

# SIMPO HUMAN SERVICES TRANSPORTAION PLAN

Final Report



June 2018



# **TABLE OF CONTENTS**

1	Execu	tive summary	5
2	Introd	uction	6
	2.1	he Plan	6
	2.2 F	Purpose	6
	2.3 F	Regional Description	6
3	Regio	nal Description/Needs Assessment	8
	3.1	General demographic analysis	8
	3.1.1	Disability Status	8
	3.1.2	Elderly Populations	10
	3.1.3	Employment Density	11
	3.1.4	Household Density	12
	3.1.5	Low-Income Households	13
	3.1.6	Minority Populations	14
	3.1.7	Population Density	15
	3.1.8	Student Populations	16
	3.1.9	Zero Vehicle Households	17
	3.2	takeholders	18
	3.2.1	Centerstone, Carbondale and Marion.	18
	3.2.2	Williamson County Program on Aging.	18
	3.2.3	Center for Independent Living, Carbondale	18
	3.2.4	SIU School of Medicine.	18
	3.2.5	Stakeholder Interview Summary	19
	3.3 F	Regional Committee Members	20
	3.3.1	Rides Mass Transit District (RIDES)	20
	3.3.2	Jackson County Mass Transit District (JCMTD)	20
	3.3.3	Senior Adult Services (SAS)	21
	3.3.4	South Central Illinois Regional Planning & Development Commission (SCIRPDC):	21
	3.4	survey Results	21
	3.4.1	Survey Respondents – Demographics	21
	3.4.2	Trip Types	22
	3.4.3	Major Destinations:	26
	3.4.4	Conclusion	29



4	Existing	g Inventory	30
	4.1 E	kisting Services	30
	4.1.1	Jackson County Mass Transit District	30
	4.1.2	Rides Mass Transit District	31
	4.1.3	Senior Adult Services	32
	4.1.4	South Central Transit	33
	4.1.5	5310 Consolidated Vehicle Procurement Program	34
	4.1.6	Inter-City-Bus	34
	4.1.7	RIDES One Call Center	34
5	Comm	ttee Participation	35
	5.1 Fi	rst Committee Meeting	35
	5.1.1	Review of Self-Assessments:	36
6	Trip Ge	nerators	37
7	Identif	cation of Gaps, Strategies and Implementation	43
	7.1 G	aps and Strategies	43
	7.1.1	High Priority Gaps and Strategies	43
	7.1.2	Secondary Priority Gaps and Strategies	44
	7.2 Id	entification of Duplications	44
	7.3 P	rioritization	45
	7.3.1	A detailed "introduction" to the process and the HSTP	45
	7.3.2	Medicaid Billing Process	45
	7.3.3	Human Services Agency (HSA) application for funding and vehicle allocation	45
	7.3.4	General awareness and publicity	45
	7.3.5	How to keep the conversation going?	45
	7.3.6	Align with regional goals and objectives:	45
8	Progra	m of Projects	46
9	Appen	dices	48
	Appendix	A – Detailed Stakeholder Profile	49
	Appendix	B – Stakeholder Interviews	54
	Appendix	C – Public Survey Results	69
	Appendix	D – Regional Committee Meeting Summary and Self-Assessment Tool Results	109



# LIST OF FIGURES

Figure 1: Carbondale Urbanized Area	/
Figure 2: Disability Status	9
Figure 3: Elderly Populations	10
Figure 4: Employment Density	11
Figure 5: Household Density	12
Figure 6: Low Income Households	13
Figure 7: Minority Populations	14
Figure 8: Population Density	15
Figure 9: Student Populations	16
Figure 10: Zero Vehicle Households	17
Figure 11: Demographic Classes of Respondents (include overlap)	22
Figure 12: Difficulties in making Work-based trips	23
Figure 13: Difficulties in making School-based trips	24
Figure 14: Difficulties in making Medical Care or Social Services based trips	25
Figure 15: Difficulties in making Shopping, Dining and Entertainment based trips	26
Figure 16: Major Trip Generators as identified by the Online Survey respondents	27
Figure 17: Major Trip Generators – Medical Centers	37
Figure 18: Major Trip Generators – Social Services and Senior Living Centers	38
Figure 19: Major Trip Generators – Residential, Education and Transportation Centers	40
Figure 20: Major Trip Generators – Major Retail/Employment Hubs	41
LIST OF TABLES	
Table 1: Major Trip Generators as identified by the Online Survey respondents	
Table 2: Major Trip Generators – Medical Centers	37
Table 3: Major Trip Generators – Social Services and Senior Living Centers	39
Table 4: Major Trip Generators – Residential, Education and Transportation Centers	40
Table 5: Major Trin Generators - Major Retail/Employment Hubs	//1



# 1 Executive summary

The Southern Illinois Metropolitan Planning Organization (SIMPO) Human Services Transportation Plan (HSTP) is prepared in accordance with federal law (SAFETEA-LU, 2005), which requires that funding under Section 5310 be included in a locally-developed, coordinated public transit and human services transportation plan. This Plan follows the guidance provided in FTA Circular FTA C 9070.1G (July 7, 2014). This is the first Plan prepared by SIMPO. The FTA Circular (p. V-9) states that these Plans should be updated at least once every five years in areas which are in air quality attainment.

The structure and contents of this Plan are as follows:

- **Section 3.1** is a general demographic analysis of the SIMPO region. It identifies concentrations of elderly, disabled, and low-income populations. It also provides maps showing other data.
- **Section 3.2** describes stakeholders serving senior citizens, the disabled and low-income groups. These stakeholders were interviewed for input on transportation needs of these groups.
- **Section 3.3** describes the membership of the SIMPO Human Services Transportation Committee. The activities of this committee are described in **Section 5**.
- Section 3.4 provides the summary of an on-line public survey. This survey obtained input on transportation needs for low-income, elderly and disabled residents in the SIMPO region. Most respondents indicated that they were in multiple categories. It transportation needs for work, school, medical care/social services, and shopping/dining/entertainment. The survey also identified important travel destinations in the SIMPO region for these residents.
- **Section 4** is an inventory of the transportation services within the SIMPO region. Much of this information was provided in the *Region 11 Human Services Transportation Plan (February 2018)*. Some information was obtained through a follow up survey.
- **Section 5** describes the January 9, 2018 meeting of the SIMPO Human Services Transportation Committee. It describes the self-assessment which the Committee members provided.
- **Section 6** enumerates major trip generators within the SIMPO region. This enumeration is based upon the *SIMPO Transit Study Existing Conditions Report (February 2017)*, with follow-up input from Committee members.
- **Section 7** identifies gaps in service, as well as goals and strategies for addressing these gaps. Five high priority gaps are identified; the two highest priority gaps for immediate action are:
  - Establishing a regular Human Services Transportation Coordination Process in the SIMPO region. The Committee recommends that it make quarterly presentations to the SIMPO Technical and Policy Committees regarding coordinated Human Service transportation issues.
  - Making the Medicaid billing process more flexible. A key issue identified by operators is that Medicaid billing practices often require inefficient operations, especially for longer trips. Medicaid will reimburse only for a single transportation operator to provide a trip from a recipient's residence to the medical facility. Especially for longer trips (such as to facilities in St. Louis) there are significant potential efficiencies if more than one operator could serve that single trip. Medicaid billing practices currently do not allow multiple operators to be reimbursed for a single person's trip.
- **Section 8** contains the Program of Projects for the SIMPO region. This section is taken largely from the *Region 11 Human Services Transportation Plan*.



# 2 Introduction

# 2.1 The Plan

Federal transit law (SAFETEA-LU, 2005) requires that projects selected for funding under the Enhanced Mobility for Individuals and Individuals with Disabilities (Section 5310) Program be "included in a locally developed, coordinated public transit-human services transportation plan," and that the plan be "developed and approved through a process that included participation by seniors, individuals with disabilities, representatives of public, private, and nonprofit transportation and human services providers and other members of the public" utilizing transportation services. The SIMPO Human Services Plan addresses these requirements by identifying the transportation needs of individuals with disabilities, older adults, and people with low incomes, providing strategies for meeting these needs, and prioritizing transportation services for funding and implementation.

# 2.2 Purpose

The purpose of this study is to provide a Human Services Transportation Plan for the Southern Illinois Metropolitan Planning Area. The study includes an inventory and assessment of the existing service providers that provide transit services to the elderly, low income and disabled. The study will also identifies gaps in those services and recommends specific actions to address deficiencies.

# 2.3 Regional Description

The Southern Illinois Metropolitan Planning Organization (SIMPO) is responsible for carrying out a continuing, cooperative and comprehensive transportation planning process for the Carbondale Urbanized Area in accordance with applicable federal laws, policies and procedures, and with the cooperation and assistance of its members and the U.S. Department of Transportation. The Carbondale Urbanized Area includes Carbondale and Murphysboro in Jackson county and Cambria, Carterville, Herrin, and Marion in Williamson County. **Figure 1** shows the Marion-Carbondale Urbanized Area.



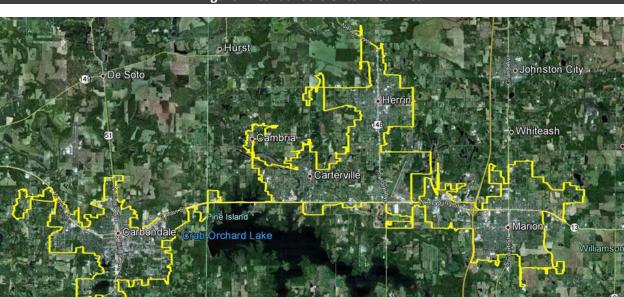


Figure 1: Carbondale Urbanized Area

The following human services transportation providers serve this area. Two of them (South Central Illinois Mass Transit District and Shawnee MTD) are situated outside the SIMPO area, but provide some service into and out of the SIMPO region. Information for these two operators was provided by the South Central Illinois Regional Planning & Development Commission.

- RIDES MTD RIDES provides transit service for 18 counties within Southeastern Illinois, including Williamson County. It also provides services for Williamson County residents to access travel destinations in Carbondale (Jackson County).
- Jackson County Mass Transit District (JCMTD) JCMTD provides countywide service within Jackson County.
- Senior Adult Services Senior Adult Services is a non-profit organization providing senior services, including transportation, to residents of Jackson County.
- South Central Illinois Mass Transit District In a typical week South Central provides 55 trips transporting a total of 32 riders transported per week in Jackson County. It provides 77 trips in Williamson Count; the number of riders was not provided.
- Shawnee MTD: Shawnee provides 66 trips into Williamson County in a typical week; the number of riders was not provided.



# 3 Regional Description/Needs Assessment

# 3.1 General demographic analysis

Different demographics factors like disability status, employment densities, zero vehicle households, etc. play an important role in assessing the need of transit services in an area. These maps highlight demographic factors which are particularly relevant to senior citizens or persons with disabilities.

#### 3.1.1 Disability Status

Identifying areas with a high level of persons with disabilities is important because this population typically relies extensively on public transportation for mobility. While not always the case, persons with disabilities may not be able to drive a personal vehicle and must use other modes of travel to reach their destinations. Disability status is defined by the U.S. Census Bureau as anyone with at least one of the following statuses:

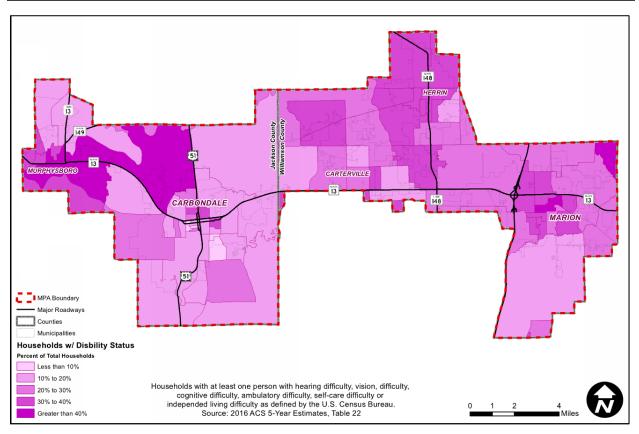
- Hearing difficulty;
- Vision difficulty;
- Cognitive difficulty;
- Ambulatory difficulty;
- Self-care difficulty; or
- Independent living difficulty.

**Figure 2** identifies households with at least one person that falls into at least one of the categories mentioned. It is important to note that the actual percentages of persons with disabilities are significantly lower than the percentage of households with at least one person with a disability. The average household size in the SIMPO MPA is approximately 2.13 persons per household, so the population with a disability could be less than half of the percentage of households with at least one person with a disability.

The highest concentrations of households with a disabled person are in rural block groups between Carbondale and Murphysboro north of IL-13, as well as rural block groups north of Carterville and west of Herrin.



# Figure 2: Disability Status

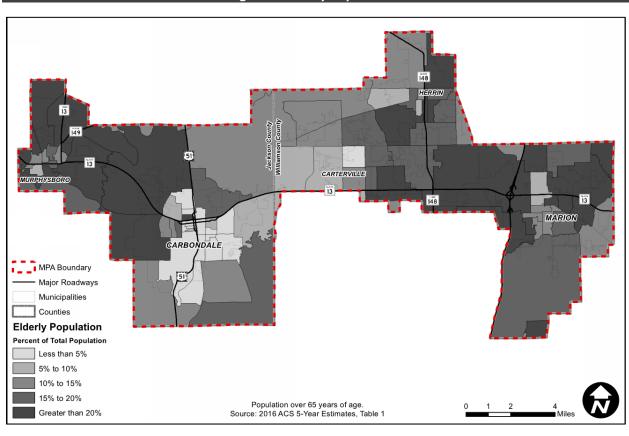




# 3.1.2 Elderly Populations

Elderly populations tend to require transit services at higher rates than younger people. Many people stop driving, or drive less frequently as they age. Elderly persons are more likely to need assistance with meeting medical appointments or day-to-day business and are common beneficiaries of transit services.

The map shows a clear distinction between urban and rural block groups, with much higher concentrations of elderly populations in rural areas. Since the year 2010, the percentage of elderly populations in rural areas has grown from 13.5% to approximately 18% in 2014, compared to only 14% in urban areas (NDSU Upper Great Plains Transportation Institute – Small Urban and Rural Transit Center, Rural Transit Fact Book 2017: 2-4). Though the percentage of elderly populations has risen steadily in both urban and rural areas, it has increased significantly faster in rural areas since 2010 (United States Census Bureau, Measuring America: Our Changing Landscape).



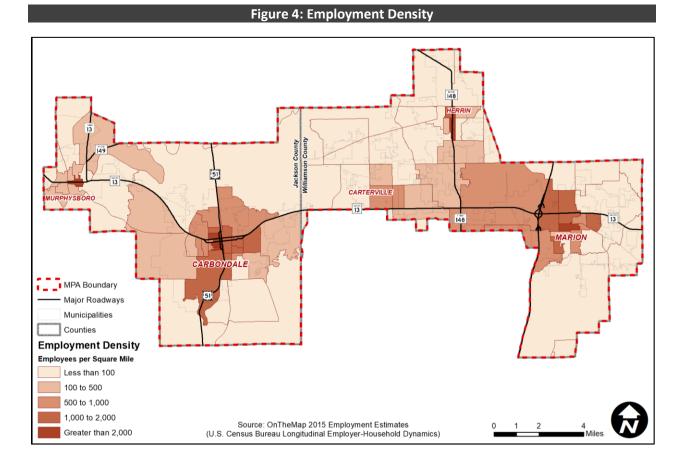
**Figure 3: Elderly Populations** 



# 3.1.3 Employment Density

Employment density is an important factor when evaluating transit needs. Generally, high-density employment is more supportive of transit usage than high residential densities. High employment densities are concentrated along the IL-13 corridor and within the historic downtown areas of Carbondale, Marion, Herrin and Murphysboro.

Large concentrations of retail employment on the east side of Carbondale and west side of Marion are particularly important targets for transit since retail jobs tend to be lower paying than jobs in other sectors. This lower pay translates into greater need for transportation options other than personal vehicles. There also are high employment densities in the SIU area on the south side of Carbondale. University employees are also more likely to be transit users as "choice riders" than other job sectors with similar wages.



11



# 3.1.4 Household Density

The highest densities of households are in the historic centers of Carbondale, Marion, Herrin, and Murphysboro. Carbondale and Murphysboro, in particular, have the largest concentrations of dense housing, even though the population of Murphysboro is only one third that of Carbondale.

In low-density areas such as Carterville, it is difficult to provide fixed route bus service which both operates a direct route while coming close enough to residences for people to walk to a bus stop. These are the areas that benefit most from on-call services. Compact housing in areas with traditional grid roadway networks are easier to serve because more people can reach the bus routes per mile of service. Additionally, pedestrian amenities (such as sidewalks, crosswalks, etc.) are much more prevalent in urban areas and pedestrian connectivity is generally much higher than in rural areas.

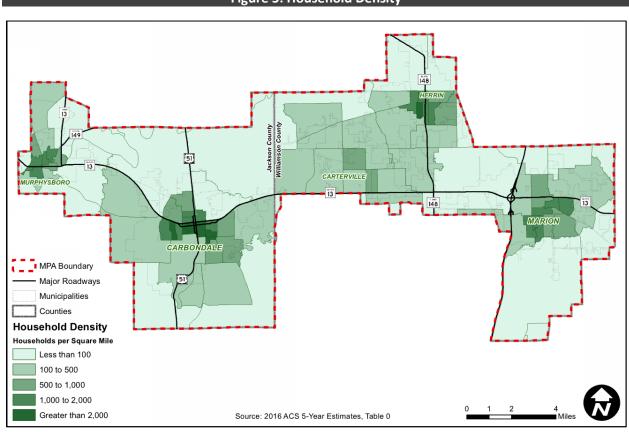


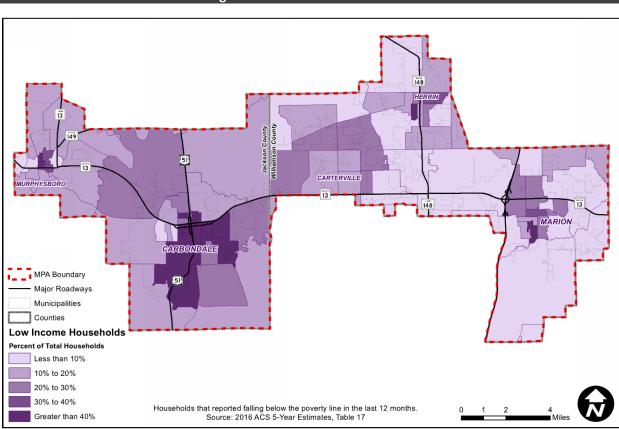
Figure 5: Household Density



#### 3.1.5 Low-Income Households

Low-income households are a particularly consistent source of transit ridership since their members often do not have access to personal vehicles or lack the income to operate them. Vehicles owned by lower-income households also tend to be older and less reliable. Residents in these households typically depend more upon alternative modes of travel to reach their destinations. Low-income households are households that reported being under the poverty line for at least a portion of the previous year before the ACS data were collected. The poverty line is set by the U.S. Census Bureau and is determined by the number of people in the household, number of dependent children under the age of 18, and if the householder is over or under 65 years of age. For example, the poverty line for a single person under 65 is \$12,725, but for a family of five with two parents, the poverty line is \$29,731.

The largest concentrations of poverty are around Carbondale, particularly on the south side of the city. This concentration is likely due to the number of SIU students in the area, who may have low incomes but also could be receiving additional income from their families. Other areas with concentrations of poverty are the rural block groups northwest of Carbondale, and within the historic centers of Herrin and Marion.



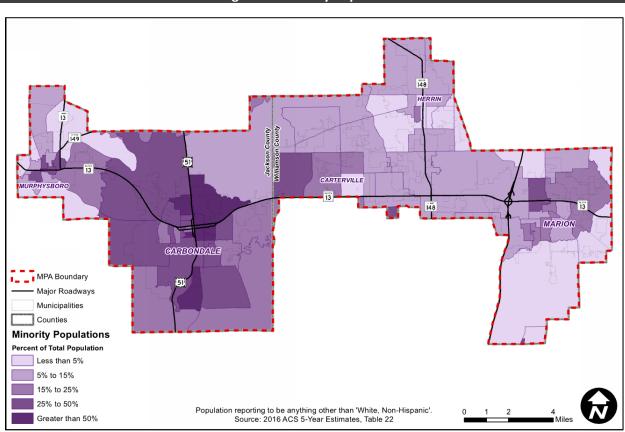
**Figure 6: Low Income Households** 



# 3.1.6 Minority Populations

Minority populations tend to utilize public transportation at significantly higher rates than others do. This may correlate with these households having comparatively lower incomes. There is a strong positive correlation between census block groups with higher minority populations and block groups with higher percentages of low-income households. Minority populations identified in the map are defined by any respondents that identified as something other than 'White, Non-Hispanic'.

The largest concentrations of minority populations are in the urban area of Carbondale and surrounding block groups, particularly within the city limits north of IL-13. There are also larger concentrations of minority populations on the north side of Marion and Carbondale.



**Figure 7: Minority Populations** 



# 3.1.7 Population Density

Population density (like household density) is an important factor in providing quality transit services. More densely populated areas can be served with more focused routes than areas where population is spread out. In addition to density, connectivity of the transportation network is also import for accessing transit routes.

Large concentrations of high-density population (greater than 5,000 persons per square mile) are observed in the historic centers of Carbondale, Marion, Herrin, and Murphysboro. Predictably, population densities are lower in the newer, suburban portions of the MPA and lower still in the rural areas. Household densities (see **Section 3.1.4**) are medium near urban cores. Population densities are more concentrated in the urban core. This implies that household sizes are greater in urban cores.

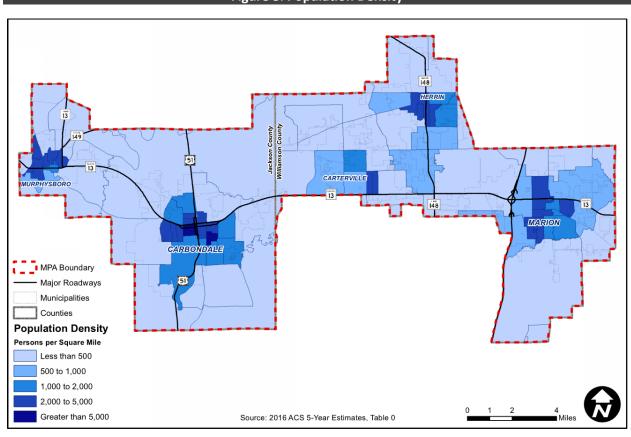


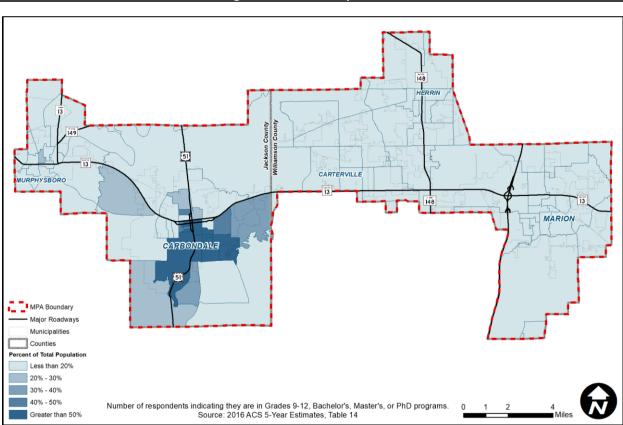
Figure 8: Population Density



# 3.1.8 Student Populations

Students, particularly university students, are much more likely to use public transportation than most other groups. Students are less likely to have access to personal vehicles. University students are often from outside of the area. During the 2017 SIMPO Transit Study, SIU staff indicated that many SIU students are from densely urbanized parts of the Chicago area, and are accustomed to using transit. High school students are an appropriate target demographic for transit because they are able to ride transit alone, but are less likely to have access to their own automobile.

Predictably, the largest concentration of students is around SIU in Carbondale. There are also concentrations of students, most likely high school students, throughout Carbondale.



**Figure 9: Student Populations** 



#### 3.1.9 Zero Vehicle Households

Households that do not own motor vehicles have limited accessibility options. Transit service provides these households additional mobility flexibility than relying only on rides from friends or family.

Concentrations of zero vehicle households exist in and around Carbondale, most likely due to the prevalence of university students. Saluki Express currently provides transit service from student housing to and from the university at no extra charge to students, making automobiles less necessary than for other populations in the MPA.

The historic center and eastern portion of Murphysboro also have large concentrations of zero vehicle households. In Williamson County, the historic center of Marion and the rural areas between Carterville and Herrin also have significant numbers of households without access to vehicles, though not as much as in Jackson County.

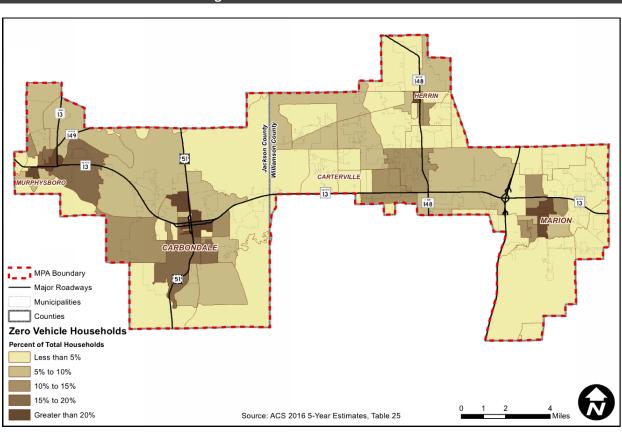


Figure 10: Zero Vehicle Households



#### 3.2 Stakeholders

The SIMPO Human Services Transportation Committee identified four stakeholders for telephone interviews. These stakeholders are not Committee members. They serve senior citizens, the disabled or those with special medical needs. Stakeholders identified gaps in service, and provided strategies to address the gaps. A short description of each stakeholder is provided below. A detailed description is attached as **Appendix A**. The interviews are summarized in **Section 3.2.5** below. A detailed summary of the interviews is in **Appendix B**.

# 3.2.1 Centerstone, Carbondale and Marion.

Centerstone is one of the nation's largest not-for-profit providers of community-based behavioral health care. It offers a full range of mental health services, substance abuse treatment and intellectual and developmental disabilities services in Florida, Illinois, Indiana, Kentucky and Tennessee. It is Commission on Accreditation of Rehabilitation Facilities (CARF) accredited in Illinois, Indiana and Tennessee. Centerstone, IL serves more than 16,000 children, adolescents, adults, seniors and their families annually in Franklin, Jackson, Madison and Williamson counties.

# 3.2.2 Williamson County Program on Aging.

Williamson County Program on Aging (WCPA) is a non-profit organization whose main purpose is to assist adults over 60 or older. WCPA offers a range of services to facilitate independent living and prevent premature institutionalization. Several of this organization's programs are funded in whole or part by the Title III of the Older Americans Act through the Egyptian Area Agency on Aging. Donations are accepted for all services but no one is denied service due to inability to pay/donate, except services that require fees. Transportation with wheel chair service is provided as a part of service and is managed by RIDES.

# 3.2.3 Center for Independent Living, Carbondale.

The Southern Illinois Center for Independent Living (SICIL) is a community-based, non-profit, and non-residential facility. It offers a variety of programs and services to people with disabilities and their families. SICIL's primary service area covers Franklin, Jackson, Perry, and Williamson counties. SICIL provides services regardless of age, gender, race, sexual preference, or disability. Independent Living services are provided without charge.

# 3.2.4 SIU School of Medicine.

SIU School of Medicine's Center for Rural Health and Social Service Development (CRHSSD) strengthens rural health infrastructure and promotes health opportunities in rural communities. CRHSSD at Southern Illinois University Carbondale (SIUC) conducts research, needs assessments, demonstration projects, program evaluations, and trainings; tests new models of health care delivery; and develops policy recommendations to improve the health of our rural communities. CRHSSD is works with many non-profit and public organizations. It provides grants to improve the reach of medical services in the region. The **Rural Medical Transportation Network** is one of the longest running flagship projects of CRHSSD. One of its programs (MedTrans, Inc.) is now operated by RIDES, which in coordination with IDOT to developed the program into the RIDES Plus Call Center in Energy. This call center is staffed with mobility professionals as a "one stop" point of contact for non-emergency medical transportation.



# 3.2.5 Stakeholder Interview Summary

### 3.2.5.1 Organizations and Its Programs

Most of the stakeholder organizations work with patients that largely rely on either public transportation or family and friends for making trips to medical and social facilities. Centerstone works with individuals with intellectual disabilities, those with long-term mental health, and/or substance abuse issues with wide-ranging programs. According to Centerstone, patients with history of substance abuse often cannot use public transportation and have to be accompanied by a family member. Patients with disabilities rely on transportation provided by either the Center or the public transportation providers. Center for Independent Living provides vocational and home-based services. It has its own transportation in Jackson County but relies on public transportation in Williamson County. They have a wheelchair accessible van and two small cars in Jackson County for transporting patients and employees.

SIU School of Medicine has been constantly working towards understanding limitations in health related transportation. It does work with a few mental health and disability patients that rely on public transportation or families and friends. SIU's Center for Rural Health initiated the pilot program called MedTrans, Inc., which has been now taken over by RIDES as the RIDES PLUS call center for scheduling medical trips and health appointments. The Center has also been working on a Community Paramedicine project that is aimed at reducing emergency hospital visits by providing constant paramedical assistance and scheduling regular checkups. Transportation is an integral part of this project.

Interviews were held with Centerstone, the Center for Independent Living, and the SIU School of Medicine. These interviews are summarized below. An interview could not be scheduled with the Williamson County Program on Aging.

#### 3.2.5.2 Transportation Issues

Most stakeholders cited inconvenience to patients and staff due to the very limited evening and weekend public transportation options. Another common issue that most of the stakeholders mentioned are the limited options for transporting patients from one county to another and from Illinois to St. Louis, Missouri, for doctor's appointments. Most organizations generally are satisfied with efforts by RIDES but feel JCMTD could provide better services in the county area outside of Carbondale. Stakeholders understand that lack of operating funds is an important issue for all operators. Organizations should continue to bring this to IDOT's notice. SIU's research with elderly patients needing regular check-ups suggests that because of difficulties in scheduling transportation, poor attitudes, complications, and cumbersome structure, patients often give up, miss appointments and get sicker. Lack of awareness and sensitivity amongst transit staff was also mentioned in the interviews.

Most of the organizations feel that many patients skip treatment and appointments due to transportation difficulties. SIU estimates this statistics to be as high as 40% of patients. Centerstone mostly struggles with transporting its mental health and substance abuse patients in both Jackson and Williamson Counties. It tries to work around the public transportation schedules in scheduling appointments but is not always able to do so. Centerstone is also very concerned regarding its sheltered workshops. Full implementation of the Workshops Without Walls Program in 2020 will require its close its workshops. It currently provides transportation to clients in partnership with RIDES. The shutting down of the program will require clients/workers to travel to multiple locations. It will be difficult to coordinate transportation.



#### 3.2.5.3 Steps to Address Issues

SIU's School of Medicine has been constantly working with transportation providers, patients and their healthcare providers, in identifying the gaps and deficiencies that exist in the transportation system. They have been doing this with the help of research projects, constant outreach, and education efforts. Center for Independent Living has also been a constant contributor in these research projects. All stakeholders have been struggling with availability of funds and want IDOT to acknowledge the gaps that exist in the human services transportation system in the Southern Illinois region.

#### 3.2.5.4 Additional Input

Weekend and evening services seem to be important area of concern that most stakeholders feel should be addressed as soon as possible. Dennis Presley from SIU's School of Medicine, strongly feels that IDOT needs to set strict standards for measuring performance and services of transit agencies.

#### 3.2.5.5 RIDES Input

Lochmueller Group was informed by Rides Mass Transit District, that it is aware of the Workshop Without Walls program and is prepared to provide transportation services as needed. It believes that this will require more planning and scheduling on its part but is confident that it will be able to schedule the necessary transportation. RIDES presently serves many of the work locations to which Workshops Without Walls participants will travel.

# 3.3 Regional Committee Members

SIMPO formed a Human Services Transportation Committee. The Committee consist of operators and/or major stakeholders, with SIMPO serving as the coordinator. As of now, the Committee includes three agencies who use Section 5310 funding to provide, schedule, or use transportation programs. A fourth agency (South Central Illinois Regional Planning & Development Commission) also is a committee member. It oversees the Regional Human Services Transportation Plan for an 11-county area which includes both Jackson and Williamson counties. The Committee can be expanded as appropriate. Following is a brief description of the four agencies. Their committee activities are described in detail in Section 5.

### 3.3.1 Rides Mass Transit District (RIDES)

Rides Mass Transit District is the public transportation provider for the Williamson County. RIDES also provides transit service for 17 other counties within Southeastern Illinois. It also provides service for Williamson County residents to travel destinations in Carbondale (Jackson County). It is a direct recipient of Federal Section 5307 funding. With Deviated Fixed Routes, it also provides door-to-door service. Drivers will assist riders on case-by-case basis. Same day service requests with at least one hour notice can be accommodated. RIDES can schedule trips which are requested at least 24 hours in advance more effectively. Such trips also can be scheduled to more closely match riders' desired travel times.

RIDES presently operates some services evenings and weekends. It provides daily service to urban areas such as St. Louis, Paducah and Evansville. The lack of information about these services is a gap in information which needs to be addressed.

# 3.3.2 Jackson County Mass Transit District (JCMTD)

Jackson County Mass Transit District is a municipal corporation created by the Jackson County Board in 1992 and has been in operation since 2002. JCMTD is a general public mass transportation system that



provides affordable transportation to the public, including elderly and the disabled, with Deviated Fixed Routes and on a demand-response basis.

# 3.3.3 Senior Adult Services (SAS)

Senior Adult Services is a non-profit organization providing senior services, including transportation, to residents of Jackson County. SAS provides services and activities which support independence and enhance quality of life for Jackson County residents that are over 60 years old. Their services are not limited to providing transportation but extend to adult day-care services, meal delivery as well as providing care-takers.

# 3.3.4 South Central Illinois Regional Planning & Development Commission (SCIRPDC):

The South Central Illinois Regional Planning & Development Commission (SCIRPDC) was established under the Illinois Planning Act. The regional organization functions at the pleasure of the local governments within its rural five-county service jurisdiction (Effingham, Fayette, Marion, Clay and Jasper) and traditionally provided the area's public and private sector assistance with economic and planning research, grant and financial services as well as Human Services Transportation Planning.

# 3.4 Survey Results

An online survey was provided to the public from March 20 to April 20, 2018. The survey was designed to receive input on transportation needs of low-income, disabled and senior adult individuals. The web link for the survey was shared with all the committee members and service providers and was shared by both groups on their respective social media platforms. The survey was taken by a total of 41 respondents out of which 26 were in the demographic group that qualified for taking the survey. Complete survey results are attached as **Appendix C**. A detailed summary is provided in the following sub-sections. The summary of the results help in comparing transportation difficulties for the three mentioned targeted classes. Comparable, though not equal, responses were received from all three classes. Responses from all three demographic classes are grouped together because of significant overlap between classes (about half of respondents identified themselves as being in multiple classes). **Figure 11** shows percentages of respondents identifying themselves in each class.

#### 3.4.1 Survey Respondents – Demographics

Out of the total respondents more than half were senior adults (aged 60 and older). Almost 18% were between the age of 50 and 59 and 12% each for the age groups 22 to 34 and 35 to 49. There were no respondents under the age of 21. Almost 60% of respondents were female, and 18% male, the remaining preferred not to answer. 41% out of the total respondents said they do not possess a valid driver's license. Almost 30% of the respondents preferred not to disclose their race or ethnicity. The 70% who did all reported themselves as white.



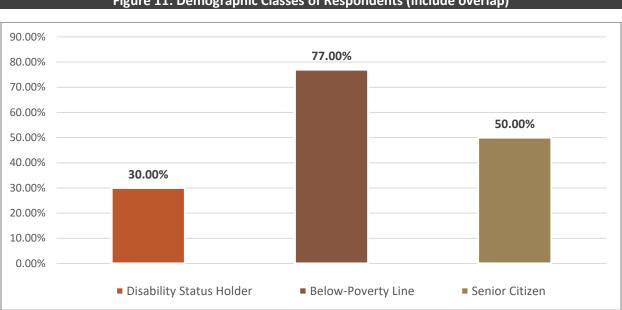


Figure 11: Demographic Classes of Respondents (include overlap)

The highest percentage of respondents were retired (29%), followed by full-time employed (24%) and not employed (18%). Only around 12% in total were either part-time employed or were students. The remaining 18% preferred not to disclose their employment status. Almost all the respondents reported household incomes of less than \$35,000. Over three-quarters (77%) reported to have a household income below the average poverty line of \$25,000. Almost half of the residents reported living alone in a single person household. 35% respondents said they live in a two-person household and 6% in a three to four person household. Another 6% preferred not to answer.

Out of the total respondents that were eligible to take the survey, only 30% said they qualify for disability status. Almost 25% respondents preferred not to disclose their disability status. Of the respondents who reported themselves as disabled, 80% said they have permanent disability. The rest chose not to answer.

# 3.4.2 Trip Types

Respondents were separately asked if they had difficulty making four types of trips (work, school, medical or social services, and shopping and dining). Results are summarized below by trip type.

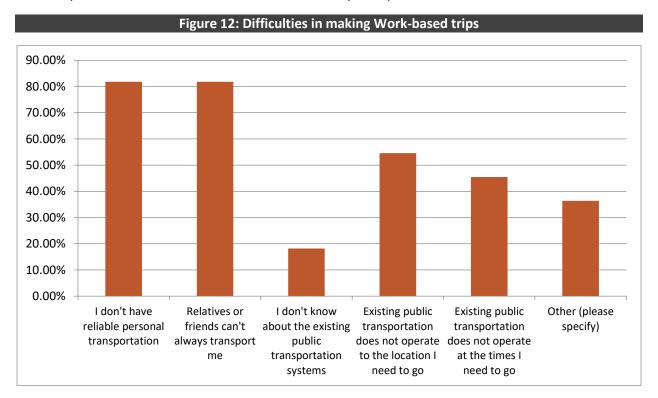
#### *3.4.2.1 Work Trips*

Almost fifty percent of the respondents face difficulties in getting to work. Out of this 50%, 28% need to make work trips on a daily basis and 46% make work trips several times per week. Nearly all respondents (90%) said they make work trips weekday mornings and approximate 75% respondents make work trips during weekday afternoon (36%) and weekday evenings (36%). Around 37% respondents said they make work trips over weekends, more travel on Saturday than Sunday.

Ninety percent of the respondents said that they do not have reliable personal transportation and/or have to rely on friends and relatives who are not always available to help them make the trip. More than half of the respondents said that existing public transportation does not serve their work trip locations. A large percentage also said that public transportation does not operate during their desired work trip hours. Almost one-fifth (20%) of the respondents said that they are unaware of the public transportation services available in their area. A few respondents made additional comments that services are unreliable due to



pick up times changing without prior notice, which causes excessive delays to their trips. One respondent also complained that there is no affordable cross-county transportation service.



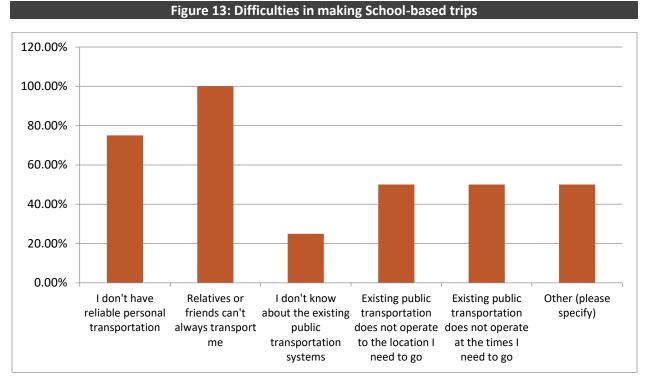
#### 3.4.2.2 School Trips

Very few respondents (only 4) reported difficulty with making school trips. This probably reflects the low percentage of respondents who are students. Out of those that reported difficulty in making school trips, 75% said they make school trips several times per week and 25% said they make daily trips to school. All respondents reported making school trips both, weekday mornings and afternoons with additional weekday evening trips. There were no weekend trips reported.

Almost all respondents said they relied on relatives or friends for transportation who cannot always be available. Half of the respondents said that existing transportation services do not operate in and around their school trip locations or do not operate at the desired time.

Comments were very similar to those received for work trips. These include existing services being unreliable and frequent changes to the schedule without prior notice.



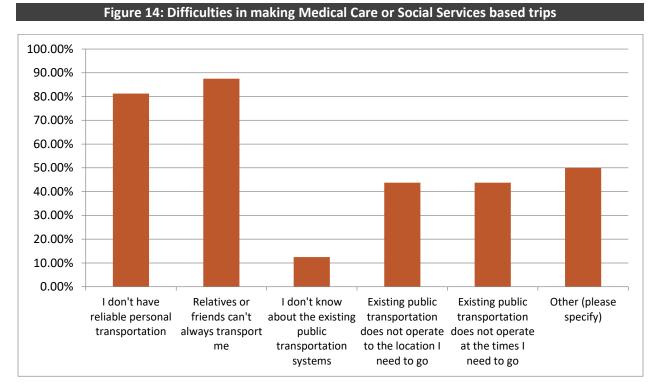


# 3.4.2.3 Medical Care or Social Service Trips

Highest percentage (77 %) of respondents reported difficulty in making medical or social service based trips. Most of the respondents said they either make these trips several times per week (38%) or a few times per month (50%). Almost all respondents said they make these trips weekday mornings and afternoons (approximately 90%), with a few making these trips weekday evenings as well. No weekend trips were reported.

Almost 80% of respondents said they do not have reliable personal transportation and 88% said they rely on relatives and friends, who cannot always be available, to make medical and social service trips. Almost half of the respondents complained of transportation services not operating in the areas of their trip locations and/or services not being available at the desired time. Many respondents commented about the unreliability of the existing system. Respondents also mentioned long wait times for both pick-up and drop-off service leading to delays in arriving for the scheduled appointments. Change in schedule without adequate prior notice was also mentioned with gap in completing inter-state appointments.





# 3.4.2.4 Shopping, Dining and Entertainment Trips

Almost 43% of the respondents reported difficulties with completing shopping, dining and entertainment trips. Most respondents said they either make these trips once per week (33%) or a few times per month (44%), with just a very few saying they make these trips daily or several times per week. Trip times are divided uniformly throughout the week, highest being weekday mornings (66%) and the weekends, Saturday being at 66% and Sunday at 55%.

Almost 78% respondents said they do not have reliable personal transportation and 89% said they rely on friends and relatives who cannot always be available. A large percentage of respondents (67%) said that the existing public transportation either does not operate in and around their trip locations or does not operate at the desired time. Respondents also complained that existing services are unreliable, with long waiting times and delays.



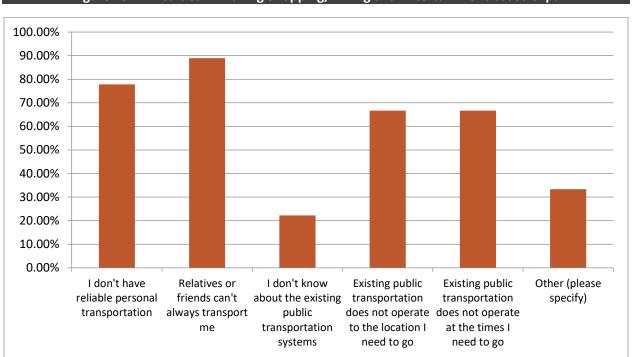


Figure 15: Difficulties in making Shopping, Dining and Entertainment based trips

# 3.4.2.5 Other Trips

Along with the four specific type of trips mentioned above, respondents were also asked if there were other kinds of trips that they face difficulties in completing. This was asked as an open-ended question. The following were the most common responses:

- Evening and Weekend trips
- Cross-county trips between Williamson and Jackson Counties
- Getting to the airport in St. Louis
- Inter-state trips (appointments in Missouri, Kentucky and Indiana)
- Emergency and short-notice trips
- Door-to-door assistance

Respondents who added additional trips said they mostly only need these a few times a month (29%) or very infrequently (43%). There were very few who said they need it several times a week or at least once a week. The time and day of the week was almost uniformly divided between mornings, evenings, weekdays, and weekends, suggesting they need these trips throughout the week. Most respondents said they do not have reliable personal transportation and/or depend on friends and relatives for transportation. 71% of the respondents said existing public transportation does not operate at the desired time and 43% said it does not cover the location area of the trips to be made.

# 3.4.3 Major Destinations:

To identify major trip generators, respondents were given a list of schools, medical and social facilities, shopping and dining centers, as well as residential locations, to choose from, indicating frequency of trips to given locations. These locations/trip generators were identified with the help of the Region 11 HSTP,



5

SIMPO Transit Study and committee members. **Figure 16** shows all the locations respondents identified as frequent trip generators. The trip generators are divided in three categories:

- Low Demand Locations that were only chosen by a single respondent
- Medium Demand Locations chosen by 2 to 4 respondents
- High Demand Locations chosen by 5 or more respondents

The initially identified trip generators that were not selected even once are omitted from the map but are listed in the table following the map.

Figure 16: Major Trip Generators

Major Trip Generators

Major Roadways
Other Streets
Counties

Other

S no.Identified Trip GeneratorsFrequency/Demand1Aisin Manufacturing (1100 Redco Dr, Marion)02Aldi (1305 N Russell St, Marion)2 to 43AMC Centre 8 (3107 Civic Circle Blvd, Marion)2 to 44Amtrak Carbondale (401 S Illinois Ave, Carbondale)5 and Above

Archway, Inc. (2751 W Main St, Carbondale)

Table 1: Major Trip Generators as identified by the Online Survey respondents



6	Blue Cross/Blue Shield (5001 Meadowland Pkwy, Marion)	0
7	Borowiak's IGA (914 W Main St, Marion)	1
8	Carbondale Memorial Hospital (405 W Jackson St, Carbondale)	5 and Above
9	Carbondale Township (217 E Main St, Carbondale)	2 to 4
10	Cedar Court Clinic (1340 N Cedar Ct, Carbondale)	2 to 4
11	Center for Medical Arts (2601 W Main St, Carbondale)	5 and Above
12	Centerstone East (2311 S Illinois Ave, Carbondale)	2 to 4
13	Centerstone West (200 N Emerald Ln, Carbondale)	2 to 4
14	Child Care Resource & Referral (700 Logan College Rd, Carterville)	1
15	DCI Biologicals (301 W Main St, Carbondale)	0
16	Department of Human Services (342 North St, Murphysboro)	2 to 4
17	DHS Family Community Resource Center Marion (1107 W DeYoung St, Marion)	5 and Above
18	DHS Family Community Resource Center Murphysboro (342 North St, Murphysboro)	2 to 4
19	Franklin-Williamson Bi-County Health Dept. (8160 Express Dr, Marion)	2 to 4
19	John A. Logan (700 Logan College Dr, Carterville)	5 and Above
20	Fresenius Kidney Care (1425 E Main St, Carbondale)	1
21	Heartland Regional Medical Center (3333 W DeYoung St, Marion)	2 to 4
22	Herrin Hospital (201 S 14th St, Herrin)	5 and Above
23	Home Depot (3200 Banterra Dr, Marion)	1
24	Illinois Star Center Mall (3000 W DeYoung St, Marion)	2 to 4
25	Integrity Healthcare of Carbondale (120 N Tower Rd, Carbondale)	1
26	Jackson County Courthouse (1001 Walnut St, Murphysboro)	5 and Above
27	Jackson County Health Dept. (415 Health Department Rd, Murphysboro)	5 and Above
28	Jackson County Probation Office (215 N 14th St, Murphysboro)	2 to 4
30	Kroger Marion (1704 W DeYoung St, Marion)	5 and Above
31	Manor Court of Liberty Village (2950 Westridge Pl, Carbondale)	2 to 4
32	Marion Cultural & Civic Center (800 Tower Square Plaza, Marion)	2 to 4
33	Marion Eye Center (1001 N Beadle Dr, Carbondale)	5 and Above
34	Marion VA Medical Center (2401 W Main St, Marion)	2 to 4
35	Maurices (2406 Williamson County Pkwy, Marion)	2 to 4
36	Melise's Boutique (928 W Main St, Marion)	0
37	Menards (2500 Blue Heron Dr, Marion)	1
38	Murphysboro DRS Office (342 North St, Murphysboro)	2 to 4
39	Murphysboro Food Pantry (906 N 14th St, Murphysboro)	2 to 4
40	Pepsi/MidAmerica (2605 W Main St, Marion)	0
41	Prairie Living at Chautauqua (955 Villa Ct, Carbondale)	2 to 4
42	Rural King Supply (1301 Enterprise Way, Marion)	1
43	Sam's Club (2709 Walton Way, Marion)	2 to 4
44	Save-A-Lot (1124 N Carbon St, Marion)	2 to 4



45	Schnucks (915 W Main St, Carbondale)	5 and Above
46	Shawnee Health Care (400 S Lewis Ln, Carbondale) OR Shawnee Health Care, Same Day – 404 South Lewis Lane, Carbondale OR Shawnee Health Care, Behavioral Health – 404 South Lewis Lane, Carbondale	5 and Above
47	Shawnee Health Care, OB/GYN (101 S Wall St, Carbondale)	2 to 4
48	Shawnee Health Care – 1006 South Division Street, Carterville	1
49	Shawnee Health Care – 1506 Sioux Drive, Marion	1
50	Shawnee Health Care – #7 South Hospital Drive, Murphysboro	1
51	Shepherd's Closet (704 W Boyton St, Marion)	1
52	Small's Food Store (1005 E Main St, Marion)	0
53	Southern Illinois Healthcare (1101 Diann Ln, Carbondale)	2 to 4
54	Southern Illinois Regional Social Services (604 E College St, Carbondale)	2 to 4
55	Southern Illinois University (1263 Lincoln Dr, Carbondale)	2 to 4
56	St. Joseph's Hospital (2 Hospital Dr, Murphysboro)	2 to 4
57	The H Group BBT, Inc Marion Campus (1307 W Main St, Marion)	2 to 4
58	The H Group BBT, Inc ICH (3111 Williamson County Pkwy, Marion)	2 to 4
59	University Mall (1237 E Main St, Carbondale) OR University Place Shopping Center (1300 E Main St, Carbondale)	5 and Above
60	Wal-Mart Carbondale (1450 E Main St, Carbondale)	5 and Above
61	Wal-Mart Marion (2802 Outer Dr, Marion)	5 and Above
62	Wal-Mart Murphysboro (6495 Country Club Dr, Murphysboro)	2 to 4
63	Western Egyptian Electric Economic (1820 N Market St, Murphysboro)	2 to 4
64	Williamson County Courthouse (200 W Jefferson St, Marion)	5 and Above

# 3.4.4 Conclusion

The majority of respondents (77%) have household incomes below the poverty line (77%). Half identify themselves as senior citizens. Slightly less than a third (30%) identify themselves as disabled. Most depend on relatives and friends for transportation. A majority of respondents find it difficult to use public transportation. A large majority of people find it difficult to travel at the time they need/desire. Approximately 20% respondents reported they are unaware of public transportation options in their area.

Most open-ended comments were complaints about on-demand transportation services either regarding schedule changes with little or no advance notice, as well as long waiting times. A number of respondents complained about the lack of affordable public transportation for inter-county and inter-state travel, especially for medical trips.



# 4 Existing Inventory

Most of the information on the existing inventory for each provider was taken from Region 11 (2017) Plan. Some information (updated vehicle rosters, changes in fares, service hours and annual trips for the past three years) were collected through a questionnaire.

# 4.1 Existing Services

# 4.1.1 Jackson County Mass Transit District

#### Address:

602 East College Street Carbondale, IL. 62901

#### **Provider Type:**

Public Mass Transportation Provider

#### **Vehicles:**

Raised Roof/Minivans - 4

Light Duty - 8 Medium Duty - 7

Total Fleet - 19

# **Rider Demographics:**

Riders range in age from 1 month +. Income levels vary;

About 35% of our riders indicate they have some sort of disability.

#### Service Area:

**Jackson County** 

#### Service Level:

Point-deviated routes, deviated routes, door-to-door

# **Advance Notice Required:**

1 hour within Carbondale,

24 hour outside Carbondale

#### **Basic Fare:**

General Public (age 16-59): \$2.00

Student (age 16 and over w/ proof of enrollment): \$1.0

Child (age 6-15): \$1.00

Children 5 years of age or younger: FREE (must be with paying adult)

Senior (age 60 and older): \$1.00 Personal Attendants: FREE

Monthly Pass: \$25.00 unlimited rides

# **Service Hours:**

7:00am to 5:30pm, Monday thru Friday

# **Route Scheduling/Dispatch Method:**

**ITS System and Radio** 

# **Communication System:**

Annual Trips	Jul 14 - Jun 15	Jul 15 - Jun 16	Jul 16 - Jun 17
1. Unlinked Trips	36,759	53,535	77,395
2. Vehicle Hours	23,336	28,272	32,450
3. Vehicle Miles	329,809	375,728	458,045
4. Passenger Miles	313,319	356,941	435,143



#### 4.1.2 Rides Mass Transit District

#### Address:

30 Veterans Dr. Harrisburg, IL 62946

#### **Provider Type:**

**Public Mass Transportation Provider** 

# Vehicles:

Raised Roof or Minivans - 7

Medium Duty - 79

Super Medium - 48

Heavy Duty - 4

Total Fleet - 138

# **Rider Demographics:**

RIDES's ridership reflects the census data, as well as a high number of senior and disabled riders, due to the high level of coordination between RIDES and the Human Service providers.

#### Service Area:

Jackson & Williamson Co.

#### **Service Level:**

Deviated Fixed Route/Door to Door/Door through Door/Drivers permitted to assist with limited number of packages

# **Advance Notice Required:**

24 hour advance notice suggested

#### **Basic Fare:**

# **In-County Existing Route Service:**

Adult-\$2.00 (ages 11-59)

Children Ages 6 - 10 - 75 cents(must be accompanied by an adult)

Children Ages 0-5-Free (must be accompanied by an adult)

# **Discount Tickets Book of 10 tickets:**

Adults-\$10.00

60+ &\or Disabled-\$7.50

Children Ages 6 - 10 - \$3.75

# 30 Day Transit Passes:

Under 60 - \$25.00

60+ &\or Disabled - \$15.00

#### **Service Hours:**

5 AM to 12 AM 7 days a week

Inter-City bus routes available

Scheduling & Dispatch hours-6am-8pm Monday-Saturday

# **Route Scheduling/Dispatch Method:**

CTS software with radio dispatching. Drivers manifest

# **Communication System:**

Radio and Cell phone

Annual Trips	Jul 14 - Jun 15	Jul 15 - Jun 16	Jul 16 - Jun 17
1. Unlinked Trips	150,064	140,124	143,551
2. Vehicle Hours	38,998	36,818	32,764
3. Vehicle Miles	602,879	541,119	524,733
4. Passenger Miles	2,310,555	2,276,012	1,998,761



# 4.1.3 Senior Adult Services

Address:

409 N Springer St. Carbondale, IL 62901

**Provider Type:** 

Provides transportation for seniors 60 and over

Vehicles:

Minivan-3

**Rider Demographics:** 

Services available to anyone 60 years or older.

No Income eligibility but used mostly by low-income frail seniors

**Service Area:** 

**Jackson County** 

Service Level:

Door to Door

**Advance Notice Required:** 

24 hour advance notice

**Basic Fare:** 

50 cents suggested donation

**Service Hours:** 

7:30am - 4pm Monday thru Friday

**Route Scheduling/Dispatch Method:** 

by spreadsheet

**Communication System:** 

2 way radio

Annual Trips	Jul 14 - Jun 15	Jul 15 - Jun 16	Jul 16 - Jun 17
1. Unlinked Trips	10,705	9,760	9,736
2. Vehicle Hours	N/A	N/A	N/A
3. Vehicle Miles	34,409	32,733	39,091
4. Passenger Miles	34,323	32,651	38,993



#### 4.1.4 South Central Transit

This information is for the entire South Central Transit system. Its service area includes Washington, Marion, Jefferson, Clinton, Franklin and Perry counties. As described in **Section 2.3**, it provides approximately one trip weekly into Carbondale for medical services for disabled persons. It also operates one regular route (Chestnut Route) from DuQuion to the Carbondale Amtrak Station and SIU Campus. This fixed route primarily serves University employees, and provides about 1,500 unlinked trips annually. These are the only services it provides within the SIMPO area.

#### Address:

1616 E. McCord Street, P.O. Drawer N Centralia, IL 62801

# **Provider Type:**

Public Transportation Provider

#### Vehicles:

Raised Roof or Minivans-26

Light Duty-24 Medium Duty-48 Super Medium-51

Total Fleet-149

# **Rider Demographics:**

#### **Service Area:**

Jackson and Williamson Co. (Service Extensions)

# **Service Level:**

Curb to Curb/Door to Door/Drivers permitted to assist with limited number of packages, Demand Response, subscription, deviated fixed route, intercity, same day service

# **Advance Notice Required:**

24 hour advance notice

#### **Basic Fare:**

Adults - \$1.50 Seniors - \$0.50

Children Ages 5-17 - \$1.50

Children Ages 0-4 w\adult - Free

Non-expiring money cards can be purchased in any denomination up to \$50

#### **Service Hours:**

Varies between service areas:

Most areas: 5:00 AM to 7:00 PM Monday-Friday Some areas: 7:00 AM to 7:00 PM Monday-Friday Shuttles: 5:00 AM to Midnight 7 days per week \*All service hours are Monday-Friday\*

# **Route Scheduling/Dispatch Method:**

Automated scheduling\dispatching software: Adept by StrataGen Systems

# **Communication System:**

Mobile data terminals and cell phones

Annual Trips 540,597



# 4.1.5 5310 Consolidated Vehicle Procurement Program

The need for additional and replacement vehicles was cited at the SIMPO committee meeting (see **Section 5**). With the release of the Region 11 HSTP, all Section 5310 applicants will now submit their applications to Illinois Department of Transportation's Office of Intermodal Project Implementation (IDOT\OIPI), copying the local HSTP office for initial review. All applicants will be given a coordination score by the HSTP Coordinator. This score will be the deciding factor as to whether the application moves forward in the IDOT\OIPI scoring process. This score will be based on active participation in the local service coordination process and that the funding request of the applicant meets the service needs and goals as identified in the locally derived HSTP Plan. Participation in the SIMPO HSTP will be a requirement for agencies in the SIMPO region submitting applications for Vehicle Procurement.

#### 4.1.6 Inter-City-Bus

With the Region 11 Plan release in February 2018, the SIMPO region can also pursue Section 5311 funding for inter-city bus service for passenger transportation in non-urbanized areas. This may include coordination of programs and services as well as developing service-related infrastructure.

#### 4.1.7 RIDES One Call Center

MedTrans, Inc. was a pilot project started by SIU to establish a free-standing One Call Center serving the southern Illinois region. These responsibilities were assumed by RIDES in the SIMPO region for scheduling trips for both RIDES and JCMTD. Near the conclusion of this study, RIDES indicated that the costs of the One Call Center would be accommodated in its regular operating budget.



# 5 Committee Participation

# 5.1 First Committee Meeting

The SIMPO Human Services Transportation Committee plays an integral role throughout the process of the study and the Plan formulation. After SIMPO formed the Committee, Lochmueller conducted the first committee meeting on January 9, 2018.

The meeting was held at the SIMPO office in Marion and was attended by:

- Ted J Gutierrez, Jackson County Mass Transit District (JCMTD)
- Bill Jung, RIDES MTD
- Terri Finn, South Central Illinois RPC
- Joe Zdankiewicz, Southern Illinois Metropolitan Planning Organization
- Cary M. Minnis, Greater Egypt Regional Planning and Development Commission
- Dustin Riechmann, Lochmueller Group
- Michael Grovak, Lochmueller Group
- Saumya Jain, Lochmueller Group

Senior Adult Services of Carbondale is also a committee member. They were unable to participate in the meeting, but they did complete the self-assessment tool. Its input was included in the committee discussions.

The meeting agenda followed the outline in the Community Transportation Association of America Framework for Action. This guidance also included a Facilitator's Guide for conducting this meeting, as well as a Self Assessment Tool. Participants were provided with the Self Assessment Tool in advance of the meeting. Everyone's responses were tabulated and presented in the meeting. The agenda of the meeting included discussions on:

- Individual Self-Assessments
- Needs Assessment and Gap Analysis
- Developing Priorities
- Action Plan for Identified Priorities

Dustin Riechmann (DR), Lochmueller Group's project manager, opened the meeting by welcoming all the participants and giving a short introduction to Lochmueller Group, the project, relationship between SIMPO region and Lochmueller Group, and the purpose of the meeting. After the introductions, Michael Grovak of Lochmueller Group led the discussions. The greatest portion of the meeting consisted of the review of these self-assessments. This review of the self-assessments also identified regional priorities as well as identifying elements for the action plan. A summary of the results of the Self-Assessment Tool is given below and the full survey results are in the **Appendix D**. The detailed meeting summary also is included in **Appendix D**.

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#### 5.1.1 Review of Self-Assessments:

The results of the assessment were analyzed and summarized in a Power Point Presentation for discussion. The assessment tool addresses five main sections. Each was discussed in detail to understand each member organization's view. A summary of the discussions under the five sections is provided below:

#### Making Things Happen by Working Together

Agency representatives agreed that all of their agencies work well together. However, they did feel that there can be significant improvements in the coordination between the major service providers (all who were present in the room) and other small scale/specific needs providers in the region. They cited coordination with other agencies, not just in the urban parts of the region but also in rural areas. All participants saw a need for guidelines and common platform for coordinating service providers in the region.

Medicaid and related travel arrangements were a common concern. Service providers, especially RIDES and JCMTD, face issues with coordinating trips for patients if there is no direct route to the hospital/medical professional from the patient's residence. Medicaid reimbursement does not allow for multiple service providers for a single trip. A service provider can bill for a trip only if the patient was picked up from his/her residence and was directly taken to the medical facility. In cases where two different entities provide service (RIDES and JCMTD was the example cited); the process of billing the mileage for multiple operators is ill-defined.

Discussing coordination issues at the monthly MPO meetings will help bring these matters to the right authorities' attention and will assist in figuring out funding needs and sources.

#### Taking Stock of Community Needs and Moving Forward

The major issues/gaps identified were all related to better coordination amongst agencies in the region as well as (especially) providing users with a common platform for booking rides. The consensus was that the current Regional Plan lacks proper documentation of all services in the area and that proper documentation of all available providers is needed, to assess gaps in the service network.

#### Putting Customers First

At present, different agencies have various means for scheduling trips and taking comments and feedback from customers. However, there is no common tracking for all service providers. RIDES One Call-Center schedules RIDES and JCTMD trips but needs future funding to continue. RIDES also has a strong PR presence and conducts county-based listening sessions and online surveys to take feedback. RPC has an active Facebook presence and provides occasional post blogs. Ted Gutierrez (TG) from JCMTD showed participants a smart phone app which is still under development.

#### Adapting Funding for Greater Mobility

There was little discussion on this point. The key points under this element are the need for tracking financial data across programs and the need for a seamless billing system across providers.

#### Moving People Efficiently:

All the agency representatives agreed that efforts are needed to improve service and expand clientele. Regular users are well informed of the existing services and scheduling methods. The providers felt that scheduling service and knowledge of existing routes is an issue with residents who rarely use the services.



Non-users often are not aware of the regional call center. There is no "one" website or app for travel information and trip planning.

Jackson MTD has an Android/Apple app with the basic contact information, fares, and service details. The app cannot be used to book a trip at present; adding these features requires added funding. The consensus is that a common website/app, including all service providers, would be an efficient solution to the existing coordination as well as customer service issues.

#### 6 Trip Generators

Shown in the following maps and their respective tables are major trip generators identified by the transit operators in the MPA. The ID columns in the following tables correspond to the ID numbers shown on the associated maps.

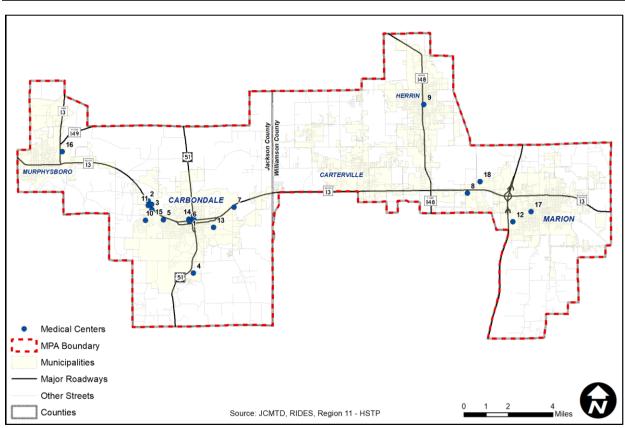


Figure 17: Major Trip Generators – Medical Centers

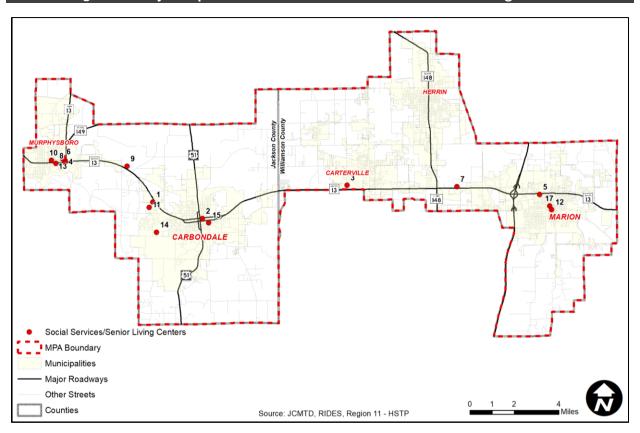
Table 2: Major Trip Generators – Medical Centers

ID	Name	Address	JCMTD/ SAS	RIDES
1	Carbondale Memorial Hospital	405 W Jackson St, Carbondale IL, 62901	Х	
2	Cedar Court Clinic	1340 N Cedar Ct, Carbondale IL 62901	Х	
3	Center for Medical Arts	2601 W Main St, Carbondale IL 62901	Х	



4	Centerstone East	2311 S Illinois Ave, Carbondale IL 62903	Χ	
5	Centerstone West	one West 200 N Emerald Ln, Carbondale IL 62901		
6	DCI Biologicals	301 W Main Street, Carbondale, IL 62901	Χ	
7	Fresenius Kidney Care (Dialysis)	1425 E Main St, Carbondale IL 62901	Χ	
8	Heartland Regional Medical Center	3333 W DeYoung St. Marion, IL 62959		Х
9	Herrin Hospital	201 S 14th St. Herrin, IL 62948		Х
10	Integrity Healthcare of Carbondale	120 North Tower Rd, Carbondale IL 62901	Χ	
11	Marion Eye Center	1001 N Beadle Dr, Carbondale IL 62901	Χ	
12	Marion VA Medical Center	2401 W Main St. Marion, IL 62959		Χ
13	Shawnee Health Care	400 S Lewis Ln, Carbondale IL 62901	Χ	
14	Shawnee Women's Health Center	202 W Jackson St, Carbondale IL 62901	Χ	
15	Southern Illinois Healthcare	1101 Diann Lane, Carbondale IL 62901	Χ	
16	St. Joseph's Hospital	2 Hospital Drive, Murphysboro IL 62966	Χ	
17	The H Group BBT, Inc Marion Campus	1307 W. Main Marion, IL 62959		х
18	The H Group BBT, IncICH	3111 Williamson County Parkway Marion, IL 62959		Х

Figure 18: Major Trip Generators – Social Services and Senior Living Centers





### Table 3: Major Trip Generators – Social Services and Senior Living Centers

ID	Name	Address	JCMTD/ SAS	RIDES
1	Archway, Inc. (Child and Family Connections #24)	2751 W Main St, PO Box 1180 Carbondale, IL 62901	Х	
2	Carbondale Township	217 E Main St, Carbondale IL 62901	Х	
3	Child Care Resource & Referral	700 Logan College Road Carterville, IL 62918		Χ
4	Department of Human Services	342 North St, Murphysboro IL 62966	Х	
5	DHS Family Comm Resource Center	1107 W DeYoung St. Marion, IL 62959		Х
6	DHS Family Community Resource Center	342 North St Murphysboro, IL 62966	Х	
7	Franklin-Williamson Bi-County Health Department	8160 Express Dr. Marion, II 62959		Х
8	Jackson County Court House	1001 Walnut St, Murphysboro IL 62966	Х	
9	Jackson County Health Department	415 Health Department Rd, Murphysboro IL 62966	Х	
10	Jackson County Probation Office	215 N 14th St, Murphysboro IL 62966	Х	
11	Manor Court of Liberty Village	2950 Westridge Pl, Carbondale, IL 62901	Х	
12	Marion Cultural and Civic Center	800 Tower Square Plaza, Marion, IL 62959	Х	
13	Murphysboro DRS Office	342 North St, Suite D Murphysboro, IL 62966	Х	
14	Prairie Living at Chautauqua	955 Villa Ct, Carbondale, IL 62901	Х	
15	Southern Illinois Regional Social Services	604 E College St Carbondale, IL 62901	Х	
16	Western Egyptian Electric Economic	1820 N Market St, Murphysboro IL 62966	Х	
17	Williamson County Courthouse	200 West Jefferson St., Marion, IL 62959	Χ	



Figure 19: Major Trip Generators – Residential, Education and Transportation Centers

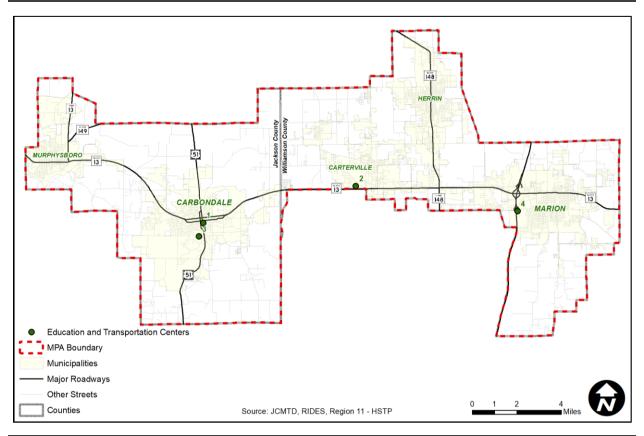


Table 4: Major Trip Generators – Residential, Education and Transportation Centers

ID	Name	Address	JCMTD/ SAS	RIDES
1	Amtrak Carbondale	401 S Illinois Ave, Carbondale IL 62901	Х	
2	John A. Logan	700 Logan College Dr. Carterville, IL 62918		Χ
3	Southern Illinois University	1263 Lincoln Dr, Carbondale IL 62901	Х	
4	The Reserve Proposed Marion Transfer Center	N/A		



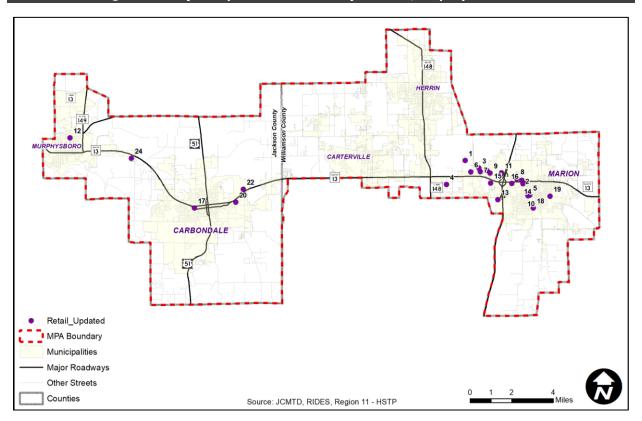


Figure 20: Major Trip Generators – Major Retail/Employment Hubs

Table 5: Major Trip Generators – Major Retail/Employment Hubs

ID	Name	Address	JCMTD/ SAS	RIDES
1	Aisin Mfg.	11000 Redco Dr. Marion, IL 62959		Χ
2	Aldi	1305 N Russell St. Marion, IL 62959		Χ
3	AMC Centre 8	3107 Civic Circle Blvd. Marion, IL 62959		Χ
4	BlueCross/ Blue Shield	5001 Meadowland Parkway Marion, IL 62959		Χ
5	Borowiak's IGA	914 W Main St Marion, IL 62959		Χ
6	Home Depot	3200 Banterra Dr, Marion, IL 62959		Χ
7	Illinois Star Center Mall	3000 W Deyoung St. Marion, IL 62959		Χ
8	Kroger Marion	1704 W Deyoung St Marion, IL 62959		Χ
9	Maurices	2406 Williamson County Pkwy c, Marion, IL 62959		Χ
10	Melise's Boutique	928 W Main St. Marion, IL 62959		Χ
11	Menards	2500 Blue Heron Dr. Marion, IL 62959		Χ
12	Murphysboro Food Pantry	906 N 14th St, Murphysboro IL 62966	Х	
13	Pepsi / Midamerica	2605 W Main St. Marion, IL 62959		Χ
14	Rural King Supply	1301 Enterprise Way Marion, IL 62959		Χ
15	Sam's 2709 Walton Way Marion, IL 62959			Х



16	Save-A-Lot	1124 N Carbon St. Marion, IL 62959		Х
17	Schnucks	915 W Main St, Carbondale IL 62901	Χ	
18	Shepherd's Closet	704 W Boyton St. Marion, IL 62959		Χ
19	Small's Food Store	1005 E Main St Marion, IL 62959		Χ
20	University Mall	1237 E Main St, Carbondale, IL 62901	Χ	
21	University Place Shopping Center	1300 E Main St, Carbondale, IL 62901		
22	Wal-Mart Carbondale	1450 E Main St, Carbondale IL 62901	Χ	
23	Wal-Mart Marion	2802 Outer Dr. Marion, IL 62959		Χ
24	Wal-Mart Murphysboro	6495 Country Club Rd, Murphysboro IL 62966	Χ	



### 7 Identification of Gaps, Strategies and Implementation

At the January 9 Human Service Transportation Committee meeting, many of these gaps in services were identified. Other gaps were identified by the *Region 11 Human Services Transportation Plan (February 2018)*, as well as the stakeholder interviews (**Section 3.2**) and on-line survey (**Section 3.4**) conducted as part of this project.

The first five gaps were identified by SIMPO and its Human Services Transportation Committee as higher priorities for short-term action.

#### 7.1 Gaps and Strategies

#### 7.1.1 High Priority Gaps and Strategies

Identified Gap	No common platform for discussing issues in human service transportation and updating Human Service Transportation Plan
Goal	Reserve a slot for discussing funding, coordination and other human
	services issues at the monthly MPO meetings.
Strategy	Make human services transportation a regular agenda item at least quarterly
	Coordinate formal efforts through Region 11 in intervals between updates to SIMPO HSTP

Identified Gap	More efficient scheduling of Medicaid trips
Goal	Schedule multi-agency trips which qualify for Medicaid reimbursement.
Strategy	Enact state legislation permitting multi-agency Medicaid trips. Attempts
	to resolve this administratively have been unsuccessful for many years.

Identified Gap	Evening and Weekend Services
Goal	Provide additional evening and weekend service, especially for work
	trips
Strategy	Wider publicity about available services. RIDES presently operates service
	both evenings and on weekends.

Identified Gap	No single point of contact for all providers
Goal	Incorporate all providers within the RIDES One-Call Center and/or
	develop a smartphone app to access information and book rides.
Strategy	Pursue Section 5311(f) funding.

JCMTD network emphasizes service to Carbondale
Provide comparable transportation availability in both Carbondale and
other areas of Jackson County
JCMTD operates throughout Jackson County. Provide better marketing and publicity regarding service outside of Carbondale.



#### 7.1.2 Secondary Priority Gaps and Strategies

Identified Gap	Lack of documentation and available resources on providers serving the area
Goal	Making information on all providers in the area, available to all prospective and current riders.
Strategy	Both the Region 11 HSTP as well as the SIMPO HSTP provide information on providers in the area. This information should be made available on a common platform, online or on a smartphone application.

Identified Gap	Funding for the One-Call Center
Goal	Allocate funds for better coordination and the One-call Center.
Strategy	Presently, RIDES funds the One-Call Center internally. Also consider
	funding through Section 5311(f) rural program.

Identified Gap	Transportation to support Workshops Without Walls in 2020
Goal	Provide transportation to scattered worksites
Strategy	RIDES implement additional work trips, as needed

Identified Gap	Lack of Awareness amongst residents regarding available services
Goal	Better documentation, PR services, and customer care.
Strategy	Added 5311(f) funding for public education programs

Identified Gap	Limited inter-city and inter-state public transportation
Goal	Improve access to out-of-state destinations, especially for medical trips
Strategy	Added publicity regarding available services. RIDES presently provides service to Paducah, Evansville and St. Louis on a daily basis.

Identified Gap	Need for additional vehicles
Goal	HSA application for funding and vehicle allocation
Strategy	Coordinate through Region 11 Human Services Transportation
	Committee.

Identified Gap	Very limited services to out-of-state medical centers especially St. Louis
Goal	Provide improved access to out-of-state medical centers
Strategy	Better marketing of existing services, especially to St. Louis

#### 7.2 Identification of Duplications

The prominent duplication among services relates to transportation for Medicaid trips across operator jurisdictions. The issue is described in the summary of the Human Services Transportation Committee meeting (Section 5), as well as the meeting summary in Appendix D. In brief, Medicaid reimbursement policies generally provide that only one operator may be reimbursed for a single home-to-medical facility trip. Often, it would be much more efficient for multiple operators to provide this trip. This policy results



in significant duplication. For example, both RIDES and JCMTD may be taking Medicaid passengers to St. Louis for appointments at similar times. In this example, it would be more efficient for the two operators to meet, with only one vehicle going to and from St. Louis. In this example, the operator which does not travel to St. Louis likely will be ineligible for reimbursement of any of its costs.

We recommend that efforts to address duplications of service concentrate on this inefficiency. It was cited throughout the study as a significant need (especially by service operators).

#### 7.3 Prioritization

#### 7.3.1 A detailed "introduction" to the process and the HSTP

It was requested/suggested by all members of the Human Services Transportation Committee that the process for devising and updating a plan be formalized. This HSTP is the first which SIMPO is preparing. A formal process of providing updates to the SIMPO Technical and Policy Committees on a quarterly basis is recommended. This will provide a common forum for providers to put their needs and issues forward. It also will provide a forum for funding and policy support within the SIMPO region. The SIMPO Human Services Transportation Committee would meet formally (apart from MPO Committee briefings) only when necessary to update the SIMPO region HSTP. At other times, its activities will be subsumed within the Region 11 Human Services Transportation Committee.

#### 7.3.2 Medicaid Billing Process

The Medicaid billing process needs more flexibility, especially for service by multiple operators for a single trip. Many providers face missed payments due to strict reimbursement and eligibility guidelines. Medicaid reimbursement does not allow for multiple service providers for a single trip. As a result, operators in the region regularly face the issue of denial of reimbursements.

#### 7.3.3 Human Services Agency (HSA) application for funding and vehicle allocation

With the release of the Region 11 HSTP, all Section 5310 applicants will now submit their application to SIMPO HSTP Coordinator and IDOT\OIPI. The SIMPO Coordinator and the Region 11 Coordinator will work together on scoring and verification of the agency request.

#### 7.3.4 General awareness and publicity

This could be achieved by using different efforts for different regions. Service providers with most influence in specific areas can lead the efforts in those areas. Section 5311(f) funding can support marketing initiatives.

#### 7.3.5 How to keep the conversation going?

It is important to maintain active participation of all service providers and authorities throughout the plan process as well as after that. Organizational and participatory tools were discussed as an important step in the success of the plan and regional efforts. Quarterly participation in the SIMPO Technical and Policy Committee meetings will be a very helpful initiative.

#### 7.3.6 Align with regional goals and objectives:

It is important that the HSTP document be consistent with SIMPO's Regional Plan.



#### 8 Program of Projects

Note: This section largely is adapted from the *Region 11 Human Services Transportation Plan (February 2018)*. It contains added discussion of Section 5311(f) funding to support efforts in the SIMPO region.

The Regional Program of Projects is a list of projects which embrace the policies and strategies laid out in this document and have been recommended for funding by the Regional Human Services Transportation Committee.

**5310** Consolidated Vehicle Procurement Program (CVP) — Through the Consolidated Vehicle Procurement Program (CVP), the Illinois Department of Transportation - Division of Public & Intermodal Transportation (IDOT-OIPI) makes grants to municipalities, mass transit districts, counties, and private non-profit organizations for ramp and lift equipped paratransit vehicles. Funding for these grants comes from varied sources, including the Federal Transit Administrations (FTA) Section 5309, 5310, 5311, 5316, and 5317 programs, as well as state resources. Previously, agencies eligible for different grants were required to submit numerous applications. The consolidated vehicle procurement application was developed to make it easier for agencies to apply for funds and for IDOT-OIPI to review projects in applications.

As part of the Federal government's human services coordination initiative, all Section 5310 recipients must certify that projects are derived from a locally developed, coordinated public transit human services transportation plan (HSTP). In the rural areas of Illinois, IDOT\OIPI has developed 11 regions each staffed with an HSTP Regional Coordinator. In the urban downstate areas the Metropolitan Planning Organization (MPO) is the HSTP agency, and in the Northeastern IL region (six counties) the contact is the Regional Transportation Authority (RTA). All Section 5310 applicants should be actively involved in the development of these plans participate in coordination efforts with the region and state to be considered for funding by IDOT\OIPI.

In order to meet the federal coordination requirements identified above, all Section 5310 applicants will now submit their application to IDOT\OIPI and cc: to the local HSTP office for initial review. All applicants will be given a coordination score by the HSTP Coordinator. This score will be the deciding factor as to whether the application moves forward in the IDOT\OIPI scoring process. This score will be based on active participation in the local service coordination process and that the funding request of the applicant meets the service needs and goals as identified in the locally derived HSTP Plan.

When final review of the application is complete, IDOT-DPIT will make its recommendation to the Governor. Following this approval, vehicles will be ordered and grant contracts forwarded to the applicants for signature. When both copies are returned, the agreement will be executed and dated at IDOT\OIPI. Only then can IDOT\OIPI deliver vehicles. IDOT\OIPI, on behalf of the grantees, develops the vehicle specifications, purchases the vehicles, and assures that the procurement conforms to all state and federal requirements. This constitutes the Consolidated Vehicle Procurement process.

**Inter-City Bus** – Section 5311 of the Federal Transit Act, as amended, authorizes the Secretary of Transportation to apportion funds to the Governor of each state for public transportation projects in non-urbanized areas. The goals of the Section 5311 Programs are: to enhance the access of people in non-urbanized areas to healthcare, shopping, education, employment, public services and recreation; to assist in the maintenance, development, improvement, and use of public transportation systems in rural and small urban areas; and to encourage and facilitate the most efficient use of all Federal funds used to



provide passenger transportation in non-urbanized areas through the coordination of programs and services.

Under Section 5311 (i) which was authorized by the Intermodal Surface Transportation Efficiency Act (ISTEA), states are required to spend a portion of their Section 5311 apportionment to carry out a program for the development and support of intercity bus transportation. The federal objectives of the funding for intercity bus service under Section 5311 are: support the connection between non-urbanized areas and the larger regional or national system of intercity bus service; meet the intercity travel needs of residents in non-urbanized areas; and support the infrastructure of the intercity bus network through planning and marketing assistance and capital investment in facilities. Section 5311(f) provides funding assistance to transportation entities for the provision of intercity transportation-related services. Allowable expenses include operating, capital, planning and marketing programs. This is identified in **Section 7** as a potential funding source for marketing efforts, as well as support of the One-Call Center.



9 Appendices



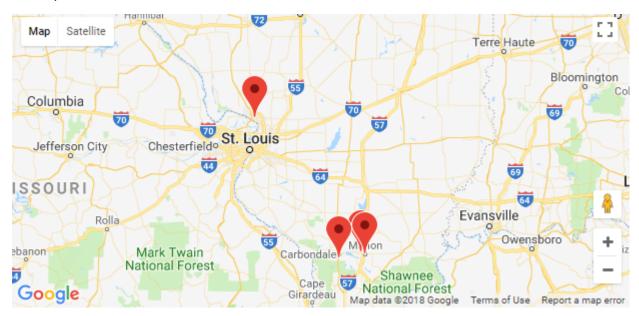
Appendix A – Detailed Stakeholder Profile



#### Centerstone, Carbondale and Marion.

Centerstone is one of the nation's largest not-for-profit providers of community-based behavioral health care, offering a full range of mental health services, substance abuse treatment and intellectual and developmental disabilities services in Florida, Illinois, Indiana, Kentucky and Tennessee. Commission on Accreditation of Rehabilitation Facilities (CARF) accredited in Illinois, Indiana and Tennessee.

Centerstone, IL is serving more than 16,000 children, adolescents, adults, seniors and their families annually and has services in Franklin, Jackson, Madison and Williamson counties.



#### Services include:

- Crisis Services For Adults And Children
- Community Support Services for Children and Adults
- Counseling Services for Children, Adults, Couples and Families
- Early Head Start
- Integrated Primary And Behavioral Health Services For Adults
- Life Skills Enrichment
- Medication Assisted Recovery Services (Methadone And Suboxone) For Adults
- Open Door (No Wrong Door) Services
- Psychiatric and Medical Services
- Residential and Housing Services for Adults
- School-Based Services
- Screening, Assessment, and Support Services (SASS) for Children in Madison County
- Senior and Caregiver Services
- Substance Abuse Counseling for adults and children and DUI Services for Adults

#### Contact:

Name: Brad Friend Address: 902 W Main St West Frankfort IL 62896



Phone: (618) 922-2990

#### Williamson County Program on Aging.

Williamson County Program on Aging is a non-profit organization whose main purpose is to assist adults over 60 or older. WCPA offers a range of services to facilitate independent living and delay premature institutionalization.

Several of this organization's programs are funded in whole or part by the Title III of the Older Americans Act through the Egyptian Area Agency on Aging. Donations are accepted for all services but no one is denied service due to inability to pay/donate, except services that require fees. Transportation with wheel chair service is provided as a part of service and is managed by RIDES.

#### Cash Fair:

- Adult (over 11 yr. old) \$2.00
- Children\* (6 to 10 yr. old) \$0.75
- Little Children\* (0 to 5 yr. old)

#### Discounted Tickets (books of 10)

- Adult (under 60 yr. old)\$10.00
- Adult (over 60 yr. old or disabled)\$7.50
- Children\* (6 to 10 yr. old)

#### Service:

- Adult Protective Services
- In-Home Services
- Caregiver Respite Aides
- Home Delivery Meals
- Congregate Meals
- Transportation
- Information and Assistance
- Outreach
- SIU Legal Clinic
- Health Screening
- Arthritis Class
- Adult Day Care
- Adult Education
- Rules of the Road
- Recreation

#### Contact:

Name: Tracy Drew

Email Address: tdrew@wcpaherrin.net

Phone: (618) 988-1591 ext. 102



#### Center for Independent Living, Carbondale.

The Southern Illinois Center for Independent Living (SICIL) is a community-based, non-profit, and non-residential facility; they offer a variety of programs and services to people with disabilities and their families. SICIL's primary service area covers Franklin, Jackson, Perry, and Williamson counties. SICIL provides services regardless of age, gender, race, sexual preference, or disability. Independent Living services are provided without charge.

#### Services:

- Independent Living Program
- Community Reintegration Program
- Community Services
- Personal Assistant Program
- Services for Sensory Impaired
- Vocational Program
- Your Choice Home Services (In-home care)

#### Contact:

Name: Bonnie Vaughn

Email Address: bvaughnsicil@sicil1.org

Phone: (618)457-3318

#### SIU School of Medicine.

SIU School of Medicine's Center for Rural Health and Social Service Development (CRHSSD) aims to strengthen rural health infrastructure and to promote opportunities for enhancing health primarily in rural communities. CRHSSD at Southern Illinois University Carbondale (SIUC) conducts research, needs assessments, demonstration projects, program evaluations, and trainings; tests new models of health care delivery; and develops policy recommendations to improve the health of our rural communities.

The Center for Rural Health and Social Service Development at SIU is constantly working with different non-profit/public organizations and grants to improve the reach of medical services in the region. The **Rural Medical Transportation Network** is one of the longest running flagship project of CRHSSD. MedTrans, Inc. is another project by CRHSSD, where Mobility Management Specialists assist patents with identifying and scheduling cost-effective, non-emergency medical transportation, making use of all transportation providers in the region. In Jackson County MedTrans works with JCMTD and Southern Illinois Transportation (SIT) and in Williamson County with RIDES and SIT.

#### MedTrans, Inc.

MedTrans, Inc. is a pilot project to establish a free-standing One Call Center serving the southern Illinois region. This project will formalize the Mobility Management efforts that have been established by the activities of the Rural Medical Transportation Network (RMTN). MedTrans, Inc. will receive transportation referrals from both health care providers and consumers. Mobility managers working within the organization will complement the current mobility management efforts of each individual public transit agency, and they will further the excellent collaborative relationship of the RMTN with its public transit partners. The goals of the one call center are to:

1) Transition patients who are inappropriately using EMS/ambulance services to public transit;



- 2) Assist those patients who are missing health care appointments and treatments due to transportation issues, by serving as a liaison between the patient, their health care providers, and public transit;
- 3) Provide a coordination element between the EMS Patient Navigator and the Mobility Management programs, currently operating within the RMTN.

#### Goals

- Improve Access to Health Care
- Expand Educational Opportunities
- Provide Community Service
- Support Research Initiatives

#### Contact:

Name: Dennis Presley

Email Address: dpresley@siumed.edu

Phone: (618) 453-3314



Appendix B – Stakeholder Interviews



#### SIU School of Medicine - Dennis Presley

INTRODUCTION: Begin by explaining purpose of a Human Services Transportation Plan. We are analyzing the transportation needs of lower-income, disabled and senior adult individuals. This is a follow up from a previous study (SIMPO Transit Study) completed last June. That study analyzed public transit needs for the entire population. We have a Plan Steering Committee. One of its members identified that your agency is an important service provider to these communities. We would like to ask you for your input on the transportation needs of your clients.

(NB – this interview will be preceded by an e-mail contact and follow up. That e-mail contact will schedule the meeting and explain the purpose of the interview/study).

#### 1. Please describe your major programs.

For the 10 years here I have been involved with myriad transportation coordination and research projects. All involved transportation for medical patients, and we are currently involved with two projects involving healthcare transportation.

RIDES to Wellness program of the Federal Transit Administration. Formerly called MedTrans, Inc., established free-standing On Call Centers in Energy and Crawford to provide transportation to medical appointments. RIDES Mass Transit has taken on this service, which was originally an SIU pilot program. The Center for Rural Health is making a major outreach to hospitals in order to reduce patient readmissions and those to providing care for substance abuse and mental health patients. We hope transportation providers will continue to work with these patients. Transportation is just one component of our work, which fits into an overall strategy of improving access to health treatment.

A survey was conducted in September 2017 of two groups of professionals associated with this program. It included 22 responses from staff at 6 behavioral health agencies and 9 responses from staff at 4 hospitals. Nearly all respondents agreed or strongly agreed with a variety of statements asking whether the services of this program were helpful in arranging transportation for patients and/or clients. The summary of responses is provided at the end of this meeting summary.

The transportation needs of substance abuse and mental health patients is greater than anticipated.

The other project involving the Center for Rural Health is the Community Paramedicine project for Wayne, Jefferson, Crawford, Clay, and Lawrence counties. This rural health network is the Southern Illinois Collaborative Innovative Care Coordination. This project is a collaborative effort among five hospitals, five rural emergency medical service districts and five mass transit districts. In this program, paramedics monitor patients in their homes after they have been released from the hospital. As patients' conditions improve so they are able to travel to their medical provider, this program will coordinate their obtaining transportation as well. Transportation is not the primary element in this program, but it will be an important part

The rural health network has been formed for the purpose of economies of scale and resource sharing.

#### 2. Which of these programs require that clients come to one of your locations?

SIU School of Medicine does have patients who travel to appointments, such as the autism program and the family practice office at Memorial Hospital but the Rural Health Center is not involved. The center has provided transportation education here.



3. For which of your major programs is transportation a \*major\* or \*critical\* issue? For each program in one of these categories, please describe the kinds of transportation difficulties, which your clients have. Also, describe the approximate number of clients using these services, and the times of the day/week they must travel.

In all of our programs we have been involved patients have been at the center of all of them with several mass transit districts and private transportation providers. Making sure they have transportation services available and functioning Ina way that is conducive to their needs and marketed in a way they understand is at the center of what we are trying to do. It is a critical issue. There are, in the state of Illinois, widely varying perspectives and attitudes among transportation districts concerning their commitments to transportation. Some are very committed, some are not very concerned. It is a disheartening with some transportation providers as to how low their commitment is. When they aren't assisting patients, they are very detrimental to the health and well-being of people. Patients are sick and many are sick and elderly. It becomes so difficult in scheduling transportation, when they run into poor attitudes, complications, and the cumbersome structure, they just give up, don't go and get sicker. Some transportation providers don't understand this and they don't care. RIDES does care. A lot of them don't. IDOT needs to address that. There needs to be some standard for ensuring that those needs are being met.

4. How well are existing transportation providers (Jackson County MTD, RIDES MTD, and Adult Senior Services of Carbondale) able to meet your transportation needs?

If it's a hassle trying to get back and forth to treatment, people give up.

What I know is that Jackson County has done a very poor job over the years. I think there has been some improvement there. There are deep-seated organizational and cultural issues that go to issues of employee culture, administrative culture, including the county and the board. One example I can give. One of my friends is the mayor of Murfreesboro, and he didn't even know what Jackson County Mass Transit did. It has become Carbondale-centric. This is deep-seated and hard for anything to be sorted out.

I don't know about Senior Services, heard some good things, sense only so much they can do. They are picking up pieces that Jackson County should be doing if they would but hasn't accomplished over the years.

RIDES MTD has deficiencies at times, but RIDES has always cared about those deficiencies and strived to correct them. In cooperation with us, they started MedTrans now called RIDES Plus in Energy and a second one in Crawford County, one of a kind call center for in 2014 and in 2017. Great outreach to healthcare providers. They want patients to get where they need to go. In the forefront in the state in expressing their concerns and legitimately striving to make sure they are fulfilling the patients' needs.



#### 5. How often are people not able to use your services because of transportation?

When it comes to substance abuse and mental health, about 40 percent of patients experience transportation barriers. About five years ago, a study showed patients missing about 12 percent of appointments due to transportation. In this age where we are talking about mental health more than ever with school shootings, let's not let transportation be a barrier. Let's work to make it not a barrier make sure coordination services are there.

# 6. What additional steps have you or your clients tried to take to address transportation difficulties?

For the 10 years been here, constant, tiring work with transportation providers public and private to patients and their healthcare providers of all kinds, hospitals, mental health and substance abuse, constant outreach, constant education, researching where the gaps and deficiencies are, always trying to fold transportation into whatever we do.

#### 7. How successful have these steps been?

I think they have been very successful. Do I think we have a long way to go? I absolutely do. Still much to be done, both within transportation profession and IDOT. IDOT needs to be made aware of what needs to be done and what their commitment should be to patients. As far as marketing and outreach, we have a long way to go. So many don't understand public transit and how to use it. We still have huge problems with people who are calling ambulances, going to emergency rooms, when they should be calling public transit and going to a primary care physician.

# 8. Please provide any additional input which would be helpful to our study. Thank you for your time.

The urbanized district should be very helpful to this area. IDOT needs to set some real measurable standards for public transit performance that actually will hold all public transit to definable standards of performance, standards that actually measure their service to the community.

Ed Heflin, rural transit assistance center, Western Illinois University would be a great resource.

### Rides to Wellness

# Mid-Project Survey Data - September, 2017 Survey of Participating Behavioral Health/Substance Abuse Care Staff

### After participating in *Rides to Wellness* project activities......

- 1) I believe that the knowledge I've gained about patient transportation services was valuable.
  - Strongly Disagree
  - Disagree
  - Undecided 9%
  - Agree 55%
  - Strongly Agree 36%
- 2) I believe that our agency has established a partnership with the region's transportation representatives.
  - Strongly Disagree
  - Disagree 9%
  - Undecided 34%
  - Agree 31%
  - Strongly Agree 26%
- 3) I am better able to assist my clients with obtaining transportation services.
  - Strongly Disagree
  - Disagree
  - Undecided -9%
  - Agree 56%
  - Strongly Agree 35%
- 4) I know whom to call when helping a client make transportation arrangements.
  - Strongly Disagree
  - Disagree
  - Undecided 6%
  - Agree 24%
  - Strongly Agree 70%
- 5) My interactions with transportation staff have been positive and productive.
  - Strongly Disagree
  - Disagree 4%
  - Undecided 8%
  - Agree 54%
  - Strongly Agree 34%

- 6) My clients' interactions with transportation staff have been positive and productive.
  - Strongly Disagree
  - Disagree 9%
  - Undecided 42%
  - Agree 24%
  - Strongly Agree 25%
- 7) I believe that the transportation agency(ies) in the area provide services that meet the needs of my clients.
  - Strongly Disagree 5%
  - Disagree 18%
  - Undecided 27%
  - Agree 27%
  - Strongly Agree 23%
- 8) I believe that I need more education on using the transportation system.
  - Strongly Disagree 9%
  - Disagree 31%
  - Undecided 18%
  - Agree 23%
  - Strongly Agree -19%
- 9) I believe that my clients need more education on using the transportation system.
  - Strongly Disagree
  - Disagree
  - Undecided -14%
  - Agree 46%
  - Strongly Agree 40%
- 10) I believe that transportation staff listens to our concerns.
  - Strongly Disagree
  - Disagree 5%
  - Undecided 27%
  - Agree 41%
  - Strongly Agree 27%

- 11) I believe that transportation staff makes their best effort to resolve gaps in transportation services that we identify.
  - Strongly Disagree
  - Disagree 9%
  - Undecided 40%
  - Agree 32%
  - Strongly Agree 19%
- 12) I believe that the area's transportation services foster better health outcomes for my patients.
  - Strongly Disagree
  - Disagree 9%
  - Undecided 18%
  - Agree 50%
  - Strongly Agree 23%
- 13) I believe that the area's transportation services foster better access to health care, of all types, for my patients.
  - Strongly Disagree
  - Disagree
  - Undecided 5%
  - Agree 64%
  - Strongly Agree 31%

### Rides to Wellness

# Mid-Project Survey Data - September, 2017 Survey of Participating Hospital Staff

### After participating in *Rides to Wellness* project activities......

- 1) I believe that the knowledge I've gained about patient transportation services was valuable.
  - Strongly Disagree
  - Disagree
  - Undecided
  - Agree 33%
  - Strongly Agree 67%
- 2) I believe that our hospital has established a partnership with the region's transportation representatives.
  - Strongly Disagree
  - Disagree
  - Undecided 11%
  - Agree 56%
  - Strongly Agree 33%
- 3) I am better able to assist my patients with obtaining transportation services.
  - Strongly Disagree
  - Disagree
  - Undecided
  - Agree 67%
  - Strongly Agree 33%
- 4) I know whom to call when helping a client make transportation arrangements.
  - Strongly Disagree
  - Disagree
  - Undecided
  - Agree 23%
  - Strongly Agree 77%
- 5) My interactions with transportation staff have been positive and productive.
  - Strongly Disagree
  - Disagree
  - Undecided 11%
  - Agree 56%
  - Strongly Agree 33%

- 6) My patients' interactions with transportation staff have been positive and productive.
  - Strongly Disagree
  - Disagree
  - Undecided 22%
  - Agree 56%
  - Strongly Agree 22%
- 7) I believe that the transportation agency(ies) in the area provide services that meet the needs of my patients.
  - Strongly Disagree
  - Disagree
  - Undecided 11%
  - Agree 67%
  - Strongly Agree 22%
- 8) I believe that I need more education on using the transportation system.
  - Strongly Disagree
  - Disagree 56%
  - Undecided 22%
  - Agree 22%
  - Strongly Agree
- 9) I believe that my patients need more education on using the transportation system.
  - Strongly Disagree
  - Disagree
  - Undecided -11%
  - Agree 56%
  - Strongly Agree 33%
- 10) I believe that transportation staff listens to our concerns.
  - Strongly Disagree
  - Disagree
  - Undecided 11%
  - Agree 56%
  - Strongly Agree 33%

- 11) I believe that transportation staff makes their best effort to resolve gaps in transportation services that we identify.
  - Strongly Disagree
  - Disagree
  - Undecided 22%
  - Agree 67%
  - Strongly Agree 11%
- 12) I believe that the area's transportation services foster better health outcomes for my patients.
  - Strongly Disagree
  - Disagree
  - Undecided
  - Agree 67%
  - Strongly Agree 33%
- 13) I believe that the area's transportation services foster better access to health care, of all types, for my patients.
  - Strongly Disagree
  - Disagree
  - Undecided 11%
  - Agree 56%
  - Strongly Agree 33%



#### Centerstone, Carbondale and Marion – Brad Friend

INTRODUCTION: Begin by explaining purpose of a Human Services Transportation Plan. We are analyzing the transportation needs of lower-income, disabled and senior adult individuals. This is a follow up from a previous study (SIMPO Transit Study) completed last June. That study analyzed public transit needs for the entire population. We have a Plan Steering Committee. One of its members identified that your agency is an important service provider to these communities. We would like to ask you for your input on the transportation needs of your clients.

(NB – this interview will be preceded by an e-mail contact and follow up. That e-mail contact will schedule the meeting and explain the purpose of the interview/study).

1. Please describe your major programs.

Brad Friend explained: Centerstone serves individuals with intellectual disabilities, those with long-term mental health, and/or substance abuse issues with wide-ranging programs. Our main areas are Franklin, Jackson and Williamson counties.

In southern part of Illinois unlike Chicago there is no fixed route.

2. Which of these programs require that clients come to one of your locations?

Those with intellectual disabilities and with long-term mental health issues need transportation for counseling. Those with substance abuse don't use public transit and they must rely on family and friends get to substance abuse treatment, both inpatient and outpatient. We also are contracted with the Illinois Department of Corrections to work with those convicted of substance abuse crimes after their release into halfway houses. Transportation is a big issue for these clients, he said.

RIDESMTD provides transportation for those in the sheltered workshop.

3. For which of your major programs is transportation a \*major\* or \*critical\* issue? For each program in one of these categories, please describe the kinds of transportation difficulties, which your clients have. Also, describe the approximate number of clients using these services, and the times of the day/week they must travel.

We are so rural and so spread apart it is so difficult to obtain employment without transportation. Those without a driver's license must rely heavily on friends and family. If you miss work you are going to lose your job. Clients depend heavily on transportation provided by Centerstone.

4. How well are existing transportation providers (Jackson County MTD, RIDES MTD, and Adult Senior Services of Carbondale) able to meet your transportation needs?

RIDES MTD provides transportation for those with intellectual disabilities in West Frankfort. They provide transport to our day program. RIDES also transports those with intellectual disabilities who are employed in cleaning rest areas. We also have other contracts that RIDES just can't perform, which Centerstone must provide.

As far as Jackson County, riders use SIU's Saluki Express bus system. Transportation in evenings and weekends is not covered well. RIDES shuts down at 5 p.m. and that doesn't help a lot of



people working at places like McDonald's or Wendy's. They get there but there is no way to get back home.

SCT, South Central transit, another based out of Centralia, provides some transportation. We have four 16 passenger vans, and two 12 passenger mini-buses mainly used in programs with intellectual disabilities. They run every day and are Centerstone employee driven. We also have group homes, each having a minivan or a car for a total of 56 vehicles. There is a fleet of 10 large vans, most of which are equipped with lifts, for all programs.

We try to use public transportation as much as possible. We would much rather not be in the transportation business but with the disabilities we have in this area, we can't help that.

#### 5. How often are people not able to use your services because of transportation?

That is a hard question to answer. So far as our programs we work pretty well with those with intellectual disabilities. It is very difficult for our mental health and substance abuse clients to get to our buildings. We see people with mental health issues in Jackson and Franklin counties and those with substance abuse in Williams Counties. Scheduling appointments around transportation is an issue in all three counties. If they can't work your appointment into their schedule you are out of luck.

# 6. What additional steps have you or your clients tried to take to address transportation difficulties?

We have met with IDOT to discuss this. So far as getting anything else, they are saying there is not enough funding to support more routes, more options. They say the amount of recipients riding isn't high enough to warrant more funding. If it's not sustainable they are not going to add or increase anything.

#### 7. How successful have these steps been?

IDOT has said there is no funding for increased coverage. Using our own transportation increases our costs terribly compared to if we use public transportation. Some transportation for medical services are compensated by Medicaid; however, transportation costs for everyday living skills training is not covered. Told to access local transportation providers by the state.

# 8. Please provide any additional input which would be helpful to our study. Thank you for your time.

Transportation to and from employment for those with intellectual disabilities is a big problem. The Workshop without Walls program, a federally mandated program being implemented nationwide as waivers expire, means instead of going to a sheltered workshop, each individual will need transportation to an individual employer. It will increase the need 50 times more. When we don't have the workshop, with 118 clients, we may have clients going to 118 different places. Without a public transportation provider we are going to be chasing our tail. State implemented date is July 2020. There are two other



workshops in the area. They are Our Directions in Herrin with 50 to 70 at that location, and Progress Port in Carterville, with another 50 to 70.

We were told by the state to access local transportation providers.

Very concerned when 2020 rolls around setting these people up for failure. We need more funding for transportation.



#### Southern Illinois Center for Independent Living Kym Baskin

INTRODUCTION: Begin by explaining purpose of a Human Services Transportation Plan. We are analyzing the transportation needs of lower-income, disabled and senior adult individuals. This is a follow up from a previous study (SIMPO Transit Study) completed last June. That study analyzed public transit needs for the entire population. We have a Plan Steering Committee. One of its members identified that your agency is an important service provider to these communities. We would like to ask you for your input on the transportation needs of your clients.

(NB – this interview will be preceded by an e-mail contact and follow up. That e-mail contact will schedule the meeting and explain the purpose of the interview/study).

#### 1. Please describe your major programs.

We offer two programs, home services and vocational services. Home services include independent living and housing. We also have individual services for the blind, diminished sight. We do the audio testing and application process for the telephones for the hearing impaired. Different programs for any needs in the community who have disability. We try to meet their needs through picking up different programs. In Jackson County have acquired a van that is handicapped accessible. Transportation available. Others are not wheel chair accessible help with vocational interviews and looking for jobs and doctor's appointments and social trips. Very limited. We have one handicapped accessible van in Jackson County and two smaller cars. In Marion we have job coaches that assist but they rely on public transportation.

#### 2. Which of these programs require that clients come to one of your locations?

Vocational consumers do meet there and meet with job coaches in Carbondale offices with computers and a lot of offices. Computers available to all who have a need. Small branch in Harrisburg. Do transport for interviews in Jackson County. In Williamson County we don't have a vehicle.

3. For which of your major programs is transportation a \*major\* or \*critical\* issue? For each program in one of these categories, please describe the kinds of transportation difficulties, which your clients have. Also, describe the approximate number of clients using these services, and the times of the day/week they must travel.

Biggest problem in home services is getting consumers to appointments in St. Louis. In Williamson County and I think in Carbondale can only make reservations for local appointments 24 hours out. If they have an apt. on Tuesday they can't make it until Monday. They have a lot of vehicles and don't have drivers or availability. They will often have to try to make other arrangements. Jackson County .... Rides has really tried to expand trying to make it available to get to St. Louis.

All those we serve complain about no transportation on weekends. They realize they are in need to go to the grocery. Not always able to think ahead. Very much a trouble for consumers who would like to work with no public transportation on evenings or weekends which is what lower



entry jobs require. Probably the biggest issue with the consumers, even part-time. In vocational alone probably 100 in that program.

# 4. How well are existing transportation providers (Jackson County MTD, RIDES MTD, and Adult Senior Services of Carbondale) able to meet your transportation needs?

Very well through the week and locally. Pretty good about that. If they have to travel out of county for medical purposes not well at all and for vocational on weekends and evenings not existent.

#### 5. How often are people not able to use your services because of transportation?

In vocational quite a bit. If we can't provide it we try to assist in their getting transportation. In the past, St. Louis hospitals would arrange rides, but no longer. (A non-profit agency assisted with funding that is no longer available.) If it's elderly or disabilities we try to help them find rides, all different services to help them. Increase independent living skills. Some are elderly, most are disabilities some low income.

# 6. What additional steps have you or your clients tried to take to address transportation difficulties?

I know that SIU is constantly looking into grants for transportation. We participate in various surveys. We participate in local transit. A few consumers will request services, but most require assistance. Most are not great advocates for themselves. They will call us for all their needs. If we can't find a solution, they just do without. Some churches assist in transportation. Sometimes the needs just aren't met. Happens a lot in vocational but if it's in medical we always find a way. Sometimes individuals find a personal resource.

#### 7. How successful have these steps been?

I think through the week in Jackson County they are pretty good. RIDES in Williamson has improved a lot. Out of county more difficult, weekends and evenings not at all. Used to have Saturday service in both counties.

# 8. Please provide any additional input which would be helpful to our study. Thank you for your time.

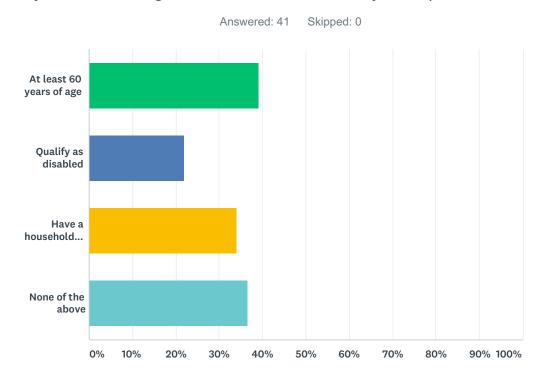
It would be helpful to be able to make reservations earlier than 24 hours ahead. Consumer say that a lot. Vocational wise they are willing to pay for the transportation on weekends and evenings. I would like to see grants to get more vehicles to do transportation on weekends and evenings.

Bonnie Vaughn would have stats if needed.



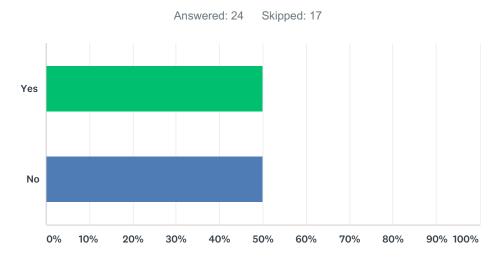
Appendix C – Public Survey Results

### Q1 Do any of the categories below describe you? (Check all that apply)



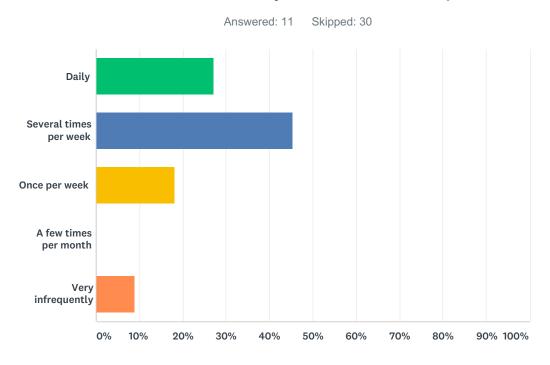
ANSWER CHOICES	RESPONSES	
At least 60 years of age	39.02%	16
Qualify as disabled	21.95%	9
Have a household income of less than \$25,000 per year	34.15%	14
None of the above	36.59%	15
Total Respondents: 41		

## Q2 Do you have any transportation difficulties getting to work?



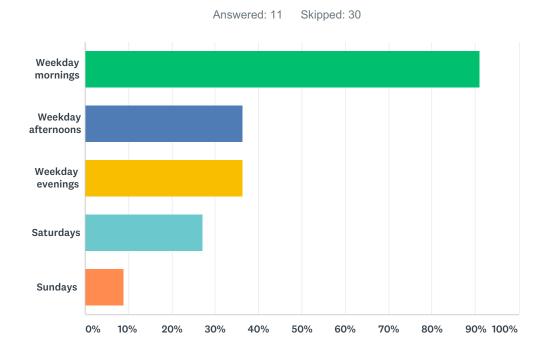
ANSWER CHOICES	RESPONSES	
Yes	50.00%	12
No	50.00%	12
TOTAL		24

### Q3 How often do you make work trips?



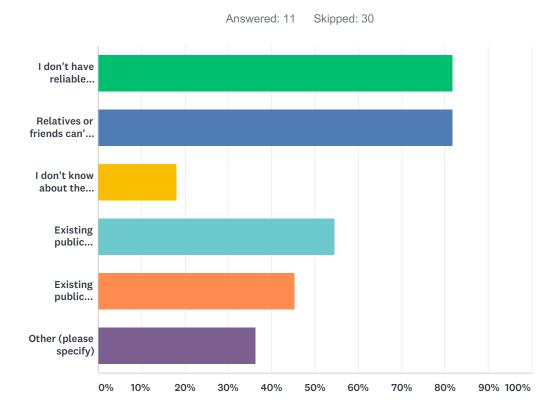
ANSWER CHOICES	RESPONSES	
Daily	27.27%	3
Several times per week	45.45%	5
Once per week	18.18%	2
A few times per month	0.00%	0
Very infrequently	9.09%	1
TOTAL		11

### Q4 When do you generally make work trips? (Check all that apply)



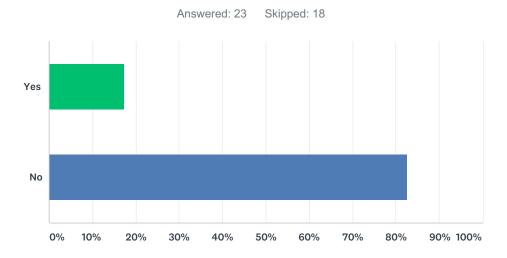
ANSWER CHOICES	RESPONSES	
Weekday mornings	90.91%	10
Weekday afternoons	36.36%	4
Weekday evenings	36.36%	4
Saturdays	27.27%	3
Sundays	9.09%	1
Total Respondents: 11		

#### Q5 What difficulties do you have making work trips? (Check all that apply)



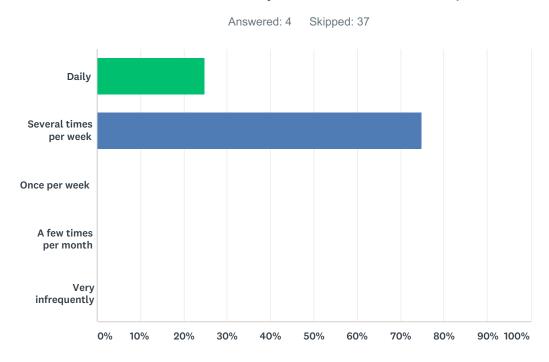
ANSWER CHOICES	RESPONSES	
I don't have reliable personal transportation	81.82%	9
Relatives or friends can't always transport me	81.82%	9
I don't know about the existing public transportation systems	18.18%	2
Existing public transportation does not operate to the location I need to go	54.55%	6
Existing public transportation does not operate at the times I need to go	45.45%	5
Other (please specify)	36.36%	4
Total Respondents: 11		

### Q6 Do you have any transportation difficulties getting to school?



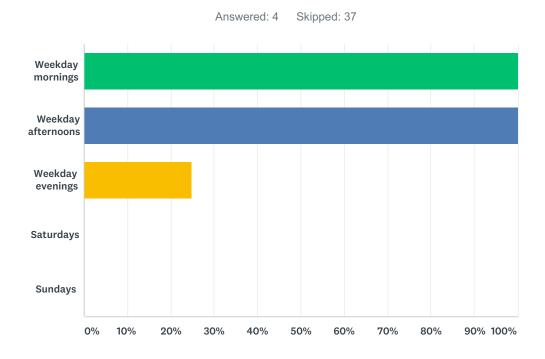
ANSWER CHOICES	RESPONSES	
Yes	17.39%	4
No	82.61%	19
TOTAL		23

### Q7 How often do you make school trips?



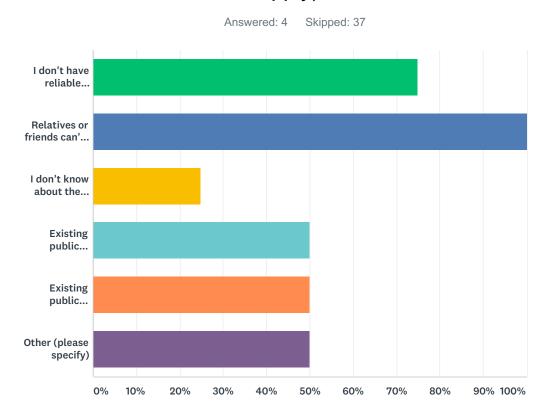
ANSWER CHOICES	RESPONSES	
Daily	25.00%	1
Several times per week	75.00%	3
Once per week	0.00%	0
A few times per month	0.00%	0
Very infrequently	0.00%	0
TOTAL		4

### Q8 When do you generally make school trips? (Check all that apply)



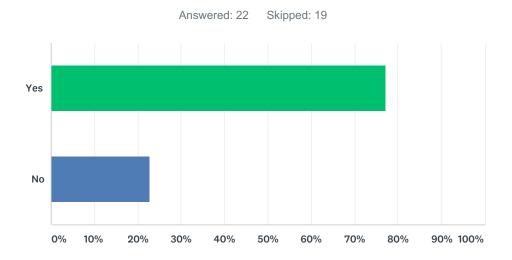
ANSWER CHOICES	RESPONSES	
Weekday mornings	100.00%	4
Weekday afternoons	100.00%	4
Weekday evenings	25.00%	1
Saturdays	0.00%	0
Sundays	0.00%	0
Total Respondents: 4		

## Q9 What difficulties do you have making school trips? (Check all that apply)



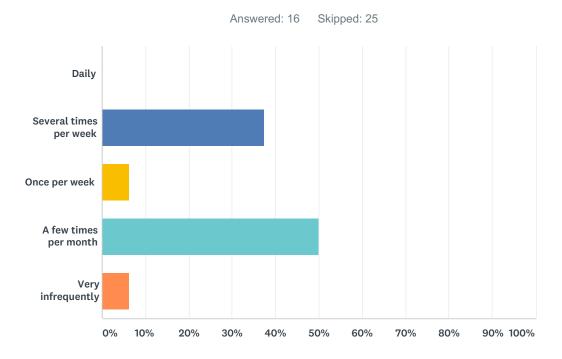
ANSWER CHOICES	RESPONSES	
I don't have reliable personal transportation	75.00%	3
Relatives or friends can't always transport me	100.00%	4
I don't know about the existing public transportation systems	25.00%	1
Existing public transportation does not operate to the location I need to go	50.00%	2
Existing public transportation does not operate at the times I need to go	50.00%	2
Other (please specify)	50.00%	2
Total Respondents: 4		

## Q10 Do you have any transportation difficulties getting to medical care or social services?



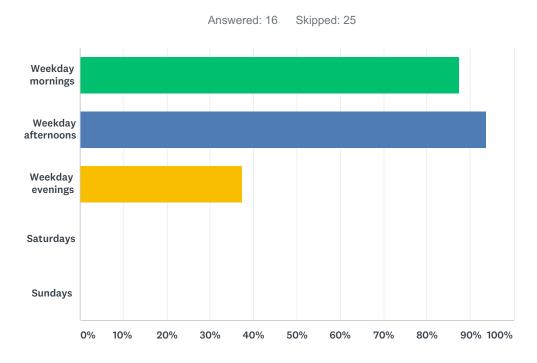
ANSWER CHOICES	RESPONSES	
Yes	77.27%	17
No	22.73%	5
TOTAL		22

#### Q11 How often do you make medical care or social services trips?



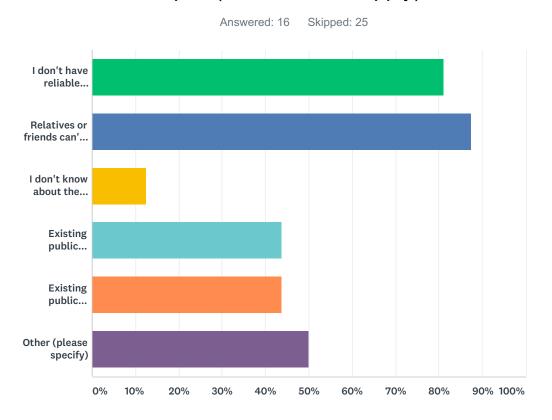
ANSWER CHOICES	RESPONSES	
Daily	0.00%	0
Several times per week	37.50%	6
Once per week	6.25%	1
A few times per month	50.00%	8
Very infrequently	6.25%	1
TOTAL		16

## Q12 When do you generally make medical care or social services trips? (Check all that apply)



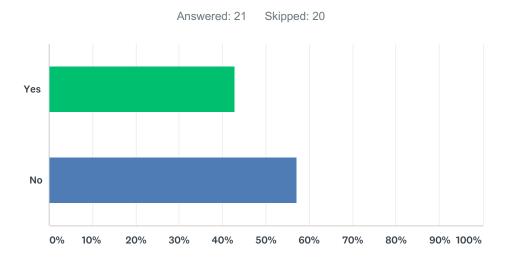
ANSWER CHOICES	RESPONSES	
Weekday mornings	87.50%	14
Weekday afternoons	93.75%	15
Weekday evenings	37.50%	6
Saturdays	0.00%	0
Sundays	0.00%	0
Total Respondents: 16		

## Q13 What difficulties do you have making medical care or social services trips? (Check all that apply)



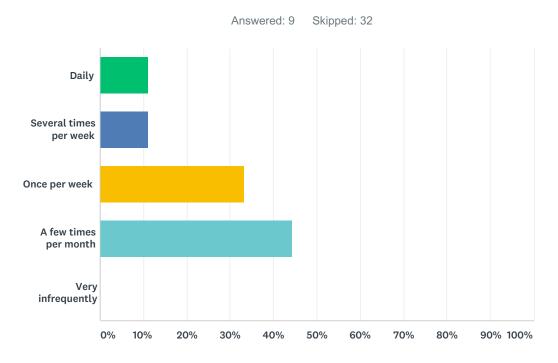
ANSWER CHOICES	RESPONSES	
I don't have reliable personal transportation	81.25%	13
Relatives or friends can't always transport me	87.50%	14
I don't know about the existing public transportation systems	12.50%	2
Existing public transportation does not operate to the location I need to go	43.75%	7
Existing public transportation does not operate at the times I need to go	43.75%	7
Other (please specify)	50.00%	8
Total Respondents: 16		

## Q14 Do you have any transportation difficulties getting to shopping, dining, or entertainment?



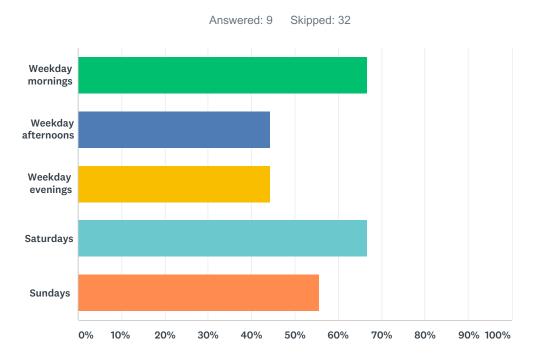
ANSWER CHOICES	RESPONSES	
Yes	42.86%	9
No	57.14%	12
TOTAL		21

### Q15 How often do you make shopping, dining, or entertainment trips?



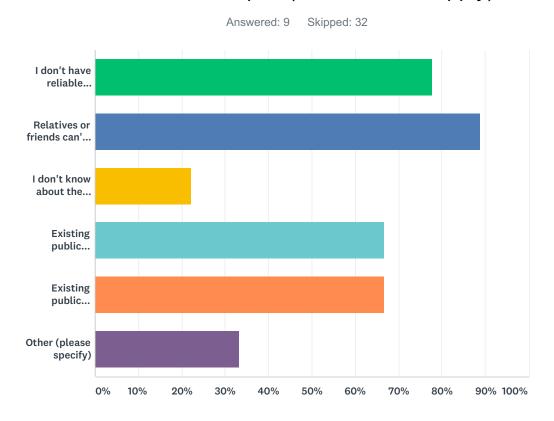
ANSWER CHOICES	RESPONSES	
Daily	11.11%	1
Several times per week	11.11%	1
Once per week	33.33%	3
A few times per month	44.44%	4
Very infrequently	0.00%	0
TOTAL		9

## Q16 When do you generally make shopping, dining, or entertainment trips? (Check all that apply)



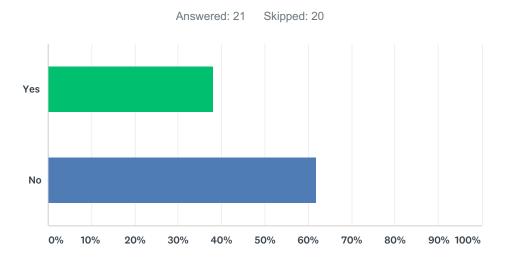
ANSWER CHOICES	RESPONSES	
Weekday mornings	66.67%	6
Weekday afternoons	44.44%	4
Weekday evenings	44.44%	4
Saturdays	66.67%	6
Sundays	55.56%	5
Total Respondents: 9		

## Q17 What difficulties do you have making shopping, dining, or entertainment trips? (Check all that apply)



ANSWER CHOICES	RESPONSES	
I don't have reliable personal transportation	77.78%	7
Relatives or friends can't always transport me	88.89%	8
I don't know about the existing public transportation systems	22.22%	2
Existing public transportation does not operate to the location I need to go	66.67%	6
Existing public transportation does not operate at the times I need to go	66.67%	6
Other (please specify)	33.33%	3
Total Respondents: 9		

## Q18 Do you have any transportation difficulties making any other types of trips not previously listed?

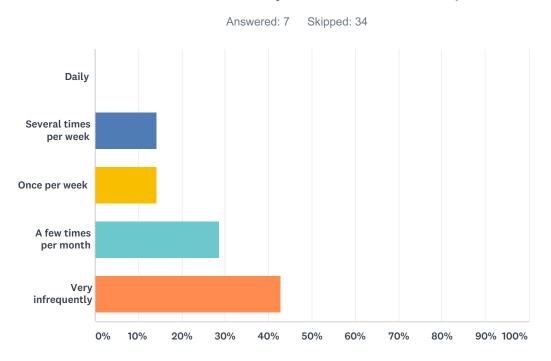


ANSWER CHOICES	RESPONSES	
Yes	38.10%	8
No	61.90%	13
TOTAL		21

### Q19 What types of other trips do you have difficulty making?

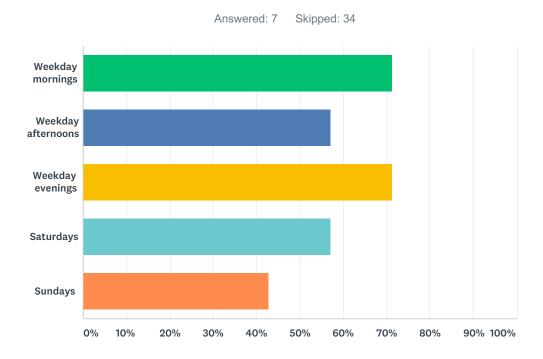
Answered: 7 Skipped: 34

## Q20 How often do you make these trips?



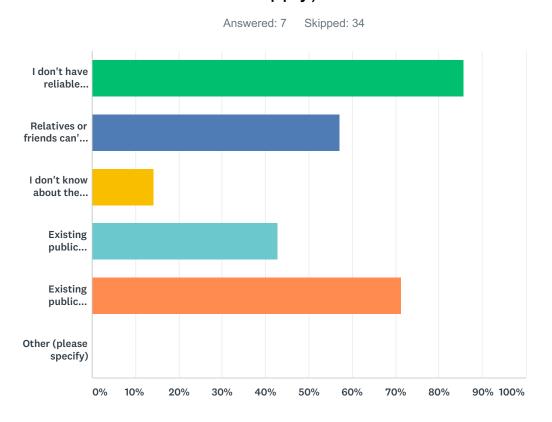
ANSWER CHOICES	RESPONSES	
Daily	0.00%	0
Several times per week	14.29%	1
Once per week	14.29%	1
A few times per month	28.57%	2
Very infrequently	42.86%	3
TOTAL		7

#### Q21 When do you generally make these trips? (Check all that apply)



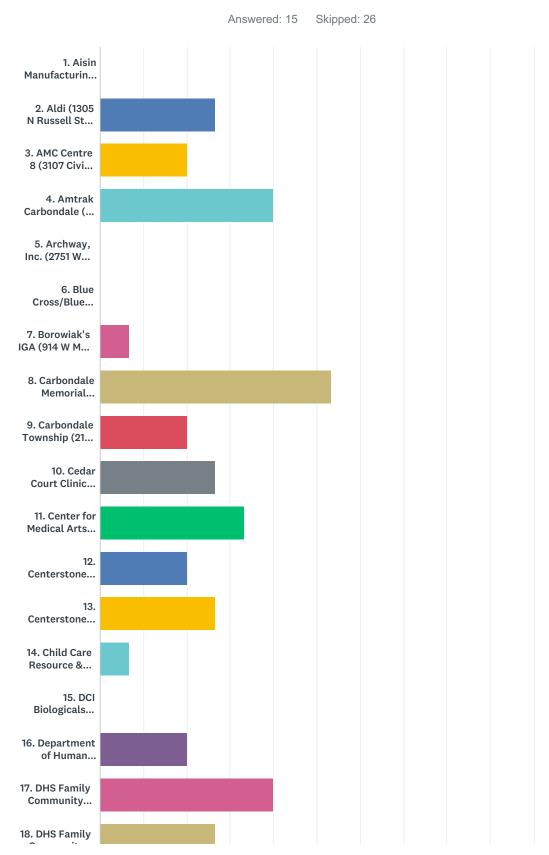
ANSWER CHOICES	RESPONSES	
Weekday mornings	71.43%	5
Weekday afternoons	57.14%	4
Weekday evenings	71.43%	5
Saturdays	57.14%	4
Sundays	42.86%	3
Total Respondents: 7		

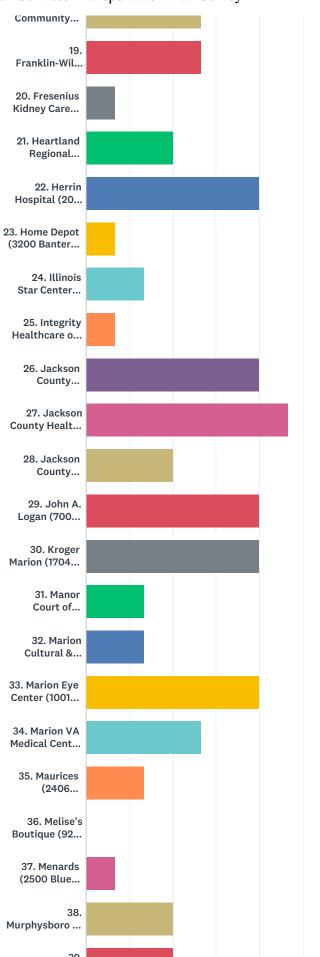
## Q22 What difficulties do you have making these trips? (Check all that apply)

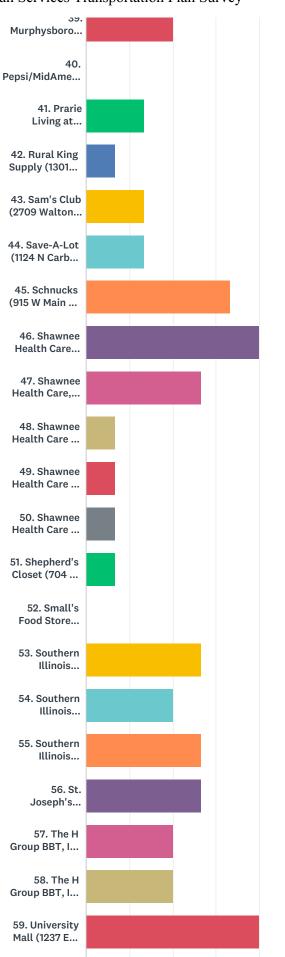


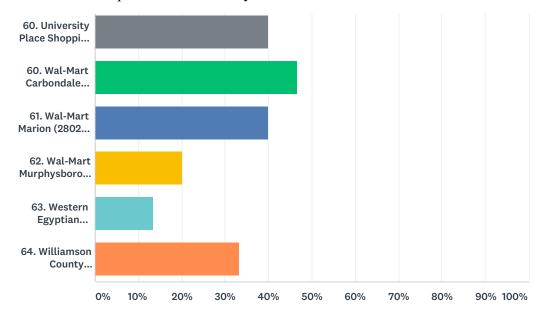
ANSWER CHOICES	RESPONSES	
I don't have reliable personal transportation	85.71%	6
Relatives or friends can't always transport me	57.14%	4
I don't know about the existing public transportation systems	14.29%	1
Existing public transportation does not operate to the location I need to go	42.86%	3
Existing public transportation does not operate at the times I need to go	71.43%	5
Other (please specify)	0.00%	0
Total Respondents: 7		

# Q23 To what destinations do you travel? (check all destinations that apply - map of locations below) All information you provide will remain anonymous.







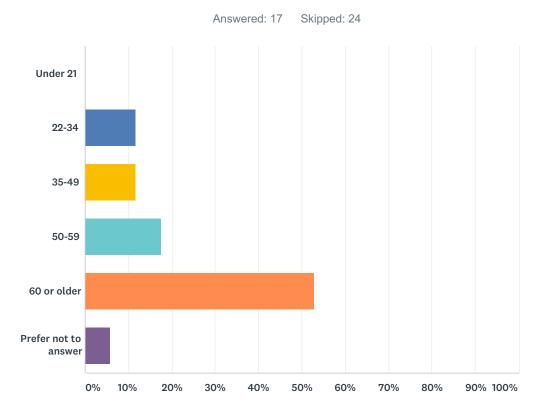


ANSWER CHOICES	RESPON	SES
1. Aisin Manufacturing (1100 Redco Dr, Marion)	0.00%	0
2. Aldi (1305 N Russell St, Marion)	26.67%	4
3. AMC Centre 8 (3107 Civic Circle Blvd, Marion)	20.00%	3
4. Amtrak Carbondale (401 S Illinois Ave, Carbondale)	40.00%	6
5. Archway, Inc. (2751 W Main St, Carbondale)	0.00%	0
6. Blue Cross/Blue Shield (5001 Meadowland Pkwy, Marion)	0.00%	0
7. Borowiak's IGA (914 W Main St, Marion)	6.67%	1
8. Carbondale Memorial Hospital (405 W Jackson St, Carbondale)	53.33%	8
9. Carbondale Township (217 E Main St, Carbondale)	20.00%	3
10. Cedar Court Clinic (1340 N Cedar Ct, Carbondale)	26.67%	4
11. Center for Medical Arts (2601 W Main St, Carbondale)	33.33%	5
12. Centerstone East (2311 S Illinois Ave, Carbondale)	20.00%	3
13. Centerstone West (200 N Emerald Ln, Carbondale)	26.67%	4
14. Child Care Resource & Referral (700 Logan College Rd, Carterville)	6.67%	1
15. DCI Biologicals (301 W Main St, Carbondale)	0.00%	0
16. Department of Human Services (342 North St, Murphysboro)	20.00%	3
17. DHS Family Community Resource Center Marion (1107 W DeYoung St, Marion)	40.00%	6
18. DHS Family Community Resource Center Murphysboro (342 North St, Murphysboro)	26.67%	4
19. Franklin-Williamson Bi-County Health Dept. (8160 Express Dr, Marion)	26.67%	4
20. Fresenius Kidney Care (1425 E Main St, Carbondale)	6.67%	1
21. Heartland Regional Medical Center (3333 W DeYoung St, Marion)	20.00%	3
22. Herrin Hospital (201 S 14th St, Herrin)	40.00%	6

SIMPO Human Services Transportation Plan Survey	SurveyMon	ıkey
23. Home Depot (3200 Banterra Dr, Marion)	6.67%	1
24. Illinois Star Center Mall (3000 W DeYoung St, Marion)	13.33%	2
25. Integrity Healthcare of Carbondale (120 N Tower Rd, Carbondale)	6.67%	1
26. Jackson County Courthouse (1001 Walnut St, Murphysboro)	40.00%	6
27. Jackson County Health Dept. (415 Health Department Rd, Murphysboro)	46.67%	7
28. Jackson County Probation Office (215 N 14th St, Murphysboro)	20.00%	3
29. John A. Logan (700 Logan College Dr, Carterville)	40.00%	6
30. Kroger Marion (1704 W DeYoung St, Marion)	40.00%	6
31. Manor Court of Liberty Village (2950 Westridge PI, Carbondale)	13.33%	2
32. Marion Cultural & Civic Center (800 Tower Square Plaza, Marion)	13.33%	2
33. Marion Eye Center (1001 N Beadle Dr, Carbondale)	40.00%	6
34. Marion VA Medical Center (2401 W Main St, Marion)	26.67%	4
35. Maurices (2406 Williamson County Pkwy, Marion)	13.33%	2
36. Melise's Boutique (928 W Main St, Marion)	0.00%	0
37. Menards (2500 Blue Heron Dr, Marion)	6.67%	1
38. Murphysboro DRS Office (342 North St, Murphysboro)	20.00%	3
39. Murphysboro Food Pantry (906 N 14th St, Murphysboro)	20.00%	3
40. Pepsi/MidAmerica (2605 W Main St, Marion)	0.00%	0
41. Prarie Living at Chautauqua (955 Villa Ct, Carbondale)	13.33%	2
42. Rural King Supply (1301 Enterprise Way, Marion)	6.67%	1
43. Sam's Club (2709 Walton Way, Marion)	13.33%	2
44. Save-A-Lot (1124 N Carbon St, Marion)	13.33%	2
45. Schnucks (915 W Main St, Carbondale)	33.33%	5
46. Shawnee Health Care (400 S Lewis Ln, Carbondale) OR Shawnee Health Care, Same Day – 404 South Lewis Lane, Carbondale ORShawnee Health Care, Behavioral Health – 404 South Lewis Lane, Carbondale	40.00%	6
47. Shawnee Health Care, OB/GYN (101 S Wall St, Carbondale)	26.67%	4
48. Shawnee Health Care – 1006 South Division Street, Carterville	6.67%	1
49. Shawnee Health Care – 1506 Sioux Drive, Marion	6.67%	1
50. Shawnee Health Care – #7 South Hospital Drive, Murphysboro	6.67%	1
51. Shepherd's Closet (704 W Boyton St, Marion)	6.67%	1
52. Small's Food Store (1005 E Main St, Marion)	0.00%	0
53. Southern Illinois Healthcare (1101 Diann Ln, Carbondale)	26.67%	4
54. Southern Illinois Regional Social Services (604 E College St, Carbondale)	20.00%	3
55. Southern Illinois University (1263 Lincoln Dr, Carbondale)	26.67%	4
56. St. Joseph's Hospital (2 Hospital Dr, Murphysboro)	26.67%	4

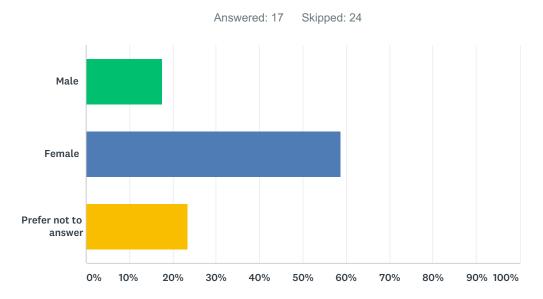
SIMPO Human Services Transportation Plan Survey	SurveyMon	key
57. The H Group BBT, Inc Marion Campus (1307 W Main St, Marion)	20.00%	3
58. The H Group BBT, Inc ICH (3111 Williamson County Pkwy, Marion)	20.00%	3
59. University Mall (1237 E Main St, Carbondale) ORUniversity Place Shopping Center (1300 E Main St, Carbondale)	40.00%	6
60. University Place Shopping Center (1300 E Main St, Carbondale)	40.00%	6
60. Wal-Mart Carbondale (1450 E Main St, Carbondale)	46.67%	7
61. Wal-Mart Marion (2802 Outer Dr, Marion)	40.00%	6
62. Wal-Mart Murphysboro (6495 Country Club Dr, Murphysboro)	20.00%	3
63. Western Egyptian Electric Economic (1820 N Market St, Murphysboro)	13.33%	2
64. Williamson County Courthouse (200 W Jefferson St, Marion)	33.33%	5
Total Respondents: 15		

### Q24 What is your age?



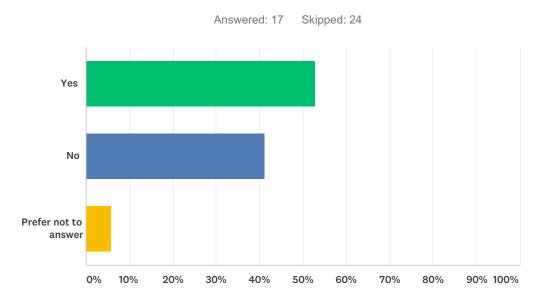
ANSWER CHOICES	RESPONSES	
Under 21	0.00%	0
22-34	11.76%	2
35-49	11.76%	2
50-59	17.65%	3
60 or older	52.94%	9
Prefer not to answer	5.88%	1
TOTAL		17

### Q25 What is your gender?



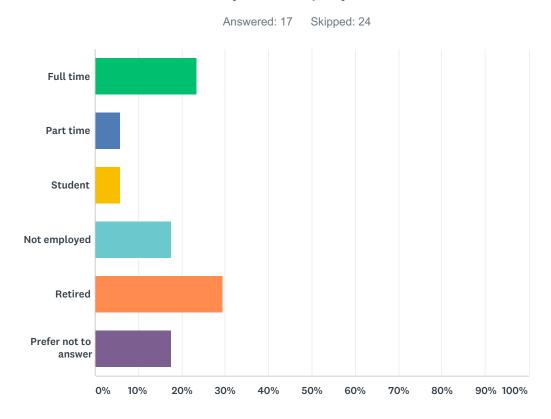
ANSWER CHOICES	RESPONSES	
Male	17.65%	3
Female	58.82%	10
Prefer not to answer	23.53%	4
TOTAL		17

### Q26 Do you have a driver's license?



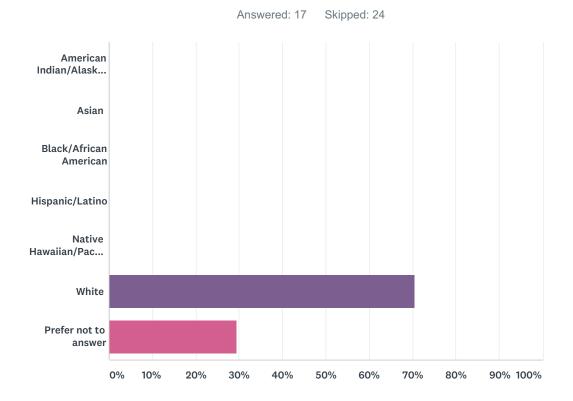
ANSWER CHOICES	RESPONSES	
Yes	52.94%	9
No	41.18%	7
Prefer not to answer	5.88%	1
TOTAL		17

## Q27 What is your employment status?



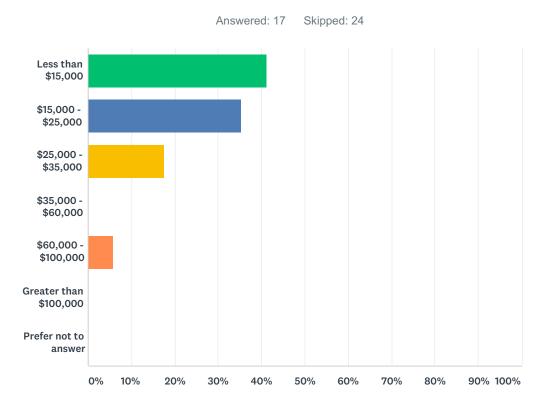
ANSWER CHOICES	RESPONSES	
Full time	23.53%	4
Part time	5.88%	1
Student	5.88%	1
Not employed	17.65%	3
Retired	29.41%	5
Prefer not to answer	17.65%	3
TOTAL		17

### Q28 What is your race/ethnicity?



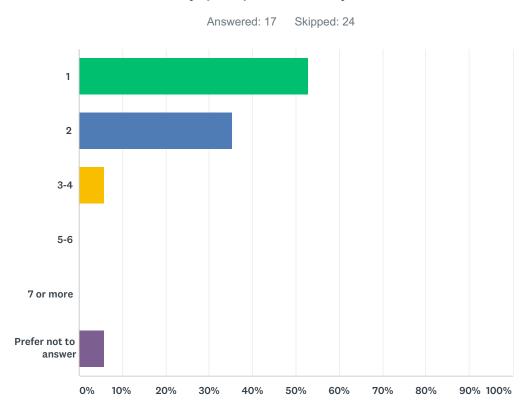
ANSWER CHOICES	RESPONSES	
American Indian/Alaskan Native	0.00%	0
Asian	0.00%	0
Black/African American	0.00%	0
Hispanic/Latino	0.00%	0
Native Hawaiian/Pacific Islander	0.00%	0
White	70.59%	12
Prefer not to answer	29.41%	5
TOTAL		17

#### Q29 What is your annual household income?



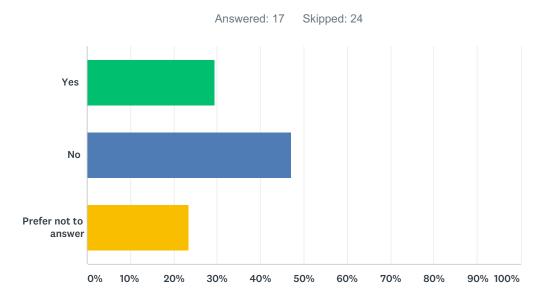
ANSWER CHOICES	RESPONSES	
Less than \$15,000	41.18%	7
\$15,000 - \$25,000	35.29%	6
\$25,000 - \$35,000	17.65%	3
\$35,000 - \$60,000	0.00%	0
\$60,000 - \$100,000	5.88%	1
Greater than \$100,000	0.00%	0
Prefer not to answer	0.00%	0
TOTAL		17

### Q30 How many people live in your household?



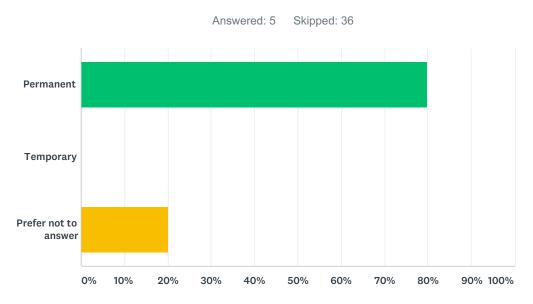
ANSWER CHOICES	RESPONSES	
1	52.94%	9
2	35.29%	6
3-4	5.88%	1
5-6	0.00%	0
7 or more	0.00%	0
Prefer not to answer	5.88%	1
TOTAL		17

### Q31 Do you qualify for disability status?



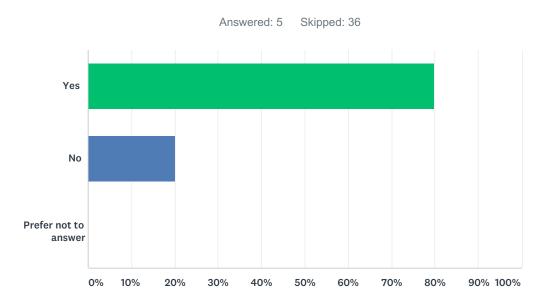
ANSWER CHOICES	RESPONSES	
Yes	29.41%	5
No	47.06%	8
Prefer not to answer	23.53%	4
TOTAL		17

### Q32 Is your disability permanent or temporary?



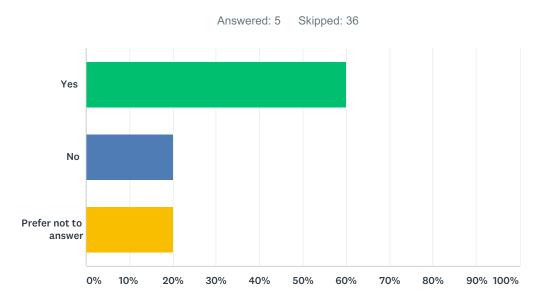
ANSWER CHOICES	RESPONSES	
Permanent	80.00%	4
Temporary	0.00%	0
Prefer not to answer	20.00%	1
TOTAL		5

## Q33 Do you have a person who regularly transports you in a private vehicle?



ANSWER CHOICES	RESPONSES	
Yes	80.00%	4
No	20.00%	1
Prefer not to answer	0.00%	0
TOTAL		5

### Q34 Do you qualify for a disabled parking sticker/placard?



ANSWER CHOICES	RESPONSES	
Yes	60.00%	3
No	20.00%	1
Prefer not to answer	20.00%	1
TOTAL		5

## Q35 Please leave any additional comments you think will help us better serve your transportation needs.

Answered: 6 Skipped: 35



Appendix D – Regional Committee Meeting Summary and Self-Assessment Tool Results



#### **MEETING SUMMARY**

January 9th 2018 **Human Services Date of Meeting:** Re:

**Transportation Committee** 

Location: SIMPO Office February 1, 2018 Issue

3000 W DeYoung St

Suite 800 B-3 Marion, IL, 62959

Date:

**Submitted By:** Lochmueller Group

In Attendance: Ted J Gutierrez, Jackson County Mass Transit District (JMTD)

Bill Jung, RIDES MTD

Terri Finn, South Central Illinois RPC

Joe Zdankiewicz, Southern Illinois Metropolitan Planning Organization

Cary M. Minnis, Greater Egypt Regional Planning and Development Commission

Dustin Riechmann, Lochmueller Group

Michael Grovak, Lochmueller Group

Saumya Jain, Lochmueller Group

#### ITEMS DISCUSSED:

Meeting Agenda (attached) had six main discussion points. The meeting summary is organized under the same points:

#### 1. Welcome and Introductions:

Dustin Riechmann (DR), Director of Traffic Services - Lochmueller Group, opened the meeting by welcoming all the participants and giving a short introduction to Lochmueller Group, the project, relationship between SIMPO region and Lochmueller Group, and the purpose of the meeting. This was followed by introductions where all participants introduced themselves, and briefly described the organization/firm they represented. DR and Michael Grovak (MG) began by describing that since SAFETEA LU, MPOs have been required to prepare a Human Services Transportation Plan (HSTP) as part of their process to select projects for funding under FTA Section 5310 (Enhanced Mobility for Individuals and Individuals with Disabilities). MG also provided an example of a small 5310 system in Brookston, Indiana (where he lives and is volunteer chair of a local transportation committee). This system recently received an increase in state funding during a period when other small rural systems saw decreases. The funding increase was due to the sort of coordination which HTSPs provide. In this case, a local preschool



facility was able to make use of a Section 5310 van when it was not being used to transport senior citizens. The added ridership led to an increase in Section 5311 funding for the system.

#### 2. Agenda Review:

The introductions were followed by distribution of copies (all attached) of:

- Meeting Agenda,
- "Ground Rules" for how have a productive meeting,
- Self-Assessment Results Presentation Handouts, and
- Questionnaire for updating provider inventories.

Beginning with this agenda item, discussions were led by Michael Grovak (MG), Chief of Transit Planning & Economics, Lochmueller Group. He noted that the meeting agenda follows the outline in the Community Transportation Association of America Framework for Action. This guidance includes a Facilitator's Guide for conducting this meeting, as well as a Self Assessment Tool. Participants were provided with the Self Assessment Tool in advance of the meeting. Everyone's responses were tabulated and presented in the next agenda item. The greatest portion of the meeting discussions consisted of the review of these self-assessments. This review of the self-assessments also identified regional priorities as well as identifying elements for the action plan.

MG reviewed the Agenda and role of all the organizations at each step of the Plan. MG briefly reviewed the ground rules for a productive meeting. He noted that these were included in the *Facilitator's Guide*.

#### 3. Review of Self Assessments:

To understand the needs of the region and to get a better understanding of development in the region, all committee member organizations were asked to complete and submit the "CTAA Self-Assessment Tool for Communities" to Lochmueller Group, prior to the meeting. The results of the assessment were analyzed and summarized in a Power Point Presentation for discussion (attached). Individual agency responses to each question are shown on the left side of the slides using an abbreviation for each agency's name.<sup>1</sup> "All" is used to refer to all agencies, or to all agencies not otherwise identified. The average response to each question is shown on the right side of the slides.

The assessment tool covers five main sections and all sections were discussed in detail to understand where each member organization stood individually and how that fits into the regional perspective.

#### a) Making Things Happen by Working Together

All agency representatives agreed that all of their agencies are working together well. However, they do feel that there is scope for significant improvement in the level of coordination that is present between the major service providers (present in the room) and other small scale/specific needs providers that function in the study area. They cited coordination with other agencies, not just in the urban parts of the

<sup>&</sup>lt;sup>1</sup> Abbreviations include JMTD – Jackson County Mass Transit District; RIDES – RIDES Mass Transit District; SAS – Carbondale Senior Adult Services; and RPC – South Central Illinois Regional Planning and Development Commission. SAS provided responses on the Self-Assessment Tool, although it was not able to send a representative to this meeting.



region but also in rural areas. All participants saw a need for guidelines and common platform for coordinating service providers in the region.

Medicaid and related travel arrangements was a common concern. Service providers, especially RIDES and JMTD, face issues with coordinating on trips for patients if there is no direct route to the hospital/medical professional from the patient's residence. Medicaid reimbursement does not allow for multiple service providers for a single trip. A service provider can bill for a trip only if the patient was picked up from his/her residence and was directly taken to the medical facility. In cases where two different entities provide service (RIDES and JMTD was the example cited); the process of billing the miles for two operators is ill-defined.

While discussing coordination issues among different agencies, it was noted that these issues have never been discussed at the monthly MPO meetings. We should begin doing so. It would help bring these matters to the right authorities' attention as well as figuring out funding needs and sources.

#### b) Taking Stock of Community Needs and Moving Forward

The major issues/gaps brought up were all related to needing better coordination amongst agencies working in the region as well as (especially) providing users with a common platform for booking rides. Proper documentation of all available providers is needed to assess gaps in the service network. The Regional Plan also lacks proper documentation of all services in the area.

#### c) Putting Customers First

Different agencies have various means for scheduling trips and taking comments and feedback from customers. However, there is no common tracking for all service providers. RIDES One Call-Center schedules RIDES and JTMD trips but needs future funding to continue. RIDES also has a strong PR presence and conducts county-based listening sessions and online surveys to take feedback. RPC has an active Facebook presence and provides occasional post blogs. Ted Gutierrez (TG) from JMTD showed participants a smart phone app which it has under development. It is further described under point e).

The meeting recessed for lunch. It resumed with agenda item 3d.

#### d) Adapting Funding for Greater Mobility

There was little discussion on this point. All responses rated this element as "needs action." The key points under this element are the need for tracking financial data across programs and the need for a seamless billing system across providers.

#### e) Moving People Efficiently:

All the agency representatives agreed that efforts are needed towards improving service and expanding clientele. Regular users are well informed of the existing services and scheduling method. It is more of an issue with residents who rarely use the services. Non-users often are not aware of the regional call center. There is no "one" website or app for travel information and trip planning.

Jackson MTD has an Android/Apple app with the basic contact information, fares, and service details. The app cannot be used to book a trip at present; adding these features requires added funding. The consensus is that a common website/app, including all service providers, would be an efficient solution to the existing coordination as well as customer service issues.



Additional items raised while discussing the Self-Assessment Tool:

- How would the Region 11 HSTP affect the SIMPO HSTP? Terri Finn (TF) is overseeing the
  updated Region 11 HSTP. Region 11 has 11 counties, and includes the entire SIMPO area. The
  Region 11 plan will include information (such as the inventory of existing providers) which also is
  included in the SIMPO HSTP. The Region 11 HSTP will be published in February, 2018. Based on
  this discussion, MG determined that SIMPO providers would not be asked to submit the
  questionnaires updating their service inventories at this time. A follow up questionnaire will be
  provided (if necessary) after the Region 11 HSTP is issued.
- What comes after the SIMPO HSTP? The SIMPO HSTP plan needs to be updated every three years. The HSTP's priorities and action plan will used by SIMPO for program management. The SIMPO HSTP will be issued shortly after the Region 11 Plan. Future updates to the SIMPO HSTP can be scheduled to coincide with updates to the Region 11 Plan. This committee agreed that there does *not* need to be regular meetings of the SIMPO Human Services Transportation Committee apart from the ongoing Region 11 efforts.
- How is the Plan going to make a difference? SIMPO's HSTP will guide its Technical and Policy committees in program management and funding. Specifically, its Action Plan provides planning support for funding transit initiatives.
- How will the Plan help with procuring funding? As noted in the previous point, it provides
  planning support for projects which will address issues and gaps in SIMPO's human services
  transportation services.

#### 4. Developing Priorities:

After discussing the Self-Assessment Tool, the group moved on to discussing priorities. MG also led this session which was conducted using flip charts. Based on the needs assessment, the group discussed various issues/gaps that need to be prioritized.

- a) Introduction: It was requested/suggested by all the participants that the HSTP needs a thorough introduction. This introduction would address questions such as how often is the Plan required to be updated, how can it change the group dynamics of service providers, and how can help procure funding. This introduction needs to be thorough because this HSTP is the first which SIMPO is preparing.
- b) Medicaid Billing Process: Since the Medicaid billing process came up several times as a concern, it was suggested to be made a priority to get better clarification regarding the process of changing mileage. Service providers need to coordinate better to skip missed payments.
- c) HSA application for funding and vehicle allocation
- d) Better documentation of existing service providers and routes served
- **e) General awareness and publicity:** This could be achieved by using different efforts for different regions. Service providers with most influence in specific areas can lead the efforts in the said areas.



- f) How to keep the conversation going? It is important to maintain active participation of all service providers and authorities throughout the plan process as well as after that. Need for developing different organizational and participatory tools was considered an important step in the success of the plan and regional efforts.
- g) Tie in with regional goals and objectives: It is important that the HSTP document be consistent with SIMPO's Regional Plan. A section should be added that explains how the HSTP would affect previous plans and/or change goals.

#### 5. Action Planning:

This session identified a draft action plan for each issues/gap prioritized to be addressed. Also included are preliminary designations of lead entities. Lochmueller Group (LG) is identified for some items in the Action Plan. This indicates that the SIMPO HSTP will address these items. In some cases, LG items require follow up by one of the region's agencies, as indicated.

S NO.	PRIORITIES	ACTION PLAN	
1	Introduction	<ol> <li>Role of HSTP (LG – MPO).</li> <li>Relationship to the Regional Plan (LG – RPC)</li> </ol>	PС).
2	Medicaid Billing Process	<ol> <li>Near-term briefing of MPO Committees (RIDES).</li> <li>IDOT advocacy (MPO).</li> </ol>	
3	HSA application for funding and vehicle allocation	<ol> <li>Manage as part of overall Region 11 effort (RPC).</li> </ol>	
4	Better Documentation of existing service providers and routes served	<ol> <li>Increase provider cooperation (RIDES).</li> <li>Obtain IDOT support as part of statewide plate to centralize GTSF data for single point of service information and trip planning (MPO).</li> <li>The HTSP will provide updated and current information (LG – MPO).</li> <li>One common Website/App for SIMPO region (with call center) (RIDES).</li> </ol>	)). t
5	General Awareness	<ol> <li>Identifying existing medical centers and facilities in the area (LG – part of HSTP).</li> <li>Public engagement efforts (RIDES)</li> </ol>	
6	How to keep the conversation going?	<ol> <li>Regular agenda items for Technical and Policy Committees (MPO)</li> <li>Teleconferences among regional agencies (MPO).</li> </ol>	
7	Tie in with regional goals and objectives	<ol> <li>Identify related and overlapping issues (LG - Part of HSTP)</li> </ol>	i —

#### 6. Closing Thoughts and Adjournment

DR concluded the meeting by thanking everyone for their participation. The meeting summary will be provided to all attendees for their review and comments before it is finalized.



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