandaigua, NY 14424, USA
3	Thompson Health: Urgent Care Center	Hospital	Ontario	1160 Corporate Dr, Farmington, NY 14425, USA
4	Geneva General Hospital	Hospital	Ontario	196 North St, Geneva, NY 14456, USA
5	Eastview Dialysis Inc	Dialysis	Ontario	120 Victor Heights Pkwy, Victor, NY 14564, USA
6	Finger Lakes Dialysis Center	Dialysis	Ontario	6385 Victor-Manchester Rd, Victor, NY 14564, USA
7	Wegmans	Shopping	Ontario	345 Eastern Blvd, Canandaigua, NY 14424, USA
8	Eastview Mall	Shopping	Ontario	7979 Victor-Pittsford Rd, Victor, NY 14564, USA
9	Wade's Market	Shopping	Ontario	6179 State Highway 96, Farmington, NY 14425, USA
10	TOPS Friendly Markets	Shopping	Ontario	5150 North St, Canandaigua, NY 14424, USA

No.	Name	Type	County	Address
11	Aldi	Shopping	Ontario	3138 County Road 10, Canandaigua, NY 14424, USA
12	Walmart Supercenter	Shopping	Ontario	4238 Recreation Dr, Canandaigua, NY 14424, USA
13	BJ'S Wholesale Club	Shopping	Ontario	3635 Berry Fields Rd, Geneva, NY 14456, USA
14	Rank's Iga	Shopping	Ontario	201 West Ave, Canandaigua, NY 14424, USA
15	Golden Spot Senior Center	Senior Center	Ontario	110 Saltonstall St
16	Finger Lakes Community College - Canandaigua	Education	Ontario	3325 Marvin Sands Drive
17	Finger Lakes Community College - Geneva	Education	Ontario	63 Pulteney Street
18	Finger Lakes Community College - Victor	Education	Ontario	200 Victor Heights Parkway
19	Hobart and William Smith Colleges	Education	Ontario	300 Pulteney Street
20	Seneca County DSS	Human Service	Seneca	
21	LifeCare	Medical	Seneca	Balsey Road, Seneca Falls, NY
22	Ovid Medical Office	Medical	Seneca	2138 County Route 139, Ovid, NY 14521-9701
23	Seneca County Office for the Aging	Senior Center	Seneca	1 Dipronio Dr, Waterloo, NY 13165, USA
24	Sauders Store	Shopping	Seneca	2146 River Rd, Seneca Falls, NY 13148, USA
25	Ovid's Big M	Shopping	Seneca	7174 N Main St, Ovid, NY 14521, USA
26	Tops Food Market	Shopping	Seneca	1963 Kingdom Rd, Waterloo, NY 13165, USA
27	Walmart	Shopping	Seneca	1860 North Rd, Waterloo, NY 13165-4175
28	Aldi	Shopping	Seneca	2055 US Route 20, Seneca Falls, NY 13148
29	Seneca County Senior Center	Senior Center	Seneca	1 DiPronio Drive
30	Wayne County DSS	Human Service	Wayne	
31	Wayne County Office for the Aging	Senior Center	Wayne	1519 Nye Rd, Lyons, NY 14489, USA
32	Clifton Springs Hospital & Clinic	Hospital	Wayne	165 E Union St, Newark, NY 14513, USA
33	Newark-Wayne Community Hospital	Hospital	Wayne	6600 Middle Rd, Sodus, NY 14551, USA
34	TOPS Friendly Markets	Shopping	Wayne	6272 County Road 110, Ontario, NY 14519, USA
35	Save-A-Lot	Shopping	Wayne	100 Mason St, Newark, NY 14513, USA
36	Breens IGA	Shopping	Wayne	
37	Wegman's	Shopping	Wayne	W Miller St, Newark, NY 14513, USA
38	Aldi	Shopping	Wayne	20 State Highway 31, Lyons, NY 14489, USA

No.	Name	Type	County	Address
39	Palmyra Senior Center	Senior Center	Wayne	149 E. Main Street
40	Clyde Senior Center	Senior Center	Wayne	200 DeZeng Street West
41	Wolcott Senior Center	Senior Center	Wayne	12223 Oswego Street
42	Sodus Senior Center	Senior Center	Wayne	56 W. Main Street
43	Finger Lakes Community College - Wayne County	Education	Wayne	1100 Technology Parkway
44	Yates County DSS	Human Service	Yates	
45	Yates County Office for the Aging	Senior Center	Yates	417 Liberty St, Penn Yan, NY 14527, USA
46	Soldiers & Sailors Memorial Hospital	Hospital	Yates	
47	P&C Food & Pharmacy	Shopping	Yates	321 Liberty St, Penn Yan, NY 14527, USA
48	Aldi	Shopping	Yates	204 Liberty St, Penn Yan, NY 14527, USA
49	Morgan's Grocery	Shopping	Yates	100 Hamilton St, Penn Yan, NY 14527, USA
50	Crooked Lake Mercantile	Shopping	Yates	3736 New York 54A, Branchport, NY 14418, USA
51	Hillcrest Bulk Foods	Shopping	Yates	2901 Hwy 364, Penn Yan, NY 14527, USA
52	Bob & Irv's Shursave Food Shop	Shopping	Yates	136 N Main St, Naples, NY 14512, USA
53	Martinis Shurfine	Shopping	Yates	1 Water St, Dundee, NY 14837, USA
54	Crystal Valley Bulk Foods	Shopping	Yates	1542 State Highway 230, Dundee, NY 14837, USA
55	St. Mark's Terrace	Senior Center	Yates	110 Chapel Street

Major Destinations in the Western Region

No.	Name	Type	County	Address	City
1	Medina Memorial Health Care System: Lake Plains Renal Dialysis	Dialysis	Genesee	587 E Main St, Batavia, NY 14020, USA	Batavia
2	Genesee Community College - Batavia	Education	Genesee	1 College Road	Batavia
3	VA Western Ny Healthcare System	Hospital	Genesee	222 Richmond Ave, Batavia, NY 14020, USA	Batavia
4	United Memorial Medical Center	Hospital	Genesee	127 North St, Batavia, NY 14020, USA	Batavia
5	Batavia-Genesee Senior Center	Senior Center	Genesee	2 Bank St, Batavia, NY 14020, USA	Batavia
6	Walmart Supercenter	Shopping	Genesee	4133 Veterans Memorial Dr, Batavia, NY 14020, USA	Batavia
7	TOPS Friendly Markets	Shopping	Genesee	390 W Main St, Batavia, NY 14020, USA	Batavia
8	Arrow Mart	Shopping	Genesee	5267 Clinton Street Rd, Batavia, NY 14020, USA	Batavia
9	BJ's Plaza	Shopping	Genesee	8330 Lewiston Rd, Batavia, NY 14020, USA	Batavia
10	Save-A-Lot	Shopping	Genesee	15 W Main St, Le Roy, NY 14482, USA	Le Roy
11	TOPS Friendly Markets	Shopping	Genesee	128 W Main St, Le Roy, NY 14482, USA	Le Roy
12	Noyes Memorial Hospital	Hospital	Livingston	111 Clara Barton St, Dansville, NY 14437, USA	Dansville
13	Noyes Dialysis Center	Dialysis	Livingston		Geneseo
14	Genesee Community College - Lima	Education	Livingston	7285 Gale Road	Lima
15	Genesee Community College - Dansville	Education	Livingston	9221 Robert Hart Drive	Dansville
16	SUNY Geneseo	Education	Livingston	1 College Circle	Geneseo
17	Livingston County DSS	Human Service	Livingston	3 Murray Hill Dr, Mt Morris, NY 14510, USA	Mt. Morris
18	Livingston County Office for the Aging	Senior Center	Livingston		Mt. Morris
19	Swan Senior Center	Senior Center	Livingston	23 State Street	Mount Morris
20	Wegmans - Geneseo	Shopping	Livingston		Geneseo
21	Aldi	Shopping	Livingston	4566 Morgan View Rd, Geneseo, NY 14454, USA	Geneseo

No.	Name	Type	County	Address	City
22	West's Shurfine Food Mart	Shopping	Livingston		Livonia
23	TOPS Friendly Markets	Shopping	Livingston	270 E Main St, Avon, NY 14414, USA	Avon
24	Save-A-Lot	Shopping	Livingston	Airport Plaza, Dansville, NY 14437, USA	Dansville
25	Walmart Supercenter	Shopping	Livingston	4235 Veteran Dr, Geneseo, NY 14454, USA	Geneseo
26	TOPS Friendly Markets	Shopping	Livingston	35 Franklin St, Dansville, NY 14437, USA	Dansville
27	Genesee Community College - Albion	Education	Orleans	456 West Avenue	Albion
28	Genesee Community College - Medina	Education	Orleans	11470 Maple Ridge Road	Medina
29	Strong Memorial Hospital	Hospital	Orleans	301 West Ave, Albion, NY 14411, USA	Albion
30	Medina Memorial Hospital	Hospital	Orleans	Medina Memorial Healthcare System, 200 Ohio St, Medina, NY 14103, USA	Medina
31	Orleans County DSS	Human Service	Orleans	14016 Rte 31, Albion, NY 14411, USA	Albion
32	Orleans County Office for the Aging	Senior Center	Orleans		Albion
33	Medina Senior Center	Senior Center	Orleans	615 West Avenue	Medina
34	Walmart Supercenter	Shopping	Orleans	13858 Rte 31 W, Albion, NY 14411, USA	Albion
35	TOPS Friendly Markets	Shopping	Orleans	11200 Maple Ridge Rd, Medina, NY 14103, USA	Medina
36	Brown's Berry Patch	Shopping	Orleans	14264 Roosevelt Hwy, Waterport, NY 14571, USA	Waterport
37	Pennysaver Market	Shopping	Orleans	29 S Main St, Lyndonville, NY 14098, USA	Lyndonville
38	TOPS Friendly Markets	Shopping	Orleans	408 West Ave, Albion, NY 14411, USA	Albion
39	Aldi	Shopping	Orleans	11248 Maple Ridge Rd, Medina, NY 14103, USA	Medina
40	Genesee Community College - Arcade	Education	Wyoming	25 Edward Street	Arcade
41	Genesee Community College - Warsaw	Education	Wyoming	115 Linwood Avenue	Warsaw
42	Wyoming County Community Health	Hospital	Wyoming	400 N Main St, Warsaw, NY 14569, USA	Warsaw

No.	Name	Type	County	Address	City
43	Wyoming County DSS	Human Service	Wyoming	466 N Main St, Warsaw, NY 14569, USA	Warsaw
44	Perry Senior Center	Senior Center	Wyoming	165 Lake Street	Perry
45	Wyoming County Office for the Aging	Senior Center	Wyoming	8 Perry Ave, Warsaw, NY 14569, USA	Warsaw
46	Save-A-Lot	Shopping	Wyoming	Wyoming, USA	Warsaw
47	TOPS Friendly Markets	Shopping	Wyoming	2382 State Route 19 N, Warsaw, NY 14569, USA	Warsaw
48	Lantz's Bulk Foods	Shopping	Wyoming	Wyoming, USA	Warsaw
49	Warsaw Big M	Shopping	Wyoming	80 S Main St, Warsaw, NY 14569, USA	Warsaw
50	Perry Food Market IGA	Shopping	Wyoming	121 N Center St, Perry, NY 14530, USA	Perry

Appendix C. Overview of Human Service Transportation Funding

Funding for Public and Human Service Transportation

Overview

Funding is at the core of all public transit and human service coordination plans. The programs and processes for distributing funding can be one of the main obstacles to creating a coordinated transportation service network, yet, funding is essential to maintain existing services and advance new programs.

As discussed, there are many federal and state funding programs that may be used to support human service transportation. This Appendix highlights the most relevant and widely used of these programs and contains a summary of the highlighted programs. The majority of the available HST funding is provided through transportation or human/health service programs. Consequently, we have organized this section into these two major categories. The following text highlights the most relevant and important funding programs for human service transportation in the Genesee Finger Lakes Region.

Coordinated HST Funding in Rural New York

HST transportation in rural parts of New York State benefits from two state programs. The first is the State Operating Assistance Program (STOA), which provides funding to transportation service providers that carry members of the general public. STOA funds are paid on a per-mile and per-passenger basis and can be used to match other federal funding programs, including funds provided by the US Department of Transportation. More information on the STOA program is presented in the following text.

A second important asset in New York State is the cost sharing system available to rural transportation providers and their partner agencies. This program was developed in collaboration between local entities in other rural upstate areas and the NYSDOT Rural Program and allows transportation partners to share the cost of service based on each partner's relative share of ridership on the coordinated system. As an example, if there is 5% annual ridership by a particular agency, that agency pays 5% of the system annual cost. While each agreement is subject to review and consideration, the State recommends that cost sharing methods be locally developed and adopted and apply to all coordinating partners.

The cost sharing system creates a tangible benefit for developing a coordinated transportation service system by encouraging encourages transportation providers to work with as many partners as possible. In addition, coordinated services which are open to and used by members of the general public may also receive STOA funding. These benefits include an ability to match Federal Department of Transportation funds (DOT) with other non-DOT Federal programs, thereby reducing local matching requirements.

Public Transportation Funding

Federal Funding for Public Transportation

Most federal funding for public transportation is distributed by the Federal Transit Administration (FTA), which oversees a number of grant programs that can be used to support the operating and/or capital expenses of public transportation services. Most FTA programs are designed to serve either an urban or rural population. Due to the diversity of the region, organizations within the Finger Lakes-Genesee Region participate in most of the urban and rural funding programs available through the FTA. Unless otherwise noted, these grants typically require a 20% local match contribution for capital, administrative and planning expenses and 50% for operating expenses.

Large Urban Cities Formula Program (Section 5307)

FTA's Large Urban Cities formula program provides federal funding support for the planning and operation of mass transportation services, and capital investments in urbanized areas. An urbanized area is an incorporated area with a population of 50,000 or more that is designated as such by the U.S. Census Bureau. Section 5307 funds are distributed based on legislative formulas; how funds may be used is also based on urban area size. Apportionments for urbanized areas of more than 200,000 reflect population, population density and operational formula factors. These areas may use funds for eligible capital and/or preventative maintenance activities. In urbanized areas with less than 200,000 people, apportionments reflect population and population density only. These areas may use funds for capital, preventative maintenance and/or operating activities. In the Genesee Finger Lakes Region, RGRTA received $4.6 million in 5307 funds in FY 09-10. Funds were used to support both fixed-route and paratransit (Lift-Lines) service.

Major Capital Investment Program (Section 5309)

The Major Capital Investment Program funds projects that cannot be addressed through traditional transit agency formula apportionments. There are three sub-categories of projects that are funded through this Program: Fixed Guideway Modernization; New Starts and Extensions; and Bus and Bus Facility.

The Bus and Bus Replacement Facilities component of the Section 5309 program is most applicable to the nine-county Finger Lakes Genesee Region. This program may be used to fund new and replacement buses, bus maintenance and administrative facilities, passenger facilities, park-and-ride stations, passenger amenities and other ancillary equipment. Funding under this program is typically earmarked; more recently some funds have been awarded under a competitive grant process. RGRTA receives Section 5309 funds to maintain its fleet and facilities.

Capital Assistance Program for Elderly Persons and Persons with Disabilities (Section 5310)

The Section 5310 Program is intended to improve mobility and independence for the elderly and persons with disabilities. Funds are apportioned to states annually based on a statutory formula that reflects the size of a state's population of older adults and disabled population. In New York, Section 5310 funds are administered by NYSDOT and are used to fund capital purchases only, primarily vehicles. Many agencies in the Finger Lakes Genesee Region have received 5310 funding in the past, including several area Arcs,

The most recent federal transportation bill, Safe Accountable Flexible Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU) (2005) includes a coordination element to 5310 funding that requires all states and metropolitan areas receiving funds to have a coordinated public transit-human services plan in place.

Rural and Small Urban Areas Formula Program (Section 5311)

FTA's Rural and Small Urban Areas formula program provides the same sort of assistance as the Section 5307 program, but for areas with a population of less than 50,000. In addition to capital and operating assistance, Section 5311 funds may also be used to cover administrative assistance to state agencies, local public agencies, nonprofit organizations, and operators of public transportation services. A key objective of the Section 5311 program is to promote coordination between the public transportation services financed with its funds, those supported by other federal agencies and those provided by private operators.

In the Finger Lakes-Genesee Region, in its capacity as the rural service provider RGRTA receives 5311 funds to operate services in six of the eight rural counties (Genesee/Batavia, Livingston, Wayne, Wyoming, Orleans, and Seneca). Ontario County receives 5311 funding directly and Yates County does not currently have service.

Job Access and Reverse Commute Program (Section 5316)

The Job Access and Reverse Commute (JARC) program provides formula funding for projects that assist eligible low-income individuals with transportation services they may need to access jobs and other employment-related activities (such as educational opportunities or training that directly contributes to job attainment). JARC, originally a discretionary program, became a formula program under SAFETEA-LU. Like the 5310 program, SAFETEA-LU also requires states have a coordinated plan in place in order to receive funds. The program is administered by NYSDOT and funds are awarded through a competitive grant program. RGRTA uses JARC/Section 5316 funds to support RTS service and some regional services that are specifically targeted to support job access.

New Freedom Program (Section 5317)

The New Freedom program provides formula funding for new public transportation services and service alternatives beyond those required by the American with Disabilities Act (ADA), assisting individuals with disabilities with transportation to and from employment, among other services. The New Freedom Program is designed to encourage new public transportation services and service alternatives to address the transportation needs of persons with disabilities that go beyond those required by the ADA, such as providing transportation for persons with disabilities to and from employment. The New Freedom formula grant program aims to provide additional tools for persons with disabilities seeking to overcome existing barriers by integrating into the work force and participating fully in society. Similar to the 5310 and 5316 programs, SAFETEA-LU requires states to have a coordinated public transit - human service transportation plan in place in order to receive and spend these funds. Likewise, the funds area also awarded through a competitive grant process that is administered by NYSDOT. RGRTA does receive Section 5317/New Freedom funds, although the grant award is smaller as compared with other programs.

State Federal Funding for Public Transportation

New York State funds two programs that support public transportation services:

- Statewide Mass Transportation Operating Assistance (STOA) Program that funds transit operations.
- Transit State Dedicated Fund (SDF) Program which provides funds for capital projects

Statewide Mass Transportation Operating Assistance (STOA) Program

The Statewide Mass Transportation Operating Assistance (STOA) Program is designed to ensure permanent, ongoing support for public transportation services. It is funded through a series of taxes that are deposited in the Mass Transit Operating Assistance (MTOA) fund. The MTOA fund is subdivided into upstate and downstate accounts. The upstate account provides funds to all transit systems outside of 12 county metropolitan transportation commuter districts.

Municipalities, including cities, towns, counties and transit agencies are eligible to receive STOA funds if they provide transportation services that are open and marketed to the general public, charge a reasonable fare and provide service in vehicles capable of carrying 15 or more passengers[4]. The funding is provided as a reimbursement to operators and is paid based on the number of passengers carried and the number of vehicle miles traveled. In FY 2010, STOA reimbursed operators $0.405 per passenger carried and $0.69 per mile traveled. All counties in the Finger Lakes-Genesee Region that operate public transit services receive 5311 funds.

STOA funds may be used as matching resources for federal funding programs, including FTA funds. As such, they are an important funding source for local transit agencies. The program is also unique in that the funding is purely based on service provided with no set cap on the amount of funding that may be received.

Transit State Dedicated Fund (SDF) Program

The Transit State Dedicated Fund (SDF) provides funds for capital projects. Eligible projects should be identified in a needs' analysis and may include projects such as replacement buses, facilities and garage modernization projects; and transit related equipment needs.

The fund is primarily used by New York State public transportation agencies to match federal resources for capital purchases. As discussed, FTA typically fund transit capital projects at 80%; SDF funds may be used for half of the remaining share (10%) and local funds for the remaining portion of the non-federal share (10%).

Local Public Transportation

As noted, nearly all federal transportation funding programs require local matching resources, with matching requirements for capital programs set at 20% and operating programs at 50%. Finding and maintaining local matching funds is typically among the most challenging aspects associated with developing and maintaining local public transportation services. This is especially true in rural areas where there are limited opportunities to raise funds.

[4] Some exceptions to the vehicle size rule are allowed. Exceptions are granted on a case-by-case basis.

In New York State, the STOA program can be used to match federal programs. The amount of funding provided by STOA varies by location, but in general local entities must raise as little as 2-5% and as much as 25% of the service operating costs, depending on how their service is structured. Counties in the Finger Lakes-Genesee region participating in the RGRTA service, collect raise local matching funds through the mortgage tax. In Ontario County, general revenue funds, collected through property taxes, are also used to support public transportation services.

Human and Health Service Funding for Transportation

As discussed, there a large number of federal programs for which transportation is considered an allowable expense. These programs include funding available through a variety of agencies and programs, many of which have specific requirements for who is eligible to receive funding and how the funding may be administered. This section provides an overview of some of the largest and most common federal funding programs used to support human service transportation. In addition to describing the federal programs, this section emphasizes how transportation services associated with individual programs are administered in New York State. Funding programs are organized and presented according to the broader federal program, i.e. the Department of Human and Health Services (DHHS) and the Department of Labor.

Human and Health Services

Administration on Aging - Grants for Supportive Services (Title III-B)

The Administration on Aging (AoA) is responsible for the administration of a number of programs authorized by the Older Americans Act. Title III of the Older Americans Act (OAA) supports programs and services which are intended to aid active seniors and older adults who are at risk of losing their independence. Part B (Support Services) of Title III considers transportation as an allowable expense. People transported using these funds must be aged 60 or more and the operator cannot charge passengers a fare, although voluntary contributions are allowed.

In New York State, OAA funds are administered by the 59 local agencies for the aging, which in most, but not all, cases are county programs or departments for the aging. Several of the counties in the nine-county region do use Title IIIB funds for transportation, including funding programs such as senior vans and dial-a-ride services.

Temporary Assistance for Needy Families (TANF)

The Temporary Assistance to Needy Families (TANF) Program provides block grants to states to help finance support services for individuals receiving federal cash assistance in their efforts to find and maintain employment. According to guidance jointly issued by the Departments of Health and Human Services, Labor and Transportation,[5] examples of allowable uses of TANF funds (both federal dollars and state funds that are used to provide the required non-federal share) for transportation include the following:

- Reimbursement or a cash allowance to TANF recipients for work-related transportation expenses

[5] *Use of TANF and WTW Funds for Transportation*; Dear Colleague letter from the Secretaries of Health and Human Services, Labor, and Transportation dated May 4, 1998.

- Contracts for shuttles, buses, car pools or other services for TANF recipients
- Purchase of vehicles for the provision of service to TANF recipients
- Purchase of public or private transit passes or vouchers
- Loans to TANF recipients for the purpose of leasing or purchasing a vehicle for work travel
- Programs to obtain and repair vehicles for use by TANF recipients
- One-time payments to recipients to cover expenses such as auto repair or insurance
- Payment of "necessary and reasonable" costs for new or expanded transportation services for use by TANF recipients
- Assistance to TANF recipients with the start-up of a transportation service
- Transfer of TANF funds to a Social Services Block Grant for use in efforts to provide transportation services for disadvantaged residents of rural and inner city areas
- Payment of TANF agency expenses associated with the planning of transportation services for TANF individuals.

A caveat concerning the use of TANF funds for transportation services is that, according to the definition of "assistance" in the proposed TANF regulations, a transit pass constitutes assistance, and counts toward the lifetime limit of 60 months (states may set shorter limits, or provide assistance for a longer period using state funds) that a family is entitled to receive TANF benefits. This is an important stipulation that may influence an individual's decision to obtain transportation assistance.

In New York State, a portion of TANF funds are administered as Flexible Funds for Family Services (FFFS), a program that gives local entities more control over how the funds are used, as long as they are used only for programs and activities which further the goals of the TANF program, which includes the provision of transportation service for use by eligible TANF recipients traveling for work and work-related activities. According to the regulations, TANF funds may not be used to subsidize the use of such transportation services by non-TANF individuals. However, per New York State cost allocation arrangement, some counties use TANF funds to pay for a portion of shared transportation service costs directly associated with TANF clients.

In the Finger Lakes-Genesee region, both individual counties and the RGRTA receive TANF funding to support transportation services. RGRTA, for example, was allocated $403,000 in FY 09-10 for a bus pass program and to support demand response service in Wayne County (WATS). Other places, such as Ontario County, use TANF Funds to pay transit fares for TANF recipients traveling to employment or job training programs.

Centers for Medicare and Medicaid Services (CMS)

Title XIX of the Social Security Act of 1965 established the Medicaid program as a joint effort on the part of the federal and state governments to ensure health care services for individuals and families who meet certain income and resource requirements, or who belong to other needy groups. Medicaid issues program guidelines and requirements, but each state is responsible for the design of its own Medicaid program, including such components as eligibility standards; the

type, amount, duration and scope of services to be provided; rates of payment for services; and administrative procedures.

Access to health care is considered part of the Medicaid services, thus non-emergency medical transportation (NEMT) funded by Medicaid has emerged as a major transportation program. In New York State, oversight for the NEMT program is largely carried out by the Department of Health. Administration of the program is decentralized and assigned to a network of 58 separate and unique districts. As a result, counties are responsible to ensure that Medicaid clients have transportation to Medicaid eligible services. Most counties within the Finger Lakes-Genesee region have set up local brokers to schedule and provide non-emergency medical transportation.

Exceptions to this rule are Medicaid programs and services administered by the State Office of Mental Health (OMH) and the State Office for Persons with Development Disabilities (OPDD). Programs administered by OMH and OPDD often have transportation incorporated into their service contracts and thus, many service providers maintain their own vehicles and transport their own clients. In each of the nine counties in the Finger Lakes-Genesee region, for examples, Arc chapters, which serve individuals with disabilities, maintain and operate their own vehicles for client transportation. These services are largely paid for by Medicaid and in most cases these client based services operate in areas that already have a Medicaid transportation broker.

New York State Developmental Disabilities Planning Council

Also part of the OPDD, the New York State Developmental Disabilities Planning Council (DDPC) is a Federally-funded New York State Agency.
The DDPC is responsible for developing new ways to improve the delivery of services and supports to New Yorkers with developmental disabilities and their families. The Council focuses on community involvement, employment, recreation and housing issues faced by New Yorkers with developmental disabilities and their families. In 2007, the DDPC supported a series of demonstration projects that addressed transportation barriers affecting individuals with disabilities.

Department of Labor

Workforce Investment Act

The Workforce Investment Act (WIA) provides support for national, state and local programs directed at supporting workers and employers. At the state and local level, WIA provides funding for workforce development programs as well as the establishment of “One-Stop” centers. “One Stop” centers provide employers and individuals with a centralized site for job training and development, job skills assessment, job search and placement assistance. Transportation expenses and support services are an allowable use of these funds.

In New York State, the One Stop centers are administered primarily as a county based system. In the Finger-Lakes Genesee Region Monroe County has its own program, while Genesee, Livingston, Orleans and Wyoming counties have a joint program and Ontario, Seneca, Wayne and Yates have a joint program. One Stop centers are typically not a large funder of community transportation services and usually provide funding for fares only. Workforce development agencies, however, have been active partners in the development of transportation services.

Department of Education

Rehabilitation Act

The Rehabilitation Act authorizes formula grant programs to support vocational rehabilitation, support employment, independent living and client assistance for individuals with disabilities. Among the programs funded by the Rehabilitation Act, the Vocational Rehabilitation (VocRehab) Grants to States are highly relevant to transportation funding. This formula program offers grant funds for services, including transportation. There is a local matching requirement of 21.3% of program costs.

In New York State, vocational rehabilitation services are managed by the State Department of Education, although programs for visually impaired are administered by the NYS Commission for the Blind and Visually Handicapped. VocRehab services in the Finger Lakes-Genesee Region are coordinated by the Rochester District Office and two satellite offices in Geneseo and Geneva. These offices coordinate transportation for clients, which includes arranging for public transportation services as well as providing funds to support other services.

Federal Agency	Programs with Major Transportation Component	Passenger Eligibility	Transportation Service Funded	Regional/Local Administering Agency	Matching Requirement	Coordination Potential
Department of Health and Human Services (DHHS)						
Centers for Medicaid and Medicare	Medicaid	Medicaid Recipient	Non-emergency Medical Transportation	Counties – for NEMT Agencies for some client specific programs	None	Medium - Medicaid cannot pay for non-Medicaid eligible service or individual but cost sharing arrangements allow for shared service delivery.
Administration on Aging	Title III-B	Individual aged 60+	General Transportation	Area Agency on Aging – County Departments	15%	Medium – Title III-B funds can be used to purchase service from existing providers, but passengers cannot pay a fare.
Administration for Children and Families	TANF	TANF eligible	General trips related to TANF programming	County Departments	None	High – TANF funds can purchase service from existing providers, including bus passes.
Department of Transportation (DOT)						
Federal Transit Administration	5307 Urbanized Area Formula Program	General Public	Capital, Maintenance and Operations*	RGRTA	20% Capital 50% Operating	High – Most fixed-route services serve a multitude of populations.
	5309 Bus and Bus Facility Program	General Public		RGRTA	20% Capital	High – Most fixed-route services serve a multitude of populations.
	5310 Capital Assistance Program for Elderly Persons and Persons with Disabilities	Older Adults and Persons with Disabilities	General Transportation	Non-profit and government agencies	20% capital	High – In NY, funds are used for capital purchases only. Vehicles may be used to support some but not all other client based transportation services.

Federal Agency	Programs with Major Transportation Component	Passenger Eligibility	Transportation Service Funded	Regional/Local Administering Agency	Matching Requirement	Coordination Potential
	5311 Non urbanized Area Formula Program	General Public	General Transportation	RGRTA; Ontario County	20% Capital 50% Operating	High – Rural and small urban transit services serve general public and special populations.
	5316 Job Access and Reverse Commute	General Public	Transportation to/from work, including reverse commute	RGRTA Ontario County	20% Capital 50% Operating	High – Program design is intended to serve low income and high need populations.
	5317 New Freedom	Services and programs that go beyond ADA	General Public but focus on Individuals with Disabilities	RGRTA Ontario County Private non-profit agencies	20% Capital 50% Operating	High – Program design is intended to serve low income and high need populations
Department of Labor (DOL)						
	Workforce Investment Act	Support workers and employers	Program participants	Private non-profit agencies and Individuals	None	Medium – Potential for service contracts with transportation services, but many programs are arranged based on individual needs
Department of Education (DOE)						
	Vocational Rehabilitation Grants to States	Services for individuals with disabilities	Program participants	Private non-profit agencies and Individuals	21.3% for programs	Medium – Potential for service contracts with transportation services, but many programs are arranged based on individual needs.
State Funding Programs						
NYSDOT	STOA	General Public	General Transportation	RGRTA Ontario County Private non-profit agencies	None	High – Program must serve general public but funds can be used to match other federal DOT and non-DOT programs
	SDF	General Public	General Transportation	RGRTA Ontario County	None	High – Program must serve general public but funds can be used to match other federal DOT and non-DOT programs

Appendix D. Liability Issues and Volunteer Drivers

Liability Issues Associated with Volunteer Elderly Transportation

Concerns about liability are one of the greatest barriers to setting up a supplemental transportation program. According to a nationwide survey of supplemental transportation providers conducted by the Beverly Foundation, a California-based non-profit whose mission is to improve senior mobility, concerns regarding liability are often the main reason many communities say they have not organized a senior transportation program, regardless of the community's need. According to the Beverly Foundation, there are three major elements of risk management which need to be addressed in a volunteer based senior mobility program: liability, exposure and insurance.

Liability

Research on community-based transportation programs indicates that most have an above-average safety record.[6] Nevertheless, liability for the negligent actions of volunteer drivers is a distinct possibility. This possibility only increases if the provider is viewed as having "deep pockets." In addition, Good Samaritan laws, such as New York's Pub. Health Law §3000-a only cover emergency medical treatment or assistance given at the scene of an accident, and are therefore not applicable to volunteers transporting the elderly on routine medical visits.[7] On the other hand, since the service provider does not have an employer/employee relationship with the driver, nor owns or maintains the vehicles, its liability is not easily established.

Reducing Exposure

The program provider's exposure to liability can be substantially reduced by adopting the following procedures:

Rider Liability Waiver. Several STP's prepare "Rider Agreements" that are read and signed as part of the registration process. By signing the agreement, the rider acknowledges that their participation was voluntary and that the provider is released from legal responsibility in the event of injury or harm. A form of these Rider Agreements can be obtained from the Beverly Foundation. In addition, some states, such as New Mexico have their agreements available on-line.[8]

Driver Screening. Drivers should be required to sign a form verifying that they meet certain basic qualifications and performance requirements. Basic qualifications may be: (1) being over 18 years of age, (2) a valid driver's license, (3) two years driving

[6] White Paper 3.1 by the Beverly Foundation, "PasRide: A Pilot Low-Maintenance/Low Cost STPs", page 7. Link: http://www.beverlyfoundation.org/library/volunteerfriendsmodel/pasride_pilot_low_cost_maintenance.pdf

[7] http://ezinearticles.com/?New-Yorks-Good-Samaritan-Law---A-Good-Deed-Goes-Unpunished&id=1564360

[8] New Mexico's Liability Waiver Form: http://www.nmaging.state.nm.us/D&E_Waiver_pdf_files/Transportation_Release_of_Liability.pdf

experience, (4) valid automobile registration, and (5) personal automobile liability insurance. Sample performance requirements are: (1) no violations for driving with a suspended license within the past 4 years, and (2) no more than two moving violations within the past three years.

Rider Recruitment of Drivers. A pilot program by the Beverly Institute, called the PasRide Program, relied on an innovative system whereby the riders would recruit their own drivers from their own personal relations. Importantly, by having riders recruit their own drivers from preexisting relations, it was expected that they would avoid selecting drivers who they knew or suspected had demonstrated driving problems and would pose a safety risk.

Travel Reimbursement to Riders. Another innovative liability avoidance measure implemented by the PasRide Program is the reimbursement to riders as opposed to drivers. Other transportation programs that provide travel reimbursement usually provide the funds directly to volunteer drivers. For PasRide, as noted above, reimbursement was provided to riders, who in turn distributed the money to their volunteer driver(s). This was empowering for the rider but also positioned the Foundation in an “arms length” relationship with the driver. This was considered to help minimize the organization’s liability since the driver was not a volunteer of the organization but of the rider, and was reimbursed by the rider.

Insurance

It is recommended that most sponsors secure additional insurance coverage. Such additional coverage would include non-owned/hired auto insurance for the organization (as part of the commercial liability policy) and excess auto liability, accident and personal liability insurance for volunteers.

Figure D-1 New Mexico's Liability Waiver

Aging & Long-Term Services Department
Elderly & Disability Services Division
D&E Waiver Program

Transportation Release of Liability Form

Recipient Name: _____

Recipient Waiver ID#: _____

I, _____ agree to indemnify and hold harmless the Health Care Financing Administration, the State of New Mexico, the Aging and Long-Term Services Department, the Department of Health and any of its agencies, and the Medicaid Program against any and all liability, loss, damage, costs or expenses which I may sustain, incur or be required to pay because:

A. I was injured, died or sustained property loss or damage while being transported, if transportation is part of my services under the Medicaid Waiver Program: or because,

B. I, as a recipient, injured another person or damaged the property of another person while being transported, if such transportation is part of my services under the Medicaid Waiver Program.

I understand that this release shall not apply to liabilities, losses, charges, costs, or expenses caused by, or resulting from, the acts of omissions of employees of the Medicaid Waiver Program.

I also agree to promptly notify the Medicaid Waiver Program within ten (10) days, of any legal action is brought against the Health Care Financing Administration, the State of New Mexico, the Aging and Long-Term Services Department, the Department of Health and any of its agencies, or the Medicaid Program

_____	_____
Recipient Signature	Date
_____	_____
Provider Agency Signature	Date
_____	_____
Witness Signature	Date

ALTSD
Revised 2/2006