Region 11: Fayette, Franklin, Rush, Union and Wayne Counties









Prepared for Indiana Department of Transportation

January, 2022

Prepared by: RLS & Associates, Inc.

3131 S. Dixie Hwy, Suite 545 Dayton, OH 45439 (937) 299-5007 rls@rlsandassoc.com



A RESOLUTION SUPPORTING THE REGIONAL COORDINATED TRANSPORTATION PLAN UPDATE TO BE SUBMITTED TO THE INDIANA DEPARTMENT OF TRANSPORTATION, OFFICE OF TRANSIT

WHEREAS, people with specialized transportation needs have rights to mobility. Older adults, individuals with limited incomes and people with disabilities rely on public and specialized transportation to live independent and fulfilling lives. These services which are provided by public and private transportation systems and human service agency programs are essential for travel to work and medical appointments, to conduct essential errands, or to take advantage of social or cultural opportunities; and

WHEREAS, under the Infrastructure investment and Jobs Act (IIJA), projects funded by the Federal Transportation Administration (FTA) Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program must be included in a locally developed, coordinated public transit-human services transportation plan; and

WHEREAS, the Federal Transportation Administration (FTA) Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program provides operating and capital assistance funding to provide transit and purchase of services to private nonprofit agencies, and to qualifying local public bodies that provide specialized transportation services to elderly persons and to people with disabilities; and

WHEREAS, a local committee with participation by seniors, individuals with disabilities, representatives of public, private, and non-profit transportation providers met on March 3, 2022; and

WHEREAS, the local committee reviewed and recommended through consensus the Coordinated Public Transit - Human Services Transportation Plan to be submitted to the Indiana Department of Transportation, Office of Transit.

NOW, THEREFORE, BE IT RESOLVED BY THE TRANSPORTATION ADVISORY COMMITTEE:

That this resolution takes effect immediately upon its adoption.

ADOPTED BY THE TRANSPORTATION ADVISORY COMMITTEE THIS March 3, 2022 AS EVIDENCED BY THE **AUTHORIZING SIGNATURES BELOW.**

Exec. Director

Name and Title

Date
Date

Date

Date

Date

Name and Title

A RESOLUTION SUPPORTING THE REGIONAL COORDINATED TRANSPORTATION PLAN UPDATE TO BE SUBMITTED TO THE INDIANA DEPARTMENT OF TRANSPORTATION, OFFICE OF TRANSIT

WHEREAS, people with specialized transportation needs have rights to mobility. Older adults, individuals with limited incomes and people with disabilities rely on public and specialized transportation to live independent and fulfilling lives. These services which are provided by public and private transportation systems and human service agency programs are essential for travel to work and medical appointments, to conduct essential errands, or to take advantage of social or cultural opportunities; and

WHEREAS, under the Infrastructure Investment and Jobs Act (IIIA), projects funded by the Federal Transportation Administration (FTA) Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program must be included in a locally developed, coordinated public transit-human services transportation plan; and

WHEREAS, the Federal Transportation Administration (FTA) Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program provides operating and capital assistance funding to provide transit and purchase of services to private nonprofit agencies, and to qualifying local public bodies that provide specialized transportation services to elderly persons and to people with disabilities; and

WHEREAS, a local committee with participation by seniors, individuals with disabilities, representatives of public, private, and non-profit transportation providers met on March 3, 2022; and

WHEREAS, the local committee reviewed and recommended through consensus the Coordinated Public Transit – Human Services Transportation Plan to be submitted to the Indiana Department of Transportation, Office of Transit.

NOW, THEREFORE, BE IT RESOLVED BY THE TRANSPORTATION ADVISORY COMMITTEE:

That this resolution takes effect immediately upon its adoption.

ADOPTED BY THE TRANSPORTATION ADVISORY COMMITTEE THIS March 3, 2022 AS EVIDENCED BY THE AUTHORIZING SIGNATURES BELOW.

Name and Title

Date

Exec. Dicclor Vicion County 3/18/2022

Name and Title

Date

A RESOLUTION SUPPORTING THE REGIONAL COORDINATED TRANSPORTATION PLAN UPDATE TO BE SUBMITTED TO THE INDIANA DEPARTMENT OF TRANSPORTATION, OFFICE OF TRANSIT

WHEREAS, people with specialized transportation needs have rights to mobility. Older adults, individuals with limited incomes and people with disabilities rely on public and specialized transportation to live independent and fulfilling lives. These services which are provided by public and private transportation systems and human service agency programs are essential for travel to work and medical appointments, to conduct essential errands, or to take advantage of social or cultural opportunities; and

WHEREAS, under the Infrastructure Investment and Jobs Act (IIJA), projects funded by the Federal Transportation Administration (FTA) Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program must be included in a locally developed, coordinated public transit-human services transportation plan; and

WHEREAS, the Federal Transportation Administration (FTA) Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program provides operating and capital assistance funding to provide transit and purchase of services to private nonprofit agencies, and to qualifying local public bodies that provide specialized transportation services to elderly persons and to people with disabilities; and

WHEREAS, a local committee with participation by seniors, individuals with disabilities, representatives of public, private, and non-profit transportation providers met on March 3, 2022; and

WHEREAS, the local committee reviewed and recommended through consensus the Coordinated Public Transit - Human Services Transportation Plan to be submitted to the Indiana Department of Transportation, Office of Transit.

NOW, THEREFORE, BE IT RESOLVED BY THE TRANSPORTATION ADVISORY COMMITTEE:

That this resolution takes effect immediately upon its adoption.

ADOPTED BY THE TRANSPORTATION ADVISORY COMMITEE THIS March 3, 2022 AS EVIDENCED BY THE **AUTHORIZING SIGNATURES BELOW.**

Possinger, Exec. Director VICION COUNTY 3/18/2022

Date

Region Eye Director - Rest County 3-18-2022 Name and Title

A RESOLUTION SUPPORTING THE REGIONAL COORDINATED TRANSPORTATION PLAN UPDATE TO BE SUBMITTED TO THE INDIANA DEPARTMENT OF TRANSPORTATION, OFFICE OF TRANSIT

WHEREAS, people with specialized transportation needs have rights to mobility. Older adults, individuals with limited incomes and people with disabilities rely on public and specialized transportation to live independent and fulfilling lives. These services which are provided by public and private transportation systems and human service agency programs are essential for travel to work and medical appointments, to conduct essential errands, or to take advantage of social or cultural opportunities; and

WHEREAS, under the Infrastructure Investment and Jobs Act (IIJA), projects funded by the Federal Transportation Administration (FTA) Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program must be included in a locally developed, coordinated public transit-human services transportation plan; and

WHEREAS, the Federal Transportation Administration (FTA) Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program provides operating and capital assistance funding to provide transit and purchase of services to private nonprofit agencies, and to qualifying local public bodies that provide specialized transportation services to elderly persons and to people with disabilities; and

WHEREAS, a local committee with participation by seniors, individuals with disabilities, representatives of public, private, and non-profit transportation providers met on March 3, 2022; and

WHEREAS, the local committee reviewed and recommended through consensus the Coordinated Public Transit – Human Services Transportation Plan to be submitted to the Indiana Department of Transportation, Office of Transit.

NOW, THEREFORE, BE IT RESOLVED BY THE TRANSPORTATION ADVISORY COMMITTEE:

That this resolution takes effect immediately upon its adoption.

ADOPTED BY THE TRANSPORTATION ADVISORY COMMITTEE THIS March 3, 2022 AS EVIDENCED BY THE AUTHORIZING SIGNATURES BELOW.

Name and Title

Exec. Director VRION COURTY 3/18/2022

Date

Look fronklin County 3-18-2022

Name and Title

Date



Moving Public Transportation Into the Future

Contents

Introduction	1
Overview	1
Section 5310 Program: Enhanced Mobility for Seniors and Individuals with Disabilities	1
Plan Development Methodology	2
Glossary of Terms	3
Existing Conditions	6
Population Projections	7
Older Adult Population	7
Individuals with Disabilities	8
Household Income	9
Poverty Status	10
Zero Vehicle Households	10
County Profiles	11
Fayette County	11
Franklin County	16
Rush County	21
Union County	26
Wayne County	31
Inventory of Existing Transportation Providers and Service Gaps	37
Introduction	37
Existing Public Transportation Resources	37
Human Service Transportation Providers	40
Needs Assessment	41
Overview	41
General Public and Stakeholder Meetings	41
Progress Since the 2017 Coordinated Plan and Continuing Challenges to Coordinated Transporta	
Results of the General Public Survey	
Modes of Transportation Used	



Desired Changes to Local Transportation Options	45
Difficulty Getting Needed Transportation	46
Out-of-County Destinations	47
Other Comments About Community Transportation Services	48
Respondent Demographics	48
Implementation Plan	50
Goals and Strategies	50
Goal 1: Maintain Existing Transportation Services for Human Service Agency Clients and the Ger Public	
Strategy 1.1 Replace and Maintain Vehicles through FTA/INDOT Funding and Local Sources	51
Strategy 1.2 Develop Local Tools for Driver Recruitment and Retention	51
Goal 2: Expand Transportation Service for Older Adults, People with Disabilities, Low-Income Individuals, and the General Public	52
Strategy 2.1 Expand the Capacity of Existing Transportation Providers	52
Strategy 2.2 Expand Employment Transportation to Serve More Workers	53
Goal 3: Increase Public Awareness of Available Transportation Services Among Community Stakeholders	55
Strategy 3.1 Educate Community Stakeholders about Available Public and Human Service Transportation	55
Goal 4: Increase Participation in Initiatives to Enhance Mobility	56
Strategy 4.1 Participate Actively in the Indiana Council on Specialized Transportation (INCOST Other Statewide Organizations	•
Strategy 4.2 Educate Local Elected Officials About Transportation Needs	57
Strategy 4.3 Track and Communicate Concerns About Brokered Service Delivery to FSSA and	
Potential Grant Applications	59

Appendix: Outreach Documentation

INTRODUCTION

OVERVIEW

This plan updates the Public Transit-Human Services Transportation Plan for Fayette, Franklin, Rush, Union, and Wayne Counties that was initially developed in 2008; updated in 2012 to fulfill the planning requirements for the United We Ride initiative and the Federal Transit Administration's (FTA) Safe, Accountable, Flexible, and Efficient Transportation Equity Act – A Legacy for Users (SAFETEA-LU); and updated in 2014 to meet the planning requirements for Moving Ahead for Progress in the 21st Century (MAP-21). The SAFTEA-LU and MAP-21 were the Federal surface transportation authorizations effective through September 30, 2015.

On December 4, 2015, the Fixing America's Surface Transportation (FAST) Act, was signed into law as a reauthorization of surface transportation programs through Fiscal Year 2020. The FAST Act applied new program rules to all FTA funds and authorized transit programs for five years. According to requirements of the FAST Act, locally developed, coordinated public transit-human services transportation plans must be updated to reflect the changes established by the FAST Act Federal legislation. The Coordinated Plan was updated again in 2017 to meet the new FAST Act requirements and reflect the changes in funding programs.

On November 15, 2021, the Infrastructure Investment and Jobs Act (IIJA) was enacted into law. The IIJA continues the policies set forth by the FAST Act and provides \$937 billion over five years from FY 2022 through 2026, including \$550 billion in new investments for all modes of transportation, including \$284 billion for the U.S. Department of Transportation, of which \$39 billion is dedicated to transit. The IIJA directs the U.S. Department of Transportation to apply the funding toward modernizing and making improvements.

Funding to update this locally-developed regional Public Transit-Human Services Transportation plan was provided by the Indiana Department of Transportation, Office of Transit (INDOT) and involved active participation from local agencies that provide transportation for the general public, older adults, and individuals with disabilities.

Section 5310 Program: Enhanced Mobility for Seniors and Individuals with Disabilities

The program most significantly impacted by the plan update is the Section 5310 Program because participation in a locally developed Coordinated Plan is one of the eligibility requirements for Section 5310 Program funding.

The Section 5310 Program provides formula funding to States for the purpose of assisting public and private nonprofit groups in meeting the transportation needs of older adults and people with disabilities when transportation service provided is unavailable, insufficient, or inappropriate to meeting those needs.

The FTA apportions Section 5310 Program funds to direct recipients based on the population within the recipient service area. For rural and small urban areas in Indiana, INDOT is the direct recipient. As



the direct recipient, INDOT solicits applications and selects Section 5310 Program recipient projects for funding through a formula-based, competitive process which is clearly explained in the INDOT Transit State Management Plan.

In Indiana, eligible activities for Section 5310 Program funds include purchasing buses and vans, wheelchair lifts, ramps, and securement devices.

Section 5310 Program projects are eligible to receive an 80 percent Federal share if the 20 percent local match is secured. Local match may be derived from any combination of non-U.S. Department of Transportation Federal, State, or local resources. The FAST Act also allows the use of advertisement and concessions revenue as local match. Passenger fare revenue is not eligible as local match.

PLAN DEVELOPMENT METHODOLOGY

Some human service agencies transport their clients with their own vehicles, while others may also serve the general public or purchase transportation from another entity. Regardless of how services are provided, transportation providers and human service agencies are all searching for ways to economize, connect, increase productivity, and provide user-friendly access to critical services and community amenities. In an era of an increasing need and demand for shared-ride and non-motorized transportation and stable or declining revenue, organizational partnerships must be explored and cost-saving measures must be made to best serve the State's changing transportation demands. Interactive coordinated transportation planning provides the best opportunity to accomplish this objective.

According to FTA requirements, the coordinated plan must be developed and approved through a process that includes participation by older adults and individuals with disabilities. And, INDOT and FTA also encourage active participation in the planning process from representatives of public, private, and nonprofit organizations that provide or support transportation services and initiatives, and the general public. The methodology used in this plan update includes meaningful efforts to identify these stakeholders and facilitate their participation in the planning process.

The fundamental element of the planning process is the identification and assessment of existing transportation resources and local/regional unmet transportation needs and gaps in service. This was accomplished by receiving input from the stakeholders noted above through a public meeting, telephone interviews, email conversations, and completion of a public survey available both online and on paper. Social distancing protocols led to changed public engagement and outreach methods.

The coordination plan update incorporated the following planning elements:

- 1. Review of the previous regional coordination plan updates to develop a basis for evaluation and recommendations;
- 2. Evaluation of existing economic/demographic conditions in each county;
- 3. Conduct of a survey of the general public. It must be noted that general public survey results are not statistically valid, but are intended to provide insight into the opinions of the local community. The survey also includes distribution to agencies that serve older adults and individuals with disabilities and their consumers. A statistically valid public survey was beyond the scope of this project. However, U.S. Census data is provided to accompany any conclusions drawn based on general public information;



- 4. Conduct of one local meeting for stakeholders and the general public for the purpose of soliciting input on transportation needs, service gaps, and goals, objectives and implementation strategies to meet these deficiencies;
- 5. Update of the inventory of existing transportation services provided by public, private and non-profit organizations;
- 6. Update of the summary of vehicle utilization for the purpose of determining where vehicles can be better utilized to meet transportation needs;
- 7. Update of the assessment of unmet transportation needs and gaps in service obtained through meetings, interviews, and surveys; and

Development of an updated implementation plan including current goals, strategies, responsible parties and performance measures.

GLOSSARY OF TERMS

Bus and Bus Facilities Grants Program (Section 5339 Program) – The Grants for Buses and Bus Facilities program makes Federal resources available to States and direct recipients to replace, rehabilitate and purchase buses and related equipment and to construct bus-related facilities including technological changes or innovations to modify low or no emission vehicles or facilities. Funding is provided through formula allocations and competitive grants. Eligible recipients include direct recipients that operate fixed route bus service or that allocate funding to fixed route bus operators; State or local governmental entities; and Federally recognized Indian tribes that operate fixed route bus service that are eligible to receive direct grants under Sections 5307 and 5311. Subrecipients may allocate amounts from the grant to subrecipients that are public agencies or private nonprofit organizations engaged in public transportation.

Coordinating Council on Access and Mobility (CCAM) – a Federal interagency council that works to coordinate funding and provide expertise on human service transportation for three targeted populations: people with disabilities, older adults, and individuals of low income. The CCAM works at the Federal level to improve Federal coordination of transportation resources and to address barriers faced by States and local communities when coordinating transportation. The CCAM's mission is to issue policy recommendations and implement activities that improve the availability, accessibility, and efficiency of transportation for CCAM's targeted populations, with the vision of equal access to coordinated transportation for all Americans. Additional information is available at https://www.transit.dot.gov/coordinating-council-access-and-mobility.

Direct Recipient – Federal formula funds for transit are apportioned to direct recipients; for rural and small urban areas, this is the Indiana Department of Transportation. In large urban areas, a designated recipient is chosen by the governor. Direct recipients have the flexibility in how they select subrecipient projects for funding. In Indiana, their decision process is described in the State or Metropolitan Planning Organization's Program Management Plan.

Enhanced Mobility for Seniors and Individuals with Disabilities (Section 5310 Program) – The program provides formula funding to improve mobility for seniors and individuals with disabilities by removing barriers to transportation service and expanding transportation mobility options. This program supports transportation services planned, designed, and carried out to meet the special transportation needs of



seniors and individuals with disabilities in all areas – large urbanized, small urbanized, and rural. The Indiana Department of Transportation, Office of Transit (INDOT) administers the Section 5310 Program in Indiana. The Federal share is 80 percent for capital projects. In Indiana, the program has historically been utilized for capital program purchases. Additional information is available at https://www.transit.dot.gov/funding/grants/enhanced-mobility-seniors-individuals-disabilities-section-5310.

Fixing America's Surface Transportation (FAST) Act – On December 4, 2015, President Obama signed the Fixing America's Surface Transportation (FAST) Act, reauthorizing surface transportation programs through Fiscal Year 2020. Details about the Act are available at www.transit.dot.gov/FAST.

Indiana Department of Transportation, Office of Transit (INDOT) administers the Section 5311 program in Indiana, as well as the Section 5310 program for rural and small urban areas. The Federal share is 80 percent for capital projects. The Federal share is 50 percent for operating assistance under Section 5311.

Individuals with Disabilities – This document classifies individuals with disabilities based on the definition provided in the Americans with Disabilities Act implementing regulations, which is found in 49 CFR Part 37.3. This definition, when applied to transportation services applications, is designed to permit a functional approach to disability determination rather than a strict categorical definition. In a functional approach, the mere presence of a condition that is typically thought to be disabling gives way to consideration of an individual's abilities to perform various life functions.

Infrastructure Investment and Jobs Act - The Bipartisan Infrastructure Law, as enacted in the Infrastructure Investment and Jobs Act, represents the largest Federal investment in public transportation in the nation's history. The legislation will advance public transportation in America's communities through four key priorities: safety modernization, climate, and equity. https://www.transit.dot.gov/BIL

Local Matching Funds — The portion of project costs not paid with the Federal share. Non-Federal share or non-Federal funds includes the following sources of funding, or in-kind property or services, used to match the Federal assistance awarded for the Grant or Cooperative Agreement: (a) Local funds; (b) Local-in-kind property or services; (c) State funds; (d) State in-kind property or services, and (e) Other Federal funds that are eligible, under Federal law, for use as cost-sharing or matching funds for the Underlying Agreement. For the Section 5310 Program, local match can come from other Federal (non-DOT) funds. This can allow local communities to implement programs with 100 percent Federal funding. One example is Older Americans Act (OAA) Title III-B Support Services.

Public Mass Transportation Fund (PMTF) – The Indiana State Legislature established the Public Mass Transportation Fund (I.C. 8-23-3-8) to promote and develop transportation in Indiana. The funds are allocated to public transit systems on a performance-based formula. The actual funding level for 2021 was \$38.25 million. PMTF funds are restricted to a dollar-for-dollar match with Locally Derived Income and are used to support transit systems' operations or capital needs.

Rural Transit Program (Section 5311 Program) – The Formula Grants for Rural Areas program provides capital, planning, and operating assistance to States to support public transportation in rural areas with populations of less than 50,000, where many residents often rely on public transit to reach their destinations. The program also provides funding for State and national training and technical assistance



through the Rural Transportation Assistance Program. Additional information is available at www.transit.dot.gov/funding/grants/grants-programs/formula-grants-rural-areas-5311.

Seniors – For the purposes of the Section 5310 Program, people who are 65 years of age and older are defined as seniors.

Subrecipient – A non-Federal entity that receives a subaward (grant funding) from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. Subrecipient programs are monitored by the direct or designated recipient for grant performance and compliance.

Transit Demand – Transit demand is a quantifiable measure of passenger transportation services and the level of usage that is likely to be generated if passenger transportation services are provided. Refer to the following website for a toolkit and more information on methods for forecasting demand in rural areas: www.trb.org/Publications/Blurbs/168758.aspx.

Urbanized Area Formula Grants Program (Section 5307 Program) - The Urbanized Area Formula Funding program makes Federal resources available to urbanized areas and to governors for transit capital and operating assistance in urbanized areas. An urbanized area is an incorporated area with a population of 50,000 or more. Eligible expenses are typically limited to capital purchases and planning, but operating assistance can be provided under certain conditions, including to systems operating fewer than 100 vehicles. Additional information is available at https://www.transit.dot.gov/funding/grants/urbanized-area-formula-grants-5307

Zero Vehicle Households – No vehicles available to a housing unit, according to U.S. Census data. This factor is an indicator of demand for transit services.



EXISTING CONDITIONS

Region 11 is located in eastern Indiana and includes the counties of Fayette, Franklin, Rush, Union and Wayne. The map in Figure 1 provides a depiction of the area included in this study.

Region 11 Location Map Region 11 Coordinated Public Transt -**Human Services** Transporatation Henry Plan Update Wayne Hancock **Limited Access** Highway Cities Carthage Region 11 **Fayette** Union Rush West Col Shelby Laure Franklin Decatur Bartholomew

Figure 1: Location Map

The demographics of an area are a strong indicator of demand for transportation service. Relevant demographic data was collected and is summarized in this section. The data provided in this chapter was gathered from multiple sources including the U.S. Census Bureau's 2019 American Community Survey (ACS) Five-Year Estimates and the State of Indiana. These sources are used to ensure that the most current and accurate information is presented. As a five-year estimate, the ACS data represent a percentage based on a national sample and does not represent a direct population count.

POPULATION PROJECTIONS

STATS Indiana, using data from the Indiana Business Research Center, IU Kelley School of Business projects the Region's population will fall to 232,121 by 2050, an estimated decrease of 10.9 percent from the year 2020 population projection. Figure 2 shows population trends between 2020 and 2050 for each county in Region 11.

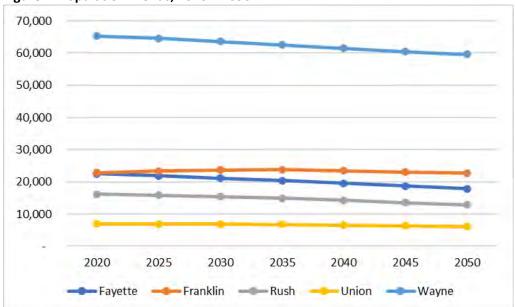


Figure 2: Population Trends, 2020 - 2050

Source: STATS Indiana using data from the Indiana Business Research Center, IU Kelley School of Business

OLDER ADULT POPULATION

Older adults are most likely to use transportation services when they are unable to drive themselves or choose not to drive. This may include self-imposed limitations including driving at night and trips to more distant destinations. Older adults also tend to be on a limited retirement income and, therefore, public or agency sponsored transportation services are a more cost-effective alternative to owning a vehicle. For these reasons, the population of older adults in an area is an indicator of potential transit demand.

There is a trend occurring in the United States relating to the aging of the population. People primarily born during the post-WWII "baby boom" era defined by the Census Bureau as persons born from 1946 through 1964 are over the age of 65 and are more likely to need an alternative to driving personal vehicles. Further, the Administration on Aging (U.S. Department of Health and Human Services) reports that, based on a comprehensive survey of older adults, longevity is increasing and individuals in this category are younger and healthier than in all previously measured time in our history. Quality of life issues and an individual's desire to live independently will put increasing pressure on existing transit services to provide mobility to this population. As older adults live longer and remain independent, the potential need to provide public transit is greatly increased.

Figure 3 illustrating the population percentage of persons over 65 years of age by block group, and the projected growth in population by age group, are provided for each county in the Region in the County Profile section.

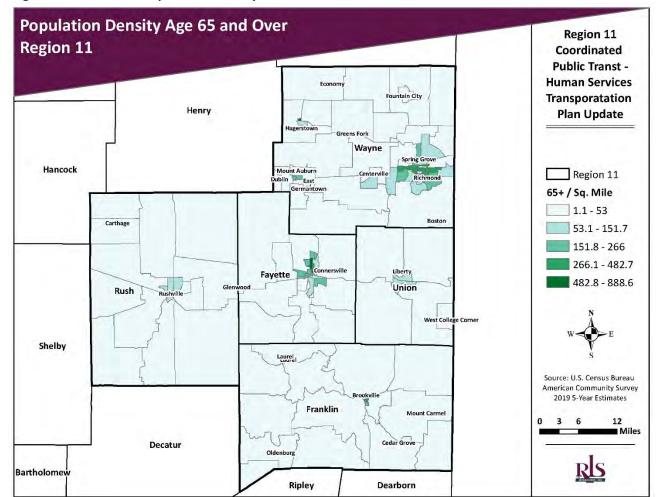


Figure 3: Older Adult Population Density

INDIVIDUALS WITH DISABILITIES

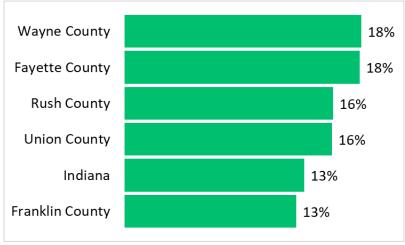
Enumeration of the population with disabilities in any community presents challenges. First, there is a complex and lengthy definition of a person with a disability in the Americans with Disabilities Act implementing regulations, which is found in 49 CFR Part 37.3. This definition, when applied to transportation services applications, is designed to permit a functional approach to disability determination rather than a strict categorical definition. In a functional approach, the mere presence of a condition that is typically thought to be disabling gives way to consideration of an individual's abilities to perform various life functions. In short, an individual's capabilities, rather than the mere presence of a medical condition, determine transportation disability.

The U.S. Census offers no method of identifying individuals as having a transportation-related disability. The best available data for Region 11 is available through the 2019 ACS Five-Year Estimates of disability



for the non-institutionalized population. Figure 4 is intended to provide a comparison of the population count of individuals with disabilities in each county within the Region. The chart identifies that the highest percent population of individuals with a disability resides in Wayne County at 18 percent. Franklin County has the lowest percent population of individuals with a disability in Region 11 with 13 percent, being slightly lower than that of the State of Indiana.

Figure 4: Disability Incidence by County



Source: 2019 ACS Five-Year Estimates

HOUSEHOLD INCOME

The household income ranges for the study area according to the 2019 ACS Five-Year Estimates can be found for each county in the County Profile section. According to the 2019 ACS Five-Year Estimates survey, there are a total of 54,405 households in Region 11. Of those households, about 35.3 percent earn less than \$35,000 annually. Of the households earning less than \$35,000, 12.5 percent earned between \$25,000 and \$34,999. Another 17 percent earned between \$10,000 and \$24,999 and 5.9 percent earned less than \$10,000 per year. The median household income for each area is shown in Table 1.

Table 1: Median Household Income

Geography	Median Household Income
Fayette County	\$49,415
Franklin County	\$52,034
Rush County	\$52,373
Union County	\$50,657
Wayne County	\$58,118
Indiana	\$56,303

POVERTY STATUS

Figure 5 illustrates the percentage of the population in each county that is living below the poverty level. Fayette County has the highest percent of population living below the poverty level with 19 percent. Wayne County has the second highest percentage of population living in poverty with 16 percent, while Union County has the lowest at 7 percent.

Fayette County

Wayne County

16%

Rush County

Indiana

13%

Franklin County

9%

Union County

7%

Figure 5: Percent Below Poverty

Source: 2019 ACS Estimates

ZERO VEHICLE HOUSEHOLDS

The number of vehicles available to a housing unit is also used as an indicator of demand for transit service. There are 3,501 households in the Region that have no available vehicles. This is 6.4 percent of all households in the Region. An additional 16,807 or 30.9 percent of households in the Region have only one vehicle. The total number of vehicle availability per household in each county can be found for each county in the County Profile section.

Percent Zero Vehicle Households Region 11 Region 11 Coordinated **Public Transt -Human Services** Fountain City Transporatation Henry Plan Update Wayne Hancock Mount Auburn Region 11 Percent ZVH 0% - 1.6% Carthage 1.7% - 5.2% 5.3% - 10.1% 10.2% - 18.6% **Fayette** 18.7% - 33.4% Union Rush West Colle Shelby Source: U.S. Census Bureau American Community Survey 2019 5-Year Estimates Franklin **Mount Carmel** 3 Miles Decatur Oldenhure Bartholomew Ripley Dearborn

Figure 6: Zero Vehicle Households

COUNTY PROFILES

Fayette County

Older Adult Population

Figure 7 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Fayette County residents aged 65 and older are found north of Connersville. These block groups have densities of older adults between 314.9 and 888.6 persons per square mile. Areas in and surrounding Connersville have moderate densities of persons age 65 and older (203.3 to 314.8). The remainder of the county has low to very low densities of persons age 65 and older.

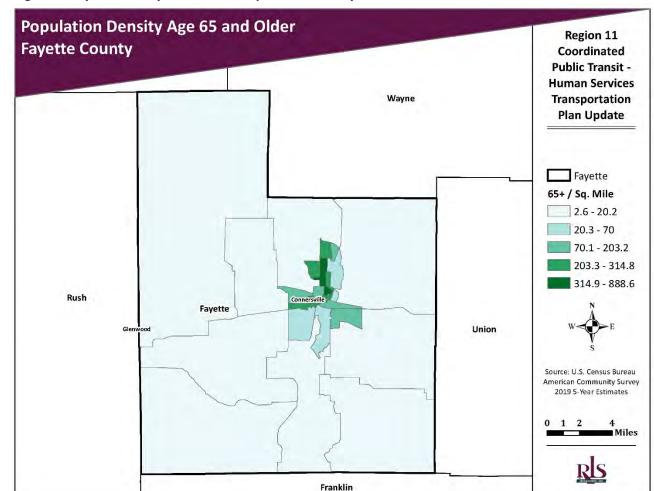


Figure 7: Fayette County Older Adult Population Density

Population by Age

Figure 8 shows that the largest age cohort for Fayette County is between the ages of 45 and 64. This age group is expected to be one of the largest groups in Fayette County over the next 30 years while generally decreasing over time. While not being one of the larger groups in 2020, the Seniors (65+), who are the third largest age group in 2020, is expected to grow and be the largest by 2050. Currently, the smallest age group in Fayette County is College Age individuals (20 to 24), who are expected to see a slight decrease between 2020 and 2050.

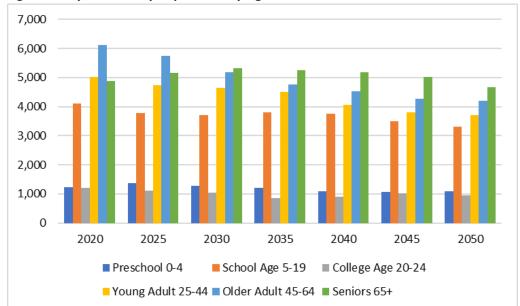


Figure 8: Fayette County Population by Age

Zero Vehicle Households

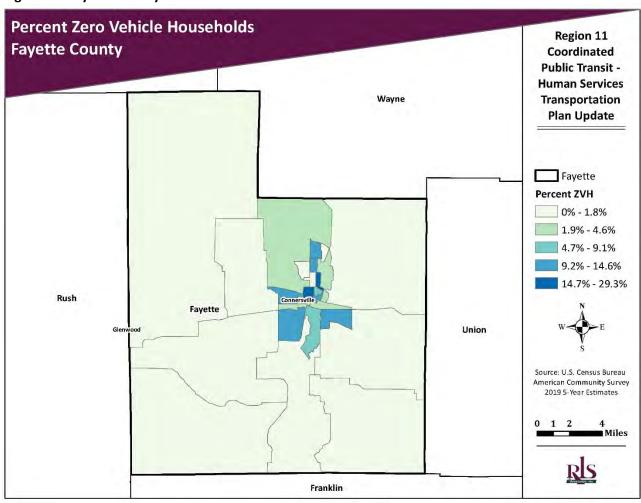
Figure 9 shows the breakdown of vehicle availability by household within Fayette County. Of all households in the county, six percent of the households do not have a vehicle and an additional 32 percent only have one vehicle.

Figure 10 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are in and around Connersville. Over 14.7 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 9.2 to 14.6 percent of zero vehicle households can also be found in and around Connersville. The remainder of the county has moderate to very low percentages of zero vehicle households.

Fayette County 6% 32% 36% 25% ■ 0 Vehicles ■ 1 Vehicle ■ 2 Vehicles ■ 3 or More Vehicles

Figure 9: Fayette County Household Vehicle Availability

Figure 10: Fayette County Zero Vehicle Households



Unemployment

Fayette County's unemployment rate reached a high in 2020 of 9.9 percent, due to the COVID-19 pandemic. This was much higher than that of the United States (8.1) and the State of Indiana (7.1) for 2020.

From 2015 to 2020, the unemployment rate for Fayette County paralleled the national unemployment average trend and continually stayed higher than the U.S. and Indiana rates over this period. Figure 11 illustrates a comparison of the unemployment rates in the county, state, and nation.

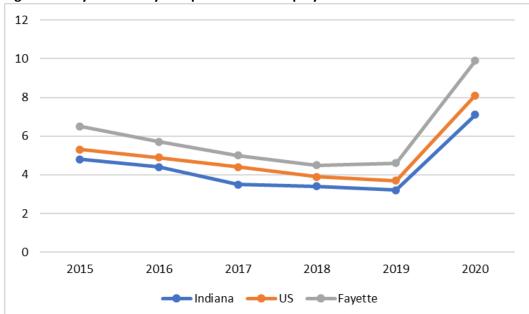


Figure 11: Fayette County Comparison of Unemployment Rates

Source: STATS Indiana using Bureau of Labor Statistics Data

Household Income

Figure 12 shows the annual household income breakdown by percentage of total households in the county. Out of 9,584 households in the county, 41 percent of them make less than \$35,000 per year. Of which, seven percent earn less than \$10,000 per year.

\$200,000 or more 1% \$150,000 to \$199,999 2% \$100,000 to \$149,999 11% \$75,000 to \$99,999 15% \$50,000 to \$74,999 18% \$35,000 to \$49,999 14% \$25,000 to \$34,999 13% \$15,000 to \$24,999 14% \$10,000 to \$14,999 7% Less than \$10,000 7%

Figure 12: Fayette County Annual Household Income

Franklin County

Older Adult Population

Figure 13 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Franklin County residents aged 65 and older are in Brookville. These block groups have densities of older adults between 26.1 and 451.4 persons per square mile. Areas around Brookville and in southwest Franklin County have moderate densities of persons age 65 and older (11.2 to 26). The remainder of the county has low to very low densities of persons age 65 and older.

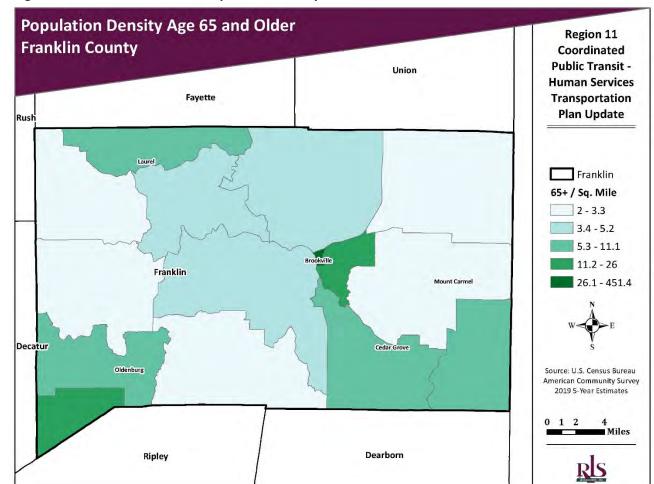


Figure 13: Franklin Older Adult Population Density

Population by Age

Figure 14 shows that the largest age cohort for Franklin County is Older Adults between the ages of 45 and 64. This age group is expected to be one of the largest groups in Franklin County over the next 30 years. While not being one of the larger groups in 2020, the Seniors (65+) groups is expected to grow and go from being the fourth largest age group in 2020 to the largest in 2050. Currently, the smallest age group in Franklin County is College Age individuals (20-24), who are expected to see little to no change between 2020 and 2050.

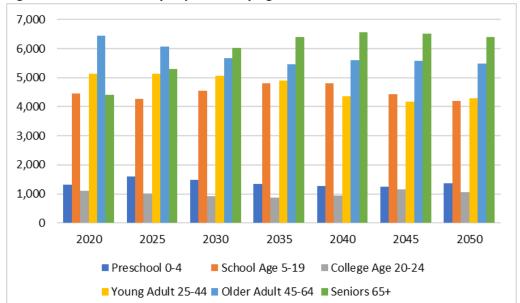


Figure 14: Franklin County Population by Age

Zero Vehicle Households

Figure 15 shows the breakdown of vehicle availability by household within Franklin County. Of all households in the county, five percent of the households do not have a vehicle and an additional 19 percent only have one vehicle.

Figure 16 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are concentrated in Brookville. Over 10.2 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 5.4 to 10.1 percent of zero vehicle households can also be found in Brookville and western, southern, and northwestern Franklin County. The remainder of the county has moderate to very low percentages of zero vehicle households.

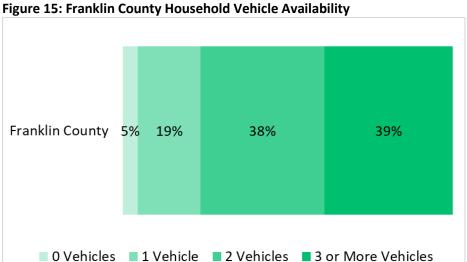
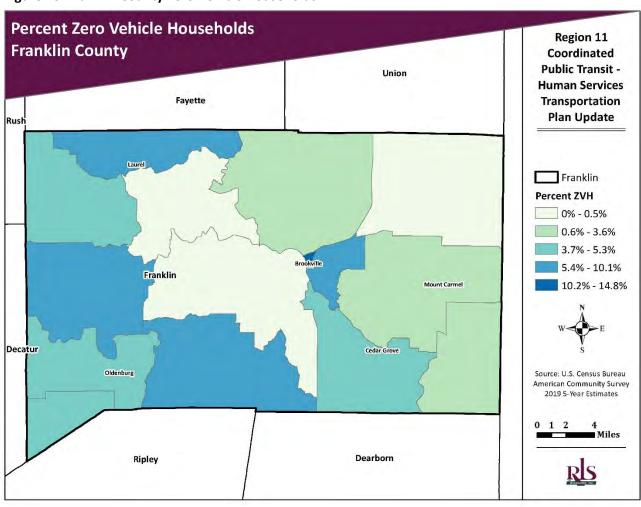


Figure 16: Franklin County Zero Vehicle Households



Unemployment

Franklin County's unemployment rate reached a high in 2020 of 5.9 percent, due to the COVID-19 pandemic. This was lower than that of the United States (8.1) the State of Indiana (7.1) for 2020.

From 2015 to 2020, the unemployment rate for Franklin County paralleled the national unemployment average trend, but stayed lower than the U.S. and fluctuated with being lower and higher than the Indiana rate. Figure 17 illustrates a comparison of the unemployment rates in the county, state, and nation.

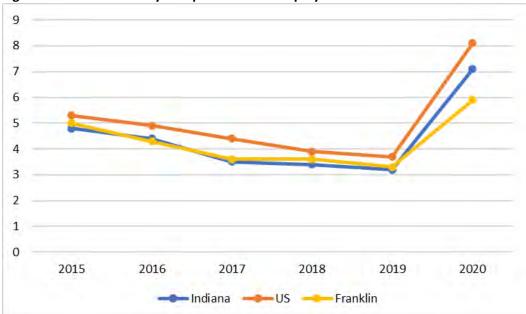


Figure 17: Franklin County Comparison of Unemployment Rates

Source: STATS Indiana using Bureau of Labor Statistics Data

Household Income

Figure 18 shows the annual household income breakdown by percentage of total households in the county. Out of 8,687 households in the county, 27 percent of them make less than \$35,000 per year. Of which, only five percent earn less than \$10,000 per year.

\$200,000 or more 3% \$150,000 to \$199,999 6% \$100,000 to \$149,999 16% \$75,000 to \$99,999 15% \$50,000 to \$74,999 21% \$35,000 to \$49,999 11% \$25,000 to \$34,999 9% \$15,000 to \$24,999 10% \$10,000 to \$14,999 3% Less than \$10,000 5%

Figure 18: Franklin County Annual Household Income

Rush County

Older Adult Population

Figure 19 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Rush County residents aged 65 and older are in Rushville. These block groups have densities of older adults between 34.9 and 143.8 persons per square mile. Areas in and around Rushville also have moderate densities of persons age 65 and older (7.3 to 34.8). The remainder of the county has low to very low densities of persons age 65 and older.

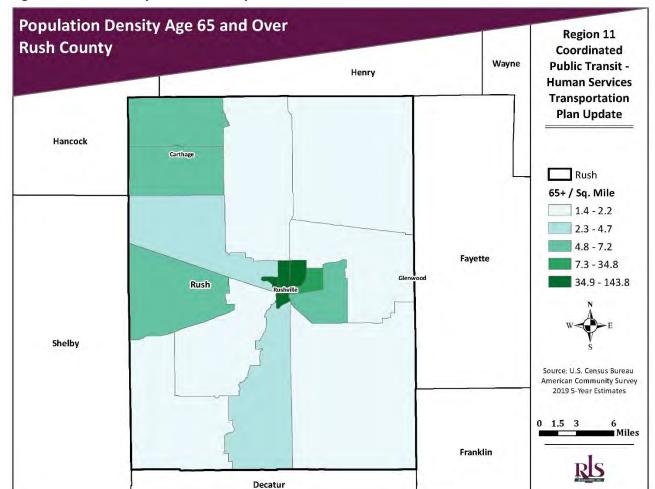


Figure 19: Rush County Older Adult Population

Population by Age

Figure 20 shows that the largest age cohort for Rush County is Older Adults between the ages of 45 and 64. This age group is expected to be one of the largest groups in Rush County over the next 30 years. While not being one of the larger groups in 2020, the Seniors (65+) groups is expected to grow and go from being the third largest age group in 2020 to the second largest in 2050. Currently, the smallest age group in Rush County is College Age individuals (20-24), who are expected to see little to no change between 2020 and 2050.

2,500 2,000 1,500 1,000 500 0 2020 2025 2030 2035 2040 2045 2050 Preschool 0-4 School Age 5-19 College Age 20-24 Young Adult 25-44 ■ Older Adult 45-64 ■ Seniors 65+

Figure 20: Rush County Population by Age

Zero Vehicle Households

Figure 21 shows the breakdown of vehicle availability by household within Rush County. Of all households in the county, three percent of the households do not have a vehicle and an additional 30 percent only have one vehicle. Rush County has one of the highest percentages of households with not vehicles in the state.

Figure 22 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are concentrated in southwestern Rush County. Over 11.1 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 4.3 to 11 percent of zero vehicle households can be found in and around Rushville. The remainder of the county has moderate to very low percentages of zero vehicle households.

Rush County 3% 30% 39% 28% ■ 0 Vehicles ■ 1 Vehicle ■ 2 Vehicles ■ 3 or More Vehicles

Figure 21: Rush County Household Vehicle Availability

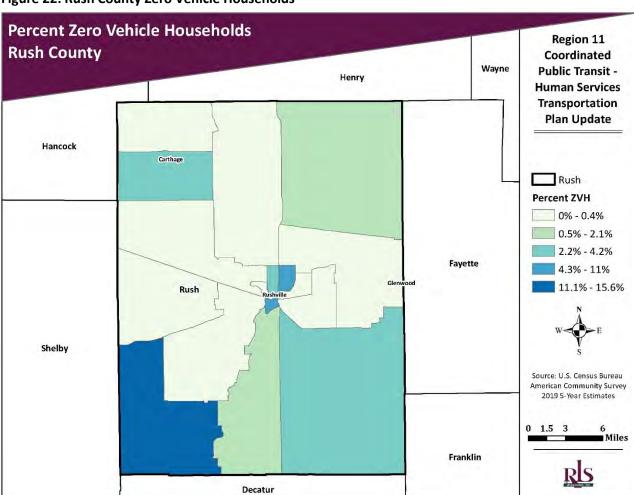


Figure 22: Rush County Zero Vehicle Households

Unemployment



Rush County's unemployment rate reached a high in 2020 of 6.3 percent, due to the COVID-19 pandemic. This was lower than that of the United States (8.1) and the State of Indiana (7.1) for 2020.

From 2015 to 2020, the unemployment rate for Rush County paralleled the national unemployment average trend, and stayed lower than the US and Indiana rates. Figure 23 illustrates a comparison of the unemployment rates in the county, state, and nation.

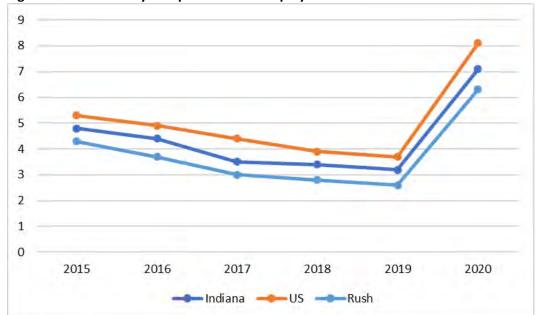


Figure 23: Rush County Comparison of Unemployment Rates

Source: STATS Indiana using Bureau of Labor Statistics Data

Household Income

Figure 24 shows the annual household income breakdown by percentage of total households in the county. Out of 6,667 households in the county, 32 percent of them make less than \$35,000 per year. Of which, six percent earn less than \$10,000 per year.

\$200,000 or more 2% \$150,000 to \$199,999 3% \$100,000 to \$149,999 13% \$75,000 to \$99,999 17% \$50,000 to \$74,999 20% \$35,000 to \$49,999 13% \$25,000 to \$34,999 11% \$15,000 to \$24,999 8% \$10,000 to \$14,999 7% Less than \$10,000 6%

Figure 24: Rush County Annual Household Income

Union County

Older Adult Population

Figure 25 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Union County residents aged 65 and older are in and around Liberty. These block groups have densities of older adults between 21.8 and 80.3 persons per square mile. Areas in and around West College Corner also have moderate densities of persons age 65 and older (3.3 to 21.7). The remainder of the county has low to very low densities of persons age 65 and older.

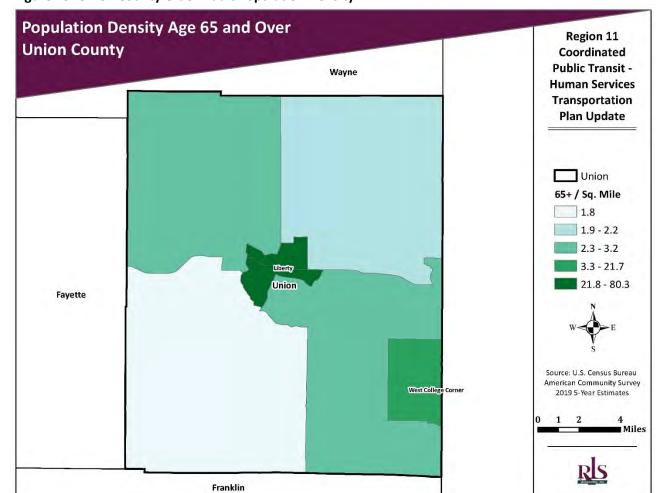


Figure 25: Union County Older Adult Population Density

Population by Age

Figure 26 shows that the largest age cohort for Union County are Older Adults between the ages of 45 and 64 and are expected to one of the largest age groups over the next 30 years. While not being one of the larger groups in 2020, the Seniors (65+), who are the third largest age group in 2020, is expected to grow and be the largest by 2050. Currently, the smallest age group in Union County are College Age individuals (20-24), who are expected to see little to no change between 2020 and 2050.

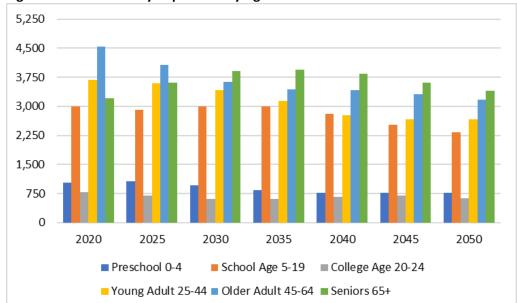


Figure 26: Union County Population by Age

Zero Vehicle Households

Figure 27 shows the breakdown of vehicle availability by household within Union County. Of all households in the county, five percent of the households do not have a vehicle and an additional 27 percent only have one vehicle.

Figure 28 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are concentrated north of Liberty. Over 7.1 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 6 to 7 percent of zero vehicle households can also be found around central and southeastern Union County. The remainder of the county has moderate to very low percentages of zero vehicle households.

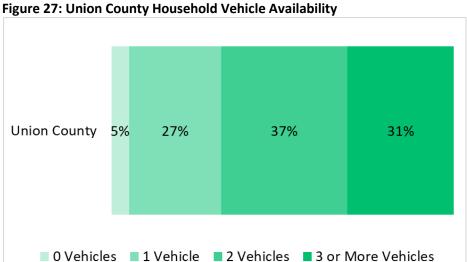
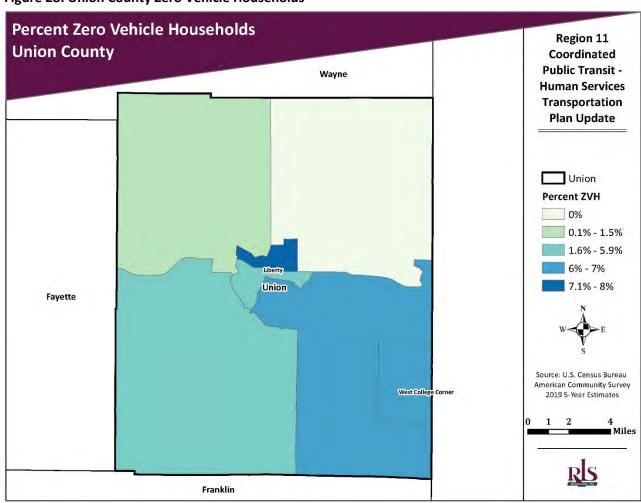


Figure 28: Union County Zero Vehicle Households



Unemployment

Union County's unemployment rate reached a high in 2020 of 5.5 percent, due to the COVID-19 pandemic. This was lower than that of the United States (8.1) and the State of Indiana (7.1) for 2020.

From 2015 to 2020, the unemployment rate for Union County paralleled the national unemployment average trend, and was consistently lower the US and Indiana rate Union County matched Indiana's rate in 2019. Figure 29 illustrates a comparison of the unemployment rates in the county, state, and nation.

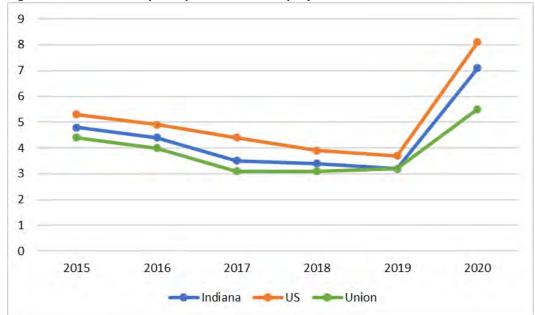


Figure 29: Union County Comparison of Unemployment Rates

Source: STATS Indiana using Bureau of Labor Statistics Data

Household Income

Figure 30 shows the annual household income breakdown by percentage of total households in the county. Out of 2,823 households in the county, 32 percent of them make less than \$35,000 per year. Of which, only four percent earn less than \$10,000 per year.

\$200,000 or more 1% \$150,000 to \$199,999 3% \$100,000 to \$149,999 14% \$75,000 to \$99,999 11% \$50,000 to \$74,999 22% \$35,000 to \$49,999 18% \$25,000 to \$34,999 15% \$15,000 to \$24,999 11% \$10,000 to \$14,999 2% Less than \$10,000 4%

Figure 30: Union County Annual Household Income

Source: 2019 ACS Five-Year Estimates

Wayne County

Older Adult Population

Figure 31 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Wayne County residents aged 65 and older are in Hagerstown and Richmond. These block groups have densities of older adults between 256.5 and 635.6 persons per square mile. Areas in and around Hagerstown, Richmond, Spring Grove, and Cambridge City also have moderate densities of persons age 65 and older (175.8 to 256.4). The remainder of the county has low to very low densities of persons age 65 and older.

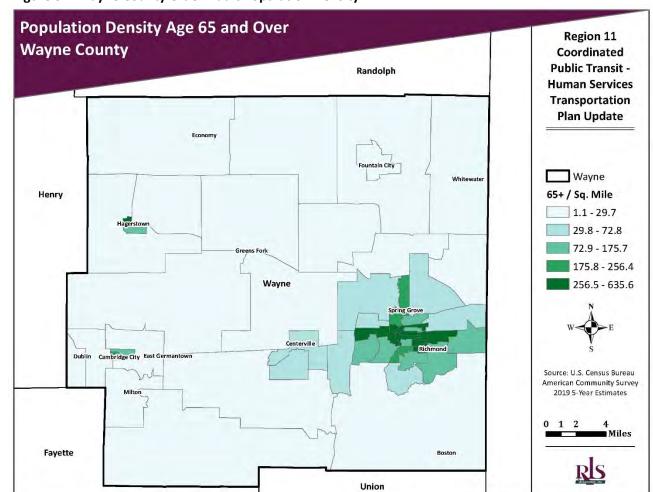


Figure 31: Wayne County Older Adult Population Density

Population by Age

Figure 32 shows that the largest age cohort for Wayne County is between the ages of 45 and 64. This age group is expected to be one of the largest groups in Wayne County over the next 30 years while declining over that time. Currently, the smallest age group in Wayne County is children under the age of 5, who are expected to see small decline between 2020 and 2050.

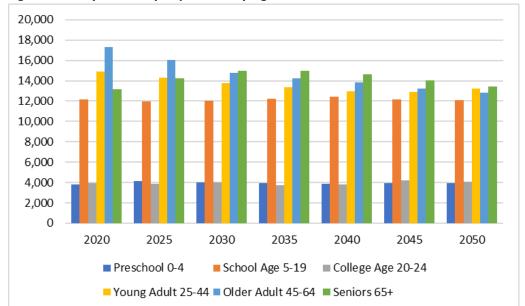


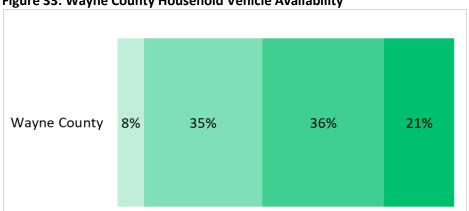
Figure 32: Wayne County Population by Age

Source: 2019 ACS Five-Year Estimates

Zero Vehicle Households

Figure 33 shows the breakdown of vehicle availability by household within Wayne County. Of all households in the county, eight percent of the households do not have a vehicle and an additional 35 percent only have one vehicle.

Figure 34 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are concentrated in and around Richmond. Over 18.7 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 9.7 to 18.6 percent of zero vehicle households can also be found in and around Richmond, Spring Grove, Cambridge and in northern Wayne County. The remainder of the county has moderate to very low percentages of zero vehicle households.

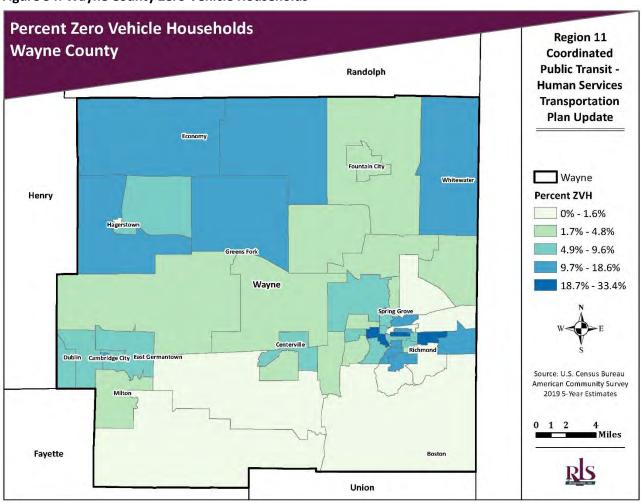


■ 0 Vehicles ■ 1 Vehicle ■ 2 Vehicles ■ 3 or More Vehicles

Figure 33: Wayne County Household Vehicle Availability

Source: 2019 ACS Five-Year Estimates

Figure 34: Wayne County Zero Vehicle Households



Unemployment

Wayne County's unemployment rate reached a high in 2020 of 6.8 percent, due to the COVID-19 pandemic, which tied their 2015 rate. This was lower than that of the United States (8.1) and the State of Indiana (7.1) for 2020.

From 2015 to 2020, the unemployment rate for Wayne County paralleled the national unemployment average trend, and was constantly lower than the US and higher than the state of Indiana's rate until 2020. Figure 35 illustrates a comparison of the unemployment rates in the county, state, and nation.

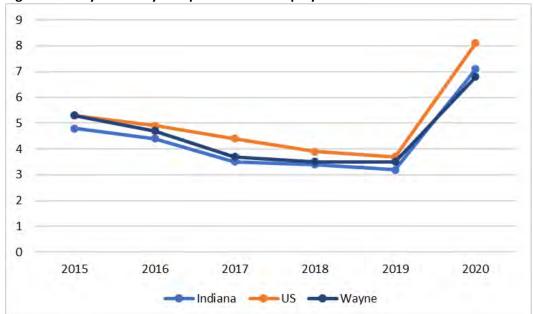


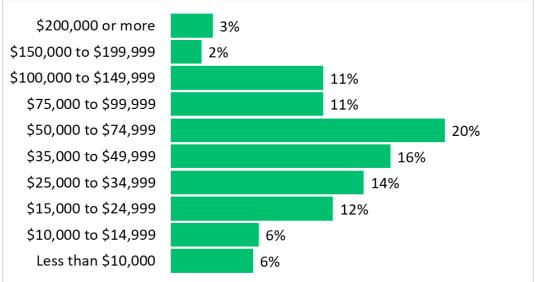
Figure 35: Wayne County Comparison of Unemployment Rates

Source: STATS Indiana using Bureau of Labor Statistics Data

Household Income

Figure 36 shows the annual household income breakdown by percentage of total households in the county. Out of 26,644 households in the county, 38 percent make less than \$35,000 per year. Of which, six percent earn less than \$10,000 per year.

Figure 36: Wayne County Annual Household Income



Source: 2019 ACS Five-Year Estimates

INVENTORY OF EXISTING TRANSPORTATION PROVIDERS AND SERVICE GAPS

INTRODUCTION

Providers of public and human service transportation were asked to provide service and asset data to for the purpose of updating the transportation provider inventory for the Region. Provider agencies were also invited to participate in a public meeting to evaluate unmet human service transportation needs and service gaps. The public meeting included a discussion of goals and strategies/projects to address unmet needs and service gaps, and promote coordination in the delivery of transportation services to maximize the use of resources.

An update of the inventory of provider services and vehicle inventory was obtained through phone interviews and e-mail requests conducted prior to the public meeting. This was done in order to promote active participation in the public meetings, familiarize the providers with the public meeting process, and stimulate discussion of key mobility issues while updating the description of the types and manner of service delivery (including types of services, funding sources, eligibility, hours of service, ridership and fare/donation policies) for the providers in the Region.

The Region 11 provider summaries listed below include Section 5310-funded providers who serve primarily older adults and individuals with disabilities. These agencies provide transportation primarily to their agency consumers but may have the potential for shared services with other providers in the future.

Rural public transit agencies, those funded with FTA Section 5311 funding, also serve these same older adult and individuals with disability populations. Many of these public and non-profit agencies also receive operating funding through Medicaid and Title III-B of the Older Americans Act which focuses on serving persons 60 and over as well as funding for vehicle replacement through the FTA Section 5310 program. These programs exemplify the goal of promoting mixed client riding and coordinated provision of mobility services for a range of customer categories and trip destinations.

The list also includes agencies that are eligible for Section 5310 vehicle funding but until now experienced limited coordination with other providers and have been focused on providing services to their agency program consumers. However, their participation in the coordination process is essential so that their consumers are afforded the opportunity to access other community transit services.

EXISTING PUBLIC TRANSPORTATION RESOURCES

Region 11 is served by five public transit systems. Four systems provide demand response while Richmond's system operates fixed routes with complementary paratransit. Additionally, two companies provide intercity bus service subsidized by FTA Section 5311(f) funding in Region 11. Table 2 provides basic information about each provider.



Table 2: Region 11 Public Transit Providers

	Fayette County Public Transit	Franklin County Public Transit	Ride Rush Public Transportation	Rose View Transit	Union County Transit	Barons Bus	Hoosier Ride
Operator and Contact Information	Fayette County Senior Center 477 N. Grand	Franklin County Senior Services 11146 County	Rush Co. Senior Citizens Services 504 W. 3rd St.	City of Richmond 401 S. Q St. Richmond, IN	615 W. High St. Liberty, IN 47353	5310 Hauserman Rd. Parma, OH	4045 Park 65 Dr. Indianapolis,
	Ave. Connersville, IN 47311 (765) 825-1541 fayetteseniorcen ter.com/transit	Park Rd. Brookville, IN 47012 (765) 647-3509 franklincountytr ansit.com	Rushville, IN 46173 (765) 932-2935	47374 (765) 983-7227 richmondindiana. gov/resources/pu blic- transportation	(765) 458-7277 unioncountytra nsit.org	44130 (888) 378-382 <u>baronsbus.com</u>	IN 46254 (800) 544- 2383 hoosierride.co m
Service Area	Fayette County	Franklin County	Rush County	Richmond	Union and rural Wayne County	North and East-Central IN w/stops in Richmond and Liberty	Service throughout IN w/stop in Richmond
Days/Hours of Service	Monday – Friday 7 AM – 6 PM	Monday – Friday 6 AM – 5 PM	Monday – Friday 7 AM – 5 PM	Monday – Friday 6:15 AM – 5:45 PM; Saturday 9:15 AM – 4:45 PM	Monday – Friday 6 AM – 5 PM	Schedules vary – see website	Schedules vary – see website
Ridership*	2019: 31,751 2020: 13,115	2019: 27,143 2020: 13,044	2019: 8,168 2020: 6,583	2019: 197,998 2020: 139,919	2019: 24,582 2020: 9,993	2019: 48,999 2020: 30,929	2019: 37,827 2020: 19,128
Fare/Donati on Structure	\$2.50; \$5 for 3 or more miles outside city limits; Donation- based for Age 60+	\$2.50; \$1 – Youth; \$1.25 – within Brookville; Donation-based for Age 60+; \$15-\$50 for out- of-county destinations	\$2; \$1 for youth, older adults, and people with disabilities	\$1.75; \$1.50 for youth, older adults, and people with disabilities	\$1; \$2.25 city limits to 2 miles; \$3 for 2- 4 miles; \$3.50 for 4-6 miles; \$4.50 for 6 miles to County Line	Distance-based ticket pricing	Distance-based ticket pricing



	Fayette County Public Transit	Franklin County Public Transit	Ride Rush Public Transportation	Rose View Transit	Union County Transit	Barons Bus	Hoosier Ride
Funding	FTA Section	FTA Section	FTA Section	FTA Section 5311,	FTA Section	FTA Section	FTA Section
Sources	5311, PMTF,	5311, PMTF,	5311, PMTF,	PMTF, City of	5311, PMTF,	5311(f); Ticket	5311(f); Ticket
	Older Americans	Older Americans	Local	Richmond	Advertising;	Revenue	Revenue
	Act Title III-B,	Act Title III-B,	government		Medicaid;		
	Medicaid, Local	United Way;			Local		
	government	Franklin County			government		
Operating	\$334,608	\$408,989	\$184,257	\$1,330,255	\$495,067	Not reported	Not reported
Budget (2020)							
Fleet by	Connersville –	Brookville – 12	Rushville – 6 (5	Richmond – 14	Liberty – 12	Not reported	Not reported
Location	12 (11 WC-	(10 WC-	WC-Accessible)	(All WC-	(All WC-		·
and	Accessible)	Accessible)		Accessible)	Accessible)		
Wheelchair		·					
Accessibility							
Service	Demand	Demand	Demand	Fixed Route and	Demand	Inter-city bus	Inter-city bus
Type(s)	Response	Response	Response	Demand Response	Response		

^{*2019} total represents normal ridership; 2020 ridership was heavily impacted by COVID-19



HUMAN SERVICE TRANSPORTATION PROVIDERS

Three human service agencies located in Region 11 are known to provide transportation for their clients. In addition, one provider of transportation for wheelchair users is located in the region. The public transit systems listed in the previous section provide transportation under contract to many human service program consumers, such as Medicaid beneficiaries and older adults whose transportation is funded by Older Americans Act Title III-B funds.

Additionally, Region 11 residents who use Medicaid non-emergency transportation are sometimes served by providers from outside of the area. These providers are typically dispatched to the area by the State of Indiana's contracted managed care organizations or transportation brokerages.

Table 3: Region 11 Human Service Transportation Providers

	Adult Day Care of Richmond, Inc.	New Horizons Rehabilitation	Reid Health PACE Center	Care-A- Van
Location	2727 E. Main St. Richmond, IN 47374 (765) 966-0852 adcofrichmond.com /index.html	237 Six Pine Ranch Rd. Batesville, IN 47006 (812) 934-4528 nhrinc.org	2300 National Rd. W., Reid Plaza Richmond, IN 47374 (765) 935-8959 reidhealth.org/pace	2200 Hawkins Rd, Richmond, IN 47374 (765) 966-5433
Service Area	Richmond	Dearborn, Franklin, Jennings, Ohio, and Ripley Counties	Fayette, Franklin, Henry, Randolph, Union and Wayne Counties	East Central Indiana
Eligibility Criteria	Agency clients	Agency clients	Program clients	Medicaid beneficiaries
Days/Hours of Service	N/A	N/A	Not reported	N/A
Ridership	2,864	27,282	Not reported	Not reported
Funding Sources	Not reported	FTA Section 5310; Medicaid; Fees for service	Medicaid; Medicare; Fees for service	Medicaid; Fees for service
Operating Budget	Not reported	Not reported	Not reported	Not reported
Fleet by Location and Wheelchair Accessibility	Richmond - 6 (All WC-Accessible)*	Batesville - 24 (All WC-Accessible)*	Not reported	Not reported; Offers wheelchair- accessible transportation
Service Type(s)	Demand Response	Demand Response	Demand Response	Demand Response

^{*}Represents vehicles funded through the Section 5310 program only



OVERVIEW

RLS & Associates, Inc. (RLS) contacted local human service agencies, faith-based organizations, employers, and all transportation providers serving each county in an attempt to solicit input and request participation from any organization that could potentially be impacted by the coordinated transportation planning process. Meeting invitations were mailed to all identified organizations, those that participated in the 2017 Coordinated Public Transit Human Services Transportation Plan, and agencies that applied for Section 5310 grants from INDOT since 2013. Documentation of outreach efforts included in this project to date and the level of participation from each organization is provided in the Appendix. The following paragraphs outline results from the local general public and stakeholder coordinated transportation meeting.

GENERAL PUBLIC AND STAKEHOLDER MEETINGS

A virtual meeting was facilitated by RLS to discuss the unmet transportation needs and gaps in service and establish goals for older adults, individuals with disabilities, people with low incomes, and the general public. A virtual meeting was chosen due to the risk of transmission of COVID-19 at an in-person meeting. The meeting was held on March 25, 2021, from 4:30 PM to 6:00 PM.

Invitations to the meeting were distributed via the U.S. Postal Service to more than 120 individuals or organizations that represent transportation providers, older adults, individuals with disabilities, and/or people with low incomes. The general public was invited and notified of the meeting through a variety of public announcements through the following websites and newspapers:

- ♦ Connersville News Examiner
- ♦ Whitewater Publications
- Greensburg Daily News
- ♦ The Rushville Recorder
- Whitewater Publications Liberty Herald
- ♦ Palladium-Item

A list of all organizations invited to the meeting is provided in the Appendix. Organizations that were represented at the meetings are listed below:

- ♦ INDOT, Office of Transit
- ◆ Economic Development Corporation of Wayne County
- ♦ LifeStream Services
- ♦ Independent Living Center of Eastern IN

During the meeting, the RLS facilitator presented highlights of historical coordinated transportation in the Region and discussed the activities since the 2017 Coordinated Public Transit Human Services Transportation Plan that have helped to address some of the unmet transportation needs and gaps in services for the area. Many of the participants in the meetings were involved in the 2017 planning process.



Following the initial presentation, the stakeholders were asked to review the gaps in transportation services and needs from the 2017 plan, to identify any gaps that were no longer valid, and any new needs/gaps, which the facilitator deleted/added to/from a list that the stakeholders could view on the screen. The focus of the discussion was transportation for older adults and individuals with disabilities. However, several topics discussed also impact mobility options for the general public. After the changes to the needs/gaps list were completed, each participant was asked to rank the needs/gaps.

Prior to the public and stakeholder meeting, public surveys were distributed in each county. Surveys were available for approximately six months. The purpose of the survey was to gather additional input about transportation from the general public and those individuals who may or may not be clients of the participating agencies. In addition to printed surveys that were distributed by local stakeholders and volunteers, the public survey was also available online, and advertised in local newspapers. Survey results are included at the end of this chapter.

Table 4 provides the identified unmet transportation needs and gaps in services that were identified by meeting participants or during the public survey process. The list includes unmet needs and gaps documented during the previous coordinated plan and the status of that need (satisfied, solutions in progress, not addressed) as well as the needs that were documented for the first time in 2017. The table also includes a reference to the goal (explained in the next chapter) that corresponds with each identified need or gap. Coordinated transportation stakeholders will consider these unmet needs and gaps in service when developing transportation strategies and grant applications.

Table 4: Unmet Mobility Needs and Gaps in Service

2017 Need/Gap	2021 Need/Gap	2021 Priority Level	Goal
Clarify Medicaid transportation	Medicaid non-emergency		4
process and structure for agencies	transportation is unreliable.		
and clients.		Medium	
Improve the billing process for			
Medicaid.			
New and replacement vehicles.	Additional funding for	High	4
More funding from local and	transportation.		
Federal resources.			
More affordable options for out-	Affordable out-of-county	High	2
of-county trips for everyone.	transportation.		
Affordable transportation for	Additional capacity in the region's	High	2
seniors and Medicare-eligible	transportation systems to provide		
individuals.	more rides.		
Need transportation for individuals			
with low-incomes who are age 60			
and under.			
Attract more riders. Better	Community awareness and	Medium	3
distribution of brochures and use	education about using the region's		
of social media and websites.	transportation providers, including		
Public perception of transportation	Richmond's ADA complementary		
needs work, people perceive public	paratransit system.		
transit as a service for seniors and			
people with disabilities.			

2017 Need/Gap	2021 Need/Gap	2021 Priority Level	Goal
Travel training for new passengers.			
Continued coordinating with social services at the hospital (currently the hospital provides vouchers for patients to use Rush County).	Communication between transportation providers and Reid Health facilities to ensure that patient transportation needs are met to the greatest extent feasible.	Medium	3
Expand hours of service until 2:00 AM for hospital discharges.	Transportation during the late evenings.	Medium	2
Employment-purpose transportation to out-of-town destinations for people with disabilities.	More options for employment transportation.	Medium	2
Need transportation from Richmond to other parts of the county that are outside of the city limits.	More transportation service in Wayne County outside of Richmond's fixed route system.	High	2
	Transportation on Saturdays and Sundays.	Medium	2
Making regional transportation structure that is easy for passengers to understand (common fare structures, etc.).	Not identified as a need in 2021.	N/A	N/A
Develop a resource for successful coordinated transportation practices in Indiana.	Not identified as a need in 2021.	N/A	N/A
Training – More options for online or local training for staff.	Not identified as a need in 2021.	N/A	N/A
Scheduling software for transportation operators. All providers should have the same scheduling technology.	Not identified as a need in 2021.	N/A	N/A

PROGRESS SINCE THE 2017 COORDINATED PLAN AND CONTINUING CHALLENGES TO COORDINATED TRANSPORTATION

As indicated in Table 4, several of the unmet needs identified in 2017 continue to exist today. There are numerous challenges to the coordination of human service agency and public transportation in any community or region. Some of the unmet transportation needs listed in Table 4 are unmet either because of the level of difficulty to implement strategies that will address them or funding to support the activity is not available. While these needs remain top priority, some may take more time to implement because of the necessary steps and changes that must precede them. Additionally, some of the unmet transportation needs may be addressed before the top priority needs simply because they are easily addressed and/or they are a step that will improve the likelihood of implementing a priority improvement.



During the 2016 public and stakeholder meeting as well as in 2013, participants mentioned that inadequate funding, as well as the real and perceived limitations on use of available funding resources create challenges to achieving a higher level of service or service expansions. Furthermore, the lack of a local or regional committee to take a proactive role in leadership of coordinated transportation efforts makes progress toward addressing unmet needs and gaps in services move very slowly and without direction.

While there are challenges to implementing coordination among various transportation providers, services, and funding sources, it is important to note that transportation coordination is being successfully implemented throughout the country and in Indiana. Therefore, issues such as conflicting or restrictive State and Federal guidelines for the use of funding and vehicles, insurance and liability, and unique needs presented by the different populations served, to name a few, should challenge, but not stop, a coordination effort. There are many resources available to assist communities as they work together to coordinate transportation. Contact the Indiana Department of Transportation (INDOT), Office of Transit (http://in.gov/indot/2436.htm) for assistance.

RESULTS OF THE GENERAL PUBLIC SURVEY

The following charts outline the public survey results received from individuals living in the Region. Surveys were available on-line, on public transit vehicles, at various non-profits, and distributed by volunteers through organizations that serve seniors and individuals with disabilities. The on-line and paper versions of the survey were also advertised in local newspapers. The survey period was November 2020 through May 2021.

The following survey summary includes the information gained from 22 surveys from the general public. Each chart is based on the number of responses received for individual questions. If an individual skipped a question or did not provide an eligible answer, the distribution of responses for that particular question will be based on fewer than 22 surveys. The survey results are not statistically valid, but do offer insight into the unmet transportation needs and gaps in services for the general public in each county. The distribution of survey results is listed below:

Fayette: 4.55% (1 surveys)
Franklin: 68.18% (15 surveys)
Rush: 13.64% (3 surveys)
Union: 0% (0 surveys)
Wayne: 13.64% (3 surveys)

Modes of Transportation Used

Survey respondents were asked to report all forms of transportation they or their family have used in the past 12 months. As indicated in Figure 37, the respondents used all forms of transportation available as response choices, as well as other modes. Those who selected "Other" specified the following forms of transportation:

- ♦ Family's cars
- ♦ Use Franklin County Public Transportation



Rely on family/friends for rides 55% Drive your own vehicle 41% Public transit that serves your city or county, including bus systems, rail 41% lines, ADA paratransit, or general public demand response/dial-a-ride Demand response/dial-a-ride services that are for specific groups only Medicaid Non-emergency medical transportation (NEMT) Other (please specify) Walking -Carpool or vanpool to work Bicycling -Uber/Lyft -Scooter/Moped Inter-city bus, such as Greyhound or Megabus Taxi 0% Transportation offered by volunteer or faith-based groups

Figure 37: Modes of Transportation Used

Desired Changes to Local Transportation Options

When asked what changes could be made to the local transportation options to make using them more appealing, the most common responses were for services to run later into the night and the ability be taken straight from their home to their destination. About 44 percent would like demand response services to be easier to schedule or be more widely available. About 38 percent said that the availability of transit on Saturdays/Sundays, respectively, would make transportation options more appealing. All responses to this question are displayed in Figure 44.

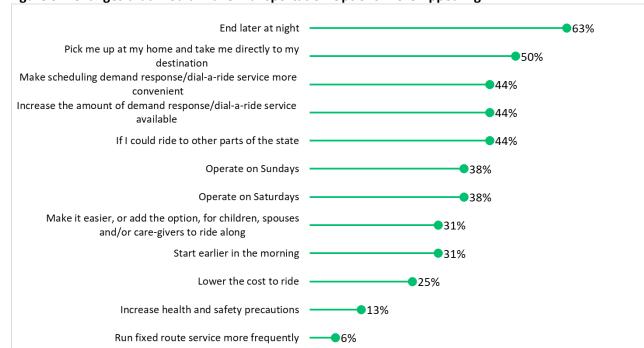


Figure 37: Changes that Would Make Transportation Options More Appealing

Difficulty Getting Needed Transportation

Respondents were asked if they have difficulty getting the transportation they need to a variety of specific types of destinations. The results are provided in Figure 45. The most difficulty was indicated for shopping and dental care, multiple respondents selecting 'sometimes', 'frequently', or 'always difficult'.

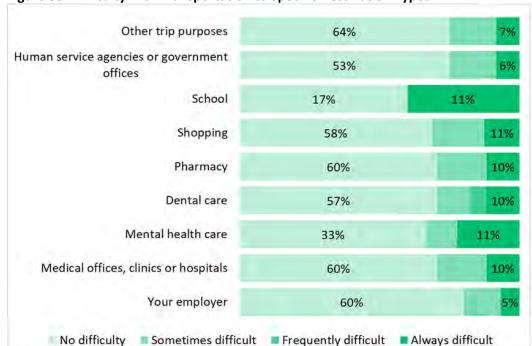


Figure 38: Difficulty with Transportation to Specific Destination Types

Out-of-County Destinations

Two questions concerned travel to out-of-county destinations. Respondents indicated whether they needed to travel outside of the county for work, medical care, shopping, or other reasons. As shown in Figure 46, most of the respondents who need to travel outside of the county either need to for medical care or shopping. For those who need to travel outside the county for 'other reasons' their responses were to visit friends or family and for medical care.

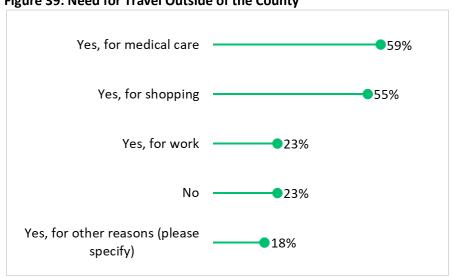


Figure 39: Need for Travel Outside of the County

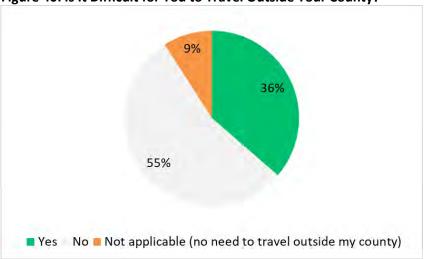
Respondents also indicated whether it was difficult to travel outside of the county (see Figure 47), and if yes, to provide more information in an open-ended response. 36.4 percent of the respondents to this



question said that they have difficulty leaving the county. Their open-ended responses can be found below:

- ♦ Out of County transit is limited (5)
- ♦ Don't like relying on others (2)

Figure 40: Is It Difficult for You to Travel Outside Your County?



Other Comments About Community Transportation Services

Finally, the survey included an open-ended question that asked if the respondent had any other comments about transportation services in their community. Of the 22 total respondents, 10 of them provided input, which can be found in the Appendix.

Respondent Demographics

Demographic questions on the survey included age group (Figure 48), status as an individual with a disability that requires a mobility device (Figure 49), and ZIP code (Figure 50).

Figure 41: Age Ranges

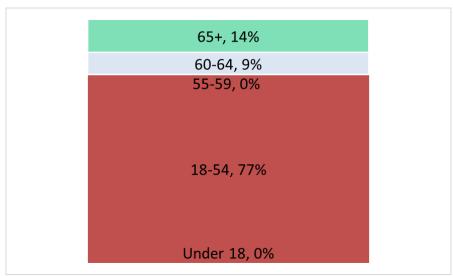


Figure 42: Disability Status that Requires a Cane, Walker, Wheelchair, or Other Device, or a Service Animal

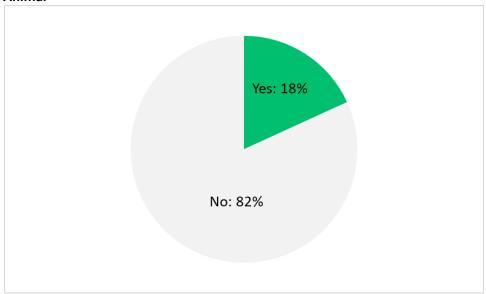
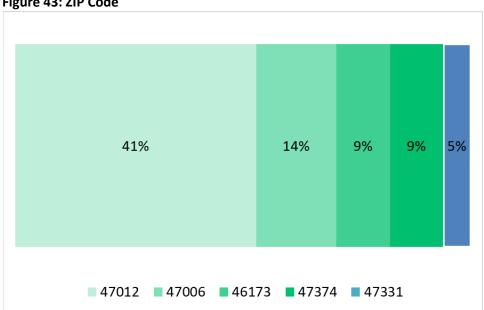


Figure 43: ZIP Code



Note: Top 5 Zip Codes shown; 10 different Zip Codes provided

IMPLEMENTATION PLAN

Stakeholders are willing to continue to work toward coordinated regional transportation services by utilizing existing resources and implementing new projects that fill the service gaps associated with employment related trips, medical trips, education, and general quality of life for older adults, individuals with disabilities, and the general public.

Local stakeholders set four coordinated transportation goals to address the high, medium, and low priority needs. The strategies under each goal should be addressed by the responsible parties, as identified in this chapter. Strategies should be addressed in order of priority, unless funding or other factors are present which make accomplishing a lower priority strategy more feasible than one of higher priority. The coordinated transportation goals are as follows:

Goal 1: Maintain Existing Transportation Services for Human Service Agency Clients and the General Public

Goal 2: Expand Transportation Service for Older Adults, People with Disabilities, Low-Income Individuals, and the General Public

Goal 3: Increase Public Awareness of Available Transportation Services among Community Stakeholders

Goal 4: Increase Participation in Initiatives to Enhance Mobility

GOALS AND STRATEGIES

The following paragraphs outline the timeframe, responsible party, and performance measure(s) for implementation of each of the above noted coordination goals and objectives. The implementation timeframes/milestones are defined as follows:

- ♦ Immediate Activities to be addressed immediately.
- ♦ Near-term Activities to be achieved within 1 to 12 months.
- ♦ Mid-term Activities to be achieved within 13 to 24 months.
- ♦ Long-term Activities to be achieved within 2 to 4 years.
- Ongoing Activities that either have been implemented prior to this report, or will be implemented at the earliest feasible time and will require ongoing activity.

Goals and implementation strategies are offered in this chapter as a guideline for leaders in the coordination effort as well as the specific parties responsible for implementation. Goals and strategies should be considered based upon the available resources for each county during the implementation time period.



GOAL 1: MAINTAIN EXISTING TRANSPORTATION SERVICES FOR HUMAN SERVICE AGENCY CLIENTS AND THE GENERAL PUBLIC

Strategy 1.1 Replace and Maintain Vehicles through FTA/INDOT Funding and Local Sources

Transportation is a vital link to health care, nutrition, employment, and quality of life in each county and community. As there are relatively few providers active in the region, keeping their services active and running is critical for older adults and individuals with disabilities in the community. The FTA grant programs managed by INDOT provide the best leverage of local matching dollars in terms of acquiring and maintaining a fleet of accessible vehicles.

Local organizations serving the rural areas will strategically apply for funding through the Sections 5310 and 5311 programs to replace aging vehicles and to expand vehicle fleets or the number of providers serving individuals with disabilities, older adults, people with low incomes, and the general public.

Priority: High

Counties Included: All Region 11 counties

Responsible Parties: Agencies and organizations eligible for FTA Section 5310/11 program grants

<u>Implementation Time Frame</u>: <u>Staffing Implications:</u>

Ongoing Staff time to prepare applications, to maintain

vehicles, and to monitor service, safety, and

reporting.

Implementation Budget:

Minimal expenses to develop applications but significant time to manage and administer services.

<u>Potential Funding Sources</u>: FTA Section 5311 (public transit)/5310; Local match funding from agency funds, county or municipality general fund, dedicated tax, or private fundraising. Local match for may also be derived from State programs or other non-U.S. DOT Federal funding programs.

Performance Measures:

- ♦ Tally of vehicles applied for and received in region.
- Percent of fleet in region that is accessible to individuals with disabilities.
- Average annual passenger trips provided per vehicle should demonstrate that vehicles are actively used in service delivery for older adults and individuals with disabilities.

Strategy 1.2 Develop Local Tools for Driver Recruitment and Retention

An advertising campaign to recruit drivers can benefit several agencies at minimal cost to each. Typically, advertising for driver positions also raises the awareness of the agencies' resources for individuals.



Providers should communicate to the State DOT office how their recruitment efforts are impacted by policies and rules. For example, some agencies may offer entry-level pay, incentives, and benefits packages that are not sufficient to attract and maintain staff in the competitive market.

Local transit and human service agencies may create connections with local economic development and training programs to funnel good candidates into their driving programs. For larger vehicles, the transit agency or human service agency may partner with driving schools to create bus practicums that bring drivers through their programs as a part of CDL training.

Priority: Medium

Counties Included: All Region 11 counties

Responsible Parties: Representatives from each Section 5311 and Section 5310 recipient organization. Representatives from local and regional economic development and workforce programs.

<u>Implementation Time Frame</u>: <u>Staffing Implications:</u>

Near Term (1-12 months) Staff time to prepare media, recruit, on-board, and train

drivers.

<u>Implementation Budget</u>:

Minimal expenses to develop recruiting media but significant time to develop mew employment pathways.

<u>Potential Funding Sources</u>: Local grants may be available. Otherwise, transportation providers will use existing funds.

Performance Measures:

- "Drivers wanted" media campaign produced and launched.
- New, regular and ongoing engagement with development and job-training programs.
- Create a shared bus driver practicum for CDL training.
- Creative incentive packages are established, and open positions are filled.

GOAL 2: EXPAND TRANSPORTATION SERVICE FOR OLDER ADULTS, PEOPLE WITH DISABILITIES, LOW-INCOME INDIVIDUALS, AND THE GENERAL PUBLIC

Strategy 2.1 Expand the Capacity of Existing Transportation Providers

Evening and weekend service was mentioned by survey respondents and meeting attendees as a desired improvement. Stakeholders also confirmed that residents of the region need transportation outside of the available providers' regular hours of operations for trip purposes such as hospital discharges or employment.

Transportation providers are encouraged to consider expanding their hours and days of service to facilitate access to employment opportunities for older adults, individuals with disabilities, and people



with low incomes. Expansions of hours and days of service would depend on the availability of funding as well as the ability to hire and retain drivers. Additionally, providers are encouraged to offer transportation across city, county or state lines if feasible; extending the geographical boundaries of trip eligibility for even one day per week would help individuals who need to travel longer distances.

Priority: High

Counties Included: All Region 11 counties

Responsible Parties: Public and human service transportation providers. Representatives from local and regional human service agencies with clients that need travel outside of regular operating hours.

<u>Implementation Time Frame</u>: <u>Staffing Implications:</u>

Mid-Term (13 – 24 months) Staff would need to be increased to cover additional shifts

or days. Part time or volunteer drivers may be able to

provide long-distance trips.

Implementation Budget:

The cost of service hour expansions would be based on the actual changes to be implemented.

<u>Potential Funding Sources</u>: Human service transportation contracts; local charitable or governmental funding.

Performance Measures:

- New hours and days of service provided.
- Ridership on expanded service.

Strategy 2.2 Expand Employment Transportation to Serve More Workers

The expansion of bus service to employers in the Richmond area would provide the region's low-income population with access to a large number of job opportunities. This strategy is for a public transit or human service transportation provider to expand fixed routes or operate a new employment shuttle to provide access to jobs.

The Central Indiana Regional Transportation Authority (CIRTA) and its municipal partners have been able to establish Workforce Connector bus routes that are funded with sustainable revenue. These bus routes serve suburban industrial parks in Plainfield and Whitestown. CIRTA's first Workforce Connector was established in 2012 with pilot demonstration grant funding. When this funding source was exhausted, landowners established an Economic Improvement District (EID) to raise funding to continue the service. Since then, two additional EIDs have been formed to fund CIRTA bus routes. EIDs involve special assessments for parcels within designated boundaries selected by participating landowners. The districts are created by petitioning a local municipality with a petition signed by 60 percent of landowners representing 60 percent of assessed value. An EID must be contiguous, but may exclude parcels.

Potentially, the landowners in business parks and high employment areas could fund a job shuttle service with EID funding. The budget for this service would depend on the number of hours it would run, and the costs associated with launching and marketing the route.



In a rural area outside of Richmond, a zoned demand-response or deviated route would be a more effective service model than a fixed route. This type of service could act as a feeder service to Richmond's fixed route network.

Priority: Medium

Counties Included: Wayne County

Responsible Parties: Transportation providers and local employment stakeholders would conduct initial meetings to discuss this strategy. A lead organization would need to be identified to carry the program forward by initiating conversations about potential EID formation.

<u>Implementation Time Frame</u>:

Long-Term (2-4 years)

Staffing Implications:

No additional staff required during the planning stages, but additional time by existing staff will be necessary for educating landowners and municipal partners about establishing an EID. Potentially, a consultant specializing in EID formation could be hired to assist. After receiving a commitment of funding, a transportation provider would need to plan the service, hire additional drivers, and potentially, purchase or lease a bus for the service.

<u>Implementation Budget</u>: A one-bus service operating Monday-Saturday for 12-14 hours per day would likely cost between \$250,000 and \$300,000 annually. This cost does not include any special marketing efforts, which would be required to educate residents and employers about the new route.

<u>Potential Funding Sources</u>: Economic Improvement District funding, Section 5311 (local match required), or other sources determined by local stakeholders.

Performance Measures:

- Service plan developed.
- ◆ Funding secured, potentially through the formation of an EID.
- ♦ New bus route initiated.
- ♦ Number of passenger trips provided.

GOAL 3: INCREASE PUBLIC AWARENESS OF AVAILABLE TRANSPORTATION SERVICES AMONG COMMUNITY STAKEHOLDERS

Strategy 3.1 Educate Community Stakeholders about Available Public and Human Service <u>Transportation</u>

Some community stakeholders in Region 11 reported a lack of familiarity with local transportation options. This strategy involves enhanced outreach efforts to ensure that each county's health care providers, major employers, and human service agencies are aware of existing transportation options and how they work. To increase community awareness, providers can undertake traditional strategies such as speaking to community groups, meeting with services providers, running online or print advertisements, or distributing brochures.

Potentially, transportation providers in Region 11 (the whole region, or a subset of counties) could collaborate in setting up travel training and/or mobility management services so that the public understands how to use all available options. A travel training and/or mobility management program can address the objective of improving communication between public transit agencies and key stakeholders.

Travel training is the professional practice of teaching people to travel independently on public and human service transportation. Travel training is offered one-to-one or as part of designed instruction for a group and is most often provided for older adults or for people who have cognitive or physical disabilities. The goal is not only to provide information about using transportation, but increasing individuals' confidence and comfort level with using the available services.

Mobility management is a transportation strategy that focuses on the customer and their needs, and meeting these needs through the coordinated use of a variety of providers. Mobility management is an evolving concept that aims to improve specialized transportation, particularly for older adults, people with disabilities, and individuals with lower incomes through a range of activities. A mobility management program looks beyond a single transportation service or solution to a "family of services" philosophy that can offer a wide range of options to meet an equally wide array of community demographics and needs.

Some examples of mobility management activities include:

- Operating transportation brokerages to coordinate service providers, funding resources, and customer needs;
- Coordinating transportation services for older adults, individuals with disabilities, and individuals with low incomes;
- Supporting local partnerships that coordinate transportation services;
- Providing travel training and trip planning activities for customers;
- Developing and operating traveler call centers to coordinate travel information, manage eligibility requirements, and arrange customer travel; and
- Planning and implementing the acquisition and purchase of intelligent transportation technologies to operate a coordinated system.

Travel training and mobility management should address all transportation options in the area. For example, if one agency starts a travel training program, the program should include training on using other local services, including, for example, Hoosier Ride inter-city bus services, veterans van programs, and senior transportation.



Priority: High

Counties Included: All Region 11 counties

Responsible Parties: Public transit operators and community health care and social service organizations

<u>Implementation Time Frame</u>: <u>Staffing Implications:</u>

Mid-Term (13-24 months)

Travel training and mobility management are programs

that can be developed by existing staff or by hiring new staff. If using existing staff, it may be necessary to add part- or full-time staff positions to absorb preexisting

duties.

<u>Implementation Budget</u>: Budget is scalable depending on the size of the program; up to \$100,000 could be expended annually for this type of program, primarily on staffing.

<u>Potential Funding Sources</u>: FTA Section 5311 grants (local match required) can be used to fund mobility management or travel training. Currently, these funds are utilized by public transit operators to operate service and make capital purchases.

Performance Measures:

- Number of efforts made to educate the community about transportation options.
- ◆ Travel training or mobility management program initiated.
- Number of individuals assisted through new program.

GOAL 4: INCREASE PARTICIPATION IN INITIATIVES TO ENHANCE MOBILITY

<u>Strategy 4.1 Participate Actively in the Indiana Council on Specialized Transportation (INCOST) and Other Statewide Organizations</u>

INCOST is the most active statewide association for rural and specialized transportation providers. Participation is not limited to public transit systems; human service agencies may also participate. INCOST meets on a regular basis to discuss statewide policy issues and network to find solutions to common problems. The organization holds an annual conference. The Indiana Transportation Association (ITA) as another statewide transportation organization that focuses on public transit.

There are many other interest groups and advocacy organizations that discuss transportation issues and advocate for improvements. The Governor's Council for People with Disabilities, for example, conducted a statewide study revealing that transportation is one of the top needs for their constituents, prompting new policy and program discussion. The National Federation for the Blind has similar state and local chapters. The American Planning Association organizes professionals that care deeply about filling infrastructure gaps. Health by Design advocates for increased transportation funding and built environment changes that increase accessibility and quality of life. Participation in these and other statewide networks which may lead to opportunities for new grants, pilot projects and funding partnerships.



Priority: Medium

Counties Included: All Region 11 counties

Responsible Parties: Public and human service transportation providers

Implementation Time Frame: Staffing Implications:

Immediate and Ongoing Staff time to provide meaningful participation in

meetings.

Implementation Budget:

Minimal expense for staff time to participate in meetings and contribute leadership to

initiatives.

Potential Funding Sources: Not required.

Performance Measures

 Number of representatives from Region 11 representatives who attend meetings of INCOST and other statewide organizations.

◆ Number of contacts with state-level policymakers about transportation needs and funding concerns.

Strategy 4.2 Educate Local Elected Officials About Transportation Needs

It is critical that transportation providers and stakeholders educate County Commissioners, City Council members, and other local elected officials about the value of public transit and human service transportation. The disconnect between transit and other transportation programs (roads and bridges) can be resolved by bringing transit conversations and trainings to the notice of elected officials.

Priority: High

Counties Included: All Region 11 counties

Responsible Parties: Public and human service transportation providers

Implementation Time Frame: Staffing Implications:

Immediate and Ongoing Staff time to communicate transportation needs

and value.

<u>Implementation Budget</u>: Minimal expense for staff time to participate in meetings.

Potential Funding Sources: Not required.



Performance Measures:

• Number of networking and outreach activities that are used to educate local policymakers about transportation needs.

Strategy 4.3 Track and Communicate Concerns About Brokered Service Delivery to FSSA and INDOT

As noted previously, problems with the statewide NEMT brokerage have included missed trips, customers who are told by the brokerage they have a trip but no provider shows up, and difficulties receiving payment for provided trips. The brokerage contract is held by the Indiana Family and Social Services Administration (FSSA). While contract oversight is carried out by FSSA, the Indiana Nonemergency Medical Transportation Commission provides a state-level forum for discussing problems within NEMT service delivery. These entities need to be made aware of ongoing difficulties experienced by customers and providers. With better awareness of the existing challenges, FSSA, the NEMT Commission, or state legislators can make policy improvements and changes based on local feedback.

Address information for the FSSA/NEMT Commission:

Office of Medicaid Policy and Planning MS 07, 402 W. Washington St., Room W382 Indianapolis, IN 46204-2739

Address information for NEMT brokerage as of December 2021:

Southeastrans, Inc. 4751 Best Road, Suite 300 Atlanta, GA 30337

Complaint form available at https://www.southeastrans.com/facilities-file-a-complaint-form.

Priority: Medium

Counties Included: All Region 11 counties

Responsible Parties: Providers of NEMT

Implementation Time Frame: Staffing Implications:

Immediate and Ongoing Staff time to document problems.

Implementation Budget: None

Potential Funding Sources: Not required

Performance Measures

- Number of NEMT brokerage complaints and incidents documented by transportation providers.
- Number of communications relayed to the NEMT brokerage, FSSA, NEMT Commission members, or state legislators.



POTENTIAL GRANT APPLICATIONS

The following table outlines the strategies and objectives designated to achieve the locally identified transportation goals that are intended to meet local unmet transportation needs, reduce duplication, and improve coordination of human service agency and transportation provider resources. The table includes strategies that are eligible for implementation with the assistance of a grant from the Transportation for Enhanced Mobility of Seniors and Individuals with Disabilities (Section 5310) and the Formula Grants for Rural Areas (Section 5311) for rural public transportation providers. Page numbers are provided in Table 5 for quick reference to detailed information for each objective.

All Section 5310 grant funds will be available through a competitive process. Please also note that each grant application for Section 5310 and Section 5311 will be considered individually to determine if the proposed activities to be supported by the grant adequately meet the requirements of the intended funding program. Grant applications for strategies that do not meet the intended requirements of the FAST Act will not be awarded, regardless of the designated eligibility in this report.

The implementation timeframe for each strategy ranges from the date of this report through 2024. It is noted that a coordinated transportation working group (such as a regional coordination committee) should update this plan on an annual basis and as new coordinated transportation strategies and objectives are developed.

Table 5: Implementation Key

	Goal 1: Maintain Existing Transportation Services for Human Service Agency Clients and the General				
	Public				
Page Number	Strategy Number	Objective/Strategy Description	Priority		
51	1.1	Replace and Maintain Vehicles through FTA/INDOT Funding and	High		
		Local Sources			
51	1.2	Develop Local Tools for Driver Recruitment and Retention	Medium		
Goa	l 2: Expand	Transportation Service for Older Adults, People with Disabilities, Low-	Income		
		Individuals, and the General Public			
Page Number	Strategy Number	Objective/Strategy Description	Priority		
_	0.	Objective/Strategy Description Expand the Capacity of Existing Transportation Providers	Priority High		
Number	Number	• • • •	•		
Number 52 53	Number 2.1 2.2	Expand the Capacity of Existing Transportation Providers	High Medium		
Number 52 53	Number 2.1 2.2	Expand the Capacity of Existing Transportation Providers Expand Employment Transportation to Serve More Workers	High Medium		

Table continues on following page



	Goal 4: Increase Participation in Initiatives to Enhance Mobility				
Page Number	Strategy Number	Objective/Strategy Description	Priority		
56	4.1	Participate Actively in the Indiana Council on Specialized	Medium		
		Transportation (INCOST) and Other Statewide Organizations			
57	4.2	Educate Local Elected Officials About Transportation Needs	High		
58	4.3	Track and Communicate Concerns About Brokered Service Delivery	Medium		
		to FSSA and INDOT			

Coordinated Public Transit - Human Services Transportation Plan

Region 11: Fayette, Franklin, Rush, Union and Wayne Counties

Appendix – Outreach Documentation









Prepared for Indiana Department of Transportation

January, 2022

Prepared by: RLS & Associates, Inc.

3131 S. Dixie Hwy, Suite 545 Dayton, OH 45439 (937) 299-5007 rls@rlsandassoc.com



COORDINATED PLAN OUTREACH CHECKLIST

Focus Groups, Workshops, and Public Meetings

Stakeholder Focus Group Meetings (held on Zoom)

Date: March 25, 2021 from 4:30 PM to 6:00 PM

Invitations Distributed

- ✓ Email: Postcards sent to regional stakeholders on March 8, 2021; Email sent to all public and human service transportation providers on March 4, 2021
- ✓ Information was provided in alternative formats, upon request
- ✓ Events were open to all individuals, including hearing impaired and limited English proficient
- ✓ Press release included; sent to:
 - Connersville News Examiner
 - Whitewater Publications
 - Greensburg Daily News
 - The Rushville Recorder
 - Whitewater Publications Liberty Herald
 - Palladium-Item

Number of Attendees: 6

- ✓ Invitation emails and mailing list included
- √ Attendee list included
- ✓ Public Meeting Presentation included

Public Input Survey

Date(s) Surveys Were Distributed/Available Online: January 1, 2021 through May 11, 2021

- √ Web Posting: Survey Monkey
- ✓ E-mail and hard copy of survey provided upon request (hard copy included)
- ✓ Information was provided in alternative formats, upon request

Total number of electronic and paper surveys completed: 22

Other Outreach Efforts

✓ Interviews with major transportation providers to collect input about their services and coordination

Organization Contact List

Contact Person	Organization
Bob Ward, Transportation or Marie Dausch,	New Horizons Rehabilitation, Inc.
Director	
Bonnie Blades, Executive Director	Union County Council on Aging
Brandon Ganz, Executive Director	Hope Ministries Church
Brett Crowley, Dir., Student Support	Indiana University East
Services	
Bruce Daggy, Executive Director	Boys & Girls Clubs of Wayne County
Cathy Pelsor, Executive Director	Franklin County Senior Citizens Center/Public Transit
Charlotte Hofmann	Hand-in-Hand Adult Day Care
Dan Stewart, CEO	Achieva Resources
David Hicks, State Program Manager	Experience Works, IncFranklin County
David Lingg	Fayette County Transit/ Fayette County Senior Center
Dawn Bevington, Executive Director	United Way of Fayette County, Inc.
Dennis Pinkerton, CEO/Administrator	Waters of Batesville, LLC
Director	Community Action of East Central Indiana - Union County
Director	Community Action of East Central Indiana, IncFayette
Director	Community Action of East Central Indiana-Wayne County
Director	First Steps
Director	Fountain City Wesleyan Church Food Bank
Director	Fountain Place Apartments
Director	Franklin County Board of Commissioners
Director	Interlocal Community Action Program, Inc. (ICAP)
Director	Landmark Services, Inc.
Director	Lutheran Counseling Center
Eric Coulter, Executive Director	Wayne County Health Department
Eric Weiss, Executive Director	Circle U Help Center
Executive Director	American Cancer Society (ACS) - Richmond
Executive Director	American Red Cross
Executive Director	American Veterans Post 11
Executive Director	Centerville/Abington Senior Center
Executive Director	CMH Care Coordination
Executive Director	Community Mental Health Center, Inc.
Executive Director	Depot Taxi
Executive Director	Old Richmond Taxi
Executive Director	Richmond Senior Community Center
Executive Director	Tijuana Taxi, Inc.
Executive Director	VA Community Outpatient Clinic
Gidget Dickenson, Director	Union County Transit
Holly Leger	New Creations Chapel

Contact Person	Organization
Jamie Kennedy	Community Partners for Child Safety (CPCS) - Region 12
Jane Zimmerman, Office Manager	Mental Health America Community Connect
Jeffrey L. Baxter, President	Friends Fellowship Community
Jim Mickschl, Transit Manger	Achieva Resources
Johanna Hensley	Adult Day Care of Richmond, Inc.
Johanna Smith	Adult Day Care of Richmond
John Burnett, CEO	Community Education Coalition
Jolissa Bates	Fayette Co. Senior Center
Katie Strohm, Program Coordinator	Amigos
Kelly Broyles	Wayne County Dept. of Children's Services
Laura Hutchinson, VP for Student Dev.	Earlham College
Lea Ann Loy, Administrator	Hickory Creek at Connersville- Adult Day Services
Lorena Gromer	Western Wayne Senior Center
Lou Dickman, Director	Early Learning and Family Literacy Center
Manager	Amtrak Station
Manager	Aurora Addiction Services
Manager	Cambridge Square Apartments
Manager	Care-A-Van
Manager	Goodwill Industries
Manager	Hauk-Spencer Medicar
Manager	Hoosier Ride
Marshall Smith, Veteran's Service Officer	Wayne County Veterans Office
Marva Evans, Executive Director	Fayette County Transit/ Fayette County Senior Center
Mary Louise Edwards	Ivy Tech Community College Richmond
Mary Medler, Regional Manager	Fayette County Division of Family Resources
Mary Medler, Regional Manager	Rush County Division of Family Resources
Mary Medler, Regional Manager	Union County Division of Family Resources
Mary Medler, Regional Manager	Wayne County Division of Family Resources
Melinda Brown	Stayin' Alive, Franklin Co. Local Coordinating Council
Melissa Browning	Union County Development Corp.
Missy Watts, Service Coordinator	Independent Living Center
Ms. Whitney Mays, Program Director	Hope House Addiction Recovery Center
Neisah Wicker	Fayette Co. Senior Center
Nicole Boersma, M.D.	Rushville Community Health Center
Operations Manager	Greyhound
Operations Manager	MegaBus
Pat Fisher	Northeastern Senior Center
Paul Wiwi, President	Union County Commissioners
Peggy Brower	Rush County "Rush Ride"
Rebecca Studebaker, Executive Director	YWCA
Scot Quintel, President	Whitewater Valley United Way

Contact Person	Organization
Steve Sickbert, Board of Trustees	Rush County Schools
Student Admissions	Ivy Tech Community College Connersville
Sue Felton	SIEOC Franklin Co
Sue Liming	Vocational Rehabilitation Services
Suzie Pierce	Nettle Creek Senior Center
Terri Quinter, Transportation Department	Rose View Transit & Paratransit System
Tina Logan	Rush County "Rush Ride"
Tina Logan	Rush Co. Senior Citizens Services
Traci Taylor, Service Coordinator	Independent Living Center
Transportation Services	Area 9 Agency
Trisha Witham	Union Co. Transit Service
Veronica Voelker	Brookville Court Treasurer
Veteran's Services Officer	Rush County Veterans' Services Office
Veteran's Services Officer	Veterans Outreach Office Franklin County
Veteran's Services Officer	VETERANS SERVICE OF FAYETTE COUNTY
Veteran's Services Officer	Wayne County Veterans Office
Wanda Henderson, Executive Director	Rush County Senior Center
Wayne White, Health Officer	Fayette County Health Department
	Fayette County Free Clinic c/o First United Methodist
	Church
	Interfaith Apartments
	Northeastern Neighborhood Meal Site
	Northeastern Wayne Schools
	Richmond Academy, Inc.
	Richmond Community Schools
	Richmond Friends School
	Senior Citizens Services, Franklin Co.
	SETON CATHOLIC SCHOOL
	Shares, Inc.
	Shares, Inc. (McGraw Industries)
	Southeastern Indiana EOC
	St. Michael Catholic School
	Union County College Corner Joint School District
	Union County Health Department - Clinic
	Veterans Transportation
	Wayne Township Trustee
	Western Wayne Schools
	Whitewater Valley Transit Connection
	Work One
	YMCA

Coordinated Public Transit-Human Service Transportation Plan Meetings

Please join RLS & Associates and the INDOT Office of Transit for a virtual meeting on the Coordinated Public Transit-Human Service Transportation Plan for your INDOT rural coordination region. The Federal Transit Administration (FTA) requires that projects selected for funding under the Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program be included in a coordinated plan. Please attend and provide your input and insights to discuss unmet transportation needs, gaps in transportation services, and recommended strategies to improve mobility options in and around the area. Meetings will be held March 17-31, 2021.









Who Should Attend?

Stakeholders (transportation providers, social service agencies, older adults, individuals with disabilities, people with low income, etc.) and the general public.

To find the date, time, and log -in/dial-in information for your region's meeting, please visit

tinyurl.com/783czmmm

For more information, contact RLS & Associates at 937-299-5007 or email ccampoll@rlsandassoc.com

For Immediate Release

Date: March 8, 2021

Contact: Christy Campoll, Associate, RLS & Associates, (317) 439-1475 (mobile)

Brian Jones, Section 5310 Program Manager, Indiana Department of

Transportation, (317) 426-8541

Subject: Public meeting to focus on transportation needs in rural areas of Indiana for older adults, individuals with disabilities and the general public

The Indiana Department of Transportation (INDOT) is updating the coordinated human services transportation plans for the state's rural coordination planning regions. A series of virtual public meetings will be held to inform interested individuals about the possibilities of coordinated public and human service agency transportation and, more importantly, to listen to anyone who rides, would like to ride, and/or operates public, private or human service agency transportation resources.

The meetings will begin with a brief presentation of research conducted by RLS and Associates, Inc. about residents' needs for transportation to work, medical appointments, entertainment, or any other reason. There will be an open discussion about gaps in available transportation service and strategies for increasing mobility. Public, private and non-profit transportation providers, human service agencies, and any individual who needs transportation should attend.

The public is encouraged to attend the following meeting to learn more and share their input. Agencies who receive or intend to receive funding under the Federal Transit Administration Section 5310 Program must participate in coordination planning. Anyone who requires an auxiliary aid or service for effective communication to participate in a meeting should call (800) 684-1458 at least one week in advance on the meeting.

<u>Coordinated Transportation Plan Input Meeting for Fayette, Franklin, Rush, Union and Wayne Counties (Region 11)</u>

Thursday, March 25, 2021, 4:30 PM - 6:00 PM Eastern Time Obtain Zoom meeting link or dial-in phone number by visiting http://tinyurl.com/783czmmm

Residents are asked to provide their input through the public survey available online at: https://www.surveymonkey.com/r/Indiana Transportation. Paper versions of the survey are available upon request by calling (800) 684-1458.

For additional information, contact Christy Campoll with RLS & Associates at (800) 684-1458 or Brian Jones, Section 5310 Program Manager, Indiana Department of Transportation, (317) 426-8541.



Christy Campoll <ccampoll@rlsandassoc.com>

Rural Regional Coordinated Transportation Plan Meetings

rushseniorcenter1@gmail.com, Union County <withamtrisha ucaa@yahoo.com>

Christy Campoll <ccampoll@rlsandassoc.com>

Thu, Mar 4, 2021 at 3:13 PM

Cc: Kjirsten Frank Hoppe <kfrankhoppe@rlsandassoc.com>, Laura Brown <lbrown@rlsandassoc.com>, Vicky Warner <vwarner@rlsandassoc.com>, Megan Gatterdam <mgatterdam@rlsandassoc.com>, "Jennings, Todd" <TJennings@indot.in.gov>, "Jones, Brian (INDOT)" <BJONES@indot.in.gov> Bcc: Becky Guthrie <bguthrie@frrs.org>, Bryan Sergesketter <streetcomm@washingtonin.us>, Debbie Neukam <dneukam@washingtonin.us>, crmartindale@comcast.net, Kathy Fowler <kfowler@washingtonin.us>, greenfield.safsinc@sbcglobal.net, Jacque Lueken <ilueken@huntingburg-in.gov>, Stan Keepes <Stan.Keepes@arcswin.org>, Julia Rahman <juliarahman6@gmail.com>, Joel Sievers <jsievers@vincennesymca.org>, Janelle Lemon jllemon@gshvin.org, Jesse Watkins pccacan@gmail.com, cimes@pcrsinc.org, MONICA EVANS <monica.edpcca@yahoo.com>, sccoa@att.net, Patricia Glenn pat.glenn@sirs.org>, Roland Lemus
drytrdir@brsinc.org>, Jenny Bowen
 forpdc@brsinc.org>, Catherine Strother <cstroth@firstchancecenter.com>, Greg Mahuron <greg@oasc.us>, Rebecca Kemple <rkemple@firstchancecenter.com>, Kim Robinson <kimrobinson@browncountyymca.org>, Seymour Transit Dept <seytransit@seymourin.org>, Eric Frey <ericfrey@aracities.org>, Dennis Parsley <dparsley@bedford.in.us>, Lisa Salyers <lsalyers@area10agency.org>, Angie Purdie <apurdie@co.monroe.in.us>, Chris Myers <cmyers@area10agency.org>, btabeling@seymourin.org, twayt@seymourin.org, Kelly Bauer <kbauer@youriccs.org>, Holly Porter <dir@nccs-inc.org>, Jacki Frain <pchsifrain@embargmail.com>, Charmaine Dunkel <cdunkel@starkecs.com>, Lynette Carpenter <lcarpent@urhere.net>, dbrown@areaivagency.org, Elva James <ejames@areaivagency.org>, Dawn Layton <dlayton@clintoncountytransit.org>, Gale Spry <qspry@wccoa.comcastbiz.net>, juanitao@wccoa.comcastbiz.net, mary.nichols@asipages.com, kclark@crawfordsville-in.gov, Roxanne Roman <rroman@cdcresources.org>, tnickle@capwi.org, ccsfs@frontier.com, kdecamp@lifestreaminc.org, bwashler@lifestreaminc.org, Dave Benefiel <dave@heartlandmpo.org>, newcastletransit@yahoo.com, betsy@wellsonwheels.com, bonnie@councilonaginginc.com, Tim Ramsey <tramsey@adifferentlight.com>, jedwards@cityofmarion.in.gov, Pam Leming <ple>pleming@cityofmarion.in.gov>, gmaynard@careyservices.com, traci.gross@jrds.org, "Horton, Debbie" <dhorton@lifetime-resources.org>, mguidice@lifetime-resources.org, "Thomas, Erin" <ethomas@lifetime-resources.org>, rgoodwin@nhrinc.org, aankney@mcymca.org, smcbride@mcymca.org, Beveraly Ferry <beverlyf@livingwellinwabashcounty.org>, vickik@livingwellinwabashcounty.org, tiffanym@livingwellinwabashcounty.org, jpatton@arcwabash.org, bcalhoun@casstransit.com, Cathy <cleigh@casstransit.com>, hsmith@peakcommunity.com, fccoa@rtcol.com, transpo1@rtcol.com, Cara Kellerman <director@encorecenter.org>, becky@wccoa.biz, Bernie King <bernie@wccoa.biz>, slwilson@nec.org, rgreen@nec.org, kcraig@thearcfoundations.com, dkreais@steubencoa.org, mzenk@dccoa.net, dblankenship@dccoa.net, Holly Saunders hsaunders@huntingtoncountycoa.org, lcarr@pathfinderservices.org, Cathy Franklin Co Pelsor <fcpt@frontier.com>, Dave Lingg <fayetteseniorcenter@comcast.net>, grants@connersvillein.gov, transit@fayetteseniorcenter.com, Terri Quinter <tquinter@richmondindiana.gov>, johanna@adcofrichmond.com,

Dear Transportation Providers,

Please circulate this announcement in your communities! The INDOT Office of Transit is updating the coordinated human services transportation plans for the state's rural coordination planning regions. Over March 17th through 31st, a series of virtual public meetings will be held to inform interested individuals about the possibilities of coordinated public and human service agency transportation and, more importantly, to listen to anyone who rides, would like to ride, and/or operates public, private or human service agency transportation. The meetings will focus on the open discussion about gaps in available transportation service and strategies for increasing mobility. Public, private and non-profit transportation providers, human service agencies, and any individual who needs transportation should attend.

The meeting schedule is attached and is also available at http://tinyurl.com/783czmmm. The schedule includes links to participate in the virtual meetings, as well as dial-in numbers to participate by phone. There is information in the flyer about requesting language translation, closed captioning, or other meeting services for people with disabilities.

We would like to get the word out to as many people as we can, so please forward this to your TAC committees, board members, local elected officials, senior centers, agencies serving people with disabilities, CAP agencies, Head Start, community foundations, and any others you can think of!

1 of 2 9/15/2021, 10:20 AM

Please let me know if you have any questions or concerns.

Thank you, Christy Campoll

Christy Campoll | Senior Associate 3131 S. Dixie Hwy. Suite 545, Dayton, OH 45439

Office: 937.299.5007 | Direct: 317.439.1475 | www.rlsandassoc.com

RLS & Associates, Inc...Celebrating 33 Years of Service to the Transit Industry





9/15/2021, 10:20 AM 2 of 2



Why: To update the Coordinated Public Transit-Human Service Transportation Plan for your INDOT rural coordinated planning region. The Federal Transit Administration (FTA) requires that projects selected for funding under the Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program be included in a coordinated plan. Please participate and provide your input and insights to discuss unmet transportation needs, gaps in transportation services, and recommended strategies to improve mobility options in and around the area.

Who: Stakeholders (transportation providers, social service agencies, older adults, individuals with a disability, people with low income, etc.) and the general public.

Region	Date	Time	Link	Dial-In Number
Region 1 (Daviess, Dubois, Gibson, Greene, Knox, Martin, Perry, Pike, Posey, Spencer, Sullivan, Warrick)	March 19, 2021	12-1:30PM EDT	<u>Click Here</u>	1-646-558-8656 ID: 96830626318; Pass: 429323
Region 2 (Crawford, Harrison, Orange, Scott, Washington)	March 17, 2021	11AM-12:30PM EDT	Click Here	1-646-558-8656 ID: 97382822074; Pass: 634410
Region 3 (Brown, Jackson, Lawrence, Monroe, Owen)	March 18, 2021	12-1:30PM EDT	<u>Click Here</u>	1-872-240-3412 Access: 210-438-509
Region 4 (Jasper, Newton, Pulaski, Starke)	March 30, 2021	12-1:30PM EDT	Click Here	1-646-558-8656 ID: 99496904659; Pass: 023077
Region 5 (Benton, Carroll, Clinton, Fountain, Montgomery, Warren, White)	March 31, 2021	12-1:30PM EDT	Click Here	1-646-558-8656 ID: 91364207144; Pass: 248613
Region 6 (Clay, Parke, Putnam, Vermillion)	March 24, 2021	4:30-6PM EDT	<u>Click Here</u>	1-646-558-8656 ID: 92814488640; Pass: 262526
Region 7 (Adams, Blackford, Delaware, Grant, Henry, Jay, Madison, Randolph, Wells)	March 23, 2021	12-1:30PM EDT	Click Here	1-646-558-8656 ID: 97640193471; Pass: 810787
Region 8 (Dearborn, Decatur, Jefferson, Jennings, Ohio, Ripley, Switzerland)	March 24, 2021	12-1:30PM EDT	Click Here	1-646-558-8656 ID: 91434469707; Pass: 382493
Region 9 (Cass, Fulton, Howard, Miami, Tipton, Wabash)	March 25, 2021	12-1:30PM EDT	Click Here	1-646-558-8656 ID: 97515530161; Pass: 625782
Region 10 (Dekalb, Huntington, LaGrange, Noble, Steuben, Whitley)	March 29, 2021	12-1:30PM EDT	Click Here	1-646-558-8656 ID: 98456315651; Pass: 925517
Region 11 (Fayette, Franklin, Rush, Union, Wayne)	March 25, 2021	4:30-6PM EDT	Click Here	1-646-558-8656 ID: 96970251584; Pass: 792145

Please call Kjirsten Frank Hoppe at 937-299-5007 or email kfrankhoppe@rlsandassoc.com to RSVP or if have any questions. If language translation or closed captioning services are needed, please call Kjirsten at 937-299-5007 one week in advance of the meeting if possible. Thank you in advance for your consideration and willingness to participate in this planning effort!

Please complete our public input survey! https://www.surveymonkey.com/r/Indiana Transportation

Region 11 HSTP Meeting Attendance List

March 25, 2021

- 1. Traci Taylor, Independent Living Center of Easter IN
- 2. Ann Barnhardt, Richmond
- 3. Valerie Shaffer, Economic Development Corporation of Wayne County
- 4. Sarah Mitchel, Economic Development Corporation of Wayne County
- 5. Beth Evans, LifeStream Services
- 6. Brian Jones, INDOT Section 5310 Program Manager

HSTP Update Region 11

March 25, 2021

Facilitator: Kjirsten (with Laura taking notes)

Attendance:

- Traci Taylor, Independent Living Center of Easter IN
 - o Focus on needs for individuals with disabilities
- Ann Barnhardt, Richmond
- Valerie Shaffer, President, Economic Development Corporation of Wayne County
 - o Interested in how to provide more public transportation in Wayne County
- Sarah Mitchel, Economic Development Corporation of Wayne County
- Beth Evans, Community Director of Community Services for LifeStream Services
 - Serve 5 of the local counties
 - Want to see what opportunities are out there to improve on the county transportation
- Brian Jones, INDOT Section 5310 Program Manager

Emails:

tracit@ilcein.org

Valerie@whywaynecounty.com

bevans@lifestreaminc.org

Sarah@whywaynecounty.com

annb@ilcein.org

Kjirsten gave an overview of plan purpose.

Kjirsten provided the link to the English and Spanish versions of the survey.

Kjirsten provided the survey input to date.

Kjirsten presented the demographic analysis.

- Zero Vehicle HH Map -
 - Richmond has several college campuses. All of them are commuter schools except Earlham which has on campus housing.
 - The areas around Fountain City, Economy and Hagerstown have a fairly high Amish community population.
 - Richmond also has low-income neighborhoods as well as senior living and assisted living facilities.
 - o Fayette and Franklin have some of the lowest income families in the state.
- 65+ Age

- One of the challenges in Wayne County communities is that they don't have retirement communities. So, when they need to seek out assisted living, they must move to Richmond.
- o Richmond, therefore, has a high concentration of senior living facilities.
 - Traci pointed out that as people get older, they tend to stay on the country roads and stay off the highways when driving to specialists. And they drive a long distance on those roads because specialists might be in Richmond, etc.
 - Challenge is also that there is no transportation to get them to where they need to go. Children move away and older parents drive themselves or rely on transit, friends.
- Individuals with Disabilities
 - Range from 13% to 18% in the region. Franklin is equal to the state average but all other counties have higher than the state average.
- Kjirsten presented the high priority needs from the 2017 plan
 - Additional/New needs
 - Expand hours of operation for employment and shopping needs
 - Look at where the employers are that would need expanded hours.
 - Older adults who are out of the workforce need more and more countywide transportation in Wayne County. This was a need in 2017 and it is even bigger now.
 - Also, look at the routes because a lot of employers say that transportation is one of the biggest hurdles for finding workers. Need to evaluate where the bus stops are.
 - Transportation on the far west side of Richmond does not go far enough. It goes to McDonalds to drop/pick up but once people get there, they don't have a ride to go farther.
 - Reid Health opened a new Program of All-inclusive Care for the Elderly (PACE) center on the west side of town. It is a one-stop for seniors. Having more routes and extended hours that would provide support for that facility would be beneficial.
 - Scheduling and transportation through Southeast Trans is not reliable, so people don't get to needed appointments.
 - It would be beneficial to help transportation providers understand the requirements under the ADA transportation section. There is a lot of confusion. They have been told directly that their paratransit will only transport one wheelchair user per hour because they don't have space on the vehicle.
 - Look into the wait for a paratransit trip. Traci thinks it is still 3 to 5 days reservation to get a ride on Richmond ADA paratransit.
 - Issue of service animals as part of ADA
 - It sounds like the public transit ADA people need some education about ADA requirements and what they can and cannot do.
 - More availability of service from a person's home to wherever they need to go. More door to door-or-door-through-door service is needed.
 - Outside of Richmond there is public demand response transportation.

- Centerstone and Meridian does offer assistants for their clients going to appointments, grocery, etc. (Centerstone and Meridian were not at the meeting need to verify this is true)
- Existing transportation providers (add these to the list)
 - Roseview Transit in Richmond
 - Franklin Transit
 - Union Transit will go out of county for a fee
 - Rush Transit
 - Care-A-Van (does door-through-door transportation in Richmond and they will also go out of county – maybe just medical)
 - Taxi Rose City Taxi (they think this is the name)
 - Franklin County Transit in Brookville
 - Lifestream funds Senior Transportation
 - 2 Uber drivers in the area ambulatory, curb to curb
- Goals and Strategies from 2017 Review and Comments
- What strategies have been realized since the last plan or other achievements?
 - This group could not answer.
- What goals would they like to see in the new plan?
 - Traci suggested providing education about the laws that are in place for individuals with disabilities and older adults in terms of transportation.
 - Ann suggested more availability of door-to-door service for things other than for medical appointments.
 - To remove the medical model of the only time people with disabilities or older adults need a ride is to go to the doctor. People need a ride for other reasons too.

Kjirsten went through the next steps and let them know that we would be reaching out to them again for input and prioritization. She also reinforced the need for the survey input.



Moving Public Transportation Into the Future

Coordinated Public Transit – Human Service Transportation Plan 2021 Update

TRANSPORTATION FOR OLDER ADULTS,
INDIVIDUALS WITH DISABILITIES, PEOPLE WITH
LOW INCOMES, & GENERAL PUBLIC
MARCH 2021

Agenda

- Introductions
- Project Overview/Section 5310 Program
- Discussion
 - Unmet Needs and Gaps in Service
 - Potential Solutions
- Next Steps

Introductions

- Please share a little about yourself!
 - What is your name?
 - Are you representing an organization today?
 - What is your primary mode of transportation (or that of the person you are advocating for today)

What Is A Coordinated Plan?

- Identifies Unmet Transportation Needs and Gaps in Service in the Community
- Prioritizes Goals and Strategies to address
 Unmet Needs
- Identifies Opportunities for Collaboration and Coordination of Services
- Must be Locally Developed and Adopted

Section 5310 Funding

Projects Must Be Included in the Coordinated Plan

- Enhanced Mobility for Seniors and Individuals with Disabilities
 - 49 U.S.C. Section 5310
- Provides Formula Funding to Improve Mobility for Seniors and Individuals with Disabilities
 - Removing Barriers to Transportation Service
 - Expanding Mobility Options

Study Area

 Last Updated in 2017, the Plans are Available at https://www.in.g ov/indot/2825.ht



Region 1 5310 Projects (2016-20)

- Accessible Vehicles (51)
 - o 2016-2020
 - \$2,057,920 Total (Local Share = \$411,584)
- Rural Areas
 - Historically, Demand for Vehicles in Indiana's Rural Areas Exceeds Available Funding

Transportation Public Survey

AVAILABLE NOW

 We Need to Hear from You and Your Neighbors, Consumers, and Friends

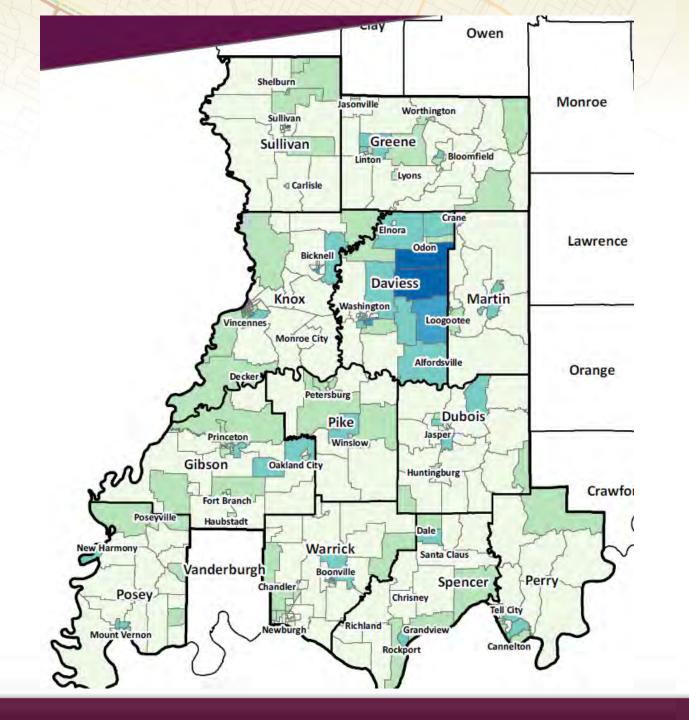
https://www.surveymonkey.com/r/Indiana_Transportation

- Spanish Version Available
- Print and Large Print Available

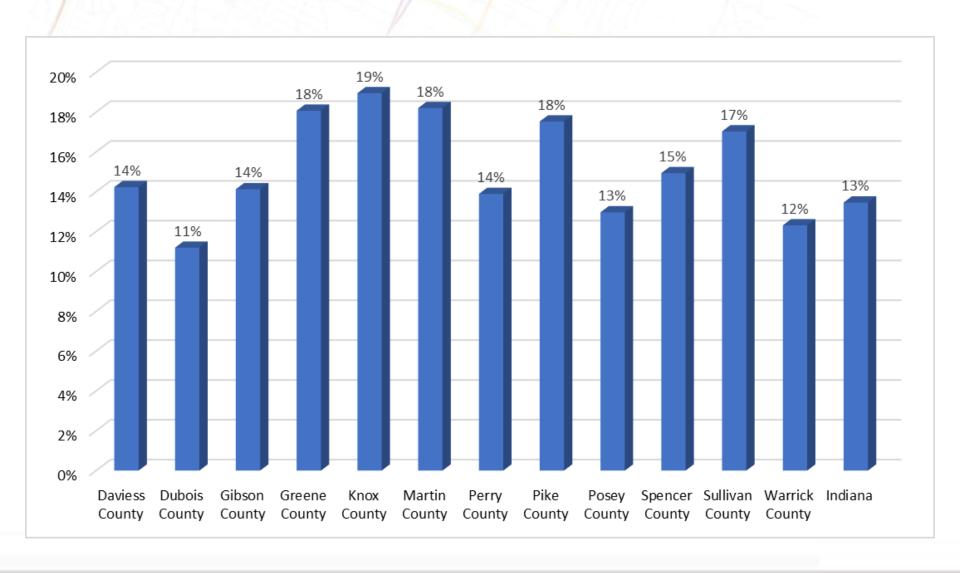
Transportation Public Survey

- ◆ I wish GCCOA could be funded or hired by American Cancer Society to provide rides for chemo and radiation only patients. I only request GCCOA.
- ◆ Dispatch is difficult and getting a ride is not easy. Too many rules. Wont take calls after 3 or before 8.
- I went to the ER with LCP Services, but I was down there too long and when I called to get a ride home everyone was closed. I had to pay \$60 to get home.





Individuals with Disabilities



Transportation Providers

- Providers include ALL Public, Private, Non-Profit, Volunteer, Government, and Human Service Agency Programs
 - Participation is Not Limited to Organizations that Serve Older Adults and Individuals with Disabilities
 - Every Part of the Network of Services is Important

Transportation Providers

- City of Huntingburg
- ♦ EasterSeals Posey Co
- Gibson Council on Aging
- Older Americans/Ride
 Solution
- ♦ Perry Co COA
- Perry Co Veterans Van
- ARC of SW Indiana/Ride
 Solution
- Posey Co COA
- Sr and Family Svcs

- SIDC Ride Solution and WATS
- Specer Co COA
- SIRS LinkNGo/Ride Solution
- Tri CAP
- Warrick Co COA
- Washington Transit System
- YMCA VanGo

Mobility Needs - 2017

- Medicaid long wait times/managed care broker issues
- Gibson County rides to Evansville
- Crossing state lines
- Vehicle tracking tech
- Communication at the county level
- Veterans transportation?
- Vehicle replacement needs

2017 Goals

- Goal #1: Increase Participation of Community Transit Providers as Contract Providers for Medicaid Brokers
- Goal #2: Expand Provider Use of New Technology
- Goal #3: Promote the Efficient Use of Resources at the Local and Regional Level
- Goal #4: Improve the Perception of Public Transit by Educating the Local Officials and the General Public
- Goal #5: Expand Transportation Service Availability Within and Outside of the Region
- Goal #6: Coordinate Transportation Resources to Promote Expansion of Service Within and Outside of the Region
- Goal #7: Incorporate New Capital to Improve Existing Mobility Options and Serve More People

Discussion

- + Have Transportation Needs in the Community Changed?
- What Strategies Could Help Meet Needs?
- What Plans are on the Horizon?
- Would More Coordination Help?
 - Within Counties
 - Inter-County Transportation

Next Steps

- Continue the Needs Assessment and Analysis
 - Demographics, Survey Input
 - Existing Services
 - Geographic, temporal and eligibility gaps
- Develop Draft Coordinated Plan Goals & Strategies
- Prioritize Goals and Strategies
- Ongoing Work Toward Implementation

We appreciate your participation!

THANK YOU FOR YOUR TIME!

2021 Indiana Public and Human Service Transpo	rtation Needs Survey
Please complete this survey about your transportation used in your local area's Coordinated Public Transitinformation please contact RLS & Associates at (937)	Human Service Transportation Plan. For more
1. What forms of transportation do you use: (check al Public transit that serves your city or county, including bus systems, rail lines, ADA paratransit, or general public demand response/dial-a-ride Medicaid Non-emergency medical transportation (NEMT) Demand response/dial-a-ride services that are for specific groups only – for example, older adults or people with disabilities (this excludes ADA complementary paratransit provided by public transit systems) Transportation offered by volunteer or faith-based groups Drive your own vehicle Rely on family/friends for rides Carpool or vanpool to work Other (please specify)	that apply) Uber/Lyft Taxi Inter-city bus, such as Greyhound or Megabus Bicycling Walking Scooter/Moped
If you use any transportation services, such as public the name(s) of the services you use: Name of Service 1	transit or demand response/dial-a-ride, please tell us
Name of Service 2 Name of Service 3	

If I could ride to oth Indianapolis or other		(5.5.7.5.5	destination	Pick me up at my home and take me directly to my destination		
Lower the cost to r	er the cost to ride earlier in the morning later at night rate on Saturdays		Increase health and safety precautions Run fixed route service more frequently (for example, make a bus route run every 30 minutes instead of every 60 minutes) Increase the amount of demand response/dial-a-ride service available (for example, operate more vehicles so there are fewer turn-downs for trip requests) Make scheduling demand response/dial-a-ride service			
Start earlier in the						
End later at night						
Operate on Saturd						
Operate on Sunda						
			more convenie demand trip re		ow for same-day or on-	
			Make it easier,	or add the option, f	for children, spouses	
			and/or care-giv	vers to ride along		
Other (please specify) Do you have difficulty	a getting the tr	ansnortation vou ne	ed to any of the fo	llowing types of	destinations?	
Other (please specify) Do you have difficulty	getting the tra	ansportation you ne Sometimes difficult	ed to any of the fo Frequently difficult	llowing types of Always difficult		
			-			
Do you have difficulty			-			
Do you have difficulty			-			
Do you have difficulty four employer Medical offices, clinics or nospitals Mental health care			-			
Do you have difficulty four employer Medical offices, clinics or hospitals			-		destinations? Not applicable to me	
Do you have difficulty four employer Medical offices, clinics or nospitals Mental health care Dental care			-			
Do you have difficulty /our employer Medical offices, clinics or nospitals Mental health care Dental care			-			
Do you have difficulty Your employer Medical offices, clinics or nospitals Mental health care Dental care Pharmacy Shopping			-			

	No
	Yes, for work
_	Yes, for medical care
	Yes, for shopping
	Yes, for other reasons (please specify)
6. Is i	t difficult for you to travel outside of your county? If yes, please indicate what makes it difficult.
0	Yes
	No
	Not applicable (no need to travel outside my county)
If yes,	please provide more information:
7. Wh	nat is your age group?
	Under 18
	18-54
	55-59
	60-64
	65+
0 Do	vou have a disability which requires you to use a cape, walker wheelsheir, and/or another device.
	you have a disability which requires you to use a cane, walker, wheelchair, and/or another device, o e animal to help you get around?
	Yes
	No
9 Wh	nat county do you live in?
J	iac dounty do you into int

11. Do you have any comments or suggestions regarding the transportation services in your community?	10. What is your zip code?							
11. Do you have any comments or suggestions regarding the transportation services in your community?								
11. Do you have any comments or suggestions regarding the transportation services in your community?								
	11. Do you have any comments or suggestions regarding the transportation services in your community?							

OPEN-ENDED COMMENTS PROVIDED BY SURVEY RESPONDENTS

- Get lyft or uber supplemented to make them come here. Have true public transit and figure out how to get treated people home from ED 24/7.
- Intercity Rail options should be funded as well as trails.
- I do not even know what is available in my county as far as public transportation.
- We have VERY poor transportation options in Richmond city limits, but most of the county has none!
- Ride Rush does a great job. Would be great if they could work later hours for people who would like to attend evening events. Also be able to go shop in other towns since our county doesn't have a Walmart anymore.
- It is very difficult to schedule and unreliable. The transportation cannot pick up at my sister's house because it cannot turn around in her driveway.
- Franklin County transportation is my ONLY way to get to work. Wish routes to and from work were not so long. Transportation people are great!
- Not available.
- Several closures during COVID. Travel to work out of state is expensive.