



RESOLUTION 24-11

A RESOLUTION OF THE NORTHWESTERN INDIANA REGIONAL PLANNING COMMISSION
ADOPTING THE NORTHWEST INDIANA NON-PROFIT TRANSPORTATION FEASIBILITY STUDY

September 19, 2024

WHEREAS, the citizens of Northwest Indiana require a safe, efficient and effective regional transportation system that maintains and enhances regional mobility and contributes to improving the quality of life in the region; and

WHEREAS, the Northwestern Indiana Regional Planning Commission, hereafter referred to as "the Commission" is the designated metropolitan planning organization for the Lake, LaPorte, and Porter Counties of Indiana; and

WHEREAS, the Commission views private non-profit transportation providers as an important means of meeting the mobility needs of Northwest Indiana; and

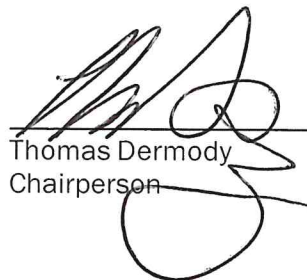
WHEREAS, the Crown Point Community Foundation, the Legacy Foundation, and the Porter County Community Foundation provided local match to NIRPC by way of an agreement; and

WHEREAS, NIRPC contracted with TranSystems in partnership with TransPro Corporation to study what a coordinated Non-Profit Transportation network would entail and design a pilot program; and

WHEREAS, the NIRPC Technical Planning Committee provides the Commission with advice and recommendations about transportation, and concurs with this resolution; and

NOW THEREFORE, BE IT RESOLVED by the Northwestern Indiana Regional Planning Commission hereby adopts the Northwest Indiana Non-Profit Transportation Feasibility Study.

Duly adopted by the Northwestern Indiana Regional Planning Commission this 19th day of September 2024.



Thomas Dermody
Chairperson

ATTEST:



Wendy Mis
Vice Chairperson



NORTHWEST INDIANA NON-PROFIT TRANSPORTATION FEASIBILITY STUDY

Final Report

June 2024

NORTHWEST INDIANA NON-PROFIT TRANSPORTATION FEASIBILITY STUDY - INITIAL REPORT

Introduction

The Northwest Indiana Regional Planning Commission (NIRPC) has initiated a study to examine the feasibility of coordinating the transportation services of nonprofit agencies in Lake and Porter Counties, potentially under a new transportation organization. Agencies have a range of missions, from senior services, health care facilities, and after school programs. Some of these agencies own their own vehicles and provide transportation to their clients; others provide vouchers or contract out transportation services while other agencies do not provide any transportation. For those agencies that do own their own vehicles, they often use their vans or buses only at certain times of the day, leaving some excess time capacity. In other cases, the trips they do operate do not always have full vehicles (i.e. excess space capacity). In addition, it is often difficult for these agencies to have consistent staff to operate the vehicles. For those agencies that do not directly provide transportation, there are many barriers they face including finding transportation providers that have the availability to meet the needs of their clients, funding obstacles, and other barriers expressed in interviews with each of the study participants.

The purpose of the study is to create recommendations for a demonstration program as a next step in solving the transportation problems among nonprofit agencies. Agencies that currently provide transportation and have some capacity in their fleets were involved in a workshop to define the successful outcomes for a transportation program. The program could include, for instance, a mobility manager, a consolidated call center, and/or shared vehicles. The final recommendations will include an implementation plan that includes a matrix that identifies the timeline, those involved, the steps involved, the estimated cost, performance measures, and other factors.

Background

Coordinated transportation entities operate across the country but vary greatly by state. According to the FTA, coordinated transportation involve multiple entities working together to increase their capacity to provide trips. Where transportation options are limited, coordinated transportation agencies often step in to provide essential transportation services to a designated service area. With one organization focused on providing transportation services throughout a region, the agencies using the transportation services can then just focus in on providing their main mission of services to their clients.

Examples of Coordinated Transportation

In the Chicago metropolitan area, both McHenry County and Lake County, IL merged what was a patchwork of different paratransit services operated by different towns and regions into a joint service that provides rides everywhere in the respective county. In 2006, Lake County paratransit service was provided by a mix of townships or municipalities while certain communities did not provide this type of transit service at all. Respondents at the time noted that they did not have access to many of their needed destinations as paratransit services were only provided within a small service area. Services were operated by different entities with a varying rate of fares, scheduling rules, hours of operation, and eligibility requirements. Today, daily paratransit service is operated in every community in the county. Service is operated under a contract held by Pace and financially sponsored by the county and grants provided by the Regional Transportation Authority (RTA). McHenry County has a similar operating system and is also open to the general public.

In La Porte County Indiana, paratransit services are operated by Paladin, a nonprofit organization who provides a variety of services to people with disabilities. Their paratransit services are funded by other charities and through Medicare. While the service is operated by one organization, it is funded and supported by many others throughout the county. Rather than having a patchwork of services provided by different providers, a local organization decided to pool their resources into one that is now operated by Paladin. Paladin was interviewed as part of this study.

Lake County Community Services (LCCS), also operating in Northwest Indiana, follows a model of consolidated transit service. It provides transportation services to residents of Lake County outside of Hammond, Whiting, Gary, Munster, and East Chicago. LCCS is financially supported by the cities, townships, and the county rather than those entities operating their own services with differing level of quality. This allows communities across the region to pool their resources together.

Community Transportation Network in Fort Wayne, IN

Community Transportation Network (CTN) was founded in 2000 as a 501c3 organization to provide coordinated transportation services to a variety of agencies within Allen County. Originally acting as a broker for various agencies who needed assistance with transportation for their clients, this organization has since morphed into a transportation provider, owning 43 vehicles (including 7 school buses) in order to provide transportation to their 85 partners. CTN offers medical, non-medical, and grocery run trips. Riders need to qualify to ride CTN and trips are prearranged at least a week in advance.

Similar to the objectives of this study, CTN was initiated by a group of agencies interested in coordinating transportation services. Funding sources include partner contributions per ride, Federal Transit Administration (FTA) Section 5310 funding, and fundraising. Limitations in providing more service include funding, the ability

to travel outside Allen County, hiring of qualified drivers, and availability of vehicles.

Transportation Management Associations

Transportation Management Associations (TMA) are a partnership where companies, often in collaboration with the local transit agency, promote and provide transit options for last mile trips. They seek to promote public transportation use and are the most common in the Northeastern United States. Rather than several companies offering their own separate shuttle services, TMAs allow employers to pool their resources into shared services; many of these groups fund or operate their own shuttles to cover first and last mile transportation from the transit service to the job location, making public transportation a feasible option for commuters. TMAs are common in suburban job centers where many may choose to reverse commute from the larger city.

In the Chicago area, the Lake Cook Road Transportation Management Association (TMA) is a partnership between different companies along Lake Cook Road in Deerfield and Northbrook where there are many suburban office parks home to large corporations. Prior to the COVID-19 pandemic in 2020, the Lake Cook TMA covered 50% of the cost to fund “Shuttle Bug” routes which fed riders into surrounding Metra commuter rail lines. Service was operated by Pace Suburban Bus through a cost sharing agreement. Companies in the area would pay the TMA for this transportation. After the pandemic, none of these routes operate and have been replaced by “VanGo” service from the Lake Cook Road Metra station. VanGo is a carpool service where Pace provides minivans which can be taken within the service area centered on the Lake Cook Metra Station. It is unclear whether the TMA is supporting the VanGo service. As of Spring 2023, the TMA says on their website that they’re working on a commuting study to understand how commuting needs have changed post-pandemic.

Mobility Management Networks

Mobility Management Networks are designed to improve overall mobility for any given trip, regardless of rider characteristics, mode, or geography. It thrives when there is a coordinated effort and combining of assets amongst private organizations and public agencies. The networks focus on improving partnerships among service providers. These networks are created by state legislatures and led by the individual state Department of Transportations (DOT). These networks are eligible to secure funding to operate “transportation brokerages” to coordinate service providers, funding, and customer needs.

For example, Iowa has a statewide Mobility Management System covering every part of the state supported by a Mobility Manager. Mobility Managers serve as a liaison to help passengers understand and move through their transit options. The transit agencies providing the service still operate independently making their own decisions on hours of operations, fares, and vehicles. However, the Mobility Manager can assist with staffing, provide travel training, operate call centers, and help plan and implement transportation technologies to provide a coordinated system. They exist to make public transit easier to use for its riders and for agencies to better understand people’s transportation needs.

Study Initiation and Survey

At the initiation of this study, a Steering Committee was established to oversee this study and provide input. The Steering Committee assisted by identifying non-profit agencies in Lake and Porter Counties who might be interested in participating in the study. The result of this outreach was a list of 22 interested nonprofit organizations.

A survey was sent out to those nonprofits to gain information about their services and their need for transportation. The survey is included in Appendix A. A list of all organizations that responded to the survey identifying whether or not they provide transportation is shown in **Table 1**. Ten identified themselves as providing transportation in Porter and Lake Counties. An additional five respondents either contract out their transportation services to another organization or issue vouchers to their clients for shared ride services (i.e., Uber/Lyft) or public transportation. The remaining seven do not provide any transportation. **Table 2** provides the funding/budget information for those agencies that directly provide transportation.

Table 1: Summary of Survey Respondents

NAME OF ORGANIZATION	ORGANIZATION TYPE	PROVIDE TRANSPORTATION?	FLEET TYPE/SIZE (IF APPLICABLE)	BASE OF OPERATIONS	TRANSPORTATION NEEDED FROM	SERVICE HOURS	CLIENTS WITH MOBILITY CHALLENGES
AHEPA 78 III & IV	Retirement Community	Contract	-	Merrillville	Gary, Merrillville, Crown Point	N/A	25 to 50%
Art Barn School of Art	Art Classes	No	-	Valparaiso	Porter County	N/A	Under 25%
Boys and Girls Clubs of Greater Northwest Indiana	After School Program	Yes	Cutaways and school bus	Entire Region	Porter and Lake County	After School, Summers, Mon-Fri: 2:30p-5p	Under 25%
Call A Ride (Dorothy Michalak)	Senior Transportation Services	Yes	Vans	Hebron	Boone Township	Mon-Fri: 8a-5p	Under 25%
Drive Clean Indiana	Environmental Concerns	No	-	St John	Lake and Porter County	N/A	50 to 75%
Gabriel's Horn Homeless Shelter	Homeless Shelter open to Women and Children	Yes	SUV/Sedans	Valparaiso	Valparaiso and Portage	By Appointment if staff is available	Over 75%
Goodwill Industries Of Michiana	Community Services Agency	Voucher	-	Entire Region	Gary, Hammond, Merrillville	N/A	50 to 75%
Health Visions Midwest, Inc. of Hammond	Community Services Agency	Yes	Vans	Hammond	Gary, Hammond, Merrillville, East Chicago	Mon-Fri: 8a-5p	Over 75%
Maria Reiner Center	Senior Center	Yes	Vans	Hobart	Hobart	Tuesday and Thursday from 8-3	Under 25%
Methodist Hospitals	Hospital System	Contract	-	Gary, Merrillville	Lake County	N/A	25 to 50%
Opportunity Enterprises	Community Services Agency	Yes	Cutaways	Valparaiso	Porter County	Mon-Fri: 6:30a-5:30a	Over 75%
Paladin	Community Services Agency	Yes	Mix of vehicle types; 11-25 vehicles	Michigan City	La Porte County	Mon - Fri: 6a-6p Sat: 8a-4p	25 to 50%
Pines Village Retirement Communities, Inc.	Retirement Community	Yes	Mix of vehicle types; 12 cutaways, 1 passenger van	Valparaiso	Valparaiso	Mon, Tue, Thu, & Fri: 9a-4p	Over 75%

NAME OF ORGANIZATION	ORGANIZATION TYPE	PROVIDE TRANSPORTATION?	FLEET TYPE/SIZE (IF APPLICABLE)	BASE OF OPERATIONS	TRANSPORTATION NEEDED FROM	SERVICE HOURS	CLIENTS WITH MOBILITY CHALLENGES
Planting Possibilities (Legacy Foundation)	Helps those with disabilities work.	No	-	Munster	Lake County	N/A	Under 25%
Portage Township YMCA	Community Center	No	-	Portage	Gary, Valparaiso, Portage, Merrillville	N/A	Under 25%
Porter County Aging & Community Services (PCACS)	Senior Services Agency	Yes	Cutaways	Valparaiso	Porter County	Mon-Fri: 8a-4p	50 to 75%
Porter Starke Services	Behavioral Health Service Provider	Contract/Voucher	-	Valparaiso	Valparaiso, Portage, Knox	N/A	50 to 75%
Regional Health Systems	Healthcare Provider	Yes	Vans	Merrillville, Hammond, Hobart, Highland	Lake County, East Chicago, Hammond	Mon-Fri: 7a-9p	Under 25%
St Michael Parish. Schererville	Catholic Church and School	No	-	Schererville, Merrillville, Cedar Lake	Lake County, Gary, Hammond, Crown Point, East Chicago	N/A	Under 25%
TradeWinds Services	Disability Services Agency	No	-	Merrillville	Gary, Merrillville, Crown Point	N/A	Under 25%
Three20 Recovery Center	Substance and Mental Health Recovery Center	Voucher	-	Chesterton	Porter County, Valparaiso	N/A	Over 75%
Valparaiso Family YMCA	Community Center	No	1 van; 1 minibus	Valparaiso	Valparaiso	Before and After School Childcare	Under 25%

Table 2: Budget Information for Agencies that Directly Provide Transportation

NAME OF ORGANIZATION	BUDGET	FUNDING PARTNERS	OPERATOR
Boys and Girls Clubs of Greater Northwest Indiana	\$385,000.00	N/A	Paid employee
Call A Ride (Dorothy Michalak)	\$20,000	Individual Donations, Porter Co. Community Foundation, REMC, Anderson Foundation, and Local Businesses,	Volunteer
Gabriel's Horn Homeless Shelter	\$5,000	N/A	Volunteer
HealthVisions Midwest, Inc. of Hammond	\$105,000	The Poor Handmaids of Jesus Christ currently funds the transportation program. No other funding partners.	Paid employee but has other roles there
Maria Reiner Center	Unspecified	N/A	Paid employee
Opportunity Enterprises	Unspecified	Grants=36%, Medicaid/Waiver=63%, Private Pay =1%	Paid employee
Paladin	\$624,513	Health Foundation of La Porte, Franciscan Hospital, Michigan City Community Enrichment Core, Unity Foundation, and Real Services.	Paid employee
Pines Village Retirement Communities, Inc.	\$65,000	Expenses are paid from the residents monthly rental fees.	Paid employee but has other roles there
Porter County Aging & Community Services (PCACS)	\$800,000	<ul style="list-style-type: none"> • Federal Government - 36%, \$250,000.00 (roughly) • State Government - 11 %, \$90,000.00 (roughly) • Local Government - 56%, \$450,000.00 (exact) • Other - 10%, \$10,000.000 (roughly) = Total: \$800,000.00	Paid employee
Regional Health Systems	\$643,000.00	Insurance (Medicaid)	Paid employee

Challenges/Barriers to Providing Transportation

The respondents who do not directly provide transportation noted that transportation is always a significant concern for them/their clients. They identified several barriers to providing transportation including transportation costs, not enough staff to

provide transportation, logistical and regulatory challenges, and inconsistencies when clients need transportation. Finding drivers is also an issue nationwide, particularly if they require a commercial driver’s license (CDL).

Table 3 provides a summary of why the agency stated they do not maintain a fleet of vehicles to provide transportation.

Table 3: Reasons Why Agencies Do Not Provide Transportation

NAME OF ORGANIZATION	REASONS FOR NOT PROVIDING TRANSPORTATION	HOW THEY MEET TRANSPORTATION NEEDS OF CLIENTS
AHEPA 78 III & IV	Do not have the funding to provide transportation.	Directly contract with a private prover.
Art Barn School of Art	Too costly, not enough staff. Would only need transportation for specific programs.	Clients make their own arrangements.
Drive Clean Indiana	Out of main scope.	Directly contract with a private provider. Clients make their own arrangements.
Goodwill Industries of Michiana	Too costly, not enough staff, there would be too much idle time if operated as an ‘on-call’ service.	Provide bus passes or vouchers for clients to use on private transportation.
Methodist Hospitals	Too costly, not enough staff, and regulatory challenges.	Directly contract with a private provider to meet their needs.
Planting Possibilities	Clients are spread out. It would be helpful, but it is too costly.	Clients make their own arrangements
Portage Township YMCA	Insurance would not cover it.	Clients make their own arrangements.
Porter-Starke Services	Do not have enough staff to manage a system. Will provide transportation in an emergency but the need is inconsistent.	Directly contract with a private provider to provide transportation. Provide vouchers for clients to use on private transportation.
St Michaels Parish, Schererville	Too costly.	Clients make their own arrangements.
Tradewinds Services	Not enough staff to manage or operate transportation.	Directly contract with a private provider to provide transit.
Three20 Recovery Center	Too costly.	Provide vouchers that clients can use on private transit providers.
Valparaiso Family YMCA	Too costly, not a large enough client base with those clients coming and going at inconsistent times.	Clients make their own arrangements.

Interviews

Interviews were held with agencies that currently provide transportation, contract out transportation, or provide vouchers for transportation to their clients. Interview questions are presented in **Appendix B**.

The result of the interviews provided an understanding as to who their organization serves, when transportation is needed, their clients' transportation origins and destinations, fleet information, funding/funding restrictions, operating hours and dispatching software. In addition, each agency that provided transportation was asked if it would be interested in taking part in the next step of the study; i.e. a demonstration program workshop. **Appendix C** provides meeting minutes for each of the interviews held.

Workshop

Once all interviews were held, an analysis was conducted to determine which agencies should be invited to a demonstration program workshop. The following agencies were selected and the reasons for their selection are also noted.

- **Pines Village Retirement Communities:** Pines Village has one extra van that often remains idle.
- **Maria Reiner Center:** Maria Reiner Center has vehicles that are idle three days a week
- **Opportunity Enterprises:** Opportunity Enterprises has extra vehicles that are not in use. They are also looking to provide transportation for other organizations if it makes sense for their organization.
- **HealthVisions Midwest:** HealthVisions Midwest already provides contract services and coordinates transportation for other agencies.



- **Porter County Aging & Community Services (PCACS):** PCACS is willing to discuss expansion and provide transportation for other organizations.
- **Goodwill Industries:** Goodwill is currently providing transportation for “goods movement” and is willing to expand to transport clients. They also have a driver training program for their clients that could potentially be used for this demonstration program.

The two-hour demonstration program workshop was held on Monday, May 20, 2024, in NIRPC offices to discuss a coordinated transportation service. Representatives from each of these nonprofit agencies were present. The consultant team provided a power point presentation (see **Appendix D**) and held discussions with the participants. See **Appendix E** for a list of the attendees.

Success Definition

The first part of the agenda focused on defining success for a proposed demonstration program for a coordinated transportation system. Each workshop participant (i.e., the “*Coordinated Transportation Committee*”) was asked to participate in a headline exercise with the following subject line:

In 2025, what will the Times of Northwest Indiana write about nonprofit transportation?

The individual participants’ headlines were read. The examples below indicate there was already a shared definition of success, which would lead to a positive conclusion at the end of the session:

- Local nonprofit agencies collaborate to solve senior transportation issues.
- Nonprofit transportation successfully finds collaboration with other nonprofits to meet the needs of their clients.
- 100% of nonprofit clients have a reliable means of transportation.
- Northwest Indiana nonprofits collaborate to meet transportation needs.
- Northwest Indiana transportation remodeled and reimagined through community collaboration.
- Community nonprofits collaborate to address transportation obstacles facing our community.
- New nonprofit transportation provides affordable to all residents in Northwest Indiana.

The group discussed changes to the proposed draft success definition and suggested that there be more direct language, such as “solve the mobility challenges of nonprofit clients” as well as broadening the scope beyond serving existing clients. The group

also shared details about which communities they serve, their operating models, and existing fleets. Concerns were raised about funding, customer fares, overlap with existing transit services in Gary, and prioritizing clients who are most in need. One participant indicated that the region’s foundations could play a role in filling funding gaps, and several of those foundations provided funding for this study.

After discussion, a final headline to “*Improve the mobility of nonprofit clients in a cost-effective way by leveraging excess capacity across multiple providers*” was established.

Proposed Nonprofit Coordinated Transportation Models

The next part of the presentation presented two coordinated transportation models for consideration – **broker** and **centralized** – each with case studies showing how the models have been implemented to solve similar transportation issues. They are explained in more detail below.

Broker Model

A broker or Mobility Manager coordinates transportation between requesting organizations/clients. Multiple providers with their own fleet, software and staff participate.

Case Study: Ride Alliance | Denver, CO

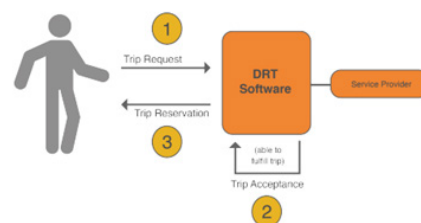
In 2015, the Denver Regional Council of Governments/Denver Area Agency on Aging and Via Mobility Services partnered to create the Denver Metro Area project known as Ride Alliance. This project, designed for older adults, veterans, and people with physical or mental health challenges, strives to better coordinate demand-response transportation (DRT) trips across multiple service providers and scheduling software platforms through a newly generated software called the Trip Exchange. The software functions as a

central hub for service providers such as Mobility DR for some Regional Transportation District (RTD) services, Routematch for RTD’s Access-a-Ride, City and County of Broomfield, Seniors’ Resource Center, and Via that use different dispatching software and platforms for DRT trips. Users register an account with Ride Alliance either online or over the phone, provide consent to share their information with the Ride Alliance partners, and can then proceed to request a ride. When a trip is requested, the initial provider has the ability to accept or reject the trip based on variables such as their availability or service hours. If the trip is rejected, the trip will post to the Trip Exchange, allowing another provider to pick up the rejected trip enabling a better user experience for the rider and greater trip efficiency as the provider is able to fill empty seats. This coordination works through application programming interfaces (API) that connect the “endpoint” systems to the central hub. The main sources of funding came from a Mobility Services for All Americans grant (MSAA) grant in 2015 to automate the process and two Veterans Transportation and Community Living Initiative grants.¹

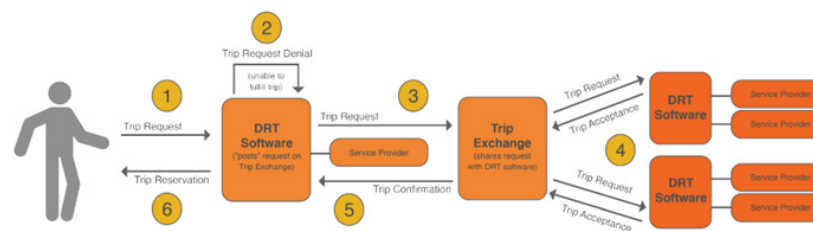
The below diagram shows the process Ride Alliance goes through to automatically coordinate between different dispatching and scheduling software. This represents a significant technological investment made by Ride Alliance.

Centralized Model

The centralized transportation model represents a single transportation provider, including a fleet, dispatching/scheduling software, and supporting staff. Organizations make trip requests on behalf of their clients or customers book trips directly, similar to a demand response public transit service.



Scenario 1: Trip request received by DRT software/service provider and accepted



Scenario 2: Trip request received by DRT software/service provider and “posted” on Trip Exchange

Case Study: Community Transportation Network (CTN) | Allen County, IN

The Community Transportation Network (CTN) is a centralized, nonprofit transportation provider in Allen County, IN. CTN began in 1999 with Turnstone, a nonprofit for people with disabilities, acting as a broker between other nonprofit providers. In 2000, the participating organizations decided to create a single transportation agency. They primarily provide trips for people with disabilities and seniors for medical, grocery, banking, and work programs in Allen County. CTN also provides transportation for Head Start field trips and to libraries.

¹ SUMC MLC: Mobility Learning Center: Ride Alliance Metro Area Project, Denver, CO, 2020 (sharedusemobilitycenter.org)

CTN’s fleet began with vans donated by Aging and In-Home Services. In CTN’s first year, they provided 1,000 trips; in 2019, they provided 100,000 trips for over 85 partner nonprofit agencies. They currently have a fleet of 43 total vehicles, including accessible vans and 7 school buses. Some of the partner agencies also provide their own transportation to their clients.

In order to ride CTN you must identify as a person with a disability or a senior over 55 and not be able to ride Citilink, the Fort Wayne, IN demand response public transportation system.

Demonstration Program Recommendation: Broker Model

It is recommended that the demonstration program be structured as a broker model. This recommendation was discussed at the workshop and received concurrence. A broker model is easier to initiate, uses existing fleet vehicles and can be spearheaded by one of the representative agencies as the “broker”.

Using the broker model for the demonstration program, transportation between the participating organizations will be shared and coordinated through a “Mobility Manager” and a shared Trip Exchange. The organization who agrees to be the broker will either hire or appoint an existing staff person to act as the Mobility Manager. The Mobility Manager will be responsible for accepting and assigning the trip requests as part of the shared Trip Exchange. The following sections outline the broker model process, as well as policy and process decisions that should be made by the Coordinated Transportation Committee before the pilot begins. A list of performance measures and an Implementation Plan have been developed and follow this section.

Pilot Concept

A shared transportation pilot project with a **broker** or mobility manager and a **trip exchange**.

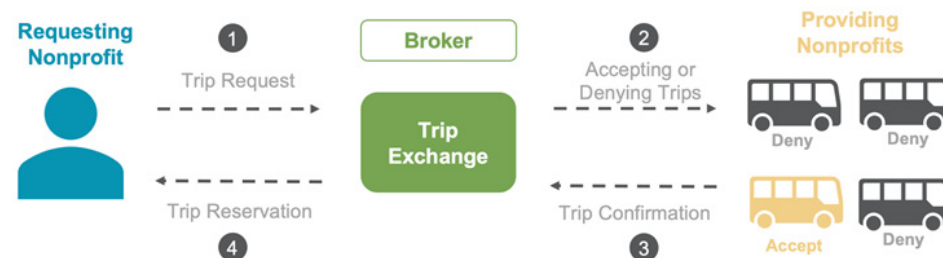


Figure 1: Pilot Process

Process

Step 1: Creating and Assigning Trip Requests

A client of a participating nonprofit has a transportation need. If the nonprofit organization cannot provide that trip directly, they input the trip details into the Trip Exchange including:

- Origin/destination
- Date and time (pick-up or arrive-by time)
- Time/date flexibility (if applicable)
- Number of clients
- Client mobility needs
- Round trip or one-way
- Recurring or one-time
- Door-to-door vs. curb-to-curb service
- Wheelchair lift or ramp

Step 2: Accepting or Denying Trip Requests

Other nonprofits are alerted to new trip requests in the Trip Exchange. They can review the trip details, and accept or deny the trip, depending on their availability.

Step 3: Sending Trip Notifications

If a provider accepts the trip, the requesting nonprofit is notified. Automatic alerts could be established to ensure all parties are aware of the trip.

Step 4: Reporting Trips

Once a trip is completed, the trip information could be recorded for data reporting and payment purposes.

Policy and Process Decisions

Policy

Agreement/Contract Between Nonprofits and Broker

Develop a Memorandum of Understanding (MOU) between each nonprofit and the broker with the details of the pilot project, including the process and the agreed payment. Incorporate recurring trips into the MOU as needed. Ensure there is buy-in or approval from each organization's governing body.

Payment

Participating providers should establish a payment policy. Requesting nonprofits would pay providing nonprofits based on a payment structure:

- Per trip rate
- Base rate + mileage

Cancellations

Determine a shared cancellation policy. For example, trips must be canceled more than 24 hours before the trip time or the requesting nonprofit will be charged for the planned trip.

Group Trips

Determine a shared trip policy, including how payment will be handled for group trips with different nonprofit clients.

Dispatch Technology

Technology solutions for the Trip Exchange vary, and the team recommended using simple online forms for the demonstration program before investing in specialized demand response software.

The Trip Exchange concept can include full integration between dispatching and scheduling platforms across different transportation providers, automating the trip acceptance process. Because many of the nonprofit organizations do not have dispatching and scheduling systems, and those that do have different platforms, the Trip Exchange could leverage low-cost or free options. For example, nonprofits requesting a trip could fill out a Google Form with trip details, which could populate a shared Google Sheet that all nonprofits can access. Providers could be able to accept the trip on the Google Sheet, which could automatically notify the requesting nonprofit and initiate communication between the organizations. The providers could also provide information about the trip, such as the driver's name, phone number and vehicle type.

While this low/no-cost option could be implemented easily and could require minimal training of nonprofit organizations, it does require nonprofits accepting trips to manually input those trip details into their own scheduling/dispatching software (if they have a platform) to decide if they can accept the trip.

Client Fare and Payment

A process for collecting client fare, if applicable, needs to be established. In addition, a trip payment process in alignment with the payment policy needs to be established and consider frequency and reporting.

Cancelled

A process for communicating trip cancellations in alignment with the cancellation policy needs to be developed. The Mobility Manager could help facilitate this process.

Communication and Monitoring

The Mobility Manager could monitor the Trip Exchange, follow-up with the requesting and providing organizations and ensure both parties are aligned on the trip details. The Mobility Manager could also provide communication support on the day of the trip in case adjustments need to be made. They could track trip data, including preparing invoices for requesting nonprofits. They would also track cancellations. The Mobility Manager could help establish recurring trips between requesting nonprofits and providers.

Sources

The following are references for a coordinated transportation service:

- [Mobility Services for All Americans \(MSAA\)](#)
- [National Center for Mobility Management](#)

Key Performance Indicators

Table 4 shows potential Key Performance Indicators (KPIs) for the demonstration program and beyond, including definitions, performance goals, information systems and the reporting cadence.

Performance Goals

The demonstration program will be an opportunity to establish baselines for each KPI. While performance goals for missed trips, no shows, late cancellations, and denials is ideally none, the participating agencies should establish attainable goals. Participating agencies should also consider the balance between different metrics. For example, more pooled trips can improve the efficiency of the service and lower costs, but more pooled trips

could also lead to longer trips for some customers, impacting overall customer satisfaction. While nonprofits want to minimize denials as much as possible, accepting all trips without appropriate capacity could negatively impact on-time performance or lead to more missed trips.

Information Systems

Ridership, pooled trips, late cancellations, missed trips, no shows and denials can be tracked using the Trip Exchange, while customer satisfaction requires a client survey. Nonprofits should balance the difficulty and administrative effort of measuring KPIs with the benefit they will provide. For instance, ridership is the simplest KPIs to track and will provide important information on the change in trips provided. Without scheduling/dispatching software, average travel time is difficult to measure, but could be incorporated into later phases of the project or gauged through client perception.

Reporting Cadence

The reporting cadence balances effort and resources required to gather and share data with the ability to react to service issues more quickly. Most KPIs could be reported to participating agencies on a monthly or quarterly basis. Monthly reporting will require more effort by the mobility manager but will allow nonprofits to make service adjustments more quickly. Quarterly reporting requires less effort, but participating nonprofits will have less visibility on performance throughout the year. The client survey will take more effort to administer and analyze, so an annual or biannual cadence is appropriate. For the pilot, nonprofits could also have informal conversations with their clients to gauge satisfaction.

Table 4: Key Performance Indicators and Definitions

KEY PERFORMANCE INDICATORS (KPI)	DEFINITION	KPI GOAL	INFORMATION SYSTEM	REPORTING CADENCE	NOTES
Trips Completed	Total unlinked passenger trips	Increase	Trip Exchange	Monthly or quarterly	Total ridership is the sum of completed trips.
Pooled Trips	Number of trips with multiple passengers	Increase	Trip Exchange	Monthly or quarterly	Providers could indicate on the Trip Exchange if a trip was pooled.
Late Cancellations	Number of cancellations (exact definition will depend on late cancellation policy - e.g., any cancellation with less than 24 hours' notice)	Decrease	Trip Exchange	Monthly or quarterly	Providers could indicate on the Trip Exchange if a late cancellation occurred.
No Shows	Number of trips where the client is not ready or available when the driver arrives	Decrease	Trip Exchange	Monthly or quarterly	Providers could indicate on the Trip Exchange if no show or a passenger who was not ready occurred.
Missed Trips	Number of scheduled and confirmed trips that are not provided	Decrease	Trip Exchange	Monthly or quarterly	Providers or requesting nonprofits could indicate on the Trip Exchange if a trip was missed by the providing agency.
Denials	Number of client trip requests that cannot be provided	Decrease	Trip Exchange	Monthly or quarterly	Denials can be tracked through unfulfilled trips on the Trip Exchange. This requires nonprofits to input all trips into the trip exchange to accurately measure which trips cannot be provided.
On-Time Performance*	Percent of trips in which the driver arrives in the scheduled pickup window.	Increase	Scheduling/ dispatching software	Monthly or quarterly	The standard pickup window for paratransit services is 30 minutes after the schedule arrival time. On-time performance will be easier to measure with scheduling/ dispatching software, which might not be available during the demonstration program. On-time performance could also be gauged through client perception.

*Requires additional software beyond the scope of the pilot project

KEY PERFORMANCE INDICATORS (KPI)	DEFINITION	KPI GOAL	INFORMATION SYSTEM	REPORTING CADENCE	NOTES
Customer Satisfaction	Percent of customers who are satisfied with the transportation service	Increase	Client survey	Biannually or annually	A client survey can gauge overall satisfaction with the demonstration program and their satisfaction with specific areas, such as on-time performance, travel time, driver courtesy, safety, cleanliness, comfort, etc. Areas with low satisfaction and high importance to clients should be closely tracked to improve overall satisfaction.
Average Travel Time*	Average trip travel time in minutes	Maintain/Decrease	Scheduling/dispatching software	Monthly or quarterly	Average travel time will be easier to measure with scheduling/dispatching software, which might not be available during the demonstration program. Travel time could also be gauged through client perception.
Cost Per Trip	Total operating costs by provider per trip provided	Decrease	Provider cost information and Trip Exchange	Monthly or quarterly	Each provider would calculate the total operating expenses for their transportation services divided by the total number of trips provided.

*Requires additional software beyond the scope of the pilot project

Costs

It is hard to quantify costs that each participating agency will incur as part of the Trip Exchange. If the Broker needs to hire a Mobility Manager, there will be staffing costs incurred. Each agency will incur training expenses to train their current dispatch staff in the Trip Exchange process. Depending on what the Coordinated Transportation Committee decides on fares, each agency could experience additional fare revenue or less fare revenue. Until the Coordinated Transportation Committee meets to discuss the policies and finalize the process, costs cannot be identified.

Implementation Plan

The following is an Implementation Plan that serves as a guide to plan and implement a coordinated transportation system. The tasks below best reflect a guide to implementation but may not include every step necessary to fulfill the agencies' local, regional, or federal obligations

Implementation Matrix

Task 1: Investigation

TASK 1.1:	ORGANIZE MEETINGS
Responsible Party:	NIRPC
Parties Involved:	Coordinated Transportation Committee
Description:	Meet on a regular basis to determine goals, assign tasks. Initially decide on policies and process of the demonstration program. Ongoing tasks involve overseeing the demonstration program, solve any issues that arise, and review successes and failures of the program
Estimated Duration:	Monthly for up to 24 months
TASK 1.2:	ESTABLISH DEMONSTRATION PROGRAM, DETERMINE PARTICIPANTS
Parties Involved:	Coordinated Transportation Team
Description:	Finalize participants in demonstration program, determine broker, and con-firm broker role based on capacity and ability to implement
Estimated Duration:	Months 1- 3

Task 2: Program Identification

TASK 2.1:	IDENTIFY PRIORITIES AND POLICIES
Responsible Party:	Coordinated Transportation Committee
Parties Involved:	Coordinated Transportation Committee
Description:	Make policy and process decisions, including trip type, geographic coverage area, priority trips, Medicaid vs. non-Medicaid trips, payment, funding and handling funding restrictions, dispatching, hours, and days of service, etc. Document these decisions and make revisions as the demonstration program progresses.
Estimated Duration:	Months 2- 4
TASK 2.2:	FORMALLY ADOPT BROKER MODEL AND BROKER
Responsible Party:	Coordinated Transportation Committee
Parties Involved:	Coordinated Transportation Committee
Description:	Discuss any potential issues to confront and develop solutions including broker's capacity to organize Trip Exchange and hire Mobility Manager
Estimated Duration:	Month 5-7

Task 3: Demonstration Program Initiation

TASK 3.1:	ESTABLISH AN AGREEMENT FOR PARTICIPANTS
Responsible Party:	Consultant
Parties Involved:	Coordinated Transportation Committee
Description:	Demonstration program participants to approve an agreement that confirms the demonstration goals, scope, and each agency's responsibilities.
Estimated Duration:	Month 8-9
TASK 3.2:	FINALIZE BROKER MODEL DEMONSTRATION PROGRAM PROCESS
Responsible Party:	Coordinated Transportation Committee
Parties Involved:	Coordinated Transportation Committee
Description:	Write a work plan to identify all aspects of coordinated transportation program. Determine what format to use for the Trip Exchange (e.g., Excel spreadsheet, Google form, etc.). Determine what fleets will be dispatched by time of day and per day. Identify how trip cost will be collected, etc.
Estimated Duration:	Month 9-12
TASK 3.3:	ESTABLISH DEMONSTRATION PROGRAM REPORTING REQUIREMENTS
Responsible Party:	Coordinated Transportation Committee
Parties Involved:	Coordinated Transportation Committee
Description:	Establish demonstration program reporting requirements, including, but not limited to:
	<ul style="list-style-type: none"> • Trips completed • Trip duration & distance • Pooled trips • Mileage outside originating county • Cancellations • No shows • Missed trips • Denials • Number of unique individuals served
Estimated Duration:	Months 9-12

TASK 3.4:	TRAIN STAFF ON DEMONSTRATION PROGRAM PROCESS
Responsible Party:	Broker and Individual Agencies
Parties Involved:	Coordinated Transportation Committee
Description:	Broker to train Mobility Manager. Each participating agency to train staff on new steps relevant to the demonstration program including submitting trip reservation requests to the Trip Exchange, receiving trip reservation requests, dispatching trips, collecting fares, paying fares, etc.
Estimated Duration:	Month 13-15

Task 4: Test Trip Export/Import Process

TASK 4.1:	TEST TRIP RESERVATIONS
Responsible Party:	Individual Agency
Parties Involved:	Coordinated Transportation Committee
Description:	Create test reservations to simulate demonstration program trips and verify the trips are successfully accounted for in the dispatching methodology. Validate customer and trip information. If the process fails, repeat until successful.
Estimated Duration:	Month 14

Task 5: Start Demonstration Program

TASK 5.1:	ESTABLISH START DATE AND BEGIN DEMONSTRATION PROGRAM
Responsible Party:	Coordinated Transportation Committee
Parties Involved:	Coordinated Transportation Committee
Description:	Begin demonstration program
Estimated Duration:	Month 16

Task 6: Evaluate Success of Program

TASK 6.1:	EVALUATE SUCCESS OF PROGRAM
Responsible Party:	Coordinated Transportation Committee
Parties Involved:	Coordinated Transportation Committee
Description:	Collect data and use monthly meetings to report and discuss demonstration program metrics/performance measures. Discuss challenges with demonstration program and take steps to address those challenges. Adjust service details, improve reservation process, etc. as necessary. Document all decisions made.
Estimated Duration:	Months 16-24

APPENDIX

Appendix A: Agency Survey

TRANSPORTATION INTEREST SURVEY: NIRPC NON- PROFIT TRANSPORTATION STUDY

1. What agency or organization do you represent?

2. What is your role at that agency or organization?

- Management of the agency or organization
- Management of transportation specifically
- Another transportation role
- Another role (please specify)

3. Briefly describe your clients:

4. Where do your clients most commonly live (pick up to three)?

- Porter County (outside of the communities below)
- Lake County (outside of the communities below)
- Gary
- Hammond
- Merrillville
- Valparaiso
- Portage
- Crown Point
- East Chicago
- Another location outside of Lake or Porter County (write in below)

- Unknown

5. Where do your clients most commonly travel to (pick up to three)?

- Porter County (outside of the communities below)
- Lake County (outside of the communities below)
- Gary
- Hammond
- Merrillville
- Valparaiso
- Portage
- Crown Point
- East Chicago
- Another location outside of Lake or Porter County (write in below)

- Unknown

6. What is your best estimate of the percentage of your clients that have mobility challenges?

- Over 75%
- 50 to 75%
- 25 to 50%
- Under 25%

7. What is the greatest mobility challenge your clients face?

- No access to a car
- Unable to drive
- Unreliable vehicle/driver
- Other (write in below)

- Unknown

8. Does your agency directly provide transportation to your clients?

- Yes
- No

**IF YOU ANSWERED YES TO QUESTION 8, PLEASE SKIP TO
QUESTION 12 on PAGE 4**

9. Have you ever provided transportation to your clients?

- Yes
- No

10. How you arrange for your non-driving clients to get to and from your facility (check all that apply)?

- Directly contract with a private provider to provide transportation
- Provide vouchers for clients to use on private transportation providers
- Provide bus passes or vouchers for clients to use on public transportation providers
- We don't make any funds or arrangements/clients make their own arrangements

11. Why don't you currently provide transportation to your clients (check the most important reason)

- Too costly
- Not enough staff to manage or operate transportation
- Not a large enough client base
- Clients come and go at inconsistent times
- Other reason

THANK YOU FOR YOUR TIME. WE WILL KEEP YOU INFORMED ON THE PROGRESS OF THIS STUDY

THIS SECTION IS TO BE FILLED OUT BY TRANSPORTATION PROVIDERS ONLY

12. What type of transportation services do you provide?

- Open door—any eligible rider within a distinct service area can ride
- Closed door—only clients can ride
- Other (please explain)

13. What is your service area (check all that apply)?

- Porter County (outside of the communities below)
- Lake County (outside of the communities below)
- Gary
- Hammond
- Merrillville
- Valparaiso
- Portage
- Crown Point
- East Chicago
- Other/no particular service area (please explain)

14. What is your fleet type?

- Cutaways (a vehicle in which a bus body is mounted on the chassis of a van or light or medium-duty truck chassis)
- Vans
- SUV/Sedans
- Mix of vehicle types
- Other (please explain)

15. What is your fleet size?

- Less than 5
- 5 to 10
- 11 to 25
- Over 25

16. What is the average age of your fleet?

- Less than 5 years
- 5 to 10 years
- Over 10 years
- Unknown

17. What are your service days and hours?

18. What days and times are your vehicles most commonly idle (please be as specific as possible)?

19. Do you use dispatching software of any kind?

- Yes
- No

If so, what dispatching software do you use?

20. Do you require advanced reservations?

- Yes
- No

21. How would you characterize your transportation operators?

- Paid employee of agency or organization, only role is operator
- Paid employee of agency or organization, has other roles there
- Contracted non-agency/organization employee
- Volunteer/not paid
- Other (please explain)

22. What is your transportation budget and what percentage of this is DIRECTLY funded by the agency/organization?

23. Who are your funding partners if any (enter "N/A" if the percentage you entered above was "0")?

Appendix B- Interview Questions

Interview Questions for Nonprofit Organizations

Current Transportation Providers

1. Clarifying questions, if needed, about survey responses (custom for each organization).
 - a. Fleet and fleet maintenance
 - b. Facilities
 - c. Funding
 - d. Eligibility
 - e. User fees
 - f. Service hours and locations
 - g. Idle time
 - h. Staff
 - i. Technology
2. Can you estimate how many clients you are carrying per run/route? Maximum number/minimum number?
3. What challenges are you currently facing providing transportation services to your clients?
4. In an ideal world without constraints, what transportation services would you offer your clients? How does that differ from what you currently offer? Including locations, days and hours of service, eligibility, etc.
5. What resources would you need to make that happen? Number of vehicles, staff, technology, funding, etc.
6. What additional financial resources could you spend on transportation, if any? Have you identified any future funding for transportation?
7. Would you be interested in shared transportation services? What challenges do you foresee in a shared transportation service?

- a. Funding- in particular, do you have funding restrictions by geographic area, client type, etc?
- b. Services days and times
- c. ADA accessibility
- d. User fees
- e. Client eligibility (age, ability, income, etc.)
- f. Medicaid

Former Transportation Providers

1. Please describe the transportation services you previously offered:
 - a. Fleet and fleet maintenance
 - b. Facilities
 - c. Funding
 - d. Eligibility
 - e. User fees
 - f. Service hours and locations
 - g. Idle time
 - h. Staff
 - i. Technology
2. How many riders did you carry per run/route? Maximum/minimum?
3. What challenges did you face? (Expand on reason for ceasing transportation services)
4. In an ideal world without constraints, what transportation services would you offer your clients? Including locations, days and hours of service, eligibility, etc.
5. What resources would you need to make that happen? Number of vehicles, staff, technology, funding, etc.
6. What financial resources could you spend on transportation, if any?

7. Would you be interested in shared transportation services? What challenges do you foresee in a shared transportation service?
 - a. Funding- any restrictions in terms of geographic area or client type, etc.?
 - b. Services days and times
 - c. ADA accessibility
 - d. User fees
 - e. Client eligibility (age, ability, income, etc.)
 - f. Medicaid

Transportation Voucher Providers

1. Expand on the reasons you haven't provided transportation services to clients.
2. In an ideal world without constraints, what transportation services would you offer your clients? Including locations, days and hours of service, eligibility, etc.
3. What resources would you need to make that happen? Number of vehicles, staff, technology, funding, etc.
4. What financial resources could you spend on transportation, if any?
5. Would you be interested in shared transportation services? What challenges do you foresee in a shared transportation service?
 - a. Funding
 - b. Services days and times
 - c. ADA accessibility
 - d. User fees
 - e. Client eligibility (age, ability, income, etc.)
 - f. Medicaid

Appendix C: Agency Interviews Meeting Notes

AHEPA Senior Living - 3/20/2024

Participants

- Jasmine Walker, Service Coordinator, AHEPA
- Kevin Polette, NIRPC
- Gina Trimarco, TranSystems
- Katie Jurenka, TransPro

Notes

Organization:

- AHEPA 78 - Greek organization
- Serves elderly people (62+) with an income limit, provides affordable housing.
- Run 6 buildings, 50 apartments in each building in Merrillville
- Looking to expand in the area.
- Waiting list for the buildings
- Helps to connect with services and providers.
- Programming to help residents - health fair, education, etc.
- They ask for travel assistance from other providers.
- Funding is from HUD.
- Over 300 residents.

Clients:

- Independent living
- Some have mobility issues.
- 50% don't have cars.

Operations:

- Transportation provider comes once a week to take clients to the grocery store.
- Just a van, so only a few residents can go.
- Multiple trips:
 - Alternative between Meijer and Walmart. 15 use it sporadically.
 - More like to go to Walmart. 8-person capacity.
- Thursdays – 10 AM-1 PM
- Medical appointments in Lake County - depends on time of appointment. Very reliable provider. Very few denials. Monday-Friday 9 to 5 PM.
- HealthVisions is the provider. Fairly new - Nov 2023.
- Sign-up sheet in the community
- Fill out registration form and gives it to HealthVisions
- Would like to do recreational and grocery trips, etc.
- Not all buildings participate. Trying to get other buildings involved. A lot of residents in Bldg. 6 have cars.
- Completely free for residents. AHEPA doesn't provide any funding.
- They used to have transportation but not sure what provider.

Challenges:

- Residents want to get outside and do things but are very restricted.
- A lot of residents walk on US 30 but staff are worried about safety for the residents.
- No sidewalks.
- Lake County Community Services - transit provider but they charge.

- Lyft - \$8 to Walmart; \$13 to Meijer
- Some use Medicaid transportation for medical appointments
- Some use fixed route service.

Funding:

- Funding is strictly for housing, building, none for transportation.
- Have to be as creative as possible to get services.
- Catholic Charities, local businesses provide donations.

Ideal Transportation:

Provide transportation outside of medical and stores. Residents want to go to the movies, beach, casino, mall, etc. to enhance their quality of life. Stay inside because they don't have rides.

Boys & Girls Club - 3/22/2024

Participants

- Mark Jones, VP of Club Services, Boys & Girls Club
- Shire Kuch, VP of Finance, Boys & Girls Club
- Kris Condon, VP of HR, Boys & Girls Club
- Kevin Polette, NIRPC
- Andrew Parker, TranSystems
- Katie Jurenka, TransPro

Notes

Operations:

10 club locations. All locations have transportation, ranging from minibus to clubs that have 3 to 4 full size buses. Provide transportation from school to the club, but do not provide transportation home from the club.

- At Chesterton, Portage and Valparaiso clubs, the school district provides transportation directly to the club, so BGC doesn't have to.

- Gary, Chesterton, Hammond are the larger clubs.
- Don't transport at Merrillville, Portage but use large buses for field trips.
- At Lake Station club, they go to River Forest school district.
- Waiting list for transportation
- Sometimes make 2 trips back and forth. Supplement with minibuses (14 kids)

During the summer, they use the buses for field trips to locations within Lake of Porter Counties. Beyond those counties, they use charter buses because they are worried about their buses breaking down. Charter buses are expensive, have to charge \$40-\$50 per kid.

Fleet:

- Full buses that are retired from school districts. Not ADA accessible. One minibus that's ADA accessible.
- During the day, the buses are idle and distributed to the club locations.
- Annual inspection process is rigorous.
- Rotate buses to different locations.
- Last 10-12 years.
- In-house maintenance, also have a vendor that charges a good price.
- Take them out on the highway to keep them running.
- 1 maintenance staff member to get a CDL in order to drive buses.

Drivers:

13-15 drivers with CDLs

Challenges:

- Age and condition of vehicles. Repair estimate on a vehicle for over \$10,000. 26-year-old bus with 200,000+ miles. Not an attractive billboard to the organization. One was wrapped and looks better. Maintenance is really expensive. \$100k per year

- Retaining drivers. Don't have a pool of drivers for replacement. \$30/hour for drivers. Guarantee them 15 hours even if they only drive 5 hours.

Ideal Transportation?

- Updating vehicles.
- Back up drivers. Have to be reliable.
- Ideally, district would be transporting kids.
- Would like to rely on their own buses for field trips to save money.

Funding:

No specific funding constraints.

Shared transportation?

- Yes, don't want to be in the transportation business.
- Would also be interested in providing buses/drivers to other orgs.
- Worried about need at the same time.

Hebron Call-A-Ride - 3/13/2024

Participants

- Dorothy Michalak, Hebron Call-A-Ride
- Kevin Polette, NIRPC
- Andrew Parker, TranSystems
- Katie Jurenka, TransPro

Notes

Vehicles:

2 vehicles. 1 ADA accessible van and 1 regular 6 passenger van.

Customer Experience:

- No fare
- Have to live in Boone Township
- 20 miles from the center of Hebron
- Sometimes take people outside the area.
- Eligibility - age and disability
- Cancellations
- No shows - sometimes with new clients
 - Moratorium on using the service

Vans have to be back by 5 PM.

Funding:

- No funding from the township
- Grants from Porter County Community Foundation, Anderson, local businesses, client donation.
- Pray no big problems arise with vehicles. Will need new ADA van
- 99% - not from clients

Service Area:

- 30 years ago started by a church, decided the Boone service area
- Based on ability to get around the area

Staff:

- 4 operators. They'll pool rides if they can but don't have scheduling software
- 200-250 on the rolls.
- Last month - van 1 - 34 clients; van 2 - 70 clients: 104 clients
- 75 trips with 13 drivers (volunteer)
- Can't take federal money because of regulations.
- 4 people going to food pantry in the morning.

- Loose leaf notebook to schedule trips.
- Doctors appts are priority but doesn't always work.
- Shopping and errands to an hour.
- Local business does oil changes for free.

Challenges:

- Finding drivers. All drivers are retired. Sometimes they have to scramble for a 2nd driver when needed.
- Vehicle maintenance. New tires. Car insurance. "One major accident will wipe us out." Age of the drivers makes insurance a challenge.

Reservations:

- Take reservations for the next day or beyond. Do not take same day reservations.
- Provide an arrive by time or leave time, trip purpose and length of appointment.

Denials?

- Not very many at all.

Expansion:

- A lot of drivers. Not sure if paying drivers would be the solution.
- Wouldn't burn out drivers.
- More than 2 vans
- Wouldn't worry about finances
- Not sure about adding geography beyond 20 miles.
- Storage garage at the Methodist Church
- Only space for 2.
- Unknown if there is Idle time

- Between morning and afternoon times.
- Do not run on Saturday and Sunday

Shared Transportation Services:

- Maybe? How would it work?
- Most of the clients are pleased with the service. Sometimes not with waiting for others

Other Providers:

- Porter County Aging Community Services - look at their rules to inform their policies. One of our clients used them during COVID.
- During COVID - one person in the van, fully masked.
- PCACS - how easy is it to schedule and get a ride? We heard that it's difficult to schedule

Gabriel's Horn - 3/12/2024

Participants

- Jerry Czarnecki, Gabriel's Horn
- Kevin Polette, NIRPC
- Andrew Parker, TranSystems
- Katie Jurenka, TransPro

Notes

Locations:

- Homeless shelter for women and children. Located in Porter County, between Portage and Valparaiso, along US 6 and Cool Road in Portage Township.
- 6 rooms for clients. Currently in the middle of a 4-room expansion estimated to be completed in the next month. Single women with 3-4 children per room. 25-30 people stay at the shelter at one time. Clients stay for 6 months to connect to the resources they need.

- Appointments are usually in Portage and Valparaiso to see social workers, doctors, etc.
- On Thursdays, they run the van to Portage Trustee food pantry.
- Schedule ahead of time with staff.

Vehicles:

- Their goal is to get clients personal vehicles so they can get to work.
- They have a Dodge Journey. Employees drive clients to appointments as needed.
- 5 passenger vehicle. Sometimes group people together.
- Current vehicle was donated.
- Volunteers sometimes drive clients to appointments with their own vehicle. They can't drive the Dodge because of insurance issues.

Challenges:

- Not having transportation available when they need it
- If they can't transport clients, they try to reschedule the appointment, or use Lyft/Uber.
- They have a women services fund, which includes funding for gas cards, maintenance of client's vehicles, Lyft/Uber, and other things beyond transportation.
- Do not provide transportation to their job because they can't commit to that kind of regular transportation.

Service days:

- Transportation is usually needed 9 AM to 5 PM.

Expansion:

- They would like a bigger vehicle and dedicated transportation person. Goodwill staff member helps with transportation along with their other responsibilities.
- Funding constraints

Funding:

- Funding comes from their general budget. Right now, they just pay for maintenance, gas and insurance for the one vehicle.
- No future funding identified yet.

Interest in shared transportation:

- Can't offer services themselves.
- Could in the future with a larger vehicle
- Concerned about connections/scheduling with other services.

Health Visions Midwest – 3/26/2024

Participants

- Juanita Boland, Health Visions Midwest
- Eric Ashford, Health Visions Midwest
- Kevin Polette, NIRPC
- Andrew Parker, TranSystems
- Katie Jurenka, TransPro

Notes

Operations:

- 3 locations - main location in Lake County
- Nonprofit organizations for addressing health disparities.
- 3700 179th Street, Hammond IN
- Provide classes, blessing box (community pantry)

- Provide transportation for medical purposes (priority) but other things = Trusted Neighborhood Transportation (TNT)
- Routine medical appointments or other errands
- Programming - cardiovascular prevention, diabetes prevention
- Many live in food deserts so provide transportation for nutrition access.
- Some clients use the transportation services, some are just participants in health programs and some are both.
- Pick medications from pharmacy on behalf of clients.
- No charge but request a donation that is not required.
- They have a contract with Marram Health - reimbursement is \$0.67 mileage rate.
- Would like to contract with more organizations to expand their transportation services.
- Provide service to all of Lake County
 - Have gone to Porter County
 - Monday to Friday 8 AM to 5 PM
 - Idle (?) Thursday mornings for AHEPA
- Very responsive
- Door to door service
- 1,643 trips in 2024
- 40% of users are not Health Visions clients

Fleet:

- 1-12 passenger vehicle
- 1 ADA accessible van
- Local maintenance - Jiffy Lube
- Mainly use 12 passenger vans for AHEPA

Challenges?

- Trying to grow
- Building contracts with other providers

Drivers

- Eric is main driver
- Assistant driver - paid, PT
- Looking for volunteer drivers that would reimburse for miles

Funding:

- Large endowment from Poor Handmaidens of Jesus Christ, support TNT program at 100%.
- Develop a sustainability plan beyond their current funding.

Expansion?

- Additional drivers and vehicles
- Funding to support that growth.
- Provide for veteran community.
- 2 VA hospitals in the area
- Multiple veterans need to go to hospitals - Jesse Brown, catch an express bus.

Scheduling:

- Assisted Rides is the software.
- Add rider details, add type of ride.
- 48 hours in advance, have to register.

Challenges:

- Balance between providing transportation for clients vs. others but hasn't been a big issue.
- Share rides, longer travel times.
- Medical appointments are prioritized.

Maria Reiner Center - 3/18/2024

Participants

- Aimee Schallenkamp, Marie Reiner Center
- Kevin Polette, NIRPC
- Gina Trimarco, TranSystems
- Andrew Parker, TranSystems
- David Johnson, TransPro

Notes

The Maria Reiner Center (MRC) is a dynamic gathering place for active adults 55+ located in Hobart, Indiana. We offer health and fitness programs, a fitness room, table/card games, art classes, computer classes, socialization, and field trips—just to name a few. Our members “live life to the fullest.” Keep active, stay young, and make new friends!

- Casino, Walmart, once or twice a month beside the two days
- Fee for the extra trips, we also take donations.
- We pick them up at 8:45 and 9:30 AM, afternoon is 2 PM to take everyone home.
- Vehicles parked in the lot from 9:30 AM to 2 PM every day.
- Only one route in the morning
- 14 passengers
- Agency name on the side
- Could use the bus for additional things, but no budget for an additional driver.
- Not sure we could get people to come every day of the week.
- Meals a few days a week, so that’s a draw.
- 100 people in per day
- Tuesday and Thursday we have 120-130 per day.
- Maybe put out a survey to see if more people would use it?

Would Hobart be opposed to traveling outside of the service area?

- No objection, just not budgeted for it

Looking at grants?

- Legacy Grant did not receive (for the bus to run more hours). I’m not a grant writer so I don’t know what’s available.

How do you replace or maintain vehicles?

- Probably wouldn’t be replaced. Maintenance comes out of the budget. City handles maintenance. They bill us. We have a secure lot, located in the police complex so we park there.

Interested in shared services?

You have the most idle time, other than one other. Interested in learning about it. Funding restrictions? Would donors be upset? Should probably be used for seniors.

Clients have to be 55, they can also be a guest for the day. Annual membership \$35/50 year. No separate user fee, only a donation. Casino trips \$10 per person. Members who ride sometimes donate. No fee. Not everyone gives. We don’t even keep track.

Do members use other services?

- Maybe

How old is the van?

- Less than five years – 2022

Do you pick people up even if they’re not reserved?

- Yes, unless they’re sick.
- Center is open 8 AM to 3 PM Monday to Friday
- Reservations accepted up to the day before travel.

Methodist Hospital - 3/21/2024

Participants

- Aaron Howell, Methodist Hospital
- Claire O'Neill, Methodist Hospital
- Mirko Bebekoski, Director of Case Management, Methodist Hospital
- Stephen Hughes, NIRPC
- Gina Trimarco, TranSystems
- Katie Jurenka, TransPro

Notes

- Methodist Hospital has a consent decree with the State of Indiana
- Required to provide transportation for services that are not provided at the Northlake Campus - cardiac rehab and oncology mostly.
- With chemo and radiation therapy, patients come in regularly, so transportation is needed
- We pay for transportation from a variety of providers:
- NWI Transport
- Superior
- Transportation Services, Inc.

Transportation Services:

- \$350,000 annually on transportation for clients

DISH Funding:

- Have looked into bringing transportation in-house
- UberHealth - now have an account, really good for discharges from the hospital to home

- Henry Ford Health System - have a robust transportation program, would cost more
- Would like to find a single provider

3 levels of transportation that patients need:

- Transport between hospitals with ambulances (not in this project)
- Non-ambulatory/wheelchair
- Outpatient needs.

Challenges:

- Beyond consent decree, big transportation needs from clients. No shows, cancellations, etc. Medicaid transportation is inefficient and not reliable.
- Some clients have challenging housing situations.
- A patient had bed bugs and NWI Transport refused to bring her home.
- Really need drivers who are more trained to help with patients.
- Providers are not always available.

Origins/Destinations:

- Methodist Hospital Northlake - Gary
- Methodist Hospital - Merrillville
- Methodist Midlake Clinic in Gary

Hours:

- Outpatient services - during the workday for scheduled appointments
- Discharges - inpatient could be weekend, nights.

Expansion?

- Projection of need for all services - 150 patients per week is the need (not what currently do)
- Would like to provide more transportation. Consent decree is bare minimum.
- Cost is very high.
- A lot of hospitals in Chicago have their own fleet of vehicles.
- Going to one vendor would be easier - accountability factor.

Opportunity Enterprises - 3/14/2024

Participants

- Mark Fisher, CFO, Opportunity Enterprises
- Neil Samahon, CEO, Opportunity Enterprises
- Stephen Hughes, NIRPC
- Andrew Parker, TranSystems

Notes

Fleet:

- 18 buses
- All are ADA accessible with lifts.
- NIRPC provided funding for vehicles.
- Maintenance is at Dave's Auto.
- Vehicles are stored in a gated lot at their facility.
- GPS in all the buses - GeoTab software - from insurance company.

Staff:

9 drivers, 1 opening for a part-time driver.

Operations:

- Start picking up clients at 6:30 AM for the day program around Porter, Lake and La Porte Counties (specific boundaries are noted in the survey).
- Routes change weekly or monthly but are generally the same (based on the participants in the day program). Vehicles are mostly full during day program pick up/drop off.
- Around 9 AM, they start offering demand response services for other individuals. Most of their trips are Medicaid-funded trips with Verida (aka Southeastrans), but also transport private pay clients. No eligibility requirements. Must reserve the trip 48 hours in advance. Call dispatcher to schedule trips. Usually only carrying 1-2 passengers.
- Around 2:30 PM, they start transportation clients home from the day program until around 4:30 PM.
- Serve 1,000 individual a year.
- Only 9-10 vehicles are in operation currently.
- Do not use dispatching software - Excel spreadsheets & GeoTab for bus location.

Challenges:

- Down a part time driver at the moment
- Relationship with Verida is good
- 2 years ago - increased pay for drivers so they are competitive
- Hiring can still be a challenge, but they are competitive
- Meeting the current demand of their clients
- 1 or 2 vehicles are spare that are older, might have maintenance issues

Shared Transportation:

- Funding - geographic constraint noted in the survey.
- Restrictions are based on economics/efficiency.

- Would be interested in providing transportation for other organizations if it made sense for the organization financially, help provide revenue to support other services.

Paladin (Lake County Service) – 3/20/2024

(Interview only focuses on Lake County Services)

Participants:

- Steve Hobby, Paladin
- Melissa Bohacek, Paladin
- Steven Hughes, NIRPC
- Andrew Parker, TranSystems

Notes

Serves La Porte County, St. Joseph County, Porter County.

Operations:

11-25 vehicles. M-F 6am-6pm. Saturday 8am-4pm. Idle on Sundays. Uses Drive Boss dispatching technology. Paid operators. \$624,513 budget - 74% funded by the agency.

Funding partners: Health Foundation of La Porte, Franciscan Hospital, Michigan City Community Enrichment Core, Unity Foundation, Real.

Paladin has two disparate facilities and clientele. The Lake County service uses vans to transport those with intellectual limitations to day services in Hobart in Highland. The La Porte service focuses on Non-Emergency Medical Transportation.

Fleet:

Paladin has 10-11 vehicles in Lake County. They are 12 passenger or 8 passenger ADA accessible vans. The buses in Lake County are full, with 2 buses running and 2 spares available. Essentially, two routes run in the morning between 7:30 and 8:30 AM and between 4:00 to 5:00 PM. These are “ad hoc” routes, based on who signs up for the day services.

Paladin took over service from South Lake County (public demand response service). They took over and used some of SLC’s older vehicles. They would buy new vehicles if they could. They park the vehicles outside but have a dedicated garage and mechanic in La Porte for their vehicles.

Challenges:

Paladin is outgrowing their funding in La Porte and inside garage storage. In Lake County Title 3 funds the dialysis but there was \$100,000 cut. There could be a need for grant funds to fill in that gap. Paladin has no excess capacity, and the Lake County vans are in bad condition. The insurance company also will not cover non-Paladin drivers using their vehicles.

Porter County Aging & Community Services (PCACS) Discussion - 3/11/2024

Participants

- Judy Peracki, Deputy Director of PCACS
- Jason Kegebein, Executive Director of PCACS
- Stephen Hughes, NIRPC
- Andrew Parker, TranSystems
- Katie Jurenka, TransPro

Notes

Fleet:

- 10 cutaways with 12 passenger capacity
- Vehicle size - 10; all cutaways (drivers don’t need CDL)
- 2 wheelchairs per vehicle; 8 passenger capacity with chairs

Locations/Eligibility:

- Several sites - not limited on types of errands, just has to be in Porter County

- Eligibility - client intake form; seniors, disabilities 18+. Free trips for individuals in wheelchairs

Funding:

- Fare - \$1 one way
- Vehicles from NIRPC
- Local match from county
- \$25k grant through Christopher and Dana Reeve Foundation for rescue vehicle.

Operations:

- Vehicle - some dead time between appointments but not idle very often
- Buses are down because of needing new engines.
- Once a month transportation staff meeting every month
- Paid drivers
- Shared trips - 2 or 3 people per bus; dialysis; usually not full; max is 5 so do have spare capacity on every run.
- Denials - only time we deny a ride is if we don't have capacity.
- Reservations - 2 weeks in advance; try to get doctor's appointments in as early as possible.
- app/online link vs. phone reservations - customers are booking too many appts and then canceling.
- 15% online reservations / 85% online
- Standing dialysis rides - subscription trips (more than 2 weeks in advance)
- Dialysis trips are 35% of total trips; 4-6 trips per week.

Challenges:

- 3 buses are not working; wear and tear on other buses.
- Buses are in the shop constantly - lifts and doors are breaking.

- Vehicle storage? - sit in the parking lot; use to be housed at the Valparaiso bus depot before that was torn down; hope to shelter buses.
- Try to find replacement buses.
- Keep doing preventive maintenance.
- 6 new buses should be arriving soon.
- Behind on bus replacement
- Buses are expensive, even just 20% local match.
- Operators - difficulty hiring in COVID.
- Currently have 8 full time, 2 part time drivers; been able to retain drivers - would like to hire 2 more drivers to serve.

Ideal world:

First thing: bus barn to help maintain buses, newer and updated buses, would like to beyond Porter County (VA or St. Mary's) - they cannot do that; weekend service - Saturday; rescue vehicles to help finish routes in case of breakdown (needed ADA compliance); Hebron staging area for a single bus.

- Funding is most needed.
- Funding restrictions with Porter County
- More real estate - bus barn; there's some across the street.
- Hebron - staging area; would reduce deadhead - help with day-off reservations

Shared transportation:

- We tried to coordinate with people coming from Lake County - meet at the county line.
- Problem was coordinating meeting time and on-time with the other vehicle.
- Definitely want to have the conversation but there are limitations.

- Customer experience - travel time, on-time performance
- Funding? Wouldn't be an issue. Porter County is currently only local funder.
- No longer provide Medicaid trips.
- With more buses, could do a Medicaid trips.

Pines Village Retirement Communities -3/21/2024

Participants

- Sara Olejniczak, VP of Resident Services, Pines Village
- Kevin Polette, NIRPC
- Andrew Parker, TranSystems
- Katie Jurenka, TransPro

Notes

- Most transportation is provided to or from Pines Village apartment complex in Valparaiso.
- Senior living, retirement homes
- Meridian Woods - 2 miles down the road. Duplex patio homes that are maintenance free. As part of their HOA fee, they get transportation, but they all have cars and drive.
- 87 is average age
- 58 to 101 years old
- The majority of the residents no longer drive
- 149 apartments, some are couples. Less than 20 people drive
- Run a shuttle on the hour Mon, Tues, Thurs, Fri
 - Hours: 9 AM to 4:30 PM
 - 2 routes - cover all of Valparaiso
 - Porter Hospital and St. Mary's Hospital
 - Green Route - All day Monday, Friday; mornings on Tuesday to Thursday

- Lincoln Way North
- Tuesday of Thursday afternoons - Lincoln Way South
- Try to avoid doctor's appointments on those days
 - Yellow Route - Lincoln Way South
- Not usually completely full
- Wednesdays are designated for resident trips - outings, dinner, etc. Can be evenings.
- VIP Van transportation
- Ford transit van (is not ADA accessible)
- Outside of bus route - extra
- Lake, La Porte and Porter Counties (outside of 2 routes)
- \$22 per hour for residents
- Often idle. Require 48 hours' notice.
- In a week, usually only used 1 to 2 times.
- Sometimes use if for errands.
- Transport free food to members of low vision support group
- Merrillville - eye institute. Portage

Fleet:

- 12+2 passenger capacity van
- Stored at Pines Village

Challenges:

- 5-year lease with current bus
- Went to price a new bus which would be double the cost of the current bus.
- Long-term bus driver that has been with us for 15 years
- Other part-time bus drivers that cover.

Expanded Transportation:

- Would love to provide weekend transportation.
- Family visits on weekends, but not always
- Can't justify the cost right now.
- Barriers - staffing, funding

Funding:

- 70% occupancy right now, which is very low. No extra funding.
- No competition until a few years ago. More options. Residents living in their own homes for longer.

Shared transportation services between different organizations?

- PCACS provides transportation for Porter Low Vision Support Group but struggles to meet demand.
- Pines Village sometimes provides transportation for Porter Low Vision Support Group
- Don't want to hinder residents.
- Makes sense to partner with another senior organization.
- Sometimes residents use V-Line on the weekends.

Porter-Starke - 3/12/2024

Participants

- Kate Sanders, VP of Systems Administration, Porter-Starke
- Nichole Lessard, Director of Community Support Services, Porter-Starke
- Matthew Burden, CEO, Porter-Starke
- Kevin Polette, NIRPC
- Gina Trimarco, TranSystems
- Katie Jurenka, TransPro

Notes

- Adult case management department serves serious clients experiencing mental illness and qualify for Medicaid case management. Case management involves transportation. Crisis transportation is very minimal.
- Previously operated a bus and a couple of vans to take 10 to 12 clients on trips - wellness, nutrition, grocery, etc. Medicaid billing changed many years ago, which made it difficult to provide.

Funding:

- Receive 2 grants for client transportation.
- 1 grant from Porter Starke Foundation.
- 1 grant from Operation Round Up.
- Provide gas cards and transportation vouchers for cabs, Uber/Lyft. Public transportation vouchers (V Line in Valparaiso)
- Medicaid clients use Medicaid services - Southeastrans (now Verida) is a major NEMT Medicaid provider in northeast Indiana.
- Many problems with Medicaid trips - unreliable, random vehicles, won't provide roundtrip.

About 400 clients

50% of clients have transportation issues

87% of case managers are say their clients are often or always a need

Ideal world:

- Medicaid would be paying and providing these trips more effectively.
- Don't want to run transportation themselves but want to fill transportation gaps that their clients face.

Other services:

- Clients use PCACS
- V Line in Valparaiso bus passes - grocery shopping is hard to carry all bags, long travel time
- Many are anxious riding the bus.

Locations:

- Appointments could be outside the counties, but clients usually live in Porter, Starke counties.
- Grants are not restricted, but very little money to give out.
- Offices in Portage, Valparaiso
- OTP in La Porte
- Other office in Starke

Service days/hours:

24/7 inpatient and crisis center, residential, mobile crisis center
8 AM to 7 PM for other services on the weekdays

Regional Health Systems - 3/11/2024

Participants

- Sonia Magallon, COO of Regional Health Systems
- Brooke Groesche, Transportation Manager, Regional Health Systems
- Kevin Polette, NIRPC
- Andrew Parker, TranSystems

Notes

Regional Care Group oversees several health operations, including Regional Health Systems, which requires the most transportation. Lake Park Residential is a residential facility (~100 residents). Lake Park Residential also uses the Regional Health Systems transportation services.

Locations:

3 primary locations

- East Chicago Care Center (3903 Indianapolis Blvd)
- 2 facilities in Merrillville (Clubhouse & 8555 Taft Street)

Some clients travel to Hammond from housing projects (8 HUD sites)

Eligibility: Only pick up from Lake County. The service is curb to curb, and they have one wheelchair van.

Clubhouse program has grown significantly.

Funding:

- 70 to 85% of their trips are Medicaid trips. Receive trips from Medicaid brokers.
- 60% of their total transportation revenue is from Medicaid.
- No other transportation funding sources.

Trips:

- For inpatient, they will take them home to if they have availability.
- Refer to another CMHC - community mental health - Edgewater and Porter Stark
- Lake Park Residential - mental health diagnoses - ArcCap - 98 people.
- Clubhouse in Merrillville on Broadway and 78th Street
- Not very much idle time. Very short-staffed at the moment.
- Prior to 2021, they didn't have a transportation manager and transportation was very limited.
- Trip growth – 900 to 1,000 one-way trips per month; 1,396 one-way trips in February; 5 drivers
- 10 to 12 passengers per vehicle; Morning trips are completely full; afternoons are typically quite full.

Challenges:

- Staffing. Getting and retaining operators.
- Vehicles are idle because of they don't have enough operators.
- Use older, spare vehicles when vehicles need maintenance.
- 2 group homes - also have a vehicle they keep on site for shopping, errands, etc.
- Sometimes they use the group home vehicles as spare vehicles.

Expansion:

- Be able to transport clients to other appointments outside Regional Health Systems
- Would love to expand programs but needed staffing.
- More people want to attend the day program at the Clubhouse.
- Clubhouse transportation can go outside.
- Have gotten requests from Portage but too far.
- Funding is constraint.
- Future funding - constantly looking but haven't found anything yet.
- Received 2 vehicles from NIRPC in the past?

Shared transportation:

- Liability/insurance of using vehicles is a concern.
- Grant paid for vehicles? But haven't used grant money in a while.
- Add additional group or outpatient sessions - but need more clinicians.
- Growth in the agency
- Interested in using other org capacity.
- If denial, Medicaid will take the trip back and send to another provider.

- Their clients don't like to be transported by other vehicles/strangers; other providers can be unreliable.

Dispatching:

- Use Mediroutes for routing, billing and AVL.

Maintenance/storage of vehicles?

- 8555 Taft in Merrillville (at their facility). Maintenance occurs at a regular auto repair shop.
- Interested in tapping into other public transportation providers.

Three20 Recovery Center - 3/20/2024

Participants

- Allen Gregula, Three20 Recovery Center
- Stephen Hughes, NIRPC
- Gina Trimarco, TranSystems
- Katie Jurenka, TransPro

Notes

We do not provide transportation. We are a recovery hub, so we are part of the Indiana Recovery Network. They have funding for the state of Indiana to the hubs on a monthly basis. Limited amount of funding for the entire state. Money isn't divided at all. Partnership with Lyft to provide transportation to clients. A lot of clients have Medicare or Medicaid. Find out when money runs out the day of.

Hours of operation:

- Monday to Thursday; 9 AM to 8 PM
- Individual sessions during the day; programs start after 5 PM

Wednesday is biggest participation night - integrated with Three20 members and open to the public. Last week, 40+ participants. ½ were members.

15 participants for other programs.

Membership: one-time enrollment without cost

Origins and Destinations:

- All individual trips. Origins are where people are living. Portage, Lake and La Porte Counties, Valparaiso
- Physical site is in Chesterton.
- Active membership includes coming into the facility 3 times per month, meeting with recovery coaches.

Transportation

- Three30 organizes the Lyft ride to/from the facility. Once the money runs out, attendance runs out. In the past, we've written grants to meet that need. That grant money ran out in 2023. Submitted a grant application a month ago to meet that need.
- Very expensive per trip. Merrillville to Chesterton for example.
- Not walkable to South Shore train. Could ride a bike from the station.
- Lyft funding runs out usually, but really depends on the month. Limited to 4 one-way rides per month per client.

Thoughts about transportation?

- It would be a big part of the budget and concerned about the logistics.
- Previously tried to provide transportation for a treatment facility, but finding a driver was difficult.
- Treatment - clinical side of things, outpatient. Recovery - post-treatment process. Ongoing.
- Treatment side is no longer part of Three20.

Ideal transportation?

Large rural population

- Better transit service in Chesterton, providing access to rural areas as well.
- Provide own transportation.

Shared transportation?

- Partnership with agencies
- Cross-training to be aware of the unique needs of the clients.
- Got a grant for 15 bikes.
- Most clients need transportation.

TradeWinds Services - 3/21/2024

Participants

- Theresa Buell, Transportation Coordinator, TradeWinds
- Fallon Coleman, Director of Day Services, TradeWinds
- Stephen Hughes, NIRPC
- Gina Trimarco, TranSystems
- Katie Jurenka, TransPro

Notes

TradeWinds provides a day program for customers.

Transportation:

- Lake County Community Services - southern Lake County but do not go to Porter County. Send them an email each week for transportation needs. Keep track of trips they provided. \$5 per trip / \$500 per vehicle per month. Dedicate 2 vehicles to TradeWinds. Asked if they want to grow. Previously, didn't have drivers, but now they need vehicles.

- San Kofa bus company. Not ADA accessible. Driver for Lake County started his only agency for northern Lake County. Just serves TradeWinds. Don't want the routes to be too long, so don't go to Porter County right now. Don't want the consumers to be on the bus too long. Per trip fee for each way. \$15 per pickup. Has had maintenance issues with a bus.

Challenges:

- Porter County has no transportation resources.
- Longest route starts in East Chicago, lasts 2 hours (starts at 5 AM)
 - Have to pick up 10 people.
- With Lake County, a driver quit unexpectedly. Have to cancel transportation for that day. Some families can drive, but some can't.
- San Kofa handles maintenance issues

Origins/Destinations:

- Lots of Hammond, Gary and East Chicago.
- 40 clients traveling by bus to the day program per day
- 8 to 10 people on waitlist.
- Regular roster of clients that they provide transportation to each week.
- Usually 5 times per week, some are 2 times per week.
- Facility is 3198 Colorado in Merrillville; open from 7 AM to 3:30 PM

Fleet:

- Group homes have their own vehicles.
- Van that staff drive clients to the day program, to grocery store, etc.
- Some transport in their staff vehicle.

- Some vehicles are down, so sharing between sites. Wheelchair lifts are down, hard to find maintenance.
- Probably about 6 to 8 vehicles. Driven by staff.
- Pretty old vehicles.
- Get used for medical appointments during the day, shopping.
- Some clients don't go to the day program every day.
- Used during the day and evenings.

Funding

- Some clients pay themselves for private transportation, but most use their systems.
- Tradewinds bills the state for transportation costs.
- Funding restrictions from state?
- Medicaid waiver guideline but no geographic boundary. Only provides 2 one-way trips per day. Annual cap on the waiver for each person. Indiana state law.
- All of the clients are Medicaid recipients, but transportation is only for medical appointments.
- Don't think it would cover the day-to-day transportation.

Ideal transportation?

- More access to the buses. Only have four buses. Would like more.
- Expanding to Porter County. Three live in Portage.
- Gary access is limited.
- Time restraint - routes are very long.

Shared transportation?

Need to consider competition with other day programs.

Nonprofit Transportation Feasibility Study

Stakeholder Workshop | May 20, 2024



Agenda

TIME	TOPIC
1:30pm – 1:40pm	Welcome and Introductions
1:30pm – 1:55pm	Initial Findings: Nonprofit Transportation Landscape in Northwest Indiana
1:55pm – 2:30pm	Success Definition for a Shared Transportation Model
2:30pm – 3:20pm	Shared Transportation Pilot Concept and Discussion
3:20pm – 3:30pm	Next Steps
3:30pm	<i>ADJOURN</i>

Introduction to the Study

NIRPC engaged the TranSystems team to better understand nonprofit transportation needs in Northwest Indiana and develop a plan to address these needs.

The study is being conducted in partnership with the Boys and Girls Club of Greater Northwest Indiana (BGCGNWI), Goodwill Industries (Goodwill), the Crown Point Community Foundation, the Legacy Foundation of Lake County, and the Porter County Community Foundation.

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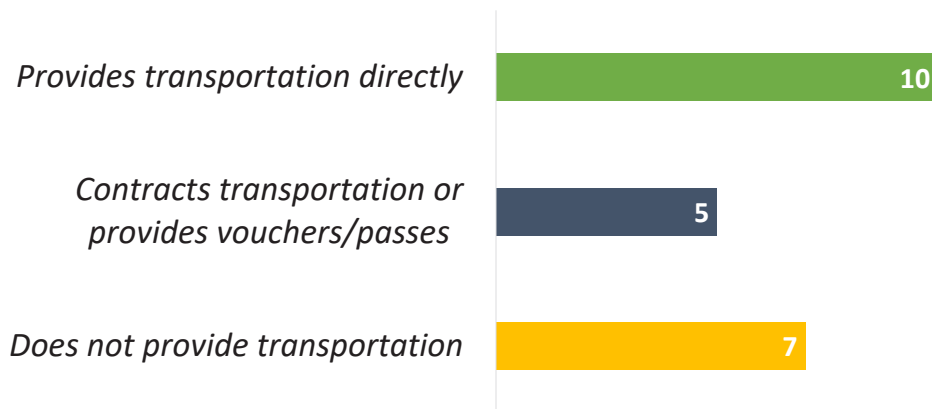
Initial Findings: Nonprofit Transportation Landscape in Northwest Indiana

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Findings

A survey was sent to a list of **22 interested nonprofits organizations** to gain information about their services and need for transportation.

Many nonprofits reported that **lack of transportation is a barrier** for their clients accessing important services.



Reasons for **not providing transportation** include:

- Funding
- Insufficient staff
- Geographic challenges
- Insurance
- Transportation needed at irregular times

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Findings

Interviews

- Interviews were held with the agencies who provide transportation or provide vouchers/contract out rides
- Information gathered on clients, excess fleet capacity, funding restrictions, etc.
- Six agencies selected to discuss next steps:
 - *Pines Village Retirement Communities*
 - *Maria Reiner Center*
 - *Opportunity Enterprises*
 - *HealthVisions Midwest*
 - *PCACS*
 - *Goodwill Industries*

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Success Definition for a Shared Transportation Model

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Headline Exercise

In 2025, what will the Times of Northwest Indiana write about nonprofit transportation?

Write your headline...



Success Definition

What is our definition of success for shared, nonprofit transportation?

Improve the mobility of nonprofit clients in a cost-effective way by leveraging excess capacity across multiple providers.

Does this accurately capture what we're trying to achieve?

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Shared Transportation Pilot

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Case Studies

How do other communities approach nonprofit transportation?



Broker Model

- A broker or mobility manager coordinates transportation between requesting organizations/clients
- Multiple providers that have their own fleet, software and staff.



Centralized Model

- A single transportation provider, including a fleet, dispatching/scheduling software, and staff.
- Organizations make trip requests on behalf of their clients or customers book trips directly, similar to a demand response public transit service.

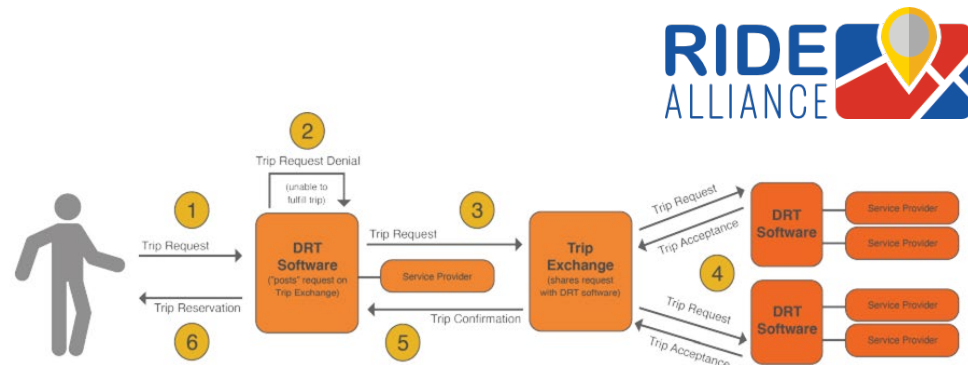
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Case Studies



Broker Model

- Denver’s trip exchange project, **Ride Alliance**, began with Via and RTD to coordinate trips in Longmont, CO where both agencies provided demand response services.
- They obtained a Mobility Services for All Americans (MSAA) grant in 2015 to automate the process and added two other nonprofit agencies.
- Ride Alliance integrates between different dispatching/scheduling software, allowing for automatic trip booking, coordination, payment and reporting between several transportation agencies.



Source: National Center for Mobility Management



Case Studies



Centralized Model

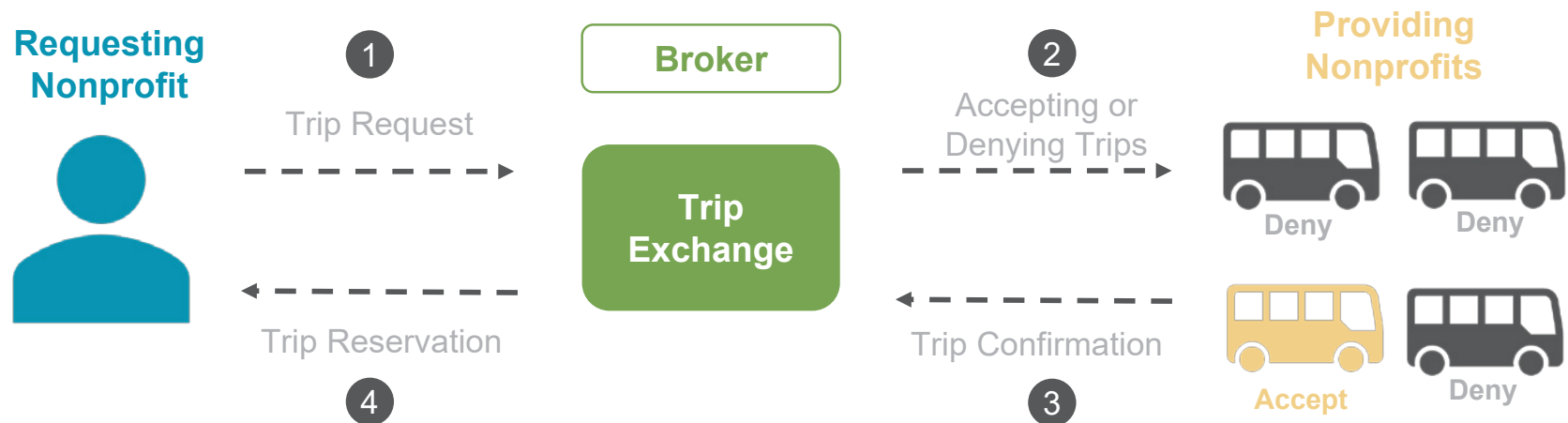
- **Community Transportation Network (CTN)** is a centralized, nonprofit transportation provider in Allen County, IN.
- CTN began in 1999 with Turnstone, a nonprofit for people with disabilities, acting as a broker between other nonprofit providers. In 2000, the participating organizations decided to create a single transportation agency. Their fleet began with vans donated by Aging and In-Home Services.
- In CTN's first year, they provided 1,000 trips; in 2019, they provided 100,000 trips for over 85 partner nonprofit agencies.
- They have a fleet of 43 total vehicles, including accessible vans and 7 school buses.
- They primarily provide trips for people with disabilities and seniors for medical, grocery and work purposes. CTN also provides transportation for Head Start, libraries, etc.



Source: Community Transportation Network

Pilot Concept

A shared transportation pilot project with a **broker** or mobility manager and a **trip exchange**.



Broker Model: Technology Considerations

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Requesting nonprofits exchanging emails and calls with providing nonprofits to scheduling client trips

Pros

- Inexpensive
- No technology requirements
- Flexible

Cons

- Inefficient
- Manual coordination
- Payment handled separately

Recommendation for the Pilot: Google forms and shared Google sheet, facilitated by the Broker

Pros

- Inexpensive
- Flexible
- No special technology requirements
- More efficient than individual emails/calls to each provider
- Easier to track trip requests

Cons

- Trip acceptance/denial requires manual decision-making and coordination from providing nonprofits
- Payment handled separately

Fully integrated scheduling/dispatching software that allows for automatic trip booking, billing and reporting

Pros

- Efficient
- Integrated systems
- Booking, billing and reporting in a single system

Cons

- Expensive
- Special technology requirements
- Not as flexible

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Discussion

Which model would help us achieve our definition of success in the long-term?

What challenges do you anticipate encountering?

How can we address these challenges?

Do you anticipate any deal-breakers?

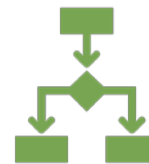
Can your organization act as the broker for the pilot program?

Discussion



Policy Decisions

- Agreement/contract between nonprofits and broker
- Payment
- Cancellations
- Group rides



Process Decisions

- Trip exchange and broker
- Trip details
- Client needs
- Client fare
- Payment
- Cancellations
- Trip coordination
- Vehicles

Next Steps

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Next Steps

- TranSystems will develop an implementation plan and provide it to NIRPC and participating nonprofits
- NIRPC will convene interested nonprofits for regular meetings
- The broker will act as a program manager and execute the implementation plan

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Thank You!

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Appendix E: Coordinated Transportation Committee

Kelly Nissan, *Goodwill Industries*

Dustin Patrick, *Goodwill Industries*

Karman Eash, *Goodwill Industries*

Juanita Bolland, *Healthvisions Midwest*

Eric Ashford, *Healthvisions Midwest*

Aimee Schallenkamp, *Maria Reiner Center*

Neil Samahon, *Opportunity Enterprises*

Mark Fisher, *Opportunity Enterprises*

Sara Olejniczak, *Pines Village Retirement Communities*

Jason Kegebein, *Porter County Aging & Community Services (PCACS)*

Don Ensign, *Porter County Aging & Community Services (PCACS)*

Judy Peracki, *Porter County Aging & Community Services (PCACS)*

Staff:

Tom Vander Woude, *Northwestern Indiana Regional Planning Commission (NIRPC)*

Stephen Hughes, *Northwestern Indiana Regional Planning Commission (NIRPC)*

Kevin Polette, *Northwestern Indiana Regional Planning Commission (NIRPC)*