# **Coordinated Public Transit – Human Services Transportation Plan**

Region 5: Benton, Carroll, Clinton, Fountain, Montgomery, Tippecanoe, Warren and White Counties









Prepared for Indiana
Department of Transportation

December, 2021

Prepared by: RLS & Associates, Inc.

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#### **TAC Meeting Minutes**

#### April 20, 2022

#### At ZOOM

Meeting started at 11:00 AM on April 20, 2022, by virtual using ZOOM

#### **Member's Present**

Mary Paulsen – Area IV Agency

David Brown – Area IV Agency

Janet Schweikher - Wabash Center

Cindy Orem – Paul Phillippe Clinton County Transit

Doug Poad - Tippecanoe County Area Planning Commission

Desi Lowe - CARS

Kim Clark – Sunshine Vans – Crawfordsville

Teresa Puterbaugh – White County Council on Aging

Tonya Agnew – City Bus of Lafayette

Ashley Wilson – Carroll County Senior and Family Services

Tim Bowman – Abilities Services

Jett Wells - Abilities Services

Minutes of the previous meeting on January 19, 2022, were motioned by Cindy Orem and seconded by Doug Poad to be accepted.

#### **Reports:**

**INCOST:** Becky Allen is the new president of INCOST. Cindy Orem shared that the Paratransit ROADEO was held on April 9<sup>th</sup>. Twenty-one drivers participated. The top two contenders were offered to have registration fees for the CTAA Conference in Louisville paid so they may attend. The CTAA Conference is being held in Louisville, KY on May 10-14, 2022. CTAA's EXPO is the premier annual training and networking event for community and public transportation professionals. Participants take part in essential learning and networking events. Speakers and sessions will keep attendees up to date with innovative technology, workforce development, communication strategies, funding, and regulations. The EXPO also features a trade show with all the latest community transportation goods and services. You may register here: https://ctaa.org/expo-2022-home/

**TRAINING:** <a href="https://www.indianartap.com/">https://www.indianartap.com/</a> Training: RTAP is still providing training via Webinars with the exception of Passenger Assistance Training. PAT is being provided at the RTAP facility in Columbus, IN. The training calendar may be found at the Indiana RTAP website.

**COORDINATION PLAN:** A copy of the Region 5 Coordination Plan was included in the ZOOM invite for this meeting. Doug Poad said that he reviewed it and that he thought it looked fine.

**MOU's:** The MOU has been updated and disseminated.

By-Law's: No changes at this time.

**Membership:** Membership list needs to be updated and resent to committee members.

**5310 Update:** No update – Brian Jones had a conflict and could not attend this TAC meeting.

**5311/ PMTF Update:** Todd Jennings from INDOT has sent a email asking for funding increase requests be sent to him as soon as possible. The 2023 5311 Application is due in BlackCat no later than May 13<sup>th</sup>.

#### **Transportation Topics Open Discussion/Sharing Announcements:**

a. Region 5 Coordinated Public Transit-Human Services Transportation Plan – A copy of the plan along with a RESOLUTION SUPPORTING THE REGIONAL COORDINATED TRANSPORTATION PLAN to be signed by each committee member was included with the ZOOM meeting invite for this TAC meeting. Committee members were encouraged to review the plan before this meeting so that questions / concerns could be addressed during the meeting. The TAC members did not have any questions or concerns regarding the Coordinated Plan and agreed to adopt the coordinated plan. Each member will send a copy of the sign off to Mary Paulsen – Deputy Director of CAP – Area IV Agency before the end of the day April 20<sup>th</sup>, 2022.

No other updates at this time.

Next meeting will be Zoom on July 20th, 2022, at 11:00 AM

Meeting was adjourned at 11:28 AM

## 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 \_\_\_\_\_\_\_; 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 April 20, 2022 AS EVIDENCED BY THE AUTHORIZING SIGNATURES BELOW.

Jamet Schweikher, Asset Manager, Wabash Center	4/20/22
Name and Title	Date
Name and Title	Date

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TONYA AGNEW MANAGER OF DEVELOPMENT	4/20(22 Date	

Date

Name and Title

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Mame and Title	Jank Director Of Senier Programs Oty of Crawfordsville	3/23/22 Date
Name and Title		Date

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Name and Title

Date

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Dan Brown Transportion Mgr. Name and Title	<u> </u>
Name and Title	Date

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Jane Kath	2-1-22
Name and Title	Date
Name and Title	Date

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Desu Lowe Transportation Mgr. 03/29/2022  Name and Title Date	

Date

Name and Title

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That this resolution takes effect immediately upon its adoption.

Tim Bowman – Assistant Director/Fiscal/IT Specialist ASI	04/20/2022
Name and Title	Date
Jett Wells – Director ASI	04/20/2022
Name and Title	Date

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Aures Total auch, Executing	Dir. 2/4/2022
Name and Title	Date
Name and Title	



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#### INTRODUCTION

#### **OVERVIEW**

This plan updates the Public Transit-Human Services Transportation Plan for Benton, Carroll, Clinton, Fountain, Montgomery, Tippecanoe, Warren, and White 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 <a href="https://www.transit.dot.gov/coordinating-council-access-and-mobility">https://www.transit.dot.gov/coordinating-council-access-and-mobility</a>.

**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 <a href="https://www.transit.dot.gov/funding/grants/enhanced-mobility-seniors-individuals-disabilities-section-5310">https://www.transit.dot.gov/funding/grants/enhanced-mobility-seniors-individuals-disabilities-section-5310</a>.

**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 <a href="https://www.transit.dot.gov/FAST">www.transit.dot.gov/FAST</a>.

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. <a href="https://www.transit.dot.gov/BIL">https://www.transit.dot.gov/BIL</a>

**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.

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 <a href="https://www.transit.dot.gov/funding/grants/grant-programs/formula-grants-rural-areas-5311">www.transit.dot.gov/funding/grants/grant-programs/formula-grants-rural-areas-5311</a>.



**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 <a href="https://www.transit.dot.gov/funding/grants/urbanized-area-formula-grants-5307">https://www.transit.dot.gov/funding/grants/urbanized-area-formula-grants-5307</a>

**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 5 is located in western Indiana and includes the counties of Benton, Carroll, Clinton, Fountain, Montgomery, Tippecanoe, Warren, and White. The map in Figure 1 provides a depiction of the area included in this study.

**Region 5 Location Map** Region 5 Fulton Coordinated **Public Transit -**Jasper **Human Services** Transportation Plan Update 421 Miam 24 White **Limited Access** Carroll Highway Benton Cities Flora Region 5 Burling West Lafayette Pine Village Howard Tippecanoe Warren Clinton Tipton New Richmond Montgomery Fountain 421 Hamilton 41 3 4.5 Ladoga Parke Hendricks Marion

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.

Putnam



#### POPULATION PROJECTIONS

STATS Indiana, using data from the Indiana Business Research Center, IU Kelley School of Business projects the Region's population will grow to 367,280 by 2050, an estimated increase of 7.3 percent from the year 2020 population projection. Figure 2 shows population trends between 2020 and 2050 for each county in Region 5.

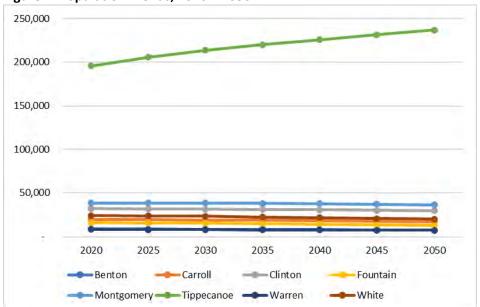


Figure 2: Population Trends, 2020 - 2050

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.



Older adult population density in Region 5 is shown in Figure 3. Figures 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.

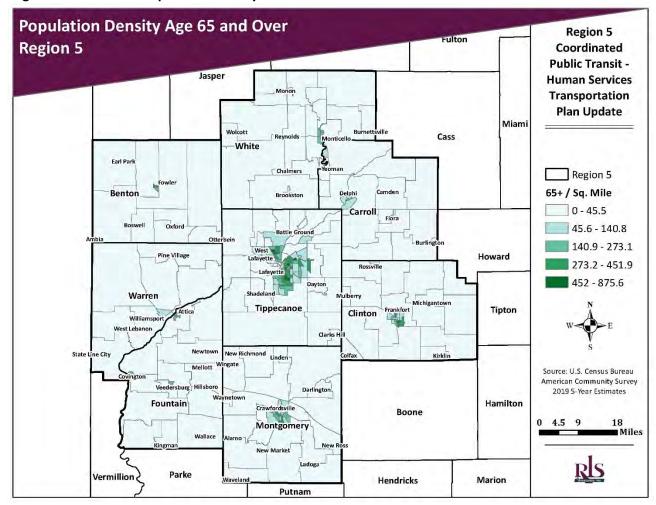


Figure 3: Older Adult Population Density

#### **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 5 is available through the 2019 ACS Five-Year Estimates of disability for the non-institutionalized population. Figure 4 provides 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 Fountain County at 19 percent. Clinton County has the lowest percent population of individuals with a disability in Region 5 with 13 percent, being slightly lower than that of the State of Indiana.

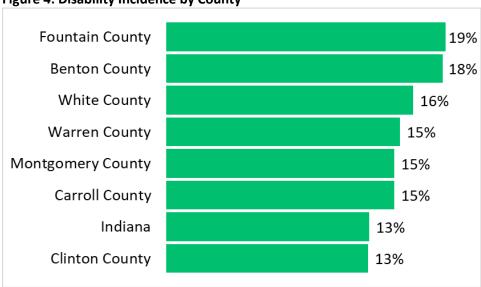


Figure 4: Disability Incidence by County

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 129,585 households in Region 5. Of those households, about 32.2 percent earn less than \$35,000 annually. Of the households earning less than \$35,000, 10.6 percent earned between \$25,000 and \$34,999. Another 14.9 percent earned between \$10,000 and \$24,999 and 6.8 percent earned less than \$10,000 per year. The median household income for each area is shown in Table 1.



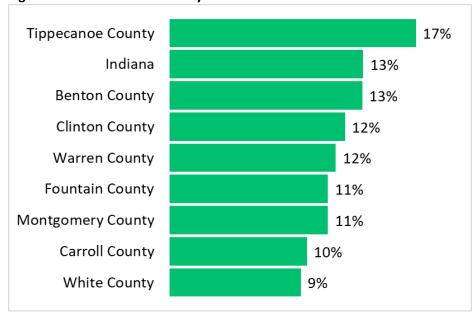
**Table 1: Median Household Income** 

Geography	Median Household Income
Benton County	\$49,488
Carroll County	\$54,806
Clinton County	\$54,286
Fountain County	\$52,874
Montgomery County	\$55,522
Tippecanoe County	\$53,130
Warren County	\$60,553
White County	\$54,576
Indiana	\$56,303

#### **POVERTY STATUS**

Figure 5 illustrates the percentage of the population in each county that is living below the poverty level. Tippecanoe County has the highest percent of population living below the poverty level with 17 percent. Benton County has the second highest percentage of population living in poverty with 13 percent, matching that of the state of Indiana, while White County has the lowest at nine percent.

**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 7,943 households in the Region that have no available vehicles. This is 6.1 percent of all households in the Region. An additional 42,427 or 32.7 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 5 Fulton **Region 5** Coordinated **Public Transit -**Jasper **Human Services** Transportation Plan Update Miami Cass White Chal Region 5 Percent ZVH Benton Delphi 0% - 3% Carroll 3.1% - 8.3% 8.4% - 15.6% Howard 15.7% - 27.2% 27.3% - 49.1% Warren Michigantown Tippecanoe **Tipton** Clinton Clarks State L Mellott Source: U.S. Census Bureau American Community Survey Darlington 2019 5-Year Estimates Hamilton Fountain Boone 4.5 9 18 Montgomery Miles

Putnam

Hendricks

Marion

**Figure 6: Zero Vehicle Households** 

Vermillion

Parke

#### **COUNTY PROFILES**

#### **Benton 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 Benton County residents aged 65 and older are found in Fowler. These block groups have densities of older adults between 10 and 290.5 persons per square mile. Areas in and surrounding Oxford have moderate densities of persons age 65 and older (4.2 to 9.9). The remainder of the county has low to very low densities of persons age 65 and older.

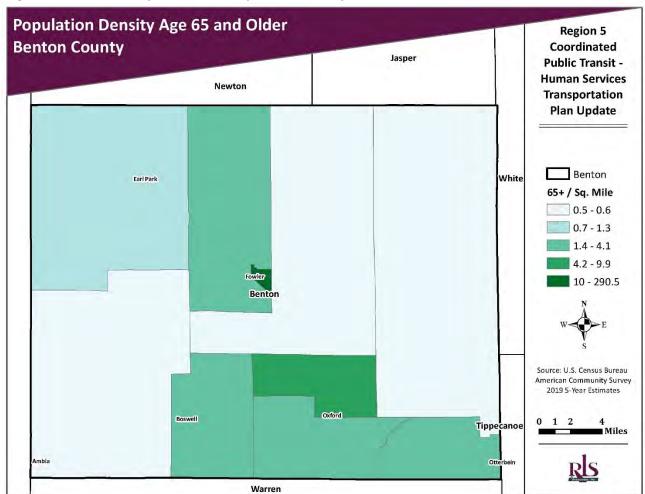


Figure 7: Benton County Older Adult Population Density

#### **Population by Age**

Figure 8 shows that the largest age cohort for Benton County is between the ages of 45 and 64. This age group is expected to be one of the largest groups in Benton 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



fourth largest age group in 2020, is expected to grow and be the largest by 2050. Currently, the smallest age group in Benton County is College Age individuals (20 to 24), who are expected to see little to no change between 2020 and 2050.

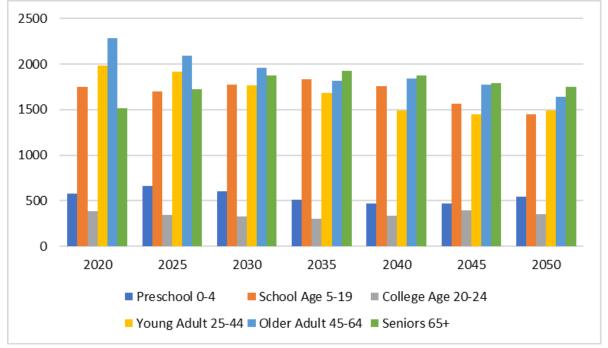


Figure 8: Benton County Population by Age

Source: 2019 ACS Five-Year Estimates

#### **Zero Vehicle Households**

Figure 9 shows the breakdown of vehicle availability by household within Benton County. Of all households in the county, only three 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 north of Fowler. Over 3.7 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 2.9 to 3.6 percent of zero vehicle households can also be found around Oxford and in eastern Benton County. The remainder of the county has moderate to very low percentages of zero vehicle households.

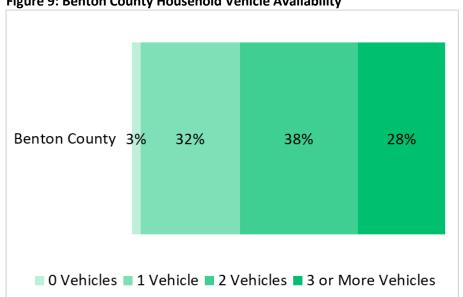


Figure 9: Benton County Household Vehicle Availability

Source: 2019 ACS Five-Year Estimates

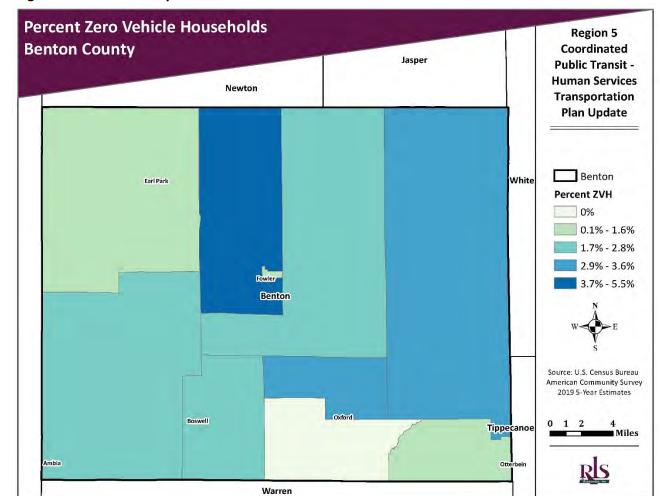


Figure 10: Benton County Zero Vehicle Households

#### **Unemployment**

Benton County's unemployment rate reached a high in 2020 of 5.2 percent, due to the COVID-19 pandemic. This was much 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 Benton County paralleled the national unemployment average trend and continually stayed lower than the U.S. rate and just under the Indiana rate over this period. Figure 11 illustrates a comparison of the unemployment rates in the county, state, and nation.

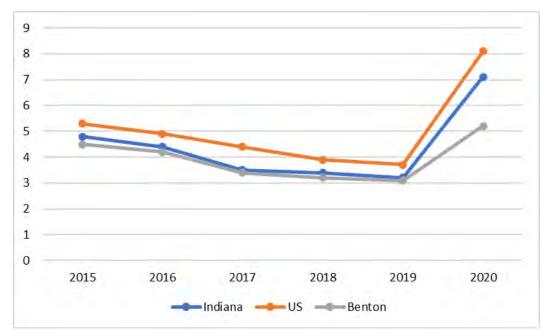


Figure 11: Benton County Comparison of Unemployment Rates

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 3,432 households in the county, 32 percent of them make less than \$35,000 per year. Of which, four percent earn less than \$10,000 per year.



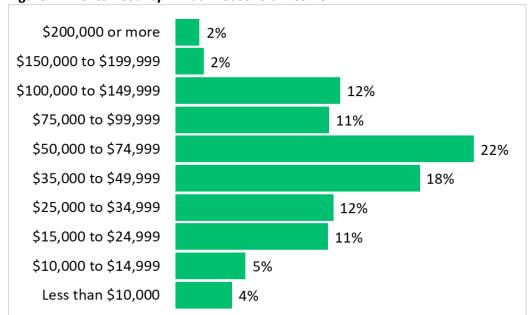


Figure 12: Benton County Annual Household Income

Source: 2019 ACS Five-Year Estimates

#### **Carroll 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 Carroll County residents aged 65 and older are in Delphi. These block groups have densities of older adults between 110.1 and 244.8 persons per square mile. Areas in Delphi, Flora, and north of Yeoman have moderate densities of persons age 65 and older (56 to 110). The remainder of the county has low to very low densities of persons age 65 and older.



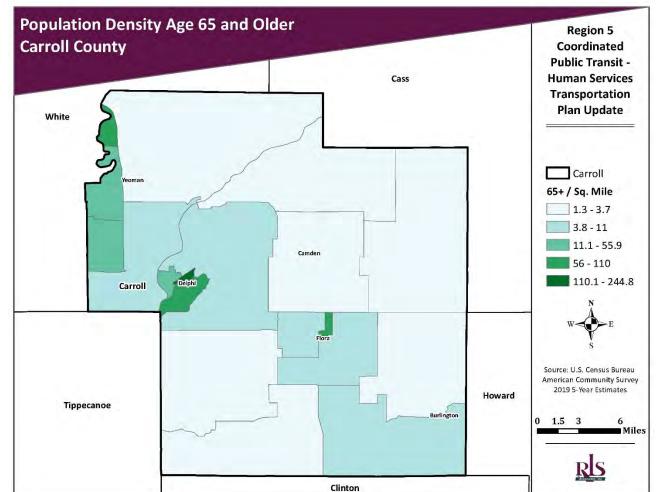


Figure 13: Carroll Older Adult Population Density

#### **Population by Age**

Figure 14 shows that the largest age cohort for Carroll County is Older Adults between the ages of 45 and 64. This age group is expected to be one of the largest groups in Carroll 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 largest in 2050. Currently, the smallest age group in Carroll County is College Age individuals (20-24), who are expected to see a slight decline between 2020 and 2050.

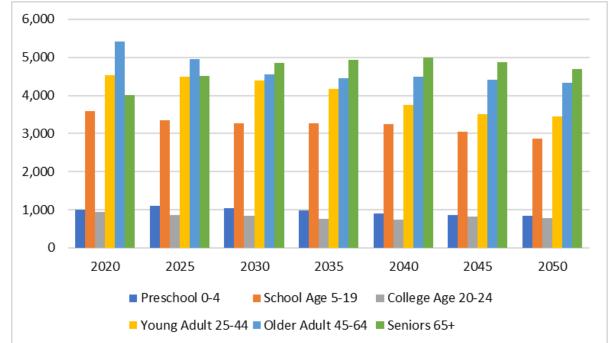


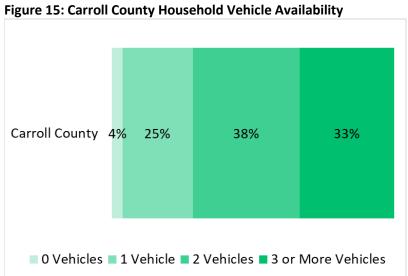
Figure 14: Carroll County Population by Age

Source: 2019 ACS Five-Year Estimates

#### **Zero Vehicle Households**

Figure 15 shows the breakdown of vehicle availability by household within Carroll County. Of all households in the county, four percent of the households do not have a vehicle and an additional 25 percent only have one vehicle.

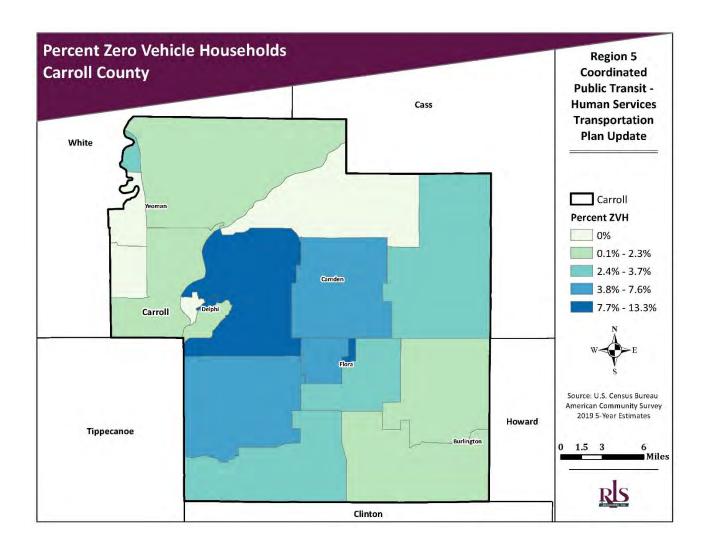
Figure 16 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are concentrated in and around Delphi and in Flora. Over 7.7 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 3.8 to 7.6 percent of zero vehicle households can also be found in Camden, around Flora, and in southwestern Carroll County. The remainder of the county has moderate to very low percentages of zero vehicle households.



Source: 2019 ACS Five-Year Estimates

Figure 16: Carroll County Zero Vehicle Households







#### **Unemployment**

Carroll County's unemployment rate reached a high in 2020 of six 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 Carroll County paralleled the national unemployment average trend, but stayed lower than the U.S. and Indiana rates during this period. Figure 17 illustrates a comparison of the unemployment rates in the county, state, and nation.

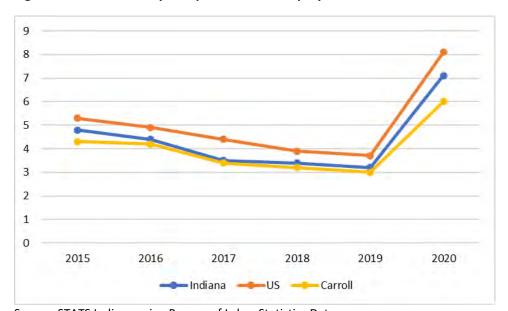


Figure 17: Carroll County Comparison of Unemployment Rates

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 8,002 households in the county, 30 percent of them make less than \$35,000 per year. Of which, only three percent earn less than \$10,000 per year.



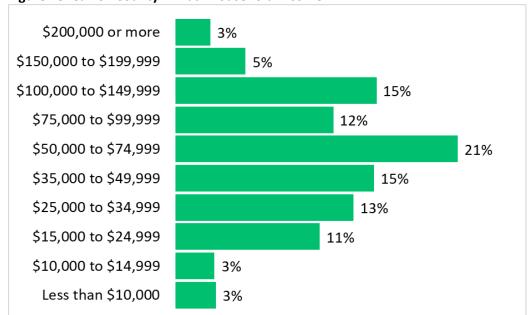


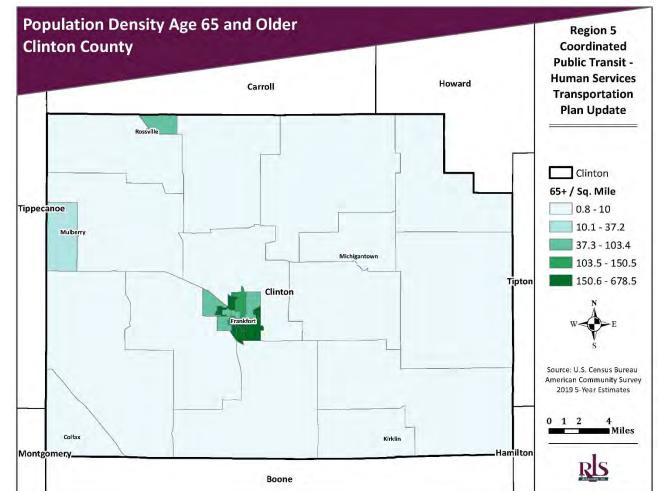
Figure 18: Carroll County Annual Household Income

#### **Clinton 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 Clinton County residents aged 65 and older are in and around Frankfort. These block groups have densities of older adults between 150.6 and 678.5 persons per square mile. Areas in and around Frankfort also have moderate densities of persons age 65 and older (103.5 to 150.5). The remainder of the county has low to very low densities of persons age 65 and older.





**Figure 19: Clinton County Older Adult Population** 

## **Population by Age**

Figure 20 shows that the largest age cohort for Clinton County is Older Adults between the ages of 45 and 64. This age group is expected to be one of the largest groups in Clinton County over the next 30 years. By 2050, Young Adults between the ages of 25 and 44 are projected to become the largest age group in the county. They will be closely followed by Older Adults, School Age children, and Seniors. Currently, the smallest age group in Clinton County is College Age individuals (20-24), who are expected to see little to no change between 2020 and 2050.

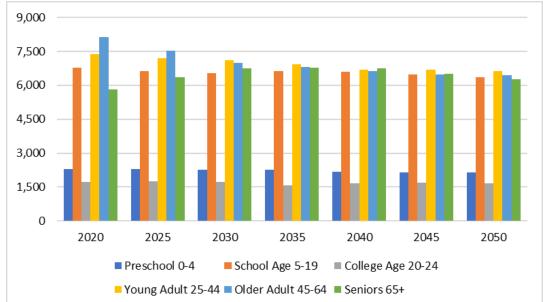


Figure 20: Clinton County Population by Age

Source: 2019 ACS Five-Year Estimates

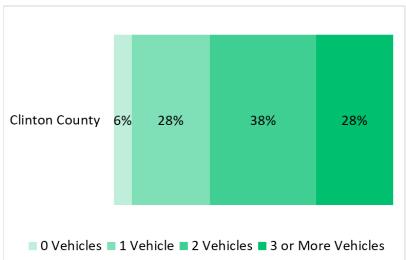
#### **Zero Vehicle Households**

Figure 21 shows the breakdown of vehicle availability by household within Clinton County. Of all households in the county, six percent of the households do not have a vehicle and an additional 28 percent only have one vehicle.

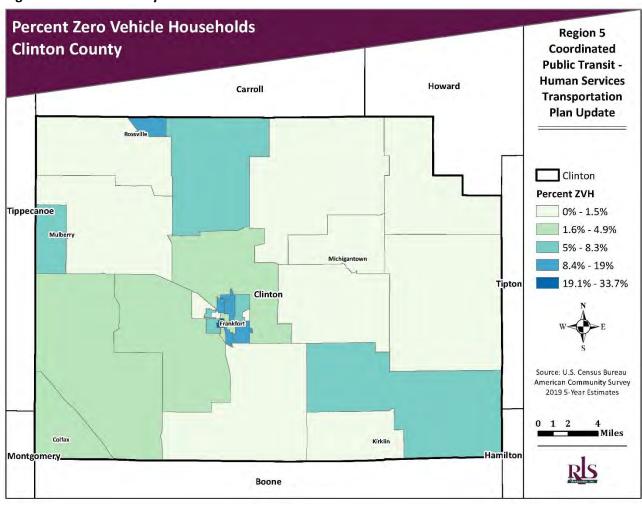
Figure 22 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimate data by block group. The block groups with the dark blue shading have the highest percentage of housing units with no available vehicles. The block group locations with the highest concentration of these households are concentrated in Frankfort. Over 19.1 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 8.4 to 19 percent of zero vehicle households can also be found in and around Frankfort, along with Rossville. The remainder of the county has moderate to very low percentages of zero vehicle households.



Figure 21: Clinton County Household Vehicle Availability



**Figure 22: Clinton County Zero Vehicle Households** 



#### **Unemployment**

Clinton County's unemployment rate reached a high in 2020 of 5.6 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 Clinton 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.

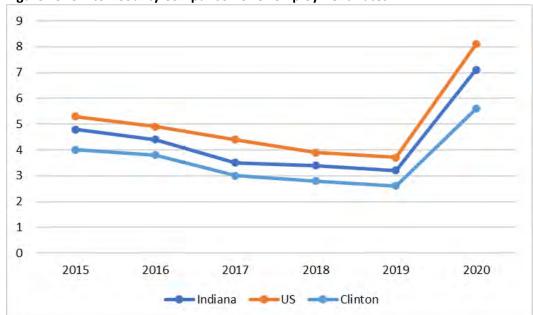


Figure 23: Clinton County Comparison of Unemployment Rates

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 12,033 households in the county, 31 percent of them make less than \$35,000 per year. Of which, three percent earn less than \$10,000 per year.

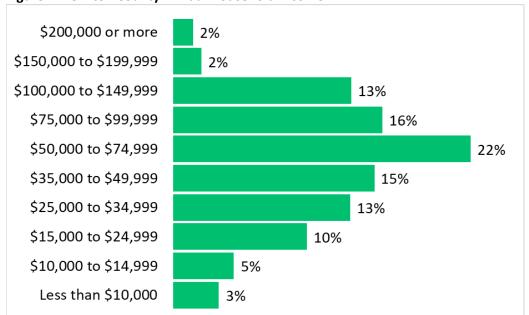


Figure 24: Clinton County Annual Household Income

#### **Fountain 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 Fountain County residents aged 65 and older are in and around Attica. These block groups have densities of older adults between 212.4 and 242 persons per square mile. Areas in and around Attica, Covington, and Veedersburg also have moderate densities of persons age 65 and older (16 to 212.3). The remainder of the county has low to very low densities of persons age 65 and older.



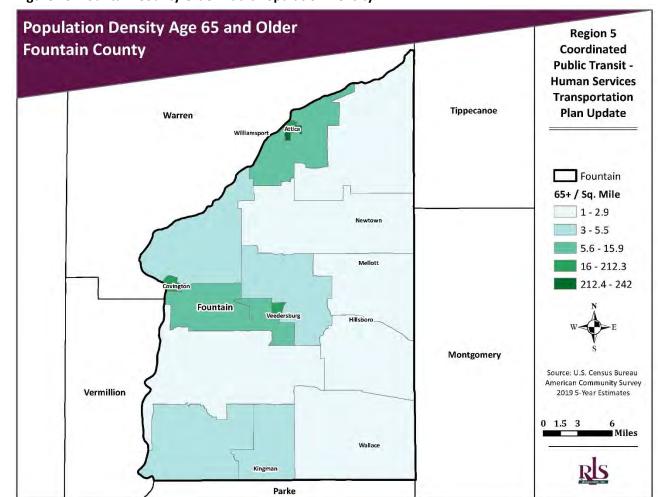


Figure 25: Fountain County Older Adult Population Density

## **Population by Age**

Figure 26 shows that the largest age cohort for Fountain 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 Fountain County are College Age individuals (20-24), who are expected to see a slight decline between 2020 and 2050.

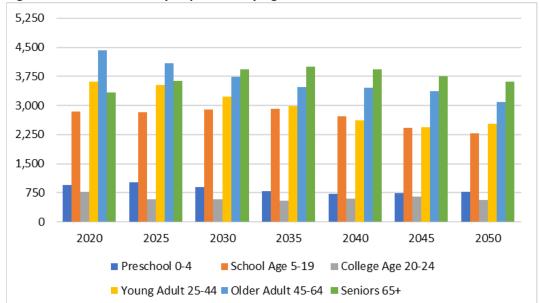


Figure 26: Fountain County Population by Age

#### **Zero Vehicle Households**

Figure 27 shows the breakdown of vehicle availability by household within Fountain County. Of all households in the county, five percent of the households do not have a vehicle and an additional 28 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 around Wallace in southeast Fountain County. Over 10.6 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 7.7 to 10.5 percent of zero vehicle households can also be found in Covington, Veedersburg, and around Newtown. The remainder of the county has moderate to very low percentages of zero vehicle households.



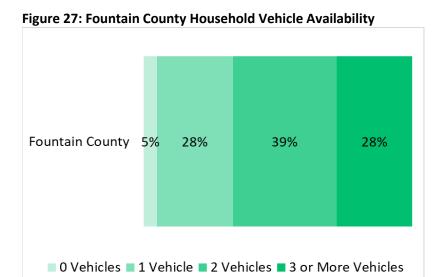
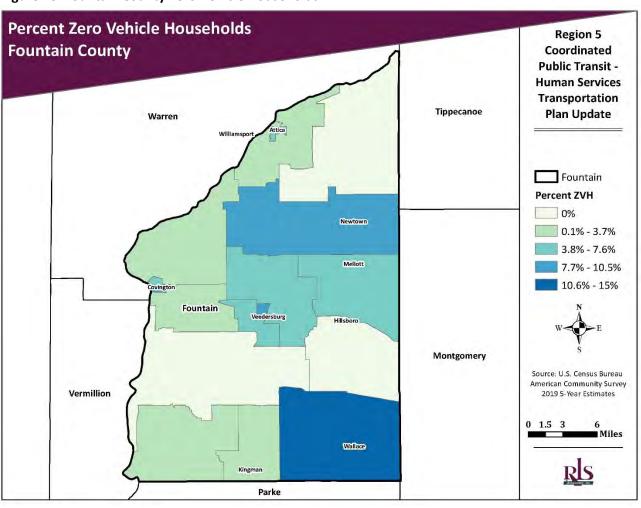


Figure 28: Fountain County Zero Vehicle Households



#### **Unemployment**

Fountain County's unemployment rate reached a high in 2020 of 6.5 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 Fountain County did not parallel the national unemployment average trend with having rates higher than the US and Indiana in 2015 and 2016 before a large decrease in 2017. Figure 29 illustrates a comparison of the unemployment rates in the county, state, and nation.

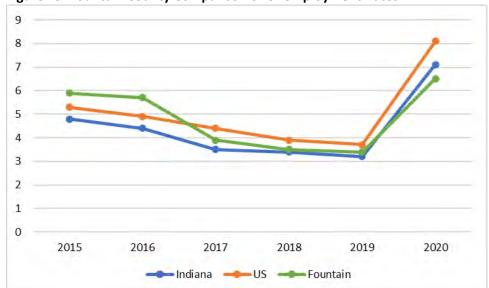


Figure 29: Fountain County Comparison of Unemployment Rates

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 6,974 households in the county, 31 percent of them make less than \$35,000 per year. Of which, only four percent earn less than \$10,000 per year.



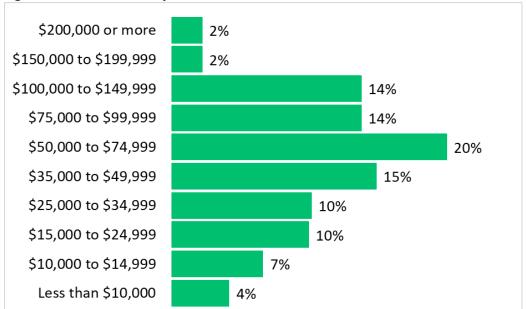


Figure 30: Fountain County Annual Household Income

Source: 2019 ACS Five-Year Estimates

#### **Montgomery 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 Montgomery County residents aged 65 and older are in Crawfordsville. These block groups have densities of older adults between 211.3 and 312.4 persons per square mile. Areas in and around Crawfordsville also have moderate densities of persons age 65 and older (93 to 211.2). The remainder of the county has low to very low densities of persons age 65 and older.



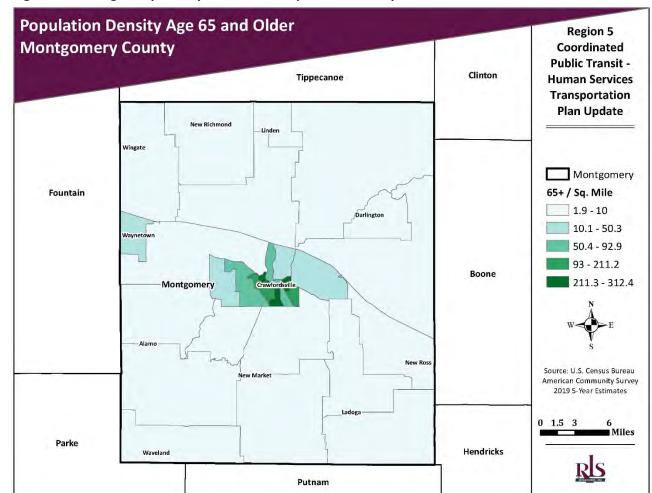


Figure 31: Montgomery County Older Adult Population Density

### **Population by Age**

Figure 32 shows that the largest age cohort for Montgomery County is between the ages of 45 and 64. This age group is expected to be one of the largest groups in Montgomery County over the next 30 years while declining over that time. While not being one of the larger groups in 2020, the Seniors (65+), who are the fourth largest age group in 2020, is expected to grow and be the largest by 2050. Currently, the smallest age group in Montgomery County is children under the age of 5, who are expected to see little to no change between 2020 and 2050.

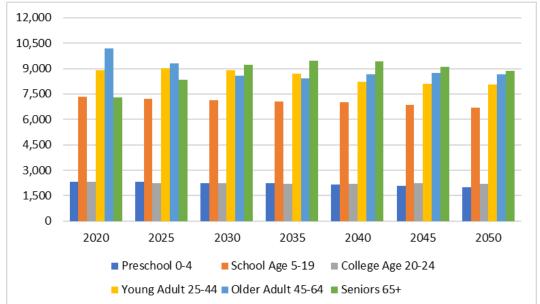


Figure 32: Montgomery County Population by Age

#### **Zero Vehicle Households**

Figure 33 shows the breakdown of vehicle availability by household within Montgomery County. Of all households in the county, only four percent of the households do not have a vehicle and an additional 30 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 Crawfordsville. Over 12.5 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 8 to 12.4 percent of zero vehicle households can also be found in and around Crawfordsville. The remainder of the county has moderate to very low percentages of zero vehicle households.



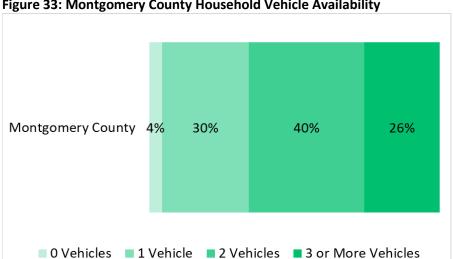
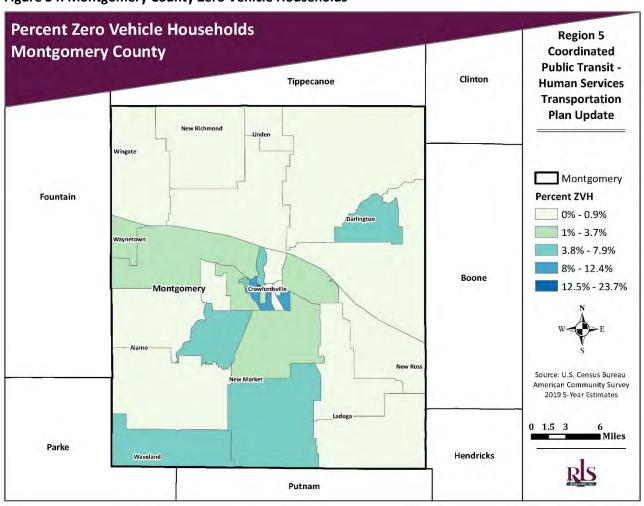


Figure 33: Montgomery County Household Vehicle Availability





#### **Unemployment**

Montgomery County's unemployment rate reached a high in 2020 of 5.2 percent, due to the COVID-19 pandemic. This was much 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 Montgomery County paralleled the national unemployment average trend, and was consistently lower than the US and state of Indiana's rate. Figure 35 illustrates a comparison of the unemployment rates in the county, state, and nation.

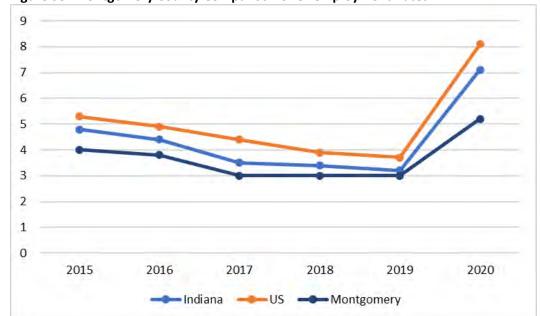


Figure 35: Montgomery County Comparison of Unemployment Rates

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 15,382 households in the county, 31 percent of them make less than \$35,000 per year. Of which, four percent earn less than \$10,000 per year.

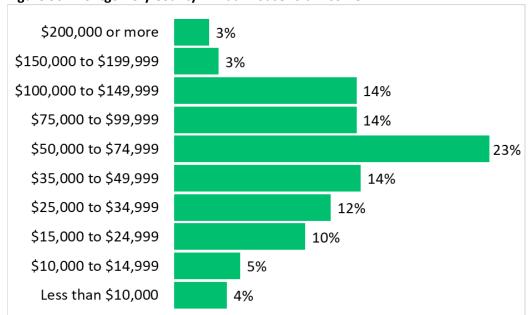


Figure 36: Montgomery County Annual Household Income

### **Tippecanoe County**

### **Older Adult Population**

Figure 37 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Tippecanoe County residents aged 65 and older are in and around Lafayette and West Lafayette. These block groups have densities of older adults between 452 and 875.6 persons per square mile. Areas in and around Lafayette and West Lafayette also have moderate densities of persons age 65 and older (279.7 to 451.9). The remainder of the county has low to very low densities of persons age 65 and older.



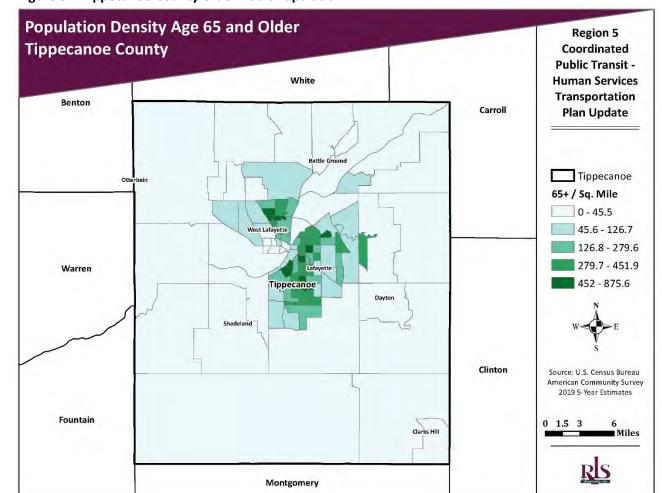


Figure 37: Tippecanoe County Older Adult Population

### Population by Age

Figure 38 shows that the largest age cohort for Tippecanoe County is Young Adults between the ages of 25 and 44. This age group is expected to be the largest group in Tippecanoe County over the next 30 years and is projected to continue to grow between 2020 and 2050. Currently, the smallest age group in Tippecanoe County is children under the age of five, who are expected to see a slight growth between 2020 and 2050.

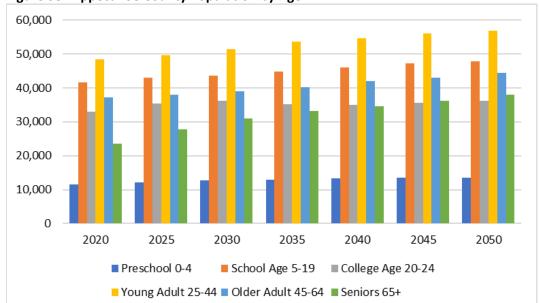


Figure 38: Tippecanoe County Population by Age

Source: 2019 ACS Five-Year Estimates

#### **Zero Vehicle Households**

Figure 39 shows the breakdown of vehicle availability by household within Tippecanoe County. Of all households in the county, eight percent of the households do not have a vehicle and an additional 36 percent only have one vehicle.

Figure 40 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 West Lafayette. Over 32.6 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 18.4 to 32.5 percent of zero vehicle households can also be found in and around Lafayette and West Lafayette. The remainder of the county has moderate to very low percentages of zero vehicle households.



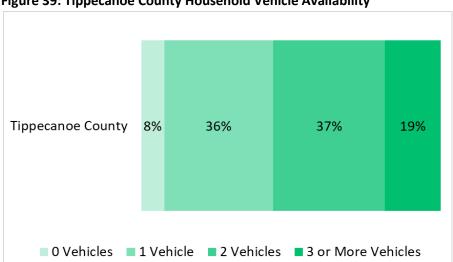
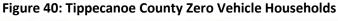
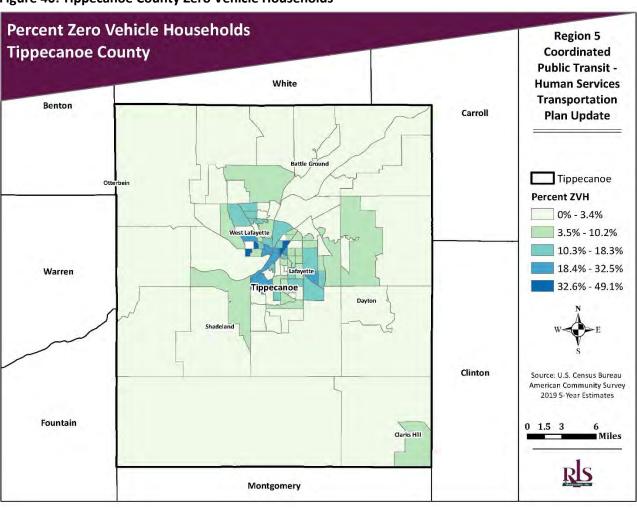


Figure 39: Tippecanoe County Household Vehicle Availability





#### **Unemployment**

Tippecanoe 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 Tippecanoe County paralleled the national unemployment average trend, and stayed lower than the US and Indiana rates. Figure 41 illustrates a comparison of the unemployment rates in the county, state, and nation.

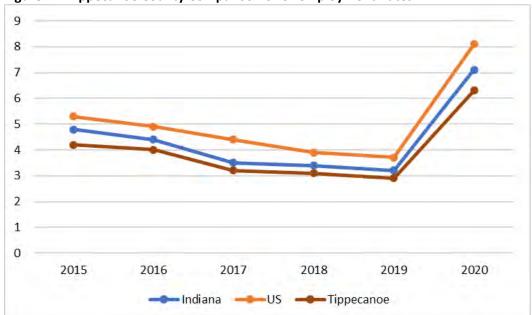


Figure 41: Tippecanoe County Comparison of Unemployment Rates

Source: STATS Indiana using Bureau of Labor Statistics Data

### **Household Income**

Figure 42 shows the annual household income breakdown by percentage of total households in the county. Out of 70,526 households in the county, 34 percent of them make less than \$35,000 per year. Of which, nine percent earn less than \$10,000 per year.

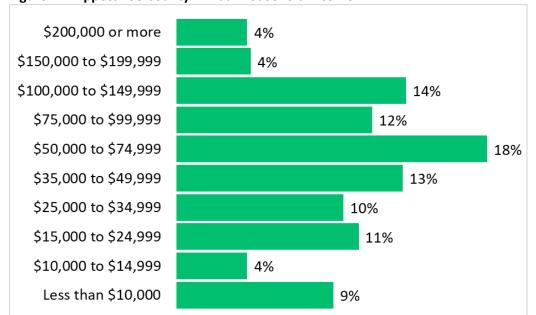


Figure 42: Tippecanoe County Annual Household Income

#### **Warren County**

#### **Older Adult Population**

Figure 43 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Warren County residents aged 65 and older are in and around Williamsport. These block groups have densities of older adults between 32.3 and 66.1 persons per square mile. Areas in and around Williamsport also have moderate densities of persons age 65 and older (4.1 to 32.2). The remainder of the county has low to very low densities of persons age 65 and older.



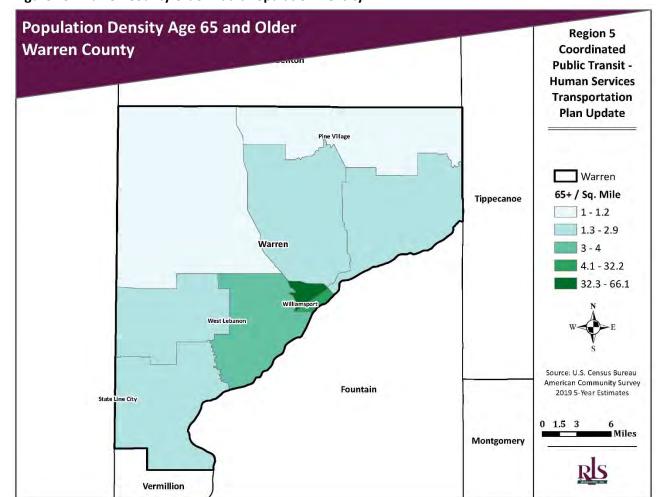


Figure 43: Warren County Older Adult Population Density

### **Population by Age**

Figure 44 shows that the largest age cohort for Warren 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 second largest age group in 2020, is expected to grow and be the largest by 2050. Currently, the smallest age group in Warren County are College Age individuals (20-24), who are expected to see little to no change between 2020 and 2050.

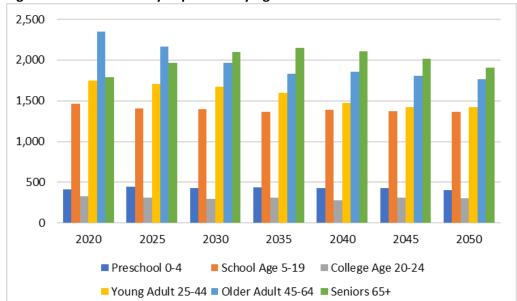


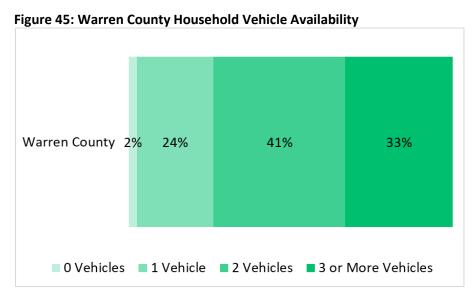
Figure 44: Warren County Population by Age

#### **Zero Vehicle Households**

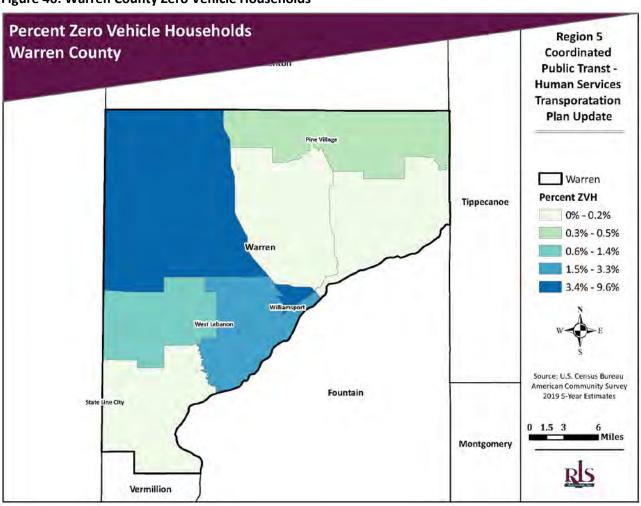
Figure 45 shows the breakdown of vehicle availability by household within Warren County. Of all households in the county, only two percent of the households do not have a vehicle and an additional 24 percent only have one vehicle.

Figure 46 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 around Williamsport and in northwestern Warren County. Over 3.4 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 1.5 to 3.3 percent of zero vehicle households can also be found in Williamsport and around West Lebanon. The remainder of the county has moderate to very low percentages of zero vehicle households.









### **Unemployment**

Warren County's unemployment rate reached a high in 2020 of 5.4 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 Warren County paralleled the national unemployment average trend, and stayed lower than the US and was lower than the Indiana rates after 2016. Figure 47 illustrates a comparison of the unemployment rates in the county, state, and nation.

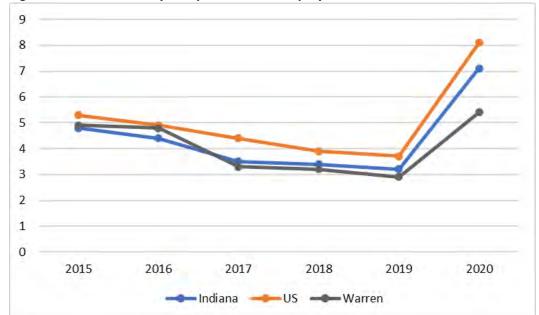


Figure 47: Warren County Comparison of Unemployment Rates

Source: STATS Indiana using Bureau of Labor Statistics Data

#### **Household Income**

Figure 48 shows the annual household income breakdown by percentage of total households in the county. Out of 3,357 households in the county, 26 percent of them make less than \$35,000 per year. Of which, only four percent earn less than \$10,000 per year.

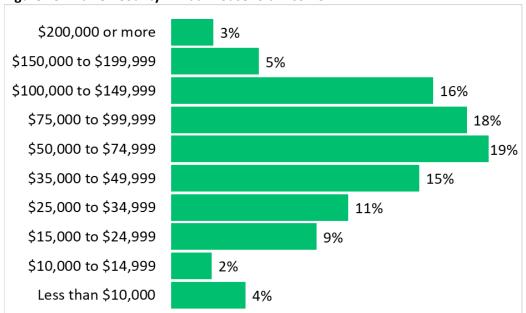


Figure 48: Warren County Annual Household Income

#### **White County**

### **Older Adult Population**

Figure 49 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of White County residents aged 65 and older are in Monticello. These block groups have densities of older adults between 232.8 and 346.3 persons per square mile. Areas in and around Monticello and Brookston also have moderate densities of persons age 65 and older (31.8 to 232.7). The remainder of the county has low to very low densities of persons age 65 and older.



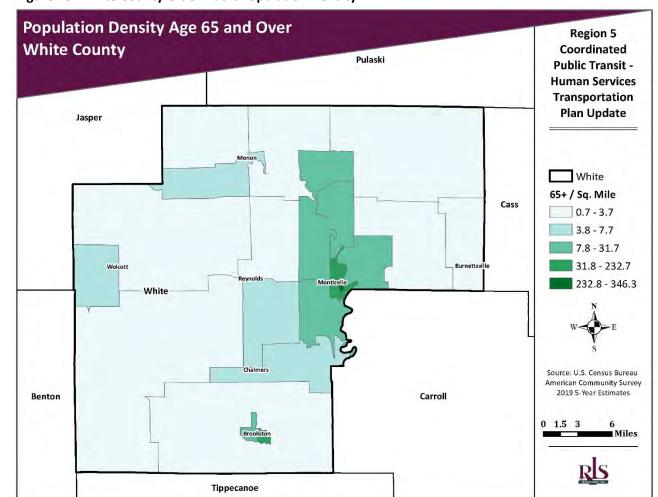


Figure 49: White County Older Adult Population Density

### **Population by Age**

Figure 50 shows that the largest age cohort for White County is between the ages of 45 and 64. This age group is expected to be one of the largest groups in White County over the next 30 years while declining over that time. While not being one of the larger groups in 2020, the Seniors (65+), who are the second largest age group in 2020, is expected to grow and be the largest by 2050. Currently, the smallest age group in White County are College Age individuals (20-24), who are expected to see a slight decrease between 2020 and 2050.

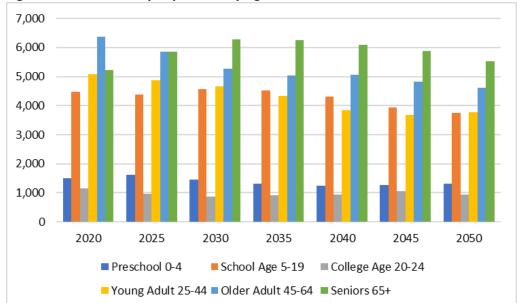


Figure 50: White County Population by Age

Source: 2019 ACS Five-Year Estimates

#### **Zero Vehicle Households**

Figure 51 shows the breakdown of vehicle availability by household within White County. Of all households in the county, only three percent of the households do not have a vehicle and an additional 30 percent only have one vehicle.

Figure 52 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 Monticello. Over 6.5 percent of households within these block groups have no vehicle available. Areas with a moderately high percentage ranging from 4.2 to 6.4 percent of zero vehicle households can also be found in and around Monticello, Monon, Reynolds, and northern White County. The remainder of the county has moderate to very low percentages of zero vehicle households.



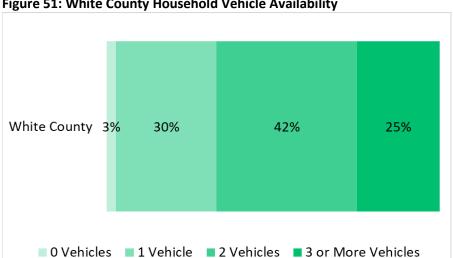
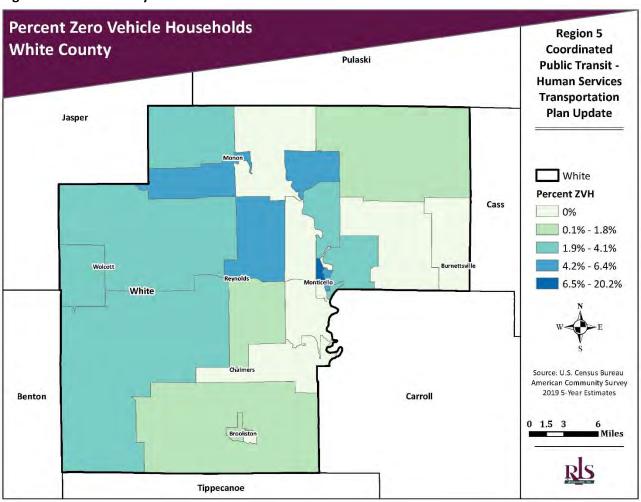


Figure 51: White County Household Vehicle Availability

Figure 52: White County Zero Vehicle Households



#### **Unemployment**

White County's unemployment rate reached a high in 2020 of 5 percent, due to the COVID-19 pandemic. This was much 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 White County paralleled the national unemployment average trend, and was consistently lower than the US and state of Indiana's rate. Figure 53 illustrates a comparison of the unemployment rates in the county, state, and nation.

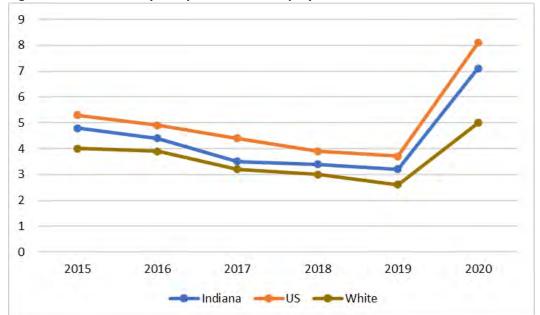


Figure 53: White County Comparison of Unemployment Rates

Source: STATS Indiana using Bureau of Labor Statistics Data

#### **Household Income**

Figure 54 shows the annual household income breakdown by percentage of total households in the county. Out of 9,879 households in the county, 28 percent of them make less than \$35,000 per year. Of which, four percent earn less than \$10,000 per year.

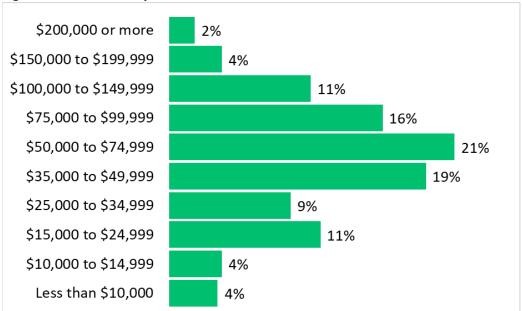


Figure 54: White County Annual Household Income

### 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 5 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**

In Region 5, public transit is available in Clinton and White Counties, the non-urbanized areas of Tippecanoe County, and portions of Carroll County. CityBus serves the cities of Lafayette and West Lafayette, including the Purdue University campus, in Tippecanoe County. Table 2 provides basic information about each system.



**Table 2: Region 5 Public Transportation Operators** 

	Area IV Public Transportation of Tippecanoe County	Clinton County Public Transit	White County Public Transit	CityBus
Operator/ Contact Information	Area IV Agency on Aging 660 N. 36th St. Lafayette, IN 47905 (765) 447-7683 areaivagency.org/tran sportation	Paul Phillipe Resource Center 401 W. Walnut St. Frankfort, IN 46041 (765) 659-4060 clintonpprc.weebly.co m/transportation.htm I	White County Council on Aging 116 E. Marion St. Monticello, IN 47960 (574) 583-9119 whitecountyseniorser vices-publictransit.com/transit.html	Greater Lafayette Public Transportation Corporation 1250 Canal Rd. Lafayette, IN 47902 (765) 423-2666 gocitybus.com
Service Area	Non-urbanized areas of Tippecanoe County	Clinton County	White County; Adams and Jefferson Townships in Carroll County	Lafayette, West Lafayette, and Purdue University
Days/Hours of Service	Monday – Friday 8:30 AM – 5:30 PM	Monday – Friday 7 AM – 5 PM Saturday 10 AM – 1 PM	Monday – Friday 8 AM – 4 PM	Monday – Wednesday 6 AM – 12:40 AM Thursday – Saturday 6 AM – 2:42 AM Sunday 8:45 AM – 6:40 PM
Ridership*	2019: 3,028 2020: 205	2019: 44,285 2020: 26,417	2019: 12,808 2020: 9,653	2019: 5,099,775 2020: 2,324,834
Fare/Donation Structure	\$5 in-county \$10 county-to-county Donation-based for Age 60+	Suggested donation for round trips: \$8 local \$15 outside Frankfort \$20 Lebanon \$25 Lafayette	Suggested donation: \$1 one-way within Monticello Additional \$.40 per mile outside Monticello	\$1 \$0.50 for older adults and people with disabilities \$2 Demand Response rides
Funding Sources	FTA Section 5311, PMTF, Medicaid, Older Americans Act Title III-B, Community Services Block Grant	FTA Section 5311, PMTF, Older Americans Act Title III-B, Clinton County, City of Frankfort	FTA Section 5311, PMTF, Older Americans Act Title III-B, White County, United Way, City of Monticello	FTA Section 5307, PMTF, Local government revenues
Operating Budget (2020)	\$93,174	\$411,024	\$267,729	\$11,880,099
Fleet by Location and Wheelchair Accessibility	Lafayette: 4 (All WC-Accessible)	Frankfort: 12 (All WC-Accessible)	Monticello: 6 (All WC-Accessible)	Lafayette: 87 (All WC-Accessible)
Service Type(s)	Demand Response	Demand Response	Demand Response	Fixed Route and Demand Response



	Area IV Public Transportation of Tippecanoe County	Clinton County Public Transit	White County Public Transit	CityBus	
Scheduling/	Manual	Routematch	Manual	Not reported	
Dispatching					
Trip Denials	None	About 25 per year	Very few each year	N/A	

# **HUMAN SERVICE TRANSPORTATION PROVIDERS**

Human service agencies located in Region 5 that provide demand response transportation to specific groups are shown in Table 3. 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.



**Table 3: Region 5 Human Service Providers** 

	Carroll County Senior and Family Services	Area IV Agency on Aging	Abilities Services, Inc.	Sunshine Vans -City of Crawfordsville	CDC Resources, Inc.	MAC Van
Contact Information	311 N. Washington St. Delphi, IN 46923 (765) 564-2772 carrollcosfs.org/se rvices	660 N. 36th St. Lafayette, IN 47905 (765) 447-7683 <u>areaivagency.org/t</u> <u>ransportation</u>	1237 Concord Rd. Crawfordsville, IN 47933 (765) 362-4020 abilitiesservice s.org/	922 E. South St. Crawfordsville, IN 47933 (765) 364-5173 crawfordsville.net/topic /index.php?topicid=158 &structureid=13	5053 Norway Rd. Monticello, IN 47960 (574) 583-8227 cdcresources.org	Community Action Program Inc. of Western IN 1325 2nd St. Covington, IN 47932 (765) 793-3000 capwi.org/services /elder-adults/
Service Area	Carroll County	Benton and Tippecanoe Counties	Lafayette, Crawfordsville, and Frankfort	Montgomery County	Benton, Carroll, Jasper, Newton, and White Counties	Fountain and Warren Counties
Eligibility	Older adults (55+) and people with disabilities	Medicaid beneficiaries	Agency clients	Older adults (60+) and people with disabilities	Agency clients	Older adults (60+), people with disabilities, and Medicaid beneficiaries
Days/Hours of Service	Monday – Friday 9 AM – 3:30 PM	Monday – Friday 8:30 AM – 5:30 PM	Not reported	Monday – Friday 9 AM – 3 PM	Not reported	Monday – Friday 7 AM – 5 PM
Ridership (2020)	2,180	1,430	Not reported	4,846	Not reported	Not reported
Fare/Donation Structure	Suggested donation	\$5 in-county \$10 county-to- county	Not reported	In Crawfordsville: One- way: \$4/Round Trip: \$7 (Wheelchair \$6/\$10) In County: One-Way Trip: \$7/Round Trip: \$12 (Wheelchair \$10/\$15)	Not reported	Not reported



	Carroll County Senior and Family Services	Area IV Agency on Aging	Abilities Services, Inc.	Sunshine Vans -City of Crawfordsville	CDC Resources, Inc.	MAC Van
Funding Sources	Medicaid, Donations	Medicaid		Donations, Montgomery Co. United Fund, Montgomery Co. Community Foundation, Older Americans Act Title III-B, City of Crawfordsville		Medicaid, Donations
Operating Budget	Not reported	Not reported	Not reported	Not reported	Not reported	Not reported
Fleet by Location and Wheelchair Accessibility	Delphi: 12 (All WC- Accessible)	Lafayette: 6 (All WC-Accessible)	7* (All WC- Accessible)	Crawfordsville: 9* (All WC-Accessible)	19* (All WC- Accessible)	Covington: 7 (5 WC-Accessible)

<sup>\*</sup>Represents FTA Section 5310-funded vehicles only



#### **NEEDS ASSESSMENT**

#### **OVERVIEW**

RLS & Associates, Inc. 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 MEETING

A virtual meeting was facilitated by RLS & Associates, Inc. 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 inperson meeting. The meeting was held on March 31, 2021 from 12:00 PM to 1:30 PM.

Invitations to the meeting were distributed via the U.S. Postal Service to more than 90 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:

- ♦ The Benton Review
- ♦ Carroll County Comet
- ♦ Clinton County Daily News
- ♦ The Fountain County Neighbor
- ♦ Journal Review
- ♦ The Paper of Montgomery County
- ♦ The Review Republican
- ♦ Herald Journal

A list of all organizations invited to the meeting and their attendance/non-attendance status is provided in the Appendix. Organizations that were represented at the meetings are listed below:

- ♦ Ability Services
- ♦ Carol County Senior and Family Services
- ♦ Clinton County Family YMCA
- ♦ Franciscan Health



- ♦ MAC Van for Warren and Fountain Counties
- ♦ Noble Transit System
- ♦ Paul Phillippe Resource Center
- ♦ White County Council on Aging
- ♦ INDOT Office of Transit

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
Serve more employment	Transportation to factory	Low	2
destinations.	employment in Frankfort.		
Unmet medical and shopping trip	Transportation to out-of-county	High	2
needs, particularly for senior	medical appointments.		
citizens.			



2017 Need/Gap	2021 Need/Gap	2021 Priority Level	Goal	
Affordability of public transit in Carroll, Benton, Montgomery, and Warren Counties.	Transportation is not available for the general public in Carroll, Fountain, Benton, Montgomery, and Warren Counties.	Medium	2	
Expanded weekday and weekend hours of service to meet employment needs.	Serving employment destinations that have longer hours than current transit hours (early/late shift workers).	Medium	2	
	Transportation during the late evenings and on weekends, particularly to accommodate urgent needs like hospital discharges or jail releases.	Medium	2	
Expanded use of local providers to serve Medicaid eligible passengers.	Customers and transportation providers have difficulty with the Medicaid non-emergency transportation brokerages.  Transportation service and administration/payment are inconsistent.		5	
Expand the availability of accessible vehicles.	Additional capacity in the region's transportation systems to provide more rides.	Medium	2, 3, 5	
Additional coordination and sharing of information and resources as an effort to fill gaps.	Community awareness and education about using the region's transportation providers.	Medium	4, 5	
	Shortage of individuals who want to work as drivers.	High	1	

## PROGRESS SINCE THE 2016-2017 COORDINATED PLAN AND CONTINUING CHALLENGES TO COORDINATED TRANSPORTATION

As shown in Table 4, there are multiple unmet needs that were identified in 2017 that still 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 5 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 2021 public and stakeholder meeting as well as in 2013 and 2016, 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.

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 34 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 34 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:

Benton: 0% (0 surveys)Carroll: 0% (0 surveys)

♦ Clinton: 55.88% (19 surveys)

Fountain: 0% (0 surveys)
Montgomery: 0% (0 surveys)
Tippecanoe: 2.94% (1 surveys)

Warren: 0% (0 surveys)White: 41.18% (14 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 55, the respondents used all forms of transportation available as response choices, as well as other modes. Those who selected "Other" specified that their caregivers provided transportation.



Public transit, including bus systems, rail lines, ADA paratransit, or demand response/dial-a-ride 85% Rely on family/friends for rides 50% Drive your own vehicle 18% Transportation offered by volunteer or faith-based groups Medicaid Non-emergency medical transportation (NEMT) Demand response/dial-a-ride services that are for specific groups only Carpool or vanpool to work Walking Other (please specify) -3% Bicycling -3% inter-city bus, such as Greyhound or Megabus -Uber/Lyft -3%

Figure 55: 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 on Saturday and later in the evenings. All responses to this question are displayed in Figure 56.

Scooter/Moped 0%



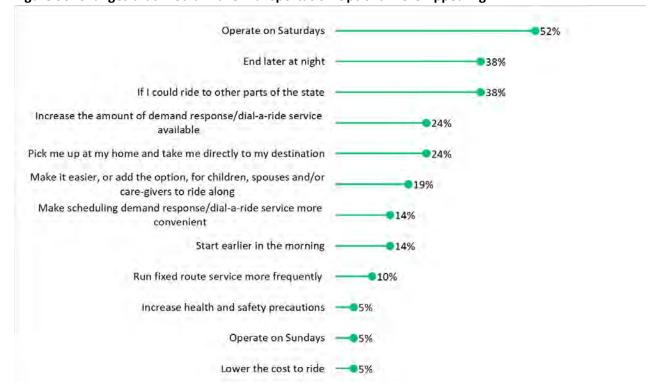


Figure 56: Changes that Would Make Transportation Options More Appealing

#### **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 57. The most difficulty was indicated for getting to mental health care and dental care, multiple respondents selecting 'sometimes', 'frequently', or 'always difficult'.

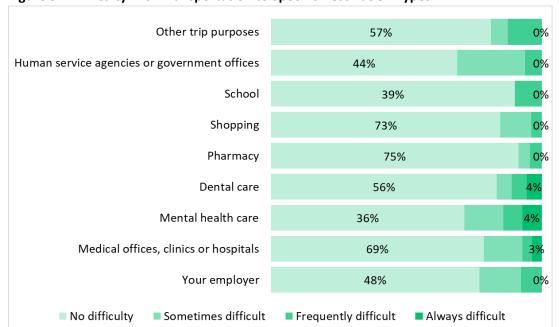


Figure 57: Difficulty with Transportation to Specific Destination Types

#### **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 58, most of the respondents who need to travel outside of the county need to for medical care. For those who need to travel outside the county for 'other reasons' their responses were to visit friends and for medical care.

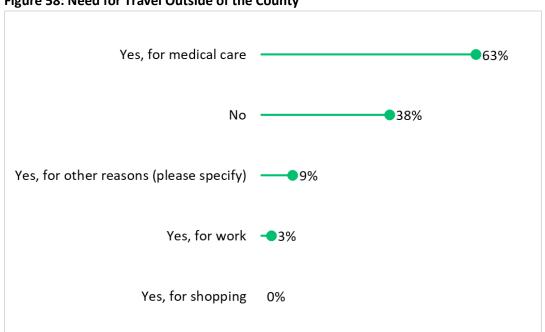
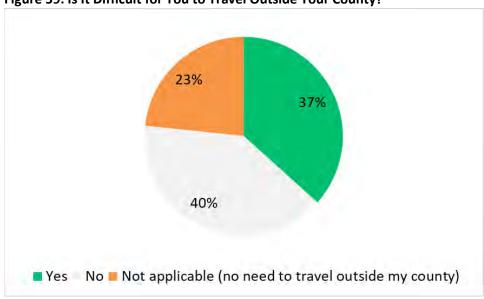


Figure 58: Need for Travel Outside of the County

Respondents also indicated whether it was difficult to travel outside of the county (see Figure 59), and if yes, to provide more information in an open-ended response. Thirty-seven 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)
- Medical/age reasons (3)
- No driver's license
- Cannot book with SE Transit

Figure 59: 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 34 total respondents, 12 of them provided input, which can be found in the Appendix.

#### **Respondent Demographics**

Demographic questions on the survey included age group (Figure 60), status as an individual with a disability that requires a mobility device (Figure 61), and ZIP code (Figure 62).



Figure 60: Age Ranges



Figure 61: Disability Status that Requires a Cane, Walker, Wheelchair, or Other Device, or a Service Animal

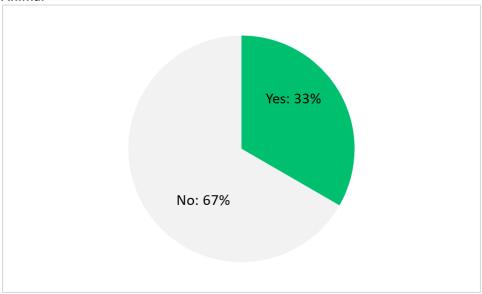
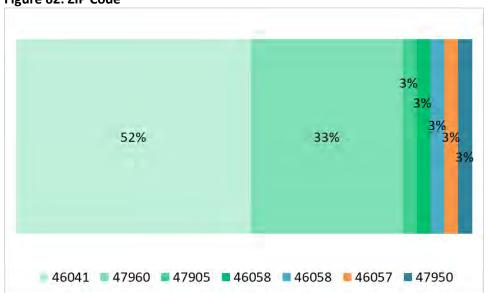


Figure 62: ZIP Code



#### 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 five 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: Identify Cost-Efficient Strategies and/or New Funding Sources That Can Be Maximized Through Coordinated Activities

Goal 4: Increase Public Awareness of Available Transportation Services Among Community Stakeholders

**Goal 5: 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: Medium** 

Counties Included: All Region 5 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. In an agency has need for drivers of larger vehicles, the 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 5 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.

#### Implementation Budget:

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.
- 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 meetings 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, releases from jail, and 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 expand the opportunity for transportation across city and county lines if feasible; for providers that do not exit their county boundaries, extending the geographical boundaries of trip eligibility for even one day per week would help individuals who need to travel longer distances.

**Priority:** Medium

Counties Included: All Region 5 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:**

- ♦ Additional revenue hours/miles of service provided.
- New hours and days of service provided.
- ♦ New locations served by providers.
- Number of hospital discharge trips accommodated by transportation agencies.
- ♦ Ridership on expanded services.

#### Strategy 2.2 Establish Employment Transportation to Serve Manufacturing/Logistics Workers



Bus service to employers in areas with significant manufacturing or logistics employment, Frankfort in Clinton County, 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 operate an 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, a zoned demand-response or deviated route would be a more effective service model than a fixed route.

**Priority:** Medium

Counties Included: Region 5 counties with concentrations of major employers with labor needs

**Responsible Parties:** Interested transportation providers and local employment 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>:

Staffing Implications:

Long-Term (2-4 years)

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.

#### Strategy 2.3: Offer Public Transit in Benton, Carroll, Fountain, Montgomery, and/or Warren Counties

Transportation is not available to the general public in Benton, Carroll, Fountain, Montgomery, or Warren Counties. County- or city-based organizations are meetings some of the need in these areas through services that transport older adults and people with disabilities. Public transit would ensure that younger, non-disabled individuals and families also have access to transportation.

This strategy should be led by transportation stakeholders in the affected counties as well as regional organizations like Area IV Agency on Aging and Community Action Programs and Community Action Program of Western Indiana, which both operate transportation within counties in their service areas.

If funding was secured, there are various providers who may be willing to expand from other areas into the unserved counties, or, a local human service transportation provider could expand their services to the general public. Potentially, a coordinating entity could administer the transportation program and contract with multiple providers. There are multiple options for structuring a transportation program. If stakeholders would like to understand more about these options, they may want to consider commissioning a transportation feasibility study.



**Priority:** Medium

Counties Included: Benton, Carroll, Fountain, Montgomery, and/or Warren Counties

**Responsible Parties:** Representatives from human service agencies with clients with transportation needs, human service transportation providers, regional organizations, and other local transportation stakeholders.

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

Long-Term (2 – 4 years) Staffing needs are minimal during the visioning and

planning stages. Operating transportation would require

drivers and administrative staff.

<u>Implementation Budget</u>: To operate service, the costs would depend on the specific operator and the amount of service provided. Small county-based transportation programs typically cost \$200,000 to \$400,000 in annual operating expenses. A feasibility study would cost between \$20,000 and \$40,000.

<u>Potential Funding Sources</u>: FTA Section 5311; Human service transportation contracts; local charitable or governmental funding.

#### **Performance Measures:**

- ♦ Initiation of new public transit services.
- Ridership on new public transit service.

## GOAL 3: IDENTIFY COST-EFFICIENT STRATEGIES AND/OR NEW FUNDING SOURCES THAT CAN BE MAXIMIZED THROUGH COORDINATED ACTIVITIES

#### Strategy 3.1: Hold a Regional Workshop for Coordinated Plan Implementation

Strategy 3.1 will help stakeholders implement projects that meet the identified needs of expanding service capacity, extending hours of operation, adding employment transportation, initiating public transit in unserved counties, and other unmet needs in Region 5.

Members the Regional Transportation Advisory Committee (RTAC) will facilitate and lead the region through the implementable steps identified in this plan to address the gaps and unmet needs in transportation services for all counties. The RTAC will provide leadership through clarifying policy requirements and restrictions. Meeting discussions could focus on opportunities to share trips, purchase service from transportation operators, joint procurement and administrative activities that will result in more efficient use of operating funds, an involve new stakeholders, like healthcare providers and employers, in transportation discussions.



One of the initial tasks for the committee will be to identify new operating dollars or re-direct existing operating dollars to expand the driver workforce. This committee can accomplish goals by networking and sharing information to support participating counties. The RTAC should continue to meet quarterly.

**Priority:** Medium

Counties Included: All Region 5 counties

**Responsible Parties:** Regional Transportation Advisory Committee members

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

Immediate and Ongoing Staff time from all stakeholder agencies and

leadership from at least one agency 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:**

- RTAC includes representation from transportation providers and representatives from the general public from each county.
- RTAC conducts a Coordinated Plan implementation workshop.
- ♦ RTAC implements at least one new coordination activity per year. Activities could range from shared information, implementing a driver recruitment campaign (Strategy 1.2), collaborating on public awareness (Strategy 3.1), or investigating the potential for an EID to fund employment transportation (Strategy 2.2).

## GOAL 4: INCREASE PUBLIC AWARENESS OF AVAILABLE TRANSPORTATION SERVICES AMONG COMMUNITY STAKEHOLDERS

### Strategy 4.1 Educate Community Stakeholders about Available Public and Human Service Transportation

Some community stakeholders in Region 5 reported a lack of familiarity with local transportation options, and some transportation providers felt that it was challenging to raise community awareness of their services. 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 service providers, running online or print advertisements, or distributing brochures.



Potentially, transportation providers in Region 5 (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, veterans van programs and senior transportation.

**Priority:** High

Counties Included: All Region 5 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 5: INCREASE PARTICIPATION IN INITIATIVES TO ENHANCE MOBILITY**

# <u>Strategy 5.1 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 5 counties

Responsible Parties: Public and human service transportation providers

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

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 5 representatives who attend meetings of INCOST and other statewide organizations.
- Number of contacts with state-level policymakers about transportation needs and funding concerns.

#### **Strategy 5.2 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: Medium** 

Counties Included: All Region 5 counties

Responsible Parties: Public and human service transportation providers

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

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 5.3 Track and Communicate Concerns About Brokered Service Delivery to FSSA and INDOT

During many of the 2021 regional Coordinated Plan public and stakeholder meetings, attendees spoke of problems with the statewide Medicaid non-emergency medical transportation (NEMT) brokerage, including 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 <a href="https://www.southeastrans.com/facilities-file-a-complaint-form">https://www.southeastrans.com/facilities-file-a-complaint-form</a>.

**Priority:** Medium

Counties Included: All Region 5 counties

**Responsible Parties:** Providers of NEMT

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

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



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 Federal transportation law 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** 

	Table 5: Implementation Key			
Goal 1: Maintain Existing Transportation Services for Human Service Agency Clients and the General				
		Public		
Page	Strategy	Objective/Strategy Description	Priority	
Number	Number		,	
68	1.1	Replace and Maintain Vehicles through FTA/INDOT Funding and		
		Local Sources		
69	1.2	Develop Local Tools for Driver Recruitment and Retention	Medium	
Goa	I 2: Expand	Transportation Service for Older Adults, People with Disabilities, Low-	Income	
		Individuals, and the General Public		
Page	Strategy	Objective/Strategy Description	Priority	
Number	Number	Objective/Strategy Description	Priority	
70	2.1	Expand the Capacity of Existing Transportation Providers	Medium	
71	2.2	Establish Employment Transportation to Serve Mediur		
		Manufacturing/Logistics Workers		
72	2.3	Offer Public Transit in Benton, Carroll, Fountain, Montgomery, Medium		
		and the Manney Consulting		
		and/or Warren Counties		
Goal 3: Id	dentify Cost	<ul><li>-Efficient Strategies and/or New Funding Sources That Can Be Maximi</li></ul>	zed Through	
Goal 3: Id	dentify Cost	·	zed Through	
Goal 3: Id	dentify Cost	-Efficient Strategies and/or New Funding Sources That Can Be Maximi Coordinated Activities		
	·	-Efficient Strategies and/or New Funding Sources That Can Be Maximi	zed Through Priority	

### Table continues on following page

	Goal 4: Increase Public Awareness of Available Transportation Services Among Community			
		Stakeholders		
74	4.1	Educate Community Stakeholders about Available Public and Human	High	
		Service Transportation		
	Goal 5: Increase Participation in Initiatives to Enhance Mobility			
76	5.1	Participate Actively in the Indiana Council on Specialized	Medium	
		Transportation (INCOST) and Other Statewide Organizations		
77	5.2	Educate Local Elected Officials About Transportation Needs	Medium	
78	5.3	Track and Communicate Concerns About Brokered Service Delivery	Medium	
		to FSSA and INDOT		



## Coordinated Public Transit - Human Services Transportation Plan

Region 5: Benton, Carroll, Clinton, Fountain, Montgomery, Tippecanoe, Warren and White Counties

**Appendix – Outreach Documentation** 









Prepared for Indiana Department of Transportation

December, 2021

Prepared by: RLS & Associates, Inc.

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#### COORDINATED PLAN OUTREACH CHECKLIST

#### Focus Groups, Workshops, and Public Meetings

Stakeholder Focus Group Meetings (held on Zoom)

Date: March 31, 2021 from 12:00 PM to 1:30 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:
  - The Benton Review
  - Carroll County Comet
  - Clinton County Daily News
  - The Fountain County Neighbor
  - Journal Review
  - The Paper of Montgomery County
  - The Review Republican
  - Herald Journal

Number of Attendees:

- 9
- ✓ 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: 33

#### **Other Outreach Efforts**

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

### **Organization Contact List**

Contact Person	Organization
David Diener	White County Commissioners Office
Alice Yates	Sunshine Vans
Anthony Fattore	Waveland Area IV
Ashley Wilson	The Carroll Co. COA Inc.
Att. Randy Mitchell	White County Economic Development Organization
Att. Superintendent	North White School Corp.
ATTN: Director	Omni Express
ATTN: Director	Carroll County Council on Aging
ATTN: Director	Garden Spot Express
ATTN: Director	Wesley Manor, Inc.
ATTN: Director	Reach Out Community Van
ATTN: Director	White County Senior Center
ATTN: Director	White County United Way
ATTN: Director	Monticello Assisted Living & Healthcare
ATTN: Director	Twin Lakes Village
ATTN: Director	White County United Way
ATTN: Director	CARS
ATTN: Director	Boswell Area Transit, Volunteer Public Transportation
ATTN: Director	M.A. C. Van CAP, Inc.
ATTN: President	Integrity Care
Bert Weaver	Clinton County Commissioners
Brenda Daly	Carroll County Council on Aging
Bryan Berry	Benton County Commissioner's Office
Chanin Daily	Green Hill Manor
Chris McBarnes	Mayor of Frankfort
Chris Sampson	Clinton Prairie School Corp.
Cindy Orem	PPRC
Cory Boyles	Clinton County Commissioners
Dan Sichting	Frontier School Corporation
David Brown	Waveland Area IV
Dawn Layton	Paul Phillippe Resource Center, Inc.
Dean Ramsey	Clinton House Health & Rehab
Dennis Goodman	Benton County Veterans' Service Office
Donna Lyon	Community Action Program Inc of Western Indiana
Donya Tirpak	White County Commissioners
Edwin Buswell	KIRPC
Elva James	Waveland Area IV
Fawn Johnson	City of Crawfordsville
Gale Spry	White County Council on Aging, Inc.

Contact Person	Organization	
Greg Briles	Delphi Community School Corp.	
Gregg Hoover	Benton Community School Corp.	
Jacque Kauffman	PPRC	
James Calloway	Imperial Royal Tours	
Janet Dold	Monticello Chamber of Commerce	
Jeff Florian	Lafayette Limo, Inc.	
John Brown	District 1 Carroll County Commissioner	
John Heimlich	White County Commissioners Office	
Juanita Ohman	White Co. COA	
Karen Hayden-Sturgis	White County Division of Child Services	
Kathy Goad	Tri-County School Corp.	
Kim Clark	City of Crawfordsville	
Kristina Chapman	Red Cross	
Leon R. Cyr	Benton County Commissioner's Office	
Mandy Murray	Milner Community Health Care	
Mark Wolfschleg	Mulberry Health & Retirement	
Mary Nichols	Abilities Services, Inc.	
Mary Paulen	Headstart	
Mary-Lynn	Brookston/Chalmers Community Van	
Onias Taruwinga	CDC Resources	
Patrick F. Clawson	District 2 Carroll County Commissioner	
Patty Bright	Rossville Area Transit	
Paul Cramer	Clinton County Family YMCA	
Philip Hassan	White County Health Department	
Ralph Shrader	M.S.D. Warren County	
Ralph Walker	Clinton Central School Corp.	
Roxanne Roman	CDC Resources, Inc.	
Scott Shoemaker	Clinton County Commissioners	
Stan Minnick	Hope Transit	
Steve Brier	Mobility for Area Citizens (MAC Vans)	
Steve Burton	White County Commissioners Office	
Steve Cox	Benton County Commissioner's Office	
Steve Eberly	Warren County Commissioners	
Suzie Micheal	Boys & Girls Club of Clinton Co	
Tammy Nickle	Community Action Program of Western Indiana	
Tom Crawford	St. Vincent Frankfort Hospital	
Tom Hetrick	Warren County Commissioners	
Tony Briles	Warren County Commissioners	
William R Brown	District 3 Carroll County Commissioner	
	Shawnee Learning Center (CARS)	
	Gem City Cab	

Contact Person	Organization
	Clinton County Commissioners
	Clinton County Chamber of Commerce
	Emergency Management Services
	Mexican-American Taxi
	Wabash Valley Hospital-Mental Health Center
	Waveland Volunteer Transportation Program
	Med-A-Port
	Employment & Training

## 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 Benton, Carroll, Clinton</u> <u>Fountain, Montgomery, Warren and White Counties (Region 5)</u>

Wednesday, March 31, 2021, 12:00 PM - 1:30 PM Eastern Time Obtain Zoom meeting link or dial-in phone number by visiting <a href="http://tinyurl.com/783czmmm">http://tinyurl.com/783czmmm</a>

Residents are asked to provide their input through the public survey available online at: <a href="https://www.surveymonkey.com/r/Indiana">https://www.surveymonkey.com/r/Indiana</a> 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 <a href="mailto:slight-norm">jllemon@gshvin.org</a>, Jesse Watkins <a href="mailto:specialcom">pccacan@gmail.com</a>, cimes@pcrsinc.org, MONICA EVANS <monica.edpcca@yahoo.com>, sccoa@att.net, Patricia Glenn pat.glenn@sirs.org>, Roland Lemus <br/>drytrdir@brsinc.org>, Jenny Bowen <br/>brpdc@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 <a href="mailto:shear">hsaunders@huntingtoncountycoa.org</a>, 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 <a href="http://tinyurl.com/783czmmm">http://tinyurl.com/783czmmm</a>. 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 <a href="kfrankhoppe@rlsandassoc.com">kfrankhoppe@rlsandassoc.com</a> 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 5 HSTP Meeting Attendance List**

### March 31, 2021

- 1. Gail Spry, White County Council on Aging, Monticello
- 2. Riley Spry, Clinton County Family YMCA
- 3. Mary Nichols, Ability Services
- 4. Tammy Nickle, MAC Van for Warren and Fountain Counties
- 5. Judy, Franciscan Health (Rensselaer)
- 6. Cherish Smith, Noble Transit System in Noble County
- 7. Dawn Layton, Paul Phillippe Resource Center/Clinton County Public Transportation
- 8. Ashley Wilson, Carroll County Senior and Family Services
- 9. Brian Jones, INDOT Section 5310 Program Manager

#### **INDOT HSTP Update Region 5 Meeting**

March 31, 2021

Facilitator: Christy Campoll (support: Laura Brown and Kjirsten Frank Hoppe)

#### Attendance

- Gail Spry, White County Council on Aging, Monticello
  - o Biggest challenge is getting the word out about what they do
- Riley Spry, Clinton County Family YMCA
  - o Big challenge in Clinton County is the lack of available transportation services. Also, people do not know about what services are available.
- Mary Nichols, Ability Services
  - o Biggest challenge is that they provide transportation to people with disabilities and although a lot of parents would like their children to be in the program, the farthest point they are able to serve with their transportation program is 22 miles away.
- Tammy Nickle, MAC Van for Warren and Fountain Counties
  - Challenge people don't know what we do. Also, getting drivers to drive for them is a problem.
- Judy, Franciscan Health (Rencellear)
  - Missed part of the meeting yesterday
- Cherish Smith, At Noble Transit System in Noble County
  - o Challenges: hiring drivers and getting the word out about services
- Dawn, Paul Phillippe Resource Center Clinton County Public Transportation
  - Challenge: People in the community do not know that they are open to the public not just seniors.
- Ashley, Carol County Senior and Family Services
  - Challenge: People do not know what they do and that they provide transportation.
     They also partnered with SE Trans and they struggle with getting paid from them.
- Brian Jones, INDOT Section 5310 Program Manager
  - o Challenge: Getting the resources to all of the providers out there.

#### Surveys

• We need to look for paper surveys from White County (Gail sent them).

### Review of prior plan goals and needs

- Create a Regional Committee
  - o The meeting participants did not know of a regional committee
- White County COA/CDC Resources are coordinating
  - CDC Resources has a bus service that runs a morning and afternoon route to bring people to a workshop in the area. During the day White County COA does their local transportation.
- Expanding Marketing
  - o This is a continuing challenge

- Initiate General Public Transportation Service in Benton, Carroll, Fountain, Montgomery, and Warren Counties
  - o This is still an unserved area.
  - 5311 providers are focusing on Tippecanoe County and then planning to expand to other areas served by Area IV AAA. (previously had a volunteer program in that area)
- Obtaining necessary capital assistance
  - o Ongoing need

#### Discussion

- Gail says they are striving to be more efficient but when they add Medicaid transportation into the mix, it gets very confusing for providers and users. Gail doesn't see the efficiency of the NEMT broker program.
- There is demand for people needing rides to vaccines.
  - o Gail is taking people to Vaccines. Tammy Nickle said they are also transporting a lot of people.
- Christy asked about employment-related transportation needs
  - Gail said they take people to employment during their normal hours. Places like McDonalds that have longer hours are underserved. Gail said they get a few requests for this service, but not a lot.
  - o D Layton said the struggle with getting people to the 5AM shifts and 6PM start times.
  - O Dawn said they are a huge factory town so there are probably shift work transportation needs.
- People do get released from the hospital after public transit hours. If that happens, the hospital messages public transit first think in the morning and they work it in.
- Gail feels like some people would like for them to have evening service for social, or hospital discharges but she does not feel that it is a major need.
- Judy (hospital) said they do have situations where they need to get patients back to their home even when their home is out of state. In Jasper County, there is not taxi. They have a community service bus for Rencellear only. There is no other bus or train service out of the area. They've gotten creative. There is one service (no Uber/taxi/Lyft) called TROT Services that they can call. Otherwise, the hospital doesn't have options. TROT has taken patients to Lafayette to get on the Greyhound bus or to home outside of the county.
- Dawn said that the jail lets people out at midnight. Most of them have no money and no transportation so they sit and wait outside the building all night. But after midnight it counts as another day for the jail system.
- Tammy Nickle said that she cannot imagine being able to find drivers to work evenings and weekends if they were to expand hours.

#### Christy asked about inter-county transportation

• Gail said that in Monticello, they have a local hospital and dialysis, but for specialists people have to go to Lafayette.

• (Dawn said) Area IV is working with City Bus to do some of their overflow for people with disabilities that need more specialized services.

Would a regional TAC be helpful?

• Brian said that they have a regional TAC. The participants in this meeting participate in the TAC and it meets quarterly.

Christy presented next steps for the plan.

Emails

r.spry@ccfymca.net

<u>Judith.egan@franciscanalliance.org</u>

Mary.nichols@asipages.com



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
- Needs Assessment Data (to date)
- Discussion
  - What are the Biggest Unmet Transportation Needs?
  - o How Can We Solve Unmet Needs?
  - What Goals and/or Transportation Projects are on the Horizon?
- Next Steps

### Introductions

- Please share a little about yourself!
  - What is your name?
  - Are you representing an organization today?
  - What is the #1 challenge or barrier to transportation for you or people in your community?

# Study Area

- Last Updated in 2017, the Plans are Available at <a href="https://www.in.gov/indot/2825.htm">https://www.in.gov/indot/2825.htm</a>
- Region 5 Counties
  - Benton
  - Clinton
  - Carroll
  - Fountain
  - Montgomery
  - Warren
  - White



### What Is A Coordinated Plan?

- Identifies Unmet Transportation Needs
- Prioritizes Goals and Strategies (Projects)
- Identifies Opportunities for Collaboration
- Has a Local Focus
- Adopted Locally

# 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

# Region 5 5310 Projects

Location	2016-20 Total Funding	Local Share	Federal Share
Indiana	\$13,953,666	\$2,790,733	\$11,162,933
Region 5	\$1,578,987	\$315,797	\$1,263,189

- Projects Funded
  - Wheelchair Accessible Vehicles
- Abilities Services Inc., Carroll County COA, CDC Resources, City of Crawfordsville

# Transportation Public Survey

### **AVAILABLE NOW**

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

https://www.surveymonkey.com/r/Indiana\_Transportation

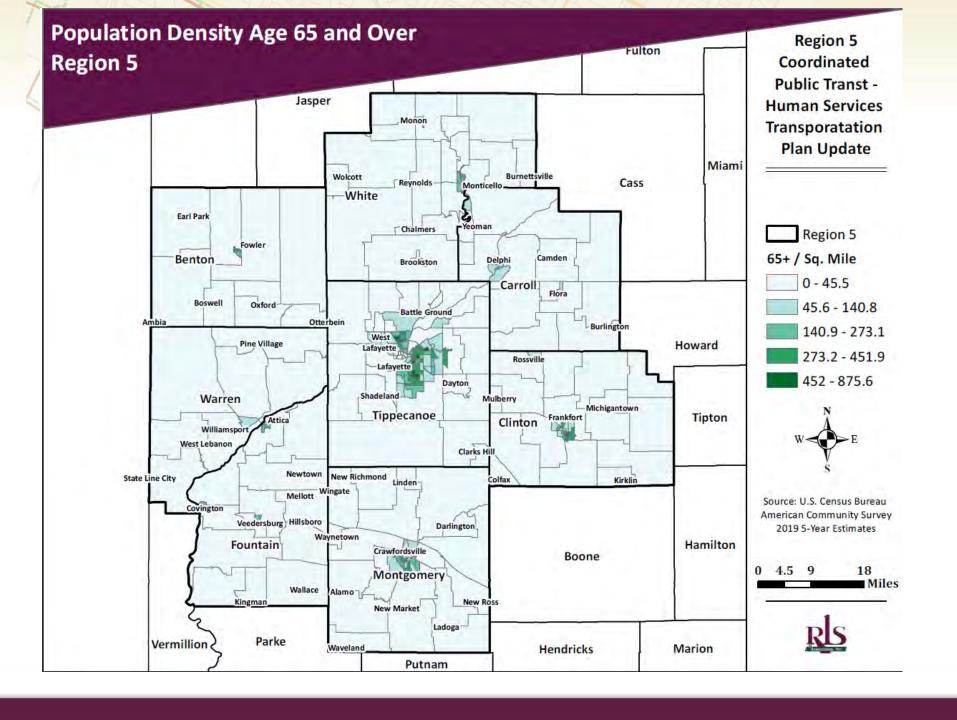
- Spanish Version Available
- Print and Large Print Available

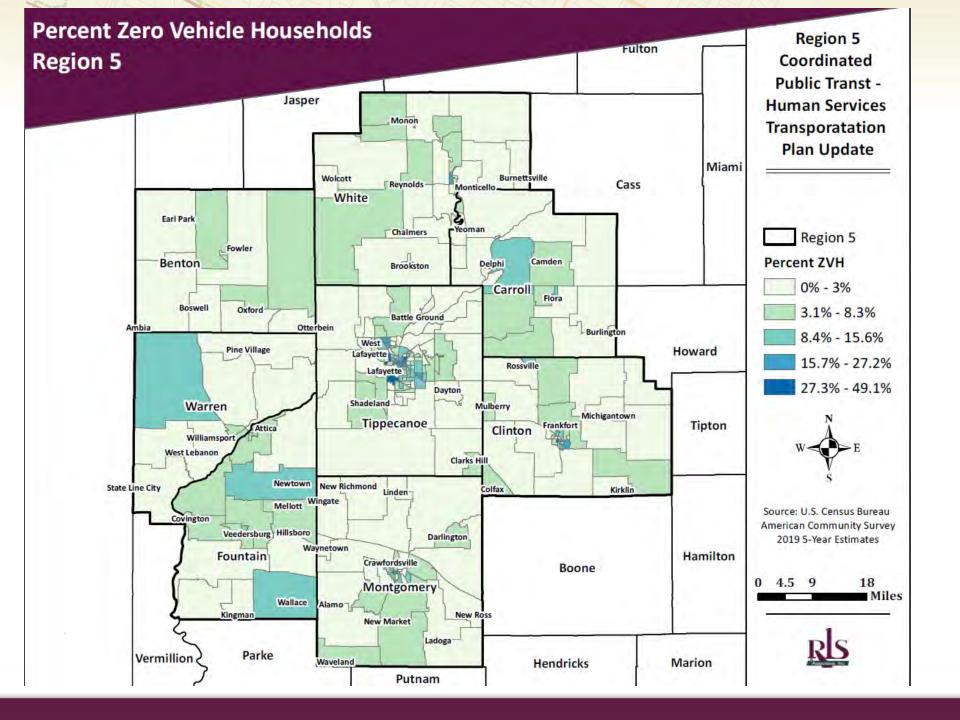
# **Preliminary Survey Results**

- What Changes Would You Make to Your Local Transportation Options? (19 responses)
  - If I could ride to other parts of the state (such as Indianapolis or other cities/towns) – 5
  - End later at night 4
  - Operate Saturdays 4

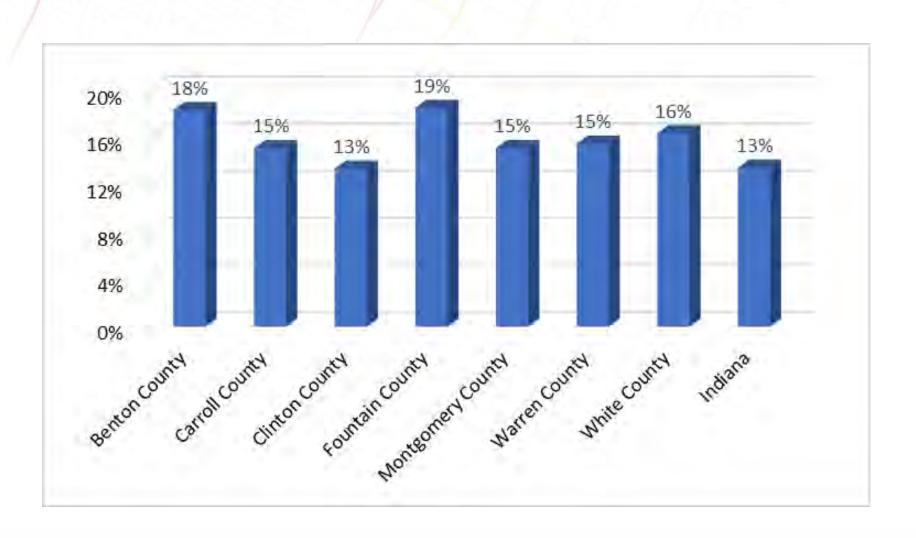
### Comments

- "Am aware the need is great and your service is A one - keep up the good work"
- "Appreciate having it from PPRC"
- "I love Paul Phillip Resource. Always call pick up time. Everyone very friendly and courteous."





### 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**

- Area IV Agency
- Carroll County Senior and Family Services
- CARS
- CDC Resources
- MAC Van
- Paul Phillipe Resource Center
- Sunshine Vans of Montgomery County

- Wabash Center
- White County Public Transit/COA

- Increase the Amount of Funds Available for Coordinated General Public Transportation— Human Services Transportation in the Region While Also Working Cooperatively to Control Costs
  - Document unmet transportation needs
  - Identify opportunities for joint-funded vehicle purchases
  - Promote cost allocation methods to facilitate client mixing provider policies
  - Participate in statewide associations

- Extend Service Areas and Provide Out-of-County/Regional Transportation Service Across the Region
  - Establish transfer points at county borders
  - Evaluate potential for expansion of transportation provider services
  - Maintain communication to look for opportunities for shared rides/software
  - Examine potential for providers to provide first/last mile service to City Bus

- Extend Service Days/Hours to Enhance Public Transportation Services in the Most Rural Portions of the Study Area
  - Weekend service
  - ∘ 2<sup>nd</sup>/3<sup>rd</sup> shift service
  - Add volunteer driver programs (non-5311)

- Create a Transportation Structure That Promotes More Efficient Use of Resources at the Local and Regional Level
  - Regional Transportation Advisory Committee
  - White County COA/CDC Resources Coordination
  - Expand marketing
- Initiate General Public Transportation Service in Benton, Carroll, Fountain, Montgomery, and Warren Counties

 Obtain the necessary capital assistance, including vehicles, related equipment and new technology, 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 other parts of the state (such as Indianapolis or other cities/towns)		Pick me up at destination	•			
Lower the cost to r	Lower the cost to ride			Increase health and safety precautions			
Start earlier in the	Start earlier in the morning  End later at night  Operate on Saturdays  Operate on Sundays		Run fixed route service more frequently (for example, ma 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)				
End later at night							
Operate on Saturd							
Operate on Sunda							
					se/dial-a-ride service		
			more convenie demand trip re		ow for same-day or on-		
			Make it easier, or add the option, 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?						
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#### **OPEN-ENDED COMMENTS PROVIDED BY SURVEY RESPONDENTS**

- For my needs services are great. Drivers are great, always on time, quick to pickup whether my home, or medical building, pickup for return trip home. Sheryl tries hard to take care of us all when we ride with her.
- White Co. Council on Aging don't know why S.E. Trans won't book it.
- The bus service is a BIG help to me. Everyone is so very helpful and nice. You get to know the drivers by name, they become a friend which makes it feel like you are riding with someone that cares and not just a bus driver.
- Top-shelf. Can't ask for better.
- Thank you for your service.
- No, it works for me. The people at WCCOA are wonderful and friendly.
- I like everyone. I have fun with you all.
- Drivers are friendly and helpful.
- Am aware the need is great and your service is A one keep up the good work appreciate having it from PPRC.
- Not at this time, aside from COVID public trans. should be regularly cleansed and sanitized!!
- I love Paul Phillip Resource. Always call pick up time. Everyone very friendly and courteous.