

# Coordinated Public Transit - Human Services Transportation Plan

Region 7: Adams, Blackford, Delaware, Grant,  
Henry, Jay, Madison, Randolph, and Wells  
Counties

## Final Report



Prepared for Indiana  
Department of Transportation  
and Madison County Council of  
Governments

December, 2021

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**INDIANA DEPARTMENT OF TRANSPORTATION**  
**PUBLIC TRANSIT – HUMAN SERVICE TRANSPORTATION COORDINATION PLAN**  
**Region 7**

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**Region 7 Coordinated Public Transit-Human Services Transportation Plan**

**A RESOLUTION SUPPORTING THE REGIONAL COORDINATED TRANSPORTATION PLAN UPDATE TO BE SUBMITTED TO THE INDIANA DEPARTMENT OF TRANSPORTATION, OFFICE OF TRANSIT**

WHEREAS, people with specialized transportation needs have rights to mobility. Older adults, individuals with limited incomes and people with disabilities rely on public and specialized transportation to live independent and fulfilling lives. These services which are provided by public and private transportation systems and human service agency programs are essential for travel to work and medical appointments, to conduct essential errands, or to take advantage of social or cultural opportunities; and

WHEREAS, under the Infrastructure Investment and Jobs Act (IIJA), projects funded by the Federal Transportation Administration (FTA) Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program must be included in a locally developed, coordinated public transit-human services transportation plan; and

WHEREAS, the Federal Transportation Administration (FTA) Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program provides operating and capital assistance funding to provide transit and purchase of services to private nonprofit agencies, and to qualifying local public bodies that provide specialized transportation services to elderly persons and to people with disabilities; and

WHEREAS, a local committee with participation by seniors, individuals with disabilities, representatives of public, private, and non-profit transportation providers met on April 20, 2022; and

WHEREAS, the local committee reviewed and recommended through consensus the Coordinated Public Transit – Human Services Transportation Plan to be submitted to the Indiana Department of Transportation, Office of Transit.

NOW, THEREFORE, BE IT RESOLVED BY THE TRANSPORTATION ADVISORY COMMITTEE:

That this resolution takes effect immediately upon its adoption.

ADOPTED BY THE TRANSPORTATION ADVISORY COMMITTEE THIS TAC Meeting AS EVIDENCED BY THE AUTHORIZING SIGNATURES BELOW.

Betsy Collier, Transportation Program Manager  
Name and Title

4/20/2022  
Date

Sandra Bayne TPM  
Name and Title

4/20/2022  
Date



By Merritt TAC MEMBER  
Name and Title

4/20/2022  
Date

Janet L. Moser TAC Member  
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4/20/22  
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Michelle J. Longrich Adams County Council on Aging director  
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Marcus Nicholas Bi-County Services, Inc.  
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4/20/2022  
Date

Lucie Ehlerding / Associate Director WCCOA  
Name and Title

4-20-22  
Date

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# Introduction

## INTRODUCTION

### OVERVIEW

This plan updates the Public Transit-Human Services Transportation Coordination Plan for Adams, Blackford, Delaware, Grant, Henry, Jay, Madison, Randolph, and Wells Counties, Region 7, that was initially developed in 2008 and updated in 2012 to fulfill the planning requirements for the United We Ride initiative and the Federal Transit Administration’s (FTA) Safe, Accountable, Flexible, and Efficient Transportation Equity Act – A Legacy for Users (SAFETEA-LU); and updated in 2014 to meet the planning requirements for Moving Ahead for Progress in the 21st Century (MAP-21). The SAFETEA-LU and MAP-21 were the Federal surface transportation authorizations effective through September 30, 2015.

On December 4, 2015, the Fixing America’s Surface Transportation (FAST) Act, was signed into law as a reauthorization of surface transportation programs through Fiscal Year 2020. The FAST Act applies new program rules to all FTA funds and authorizes transit programs for five years. According to requirements of the FAST Act, locally developed, coordinated public transit-human services transportation plans must be updated to reflect the changes established by the FAST Act Federal legislation. The PT-HSTC Plan was updated in 2017, and now in 2021, to meet FAST Act requirements and reflect the changes in funding programs.

On November 15, 2021, the Infrastructure Investment and Jobs Act (IIJA) was enacted into law. The IIJA continues the policies set forth by the FAST Act and provides \$937 billion over five years from FY 2022 through 2026, including \$550 billion in new investments for all modes of transportation, including \$284 billion for the U.S. Department of Transportation, of which \$39 billion is dedicated to transit. The IIJA directs the U.S. Department of Transportation to apply the funding toward modernizing and making improvements.

Funding to update this locally-developed regional Public Transit-Human Services Transportation Coordination plan was provided by the Indiana Department of Transportation, Office of Transit (INDOT) and involved active participation from local agencies that provide transportation for the general public, older adults, and individuals with disabilities.

Some human service agencies transport their clients with their own vehicles, while others may also serve the general public or purchase transportation from another entity. Regardless of how services are provided, transportation providers and human service agencies are all searching for ways to economize, connect, increase productivity, and provide user-friendly access to critical services and community amenities. In an era of an increasing need and demand for shared-ride and non-motorized transportation and stable or declining revenue, organizational partnerships must be explored and cost-saving measures must be made to best serve the State’s changing transportation demands. Interactive coordinated transportation planning provides the best opportunity to accomplish this objective.

# INTRODUCTION

## RELEVANT FAST ACT PROGRAMS

### **Section 5310 Program: Enhanced Mobility for Seniors and Individuals with Disabilities**

The program most significantly impacted by the plan update is the Section 5310 Program because participation in a locally developed Coordinated Plan is one of the eligibility requirements for Section 5310 Program funding.

The Section 5310 Program provides formula funding to States to assist public and private nonprofit groups in meeting the transportation needs of older adults and people with disabilities when transportation service provided is unavailable, insufficient, or inappropriate to meeting those needs. The Federal Transit Administration (FTA) apportions Section 5310 Program funds to direct recipients based on the population within the recipient service area. For rural and small urban areas in Indiana, the Indiana Department of Transportation (INDOT) is the direct recipient. As the direct recipient, INDOT solicits applications and selects Section 5310 Program recipient projects for funding through a formula-based, competitive process which is clearly explained in the INDOT Transit State Management Plan.

In Indiana, eligible activities for Section 5310 Program funds include purchasing buses and vans, wheelchair lifts, ramps, and securement devices.

Section 5310 Program projects are eligible to receive an 80 percent Federal share if the 20 percent local match is secured. Local match may be derived from any combination of non-U.S. Department of Transportation Federal, State, or local resources. The FAST Act also allows the use of advertisement and concessions revenue as local match. Passenger fare revenue is not eligible as local match.

## PLAN DEVELOPMENT METHODOLOGY

According to Federal Transit Administration (FTA) requirements, the coordinated plan must be developed and approved through a process that includes participation by older adults and individuals with disabilities. And, INDOT and FTA also encourage active participation in the planning process from representatives of public, private, and nonprofit organizations that provide or support transportation services and initiatives, and the general public. The methodology used in this plan update includes meaningful efforts to identify these stakeholders and facilitate their participation in the planning process.

The fundamental element of the planning process is the identification and assessment of existing transportation resources and local/regional unmet transportation needs and gaps in service. This was accomplished by receiving input from the stakeholders noted above through a virtual public meeting, telephone interviews, email conversations, and completion of a public survey available both online and

on paper. Social Distancing protocols led to changed and improved public engagement and outreach methods.

The coordination plan update incorporated the following planning elements:

1. Review of the previous regional coordination plan updates to develop a basis for evaluation and recommendations;
2. Evaluation of existing economic/demographic conditions in each county;
3. Survey of the general public. It must be noted that general public survey results are not statistically valid, but are intended to provide insight into the opinions of the local community. The survey also includes distribution to agencies that serve older adults and individuals with disabilities and their consumers. A statistically valid public survey was beyond the scope of this project. However, U.S. Census data is provided to accompany any conclusions drawn based on general public information;
4. Conduct of one virtual meeting for stakeholders and the general public to solicit input on transportation needs, service gaps, goals, objectives, and implementation strategies to meet these deficiencies;
5. Update of the inventory of existing transportation services provided by public, private, and non-profit organizations;
6. Update of the summary of vehicle utilization to determine where vehicles can be better utilized to meet transportation needs;
7. Update of the assessment of unmet transportation needs and gaps in service obtained through meetings, interviews, and surveys;
8. Development of an updated implementation plan including current goals, strategies, responsible parties, and performance measures, including an open stakeholder process for prioritizing the strategies and goals; and
9. Adoption of the updated coordination plan by regional and state authorities.

## GLOSSARY OF TERMS

**Direct Recipient** – Federal formula funds for transit are apportioned to direct recipients; for rural and small urban areas, this is the Indiana Department of Transportation. In large urban areas, a designated recipient is chosen by the governor. Direct recipients have the flexibility in how they select subrecipient projects for funding. In Indiana, their decision process is described in the State or Metropolitan Planning Organization’s Program Management Plan.

**Fixing America’s Surface Transportation (FAST) Act** – On December 4, 2015, President Obama signed the Fixing America’s Surface Transportation (FAST) Act, reauthorizing surface transportation programs at the U.S. Department of Transportation through September 2021. Details about the Act related to transit and public transportation are available at [www.transit.dot.gov/FAST](http://www.transit.dot.gov/FAST). The **Infrastructure Investment and Jobs Act (IIJA)** was enacted on November 15, 2021 and re-authorizes or authorizes funding for surface transportation including transit.

**H+T Index** – The Housing and Transportation (H+T) Affordability Index provides nationwide data on the cost of housing and transportation at the neighborhood level in an effort to explore sustainability and affordability through location efficiency. The information is available at <https://htaindex.cnt.org/>.

**Human Service Agency (HSA)** – Government/public and nonprofit agencies that provide social assistance programs (from healthcare to food and shelter to employment) designed to contribute to the welfare and happiness of communities by delivering a broad range of support to individuals and families. In many communities, transportation is one of the services provided to agency clients, or to a broader segment of the general public.

**Individuals with Disabilities** – This document classifies individuals with disabilities based on the definition provided in the Americans with Disabilities Act implementing regulations, which is found in 49 CFR Part 37.3. This definition, when applied to transportation services applications, is designed to permit a functional approach to disability determination rather than a strict categorical definition. In a functional approach, the mere presence of a condition that is typically thought to be disabling gives way to consideration of an individual’s abilities to perform various life functions.

**Local Matching Funds** – The portion of project costs not paid with the Federal share. Non-Federal share or non-Federal funds include the following sources of funding, or in-kind property or services, used to match the Federal assistance awarded for the Grant or Cooperative Agreement: (a) Local funds; (b) Local-in-kind property or services; (c) State funds; (d) State in-kind property or services, and (e) Other Federal funds that are eligible, under Federal law, for use as cost-sharing or matching funds for the Underlying Agreement. For the Section 5310 Program, local match can come from other Federal (non-DOT) funds. This can allow local communities to implement programs with 100 percent Federal funding. One example is Older Americans Act (OAA) Title III-B Support Services.

**Medicaid Funded Transportation** – Medicaid services low-income populations and individuals with disabilities, and relies primarily on state funding. Medicaid generally pays for eligible non-emergency medical trips (NEMT) for patients who can walk, use a wheelchair, or require a stretcher or ambulance. State Medicaid programs also qualify people who are eligible for waivers (waiving the admission into an institution or nursing facility), also called home and community-based services, that include transportation as a supportive service.

**Older Adults** – For the purposes of the Section 5310 Program, people who are 65 years of age and older are defined as older adults or seniors.

**Older Americans Act, Title III-B funding** - The Supporting Older Americans Act of 2020 reauthorizes programs for FY 2020 through FY 2024 and is considered to be a major vehicle for the organization and delivery of social and nutrition services to this group and their caregivers. The purpose of Title III of the OAA is to encourage and assist state and local agencies in the development of comprehensive and coordinated in-home and community based long-term services for older adults (age 60 and older). The

2006 reauthorization contained specific requirements for States and area agencies to develop and implement comprehensive and coordinated systems for home and community-based services, including transportation, and explicitly allowed grantees to use Title III B funds to meet the match requirements of FTA programs for the transport of seniors and caregivers who are escorting seniors.

**Public Transportation** - Transportation service that is available to any person upon payment of the fare and which cannot be reserved for the private or exclusive use of one individual or group. "Public" in this sense refers to the access to the service, not the ownership of the system providing the service. Public transportation service must be open door. Public transportation must provide a shared-ride on a regular basis. Shared ride means two or more passengers in the same vehicle who are otherwise not traveling together. Every trip does not have to be a shared ride but the general nature of the service must include shared rides.

**Section 5307; Urban Transit Program** - The FTA's Urbanized Area Formula Funding program (49 U.S.C. 5307) makes federal resources available to urbanized areas and to governors for transit capital and operating assistance in urbanized areas and for transportation-related planning. An urbanized area is an incorporated area with a population of 50,000 or more that is designated as such by the U.S. Department of Commerce, Bureau of the Census.

**Section 5310; Enhanced Mobility of Seniors & People with Disabilities program** – Also known as the Specialized Transportation or Section 5310 program makes federal resources available to improve mobility for seniors and individuals with disabilities by removing barriers to transportation service and expanding transportation mobility options. This program supports transportation services planned, designed, and carried out to meet the special transportation needs of seniors and individuals with disabilities. Transportation services are supported in all areas – large urbanized (over 200,000), small urbanized (50,000-200,000), and rural (under 50,000). The Indiana Department of Transportation, Office of Transit (INDOT) administers the Section 5310 Program in Indiana for small urban and rural areas. Large urban area programs are administered at a regional level. The Federal share is 80 percent for capital projects. In Indiana, the program has historically been utilized for capital program purchases.

**Section 5311; Rural Transit Program** – The Formula Grants for Rural Areas program provides capital, planning, and operating assistance to States to support public transportation in rural areas with populations of less than 50,000, where many residents often rely on public transit to reach their destinations. The program also provides funding for state and national training and technical assistance through the Rural Transportation Assistance Program. Additional information is available at [www.transit.dot.gov/funding/grants/grant-programs/formula-grants-rural-areas-5311](http://www.transit.dot.gov/funding/grants/grant-programs/formula-grants-rural-areas-5311). The Indiana Department of Transportation, Office of Transit (INDOT) administers the Section 5311 program in Indiana. The Federal share is 80 percent for capital projects. The Federal share is 50 percent for operating assistance.

**Section 5311(f): Intercity Bus Program** – The Intercity Bus Program (49 U.S.C. 5311(f)) supports the connection between nonurbanized areas and larger regional or national system of intercity bus service. It supports services to meet the intercity travel needs of residents in nonurbanized areas. The Program

supports infrastructure of the intercity bus network through planning and marketing assistance and capital investment in facilities. The Federal Transit Administration (FTA) encourages States to use the funding to support the above noted objectives as well as priorities determined by States.

**Section 5339; Bus and Bus Facilities Grants Program** – The Grants for Buses and Bus Facilities program makes Federal resources available to States and direct recipients to replace, rehabilitate and purchase buses and related equipment and to construct bus-related facilities including technological changes or innovations to modify low or no emission vehicles or facilities. Funding is provided through formula allocations and competitive grants. Eligible recipients include direct recipients that operate fixed route bus service or that allocate funding to fixed route bus operators; State or local governmental entities; and Federally recognized Indian tribes that operate fixed route bus service that are eligible to receive direct grants under Sections 5307 and 5311. Subrecipients may allocate amounts from the grant to subrecipients that are public agencies or private nonprofit organizations engaged in public transportation.

Public transit agencies under 5311 are now using 5339 to purchase vehicles. INDOT no longer receives grant applications under the 5310 programs from the 5311 services. In this way Section 5310 funding is freed up for the subrecipients that are not public transit operators.

**Subrecipient** - A Non-Federal entity that receives a sub-award (grant funding) from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. Subrecipient programs are monitored by the direct or designated recipient for grant performance and compliance.

**Urbanized Area (UZA)** - As of the 2010 Census, an urban area comprises a densely settled core of census tracts and/or census blocks that meet minimum population density requirements, along with adjacent territory containing non-residential urban land uses as well as territory with low population density included to link outlying densely settled territory with the densely settled core. To qualify as an urban area, the territory identified according to criteria must encompass at least 2,500 people, at least 1,500 of which reside outside institutional group quarters. The Census Bureau identifies areas as follows:

- Urbanized Areas (UAs) of 50,000 or more people; Small Urban Areas contain between 50,000 and 200,000 people, while Large Urban Areas have more than 200,000 people.
- Urban Clusters (UCs) of at least 2,500 and less than 50,000 people.
- “Rural” encompasses all population, housing, and territory not included within an urban area.

**Zero Vehicle Households** – No vehicles available to a housing unit, according to U.S. Census data. This factor is an indicator of demand for transit services.

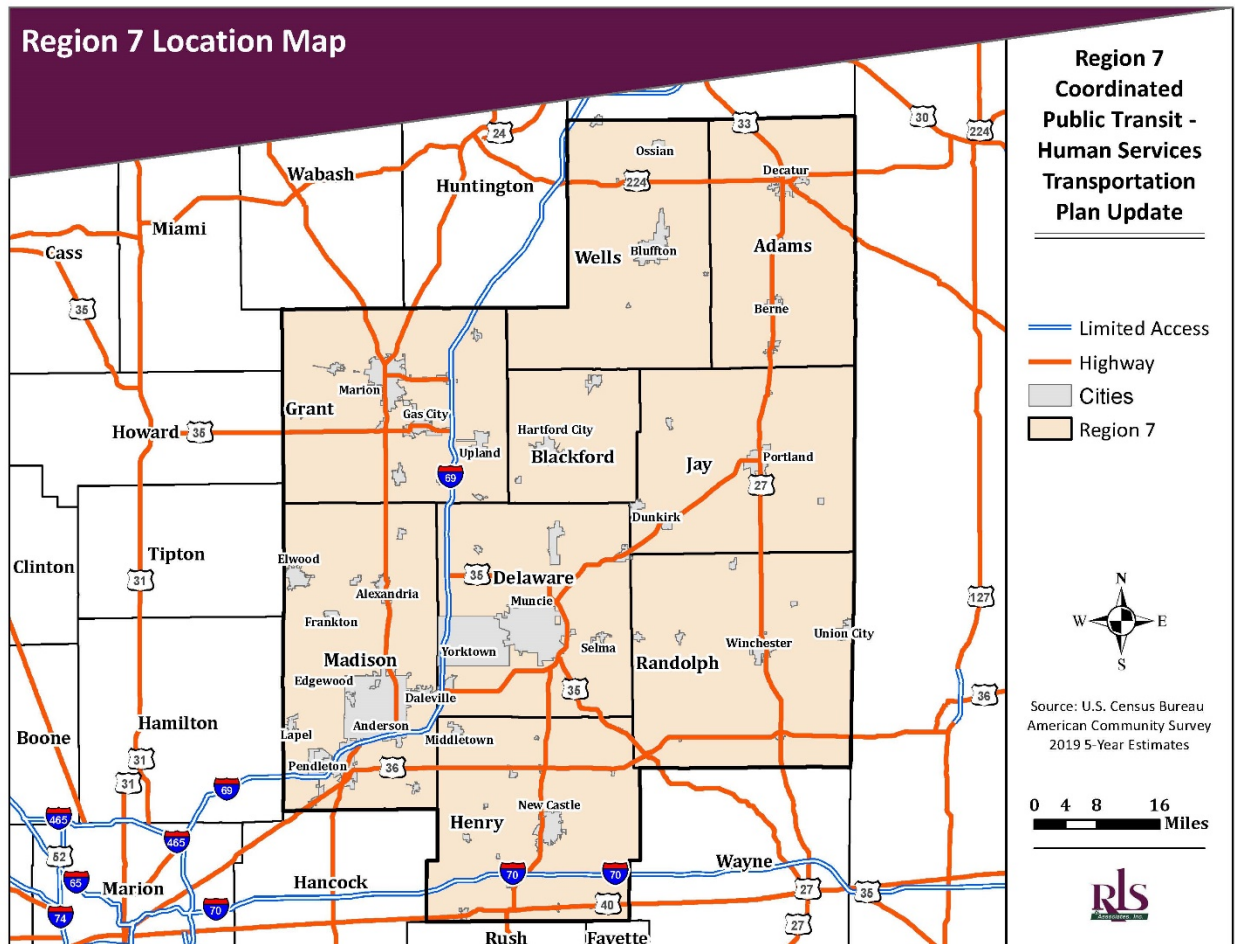


## EXISTING CONDITIONS

Region 7 is in the central-eastern part of Indiana along the Indiana-Ohio boundary and includes the counties of Adams, Blackford, Delaware, Grant, Henry, Jay, Madison, Randolph, and Wells in Indiana. The map in Exhibit 1 provides a depiction of the area included in this study. The study area is served by the following major highways: Interstate 70 and 69 and U.S. Routes 9, 27, 33, 35, 36, 40 and 224.

The demographics of an area are a strong indicator of demand for transportation service. The data provided in this section has been gathered from multiple sources including the U.S. Census Bureau’s 2019 American Community Survey (ACS) Five-Year Estimates and the State of Indiana. These sources are used to ensure that the most current and accurate information is presented. As a five-year estimate, the data represent a percentage based on a national sample and does not represent a direct population count.

**Exhibit 1: Region 7 Location Map**

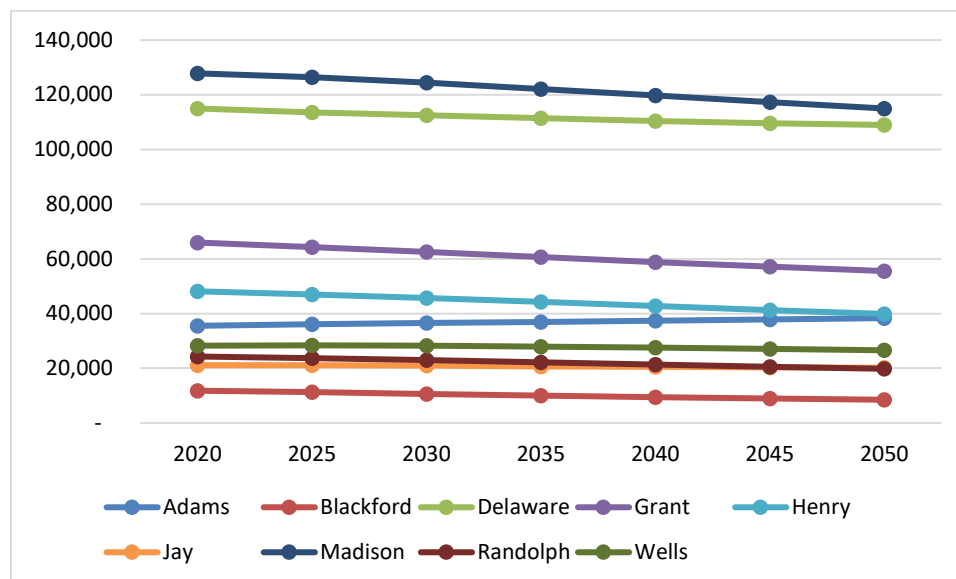


The provision of transportation service at State, regional, and local levels has been affected by the COVID-19 Pandemic, beginning in March 2020 in the United States. The sensible public health precautions taken by transit have increased costs, which were partially covered for public transit agencies by Federal CARES Act funding. As stay-at-home orders and social distancing were implemented to reduce the spread of disease, many Human Service Agencies had to close or reduce their programs, while the seniors, individuals with disabilities, and other riders limited travel to essential trips or completely quarantined. The general loss of individual incomes and agency or government revenues was widespread, and the ridership of many transit programs is significantly decreased. This drop in ridership and continuing health impact for vulnerable populations will affect the landscape of transportation planning. With the deployment of vaccines in 2021, there is more likelihood of returning to full operation, but many agencies are planning for a slow recovery of ridership.

## POPULATION PROJECTIONS

STATS Indiana, using data from the Indiana Business Research Center at IU Kelley School of Business, projects the Region’s population will fall from a 2020 population of 95,710 to 88,718 by 2050, an estimated loss of seven percent over 30 years. Exhibit 2 shows population trends between 2020 and 2050 for each county in Region 7. All counties are projected to experience a similar, gradual reduction in population. These projections were formulated prior to the Covid-19 national increase in death rates.

**Exhibit 2: Population Trends for Region 7, 2020-2050**



The decline or growth of a population can affect the local tax revenues the counties gather and the services they can offer in return for those taxes. The cost-effectiveness of transportation service is also impacted by fewer or more users. As public transportation grants often require a local match, the loss of local tax revenue

could impact the amount of matching dollars the counties have available. If public transportation services are a priority for the counties, they may look at this issue early to determine another source of reliable funds.

Within the general population, several segments have a higher likelihood of using community transportation services. School-aged children and youth are typically the responsibility of families and school district transportation programs and are not a subject of this study. Older adults experience typical health changes that restrict or change their ability to drive. Individuals with disabilities may also have health factors that restrict their driving or require specialized transportation options. Individuals with low income also may choose to use community transportation if they are faced with a choice between paying for a car and insurance or affording other priorities. These three groups can be seen as distinct, but tend to overlap, where an individual with disabilities might also have a low income, or an older adult may develop some disability or live with a reduced income.

## **OLDER ADULT POPULATION**

Older adults are most likely to use transportation services when they are unable to drive themselves or choose not to drive. On average, men outlive their ability to drive by seven years, and women outlive their driving ability by 10 years. Older adults also tend to be on a limited retirement income and, therefore, transportation services may be a more economical option than owning, insuring, fueling, and maintaining a personal vehicle. For these reasons, the population of older adults in an area is an indicator of potential transit demand.

There is a trend occurring in the United States relating to the aging of the population. People who were born during the post-WWII “baby boom,” era defined by the Census Bureau as persons born from 1946 through 1964 are the largest population demographic in the nation. These baby boomers are now reaching the ages of 57-75 and are becoming more likely to use transportation services if they are available.

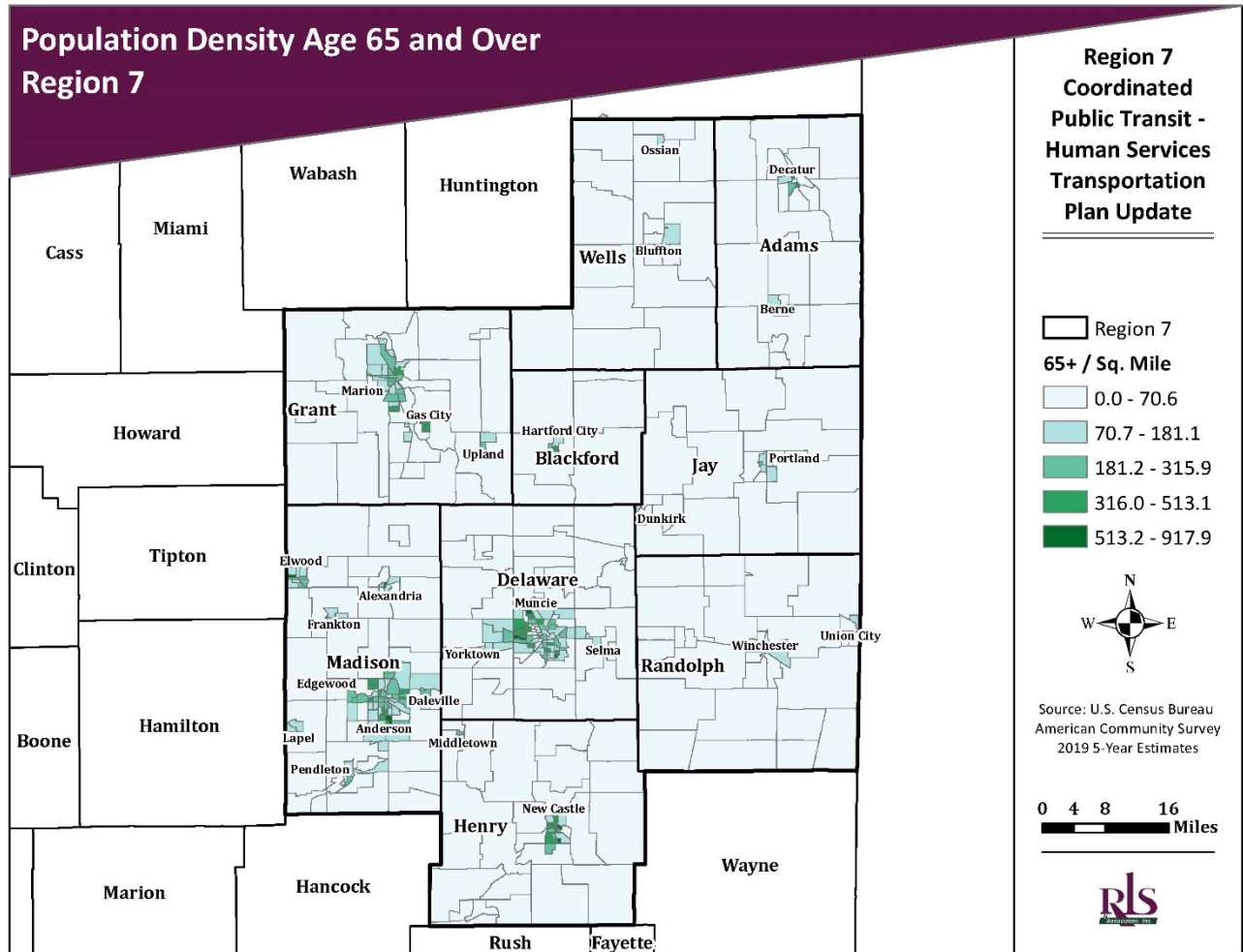
Further, the Administration on Aging (U.S. Department of Health and Human Services) reports that, based on a comprehensive survey of older adults, longevity is increasing and younger seniors are healthier than in all previously measured times in our history. As seniors ‘age in place’ by staying in their own homes or communities the transportation to their suburban or rural locations transitions from being a personal choice to a social negotiation, with senior centers, friends, and family brought in, sometimes at a cost, to assist with mobility. Quality of life issues and an individual’s desire to live independently will put increasing pressure on existing transit services to provide mobility to this population. As older adults live longer and remain independent, the potential need to provide public and human service agency transportation is greatly increased.

Exhibits illustrating the population density of persons over 65 years of age by block group will be provided for each county of the Region in the County Profile section. The 2020 estimated percentage of population over the age of 65 for each county in the region is:

- ◆ 16% in Adams County
- ◆ 22% in Blackford County
- ◆ 18% in Delaware County

- ◆ 20% in Grant County
- ◆ 20% in Henry County
- ◆ 18% in Jay County
- ◆ 19% in Madison County
- ◆ 21% in Randolph County, and
- ◆ 20% in Wells County
- ◆ 16% Indiana state average

**Exhibit 3: Region 7 Density of Persons 65 Years and Over**



## INDIVIDUALS WITH DISABILITIES

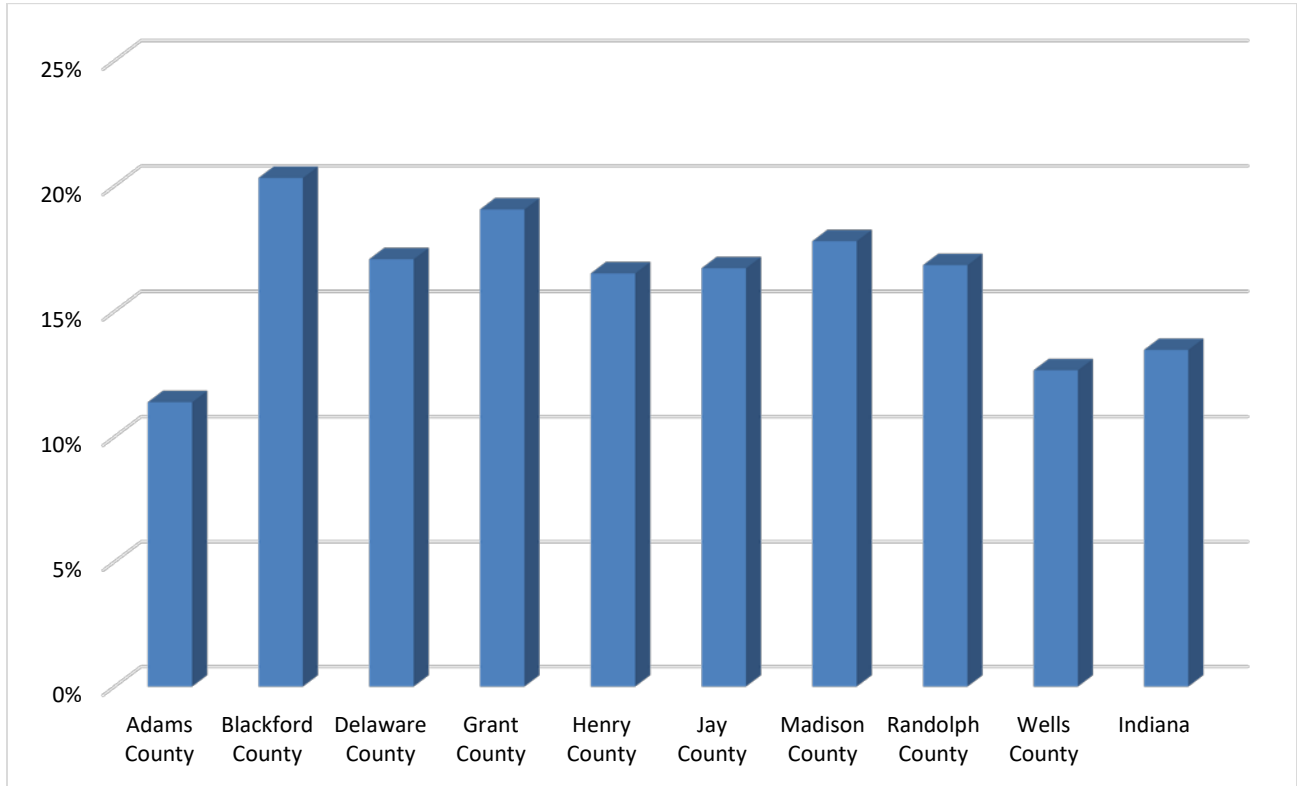
Enumeration of the population with disabilities in any community presents challenges. First, there is a complex and lengthy definition of a person with a disability in the Americans with Disabilities Act implementing regulations, which is found in 49 CFR Part 37.3. This definition, when applied to transportation services applications, is designed to permit a functional approach to disability determination rather than a strict categorical definition. In a functional approach, the mere presence of a condition that is typically thought to be disabling gives way to consideration of an individual's abilities to perform various life functions. In short, an individual's capabilities, rather than the mere presence of a medical condition, determine transportation disability.

The U.S. Census offers no method of identifying individuals as having a transportation-related disability. The best available data for Region 7 is available through the 2019 ACS Five-Year Estimates of disability for the noninstitutionalized population. Exhibit 4 is intended to provide a comparison of the disabled population in each county within the Region.

In the 2017 study, the highest population of individuals with a disability lived in Madison County. Based on current estimates, Madison County is currently home to the largest number of individuals with a disability, at 23,041, or 18 percent of the population, but Blackford County has the highest percentage at 20 percent or 2,441 individuals. This region has a higher incidence rate than the average 13 percent for Indiana. The total disabled population estimate for the counties is as follows:

- ◆ Adams County 4,042 Individuals with disabilities or 11% of the population
- ◆ Blackford County 2,441 Individuals or 20%
- ◆ Delaware County 19,644 Individuals or 17%
- ◆ Grant County 12,669 Individuals or 19%
- ◆ Henry County 7,969 Individuals or 17%
- ◆ Jay County 3,484 Individuals or 17%
- ◆ Madison County 23,041 Individuals or 18%
- ◆ Randolph County 4,198 Individuals or 17%
- ◆ Wells County 3,543 Individuals or 13%
- ◆ Indiana 897,234 Individuals or 13%

**Exhibit 4: Estimated incidence of disability as a percent of total population for Region 7, 2019**

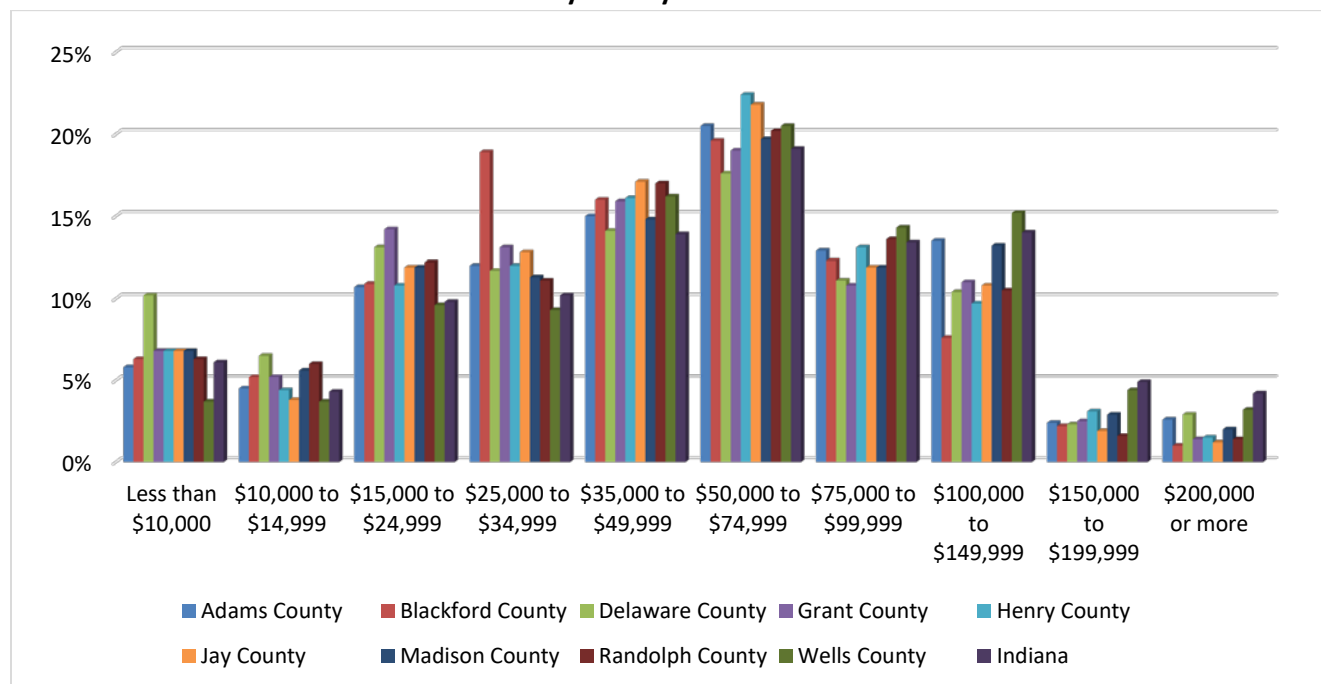


### HOUSEHOLD INCOME AND POVERTY STATUS

Exhibit 5 illustrates the household incomes for the study area according to the 2019 ACS Five-Year Estimates. Given the economic impact of the Covid pandemic, the data from 2019 is presenting a picture of the conditions before 2020's dramatic changes and recession.

According to the survey, there are a total of 188,712 households in Region 7 up slightly from 189,576 in 2017. Of those households, 57,368 or 30 percent earn less than \$35,000 annually. Of the households earning less than \$35,000, some 10.2 percent earned between \$25,000 and \$34,999. Another 9.8 percent earned between \$15,000 and \$24,999 and about 10.4 percent earned less than \$15,000 per year. Delaware County stands out for having a high number of households earning under \$10,000, and Blackford has the largest number of households earning in the \$25,000 to \$34,999 range. The median household income for each area is shown in Exhibit 6.

**Exhibit 5: Distribution of Household Income by County**



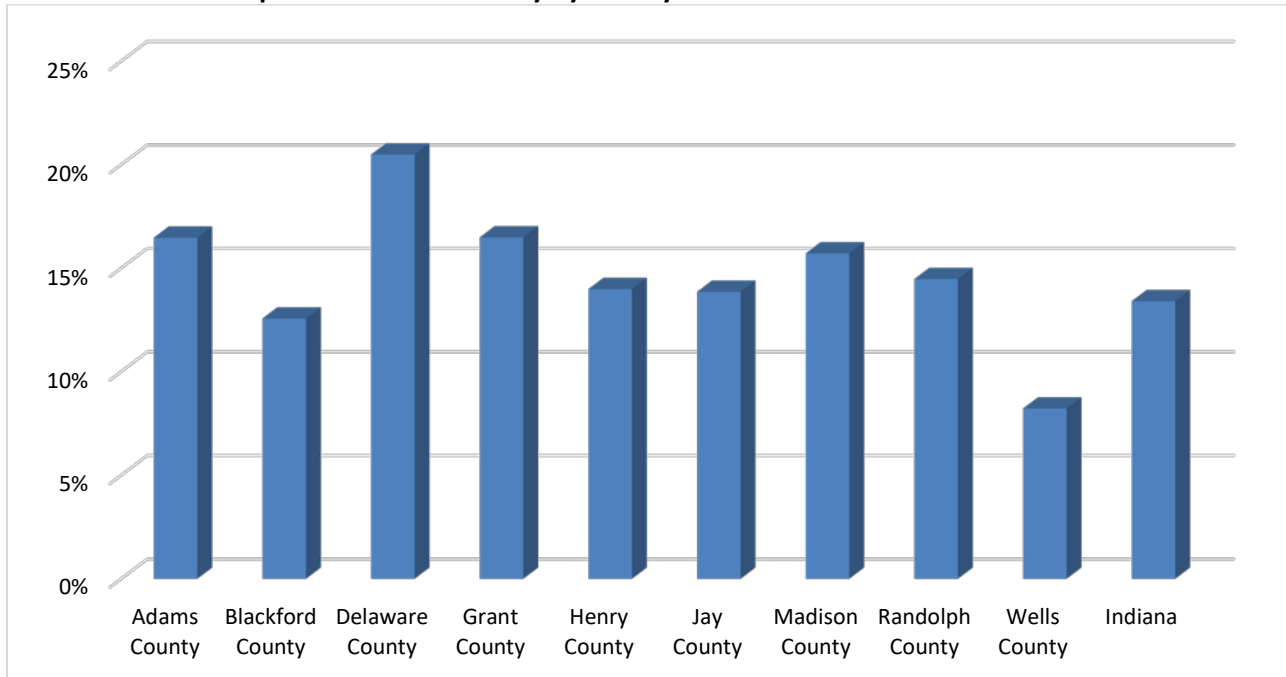
**Exhibit 6: Median Household Income**

County	Median Household Income
Adams County	\$52,504
Blackford County	\$43,505
Delaware County	\$43,512
Grant County	\$44,356
Henry County	\$49,832
Jay County	\$47,658
Madison County	\$49,522
Randolph County	\$48,036
Wells County	\$59,237
Indiana	\$56,303

Exhibit 7 illustrates the percentage of the population in each county that is living below the poverty level. As the census data was reported for 2019, the poverty guideline for that year was set at an annual income of 25,750 for a family of four. Delaware County has the highest percent of population living below the poverty level with 20.49 percent. Grant and Adams Counties had the second and third highest percentage of population living in poverty with 16.48 and 16.47 percent. Wells, at 8.22 percent, is the only county under the state average of 13.4 percent. In 2021, the poverty guideline is an annual income of \$26,500 for a family of four or \$12,880 for an individual.



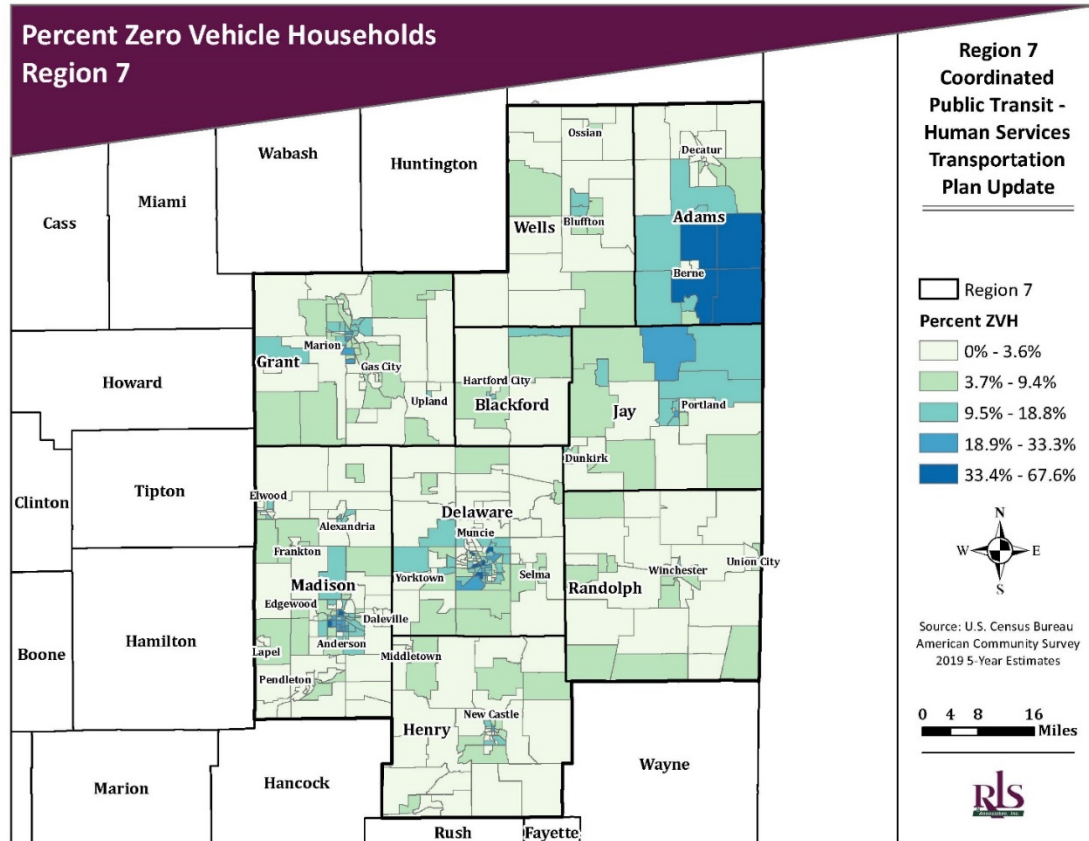
**Exhibit 7: Percent Population Below Poverty by County**



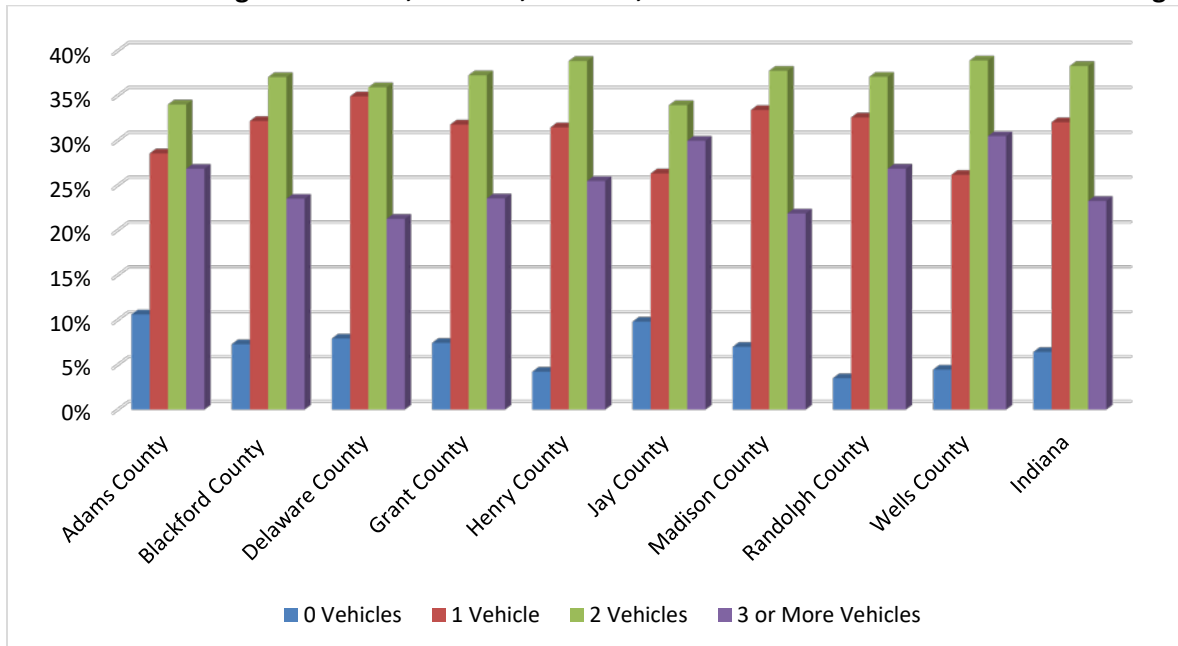
### ZERO VEHICLE HOUSEHOLDS

The number of vehicles available to a housing unit is also used as an indicator of demand for transit service. There are 13,292 households in the Region that have no available vehicle. This is seven percent of all the households in the Region. The percentage of zero-car households in this region has grown from 4.7 percent in the 2017 study. The counties range from 3 percent in Randolph County up to 11 percent of households with no vehicle available in Adams, in comparison with a 6 percent average for Indiana. An Amish community in Adams County creates the higher demographic percentage. An additional 60,811 or 32 percent of households in the Region have only one vehicle. Exhibit 8 shows the vehicle availability per household in each county. Exhibit 9 compares the counties' percentages of zero-car, one-car, two-car, and three- or more car households with each other and the state averages.

**Exhibit 8: Vehicles Available per Household for Region 7**



**Exhibit 9: Percentage of Zero-Car, One-Car, Two-Car, and Three- or More Car Households in Region 7**



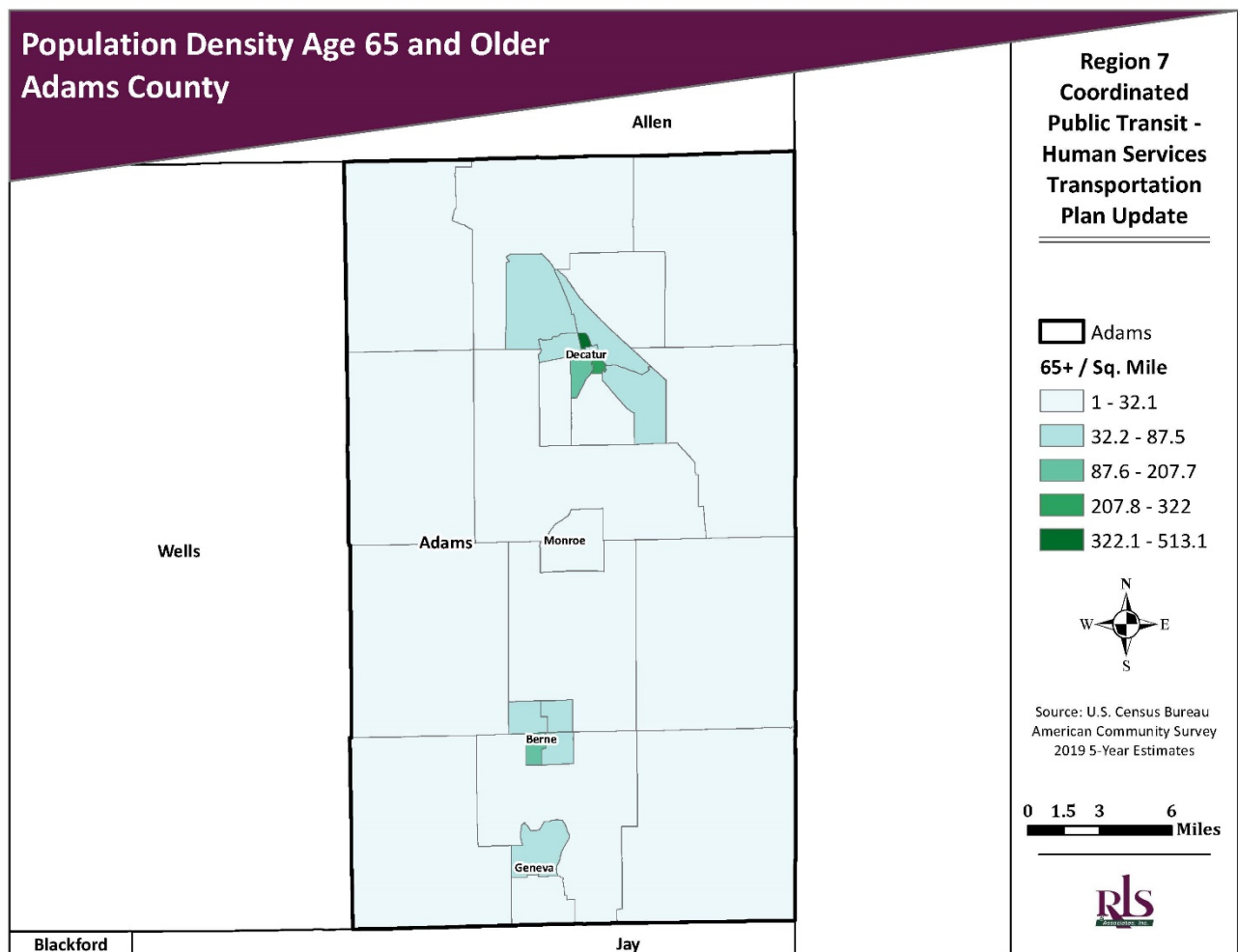
## COUNTY PROFILES

### Adams County

#### Older Adult Population

Exhibit 10 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Adams County residents aged 65 and older are in Decatur. These block groups had densities of older adults between 322 and 513 persons per square mile. Moderately high densities of older adults are also in Decatur, Berne, and Geneva. The remainder of the County had low to very low densities of people age 65 and older.

**Exhibit 10: Adams Older Adults Density Map**

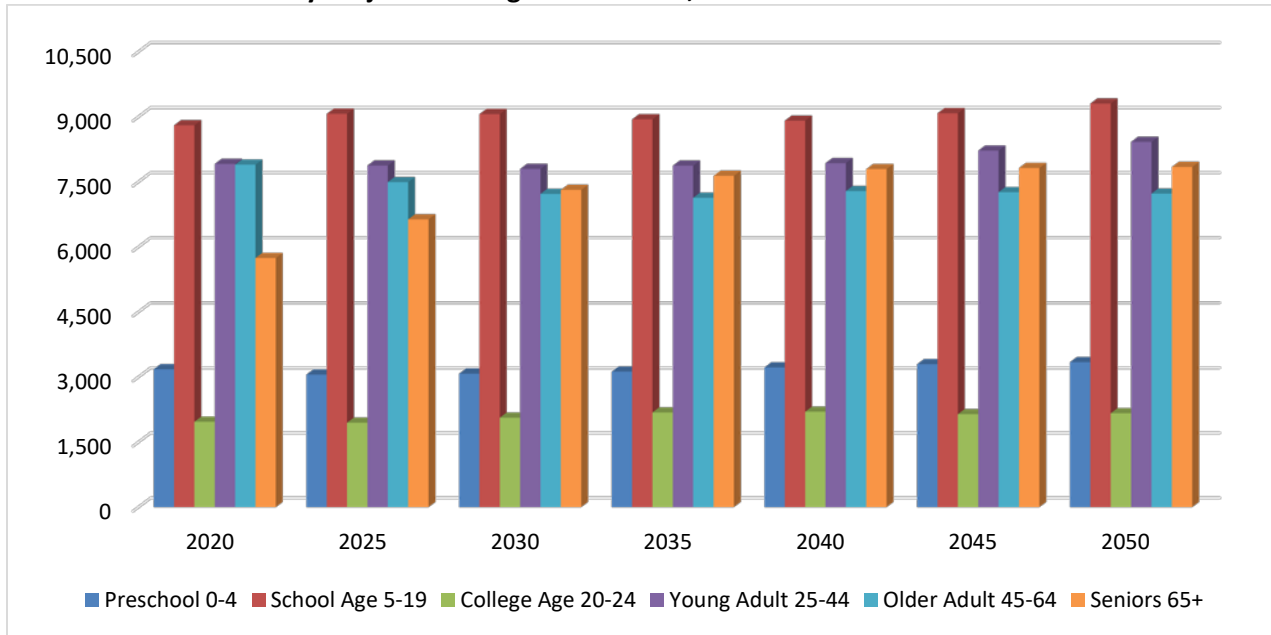


#### Population by Age

The largest age cohort for Adams County in 2020 is School Age, Age 5-19, followed by Young Adults, Age 25-44, and Older Adults, Age 45-64. The senior population is projected to grow from 5,744 individuals or 16.2 percent of the county's population in 2020 to 7,844 individuals or 20.5 percent of the county population in

2050. The other age groups are projected to grow slightly over time, except for the older adults 45-64 group that declines slightly. The projections help explain changes in the transportation needs of each age cohort, which the plan can prepare for.

**Exhibit 11: Adams County Projection of Age Distribution, 2020 - 2050**

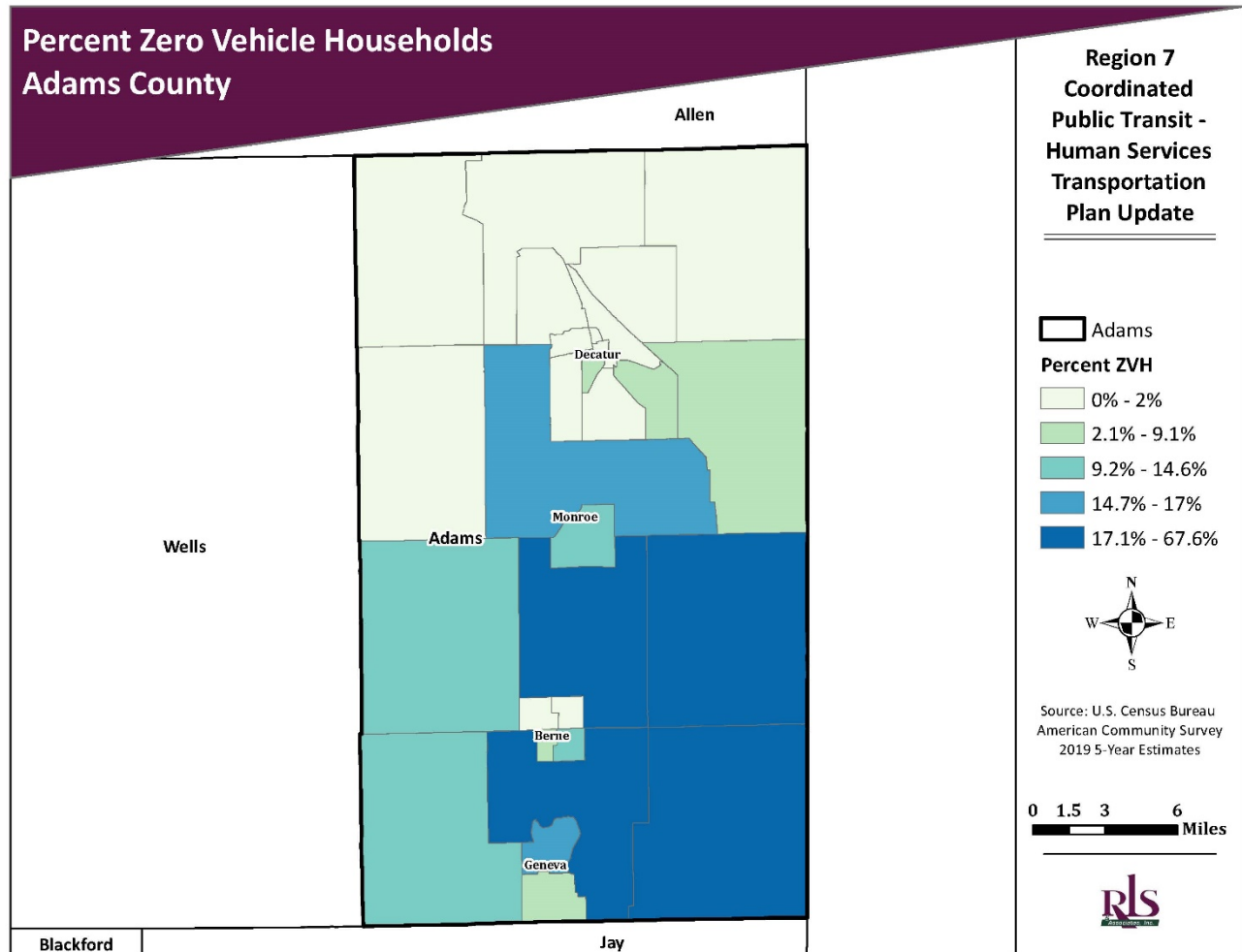


**Economic Profile**

Transportation is typically a household’s second-largest expense after housing itself. The characteristics of the neighborhood or community a household chooses to live within will impact the costs of transportation. Locations that are close to services and employment will allow the household to spend less time, energy, and money on transportation, while more rural locations may create additional costs and time for transportation. The national average cost to own, fuel, insure, and maintain a personal vehicle is \$12,164 per the 2019 Consumer Expenditure Survey, or an average of 16% of household expenses each year. In Adams County, the H+T Index calculates the typical regional household spends \$14,623 on transportation.

Exhibit 12 illustrates the percentage of housing units that have no available vehicle, according to the 2019 ACS Five-Year Estimates. The block groups with the darkest shading have the highest percentage of housing units with no available vehicles. These block groups are concentrated in the southeast corner of the county, where an Amish population resides, with moderate percentages of zero vehicle households throughout the county south of Decatur. Between 17 and 67 percent of the households in the most concentrated areas have no access to a vehicle.

**Exhibit 12: Adams County Zero Vehicle Household Concentrations**



**Industry and Labor Force**

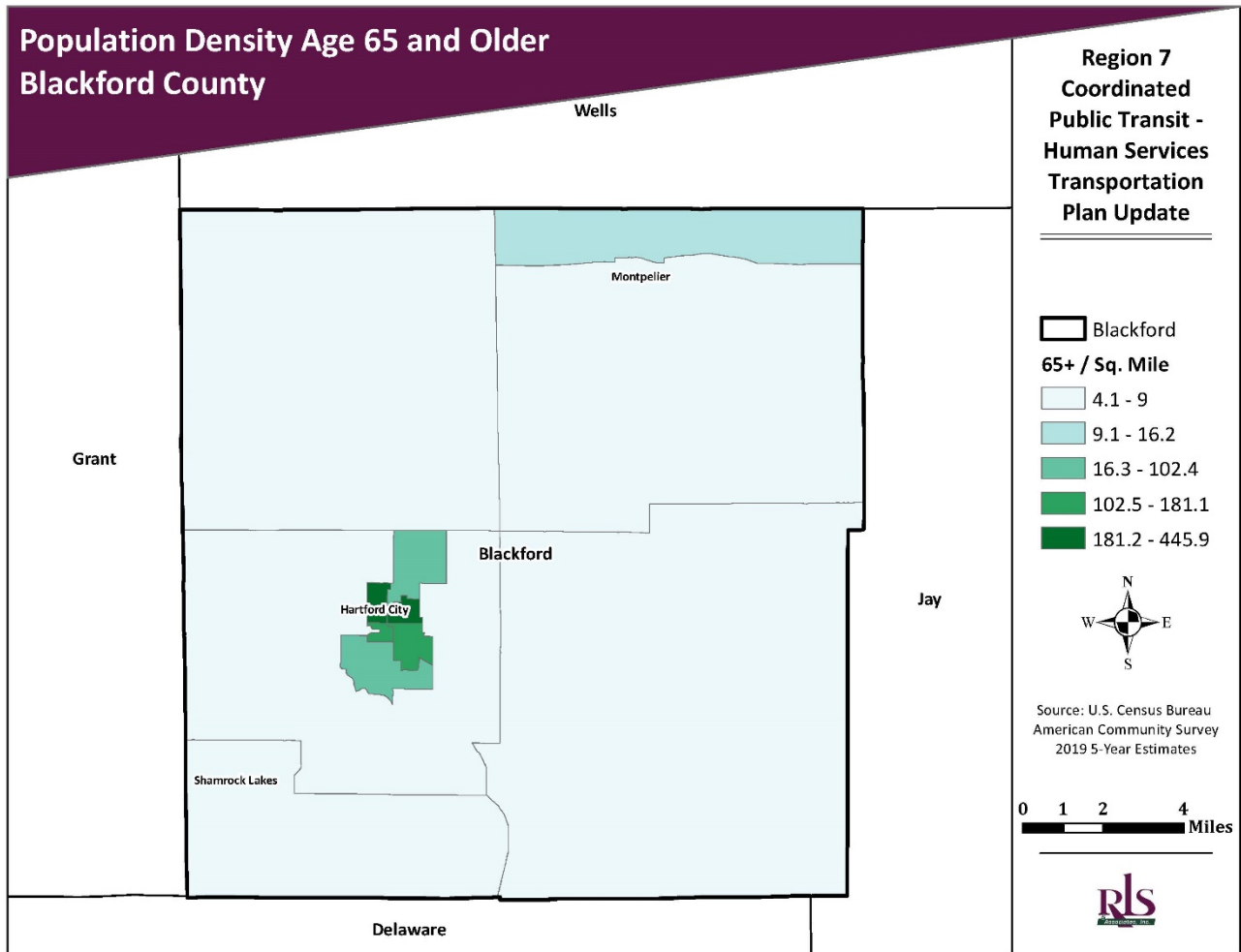
According to data from Stats Indiana, the largest percentage of jobs in Adams County is in the manufacturing sector, at 36.1 percent. Retail (10.9%), Health Care and Social Services (6.9%), and Accommodation and Food Services (6.2%) are the next highest employment sectors. Adams County has a total resident labor force of 16,771 individuals. The unemployment rate for Adams County was 5.6 for 2020.

**Blackford County**

**Older Adult Population**

Exhibit 13 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Blackford County residents aged 65 and older are in Hartford City. These block groups had densities of older adults between 181 and 445 persons per square mile. Moderately high densities of older adults are also in the Hartford City area and in Montpelier. The remainder of the County had low to very low densities of people age 65 and older.

**Exhibit 13: Population Density Age 65 and Older**

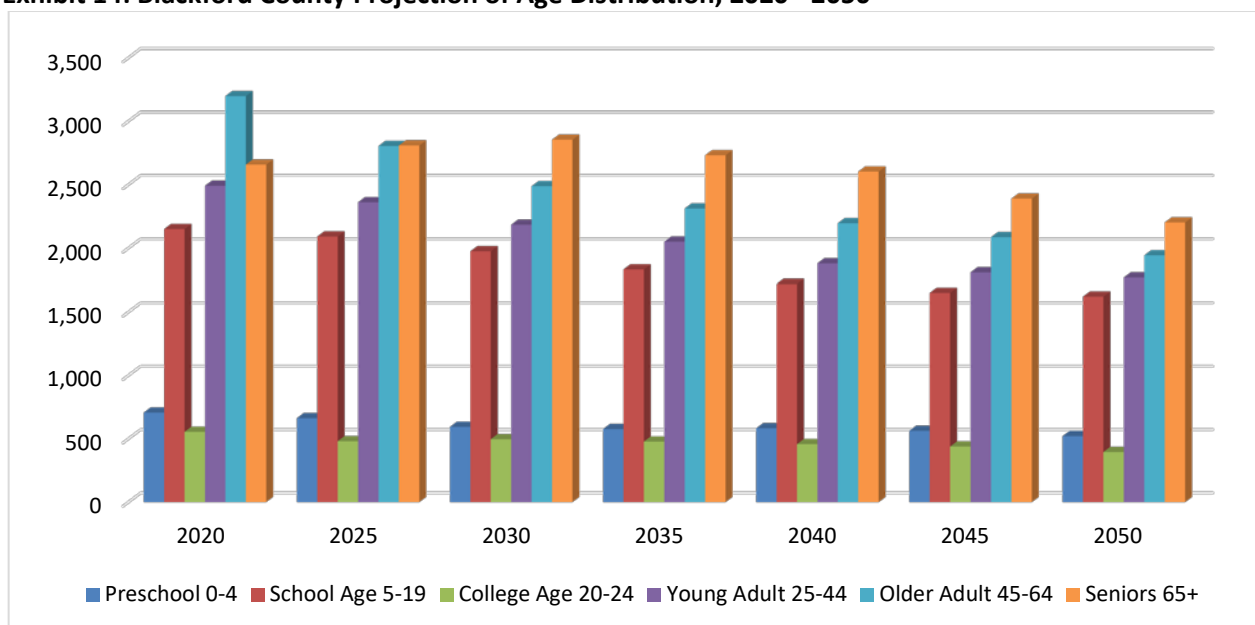


**Population by Age**

The largest age cohort in 2020 for Blackford County was Older Adults, Age 45-64, followed by Seniors, Age 65+, and Young Adults, Age 25-44. The Senior population is projected to grow from 2,658 individuals or 22.6 percent of the county’s population in 2020 to 2,809 individuals in 2030, then decline to 2,202 individuals or 26

percent of the county population in 2050. The other age groups are projected to decline slightly over time. The projections help explain changes in the transportation needs of each age cohort, which the plan can prepare.

**Exhibit 14: Blackford County Projection of Age Distribution, 2020 - 2050**



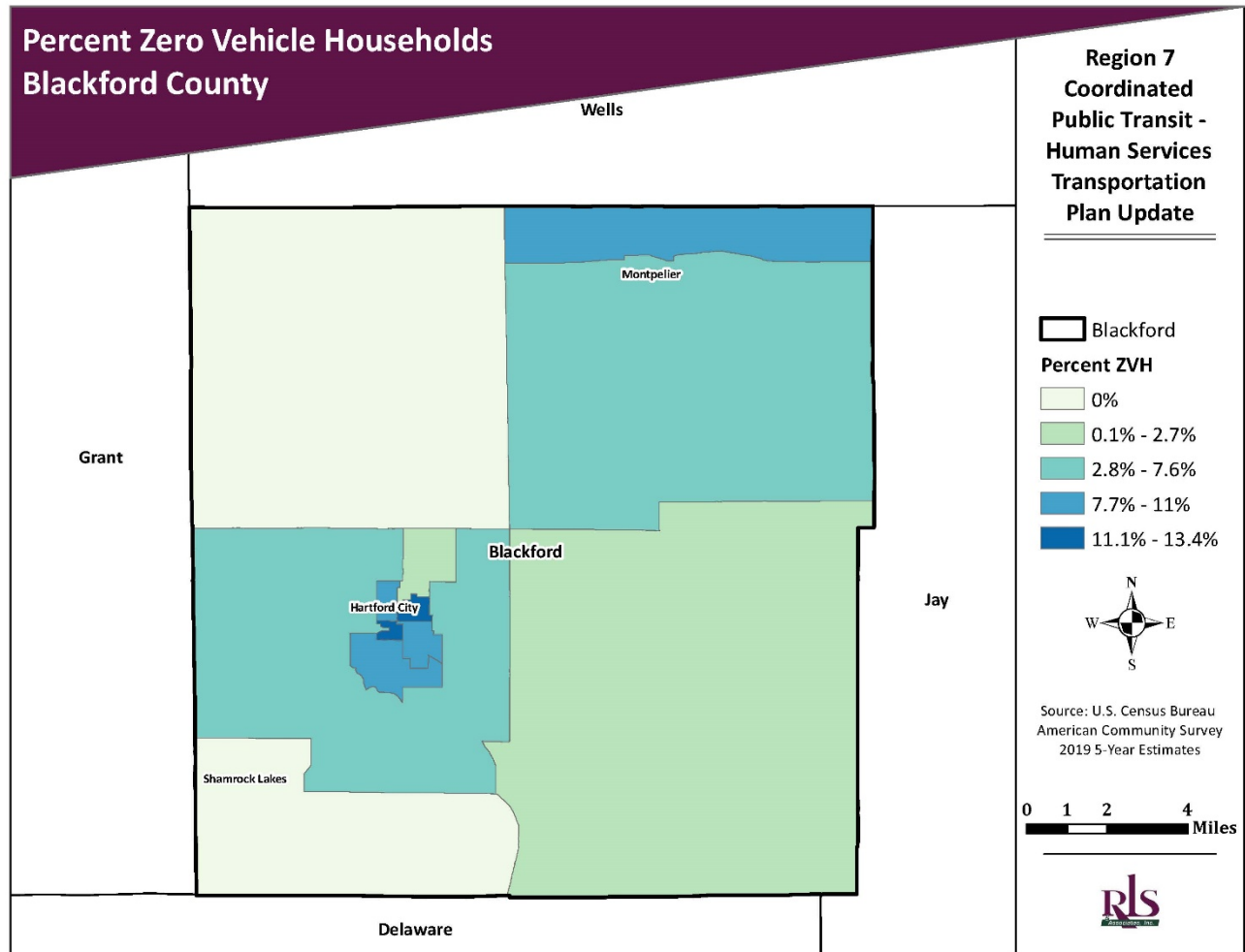
**Economic Profile**

Transportation is typically a household’s second-largest expense after housing itself. The characteristics of the neighborhood or community a household chooses to live within will impact the costs of transportation. Locations that are close to services and employment will allow the household to spend less time, energy, and money on transportation, while more rural locations may create additional costs and time for transportation. The national average cost to own, fuel, insure, and maintain a personal vehicle is \$12,164 per the 2019 Consumer Expenditure Survey, or an average of 16% of household expenses each year. In Blackford County, the H+T Index calculates the typical regional household spends \$12,507 on transportation annually.

Exhibit 15 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimates. The block groups with the darkest shading have the highest percentage of housing units with no available vehicles. These block groups are concentrated in Hartford City, with moderate percentages of zero vehicle households Around Hartford and Montpelier. Between 11.1 and 13.4 percent of the households in the most concentrated areas have no access to a vehicle.



**Exhibit 15: Blackford County Zero Vehicle Household Concentrations**



**Industry and Labor Force**

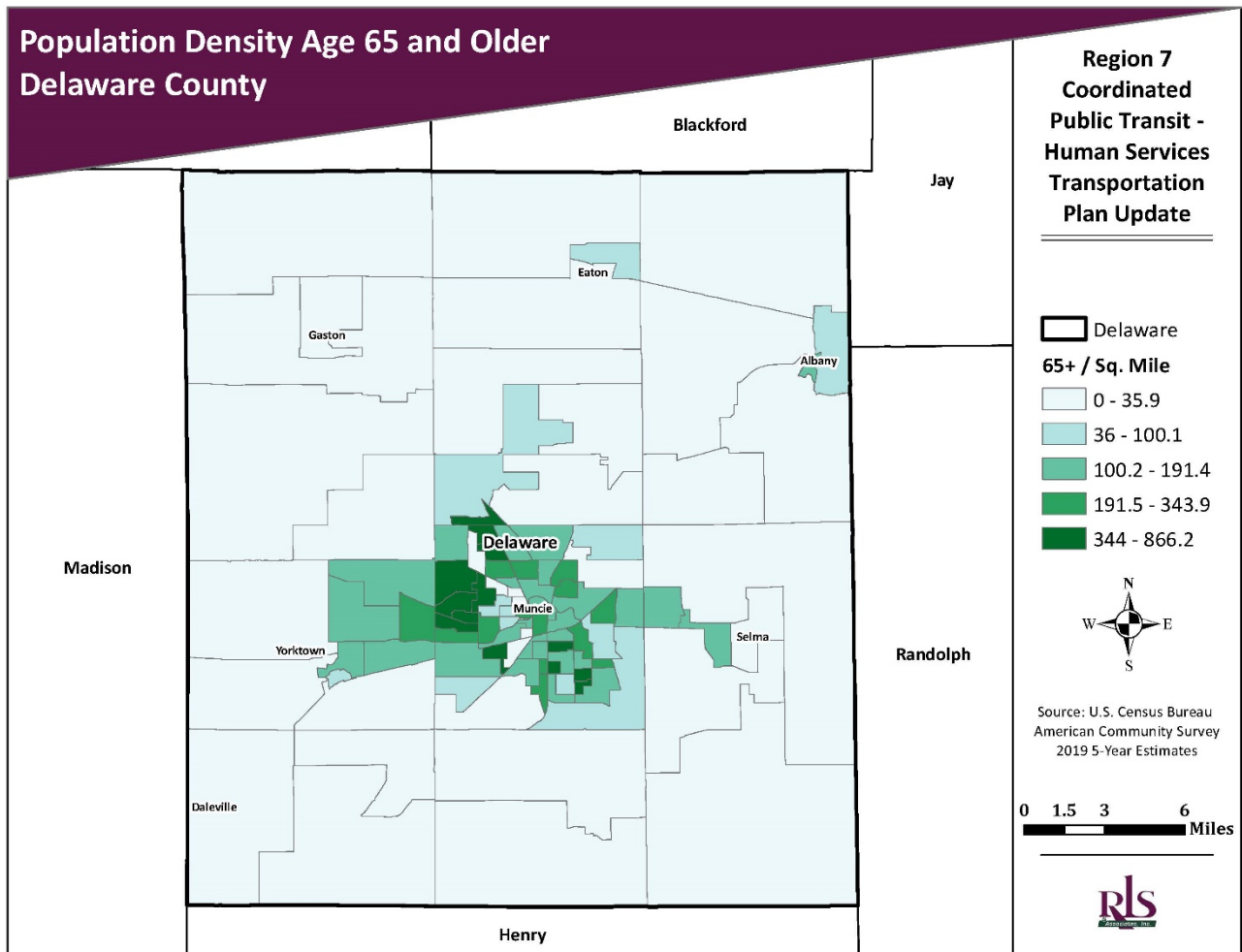
According to data from Stats Indiana, the largest percentage of jobs in Blackford County is in the manufacturing sector, at 28.1 percent. Health care and social services (14.1%) and retail (9.6%) are the next highest employment sectors. Blackford County has a total resident labor force of 2,797 individuals. The unemployment rate for the County was 8 percent for 2020.

**Delaware County**

**Older Adult Population**

Exhibit 16 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Delaware County residents aged 65 and older are northwest, west, and south of Muncie. These block groups had densities of older adults between 344 and 866 persons per square mile. Moderately high densities of older adults are also the areas surrounding Muncie to the east and west toward Yorktown. The neighborhoods to the west and northwest of Muncie are newer, high-value homes, according to feedback at the public input meeting. The remainder of the County had low to very low densities of people age 65 and older.

**Exhibit 16: Population Density Age 65 and Older**

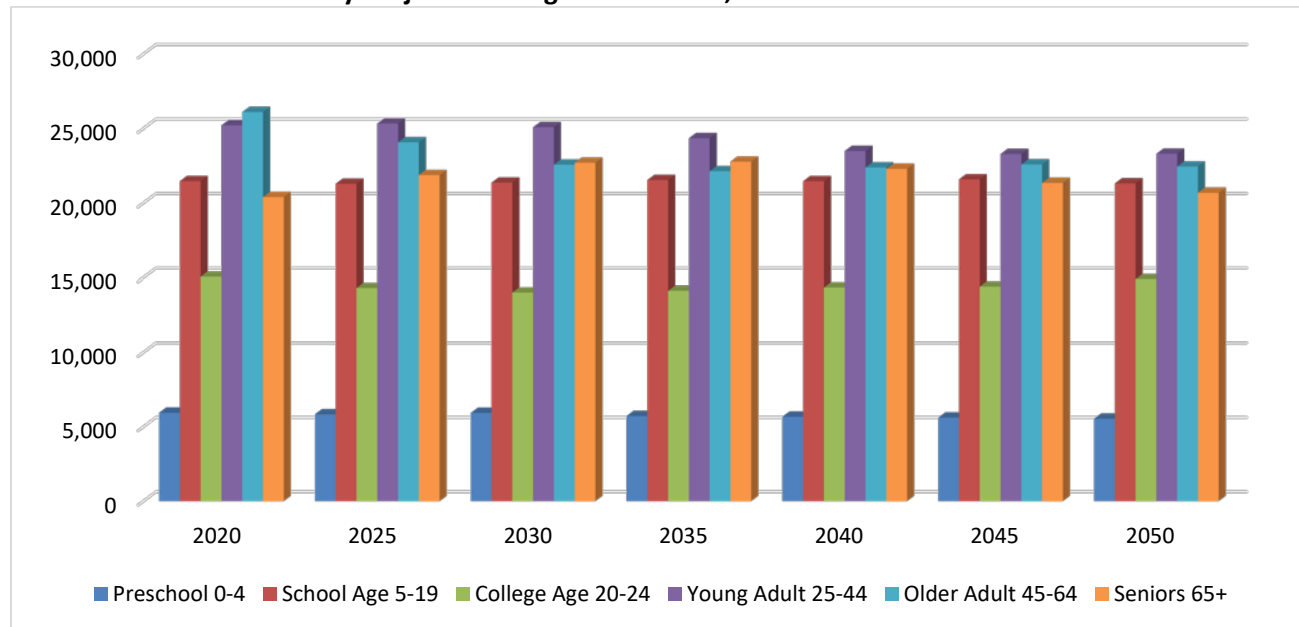


**Population by Age**

The largest age cohort projected for Delaware County in 2020 was Older Adults, Age 45-64, followed by Young Adults, Age 25-44, and School Age, Age 5-19. The senior population is projected to grow from 20,387 individuals or 17.8 percent of the county's population in 2020 to a peak of 22,769 individuals in 2035, then decline to 20,678 individuals or 19 percent of the county population in 2050. The older adults are projected to

decline slightly over time and be surpassed by the young adults in population. The preschool, school, and college age cohorts will remain stable. The projections help explain changes in the transportation needs of each age cohort, which the plan can prepare for.

**Exhibit 17: Delaware County Projection of Age Distribution, 2020 - 2050**

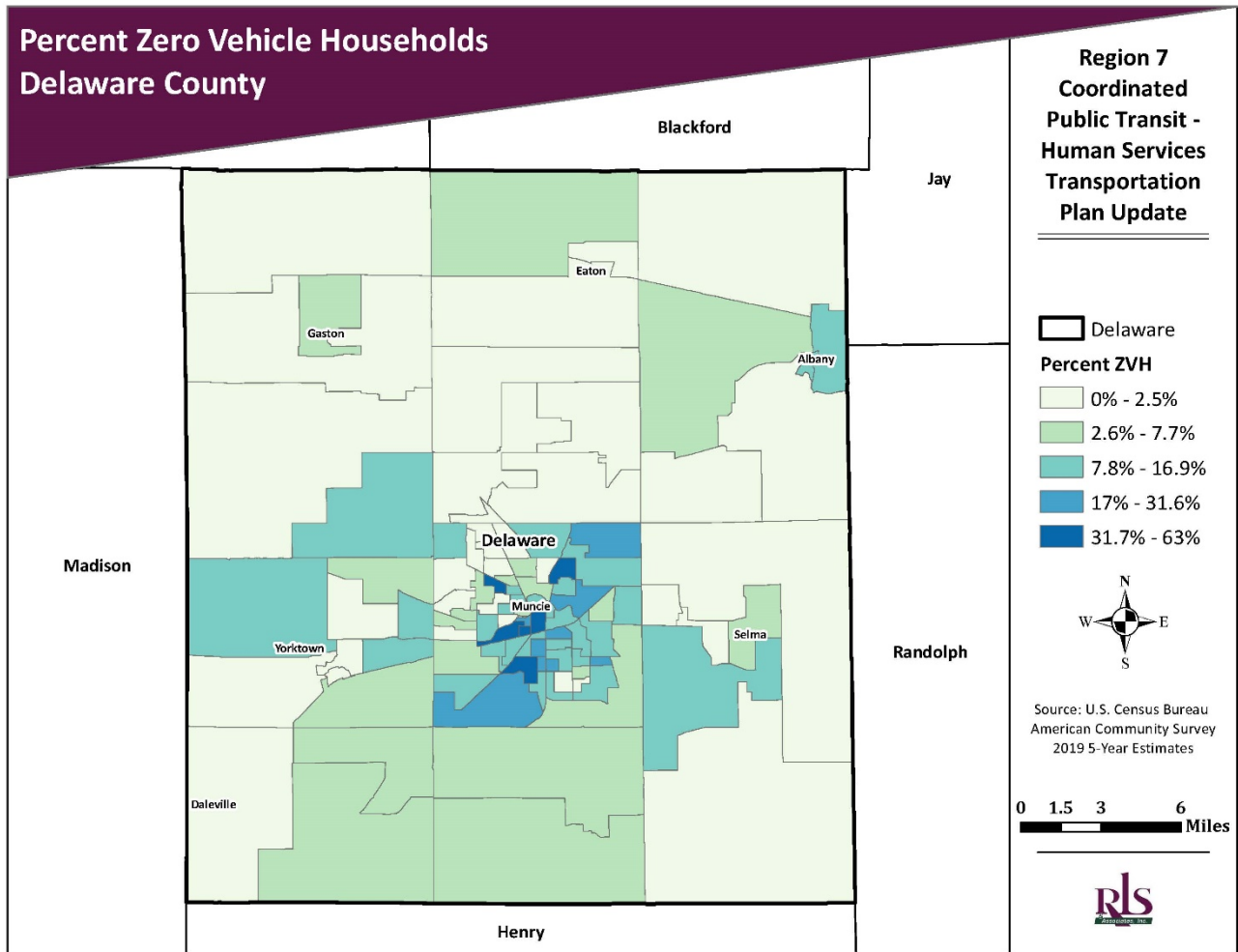


**Economic Profile**

Transportation is typically a household’s second-largest expense after housing itself. The characteristics of the neighborhood or community a household chooses to live within will impact the costs of transportation. Locations that are close to services and employment will allow the household to spend less time, energy, and money on transportation, while more rural locations may create additional costs and time for transportation. The national average cost to own, fuel, insure, and maintain a personal vehicle is \$12,164 per the 2019 Consumer Expenditure Survey, or an average of 16% of household expenses each year. In Delaware County, the H+T Index calculates the typical regional household spends \$11,681 on transportation annually.

Exhibit 18 illustrates the percentage and location of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimates. The block groups with the darkest shading have the highest percentage of housing units with no available vehicles. Between 31 and 63 percent of the households in the most concentrated areas have no access to a vehicle. These block groups are concentrated around Muncie in the Morningside, and Old West End areas, Thomas Park, Avondale, and the areas where college students live close to Ball State along Bethel Road, with moderate percentages of zero vehicle households east toward Selma, west and north of Yorktown, and on the east side of Albany.

**Exhibit 18: Delaware Zero Vehicle Household Concentrations**



**Industry and Labor Force**

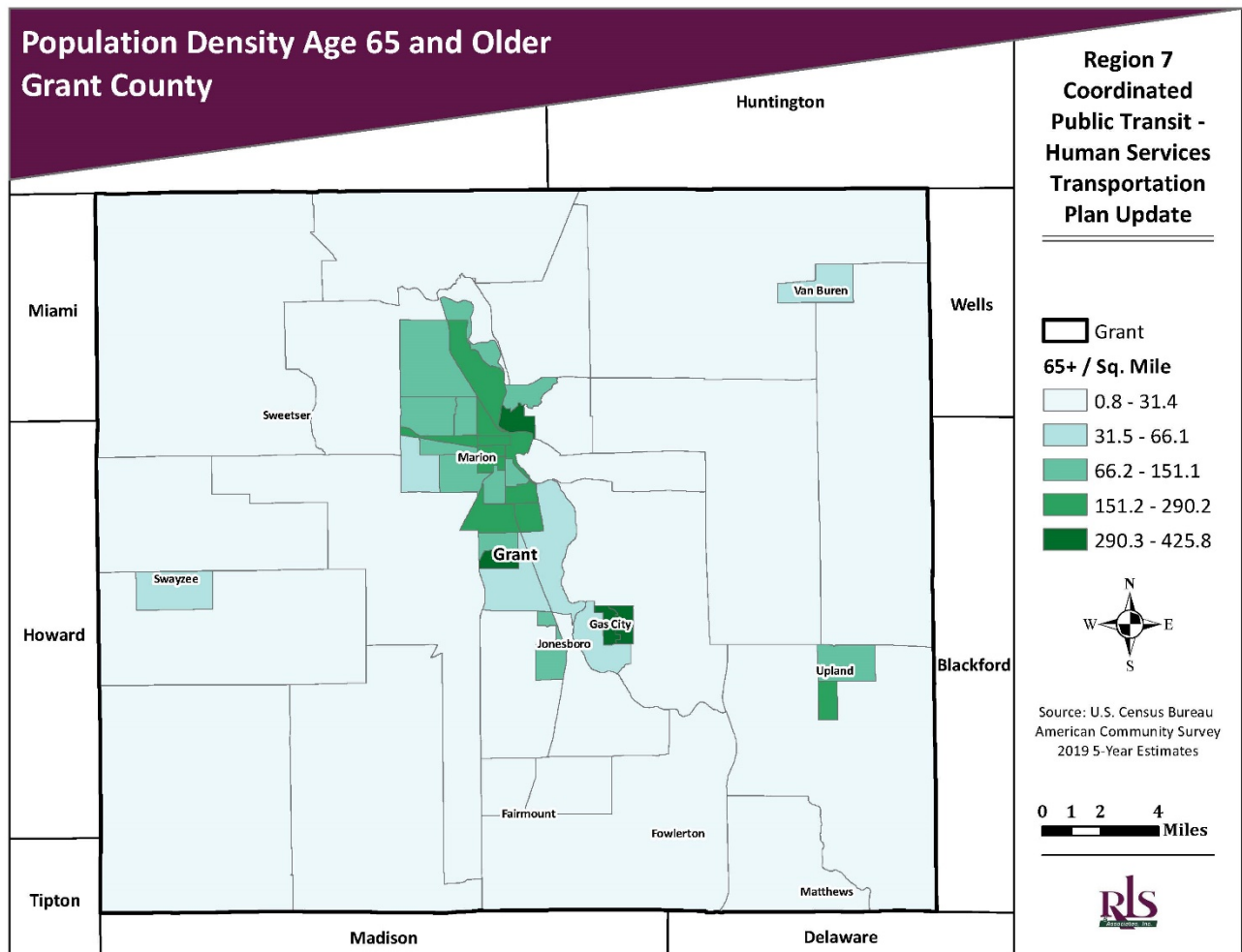
According to data from Stats Indiana, the largest percentage of jobs in Delaware County is in the Health Care and Social Services sector, at 21 percent. Retail (13.4%) and Accommodation and Food Services (10%) are the next highest employment sectors. Delaware County has a total resident labor force of 52,466 individuals. The unemployment rate for the County was 7.3 for 2020.

## Grant County

### Older Adult Population

Exhibit 19 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Grant County residents aged 65 and older are to the north and south of Marion, and in Gas City. These block groups had densities of older adults between 290 and 425 persons per square mile. Moderately high densities of older adults are also in a ring around Marion, in Upland and Jonesboro, and moderate densities are found in Swayzee and Van Buren. The remainder of the county had low to very low densities of people age 65 and older.

**Exhibit 19: Population Density Age 65 and Older**

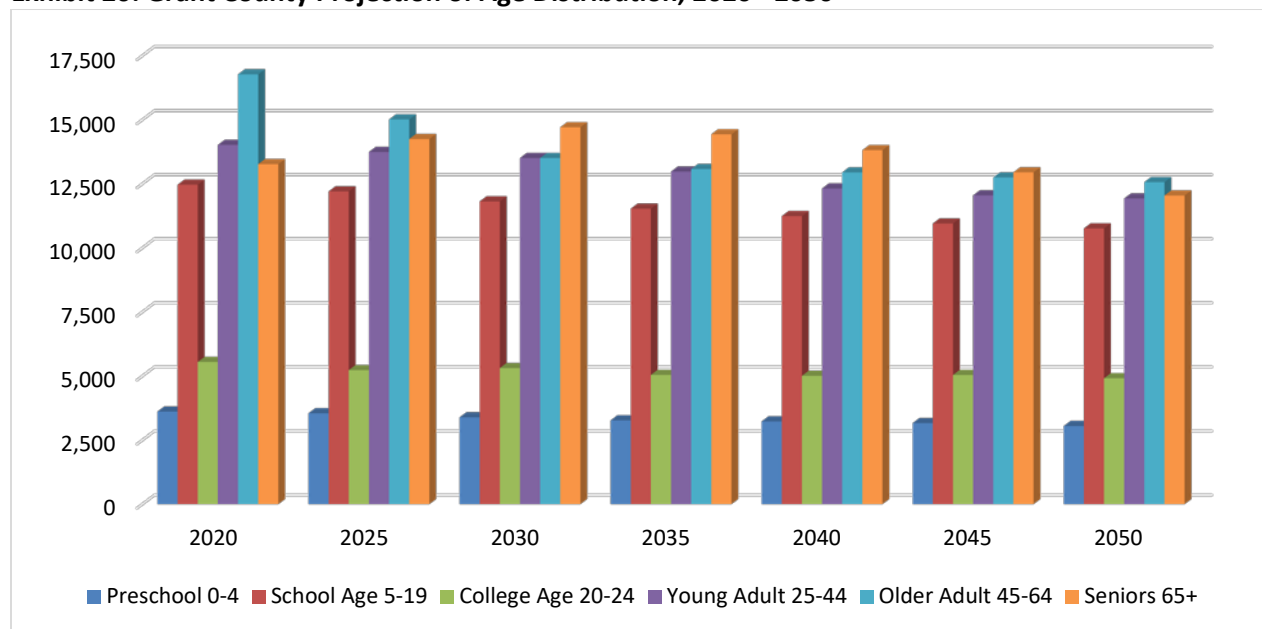


### Population by Age

The largest age cohort projected for Grant County was Older Adults, Age 45-64, followed by Young Adults, Age 25-44, and Seniors, Age 65+ in 2020. The Senior population is projected to grow from 13,268 individuals or 20.2 percent of the county's population in 2020 to 14,707 individuals in 2030, then decline to 12,044 individuals or 21.8 percent of the county population in 2050. The other age groups are projected to decline

slightly over time. The projections help explain changes in the transportation needs of each age cohort, which the plan can prepare for.

**Exhibit 20: Grant County Projection of Age Distribution, 2020 - 2050**

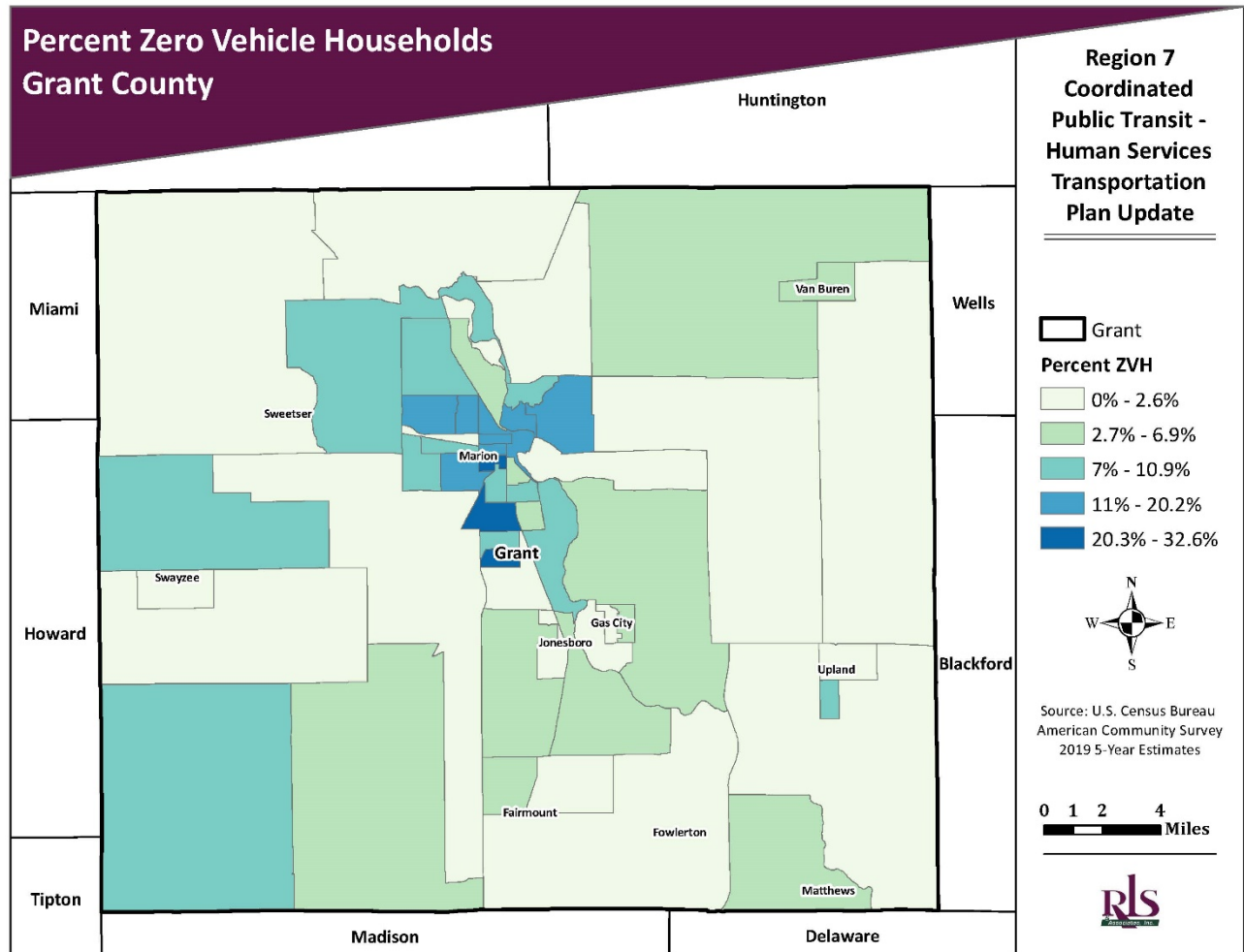


**Economic Profile**

Transportation is typically a household’s second-largest expense after housing itself. The characteristics of the neighborhood or community a household chooses to live within will impact the costs of transportation. Locations that are close to services and employment will allow the household to spend less time, energy, and money on transportation, while more rural locations may create additional costs and time for transportation. The national average cost to own, fuel, insure, and maintain a personal vehicle is \$12,164 per the 2019 Consumer Expenditure Survey, or an average of 16% of household expenses each year. In Grant County, the H+T Index calculates the typical regional household spends \$12,677 on transportation annually.

Exhibit 21 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimates. The block groups with the darkest shading have the highest percentage of housing units with no available vehicles. These block groups are concentrated in and to the south of Marion, with moderate percentages of zero vehicle households in the areas to the northwest of Marion, north of Swayzee, and the southwest corner of Grant County. Between 20.3 and 32.6 percent of the households in the most concentrated areas have no access to a vehicle.

**Exhibit 21: Grant County Zero Vehicle Household Concentrations**



**Industry and Labor Force**

According to data from Stats Indiana, the largest percentage of jobs in Grant County is in the Manufacturing business sector, at 16 percent. Retail (11.1%), transportation and warehousing (10.1%) and accommodation and food services (7.9%) are the next highest employment sectors. Grant County has a total resident labor force of 31,534 individuals. The unemployment rate for the county was 6.3 for 2020.

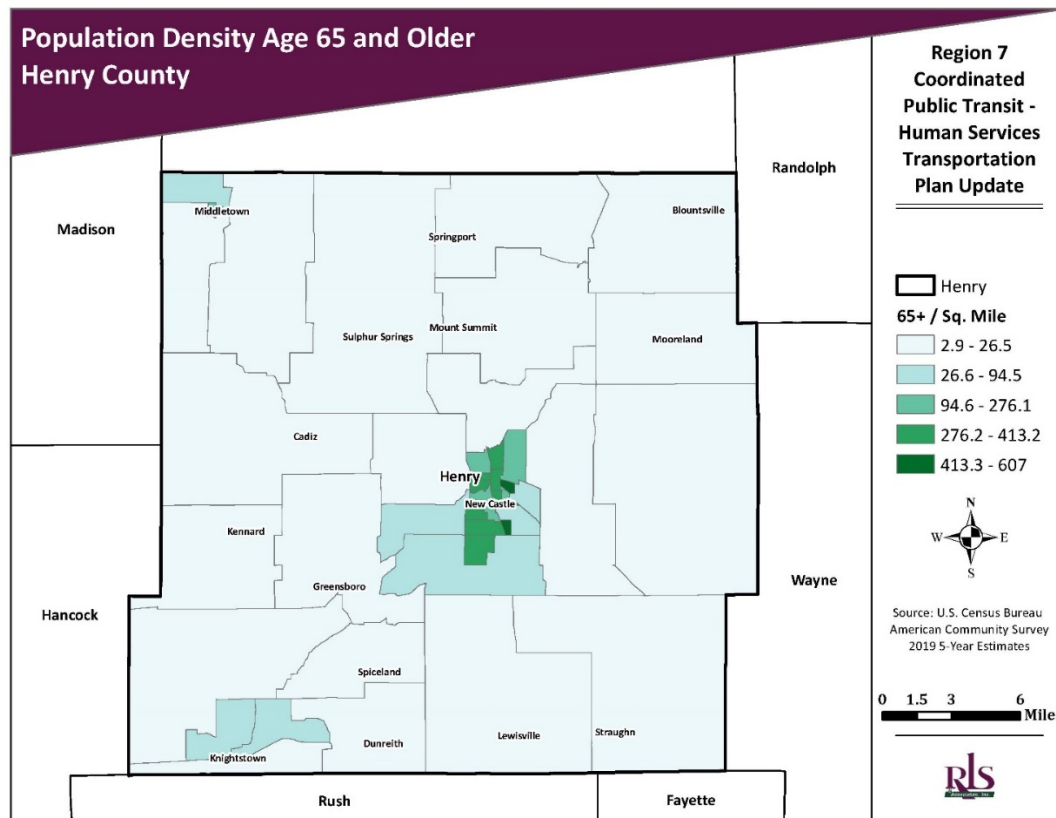


## Henry County

### Older Adult Population

Exhibit 22 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Henry County residents aged 65 and older are clustered around New Castle. These block groups had densities of older adults between 413 and 607 persons per square mile. Moderate densities are found in Middletown and Knightstown. The remainder of the county had low to very low densities of people age 65 and older.

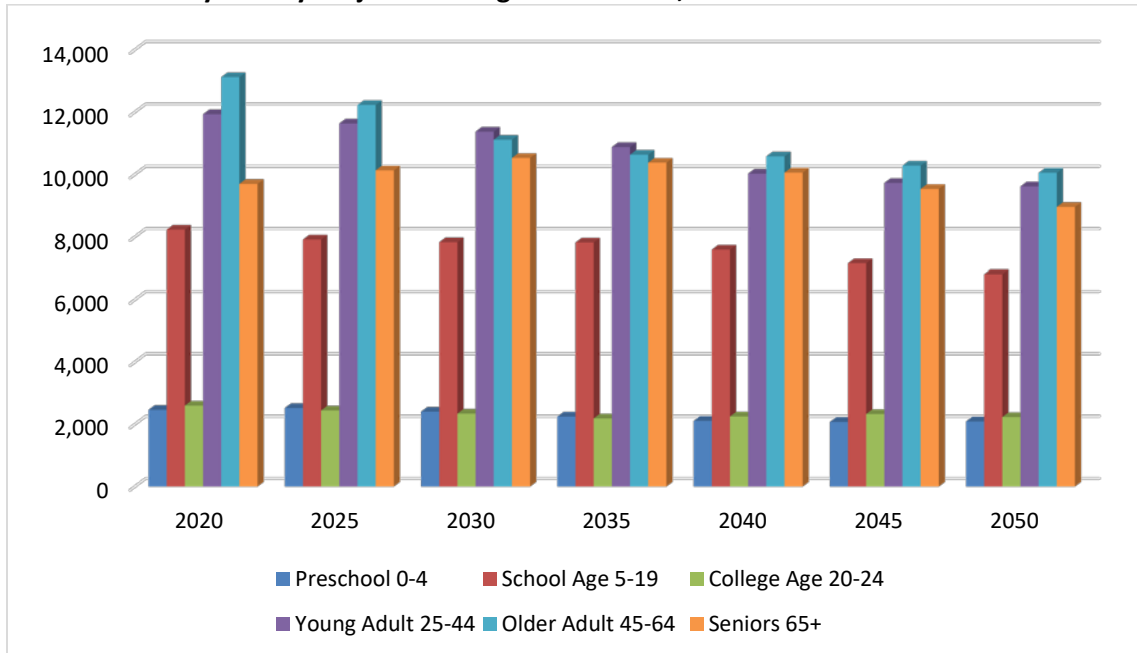
**Exhibit 22: Population Density Age 65 and Older**



### Population by Age

The largest age cohort projected for Henry County was Older Adults, Age 45-64, followed by Young Adults, Age 25-44, and Seniors, Age 65+ in 2020. The Senior population is projected to grow from 9,696 individuals or 20.2 percent of the county's population in 2020 to 10,529 individuals in 2030, then decline to 8,959 individuals or 22.5 percent of the county population in 2050. The other age groups are projected to decline slightly over time. The projections help explain changes in the transportation needs of each age cohort, which the plan can prepare.

**Exhibit 23: Henry County Projection of Age Distribution, 2020 - 2050**

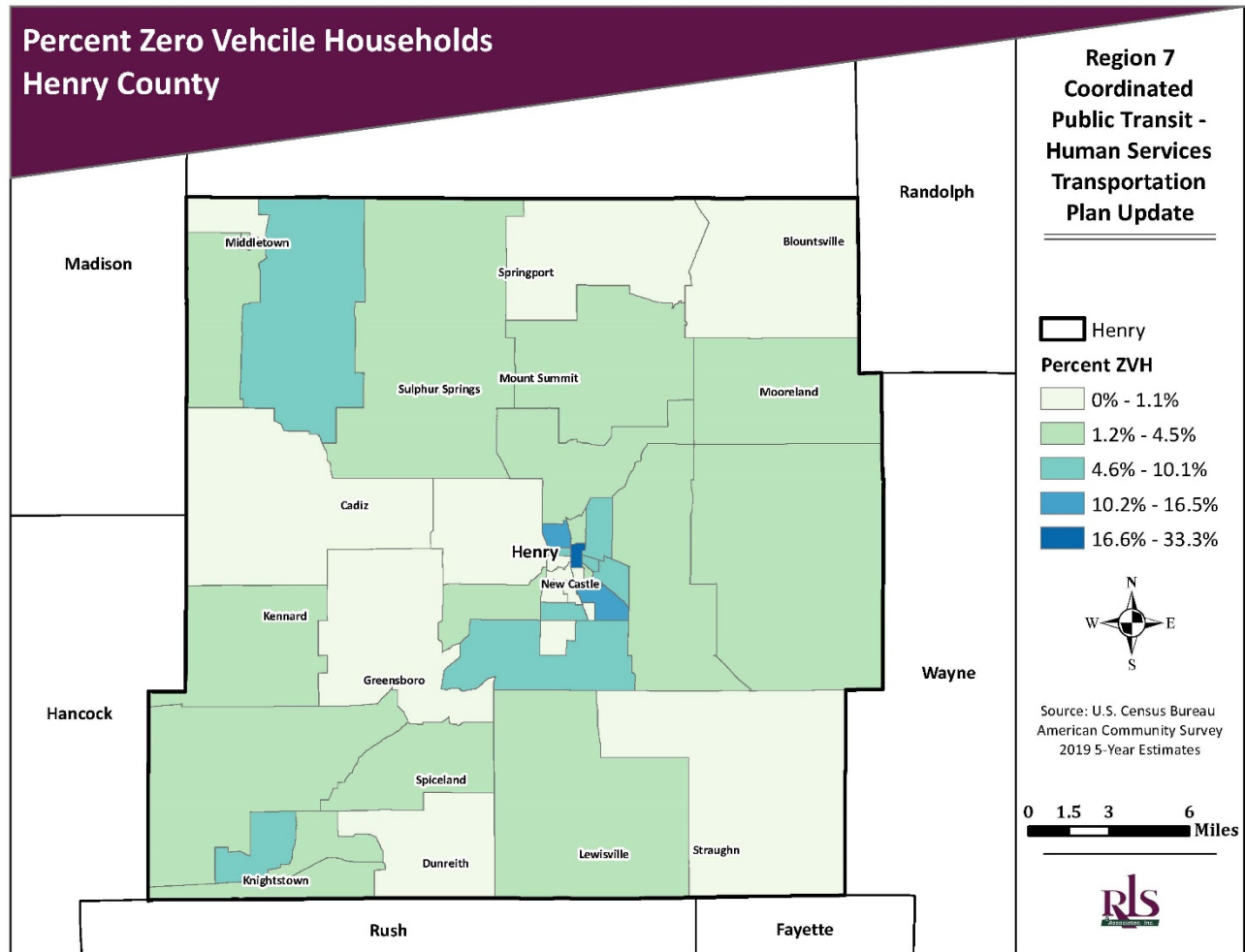


**Economic Profile**

Transportation is typically a household’s second-largest expense after housing itself. The characteristics of the neighborhood or community a household chooses to live within will impact the costs of transportation. Locations that are close to services and employment will allow the household to spend less time, energy, and money on transportation, while more rural locations may create additional costs and time for transportation. The national average cost to own, fuel, insure, and maintain a personal vehicle is \$12,164 per the 2019 Consumer Expenditure Survey, or an average of 16% of household expenses each year. In Henry County, the H+T Index calculates the typical regional household spends \$13,276 on transportation annually.

Exhibit 24 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimates. The block groups with the darkest shading have the highest percentage of housing units with no available vehicles. These block groups are concentrated in and around New Castle, with moderate percentages of zero vehicle households in the areas to the south of New Castle, north of Knightstown, and just east of Middletown. Between 16.6 and 33.3 percent of the households in the most concentrated areas have no access to a vehicle.

**Exhibit 24: Henry County Zero Vehicle Household Concentrations**



**Industry and Labor Force**

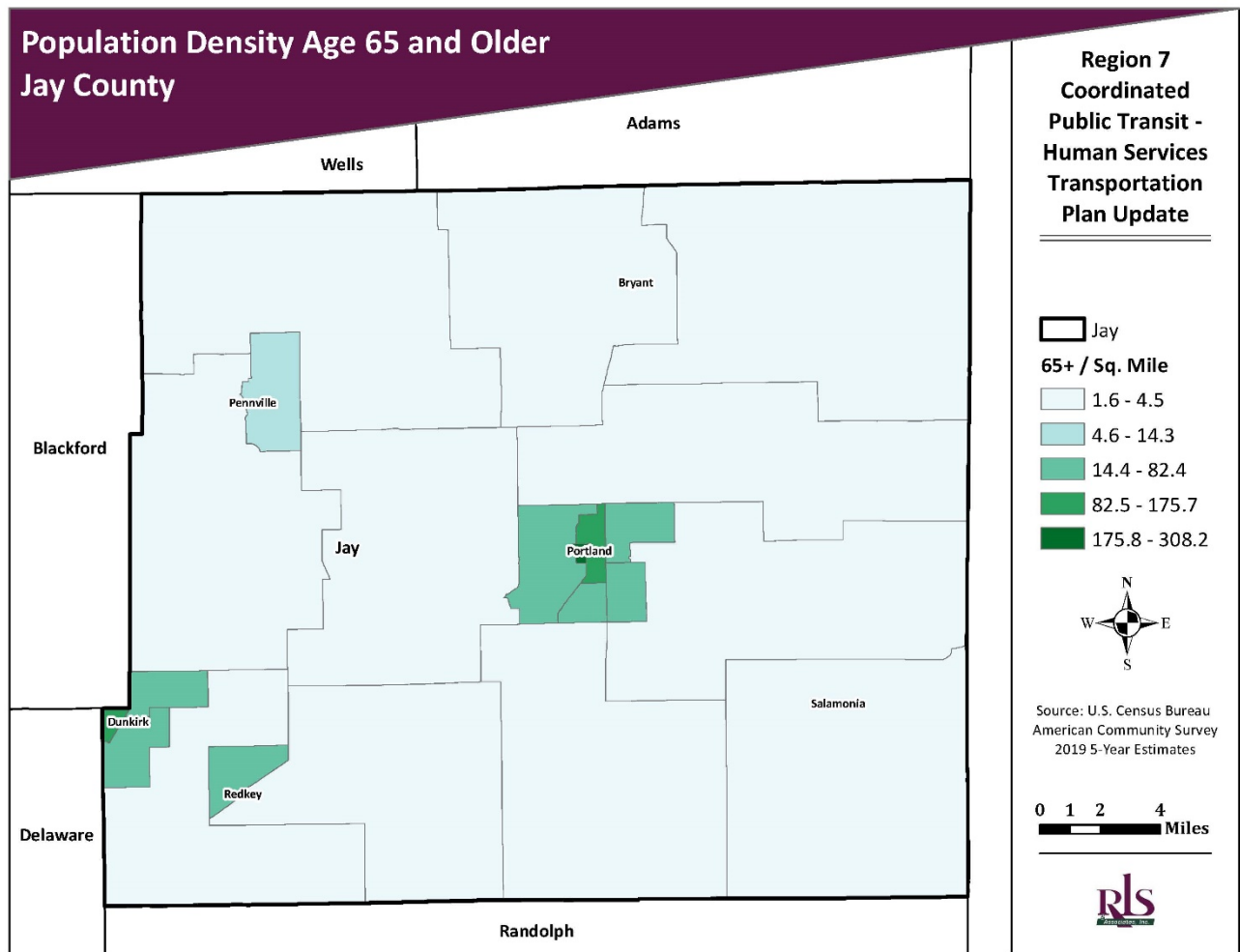
According to data from Stats Indiana, the largest percentage of jobs in Henry County is in the Manufacturing business sector, at 21.5 percent. Retail (12.9%) and accommodation and food services (7%) are the next highest employment sectors. Henry County has a total resident labor force of 21,866 individuals. The unemployment rate for the County was 6.6 for 2020.

**Jay County**

**Older Adult Population**

Exhibit 25 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Jay County residents aged 65 and older are in Portland. These block groups had densities of older adults between 175 and 308 persons per square mile. Moderately high densities of older adults are in Portland, Dunkirk, and Redkey. The remainder of the County had low to very low densities of people age 65 and older.

**Exhibit 25: Population Density Age 65 and Older**

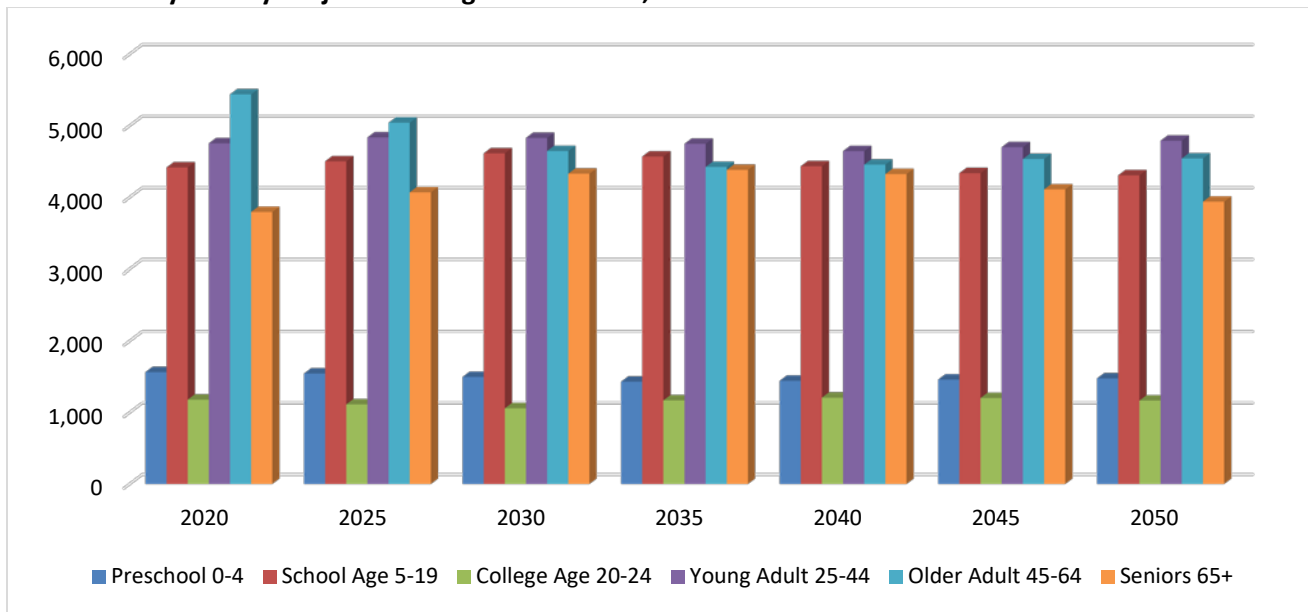


**Population by Age**

The largest age cohort projected for Jay County was Older Adults, Age 45-64, followed by Young Adults, Age 25-44, and School Age, 5-19 in 2020. The Senior population is projected to grow from 3,795 individuals or 17.9 percent of the county’s population in 2020 to 4,383 individuals in 2035, then decline to 3,939 individuals or 19.48 percent of the county population in 2050. The other age groups are projected to decline slightly over

time, except for the Young Adult and School Age cohorts which will remain level. The projections help explain changes in the transportation needs of each age cohort, which the plan can prepare for.

**Exhibit 26: Jay County Projection of Age Distribution, 2020 - 2050**

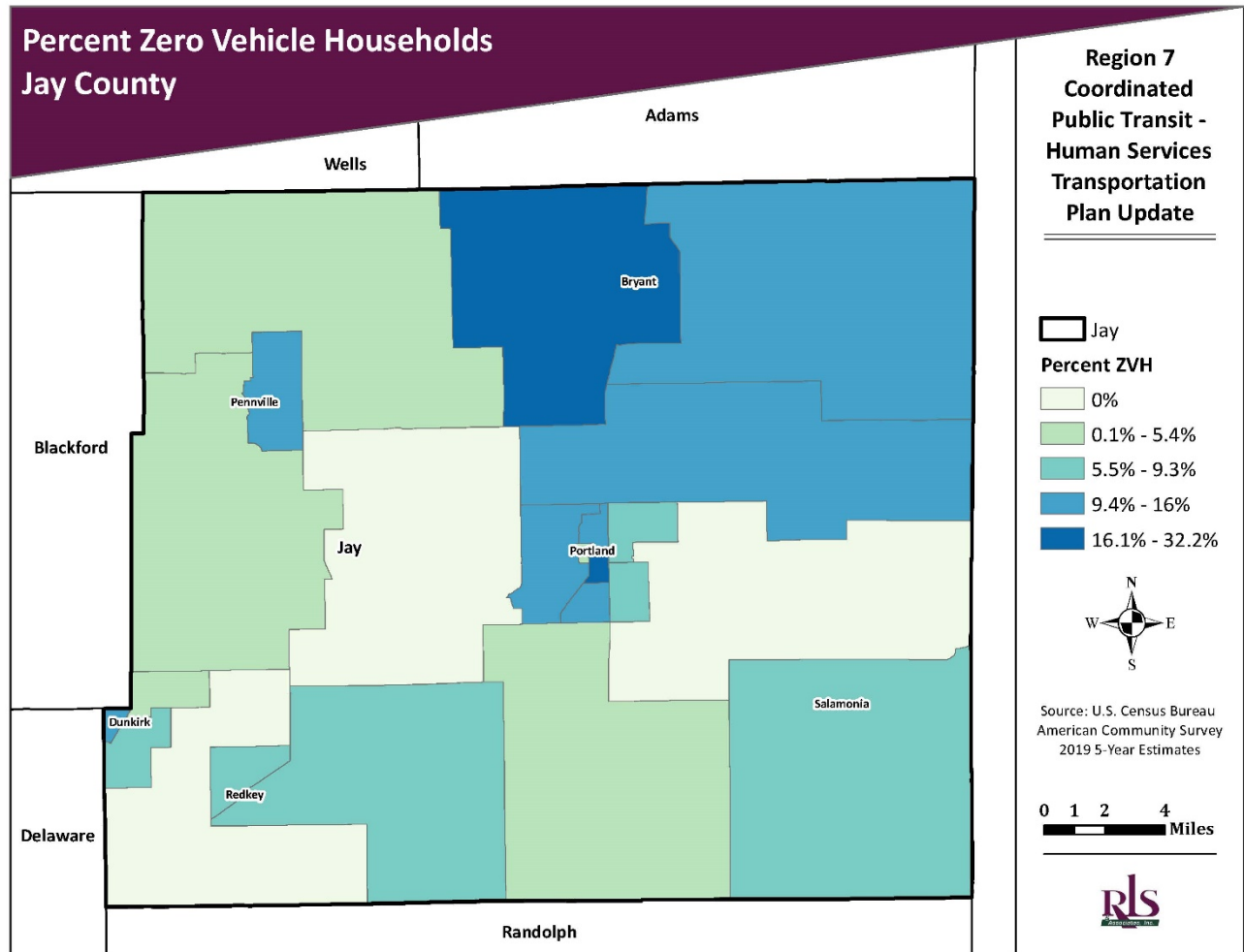


**Economic Profile**

Transportation is typically a household’s second-largest expense after housing itself. The characteristics of the neighborhood or community a household chooses to live within will impact the costs of transportation. Locations that are close to services and employment will allow the household to spend less time, energy, and money on transportation, while more rural locations may create additional costs and time for transportation. The national average cost to own, fuel, insure, and maintain a personal vehicle is \$12,164 per the 2019 Consumer Expenditure Survey, or an average of 16% of household expenses each year. In Jay County, the H+T Index calculates the typical regional household spends \$14,236 on transportation annually.

Exhibit 27 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimates. The block groups with the darkest shading have the highest percentage of housing units with no available vehicles. These block groups are found in Portland and around Bryant and Poling, with moderate percentages of zero vehicle households in the areas to the northeast of the county, and around Pennville. Between 16.1 and 32.2 percent of the households in the most concentrated areas have no access to a vehicle.

**Exhibit 27: Jay County Zero Vehicle Household Concentrations**



**Industry and Labor Force**

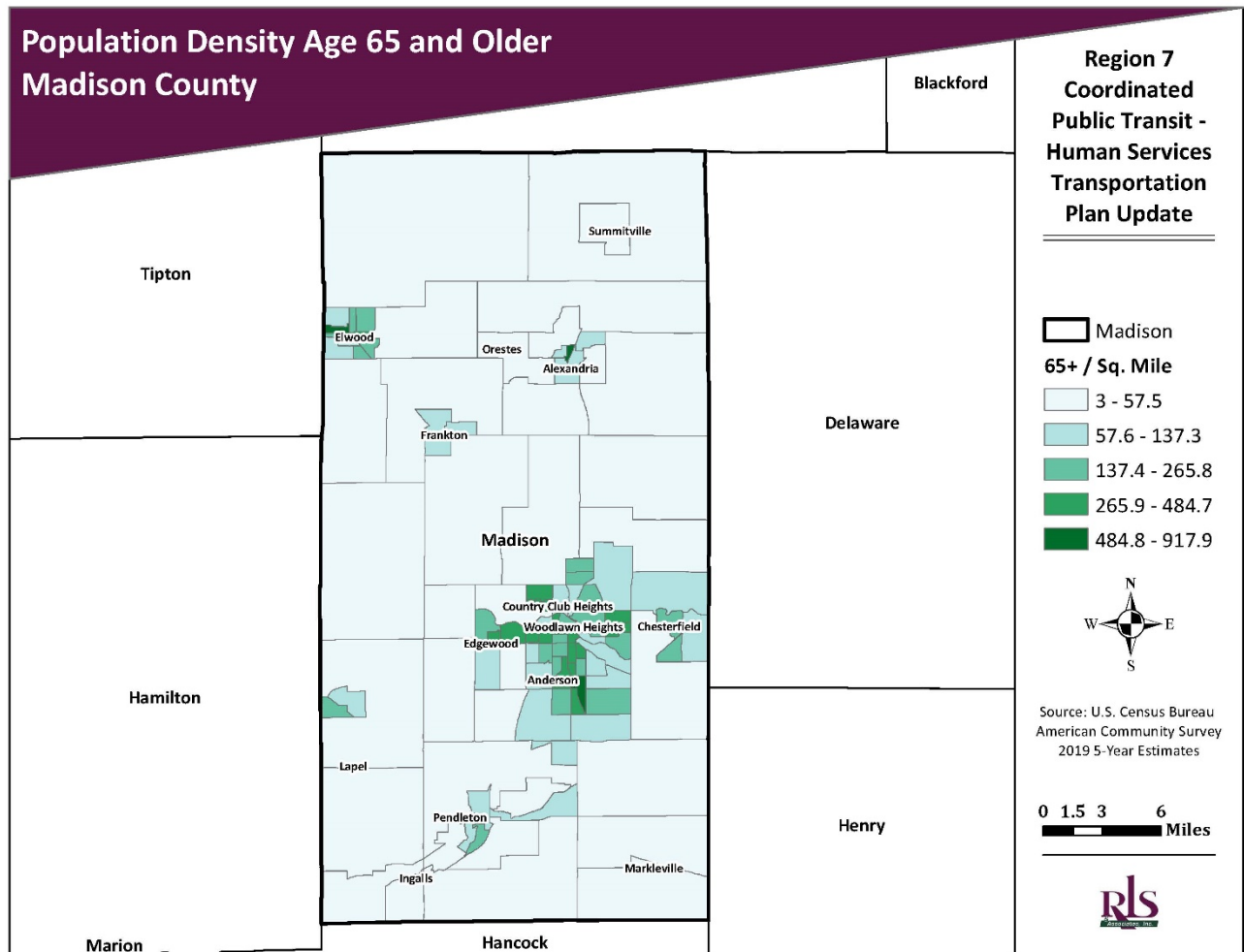
According to data from Stats Indiana, the largest percentage of jobs in Jay County is in the Manufacturing business sector, at 40.9 percent. Retail (9%), educational services (6.1%), and public administration (5.1%) are the next highest employment sectors. Jay County has a total resident labor force of 8,801 individuals. The unemployment rate for the County was 6.6 for 2020.

**Madison County**

**Older Adult Population**

Exhibit 28 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Madison County residents aged 65 and older are in Anderson, Alexandria, and Elwood. These block groups had densities of older adults between 484 and 917 persons per square mile. Moderately high densities of older adults are also in the north and northwest of Anderson, in Elwood, Lapel and Chesterfield, and moderate densities are found in the above communities, in Frankton, and Pendleton. The remainder of the County had low to very low densities of people age 65 and older.

**Exhibit 28: Population Density Age 65 and Older**

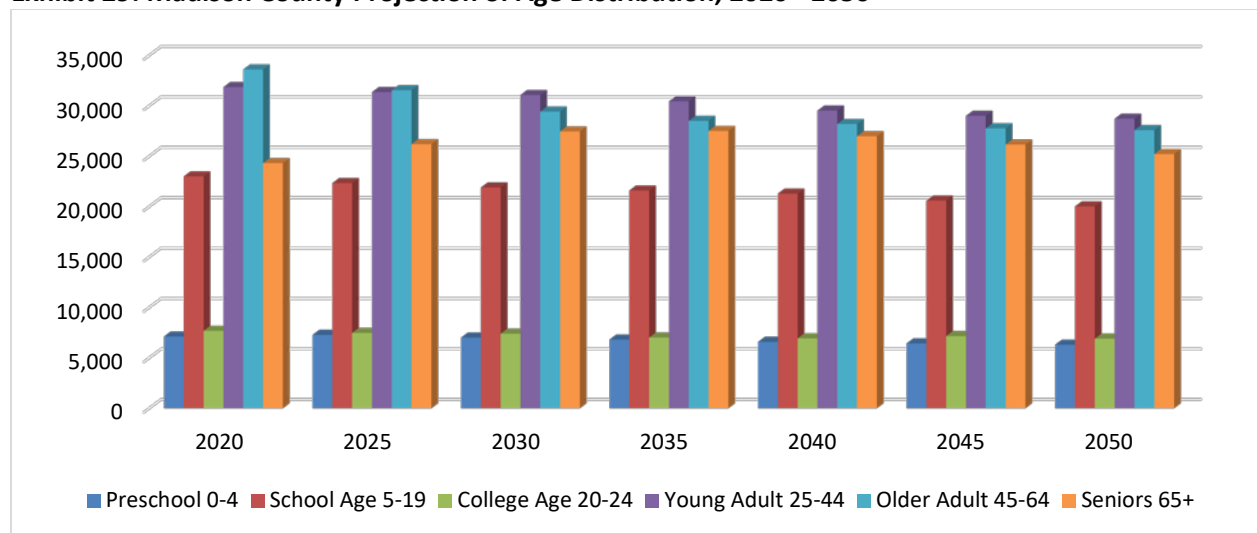


**Population by Age**

The largest age cohort projected for Madison County was Older Adults, Age 45-64, followed by Young Adults, Age 25-44, and Seniors, Age 65+ in 2020. The Senior population is projected to grow from 24,314 individuals or 19 percent of the county’s population in 2020 to 27,509 individuals in 2035, then decline to 25,213 individuals or 21.9 percent of the county population in 2050. The other age groups are projected to decline

slightly over time. The projections help explain changes in the transportation needs of each age cohort, which the plan can prepare for.

**Exhibit 29: Madison County Projection of Age Distribution, 2020 - 2050**



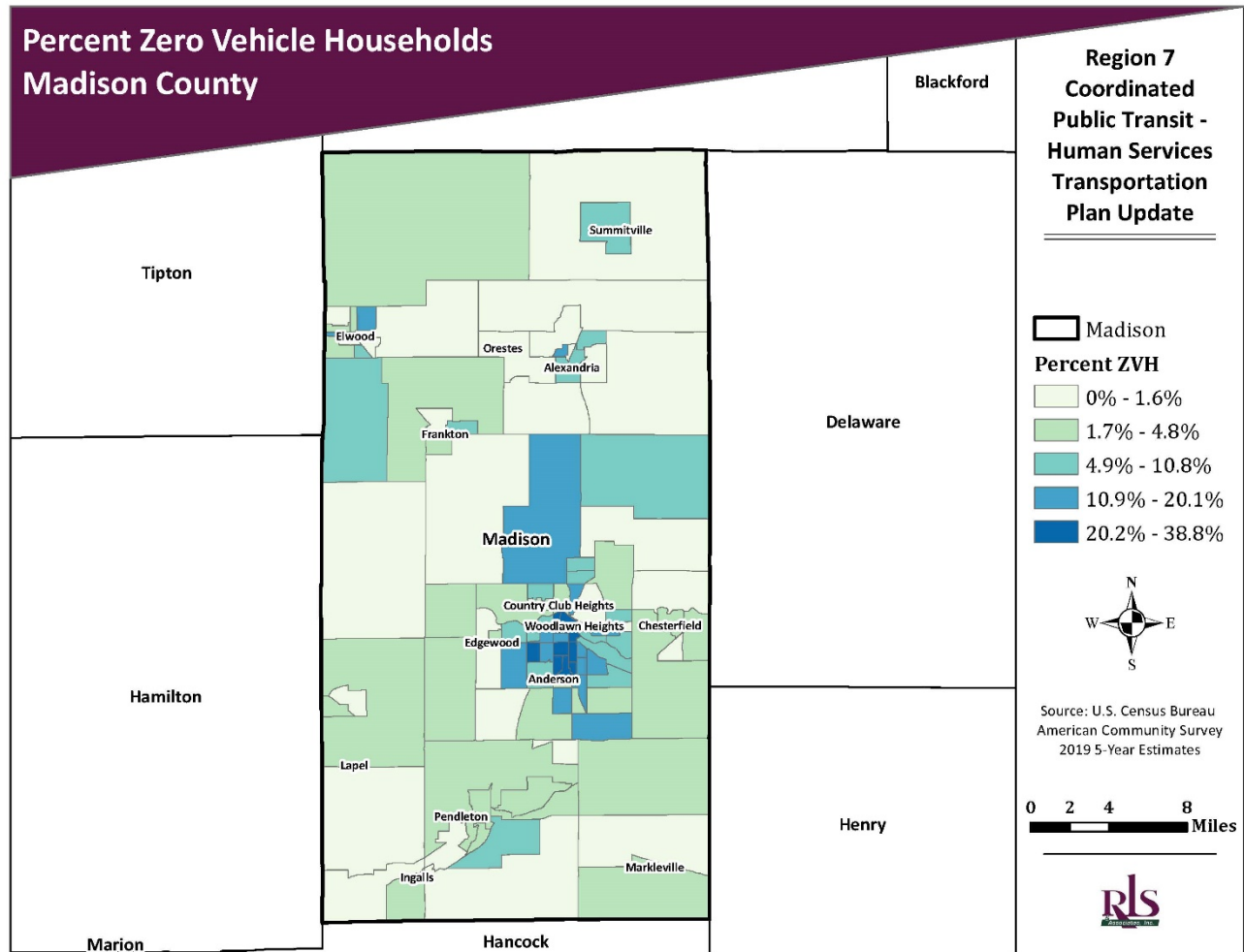
**Economic Profile**

Transportation is typically a household’s second-largest expense after housing itself. The characteristics of the neighborhood or community a household chooses to live within will impact the costs of transportation. Locations that are close to services and employment will allow the household to spend less time, energy, and money on transportation, while more rural locations may create additional costs and time for transportation. The national average cost to own, fuel, insure, and maintain a personal vehicle is \$12,164 per the 2019 Consumer Expenditure Survey, or an average of 16% of household expenses each year. In Madison County, the H+T Index calculates the typical regional household spends \$13,754 on transportation annually.

Exhibit 30 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimates. The block groups with the darkest shading have the highest percentage of housing units with no available vehicles. These block groups are concentrated in Anderson, with moderate percentages of zero vehicle households in the areas to the north and south of Anderson, and in Elwood. Between 20.2 and 38.8 percent of the households in the most concentrated areas have no access to a vehicle.



**Exhibit 30: Madison County Zero Vehicle Household Concentrations**



**Industry and Labor Force**

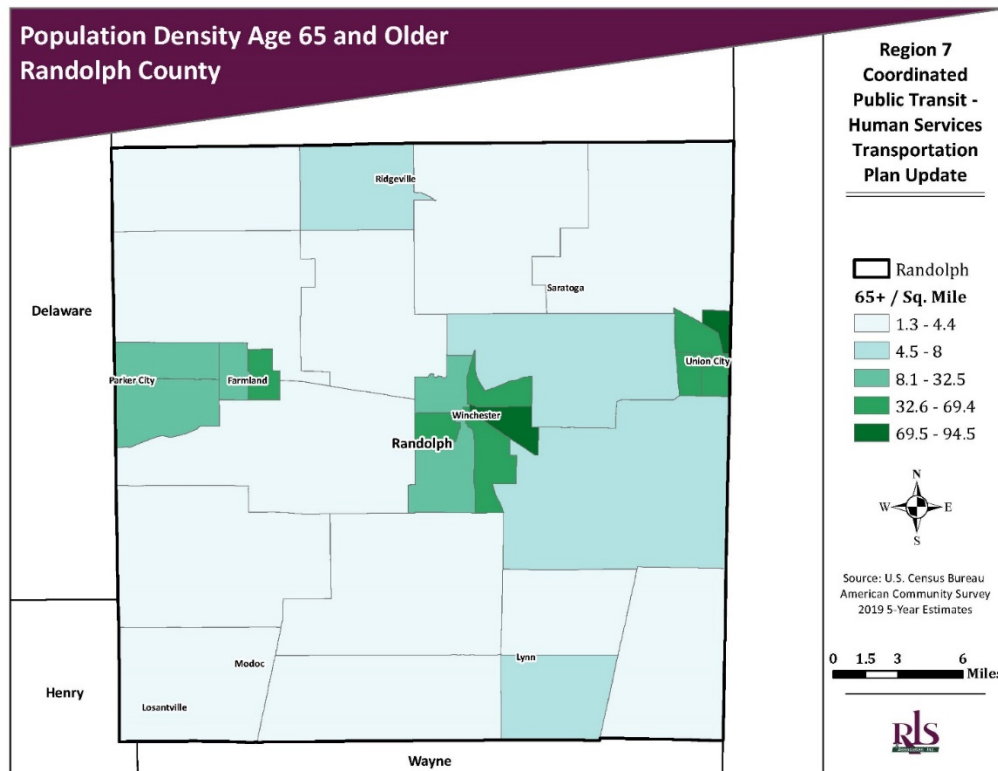
According to data from Stats Indiana, the largest percentage of jobs in Madison County is in the Health Care and Social Services business sector, at 17 percent. Manufacturing (13.6%), retail (11.4%) and accommodation and food services (10.1%) are the next highest employment sectors. Madison County has a total resident labor force of 58,758 individuals. The unemployment rate for the county was 7.9 for 2020.

## Randolph County

### Older Adult Population

Exhibit 31 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Randolph County residents aged 65 and older are to the east of Winchester, and in Union City. These block groups had densities of older adults between 69 and 94 persons per square mile. Moderately high densities of older adults are also in Winchester, Union City, Farmland and Parker City, and moderate densities are found in Ridgeville, Lynn, and between Union City and Winchester. The remainder of the County had low to very low densities of people age 65 and older.

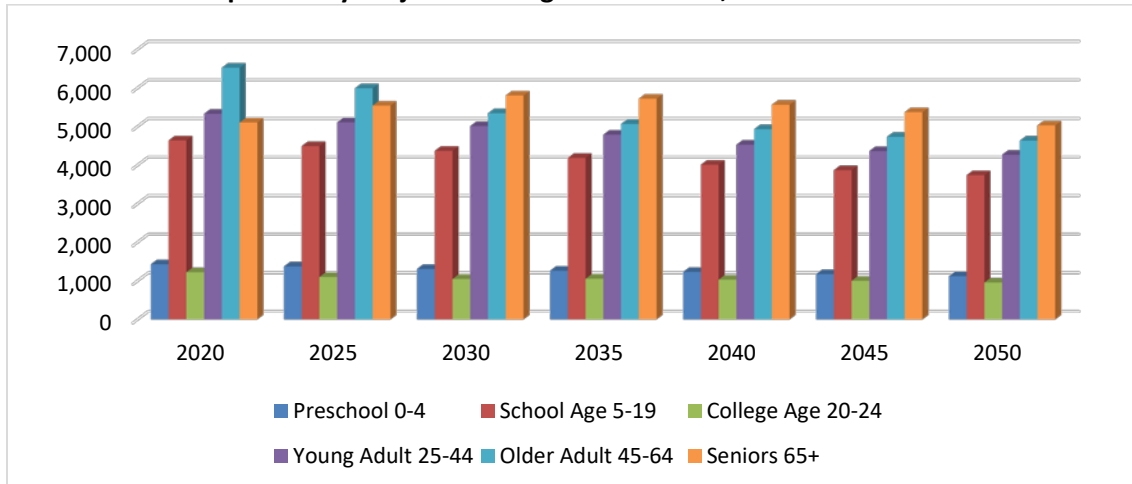
**Exhibit 31: Population Density Age 65 and Older**



### Population by Age

The largest age cohort projected for Randolph County was Older Adults, Age 45-64, followed by Young Adults, Age 25-44, and Seniors, Age 65+ in 2020. The Senior population is projected to grow from 5,103 individuals or 21 percent of the county's population in 2020 to 5,804 individuals in 2030, then decline to 5,030 individuals or 25.5 percent of the county population in 2050. The other age groups are projected to decline slightly over time. The projections help explain changes in the transportation needs of each age cohort, which the plan can prepare.

**Exhibit 32: Randolph County Projection of Age Distribution, 2020 - 2050**

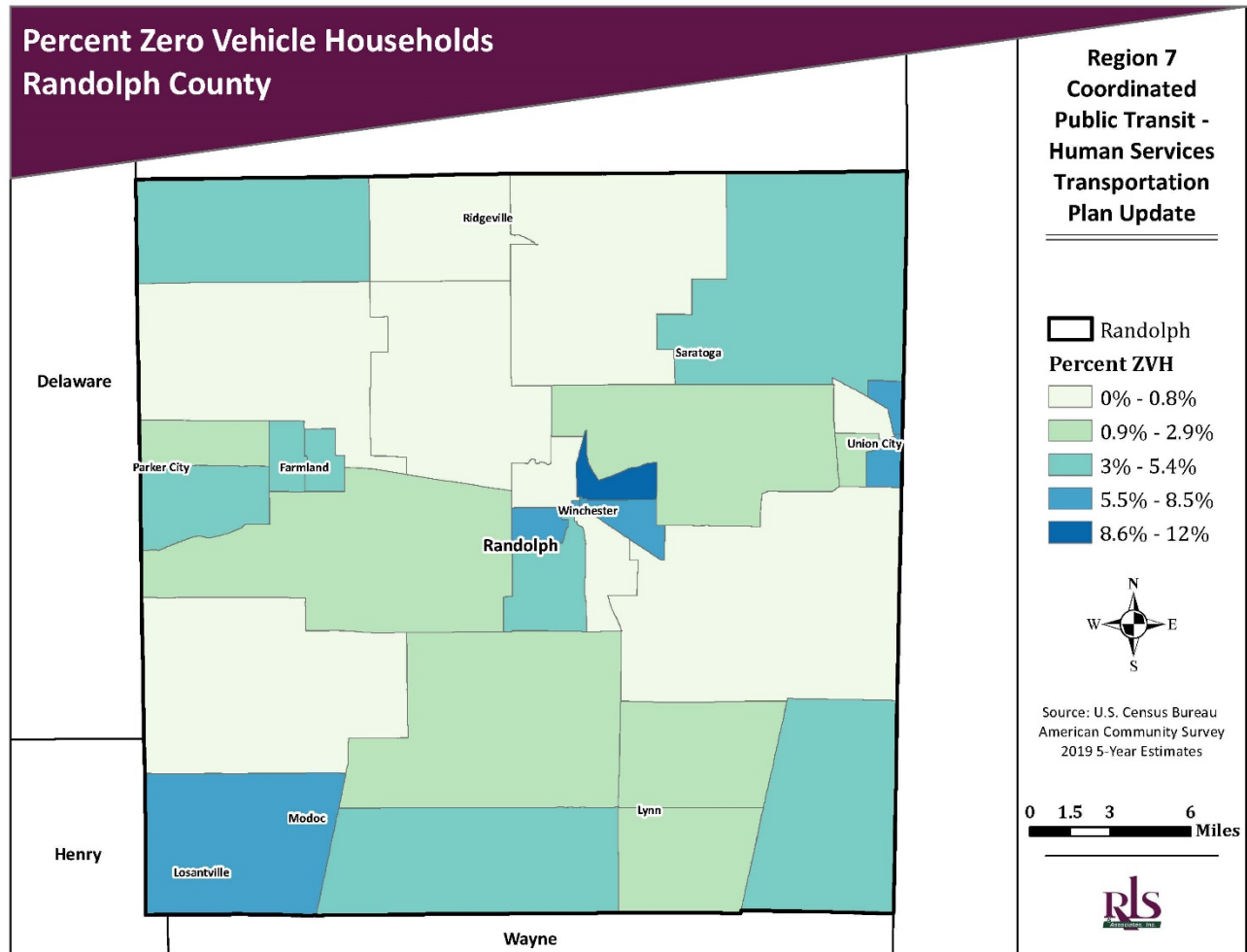


**Economic Profile**

Transportation is typically a household’s second-largest expense after housing itself. The characteristics of the neighborhood or community a household chooses to live within will impact the costs of transportation. Locations that are close to services and employment will allow the household to spend less time, energy, and money on transportation, while more rural locations may create additional costs and time for transportation. The national average cost to own, fuel, insure, and maintain a personal vehicle is \$12,164 per the 2019 Consumer Expenditure Survey, or an average of 16% of household expenses each year. In Randolph County, the H+T Index calculates the typical regional household spends \$13,847 on transportation annually.

Exhibit 33 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimates. The block groups with the darkest shading have the highest percentage of housing units with no available vehicles. These block groups are concentrated to the north of Winchester, with moderate percentages of zero vehicle households in the areas to the south of Winchester, in Union City, and the southwest corner of Randolph County. Between 8.6 and 12 percent of the households in the most concentrated areas have no access to a vehicle.

**Exhibit 33: Randolph County Zero Vehicle Household Concentrations**



**Industry and Labor Force**

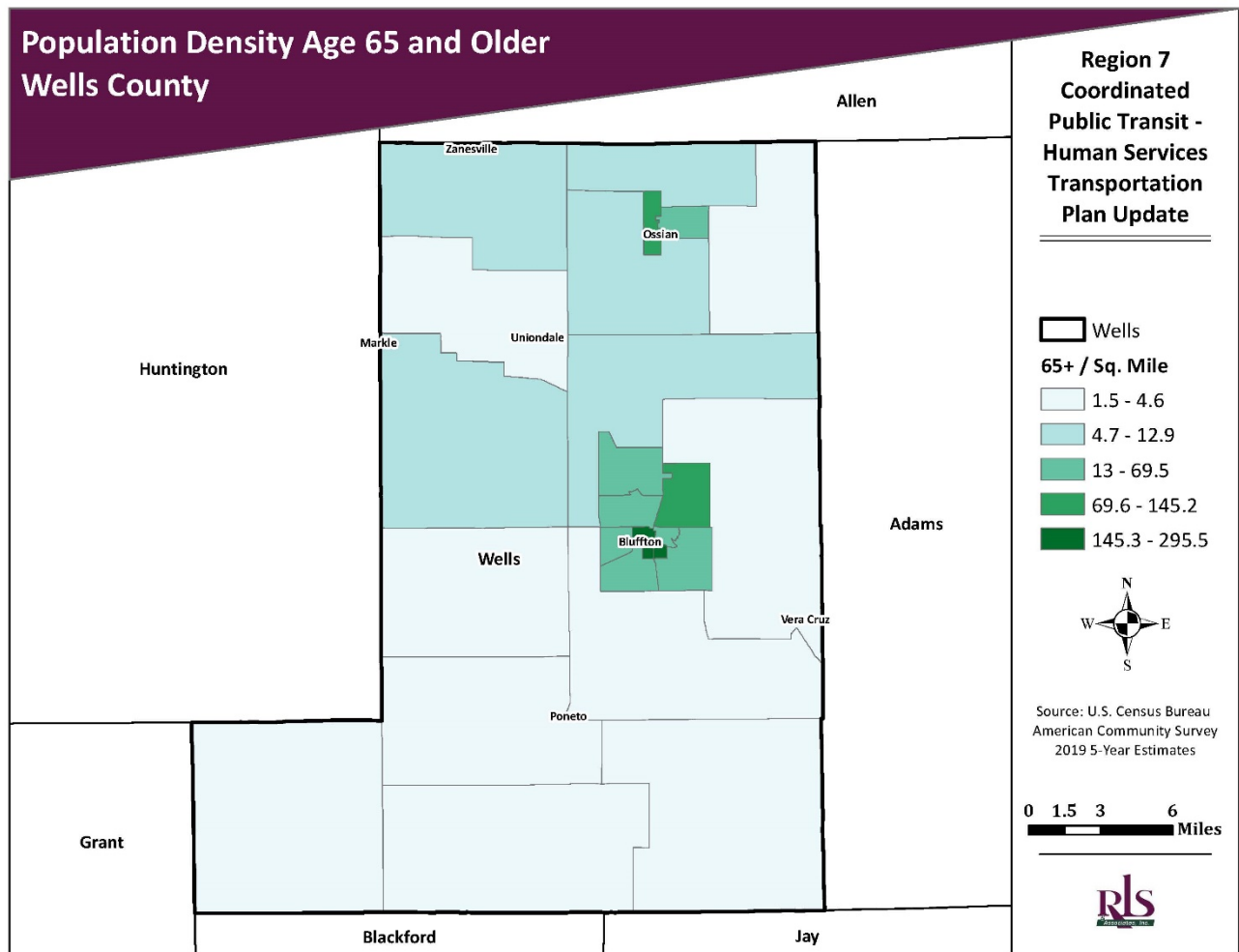
According to data from Stats Indiana, the largest percentage of jobs in Randolph County is in the Manufacturing business sector, at 22.4 percent. Educational services (11%), construction (9.9%), and retail (9%) are the next highest employment sectors. Randolph County has a total resident labor force of 11,191 individuals. The unemployment rate for the county was 6.6 for 2020.

## Wells County

### Older Adult Population

Exhibit 34 illustrates the density of persons aged 65 and older by Census block group. The block groups with the highest density of Wells County residents aged 65 and older are in Bluffton. These block groups had densities of older adults between 145 and 295 persons per square mile. Moderately high densities of older adults are also in northeast Bluffton and Ossian, and moderate densities are found in a ring around Bluffton and east of Ossian. The remainder of the county had low to very low densities of people age 65 and older.

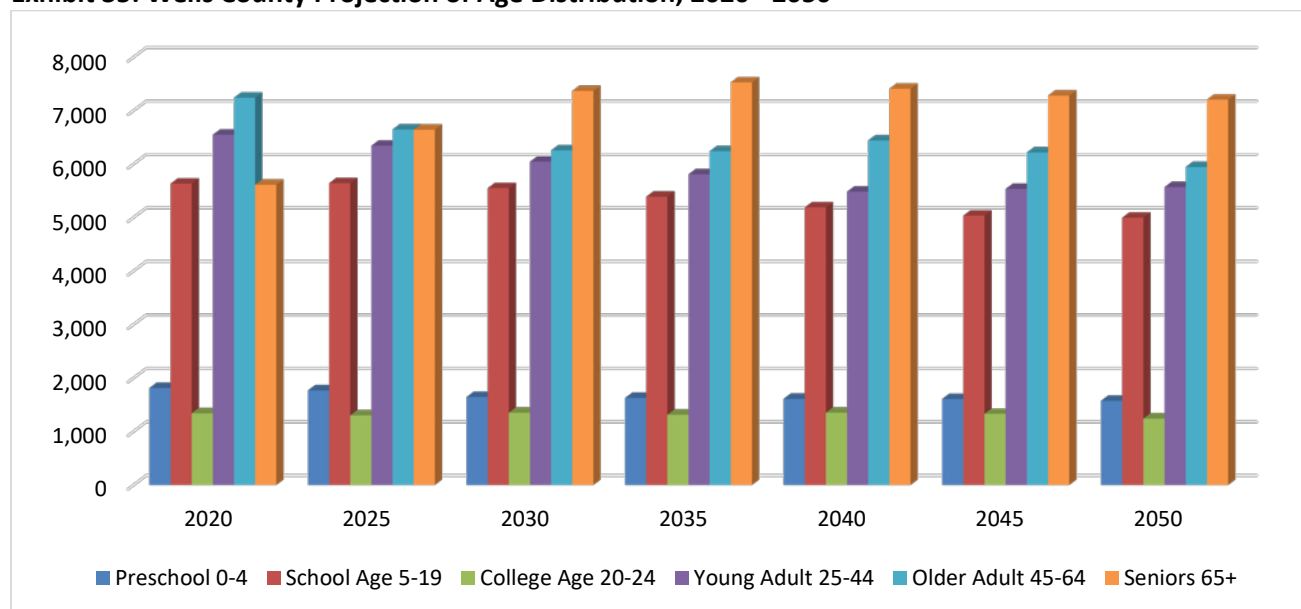
**Exhibit 34: Population Density Age 65 and Older**



### Population by Age

The largest age cohort projected for Wells County was Older Adults, Age 45-64, followed by Young Adults, Age 25-44, School Age, 5-19, and Seniors, Age 65+ in 2020. The Senior population is projected to grow from 5,612 individuals or 19.9 percent of the county's population in 2020 to 7,527 individuals in 2035, then decline to 7,205 individuals or 27.2 percent of the county population in 2050. The other age groups are projected to decline slightly over time. The projections help explain changes in the transportation needs of each age cohort, which the plan can prepare for.

**Exhibit 35: Wells County Projection of Age Distribution, 2020 - 2050**

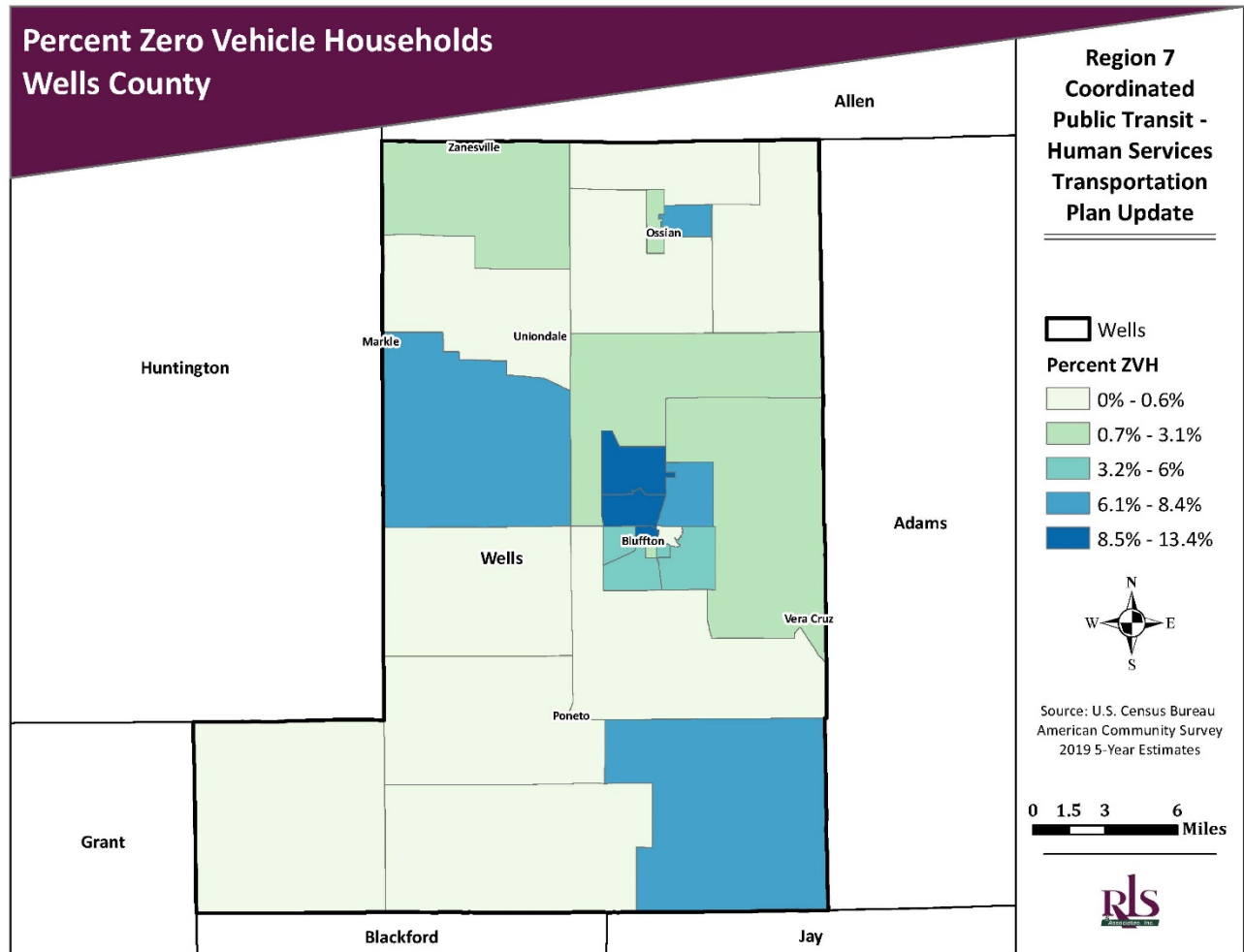


**Economic Profile**

Transportation is typically a household’s second-largest expense after housing itself. The characteristics of the neighborhood or community a household chooses to live within will impact the costs of transportation. Locations that are close to services and employment will allow the household to spend less time, energy, and money on transportation, while more rural locations may create additional costs and time for transportation. The national average cost to own, fuel, insure, and maintain a personal vehicle is \$12,164 per the 2019 Consumer Expenditure Survey, or an average of 16% of household expenses each year. In Wells County, the H+T Index calculates the typical regional household spends \$14,414 on transportation annually.

Exhibit 36 illustrates the percentage of housing units that have no available vehicle, according to 2019 ACS Five-Year Estimates. The block groups with the darkest shading have the highest percentage of housing units with no available vehicles. These block groups are concentrated in north Bluffton, with moderate percentages of zero vehicle households in the areas to the north east of Bluffton, west of Bluffton toward Markle and Rockford, in Ossian, and the southeast corner of Wells County. Between 8.5 and 13.4 percent of the households in the most concentrated areas have no access to a vehicle.

**Exhibit 36: Wells County Zero Vehicle Household Concentrations**



**Industry and Labor Force**

According to data from Stats Indiana, the largest percentage of jobs in Wells County is in the Manufacturing business sector, at 23.5 percent. Transportation and warehousing (14.5%), retail (10.2%), and educational services (7.5%) are the next highest employment sectors. Wells County has a total resident labor force of 14,006 individuals. The unemployment rate for the county was 5.7 for 2020.

## INVENTORY OF EXISTING TRANSPORTATION SERVICES

### OVERVIEW

Providers of public and human service transportation were asked to participate in interviews and to share service and asset data to update the transportation provider inventory for the Region. Provider agencies were also invited to participate in a virtual public meeting to evaluate unmet human service transportation needs and service gaps. The public meeting included a discussion of goals and strategies/projects to address unmet needs and service gaps and promote coordination in the delivery of transportation services to maximize the use of resources.

An update of the inventory of provider services and vehicle inventory was obtained through phone interviews and e-mail requests conducted prior to the public meeting. This was done to promote active participation in the public meetings, familiarize the providers with the public meeting process, and stimulate discussion of key mobility issues while updating the description of the types and manner of service delivery (including types of services, funding sources, eligibility, hours of service, ridership and fare/donation policies) for the providers in the Region. A set of scripted questions was used for the interviews to ensure that similar information was gathered from all agencies.

Urban and Rural public transit agencies, those funded with FTA Section 5307 and 5311 funding, also serve these same populations of older adults and individuals with disabilities along with the general public. Adams County is the only county in the region entirely without a public transit service. The cities of Anderson, Marion, Muncie, and New Castle have urban transit systems. Blackford, Henry, Jay, Madison, Randolph, and Wells counties are served by rural transit systems. There are other providers in the area that serve public populations that meet certain eligibility requirements such as Veterans and individuals eligible for non-emergency medical transportation provided through Medicaid (various private providers).

The Region 7 provider summaries listed below include Section 5310 providers who serve primarily older adults and individuals with disabilities. These agencies provide transportation primarily to their agency consumers but may have the potential for expanded shared services with other providers in the future. The provider list below includes agencies that are eligible for the Section 5310 Program funding but have experienced limited coordination with other providers, remaining focused on providing services to their agency's consumers. However, their participation in the coordinated transportation plan process is important. Participation in the plan keeps the option of Section 5310 funding open to the agency.

Many of these public and non-profit agencies also receive operating funding through Medicaid for people with low incomes or qualifying disabilities, Title III-B of the Older Americans Act, which focuses on serving persons 60 and over, and the FTA Section 5310 program. These programs exemplify the goal of promoting mixed client riding, where more than people from more than one nonprofit agency are sharing rides, and coordinated provision of mobility services, aiding individual clients to explore and master their transportation options, for a range of customer categories and trip destinations.

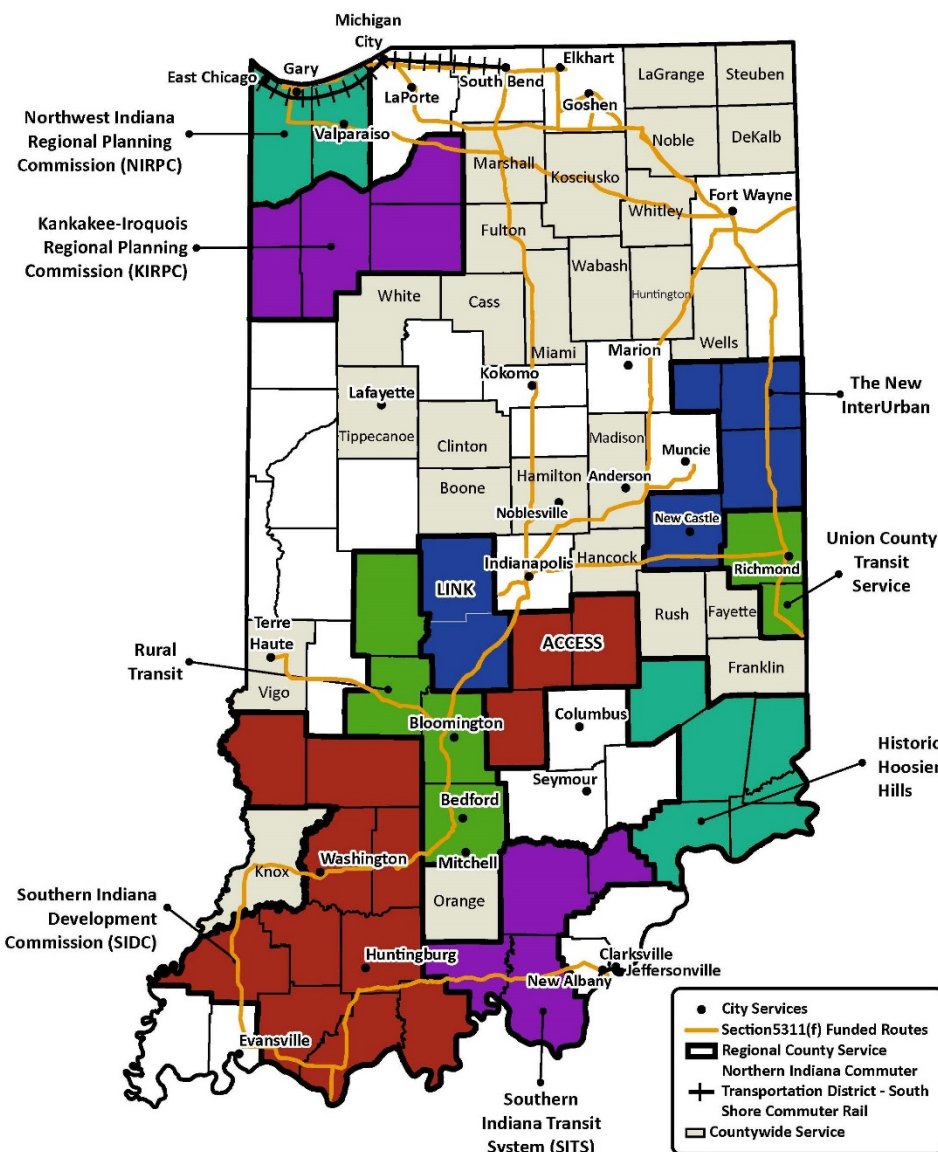


Some taxi companies operate in the region, but most stay within the urban areas. Private transportation network companies such as Lyft and Uber are also concentrated in more urban communities where the drivers have a higher likelihood of picking up riders.

The map in Exhibit 37 shows where public transit systems are working across the state, including intercity bus connections between cities. Intercity buses are usually operated by private companies, but serve a general public purpose and receive public funding for certain critical route connections. These routes are marked as 5311(f) funded routes on the map legend.

**Exhibit 37: 2020 Public Transit Systems in Indiana, from CY 2020 Indiana Public Transit Annual Report**

## 2020 Public Transit Systems in Indiana



## EXISTING TRANSPORTATION RESOURCES

The following summaries are based on information provided by the participating agencies in an interview, and/or through research of the agency's website or the 2020 INDOT Public Transit Annual Report. Where information is incomplete, it was not provided or not available.

### **Public Providers**

The first table, Exhibit 38, shows transportation services available to the general public or segments of the general public.

	Marion Transit System (MTS)	Muncie Indiana Transit System (MITS)	LifeStream Services, Inc. / The New InterUrban	Transportation for Rural Areas of Madison County (TRAM)	Wells On Wheels / Wells Co. Council On Aging	City of Anderson Transit System (CATS)	Ft. Wayne Citilink	New Castle Community Transit	CIRTA Commuter Connect
Location / Contact	520 E. 6th St. Marion, IN 46953 765-668-4445	1300 E Seymour Street Muncie, IN 47302 (765) 289-6487	1701 Pilgrim Blvd. Yorktown, IN 47396 (888) 589-1121	16 E 9th St. Room 100, Anderson, IN 46016 1-855-743-3843	225 W Water St., Bluffton IN 46714 (260) 824-4969 or 877-477-4969	530 Dale Keith Jones Road, Anderson, IN 46011 765.644.8312	801 Leesburg Road Fort Wayne, IN 46808 (260) 432-4546	201 S 25th Street, New Castle, IN 47362 (765) 529-8113	317-327-RIDE (7433)
	<a href="http://www.marion.in.gov/transportation">www.marion.in.gov/transportation</a>	<a href="https://www.mitsbus.org/">https://www.mitsbus.org/</a>	<a href="https://www.life-streaminc.org/transportation/">https://www.life-streaminc.org/transportation/</a>	<a href="http://www.ridetram.com/">http://www.ridetram.com/</a>	<a href="http://www.councilonaginginc.com/publicTransit.html">http://www.councilonaginginc.com/publicTransit.html</a>	<a href="https://www.cityofanderson.com/136/City-of-Anderson-Transit-System-CATS">https://www.cityofanderson.com/136/City-of-Anderson-Transit-System-CATS</a>	<a href="https://www.fwcitilink.com/">https://www.fwcitilink.com/</a>	<a href="https://www.cityofnewcastle.net/departments/structureid=74">https://www.cityofnewcastle.net/departments/structureid=74</a>	<a href="https://www.cirta.us/county-connect/transportation-resources/commuter-connect/">https://www.cirta.us/county-connect/transportation-resources/commuter-connect/</a>
Service Area	City of Marion	City of Muncie, Accessible Taxi Voucher (ADA) in Delaware County	Blackford, Delaware, Grant, Henry, Jay, Randolph Counties	Madison County	Wells County and out of county up to 50 miles from Bluffton	City of Anderson	City of Fort Wayne, Aboite, New Haven	City limits of New Castle	Indianapolis, Anderson, Muncie
Eligibility Criteria	Public	Public	60+ years old in Delaware & Grant Counties Public, all ages in Blackford, Henry, Jay, Randolph Counties	Public	Public	Public	Public	Public	Public
Days/Hours of Service	Monday – Friday	Monday - Friday 6:15 a.m. - 9:30 p.m.	Monday – Friday	Monday – Friday	Monday - Friday	Monday - Friday 6 a.m. - 6:30 p.m.	Monday - Friday 5:25 a.m. - 9:45 p.m.	Monday – Friday	Riders provide their own schedules
	7:00 a.m. — 5:00 p.m.	Saturday 8:15 a.m. - 6:15 p.m.	8 a.m. - 5 p.m.	7 a.m. – 5 p.m.	6:00 a.m. – 7:00 p.m.	Saturday 9 a.m. - 3:30 p.m.	Saturday 7:30 a.m. - 6:30 p.m.	8 a.m. – 4 p.m.	
Ridership*	2019: 257,760 2020: 71,378	2019: 1,408,230 2020: 751,738	2019: 42,968 2020: 26,715	2019: 17,611 2020: 11,571	2019: 43,584 2020: 19,412	2019: 252,922 2020: 169,080	2019: 1,687,355 2020: 1,104,835	2019: 41,005 2020: 15,994	Not provided
Fare/Donation Structure	Free Fare	\$0.50 per one-way trip or \$18 monthly pass	Donation Based for Senior Transportation, \$2 per trip for The New InterUrban Transit	\$4 per one-way trip or \$33 monthly pass for unlimited rides	\$2 trip within Bluffton city limits \$5 trip within Wells County	\$1 per one-way trip or \$24 monthly pass	Free through Nov 30, 2021 Regularly \$1.25	Temporary Fare suspension Regularly \$1.00 or \$0.50 for 60+	Riders share costs
		Half fare for 60+ and people with disabilities; Students and Veterans ride free		Riders 60+: \$2.50 per one-way trip or \$25 monthly pass	\$20 for trips up to 30 miles from Bluffton \$50 for trips 31-50 miles from Bluffton Seniors ride free within Wells County	Half fare for Riders 60+, Medicare card holders and disabled veterans			
Funding Sources	Section 5311; PMTF; City General Fund	Section 5307; PTMF	Section 5311; PMTF; Medicaid; OAA Title III-B, United Way, Community Foundations	Section 5311; PMTF; Madison County & MPO funding; OAA Title III-B;	Section 5311, PMTF, Older Americans Act Title III, Wells County, United Way, charitable contributions	Section 5307, PMTF, City	Section 5307, PTMF	Section 5311; PMTF	Section 5307
Operating Budget	2019: \$1,425,729 2020: \$1,520,755	2020: \$7,491,640	2020: \$996,508	2020: \$326,822	2020: \$555,037	2020: \$2.4M (\$1.6M Federal)	2019: \$13,248,483 2020: \$14,427,782	2020: \$671,207	NA
Fleet and Wheelchair Accessibility	12 Vehicles, 100% WC accessible	50 Vehicles, 100% WC accessible	23 Vehicles (22 WC)	6 Vehicles, 100% WC accessible	14 Vehicles, 100% WC accessible	23 vehicles, 100% WC accessible	65 vehicles, 100% WC accessible	8 Vehicles (7 WC)	Personal vehicles and commuter vans
Service Type(s)	Fixed Route; Demand Response;	Fixed Route; Demand Response	Demand Response	Demand Response; Door to Door upon request	Demand Response (curb to curb shared ride)	7 Fixed Routes, Paratransit	Fixed Route, Paratransit	Demand Response, curb to curb	Vanpool and Carpool matching database
Scheduling/	24 Hour advance notice	1 day advance reservation for MITS Plus, same day if space available	48 Hours advance notice	48 Hours advance notice	24 hours advance notice	1 day advance notice for Nifty Lift EZ Rides	5 p.m. one day prior to trip	24 Hours advance notice	Riders coordinate
Trip Denials	15 per month	Not provided	Not Provided	12-14 per month	Not provided	~3% paratransit	Not Provided	Not Provided	Not Provided

The following table outlines intercity bus services available in some parts of Region 7. Intercity bus services receive funding from the Federal Transit Administration (FTA) Section 5311(f) Program. The Indiana Department of Transportation Office of Transit oversees Section 5311(f) funding and programs and funding in Indiana.

**Exhibit 39: Intercity Bus Service in Region 7**

	<b>Barrons Bus</b>	<b>Hoosier Ride</b>
<b>Location / Contact</b>	888-378-3823	800-544-2383
	<a href="http://www.barronsbus.com">www.barronsbus.com</a>	<a href="https://hoosieride.com/">https://hoosieride.com/</a>
<b>Service Area</b>	Intercity transit routes	Intercity transit routes
<b>Eligibility Criteria</b>	Public	Public
<b>Days/Hours of Service</b>	Varies by route	Varies by route
<b>Ridership*</b>	30,929	19,128
	*INDOT Annual Report, Barrons Bus 2020	*INDOT Annual Report, Miller Transportation 2020
<b>Fare/Donation Structure</b>	Varies by distance	Varies by distance
<b>Funding Sources</b>	Section 5311(f)	Section 5311(f)
<b>Operating Budget</b>	Not provided	Not provided
<b>Fleet and Wheelchair Accessibility</b>	Commuter buses are wheelchair accessible	Commuter buses are wheelchair accessible
<b>Service Type(s)</b>	Intercity Bus	Intercity Bus
<b>Scheduling/</b>	Tickets and schedules can be purchased on the Barrons Bus website	Tickets can be purchased 30 minutes prior to boarding

### **Human Service Agency Providers**

Exhibit 40 lists the Human Service Agencies that offer transportation to their clients, or purchase transportation for their clients. Several provide open-door transportation, meaning that a segment of the general public (such as older adults) is eligible to ride. The other agencies provide ‘closed door’ service to their clients only.

Additionally, Region 7 residents who use Medicaid non-emergency transportation are sometimes served by providers from outside of the area. These providers are typically dispatched to the area by the State of Indiana’s contracted managed care organizations through transportation brokerages.

**Exhibit 40: Human Service Agency Transportation in Region 7**

	<b>Location / Contact</b>	<b>Service Area / Eligibility</b>	<b>Days/ Hours of Service</b>	<b>Fare/ Donation Structure</b>	<b>Fleet by Location and Accessibility</b>	<b>Scheduling</b>
<b>Adams County Council on Aging, Inc</b>	313 W Jefferson St # 120, Decatur, IN 46733 (260) 724-5316 <a href="https://adamscountycouncilonaging.org/">https://adamscountycouncilonaging.org/</a>	Adams County, or medical destinations out of county, residents 60+ and disabled adults	Monday - Friday 8 a.m. - 4 p.m.	\$5-10 donation suggested	5 vehicles, 3 WC	24-48 hours in advance
<b>Bi-County Services, Inc.</b>	425 Harrison Rd. Bluffton, IN 46714 (260) 824-6615, (260) 824-1253 <a href="https://bi-countyservices.com/">https://bi-countyservices.com/</a>	Adams and Wells Cos., Individuals with Disabilities	Varies	None	15+ Vehicles	Client Only
<b>Carey Services, Inc.</b>	2724 S Carey St. Marion, IN 46953 (765) 668-8961 <a href="https://www.careyservices.com/">https://www.careyservices.com/</a>	Blackford, Cass, Grant, and Wabash Cos., Individuals with Disabilities	Varies	None	40+ Vehicles	Client Only
<b>Jay-Randolph Developmental Services, Inc.</b>	901 E. Water St. Portland, IN 47371 260-726-7931 <a href="https://www.jrds.org/">https://www.jrds.org/</a>	Jay and Randolph Cos., Individuals with Disabilities	Not Provided	Not Provided	Not Provided	Client Only
<b>Hillcroft Services, Inc./Reliable Transportation</b>	501 West Air Park Drive, Muncie, IN 47303 (765) 284-4166 <a href="https://www.hillcroft.org/">https://www.hillcroft.org/</a>	Delaware County & connecting to neighboring county services, People with Disabilities	M-F, 7 a.m. - 5 p.m. 24 hours for group homes	Not Provided	6 accessible vehicles in Delaware County, 12 accessible vehicles in E. Central IN	Call or message website

	Location / Contact	Service Area / Eligibility	Days/ Hours of Service	Fare/ Donation Structure	Fleet by Location and Accessibility	Scheduling
<b>Lifestream Services Inc.</b>	1701 Pilgrim Boulevard, Yorktown (765) 759-1121, (800) 589-1121 <a href="https://www.lifestreaminc.org/transportation/">https://www.lifestreaminc.org/transportation/</a>	Blackford, Delaware, Grant, Henry, Jay, and Randolph Counties, Public and Senior (60+)	Monday - Friday 8 a.m. - 5 p.m.	\$1-2 per trip, or donation in some areas	11+ vehicles	Call in advance
<b>Riverview Health Rides / Janus Developmental Services, Inc.</b>	1555 Westfield Rd. Noblesville, Indiana 46062 317-473-2323 <a href="https://janus-inc.org/programs-services/janus-contracted-transportation">https://janus-inc.org/programs-services/janus-contracted-transportation</a>	Door-to-door, shared-ride transportation for patients at any Riverview Health locations	Monday - Friday 6 a.m. - 6 p.m.	\$5 or \$20 Pass for four trips	Vehicles are wheelchair-accessible.	Schedule up to two weeks in advance
<b>Wells County Council on Aging</b>	225 W Water St., Blufton IN 46714 (260) 824-4969 or 877-477-4969 <a href="http://www.councilonaginginc.com/publicTransit.html">http://www.councilonaginginc.com/publicTransit.html</a>	Wells County and out of county up to 50 miles from Blufton, 60+ and individuals with disabilities	Monday - Friday 6:00 a.m. – 7:00 p.m.	\$2-5 per trip in Blufton & Wells County, \$20-50 for trips outside Wells	14 Vehicles, 100% WC accessible	24 hours advance notice
<b>Alternatives Inc.</b>	1309 Monticello Dr, Anderson (866) 593-9999 <a href="https://www.alternativesdv.org/">https://www.alternativesdv.org/</a>	Madison County, Client based	Monday - Friday	Not Provided	2-3 WC accessible	Client Only
<b>Aspire</b>	9615 E 148th St, Suite 1, Noblesville (877) 574-1254, 800-560-4038 <a href="https://www.aspireindiana.org/">https://www.aspireindiana.org/</a>	Hamilton, Madison Counties, Client based	Monday - Friday or evening and weekend by appointment	Not Provided	11 vehicles	Client Only

	Location / Contact	Service Area / Eligibility	Days/ Hours of Service	Fare/ Donation Structure	Fleet by Location and Accessibility	Scheduling
<b>CareGivers - Developmental Service Alternatives Inc. (DSI)</b>	4019 Columbus Ave Suite C, Anderson 765-649-4247 <a href="https://cg-idd.com/dsa-indiana/">https://cg-idd.com/dsa-indiana/</a>	Madison County, Client based		Not Provided	4-6 vehicles in Anderson area, 100% WC accessible	Client Only
<b>Hancock County Senior Services, Inc</b>	312 E Main St Suite A, Greenfield (317) 462-3758 <a href="https://hcssi.org/">https://hcssi.org/</a>	Age 60+	Monday - Friday 7 a.m. - 5 p.m.	\$4 per stop in County	11 vehicles, 7+ WC accessible	Advance reservation
<b>Hopewell Center Inc</b>	5325 S Main St, Anderson (765) 642-0201 <a href="http://www.hopewellcenter.org/">http://www.hopewellcenter.org/</a>	Madison County, Client based	Not Provided	Not Provided	7-10 vehicles, all WC accessible	Client Only
<b>Childrens' Bureau / Community Partners</b>	3620 N Everbrook Ln F, Muncie, IN 47304 765.381.0210 <a href="https://www.childrensbureau.org/">https://www.childrensbureau.org/</a>	Madison, Delaware, Grant, Blackford, Wells, Adams, Jay, Randolph, and Henry Counties, Client based	Not Provided	Not Provided	Case Managers drive clients	Client Only
<b>Community and Family Services</b>	1511 N Meridian St, Portland, IN 47371 (260) 726-9318 <a href="https://www.communityandfamilyservices.org/">https://www.communityandfamilyservices.org/</a>	Adams, Blackford, Huntington, Jay, Randolph, and Wells Counties, Client based	Not Provided	Not Provided	Purchase transit where available	Call in Advance
<b>Senior Rides</b>	Provided by Lifestream 888-589-1121 <a href="https://www.lifestreaminc.org/grant-county-transportation/">https://www.lifestreaminc.org/grant-county-transportation/</a>	Delaware and Grant Counties, Age 60+	Monday - Friday 8 a.m. - 5 p.m.	Donation-based	See Lifestream above	See Lifestream
<b>Cancer Services of Northeast Indiana</b>	6316 Mutual Dr, Ft Wayne, IN 46825 260-484-9560 <a href="https://cancer-services.org/">https://cancer-services.org/</a>	Northeast Indiana, Persons diagnosed with any form of cancer	Monday 9 a.m. - 7 p.m. Tues - Fri 9 a.m. - 5 p.m.	Donation-based	Volunteer	Advance Reservation

	Location / Contact	Service Area / Eligibility	Days/ Hours of Service	Fare/ Donation Structure	Fleet by Location and Accessibility	Scheduling
<b>Community Transportation Network</b>	5601 Industrial Rd, Ft Wayne, IN 46825 260-420-3280 <a href="https://ridectn.org/">https://ridectn.org/</a>	Ft. Wayne and Allen County, Age 60+ and Individuals with a disability	Monday - Friday 7 a.m. - 5 p.m.	Income-based, Medicaid co-pay	33 Vehicles	Advance Reservation
<b>Vocational Rehabilitation Services</b>	201 E. Charles St., Muncie, IN, 47305	Adams, Blackford, Delaware, Henry, Jay, Randolph and Wells counties, Client based	Not Provided	Not Provided	Purchase transportation services	Client Only
<b>Pathstone Corporation</b>	1917 W. Royale Drive, Muncie, IN, 47305 <a href="http://www.pathstone.org">www.pathstone.org</a>	Blackford, Delaware, Henry and Randolph counties, Client based	Not Provided	Not Provided	Purchase Transportation Services	Client Only

**Private Transportation Providers**

Private companies that provide taxi, client, or other transportation are included in an attempt to make the region’s transportation inventory as complete as possible. A yellow-pages or internet search will find businesses that are currently operating in a particular city or county. Discussion at the regional level identified:

- ◆ Med Express Transportation, Community Hospital Anderson, 765-298-1111 or <https://www.ecommunity.com/locations/community-hospital-anderson>
- ◆ Quality Care Ambulance, (765) 664-0706, <http://www.qcambulance.com/>
- ◆ Able Ambulance, (765) 664-9011, <https://www.ableambulance.com/>
- ◆ Heartland Ambulance, (888) 925-7257, <https://heartlandambulance.com/>
- ◆ Trans Care Ambulance, (765) 664-1010, <https://www.facebook.com/transcareambulancemarion>
- ◆ Eaton EMT, (765) 396-3748, <https://eatonemts.org/>
  - Eaton EMTS is a Private Not-For Profit, 501c (3), and is contracted with Delaware County to provide voucher-based, 24/7 accessible taxi service outside of the MITS paratransit service hours/area.
- ◆ Wells County EMS, (260) 827-0166, <https://wells-county-ems-inc.business.site/>
- ◆ Express Ride Taxi, (765) 606-9893
- ◆ Cowboy’s Taxi Service, (765) 215-1708, <http://cowboystaxi.business/>
- ◆ Unique Taxi, (765) 644-7777
- ◆ Miller Transportation provides intercity bus routes through Indiana’s Hoosier Ride, and provides private charter bus service, <https://millertransportation.com/> or <https://hoosierride.com/>



## VEHICLE INVENTORY AND UTILIZATION

Vehicle inventories were obtained by e-mail from transportation providers who reported a total of 136 vehicles serving public transit agencies in the counties in region 7 plus access to an additional 48 vehicles available to Section 5310 providers in the region. Approximately 96 percent of the vehicles available in all or a portion of the Region were accessible for wheelchairs and other mobility devices. All agencies operating vehicles were contacted to provide an updated vehicle inventory. If the agency did not provide the updated inventory, alternative fleet information was derived from the 2020 INDOT Annual Report. If an agency listed above is not included in the table, the detailed vehicle utilization information was not available for the report.

Between 2016 and 2020, the region received 48 vehicles through the INDOT Section 5310 program. The value of the vehicles was \$2,107,051.00, leveraging \$421,410.00 in local dollars. All of these vehicles were acquired by the following agencies:

- ◆ Adams County Council on Aging
- ◆ Bi-County Services
- ◆ Carey Services
- ◆ Hillcroft Services
- ◆ Jay-Randolph Development Services
- ◆ LiveStream Services
- ◆ Wells County Council on Aging

Several of the above agencies have transitioned from receiving Section 5310 vehicles to operating as a public transit, now receiving Section 5311 operating funds and Section 5339 capital vehicle funds. All of the transportation operators operate with fleets that include a large percentage of wheelchair-accessible vehicles. However, given the demand for wheelchair-accessible service, the absence of public transportation options in Adams County or rural Delaware and Grant Counties, and the growing aging population and individuals with physical challenges living independently in the community, agencies should continue to have a wheelchair-accessible fleet of vehicles that are in good condition.

MITS and CATS provide Saturday service in their city service areas. None of the other transportation providers operate on weekends as part of their regularly scheduled service.

## NEEDS ASSESSMENT

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### OVERVIEW

Local human service agencies, all transportation providers serving each county, and the general public were invited to participate in the coordinated transportation plan needs assessment process. An online public survey and public meeting were used to gather input. The provider interviews described in Chapter 3 supplemented the needs assessment. The following paragraphs outline transportation needs identified through public surveys and stakeholder coordinated transportation meetings.

### GENERAL PUBLIC AND STAKEHOLDER MEETINGS

Due to COVID pandemic restrictions, an in-person community input meeting was not possible, so online regional meetings were organized to discuss changes since the prior plans were adopted and to identify ongoing or new transportation needs. Virtual local public meetings were facilitated for each region of the state from March 17-31, 2021 to discuss the unmet transportation needs and gaps in service for older adults, individuals with disabilities, people with low incomes, and the general public.

The Indiana Department of Transportation (INDOT) advertised the meetings online, with press releases, and with emails to the current FTA Section 5310 and 5311 program participants. A meeting flyer was emailed to all FTA Section 5310 and 5311 program funded agencies, organizations that participated in the previous Coordinated Plan, and to several statewide networks or associations for general distribution. Meeting invitation postcards were mailed to 144 identified organizations in Region 7 including those that participated in prior Coordinated Public Transit Human Services Transportation Plans, County Commissions, and agencies that have applied for FTA Section 5310 grants from INDOT since 2017.

The general public was invited and notified of the meeting, held in Region 7 on March 23, 2021, from 12:00-1:30 p.m., through the following websites and newspapers:

- ◆ Indiana RTAP website
- ◆ Health by Design/ICATS
- ◆ Decatur Daily Democrat
- ◆ Berne Witness
- ◆ Chronicle Tribune
- ◆ The Courier Times
- ◆ The CR
- ◆ Herald Bulletin
- ◆ PTLP News
- ◆ Madison Courier
- ◆ News Banner

Additional meetings specifically for the Madison County Council of Governments' Metropolitan Planning Area were advertised and hosted through the Heartland MPO and Delaware Muncie MPO Citizens Advisory Committees, which provided more local input from those urban communities.

The meetings were held via Zoom or GoToMeeting. Where requested, meeting captions were used to aid verbal communication. Each participant had an opportunity to introduce themselves and who they were representing, allowing a record of participation to be created. A presentation was used to spark discussion on topics including:

- ◆ the use of Section 5310 funding and the impact of the Coordinated Plan on funding projects
- ◆ project selection and funding in the region since the 2017 plan
- ◆ updates of coordination activities that have occurred since the 2017 plan
- ◆ the availability and partial results of the transportation public survey
- ◆ demographic data that impact transportation need, such as zero vehicle households, population age 65 and over, and population of individuals with disabilities
- ◆ the inventory of transportation providers available in each region
- ◆ the needs recognized in 2017
- ◆ the goals adopted in 2017 to meet those needs
- ◆ progress on meeting goals,
- ◆ new identification of unmet needs and potential goals that would address them, and
- ◆ local plans and projects that should be included in the Coordinated Plan.

Documentation of the meeting outreach and participation, and the presentations shared at the regional meeting are provided in Appendix B.

Through the conversations held in the regional input meetings and the stakeholder interviews a number of transportation-related needs and gaps in availability were identified. In Region 7, the meeting participants represented the following organizations:

- ◆ Henry Community Health
- ◆ Marion Transit and City of Marion
- ◆ Statewide Providers Association (representing individuals with disabilities)
- ◆ Bi-County Services
- ◆ St. Vincent Mercy Hospital
- ◆ Wells on Wheels
- ◆ Carey Services
- ◆ Jay Randolph Developmental Services
- ◆ Heartland (Anderson) MPO

In the interviews Bi-County Services, Carey Services, and Hillcroft all serve people with disabilities and seniors. TranServices Corporation (Marion Transit), Hillcroft/TRAM, and WCCOA/Wells on Wheels represented public transit.

## CURRENT AND ONGOING COORDINATION

There is a standing transportation coordinating committee (or TAC) in Region 7 that meets quarterly, with good relationships between the staff at several human service agencies managing transportation service in the area. The relationships allow for formal and informal networking and coordination in the community, including contract relationships and the purchase of service.

Since the last Coordinated Plan Update, many of the transit providers have replaced vehicles in their fleet with newer vehicles and WOW has installed cameras on all of the vehicles. In the Anderson area, local hospitals and health care facilities have purchased fleets and started providing patient transportation to and from appointments.

## RESULTS OF THE GENERAL PUBLIC SURVEY

A general public survey regarding transportation needs was distributed statewide. Online survey links were sent to all transit and human service agencies, who were asked to share it with their clients and consumers. The survey form was made available in paper/pdf format for the local agencies to print and distribute to clients as appropriate. Spanish translation and large type versions were also available. The survey link was advertised in local newspapers, on the Indiana RTAP website, and through statewide advocacy organizations. The survey was open from November 2020 through April 2021, and was advertised repeatedly throughout this period through emails and reminders in meetings to encourage participation. The Survey form and results are included in Attachment C.

In Region 7, the survey received 98 responses. Results are shown in the following charts. Each chart is based on the number of responses received for individual questions. The survey results offer insights into the unmet transportation needs and gaps in service for the region. The distribution of results is as follows:

- ◆ Adams County: 25 responses, 26%
- ◆ Delaware County: 5 responses, 5%
- ◆ Jay County: 1 response, 1%
- ◆ Madison County: 14 responses, 14%
- ◆ Randolph County: 1 response, 1%
- ◆ Wells County: 51 responses, 52%
- ◆ 0 responses for Blackford, Grant, and Henry Counties

### **Transportation Modes Used**

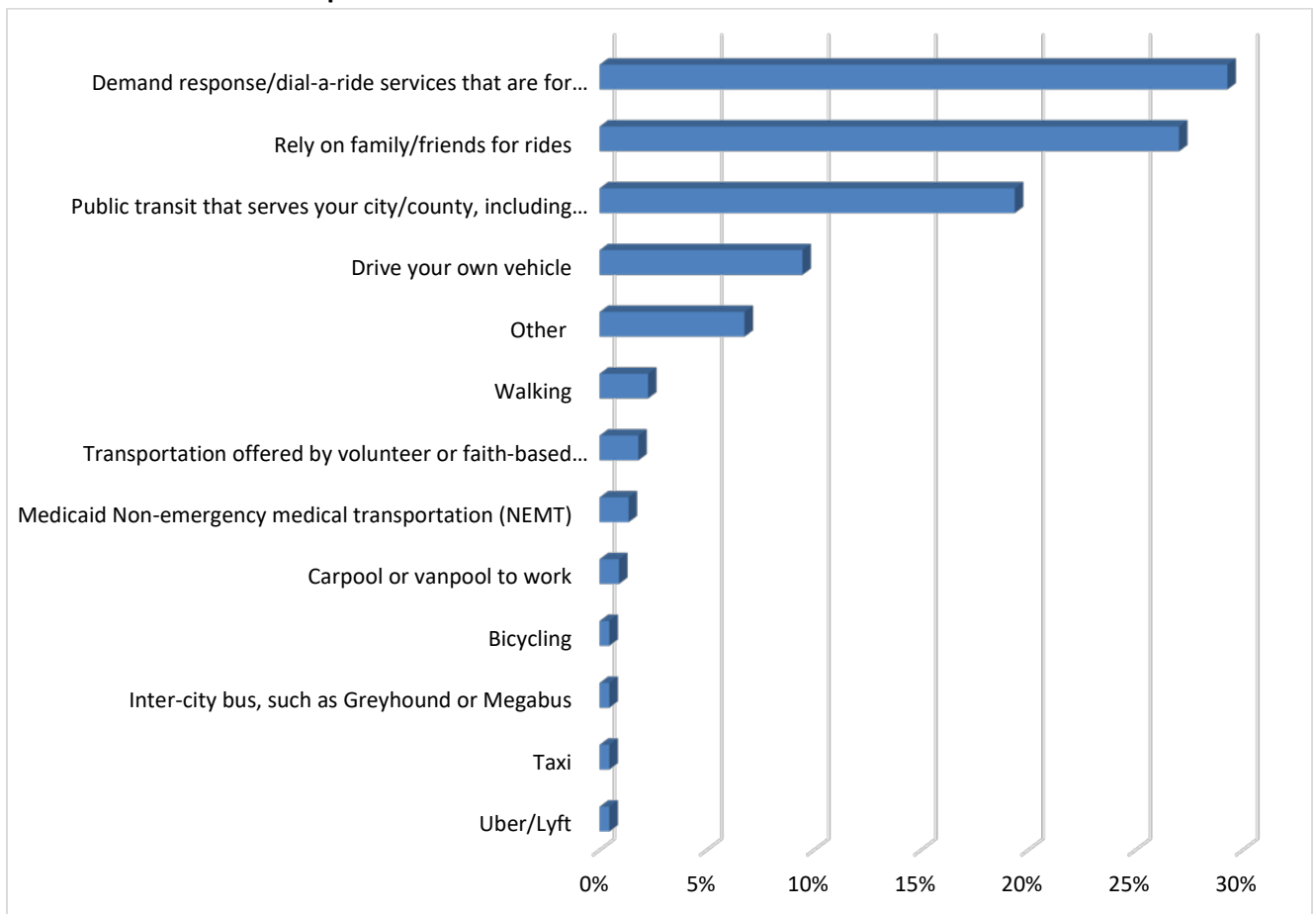
Survey respondents were asked to report all forms of transportation they typically use. Choices ranged from bicycling and walking to using public or agency transportation services. As indicated in Exhibit 40, the most prevalent choice for respondents was demand response or dial-a-ride services that are for specific groups only, with 65 of the 98, or 29.8% choosing this answer. In order of response rate, the other respondents were relying on friends and family to get where they need to go (27%), using public transit that serves their city or county (19%), driving their own vehicle (9%), other (7%), walking (2%), transportation provided by volunteer or faith-based groups (1.8%), Medicaid Non-emergency Medical Transportation (NEMT) (1.3%), carpool or

vanpool to work (0.9%). Bicycling, Inter-city bus, taxi, and uber/Lyft each received one response (0.4%). In this region there were zero responses that used scooter/moped.

The ‘other’ responses included school transportation, park and health care staff, working from home, and airport shuttle services. One person responded that “wheelchair is my form of walking.” And another commented,

*“While I own my own wheelchair accessible vehicle, I am unable to drive it myself due to my visual imitations. I have to depend on others to drive it! I was only able to afford this due to the passing of family members and their generosity!! It became a necessity because county to county transportation connections have become spotty and iffy over the years. You cannot depend on that transportation for a doctor appointment even to go from Muncie to Anderson if you are not a recipient of Medicaid. It is often assumed that somebody with a disability is always a Medicaid recipient!! Not everyone with a disability is on Medicaid.”*

**Exhibit 41: Modes of Transportation Used**



**Transportation Services**

When asked what transportation service they used, respondents wrote in MITS (4), Hillcroft/TRAM (4) and Southeast Trans (1). When asked what secondary service they used, several respondents mentioned Eaton

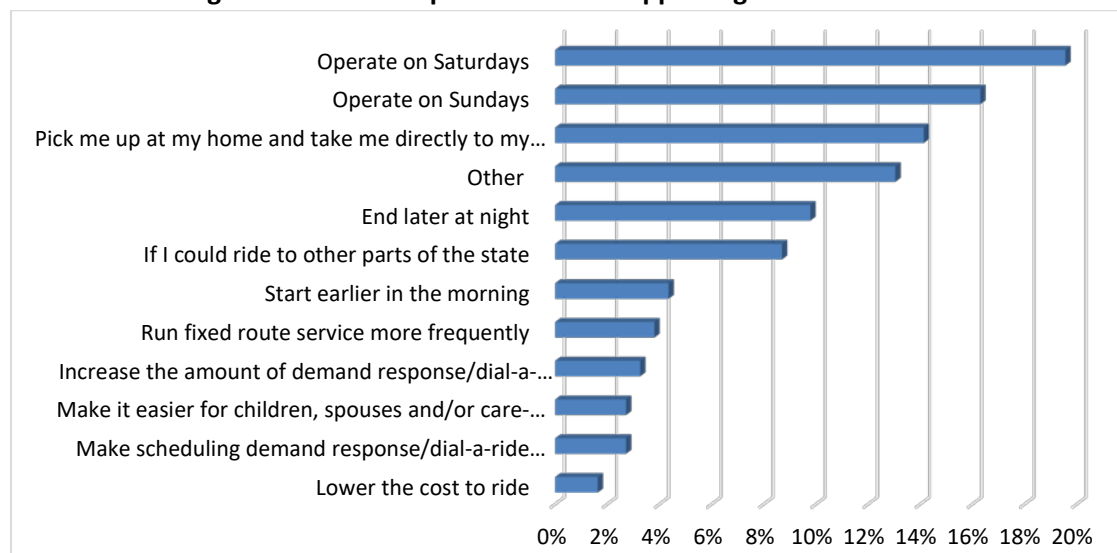
EMT’s Accessible Cab service, contracted through MITS. Several more used Uber or Lyft, the concierge service ‘Go-Go-Grandparents,’ IndiGo, the Interurban, and individual drivers’ names were written in.

**Changes to Make Transportation More Appealing**

When asked what changes could be made to the local transportation options to make using them more appealing, the most common response was having weekend service. The option to be picked up at their home and taken directly to their destination was a close runner up. Although there are some geographic gaps, the region has reliable transportation options that serve the most populated areas and daytime ‘business’ hours. As mentioned in the community meetings, people need to access their community in the evenings and on weekends, for shift work and for other important activities including shopping, social and community events. If a person needs to find another ride from friends or family, or drive themselves in some cases, they are less likely to use transit in other cases, decreasing the impact of transit in the community. The other responses reinforce this message.

In order of response, the other common selections were for service to end later at night, to be able to ride to other parts of the state, for transit or transportation service to start earlier in the mornings, to run more frequently, and to increase the amount of demand response service available. Several people want to make it easier for children and others to ride along, make scheduling the trips more convenient, and to lower the cost of the ride. In the write-in responses, nine of 26 people indicated the existing transportation was sufficient for them. One rider in particular reported that public transportation was not practical, as they needed the higher level of supervision and support that only a specialized agency could provide. For those that would/could use public transit they requested a family pass option (priced at \$60 per month), on-demand scheduling to allow spontaneous trips, and trips in the community and to church on the weekends. Three people mentioned the need for service like WOW in berne and throughout Adams County. One person would also like transportation to run on holidays. The range of responses are shown in Exhibit 42.

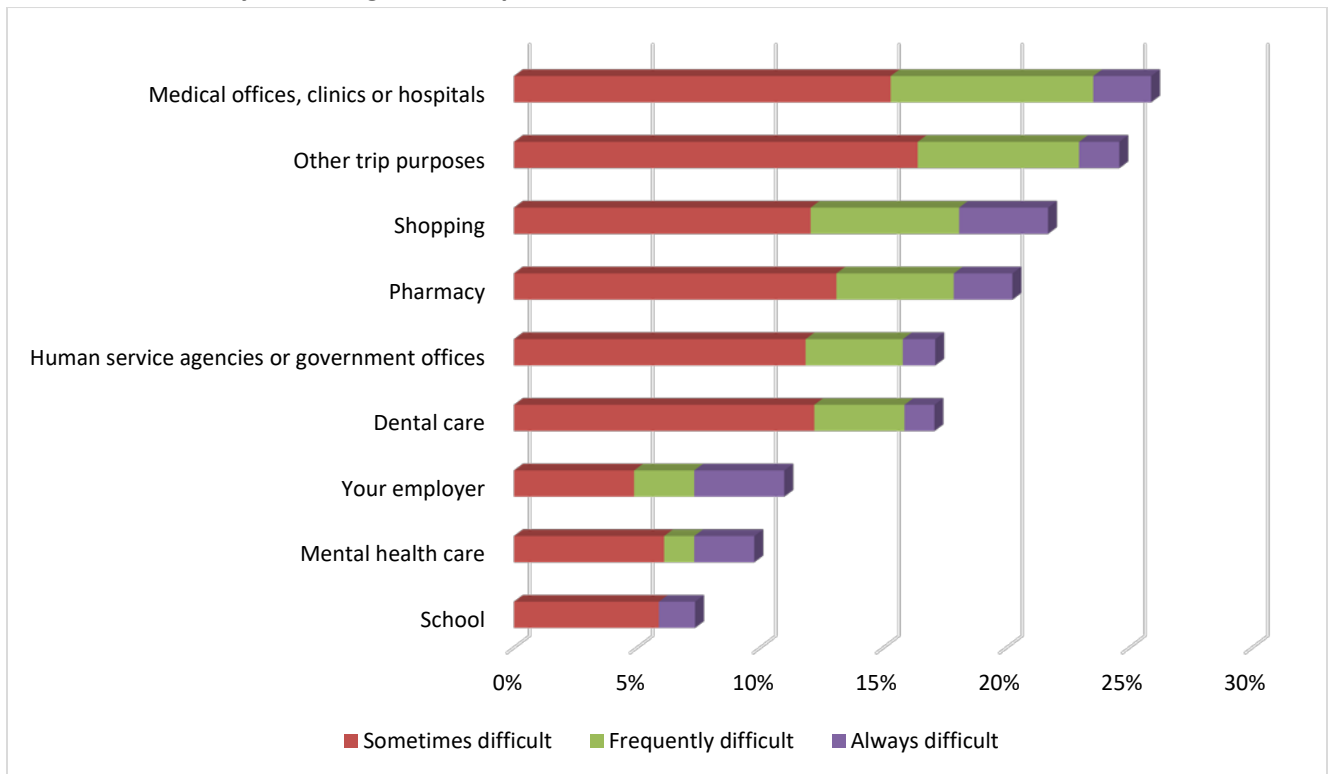
**Exhibit 42: Changes to Make Transportation More Appealing**



### **Getting Transportation Needed to Access Destinations**

The survey next asked if the respondent had difficulty getting the transportation they needed to a variety of destinations. Many respondents did not report difficulty. The chart shown in Exhibit 42 does not show the responses “No difficulty” and “Not Applicable.” The remaining choices were Sometimes, Frequently, or Always Difficult. Between nine and 18 individuals answered the survey affirmatively for each destination, reporting that they had some difficulty getting to medical care, other trip purposes, shopping, pharmacy, agency or government offices, dental care, employment, mental health care, and school. The individuals responding that they had difficulty came from all the counties in the region – no pattern of increased difficulty based on location was identified.

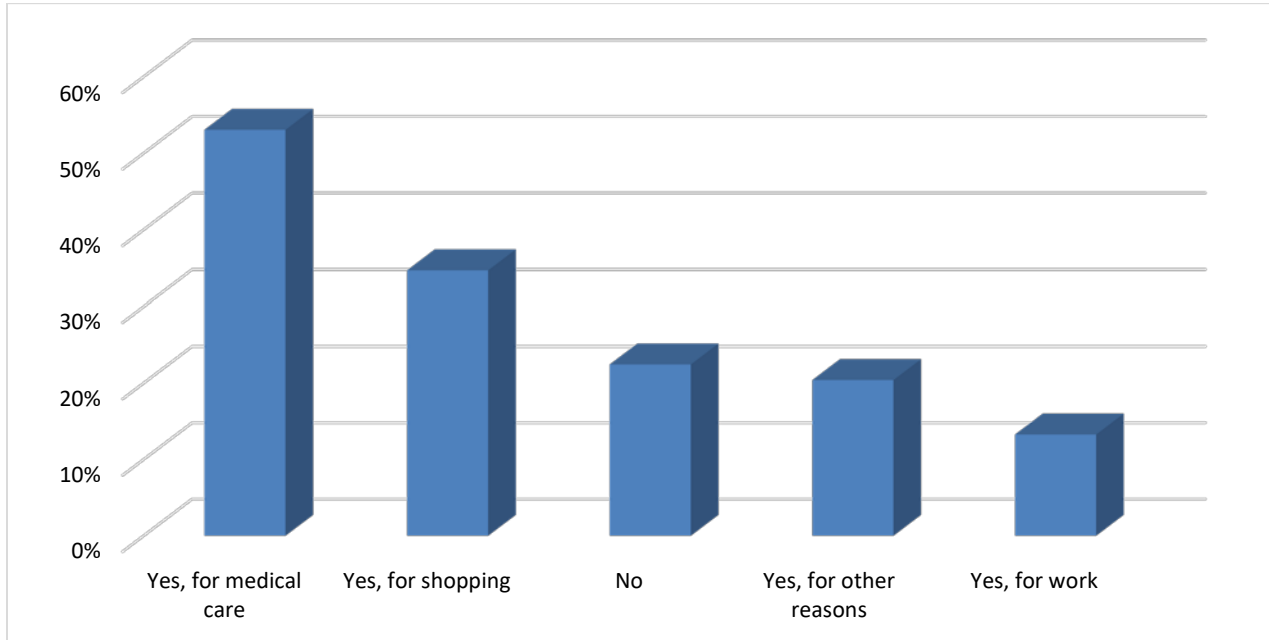
**Exhibit 43: Difficulty in Getting the Transportation Needed to Access Destinations**



### **Travel to Destinations Outside the County**

More than half the individuals surveyed reported needing to travel to destinations outside their county for medical care and over a third for shopping. Another 13 percent need to go out of the county to work, and 20 percent go out of county for other reasons including visiting family and for care-giving responsibilities, attending agency services, visiting a wound clinic, specific shopping needs, and entertainment including dining out.

#### Exhibit 44: Traveling Out of the County to Access Destinations



Respondents were asked if they faced difficulty in traveling outside the county, and twenty-one of the respondents (21 percent) said they did, giving the following information:

- Limited options to go out of city.
- It is the public transportation as listed above and some other answers to questions! I am very grateful to have my accessible van that others can drive me but if it breaks down Or I am unable to find someone to drive my van I am stuck!!
- Limited options. Surrounding counties don't connect with services eligible for in county live in. Difficulty in coordinating with multiple transportation services.
- No non-medical option that is affordable between counties. Too expensive for friends, family or taxis.
- It's hard getting a connecting ride from another service.
- Because I am in a wheelchair and have no transportation at home.
- Difficulty getting to agency in Wells Co. when agency route vans aren't running.
- Must hire a driver.
- Has relative in Adams Co. that would like to be able to go to
- Get many rides, but people are not always available
- Mom has health limitation
- Mom can't drive me out of my county or drive at night.
- Does not have regular transportation, lives with mom who does not drive
- Does not have regular transportation that allows her to do this, uses bike a lot for transportation.
- Does not have regular transportation to go outside county.
- Can't take pub. transp. to Wayne or Indy medical or to see relatives
- Sometimes, I don't get to go someplace when I want to due to transportation not available then (but eventually I do get to go).

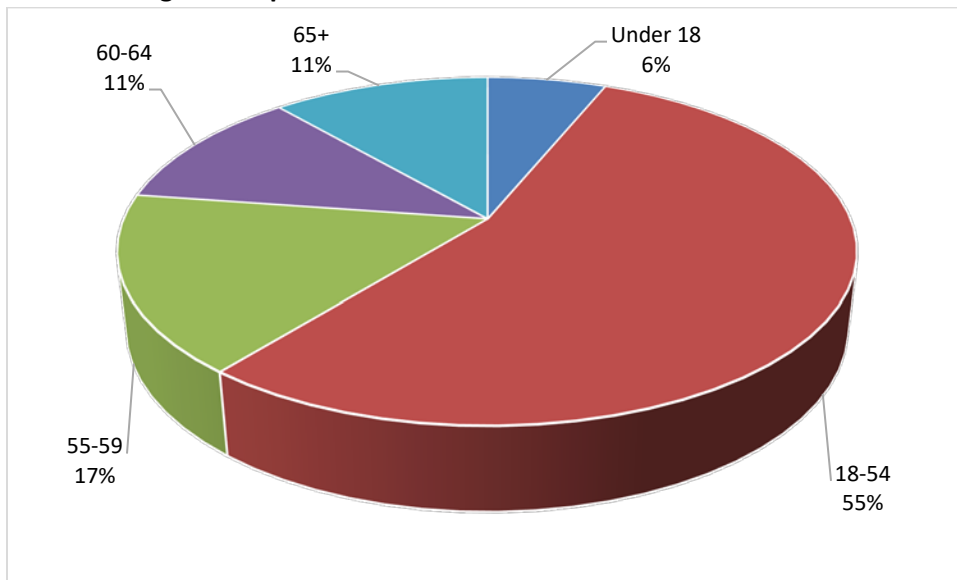


- Sometimes. No help. Because of COVID, it has been hard to keep home health staff for son, which means I have hard time (or make arrangements for others) to shop for groceries, medicine, dr. appt, etc. (mother)

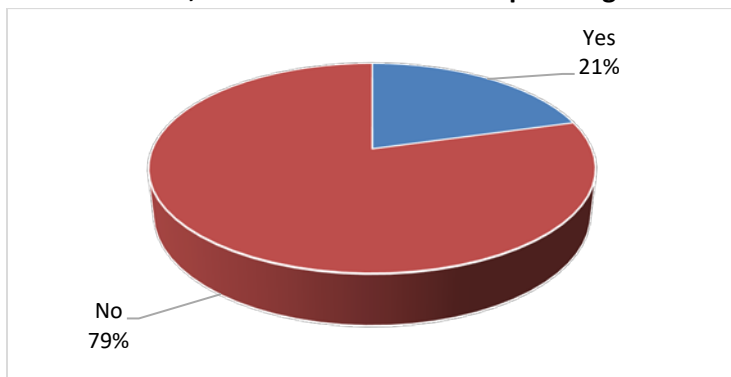
**Demographic and Socio-Economic Conditions**

The majority of respondents to the public survey were between 18-54 years of age. Nineteen of the respondents, or 21 percent, rely on a mobility device such as a cane, walker, wheelchair, service animal, or another device. In comparing the respondents that reported using a mobility device, and respondents that had difficulty traveling to destinations outside of their county of residence, nine people responded yes to both questions.

**Exhibit 45: Age of Respondents**



**Exhibit 46: Do respondents have a disability which requires them to use a cane, walker, wheelchair, and/or another device, or a service animal to help them get around?**



### Survey Comments

The survey closed by asking if people had comments or suggestions regarding transportation in their community. Five respondents from Adams County commented on the lack of transportation. The following comments were sent in:

- ◆ I hear there is a need for workers to our factories not having transportation. (Older adult)
- ◆ We need freedom to worship on Sundays and we need same day services for those of us with mobility limitations. (Person with a disability)
- ◆ I don't know if this will ever happen, I think that MITS Union should not have been able to change the original agreement. It should go back to the original agreement! Allowing Eaton EMT service to Provide the accessible taxi service 24/7! In the end it makes it an issue of discrimination for people in wheelchairs because we cannot use any other public taxi service because they are not wheelchair accessible!! (Older adult with a disability)
- ◆ Just because a person doesn't use one of the aforementioned mobility aids does not mean they don't have a qualifying disability. There are many more disabilities which affect a person's mobility but aren't improved by mobility devices; endurance and stamina may be more telling of their need for door-to-door service. A throwback to why the transportation services now seen as para transit were formerly Older Americans/senior services.
- ◆ It would be nice to have a ride to church for in person services because not all churches have accessible vans or the churches are not in close proximity to house. For example: I enjoy going to my home church White River Christian Church but it's in Noblesville. I enjoy going to Alexandria Nazarene Church but it's too far to wheel myself. (Person with a disability)
- ◆ Again, Jeremy doesn't perceive a problem. But he is capable of many more experiences if he had access to more transportation opportunities.
- ◆ Wish Adams County had service like WOW vans in Wells Co. (Person with a disability)
- ◆ Provide routes on the weekend.
- ◆ Would like to be able to go places with his girlfriend.
- ◆ Haven't considered public transportation because it has not been available. Would use it if was convenient for shopping, leisure and would love transportation to the Day Services.
- ◆ One driver (WOW) is not very friendly! He's not very patient.
- ◆ It has always been helpful.
- ◆ Public transport is just not a helpful option. (Adams County)
- ◆ Needs to be more precise with pick up. I didn't like waking up earlier than needed.
- ◆ Transportation has been limited.
- ◆ Calling ahead (24 hours) is a hindrance. I only need it if it is raining, but they will not come on short notice.
- ◆ Adams County doesn't have much public transportation.
- ◆ Family provides most of my transportation needs.
- ◆ Zero public transit. (Person with a disability, Adams County)
- ◆ Hope to go out more when safer. (Older adult)
- ◆ Wish they went on weekends/nightly so I could get community job.
- ◆ I don't need it, I drive. (Older adult with a disability)
- ◆ WOW provides a quality transportation service in our community.

- ◆ We have none in Adams County.
- ◆ I would bike more if there were designated bike lanes in busy areas.
- ◆ I would use useful public transportation for travel inside the county for shopping and other travel if it was available. (Older adult)

## IDENTIFIED MOBILITY NEEDS AND GAPS IN TRANSPORTATION

Coordinated transportation stakeholders will consider the following needs and gaps in service when developing transportation strategies and grant applications.

### **Increase options for long-distance travel from urban to rural destinations, between counties, and to Indianapolis**

Participants reported that the transit system service area boundaries within Madison County adds a challenge to navigating the public transportation network. CATS offers public transportation within the City of Anderson only. TRAM serves rural areas of Madison County and outside of the City of Anderson only. People who live in Anderson and seek employment or need to get to appointments in Madison County yet outside the City of Anderson, would need to coordinate a ride on both CATS and TRAM to complete their relatively short trip. Attendees at the INDOT Region 7 public meeting brought up the need for CATS schedules to better align with shift changes for workers in the Flagship area, along Scatterfield Road, and Interstate 69. One of the current CATS routes go out to a mall that has been closed for several years.

Beyond the geographic boundaries of Madison County, people also need to travel to other destinations in the region including locations in Daleville and Fortville which are served by LifeStream Services or Hancock Area Rural Transit (HART), respectively.

As a community on the outskirts of Indianapolis, many people from Madison County need to travel into the larger urban area to access medical, employment, and shopping resources. The number one reported reason for TRAM trip denials are requests for trips that go out of Madison County or to Indianapolis. This need was identified in the MCCOG's Metropolitan Transportation Plan, and in a recent Health Impact Assessment conducted by MCCOG in coordination with data provided by Community Hospital – Anderson.

Where regional transportation options are available, they are not well known, or are expensive. Hoosier Ride and CIRT provide some options for inter-county travel, but are not well known/advertised. Ball State is considering creating a shuttle for their students, which could potentially be open to other public riders. There is also a possibility of passenger rail service between Anderson and Indianapolis, but that is years away. There are taxi services, Lyft and Uber in the southern and more urban parts of Madison County. Taxi trips into Indianapolis can cost more than \$100 each way. Other private providers, including EMT may be available for hospital and nursing home trips. Community Hospital has a shuttle service but it does not fully address late night discharge and follow-up medical trips.

### **Some areas do not have public transit service**

Adams County does not have public transit service available to the general public. There are transportation options available to older adults and individuals with disabilities. However, no public transit is currently provided for the general public. Also, throughout the region, there are gaps in service areas such as limitations on trips that cross county or municipal boundaries.

### **Transportation to and from employment**

Access to large employers is limited by the hours of operation for the transit operators as well as the service areas. Some large employers are not located on a public transit fixed route. Or, the commute time that it would take to access that employer is excessive making public transit not a viable option to support employment. Where private transportation options are available, the cost of the fare may be a limiting factor.

### **Trip cost**

Even within a single county, the passenger fare may be too high for many people. Transportation providers that offer transportation to locations that are outside of the county may charge a premium fare for that trip which is higher than the in-county fare. Since many travel needs in the region involve multi-county transportation, the higher cost of the multi-county trip can be prohibitive for the passenger.

However, it is noted that the cost is also high for the transportation provider. Trips within a single county may be 40 minutes to an hour in one direction. The passenger fare that is collected, in those cases, may be a small portion of the actual cost of the trip. This fact makes balancing the cost to the passenger and the cost to the provider a difficult challenge and may depend, in part, on the amount other revenue available to the transportation provider from other sources (i.e., State, Federal, and local subsidy).

### **Need to maintain and expand service with accessible vehicles, including taxis**

Within Anderson and the immediately surrounding area, there is a good record of contract and coordination relationships with the transportation providers in the area and many providers offer accessible vehicles within their fleets. But a latent need for accessible service is still reported in the public meetings and surveys. One reason for the continuing reports of gaps in access to accessible vehicles could be triggered by the region's higher than state average population of older adults and individuals with disabilities. The indicated need for accessible vehicles also could be due in part to a need to educate the public about the services that are needed and also to ensure that accessible vehicles are available during the hours and days when they are needed.

Across the region, providers emphasized the importance of the FTA Section 5310 program which is used to purchase new or replacement vehicles. The Section 5310 program is an important resource for wheelchair accessible vehicles operated to serve older adults and individuals with disabilities.

### **Increase hours of service to include evenings and weekends**

Responses to the public survey listed Saturday and Sunday service high on the list of items that would improve transportation in the region. The lack of late-night service was raised in public meetings as an issue

for both hospital discharge, and for late shift workers. Where public transportation service is available, people can get to second shift work, but have to walk home at the end of the night, which is both physically challenging and a safety concern.

TRAM reported early-morning trip denials for some individuals who need to get to work for 5 a.m. shifts. It operates an early shuttle to get workers to Elwood before 7 a.m., but would be unable to serve other requests for transportation outside the published hours.

One public meeting attendee commented their clients were trained to use transit but found the routes inefficient and time consuming. The CATS routes operate on a 1-hour headway, which makes transfers and missed connections into difficult issues. An increase in route frequency could improve access.

### **Need to continue public education and information available on local services**

While there are public, private, and human service transportation options in the area, including service to and from Indianapolis, many people are not aware of what is available. The current effort to make sure transportation brochures are in doctor's offices and nursing homes should continue, and could expand. People who age-in-lace are accustomed to driving themselves and may not consider other transportation options until they need them due to medical and health changes, financial need, or other life changes. Continued education about public transportation options will help those individuals find options that support continued independence.

Finally, the County Commissioners and other elected officials and program managers go through predictable and periodic transitions, and each new class of decision-makers needs to be educated on the transportation services and value provided within the community. The providers report that they often play catch-up, having to remind elected bodies of past funding practices and apportionments, past policies, and other ongoing processes that aid effective transportation service. Regular and ongoing training and information sharing is needed.

### **Technology**

TRAM and CATS have dispatch software but is open to continuing education about efficiency improvements that can be made through technology to support growth in the transportation network.

Participants in public meetings identified the lack of onboard tablets for driver communication, cameras, and automated vehicle locator (AVL) technology as technological deficits that, if improved, could support future growth.

The issue/challenge for passengers to find information online about available transportation services was also raised. The public can enter their trip request on the TRAM website, and receive a call back to confirm that a trip has been scheduled. There is no online scheduling option for TRAM or CATS at this time. CATS operates flexible/deviated fixed routes. It will deviate off of a scheduled route to pick up a passenger who requests the deviation. CATS routes are available online (i.e., Google) in a downloadable PDF on the City of Anderson website. Trips cannot be planned interactively online because CATS is concerned that people will stand along the regular route and not know that the driver deviated, and the passenger will be missed. The

use of AVL technology and some online location-finding tool would aid the passengers in knowing when and where to expect the bus.

User support/training would be needed if providers change to electronic fare media and online scheduling.

Local human service agencies are at capacity to manage their programs, and need assistance to transition to digital record-keeping, maintenance, and monitoring. Incorporating technology or coordinating administrative and maintenance programs between multiple agencies could help to reduce the burden on human service agencies.

### **Infrastructure improvements**

Bus stops and sidewalk infrastructure conditions were noted as barriers to mobility. There are old, unused bus stops in the community, but CATS operates flag-routes, meaning that people do not wait at stops, but can flag the bus anywhere along its route. The old stops may or may not be along current routes and create confusion for passengers who are not familiar with the service. Some of the bus routes also operate along streets with no sidewalk, particularly along Scatterfield Road and SR 9, creating safety issues for people using the side of the road in a high-traffic area. The MCCOG and City of Anderson are working to address this issue, and the City has adopted an Americans with Disabilities Act (ADA) Transition Plan to bring its infrastructure into conformance with the ADA. Until there are sidewalks or paths to each route, individuals with disabilities using mobility devices will not be able to fully access available bus routes.

### **Driver recruiting tools, testing, and training**

In interviews, providers reported the difficulty of retaining, finding, and training drivers, and that the difficulties have been increased by the COVID pandemic. The shortage of drivers is a common issue across the state and nation at this time. Having fewer drivers available may dramatically reduce the capacity of some agencies to provide service, even when that service is scheduled in advance.

The issue of sending drivers to a single medical qualification testing site several hours away across the state was also mentioned in public meetings as a barrier to recruiting drivers.

### **School transportation coordination is needed for students/families that travel from outside the district**

School transportation was raised as an issue in the public meetings. The school districts are experiencing challenges with the transportation of homeless students. The school district must provide school transportation to the school the student attended prior to being homeless. If or when they are housed, the school is responsible for transportation the entire school year. Transportation outside of Anderson is very difficult, and the district has families throughout the county and as far away as Indianapolis. School transportation is outside the purview of FTA-funded transit programs, but could be improved with coordination.

### **Continuing needs**

Transportation needs from previous Coordinated Plans remain, as confirmed by participants in the public meeting. Examples include:

- ◆ Extended transit operating hours to serve shift work

- ◆ Transportation on weekends
- ◆ Transportation education, including increasing sense of safety
- ◆ Geographic areas where public transportation is not available or where multi-jurisdictional trips are not possible, cost prohibitive, or expensive
- ◆ Accommodations for persons with disabilities, including infrastructure improvements and ADA-accessible vehicles

## GOALS AND STRATEGIES FOR IMPLEMENTATION

### Overview

Stakeholders will continue to work toward coordinated regional transportation services by utilizing existing resources and implementing new projects that fill the service gaps and needs associated with medical trips, employment related trips, and general quality of life for older adults, individuals with disabilities, and the general public.

### PRIORITIZING IDENTIFIED NEEDS AND GAPS

A survey to prioritize (high, med, low) the identified needs was sent to all participants of the public meetings and to all Section 5310 and Section 5311 provider organizations in the area. The SurveyMonkey.com tool was used to aggregate responses and determine the priority rating and ranking of the needs as identified in Exhibit 47.

**Exhibit 47: Unmet Mobility Needs and Gaps in Service, Region 7, 2021**

2021 Needs and Gaps	Priority Ranking	Related Goal(s)
Increase options for long-distance travel from urban to rural destinations and between counties	Medium to High	Goal 2
Transportation options to support employment	High	Goal 2
Increase options for travel to destinations in Indianapolis	Low to Medium	Goals 2 and 4
Maintain and expand choices for transportation service that is wheelchair accessible, including taxis/uber/Lyft	Medium	Goals 1 and 2
Provide public transportation options on weekends	Medium	Goal 2
Increase hours of service to include evenings	Medium	Goal 2
Make transportation options more affordable for the rider (i.e., increase subsidies from other sources and reduce passenger fares)	Low	Goal 2
Public transportation in Adams and Grant Counties	Low	Goal 2
Need to continue public education and information available on local services	Medium	Goals 5 and 6
Improve or add sidewalks and run bus routes along roads with sidewalks when possible, to improve access from individuals with disabilities	Medium to High	Goal 5
Driver recruiting tools to increase or sustain transportation capacity	Medium	Goal 1
Transit technology to improve communication within the transit system (i.e., dispatch software and/or tablets on vehicles), cameras, automated vehicle locator technology, maintenance software, and/or recordkeeping software for agencies	Medium	Goal 3



## GOALS AND STRATEGIES

Local stakeholders set the following coordinated transportation goals to address the high, medium, and low priority needs. The goals should be addressed by the responsible parties, as identified in each goal description. Goals should be addressed in order of priority, unless funding or other factors are present which make accomplishing a lower priority goal more feasible. The strategies under each goal are prioritized in concert with the needs (high, medium, low) based on stakeholder input.

The following paragraphs outline the timeframe, responsible party, and performance measure(s) for implementation of each of the strategies. The implementation milestones are defined as:

- ◆ Immediate – Activities to be addressed immediately.
- ◆ Near-term – Activities to be achieved within 1 to 12 months.
- ◆ Mid-term – Activities to be achieved within 13 to 24 months.
- ◆ Long-term – Activities to be achieved within 2 to 4 years.
- ◆ Ongoing - Activities that either have been implemented prior to this report, or will be implemented at the earliest feasible time and will require ongoing activity.

Goals and implementation strategies are offered in this chapter as a guideline for leaders in the coordination effort as well as the specific parties responsible for implementation. Goals and strategies should be considered based upon the available resources for each county during the implementation time period.

Some transportation needs are more difficult to meet than others, particularly in a rural setting. The distances to travel are longer, the costs are higher as a result, and the geographic conditions may create more difficulties to drive in some types of weather. The workforce of drivers, maintenance, health care, and administrators needed to support a successful transportation program are harder to recruit in a rural area as well. Expenses related to risk management including training and insurance are essential but can be difficult to fund.

While certain needs may be identified as top priorities, some strategies to address them may take more time to implement. In some cases, other necessary steps and changes must precede implementation, or require a regional leader to coordinate the providers and lead them through the steps. Some strategies may be more easily addressed, even though they are a low priority, or may be a step that improves the likelihood of implementing a priority improvement. While there are challenges to implementing coordination among various transportation providers and funding sources, it is important to note that transportation coordination is being successfully implemented across Indiana and throughout the country. There are many resources available to assist local communities as they work together on coordination. Contact the Indiana Department of Transportation, Office of Transit, for assistance.

**GOAL 1: MAINTAIN EXISTING TRANSPORTATION SERVICES FOR HUMAN SERVICE AGENCY CLIENTS AND THE GENERAL PUBLIC**

**Strategy 1.1: Replace and Maintain Vehicles through FTA/INDOT funding and local sources**

Transportation is a vital to health care, nutrition, employment, and quality of life in each county and community. As there are relatively few providers active in the region, keeping their services active and running is critical for older adults and individuals with disabilities in the community. The FTA grant programs managed by INDOT provide the best leverage of local matching dollars in terms of acquiring and maintaining a fleet of accessible vehicles.

Local organizations serving the rural areas will strategically apply for funding through Sections 5310 and 5311 programs to replace aging vehicles and to expand vehicle fleets or the number of providers serving individuals with disabilities, older adults, people with low incomes, and the general public.

**Priority:** High

**Counties Included:** All Region 7 counties

**Responsible Parties:** Agencies and organizations eligible for FTA Section 5310 program grants.

Implementation Time Frame:

Ongoing

Staffing Implications:

Staff time to prepare applications, to maintain vehicles, and to monitor service, safety, and reporting.

Implementation Budget:

Minimal expenses to develop applications but significant time to manage and administer services.

Potential Grant Funding Sources: Local match funding from agency funds, Community general fund, dedicated tax, or private fundraising. Local match for FTA Section 5310 may also be derived from State programs or other non-U.S. DOT Federal funding programs.

**Performance Measures:**

- ◆ Tally of vehicles applied for and received in region.
- ◆ Percent of fleet in region that is accessible to individuals with disabilities.
- ◆ Average annual passenger trips provided per vehicle should demonstrate that vehicles are actively used in service delivery for older adults and individuals with disabilities.

**Strategy 1.2: Develop local tools for driver recruitment and retention**

A region-wide, common advertising campaign to recruit drivers has the potential to benefit several agencies at minimal cost to each. Typically, advertising for driver positions also raises the awareness of the agencies’ resources for consumers as well.

Providers should communicate to the INDOT how their recruitment efforts are impacted by statewide policies. The requirement that drivers go to a location outside of Indianapolis for their medical exam has been reported as a challenge for several agencies. Potentially, solutions could be found that would minimize the need for recruits to travel long distances to meet medical qualification requirements.

Local transit and human service agencies may create connections with local economic development and training programs to funnel good candidates into their driving programs. For larger vehicles, the transit agency or human service agency may partner with driving schools to create bus practicums that bring drivers through their programs as a part of CDL training.

**Priority:** Medium to High

**Counties Included:** All Region 7 counties.

**Responsible Parties:** Representatives from each public transit and human service organization. Representatives from local and regional economic development and workforce programs.

<u>Implementation Time Frame:</u> Near Term (1-12 months)	<u>Staffing Implications:</u> Staff time to prepare media, recruit, on-board, and train drivers.
<u>Implementation Budget:</u> Minimal expenses to develop recruiting media but significant time to develop new employment pathways.	
<u>Potential Grant Funding Sources:</u> Current operating budgets will support driver wages and benefits.	

**Performance Measures:**

- ◆ “Drivers wanted” media campaign produced and launched
- ◆ New, regular and ongoing engagement with development and job-training programs
- ◆ Create bus driver practicum for CDL training

**GOAL 2: EXPAND TRANSPORTATION SERVICE FOR OLDER ADULTS, INDIVIDUALS WITH DISABILITIES, PEOPLE WITH LOW INCOMES, AND THE GENERAL PUBLIC**

**Strategy 2.1: Expand transportation service for new hours, days, and new geographic areas of the region**

There is a need to increase the level of fixed route, demand response, and on-demand service so that public transportation becomes a viable alternative for commuters, including those who need to stop at a childcare facility and attend appointments in addition to their normal workday. This creates a challenging quality of life situation for people who do not have access to a vehicle or choose not to drive. Although they meet the basic needs of many who need access to medical appointments, shopping, or agency programs, transit services that only operate from early morning to late afternoon make evening/weekend work shifts and recreational activities out of reach for those who rely on transit. Evening and weekend service was mentioned by survey respondents as a desired improvement. Transportation providers are encouraged to consider expanding their hours and days of service to facilitate access to employment opportunities for older adults, individuals with disabilities, and people with low incomes.

Capacity needs to be expanded to allow drivers to cover long distances and cross county and city or town lines, as that takes a vehicle out of service for local rides. This may be accomplished by meeting neighboring services to transfer passengers at the service area boundaries; by one agency providing a rural-to-urban leg of the trip and another agency providing the urban-to-rural leg; by extending service boundaries, potentially with zoned fares; or by creating a volunteer or premium service that operates outside of typical hours and areas.

**Priority:** Medium to High

**Counties Included:** All Region 7 counties.

**Responsible Parties:** Representatives from each public transit agency. Representatives from local and regional human service agencies with clients that need multi-jurisdictional travel. Local employers may also be responsible partners in helping to identify employment-related transportation options and challenges.

Implementation Time Frame:

Near and Mid-Term (1-24 months)

Staffing Implications:

Staff would need to be increased to cover additional shifts or days. Part time or volunteer drivers may be able to provide long-distance trips for non-employment related services.

Implementation Budget:

The cost of service hour expansions would be based on the actual changes to be implemented. Scheduling transfers at service area boundaries does not require additional funding.

Potential Funding Sources: Medicaid and Area Agency on Aging contracts; local charitable or governmental funding; employer contributions.

**Performance Measures:**

- ◆ New hours and days of service provided.
- ◆ Frequency of fixed route service increased.
- ◆ Transfer points established.
- ◆ Services expanded across county lines.
- ◆ Ridership on expanded service.

**Strategy 2.2: Expand service for CATS outside of the current service area boundaries with a zone, demand response, or microtransit approach**

Expanding service to neighboring suburban communities could potentially be achieved through a combination of approaches including creating service zones outside city boundaries with fares based on distance; expanding a premium demand response service outside of the ADA paratransit boundaries; or contracting with a microtransit provider in particular high-demand areas such as along State Road 9 and Interstate 69. A cost-benefit analysis may be necessary to provide project justification. Initiatives from the trusted local operators may be the key to taking the first step.

**Priority:** Low to Medium

**Areas Included:** Madison County and City of Anderson

**Responsible Parties:** The City of Anderson, TRAM, MCCOG, and south-county communities.

**Implementation Time Frame:**

Long-Term (2 to 4 years)

**Staffing Implications:**

Additional drivers or contracts with a service provider may be necessary to cover service area expansions, depending on the approach.

**Implementation Budget:**

To be determined based on chosen alternative(s).

**Potential Funding Sources:** Section 5307 for public transportation providers (up to 50% local match required). Local match should be sustainable for multiple years. Local match may be derived from local government or tax funds, employer or other local contributions, and eligible non-U.S. DOT Federal grant funds.

**Performance Measures:**

- ◆ Feasibility study or cost-benefit analysis for new service completed.
- ◆ Funding secured through sustainable grants and contributions.
- ◆ General public service initiated beyond the City of Anderson boundaries.
- ◆ Ridership on the new service.

**Strategy 2.3: Provide cross-county and multi-county service options and develop a protocol for shared-ride long distance trips between the local providers.**

The providers should meet to formalize transfer points and develop other strategies to coordinate passenger travel throughout the region. The providers may also formalize funding arrangements between services, where one leg of a shared trip is provided by one agency and the return leg is provided by the second agency. This would be a step forward in the effort to meet the demand for employment and out-of-county medical trips.

**Priority Level:** Medium

**Areas Included:** All Region 7 counties and neighboring metropolitan planning areas.

**Responsible Parties:** Public transportation providers in the Region including but not limited to TRAM, HART, and CIRTA.

Implementation Time Frame:

Mid-Term (13-24 months)

Staffing Implications:

N/A

Implementation Budget: To be determined based on chosen alternative(s).

Potential Grant Funding Sources: Contracts between partnering agencies if sharing services across jurisdictional boundaries. Additional funding for transfer points may not be needed if an existing facility (i.e., store, church, etc.) will allow shared use of its location. Permission from the existing facility owner must be requested and secured in advance. Always consider passenger safety when planning a transfer location. Distance-based fares should be considered.

**Performance Measures:**

- ◆ Transfer points established.
- ◆ Services expanded across county lines.
- ◆ Memorandum of Understanding or cost sharing agreements developed.
- ◆ Ridership on expanded service.

**Strategy 2.4: Add volunteer and/or voucher programs to enhance and fill gaps for existing local service**

For people living in rural and exurban areas, and for those going to medical specialists, trips can be longer than 10 miles each way. These long trips can be difficult for agencies to fit onto their schedules, and may be difficult for individuals with disabilities or older adults who are unable to spend a long amount of time riding. Likewise, many transportation agencies are not able to meet travel needs for individuals outside of regular business hours and the operating cost of providing long distance trips is high. Evening and weekend trips, and longer trips from rural areas could be provided by trained volunteers. However, many Indiana agencies have discovered that liability and insurance can be a road-block for volunteer programs.

Volunteer programs may reimburse mileage for individuals who drive their own vehicles to take riders to appointments. Some programs will provide agency-owned vehicles, ask volunteers to work only when there is demand, or schedule specific trips with the volunteer. Other programs ask the volunteer to select and schedule their trips from a centralized list of trip needs. The existing local agencies could organize a volunteer program at the regional level, establishing policies and geographic service areas, and determining each agency's role in the program. The agencies could share volunteer recruitment responsibilities, insurance and liability risk, and volunteer screening and training. For additional information on insurance for volunteers, the AARP has provided a report: <https://www.aarp.org/ppi/info-2020/volunteer-driver-insurance-in-the-age-of-ridehailing.html>.

Providers in the region should consider incorporating the United Way's Volunteer Match program for recruitment, inviting existing local programs if they wish to join. Volunteer trip scheduling may also be coordinated with 2-1-1 or regional call center services.

Voucher programs provide reimbursement of a portion of trip costs for riders to repay friends, neighbors, and family members who provide a needed trip. The voucher payments are typically capped each month to prevent fraud. The ability to pay for a needed service gives the rider, whether an older adult, individual with disability, or person with low income, the dignity and independence to schedule their own travel and not feel 'a burden' on friends or family. Some voucher programs are also used with taxi companies or private providers to defray the full cost of a trip. The My Freedom Voucher Program organized and operated by CICOA Aging and In-Home Solutions ([www.cicoa.org](http://www.cicoa.org)) is an Indiana example.

A feasibility study could examine the use of volunteer transportation as a means of providing transportation where transit ridership would be too low to sustain frequent service.

**Priority:** Medium to Low

**Counties Included:** All Region 7 counties and neighboring Metropolitan Planning Areas.

**Responsible Parties:** Representatives from public transit and human service agencies within the region, and CIRTA in Indianapolis. Representatives from United Way, or similar agency that currently manages volunteers for other programs in the area.



Implementation Time Frame:

3 – 18 months

Staffing Implications:

Staff time to manage volunteer program, recruit and train drivers

Implementation Budget:

Costs would be low to coordinate existing volunteers; medium cost to combine scheduling and purchase coordinating software; medium cost for feasibility study

Potential Grant Funding Sources: Area Agency on Aging, United Way, RSVP, Private Faith-based and Foundation fund-raising

**Performance Measures:**

- ◆ Number of trips provided by volunteers
- ◆ Stability and growth of trained volunteer driver pool
- ◆ Volunteer hours of service (could potentially be used as in-kind match)

**Strategy 2.5: Evaluate the feasibility of providing general public transportation services in Adams County and Grant County**

Expanding service to these communities could potentially be achieved through a combination of efforts by Adams County Council on Aging, Lifestream Services, Inc., Carey Services, and Bi-County Services, Inc. A cost-benefit analysis may be necessary to provide project justification. Human service agencies and county officials Grant and Adams Counties should meet with the existing rural transportation providers and INDOT to discuss the provision of general public service in their respective counties.

In order for coordination opportunities that include transportation in Adams and Grant Counties to be discussed and realized, there must be a leader to champion such an effort. The strongest leader is most likely one of the existing human service agency or public transportation operators in the rural area. Guidance from committees and experienced transit systems is beneficial. Guidance and support from INDOT are also important.

**Priority Level:** Adams County received an average priority rating of “low” (6 out of 8 votes scored it as a low priority). Grant County service received split priority scores. Half of the voters scored it as a “low” priority and half scored it “high.”

**Counties Included:** Adams and Grant Counties

**Responsible Parties:** INDOT, Grant and Adams County governments, Adams County Council on Aging, Lifestream Services, Inc., Carey Services, and Bi-County Services, Inc.

<u>Implementation Time Frame:</u> Long-Term (2 to 4 years)	<u>Staffing Implications:</u> N/A
<u>Implementation Budget:</u> To be determined based on chosen alternative(s).	
<u>Potential Grant Funding Sources:</u> Section 5311 for public transportation providers (up to 50% local match required for operating budget). Local match should be sustainable for multiple years.	

**Performance Measures:**

- ◆ Feasibility study for new service completed (including a cost-benefit analysis).
- ◆ Funding secured through sustainable grants and contributions.
- ◆ General public service initiated in Adams and Grant Counties.
- ◆ Ridership on the new service meets goals established in the feasibility study.

**GOAL 3: ADOPT NEW TECHNOLOGIES TO ENHANCE CUSTOMER SERVICE AND INCREASE EFFICIENCY**

**Strategy 3.1 Add technological capacity for improving scheduling and dispatch, tracking vehicles, and responding to unforeseen changes in service needs**

Recent improvements in transit technology have resulted in providers finding new levels of efficiency in terms of communicating with passengers, scheduling trips, billing, and managing safe transportation programs.

Automatic vehicle locators, tablets for dispatch communications, automatic passenger counters, cameras, and other tools are becoming more common in rural systems. Even in human service transportation programs, the ability to improve scheduling, dispatching, and vehicle tracking can strengthen operations effectiveness. The ability of scheduling and dispatch software generate reports is also beneficial for many human service providers that are required to file reports with multiple funders.

**Priority:** Medium

**Counties Included:** All Region 7 counties

**Responsible parties:** Representatives from Section 5311, Section 5307, and potential Section 5310 recipient organizations.

Implementation Time Frame:

3 – 12 months

Staffing Implications:

Staff time to evaluate technology alternatives and participate in training

Implementation Budget:

Cost of items purchased

Potential Grant Funding Sources: Section 5307, 5311, or 5339 for public transportation providers. Local match may be derived from nonprofit or state/local government sources. For human service transportation, a joint purchasing program may reduce costs over several agencies.

**Performance Measures:**

- ◆ Software licenses purchased and tablets or other equipment installed.
- ◆ Service efficiency increases that are demonstrated following the installation and implementation.

**Strategy 3.2 Add customer-facing technology for scheduling trips**

Customer-facing web- or app-based scheduling for trips can provide their riders with greater independence and flexibility. In examining options for scheduling and dispatch technology, consideration should be made for the customer experience and the ability for a customer to schedule their own trip. All applications must be designed for accessibility from individuals with disabilities. A variety of web tools and mobile apps are available that meet the needs of agencies at different scales. In several years' time, the use of broadband and broadcasting technology will make online scheduling ubiquitous even in rural areas.

**Priority:** Medium

**Counties Included:** All Region 7 counties.

**Responsible parties:** Representatives from Section 5307, Section 5311 and potential Section 5310 recipient organizations.

Implementation Time Frame:

6 – 24 months

Staffing Implications:

Staff time to evaluate software options and mobile apps, undergo training, and develop a media and rider roll out.

Implementation Budget:

Cost of software license or app licenses purchased

Potential Grant Funding Sources: Local funds or a part of the agency marketing budget would be appropriate

**Performance measures:**

- ◆ Number of trips scheduled online compared with overall trips.
- ◆ Survey results that indicate strong customer satisfaction with new technology.

## **GOAL 4: COOPERATE AT A REGIONAL LEVEL TO PROMOTE SEAMLESS INTER-COUNTY TRANSPORTATION SERVICE**

### **Strategy 4.1: Increase coordination through a Coordinating Council or regional Transportation Advisory Committee (TAC) and publicize the value of local public transportation**

The TAC or Coordinated Council will facilitate and lead the region through the implementable steps identified in this plan to address the transportation service gaps and unmet needs for all counties. The Council will provide leadership through clarifying policy requirements and restrictions; seeking opportunities to share trips; identifying opportunities to purchase service from transportation operators; joint procurement and administrative activities that will result in more efficient use of operating funds; and expansion of the coordinated effort to include additional stakeholders.

One of the initial tasks for the committee will be to identify new operating dollars, or re-direct existing operating dollars to expand service options including expanding the driver workforce. A partnership with the United Way, regional health care provider, or other community foundation may provide funding for cross-county-trips or reduced fare options. The Council can accomplish goals through networking and sharing information to generate in for participating counties. The Council should meet at least quarterly.

To promote progress in the coordinated transportation effort, local stakeholders will continue with the following successful efforts, at minimum:

- ◆ Distribute the new adopted Coordinated Plan to their agency stakeholders and all elected officials within their jurisdictions
- ◆ Expand public speaking engagements to improve awareness of existing services and the gaps and unmet needs that exist in each county
- ◆ All transportation providers will submit informational articles on public and/or coordinated transportation successes and needs to various local agency/residential center newsletters
- ◆ Transportation providers will encourage riders and rider families to write positive letters to the editor regarding their transportation experiences and identifying additional transportation needs

**Priority:** Medium

**Counties Included:** All Region 7 counties

**Responsible Parties:** The TAC or a Coordination Council made up of transit and human service transportation providers, public taxi and EMT, and health and employment representatives, and other local or regional providers.

Implementation Time Frame:

Immediate and Ongoing

Staffing Implications:

Staff time to provide meaningful participation in meetings.

Implementation Budget:

Minimal expenses to develop meeting agenda but significant time to provide a leadership role in advancing coordination of resources and/or services.

Potential Grant Funding Sources: Not required.

**Performance Measures:**

- ◆ The TAC or Coordinating Council includes representation from transportation providers and representatives from the general public from each community and stakeholder group.
- ◆ The TAC or Coordinating Council implements at least one new coordination activity per year. Activities could range from shared information, grant writing, to trip sharing and coordinated transfers.

## GOAL 5: INCREASE PARTICIPATION IN STATEWIDE INITIATIVES TO ENHANCE MOBILITY

### **Strategy 5.1 Participate actively in the Indiana Council on Specialized Transportation (INCOST) and other statewide organizations**

INCOST is the most active statewide association for rural and specialized transportation providers. Participation is not limited to public transit systems; human service agencies may also participate. INCOST meets on a regular basis to discuss statewide policy issues and network to find solution to common problems. The organization holds an annual conference.

There are many other interest groups and advocacy organizations that discuss transportation issues and advocate for improvements. The Governor’s Council for People with Disabilities, for example, conducted a statewide study revealing that transportation is one of the top needs for their constituents, prompting new policy and program discussion. The National Federation for the Blind has similar state and local chapters. The American Planning Association organizes professionals that care deeply about filling infrastructure gaps. Health by Design advocates for increased transportation funding and built environment changes that increase accessibility and quality of life. Participation in these and other statewide networks which may lead to opportunities for new grants, pilot projects and funding partnerships.

**Priority:** Medium

**Counties Included:** All Region 7 counties

**Responsible Parties:** Public and human service transportation providers

**Implementation Time Frame:**

Immediate and Ongoing

**Staffing Implications:**

Staff time to provide meaningful participation in meetings.

**Implementation Budget:**

Minimal expense for staff time to participate in meetings and contribute leadership to initiatives.

**Potential Grant Funding Sources:** Not required.

### **Performance Measures**

- ◆ Number of representatives from Region 7 transportation providers that attend meetings of INCOST and other statewide organizations
- ◆ Number of contacts with state-level policymakers about transportation needs and funding concerns brought back to the TAC or Region 7 Coordinating Council and used to inform and educate people about unmet transportation needs and challenges for older adults and individuals with disabilities

### **Strategy 5.2 Educate local elected officials about transportation**

It is critical that transportation providers and stakeholders educate County Commissioners and other local elected officials about the value of public transit and human service transportation. The disconnect between transit and other transportation programs (sidewalks, roads and bridges) can be resolved by bringing transit conversations and trainings to the notice of elected officials. Using venues where the engineering and elected officials are already gathering will make these conversations more impactful. Purdue Road School is an annual event that provides a forum for educating officials about transportation.

**Priority:** Medium

**Counties Included:** All Region 7 counties and neighboring Metropolitan Planning Areas

**Responsible Parties:** Representatives from each Section 5311 and Section 5310 recipient organization.

Implementation Time Frame:

Immediate and Ongoing

Staffing Implications:

Staff time to provide meaningful participation in meetings.

Implementation Budget:

Minimal expenses to develop meeting agenda but significant time to provide a leadership role in advancing coordination of resources and/or services.

Potential Grant Funding Sources: Not required.

**Performance Measures:**

- ◆ Staff attendance at RTAP, INCOST, and Purdue Road School meetings and trainings.
- ◆ Develop regular reporting channel to FSSA and INDOT regarding observed brokered service strengths and weaknesses.
- ◆ Tracking networking and outreach activities to a variety of service and professional organizations.
- ◆ Develop partnerships and networks to bring transit issues to other transportation conversations and other professional arenas.



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

As noted previously, problems with the statewide Medicaid non-emergency medical transportation (NEMT) brokerage have included missed trips, customers who are told by the brokerage they have a trip but no provider shows up, and difficulties receiving payment for provided trips. The brokerage contract is held by the Indiana Family and Social Services Administration (FSSA). While contract oversight is carried out by FSSA, the Indiana Nonemergency Medical Transportation Commission provides a state-level forum for discussing problems within NEMT service delivery. These entities need to be made aware of ongoing difficulties experienced by customers and providers. With better awareness of the existing challenges, FSSA, the NEMT Commission, or state legislators can make policy improvements and changes based on local feedback.

Address information for the FSSA/NEMT Commission:

Office of Medicaid Policy and Planning  
MS 07, 402 W. Washington St., Room W382  
Indianapolis, IN 46204-2739

Address information for NEMT brokerage as of December 2021:

Southeastrans, Inc.  
4751 Best Road, Suite 300  
Atlanta, GA 30337

Complaint form available at <https://www.southeastrans.com/facilities-file-a-complaint-form>.

**Priority:** Medium

**Counties Included:** All Region 7 counties

**Responsible Parties:** Providers of NEMT

<u>Implementation Time Frame:</u> Immediate and Ongoing	<u>Staffing Implications:</u> Staff time to document problems.
<u>Implementation Budget:</u> None	
<u>Potential Grant Funding Sources:</u> Not required	

**Performance Measures**

- ◆ Number of NEMT brokerage complaints and incidents documented by transportation providers.
- ◆ Number of communications relayed to the NEMT brokerage, FSSA, NEMT Commission members, or state legislators.

**GOAL 6: INCREASE PUBLIC AWARENESS OF AVAILABLE TRANSPORTATION SERVICES AMONG COMMUNITY STAKEHOLDERS**

**Strategy 6.1 Create a “who-to-call” directory with mapped service areas for public use**

Using a “no wrong door” approach, the transportation providers’ call-takers and schedulers would be able to use the directory to provide information to riders, connecting them with resources beyond transit when appropriate or needed. The directory and mapped service area may also be shared on each agencies’ websites, social media, and on local government sites to create common knowledge about available services. The inventory section of this report could form the backbone of the directory.

**Priority:** Medium

**Counties Included:** All Region 7 counties

**Responsible Parties:** Representatives from each Human Service Agency and public transit operator across the region.

Implementation Time Frame:

Immediate and Ongoing

Staffing Implications:

Staff time to develop who-to-call list and map out service areas.

Implementation Budget:

Minimal expenses to develop list and map.

Potential Grant Funding Sources: Local or regional planning agencies would be able to help make maps as part of their community budget.

**Performance Measures:**

- ◆ Directory developed, shared with local agencies, and posted online.
- ◆ No-wrong-door information procedure developed between networked local agencies to ensure wrap-around services for transit riders when appropriate.
- ◆ Maps of transit and human service transportation service areas created, potentially by local planning departments.

**Strategy 6.2 Develop an online portal that includes resources and input from Area Agencies on Aging and Independent Living Centers**

The ‘who to call’ directory and mapped service areas may be transformed into an online portal, with the input of transit using service agencies and health care workers. The creation and dissemination of the portal can be useful for case-workers of all types, discharge nurses, and other social service professionals. It may also be useful if searchable by the general public, for children and grandchildren searching for transportation options for their elders, and for others seeking to maintain their independence.

**Priority:** Low to Medium

**Counties Included:** All Region 7 counties

**Responsible Parties:** Representatives from Human Service Agencies, Independent Living Centers, Area Agencies on Aging, public transit providers, and the United Way.

Implementation Time Frame:

3-6 months and Ongoing

Staffing Implications:

Staff time to develop and manage an online portal.

Implementation Budget:

Expenses for developing a new website may be high, but adding a searchable page to an existing host agency site would be moderate.

Potential Grant Funding Sources: Not required.

**Performance Measures:**

- ◆ Host site identified and staff time accounted for.
- ◆ Development and deployment of online portal.
- ◆ Quarterly or more frequent postings on the online portal and social media by agencies.
- ◆ Website analytics tracked for regular and growing portal visits, conversion to linked agency sites.

# Applications

## POTENTIAL GRANT APPLICATIONS

The following table outlines the strategies and objectives designated to achieve the locally identified transportation goals that are intended to meet local unmet transportation needs, reduce duplication, and improve coordination of human service agency and transportation provider resources. The table includes all strategies and designates those strategies that are currently eligible for implementation with the assistance of a grant from the Enhanced Mobility of Seniors and Individuals with Disabilities Program (Section 5310), the Formula Grants for Urban Areas Program (Section 5307), and the Formula Grants for Rural Areas Program (Section 5311) for rural public transportation providers. Page numbers are provided in Exhibit 48 for quick reference to detailed information for each objective.

All Section 5310 grant funds will be available through a competitive process. Please also note that each grant application for Section 5310 and Section 5311 will be considered individually to determine if the proposed activities to be supported by the grant adequately meet the requirements of the intended funding program. Grant applications for strategies that do not meet the intended requirements of the FAST Act or Infrastructure Investment and Jobs Act (IIJA) will not be awarded, regardless of the designated eligibility in this report.

The implementation timeframe for each strategy ranges from the date of this report through 2024. It is noted that a coordinated transportation working group (such as a regional coordination committee) should update this plan on an annual basis and as new coordinated transportation strategies and objectives are developed.

### Exhibit 48: Implementation Key

<b>Goal 1: Maintain Existing Transportation Services for Human Service Agency Clients and the General Public</b>			
<b>Page Number</b>	<b>Strategy Number</b>	<b>Objective/Strategy Description</b>	<b>Priority</b>
69	1.1	Replace and Maintain Vehicles through FTA/INDOT funding and local sources	High
70	1.2	Develop local tools for driver recruitment and retention	Low to Medium
<b>Goal 2: Expand Transportation Service for Older Adults, Individuals with Disabilities, People with Low Incomes, and the General Public</b>			
<b>Page Number</b>	<b>Strategy Number</b>	<b>Objective/Strategy Description</b>	<b>Priority</b>
71	2.1	Expand transportation service for new hours, days, and new geographic areas of the region	Medium to High
<b>73</b>	2.2	Expand service for CATS outside of the City boundaries with a zone, demand response, or microtransit approach	Low to Medium

<b>Goal 2: Expand Transportation Service for Older Adults, Individuals with Disabilities, People with Low Incomes, and the General Public</b>			
74	2.3	Provide cross-county service beyond Madison County and develop a protocol for shared-ride long distance trips between the local providers	Medium
75	2.4	Add volunteer and/or Voucher programs to enhance and fill gaps for existing local service	Low to Medium
77	2.5	Evaluate the feasibility of providing general public transportation in Adams and Grant Counties.	Adams – Low Grant – Medium to Low
<b>Goal 3: Adopt New Technologies to Enhance Customer Service and Increase Efficiency</b>			
<b>Page Number</b>	<b>Strategy Number</b>	<b>Objective/Strategy Description</b>	<b>Priority</b>
78	3.1	Add technological capacity for improving scheduling and dispatch, tracking vehicles, and responding to unforeseen changes in service needs	Medium
79	3.2	Add customer-facing technology for scheduling trips	Medium
<b>Goal 4: Cooperate at a Regional Level to Promote Seamless Inter-County Transportation Service</b>			
<b>Page Number</b>	<b>Strategy Number</b>	<b>Objective/Strategy Description</b>	<b>Priority</b>
80	4.1	Increase coordination through a Coordination Council or the TAC and publicize the value of local public transportation	Medium
<b>Goal 5: Increase Participation in Statewide Initiatives to Enhance Mobility</b>			
<b>Page Number</b>	<b>Strategy Number</b>	<b>Objective/Strategy Description</b>	<b>Priority</b>
82	5.1	Participate actively in the Indiana Council on Specialized Transportation (INCOST) and other statewide organizations	Medium
83	5.2	Educate local elected officials about transportation at venues	Medium
84	5.3	Track and communicate concerns about brokered service delivery to FSSA and INDOT	Medium
<b>Goal 6: Increase Public Awareness of Available Transportation Services Among Community Stakeholders</b>			
<b>Page Number</b>	<b>Strategy Number</b>	<b>Objective/Strategy Description</b>	<b>Priority</b>
85	6.1	Create a “who-to-call” directory with mapped service areas for public use	Medium
86	6.2	Develop an online portal that includes resources and input from Area Agencies on Aging and Independent Living Centers	Low to Medium

Coordinated Public Transit - Human Services  
Transportation Plan

Region 7: Adams, Blackford, Delaware, Grant, Henry, Jay,  
Madison, Randolph and Wells Counties

Appendix – Outreach Documentation



Prepared for Indiana  
Department of Transportation  
and Madison County Council of  
Governments

December, 2021

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## **COORDINATED PLAN CHECKLIST**

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

#### *Stakeholder and General Public Meetings*

Date: Meeting: (1) March 23, 2021

(2) April 1, 2021

(3) July 2021

Location: Virtual Meetings

#### *Invitations Distributed*

Mail: Meeting 1: Date Sent: March 1, 2021

Email: Meeting 2: Date Sent: March 26, 2021

Email: Meeting 3: Date Sent: June 2021

Newspaper Notice (list of papers):

Decatur Daily Democrat; Berne Witness; Chronicle Tribune; The Courier Times; The CR; Herald Bulletin;  
PTLP News; Madison Courier; News Banner

Information was provided in alternative formats, upon request

Events were open to all individuals, including hearing impaired and limited English proficient

Interpreters available, upon request

Invitation letter and mailing list attached

Public Meeting Presentation included

### **Surveys**

Date(s) Surveys Were Distributed/Available On-Line: November 2020 through May 2021

Web Posting: Survey Monkey

E-mail upon request

Newspaper notice (list papers): (same as above)

Information was provided in alternative formats, upon request

Total number of electronic and paper surveys completed: 14

### **Other Outreach Efforts**

Meetings were available on GoToMeeting for those who could not attend in person

Statewide Webinar facilitated to discuss coordinated transportation

Presentation about coordinated transportation and the upcoming plans was provided through IN RTAP website

Other (i.e., Telephone interviews with key stakeholders)

## Coordinated Public Transit-Human Service Transportation Plan Meetings

Please join RLS & Associates and the INDOT Office of Transit for a virtual meeting on the Coordinated Public Transit-Human Service Transportation Plan for your INDOT rural coordination region. The Federal Transit Administration (FTA) requires that projects selected for funding under the Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program be included in a coordinated plan. Please attend and provide your input and insights to discuss unmet transportation needs, gaps in transportation services, and recommended strategies to improve mobility options in and around the area. **Meetings will be held March 17-31, 2021.**





### **Who Should Attend?**

Stakeholders (transportation providers, social service agencies, older adults, individuals with disabilities, people with low income, etc.) and the general public.

To find the date, time, and log-in/dial-in information for your region's meeting, please visit

[tinyurl.com/783czmmm](https://tinyurl.com/783czmmm)

For more information, contact RLS & Associates at 937-299-5007 or email [ccampoll@rlsandassoc.com](mailto:ccampoll@rlsandassoc.com)



Christy Campoll <ccampoll@rlsandassoc.com>

## Rural Regional Coordinated Transportation Plan Meetings

Christy Campoll <ccampoll@rlsandassoc.com>

Thu, Mar 4, 2021 at 3:13 PM

Cc: Kjirsten Frank Hoppe <kfrankhoppe@rlsandassoc.com>, Laura Brown <lbrown@rlsandassoc.com>, Vicky Warner <vwarner@rlsandassoc.com>, Megan Gatterdam <mgatterdam@rlsandassoc.com>, "Jennings, Todd" <TJennings@indot.in.gov>, "Jones, Brian (INDOT)" <BJONES@indot.in.gov>

Bcc: Becky Guthrie <bguthrie@frs.org>, Bryan Sergesketter <streetcomm@washingtonin.us>, Debbie Neukam <dneukam@washingtonin.us>, crmartindale@comcast.net, Kathy Fowler <kfowler@washingtonin.us>, greenfield.safsinc@sbcglobal.net, Jacque Lueken <jlueken@huntingburg-in.gov>, Stan Keepes <Stan.Keepes@arcswin.org>, Julia Rahman <juliarahman6@gmail.com>, Joel Sievers <jsievers@vincennesymca.org>, Janelle Lemon <jllemon@gshvin.org>, Jesse Watkins <pccacan@gmail.com>, cimes@pcrsinc.org, MONICA EVANS <monica.edpcca@yahoo.com>, sccoa@att.net, Patricia Glenn <pat.glenn@sirs.org>, Roland Lemus <brtrdir@brsinc.org>, Jenny Bowen <brpdc@brsinc.org>, Catherine Strother <astroth@firstchancecenter.com>, Greg Mahuron <greg@oasc.us>, Rebecca Kemple <rkemple@firstchancecenter.com>, Kim Robinson <kimrobinson@browncountyyymca.org>, Seymour Transit Dept <seytransit@seymourin.org>, Eric Frey <ericfrey@aracities.org>, Dennis Parsley <dparsley@bedford.in.us>, Lisa Salyers <lsalyers@area10agency.org>, Angie Purdie <apurdie@co.monroe.in.us>, Chris Myers <cmyers@area10agency.org>, btabeling@seymourin.org, twayt@seymourin.org, Kelly Bauer <kbauer@yourjccs.org>, Holly Porter <dir@nccs-inc.org>, Jacki Frain <pchsfrain@embarqmail.com>, Charmaine Dunkel <cdunkel@starkecs.com>, Lynette Carpenter <lcarpent@urhere.net>, dbrown@areaivagency.org, Elva James <ejames@areaivagency.org>, Dawn Layton <dlayton@clintoncountytransit.org>, Gale Spry <gspry@wcco.comcastbiz.net>, juanita@wcco.comcastbiz.net, mary.nichols@asipages.com, kclark@crawfordsville-in.gov, Roxanne Roman <rroman@cdcresources.org>, tnickle@capwi.org, ccsfs@frontier.com, kdecamp@lifestreaminc.org, bwashler@lifestreaminc.org, Dave Benefiel <dave@heartlandmpo.org>, newcastletransit@yahoo.com, betsy@wellsonwheels.com, bonnie@councilonaginginc.com, Tim Ramsey <tramsey@adifferentlight.com>, jedwards@cityofmarion.in.gov, Pam Leming <pleming@cityofmarion.in.gov>, gmaynard@careyservices.com, traci.gross@jrds.org, "Horton, Debbie" <dhorton@lifetime-resources.org>, mguidice@lifetime-resources.org, "Thomas, Erin" <ethomas@lifetime-resources.org>, rgoodwin@nhvinc.org, aankney@mcymca.org, smcbride@mcymca.org, Beverly Ferry <beverlyf@livingwellinwabashcounty.org>, vickik@livingwellinwabashcounty.org, tiffanym@livingwellinwabashcounty.org, jpatton@arcwabash.org, bcalhoun@casstransit.com, Cathy <cleigh@casstransit.com>, hsmith@peakcommunity.com, fcco@rtcol.com, transpo1@rtcol.com, Cara Kellerman <director@encorecenter.org>, becky@wcco.biz, Bernie King <bernie@wcco.biz>, Cheri Perkins <cperkins@lagrangecoa.org>, kstoltzfus@arcopportunities.org, director.ncco@outlook.com, slwilson@nec.org, rgreen@nec.org, kcraig@thearcfoundations.com, dkreais@steubenco.org, mzenk@dccoa.net, dblankenship@dccoa.net, Holly Saunders <hsaunders@huntingtoncountycoa.org>, lcarr@pathfinderservices.org, Cathy Franklin Co Pelsor <fcpt@frontier.com>, Dave Lingg <fayetteseniorcenter@comcast.net>, grants@connersvillein.gov, transit@fayetteseniorcenter.com, Terri Quinter <tquinter@richmondindiana.gov>, johanna@adcofrichmond.com, rushseniorcenter1@gmail.com, Union County <withamtrisha\_ucaa@yahoo.com>

Dear Transportation Providers,

Please circulate this announcement in your communities! The INDOT Office of Transit is updating the coordinated human services transportation plans for the state's rural coordination planning regions. Over March 17th through 31st, a series of virtual public meetings will be held to inform interested individuals about the possibilities of coordinated public and human service agency transportation and, more importantly, to listen to anyone who rides, would like to ride, and/or operates public, private or human service agency transportation. The meetings will focus on the open discussion about gaps in available transportation service and strategies for increasing mobility. Public, private and non-profit transportation providers, human service agencies, and any individual who needs transportation should attend.

The meeting schedule is attached and is also available at <http://tinyurl.com/783czmmm>. The schedule includes links to participate in the virtual meetings, as well as dial-in numbers to participate by phone. There is information in the flyer about requesting language translation, closed captioning, or other meeting services for people with disabilities.

We would like to get the word out to as many people as we can, so please forward this to your TAC committees, board members, local elected officials, senior centers, agencies serving people with disabilities, CAP agencies, Head Start, community foundations, and any others you can think of!

Please let me know if you have any questions or concerns.

Thank you,  
Christy Campoll

***Christy Campoll | Senior Associate***

3131 S. Dixie Hwy. Suite 545, Dayton, OH 45439

Office: 937.299.5007 | Direct: 317.439.1475 | [www.rlsandassoc.com](http://www.rlsandassoc.com)

**RLS & Associates, Inc...Celebrating 33 Years of Service to the Transit Industry**



**Coordination Meeting Flyer.pdf**

132K



# Public Transit-Human Services Transportation Plan Update

**Why:** To update the Coordinated Public Transit-Human Service Transportation Plan for your INDOT rural coordinated planning region. The Federal Transit Administration (FTA) requires that projects selected for funding under the Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities program be included in a coordinated plan. Please participate and provide your input and insights to discuss unmet transportation needs, gaps in transportation services, and recommended strategies to improve mobility options in and around the area.

**Who:** Stakeholders (transportation providers, social service agencies, older adults, individuals with a disability, people with low income, etc.) and the general public.

Region	Date	Time	Link	Dial-In Number
Region 1 (Davies, Dubois, Gibson, Greene, Knox, Martin, Perry, Pike, Posey, Spencer, Sullivan, Warrick)	March 19, 2021	12-1:30PM EDT	<a href="#">Click Here</a>	1-646-558-8656 ID: 96830626318; Pass: 429323
Region 2 (Crawford, Harrison, Orange, Scott, Washington)	March 17, 2021	11AM-12:30PM EDT	<a href="#">Click Here</a>	1-646-558-8656 ID: 97382822074; Pass: 634410
Region 3 (Brown, Jackson, Lawrence, Monroe, Owen)	March 18, 2021	12-1:30PM EDT	<a href="#">Click Here</a>	1-872-240-3412 Access: 210-438-509
Region 4 (Jasper, Newton, Pulaski, Starke)	March 30, 2021	12-1:30PM EDT	<a href="#">Click Here</a>	1-646-558-8656 ID: 99496904659; Pass: 023077
Region 5 (Benton, Carroll, Clinton, Fountain, Montgomery, Warren, White)	March 31, 2021	12-1:30PM EDT	<a href="#">Click Here</a>	1-646-558-8656 ID: 91364207144; Pass: 248613
Region 6 (Clay, Parke, Putnam, Vermillion)	March 24, 2021	4:30-6PM EDT	<a href="#">Click Here</a>	1-646-558-8656 ID: 92814488640; Pass: 262526
Region 7 (Adams, Blackford, Delaware, Grant, Henry, Jay, Madison, Randolph, Wells)	March 23, 2021	12-1:30PM EDT	<a href="#">Click Here</a>	1-646-558-8656 ID: 97640193471; Pass: 810787
Region 8 (Dearborn, Decatur, Jefferson, Jennings, Ohio, Ripley, Switzerland)	March 24, 2021	12-1:30PM EDT	<a href="#">Click Here</a>	1-646-558-8656 ID: 91434469707; Pass: 382493
Region 9 (Cass, Fulton, Howard, Miami, Tipton, Wabash)	March 25, 2021	12-1:30PM EDT	<a href="#">Click Here</a>	1-646-558-8656 ID: 97515530161; Pass: 625782
Region 10 (DeKalb, Huntington, LaGrange, Noble, Steuben, Whitley)	March 29, 2021	12-1:30PM EDT	<a href="#">Click Here</a>	1-646-558-8656 ID: 98456315651; Pass: 925517
Region 11 (Fayette, Franklin, Rush, Union, Wayne)	March 25, 2021	4:30-6PM EDT	<a href="#">Click Here</a>	1-646-558-8656 ID: 96970251584; Pass: 792145

Please call Kjirsten Frank Hoppe at 937-299-5007 or email [kfrankhoppe@rlsandassoc.com](mailto:kfrankhoppe@rlsandassoc.com) to RSVP or if have any questions. If language translation or closed captioning services are needed, please call Kjirsten at 937-299-5007 one week in advance of the meeting if possible. Thank you in advance for your consideration and willingness to participate in this planning effort!

**Please complete our public input survey!** [https://www.surveymonkey.com/r/Indiana\\_Transportation](https://www.surveymonkey.com/r/Indiana_Transportation)

## **For Immediate Release**

**Date:** March 8, 2021

**Contact:** Christy Campoll, Associate, RLS & Associates, (317) 439-1475 (mobile)  
Brian Jones, Section 5310 Program Manager, Indiana Department of  
Transportation, (317) 426-8541

**Subject:** Public meeting to focus on transportation needs in rural areas of Indiana for older adults, individuals with disabilities and the general public

The Indiana Department of Transportation (INDOT) is updating the coordinated human services transportation plans for the state's rural coordination planning regions. A series of virtual public meetings will be held to inform interested individuals about the possibilities of coordinated public and human service agency transportation and, more importantly, to listen to anyone who rides, would like to ride, and/or operates public, private or human service agency transportation resources.

The meetings will begin with a brief presentation of research conducted by RLS and Associates, Inc. about residents' needs for transportation to work, medical appointments, entertainment, or any other reason. There will be an open discussion about gaps in available transportation service and strategies for increasing mobility. Public, private and non-profit transportation providers, human service agencies, and any individual who needs transportation should attend.

The public is encouraged to attend the following meeting to learn more and share their input. Agencies who receive or intend to receive funding under the Federal Transit Administration Section 5310 Program must participate in coordination planning. Anyone who requires an auxiliary aid or service for effective communication to participate in a meeting should call (800) 684-1458 at least one week in advance on the meeting.

### **Coordinated Transportation Plan Input Meeting for Adams, Blackford, Delaware, Grant, Henry, Jay, Madison, Randolph and Wells Counties (Region 7)**

**Tuesday, March 23, 2021, 12:00 PM - 1:30 PM Eastern Time**  
**Obtain Zoom meeting link or dial-in phone number by visiting**  
<http://tinyurl.com/783czmmm>

Residents are asked to provide their input through the public survey available online at: [https://www.surveymonkey.com/r/Indiana\\_Transportation](https://www.surveymonkey.com/r/Indiana_Transportation). Paper versions of the survey are available upon request by calling (800) 684-1458.

For additional information, contact Christy Campoll with RLS & Associates at (800) 684-1458 or Brian Jones, Section 5310 Program Manager, Indiana Department of Transportation, (317) 426-8541.

###

## **Region 7 HSTP Meeting Attendance List**

**March 23, 2021**

1. Brian Jones, INDOT Section 5310 Program Manager
2. Dana Weaver, Director of Coordinating Care Services, Henry Community Health (New Castle, Henry County)
3. Jeff Edwards, City of Marion Transportation Director
4. Pam Lemming, Marion Transit, Administrative Assistant
5. Phillip Parnell, Statewide Provider Association that represents providers that serve people with disabilities
6. Tim Ramsey, Bi-County Services (private company serving individuals with disabilities and transportation provider for those clients in Adams County)
7. Marsha Nicholas, Bi-County Services
8. Ann Yates, St. Vincent Mercy Hospital in Elwood
9. Betsy Collier, Wells on Wheels (WOW)
10. Greg Maynard, Carey Services (in Marion)
11. Traci Gross, Jay-Randolph Developmental Services
12. Dave Benefiel, Anderson MPO



**Moving Public Transportation**  
Into the Future

# INDOT Rural Coordinated Public Transit – Human Service Transportation Plan 2021 Update

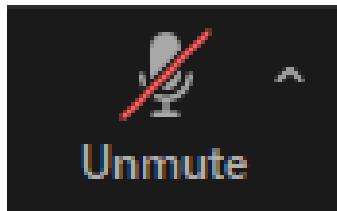
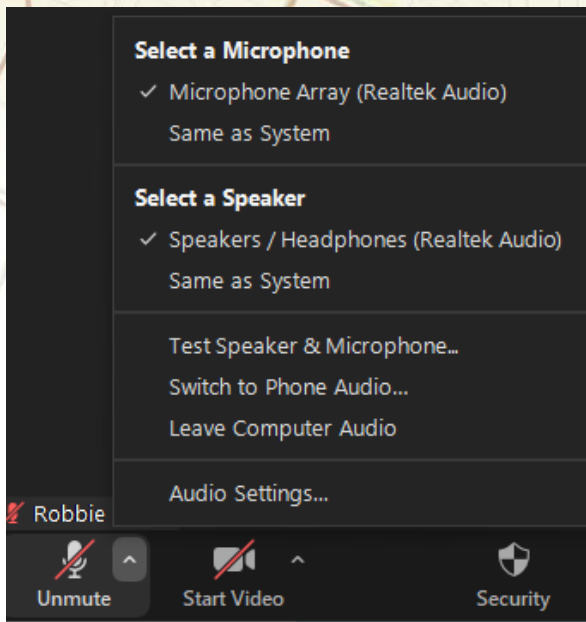
**TRANSPORTATION FOR OLDER ADULTS,  
INDIVIDUALS WITH DISABILITIES, PEOPLE  
WITH LOW INCOMES, & GENERAL PUBLIC**

**MARCH 2021**

# Welcome!

## A few Zoom Tips:

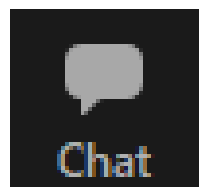
Test or change your audio and video by clicking the ^ next to the Mute/Unmute button and selecting 'Audio Settings...'



This button (bottom left corner) shows you are muted. When you want to speak click here to unmute.



This button is your webcam (bottom left side of screen). Click it if you want us to see you.



This button lets you see and type into the 'Chat' function.





# Agenda

- ◆ Introductions
- ◆ Ground Rules
- ◆ Project Overview
- ◆ Discussion
  - Do You Need A Ride?
  - How Can We Solve Unmet Transportation Needs?
  - What Are your Goals for Addressing Needs?
  - What Transportation Projects Are on the Horizon?



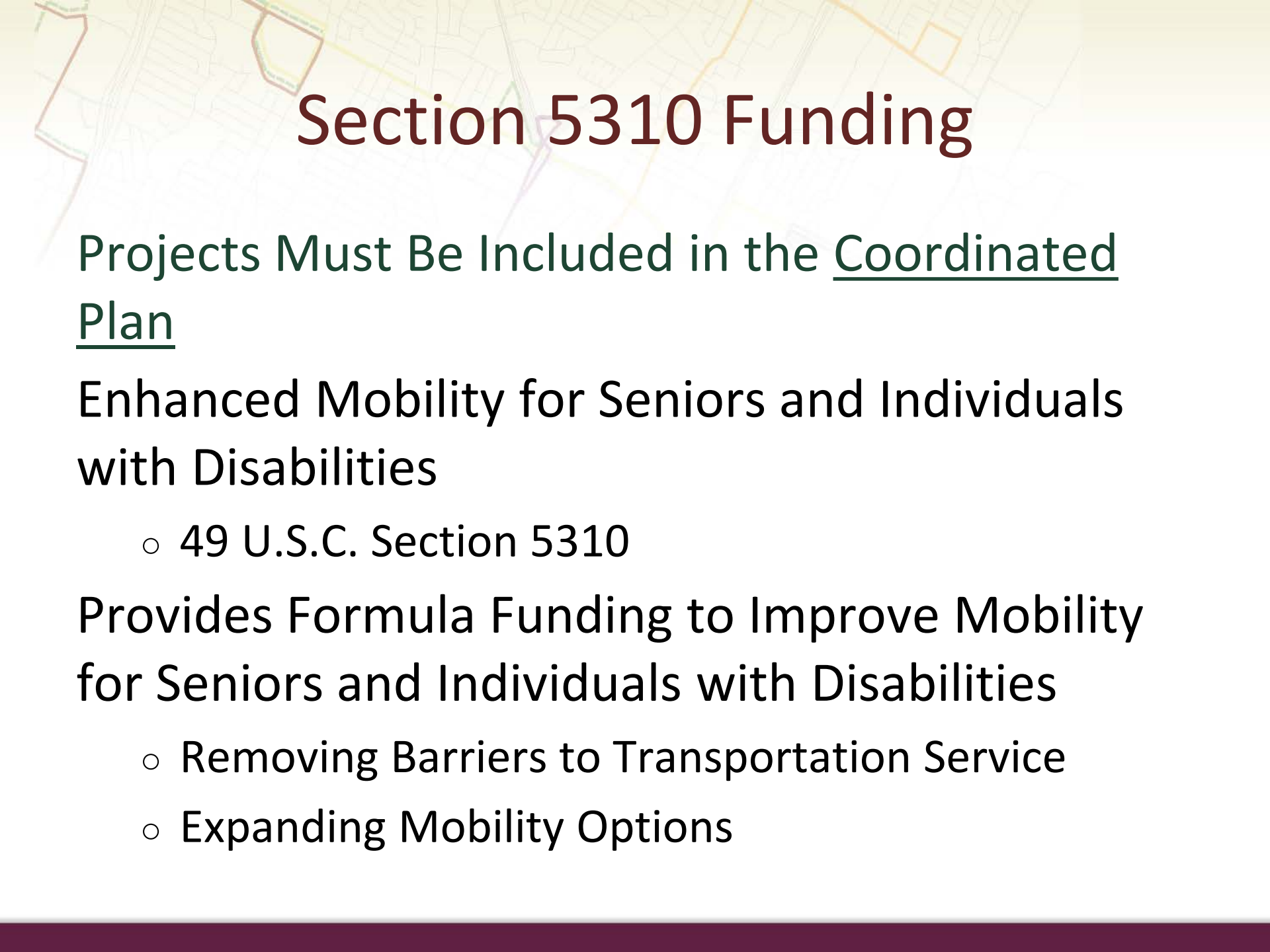
# Introductions

- ◆ Please share a little about yourself!
  - What is your name?
  - Are you representing an organization today?
  - What is your primary mode of transportation (or that of the person you are advocating for today)



# Ground Rules

- ◆ Participate actively
- ◆ Be respectful of everyone's time
- ◆ Treat everyone's ideas with respect
- ◆ Speak one at a time
- ◆ Keep focused on the topic or question
- ◆ Raise your hand to speak or unmute yourself to let us know you want to talk
- ◆ Use the "Chat" function
  - We will take breaks to read and discuss "Chat" questions and we will respond in writing



# Section 5310 Funding

Projects Must Be Included in the Coordinated Plan

Enhanced Mobility for Seniors and Individuals with Disabilities

- 49 U.S.C. Section 5310

Provides Formula Funding to Improve Mobility for Seniors and Individuals with Disabilities

- Removing Barriers to Transportation Service
- Expanding Mobility Options



# What Is A Coordinated Plan?

- ◆ Identifies Unmet Transportation Needs in the Community
- ◆ Prioritizes Goals and Strategies to address Unmet Needs
- ◆ Looks at Opportunities for Collaboration and Coordination of Services
- ◆ Must be Locally Developed and Adopted



# Coordinated Plan Update

- ◆ Last Updated in 2017, the Plans are Available at <https://www.in.gov/indot/2825.htm>
- ◆ Region 7 Counties

Adams

Blackford

Delaware

Grant

Henry

Jay

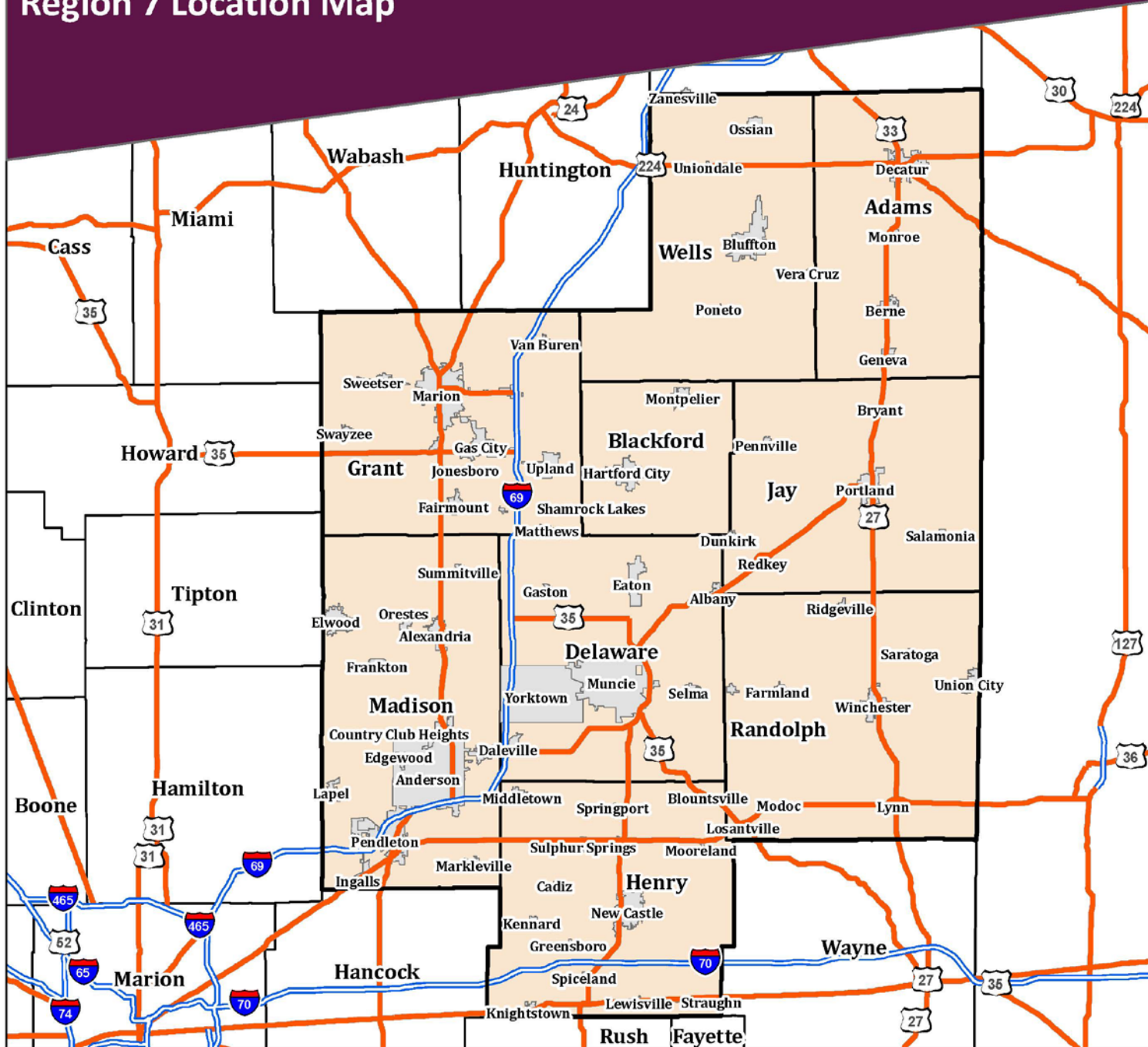
Madison

Randolph

Wells

# Region 7 Location Map

## Region 7 Coordinated Public Transit - Human Services Transportation Plan Update



- Limited Access
- Highway
- Cities
- Region 7



0 4 8 16  
Miles



# Current 5310 Projects

Region 7 has received 51 vehicles since 2016, a value of \$2,336,829, leveraging \$467,366 in local share.

Adams County Council on Aging	1
Bi County Services	7
Carey Services	17
Hillcroft Services	10
Jay Randolph Devp Services	6
LifeStream Services	8
The Wells County Council on Aging Inc	2



# Transportation Public Survey

**AVAILABLE NOW**

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

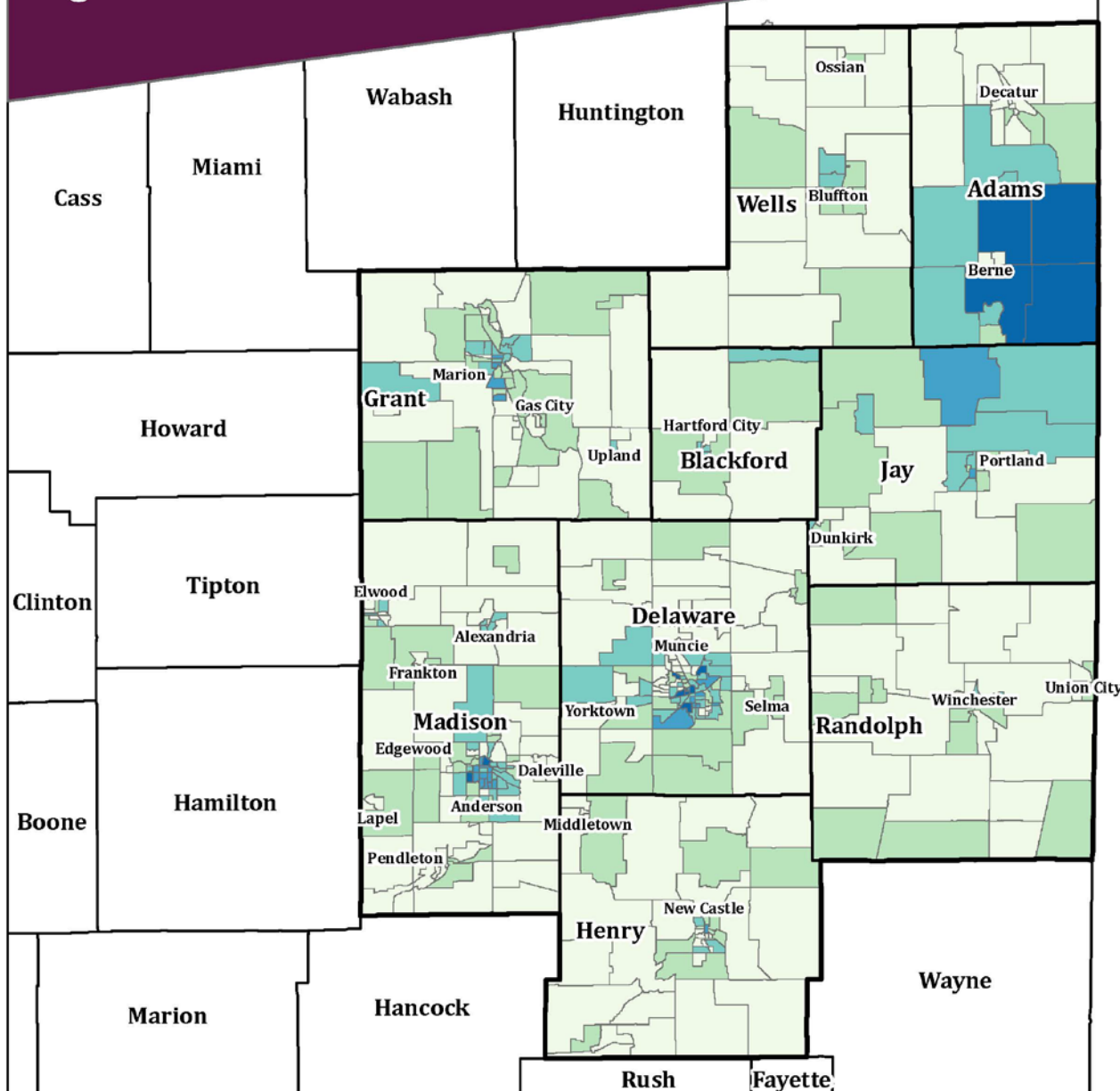
[https://www.surveymonkey.com/r/Indiana Transportation](https://www.surveymonkey.com/r/Indiana_Transportation)

- Spanish Version Available
- Print and Large Print Available

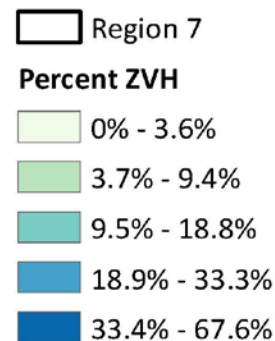
# Preliminary Survey Results

- ◆ 90 Responses from Region 7
- ◆ 43% use public transit, 69% use demand response, 64% rely on family/friends
- ◆ 38% suggested Saturday service would be useful
- ◆ 8 found it Always or Frequently Difficult to get to medical appointments, 11 found it Sometimes Difficult
- ◆ 51% need to travel out of county for medical, and 18% found it difficult

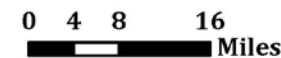
# Percent Zero Vehicle Households Region 7



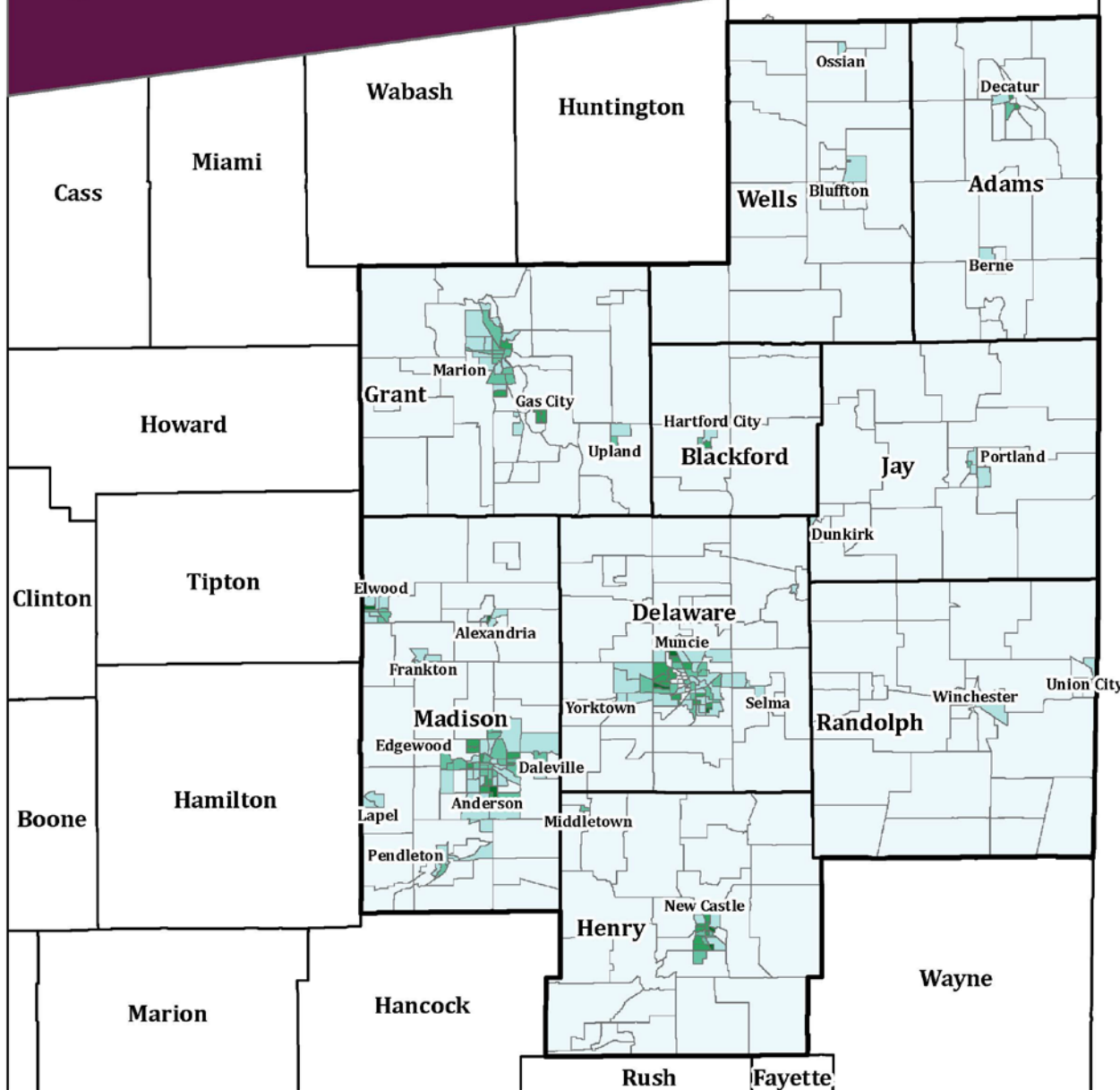
## Region 7 Coordinated Public Transit - Human Services Transportation Plan Update



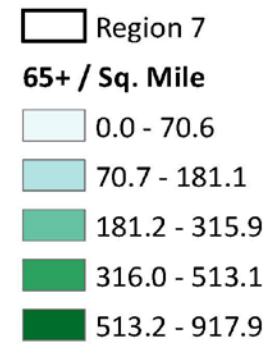
Source: U.S. Census Bureau  
American Community Survey  
2019 5-Year Estimates



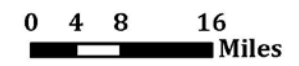
# Population Density Age 65 and Over Region 7



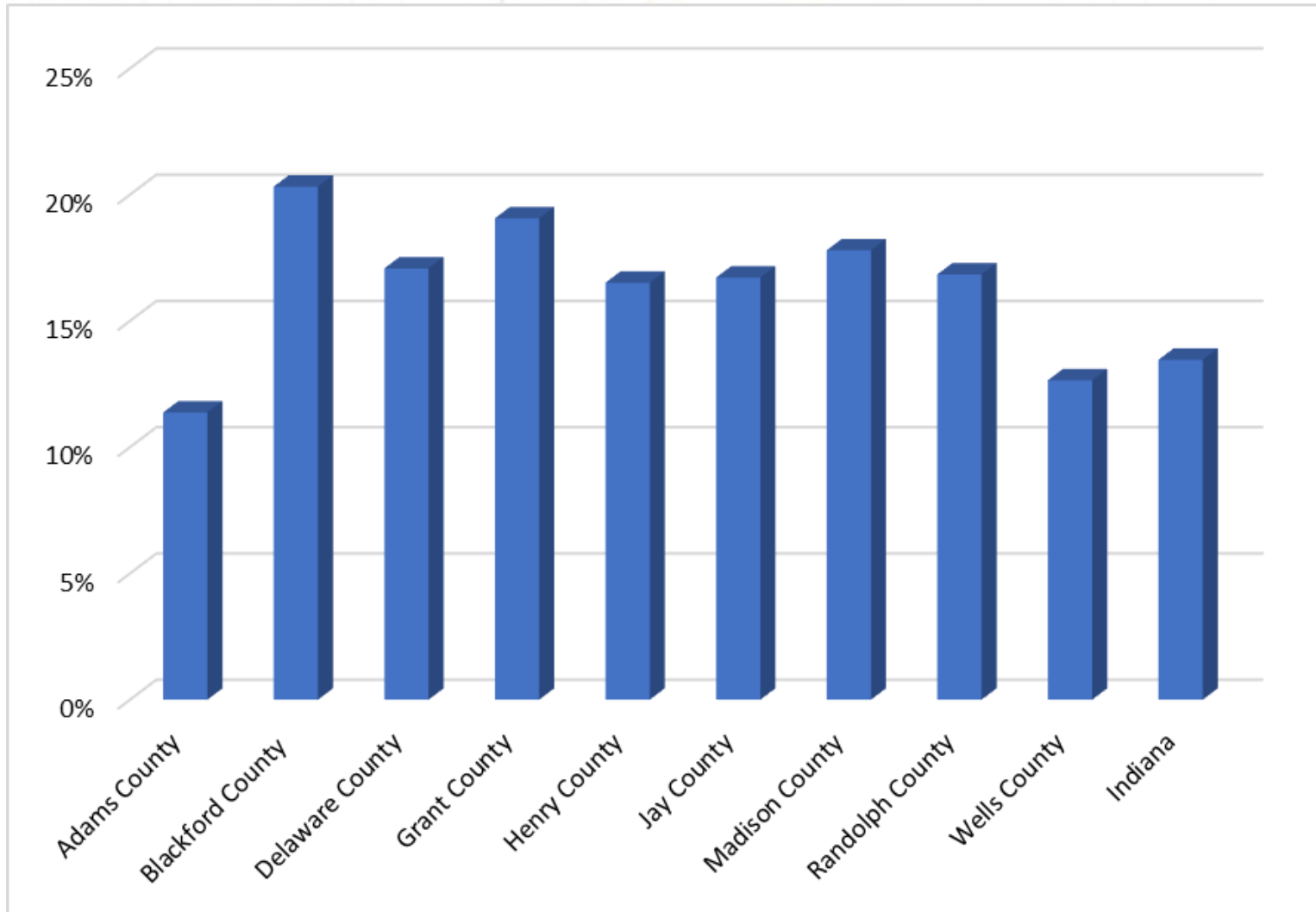
## Region 7 Coordinated Public Transit - Human Services Transportation Plan Update



Source: U.S. Census Bureau  
American Community Survey  
2019 5-Year Estimates



# Individuals with Disabilities





# Transportation Needs and Gaps

In 2017 Needs Were:

- ❑ High Priority Unmet Needs: Improve Regional And Multi-county Transportation Through Coordinated Services
- ❑ High And Moderate Priority Unmet Needs: Increase Funding For Public And Coordinated Transportation; Increase Transportation Options
- ❑ Moderate And Low Priority Unmet Needs: Regional Policies And Committees; Shared Grant Writing; Technology.



# Discussion

- ♦ What unmet needs are you hearing, or have you encountered?



# Transportation Providers

Providers include ALL Public, Private, Non-Profit, Volunteer, Government, and Human Service Agency Programs

- Participation is Not Limited to Organizations that Serve Older Adults and Individuals with Disabilities
- Every Part of the Network of Services is Important





# Transportation Providers

- ◆ Adams County Council on Aging
- ◆ Alternatives Incorporated
- ◆ Aspire Indiana, Inc.
- ◆ Bi-County Services, Inc.
- ◆ Carey Services, Inc.
- ◆ Children's Bureau/Community Partners
- ◆ Community and Family Services, Inc.
- ◆ Delaware Muncie MPC
- ◆ Henry County Hospital
- ◆ Hillcroft Services, Inc.
- ◆ Jay-Randolph Development Services, Inc.
- ◆ City of Marion Transportation
- ◆ Muncie Delaware County Senior Citizens Council
- ◆ Muncie Indiana Transit System (MITS)
- ◆ New Castle Transit
- ◆ Pathstone Corporation
- ◆ Quality Care Ambulance
- ◆ The New InterUrban Public Transit System (LifeStream)
- ◆ Vocational Rehabilitation services
- ◆ Wells County Council on Aging

Who Are We Missing?



# How Can We Meet Needs?

## 2017 Goals and Strategies

Goal #1: Improve and Increase Regional, Multi-County, and Multi-Modal Coordinated Transportation Services for Access to Employment, Medical and Other Resources

Goal #2: Educate Residents and Local Officials about the Benefits of Public and Coordinated Transportation Services.

Goal #3: Increase Funding for Public and Coordinated Transportation Throughout the Region.



# 2017 Goals/Strategies

Goal #4: Increase Transportation Options for Older Adults, Individuals with Disabilities, and the General Public in Areas Where Services are Nonexistent or Limited.

Goal #5: Establish a Regional Approach to Public Outreach and Grant Writing for Transportation Services

Goal #6: Incorporate New Technology and Capital to Improve Existing Mobility Options and Serve More People



# Discussion

- ❑ What progress has been made since the last plan in 2017?
- ❑ Beyond the disruption of the pandemic, what achievements can be discussed in the plans?



# Discussion

- ❑ What Are Your Goals for Addressing Unmet Needs?
- ❑ What plans and projects are on your horizon, or should be included in the plan for 2021 through 2025?



# Next Steps

- ◆ Continue the Needs Assessment and Analysis
  - Demographics
  - Existing services
  - Geographic and temporal gaps
  - Barriers
  - Vehicle availability
- ◆ Develop Draft Coordinated Plan Goals & Strategies
- ◆ Prioritize Goals and Strategies
- ◆ Ongoing Work Toward Implementation



We appreciate your participation!

**THANK YOU FOR YOUR TIME!**



**Moving Public Transportation**  
Into the Future

# INDOT Rural Coordinated Public Transit – Human Service Transportation Plan 2021 Update

**TRANSPORTATION FOR OLDER ADULTS,  
INDIVIDUALS WITH DISABILITIES, PEOPLE  
WITH LOW INCOMES, & GENERAL PUBLIC**

**MARCH 2021**






# Agenda

- ◆ Plan Update Overview
  
- ◆ Discussion
  - What Transportation Needs Do You Experience or Hear?
  - How Can We Solve Unmet Transportation Needs?
  - What Are your Goals for Addressing Needs?
  - What Transportation Projects Are on the Horizon?



# Section 5310 Funding

- ◆ Enhanced Mobility for Seniors and Individuals with Disabilities
  - 49 U.S.C. Section 5310
- ◆ Provides Formula Funding to Improve Mobility for Seniors and Individuals with Disabilities
  - Expanding Mobility Options with Wheelchair Accessible Vehicles and other tools
- **Projects Must Be Included in the Coordinated Plan**



# What Is A Coordinated Plan?

- ◆ Identifies Unmet Transportation Needs in the Community
  - ◆ All transportation needs, not just Older Adults and Individuals with Disabilities
- ◆ Prioritizes Goals and Strategies to address Unmet Needs
- ◆ Looks at Opportunities for Collaboration and Coordination of Services – Transit, private, client-based...
- ◆ Must be Locally Developed and Adopted

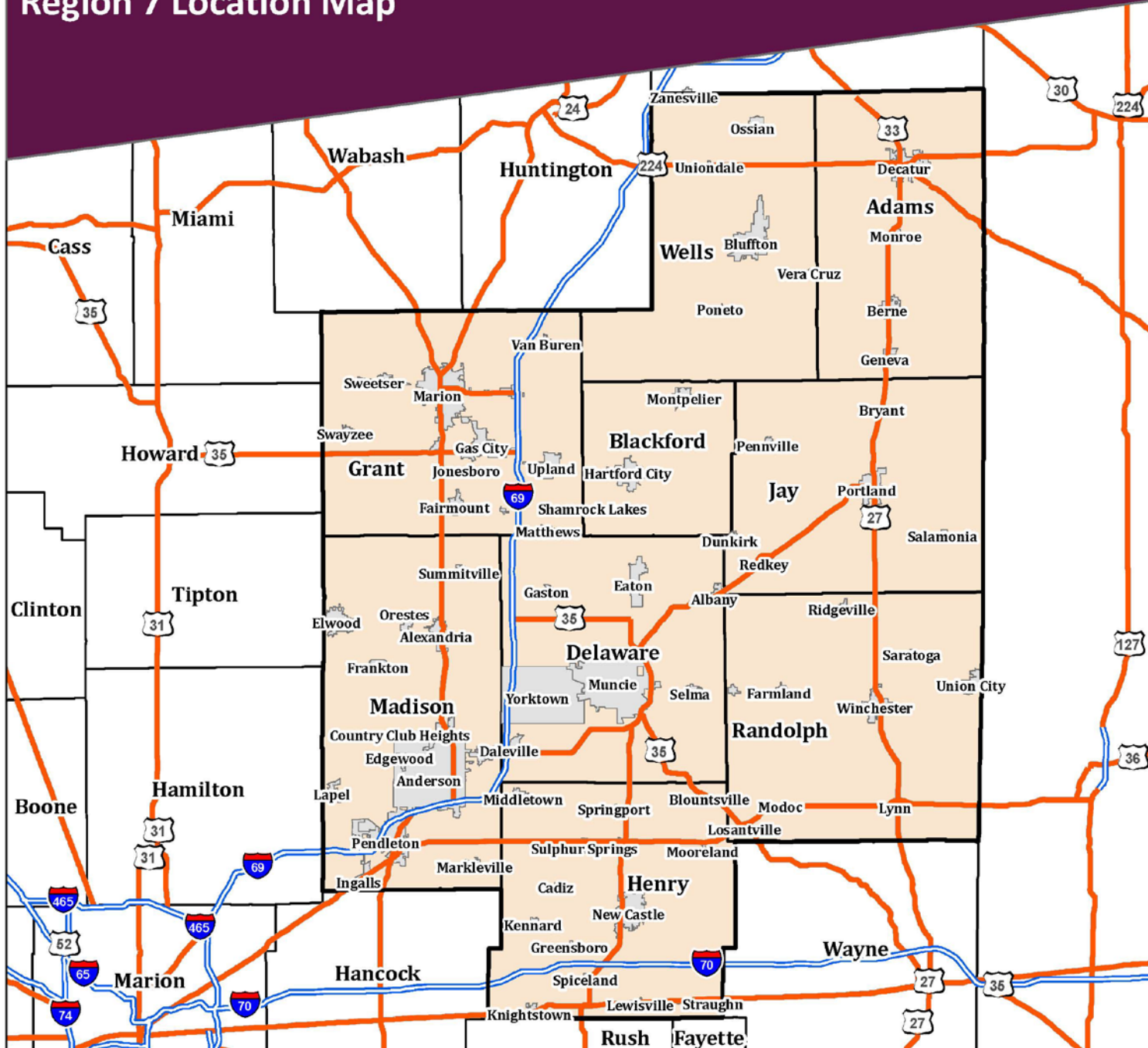


# Coordinated Plan Update

- ◆ Last Updated in 2017, the Plans are Available at <https://www.in.gov/indot/2825.htm> or <https://www.heartlandmpo.org/document-archive#1733347810>
- ◆ RLS & Associates is contracted with INDOT to update the rural plans and several selected urban plans for 2021.

# Region 7 Location Map

## Region 7 Coordinated Public Transit - Human Services Transportation Plan Update



- Limited Access
- Highway
- Cities
- Region 7



0 4 8 16  
Miles



# Current 5310 Projects

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

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- Spanish Version Available
- Print and Large Print Available



# Preliminary Survey Results

- ◆ 90 Responses from Region 7
- ◆ 43% use public transit, 69% use demand response, 64% rely on family/friends
- ◆ 38% suggested Saturday service would be useful
- ◆ 8 found it Always or Frequently Difficult to get to medical appointments, another 11 found it Sometimes Difficult
- ◆ 51% need to travel out of county for medical, and 18% found it difficult



A faint, stylized map of Madison County, Tennessee, serves as the background for the slide. The map shows various roads, including major highways like I-75 and I-24, and smaller local roads. The colors are muted, with greens for parks or undeveloped areas and yellows/oranges for roads and developed areas.

# Results from Madison County

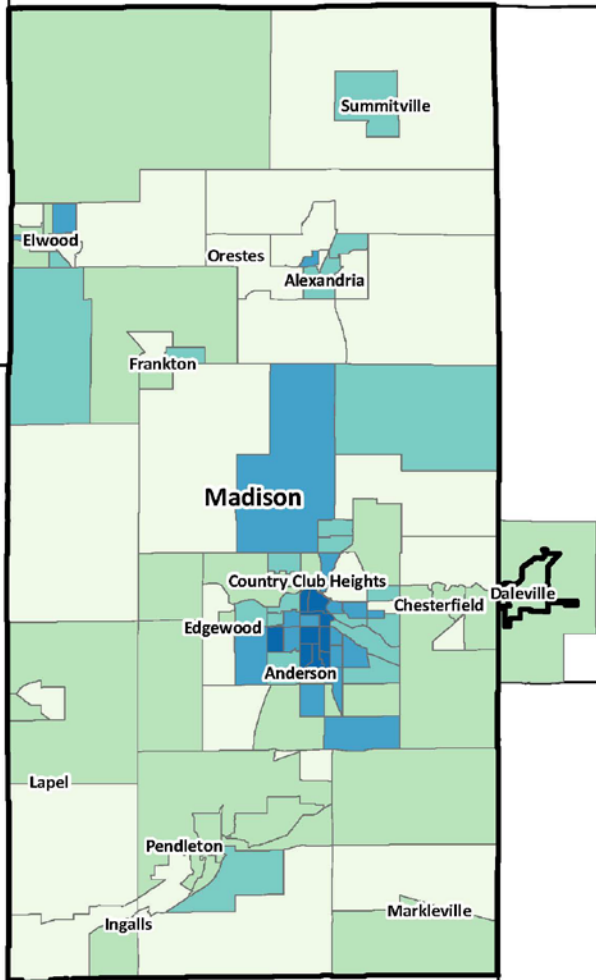
- ◆ 13 Responses
- ◆ 23% use public transit, 62% drive themselves, 31% rely on family/friends
- ◆ 69% suggested getting to other parts of the state would be useful, 31% requested weekend services
- ◆ 2 found it Always or Frequently Difficult to get to medical and dental appointments, 3 found it Always or Sometimes Difficult to get to employment
- ◆ 38% need to travel out of county for medical, 46% shop out of county, and 15% found it difficult

# Percent Zero Vehicle Households Madison County MPO

Blackford

## Madison MPO Coordinated Public Transit - Human Services Transportation Plan Update

Tipton



Delaware

Hamilton

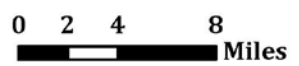


Madison MPO

### Percent ZVH

- 0% - 1.6%
- 1.7% - 5.1%
- 5.2% - 10.8%
- 10.9% - 20.1%
- 20.2% - 38.8%

Source: U.S. Census Bureau  
American Community Survey  
2019 5-Year Estimates



Henry

Marion

Hancock

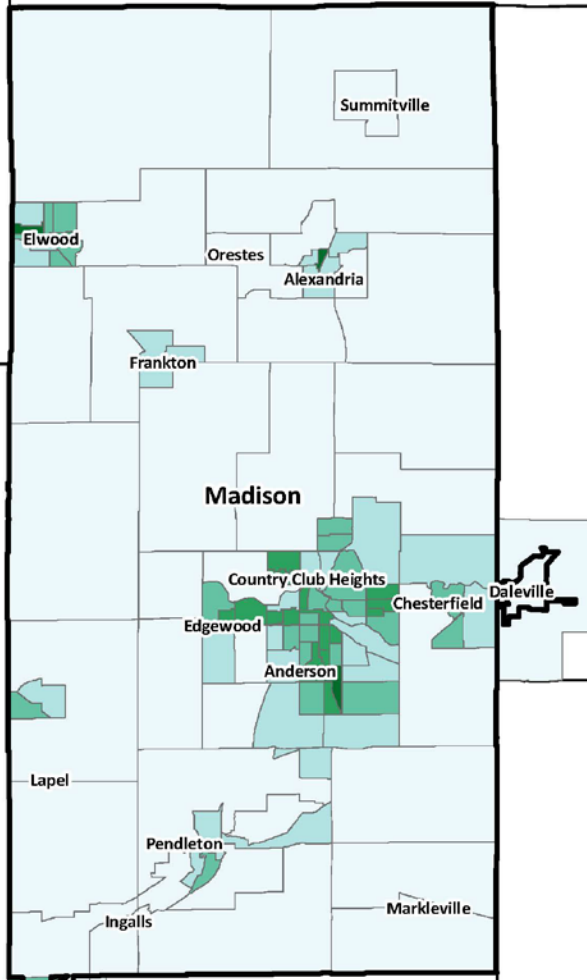


# Population Density Age 65 and Over Madison County MPO

Blackford

## Madison MPO Coordinated Public Transit - Human Services Transportation Plan Update

Tipton



Delaware

Hamilton

Henry

Marion

Hancock

Madison MPO

**65+ / Sq. Mile**

3 - 57.5

57.6 - 137.3

137.4 - 269.4

269.5 - 484.7

484.8 - 917.9

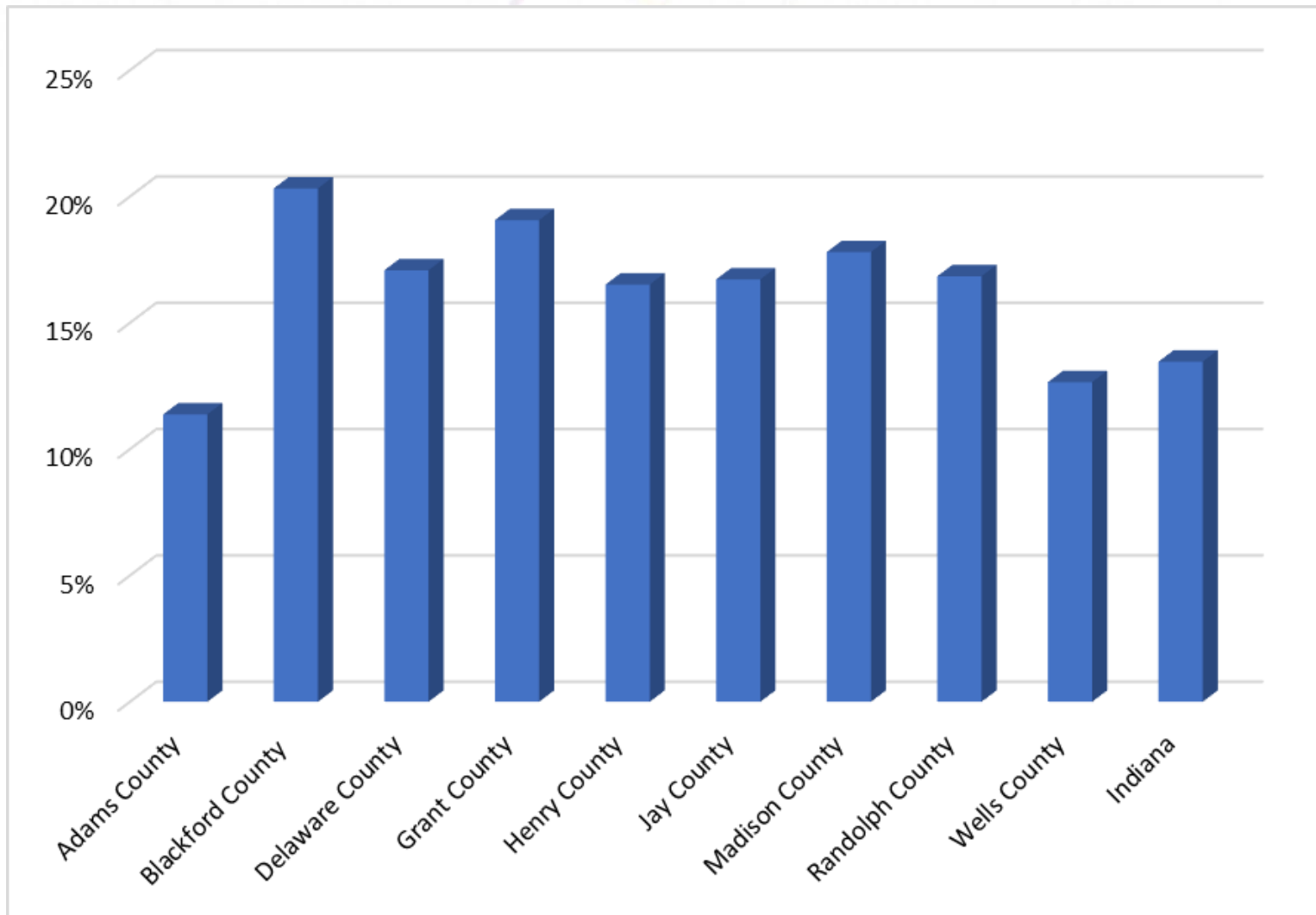


Source: U.S. Census Bureau  
American Community Survey  
2019 5-Year Estimates

0 2 4 8  
 Miles



# Individuals with Disabilities





# 2018 Transportation Needs and Gaps

- ◆ Extended transit operating hours
- ◆ Transportation education, including increasing sense of safety
- ◆ Coordination among Transportation Agencies
- ◆ Accommodations for persons with disabilities, including infrastructure improvements and ADA accessible vehicles

The background of the slide is a faded map of a city street grid. Several areas are highlighted with colored outlines: a red outline on the left, a green outline in the upper left, and an orange outline in the upper right. The map is semi-transparent, allowing the text to be clearly visible.

# Discussion

- ♦ What unmet needs are you hearing, or have you encountered?



# Transportation Providers

- ◆ Providers include ALL Public, Private, Non-Profit, Volunteer, Government, and Human Service Agency Programs
  - Participation is Not Limited to Organizations that Serve Older Adults and Individuals with Disabilities
  - Every Part of the Network of Services is Important

# General Public Transportation Providers

- ◆ City of Anderson Transportation System (CATS)
  - Fixed Route
  - Nifty Lift Paratransit
  - Flagship Express Route
- ◆ Transportation for Rural Areas of Madison County (TRAMS), contracted through Hillcroft, Inc.
- ◆ Commuter Connect (CIRTA program) carpool/vanpool
- ◆ Intercity Bus, including Hoosier Ride (Miller Transportation), Megabus, Greyhound
- ◆ Taxis, including A-Town, Anderson Taxi, PDQ Taxi, Mr. Nice Guy Taxi

Who Are We Missing?



# Human Service Agency Transportation Providers

- Alternatives Inc
- Anderson Community Schools
- Anderson Fire Department & EMS contracted service (Eaton EMT, Seals Ambulance Service,
- AppleCrittters Childcare
- Aspire
- Beauty for Ashes Transitional Home
- Community Justice Center
- Community Partnership Center
- Developmental Service Alternatives (DSI)
- Dove Harbor
- First Presbyterian Church
- Gentle Shepherd's Preschool and Childcare
- Hancock County Senior Services
- Hopewell Center
- Janus Developmental Services
- Keystone Woods
- LifeStream Services
- Madison County Youth Center
- Monticello House Alzheimer's Living
- Miriam Project Adoption Services
- Office of Veteran Affairs
- Salvation Army
- School Transportation, including Anderson, Daleville, Frankton-Lapel, Liberty Christian, Madison-Grant USC, South Madison
- SonRise Campground
- Southdale Tower
- Vocational Rehabilitation Service
- Webber Transportation



# How Can We Meet Needs?

## 2018 Goals and Strategies

**Goal #1: Education and Outreach;** updated websites and listings, billboards, outreach to employers, schools, churches, health fairs and events, Commuter Connect Services

**Goal #2: Education and Safety;** multi-modal transportation safety outreach, sidewalk/crosswalk/ADA infrastructure, bus stop improvements including lighting and shelter



# 2018 Goals/Strategies

**Goal #3: Service Efficiency;** set performance standards and plans, evaluate progress, extend hours, increase fleet capacity, increase service along high demand routes, increase coordination between counties

**Goal #4: Increased Coordination;** include agencies in planning, improve communication through meetings and focus groups, bring stakeholders together to share ideas



# Discussion

- ❑ What progress has been made since the last plan in 2018?
- ❑ Beyond the disruption of the pandemic, what achievements can be discussed in the plans?



# Discussion

- ❑ What Are Your Goals for Addressing Unmet Needs?
- ❑ What plans and projects are on your horizon, or should be included in the plan?



# Next Steps

- ◆ Continue the Needs Assessment and Analysis
  - Demographics
  - Existing services
  - Geographic and temporal gaps
  - Barriers
  - Vehicle availability
- ◆ Develop Draft Coordinated Plan Goals & Strategies
- ◆ Prioritize Goals and Strategies
- ◆ Ongoing Work Toward Implementation



We appreciate your participation!

**THANK YOU FOR YOUR TIME!**



**Moving Public Transportation**  
Into the Future

# INDOT Rural Coordinated Public Transit – Human Service Transportation Plan 2021 Update

**COORDINATION NEEDS, GOALS, AND STRATEGIES**

**JULY 2021**





# Agenda

- ◆ Needs Assessment
- ◆ Overview of Goals and Strategies
- ◆ Instructions for Prioritization
- ◆ Discussion



# Section 5310 Funding

- ◆ Enhanced Mobility for Seniors and Individuals with Disabilities
  - 49 U.S.C. Section 5310
- ◆ Provides Formula Funding to Improve Mobility for Seniors and Individuals with Disabilities
  - Expanding Mobility Options with Wheelchair Accessible Vehicles and other tools
- **Projects Must Be Included in the Coordinated Plan**

A faded, light-colored map of a city or county area, showing streets and boundaries, serves as the background for the top half of the slide.

# Needs Identified In Madison County Area

- ◆ Increase options for long-distance travel
- ◆ Need to maintain and expand service
- ◆ Increase coordination to leverage funding
- ◆ Increase hours on evenings and weekends



# Needs Identified, Continued

- ◆ Continue public education and information available regarding local service
- ◆ Technology to aid transportation programs
- ◆ Driver recruiting tools and local training
- ◆ School transportation outside the district



# Transportation Goal 1

## Maintain Existing Transportation Services for Human Service Agency Clients and the General Public

- ◆ Strategy 1.1: Replace and Maintain Vehicles through FTA/INDOT funding and local sources
- ◆ Strategy 1.2: Develop local tools for driver recruitment and retention



# Transportation Goal 2

## Expand Transportation Service for Older Adults, Individuals with Disabilities, People with Low Incomes, and the General Public

- ◆ Strategy 2.1: Expand transportation service for new hours, days, and new geographic areas of the region
- ◆ Strategy 2.2: Expand service for CATS outside of the City boundaries with a zone, demand response, or microtransit approach
- ◆ Strategy 2.3: Provide cross-county service beyond Madison County and develop a protocol for shared-ride long distance trips between the local providers.
- ◆ Strategy 2.4: Add volunteer and/or Voucher programs to enhance and fill gaps for existing local service



# Transportation Goal 3

## Adopt New Technologies to Enhance Customer Service and Increase Efficiency

- ◆ Strategy 3.1 Add technological capacity for improving scheduling and dispatch, tracking vehicles, and responding to unforeseen changes in service needs.
- ◆ Strategy 3.2 Add customer-facing technology for scheduling trips.



# Transportation Goal 4

## Cooperate at a Regional Level to Promote Seamless Inter-County Transportation Service

- ◆ Strategy 4.1: Increase coordination through a Coordination Council or the MPO TAC and publicize the value of local public transportation.





# Transportation Goal 5

## Increase Participation in Statewide Initiatives to Enhance Mobility

- ◆ Strategy 5.1 Participate actively in the Indiana Council on Specialized Transportation (INCOST) and other statewide organizations.
- ◆ Strategy 5.2 Track and communicate concerns about brokered service delivery to FSSA and INDOT
- ◆ Strategy 5.3 Educate local elected officials about transportation at venues like Purdue Road School



# Transportation Goal 6

## Goal 6: Increase Public Awareness of Available Transportation Services Among Community Stakeholders

- ◆ Strategy 6.1 Create a “who-to-call” directory with mapped service areas for public use
- ◆ Strategy 6.2 Develop an online portal that includes resources and input from Area Agencies on Aging and Independent Living Councils.

# Survey to Prioritize Needs and Strategies

<https://www.surveymonkey.com/r/MadisonMPONeedsSurvey>

Needs -You will be asked to

- ♦ rate (low, medium, high) the needs, and
- ♦ rank the needs

Strategies – You will be asked to rate the strategies (low, medium, high)

Consider value, feasibility, and cost-effectiveness



# Discussion

- Reflection on the goals and strategies presented?



# Next Steps

- ◆ Continue the Needs Assessment and Analysis
- ◆ Develop Draft Coordinated Plan Goals & Strategies
- ◆ Prioritize Goals and Strategies
- ◆ Ongoing Work Toward Implementation



We appreciate your participation!

**THANK YOU FOR YOUR TIME!**

**Please complete this survey about your transportation needs and preferences. This information will be used in your local area's Coordinated Public Transit-Human Service Transportation Plan. For more information please contact RLS & Associates at (937) 299-5007. Thank you!**

1. What forms of transportation do you use: (check all that apply)

- Public transit that serves your city or county, including bus systems, rail lines, ADA paratransit, or general public demand response/dial-a-ride
- Medicaid Non-emergency medical transportation (NEMT)
- Demand response/dial-a-ride services that are for specific groups only – for example, older adults or people with disabilities (this excludes ADA complementary paratransit provided by public transit systems)
- Transportation offered by volunteer or faith-based groups
- Drive your own vehicle
- Rely on family/friends for rides
- Carpool or vanpool to work
- Other (please specify)
- Uber/Lyft
- Taxi
- Inter-city bus, such as Greyhound or Megabus
- Bicycling
- Walking
- Scooter/Moped

2. If you use any transportation services, such as public transit or demand response/dial-a-ride, please tell us the name(s) of the services you use:

Name of Service 1	<input type="text"/>
Name of Service 2	<input type="text"/>
Name of Service 3	<input type="text"/>

3. What changes could be made to your local transportation options to make using them more appealing to you?

- |   |  |
|---|--|
| <input type="checkbox"/> If I could ride to other parts of the state (such as Indianapolis or other cities/towns) | <input type="checkbox"/> Pick me up at my home and take me directly to my destination  |
| <input type="checkbox"/> Lower the cost to ride   | <input type="checkbox"/> Increase health and safety precautions  |
| <input type="checkbox"/> Start earlier in the morning   | <input type="checkbox"/> Run fixed route service more frequently (for example, make a bus route run every 30 minutes instead of every 60 minutes)                                  |
| <input type="checkbox"/> End later at night   | <input type="checkbox"/> Increase the amount of demand response/dial-a-ride service available (for example, operate more vehicles so there are fewer turn-downs for trip requests) |
| <input type="checkbox"/> Operate on Saturdays   | <input type="checkbox"/> Make scheduling demand response/dial-a-ride service more convenient (for example, allow for same-day or on-demand trip requests)                          |
| <input type="checkbox"/> Operate on Sundays   | <input type="checkbox"/> Make it easier, or add the option, for children, spouses and/or care-givers to ride along   |

Other (please specify)

4. Do you have difficulty getting the transportation you need to any of the following types of destinations?

	No difficulty	Sometimes difficult	Frequently difficult	Always difficult	Not applicable to me
Your employer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medical offices, clinics or hospitals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental health care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmacy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shopping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Human service agencies or government offices	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other trip purposes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



5. Do you need to travel to destinations outside of your county for work, medical care, shopping, or other reasons?

- No
- Yes, for work
- Yes, for medical care
- Yes, for shopping
- Yes, for other reasons (please specify)

6. Is it difficult for you to travel outside of your county? If yes, please indicate what makes it difficult.

- Yes
- No
- Not applicable (no need to travel outside my county)

If yes, please provide more information:

7. What is your age group?

- Under 18
- 18-54
- 55-59
- 60-64
- 65+

8. Do you have a disability which requires you to use a cane, walker, wheelchair, and/or another device, or a service animal to help you get around?

- Yes
- No

9. What county do you live in?

10. What is your zip code?

11. Do you have any comments or suggestions regarding the transportation services in your community?