

# UPDATE TO THE COORDINATED HUMAN SERVICE TRANSPORTATION PLAN FOR THE NATIONAL CAPITAL REGION

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December 16, 2009

# ACKNOWLEDGEMENTS

## DIRECTOR, DEPARTMENT OF TRANSPORTATION PLANNING

Ronald F. Kirby

## CHIEF, PROGRAM COORDINATION

Gerald K. Miller

## PLAN AUTHORS

Beth A. Newman  
Wendy K. Klancher

## Special Thanks To:

Honorable Muriel Bowser, Task Force Chair  
Task Force Members

Website: [www.tpbcoordination.org](http://www.tpbcoordination.org)

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## EXECUTIVE SUMMARY: THREE YEARS OF POSITIVE OUTCOMES

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In 2006, the National Capital Region Transportation Planning Board (TPB) became the Designated Recipient for two Federal Transit Administration (FTA) funding programs: Job Access Reverse Commute (JARC) and New Freedom. Authorized under the Safe Accountable Flexible Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU), these programs provide approximately \$1 million per program per year for public and private transportation providers and human service agencies to support transportation services for low-wage earners to get to job sites or job training, and for people with disabilities for any trip purpose.


As the Designated Recipient for these programs, and using the guidance and procedures established in this Coordinated Human Service Transportation Plan for the National Capital Region (“Coordinated Plan”), the TPB has conducted solicitations for JARC and New Freedom projects over the past three years and has funded 25 projects to improve mobility for many of the region’s residents, visitors, workers and students. The TPB has also played an important role in implementing two of these projects: the Wheelchair Accessible Taxicab Pilot Project in D.C., and the Regional Transportation Information Clearinghouse. In total, over \$7 million in projects – \$3.9 million in JARC projects and \$3.8 million in New Freedom projects – have been approved to improve access to transportation for workers with limited incomes and persons with disabilities.

Projects funded in these solicitations have:

- Introduced the first wheelchair accessible taxicab pilot program to the District of Columbia
- Taught individuals with disabilities throughout the region how to travel independently and confidently on public transit
- Created a comprehensive, one-stop shop for information about the public and specialized transportation options available throughout the region, and
- Helped older individuals with mobility limitations travel to and from essential medical appointments with the help of an aide

**Wheelchair-accessible taxis to roll out on D.C. streets**

By: [Kvtja Weir](#)  
Examiner Staff Writer  
November 13, 2009



**The details**

- » **WHAT:** 20 taxicab minivans with special backdoor ramps
- » **WHEN:** 2-year pilot program with the first cabs hitting the streets in December, others rolling out in January
- » **HOW:** \$1.2 million in federal, D.C. and taxi company money
- » **WHO:** Roughly 20 percent of the District's 64,000 people with disabilities use wheelchairs.

Bobby Coward tries out a new wheelchair-accessible D.C. taxicab. (Photo courtesy Metropolitan Washington Council of Governments)

These projects, and the others funded in these solicitations, have helped many transportation-disadvantaged individuals to improve their mobility and full participation in daily activities.

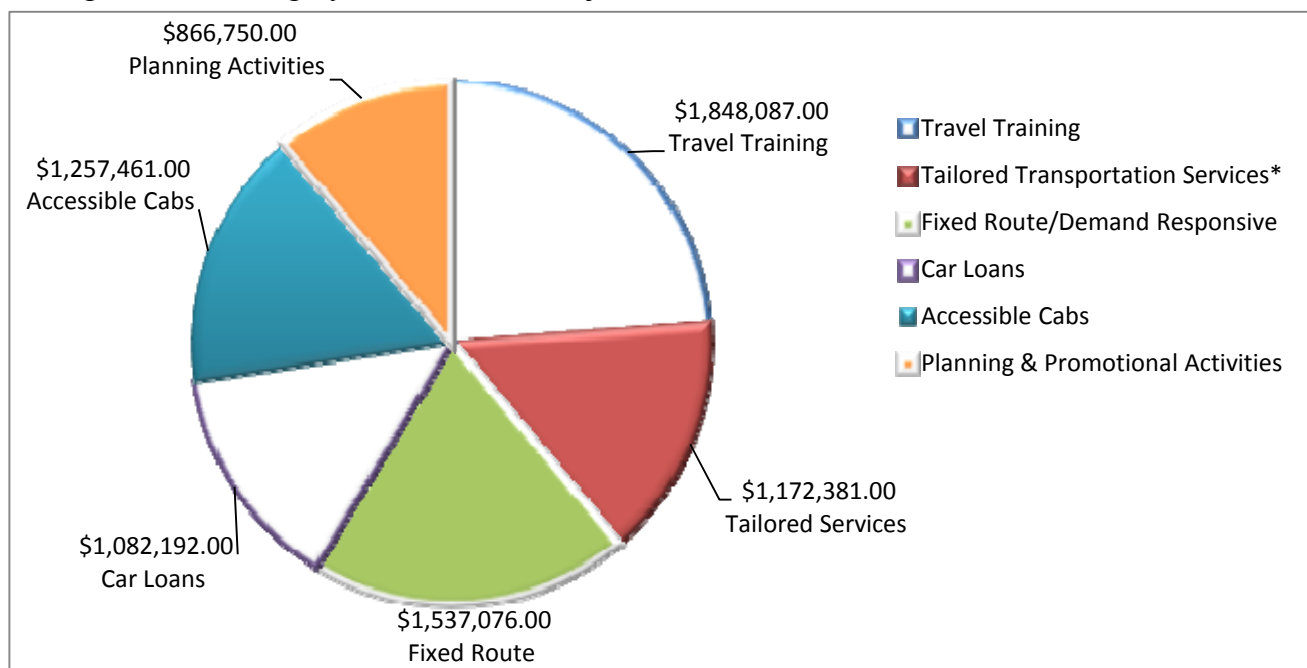
### *Lessons Learned and Outcomes Achieved*

The 25 projects approved in these JARC and New Freedom solicitations cover a significant portion of the Washington, DC-VA-MD Urbanized Area and have benefited hundreds of



individuals with disabilities and working families. The projects have supported travel training programs, car loan programs, an accessible taxicab pilot project, fixed-route and demand responsive services, and tailored transportation services, like taxi vouchers and door-through-door services that improve access to existing transportation services. Figure ES-1 illustrates the funding breakdown of the 25 projects. Most importantly, the projects have tested pilot services that offer innovative ideas to mobility and accessibility challenges.

Figure ES-1: Category Breakdown of Projects Funded in Solicitation Years 2007 – 2009



\*Includes projects like taxi vouchers and door-through-door services that enhance access to existing transportation services.

Several projects are highlighted below to illustrate the impact these grants, many of them pilot projects, have had throughout the region. These projects offer valuable lessons learned for transportation providers and human service agencies in providing additional services to improve transportation access for low-income workers and people with disabilities.

### *Lessons Learned*

In developing the Coordinated Plan, the Task Force emphasized the funding of pilot projects to test new programs and new ways of delivering transportation services. The projects funded in the three solicitations, as well as the solicitations themselves, have presented many useful lessons on what has worked well, and where challenges remain.

The solicitation process itself works well because it's been refined and there is a good understanding of the application and the selection process. In response to feedback obtained by applicants after the first solicitation, the solicitation period was doubled to four months to provide applicants with more time to develop proposals. The mandatory pre-application conferences and technical assistance provided by TPB staff have reduced the number of incomplete, late and/or unresponsive applications to zero in the last solicitation. The selection

process and the competitive selection criteria, established in the Plan, have also worked well. The selection process is widely regarded as fair and appropriate for the region. The Task Force has taken an active role in conducting outreach to promote the solicitation to agencies that are eligible to apply for JARC or New Freedom funds.

*Challenges Remain*

One of the major challenges that agencies face in implementing JARC and New Freedom projects is identifying the appropriate local match. This is especially challenging for operating projects, which require a 50 percent local match. The economic and budgetary challenges facing these agencies have compounded this problem. For a variety of reasons, the projects can also take longer than anticipated to implement. Limitations on JARC trip purposes have presented challenges to workforce development and other agencies that serve low-income workers in developing projects that address client needs. Finally, the Federal reporting requirements can be burdensome, especially for human service agencies not familiar with federal transportation grants.

*Implementing Agency Experiences*

Of the projects that have been completed or are well underway, a survey was conducted to gather feedback on the challenges and successes they experienced in implementing their projects. These agencies provided feedback that should prove valuable to other agencies interested in pursuing similar projects with limited dollars. Table ES 1 provides a sampling of the survey responses received.

Table ES 1: Sampling of Implementing Agency Survey Responses

“Programs should build in costs for marketing and outreach. This is not easily done by existing staff if they already have a full plate.”
“More time was spent on planning, marketing and set up than initially expected.”
“Avoid beginning new services without a long-term funding strategy.”
For agencies partnering on a project, “implement processes that take the work flow and time factor of each agency working together into consideration.”
“Know your clients and the market you serve.”
“Participants really like the additional care they receive from having an aide escort them to their appointments. It diminishes anxiety ... they know they will be taken care of.”

***Loan Program for Low-Income Workers to Purchase Cars:*** 53 loans have been awarded to low-income working families to purchase cars and access jobs. The collective repayment rate is around 85 percent. Over a quarter of loan recipients have improved their credit rating as a result of their car loans.

**61%...**

*... The percentage of car loan recipients who indicated in a recent survey that they have reduced their dependence on public benefits as a result of the car loan grants.*

*“The class was great. I thoroughly appreciated the trainers and the time they spent with me. I got to go to my dentist and I didn’t have to cancel or pay an expensive taxi.”*

*-Travel Training Participant*

**Travel Training for Older Adults with Disabilities:** 4 pilot programs have been funded to provide travel training instruction on use of the bus and rail systems to residents throughout the region. The pilots each use curricula tailored to the needs of the individual. In one pilot that has been completed, participants who completed the training have taken as many as 13 additional round trips *in one month* using public transit than before the training was offered.

By pre-screening the participants to determine their familiarity with public transit, the trainers were able to structure the classes and one-on-one sessions to accommodate the participants’ needs.

## ***Coordinated Plan Update***

While there is no federal requirement mandating the frequency of coordinated planning activities, the Human Service Transportation Coordination Task Force (“Task Force”) has undertaken this plan update in light of the services that have been implemented, the lessons learned from these pilots and the impact of the economy on traditionally disadvantaged populations and the agencies that serve them.

The three primary components – Unmet Transportation Needs, Strategies for Improved Service and Coordination, and Recommended Priority Actions – represent the nucleus of the Coordinated Plan and assist agencies in submitting responsive proposals for JARC or New Freedom funding that are tailored to existing needs.

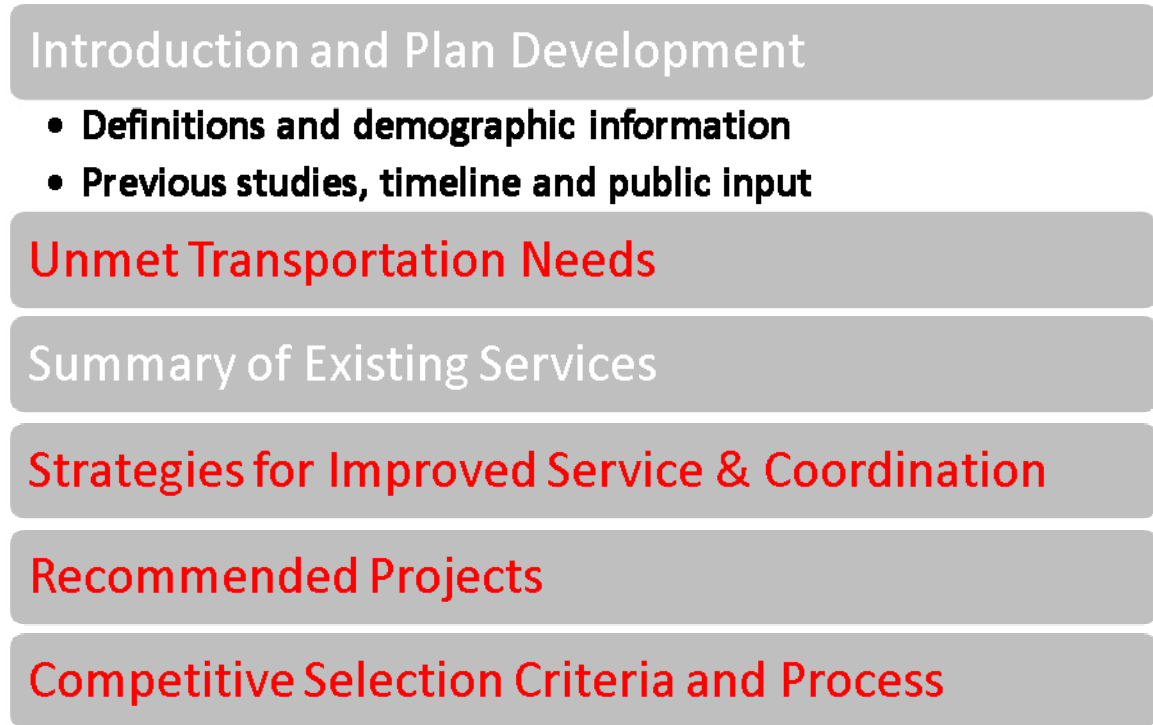
By updating the primary components of the Coordinated Plan, the TPB can provide better guidance on the significant unmet transportation needs for low-income workers and people with disabilities and on the projects and activities that can have considerable impact in addressing them. All projects funded in the JARC and New Freedom solicitations must be derived from the Coordinated Plan.

### ***Process***

The Task Force first revised the list of unmet needs to reflect the most pressing needs. These needs were identified by the Task Force based on their knowledge of the transportation issues facing their clients and were supported by customer feedback, project surveys, and in many cases, their own experiences. The list of unmet needs are categorized according to Need for a Customer Focus; Lack of Reliability; Need for Better Information; and Need for Additional Funding and Transportation Choices.

The Task Force then used the list of revised unmet needs to fine-tune the four Strategies for Improved Service and Coordination. Proposals submitted for JARC or New Freedom funding consideration must demonstrate responsiveness to at least one of the four Strategies. After establishing the Strategies, the Task Force developed 12 Recommended Projects as services that will have a significant impact on addressing unmet needs. Of these projects, 8 were in the original Coordinated Plan, and 4 are new for the Plan Update. Applications for projects not listed as a Recommended Projects may also be submitted. All applications will be evaluated according to the same competitive selection criteria.

Figure ES 2: Primary Components in Coordinated Plan Update



### *Summary*

The updates to the Coordinated Plan will be incorporated into the upcoming 2010 JARC and New Freedom project solicitation. This is the last year for which JARC and New Freedom funding was identified under SAFETEA-LU. The Coordinated Plan, as updated, and the experiences gained from the projects funded to date leave the TPB and the Task Force well positioned to continue providing guidance and funding to agencies working to improve transportation access for disadvantaged populations when these important programs are reauthorized.

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## SECTION 1: INTRODUCTION

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Approximately five million people choose to live, work, learn and play in the Washington, DC region. Efficient transportation plays a major role in supporting travel to and from the many activities that make the region the vibrant and dynamic area that it is. Facilitating the movement of residents and visitors requires a complex transportation infrastructure of various modes supported by a substantial network of public and private providers. This transportation system must serve equally the needs of all who rely on it. Some transportation-disadvantaged groups – persons with disabilities, individuals with income limitations or with limited English proficiency and older adults with limited incomes or mobility impairments – have specialized needs that necessitate distinct planning and coordination efforts.

### *What Is Coordination?*

Coordination is a difficult term to define, and means different things to different people. Within the context of Human Service Transportation, the term refers to agencies, jurisdictions and non-profit organizations working together to maximize transportation services for people with disabilities, low-income populations and older adults and the elimination of service gaps. Various state and federal funding streams have different administrative and eligibility requirements, which complicate the coordination of public and human service transportation. In its recent Report 91, the Transit Cooperative Research Project defined coordination as:

Coordination is a technique for better resource management. It means working together with people from different agencies and backgrounds. It requires shared power: shared responsibility, management, and funding. Many transportation functions, including planning, purchasing, vehicle operations, maintenance, and marketing, can be coordinated...

Coordinating transportation services offers substantial benefits to many communities, but significant investments of time and energy may be required before the desired results are achieved...

Coordinating transportation functions is best understood as a political process, which, like many other political processes, may involve changing environments, conflicts regarding power and control over resources, and competing goals or personalities...<sup>1</sup>

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<sup>1</sup> Executive Summary. *Economic Benefits of Human Service Transportation and Transit Services*. TCRP Report 91. Transportation Research Board, 2003.

### *Purpose of the Coordinated Plan*

The purpose of this first Coordinated Plan for the National Capital Region is to guide funding decisions for three FTA programs, the Job Access Reverse Commute (JARC) Program, the New Freedom Program and the Elderly and Disabled Individuals Program commonly known as Section 5310.

This Coordinated Plan is also intended to broaden the dialogue and support further collaboration between human service agencies and transportation providers to better serve persons with disabilities, individuals with limited incomes and older adults. The Plan will be a “living document” and will evolve to support greater coordination and collaboration efforts within the region.

The Coordinated Plan covers the jurisdictions of the multi-state region that is the National Capital Region Transportation Planning Board’s (TPB’s) planning area. Figure 1 shows a map of the TPB planning area and the Washington DC-VA-MD Urbanized Area. The TPB also serves as the designated recipient for the JARC and New Freedom programs for the Washington DC-VA-MD Urbanized Area.

### *What is the TPB?*

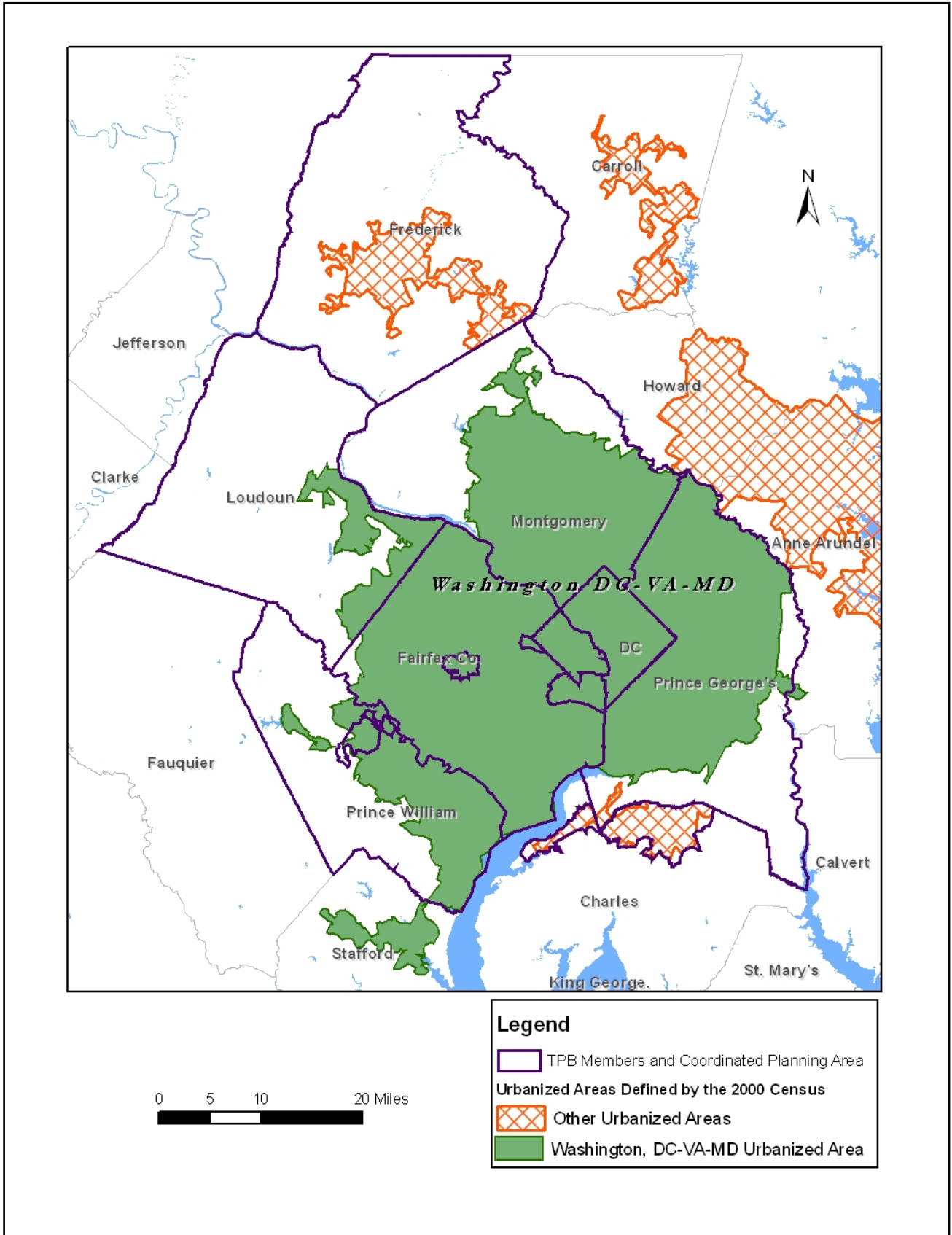
As the metropolitan planning organization for the Washington, DC-VA-MD Urbanized Area, the Transportation Planning Board (TPB) has the privilege of preparing this Coordinated Human Services Transportation Plan. The TPB is the federally designated Metropolitan Planning Organization (MPO) for the region, and plays an important role as the regional forum for transportation planning. The TPB prepares plans and programs that the federal government must approve in order for federal-aid transportation funds to flow to the Washington region.

Members of the TPB include representatives of local governments; state transportation agencies; the Maryland and Virginia General Assemblies; the Washington Metropolitan Area Transit Authority; and non-voting members from the Metropolitan Washington Airports Authority and federal agencies. The TPB has an extensive public involvement process, and provides a 30-day public comment period before taking action on plans and programs.

The TPB's planning area, shown in Figure 1, covers the District of Columbia and surrounding jurisdictions. In Maryland these jurisdictions include Frederick County, Montgomery County, Prince George's County and the St. Charles urbanized area of Charles County, plus the cities of Bowie, College Park, Gaithersburg, Greenbelt, Rockville, and Takoma Park. In Virginia, the planning area includes Alexandria, Arlington County, the City of Fairfax, Fairfax County, Falls Church, Loudoun County, Manassas, and Prince William County.

For more information on the National Capital Region Transportation Planning Board, including a list of TPB members, visit [www.mwcog.org/transportation](http://www.mwcog.org/transportation).

**Figure 1: The TPB Planning Area and the Washington DC-VA-MD Urbanized Area**



*SAFETEA-LU*

The Safe, Accountable, Flexible, and Efficient Transportation Equity Act – A Legacy for Users (SAFETEA-LU) is the reauthorization of federal transportation legislation enacted in August 2005. SAFETEA-LU mandates greater coordination of funding and services for human service transportation through three programs.

As mentioned earlier, the TPB is the designated recipient for two FTA programs: Job Access and Reverse Commute (JARC) and New Freedom. Table 1 describes the two programs in greater detail as well as the Elderly and Persons with Disabilities (5310) program, which is administered by the states. The programs require a local match – 80/20 for capital projects and 50/50 for operating projects. Non-DOT federal funds can be used for the match, so long as the federal share of the project does not exceed 95% of the total project cost. Under SAFETEA-LU, federal funds for JARC and New Freedom were included for federal fiscal years 2006 through 2009.

**Table 1 – SAFETEA-LU Programs**

<b>Program</b>	<b>Designated Recipient</b>	<b>Purpose</b>	<b>Federal FY2006 Funding</b>	<b>Total Funding with Match</b>
<b>Job Access Reverse Commute (Section 5316)</b>	TPB	Assist low-income commuters getting to job sites	\$1,192,035.00	\$2.2 Operating (50/50) \$1.3 Capital (80/20)
<b>New Freedom (Section 5317)</b>	TPB	Transportation for people with disabilities that goes above and beyond the ADA	\$1,017,837.00	\$2.0 Operating (50/50) \$1.25 Capital (80/20)
<b>Elderly and Persons with Disabilities (Section 5310)</b>	State/District DOTs	Provide formula funding to increase mobility for the elderly and persons with disabilities	Differs by State/D.C.	Only capital projects are eligible (80/20)



## ***Description of Programs***

### *Job Access Reverse Commute*

The JARC program existed under the previous transportation legislation, the Transportation Equity Act for the 21<sup>st</sup> Century (TEA-21). SAFETEA-LU has changed the funding from an earmark to a formula program based on the number of low-income individuals. The JARC program is designed to assist low-income commuters in getting to job sites; it also provides funding for reverse commute services. SAFETEA-LU requires that JARC recipients be selected on a competitive basis, and allows other, non-DOT federal funds to be used as matching funds, so long as the federal share does not exceed 95% of the total project cost.

### *New Freedom*

This program is new under SAFETEA-LU, and its purpose is to encourage services and facility improvements for addressing the transportation needs of people with disabilities, above and beyond what is required by the transportation section of the Americans with Disabilities Act. New Freedom funds may cover capital or operating costs, and like the JARC program, grantees must be selected on a competitive basis.

### *Section 5310 – Elderly Persons and Persons with Disabilities*

This program existed under the previous transportation legislation. The 5310 program provides funds for capital costs associated with providing services to older adults and people with disabilities; generally, accessible vehicles are purchased for non-profit organizations. Additional requirements under SAFETEA-LU include the provision that projects funded under this program must be included in a locally-developed human service transportation coordinated plan.

#### **Private Provider Involvement**

“It has been the experience of private providers nationwide that Section 5310 vehicles have been placed into operation in direct competition with private, unsubsidized transportation providers. Private providers must capitalize their equipment at 100 % of cost. Section 5310 allows for private non-profit organizations to receive 80% of the total capital cost of equipment.

Private operators must have a seat at the table in order to comment on coordination and allocation of funding for 5310 vehicles, JARC and New Freedom. 5310, New Freedom or JARC should not duplicate services being offered by private providers or directly compete with operators who must procure equipment using 100 % financing.”

-- Robert M. Werth  
*Diamond Transportation Services Inc.*

## ***Relationship of the Plan to the Section 5310 Program***

In the Washington, D.C. region, the 5310 programs are administered by the Maryland Transit Administration, the Virginia Department of Rail and Public Transportation, and the District of Columbia Department of Transportation for their respective jurisdictions.

To ensure compliance with SAFETEA-LU requirements<sup>2</sup>, this Coordinated Human Service Transportation Plan will inform the funding of projects within Maryland, Virginia, and the District of Columbia's 5310 programs. Applications for 5310 funding within the TPB Planning Area should meet a need identified by this Coordinated Plan. The applications submitted to the three states for 5310 funding will be provided to the TPB for evaluation at the same time that other state agencies are asked to review the applications. Each state has different deadlines for 5310 applications and decisions; TPB staff and the Task Force will work closely with the States to ensure deadlines can be met.

To ensure consistency with the TPB Coordinated Plan, 5310 applications will be evaluated based on the competitive selection criteria listed in Appendix 7. This evaluation will also ensure that projects submitted for 5310 funding are consistent with this Coordinated Plan. Applications for JARC and New Freedom funding submitted to the states that involve service in the Washington DC Urbanized Area should also be reviewed to ensure consistency with the Coordinated Plan. As the plan continues to guide projects in successive years, this review process will be evaluated and refined as necessary to ensure that projects funded under the three separate programs are complementary to one another and fit into the vision and goals of the Coordinated Plan.

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<sup>2</sup> SAFETEA-LU requires that projects funded under the three funding programs be derived from a locally developed, coordinated plan.

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## SECTION 2: PLAN DEVELOPMENT

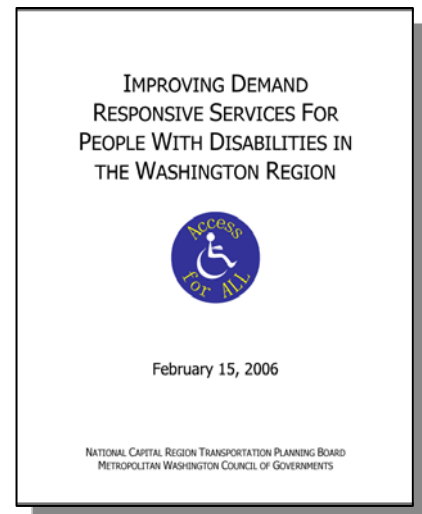
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### ***Previous TPB Studies and Reports***

The Coordinated Plan was developed within the context of several TPB studies and reports, including the TPB’s JARC Plan (January 2004), and three reports from TPB’s Access for All Advisory Committee<sup>3</sup>. The *Improving Demand Responsive Services for People with Disabilities* report from February 2006 identified existing specialized transportation services, gaps and shortcomings in those services, and recommendations for transit improvements and coordination opportunities in the region. This report is described in more detail below. The other two AFA reports are *Transportation Issues for Low-Income Populations, Findings and Recommendations, July 19, 2006* and *Report on Major Findings and Recommendations to Improve Transit Information for Limited English Proficiency (LEP) Customers*. In addition, the development of the plan was aided by a WMATA study conducted by KFH Group, Inc entitled *Specialized Transportation Study*; March, 2004.

#### *The MetroAccess Study*

In its 2006 report “Improving Demand Responsive Services for People with Disabilities in the Washington Region”, the TPB made 15 recommendations for improving paratransit service and identified opportunities for coordination. MetroAccess is the curb-to-curb paratransit service provided by the Washington Metropolitan Area Transit Authority (WMATA) to customers who cannot use the fixed-route service because of a disability. The study was guided by a steering committee chaired by TPB member Kathy Porter and included AFA members including persons with disabilities who use paratransit; human service agencies; WMATA MetroAccess representatives and local paratransit providers; and representatives from two national organizations: Easter Seals Project ACTION and the Community Transportation Association. The study was also supported by a consultant, Russell Thatcher of TranSystems, Inc. The entire study can be found at [www.mwcog.org/transportation](http://www.mwcog.org/transportation).



The study found that in addition to MetroAccess, more than 60 local government and non-profit programs provide specialized transportation services for people with disabilities. Medicaid is the second largest provider of specialized transportation services, next to MetroAccess. The study identified over ten opportunities for coordination in the region which are summarized below:

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<sup>3</sup> The Access for All (AFA) Advisory Committee advises the TPB on transportation issues, programs, policies, and services that are important to low-income communities, minority communities and people with disabilities. The mission of this committee is to identify concerns of low-income and minority populations and persons with disabilities, and to determine whether and how these issues might be addressed within the TPB process. Membership includes community leaders from transportation-disadvantaged groups from around the region. More info at: [www.mwcog.org/transportation/committee/afa](http://www.mwcog.org/transportation/committee/afa)

1) Local jurisdictions should explore opportunities for collaboration. In addition to the coordination that is already occurring at the local level, human service agencies and transit providers could consider coordinating regularly scheduled paratransit trips and broadening local alternatives to MetroAccess; and

2) The region should explore additional opportunities, such as a regional information clearinghouse and an accessible taxi program, through regional Human Service Transportation Coordination planning efforts.

The study consultant, TranSystems, Inc., conducted telephone interviews in December 2005 with human service agencies that provide transportation. The purpose was to identify currently available services, unmet needs, existing coordination efforts and opportunities. The key issues and unmet needs identified by human service agencies are summarized below.

Key issues:

- **Funding:** By far, the most common transportation issue facing human service agencies and transportation providers is adequate funding. Funding was mentioned in relation to expansion of services to meet growing demand and fill in service gaps, such as evenings and weekends.
- **Vehicles:** Vehicle availability and accessibility were also high on the list of issues for survey participants from non-profit organizations.
- **Taxis:** Many participants described issues relating to taxi services, the primary concerns being driver training and attitude.
- **Other:** Other issues that were frequently mentioned include scarcity of drivers due to competition with other transportation services; infrastructure with poor accessibility (including fixed route service and housing); and service reliability and timeliness.

Unmet needs:

- Same day service and greater service areas were the top two unmet needs mentioned in the phone interviews. The participants described their clients needing day of transportation for medical trips due to sudden illnesses and other short-notice trips. Additionally, many transportation services are only provided in a limited service area, which may not include a client's doctor's office or necessary destination. There seems to be several options for seniors and persons with disabilities to travel to medical appointments but few for shopping and social activities. The need for additional trip types was followed by the need for expanded operational hours.
- The next three unmet needs that were identified include reliable service, companion services, and door-to-door service. Under service reliability, several survey respondents indicated that their clients were frequently left waiting for rides.

- Essentially, no survey participants indicated major significant overlap in services, or the need to significantly expand coordination efforts. There already seems to be some degree of coordination between organizations at the municipal and county level.

***The TPB Human Services Transportation Coordination Task Force***

In July 2006, the TPB formed the Task Force to oversee the development of the Coordinated Plan and to steer coordination efforts in the region. In September 2006, the TPB approved the membership for a Task Force. TPB member and D.C. Councilmember Muriel Bowser chairs the Task Force, and its membership is comprised of public transit agencies, state departments of transportation, private and nonprofit transportation providers, human service agencies, and users of specialized transit services from jurisdictions across the region. A complete list of Task Force members is included in Appendix 1. The Task Force met from September 2009 to November 2009 to prepare this Coordinated Plan update.

**Table 2: Task Force Composition**

<i>Stakeholder Group</i>	<i>Number of Representatives</i>
Public Transit	12
State Public Transit / DOTs	3
Private Providers	3
Non-Profit Providers	6
Human Service Agencies	13
Users/Customers	6
Total	44 (with the Chair)

***Guiding Principles***

SAFETEA-LU intensifies the need for regional coordination of human service transportation. As the metropolitan planning organization and the designated recipient of Job Access and Reverse Commute (JARC) and New Freedom funds, the TPB has a unique opportunity to develop a plan that addresses the unmet needs of people with disabilities, low-income individuals and older adults to support their independence and mobility. With that in mind, the TPB has established

Guiding Principles for its Coordinated Human Service Transportation Plan. These principles build upon each other, and are reflected throughout this Coordinated Plan in the strategies and priorities described here.

### ***The Right to Mobility***

People with specialized transportation needs have a right to mobility<sup>4</sup>. Individuals with limited incomes and people with disabilities rely heavily, sometimes exclusively, on public and specialized transportation services to live independent and fulfilling lives. These services are essential for travel to work and medical appointments, to run essential errands, or simply to take advantage of social or cultural opportunities.

The costs of providing human service transportation are indeed rising. However, cost containment should not be achieved at the expense of service delivery. Fortunately, coordination of human service transportation offers the potential to improve service delivery by reducing duplication, making use of available capacity elsewhere in the system, and achieving economies of scale in providing these services.

### ***Customer Service Focus***

In providing public transportation, the transportation needs of the customer should always be kept at the forefront. The abilities of individual riders vary in different aspects of the transportation experience, from accessing program information, to trip scheduling, to route navigation. Policies and procedures should be clear and flexible enough to allow for different abilities, and to provide support as needed. The goal of every transportation provider should be to facilitate a safe, courteous and timely trip every time.

### ***Elimination of Service Gaps***

While there are many providers serving a numerous and diverse clientele, significant gaps exist in human service transportation, which limits the mobility of the individuals who rely on it. Across the region, users of specialized transportation programs live and work in different areas and have different travel patterns. To the maximum extent feasible, gaps in human service transportation services should be eliminated to ensure individuals have a viable transportation option when they need it.

### ***Maximize Efficiency of Service Delivery***

Accessible vehicles are expensive to acquire and maintain. Maximizing the efficiency of human service transportation vehicles helps to reduce program costs by generating additional user revenue while also helping to eliminate gaps in service, without the need for additional capital purchases. Transportation providers should collaborate to provide services where extra capacity exists. The TPB Coordinated Plan will help to identify opportunities for collaboration, as well as providing the space for resolving any issues related to cross-jurisdictional service delivery.

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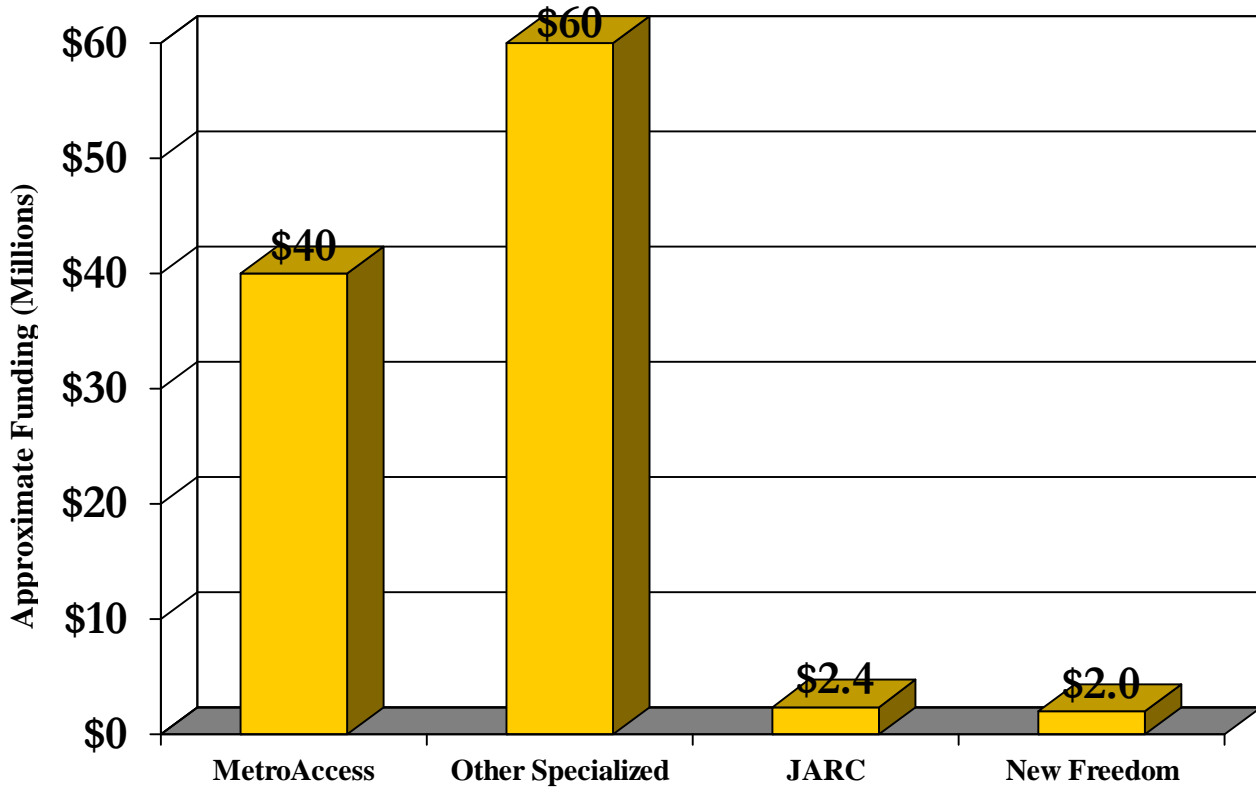
<sup>4</sup> Right to mobility is defined as getting from the door of where you are through the door of where you need to go.

### ***Plan Approach***

In contrast to previous years, when the region received approximately \$5 million a year in JARC funding, the funding currently available under JARC and New Freedom is very limited. Table 3 shows a comparison of JARC and New Freedom money compared to other specialized transportation services in the region.

In light of the comparatively small amounts of money available, the plan encourages innovative pilot projects that creatively address unmet needs. The intention is that the pilot projects will offer important lessons learned, and for those that are shown to be effective, the plan will encourage the replication of these projects in additional jurisdictions and for the benefit of more clients. The plan “incentivizes” the coordination of funding, vehicles, information and other resources, and seeks projects that offer lessons learned about addressing potential obstacles and about replicating the project throughout the region.

**Table 3 – Funding in Perspective**



Based on FY2003 figures. JARC and New Freedom totals shown include funding with the required 50/50 match for an operating program.

*The real value here is less in the money chase and new projects...instead the real benefit is making the best use out of existing resources and programs.*

– David Snyder, TPB member from Falls Church, VA

### ***Timeline for the Plan and the Competitive Selection Process***

Federal legislation requires that a Coordinated Human Service Transportation Plan be in place by July 2007.<sup>5</sup> The TPB began work on how to address the requirement for more coordination in early 2006, with the completion of the MetroAccess study “Improving Demand Services for People with Disabilities”. Building on coordination issues and opportunities identified in that study, the TPB hosted a series of ad-hoc meetings to determine how the region can best meet new requirements. This ad-hoc group included the District of Columbia, Maryland and Virginia Departments of Transportation, public and private transportation providers (including the Washington Metropolitan Area Transit Authority (WMATA), human service agencies, and

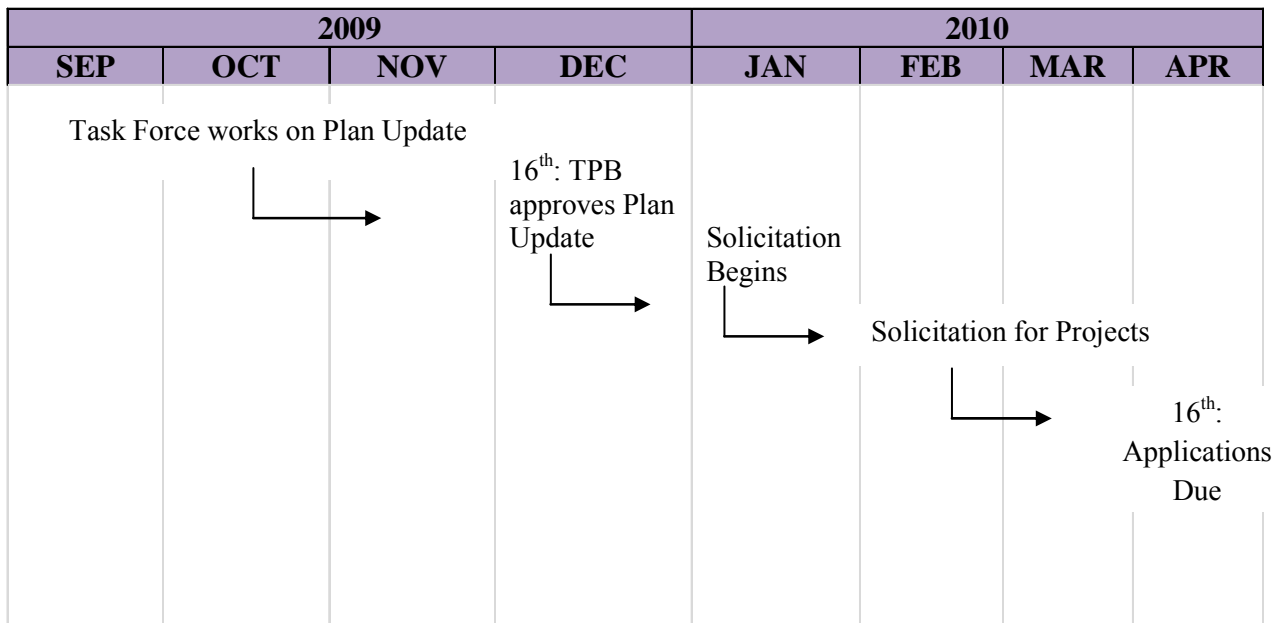
<sup>5</sup> The FTA requires a Coordinated Plan for FY07 programs. The metropolitan planning organization proposed rules require that all long-range plans adopted after July 2007 be SAFETEA-LU compliant.



representatives from low-income populations, persons with disabilities and older adults from around the region. The ad-hoc group recommended that the TPB take the lead in developing the Coordinated Plan and be the designated recipient for the JARC and New Freedom programs for the Washington DC-VA-MD Urbanized Area. The TPB endorsed this recommendation in July 2006 and the Mayor of the District of Columbia, the Governor of Maryland and the Governor of Virginia designated the TPB the recipient of JARC and New Freedom for the Urbanized Area in August 2006.

The Task Force has been meeting monthly since September 2009 to update the plan, and will present the plan update to the TPB at its December 16, 2009 meeting. If the TPB approves the plan update, the solicitation for projects would go out at the beginning of January 2010 and project proposals would be due in April. In May or June, the TPB would then approve the selected projects for inclusion in the Transportation Improvement Program. New Freedom and JARC projects would be initiated in late 2010. Figure 2 depicts a graphic of the timeline.

**Figure 2 – Timeline for Phase I of Coordinated Plan**



## ***Public Input***

In developing the 2007 Coordinated Plan, public input was sought in a number of ways. The Task Force membership was constructed to ensure representation from various stakeholders, as described earlier. The Plan is based on previous TPB studies and reports from the Access for All Advisory Committee, which is made up of community leaders from minority populations, low-income populations and persons with disabilities. In addition, TPB staff presented the elements of the plan to and gathered feedback from various COG/TPB committees and interested groups, including:

- COG Human Services Policy Committee (April 21, October 20, 2006, February 16, 2007)
- TPB Access for All Committee (May 25, September 28, 2006 and January 25, 2007)
- TPB Citizens Advisory Committee (July 13, 2006 and January 11, 2007)
- Washington Regional Aging Network (November 2, 2006 and February 1, 2007)

The Plan was released for a 30-day public comment period (March – April, 2007) before being formally adopted by the TPB. The comments received and the responses are included in Appendix 2.

Additionally, TPB staff conducted two focus groups to ensure the Plan had feedback from consumers and users who could be most impacted. One focus group was on JARC service and issues and one on New Freedom service and issues. The focus groups featured 8-15 consumer representatives identified with the assistance of Task Force members.

### ***JARC Focus Group***

At the JARC focus group on February 24, 2007, a professional facilitator asked participants who represented low-income commuters what is and what is not working for them related to their experience with public transportation. TPB staff then presented the unmet needs, strategies, and prioritized actions for JARC funding from the Coordinated Plan and asked participants to provide their feedback. Their comments overwhelmingly identified customer service and child transport as their biggest concerns. Participants generally felt that existing transportation services are adequate to meet their needs, but they would like to see better customer service from front-line providers as well as buses better adhere to schedules. Participants also cited the expense of getting children to school on public transportation as another significant barrier for them. One participated stated that most of her monthly budget is spent buying bus passes for her three children.



Specific feedback on priority actions from the Coordinated Plan included the recommendation of 24-hour bus service to the airports, especially Dulles and BWI. In response to the Guaranteed Ride Home program, participants thought it should offer the flexibility to make multiple stops, such as a ride to pick up a sick child at school and then a ride home. Participants thought the loan program was a good idea. Participants didn't think the brochure would be particularly useful to them as they expressed the ease of finding information on the Internet. The customer service concerns raised by the group indicate that sensitivity training is needed for Metro bus drivers and other front-line employees to strengthen customer service skills, especially when interacting with ethnically, racially and economically diverse riders. A list of the focus group participants is included in Appendix 3.

### ***New Freedom Focus Group***

At the New Freedom focus group held on March 8, 2007, a professional facilitator asked the 12 participants what is and what is not working for them related to their experience with public transportation. The participants represented different mobility impairments (visual, cognitive, physical) and were representative of the three states. TPB staff then presented the unmet needs, strategies, and prioritized actions for New Freedom funding from the Coordinated Plan for discussion.

Participants offered many comments – positive and otherwise – on their experiences with public transportation. When asked to rank their top issues, the group agreed that none of them wanted to prioritize improvements benefiting one group over another. The group ultimately reached consensus on the following as their top issues:

- Audio inside and outside the buses, with no ability for the driver to turn it on and off
- Low-floor vehicles
- Targeted customer service appropriate to the disability issue
- Coordination of scheduling and routing on MetroAccess
- Proper restraint of mobility devices on MetroAccess

In response to the prioritized actions, participants emphasized the need for sensitivity training and added that people with disabilities should provide travel training because they have the appropriate knowledge. They suggested that Super Shuttle is a good model of a company with accessible vehicles in that they are reliable and provide excellent and appropriate service.



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## SECTION 3: ASSESSMENT OF NEEDS

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### ***Regional Demographic Profile***

As a context to the transportation needs this Coordinated Plan attempts to address, regional statistics of the various population groups are provided here. Appendix 4 provides more information and maps of these population groups.

Table 4 shows statistics for transportation-disadvantaged population groups living in the Washington region. Despite the region's overall affluence, over 328,000 residents lived below the poverty level in 2000, and an additional 447,000 residents were classified as low-income, which is defined as residents making less than twice the official poverty level. In the same year, 629,500 persons had a physical, sensory, and/or cognitive disability (14 percent of the population). In 2000, over 400,000 people in region were over 65 years of age (9 percent of the total population). Individuals with limited English proficiency make up 5 percent of the population; 58 percent of these individuals are members of the Hispanic/Latino community. Although not shown in the table, it is interesting to note that over 40 percent of the region's population is non-white, a figure which includes many recent immigrants to the region<sup>6</sup>.

**Table 4 – Transportation-Disadvantaged Populations in the Washington Region**

<i>Population Group</i>	<i>Washington Region</i>	<i>Percent of Region</i>
Below the Poverty Level (1)	328,300	7%
Low Income (2)	775,300	17%
Persons with Disabilities (4)	629,500	14%
Older Adults (over 65)	403,000	9%
Limited English Speakers (3)	193,600	5%
Total Population	4,544,900	100%

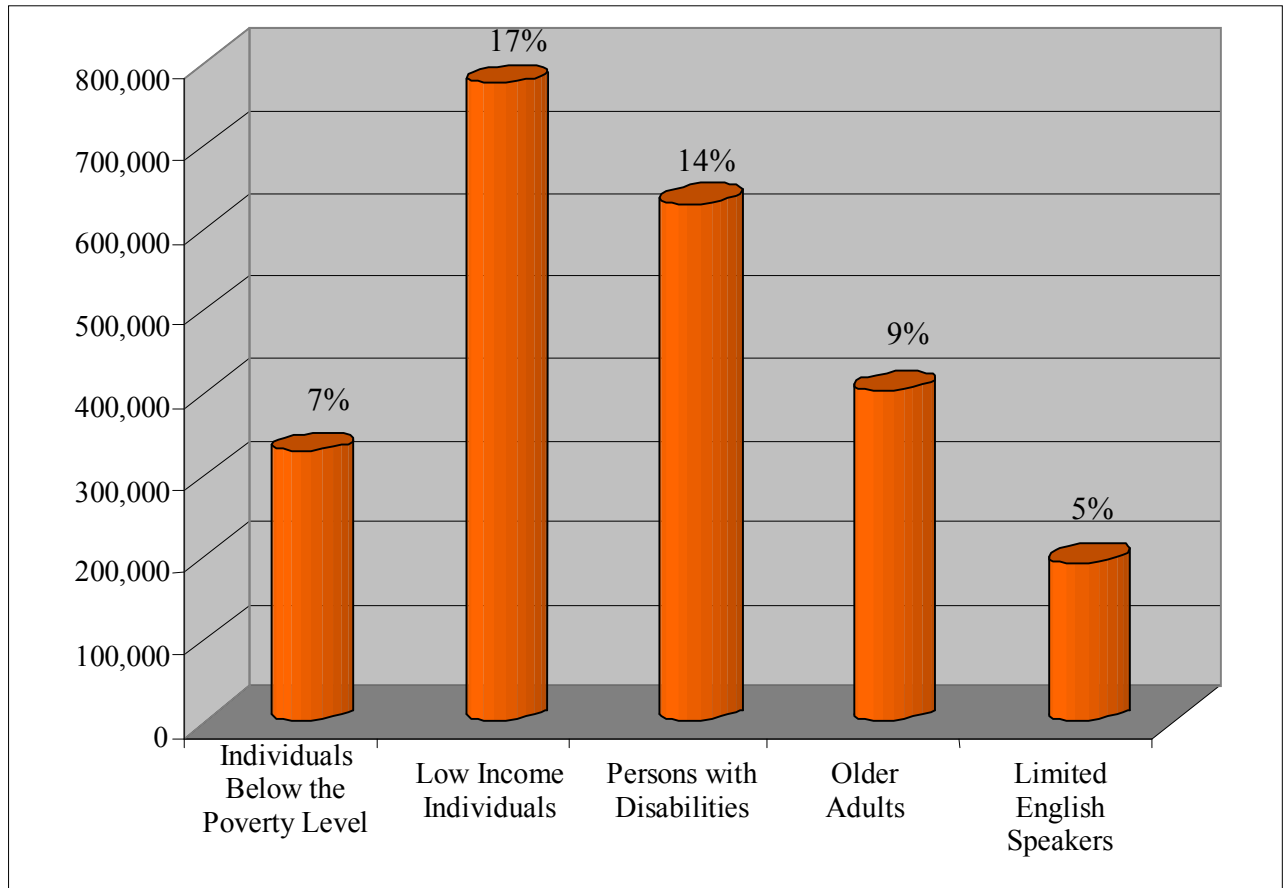
Source: 2000 U.S. Census; numbers are for the Washington DC-MD-VA MSA

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<sup>6</sup> Our Changing Region. Census 2000. Metropolitan Washington Council of Governments. Volume 1, Number 1. Figures provided are for the TPB Planning Area.

- (1) Official poverty level depends on family size. For a family of four, the poverty level is an annual income of \$17,000.
- (2) “Low income” is defined as twice the poverty level. For example, for a family of four an annual income of \$34,000 is considered low income.
- (3) Limited English Proficiency includes individuals who speak English “not well” or “not at all.”
- (4) Include individuals with physical, sensory and/or cognitive disabilities.

**Figure 3 – Regional Demographic Profile of Transportation-Disadvantaged Populations in the Washington Region**



Source: 2000 U.S. Census; numbers are for the Washington DC-MD-VA MSA

## *Unmet Transportation Needs*

The Task Force has revised the list of significant unmet transportation needs to reflect the projects that have been funded in the past three solicitations, as well as other projects undertaken since the Coordinated Plan was approved in April 2007. The revised list reflects the same four categories of unmet needs, which guided the modifications made to the Strategies for Improved Service and Coordination.

**Figure 4 – The Four Categories of Significant Unmet Transportation Needs**

<p>Need For a Customer Focus</p>	<ul style="list-style-type: none"> <li>▪ Transportation services are not tailored to responding to individual needs</li> <li>▪ A greater awareness of customer needs and how their individual disabilities impact how they travel (need better Metro Access intake)</li> </ul>
<p>Lack of Reliability</p>	<ul style="list-style-type: none"> <li>▪ Reliability of paratransit services is a major concern</li> <li>▪ Bus and rail transit are not always accessible</li> <li>▪ Need for back-up service</li> <li>▪ Hard to get dispatched cabs in certain neighborhoods</li> <li>▪ Metro Access call center not working well</li> </ul>
<p>Need for Better Information</p>	<ul style="list-style-type: none"> <li>▪ Information on existing specialized services and user-friendly fixed-route information is lacking (this includes but is not limited to non-native English speakers)</li> <li>▪ More support for car ownership among low-income families, especially east of the river and in Prince George’s County</li> <li>▪ Advocacy for families around retail transportation issues (e.g., car dealers taking advantage of ill-informed buyers)</li> <li>▪ Need for regulatory processes that better accommodate the needs of individuals with disabilities (e.g., vehicle ownership and insurance, disability license plates for quadriplegics)</li> <li>▪ Need for continued marketing and outreach about services that are available</li> </ul>
<p>Lack of Additional Funding and Transportation Choices</p>	<ul style="list-style-type: none"> <li>▪ Need for accessible fixed-route service in more suburban and ex-urban areas</li> <li>▪ Need for same-day service, especially for urgent appointments</li> <li>▪ Need for improved pedestrian access, (e.g., sidewalks, other physical infrastructure around bus and rail stops) especially in and around the Route 1 corridor</li> <li>▪ Need for additional express bus service in outer Wards and away from downtown</li> <li>▪ Need for additional volunteer drivers to help provide same-day service</li> <li>▪ Need for help with transitional transportation costs for people entering the workforce</li> <li>▪ Need to provide support for caregivers</li> <li>▪ Affordability for users is a concern</li> <li>▪ Need for incentives for drivers of accessible taxi cabs</li> </ul>

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## SECTION 4: SUMMARY OF EXISTING SERVICES

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Again building on prior reports, the Task Force identified major providers of transportation services across all jurisdictions in the region for persons with disabilities, those with limited incomes and older adults. A complete inventory is listed in Appendix 5. Services include all-purpose specialized transportation services, Medicaid transportation, limited scope specialized services and fixed-route transit services.

Figure 5 represents the general purpose specialized transportation services in the region. General purpose paratransit is transportation provided for any ADA-eligible person for any trip purpose – medical, shopping or otherwise. Throughout the region, WMATA operates MetroAccess, its shared-ride service. Montgomery County operates Same-Day MetroAccess service, and in Prince George’s County, residents can choose from among the county-wide Call-a-Bus and Call-a-Cab programs and similar services at the local level. Arlington County provides Specialized Transit for Arlington Residents (STAR) and Alexandria’s program is called DOT Paratransit. Fairfax County offers taxi subsidies to ADA-eligible individuals. Lastly, the District of Columbia has no general purpose paratransit service.

Complementing the general purpose specialized transportation services is a network of private and nonprofit providers that provide additional transportation options. These providers include taxi companies, human service agencies, nonprofit organizations and educational and healthcare institutions.

**Figure 5 – Specialized Transportation Services**



**\*The District of Columbia and Prince William County have no general-purpose paratransit service**

Complementing the general-purpose paratransit services are other services more limited in scope or purpose. Of these, the biggest one in terms of budget is Medicaid transportation, which is provided in all three states to all Medicaid eligible individuals for medical trips. Table 5 shows how Medicaid transportation programs vary across jurisdictions:



**Table 5 – 2007 Medicaid Transportation Programs**

Jurisdiction	Managed Care Enrollment	Transportation Expenditures per Capita	Brokerage Model	Transportation as “Medical” Expense	Non-Medical Trips
District of Columbia	45%	\$114		√	√
Maryland	67%	\$27	√		
Virginia	60%	\$72	√	√	

**Table 6 – Limited Scope Specialized Transportation Services**

Jurisdiction	Program	Purpose
District of Columbia	DC Office of Aging	District residents 60+ for limited trip purposes
Fairfax County	FASTRAN	Human service agency clients and low-income residents, for limited trip purposes
Montgomery County	Call ‘n Ride Taxi Program	Low-income seniors and people with disabilities

Fixed-route systems throughout the region offer additional options for accessible transportation. These include: WMATA’s Metrobus and Metrorail; Arlington ART; Fairfax County Connector; Alexandria DASH; Prince George’s County The Bus; Montgomery County RideOn; TransIT in Frederick County; City of Fairfax CUE; Omni Link and Omni Ride service in Prince William County; Virginia Regional Transit and Loudoun County Transit in Loudoun County; and GEORGE in Falls Church.

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## SECTION 5: STRATEGIES FOR IMPROVED SERVICE AND COORDINATION

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“Our insurance company and attorneys have cautioned us that when we go from serving and supporting people with disabilities ... to transporting people not directly associated with [us], we are now in the ‘transportation business’. This opens a whole new can of worms with liability, licensing, certifications, etc.

For example, we began transporting one person who lived in a [group] home and needed to go to an Adult Day Care.... The [transport] ‘agreement’ was held up with lawyers for several weeks. In the meantime, the gentleman fell at his group home and his parents began a lawsuit.... When this happened and we still did not have a signed agreement, I discontinued his transport.

Lessons learned... we have not tried coordinating since.”

-- Joyce Taylor,  
The Arc of Montgomery County  
and TPB Task Force member

### *Barriers to Coordination*

Coordination in public transportation service delivery is a desirable, if not always easy, thing to achieve. Several barriers exist that make sharing resources or combining services difficult, if not impossible. As the story in the text box illustrates, well-meaning efforts at coordination can have unexpected and counterproductive consequences.

Common barriers to coordination include lack of resources, different training requirements or vehicle specifications, and funding requirements. Some, like the sharing of information across jurisdictions, are more easily addressed through the structure of regular meetings among agencies and providers.

Other barriers present greater challenges. Issues like insurance and liability are more complex challenges that require ongoing efforts and dialogue with numerous agencies, providers, nonprofits and insurers. As a Phase II of this Coordinated Plan, the Task Force will continue to convene and facilitate these discussions, inviting the appropriate and necessary organizations to the table to design workable solutions and alternatives.

Another significant barrier to coordination is the multitude of government funding requirements. Over the past 30 years, federal, state and local governments have implemented various programs aimed at improving coordination of publicly funded transportation services for transportation disadvantaged populations, including people with disabilities, Medicaid recipients, and other human service agency clients. Unfortunately, many of the barriers to coordination stem from the administrative and eligibility requirements imposed by the Federal and State governments. The 2003 GAO report “Transportation Disadvantaged Populations”<sup>7</sup> found that “obstacles impeding coordination include concern among administrators that their own participants might be negatively affected, program rules that limit use by others, and limited guidance and information

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<sup>7</sup> United States General Accounting Office (GAO) Report “Transportation Disadvantaged Populations: Some Coordination Efforts Among Providing Transportation Services, but Obstacles Persist”. GAO-03-697. June 2003.

on coordination.... to mitigate these obstacles, officials and experts suggested making federal standards more consistent...providing financial incentives or instituting mandates to coordinate”.

In fact, areas that have had the most success in coordination occur when the state has mandated coordination and provided institutional support to make the coordination happen. Given that this area includes two states and the District of Columbia, each with its own set of transportation programs and accompanying rules, coordination between the three separate states is challenging.

A 2003 University of Minnesota report prepared for the Federal Transit Administration<sup>8</sup> found that the term “coordination” is used to refer to a multitude of different activities. In many instances coordination efforts appear to simply cut services or shift costs, rather than result in true efficiency improvements. A 2003 report by the Transit Cooperative Research Program defines coordination as “a political process that requires shared power—including shared responsibility, management, and funding—and notes that achieving desired results through coordination may require significant time and energy”.<sup>9</sup>

### ***Opportunities for Coordination***

In Phase II of the TPB’s coordination efforts the opportunities identified in the TPB’s Demand Responsive Study (described on page 13 in this document) will be explored in more detail. These opportunities informed the development of this Coordinated Plan and the four strategies provided below. The Demand Responsive study identified over ten opportunities for coordination, including examining alternative funding and service arrangements that make better use of state and local funding and transit passes for Medicaid and Vocational Rehabilitation trips. The recommendations for exploring coordination opportunities from the Demand Responsive Study can be summarized in following two categories:

- 1) Local jurisdictions should explore opportunities for collaboration. In addition to the coordination that is already occurring at the local level, human service agencies and transit providers could consider coordinating regularly scheduled paratransit trips and broadening local alternatives to MetroAccess; and
- 2) The region should explore additional opportunities, such as a regional information clearinghouse and an accessible taxi program, through regional Human Service Transportation Coordination planning efforts.

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<sup>8</sup> Barnes, Gary, *Improving Transportation Services for Disadvantaged Populations*, FTA-MN-26-7004 (Springfield, VA: 2003).

<sup>9</sup> Transit Cooperative Research Program, *Economic Benefits of Coordinating Human Service Transportation and Transit Services*, TCRP Report 9, page 2.

## ***Strategies for Improved Service and Coordination***

The Task Force revised the set of strategies and related actions intended to address unmet needs and fill remaining gaps in human service transportation. Proposals submitted for funding must be responsive to at least one of the following four strategies. Some projects may have a greater overall impact on unmet needs, and accordingly are a greater priority for funding.

The strategies have been revised to reflect the unique transportation needs facing both low-income workers and people with disabilities; to reflect the importance of caregivers in disseminating information about specialized services; and to reflect the importance of sustaining successful new projects after the initial pilot period.

The four strategies are:

- Tailor transportation services to the individual needs of low-income workers and people with disabilities by emphasizing the following:
  - How various types of disability – cognitive, physical and visual – impact a person’s ability to travel;
  - How non-traditional work schedules, reverse commutes and/or childcare trips impact workers with lower incomes, particularly those who are transit dependent.
- Provide user-friendly information in appropriate formats to customers, caregivers, social service and nonprofit agencies about the programs, both public transit and specialized services, which are available to low-income workers and people with disabilities, particularly those who are transit dependent.
- Develop services and programs that improve the reliability of existing paratransit or fixed-route services, or that provide alternatives for people who rely heavily on public transportation. This strategy emphasizes improving access to existing services for travelers who experience unreliability with their everyday transportation services.
- Develop and implement new programs and services to provide additional transportation options that address specific unmet needs for people with disabilities and workers with limited incomes. Additional funding should be identified and secured to support and sustain these programs.

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## SECTION 6: RECOMMENDED PROJECTS

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### REVISED RECOMMENDED PROJECTS FOR COORDINATED HUMAN SERVICE TRANSPORTATION PLAN UPDATE

Approved By the Human Service Transportation Coordination Task Force November 12, 2009

#### ***NEW PROJECTS SINCE THE 2006 COORDINATED PLAN ARE MARKED***



The Human Service Transportation Coordination Task Force develops priority projects to encourage applications for services to address unmet transportation needs. Organizations interested in applying for either JARC or New Freedom funding may also submit applications for projects that are *not* priority projects. All applications for funding are evaluated through a competitive selection process. All projects must meet specific Federal requirements which are described at the website address listed above.

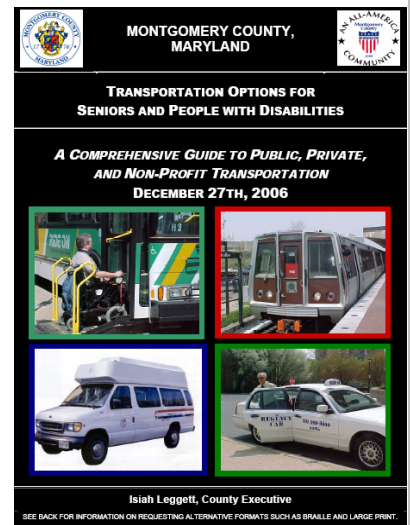
#### ***JARC PROJECTS***

##### ***BROCHURE FOR LOW-INCOME WORKERS***

**What it is:** A publication that could be tailored to a specific geographic area with a high concentration of low-income commuters (e.g., Langley Park, Route 1 in Virginia, Anacostia). The project would operate as a pilot project that includes an evaluation component to determine how useful it is to consumers.

Information would include fixed-route service, bicycle and pedestrian facilities, car sharing, commercial transportation services, specialized transportation services, commuter services subsidy and incentive programs, and maps. Distribution could include Metro stations, local community newspapers, transportation management associations, and employer groups. The project should include a well-developed distribution strategy.

Good Example: Montgomery County produces a comprehensive guide to public, private and nonprofit transportation for people with disabilities.



##### ***SHUTTLE SERVICE OR VAN POOLS TO EMPLOYMENT SITES***

**What it is:** Employer-based funding pools could be developed to provide shuttle service or van pools to better serve shift workers and reverse commuters. The program could focus on large suburban employment centers such as the Dulles corridor, Potomac Mills or the I-270 corridor, and could extend evening and weekend bus service from new or existing providers. The program could also provide carpool matching services. Service should be open to bid on a competitive basis from any transportation provider. Project proposals should include a methodology for

required FTA reporting of passenger miles so that the region can be credited with additional federal transit formula assistance.<sup>10</sup>

### ***LOAN PROGRAM FOR LOW-INCOME WORKERS TO PURCHASE CARS***

**What it is:** A loan fund would be established to enable workers with certain income limitations to purchase cars and pay for car maintenance. The program would focus on suburban and outer suburban commuters whose jobs or homes are inaccessible by transit. Special consideration would be given to new entrants to the workforce who also transport children to daycare.

Loans would be repaid to the fund, keeping it self-sustaining and replenishing it for additional use. The program would set aside a percentage of funds to cover skills training related to budgeting and car maintenance expenses, obtaining a driver's license, and other issues related to car ownership. Preventive maintenance should be emphasized to minimize repair costs.

**Good Example:** Vehicles for Change, which has awarded more than 1,600 cars since 1999. VfC has awarded cars in Carroll, Prince George's, Anne Arundel, and Montgomery Counties, Baltimore City, the District of Columbia, Northern Virginia and Richmond.<sup>11</sup> The Ways to Work Program of Northern Virginia Family Service enables clients to get their loans directly from a banking partner, which provides access to other financial services and helps to build or repair credit.

### ***TRANSPORTATION VOUCHER PROGRAM FOR LOW-INCOME WORKERS***



**What it is:** A voucher project could involve a human service agency, an employer, or a non-profit agency building upon existing voucher programs to provide bus passes, taxi trips or gas cards to low-income individuals in getting to job sites, attending training programs, or transitioning to work. Multiple agencies could coordinate the purchase of passes and provide them to their clients.

Taxi voucher programs could be implemented to help low-income workers living in areas not well served by transit to connect to bus stops or rail stations. Voucher programs offer flexibility to low-income workers by allowing them to choose the transportation options that best meet their needs. This project would be an operating project that requires a 50 percent local match. However, if two or more agencies coordinate the purchase and distribution of vouchers, the administrative costs of the project would qualify as mobility management, which would reduce the required match to 20 percent for that portion of the project. Federal funds cannot be used to provide fares on public transit, so local funds must be used to provide the fare.

**Good example:** Montgomery County, MD created a taxi voucher program to help low-income residents of an area not served by transit to reach rail stations and bus stops. Doorways for

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<sup>10</sup> Guidance for this data collection can be found in UMTA Circular 2710.2A, Sampling Procedures for Obtaining Demand Responsive Bus System Operating Data Required under the Section 15 Reporting System.

<sup>11</sup> Vehicles for Change: [www.vehiclesforchange.org](http://www.vehiclesforchange.org).

Women & Families helps homeless women transition to work with taxi vouchers for trips to job training, interviews, or job sites.

### ***EXPANDED TRANSIT IN UNDERSERVED NEIGHBORHOODS***



**What it is:** Expanded transit in underserved neighborhoods recognizes the need to expand transit in neighborhoods that don't offer sufficient transportation options for workers without cars. Feeder service to rail stations or projects to fund the incremental costs of adding weekend or evening service hours on existing routes could be proposed as cost-effective alternatives to starting new service.

The need for additional transit service is especially great in the eastern portions of the District of Columbia and areas in Prince George's County or other residential areas with significant concentrations of low-income individuals. Outreach to targeted neighborhoods should be conducted to determine the days and times that the service is most needed.

**Good example:** Capital District Transit in Albany, NY recently incorporated neighborhood feeder routes into its system to replace underperforming routes. The 32 feeder routes connect to "trunk" routes at major boarding centers, and serve 20 percent of the agency's riders.

### ***DEVELOP A TRANSPORTATION OMBUDSMAN POSITION***



**What it is:** A transportation ombudsman could be created as an independent, impartial position, readily available to the public, to assist consumers in resolving problems with or complaints about local transportation planning or operations. The ombudsman is not intended to take the place of other established channels for raising and resolving issues. A project to create a transportation ombudsman position should be coordinated with the Regional Transportation Information Clearinghouse, once completed, as both projects are intended to provide better access to transportation information.

The transportation ombudsman could connect travelers to the appropriate agency for assistance, or could independently conduct fact-finding inquiries and recommend appropriate actions or policy changes to resolve the complaint. The transportation ombudsman would advocate for change when a process reveals a need for it.

**Good examples:** The Minnesota Department of Transportation recently created a Transportation Ombudsman position to help the citizens of Minnesota address concerns with the agency's operations.

### ***NEW FREEDOM PROJECTS***

#### ***ACCESSIBLE TAXI SERVICE SUBSIDY PILOT***

**What it is:** A pilot program to provide the minimum financial subsidies and incentives necessary to encourage taxi companies to provide and maintain a sufficient supply of wheelchair-accessible

service in jurisdictions that don't currently have accessible taxis (such as D.C.). Incentives to companies include subsidies to offset the cost of vehicle purchase, maintenance and insurance. To be effective, incentives must be aimed at both companies and drivers to ensure that accessible vehicles are not only purchased, but also put to use and available to customers with disabilities. If incentives are offered regionally, they should be made available to any transportation provider on a competitive basis. Training grants should also be available for all transportation providers.

To have an impact, the program would need to include financial incentives for drivers, such as a stipend for attending sensitivity training to account for lost fares, and financial incentives to drive an accessible taxi. Drivers of accessible cabs could also be matched with schools, senior centers, or other organizations that might want to reserve regular taxi trips.

**Good example:** The City of Chicago made \$1 million available to cab companies to defray the incremental cost of an accessible ramp-equipped van versus a new Ford Crown Victoria. In Virginia, Red Top Cab buys accessible cabs and leases them to their drivers at a lower rate as standard cabs.

### ***SENSITIVITY AND CUSTOMER SERVICE TRAINING***

**What it is:** Regional sensitivity trainings could be offered to bus drivers, Metro station managers, paratransit drivers, taxicab drivers, and other front-line transportation employees on providing better customer service and interacting with people with disabilities, older adults and with riders from various socio-economic backgrounds. General guidelines for serving customers would be provided under the auspices of good customer service for everyone.

Specific guidelines for serving customers who use wheelchairs or service animals would be addressed, as would guidelines for customers with visual or auditory disabilities. The training could include power wheelchair users and persons with visual and hearing impairments. A portion of the money should be set aside to pay stipends to drivers to make up for fares lost while attending training.

**Good Examples:** Services for the Visually Impaired in Silver Spring has a team of instructors who provide four hours of disability sensitivity training on a weekly basis. The interactive training offers direct opportunities to rehearse best practices related to the customer service needs of various disability groups. This includes the opportunity to secure persons with disabilities aboard a vehicle, rather than role playing with other trainees. Metro provides all front-line employees with ADA sensitivity training and safety training.

### ***DOOR-THROUGH-DOOR SERVICE***

**What it is:** A local jurisdiction could conduct a demonstration project of door-through-door service to people whose mobility constraints prevent independent travel on MetroAccess and do not have a personal care attendant. Service could be provided by personal care attendants to travel with eligible individuals. The program would be limited either through eligibility or through a cap on the number of trips.

A jurisdiction could also partner with a nonprofit, such as the Red Cross, that has experience in providing escorted service for specialized transportation.



## ***ESTABLISH A SAME-DAY SERVICE PILOT***

**What it is:** A local agency could sponsor a same-day service pilot for paratransit users. The program could expand on a local taxi voucher program, or a new pilot could be established. The project could operate on a voucher system to control costs. To ensure the pilot project would be available to customers who require a wheelchair-accessible cab, the pilot would work best in jurisdictions that already have accessible cabs.

**How it could work:** Participating agencies could purchase vouchers for their clients. The clients would pay a sliding scale fare between \$2.50 – 10.00. The project could include an incentive for taxi drivers to take the voucher trips. The administrative costs of the project would qualify as mobility management if the purchase of the vouchers was coordinated on behalf of several agencies.

The conclusion of the pilot project would provide an opportunity to review any policy issues or obstacles that arise (including the reasonable limits, to both provider and user, of the sliding scale fee), and test solutions for resolving them.

## ***PROVIDE A RANGE OF TRAVEL TRAINING TO PERSONS WITH DISABILITIES***

**What it is:** A travel-training curriculum on the bus and rail system could be developed for people with developmental and/or intellectual disabilities and offered region-wide. The curriculum would be coordinated with WMATA, local transit agencies and human service agencies to expand training services to ensure they are widely available to all who need them, and to ensure that people with these types of disabilities can obtain training sufficiently tailored to their needs so they can safely use the bus and rail systems.

**Good examples:** Columbia Lighthouse for the Blind uses Orientation & Mobility Specialists to deliver travel training for visually impaired and blind clients using a curriculum tailored to their needs.

## ***CREATE A VOLUNTEER DRIVER PROGRAM***



**What it is:** A human service agency could establish a volunteer driver program to provide rides for people with disabilities. The rides could be for any trip purpose, though priority is often given for medical trips. The program could require advanced reservations, and could reimburse volunteer drivers for their mileage. Policies and procedures for recruiting and orienting drivers would need to be established.

**Good examples:** Neighbor Ride in Howard County and Partners in Care, serving Anne Arundel and Frederick Counties, both operate volunteer driver programs. Neighbor Ride has a zip-code based fare structure, while Partners in Care requests that riders pay a sliding scale fee to help with mileage reimbursement. Both organizations require advanced reservations.

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## SECTION 7: COMPETITIVE SELECTION PROCESS AND SOLICITATION

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### *Framework for Competitive Selection Process*

Projects funded under the current JARC and New Freedom programs must be selected competitively. The Task Force has developed criteria to guide the selection of projects. Projects must address at least one strategy in the Coordinated Plan. The projects will be evaluated based on selection criteria and by a Selection Committee. These criteria will also be used to score Elderly and Disabled Individuals (Section 5310) project proposals that are submitted to the states to ensure consistency with the Coordinated Plan.

The selection criteria are listed in Appendix 7. The criteria award a maximum of 100 points. The weighting of some categories higher than others reflects Task Force priorities for projects. Proposals will be ranked based on eight criteria:

- Responsiveness to **Strategies in Plan**
- Demonstrates **Coordination**
- **Innovative** Idea that is Replicable
- Meets a **Regional** Need
- **Feasibility**
- Potential **Number of People** Impacted
- Involvement of the **Private Sector**
- Strategies for **On-going Funding**

TPB Member and Task Force Chair Kathy Porter will chair the Selection Committee, and members will include TPB Officers and Task Force members representing transit, human services, non-profit providers, private providers, and users or consumers. Members of the Committee must not have submitted a proposal.

### *Solicitation for Projects*

The solicitation is scheduled for May or June. Special emphasis will be given to priorities listed in the plan. Initial solicitations will be for one year of funding. In 2008 the solicitation will be for two years of funding.

### *Geographic Boundary Issues*

As described earlier, this Coordinated Plan covers the TPB planning area, while the funding available through JARC and New Freedom must be used for service within the Washington, DC-VA-MD Urbanized Area. (Refer to map on p.39 for description of Urbanized Area and TPB

Planning area.) Funding under JARC and New Freedom for other Urbanized Areas<sup>12</sup> is available through the state departments of transportation.

What this means is that any agency or transportation provider wishing to submit a funding request to the TPB can do so only for a service that operates in the Washington, DC-VA-MD Urbanized Area. Services that are intended to operate outside of this Urbanized Area should be submitted to the states for funding from the Other Urbanized and rural area funding. Table 7 provides examples of projects and where they would apply for funding:

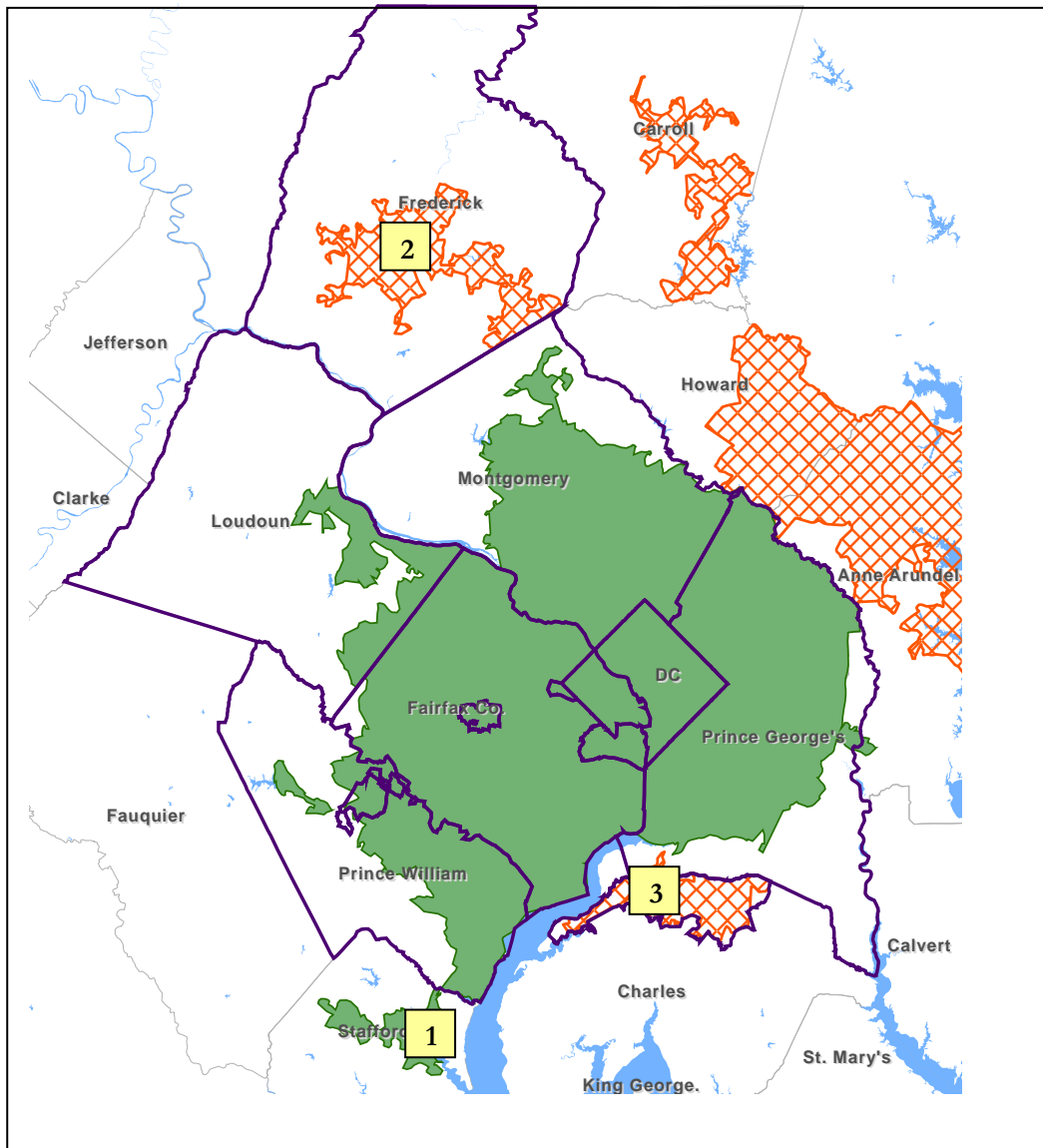
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<sup>12</sup> FTA has established separate JARC and New Freedom programs for Urbanized Areas of less than 200,000 persons. These programs are administered by the Maryland Transit Administration and the Virginia Department of Rail and Public Transportation for their respective states. The District of Columbia is contained entirely within the Washington, DC-MD-VA Urbanized Area.

(See [http://www.fta.dot.gov/documents/FTA\\_JARC\\_Fact\\_Sheet\\_Sept05.pdf](http://www.fta.dot.gov/documents/FTA_JARC_Fact_Sheet_Sept05.pdf) for JARC and [http://www.fta.dot.gov/documents/FTA\\_New\\_Freedom\\_Fact\\_Sheet\\_Sept05.pdf](http://www.fta.dot.gov/documents/FTA_New_Freedom_Fact_Sheet_Sept05.pdf) for New Freedom).

**Table 7 – Sample Project Submissions**

	<b>Jurisdiction</b>	<b>Proposal</b>	<b>Apply To</b>
<b>1</b>	Stafford County	Proposal to run shuttle from northern Stafford County into the Urbanized Area of Stafford	TPB
<b>2</b>	Frederick County	Proposal to provide shuttle service from Northern Frederick County into the City of Frederick	Maryland Transit Administration
<b>3</b>	Charles County	Proposal to provide shuttle service into the Urbanized Area of Prince George’s County	TPB



Appendix 1  
Human Service Transportation Coordination  
Task Force Membership List

Deanna Archey  
Montgomery County Department of Public Works &  
Transportation  
101 Monroe Street, Fifth Floor  
Rockville, MD 20850

Michael Artson  
Fastran  
12011 Government Center Parkway  
Fairfax, VA 22035

Carolyn Bellamy  
MV Transportation  
2328 Georgian Woods Place  
Wheaton, MD 20902

Muriel Bowser, Chair  
District of Columbia Councilmember, Ward 4  
1350 Pennsylvania Avenue, NW  
Suite 110  
Washington, DC 20004

Amy Cole  
Jewish Council on Aging  
12320 Parklawn Drive  
Rockville, MD 20852

Eunice Copeland  
Arlington STAR  
2300 9th Street South, M3  
Arlington, VA 22204

Matthew Copey  
Department of Family Services  
8350 Richmond Highway  
Alexandria, VA 22309

Richard Coward  
D.C. Office on Aging  
441 Fourth Street NW  
Suite 900S  
Washington, DC 20001

Robert Coward  
DC ADAPT  
4136 East Capitol Street NE  
Washington, DC 20019

Elizabeth DeBarros  
DC Department of Employment Services  
64 New York Avenue NE  
Suite 3000  
Washington, DC 20002

Cedar Dvorin  
Area Agency on Aging  
3033 Wilson Boulevard  
Suite 700B  
Arlington, VA 22201

Rikki Epstein  
Washington Metropolitan Area Transit Authority (WMATA)  
600 Fifth Street, NW  
Washington, DC 20001

Pam Forshee  
VA Regional Transit Association (VRTA)  
109 North Lane  
Purcellville, VA 20132

Anthony Foster  
Potomac and Rappahannock Transportation Commission  
14700 Potomac Mills Road  
Woodbridge, VA 22192

Robert Fulk  
Alexandria Specialized Transit  
301 King Street  
Room 5100  
Alexandria, VA 22314

Judi Gold  
Councilmember Bowsler's Office  
1350 Pennsylvania Avenue, NW  
Suite 110  
Washington, DC 20004

MaryAnn Griffin  
Alexandria Office of Aging and Adult Services  
2255 Mount Vernon Avenue  
Unit 5  
Alexandria, VA 22301

Jay Guy  
Fairfax County DOT  
12055 Government Center Parkway  
Suite 1034  
Fairfax, VA 22035

Ed Harrison  
Prince William County Area Agency on Aging  
5 County Complex Court  
Suite 240  
Woodbridge, VA 22192

Shelby Holley  
Prince William County Department of Social Services  
7987 Ashton Avenue  
Suite 200  
Manassas, VA 20109

Tom Howarth  
Father McKenna Center  
19 Eye Street NW  
Washington, DC 20001

Charlie King  
Red Top Cab Company  
3251 Washington Boulevard  
Arlington, VA 22201

Jane King  
118 East Randolph Avenue  
Alexandria, VA 22301

Elaine Lancaster  
Tri-County Council of Southern Maryland  
P. O. Box 745  
Hughesville, MD 20637

Thornette Leacock  
Prince George's County Department of Public Works &  
Transportation  
9400 Peppercorn Place, Suite 300  
Largo, MD 20774

Sharon LeGrande  
Northern Virginia Family Service  
10455 White Granite Drive  
Oakton, VA 22124

Joann Lowe  
D.C. Department of Transportation  
2000 14th Street, N.W.  
Washington, DC 20012

Peggy Maher  
Veolia Transportation  
2100 Huntingdon Avenue  
Baltimore, MD 21211

Greg McFarland  
Northern Virginia Transportation Commission  
4350 North Fairfax Drive  
Suite 720  
Arlington, VA 22203

Paul Meyer  
Montgomery County Commission on Persons with  
Disabilities  
5809 Nicholson Lane  
Suite 116  
Rockville, MD 20852

Michael Muse  
Stafford County  
1300 Courthouse Road  
Stafford, VA 22555

Nancy Norris  
TransIT Services of Frederick County  
1040 Rocky Springs Road  
Frederick, MD 21702

David Remick  
Goodwill of DC  
10 South Glebe Road  
Second Floor  
Arlington, VA 22204

Brenda Richardson  
Women Like Us  
3008 24th Place SE  
Washington, DC 20020

Gwen Rubinstein  
Washington Area Womens Foundation  
1411 K Street, NW  
Suite 400  
Washington, DC 20005

Patricia Sanders  
Department of Family Services  
North Community Services Building  
5012 Rhode Island Ave  
Hyattsville, MD 20781

David Sharp  
Spinal Cord Injury Network, Inc.  
51 Monroe Place  
Plaza 9 West  
Rockville, MD 20850

Neil Sherman  
VA Department of Rail and Public Transportation  
PO Box 590  
Richmond, VA 23218

Karen Smith  
The Arc of Greater Prince William  
13505 Hillendale Drive  
Woodbridge, VA 22193

Joyce Taylor  
The Arc of Montgomery County  
603 Southlawn Lane  
Rockville, MD 20850

Roy Spooner  
Yellow Cab Co. of D.C.  
1636 Bladensburg Road, NE  
Washington, DC 20002

Rev. Gloria Swieringa  
ACORN of Prince George's County  
PO Box 441543  
Fort Washington, MD 20749



Trina Trotman  
Maryland Transit Administration  
6 St. Paul Street  
9th Floor  
Baltimore, MD 21202

Robbie Werth  
Diamond Transportation Services  
7311-B Highland Street  
Springfield, VA 22150

Steve Yaffe  
Arlington County Department of Environmental  
Services Transit Division  
2100 Clarendon Boulevard  
Suite 900  
Arlington, VA 22201

Appendix 2: Comments Received During 30-Day  
Public Comment Period  
(from the Plan dated April 18, 2007)

# **National Capital Region Transportation Planning Board**

777 North Capitol Street, N.E., Suite 300, Washington, D.C. 20002-4290 (202) 962-3200 Fax: (202) 962-3202 TDD: (202) 962-3213

## **MEMORANDUM**

April 18, 2007

**TO:** Transportation Planning Board

**FROM:** Wendy Klancher  
Senior Transportation Planner  
Department of Transportation Planning

**SUBJECT:** Comments Received and Recommended Responses on the Draft Coordinated Human Services Transportation Plan

---

On March 15, 2007 the draft Coordinated Human Services Transportation Plan for the National Capital Region was released for a 30-day public comment period at the Citizens Advisory Committee meeting. The public comment period closed on April 14, 2007. Comments from the public were encouraged and could have been submitted on-line, by e-mail, phone or mail.

This memorandum reviews the comments received during the public comment period from WMATA and Community Support Services, Inc., and provides recommended responses. The comments received are attached and are posted on the TPB website at [www.mwcog.org/transportation/public](http://www.mwcog.org/transportation/public). The comments were also distributed and discussed at the April 12, 2007 TPB Human Services Transportation Coordination Task Force meeting.

1. Comment: Community Support Services, Inc. proposed two additional ideas to fill transportation gaps for persons with disabilities. The first suggestion is that agencies sponsoring day programs for persons with developmental disabilities in Montgomery County could coordinate transportation to these sites, and the second is to develop a system for MetroAccess customers to use taxis to go to and from Metrorail stations.

Response: These are helpful suggestions that could promote more coordination and improve service delivery. In response to this comment, language has been added to the Draft Coordinated Plan that states that in Phase II of the Coordinated Plan specific ideas such as these will be examined by the TPB Human Service Transportation Coordination Task Force.

2. Comment: Community Support Services, Inc. supports the initiatives for same day service and door through door service and states that these services are necessary to maximize safety of individuals with disabilities using the system.

Response: The comment is in support of two priority projects in the Draft Coordinated Plan: Door-through-Door Service (page 32) and a Same-Day Service Pilot (page 34). These two

projects were recommended because the services address unmet transportation needs and respond to one or more of the strategies in the Coordinated Plan.

3. Comment: Community Support Services, Inc. made two comments on improving MetroAccess service, one regarding guaranteed pick-up or drop off times and the other a recommendation for MetroAccess to set policies on routing, trip times and the number of passengers.

Response: The Draft Coordinated Plan does not include specific recommendations about improving MetroAccess service. These comments were forwarded to WMATA's Office of MetroAccess.

4. Comment: WMATA fully supports the intent of the Coordinated Plan to efficiently use increasingly scarce funds and stressed the importance of regional partners in creating efficient and reliable transportation.

Response: The Task Force benefited from the participation of WMATA's former Chief Operating Officer for Community Transportation Services and welcomes continued participation and input from the Acting Chief Operating Officer. The Task Force also benefited from the participation of state, local and regional transportation and human service partners.

5. Comment: WMATA is pleased that travel training and sensitivity training are recommended priority actions in the Coordinated Plan. WMATA has developed programs in these areas which could be used as templates for other projects.

Response: The comment is in support of two recommended priority actions in the Coordinated Plan: "Provide a range of travel training to older adults and persons with disabilities" (page 36) and "Sensitivity and Customer Service Training". Coordinating training programs with local and regional partners could expand WMATA's current efforts.

6. Comment: WMATA is sponsoring an "Accessible Pathways" study with TPB's technical assistance to identify accessible pathway concerns around transit stations for popular MetroAccess customer origins and destinations. Any 'accessible infrastructure' projects submitted to the TPB could use the methodologies identified in this study to assess other areas of the Region.

Response: The comment refers to the recommended priority action "accessible infrastructure support for transit stations" (page 34). The findings and methodologies of the accessible pathways study will be shared with the Task Force so that local governments and other partners can learn from the study.

7. Comment: WMATA suggested that the accessible taxi pilot program should be in place before a same-day taxi service pilot is considered.

Response: In response to WMATA's concern that a same-day service pilot should be available to all paratransit customers, including those that require a wheelchair-accessible cab, language will be added to Section 6 "Recommended Priority Actions" that addresses this issue.

8. Comment: WMATA states that transportation providers should be well represented on the Selection Committee.

Response: The proposed selection committee includes three transportation providers: one representing public transit, one representing private providers and one representing non-profit providers. To ensure an open and transparent selection process, selection committee members cannot be from an agency or organization that submitted a proposal.

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## Transportation

1 2 | [Next >>](#)

**Submitted By:** An Organization  
**Name:** Susan Ingram  
**Agency / Organization:** Community Support Services, Inc.  
**Location:** Gaithersburg, MD  
**Subject:** Comments on CHSTP Draft

**Position:** Comment on the Draft Coordinated Human Services Transportation Plan

### Comments:

CSS would like to propose additional ideas to fill gaps in services: 1. Identify human service agencies in Montgomery County which provide day programs to individuals with developmental disabilities at specific sites. Coordinate transportation to these sites with transportation providers so that the human service agency can work directly with the transportation provider to arrange routes and set times for arrival and departure. These individuals could then be taken off the typical Metro Access routes freeing up routes for other customers. 2. Develop a system for Metro Access customers to use taxis to go to and from train stations so that they can use Metro for a portion of the trip. If a customer could call a taxi at any time, use their metro access card as identification for reduced payment to access a train station only, same day trip demand would be reduced and possibly some subscription trips reduced in length by using the train for a portion of the trip. The train stations are more accessible and user friendly in all weather than are the buses and bus stops. The need to use a bus to get to a train station is an obstacle to use of the train. 3. Reliable service could be improved by dividing reservations of trips into guaranteed drop off times or guaranteed pick up times. An individual reserving a trip could decide whether the drop off time was the critical piece or whether the pick up time was more important for the trip to be workable. Those using Metro access for a doctor appointment or work would choose a guaranteed, within a window, drop off time to reserve. Those needed to be picked up at the close of a program or at the end of the work day may choose a guaranteed pick up time as the priority. 4. Metro Access needs to decide on policies about routes, how many passengers, how long someone can be held on a ride and communicate these policies to everyone and enforce them. CSS supports the initiatives for same day service and door through door service. These services are necessary to maximize safety of individuals with disabilities using the system.



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Appendix 2: Comments Received During the 30-day Public Comment Period

April 11, 2007



Via fax: 202-962-3202

Mr. Ron Kirby, Director  
MWCOC Transportation Planning Department  
777 North Capitol Street, NE  
Suite 300  
Washington, DC 20002

**Re: WMATA Comments on Coordinated Human Services Transportation Plan for the National Capital Region**

Dear Mr. Kirby:

WMATA is pleased to submit the following comments for consideration.

General

1. WMATA fully supports the intent of the Coordinated Plan (Plan) to coordinate increasingly scarce funds to serve the transportation needs of persons with disabilities, and older and low-income citizens of our Region. WMATA views this Plan as an opportunity to leverage our regional resources to better serve the transportation needs of the Region and these constituencies, in particular.
2. WMATA also fully supports a regionally coordinated effort to *meet* the transportation needs of these constituencies and recognizes the criticality of our regional partners' participation in meeting these needs. While WMATA may be the largest service provider, it cannot serve the Region's transportation needs alone. As with our Bus and Rail services, we rely on our partners to help create an efficient and reliable transportation service network.

Specific

1. WMATA is pleased to see that a number of the suggested projects in the recommended priority actions could support, complement and expand current and on-going WMATA activities in the areas of travel training and sensitivity training. It may be worth mentioning that WMATA has developed programs in this area that could be used as templates for other organizations wishing to pursue such projects. In addition, WMATA will begin door-to-door paratransit service this summer, as per TPB's *Improving Demand Services for People with Disabilities in the Washington Region* report recommendations. The Door-Through-Door project would be a supplemental service that could be offered by a more specialized provider.

Further, as part of its Technical Assistance program with COG, WMATA is sponsoring an "Accessible Pathways" study to identify accessibility concerns on pathways to nearest fixed route services from popular MetroAccess customer origin and destination zones. Any 'accessible infrastructure' projects submitted could use the methodologies identified in this study to assess other areas of the Region.

Washington  
Metropolitan Area  
Transit Authority

600 Fifth Street, NW  
Washington, D.C. 2001  
202/962-1234

*By Metrorail:  
Judiciary Square-Red Line  
Gallery Place-Chinatown  
Red, Green and  
Yellow Lines*

*A District of Columbia  
Maryland and Virginia  
Transit Partnership*

2. With respect to the list of recommended priority actions, some actions may need to be in place before others (e.g., an Accessible Taxi program should be in place before considering a same-day taxi service program). TPB staff should consider either a 'priority timeline' within this section, to suggest that some projects should precede others, or perhaps consider this as a project selection criterion.
3. Regarding the Selection Committee, TPB should ensure that transportation providers be well represented on the Committee. This may present a challenge, as many providers will likely submit proposals for consideration.

WMATA appreciates the opportunity to comment on this important document.

Very truly,

Nat Bottigheimer, (Acting) Assistant General Manager  
Dept. of Planning & Joint Development



## **Appendix 3: Focus Group Participants**

**JARC Focus Group Participants  
February 24, 2007**

<b>Name</b>	<b>Jurisdiction</b>
Jose Castillo	Washington, D.C.
Jose Castillo, Jr.	Washington, D.C.
Melanie Harper	Alexandria, VA
Gloria Jurado	Washington, D.C.
Rebecca Munoz	Washington, D.C.
Tijwanna Phillips	Washington, D.C.
Janice Sousa	Alexandria, VA
Rhonda Sykes	Takoma Park, MD

Phone interviews were conducted with two Northern Virginia residents on March 29, 2007:

Michelle Hardy  
Alisha Sowell

**New Freedom Focus Group Participants  
March 8, 2007**

<b>Name</b>	<b>Jurisdiction</b>
Darnise Henry Bush	Washington, D.C.
Bruce Hildebrand	Alexandria, VA
Irene Holloway	Washington, D.C.
Doris Matchett	Olney, MD
Susanne Mershon	Alexandria, VA
Oral Miller	Washington, D.C.
Rita Perry	Beltsville, MD
Doug Powell	Falls Church, VA
Elinor Waters	Chevy Chase, MD
David Williamson	Bowie, MD
McKinley Young	Washington, D.C.
Shirley Young	Washington, D.C.
Itta ZaVoni Galmore	Washington, D.C.

Participants represent a range of disability types including:

- Individuals with visual disabilities
- Individuals with physical disabilities (wheelchair and non-wheelchair users)
- Individuals with chronic illnesses
- Individuals with cognitive disabilities

Appendix 4: Regional Demographic Profile of  
Transportation-Disadvantaged Groups  
(from the Plan dated April 18, 2007)

This Appendix provides data from the 2000 Census on the numbers and spatial locations for transportation-disadvantaged population groups that the Coordinated Plan is intended to help serve.

**Transportation-disadvantaged** is defined as populations that lack the financial, physical, or language ability to provide their own transportation and/or have difficulty accessing public transportation.

The population groups included in this Appendix are defined as follows, based on Census data:

- **Below the Poverty Level**
  - Official poverty line depends on family size
  - 1 person = \$8,500/year
  - 4 people = \$17,000/year
- **Low-Income Population**
  - “Low income” defined as twice the poverty line, e.g.
  - 1 person = \$17,000/year
  - 4 people = \$34,000/year
- **Limited English Speakers** Includes individuals who speak English “not well” or “not at all”
- **Persons with Disabilities** includes individuals with physical and/or sensory disabilities
- **Older Adults** are individuals over 65 years of age

The data is provided for the Washington DC-MD-VA Metropolitan Washington Statistical Area (MSA), shown in Figure 4-1, and is a greater geographic area than the TPB planning area and the Washington DC-MD-VA Urbanized Area.

**Figure 4-1: The Washington DC-MD-VA Metropolitan Washington Statistical Area (MSA)**



Table 4-1 shows statistics for transportation-disadvantaged population groups living in the Washington region. Despite the region's overall affluence, over 328,000 residents lived below the poverty level in 2000, and an additional 447,000 residents were classified as low-income, which is defined as twice the official poverty level. In the same year, 629,500 persons had a physical, sensory, and/or cognitive disability (14% of the population). In 2000, over 400,000 people in region were over 65 years of age, 9% of the total population. Individuals with limited English proficiency make up 5 percent of the population; 58 percent of these individuals are members of the Hispanic/Latino community. Although not shown in the table, it is interesting to note that over 40 percent of the region's population is non-white, a figure which includes many recent immigrants to the region.<sup>1</sup>

<sup>1</sup> Our Changing Region. Census 2000. Metropolitan Washington Council of Governments. Volume 1, Number 1. Figures provided are for the TPB Planning Area.

Figure 4-3 shows that the poverty rate for persons with disabilities is almost twice that of the general population. Figures 4-4 to 4-8 show the spatial locations of transportation-disadvantaged population groups in the region.

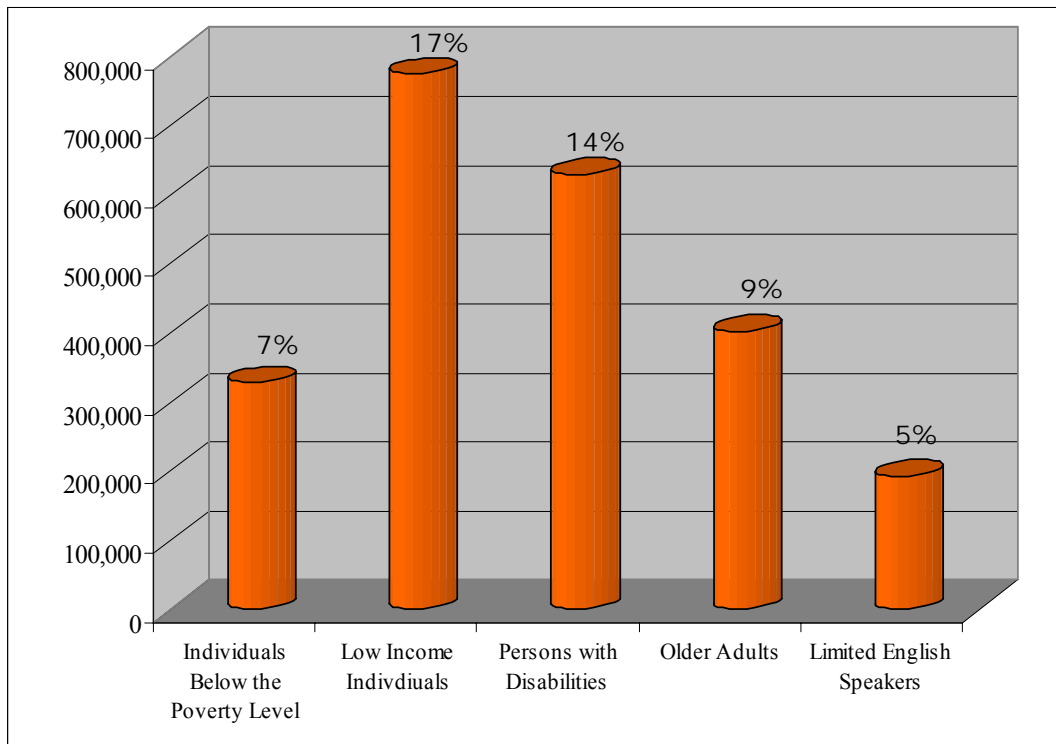
**Table 4-1**  
**Transportation-Disadvantaged Populations in the Washington Region**

<i>Population Group</i>	<i>Washington Region</i>	<i>Percent of Region</i>
Below the Poverty Level (1)	328,300	7%
Low Income (2)	775,300	17%
Persons with Disabilities (4)	629,500	14%
Older Adults (Over 65)	403,000	9%
Limited English Speakers (3)	193,600	5%
Total Population	4,544,900	100%

Source: 2000 U.S. Census; numbers are for the Washington DC-MD-VA MSA

- (1) Official poverty level depends on family size. For a family of four, the poverty level is an annual income of \$17,000.
- (2) "Low income" is defined as twice the poverty level. For example, for a family of four an annual income of \$34,000 is considered low income.
- (3) Limited English Proficiency includes individuals who speak English "not well" or "not at all."
- (4) Include individuals with physical, sensory and/or cognitive disabilities.

**Figure 4-2: Regional Demographic Profile of Transportation-Disadvantaged Populations in the Washington Region**



Source: 2000 U.S. Census; numbers are for the Washington DC-MD-VA MSA

**Figure 4-3: Poverty Rates for Transportation Disadvantaged Groups**

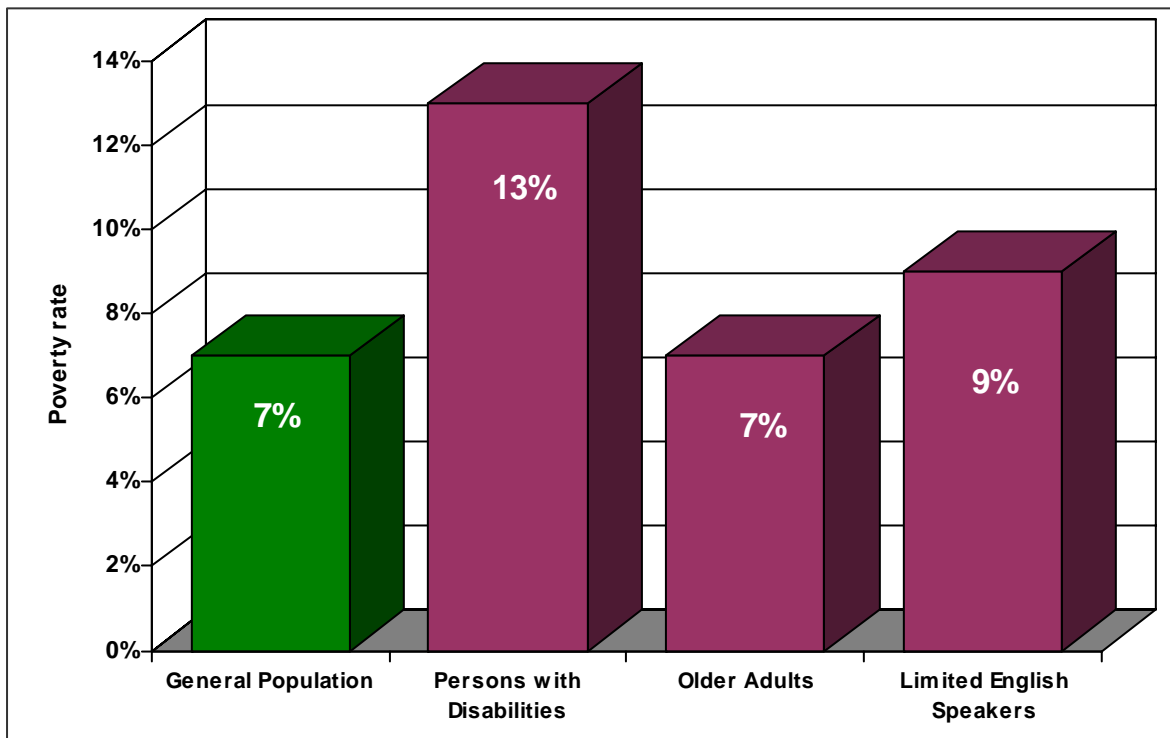




Figure 4-4: Population Below the Poverty Line

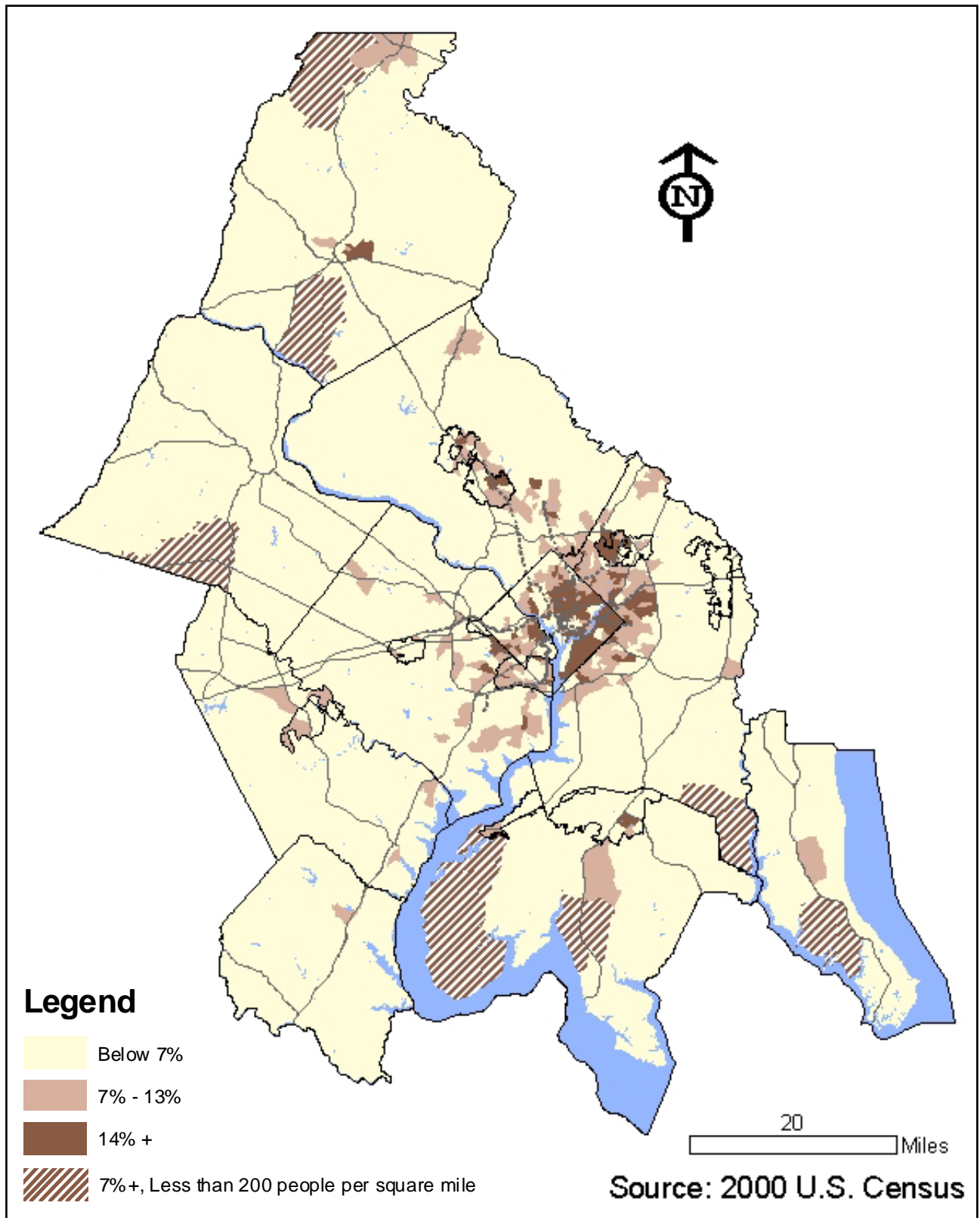
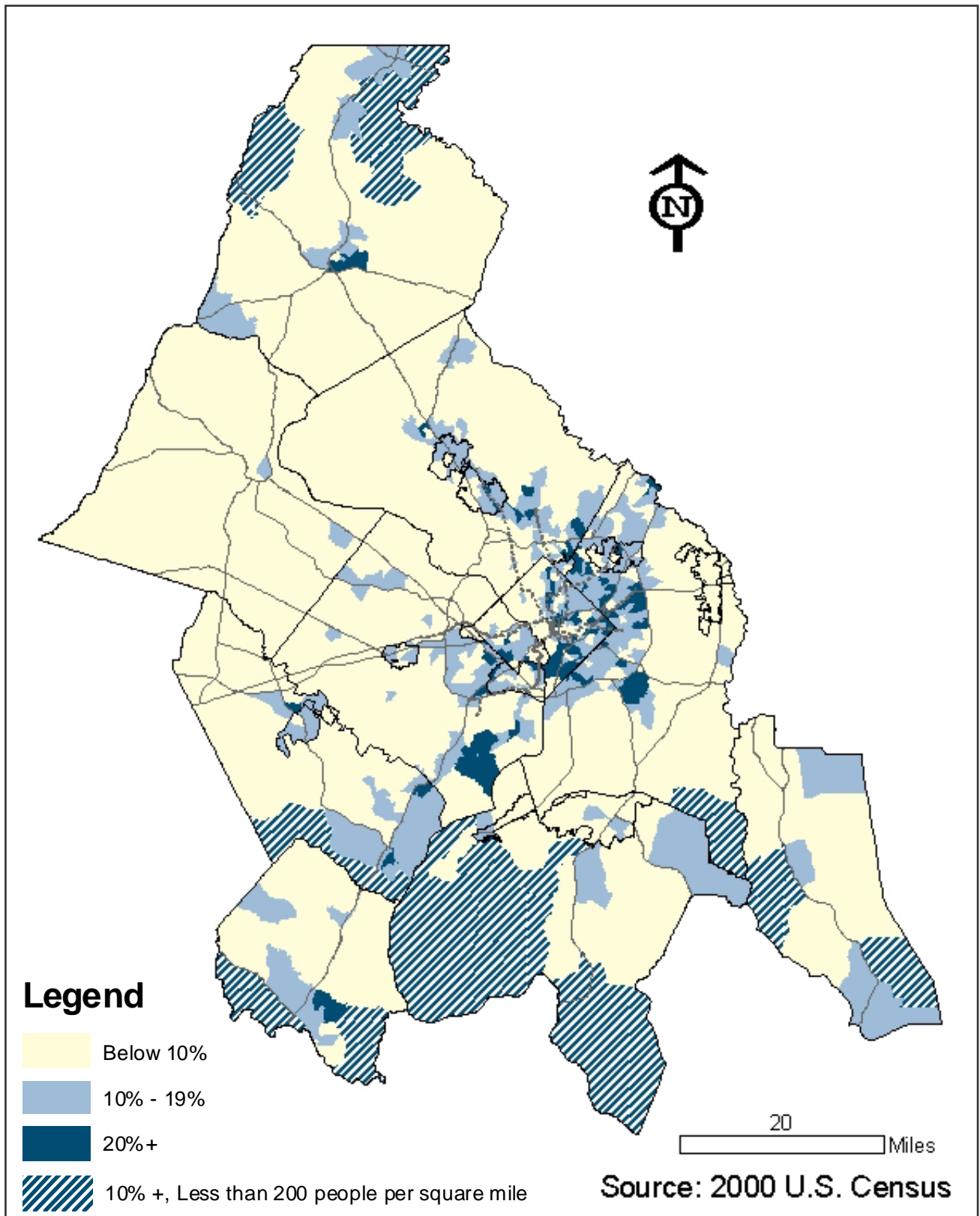
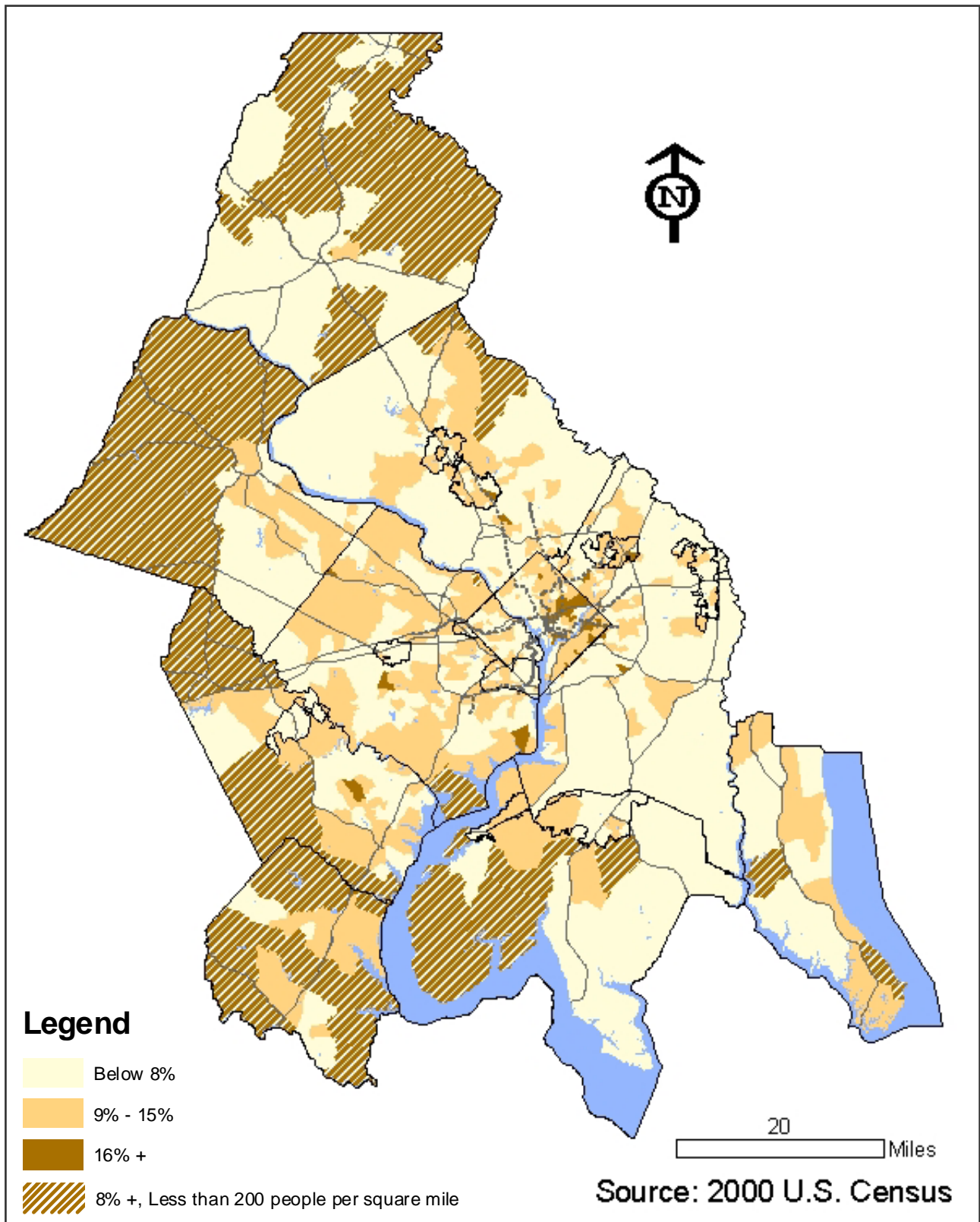


Figure 4-5: Low-Income Population



**Figure 4-6: Persons with Physical and Sensory Disabilities**



**Figure 4-7: Older Adult Population  
(Over 65 years of age)**

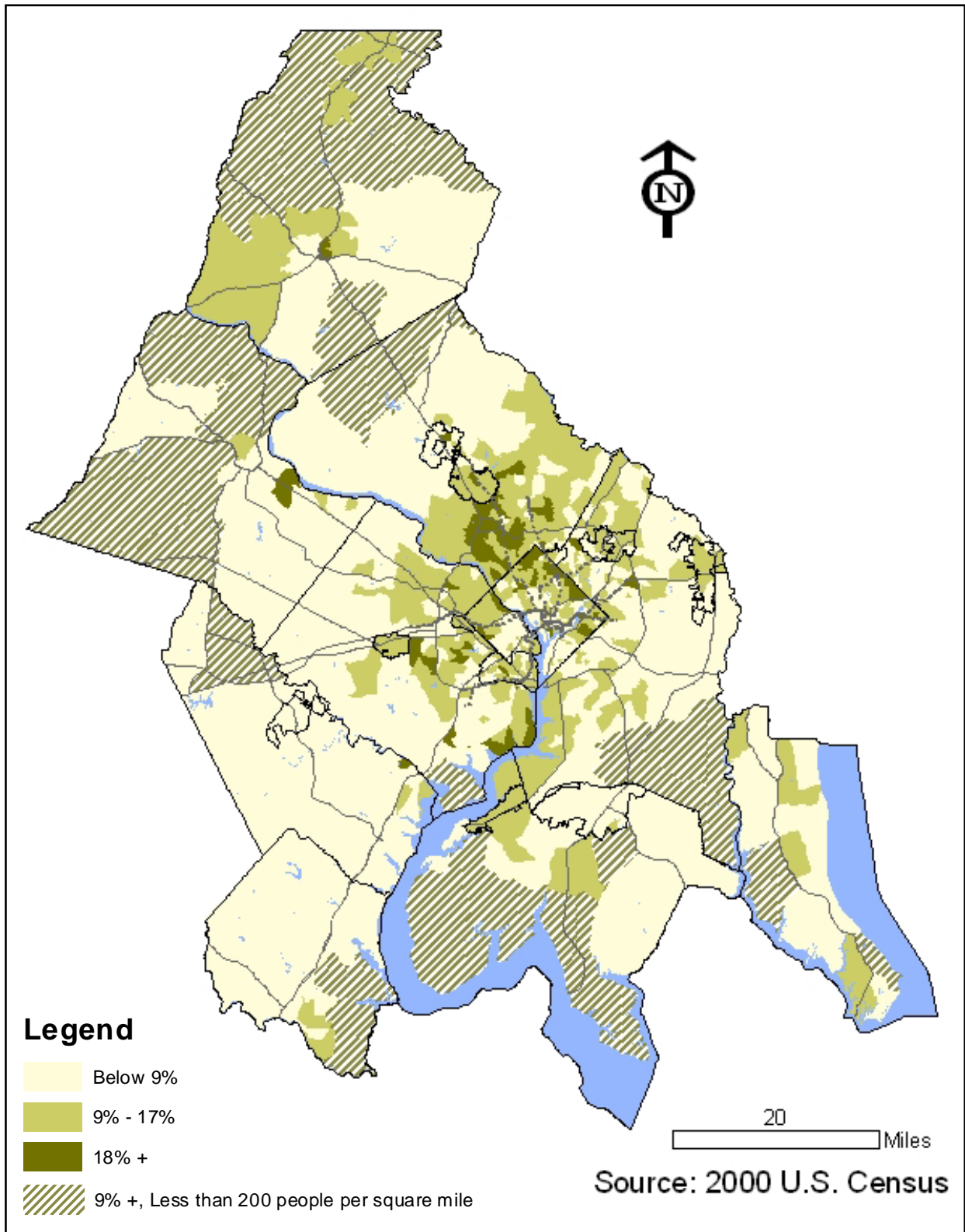
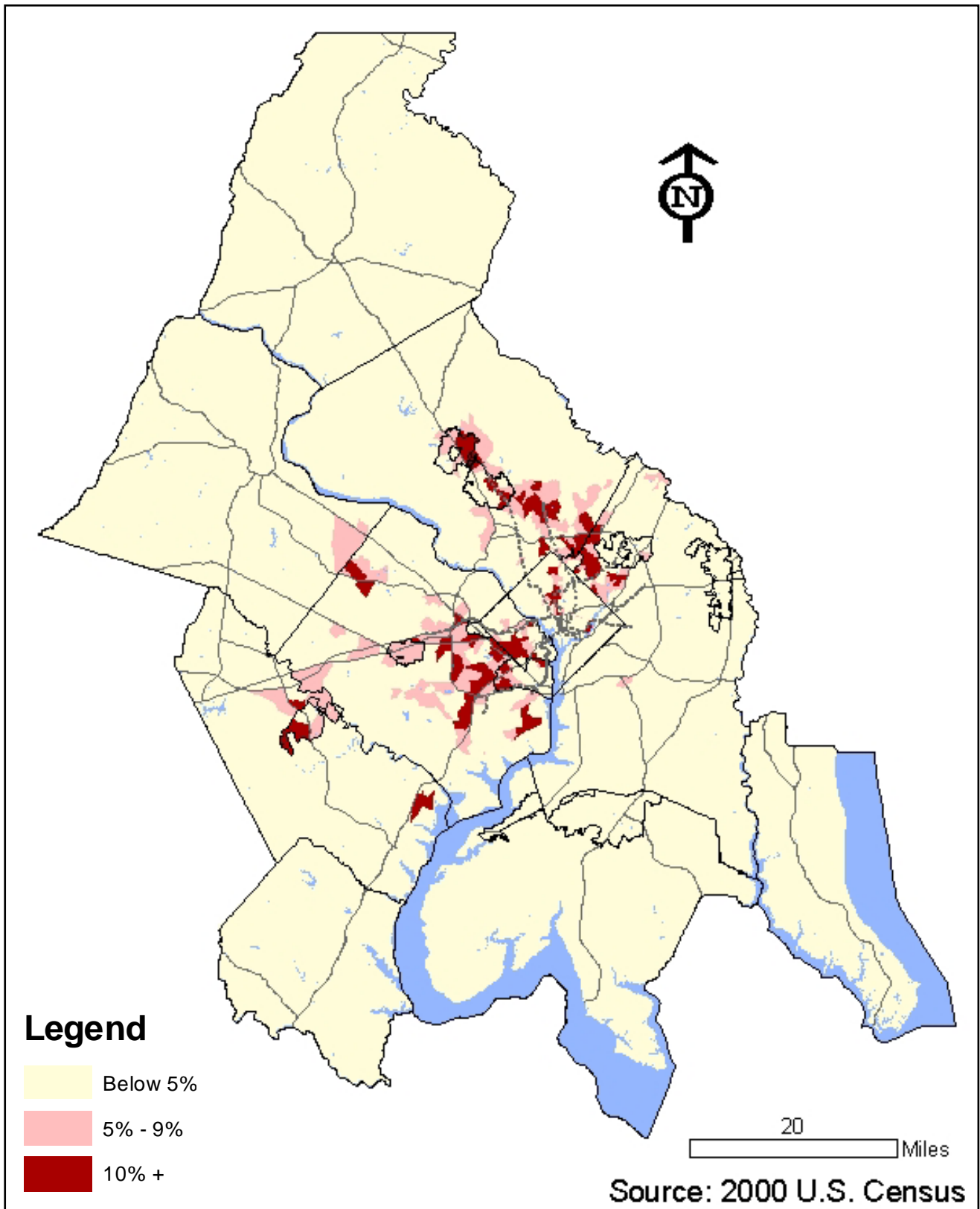


Figure 4-8: Population with Limited English Skills



Appendix 5: Inventory of Specialized Services  
(from the Plan dated April 18, 2007)

**Appendix 5  
Inventory of Specialized Services**

**ALEXANDRIA CITY PROVIDERS**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Vehicles</b>	<b>Funding Programs</b>	<b>Contact Information</b>	<b>Program Fees</b>
City of Alexandria Paratransit Service	ADA eligible	No restrictions	No		Local Funds	703-838-3800	\$2.00 per one-way trip inside Alexandria; \$2.50
City of Alexandria Senior Taxi	Seniors 60+	Medical appts. Grocery shopping	No		Local Funds	703-836-4414 x15	Call for fee
City of Alexandria Senior Van	Seniors 60+	Senior Center Shopping Along van route	Yes	4	Federal aging Local city funds		
City of Alexandria Community Services Board	Developmentally disabled	Day treatment programs	Some services	32	Not available		
City of Alexandria Health Department	Health department clients	Health department sites	Yes	2	Federal State		
DOT Paratransit Senior Van/Trolley		shopping trips	Yes				

**Appendix 5  
Inventory of Specialized Services**

**ARLINGTON COUNTY PROVIDERS**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Vehicles</b>	<b>Funding Programs</b>	<b>Contact Information</b>	<b>Program Fees</b>
Arlington County STAR	MetroAccess eligible No age restrictions	No restrictions	No		County Funds	703-892-8747	\$2.50 - \$7.00 per one-way trip, depending on distance
Arlington County Agency on Aging Assisted Star	STAR users Age 60+	Health care related	No		Federal OAA State Aging County Funds	703-892-8747	Maximum \$10 per one-way trip, plus STAR fee
Arlington County Agency on Aging Senior Loop	Residents of The Carlin, Claridge House, Culpepper Garden and Woodland Hill	Grocery shopping	No		Federal OAA  State Aging County Funds	703-892-8747	No charge
Arlington County Agency on Aging Senior Center Transportation	Seniors	To/from Senior Centers	No		Federal OAA  State Aging County Funds		
Arlington County CSB	Developmentally Disabled	Day treatment programs	No		CSB State		
Arlington County Health Department	Health department clients	Health department related sites	No		Federal SAPT funding NIH funding		
Arlington County Department of Social Services	DSS clients	DSS related trips	No			Not available	Not available
Arlington County Madison Adult Day Health Care Center	Participants of Madison Adult Day Health Center	Trips to support program activities	No			703-228-5340	Sliding fee scale
American Red Cross Arlington Chapter	Seniors 60+ Must not be certified to use	Groceries, medical appts	No			703-527-3010	Donation
SCAT - Senior Center Transportation Program	Seniors 55+  Register with Office of	To/from Senior Centers	No			703-892-8747	\$2.00 one-way; \$4.00 round trip
Super Senior Taxi	Arlington residents Aged 70+	No restrictions				703-228-1700	\$10 for \$20 worth of taxi vouchers
STAR Temporary Eligibility	Age 60+; Temporary condition that prevents driving or using public transportation	Healthcare appointments				703-228-1700	\$2.50 - \$7.00 per one-way trip, depending on distance



**Appendix 5  
Inventory of Specialized Services**

**ST. CHARLES URBANIZED AREA OF CHARLES COUNTY**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Vehicles</b>	<b>Contact Information</b>	<b>Program Fees</b>
Abilities Network 9375 Chesapeake Street Suite 103 LaPlata, MD 20646	Persons with Developmental Disabilities		No		301-392-3554	
Charles County Adult Day Services 10200 La Plata Road La Plata, MD 20646	16+, People with disabilities	Adult Day center, health appts, field trips	Yes	14	301-934-6753	None
Greater Baden Medical Services, Inc. 13605 Baden Westwood Road  Brandywine, MD 20613	Health center patients	Medical appts		Vans	301-888-2233	None
Melwood Horticultural Training Center  12705 Country Lane Waldorf, MD 20601	Adults with Developmental Disabilities	To program or work		12	301-870-6722	None
Smart Ride, Inc. PO Box 1846 Prince Frederick, MD 20678	General Public	All purpose		Vans	410-535-9228	Varies
Spring Dell Center, Inc. 6040 Radio Station Road LaPlata, MD 20646	Adults with Developmental Disabilities	Employment, training Day programs		12	301-934-4561	None
VanGO 8190 Port Tobacco Road Port Tobacco, MD 20677	Seniors (60+), People with disabilities	General purpose  General purpose; limited to no more than 12 one-way trips per month	Yes		301-609-7917	\$1 each way or \$2 all- day pass for ADA- eligible \$1.50 each way

**Appendix 5  
Inventory of Specialized Services**

**DISTRICT OF COLUMBIA PROVIDERS**

Program	Eligibility	Trip Restrictions	Directly Operate?	Contact Information	Program Fees
United Planning Organization Washington Elderly Handicapped Transp. Svcs.	Seniors 60+	Medical Adult Daycare Group trips	Yes	(202) 635-8866	No charge
United Planning Organization Call 'n Ride Taxi Program	Seniors 60+	No restrictions	No		
DC Medical Assistance	Medicaid eligible individuals	Medical	No		
DC Office on Aging Other Nutrition/Senior Services	Seniors 60+	Nutrition	No		
DC Department of Human Services					
DC Department of Mental Health					
Anchor Mental Health Services	Developmentally Disabled	Agency operated job sites	Service ended Seeking to reinstate		
ARC of Washington, DC	Residents	Day programs medical recreational	Yes		
DC Center for Independent Living	Significantly disabled of all ages	Homes to sites only	Yes		
Easter Seals Society					
Friendship House				(202) 675-9050	

## Appendix 5 Inventory of Specialized Services

### DISTRICT OF COLUMBIA PROVIDERS (cont.)

Program	Eligibility	Trip Restrictions	Directly	Contact	Program Fees
Green Door	Mental Health	Doctor, etc.	Yes Also transit use training	(202) 464-9200	
Hospital for Sick Children		Medical appts		(202) 832-4400	
Joseph Kennedy Institute	Developmentally Disabled	School field trips	Yes	(202) 529-7600	
Metropolitan Baptist Church				(202) 238-5000	
National Children's Center				(202) 722-2300	
Senior Citizens Counseling					
Shiloh Baptist Church	Disability	No restrictions	Yes		
Union Temple Baptist Church				(202) 678-8822	

1. Section 5310 recipients in the District that are churches or religious organizations with only one vehicle were not contacted for this study given the small size of their transportation programs. Per DCDOT, this includes 11 agencies.

2. Some DC Medicaid information was derived from CTAA's *Medicaid Transportation: A Primer for States, Health Plans, Providers and Advocates*, 2001

**Appendix 5  
Inventory of Specialized Services**

**FAIRFAX COUNTY, FAIRFAX CITY, AND FALLS CHURCH CITY PROVIDERS**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Vehicles</b>	<b>Funding Programs</b>	<b>Contact Information</b>	<b>Program Fees</b>
City of Fairfax Taxi Subsidy City Wheels	Disabled	No restrictions	No		Local Funds		
City of Falls Church Taxi Subsidy Fare Wheels	Seniors 62+ Disabled Low income	No restrictions	No		Local Funds		
Fairfax County Taxi Subsidy Seniors-on-the-Go!	Seniors 65+ w/ low-mod. income	No restrictions	No		Local Funds	(703) 324-1172	Users pay one-third the cost of the program taxicab scrip
FASTRAN Fairfax County, Fairfax City, and Falls Church	Human service agency clients	Agency services	Yes Purchase as well	141	Mostly local Some State & Federal		
Fairfax/Falls Church Community Services Board	Mental Disab. Alcohol/Drug Services	Agency services	Purchase from FASTRAN and day providers		CSB		

**NORTHERN VIRGINIA MEDICAID**

Virginia Medicaid	Medicaid	Medical	No		Federal - 50% State - 50%		
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**Appendix 5  
Inventory of Specialized Services**

**FREDERICK COUNTY PROVIDERS**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Vehicles</b>	<b>Contact Information</b>	<b>Program Fees</b>
Family Partnership	only Family Partnership participants	dr. appts, DSS, Health Dept, courthouse, other social service agencies		15 & 8 psgr vans	none	Determined by case manager
Frederick Community Action Agency (CAC)	Homeless	M-F, 9am-12 noon; case-by-case trips after noon	yes			
		Has contract with Priority Partners MCO to provide transport	yes			
	CAC clinic patients	CAC has made referral to specialist.	yes			
	Homeless	vouchers for Greyhound service	no			
Chronic Disease	Adults	All travel is in county	No	N/A	Amy Gunnarson 301-600-3369	None
Guys Only After School Program	Middle School Students	All travel is in county	yes	2 vans	Beth Mowery 301-600-3317	None
Infants and Toddlers	Children with disability 0-3 years of age	To and from the Health Department	No	N/A	Monica Grant 301-600-3367	None
Head Start	FCHS enrolled - children	To and From Head Start Center	Yes - Mini-Bus	14	J. Ramsburg	None
	FCHS enrolled - children & families	Various social service / medical transportation	Yes - Minivans	4	J. Ramsburg	None

**Appendix 5  
Inventory of Specialized Services**

Partners in Care	55+ and disabled adults	trips may be local or out of county; individuals must be able to get to vehicles under their own power	a nonprofit utilizing volunteer drivers	individually owned		Emily Kilby, Partners in Care, c/o Dept. of Aging, 1440 Taney Ave., Frederick, MD 21702; 301-600-6008; ekilby@fr edco-md.net	trip costs based on miles traveled
Thurmont Senior Center	60 and over	within 3 miles of Thurmont. Primary: lunch program transportation, but also doctor appts, groceries, etc. Must board & exit bus independently	DOA bus		1	Anna Rollins 301-271-7911 Thurmont Senior Center	\$1 lunch \$2 shop \$2 doctor
TransIT	Public transit	none	Yes		37	Nancy Norris 301-600-3538	\$1.10 general, .55 seniors/p w/disab
	Seniors 60+, persons w/ disabilities	within Frederick County; Seniors 60+ or persons w/disabilities	Yes		21	Nancy Norris 301-600-35398	\$1 one-way medical; \$2 one-way all other
	Medical Assistance	valid Medical Assistance number	Yes		21	Nancy Norris 301-600-3538	Bill Health Dept
Way Station, Inc.	Diagnosis of serious mental illness and functional disabilities.	We provide transportation only to get to and from the program or based on individual client needs.	Yes.		6	Margaret Mulligan, mmulligan@md workforcepromi se.org.	We do not charge for transportation.
Westwoods Geriatric Care Services			Yes				

**Appendix 5  
Inventory of Specialized Services**

**LOUDOUN COUNTY**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Contact Information</b>	<b>Program Fees</b>
Every Citizen Has Opportunities (ECHO) 71 Lawson Road NE Leesburg, VA 20177			Yes	703-779-2100	
Loudoun Area Agency on Aging  102 Heritage Way NE Leesburg, VA 20176			Yes	703-777-0257	
Virginia Regional Transportation Association 109 N. Bailey Lane Purcellville, VA 20132			Yes	877-777-2708	
American Red Cross Loudoun Chapter	Age 60 and over, disabled, or a veteran	No restrictions Must reserve 3 days in advance		703-777-7171	Donation

**Appendix 5**  
**Inventory of Specialized Services**

**OTHER PROVIDERS IN SUBURBAN MARYLAND**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Vehicles</b>	<b>Funding Programs</b>	<b>Contact Information</b>	<b>Program Fees</b>
ARC of Montgomery County (Montgomery County)	Developmental Disability	Homes to vocational/work programs	Yes	24	DDA Private		
CHI Centers (Montgomery County)	Disabled	Senior centers Rehab Employment	Yes	35	DHDM/DDA Medicaid voucher Section 5310		
Jewish Council for the Aging (Montgomery County)	Seniors Disabled	Day Care Community Ctr Satellite prgms	Yes	11	Section 5310 Agency funds		
Jubilee Association of Maryland (Montgomery County)	Adults with developmental disability	No restrictions	Yes Purchase as well	17	CSA Other		
Maryland Division of Rehabilitation Services (DORS) (Montgomery County)	Physical or mental disability	Work or vocational training	No		Federal - 80% State - 20%		
Rock Creek Foundation (Montgomery County)	Mental disability Substance abuse						
Support Center (Montgomery County)	DD Elderly (frail)	Home to center, field Field trips	Yes	6	MD Medicaid State Grant Private		
Ardmore Enterprises (Prince George's County)	Seniors w/ part-time job	To/from jobs, some others	Yes	18	Various state programs		
ARC of Prince George's County (Prince George's County)	Developmental Disability	Homes to vocational/work programs	Yes	65	Section 5310 DDA		
Baptist Senior Adult Ministries (Prince George's County)	Seniors	Not available	Yes	12	Section 5310		
Easter Seals Society (Prince George's County)					Capital: Section 5310		



**Appendix 5**  
**Inventory of Specialized Services**

**OTHER PROVIDERS IN SUBURBAN MARYLAND (cont.)**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operated?</b>	<b>Vehicles</b>	<b>Funding Programs</b>	<b>Contact Information</b>	<b>Program Fees</b>
Maryland Division of Rehabilitation Services (DORS) (Prince George's County)	Physical or mental disability	Work or vocational training	No		Federal - 80% State - 20%		
Melwood Horticultural Center (Prince George's County)	Developmental Disability	Residents to three program sites	Yes	30	DDA Section 5310		
Rehabilitation Opportunities, Inc. (Prince George's County)	Disabled	Homes to sites only	Yes	23	DDA Contractor		
VESTA Foundation (Prince George's County)	Disabled	Medical needs Recreational	Yes	16	DDA Contractor		
Vocational Services (Prince George's County)	Disabled	For work site But any outings	Yes	25	DDA Contractor		

**Appendix 5  
Inventory of Specialized Services**

**PROVIDERS IN MONTGOMERY COUNTY**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Vehicles</b>	<b>Funding Programs</b>	<b>Contact Information</b>	<b>Program Fees</b>
Montgomery County Call 'n Ride Taxi Program	Low inc snrs Low inc disabled	No restrictions	No		County General State SSTAP		
Montgomery County Same Day MetroAccess	ADA eligible	No restrictions	No		County General Fund		
Montgomery County Medicaid	Medicaid eligible	Authorized Medicaid trips only	No		State Medicaid Federal Medicaid		
Montgomery County Program Transportation	Seniors 55+	Senior activity sites, grocery store	No		County General Fund		
Montgomery County Division of Transit Services	Public transit	No restrictions					
Community Services for Autistic Adults and Children	Program participants	To and from work		0		240-912-2220	
Spanish Speaking Community of Maryland	Citizens of Hispanic origin	Special events, demand service					
Leisure World of Maryland	Senior residents	shopping only, demand service					
Bethesda Fellowship House ASSIST						(301) 654-2077	
Winter Growth		Medical, grocery trips				(301) 774-7501	
Jewish Social Service						(301) 770-0901	
Carol Jean Cancer Foundation						(410) 531-0758	
Holy Cross Adult Day Care						(301) 754-7000	
Mark Twain School						(301) 279-4900	
Montgomery County Mental Health Association							
Montrose Baptist Church							
National Lutheran Home							
St. John's Baptist Church							

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**Appendix 5  
Inventory of Specialized Services**

**PROVIDERS IN MONTGOMERY COUNTY**

Program	Eligibility	Trip Restrictions	Directly Operate?	Vehicles	Funding Programs	Contact Information	Program Fees
Montgomery County	Low inc snrs	No restrictions	No		County General		
St. John's Convent							
St. Luke's House							
Friend's House							
Korean Community Senior Housing Corp.							
National Association for the Deaf							
Today's Family							
Total Living, Inc.							
Korean American Senior Citizens Association							
Leafy House							
Victory Housing							
Treatment and Learning Centers							
The Oaks at Four Corners							
Jewish Foundation for Group Homes							
The Family Services, Inc.							
Montgomery County Catholic Charities							
Montgomery County Division of Elderly Affairs							
National Capital B'nai B'rith Foundation							

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**Appendix 5  
Inventory of Specialized Services**

**PROVIDERS IN PRINCE GEORGE'S COUNTY**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Vehicles</b>	<b>Contact Information</b>	<b>Program Fees</b>
Prince George's County Call-a-Bus	No FR access Pref to snrs Pref to disab	No restrictions	Yes	46 (shared)	301-499-8603	Seniors and persons with disabilities \$.50
Prince George's County Senior Transportation Service	Seniors 60+	Snr activity sites Grocery store Essential shopping	Yes	46 (shared)		
Prince George's County Call-a-Cab	Seniors 55+ Disabled	No restrictions	No		301-883-5656	\$10 for a \$20 coupon book
Prince George's County Municipal Call-a-Bus	Seniors Disabled	No restrictions	No		See below	See below
Prince George's County Medical Transportation	Medicaid eligible	Medicaid eligible trips	Yes Purchase as well	1		
Ace Helping Hands 7057 Palamar Terrace Lanham, MD 20706	Clients only	Medical trips			301-794-4974	
ARC of Prince George's County Headquarters	Clients only	Medical, employment trips	Yes		301-925-2730	
Ardmore Enterprises 3000 Lottsford Vista Road, Mitchellsville, MD 20721	Clients only	Medical, day program	Yes		301-577-2575	
Calmra, Inc. 5020 Sunnyside Avenue, #206	Clients only	Medical trips	Yes		301-982-7177	
Comprehensive Residential Services, Inc. 6120 Breezewood Drive #302 Greenbelt, MD 20770	Clients only	Day program	Yes		301-220-1574	

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Appendix 5: Prince George's County

**Appendix 5  
Inventory of Specialized Services**

**PROVIDERS IN PRINCE GEORGE'S COUNTY**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Vehicles</b>	<b>Contact Information</b>	<b>Program Fees</b>
Prince George's County Dreamcatchers Service 7914 Daniel Drive Forestville, MD 20747	No FR access Clients only	No restrictions Any activity	Yes No	46 (shared)	301-499-8603 301-499-3399	Seniors and persons
Family Service Foundation Deaf/Blind Institute 5301 76th Avenue Landover Hills, MD 20784	Clients only	Medical trips			301-731-6141	
Helping Hands Adult Day Service Capital Heights 5400 Norfield Road Capitol Heights, MD 20743	Clients only	Metro area	Yes		301-736-6622	\$2.50 per trip
Melwood Horticultural Training Center 5707 Dower House Road Upper Marlboro, MD 20772	Clients only	Medical trips	No		301-599-8000	
National Children's Center 6200 2nd Street, NW Washington, DC 20011	Clients only	Medical trips	No		301-722-2300	
We Care Adult Service	Clients only	Medical, recreation employment trips			301-925-1515	
Secure Care Services, Ltd. 12301 Old Columbia Pike Silver Spring, MD 20904	Clients only	Medical, employment trips			301-625-2406	
SEEC 8905 Fairview Road Silver Spring, MD 20910	Clients only	No restrictions			301-576-9000	\$2.50 per trip
United Cerebral Palsy 4409 Forbes Boulevard Lanham, MD 20706	Clients only	Any trip in Montgomery or Prince George's County			301-459-0566	

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Appendix 5: Prince George's County

**Appendix 5  
Inventory of Specialized Services**

**PROVIDERS IN PRINCE GEORGE'S COUNTY**

Program	Eligibility	Trip Restrictions	Directly Operate?	Vehicles	Contact Information	Program Fees
Prince George's County	No FR access	No restrictions	Yes	46 (shared)	301-499-8603	Seniors and persons
Prince George's County Division of Adult/Geriatric Health	Persons on medical assistance	No restrictions			301-856-9555	Seniors 55+ \$.50 All others \$1.00 subject to availability
Medical Assistance Transportation						
City of Bowie	Residents only	Any activity  2 weeks in advance	Local Call-a-Bus Service		301-809-2300	\$.25 each way
Town of Capital Heights	Seniors  Disabled	Any activity  2 weeks in advance	Local Call-a-Bus Service		301-336-0626	\$1.00 within 5-mile radius; \$2.00 within 10-mile radius
Town of Glenarden	Residents only	Any activity  5-mile radius of city	Local Call-a-Bus Service		301-265-8475	\$2.00
City of Greenbelt	Anyone	Any activity  24 hours in advance	Local Call-a-Bus Service		301-474-4100	\$1.00
City of Hyattsville	Anyone within 8-mile radius	Any activity before 1:00 pm the day before	Local Call-a-Bus Service		301-985-5020	\$2.00
City of Laurel	Anyone  not wheelchair accessible	Any activity  No weekend service	Local Call-a-Bus Service		301-498-3693	\$25.00 a year
City of New Carrollton	55+	Any activity  Within 5-mile radius 9 am - 2:30 pm	Local Call-a-Bus Service		301-459-6103	\$2.00
City of Seat Pleasant	Seniors	Any Activity	Local Call-a-Bus Service		301-336-2600	No charge
College Park	Seniors and Disabled	Any Activity; must call the day before 4/18/07	Local Call-a-Bus Service		301-345-8100	No charge

**Appendix 5  
Inventory of Specialized Services**

**PROVIDERS IN PRINCE GEORGE'S COUNTY**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Vehicles</b>	<b>Contact Information</b>	<b>Program Fees</b>
Prince George's County	No FR access	No restrictions	Yes	46 (shared)	301-499-8603	Seniors and persons
Town of Bladensburg, Cottage	Seniors	Any activity, from 9 am	Local Call-a-Bus		301-277-4920	\$1.00
City of Fairmount Heights	Seniors and Disabled	Any activity within 8-mile radius 8:30 am to 3:30 pm	Local Call-a-Bus Service		301-925-8585	\$2.00
City of District Heights	Seniors and Disabled	Any activity; 9 am to 5 pm	Local Call-a-Bus Service		301-336-9402	No charge

**Appendix 5  
Inventory of Specialized Services**

**PRINCE WILLIAM COUNTY**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Vehicles</b>	<b>Funding Programs</b>	<b>Contact Information</b>	<b>Program Fees</b>
<b>Omni Link</b>	All; seniors 60+ pay reduced fare	No restrictions	Yes			888-730-6664 (703) 730-6664	\$.50 one way (reduced fare)
<b>LogistiCare Solutions, LLC</b>	Medicaid enrollees with transportation coverage	To/from medical appointments	Yes		Medicaid	866-386-8331 / 866-966-3326	No
<b>Helping Hands</b>	All	No restrictions	Yes	7		703-743-2158	Fees depend on
<b>Dafre Transportation</b>	All	No restrictions	Yes	3	Private	703-680-0987	\$65/hr - van;
<b>Security Care, Inc</b>	Medicaid clients	To/from medical	Yes	5	Private	703-361-0877	Fees depend on



**Appendix 5  
Inventory of Specialized Services**

**STAFFORD COUNTY**

<b>Program</b>	<b>Eligibility</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Funding</b>	<b>Contact Information</b>	<b>Program Fees</b>
Stafford County Department of Social Services	DSS clients	DSS related trips	No	Local / PRTC Federal OAA	540-658-8720	None
Rappahannock Area Agency on Aging - Medical Transportation	Seniors 60+ / Disabled	Healthcare related	Yes	State Funding Local / PRTC United Way	540-371-3375	\$1.50 per trip
Rappahannock Area Agency on Aging - Meal Center Transportation	Seniors 60+ / Low-income	To/from Senior Centers Grocery shopping	Yes	Federal OAA State Funding Local / PRTC United Way	540-371-3375	None
Rappahannock Area Community Services Board	Developmentally Disabled	To/from Day Support Programs	Yes	Medicaid Local / PRTC	540-373-6374	None
LogistiCare	Eligible Medicaid recipients	Non-emergency Medical Transportation	N/A	Medicaid	866-386-8331	N/A

**Appendix 5  
Inventory of Specialized Services**

**Taxi Providers**

<b>Program</b>	<b>Eligibility</b>	<b>Jurisdiction</b>	<b>Trip Restrictions</b>	<b>Directly Operate?</b>	<b>Vehicles</b>	<b>FY03 Operating Cost</b>	<b>Contact Information</b>	<b>User Fees</b>
Action Taxi		Montgomery Co.		Yes			301-840-1000	
Barwood Taxi	General public	Montgomery Co.	No restrictions	Yes			(301) 984-1900	
Cavalier Cab Co.	General public	Loudoun Co.	No restrictions	Yes			703-777-5959	
Diamond Transportation Service	General public	Alexandria	No restrictions	Yes			703-912-7606	
Loudoun Yellow Cab	General public	Loudoun Co.	No restrictions	Yes			703-437-9100	
Loudoun Taxi & Sedan	General public	Loudoun Co.	No restrictions	Yes			703-421-4500	
Red Top Cab	General public	Arlington Co.	No restrictions	Yes			703-522-3333	
Regency Cab		Montgomery Co.					301-990-9000	
Silver Spring Taxi	General public	Montgomery Co.	No restrictions	Yes			301-495-6900	
Yellow Cab Co.			No restrictions	Yes			202-544-1212	
Taxi-Cab Discounts	55+ or Disabled		Any	Yes			703-525-0900	10% discount on fare

Appendix 6: TPB Resolution on the Update to the  
Coordinated Human Service Transportation Plan for  
the National Capital Region

**NATIONAL CAPITAL REGION TRANSPORTATION PLANNING BOARD**  
**777 North Capitol Street, N.E.**  
**Washington, D.C. 20002**

**RESOLUTION APPROVING THE UPDATE OF THE COORDINATED HUMAN SERVICE TRANSPORTATION PLAN FOR THE NATIONAL CAPITAL REGION**

**WHEREAS**, the National Capital Region Transportation Planning Board (TPB), the metropolitan planning organization (MPO) for the Washington Region, has the responsibility under the provisions of the Safe, Accountable, Flexible, and Efficient Transportation Equity Act - A Legacy for Users (SAFETEA-LU) for developing and carrying out a continuing, cooperative and comprehensive transportation planning process for the Metropolitan Area; and

**WHEREAS**, under SAFETEA-LU projects funded by three Federal Transit Administration (FTA) human Service transportation programs: Elderly and Persons with Disabilities (Section 5310), Job Access and Reverse Commute (JARC) (Section 5316), and New Freedom (Section 5317) must be derived from a "locally developed, coordinated public transit-human Service transportation plan" and JARC and New Freedom projects must be selected on a competitive basis; and

**WHEREAS**, in July 2006 the TPB established the Human Service Transportation Coordination Task Force to oversee the development of the Coordinated Human Service Transportation Plan and a competitive selection process for identifying projects for JARC and New Freedom funding in the National Capital region; and

**WHEREAS**, in August 2006 the TPB was designated by the Mayor of the District of Columbia, the Governor of Maryland, and the Governor of Virginia as the recipient to administer the JARC and New Freedom programs in the Washington DC-VA-MD Urbanized Area; and

**WHEREAS**, the first Coordinated Plan was developed under the guidance of the task force which included the active participation from representatives of public, private and non-profit transportation and human Service providers and participation by membership of the public who provided insight into local transportations needs and strategies for improvement; and

**WHEREAS**, the Coordinated Plan also includes the selection criteria to be used in the competitive selection process of JARC and New Freedom projects and to inform the selection of Elderly and Disabled Individual Program (Section 5310) projects administered by the District of Columbia, Maryland and Virginia Departments of Transportation; and

**WHEREAS**, the Coordinated Plan, the selection criteria and the process for a competitive selection process was adopted by the TPB at its regular meeting on April 18, 2007 (R22-2007); and

**WHEREAS**, the TPB adopted five projects for funding under the Job Access Reverse Commute (JARC) and New Freedom Programs at its regular meeting on September 19, 2007 (R6-2008) after the TPB's first solicitation for projects held May 1 through June 30, 2007; and

**WHEREAS**, the TPB adopted twelve projects for funding under the Job Access Reverse Commute (JARC) and New Freedom Programs at its regular meeting on June 18, 2008 (R25-2008) after the TPB's solicitation for projects held January 8 through April 30, 2008; and

**WHEREAS**, the TPB adopted ten projects for funding under the Job Access Reverse Commute (JARC) and New Freedom Programs at its regular meeting on June 17, 2009 (R37-2009) after the TPB's solicitation for projects held February 4 through April 29, 2009; and

**WHEREAS**, the TPB Human Service Transportation Coordination Task Force met on September 10, October 8 and November 12 to provide guidance on the update of the Coordinated Plan; and

**WHEREAS**, the Coordinated Plan was revised to reflect the current unmet transportation needs and lessons learned from the TPB's three years of project solicitation experience so that better direction can be provided to prospective applicants in submitting competitive proposals; and

**WHEREAS**, the attached update to the Coordinated Plan dated December 16, 2009 includes the following changes (which are bolded in the table of contents): an Executive Summary was added, and revisions were made to Section 3: Assessments of Needs, Section 5: Strategies for Improved Service and Coordination and Section 6: Recommended Priority Actions.

**NOW, THEREFORE, BE IT RESOLVED THAT** the NATIONAL CAPITAL REGION TRANSPORTATION PLANNING BOARD approves the Update to the Coordinated Human Service Transportation Plan for the National Capital Region.

Appendix 7  
Competitive Selection Criteria

## Description of Selection Criteria

Criteria	Definition and Possible Score	Total Score
<p><b>1. To what extent does the project respond to the strategies identified in the Coordinated Plan?</b></p>	<p>Projects that address multiple strategies will make better use of limited funding and will be weighted more heavily. This criterion considers two issues: how many strategies does the project address (there is a total of four), and how well does it address them? Each strategy addressed should be rated on a scale of 1 to 4, with the maximum of 16 points indicating the project would respond well to each of the four strategies.</p> <p><b>Maximum Possible Points: 16</b></p>	
<p><b>2. To what extent does the project demonstrate coordination among various entities?</b></p>	<p>Service delivery is better where projects are developed and operated with the cooperation and coordination of jurisdictions, agencies, and interested stakeholder organizations. The criterion is defined by multiple jurisdictions, agencies, or stakeholder organizations involved in the project. A maximum score of 16 would be awarded for a project that has three or more partners each in program planning, operations, communications and funding.</p> <p><b>Maximum Possible Points: 16</b></p>	
<p><b>3. To what extent does the project demonstrate a new or innovative idea that can be replicated elsewhere in the region?</b></p>	<p>Projects that comply with the spirit of SAFETEA-LU are those that combine new and innovative ideas, new technologies, and creative sources of financing to address currently unmet needs. Projects that succeed in meeting unmet needs and can be replicated in other jurisdictions are weighted higher. To the extent an existing program demonstrates innovation and replicability (by other jurisdictions or agencies) it would score well in this category. A score of 11 points would be awarded for a project that employs a new and innovative idea and demonstrates excellent prospects for feasibility of replication.</p> <p><b>Maximum Possible Points: 11</b></p>	
<p><b>4. To what extent does the project meet a regional transportation need?</b></p>	<p>Jurisdictions may differ in the services they provide, but the need for programs that address the four strategies identified above is regional. “Regional” means that the project is not limited to single geographic area and ideally would serve the entire urbanized area. Programs that are focused regionally will be scored higher than those that are limited in geographic scope. Projects that are proposed as a pilot project should include narrative of how the proposed project serves a regional need. The maximum 11 points would be awarded to projects that reveal both a comprehensive region-wide service area and distribution of trips provided.</p> <p><b>Maximum Possible Points: 11</b></p>	

Criteria	Definition and Possible Score	Total Score
<p><b>5. To what extent does the project involve the private sector?</b></p>	<p>Cost-effectiveness is often accomplished with the involvement of the private sector and, as such, they are important partners in project planning and development. This criterion will consider the extent to which private sector is involved in the project – such as in service delivery or project sponsorship (i.e. employer-based van pools). A maximum of 10 points will be awarded for the most involvement by private sector partners.</p> <p><b>Maximum Possible Points: 10</b></p>	
<p><b>6. How many individuals with disabilities and/or with limited-incomes does the project propose to serve or benefit?</b></p>	<p>Applicants will be asked to estimate how many individuals with disabilities and/or individuals with limited incomes the project proposes to serve in the first year. The number of individuals can be estimated in the project proposal, and usage statistics could also be asked for, such as the average number of monthly one-way trips the program hopes to provide. For an infrastructure improvement, an estimate of the number of people living around the improvement who are expected to use it could be provided. Points will be assigned based on the relative number of people to be served or trips expected to be provided.</p> <p><b>Maximum Possible Points: 11</b></p>	
<p><b>7. To what extent does the application identify reasonable strategies for on-going funding?</b></p>	<p>The limited funding available under SAFETEA-LU requires that projects identify other sources of funding to sustain operations in future years. Projects that have identified reasonable strategies for sources of on-going funding after the first grant will be scored the highest.</p> <p><b>Maximum Possible Points: 11</b></p>	
<p><b>8. How feasible is the project?</b></p>	<p>The criterion will explore the feasibility of a project in terms of budget, resources and institutional or administrative support. Does the proposal identify and secure the necessary financial, human and institutional capacity to make the project happen? The more feasible the project proposal, the higher the project will score with this criterion. Success is critical for the coordinated planning efforts and for future appropriations of JARC and New Freedom funds.</p> <p><b>Maximum Possible Points: 14</b></p>	
	<p><b>TOTAL POSSIBLE POINTS: 100</b></p>	