Region 8
2011 Local Human Service Transit Coordination Plan

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Adopted by:
Southwest Regional Development Commission (SRDC)
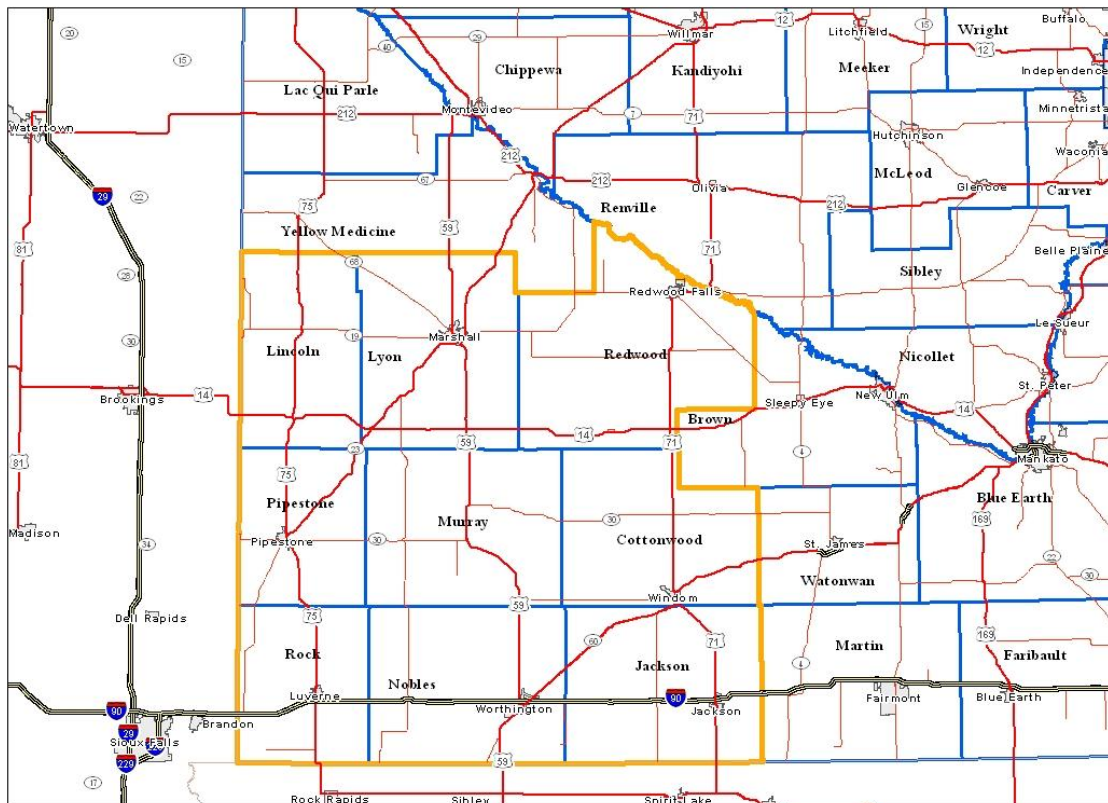 adopted November 10, 2011, addendium approved July 12, 2012

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Executive Summary

The focus of this Plan was human service transportation coordination with a special emphasis on transit dependent populations in Southwest Minnesota identified as: people in poverty, minority population, limited English proficiency, persons 65 and older, zero vehicle households, and low wage jobs. The largest concentrations of the transit dependant populations identified above are located in the communities of Luverne, Worthington, Jackson, Pipestone Marshall, Tracy and Redwood Falls; the majority of which have support services such as shopping, medical, social services, housing, retail or access to retail, and local human service offices.

The majority of the public transit systems provide service within their system boundaries and the majority has work day service hours (8am -5pm range). The system limitations (hours and service area) are a challenge for many people to use for daily work related trips, especially those who live outside a county seat. Key destinations beyond transit system boundaries are also a challenge for transit dependent people. While public transit serves all nine counties, persons in rural outlying areas may find it difficult or impossible to use public transit (the bus) to get to work on a daily basis. Coordination of appointments and errands such as grocery shopping may be one way to maximize use of the transit bus while providing access to goods and services.

Marshall and Worthington will continue to be the Key Destinations within Region 8; however for goods and services not available in Southwest Minnesota, the Key destinations will continue to be Sioux Falls, Spirit Lake, Willmar, Mankato, and the Twin Cities.

Key to coordinated transportation is bringing key players to the table and getting on the same page. This means agreeing on transit coordination issues, collectively identifying and implementing ways to resolve issues, using the same taxonomy, and increasing the awareness of both providers and the transit dependent.

Projects identified to achieve this include the organization of a Regional Ride Coordination Council (a larger regional body that can provide direction for coordination implementation) and a Regional Transportation Collaborative (primarily staff who work with providing or arranging for rides and who are envisioned to assist in the implementation of projects); education was seen as a big factor in transit coordination for transit providers, the Department of Human Services providers and perspective transit users, as well as volunteer driver training; of more direct impact to the transit dependent are mobility assistance volunteers trained to help riders use transit with personal assistance, trip coordination for less wait time by clients and maximizing use of the bus, consistent contract rates to provide continuity between systems, and maintaining a fleet with lift accessible vehicles. Data, technology, and web based communication/scheduling was seen as a need to increase coordination and communication.

[1]2012 Addendum to the 2011 Coordination Plan. By serving all citizens the benefit could be directly to a veteran, their dependents, and survivors; or indirectly by serving all, it will create the volume/demand needed to help implement the project and serve Veterans.

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[1] Addendum applies to the entire 2011 Coordination Plan. The Veteran Service Officers were asked about benefits to Veterans at the May 7th, 2012 Transit Coordination meeting and they provided the statement for the addendum for the Plan. Addendum approved by the SRDC Full Commission on July 12, 2012.

Introduction

The goal of transit coordination is to enhance transportation access by minimizing duplication of services and facilitating the most appropriate and cost-effective transportation possible with available resources. The purpose of human services public transit coordination is to improve transportation services for persons with disabilities, older adults, and individuals with low incomes by ensuring that communities maximize the use of transportation resources funded through public and private sources.

This document is an update of the 2006 Public Transit – Human Service Coordination Plan for Southwest Minnesota and will assist stakeholders as they determine ways to coordinate transit services in Region 8. The 2011 Region 8 Local Human Service Transit Coordination Plan is a technical analysis that evaluates existing transportation services in Region 8 and assesses strengths and weaknesses of transportation service provision among public transit agencies, social service agencies, and other providers. The plan also records public outreach efforts and stakeholders' preferred strategies and projects to improve transportation coordination in Region 8.

A Local Human Services Transit Coordination plan is a federal requirement under the Safe Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU). Federal regulations state that projects eligible for funding under the Transportation for Elderly Persons and Persons with Disabilities (Section 5310), Job Access and Reverse Commute (Section 5316), and The New Freedom Initiative (Section 5317) programs must advance strategies identified in a Local Human Service Transit Coordination Plan. This planning process fulfills federal requirements by engaging transportation providers, social services agencies, and members of the public in identifying strategies for regional transportation coordination.

Beyond fulfilling federal requirements, this planning process encouraged representatives of diverse organizations to join together in articulating specific projects that could advance coordination strategies in Region 8. Through public outreach activities, stakeholders brainstormed project ideas and refined these ideas in a collaborative setting. The final project list reflects input of a broad range of regional stakeholders and provides a 5-year blueprint for future coordination efforts in Region 8.

Plan Process

The goal of the 2011 Region 8 Local Human Service Transit Coordination Plan is to identify coordination strategies that will improve transportation services' ability to serve the unique needs of the elderly, persons with disabilities, and persons with low incomes. This planning process combines a needs assessment with public outreach tools to identify strategies for improved human services transit coordination in Region 8. An overview of the plan's key elements is described here.

Needs Assessment

The needs assessment establishes baseline conditions in Region 8 by analyzing demographic trends and identifying available resources for human services transportation. Key elements of the needs assessment include:

- Identifying and analyzing regional demographic and transportation trends

- Mapping transit-dependent demographic groups, existing transit services, and key regional destinations

- Developing an inventory of public, private, and non-profit transportation provider capabilities and resources

Public Outreach

Public outreach activities informed the strategies and projects identified in this plan. Public outreach occurred during two steering committee meetings held on April 5, 2011 and June 23, 2011 and a public workshop held on May 25, 2011.

The plan steering committee closely guided plan decision-making. Steering committee duties included:

- Evaluating strategies and assessing outcomes of projects identified in the 2006 Public Transit – Human Service Coordination Plan for Southwest Minnesota.

- Developing project ideas and identifying priority strategies as part of the public workshop

- Prioritizing project ideas identified at the public workshop for inclusion in the final plan

Steering Committee Membership

The steering committee was made up of representatives from public transit agencies, county human service agencies, area agency on aging representatives, and others. Members included:

Steering Committee Membership	Organization / Representing
Beth Bartels	Rock County Opportunities / Sect 5310
Betty Stancer	Service Enterprises, Inc / Sect 5310
Bev Herfindahl	MN DOT District 8 / MN DOT
Brenda Meyer	Social Service Transportation provider
Brian Frodermann	Love In the Name of Christ / other
Cara Nielsen	Lincoln County Transit / Public Transit
Cathleen Amick Bonnie Nielsen	Community Transit (WCA) / Public Transit
Don Pankratz	Cottonwood County DAC / Section 5310
Natalie Seehausen	Social Service Transportation provider
Janice Klassen	MN DOT District 7 / MN DOT
Joleen Johnson	Redwood Area Hospital / Health Care Provider
Karen DeBoer	Nobles County Transit / Public Transit
Linda Halbur Ted Stamp	Southwest Center for Independent Living / Social Service Transportation provider
Linda McCorquodale	Southwest Private Industry Council / Work Force Center
Marc Hall	Pipestone Transit / Public Transit
Michelle Miranowski	Murray County Transit / Public Transit
Cathy Nelson	Tyler DAC, ECCO in Tracy / Section 5310
Terrie Gulden	Rock County Transit / Public Transit
Kelly Thongvivong	Cottonwood County Transit / Public Transit
Robin Weis	Minnesota River Area Agency on Aging / Area Agency on Aging
Craig Myers	Cottonwood – Jackson Family Service Director / County Family Service (FSA) agents
Chris Sorenson	Lincoln, Lyon, Murray Family Service Director / County FSA agents
Randy Ehlers	Rock County Family Service Director / County FSA agents
Nichole Names	Pipestone & Nobles Family Service Agency Director / Co FSA agents
Patrick Bruflat	Redwood Family Service Agency Director / County FSA agents

Strategy Identification and Plan Adoption

In addition to the steering committee, the Southwest Regional Development Commission (SRDC) hosted a public workshop on May 25, 2011 to incorporate input from all interested stakeholders. A total of twenty-six (26) people attended, listed in Appendix A. At the workshop, stakeholders identified strengths and weaknesses of transit coordination in the region. Building from these, stakeholders then identified priority strategies for transit coordination and collectively strategized project ideas that could address these strategies. Using input gathered at this workshop, the steering committee prioritized the projects and strategies included in the final plan. The draft list of strategies was posted on the SRDC website by July 1, 2011. The draft plan was distributed and available on the www.swrdc.org website to stakeholders for public comment between August 11th and October 31, 2011. Presentation and public meetings on the plan were held as follows: SRDC Transportation Committee on August 3, 2011; Southwest Minnesota Discharge Planners August 11, 2011; SRDC Full Commission September 8, 2011; SRDC Transportation Committee November 7, 2011; SRDC Full Commission November 10th this plan was adopted by the Southwest RDC on November 10, 2011.

Needs Assessment
Regional Background

Region 8 is located in the southwest corner of Minnesota, bounded by South Dakota and Iowa on the west and south respectively. There are nine (9) predominately rural counties (Rock, Nobles, Jackson, Pipestone, Murray, Cottonwood, Lincoln, Lyon, and Redwood) encompassing 5841.6 square miles; 80 cities, 163 townships, and one federally recognized Native American Tribe. Forty-six percent of the Region's population resides in either the rural areas or in communities under 1000 in population.

The 2010 Census identifies Marshall and Worthington as Micropolitan Areas with populations of 25,857 and 21,378 respectively. [2] The two communities serve Region 8 as Trade Centers as well as hosting many medical facilities and providing goods and services. Beyond the Region, Trade Centers and Medical facilities, and satellite facilities that serve the Region are: Sioux Falls, SD (<20 miles), Spirit Lake, Iowa (<20 miles), Mankato (55 miles), Willmar (52 miles), and the Twin Cities. While there are medical facilities and hospitals located within the region, major medical facilities and specialists are primarily located outside Region 8 in cities identified above.

The Region is served by seven public transit systems, about nine charter providers, at least four private STS providers, and one intercity bus line provider. Geographic barriers to providing transportation tend to be state lines (Iowa and South Dakota), county boundaries, transit system boundaries, as well as low population density in rural areas and small communities throughout the region.

Region 8 has a strong reliance on goods-producing industries like agriculture and manufacturing, which gives the region a competitive advantage in many industry specialties, including: Food Manufacturing, Machinery Manufacturing, Animal Production, Crop Production, and Transportation & Warehousing, but it also has made the regional economy more susceptible to recessionary periods. In the last 15 -20 years the Region has seen an increase in the renewable energy industry along with the associated jobs.

Large employers and employment centers are often in the county seats, and most of the larger employment expansions have also occurred in or near the county seats.   It is not unusual in rural Southwest Minnesota for a commute to work to be 30 to 40 miles. Employment growth is difficult to predict. Unique to Southwest Minnesota is a very strong entrepreneurial spirit, as evidenced by the very high number of businesses with fewer than 20 employees, and the growth in new entrepreneurs. According to the U.S. Census County Business Patterns from 2005, 89.7% (4,794 out of 5,343) of the employers in the 14-county region (Region 8 and 6W) of Southwest Minnesota had less than 20 employees.

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[2] A micropolitan statistical area must have at least one urban cluster of at least 10,000 but less than 50,000 population. The largest city in each metropolitan or micropolitan statistical area is designated a "principal city." Source: US Census Bureau.

There were also 11,900 "non-employers" in the region in 2005 (an increase of 590 self-employed workers since 2002), and 284 new business start-ups in 2002.[3]

Over the past three decades, our aging population has continued to grow in comparison to the total population. Approximately 20% of the population is age 65 years or older, which has lead to a growing demand for health care and social assistance services. The aging population also makes healthcare and social assistance a vitally important service to the area and a growing source of jobs. Both public and private-run nursing and residential care facilities are established in Region 8, while offering a career ladder for employees.

The Southwest Region is home to an aging workforce and a consistently declining population, which leads to a very tight labor force where fewer workers are competing for jobs. Large numbers of youth leave the area, to seemingly more attractive areas. While the reasons for leaving the area vary, most often quoted is lack of career opportunities, and the opportunity to earn more somewhere else.

Generally, wages in Southwest Minnesota are lower than the rest of the state. The median hourly wage in Region 8 is $12/hour, compared to $15.25/hour statewide. The ability to pay for transportation is impacted by wages. Families needing transportation to daycare and work can easily spend one to two hours of wages per day on transportation leaving very little for other necessities such as rent and groceries.

Enrollments at Southwest Minnesota State University & Minnesota West Community and Technical College continue to increase each year, producing new graduates with many of the region's required skills. In contrast, many rural K-12 school districts are facing declining enrollments and tight budgets, leading to painful cuts and sometimes disconnects from business and workforce needs.

Key destinations involve places that provide goods and services as well as jobs.

- Major retailer / shopping centers within Region 8 are Marshall, Worthington, Jackson, Windom, Redwood Falls, and Pipestone. Beyond Region 8, major destinations are Sioux Falls, South Dakota, Spirit Lake, Iowa, Mankato, Willmar, and the Twin Cities.

- Library and Government Centers: Each of the nine county seats is a destination for county business transactions (Luverne, Worthington, Jackson, Pipestone, Slayton, Windom, Ivanhoe, Marshall and Redwood Falls). The Plum Creek Library System has libraries in each of the county seats as well as a few satellite cities within Region 8. A bookmobile service is available once per week in four of the nine Counties, and is sponsored by Redwood, Cottonwood, Murray, and Pipestone Counties for those unable to travel to communities with a library.

- Key medical facilities within Region 8 are in Marshall and Worthington. While there are medical facilities and hospitals located within the region, major medical facilities and specialists are located outside of Region 8 (Sioux Falls, South Dakota, Mankato & Willmar, Twin Cities & Rochester – listed nearest to farthest distance). In 2007, Denny

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[3] Entrepreneur data Source: Building Upon, Expanding, and Strengthening the WIRED Framework in SW MN.

Sanford gifted $400 million to the Sioux Valley Hospitals and Health system, many branches of which are located in Region 8 and which have undergone name changes to Sanford Health. Sanford serves a 60,000 square mile 4 state area (SD, MN, NE, IA) and is the largest health care facility between Rochester and Denver. Region 8 has seen improvements in the health care community throughout Southwest Minnesota as evidenced by both Avera and Sanford, two healthcare networks who have made substantial investments to improve healthcare and the healthcare workforce in the region.

Transport to medical facilities varies and is dependent on where one resides and the location of the medical facility. Within a well served public transport system, the bus may be available; some transit systems also have volunteer drivers – however the volunteer drivers do not have lift accessible vehicles. Self drive, family and friends are often used, a Special Transportation Service provider is often called (but may not accept the trip if it is not cost effective for them), and ambulances also transport to the medical facility. Return trips from medical facilities can be a challenge. Most of the public transit systems do not travel beyond the system boundaries which can be problematic to accessing services out of the county and if affordable lift accessible transportation is required. Many nursing homes have vehicles (some have lifts and some do not); however, public transit is often used for doctor office trips, instead of the facility vehicle.

While transportation to medical facilities can be a challenge, often it is the return trip which may be after hours of a transit provider that poses a challenge, especially for persons requiring a lift accessible vehicle.

- Colleges & vocational schools are key destinations because students often commute to these facilities, and are located in Pipestone, Worthington, Marshall, Redwood Falls, Jackson and in nearby Canby in Yellow Medicine County, Marshall and Pipestone have bus transportation within the community. Community Transit, a public transit system serving Marshall, works directly with the college to determine routes and times transportation is needed for the students. The Marshall campus also has a high number of disabled students who rely on public transit.

Students who live beyond the traditional service areas normally drive themselves or rely on friends and neighbors. Some students can avoid commutes by taking advantage of technology and taking classes on-line. Minnesota West has several campuses throughout the region and offers classes in multiple locations via video conference classes as well as on-line alternatives.

- Employment. Key employment destinations are where the larger employers are located: Worthington, Marshall, Jackson, Pipestone, Edgerton, Windom, and Chandler, and workers commute from surrounding areas to those locations. Commuting is often single vehicle or a non-formal shared ride / car pool. There are many small employers both in communities and scattered throughout the rural areas where people commute to. Again the usual mode of transportation is single vehicle or shared ride.

When workforce availability issues became a hardship for two employers in the Southwest Region, they hired buses and bused employees to work from nearby counties and states.

Transportation and Demographics

Population density. The 2000 population in Region 8 was 121,717, which dropped to 119,151 in 2010, or a population density change of 20.8 persons per square mile to 20.4. The 2010 Census indicates that 60% of Region 8's population resides in incorporated places which range in size. Three of the Region's cities have populations over 5,000 (Marshall 13,680, Worthington 12,764 and Redwood Falls 5,254) and account for 27% of the Region's population; another 14 communities have populations ranging from 1000 to 4999 and account for another 27% of the population; 63 communities have population below 1000 (Kinbrae with the smallest at 12) and account for 16% of the population. The Lower Sioux Community had a population of 419.

The two largest cities (Marshall and Worthington) have increased population in the last ten years. Appendix B-1 represents the population density in Region 8 in 2000. Those census tracts with the highest population density identified on the map include communities with a population exceeding 1000, or have two communities whose combined population exceeds 1000.

Population density often is an indicator where there are larger numbers of people who are transit dependant, and are often where public or private transit is the most viable (access to a larger number of people traveling to places in close proximity).

Poverty. In 2000, the majority of the geographic area had a range of 0.5 to 5.5 households per square mile in poverty (Appendix B-2). There were however 12 census tracts with higher density ranges: 5.6-40 households in Redwood Falls and Jackson; 40.9 – 76.0 households in Redwood Falls, Marshall, Tracy, Pipestone, Luverne and all three Census Tracts in Worthington; Census tracts in Marshall and Pipestone showed the greatest level of poverty with a density range of 76.1 to 103.7 households per square mile.

The highest concentrations of poverty according to 2000 Census data are in Marshall, Pipestone, Worthington, Luverne, Tracy, Redwood Falls and Jackson (or located in seven communities where 39% of the Regions 2010 population reside). There may be a need for further analysis of affordable transportation transit availability and options in these communities.

CENSUS 2000: MINORITY POPULATION 2000

Minority Population in 2000

Source: U.S. Census Bureau

Minnesota = 11.8%
1.2% to 4.0%
4.0% to 8.0%
8.0% to 11.8%
11.8% to 37.3%

Minority populations. Initial 2010 Census reports indicate a minority population more than doubling (increase from 7000's to 15,703). The 2010 Census indicates the predominant ethnicity of the non white population in Region 8 is Hispanic and Asian.
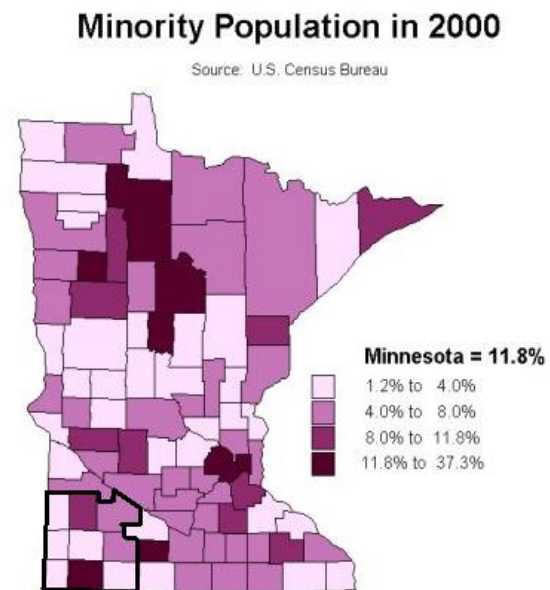
Appendix B-3 depicts 28 Census Tracts in the SW Region where the minority population is 0 to 1.9 persons per square mile. The remaining 12 Census Tracts are located in regional cities as follows: Marshall, Redwood Falls, Luverne, and Jackson each have a Census Tract with a minority density population of 2.0 to 33.0, Pipestone has two tracts; Marshall, Tracy and Worthington each have a Census Tract with a density of 33.1 to 80.4; and Worthington has two Census Tracts with a minority population density per square mile of 80.5 to 154.8.

In 2000, the highest concentrations of minority populations in the Region 8 were in Worthington, Tracy, Marshall, Pipestone, Jackson, Luverne, and Redwood Falls.

In 1990, the minority population made up 1.3% of the region's population; in 2000 the percentage had increased to 5.8%. More minority residents reside in communities (7.5%) than in rural (2.3%) areas of the Region. In-migrants – or "New Minnesotans" – have become an increasingly important source of growth for the region, providing new customers and new employees for businesses, as well as new students for local school districts. In many areas, the total population would have declined even more if not for the influx of residents from different races and origins.

The 2000 US Census Data states the Hmong grew the fastest of the Asian or Pacific Islander race groups. Minnesota Hmong population in 2000 was 45,443, of which 26,234 Hmong are foreign-born, while the largest concentration of Hmong in the United States is in St Paul; the next largest concentration of Hmong in Minnesota is in Lyon County. Cultural factors are important in relation to transportation. It is reported that Hmong prefer to travel with friends and relatives they know. Hmong men will not travel in a car with Hmong women who are married. Hmong women also do not invite other Hmong men to travel with them, but they will travel with other Hmong women. There is a public transit bus route in Lyon County to Tracy where there is a high concentration of Hmong.

There are also significant numbers of foreign-born Hispanic or Latinos in Nobles County. We anticipate Region 8 to continue to experience increased racial and ethnic diversity. Walnut Grove grew faster than any other city in the region, adding 45% to its population from 2000-2010. Walnut Grove has a high Asian population, but is only 2% Hispanic (any race).

Limited English Proficiently (LEP) populations. Appendix B-4 identifies 29 Census Tracts in Region 8 have a range of 0 to 1.1 persons per square mile who have limited English Proficiency (LEP) as identified in the 2000 Census. There is an increased concentration of people with LEP in the following Census Tract locations: Pipestone (two tracts), Luverne, Jackson, Marshall, and Redwood Falls at 1.2 to 17.2 people per square mile; Marshall, Tracy and Worthington at 17.3 to 44.5 people per square mile; and two tracts in Worthington at 44.6 to 104.6 people per square mile.

In the Southwest Region 2001 Targeted Transit Study, language was identified as a barrier to using public transit. The Census data indicates that there are an increased number of residents in Region 8 who have difficulty speaking English. The United States Census identified the number of people, age five and older who speak English and another language. In 1990, 4.2% of the age five and older population set spoke English and another language; of that number, 1.8% spoke English less than "very well". In 2000, the percentages had increased to 6.8% and 3.1% respectively.

During a spring 2010 tour of the JBS Swift and Company plant, the company shared some statistics about their 2300 employee workforce: 60 languages are spoken in the plant and 36 countries are represented. At a focus group meeting in Worthington, four of the most common languages besides English were identified as Spanish, Lao, Burmese and Karen.

Persons age 65 and older. Appendix B-5 represents 35 Census Tracts in Region 8 that have a senior population density range of .2 to 114.8 persons per square mile. Five Census Tracts, located in the following communities have the most number of seniors per square mile: Worthington, Luverne, Pipestone, Marshall and Tracy.

Southwest Minnesota is home to an aging population and a changing economy. Nearly 20 percent of the regional population is aged 65 years or older, prompting the continued growing demand for healthcare and social services. While some specific areas are experiencing small growths in population, most of the region is experiencing a decline. All areas are conscious that their population is aging, highlighting the need to create viable economies that would encourage more young people to move back – or out – into rural Minnesota. The pressure will be on to "grow old gracefully," as the region will be far ahead of its time in supporting an older population and labor force.

The median age of the population in Region 8 is growing older.   In 1990, the median age of the residents in the Southwest Minnesota counties, ranged from 31.6 (Lyon County) to 41.4 (Lincoln County), The 2000 Census revealed that the median age of residents in all of the Southwest Minnesota Counties has increased from 1.6 years to 4.1 years, bringing the median age range from 34.0 (Lyon County) to 43.0 (Lincoln County). The median age range for male and female also differs, 32.5 male and 35.4 female in Lyon County and 41.3 male and 45.1 female in Lincoln County.

Zero-Vehicle Households. Appendix B-6 represents households with zero vehicles. The vast majority of the geographic areas in Southwest Minnesota households have vehicles. Twenty-nine Census Tracts have households 0-1.9 households per square mile without vehicles; five Census Tracts in Region 8 have 2-16.5 households per square mile without vehicles (Redwood Falls, Jackson, Worthington, Luverne, and Pipestone; two Census tracts (Marshall and Pipestone) have 16.6 to 22.3 households per square mile without vehicles; and four Census tract (Redwood Falls, Marshall, and two in Worthington) have 22.4 to 34.4 households per square mile without vehicles.

In 1990, there were 3041 households (6.4%) with no vehicles, by 2000, the number of households in Southwest Minnesota decreased to 2948, or 6.1% fewer households with no vehicles, however, the percentage of households with no vehicles only decreased by 0.3%. while households and population decreased, the number of people who commute to work was 9.5% higher in 2000 than in 1990.

Drive alone. The percentage of individuals commuting to work alone decreased from 75.4% in 1990 to 73.2% in 2000. However, total numbers of commuters driving alone increased.

Car-pool. Both the actual number and the percentage of individuals car-pooling increased from 1990 to 2000 (10.6% to 11.5%).

Public Transit or Taxi. Use of transit or a taxi increased from 0.4% to 0.8% from 1990 to 2000.

Travel time to work. In 1990, the average length of time for the commute to work ranged from 11 to 16 minutes. The 2000 Census data revealed an increase in commute time, ranging from 13.5 minutes to 20.1.

When fuel prices increased in recent years, the transit systems reported they had an increase in ridership. Often economics dictates the mode of transportation and tradeoffs – such as convenience versus wait time for a bus or shared ride.

Distribution of Low Income Workers and Low Wage Jobs. Appendix B-7 indicates the vast majority of low wage jobs are located in six of the nine county seats (Marshall, Redwood Falls, Pipestone, Luverne, Worthington, and Jackson) and in Tracy as indicated by the darker Census Tracts on the map. These areas depict monthly earnings of $1250 and under. The remaining county seats (Ivanhoe, Slayton, and Windom) are within Census Tracts that have a significant number of low wage jobs and low income workers.

Low income wage earners indicate they have fewer resources to spend on transportation to work and other basic needs. Marshall and Pipestone and Jackson, Luverne, Redwood Falls have public transit, Worthington has a taxi with reduced fare if the ride is arranged through the public transit. Slayton, Windom, and Ivanhoe all have county transit systems; however, the Cottonwood and Community Transit also provide transportation in the county and job related transit within the community may be challenging at times.

Transportation Provider Inventory Findings

Throughout the months of March through May 2011, the SRDC distributed an inventory survey meant to capture service information for all public, private, school district, human service, and non-profit transportation providers in the region. The inventory includes information such as fleet size, vehicle capacity, passenger eligibility requirements, and service cost; this information provides a source of comparison across agencies and a means to identify service gaps. To complete the inventory, the SRDC sent an on-line questionnaire to 119 of the region's transportation providers in the spring of 2011. Fifty-nine responses were returned, however due to the nature of some of the transportation providers they submitted more than one response to reflect different transit services. A full record of responses to the questionnaire is available in two formats at www.swrdc.org . A directory listing of providers who responded to the survey is available in Appendix C.

There were 59 survey responses; 17 were public, three private providers, 10 private non-profit, eight day training and habilitation (DT&H), nine health care, five senior facilities, one religious organization, two veteran service officers and four human services.

The survey asked about vehicle ownership, personal vehicles and shared use, the responses indicated that:

- Mini vans were owned by nursing homes, schools, DT & H, and a few of the rural schools.

- Small and medium size buses were owned primarily by public transit systems and DT & H Facilities.

- Some large buses were owned by nursing homes, but the majority of the large buses were owned by school districts.

- Personal vehicles are used for clients at the development achievement centers, human services, and one nursing home indicated use of personal vehicles.

- Shared vehicles – human services may use a county vehicle, but not for clients, some vehicle sharing between a Section 5310 and public transit, mostly when there is a vehicle breakdown.

Hours of Service was asked in the survey.

- Public transit systems. Many begin service between 7 am and 8 am, which would make it difficult for work trips if beginning at 8 am, several systems ended their days in the 4 to 5 pm time frames which would make it difficult for a worker with traditional work hours (8 am to 5 pm) to get to work and home or to get errands completed as groceries or picking children up at day care, completed before the transit system closed down. Prior to the mid 1980's, many of the counties in Region 8 had senior buses. In the late 1980's and early 1990's Region 8 and the Southwest Area Agency on Aging assisted in the start-up of public transit systems, so all counties in Region 8 were covered by public transit. It is interesting to note that the senior living facilities that responded to the survey also have their vehicles used between 8 am and 5 pm, similar time frames of the public transit system hours, which may be a reflection on the hours the old senior buses were used. To enable workers to use public transit for employment trips, the hours of the transit systems need to allow for pick up and destination on a timely basis .and beyond the current ride availability hours.

- Day training & habilitation (DT&H) do have start times within the time frame of public transit, however their trip boundaries are often beyond where the transit systems currently go (or are located in a outlying community – such as Tyler and Tracy) – and do not work in with the public transit system schedule. Return trips are also within the time frames of public transit.

- Head Start – has unique needs and was not considered when coordinating transportation trips.

- Schools do have buses running earlier than the public transit systems. Many of the private providers that responded were providers for the schools districts. New to the process was being informed that parents may not arrange with public transit to provide rides to school children for school related trips, including after school activities. This will hinder the ability of rural school children to participate in school activities and place scheduling burdens on parents when arranging transportation for their children. There currently is no restriction placed on Pre-school children.

Coordination that occurs.

- There is an occasional sharing of a Section 5310 vehicle with a public transit system.

- Most of the public transit systems in the Region 8 provide transportation to county human service agencies, rides on the bus or through volunteer driver systems.

- Some of the public transit systems work with their county veteran service officers to provide rides to veterans. The Lyon County Veterans Office will be acquiring a new van (post inventory information) and has been coordinating with Western Community Action.

- Transportation to medical facilities: The Lincoln County Transit System assists in coordinating medical appointments in South Dakota communities to maximize the utilization of the bus. The Marshall and Redwood hospitals coordinate with the transit system to assure rides for discharged patients. Western Community Action works to coordinate volunteer driver trips so there are multiple passengers (reducing the need for multiple trips with single riders as well as reducing the cost of the trip).

Gaps in service

Business and service hours of most public transit systems do not allow transit to work for an 8:00 to 5 or 5:30 pm job, nor rides to basic needs (grocery, day care, drug store) after traditional work hours.

Door through Door service. An individual identified their parent needed this type of transportation and it was difficult to find.

Lift accessible vehicles (and drivers) after transit system hours and holidays. An example is nursing homes often have vehicles but not the staff available to take a resident to an appointment or back to the facility from the appointment.

Institutional barriers to coordination

There is a lack of understanding family service agency programs and services and transportation provider's needs and requirements to provide safe reliable rides; lack of consistent implementation of the Department of Human Services (DHS) Access Transportation requirements among family service agency staff. Data privacy is often cited as the reason a ride cannot be shared. Entitlement attitude of some individuals on public assistance needing a ride also hinders coordination. Differences between the medical plans (i.e. UCARE and others) requirements hinder the ability to schedule trips in advance to coordinate a trip. insurance agents interpret insurance agency guidelines differently.

Inventory Summary

Services that are least and most costly per passenger The survey indicated that public schools have costly transportation, $50 to 60 per ride. Head Start is the least costly at $4 per ride and public transit services varied between $6 in Nobles County to $40 in Lincoln County, with several responses in the $12 to $16 range.

Funding sources of services vary by provider. The Day Training and Habilitation (DT & H) facilities derive the funds for transportation primarily from state and county funds; one response indicated sources also included individual pay and church funding.

Family service agency funding is a combination of federal, state and county funds.

Passenger needs/eligibility requirements compared with service availability / level of service The DT & H, school, head start, and senior living facilities who own and use their vehicles often are utilizing their vehicles at the same time as public transit and eligibility is limited to specific cliental. Public transportation in the region is available to the public, however some of the providers indicated it was only available to the residents in their service area. Most county wide transit systems have service beginning at 7-8 in the morning and ending at 4-5 in the afternoon. An exception would be Community Transit that has extended hours both in the morning and evenings which can accommodate to and from work with errands. Three public transit systems have one to two day weekend service: Community Transit, Rock County Heartland Express, and Pipestone Transit.

Administration and office staff time in providing transportation The responses in the survey indicate nursing home staff takes a little under 10 minutes per client to arrange for transportation each month. A senior living facility indicated it takes under 20 minutes per resident per month. The DT & H's all have varying numbers of consumers, but all take less than 10 minutes per consumer to arrange for transportation. All the above have vehicles available to assist in client transportation. Family services indicated it takes 4 to 4.5 hours to arrange for a ride per client. Family services do not have vehicles (other than staff cars) to make ride arrangements.

Coordination in Southwest Minnesota Coordination works best when programs are understood and there are similar structures and fees in multiple counties. Lincoln County coordinates rides to medical facilities in South Dakota to maximize the use of the bus. Many of the public transit programs use volunteer drivers to provide a ride where using the bus is not needed or not cost effective. Western Community Action has staff that can provide volunteer driver training and offers this resource to other counties for their drivers. It works when a program leader supports coordination and is willing to let another agency or program take care of arranging rides (maximizing use of resources).

Barriers The obstacles are many and range from federal and state rules and regulations to misunderstood and misinterpreted rules and regulations to reluctance to embrace change. Lack of communication is one of the first obstacles that needs to be addressed and became very clear in the development of projects in the draft 2011 Plan.

Outcomes since the Region 8 2006 Public Transit – Human Service Transit Coordination Plan

Another component of the needs assessment is an analysis of the Region 8 2006 Public Transit Human Services Transit Coordination Plan. The 2006 Plan was the first local human services transit coordination plan to be conducted in this region, and includes a list of strategies and projects for improving transit coordination. The 2011 steering committee reviewed these strategies and projects and assessed regional progress on transit coordination since 2006. The group also identified causes for success and barriers to action regarding project implementation. The complete list of 2006 strategies and projects and an assessment of their outcome is presented below. Italicized type in the table indicates a further explanation of actions since the adoption of the 2006 plan.

Region 8's 2006 Public Transit – Human Service Transit Coordination Plan Assessment

Action	Some Action	No action	Priority Strategy 1. Develop mobility management model, based on criteria and identified gaps for public transit and human services coordination in Southwest Minnesota.
			Strategy 1: Seek Funding to Develop Mobility Management model in SW Minnesota
x	x	x	a. Seek funding to plan the development of a Mobility Management model, sources may include: New Freedom, Section 5310, and JARC funding
x	x		*New Freedom – Western Community Action submitted two applications for funding, one was funded. while the funded pilot is still operating, they do not have continued NF dollars for operation as other systems seem to have in MN*
x	x		*Section 5310 – There have been new vehicles since 2006 (Cottonwood Co DAC) – replacement vehicles.*
		x	*JARC – no funded applications*
			Strategy 2: Develop Mobility Management model for SW Minnesota.
		x	a. Clarify / define the meaning of Mobility Management and its needs in Southwest Minnesota
		x	b. Define Service Area(s) of Mobility Management (within SW and with the rest of the state)
	x		c. Identify the existing barriers that prevent Mobility Management from being implemented
		x	d. Define Mobility Manager roles – include but not limited to:
		x	• Problem solver
	x		• Develop common standards – area wide for everything (i.e. Volunteer Driver Training)
	x		*Through previous Community Service/Services Delivery grant funding from Western Community Action (WCA), the SRDC visited each of the transit systems with*

action	some action	no action	
			volunteer drivers to determine how volunteers were recruited, what training they had, and paperwork – i.e. background checks, medical checks, vehicle inspection, etc. WCA went to Worthington to train volunteer drivers.
	x x		• Work with medical community, to define needs and role with transit coordination *Lincoln Co public transit works with the Brookings, South Dakota medical community to consolidate rides. The system contacts the medical facility with the names of transit system riders and the medical facility is able to rearrange medical appointment to allow ride coordination.* *The steering committee identified the need to make sure the larger medical groups and EMS providers are involved with this plan. Discussion also involved use of Ambulance after hours and non-ambulatory needs.*
x x x	x x		• Develop a Marketing and Education Plan *Locally, the public transit systems have marketing plans; collectively there is not a lot of activity.* *The SRDC updates a brochure every 1-2 years of transit providers and related services, the brochure is shared with transit systems and others for information on services available.* *Transit systems are included on www.minnesotahelp.info which is updated, at a minimum, annually*
	x x		• Advocate for funding, coordinate existing funding sources, and seek new funding. *The SRDC does advocacy for funding and coordination of funding sources and new funding sources with legislators.*
	x x	x x	• Develop a tool for continued gap identification and feedback to systems. *Identified as a need in the State Investment Plan.* *There is no regional tool*
x x		x x	• Develop a tool for evaluation by system users (agency and client) *By individual systems evaluation is done* *Collectively nothing is done, unknown if all systems use the same evaluation tools for evaluation*
action	some action	no action	**Priority Strategy 2. Implement mobility management for public transit and human services transportation coordination in Southwest Minnesota.**
		x	**Strategy #1: Seek funding to implement Mobility Management model.** *No action was done in this strategy because actions in this strategy were not completed. This was meant as a follow up to PS#!, Strategy 2*
		x	a. Seek funding to implement Mobility Management model, sources may include: New Freedom, Section 5310, and JARC

		x	b. Hire and train Mobility Manager(s)
		x	c. Seek training for Mobility Manager (s)
			Strategy #2: Develop a Coordinated Transit System
		x	a. Develop ways for transit systems to increase their coordination with each other *Transit alert was discussed and decided it was developed before the 2006 plan. It is still out there but not used.*
	x		b. Identify options for transit to cross boundaries *This activity is on-going, public transit systems do call each other, but not on a regular basis.*
x	x x	x	c. Develop selection of choices for clients for cost effective rides *This is done somewhat through Hospital / Discharge planners, some transit systems, and through Sr Linkage Line and MinnesotaHelp.info*
	x		• Target larger business for car pools *Private Industry Council had involvement with Suzlon, most businesses do this on their own, Southwest Minnesota Opportunity Council looked into routes for JBS Swift & Company, Businesses want it but do not want to run it.*
		x	• Research Van Pool (i.e. VPSI www.metrocommuterservices.com)
		x	• Assist with Bulletin board posting at businesses for shared rides
			• Research vehicle loan programs
	x	x	• Use Public Funded vehicles, such as Section 5310, when not in use to fill service hour gaps for elderly and disabled individuals. *The Section 5310 funded recipients experience liability issues. If an organization would like to use the vehicle no money can be exchanged for the use of the vehicle, if it does, then there is a liability issue. The 5310 recipient does not have the funding to allow free use (no recoup of costs) of the vehicle.* *Section 5311 programs do not address after service hours in their service plans.*
	x		• Develop coordination or shared vehicle use with organizations that have Section 5310 vehicles or other public funded vehicles to provide affordable transportation people can access beyond current transit system service plan hours and / or boundaries as need is identified *Typically the plans do not provide backup vehicles, but provide backup drivers*
		x	*Nursing Home example discussed – a resident needed trip to medical facility on a holiday. Public transit service is not open, the nursing home had a vehicle, and the family was told they needed to find transport or use the ambulance because the nursing home vehicle was too*

		x	*expensive. The ambulance was very costly; the return trip was by family.* *Potential solution may be using an on-call list of individuals that are trained. Example driver sick/ vacation or job vacancies. Issues to consider are Drug/Alcohol, Insurance issue, restriction.* Research other coordination measures for potential implementation
	x	x	• Advocate shared use with:
	x	x	• The existing 5311 Transit Systems to fill service hour gaps, back up vehicles, etc.
	x	x	• Other organizations that require lift accessible transportation.
x			• When an eligible organization identifies need and applies for a Section 5310 vehicle, other alternatives are to be documented as unfeasible, and the Section 5311 Transit System must identify why they will be unable to fill the transit need before an application will be considered for funding by the MN DOT District Screening Committee
			Strategy #3: Lower the cost of transportation to clients through coordination and information
x x		x x	a. Identify gaps in service hours that can be met cost effectively *Gaps have been identified in the 2006 plan* *Meeting gaps cost effectively was not been identified*
x	x		b. advocate pooling rides *No consistency – data privacy issues*
	x x		c. Seek funding and use of smaller lift accessible vehicles that are more cost effective for service in remote rural areas *Transit systems can use smaller funded vehicles – but they currently cannot be funded through MnDOT* Volunteer Drivers are being used
	x		d. Develop an Education / Awareness Plan which includes: • Acknowledging current behavior patterns and resistance to change • Quality of life for seniors, low income, disabled and public.
	x x x		e. Increase the awareness of local decision and policy makers with consistent data on public dollars spent on transportation and system efficiencies SRDC through local elected officials, Area Transportation Partnership process for vehicle replacement
	x		f. Identify inconsistencies in public information sources • Work with www.Minnesotahelp.info on inconsistencies in database *RSVP and Senior Linkage help provide the updated information for the database.*

	x		• When incorrect / inaccurate data or information on websites is found, contact the website to correct the information or provide link to a website where up to date accurate information is managed.
	x	x	• Work to make phone book listings consistent so users and potential users can find transportation resources. *This has been attempted, but is unsuccessful because the phone book companies list as they want to.*
x	x	x	g. Begin working with other public entities who have transportation needs to fill gaps (i.e. school districts)
	x	x	*Thru the Welfare to Work initiative it was found that school districts require criminal background checks for other riding their buses (obstacle)*
		x	*Public entities are Counties, cities, Southwest Regional Development Commission, public schools.*
x			*School children are not permitted to use public transit. Parents can / do call a transit system to arrange a ride for their children to get to school or other activities.*
x			*Cottonwood Developmental Achievement Center coordinates with the local school district*
	x		h. Seek innovative coordination possibilities
			Strategy #4: Address issues of crossing boundaries to provide quality and seamless service (service area, state lines, funding)
x			a. Identify resources and barriers (time, funding, rolling stock, responsibilities) *The identification has been done in 2006 Plan as well as State Implementation Plan*
	x		b. Educate and inform decision and policy makers on resources and coordination advantages and barriers so gaps can be filled *Education is on-going.*
		x	c. Education for: • Accessing transit for human service agencies, medical community and public. *There is no good awareness of costs and availability, nor outreach, and obstacles that hinder cost effective transit in rural area, such as the "loaded mile" issue for volunteer drivers.*
		x	• HIPAA
		x	• Transit systems on vulnerable adults and sensitivity issues. *Changed it to "Transit providers". Examples of programs that can help are escort / rider companion (escorts ride for free – as stated by MN DOT).* *Appropriate interaction with disabled (physical and mental health issues). Examples shared included: Bus and Volunteer Drivers can be / seem rude to disabled individuals which results in no ride to work, doctor, etc. Some folks cannot control their disability. Disabilities can be physical and / or mental* *General education is needed for drivers – some MNDOT*

			training addresses this. *Day programs and supervision requirements*
	x	x	d. Develop systems with consistent software and hardware for common use, web-based, and training to use it (region-wide and statewide) *There had been an initiative for software use initiated at Western Community Action, but was not implemented among all the systems.* • Identify what technology systems currently have and what works well. • Seek funding to implement technology upgrades for a common use, web-based software program, hardware, and training for its use.
	x	x x x x x x	e. Develop Regional Pool of Volunteer Drivers *Initiated by Western Community Action. The SRDC was contracted with use of a CS/SD Grant to visit and survey all public transit systems with volunteer drivers in the Region. A report was submitted to the public transit systems surveyed, MnDOT District Project Managers, and to Western Community Action, nothing came of it.* • Develop consistent volunteer driver training and management. *Individual systems have their own training and management requirements.* • Develop protocols for volunteers, *Individual systems have their own protocol* • Identify and seek volunteers willing to cross boundaries for extended hours. *Western Community Action – Jackson County and Nobles Transit are working together for Volunteer Driver trips. Calls for out of county trips go through Nobles Transit for them to transfer to Western Community Action, the Taxi is also offered as an option.* • Recruit more volunteer drivers *In the counties where there is a Retired Senior Volunteer Program Coordinator, the Coordinator assists with recruiting volunteers for enrolled stations – if one of the work stations is a transit system, then recruit volunteers who would be willing to be volunteer drivers or rider companions. It is the work station responsibility to do training, and management.* *Some areas need more volunteer drivers.*
			Strategy #5: Increase transit service hours where most appropriate
	x	 x	a. Conduct needs analysis to identify: • Possible use of Volunteer Drivers to extend current system hours. *Discussed* • Identify job related transit gaps which maybe filled with ride share or coordinated transit (beyond current system capabilities)

x	x		b. Develop Pilot Program where most need is identified for extended hours and / or service. *Western Community Action had a pilot project, Southwest Minnesota Opportunity Council has looked into extended hours for JBS Swift & Company employees.*
x			c. Seek funding sources for pilot program in one or two transit systems. *Western Community Action*
		x	d. If volume merits expand to other transit systems. *Information is available to the other public transit systems.*
x x			e. Seek funding from businesses and organization / agencies that benefit from increased service hours. *Western Community Action has increased service hours Other transit providers identified with services with relation to the bars / or public safety: Worthington Taxi, Marshall Sober Cab, Luverne OK Taxi, and Marshall also has a taxi.*
	x		f. Educate public about value of increased hours. *For two years, Southwest Minnesota Opportunity Council has tried to get word out about safe rides. A problem is the city of Worthington tickets cars if they are left at the bars (clarification – the city tickets all cars, regardless of who they are to – equal treatment). SoberCab offers rides both ways.*
Action	**Some Action**	**No action**	**Priority Strategy 3. . Clarify regulations and policies regarding shared / coordinated vehicles, drivers and volunteers.**
	x		**Strategy #1 Identify specific regulations and policies that prohibit or inhibit the coordination of rides.** *Interpretation by of Department of Human Services Access Transportation regulations and implementing them consistently; Vehicle owner liability,(need to) remove vehicle insurance requirements to accept payment / reimbursement for use of vehicle prevents coordination / collaboration; for public transit systems collecting payment / full payment for MA trips can be an administrative challenge, paying transport at a distant MA enrolled provider vs paying the fee for a non MA provider in the area, foster care is similar; medical insurance providers have separate rules and policies dealing with transportation making it difficult for both public transit and care facilities to arrange for / be paid for rides.*
	x		**Strategy # 2 Inform, increase awareness of decision makers of the impact of policies and regulations that prohibit and inhibit the coordination of rides and advocate for change**
x			a. Develop White Paper to share with elected officials, and be used as a legislative platform. Include: volunteer driver liability clarification (risk), HIPAA, etc. *The Area Agency on Aging and the SRDC with the assistance of Western Community Action developed a white paper on volunteer*

			driver insurance liability that was shared with legislators, MnDOT and Department of Human Services in November 2006. The topic was brought by the state agencies to the Minnesota Department of Commerce for clarification. A new volunteer driver insurance brochure was completed by the state in 2008.
x		x	b. Contact the decision makers and allies that can impact the regulations and policies: *Southwest Regional Development Commission and the Minnesota River Area Agency on Aging discuss with policy makers the importance of volunteer drivers, no load miles, etc.* *Public transit systems indicated they contact their policy makers* • Local level: decision and policy makers, allies such as local agencies and public, etc. • State level: Interagency Committee on Transit Coordination (ICTC) – *now called Minnesota Council on Transportation Access*; MN Department of Transportation (MN/DOT); MN Department of Human Services (DHS); Minnesota Department of Health; Minnesota Association of Area Agencies on Aging, MN Department of Commerce (DOC), MN County Insurance Trust (MCIT), League of Cities; Transportation Alliance; MN Transit Association, Association of Minnesota Counties (AMC), etc. • National level: Legislators, Federal Highway Administration, United We Ride, National Association of Regional Organizations. (NADO), etc *The Southwest Regional Development Commission (SRDC) works with NADO*
		x	c. Coordinate forum to increase awareness of the impact of rules and regulations on coordination and costs of rides.
	x		d. Attend Transit Day on the Hill with legislative agenda. *This occurs through the Transportation Alliance, but few public transit systems from Southwest Minnesota attend.*

The Actions that worked were spearheaded by one or more entities and often worked with or improved a program or service. While it is very important to have someone act as a lead, sparkplug, or project champion, it is equally important for a funding source to cover costs (planning, development, and implementation).

Obstacles tend to be State and Federal rules and regulations, but even bigger obstacles is resistance to change, something different, or it was tried before and failed. During the Steering Committees and workshop, it became obvious that terminology was important. Transit providers speak a different language than social service providers common definitions would help clear up misunderstandings.

Summary of Existing Conditions and Needs

The final component of this needs assessment is a stakeholder-generated list of strengths and weaknesses of existing transit coordination efforts. At the public workshop, participants identified strengths and weaknesses of existing coordination efforts in Region 8 (Southwest Minnesota). Combined with the plan's technical findings, these strengths and weaknesses form the basis for identifying strategies to address transportation coordination in this region.

The Steering Committee collectively identified strengths of coordinated planning in the Southwest Region. Top strengths that surfaced at the workshop include:

- Lift accessible vehicles in the counties

- Openness to coordination of rides in Region 8

- Availability of transportation in Region 8 serving all ages

- Mixed resource options (bus, car, volunteer)

- Local programs / systems willing to meet local needs. Specific items identified in this strength included:

    - Local public transit takes ownership of their area, residents see community benefits. The local public transit service is more personalized and have better relationships or trust factor than transit providers that are not local.

    - Transit users notice the difference between local transit providers and transit providers that are not local.

- Currently people are getting where they need to go with minimal inconvenience

- Collaboration between agencies to meet needs of clients

- Public / private partnerships make transportation affordable

The Steering committee also discussed weaknesses of our existing transportation system. The main themes of the weaknesses were identified as:

- Dissimilar volunteer driver training – Differences are in both the public systems as well as the private sector.

- Unavailability of extended hours and wait time

- Lack of transportation available for people on weekends or evenings (beyond transit system hours, transit service is not available - for work, social, medical). Lack of specific routes or periodic routes, geographic areas, disabilities restrictions, etc. restricted areas. Type of transport available wheel chair / vs. ambulatory.

- Accessibility for riders with physical disabilities to area out of the county, area and vehicles, veterans, no special transportation service available, cost prohibitive and only for medical trips.

- Each county program (vets, transit, private, social service, family service agency) has its own rules, processes, preferences and payment policy. Some are interpreted by locals, some are rules and regulations. Coordination interpretation.

- Education of local agencies. Clarification of HIPAA and other rules and communicate that to: social workers, financial workers, case managers in plain English. "The provider cannot allow a shared ride" is an incorrect statement, there is nothing in HIPAA that prevents sharing rides, MN Health Care programs. A handout was requested to be developed from transit programs, to include items such as the program cannot guarantee a scent (odor) free ride, and right to refuse ride. It was identified that often HIPAA clients believe they have the right to a private driver. Education about what information may be provided to transit providers so that the transit can do the job was also identified.

- Lack of communication network. An example shared was a client goes to Sioux Falls and the driver returns empty. Other areas identified were a large geographic area, need to cross county boundaries, who to call for a ride, what is available for transit, understand what funding program determines who to call, long wait times, and lack of availability during peak hours

- Inefficient use of available funding (entitlement attitude by those on public assistance). Guidance indicates they must use the least costly use of transportation available and if there is an objection, there is an appeal process.

- Transit policy restrictions and employee training. Door to door, across county lines or service provider lines, public and private, subsidized transit.

- Enhance the Region 8 transit brochure with statements such as: we reserve the right to restrict rider usage if rider actions or language are inappropriate or may affect other riders in program or drivers; rides will be coordinated to use public or private funds to the best of our ability.

- Terminology

- Motor Carrier and their interpretation of rules and regulations

Strategy and Project Identification

The priority strategies and projects identified in this plan were initially identified by stakeholders at the public workshop and further refined by the steering committee. At the public workshop, stakeholders reviewed strategies for transit coordination, identified which strategies should be prioritized for this region, and brainstormed project ideas for implementation of these strategies. Taking the entire list of ideas generated, public workshop participants voted on high-priority strategies and projects to be highlighted in the final plan. Later, steering committee members considered this input while prioritizing strategies and projects for inclusion in the list presented below. A complete list of project ideas considered during the planning process is presented in Appendix D.

To categorize project ideas, steering committee members created an "Effort vs. Impact" chart to compare these project ideas. This created a relative sense of how much effort (low to high) each project idea would take as well as how much impact (minor to major) each project could have in its region. This chart can be found in Appendix E. The strategies and projects listed below represent those ideas the steering committee prioritized as having the most potential to improve transit coordination in Region 8.

Prioritized Strategies

A. Coordinate and Consolidate Transportation Services and Resources Strategies

- Share Resources

  Action. <u>Technology and Database: Alert system for communication</u>. Obtain affordable technology / software that would schedule individuals and organization client rides and also communicate with other providers in the system of shared software / network of sharing.

- Consolidate business functions

  Action. <u>Insurance policy modification to enable rideshare implementation</u>. Work with insurance agency to set up insurance policies so that it is easier to ride share - using a website

- Coordinate Volunteer Driver Training

  Action. <u>Consistent volunteer driver and driver training across systems.</u> Consistency could help with coordination.

- Implement tools that support data management

  Action. <u>Across the Board Contract Rates</u>. Contract rates vary from county to county and program to program, including mileage rates as well as administrative rates.

- Coordinate agency schedules

  Action. <u>Agency Schedules Coordination</u>. Coordinate trips through a scheduler / coordinator to better coordinate trips resulting in less client wait times.

B. Mobility Strategies

- Improve Service Convenience

  Action. <u>Increase service flexibility and improve service convenience</u>. Provide clients an opportunity to be more flexible in transportation to and from appointments; and expand service area and times of day transportation available with a focus on the elderly and people outside of municipalities.

  Action. <u>Expand Service Area and times of day</u> to provide more flexibility and reduce rider wait time.

  Action. <u>To work and home transportation</u>, including daycare and after hours medical. Improve / expand service hours, understanding that a level of demand is required for public transit to provide the service. Implementation will likely be a combination of public and private transportation options. This would address shift work, state lines, system boundaries, rideshare programs, and after hour availability from medical facilities, especially for individuals requiring a lift accessible vehicle.

- Establish / enhance assisted transportation programs

  Action. <u>Mobility Assistance: train volunteers to help riders</u> who are unable to use transit services without personal assistance

- Maintain / expand existing vehicle fleet

  Action. <u>Maintain / expand lift accessible vehicle fleet</u>. Maintain access to Section 5310 vehicle funding for lift accessible vehicles for DT & H facilities and public transit systems; and funding from other sources such as JARC and New Freedom to supplement or increase lift accessible fleet to address service expansion or replacement needs to address job access and increased service for persons requiring a lift accessible vehicle.

C. Communication, Training, and Organizational Support Strategies

- Centralize Information

  Action. <u>Technology and database: alert system for communication</u>. Obtain affordable technology / software that would schedule individuals and organize client rides and also communicate with other providers in the system of shared software / network of sharing.

  Action. <u>Technology and database: rideshare communication program</u>. Create technology link, available to transit providers in the region, which allows information regarding accessibility and service coverage.

  Action. <u>Technology and database: that incorporates a web-based database</u>. Establish a database where all Department of Human Services funded trips are entered. This database would increase trip coordination, do agency scheduling (similar to airline reservation), and would allow County Family Service staff who are requesting or authorizing trips to see similar trips.

Action. Rideshare communication program. Create a technology link available to transit providers in Region 8 and beyond. This will allow the sharing of information regarding accessibility and service coverage.

- Offer customer travel training

  Action. Campaign to educate: travel training. Encourage targeted populations to use transit services by teaching them how to ride the bus and make connection and use to other systems such as Land to Air to the Metro area and connecting and use of the Sioux Falls Transit system.

- Convene regional coordination body

  Action. Regional Ride Coordination Council. Convene transportation providers and human service agencies to discuss on-going coordination needs within the region. This is a larger body that provides direction to the subcommittee Regional Transportation Collaborative, who assists with project implementation. Identification of this group will begin with the individuals who attended or wished to attend the Plan public workshop.

  Action. Regional transportation coordination. Reduce barriers to provide transportation. Increase transportation access though available resources and funding opportunities. This would be a subcommittee of the Regional Ride Coordination Council, tasked with implementation.

- Educate public of transportation options

  Action. Campaign to educate: terminology. Education with different types of transportation options (i.e. door to door, curb to curb, etc). This could be part of outreach as well.

  Action. Campaign to educate: general. Clear up misconceptions, be transparent to consumers.

- Educate regional professionals of transportation options

  Action. Campaign to educate: transportation brochure. Defining terminology – HIPAA cost – individuals, wait times, website information address, and phone #'s for information. Could be based on the existing Region 8 Transit Brochure.

  Action. Campaign to educate: establish standardization for implementing common procedures for providing Access Transportation. Training and supportive materials to Family Services so coordination can occur when transporting an MA client and others with varying payment sources. Interpretations vary by local FSA staff on DHS rules and regulations. A common understanding and implementation of rules and regulations will assist in consistent implementation.

  Action. Campaign to Educate: DHS/MnDOT/ Motor Carrier/insurance training. clarification on terminology, rules, regulations, law requirements needs to be sent to every single transit provider so it is common knowledge about what is allowable and what is not.

- Provide training for public transit drivers and volunteer drivers

  Action. <u>Campaign to educate: develop and implement a base training program</u> for all public transit system drivers and a program for drivers in transit programs (bus and volunteer drivers) that includes sensitivity training, HIPAA, quarterly trainings in multiple regions to stay current on policies and procedures.

Other Strategies

The steering committee and public workshop did not identify any specific projects to some of the coordination strategies and some of the actions identified could fit in multiple strategies. Region 8 proposes that the Regional Ride Coordination Council meet on a periodic basis to initiate and continue coordination implementation. It is anticipated additional projects will be defined to address coordination and likely utilize these strategies. The strategies are listed below in their category area:

A.   Coordinate and Consolidate Transportation Services and Resources Strategies

- Allow joint purchasing

- Outsource business functions

- Contract between agencies

- Contract with Common Carrier

- Coordinate dispatch

B. Mobility Strategies

- Establish / expand taxi subsidy programs

- Improve access to transit stops

- Establish / Enhance Volunteer Driver programs

C. Communication, Training, and Organizational Support Strategies

- Provide technical training for coordination staff

- Hire Mobility Manager

Prioritized Project List – Region 08

Easy to do/Major Improvement

Title	**Regional Ride Coordination Council**
Overview	Convene transportation providers and human service agencies to discuss on-going coordination needs within region. This will be a large group that provides direction to the Regional Transportation Collaborative (who assists with implementation of projects). The initial make up of the Council will be drawn from individuals that participated in the 2011 Local Human Service Public Transit Coordination Plan public workshop.
Clients Served by Project	Public, with focus on low income, disabled and elderly
Communities Served	Region wide
Type of Agency Responsible	Regional planning, aging, and service organizations, public transit, state and regional transportation and human service organizations and agencies.
Strategy Addressed	Convene regional coordination body

Title	**Campaign to educate**: terminology
Overview	Education of different types of transportation options (i.e. door to door, curb to curb, etc). This could be part of outreach as well. Region 8
Clients Served by Project	DHS providers, general public, transit dependent who need to determine what type of service best fits their needs, Transit providers (public and private),
Communities Served	Regionwide
Type of Agency Responsible	Regional planning, aging, and service organizations, public transit, state and regional transportation and human service organizations and Agencies Regional Ride Coordination Council. The Regional Transportation Collaborative with the assistance of state agencies (DHS and MnDOT)
Strategy Addressed	Educate public of transportation options

Title	**Campaign to educate**: transportation brochure
Overview	Defining terminology such as HIPAA, individual versus tax payer costs, wait times, website info address, and phone numbers for information. Envisioned to be based on or a modification of the existing Regional Transit Provider Brochure.
Clients Served by Project	Family Service Agencies staff and clients, DHS providers and clients, agencies and general public
Communities Served	Regionwide
Type of Agency Responsible	SRDC and the Minnesota River Area Agency on Aging with assistance in the development and distribution by the Regional Ride Coordination Council and Regional Transportation Collaborative
Strategy Addressed	Educate regional professionals of transportation issues. This action also touched on the following strategies: Centralize information and educate the public on transportation options.

Title	**Campaign to educate**: establish standardization for implementing common procedures for providing Access Transportation.
Overview	Training and supportive materials to family services so that coordination can occur when transporting medical assistance clients and others with varying payment sources. (all) (Interpretations vary by local family service agency staff on DHS rules and regulation, a common understanding and implementation of the rules and regulations will assist in consistent implementation.)
Clients Served by Project	Family service agency staff, which then has an impact on their clients, and transportation providers.
Communities Served	County family service agencies in Region 8
Type of Agency Responsible	SRDC and the Minnesota River Area Agency on Aging with assistance from DHS and Region 8 family service agency directors
Strategy Addressed	Educate regional professionals of transportation options

Title	**Campaign to educate**: travel training
Overview	Encourage targeted populations to use transit services by teaching them how to ride the bus and make connections and use of other transit systems. Examples include: land to Air to metro area and connections to Sioux Falls and use of the Public Transit System in Sioux Falls. (all ages and abilities, all communities / counties)
Clients Served by Project	Region targeted populations
Communities Served	Regionwide
Type of Agency Responsible	The Regional Ride Council will oversee the projects, the Regional Transportation Collaborative (MnDOT / public transit, DHS funded providers, private orgs) will implement it.
Strategy Addressed	Offer customer travel training

Title	**Campaign to educate:** General
Overview	Clear up misconceptions, transparent to consumers, and may generate funds for transit systems through donations.
Clients Served by Project	Regional and local agencies and organizations and service providers of targeted populations
Communities Served	Regionwide
Type of Agency Responsible	The Regional Ride Council will oversee the project, the Regional Transportation Collaborative particularly MnDOT, public transit systems, private & DHS funded organizations will be responsible for implementation.
Strategy Addressed	Educate public of transportation options.

Easy to do/Minor Improvement

Title	**Volunteer driver training**
Overview	Consistent training across systems to help with coordination. (Choose trainers, such as Western Community Action so there is consistent training)
Clients Served by Project	Transit dependent
Communities Served	Regionwide
Type of Agency Responsible	The Regional Ride Council and Regional Transportation Collaborative lead by public transit systems with volunteer drivers will oversee the project development and implementation
Strategy Addressed	Coordinate volunteer driver training

Title	**Mobility Assistance**
Overview	Train volunteers to help riders who are unable to use transit services without personal assistance
Clients Served by Project	Current and potential transit riders who are unable to use transit services without personal assistance.
Communities Served	Regionwide
Type of Agency Responsible	The Regional Ride Council & MnDOT will oversee the project with the development and implementation from public transit systems with assistance from MnDOT and Southwest Center for Independent Living
Strategy Addressed	Establish / enhance assisted transportation programs

Difficult to do/Major Improvement

Title	**Agency schedule coordination**
Overview	Better coordinated trips so clients have less wait times (all).
Clients Served by Project	Family service agency clients
Communities Served	Regionwide
Type of Agency Responsible	Transit scheduler and facility transportation coordinators. DHS Agencies and transportation providers
Strategy Addressed	Coordinate agency schedules

Title	**Insurance policy modification** to enable rideshare implementation
Overview	Work with insurance agency to set up insurance policies so that it is easier to ride share and use a shared secure website. Agents interpretation of insurance agency policy often differ from head office, often impacting DT & H facilities
Clients Served by Project	DT & H providers and their clients
Communities Served	Regionwide
Type of Agency Responsible	Regional Ride Council with assistance from MnDOT regarding the website & Minnesota Department of Commerce with insurance issues.
Strategy Addressed	Consolidate business functions

Title	Across the board contract rates
Overview	Same contract rates from county to county. Contract rates currently vary from county to county and program to program, mileage rates as well as administrative rates. This is envisioned to be driven by DHS initiatives.
Clients Served by Project	Target populations and general public
Communities Served	Regionwide
Type of Agency Responsible	Family service agency directors with assistance from DHS and others, including the Regional Ride Council.
Strategy Addressed	Implement tool that support data management

Title	Expand service area
Overview	Expand service area and times of day to provide more flexibility and reduce wait time. (Region 8)
Clients Served by Project	All target groups and general public
Communities Served	Regionwide
Type of Agency Responsible	Regional Ride Council / lead by transit systems with MnDOT assistance, implemented by Regional Transportation Collaborative (focused on all transit providers & MN DOT)
Strategy Addressed	Improve service convenience

Title	Lift accessible vehicle fleet
Overview	Maintain access to Section 5310 vehicle funding to replace or increase lift accessible vehicles for DT & H facilities and public transit systems; and funding from other sources such as New Freedom and JARC to supplement or increase lift accessible fleet to address service expansion or replacement needs for persons requiring a lift accessible vehicle.
Clients Served by Project	Elderly and disabled
Communities Served	Regionwide
Type of Agency Responsible	Regional Ride Council / MNDOT will enable Section 5310 eligible entities to access new and replacement vehicles to serve the elderly and disabled populations in SW Minnesota as well as accessing such as New Freedom and JARC funds to maintain and increase if appropriate the lift accessible vehicle fleet.
Strategy Addressed	Maintain / expand accessible vehicle fleet

Title	Regional Transportation Collaborative
Overview	Reduce barriers to provide affordable transportation. Increase access to transportation available resources and funding opportunities. (Region 8). This is a sub-committee of the Regional Ride Coordination Council, tasked with implementation
Clients Served by Project	Target populations, general public
Communities Served	Regionwide, target communities may be identified through implementation for pilot projects
Type of Agency Responsible	Overseen by the Regional Ride Council and implementation lead by public transit systems and DHS providers serving Region 8.
Strategy Addressed	Convene regional coordination body.

Title	**Technology & database:** alert system for communication
Overview	Obtain affordable technology / software that would schedule individuals and organization client rides and also communicate with other providers in system of shared software / network of sharing possibilities could also be broadcast. (all)
Clients Served by Project	Target populations and general public
Communities Served	Regionwide
Type of Agency Responsible	Regional Ride Council and the Regional Transportation Collaborative with assistance from: MnDOT, DHS, Minnesota Developmental Achievement Center Association (MnDACA), County Social Service Administrators (CSSAS), Minnesota Social Services Administrators (MSSA).
Strategy Addressed	Centralize information. This action was also seen to impact the following strategies: share resources, coordinate agency schedules, coordinate dispatch, and mobility manager.

Title	**Technology & Database:** that incorporates a Web-based database
Overview	Establish a data base where all DHS funded trips are entered. This database would increase trip coordination, do agency scheduling (like an airline reservation). Would allow family service agency people who are requesting and authorizing trips to see similar trips.
Clients Served by Project	Family service agencies / DHS clients
Communities Served	Regionwide
Type of Agency Responsible	• Regional Ride Council • Regional Transportation Collaborative with the assistance of MnDOT/DHS
Strategy Addressed	Centralize information

Title	**Technology and database: r**ideshare communication program
Overview	Create a technology link available to transit providers in the Region. This will allow the sharing of information regarding accessibility and service coverage.
Clients Served by Project	Target populations and general public
Communities Served	Regionwide
Type of Agency Responsible	Overseen by Regional Ride Council, developed and implemented by Regional Transportation Collaborative with the assistance of MnDOT and DHS
Strategy Addressed	Centralize information. This action was also seen to have a direct relationship to coordinate dispatch strategy.

Title	**Campaign to educate**: DHS, MnDOT, and motor carrier insurance training.
Overview	Clarification on terminology, rules, regulations, law requirements for every transit provider so it is common knowledge about what is allowable and what is not.
Clients Served by Project	Transit providers to better serve target populations
Communities Served	Regionwide
Type of Agency Responsible	MN DOT collaborating with DHS, Motor Carrier and insurance (Department of Commerce), with distribution of the material and information by the Regional Ride Council.
Strategy Addressed	Educate regional professionals of transportation options

Difficult to do/Minor Improvement

Title	**Campaign to educate**: Create a training program for drivers in transit programs
Overview	Develop and implement a base training program for all public transit system drivers (bus and volunteer drivers) that include sensitivity training, HIPAA, provide quarterly training in multiple regions to stay current on new policies and procedures. Include special training for bus drivers or volunteer drivers as appropriate. (all)
Clients Served by Project	Increased driver training will result in better service and understanding of target population needs
Communities Served	Regionwide
Type of Agency Responsible	Regional Transit Systems with the assistance from MnDOT
Strategy Addressed	Provide Training for public transit drivers and volunteer drivers

Title	**Increase service flexibility**
Overview	Provide clients an opportunity to be more flexible in transportation to and from appointments; and expand service area, times and days transportation is available with a focus on elderly and persons living outside of municipalities.
Clients Served by Project	Target populations residing outside larger communities that have increased transit options.
Communities Served	Rural areas (non-urban) of the region
Type of Agency Responsible	Public transit providers
Strategy Addressed	Improve service convenience

Title	**To work & home transportation.** To and from work (including daycare), and from after hour medical.
Overview	Improve and/or expand service hours, understanding that a level of demand is required for public transit to provide the service, implementation will likely be a combination of private and public transportation options. This would address shift work, state lines, system boundaries, rideshare programs, and after hour availability from medical facilities, especially for persons requiring a vehicle with a lift.
Clients Served by Project	Workers and patients discharged from medical facilities after transit system hours, especially those with special transportation needs, such as lift accessible vehicles.
Communities Served	Regionwide
Type of Agency Responsible	Regional Ride Council and Regional Transportation Collaborative lead by public transit systems and others such as hospitals and businesses.
Strategy Addressed	Improve service convenience

Approval and Adoption of Plan

The SRDC plan adoption process requires the plan to be recommended by a standing committee. In order for this to occur, the standing committee must be involved or kept informed of the Plan and its development. The following timeline outlines the public process followed for the plan development and adoption:

- April 4, 2011. SRDC Transportation Committee. Initial presentation on the update of the 2006 Region 8 Public Transit – Human Service Transit Coordination Plan, called the Region 8 2011 Local Human Service Transit Coordination Plan. The committee provided direction on public process to be followed for the plan adoption.

- April 5, 2011. Region 8 Transit Steering Committee. Reviewed the 2006 Plan and provided direction for the Public workshop.

- May 12, 2011. SRDC Full Commission brief written report and oral report on the plan and its development.

- May 25, 2011. Interactive 2011 Local Human Service Transit Coordination Plan public workshop. Review previous plan, data for the current plan, and identified projects for the 2011 Plan.

- June 9, 2011. SRDC Board of Directors brief writer report on the status of the project.

- June 23, 2011. Region 8 Transit Steering Committee. Clarified and prioritized projects to be included in the 2011 draft Plan.

- June 30, 2011. Posted the draft prioritized list of projects on the SRDC website http://swrdc.org/content/files/transportation/Draft%20Project%20List.pdf

- August 3, 2011. SRDC Transportation Committee. Presentation of the 2011 draft Plan, initiation of public comment process.

- August 11, 2011. 2011 draft Plan posted on the SRDC website.

- September 8, 2011. SRDC Full Commission. Presentation of the 2011 draft Plan contents and request for comment.

- October 31, 2011. Public comment period ends.

- November 7, 2011. SRDC Transportation Committee reviews public comments and makes recommendation to the Full Commission regarding plan adoption.

- November 10, 2011. SRDC Full Commission. Report on comment to the Plan; request the Commission adopt the Plan.

Plan Comments

8-11-2011 Discharge Planners meeting comments following presentation of the 2011 draft Plan

Prairie V Transit System picks people up in Appleton and they can get to Montevideo (across county lines). It works well. Also Sibley/McLeod and Brown County Transit systems have special rates for seniors to get to nutrition sites (reduced fare because they also need to pay a donation for the meal as well as return trip). Sibley County has a special rate for seniors to eat anywhere.

Response: Information will be shared with Public Transit Systems.

We have a lack of dentists in the area that take people on medical assistance because DHS has reduced the reimbursement rate. People have to travel longer distances to get to an eligible dentist.

Response: Robin Weis responded at the meeting that Mankato will have an Open Door Health clinic – a mobile service once per week in Slayton and Marshall. UCARE will also be offering something similar in Cottonwood and Jackson counties.

Nursing homes have vehicles, but often not staff available to drive a resident to and from an appointment. Public transit is often utilized, however, after hours transportation of a resident can be a challenge.

Response: After business hours rides from medical facility to home / nursing home is partially covered in the "improve service convenience" strategy with the project of "to work & home transportation".   The project overview was expanded to clarify implementation may be a transit provider that is public, private, or a combination.

10-19-2011: Ted Stamp, Independent Living Advocate, Southwestern Center for Independent Living, 109 South Fifth Street, Suite 700, Marshall, MN 56258. Provided edit and clarification on the Strategy and Priority Identification Section of the draft Plan – pages 27 through 32.

Response: Edits and clarification incorporated into the final draft plan.

10-27-2011: Susan Voehl RN Executive Director, Helping Hand Pregnancy Center - "Upholding Life through God's love", 910 Third Avenue, Worthington, MN 56187, www.helpinghandpc.org . We heavily use the cost sharing taxi ride program in Worthington (through a private taxi business and administered by SMOC). Our clients were greatly affected by the abrupt end of taxi rides during the State Shut down. Does the plan address that issue so that future problems can be avoided?
Response: The Worthington Taxi Service was operating during the state shut down; however, the subsidized rides were not available during the shutdown. The issue is not ride availability but affordability of rides. Affordability is addressed under "Regional Transportation Collaborative: reduce barriers to provide affordable transportation".

10-31-2011: Patricia Buboltz, Accounting Technician, Redwood County Human Services, *pat_b@co.redwood.mn.us* . Had a chance to review part of the plan several days ago. In case you haven't noticed, there were a couple little things that may need to be corrected on pages 28 and 31.
Response: Clarifications made to Improved Service Convenience Action, Maintain / Expand Existing fleet, and clarification of the Regional Ride Council as identified.

10-31-2011: A comment received from Leslie at Cottonwood County Human Services …. lift chair weight limits has been a problem for one of her clients and has had to use the ambulance for transfers.

Response: There was recently a lift issue with a client in Rock County. The issue was researched and there is no vehicle we know of in Southwest Minnesota that can handle a combined chair and person weight of more than 600 pounds. The only known transport is by ambulance. It is unknown if all ambulance services can provide transport. More research into this transportation issue may be appropriate. If it is found that a heavy duty vehicle with heavy duty lift is merited, it is addressed under the strategy and action of "maintain / expand lift accessible vehicle fleet".

11-4-2011: Jan Klassen, MNDOT. I don't know if we addressed it in the coordination plan. Would it be appropriate to think about how to educate us out here on how to use existing systems and their connection? Examples would be Land to Air to the Metro area and connections to taxi or Metro Transit as well as connecting and using the Sioux Falls transit system.

Response: This would be appropriate to be added as part of the travel training project. Connections to other transit systems and how to use them was added to the travel training project. When the Regional Ride Council meets in 2012, it can be further discussed.

.Appendix A- Public Workshop Participants

May 25, 2011 Workshop Participants

Karen DeBoer	PTS / SMOC
Shelly Pflaum	Community Transit
Deanna Smith	Discharge Planner, Sanford Jackson Hospital
Micelle Miranowski	Murray County Transportation
Natalie Seehausen	Garnette Gardens Assisted Living
Robin Weis	MNRAAA
Janice Klassen	MN DOT
Mary Lou Drahota	Good Samaritan
Cathleen Amick	Community Transportation / WCA
Denise Smid	Jasper Sunrise Village
Joleene Johnsons	Redwood Area Hospital
Kris Carson	Pipestone County Medical Center
Ashley Whipkey	Southwestern Mental Health
Bob Ries	DHS
Brenda Meyer	Habilitative Services
Ted Stamp	SWCIL
Steven Rasmussen	Community Transit / WCA
Brian Frodermann	Love Inc of Worthington
Tina Kanthok	Southwestern Mental Health
Beverly Herfindahl	MN DOT
Betty Stancer	Service Enterprises
Rhonda Hines	Human Services
Linda Halbur	SWCIL
Terrie Gulden	Rock County Heartland Express
Bonnie Nielsen	WCA / Community Action
Beth Bartels	Rock County Opportunities

Appendix B-1 Transit Services, Transit-Dependent Populations, and Key Destinations in Region 8. Population Density
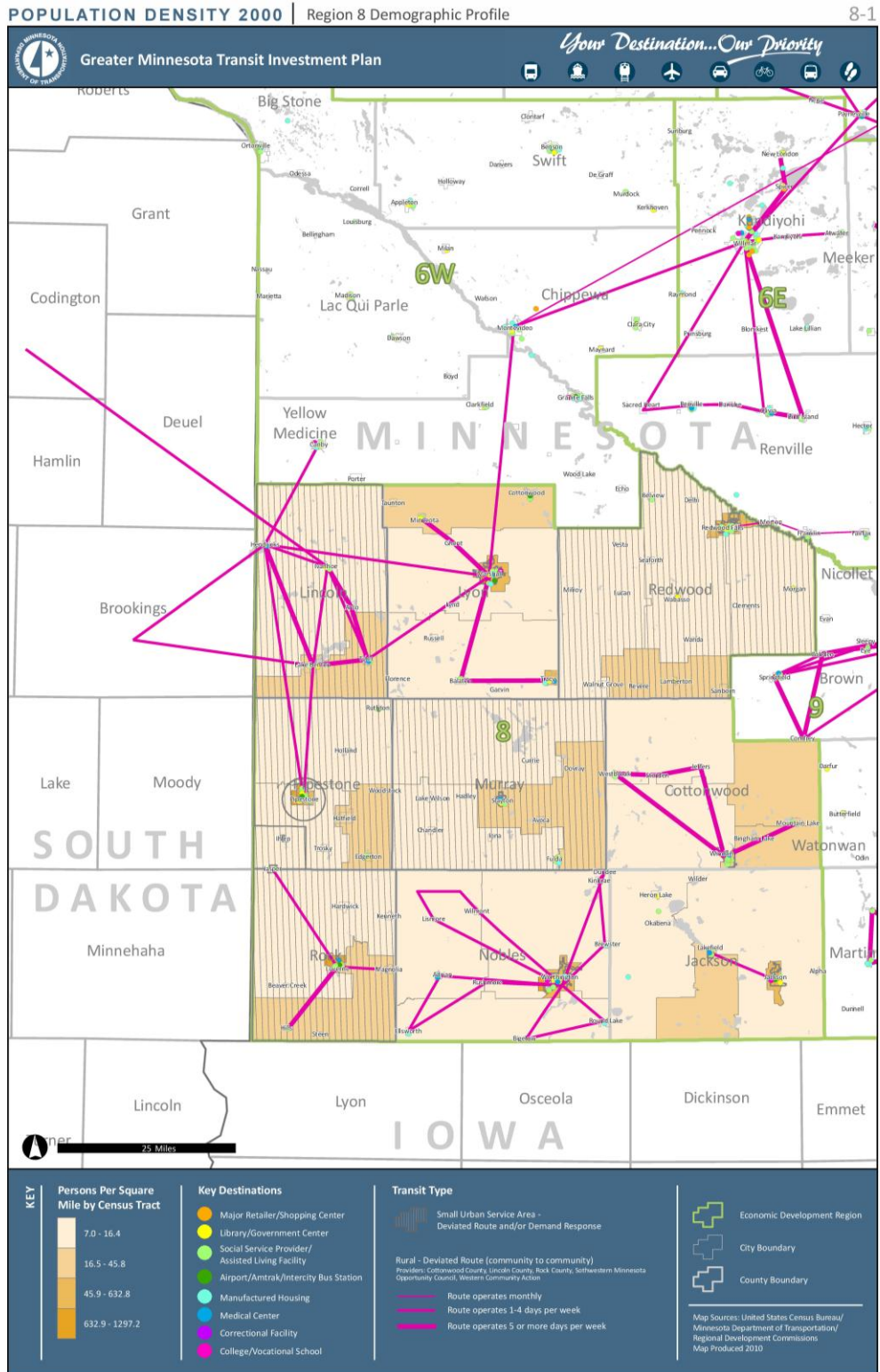
Appendix B- 2 Transit Services, Transit-Dependent Populations, and Key Destinations in Region 8. Density of Households in Poverty
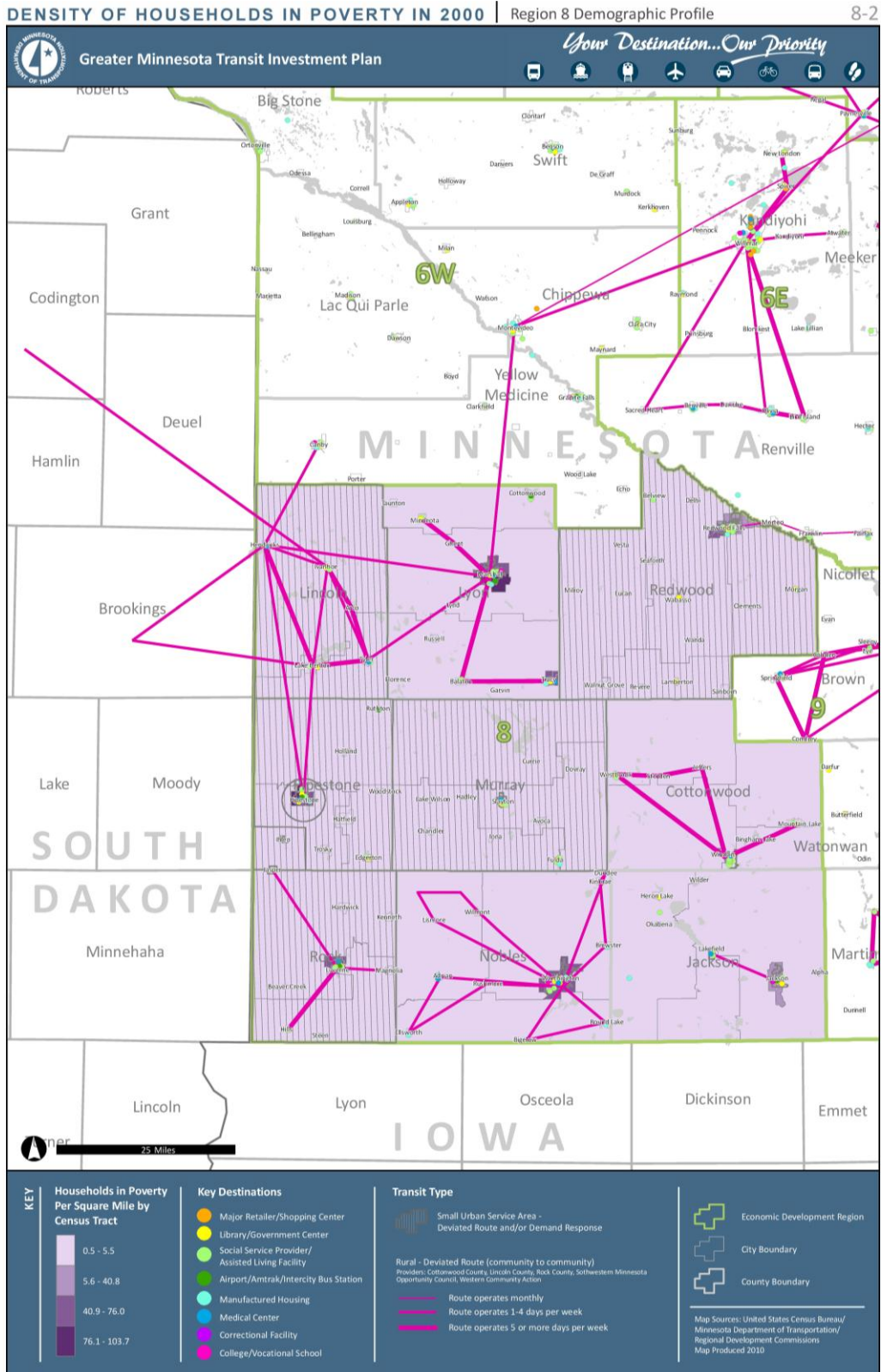
Appendix B- 3 Transit Services, Transit-Dependent Populations, and Key Destinations in Region 8. Density of Minority Populations
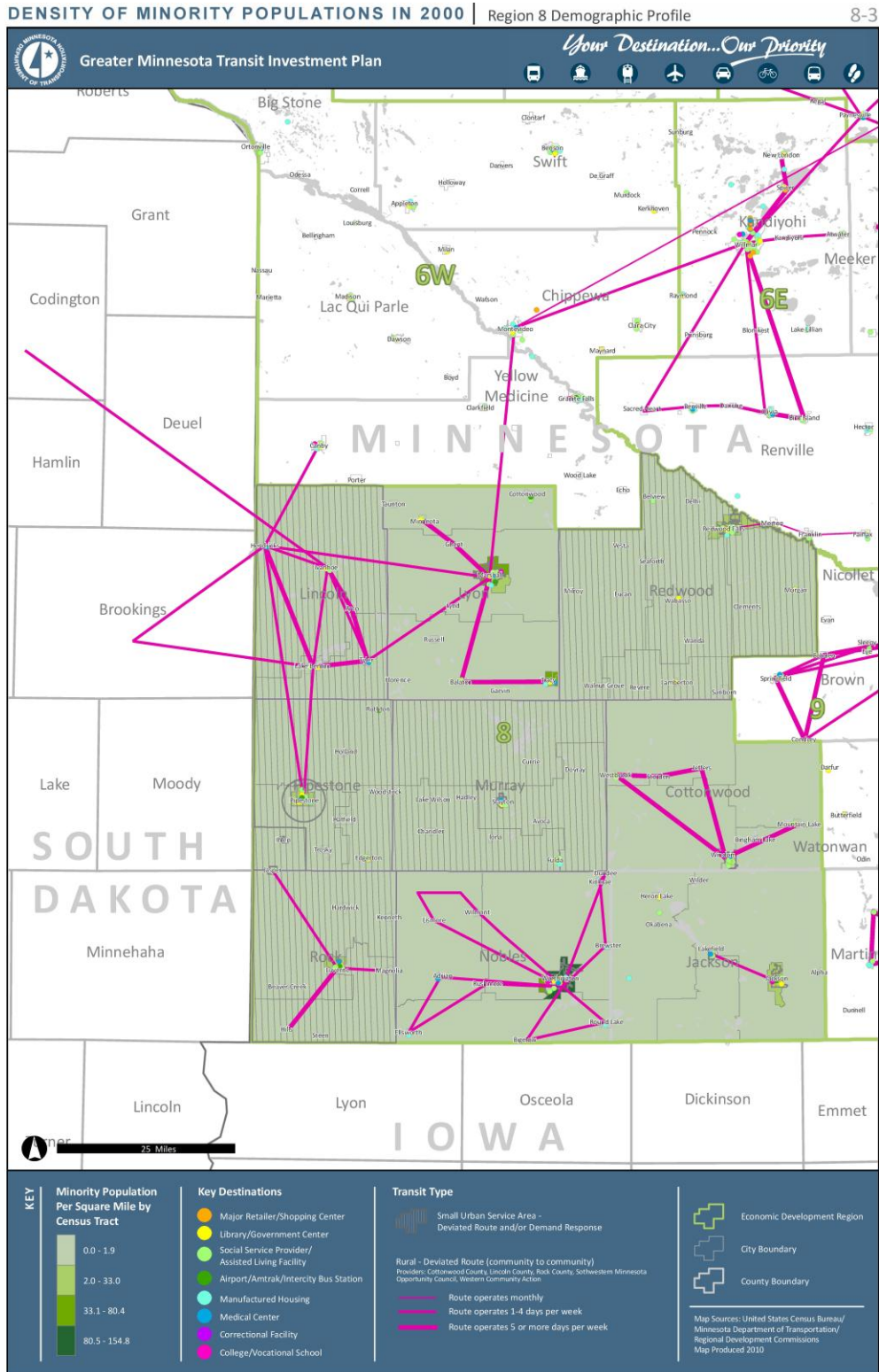
Appendix B- 4 Transit Services, Transit-Dependent Populations, and Key Destinations in Region 8. Density of Limited English Proficiency Populations

Appendix B- 5 Transit Services, Transit-Dependent Populations, and Key Destinations in Region 8. Persons Age 65 and older

DENSITY OF PERSONS AGE 65 AND OLDER | Region 8 Demographic Profile | 8-5

Appendix B- 6 Transit Services, Transit-Dependent Populations, and Key Destinations in Region 8. Density of Zero Vehicle Households

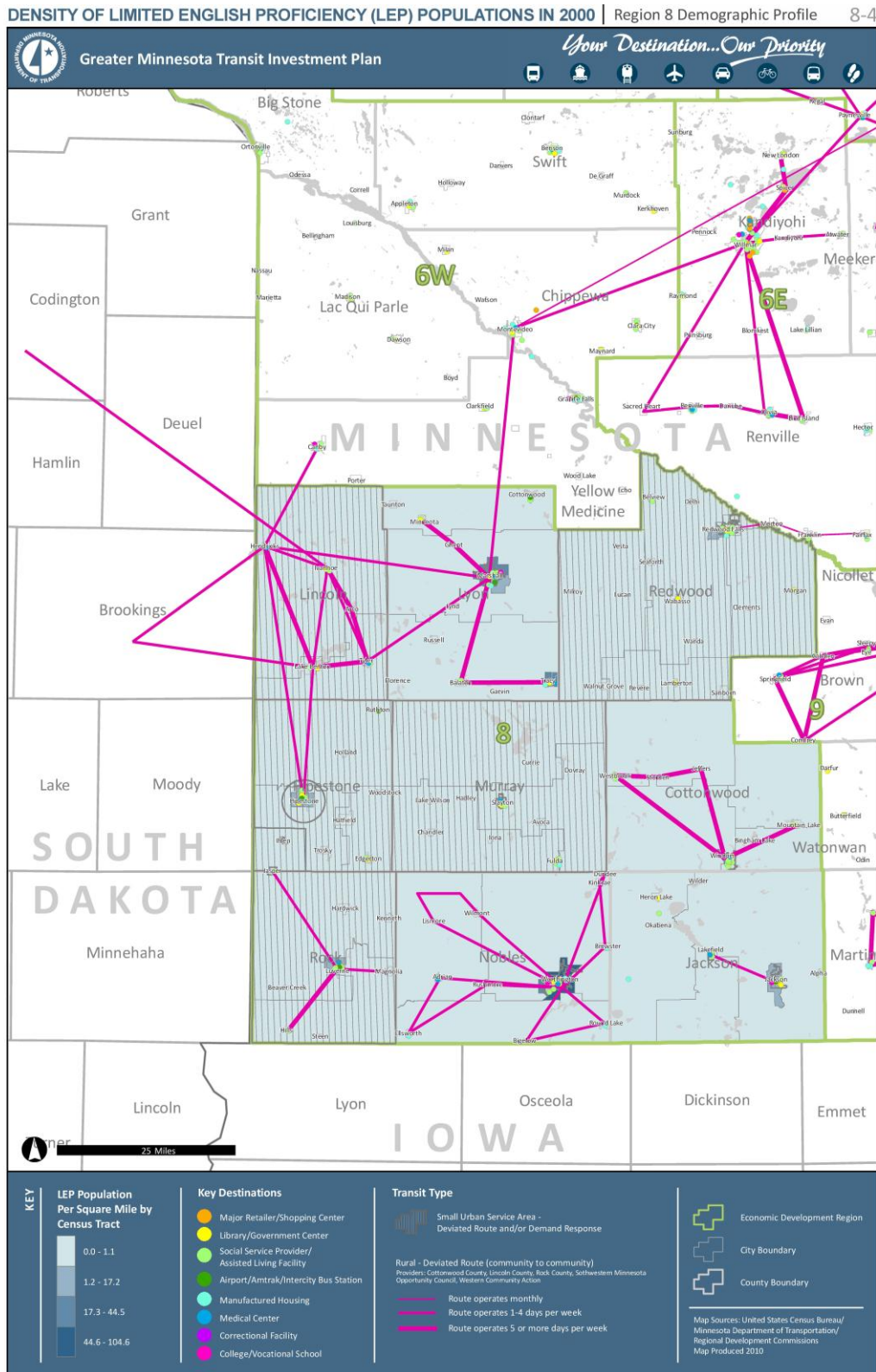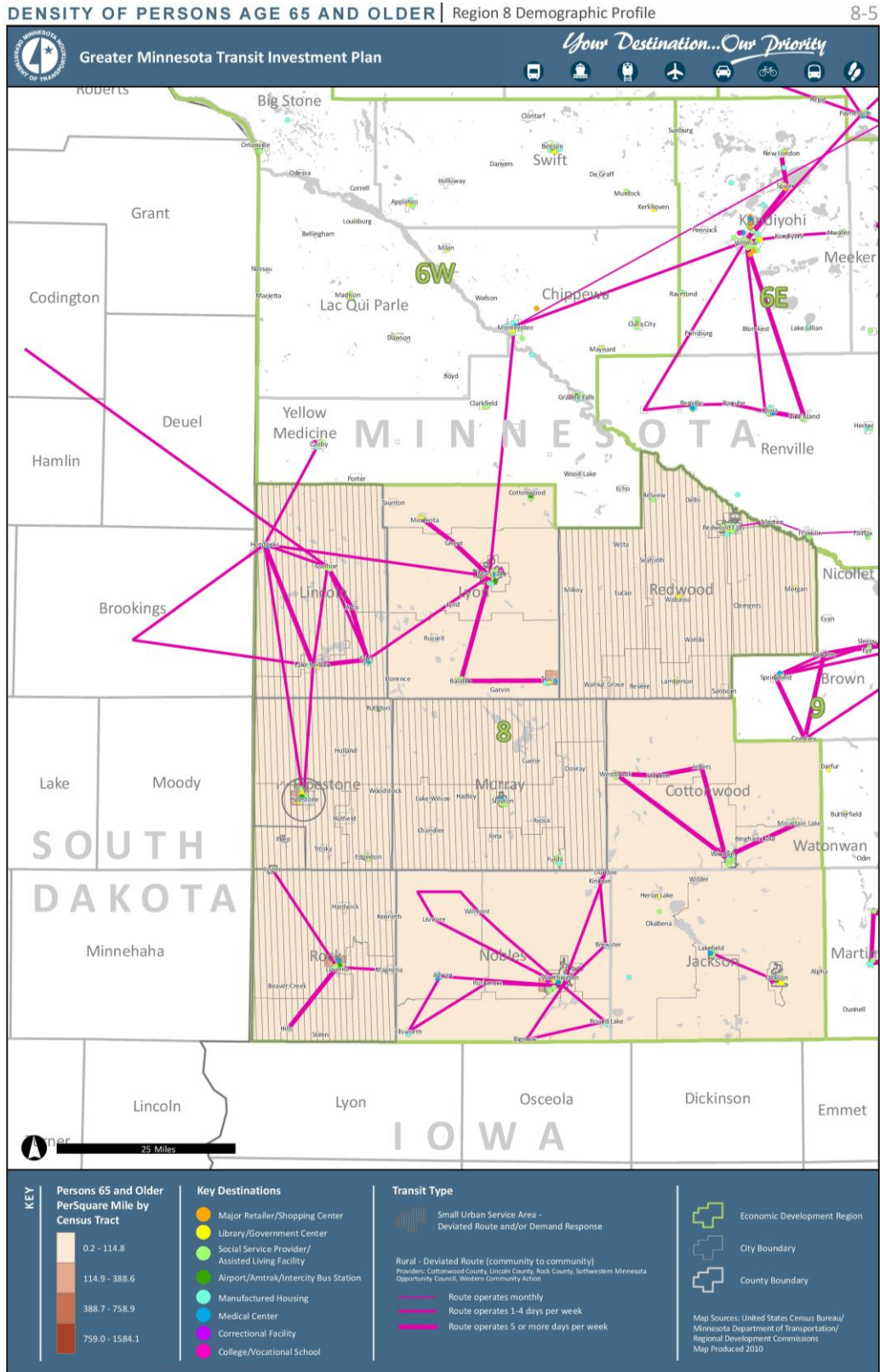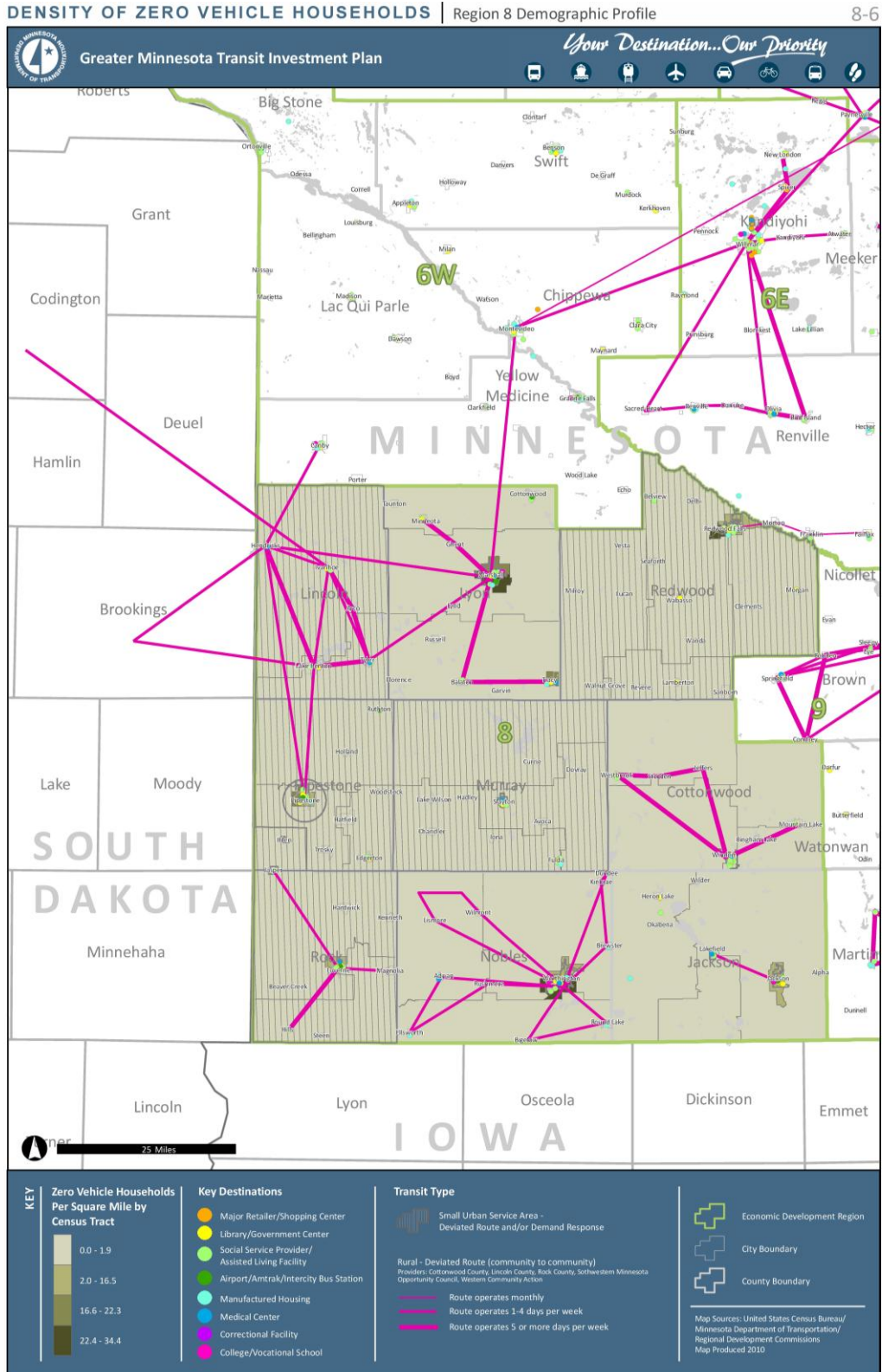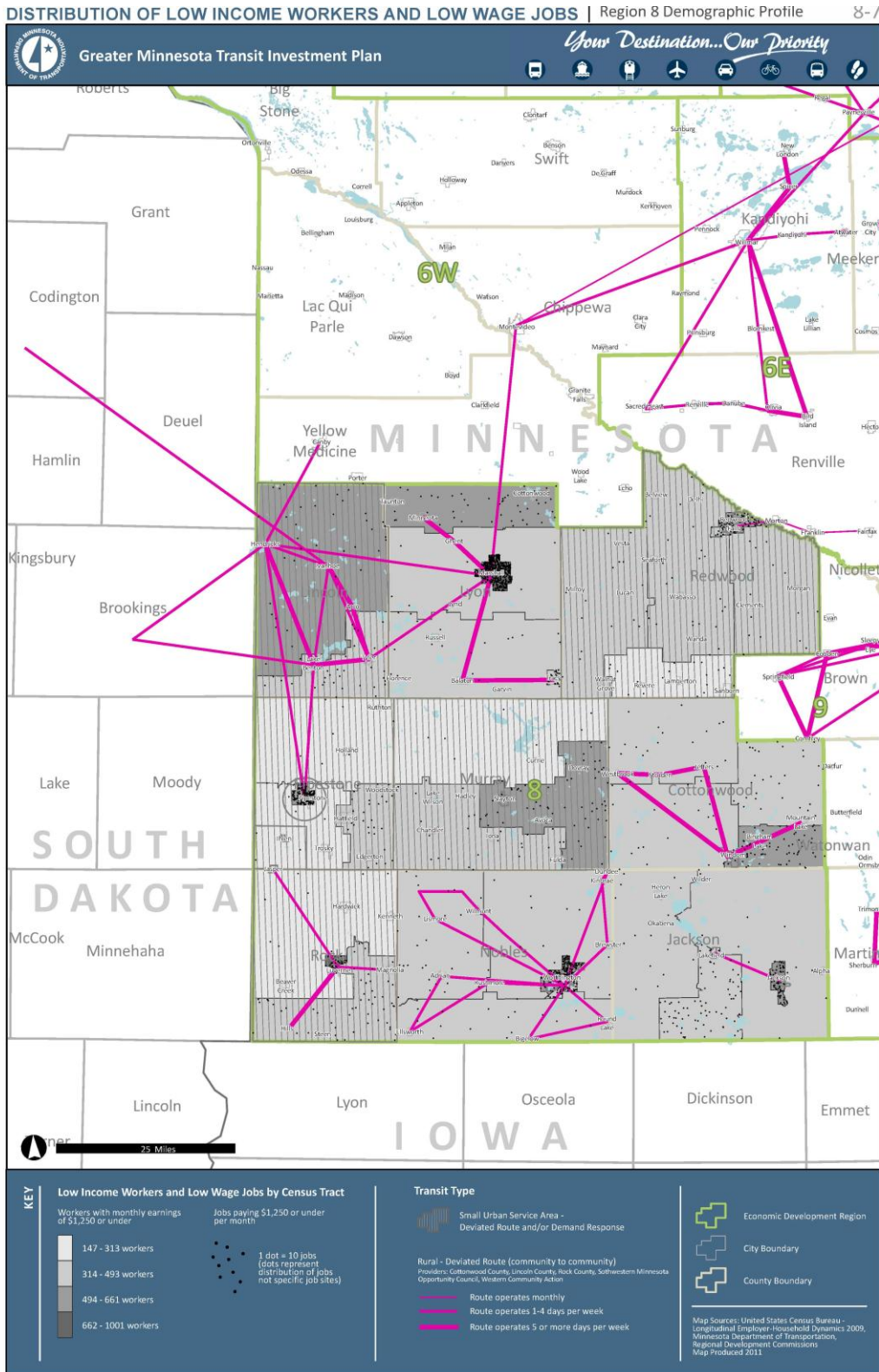## Appendix B- 7 Transit Services, Transit-Dependent Populations, and Key Destinations in Region 8. Distribution of Low Income Workers and Low Wage Jobs

Appendix C- Transportation Provider Directory

The following directory includes contact information for all regional transportation providers who responded to an inventory questionnaire sent in spring 2011. This is not a complete list of providers in the region.

Cottonwood County	
Name:	Cottonwood County DAC
Address:	1049 5th Ave, Box 153, Windom, MN 56101
Phone:	507.831.1511
Web:	
Service Type:	Non-Profit Transportation
Name:	Cottonwood County Transit
Address:	900 Third Avenue, Windom, MN 56101
Phone:	507-831-5669
Web:	http://www.co.cottonwood.mn.us/transit.html
Service Type:	Public Transit Deviated Route and Public Transit Dial a Ride
Name:	Good Samaritan Society - Mt Lake
Address:	745 Basinger Memorial Drive, Mountain Lake, MN 56159
Phone:	507-427-2464
Web:	http://www.good-sam.com/
Service Type:	Private Transportation
Name:	Good Samaritan Society – Westbrook
Address:	149 1st Ave, Westbrook, MN 56183
Phone:	507.274.6155
Web:	http://www.good-sam.com/
Service Type:	Private Transportation
Name:	Good Samaritan Society-Windom
Address:	705 6th Street, Windom, MN 56101
Phone:	507-831-1788
Web:	http://www.good-sam.com/
Service Type:	Private Transportation
Name:	Community Transit of Western Community Action
Address:	115 South Hwy, PO Box 207, Jackson, MN 56143
Phone:	507-847-2632 ex 6
Web:	http://www.wcainc.org/transit/
Service Type:	Volunteer Driver
Name:	Habilitative Services Inc.
Address:	108 9th Street, Windom, MN 56101
Phone:	507-831-5033 ext. 13
Web:	http://www.habsvinc.com/offices.asp
Service Type:	private transportation

Name:	Home for Creative Living
Address:	108 9th Street, Windom, MN 56101
Phone:	507-831-5033 ext.24
Web:	
Service Type:	Private transportation
Name:	Western Community Action
Address:	220 Milwaukee St., Lakefield, MN 56150
Phone:	507-662-6433
Web:	http://www.wcainc.org/
Service Type:	Headstart Transportation
Name:	Windom Area Schools
Address:	1400 17th Street, PO Box C-17, Windom, MN 56101
Phone:	507.831.6901 ext 508
Web:	http://windom.mn.schoolwebpages.com/education/district/district.php?sectionid=1
Service Type:	School Transportation

Jackson County	
Name:	Community Transit of Western Community Action
Address:	115 South Hwy, PO Box 207, Jackson, MN 56143
Phone:	507-847-2632 ex 6
Web:	http://www.wcainc.org/transit/
Service Type:	Public Transportation dial a ride, Volunteer Driver
Name:	Habilitative Service Inc
Address:	220 Milwaukee St, suite 2, Lakefield, MN 56150
Phone:	507-662-5236
Web:	http://www.habsvinc.com/offices.asp
Service Type:	private transportation
Name:	Immanuel Lutheran School
Address:	P.O. Box 750, 5th and Bush Street, Lakefield, MN 56150
Phone:	507.662.5718
Web:	
Service Type:	School Transportation
Name:	Jackson County Central (JCC) Schools
Address:	P. O. Box 119, 1128 North Highway, Jackson, MN 56143
Phone:	507-847-3608
Web:	http://www.jccschools.com/
Service Type:	School Transportation
Name:	Jackson County DAC
Address:	PO Box 805, 304 2nd Ave North, Lakefield, MN 56150
Phone:	507.662.6156
Web:	
Service Type:	Non-profit transportation

Name:	Southwest Star Concept Schools
Address:	124 N Minnesota Ave, Okabena, MN 56161
Phone:	507-853-4507
Web:	http://www.ssc.mntm.org/southweststar/site/default.asp
Service Type:	School transportation
Name:	Western Community Action Head Start
Address:	1400 S. Saratoga, Marshall, MN 56258
Phone:	507-537-1416
Web:	http://www.wcainc.org/headstart/
Service Type:	Head Start Transportation

Lincoln County

Name:	Hope DAC
Address:	330 E. Hwy. 14, PO Box 637, Tracy, MN 56178
Phone:	507 -247-5340
Web:	
Service Type:	Non-Profit Transportation
Name:	Lake Benton School #404
Address:	101 S. Garfield, Lake Benton, MN 56149
Phone:	507-368-4241
Web:	http://www.lakebentonschool.org/
Service Type:	School Transportation
Name:	Lincoln County Transit
Address:	319 North Sherwood Street, P.O. Box 29, Ivanhoe, MN
Phone:	507-694-1813
Web:	http://www.co.lincoln.mn.us/Departments/Transportation.htm
Service Type:	Public Transit Dial and Ride
Name:	Community Transit of Western Community Action
Address:	1400 South Saratoga, Marshall, MN 56258
Phone:	507-537-7628 ext. 1124
Web:	http://www.wcainc.org/transit/
Service Type:	Volunteer Driver
Name:	Western Community Action Head Start
Address:	1400 S. Saratoga, Marshall, MN 56258
Phone:	507-537-1416
Web:	http://www.wcainc.org/headstart/
Service Type:	Head Start Transportation

Lyon County

Name:	Advance Opportunities
Address:	1401 Peterson St., Marshall, MN 56258
Phone:	507-537-7018 ext. 109
Web:	
Service Type:	Private non-profit transportation

Name:	Community Transit of Western Community Action
Address:	1400 South Saratoga, Marshall, MN 56258
Phone:	507-537-7628 ext. 1124
Web:	http://www.wcainc.org/transit/
Service Type:	Public Transportation Route Deviation, Public Transportation Dial a Ride
Name:	Habilitative Service Inc
Address:	220 Milwaukee St, suite 2, Lakefield, MN 56150
Phone:	507-662-5236
Web:	http://www.habsvinc.com/offices.asp
Service Type:	private transportation
Name:	Prairie View Healthcare Center
Address:	250 5th Street East, Tracy, MN 56175
Phone:	507-629-3331
Web:	http://prairieviewhealthcare.com/
Service Type:	Private Transportation
Name:	Southwest Coaches, Inc
Address:	2660 State Hwy 23, Marshall, MN 56258
Phone:	507-532-4043
Web:	http://swtourandtravel.com/
Service Type:	Private Transportation, School Transportation
Name:	Southwest Health and Human Services (SWHHS)
Address:	607 West Main Street Suite #100, Marshall, MN 56239
Phone:	507-532-1239
Web:	http://www.swmhhs.com/
Service Type:	County Human Service Agency
Name:	Palmer Bus Service
Address:	305 E 4th St N, Cottonwood, MN 56229
Phone:	507-423-6080
Web:	http://www.palmercharterservice.com/districts.html
Service Type:	School Transportation
Name:	Western Community Action Head Start
Address:	1400 S. Saratoga, Marshall, MN 56258
Phone:	507-537-1416
Web:	http://www.wcainc.org/headstart/
Service Type:	Head Start Transportation
Murray County	
Name:	Murray County D.A.C. Inc.
Address:	2225 28th St., Slayton, MN 56172
Phone:	507-836-8921
Web:	
Service Type:	Non-profit Transportation Provider

Name:	Murray County Transportation
Address:	2439 Broadway Ave, PO Box 57, Slayton, MN 56172
Phone:	507.836.6648
Web:	http://murray-countymn.com/mc/index.php?option=com_content&view =article&id=1143&Itemid=249
Service Type:	Public Transit Dial a Ride
Name:	Southwestern MN Opportunity Council Head Start
Address:	1106 3rd Ave, PO Box 787, Worthington, MN 56187
Phone:	507-376-4195 x248
Web:	http://www.smoc.us/id34.html
Service Type:	Head Start Transportation

Nobles County

Name:	Ellsworth Public School
Address:	513 S. Broadway, P.O. Box 8, Ellsworth, MN 56129
Phone:	507-967-2242
Web:	http://www.ellsworth.mntm.org/
Service Type:	School Transportation
Name:	Parkview Manor
Address:	308 Sherman Ave, Ellsworth, MN 56129
Phone:	507 967 2482
Web:	http://www.parkviewmanor.org/
Service Type:	Private Transportation
Name:	Round Lake - Brewster Schools
Address:	945 4th Ave, Brewster, MN 56119
Phone:	507-842-5951
Web:	http://www.rlb.mntm.org/
Service Type:	School Transportation
Name:	Southwestern MN Opportunity Council Head Start
Address:	1106 3rd Ave, PO Box 787, Worthington, MN 56187
Phone:	507-376-4195 x248
Web:	http://www.smoc.us/id34.html
Service Type:	Head Start Transportation
Name:	SMOC Prairieland Transit System
Address:	1106 3rd Avenue, PO Box 787, Worthington, MN 56187
Phone:	507-376-3322
Web:	http://www.smoc.us/id12.html
Service Type:	Public Transportation Route Deviation, Public Transportation Dial a Ride
Name:	The Meadows of Worthington
Address:	1801 Collegeway, Worthington, MN 56187
Phone:	507.343.7141
Web:	http://www.meadowsofworthington.org/
Service Type:	Private Transportation

Pipestone County	
Name:	Pipestone County Transit
Address:	811 5th ST SE, Pipestone, MN 56164
Phone:	507-825-6713
Web:	http://www.pipestone-county.com/departments/transit/
Service Type:	Public Transportation Dial a Ride
Name:	Pipestone County Veterans Services
Address:	811 5th St SE, Pipestone, MN 56164
Phone:	507-825-6771
Web:	http://www.pipestone-county.com/departments/veteranservices/default.htm
Service Type:	
Name:	Southwestern MN Opportunity Council Head Start
Address:	1106 3rd Ave, PO Box 787, Worthington, MN 56187
Phone:	507-376-4195 x248
Web:	http://www.smoc.us/id34.html
Service Type:	Head Start Transportation
Redwood County	
Name:	Community Transit of Western Community Action
Address:	1400 South Saratoga, Marshall, MN 56258
Phone:	507-537-7628 ext. 1124
Web:	http://www.wcainc.org/transit/
Service Type:	Public Transportation Route Deviation, Public Transportation Dial a Ride
Name:	Country View Senior Living Community
Address:	810 8th Street, Walnut Grove, MN 56180
Phone:	507-859-2133
Web:	http://www.twdcc.com/Country-View-Senior-Living-Community
Service Type:	Private Transportation
Name:	Golden Living Center – Wabasso
Address:	660 Maple, Wabasso, MN 56293
Phone:	507-342-5166
Web:	http://www.goldenlivingcenters.com/locations-staff/find-care-location/welcome/golden-livingcenter-wabasso-mn.aspx
Service Type:	Private Transportation
Name:	Milroy Public School
Address:	103 Prospect Street, P.O. Box #10, Milroy, MN 56263
Phone:	507-336-2563
Web:	http://www.milroy.k12.mn.us/milroy/site/default.asp
Service Type:	School Transportation
Name:	Red Rock Central Schools #2884
Address:	Box 278, 100 6th Ave. East, Lamberton, MN 56152
Phone:	507 - 752-7361
Web:	http://www.rrcnet.org/java.shtml
Service Type:	School Transportation

Name:	Redwood County Human Services
Address:	PO Box 510, 302 E. 3rd St, Redwood Falls 56283
Phone:	507-637-1267
Web:	http://www.co.redwood.mn.us/
Service Type:	County Human Services
Name:	Service Enterprises, Inc.
Address:	PO Box 248, 515 W. Bridge St, Redwood Falls, MN 56283
Phone:	507.637.3503
Web:	http://www.service-enterprises.org/
Service Type:	Non-profit Transportation
Name:	Western Community Action Head Start
Address:	1400 S. Saratoga, Marshall, MN 56258
Phone:	507-537-1416
Web:	http://www.wcainc.org/headstart/
Service Type:	Head Start Transportation

Rock County

Name:	Habilitative Services, Inc.
Address:	227 N. Minnesota St., PO Box 776, New Ulm, MN 56073
Phone:	507-233-4410
Web:	http://www.habsvinc.com/default.asp
Service Type:	Private Transportation
Name:	Luverne Public Schools
Address:	709 N Kniss, Luverne, MN 56156
Phone:	507-283-8088
Web:	http://www.isd2184.net/
Service Type:	School Transportation
Name:	Southwestern MN Opportunity Council Head Start
Address:	1106 3rd Ave, PO Box 787, Worthington, MN 56187
Phone:	507-376-4195 x248
Web:	http://www.smoc.us/id34.html
Service Type:	Head Start Transportation
Name:	Tuff Memorial Home
Address:	505 E 4th St, Hills, MN 56
Phone:	507-962-3275
Web:	
Service Type:	Private Transportation
Name:	Minnesota Veterans Home-Luverne
Address:	1300 N. Kniss Ave, PO Box 539, Luverne, MN 56156
Phone:	507-283-1114
Web:	http://www.mvh.state.mn.us/luverne/
Service Type:	

Name:	Rock County Heartland Express
Address:	1110 N Blue Mound Avenue, Luverne, MN 56156
Phone:	507.283.5058
Web:	http://www.co.rock.mn.us/heartland_express.html
Service Type:	Public Transportation Dial a Ride
Name:	Rock County Opportunities Inc
Address:	807 W Main S, PO Box 626, Luverne, MN 56156
Phone:	507-283-4582
Web:	
Service Type:	Non profit Transportation

Regionwide

Name:	AmeriCare Mobility Van, Inc
Address:	703 S 2nd Street, P.O. Box 3610, Mankato 56002
Phone:	507.625.6741
Web:	http://www.amvan.com/
Service Type:	Private Transportation
Name:	People's Express
Address:	12182 US highway 10, Wadena, MN 56482
Phone:	1-800-450-0123
Web:	http://www.peoplesexpressmn.com/
Service Type:	Private Transportation

Appendix D- Project Idea Summary.
The summary includes all project ideas generated during the planning process, including those from the public workshop and the final steering committee meeting.

Acronyms: DHS: Department of Human Services; MN DOT: Minnesota Department of Transportation; MNRAAA: Minnesota River Area Agency on Aging; SWCIL: Southwest Center for Independent Living; SRDC: Southwest Regional Development Commission; MnDACA: Minnesota Developmental Achievement Center Association ; CSSAS: County Social Service Administrators; MSSA: Minnesota Social Service Association

Category 1: Coordinate and Consolidate Transportation Services and Resources

Project #	Title of Project	Description of Project: Includes Community and population Served	Strategy Projects Fulfills	Project Implementation • Project champion(s) • Responsible for Implementation • Timing (yr 1, 2-3 yrs, 4-5 yrs)	Effort vs. Impact
1	**Volunteer Driver Training**	*Consistent training across systems to help with coordination. (Choose trainers, such as Western Community Action so there is consistent training)*	*Coordinate Volunteer Driver Training*	• *Regional Ride Council / Regional Transportation Collaborative, lead by the transit systems* • *Transit systems with Volunteer Drivers* • *2-3 (medium)*	*Easy to Do /Minor Improvement*
2	***Agency Schedule Coordination***	*Better coordinated trips so clients have less wait times (all).*	*Coordinate agency schedules*	• *Transit scheduler and transportation facility coordinator* • *DHS Agencies / public transit providers* • *Short Term (year 1)*	*Difficult to do / Major Improvement*

Prjt #	Title of Project	Description of Project	Strategy Projects Fulfills	Project Implementation	Effort vs. Impact
Category 1: Coordinate and Consolidate Transportation Services and Resources					
3	**Insurance policy modification** *to enable rideshare implementation*	*Work with insurance agencies to set up policies so that it is easier to ride share and use a shared secure website. Agent's interpretation of insurance agency policy often differs from head office, often impacting shared use of vehicles and sharing information DT & H facilities.*	*Consolidate business functions and*	• *Regional Ride Council with assistance from MN DOT regarding the website & Department of Commerce with insurance issues* • *MN DOT / Department of Commerce* • *1-5 years (on-going)*	*Difficult to do / Major Improvement*
4	**Campaign to Educate**: *Create a training program for drivers in transit programs*	*Develop and Implement a base training program for all public transit system drivers (bus and volunteer drivers) that include sensitivity training, HIPAA, provide quarterly training in multiple regions to stay current on new policies and procedures. Include special training for bus or volunteer drivers as appropriate. (all)*	*Provide Training for public transit system drivers and volunteer drivers.*	• *Regional Transit Systems* • *Transit Systems with assistance from MN DOT* • *Medium term (2-3 years)*	*Difficult to do / Minor Improvement*
5	**Across the Board Contract Rates**	*Same contract rates from county to county. Contract rates vary from county to county and program to program, mileage rates as well as administrative rates.*	Implement tools that support data management	• *DHS Driven, Regional Ride Council* • *FSA Directors with assistance from DHS and others.* • 1 year	*Difficult to do / Major Improvement*

Grid #	Title of Project	Description of Project: Includes Community and population Served	Strategy Projects Fulfills	Project Implementation • Project champion(s) • Responsible for Implementation • Timing (yr1, 2-3 yrs, 4-5 yrs)	Effort vs. Impact
			Category 2: Mobility Strategies		
6	*Increase Service Flexibility*	*Provide clients an opportunity to be more flexible in appointments yet still able to be transported to / from appointments (elderly, outside of the city)*	Improve Service Convenience	• *Public Transit Provider* • *Public Transit Provider* • *1 year, Short Term*	*Difficult to Do / Minor Improvement*
7	*Expand Service Area*	*Expand service area and times of day to provide more flexibility and reduce wait time. (Region 8)*	Improve service convenience	• *Regional Ride Council / lead by transit systems with MN DOT assistance* • *Regional Transportation Collaborative (focused on all transit providers & MN DOT)* • *on-going 1-5 years*	*Difficult to Do, Major and Minor Improvements*
8	*Mobility Assistance*:	*Train volunteers to help riders who are unable to use transit services without personal assistance*	Establish / enhance assisted transportation programs	• *Regional Ride Council & MNDOT* • *Public Transit Systems with assistance from MN DOT and SWCIL* • *Medium term (years 2-3)*	*Easy to Do / Minor Impact*

Prjt #	Title of Project	Description of Project	Strategy Projects Fulfills	Project Implementation	Effort vs. Impact
9	*Lift Accessible Vehicle Fleet*	*Maintain access to Section 5310 vehicle funding to replace or increase lift accessible fleet for DT & H facilities as well as public transit; and funding from other sources such as New Freedom and JARC to increase or supplement the lift accessible fleet as projects are implemented.*	Maintain / Expand Accessible Vehicle Fleet	• *Regional Ride Council / MNDOT* • *5310 eligible entities & MN DOT* • *on-going 1-5 years*	*- Difficult to Do / Major Improvement*
10	*To Work & Home Transportation.* *To and from work (including daycare), and from after hour medical locations.*	*Improve / expand service hours, understanding that a level of demand is required for public transit to provide the service. This would address shift work, state lines, system boundaries, rideshare programs, and after hour availability from medical facilities, especially for persons requiring a lift accessible vehicle.*	Improve Service Convenience	• *Regional Ride Council / Reg. Transportation Collaborative lead by Transit systems* • *Transit Provider(s)* • *1 year, Short Term*	*Difficult to Do / Minor Improvement*
Category 3: Communication, Training, and Organizational Support					
11	*Regional Ride Coordination Council*	*Convene transportation providers and human service agencies to discuss on-going coordination needs within region. This is the larger body large body that provides direction to the subcommittee Regional Transportation Collaborative.*	Convene Regional Coordination body	• *SRDC / MNRAAA / DHS / MN DOT* • *DHS Providers / Family Service Agencies / Public Transit Systems* • *1-5 years, on-going*	*Easy to do /Major Improvement*

Prjt #	Title of Project	Description of Project	Strategy Projects Fulfills	Project Implementation	Effort vs. Impact
12	*Regional Transportation Collaborative*	*Reduce barriers to provide affordable transportation. Increase transportation access through available resources and funding opportunities (Region 8). This is a sub-committee of the Regional Ride Coordination Council, tasked with initiating implementation of projects*	Convene Regional Coordination Body	• *Regional Ride Council, lead by public transit systems and DHS providers* • *Public transit systems and DHS providers in Region* • *1-5 years, on-going*	*Difficult to do / Major Improvement*
13	*Campaign to Educate*: Terminology	*Education with different types of transportation options (i.e. door to door, curb to curb, etc). This could be part of outreach as well (Region 8).*	Educate public of transportation options	• *Regional Ride Coordination Council* • *Regional Transportation Collaborative with the assistance of DHS / MN DOT* • *1-5 years, on-going*	*Easy to do / Major Improvement*
14	*Campaign to Educate*: Transportation Brochure	*Defining terminology, HIPAA, cost for individuals versus tax payers, wait times, website info, address, phone numbers for information. Could be based on the existing Region 8 transit provider brochure.*	Educate regional professionals of transportation issues.	• *SRDC, MNRAAA* • *Regional Ride Council / Transportation Collaborative* • *1-5 year, on-goings*	*Easy to do /Major Improvement*
15	*Technology & Database Alert system for communication*	*Obtain affordable technology / software that would schedule individuals and organization client rides and also communicate with other providers in system of shared software / network of sharing possibilities could also be broadcast. (all)*	Centralize information,	• Regional Ride Council • Regional Transportation Collaborative with assistance from: MN DOT, DHS, MnDACA, CSSAS, MSSA • 1-5 years, On-going	*Difficult to do / Major Improvement*

Prjt #	Title of Project	Description of Project:	Strategy Projects Fulfills	Project Implementation	Effort vs. Impact
16	**Technology & Database:** Rideshare Communication program	*Create technology link, available to transit providers in the region. Allows information regarding accessibility and service coverage.*	Coordinate dispatch	• Regional Ride Council • Regional Transportation Collaborative, with assistance from MN DOT / DHS • 1-5 years, on-going	*Difficult to do / Major Improvement*
17	**Technology & Database:** that incorporates a Web-based database	*Establish a data base where all DHS funded trips are entered, enabling increase of trip coordination, agency scheduling (like an airline reservation), allow people who are requesting similar trips.*	Centralize Information	• Regional Ride Council • Regional Transportation Collaborative with the assistance of MN DOT/DHS • 1-5 years, on-going	*Difficult to do / Major Improvement*
18	**Campaign to Educate**: Establish standardization for implementing common procedures for providing access trans.	Training and supportive materials to family services so that coordination can occur when transporting an MA client and others with varying payment sources. (all) *(Interpretations vary by local FSA staff on DHS rules and regulation, a common understanding and implementation of the rules and regulations will assist in consistent implementation.)*	Educate regional professionals of transportation options	• *SRDC – MNRAAA with assistance from DHS* • *Regional FSA Directors* • *1-5 years, on-going*	*Easy to Do / Major Improvement*

Prjt #	Title of Project	Description of Project	Strategy Projects Fulfills	Project Implementation	Effort vs. Impact
19	**Campaign to Educate**: DHS/MNDOT/ motor carrier/insurance training.	*Clarification on terminology, rules, regulations, law requirements needs to be sent to every single transit provider so it is common knowledge about what is allowable and what is not.*	Educate regional professionals of transportation options	• *MN DOT* • *DHS / MN DOT / Motor Carrier / Insurance (Department of Commerce)* • *1 year, Short Term*	*Difficult to do / Major Improvement*
20	**Campaign to Educate**: Travel Training	*Encourage targeted populations to use transit services by teaching them how to ride the bus. (all ages and abilities, all communities / counties)*	Offer customer travel training.	• *Regional Ride Council* • *Regional Trans. Collaborative (MN DOT / Public Transit / DHS funded providers, Private orgs* • *Short Term (1 year)*	*Easy to Do / Major Improvement*
21	**Campaign to Educate:** General	*Clear up misconceptions, transparent to consumers, and may generate funds for transit systems through donations.*	Educate Public of Transportation options	• *Regional Ride Council* • *Transportation Collaborative with focus on - MN DOT / Public Transit / Private & DHS funded organizations.* • *Short Term (1 year)*	*Easy to Do / Major Improvement*

Appendix E- Project Analysis: Effort vs. Impact Assessment – Region 08

Difficult to do/Minor impact projects	Difficult to do/Major impact projects
• Campaign to Educate: Create a training program for drivers in transit programs • Increase Service Flexibility • To Work & Home Transportation, including daycare and from after hour medical.	• Agency Schedule coordination • Insurance Policy modification to enable rideshare implementation • Across the board contract rates • Expand service area • Lift Accessible Vehicle Fleet • Regional Transportation Coordination / Collaborative • Technology & Database: Alert System for Communication • Technology & Database: Rideshare Communication Program • Technology & Database: Web-based database • Campaign to Educate: DHS/MNDOT/Motor Carrier/Insurance training
Easy to do/Minor impact projects • Volunteer Driver Training • Mobility Assistance	**Easy to do/Major impact projects** • Regional Ride Coordination Council • Campaign to Educate: Terminology • Campaign to Educate: Transportation Brochure • Campaign to Educate: Establish Standardization for implementing common procedures for providing access transportation • Campaign to Educate: Travel Training • Campaign to Educate: General