



COORDINATED PUBLIC TRANSIT- HUMAN SERVICES TRANSPORTATION PLAN FOR BUTTE COUNTY

Submitted to:

Butte County Association of Governments Chico, CA.

Submitted by:



Claremont, CA.

In Association with:

TRANSIT RESOURCE CENTER

Grass Valley, CA.

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Butte County Public Transit-Human Services Transportation Coordination Plan

Butte County Association of Governments Final Report

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COORDINATED PUBLIC TRANSIT- HUMAN SERVICES TRANSPORTATION PLAN FOR BUTTE COUNTY – Final Report

Executive Summary

A COORDINATED PLAN: MEETING A NEED

The Butte County regional transit authority provides a network of public transit routes and services linking three of the county's primary communities and several of its unincorporated population centers. Although the system is well-conceived and enjoys growing utilization, it is not equipped to meet specialized requirements of the county's substantial low-income, disabled and senior populations. As a result, those who rely on public transportation for non-emergency medical visits, mental health appointments, job training and interviews, and other trip purposes frequently are defeated by the size and largely rural character of the county.

This Plan assesses the challenge of providing point-to-point transportation for Butte County's at-risk populations and proposes an integrated solution to help meet the challenge. The coordinated, incremental approach would draw both from the resources and expertise of the B-Line authority as well as the knowledge and capabilities of the county's human services agencies. The result would be a new class of individualized but cost-effective transportation options that could significantly improve the mobility – and thus the health, welfare and economic status – of the county's most vulnerable citizens.

WHY IS THIS PLAN REQUIRED?

This Plan is prepared in response to the coordinated planning requirements of SAFETEA-LU (Safe, Accountable, Flexible, Efficient Transportation Equity Act – A Legacy for Users, P.L. 190-059), set forth in three sections of the Act: Section 5316-*Job Access and Reverse Commute* program (*JARC*), Section 5317-*New Freedom* program and Section 5310-*Elderly Individuals and Individuals with Disabilities* program.

The Coordinated Plan establishes the framework for developing a unified comprehensive strategy for transportation service delivery in Butte County focused on unmet transportation needs of elderly individuals, persons with disabilities and individuals of low-income. The Coordinated Plan must contain the following four (4) required elements, as identified in the implementing circulars FTA C. 9070.1F, FTA C. 9050.1 and FTA C. 9045.1:

- 1. An assessment of available services identifying current providers (public and private);
- An assessment of transportation needs for individuals with disabilities, older adults and persons with low incomes — this assessment can be based on the experiences and perceptions of the planning partners or on data collection efforts and gaps in service;
- 3. **Strategies and/or activities and/or projects** to address the identified gaps between current services and needs, as well as opportunities to improve 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.

The Plan is prepared on behalf of the Butte County Association of Governments (BCAG), the regional transportation planning agency that will oversee its implementation.

How Was This Plan Developed?

This Plan reports on efforts over a six-month timeframe to achieve three goals:

- To develop a comprehensive, unified plan that promotes the mobility of seniors, persons with disabilities and persons of low-income.
- To establish priorities to *incrementally improve mobility* for the target populations.
- To identify partners interested, willing and able to participate in longer-term projects and strategies prioritized by this plan.

Exhibit ES-1, which follows, depicts the Plan's activities and process.

Coordinated Public Transit-Human Services Transportation Plan for Butte County, 2008 A Locally Developed Comprehensive, Unified Plan Tied to 3 Federal Programs § 5316 - Job Access & § 5317 - New Freedom § 5310 - Seniors & Persons W/ **Reverse Commute Program Program Disabilities Capital Program** Outreach Demographics Opportunities: Need and SSTAC/Wkg Grp Analysis: 3 Subarea Workshops; Resource Selected Stakeholder Jan 7tl 2000-2030 Interviews Assessment Background **Activities** Information: Stakeholder Performance Audit Consumer Inventory Assessments: Focus Groups Survey Transit Operators -Disabilities, Lov Income, Seniors B-Line. Other Operators SSTAC/Wkg Grp. Report of **May Project** Findings/ **Development** Workshop **Draft Plan Call For** Adopted Public Hearing Plan SSTAC/Wkg. Grp **Process**

Exhibit ES-1

WHICH BUTTE COUNTY RESIDENTS NEED TRANSPORTATION ASSISTANCE?

Population estimates identified Butte County's target population groups and projects the number of trips these persons potentially need. Detailed in Chapter 3 of the Plan, the U.S. census data detail specific subgroups, identifying *a range of 25,000 to 57,000 persons estimated as the countywide target population size.* These individuals are between ages 16 to 64 and are low-income or disabled or are seniors ages 65 and older. This range, estimated between 12 percent and 28 percent of Butte County's 2000 population of 203,000 residents, assumes some overlap among the subgroups.

Population projections, based upon the California Department of Finance numbers, suggest that significantly increasing numbers of residents will be within the target population:

- By 2010, between 46,000 and 64,000 persons, up to 28 percent of projected 230,000 residents
- By 2020, between 57,000 and 79,000 persons, up to 28 percent of 281,000 residents
- By 2030, between 69,000 and 96,000 persons, up to 29 percent of 335,000 residents

Average trips per day were estimated for these target groups, suggesting the proportion of these trips that might present for public transit. Public transit trip need was also estimated as a range. Projected annual trip *needs of 752,000 to 2.2 million public transit trips* are estimated, based upon the 2000 Census population base. Contrasted with trips currently provided in FY 2007, B-Line reported almost 1.4 million trips on both paratransit and fixed-route transit; <u>current total trips</u> are approximately *in the middle of the projected range of total trips needed*.

The Plan further hypothesizes that of total public transit trips needed, one in four trips, or 25 percent, requires special assistance. Special assistance could be paratransit or individualized services, or it could be information about fixed-route transit. From among the public transit trips potentially needed by the target populations, a projected **188,000 to 553,000 specialized transportation trips** are estimated as needed annually by the target populations. Contrasted with specialized transit trips of just below 400,000, current specialized transit trips provided sit squarely within the range of projected specialized trips needed.

Total trips provided are reported as 1.6 million passenger trips, across all modes and including public fixed-route, public paratransit and human service agencies. A breakdown of these 1.6 million trips – represented as 7.5 trips per capita – shows that demand response trips total almost 393,000 and account for 1.8 trips per capita. This current demand response level of 1.8 trips per capita is below the 2.7 trips per capita indicator of trips needed, but not impossibly so **as an increase of 200,000 trips annually could meet this projected demand level.**

What Public Transit Resources Now Exist?

Exhibit ES-2 shows the current footprint for the B-Line services, consolidated from the array of local community public transit programs that existed previously.

Chico area

Paradise area

Gridley / Biggs area

Oroville area

Exhibit ES-2, B-Line Countywide System Map, Spring 2008

Beginning in 2001, Butte County initiated consolidation of the multiple programs that made up public transit for its residents. Branded as B-Line, public transit services are now provided within the urban areas and between the urban areas of Chico and Oroville and Chico and Paradise, with some limited service to the rural areas, including Gridley/Biggs. The system-wide map shows the current reach of B-Line fixed-route services, with Americans with Disabilities Act (ADA) complementary paratransit services provided within Chico, Oroville, Paradise and Gridley.

In addition to B-Line services, a locally-operated dial-a-ride service, the Gridley Golden Feather Flyer, is available in that community to residents over age 62 or persons with a disability.

WHAT EMERGED FROM THE AGENCY SURVEY?

A survey of potential planning partners develops a picture of specialized transportation resources, needs and gaps in service for Butte County residents. As detailed in Chapter 4 of the Plan, the survey generated a 23 percent return rate with 69 agencies and organizations responding. Respondents included a good mix of public and private, for-profit and not-for-profit, including faith-based groups. One tribal organization participated.

Transportation functions of some type are reported by more than half of respondents (43 agencies-62 percent), including directly providing service, contracting for service, subsidizing bus passes and tokens, arranging for volunteer drivers or arranging transport for the consumer.

Vehicles reported numbered 233, of which 55 (24 percent) are in B-Line operations, 98 (42 percent) are operated by human services and 80 vehicles (34 percent) are reported by schools or commercial providers. Notably, of the vehicles reported by human service agencies, only one-third are lift-equipped, while 100 percent of the public transit vehicles are accessible and lift-equipped. Importantly, respondents indicate that 43 percent of reported vehicles must be replaced within two years and presumably larger numbers of these should be lift-equipped.

Trips provided by human service organizations annualized to 281,000, or 16 percent of total trips reported. B-Line trips accounted for 69 percent (1.2 million trips) and public schools, as well as commercial providers, reporting just under 10 percent (155,000) of all trips reported by this sample. Human service agency-provided trips were considerably longer than were the public transit trips, reflecting both the type and nature of these trips, often provided one-to-one and traveling distances between communities in contrast with public transit's shorter, more efficient trips.

Reported transportation needs found agreement on the top-ranked need across public transit, human services and private-sector organizations – *non-emergency medical trips ranked as the highest need by 64 percent of responding agencies*. After medical trip needs, human service agencies ranked the next top needs as counseling/mental health trips; shopping with multiple errands and trip-chaining needs; training, educationally oriented or job interview trips.

Top-ranked barriers to accessing needed transportation identified by responding agencies included:

- Funding challenges for directly operating or contracting for transportation.
- **Difficulty in working with public transit**, in terms of its reliability, and its rules and requirements that sometimes conflict with the individualized needs of consumers.
- **Public transit's availability**, e.g., when it operates and when it does not sometimes represents a mismatch with transit-dependent consumers' needs.
- **Agency restrictions,** due to structure or organizational limits that impact the ability to provide transportation.

- Geography of Butte County and the long distances required for some trips.
- *Information assistance* is needed, both to help frail consumers navigate services and to assist those new to public transit in finding their way.
- **Consumers' individualized needs** make it difficult to use available public transit. These needs include assistance in booking trips, gurney transportation and special help for individuals on dialysis or with behavioral health needs.

The highest ranked area of coordination interest, reported through the survey, and on behalf of <u>all</u> <u>agencies</u> was *centralized transportation information*.

Funding is of obvious interest to this review. For FY 2007, public transit expenditures countywide were \$11.9 million. Human service organizations reported \$5.5 million, with the largest proportion spent for direct operations, but also including support for mileage reimbursement, bus tokens and passes, and taxi vouchers. More than a quarter of the transportation-providing agencies, these all human services organizations, report significant funding from "soft money" sources that include fundraising, private donations and client fees. Substantive differences in the funding base exist where public transit reports stable, continuing sources that are likely to increase with time while human services funding, with such reliance upon donations and fees, is reported as less likely to increase.

WHAT DID STAKEHOLDERS REPORT ABOUT MOBILITY NEEDS?

An extensive outreach process, depicted in ES-1, directly involved both agency representatives and consumers and is described in Chapter 5 of the Plan. Three workshops were held early across the county and a late countywide Project Development Workshop convened to report and discuss Plan findings. On-site interviews were conducted with representative agencies. Three consumer-focused discussion groups were held, with senior residents of Chico's Jarvis House, low-income individuals at the Jesus Center and participants in the Paradise Day Treatment Center. Twenty-two outreach opportunities involved almost 250 individuals who directly contributed to the Plan.

Outreach findings are summarized into the following key areas, with considerable detail reported in Chapter 5 of the Plan. These are:

- 1. **Issues with the public transit network** with need for increased frequency, increased coverage, improved reliability, improved customer service and easier information access.
- 2. **Requirements for additional services and more transportation assistance** than is currently available, including same-day service, non-emergency medical transportation, special shuttles and directed group trips.
- 3. **Affordability of transportation** is a significant challenge, particularly in light of rising fuel prices. Paying even the subsidized bus fare is very difficult for the lowest income individuals.
- 4. **Agency personnel needs** that include transit information and transit trip planning education for case workers and front-line staff who have little knowledge of B-Line services.
- 5. **Agency transportation provider needs** that include driver training, driver recruitment, insurance availability, vehicle replacement and brokered or shared-ride opportunities to improve availability and cost-effectiveness of services.
- 6. *Unserved areas of the county exist* that will never be effectively served by public transit but where multiple human service agencies have clients with mobility needs.

WHAT ARE THE IDENTIFIED NEEDS, SERVICE DUPLICATION AND GAPS?

All of the Plan data collection activities are discussed in Chapter 6 in terms of three dimensions:

- 1) Individualized needs of consumers, 2) organizational issues and requirements of human service agencies and public transit agencies, and 3) infrastructure issues. Duplication and service gaps in the transportation network were identified as:
- Achieving efficient use of the many vehicles operating daily across Butte County, estimated at 250 vehicles from survey respondents alone.
- Redefining the role of public school transportation providers in a coordinated service model.
- Recognizing that the existing B-Line service footprint in Butte County is limited by farebox requirements to achieve certain efficiencies, as required in State regulation, limiting responses to low-density areas of the County.
- Recognizing the *challenges of two very different service systems* public transit and human services which each share some responsibility for the mobility of the three target groups.
- Recognizing that there is no infrastructure, and limited mechanisms in place, to bring together
 those human service agencies with public transit to facilitate meeting some of these mobility
 needs.

What Funding Exists to Address These Mobility Needs?

Chapter 7 documents various funding sources. New funding available through Section 5316, *Job Access and Reverse Commute* program is approximately \$51,000 annually and through Section 5317, *New Freedom* program is approximately \$30,000, for a total of just over \$80,000 annually. These escalate slightly annually through 2010, the final year of the authorizing legislation, SAFETEA-LU. The continuing Section 5310 program has \$12 million available statewide, and Butte County applicants may be awarded between \$50,000 to \$150,000 annually through this competitive process.

Other transit Federal funding sources are identified, with an additional \$2 million annually in total. The important State funding source is the Transportation Development Act, providing an annual allocation estimated at \$6.8 million, the largest single source for public transit.

State and Federal funding to the human service agencies was detailed to the extent that this was reported or could be determined. Notably, the larger funding sources for transportation include the Department of Developmental Services (Far Northern Regional Center), Department of Education (secondary schools), Department of Rehabilitation and the Calworks/GAIN program. Additionally, the Tobacco Settlement Revenue (First Five) and Proposition 63-MSSP (Department of Behavioral Health) are providing some limited transportation funding.

Translating Needs Into Projects

Exhibit ES-3 following presents a matrix of needs by target population sub-group, suggesting strategies for translating these needs into projects eligible for JARC or New Freedom program funding of for the existing Section 5310 capital grant program for seniors and persons with disabilities.

Exhibit ES-3, Target Population Transportation Needs, Resources & Possible Responses

Target Population	Special Transportation Needs and Concerns	Transportation Modes	Potential Transit or Transportation Projects/ Solutions
Seniors, Able-Bodied	- Lack of knowledge about resources - Concern about safety and security - Awareness that time when driving might be limited	- Fixed-route transit - Point deviation and deviated FR - Senior DAR - Special purpose shuttles: recreation, nutrition, shopping	Single point of information Educational initiatives, including experience with bus riding <u>before</u> it is needed Buddy programs; assistance in "trying" transit Transit fairs, transit seniors-ride-free days or common pass
Seniors, Frail and Persons Chronically III	 Assistance to and through the door Assistance with making trip arrangements On-time performance and reliability critical to frail users Assistance in trip planning needed Need for shelters Need for "hand-off" for very frail 	- ADA Paratransit - Emergency and non- emergency medical transportation - Escort/Companion - Volunteer drivers - Special purpose shuttles - Mileage reimbursement service	- Escorted transportation options - Door-through-door assistance; outside-thevehicle assistance - Increased role for volunteers - Technology that provides feedback both to consumer and to dispatch; procedures to identify frailest users when traveling - Individualized trip planning and trip scheduling assistance - Expanded mileage reimbursement program - Driver sensitivity training - Appropriately placed bus shelters
Persons with Disabilities	- Service quality and reliability - Driver sensitivity and appropriate passenger handling procedure - Concerns about wheelchair capacity on vehicles/ pass-bys - Need for shelters - Sometimes door-through-door or issues of "hand-off"	 Fixed-route transit ADA Paratransit Emergency and non-emergency medical transportation Special purpose shuttles Escort/Companion 	- Single point of information; information as universal design solution - Continuing attention to service performance; importance of time-sensitive service applications - Driver education and attention to procedures about stranded or pass-by passengers with disabilities - Aggressive program of bus shelters - Vehicles, capital replacement
Persons of Low- income and Homeless Persons	- Easy access to trip planning information - Fare subsidies (bus tokens or passes) that can be provided in a medium that is not cash - Breaking down the culture of poverty that uses transportation as the difficulty for not moving about the community - Difficulties of mothers with multiple children - Need to bring along shopping carts - Difficulties with transfers within and between systems; long trips	- Fixed-route transit - Point deviation and deviated FR - Special purpose shuttles (work, training, special education, Headstart, recreation) - Van pools, ride sharing, car sharing	- Creative fare options available to human services agencies - Increased quantity of bus passes available - Universal pass for services across county - Bus passes available to those searching for jobs or in job training programs; cost-effective - Special shuttles oriented to this population's predictable travel patterns - Education about transit to case managers, workers with this population - Feedback to transit planners on demand; continued work to improve transit service levels (coverage, frequency, span of hours) - Training of staff to train consumers - Vanpool assistance, ride-sharing connections
Persons with Sensory Impairments	Difficulty in accessing visual or auditory information Possible door-to-door for visually impaired Driver sensitivity	- Fixed route transit - ADA Paratransit - Demand response - Volunteers/ mileage reimbursement	Single point of information; information in accessible formats Guides (personal assistance) through information Driver training critical to respond to needs
Persons with Behavioral Disabilities	 Medications make individuals sunsensitive and waiting in the sun is not an option. Medications cause thirstiness; long hour waits can lead to dehydration. Mental illnesses can make it frightening to be in public spaces. Impaired judgment and memory 	- Fixed route transit - ADA Paratransit - Special purpose shuttles - Escort/Companion	Possibly special shuttles oriented to these known predictable travel needs Driver training projects to provide skills at managing/ recognizing behaviors of clients Aggressive program of bus shelters "Hand-off" can be critical for confused riders, passing them off to a responsible party Important that driver understand rider conditions

Federal guidance suggests that coordination-friendly policies must be developed by regional public transit agencies and organizations to ensure that projects seeking funding can be incorporated into the regional Program of Projects (POP), the tool by which Federal funding is assured. Implementation of the recommendations outlined in the Plan's Chapter 8 will assist BCAG and other organizations in Butte County in establishing a "culture of coordination" to promote projects addressing needs this Plan identifies. The wide-ranging individualized needs emerging from agency staff, consumers and through analysis begin to suggest project responses, as identified in ES-3.

LEADING TOWARDS RECOMMENDATIONS

This Plan documents the characteristics of unmet need for transportation assistance in Butte County on behalf of persons who are low-income, are disabled or are elderly. Needs are considered in terms of:

- the characteristics of the consumers themselves and their highly individualized requirements;
- the geography of Butte County and its dispersed, rural areas and low-density communities; and
- the differing missions and regulatory requirements of two service industries: public transit and human services agencies and organizations.

It is this last issue, the different cultures of human services and public transit, that represents the greatest challenge as these organizations must come together in some fashion to build the capacity in Butte County toward addressing identified needs, growing the quantity and quality of trips provided. It is presumed that coordinated solutions that lie between public transit and the human services systems can result in the cost-effective, responsive services required. To build such expanded capacity, both public transit and human services agencies must be active partners in larger capacity-building effort.

Particularly challenging to Butte County, as with other largely rural counties, is that the SAFETEA-LU funding supporting coordination initiatives is modest. Chapter 8 of the Plan examines two key "tools" by which to promote such coordination. One is the Federal construct of *Mobility Management*, described in detail in the implementing circulars and funded as capital at the 80 percent Federal, 20 percent local match level. The second is California's Consolidated Transportation Services Agency (CTSA), provided for in the Transportation Development Act (TDA) and potentially eligible for 5 percent of TDA funding to the County. These "tools" are important to facilitating implementation of the Plan's recommendations.

RECOMMENDATIONS

This Plan sets forth a Vision statement and identifies three implementing goals, providing a framework for potential strategies and projects.

<u>VISION</u>: TO IMPROVE MOBILITY FOR BUTTE COUNTY SENIORS, PERSONS WITH DISABILITIES AND PERSONS OF LOW-INCOME THROUGH COORDINATED PROJECTS AND PARTNERSHIPS.

<u>GOAL 1: FACILITATING LEADERSHIP AND INFRASTRUCTURE</u> – The formation of a regional Mobility Manager/CTSA entity is recommended with decisions taken regarding the structure, organizational location, membership and funding to be developed. This Mobility Manager/CTSA provides the infrastructure necessary to further coordination of human service agency transportation and facilitates appropriate integration with B-Line's network of services.

GOAL 2: BUILDING SERVICES – Working collaboratively, the regional Mobility Manager, human service agencies and the B-Line can grow the capacity of existing services, develop and test new services and build creative mobility responses to gaps in the existing service fabric.

<u>GOAL 3: ENHANCING INFORMATION PORTALS</u> – The regional Mobility Manager/CTSA becomes a clearinghouse for information on transportation options, both human service transportation and public transit services. Expanded information roles could involve trip-arranging for the most frail populations and mobility training to teach all potential users, including youth, seniors and other transit-dependent persons how to use Butte County's public transit network.

Chapter 8 of the Plan includes a matrix further detailing these goals in terms of 12 objectives and 37 strategy areas for moving toward the proposed Vision. These strategies intend only to suggest potential projects, to further evolve as the County's response to this Coordinated Plan unfolds.

How to Prioritize and Sequence these Recommendations?

This Plan strongly recommends that BCAG and its strategic planning partners move forward expeditiously with decisions around a regional Mobility Manager/CTSA for Butte County. This is seen as the missing piece that can, to a significant degree, promote and nurture the coordination potential that exists in Butte County. This entity can provide the leadership necessary to leverage existing resources and to promote new efficiencies and cost-effective alternatives by which the needs documented in this Plan can be addressed.

BCAG can establish a process for decision-making around the Mobility Manager/CTSA structure, governance and funding base, as well as initial membership and functions. Potentially a modest organizational planning study is indicated. Any adopted structure should ensure a flexible, responsive organizational design that allows the Mobility Manager/CTSA functions and membership to develop with time.

The Federal circulars require that a competitive process be undertaken to identify and select those projects to which JARC and New Freedom funding should be directed. This is complicated for Butte County, again as with other small counties, where the total funding levels are modest, at no more than \$80,000 for the first funding year. Therefore, the following actions are proposed:

- 1. Recommend that BCAG seek discretionary funding to move to decisions regarding the regional Mobility Manager/CTSA organizational structure and related issues.
- 2. Recommend that either alternative funding such as TDA Article 4.5 be sought to fund the Mobility Manager or that no more than half of the annual JARC/New Freedom funding be used to underwrite the regional Mobility Manager.
- 3. Recommend a competitive Call be offered to BCAG's planning partners, inviting projects either in defined areas or left open to the interest and willingness of prospective applicants.
- 4. Recommend that BCAG enter into discussion with its own member agencies about providing graduated funding, based upon TDA Article 4.5 provisions for those who cannot use conventional transit, to establish a baseline operations budget for the CTSA. Such graduated funding levels could accommodate very modest beginning initiatives that might grow subsequently.

Each of these actions involves considerable implementation detail. All of BCAG's planning partners concerned with the content of this Plan are encouraged to participate and to assist with the steps that this will entail, as appropriate to each organization. Notably, where reallocation of resources is involved, it is a complicated and difficult process at best, and more so when the statewide budget picture is not favorable. Making choices among equally worthy alternatives requires developing consensus and supporting policy makers in moving forward.

COORDINATED PUBLIC TRANSIT- HUMAN SERVICES TRANSPORTATION PLAN FOR BUTTE COUNTY

July 2008

OVERVIEW

This document presents the results of a process to prepare a comprehensive, unified, locally developed plan, entitled the **Coordinated Public Transit - Human Services Transportation Plan for Butte County.** This plan is required by the U.S. Department of Transportation, Federal Transit Administration in order to access funding available under:

Section 5316 – Job Access and Reverse Commute (JARC) program

Section 5317 - New Freedom program

Section 5310 – Elderly Individuals and Individuals with Disabilities program

Funds are available through the JARC program for capital and for operation of services, targeting unmet transportation needs of low-income individuals for work-related trips. Funds available through the New Freedom program are for capital or operation of services supporting mobility of persons with disabilities, particularly with regard to trip needs that go beyond that provided by Americans with Disabilities Act (ADA) complementary paratransit. The Section 5310 program is an existing program providing capital equipment to transportation services to seniors and/or persons with disabilities.

The development of the plan involved a range of activities, including:

- Stakeholder survey results from a survey distributed twice to over 300 agencies and human services organizations across the county;
- Data collection effort compiling key information about Butte County's public transit network of services;
- An estimate of trip demand for the target groups of seniors, persons with disabilities and individuals of low-income;
- An extensive public outreach effort across the County that included public workshops, consumer focus groups, on-site interviews and telephone interviews, reaching almost 150 individuals.

From this broad array of stakeholder outreach strategies and quantitative data collection and analysis, this document provides an assessment of the needs, gaps and duplication of services for three target populations – persons of low-income, persons with disabilities and elderly individuals. This assessment leads to a series of recommendations that include a mobility vision on behalf of the target groups and three coordination goals; facilitating leadership and infrastructure, building services, and enhancing information portals. These are supported by twelve objectives and 37 strategy areas for implementing the proposed goals.

Finally, the report recommendations include building the infrastructure for coordinated transportation through a regional Mobility Manager and/or Consolidated Transportation Services Agency (CTSA) for Butte County. Discussion is included of prioritizing needs towards which to build projects, sequencing of the plan's recommendations and strategies for project selection.

1.0 CONTEXT FOR THE LOCALLY DEVELOPED COORDINATION PLAN

1.1 Introduction

This plan is prepared in response to the coordinated planning requirements set forth in three sections of SAFETEA-LU [Safe, Accountable, Flexible, Efficient Transportation Act – A Legacy for Users, P.L. 190-059] Section 5316-Job Access and Reverse Commute program (JARC), Section 5317-New Freedom Program and Section 5310-Elderly Individuals and Individuals with Disabilities Program.

The Coordinated Public Transit-Human Services Transportation Plan, prepared on behalf of the Butte County Association of Governments (BCAG), will establish the construct for a unified comprehensive strategy for transportation service delivery focused on unmet transportation needs or gaps in service for Butte County. This plan meets the requirements for coordinated planning efforts as described in SAFETEA-LU, and enables federal funding under the Section 5310, JARC, and New Freedom programs.

1.2 COORDINATION AT THE FEDERAL LEVEL

SAFETEA-LU With the passage of SAFETEA-LU in 2005, the U.S. Department of Transportation (DOT) and the Federal Transit Administration (FTA) conducted a series of "listening sessions" around the country to obtain input on how to implement facets of this complex transportation funding authorization. Guidance was sought from public transit operators, regional transportation planning agencies and metropolitan transportation organizations. Comments on the New Freedom program, JARC, and the 5310 capital program recommended consolidating the coordination planning requirements for these programs.

To that end, the proposed FTA circulars issued in March 2006 and the final circulars issued on May 1, 2007 all included a common Chapter V:

Section 5310 - FTA C. 9070.1F; Elderly Individuals and Individuals with Disabilities Program Guidance

Section 5316 – FTA C.9050.1: The Job Access & Reverse Commute Program Guidance Section 5317- FTA C. 9045.1: New Freedom Program Guidance.

The circulars' common Chapter V, "Coordinated Planning," requires that all projects funded through these sections be "derived from a locally developed, coordinated public transit – human services transportation plan" which is "developed through a process that includes representatives of public, private, and non-profit transportation and human services providers and participation by members of the public." The findings reported here contribute to this locally developed, coordinated public transit-human services transportation plan to ensure that eligible projects developed for Butte County constituents can be funded. Specifically, the plan's goals should address the general purposes and requirements outlined in Table 1-1.

¹ Page V-1 of each of the respective proposed circulars, Section 5310, Section 5316 and Section 5317, issued by the Federal Transit Administration, U.S. Dept. of Transportation, May 1, 2007.

Table 1-1

Summary of Goals of SAFETEA-LU's Coordinated Locally-Developed Planning Process

The Coordinated Locally-Developed Plan shall identify transportation needs of individuals with disabilities, older adults and people with low-incomes; provide strategies for meeting those local needs and prioritized transportation services for funding and implementation.

[From the Overview in Chapter 5, Coordinated Planning of each of the Circulars related to Sections 5310, 5316 and 5317 released May 1, 2007.]

Program Goals that the Plan shall address:

Section 5310 – Elderly Individuals and Individuals with Disabilities Program:

Provision of discretionary capital assistance in cases where public transit was inadequate or inappropriate to serve the transportation needs of elderly persons and persons with disabilities [FTA Circular 9070.1F, p. I-3].

<u>Section 5316 – Jobs Access and Reverse Commute Program:</u> "Improve access to transportation services to employment and employment-related activities for welfare recipients and eligible low-income individuals" [FTA Circular 9050.1, p. II-1]. In addition, the House of Representatives conference report indicated that the FTA should "continue its practices [with this program] of providing maximum flexibility to job access projects designed to meet the needs of individuals not effectively served by public transportation" [HRC Report 109-203, Section 3018].

<u>Section 5317 – New Freedom Program:</u> Provide additional tools to overcome existing barriers facing Americans with disabilities seeking integration into the work force and full participation in society" [FTA Circular 9045.1, p. II-2].

1.3 FEDERAL TRANSIT ADMINISTRATION (FTA) PROGRAM GUIDANCE

FTA guidelines require that the coordinated plan must contain four (4) elements consistent with the available resources of each individual agency/organization:

- 1. An assessment of available services that identifies current providers (public, private and non-profit);
- 2. An assessment of transportation needs for individuals with disabilities, older adults, and people with low-incomes an assessment which can be based on the experiences and perceptions of the planning partners or on data collection efforts and gaps in service;
- Strategies and/or activities and/or projects to address the identified gaps between current services and needs as well as opportunities to improve 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.

1.4 LOCAL EFFORT AND POLICY DIRECTION SUPPORTING COORDINATION

Butte Regional Transit, with the brand name of B-Line, provides public transit service in and between the urban areas of Butte County, in addition to rural areas within the County. Butte Regional Transit also provides ADA Paratransit service within each of the urban areas.

Butte County Association of Governments (BCAG) has a long history of coordinating and consolidating public and human service agency transportation. The **Coordinated Public Transit-Human Services Transportation Plan** builds upon these efforts.

The Butte County Association of Governments (BCAG) was formed in 1969 by a cooperative agreement between the County of Butte and the cities of Chico, Gridley, Biggs, and Oroville. In 1978, an amendment to the cooperative agreement was made to include the newly incorporated Town of Paradise. In 1995, a new Joint Powers Agreement (JPA) was signed by the County and each of the incorporated cities for the continuation of BCAG for a ten-year period.

In January 2001, a Butte County Transit Consolidation study was completed by Nelson/Nygaard Consulting Associates. This was an 18-month study process that led to seven specific recommendations for transit system consolidation in Butte County. A Countywide Consolidated Transit Service Advisory Committee provided guidance to the study. In August 2001, there was a decision by the BCAG Board not to fully consolidate. Instead, it was decided to take steps toward consolidation. BCAG hired a Senior Planner to coordinate transit administration.

BCAG assumed the day-to-day planning responsibilities for the public transit system operated by the cities, the town and the Cunty in 2001/02. The transit agencies involved included Butte County Transit, Chico Area Transit, Chico Clipper, Oroville Area Transit, Oroville Express and Paradise Express. Policy direction remained at the city council and Board of Supervisors level.

In March 2003, a decision was made by the BCAG Board to move toward full consolidation of Butte County transit services.

In September 2004, BCAG established a coordinated transportation working group that brought together public transit agency and social service agency staff to work on coordination of human service transportation issues

In December 2004, BCAG's Joint Powers Authority Agreement was amended to include the policy making authority for the consolidated transit service. In July 2005, the cities, town, and county consolidated the transit policy making authority under BCAG in addition to day-to-day responsibilities. B-Line Service began July 5, 2005.

BCAG has established a Transit Administrative Oversight Committee that includes staff representatives from the cities, town, and county.

As part of the consolidation process, BCAG has expanded the role of the Social Services Transportation Advisory Council (SSTAC) to include a broader role in transit planning activities. In addition to coordinating the annual unmet needs process, the SSTAC serves as the regional transit advisory committee to staff and to the BCAG Board on transit issues.

2.0 ASSESSMENT OF AVAILABLE TRANSIT AND TRANSPORTATION SERVICES IN BUTTE COUNTY

2.1 Introduction

This chapter describes available transit in Butte County. Immediately following is a matrix and route maps of existing public transit services that are intended to be a stand-alone summary of B-Line routes. A brief summary is included of other selective transportation programs operating in Butte County.

2.2 B-LINE PUBLIC TRANSIT SERVICES

B-Line has consolidated day to day operations of its public transit operations, beginning in 2005, when the programs of municipal and county operations were combined into one regional operation. These are briefly summarized below, with additional detail following in tables and maps.

➢ B-Line Fixed Route – Chico

This system provides transportation to the general public and consists of 10 routes throughout the city of Chico. Weekday frequency ranges between 30 minutes and one hour, with an operating schedule between the hours of 6:15 a.m. and 9:45 p.m. Regular fare for this service is \$1.00, while a 10 ride pass costs \$9.00. Prices are discounted by 50 percent for all seniors aged 65 and older and persons with disabilities, and anyone with a valid Medicare card.

B-Line Fixed Route – Oroville

Service is provided to the general public, consisting of routes connecting with the city of Chico and traveling within Oroville. There are four routes traveling within the city of Oroville, and two routes connecting Oroville with the cities of Biggs and Paradise. Weekday frequency ranges between 30 minutes and two hours, with an operating schedule between the hours of 5:50 a.m. and 7:42 p.m. Regular fare for this in-city service is \$1.00, while a 10-ride pass costs \$9.00. Prices are discounted by 50 percent for all seniors aged 65 and older and persons with disabilities, and anyone with a valid Medicare card.

➤ B-Line Fixed route – Intercity Routes

There are five routes that exist and create connections with the cities of Chico, Paradise, Oroville, Gridley and Biggs. These routes also provide local service to the Paradise/Magalia area. These are considered regional routes and regular fares are increased to \$1.25, while a 10 ride pass increases to \$11.00.

> B-Line Paratransit Service

This service serves all destinations ¾ of a mile from any Butte Regional transit (B-Line) fixed route, within Chico, Oroville or Paradise. This system accommodates all ADA passengers, and provides Dial-a-Ride service for persons with disabilities found not eligible for ADA service and seniors age 65 and older. The fare for this service is \$2.00 per one-way trip.

> Inter-county Services

Service between the counties of Butte and Glenn is provided by Glenn Ride on Monday through Friday, providing seven trips per day between the hours of 5:15 a.m. and 7:20 p.m. There are three trips between these counties available on Saturdays between 8:00 a.m. and 5:00 p.m.. Regular fare for inter-county service between Butte and Glenn is \$1.50, with a transfer to B-Line services at the Chico Transit Center.

Travel between Butte County and Plumas County is achieved by utilizing the Plumas Transit System. This is a once-a-day round trip service that is only available on Wednesdays, originating in Plumas County and arriving in Chico mid-day, then returning to Plumas in the evening. One-way fares are \$12.00 and discounted by 50 percent for seniors, children, and persons with disabilities. For one-way travel to Plumas only, riders must contact the office to ensure that a ride is available. This bus only travels to Chico when passengers from Plumas need to make the trip.

Following is Figure 2-1, B-Line Public Transit Services Matrix detailing the service characteristics described briefly above. Immediately following the matrix are the B-Line transit systems maps, for Butte County as a whole, and the cities of Chico, Paradise, Oroville, and Gridley (Figures 2-2 through 2-6).

Figure 2-1, Matrix of B-Line Public Transit Services in Butte County

		t e 2-1, Matrix of B-Lir REGIONAL TRANSIT				Jounty		
Systems	Area Served	Service	Hours & Frequency	Eligibility	Transfer Policy		Fare Policy	
Route 1 Esplanade/Lassen	CSUC Taylor Hall Enloe Hospital Chico HS Chico JHS Chico DMV E. Lassen BI. Esplanade	Buses from Route 1N continue as Route 2S at Lassen and Ceres Ave. Buses from Route 1S continue as Route 1N at Transit Center	Monday — Saturday 6:15 am — 9:15pm 30 min frequency 8am to 10am & 4pm to 8pm 1 hr frequency 6am to 8am, 10am to 4 pm, 8pm to 9pm		Transfer Point for Route 1 and 2 at Parmac and Rio Lindo	CASH Regular Discount Student (6-18)	\$1.00 \$0.50 \$0.75	Regional Service \$1.25 \$0.60 \$1.00
Route 2 Mangrove	Enloe Medical Chico Post Office Chico DMV North Valley Plaza Mangrove Medical Mangrove Ave.	Buses from Route 2N continue as Route 1S at Lassen and Ceres Ave. Buses from Route 2S continue as Route 2N	Monday — Saturday 6:15 am — 9:20 pm 30 min frequency 8am to 10am & 4pm to 8pm 1 hr frequency 6am to 8am, 10am to 4 pm, 8pm to 9pm			Child (under 6) 2-RIDE PASS Regular Discount Student (6-18) 10-RIDE PASS Regular	2 free \$2.00 \$1.00 \$1.50	2 free \$2.50 \$1.20 \$2.00
Route 3 Nord/East	Cal State Chico W. East Ave Nord Ave	Buses from Route 3N continue as Route 4S at North Valley Plaza. Buses from Route 3S continue as Route 6E at Transit Center Route 3 provides service when Route 9 is not operating at W. 4th and Cedar Loop	Monday — Saturday 6:15 am — 9:20 pm 1 hr frequency	General Public	None	Discount Student (6-18) 30-DAY PASS Regular Discount Student (6-18)	\$4.50 \$6.50 \$30.00 \$15.00 \$20.00	\$5.00 \$8.50 \$37.50 \$18.00 \$25.00
Route 4 First/East	Chico JHS Chico Library Pleasant Valley HS Bidwell JHS North Valley Plaza E. 1st Ave East Ave	Buses from Route 4N continue as Route 3S at North Valley Plaza. Buses from Route 4S continue to Route 5E at Transit Center	Monday — Saturday 6:15 am — 9:15pm 30 min frequency 7am to 8am & 3pm to 4pm 1 hr frequency 8am to 3pm & 4pm to 9pm		Transfer Point for Routes 4 and 7 at Pleasant Valley HS	ALL DAY PASS - Day Pass can be p for unlimited acces day. Be sure to tel Pass BEFORE put UPGRADE from L If you have a LOCA	urchased directly f ss to the entire sys I the driver you wa ting your money in OCAL TO REGION AL ticket, pass or tr	rom the driver tem for the nt an All Day the farebox.
Route 5 E. 8 th Street	Fir St. Park and Ride Chico Mall E. 8 th St. Chico City Hall	Buses from Route 5E continue as Route 6W at Chico Mall Buses from Route 5W continue as Route 4N or 6E at Transit Center	Monday — Saturday 6:15 am — 9:15pm 30 min frequency 7am to 8pm 1 hr frequency 6am to 7am & 8pm to 9pm	7	Transfer Point for Routes 5, 6, & 7 at Chico Mall	be upgraded to a F difference. For Req difference is .25, a *Discount fares a disabled and those	gular and Student t and for Discount it pply to seniors (ag	he price is .10. e 65+),

	BUTTE RE	GIONAL TRANSIT – B-	LINE Fixed Route S	Services	- Chico con	i'd		
Systems	Area Served	Service	Hours & Frequency	Eligibility	Transfers		Fare Policy	
Route 6 Whitman/Park	Social Security Office Chico Mall Butte College Chico Community Employment Center Salvation Army Community Center Country Day School	Buses from Route 6E continue as Route 5W at Chico Mall Buses from 6W continue as Routes 3N or 5E at Transit Center	Monday — Saturday 6:15 am — 9:45pm 30 min frequency 7am to 8pm 1 hr frequency 6am to 7am & 8pm to 9pm		Transfer Point for Routes 5, 6, & 7 at Chico Mall	CASH Regular Discount Student (6-18) Child (under 6)	\$1.00 \$0.50 \$0.75 2 free	Regional Service \$1.25 \$0.60 \$1.00 2 free
Route 7 Bruce/Manzanita	Chico Mall Marsh JHS Sierra Sunrise Village	Buses from routes 7N continue as Route 7S at Pleasant Valley High School Buses from Routes 7S continue as Route 7N at Chico Mall	Monday — Saturday 6:45 am — 6:36pm 1 hr frequency 6am to 6pm Marsh Loop runs Monday — Friday only.		Transfer Point for Routes 4 and 7 at Pleasant Valley HS Transfer Point for Routes 5, 6, & 7 at Chico Mall	2-RIDE PASS Regular Discount Student (6-18) 10-RIDE PASS Regular Discount Student (6-18)	\$2.00 \$1.00 \$1.50 \$9.00 \$4.50 \$6.50	\$2.50 \$1.20 \$2.00 \$11.00 \$5.00 \$8.50
Route 8 Nord	Cal State Chico Student Health Center Parking Structure Emma Wilson School	Buses from Route 8 continue as Route 9 at Transit Center	Monday — Friday 7:30am — 7:00pm 30 min frequency 7:30am — 7:00pm	General Public	None	30-DAY PASS Regular Discount Student (6-18) ALL DAY PASS - i Day Pass can be pi		
Route 9 Warner/Oak	Cal State Chico Merion Library Whitney Hall Acker Gym Parking Structure Craig Hall	Buses from Route 9 continue as Route 8 Route 9 operates only on weekdays during the CSUC school year when classes are in session. When route 9 is not operating see Route 3 for service to Warner and Cedar streets.	Monday — Friday 7:38am — 7:08pm 30 min frequency 7:38am — 7:08pm		None	for unlimited acces day. Be sure to tell Pass BEFORE putti UPGRADE from L(If you have a LOCA be upgraded to a R difference. For Req	ss to the entire sys the driver you wa ing your money in OCAL TO REGION IL ticket, pass or tr EGIONAL fare just	tem for the nt an All Day the farebox. AL FARE ansfer, it can by paying the
Route 10 Esplanade	Enloe Hospital Chico HS	Buses from Route 10N continue as Route 10S at Esplanade and Hwy 99 Buses from Route 10S continue as Route 10N at Transit Center	Monday — Saturday 6:50 am — 8:44pm 1 hr frequency 6:50 am to 8:44 pm		None	difference is .25, ar *Discount fares ar disabled and those	nd for Discount it in oply to seniors (ago	s .10. e 65+),

	BUTTE REC	GIONAL TRANSIT – B-LINI	E Fixed Route Se	ervices -	- Chico/Oro	ville		
Systems	Area Served	Service	Hours & Frequency	Eligibility	Transfers		Fare Policy	
Route 20 Oroville Weekend	-Chico- Chico Transit Center Fir St. Park and Ride Lot Chico City Hall Work Training Center -Oroville- Juvenile Hall County Administration County public Works Veterans Hall Transit Station Oroville Transit Center Las Plumas Plaza DMV Park Place Senior Housing	Buses from Route 20S continue to Route 20N at Feather River and Oro Dam 6 Buses from 20N continue as Route 20S at Transit center	Monday-Friday 5:50am — 7:24pm 1 hr frequency 5:50am to 5:00pm 30 min. frequency 5:00pm to 7:24pm		None	CASH Regular Discount Student (6-18) Child (under 6) 2-RIDE PASS Regular Discount Student (6-18) 10-RIDE PASS	\$1.00 \$0.50 \$0.75 2 free \$2.00 \$1.00 \$1.50	Regional Service \$1.25 \$0.60 \$1.00 2 free \$2.50 \$1.20 \$2.00
Route 20 Oroville Weekday	-Chico- Chico Transit Center Fir St. Park and Ride Lot Chico City Hall Work Training Center -Oroville- Juvenile Hall County Administration County public Works Veterans Hall Transit Station Oroville Transit Center Las Plumas Plaza DMV Park Place Senior Housing	Buses from Route 20S continue to Route 20N at Feather River and Oro Dam 6 Buses from 20N continue as Route 20S at Transit center	Saturday and Sunday 7:50am — 5:42pm 2 hr frequency 7:50 am to 5:42 pm	General Public	None	Regular Discount Student (6-18) 30-DAY PASS Regular Discount Student (6-18) ALL DAY PASS - Day Pass can be p for unlimited acces day. Be sure to tel	urchased directly f ss to the entire sys I the driver you wa	rom the driver tem for the nt an All Day
Route 24 Thermalito	Oroville Transit Center Las Plumas Plaza Community Employment Juvenile Hall County Administration County Public Works Collins and denny Market Park and Ride	Buses from 24N continue as Route 24S at Public Works Buses from 24S end at Transit Center *Flag Stop Areas on Route 24 include Thermalito east of SR 70 and Grand Avenue between SR 70 and Table Mountain BI. Upon request the first run will continue from the Transit Center to Oroville HS	Monday — Friday 6:46 am — 5:28 pm 2 hr frequency 6:46 to 2:00pm 3 hr frequency 2:00pm to 5:28 pm		None	UPGRADE from L If you have a LOC/ be upgraded to a F difference. For Rec difference is .25, a *Discount fares a disabled and those	OCAL TO REGION AL ticket, pass or to REGIONAL fare just Jular and Student to Ind for Discount it Opply to seniors (ag	IAL FARE ransfer, it can by paying the he price is .10.

A-M-M-A TRANSIT PLANNING/ TRANSIT RESOURCE CENTER

	BUTTE	REGIONAL TRANSIT – B	-LINE Fixed Route	e Service	s – Oroville	Э		
Systems	Area Served	Service	Hours & Frequency	Eligibility	Transfers		Fare Policy	
Route 25 Oro Dam	Oroville Transit Center Las Plumas Plaza DMV Greyhound Bus depot Walmart Post office Feather River Cinemas City Hall	6 buses from Route 25 continue as Route 26 at Transit Center 6 buses from Route 25 continue as Route 27 at Transit Center *Flag Stop Areas on route 25 include Robinson between 5th and Lincoln.	Monday — Friday 7:05 am — 5:28 pm 1 hr frequency 7:05 am to 5:28 pm		None	CASH Regular Discount Student (6-18) Child (under 6) 2-RIDE PASS Regular	\$1.00 \$0.50 \$0.75 2 free \$2.00	Regional Service \$1.25 \$0.60 \$1.00 2 free \$2.50
Route 26 Olive Highway	Oroville Transit Center Oroville Hospital Southside Community Center Oroville HS Gold County Casino Olive Highway Foothill	Buses from route 26 continue as Route 25 at Transit Center *Flag stop areas on route 26 include Baldwin between Myers and Washington	Monday — Friday 8:36 am — 4:58 pm 2 hr frequency 8:36 am to 4:58 pm	General Public	None	Discount Student (6-18) 10-RIDE PASS Regular Discount Student (6-18) 30-DAY PASS Regular Discount Student (6-18)	\$1.00 \$1.50 \$9.00 \$4.50 \$6.50 \$30.00 \$15.00 \$20.00	\$1.20 \$2.00 \$11.00 \$5.00 \$8.50 \$37.50 \$18.00 \$25.00
Route 27 South Oroville	Oroville Transit Center Oroville Hospital Las Plumas HS Lincoln Myers	Buses from route 27 continue as Route 25 at Transit Center *If transferring between Route 20 and route 27, be sure to let driver know, so connecting bus will be waiting. Flag stop areas on Route 27 include Myers and Wyandotte, and in South Oroville on Monte Vista and Las Plumas. Upon request Route 27 will deviate to connect to the Southbound Route 30 stop at Lower Wyandotte and Las Plumas.	Monday — Friday 7:34 am — 5:59 pm 2 hr frequency 7:34 am to 5:59 pm		None	ALL DAY PASS - is Day Pass can be put for unlimited access day. Be sure to tell t Pass BEFORE puttin UPGRADE from LO If you have a LOCAL be upgraded to a RE difference. For Regu difference is .25, and *Discount fares app	rchased directly fit to the entire syst the driver you wang your money in CAL TO REGION. ticket, pass or tregional fare just alar and Student tid for Discount it in ply to seniors (age	rom the driver tem for the nt an All Day the farebox. AL FARE cansfer, it can by paying the he price s .10.

^{*}In Flag Stop Areas stand at a safe location on the roadside and wave to the driver to indicate that you wish to board the bus. The driver will only allow you to board in a location that is safe.

Systems	Area Served	SIONAL TRANSIT – B-LIN Service	Hours & Frequency	Eligibility	Transfers		Fare Policy	
Route 30 Oroville — Biggs	Oroville Transit Center Oroville Sports Club Feather Falls Casino Tribal Administration Post Office Farm Labor Housing City Hall Southside Community Center Olive Pharmacy Biggs Gridley Palermo	Monday — Friday Buses from 30S continue as Route 30N at 6th and B Street in Biggs Last Bus on Route 30N continues as Route 20N at Mitchell and Spencer in Oroville Saturday Buses from Route 30S Continue as Route 30N at 6th and B Street in Biggs Buses from Route 30N Continue as Route 30S at Mitchell and Spencer in Oroville (Oroville Transit Center) **Flag stop areas	Monday — Friday 7:42 am — 5:17 pm 4 hr frequency 7:42 am to 5:17 pm Saturday 8:42 am — 4:47 pm 2 hr frequency 8:42 am to 4:47 pm		None	CASH Regular Discount Student (6-18) Child (under 6) 2-RIDE PASS Regular Discount Student (6-18) 10-RIDE PASS Regular Discount Student (6-18) 30-DAY PASS Regular Discount	\$1.00 \$0.50 \$0.75 2 free \$2.00 \$1.00 \$1.50 \$9.00 \$4.50 \$6.50	Regional Service \$1.25 \$0.60 \$1.00 2 free \$2.50 \$1.20 \$2.00 \$11.00 \$5.00 \$8.50 \$37.50 \$18.00
Route 31 Paradise — Oroville	-Paradise- Paradise Transit Center Recreation Center Post Office DMV Park and Ride Lot Library -Oroville- Juvenile Hall County Administration County Public Works Veterans Hall Community Employment	Morning bus from Route 31S continues on to Route 30S at Mitchell and Spencer in Oroville (Oroville Transit Center) Evening bus from Route 31N Ends at Almond and Birch in Paradise (Paradise Transit Center)	1 morning trip 6:37 am — 7:31 1 evening trip 5:05 pm — 6:00 pm		None	ALL DAY PASS - is a Day Pass can be purc unlimited access to th sure to tell the driver BEFORE putting your UPGRADE from LOC If you have a LOCAL the upgraded to a REGION difference. For Regula	chased directly from the entire system you want an All money in the farman th	rom the drive for the day. I Day Pass irebox. AL FARE ansfer, it can paying the

A-M-M-A TRANSIT PLANNING/ TRANSIT RESOURCE CENTER

Systems	Area Served	Service	Hours & Frequency	Eligibility	Transfers		Fare Policy	
Route 40 Paradise — Chico	-Chico- Chico Transit Center Work Training Center Silver Dollar Fairground Community Employment Skyway Professional Center City Hall -Paradise- Old Concrete Shelter Paradise Park Transit Center Recreation Center Post Office DMV Community Park Sierra Park Library Fir St. Park & Ride Community Center Town Hall	Monday — Friday Buses from 40E continue as route 40W at Almond and Birch in Paradise (Paradise Transit Center) 6 buses from Route 40W continue as Route 40E at 2 ^{md} & Salem in Chico (Chico Transit Center) Saturday & Sunday Buses from Route 40E continue as Route 40W at Almond and Birch in Paradise (Paradise Transit Center) Buses from Route 40W continue as Route 40E at 2 ^{md} & Salem in Chico (Chico Transit Center) Route 40 follows a different route on Weekends in the Chico area.	Monday — Friday 6:21 am — 7:33 pm 2 hr frequency 6:21 am to 2:50 pm 1 hr frequency 2:50 pm to 7:00pm Saturday and Sunday 7:50 am — 6:41 pm 2 hr frequency 7:50 am to 6:41 pm		None	CASH Regular Discount Student (6-18) Child (under 6) 2-RIDE PASS Regular Discount Student (6-18) 10-RIDE PASS Regular Discount Student (6-18)	\$1.00 \$0.50 \$0.75 2 free \$2.00 \$1.00 \$1.50 \$9.00 \$4.50 \$6.50	Regional Service \$1.25 \$0.60 \$1.00 2 free \$2.50 \$1.20 \$2.00 \$11.00 \$5.00 \$8.50
Route 41 Paradise Pines - Chico	-Chico- Transit Center Skyway Professional Center Park & Ride lot Chico City Hall -Magalia- Magalia Depot Community Church Holiday Market -Paradise- Paradise Park Transit Center Recreation Center	Monday — Friday Buses from route 41E continue as Route 41W To Skyway and Colter in Magalia (Paradise Pines) Buses from Route 41W continue as Route 41E at 2nd & Salem in Chico (Chico Transit Center) Carnegie and Colter Loop is only serviced during peak hours Flag stops in Magalia include all stops not on the Skyway	Monday — Friday 6:13 am — 6:23 pm 2 hr frequency 6:13 am to 6:23 pm Saturday 9:36 am — 10:17 am 5:00 pm — 5:41 pm 1 - am round trip 1 - pm round trip	General Public	First run transfers to Route 40 to continue down Skyway Arrival times at Skyway and Flagstaff allow for transferring to/from Route 40	30-DAY PASS Regular Discount Student (6-18) ALL DAY PASS - Day Pass can be p for unlimited acce day. Be sure to tel Pass BEFORE put	urchased directly t ss to the entire sys I the driver you wa	from the driv stem for the ant an All Da
Route 46 Feather River Hospital	Old Concrete Shelter Park & ride Community Park Feather River Hospital Paradise Transit Center Feather River Hospital	Saturday 2 round trips from Paradise to Magalia Buses run from Almond and Birch (Paradise Transit Center) to Feather River Hospital	Monday — Friday 9:41 am to 5:38 pm	_	None	UPGRADE from L If you have a LOC/ be upgraded to a I difference. For Red difference is .25, a *Discount fares a disabled and those	AL ticket, pass or t REGIONAL fare just gular and Student and for Discount it pply to seniors (ag	transfer, it of t by paying the price is .10. ge 65+),

^{*}In Flag Stop Areas stand at a safe location on the roadside and wave to the driver to indicate that you wish to board the bus. The driver will only allow you to board in a location that is safe

Systems	Area Served Service	Hours & Frequency	Eligibility	Fare Policy
B-Line Paratransit	B-Line paratransit serves all destinations within 34 of a mile from any Butte Regional Transit (B-Line) fixed route, within Chico, Oroville or Paradise Passenger must be available for pick up within a 30 minute window (15 minute prior and 15 minutes after scheduled pick up time) Driver will only wait for the first 5 minutes within this window Subscription service is available for passengers that need be picked up at the same time on the same days of the without having to call in. Must call before 5pm of the day prior to your trip to cance Vehicles are air-conditioned and have seat belts in all passenger seats, two-way radios, hydraulic lifts and securement systems	7:00am to 5:00pm 7 days per week There is no service on the following holidays: New Years Day Memorial Day Independence Day Labor Day Thanksgiving Day Christmas Day	ADA: Americans with Disabilities Act Must be registered and certified Americans with Disabilities Act (ADA) and eligible by B- Line's eligibility consultant, ADARIDE.COM. DAR: Dial-a-Ride Senior Services (65+) — Verification of age and residency. Disabled Service (all ages) — Individuals with disabilities who are found to be ineligible for ADA Paratransit may be eligible for DAR services	Paratransit/Dial-a-Ride One N ADA Eligible

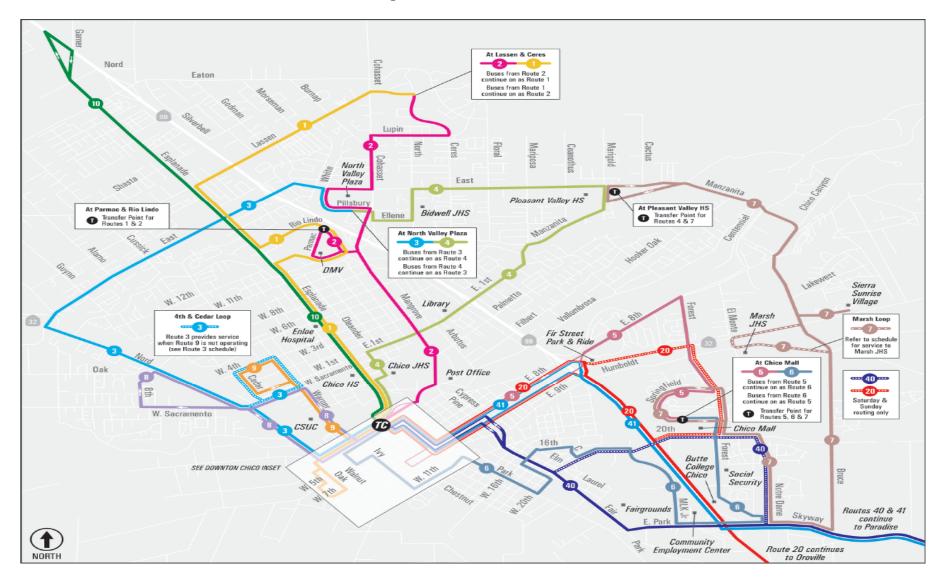


Figure 2-2, B-Line - Chico

Figure 2-3, B-Line -- Oroville

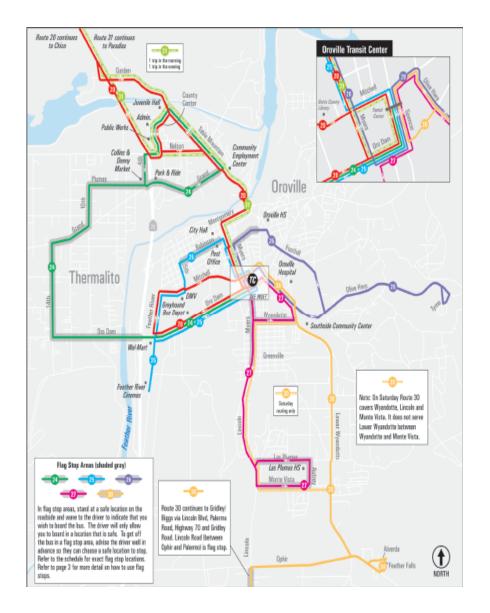


Figure 2-4, B-Line - Paradise

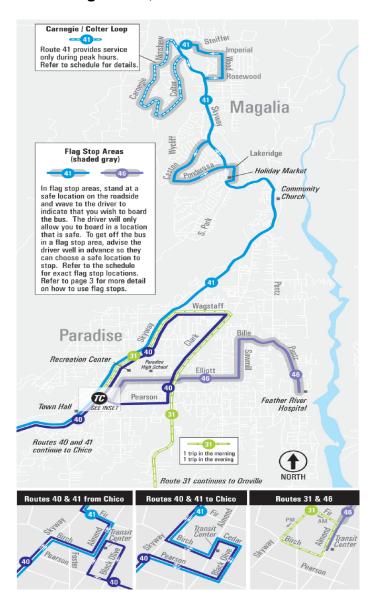
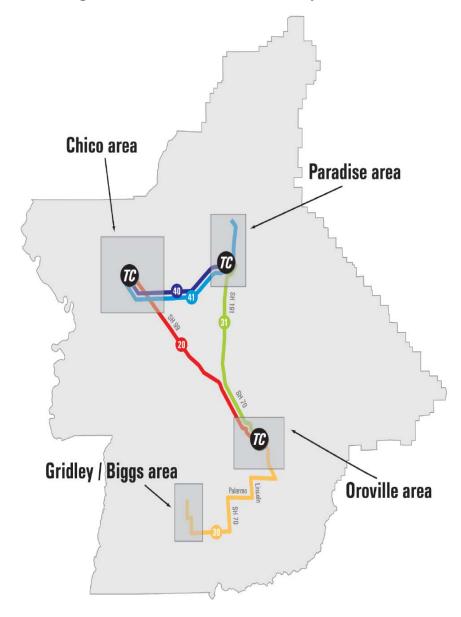




Figure 2-6, B-Line -- Butte County as a Whole



2.3 GRIDLEY/BIGGS TRANSPORTATION SERVICE

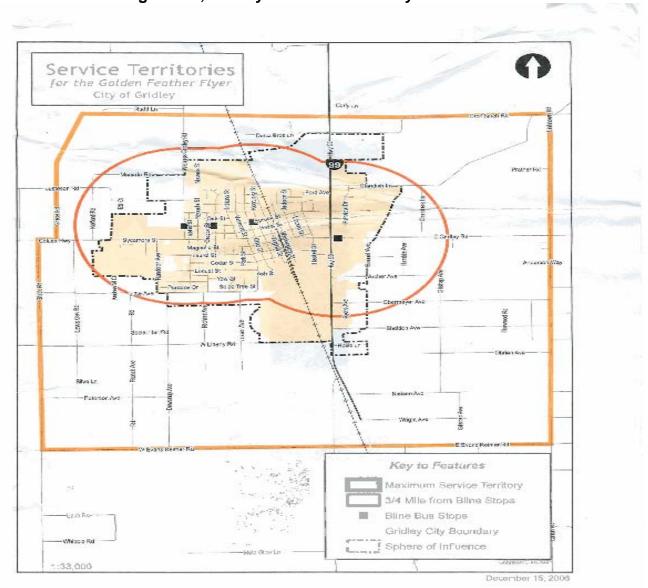


Figure 2-7, Gridley Golden Feather Flyer

In the Gridley/ Biggs area, persons needing dial-a-ride may use the Gridley Golden Feather Flyer, with tickets pre-purchased at City Hall (530-370-1945). The Feather Flyer is available to persons age 62 and older or those with proof of a disability, provided in advance to the City Hall office. Figure 2-7 identifies the service areas for which complementary paratransit is provided, within ¾ of a mile of the B-Line stops, the smaller oval above. The maximum service area of the Flyer is encompassed by the square identified above, between Oro Ranch Road to the north and Evans Road and to the south and from Block Road to a County road just east of Gilstrap Avenue.

B-Line administrators are exploring with Gridley officials the possibility of providing ADA complementary paratransit services beyond the existing 3/4 mile envelope but details of the service and appropriate funding have not yet been identified.

2.4 Roles and Responsibilities of BCAG in Public Transit Administration

The Joint Powers Authority Agreement of BCAG amendment in July 2005 included the operation of B-Line and had the intended effect of incorporating transit operations under the Regional Transportation Planning Agency.

The RTPA and B-Line have distinct roles and responsibilities. As the RTPA, BCAG is responsible for preparing all state and federally required transportation and programming documents necessary for securing funding for the county and cites. As the RTPA, BCAG is also responsible for the administration and oversight of the Transportation Development Act (TDA). BCAG is responsible for allocating TDA Local Transportation Funds (LTF) and State Transit Assistance (STA) funds. It also staffs the SSTAC and is responsible for facilitating coordination of public transportation and human service coordination.

In its role as the operator of B-Line, BCAG is responsible for the delivery of effective and efficient public transportation in Butte County.

2.5 SELECTIVE OTHER TRANSPORTATION RESOURCES IN BUTTE COUNTY

In addition to an extensive array of public transportation services, Butte County is fortunate is to have a good mix of human service agency transportation providers. The three largest human service agency transportation providers are described below:

Merit Medi-Trans is a for-profit company that transports mobility impaired, low-income individuals to medical appointment with Butte County and beyond. They serve a client base of approximately 2,500, and serve an average of 75-100 clients per day. Merit Medi-Trans has a fleet of 34 vehicles with a capacity of 9 or fewer passengers and employs approximately 35 drivers and 1.5 mechanics. They utilize about 27 vehicles on daily basis and have a call center with dispatching software. Funding comes from the State Department of Health Services (Medi-Cal), client fees, and passenger fares. Merit Medi-Trans is pursuing private non-profit status.

The Work Training Center Inc., (WTC) is a private, non-profit agency providing various services to adults with disabilities in Butte County. WTC serves a client base of 680, and provides transportation to 325 passengers on a daily basis. They have a fleet of 28 vehicles and utilize 21 vehicles on an average day. WTC employs 28 drivers and 4 mechanics. WTC receives funding from the Regional Center (Dept of Development Services), and FTA 5310 for vehicles.

The Feather River Tribal Health Clinic is a tribal organization serving the needs of Native Americans. It serves a client base of 5,440 individuals with an average daily attendance at its Oroville facility of 180. They transportation approximately 12 passengers a day in four vehicles, and have nine vehicles total available for transportation. Transportation is only available to Native Americans. The vehicles are Federal GSA vehicles and are also utilized by staff for home visits.

2.6 SUMMARY COMMENTS

The consolidation of public transportation services in Butte County that started in 1999 and was completed in 2005 with the launch of B-Line services has been quite successful in streamlining public transportation services. There is now a clear system of service delivery with four distinct service modes:

- Urban Fixed Route
- Urban Paratransit
- Rural Fixed Route
- Rural Paratransit

In addition, there is a small, locally-operated transportation service within Gridley/ Biggs available to seniors and persons with disabilities and providing defined ADA complementary paratransit service responsibilities which may be somewhat expanded if resources can be identified.

According to an August 2007 Performance Audit of the B-Line service, conducted by Majic Consulting Group, on behalf of BCAG, "The consolidation has resulted in a number of positive benefits:

- Reduced administrative costs
- More efficient vehicle and personnel utilization
- Improved customer service

According to the performance audit, however, "performance indicators for service efficiency, cost effectiveness, and service effectiveness for the consolidated services are unfavorable compared to prior years, which may be attributed to initial start-up issues related to the consolidation."

While significant effort has been put into public transportation consolidation and coordination, there is significant opportunity for improved coordination with human service agencies. There is currently no institutional mechanism in place for human service agencies to coordinate. One key stakeholder summarized the current situation very succinctly: "There is not any system for working with other agencies."

3.0 ASSESSMENT OF NEEDS — DEMAND ESTIMATION

3.1 Introduction

Planning for increased coordination among public transit and human services transportation providers in Butte County is informed by understanding and measuring the specific populations requiring use of public transit—fixed-route, demand responsive programs or other specialized transportation services. These individuals are best characterized by the target populations of the three SAFETEA-LU programs:

§ 5310 (Capital Assistance for Seniors and Disabled Individuals)

§ 5316 (Job Access and Reverse Commute)

§ 5317 (New Freedom).

The populations served by these programs are seniors, persons with disabilities, and persons of low-income including persons on welfare.

This chapter quantifies Butte County residents within these population groups and provides a rationale for quantifying the public transit or specialized transportation trips these individuals may need. Although children are among those using public transportation services, for purposes of developing this demand estimate, only adult population data is considered given the summarized census data characteristics readily available for persons age 16 and above.

3.2 TARGET POPULATIONS

As noted, the Federal Transit Administration has identified three target populations under the SAFETEA-LU programs, Sections 5316, 5317 and 5310. These are persons of low-income, persons with disabilities and elderly individuals. Each group is discussed following in relation to 2000 Census information.

Quantifying the Target Population

Table 3-1 identifies the numbers of these individuals in Butte County from among the 203,171 residents, drawn from the Butte County 2000 Census population figures. As noted above, only the adult population is considered in Table 3-1, defined here as persons age 16 and older except for identification of persons below the poverty line where adults are ages 18 to 64). This table utilizes the 2000 Census figures as the population base for subsequent projections of these target groups.

Also presented in Table 3-1 is 2007 population information, based upon a countywide population estimated by the California Department of Finance. This shows a seven percent increase, representing a projected 218,000 persons. The Department of Finance estimates the 2010 county population to be 230,116, a 13 percent increase over the 2000 census base and growing to 334,000 by 2030, a 65 percent increase above this 2000 census base. The implications of Butte County's significant population growth for these target groups are discussed later in this chapter.

Table 3-1

TARGET POPULATIONS for JARC, Nev	v Freedoms, and	Section 5310) P	rograms	
2000 Census Attribute, Summary File 3	Butte County - People by Category Census 2000	% of Total Butte County Population		2007 Butte County Population Estimates [5]	% of Total Butte County Population Estimate
Total Population [1]	203,171	100.0%		218,069	100%
ADUILTO 40 C4	420 254	63.2%		427 766	00.00/
ADULTS 16-64 [2]	128,354	03.2 /0		137,766	63.2%
Disability (non-institutionalized) Ages 16-64 [4] with a "go outside home" disability	7,572	3.7%		8,127	3.7%
Percentage of Adults 16-64 with a "go outside home" disability	5.9%			5.9%	
Low-income (ages 18-64) (Below poverty level as defined by the Census Bureau) [3]	25,315	12.5%		27,171	12.5%
Percentage of Low-Income for Adults (18-64)	19.7%			19.7%	
SENIORS [2]	31,966	15.7%		34,310	15.7%
Seniors, ages 65-74, with % of all seniors	15,067			16,172	
	47.1%			47.1%	
Seniors, ages 75-84, with % of all seniors	12,515 39.2%			13,433	
Conjure agas 951 with 0/ of all conjure	4,384			39.2% 4,705	
Seniors, ages 85+, with % of all seniors	4,304 13.7%			13.7%	
Low Income Seniors (Below poverty level as defined by the Census Bureau) [3]	2,286	1.1%		2,454	1.1%
Percentage of Seniors 65+ below poverty level	7.2%			7.2%	
Disability (non-institutionalized) Ages 65+ with a "go outside home disability" [4]	5,546	2.7%		5,953	2.7%
Percentage of Seniors 65+ with a "go outside home" disability	17.3%			17.3%	
TOTAL TARGET POPULATION RANGES:					
Low End: Adults with disabilities (16-64) and only seniors 75+	24,471	12.0%		26,265	12.0%
Mid Range: Adults with disabilities (16-64) and all seniors 65+	39,538	19.5%		42,437	19.5%
High End: Low income adults (16-64) and all seniors 65+	57,281	28.2%		61,481	28.2%

^[1] Census 2000 Summary File 3, Total Population.

^[2] Extrapolated from Census 2000 Summary File 3, Sex by Age.

^[3] Extrapolated from Census 2000 Summary File 3, Poverty Status in 1999 by age.
[4] Extrapolated from Census 2000 Summary File 3, Age by types of disability for the civilian non-institutionalized population 5 years & over with disabilities. Sub-Area data extrapolated from Census 2000 Geographic County

1. Poverty Levels For the 2000 Census, the Butte County total population was established at over 203,000 persons. Of this total, 12.5 percent, or 25,315 adults, were identified as at or below the poverty levels as defined by the U.S. Census. Seniors aged 65 years and above, that are at or above the poverty level account for 1.5 percent of the total population or 2,286 persons. Definitions of poverty by the U.S. Census are made based on a set of monetary income thresholds that vary by family size and composition. When a family's income is less than the threshold for a family of that size and type, then that family and every individual in it is considered to be in poverty. These thresholds do not vary across the country but reflect standardized definitions of poverty.

The Butte County proportion of 12.5 percent of persons at poverty levels is slightly below both the statewide mean and the national mean of 13 percent. ³

- 2. Disability Characteristics The second population group of interest is persons with disabilities. A disability is characterized by 2000 Census as persons with difficulty performing selective activities of daily living. While the 2000 Census has a number of variables related to disability status, this analysis uses the "go outside the home" disability, with individuals self-reporting that they have a disability that impacts mobility outside the home. The U.S. Census Bureau classification of this disability includes those who because of a physical, mental or emotional condition lasting 6 months or more, have difficulty going outside the home alone to shop or to visit a doctor's office. For Butte County, this reflects:
 - ➤ 3.7 percent of the total population, or 7,572 persons, were adults with disabilities, ages 16 to 64;
 - ➤ 2.7 percent of the total population were persons 65 and older with disabilities, a total of 5,546 senior residents with disabilities who comprise 17.3 percent of the senior population.

Persons with disabilities and persons of low-income represent overlap to some extent. The Census Bureau documents that the presence of a disability is associated with lower levels of income. In national studies, the Census Bureau has reported that 13.3 percent of persons with no disability had incomes less than half the median income, 30.4 percent of those with any disability were low-income, and 42.2 percent of those with a severe disability were low-income.⁴

- 3. Senior Characteristics The senior population has numerous characteristics of concern to any discussion of transportation needs. Individuals over age 65 in the 2000 census numbered 31,966 or 15.7 percent of the Butte County total population. This is higher than the state as a whole, with 12 percent of California's population age 65 and older in 2000.
 - Low-income seniors, defined by income in relation to household size, are just above one percent of the total county population (1.1 percent) and represent 7.2 percent of the senior population, age 65 and older.
 - Seniors with disabilities were also identified in the 2000 census, a self-reported category. Seventeen percent of Butte County seniors, or 5,546 persons, characterized themselves as disabled.

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² U.S. Bureau of the Census, *Income, Earnings and Poverty Data from the 2005 American Community Survey.* B.H Webster, A. Bishaw. Washington, DC, August 2006, p. 20.

³ Income, Earnings and Poverty Data from the 2005 American Community Survey, p. 22.

⁴ Current Population Reports, Series P23-194, Population Profile of the United States, 1997. p. 32.

Oldest seniors, those age 75 and older, and particularly age 85 and older are increasingly vulnerable individuals. Advanced age is associated with increased rates of disability.⁵ Over 12,500 Butte County seniors are between the ages of 75 and 84, representing 39 percent of the total county senior population. Another 4,300 persons are 85 and older, representing 13.7 percent of the county senior population. More than 11 percent of the senior population in the state of California as a whole are 85 and older, a percentage almost four points below that for Butte County seniors age 85 and older.

The physiology of aging identifies age 75 as the age point at which the natural effects of the aging processes are increasingly likely to impinge upon lifestyle, health status and general well-being. This is not to say that every 75 year-old is going to have difficulty getting around. However, it does indicate that statistically, there is increased incidence of disease and risk of falling that result in mobility impairments. The consequences of stroke and heart disease, as well as various chronic conditions or degenerative processes can also limit mobility.

For persons age 85 and older, these rates of higher incidence of chronic disease and impairment increase more dramatically. Although not true of every individual 85 or older, this population is highly likely to have increased special needs and requirements when it comes to moving about their local community. This group is also the subset of the senior population that is expected to grow at the fastest rate with the aging of the baby boomers.

Target Population Ranges

As presented in Table 3-1, and supported by the discussion above, it is useful to look at ranges of persons in the defined and overlapping target population, a group ranging between 24,400 and 57,300 persons of the 2000 Census population base. As noted previously, ranges are used because some overlap exists among these demographic categories. For example, an individual may be both disabled and of low-income, or a senior may also be disabled. Three ranges of target populations are proposed to suggest for Butte County the potential spread of individuals of concern for this Plan. Again these ranges use the 2000 census data as a base:

- **Low End**: Adults with disabilities (ages 16 -64) and only seniors 75+ = **24,471 persons**
- ▶ Mid Range: Adults with disabilities (ages 16-64) and all seniors 65+ = 39,538 persons
- ➤ High End: Low-income adults (ages 16-64) and all seniors 65+ = 57,281 persons

3.3 Mapping the Target Populations

Maps follow depicting the distribution of these individuals throughout the county. For each of the 2000 census variables discussed, the county's census tracts are coded by quartiles, showing as darkest, the highest quartile where the greatest density of individuals within the specific group reside. The first map shows Butte County's general population density distribution. As this county is characterized by large rural and agricultural areas with very low densities, it is important to recognize that some high quartile census block groups presented on

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⁵ U.S. Bureau of the Census, *Current Population Reports, Series P23-194, Population Profile of the United States, 1997.* Washington DC, 1998, p. 50-51.

⁶ Spirduso, W. Physical Dimensions of Aging, Human Kinetics, 1995, p. 28.

the maps following actually have very few residents. It simply may be that a large proportion of those few residents fall into one or more the census variables of interest.

- <u>1. Countywide distribution of the general population</u> Figure 3-1 shows Butte County's total population density by US Census block group. The total population density is illustrated using a range of 565 to 3,015 persons per census block group.
- 2. Low-Income Individuals Figure 3-2 shows Butte County's percentage of people in the 18 to 64 age group who are "low-income". Information was compiled by US Census block group and ranges from a low of 1.2% of this population to a high of 79.8 percent. This was created by taking the total low-income population aged 18-64 and dividing this by the total population aged 18 to 64. Data was classified using a natural breaks (Jenks) classification.
- 3. Disability population Figure 3-3 maps the Butte County percentage of people who are in the 16-64 age group and have a "go outside the home disability". Information was compiled by US Census block group and range from a low of 0.4% of this population to a high of 26.5 percent. Created by taking the total population aged 16-64 with a "go outside the home disability" and dividing this by the total population aged 16-64. Data was classified using a natural breaks (Jenks) classification.
- 4. Elderly individuals Figure 3-4 is a map of Butte County showing the percentage of people who are 65 years of age and over. Information was compiled by US Census block group and ranges from a low of 0.0% of this population to a high of 52.6 percent of all residents in that block group. These percentages were created by taking the total population aged 65+ and dividing this by the total population. Data was classified using a natural breaks (Jenks) classification.
- <u>5. Elderly individuals who are low-income</u> Figure 3-5 maps Butte County population age 54 and over who are "low-income". Information was compiled by US Census block group and ranges from a low of 0.0% of this population to a high of 67.9 percent of residents in that block group. These were created by taking the total low-income population aged 65+ and dividing this by the total population aged 65+. Data was classified using a natural breaks (Jenks) classification.
- **6. Elderly individuals who report a disability** Figure 3-6 shows a map of Butte County depicting the percentage of people in the 65 and over age group who have a "go outside the home disability". Information was compiled by US Census block group and ranges from a low of 2.9% of this population to a high of 100 percent. Created by taking the total population aged 65 and over with a "go outside the home disability" and dividing this by the total population aged 65 and over. Data was classified using a natural breaks (Jenks) classification.

Figure 3-1

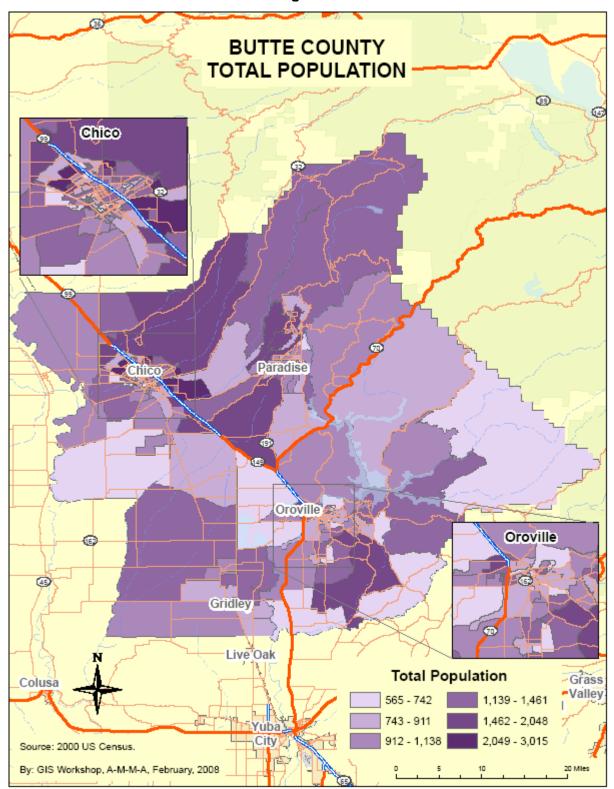


Figure 3-2

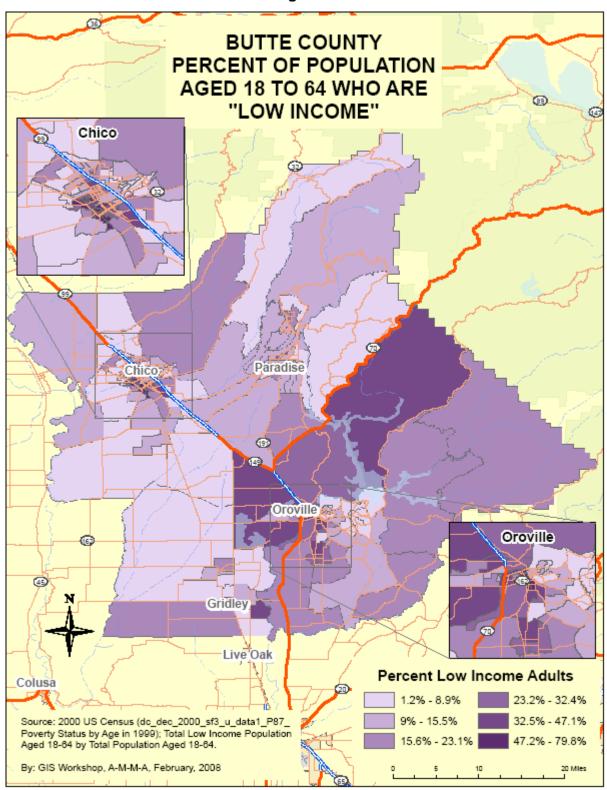


Figure 3-3

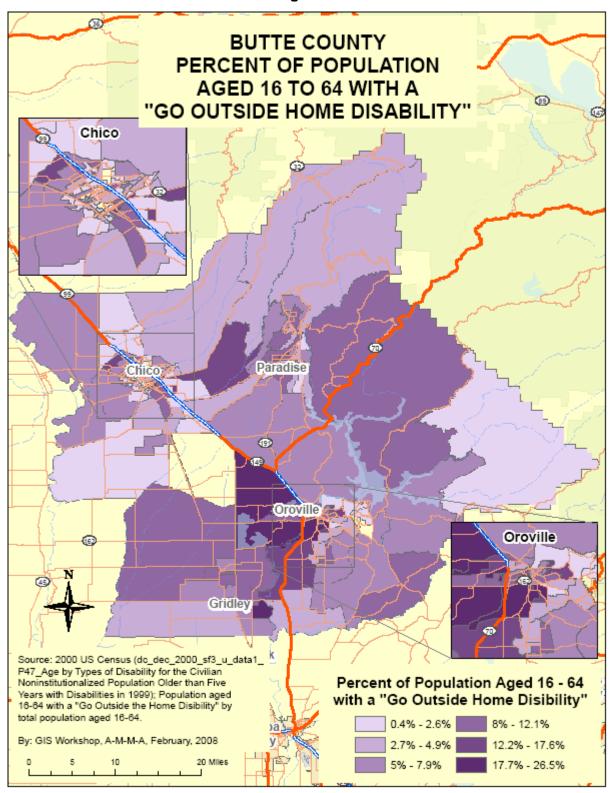


Figure 3-4

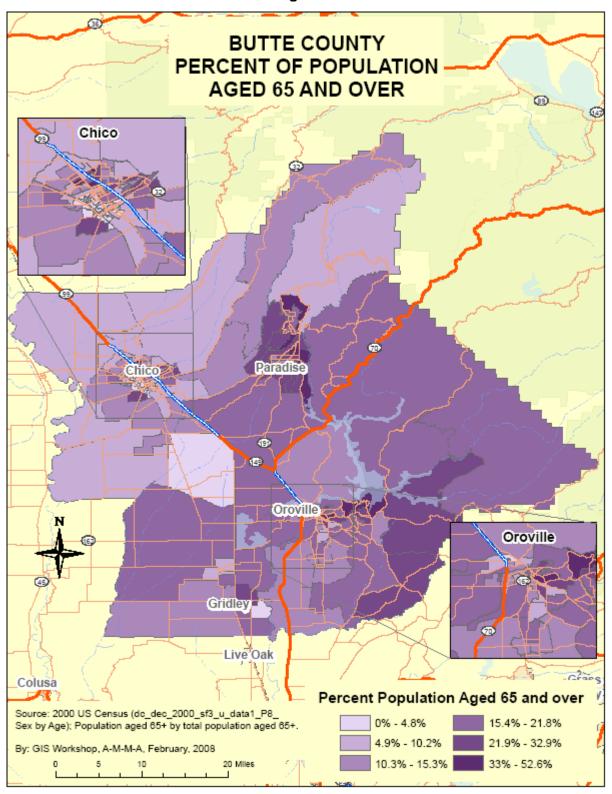


Figure 3-5

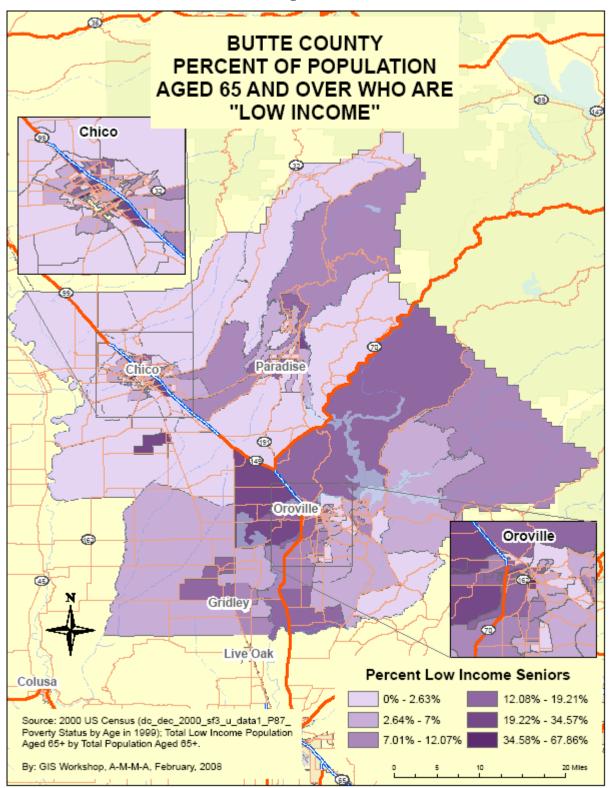
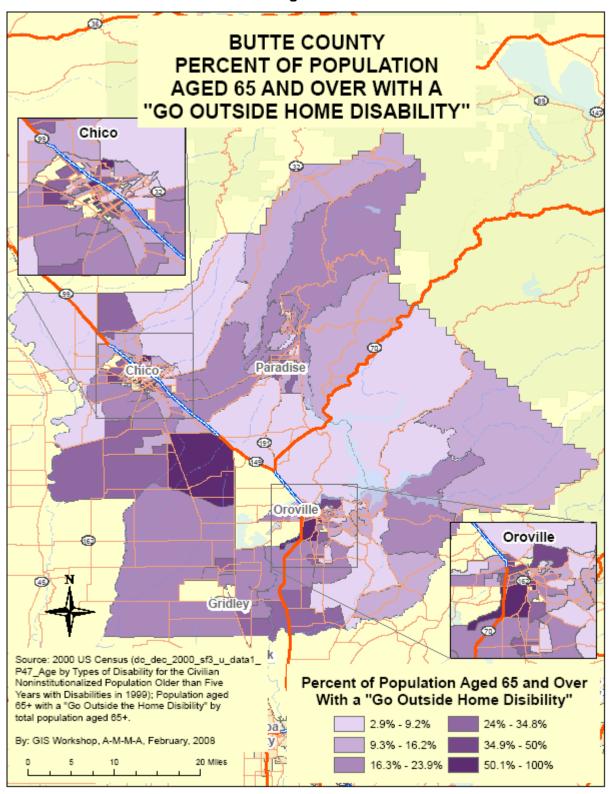


Figure 3-6



3.4 FUTURE POPULATION PROJECTIONS

Anticipating future population impacts, population projections for Butte County are presented in Table 3-2 with estimates for the years 2010, 2020, and 2030. The California Department of Finance estimates that by 2010 the county's population will be 230,000, and 280,000 by 2020. By 2030, the estimated 335,000 residents is 65 percent over Butte County's 2000 population.

Table 3-2

TARGET POPULATIONS for JARC, New Freedoms	, 5310 Progra	ms I	POPULATION P	ROJECTIONS	
			California Dept. of	Finance Population Pro County Population	jections for Total Butte
	2000 Censu	s	2010	2020	2030
Total Butte County Population	203,171		230,116	281,442	334,842
Overall County % Change Over 2000 Population			13%	39%	65%
		6 of Total Co. Pop.	% of Tota Co. Pop		% of Tota Co. Pop.
Adults with disabilities, ages 18 to 64	7,572	4%.	9,205 4%	11,258 4%	13,394 4%
Adults below the poverty level, ages 18 to 64	25,315	12%	27,614 12%	33,773 12%	40,181 12%
Seniors age 65 and older (\1), including:	31,966	15.7%	36,819 16.0%	45,594 16.2%	55,919 16.7%
oldest seniors 85+ (1% of total 2000 pop.) seniors with disabilities (2% of total 2000 pop.) low-income seniors (1% of total 2000 pop.)					
TOTAL TARGET POPULATION RANGES:					
Low End Range: Adults w/ disabilities and only seniors 75+ Mid Range: Adults w/ disabilities and all seniors 65+	24,471 12 39,538 19		n/a 46,023 20%	n/a 56,851 20%	n/a 69,312 21%
% Change Over 2000 Population High End Range: Low income adults (16-64) + all seniors 65+	n/a 57,281 2 8	8.2%	16% 64,432 28%	^{44%} 79,367 28%	75% 96,100 29%
% Change Over 2000 Population	n/a		12%	39%	68%

Notes:

\1 State of California Dept. of Finance Race/ Ethnic Population Projections with Age and Sex Detail, 2000 - 2005, Sacramento, CA., July 2007.

Table 3-2 presents projections of the target populations, based upon California Department of Finance total county population projections. These are combined with straight projections of the adult low-income population and the disability adult populations, in combination with a steadily increasing senior population. Adults with disabilities (ages 16-64) plus seniors ages 75 and older represent the low end of the ranges. Low-income adults (ages 16-64) plus all seniors represent the high end of the range and, combined, suggest target population ranges of:

- between 46,023 to 64,432 persons by 2010
- between **56,851 to 79,367 persons** by 2020
- between 69,312 to 96,100 persons by 2030

In developing these target population projections, the low-income adult population is held at a steady rate of 12 percent, anticipating no change in that group's proportion of the County's total population. The disability population may be an increasing proportion, as increases in the number of adults with disabilities are suggested by evidence in the public health literature. This may be due in part to longer life spans for those with disabilities, as well as increased survival rates for some accidents and injuries. There are also predicted increases in the rates of

disabilities among younger cohorts, possibly due to rising obesity rates. For purposes of this analysis however, given uncertain trends, the rate of growth is held constant, an estimated 4 percent of the adult population group, ages 16 to 64 inclusive of those of limited means.

With regard to seniors, modest growth in the proportion of elderly individuals is reflected here. There is some demographic evidence, at the national level, that the proportion of seniors in poverty is decreasing as the baby-boomers age. This suggests that while tomorrow's seniors will be increasing significantly in quantity, they may also be more able to offset the costs of the services they require.⁸

The raw numbers are sobering as up to 96,000 persons are identified at the high-end range, comprising the target population of persons of low-income, persons with disabilities and seniors. This growth reflects both the county's overall population increases and the increasing senior proportions within that growth.

3.5 DEMAND ESTIMATION

Anticipating quantities of trips the target population individuals will need and what proportion of these trips are unmet or undermet are other areas of inquiry. Table 3-3 presents an estimate of the potential trip demand for specialized transit trips hypothesized for these target populations, drawing upon trip making rates published in various national and regional research efforts.

Utilizing the population estimates presented in Tables 3-1 and 3-2, presented in Table 3-3 are average daily trip rates. These are defined as the number of one-way trips per day made by an individual, developed through national research, to establish a <u>total</u> number of trips these groups may be making on a typical weekday. These trip rates are annualized to establish annual trips made. Assumptions are then applied as to the proportion of trips made on transit or specialized transportation.

In Table 3-3, the target population data discussed above returns to the 2000 Census adult population estimates developed in Table 3-1. This revealed that for adults below age 65, proportions of 4 to 13 percent were persons of low-income, disabled, or may fall into both categories. This represented somewhere between 7,500 and 25,300 persons.

Seniors in various sub groups are considered, including those who are low-income (7 percent of seniors), those with disabilities (17 percent of seniors) and those over age 75 where general health conditions are more prevalent (53 percent of seniors).

Table 3-3 proposes mean trip rates for these persons, estimates the number of total trips taken by these individuals annually, and estimates the number of these trips potentially taken on public transit and the proportion of these that may require specialized transportation or additional assistance.

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⁷ <u>www.pubmed.gov</u>, website of the National Library of Medicine and the National Institutes of Health, as cited in SACOG Region Senior and Mobility Study, 2007, p. 10.

⁸ U.S. Bureau of the Census, *Current Population Reports, Series P23-194, Population Profile of the United States, 1997.* Washington DC, 1998, p. 4.

Table 3-3
Specialized Transit Trip Demand Estimation for SAFETEA-LU Target Populations (2000 Census)

	TLA-LO Target I	Column A	Column B	Column C	Column D	Column E
Butte County Target Population, 2000 Census Base Population		Mean Trip Rates Per Day \1	Estimated Annual Trips, All Trips (Trip Rate * Target Population * 255 days)	% Trip Made On Public Transit	Annual Trips Potentially on Public Transit (Annual Trips * Public Transit Rate)	Annual Trips Requiring Special Assistance @ 25% of Public Transit Trips
Adults (age 16 - 64)						
<u>Disabled population</u> at 3.7% of adult population, ages 16-64 [7,572 persons]	.4% to 12.5% of adult	3.7 \1	7,144,182		607,255	151,814
Low income population at 12.5% of adult population ages 18-64 [25,315 persons]	ne population at 12.5% of adult population (16 - 64)		23,884,703	8.5% \3, \10	2,030,200	507,550
Seniors (ages 65+)						
Seniors low-income at 7.0% of age 65+ [2,286 persons]	6% to 18% of senior	3.4 \1	1,981,962	3% \5	59,459	14,865
Seniors with disabilities at 17.3% of age 65+ [5,546 persons]	population [age 65+]	G	4,808,382	3% \5	144,251	36,063
Seniors age 75+ when mobility issues become increasingly critical, 53% of age 65+ [16,899 persons]	47 % of senior population [age 65+]	2.1 \2	9,049,415	2% \1	180,988	45,247
Butte County Target Population Ranges of Trips Required	Low end trip range: Adults with disabilities (16-64) and seniors low income or disabled (up to 36% of seniors)	Trip Making Estimate	11,952,564		751,507	187,877
mps required	Hi end trip range: Low income adults (16-64) and seniors 75+ (up to 47% of seniors)	Ranges to	32,934,117	to	2,211,188	552,797
Trips Per Capita, At High End of Ranges [2000 Census Population Base of 203,171]			162.1		10.9	2.7

Notes:

Mean trip rates (Column A in Table 3-3) are the *average number of one-way trips per day* made by an individual. Mean trip rates are drawn from several published sources.

- The longstanding source is the 2001 National Household Travel Survey (NHTS) which is routinely used as a basic data set by which to understand travel patterns of various subsets of the population. This disaggregated study is built up from a relatively small "n" but distributed around the country so that it is not geographically limited to a single region. Because extensive work has been done with this data set, and a similar 1999 study, it is the most common source for daily trip rate activity.
- ➤ U.S. DOT Bureau of Transportation Statistics publishes mean trip rates for persons age 65, for those not employed, and for those with medical conditions limiting travel.

^[1] Bureau of Transportation Statistics, 2001 National Household Travel Survey - Trip rates for 65+, Not Employed; Medical Conditions Limiting Travel

^[2] National Cooperative Highway Research Program "Estimating Impacts of the Aging Population on Transit Ridership", p. 17 (2006)

^[3] Sacramento Area Council of Governments Household Travel Survey of 1999; In Senior & Disabled Mobility Study, p. 9 (2006)

^[4] Freedom to Travel, U.S. DOT Bureau of Transportation Statistics (2002)

^[5] Transportation Research Report, TCRP Report 82: Improving Public Transit Options for Older Persons (2002) and 2001 National Household Travel Survey (6%)

- Also used is work published by the National Cooperative Highway Research Program (NCHRD) in a study entitled *Estimating Impacts of the Aging Population on Transit Ridership* (2006). Considerable research was done by the highway industry to understand the effects of the aging process and its implications for road and highway design. This particular study disaggregated the travel patterns of seniors of different ages and mobility levels and their published mean trip rate for the oldest old, defined as age 85 and older, is used here.
- ➤ Several sources were used in attributing mode share to these subgroups. The U.S. DOT Bureau of Transportation Statistics published a study *Freedom to Travel* (2002) examining the trip making behavior of various groups. It included an analysis of persons with disabilities and did identify them as high users of public transit, at rates of 25 percent and more of trips made, unlike the mode share for the general population of four percent and less.
- ➢ By contrast, the Sacramento Council of Governments conducted a 1999 disaggregated travel survey of seniors and the disabled populations and established a mode share of 8.5 percent use of transit by persons with disabilities. This is a region that is transit-friendly to persons with disabilities and conducive to using transit, so it is notable that it developed a lower transit mode share than did the DOT Freedom to Travel study. This more conservative, lower rate of use is used here.
- Finally a Transit Cooperative Research Report (TCRP), Report 82: *Improving Public Transit Options for Older Persons*" (2002) identified a three percent public transit utilization rate by seniors in urbanized areas. This was half the mode share suggested by the 2001 *National Household Travel Survey* but this lower rate of use is used in Table 3-3 to help ensure a conservative, low-end estimate.

Table 3-3 uses these sources to establish the daily "mean" trip rate per person in each subgroup (Column A). This subgroup rate is multiplied by target population group figure, times 255 days, to establish a mean weekday travel figure for the year (Column B). For the subgroups identified this represents a range of 11.9 million to 33 million trips a year, weekdays only trips by all modes, for all methods by which these individuals might travel.

Then the various rates of public transit use, drawn from the literature and discussed above, are applied to establish the proportions of these trips potentially using public transit (Column C). Multiplying these public transit rates times the annual trips taken establishes the range of public transit trips, suggesting that a range of between 751,500 to 2.2 million trips are needed by members of the target populations (Column D).

A further calculation is made to identify the proportion of these trips – hypothesized for this calculation as one in four trips (25 percent) -- where some kind of special intervention, additional information or assistance, or particular requirement may be needed (Column E). For Butte County as a whole, this is estimated at 188,000 and up to 553,000 passenger trips, given the 2000 census population base. This hypothesis of one in four trips is built up from the consultant team experience and survey data as to the level of trips that might actually present for services.

A per capita indicator for these numbers is calculated, suggesting that 2.7 trips per capita will reflect the high end of the range, at 560,000 passenger trips. As the proportion of persons requiring these specialized trips grows, the relative need for increased numbers of these trips will grow also.

3.6 TRIPS CURRENTLY PROVIDED

To assess this demand estimation for the target populations within Butte County, it is necessary to understand how this compares with the level of trips currently provided. Table 3-4 presents these trips, both public transit and specialized transit trips provided for FY 2006/07, the year for which the most complete data is available.

- Public fixed-route transit reports over 1.2 million trips, 74 percent of the total trips reported on Table 3-4. These trips were provided by B-Line
- Public demand response programs provided were 112,420 trips or 7 percent of the total trips reported. These trips were provided by B-Line
- The stakeholder survey returned responses of 281,364 trips provided that are not otherwise accounted for in the above numbers, considering just human services trips reported by 15 agencies. The school districts and commercial providers are excluded from this number so as not to double count. These trips are fairly moderate in number, representing 19 percent of the total trips reported. Clearly the human service agencies are providing a significant numbers of trips, even within this modest sample of only 15 agencies reporting trip information

Presented at the bottom of Table 3-4 are totals and trips per capita for all trips and for specialized transit trips. These reflect the varying levels of resources currently available within Butte County as a whole.

Table 3-4
FY 07-08 Public Transit and Other Specialized Transit Trips Provided

FY 07/08 Public Transit and Other Specialized Transit Trips Provi	ucu	
California State Dept. of Finance 2007 Population for Butte County [1] 218,069	Trips	% of All Trips
Dublic Due Fixed Deute m	4 000 000	
Public Bus, Fixed Route [2]	1,236,000	76%
B-Line Fixed Route 1,118,965		
Trips per Capita for 2007 Total Population	5.7	
Public Demand Responsive [2]	111,600	7%
•	111,000	17
B-Line Paratransit 112,420		
Trips per Capita for 2007 Total Population	0.5	
Stakeholder Survey with Human Service Agency Trips Reported [3]	281,364	17.3%
15 agencies reporting (excludes school districts and commercial providers) 281,364		
Trips per Capita for 2007 Total Population	1.3	
ALL TRIPS: Including Public Transit, and stakeholder survey human service agency trips	1,628,964	100%
Trips per Capita for 2007 Total Population	7.5	
All Specialized Trips: Including public demand response and stakeholder survey	392,964	24.1%
16 agencies reporting (excludes school districts and commercial providers)		
Trips per Capita for 2007 Total Population	1.8	

Notes:

Contrasting the Demand Estimate with Trips Provided

Trips by the different service provision modes were noted on Table 3-4, accounting for more than 1.6 million total trips provided during FY 2007/08. The demand estimate presented previously in Table 3-3 suggests demand levels of 188,000 to 552,000 trips are needed by the SAFETEA-LU target populations, using the 2000 Census population as a base from which to estimate this demand.

The trips provided total of 1.6 million trips, represents 7.5 trips per Butte County resident per year. This is calculated using 2007 California Department of Finance population estimates for the County's total population. This 7.5 trips per capita measure is well above the 2.7 trips per capita estimate of need developed in Table 3-4 suggesting that certain levels of demand are in fact being met.

^[1] State of California, Department of Finance, Race/Ethnic Population with Age and Sex Detail, 2000-2050. Sacramento, CA. July '07 [2] B-Line - Veolia Statistics Summary FY 07/08

^{[3] 2007} Butte County Public Transit-Human Services Coordination Plan by A-M-M-A * Survey trip total excludes public transit, school districts, and commercial providers.

However, looking only at specialized transit trips provided, a level of 393,000 trips or 1.8 trips per capita is slightly below a demand level of 2.7 trips per capita that was calculated against a **population base that has grown by 7.5 percent over the last seven years**. Relating *trip demand* to *trips provided* is complicated by the fact that members of the low-income population can use public fixed-route services. Any demand estimate is not looking solely at the demand responsive trip needs of a senior population or persons with disabilities as they have been in the past when the JARC target population was not considered.

Nonetheless, clearly there is a need to grow trips on two dimensions: 1. growing the volume of total trips, across all modes, given Butte County's anticipated population growth and 2. growing the type of trips provided which is suggested by the descriptions of need presented in subsequent sections of this document.

3.7 DEMAND ESTIMATION SUMMARY

This chapter presents a rationale by which to quantify the target populations, utilizing census variables and establishing a range of 24,500 persons up to 57,300 Butte County residents. These individuals represented between 12 percent and almost 28 percent of Butte County's total 2000 population of 203,171 residents. They are comprised of adults between the ages of 16 and 64 who are low-income and/or are disabled and seniors ages 65 and older.

The 2000 base-year target population proportions are projected forward, using general population estimates developed by the California Department of Finance and other assumptions about changes in the senior population and the base adult population. The projections suggest significantly increasing numbers of Butte County residents will be within the target populations:

- By 2010, up to almost 65,000 persons
- By 2020, up to almost 80,000 persons
- By 2030, up to almost 97,000 persons.

Trip demand is also considered for the target population. Using a rationale for *mean trips per day* and estimating the proportion of those trips that might present for public transit, an estimate was developed for public transit demand. This represented a range of 752,000 trips to 2.2 million trips. This is a conservative trip demand estimate for weekday trips only, exclusive of holidays. Of these, it is hypothesized that one in four trips (25 percent) will require some level of specialized assistance, reflecting that portion of the trip demand appropriate to this plan. This is represented as a range of 188,000 to 553,000 annual trips for Butte County's 2000 census population. This level of demand is further characterized as 2.7 trips per capita of trips either unmet or undermet need on behalf of the target populations.

The County's FY 2007/08 trips totaled more than 1.6 million across all service provision modes, including public fixed route and demand responsive service <u>and</u> the inventory survey response from human service agencies. A breakdown of 1.6 million trips, which can be represented as 7.5 trips per capita, shows the demand response trips totaled almost 393,000 trips and account for 1.8 trips per capita. The current demand response level of 1.8 trips per capita is below the 2.7 trips per capita indicator of needed trips.

This planning process documents unmet transit needs of a variety of types and characteristics suggesting the demand estimate will reflect latent demand, *trips not currently served*. Further as the years forward from the 2000 census-based population grow, the demand for specialized transit trips will also grow with the County's significantly increasing population. The goal

suggested then is to provide high quality transit and targeted, specialized services that can meet increasing demand.

Subsequent sections of this document reveal need in a variety of ways, by trip type, by geographic area and time of day and by levels of service required, suggesting that there does exist latent demand that is not yet addressed by the trips currently provided. Additionally, riders eligible for ADA services will increase as population grows and the baby boomer generation increasingly enters the seniors years where disabilities increase and additional specialized transportation trips are needed.

4.0 ASSESSMENT OF NEEDS – STAKEHOLDER SURVEY FINDINGS

4.1 Introduction

This chapter presents the stakeholder survey which was conducted as one strategy by which to bring new players into the transportation-planning environment and to begin to quantify needs and resources that might suggest coordination opportunities. The discussion focuses primarily on survey responses from public transit and human service agencies.

4.2 STAKEHOLDER SURVEY APPROACH

The stakeholder survey was designed to bring quantitative descriptions to the assessment process, both about existing public transportation services and about human service resources and needs expressed by both groups. The mail-back survey processes and findings are described here.

<u>Constructing a Mailing List</u> Considerable effort was made to construct a master database that would reflect the breadth of human services and public transit organizations in Butte County. Listings were compiled from the California Highway Patrol (CHP) terminal inspection reports that reflects those transportation operators that the CHP inspects annually for safety and compliance with California code. There were 65 current records for the 2006 year in the CHP terminal yard inspection listing. Finally, some Internet searching was done to check lists of senior centers, adult day health care centers, and major social service agencies among others.

An initial database of 400 records was constructed through these processes. Deletions of duplicate records and consolidation of other records where two contacts existed were necessary before a mailing could be conducted. The list was further reduced by bad address and returned mail, and revised by new address information for a final database count of 302 agencies.

<u>Designing the Survey</u> The survey tool itself was modified to reflect Butte County; it was derived from earlier versions used in three Southern California counties: Los Angeles, San Luis Obispo and Riverside Counties. The survey was designed around two primary objectives. First, it was intended to be easy-to-answer, short with no more than two-pages, and with as many check-box and closed-ended responses as possible. Secondly, it was applicable both to agencies who do not provide transportation and to those which do provide transportation. The rationale for this is that both groups have some understanding of unmet transportation needs, albeit from different perspectives.⁹ One survey page asked questions about agency characteristics and transportation needs; the second page asked about the agency's transportation function.

⁹ The final version of the survey included 23 questions, which in addition to contact information asked four agency characteristic questions, four questions on needs and coordination issues, and 15 questions about the transportation services provided. Among these were three open-ended questions, with most questions providing check-box options for response.

<u>Constructing the Database</u> A relational database was built to serve the inventory, constructed in Microsoft Access from the original mailing list data set. The database consists of three primary tables and several supporting tables.

- Table Agencies agency name and address, source(s) of agency record
- Table **Survey** inventory data
- Table *Contacts* contact information on the individuals participating in this locally developed planning process

The "contacts" table was maintained through the project. Finding the "right" people within agencies remains a priority to promoting coordination and therefore is a critical part of this plan. This database will be provided to BCAG at the end of the project for ongoing use.

4.3 STAKEHOLDER SURVEY FINDINGS

The finalized survey, included as Appendix A, was mailed out to stakeholder agencies in early February 2008. A cover letter from the Butte County Association of Governments explained the survey's intent. A return envelope was included, to facilitate return mail of the survey although the survey could also be returned by fax or email. When initial return rates were low, a second mailing was distributed to increase agency response.

As of this writing, 69 surveys were received, representing a 23 percent return rate on the current database of 302 agency records. Included as Appendix B are the summary data reports for the survey questions, presented and discussed in this chapter.

4.3.1 Characteristics of Responding Agencies

This section describes legal characteristics, caseload sizes and client populations served for the responding agencies. Figure 4-1 shows that the largest group of responding agencies were private, non-profit agencies (31 agencies - 45 percent) followed closely by public agencies (30 agencies - 43 percent). Private, for-profit, faith based, and tribal organizations were the least frequent with a combined total of just eight agencies. An alphabetical listing of responding agencies by legal type is presented in Table 4-1 following Figure 4-1.

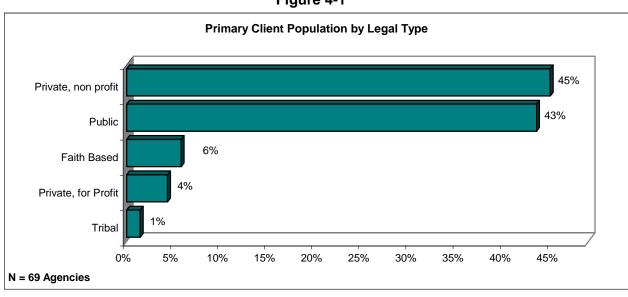


Figure 4-1

Table 4-1, Stakeholder Survey Respondents by Legal and Service Types (as of 05/23/08)

Oravilla Church of the Nazarana	Foith board	Human Cany New Little
Oroville Church of the Nazarene Paradise Alliance Church	Faith based Faith based	Human Serv - Non-hlth Human Serv - Non-hlth
Shalom Free Clinic	Faith based	Human Serv - Non-hith
The Well Ministry of Rescue	Faith based	Human Serv - Non-hith
Merit Medi-Trans	Private, for profit	Commercial Transp Prov
Better Babies Inc.	Private, for profit	Human Serv - Non-hlth
Butte College Child Development Center	Private, for profit	Human Serv - Non-hlth
American Cancer Society	Private, non-profit	Human Serv - Health
Biggs-Gridley Memorial Hospital	Private, non-profit	Human Serv - Health
Caring for Women Pregnancy Resource Center	Private, non-profit	Human Serv - Health
Del Norte Clinics Inc.	Private, non-profit	Human Serv - Health
Enloe Home Care & Hospice	Private, non-profit	Human Serv - Health
Enloe Medical Center	Private, non-profit	Human Serv - Health
Feather River Hospital - Rural Health Clinic	Private, non-profit	Human Serv - Health
Home Health Care Management	Private, non-profit	Human Serv - Health
Butte Literacy Council	Private, non-profit	Human Serv - Non-hlth
CAA of Butte County	Private, non-profit	Human Serv - Non-hlth
Chico Community Shelter - Torres	Private, non-profit	Human Serv - Non-hlth
Computers for Classrooms Inc.	Private, non-profit	Human Serv - Non-hlth
Council of The Blind	Private, non-profit	Human Serv - Non-hlth
Country Crest Retirement Community	Private, non-profit	Human Serv - Non-hlth
Experience Works	Private, non-profit	Human Serv - Non-hith
Far Northern Regional Center	Private, non-profit	Human Serv - Non-hith
Gleaners Food Distribution	Private, non-profit	Human Serv - Non-hith
Greater Oroville Family Resource Center	Private, non-profit	Human Serv - Non-hith
Handi-Riders of Northern CA Jesus Center - Sabbath House	Private, non-profit Private, non-profit	Human Serv - Non-hlth Human Serv - Non-hlth
Passages - Adult Resource Center	Private, non-profit	Human Serv - Non-hith
Passages - Care Management Services	Private, non-profit	Human Serv - Non-hith
Passages - Information Services	Private, non-profit	Human Serv - Non-hith
Peg Taylor Center	Private, non-profit	Human Serv - Non-hlth
Skyway House	Private, non-profit	Human Serv - Non-hlth
Special Olympics of Butte County	Private, non-profit	Human Serv - Non-hlth
The Hope Center	Private, non-profit	Human Serv - Non-hlth
Valley Oak Children's Services	Private, non-profit	Human Serv - Non-hlth
Vectors	Private, non-profit	Human Serv - Non-hlth
Work Training Center	Private, non-profit	Human Serv - Non-hlth
YMCA of Oroville	Private, non-profit	Human Serv - Non-hlth
Butte Regional Transit - B-Line - Fixed Route	Public agency	Public Transit
Butte Regional Transit - B-Line - Paratransit	Public agency	Public Transit
Butte County Behavioral Health - Chico (Adult Outpatient Program)	Public agency	Human Serv - Health
Butte County Behavioral Health - Chico (Mental Health/Drug and Alcohol)	Public agency	Human Serv - Health
Butte County Behavioral Health - Chico Mental Health	Public agency	Human Serv - Health
Butte County Behavioral Health - Crisis Team	Public agency	Human Serv - Health
Butte County Behavioral Health - Oroville	Public agency	Human Serv - Health
Butte County Behavioral Health - Paradise Counseling Center	Public agency	Human Serv - Health
Butte County Behavioral Health - Psychiatric Health	Public agency	Human Serv - Health
Oroville Hospital	Public agency	Human Serv - Health
Paradise Treatment Center Public Health Dept Child Health & Disability Provention	Public agency	Human Serv - Health
Public Health Dept Child Health & Disability Prevention	Public agency	Human Serv - Health
Butte County Childrens Services	Public agency	Human Serv - Non-hlth
Butte County IHSS Public Authority	Public agency	Human Serv - Non-hlth
Butte County WIC	Public agency	Human Serv - Non-hlth
California Employment and Development Department	Public agency	Human Serv - Non-hlth
CDSS - State of California Adoption Services	Public agency	Human Serv - Non-hith
Chico Area Recreation and Park District	Public agency	Human Serv - Non-hith
DESS - Adult Protective Services - Table Mountain DESS - Childrens Services Carmichael	Public agency	Human Serv - Non-hith
IDEGG - CHIIGIERS GERVICES CARRICHAEL	Public agency	Human Serv - Non-hlth Human Serv - Non-hlth
DESS - Oroville - Mira Loma	Public agency	
DESS - Oroville - Mira Loma	Public agency	
Legal Services of Northern California	Public agency	Human Serv - Non-hlth
Legal Services of Northern California Office Of Education - Migrant Education	Public agency Public agency	Human Serv - Non-hith Human Serv - Non-hith
Legal Services of Northern California	Public agency	Human Serv - Non-hlth
Legal Services of Northern California Office Of Education - Migrant Education Oroville Community Counseling Center	Public agency Public agency Public agency	Human Serv - Non-hith Human Serv - Non-hith Human Serv - Non-hith
Legal Services of Northern California Office Of Education - Migrant Education Oroville Community Counseling Center OUHSD - Prospect High School - Teen Parent Program Social Security Administration	Public agency Public agency Public agency Public agency Public agency Public agency	Human Serv - Non-hith Human Serv - Non-hith Human Serv - Non-hith Human Serv - Non-hith Human Serv - Non-hith
Legal Services of Northern California Office Of Education - Migrant Education Oroville Community Counseling Center OUHSD - Prospect High School - Teen Parent Program Social Security Administration Durham Unified School District	Public agency	Human Serv - Non-hith Other
Legal Services of Northern California Office Of Education - Migrant Education Oroville Community Counseling Center OUHSD - Prospect High School - Teen Parent Program Social Security Administration Durham Unified School District Feather Falls Union School District	Public agency	Human Serv - Non-hith Other Other
Legal Services of Northern California Office Of Education - Migrant Education Oroville Community Counseling Center OUHSD - Prospect High School - Teen Parent Program Social Security Administration Durham Unified School District Feather Falls Union School District Oroville Adult Education	Public agency	Human Serv - Non-hith Other Other Other
Legal Services of Northern California Office Of Education - Migrant Education Oroville Community Counseling Center OUHSD - Prospect High School - Teen Parent Program Social Security Administration Durham Unified School District Feather Falls Union School District	Public agency	Human Serv - Non-hith Other Other

<u>Agency Reported Caseloads</u> Agencies and organizations estimated the number of persons on their caseloads, the average daily attendance, and those who required specialized transportation assistance and/ or were traveling in a wheelchair (Table 4-2).

Table 4-2 2008 Stakeholder Survey, Reported Caseload and Daily Ridership

Active clients living in Butte County	All	Private, for Profit	Private, non profit	Public	Faith Based	Tribal
# agencies	69	3	31	30	4	1
Enrolled clients/consumers	167,436	2,979	103,127	51,710	4,180	5,440
Daily attendance/ridership	14,027	190	4,640	6,962	2,055	180
% of enrolled caseload	8%	6%	4%	13%	49%	3%
Clients requesting transportation trans. Assistance door to curb	7,518	110	3,697	3,629	70	12
% of enrolled caseload	4%	4%	4%	7%	2%	0%
Total on-site daily in wheelchairs	925	76	387	526	5	6
% of enrolled caseload	1%	3%	0%	1%	0%	0%

Caseload information drawn from respondents, suggests that 167,436 persons are clients of the agencies represented. If these were unduplicated individuals, this could be 77 percent of the county's approximately 218,000 residents. It is highly likely, though, that this data reflects some level of duplication, as individuals who are present in the social service system and may be using public transit may also be utilizing other public services represented among survey respondents. Of the individuals reported, respondents **reported average daily attendance of more than 14,000 persons** or eight percent of the total caseloads reported. This average daily attendance number is less likely to be duplicative and is reflective of the volume of traffic these organizations generate.

Responding *private, non-profit agencies* are seeing the greatest number of these persons, at 103,127 of the total caseload reported. However, only a very small proportion are traveling daily, representing only four percent of their reported caseload. *Public agencies* followed with 51,710 persons, with 13 percent of their clients traveling daily, at 6,962 persons. The *private for-profit agencies* reported only 2,979 of the total county caseload with six percent of their clients attending daily.

Consumers *needing transportation assistance* on a daily basis were estimated at 53 percent of the total daily caseload reported. Responding for-profit organizations report that almost six out of ten consumers they serve daily need transportation. This is not surprising as a large for-profit transportation provider is among this group. The private non-profit agencies reported 80 percent or 3,697 individuals need some form of transportation assistance on a daily basis. Public agencies report 3,629 individuals or 52 percent of their daily caseload needing transportation assistance, while the faith-based agencies and the single responding tribal organization indicate that less than four percent of individuals on their daily caseloads need transportation assistance.

Persons in *mobility devices*, predominately wheelchairs, observed arriving daily at sites were seven percent of the average daily attendance or 925 individuals traveling daily among this group. The highest incidence of mobility device use was reported by the public agencies, 526 individuals from among these.

Total caseload information by the top reporting agencies is presented in Table 4-3, reflecting a range of consumer groups, public and private agencies represented among respondents.

Table 4-3 2008 Stakeholder Survey, Responding Agencies with Largest Caseloads

Agency	Caseload
Feather River Hospital - Rural Health Clinic	60,010
DESS - Oroville/Mira Loma	20,000
Del Norte Clinics Inc.	15,000
CAA of Butte County	8,600
Passages - Adult Resource Center	7,938
Social Security Administration	6,000
Far Northern Regional Center	5,968
Feather River Tribal Health	5,440
Butte County IHSS Public Authority	4,900
Oroville Adult Education	4,202
DESS - Adult Protective Services - Table Mountain	3,235

Primary Clients Served While there is some overlap among populations served by the responding agencies, there are also differences and Figure 4-2 and Table 4-4 shows agency's primary populations. Agencies or organizations may serve more than one population group so groups can be overlapping. Low-income persons are served by 77 percent of responding agencies, followed closely by persons with behavioral disabilities and persons with physical disabilities, served by 68 and 65 percent of responding agencies respectively. In addition, 55 percent of the agencies serve the youth population, while frail seniors, persons with sensory impairments, able bodied seniors and the general public were all served by between 43 to 49 percent of responding agencies.

Clearly agencies responding to this survey are serving the target populations of the SAFETEA-LU programs that are the focus of this plan.

Primary Client Population 77% Persons of low income Persons with behavioral disabilities 66% Persons with physical disabilities 63% Youth 55% Seniors, frail 49% Persons with sensory impairments 46% Seniors, able-bodied 45% General public 43% Other 17% 0% 10% 20% 30% 40% 50% 60% 70% 80% N = 69 Agencies

Figure 4-2

Table 4-4, 2008 Stakeholder Survey,
Primary Client Groups Served By Agency Type of Responding Agencies

Primary client population agency serves	All		Private, for Profit	Private, non profit	Public	Faith Based	Tribal
# agencies	69		3	31	30	4	1
Persons of low income	53	77%	2	22	21	4	1
Youth	38	55%		14		3	1
Persons with behavioral disabilities	47	66%	1	17	21	3	1
Persons with physical disabilities	45	63%		18		4	1
Persons with sensory impairments	33	46%	1	13	12	3	1
 Seniors, frail	35	49%	1	17	9	4	1
Seniors, able-bodied	32	45%	1	15	8	4	1
General public	30	43%	0	11	12	4	1

Among agency types, the *private for-profit agencies* were most likely serving persons of low-income. The *private non-profit respondents* report the largest numbers of agencies serving persons of low-income, as well as serving a high proportion of persons with physical and behavioral disabilities and frail seniors. *Public agencies* are most likely to serve persons of low-income and behavioral disabilities (70 percent of responding public agencies), followed by persons with physical disabilities and the youth population. The *faith-based organizations* are mostly serving seniors, persons of low-income and persons with physical disabilities. The single responding *tribal organization* is serving all population groups.

Another way to understand the consumer base represented by these agencies is to contrast caseloads reported against the <u>primary service</u> an agency provides. Figure 4-3 shows that the predominant caseload is being carried by medical and health-related agencies (46 percent). At some distance, general public social service agencies reported 19 percent of the total consumer caseload, followed closely by senior/disabled social service agencies at 18 percent. *Tribal, low-income* and *educational* institutions and agencies reported serving three percent of the total caseload, followed closely by *faith-based* and *Youth-related* agencies at two percent. Finally, Merit Medi-Trans which is the single *commercial* transportation provider, is serving just one percent of the total caseload reported.

Primary Client Population Caseload = 167,43646% Medical/Health General Public, Social 19% Services Seniors/Disabled, Social 18% Services 4% Education 3% Tribal 3% Low Income 2% Church 2% Youth/Child 1% Commercial 0% 10% 15% 20% 25% 30% 5% 35% 40% 45% 50% N = 69 agencies

Figure 4-3

4.3.2 <u>Transportation Needs and Issues Presented</u>

Responding agencies were asked to characterize the needs of consumers they believe to be poorly served. Specifically, they were asked "please specify the transportation needs <u>most often</u> communicated to you by your client base." Figure 4-4 shows the ranking of transportation needs reported by all responding agencies. Clearly top-ranked was *medical trip need*, with 44 agencies (64 percent) identifying this as a need communicated to them by consumers.

Second ranked as needs were:

Counseling and mental health treatments – 40 agencies (58 percent)

Training and education classes – 32 agencies (46 percent)

Shopping and multiple errand trips – 28 agencies (41 percent)

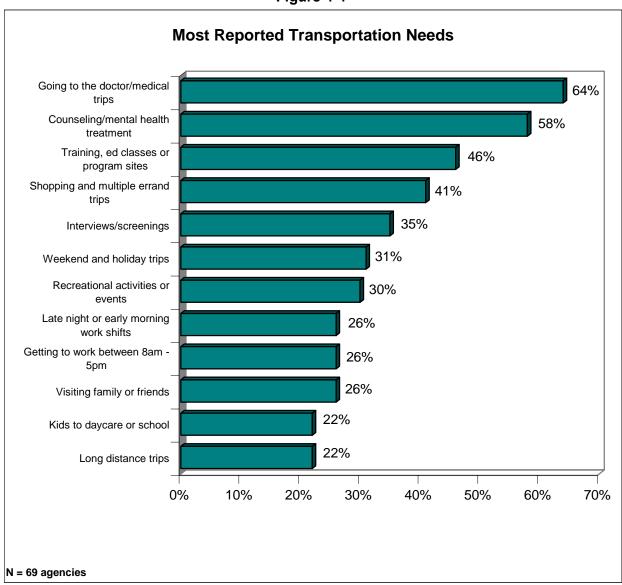
Third ranked as needed trip-types were:

Interviews and screenings – 24 agencies (35 percent)

Weekend and holiday trips – 22 agencies (31 percent)

Recreational activities or events – 21 agencies (30 percent)

Figure 4-4



Other trip types that were identified as needs, but not as frequently as the top ranked groupings, included late night and early morning work trips, getting to work between 8am-5pm, and visiting family and friends.

Figure 4-5 shows breakdowns of the trip needs for the responding transportation providers and for social service agencies that do not provide transportation. Different perceptions of need emerge. There was agreement among the groups on two high-ranked needs: medical trips and trips for counseling or mental health treatment.

For the *other transit providers, top ranked needs* were:

Medical trips (76 percent of the 41 providers)

Counseling or mental health treatment (71 percent)

Shopping and multiple errands (54 percent)

Training and education classes (49 percent)

Recreational activities (44 percent)

Weekend and holiday trips (39 percent)

For human services non-transportation providers, top ranked needs were:

Medical trips (50 percent of the 26 agencies reporting)

Counseling or mental health treatment (42 percent)

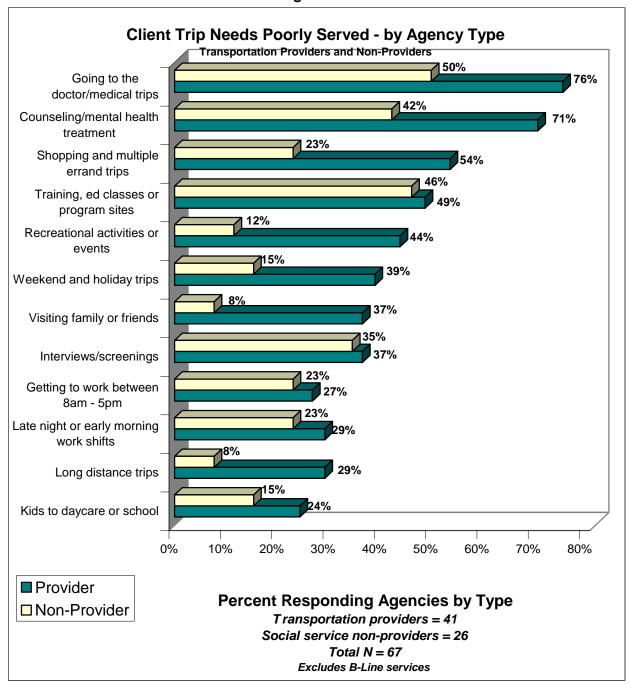
Training and education (46 percent)

Interviews or screenings (35 percent)

Work between 8 am and 5 pm (23 percent)

Shopping and multiple errands (23 percent)

Figure 4-5



Other needs noted in the open-ended response to this question included the following.

Work related:

Services and job interviews

Socialization or services related:

- Trips to the Far Northern Regional Center
- Transportation to training (Special Olympics)

Medically related:

- Trips to San Francisco for cancer patients
- Dial-A-Ride/Medi-van transportation with gurney and wheelchair.

Other:

Distance of bus stops in relation to services

Barriers Responding agencies were asked about the barriers to accessing transportation or to coordinating transportation. Table 4-5 reports these responses, showing their breadth but also revealing some key themes. Among common themes are:

- **Funding challenges** for directly operating or contracting for transportation.
- Challenges in working with public transit, its reliability, and its rules and requirements that are sometimes in conflict with the individualized needs of consumers.
- **Public transit's availability**, when it operates and when it does not can represent a mismatch with transit dependent consumers' needs.
- > **Agency restrictions,** due to structure.
- ➤ **Geography** of Butte County and the long distances required for some trips makes it difficult for the consumers requiring these.
- Information assistance is needed, both to help frail consumers navigate services and to assist those new to public transit in finding their way.
- Consumers' individualized needs make it difficult to use available public transit. These needs include assistance in booking trips, gurney transportation, and special help for dialysis patients and behavioral health consumers.

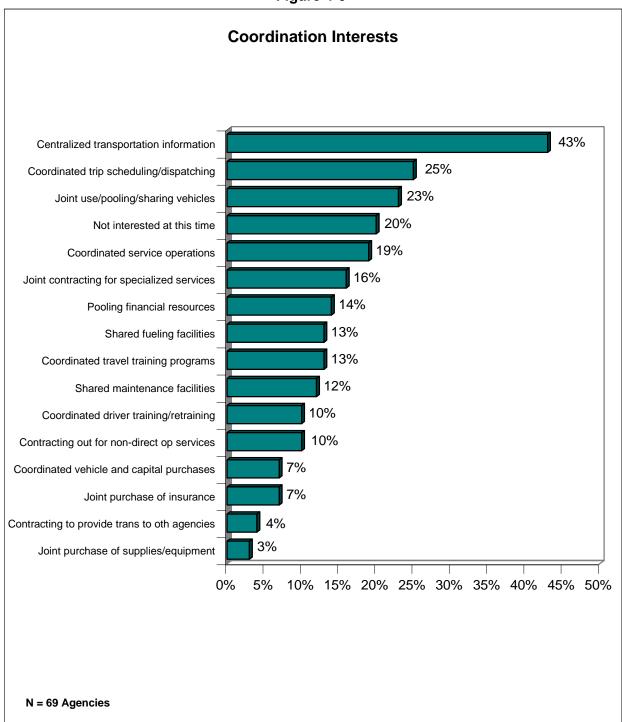
Table 4-5, 2008 Stakeholder Survey – Responses Regarding Primary Barriers to Transit Access

Barriers to Accessing and/or Coordinating Transportation	Category
Transportation is not our function.	Agency
Our members would like to be able to call the same day to get to a doctor or to the grocery store. I do all the driving for our club meetings.	Agency
We cannot provide transportation due to liability concerns.	Agency
The veteran men have many appointments to attend. We have drivers, but lack a good vehicle.	Consumer/Funding
Clients are very low-income. Buses don't seem to run frequently enough.	Consumer/Public Transit
Folks with mental health issues often have a difficulty with keeping appointments are scheduling their rides effectively.	Consumers
Uneven scheduling of patients on a day to day basis.	Consumers
Patient needs daily transportation for radiation treatment for 6 to 8 weeks. Family members can not help - need several volunteers to meet need. Often need to hire taxi.	Consumers/Funding
Location of stops - Mental health issues regarding large groups waiting - understanding bus routes - money.	Consumers/Information
There is no system for working with other agencies.	Coordination
Lack of funding to help low-income clients and lack of available transportation in rural areas of the county.	Funding/Geography
Financial and we do not have a vehicle to help out.	Funding
Financial lack of resources.	Funding
Lack of funding.	Funding
No one available for this purpose. No funding available.	Funding
Money to pay for such transportation (gas, bus tickets).	Funding
We do not have the funding to provide transportation for our program participants. We have found through informal surveys that the primary barrier for the senior community to participate in our programs is the lack of affordable transportation.	Funding
Funds - cost.	Funding
Lack of funds.	Funding
Availability of staff, vehicles, or funds.	Funding/Agency
Clients are low-income and often physically disabled which are obstacles to paying for transport or physically unable to get to/from public transportation.	Funding/Consumers
Lack of vehicles - funding constraints for families - multiple out of town trips required for intensive medical services.	Funding/Geography
High cost - occasional long distances - infrequency of the routes.	Funding/Geography/Public Transit
Budget - clients living in outlying areas.	Funding/Public Transit
We lack funding for transportation needs of the community/population that will be utilizing the resource center. Putting a bus stop at the facility allows more people to access our services.	Funding/Public Transit

Table 4-5, 2008 Stakeholder Survey – Responses Regarding Primary Barriers to Transit Access, <i>continued</i>						
Lack of transportation services in areas with high percentage of elders and low-income residents. Lack of funding to purchase transportation. Need for greater attention in County to these needs. Need for inter-community paratransit services.	Funding/Public Transit					
Money – availability - clients' disabilities.	Funding/Public Transit/Consumers					
Our special needs transportation is very expensive. We would love to have shared efforts from other agencies to share the expense.	Funding					
Remote county locations are difficult to serve yet are economically less expensive for most of our consumers housing wise.	Geography					
Frequency of fixed routes - geographic location of routes - lack of service in rural areas.	Geography					
If a child would need "specialized education" placement, or for counseling, we are so remote that no public transit is in our area.	Geography					
Clients live out of service area. Clients need special assistance to use public transit. Clients can't handle wait times to return home. Clients can't get through ADA certification process.	Geography/Consumers/Public Transit					
Beyond city limits - Cost - Type of transport.	Geography/Public Transit					
Time barriers - medical transport availability.	Information					
Need schedules for available transportation.	Information					
Time varieties.	Information					
Medi-Cal reimbursement issues. Only a part time driver employed at Country Crest.	Medi-Cal/Funding					
Bus not available on Sunday.	Pubic Transit					
Need a regular schedule.	Public Transit					
Lines not close enough to be feasible usage.	Public Transit					
Hours of service to outlying areas.	Public Transit					
Bus service is limited in Oroville after 5pm.	Public Transit					
Inadequately scheduled vehicles make clients' attending appointments challenging. Also it makes it difficult for employees to get to work intercity (Oroville); lastly, it means it is difficult for families with small children to ride.	Public Transit					
Bus stop locations.	Public Transit					
The limited times the bus comes through (increased frequency would help) decreased same day appointments for paratransit - many of our clients require same day appointments.	Public Transit					
Limited bus schedule-only runs 1 hr - apprehension of client - current reauthorization for services.	Public Transit/Consumers					
Cost of the bus - frequency of pick-ups - travel between towns.	Public Transit/Geography					
Lack of a fully comprehensive and well used (by general public) public transportation system.	Public Transit/Information					
Schedules – expense - limited coverage area.	Public Transit/Information/Funding					

<u>Coordination Interest</u> Survey respondents were asked about coordination interest with the question "Please indicate your areas of interest to coordinate transportation." Respondents could check as many options among the twelve choices as might apply, or indicate no interest. Figure 4-6 shows the responses of agencies with any interest in coordination. There were 14 agencies (22 percent) that indicated they were not interested in any sort of coordination activities at this time.

Figure 4-6



Two areas generated the greatest interest:

- **centralized transportation information** (30 agencies 43 percent)
- coordinated trip scheduling/dispatching (17 agencies 25 percent)

There are similar levels of interest in the next three areas, with 13 and 16 agencies respectively, reporting some interest in: *joint use or sharing of vehicles*, and *coordinated service operations* (Figure 4-6).

The next group of potential coordination categories was *joint contracting for specialized* service (11 agencies), pooling of financial resources (10 agencies), and shared fueling facilities (9 agencies).

The third group of coordination interest was in **coordinated travel training programs** (9 agencies), **shared maintenance facilities** (8 agencies), **coordinated driver training** (7 agencies), and **contracting out for non-directly operated service** (7 agencies).

Only a few agencies indicated interest to coordinate in the areas of: **coordinated vehicle and capital purchase, joint purchase of insurance,** and **contracting to provide transportation to other agencies**, and **joint purchase of supplies**.

To understand differences and similarities in coordination interest, Table 4-6 contrasts the responses of the agencies that provide transportation and agencies that do not. The top-ranked area of coordination interest for <u>all</u> agencies, involved centralized transportation information which further supports the need for mobility manager capabilities within the county. This was also an area of interest expressed by Butte Regional Transit for both the B-Line fixed route and paratransit services, but is not included in the table below. Coordinated travel training was the other area of coordination interest expressed by B-Line.

Transportation providers identified joint use of vehicles as their top priority for coordination while non-providers expressed interest in coordinated trip scheduling. Ironically, the second ranked response from non-providers of transportation was the lack of willingness to coordinate with other agencies. This is most likely explained by the non-providers belief that because they do not provide transportation, they have nothing to bring to the table and are afraid of the commitment that coordinating may demand. This idea is further reinforced by the proportion of responses between providers and non-providers. There are 41 transportation providing human/social service, and for-profit agencies reporting interest to coordinate, resulting in 142 responses. There were only 19 coordination responses from the 26 non-providers of transportation.

Table 4-6, Ranking of Coordination Interest Areas by Responding Human Service Transportation Providers and Non-Providing Human Services Agencies

Potential areas of coordination interest	Trans. Pro	ovider	Non-Provid	der
*total n=67	n=41	Ranking	n=26	Ranking
Centralized transportation information (#1 ranking)	22	1	6	1
Joint use/pooling/sharing vehicles	14	2	2	4
Coordinated trip scheduling/dispatching	14	2	3	3
Coordinated service operations	11	3	2	4
Joint contracting for specialized services	10	4	1	
Pooling financial resources	10	4	0	
Shared fueling facilities	9		0	
Not interested at this time	9		5	2
Shared maintenance faciliites	8		0	
Coordinated travel training programs	7		0	
Coordinated driver training/retraining	7		0	
Contracting out for non-direct op services	7		0	
Coordinated vehicle and capital purchases	5		0	
Joint purchase of insurance	5		0	
Contracting to provide trans to oth agencies	3		0	
Joint purchase of supplies/equipment	2		0	

^{*} Excludes B-Line fixed route and paratransit service responses.

4.3.3 Transportation Services Provided

Agencies were asked to describe the transportation they provide and offered a number of ways in which to characterize that service. Responses included:

- Arranging for transportation by assisting with information while clients remain responsible for follow-up
- Subsidizing transportation through agency purchase of coupons, scrip, passes, fares or mileage reimbursement
- Agency directly operates transportation with full responsibility for the transportation by this agency
- Arranging for volunteer drivers
- **Public transit** provision to general public
- Contracting with another entity or agencies to provide transportation services
- No transportation operated, contracted or subsidized

Figure 4-7 presents the results for the data set as a whole, identifying separately those entities that provide public transportation services. Multiple responses to this question are possible, as an agency may purchase bus passes as well as directly provide or contract for transportation.

Agency Transportation Functions 38% No transportation Arrange for trans by assisting 32% w/info 25% Subsidize transportation 25% Operate transportation Arrange for vol drivers or 19% private car Contract; serv prov by 14% another entity Public transit provide to 3% general public 0% 5% 10% 15% 20% 25% 30% 35% 40% N = 69 Agencies

Figure 4-7

A breakdown of transportation functions presented above includes:

- 26 agencies (38 percent) providing no form of transportation service to their clients
- 22 agencies (32 percent) *arranging for transportation* including providing informational assistance with the consumer responsible for follow-up
- 17 agencies (25 percent) **subsidize transportation** with bus passes or tokens or taxi fare
- 17 agencies (25 percent) operating transportation directly
- 13 agencies (19 percent) arranging for volunteer drivers or private cars
- 10 agencies (14 percent) contracting out for service.

Examining transportation services provided by agencies' legal status shows some interesting differences (Table 4-7):

- **Private for-profit operators** that responded to the survey were either subsidizing transportation by way of bus passes or tokens or directly operating service, with a third agency not providing transportation services of any kind.
- Private non-profit providers were most likely to arrange by assisting with information (9 agencies), followed by subsidizing with bus passes or tokens (8 agencies).
- Public agencies were most likely to arrange by assisting with information (13 agencies), with directly operating (10 agencies) and subsidizing for bus passes or tokens reported by eight agencies.

- Faith-based organizations were either directly operating or arranging for volunteer drivers with two agencies not providing any transportation services.
- The one *tribal organization* responding is directly operating transportation with full responsibility within that agency.

Table 4-7, 2008 Stakeholder Survey,
Transportation Services Reported, Provided by Agency Type

Transportation service provided by agency	All		Private, for Profit	Private, non profit	Public	Faith Based	Tribal
# agencies	69		3	31	30	4	1
Arrange for trans by assisting w/info	22	32%	0	9	13	0	0
Subsidize transportation	17	25%	1	8	8	0	0
Operate transportation	17	25%	1	4	10	1	1
Arrange for vol drivers or private car	13	19%	0	7	5	1	0
Contract; serv provided by another entity	10	14%	0	6	4	0	0
Public transit provide to general public	2	3%	0	0	2	0	0

Existing Coordination Relationships Working relationships between agencies were identified by 43 unique survey respondents. Table 4-8, lists the agencies that survey respondents most frequently worked with in efforts to provide transportation to their clients.

Table 4-8 2008 Stakeholder Survey, Agencies Identified with Coordination Relationships

Coordinated Arrangements	# of Agencies
Butte Regional Transit (B-Line)	18
Merit Medi-Trans	15
Far Northern Regional Center	4
Addus	3
In Home Supportive Services (IHSS)	3
Precious Cargo	2
First Response	2
Cabs for Kids	1
Cal-Learn	1
Glenn Ride	1
Gridley Feather Flyer	1
Laidlaw	1
Peg Taylor Center	1
Shriner's Van	1
WestCare	1

<u>Vehicles Available</u> Vehicles reported by for-profit, non-profit, public, faith-based, and tribal agencies through this survey number 233. These vehicles are further described in Table 4-9.

Table 4-9, 2008 Stakeholder Survey, Vehicle Characteristics Reported by Survey Respondents

Vehicle Characteristics	All	Private, for Profit	Private, non profit	Public	Faith Based	Tribal	
# Agencies	69	3	31	30	4	1	
Total Vehicles	233	34	43	136	11	9	
Vehicles Used Daily	191	27	37	109	11	7	
% of total vehicles by category	82%	79%	86%	80%	100%	78%	
Passenger Capacity							
up to 9 passengers	106	34	9	46	10	7	
10-14 passengers	26	0	9	15	1	1	
15-24 passengers	31	0	14	16	0	1	
25+ passengers	55	0	0	55	0	0	
wheelchair lift-equipped	84	0	29	55	0	0	
% of total category vehicles				40%	0%	0%	

The utilization of reported vehicles is examined by identifying the total number of available vehicles and how many of those vehicles are actually in use on a normal business day. Public agencies report that the majority of their vehicles (80 percent) are used daily while 86 percent of the private non-profit agency vehicles are used daily. The private for-profit agencies reported 34 vehicles that are owned and operated by Merit Medi-Trans with 27 of those vehicles utilized on a daily basis. Faith based organizations reported 11 available vehicles and the tribal organization reported having nine available vehicles of which seven are used daily. There are 55 vehicles with 25+ passenger capacity reported by public sector operators which consists of the B-Line fixed route service and the responding school districts in Butte County.

<u>Available Vehicles by Provider</u> Vehicles were also examined to contrast public transit, human services, school and commercial providers as shown in table 4-10.

Table 4-10, 2008 Stakeholder Survey Vehicle Characteristics by Provider Type

Vehicle Characteristics	All Providers		Public Transit		Human Services	Schools a Commerc	
# of agencies	43		2		36	5	
Total vehicles	233	100%	55	24%	98 42%	80	34%
Operating on a daily basis	191		45		88	58	
% of category		82%		82%	90%		73%
Wheelchair lift equipped	84		55		29	0	
% of category		36%		100%	30%		0%

.Excluding school districts and commercial agencies (80 vehicles), which have the potential to be double-counted, 98 human service agency vehicles were identified with 88 vehicles (90

percent) utilized daily. The B-Line public transit vehicles include both fixed route and paratransit; these number 55 vehicles with 45 of those vehicles (82 percent) utilized daily.

A major difference emerges for vehicles that are wheelchair lift-equipped. Due to the Americans with Disabilities Act (ADA) regulations, all of the public transit vehicles are wheelchair accessible, while only 30 percent of the human services vehicles have wheelchair accessibility. This suggests a barrier may exist for human services agencies trying to provide transportation services to consumers using mobility devices.

<u>Vehicle Replacement</u> Stakeholders were also asked to indicate how many of their vehicles need replacement. Overall, 43 percent of the 233 vehicles reported need to be replaced within the next two years. Agencies reported that 30 vehicles need to be replaced now, 30 vehicles need to be replaced in one year, and another 40 vehicles need replacement in two years.

<u>Vehicle Use</u> The utilization of vehicles is of paramount interest to this inquiry as it suggests a baseline of services now provided and a means by which to measure increases in the quantities of services provided over time. Reported trip data is presented below in Table 4-11.

Table 4-11, 2008 Stakeholder Survey
Vehicle Utilization Reported by Survey Respondents

Vehicle Utilization	All		Private, for- profit		Private, non- profit		Public		Faith Based		Tribal	
# Agencies	69		3		31		30		4		1	
Total monthly one-way trips Annualized one-way trips	148,653 1,783,836	100%	4,500 54,000	3%	17,762 213,144	12%	122,091 1,465,092	82%	4,000 48,000	3%	300 3,600	0%
Total monthly vehicle miles Annualized service miles	378,865 4,546,380	100%	70,000 840,000	18%	101,790 1,221,480	27%	193,775 2,325,300	51%	13,000 156,000	3%	300 3,600	0%

The stakeholder survey reported a total of almost 1.8 million annual trips, across all responding agencies.

- **Public agencies** account for the most trips provided at 1,465,092 or 82 percent of the total trips which resulted in 2.3 million annual miles or 51 percent of the total annual miles from all reporting agencies.
- **Private non-profit** agencies reported the second most trips at 213,144 which accounts for 12 percent of all reported trips and resulted in 1.2 million annual miles or 27 percent of the total annual mileage reported.
- Private for-profit agencies, specifically Merit Medi-Trans reported 54,000 annual trips which totaled 840,000 annual miles. This suggests that the Merit Medi-Trans trips are significantly longer in length than compared to public and non-profit agencies, as they only account for three percent of total trips but 18 percent of total mileage.
- Faith based organizations reported 48,000 annual trips (three percent).
- **Tribal organizations** reported 3,600 annual trips (less than one percent).

Experience in other counties has shown that the human service agencies tend to use different methodologies to report trips provided and other standard transit indicators. These numbers therefore, for the human services programs, simply provide a point of reference and general comparison but probably are not directly comparable with public transit agency data for whom standardized reporting definitions exist.

<u>Vehicle Use by Provider Group</u> A comparison of the number of trips provided and the miles driven to provide those trips, contrasted by the type of transportation provider is shown below in table 4-12.

Table 4-12, 2008 Stakeholder Survey Vehicle Utilization Reported by Provider Type

Vehicle Utilization	All Providers		B-Line Fixed-Route		B-Line Paratransit		Human Services		Schools and Commercial	
# Agencies	43		1	1 1		36		5		
Total monthly one-way trips Annualized one-way trips	148,653 1,783,836 1	100%	103,000 1,236,000	69%	9,300 111,600	6%	23,447 281,364	16%	12,906 154,872	9%
Total monthly vehicle miles Annualized service miles	378,865 4,546,380 1	100%	90,000 1,080,000	24%	40,000 480,000	11%	129,790 1,557,480	34%	119,075 1,428,900	31%

Looking at the distribution of annual trips and mileage across the different modes of transportation providers provides some insight to the nature of these trips. Human services agencies are providing longer distance trips accounting for 34 percent of the annual service miles, but only 16 percent of the total annual trips. This equates to lengths of 5.5 miles per trip for this provider group.

B-Line paratransit service accounts for 11 percent of the total annual trips reported and six percent of the total annual miles which equates to 4.3 miles per one way trip. These contrast B-Line fixed route services which account for 69 percent of the total annual trips at just more than 1.2 million. The average fixed route trip lengths are considerably shorter at 0.87 miles per trip, reflecting the efficiency of that mode of travel. The number of passengers fixed route buses generally transport at one time and the shorter distances per route, explains the disparity between fixed route service with its multiple riders and short trips versus specialized transit where longer trips are common.

<u>Hours and Days of Operation</u> Table 4-13 presents service hours and service day information for agencies that provide some form of transportation services. Of the 20 agencies that provided information regarding service hours, 17 of these agencies have services available between the weekday general business hours of 8am to 6pm. Four agencies provide services during the early morning hours before 8am, and five agencies provide late evening services after 6pm.

For Saturday services, there are eight agencies operating between general business hours, two agencies providing early morning services, and four agencies available to consumers late in the evening. There were was no service reported on Sunday for early morning service, but eight agencies are operating during general business hours. Only two of these agencies remain available to consumers in to the evening hours. None of the agencies that participated in the survey process reported having 24-hour service, which has been available in other counties elsewhere in the state.

Table 4-13, 2008 Stakeholder Survey Hours and Days of Operation Reported

BUTTE COUNTY Provider Service Hours Table								
	N = 20 agenices providing service hour data	# agencies	% agencies					
Weekdays								
	Early (before 8am)	4	20%					
	General (8am-6pm)	17	85%					
	Late (6pm-10pm)	5	25%					
Saturday								
	Early (before 8am)	2	10%					
	General (8am-6pm)	8	40%					
	Late (6pm-10pm)	4	20%					
Sunday								
	Early (before 8am)	0	0%					
	General (8am-6pm)	8	40%					
	Late (6pm-10pm)	2	10%					

4.3.4 Funding Reported for Agencies Providing Transportation

A final area of inquiry is that of funding. What level of funding supports the programs of responding agencies and what are the sources of those funds that can help to develop coordinated initiatives?

<u>Reported Budgets</u> Almost \$19.8 million in transportation budget allocation is reported by this survey sample. Public transit is spending \$11.9 million on transportation services while human service providers are spending \$5.5 million. The school districts and commercial providers report a combined transportation budget of \$2.5 million (Table 4-14).

Table 4-14, 2008 Stakeholder Survey
Transportation Budgets Reported by Survey Respondents

		Public	Human	Schools and	
Transportation Budget	Total	Transit	Services	Commercial	
		Providers	Providers	Providers	% of total
Total for vehicle operations	\$12,514,430	\$6,409,000	\$3,717,430	\$2,388,000	63.2%
Total for vehicle replacement/capital funds	\$4,899,600	\$4,859,000	\$40,600	\$0	24.7%
Total for mileage reimbursement	\$847,386	\$0	\$846,986	\$400	4.3%
Total for bus passes/tickets/tokens	\$558,147	\$0	\$558,147	\$0	2.8%
Total for administration	\$399,200	\$398,000	\$1,200	\$0	2.0%
Total for insurance	\$361,254	\$241,000	\$69,254	\$51,000	1.8%
Total for taxi vouchers/other specialized service	\$200,000	\$0	\$200,000	\$0	1.0%
Total for other	\$18,157	\$700	\$17,457	\$0	0.1%
Total Reported Transportation Dollars	\$19,798,174	\$11,907,700	\$5,451,074	\$2,439,400	100.0%

Transportation spending was broken down into several categories to better understand the areas of expenditure:

- **Direct vehicle operations** account for \$12.5 million or 63 percent of the total annual dollars expended. Public transit represents \$6.4 million of this total, followed by \$3.7 million from human services providers and \$2.4 million reported by the school districts and commercial providers.
- **Vehicle replacement/capital** accounts for \$4.9 million or 25 percent of the annual transportation budget total. Public transit accounts for the majority of this category at \$4.8 million, with only \$40,600 reported by human services agencies.
- **Mileage reimbursement** is reported at \$847,386, mostly by the human services agencies. Staff, volunteers and consumers themselves may be receiving these funds to help meet transportation needs. Public transit did not report any expenditures in this category and only \$400 was reported by the school districts.
- Bus passes subsidies are represented only by human services agencies at \$558,147.
 These agencies often purchase bus passes for consumers where public transit is available.
- **Administration** is reported as a line item for public transit at \$398,000. As transportation is not often considered a separate function but incorporated into other job responsibilities, human services agencies rarely keep track of administration costs and as a result report only \$1,200 in this category.
- Insurance costs were reported at \$361,254 for all provider types. Public transit is spending the most at \$241,000, followed by \$69,254 for human services agencies, and \$51,000 by the school districts. This may represent an area where coordination could realize some savings.
- Taxi vouchers are only purchased by human services agencies, reporting \$200,000 per year. Taxi vouchers may be used to accommodate immediate transportation needs of human services consumers, without requiring the pre-planning required by B-Line's paratransit service.
- Other transportation costs totaling \$18,157 were reported for contract payments to other transportation agencies for services.

When asked whether anticipated future budgets were increasing or decreasing, 12 of the 25 agencies expect some level of budget increases and ten agencies expect it to stay the same. Just three agencies anticipated some decrease.

Reported Funding Sources Transportation-related funding sources utilized by responding agencies are reported below (Table 4-15). The following funding picture reflects sources reported by agencies providing some form of client transportation in Butte County.

Table 4-15, 2008 Stakeholder Survey Transportation Funding Sources Reported by Survey Respondents

Funding Sources for Transportation Budgets	ALL			
N = 43 Transportation Providers	# of Agencies	% of providers		
COUNTY/LOCAL FUNDING				
General Funds	10	23%		
Tobacco Settlement Revenue	0	0%		
STATE FUNDING				
Education Department	6	14%		
Department of Health Services	5	12%		
Department of Developmental Services	2	5%		
Department of Aging	3	7%		
Department of Rehabilitation	1	2%		
Medi-Cal	1	2%		
FEDERAL FUNDING				
FTA section 5310	3	7%		
Community Development Block Grants	2	5%		
Health and Human Services	2	5%		
OTHER FUNDING				
Client fees	3	7%		
Private donations/grants	3	7%		
Fundraising	3	7%		
Fare box	3	7%		

Local general funds were reported by ten agencies (23 percent), emerging as the most frequently noted source of transportation funding of responding agencies. State education funds are used by six of the responding agencies (14 percent) and reflect the responses from several school districts. The Department of Health Services funds are reported by five agencies (13 percent), along with Department of Aging funds (3 agencies - 7 percent), and the Department of Developmental Services (5 percent).

Federal funds reported included Section 5310 used for vehicle capital purchases by three agencies. Community Development Block Grants and Health and Human Services funding are in use by two agencies each. As expected with human/social services agencies, client fees, private donations, and fundraising are important funding sources. This is reported by seven percent of all agencies in each category but is a unique total of 10 agencies from among the 43 agencies providing some form of transportation service.

4.4 STAKEHOLDER SURVEY SUMMARY COMMENTS

This survey has developed a picture of specialized transportation resources and issues in Butte County. The survey generated a 23 percent survey response rate that includes 69 agencies and organizations responding, coming from throughout the county. These organizations clearly reflect the breadth and diversity of organizations concerned with the transportation of persons of limited means, of seniors and of individuals with disabilities.

Agencies responding represented a caseload of 167,436 persons, spread across the breadth of consumer groups. There was a good mix of public and non-profit agencies, and also included for-profit social service agencies and commercial transportation providers. There were four faith based organizations and one tribal organization responding to the inventory survey. For the county as a whole, agency estimates suggest that eight percent of these consumers are on-site, in agency programs daily, projected to be more than 14,000 persons. However, of these, a little more than half have some type of specialized transportation need or requirement. These proportions vary considerably among agencies, given the type of service and consumer base they serve.

Forty-three agencies (62 percent of respondents) have some type of transportation function, including directly providing it, contracting for it or as a contractor, subsidizing bus passes and tokens, or arranging for it on behalf of their consumers. Direct service provision by human services providers is fairly well distributed across the county.

Vehicles reported were 233 with 136 operated by pubic agencies, 63 reported by the remaining social service agencies and the balance by commercial operators.

Trips provided are estimated at 1,783,836 annually with 82 percent of these provided by the responding public agencies and 12 percent provided by the private non-profit operators.

Reported needs for client transportation differed somewhat, between agencies that operate transportation and agencies that did not, but with some overlap.

- There was agreement on the highest ranked need: **non-emergency medical trips** top-ranked, by 64 percent of responding agencies.
- Human services transportation-providing agencies ranked other top needs as: medical, counseling/mental health treatment, shopping and multiple errands, training and education, and recreational activities.
- Human services agencies that <u>do not</u> provide transportation ranked as top needs medical trips, training and education, counseling/mental health treatment, interviews and screenings, and getting to work between the hours of 8am and 5pm.

Barriers to accessing needed transportation or to coordinating transportation were described by responding agencies. Among common themes identified were:

- **Funding challenges** for directly operating or contracting for transportation.
- Difficulty in working with public transit, its reliability, and its rules and requirements that are sometimes in conflict with the individualized needs of consumers.
- Public transit's availability, when it operates and when it does not can represent a mismatch with transit dependent consumers' needs.
- Agency restrictions, due to structure.

- Geography of Butte County and the long distances required for some trips is difficult for the consumers requiring these.
- Information assistance is needed, both to help frail consumers navigate services and to assist those new to public transit in finding their way.
- Consumers' individualized needs make it difficult to use available public transit. These needs include assistance in booking trips, gurney transportation, and special help for dialysis patients and behavioral health consumers.

The top-ranked area of coordination interest for <u>all</u> agencies, involved **centralized transportation information**. Transportation providers identified joint use of vehicles as their top priority for coordination while non-providers expressed interest in coordinated trip scheduling. Ironically, the second ranked response from non-providers of transportation was the lack of willingness to coordinate with other agencies. This is most likely explained by the non-providers belief that because they do not provide transportation, they have nothing to bring to the table and are afraid of the commitment that coordinating may demand. This idea is further reinforced by the proportion of responses between providers and non-providers. There are 41 transportation providing agencies with the exclusion of public transit that are reporting interest to coordinate, resulting in 142 responses. There were only 19 coordination responses from the 26 human services non-providers.

This 23 percent sample of agencies and organizations reported almost \$20 million in transportation funding. The public transit systems are spending the most on transportation at \$11.9 million. The school districts had a combined transportation budget of \$2.4 million, and almost \$5.4 million in use for human and social agencies/organizations. Of these, the Work Training Center reported the largest sum of available dollars at \$2.9 million and the Far Northern Regional Center at \$1.7 million for transportation related services, with some potential for duplicative reporting of funding between these two agencies. The remaining \$800,000 for this category is spread amongst 19 human/social services agencies, mostly spent on bus passes and mileage reimbursement.

5.0 Assessment of Needs – Stakeholder Outreach Findings

5.1 Introduction

The stakeholder involvement process links the locally developed plan development process with stakeholder agencies and organizations, termed by FTA as "appropriate planning partners." This begins what must become a continuing process of relationship building, a process ultimately expected to address the mobility needs of the target populations.

The Coordinated Transportation Plan ultimately articulates a unified comprehensive strategy for public transportation delivery speaking specifically to the mobility needs of the three target populations: 1) seniors, 2) persons with disabilities, and 3) low-income persons. The development of a locally-developed plan must include outreach to and involvement of agencies and organizations that operate or contract for transportation and/or provide other services to the target populations, as well as the actual consumers of these services. Various outreach activities described resulted in a total of 22 outreach opportunities that involved contact with almost 200 stakeholder representatives over the plan development process.

5.2 STAKEHOLDER INVOLVEMENT OBJECTIVES AND METHODOLOGY

In addition to achieving consistency with FTA-funding related guidance and requirements, the project team designed a stakeholder outreach process to accomplish other project-specific objectives and serve as the basis for outreach efforts:

- Obtaining and assessing the views and perspectives of stakeholder agencies and organizations, and of consumers on issues specific to needs of the target populations and available transportation resources in the county;
- 2. Soliciting ideas for coordinated transportation plans, projects and strategies that could be recommended as elements of the plan;
- 3. **Informing stakeholders of capacity building strategies** designed to empower and motivate the human service sectors of transportation towards coordination:
- 4. **Validating and strengthening survey information** to offer a more individualized understanding of consumer needs, and potentially increasing the survey response rate.
- 5. **Identifying interested, willing and able partners** through whom to implement the plan.
- 6. Continuing BCAG's efforts to promote goodwill and cooperative relationships with key stakeholders and the community-at-large.

Methodology

Outreach efforts to contribute to this coordinated plan for Butte County were multi-tiered and included the following with sample outreach notices included as Appendix D.

- ➤ A February series of three community workshops were conducted around the county in Chico, Paradise and Oroville -- to announce the coordinated planning effort, to invite comments and discussion and to promote the survey.
- On-site agency interviews were held with selected organizations in March and April.
- Consumer focus groups were held in March and April to extend and validate other study findings.
- ➤ In May a Project Development Workshop was scheduled to present a "report of findings" and to invite comments on the general project direction.

Promotion of the general outreach efforts, namely the February community workshops and the May Project Development Workshop, was made possible by the agency database constructed for the countywide inventory. This mailing list of over 300 agencies was refined through the early months of the project, with returned mail researched and corrected where better addresses could be found. New names were added as individuals were identified through the various outreach activities. Email addresses were added as these became known to the project team, through the community workshops, the interviews and from the completed, returned surveys. Each successively improved distribution notification was used to promote plan activities and, ultimately, to advise the identified "interested and willing" individuals and agencies of the availability of the draft plan and the adopted plan. This database will be provided to BCAG at the end of the planning process as one tool for their continuing development of coordinated projects.

Additionally, BCAG distributed project announcement materials through its advisory and committee structure, as appropriate, providing further opportunity to reach interesting parties. Assistance of the SSTAC members also expanded distribution of information. Appendix D includes the various handouts, flyers and notices developed through the course of the plan development process to invite participation.

The target constituencies of the overall outreach effort included the following:

- 1. Management and staff representatives of agencies and organizations operating transportation and/or serving the day-to day need of clients and consumers;
- 2. Clients and consumers of specialized transportation services;
- 3. Staff representatives of the regional public transit system and of private transportation services in Butte County;
- 4. Citizens and vendor advisory group representatives; and
- 5. Local and regional transit/transportation and human and social service agency/organization representatives.

5.3 STAKEHOLDER INVOLVEMENT OPPORTUNITIES

Specific outreach efforts included the following:

Social Services Transportation Advisory Council (SSTAC)

The project team met with the Social Services Transportation Advisory Council (SSTAC) and the Coordinated Transportation Working Group at key points during the plan development process to ensure direct local agency and organization participation. Project team members

spoke on other occasions by telephone with selected SSTAC members to obtain guidance on contacts, assistance with promotion of the survey and general comments on study activities. Input from these SSTAC contacts helped to guide the plan development. Additionally, SSTAC members promoted the planning effort through their individual constituencies, including the Elder Services Coordinating Council.

Public Workshops

As noted, two types of public workshops were conducted:

- The first workshops were held early in the project across the county to invite interested and willing representatives to come learn about the project at sites in Oroville, in Paradise and in Chico. Approximately 45 individuals participated in these workshops, representing more than two dozen agencies and organizations.
- The second type of workshop was conducted in May to report findings and open discussion of the plan's recommendations. Individuals and organizations included in the project database were invited to attend a single workshop held in Chico to hear about and comment upon the plan development findings. Almost 30 individuals representing 22 organizations participated in this workshop.

Stakeholder Roundtables and On-Site Interviews

Additionally, through roundtable discussion and on-site meetings, as well as telephone contracts, representatives of the following organizations participated in the outreach effort:

- Butte College Transportation
- Chico Unified School District
- Chico State University of California
- Peg Taylor Adult Day Health Care Center
- Work Training Center
- Far Northern Regional Center
- First Five of Butte County
- Merit Medi-Trans
- Feather River Indian Health Services Transportation Program
- Paradise Treatment Center, Paradise
- Community Action Program, Housing and Community Development program managers
- Catholic Social Services, Chico
- Jesus Center, Chico
- Department of Behavioral Health, Proposition 63 manager, Chico

Approximately twenty-five persons, plus consultant team members, participated. Various other on-site interviews were attempted, but due to scheduling conflicts were not conducted.

Consumer Focus Groups

Small, focused group discussions were held directly with consumers. In the case of the Paradise Treatment Center and the Jesus Center, participants were each given a \$10 Carl's Junior gift card as a thank you for participating. These focus groups involved almost fifty (50) consumers, in total, and included:

- o Paradise Treatment Center -- almost 30 consumers with behavioral health issues
- Jesus Center in Chico -- ten low-income individuals including some homeless persons
- Jarvis House in Chico -- involving eighteen residents of this new low-income senior housing facility

5.4 STAKEHOLDER OUTREACH KEY FINDINGS

Public Workshops

Important resources:

- Available transit information of value to consumers who learn to read it.
- Transportation providers of some significance: private agencies -- Work Training Center, Adult Day Health-Peg Taylor Center; Far Northern Regional Center (vendoring); Tribal organization – Feather River Indian Health Services; private providers of Merit Medi-Trans, Cabs for Kids, taxis; public agencies – County Behavioral Health,

Key areas of need identified through the three workshops included:

- Expanded fixed-route services: later evening hours, Sunday services
- Fixed-route services to specific destinations: Oroville Cottonwood Estates,
 OHMHP, The Oaks, Carriage Manor; Chico Jarvis House Senior Residences
- Increased frequency of fixed-route services: particularly Chico to Oroville where the county seat and court facilities are located; between Chico and Paradise; between Paradise and Magalia and Paradise Pines; Gridley to Oroville and return
- B-Line schedule changes need to be attentive to when Chico State classes end; currently selected routes arrive 10 minutes before the hour and students have to wait then almost an hour (sometimes more) for next bus.
- Need for transit to follow entry-level jobs: airport, fast food with shifts later into the evening, casinos
- Need for improved connectivity: fixed-route to fixed-route (shorter waits at Chico mall; buses not waiting for one another), fixed-route to paratransit, B-Line to other county transit programs
- ADA transportation issues:
 - Difficulty with scheduling and dispatch: losing trips, difficulty getting consumers off the vacation "hold" list long after they are not on vacation
 - Long waits on telephone regarding trip requests;
 - Dispatcher rudeness complaints
 - Dispatchers providing confusing and/or contradictory information regarding regularly scheduled trips versus subscription trips.
 - Some riders need to be escorted to/ from their door and ADA drivers [contractor] will not or cannot do that
 - Dialysis consumers have special needs some located in Magalia while dialysis facilities are down in Chico

- Need for same-day transportation exists for various purposes:
 - Medical trips that cannot be anticipated
 - Other trip purposes do arise with same-day requirement (legal needs; pharmacy)
- Transportation-providing human services agency needs include: finding enough qualified drivers [General Public Paratransit Vehicles - GPPV].
- Volunteer drivers are needed to help with some of the escort and other specialized needs that public transit cannot address.
- MediCal reimbursement for trips is a problem for several reasons: fewer trips are being approved; not all people are eligible for MediCal transportation reimbursement.
- Transportation need existing in areas where public transit does not go:
 - Gold Country Casino in Kelley Ridge
 - o Oroville to Palermo
 - Between Oroville and Yuba/ Sutter.
- Isolated, unserved areas with transportation need:
 - o Berry Creek
 - o Concow
 - Kelly Ridge
- Bus pass administration issues: human services agencies are purchasing individual tickets when a monthly pass would be both more economical and provide enough transportation to meet consumer needs (e.g. 10 trips per week is not always enough if one is going to interviews or apartment hunting).
- Physical environment needs that facilitate pedestrian traffic and use of public transit: more bus benches and shelters; improved sidewalks [Paradise; Chico around hospital]; curb cuts.
- Interest in coordinated service responses exists but also a need to grow trust and identify the roles of various players: BCAG, private non-profits, private for-profits
- Models for collaborative responses exist: Elder Services Coordinating Council; food bank. There are ways in which agencies are already working together that could provide a framework for transportation coordination.
- Consumer needs are very individualized:
 - o Elderly consumers need assistance arranging the trip
 - Some consumers require door-through-door assistance because of their frailty or confusion
 - Consumers with HIV/AIDS have changing health conditions, from day-to-day; difficult to plan certain trips ahead
 - Low-income consumers have special needs related to affording the bus fares;
 boarding with small children; accommodating the length / timing of the trip in relation to work schedules

Strategies and interest emerging around:

- Mileage reimbursement programs and ways to involve volunteers in transportation delivery; building upon strong volunteer capability evidenced in Butte County
- Potential for vehicle sharing, trip brokering, resource sharing among agencies that have vehicles and agencies that need trips
- Bus pass coordination, both between human services agencies and B-Line and internally within human services agencies to consider passes versus individual bus tickets.
- Information and trip planning needs significant within human services agencies, both on behalf of consumers and for agency staff working with consumers;
- Information that is destination-oriented to major social service destinations, similarly to some of the destination specific information currently in the B-line ride guides.
- Potential for specialized shuttles: for workers at the Casinos (Gold Country/ Kelly Ridge); for shopping trips to Costco, Walmart, Chico mall from outlying areas

Appendix E includes the summary notes from the February community workshops. Comments developed at the May workshop were incorporated into the Plan documents.

Other Selective Interviews/ Stakeholder Meetings

School and University Resources:

The community college and state university transportation coordinators may have some role to play in coordinated solutions to transportation but the specifics of that were not readily identified. The secondary and elementary school systems are anticipating significant hits to their budgets related to transportation and are eager to explore coordinated solutions to getting children and youth to school.

It may be that around facilities sharing or joint-maintenance there is some opportunity for coordination. Some interest was expressed in reducing the number of vehicles on the road but no clear direction as to how best to do that. There was discussion of such structures as Consolidated Transportation Services Agency (CTSA) and Transportation Management Associations (TMAs) as mechanisms to facilitate coordination, the former for persons who cannot use conventional fixed-route and the latter typically for employers, employees and the work-trip.

<u>Coordinated Human Services Agencies Meeting Specific Consumers Needs (children, youth, low-income)</u>

Transportation is a continuing line item; usually for bus passes or for staff mileage to bring consumers to services. The latter is very expensive and is an increasing budgetary expense. Consumers may be reimbursed for mileage in selective situations and/or gas cards may be purchased on their behalf. These fuel card options, typically in \$20 denominations, do not go very far in this high-priced fuel economy.

Travel training is seen as a critical need for multiple constituencies, including youth, seniors AND the case managers who are working with high needs populations. Information about available transportation services does not get into the hands of the staffers working directly with consumers; agency personnel are not always sure how best to enable that. For those who do not know how to read bus passes/rider guides – both consumers and agency staff – it is difficult

to consider learning. Interest is high around transportation training opportunities, both for staff members and for consumers.

Housing is a critical need in the County and some lower income housing facilities are being built/ have been built. There probably needs to be better coordination between the housing coordinators and public transit during the planning phases as well as after new housing units are opened.

Special needs exist for various groups ---

- for youth, sometimes very small children, they cannot travel alone and need an escort, possibly a staff person;
- for youth, middle school children often live far from home and low-income parents cannot readily pick them up from school; these kids need public transit solutions;
- for low-income mothers traveling with infants and small children, this is very difficult on fixed-route:
- for individuals with developmental disabilities, need for escorts, for evening and more recreational trip-making;
- for dialysis patients, considerable difficulty making the return-trip home on conventional public transit and difficulties in that transit does not travel to some areas where these individuals live (Magalia being one)

The problem regularly exists of getting consumers who need services but live out in the more isolated areas of the county in to these services. There was some interest in exploring coordinated responses to these more isolated areas.

Costs of bus passes, individual fares, certainly gasoline is prohibitive for the lowest income.

Alternative programs, including ride share, car loaner and fuel cards of interest for these difficult to meet consumer needs.

Collaborative responses, by groups of agencies working together, are seen as increasingly necessary given anticipated cuts to agency budgets.

Appendices D, E and F present summary notes from interviews identified above, unless the content of these interviews was otherwise incorporated into the Plan document.

Consumer Focus Groups

Consumer focus group comments are summarized here, based upon discussions with a low-income group, a disability group and a senior group.

Compliments

Consumers who regularly use both B-Line fixed route and B-Line paratransit have various comments of appreciation. Consistently good comments about the drivers were heard. Riders also appreciate the good lost-and-found system in place. Riders noted that buses are usually clean.

Key areas of need identified through the three workshops included:

About B-Line Fixed-Route and Paratransit

- Costs of transportation in all its forms is difficult for the lowest income individuals, including bus fares – a significant portion of the SSI monthly allotment, after rent and food are purchased.
- Bus tickets provided to consumers often 10 per person per week are not costeffective or sufficient. It would be better to provide a bus pass that provided for more than the ten trips per week that are sometimes necessary if you are job hunting or taking kids to day care or school on the bus.
- Bus tickets provided free to the lowest income individuals are very limited.
- Concerns about service reliability/ equipment heard in all three settings that the buses break down a lot, out on the road, with passengers onboard.
- Drivers are not very informative either announcing stops or advising consumers of how to make connections or travel by bus to other locations.
- More signage is needed, replacing lost signs and ensuring adequate signage/ informative signage at central transfer locations (e.g. Chico mall).
- B-Line buses don't always complete their runs with recent information about missed vehicle trips.
- B-Line buses sometimes leave the bus stops early.
- B-Line paratransit dispatcher issues related to:
 - Length of time on-hold to place trip request
 - o Hold-time information on the recorder is not helpful not logical
 - Confusing and contradictory information provided by dispatcher as to when trip request can be made
 - o Dispatchers can be rude.
 - Very difficult to have such long waits on the telephone when you are borrowing someone's phone to place a trip request or are not at home or don't have a home telephone.
- B-Line paratransit on-time performance needs some help but vehicles are often within the thirty-minute on-time window.
- Need for more bus furniture: bus benches and places to sit down while waiting; bus shelters from the sun, wind and rain.
- Need more service between Chico and Oroville standing room only on multiple trips.
- Need more service between Paradise and Magalia.
- Need additional weekend service, later on Saturday nights for retail jobs and running at least a half-day on Sundays for church attendance.

Interest in alternative transportation options:

- Alternatives including mileage reimbursement and car loaner/ van pooling or special shuttles are of interest to consumers.
- Ridesharing of interest, particularly for seniors, but mileage reimbursement abilities would help those on fixed-incomes stretch their resources farther.
- A car loaner program, for those who only infrequently need a car, would have considerable value.
- Bus buddies and ways to use public transit the first time with an experienced user were of interest to both low-income individuals and to seniors.

Strategies suggested by consumers included information and training options, including travel buddies; purpose-specific shuttles; fuel cards and car loaner for specific trips; same-day services. Appendix G includes Summary notes from these consumer workshops.

5.5 OUTREACH SUMMARY COMMENTS

This chapter presented findings from a broad series of conversations with Butte County stakeholders and strategic planning partners involved with various aspects of the three target groups, seniors, persons with disabilities and persons of low-income. A total of 22 outreach opportunities were undertaken as part of the Plan development process, involving almost 200 individual contacts over the course of the effort. Further detailing the information presented in this chapter, meeting summaries are included in Appendices E, F and G.

The issues described here can generally be summarized as follows:

- Issues with the existing public transit network related to increased frequency, increased coverage, improved reliability, improved customer service and easier access to information.
- Requirements exist for service types and transportation assistance that are not
 adequately met by the current service structure. These include same-day
 service, non-emergency medical transportation, special shuttles or group trips to
 shopping or recreation, more readily available travel training and travel buddies,
 assistance with the costs of transportation (e.g. fuel cards and free bus passes)
 for the lowest income and higher levels of escort for door-through-door
 assistance to those no longer able to travel independently.
- Agency personnel needs exist for information for case workers and front-line staff
 who work directly with consumers needing transportation but who themselves
 have little knowledge of B-Line services. Human service agency needs exist for
 better understanding of the transportation planning processes with methods and
 opportunities for making input to these.
- Agency transportation provider needs related to driver availability and training, insurance availability and costs, vehicle replacement and brokered or shared-ride trip-scheduling that could both increase the availability and improve the costeffectiveness of specialized transportation.
- Unserved areas of the county will never be readily served by public transit, largely small, remote areas where multiple human services agencies may have consumers of all ages.

6.0 ANALYSIS OF NEEDS, GAPS AND DUPLICATION OF SERVICE

6.1 INTRODUCTION

This chapter brings together the findings of the demand estimation, stakeholder survey effort and outreach activities to consider the needs identified along three key dimensions. This analysis examines needs in relation to:

- 1. individual target population groups;
- 2. human service agency issues, and
- 3. infrastructure and organizational issues

A discussion of duplication and gaps in service, related to the three target populations, concludes this chapter.

6.1 INDIVIDUAL TARGET POPULATIONS' TRANSPORTATION NEEDS

6.1.1 Low-Income Persons and Families

Consumers and their agency representatives presented issues that included:

Youth in low-income households are often living far from the places to which they
need to travel, including school (particularly middle-school youth), after-school
activities, treatment or therapies and other enrichment activities. Youth of all
income levels often have limited experience with public transit and are in need of
travel training and introduction to the available public transit services.

Some low-income youth and children are living in very isolated areas of the County, not near any public transit option, and need escorted trips – possibly volunteer transportation – into services, medical appointments and therapy sessions.

- Low-income families sometimes own one vehicle but may not have enough funds
 to fuel it regularly or to keep it properly maintained. It was commonly reported
 that even those low-income households that have maintained an automobile
 previously now find fueling it extremely difficult and relying increasingly upon
 public transit.
- Young, low-income families are often single parents traveling on fixed route with one or more small children in tow or infants in hand or sometimes in a stroller. This makes for difficulties when boarding the vehicle to quickly pay the farebox, stow the stroller or young children and find a seat before the vehicle departs the stop. This is more difficult when the vehicle is at standing room only with no seats available. Often seats marked for the elderly, disabled individuals or young moms are full and are not vacated when individuals in need board the buses.

- **Low-Income individuals** report knowing the public transit services well with many being very familiar with the routing structure and vehicle operations. These individuals represent a resource as travel trainers, traveling buddies or as "ghost riders" to help ensure that services are provided as intended.
- Housing for low-income individuals and families is in the more remote areas and those are difficult to serve with public transit or most other transportation alternatives.
- Regular low-income users of fixed route expressed considerable appreciation for existing B-Line services. They also requested better signage, more stop announcements and more bus information both on the telephone and in the hands of drivers. Ready information and better signage at transfer locations would be helpful, including the Chico Mall. Regular riders requested more frequent service in various heavily traveled areas within Chico and between communities.
- Low-income women, often traveling alone expressed appreciation for the drivers'
 watchful eyes, particularly at night and on the last runs. These riders spoke of
 considerable anxiety about missing the last run of the day.
- Affordability of bus fares is a serious problem for the lowest income individuals, including the homeless, where every penny is counted and needs far exceed dollars available.
- **Non-emergency medical trip needs**, particularly where trips are between communities or are required on the same-day, are very difficult to meet if one is not eligible for MediCal-reimbursed transportation.

Low-income adults and seniors are currently estimated at almost 30,000 persons, exclusive of children, as defined by the U.S. Census as at or below 150 percent of the poverty line defined in the Community Services Block Grant Act. This group represents about 14 percent of the county's total population. As the County's overall population grows, this group will also increase in size, at least in raw numbers, if not as an increasing proportion of the total. While to some extent, low-income individuals are distributed around the county, there are areas of higher concentration, including western Oroville around Thermalito, around Gridley along the Colusa Highway, southeast of the Highway 70 corridor towards Berry Creek, in selective pockets within Chico and northeast of Chico towards Forest Ranch.

6.1.2 Persons with Disabilities

Individuals with disabilities, who have a broad range of physical issues, expressed a variety of needs, directly or through case workers and agency representatives contacted during the course of this planning effort.

- Compliments by B-Line paratransit riders and B-Line fixed-route riders were common and usually focused on how much individuals appreciated the drivers and appreciate the services that are available.
- **Communications difficulties**, including long times on hold, booking trips successfully and other uncertainties with the telephone reservation system surfaced in numerous conversations related to paratransit riders.

- On-time performance is very important to paratransit users who described their
 difficulties when the paratransit service delivers them to appointments late;
 particularly with medical trips this can require rescheduling appointments and
 long-waits until the next available opening.
- Unmet trip needs involve recreational activities including evenings, Sundays and shopping trips to Chico Mall, Walmart and Costco; even where persons with disabilities get some basic trip needs met through existing program services, certain recreational and personal trips can be difficult to obtain.
- **Basic courtesy by drivers and dispatcher** is very important to these individuals and noted when it is absent and transit personnel are rude, hurried or impatient.
- Same-day transportation needs were repeatedly mentioned where individuals
 cannot plan ahead, usually for medically-related purposes but also other trip
 types too. Some kind of immediate needs transportation, even where it is
 provided in very limited quantities (e.g. so many tickets per month or per quarter)
 would be of considerable assistance to these individuals.
- Affordability of bus fares is a significant problem for individuals on SSI (supplemental social security income) which allows between \$800 to \$1000 per month with the largest portions going to pay for housing and food.
- **Chronically ill individuals** have a variety of needs that cannot readily be met by public transit; these include door-to-door and door-through-door assistance, help planning and scheduling trips.
- Dialysis users and persons in adult day health care facilities have special needs
 in that their transportation is continuing, multiple days per week, and various
 problems exist in meeting the individualized needs of these compromised
 populations.

There is considerable variability among the populations with significant, continuing disabilities. Some whose disease processes are stable are able to use fixed-route buses and may prefer to do so where the service reliability is greater and there is not the requirement of navigating a telephone reservation system. Some use B-Line paratransit services regularly, if they live within its service area. Others are too frail or too ill for even the B-Line's ADA paratransit service and require a level of transportation assistance not readily available.

Adults with disabilities, ages 18-64, number about four percent of the County's overall population. Along with self-reporting seniors who indicate they are disabled, this represents about 14,000 Butte County residents of the Dept. of Finance estimated 218,000 residents countywide (2007). Persons with disabilities, although distributed across the county, do tend to follow the pattern of low-income individuals and show greater concentrations in areas where housing is less expensive. This includes Oroville just west of the 70/99 highways, the Gridley area, southwest of Paradise and in eastern Butte County along the 70 corridor, from Concow, Deadwood and Yankee Hill, as well as between Berry Creek and Buck's Lake.

6.1.3 Seniors

- Information needs are significant as seniors report confusion about B-Line paratransit or how to ride B-Line fixed route for the first time. This is a continuing need as young seniors "age into" concerns about transportation and increased attention to alternatives to driving their own automobiles.
- Travel training and "travel buddy" riders are requested by seniors giving up their
 cars, less able to afford the fuel for their cars but uncertain and apprehensive
 about using public transit.
- **ADA certification processes**, involving on-line registration, are very difficult where seniors do not have access to a computer.
- Affordability of bus fares is of concern to fixed-income seniors but is certainly more affordable than the rising costs of fuel.
- *Trip chaining* is an important need where individuals need to make multiple stops on a single outing but the public transit programs can't accommodate this.
- **Same day transportation** is a need for B-line paratransit users who cannot always anticipate certain trip needs, particularly medically-oriented trips. There is difficulty in getting these trip needs met.
- Non-emergency medical transportation is needed, usually for trips between communities such as Chico to Paradise medical facilities where it is difficult for frail or not-well seniors to use existing B-Line services.

Seniors in Butte County, at 15.7 percent of the population, exceed the statewide average of 13 percent. This is the fastest growing population sub-group given the aging baby boomers and Butte County's attractiveness as a retirement area for some seniors. Of the County's increasing population, it may represent disproportionate shares of that growth. Seniors are fairly evenly distributed around the county, with a few concentrations around Paradise, east of Oroville and in the mountain communities along the 70 corridor, around Concow and between Berry Creek and Buck's Lake, as well as a larger area south and east of Lake Oroville.

Table 6-1, following summarizes the needs that were described by Butte County consumers and their representatives in relation to particular client groups, the types of transportation modes that can serve their needs and the projects or strategies that these needs suggest.

Table 6-1, Target Population Transportation Needs, Resources and Possible Responses

	and Possible Responses								
Target Population	Special Transportation Needs and Concerns	Transportation Modes	Potential Transit or Transportation Projects/ Solutions						
Seniors, Able- Bodied	Lack of knowledge about resources. Concern about safety and security Awareness that time when driving might be limited.	 Fixed-route transit Point deviation and deviated FR Senior DAR Special purpose shuttles: recreation, nutrition, shopping 	 Single point of information Educational initiatives, including experience with bus riding <u>before</u> it is needed. Buddy programs; assistance in "trying" transit Transit fairs, transit seniors-ride-free days or common pass 						
Seniors, Frail and Persons Chronically III	 Assistance to and through the door. Assistance with making trip arrangements On-time performance and reliability critical to frail users. Assistance in trip planning needed. Need for shelters Need for "hand-off" for very frail 	 ADA Paratransit Emergency and non-emergency medical transportation Escort/Companion Volunteer drivers Special purpose shuttles Mileage reimbursement service 	 Escorted transportation options Door-through-door assistance; outside-thevehicle assistance. Increased role for volunteers. Technology that provides feedback both to consumer and to dispatch; procedures to identify frailest users when traveling. Individualized trip planning and trip scheduling assistance. Expanded mileage reimbursement program. Driver sensitivity training. Appropriately placed bus shelters. 						
Persons with Disabilities	- Service quality and reliability - Driver sensitivity and appropriate passenger handling procedure - Concerns about wheelchair capacity on vehicles/ pass-bys - Need for shelters - Sometimes door through door or issues of "hand-off"	 Fixed-route transit ADA Paratransit Emergency and non-emergency medical transportation Special purpose shuttles Escort/Companion 	 Single point of information; Information as universal design solution. Continuing attention to service performance; importance of time sensitive service applications. Driver education and attention to procedures about stranded or pass-by passengers with disabilities. Aggressive program of bus shelters. Vehicles, capital replacement. 						
Persons of Low- income and Homeless Persons	- Easy access to trip planning information - Fare subsidies (bus tokens or passes) that can be provided in a medium that is not cash - Breaking down the culture of poverty that uses transportation as the difficulty for not moving about the community Difficulties of mothers with multiple children - Need to bring along shopping carts - Difficulties with transfers within and between systems; long trips.	- Fixed-route transit - Point deviation and deviated FR - Special purpose shuttles (work, training, special education, Headstart, recreation) - Van pools, ridesharing, car sharing	 Creative fare options available to human services agencies. Increased quantity of bus passes available. Universal pass for services across county. Bus passes available to those searching for jobs or in job training programs; cost-effective. Special shuttles oriented to this population's predictable travel patterns. Education about transit to case managers, workers with this population. Feedback to transit planners on demand; continued work to improve transit service levels (coverage, frequency, span of hours) Training of staff to train consumers Vanpool assistance, ridesharing connections 						
Persons with Sensory Impairments	Difficulty in accessing visual or auditory information. Possible door-to-door for visually impaired Driver sensitivity	 Fixed route transit ADA Paratransit Demand response Volunteers/ mileage reimbursement 	 Single point of information; information in accessible formats Guides (personal assistance) through information Driver training critical to respond to needs. 						
Persons with Behavioral Disabilities	 Medications make individuals sunsensitive and waiting in the sun is not an option. Medications cause thirstiness; long hour waits in the heat can lead to dehydration. Mental illnesses can make it frightening to be in public spaces. Impaired judgment and memory 	 Fixed route transit ADA Paratransit Special purpose shuttles Escort/Companion 	 Possibly special shuttles oriented to these known predictable travel needs. Driver training projects to provide skills at managing/ recognizing behaviors of clients. Aggressive program of bus shelters "Hand-off" can be critical for confused riders, passing them off to a responsible party. Important that driver understand riders' conditions. 						

6.2 Human Services Agency Transportation Needs

Agency personnel, through the stakeholder surveys, interviews and in project workshops, expressed various institutionally-oriented needs and concerns related to transportation.

- Non-emergency medical transportation of considerable concern to agency representatives and to Merit Medi-Trans personnel who report turning down between four to six trip requests daily and anticipating more with the planned ten percent statewide budget cuts. MediCal funded transportation for dialysis patients may be reduced to trips within a 7 mile radius of the dialysis facility.
- Bus pass purchases are a significant investment area for Butte County human services agencies with survey respondents identifying almost \$560,000 in expenditures for bus passes during 2007 of the total \$5.5 million reported. However, agency knowledge of Butte County's public transportation services is limited, as is their understanding of how to contribute to its planning processes, despite some knowledge of their consumers' travel needs. Strengthening the relationships with human services agencies whose clientele use public transit, particularly agencies serving the low-income, will have value to public transit planners.
- **Mileage reimbursement** is another area of investment with \$847,000 reported in 2007 expenditures through the survey. These funds are presumably going to staff, to volunteer drivers and to consumers themselves. These funds are likely to be further stretched by increasing fuel costs.
- Insurance issues and liability concerns were expressed by a number of agencies,
 presumably related to use of staff persons in transporting consumers and for
 volunteer programs. Addressing insurance needs, through various insurance
 pool and non-profit or volunteer-oriented insurance programs may be an
 important coordination opportunity.
- Transportation is not viewed as a function of interest or concern to human services agencies until it becomes critical because consumers cannot get to needed services, treatment, education and enrichment opportunities. Human services agencies commented in the survey "this is not our function". Funding for transportation is very limited and is seen as a line item that "takes away" resources from other programmatic areas.
- Access to public transportation is non-existent in remote areas of the County
 and it is these areas where human services agency personnel, across service
 systems, have great difficulty addressing consumer needs. Communities where
 agency staff indicate some service or increased service is needed include:
 - Paradise Pines and Magalia
 - Concow, Deadwood and Yankee Hill
 - Berry Creek, Merrimac and Buckeye
 - Feather Falls and communities east
 - Strawberry Valley
 - Thermalito
 - Palermo
 - Biggs and areas adjacent to Gridley

- Inter-county trip needs surfaced, specifically into Sacramento medical facilities, although partially addressed through VA resources and HIV/AIDS programs and Greyhound bus service.
- Multiple agencies are serving consumers in the same remote areas, usually because the lower cost housing alternatives attract the target populations. There is likely opportunity to develop coordinated service responses. However there is no mechanism for human services personnel --- across different systems to find one another in order to coordinate transportation solutions for their clients.
- ADA certification difficulties, or perceptions of difficulty, continue with the
 institution of the largely web-based ADA certification process. Caseworkers
 wish to assist consumers in completing their applications but that is difficult
 without the consumer's pin number, something easily misplaced or lost for the
 more frail, confused individual.

6.3 COMMUNITY INFRASTRUCTURE NEEDS

A final grouping of needs involves those that are infra-structure based. To some degree these overlap with the concerns of human services agencies expressed in the preceding subsection, but they also represent some larger, systems issues that coordination planning must accommodate.

- Transportation-providing agencies identified a number of important needs to
 maintain and protect the investment represented among existing providers,
 notably the Work Training Center and Merit Medi-Trans who operate dozens of
 vehicles and other smaller non-profit transportation providers such as the Peg
 Taylor Adult Day Health who operate just a couple of vehicles. Needs include:
 - Aging fleets, in need of replacement, estimated as almost half of the identified 100 vehicles reported through the survey process;
 - o *Lift-equipped vehicles*, where only 31 percent are lift-equipped.
 - Support services including driver recruitment, driver training and retraining, where compliance with GPPV rules [general public paratransit vehicles] make for complex hiring and training requirements.
 - Insurance pooling with concerns expressed about the type, availability and costs of insurance to provide the specialized transportation discussed in this Plan.
- Public transit service concerns did surface, as they typically will during any type
 of outreach process. Areas for attention, suggested by this plan, include both
 planning and operational issues:
 - B-Line planning opportunities -- continuing to explore service expansion capabilities to increase the frequency for various two-hour frequency routes, expand the operating hours of service, particularly into the evenings for routes serving retail areas where entry-level jobs exist, and for expanded weekend services. For areas beyond the existing public transit footprint, further consideration is indicated to expand deviated fixed-route options such as the Paradise Pines/ Magalia run,

possibly in collaboration with human services agencies. Attention to the transfer location scheduling is indicated to see what improvements in connectivity can be achieved to address reported regularly missed connections for riders transferring between routes.

- Operational issues for B-Line fixed route -- continuing attention to driver training is needed around stop announcements and the information resource represented by drivers; service reliability may warrant attention particularly related to leaving stops early and missing vehicle runs; attention to the transfer procedures may provide opportunity to "hold" certain buses when connecting riders are aboard. Equipment issues were raised, with reports of vehicle breakdowns, suggesting that both maintenance procedures and the capital replacement plan be reviewed.
- Operational issues for B-Line paratransit paratransit users and their representatives consistently describe difficulties with the dispatch and call taking functions that could be indicative of a service at capacity or could suggest need for somewhat higher staffing levels at the dispatch/ call taking station during high call volume times. There are reports of inconsistent information about trip-scheduling provided to consumers and, particularly among seniors who get confused easily, this can be difficult. Ride time and wait times, as with all paratransit programs, need continual monitoring to determine whether there are patterns of service deterioration, whether ADA services are at capacity during peak hours or whether other issues impinge upon on-time performance.
- o **Informational issues** the B-Line service information is clear, colorful and easy-to-read for those with public transit experience. For seniors, oor case workers not familiar with public transit and for youth, among other groups, there are consistent requests for information "brokers" to assist individuals in interpreting available public transit, in trip-planning and for the most frail users, assistance is needed in making the trip reservation.
- Limited mechanisms for human services and public transit to come together around transportation planning. Although there is the annual unmet need process in place which BCAG actively promotes, most of the agency representatives contacted during this Plan development process were not familiar with this opportunity for testimony about needs or its potential outcomes. And although the SSTAC Social Services Transportation Advisory Council does exist and was revitalized during the B-Line consolidation processes, it tends to include players who are already familiar with transportation planning issues and opportunities. Also it does not it bring in the staff-level representatives of the low-income populations who are closer to consumer travel needs.
- Limited mechanisms exist for planning specialized transportation alternatives, those that are not "mass transportation" solutions but speak to the kinds of individualized needs identified in this Plan. This particular planning function has been no one's responsibility at regional levels, but fallen to particular agencies in relation to individual consumers, resulting in piecemeal solutions at best.

• **Physical environment improvements** that promote pedestrian travel are important, including sidewalks, curb cuts, bus benches and bus shelters as well as more bus stop signage. Transit users are also pedestrians.

6.4 Gaps and Duplication of Service

6.4.1 Gaps in Service

Public Transit Footprint in Butte County

The B-Line service structure has worked hard during the process of consolidating services beginning in 2001, to develop a rational and cost-effective service system that could reach most areas of the County that could reasonably be served by public transit. The phrase, "needs that are reasonable to meet", is critical to public transit as it speaks to the State requirement to achieve certain farebox returns. In other words certain levels of expense must be met by the passenger fares received in order for a public transit system to be viable and to comply with State statute.

Required by the California Transportation Development Act, this is typically a 10 percent recovery of fares to expenses for paratransit or in rural areas and 20 percent farebox recovery ratio for fixed-route services in urban areas. It is this requirement that limits what public transit can do, to the extent that transit planners attempt to design and put on the streets services that will be sufficiently utilized to meet these minimum farebox recovery requirements.

A consequence of this is that certain areas of the Butte County are not served, notably many of the small, isolated areas in the less-densely populated eastern and southern sections of Butte County, as well as some neighborhoods within or adjacent to the County's cities. These gaps in service represent areas of need for which coordinated solutions may be built.

<u>Different Service Systems</u>, <u>Different Cultures and Different Missions</u>

Public transit and human service agencies, on the face of it, have more differences than commonalities. Public transit's sole mission is the provision of public transportation while transit programs of any type are a support service for human services and not the sole or primary mission. Where human services transportation does exist, it is simply to help implement the agency's mission. In California, as in Butte County, the SSTACs – Social Services Transportation Advisory Councils – were convened to invite input and participation across the two systems.

The languages these service systems speak are unarguably different, using different acronyms and funding streams, measuring different indicators and with different emphasis on effectiveness versus efficiencies. These differences become problematic at the intersection of these systems. For public transit, this is with regard to customer service and to its annual planning processes around the unmet needs hearings. For human services the inverse is true when case worker and agency staff have difficulty translating "transit-ese" into a viable trip plan for a consumer in areas served by the B-Line or in knowing how to make input to the larger planning processes that can extend the reach of the existing public transit services. These differences make mutual service planning more complicated than it might seem on the face of it.

Coupled with this, human services agencies are spending some dollars towards meeting transportation needs. Whether these funds could be more efficiently spent, whether they could

leverage additional, not currently feasible public transit services or help to bring about new alternatives has not been explored, given the historical complexities of communication between the public transit and human services industries.

Infrastructure for Collaborative Responses, Including Volunteer Assistance

Finally, there has been limited opportunity for constructing collaborative, coordinated responses to the hard-to-serve transportation needs that this Plan documents. Again, the SSTAC is a means of bringing together leadership in the human services community with the public transit operator. But, as with many counties, the agenda tends to focus on the existing service system, namely the B-Line services, and the means by which to improve those. There has been little opportunity, save for the Section 5310 vehicle grant process, to promote coordinated responses nor has there been any meaningful institutional setting in which to construct these solutions.

Related to this, this Plan and supported by the May Project Development Workshop, has documented that multiple human service agencies in Butte County are providing services to individuals in the isolated communities that dot the foothills along Butte County's eastern boarder, and other somewhat more populated areas of the County. But there has been little way of coordinating trip provision, except for that which happens informally through the provider, such as by Merit Medi-Trans as one of the primary MediCal providers in the County.

The role of volunteerism in Butte County surfaced as an important resource, both through the interviews and in the survey with 13 agencies reporting some type of volunteer driver activity. There is real opportunity in Butte County to extend existing, purchased transportation through appropriate volunteerism. Volunteer programs have been significant elsewhere in the country in responding to needs of seniors who are decreasing their driving, for children and youth in isolated communities who need to get into services or other individuals in-need of time-limited transportation assistance, such as cancer treatments. Again, while individual programs have noted significant volunteer activity, there is no mechanism to match potential volunteers with individual needed trips.

6.4.2 Service Duplication

Multiple Transportation Operations

There is minimal evidence of duplication of transportation resources within Butte County. That said, it is a fact that Butte Community College, the Work Training Center, Merit Medi-Trans and the B-Line collectively operate approximately 90 vehicles and many of these vehicles pass one another during a typical day and over the course of a week. These vehicles do not necessarily represent duplicative resources. They may however be underutilized and not well targeted towards some of the harder-to-serve needs identified by this Plan. As such, these vehicles represent opportunity for coordinated responses to these needs.

Rethinking the Role of the Public School Transportation Providers

Public school transportation is not necessarily a duplication of service but it may represent an untapped resource, particularly in the very low density areas of the County and as the State budget deficit threatens the "business as usual" approach to public school transportation. Four school districts responded to the survey – Oroville Adult Education and Oroville Union High School, as well as Feather Falls Union School district and Durham Unified School District. Additionally, a stakeholder meeting involved the two significant post-secondary educational

systems, Butte Community College and Chico State University, as well as the Chico Unified School District. There is not clarity about who and in what ways coordination can unfold with these service systems, largely because of the public transit prohibition on carrying school children exclusively. But clearly, dialog needs to continue and ways sought to better integrate these resources into a larger system that meets specialized transportation needs.

6.5 SUMMARY OF NEEDS. SERVICE DUPLICATION AND GAPS

This chapter has examined needs of target population members to identify key characteristics suggesting both transportation issues and potential strategies or responses to these. The individualized needs of consumers, various organizational issues and requirements of human services agencies were explored, as well as several infrastructure needs

Issues were also examined in terms of duplication and gaps in the existing service network. Those identified included:

- Achieving efficient use of the significant numbers of vehicle operating across Butte County, estimated at 250 vehicles.
- Redefining the role of public school transportation, both secondary and postsecondary schools, in a coordinated service model.
- Recognizing that the existing B-Line service footprint is limited by requirements to achieve certain efficiencies, as required by State regulation, limiting responses to the low-density areas of the County.
- Recognizing the challenges of two very different services systems public transit and human services – who do share some responsibility for the mobility of these three target groups.
- Recognizing that there is no infrastructure, no mechanism in place that brings together those human services agencies who share the mobility concerns of their consumers with the public transit providers who may have some tools to facilitate meeting these needs.

7.0 TRANSPORTATION FUNDING RESOURCES IN BUTTE COUNTY

7.1 Introduction

The availability of funding will frame the types and scale of solutions possible to the array of issues this Plan has identified. This chapter identifies a range of funding sources available for transportation of the target populations in Butte County. Estimated funding levels are provided for funding sources where available. Most of these are specific transportation funding sources. Many programs which provide funding for social service programs can also be used for transportation; however, the amounts available for transportation are most often part of a larger funding category and thus impossible to identify as specific transportation funds.

7.2 FEDERAL TRANSPORTATION FUNDS

7.2.1 Specialized Transportation

- Section 5310 provides capital grants for the transportation of seniors and people with disabilities. Funds are allocated to the state. For the current funding cycle, approximately \$12 million in federal funds is available for California agencies, through a competitive application process. In recent years, the Work Training Center has received funding through Section 5310. Other non-profit agencies and public agencies in Butte County are also eligible to submit applications for funding.
- Section 5316 provides grants for Job Access and Reverse Commute transportation projects. Funding is available for transportation of low-income persons to and from employment-related activities. BCAG estimates a total of \$51,000 for Butte County agencies.
- Section 5317 provides grants for New Freedom programs, supporting new or expanded transportation projects providing service beyond basic requirements of the Americans with Disabilities Act (ADA). BCAG estimates a total of \$30,000 for Butte County agencies.

7.2.2 Other Federal Funds

Butte County receives funding through other federal transportation programs for public transit in its urbanized and rural areas. <u>Section 5307</u> provides funding for urbanized area public transit. The Butte County 2008 Regional Transportation Plan estimates Section 5307 funding totaling \$1.5 million. <u>Section 5311</u> provides funding for public transit in non-urbanized areas. The Butte County 2008 Regional Transportation Plan projects annual 5311 funding totaling just over \$500,000.

7.3 STATE TRANSPORTATION FUNDS

7.3.1 State Transportation Funds

California's <u>Transportation Development Act</u>, the major state transportation funding source, allocates funding for transportation purposes including transit, local streets and roads, and pedestrian pathways. Butte County's annual allocation from the Local Transportation Fund, from the state's sales tax, is estimated at \$6,820,000. An additional \$1.1 million is expected from the State Transit Assistance funding.

7.3.2 Other State Funds

Many departments within the State of California provide funds to local agencies for a variety of purposes. These purposes may explicitly or implicitly provide funding for transportation.

Department of Education

Funds are allocated for home-to-school transportation and special education transportation. The California Department of Education identified the FY 2007-08 allocation to Butte County as just over \$8 million for these purposes. Six agencies responding to the survey identified the Education Department as a source of funds for transportation.

Department of Developmental Services (DDS)

DDS allocates funds to each of the state's regional centers for persons with disabilities for many services, including transportation. The Far Northern Regional Center provides services in nine northern California counties, including Butte County. The regional center, responding to the survey as part of this study, indicated that \$1.7 million is spent for client transportation.

Other

Funds are also available through the California Departments of Rehabilitation and Health Services, and these departments were identified by survey respondents as sources for transportation funding. However, transportation is not identified by these departments as a separate budget category.

7.4 OTHER POTENTIAL FUNDING FOR SPECIALIZED TRANSPORTATION

There are many other sources of funding for more general purposes which can also be used for transportation, as a necessary means of enabling members of the target populations (seniors, persons with disabilities, low-income persons) to obtain vital services. Because these funds are not specifically targeted for transportation, it is difficult if not impossible to identify the transportation expenditures within these categories. In addition, local jurisdictions and other agencies might not spend any portion of these funds on transportation. Several of these funding sources are discussed in the following paragraphs.

Older Americans Act

Title IIIB of the federal Older Americans Act provides funding for supportive services and senior centers. Transportation is one purpose for which Title IIIB funds can be spent.

Ryan White CARE Act

This act provides federal funding for people living with HIV/AIDS for health care and related services. These related services can include transportation, depending on local decisions.

Chaffee Act (Foster Care Independence Act)

The Chaffee Act expanded provisions for independent living programs for youth transitioning from the foster care system. The act provided states with funding and with flexibility in designing programs for this group. In preparing for the transition from foster care, funds can be spent on a variety of independent living programs including education, training, daily living skills, etc. Transportation can be a service furthering these purposes.

Tobacco Settlement Revenue

These funds are part of a multi-state settlement with tobacco companies in 1998 providing annual funding to each county. Each county determines how to spend these funds. Some counties have used Tobacco Settlement funds for transportation-related purposes. The Butte County budget for Fiscal Year 2007-08 identified a total of \$2,450,000 in Tobacco Settlement funds; it is unclear how these funds are being spent in Butte County.

CalWORKS

CalWORKS is California's Temporary Assistance for Needy Families (TANF) program. The program is designed to move recipients into the workforce supported by a range of services including transportation.

Other

Agencies also use more general funds for client transportation, including donations, grants, client fees, and similar sources.

8.0 RECOMMENDATIONS

8.1 Introduction

This concluding chapter presents the direction suggested by the planning process, by the stakeholders and participants, and by analysis of the Plan's findings. Two key resources are described: the Federal Mobility Manager construct; and the California *consolidated transportation services agency* (CTSA). These are tools by which to address the Plan's findings. A vision is presented along with three goals, 11 objectives and 37 potential strategy areas and/or projects. The matrix presenting these organizes the recommended responses to the Plan's findings and can itself be a planning tool to focus implementation steps that follow.

8.2 LEADING TOWARDS RECOMMENDATIONS

Meeting the specialized transportation needs of three diverse and often overlapping segments of the target populations -- seniors, persons with disabilities and individuals of low-income -- will continue to be challenging. Actions and strategies developed will be effective in incrementally improving services, by providing as many travel options as possible to the target populations based upon their individual needs and informing them about those options. This is accomplished by gradually building the capacity of both public transit and human service agencies/organizations to develop and implement coordinated projects, Plans and programs. Both public transit and human service agencies/organizations must be active partners in this capacity building process.

The actions necessary to increase the capacity of public transit to offer improved access to transportation for the target populations will differ from those actions and strategies needed to build capacity of human service agencies. For example, in Butte County, the B-Line public transit programs have already built a significantly integrated service system. Taking steps to increase the capacity of that service system will involve a range of technological and operational service initiatives, some already programmed through transit's long-range planning processes.

But these public transit initiatives alone – those in place and those planned for future implementation – will not be sufficient to address all or even some of the critical needs identified in this Plan without partnerships and contributions of the human services sector. Such partnerships are critical to building the capacity and reliability of human service transportation providers, and to expanding the alternatives offered, in order to complement public transportation services. The overall mission of human services agencies is to serve individualized needs, including operating services that public transportation cannot (e.g., non-emergency medical, door-through-door, volunteer services, etc.). For these reasons, particularly important are those project opportunities designed to strengthen the ability of human service agencies to provide the hard-to-serve trip needs of seniors, persons with disabilities and low-income individuals.

8.3 REGIONAL MOBILITY MANAGER - A FEDERAL TOOL PROMOTING COORDINATION

A critical tool for addressing needs identified in this Plan was articulated in Federal regulation. Mobility managers or mobility management, as described in the Federal circulars delineating the requirements of JARC, New Freedom and Section 5310 programs, is viewed as central to the concept of coordination. As such, implementation of mobility management initiatives are eligible capital expenditures, funded at the larger Federal share of 80 percent. The local share of 20 percent may be made either by cash or by in-kind match.

Specifically, common language in the three program circulars identifies mobility management as an eligible capital expense:

"Supporting new mobility management and coordination programs among public transportation providers and other human services agencies providing transportation: Mobility management is an eligible capital expense.... Mobility management techniques may enhance transportation access for populations beyond those served by one agency or organization within a community.... Mobility management is intended to build coordination among existing public transportation providers and other transportation service providers with the result of expanding the availability of service." [FTA C 9050.1, p III-8; FTA C 9045.1, p.III-8; FTA C 9070.1, p. III-5]

"Mobility management activities may include:

- (a) The promotion, enhancement, and facilitation of access to transportation services, including the integration and coordination of services for individuals with disabilities, older adults and low-income individuals:
- (b) Support for short-term management activities to plan and implement coordinated services:
- (c) The support of State and local coordination policy bodies and councils;
- (d) The operation of transportation brokerages to coordinated providers, funding agencies and customers;
- (e) The provision of coordination services, including employer-oriented Transportation Management Organizations' and Human Service Organizations' customer-oriented travel navigator systems and neighborhood travel coordination activities such as coordinating individualized travel training and trip planning activities for customers;
- (f) The development and operation of one-stop transportation traveler call centers to coordinate transportation information on all travel modes and to manage eligibility requirements and arrangements for customers among supporting programs; and
- (g) Operational planning for the acquisition of intelligent transportation technologies to help plan and operate coordinated systems... "[Circulars released 5/1/2007]

The Mobility Manager concepts as described in these circulars, are not new to California. This guidance includes many of the elements of the original AB 120 (1979) and SB 826 Social Service Transportation Improvement Act. <u>The difference is that the mobility manager roles and responsibilities now encourage coordination between public transit and human services transportation, rather than exclusively focused on human services organizations.</u>

8.4 THE CTSA – A STATE TOOL FOR BUILDING COORDINATION

This second tool was called out in the August 2007 Performance Audit of BCAG, where one recommendation was provided to "designate a *Consolidated Transportation Service Agency(ies)* to improve coordination of social service transportation services."

The performance audit recommendation goes on to suggest, "one way to improve special transportation services is to designate a Consolidated Transportation Services Agency to serve as a one-stop shop for transit information, with Agency staff matching up riders with the transportation services that meet their needs. The Agency could provide a Mobility Management Center to provide mobility training and coordinate transportation services provided by local volunteers."

This coordination Plan has received significant input from the stakeholder interviews, surveys of human service agencies, and stakeholder forums that supports this recommendation. This sub section following reviews the regulatory context of a CTSA, provides other California examples, and discusses possible options for Butte County.

8.4.1 CTSA Regulatory Context

The concept of CTSAs was created by State Law, AB 120, in 1979 with the approval of the Social Services Transportation Improvement Act. The Act was codified in the California Code of Regulations, Title 21, Division 3, Article 7. The following are the most important highlights of the relevant regulations:

- ➤ The designation of the CTSA is by the RTPA, BCAG in Butte County
- > Can be one of four type of entities:
 - (a) A public agency, including a city, county, operator, any state department or agency, public corporation, or public district, or a joint powers entity.
 - (b) A common carrier of persons as defined by the Public Utilities Code, engaged in the transportation of persons.
 - (c) A private entity operating under a franchise or license.
 - (d) A nonprofit corporation.
- > BCAG may designate one or more consolidated transportation service agencies.
- ➤ A consolidated transportation service agency may file claims under Article 4.5 (community transit services defined in regulations for intra-community trips for those, such as disabled individuals, who cannot utilize regular fixed route service) of the Transportation Development Act for its operating costs, and for its costs in purchasing vehicles and communications and data processing equipment, to the extent specified in other regulatory sections.
- ➤ Up to 5 percent of Local Transportation Fund monies can be allocated by BCAG for all Article 4.5 claims. Claims may also be filed by a consolidated transportation service agency for state transit assistance funds as specified in other regulatory sections.
- ➤ The geographic areas of consolidated transportation service agencies may be overlapping. For the purpose of filing claims, the division of responsibility between designated consolidated transportation service agencies shall be by the transportation service provided (i.e., by geographic area, route, time, clientele, etc.) and not by service function (i.e., operation, maintenance, marketing, etc.).

- A consolidated transportation service agency can contract with various contractors to perform different service functions.
- > BCAG as the RTPA cannot be the CTSA.
- ➤ CTSA services must meet performance indicators but these may be set by the local transportation planning agency, specific to the CTSA activities and therefore at levels different from the farebox recovery requirements that traditional fixed-route and paratransit services must meet. This provides somewhat more freedom to CTSA activities to test markets and observe what demand will actually present for very targeted services.

8.4.2 CTSA Examples

California CTSAs are of many "flavors" in terms of the functions and services they provide. These can be shared maintenance, marketing, training or service delivery depending on local needs. Table 8-1 presents a sampling of CTSAs from around the state, reporting on these in terms of their organizational structure, functional responsibilities, and other key measures. The CTSAs described include organizational entities in South Placer County, Sacramento and San Luis Obispo Counties, San Bernardino and San Diego Counties.

Findings suggested by Table 8-1 include:

- Consolidated Transportation Services Agencies (CTSA) vary widely in how they view their roles relative to the types and categories of services they provide and how these services are provided.
- > Transit Districts may serve as the CTSA or a separate entity can be designated by the public agency(ies) within the county.
- Not all of the CTSAs reviewed operate service. However, those agencies that do operate service do so either through direct provision of contracted services on behalf of other agencies or through contract arrangements with other public transit providers.
- One example of a non-providing CTSA is a provisional CTSA who develops and distributes information relative to specialized transportation resources in the county and maintains a comprehensive database of public transit and human service agencies in the county that operate transportation and/or serve clients needing transportation.
- CTSAs are funded from a variety of local, State and Federal funding sources, including donations and gifts.
- One CTSA offers expanded services to all segments of the public serving a diversity of trips need, including serving the individual trip needs of ADA riders as well as the trip needs of commuters. However, recognizing that some transportation revenue sources can be targeted to specific categories of riders (e.g. funding for programs for seniors and disabled populations) this expanded role can create challenges in the allocation of funding resources to the appropriate services, particularly in multi-jurisdictional transportation environments.
- CTSA roles evolve over time based upon the needs of the individuals needing transportation, the area being served and local political decision-making.
- Mobility training for users of services (both paratransit and fixed-route) is a valuable program offered by multiple CTSAs.

Table 8-1, Characteristics of Selected Consolidated Transportation Services Agencies (CTSAs)

AGENCY NAME CONTACT	DESCRIPTION OF AGENCY LEGAL	TRANSPORTATION SERVICES/	SERVICE AREA	# OF ANNUAL TRIPS PROVIDED	OTHER SERVICES OFFERED	FUNDING SOURCES	COMMENTS
United Cerebral Palsy:	A non-profit agency started in 1993; Ride-On serves	CLIENTS SERVED Operates door-to-door shuttle	San Luis Obispo	278,000 trips	Support services for agencies	TDA Article 4.5	Emphasis on
Ride-On - CTSA San Luis Obispo County Mark Shaffer.	as the CTSA and a Transportation Management Association (TMA) for SLO County. The agency operates a variety of service types across the county.	services for seniors, individuals with disabilities and social service agencies.	North Coast South Coast	provided in 2005.	and organizations include: vehicle maintenance driver training emergency evacuation plans	State Transit Assistance (STA) TDA Article 8	contract transportation; Expanded CTSA role for service provision
Executive Director					drug/alcohol testing ride planning provides general public services: vanpools, airport/Amtrak shuttles Guaranteed Ride Home, Visitor shuttles, Lunchtime express, medical shuttles and special event transportation.		and support services.
Paratransit, Inc CTSA Sacramento County Linda Deavens, Executive Director	A private non-profit corporation started in 1978 and designated on July 1, 1988 as the CTSA by the the County of Sacramento, Sacramento Regional Transit District (RT) and Sacramento Area Council of Governments (SACOG).	Provides demand-responsive services to individuals and agencies serving people with disabilities and seniors within the county. In 1992, partnered with Sacramento Regional Transit (RT) to also operate complementary ADA paratransit services.	Sacramento Carmichael Elk Grove Fair Oaks Folsom -light rail only Rancho Cordova Citrus Heights Rio Linda Elverta Orangevale North Highlands	FY 2004 service levels: 761,847 DAR/ADA trips.	Mobility Training provides assistance to individuals learning how to ride fixed-route buses and light rail.	Measure A (1/2 cent sales tax) and TDA Article 4.5, and local funding from the city and county of Sacramento.	RT Accessible services makes age and/or ADA eligibility determination. 89.4% of DAR clients are ADA eligible with only 10.6% age eligible.
Easy Lift - CTSA South Santa Barbara County Rene Andrade, Ops. Manager (805) 681-1417	Easy Lift is a non-profit organization designated as the CTSA for South Santa Barbara County mandated to provide a variety of transit services for the community in a cost-effective manner.	Since 1979 Easy Lift has provided frail elderly and temporarily and permanently disabled individuals with wheelchair accessible transportation. Also provides South County residents with physical or cognitive impairment that excludes them from using fixed route services. Easy Lift also offers contract transportation for social service agencies and group homes.	Santa Barbara Carpenteria Summerland Montecito Hope Ranch Goleta Mission Canyon	No ridership numbers available (Client base:1,150 persons)	Mobility training for seniors and physically challenged. Loaner vehicle program	S.B county Measure D; General fund and donations from businesses and individuals. 5310 funding for vehicles	

Table 8-1, Characteristics of Selected Consolidated Transportation Services Agencies (CTSAs), continued

Full Access & Coordinated Transportation CTSA San Diego County Rob Carley Executive Director (760) 967-4197	A non-profit corporation established in 2006 and designated as the CTSA for San Diego County in October 2006.	CTSA in formation stages. Long-term vision: All people living in San Diego County will have full mobility within their community through accessible transportation that meets their individual needs.	All areas of San Diego County.	No service currently operated	FACT is currently updating the existing specialized transportation website that will be designed to provide individuals and agencies and organizations with service and contact information on transportation options in the county. FACT is also continuing stakeholder survey efforts for Action Networks throughout the county. FACT is also evaluating a location for a call center and potential coordinated dispatch	TDA Article 4.5 New Freedom	Newly formed agency with active involvement of public transit operator and other human/social service agencies. Board composition: NC Transit District City of Vista City of Carlsbad City of Solano Beach SANDAG County of San Diego Aging and Ind. Serv.
SANBAG Provisional CTSA San Bernardino County Beth Kranda Michael Bair (909) 884-8276	The provisional CTSA is SANBAG, which is the county transportation agency, a public agency. The CTSA was designated as such in 1981. SANBAG anticiptes that a fully-operational CTSA will be formed, for at least the San Bernardino Valley area, in 2010 whe	CTSA has two functions: Conduct annual inventory and publish specialized transportation directory, and hosting of training events and workshops for agencies and transportation providers. Also, Public and Specialized Transportation Advisory and Coordination Council (PASTACC) with membership of 80 individuals and agencies which convenes quarterly. No transportation services are operated.	All of San Bernardino County	No transportation service operated	CTSA participates in all regional planning activities related to plans and programs for seniors, individuals with disabilities and low-incomes.	TDA Funding, unspecified	Emphasis on communication and information has strengthened the coordination environment in the county.
South Placer County CTSA Placer County David Melko, PCTPA (530) 823-4090	This CTSA is newly established this spring, 2008, as a joint power authority using the Board of the Placer County Transportation Planning Agency as a reconstituted Board for the CTSA. The South Placer County CTSA was formed following Pride Industries'	Several service modes: 1) some funding to the local paratransit operators for support of a regional paratransit system; 2) I-Med, a non-emergency medical transportation program to which three hospitals in the area may be contributing; 3) I-Ride program f	Rocklin-Loomis Granite Bay Highway 49 Senior services for: Lincoln Roseville Citrus Heights Central and northern Placer Co, to Colfax	Ridership information is not yet available for these newly constructed services. Historically, the CTSA operated by Pride Industries provided a mix of the same services but reliable trip information is not available.	impaired for training and to health care appts. in Placer county. for seniors and persons with disabilities. Medi-Cal clients are	TDA Article 4.5 STA FTA 5310 DOE earmark for disability training programs Contract revenue	The new CTSA is palcing particular emphasis on data collection, on monitoring utilization and on continuing to define unmet needs

8.5 RECOMMENDED MOBILITY MANAGER/ CTSA ACTIVITIES IN BUTTE COUNTY

BCAG and its member organizations have done an exemplary job of coordinating and consolidating public transportation services into B-Line services. Public transportation services cannot meet the full extent of human service agency transportation needs, as explored through this Plan. There is a need to provide a similar mechanism for coordination and possibly consolidation of trip needs sometimes met by human service agencies. A CTSA provides this function.

The Coordinated Public Transit-Human Services Transportation Plan for Butte County provides three categories of recommendations, under the umbrella of a vision statement and relying heavily upon the structure that a regional Mobility Manager/CTSA can provide. This regional Mobility Manager/CTSA establishes the needed mechanism for adoption and implementation of recommendations within each of the categories.

The Vision statement is:



Three general areas of recommendation are outlined below for achieving this vision:

- <u>Facilitating leadership and infrastructure:</u> The formation of a regional Mobility Manager/CTSA entity is recommended and decisions will need to be considered around this. The CTSA would provide the house, the infrastructure, to further coordination and consolidation of human service agency transportation and its integration with B-Line's public transit network.
- 2. <u>Building services:</u> The regional Mobility Manager/CTSA would collaboratively work with the human service agencies to build a modest network of service to fill in critical gaps that cannot be met with public transportation services.
- 3. Enhancing information portals: The regional Mobility Manager/CTSA could be the central clearinghouse for information on human service agency transportation. Importantly, it can establish a one-stop source for both public and human service transportation information. In the long-term, there may be 211(information) or 511(transit) services developed in Butte County that could assume some of this function. The CTSA could provide an important transportation linkage to the 211/511 function and go beyond it with trip-arranging tools.

With the above general overview of functions, the following types of specific coordinated organizational approaches and services could be undertaken through a Mobility Manager/CTSA, with implementing objectives and potential projects and strategies enumerated in Table 8-2 following on page 97.

1. Facilitating Infrastructure

In stakeholder interviews and at the May 15, 2008 Project Development Workshop in Chico, stakeholders were unanimous in voicing the need for a full-time Mobility Manager to provide the means for putting together these functions. The Mobility Manager would be responsible for designing, building services, constructing, and promoting the information clearinghouse.

There are four essential issues. First, where should the Mobility Manager function be located? Second, what are the needed staffing levels necessary to sustain a Mobility Manager service in Butte County? Third, how should the position(s) be funded? Fourth, what is the recommended CTSA structure in Butte County to provide the Mobility Manager function?

Where should the Mobility Manager be located?

There are several options as to where the Mobility Manager function could be located.

- ➤ A coalition of human service agencies who can pool resources to provide coordinated services has emerged, presenting a conceptual approach to coordination termed the Right Ride (Appendix G). The "Right Ride" Project would integrate several modes of transportation to match individuals in need of a ride with the most appropriate kind of ride, creating cost effective access to essential care and services for low income adults with disabilities, including older and younger adults. The following organizations have identified interest in helping to develop a transportation related collaborative to facilitate the development and implementation of a project to address these needs, with more agencies to be identified as the concept moves forward:
 - Merit Medi-Trans Steve Horne, Owner
 - Peg Taylor Center for Adult Day Health Care Diane Cooper-Puckett, Executive Director
 - PASSAGES Carol Childers, Director Volunteer Services and Mary Neumann, Deputy Director, Area Agency on Aging
 - Independent Living Services Jay Harris
 - Butte County Behavioral Health Mental Health Services Act Betsy Gowan, Manager Wellness and Recovery

While this collaborative has significant potential, the draft proposal does not identify where the Mobility Manager function would be located but it is assumed in one of the collaborating agencies described above. Notably, if this particular coalition moves forward, it will be important to include representation of the service systems involved with Butte County's low-income population.

A significant constraint is the authorization processes used by each individual human service agencies. State agencies, such as the Department of Rehabilitation, and the local Far Northern Regional Center are likely to participate with funding only for specific vendors for transportation services provided and then only in relation to authorized services delivered to an individual consumer. In such a funding construct, there are no mechanisms available to share the cost of mobility management and shared dispatching.

A second option would be similar to the first one, but instead of an informal collaborative of organizations, grant funding could be provided to a single agency to provide the mobility management function. Three obvious candidates for this are WTC, Merit Medi-Trans and Veolia. Merit Medi-Trans is seeking non-profit status. All three organizations have call centers, and could provide the coordinated information and dispatching functions that have risen to the top of the list of human service agency needs.

- A third option is to form a new private non-profit and house the Mobility Manager under that umbrella.
- ➤ A fourth option was suggested in the recent BCAG performance audit. Under this scenario, there would be a separate JPA for B-Line with the new JPA including the Mobility Manager function as part of the B-Line family of services.

What are the short-term and long-term staffing needs of the Mobility Manager function?

In the long-term, it is projected there will be a need for 2.5 to 3.0 Full Time Equivalent (FTEs) positions required to fully staff the Mobility Manager function. The Mobility Manager would be the program manager, responsible for developing services, identifying and promoting coordination opportunities and, potentially, establishing the centralized information clearinghouse. There would also be the need for a full-time information handler and trip scheduler to match presenting riders with seats available with service providers. Finally, there is a need for a billing agent to handle agency billings and basic accounting of funding sources of participating human service agencies, including possibly the public transit operator, who actually operate and provide specific services.

In the short-term, while programs are being developed, it would be possible to start with just the Mobility Manager position to build and consolidate needed partnerships. However, by the second year, the dispatcher and billing agent would likely be required.

What are the funding options?

This is not an "either or" proposition. The most successful coordination effort and mobility management endeavors have been able to bundle a variety of funding sources.

The first funding source is funding that human service agencies already expend on transportation services, for fees for service and bus passes or bus vouchers. It was the intent of Congress, in promoting the coordinated activities of the JARC and New Freedom programs to encourage the leveraging of funds across both human services and public transit. However, most human agencies have funding available only for direct service provision, and not to provide the administrative infrastructure that the Mobility Manager function represents.

The second funding option, importantly then, is grant applications for FTA 5310, 5316 or 5317 funding to support the Mobility Management function. Each of these programs allow for the Mobility Manager function to be treated as a capital expense, requiring just a 20% match. In Butte County, the FTA 5316 and 5317 funds are quite modest, and would likely not fund the 2.5 to 3.0 FTEs required for the Mobility Management function.

The third funding option is for BCAG to designate a CTSA and allocate sufficient Article 4.5 monies to fund the Mobility Management function, possibly augmenting the FTA 5316 and 5317 funds but alternatively, using those funds to support specific projects and funding the infrastructure piece that the Mobility Manager represents with Article 4.5 funding.

What is the recommended CTSA structure for Butte County?

Several options exist for where the Mobility Manager function could be "housed". An existing for-profit, non-profit, informal collaborative with a lead agency, or a separate JPA for B-Line and the Mobility Manager function could all be effective in providing the Mobility Manager function.

This should be up to local decision-makers and stakeholders to decide and no recommendation is warranted at this time.

It is strongly recommended, however, that BCAG designate a CTSA to one of the above entities with sufficient Article 4.5 money to provide the necessary Mobility Manager staffing, administrative office (if required), and utilities as the backbone for the Mobility Manager function. Under this scenario, BCAG would fund the staffing infrastructure and human service agencies would leverage this funding to support the development and implementation of CTSA services. This is the recommended partnership arrangement between BCAG and the human service agencies.

2. Building Services

The Mobility Manager would work with participating agencies to design services, develop budgets, and then to fund specific services. The Mobility Manager could become involved in brokering needed support services, such as vehicle maintenance, driver training, and insurance opportunities.

Brokering needed rides with available transportation capacity is critical both to meeting unmet transportation needs and to capturing potential human services funding targeted to individual consumers. Coordinated trip scheduling and dispatch were the highest ranked by both human service transport providers and non-provider agency types in the survey of stakeholder agencies. Both WTC, Inc., and Merit Medi-Trans have available seat capacity on given trips and are willing and able to provide rides on a reimbursable basis. There is a need for a centralized dispatch system and person to coordinate the needs and capacity on a daily basis. A billing system would need to be established and administered that then enables the human services funding to follow the consumer, with regard to transportation.

As described in more detail earlier in the report, the Mobility Manager could build the following types of services, in conjunction with the priorities of member organizations

- ➤ Non-Emergency Medical Transportation
- Volunteer rides
- ➤ Mileage reimbursement program
- > Special purpose shuttles from rural areas
- > Vehicle Maintenance
- > Driver training
- > Travel training
- > Transit pass youcher programs and distribution

3. Enhancing Information Portals

A centralized information source was the highest ranked coordination mechanism by all agency types. In the long term, a 211 general information service or 511 transportation information may become available to administer the basic information program. In the meantime, the CTSA could be responsible for developing a database system and provide a hotline and website portal for accessing this information.

The agency survey provides an excellent foundation for an inventory database to be shared among human service agencies, both to inform about other potential transportation services and as a baseline of "member" agencies in a CTSA organization that could be expected to grow.

Providing service and program information is a very distinct, different function from the daily dispatching of shared rides. In this function, information is provided to human service agencies on what vendors, for example, are available to provide travel training, how an agency can obtain transit passes, and what resources are available for group outings or special shuttles, to name just a few examples.

Other information roles to be developed, and are indicated as needed through this Plan. These could include trip planning and trip arranging activities for new users or the most frail users.

8.6 IMPLEMENTING OBJECTIVES AND POTENTIAL STRATEGIES

Following is a matrix that presents these three coordination goals in relation to guiding objectives and the possible strategies by which these objectives can be implemented. This matrix is designed for citation of individual objectives or even strategies in applicants' proposals for funding under Section 5310, 5316 or 5317.

<u>Facilitating leadership</u> goal involves five objectives oriented towards defining the Mobility Manager/CTSA roles and responsibilities. A series of 15 strategies suggest some, although not all, of the activities necessary for the design and implementation of an effective

<u>Building services</u> goal presents four objectives and fifteen strategies by which services are strengthened in terms of quantity to meet the growing target populations' and in terms of quality to be more responsive to the needs of individuals. Importantly, this goal points towards constructing coordinated responses in some of the unserved areas and pockets of Butte County.

<u>Enhancing information portals</u> goal involves three goals and nine strategies oriented towards information. The first objective anticipates a growing information base about transit and specialized transit services. Mobility training and travel training functions are promoted to assist various populations in accessing available populations. Finally, standardized reporting, for human service agencies, that includes defining project-specific performance measures is proposed. The capacity to identify success and failure will help to improve responses over time.

Table 8-2, Butte County Coordination Plan Recommended Goals, Objectives and Suggested Strategies

<u>VISION</u>: To Improve Mobility For Butte County Seniors, Persons with Disabilities and Persons of Low Income Through Coordinated Projects and Partnerships

GOAL 1.0: FACILITATING LEADERSHIP AND INFRASTRUCTURE

- 1.1 Establish a regional Mobility Manager/ CTSA capability to provide leadership on coordination around specialized transportation needs in Butte County.
- 1.1.1 Identify *lead agency* for regional Mobility Manager/ CTSA.
- 1.1.2 Define *roles and responsibilities* of the Regional Mobility Manager/ CTSA for the near-term and the longer term.
- 1.1.3 Establish a *strategic oversight committee* inviting highest level agency representation with BCAG with large human service agencies funding transportation services that could include: County Depts. of Public Social Services, Behavioral Health and Public Health as well as non-profits First Five, Far Northern Regional Center, North Valley Catholic Social Services.
- 1.1.4 Establish *mechanisms to promote coordination* including elements such as updating annually the resource inventory, establishing coordination working groups and periodic newsletters.
- 1.1.5 Continue to **expand the planning partners base** and grow membership in the Regional Mobility Manager/ CTSA structure; establish ongoing mechanisms for communication via email, surface mail and other strategies, using this feedback as one tool for updating the annual inventory.
- 1.1.6 **Promote the visibility** of the Regional Mobility Manager/CTSA and its function as a resource to its planning partners, utilizing all possible methods of communication.
- 1.2 Establish the Regional Mobility Manager's role in "growing" and strengthening projects responsive to the coordination vision, its goals and objectives.
- 1.2.1 Work at the agency and project levels to **promote and identify potential coordination projects,** assisting planning partners in designing effective projects and pursuing funding.
- 1.2.2 Establish a *technical assistance capability* for the Regional Mobility Manager/ CTSA to provide support to human services transportation agencies related to service efficiency, effectiveness and safety.

GOAL 1.0 FACILITATING LEADERSHIP and INF	RASTRUCTURE, continued						
1.3 Promote agency-level mobility managers within agencies and within social service systems through the Call for Projects and through outreach by the Regional	1.3.1 Identify, promote and develop agency-level mobility managers as internal transportation advocates and information resources.						
Mobility Manager/ CTSA.	1.3.2 <i>Establish formalized relationships</i> between the Regional Mobility Manager/ CTSA and the agency-level mobility managers to ensure collaboration.						
	1.3.3 Identify specific action areas and activities by which the Regional Mobility Manager/ CTSA and the agency level mobility managers can work together to promote the coordination Vision a Goals.						
1.4 Develop visibility around specialized transportation issues and needs, encouraging high-level political and agency leadership.	1.4.1 Conduct a biennial summit, to include highest leadership levels within the county, and all stakeholder partners to promote coordination successes, collaborative activities and to address outstanding policy issues in specialized transportation.						
	1.4.2 Promote the <i>inventory database as a coordination tool</i> , possibly in concert with 211/ 511 processes, encouraging participation and use at all levels and utilizing both web-based and paper products.						
1.5 Address physical infrastructure needs that assist pedestrians and thereby aid transit.	1.5.1 Work with local jurisdictions to <i>improve pedestrian access</i> to bus stops, including sidewalks and curb cuts.						
	1.5.2 Continue and expand as feasible, existing programs of placement of bus stop amenities , including bus benches and bus shelters, focusing on highest use areas, transfer locations and terminus or other areas with long waits between vehicle runs.						

GOAL 2.0 BUILDING SERVICES

2.1 Promote the <u>QUANTITY</u> of public transit, paratransit and specialized transportation services provided.

- 2.1.1 Review policies for pass and **bus ticket purchase and pass distribution** and develop voucher program strategies to increase the availability of fares subsidized for the lowest income individuals.
- 2.1.2 **Expand availability of public transit services** into later evening and earlier morning timeframes; increase Saturday and Sunday services; increase service frequencies on highest use routes with attention to inter-community routes.
- 2.1.3 Pursue *pilots for "same-day, immediate needs"* for those specialized transit users who required some limited same-day service capability.
- 2.1.4 Continue *dialog with secondary and post-secondary education systems* to identify potential coordinated transportation projects, potentially for support services and possibly for direct service delivery.
- 2.2 Promote the **QUALITY** of public transit, paratransit and specialized transportation services provided.
- 2.2.1 **Strengthen service provision capabilities** of human services transportation providers, through projects that promote coordinated driver training opportunities, technology solutions, communication improvements, coordinated maintenance and vehicle back-up capabilities, pooled insurance opportunities and other such strategies.
- 2.2.2 **Pilot trip brokering and vehicle resource sharing** capabilities, through CTSA leadership, to increase the ability of existing transportation resources to provide more trips.
- 2.2.3 Develop volunteer-based, coordinated projects that can address some special needs include
- 2.2.4 Promote *coordinated systems solutions to special needs* groups such as dialysis patients, youth from outlying communities, low-income workers traveling to/from third-shift jobs, incarcerated homeless among others.
- 2.2.5 **Support fleet improvements**, including replacement of capital with lift-equipped and newer equipment.

GOAL 2.0 BUILDING SERVICES, continued

2.3 Develop strategies for improving transportation solutions to outlying, low-density areas of the County.

- 2.3.1 **Promote pilot solutions** to address the following corridors or areas of travel and others that may be identified through collective data gathering:
 - o Gold Country Casino in Kelly Ridge
 - Oroville to Palermo
 - Between Oroville and Yuba/ Sutter
 - o Thermalito to Gridley, Thermalito to Oroville

And:

- o Berry Creek and Buckeye
- o Concow, Deadwood, Yankee Hill
- o Areas around Lake Oroville, including Feather Falls
- o Palermo
- o Kelly Ridge
- 2.3.2 **Collect data to document** such isolated trip needs, at the case manager level, to better report the type, quantity and timing of trip needs from specific geographic areas.
- 2.3.3 Collect data to document and therefore possibly address the *mobility needs of "hidden populations"* including agricultural workers and others.
- 2.4 Promote coordinated responses for those support services that will strengthen and enhance community transportation services.
- 2.4.1 Explore *support service opportunities* such as for shared vehicle maintenance, joint procurement of parts and fuel, and vehicle back-up, among other options.
- 2.4.2 Explore *coordinated insurance options*, including insurance pools and volunteer driver insurance to assist small agencies.
- 2.4.3 Develop procedures to *improve the accuracy of reporting* of human services transportation trips to ensure full "credit" for trips provided by this sector.

GOAL 3.0 ENHANCING INFORMATION PORTALS

- 3.1 Develop information portal tools for wide distribution of information.
- 3.1.1 Invite through the Calls for Projects strategies that establish, promote, enhance and **extend transit and specialized transit information portals.**
- 3.1.2. **Build upon existing B-Line information pieces and create additional information tools** oriented to direct human service agency staff, aiding them in accessing specialized transportation services on behalf of their consumers.
- 3.1.3 *Improve methods of information distribution* by working through the SSTAC, survey database and other strategies to get transit information into more consumer and agency personnel hands.
- 3.1.4 Ensure that the regional Mobility Manager/ CTSA's *information tools* are *maintained and kept current* with service changes, establishing standardized mechanisms by which public operators and Measure A providers advise the Mobility Manager(s) of anticipated service changes.
- 3.1.5 *Integrate available and planned transportation information resources* with attention to 211/511 opportunities in relation to the information needs of the target populations and their caseworkers, working through existing, regionally-oriented information systems.
- 3.2 Actively promote travel training, mobility training and bus buddy opportunities to a wide range of audiences, including consumers and their agency representatives.
- 3.2.1 Invite through the Calls for Projects *mobility training strategies* that establish, promote, encourage and implement any travel training experience that encourages users and prospective users to ride public transit. Programs may be geared towards any subgroup of the target population and focus on building consumers' skills and agency personnel transit knowledge.
- 3.2.2 Hold **periodic transit workshops**, distributed geographically across the county, to keep human services personnel current with available transportation resources and information tools, and apprise them of upcoming changes to the public transit network.
- 3.3 Evaluate and report on transportation pilots, to identify successes and less-than-successful initiatives and modify plans accordingly.
- 3.3.1 Identify, promote and train human service organizations in **standardized reporting** that accurately counts transportation services provided.
- 3.3.2 **Establish performance goals**, as set by participating agencies, against which to measure performance, report on these and adapt service plans where actual performance indicates adjustments is needed.

8.7 PRIORITIZING AND SEQUENCING OF RECOMMENDATIONS

In moving this Plan forward, the following attributes must be ensured relative to implementation activities. All funded projects, strategies and activities must:

- Adequately address the unmet/underserved and individualized transportation needs of the target populations;
- Demonstrate coordination efforts between public transit and human services agencies;
- Maintain consistency with current Federal and State funding regulations;
- Be financially sustainable;
- Include measurable goals and objectives;
- Build and/or increase overall system capacity and service quality;
- Leverage and maximize existing transportation funding and capital resources.

Funding levels available through FTA Section 5316 and 5317 are relatively modest. In light of that, this Plan recommends that BCAG seek discretionary funding to support the regional Mobility Manager/CTSA. Alternatively, if such additional funding cannot be identified, then it is recommended that no more than half of the available fund be used to support the Mobility Manager/CTSA in order to allow for some level of local project activity.

If the Plan's recommendation to establish a Mobility Manager/CTSA proceeds and potentially provide for some access to TDA Article 4.5 funding, then the following options are possible around the design of a Call for Projects for Section 5316 and 5317 projects, the competitive call process required by the Federal circulars:

- 1. Target 5316 and 5317 projects in key areas the first year to attempt to make the greatest impact with these modest funds. For example, first year proposals could be invited for:
 - information projects;
 - mobility training/ travel training projects;
 - voucher programs for bus, taxi and specialized transit services

Second year and third year projects could potentially focus on areas where coordination initiatives were more clearly defined, such as specialized shuttles or brokered services targeted to unserved areas of the county. Alternatively, subsequent year Calls could be designed to be more open, inviting any prospective planning partner to submit projects derived from the Plan, that speak to unmet needs and for which appropriate match funding is available.

- 2. Use the Mobility Manager planning opportunity to determine which operational projects are most feasible to pursue and focus attention towards these.
- 3. Use the Mobility Manager planning opportunity to include exploration of other alternative funding sources through national pilot project invitations, human service agency discretionary funding and other rural-oriented special funding opportunities.

Additionally, in order to resolve the organizational issues around the housing and structure of the regional mobility manager/CTSA, a small organizational planning study may be indicated to provide direction to BCAG and its strategic planning partners.

APPENDICES

Appendix A, Survey Cover Letter, Stakeholder Survey, and Project Summary

Appendix B, ACCESS Database Reports Summarizing Stakeholder Survey Information

Appendix C, Announcements/ Handouts/ Agendas

Appendix D, Outreach -- February Community Workshops

Appendix E, Outreach -- Interviews with Selective Agency Representatives

Appendix F, Outreach -- Community Focus Groups

Appendix G, Sample Project: The Right Ride

Appendix H, Workshop Agency Participants

APPENDIX A



Butte County Association of Governments

January 15, 2008

There are exciting opportunities on the horizon to improve mobility for those with special needs in Butte County created through new Federal legislation known as the *Safe, Affordable, Flexible and Efficient Transportation Equity Act – A Legacy for Users* ((SAFETEA-LU). This legislation provides guidance and funding resources to public transportation and health and human service agencies and organizations over the next seven years, under the auspices of the New Freedom initiative. This initiative promotes transportation coordination efforts designed to improve the mobility of consumers whose transportation needs are not easily met.

The Butte County Association of Governments is developing a *Coordinated Public Transit – Human Services Transportation Plan for Butte County* designed to address unmet specialized transportation needs throughout the county. Seniors, persons with disabilities and persons of low income are the focus of this plan. A stakeholder outreach process has been developed to ensure involvement of the myriad of public transit and human and social service agencies and organizations within the county, and includes administration of a survey to assess transportation needs and resources, as well as, meetings and working sessions with agency/organization representatives and consumers throughout the county to discuss and document their views and perspectives on coordination issues.

Towards this end, we respectfully request that you take time to respond to the survey on behalf of your agency/organization. Please complete and return the survey to us by Friday, February 22, 2008. The completed survey can be returned by regular mail in the enclosed envelope or faxed to:

A-M-M-A 306 Lee Avenue Claremont, California 91711 Fax: (909) 621-9387

The survey should be completed by *agencies providing transportation* and *agencies serving clients needing transportation*. Your input is valued and critical to the success of the project. Please respond promptly so that your agency/organization can participate in new **Federal Funding opportunities** through SAFETEA-LU (both new and existing programs) on behalf of your client/consumer base.

Should you have questions related to the survey or the project, please contact Heather Menninger at (909) 621-3101. Thank you for your cooperation.

Sincerely,

Jon Clark Executive Director

BUTTE COUNTY ASSOCIATION OF GOVERNMENTS COORDINATED PUBLIC TRANSIT-HUMAN SERVICES TRANSPORTATION PLAN WINTER 2008



Contact Name:		Agency Name:	
Please provide a brief descri	iption of your agency/organization or pro	gram. (You may aiso a	ttach a prochure or ityer at your discretion.)
2. YOUR AGENCY TYPE	(check one only):	6. WHAT OTHE	R AGENCIES/ORGANIZATIONS DO YOU
☐ Private, for profit	☐ Tribal organization		H TO PROVIDE TRANSPORTATION FOR
☐ Private, non-profit	☐ Public agency	YOUR CLIE	NTS?
☐ Faith based			
# Total clients / co	onsumers enrolled or on caseload lists		ARY BARRIERS TO ACCESSING and/or TING TRANSPORTATION EXIST FOR
# Average daily a	ttendance	YOUR AGEN	NCY or ORGANIZATION?
# Est. on site daily	y who require transportation assistance		
# Est. on site daily	y in wheelchairs		
	Persons with physical disabilities		
☐ Seniors, frail	☐ Person with behavioral disabilities		
\square Persons of low income	☐ Persons with sensory impairments	9 DI EASE IND	ICATE YOUR AREAS OF INTEREST TO
☐ Youth	☐ General Public		TE TRANSPORTATION (check all that apply):
☐ Other			travel training programs
5. PLEASE SPECIFY THE	UNMET TRANSPORTATION		ransportation information
			ting for specialized services
(check all that apply)		☐ Joint use, po	oling, or sharing of vehicles among organizations
☐ Getting to work between 8	am – 5pm		nancial resources to better coordinate service
☐ Late night or early morning	g work shifts	-	service operations
☐ Weekend and holiday trips	j		vehicle and capital purchases
Title: Telephone:		☐ Shared fueling	
☐ Visiting family or friends			tenance facilities
☐ Kids to day care or school			se of supplies or equipment
☐ Going to the doctor / medic	cal trips	☐ Joint purcha	
☐ Interviews / screenings	-	-	
•	treatment		trip scheduling and/or dispatching
☐ Shopping and multiple erra	and trips		driver training and retraining programs
	•	_	out for service rather than direct operations
		_	to provide transportation to other agencies
		 □ Not intereste □ Other 	d in coordination activities at this time
			Places continue to page 2

PLEASE RETURN THE SURVEY IN THE ENCLOSED, ADDRESSED ENVELOPE TO: A-M-M-A, 306 Lee Avenue, Clasemont, CA 91711 FAX: (909) 621-9387 or EMAIL: anama306@earthlink.net_rev.1/15/08

TRANSPORTATION SURVEY, Page 2

9. WHICH BEST DESCRIBES ANY TRANSPORTATION SERVICES PROVIDED BY YOUR AGENCY: NO TRANSPORTATION operated, contracted, or arranged OPERATE transportation with full responsibility for the transportation by this agency CONTRACT for transportation; services provided by another entity under contract to your agency SUBSIDIZE transportation through agency purchase of passes, fares or mileage reimbursement	16. PASSENGER LOAD AND V Please tell us about the volume of A. Average # of one Counting each round-trip as (2) one- time a passenger boards the vehicle. B. Average # of vehic Average monthly number of miles tra 17. DAYS AND HOURS OF OP	service you provide- way passenger trivay passenger trips; con- cle miles per MONT weled by your total flee ERATION:	de: ips per MONT; ount one trip each i'H et to transport ridee
☐ ARRANGE FOR transportation by assisting with	Weekdays Operating Hours	First Pick-up	Last Pick-up
information; clients responsible for follow-up	Saturdays	+	
☐ ARRANGE FOR volunteer drivers or private car	Sundays	+	
Other (please specify)			l
If you answered <u>NO TRANSPORTATION</u> to #9, <u>stop here</u> and return survey. Otherwise please complete questions #10 thru # 21, returning as indicated. Thank you!	18. DRIVERS FOR TRANSPOR # Paid Drivers 19. COOPERATIVE AGREEM	# Volunte	er Drivers
10. TRANSPORTATION BUDGET: (Current fiscal year)	Do you have any formal or int agreements/arrangements for		service
\$ For vehicle operations (drivers, maint., fuel)	agreements arrangements for	transportation:	
\$For bus passes, tickets or tokens	☐ No ☐ Yes, cooperative a	greements/arrange	ments with:
\$For taxi vouchers / other specialized transp. services			
\$Administration (advertising, marketing)			
\$ For vehicle replacement capital funds	20. FUNDING SOURCES FOR T	RANSPORTATI	ON BUDGET
\$ Insurance	(Indicate source and ide		
\$ Mileage reimbursement	County/Local Funding	Federal Fundin	_
\$Other (please specify)	General Funds	☐ FTA section 5:	307
	Other	☐ FTA section 5:	310 (vehicles)
11. COMPARED TO LAST YEAR, DID YOUR AGENCY TRANSPORTATION BUDGET?	Other	☐ FTA section 53	
☐ Increase ☐ Decrease ☐ Stay the same	State Funding	Comm. Dev. E	Block Grants
	☐ Transp. Development Act	Health and Hu	man Services.
12. HOW MANY VEHICLES DO YOU HAVE AVAILABLE FOR CLIENT/CUSTOMER TRANSPORTATION?	Education Department	Other	
	Dept. Developmental Services	Other Funding	
13. HOW MANY VEHICLES ARE USED TO PROVIDE TRANSPORTATION ON AN AVERAGE DAY?	Dept. of Aging	Client Fees	
	Dept. of Rehabilitation	Private Donati	ons / Grants
14. NUMBER AND CAPACITY OF AVAILABLE VEHICLES:	Dept. of Health Services	United Way	
A. # of vehicles serving 9 or fewer passengers	Other	Passenger Fare	15
B. # of vehicles for 10 - 14 passengers	Other	☐ Fund Raising	
C. # of vehicles for 15 – 24 passengers D. # of vehicles for 25 passengers or more E. Total # of vehicles lift-equipped		Other	
15. HOW MANY OF YOUR VEHICLES NEED TO BE REPLACED? #Now# Within a year# Within the next two years	21. WILL YOUR AGENCY CO TRANSPORTATION OVE	R THE NEXT 5	
	⊔1es ⊔No	☐ Unsure	

PLEASE RETURN THE SURVEY IN THE ENCLOSED, ADDRESSED ENVELOPE TO: A-M-M-A, 306 Lee Avenue, Claremont, CA 91711 FAX: (909) 621-9387 or EMAIL: anume306@earthlink.net_rev.1/15/08



Coordinated **Public Transit-Human Services** Transportation Plan

Butte County's Response to the Coordinated Transportation Planning Requirements of SAFETEA-LU

[Safe, Accountable, Flexible, Efficient Transportation Act -- A Legacy for Users (SAFETEA-LU) Public Law 109-059]

This coordinated plan will plan for use of new and continuing funding in Butte County under:

- -- New Freedom Program (Section 5317) -- Job Access & Reverse Commute [JARC] (Section 5316)
- -- Seniors and Persons with Disabilities capital funds (Section 5310)

SAFETEA-LU requires this locally developed plan to establish a "unified comprehensive strategy for public transportation service delivery' through a coordinated planning process to address unmet needs of target populations. Funds available under SAFETEA-LU programs are matched by local human service resources and other funding to leverage more transportation for targeted persons.

BCAG is working to prepare this plan with two transit planning firms:

A-M-M-A of Claremont, CA. Transit Resource Center of Grass Valley, CA

TARGET GROUPS FOR COORDINATED PLAN:

- Persons with disabilities
- Elderly individuals
- Individuals of low-income

PLANNING PROCESS GOALS:

- 1. To identify and promote partnerships to address specialized transportation needs.
- 2. To identify possible projects that can respond to identified needs and emerging gaps in services.
- 3. To encourage new partnerships for the development of these projects and application for funding to the Call for Projects, under the Coordinated Planning process.

PROGRAM GOAL:

TO IMPROVE THE TARGET POPULATIONS' MOBILITY IN BUTTE COUNTY THROUGH COORDINATED PARTNERSHIPS AND PROJECTS.

PLAN DEVELOPMENT COMPONENTS:

STAKEHOLDERS' SURVEY

Building a primary database of stakeholders, to identify those INTERESTED, WILLING AND ABLE to participate in coordinated transportation solutions addressing unmet needs.

Mailed to 350 agencies and organizations serving seniors, persons of low income or persons with disabilities, surveys seek information from both transportation providers and those who offer no transportation but serve these target client groups.

The plan seeks opinions about transportation needs, coordination interest, existing transportation services provided, and basic agency services.

PUBLIC OUTREACH

A tiered outreach effort to involve:

- -- Interviews with agency personnel.
- -- Consumer focus groups.
- -- Public workshops in Paradise, Oroville and Chico February 24th and 25th, 2008.

 - Project Development Workshops in late spring '08.

Outreach activities will help to identify opportunities where coordinated responses can address identified mobility needs and gaps.

LOCALLY DEVELOPED PLAN PROCESS:

- -- Survey responses
- -- Stakeholders workshops & interviews
- -- Identifying types and categories of unmet needs
- -- Identifying gaps and duplication of services

PLAN DESIGN AND PROJECT DEVELOPMENT:

- -- Populations to be served
- -- Needs and service gaps to be addressed
- -- Plan goals & objectives responsive to needs
- -- Project types/ categories responding to needs
- -- Planning partners dialog for project development

PLAN IMPLEMENTATION GUIDANCE FOR BCAG:

- -- Identify and build coordinated transportation opportunities in Butte County.
- -- Prioritize coordination opportunities.
- -- Identify responsibilities & structures for implementing coordinated responses.

WORKING TIMEFRAMES:

Stakeholder Survey - January through March Public Outreach - February through April Draft Plan - May; Plan Adoption in June/July 2008

IMPLEMENTATION:

BCAG Call for Projects - Fall 2008 New Projects Start-up – Winter 2008

For further information: Janice Phillips, BCAG jphillips@bcag.org or Heather Menninger, AMMA amma306@earthlink.net

APPENDIX B – ACCESS Database Reports Summarizing Stakeholder Survey Information

BUTTE COUNTY

Public Transit - Human Services Transportation Coordination Program Survey Respondents

- ¹ American Cancer Society, Chico
- ² Better Babies Inc., Chico
- 3 Biggs-Gridley Memorial Hospital, Gridley
- 4 Butte College Child Development Center, Oroville
- 5 Butte County Behavioral Health Chico (Adult Out
- 6 Butte County Behavioral Health Chico (Mental H
- 7 Butte County Behavioral Health Chico Mental He
- Butte County Behavioral Health Crisis Team, Ch
- 9 Butte County Behavioral Health Oroville, Oroville
- 10 Butte County Behavioral Health Paradise Couns
- Butte County behavioral Health Paradise Courts
- 11 Butte County Behavioral Health Psychiatric Heal
- 12 Butte County Childrens Services, Chico
- 13 BUTTE COUNTY IHSS PUBLIC AUTHORITY, Or
- 14 Butte County WIC, Chico
- 15 Butte Literacy Council, Chico
- 16 Butte Regional Transit B-Line Fixed Route, Chi
- 17 Butte Regional Transit B-Line Paratransit, Chic
- 18 CAA OF BUTTE COUNTY, Oroville
- 19 California Employment and Development Departrr
- 20 Caring for Women Pregnancy Resource Center, C
- 21 CDSS State of California Adoption Services, Chi
- 22 Chico Area Recreation and Park District, Chico
- 23 Chico Community Shelter Partnership Torres She
- 24 Computers for Classrooms Inc., Chico
- 25 Council of The Blind, Chico
- 25 COUNTRY CREST RETIREMENT COMMUNITY
- 27 Del Norte Clinics Inc. Oroville
- 28 DESS Adult Protective Services Table Mountai
- 29 DESS CHILDRENS SERVICES CARMICHAEI
- 30 DESS OROVILLE MIRA LOMA, Oroville
- 31 DURHAM UNIFIED SCHOOL DISTRICT, DURHA
- 32 Enloe Home Care & Hospice, Chico
- 33 Enloe Medical Center, Chico
- 34 Experience Works, Oroville
- 35 Far Northern Regional Center, Redding
- 36 FEATHER FALLS UNION SCHOOL DISTRICT, F
- 37 Feather River Hospital Rural Health Clinic, Parac
- 38 Feather River Tribal Health, Oroville

- 39 Gleaners Food Distribution, Oroville
- 40 GREATER OROVILLE FAMILY RESOURCE CEN
- 41 Handi-Riders of Northern CA, Chico
- 42 Home Health Care Management, Chico
- 43 Jesus Center Sabbath House, Chico
- 44 Legal Services of Northern California, Chico
- 45 Merit Medi-Trans, Chico
- 46 Office Of Education Migrant Education, Chico
- 47 Oroville Adult Education, Oroville
- 48 OROVILLE CHURCH OF THE NAZARENE, ORC
- 49 Oroville Community Counseling Center, Oroville
- 50 Oroville Hospital, Oroville
- 51 OROVILLE UNION HIGH SCHOOL DISTRICT, O
- 52 Oroville Union High School District Prospect Hig
- 53 Paradise Alliance Church, Paradise
- 54 Paradise Treatment Center, Paradise
- 55 Passages Adult Resource Center, Chico
- 56 Passages Care Management Services, Chico
- 57 Passages Information Services, Chico
- 58 Peg Taylor Center, Chico
- 59 Public Health Dept Child Health & Disability Preve
- 60 Shalom Free Clinic, Chico
- 61 Skyway House, Chico
- 62 Social Security Administration, Oroville
- 63 Special Olympics of Butte County, Chico
- 64 The Hope Center, Oroville
- 65 THE WELL MINISTRY OF RESCUE, CHICO
- 66 Valley Oak Children's Services, Oroville
- 67 Vectors, Chico
- 68 Work Training Center, Chico
- 69 YMCA of Oroville, Oroville

Tuesday, May 27, 2008

Page 1 of 1

		1	.,				
	All		Private, for profit	Private, non-profit	Public	Faith Based	Tribal services
	69 100	0%	3 4%	31 45%	30 43%	4 6%	1 1%
3. Active clients living in Buttee County							
Avg enrolled clients/consumers	2,42	27	993	3,327	1,724	1,045	
Total enrolled clients/consumers	167,43	36	2,979	103,127	51,710	4,180	5,440
Avg daily attendance	20	13	63	150	232	514	
Total daily attendance	14,02	27	190	4,640	6,962	2,055	180
Avg on-site daily needing tx assist	10	9	37	119	121	18	
Total on-site daily needing tx assist	7,51		110	3,697	3,629	70	12
		\neg		-			
Avg on-site daily in wheelchairs		4	25	12	18	1	
Total on-site daily in wheelchairs	1,00	00	76	387	526	5	6
Primary client population agency serves							
Seniors, able-bodied		46%	1	16	10	4	1
Seniors, frail		51%	1	18	11	4	1
Persons of low income		77%	2	24	22	4	1
Youth		55%	1	15	18	3	1
Persons with physical disabilities		65%	1	20	19	4	1
Persons with behavioral disabilities		68%	1	19	23	3	1
Persons with sensory impairments		48%	1	14	14	3	1
General public		43%	0	12	13	4	1
Other	11	16%	1	9	1	0	0
Unmet transportation needs most reported							
Getting to work between 8am - 5pm		25%	1	9	5	1	1
Late night or early morning work shifts		28%	2	8	8	0	1
Weekend and holiday trips		32%	2	10	9	1	0
Recreational activities or events		30%	2	11	6	2	0
Visiting family or friends		25%	1	8	7	1	0
Kids to daycare or school		20%	1	6	6	0	1
Going to the doctor/medical trips		64%	2	20	19	2	1
Interviews/screenings		35%	1	10	12	1	0
Counseling/mental health treatment		58%	2	18	16	3	1
Shopping and multiple errand trips		41%	2	13	12	1	0
Training, ed classes or program sites		46%	1	15	12	3	1
Long distance trips		20%	1	10	2	1	0
Other	10	14%	0	5	4	1	0

Summary by Legal Type P1 5/27/2008 3:35:47 PM

	N= 09 S	urvey	s returne	a			
	All		Private, for profit	Private, non-profit	Public	Church affiliated	Tribal services
	69 100	%	3 4%	31 45%	30 43%	4 6%	1 1%
. Potential coordination areas							
Coordinated travel training programs	9	13%	0	5	3	1	0
Centralized transportation information	30	43%	1	12	15	2	0
Joint contracting for specialized services	11	16%	1	5	4	1	0
Joint use/pooling/sharing vehicles	16	23%	2	8	5	0	1
Pooling financial resources	10	14%	1	6	2	0	1
Coordinated service operations	13	19%	1	7	3	1	1
Coordinated vehicle and capital purchases	5	7%	1	3	1	0	0
Shared fueling facilities	9	13%	1	4	3	0	1
Shared maintenance facilities	8	12%	1	4	2	0	1
Joint purchase of supplies/equipment	2	3%	1	1	0	0	0
Joint purchase of insurance	5	7%	1	2	2	0	0
Coordinated trip scheduling/dispatching	17	25%	2	10	5	0	0
Coordinated driver training/retraining	7	10%	1	4	2	0	0
Contracting out for non-direct op services	7	10%	0	6	1	0	0
Contracting to provide trans to oth agencies	3	4%	1	1	1	0	0
Not interested at this time	14	20%	2	3	8	1	0
Other	2	3%	0	0	1	1	0
Transportation service provided by agency No transportation	26	38%	1	14	9	2	0
Public transit provide to general public	2	3%	0	0	2	0	0
Operate transportation	17	25%	1	4	10	1	1
Contract; serv prov by another entity	10	14%	0	6	4	0	0
Subsidize transportation	17	25%	1	8	8	0	0
Arrange for trans by assisting winfo	22	32%	0	9	13	0	0
Arrange for vol drivers or private car	13	19%	0	7	5	1	0
Other	1	1%	U	U	1	0	0
). Transportation budget							
Total for vehicle operations	\$12,514	4,430	\$0	\$3,132,640	\$9,363,790	\$18,000	\$0
Total for bus passes/tickets/tokens	\$55	8,147	\$0	\$554,107	\$3,800	\$240	\$0
Total for taxi vouchers/oth spec.	\$20	0,000	\$0	\$200,000	\$0	\$0	\$0
Total for administration	\$39	9,200	\$0	\$1,200	\$398,000	\$0	\$0
Total for veh replacement/cap funds	\$4,899	9,600	\$0	\$40,600	\$4,859,000	\$0	\$0
Total for insurance	\$36	1,254	\$0	\$65,654	\$292,000	\$3,600	\$0
Total for mileage reimbursement	\$84	7,386	\$0	\$833,800	\$13,586	\$0	\$0
Total for other	\$18	3,157	\$0	\$17,457	\$700	\$0	\$0

Summary by Legal Type P2 5/27/2008 3:36:31 PM

	N= 09 S	urve	ys returne	eu .				
	All		Private, for profit	Private, non-profit	Public	Church affiliated	Trib servi	
	69 100	1%	3 4%	31 45%	30 43%	4 6%	1	1%
11. Compared to last yr, trans budget								
Increased	14	20%	0	7	6			0
Decreased	3	4%	0	0	3			0
Stayed the same	10	14%	0	5	4			1
12. Tot # veh for client transportation	233		34	43	136	11		9
13. Tot # veh for operating trans daily	19	91	27	37	109	11		7
14. Number and passenger capacity of veh up to 9 passengers	10	16	34	9	46	10		7
up to ੪ passengers 10-14 passengers		26	0	9	15	1		1
15-24 passengers		31	0	14	16	0		1
25+ passengers		55	0	0	55	0		0
wheelchair lift-equipped		84	0	29	55	0	0	
Total number of vehicles classified:	21		34	32	132	11		9
15. # vehicles need to be replaced (+ avg) Now Within one year	30 30	43% 43%	4	7	16 12	1 5		2
Within the next two years	40	58%	8	12	9	5		6
16. Passenger load and veh utilization (+ avg)								
Avg monthly one-way trips		154	1,500	573	4,070	1,000		
Total monthly one-way trips	148,	b53	4,500	17,762	122,091	4,000	-	300
Avg monthly vehicle miles	5,	491	23,333	3,284	6,459	3,250		
Total monthly vehicle miles	378,	865	70,000	101,790	193,775	13,000	;	300
18. Drivers and management for trans								
Avg paid drivers Total paid drivers	19	3 an	12 35	2 59	3 91			5
rotal paid drivers	13		30	35	31			
Avg volunteer drivers		1	0	1	0			0
Total volunteer drivers	- 4	13	0	32	0			0
19. Coop agreements/arrangements Yes	13	19%	0	8	5			0

Summary by Legal Type P3 5/27/2008 3:37:06 PM

		All	Private, for profit	Private, non-profit	Public	Church affiliated	Tribal service
	69	100%	3 4%	31 45%	30 43%	4 6%	1 1%
20. Funding sources for trans budget COUNTY/LOCAL FUNDING							
General funds	9	13%	0	1	8	0	0
Tobacco Settlement Revenue	0	0%	0	0	0	0	0
Other	2	3%	0	1	1	0	0
STATE FUNDING	_						
Education Department	3	4%	0	0	3	0	0
Department of Dev. Services	2	3%	0	2	0	0	0
Department of Aging	2	3%	0	2	0	0	0
Department of Rehabilitation	1	1%	0	1	0	0	0
Department of Health Services	4	6%	1	2	1	0	0
Other	3	4%	0	1	2	0	0
FEDERAL FUNDING FTA section 5310	3	4%	0	2	1	0	0
Community Dev. Block Grants	2	3%	0	1	0	0	1
Health and Human Services Other	2	3% 6%	0	3	1	0	1 0
OTHER FUNDING		0.0		, i		-	,
Client fees	3	4%	0	2	1	0	0
Private donations/grants	3	4%	0	3	0	0	0
United Way	0	0%	0	0	0	0	0
Fare box	3	4%	0	0	3	0	0
Fundraising	3	4%	0	2	0	1	0
Other	2	3%	0	1	1	0	0
21. Plans to cont trans over next 5 yrs							
Yes	25	36%	1	13	9	1	1
No	0	0%	0	0	0	0	0
Unsur	11	16%	0	1	10	0	0

Summary by Legal Type P4 5/27/2008 3:37:37 PM

	14-05 501 4	cys ictu	incu	
		Public	Other	Social
		Transit	Transit	Service
•	All	Agency	Provider	No Trans
	69 100%	2 3%	41 59%	26 38%
3. Active clients living in Buttee County				
Avg enrolled clients/consumers	2,427	0	3,457	988
Total enrolled clients/consumers	167,436	0	141,749	25,687
Total enrolled clients/consumers	107,430	U	141,743	20,007
Avg daily attendance	203	0	230	176
Total daily attendance	14,027	0	9,445	4,582
Avg on-site daily needing tx assist	109	0	117	105
Total on-site daily needing tx assist	7,518	0	4,791	2,727
Avg on-site daily in wheelchairs	14	0	12	20
Total on-site daily in wheelchairs	1,000	0	480	520
Primary client population agency serves				
Seniors, able-bodied	32 46%	2	15	15
Seniors, frail	35 51%	2	20	13
Persons of low income	53 77%	1	32	20
Youth	38 55%	1	22	15
Persons with physical disabilities	45 65%	2	27	16
Persons with behavioral disabilities	47 68%	2	29	16
Persons with sensory impairments	33 48%	2	22	9
General public	30 43%	1	15	14
Other	11 16%	0	7	4
Unmet transportation needs most reported Getting to work between 8am - 5pm	17 25%	0	11	6
Late night or early morning work shifts	19 28%	1	12	6
Weekend and holiday trips	22 32%	2	16	4
Recreational activities or events	21 30%	0	18	3
Visiting family or friends	17 25%	0	15	2
Kids to daycare or school	14 20%	0	10	4
Going to the doctor/medical trips	44 64%	0	31	13
Interviews/screenings	24 35%	0	15	9
Counseling/mental health treatment	40 58%	0	29	11
Shopping and multiple errand trips	28 41%	0	22	6
Training, ed classes or program sites	32 46%	0	20	12
Long distance trips	14 20%	0	12	2
Other	10 14%	1	7	2
Other	10 1476		,	-

Summary by Provider Type P1 5/27/2008 3:38:35 PM

	А	ll .	Public Transit Agency	Other Transit Provider	Social Service No Trans
	69 1	100%	2 3%	41 59%	26 38%
8. Potential coordination areas					
Coordinated travel training programs	9	13%	2	7	0
Centralized transportation information	30	43%	2	22	6
Joint contracting for specialized services	11	16%	0	10	1
Joint use/pooling/sharing vehicles	16	23%	0	14	2
Pooling financial resources	10	14%	0	10	0
Coordinated service operations	13	19%	0	11	2
Coordinated vehicle and capital purchases	5	7%	0	5	0
Shared fueling facilities	9	13%	0	9	0
Shared maintenance faciliites	8	12%	0	8	0
Joint purchase of supplies/equipment	2	3%	0	2	0
Joint purchase of insurance	5	7%	0	5	0
Coordinated trip scheduling/dispatching	17	25%	0	14	3
Coordinated driver training/retraining	7	10%	0	7	0
Contracting out for non-direct op services	7	10%	0	7	0
Contracting to provide trans to oth agencies	3	4%	0	3	0
Not interested at this time	14	20%	0	9	5
Other	2	3%	0	0	2
	<u> </u>			_	
9. Transportation service provided by agency					
No transportation	26	38%	0	0	26
Public transit provide to general public	2	3%	2	0	0
Operate transportation	17	25%	2	15	0
Contract; serv prov by another entity	10	14%	2	8	0
Subsidize transportation	17	25%	0	17	0
Arrange for trans by assisting w/info	22	32%	0	22	0
Arrange for vol drivers or private car	13	19%	0	13	0
Other	1	1%	0	1	0
10. Transportation budget					
Total for vehicle operations	\$12	,514,430	\$6,409,000	\$6,105,430	\$0
Total for bus passes/tickets/tokens		558,147	\$0	\$558,147	\$0
Total for taxi vouchers/oth spec.		200,000	\$0	\$200,000	\$0
Total for administration		399,200	\$398,000	\$1,200	\$0
Total for veh replacement/cap funds	\$4	,899,600	\$4,859,000	\$40,600	\$0
Total for insurance		361,254	\$241,000	\$120,254	\$0
Total for mileage reimbursement		847,386	\$0	\$847,386	\$0
Total for other		\$18,157	\$700	\$17,457	\$0

Summary by Provider Type P2 6/11/2008 9:48:00 AM

			, o rotairii		
			Public	Other	Social
			Transit	Transit	Service
'	Al	I	Agency	Provider	No Trans
	69 1	nn94	2 3%	41 59%	26 38%
	09 11	JU 76	2 3%	41 35%	20 30%
 Compared to last yr, trans budget 					
Increased	14	20%	2	12	0
Decreased	3	4%	0	3	0
Stayed the same	10	14%	0	10	0
12. Tot # veh for client transportation		233	55	178	0
13. Tot # veh for operating trans daily		191	45	146	0

14. Number and passenger capacity of veh			_		_
up to 9 passengers		106	0	106	0
10-14 passengers		26	11	15	0
15-24 passengers		31	16	15	0
25+ passengers		55	28	27	0
wheelchair lift-equipped		84	55	29	0
Total number of vehicles classified:		218	55	163	0
15. # vehicles need to be replaced (+ avg)					
Now	30	43%	10	20	0
Within one year	30	43%	10	20	0
Within the next two years	40	58%	0	40	0
16. Passenger load and veh utilization (+ avg)					
Avg monthly one-way trips		2,154	56,150	887	0
Total monthly one-way trips		8,653	112,300	36.353	0
Total mortally one way trips				,	
Avg monthly vehicle miles		5,491	65,000	6,070	0
Total monthly vehicle miles	37	8,865	130,000	248,865	0
18. Drivers and management for trans					
Avg paid drivers		3	30	3	0
Total paid drivers		190	60	130	0
Avg volunteer drivers		1	0	1	0
Total volunteer drivers		43	0	43	0
Total volunteer univers				40	-
19. Coop agreements/arrangements					
Yes	13	19%	2	11	0

Summary by Provider Type P3 5/27/2008 3:39:25 PM

	All Agency Transit Agency Provider No Transit No Transit Provider No Transit							
		All	Transit	Transit	Social Service No Trans			
	69	100%		41 59%	26 38%			
	- 03	10076						
20. Funding sources for trans budget								
COUNTY/LOCAL FUNDING								
General funds	9	13%	0	9	0			
Tobacco Settlement Revenue					0			
Other	2	3%	0	2	0			
STATE FUNDING								
Education Department	3	4%	0	3	0			
Department of Dev. Services	2	3%	0	2	0			
Department of Aging	2	3%	0	2	0			
Department of Rehabilitation	1	1%	0	1	0			
Department of Health Services	-	6%	0		0			
Other	3	4%	0	3	0			
FEDERAL FUNDING								
FTA section 5310	3	4%	1	2	0			
Community Dev. Block Grants	2	3%	0	2	0			
Health and Human Services	2	3%	0	2	0			
Other	4	6%	0	4	0			
OTHER FUNDING								
Client fees	3	4%	0	3	0			
Private donations/grants	3	4%	0	3	0			
United Way	0	0%	0	0	0			
Fare box	3	4%	2	1	0			
Fundraising	3	4%	0	3	0			
Other	2	3%	0	2	0			
21. Plans to cont trans over next 5 yrs								
Yes	25	36%	2	23	0			
No	0	0%	0	0	0			
Unsure	11	16%	0	11	0			

Summary by Legal Type P4 5/27/2008 3:40:06 PM

BUTTE COUNTY Public Transit - Human Services Transportation Coordination Program N= 69 surveys returned 4 Primary client population agency serves																		
Primary client population agency serves .	All		Senio able-b		Senior	s, frail	Persor low inc		Youth	h	Persons with physica disabilit	I	Person with behavio disabilit	oral	Person sensor impaim	у	Gene public	
	69	100%	32	46%	35	51%	53	77%	38	55%	45	65%	47	68%	33	48%	30	43%
5. Unmet transportation needs most reported																		
Getting to work between 8am - 5pm	17	25%	9	28%	10	29%	15	28%	8	21%	11	24%	11	23%	9	27%	10	33%
Late night or early morning work shifts	19	28%	10	31%	10	29%	15	28%	8	21%	11	24%	14	30%	10	30%	8	27%
Weekend and holiday trips	22	32%	10	31%	12	34%	19	36%	9	24%	15	33%	19	40%	15	45%	10	33%
Recreational activities or events	21	30%	10	31%	12	34%	17	32%	10	26%	15	33%	17	36%	14	42%	10	33%
Visiting family or friends	17	25%	7	22%	8	23%	14	26%	7	18%	10	22%	12	26%	9	27%	9	30%
Kids to daycare or school	14	20%	8	25%	8	23%	13	25%	12	32%	12	27%	13	28%	9	27%	10	33%
Going to the doctor/medical trips	44	64%	20	63%	25	71%	38	72%	24	63%	32	71%	33	70%	27	82%	21	70%
Interviews/screenings	24	35%	10	31%	10	29%	22	42%	13	34%	16	36%	17	36%	12	36%	13	43%
Counseling/mental health treatment	40	58%	20	63%	23	66%	36	68%	22	58%	30	67%	32	68%	21	64%	20	67%
Shopping and multiple errand trips	28	41%	14	44%	18	51%	25	47%	- 11	29%	20	44%	23	49%	18	55%	11	37%
Training, ed classes or program sites	32	46%	17	53%	17	49%	29	55%	16	42%	22	49%	24	51%	15	45%	16	53%
Long distance trips	14	20%	6	19%	9	26%	11	21%	6	16%	11	24%	9	19%	10	30%	5	17%
Other	10	14%	4	13%	6	17%	8	15%	5	13%	8	18%	8	17%	7	21%	5	17%

Summary by Client Population 5/27/2008 3:40:54 PM

APPENDIX C – ANNOUNCEMENTS/HANDOUTS/AGENDAS



WORKSHOP INVITATION

The Butte County Association of Governments has begun work on the Coordinated Public Transit-Human Services Transportation Plan. This plan will develop a unified comprehensive program for public transportation service delivery, focused upon improving the mobility of seniors, disabled persons and low-income individuals region wide. The plan will identify and promote opportunities for partnerships among public transit providers, social/human services agencies, advocacy groups and other community-based organizations currently working with the above three target groups.

As an organization that either directly operates transportation services or one that secures transportation services for your clients or consumers, your participation in the development of this plan is critical. By increasing the coordination of services to seniors, disabled persons and low-income individuals, we intend to improve the quality and quantity of transportation services available to these Butte County residents.

We believe it is essential that your organization/agency actively participate in the plan by attending one of the upcoming project stakeholder meetings. Your attendance at these meetings will give us valuable input necessary to develop sound and realistic coordination strategies for the region. For your convenience, we will hold meetings at three locations as follows:

Paradise
Monday February 25, 2008
10:00 a.m. – 12:00 p.m.
Family Resource Center, Conference Room #2
6249 Skyway
Paradise, CA 95969

Oroville Monday, February 25, 2008 2:00 p.m. – 4:00 p.m. Oroville Community Employment Center, Andes Room 78 Table Mountain Blvd. Oroville, CA, 95965

Chico
Tuesday, February 26, 2008
10:00 a.m. – 12:00 p.m.
Chico Community Employment Center
Annex (Across from the Employment Center)
2491 Camrichael
Chico, CA 95928

You are welcome to attend one or all of the meetings and encourage you to invite others in your organization. This will be the first opportunity for us to respond to your questions and become familiar with issues of importance to your agency/organization. Please confirm with us your plans to attend the meeting. To RSVP or for questions regarding the plan or the meeting, please call:

Janice Phillips, BCAG (530) 879-2468 iphillips!@bcaq.org.
Heather Menninger, AMMA (909) 621-3101 iphillips!@bcaq.org.
menninger@earthlink.net

Hope to see you in late February.

WORKSHOP

Public Transit-Human Services Transportation Coordination Plan

When good hearts and creative minds work together, great things can be accomplished. Come join us at this workshop to hear and comment upon the findings from the Public Transit-Human Services Transportation Coordination Plan. Talk with us and explore the types of projects your agency and others might develop to provide better transportation options for Butte County's low income families, persons with disabilities and seniors.

Thursday, May 15, 2008 10 a.m. to 12 noon Chico Community Employment Center 2445 Carmichael Drive, Sequoia Room Chico, CA. 95928



For additional information you may contact:

Heather Menninger/AMMA (909) 621-3101 or

Janice Phillips or Kristy Bonnifet/BCAG (530) 879-2468





JOIN US AND BE PART OF THE SOLUTION

This workshop will address possible transportation projects to be funded with new and continuing Federal Transit Administration funding:

- FTA 5310 --Capital program/vehicles for seniors and individuals with disabilities
- FTA 5316 --- Job Access and Reverse Commute
- FTA 5317 -- New Freedom program

This workshop will:

1. PRIORITIZE THE NEEDS

You helped us identify the needs – come hear what we heard you say and advise us as to what needs are most important.

2. DESIGN THE OPPORTUNITIES

We are beginning to put the pieces together to make it work logistically. We may consider schedule, eligibility, service area, implementation, communications and other issues.

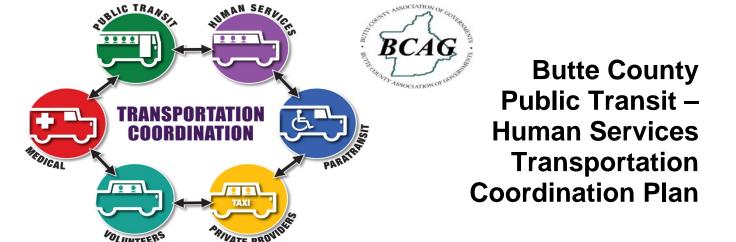
3. ALIGN THE PLAYERS

We'll "name names" as we explore who might be the best partners and allies in each project.

4. ASSIGN THE ASSETS

We'll strategize the best way to use the available funding to meet identified needs. Some projects will require matching funds of only 20%, others may require up to 50% match. Either way, your agencies transportation dollars will go farther.

PLEASE RSVP to: amma306@earthlink.net



To improve mobility in Butte County for persons of low-income, persons with disabilities and seniors through coordinated partnerships and projects.

Project Development Workshop Agenda

May 15, 2008

Introductions and Welcome

Janice Phillips, Ivan Garcia, Kristy Bonnifet - BCAG

Findings From Coordinated Transportation Planning Process

Consulting Team:

Heather Menninger – AMMA Cliff Chambers – Transit Resource Center

Development of Projects for §5310, §5316 and §5317 Funding

Workshop Participants with Consulting Team

Wrap-Up Discussion of Eligible Projects

Workshop Participants with Consulting Team

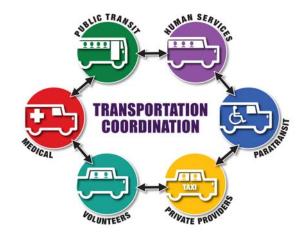
Next Steps

- Coordinated Plan Draft Review and Adoption Timing
- Call for Projects Timing and Process

Heather Menninger and Janice Phillips

Adjournment

A TRANSPORTATION CONVERSATION



Come join us for a snack...

And share with us what works

And what doesn't work...

About transportation in Chico and Butte County

Buses, taxi, walking, vans.

There is an effort to improve transportation for seniors traveling about Butte County. Please tell us what can make local transportation work better for you?

Do join us Wednesday afternoon, May 15th at 3 o'clock, in the Jarvis House Community Room

For questions and to RSVP, please speak to Susan Bachlor.

APPENDIX D – OUTREACH WORKSHOP SUMMARIES

February Workshop Summaries

<u>Coordinated Plan Workshop – Paradise, February 24, 2008</u>

Family Resource Center, Conference Rm. #2, 6249 Skyway, Paradise, CA. 95969

Paradise Workshop Participant Agencies: (9 participants)

Community Action Agency

Home Health Care Management

County Dept. of Behavioral Health – adult services

County Dept. of Behavioral Health – youth services

Far Northern Regional Center

Butte County WIC Program

Transportation Needs/ Barriers/ Gaps

- Paradise: no sidewalks, unsafe to walk to buses and not just downtown Main Street, Billy Road. There are no shoulders, no safe areas to walk.
- Need for curb cuts as well.
- Chico: there are areas or pockets of the county without sidewalks and no safe areas to
 walk; very difficult for mobility for those either who walk with difficulty or who use mobility
 aides.
- Chico: two blocks walk to the hospital is very difficult as there are no safe pedestrian areas.
- Paradise: disabled you, perhaps as many as 150 traveling in and around Paradise to afternoon programs, between 5 and 6 p.m. Limited transportation options. Some are hitchhiking
- Paradise to Magalia; Magalia to Paradise; Paradise to the Pines need for youth transportation assistance.
- Information needs:
 - Counseling Center staff is not aware of what transportation services exist.
 - Probably some need for re-training as the transportation services change, as staffing changes and they need new information.
 - Individualized assistance is needed to translate ride guides/ bus information into a plan for an individual.
- Trip planning needs Can use Google Transit someday. Potentially an excellent resource.
- Behavioral Health adult consumers: perhaps as many as 400 living around Paradise and around the Pines:
 - ADA service rules rigidity problematic for this clientele who have difficulties from day-to-day that makes booking trips a particular challenge;
 - Difficult to follow guidelines regarding making unplanned trips or frequent trips;
 - Transition to computerized scheduling has been difficult;
 - Trips that are regularly scheduled are dropped from the schedule without apparent reason;
 - Dispatcher confusion as to guidance to consumers regarding "regularly scheduled" versus "subscription" trips.

- Behavioral Health consumers are using both fixed-route and ADA paratransit; fixed route schedule is posted near the door and regularly reviewed by consumers.
- Paradise Treatment Center at 805 Cedar Street in Paradise; new stop was added at Cedar and Almond. This has big benefit to consumers. Street is very narrow and unsafe for walking (BCAG staff reported that street widening is coming and that bus service is in advance of that).
- Need for improved connections between big bus and small buses.
- ADA computerized application/ eligibility process and transition around Trapeze has been difficult; need for support to consumers; assistance to agency staff.
- CAP Issues, up to 100 families:
 - Families rely heavily upon public transit.
 - For homeless persons, difficulties are to get to appointments and training; many challenges.
 - Trip purposes include: education at selected training sites; scheduled appointments for services; substance abuse treatment; other treatment.
 - Getting kids to child care a critical need and transportation challenge.
 - Traveling with small children on public transit is challenging particularly as these parents have one, two or even three young children.
 - Potentially up to 24 persons per training center; good locations for travel training and trip planning. Consumers need assistance in learning how to use available transit services.
 - Need destination oriented information for consumers who are having difficulties on many levels and cannot easily understand the bus schedules.
- Oroville: intercity schedules cause challenges bus stops are north and south of County Center, not near the facility. County Center is at 2640 S. 5th Street.
- Consumers with developmental disabilities
 - Need more paratransit service with its door-to-door service; some consumers can wander off without escort to the door.
 - Need evening trips to Do-It Dances, once monthly, evening hours in Paradise.
 - Need a fleet of vans (one or two vans) to transport consumers who might want to attend these dances and other evening social activities.
- Gridley: for the ill or sick, no transportation available.
- Golden Feather Flyer: providing some service in Gridley; concerns about service quality and reliability; need back-up for vehicles that break down.
- Kelly Ridge to Oroville: need a shuttle, even once weekly for shopping, medical.
- Paradise: shopping shuttle needed: Winco to Walmart and the Chico Mall/ Costco
- HIV/ AIDS Consumers
 - Consumers immune status is compromised
 - Specific health situation varies from day-to-day
 - Often use paratransit services
 - Very difficult to make appointments two weeks in advance given the changeable nature of their health conditions; need same-day or at least next-day service availability.
 - Taxi voucher service is a possibility; could provide that same day option; immediate needs service capability.
 - MediCal waiver can allow for some transportation for this population.
 - Need to get to pharmacies; not limited number of pharmacies filling MediCal prescriptions; Roberts in Oroville one of just a few that will handing the specific funding options of these consumers.
 - Large HIV treatment facility in Sacramento to which consumers need to travel.

- Interest in possible volunteer programs to assist special needs consumers; mileage reimbursement might provide incentive for some individuals to assist.
- Out-of-county medical trips, to Sutter facilities in Sacramento, UC Davis, North Sacramento medical facilities.

<u>Transportation/ Transportation-Related Resources</u>

- ➤ Golden Feather Flyer a private provider.
- > Taxicabs in selected communities; active in Paradise and neighboring areas.
- Far Northern Regional Center provides some limited contract transportation. HIV consumers receive some limited MediCal-funded transportation.
- > Butte College bus services but these have been scaled back.
- HelpCentral.org and their publication Low-Cost, No-Cost People Services is a significant resource for the entire county.

Transportation Opportunities/ Strategies/ Projects

- 1. After-school, early evening shuttles for youth.
- 2. Sidewalks and curb cuts in Paradise.
- 3. Special shuttles or vans loaned to organizers of "Do It" dances.
- 4. Training for caseworkers on transit services to assist them in providing trip-planning support to consumers.
- 5. Destination-oriented ride guides, marketing information and trip-planning assistance that at its simplest levels for compromised consumers.
- 6. Paradise shopping shuttle to major box stores in the Chico area, even once weekly.
- 7. Other specialized shuttles Kelley Ridge to Oroville, even once weekly.
- 8. Immediate needs, taxi voucher programs to serve same-day trip needs.
- 9. Volunteer programs with mileage reimbursement might help to serve the very isolated, rural communities.

Referrals

HelpCentral.org coordinator Tara Sullivan IHHS Adult Services, Cathy Graham Far Northern Regional Center, Larry Scarborough, Kevin Payne

Coordinated Plan Workshop -- Oroville, February 24, 2008

Oroville Community Employment Center, Andes Room 78 Table Mountain Blvd. Oroville, CA. 95695

Oroville Participant Agencies Included: (14 participants)

Work Training Center, Inc.

Butte County Regional Occupational Center (ROP)

Feather River Tribal Health Services

Home Health Care Management

Public Authority In-Home Supportive Services

Oroville Hospital

Greater Oroville Community Outreach

Foster Family Services

BCAG

Transportation Needs/ Barriers/ Gaps

- Concerned about how to get people out of their private autos and using public transit; need to relieve congestion; decrease use of fossil fuels; increase street and road safety.
- Evening public transit hours need to be increased/ expanded.
- Young people need teaching [by their parents] that public transit is safe.
- No bus going to:
 - Gold Country Casino in Kelly Ridge
 - Oroville to Palermo (bus does stop at Four Corners)
 - Between Oroville and Yuba/ Sutter
- Kelley Ridge area has no bus services [now just two days a week]
- The Oaks mobile home park(s), needs volunteers to assist seniors with transportation; there area some seniors who may be willing; this is an isolated area.
- Barriers to using public transit for frail elderly having to walk any distance with packages, poor weather, minimal sidewalks or safe pedestrian conditions for even the able-bodied.
- MediCal transportation resources very limited; causes further delay.
- Same-day transportation needs; sometimes difficult to plan ahead for certain trips.
- Isolated, unserved areas in Berry Creek and Concow.
- Need for medical trips for residents living in remote areas.
- Gridley: no trips --- served three times a day by B-Line buses but consumers can't readily get to and back from mid-day appointments.
- Adult Training facility on Carmichael: office staff have to leave at 4 p.m.; [ADA] buses can arrive early or late.
- B-Line Bus from Chico to Oroville, traveling north and south but not what is needed; need an afternoon departure; need more direct rerouting between Chico to Oroville/ return.
- B-Line Bus: time changes for college students needed; buses leave the campus at ten
 minutes to the hour but students cannot get back to the bus stops in time to catch the
 bus. Three hour wait if missed. One student had been a years-long rider of buses until
 this most recent schedule change and now she drives into campus all the time.
- Entry level jobs:
 - At the airport; evening shifts
 - Fast food: shifts at various times
 - CASS Community Access Services System could contract for trips
 - At the casinos, often low-pay with 3rd shift hours

- Bus passes need to be able to obtain these more easily [not clear if this is an
 administrative issue or a cost issue]; interest in universal bus pass with billing
 systems that could appropriately bill the human services agencies for trips taken.
- Oroville Needs: Senior Nutrition Center; Gold Country Casino; Feather Falls
- Oroville Area Needs: The Oaks, Cottonwood Estate
- Paradise to Chico: difficult for consumers attending the ROP classes; trips take more than 60 minutes, 3 times the regular travel time.
- Parent Education Network: a collaboration of six agencies public health, Family Resource
 Center; others; potential for assisting with transportation projects at least in
 terms of referring consumers
- Feather River Indian Health Services
 - Could schedule appointments to make them on a common day for given areas; grouping medical appointments geographically.
 - Coordinated appointments possible because of the administrative control over the appointment process.

Transportation/ Transportation-Related Resources

- ➤ Work Training Center 90 to 110 vehicles traveling all around the county.
- Work Training Center has the resources to be a Mobility Manager to assist consumers in making the connection to the appropriate and available transportation service.
- ➤ Feather River Tribal Health 8 GSA vehicles that travel all around the county; could possibly transport others on a space-available basis.
- > Far Northern Regional Center
- Cancer Association
- Meals on Wheels

Transportation Opportunities/ Strategies/ Projects

- 1. Coordinated vehicle sharing with Feather River Indian Health Services
- 2. Coordinated vehicle sharing, trip brokering and mobility management possibilities with Work Training Center, Inc.
- 3. Specialized shuttle/ JARC project for workers at the Casinos --- Rancherias.
- 4. Information project possibly with ROP students/ resources to assist with trip planning.
- 5. Volunteer support through mileage reimbursement to serve isolated rural areas, to provide door-through-door service.
- 6. Possible review of B-Line schedules to better accommodate student schedules.
- 7. Bus pass purchase coordination to facilitate process for human service agencies.
- 8. Trip planning information assistance to human service agencies.

Referrals

- Northern Valley Catholic Social Services, Bob Michaels
- Feather River Tribal Task Force, through Bryan Bickley
- Parent Education Network
- > First Five, Anna Dove

Coordinated Plan Workshop -- Chico, February 25, 2008

Chico Community Employment Center, Annex 2491 Carmichael, Chico, CA. 95928

Chico Participant Agencies Included: (22 participants)

Merit Medi-Trans Peg Taylor Adult Day Health Care Center Butte County Dept. of Employment Services Addus Health Care Jesus Center - Sabbath House Work Training Center, Inc. **Passages** Butte County Dept. of Behavioral Health

The Well Ministry of Rescue

Skyway House

BCAG

Transportation Needs/ Barriers/ Gaps

- Medical transportation/ MediCal providers, largest providers of specialized transportation:
 - Increasingly restrict services as the State contemplates and implements budget
 - Consumers who are approved for MediCal reimbursed transportation are only a subset of those needing medical transportation or requesting it of the providers.
 - NEMT trips after surgery or office medical treatments is often needed but not always covered by MediCal.
- Medically-related trip needs and gaps:
 - Paradise: Feather River Hospital, 55,000 to 90,000 population base with a large proportion who are MediCal.
 - High level of no-shows for MediCal appointments due to transportation
 - Chico: Del Norte Family Health clinics; no show problem exists there too.
 - Oroville Family Health
 - Indian Health Services
 - Magalia to Chico trips for medical needs is difficult.
- Dept of Public Social Services:
 - Agency has to "exempt" DPSS consumers who live in remote areas and can't get transportation to get to job interviews, training or work sites.
 - These individuals can't participate in existing programs designed for them.
 - Chances are poor that these individuals will become self-sufficient.
- Volunteer drivers. There is a role for volunteers, particularly if they can be reimbursed for fuel expense. The RSVP program is working with volunteers and already has an insurance policy that works for volunteer support, taking away that liability concern that is often raised about the use of volunteers.
- ADHC transportation services issues:
 - Difficulty finding qualified drivers: must have GPPV licenses
 - ADA contractor drivers won't escort ADHC consumers to the door
 - Some needs are beyond what ADA services are readily able to provide

- Dialysis consumers have special needs; Magalia to Chico is very difficult for low-income/ fixed income seniors.
- Other isolated pockets include: Kelley Ridge, Thermalito, Berry Creek, Feather Falls --these areas are characterized by dangerous roads and significant distances from
 services in more populated areas.
- Gridley to Oroville, Gridley to Chico -- corridors of need but limited service; numerous clinics in Oroville. These have been presented through the unmet transit needs process.
- Homeless persons have no funds to pay for bus tokens.
- Homeless (and others) released from prison have no transportation to find jobs.
- Those released from prison are coming out at all hours, often after the general hours of operation of public transit. No transportation available.
- Chico: Sunday trips to church, shopping, visiting with family and friends is a need.
- Seniors who lose their drivers' licenses are not aware of resources and don't know how to access them.
- Need for trip chaining: the ability to stop on the way back from a primary destination (pharmacy, grocery store) for those who have limited capabilities and must make the most of the outing or the transportation resource.
- Recreation trip needs; persons with disabilities enjoy attending evening theatre (Eaton Road in Chico), dances (Valentines Day Dance), Do It Dances, movies. Need special shuttles, in some instances, to get to such activities.
- Shopping trips and errands for the low-income, frail elderly really need to have escorted assistance for these individuals, door-through-door assistance.
- Chico: The Jesus Center at 564 Rio Lindo Avenue is running an outpatient drug and alcohol
 program that starts at 9 a.m. (weekdays). Difficult for consumers to arrive there on-time
 using public transit.
- Cost of bus passes is significant for the lowest income. Those leaving the prison system get a \$120 general relief grant. The \$18 bus pass takes a significant piece of this.
- "One Call" call center has some attraction as a way of referring people to the right resource; possibly there is a role for private enterprise here as a home for such a service.
- Trust is an issue with any kind of coordinated transportation response what is BCAG's
 role; what are the roles of the private, non-profits?; what are the roles of other players
 who could assist with a coordinated model?
- Developing collaborative groups, such as the Butte County Elder Services Council, is important as a way to build and maintain trust in collaborative, coordinated service responses.

Transportation Resources

- Merit Medi-Trans and other commercial providers do have resources that can potentially be utilized in some kind of coordinated service structure.
- Merit Medi-Trans has 35 vehicles.
- County Drug and Alcohol program has 4 vehicles.
- County Dept. of Behavioral Health has 3 vans and 2 sedans.
- Work Training Center has 90 active vehicles.
- Work Training Center, Inc. has a contract with a church to assist them with Sunday morning transportation. This is a potential model for other kinds of highly specialized, targeted transportation assistance.
- ➤ The Adult Day Health Care systems have some limited dollars for transportation; need to develop better ways to move these consumers between their homes and ADHC facilities, given the high level of escort that they need.

- RSVP Program utilizes volunteers and "stipend" seniors to support transportation; has a volunteer insurance policy.
- > Jesus Center has funds to pay for bus passes/ Longfellow bus pass program (?)
- > Immediate needs transportation: there is a need for same-day trip requests as not all trips can be anticipated to accommodate the ADA scheduling requirements.
- Behavioral health consumers: those with anxiety disorders find it difficult to use public transit; need for buddy system and travel training to help ease these concerns.

Transportation Opportunities/ Strategies/ Projects

- 1. Travel training for a wide range of consumers who don't know how to use bus system (seniors loosing their license or who should be considering giving it up; homeless persons; behavioral health consumers anxious about using transit)
- 2. Specialized shuttles such as shopping runs, evening recreational activities for targeted groups of consumers.
- 3. Building a transportation collaborative to better utilize existing resources and develop trust in coordination partnerships.

Referrals

Butte County Dept. of Behavioral Health, Betsy Gowan (Prop. 63 contact)
Passages, Arelene Hosstader
Del Norte Clinics, Trudie Strom, Teresa Thornton
Veolia Transportation, Carmen Alba
California Dept. of Rehabilitation, Chris Pena (530) 895-5507, (530) 895-6054

APPENDIX E – OUTREACH INTERVIEW SUMMARIES

Other Selective Interviews/ Stakeholder Meetings

These summarize conversations with several key stakeholders but does not represent all of the coordinated plan interviews. Others are reported in Chapter 2, related to the transportation providing network or, as with comments from SSTAC/ Working Group members, were incorporated into the general planning process and approach.

BCAG Meeting With School/ College Transportation Representatives

<u>Participants Agencies:</u> (10 participants, with BCAG staff) Chico State University of California

Chico State University of California
Chico Unified School District
Butte College

Transportation Issues and Resources

- Chico State University:
 - Has 3 buses; has some contractual relationships with Butte Community College.
 - Provided 544 trips last year, about 50,000 miles a year.
 - Student pass program provides reciprocity with B-Line
 - Lost two buses recently to smog testing.
 - Also rents vehicles
 - Emphasis is on field trips; some out-of-county
- Chico Unified School District:
 - Chico Unified School District spends \$1.2 million on student transportation and has a significant corporate yard; provides a variety of support services to its transportation program.
 - Special needs students will have to continue to be transported.
 - Interested in exploring ways in which to meet the needs of general population students – spending between \$1.2 and \$1.7 million but only receiving \$690,000 from the state to offset transportation costs.
 - 11 Type 1 (general student population) routes
 - 13 special needs routes
 - Field trips a need; athletic trips are funded by students fees.
- Butte Community College:
 - students pay \$60 fee with their tuition but these fees are not covering costs with the increases in fuel.
 - Butte's was the first transportation system in the County; a long history.
 - 13 vehicles, serving 8 fixed routes around the county, including 3 routes within Chico, serving 110 students per day.
 - 65 passenger buses; often at capacity.
 - Providing about 300 field trips a year.

Some discussion of various alternative ways of doing business, including a Consolidated Transportation Services Agency (CTSA), brokerage concepts and Transportation Management Associations (TMAs) as examples of ways in which resources could be shared and used in the

most efficient ways possible. Interest in possible maintenance opportunities; reducing the number of vehicles on the road; improvements to the Butte College bus stops, shelter and turnout to make it easier for B-Line.

Interview with Northern Valley Catholic Social Services, Butte County Director

This agency has a range of contracts meeting needs of residents in Siskiyou, Tehama, Glen, Trinity and Butte County with a \$9 million revenue base (2007). Its Butte County programs are the largest.

Transportation needs and gaps:

- Children and youth transportation needs are significant, particularly for elementary and junior high school-aged kids. Many of the populations are in remote areas and getting kids and their parents to services is a challenge.
- Teen parents require case management activities and staff must either travel to them or kids somehow get to agency personnel. Working with Adolescent Family Life Program. Some distances are considerable, e.g. Berry Creek is up to 1 ¼ hour drive to pick them up to travel to a doctor's appointment.
- Children and youth often scared of public transit, little experience. Need ways in which to introduce them. For example, Caminar worked with the developmentally disabled population to train them in use of public transit. Need similar opportunities for other consumer groups, including youth.
- Distances can be long, particularly on public transit, e.g. the trip between Chico and Oroville.
- Affordable housing facilities are a critical need and have transportation needs. NVCHSS involved in three:
 - o 50 unit seniors complex at 2001 Notre Dame Blvd, Chico
 - o 21 units for persons with developmental disabilities at 2058 Hartford Drive, Chico
 - o 10 units for persons with persistent mental illness on Rio Lindo in Chico

Important to ensure that these are on and stay on reasonable fixed-route services as many residents are able to use fixed-schedule public transit.

Volunteer transportation is significant – 90 volunteers in the CASA program, court-appointed special advocates for youth in the foster care system. These volunteers, particularly with the increasing price of gasoline, would be aided by mileage reimbursement which could enable them to do more for and with the kids.

 Corridors and particular areas of need include: Gridley to Oroville; Gridley to/ from LaMonte; long trips Chico to Oroville; Berry Creek.

Resources

- NVCSS had one vehicle, funded by Prop 10, about 5 years old.
- Consumers may be reimbursed for their mileage under some NVCSS programs.
- Staff transportation reimbursement is significant agency has budgeted \$73,350 in mileage reimbursement for staff trips associated with consumers. This is a growing line-item budget and increasingly threatening. There have to be alternative ways in which to address needs.

Transportation Opportunities/ Strategies/ Projects

- 1. Interest in brokerage of some means of coordinating trips to and from distant, far-flung locations, such as those up in the foothill areas.
- 2. Travel training programs for all ages but with some focus on youth.
- Cabs for Kids concept to provide some limited transportation for youth, particularly during the summer months when school is closed, to keep kids from back-sliding and loosing all the gains of the previous academic year.

Referrals

Dept. of Behavioral Health, Julie Nelson, Drop-In Center, Chico Torres Community Shelter for the Homeless First Five, Jill Blake Strategies/ Youth for Change, Yvonne Nemadah

Community Action Program

<u>Four Program Managers Representing Different Program Areas and One Consumer</u>

This organization provides a range of services to low-income individuals and families and utilizes Federal, State and county funding to underwrite its programs which are oriented towards housing, employment and food.

Transportation needs and gaps:

- Need improved transit promotional information; ride guides only on the buses where you
 have paid a ticket to get on. Need to have ride guides available in locations other than
 on the bus to help promote ridership.
- Schedules can be confusing, difficult to read. Need training in how to read them.
- No stop announcements; it is difficult if you are new to riding the buses and/or uncertain as
 to where you are going and when to get off.
- A free pass program in San Francisco for BART worked very well to promote transit. Riders could put their names on the back of their ticket and place it in a glass partition area, by the bus driver. Winner won a free pass for a year with 10 to 20 awarded annually! Did not have to be present to win. A great way to express appreciation to regular users.
- Expanded service; need more evening service hours.
- Need increased service; more frequent bus service.
- Need more bus pass programs, distribution of discounted passes for the lowest income families.
- Difficult for families to use buses as the buses don't go where they need to go children to school, to job training, to other appointments – multiple trips are difficult on public transit.
- Transfers at First and Main Street difficult between City and County buses. Have to travel 3 miles out-of-the-way.
- Transfer at the North Valley Mall is not well signed waited on the wrong side of the stop
 and missed the bus; unclear as to what "inbound" and "outbound" mean and just where
 one is supposed to be waiting.
- Many consumers working on Saturday. Saturday B-Line services, often in the evenings, are somewhat more limited. Can be difficult.

- Youth transportation needs middle school kids often live quite a distance away from the school. Kids should be able to use transit. Need to "invite" them as they may not see their parents using transit.
- Low-income individuals need assistance in purchasing bus passes. Even discounted passes can be beyond the means of the lowest income.
- Need for round trip for grocery shopping, to assist with grocery bags.
- Case manager staff not aware of the unmet needs hearing process although the CAP counselors are often made well aware of gaps in service and areas of unmet need.
- Court house is in Oroville (county seat) but many people have to come from Chico. This
 hourly bus service, to juvenile hall, to traffic court. Frequency of buses between Chico
 and Oroville needs to be improved; standing on that almost one-hour ride is not
 uncommon.
- Paradise to Oroville service needs to be increased.

<u>Strategies</u>

- Travel training programs are needed focus on youth would be valuable to build new riders.
- Car loaner programs of interest may be ways in which to help those at considerable distance from transit
- Partnerships vital -- are there ways to build collaborations with the school districts and to use these vehicles more broadly?
- Fuel cards/ vouchers/ additional bus passes beyond what CAP benefit might be.
- Bus stop furniture bus shelters at high use area; more benches; more signs.

APPENDIX F – OUTREACH FOCUS GROUP SUMMARIES

<u>Three Consumer Focus Group Discussions</u>

Paradise Treatment Center – Behavioral Health

Approximately 30 individuals met with the consultant team member for over an hour to talk about what their needs and concerns were with regard to transportation. Five individuals walked to the Center that day. Of those responding to the question of how they traveled there that day, nine drove themselves; nine drove with others as passengers; four took the Paradise Express and one walked. Note: the group did include five student nurses who participated in the discussion in limited ways. Consumer participants were each given \$10 Carl's Junior gift cards as a thank you for participating.

Transportation Needs/ Gaps/ Concerns

- Consumers expressed appreciation for the services that do exist.
- One consumer uses the Paradise Express to go grocery shopping but is uncertain as to how many bags of groceries she is allowed to bring on-board. Others responded that six (6) bags were the limit.
- Some consumers are using the Paradise Express exclusively; the buses are old and need replacement; drivers aren't showing up sometimes and the vehicles sit and don't leave the yard (the yard is just behind the Treatment Center so consumers get a birds-eye view of vehicle comings and goings).
- There is no same-day service on Paradise Express and some trip needs cannot be planned ahead.
- One regular rider on Paradise Express (subscription service) was dropped from the schedule although she was not on vacation; she had been at a previous time. Center staff had to call to get her replaced onto the schedule. Some kind of dispatcher/ scheduling problem and drivers could not override the manifest they had been given.
- Communication with dispatchers of Paradise Express is difficult
 - Could be easier. Staff have to call in on behalf of consumers and even at that dispatch often won't take the calls.
 - Have to get to the "right" individual in order to get problems resolved
 - Very long waits on hold to get through to dispatch and then line goes dead.
 - No follow-through on issues or concerns, as with consumer dropped from the schedule.
 - Apparently have implemented new dispatch/ scheduling software and having a lot of difficulty but communication should increase rather than decrease during this transition period.
- Reliability of service on Paradise Express is a problem. Consumers report missing medical
 appointments or other therapy services because their pick-up is delayed and the scheduled
 medical timeslot is lot.
- Affordability of a bus fares is a problem. Need smaller denominations for fare tickets. It can be difficult to have the \$20 amount necessary to buy the 10-ticket book.
- Transit fare affordability difficult for those on fixed income, giving out \$950 to \$1000 a month for room and board out of SSI check that is only a little more than a thousand dollars leaves little left for much else, including bus fares.
- Bus frequency to/ from Paradise of every two hours is not sufficient. Would like more frequent buses, at least at certain times of the day.

- Need a stepping stool to assist those with poor knees in boarding the buses.
- New drivers are very helpful and provide information to riders.
- Bus stop improvements are needed
 - Shelter in Magalia
 - Benches and places to wait needed for Paradise Express and for fixed-route services elsewhere
- Taxi fares are very expensive; must take it sometimes but cost is very high.
- For car owners, multiple reports of driving less given the costs of fuel; concern about not having enough funds for fuel to get to basic appointments.
- Interest in mileage reimbursement programs or ridesharing where individuals can rideshare and share the cost of fuel, helping one another out wit the escalating fuel costs.
- Shopping shuttles needed, into Costco/ Walmart for less expensive groceries. Interest in two day a week, or even once weekly shopping shuttle.
- Traveling to medical facilities, including Feather Rivers Hospital in Canyon View, Canyon View Clinic, VA in Redding, can be difficult without one's own car.
- MediCal transportation is very limited; then if your trip doesn't come and you loose your appointment, you can't easily get another medical appointment.
- Transportation to veterinary clinics for the transit dependent is a problem when they are not allowed to bring a pet who is <u>not</u> seeing eye or companion animal

Resources

VA van from Chico to Sacramento; just have to get to Chico.

Taxi service available around Paradise.

Some consumers have their own vehicles but are having increasing difficulty fueling these; suggests opportunity for ridesharing/ car pooling with assistance for fuel.

Local pharmacy is delivering medications. This is a great assistance.

Strategies

- 1. Bus tickets (demand response) in smaller denominations (\$5)
- 2. Voucher programs to provide emergency bus fares to individuals whose SSI and living funds run out, including subsidized taxi vouchers.
- 3. Bus signage, bus shelters, more benches at stops.
- 4. Travel training.
- 5. Improved dispatcher procedures for Paradise Express and attention to customer relations and problem-solving around legitimate scheduling issues.
- 6. Same-day demand responsive service for those who cannot plan their trip ahead.
- 7. Gasoline fuel cards for emergency trips for those who own their own car but have run out of funds to fuel it.
- 8. Targeted shopping shuttles for once or twice weekly group trips to selected destinations.
- 9. Car loaner program or assistance with maintenance.
- 10. More vehicles, more accessible vehicles for Paradise Express.
- 11. More accessible vehicles for Paradise Express.
- 12. Additional service into Magalia as twice daily is not sufficient.
- 13. A bus owned and operated by the Paradise Treatment Center to fill in transportation gaps when the public services breakdown and to provide additional recreational and special outing opportunity.
- 14. Develop ride share, volunteer driver capabilities for those consumers who are still driving but need assistance with fuel / mileage reimbursement.

Jesus Center Consumer Focus Group - Low-income

Noon Meal Program, ten consumers

A conversation was held with seven consumers of the noon-time luncheon program, and the group included a young mom with an infant under 3 months, several women and men between the ages of 24 and 50, and two women over age 50. Participants were each given a \$10 Carl's Junior gift card as a thank you for participating.

Complements

- Appreciate the service and the drivers; drivers can be very helpful and very important, as with the last run of the night, a dark corner and a friendly, welcoming bus driver.
- Route 2 Chico, rider uses regularly with few problems; transfers to Route 6. Fast and efficient.
- B-Line services are quite sufficient and the \$18 / month bus pass is a very fair price. Service is great.
- Drivers do seem to be well-trained about using the lifts and boarding passengers in wheelchairs; very helpful, stopping the bus closer to the individual.
- There is a very good lost-and-found. Riders appreciate that.
- Buses are clean.

Needs/ Issues and Concerns

- Employment Development Department (EDD)/ welfare provides only 10 bus rides (per week?); this is not sufficient when you are looking for work and traveling to a number of destinations.
- More efficient to get a monthly pass but the system is not set up to provide for monthly passes; have to use the individual tickets which are not sufficient.
- Very limited options for getting bus tickets Catholic Workers, Salvation Army (which is a 3 mile walk from the nearest bus stop), Longfellow Catholic Ladies.
- Bus to Magalia on the weekends would be good there is some work to be had there for the elderly individuals who need handyman assistance.
- B-Line buses do leave early sometimes and this is difficult, particularly if you are connecting, for example from Route 6 to Route 2 or Route 6 to Route 10 or Route 6 to Route 4.
 When you miss the connection it is a long wait until the next bus. Some drivers will call ahead to the connecting driver; others will not.
- B-Line buses don't always complete their runs. On the Saturday prior, the young mom with the baby was waiting for the last bus, Route #10, 6:04 p.m. She was early to the stop and waited for an hour. The bus never came.
- B-Line Route 20 to Orville is almost always at standing room-only. It runs every two hours and always over packed. The mid-day bus, 12;50 p.m., is over full with people going to afternoon court sessions at the courthouses. Almost doesn't matter which bus you take; it is too full.
- Sundays would be nice if there was more bus service on Sundays. Some jobs require that
 you work Sundays and travel to or from work when the buses aren't running.
- Drivers:
 - Sometimes rude to passengers;
 - o Not informative when a rider asks a question about routing and transfers.
 - Drivers don't seem to know the bus routes and how to use them.

- More signage is needed. Many stops do have signs. Riders don't know if they are in the right places or not; very scary as you might miss your buss.
- Travel training is needed to help riders use the buses better, to introduce new riders; very confusing what is outbound and what is inbound.
- There need to be bus shelters, bus benches, better places to wait for the bus, particularly if you have a small child or infant. Seats are very much appreciated.
- Telephone information requires too long a wait up to a half an hour. The dispatcher is answering the phone. That is too much for them to do and dispatch the services.
- Stops are announced by only one driver on the system reports a rider who uses multiple routes around Chico. Some vehicles have the stop request capability; some do not.
- Vehicles seem to break down more often than desirable, particularly along Skyway to Parkway with waits for passengers then of over an hour.

Strategies

- > Run a half-day service on Sundays to, at a minimum, serve area church services..
- > Develop travel training, rider training capabilities to teach people how to ride the bus.
- Add shelters and stops and replace signage at stops where it is missing.
- Increase frequency of service to Magalia; add weekend runs to Magalia.

Jarvis Gardens Senior Residential Apartments – Independent Living Seniors Chico, CA.

Eighteen seniors attending this focus group discussion responded to an invitational notice posted in the community room. Snacks and liquid refreshment were provided. All residents were new to this facility as it just opened in November 2007. While most residents have lived in Chico or Oroville areas for most of their lives, three were from out-of-state: Okalahoma, Oregon and Arizona. There were three men and twelve women. One was in a mobility device and several had canes; one had a walker.

Five individuals had their own cars but two of these persons were no longer driving. Four persons used the B-Line paratransit, known to them as the Clipper, and five had used B-Line fixed-route services at least once in recent months. Two of these individuals were regular B-Line riders. Others traveled where they needed to go with family or friends. One individual was providing rides to other residents in her own car, usually reimbursed for gasoline. Three individuals have ADA certification. One participant was not a resident but represented a resident, not present, who used an electric wheelchair.

Complements

- Appreciate the drivers as they are wonderful.
- Appreciate the 30 minute frequency on the #6 line in Chico.
- Appreciate that it only takes 7 days to get an ADA certification.
- Appreciated the Ride-Transit-Free week and rode to Paradise and Oroville during that week. Bus fare costs can be a concern.

Transportation Needs/ Gaps/ Concerns

About B-Line Paratransit:and Fixed Route Services

- One woman had been using the Clipper paratransit services five days-a-week until recently but had stopped doing so due to frustrations over the telephone reservation system. She had to call daily and reported often being on hold for long periods of time. She would get the recording about being the "cue" with so many persons ahead of her. Sometimes it was a two minute wait; sometimes a thirty minute wait.
- Another woman reported routinely waiting on hold for fifteen minutes or more to place her trip request.
- Vehicle pick-ups are reportedly sometimes on-time, within the 15 minute on-time pick-up window and sometimes very late. This past Saturday one woman reported waiting two hours for her pick-up.
- For another rider, this past Saturday the bus came early, at 11:40 for a 12:00 pick-up. She was not ready but hurried to get out there so as not to loose her ride.
- Confusion about the timing for booking trips was reported by several residents:
 - o Can call to book a trip for the next day but usually service is full.
 - Can call a week ahead but sometimes the dispatch won't accept your reservation.
 - One woman called 8 days ahead and was told to call back 7 days ahead; when she did call the next day, now 7 days ahead, the trip time was not available.
 - Sometimes can call 3 days ahead and get a ride; no consistency about when is the best time to call.
 - The recorded sequencing message gets "out of wack"; recently told the resident she was caller number five of four or something equally illogical.
- Dispatcher rude; can be more courteous to callers who have sometimes waited a long time.

- Need more drivers vehicles are often full.
- Ride times are long ice cream melts on the way home from the grocery store.
- Need more call takers/ dispatchers so that the wait times on the telephone are not so long.
 Riders overhear the dispatcher taking telephone information calls and taking trip requests and trying to dispatch trips. Too much for a single individual to get done.
- No show policy is perceived as unfair charge you for the ride after one-time of missing the
 vehicle; rider was at the mall and did not connect with the vehicle although she thought
 she was where she was supposed to be. She got a ride home and then was called later
 by dispatch to determine where she was and was told that she would be charged for the
 trip that didn't happen.
- Need better vehicles buses break down regularly and trips are delayed.
- Need Sunday transportation service in order to get to church.
- Need a bus stop/ bus service to Beauty College at Cohasette and 1st Avenue; no service.
- Transfers [at the mall] can required a long wait very tiring.
- Difficulty getting ADA certified. Don't have access to the Internet (note: only one of the eighteen consumers present had Internet access)
- The monthly bus pass of \$15 on fixed-route is a very reasonable cost; much better than \$4 for a round-trip cost on the Clipper (B-Line paratransit).
- Emergency, same-day trip needs are a problem. Cannot plan ahead for all trips.
- Interest in immediate needs transportation for those limited instances when you do need transportation that day and cannot plan ahead. Not all of these trips are medical; recent need for legal assistance, to get to lawyers and sign papers. Difficulty getting a ride.

About Stops and Shelters

- Need bus shelters to protect from the rain.
- Need a stop closer to this facility ideally with a bus bench to sit upon while waiting for the bus -- on Notre Dame at 20th Street. Current stop is two very long blocks from the facility, walking down [20th Street\}.
- Need to be able to get to Paradise Hospital, Canyon Clinic facilities where there are four or five doctors who see older persons --- medical trips Chico to Paradise.
- Drivers need to be better informed about transportation services; they can't tell you where the stops are; they don't announce the stops; particularly difficult if you are a new rider.
- Need more stops along the routes; sometimes the bus stop is gone and you aren't sure if this is a stop or not.
- Trip- chaining needs; running several errands when out and traveling with limited energy.
 Need to be able to make multiple stops and not have to wait too long for a vehicle to return for you but have that vehicle wait while the errand is quickly completed.

About Their Transportation Resources

- One woman just gave up using her car, due to the high cost of fuel and her own confidence in her driving. She was unsure as to how to use public transit or where to go to get information about public transit. She was not familiar with ADA or B-Line services.
- One woman just purchased a scooter from Walgreens, about \$500. Has been very pleased with it. She takes it inside her apartment and plugs it in to charge its electric battery it in her living room.
- A consumer used Merit Medi-Trans when she had no other alternative to get to a medical appointment and it cost \$70.
- A resident who is still driving, and is a good driver, does anticipate a time when she won't
 be driving. She wondered how to get transit information and realized that she did not
 know where to start looking.

Strategies/ Projects

- Bus stop closer to Jarvis House (20th at Notre Dame) with a bus bench
- Support for purchasing the scooters
- Same-day, immediate needs transportation capability.
- Shopper shuttle days so that ice cream wouldn't melt --- taking you directly home to Jarvis House from the grocery store.
- Mileage reimbursement programs would be very helpful would provide something back to the resident who is still driving but has limited resources as fuel becomes ever more expensive; would enable the resident to feel that they could ask for assistance with some way of offering something back.

APPENDIX G – SAMPLE PROJECT: THE "RIGHT RIDE" TRANSPORTATION ROJECT



BUTTE COUNTY ELDER SERVICES COORDINATING COUNCIL TRANSPORTATION SUB-COMMITTEE The "Right Ride" Transportation Project

Prospective Project Summary:

The Transportation Sub-Committee of the Butte County Elder Services Coordinating Council has identified essential transportation needs for low income individuals in Butte County that could be met through a collaborative project benefiting low income individuals, individuals with disabilities, and individuals needing job training. This project would provide cost effective transportation by matching riders with the "right ride;" i.e., the least costly mode of travel suited to their needs, based on overall health status and mobility limitations.

Community Need to be Met:

Low income individuals with disabilities in Butte County, including both younger and older adults, lack adequate transportation resources to enable them to travel from outlying communities to other parts of the county to receive health care, including adult day health care and other essential services. Many of these individuals need wheelchair lift equipped transport; others have special care needs while in transit due to medical issues such as dialysis or dementia. The need for additional transportation services for these low income individuals has reached a critical point due to the rising cost of gasoline, which has severely reduced the availability of non-emergency medical transportation. Butte County currently lacks these services in most of the rural communities of the county, including Magalia, Kelly Ridge, and Palermo, as well as between larger communities, including Paradise to Chico and Oroville to Chico.

Since 1/19/08, Merit Medi-Trans, a major transportation services provider in Butte County, has turned down over 240 requests for non-emergency medical services from low income individuals qualifying for Medi-Cal. With further increases in gas prices, the average number of daily requests for service that must be denied is also increasing. The total service denials for the 2008 calendar year are expected to easily exceed 900.

Additionally, transit dependent individuals served by Butte County Behavioral Health need both job opportunities and training in how to utilize the bus system in order to reach jobs. Many low income individuals, older adults who can no longer drive, and individuals with disabilities who have potential to utilize the bus system, also need transit training in order to safely navigate the available network of transit services.

"Right Ride", page two

Project Description:

Overview -

The "Right Ride" Project would integrate several modes of transportation to match individuals in need of a ride with the most appropriate kind of ride, creating cost effective access to essential care and services for low income adults with disabilities, including older and younger adults. Building upon existing resources, three "modes of travel" would be developed to direct low income adults and those with disabilities to the right kind of ride to meet their needs. A Training Collaborative would function to provide the training needed to ensure safe on-going operation of each of these modes of travel. The three modes of travel and the fourth component of the "Right Ride" Program would be:

- I. Volunteer Rides
- **II.** Non-Emergency Medical Transportation Trips
- III. Bus Rides via a Bus Buddy Program: Travel Training to access public transit through the bus system
- IV. Training Collaborative

In the initial (start-up) phase of this project, services would be provided to a limited group of riders with critical needs, identified through the Peg Taylor Center for Adult Day Health Care, PASSAGES, the dialysis clinics and Adult Protective Services. After a successful first phase, services could then be expanded to serve the larger community.

Project Components --

I. Volunteer Rides

As demonstrated by successful projects throughout the country, volunteer ride programs can effectively meet transportation needs in areas where transit solutions are too costly. In Butte County, volunteer transportation is already being provided to the Right Ride's target population through PASSAGES' Volunteer Services; however this has been limited to consumers served by PASSAGES. Over the past several years, the ESCC Transportation Sub-Committee has studied the prospective benefits of expanding this service.

Through the "Right Ride" Project, this service would be expanded to serve clients traveling to adult day health care, dialysis or other critical medical appointments. Volunteer drivers would be recruited, screened and supervised as a distinct component of the PASSAGES Volunteer Services programs. Passengers would be able to travel together from common areas and/or to common destinations, and drivers could provide curb to door and door through door assistance. Training of volunteer drivers would be provided through the "Driver Training Collaborative."

II. Non-Emergency Medical Transportation Trips

Low income individuals who need to travel in wheelchair lift equipped vehicles will be provided with non-emergency medical transportation. Service will be available only to and from medical appointments and eligibility standards will apply. Upon

"Right Ride", page three

confirmation of eligibility, vouchers will be approved to reimburse the provider. This service will be provided to individuals with a critical need for essential on-going health care who lack other options for transportation.

Vocational Training Component – Qualified low income individuals in need of vocational assistance would receive training in the provision of non-emergency medical transportation. There is an on-going need in Butte County for qualified drivers. This component of the **Right Ride Program** would create new vocational opportunities.

III. Bus Buddy Program

The Bus Buddy Program would provide Travel Training to help individuals served by Butte County Behavioral Health to access public transit and job opportunities. Bus Buddies would be recruited through Butte County Behavioral Health and trained to be matched with eligible individuals who are unable to ride the bus system without training and assistance

The Bus Buddy Program would be run through the BCDBH Wellness and Recovery Center which is a newly developed program through Mental Health Services Act funding. This funding is anchored in a strength based philosophy which promotes empowerment and independence. The goals of the Bus Buddy Program are consistent with this philosophy providing a sense of empowerment and independence for both the identified trainer and those who are trained to successfully use public transportation.

The Wellness and Recovery Center will provide ongoing support and supervision for the Bus Buddy Trainer's. BCDBH Wellness and Recovery Center would be able to immediately offer stipends for one to two Bus Buddies Trainers working 10 hours per week. Trainer's would be paid approximately \$10.00 dollars an hour for up to 10 hours a week, 52 weeks a year for a total of \$5,200.00 to \$10,400.00 annually.

An expansion goal for the Bus Buddy Program would be to have the BCDBH Bus Buddy trainer's move beyond training other BCDBH consumers. The Wellness and Recovery Center would provide the additional training and support needed so that the Bus Buddy's were able to successfully interact with a wider variety of community members who need help navigating the public transportation system. It is hoped that as the program grows further funding can be obtained to expand the number of Bus Buddy Trainers.

IV. Driver Training Collaborative

The cooperating agencies taking part in the Right Ride Project would serve as a Training Collaborative to provide low-cost training for volunteer and professional drivers, as well as the Bus Buddy program.

"Right Ride", page four

A full range of training resources is represented in the collaborating agencies, including training in the following areas:

Passenger Assistance
Vehicle Maintenance
Mobility Training
Ethical Standards
Adult Abuse Reporting
Confidentiality
Special Needs
Non-Emergency Medical Transportation

Potential Partners in the Collaborative --

The following organizations have identified interest in helping to develop a transportation related collaborative to facilitate the development and implementation of a project to address these needs, with more agencies to be identified as needed:

Merit Medi-Trans – Steve Horne, Owner

Peg Taylor Center for Adult Day Health Care – Diane Cooper-Puckett, Executive Director

PASSAGES – Carol Childers, Director Volunteer Services and Mary Neumann, Deputy Director, Area Agency on Aging

Independent Living Services – Jay Harris

Butte County Behavioral Health - Mental Health Services Act – Betsy Gowan, Manager Wellness and Recovery

APPENDIX H --- Workshop Agency Participants' List

January 2008 - SSTAC

Fname	Lname	Agency	Email	Phone	Address	City	Zipcode
Steve	Horne	Merit Medi-Trans	steve@meritmeditrans.com	893-8690	1355 E. Enton Rd.	Chico	95926
Janice	Phillips	BCAG	jphillips@bcag.org	879-2468			
Diane	Cooper-Puckett	Peg Taylor Center	dcoopptc@sbcglobal.net	342-2345	124 Parmac Rd.	Chico	95926
Kristy	Bonnifet	BCAG	kbonnifet@bcag.org	879-2468			
Jim	Peplow	BCAG	jpeplow@bcag.org	879-2468			
Joseph	Cobern	Passages	jcobert@csuchico.edu	898-6758	2491 Carmichael Suite 400	Chico	95928
Mary	Neumann	Passages	mneumanne@csuchico.edu	898-5961	2491 Carmichael Suite 400	Chico	95928
Ivan	Garcia	BCAG	igarcia@bcag.org	879-2468			

February 2008 - Outreach Workshops

OROVILLE 2-24-08

NAME	ORGANIZATION	EMAIL	PHONE	ADDRESS
Sandy Walburn	Butte Co ROP	swalburn@bcoe.org	879-0727	2491 Carmicheal Dr/ Ste 100
Bryan Bickley	Feather River Tribal	bryan.bickley@grth.org	530-534-5394	2145 5th Avw Oroville 95965
Lynndee Caput	Greater Oroville Community Outreach	lynndeecaput@yahoo.com	533-0780	
Melissa Hormann	HHCM		343-0727	1398 Ridegewood Chico
Carol Rawlins	Houre Health Care		343-0727	1398 Ridgewood Chico 95973
Tara Wahinns	Oroville Hopital			2767 Olive Hwy 95965
Laura Hudson	Oroville Hopspital	Lhudson@orohosp.com	532-8541	2767 Olive Hwy suite 23 Oroville
Pamela Hospers	Public Authority/IHSS	phospers@buttecounty.net	538-7100	202 Mira Loma Dr Oroville 95965
Carl Ochsner	WTC, Inc	carlo@ewtc.org	343-7994 x104	2255 Fair St Chico 95928
Irene Poe		-	533-3321	

PARADISE 2-24-08

NAME	ORGANIZATION	EMAIL	PHONE	ADDRESS
Daun Rollins	BCDBH	drolling@buttecounty.net		
Tim Muser	BCDBH	tmuser@buttecounty.net	872-6343	805 Cedar St Suite A Paradise
Sarah Feingold	BCDBH	sfingold@buttecounty.net	572-6328	
Tom Tenori	CAA	ttenori@buttecaa.com		
Sheryl Bell	HHCM	sbell@homehealthcaremgmt.	com 343-0727	1398 Ridgewood Dr Chico 95973
Julie Wetmore	WIC	jwetmore@buttecounty.net		-

A-M-M-A TRANSIT PLANNING/ TRANSIT RESOURCE CENTER

February 2008 - Outreach Workshops cont'd

CHICO ROP 2-25-08

NAME	ORGANIZATION	EMAIL	PHONE	ADDRESS
Mary Gorman	Addus Healthcare	mgorman@addus.com	566-0405	1074 East Autt A3
Kathy Dukusaor	Addus Healthcare		5636-0405	1074 East Ave A3
Dave Gauz	Addus Healthcare	daveksplace@att.net	342-7248	
Juliet Bartel	BC Behavioral Health	jbartel@buttecounty.net	879-2401	107 Parmac Suite 2 Chico 95926
William Mocine	BC Dess	wmoline@buttecounty.net	538-5132	78 Table mtn. Blvd Oro, CA 95965
Connie Nicolaus	Jesus Center-Sabbath House	Connie@jesuscenter.org	518-2184	1297 Park Ave. Chico, CA 95928
Steve Horno	Merit Medi Trans	steve@meritmeditrans.com	530-892-2441	
Mary Neumann	Passages	mneumann@csuchico.edu	898-5961	249 Cramichad#400
Joseph Covery	Passages	jcobery@csuchico.deu	898-6758	2491 Carmichael Suite 400
Carol Childers	Passages	cchilders@csuchico.edu	898-4307	
Diane Cooper-Puckett	Peg Taylor Cneter	dcoopptc@sblgobal.net	342-2345	2491 Carmichael Suite 400
April Backues	Skyway House	Aprilb@skywayhouse.org	898-8326	564 Rio Lindo Ave ste 1030 Chico CA
Terrence Williams	The Well ministry of rescue	Mail@terrence64.com	514-0441	2612 Esplanade
Joline Monson	Work Training Center	joline@ewtc.org	343-5706	2255 Fair ST Chico 95928
Jay Harris	-		893-8527	124 Parmal Rd Chico 95926

COMMUNTITY COLLEGE/STATE COLLEGE CONVENTION 2-25-08

NAME	ORGANIZATION	EMAIL	PHONE	ADDRESS
Mary Leary	CSUD	mleary@chicousd.org	891-3218	2455 Carmichael Dr 95928
Mike Miller	Butte CCD	millermi@butte.edu	895-2381	3536 Butte Campus Dr Oroville
Andy Sileki	Butte CCD	sulekian@butte.edu	895-2253	
Marvin Pratt	CSU Chico	mpratt@csuchico.edu	898-5126	400 w First St Chico 95929-0019
Sean Farrell	CSU Chico	sfarrell@csuchico.edu	898-5103	
Scott Jones	CUSD	sjones@chicousd.org	891-3000 ext 131	1163 E 7th st Chico 95928

March 2008 – Agency Interviews

Fname	Lname	Agency	Address	City	Zipcode	Email	Phone
Bryan	Bickley	Feather River Tribal Health	2145 Fifth Ave.	Oroville	95965	bryan.bickley@frth.org	(530) 534-5394
Anna	Dove	Children and Families (First 5)	82 Table Mountain Bl. Suite 40	Oroville	95965	adove@buttecounty.net	(530) 538-7964
Elizabeth	Gowan	Behavioral Health	107 Parmac Rd Suite 4	Chico	95926	egowan@buttecounty.net	(530) 891-2850
Bob	Michaels	Northern Valley Catholic Services	10 Independence Circle	Chico	95973		(530) 345-1600
Tara	Sullivan-Hames	Helpcentral.org	2445 Carmichael Dr.	Chico	95928	tsullivanhames@ncen.org	(530) 879-2455
Thomas	Tenorio	Community Action Agency	2255 Del Oro Ave	Oroville	95965-	ttenorio@buttecaa.com	(530) 538-7559
Teresa	Thornton	Del Norte Clinics Inc.	2800 Lincoln Blvd.	Oroville	95966		(530) 534-7500
Tim	Muser	Behavioral Health	805 Cedar St. Suite A	Paradise	95969	tmuser@buttecounty.net	(530) 872-6343
Connie	Nicolaus	Jesus Center - Sabbath House	1297 Park Ave.	Chico	95928	connie@jesuscenter.org	(530) 899-9343

April 2008 – Agency Interviews

Fname	Lname	Agency	Email	Phone	Address	City	Zipcode
Julianna	Roberts	CAA of Butte County	<u>iroberts@buttecaa.com</u>	693-2079	2640 S. 5th Street	Oroville	95965
Pamela	Smith	CAA of Butte County	psmith@buttecaa.com	538-7559	2255 Del Oro Ave.	Oroville	95965
Gloria	Rodgers	CAA of Butte County	grodgers@buttecaa.com	891-2977	181 East Shasta Ave.	Chico	95969
Kathi	Leggett	CAA of Butte County	kleggett@buttecaa.com	354-1934	181 East Shasta Ave.	Chico	95969
Rae	Rush	CAA of Butte County	rrush@buttecaa.com	538-7534	2640 S. 5th Street	Oroville	95965

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Fname	Lname	Agency	Email	Phone	Address	City	Zipcode
Diana	Anderson	Far Northern Regional Center	danderson@farnorthernrc.org	222-4791	1900 Churn Creek	Redding	96002
Susan	Bachlor	Jarvis Gardens	jan@cchnc.net	345-1384	2001 Notre Dame Bl.	Chico	95928
С	Childers	Passages	cchilders@csuchico.edu	898-4307	2491 Carmichael Dr.	Chico	95928
Bill	Coady	Butte County Behavioral Health	bcoady@butteco.net	877-5845	805 Cedar St.	Paradise	95969
Joseph	Cobery	Passages	<u>icobery@csuchico.edu</u>	898-6758	2491 Carmichael Suite 400	Chico	95928
Kathy	Duran	Cabs 4 Kids	maserabey@aol.com	892-2270	676 Bryant Ave.	Chico	95926
Steve	Horne	Merit Medi-Trans	steve@meritmeditrans.com	893-8690	·		
Pam	Hospers	IHSS Public Authority	phospers@buttecounty.net	538-7100	202 Mira Loma	Oroville	95928
Laura	Hudson	Oroville Hospital	lhudson@orohosp.com	532-8541	2767 Olive Hwy Suite 23	Oroville	95966
Kathy	Lusker	Far Northern Regional Center	klusker@farnortherncr.org	895-8633	1377 S. Lassen	Chico	95973
Rachel	McBride	Fair Winds of Indian Education	rachel.4winds@sbcglobal.net	895-4212	2345 Fair St.	Chico	95928
Bob	Michels	NVCSS	bmichaels@nvcss.org	345-1600	10 Independence Circle	Chico	95973
William	Moline	Butte County DESS	wmoline@buttecounty.net	538-5132	78 Table Mountain Bl.	Oroville	95965
Susan	Nance	Workability	snance@bcoe.org	879-7468			
Julianna	Roberts	CAA of Butte County	iroberts@buttecaa.com	538-7534	2640 S. 5th St.	Oroville	95965
Pamela	Smith	CAA of Butte County	psmith@buttecaa.com	538-7559	2255 Del Oro Ave.	Oroville	95965
Tara	Sullivan-Hames	-	tsullivanhames@hcen.org	879-2455	2445 Carmichael Dr.	Chico	95928
Christy	Taylor	BCCC	christy@caminar.org	895-8017	825-A Main St.	Chico	95928
Cameron	Wise	Work Training Center	cameron@ewtc.org	343-5713	2255 Fair St.	Chico	95928