

**COORDINATED PUBLIC TRANSIT-  
HUMAN SERVICES TRANSPORTATION  
PLAN FOR WAYNE, UNION, FRANKLIN,  
FAYETTE, AND RUSH COUNTIES,  
INDIANA**

**FINAL REPORT**

**PRESENTED TO:  
INDIANA DEPARTMENT OF  
TRANSPORTATION**

**APRIL 11, 2008**

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# **I. INTRODUCTION**

## I. INTRODUCTION

This document is a regional portion of the Indiana Statewide Coordinated Public Transit-Human Services Transportation Plan. Its function is to document evaluation of existing transportation providers and the unmet transportation needs/duplications in human service agency and public transportation service, and establish transportation related goals for Wayne, Union, Rush, Fayette, and Franklin counties, Indiana. This documentation fulfills 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).

This study documents the comprehensive efforts of community outreach that have been conducted to date in an effort to encourage participation from all of the local stakeholders and general public in the study area that represent these targeted populations. Outreach efforts are based on best practices from coordination efforts across the country as well as strategies suggested by the national United We Ride initiative in human service transportation. The goal is to improve human service and public transportation for older adults, individuals with disabilities of all ages, and people with low incomes through coordinated transportation.

INDOT requested the assistance of RLS & Associates, Inc. to develop this statewide plan. The following chapters document the demographic conditions, inventory of existing transportation providers, gaps and duplications in transportation, and unmet transportation needs throughout the five county region that have been identified through analysis and community input. Chapter V of this plan outlines suggested goals and implementation strategies to address the unmet needs and gaps in service and improve the quality of life for individuals with disabilities, older adults, and individuals with low incomes.

The Appendix of this memorandum is provided to document the comprehensive outreach efforts, including a checklist of stakeholder organizations that were contacted to complete the comprehensive stakeholder survey, which was compiled from the United We Ride *Framework for Action: Building a Fully Coordinated Transit System* survey. The appendix also includes local stakeholder meeting announcements and agendas that were distributed to all local stakeholders, and a list of organizations that attended the local stakeholder meeting and one-on-one interviews.

**Why a Coordinated  
Public Transit-Human  
Services  
Transportation Plan?****WHY A COORDINATED PUBLIC TRANSIT-HUMAN SERVICES  
TRANSPORTATION PLAN?**

In August of 2005, Congress passed the Safe, Accountable, Flexible, Efficient, Transportation, Equity Act: A Legacy for Users (SAFETEA-LU), reauthorizing the surface transportation act. As part of this reauthorization, grantees under the Elderly Individuals and Individuals with Disabilities (Section 5310), Job Access and Reverse Commute (JARC) (Section 5316), and New Freedom Initiative (Section 5317) grant programs must meet certain requirements in order to receive funding for fiscal year 2007 (October 1, 2006) and beyond.

One of the SAFETEA-LU requirements is that projects from the programs listed above must be part of a “*locally developed Coordinated Public Transit-Human Services Transportation Plan.*” This transportation plan must be developed through a process that includes representatives of public, private, and non-profit transportation services, human services providers, and the general public.

Transportation is the vital link to jobs, medical care and community support services. Without it, citizens cannot be productive because they do not have reliable access to employment centers; health care becomes more expensive as citizens are admitted to hospitals with serious health problems because they were without necessary resources to travel to preventative care appointments, etc. The lack of affordable and useable transportation options frustrates the ability of many citizens to achieve economic and personal independence (Coordinating Council on Access and Mobility (CCAM), 2006). Transportation coordination can help to provide more trips for human service agency and nonprofit organization consumers and the general public, and link them to life-supporting employment and services.

Transportation coordination, while making sense from an efficiency and resource utilization standpoint, is also becoming a national mandate. During the last few years, the Federal Transit Administration CCAM developed a national campaign entitled “United We Ride,” to help promote transportation coordination. A “United We Ride” website has been posted as a resource for any organization with an interest in transportation of older adults, individuals with limited incomes, and individuals with disabilities. The website contains “A Framework for Action” for local communities and state governments, a coordination planning tool, along with a multitude of other coordination resources. State “United We Ride” grants, such as the one which sponsored this study, have also been awarded across the nation to encourage transportation coordination planning at the state level.

**Why a Coordinated  
Public Transit-Human  
Services  
Transportation Plan?**

Transportation coordination has been occurring across the nation because the benefits of coordination are clear. According to the Federal Coordinating Council on Access and Mobility's (CCAM) "United We Ride" website, nationally, \$700 million could be saved if transportation providers would coordinate individual resources which are dedicated to providing transportation. This conservative estimate is based on a study conducted by the National Academy of Science's Transportation Research Board (TRB) but it highlights the fact that transportation resources (funding, people, vehicles and services) could be more effectively utilized to provide more transportation for communities.

As indicated above, the U.S. Congress is also supporting the new emphasis on coordinated human service agency and public transportation efforts with the passage of SAFETEA-LU. Coordinated transportation is now an eligibility requirement for the following FTA funding grant programs:

*Transportation for Elderly Persons and Persons with Disabilities (Section 5310)* - This program (49 U.S.C. 5310) provides formula funding to States for the purpose of assisting private nonprofit groups in meeting the transportation needs of the elderly and persons with disabilities when the transportation service provided is unavailable, insufficient, or inappropriate to meeting these needs. States apply for funds on behalf of local private non-profit agencies and certain public bodies. Capital projects are eligible for funding. Most funds are used to purchase vehicles, but acquisition of transportation services under contract, lease or other arrangements and state program administration are also eligible expenses.

*Job Access and Reverse Commute (JARC) Program (Section 5316)* - The purpose of this grant program is to develop transportation services designed to transport welfare recipients and low income individuals to and from jobs and to develop transportation services for residents of urban centers and rural and suburban areas to suburban employment opportunities. Emphasis is placed on projects that use mass transportation services. Job Access grants are intended to provide new transit service to assist welfare recipients and other low-income individuals in getting to jobs, training, and child care. Reverse Commute grants are designed to develop transit services to transport workers to suburban job sites. Eligible recipients include local governmental authorities, agencies, and non-profit entities. Eligible activities for Job Access grants include capital and operating costs of equipment, facilities, and associated capital maintenance items related to providing access to jobs. Also included are the costs of promoting the use of transit by workers with nontraditional work schedules, promoting the use of transit vouchers, and promoting the use of employer-provided transportation including the transit benefits. For Reverse Commute grants, the following activities are eligible: operating

**Why a Coordinated  
Public Transit-Human  
Services  
Transportation Plan?**

costs, capital costs, and other costs associated with reverse commute by bus, train, carpool, vans, or other transit service.

*New Freedom Program (Section 5317)* – A new funding program as of Federal Fiscal Year 2006, New Freedom is designed to encourage services and facility improvements to address the transportation needs of persons with disabilities that go beyond those required by the Americans with Disabilities Act. The New Freedom formula grant program is designed to expand the transportation mobility options available to individuals with disabilities beyond the requirements of the ADA. Examples of projects and activities that might be funded under the program include, but are not limited to:

- Purchasing vehicles and supporting accessible taxi, ride-sharing, and vanpooling programs.
- Providing paratransit services beyond minimum requirements (3/4 mile to either side of a fixed route), including for routes that run seasonally.
- Making accessibility improvements to transit and intermodal stations not designated as key stations.
- Supporting voucher programs for transportation services offered by human service providers.
- Supporting volunteer driver and aide programs.
- Supporting mobility management and coordination programs among public transportation providers and other human service agencies providing transportation.

One of the prerequisites to apply for funding under the SAFETEA-LU programs is participation in the creation of a “locally developed Coordinated Public Transit-Human Services Transportation Plan.” This document is the first step for all of the organizations that participated in the plan toward satisfying grant application requirements. The plan should become a living document so that it may be amended as new organizations join the effort and existing transportation resources change in future years.

## **II. INVENTORY AND ANALYSIS OF EXISTING CONDITIONS**

## **II. EXISTING CONDITIONS**

The region lies in the east central part of Indiana, immediately adjacent to the Indiana-Ohio boundary. The region is east of Indianapolis and west of Preble and Butler Counties in Ohio and includes the Counties of Wayne (population of 71,097), Rush (18,261), Fayette (25,588), Union (7,349), and Franklin (22,773) in Indiana. Larger cities in the region include Richmond (39,124); Rushville (5,995); Connersville (15,411); Liberty (2,061); and Brookville (2,652). The region is bordered by the Indiana Counties of Randolph, Henry, Hancock, Shelby, Decatur, Ripley and Dearborn.

Exhibit II.1 on the following page is a highway and location map of the study area. The region is served by the following major highways: Interstates 70 and 74; U.S. Routes 27, 35, 40, and 52; and Indiana Routes 1, 3, 44, 38, 121, 229, 101, 227 and 252.

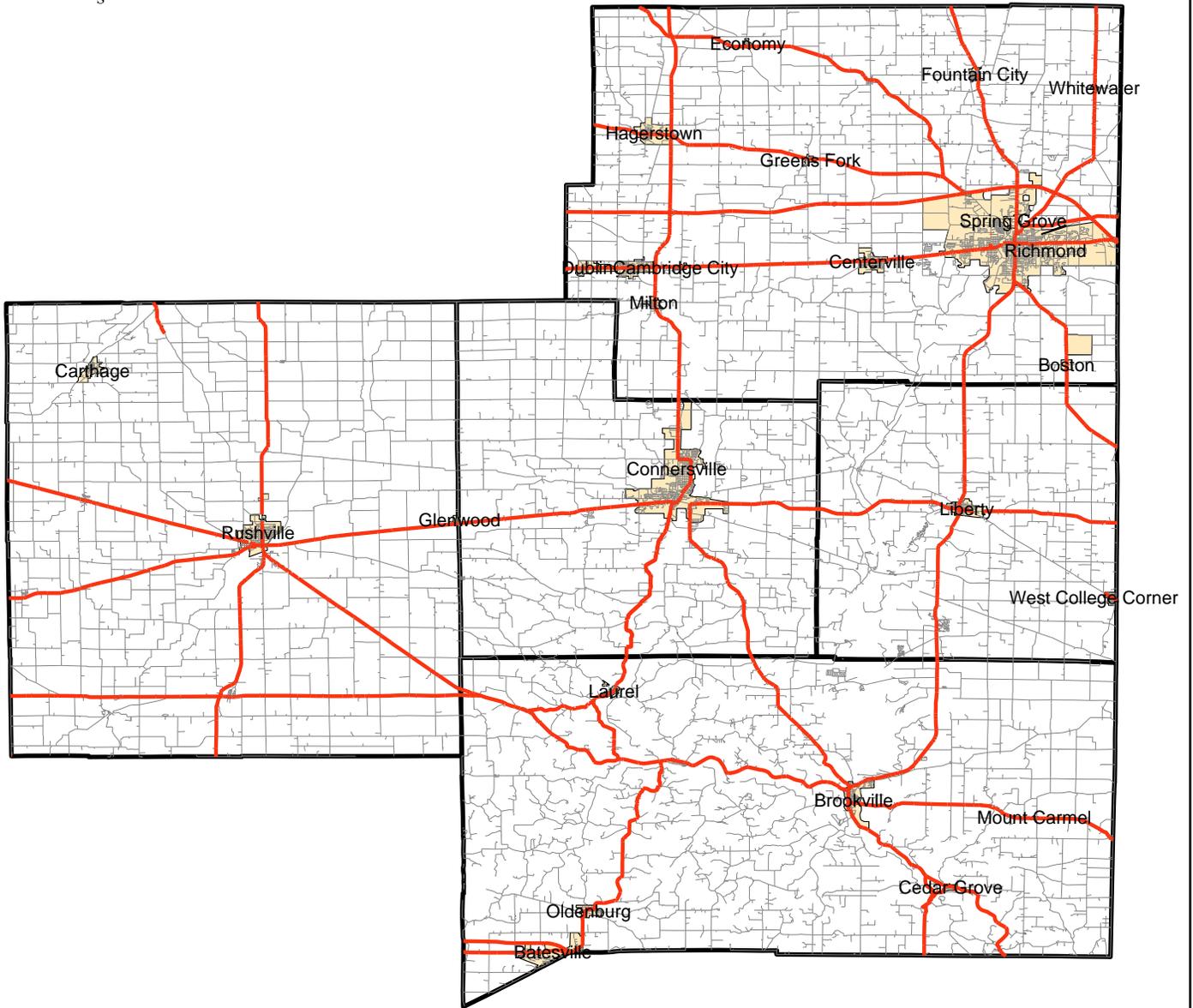
### **ECONOMIC/DEMOGRAPHIC CHARACTERISTICS OF THE REGION**

The following paragraphs provide demographic and economic descriptions of the five county region. Regional statistics are provided to support the existing and needed transportation services that are not contained within county boundaries.

#### **Population**

The region is approximately 1,575 square miles in size and has a total population of 145,068 people according to the 2000 U.S. Census. This is an average population density of 92.1 persons per square mile in the region. The map in Exhibit II.2 shows the population density for each block group within the region. The block groups of highest and moderately high population density were located in the Cities of Richmond, Connersville, Brookville, and Hagerstown. The block groups with moderate population density are located around the central portion of Richmond and in the cities of Rushville, Connersville, and Liberty. The remainder of the block groups in the region have low to very low population density per block group.

In terms of the region's most populous places in 2004, the City of Richmond ranked first with 37,943 (Richmond is the 15<sup>th</sup> largest city in Indiana), while Connersville was the second largest place with 14,445. See Exhibit II.3 for the list of the region's largest cities and towns and their percentage of the region's total population in 2004.

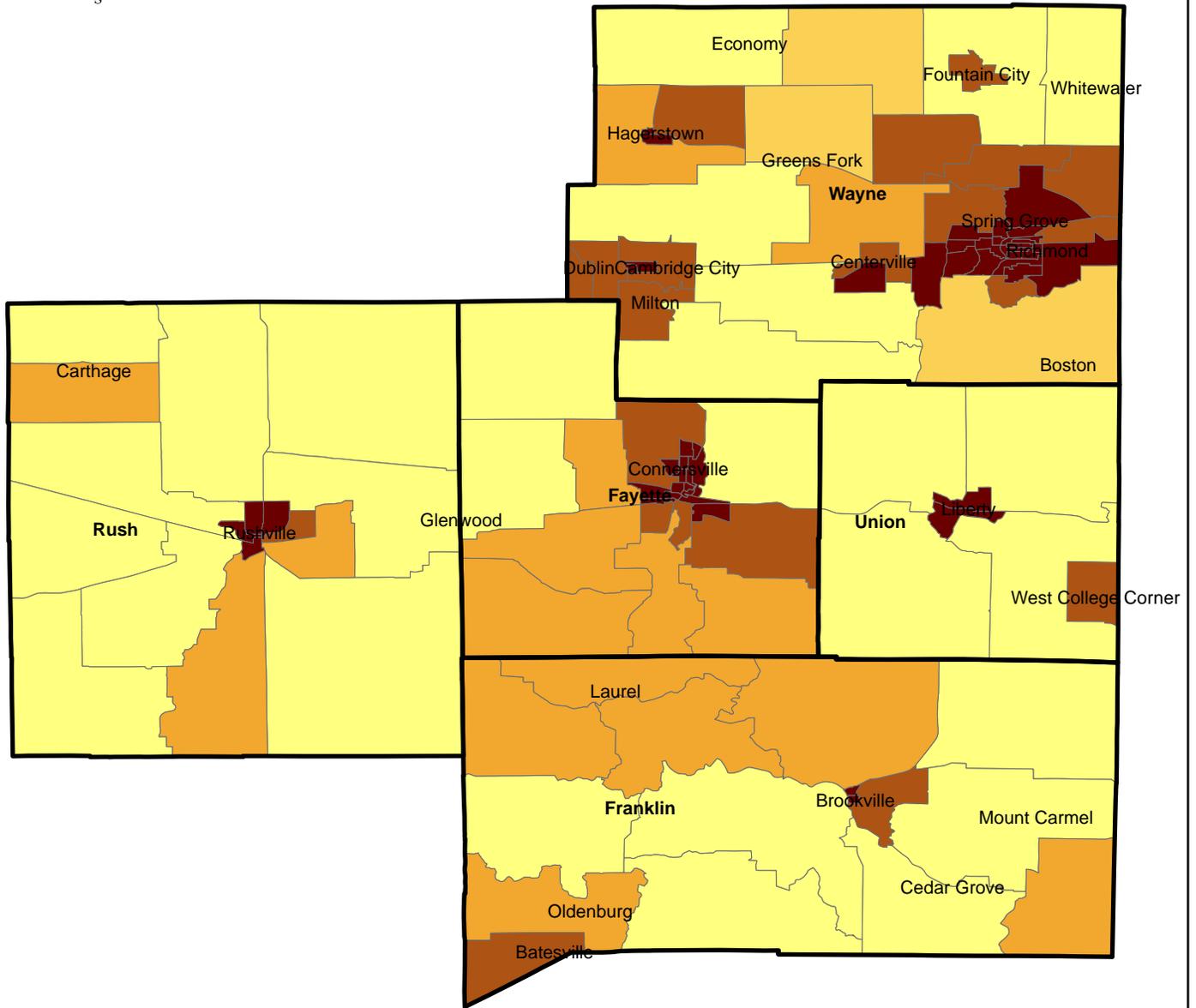


— Major Roads



## Exhibit II-1: Highways and Major Cities

Wayne, Union, Rush,  
Fayette, Franklin



**Group 4 Blockgroups**

- 13.93 - 46.93
- 46.94 - 49.72
- 49.73 - 85.84
- 85.85 - 554.7
- 554.8 - 6407



**Exhibit II-2:  
Persons Per Square Mile**

Wayne, Union, Rush,  
Fayette, Franklin

**Exhibit II.3: Population of the Region’s Largest Places, 2000**

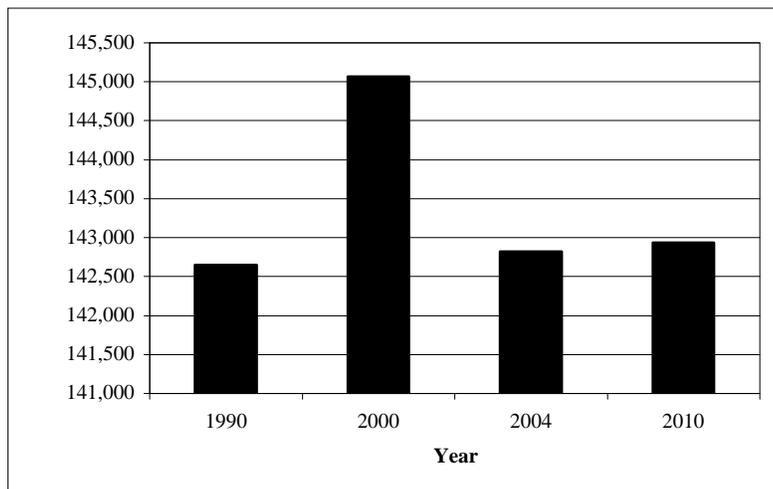
	<b>2004</b>	<b>percent of Region’s Total Pop.</b>
Richmond	37,943	26.6percent
Connersville	14,445	10.1percent
Rushville	5,785	4.1percent
Brookville	2,924	2.0percent
Centerville	2,437	1.7percent
Cambridge City	2,056	1.4percent
Liberty	1,954	1.4percent
Hagerstown	1,701	1.2percent
Batesville	1,408	1.0percent
Carthage	897	0.6percent

Source: 2004 data: STATS Indiana,  
State of Indiana Website

**Population Growth**

According to information from the State of Indiana, the total population of the region in 2004 was 142,818 persons. This is very close to the area’s 1990 population of 142,651 but approximately 2,250 persons less than the area’s 2000 Census population of 145,068. This means the region has only grown 0.12 percent between 1990 and 2004. The State of Indiana Business Research Center is projecting almost no growth for the next five years as the projected population for 2010 is 142,933, an increase of only 0.08 percent. Exhibit II.4 illustrates the historical and projected population trends through 2010.

**Exhibit II.4: Regional Population Trends**



Source: Stats Indiana, State of Indiana, August 2005

**Race**

According to 2003 data from the Indiana Business Research Center and U.S. Census data, the region’s population was primarily White/Caucasian (95.6 percent of the population). Black/African Americans were 2.9 percent of the population and Hispanic/Latinos were 1.0 percent. People who reported belonging to two or more races were 0.90 percent of the population.

The Indiana Business Research Center reported the total population of the region was 143,261 in 2003. Of that, 4.4percent, or 6,319 persons were listed as some kind of racial minority group. Exhibit II.5 lists the breakdown of the different race categories for the region’s population.

**Exhibit II.5: Race Distribution**

<b>Race</b>	<b>Population</b>	<b>Percent</b>
White	136,942	95.6percent
African American	4,146	2.9percent
Native American	215	0.2percent
Asian	678	0.5percent
Other	25	0.0percent
Two or More Races	1,255	0.9percent
Total Minority	6,319	4.4percent
Total Population	143,261	100.0percent

Source: 2003 Data from State of Indiana/U.S. Census Bureau

**Disability Incidence**

Disability incidence data was collected using the 2000 U.S. Census. The following exhibit (Exhibit II.6) shows the number of persons in each county in the region over the age of 5 with disabilities. Some 28,452 persons in the reported that they had some type of disability. This means that 19.6 percent of the region’s population reported having some type of disability. This is a relatively high rate of disability incidence as the State of Indiana’s percentage of persons with disabilities is only 17.0 percent and the United States is 17.7 percent. Disabilities include sensory, mental, physical, and self-care limitations.

It should be noted that these are self-reported disabilities, many of which do not affect the need for specialized transportation service. The actual

numbers of transportation-disabled persons are somewhat less (about 1/3) of the total number of persons with disabilities.

**Exhibit II.6: Disability Incidence by County, 2000**



Source: U.S. Census 2000

The areas with the highest densities of persons with disabilities are Richmond, Connersville and Rushville.

**Economic Profile**

**Employment and Income**

Using 1999 household income figures reported as part of the 2000 U.S. Census, the average per capita income in the region was \$18,504. This is lower than the per capita income for the State of Indiana of \$20,397. Exhibit II.7 below lists the per capita incomes for the five counties.

The average median household income for the region was \$38,416. This is also relatively low compared to the median household income figure for the State of Indiana - \$41,567. The table in Exhibit II.7 indicates the average median household income for each of the five counties and the state.

**Exhibit II.7: Per Capita and Median Household Income, 1999**

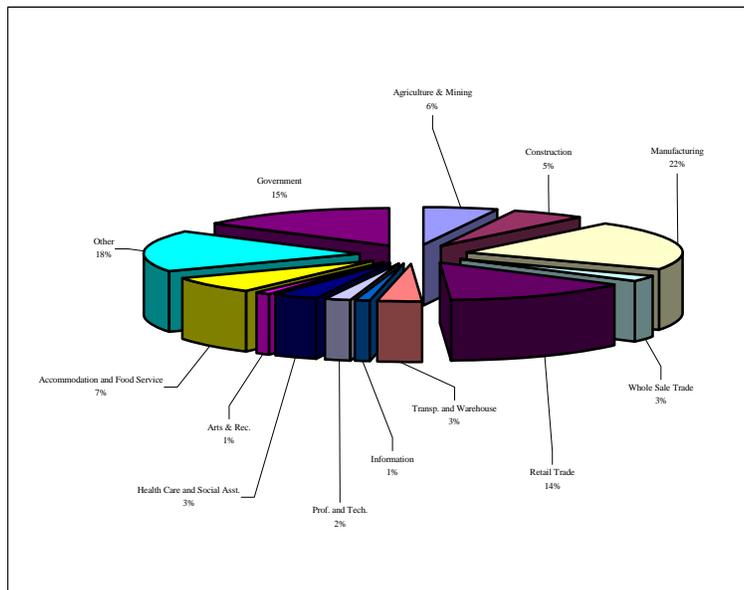
County	Per Capita Income	Median HH Income
Fayette County	\$18,624	\$38,840
Franklin County	\$18,624	\$43,530
Rush County	\$17,997	\$38,152
Union County	\$19,549	\$36,672
Wayne County	\$17,727	\$34,885
State of Indiana	\$20,397	\$41,567

Source: U.S. Census, 2000

**INDUSTRY AND LABOR FORCE**

Manufacturing was the largest industry in the region with 13,359 employees in 2003. Other private trades was the second largest employer (11,056 employees) and government was the third largest. Reportedly, 9,416 workers were employed by government offices. In addition, 8,792 people were employed in retail trade. Exhibit II.8 is an illustration of the employment by industry.

**Exhibit II.8: Regional Employment by Industry**



Source: U.S. Bureau of Economic Analysis, 2005

The manufacturing industry had the highest reported total wages of 2003. Employees of the manufacturing industry earned \$786,284,000. Government and other private sector employment reported the second and third highest total wages according to the U.S. Bureau of Economic Analysis (see Exhibit II.9). Agriculture and the Arts and Recreation industries earned the lowest annual incomes. The table in Exhibit II.9 outlines the total wages earned, by industry.

**Exhibit II.9: Total Wages by Industry, 2003**

	<b>Total Wages (in thousands)</b>
Manufacturing	\$ 786,284
Government	\$ 347,238
Health Care and Social Assistance	\$ 61,558
Retail Trade	\$ 182,192
Construction	\$ 89,174

Whole Sale Trade	\$ 70,742
Prof. and Tech.	\$ 33,662
Accommodation and Food Service	\$ 55,421
Information	\$ 21,097
Transp. and Warehouse	\$ 65,687
Arts & Rec.	\$ 7,099
Agriculture	\$ 27,265
Other Private	\$ 267,727

Source: U.S. Bureau of Economic Analysis, 2005

**Major Employers**

Exhibit II.10 is a list of major employers and the number of employees for each from the different counties in the study area. This information was gathered from the Union County Chamber of Commerce; the Batesville, Indiana website; and the Richmond, Indiana community profile provided by the local electric company.

**Exhibit II.10  
Major Employers**

<b>Major Employer</b>	<b>County</b>	<b>Number of Employees</b>
<i>Reid Hospital</i>	Wayne	1660
<i>Belden Wire &amp; Cable Co.</i>	Wayne	1100
<i>Richmond Schools</i>	Wayne	950
<i>Richmond State Hospital</i>	Wayne	625
<i>City of Richmond</i>	Wayne	530
<i>Union County School Corp.</i>	Union	286
<i>NSK Corporation</i>	Union	225
<i>Americare of Liberty</i>	Union	60
<i>Union County</i>	Union	60
<i>United Communities Bank</i>	Union	60
<i>Hillenbrand Industries</i>	Franklin/Ripley	3740

**EXISTING  
CONDITIONS**

**Economic/  
Demographic  
Characteristics  
of the Region**

<i>Margaret Mary Community Hospital</i>	Franklin/Ripley	488
<i>Batesville Tool &amp; Die, Inc.</i>	Franklin/Ripley	439
<i>New Horizons Rehab Center</i>	Franklin/Ripley	217
<i>Romweber Furniture Company</i>	Franklin/Ripley	165
<i>Kroger Company</i>	Franklin/Ripley	106
<i>Bruns-Gutzwiller Construction</i>	Franklin/Ripley	80
<i>Visteon Automotive</i>	Fayette	3000
<i>Dresser Industries</i>	Fayette	150
<i>Stant Manufacturing</i>	Fayette	350
<i>Ready Machine Tool &amp; Dye</i>	Fayette	61
<i>Fayette Co. School Corporation</i>	Fayette	
<i>Fayette Memorial Hospital</i>	Fayette	

**Journey to Work**

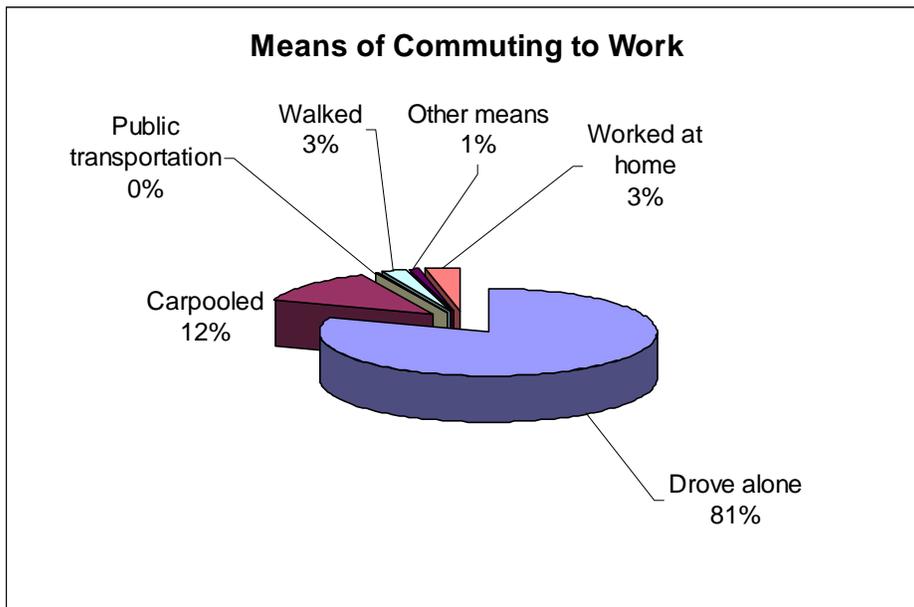
The mean travel time to work for residents was 24.14 minutes. This is longer than the average commute time for the State of Indiana, which was 22.6 minutes. Exhibit II.11 illustrates the average commute time for each County in the region, according to 2000 U.S. Census Bureau statistics.

**Exhibit II.11 Average Commute Time to Work**

<b>County</b>	<b>Average Commute Time</b>
Fayette County	22.4 minutes
Franklin County	29.9 minutes
Rush County	25.4 minutes
Union County	24.6 minutes
Wayne County	18.4 minutes

Exhibit II.12 indicates the commuting characteristics of residents. It is noted that approximately 81 percent of the labor force in the Valley region drove alone to work, 12 percent carpooled, while less than 1 percent used public transportation.

**Exhibit II.12: Means of Commuting to Work in the Region**



Source: 2000 U.S. Census Information

**MAJOR TRIP GENERATORS/ORIGINS AND DESTINATIONS IN THE REGION**

The term “trip generators” is used to indicate where a large number of trips originate or end. These trip generators include residential facilities, medical facilities, employment centers, commercial business centers, educational institutions, and other important trip destinations.

One of the questions on the survey given to the coordination project participants asked for a list of the primary destinations of client travel sponsored by each respondent’s organization. The results of that question are as follows:

**Achieva Resources Corp. Inc. – Richmond, IN**

- Achieva Resources
- Achieva Employment Services

**Centerville-Abington Senior Center –Centerville, IN**

- Various locations in Richmond

**Franklin County Public Transportation- Brookville, IN**

- Senior Center
- Achieva Center
- Brookville Elementary (kindergarten)
- IGA

- Regional Medical Center

**Indiana University East – Richmond, IN**

- No major destinations

**Union County Council on Aging and Aged, Inc. dba Union County Transit – Liberty, IN**

- Dr. Clarkson
- Woodruff's Grocery
- Elementary School
- Multiple Banks
- Multiple Beauty Shops

**Union County Department of Child Service and Family Resources – Liberty, IN**

- Does not provide direct client transportation. Occasionally uses staff or refer clients elsewhere to obtain transportation

**River Valley Resources, Inc.**

- Work One
- Variety of Businesses

**Rush County Senior Citizen Service, Inc. – Rushville, IN**

- Wal-Mart
- LoBell's
- Kroger's
- Rush Memorial Hospital
- Multiple doctors offices
- Welfare Office
- Dunn Center

**Senior Opportunities Services**

- Does not require or provide any type of client transportation

**Vocational Rehabilitation Service – Richmond, IN**

- Purchases transportation from Richmond, IN and Union County Transit, Liberty IN.

**Work One – Richmond, IN**

- Agency does not have funding or does not provide client transportation in any way.

These major destinations are shown in the map in Exhibit II.13 along with other trip origins and destinations that were mapped using various sources of information.

### **TYPICAL DESTINATIONS OUTSIDE THE SERVICE AREA**

Survey respondents were also asked to identify typical destinations to which they traveled outside of their normal service areas. Those destinations included the following places:

- Achieva Resources – Connersville and Brookville, IN
- Community Mental Health – Batesville, IN
- Reid Hospital and Physicians Offices - Richmond
- Fayette Memorial Hospital – Connersville
- Achieva Resources - Connersville, Brookville and Richmond
- RCG – Shelbyville, IN
- St. Vincent Hospital - Indianapolis, IN
- Community North - Indianapolis, IN
- Various physician offices - Indianapolis, IN
- Hancock Memorial Hospital and Professional Building – Greenfield, IN
- Wal-Mart - Connersville, IN
- Richmond Eye Center – Richmond, IN

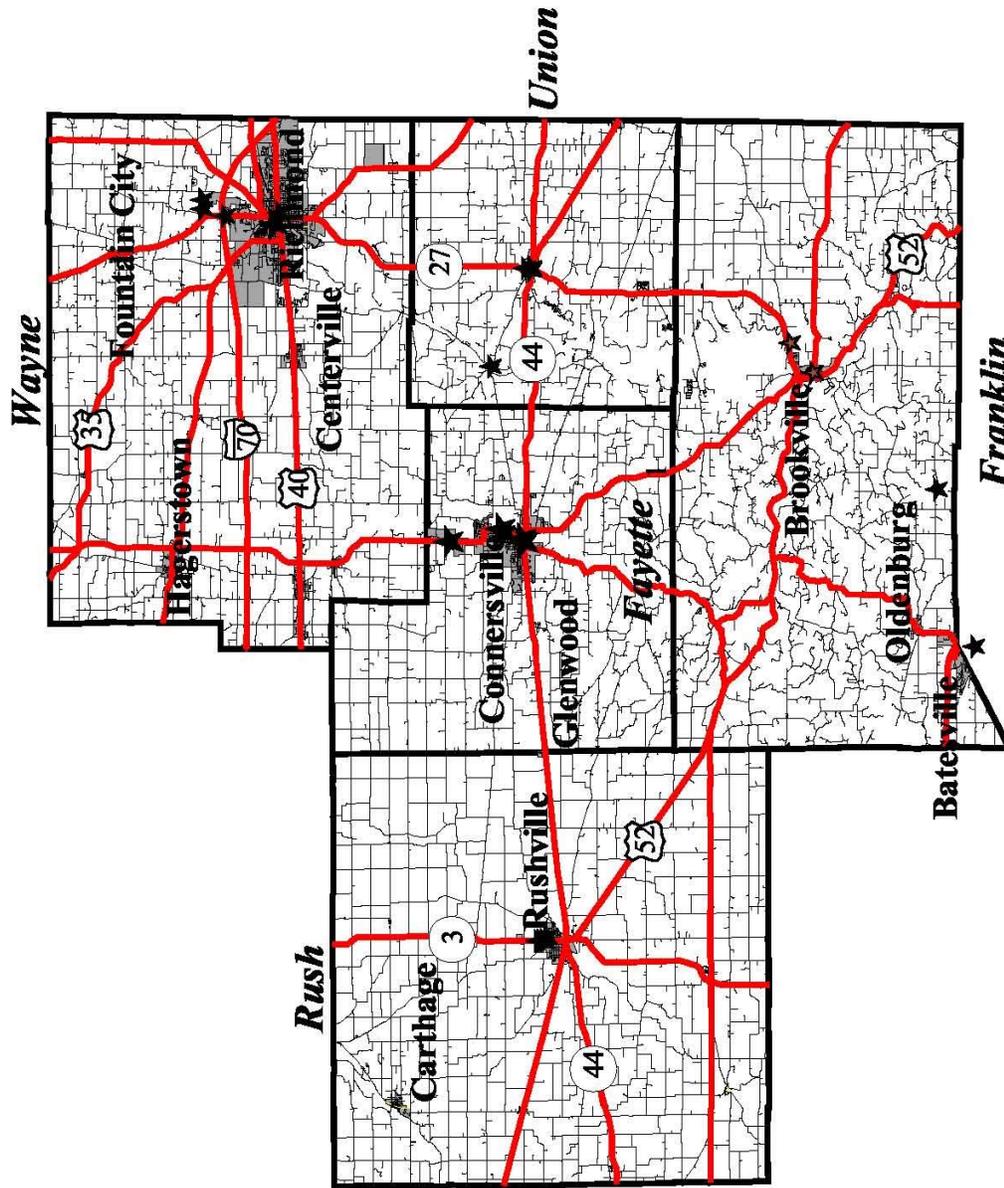
### **COUNTY PROFILES**

The following paragraphs explain the demographic and economic characteristics of each county within the region. County demographic categories are similar to the regional categories, but are intended to provide a more detailed description of existing conditions in each county.

#### **FAYETTE COUNTY**

##### **Population Growth**

According to information from the State of Indiana, the total population of Fayette County in 2006 was 24,648 persons. This is a decrease from the 2000 Census population of 25,588. This means the region has lost 3.7 percent of its population between 2000 and 2006. The Indiana Business Research Center is projecting another decrease in population for Fayette County. The projected population for 2010 is 24,356, a decrease of 1.2 percent from 2006. Exhibit II.14 illustrates the historical and projected population trends for Fayette County through the year 2010.

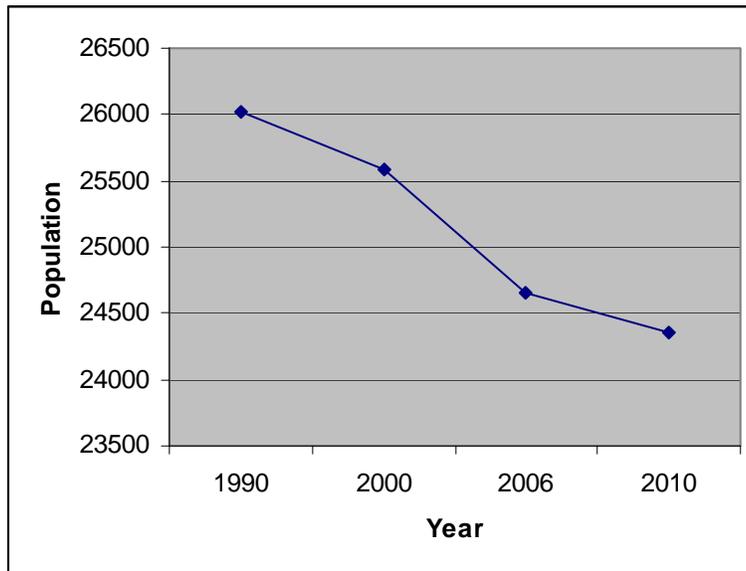


RLS & Associates, Inc.

**Exhibit II.13**  
**Major Trip Generators**  
**Wayne, Union, Rush,**  
**Fayette, Franklin**

- ★ Major Trip Generators
- ▒ Cities and Towns
- ▭ County Boundaries

**Exhibit II.14: Population Trends**

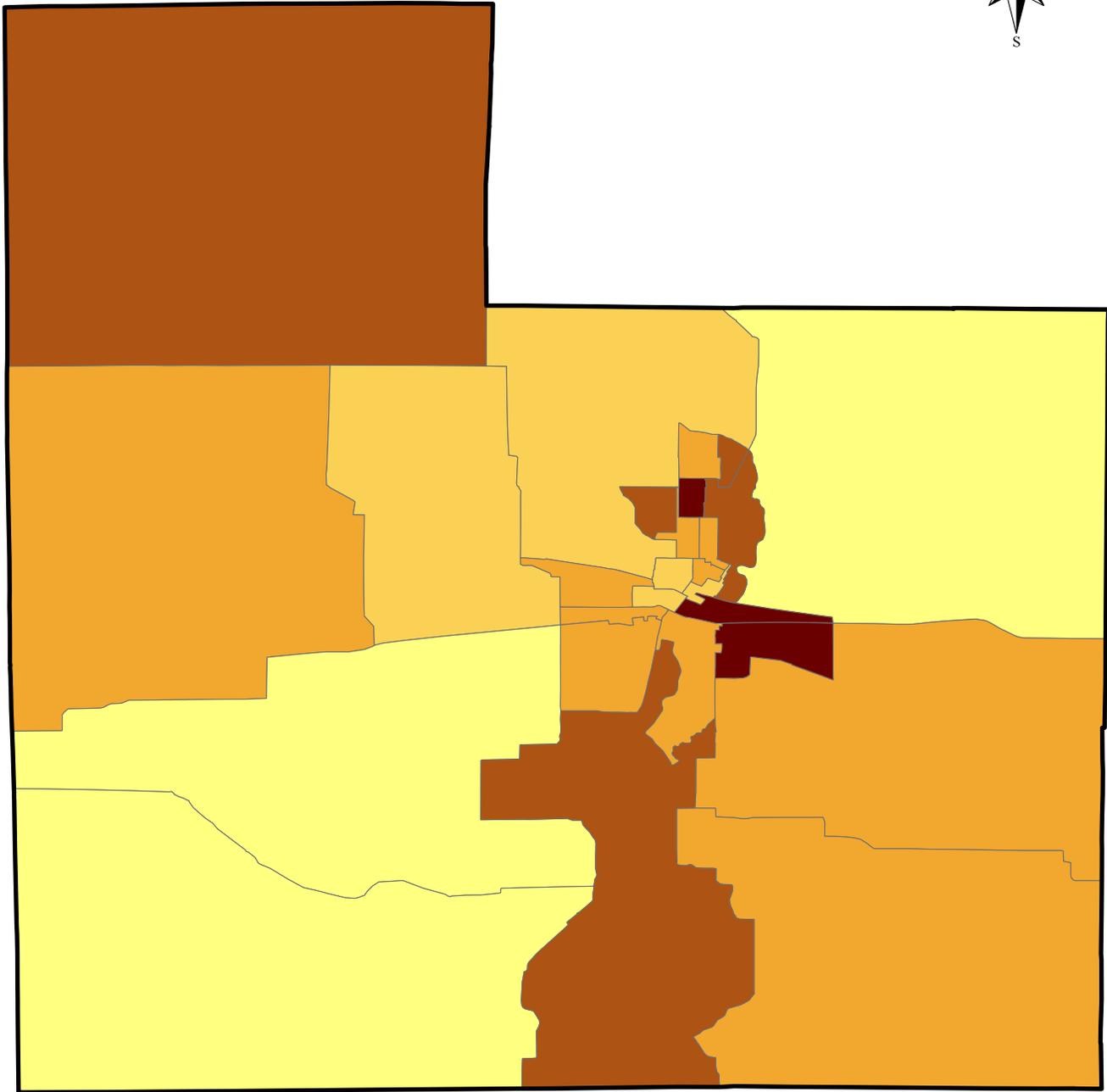


Source: 1990 & 2000 Census Bureau & STATS Indiana

**Age**

Exhibit II.15 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of residents aged 65 and older (27.12 – 100 percent of total population) are in the central portion of the City of Richmond; the northeast and southwest quadrants of the town of Rushville; the central portion of Connorsville, the central portion of Brookville; Cambridge City and Hagerstown. Areas of moderately high and moderate density of older adults are found around the central section of Richmond, in the central portion of Connorsville, in the northwest quadrant of Rushville, and in Liberty and Hagerstown. The remainder of the region has low to very low elderly population density.

According to the 2006 statistics from the Indiana Business Research Center and the U.S. Census, the largest age cohort for Fayette County in 2000 was between ages 25 and 44, constituting 27.2 percent of the County’s population (see Exhibit II.16). The second largest age group was 45 to 64 year olds (26.8 percent). Approximately 23.5 percent of the population in Fayette County was under age 18, while 15.8 percent was age 65 or older. The distribution indicates that the majority of the County’s population was in the working age groups and moving toward the age for retirement.



**Group 4 Blockgroups**

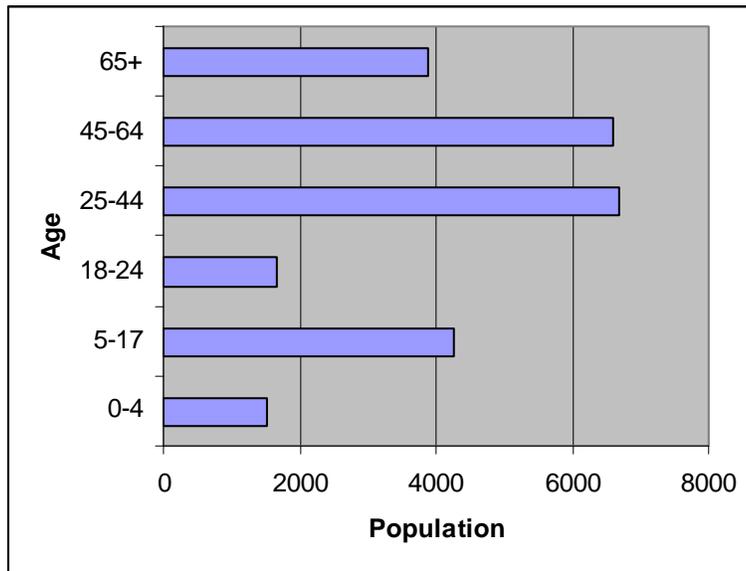
-  0% - 8.9%
-  8.901% - 12.99%
-  13% - 18.79%
-  18.8% - 27.11%
-  27.12% - 100%



Exhibit II-15:  
Population 65 and Over  
As a percent of total population

Fayette County

**Exhibit II.16: Population by Age**

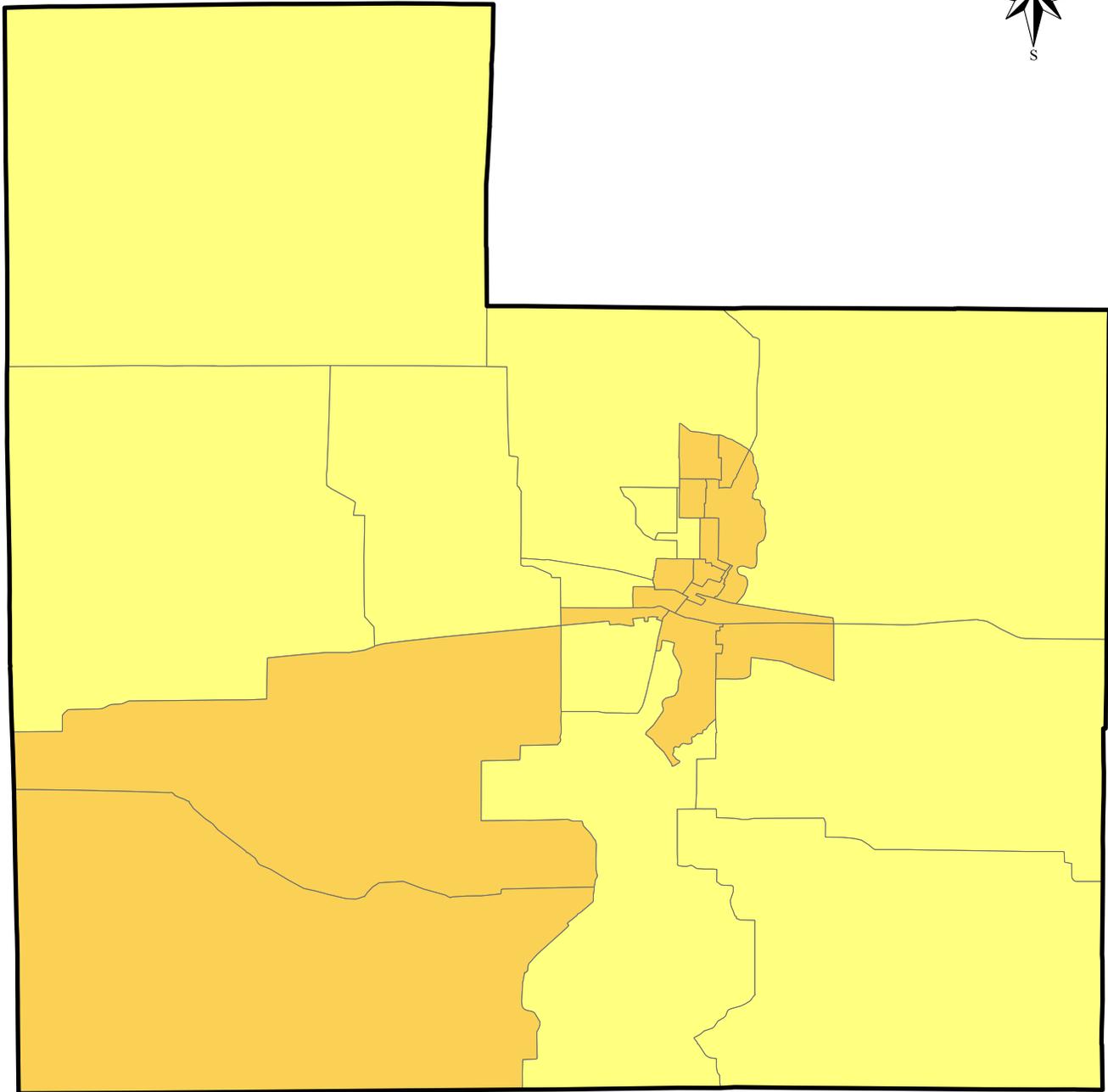
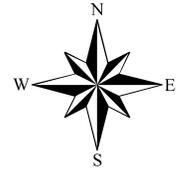


Source: Indiana Business Research Center, 2006

**Economic Profile**

**Employment and Income**

The U.S. Census Bureau reported in 2000 that there were 10,199 total households in Fayette County. Exhibit II.17 illustrates the density of households below the poverty level as a percentage of total households. Areas having a highest density (6.201 – 9.365 percent of total households) of households below the poverty level were found in the central sections of Richmond and in the southwestern portion of the county. The remainder of the region had low to very low densities of households below the poverty level.



**Group 4 Blockgroups**

-  0% - 6.2%
-  6.201% - 9.365%
-  9.366% - 15.57%
-  15.58% - 27.75%
-  27.76% - 100%



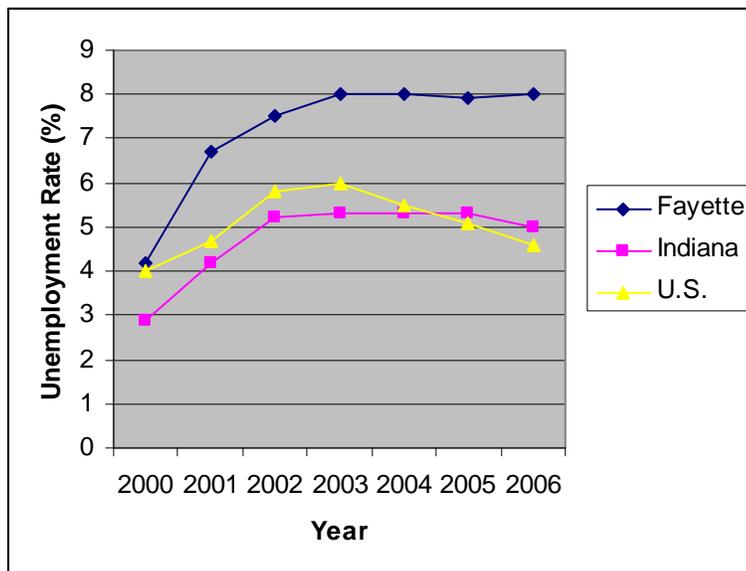
Exhibit II-17:  
Households Below Poverty  
As a percent of total households

Fayette County

**Industry and Labor Force**

The 2006 Fayette County labor force consisted of 10,926 individuals according to the U. S. Bureau of Labor and the Indiana Department of Workforce Development. The County’s unemployment rate in July of 2007 was 7.0 percent, significantly higher than the State of Indiana (4.5 percent). The County ranked number one in the State for its unemployment rate at that time. From 2000 to 2006, the unemployment rate for Fayette County has increased from 4.2 percent to 8.0 percent and has been much higher than the state and national levels. Exhibit II.18 illustrates a comparison of the unemployment rates in the County, State of Indiana, and the United States.

**Exhibit II.18: Comparison of Unemployment Rates**

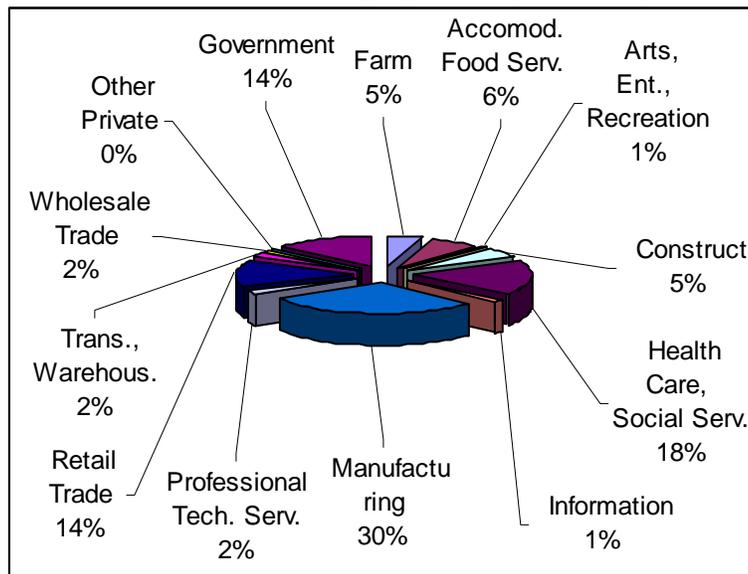


Source: Indiana Department of Workforce Development

**INDUSTRY AND LABOR FORCE**

The manufacturing sector was the largest industry in the County with 3,023 employees in 2005. “Other private” sectors were the second largest employer (1,793 employees) and “Health care and social services” was the third largest. Reportedly, 1,392 workers were employed by the government. In addition, 1,430 people were employed by the “retail trade”. Exhibit II.19 is an illustration of the employment by industry.

**Exhibit II.19: Employment by Industry**



Source: U.S. Bureau of Economic Analysis, 2005

The “manufacturing” sector had the highest reported total wages of 2005 earning \$215,487,000. “Health care, social services” and “government” employment reported the second and third highest total wages according to the U.S. Bureau of Economic Analysis (see Exhibit II.20). The table in Exhibit II.19 outlines the total wages earned by industry.

**Exhibit II.20: Employment by Industry**

Employment	Annual Earnings
Other Private	\$33,073
Manufacturing	\$215,487
Government	\$57,652
Retail Trade	\$30,450
Health Care and Social Asst.	\$58,755
Construction	\$10,081
Whole Sale Trade	\$7,163
Transp. and Warehouse	\$5,603
Agriculture	\$827
Accommodation and Food Service	\$7,000
Information	\$3,748
Arts & Rec.	\$1,347
Prof. and Tech.	\$6,937

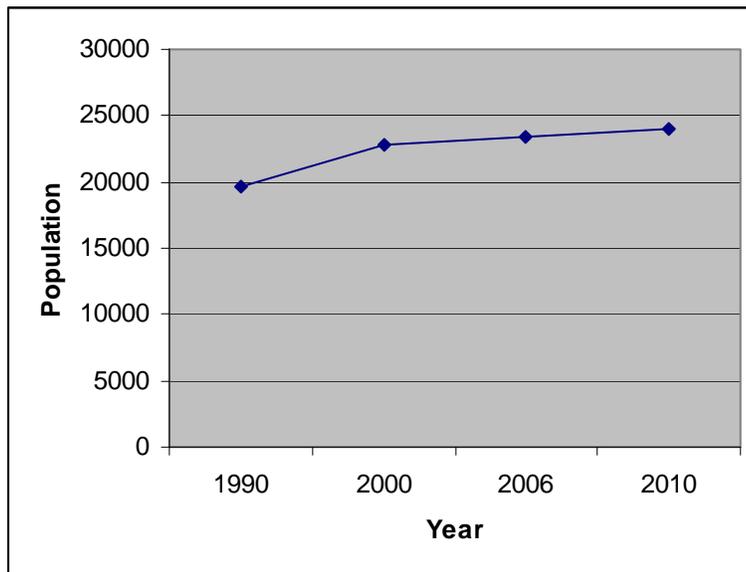
Source: U.S. Bureau of Economic Analysis

**FRANKLIN COUNTY**

**Population Growth**

According to information from the State of Indiana, the total population of Franklin County in 2006 was 23,373 persons. This is an increase from the 2000 Census population of 22,773. This means the region has grown 2.6 percent between 2000 and 2006. The Indiana Business Research Center is projecting an increase in population for Franklin County. The projected population for 2010 is 24,035, an increase of 2.8 percent from 2006. Exhibit II.21 illustrates the historical and projected population trends for Franklin County through the year 2010.

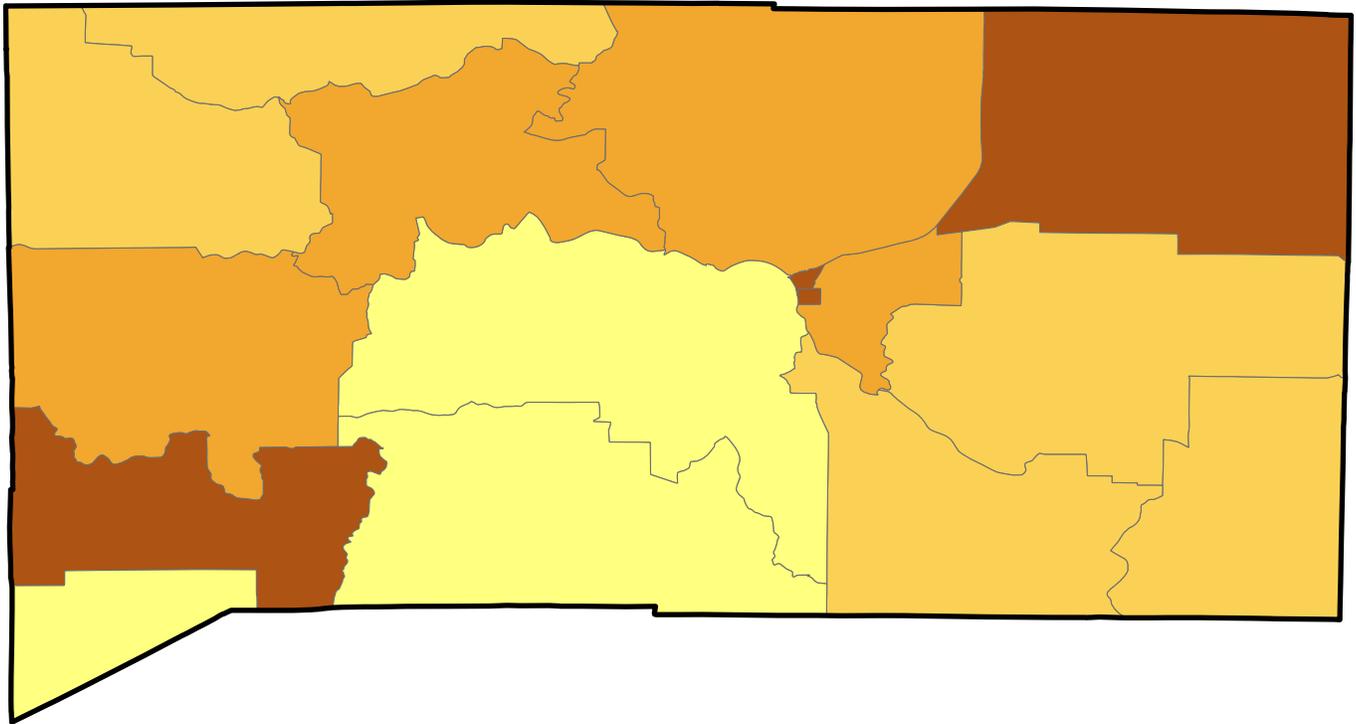
**Exhibit II.21: Population Trends**



Source: 1990 & 2000 Census Bureau & STATS Indiana

**Age**

Exhibit II.21 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of residents aged 65 and older (27.12 – 100 percent of total population) are in the area of Connersville. Areas of moderately high density of older adults are found in the northwest corner of the county; near Connersville; and south of Connersville



**Group 4 Blockgroups**

-  0% - 7.9%
-  7.9% - 10.0%
-  10.0% - 15.1%
-  15.1% - 20.0%
-  20.0% - 30.0%

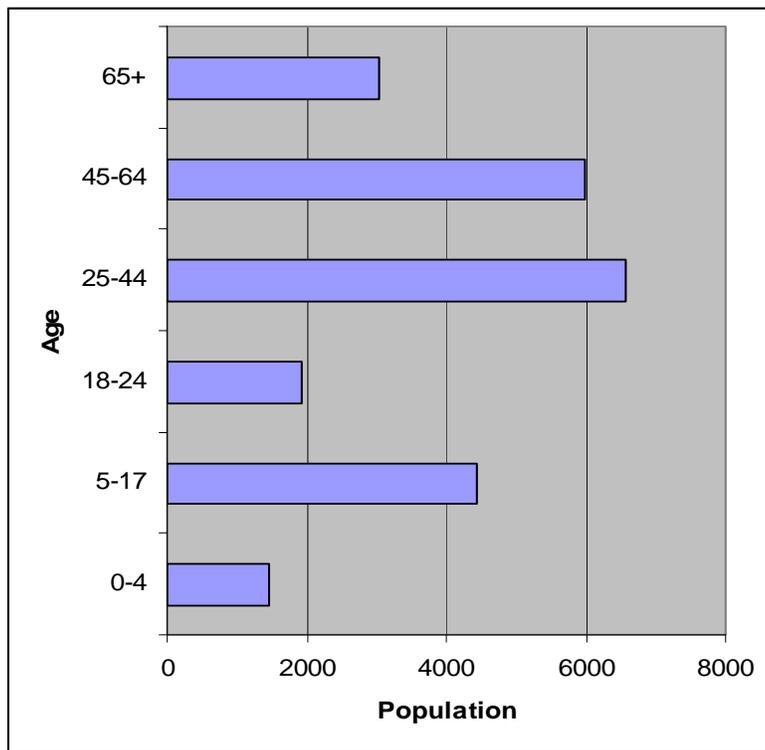


Exhibit II-22:  
Population 65 and Over  
As a percent of total population

Franklin County

According to the 2000 statistics from the U.S. Census, the largest age cohort for Franklin County in 2000 was between age 25 and 44, constituting 28 percent of the county’s population (see Exhibit II.23). The second largest age group was 45 to 64 year olds (25.6 percent). Approximately 25 percent of the population in Franklin County was under age 18, while 13 percent was age 65 or older. The distribution indicates that the County has a relatively younger population with a higher percentage of young and persons of working age.

**Exhibit II.23: Population by Age**

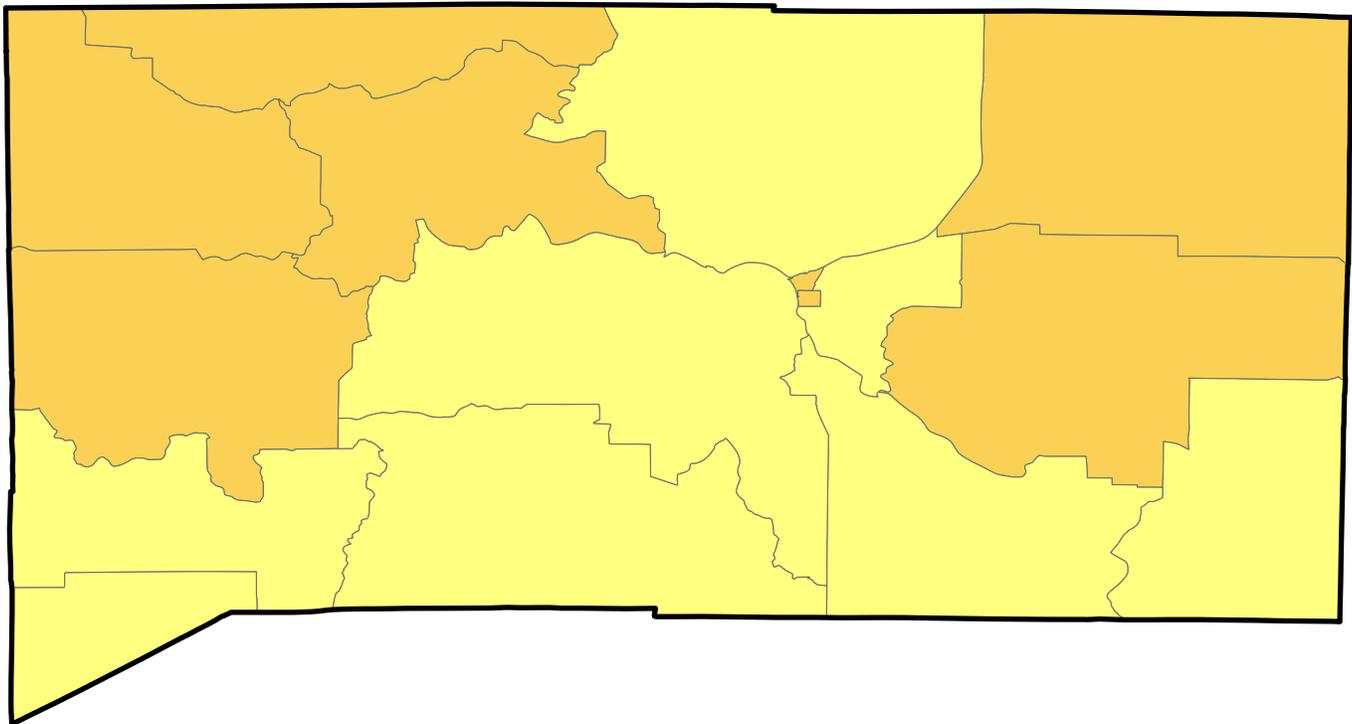
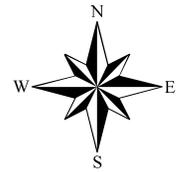


Source: 2000 US Census Data

**Economic Profile**

**Employment and Income**

The U.S. Census Bureau reported in 2000 that there were 7,868 total households in Franklin County. Exhibit II.24 illustrates the density of households below the poverty level per square mile. Areas having a high density (750-3390 households per square mile) of households below the poverty level were found in the central sections of Richmond and Connersville. Areas of moderate density of households below the poverty level (100-450) exist in the central section of Richmond, Connersville, and the southeastern section of Rushville. The remainder of the region had low to very low densities of households below the poverty level.



**Group 4 Blockgroups**

-  0% - 6.2%
-  6.201% - 9.365%
-  9.366% - 15.57%
-  15.58% - 27.75%
-  27.76% - 100%



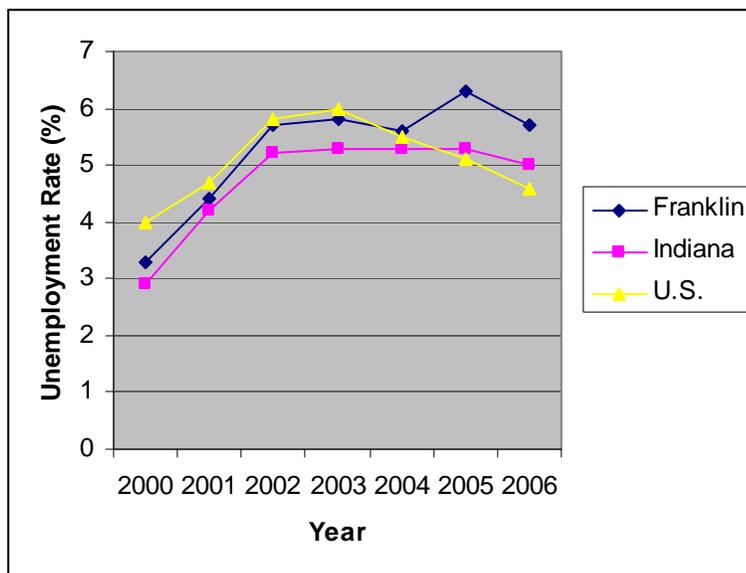
Exhibit II-24:  
Households Below Poverty  
As a percent of total households

Franklin County

**Industry and Labor Force**

The 2006 Franklin County labor force consisted of 12,246 individuals according to the U. S. Bureau of Labor and the Indiana Department of Workforce Development. The county’s unemployment rate reached a high in 2005 of over 6 percent, and remained higher than the Indiana, and national unemployment rates. Since 2000, the unemployment rate for Franklin County has varied but remained higher than both the state and national levels. Exhibit II.25 illustrates a comparison of the unemployment rates in the County, State, and the United States.

**Exhibit II.25: Comparison of Unemployment Rates**

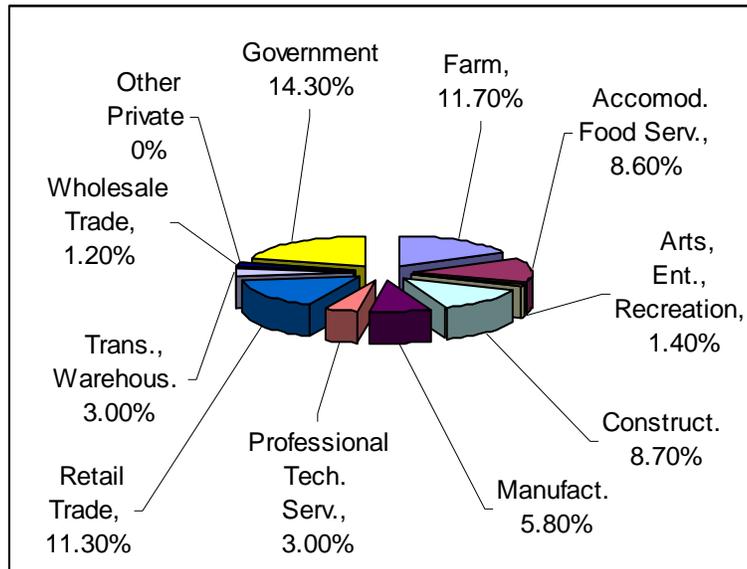


Source: Indiana Department of Workforce Development

**Employment by Industry**

The government sector was the largest industry in the region with 1,039 employees in 2005. “Other private” sectors were the second largest employer (877 employees) and “agriculture” was the third largest. Reportedly, 816 workers were employed by the “retail trade” industry. Exhibit II.26 is an illustration of the employment by industry.

**Exhibit II.26: Employment by Industry**



Source: U.S. Bureau of Economic Analysis, 2005

The government sector had the highest reported total wages of 2005 earning \$41,418,000. “Other private” and “manufacturing” employment reported the second and third highest total wages according to the U.S. Bureau of Economic Analysis (see Exhibit II.27). ‘Professional and technical,’ and the ‘health care and social assistance’ did not have County data information available due to Bureau of Economic Analysis non-disclosure requirements. The table in Exhibit II.27 outlines the total wages earned by industry.

**Exhibit II.27: Employment by Industry**

Employment	Annual Earnings
Other Private	\$23,052
Manufacturing	\$20,789
Government	\$41,418
Construction	\$18,716
Transp. and Warehouse	\$5,037
Retail Trade	\$12,062
Agriculture	\$4,236
Whole Sale Trade	\$3,926
Accommodation and Food Service	\$6,594
Arts & Rec.	\$786
Prof. and Tech.	\$ *
Health Care and Social Asst.	\$ *

Source: US Bureau of Economic Analysis

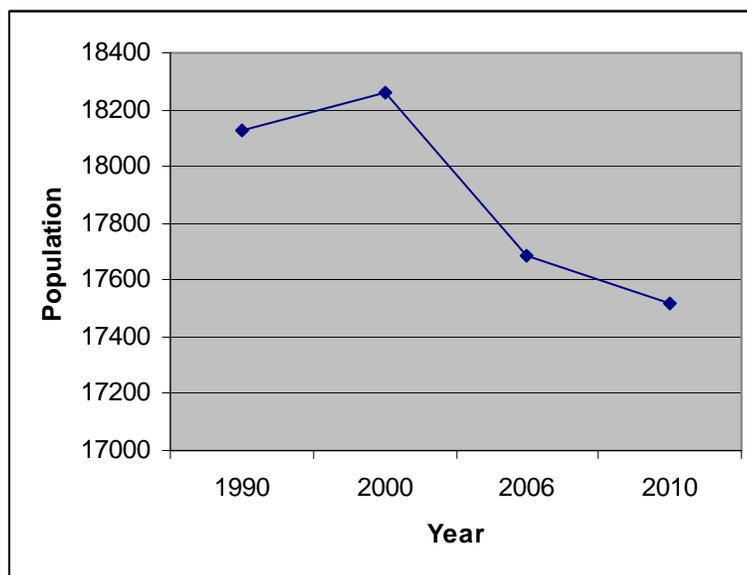
\* Data not available due to BEA non-disclosure requirements.

**RUSH COUNTY**

**Population Growth**

According to information from the State of Indiana, the total population of Rush County in 2006 was 17,684 persons. This is a decrease from the 2000 Census population of 18,261. This means the region lost 3.3 percent of its population between 2000 and 2006. The Indiana Business Research Center is projecting another decrease in population for Rush County. The projected population for 2010 is 17,521, a decrease of 0.9 percent from 2006. Exhibit II.28 illustrates the historical and projected population trends for Rush County through the year 2010.

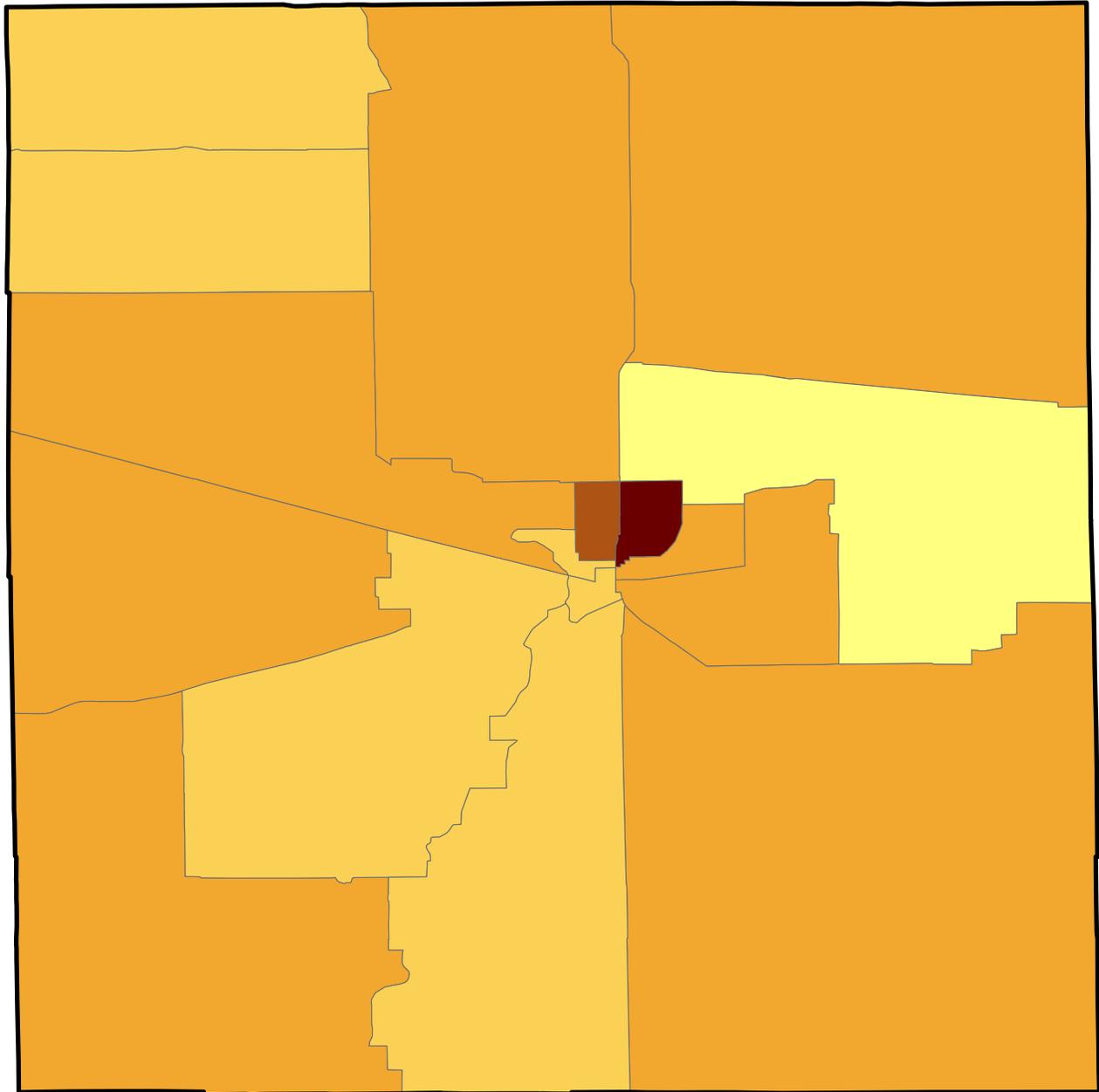
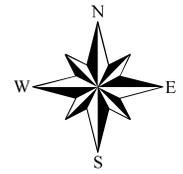
**Exhibit II.28: Population Trends**



Source: 1990 & 2000 Census Bureau & STATS Indiana

**Age**

Exhibit II.29 illustrates the density of persons aged 65 and older by Census block group for Rush County. The block group with the highest density of Rush County residents aged 65 and older (27.12 to 100 percent of total people per square mile) is in the central and east portion of Rushville. Areas of moderately high and moderate density of senior citizens are in the central and west portion of Rushville. The remainder of the region moderate to moderately low densities of people age 65 and older per block group.



**Group 4 Blockgroups**

-  0% - 8.9%
-  8.901% - 12.99%
-  13% - 18.79%
-  18.8% - 27.11%
-  27.12% - 100%

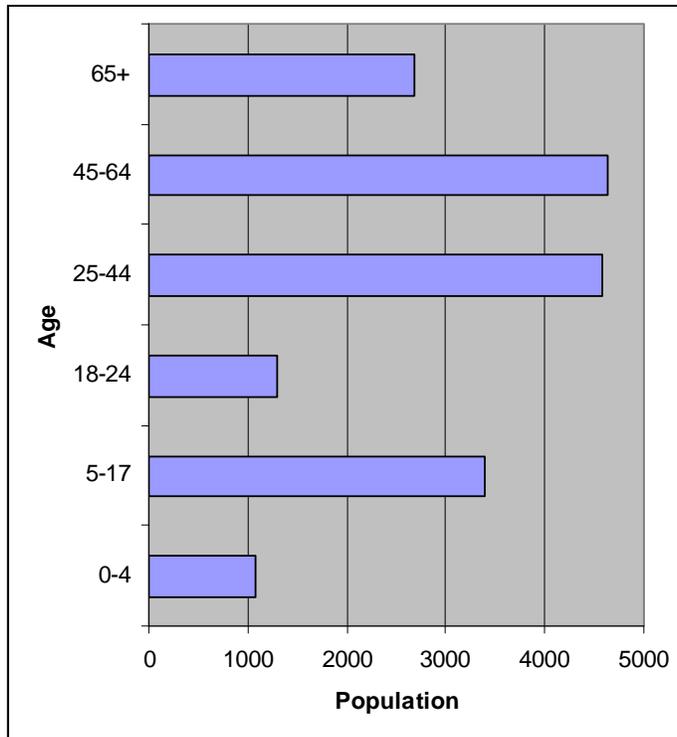


Exhibit II-29:  
Population 65 and Over  
As a percent of total population

Rush County

According to the 2000 statistics from the U.S. Census, the largest age cohort for Rush County in 2000 was between age 45 and 64, constituting 26.2 percent of the county’s population (see Exhibit II.30). The second largest age group was 25 to 44 year olds (25.9 percent). Approximately 25.3 percent of the population in Rush County was under age 18, while over 15 percent was age 65 or older. The distribution indicates that approximately 50 percent of the county population is of working age.

**Exhibit II.30: Population by Age**

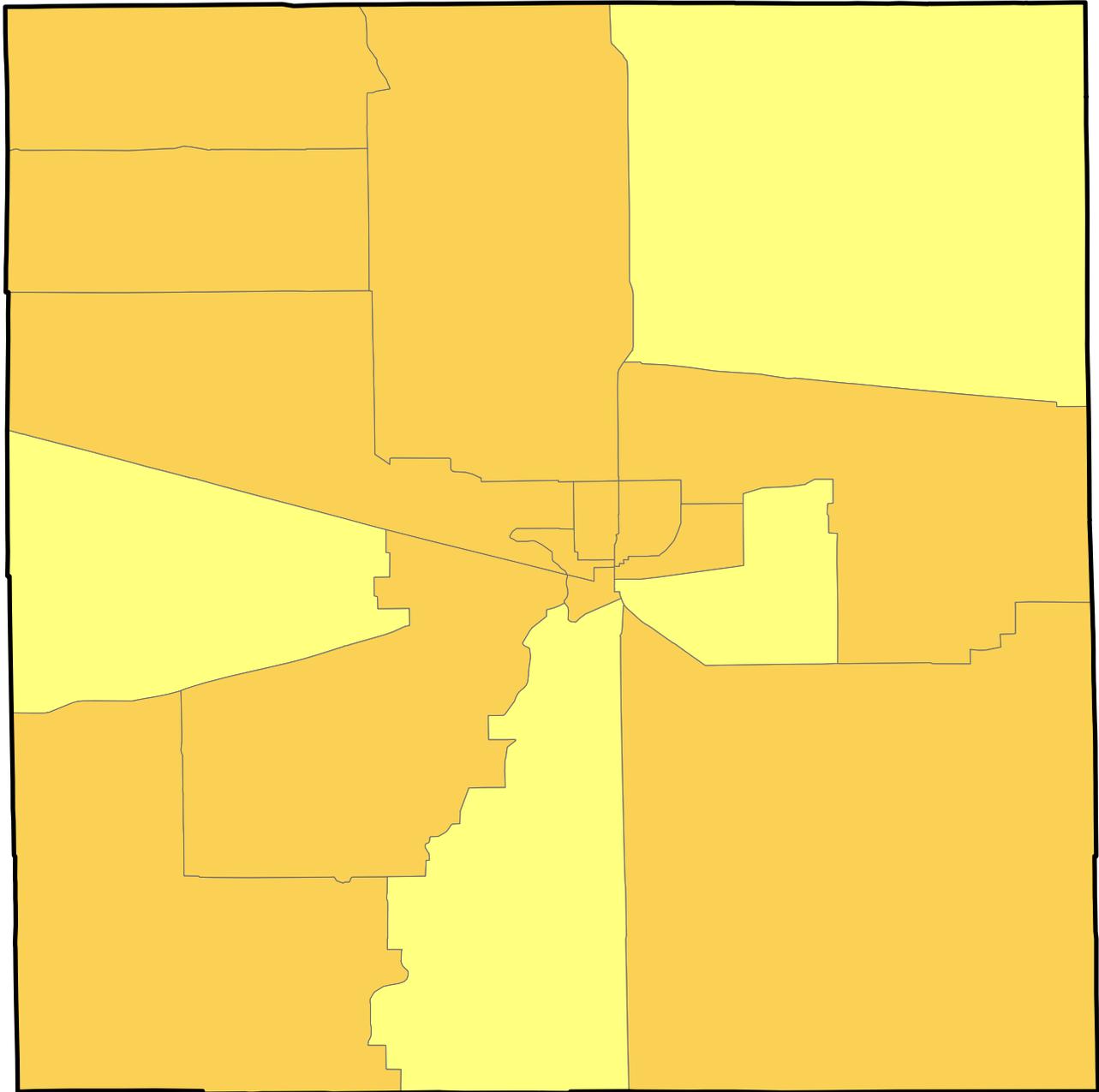


Source: 2000 US Census Data

**Economic Profile**

**Employment and Income**

The U.S. Census Bureau reported in 2000 that there were 6,923 total households in Rush County. Exhibit II.31 illustrates the density of households below the poverty level as a percentage of total households. There are no block groups with densities above 9.365 percent of the total households above the poverty level. Areas having the highest density for the county (6.2 to 9.365 percent of total households) of households below the poverty level were found in the northwest, southwest, southeast, and south-central portions of the county. Areas of lower density of households below the poverty level exist in the remainder of the county.



**Group 4 Blockgroups**

-  0% - 6.2%
-  6.201% - 9.365%
-  9.366% - 15.57%
-  15.58% - 27.75%
-  27.76% - 100%



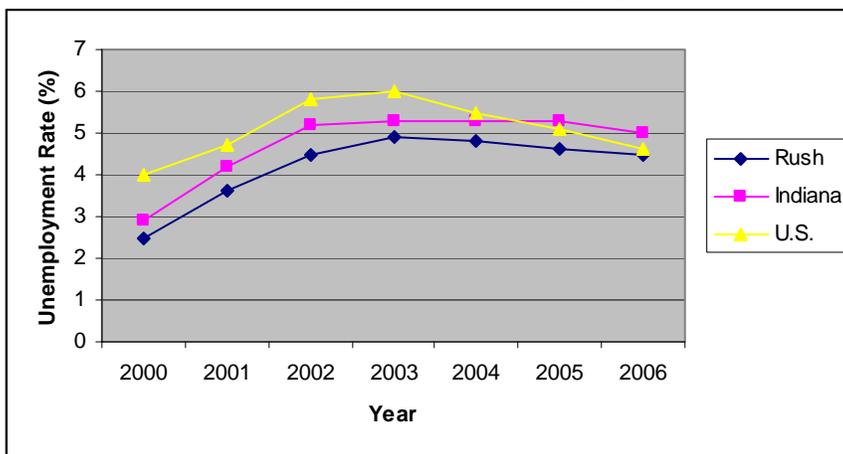
Exhibit II-31:  
Households Below Poverty  
As a percent of total households

Rush County

**Industry and Labor Force**

The 2006 Rush County labor force consisted of 9,620 individuals according to the U. S. Bureau of Labor Statistics and the Indiana Department of Workforce Development. The County’s unemployment rate reached a high in 2003 of 4.9 percent, but remained less than the State of Indiana unemployment rate. Since 2000, the unemployment rate for Rush County has increased from 2.5 percent in 2000 to over 4.5 percent for 2002-2006 but has remained below the State of Indiana and the national unemployment rate. Exhibit II.32 illustrates a comparison of the unemployment rates in the County, State, and the United States.

**Exhibit II.32: Comparison of Unemployment Rates**

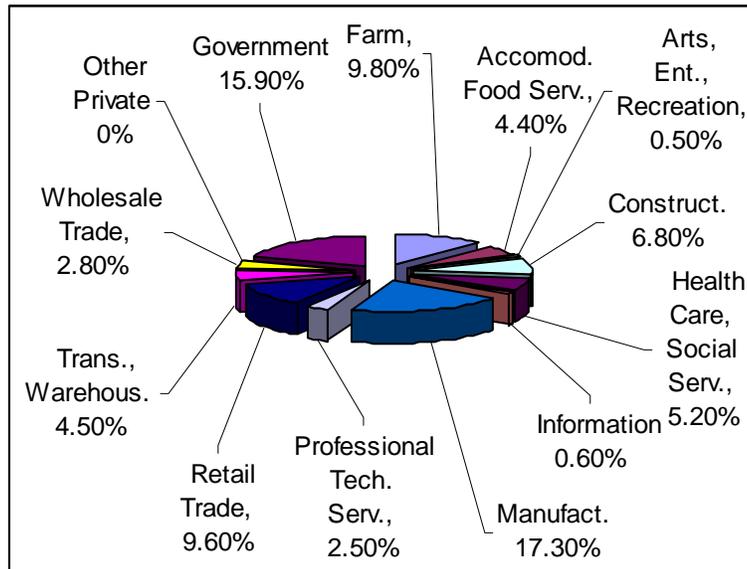


Source: Indiana Department of Workforce Development

**Employment by Industry**

“Other private” sector was the largest industry in the region with 1,604 employees in 2005. “Manufacturing” sectors were the second largest employer (1,414 employees) and “government” was the third largest. Reportedly, 803 workers were employed by the “agriculture” industry. In addition, 784 people were employed by the “retail trade” sector. Exhibit II.33 is an illustration of the employment by industry.

**Exhibit II.33: Employment by Industry**



Source: U.S. Bureau of Economic Analysis, 2005

The manufacturing sector had the highest reported total wages of 2005 earning \$77,837,000. Government and “other private” employment reported the second and third highest total wages according to the U.S. Bureau of Economic Analysis (see Exhibit II.33). ‘Arts and Recreation’ reported the lowest total wages of 2005 earning \$439,000. The table in Exhibit II.34 outlines the total wages earned by industry.

**Exhibit II.34: Employment by Industry**

Employment	Annual Earnings
Other Private	\$37,141
Manufacturing	\$77,837
Government	\$53,648
Health Care and Social Asst.	\$11,542
Construction	\$17,602
Retail Trade	\$14,049
Transp. and Warehouse	\$13,103
Agriculture	\$10,496
Accommodation and Food Service	\$3,965
Prof. and Tech.	\$5,686
Whole Sale Trade	\$8,863
Information	\$1,180
Arts & Rec.	\$439

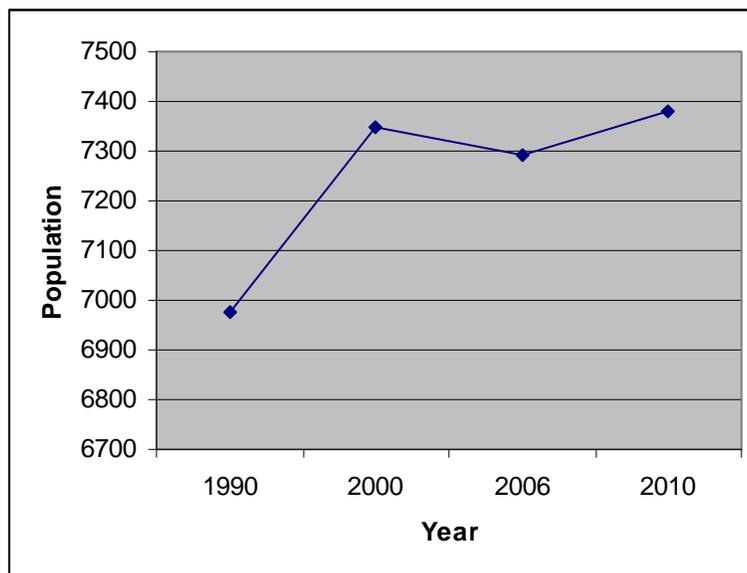
Source: US Bureau of Economic Analysis

**UNION COUNTY**

**Population Growth**

According to information from the State of Indiana, the total population of Union County in 2006 was 7,291 persons. This is a decrease from the 2000 Census population of 7,349. This means the region’s population was reduced by 0.8 percent between 2000 and 2006. The Indiana Business Research Center is projecting an increase in population for Union County. The projected population for 2010 is 7,380, an increase of 1.2 percent from 2006. Exhibit II.35 illustrates the historical and projected population trends for Union County through the year 2010.

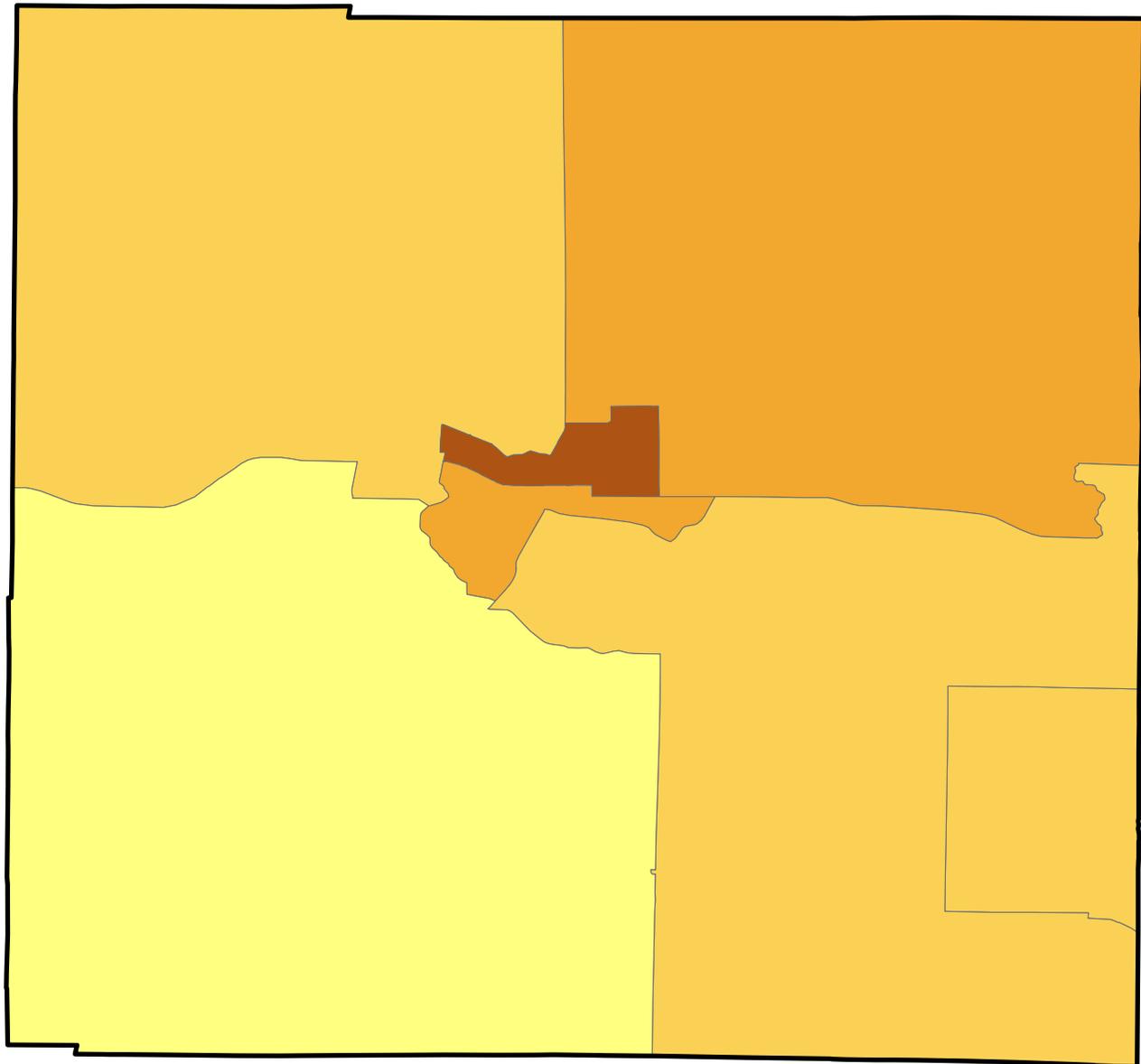
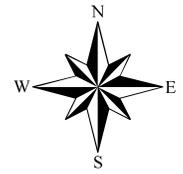
**Exhibit II.35: Population Trends**



Source: 1990 & 2000 Census Bureau & STATS Indiana

**Age**

Exhibit II.36 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Union County residents aged 65 and older (27.12 to 100 percent of the total population) are in the Liberty. Areas of moderately high and moderate density of older adults also are found around Liberty and in the northeast quarter of the county. The remainder of the region has moderate to very low elderly population density.



**Group 4 Blockgroups**

-  0% - 8.9%
-  8.901% - 12.99%
-  13% - 18.79%
-  18.8% - 27.11%
-  27.12% - 100%

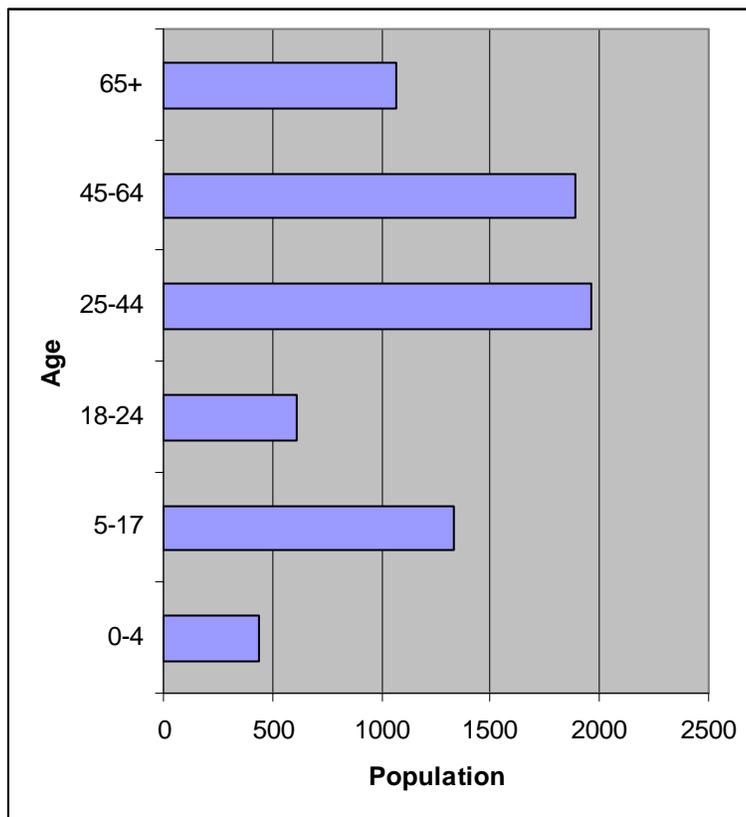


Exhibit II-36:  
Population 65 and Over  
As a percent of total population

Union County

According to the 2000 statistics from the U.S. Census, the largest age cohort for Union County in 2000 was between age 25 and 44, constituting 26.9 percent of the County's population (see Exhibit II.37). The second largest age group was 45 to 64 year olds (25.9 percent). Approximately 24.2 percent of the population in Union County was under age 18, while 14.7 percent was age 65 or older. The distribution indicates that the County had a relatively older population with a higher percentage of working age and older adults.

**Exhibit II.37: Population by Age**

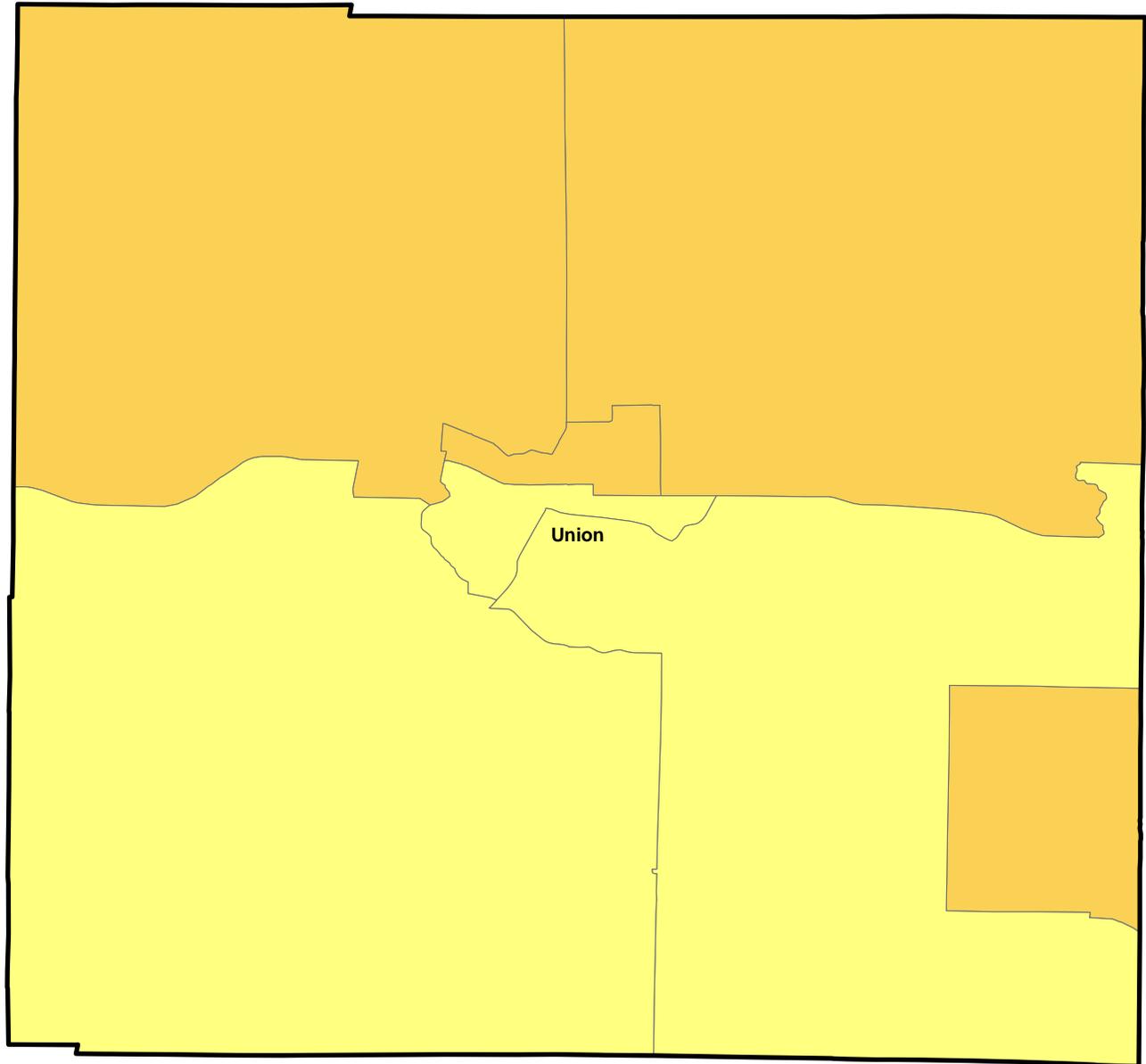


Source: 2000 US Census Data

**ECONOMIC PROFILE**

**Employment and Income**

The U.S. Census Bureau reported in 2000 that there were 2,793 total households in Union County. Exhibit II.38 illustrates the density of households below the poverty level per square mile. Areas having a moderate density (9.366 to 15.57 percent of total households) of households below the poverty level were found in the northern half of the



**Group 4 Blockgroups**

-  0% - 6.2%
-  6.201% - 9.365%
-  9.366% - 15.57%
-  15.58% - 27.75%
-  27.76% - 100%



Exhibit II-38:  
Households Below Poverty  
As a percent of total households

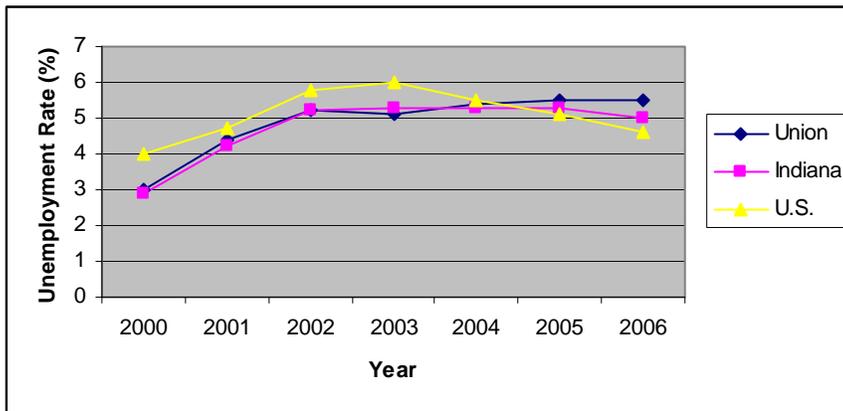
Union County

county. Areas of low density of households below the poverty level exist in the southern half of the county.

**INDUSTRY AND LABOR FORCE**

The 2006 Union County labor force consisted of 3,928 individuals according to the U. S. Bureau of Labor Statistics and the Indiana Department of Workforce Development. The County’s unemployment rate reached a high in 2005 of 5.5 percent, and was higher than the Indiana and the national unemployment rates. Since 2000, the unemployment rate for Union County has fluctuated between 3.0 percent and 5.5 percent and has mostly been below the State and national unemployment rate levels. Exhibit II.39 illustrates a comparison of the unemployment rates in Union County, Indiana, and the United States.

**Exhibit II.39: Comparison of Unemployment Rates**

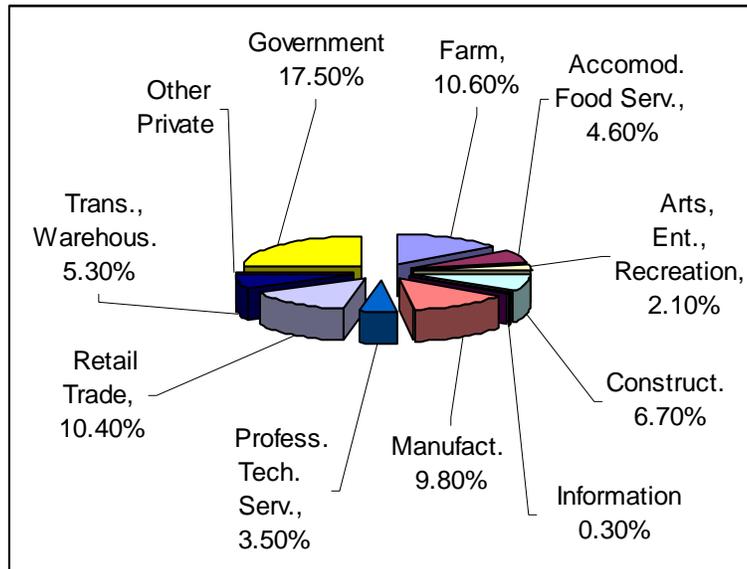


Source: Bureau of Labor Statistics

**Employment by Industry**

The government sector was the largest industry in the County with 513 employees in 2005. “Other private” sectors were the second largest employer (379 employees) and “agriculture” was the third largest. Reportedly, 307 workers were employed by the “retail trade” sector. In addition, 287 people were employed by the manufacturing sector. Exhibit II.40 is an illustration of the employment by industry.

**Exhibit II.40: Employment by Industry**



Source: U.S. Bureau of Economic Analysis, 2005

The government sector had the highest reported total wages of 2005 earning \$20,119,000. Manufacturing and “other private” employment reported the second and third highest total wages according to the U.S. Bureau of Economic Analysis (see Exhibit II.41). “Wholesale trade” and the ‘health care and social assistance’ did not have County data information available due to Bureau of Economic Analysis non-disclosure requirements. The table in Exhibit II.41 outlines the total wages earned by industry

**Exhibit II.41: Employment by Industry**

Employment	Annual Earnings
Other Private	\$6,650
Manufacturing	\$13,291
Government	\$20,119
Arts & Rec.	\$695
Retail Trade	\$5,048
Construction	\$3,951
Transp. and Warehouse	\$6,113
Accommodation and Food Service	\$1,619
Whole Sale Trade*	\$ -
Information	\$100
Agriculture	\$3,183
Prof. and Tech.	\$1,927
90Health Care and Social Asst. *	\$ -

Source: US Bureau of Economic Analysis

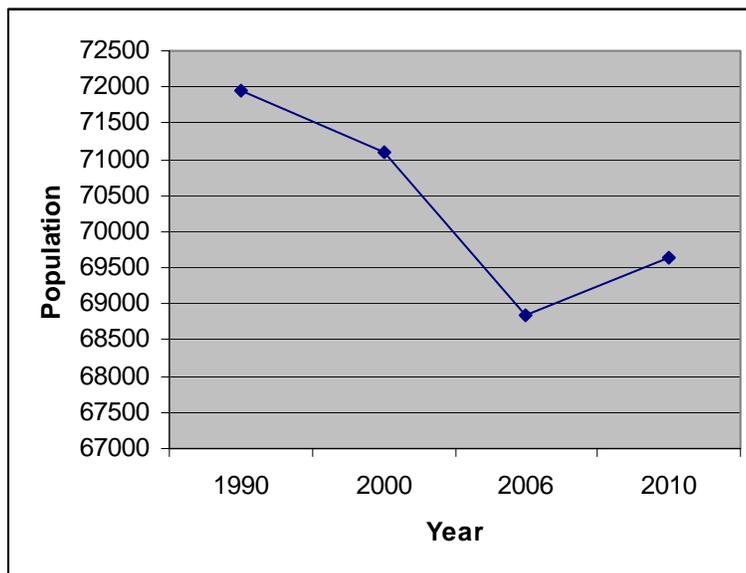
\* Data not available due to BEA non-disclosure requirements.

**WAYNE COUNTY**

**Population Growth**

According to information from the State of Indiana, the total population of Wayne County in 2006 was 68,846 persons. This is a decrease from the 2000 Census population of 71,097. This means the region lost 3.2 percent of its population between 2000 and 2006. However, the Indiana Business Research Center is projecting an increase in population for Wayne County. The projected population for 2010 is 69,641, an increase of 1.2 percent from 2006. Exhibit II.42 illustrates the historical and projected population trends for Wayne County through the year 2010.

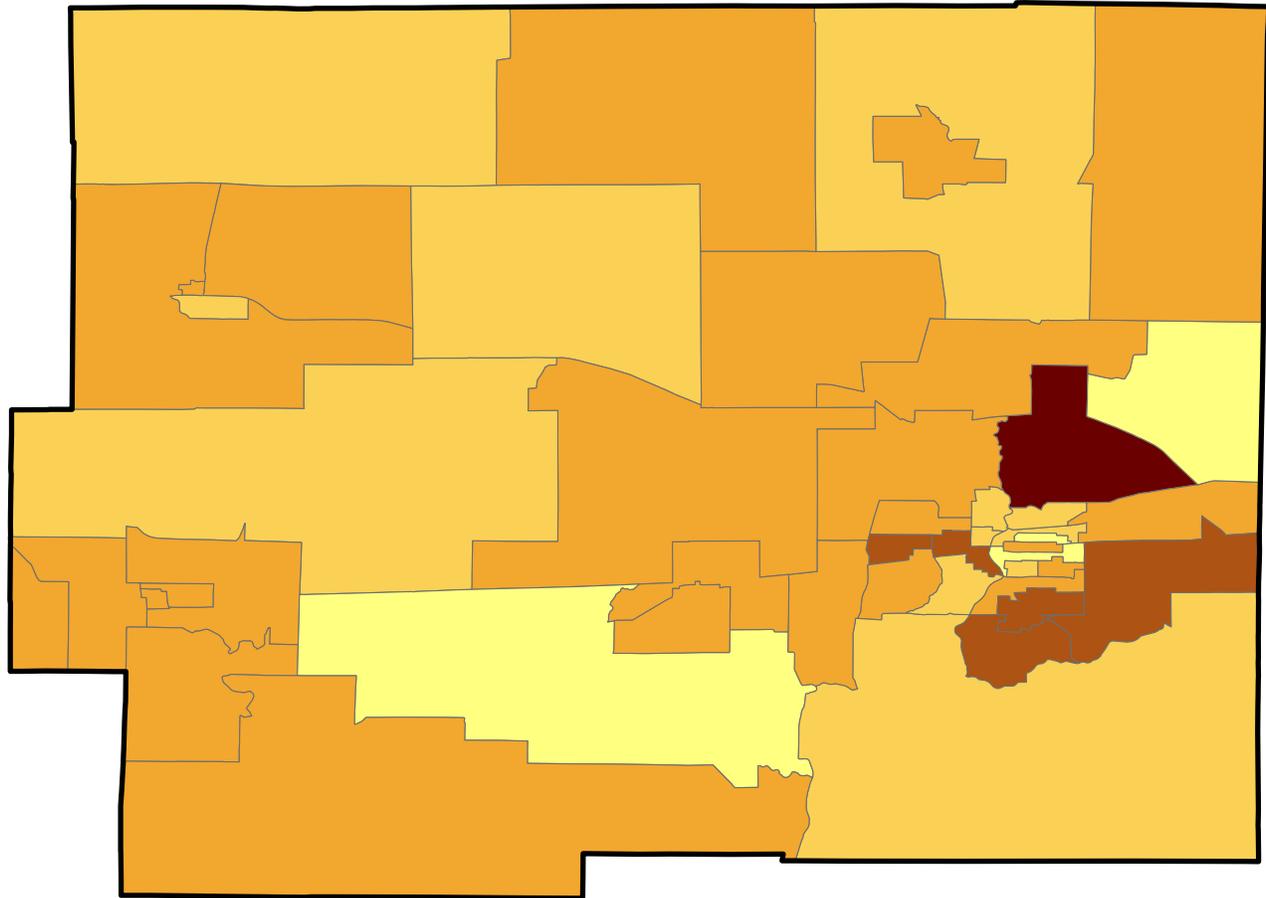
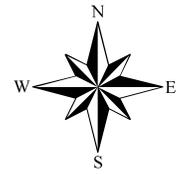
**Exhibit II.42: Population Trends**



Source: 1990 & 2000 Census Bureau & STATS Indiana

**Age**

Exhibit II.43 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Wayne County residents aged 65 and older (27.12 to 100 percent of total population) are in the northeast portion of Spring Grove and the immediately surrounding area. Areas of moderately high and moderate density of older adults are found in the southern portion of Richmond and the immediately surrounding area. Areas around Whitewater, Economy, Hagerstown, Centerville, Dublin Cambridge City, and Milton also have moderate densities of older adults (13 to 18.79 percent of the total population).



**Group 4 Blockgroups**

-  0% - 8.9%
-  8.901% - 12.99%
-  13% - 18.79%
-  18.8% - 27.11%
-  27.12% - 100%

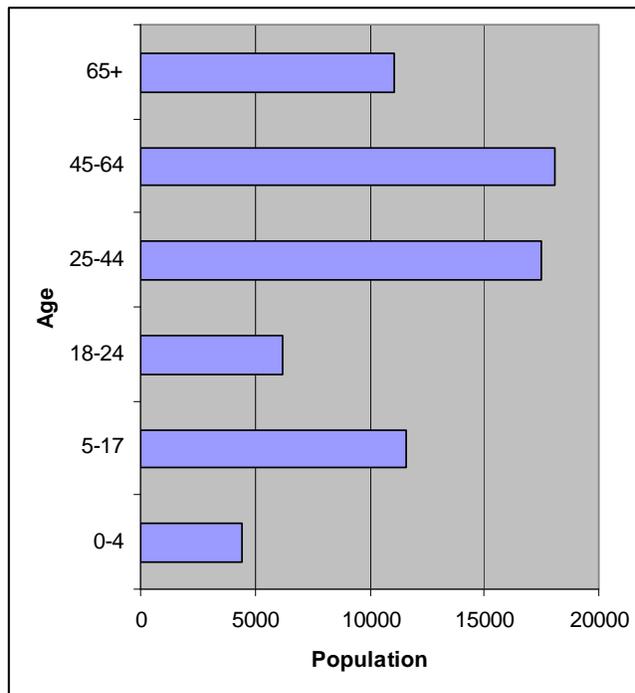


Exhibit II-43:  
Population 65 and Over  
As a percent of total population

Wayne County

According to the 2000 statistics from the U.S. Census, the largest age cohort for Wayne County in 2000 was between age 45 and 64, constituting 26.2 percent of the County's population (see Exhibit II.44). The second largest age group was 25 to 44 year olds (25.4 percent). Approximately 25 percent of the population in Wayne County was under age 18, while 16.1 percent was age 65 or older. The distribution indicates that the County had a relatively older population with a higher percentage of senior citizens.

**Exhibit II.44: Population by Age**

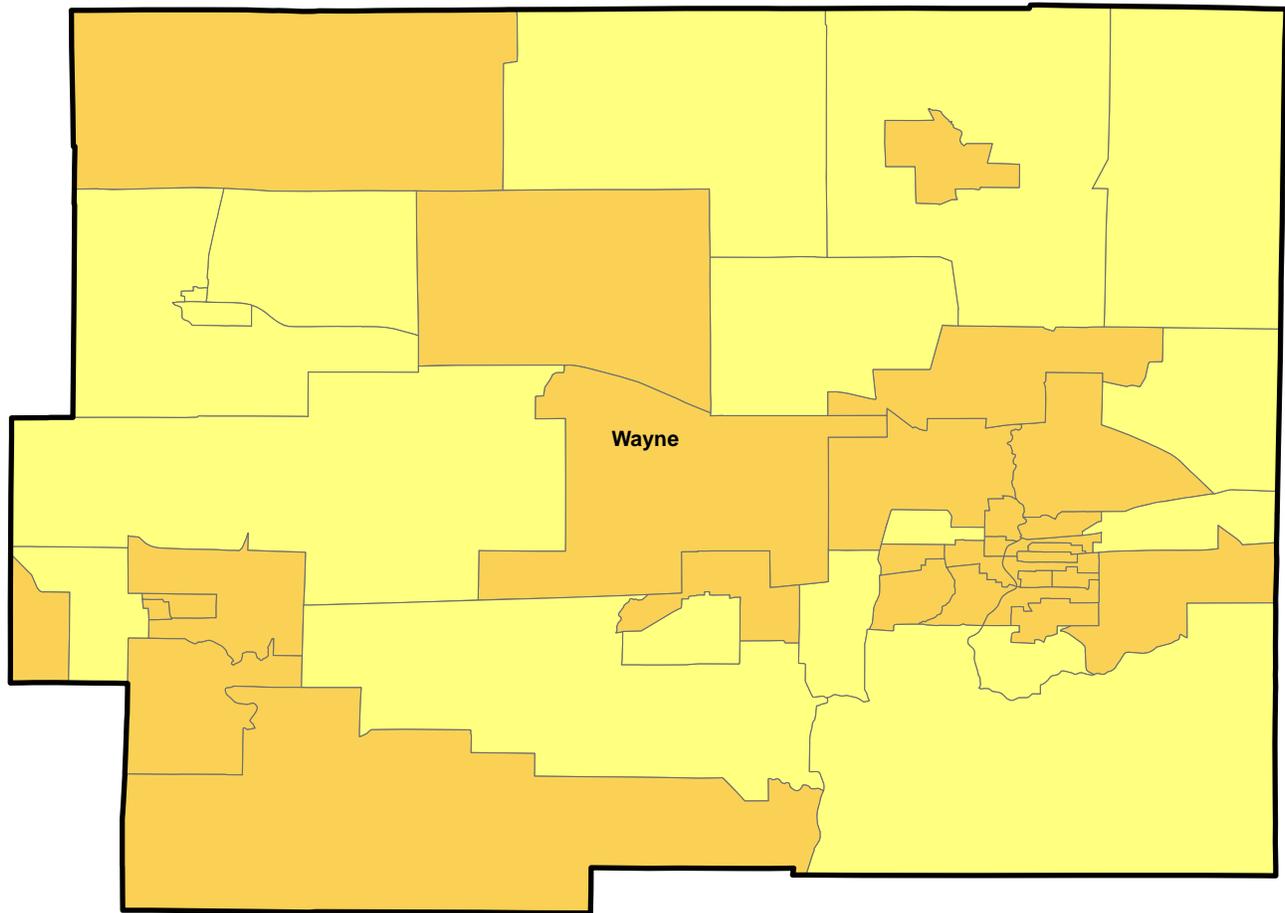


Source: 2000 US Census Data

**Economic Profile**

**Employment and Income**

The U.S. Census Bureau reported in 2000 that there were 28,469 total households in Wayne County. Exhibit II.45 illustrates the density of households below the poverty as a percent of the total households. Areas having a moderate density (9.36 to 15.57 percent of total households) of households below the poverty level were found in Spring Grove, Richmond, Connersville, Milton, Green Fork, Economy and Fountain City, and their immediate surrounding areas. Areas of moderately low



**Group 4 Blockgroups**

-  0% - 6.2%
-  6.201% - 9.365%
-  9.366% - 15.57%
-  15.58% - 27.75%
-  27.76% - 100%



Exhibit II-45:  
Households Below Poverty  
As a percent of total households

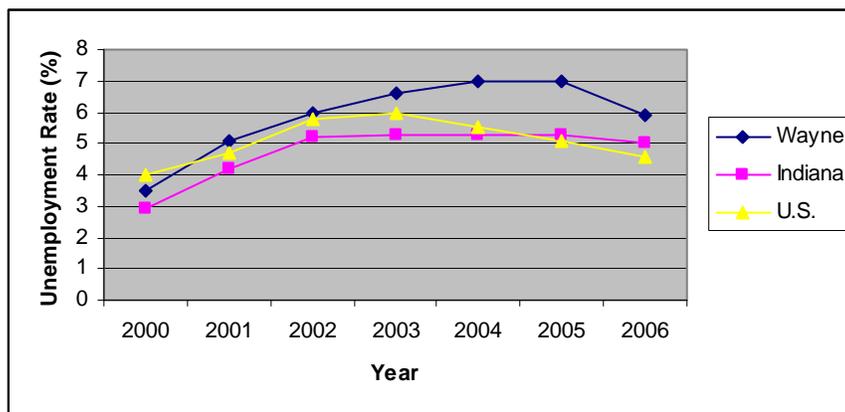
Wayne County

density of households below the poverty level (6.201 to 9.365 percent) exist in the more rural areas of the county.

**INDUSTRY AND LABOR FORCE**

The 2006 Wayne County labor force consisted of 34,406 individuals according to the U. S. Bureau of Labor Statistics and the Indiana Department of Workforce Development. The County’s unemployment rate reached a high in 2004 of 7 percent which was higher than the State of Indiana unemployment rate. Since 2000, the unemployment rate for Wayne County has remained consistently higher than the State and national levels. Exhibit II.46 illustrates a comparison of the unemployment rates for the County, State, and the nation.

**Exhibit II.46: Comparison of Unemployment Rates**

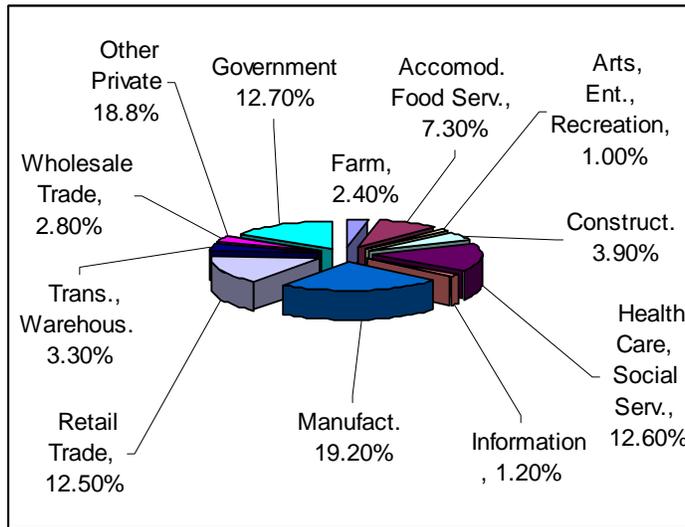


Source: Bureau of Labor Statistics

**Employment by Industry**

The manufacturing sector was the largest industry in the County with 7,785 employees in 2005. “Other private” sectors were the second largest employer (7,638 employees) and government was the third largest. Reportedly, 5,122 workers were employed by the health care and social services industry. In addition, 2,954 people were employed by the accommodations and food services sector. Exhibit II.47 is an illustration of the employment by industry.

**Exhibit II.47: Employment by Industry**



Source: U.S. Bureau of Economic Analysis, 2005

The manufacturing sector had the highest reported total wages of 2005 earning \$395,425,000. Government and health care/social services employment reported the second and third highest total wages according to the U.S. Bureau of Economic Analysis (see Exhibit II.48). “Professional and technical services” did not have County data information available due to Bureau of Economic Analysis non-disclosure requirements. The “arts and recreation” industry had the smallest earnings of \$4,182,000. The table in Exhibit II.48 outlines the total wages earned, by industry.

**Exhibit II.48: Employment by Industry**

<b>Employment</b>	<b>Annual Earnings</b>
Other Private	\$186,710
Government	\$221,869
Construction	\$49,099
Health Care and Social Asst.	\$203,245
Retail Trade	\$112,860
Accommodation and Food Service	\$40,635
Whole Sale Trade	\$53,760
Agriculture	\$6,740
Manufacturing	\$395,425
Transp. and Warehouse	\$48,418
Information	\$16,076
Prof. and Tech.*	\$ -
Arts & Rec.	\$4,182

Source: US Bureau of Economic Analysis

\* Data not available due to BEA non-disclosure requirements.

**III. INVENTORY OF EXISTING  
TRANSPORTATION  
SERVICES**

### III. INVENTORY OF EXISTING TRANSPORTATION SERVICES

The five counties in the region are located in east-central Indiana. A comprehensive survey instrument, designed after the *Framework for Action*, was sent to 86 local government entities, agencies, and transportation providers to gain information on existing transportation programs and services. The survey was available online at [http://www.sndayton.com/INDOT\\_coordination\\_survey](http://www.sndayton.com/INDOT_coordination_survey), as well as via fax or U.S. mail upon request. A copy of the request for participation that was distributed statewide local meeting announcements and agendas, a copy of the RTAP newsletter posting, a complete list of agencies and organizations to which a request to complete the on-line survey was sent, and the organizations that responded is provided in the Appendix. Transportation providers were also notified of the requirement for participation in the survey at annual transportation planning meetings with INDOT.

Several of the human service agencies that provide services in this region also serve neighboring regions that have been outlined in other sections of the INDOT Statewide Coordinated Transportation Plan. References to the appropriate section are provided below as a resource for additional information about those agencies. A complete list of organizations that responded to the INDOT stakeholder survey is provided below:

- Achieva Resources Corporation, Inc.
- Batesville Community School Corporation
  - Also included with Dearborn, Decatur, Jefferson, Jennings, Ohio, Ripley and Switzerland counties report.
- City of Richmond, Community Development/Rose View Transit
- Dunn Mental Health
- Developmental Services, Inc.
  - Also included with Dearborn, Decatur, Jefferson, Jennings, Ohio, Ripley and Switzerland counties report.
- Fayette Community Council on Aging and Aged, Inc.
- Franklin County Public Transportation
- Hand-in-Hand Adult Day Care of Richmond, Inc.
- Meridian Services
  - Also included with Adams, Blackford, Delaware, Grant, Henry, Jay, Madison, Randolph and Wells counties report.
- Rush County Senior Citizens Services
- Union County Transit
- Wayne County Vision
- WorkOne
  - Also included with Adams, Blackford, Delaware, Grant, Henry, Jay, Madison, Randolph and Wells counties report.

The Whitewater Valley region conducted a coordinated feasibility study with the Community Transportation Association of America (CTAA) prior to this INDOT sponsored Statewide Coordinated Transportation Plan. Findings from that report have been incorporated into this document to supplement the new information. Whitewater Valley Regional Coordination Feasibility Plan community participation included the following organizations:

- Fayette Memorial Hospital
- Fayette County Transit
- Rush County Senior Center/Ride Rush
- Union County Department of Family Resources
- Achieva Resources
- Whitewater Valley United Way
- Area 9 Services (Aging)
- Richmond Adult Day Care
- Richmond/Rose View Transit
- Americare Nursing Home
- Hickory Creek Nursing Home
- Vocational Rehabilitation
- Independent Living Center
- Reid Hospital
- Dunn Mental Health Center
- Indiana University East
- VA Service Center
- Franklin County Transportation
- Western Wayne Senior Center
- Richmond Senior Center
- YMCA
- Work One
- Union County School Corporation
- Edwards Memorial Pre-school
- Union County Probation Department
- Wayne County Commissioners
- Union County Head Start
- Union County Commissioners
- Wayne County Visioning
- River Valley Resources
- Centerville-Abington Senior Center
- Union County Transit
- Senior Opportunities Services

A list of the 14 entities/agencies which responded to the Whitewater Valley Regional Coordinated Transportation survey is provided below. Of those responding to the survey and including known public transit providers, seven were transportation providers while the remainder either

did not need transportation services or transportation was contracted out to other entities.

Whitewater Valley Regional Survey Respondents:

- Rush County Senior Center
- Union County Department of Family Resources
- Achieva Resources
- Richmond/Rose View Transit
- Vocational Rehabilitation
- Independent Living Center
- Indiana University East
- Franklin County Transportation
- Work One
- Union County Transit
- River Valley Resources
- Centerville-Abington Senior Center
- Senior Opportunities Services
- Dunn Mental Health

#### **GENERAL DESCRIPTION OF AREA TRANSPORTATION PROVIDERS**

Those agencies that responded to the outreach efforts and provide transportation services in the region are described in the following paragraphs.

Eligibility to apply to INDOT for grant funding under Section 5316 and 5317 is limited to:

- Public entities providing public transit services; and,
- Private, nonprofit entities designated by county commissioners to provide public transit services.

Eligible applicants for Section 5310 funding include private, nonprofit organizations and public bodies that coordinate specialized transportation services.

Any of the following organizations that do not qualify as eligible applicants for grant funding could partner with an eligible applicant to achieve the coordinated transportation goals.

#### **Organization Summaries**

**Achieva Resources Corporation, Inc.** – The Achieva Resources Corporation (ARC), Inc., is a non-profit organization that provides a

#### **General Description of Area Transportation Providers**

**General Description  
of Area  
Transportation  
Providers**

variety of services to children and adults with disabilities. Achieva Resources serves individuals in Wayne, Union, Fayette, Franklin, and Rush counties. The major functions of the organization include: day treatment; social services; job training/employment/job placement; residential facilities; recreation; sheltered employment; and transportation.

Achieva provides client transportation in Wayne County with eleven (11) vehicles and in Fayette County with nine (9) agency vehicles, staff personal vehicles, and purchased services from other transportation providers in Wayne, Union, Fayette, and Franklin counties. In 2004, Achieva provided 5,600 trips and purchased 4,572 trips for a total of 10,172 annual passenger trips. Achieva operates between the hours of 7:00 AM and 5:00 PM, Monday-Friday.

**Developmental Services, Inc.** – Developmental Services, Inc. (DSI) is a private-for-profit organization assisting children and adults with mental, physical, and emotional challenges in Bartholomew, Decatur, Jackson, Jefferson, Jennings, Brown, Clark, Dearborn, Fayette, Floyd, Franklin, Harrison, Johnson, Lawrence, Monroe, Morgan, Ohio, Ripley, Rush, Scott, Shelby, Switzerland, Union, and Washington Counties.

DSI provides demand response transportation services for agency consumers using a fleet of 32 vehicles. Various agency employees use agency vehicles to transport clients on an as needed basis. Agency employees also operate personal vehicles and are reimbursed for mileage or auto expenses.

DSI operates a fleet of thirty-two vehicles. Ten vehicles are equipped with accessible lifts or ramps. Curb-to-curb service is provided on an as-needed basis and available 24 hours a day. Consumers are requested to develop transportation schedules in advance with agency staff. Agency staff is encouraged to provide group transportation when possible to minimize individual trips.

Agency transportation expenses and revenues are part of each agency program that utilizes a vehicle. Therefore, a true analysis of inner-agency transportation expenses was not available.

DSI has indicated that previous barriers to coordination included liability and insurance concerns, “turf-conflicts” among providers, and the unique characteristics of DSI clients posing an issue to various providers. The agency has also indicated that a significant improvement to individual mobility could begin with the expansion of the public transportation program beyond the city limits of Columbus.

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DSI currently coordinates training and maintenance services with QUINCO Behavioral Health Systems. The agency also offers maintenance services to the Wheels-to-Work Program, a program that provides auto expense assistance to low-income families in Bartholomew County.

DSI representatives feel that Columbus and the surrounding areas could easily become a strong, valuable economic link to surrounding counties with a more complete array of countywide transportation services.

**Dunn Mental Health Center (5310)** - Dunn Mental Health Center (DMHC), a non-profit organization, is a provider of mental health services that include rehabilitation services, job placement, counseling, day treatment, and residential facilities. The agency's geographic service area includes Wayne, Randolph, Fayette, Rush, Henry, Allen, and Union counties. The agency provides demand response transportation to its consumers with 20 vehicles. Dunn Mental Health Center owns all of its vehicles. Two of the vehicles are wheelchair accessible. The center recently received one Section 5310 accessible raised roof van with a wheelchair lift from INDOT.

Vehicles are located at Dunn facilities in Richmond (7 vehicles), Winchester (4 vehicles), Rushville (4 vehicles), and Connersville (5 vehicles). The agency does not have any employees that are dedicated to providing transportation full time. Team leaders, case managers and other staff are responsible for transporting clients. The total percentage of staff time spent on providing transportation was not provided. Bus passes are also given to clients in order to access public transportation where available. Transportation is provided Monday, Wednesday, and Thursday between 8:00 AM and 6:00 PM; Tuesday and Friday between 8:00 AM and 5:00 PM; and weekends between 10:00 AM and 5:00 PM.

During 2006, the agency provided approximately 10,820 passenger trips for 750 people. Less than one percent of the passengers used a wheelchair.

Transportation administration expenses in FY 2006 were approximately \$44,000. Maintenance (including facilities and equipment) expenses were an additional \$48,259. Transportation capital expenses were \$92,259.

Dunn received a Section 5310 grant of \$33,000 in FY2006 for the purchase of a vehicle. No other transportation revenue sources were provided.

Dunn Center indicated that 'more funding' is the enhancement most needed to improve personal mobility in the service area. Dunn Center

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Providers**

indicated that Wayne County needs more countywide public transportation. Furthermore, the greatest obstacle to coordinating transportation resources in the area for Dunn Center has been incompatible liability insurance.

The tangible benefits to coordination for Dunn Center are moderate at this time. Dunn indicated that support from elected officials, agency administrators, and other community leaders for sustained coordinated transportation planning efforts has been fairly weak. More involvement from local government officials is the most relevant issue for improving personal mobility in the service area.

**Fayette County Transit (5311)** - The Fayette County Community Council on Aging and Aged, Inc. operates Fayette County's public transit program. Fayette County Transit provides door-through-door, demand responsive, shared ride transportation service throughout the county. The transit service operates a fleet of eight vehicles with five peak-hour vehicles. Four vehicles in the fleet are wheelchair accessible. The service is operated between the hours of 7:00 AM and 6:00 PM, Monday through Friday. Dialysis treatment is also available on Saturdays.

During calendar year 2006, Fayette County Transit provided 22,987 passenger trips for approximately 2,500 individuals. Nearly 30 percent of the trips were for riders who used a wheelchair.

Fayette County Transit's fare structure is provided in the following section of this chapter. Discount rates are provided.

The system reported total transportation revenues during 2006 to be \$298,808.41. Revenue sources included passenger fares, third party reimbursements (e.g., Medicaid reimbursements), city and county government appropriations, state government appropriations, Title III (Older Americans Act), United Way, and passenger donations.

It is the assessment of Fayette County Transit that 'more funding' is the most needed enhancement to improve personal mobility. Furthermore, public awareness is considered to be the most needed improvement to coordination of transportation resources.

Fayette County Transit works closely with Union County Transit for coordinating trip referrals and joint training opportunities. The greatest obstacle to coordinating transportation resources is considered to be the inability to mix consumers with unique characteristics on-board the same vehicles.

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Providers**

The potential benefit to coordinating transportation resources is to enable all residents to travel to gainful employment. Fayette County Transit indicated that sustained support for coordinated transportation planning among elected officials, agency administrators, and other community leaders is moderate at this time.

**Franklin County Public Transportation (5311)** – Franklin County’s public transit program is solely operated by Franklin County Senior Citizens Services, Inc. The Franklin County Commissioners are the eligible applicant for the system’s Section 5311 and state public transit funds.

Franklin County Public Transportation (FCPT) provides door-to-door, demand responsive, shared ride transportation service throughout the county and to designated locations in surrounding counties. The transit service operates a fleet of 14 vehicles, including one back-up vehicle. Four vehicles are wheelchair accessible. The service is operated between the hours of 6:00 AM and 5:00 PM, Monday through Friday.

During 2006, FCPT provided 46,180 passenger trips for approximately 1266 unduplicated individuals. Nearly two percent of trips were for individuals needing a wheelchair. The fare structure is outlined in the following section of this chapter. Older adults ride for a donation and transportation costs associated with those trips are offset by funds from Area 9 Agency on Aging.

During calendar year 2007, the system projected total transportation operating revenues to be \$439,806. Revenue sources include: passenger fares, county government appropriations, Medicaid reimbursements, Federal Transit Administration (FTA) Section 5311 PMTF, and FCSCS, Inc. Transportation capital revenues for the same year are \$30,933 and include PMTF, Franklin County General Fund, and FTA Section 5311.

It is the assessment of FCPT that ‘more funding’ is the most needed enhancement to improve personal mobility. FCPT currently coordinates with Union and Fayette County Transit systems in terms of trip sharing, information/referral, and joint training opportunities.

Restrictions placed on the use of vehicles, liability insurance concerns, billing and accounting issues, and unique characteristics of human service agency consumer populations are the issues that have been encountered during prior coordination efforts.

FCPT actively participates in the local coordination efforts of the Transit Advisory Committee. Furthermore, it strongly supports coordinated transportation planning efforts.

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**Hand-in-Hand Adult Day Care of Richmond, Inc. (5310)** – Hand-in-Hand is a private nonprofit adult day care organization that provides transportation, nutrition, recreational and social services to older adults. Services are primarily dedicated to Wayne, Union, Randolph and Preble counties.

The agency provided demand-response transportation for agency program participants with a fleet of 5 wheelchair accessible vehicles including: one minivan and four converted 15-passenger vans. Hours of transportation are 6:30 AM to 6:00 PM, Monday through Friday.

Transportation is arranged for consumers upon their admission into the program. However, adjustments to an individual's transportation schedule are available, as needed based on family needs and appointments.

During FY2006, the agency provided 7,736 passenger trips for agency consumers and 12 passenger trips for the general public. A total of 81 unduplicated individual consumers and four general public passengers received transportation. All of the general public passengers and nearly 10 percent of the agency consumers required transportation of a wheelchair.

The Transportation operating revenue for FY2007 is projected to be \$58,536. Revenue sources for the transportation program include Medicaid waivers, CHOICE and donations for local churches for use of Hand-in-Hand vans on Sundays.

During FY2006, the agency received a Federal Transit Administration (FTA) Section 5310 capital grant for \$25,162.40.

The agency has a contract agreement to pay Union County Transit for transportation provided to Hand-in-Hand consumers.

The agency indicated that 'more funding' is the enhancement most needed to improve personal mobility in the service area. It currently participates in joint training, information sharing, and other coordination activities with Union County Transit and City of Richmond Paratransit. The inability to mix consumers on-board vehicles with other passengers has been a challenge to increasing coordination efforts.

**City of Richmond/Rose View Transit** – The City of Richmond/Rose View Transit provides fixed route service throughout the city. There are six fixed routes with six peak-hour vehicles. Headways range between one half hour and one hour for all routes. The city also provides door-to-door, ADA complementary paratransit service in its service area using four to five vehicles. Fixed route and paratransit services are available

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between the hours of 6:15 AM and 5:45 PM, Monday through Friday and 10:15 AM and 5:45 PM on Saturday. From 4:30 PM to 12:00 PM (midnight), Monday through Friday, demand response dial-a-ride services are provided within the service area.

**Meridian Services** - Meridian Services is a nonprofit community mental health center in Delaware, Henry, Jay, Randolph, Wayne, Fayette, Grant, Blackford, Union, and Franklin, Wayne, Fayette, Union, Franklin, and Marion counties. Organization functions include: transportation; health care counseling; day treatment; employment; rehabilitation services; diagnosis; residential facilities; and housing.

Meridian Services provides demand response transportation services and purchases transportation for agency consumers. Transportation is provided using agency vehicles. Both agency employees and designated transportation operators use agency vehicles. Also, agency employees operate personal vehicles and are reimbursed for mileage or auto expenses. Meridian Services also provides information and referral about other community transportation resources.

Meridian Services reported having a fleet of two vehicles. The fleet includes one modified van and one van. Drivers carry pagers and cellular telephones. Curb-to-curb service is provided Monday through Friday between 8:00 AM and 5:30 PM. Consumers are requested to develop transportation schedules in advance with agency staff. However, last minute reservations are accommodated when space is available.

During FY 2006, Meridian Services provided 7,772 unduplicated passenger trips for 410 consumers. Meridian does not collect passenger fares or donations.

Agency transportation expenses and revenues are part of each agency program that utilizes a vehicle. Therefore, a true analysis of inner-agency transportation expenses was not available.

Taxis and other private transportation providers are the most useful personal mobility options in the service area. However, longer hours and more days of service are needed to improve transportation options. Meridian currently coordinates transportation information and referral, joint dispatching, and service brokerage activities with other local providers outside of this region, including: Community Transport in Winchester; Eaton EMT; New InterUrban, New Castle Community Transit; and the Henry County Sheriff's Department.

Insurance and liability concerns, billing/accounting issues, and unique characteristics of client populations are barriers most commonly

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Providers

encountered with coordination. The restrictions placed on use of vehicles, however, is the most significant barrier.

More connections within counties and more available employment transportation options in evenings and on weekends are the most needed enhancements for public transportation service in the region.

Meridian Services' administration realizes the real and tangible benefits of shared finances, shared maintenance expenses, and limiting duplication that could result from coordination.

Meridian Services indicated that transportation has been a major issue for the agency over the years, and continues to be so. Lack of transportation has prevented some individuals from participating in certain agency programs as well as employment opportunities. The agency has spent numerous staff hours bringing children to programs because they have no other means of transportation. Parents who do not live close to a Muncie Indiana Transit System bus line and do not have reliable personal transportation have difficulty attending groups, therapy, and case management sessions at Meridian.

One of the services provided by Meridian is a child and adolescent program. The summer program is a partial hospital program in Muncie that provides structure for consumers during summer months. Transportation is a challenge because of mandates for a legal guardian to travel with the child when using agency transportation. Many of the legal guardians have multiple children and in order for the agency to transport any child to a program or day care, the legal guardian must bring all of the children in the family on the vehicle to ride with the child attending the program. Furthermore, agency drivers are not permitted to leave the vehicle to provide door-to-door service at child-care centers if other individuals are already on the vehicle. Therefore, there is no one available to meet the child at the door and bring him or her to the vehicle. At times, these regulations are a barrier to transporting children and become a barrier to parents who rely on public transportation to and from child-care and employment.

Persons with disabilities are also served by Meridian Services. The primary challenge identified for transporting this population is for employment. Many employment opportunities, including those at Meridian, are at hours that make it difficult for consumers to either get to the job or to get home. This has been a barrier to employment for many years.

**Rush County Senior Citizens Services, Inc./Ride Rush (5311)** - Rush Senior Center (RSC), a private non-profit organization, is a provider of

services for older adults (60+) and Medicaid sponsored and private pay passengers of all ages. These services include nutrition, information/referral, recreation/social, homemaker/chore and transportation. In January 2008, Rush County Senior Center transportation became a Section 5311 public transportation provider. Transportation is now available to any individual, regardless of age. The public transportation service, called Ride **Rush**, operates Monday through Friday between 8:00 AM and 5:00 PM.

RSC provides passenger transportation services with four vehicles (two are wheelchair accessible).

During FY2006, as a specialized transportation provider, Rush County Senior Citizens Services provided 6,000 passenger trips for 323 unduplicated individuals. Nearly five percent of trips were for individuals requiring a wheelchair. Total transportation operating revenues were \$90,110.92. Prior to becoming a public transportation system, revenue sources included passenger donations (suggested \$1.50 per trip); United Way; private pay; Veteran's Administration transportation; and Title III (Older Americans Act). (It was noted that more than one-half of the Medicaid revenue was for services provided in 2004-2005.)

Ride **Rush** currently participates in joint training and information sharing activities with other transportation providers.

**Union County Council on Aging and Aged, Inc./Union County Transit (5311) (5310)** - The Union County Council on Aging and Aged, Inc., has been a provider of passenger transportation services for many years, primarily on behalf of its own consumers. Upon becoming a public transit system, services were expanded for general public passengers. Union County Transit provides demand response and subscription service to rural areas of Union County, and upon request, provides transportation in Fayette, Rush and rural Wayne County. The system will transport passengers from any location in the five-county area to a destination within the city limits of Richmond. Passengers who live in Richmond and need to travel outside the city limits are also accommodated by referral. At least one end of each trip must be to Whitewater Valley residents outside the limits of the Richmond urbanized area. Union County Transit also provides service to Cincinnati, Dayton, Hamilton, Fairfield, Camden, and Oxford, Ohio. It also provides trips to Indianapolis and Muncie, Indiana upon request.

Public transit systems operating in Fayette County and Richmond refer passengers to Union County Transit if a trip cannot be provided otherwise. Union County Transit has established a separate fare structure for out-of-

county passenger trips. Some of these trips are provided under the Whitewater Valley coordination effort.

Union County Transit operates 13 vehicles for demand response and subscription, door-to-door service between 6:00 AM and 5:00 PM, Monday through Friday. Evening and weekend service is available upon request. There is no service on Christmas, New Year's Day, Good Friday, Easter, July 4<sup>th</sup>, and Thanksgiving.

**Batesville Community School Corporation** – Batesville Community School Corporation (BCSC) is a public school corporation in Batesville, Indiana. The school purchases transportation in Ripley and Franklin Counties for BCSC students, including students for special education classes. BCSC purchases student transportation from Franklin County Public Transportation on a per trip basis. BCSC uses Franklin County Public Transportation for special education students that work in the community as they travel to and from school and job sites. It also uses the public transportation system for temporary special needs as they occur.

BCSC indicated that human service transportation programs provide the most useful personal mobility options in the service area. Longer hours and more days of service are the most needed improvements for transportation.

Previous transportation coordination efforts for the organization have not been successful because of various issues that were encountered among the providers. However, the organization indicated that the rural nature of the service area is the greatest barrier to coordination and mobility because low ridership makes it difficult for service providers to operate with cost efficiency.

BCSC indicated that support for coordinated transportation in the area is weak even though organizations realize the tangible benefits that could result from coordinating efforts. It indicated that stronger local support would likely increase ridership, making the coordinated effort more fiscally efficient. BCSC indicated that expanded transportation services from Community Mental Health Center throughout southeastern Indiana, and in Batesville, would benefit several individuals who rely on public or human service agency transportation to travel to/from employment.

#### **OTHER AGENCIES**

Nine other responding agencies/organizations indicated that they do not provide direct transportation service but are interested in the Whitewater Valley Coordination Project. Those agencies are described below:

#### **Other Agencies**

- Centerville-Abington Senior Center and Work One's clients could benefit from client transportation, but they do not have the funding to pay for this service and do not provide client transportation in any way.
- Union County Department of Child Services and Family Resources and River Valley Resources, Inc. require transportation, but do not directly operate client transportation.
- Union County Department of Child Services and Family Resources purchases Medicaid transportation from Union County Transit.
- River Valley Resources purchases monthly bus passes from Rose View Transit for approximately seventy-five (75) trips annually.
- Indiana University East provides limited transportation for their students for recreational events.
- Vocational Rehabilitation Services (VRS) requires client transportation and purchases transportation from Rose View Transit for trips within the City of Richmond. VRS also purchases trips from Union County Transit for clients who are Liberty, Indiana residents to transport them to Richmond.
- Senior Opportunities Services does not require or provide any type of client transportation.
- Independent Living Center of Richmond, Indiana does not currently provide transportation but has an accessible vehicle that was purchased through an Area Office on Aging grant. The grant, which expired on April 30, 2005, also provided funds for maintenance and fuel. The vehicle is not being utilized due to lack of funds for operations. Independent Living Center is willing to discuss the transfer of the vehicle to an agency that can provide transit service.
- Wayne County Vision – Wayne County Vision is a nonprofit community organization serving Wayne County. The agency worked with Union County to develop the Whitewater Transit System. It continually coordinates with Union County to meet consumer needs. The agency would like to see greater coordination among transportation providers. It indicated that funding is the greatest obstacle to coordination and mobility.

## COORDINATION

Union County Transit has been actively coordinating services with Fayette, Franklin, Rush and Wayne Counties. In 2005, Union County Transit expanded general public service for rural Wayne County residents. Fayette County Public Transit is limited in the number of wheelchair trips it can provide due to the number of accessible vehicles in its fleet and refers after-hour trips and trips requiring accessible vehicles to Union County Transit. However, since a recent change in scheduling practices,

## Other Agencies

## Coordination

Fayette County Transit has reduced the number of referrals to Union County. Through cooperative planning, a joint grant application for the CTAA Whitewater Valley Coordination Project was submitted and approved. Union County Transit was the lead agency for the application. Union County Transit coordinates all meetings and information sharing for the project.

**CONTRACTS**

Public transit systems use contracts with local agencies/organizations and businesses to supplement the local cash match required to provide transit service.

Franklin County Public Transportation has written agency contracts with New Horizons Rehabilitation and Achieva Resources for providing contract transportation service. These contracts provide approximately \$37,000 in revenue for the system.

Fayette County Transit has no written agency contracts, however, agencies are billed by the transit system for providing contract service. The system also did not project any contract revenue in its CY 2005 grant application budget.

Union County Transit currently has third party contracts with: Achieva Resources, Sycamore Springs, Medical Transportation Management, Inc. (MTM), and Hand-in-Hand Adult Day Care of Richmond, Inc.

Meridian Services makes third party payments to HC Transport and MITS (Muncie). During FY 2006, Meridian paid \$150 per month/county to HC Transport for a total of \$9,000. The agency also paid \$6,000 to MITS to purchase \$0.50 tokens on behalf of agency consumers.

Three of the four public transit systems (with the exception of Union County Transit) and Rush Senior Center provide transportation services for the older adults through Title III funding.

Union County Transit, Franklin County Public Transportation, Fayette County Transit, Hand-in-Hand Adult Day Care, Rush Senior Center and Achieva Resources use Medicaid funding to provide trips.

Franklin County Public Transportation and Achieva Resources also receive Title XX funding for transporting senior citizens and persons with disabilities.

**Coordination**

**Contracts**

**FARE STRUCTURES**

**Franklin County**

The Franklin County Senior Citizens Services (Franklin County Public Transportation) has a fare system in place for general public service:

<u>Destination</u>	<u>One-Way Fare</u>	
	<u>Adults</u>	<u>Seniors</u>
Within City limits of Brookville	\$1.00	Donation
Within Franklin County	\$2.25	Donation
Out-of-County trips on Designated Days	\$3.25	\$2.25
Additional Stops	\$1.00	\$1.00

School age children when accompanied by a parent or guardian are \$0.75 per one-way trip for any type of trip noted above.

**Fayette County**

Fayette County Transit has a fare system in place for the general public service:

<u>Destination</u>	<u>One-Way Fare</u>	
	<u>Adults</u>	<u>Seniors, Disabled, Students, Children</u>
Within City limits of Connersville	\$1.75	\$1.50
Connersville city limits to 2-mi. Radius	\$2.00	\$1.50
2 to 6 miles radius of Connersville	\$2.25	\$1.50
Past 6 mile radius w/in Fayette Co.	\$2.50	\$1.50
Indianapolis	\$30.00	\$15.00
Cambridge City, Laurel	\$4.00	\$2.00
Brookville, Liberty	\$7.00	\$3.50
Richmond	\$14.00	\$7.00

**City of Richmond**

The City of Richmond (Rose View Transit) provides fixed route, complementary paratransit and dial-a-ride transportation and has a fare system in place for these services:

For the fixed route service:

Regular fare:	\$1.50 per one-way trip
Student/senior/disabled fare:	\$1.25 per one-way trip

**Fare Structures**

Monthly Pass: \$38.00 per month  
 Student/disabled Pass: \$30.00 per month

For the complementary paratransit service:  
 Over 60: Ride for a donation.

**Rush County**

Ride **Rush** has the following fare system in place for general public services:

<u>Distance</u>	<u>Adult - Per Stop</u>	<u>Under 5 Yrs. - Per Stop</u>
Up to 10 mi.	\$2.00	\$1.00
11 to 15 mi.	\$3.00	\$2.00
16 to 20 mi.	\$3.50	

A donation of \$1.50 per stop is suggested for passengers who are age 60 and older.

**Union County**

Union County Transit has the following fare system in place for general public services:

- Zone 1 - \$0.75
- Zone 2 - \$1.75
- Zone 3 - \$2.50
- Zone 4 - \$3.25
- Zone 5 - \$4.00

**OPERATING STATISTICS**

In order to identify the existing level of service provided, survey participants were asked how many one-way trips were purchased from a service provider, how many trips were arranged for/brokered and how many were provided by the agency. The results of that question are summarized in the table in Exhibit III.1 below. Agencies which did not respond to the survey but whose data was available from the INDOT Annual Report for 2006 are also included in Exhibit III.1.

The public transportation service providers (agency providers and Ride **Rush** not included) in this region provided a total of 366,593 trips for 2006 and drove a total of 1,162,624 miles. Richmond/Rose View Transit provided 273,170 trips, which is approximately seventy-five percent of the

**Fare Structures**

**Operating Statistics**

total trips. Operating data was not available for all of the human service agencies serving this region to provide an accurate analysis.

**Exhibit III.1: Service Providers' Operating Data**

System Name	Service Area	Trips	Total Rev Vehicle Miles	Total Rev Vehicle Hours	Total Gallons of Fuel Used
Fayette County Transit	Fayette County	22,987	128,364	9,113	10,904
Franklin County Public Transportation	Franklin County	46,180	395,014	13,679	19,091
Union County Transit	Union County and referred populations of Fayette, Franklin, Rush and Wayne counties	24,256	283,685	15,396	26,013
Richmond/Rose View	City of Richmond	273,170	355,561	31,872	45,470

Source: Stakeholder Survey & 2006 INDOT Annual Report

\*Operating statistics for Ride **Rush** not yet available.

**Operating Statistics**

Several performance indicators were examined for each of the transportation providers for which operating statistics were available (Exhibit III.2). Two systems (Rush Senior Citizens Center and Achieva Resources) had low passengers per hour figures (1.71 or less) for demand response transportation (should be at least 2.0 passengers per hour or higher). Achieva Resources also had relatively high cost figures in 2004 compared to the other transportation providers. Updated performance statistics for Rush Senior Citizens Center and Achieva Resources were not included in the 2007 survey.

**Exhibit III.2: Service Providers' Performance Indicators**

System Name	Passengers per hour	Cost per passenger	Cost per mile	Cost per hour
Fayette County Transit	2.52	\$10.61	\$1.89	\$26.76
Franklin County Public Transportation	3.38	\$9.52	\$1.11	\$23.04
Union County Transit	4.50	\$13.92	\$1.19	\$21.93
Rush Senior Citizens Center*	1.71	\$14.51	\$1.37	\$24.87
Achieva Resources*	1.35	\$67.93	\$5.30	\$91.45
Richmond/Rose View Transit	8.57	\$3.99	\$3.06	\$34.19

\* 2004 Data

Source: Whitewater Region Coordination Survey & 2006 INDOT Annual Report. Ride **Rush** public transportation data was not yet available at the time of this report.

**Vehicle Inventory**

**VEHICLE INVENTORY**

As illustrated by Exhibit III.3, the transportation operators in the region utilize a total of 139 vehicles. Rose View Transit (City of Richmond) has 17 of these vehicles and provides service just within the City of Richmond. The remaining 122 vehicles provide service throughout the region (note that DSI and Meridian also serve counties outside of this region). Achieve Resources Corporation operates nine (9) vehicles in Fayette County and eleven (11) vehicles in Wayne County. The individual accessible vehicle breakdown by provider is as follows:

- Achieva Resources Corp., Inc\* 36%
- Developmental Services (DSI) 31%
- Dunn Mental Health Center 10%
- Fayette County Public Transit 44%
- Franklin County Public Transportation 26%
- Hand-in-Hand Adult Day Care 100%
- Meridian Services 0%
- Rose View Transit 100%
- Rush County Senior Citizens Services 60%
- Union County Public Transit 85%

Vehicles have been purchased through a variety of methods: the Federal Transit Administration Section 5310 Specialized Transportation Program and 5311 Rural Transit Program, other federal programs, local funds, general revenue funds, and private donations, etc.

**Exhibit III.3: Vehicle Inventory**

Agency Name	Total Vehicles
<b>Achieva Resources Corporation</b>	21
<b>City of Richmond/Rose View Transit</b>	17
<b>Dunn Mental Health</b>	20
<b>Developmental Services, Inc.</b>	32
<b>Fayette Community Council on Aging and Aged, Inc.</b>	9
<b>Franklin County Public Transportation</b>	15
<b>Hand-in-hand Adult Day Care of Richmond, Inc.</b>	5
<b>Meridian Services</b>	2
<b>Rush County Senior Citizens Services</b>	4
<b>Union County Transit</b>	14
<b>Total Vehicles:</b>	<b>139</b>

Source: INDOT Stakeholder Survey, 2007

**Vehicle Inventory**

**VEHICLE UTILIZATION**

Exhibit III.4 on the following pages depict vehicle utilization on a typical day for each of the transportation providers. As can be seen, most vehicles are in use during at least part of the mid-day weekday period.

**Vehicle Utilization**









## VEHICLE MAINTENANCE

Vehicle maintenance was not included as a separate topic in the Statewide Coordinated Transportation Plan survey. However, relevant information was gathered during the CTAA Whitewater Coordination Feasibility plan. That information is provided in the following paragraphs.

According to the results from the CTAA Whitewater Coordination Feasibility Plan, five of the agencies with vehicles contracted out their maintenance to local vendors in 2004. Dunn Mental Health Center performs minor maintenance such as wiper and light bulb replacements, and cleaning vehicles. Dunn Mental Health Center contracts out oil changes and all other maintenance. Only Franklin County Public Transportation and Richmond/Rose View Transit provide in-house maintenance. Franklin County performs minor repairs and preventative maintenance but contracts out to a local dealership for major repairs. Franklin County Public Transportation (FCPT) has a large garage that can house up to eight vehicles. The FCPT Service Manager that also serves as a back-up driver performs the maintenance on FCPT's vehicles. The Service Manager has been trained on lift repairs. The City of Richmond's Sanitation Department performs a majority of Rose View Transit's maintenance but brakes and alignments are contracted out to Chuck's Auto Repair in Richmond. Warranty work is also contracted out to local dealerships.

The total maintenance cost for the service providers was \$151,371 in 2004. The average maintenance cost for the service providers was approximately \$1,916.09 per vehicle per year. Maintenance costs are usually related to the age of the vehicle. The reasonableness of reported maintenance cost is within an acceptable range could not be ascertained because the ages of several vehicles were not available.

## FUEL CONSUMPTION

The City of Richmond/Rose View Transit, Fayette County Transit, Franklin County Public Transportation, and Union/Wayne County Transit, the four public transit systems operating in the region, consumed 101,478 gallons of fuel at a cost of \$216,954 in 2006. This cost of fuel for these providers was \$71,271 higher than the cost during 2004. The increased cost is most likely associated with rising fuel prices.

Fuel consumption statistics for the human service agencies was not consistently available therefore provision of complete analysis was not completed.

## Vehicle Maintenance

## Fuel Consumption

**STAFFING**

It was found that survey respondents spent a total of 29,380 person-hours (equivalent of 14.13 full-time persons) per year on administrative activities, coordinating trip delivery (scheduling and dispatching), and processing reimbursement requests (billing). Several respondents indicated that administrative staff also served as drivers. Dunn Mental Health Center provides transportation with existing staff. The actual hours the staff spends providing transportation was not tracked by Dunn Mental Health Center. The service providers employ 27 full-time drivers and 34 part-time drivers. The majority of the part-time drivers work between 20 and 30 hours per week. None of the respondents use volunteer drivers to provide transportation services. Exhibit III.6 provides the detailed results of the person-hours question from the survey.

**Staffing**

**Exhibit III.6:  
Administrative Staff and Drivers by Agency**

<b>Program</b>	<b>Admin. Personnel</b>	<b>Admin. Hours</b>	<b>Drivers Paid, Full-Time</b>	<b>Drivers Paid, Part-Time</b>	<b>Agency Staff w/Non-Transit Duties</b>	<b>Maintenance</b>
Achieva*	1-full-time 1-part-time	3120	3	2	0	0
City of Richmond/Rose View	3 full-time	6240	17	1	0	0.5
Dunn Mental Health Center*					17	0
Fayette County Transit	1 full-time 2-Part-time	5200	0	9	0	0
Franklin County Public Transportation	2- Full time; 2 Part-time	6240	5	8	0	1
Rush County Senior Citizen Services*	2 Full-time	3380	1	5	0	
Union County Transit/Wayne	1 full-time; 2 part-time	5200	2	10	0	0.5

Note: Administration Personnel includes Full and Part-time Dispatchers

- Statistics reflect 2004 data for Rush County, Achieva, and Dunn Center.  
Source: 2006 Annual Report and Whitewater Coord. Feas. Study

**TRAINING**

Survey respondents were asked about the types of training provided to drivers and dispatchers/schedulers. The answers to these questions were the industry standard training for drivers. Several of the drivers' training

**Training**

**Training**

courses are required by a contracting agency, state agency or federal agency. Exhibits III.7 and III.8 show the results of the training questions regarding drivers and dispatchers/schedulers. The survey found that very little training is provided for dispatchers/schedulers.

Other trainings provided are:

- ◆ Customer Service
- ◆ Accident Incident
- ◆ Substance Abuse
- ◆ Sexual Harassment
- ◆ Pre-trip Inspections
- ◆ Workplace Violence

**Exhibit III.7:  
Types of Training Drivers Receive**

<b>Program</b>	<b>First Aid</b>	<b>CPR</b>	<b>BB Pathogens</b>	<b>Defensive Driving</b>	<b>Substance Abuse Awareness</b>	<b>Pass. Assist.</b>	<b>WC Assistance</b>	<b>CDL</b>
Achieva Resources Corp., Inc.								
City of Richmond/Rose View								
Dunn Mental Health Center								
Fayette County Transit								
Franklin County Public Transportation								
Rush County Senior Citizen Services								
Union County Transit								

**Exhibit III.7:  
Types of Training Dispatchers/Schedulers Receive**

**Training**

<b>Program</b>	<b>General</b>	<b>Customer Service</b>	<b>Radio Usage</b>	<b>Time Management</b>	<b>Sensitivity to Aging</b>	<b>General Computer Software</b>
Achieva Resources Corp., Inc.						
City of Richmond/Rose View						
Dunn Mental Health Center						
Fayette County Transit	Information not available					
Franklin County Public Transportation						
Rush County Senior Citizen Services						
Union County Transit						

**SUMMARY**

**Summary**

The following list summarizes the characteristics of the region that are related to transportation need based on agency survey results in 2005 and 2007 as well as on a variety of tools used to measure and qualify need:

- ❑ The most significant needs for transportation services according to the participants in the CTAA strategic planning session and the INDOT Statewide Coordinated Transportation Plan were the lack of wheelchair accessible vehicles, medical transportation, second and third shift employment transportation, and transportation for rural area residents.
- ❑ Agency survey results indicated the following needs in the region:
  - Dunn Center (2007): This agency stated that Wayne County needs more countywide transportation resources.
  - River Valley Resources, Inc. (2004): This agency stated that they had at least 104 persons annually for which they could not meet their needs for transportation. They also had needs for financial assistance for gasoline purchases, evening public transportation, transportation for persons

**Summary**

- with disabilities, and countywide public transportation (Wayne County).
- Achieva Resources Corporation, Inc. (2004 and 2007): This agency reported that it has at least 10 people per week or 20 trips per week that it cannot serve. The agency stated that its consumers needed transportation from rural areas to Richmond, Connersville, and Brookville and second and third shift transportation for rural and urban consumers. Its survey response also indicated that transportation is needed to destinations outside of the Richmond city limits. Transportation is also needed to areas in Fayette, Union, and southern Randolph Counties.
  - Franklin County Transit (2007): This organization indicated that more funding is needed to implement necessary transportation improvements that will meet consumer needs.
  - Hand-in-Hand Adult Day Care of Richmond (2007): This agency indicated that additional funding is required for local transportation providers to meet the needs of people with low incomes, older adults, and individuals with disabilities.
  - Rush County Senior Citizens Services, Inc./Ride **Rush** (2004 and 2007): This agency responded that there is a need for transportation for persons under the age of 60 for trips within the county and to destinations outside the county. It also indicated that additional funding is needed to meet demand.
  - Union County Council on Aging and Aged, Inc./Union County Transit (2004 and 2007): This agency reported there is always a need for more accessible vehicles and extended service days and hours.

## **IV. NEEDS ASSESSMENT**

## IV. NEEDS ASSESSMENT

### COMMUNITY OUTREACH THROUGH LOCAL MEETINGS

In addition to the comprehensive survey results provided in Chapter III of this report, municipalities, human service agencies, and organizations in the study area were also invited to participate in local stakeholder meetings. The first local meeting was held in Liberty, Indiana on August 14, 2007. Fourteen individuals representing 10 organizations attended that meeting. Organizations that were represented are listed below:

- Achieva Resources
- Wayne County Vision
- United Way (Richmond)
- Area 9 Agency on Aging
- Hand-in-Hand Adult Day Care
- Independent Living
- Fayette County Transit
- Union County Transit
- Franklin County Public Transit
- Rush County Senior Citizens Center
- INDOT, Public Transit Section

The second local meeting was conducted on March 13, 2008 in Richmond, Indiana. The meeting was announced in two local newspapers to invite the general public as well as any organizations that did not attend the initial meeting. Newspaper announcements are included in the Appendix to this document. Organizations that were represented at the meeting are as follows:

- Achieva Resources
- Hand-in-Hand Adult Day Care
- Fayette County Transit
- Union County Transit
- Franklin County Public Transit
- Rush County Senior Citizens Center
- Roseview Transit
- INDOT, Public Transit Section

The local stakeholder meetings included several questions about the unmet transportation needs, challenges, and potential benefits to implementing coordinated transportation. A follow-up email or phone call was made after the first meeting to several of the respondents for additional information. The agenda for the second meeting included a discussion of potential goals and strategies for addressing unmet transportation needs.

### Community Outreach through Local Meetings

In addition to the local stakeholder meeting, all organizations were invited to complete a transportation survey. The survey was administered as a tool for gathering detailed information about each organization and the respective opinions about coordinating transportation in the area. The following is a summary of needs that were documented from the combined outreach efforts:

- Transportation providers indicated a concern that there are too few vehicles with wheelchair accessibility available in the region. Many of the passengers in Union County, for example, who require a wheelchair accessible vehicle, also require an out-of-county trip, which occupies the vehicle for several hours making it unavailable for local trips.
- There is a shortage of drivers in the region. The transportation systems indicated a need for more drivers to meet transportation demand.
- There is limited available transportation to support individuals traveling to work during second and third shifts. The need for transportation to support shift work is recognized in all counties, and especially in Wayne County.
- Human service agencies and transportation providers receive requests for evening operating hours during the week to support trip purposes such as employment, substance abuse programs, and social and recreational activities.
- Transportation to medical appointments, hospital, and dialysis treatment is commonly requested and additional transportation resources are needed to meet demand.
- Older adults need the transportation options to remain affordable.

#### **CURRENT COORDINATION EFFORTS**

There is an active committee working to implement coordinated transportation in the region. The committee has made notable success in addressing some of the transportation needs identified in the CTAA Coordinated Transportation Plan (2006). The first success is that Union County Transit began operating transportation in Wayne County. The primary purpose for this new Wayne County service is to provide more transportation to dialysis treatment, although the service is open to the general public. The second success is that several transportation providers have started to coordinate out-of-county trips with other providers in an effort to reduce duplications in service and more efficiently utilize vehicles. Finally, transportation providers have realized improvements in scheduling efficiency and more trips are provided with existing resources through the new approach to scheduling.

#### **Community Outreach through Local Meetings**

#### **Current Coordination Efforts**

Another regional coordination effort that involves sharing information and referrals among human service agencies and transportation providers is the toll-free telephone number operated by Union County Council on Aging. The phone number is available in Union and Franklin counties and will be expanded to four additional counties when funds are made available. Callers can obtain information about transportation resources by calling this toll-free number. Making improvements to the detailed information available through the toll-free number is a goal of the coordination efforts.

### **CHALLENGES TO COORDINATION**

Although the area's transportation providers have made progress in implementing some coordination efforts, there are always challenges to the coordination of public and human services transportation. Results of the stakeholder meeting and survey indicated the following challenges to coordination for the region.

- **Limited funding** - The majority of survey responses indicated that additional funding is needed for the organizations to implement transportation that will meet the identified unmet needs. Coordination efforts will be implemented so that the current services may be more efficiently operated. However, increasing the amount of service (i.e., extending service hours, purchasing vehicles) is likely to require additional financial support.
- **Passenger Fares** – Several organizations indicated that a subsidy to offset passenger fares for people with low incomes and individuals with disabilities, and older adults would make public transportation a more realistic option for many people who currently do not utilize the service.
- **Restrictions on Vehicles** – Dunn Mental Health and other human service agencies in the area indicated that liability insurance concerns limit their ability to share vehicles with other agencies and to mix consumers from other agencies on their vehicles.
- **Unique Characteristics of Consumers** – Several human service agencies that serve the region indicated in the survey that the inability to mix consumers from multiple agencies on one vehicle due to the unique characteristics of consumers is a challenge for coordinating trips among multiple transportation providers.

While there are challenges to implementing coordination among varied transportation providers, services, and funding sources, it is important to note that transportation coordination is being successfully implemented throughout the country, including 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

### **Current Coordination Efforts**

### **Challenges to Coordination**

not stop, a coordination effort. There are many resources available to assist communities as they work together to coordinate transportation. FTA's Framework for Action is a recommended place to research methods for achieving success in coordinated transportation. FTA's Framework for Action is available at [www.unitedweride.gov](http://www.unitedweride.gov).

### GOALS FOR COORDINATION

A primary goal of coordinated transportation is to fill service gaps through planning and the efficient use of transportation resources. Service gaps typically fall into the category of spatial gaps or temporal gaps. Spatial gaps involve limitations with the service area while temporal gaps are concerned with limitations in days of week or hours that service is provided. Both spatial and temporal limitations were discussed during the stakeholder meeting. Input received from the stakeholder meeting and survey responses identified the following gaps in service for this region.

#### Spatial Gaps

- Medical appointments are typically located in Richmond, Indianapolis, Connersville, Oxford, Batesville, Cincinnati (Ohio), Dayton (Ohio), Lawrenceburg, and Muncie. For many providers, the one-way trip to these destinations requires up to three-hours travel time.
- Employment opportunities in all counties are minimal. Public transportation to the Greensburg Factory, and employers in Shelbyville, Connersville, Decatur, and western Wayne counties is needed to address the job access issues for residents living in the region.
- Transportation to substance abuse programs requires out-of-county service for Union County residents because many of the programs are located in other counties. Multi-county transportation is required to meet this need.
- Union and Franklin counties do not have a hospital and residents frequently travel to destinations outside of the county boundaries for medical purposes. Multi-county transportation is required to meet this need.
- The absence of a Greyhound bus stop, or some other public mass transportation service in the area is a growing concern for transportation providers. The Greyhound bus no longer stops in Richmond. The need for regional, and interstate transportation should be explored and considered.

#### Temporal Gaps

- Additional paratransit service is needed in Richmond, especially during the hours of 6:15 and 9:00 AM.

### Challenges to Coordination

### Goals for Coordination

**Goals for  
Coordination**

- Wayne County organizations indicated that in order to meet transportation needs in the area, the operator should provide service between 4:00 AM and 10:30 PM on weekdays.
- Evening service is needed throughout the region on weekdays and weekends to support shift-employment trips, Ivy Tech classes, late hospital discharges, and medical appointments that last into the evening.
- Transportation opportunities for individuals going to church on Sunday mornings are limited. Additional resources to meet demand (once demand is understood and established) may be appropriate.

In addition to the spatial and temporal gaps in service, the local organizations indicated the following gaps in resources and local practices that hinder transportation in the region.

**Additional Gaps**

- Standardization of Safety and Operating Protocol – Discovering a method for agencies to share costs that would not be prohibitive to individual agencies could allow for the transportation providers to share resources more easily, which may result in better service.
- Public Perception – In general, the public perceives many of the demand response public transportation providers to be dedicated to transporting older adults and persons with disabilities, and not the general public passenger. Improving information sharing and referral processes through coordination with local businesses, human service agencies, nonprofit organizations and local officials would help to create the proper public image of the public transportation providers.
- Advance Reservations - Paratransit service in the Richmond area is available but it requires a one-week advance reservation. The extended advance reservation period creates limited options for transportation to social activities, grocery stores, or last minute appointments.
- Vehicles – Public transportation providers who participated in the stakeholder meeting indicated that there are not a sufficient number of wheelchair accessible vehicles to meet demand.

Additionally, Vehicles operated by the City of Richmond for paratransit service are not always appropriate for meeting the type of consumer demand. It was suggested by local stakeholders that Richmond explore the possibility of purchasing and utilizing more appropriate vehicles to provide paratransit service.

- Drivers – There is a shortage of qualified individuals applying for driving positions in the area. Transportation providers struggle to

meet transportation demand because there are not enough drivers to operate the services.

Suggested strategies to address the unmet transportation needs and gaps or duplications in service are provided in the following chapter.

**Goals for  
Coordination**

**V. GOALS, OBJECTIVES, AND  
IMPLEMENTATION  
STRATEGIES/  
ALTERNATIVES**

**V. GOALS, OBJECTIVES, & IMPLEMENTATION  
STRATEGIES/ALTERNATIVES**

This chapter presents the goals for the Franklin, Fayette, Union, Rush, and Wayne Regional Coordinated Public Transit-Human Services Transportation Plan, the objectives to achieve those goals, implementation strategies/alternatives to accomplish the objectives, the timeframe for implementation of each strategy/alternative. It also includes a recommendation of the parties responsible for implementation, projected staffing and capital requirements for implementation of each strategy/alternative, and performance measures which the regional coordination project members can use in the future to evaluate the progress/success of plan implementation. Some of the following goals and objectives were initially submitted to regional transportation providers during the Whitewater Valley Coordinated Transportation Plan funded by the Community Transportation Association of America (CTAA), 2006. The Whitewater Valley goals were discussed, updated, and expanded upon with input from the local stakeholders during this regional planning process.

The goals, objectives, and implementation strategies/alternatives contained in this plan reflect the existing and projected demographics of the region, the goals of the coordination project steering committee, and the unmet needs expressed by human service agencies, and transportation providers' staff.

The planning horizon for this plan is five (5) years. The implementation timeframes listed below are near term (present – 2009)); mid-term (2-3 years or 2010-2011); and long term (4-5 years or 2012-2013). Actions that should occur throughout the planning horizon are listed as “continuous.”

**GOAL #1: EDUCATE THE RESIDENTS OF THE REGION ABOUT PUBLIC AND COORDINATED TRANSPORTATION.**

**Objective 1.1: Educate local government officials and agencies about the benefits of public and coordinated transportation.**

***Implementation Strategies/Alternatives:***

**Goal #1: Educate the residents of the region about public and coordinated transportation.**

**1.1.1 Conduct presentations on public and coordinated transportation at County Council and Commissioners' meetings, and also at meetings with Town Councils and other elected officials. Develop a Power Point presentation to be used during the presentations that includes ridership figures, trip purposes and testimonials/comments from riders.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Staff time included in existing provider budgets.

Staffing Implications: None.

Capital Requirements: None

Ridership Implications: Possible increase in ridership from distribution of information or increase in contract ridership as more human service agencies become aware of transportation services available.

Performance Measures: Number of presentations given.  
Number of local government officials reached. Develop Powerpoint presentation.

**1.1.2: Conduct open houses for local government officials and human service agency representatives at public transportation facilities. Items on display could include brochures; pictures of vehicles, riders, employees, facilities, special events; maps of service areas; and vehicles. Demonstrations on such things as how to load a wheelchair could also be given.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners

Implementation Budget/Costs: Minimal. Cost of refreshments, invitations and staff time involved.

Staffing Implications: None.

**Goal #1: Educate the residents of the region about public and coordinated transportation.**

**GOALS,  
OBJECTIVES, &  
ALTERNATIVES/  
STRATEGIES**

**Goal #1: Educate the residents of the region about public and coordinated transportation.**

Capital Requirements:	None.
Ridership Implications:	Potentially an increase in ridership as government officials and agencies make residents and consumers aware of transportation opportunities. Potential for new contract service agreements.
Performance Measures:	Number of open houses conducted. Number of government officials and agency representatives reached.
<b>1.1.3: Develop an informational brochure to expand public awareness about the benefits of public and coordinated transportation that could be distributed to local government officials and human service agency staff.</b>	
Priority/Implementation Timeframe:	Near-Term.
Parties Responsible:	Coordination project partners.
Implementation Budget/Costs:	Staff involved in brochure development. Cost of printing brochures. Should print at least 5,000-10,000 brochures. Potential application for Section 5317 to expand public awareness (match required).
Staffing Implications:	None.
Capital Requirements:	None.
Ridership Implications:	Potentially an increase in ridership as government officials and agencies make residents and consumers aware of transportation options. Potential for new contract service agreements.
Performance Measures:	Number of brochures distributed. Number of new riders. Number of new agency contracts. Number of new coordination project partners.

**1.1.4: Submit informational articles on public and coordinated transportation to the local newspapers and to agency newsletters. Encourage riders/consumers to write positive letters to the editor.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Staff time involved in writing articles and talking with newspaper staff.

Staffing Implications: None.

Capital Requirements: None.

Ridership Implications: Potentially an increase in ridership from the distribution of information on transportation services available.

Performance Measures: Number of articles and letters to the editor submitted and printed.  
Number of new riders.

**1.1.5: Attend agency and government meetings where networking opportunities exist and where information on transportation can be presented.**

Priority/Implementation Timeframe: Continuous.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Staff time involved.

Staffing Implications: None.

Capital Requirements: None.

Ridership Implications: Potentially an increase in ridership through agency and government contacts. Potential for new agency contracts.

Performance Measures: Number of meetings attended.

**Goal #1: Educate the residents of the region about public and coordinated transportation.**

Number of face-to-face contacts made.

**1.1.6: Have a “ribbon-cutting” for a new vehicle that is used for the coordination project and invite government and agency officials and the press. A short presentation could be given on the benefits of public and coordinated transportation at such an event.**

Priority/Implementation Timeframe: Continuous – whenever a new vehicle is purchased.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Minimal cost for actual ribbon-cutting ceremony – invitations, programs, refreshments. Staff time involved.

Staffing Implications: None.

Capital Requirements: Cost of vehicles whenever a purchase is necessary for replacement or expansion.

Ridership Implications: Potentially an increase in ridership through agency and government contacts. Potential for new agency contracts.

Performance Measures: Ribbon-cuttings held when new vehicles are purchased.  
Number of attendees.

**Objective 1.2: Educate consumers/general public about public and coordinated transportation.**

***Implementation Strategies/Alternatives:***

**Goal #1: Educate the residents of the region about public and coordinated transportation.**

**1.2.1: Distribute information on public and coordinated transportation at local fairs, job fairs, employee health fairs and community events (set up booths). Possible promotional activities could include a drawing for free rides, having a vehicle on display, or offering rides around a fair in a golf cart labeled with the coordination project's name.**

Priority/Implementation Timeframe: Continuous.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Cost of information materials and staff time involved in distribution.

Staffing Implications: None.

Capital Requirements: None.

Ridership Implications: Potentially an increase in general public ridership, especially for employment-related trips.

Performance Measures: Number of events attended.  
Number of people reached.  
Number of new riders.

**1.2.2: Make presentations on public and coordinated transportation at local civic club meetings – Lions, Rotary, Moose, Elks, Kiwanis, etc.**

Priority/Implementation Timeframe: Continuous.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Staff time involved and the cost of promotional materials.

Staffing Implications: None.

Capital Requirements: None.

Ridership Implications: Potentially an increase in ridership as more people become aware of what is available.

**Goal #1: Educate the residents of the region about public and coordinated transportation.**



Number of hours vehicles with signs are on the road.

**Objective 1.3: Utilize the regional Transit Advisory Committee as a forum for local transit issues, education, networking, and support.**

***Implementation Strategies/Alternatives:***

**1.3.1: Add government, agency, and consumer members that represent all parts of the region to the existing Transit Advisory Committee for the regional coordination project.**

Priority/Implementation Timeframe: Continuous.

Parties Responsible: Coordination project partners – Union County lead agency

Implementation Budget/Costs: Staff time involved. Possibly small copying budget for agendas and correspondence.

Staffing Implications: Staff time involved in preparing agendas and meeting notices and attending meetings.

Capital Requirements: None.

Ridership Implications: Potentially an increase in ridership as TAC members become aware of services available and “spread the word” in the community. Also chance for contract service as agencies become aware of coordination project.

Performance Measures: Entire region represented. TAC meetings held at least quarterly.

**1.3.2: Revise bylaws for the regional coordination TAC so that each member understands the purpose of the committee as an advisory body for the regional coordination effort.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners.

**Goal #1: Educate the residents of the region about public and coordinated transportation.**

**GOALS,  
OBJECTIVES, &  
ALTERNATIVES/  
STRATEGIES**

**Goal #1: Educate the residents of the region about public and coordinated transportation.**

Implementation Budget/Costs: Staff time involved. Possibly small copying budget for bylaws. Contact Indiana RTAP for assistance with developing bylaws.

Staffing Implications: Staff time involved in preparing bylaws, and attending meetings.

Capital Requirements: None.

Ridership Implications: None.

Performance Measures: TAC bylaws revised.  
Revised TAC bylaws adopted.

**1.3.3: Ask each regional TAC member to commit to actively supporting an assigned role in the coordination effort so that the committee is actively and energetically promoting and advising the coordination effort.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners – and TAC members.

Implementation Budget/Costs: Staff time involved in encouraging active participation from TAC members.

Staffing Implications: Staff time involved in attending meetings and encouraging active participation from TAC members.

Capital Requirements: None.

Ridership Implications: None.

Performance Measures: TAC members agree upon and accept an active role in accomplishing coordinated transportation duties.  
TAC members promote coordinated transportation efforts throughout the community at local events and

**GOALS,  
OBJECTIVES, &  
ALTERNATIVES/  
STRATEGIES**

speaking engagements, and with local elected officials and foundations.

**GOAL #2: COORDINATE/POOL RESOURCES WHENEVER POSSIBLE TO ELIMINATE DUPLICATION OF SERVICES AND FREE UP EXISTING RESOURCES SO THAT MORE SERVICE MAY BE PROVIDED WITHIN THE AVAILABLE FUNDING LIMITATIONS.**

**Objective 2.1: Coordinate/consolidate dispatching/scheduling services.**

***Implementation Strategies/Alternatives:***

**2.1.1: Expand the central call number (toll-free) operated by Union County Council on Aging to all counties in the region (it is currently only available in Union and Franklin counties) or provide information through a 211 number. Transportation information should be available to the operator who manages the number so that he/she can provide adequate information and referrals for anyone in the region who needs transportation.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Union County COAA.

Implementation Budget/Costs: Cost of toll-free number.

Staffing Implications: Potential for reducing the number of hours required for dispatching/scheduling.

Capital Requirements: Possibly phone line installation.

Ridership Implications: Potentially an increase in ridership due to improved access and “one-stop”

**Goal #1: Educate the residents of the region about public and coordinated transportation.**

**Goal #2: Coordinate/pool resources whenever possible to eliminate duplication of services and free up existing resources so that more service may be provided within the available funding limitations.**

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shopping for transportation services.

Performance Measures: Toll-free number installed and implemented.  
Number of callers.

**2.1.2: Purchase and utilize scheduling and dispatching software that will allow all providers in the regional coordination project to share trip information.**

Priority/Implementation Timeframe: Mid-Term.

Parties Responsible: Coordination project partners – application will require a lead agency.

Implementation Budget/Costs: Cost of software and possibly some hardware. Cost of high speed connections for each project partner.

Staffing Implications: None.

Capital Requirements: Cost of software and hardware.

Ridership Implications: Potentially an increase in ridership as systems become more efficient with scheduling with dispatching software.

Performance Measures: Number of trips shared.  
Number of riders crossing county lines.

**2.1.3: Coordinate long distance trips to such places as Indianapolis, Muncie, Oxford, etc. Possibly develop a schedule of regularly occurring long distance trips and share with all transportation providers and human service agencies. Responsibility could be rotated for regularly occurring trips to Indianapolis if the demand is high.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners.

**Goal #2:  
Coordinate/pool resources whenever possible to eliminate duplication of services and free up existing resources so that more service may be provided within the available funding limitations.**

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**Goal #2:  
Coordinate/pool  
resources whenever  
possible to eliminate  
duplication of  
services and free up  
existing resources so  
that more service  
may be provided  
within the available  
funding limitations.**

Implementation Budget/Costs:	None.
Staffing Implications:	Possibly, drivers who would normally be doing long distance trips should be freed up to do other trips at each coordination partner agency.
Capital Requirements:	None.
Ridership Implications:	Potentially an increase if a regular schedule is developed and people can schedule appointments around it.
Performance Measures:	Number of long distance trips coordinated.

**Objective 2.2: Implement a centralized dispatching center and consolidate regional transportation.**

***Implementation Strategies/Alternatives:***

**2.2.1: Explore the feasibility of creating a centralized call center for scheduling and dispatching coordinated transportation services throughout the region. The centralized dispatching center represents a consolidation of dispatching service and would be utilized by all participating transportation providers. Include operations and facility considerations in the study.**

Priority/Implementation Timeframe:	Mid-Term.
Parties Responsible:	Coordination project partners with transportation providers taking the lead. Mobility Manager could be responsible for developing the central dispatching center plan (see objective 2.6 for more information about hiring a Mobility Manager).
Implementation Budget/Costs:	None.
Staffing Implications:	Some staff time from lead organization to conduct the feasibility study and staff time from all participating organizations to provide the necessary information.

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Capital Requirements:	None.
Ridership Implications:	None.
Performance Measures:	Coordination partners provide operating data for the study. Feasibility study is completed and approved by the regional TAC.
<b>2.2.2: If results from the feasibility study for a centralized call center are positive, request commitments from local transportation providers to participate in the operation of the centralized dispatching center. Determine the level of participation from each organization.</b>	
Priority/Implementation Timeframe:	Mid-Term.
Parties Responsible:	Lead organization and coordination project partners.
Implementation Budget/Costs:	None.
Staffing Implications:	Time associated with educating potential participants and obtaining a written commitment from each organization that provides details the level of commitment (i.e., vehicles, staff, funding).
Capital Requirements:	None.
Ridership Implications:	None.
Performance Measures:	Number of organizations that commit to participating in the dispatching center.

**Goal #2:  
Coordinate/pool resources whenever possible to eliminate duplication of services and free up existing resources so that more service may be provided within the available funding limitations.**

**2.2.3: Establish bylaws, policies, and procedures for operating a central dispatch/call center. Some of the coordinated policies and procedures recommendations are outlined later in this chapter. All participating organizations must agree to operate services consolidated under the central dispatching center under common operating policies and procedures. One organization must have the authority to operate the dispatching center and dispatch trips for multiple providers.**

Refer to Objectives 2.3 through 2.7.

**2.2.4: Apply for funding to implement a central dispatching center for transportation in the region and, when awarded, implement the center. Support may be required for securing a facility for the center as well as operating dollars if none of the currently operating transit facilities are appropriate for the task.**

Priority/Implementation Timeframe: Long-Term.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: To be determined by the feasibility study, scope of services, and level of participation. Potential application for Section 5317 – New Freedom (local match required)

Staffing Implications: Centralized dispatching center will require appropriate staff to schedule and dispatch services. The center should be staffed during all hours that vehicles are on the road.

Capital Requirements: None.

Ridership Implications: Potentially an increase as services are scheduled more efficiently and more vehicles are available for service.

Performance Measures: Funding secured.  
Center established.  
Center staffed.

**Goal #2:  
Coordinate/pool resources whenever possible to eliminate duplication of services and free up existing resources so that more service may be provided within the available funding limitations.**

Number of trips coordinated.

**Objective 2.3: Coordinate/consolidate maintenance services.**

***Implementation Strategies/Alternatives:***

**2.3.1: Develop uniform preventative maintenance standards for coordinated transportation providers in the region.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Staff time involved.

Staffing Implications: None.

Capital Requirements: None.

Ridership Implications: None.

Performance Measures: PM standards developed and implemented.  
Number of road calls.  
Amount of maintenance costs.  
Number of major repairs.

**2.3.2: Purchase maintenance tracking software to track preventative maintenance items and regular repairs and costs.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Franklin County but all coordination partners would contribute funding (local match).

Implementation Budget/Costs: Cost of software and staff time involved in purchasing and setting up new software.

Staffing Implications: None.

Capital Requirements: Cost of software.

**Goal #2:  
Coordinate/pool resources whenever possible to eliminate duplication of services and free up existing resources so that more service may be provided within the available funding limitations.**

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Coordinate/pool  
resources whenever  
possible to eliminate  
duplication of  
services and free up  
existing resources so  
that more service  
may be provided  
within the available  
funding limitations.**

Ridership Implications:	None.
Performance Measures:	PM's performed on-time. Amount of maintenance costs (should be reduced with improved maintenance).
<b>2.3.3: Hire additional maintenance staff and purchase equipment in order for Franklin County Public Transportation to perform maintenance functions for other coordinated transportation providers.</b>	
Priority/Implementation Timeframe:	Near-Term.
Parties Responsible:	Franklin County Public Transportation, but all coordination partners would contribute in a share of the cost based on the number of vehicles in their fleet.
Implementation Budget/Costs:	Cost of hiring additional staff. Cost of additional equipment if required.
Staffing Implications:	At least 1.5 FTE mechanics would be hired to staff the maintenance facility in order to take care of Franklin, Fayette, Union, and Rush Counties' vehicles. This number could change depending on the number of coordination partners who finally decide to participate.
Capital Requirements:	Cost of maintenance equipment if needed.
Ridership Implications:	None.
Performance Measures:	No. of PM's performed on time. Repair turn-around time.

**Objective 2.4: Coordinate/standardize driver training and driver/mechanic hiring requirements. In this regard, if agencies need to share drivers or mechanics, everyone will have the same basic**

**qualifications and training. This also ensures a minimum level of quality service and maintenance throughout the entire region.**

***Implementation Strategies/Alternatives:***

**2.4.1: Develop a list of mandatory training and hiring requirements. A suggested list of required training is as follows:**

- OSHA Bloodborne Pathogens
- Passenger sensitivity training
- Customer service/dealing with difficult passengers
- Wheelchair securement training
- Defensive driving
- Accident/incident procedures
- Vehicle evacuation procedures
- First aid/CPR
- Pre-trip inspection procedures
- Safety and security
- Substance abuse awareness
- Radio or cell phone procedures
- HIPPA training

A suggested list of hiring requirements includes the following items:

- Minimum age
- Minimum number of years of driving or maintenance experience
- Knowledge of English
- Possesses appropriate driver license
- No criminal record
- Meets certain physical requirements
- ASE-certified or other similar certifications (mechanic only)
- Ability to perform simple math
- Reasonable knowledge of service area
- Ability to read basic maps
- Passage of a road test given by a supervisor
- Passage of a written driving skills test.

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Staff time involved. Some training may involve costs if qualified in-house staff are not available. RTAP training

**Goal #2:  
Coordinate/pool resources whenever possible to eliminate duplication of services and free up existing resources so that more service may be provided within the available funding limitations.**

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should be taken advantage of  
as much as possible.

Staffing Implications:	None.
Capital Requirements:	None.
Ridership Implications:	Better quality service to riders.
Performance Measures:	All staff trained. No. of complaints about staff. No. of incidents/accidents handled properly. No. of pre-trip inspections performed properly.

**Goal #2:  
Coordinate/pool  
resources whenever  
possible to eliminate  
duplication of  
services and free up  
existing resources so  
that more service  
may be provided  
within the available  
funding limitations.**

**2.4.2: Share a training schedule so that all transportation providers (including human service agencies and other organizations that provide consumer based services) in the coordination effort can take advantage of the training for their new hires and existing employees. Coordinate locations of the training and schedule dates in advance with RTAP, INDOT or other staff persons when necessary.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Designate a lead agency to schedule and coordinate training.

Implementation Budget/Costs: Staff time involved.

Staffing Implications: None.

Capital Requirements: None.

Ridership Implications: None.

Performance Measures: All training sessions held.

**Objective 2.5: Standardize transportation operating policies and procedures as much as possible to ensure consistency with the general public.**

***Implementation Strategies/Alternatives:***

**2.5.1: Develop a list of policies/procedures which could be uniform throughout the region. A suggested list is as follows:**

No-shows  
 Cancellations  
 Accident/incident procedures  
 Vehicle evacuation procedures  
 Seatbelts  
 Car seats  
 Inclement weather  
 ADA-related policies – wheelchair assistance, oxygen transport, riding on lifts, service animals, etc.

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Staff time involved.

Staffing Implications: None.

Capital Requirements: None.

Ridership Implications: None.

Performance Measures: Policies and procedures developed.

**Objective 2.6: Share vehicles or contract for service among participating transportation providers whenever possible.**

***Implementation Strategies/Alternatives:***

**2.6.1: Share vehicles when times of usage permit to save on the capital cost of vehicles.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Staff time involved.

Staffing Implications: To be determined.

Capital Requirements: None.

**Goal #2:  
 Coordinate/pool resources whenever possible to eliminate duplication of services and free up existing resources so that more service may be provided within the available funding limitations.**

Ridership Implications: To be determined.  
 Performance Measures: Number of vehicles shared.  
 Capital costs saved.

**2.6.2: Contract for service with public transportation providers whenever it is financially and logistically feasible. Often times, it is less expensive for an agency to contract for service from another provider who is already providing service in an area than to provide the service in-house. It is noted that contracting agencies providing vehicles to transportation providers to operate trips for consumers should be charged the fully allocated cost of service minus any vehicle expenses paid by the contracting agency.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Staff time involved.

Staffing Implications: To be determined.

Capital Requirements: None.

Ridership Implications: To be determined.

Performance Measures: Number of contract trips provided.

**Objective 2.7: Hire and utilize a Mobility Manager to coordinate transportation resources, develop regional marketing plans, create brochures and rider guides, conduct speaking/education engagements, function as (or assist with) travel training, and focus on centralizing resources. The Mobility Manager will lead implementation of coordination strategies, and improve the efficiency of transportation related service for all participating organizations.**

***Implementation Strategy/Alternatives:***

**2.7.1: Hire a Mobility Manager for the coordination effort.**

Priority/Implementation Timeframe: Near- or Mid-Term.

Parties Responsible: A public transportation provider in the region should be the lead agency with

**Goal #2:  
Coordinate/pool resources whenever possible to eliminate duplication of services and free up existing resources so that more service may be provided within the available funding limitations.**

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	participation from participating coordination partners.
Implementation Budget/Costs:	Wages for Mobility Manager determined based upon job description and duties. Eligible application for Section 5317 grant (with 20% local match required). Local match should be shared by coordination partners and can be derived from any non-transit Federal dollars.
Staffing Implications:	Hire a Mobility Manager. The Mobility Manager could share responsibilities of managers and schedulers from participating organizations.
Capital Requirements:	None.
Ridership Implications:	Increase in ridership as Mobility Manager improves the communication between participating organizations and improves utilization of vehicles through coordination.
Performance Measures:	Mobility Manager hired. Job duties assigned with associated timelines. Timelines and goals achieved. Increased Ridership.

**Goal #2:  
Coordinate/pool resources whenever possible to eliminate duplication of services and free up existing resources so that more service may be provided within the available funding limitations.**

**GOAL #3: INCREASE SERVICE AVAILABLE TO THE GENERAL PUBLIC, INCLUDING INDIVIDUALS WITH DISABILITIES, OLDER ADULTS, AND PEOPLE WITH LOW INCOMES.**

**Objective 3.1: Increase and provide evening and weekend transportation service.**

**Goal #3: Increase service available to the general public, including individuals with disabilities, older adults, and people with low incomes.**

***Implementation Strategies/Alternatives:***

**3.1.1: Offer weekend service with Saturday service from 9:00 AM to 6:00 PM. Rotate responsibility between providers for staffing Saturday service and have passengers schedule in advance. A public transportation provider or the central call center (800 number) should be responsible for scheduling Saturday trips.**

Priority/Implementation Timeframe: Mid-Term.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Cost per partner – approximately \$3,000-\$4,000 or less. Service expansion could be a potential application for Section 5317 or 5316 funding (local match required).

Staffing Implications: Need to have a driver available to cover Saturday runs approximately once a month or less depending on the number of participants.

Capital Requirements: None. This service could be done with existing vehicles.

Ridership Implications: Increase in ridership due to increase in service offered on Saturdays.

Performance Measures: Number of Saturday trips.

**3.1.2: Market Saturday service to the general public throughout the region.**

Priority/Implementation Timeframe: Mid-Term.

Parties Responsible: Coordination partners who participate in the Saturday service program.

**Goal #3: Increase service available to the general public, including individuals with disabilities, older adults, and people with low incomes.**

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**Goal #3: Increase service available to the general public, including individuals with disabilities, older adults, and people with low incomes.**

Implementation Budget/Costs:	Cost of marketing materials and advertisements. Staff time involved.
Staffing Implications:	None.
Capital Requirements:	None.
Ridership Implications:	Increase in ridership on Saturdays.
Performance Measures:	Number of Saturday trips.

**Objective 3.2: Coordinate long distance trips between providers to avoid duplication of service especially trips to Indianapolis, Shelbyville, Greenfield, Batesville, Muncie, Ohio cities, etc.**

***Implementation Strategies/Alternatives:***

**3.2.1: See Implementation Strategy 2.1.3 above.**

**Objective 3.3: Develop a point deviation route which serves Richmond, Liberty, Brookville and Connersville on a regular basis. This route could be provided approximately four (4) times a day. Rushville could be added at certain times of the day. Responsibility for running this route could be rotated to share the cost. Explore the possibility of including a stop to coordinate with Greyhound or Megabus when buses are in the area so that the Greyhound or Megabus could establish a stop to pick up passengers that need to travel across the state.**

***Implementation Strategies/Alternatives:***

**3.3.1: Analyze existing regularly occurring trips to see if point deviation route could accommodate them.**

Priority/Implementation Timeframe: Mid-Term

Parties Responsible: Coordination project partners, mobility manager.

Implementation Budget/Costs: To be determined. This service expansion could be a potential application for Section 5317 or 5316 (local match required).

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**Goal #3: Increase service available to the general public, including individuals with disabilities, older adults, and people with low incomes.**

Staffing Implications: To be determined.

Capital Requirements: None. This service can be accommodated with existing vehicles.

Ridership Implications: Increase in ridership due to the availability of service at regular times.

Performance Measures: Number of riders on new route.

**3.3.2: Work with Greyhound and/or Megabus to coordinate an appropriate transfer location.**

Priority/Implementation Timeframe: Mid-Term

Parties Responsible: Coordination project partners, mobility manager.

Implementation Budget/Costs: To be determined.

Staffing Implications: To be determined.

Capital Requirements: None.

Ridership Implications: Potential increase in ridership because individuals now have access to transportation services beyond the region.

Performance Measures: Number of riders on new route that utilize the transfer.

**3.3.3: Market new route to the general public and to agencies.**

Priority/Implementation Timeframe: Mid-Term.

Parties Responsible: Need to designate lead agency for this.

Implementation Budget/Costs: Staff time and cost of marketing materials.

Staffing Implications: None.

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**Goal #3: Increase service available to the general public, including individuals with disabilities, older adults, and people with low incomes.**

Capital Requirements:	None.
Ridership Implications:	Increase in ridership due to the availability of service at regular times.
Performance Measures:	Number of people reached. Number of brochures distributed. Number of riders on route.

**Objective 3.4: Add general public transportation to accommodate 2<sup>nd</sup> and 3<sup>rd</sup> shift work-related trips in the evening from 6:00 PM to 12:00 midnight, Monday through Friday.**

***Implementation Strategies/Alternatives:***

**3.4.1: Rotate responsibility for staffing evening service.**

Priority/Implementation Timeframe:	Mid-Term.
Parties Responsible:	Coordination project partners.
Implementation Budget/Costs:	To be determined. Expanded service for employment is a potential application for Section 5316-JARC (local match required).
Staffing Implications:	Need one driver to staff this shift at each partner agency for one week a month or less, depending on how many participate.
Capital Requirements:	None. This service can be accommodated with existing vehicles.
Ridership Implications:	Increase in ridership of approximately 3,120 riders per year.
Performance Measures:	Number of evening general public work trips.

**3.4.2: Market evening service to the general public and to employers.**

Priority/Implementation Timeframe: Mid-Term.

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**Goal #3: Increase service available to the general public, including individuals with disabilities, older adults, and people with low incomes.**

Parties Responsible:	Need to designate lead agency for this.
Implementation Budget/Costs:	Staff time involved and cost of marketing materials.
Staffing Implications:	None.
Capital Requirements:	None. This service can be accommodated with existing vehicles.
Ridership Implications:	Increase in ridership of approximately 3,120 riders.
Performance Measures:	Number of evening general public work trips

**3.4.3: Promote the use of employer/employee tax benefits for the payment of public transportation costs. The Federal government offers income tax incentives for employers who pay for public transportation for employees and for employees who use public transportation to travel to work.**

Priority/Implementation Timeframe: Long-Term.

Parties Responsible:	Need to designate lead agency for this.
Implementation Budget/Costs:	Staff time and the cost of marketing materials.
Staffing Implications:	None.
Capital Requirements:	None.
Ridership Implications:	Potentially an increase in work-related trips.
Performance Measures:	Number of employers taking advantage of tax benefits.

**Objective 3.5: Develop new services and programs to improve the transportation options for individuals with disabilities and older adults.**

***Implementation Strategies/Alternatives:***

**3.5.1: Explore the possibility and, if feasible, implement a new voucher program with a human service agency that serves individuals with disabilities, older adults, or people with low incomes. The voucher program would be associated with transporting individuals to employment opportunities, and could be expanded for other trip purposes. Vouchers can include mileage reimbursement for a volunteer driver program, or expenses for trips provided by a private taxi or human service agency.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Designate an organization to be the lead agency for exploring and applying for funds to support the new voucher program.

Implementation Budget/Costs: No costs in exploring the possibility of the program. An appropriate budget for the voucher program depends upon the scope of services and should be defined prior to applying for funds. New or expanded voucher programs that are beyond the ADA requirements are eligible under the Section 5317 grant (50/50 Federal/local match required).

Staffing Implications: None.

Capital Requirements: None.

Ridership Implications: Increase in ridership because passengers have an

**Goal #3: Increase service available to the general public, including individuals with disabilities, older adults, and people with low incomes.**

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**Goal #3: Increase service available to the general public, including individuals with disabilities, older adults, and people with low incomes.**

affordable method of transportation.

Performance Measures:	Number of voucher partnerships established between transportation providers and agencies. Number of individuals who use the vouchers to ride transportation.
<b>3.5.2 Offer a passenger assistant/aide for older adults and individuals with disabilities who need special assistance when traveling on public and human service agency vehicles. Job duties/responsibilities of the passenger assistant should be defined by coordination partners. The assistant should be available to all coordination partners, as appropriate.</b>	
Priority/Implementation Timeframe:	Near-Term.
Parties Responsible:	Designate an organization to be the lead agency for applying for funds to support the passenger assistant and managing his/her schedule. Coordination partners should define job duties. (Utilize the Easter Seals Project Action for sample job duties.)
Implementation Budget/Costs:	Hire a passenger aid (or multiple passenger aids). The costs are to be determined based upon job description and hours of service. Possible funding sources, including Section 5317 (with 50/50 match) should be investigated.
Staffing Implications:	Hire a qualified passenger assistant/aid. Passenger assistant could help with training activities.
Capital Requirements:	None.

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Ridership Implications: Increase in ridership because passengers who were unable to utilize public transportation independently are now able to ride with the assistant/aid.

Performance Measures: Number of passengers assisted.  
Consumer satisfaction.

**GOAL #4: INCREASE ACCESSIBILITY OF TRANSPORTATION SERVICES IN THE REGION FOR INDIVIDUALS WITH DISABILITIES.**

**Objective 4.1: Increase the number of accessible vehicles available for transportation service in the Whitewater Region.**

***Implementation Strategies/Alternatives:***

**4.1.1: Develop vehicle replacement schedules for transportation providers in the region.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Those coordination partners that operate vehicles for public or consumer transportation.

Implementation Budget/Costs: To be determined.

Staffing Implications: None.

Capital Requirements: To be determined.

Ridership Implications: Potentially an increase in the number of wheelchair trips for coordinated transportation providers.

Performance Measures: Number of wheelchair trips

**4.1.2: Investigate the possibility of acquiring the accessible vehicle from the Independent Living Center to use for the coordination project.**

Priority/Implementation Timeframe: Immediate.

**Goal #3: Increase service available to the general public, including individuals with disabilities, older adults, and people with low incomes.**

**Goal #4: Increase accessibility of transportation services in the region for individuals with disabilities.**

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**Goal #4: Increase accessibility of transportation services in the region for individuals with disabilities.**

Parties Responsible: Union County Transit and coordination project partners.

Implementation Budget/Costs: To be determined.

Staffing Implications: To be determined.

Capital Requirements: None.

Ridership Implications: To be determined.

Performance Measures: Vehicle acquired.

**4.1.3: Apply for additional accessible vehicles through the INDOT Section 5310 or 5311 programs or other available funding sources.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners who are not 100% accessible and need additional vehicles.

Implementation Budget/Costs: To be determined.

Staffing Implications: To be determined.

Capital Requirements: Purchase of vehicles.

Ridership Implications: To be determined depending on the future use of vehicles purchased.

Performance Measures: Number of vehicles purchased.  
Accessibility ratio of fleet.

**4.1.4: Share accessible vehicles where possible. Systems are open varied hours, peak hours are not all the same, and sometimes vehicles are not being used during certain times of the year.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: To be determined.

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**Goal #4: Increase accessibility of transportation services in the region for individuals with disabilities.**

Staffing Implications: None.  
 Capital Requirements: None.  
 Ridership Implications: Increase in wheelchair trips.  
 Performance Measures: Number of wheelchair trips.

**Objective 4.2: Increase accessibility of transportation provider informational materials.**

***Implementation Strategies/Alternatives:***

**4.2.1: Develop rider guides for individual transportation providers and for the coordination project which contain instructions about how to make reservations with transportation providers, telephone numbers to make reservations, operating hours for scheduling trips, fare structures, an outline of driver’s responsibilities, passenger rules while on the vehicle, common wheelchair definitions, and all ADA-related policies. The rider guide should display the Indiana Relay Number, and indicate that they are available in alternative formats.**

Priority/Implementation Timeframe: Near-Term.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Cost of brochures/rider guides. Staff time involved. Responsibility for assembling and distributing the guide could be assigned to the Mobility Manager or Travel Trainer. Potential application for Section 5317 (local match required).

Staffing Implications: None.  
 Capital Requirements: None.  
 Ridership Implications: Potential increase in ridership for persons with disabilities.  
 Performance Measures: Brochures/rider guides developed. Number of riders with disabilities.

**4.2.2: Develop a website for the coordination project which is Bobby-compliant (Bobby software is used to scan websites to determine if formatting is acceptable for “reader” software so that the computer can “read” the website to persons with visual impairments).**

Priority/Implementation Timeframe: Mid-Term.

Parties Responsible: Coordination project partners.

Implementation Budget/Costs: Cost of website development and hosting. Staff time involved. Website development is a potential application for Section 5317 funds (match required).

Staffing Implications: None.

Capital Requirements: None.

Ridership Implications: Potential increase in ridership for persons with disabilities.

Performance Measures: Compliant website developed.  
Number of visitors to website.  
Increased number of riders with disabilities.

**4.2.3: Train consumers with disabilities and the public how to access and utilize the available transportation services offered by coordination partners. Training facts would be incorporated with the rider guides but also would involve an individual traveling to various locations (i.e., human service agencies, older adult facilities, local fairs and events) to provide a hands-on demonstration about how to schedule and use transportation. The trainer may even ride with a first time passenger.**

Priority/Implementation Timeframe: Mid-Term.

Parties Responsible: Coordination partners share training responsibilities by designating a staff person or volunteer from each organization

**Goal #4: Increase accessibility of transportation services in the region for individuals with disabilities.**

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**Goal #4: Increase  
accessibility of  
transportation  
services in the region  
for individuals with  
disabilities.**

to train consumers and the public on regular intervals. Trainers should visit develop a schedule to attend public fairs to educate the public about scheduling on-line, visit schools, and universities to provide hands-on training.

Implementation Budget/Costs: Costs associated with staff time for training. Potential to hire individual(s) to function as the travel trainer. Costs associated with printed training materials.

Staffing Implications: Staff time associated with coordinating and conducting training. Potential need to hire a travel trainer, or travel trainer staff.

Capital Requirements: None.

Ridership Implications: Possible increase in ridership due to new awareness and improved comfort level for scheduling and using public transportation.

Performance Measures: Number of trainings conducted.  
Number of on-line trip requests submitted by consumers.  
Number of trainers.

**VI. REFERENCE TABLE FOR  
IMPLEMENTATION  
STRATEGIES AND  
POTENTIAL GRANT  
APPLICATIONS**

## **VI. REFERENCE TABLE FOR IMPLEMENTATION STRATEGIES AND POTENTIAL GRANT APPLICATIONS**

The following table outlines the strategies and objectives designated to achieve the locally identified transportation goals that are intended to meet local unmet transportation needs, reduce duplication, and improve coordination of human service agency and transportation provider resources. The table includes all strategies and designates those strategies that are currently designed for implementation with the assistance of a grant from the Transportation for Elderly Persons and Persons with Disabilities (Section 5310), Job Access and Reverse Commute (Section 5316), or New Freedom (Section 5317). Page numbers are provided in Exhibit VI.1 for quick reference to detailed information of each objective.

The implementation timeframe for each strategy ranges from the date of this report through 2013. It is noted that the coordinated transportation committee should update this plan on an annual basis and as new coordinated transportation strategies and objectives are developed. For example, replacement vehicles through the Section 5310 program (to replace previous or future granted vehicles) should be included in updates to this document, as appropriate.

**Exhibit VI.1: Implementation Key and Matrix**

<b>Page Number</b>	<b>Strategy Identification Number</b>	<b>Strategy Description</b>	<b>Priority/Implementation Timeframe</b>	<b>Specialized Vehicles (5310)</b>	<b>Job Access &amp; Reverse Commute (5316)</b>	<b>New Freedom Initiative (5317)</b>
V-1,2	1.1.1	Conduct presentations on public and coordinated transportation at County Council and Commissioners' meetings, and also at meetings with Town Councils and other elected officials.	Near-Term			
V-2,3	1.1.2	Conduct open houses for local government officials and human service agency representatives at public transportation facilities.	Near-Term			
V-3	1.1.3	Develop an informational brochure to expand public awareness about the benefits of public and coordinated transportation that could be distributed to local government officials and human service agency staff.	Near-Term			
V-4	1.1.4	Submit informational articles on public and coordinated transportation to the local newspapers and to agency newsletters. Encourage riders/consumers to write positive letters to the editor.	Near-Term			
V-4	1.1.5	Attend agency and government meetings where networking opportunities exist and where information on transportation can be presented.	Continuous			
V-5	1.1.6	Have a "ribbon-cutting" for a new vehicle that is used for the coordination project and invite government and agency officials, and the press.	Continuous			
V-5,6	1.2.1	Distribute information on public and coordinated transportation at local fairs, job fairs, employee health fairs and community events (set up booths).	Continuous			
V-6	1.2.2	Make presentations on public and coordinated transportation at local civic club meetings – Lions, Rotary, Moose, Elks, Kiwanis, etc.	Continuous			
V-7	1.2.3	Distribute informational brochure to riders, school children, nursing homes, advocacy and support groups, and agency consumers, through the newspapers and other local media.	Continuous			
V-7	1.2.4	Advertise public transit systems and the coordination project on Richmond/Rose View Transit vehicles and other systems' vehicles where possible.	Continuous			

**Exhibit VI.1: Implementation Key and Matrix**

<b>Page Number</b>	<b>Strategy Identification Number</b>	<b>Strategy Description</b>	<b>Priority/Implementation Timeframe</b>	<b>Specialized Vehicles (5310)</b>	<b>Job Access &amp; Reverse Commute (5316)</b>	<b>New Freedom Initiative (5317)</b>
V-8	1.3.1	Add government, agency, and consumer members that represent all parts of the region to the existing Transit Advisory Committee for the regional coordination project.	Near-Term & Continuous			
V-8,9	1.3.2	Establish bylaws for the regional coordination TAC so that each member understands the purpose of the committee as an advisory body for the regional coordination effort.	Near-Term			
V-9	1.3.3	Ask each regional TAC member to commit to actively supporting an assigned role in the coordination effort so that the committee is actively and energetically promoting and advising the coordination effort.	Near-Term			
V-10,11	2.1.1	Expand the central call number (toll-free) operated by Union County Council on Aging to all counties in the region (it is currently only available in Union and Franklin counties) or provide information through a 211 number.	Near-Term			Yes
V-11	2.1.2	Purchase and utilize scheduling and dispatching software that will allow all providers in the regional coordination project to share trip information.	Mid-Term			
V-11,12	2.1.3	Coordinate long distance trips to such places as Indianapolis, Muncie, Oxford, etc. Possibly develop a schedule of regularly occurring long distance trips and share with all transportation providers and human service agencies.	Near-Term			
V-12,13	2.2.1	Explore the feasibility of creating a centralized call center for scheduling and dispatching coordinated transportation services throughout the region.	Near-Term			
V-13	2.2.2	If results from the feasibility study are positive, request commitments from local transportation providers to participate in the operation of the centralized dispatching center.	Mid-Term			
V-13, 14	2.2.3	Establish bylaws, policies, and procedures for operating a central dispatch center. Some of the coordinated policies and procedures recommendations are outlined later in this chapter.				

**Exhibit VI.1: Implementation Key and Matrix**

<b>Page Number</b>	<b>Strategy Identification Number</b>	<b>Strategy Description</b>	<b>Priority/Implementation Timeframe</b>	<b>Specialized Vehicles (5310)</b>	<b>Job Access &amp; Reverse Commute (5316)</b>	<b>New Freedom Initiative (5317)</b>
V-14	2.2.4	Apply for funding to implement a central dispatching center for transportation in the region and, when awarded, implement the center.	Long-Term			
V-15	2.3.1	Develop uniform preventative maintenance standards for coordinated transportation providers in the region.	Near-Term			
V-15	2.3.2	Purchase maintenance tracking software to track preventative maintenance items and regular repairs and costs.	Near-Term			
V-16	2.3.3	Hire additional maintenance staff and purchase equipment in order for Franklin County Public Transportation to perform maintenance functions for other coordinated transportation providers.	Near-Term			
V-17	2.4.1	Develop a list of mandatory training and hiring requirements. A suggested list of required training is as follows:	Near-Term			
V-18	2.4.2	Share a training schedule so that all transportation providers (including human service agencies and other organizations that provide consumer based services) in the coordination effort can take advantage of the training for their new hires and existing employees.	Near-Term			
V-18,19	2.5.1	Develop a list of policies/procedures which could be uniform throughout the region. A suggested list is as follows:	Near-Term			
V-19	2.6.1	Share vehicles when times of usage permit to save on the capital cost of vehicles.	Near-Term			
V-20	2.6.2	Contract for service with public transportation providers whenever it is financially and logistically feasible.	Near-Term			
V-20,21	2.7.1	Hire a Mobility Manager for the coordination effort.	Near or Mid-Term		Yes	Yes
V-22	3.1.1	Offer weekend service with Saturday service from 9:00 AM to 6:00 PM. Rotate responsibility between providers for staffing Saturday service and have passengers schedule in advance.	Mid-Term		Yes	Yes
V-22,23	3.1.2	Market Saturday service to the general public throughout the region.	Mid-Term			
V-23	3.2.1	See Implementation Strategy 2.1.3 above.				
V-23,24	3.3.1	Analyze existing regularly occurring trips to see if point deviation route could accommodate them.	Mid-Term	Yes	Yes	Yes

**Exhibit VI.1: Implementation Key and Matrix**

<b>Page Number</b>	<b>Strategy Identification Number</b>	<b>Strategy Description</b>	<b>Priority/Implementation Timeframe</b>	<b>Specialized Vehicles (5310)</b>	<b>Job Access &amp; Reverse Commute (5316)</b>	<b>New Freedom Initiative (5317)</b>
V-24	3.3.2	Work with Greyhound and/or Megabus to coordinate an appropriate transfer location.	Mid-Term			Yes
V-24	3.3.3	Market new route to the general public and to agencies.	Mid-Term			Yes
V-25	3.4.1	Rotate responsibility for staffing evening service.	Mid-Term		Yes	
V-25,26	3.4.2	Market evening service to the general public and to employers.	Mid-Term			
V-26	3.4.3	Promote the use of employer/employee tax benefits for the payment of public transportation costs.	Long-Term			
V-27,28	3.5.1	Explore the possibility and, if feasible, implement a new voucher program with a human service agency that serves individuals with disabilities, older adults, or people with low incomes.	Near-Term			Yes
V-28,29	3.5.2	Offer a passenger assistant/aid for older adults and individuals with disabilities who need special assistance when traveling on public and human service agency vehicles.	Near-Term			Yes
V-29	4.1.1	Develop vehicle replacement schedules for transportation providers in the region.	Near-Term			
V-29,30	4.1.2	Investigate the possibility of acquiring the accessible vehicle from the Independent Living Center to use for the coordination project.	Immediate			
V-30	4.1.3	Apply for additional accessible vehicles through the INDOT Section 5310 or 5311 programs or other available funding sources.	Near-Term			
V-30,31	4.1.4	Share accessible vehicles where possible. Systems are open varied hours, peak hours are not all the same, and sometimes vehicles are not being used during certain times of the year.	Near-Term			
V-31,32	4.2.1	Develop rider guides for individual transportation providers and for the coordination project.	Near-Term			Yes
V-32	4.2.2	Develop a website for the coordination project which is Bobby-compliant.	Mid-Term			Yes
V-32,33	4.2.3	Train consumers with disabilities, and the public how to access and utilize the available transportation services offered by coordination partners.	Mid-Term			Yes

## **VII. ADOPTION OF PLAN**

**VII. ADOPTION AND APPROVAL OF PLAN**

The public comment period for this plan was 30 days with two-weeks notice prior to a public hearing opportunity. The notice of public hearing was posted in a widely distributed newspaper and a copy of such notice is included at the end of this chapter.

The regional Coordinated Public Transit-Human Services Transportation Plan was adopted on \_\_\_\_\_ at a steering committee meeting of the project participants. Signatures of adoption are provided below. Committee Members who adopted the plan participated in the planning process.

\_\_\_\_\_  
Name Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

Local elected officials were invited to review and accept the Coordinated Public Transit-Human Services Transportation Plan. Signatures of approval are provided below.

\_\_\_\_\_  
Name Date

Notice of Public Hearing was posted in the  
\_\_\_\_\_ on  
\_\_\_\_\_. A copy of the notice is provided  
below.

Public Hearing Notice

## **APPENDIX**

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# Appendix A

Region 4.2

## EXHIBIT 1: OUTREACH DOCUMENTATION SUMMARY

### COORDINATED PUBLIC TRANSIT-HUMAN SERVICES TRANSPORTATION

#### PLAN

FOR WAYNE, RUSH, FAYETTE, UNION AND FRANKLIN COUNTIES, INDIANA

#### Outreach Documentation Summary

#### Focus Groups

##### *Date(s) & Locations Held:*

\_8/14/07\_                      \_\_First Missionary Baptist Church 414 Eaton St. Liberty, IN\_\_\_\_

\_3/13/08\_                      \_\_English Lutheran Church 2727 E. Main St. Richmond, IN\_\_\_\_

##### *Date(s) Invitations Were Distributed:*

✓ U.S. Mail \_\_\_\_7/18/07\_\_\_\_       Web Posting \_\_\_\_\_

✓ E-mail \_\_\_\_2/29/08\_\_\_\_       Other (please specify)

✓ Newspaper Notices:

Indiana RTAP Newsletter  
Richmond Palladium-Item (3-9-08)  
Brookville Democrat (3-12-08)  
Indiana Media Group (3-7-08)

Radio/TV PSAs \_\_\_\_\_

- ✓ Distributed in local community/senior centers, etc.
- ✓ Information was provided in alternative formats, upon request.
- ✓ Events were open to all individuals, including hearing impaired.
- ✓ Information was provided in alternative formats, upon request.
  
- ✓ Interpreters provided, upon request.

##### *# of Attendees (by location & date)*

\_\_14\_\_                      \_\_8/14/07 @ First Missionary Baptist Church Liberty, IN\_\_

\_\_14\_\_                      \_\_3/13/08 @ English Lutheran Church, Richmond, IN\_\_

- ✓ Invitation letter and mailing list attached.
- ✓ Copies of flyers, brochures, etc.
- ✓ Copy of Public Notice from each newspaper in which it appeared
- ✓ Copy of e-mail invitation and mailing list attached.
- ✓ Sign-in Sheets attached.

# Appendix A

## Region 4.2

Copy of web posting (if available).

Focus Group Summary Included in Report

---

### **Public Hearings**

*Date(s) & Locations Held:*

\_\_\_\_\_

*Date(s) Notice(s) Were Published:* \_\_\_\_\_

Events were open to all individuals, including hearing impaired

Copy of web posting (if available).

Copies of flyers, brochures, etc. attached along

Copy of Public Notice attached along with \_\_\_\_\_ with distribution locations.

\_\_\_\_\_ a list of newspapers in which it appeared.

*# of Attendees* \_\_\_\_\_

Sign-in Sheets Attached

Minutes Attached

### **Surveys**

*Date(s) Surveys Were Distributed:*

U.S. Mail 7/10/07 \_\_\_\_\_ Web Posting 6/1/07-10/1/07 \_\_\_\_\_

E-mail Upon request 6/1/07 – 10/1/07 \_\_\_\_\_

Other (please specify): Fax available upon request.

Newspaper Notice June/July 2007 \_\_\_\_\_

Radio/TV PSAs \_\_\_\_\_

Distributed in local community/senior centers, etc. Local Points of Contact were asked to post the meeting announcements in community centers and senior centers \_\_\_\_\_

Information was provided in alternative formats, upon request.

No. of Surveys Distributed: 86 invitations to complete the survey

No. of Surveys Returned: 13

Listing of Survey Recipients attached

---

# Appendix A

## Region 4.2

### Other Outreach Efforts

- ✓ Flyers or Brochures in  
X Senior Centers X Community Centers  
 City/County Offices  Other \_\_\_\_\_
- ✓ Teleconferences – Consultants called organizations to request follow-up information. Organizations that did not participate, but major transportation providers, were contacted by telephone to verify that they received the invitation/meeting notice.
- ✓ Miscellaneous Meetings, Conferences, etc. (please specify)  
INCOST Meeting – September 27/28, 2007  
Meeting for Indiana MPOs – May 24, 2007

If other activities include meetings, conferences, etc., please indicate the following information for each event:

#### *Date(s) & Locations Held:*

Sept 27/28, 2007      Indianapolis  
May 24, 2007      Indianapolis

#### *Date(s) Invitations Were Distributed:*

- U.S. Mail \_\_\_\_\_ X Web Posting \_RTAP\_\_\_\_\_
- E-mail \_\_\_\_\_  Other (please specify)
- ✓ Newspaper Notice RTAP Newsletter \_\_\_\_\_
- Radio/TV PSAs \_\_\_\_\_
- Distributed in local community/senior centers, etc.
- ✓ Information was provided in alternative formats, upon request.
- ✓ Events were open to all individuals, including hearing impaired.

#### *# of Attendees (by location & date)*

\_\_\_\_\_  
\_\_\_\_\_

- Sign-in Sheets Attached, if applicable
- Summary Attached, if applicable

Invitation letter/Meeting Notice and mailing list attached.  
Copy of Public Notice attached along with a list of newspapers in which it appeared.  
Copy of e-mail invitation/Meeting Notice and mailing list attached.  
Copy of web posting (if available).  
Copies of flyers, brochures, etc. attached along with distribution locations.

# Appendix A

## Region 4.2

### EXHIBIT 2: STAKEHOLDER CHECKLIST

The following list is provided to assist you in identifying the agencies, organizations, and institutions in your community that you will contact regarding your plan. It is possible that not all of these organizations exist in your community, or that multiple agencies exist with the same description. Keep this in mind when you are convening your stakeholder groups. Be creative when brainstorming for stakeholders as the more input you receive, the more comprehensive and relative your plan will be.

- Area Agencies on Aging
- Advocacy organizations, e.g., AARP
- Assisted Living Communities
- Child Care Facilities
- City Councils
- Colleges, Universities, and Community Colleges
- Community Based Organizations; Community Action Programs
- County Aging Programs
- County Commissioners or Councils
- Local DHHR Offices
- Economic Development Authorities
- Fair Shake Network
- Family Resource Network
- Foundations
- Group Homes
- Homeless Shelters
- Hospitals/Other Health Care Providers
- Independent Living Councils
- Major Employers or Employer Orgs.
- Local Medicaid Brokers or Providers
- Mental Health Providers
- Metropolitan Planning Organizations
- Non-Profit Transportation Providers
- Nursing Homes
- Other Non-Profit Organizations
- Potential Riders in Targeted Areas (lower income, individuals with disabilities and older Americans)
- Private Bus Operators
- Public Transportation Systems
- Regional Planning & Dev. Councils
- Local Rehabilitation Service Offices
- Retired Senior Volunteer Programs
- Local School Districts
- Security and Emergency Mgmt. Agencies
- Senior Centers
- Sheltered Workshops
- Taxicab Operators
- Technical or Vocational Schools
- Transit Riders
- United Way
- Local Workforce Offices

# Appendix A

## Region 4.2

### EXHIBIT 3: NEWSPAPER NOTICES – INDIANA RTAP NEWSLETTER, ISSUE 2, 2007

## Notice of INDOT Statewide Coordination Plan

Regional meetings on the development of a coordinated public transit-human services transportation plan will be scheduled through out the state between June 20 and August 31, 2007. The meetings will include a discussion of the content of the locally developed coordination plan, a needs assessment, the level of coordination between transportation programs, and developing an action plan for developing strategies and steps for improving coordination efforts.

In August of 2005, Congress passed the Safe, Accountable, Flexible and Efficient Transportation Equity Act - A Legacy for Users (SAFETEA-LU), reauthorizing the surface transportation act. As part of this reauthorization, grantees under the New Freedom Initiative (5317), Job Access and Reverse Commute (5316) and Elderly and Disabled Transportation Program (5310) must meet certain requirements in order to receive funding for fiscal 2007 (beginning 10/1/06) and beyond.

One of the SAFETEA-LU requirements is that projects from the programs listed above must be part of a "locally developed coordinated public transit-human services transportation plan." This plan is required to be developed through a process that includes representatives of public, private, and non-profit transportation services, human services providers and the general public.

Agencies planning on applying for funding under the Section 5310, 5316 or 5317 programs anytime within the next four years, must participate in plan development and meetings. Those agencies must also complete the INDOT on-line survey at [www.sndayton.com/INDOT\\_coordination\\_survey](http://www.sndayton.com/INDOT_coordination_survey). Participation from agencies that represent individuals, who use or need public transportation, whether or not that agency is a transportation provider, is also important to the validity of the plan. If you have not yet received notification of the meeting in your region, please contact Laura Brown (contact information provided below).

Interested parties who are unable to attend the meeting in their region, but would like to submit comments, may send their comments in advance to: Laura Brown, 3131 South Dixie Hwy. Suite 545 Dayton, Ohio 45439, Call (937) 299-5007, or email comments to [lbrownrls@verizon.net](mailto:lbrownrls@verizon.net) no later than August 17, 2007.

# Appendix A

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## Region 4.2

### EXHIBIT 3: NEWSPAPER NOTICES (CONT)

**PUBLISHED IN THE BROOKVILLE DEMOCRAT (3/12/08) AND INDIANA MEDIA GROUP (3/7/08)**

### **Notice of Public Meeting**

#### **INDOT Coordinated Public Transit-Human Services Transportation Plan for Wayne, Union, Fayette, Rush, Franklin Counties**

A local meeting will be held at the English Lutheran Church, 2727 East Main Street, Richmond from 10:00 AM to 12:00 PM, March 13<sup>th</sup> to discuss the development of a Coordinated Public Transit-Human Services Transportation Plan for Wayne, Union, Fayette, Rush and Franklin counties.

Participation from anyone living or traveling in this area is encouraged. Human service, governmental, or nonprofit organizations planning to apply for SAFETEA-LU funding under the FTA 5310, 5316, or 5317 programs must participate in the planning process through either the March 13, 2008 meeting, scheduling a one-on-one interview, or sending comments. If you are unable to attend the meeting but want to participate, please send your input to Emily Demeter at RLS & Associates, Inc. 3131 South Dixie Highway, Suite 545 Dayton, Ohio 45439 or email her at [edemeter@rlsandassoc.com](mailto:edemeter@rlsandassoc.com) no later than March 15.

The meeting location is accessible, including to wheelchair users. Individuals requiring any other special accommodations, including information in alternative formats, should contact Emily no later than March 10.

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## Meeting will focus on public transportation

BY BRIAN ZIMMERMAN  
STAFF WRITER

A public transportation plan for a five-county area around Richmond is the subject of a public meeting on Thursday.

Local and state officials are gathering from 10 a.m. to noon. at the First English Lutheran Church to develop transportation strategies across Wayne, Union, Fayette, Rush and Franklin counties. Anyone relying on public transportation is encouraged to attend.



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The meetings are being organized across Indiana to help non-profits and public transit systems apply for funding through the Federal Highway Administration. The development of a coordinated transportation plan is now required to receive FHA funding.

"They (the FHA) are saying, 'If you want to get money, you have to prove you have come together and came up with ways to be more efficient,'" said Laura Brown of RLS Associates. Her company was hired by the Indiana Department of Transportation to organize the meetings.

Local transit providers have had similar meetings in the past. Beth McCoy, the transit coordinator for Union County Transit, says transportation services are expanding in the area. Providers in Rush, Fayette and Franklin counties now have public service. Union County Transit now also serves rural areas of Wayne County.

"All those systems work really well together and we try to help each other out," McCoy said.

In the future, McCoy hopes the coordinated transportation plan could help transportation providers share resources.

"Eventually the coordinating group could come together to purchase bulk fuel," she said. "We could share insurance and other expenses."

Reporter Brian Zimmerman: (765) 973-4478 or [bxzimmer@pal-item.com](mailto:bxzimmer@pal-item.com)

### IF YOU GO

- A public meeting to discuss a regional public transportation plan takes place from 10 a.m. to 12 p.m. Thursday at the First English Lutheran Church, 2727 E. Main St., Richmond.
- Human service, governmental, or non-profit organizations planning to apply for federal funding programs must attend the meeting, schedule an interview or send comments to RLS & Associates, Inc. Representatives unable to attend can contact Emily Demeter by sending input to: RLS & Associates, Inc., 3131 S. Dixie Highway, Suite 545, Dayton, Ohio or by e-mail at [edemeter@rlsandassoc.com](mailto:edemeter@rlsandassoc.com).
- Correspondences must be received no later than Saturday.

**STORYCHAT**

[Post a Comment](#)

---

This article does not have any comments associated with it

Originally published March 9, 2008

# Appendix A

## Region 4.2



## INDIANA DEPARTMENT OF TRANSPORTATION

*Driving Indiana's Economic Growth*

100 North Senate Avenue  
Room N955  
Indianapolis, Indiana 46204-2216 (317) 232-5292 FAX: (317) 232-1499

**Mitchell E. Daniels, Jr., Governor**  
**Karl B. Browning, Commissioner**

### MEMORANDUM

**TO:** TRANSPORTATION STAKEHOLDERS  
**FROM:** LARRY BUCKEL, MANAGER, OFFICE OF TRANSIT  
**DATE:** MAY 30, 2007  
**SUBJECT:** STAKEHOLDERS MEETINGS

*Larry Buckel*

Dear Friend of Transportation:

In August of 2005, Congress passed the Safe, Accountable, Flexible and Efficient Transportation Equity Act - A Legacy for Users (SAFETEA-LU), reauthorizing the surface transportation act. As part of this reauthorization, grantees under the Elderly and Disabled Transportation Program (5310), Job Access and Reverse Commute (JARC - 5316) and the New Freedom Initiative (NFI - 5317), must meet certain requirements in order to receive funding for fiscal year 2007 (beginning 10/1/06) and beyond.

One of the SAFETEA-LU requirements is that projects from the programs listed above must be part of a "locally developed coordinated public transit-human services transportation plan." This plan is required to be developed through a process that includes input from representatives of public, private, and non-profit transportation services, human services providers, and the general public. As part of this process and to ensure adequate input into the local plans by these different entities, a series of stakeholder meetings will be held across the state.

The Indiana Department of Transportation, Office of Transit is coordinating these meetings, as they are 1) currently responsible for reviewing federal and state program applications; 2) need to be aware and knowledgeable of transit programs and funding streams in each county or region; and 3) are an independent and objective entity. In regions where there are urbanized areas, these areas will be coordinated with, or be part of, the regional plan.

A stakeholders meeting is scheduled in your area. The meeting agenda, time, and location are provided in the enclosed announcement. The meeting will include a discussion of the contents of the locally developed Coordinated Plan, needs assessment, the level of coordination between transportation programs, and developing an action plan for developing strategies and steps for improving coordination efforts.

You have received this meeting invitation because you represent a local/county/state government agency or advocacy group which provides service to, or advocates for, individuals who have public or specialized (elderly, persons with disabilities and/or low income) transportation service needs. Additionally, if you plan to apply for funding under the Section 5310, 5316 or 5317 programs anytime within the next four years, you must participate in the plan development and meetings.

Please forward this letter to other appropriate transportation stakeholders that need to be part of the coordinated public transit-human services transportation plan in your region. A meeting flyer is attached for you to distribute and post, as appropriate, to announce the meeting.

Please RSVP your attendance to this meeting invitation by calling RLS & Associates, at (937) 299-5007 or email [lbrownrls@verizon.net](mailto:lbrownrls@verizon.net). We look forward to seeing you.

Attachments: Meeting flyer for distribution and posting  
Meeting Agenda

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# Appendix A

Region 4.2

## EXHIBIT 5: STAKEHOLDER MEETING/ANNOUNCEMENT

### **INDOT Regional Public Transit- Human Services Coordination Meeting**



### **Please Plan to Attend...**

A regional meeting will be held to start the process of developing a public transit-human services coordinated transportation plan. Everyone interested in coordinating transportation should attend. Everyone planning to apply for grant funding under Section 5310, 5316 and 5317 must attend. The meeting will be facilitated by Laura Brown, RLS & Associates, Inc. and INDOT, Office of Transit.

Prior to the meeting, please complete the INDOT on-line web survey at [http://www.sndayton.com/INDOT\\_coordination\\_survey](http://www.sndayton.com/INDOT_coordination_survey)

**Date: 08/14/07**

**Time: 10:00 AM - Noon**

**Address: 414 Eaton Street Liberty IN 47353**

**First Missionary Baptist Church**

For information about the meeting, please contact Laura Brown at (937) 299-5007 or by e-mail [lbrownrls@verizon.net](mailto:lbrownrls@verizon.net)

# Appendix A

## Region 4.2

### EXHIBIT 6: MEETING AGENDA

#### COORDINATED PUBLIC TRANSIT-HUMAN SERVICE TRANSPORTATION PLAN

#### FOR Fayette, Franklin, Rush, Union and Wayne counties

*August 14, 2007*

*10AM to Noon*

*First Missionary Baptist Church ~ 414 Eaton Street Liberty, IN 47353*

#### Agenda

- Registration
- Introductions and Welcome
- Purpose and Overview
  - United We Ride
  - Framework for Action
  - FTA Coordinated Public Transit-Human Service Plans
- Goals of this Session
  - Identify Existing Need for Transportation
  - Identify Existing Services
  - Identify Service Gaps and/or Duplication of Service
  - Identify Possible Alternatives for Coordination
- Brainstorming
- What is Coordination and its Perceived Benefits?
- What Are the Existing Transportation Needs for:
  - Older Adults
  - Individuals with Disabilities
  - Individuals with Limited Incomes
  - Other
- What Services Are Already Available?
  - Public Transit
  - Private Providers
    - Intercity
    - Taxi
    - Other
  - Human Services Transportation
- For each Type of Service, what are the:
  - Strengths
  - Weaknesses
  - Opportunities for Coordination
  - Obstacles to Coordination
- Coordination Alternatives: Innovative Ideas & Solutions
- Next Steps
- Adjourn

# Appendix A

## Region 4.2

### EXHIBIT 7: MEETING SIGN IN SHEETS

<b>Region 4.2 Liberty, Indiana August 14, 2007</b>			
<b>Attendees</b>			
<b>NAME &amp; AGENCY</b>	<b>AGENCY ADDRESS</b>	<b>TELEPHONE</b>	<b>E-MAIL</b>
<b>Achieva Resources Corp.</b>	P.O. Box 1252 Richmond, IN 47375	765-827-4402	<a href="mailto:jmicksehl@achievaresources.org">jmicksehl@achievaresources.org</a>
<b>Tiffany Shaw Wayne County Vision</b>	P.O. Box 2327 Richmond, IN 47374	765-962-3616	
<b>Scot Quintel United Way</b>	129 S. 9 <sup>th</sup> Richmond, IN 47374	765-962-2700	<a href="mailto:scotquintel@givetheunitedway.com">scotquintel@givetheunitedway.com</a>
<b>Tony Shepherd Area 9 Agency</b>	5205 9 <sup>th</sup> St. Richmond, IN 46374	765-966-1795	<a href="mailto:ashepherd@indiana.edu">ashepherd@indiana.edu</a>
<b>Charolette Hofmann Hand-in-Hand Adult Day Care</b>	2727 East Main Richmond, IN	966-0852	
<b>Tony Oliver Independent Living</b>	Not provided	Not provided	
<b>Marva Evans Fayette County Transit</b>	477 N. Grand Ave. Connersville, IN 47331	765-825-1541	<a href="mailto:Fayetteseniorcenter@comcast.net">Fayetteseniorcenter@comcast.net</a>
<b>Johanna Hensley Hand-in-Hand Adult Day Care of Richmond</b>	2727 E. Main St. Richmond, IN 47331	765-966-0852	<a href="mailto:Johanna@adcofrichmond.com">Johanna@adcofrichmond.com</a>
<b>Gidget Dickenson Union County Transit</b>	P.O. Box 333 Liberty, IN 47353	765-458-7277	<a href="mailto:gidget@uonline.com">gidget@uonline.com</a>
<b>Cathy Pelsor Franklin County Public Transportation</b>	11146 County Park Rd Brookville, IN 47012	765-647-3509	<a href="mailto:fcpt@verizonnet">fcpt@verizonnet</a>
<b>Beth McCoy Union County Transit</b>	615 W. High St. P.O. Box 333 Liberty, IN 47353	765-458-5500	<a href="mailto:owenmcoy@uonline.com">owenmcoy@uonline.com</a>

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## Region 4.2

<b>Peggy Brower Rush County Senior Center</b>	504 W. 3 <sup>rd</sup> St. Rushville, IN 46173	765-932-2935	<a href="mailto:Seniorcenter06@verizon.net">Seniorcenter06@verizon.net</a>
<b>Wanda Henderson Rush County Senior Citizens Services, Inc.</b>	504 W. 3 <sup>rd</sup> St. Rushville, IN 46173	765-932-2935	<a href="mailto:Seniorcenter61@verizon.net">Seniorcenter61@verizon.net</a>
<b>Bonnie Blades Union County Transit</b>	P.O. Box 333 615 W. High St. Liberty, IN 47353	765-458-5500	<a href="mailto:razor@usonline.com">razor@usonline.com</a>

### Region 4.2 Richmond, Indiana March 13, 2008

#### Attendees

NAME & AGENCY	AGENCY ADDRESS	TELEPHONE	E-MAIL
<b>Achieva Resources Corp.</b>	P.O. Box 1252 Richmond, IN 47375	765-827-4402	<a href="mailto:jmicksehl@achievaresources.org">jmicksehl@achievaresources.org</a>
<b>Ashley Saylor Wayne County DCS</b>		765-983-7796	<a href="mailto:Ashley.saylor@dcs.in.gov">Ashley.saylor@dcs.in.gov</a>
<b>Sharon Palmer Richmond City</b>		765-983-7222	<a href="mailto:spalmer@ci.richmond.in.us">spalmer@ci.richmond.in.us</a>
<b>Terri Quinter Rose View Transit</b>		765-983-7227	<a href="mailto:tquinter@ci.richmond.in.us">tquinter@ci.richmond.in.us</a>
<b>Johanna Hensley Hand-in-Hand Adult Day Care</b>	2727 East Main Richmond, IN	966-0852	<a href="mailto:Johanna@adcfrichmand.com">Johanna@adcfrichmand.com</a>
<b>Charlotte Hufmann</b>		765-966-0852	
<b>Marva Evans Fayette County Transit</b>	477 N. Grand Ave. Connersville, IN 47331	765-825-1541	<a href="mailto:Fayetteseniorcenter@comcast.net">Fayetteseniorcenter@comcast.net</a>

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### Region 4.2

<b>Mike Lawson Rose View (A.T.U. Local 1474)</b>		935-1969	<a href="#">Not provided</a>
<b>Gidget Dickenson Union County Transit</b>	P.O. Box 333 Liberty, IN 47353	765-458-7277	<a href="mailto:gidget@uonline.com">gidget@uonline.com</a>
<b>Cathy Pelsor Franklin County Public Transportation</b>	11146 County Park Rd Brookville, IN 47012	765-647-3509	<a href="mailto:fcpt@verizonnet">fcpt@verizonnet</a>
<b>Beth McCoy Union County Transit</b>	615 W. High St. P.O. Box 333 Liberty, IN 47353	765-458-5500	<a href="mailto:owenmcoy@uonline.com">owenmcoy@uonline.com</a>
<b>Peggy Brower Rush County Senior Center/Ride <u>Rush</u></b>	504 W. 3 <sup>rd</sup> St. Rushville, IN 46173	765-932-2935	<a href="mailto:Seniorcenter06@verizon.net">Seniorcenter06@verizon.net</a>
<b>Wanda Henderson Rush County Senior Citizens Services, Inc./ Ride <u>Rush</u></b>	504 W. 3 <sup>rd</sup> St. Rushville, IN 46173	765-932-2935	<a href="mailto:Seniorcenter61@verizon.net">Seniorcenter61@verizon.net</a>
<b>Bonnie Blades Union County Transit</b>	P.O. Box 333 615 W. High St. Liberty, IN 47353	765-458-5500	<a href="mailto:razor@uonline.com">razor@uonline.com</a>

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## Region 4.2

### EXHIBIT 8: 2<sup>ND</sup> PUBLIC/STAKEHOLDER MEETING INVITATION AND DISTRIBUTION LIST

**From:** Lbrownrls@verizon.net

**Subject: Your Are Invited To Attend - Coordinated Transportation Meeting**

**Date:** February 29, 2008 8:38:58 AM EST

**To:** jmickschl@achievaresources.org, scotquintel@givetheunitedway.com, asheper@indiana.edu, fayetteseniorcenter@comcast.net, johanna@adcofrichmond.com, gadget@uconline.com, fcpt@verizon.net, owenmcoy@uconline.com, seniorcenter06@verizon.net, seniorcenter67@verizon.net, razor@uconline.com, spalmer@ci.ci.richmond.in.us, tiffanyashaw@waynecountyvision.com, ekrause@batesville.k12.in.us, transit@ci.richmond.in.us, April.Craig@dcs.IN.gov, rick@dunncenter.org, [swarnell@dsiservices.org](mailto:swarnell@dsiservices.org)

**Cc:** JENGLISH@indot.IN.gov, edemeter@rlsandassoc.com

Hello Transportation Stakeholders,

We have completed the needs assessment portion of your regional transportation plan (posted on-line at: [www.in.gov/indot/7381.htm](http://www.in.gov/indot/7381.htm)). The plan pertains to Wayne, Union, Fayette, Rush and Franklin counties. Thank you for your time and efforts that lead to the accomplishment of phase one of your Local Coordinated Human Service Public Transportation Plan. Now it's time for the next step!

**Please mark you calendar and plan to attend the 2nd Coordinated Human Service - Public Transportation Planning Meeting:**

**Thursday, March 13th, 2008 at  
First English Lutheran Church  
2727 East Main Street  
Richmond, IN 47374  
From 10:00 AM to 12:00 Noon**

The meeting is hosted by Richmond Adult Day Care and will be facilitated by RLS & Associates, Inc. for the Indiana Department of Transportation (INDOT), Public Transit Department. The meeting agenda is attached to this email.

Your participation in the meeting will ensure that the transportation plan:

- (1) accurately reflects and meets the transportation need, goals, priorities and interests of your agency;
- (2) includes local plans to apply for Federal Section 5310 (Elderly and Persons with Disabilities - capital), Section 5316 (Job Access and Reverse Commute), and/or Section 5317 (New Freedom) grants from the Federal Transit Administration; and,
- (3) will be adopted locally for implementation (as required by the Federal Transit Administration).

**Please reply to this email by March. 12th to reserve your seat at the meeting.** If you would like to invite other local transportation stakeholders or anyone from the general public not included on this email, please feel free to forward the message to them.

We understand that you have a busy and demanding schedule and thank you in advance for taking the time to ensure that your local community transportation plan includes strategies that are specific to your needs and goals!

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## Region 4.2

### EXHIBIT 9: MEETING AGENDA – MARCH, 2008

#### INDOT COORDINATED HUMAN SERVICE PUBLIC TRANSIT PLAN

##### STRATEGY DEVELOPMENT MEETING AGENDA

*March 13, 2008*

*First English Lutheran Church*

*2727 East Main Street*

*Richmond, IN 47374*

*From 10:00 AM to 12:00 Noon*

- **Sign-in**
- **Welcome**
- **Review of the Needs Assessment Report submitted to INDOT**  
*Presentation of Regional Coordination Report*                      *RLS & Associates, Inc.*
- **Discussion of 2008-2013 applicants for Section 5310, 5316, and 5317 grants**  
*Discussion of existing plans to apply for Section 5310 (Specialized Vehicles), 5316 (Job Access/Reverse Commute), or 5317 (New Freedom), 2008 through 2013.*
- **Appropriate Coordinated Transportation Strategies/Alternatives:**  
*Create strategies to meet identified goals – strategies must be associated with Federal Section 5310, Section 5316, and/or Section 5317 programs/grants.*
- **Discussion of Lead Organizations for Implementation of Coordination Strategies/Alternatives**  
*Prioritize implementation of strategies/alternatives*  
  
*Create a timeline for implementation of strategies/alternatives*
- **Next Steps**  
*Adoption of the local plan*  
  
*Designate responsible organizations for updating the plan in future years*

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### EXHIBIT 10: STAKEHOLDER SURVEY INSTRUMENT

#### Indiana Department of Transportation Statewide Transportation Coordination Plan

#### Public/Nonprofit Organization Survey

**Instructions to Survey Respondent** – The Safe, Accountable, Flexible, Efficient Transportation Act, a Legacy for Users (SAFETEA-LU) was enacted in August 2005 and provides guaranteed funding for Federal surface transportation programs through FY 2009. SAFETEA-LU requires the establishment of a locally-developed, coordinated public transit – human services transportation plan (HSTP) in order for an applicant to access three specific funding programs; Section 5310 Elderly and Individuals with Disabilities, Section 5316 Job Access Reverse Commute (JARC), and Section 5317 New Freedom. In response to this requirement, the Indiana Department of Transportation (INDOT) is embarking on a thorough planning process to identify strategies that encourage more efficient use of available service providers that bring enhanced mobility to the state’s older adults, persons with disabilities and individuals with lower incomes.

As part of this planning process, INDOT must develop inventories of transportation services available to the elderly, persons with disabilities, and low-income individuals. Please complete the following survey to the best of your ability. If you have any questions regarding this survey, please contact Todd Lenz via email at [tlenz@rlsandassoc.com](mailto:tlenz@rlsandassoc.com), or via telephone at (937) 299-5007.

### ORGANIZATION CHARACTERISTICS AND SERVICES PROVIDED

The first set of questions has to do with the general characteristics of your organization and the general nature of the services provided.

#### 1. Identification of Organization:

a. Respondent’s Name: \_\_\_\_\_

b. Title: \_\_\_\_\_

c. Organization: \_\_\_\_\_

d. Street Address: \_\_\_\_\_

e. City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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f. Work Phone: \_\_\_\_\_ Fax \_\_\_\_\_

g. Respondent's E-mail: \_\_\_\_\_

h. Respondent's Website Address: \_\_\_\_\_

**2. Please check the box that best describes your organization. (Choose only one of the following options)**

- |   |  |
|---|--|
| <input type="checkbox"/> a. Publicly Sponsored Transit Agency | <input type="checkbox"/> l. Private School                         |
| <input type="checkbox"/> b. Social Service Agency – Public    | <input type="checkbox"/> m. Neighborhood Center                    |
| <input type="checkbox"/> c. Social Service Agency – Nonprofit | <input type="checkbox"/> n. Taxi/Wheelchair/Stretcher Service      |
| <input type="checkbox"/> d. Medical Center/Health Clinic      | <input type="checkbox"/> o. Public Housing                         |
| <input type="checkbox"/> e. Nursing Home                      | <input type="checkbox"/> p. Shelter or Transitional Housing Agency |
| <input type="checkbox"/> f. Adult Day Care                    | <input type="checkbox"/> q. Job Developer                          |
| <input type="checkbox"/> g. Municipal Office on Aging         | <input type="checkbox"/> r. One-Stop Agency                        |
| <input type="checkbox"/> h. Nonprofit Senior Center           | <input type="checkbox"/> s. Other _____                            |
| <input type="checkbox"/> i. Faith Based Organization          |  |
| <input type="checkbox"/> j. YMCA/YWCA                         |  |
| <input type="checkbox"/> k. Red Cross                         |  |

**3. What are the major functions/services of your organization? (Select all of the following options that apply)**

- |   |  |
|---|--|
| <input type="checkbox"/> a. Transportation          | <input type="checkbox"/> k. Job Placement          |
| <input type="checkbox"/> b. Health Care             | <input type="checkbox"/> l. Residential Facilities |
| <input type="checkbox"/> c. Social Services         | <input type="checkbox"/> m. Income Assistance      |
| <input type="checkbox"/> d. Nutrition               | <input type="checkbox"/> n. Screening              |
| <input type="checkbox"/> e. Counseling              | <input type="checkbox"/> o. Information/Referral   |
| <input type="checkbox"/> f. Day Treatment           | <input type="checkbox"/> p. Recreation/Social      |
| <input type="checkbox"/> g. Job Training            | <input type="checkbox"/> q. Homemaker/Chore        |
| <input type="checkbox"/> h. Employment              | <input type="checkbox"/> r. Housing                |
| <input type="checkbox"/> i. Rehabilitation Services | <input type="checkbox"/> s. Other _____            |

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j. Diagnosis/Evaluation

**4. Under what legal authority does your organization operate?**

a. Local government department or unit (city or county)

b. Private nonprofit organization

c. Transportation authority

d. Private, for-profit

e. Other (Specify) \_\_\_\_\_

**5. Please list all counties in which you provide services. List all such counties, even if you serve a small portion of the county(ies).**

Counties Served: \_\_\_\_\_

\_\_\_\_\_

**6. Does your organization impose eligibility requirements on those persons who are provided transportation?**

Yes  No

If yes, please define those basic requirements below (*e.g.*, Medicaid only, low-income only, etc).

\_\_\_\_\_

\_\_\_\_\_

**7. Is your organization involved in the direct operation of transit for the general public and/or transportation services for human service agency clients?**

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Yes  No

**8. Does your organization purchase transportation on behalf of clients or the general public from other service providers?**

Yes  No

**If the answer to Question 7 is “No,” and the answer to Question 8 is “Yes,” Skip to Question 27 and continue the survey.**

**If the answer to both questions is “No,” Skip to Section V, Question 29 and continue the survey.**

### TRANSPORTATION SERVICES PROVIDED

**Service Providers Only.** In this section, explain the various methods by which your organization delivers public transit or human service agency transportation. Exclude meal deliveries or other non-passenger transportation services that may be provided.

**9. Which mode of transit service delivery best describes your methods of service delivery? (Select all of the following options that apply))**

- a. Publically-operated fixed route (fixed path, fixed schedule, with designated stops)
- b. Human service agency fixed route (fixed path, fixed schedule, with designated stops)
- c. Demand response (includes casual appointments and regular clients attending daily program activities)
- d. Route deviation
- e. Other (Specify) \_\_\_\_\_

**10. In what manner does your organization directly provide, purchase, operate, or arrange transportation? (Check all that apply.)**

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<b>Mode of Transportation</b>	<b>Services for the General Public</b>	<b>Client Only Services</b>
	<i>(Check All That Apply)</i>	
a) Personal vehicles of agency staff		
b) Agency employees using agency owned fleet vehicles		
c) Pre-purchased tickets, tokens, passes for other modes of paratransit/transit		
d) Reimbursement of mileage or auto expenses paid to employees, clients, families, or friends		
e) Volunteers		
f) Information and referral about other community transportation resources		
g) Organized program with vehicles and staff designated specifically for transportation		
h) Other (Describe in space provided below)		

Please describe any other methods in which your organization delivers transportation services not previously checked in Question 10a through 10h.

---

**11. Please provide the following information regarding the vehicle fleet used in the provision of transportation services provided directly by your agency. The vehicle type(s) used include the following:**

<b>Vehicle Type</b>	<b>Number of Vehicles</b>			
	<b>Total Number</b>	<b>Number Owned or Leased</b>	<b>No. Owned or Leased: Wheelchair Accessible</b>	<b>Volunteer Vehicles</b>
a) Sedans				
b) Station wagons				
c) Minivans				
d) Standard 15-passenger vans				

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e) Converted 15-passenger vans (e.g., raised roof, wheelchair lift)				
f) Light-duty bus (body-on-chassis type construction seating between 16-24 passengers)				
g) Medium duty bus (body-on-chassis type construction seating over 22 passengers with dual rear wheel axle)				
h) School bus (yellow school bus seating between 25 and 60 students)				
i) Medium or heavy duty transit bus				
j) Other (Describe):				

**Note:** "Number Owned" and "Number Leased" should add to equal "Total Number."

**12. Do drivers carry any type of communication device (cell phone, two-way radio, etc.)?**

Yes  No

**If "Yes," what type of communications device/system is used? (Select any of the following options that apply)**

- Cellular phones
- Two-way mobile radios requiring FCC license
- Pagers
- Mobile data terminals
- Other (describe): \_\_\_\_\_

**13. Define the level of passenger assistance provided for users of your transportation service. (Select any of the following options that apply)**

- Curb-to-curb (i.e., drivers will assist passengers in and out of vehicle only).
- Door-to-door (i.e., drivers will assist passengers to the entrance of their origin or destination).
- Drivers are permitted to assist passengers with a limited number of packages.

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- Drivers are permitted to assist passengers with an unlimited number of packages.
- We provide personal care attendants or escorts to those passengers who require such services.
- Passengers are permitted to travel with their own personal care attendants or escorts.

**14. What are the daily hours and days of operation for your transportation services? Check days and list hours of operation in the space provided.**

	Mon	Tues	Wed	Thu	Fri	Sat	Sun
Transportation service begins:							
Transportation service ends:							

**15. How do clients/customers access your transportation services? (Choose one of the following options)**

- There are no advance reservation requirements.
- Clients/customers must make an advance reservation (*e.g.*, by telephone, facsimile internet, arrangement through a third party, etc).

**16. If advance reservations are required, what notice must be provided?**

- Customers/clients can call on the same day as the trip (*e.g.* taxi service)
- Customers/clients must call for a reservation the day before travel.
- Customers/clients must call for a reservation 24 hours before travel.
- Customers/clients must call for a reservation two days before travel.
- Customers/clients must call for a reservation three days before travel.
- Customers/clients must call for a reservation four days before travel.
- Customers/clients must call for a reservation five days before travel.
- Customers/clients must call for a reservation one week before travel.
- Other (Define): \_\_\_\_\_

**17. Will you accommodate late reservations if space is available?**

- Yes  No

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Explain \_\_\_\_\_

Question Number 18 was deleted.

### RIDERSHIP

The following questions have to do with client/patron caseload and/or client ridership.

#### 18. Must individuals be certified or pre-qualified in order to access your transit services?

Yes  No

If yes, what are the eligibility/qualification standards?

\_\_\_\_\_  
\_\_\_\_\_

#### 19. Please provide your organization's annual passenger statistics. If possible, use data for the most recently completed 12-month period for which data is available. Complete questions (a) through (d).

Unduplicated Persons/Passenger Trips	Services for the General Public	Client Only Services	Estimate	Actual
a) Total number of <b>persons</b> <sup>1</sup> provided transportation				
b) Total number of passenger <b>trips</b> <sup>2</sup> (most recent fiscal year)				
c) Estimated number of <b>trips</b> <sup>2</sup> which the riders use a wheelchair				

In the above table, use the following definitions:

<sup>1</sup> A "person" is an unduplicated count of individuals receiving service (a person riding the vehicle 200 trips per year is counted as one person).

<sup>2</sup> A "trip" equals one person getting on a vehicle one time. Most riders make two or more trips a day since they get on once to go somewhere and then get on again to return.

Answer the following questions about figures provided in the table above:

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d) Time period for counts: \_\_\_\_\_

### ANNUAL EXPENDITURES AND REVENUES

The following questions concern your **transportation** funding sources and annual revenues and expenditures.

**20. Does your organization charge a fare or fee for providing transportation services?**

Yes  No

If yes, what is the fare structure? \_\_\_\_\_

\_\_\_\_\_

**21. Does the organization provide any discounts for the elderly or persons with disabilities?**

Yes  No

If yes, what is the discount? \_\_\_\_\_

**22. Does your organization accept any donations from seniors to offset the cost of providing transportation services?**

Yes  No

If yes, what is the suggested donation amount? \_\_\_\_\_

**23. What are the beginning and ending dates of your organization's fiscal year?**

Beginning: \_\_\_\_\_ Ending: \_\_\_\_\_

**24. What are your transportation operating revenues?**

Category	Actual, FY 2006

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<b>Transportation Operating Revenues – List Individually</b>	
a) Fares Collected from Passengers Through Cash, or Tickets/Tokens Purchased by Passengers (Include Client Fees and/or General Public Fares Here)	
b) Revenues Collected From Cash or Ticket/Tokens Purchased by Third Parties on Behalf of Passengers	
c) Reimbursements for Services Obtained from Third Parties ( <i>e.g.</i> , Medicaid Reimbursements)	
d) City Government Appropriations	
e) County Government Appropriations	
f) State Government Appropriation	
g) Grants Directly Received by the Organization	
1) FTA Section 5307	
2) FTA JARC	
3) Title III (Older Americans Act)	
4) Medicaid	
5) Other (List)	
6) Other (List)	
h) United Way:	
i) Passenger Donations	
j) Fundraising	
k) Contributions from Charitable Foundations, etc.	
l) Other, not listed above (Explain)	
<b>Total Transportation Revenues – Total</b>	

Other comments on organization revenues?

---

**25. Did you receive any capital revenues during FY 2006 for transportation (e.g., facilities, vehicles, technology, etc.)?**

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Category	Actual, FY 2006
<b>Transportation Capital Revenues – List Individually</b>	
a) FTA	
1) FTA Section 5307	
2) FTA Section 5309	
3) FTA Section 5310	
4) FTA Section 5311	
b) Governmental Revenues	
c) Passenger Donations	
1) State	
2) County (list county)	
3) City (list city)	
d) Fundraising	
e) Contributions from Charitable Foundations, etc.	
f) Other, not listed above (Explain)	
<b>Total Transportation Capital Revenues – Total</b>	

Other comments on organization capital revenues?

---



---

**26. What are your transportation operating and capital expenses?**

Category	Actual, FY 2006

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<b>Transportation Operating Expenses – List Individually</b>	
a) Transit Operation Expenses	
1) Transportation administration	
2) Transportation operations	
3) Transportation maintenance (facilities and equipment)	
<b>Total Operating Expenses</b>	
b) Transportation Capital Expenses	
<b>Total Transportation Operating and Capital Expenses</b>	

Other comments on organization expenses?

---



---

**27. Does your agency make any payments to third parties to pay for transportation of the general public or for clients of your agency?**

Yes  No

If No, skip to Question 29.

**28. If your agency purchases client transportation services from third parties, please complete the following table. If the third party or parties are private individuals, do not list individual names; sum all such entries in one line labeled as “private individuals.”**

<i>Transportation Payments Made to Third Parties for the Purchase of Transportation Services</i>			
<i>Name of Third Party</i>	Total Number of Trips Purchased	Rate and Basis of Payment (e.g., Per Mile, Per Trip, etc.)	Total Amounts Paid Last Fiscal Year

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Note: If different rates apply to different types of trips (e.g., ambulatory trips vs. non-ambulatory trips), please specify each rate and ridership separately). Also, if rate structure incorporates more than one structure (e.g., a base rate plus a mileage-based rate), please specify accordingly.

### ASSESSMENT OF NEEDS/COORDINATION

Questions 30 and 31 were deleted, and a reworded version of Question 31 appears below as Question 30..

**29. What elements of the existing transportation network provide the most useful personal mobility options in your service area (select one)?**

- Public transit.
- ADA complementary paratransit services.
- Taxis and other private providers.
- Human service transportation programs.
- Families, friends, and neighbors.
- Volunteers.
- Other (Define): \_\_\_\_\_

**30. In your assessment, what enhancements are most needed to improve personal mobility in your service area (select one)?**

- Greater coordination among providers.
- More funding.
- Longer hours and/or more days of service.
- Loosening of eligibility restrictions.

# Appendix A

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- Lower fares on existing services.
- Other (Define): \_\_\_\_\_

**31. In what type of transportation coordination activities do you currently participate?**

- Information and referral.
- Joint procurement.
- Joint training.
- Joint dispatch.
- Shared backup vehicles.
- Shared maintenance.
- Joint use of vehicles.
- Trip sharing.
- Service consolidation.
- Service brokerage.
- Joint grant applications funding.
- Driver sharing.
- Other (Define): \_\_\_\_\_

Please provide additional explanation of your coordination activities indicating the names of the other organizations that participate with you.

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# Appendix A

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Question 34 has been deleted.

**32. What issues, if any, have your coordination efforts encountered (check all that apply)?**

- Statutory barriers to pooling funds
- Restrictions placed on the use of vehicles
- Liability/insurance concerns
- Turf issues among providers
- Billing/accounting issues
- Unique characteristics of client populations
- Other (Define): \_\_\_\_\_

**33. In your opinion, what do you see as the greatest obstacle(s) to coordination and personal mobility in your service area (check only one)?**

- Statutory barriers to pooling funds
- Restrictions placed on the use of vehicles
- Liability/insurance concerns
- Turf issues among providers
- Funding
- Unique client characteristics/inability to mix clients on-board vehicles
- Other (Define): \_\_\_\_\_

**34. In your opinion, what enhancements are most needed to improve the coordination of public transit and human service transportation in your service area?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**35. In your community, has some organization or committee been established that has assigned responsibility to coordinate transportation among transit providers, human service agencies, and**

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consumers?

Yes  No

If yes to Question 35, please indicate below, using a scale of one through five, if your governing board actively participated in the planning, development, and implementation leading up to this arrangement?

Little participation	_____→			Strong participation
1	2	3	4	5

36. On a scale of one to five, with five being the strongest support, is there sustained support for coordinated transportation planning among elected officials, agency administrators, and other community leaders?

Weak support	_____→			Strong support
1	2	3	4	5

37. On a scale of one to five, with five being the strongest perception, do you and members of the governing board perceive there to be real and tangible benefits to be realized if local organizations worked together to better coordinate the delivery of services?

Weak perception	_____→			Strong perception
1	2	3	4	5

If yes, what are the potential benefits in your opinion?

38. If there are any other issues, concerns, or information relevant to this issue, please feel free to address

# Appendix A

## Region 4.2

them in the spaces below.

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**39. If you would like to provide more detailed information and feedback, please leave your name and contact telephone number so that we can schedule an interview.**

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*Thank you for your cooperation!*

**Exhibit 11: Spreadsheet of Participation by County**

County	Organization Invited to Participate	Completed Survey	Attended Stakeholder Meeting	Participated in Telephone Review	Section 5310 Provider in 2006	Section 5310 Application 2007	Section 5311 Providers in 2006	Section 5307 Providers in 2006
Wayne County	Achieva Resources	Yes	Yes		Yes			
	Adult Day Care				Yes			
	Area 9 IN-Home & Community Services Agency	Yes	Yes					
	Cambridge Square Apartments							
	Care-A-Van							
	Centerville-Abington Comm Schs							
	Centerville-Abington Senior Center							
	City of Richmond/Rose View Transit	Yes					Yes	
	Community Action of E. Central							
	Dialysis Center							
	Dunn Mental Health	Yes		Yes	Yes			
	Hand-in-Hand Richmond Adult Day Care	Yes						
	Helping Hands							
	Henderson Apartments							
	ILCEIN							
	Independent Living Center			Yes				
	Independent Living Center			Yes				
	Interfaith Apartments							
	Nettle Creek Senior Center							
	New Creations Chapel							
	Northeastern Neighborhood Meal Site							
	Northeastern Senior Center							
	Northeastern Wayne Schools							
	RAT Express							
	Richmond Senior Community Center							
	Townsend Center							
	United Way of Whitewater Valley			Yes				
	Vocational Rehab							
	Wayne County Vision	Yes	Yes					
	Western Wayne Schools							
	YWCA							
	American Red Cross							
	Aurora							
	Children's Counseling Center							
	Circle You Help Center							
	Community Action of East Central Indiana, Inc.							
	Comprehensive Mental Health Services							
	CMH Care Coordination							
	Covenant Hospice							
	First Steps							
	Fountain City Wesleyan Church Food Bank							
Hope House Addiction Recovery Center								
Hope Ministries Church								
The Independent Living Center of Eastern Indiana								
Lutheran Counseling Center								
Oasis Ministry Center								
Reid Hospital								
Richmond Dream Center								
S.O.S.								
The Salvation Army								
Wayne County Division of Family and Children								
Wayne Township Trustee								
YWCA/Genesis								
Division of Family Resources Liberty								
Division of Family Resources Rushville								
Division of Family Resources Connersville								
Division of Family Resources Brookville								
Western Wayne Senior Center								
Work One		Yes						

**Exhibit 11: Spreadsheet of Participation by County**

County	Organization Invited to Participate	Completed Survey	Attended Stakeholder Meeting	Participated in Telephone Review	Section 5310 Provider in 2006	Section 5310 Application 2007	Section 5311 Providers in 2006	Section 5307 Providers in 2006
Union County	Fifth Freedom							
	Union County Commissioners							
	Union County Council on Aging/Union Co. Transportation	Yes	Yes		Yes			
	Union County Head Start							
	Whitewater Valley Transit Connection						Yes	
Rush County	Rush County Schools							
	Rush County Senior Center							
	Rush County Senior Citizens Services, Inc. (Ride Southeastern WIB)	Yes	Yes					
Fayette County	Achieva Resources	Yes	Yes		Yes			
	Fayette County Council on Aging	Yes	Yes		Yes			
	Fayette County Economic Development							
	Fayette County Grant Writer							
	Fayette County School Corp.							
	Fayette County Senior Center							
	Fayette County Transit	Yes	Yes				Yes	
	Fountain Place Apartments							
	Landmark Services, Inc.							
	United Way of Fayette County, Inc. Veterans Transportation				Yes			
Franklin County	Brookville Court Treasurer							
	Franklin County Board of Commissioners							
	Franklin County Council on Aging							
	Franklin County Public Transportation/Senior Services	Yes	Yes				Yes	