# 2022

# Human Services Transportation Plan for Region 9





II. Department of Transportation\Office of Intermodal Project Implementation South Central Illinois Regional Planning & Development Commission

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# **Mission Statement**

To coordinate the human service transportation efforts of public, private, & non-profit providers to eliminate duplication and maximize services across the region.

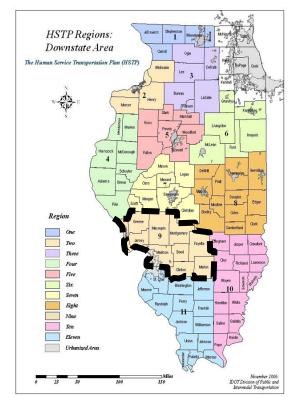
# **Introduction & Executive Summary**

In 2005 the United States Congress enacted the Safe, Accountable, Flexible, and Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU). This act provided funding for various transportation projects including highway construction, mass transit, and human services transportation. Among its provisions, SAFETEA-LU legislation required that all requests for funding through three federal programs; Elderly Individuals and Individuals with Disabilities (Section 5310), Job Access and Reverse Commute (JARC, Section 5316), and New Freedom

(Section 5317) be derived from a locally developed Coordinated Public Transit-Human Services Transportation Plan (HSTP).

# • <u>Purpose of the Human Service</u> <u>Transportation Plan</u>

A coordinated plan maximizes the programs' collective coverage by minimizing duplication of services. Further, a coordinated plan is developed through a process that includes representatives of public, private and non-profit transportation and human services providers, and the public. And, a coordinated plan incorporates activities offered under other programs sponsored by Federal, State, and local agencies to greatly strengthen its impact. The Federal Transit Administration (FTA) also encourages participation in coordinated services will continue to meet the purpose of all programs.

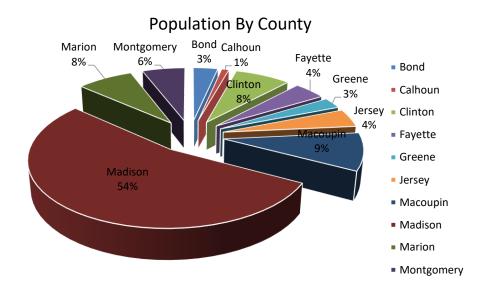


## o <u>Regional Description</u>

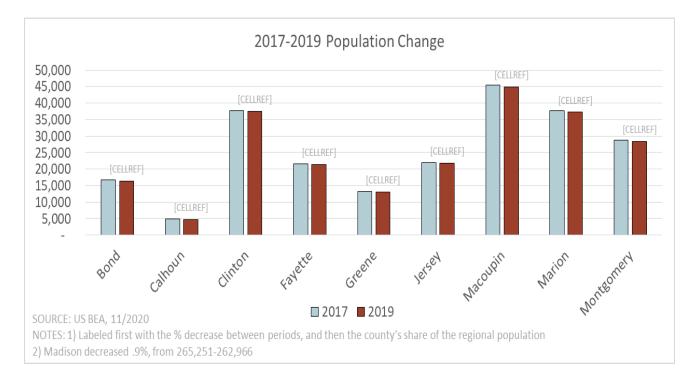
Region 9 is one of eleven downstate Human Services Transportation Planning Regions established by the State of Illinois Department of Transportation, through the Division of Public and Intermodal Transportation (DPIT), now known as the Office of Intermodal Project Implementation (OIPI). The region is comprised of 10 counties located along the western half of South Central Illinois stretching from the Mississippi River to the middle of the state. The region contains the counties immediately to the north and east of the Metropolitan St. Louis Region. These counties are: Bond, Calhoun, Clinton, Fayette, Greene, Jersey, Macoupin, Madison, Marion, and Montgomery.

Of the approximately 488,316 residents of Region 9, over half (262,966) live in Madison County, many of whom fall under the direction of the East-West Gateway Council of Governments

Coordinated Human Services Transportation Plan for the Metropolitan St. Louis Region. Outside of the urbanized portion of Madison County, Region 9 is rural in character, typified by large regions of agriculture with small communities interspersed. Major Highways such as I-55 and I-70 shape the region, bringing travelers through the region and providing access to the St. Louis Metro Area.



The chart below shows the current population, as well as the population at the time of the last Plan update (2017).

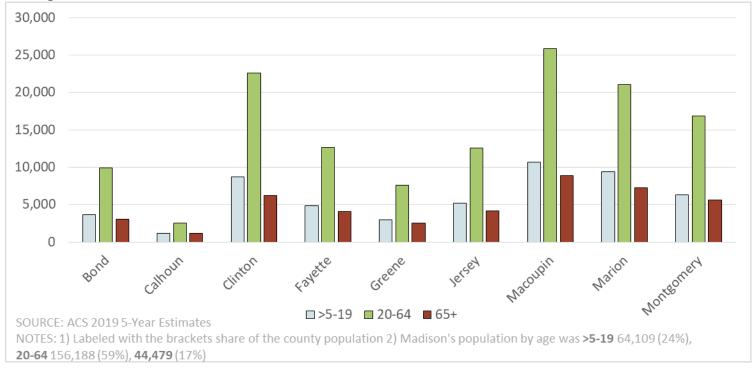


# **Regional Demographic Information**

The populations of the 9 Counties in Region 9, outside of Madison County, are predominantly rural in character. Most of the rural population is clustered around routes into the St. Louis Metropolitan Region. In Clinton County there is a chain of towns both along Illinois Highway 161 and US Highway 50 that attract small businesses & tourism and to a lesser degree US Highway 67 which extends north from Alton towards Macomb and the Quad Cities. The region also includes a stretch of I-70 which extends northeast from St. Louis towards Indianapolis. I-255 and I-270 run through Madison County and intersect with I-55 which reaches north through Macoupin & Montgomery counties to Springfield and south to Missouri.

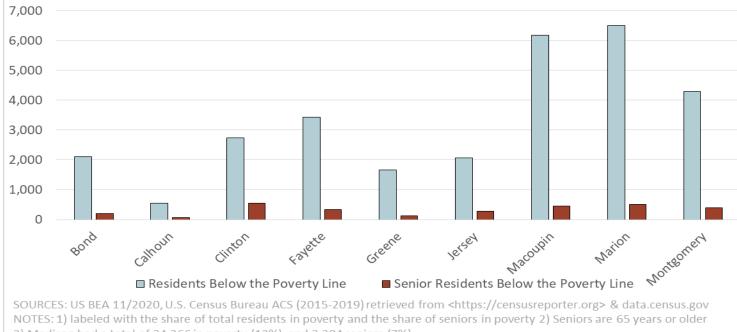
The majority of the population is in the 20-64 age range with a large amount of people commuting into the Metro & St. Louis area for employment, shopping, medical and social\recreational activities, hence the need for major public transportation hubs and linkages. As in a lot of rural communities, poverty is high. Reliable personal transportation is not always an option for many and they depend on their local transit agency to offer a reasonably priced fare option to meet transportation needs.

Disability rates are quite high throughout the region with Calhoun, Marion, and Madison having the highest percentages. Calhoun County is possibly the most rural of all the counties and has only recently had public transportation available. Accessible transportation is essential in assisting the disabled community to medical appointments, as well as meeting daily needs. The charts below break down the diverse population of Region 9.



#### **Age Brackets**

#### **Poverty Brackets**



3) Madison had a total of 34,266 in poverty (13%), and 3,204 seniors (7%)

County	Statistic	All Ages	>5-17	18-64	65+
Bond	Residents	15,347	3,161	9,289	2,897
	With a Disability	2418 (16%)	142 (4%)	1123 (12%)	1153 (40%)
Calhoun	Residents	4,750	1,009	2,680	1,061
	With a Disability	1049 (22%)	90 (9%)	483 (18%)	476 (45%)
Clinton	Residents	35,508	7,972	21,548	5,988
	With a Disability	5062 (14%)	221 (3%)	2449 (11%)	2392 (40%)
Fayette	Residents	19,948	4,454	11,566	3,928
	With a Disability	3527 (18%)	188 (4%)	1758 (15%)	1581 (40%)
Greene	Residents	12,849	2,729	7,674	2,446
	With a Disability	2000 (16%)	163 (6%)	885 (12%)	952 (39%)
Jersey	Residents	21,588	4,531	13,090	3,967
	With a Disability	3063 (14%)	124 (3%)	1584 (12%)	1355 (34%)
Macoupin	Residents	44,981	9,683	26,848	8,450
	With a Disability	6609 (15%)	482 (55)	3288 (12%)	2839 (34%)
Madison	Residents	262,150	58,106	160,908	43,136
	With a Disability	38004 (14%)	3081 (5%)	19368 (12%)	15555 (36%)
Marion	Residents	37,041	8,665	21,470	6,906
	With a Disability	6964 (19%)	652 (8%)	3338 (16%)	2974 (43%)
Montgomery	Residents	25,894	5,776	14,779	5,339
	With a Disability	3813 (15%)	174 (3%)	1729 (12%)	1910 (36%)

#### **Disability Brackets**

# **Regional Transportation Committee (RTC) Make-Up**

The primary purpose of the RTC is to discuss mobility management and coordination issues of the region. These issues can come from results of needs assessments, updates on the progress of the Regional

Plan that address service gaps, Coordinator's direct assistance to ride-seekers, etc. Committee members and other attendees are encouraged to bring any transportation service gaps or community need that they have identified.

The committee is also tasked with reviewing and recommending applications for funding for Section 5310 Consolidated Vehicle Procurement (CVP) program, as well as discussion of the program and vehicle issues.

The RTC role is vital to insure that the planning process is reflective of the needs of local transit operators and the general public in Region 9 and the surrounding area.

Meetings are held quarterly throughout the region and hosted by committee members on a voluntary basis.

#### • Levels of Participation

As part of any application endorsement process, agencies applying for various IDOT funds must participate in the Regional Committee meetings, as a coordinating entity, throughout the year. There are various levels of participation that an agency can achieve. This level system will be used by the HSTP Coordinator(s) when evaluating and scoring any agency applying for vehicle funds (5310 Consolidated Vehicle Procurement). Agencies designated as Inactive will be removed from consideration for funding. Leadership Participant: An agency designate that routinely volunteers leadership, data, and resources to coordination planning and service provision and attends all quarterly HSTP Committee meetings.

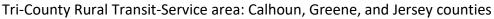
<u>Active Participant</u>: An agency designate that routinely meets committee requests with data, information and resources in the development of strategic planning and attends all quarterly HSTP Committee meetings.

**<u>Participant</u>**: An agency designate that regularly attends planning meetings only. <u>Inactive</u>: An agency designate that does not currently participate in meetings, planning, or service provision.

# **Transportation Service Providers**

#### Public Transportation Providers:

Bond County Transit-Service area: Bond County Central II. Public Transit-Service area: Clay, Christian, Fayette, Montgomery, Moultrie, and Shelby counties Macoupin County Transit-Service area: Macoupin County Madison County Transit & ACT-Service area: Madison County South Central Transit-Service area: Clinton, Franklin, Jefferson, Marion, and Washington counties





#### Human Service and 5310 Transportation Providers:

Beverly Farm Foundation-Godfrey Challenge Unlimited-Alton Community Link-Breese FAYCO Enterprises-Vandalia II. Center for Autism-Fairview Heights II. Valley Rehab-Gillespie & Jerseyville Main Street Community Center-Edwardsville Residential Options-Alton Senior Services Plus-Alton Village of Glen Carbon/Glen Carbon Sr. Center-Glen Carbon

#### Other:

Amtrak-Alton, Carlinville, and Centralia Abbott Ambulance-Granite City, Pontoon Beach, Hamel, Alhambra, Edwardsville Checker Cab Co.-Granite City Faith in Action-Collinsville & Granite City Friends Van of St. Joseph's Hospital-Highland & Breese Gateway Paralyzed Veterans of America-St. Louis Harvest Transportation-Belleville Helping Hands, Inc.-Belleville

# **Coordination Efforts & Successes from Previous Plan**

Coordination of transportation efforts in most rural areas of Illinois, including Sub-state Region 9, has been at best limited, and only on a local scale. The HSTP process represents the first real effort to coordinate transportation services on a regional scale. Prior to the beginning of the HSTP planning process, any coordination was done informally between service providers or agencies who require transportation for their clients.

The Regional Plan was developed to promote a more managed effort for all providers of transportation to coordinate trips, services, funding, etc.

# **Regional Coordination Success**

#### Gap 1-Improve\increase coordination among existing providers

- o Goal Coordinate transportation among existing 5311 & 5310 providers.
- Strategies to accomplish this goal include:
  - #4 Better use of 5310 vehicles by social service agencies by reducing silo type transportation and opening transportation service to the general public.

<u>\*Fayco coordinated, in the form of service contracts, with Bond Co. Transit & CIPT for</u> <u>employment trips of its clients.</u>

<u>\*The II. Center for Autism is reducing the amount of transportation it provides to clients</u> and now has a service contract MCT\ACT.

#5 Increase lines of communication between public & private providers.

<u>\*South Central Transit & Community Link worked together to create a route that goes</u> from Clinton Co. to Washington Co.'s employment hub to better serve the clients of <u>Community Link and residents that might need transportation along that route.</u>

# Gap 2- Insufficient amount of transit vehicles to meet service needs in rural\non-urbanized areas

- Goal: Increase &\or maintain fleet sizes to better increase services & ridership
- Strategies to accomplish this goal include:

#1 Apply for available funding to increase vehicle fleets and identify underserved areas & increase vehicle availability to those areas.

<u>\*While most to all agencies are attempting to at least maintain their fleet size, agencies</u> <u>that need to replace vehicles do so thru the CVP application process except in 2019 &</u> <u>2020 when applications were not made available from IDOT.</u>

## Gap 3-Lack of transportation for medical services

- Goal Increase transportation for health care purposes
- Strategies to accomplish this goal include:

#3 Begin a dialogue with health care\medical providers to better coordinate transportation for patients

\*HSHS St. Joseph's Hospital now has a "Friends Van" available for transportation within Clinton Co. (Carlyle and towns west). Medical appointments take priority and can be requested on the same day, but personal appointments must be scheduled 2 days in advance. This service is sponsored by the St. Joseph's Foundation and is free of charge. Friends Van, Community Link vehicles and SCT operate during the same times of day but offer differing services. Friends Van is open to the public and is mostly used as nonemergency medical transportation.

<u>\*Tri-County Rural Public Transit is coordinating services with Macoupin Co. Public Transit</u> to provide medical trips to the Springfield area.

#### Gap 4-Lack of county-through-county & countywide services

- o Goal Coordinate transportation throughout counties
- Strategies to accomplish this goal include:

#1 Coordinate between counties and develop transfer locations to minimize the number of vehicles used to complete trips

<u>\*Tri-Co. Rural Public Transit is coordinating services with Macoupin Co. Public Transit</u> for the Lewis & Clark College Project, as well as coordination with Madison Co.

Transit for service trips to Alton. (This would also be a coordination effort for Gap 1)

#2 Better coordination efforts and vehicle use by human service agencies, that have 5310 CVP vehicles, to fulfill their obligation to serve the general public's transportation needs

\*FAYCO is coordinating service with Bond Co. Transit and CIPT for employment trips.

#### Gap 5-Need for extended service hours

- Goal Temporal gaps in service (provide transportation during evening and weekend hours)
- Strategies to accomplish this goal include:

#1 Develop a study in those areas to determine the level service that may be provided based on population density

<u>\*Tri-Co. Rural Public Transit is expanding service hours to 6 a.m.-6 p.m. Monday-</u> <u>Friday.</u>

## Needs Assessment

The identification of needs and gaps is paramount to a coordinated transportation plan as well as the ongoing effort to improve the system for the community, riders and the transportation providers. The following is not an exhaustive list but represents conclusions drawn based on a surveying effort of Community, Transit Agencies and Transit Riders in the Spring of 2022 as well as discussions held during HSTC meetings. This list seeks to provide direction for funding and efforts to improve the current transportation system and any agency providing or purchasing transportation for clients should consider this plan and its objectives when making decisions affecting transportation services.

Each identified gap represents an area for improvement within the existing transportation system. All organizations which provide transportation are urged use the strategies listed. Agencies which plan on requesting grant money to provide transportation, or that may do so in the future, should take into account strategies and methods of coordination which involve communication, service, and possible resources. Requests for Federal funding from Sections 5310, 5311 or other such governmental funds which meet the needs outlined below will receive a more favorable score than projects which do not address an identified gap in service. Each general gap is followed by a goal, strategy for achieving the goal & closing the gap, and a quick description of the problem.

**Community:** The community has indicated through the surveying effort that disabilities are the largest obstacle to getting around the region to their necessary doctor appointments and personal shopping. In fact, the conclusions indicate that the most common types of travel that can't be made are medical appointments and shopping. Additionally, the surveys of community members indicate that a door-to-door transportation service is the most requested type of public transportation. All of these different conclusions indicate that folks need available transportation from their home to nearby medical and shopping centers.

**Riders:** The surveying effort of current public transportation riders also indicates that medical trips and personal shopping are the most essential trips that are needed. Since the ridership in this region includes predominantly senior citizens and individuals with disabilities, reaching their scheduled medical appointments and having access to shopping centers for grocery and household goods are vital.

The current ridership has noted that the largest obstacle in the current service is the hours of operation and the advance reservation timeframe required. Stemming directly from this surveying conclusion, the ridership has noted:

- The need for more available service hours in the evening to late evening;
- That the greatest barrier to mobility in community is the advance notice needed to request a ride; and
- The ability to connect to other transit agencies is currently the biggest transportation issue

**Agency:** The surveying effort of the region's agencies have found that the current public transportation service can be improved in the community through expanded hours of operation, expanded services outside of town, and the accessibility of service. According to the region's agencies, the clients are requiring medical transportation outside of the county. This may require more inter-agency communication to allow riders to move from one transit agency to another to make these medical trips from one county to another. The overall availability of service is the highest requested change for clients according to Region 9 agencies.

# o Identification of Service Gaps and Needs\Strategies & Actions

HSTP Region 9 recently surveyed transit riders, community members, area agency staff & transit providers to assess the transportation needs, as they currently see them. Each identified gap represents an area for improvement within the existing transportation system. The following is not an exhaustive list of ideas that regional community members addressed but it does represent the main points of action that should be addressed in this 3-year plan duration. Any agency providing or purchasing transportation for clients should consider this plan and its objectives when making decisions affecting transportation services. All organizations which provide transportation are urged to use the strategies listed or share, with the Committee, any best practice strategies should also provide direction for funding requests in an effort to improve the current transportation system. Agencies that plan on requesting grant money to provide transportation, or plan to do so in the future, should consider strategies and methods of coordination which involve communication, service, and available resources.

Service: Public transit providers, as well as human service agencies that provide client transport are encountering staff shortages and higher costs of doing business. These problems are greatly affecting the service that they are able to provide. Until the staff shortages decrease, it will be hard to get all riders where they want to go when they want to be there. Currently, the 6 public transit providers are drastically short on qualified drivers & scheduling\dispatch staff. Staff shortages at the numerous human service agencies in the region are also affecting day-to-day operating issues, which includes transporting clients. Higher wages, referral bonuses, sign-on bonuses & other financial benefits are attempts all are making to encourage the workforce to return.

All agencies will continue to bridge this gap by:

1. Keeping wages & benefits at a competitive rate

- 2. Recruitment—advertising & community involvement
- 3. Improving work environments

And while most riders replied that they are satisfied with the service that they receive from their local transit provider, they did address the problem areas that they are facing:

- Long wait times for pick up
- o Bus stops either too far from home or the destination
- The need to travel beyond 7am-5pm timeframes
- The need to travel on weekends
- Confusion as to available service and how to access\use the bus\system
- o Restrictive advance reservation rules & minimal scheduling flexibility
- The lack of available transportation in very rural areas and Madison County's non-urbanized area
- The need to travel to other areas for medical appointments (St. Louis & Springfield)
- Lack of attention to passenger needs
- Poor communication about late or cancelled trips
- A lack of communication & coordination between providers to meet the rider requests
- <u>Strategy</u>: While each transit district is different and has its own set of operational issues to contend with, it may help to survey riders and others in their own communities to better understand the needs of those they closely serve. Then, <u>use</u> the information to form a service plan that is implemented to close local gaps and meet community needs which would then progress into the entire region. Ongoing outcome: SCT reports surveying on when service is needed. Tri County surveys drivers & riders on a yearly basis and has an open house. CIPT does yearly surveys via mail and driver-to-rider. Macoupin Co. Transit does the same as CIPT. ACT has public meetings for input to proposed changes and a demographics survey yearly.

<u>Dec. 2022 update</u>—Madison Co. Transit has extended the hours of service on a route that includes SIU-E and SWIC college students taking evening classes. And, the Glen Carbon Sr. Center has extended their daytime hours to better assist seniors and people with disabilities needing transportation in the Glen Carbon\Edwardsville area. March 2023 update-Most providers are reporting that new workers are coming and going and the situation is getting better but still some hiccups as service continues to bounce back & increase.

<u>June Update</u>: MCPT is increasing in-town routes. While this could prove to be beneficial to the agency and to <u>some</u> residents, MCPT will be reducing door-to-door service with increased fares, which could be detrimental to others.

Sept. 2023 update: Bond County Transit has increased their social media presence for recruitment, hiring, and community support.

MCT, unfortunately, is having route reductions due to driver shortages.

Also on the downside, the public providers were not too receptive to increase coordination efforts or to train schedulers as is being done in Region 11. <u>This also affects the Coordination gap.</u>

<u>March 2024 update</u>: Madison Co. Transit has been sending a hiring bus into the public to recruit people who may not otherwise know about transit jobs available. They have been setting up at local movie theaters and handed out applications. This is being done to address the driver shortage.

CIPT/CEFS has been going to job fairs (in Vandalia and Effingham) and advertising their strengths as an employer to potential drivers. CIPT has also hired a driver as a dispatcher, which has been a huge advantage, as the employee already has first hand knowledge of the routes.

Starting wage for drivers: CIPT is \$16.28, Bond Co. is \$14, Glen Carbon is \$18. Agencies have been slowly raising the minimum wage for drivers to keep wages at a competitive rate.

<u>June 2024:</u> Madison Co. Transit – In May, there was a quarterly service change. They hosted a zoom meeting with riders to determine needs to improve routes and decrease single rider trips as well as meeting the needs of their riders.

With the meeting being via zoom rather than in person, the meeting is more accessible to their riders.

MCPT recently sent out postcards to all their contacts to notify riders of rate change, along with posting the information Facebook. They have seen an uptick in rides since then.

<u>December of 2024 Update</u>: CIPT reported hiring more drivers and promoting drivers to dispatchers as well as promoting dispatchers to other positions within the agency. MCT reports a route change beginning January 12<sup>th</sup>. MCT offers a micro-transit service in Collinsville that will be replacing a route that is being discontinued. This is MCT's first and only micro-transit service. It is available in Collinsville M-F 7 a.m. to 7 p.m. and Sunday from 9 a.m. to 3 p.m.

<u>Coordination</u>: A better working relationship between transit providers would be key in getting riders from their home location to a distant destination that crosses another provider's district and routes, then getting them back home. The question is, how do we build this relationship and make it manageable?

<u>March 2023 update</u>-as more information is shared about the Region 11 efforts of public providers to make coordination better, the Region 9 committee has expressed interest in doing the same training and efforts.

<u>June Updates:</u> CIPT, SCT & Bond Co. Transit are working with Fayco and Community Link to provide driver and other trainings as requested.

Public providers in the region have shown interest in increasing coordination efforts between each other and will be following the efforts that Region 11 providers have started by training the scheduling & dispatch staff on customer service and working together as a region. <u>March 2024:</u> Glen Carbon Sr. Center will refer their clients to other transit agencies in the region for medical trips if they cannot make the trip happen.

<u>June 2024:</u> Madison Co. Transit recently started providing transportation to take riders from Beverly Farm Foundation to employment training.

Software that is shareable to others would be an ideal way for schedulers at each transit office to view where & when buses from other districts are traveling and coordinate a trip. Also, training schedulers to look beyond their own district would be easy & beneficial to all. Schedulers can tend to deny a trip that doesn't fit into the day-to-day routes that they plan. With some coordinated training, schedulers could reach out to other districts to request assistance with an out of county trip. This would save vehicle resources, drivers that may be taking 1 rider to a distant appointment, fuel usage, etc.

• <u>Strategy</u>: 1. Advocate for shareable software. 2. Work with other transit providers to train schedulers on coordination. 3. Advocate with RTAC on schedulers training that would benefit coordination efforts.

**Outreach**: Survey replies from the medical field and other human service professionals suggest that patients\clients are missing appointments due to lack of transportation and even the lack of accessible transportation. They also addressed long wait times for patients that have finished appointments and need a ride back home. These providers mostly rely on what patients\clients tell them and may not be aware of the way such trips may be scheduled. Some medical facilities pay for patient transportation due to lack of patient funds to pay for trips to see their doctor. Survey results show a concern for high fare costs which would also suggest that social workers and others may not be aware of discounted rides for seniors and people with disabilities.

• <u>Strategy</u>: Transit providers can contact local hospitals, medical facilities, behavioral health clinics, etc. to inform them of transportation services and costs. Scheduling issues could also be discussed so that a patient\client that is a known transit user would get scheduling assistance that would benefit all.

Proposed outcome: Since staff turnover occurs frequently at such facilities this communication would need to be done on a regular basis.

<u>June Updates</u>: SCT reports that they have a service contract with a local hospital to provide trips.

CIPT has received a grant (ARISE) that has allowed the agency to employ a medical scheduler. This person will work with riders that have specific medical transportation needs\issues to work the trip out between CIPT service times and the medical

facilitator. This staff person will also work to inform medical facilities in the area of the transportation that is offered in the various areas of transit district.

<u>March 2024 update</u>: Bond County is now providing medical trips to its riders into Glen Carbon & Edwardsville once a month.

CIPT reports that medical trips are improving since the medical scheduler has been employed.

<u>December of 2024 Update</u>: MCT has partnered with Chestnut Health Systems (a private, not-for-profit organization, to offer support to the riders of MCT. Beginning December 1<sup>st</sup>, Chestnut Health Services has deployed behavioral health teams at MCT transfer stations and on MCT buses in Madison County. The goal is to engage riders, conduct screenings, and link riders to necessary services, including mental health,

substance use, primary medical care, as well as community and recovery supports. Survey replies also state that many people don't know how to maneuver thru the schedulingto-ride process or finding a route to get to a desired location which makes them apprehensive to attempt to use the bus service. These riders may be as young as teenagers that can't or don't drive to senior citizens that can no longer drive. Making the service known to all is a winwin.

• <u>Strategy</u>: Offer mobility management training on a regular basis. Training could be provided at high school transition events or classrooms, senior centers, assistive living homes, offered at a community center and sponsored by your transit district. The possibilities are endless and can open up an entire new group of riders.

The most important takeaway from these findings is that people rely on transportation for many aspects of their lives, and it is up to all regional providers of transportation to keep the wheels rolling and get the riders where they need to go.

## **Mobility Management**

Mobility Management is a service provided to assist local agencies and individuals to gain better access to transportation. The HSTP Coordinator's along with staff, of most if not all public transportation agencies are working to advance the coordination within their regions and the State of Illinois. Given the right Mobility Management tools, citizens should be able to find the rides that they need, as well as, empower those citizens on how to access and use the services offered in their communities.