Coordinated Public Transit-Human Services Transportation Plan
For Herkimer and Oneida Counties
2017-2020

Adopted by
Governmental Policy and Liaison Committee on November 21, 2016

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Chapter 1 ~ Introduction

Background
Metropolitan Planning Organizations (MPOs) were created, in compliance with the Federal Highway Act of 1962, to establish regional transportation goals and objectives for Urbanized Areas with a population of greater than 50,000. The Herkimer-Oneida County Transportation Study (HOCTS) was created in 1963 by corresponding resolutions of Herkimer County and Oneida County to conduct this activity for the Metropolitan Planning Area (MPA). The MPA encompasses the Utica Urbanized Area, Rome, Sylvan Beach, Little Falls, Oneida (portion) and Ilion-Herkimer Urban Clusters, and the surrounding area within Herkimer and Oneida Counties. HOCTS shares responsibility with the NYS Department of Transportation (NYSDOT) to develop cooperative transportation plans and programs for the two-county area and provides a public forum for the identification of transportation needs. Currently, funding is provided for the MPO by both the Federal Highway Administration (FHWA) and the Federal Transit Administration (FTA) via federal transportation legislation.

The Herkimer-Oneida Counties Governmental Policy and Liaison Committee (GP&L) is the governing body of the MPO. The GP&L directs the regional transportation planning process as it relates to the use of federal transportation funds in Herkimer and Oneida Counties. The GP&L has final approval and authority on all major transportation decisions, policies, and programs developed through the HOCTS planning process. The GP&L is composed primarily of locally elected and appointed officials that represent the interests of the citizens of Herkimer and Oneida Counties, officials from the State of New York, transit providers, social service agencies and other stakeholders. HOCTS serves as staff to the GP&L to carry out the transportation planning process and works cooperatively with local, state, and federal agencies to conduct transportation planning activities in Herkimer and Oneida Counties. Under federal legislation, MPOs are responsible for the planning and programming of federal transportation funds within the designated MPO MPA.

As an MPO, HOCTS is responsible for producing and maintaining three core products. The foundation document is the Long Range Transportation Plan Update 2015-2035 (LRTP Update 2035). Updated in five year increments, the LRTP sets the course for future transportation system investments by detailing a vision of the desired direction and evolution of the transportation system as described by area residents, business and municipal leaders. The priorities and projects identified within this plan are incorporated into a capital program in the form of a four year Transportation Improvement Program (TIP), and an annual plan in the form of the Unified Planning Work Program (UPWP).

The HOCTS LRTP Update 2035 is guided by principles that support its vision, goals, and objectives. The principles that are related to public transit and human service transportation and the populations they serve, are as follows:

- Transportation plans and programs will seek to maintain the established and varied setting that makes the area an attractive place to live, work and visit, while bringing positive changes to the natural and built environments that outweigh the associated costs.
- Maintaining and operating an integrated transportation system that considers safety for all users and all modes.
- Coordination of land use planning, economic development, and transportation planning activities is essential to maximize the region’s potential.
- Improving the scope and coordination of the transit system will enhance mobility options for those that cannot or will not rely solely on automobile; in turn it will help reduce the physical, environmental and capital costs associated with the transportation network.
- Regional issues require cooperation of municipalities and organizations that transcend established jurisdictional boundaries.
- A continued commitment to public participation will be upheld to ensure HOCTS is planning with the people and considers them as the customers of the system.
In addition, the LRTP Update 2035 is organized around six general priority areas that are reflective of the planning factors defined in the Moving Ahead for Progress in the 21st Century (MAP-21). The priority areas guide current and future infrastructure investment, the LRTP goals outline the progression of the HOCTS, and the objectives identify strategies necessary to obtain the goals. Two priority areas that are related to the coordination of public transit and human service transportation programs are:

1. **Mobility & Accessibility**

   A coordinated approach to developing a transportation network which meets the existing and growing needs of all users. Society today is more mobile than ever before. Planning for this has to be interwoven in all aspects of the LRTP through addressing accessibility and mobility. Accessibility is the degree to which the transportation network is made available to as many people as possible; where mobility is the movement of people from place to place. The joint application of these two independent elements within the transportation network is key to further developing a holistic and sustainable network.

   **Goal:** Provide a mobility management based strategic approach that provides mobility and accessibility opportunities to address the transportation needs and gaps in the network.

2. **System Preservation**

   Focus on transportation projects that preserve and enhance existing transportation facilities and/or build from the existing facilities. It is essential that regional long-range planning efforts continue to focus on preservation, repair, and restoration of existing infrastructure. System preservation helps provide for a safe and efficient transportation system while making the most efficient use of limited resources.

   **Goal:** Ensure that capital investment in the transportation system makes the most efficient use of existing facilities, services and resources and prepare for future investments.

**Federal Legislation**

**SAFETEA-LU**

The initial requirement for a coordinated public transit - human services transportation plan originated from the 2005 federal transportation legislation known as the Safe, Affordable, Flexible, and Efficient Transportation Equity Act – A Legacy for Users (SAFETEA-LU).

A provision of SAFETEA-LU required the MPOs to establish a locally developed, coordinated public transit-human services transportation plan for all the Federal Transportation Administration (FTA) human services transportation programs targeting individuals with disabilities, older adults, and people with low incomes. It required the plan to be developed by a process that includes representatives of public, private and nonprofit transportation and human services providers and participation by the public. FTA recommended three key elements in the coordinated plan: 1) an assessment of available services; 2) as assessment of needs; and 3) strategies to address gaps for target populations. This requirement established the direct link of the locally developed coordinated plan with the three FTA funding programs: 1) Section 5310 Elderly Individuals and Individuals with Disabilities Program; 2) Section 5316 Job Access and Reverse Commute Program (JARC); and 3) Section 5317 New Freedom Program. Project applications for these programs must show their coordinated efforts and addressing of their plan’s strategies. These three funding programs were stand-alone FTA programs under SAFETEA-LU. This plan is required to be updated at least every four years.

**MAP-21**

The next federal transportation legislation, Moving Ahead for Progress in the 21st Century (MAP-21), took effect October 1, 2012. **MAP-21** retained the coordinated planning requirement, but also consolidated selected federal programs and funding grants from the previous transportation bill, SAFETEA-LU. One of the MAP-21 changes related to coordination was made to the Section 5316 JARC program, a stand-alone program, which was folded into the Section 5307 Urbanized Area and Section 5311Rural Area formula programs. This change allowed activities that were eligible under the JARC program to continue to be funded under the Section 5307 and Section 5311 programs.

MAP-21 also merged the stand-alone program Section 5317 New Freedom Program with the Section 5310 Elderly Individuals and Individuals with Disabilities Program. The funding formulas were
modified in light of new eligibilities and program features and was renamed the Section 5310 Enhanced Mobility of Seniors and Individuals with Disabilities.

**FAST Act**
The current federal transportation legislation, Fixing America’s Surface Transportation Act (FAST Act), was signed into law on December 4, 2015. It authorizes transportation programs for five years effective October 1, 2015 through September 30, 2020. The **FAST Act** continues the coordination requirements of SAFETEA-LU and MAP-21, but also expands the Section 5310 Enhanced Mobility of Seniors & Individuals with Disabilities Program in regards to coordination. These changes include:

- Introduces a new *Pilot Program for Innovative Coordinated Access & Mobility (3006(b))*. FTA will competitively distribute funding for innovative projects that improve the coordination of transportation services with non-emergency medical transportation (NEMT) services. Eligible recipients are existing partnerships with specific goals for improving coordinated transportation efforts in a given locality.
- Requires FTA to develop a best practices guide for 5310 service providers.
- Requires the interagency transportation Coordination Council on Access and Mobility (CCAM) to create an updated strategic plan on transportation coordination across federal agencies, and develop a cost-sharing policy.

Although there were changes from MAP-21 and FAST Act to the human service agencies-public transit-use transportation grant programs, the Section 5307 Urban Area Formula Program, the Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities Program, and the Section 5311 Rural Area Formula Program will continue to be the core FTA grant programs of HOCTS’ coordination efforts.

**Federal Funding Programs with Required Coordination Efforts**

*Section 5310 Enhanced Mobility of Seniors and Individuals with Disabilities*

Under the Federal Transit Administration (FTA), the Section 5310 program was established in 1975 as a discretionary capital assistance program. In cases where public transit was inadequate or inappropriate, the program awarded grants to private non-profit organizations to serve the transportation needs of elderly persons and persons with disabilities. As directed by the Intermodal Surface Transportation Efficiency Act of 1991 (ISTEA) as a requirement, the FTA apportioned the funds among the States by formula for distribution to local agencies. ISTEA also introduced the eligibility of public agencies under limited circumstances to facilitate and encourage the coordination of human service transportation. Increasingly, FTA guidance encouraged and required coordination of the program with other Federal human service transportation programs.

The Transportation Equity Act for the 21st Century (TEA–21) enacted in 1998, reauthorized the Section 5310 program, increased program funding levels, but made no significant program changes. In 2005, Congress enacted SAFETEA–LU as the new transportation bill which introduced the requirement that projects funded with 5310 funds be derived from a locally developed, coordinate public transit-human services transportation plan. This requirement continued under MAP-2, and the FAST Act extended it with the additional requirement of Section 5310 grantee projects must now be listed in the current MPO’s Coordinated Plan as well. Eligible projects include both transitional capital investment and non-traditional capital beyond the Americans with Disabilities Act (ADA) complementary paratransit services; and new under MAP-21, Mobility Management is now an eligible project activity. The MAP-21 and FAST Act changes resulted in additional communication and coordination between local human service agencies and transit operators, and also increased the HOCTS Transportation Coordination Committee (TCC) membership.

In New York State, the NYS Department of Transportation (NYSDOT) is the agency designated by the Governor of New York State to administer the Section 5310 program with oversight from FTA. The Section 5310 program, as amended by MAP-21, incorporates significant changes in the apportionment of funds and in the eligible activities. Funds are no longer distributed directly to the State and administered
exclusively by the NYSDOT. Pursuant to MAP-21, funding is now sub-allocated to large urbanized areas, small urbanized areas, and to the State for rural areas.

Although NYSDOT retains the administrative responsibility for the 5310 program, the MAP-21 changes gives the MPO a more active role in the review, scoring, and ranking of local Section 5310 application projects that give weightier recommendations to NYSDOT for final approval. Another MAP-21 requirement is that Section 5310 grantee projects must now be listed in the current MPO’s Coordinated Plan, and the projects must address the needs, gaps, and/or implement one or more strategies found in the local Coordinated Plan.

FAST Act changes related to coordination are under the Section 5310 program where the introduction a new Pilot Program for Innovative Coordinated Access & Mobility (3006(b)). FTA will competitively distribute funding for innovative projects that improve the coordination of transportation services with non-emergency medical transportation (NEMT) services. Eligible recipients are existing partnerships with specific goals for improving coordinated transportation efforts in a given locality.

Section 5311 Rural Area Formula Program
The FTA Section 5311 program provides capital, planning, and operating assistance to states and federally recognized Indian tribes to support public transportation in rural areas with populations less than 50,000, where many residents often rely on public transit to reach their destinations. It also provides funding for state and national training and technical assistance through the Rural Transportation Assistance Program. Eligible activities include planning, capital, operating, job access and reverse commute projects, and the acquisition of public transportation services. The Federal share for the program remains the same; 80 for capital projects, 50% for operating assistance, and 80% for ADA non-fixed-route paratransit service.

The FAST Act legislation appears to continue the MAP-21 Coordinated Plan-related program changes set in motion in the MAP-21 legislation in 2012. The JARC program was folded into the 5307 and 5311 programs. Activities that were eligible under JARC continue to be eligible and funded under 5307 and 5311. Also, Mobility Management is now an eligible activity and has a separate funding category under the 5311 application.

Section 5307 Urbanized Area Formula Program
An urbanized area is an incorporated area with a population of 50,000 or more that is designated as such by the U.S. Department of Commerce, Bureau of the Census. The Section 5307 program makes Federal resources available to urbanized areas and to Governors for transit capital and operating assistance, and for transportation related planning in urbanized areas. Eligible activities include planning, engineering design and evaluation of transit projects and other technical transportation-related studies; capital investments in bus and bus-related activities such as replacement of buses, overhaul and rebuilding of buses; crime prevention and security equipment; construction of maintenance and passenger facilities and capital investments in new and existing fixed guideway systems including rolling stock, overhaul and rebuilding of vehicles, track, signals, communications, and computer hardware and software, all preventative maintenance and some ADA complimentary paratransit services costs are considered capital costs. For urbanized areas with populations less than 200,000 operating assistance is an eligible expense.

The FAST Act legislation appears to continue the MAP-21 Coordinated Plan-related program changes set in motion in the MAP-21 legislation in 2012. The JARC program was folded into the 5307 and 5311 programs. Activities that were eligible under JARC continue to be eligible and funded under 5307 and 5311.
Federal Coordinated Plan Guidance and Requirements

MPOs are guided in the development, planning, and changes of coordinated plans by FTA circulars. The most recent guidance is *FTA Circular C 9070.1G*, which went into effect on July 7, 2014. According to the updated Circular, four elements are required in the Coordinated Plan:

1. An assessment of available services that identifies current transportation providers (public, private, and nonprofit);
2. An assessment of transportation needs for individuals with disabilities and seniors. This assessment can be based on the experiences and perceptions of the planning partners or on more sophisticated data collection efforts, and gaps in service;
3. Strategies, activities, and/or projects to address the identified gaps between current services and needs, as well as opportunities to achieve efficiencies in service delivery;
4. Priorities for implementation based on resources (from multiple program sources), time, and feasibility for implementing specific strategies and/or activities identified.

Federal transit law, as amended by MAP-21 and continued under FAST Act, requires that projects selected for funding under the Section 5310 program be “included in a locally developed, coordinated public transit – human services transportation plan” and the plan be “developed and approved through a process that included participation by seniors, individuals with disabilities, representatives of public, private, and nonprofit transportation and human service providers and other members of the public.” FTA maintains flexibility in how projects appear in the coordination plan. Projects may be identified as strategies, activities, and/or specific projects addressing an identified service gap or transportation coordination objective articulated and prioritized within the plan. Plans will vary based in the availability of resources and the existence of populations served under these programs.

Projects identified in the coordinated planning process and selected for FTA funding must be incorporated into both the TIP and STIP in UZAs with populations of 50,000 or more; and incorporated into STIP for rural areas fewer than 50,000 in population. At a minimum, plans should be updated every four years.
Chapter 2 ~ Plan Methodology and Process

Methodology
This 2017 Coordinated Plan builds on the 2014 Amended Coordinated Plan and subsequent Coordinated Plans of 2008 and 2012. It will continue to be centered around the required four FTA planning elements identified in the *FTA Circular C 9070.1G: July 7, 2014*:

1. An assessment of available services that identifies current transportation providers (public, private, and nonprofit);
2. An assessment of transportation needs for individuals with disabilities and seniors. This assessment can be based on the experiences and perceptions of the planning partners or on more sophisticated data collection efforts, and gaps in service;
3. Strategies, activities, and/or projects to address the identified gaps between current services and needs, as well as opportunities to achieve efficiencies in service delivery; and
4. Priorities for implementation based on resources (from multiple program sources), time, and feasibility for implementing specific strategies and/or activities identified.

Plan Goals
- Identify and assess areas of gaps and redundancy of targeted population and the general public, providing data maps and summaries.
- Solicit any additional input concerning transportation needs, gaps, and potential strategies.
- Inventory current available transportation services, capital, and routes.
- Document past and current transit and human services transportation coordination efforts.
- Develop realistic strategies that address the gaps and needs in transportation service for the target populations and the generally public.
- Identify coordination projects and actions to eliminate or reduce duplication of services and strategies for more efficient and effective utilization of resources resulting in a seamless mobility network.
- Encourage new partnerships to advance these projects through the appropriate funding sources under the Coordinated Planning process.
- Identify performance measures and evaluation tools as FAST Act guidance becomes available.
- Identify implementation strategies.

Process for Plan Update
- Review and use the HOCTS 2008 Coordinated Plan, the 2012 Updated Coordinated Plan, and the 2015 Amended Plan as the foundation of the 2017 Coordinated Plan Update.
  - Evaluate the 2012 recommended strategies, goals, and funded projects for attained goals.
- Research Best Practices from a wide variety of other Coordinated Plans, related documents and websites to glean best practices and supportive information to enhance the 2017 Update Plan.
- Use Census data and in-house GIS mapping services to map the target populations, past projects, and transit routes.
• Review the 2013 ACTION Questionnaire summary and the resulting Themes of Project Ideas from the October 2013 TCC member’s Needs and Gaps Working Session. This list would serve as a foundation of project prioritization and focus for the TCC and MPO staff. Also review the 2014 Long Range Transportation Plan Survey comments and results, as well as the LRTP Public Meeting comments. Reaffirmed and/or add to the core needs and gaps founded in the 2011 Coordination Plan Survey.

• Gather input from Transportation Coordination Committee members by reviewing with them the Draft Chapter 6 Unmet Transportation Needs and Gaps.
  o Ask if any other needs, gaps, or barriers.
  o Review and evaluate of the 2012 recommended strategies, goals, and funded projects for attained goals.
  o Review and discuss Draft Chapter 7 Coordination Strategies and Improved Service Priorities.
  o Request a call for Annual 5310 projects from TCC members and other transportation stakeholders for 2017 to be included in the 2017-2020 Plan.

• Review Draft Plan with TCC members for final comments.

• Establish the public review process and encourage public participation.

• Recommend 2017-2020 Coordinated Plan to HOCTS’ Transportation Planning Committee (TPC) and the Governmental Policy and Liaison (GP&L) Committee for approval.

• Forward approved 2017-2020 Coordinated Plan to NYSDOT and upload to HOCTS’ website.
Chapter 3 ~ Regional Profile

Demographics
The update of demographic data from the 2010 US Census is a foundational component of the Coordinated Plan Update development. It provides an understanding and focal points of where the transportation-challenged and underserved populations dwell. Much of the information and mapping was drawn from HOCTS’ Environmental Justice Analysis Update data, which is based on the 2010 US Census data or, as footnoted, from the 2010 American Community Survey 1-Year Estimates or the 2010-2014 American Community Survey 5-Year Estimates.

The federally-funded grant programs of the Coordinated Plan focuses on the target populations of Low-Income, Elderly (65+), and Individuals with Disabilities. For a more comprehensive profile, this update also includes the population groups of Non-Hispanic Minorities, Hispanic Minorities, Limited English Proficiency (LEP), and Households without Vehicles. The maps used in this update were generated for the 2016 Environmental Justice Analysis Update Report and used statistical thresholds to establish a meaningful assessment of the potential Environmental Justice impact of regional projects.

The two-county planning area is comprised of a mix of urban and rural areas covering a total of about 2,699 square miles. Within Oneida County there are 26 towns, 19 villages, and 3 cities, and within Herkimer County there are 19 towns, 10 villages, and 1 city.

Oneida County
In 2010, the two largest cites had a combined population of almost 96,000. This represents about 41% of the County’s total population (234,878). Another 27,000 people live in villages and other areas immediately surrounding these cities. All told, more than 50% of the county’s population live either in urban city type settings or incorporated villages generally surrounding these cities. The remaining population lives in more rural settings both north and south of the Mohawk Valley corridor.

The total population in 2010 was 234,878. During the 1990s, the County lost 6% of its population, dropping from 250,836 in 1990 to 235,469 people in the year 2000. In the last decade, the population appears to have stabilized, with a change of less than a quarter of a percent. The median age of the County’s population jumped from 33.8 in 1990 to 38.2 in 2000. This reflected the loss of many younger segments of the population due to the impacts of the closure of Griffiss Air Force Base in the mid-nineties. In 2010, the median age of Oneida County now stands at 40.9* years of age. In the year 2010, approximately 5.7% of the population was under the age of five; 21.9% were less than age eighteen; 73.5% were age twenty-one or older; and 16.3% were age sixty-five or older. These are somewhat similar to the 2000 age distributions.

Herkimer County
According to the 2010 Census, the three largest towns had a combined population of more than 31,000. This represents about 48% of the County’s total population (64,519). Another 4,946 people live in City of Little Falls. All told, 48% of the County’s population live either in urban city type settings or incorporated villages generally running along the southern part of the County. The remaining population lives in more rural settings both north and south of the Mohawk Valley corridor.

The total population in 2010 was 65,519. During the 2000s, the County’s population remained relatively stable, gaining about 100 people over the decade. The median age of the County’s population jumped from about 39 years old in 2000 to 42.1 years old in 2010. According to the census, 5.6% of the population was under the age of five; 22.2% were less than age eighteen; 73.1% were age twenty-one or older; and 16.8% were age sixty-five or older. Some of these groups have seen significantly changes from the 2000 age distributions. The number of youth under the age of eighteen has decreased about 2 percentage points from what it was in the 2000 Census. In contrast, the number of persons age 21 and over has grown by 2 percentage points. While it is typically assumed that most of that growth has taken
place within the elderly (age 65 and over), that in fact is not the case. While the growth is among those between the ages of 20 and 65, persons age 65 and over continue to make up about 17% of the population.

**Targeted Populations**

**Low-Income**
The 2010-2014 American Community Survey (ACS) Estimates indicate that 16.5% of the total population in Oneida County, or 38,599, live below the poverty level. This is an increase of 3.1% from the 2006-2010 ACS Estimates. Map 1 presents the Threshold of People in Poverty by Census Block Group in Oneida County, using the threshold of 17.6%. The map shows that within the City of Rome, the southwest portion of the inner city area, as well as an eastern portion of the City adjacent to the Griffiss Business Park, show higher concentrations of persons in poverty. The eastern portion of the City adjacent to the Griffiss Business Park shows a high percentage of concentration of single mothers housed in older housing. Within the greater Utica area on the map, large portions of east, west and central Utica, as well as the Cornhill area, show higher concentrations of persons in poverty. A block group in the southeastern portion of the City meets the poverty threshold as a result of a high concentration of low income housing along Culver Avenue. Other notable areas of poverty in Oneida County include the eastern half of the Town of Vienna, and the southwest half of Boonville.

In Herkimer County, the 2010-2014 ACS Estimates indicate that 15.9% of the total population, or 10,228, live below the poverty level. This is an increase of 3.1% from the 2006-2010 ACS Estimates. Map 2 presents the Threshold of People in Poverty by Census Block Group in Herkimer County, using the threshold of 12.5%. Within Herkimer County, there are three main areas meeting the poverty thresholds within highly populated areas. The first involves the eastern portion of the Village of Herkimer north and south of Route 5. The second large concentration of persons in poverty is just north of the Village of Ilion. The final large concentration of people in poverty in Herkimer County is located in the north eastern corner of Frankfort.
MAP 1 – Oneida County in Poverty Populations
MAP 2 - Herkimer County in Poverty Populations
Elderly (65+)
According to the 2010-2014 ACS Estimates, 16.8% of the total population in Oneida County, or 39,234, is age 65 or older. This is an increase of 1% from the previous census data. Map 3 presents the Threshold of Elderly Population by Census Block Group in Oneida County, using the threshold of 8.7%. The inner City of Rome has a few block groups with higher concentrations of elderly residents. These are mainly in the northern and northeastern parts of the City. In addition, a portion of the Center City also shows an unusually high concentration of older persons. Within the City of Utica, high concentrations of elderly populations can be found mainly in two areas – north Utica and an area in the southeast part of the City. Areas immediately west of Utica, as well as parts of New Hartford also show high concentrations of elderly residents. There is an area in the eastern part of the Town of Kirkland that shows a high concentration of elderly. This is probably reflective of the nursing homes found in that area. The Town of Forestport and the south east corner of Lee also show higher portions of elderly populations.

In Herkimer County, the 2010-2014 ACS Estimates 17.8%, of the total population, or 11,457, are age 65 or older. This is an increase of 2.1% from the previous data. Map 4 presents the Threshold of Elderly Population by Census Block Group in Herkimer County, using a threshold of 6.1%. In Herkimer County, there are several notable areas with higher concentrations of elderly residents. These areas include; the City of Little Falls, the Town of Webb, the northern portion of the Town of Ohio, the northern portion of Herkimer, the north eastern portion of German Flatts and the western part of Frankfort. The western part of the Town of Schuyler adjacent to the border with the City of Utica also shows a high concentration of elderly as well. And lastly, a small part of the Village of Herkimer, representing one of the only assisted care facilities in that area has a high number of elderly residents within that block group.
MAP 3 - Elderly Population by Census Block Group in Oneida County
MAP 4 - Elderly Population by Census Block Group in Herkimer County
Individuals with Disabilities

There is no current Census data available for this target population, therefore the 2000 Census data will continue to be used this target population. According to the 2000 Census data, 18.7% of the total population in Oneida County, or 44,106, are individuals with disabilities. Map 5 presents the Threshold of Individuals with Disability by Census Block in Oneida County, using a threshold of 12.5%. The map shows that both the southwestern portion and a small section of the inner city of Rome show higher concentrations of persons reporting disabilities. The area in the outer city district that comprises the State prisons contains no private housing units and is therefore not an area of focus. Throughout the greater Utica area there are numerous areas that meet the thresholds along with an area in the eastern portion of Whitestown.

In Herkimer County, the 2000 Census data reports 11,689 individuals with disabilities, or 18.1% of the total population. Map 6 presents the Threshold of Individuals with Disabilities by Census Block in Herkimer County, using a threshold of 8.7%. The map shows that there are several areas that meet the threshold throughout Herkimer County. These areas include the Towns of Webb, Ohio, Salisbury and the southern portion of Winfield. The southwestern corner of the City of Little Falls, the northeastern portion of the Village of Herkimer, the southern portion of the Village of Mohawk, the western section of the Village of Ilion and the south eastern corner of the Village of Frankfort all also meet the threshold for disabled households.
MAP 5 - Individuals with Disability by Census Block in Oneida County
MAP 6 - Individuals with Disabilities by Census Block in Herkimer County
Limited English Proficiency (LEP) Population
According to the 2010-2014 ACS Estimates, 4.8% of the total population in Oneida County, or 11,336, consider themselves as having Limited English Proficiency. Map 7 represents the Threshold of Concentration of LEP by Census Block Group in Oneida County, using the threshold of 7.4%. In Oneida County, the pockets where the residents show unusual levels limited English proficiency are all in the City of Utica. Specifically the tracts meeting the threshold values are largely in the Center City, including Cornhill, and in east Utica. Limited English proficiency includes all persons who fall below the level of speaking English “well” according to census data.

In Herkimer County, 1.7% of the total population, or 1,073, consider themselves as having Limited English Proficiency. Map 8 represents the Threshold of Concentration of LEP by Census Block Group in Herkimer County, using the threshold of 2.0%. In Herkimer County there are a few areas showing concentrations of limited English proficiency that are above the threshold. These areas include; the southern portion of the Town of Winfield, the eastern portion of the Town of Mohawk and the Village of Herkimer along Route 5.
MAP 7 - Concentration of LEP by Census Block Group in Oneida County
MAP 8 - Concentration of LEP by Census Block Group in Herkimer County
Household without Vehicles
According to the 2010-2014 ACS Estimates, 4.6% of the total population in Oneida County, or 10,794, have no vehicle access. This is an increase of 3.1% from the previous census data. Map 9 presents the Threshold of Lack of Available Vehicle in Households by Tract Level Data in Oneida County, using the threshold of 15.5%. Map 9 shows that within the city of Rome, the tracts making up the southern portion of the center city have unusually high concentrations of households without vehicles. Within Utica, portions of east, west and central Utica, as well as the Cornhill area, show higher concentrations of households without vehicles.

According to the 2010-2014 ACS Estimates, 4.2% of the total population in Herkimer County, or 2,756, have no vehicle access. This is an increase of 2.8% from the previous census data. Map 10 presents the Threshold of Lack of Available Vehicle in Households by Tract Level Data in Herkimer County, using the threshold of 11.2%. Within Herkimer County the main areas meeting the thresholds for households without vehicles are the southern and central part of the Village of Herkimer, the southern part of the City of Little Falls, the northern and southeastern sections of the Village of Ilion as well as an area just south of the Village of Ilion.
MAP 9 - Lack of Available Vehicle in Households by Tract Level Data in Oneida County
MAP 10 - Lack of Available Vehicle in Households by Tract Level Data in Herkimer County
Travel Characteristics
Figure 1 uses U.S. Census Bureau data from 2000 to 2010 to compare travel characteristics and illustrates the populations percentages of those characteristics for Herkimer and Oneida Counties.

Figure 1: Mode Characteristics Comparison 2000 to 2010

<table>
<thead>
<tr>
<th>HERKIMER</th>
<th>CHANGE 2000 to 2010</th>
<th>ONEIDA</th>
<th>CHANGE 2000 to 2010</th>
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<td>2008-2010 ACS %</td>
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<td>0.3</td>
<td>Public Transportation</td>
</tr>
<tr>
<td>Bicycled or Walked</td>
<td>5.4</td>
<td>4.8</td>
<td>Bicycled or Walked</td>
</tr>
<tr>
<td>Work at Home</td>
<td>3.4</td>
<td>4.7</td>
<td>Worked at Home</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau

The ten-year comparison revealed an increase in people driving alone to work. There was a reduction in the occurrence of workers carpooling to work. However, the use of public transportation decreased in Herkimer County while in Oneida County it marginally decreased. Interestingly, people bicycling or walking to work increased in Oneida County and decreased in Herkimer County. The existing public transit in the HOCTS planning area is primarily the cities of Utica and Rome, parts of rural Oneida County, the city of Little Falls, and the Mohawk Valley corridor. This public transportation system is the only transportation available for many of the elderly, disabled, working poor, students, and commuters of the two-county area.

Population Diversity
The Mohawk Valley Resource Center for Refugees (MVRCR), located in Utica, New York, continues to resettle people from numerous countries. MVRCR is one of the largest resettlement agencies in the country and boasts that Oneida County has the fourth highest concentration of refugees (about 4% of the total population) in the United States, and the City of Utica refugees make up over 11% of the total population. MVRCR recognizes that the region is poised to become a leader as a multi-cultural institute and remains a nationally recognized leader in refugee services. Since its inception, MVRCR has assisted refugees from more than 31 countries, including Bosnia, Cambodia, Czechoslovakia, Haiti, Hungary, Laos, Poland, Romania, the former Soviet Union, Vietnam, Sudan, Somalia, Afghanistan, Iraq, Iran, China, Burma and others. Today the refugee population being resettled is increasingly diverse with individuals and families from the former Soviet Union, Afghanistan, Burma, Somalia and Liberia. Utica’s growing immigrant community includes many from Latin America.

HOCTS staff will continue to work with the Mohawk Valley Resource Center for Refugees on any refugee transportation issues in Herkimer and Oneida Counties. Any major fluctuation in the refugee population effects the transportation planning for the region.

Limited English Proficiency (LEP) Statistics
There is not an updated state-wide LEP comparison data and maps from NYSDOT for the 2010 Census. Therefore the LEP statistical data comparisons from NYSDOT using 2000 Census data which was used in the 2008 Coordinated Plan will remain the same until new comparison data and maps are updated from NYSDOT. Once new comparison data and maps are made available by NYSDOT, HOCTS staff will update this document with the appropriate information.

Local LEP Efforts
According to the Civil Rights Office at the U.S. Department of Transportation, individuals who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English
can be Limited English Proficient, or “LEP”. These individuals may be entitled language assistance with respect to a particular type of service, benefit, or encounter.

The enactment of Executive Order 13166: *Improving Access to Services for Persons With Limited English Proficiency* (LEP) August 16, 2000, was to clarify Title VI of the Civil Rights Act of 1964 by ensuring accessibility to all federally conducted programs and activities to individuals whom English is not their primary language and who might have a limited ability to read, speak, write or understand English. The Executive Order applies to all federal agencies and all programs and all operations of entities that receive funding from the federal government, including state agencies, local agencies and governments including the MPO, private and non-profit entities and subrecipients.

The MPO continues to adhere to this executive order by working with the Mohawk Valley Resource Center for Refugees (MVRCR) in Utica, NY. The MPO has and will continue efforts to have any transportation document translated into the language needed to provide the LEP population meaningful access to services. The MPO does not deny access to any transportation planning process, meeting, or document. The MPO transportation planning meetings are always planned at locations that are on a public transit route, and a translator is available upon request for any particular meeting through MVRCR.

The MPO does not provide direct services (such as food, shelter, medical assistance) therefore any involvement in MPO transportation planning activities by citizens is voluntary. However, the MPO’s Public Participation Policy ensures all population groups, including LEPs, have the opportunity to be involved in the transportation planning process.

NEPA and Environmental Justice assessments are done on the NYSDOT Regional level for all highway, bridge, and pavement projects.

The MPO will continue to monitor the feasibility of translating all transportation documents into multi-language translations. At this time it is not warranted, but will always be made available upon specific requests. The MPO may explore more outreach opportunities, such as Google Translator for website translation, and engaging in MVRCR meetings that relate to transportation issues.
Chapter 4 ~ Inventory of Existing Transportation Services

Public Transit
A well utilized and accessible public transit system is the backbone to any successful transportation network. It is critical to connect consumers to employment centers, educational centers, the medical community, and quality of life functions, as well as access to all modes of transportation. Public transit provides a vital link to those in the community who do not have access to a car, or those who are physically or economically disadvantaged. The public transit system of Herkimer-Oneida Counties is that vital element and backbone of the two-county regional transportation system. It is a system of public and private operators working jointly to provide the best service to the region’s consumers.

The diverse landscape of the MPO, with urban and rural areas necessitates creating quality linkages to allow people to move between these areas. Expansion of rural transit opportunities, re-organization of urban systems, tie-ins to seasonal and tourism based activity centers and populations looking for alternatives to the automobile all create an opportunity for growth. Mobility is a driving priority of this plan, the transit system as outlined above, is poised to be the mechanism that makes mobility a reality within the MPA.

Urban Transit Operator- Centro
On April 1, 2005, Oneida County joined Central New York Regional Transportation Authority (CNYRTA), which assumed all operations of the Utica Transit Authority (UTA) and established Centro of Oneida-Utica. The following October, CNYRTA assumed the operations of the Rome VIP Transportation, providing transit services for the City of Rome and established Centro of Oneida-Rome. At that time, the State of New York provided significant capital assistance to immediately rehabilitate the transit bus fleet and maintenance facility, which had fallen into a state of disrepair. Centro of Oneida, Inc., as a wholly owned subsidiary of CNYRTA, shares the Authority’s mission and challenges.

Centro of Oneida - Utica
Centro of Oneida’s Utica operation consists of fixed route and demand-response services in the City of Utica and the Towns of New Hartford, Whitestown and Kirkland. The fixed route system is comprised of eleven routes operating in a pulsed, time-transfer system with schedules coordinated at Centro’s Transit Hub located between Bleecker and Elizabeth Streets in Downtown Utica. Complementary Centro Call-A-Bus demand-responsive service is provided to individuals with disabilities who are unable to use the regular route transit system and who meet the criteria established by the Americans with Disabilities Act (ADA) of 1990. Both the regular route and demand-responsive services are based at the Centro maintenance and operations facility located at 185 Leland Avenue in Utica. Centro of Oneida – Utica’s fleet is comprised of 32 vehicles, including twenty-four 35 foot transit coaches, seven 26 foot vehicles and one van used in Call-A-Bus service. Centro of Oneida – Utica transports in excess of one million riders annually in fixed route and demand-responsive service in over 900,000 revenue miles of service.

Centro of Oneida – Rome
Centro of Oneida’s Rome operation consists of fixed route and demand-responsive services in the City of Rome. The fixed route system consists of six routes operating in a pulsed, time-transfer system with schedules coordinated at Centro’s George Street terminal at 225 Liberty Street. Complementary Centro Call-A-Bus demand-responsive service is provided to individuals with disabilities who are unable to use Centro’s regular route transit system and who meet the criteria established by the Americans with Disabilities Act (ADA) of 1990. Centro’s maintenance facility is located on Race-Martin Street Station in Rome. The Centro of Oneida – Rome fleet comprises seven vehicles, including five transit coaches larger than 26-feet and two 26-foot long demand-responsive vehicles. Centro of Oneida – Rome transports 164,000 riders annually in fixed-route and demand-responsive service in over 211,000 revenue miles of service.

In 2013/2014 the Authority installed a new Intelligent Transportation System (ITS) on all buses in its two Oneida County garages. The purpose of this project is to provide cellular mobile voice and data
communications between the Authority’s operations centers and buses in the field. This will assist in the management of Centro’s fixed route and demand-responsive operations, allowing the Authority to fine tune service and quickly identify and respond to operating anomalies. Information regarding anticipated bus arrival time at bus stops can now be provided to customers on a real-time basis. Other benefits include provision of real-time arrival information at strategically placed dynamic message signs in public places and on the internet, automated vehicle stop announcements, vehicle performance monitoring and automated passenger counters.

In February 2013, Centro of Oneida opened a new transit hub in downtown Utica at 15 Elizabeth Street in collaboration with the City of Utica. This facility replaces the Authority’s main bus stop on Genesee Street in downtown Utica, which exposed transit passengers to all weather related elements and heavy street traffic. The new facility provides a climate controlled waiting area with restrooms, customer service information, dynamic messaging signs, fare media vending kiosks, bicycle racks and space for Centro dispatching. Covered platforms allow assignment of specific routes to dedicated platforms permitting passengers a greater degree of comfort in completing their trips. Overall the facility has enhanced the users comfort and safety, ultimately complementing the Centro operation.

Major structural deficiencies in transit and capital and operating funding threaten public transit services in upstate New York. Revenue from the Petroleum Business Tax, the largest source of upstate transit operating funding, is forecast in the State budget to decline through 2020, posing a significant challenge for any future increases. The structure of State operating funding created 30 years ago cannot sustain the transit services necessary to grow the upstate economy.

Major federal and state structural deficiencies in transit operating and capital funding seriously impact future public transit services in upstate New York. The structure of State operating funding created 30 years ago cannot sustain the transit services necessary to grow the upstate economy. Future federal and state transportation legislation need to address the public transit funding needs in upstate New York in order for public transit service to be viable quality of life issue.

Rural Private Transit Operator — Birnie Bus Service, Inc.
Birnie Bus Service, Inc. (BBS) is a privately owned company that provides interurban transportation in Central New York from Syracuse to Little Falls, and rural public transportation in Oneida, Herkimer and Madison Counties. The fares charged by BBS are on a zone-to-zone system in accordance with an approved tariff. BBS headquarters and garage facilities are located in Rome, New York.

In January 2004, the public transit services, previously provided by the Utica-Rome Bus Company, Inc. (Coach USA), and Oneida County Rural Transit had changed. In an expanded agreement with Oneida County, BBS began providing a changed service in its line haul operation in the Mohawk Valley Corridor. BBS took over the public transportation service from the Utica-Rome Bus Company. As of January 1, 2011 the NYSDOT has assumed sponsorship and oversight of the four county Commuter Service from Little Falls to Syracuse. Funding is required to remain on the TIP, but Oneida County no longer serves as a pass through for the associated operating and capital funds.

BBS also became the new operator of the expanded Oneida County Rural Transit (OCRT) services for Oneida County in 2004, in which they took over the rural transportation service from the Oneida County Office for the Aging. The OCRT service provided public transit to passengers who need transportation services between non-urbanized rural areas and urbanized areas. BBS provides area residents with coach line service to and from system hubs in Utica and Rome. The OCRT service to and from Utica include stops in Alder Creek, Barneveld, Boonville, Bridgewater, Brookfield, Chadwicks, Clark Mills, Clinton, Deansboro, Hamilton, Madison, Marcy, New Hartford, Oriskany Falls, Paris, Port Leyden, Remsen, Rome, Waterville, Westmoreland, and Whitesboro. The OCRT service to and from Rome include stops in Alder Creek, Ava, Barneveld, Boonville, Camden, Churchville, Clark Mills, Durhamville, Floyd, Forestport, Holland Patent, Lee, Lowell, New Hartford, New London, Oneida, Osceola, Prospect, Remsen, Sherrill, Stokes, Sttitville, Taberg, Vernon, Vernon Center, Verona, West Branch, West Leyden and Westmoreland.
Rural transit does have an opportunity to expand service. As the population within the two-counties continually seeks to live in the rural areas, connections are still needed to the urban center. This provides opportunities through review of existing routes and identifying areas of potential re-organization or expansion. Rural transit is also seeking to have an opportunity in providing service for seasonal opportunities or areas where a large tourism industry exists. This could include localized service between neighboring vacation towns for those people vacationing there, thus reducing seasonal roadway congestion. Another option would be to provide service based on attractions or seasonal activities. This could include additional runs into wooded areas during the autumn for “leaf-peeping” or providing service along the Erie Canalway corridor to support tourism. The focus of rural service provided by BBS will be on the continuance of existing services and vehicle replacement with an eye on incremental service shifts that will better serve the ridership; support increased advertising; and further invest in website development.

Human Service Agency Contracts
BBS is a large provider of human services transportation in Oneida County holding contracts with; Developmental Disabilities Services Office (DDSO), The ARC of Oneida-Lewis Chapter, Upstate Cerebral Palsy (UCP), Vocational & Educational Services for Individuals with Disabilities (VESID), Ava Dorfman Senior Center, YMCA, Resource Center for Independent Living (RCIL) and others. BBS operates a number of Section 5310 funded vehicles via operating leases with the grant recipient.

ADA Paratransit
Under Title II of the Americans with Disabilities Act (ADA) of 1990, public transportation systems are required to provide ride services for people with disabilities when mobility limitations prevent them from using the transit bus. Such services are called demand response as they typically are initiated by an individual request for service from the disabled customer. ADA regulations expressly define the types of service, the accessibility features required on all transit vehicles, the eligibility criteria and application processes, and parameters for scheduling rides.

Major ADA service criteria include:
- **Definition of the Service Area** – ¼ mile to either side of the bus route.
- **Service Requests** – requests taken during normal business hours with a min. of 24 hrs notice.
- **Trips must be delivered within scheduled time.**
- **Fares** not to exceed twice the fixed route fare.
- **Trip Purpose Restrictions** trips cannot be prioritized based on purpose or type of disability.
- **Hours and Days of Service** to match that of the fixed route service.
- **Service Restrictions** – it is illegal to limit transportation to an eligible customer for any of the following:
  - To limit the number of trips that a customer can request
  - To offer untimely pick up times
  - To offer trips with excessive lengths or ride times
  - To deny an eligible trip
  - To create a waiting list for eligible customers who wish to use the service

Other Human Service Agency Transportation Providers
In addition to the human service agency contracts BBS holds, there are some human service agencies in both Herkimer and Oneida Counties that provide transportation via purchased vehicles through Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities Program. Some agencies house and maintain their own vehicles, and provide transportation for their own clients. There is more information regarding the funding awards and the agencies’ projects in Chapter 5 Coordinated Planning Efforts.
Chapter 5 ~ Coordinated Planning Efforts

Prior Coordination Efforts
HOCTS has been facilitating coordination efforts since the 1970’s as new federal legislations began requiring such efforts of MPOs with local transit providers and human services agencies. These early efforts developed an advisory group to provide guidance on transportation problems faced by disabled individuals which resulted in updates in the early 1980’s to the Elderly and Handicapped Inventory documents.

In the late 1990’s, HOCTS worked with Oneida County Department of Social Services(DSS) and Oneida County Workforce Development (Workforce Development) in the securing a Temporary Assistance for Needy Families (TANF) Transportation Grant for Herkimer and Oneida Counties. These funds were used to increase opportunities for recipients who lacked a means of transportation to get to and from work until a permanent solution could be achieved. HOCTS work with local transportation providers to facilitate expanded hours and areas of service, and worked with employers to create alternative transportation solutions.

In the early 2000’s, HOCTS continued to work with DSS and Workforce Development with a new transportation-related grant, Community Solutions for Transportation (CST) which helped eligible recipients with employment-related transportation services for a limited time. In 2006, Oneida County became the Designated Recipient (DR) for two Federal Transit Administration (FTA) funding programs, Job Access and Reverse Commute (JARC) and New Freedom.

Awarded JARC and New Freedom Projects Overview
The HOCTS Transportation Coordination Committee Selection Committees consisted of but not limited to, NYSDOT staff, Oneida County and Herkimer County DSS staff, Herkimer County and Oneida County Office for the Aging staff, and HOCTS staff. The selection process for the projects adhered to the guidance and procedures established in the 2008 Coordinated Plan and NYSDOT formal guidance.

2007-2010 New Freedom Program
There were no applicants for the New Freedom funds for 2007, 2008, 2009, and 2010. Applicant reasons that were cited were a lack of sustainable long-term funding beyond grant award, difficulty in meeting the 50/50 match for operating assistance, and difficulty in meeting the application deadlines.

2009 JARC Program (2007 funds)
Centro of Oneida was awarded the 2009 JARC allocation amount of $60,000, which was 2007 JARC funds, for Transit Enhancements for late night and weekend employment sites for low-income workers and people with disabilities. These Transit Route Enhancements (service hours and/or additional stops) specifically designed for access to entry level jobs. The City of Utica’s Transit Routes were developed to specifically serve major employment sites heavily focused on retail, healthcare and service sectors. The Route 111 and 114 transit routes provide employment transportation between the hours of 5:30 am and 11:30 pm. This allows most shifts in the healthcare, retail and service areas to be covered by bus service. Prior to these routes being implemented in 2007, service to these commercial and healthcare areas was day service only. These routes changed focus from providing opportunities for the public to do their shopping and access medical appointments, to routes providing access to a variety of job opportunities. This also shifts service focus from passengers using the bus once or twice a week, to once or twice a day.

2010 JARC Program
Centro of Oneida was awarded the 2010 JARC allocation amount of $253,000, which is the combined 2008 and 2009 JARC funds, to continue to support the Transit Enhancements for late night and weekend employment sites for low-income workers and people with disabilities for Route 111 and Route 114.
The Route 111 and 114 transit routes provide employment transportation between the hours of 5:30 am and 11:30 pm. This allows most shifts in the healthcare, retail and service areas to be covered by bus service. In November 2009, Centro conducted an on-board survey of all passengers on these routes and approximately 36% are low income and using the route for employment purposes. Prior to these routes being implemented in 2007, service to these commercial and healthcare areas was day service only.

**2011 JARC Program**

The 2011 JARC grant award is for the 2010 and 2011 allocations totaling $274,723 for the continuation of funding for the Enhanced Transit Service for Low Income Workers Project. The objective of the project is to enable low income workers and people with disabilities who do not drive access to employment opportunities. As these populations gain employment, their reliance on public assistance programs is reduced or eliminated and their self-sufficiency improves. Therefore, employers have a larger pool of potential employees as they are not limited to those with personal automobiles. The use of public transportation benefits additional regional goals by reducing road congestion, pollutants and lowering individual transportation costs.

**2011 New Freedom Program**

The 2011 New Freedom grant award is for the 2008, 2009, 2010, and 2011 allocations for totaling $347,990 for CAD/AVL/Real-time Traveler Info Installation on Centro Utica buses. This CAD/AVL project introduces Intelligent Transportation Systems technology to the Utica area for the first time, providing real-time transit information to riders. The project will yield information regarding anticipated bus arrival times at bus stops and remotely for Centro’s Utica area bus routes on a real-time basis. This Computer Aided Dispatch (CAD)/Automated Vehicle Locator (AVL) system will assist in the management of Centro’s fixed route and paratransit operations, allowing the agency to fine tune its service and quickly identify and respond to operating anomalies. The primary goal of this project is to provide additional tools to overcome existing barriers facing Americans with disabilities in the Utica metropolitan area. To achieve this, the ability of the disabled to integrate into the work force needs to be enhanced and promotion of full participation in society encouraged. The project will yield information regarding anticipated bus arrival times at bus stops and remotely for Centro’s Utica area bus routes on a real-time basis. This is a new public transportation service for the citizens of Utica, which is beyond the mandate of the Americans with Disabilities Act of 1990 (ADA) (42 U.S.C. 12101 et seq.). It will assist individuals with disabilities in obtaining reliable transportation, including transportation to and from jobs and employment support services.

**2012 New Freedom Program**

This was the last funding grant year under New Freedom as a stand-alone FTA program. In 2013, the Parkway Center in Utica applied for and was awarded the 2012 New Freedom Program grant and hired a Mobility Manager in December 2013. The goal of the Oneida and Herkimer Mobility Management program is to provide public education to individuals about available transportation services within the two counties that will enable them to meet their basic needs. The role of a mobility manager will be to provide a single point of access for transportation information, to coordinate and market available transportation options, and to facilitate communication between public and private transportation service providers. The Parkway Center will meet this need through education to consumers, creating a website that houses transportation information for the Counties and marketing alternative transportation options, including ridesharing, public transit and volunteer driver services.

The Parkway Center Mobility Management program is a priority project set to continue. The objectives of the program are to develop program materials, including online resources, printed materials and workshop curriculums, meet with local program and services providers in the transportation sector, and pilot educational workshops in the community. In person workshops, peer based travel training, a comprehensive website and printed materials will be developed to help reach the intended audiences. This program is planned to ultimately fill a large void in the communication network and help to share the resources available across the region.
Current Coordination Efforts

Overview of 2015 Submitted Projects
2015 Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities Program

HOCTS amended the Coordinated Plan in 2014 to include the list of potential Section 5310 projects for the next funding round. In 2015 under the guidance of NYSDOT, HOCTS reviewed, scored, ranked, and gave NYSDOT recommendations of the Section 5310 projects for the three-year funding allocation for 2013, 2014, and 2015.

~ Traditional: Vehicle Assistance

- **Herkimer County Chapter NYSARC, Herkimer Area Resource Center** applied for 5 replacement vehicles; (3) Type IV buses in 2014-2015 and (2) Type IV buses in 2015-2016. These buses will be used for the purpose of transporting people with mental and/or developmental disabilities within Herkimer County.

- **Herkimer County Office for the Aging** applied for 1 replacement wheelchair accessible vehicle Type I-A bus. This vehicle would replace the 2006 handicapped vehicles that has used beyond its useful life and has been out of service quite frequently during the past program year. There is a continued unmet need for wheelchair accessible transportation in Herkimer County. Public transportation is not an option as they are not able walk to the few stops available and would have extreme difficulty getting on and off the bus.

- **Oneida-Lewis Chapter NYSARC, Inc., The ARC** applied for 3 replacement vehicles; Type IV buses. The vehicles are replacements for that are beyond their useful life. The ARC runs a deficit in its transportation line; vehicles are purchased and contracted to Birnie Bus Service, Inc. to operate them for their clients. Door to door transportation is needed and provided due to the vulnerable pollutions they transport. There are no other private or public transportation vendors that provide door to door service, and no other transportation opportunities at all.

- **Presbyterian Homes Foundation in Oneida County** applied for 2 replacement vehicles; Type II passenger buses. The vehicles would be used daily for the residents and Adult Day Care Program for medical appointments, hospital testing, dialysis and other medical necessities, as well as transportation for quality of life programs. Registrants and residents either reside in areas not on a public transportation route or don’t have the ability or support to be transported to places they need to go.

- **Valley Health Services, Inc. in Herkimer County** applied for 2 replacement vehicles; Type II buses. The vehicles are needed to replace those that have been requested for retirement after their useful life of 5 years. They will transport the Adult Day Care registrants to and from medical appointments, the daily program, and outings planned by the organization’s activities staff. The registrants and residents rely completely on this transportation because public transportation is not available where most reside, nor does it include Valley Health Services on its route.

- **VNA Homecare Option, LLC** applied for 1 Type I-A bus for a new service in Oneida County. Transporting Medicaid eligible beneficiaries to and from medical and therapy appointments, to social day activities, etc., especially in rural communities, such as in Oneida County, is either very limited or non-existent. Those with chronic care and post-acute needs must have access to reliable transportation services especially when transitioning from hospitals and facilities. The vehicle requested will provide wheelchair and ambulatory transport for a population of individuals in Oneida County, and will aide in reduction of re-hospitalization of Medicaid beneficiaries throughout the life of the vehicle.
Non Traditional: Mobility Management

- **Parkway Center** applied for the new Mobility Management funding within the 2015 Section 5310 program application for their project: *Way 2 Go Herkimer and Oneida Counties Mobility Management Program*. The funding will continue and expand the Mobility Management effort in Oneida and Herkimer Counties for the project period of May 2015 - October 2018. The project addresses the identified need for transportation access for under-served individuals, including seniors and those with disabilities. The Coordinated Plan identifies Mobility Management as a tool to manage and deliver coordinated transportation information and outlines the role of a mobility manager to provide a single point of access for transportation information, to coordinate and market available options and to facilitate communication between public and private transportation service providers.

Parkway Center’s involvement in Mobility Management started in 2012 through a grant from National Center on Senior Transportation for peer-to-peer volunteer based mobility management to train seniors to become knowledgeable in all the transportation programs and services in Oneida County. The volunteers would then work in the community to train older adults how to comfortably use the resources so they maintain their independence.

The Herkimer and Oneida Counties Mobility Management program, via Parkway Center, continued through a grant for NYSDOT New Freedom, providing education to individuals about available transportation services within the two counties that will enable them to meet their basic needs. The grant project developed Mobility Management program materials, which included online resources, printed materials, and workshop curriculums; and also met with local transportation programs and providers; and piloted educational transportation workshops in the community.

Parkway Center’s Mobility Program has recently contracted with Way 2 Go Tompkins County to tailor a similar program for Herkimer and Oneida counties, which incorporates both transportation access and transportation sustainability. This tailoring created *The One-Stop Resources for All Things Transportation Program*. When individuals call for assistance, the goal is to connect individuals to the transportation option that best meets their need. Staying informed about existing community transportation and collaborating with agencies has been a big part of assisting individuals in allowing them to take charge of their own transportation. This Section 5310 Mobility Management funding will continue and expand these and new efforts.

2015-2016 Section 5311 Rural Assistance Program

- **Birnie Bus Service, Inc.** applied for operating assistance and capital assistance as a third-party contractor for the Oneida County Rural Service for the 2015-2016 service years. Capital assistance consists of four Type III replacement vehicles and one service truck replacement.

- **Parkway Center** applied for the new Mobility Management funding within the 2015 Section 5311 program application for the 2015-2016 service years. This funding is separate from the operating and capital assistance funding and does not impact assistance to Birnie Bus Service, Inc. This funding project will expand Mobility Management programs to enable more transportation options in the rural areas. Attention will be focused on creating a model for rural areas to use as a guide in assist with creating transportation options geared towards individual communities in the rural areas of the two-counties.
**Mobility Transportation Planning**

**Transportation Coordination Committee (TCC)**

Established under the SAFETEA-LU requirement, the HOCTS Transportation Coordination Committee (TCC) was formed in 2007 and assisted in the development of the 2008 Coordinated Public Transit-Human Services Transportation Plan for Herkimer and Oneida Counties. The committee’s purpose was to foster cooperation and facilitate a coordinated process of comprehensive transportation planning on behalf of the target populations. Its members continue to include public and private transportation providers, not-for-profit transportation providers, human service providers, governmental social service agencies, transportation planning agencies, the general public, and other stakeholders.

After the development of the 2008 Coordinated Plan, the TCC was still in the development stage and members continued to be available on an as-needed basis. During this time, HOCTS staff had received comments from human service agencies and the community regarding the need for more transportation coordination and options, more transportation-related partnerships, and cost-cutting measures in the delivery of transportation services for customers. This caused the need to reconvene the TCC in 2011 on a more regular basis to discuss and plan for the necessity for a more of a holistic approach to transportation options and modes to move people to where and when they need to go. This holistic approach is found in the concept of Mobility Management, which is one of the strategies of the 2012 Coordinated Plan Update. The Mobility Management concept addresses the identified needs of: a single point of access for all transportation options, public education of current transportation options, eliminating duplication of services, and more accessible transportation options. It connects individuals with unique mobility needs to the most appropriate transportation mode and provider. This increased mobility management effort will be a catalyst for future guidance of the committee and coordination activities.

In 2011-2012 the TCC grew into a more formal setting with the goal of bringing together transportation service providers and programs to identify needs and barriers, and brainstorm ways to address these gaps in a coordinated planning effort. By June 2012, the TCC membership had grown to a total of 40 agencies and 52 members. The TCC was then tasked with assistance with the development of the 2012 Coordinated Plan Update. The 2012 Coordinated Plan Update focused on a more comprehensive vision of coordination, sustainability, and desired future mobility options to address the Plan’s identified needs and gaps.

At the October 2013 TCC meeting, HOCTS staff conducted an Identification of Transportation Needs-Gap workshop exercise with the committee members. Members were asked to rank the priority of coordinated project ideas, which were previously developed by the members, for the MPO to pursue as short term and long term projects. This list will be reviewed annually by the committee members and MPO staff for progress, funding opportunities, evaluation, and new project ideas. The overall consensus of the committee was that there is a need to conduct an inventory of existing transportation-related agencies, services they provide, vehicle inventories, schedules, and routes. The inventory is necessary before any major coordination project is developed. Discussions will be ongoing with the MPO and the committee members.

The continuation of the TCC will be a critical element to successfully growing the mobility options in the region, with public transit as the backbone of the system and Mobility Management as the focal mechanism in addressing transportation gaps and needs in Herkimer and Oneida Counties. The TCC has a membership that is very interested in working together to find solutions to get their customers, especially in rural areas, the needed transportation for medical appointments, employment, groceries, quality of life issues, and to deter isolation. As the TCC grows and has small successes, the membership is expected to grow. Ideally the TCC will branch out to include linkages to other transit-using populations that have not been identified as special needs populations (i.e. college students, neighborhood residents, tourism sites). The TCC is viewed as the coordinating arm in the large context of mobility options in the two counties.
Current TCC
The TCC members will be tasked again to assist in the shaping, reviewing, and making recommendations for the Coordinated Plan 2017-2020 by providing input and comments.

HOCTS Transportation Coordination Committee (TCC)
Active Agency List (as of 2016)

The ARC, Oneida-Lewis Chapter, NYSARC
Ava Dorfman Senior Center
Birnie Bus Services, Inc.
Central Association for the Blind & Visually Impaired
Central New York Regional Transportation Authority
CENTRO of Oneida
Commission for the Blind and Visually Handicapped
Community Transportation Service- Old Forge
Herkimer Area Resource Center
Herkimer County Office for the Aging
Human Technologies Corporation
Kids Oneida Inc.
LutheranCare
Mohawk Valley Healthcare Center
Mohawk Valley Health System
Mohawk Valley Resource Center for Refugees
NYS Department of Transportation Region 2 & Main Office
Oneida County Office for the Aging and Continuing Care
Parkway Center
Presbyterian Home
Resource Center for Independent Living
Rome Memorial Hospital
Sitrin Health Care Center
Upstate Cerebral Palsy, Inc.
Valley Health Services, Inc.
Visiting Nurses Association
Vocational & Educational Services for Individuals with Disabilities (VESID)

Related Mobility Transportation Planning
Mobility transportation planning opens the door to many projects which can be undertaken to increase the overall mobility within the transit system and through connections to other modes of transportation. One effort the MPO is planning to undertake is the completion of a system wide base level analysis for the transportation network that includes resources, provides, rolling stock, ridership generators and unmet needs within the entire two-county area.
Chapter 6 ~ Unmet Transportation Needs and Gaps

Both the 2008 Coordinated Plan and the 2012 Coordinated Plan Update listed Identified Needs, Gaps, and Redundancies with public transit and human services transportation programs regarding transportation disadvantaged population groups. This 2017-2020 Coordinated Plan Update reaffirms these Needs, Gaps, and Redundancies and adds two additional resources for needs and gaps to this chapter; 1) 2013 TCC Needs-Gaps Ranking Workshop of ACTION Questionnaire Results – Project Priority List, and 2) 2014 HOCTS Long Range Transportation Plan (LRTP) Survey, and Comments from 6 LRTP Public Meetings.

TCC Members Ranking of Project Ideas from the October 29, 2013 Working Session; in order of most to least critical:

- Develop adequate and accessible transportation in rural areas. Remote locations may be better served with coordinated routing and sharing of resources.

- Increase coordination with medical services and develop a Coordinated Non-Emergency Transportation System. This would coordinate transportation for patients to/from hospitals and off-site medical facilities, doctor offices, skilled nursing facilities, assisted living facilities, to and from surgical procedures, dialysis, chemotherapy and rehab services, etc.

- There is an overwhelming need for reasonable priced and reliable medical transportation services. Transport is a major challenge. Hospitals in the area tend to resort to taxi service very often due to a lack of good medical transportation service.

- Need to work together on shared transportation solutions in the community.

- Explore and expand community partners using community-use agreements for DOT funded vehicles with assisted living, residence-skilled nursing facilities, human service agencies, and apartment buildings where the elderly and persons with disabilities live and receive services.

- Consolidate transportation across agencies, and/or sharing of resources such as vehicles, drivers, and other transportation-related services. Working together to train drivers allow for a sharing of costs and an expansion of available resources.

- Increase the active transportation-related partners for this committee which would help in understanding the total needs in our community and would help in crafting mobility options and solutions unique to our region.

- Improve recruitment and marketing of volunteer drivers for transportation services to serve the large population of frail elderly in our area for medical, social, personal, and quality of life needs (shopping, visiting relatives, personal care, etc.)

- Improve public transit connectivity among private and public operators. This could reduce or better focus the need for shared vehicles and sharing of non-medical transportation services. There is a need of a truly integrated multi-modal system.

- Consolidate bus maintenance facilities, and contract out vehicle maintenance, cleaning, and fueling thus saving substantial dollars and eliminating duplication of services.

- Install bike racks on Centro buses. This would effectively double or triple the distance riders could travel to reach bus stops, resulting in increased ridership and mobility.
• Provide substantial community education on available and accessible transportation.

• ADA compliant bus/bike/pedestrian facilities along the transit network would allow for easier navigation by all user groups.

• Explore if transit operators can supplement demand response services at lower costs.

• Coordinate transportation with other agencies to share bus runs, if possible, to fill buses up faster and shorten the length of time people are on buses.

• Assess transportation destinations to find highest prevalence service destination (i.e. is it medical needs, groceries, social centers, etc.) and create focus groups with those most visited service categories to improve transportation coordination.

• An organized scheduling system involving the current availability of transportation from organizations could be developed. A greater concern exists in the more rural areas as many people living in the urban areas have access to public transportation.

• Identify service centers, resources and housing that needs to be connected on the transit network.

• Explore and implement a Bike share system. Bike Share systems are taking off in many cities. Although Utica-Rome may not be a large enough metro area to support a full-blown bike share system like the ones in place in NYC or Chicago, there are other models to explore.

2014 HOCTS Long Range Transportation Plan (LRTP): A summary of transit related comments and public meetings and surveys conducted.

Needs and Gaps highlights include, but not limited to:

- Link bus service from Utica to Adirondack destinations (i.e. Town of Webb) to cut down traffic congestion and boost tourism.

- Improvement in transportation coordination of transportation options and schedules to access the Town of Webb as a possible bedroom community for the Marcy Nano Center.

- Increase transit services:
  - to/from Union Station and SUNY Poly
  - to/from Utica and Rome to Syracuse Airport, also create Park & Rides for this shuttle
  - evening service for employment purposes to Consumer Square
  - expand to accommodate more events (i.e. NYS Fair, Herkimer County Fair, and Oneida County Fair)
  - to/from Village Green in Clinton and Hamilton College

- Shuttle service to/from Thendara Train Station to Old Forge; shuttle to/from Nicks Lake and Old Forge

- More frequent transit service to Old Forge from Little Falls, Herkimer, Utica and Rome

- Carshare and rideshare programs are needed
# Chapter 7 ~ Coordination Strategies and Improved Service Priorities

HOCTS staff will continue to build and strengthen transportation related partnerships to improve coordination and mobility services in the two counties. The locally developed public transit-human services transportation plan, the 2017-2020 Coordination Plan Update, will be implemented through the Transportation Coordination Committee (TCC) which includes representatives of public, private, and non-profit transportation human services providers, as per program guidance in MAP-21 and the FAST Act. The Plan update will continue to be used in support of previous Section 5310 applications, the new Enhanced Section 5310 projects, mobility management activities, and as a foundation to guide the TCC. The TCC meet quarterly to discuss how to implement the Plan by addressing the needs and gaps identified in Chapter 6 of the Plan Update. The purpose of the Plan is to take action steps to improve the transit service system for Oneida and Herkimer Counties. The ultimate goal is to provide citizens a seamless transportation system of coordinated mobility options to targeted populations, as well as to the general public.

The four priority areas identified in the 2012 Plan Update are being carried forward as the focus strategy areas for the 2017-2020 Plan.

1. Organizational and Visionary: Transportation Coordination Committee
   HOCTS staff will continue to facilitate the committee meetings to:
   - Encourage networking and foster agency partnerships to improve coordination
   - Foster and support innovative ways to address unmet needs and gaps
   - Grow membership to include colleges and more agencies
   - Keep membership informed of funding opportunities, MPO activities, Mobility Management project updates, NYSDOT and Federal requirements, and any new local transportation initiatives.

2. Consumer-Focused Services: Mobility Management
   With the 2012 MAP-21 and 2015 FAST Act federal legislations, funding for Mobility Management (MM) has changed. Although JARC and New Freedom program are no longer stand alone federal programs, Mobility Management is now an eligible project under the funding programs of Section 5310 and Section 5311 with required local matches, respectively.
   - Although the Oneida and Herkimer Counties Mobility Management program is funded through a single agency, it will continue to be a resource for all area agencies and communities of the two counties.
   - Expand the program’s utilization across agency partnerships to address the identified need for transportation access for under-served individuals, including seniors and disabled individuals.
   - Focus will continue to be to expand coordinated transportation information through a single point of access for transportation information, to coordinate and markets available transportation options, and to facilitate communication between public and private transportation service providers.
   - In 2015, the Mobility Management program introduced a tailored program specifically for Herkimer and Oneida Counties, which incorporates both transportation access and transportation sustainability, called *The One-Stop Resources for All Things Transportation Program*. As stated in Chapter 5, the goal is to connect individuals to the transportation option that best meets their need. Staying informed about existing community transportation and collaborating with agencies has been a big part of assisting individuals in allowing them to take charge of their own transportation. Continued Section 5310 Mobility Management funding will continue and expand these and new
efforts.

- Continue to expand MM program through another new funding source for Mobility Management starting with the 2015-2016 Section 5311 Rural Assistance Program. This new separate funding stream is within the Section 5311 program designated for Mobility Management, but has not impact rural assistance funding to Birnie Bus Service, Inc. This funding will expand Mobility Management programs to enable more transportation options in the rural areas. Attention will be focused on creating a model for rural areas to use as a guide in assisting with creating transportation options geared toward individual communities in the rural areas of the two counties.

- The Transportation Coordination Committee members will continue to be informed of Mobility Management activities through in-person report updates from the Mobility Manager at the quarterly TCC meetings. TCC members are also encouraged to provide future direction and growth of the program by means of input and comments at TCC meetings or direct contact with the MPO staff.

3. Operational: Transit Improvements

- Primary focus will be on Increase use of Mobile Technology (Intelligent Transportation Systems (ITS), Geographic Information Systems (GIS), Smart Phone apps, and other emerging technologies to help in transportation coordination efforts and expanding mobility options for a seamless system for more consumer friendly systems. This focus will be on working diligently with Birnie Bus Service, Inc., to finish updating the rural routes with GIS mapping. This effort will enable the seamless system to move forward.

- Service Development – the MPO will take a more active role in working with transit providers, Centro and BBS, to help analyze transit routes and adjust any GIS route maps.

- MPO staff will work with transit operators in providing any technical assistance needed in rural GIS mapping of routes.

- County Executive’s Vision 2020 Phase 2: Transportation Initiative might have recommendations for transit.

4. Current Resources: Inventory and Strategize Assets

- System-wide Transportation System Analysis – MPO staff continues to plan for consultant study in 2016-2017, through an RFP contract which will include:
  - System-wide transportation inventory
  - Performance Measures
  - Continued Transit Asset Management
  - System Recommendations
Appendix 1

2017 Project List
Section 5310
Enhanced Mobility of Seniors and Individuals with Disabilities
Requesting: Presbyterian Homes & Services, Inc. is seeking two (2) Type 1 – 12 passenger buses with an electric wheelchair lift for residents on and off campus transportation needs. This includes medical appointments, outpatient services, social day care services and independent-quality of life transportation needs.

Project Description: The requested vehicles would be used for the 236 residents of our skilled nursing facility; 96 Adult Day Care/Assisted Living Residents, approximately 158 residents of the Meadows at Middle Settlement, approximately 170 residents Preswick Glen our independent living residents. Residents consist mainly of the elderly and disabled population; many of whom use wheelchairs. We have also had residents and participants in our day care program that have had English speaking limitations in the past. We currently serve Oneida, Madison, Herkimer, Otsego and Onondaga counties.

Our buses are constantly on the road providing transportation for our two (2) adult day care programs, medical (which is housed in our skilled nursing facility Presbyterian Home for Central New York, Inc.) and social (which is housed in our assisted living/adult care facility, Presbyterian Residential Community) facility to which we provide transportation back and forth to both programs. We also provide outpatient services for physical therapy, occupational therapy and speech therapy and provide transportation for those needing these services on our campus which include Presbyterian Residential Community, Meadows at Middle Settlement (independent living) and Preswick Glen (independent living). Transportation is also provided for resident medical appointments to physician’s offices, for hospital testing as needed, for dialysis and other medical necessities as warranted.

We also provide transportation for various quality of life activities programs very active programs at both Presbyterian Home and Presbyterian Residential Community. These trips include trips to other facilities, shopping trips, luncheons and dinners out, Men’s Club trips, picnics, fishing trips, seasonal outings such as leaf viewing, Wonderland of Lights and trips to various other activities off campus. Every attempt is made to accommodate all transportation needs for our residents which includes trips to banks, attorneys, financial advisors, family functions which are arranged around other appointments and day care transports as appropriate.

Any assistance and supervision needed by participants is provided on all trips. Each day our campus serves well over 500 elderly individuals with difficult levels of disabilities and the numbers continue to grow. Updating our current fleet will allow us to accommodate residents numerous and varied transportation needs. It also allows residents greater independence and access to a broader range of activities.

Coordination Efforts: Presbyterian Homes & Services has merged with LutheranCare and will be coordinating medical needs appointments and transporting customers to participate in their programs hosted by them.

Funding Comments: Previous vehicles were funded by Section 5310 funds. There are no other funding sources associated with this project.

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4290 Middle Settlement Road
New Hartford, New York 13413
Phone: 315.624.9972
Email: ldapice@presbyterianhome.com
Valley Health Services, Inc.

Valley Health Services is seeking two to four Lot E - 12 passenger vehicles to accommodate the transportation of elderly and disabled individuals enrolled in the organization’s Herkimer and Little Falls adult day health care programs and residents of the skilled nursing facility. These transportation vehicles are needed to replace the Type 1 vehicles that will be requested for retirement as their useful life of 5 years has been exceeded and they are starting to need frequent repairs. The vehicles will transport our Adult Day Health Care registrants to and from the daily program, be used for outings as well as transportation to and from medical appointments as needed. They are also needed to transport nursing home residents to and from outings planned by the organization’s activities department staff.

Project Description:

Individuals attending the Herkimer-site adult day health care program are from the towns and villages of Herkimer, Mohawk, Newport, Middleville, Frankfort, Ilion, and Schuyler. Those attending the Little Falls site reside in Little Falls, Dolgeville and St. Johnsville.

In 2015, the Herkimer day program averaged 12 people per day, equating to 7,400 one way transports per year. The number of one way transports for medical appointments per year was 60 and the number of one-way trips for the program’s outings was 2,300. The remainder is equivalent to the number of one way transports to and from program.

Also in 2015, the Little Falls program averaged 17 people per day, equating to 10,500 one way transports per year. The number of one way transports for medical appointments per year was 290 and the number of one-way trips for the program’s outings was 2,800. The remainder is equivalent to the number of one way transports to and from program. For the skilled nursing facility, an average of 14 outings is held annually for 232 one-way transports. Both of the adult day programs are at or near capacity, so these statistics should hold true for the future.

Coordination Efforts:

Valley Health Services will network and seek coordination opportunities with other human services agencies to make better use of 5310 vehicles’ off hours when the vehicles are not in use. Due to the time frame of the adult day health care program, it has been difficult to coordinate the use of the vehicles with other agencies, but opportunities will be explored.

Funding Comments:

Valley Health Services received two 5310 grant transportation vehicles in 2000, which were replaced in 2009 by the 5310 program, to transport adult day health care registrants to and from the Herkimer-based program. Two additional transportation vehicles were awarded for the new adult day health care program that opened in Little Falls in 2010. These vehicles are now in need of replacement. Valley Health Services has relied solely on the 5310 program for the funding of the vehicles.

Contact Information:

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Fax:315-866-6546
keisenhut@valleyhealthservices.org
3. Agency: **Valley Residential Services, Inc.**

**Requesting:** The growth in Valley Residential Services population has made transportation for a regular schedule of outings and shopping trips difficult while accommodating transportation for residents’ medical appointments. The facility owns one eight passenger van that is in constant demand and its use is strained to the point of limiting the distances for resident outings in order to transport residents to appointments.

The addition of a second vehicle will permit the increase in number of outings per month to almost double the current number and allow for an increase in the distance of those outings rather than limiting them to a ten to fifteen mile radius.

**Project Description:** Residents of the assisted living facility are mostly from the towns and villages of Southern Herkimer County and have chosen to reside at Valley Residential Services. When the facility reaches full census, 48 individuals will live in the building. It currently is at 90% occupancy.

Residents of the facility must be 62 years of age or older; therefore, the project will serve elderly individuals, many with disabilities.

**Coordination Efforts:** Valley Residential Services will network and seek coordination opportunities with other human services agencies to make better use of 5310 vehicles' off hours when the vehicles are not in use. Due to the time frame of the adult day health care program, it has been difficult to coordinate the use of the vehicles with other agencies, but opportunities will be explored.

**Funding Comments:** Valley Residential Services applied for a vehicle through the Section 5310 program in 2016. No funding has previously been received. No other funding is anticipated to support the project.

**Contact Information:** Kathy Eisenhut, Assistant Administrator
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690 W. German Street
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Fax: 315-866-6546
keisenhut@valleyhealthservices.org
4. Agency: **LutheranCare**

Requesting: LutheranCare is requesting funding for three vehicles (1) two Lot F (Low Floor) replacement buses with seating capacity for 11 ambulatory and 2 wheelchair passengers equipped with low-floor ramps to accommodate those passengers; and, (2) one bus to be used for the transportation needs of the bariatric individual uniquely equipped with larger door access and an hydraulic lift strong enough to support those weighing up to 500 pounds.

Project Description: LutheranCare serves the elderly and persons with disabilities through the residential adult home, skilled nursing facilities and the social model adult day program. Our most pressing transportation needs are reliable conveyance for our residents to and from recreational outings and activities and round-trip transport for participants in the adult day program. Through a grant award in 2016, that program will be expanded to include a rural outreach effort in Oneida, Lewis, Herkimer and Madison counties which will substantially increase the number of individuals served. One of the buses utilized for this transport was acquired under a 5310 grant and both vehicles are currently costing the organization substantial dollars to maintain and repair. If granted, this request would be applied toward their replacement. (2) LutheranCare is one of just a few local skilled nursing communities with a dedicated bariatric unit on its campus. In researching the transportation options available for these individuals, those options were found to be very limited. Safe, reliable transportation to and from medical appointments as well as recreational outings is a quality of life issue which would be addressed by the availability of an appropriately equipped vehicle.

Coordination Efforts: In addition to campus transportation, residents of the Clinton Manor and Mohawk Valley apartments (who also fall into the elderly and disabled category) utilize the vehicles several times a month for recreational daytrips. (2) Given the limited availability of bariatric vehicles in the area, LutheranCare would reach out to other nursing homes, local hospitals and non-profit agencies that may have need of transportation for their bariatric patients/clients and offer use of the vehicle when not in use by the facilities.

Funding Comments: As mentioned, one of the buses in need of replacement was funded by a 5310 grant submitted in 2007 for purchase in 2008. In addition, a grant from the New York State Alzheimer’s group will enable an aggressive outreach effort into the rural areas of the Mohawk Valley. (2) Funding from The Community Foundation of Herkimer and Oneida Counties provided for the construction of our Bariatric Suites. This appeal represents a request for support of the purchase of a uniquely suitable means of transportation for the bariatric patient/client.

Contact Information: Karen Anne Ostinett, Director of Funds & Volunteer Development
LutheranCare
108-110 Utica Road
Clinton, New York 13323
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kostinett@lutherancare.org
5. Agency: **The Arc, Oneida-Lewis Chapter, NYSARC**

**Requesting:**
The Arc intends to purchase three Type IV or Lot K buses to be used for daily transportation to and from day programs for adults with intellectual disabilities, via contract with Birnie Bus Service, and three Type VII or Lot A vehicles to be used by agency staff for daily transportation to and from programs. Persons using these buses/vans are not only intellectually disabled; many have physical disabilities, are elderly and need support of staff for transport. The smaller vehicles will be used for direct home to program routes for people who are the most frail medically and cannot tolerate an excessively long bus ride.

**Project Description:**
The buses will replace existing buses, beyond their useful life to be used by The Arc, through a contract with Birnie Bus, providing fixed route transportation services to persons who cannot use public transportation, private bus or taxi service for the following reasons:
- in some instances, no public transportation exists;
- taxi service, where it is available, would be cost prohibitive;
- many of the people who would use the buses are non-ambulatory and require vehicles equipped with lifts and tie downs, along with door to door service;
- many persons are severely disabled and cannot be taught to travel safely on their own; and
- many persons are on strict medication regimes and require a provider such as The Arc who cannot only coordinate transportation/medication effort, but has a great deal of experience doing so.

The vans will be used by staff of The Arc, that are shared between residential and day programs, to supplement the fixed routes, providing direct door to door transportation services to persons who cannot use public transportation, private bus or taxi service for the same reasons as above, and they are needed for people who are aging and have medical frailty that does not allow them to tolerate excessively long bus rides. These routes will not make multiple stops but be direct transportation. To most efficiently utilize these vans, they will also be used throughout the day for medical appointments, as well as for transport to outings recreational in nature through the program during the day and through the residence on nights and weekends.

**Coordination Efforts:**
The Arc contracts with Birnie Bus for transportation services and supports not only people who receive services from The Arc, but also Upstate Cerebral Palsy, Central New York DDRO, and other human service agencies. Via this contract over 500 roundtrips are provided daily, Monday – Friday.

**Funding Comments:**
Funding for the matching 20% will be paid by The Arc, via Medicaid reimbursement for transportation supports.

**Contact Information:**
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6. Agency: **Mohawk Valley Health System**

**Requesting:** Mohawk Valley Health System is seeking to apply for three (3) vehicles (1)- Cargovan E250's, 2- Buses E450) to add to their fleet; some are replacement vehicles and some are additions to their fleet to keep up with the demands of growing services and members. Vehicles provide medically required transportation services for clients of the Mohawk Valley Health System.

**Project Description:** Mohawk Valley Health System has consolidated all of its Transportation needs into one centralized Transportation department within the system. This allows all of its entities to schedule rides from one location for all of its patients, members, residents and registrants. This currently covers members currently residing in both Oneida and Herkimer counties. The scheduled medical appointments currently are located between Albany, Cooperstown, Old Forge all the way to Buffalo and all of the areas in between. The transportation system serves elderly, disabled and limited English speaking members.

**Coordination Efforts:** All entities of Mohawk Valley Health System include:
- St. Luke’s Home – 202 Residents
- Adult Day Health Care – 40 to 50 Registrants
- Senior Network Health – Currently at 510 members with enrollment increasing monthly
- Faxton Cancer Center – 10+ patients
- Faxton-St. Luke’s Healthcare – as needed (including Sub acute Rehabilitation)
- St. Elizabeth Medical Center – as needed

In addition to the coordination efforts of the above entities, we also contract rides for our members when our transportation is simply inundated with rides or when vehicles are in for repair. We currently utilize the following agencies on a case to case, day to day basis, as needed and as an out of pocket expense:
- Adonis Avante out of Herkimer
- Edwards Ambulance
- Birnie Bus
- D&T Transport
- Community Transport Services of Old Forge
- Capital District Transport out of Albany

**Funding Comments:** Prior to the consolidation of the Centralized transportation departments, both the St. Luke's Home and Senior Network Health had individually taken advantage of the 5310 grant in 2008 and again in 2011. We currently have 2 vehicles in our fleet from the 5310 program; the other two were “retired” earlier this year. All transportation costs are currently absorbed out of the internal transportation budget without funding from other sources.

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