

PUBLIC TRANSIT AND HUMAN SERVICES TRANSPORTATION COORDINATION ACTION PLAN TWIN CITIES METROPOLITAN AREA

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I. Introduction

This section provides important background information for this Plan, including:

- Federal Background – Information about the federal law motivating the creation of coordination plans around the country,
- Coordination Plan Requirements
- Programs – Applicable funding programs
- Program Eligibility – Types of projects that may be funded
- State Background – State of Minnesota planning
- Plan Goals – Specific goals of the Plan
- Plan Process – Process for developing each section
- Study Area – The area covered by this Plan

Federal Background

The Federal Transit Administration (FTA) is interested in assisting people who are disadvantaged in terms of their ability to obtain their own transportation. The United We Ride program was established in February 2004 by the U.S. Department of Transportation to improve coordination of public transit and human services transportation. In August 2005, Congress passed the Safe, Accountable, Flexible, Efficient, Transportation Equity Act: A Legacy for Users (SAFETEA-LU), reauthorizing the Surface Transportation Act. Part of this reauthorization established new requirements for grantees under the New Freedom Initiative, Job Access and Reverse Commute (JARC) and Elderly and Disabled Transportation (5310) programs starting fiscal year 2007. These new requirements include the creation of coordination action plans for public transit and human services transportation at the state, regional and local levels. The plans are meant to establish goals, criteria and strategies for delivering efficient, coordinated services to elderly, underemployed or otherwise financially disadvantaged persons and persons with disabilities.

The August 30, 2006, proposed FTA guidance for each funding program includes a chapter on the coordinated planning process. This chapter, which is identical in each program guidance, states that projects selected for funding from each program must be “derived from a locally developed, coordinated public transit-human services transportation plan” and that the plan be “developed through a process that includes representatives of public, private, and non-profit transportation and human services providers and participation by members of the public.”

On July 6, 2012, the new transportation reauthorization legislation, Moving Ahead for Progress in the 21st Century (MAP-21), was signed into law. The following sections provide detailed information on the Programs as provided in SAFETEA-LU and MAP-21.

Coordination Plan Requirements

FTA has provided specific guidelines for the preparation of the Coordination Plan. The following are the four key requirements of the Coordination Plan, verbatim from the Circulars for FTA 5310, 5316, and 5317:

“(1) An assessment of available services that identifies current transportation providers (public, private, and non-profit);

(2) An assessment of transportation needs for individuals with disabilities, older adults, and people with low incomes. This assessment can be based on the experiences and perceptions of the planning partners or on more sophisticated data collection efforts, and gaps in service (Note: If a community does not intend to seek funding for a particular program (Section 5310, JARC, or New Freedom), then the community is not required to include an assessment of the targeted population in its coordinated plan);

(3) Strategies, activities and/or projects to address the identified gaps between current services and needs, as well as opportunities to improve efficiencies in service delivery; and

(4) Priorities for implementation based on resources (from multiple program sources), time, and feasibility for implementing specific strategies and/or activities identified.”

The goal of the coordinated planning process is not to be an exhaustive document, but to serve as a tool for planning and implementing beneficial projects. The FTA requires that, at a minimum, the coordinated plan follow the same plan update cycle of the metropolitan transportation plan. FTA does not approve coordinated plans.

Programs in SAFETEA-LU

Below are short descriptions of the Section 5310, 5316 and 5317 programs and updates on the local impacts of those programs since 2008.

ELDERLY AND DISABLED PROGRAM CAPITAL ASSISTANCE FOR SPECIALIZED TRANSIT VEHICLES

Section 5310 is a formula-based funding program for capital vehicle expenses that assist local private nonprofit and certain public agencies in delivering transportation to the elderly and disabled. Capital expenses include buses, but may also include purchased transportation services and state program administration. The Minnesota Department of Transportation (MnDOT) is the direct recipient of federal funding for the program and administers the program. The current program structure is a competitive solicitation with a 20 percent local match.

JOBS ACCESS REVERSE COMMUTE (JARC)

Section 5316 was a newly created program under SAFETEA-LU. The purpose of JARC is to help address the transportation needs of unemployed and underemployed persons in accessing jobs. Public transit primarily serves people entering the central city area while entry-level jobs are being created in the suburbs. JARC programs should provide innovative ways to address this issue. Examples of JARC-funded programs include reverse-commute bus routes, vanpools, work force circulators and mobility managers. The Metropolitan Council is the direct recipient of the federal JARC funds and the JARC funding must be competitively solicited for distribution. The current structure requires a 50 percent local match for net operating deficit or a 20 percent local match for capital expenses.

NEW FREEDOM PROGRAM

Section 5317 was a newly created program under SAFETEA-LU. The purpose of New Freedom is to expand transportation services for the elderly and persons with disabilities beyond what is required by the Americans with Disabilities Act (ADA). Some examples of this include same-day service, door-through-door service and service beyond the ¾-mile requirement of a fixed route. The Metropolitan Council is the direct recipient of the federal New Freedom funds and the New Freedom Program funding must be competitively solicited. The current structure requires a 50 percent local match for net operating deficit or a 20 percent local match for capital expenses.

Programs in MAP-21

The adoption of MAP-21 drastically changed the programs. The federal transportation act no longer contains Sections 5316 (JARC) and 5317 (New Freedom). Section 5317 was merged with Section 5310 and will continue to be administered by MnDOT.

ELDERLY AND DISABLED PROGRAM CAPITAL ASSISTANCE FOR SPECIALIZED TRANSIT VEHICLES, INCLUDING FORMER NEW FREEDOM

MAP-21 continues to allow recipients of Section 5310 funds to sub-allocate to private nonprofits or state/local government authorities, provided that the state/local authority coordinates service and has certified that no private nonprofit is readily available. The law codified the Senate proposal that the award for each state be distributed in the following manner:

- 60 percent designated for recipients in urban areas greater than 200,000 in population
- 20 percent designated for urban areas between 50,000 and 200,000 population
- 20 percent to rural areas.

Operating assistance is now available in the Section 5310 program. The Section 5310 program recipients must certify that the projects selected are included in a locally developed, coordinated public transit-human services transportation plan. The plan must be developed and approved through a process that includes seniors and people with disabilities and is coordinated to the maximum extent possible with transportation services assisted by other federal departments and agencies.

The former Section 5317 New Freedom program is combined into the larger Section 5310 program. By 2014, the Section 5310 program will grow by more than 90 percent compared to FY 2012 funding levels. In the General Authority for Section 5310, it now states that the Secretary may make grants under this section to recipients for public transportation projects that exceed the requirements of the ADA.

FORMER JOBS ACCESS REVERSE COMMUTE (JARC)

In MAP-21, Section 5316 Job Access and Reverse Commute program were combined into the urban (5307) and rural (5311) formula funding programs. In each of these formula programs, under General Authority, job access and reverse commute projects are eligible projects. Simply put, the transit agencies with JARC programs they wish to continue have the ability to use their formula funds (either Section 5307 or 5311) to do so.

PROJECT SOLICITATION

Project Solicitation for the 5310 program (including the merged New Freedom) will be conducted by MnDOT.

Funds awarded in the SAFETEA-LU law, will be solicited by the Metropolitan Council, which is recognized as the region's Metropolitan Planning Organization. This includes 2012 JARC funding and 2011 and 2012 New Freedom funding. The solicitation of these funds will occur after the adoption of the Coordination Action Plan.

Program Eligibility

Solicitations for projects under the above-mentioned Federal programs should consider the following FTA-established criteria when establishing priorities:

- Ability of the program to address current gaps in service delivery in communities where significant demand exists
- Supports or initiates coordination efforts that are achievable within the technical capacity of the project sponsor
- Makes use of available resources and leverages resources to the greatest extent possible
- Establishment of new means of coordination that promote further efficiencies and opportunities
- Ability to document successful implementation for continuing projects

Projects identified in this document under Strategies and Actions are eligible because they have been recognized as needs. In addition, projects with documentation exhibiting some degree of new coordination that fill and identified need or gap will be eligible if the coordination is deemed appropriate. Eligible projects, according to the FTA, will include the following:

Mobility Management – These activities are eligible capital projects defined as “consisting of short-range planning and management activities and projects for coordination among public transportation and other transportation service providers carried out by a recipient and sub-recipient through an agreement entered into with a person, including a government entity; but excluding operating public transportation services.” They can be funded by federal transportation grants that include a capital option. Examples of eligible projects include:

- Development of coordinated transportation plans
- Maintenance and operation of transportation brokerages to coordinate providers, funding agencies, and customers
- Development and maintenance of other transportation bodies and their activities, including Transportation Management Organizations (TMO) and neighborhood travel coordination
- Development and support of transportation coordination information centers, including one-stop call centers and management of eligibility requirements and arrangements for customers among supporting programs
- Acquisition and operation of intelligent transportation technologies to help plan and coordinate vehicle scheduling, dispatching, and monitoring technologies as well as billing and payment systems

New Freedom Program – The FTA states eligibility for these funds be open to projects that are “new public transportation services” and “public transportation alternatives beyond those required by the ADA” that assist individuals with disabilities with transportation. Examples of eligible projects include:

- Door-through-door service – Assistance that extends into the destinations of patrons
- Feeder service – Paratransit that complements service for which ADA is not normally required, such as commuter rail or intercity bus
- Paratransit beyond ¼ mile of a fixed bus route or rail transit station, including continuation of existing service
- Same-day ADA service

Job Access and Reverse Commute – Previously funded JARC projects that are able to document successful implementation will be eligible. New projects must relate to “the development and maintenance of transportation services designed to transport welfare recipients and eligible low-income individuals to and from jobs and activities related to their employment.” Examples of eligible projects targeted at welfare recipients and eligible low-income individuals transitioning into work include:

- Public transit late-night and weekend service
- Public transit guaranteed ride home service
- Expanding fixed-route mass transit routes
- Demand-responsive van service
- Ridesharing and carpooling activities

- Local car loan programs that assist individuals in purchasing and maintaining vehicles for shared rides
- Promotion of public transit for non-traditional work schedules;
- Voucher programs targeted to persons entering the workforce or on welfare;

Recommended Performance Measures – The FTA has established recommended measures of performance for projects applying for funding. The performance measures will fall under the following categories:

- Efficiency of Operations – Increase the number of rides for persons who are older, persons with disabilities and persons with limited incomes for the same or lower cost.
- Program Effectiveness – Increase the number of communities with easier access to transportation services for persons who are older, persons with disabilities and persons with limited incomes.
- Customer Satisfaction – Increase the quality of transportation services for persons who are older, persons with disabilities and persons with limited incomes.

The percentage of increase is stated in terms of an annual target, which will be established after a baseline has been determined and validated during the first year.

State Background

Beginning in 2004, MnDOT and the Metropolitan Council jointly began a study to develop a statewide and metro area plan for coordination. In March 2006, MnDOT released the draft Minnesota Coordination Action Plan to “establish a planning framework to educate public transit and human service transportation stakeholders...about the benefits of coordinating public transit and human service transportation.” The plan is also a “statewide action plan for improving transportation coordination” and includes a framework for developing the metro area coordination action plan. After extensive statewide outreach and public input over the summer months, the Minnesota Coordination Action Plan was finalized in September 2006.

Since then, the Minnesota Council on Transportation Access was formed by the Minnesota State Legislature in the 2010 legislative session (MN Statute 2010 1743285), succeeding the Interagency Committee on Transit Coordination. It consists of representatives of 13 separate agencies and organizations:

- Office of the Governor
- Minnesota State Council on Disability
- Minnesota Public Transit Association
- Minnesota Department of Transportation
- Minnesota Department of Human Services
- Minnesota Department of Health

- Metropolitan Council
- Minnesota Department of Education
- Minnesota Department of Veterans Affairs
- Minnesota Board of Aging
- Minnesota Department of Employment and Economic Development
- Minnesota Department of Commerce
- Minnesota Management and Budget

Among other duties, members of the Minnesota Council on Transportation Access provided guidance on the development of local human service transit coordination plans in Minnesota's twelve Economic Development Regions. Regional planning staff conducted plans in each region, which cover all of Greater Minnesota outside the Twin Cities metro area. Plans were funded by the Minnesota Department of Transportation. Each region convened a steering committee to discuss coordination strengths and weaknesses particular to the region, determine appropriate strategies to improve coordination, and brainstorm project ideas to address identified strategies. Representatives from human service agencies, tribes, public transit providers, health care providers, and others participated in these committees. Plans were adopted in late 2010 or early 2011.

Plan Goals

The goals for this plan are:

- Increase the level of understanding of public transit and human service transportation coordination among stakeholders, elected officials and the Metropolitan Council in the metro area.
- Identify where there is potential for better coordination with the assistance of Federal funding, especially with regard to service duplication and unmet needs in the metro area.
- Establish strategies for associated Federal funding sources that support coordination within the delivery of human services transportation.
- Prioritize needs and strategies

The needs and strategies of this plan were developed for the purpose of distributing federal funding under the JARC, New Freedom and Elderly and Disabled Program Capital Assistance for Specialized Transit Vehicles programs.

Plan Process

INVENTORY

The inventory of transportation providers was developed through discussions with the project steering committee, the results of the transportation provider survey, and through stakeholder interviews. An online questionnaire was circulated to public transit providers and human service transportation providers identified through other stakeholder lists.

PUBLIC INVOLVEMENT

A major focus of developing a coordinated transportation plan is public input, more specifically stakeholders' input. The primary objective of this plan is to encourage coordination and, thus, encourage agencies with opportunities to coordinate to work interactively with each other. An oversight committee was created to guide the creation of this plan. This committee represented transit providers, human service organizations, transit funding providers and governing bodies. (See Appendix B for a list of committee members.) In addition, a stakeholder workshop was held on November 9, 2011, to review, refine, verify and prioritize needs. This group represented transit and human services agencies, providing a range of transportation services. Finally, this plan was released to the public for review and available for comment throughout the review and adoption process as it was presented to the Technical Advisory Committee, Transportation Advisory Board, and Transportation Committee, prior to Metropolitan Council approval.

NEEDS ASSESSMENT AND GAP ANALYSIS

Also included in the questionnaire was a series of questions regarding needs. Additionally, an analysis of the service and population changes over the past several years was conducted to determine if prior identified gaps had narrowed and/or closed and to determine if new demands for service had emerged. The responses to this questionnaire, as well as the needs identified in the prior plan, were presented to the stakeholder workshop participants. Participants modified the list, taking narrowed/closed gaps and new mobility challenges into account, and prioritized them in order of those issues they believed should be addressed first over the next several years.

STRATEGIES AND ACTIONS

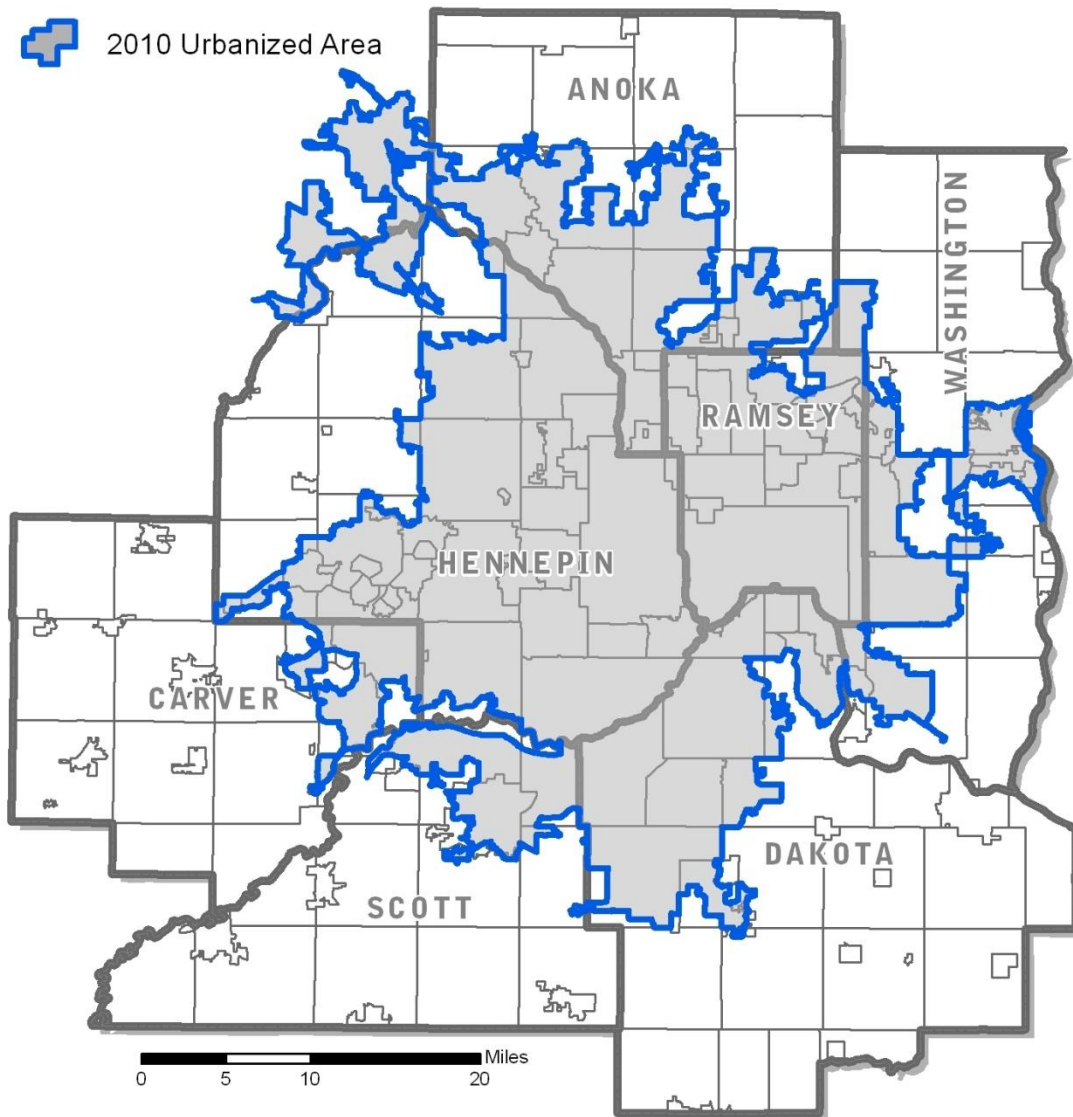
Stakeholder workshop participants reviewed the list of strategies identified in the 2007 plan, along with some additional strategies suggested by the consultant team. Strategies were modified and added to make them relevant for the metropolitan area today.

Study Area

The effective area covered by this plan includes the seven-county metro area as identified by Minn. Stat. sec. 473.121 sub. 2. "Subd. 2. Metropolitan area or area. 'Metropolitan area' or 'area' means the area over which the Metropolitan Council has jurisdiction, including only the counties of Anoka; Carver; Dakota excluding the city of Northfield; Hennepin excluding the

cities of Hanover and Rockford; Ramsey; Scott excluding the city of New Prague; and Washington.” (See **Figure 1.**)

Figure 1: Study Area



II. Demographic Profile

This section describes current data related to the mobility of older adults, individuals with disabilities and low-income residents in the Twin Cities metropolitan area, including a discussion of differences between the population information available for the 2007 plan and the more current data available.

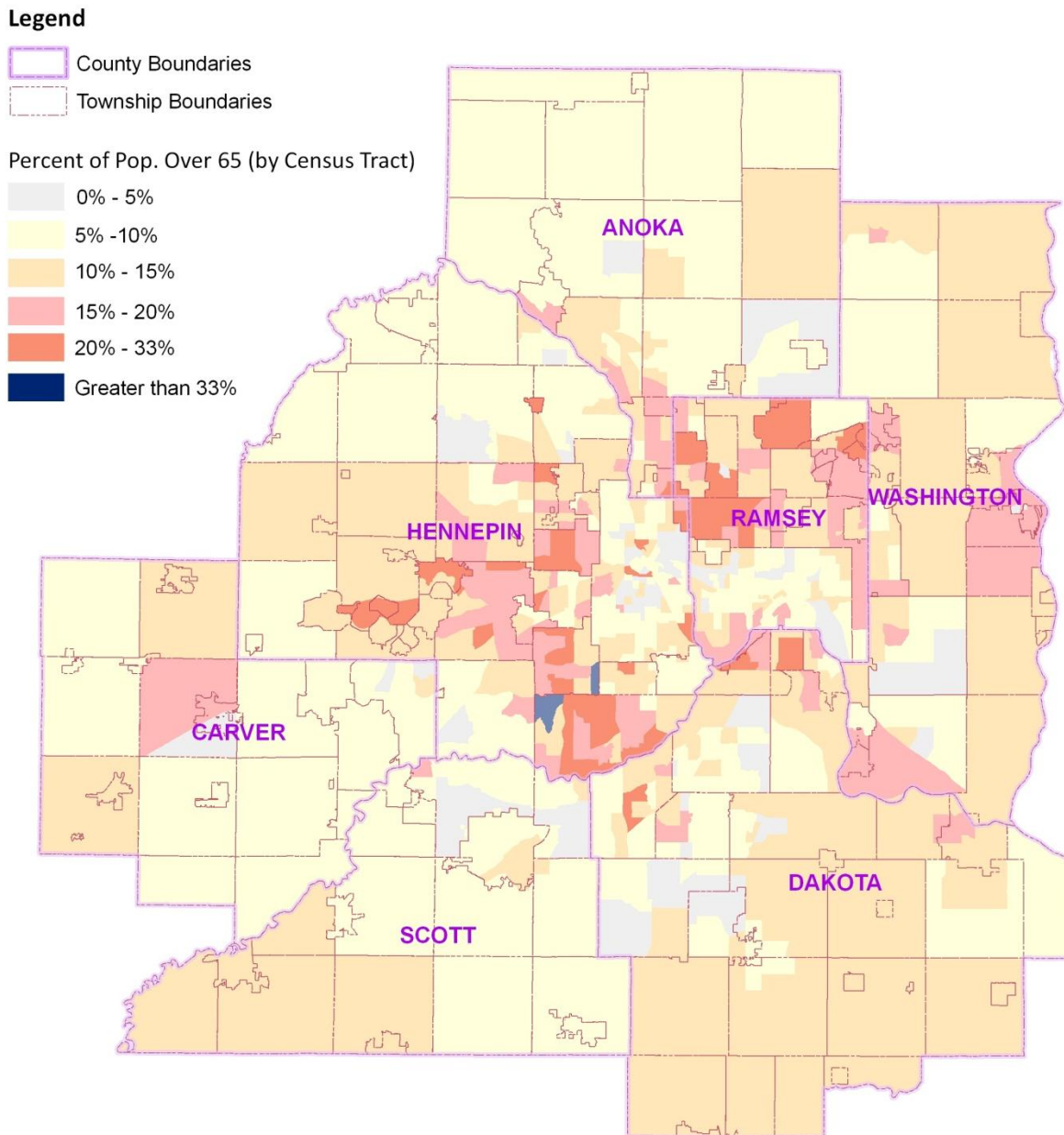
To develop a current demographic profile and geographic maps, data was compiled from the 2010 Census and various data sets from the American Community Survey (ACS) that provided the information needed. Information on older adults was available from the 2010 Census. However, the Census data did not have the detailed information needed for low income individuals, those with disabilities, and individual travel methods. Therefore, ACS 2005-2009 5-Year Estimates were used for low income individuals, and information on travel methods was drawn from the ACS 2008-2010 3-Year Estimates. Data on individuals with disabilities was drawn from the ACS 2008-2010 3-Year Estimates.

Because the current ACS data is based on samples, as opposed to complete data from the 2000 Census, it was not possible in most cases to compare actual numbers of individuals. Instead, percentages are used when comparing changes in the current population to 2000. Additionally, it was not possible to accurately compare current disability data to that of 2000 because the sampling methods produced numbers that were not comparable. For this reason, this report establishes new data for the disability population, to be used as a baseline for future reporting.

Older Adults

Older adults are a larger proportion of the population in selected areas of Hennepin and Ramsey Counties, the urban core of the region, than in other counties, as shown in **Figure 2**.

Figure 2: Older Adult Population, 2010¹



The population has been changing over the last ten years, which may have implications for transportation needs over the next four years. The Metro Area has experienced significant growth in its total population, increasing 33.6 percent between 2000 and 2010 according to latest Census figures. This growth has extended to the senior population, with the number of people over age 65 increasing by 20 percent – from 255,245 to 306,750. The percentage of the population over age 65 has increased from 10 to 11 percent, with the rate of growth for those

¹ U.S. Census Bureau, 2010 Census

over 85 increasing faster than those over 65. This may affect the volume and type of transportation services needed by these populations.

As shown in **Figure 3**, this growth occurred in all seven counties within the Metropolitan Area, though some grew at a greater rate than others. Scott County experienced the greatest degree of growth by far, with an increase of 81 percent in the number of residents over 65. The populations in four other counties – Washington, Anoka, Dakota, and Carver – increased between 47 and 64 percent. These counties have more rural, suburban and/or exurban characteristics, as well as more limited fixed route transit services. Additionally, many older adults may have the need to travel into Minneapolis (Hennepin County) or St. Paul (Ramsey County) for medical or other services.

Figure 3: Change in Senior Population by County, 2000-2010²

County	2000	2010	Percent Change
Anoka	21,082	32,232	53%
Carver	5,246	7,707	47%
Dakota	26,246	39,816	52%
Hennepin	122,358	130,814	7%
Ramsey	59,502	61,181	3%
Scott	5,544	10,016	81%
Washington	15,267	24,984	64%
Metro Area	255,245	306,750	20%

Individuals with Disabilities

Detailed data on individuals with disabilities was not available from the 2010 Census. Instead, researchers used American Community Survey data for years 2008-2010 to determine the percentage of the population in the Metro Area with disabilities. Because of differences in sampling methods and data definitions, this study was not able to compare current disability data with those from 2000, so this report provides a new set of baseline disability data for future analysis and comparison.

As **Figure 4** demonstrates, about 8.9 percent of the Metro Area's civilian non-institutionalized population has some type of disability.

² Source: U.S. Census Bureau, 200 and 2010 Census

Figure 4: Individuals with Disabilities by County – Count and Percent of Population



County	Persons with a Disability	Total Population	Percent of Total
Anoka	28,881	326,362	8.8%
Carver	5,718	89,995	6.4%
Dakota	30,584	395,124	7.7%
Hennepin	104,427	1,135,793	9.2%
Ramsey	53,260	501,707	10.6%
Scott	7,744	128,058	6.0%
Washington	17,777	234,330	7.6%
Metro Area	230,614	2,577,039	8.9%

The highest disability rates exist in the larger, more urban counties of Ramsey and Hennepin. This correlates with the higher poverty rates in these counties, which will be covered in the next section. The lowest rates of disability are found in Scott and Carver Counties.






While the data does not indicate whether the disability impacts an individual's mobility, it can serve as an indicator that this population may need additional transportation assistance.

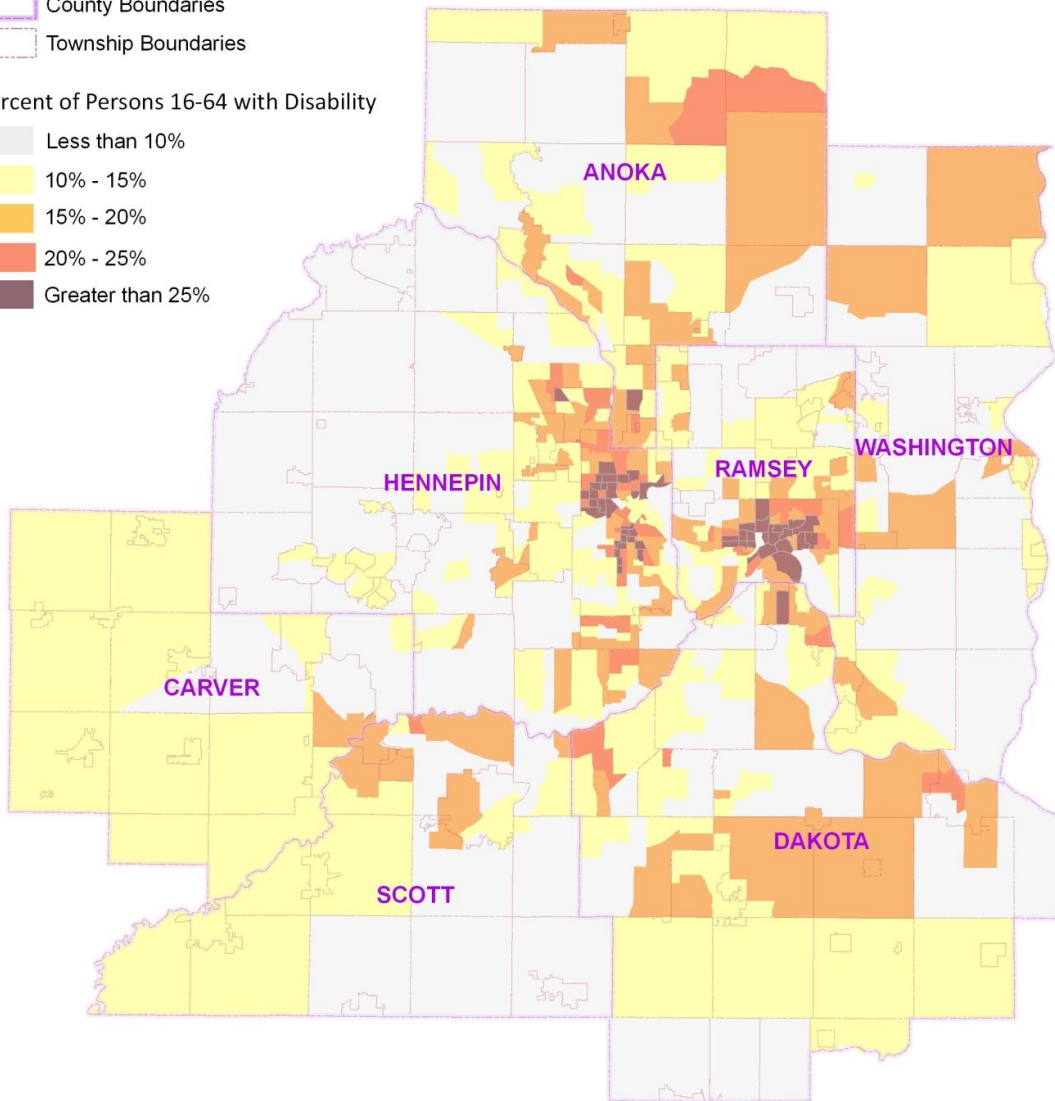
Figure 5: Persons Ages 16-64 with a Disability³

Legend

-  County Boundaries
-  Township Boundaries

Percent of Persons 16-64 with Disability

-  Less than 10%
-  10% - 15%
-  15% - 20%
-  20% - 25%
-  Greater than 25%



³ Source: Public Transit and Human Services Transportation Coordination Action Plan, 2007.

Low-Income Residents

For purposes of this study, low income is defined as at or below 150 percent of the poverty level. The percent of low-income individuals in the Metro Area residents increased from 12 to 15 percent between 2000 and 2010. As shown in **Figure 6** below, increases in the low income population occurred in all Metro Area counties except for Scott County.

Figure 6: Percentage of Population below Poverty Level, 2000 and 2010⁴

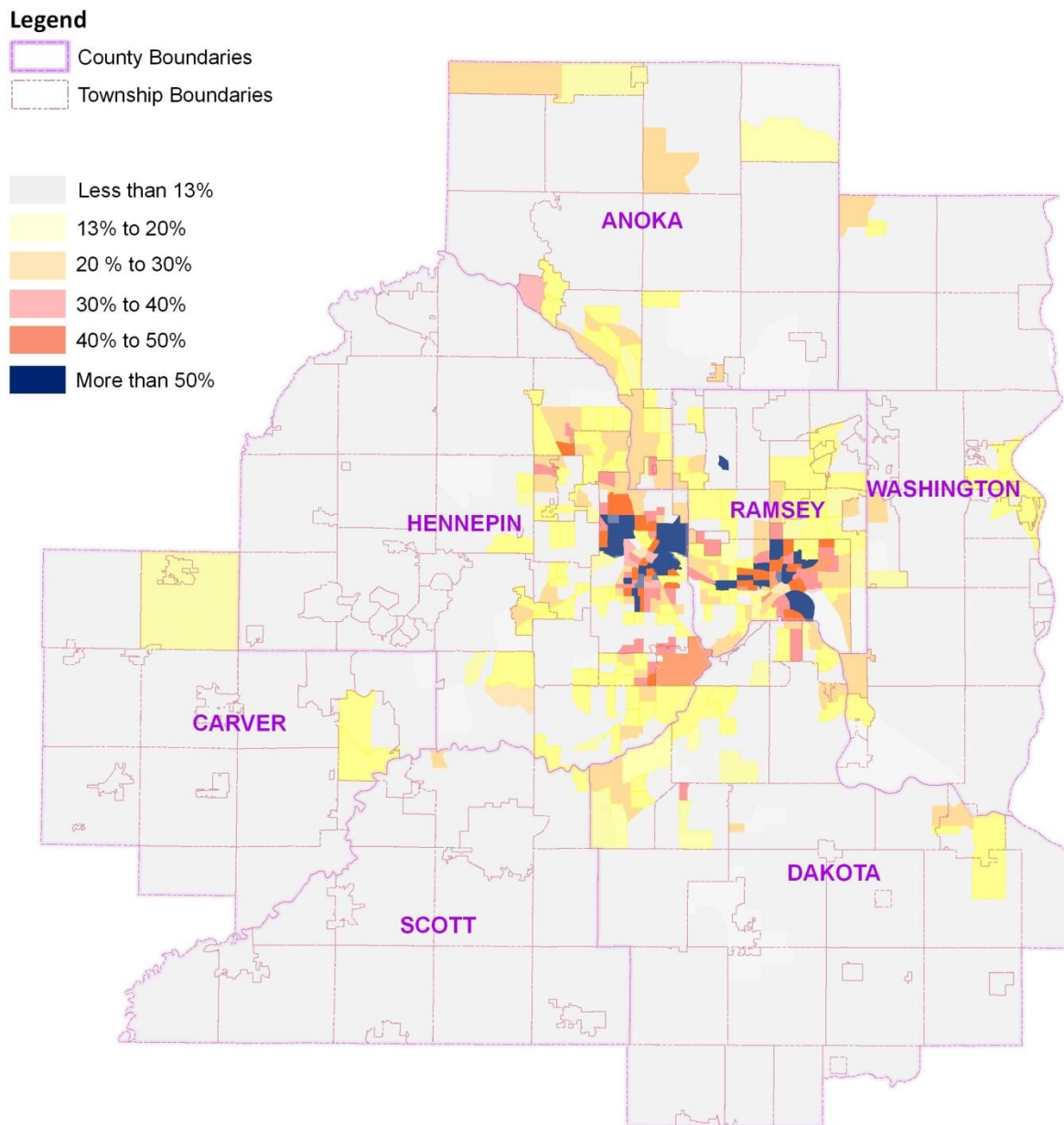
County	Population Below Poverty				Population Below 150% Poverty			
	2000	2009	2009 Counts	Percent Change	2000	2009	2009 Counts	Percent Change
Anoka	4%	6%	19,283	2%	8%	11%	37,309	4%
Carver	4%	5%	4,273	1%	7%	9%	7,744	2%
Dakota	4%	5%	19,728	1%	7%	10%	37,488	3%
Hennepin	8%	11%	124,070	3%	14%	17%	197,050	3%
Ramsey	11%	14%	68,820	4%	18%	21%	106,241	4%
Scott	3%	4%	4,498	0%	7%	7%	8,395	0%
Washington	3%	5%	10,463	2%	6%	8%	19,166	3%
Metro Area	7%	9%	251,135	2%	12%	15%	413,393	3%

The largest increases in the low income population occurred in Anoka and Ramsey Counties, both with increases of four percent, respectively. Increases of two or three percent were experienced in all other counties with Scott County experiencing virtually no change. Similar to 2000, the larger, more urban Ramsey and Hennepin counties continue to have the highest poverty rates within the Metro Area, while Carver, Scott and Washington have the lowest. See **Figure 7** for details.



⁴ Source: U.S. Census Bureau, 2000 Census. American Community Survey Five-Year Estimates 2005-2009.

Figure 7: Poverty Threshold (Share of Population 0-150% of Federal Poverty Level)⁵



⁵ Source: American Community Survey 2005-2009 Five-Year Estimates

Mobility – Adult Population

Households without a Vehicle

The number of households in the Metro area without a vehicle declined by six percent between 2000 and 2009. As shown in **Figure 8**, four of the seven counties experienced a decrease. Anoka County decreased by the most, at 11 percent, while Hennepin, Carver and Ramsey all experienced decreases ranging from five to nine percent.

Figure 8: Number of Households without a Vehicle, 2000 - 2009⁶

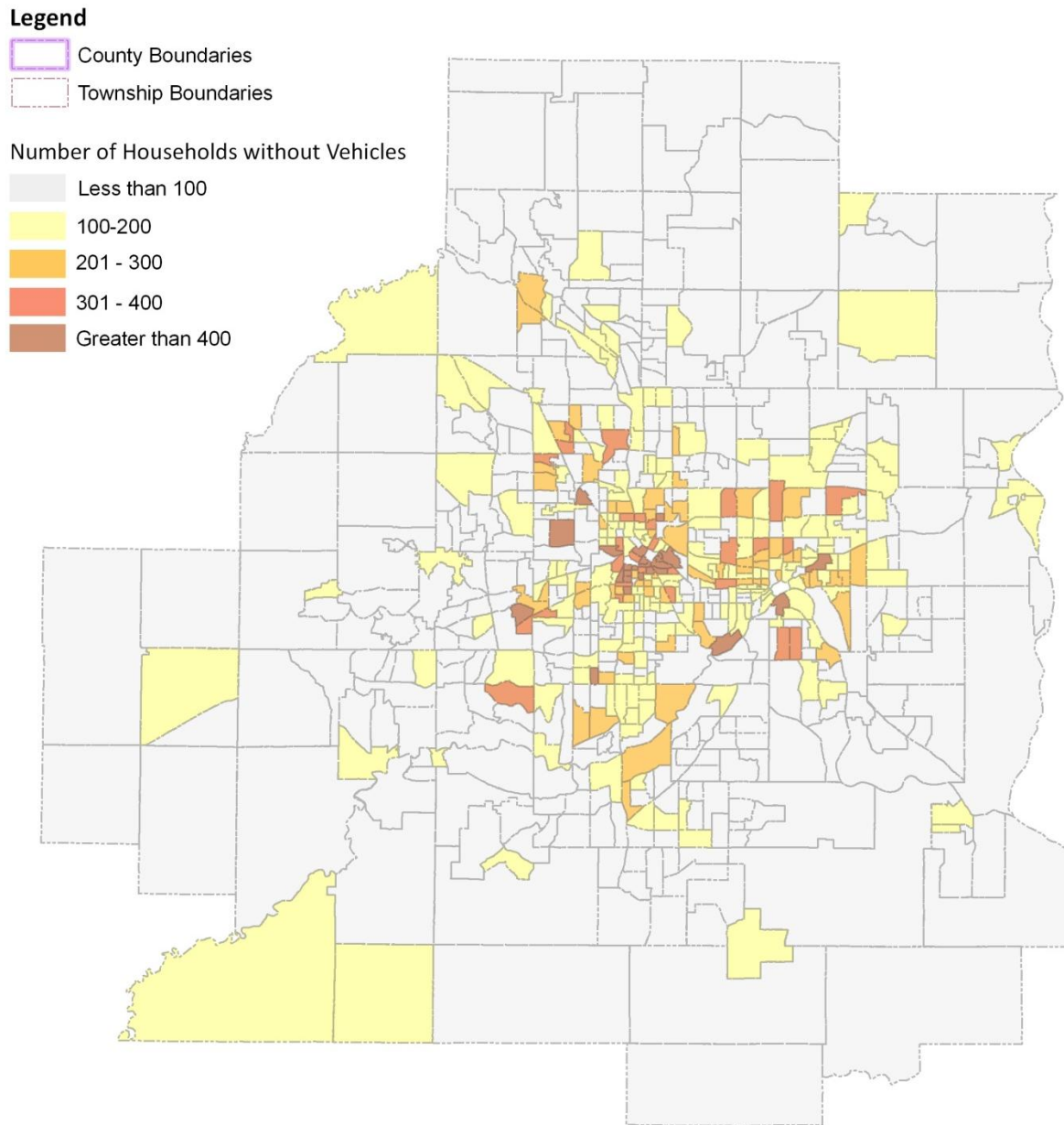
	2000	2009	% Change	Percent without Vehicle 2000	Percent Without Vehicle 2009
Anoka	4,911	4,375	-11%	5%	4%
Carver	846	798	-6%	3%	2%
Dakota	5,447	5,778	6%	4%	4%
Hennepin	48,930	46,244	-5%	10%	10%
Ramsey	23,666	21,433	-9%	12%	11%
Scott	959	1,185	24%	3%	3%
Washington	2,332	2,508	8%	3%	2%
Metro Area	87,091	82,321	-5%	8%	3%

In contrast, the number of households in Scott County without a vehicle increased by a significant 23 percent, and in Dakota and Washington by six and eight percent, respectively. It is worth noting that Scott County experienced more than 80 percent growth in the senior population since 2000, which might explain the large increase in the number of households without a vehicle.

Hennepin and Ramsey remain the two counties with the highest percentage of households without a vehicle, as shown in **Figure 9**. Given that they also have the highest poverty levels, the limited number of vehicles may be related to their low-income status, which will impact their demand for public transportation services. These are also the counties with the greatest volume of fixed route transit services, making it less necessary to own a vehicle.

⁶ Source: U.S. Census Bureau, 2000 Census. American Community Survey 2005-2009 Five-Year Estimates.

Figure 9: Number of Households without a Vehicle⁷



⁷ Source: U.S. Census Bureau American Communities Survey, 2005-2009 Five-Year Estimates

Means of Transportation to Work

This study also collected data on and analyzed the trends of the various methods Metro Area residents use to commute to work. As **Figure 10** demonstrates, there were few changes in choices of transportation modes for the Metro Area as a whole. The percentage of the population driving alone remained the same, as did those using public transit and other forms of transportation, while slight decreases occurred in the number using carpools.

Figure 10: Means of Transportation to Work, 2000 and 2009 – Population 16 and Older, Not Working at Home⁸

	Drive Alone		Carpool		Public Transit		Other	
	2000	2009	2000	2009	2000	2009	2000	2009
Anoka	85%	86%	11%	9%	3%	3%	2%	2%
Carver	88%	87%	9%	8%	1%	1%	3%	3%
Dakota	87%	86%	9%	9%	2%	3%	2%	2%
Hennepin	78%	78%	10%	9%	8%	7%	5%	6%
Ramsey	77%	79%	11%	10%	6%	7%	5%	5%
Scott	88%	87%	10%	8%	1%	2%	2%	2%
Washington	87%	87%	10%	9%	1%	2%	2%	3%
Metro Area	81%	81%	10%	9%	5%	5%	4%	4%

The patterns remained largely the same within each county as well, with some small changes occurring. For example, Anoka and Ramsey Counties experienced slight increases in the percentage of residents driving alone and decreases in those using carpools. In the other counties, the proportion of residents driving alone either decreased slightly or remained the same. Overall, there are no notable trends that would impact demand for coordinated, human services transportation services.

Travel Time to Work

As part of the analysis of transportation patterns, this study also looked at how the average amount of commuting time has changed in the Metro area since 2000. For the seven-county region, the average commute time to work has remained largely the same, at about 23 minutes overall. As shown **Figure 11**, the mean commute time in minutes for the entire area has remained virtually the same, with a slight one half of one percent decrease.

⁸ Source: 2009 data from American Community Survey 2005 – 2009 five-year estimates. 2000 data from Metropolitan Council Report (Census 2000). The transportation categories changed slightly between 2000 and 2009. In 2000, the Public Transit category included “Public Transit or Taxi Cab”. However, it only included Public Transit in 2009. Bicycling and Walking were also accounted for differently, so the consultant team combined modes such as bicycling, walking to work, and “other” into the “Other” category.

Figure 11: Mean Travel Time to Work in Minutes, Population not Working at Home, 2000-2009⁹

	Mean 2000	Mean 2009	Percent Change
Anoka	27.0	26.7	-1.1%
Carver	26.0	25.1	-3.3%
Dakota	23.0	23.3	1.2%
Hennepin	22.0	21.8	-0.8%
Ramsey	21.0	21.5	-2.4%
Scott	24.0	25.9	7.9%
Washington	25.0	24.3	-2.9%
Metro Area	23.0	22.9	-0.5%

Travel time to work in Hennepin and Ramsey Counties, declined by 0.8 and 2.4 percent respectively. The residents of Anoka, Carver and Washington also experienced improvements in their commute times. However, other counties did experience increases. Mean travel time to work increased slightly in Dakota County, and in Scott County it increased significantly, by almost eight percent.

⁹ Source: U.S. Census Bureau, American Community Survey Five-Year Estimate, 2005-2009

III. Existing Conditions

Inventory of Transportation Providers

This section contains a summary of transportation providers in the Twin Cities region, including information on service areas where transportation is provided as well as key origins and destinations for the target populations. The inventory of transportation providers was developed through discussions with the project steering committee, the results of the transportation provider survey and through stakeholder interviews. Online questionnaires were circulated to public transit providers and human service transportation providers known to the Metropolitan Council as well as to other providers identified through other stakeholder lists. This questionnaire was a modification of the survey developed for the Minnesota State Coordination Action Plan, primarily designed to gather relevant information on agencies involved in providing public transit or human services transportation.

Summary of Providers

Approximately 170 different organizations were identified as having some involvement in providing transportation services in the region for older adults, individuals with disabilities and persons with low incomes. Twenty-seven organizations responded to requests for information about their organizations and the services they provide. Of the 27 organizations who responded to the survey or other outreach efforts, most operate demand-response transportation.

The known agencies/organizations providing some kind of transportation service in the Twin Cities metropolitan area include:

Fixed route transportation – Transportation provided by any size of vehicle on a regular schedule and route

Demand response transportation – Transportation provided by any size of vehicle upon request by the rider

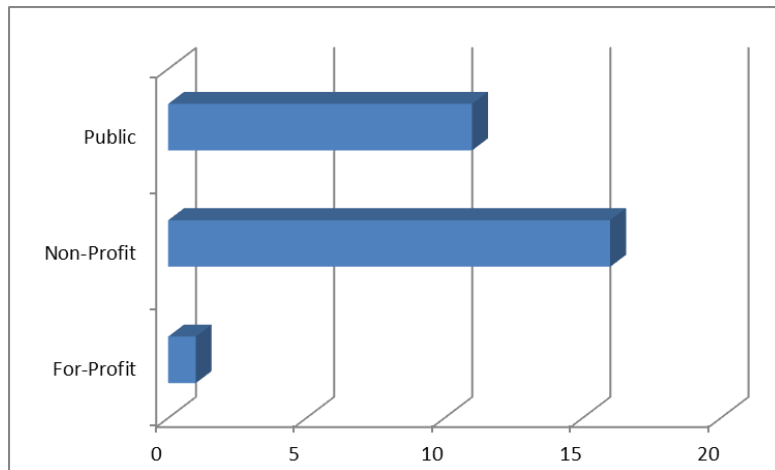
Travel training – Training provided to help people learn to use fixed route transportation

Financial assistance – Any kind of financial assistance, such as a bus pass, provided to an individual in order to help them access transportation

Information/referral – Information provided to an individual and/or organization to help them access the appropriate ride for them

Survey respondents were comprised primarily of non-profit providers and public agencies either funding or providing direct transportation services to clients in the Twin Cities region. Ten agencies indicated that they were primarily transportation providers, while the remaining 17 were primarily human services providers, though the vast majority (21) indicated that they provided direct transportation services to their clients (see **Figure 12**).

Figure 12: Survey Respondents



Fixed Route Transit Service

The Metropolitan Council operates the largest transit system in the state—Metro Transit. Metro Transit is the transportation resource for the Twin Cities, offering an integrated network of buses, light rail and commuter trains as well as resources for those who carpool, vanpool, walk or bike. It is working to add a light-rail link between downtown Minneapolis and downtown St. Paul as well as developing enhanced express bus service throughout the region.

Metro Transit is one of the country's largest transit systems, providing nearly 90 percent of the 78 million bus trips taken annually in the Twin Cities. Each weekday customers board Metro Transit buses and trains an average of 250,000 times.

Metro Transit operates the Hiawatha light-rail line, Northstar commuter rail line and 123 bus routes. The Hiawatha LRT, the region's first light rail line, has been in operation since 2004. The line carries passengers to key destinations along the 12-mile corridor including downtown Minneapolis, Minneapolis-St. Paul International Airport and the Mall of America. Northstar Commuter Rail, a 40-mile line carrying passengers from Big Lake in Sherburne County to downtown Minneapolis, opened in late 2009. Combined, the rail services provided 11.2 million rides in 2010.

Metropolitan Transportation Services (MTS) is also provided by the Metropolitan Council. Unlike Metro Transit, MTS contracts regular-route service with private bus companies. MTS contracted routes are typically suburban local or express routes that have lower productivity. In 2010, their 36 routes carried 2.8 million passengers.

The region also has five suburban transit providers – Maple Grove Transit, Plymouth Metrolink, Southwest Transit, BlueXpress and the Minnesota Valley Transit Authority (MVTA) – which

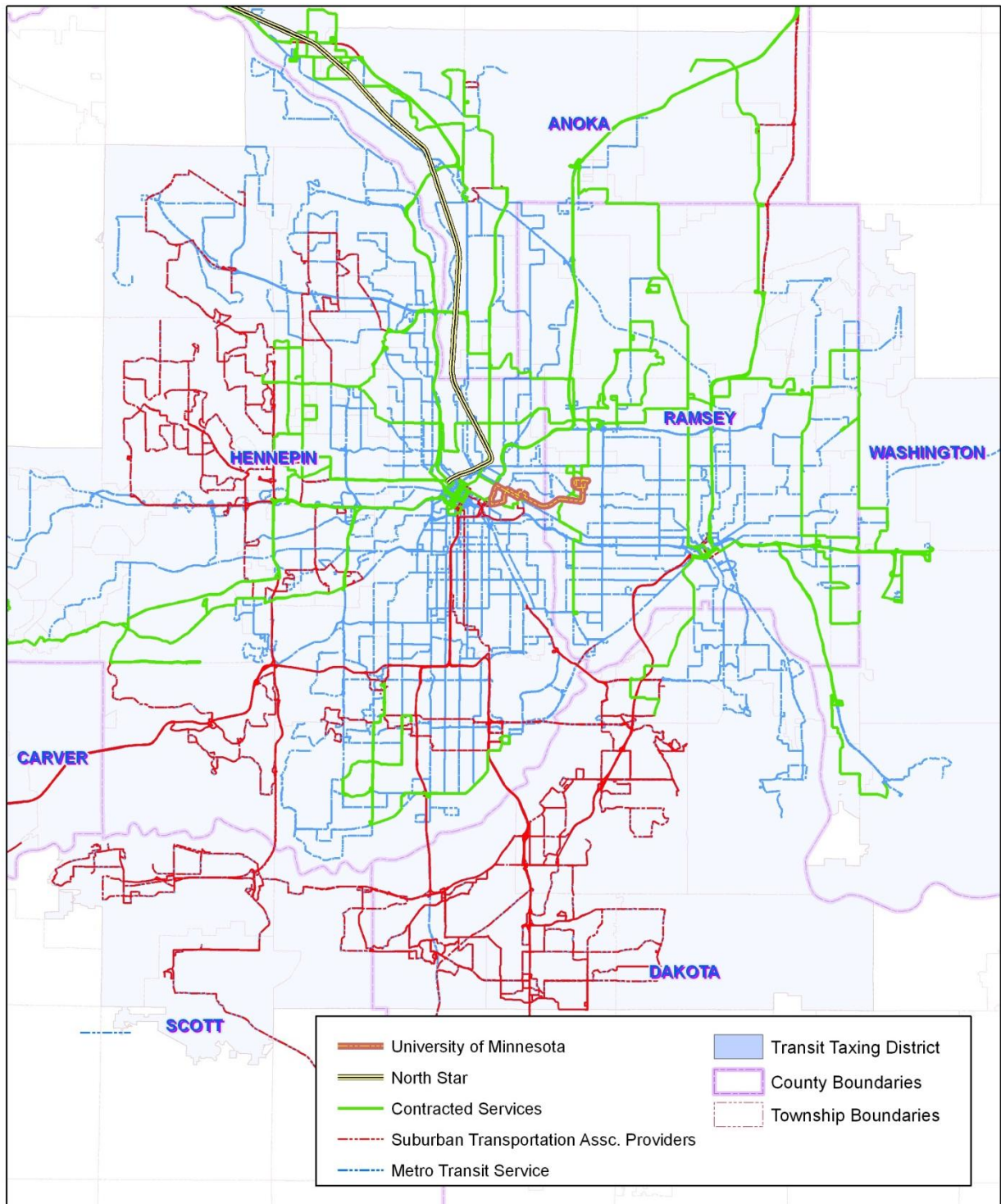
serve a combined 13 suburban communities. These suburban transit providers carried more than 4.8 million riders in 2010, primarily on express service to downtown Minneapolis.

Finally, the University of Minnesota operates shuttle bus service between its two campuses in St. Paul and Minneapolis. In 2010 that service provided nearly four million rides.

Altogether, the regular route transit system serves every county in the region, with more frequent and longer service (evening and late night) concentrated in the urban areas of Hennepin and Ramsey counties. (See **Figures 13** through **16** for route coverage.)

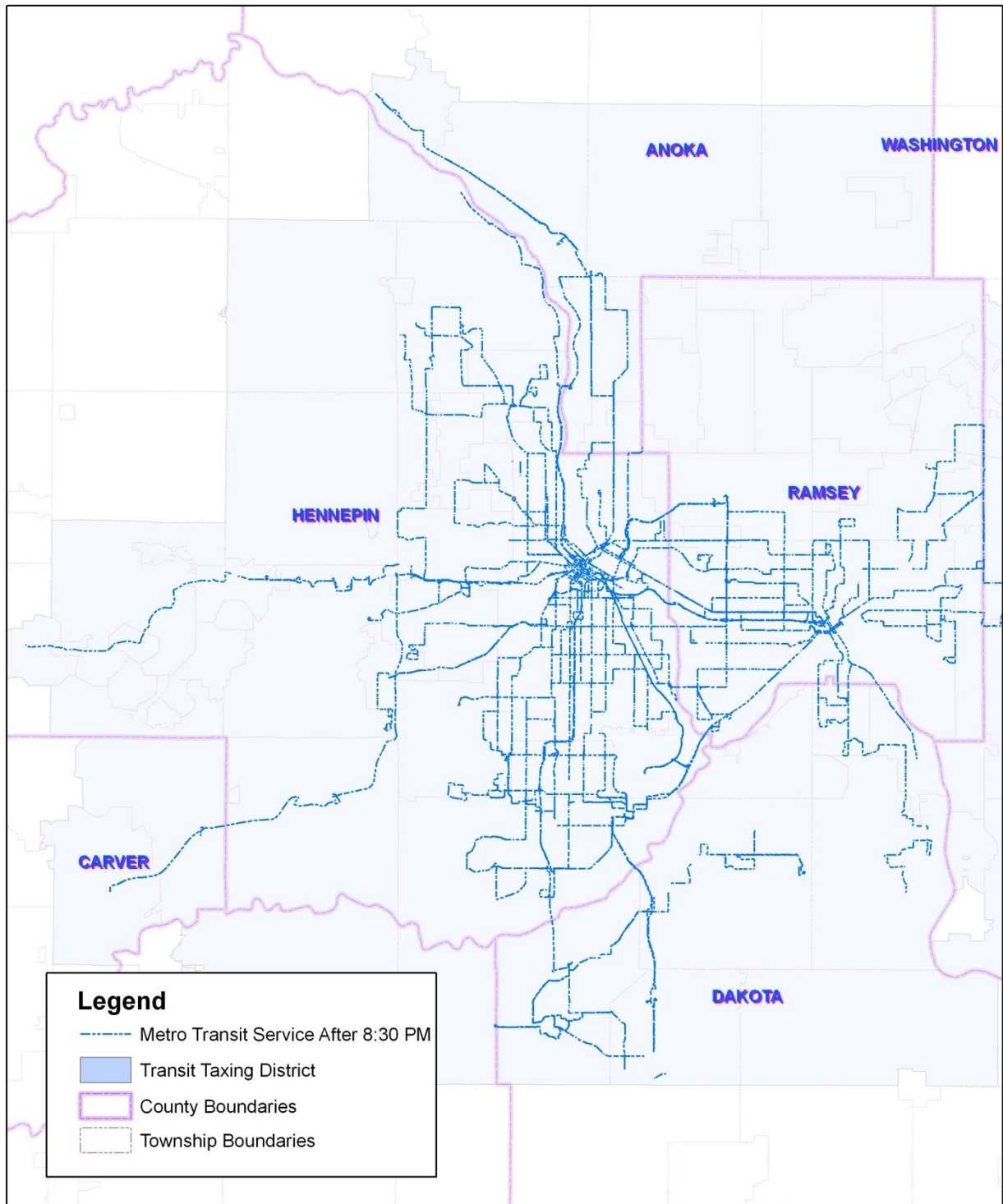


Figure 13: Twin Cities Metro Area Regular Route Service¹⁰



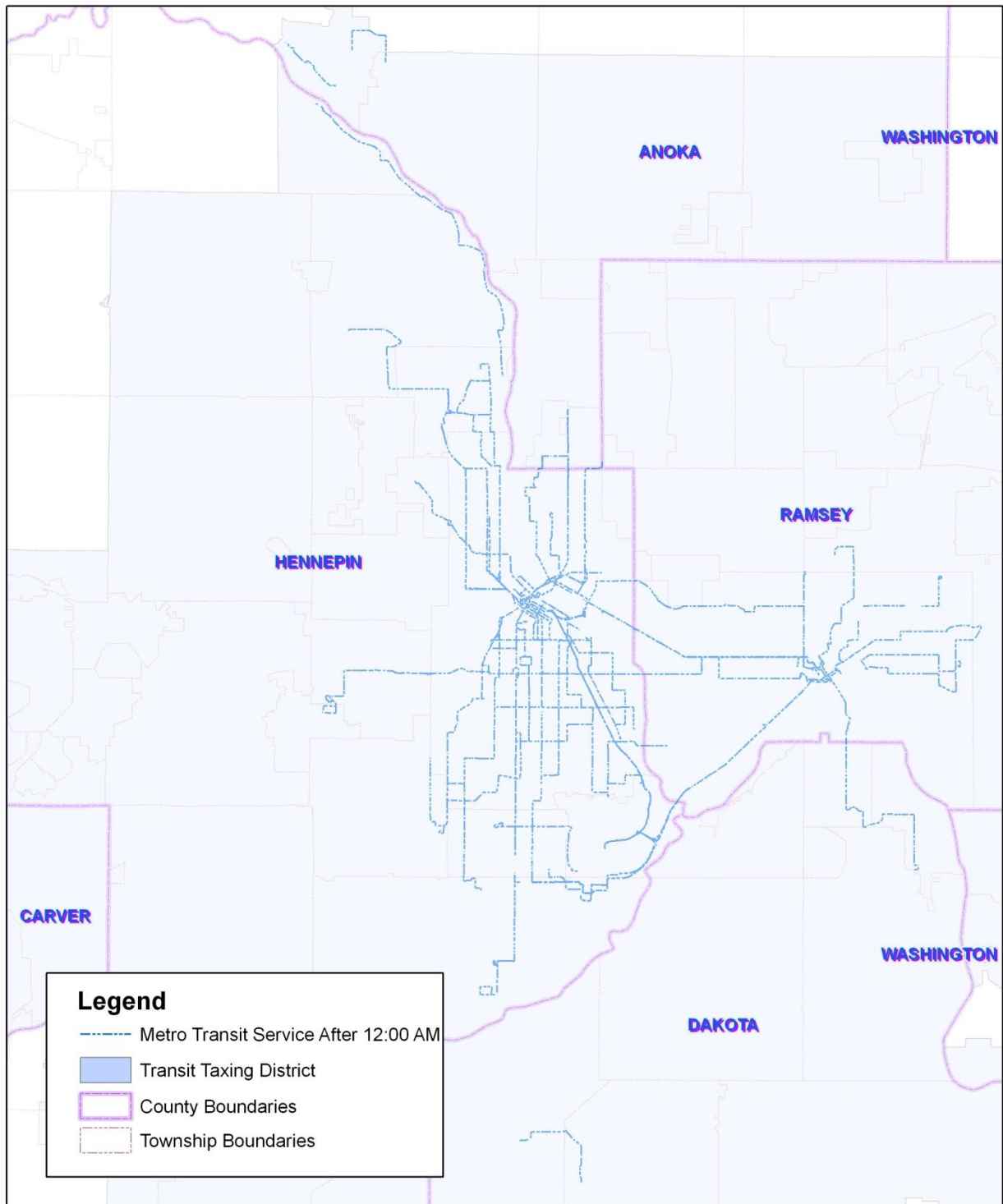
¹⁰ Source: Metropolitan Council, Metro Transit

Figure 14: Service after 8:30 PM, Weekdays¹¹



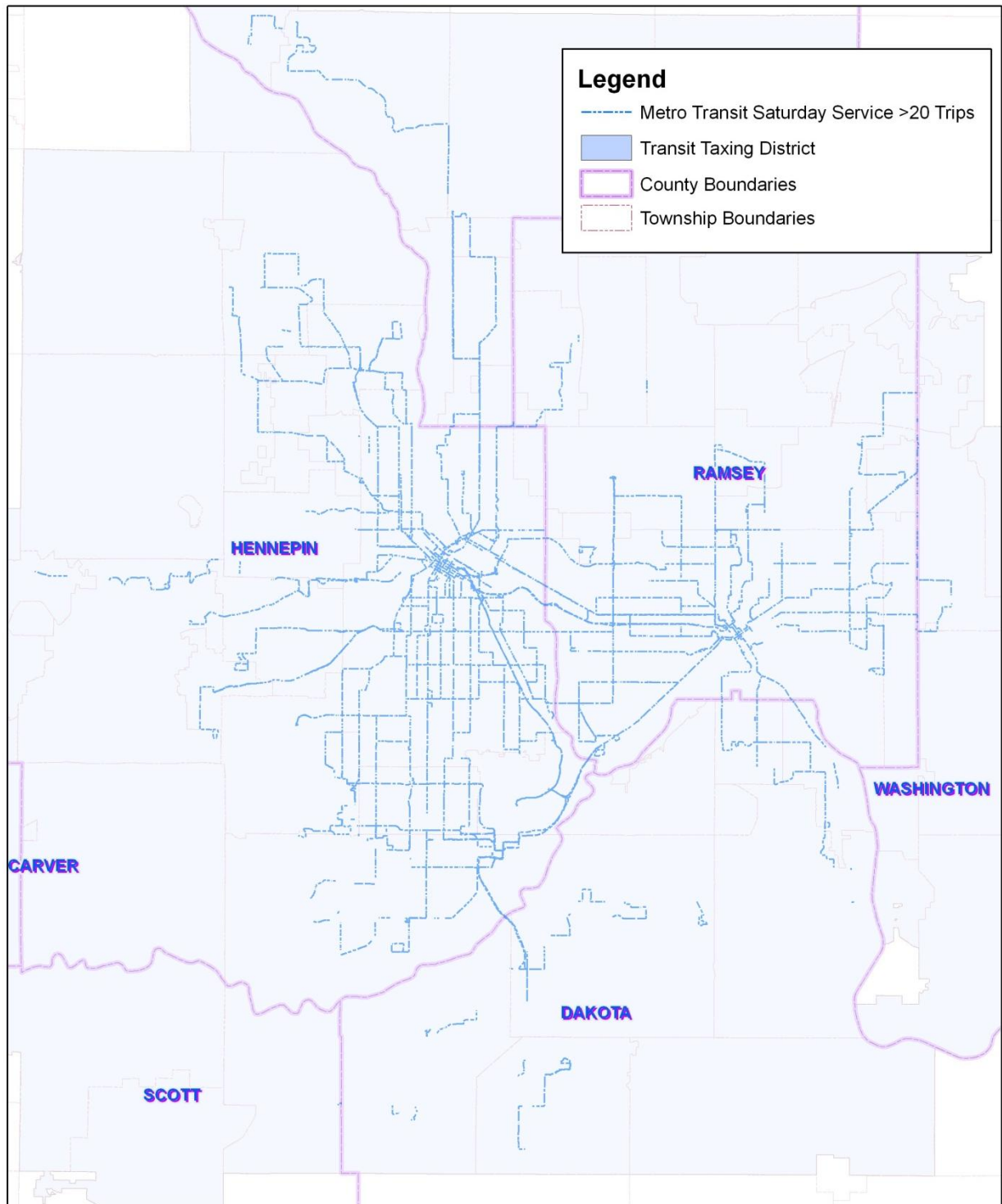
¹¹ Source: Metropolitan Council, Metro Transit

Figure 15: Service after Midnight, Weekdays¹²



¹² Source: Metropolitan Council, Metro Transit

Figure 16: Frequent Saturday Transit Service (20+ Trips)¹³



¹³ Source: Metropolitan Council, Metro Transit

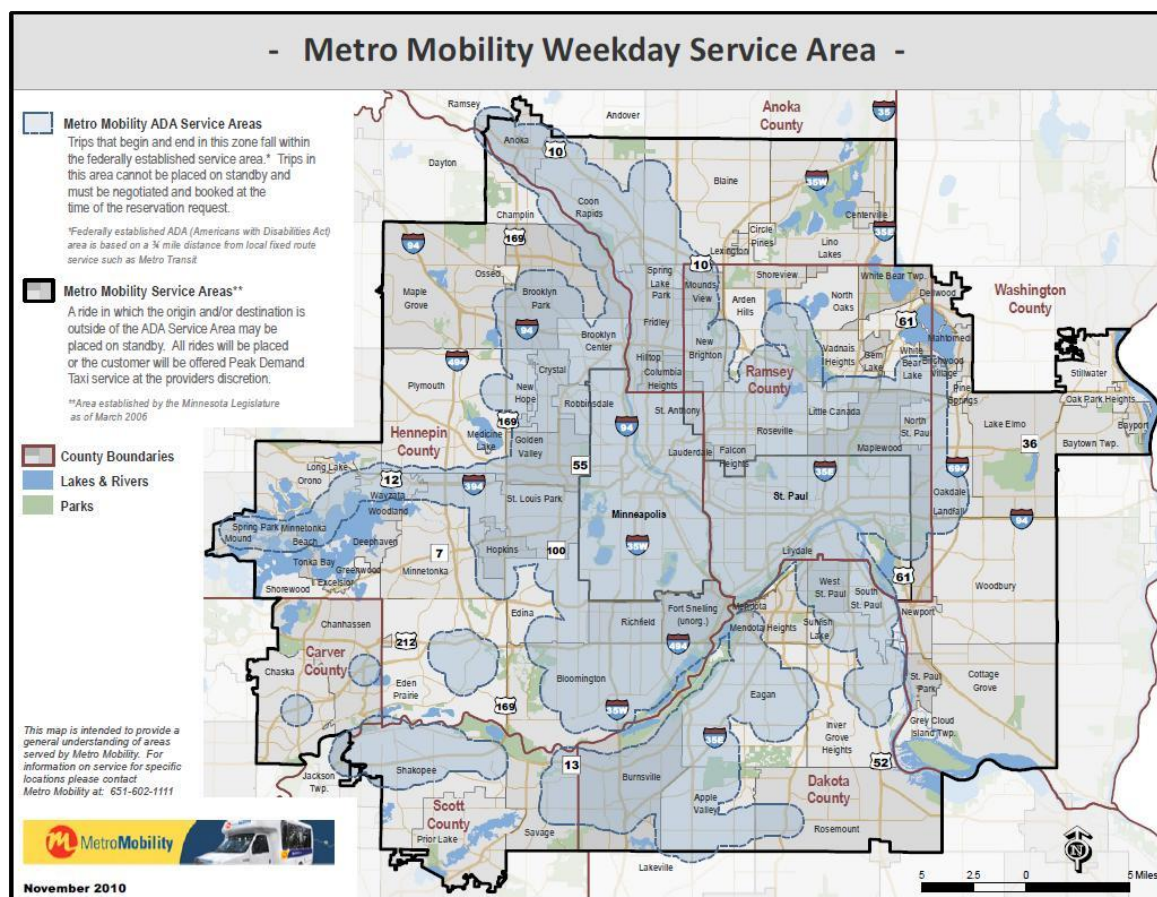
Metro Mobility – ADA Paratransit Service

Metro Mobility is a public transportation service for Americans with Disabilities (ADA) certified riders who are unable to use regular fixed-route buses, either some or all of the time, due to a disability or health condition. Service parameters are strictly regulated by Federal and State laws. Rides are provided for any purpose and are complementary to fixed route transit service routes and schedules. Drivers escort every passenger from the first entry door at their pickup through the first entry door at their destination. The Metro Mobility Service Center manages the service by determining eligibility and administering contracts with public and private transportation providers who deliver the direct services. The providers are responsible for hiring drivers, maintaining vehicles and scheduling and delivering client rides.

Service area and times

Metro Mobility provides service in areas served by all day local fixed-route transit service and beyond to cover the area designated by the state Legislature as the “Transit Capital Levy Communities.” Service hours are adjusted as changes are made to the regular fixed-route transit schedule. The Metro Mobility Service Area is shown on Figure 17.

Figure 17: Metro Mobility Service Area Map



Door-through-door service

Metro Mobility drivers assist riders between the vehicle and the first entry door of the pick-up and drop-off. This assistance can include support when walking or pushing a wheelchair. Drivers are not permitted to go beyond the first entrance of any building. Riders who need additional assistance may bring a personal care attendant (PCA) to ride with them at no charge.

Eligibility guidelines

Under the federal guidelines established by the ADA, individuals may be eligible if any of the following conditions apply:

- A person is physically unable to get to the bus because of their disability or health condition within an area that the fixed-route serves.
- A person is unable to navigate the regular fixed-route system because of their disability.
- A person is unable to board or exit the bus at some locations because of their disability.

Length of eligibility

Most often applicants are certified for a four year period but certifications can be for as little as three, six, nine or twelve months. Certification dates for those with a four year term are set to coincide with the expiration date on the riders Minnesota State ID card or driver's license when possible. In limited cases where a person is of advanced age or has a deteriorating health condition Metro Mobility may grant 'permanent' or life-time certification.

Metro Mobility Service Center

Phone: 651-602-1111

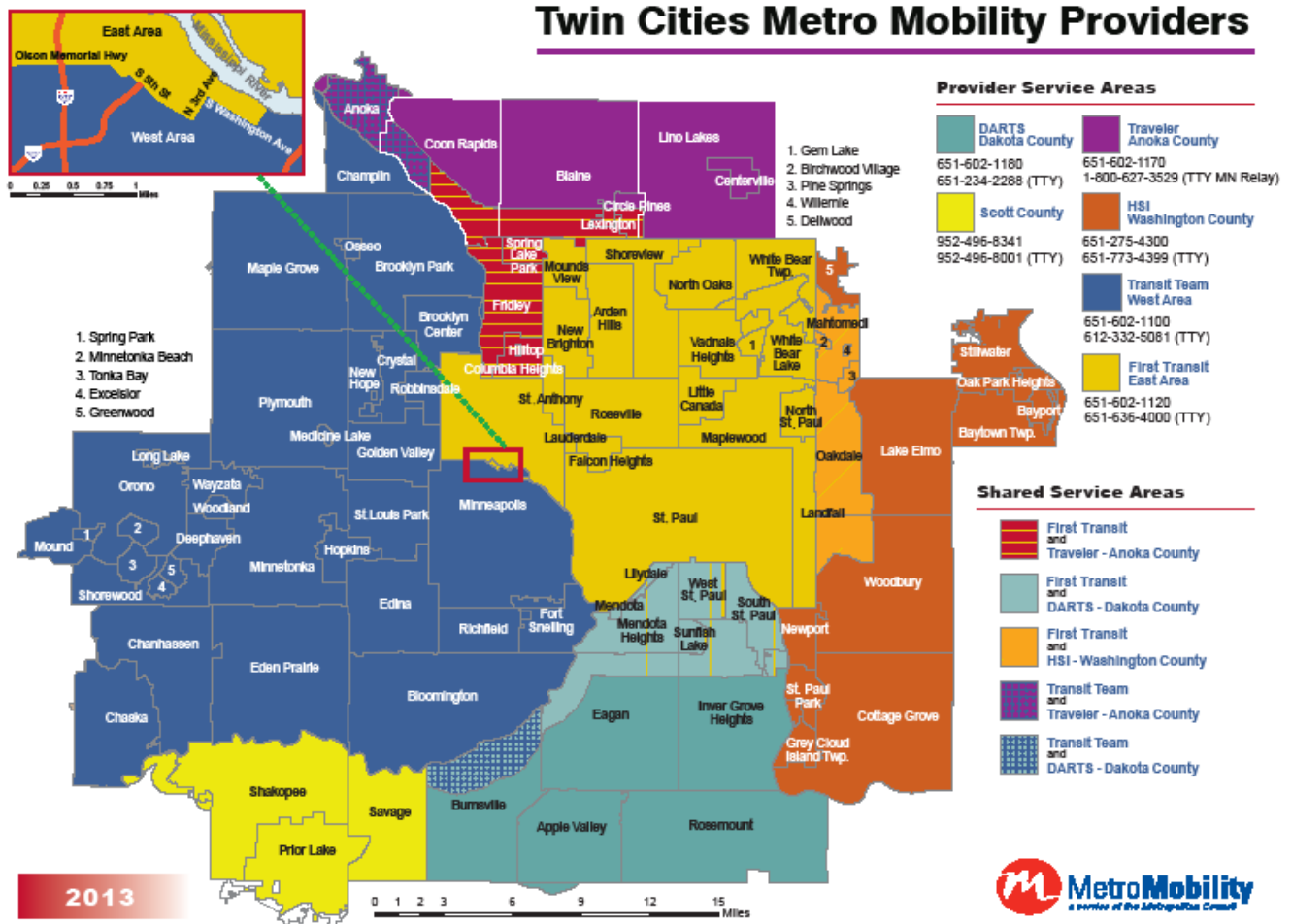
Email: metromobility@metc.state.mn.us

Website: www.metromobility.org

Metro Mobility Providers (see Figure 18):

- Anoka County Traveler, www.co.anoka.mn.us
651-602-1170, 1-800-627-3529 TTY (MN Relay), 763-323-5556 FAX
- Dakota County (DARTS), www.darts1.org/
651-602-1180, 651-234-2288 TTY, 651-234-2284 FAX
- First Transit, 651-602-1120, 651-636-4000 TTY, 651-628-0211 FAX
- Scott County Transit, www.co.scott.mn.us
952-496-8001 Phone & TTY, 952-496-1842 FAX
- Transit Team, 651-602-1100, 612-332-5081 TTY, 612-332-4116 FAX
- Washington County HSI, www.hsicares.org
651-275-4300, 651-773-4399 TTY, 651-275-4310 FAX

Figure 18: Metro Mobility Provider Map



Transit Link Service

Transit Link dial-a-ride service is a shared-ride minibus or van service for the general public in the seven-county metropolitan area. Transit Link service generally operates outside areas covered by regular route transit. Unlike Metro Mobility services, the use of Transit Link service does not depend upon any personal information to determine eligibility. ADA-certified riders may also use the service. Trips must be scheduled in advance, and each request is evaluated for eligibility in order to avoid duplication with fixed route service options. Trip requests that can be accomplished on fixed route are not eligible on Transit Link. If either the origin or destination is more than $\frac{1}{4}$ mile from a stop in the winter and more than $\frac{1}{2}$ mile from a stop in the summer, the trip will qualify for Transit Link for at least a portion of the trip. Transit Link makes connections with regular route service at transit hub facilities. ADA certified riders are eligible for door-to-door service and if the trip has a fixed route solution within the prescribed walking distance the customer will be required to book the trip with Metro Mobility. Services are provided on weekdays from 6:00 AM until 7:00 PM. See **Figures 19 and 20** for service area and hubs.

Figure 19: Transit Link Dial-a-Ride Service Area

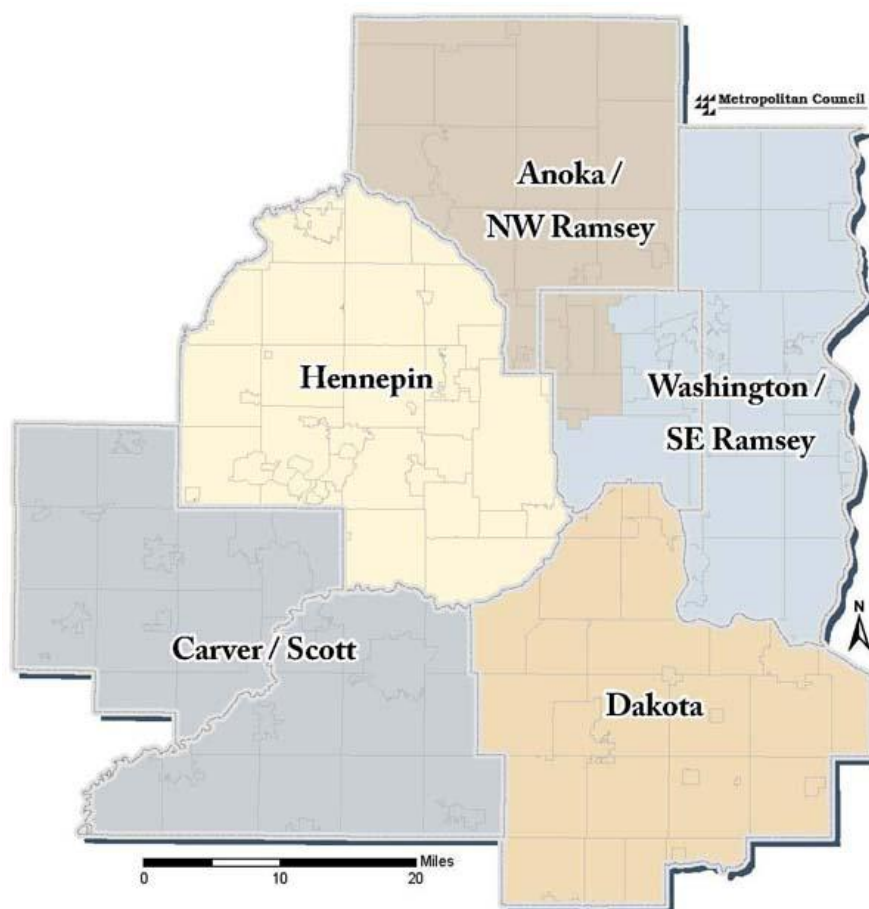
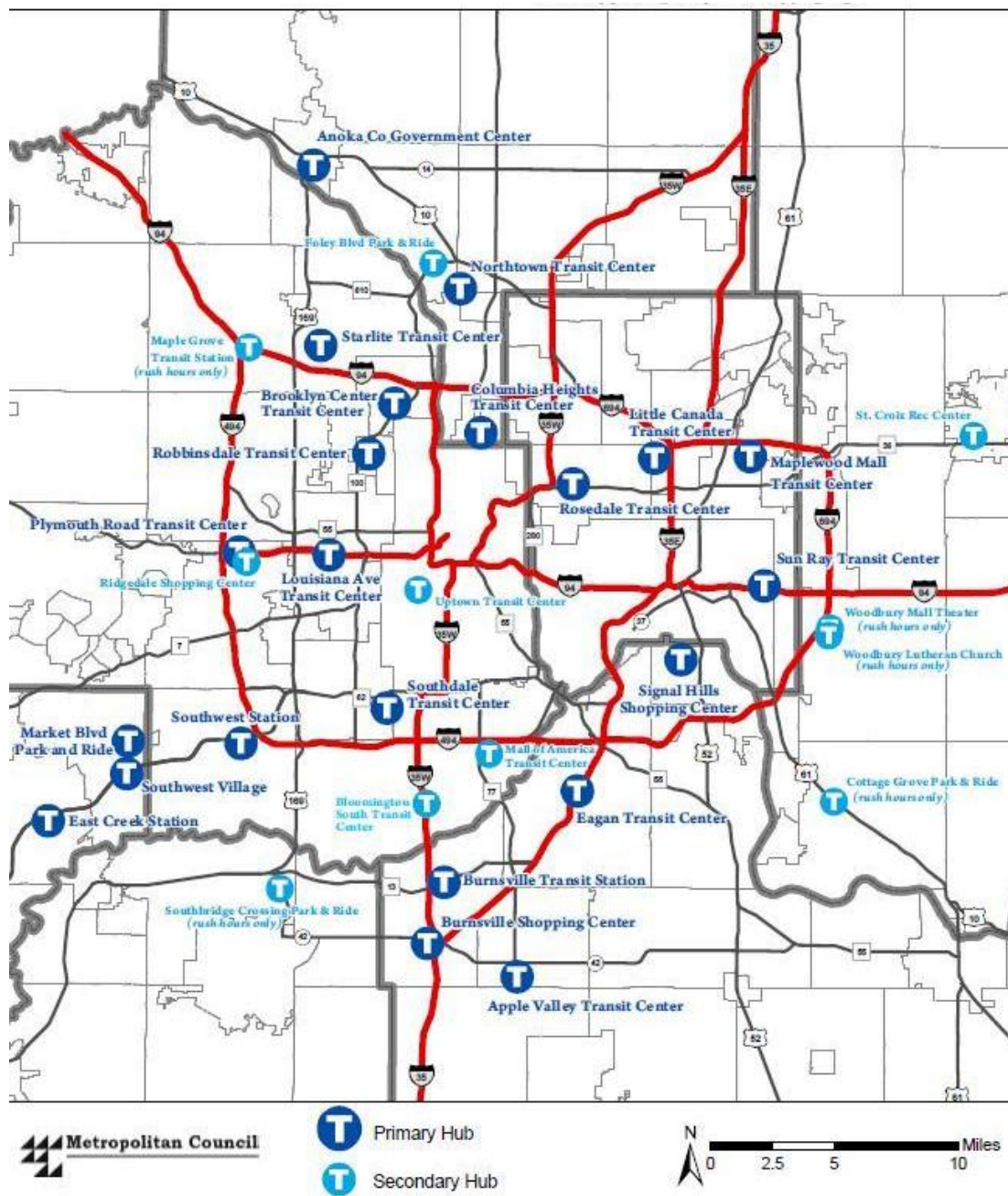


Figure 20: TransitLink Hubs



Human Service Transportation

Medicaid

There are approximately 121 identified transportation providers who contract for Medicaid transport in the Twin Cities region. Medical Transportation Management began providing non-emergency medical transportation to the seven county metropolitan area in 2004 under a state contract with the Minnesota Department of Health Services. In 2009, through Minnesota state legislation, the non-emergency transportation responsibility was passed from the state to the counties. The Minnesota Metro Counties Consortium (MCC) then began contracting with MTM to broker transportation services in the metropolitan area. Scott and Carver Counties also provide Medicaid transportation services.

Private Non-Profit Providers

In addition to public transit dial-a-ride services, there are numerous providers in the region operating demand response services for their own clients.. These services can be notably difficult to inventory, since many are simply a van provided by a church, living facility or social service agency to allow their clients access to their facilities, or attend medical or other services.

- Community centers
- Senior centers
- Assisted living centers
- Adult day facilities
- Life skills centers
- Kidney dialysis centers
- Medical clinics
- Faith-based organizations and facilities

These social services agencies typically only offer services for their respective clients and maintain a limited geographic range for transportation. Nearly all the identified private providers indicated that they would take clients to facilities in Minneapolis, though the other pick up and drop off locations tended to be limited tightly around the originating city or county.

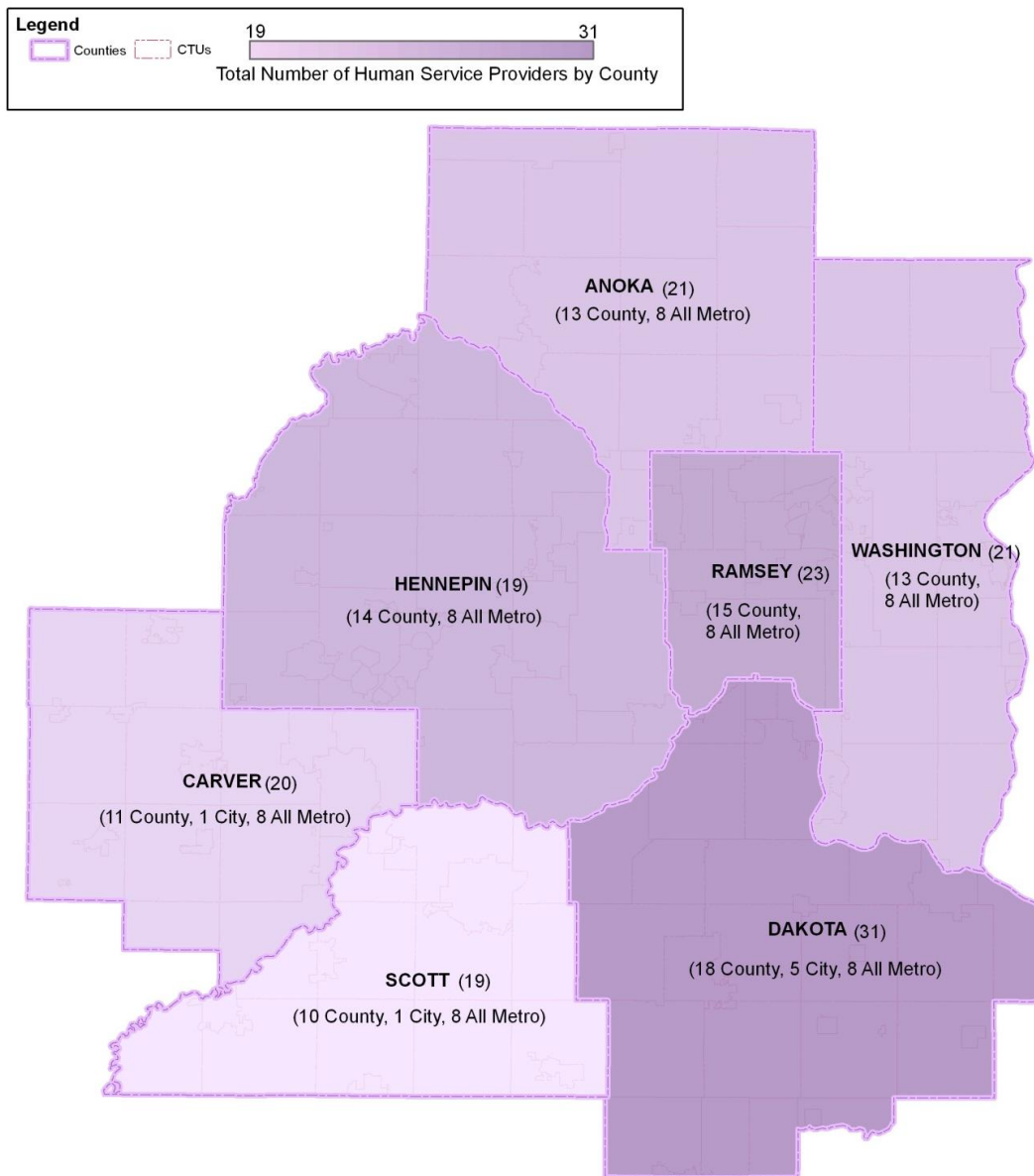
Volunteer Driver Programs

Many small non-profits in the region offer transportation services for their clients by seeking volunteer drivers to fill that role. The volunteers are screened with background checks to ensure client safety. The drivers often drive their own vehicles and are reimbursed by mileage, or drive an agency vehicle. Some, though not all of these agency vehicles are lift equipped to handle client's mobility devices. Services for most volunteer driver programs are limited in geographic range, with many typically offering trips to/from Minneapolis to a specific list of cities/townships within a defined range. Trip purposes include medical appointments, grocery errands, and community centers.

Service by All Known Transportation Providers

Multiple organizations – transit and human service agencies – provide transportation in every county of the region, as shown in **Figure 21**. However, each provider serves different populations and different transportation needs. Coordination between these providers is possible, though consideration of compatible populations and funder requirements would be necessary.

Figure 21: Metropolitan Area Transportation Providers



Other Transportation-Related Services

As described earlier in this chapter, there are a variety of services that support an individual's ability to get where they need to go. Through the provider questionnaire, the following organizations were identified:

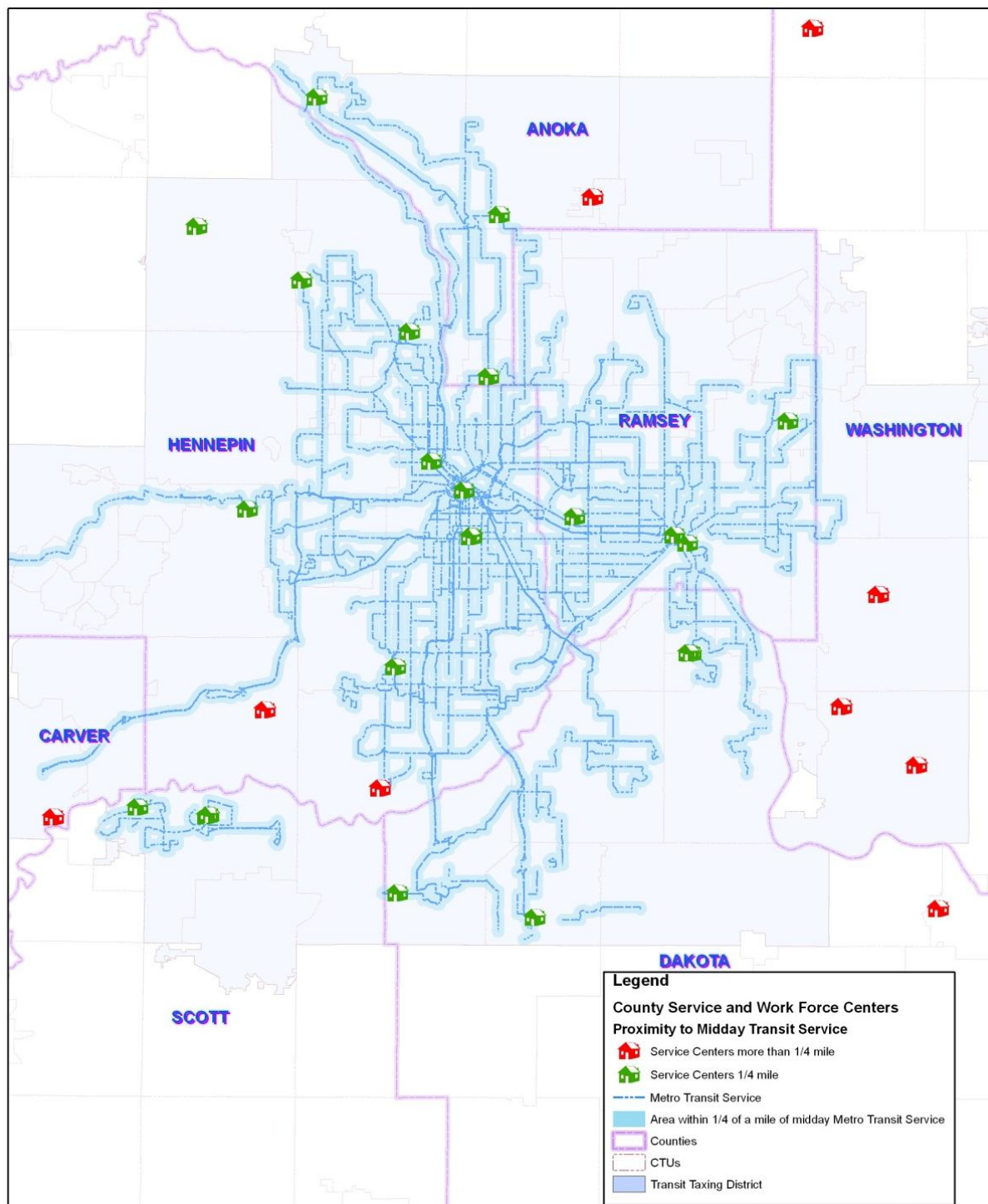
- 7 organizations that provide travel training
- 16 organizations that provide some type of information and referral services
- 12 organizations that provide financial assistance for riders, such as free or reduced cost bus passes

Details about all known services are provided in **Appendix A**.

Key Destinations

Key destinations to access via these transportation services include workforce and other human service centers and entry-level jobs. Locations of these destinations are described in **Figure 22**.

Figure 22: County Service Centers Served by Frequent Midday Service¹⁴





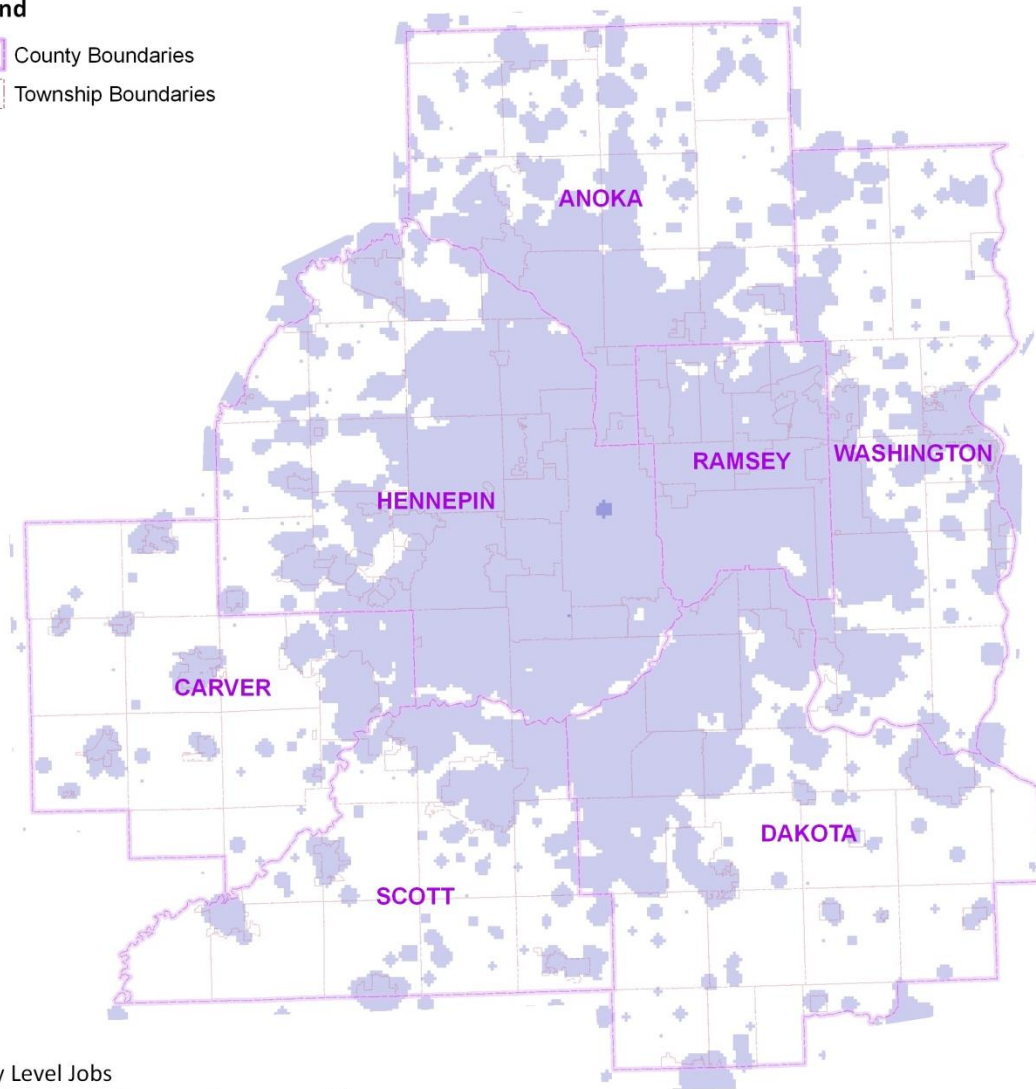
¹⁴ Source: Positively Minnesota, Minnesota Department of Employment and Economic Development website, www.positivelyminnesota.com/JobSeekers/WorkForce_Centers/See_All_WorkForce_Center_Locations/index.aspx

As shown in **Figure 23**, most entry-level jobs per square mile are in roughly the same areas where people with low incomes reside.





Figure 23: Entry-level Jobs¹⁵

Legend

-  County Boundaries
-  Township Boundaries



Entry Level Jobs
(based on wages \$1250 or less a month)

-  5 - 6,262 Jobs/Sq.Mile
-  6,263 - 25,035 Jobs/Sq.Mile
-  25,036 - 56,324 Jobs/Sq.Mile
-  56,325 - 100,128 Jobs/Sq.Mile
-  100,129 - 156,448 Jobs/Sq.Mile

¹⁵ Source: U.S. Census Bureau, On the Map

SWOT Analysis

A SWOT Analysis is a strategic planning tool used to evaluate the Strengths, Weaknesses, Opportunities, and Threats involved in a project or business venture. In this case SWOT was used to assess the current state of the coordination of human services transportation in the Twin Cities region. The SWOT is drawn from an assessment of responses from the online questionnaire circulated to human service transportation providers identified by the project steering committee.

The process involves specifying criteria to assess, as well as identifying the internal and external factors which are favorable and unfavorable to achieving an objective; service coordination.

For the purposes of this project, SWOT is defined as:

Strengths: Attributes of regional human services transportation which are helpful to achieving coordination.

Weaknesses: Attributes of regional human services transportation which are not helpful to achieving coordination.

Opportunities: External conditions or resources which are helpful to achieving coordination.

Threats: External conditions which are harmful to achieving coordination.

Strengths Criteria

- *If area is covered well with some type of service level*
- *If coordination exists*
- *If times of service needs are well addressed*
- *If high level of support is provided across one or more target population*

Strengths

- Dial-a-ride service area expansion into all seven counties area since 2010
- Increased service in exurban areas of Anoka County
- Coordination with churches, day/elder care training facilities
- Services generally offer good traditional business hour coverage on weekdays

<p><i>Weaknesses Criteria</i></p> <ul style="list-style-type: none"> • <i>If opposite of Strengths</i> • <i>Anything identified in needs assessment section, as relevant</i>
<p>Weaknesses</p> <ul style="list-style-type: none"> • A number of agencies indicate that no coordination activities are currently in practice • Client denials rising due to operating at capacity in high needs areas • Transit service cutbacks • Increases in fares • Increased demand for door-to-door services • Limited service hours, especially evenings and weekends • Minimal services offered to address short trip needs • Need to eliminate service fragmentation • Need for more mobility options for people transitioning into the workforce • Time needed for agency staff to manage paperwork is onerous, especially for small organizations
<p><i>Opportunities Criteria</i></p> <ul style="list-style-type: none"> • <i>If multiple providers engaged in coordination discussion</i> • <i>If multiple providers are available to bridge gaps in service</i>
<p>Opportunities</p> <ul style="list-style-type: none"> • Vehicle sharing between social service providers operating along similar corridors with the same or nearby origins and destinations • Coordination with intercity bus companies for clients seeking long distance destinations beyond the Twin Cities region
<p><i>Threats Criteria</i></p> <ul style="list-style-type: none"> • <i>If duplication exists (drains resources)</i> • <i>If resource concerns exist</i> • <i>If increasing demand is identified</i> • <i>Strict eligibility requirements</i>
<p>Threats</p> <ul style="list-style-type: none"> • Transportation budgets are tight and probably going to get tighter in the future • Fuel costs present increasing burdens upon transportation budgets

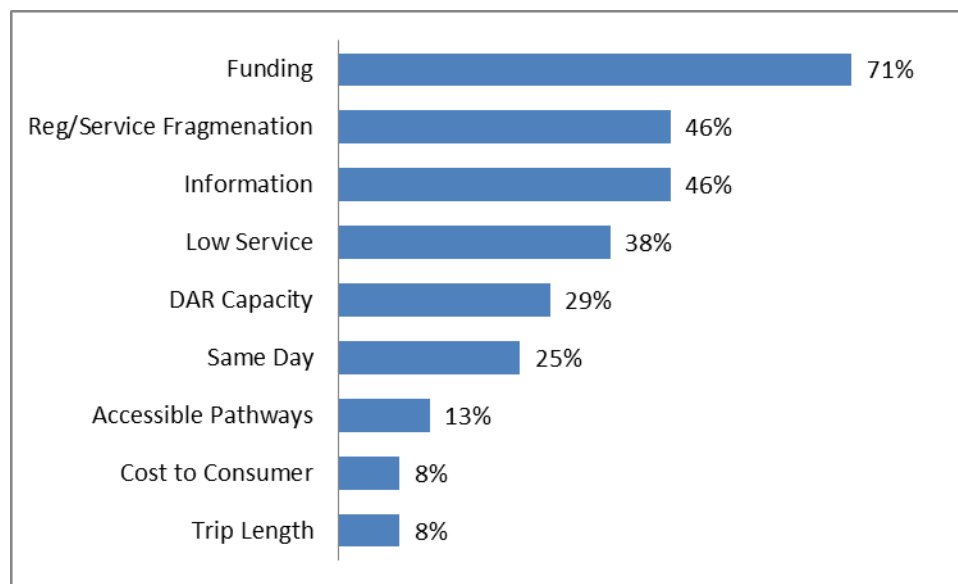
IV. Needs Assessment

This section describes the needs identified by stakeholders who responded to the online questionnaire and refined by participants in the workshop held on November 9, 2011. Barriers to mobility are described in two tiers – 1) top priority issues to address, described in priority order, and 2) all other needs that did not fall into the top priority bracket.

Top Priority Mobility Barriers to Address over the Next Four Years

During the November 9 workshop, participants reviewed all needs identified in the 2007 plan as well as those identified through the online questionnaire. Needs were refined through small group work sessions. Once the list was fully updated, participants selected nine top priority issues to address over the next four years and prioritized them using electronic polling. **Figure 24** shows the polling results. Details about each of these issues are provided below.

Figure 24: Top Needs in Priority Order



Lack of adequate funding for transportation services while demand is increasing

All participants agreed that the lack of adequate funding for transportation services is a major barrier to meeting mobility needs. Human service agencies reported struggling to fund transportation services without pulling dollars from the program budget.

Service fragmentation and regulatory barriers

Service fragmentation exists with human service transportation providers because most limit passengers they are willing to carry to their own client base. Opportunities for coordination may exist, however. Individuals may be involved with multiple programs. Programs with similar

needs but different client bases may be close enough to share programs. Programs with similar client bases may be able to share resources. There are limited situations in which these opportunities are being realized.

Disincentives exist to sharing of transportation resources. For example, insurance costs can become prohibitive, especially in transporting disadvantaged individuals. Start-up costs for shared transportation systems, like capital acquisition and scheduling systems, can also be prohibitive.

Regulatory issues may also work as a disincentive for coordination. For example, Metro Mobility was a Medicaid transportation provider about 10 years ago. As many Medicaid clients are also ADA eligible, Metro Mobility had billing options that resulted in leveraging Federal funds available to pay for such trips. However, State legislature changes requiring a signature from medical personnel at the passenger's appointment station created a substantial obstacle to Metro Mobility's first door-through-first door service policy. The regulation tends to enforce, intended or otherwise, an exclusive-ride service delivery model with very personalized service that is expensive and inefficient.

Information issues: Limited information on/awareness of travel options for regular-route and dial-a-ride programs and limited connections between information lines

There is an abundance of information available about transportation services in the region, though many people are not aware that these resources exist. United Way 2-1-1, Metro Transit's "Transit Line," and MinnesotaHelp are the central resources for directing people to the appropriate agencies and services. Unfortunately, there is not strong integration among the three resources. Metro Transit's website does not have a link to United Way or MinnesotaHelp. United Way's website does have a link to Metro Transit, but it takes many extra steps to get transit information. MinnesotaHelp does not link to Metro Transit or Metro Mobility. Stronger links among these agencies would improve coordination and increase citizen awareness of available resources.

There is also a rising need to supply this information in multiple languages, as the Metropolitan Council has projected increases in immigrant populations in the region.

When transferring from dial-a-ride to regular route, riders do not know when a bus will actually arrive. This can be especially problematic for frail older adults and people with disabilities, as well as during the winter. In addition, not all dial-a-ride scheduling software allows for integration of regular-route and dial-a-ride information. This means that schedulers can only know of dial-a-ride options when scheduling trips.

Human service agencies reportedly sometimes overlook public transit. The services can have erroneous perceptions among agencies and consumers stemming from a lack of information, problems with schedules, and perceived convenience issues. These can lead to an underutilization of public transit and increased inefficiencies.

Lower levels of service (fixed route transit, Dial-a-Ride, ADA) in some areas and during off-peak times (evening/weekend)

There are areas of the Twin Cities region that have low levels of public transit. This is primarily because these areas have low densities of housing and employment and because of budget constraints. In addition, transit is focused during peak hours when most people are going to and from work, making travel to jobs with non-traditional schedules difficult. Because of these two factors, mobility can be difficult in areas of the region for persons without automobiles. This may become a critical issue in Scott, Washington, Dakota, Anoka and Carver Counties, where there has been a high rate of growth in the population over 65 years of age (see **Figure 3**). Some of the same Census tracts in these areas also home to 100-200 households that do not possess a vehicle, as shown in **Figure 9**.

As shown in **Figure 21**, some county workforce centers are not served or served by low levels of regular route public transit service. This makes it difficult to access these facilities, though dial-a-ride, if not already at capacity, may be available.

Inadequate mobility options often hamper entry-level workers the most. **Figure 22** illustrates where entry-level jobs are concentrated, primarily in the central city and along major transportation corridors. Bus service is sometimes provided where residents live but does not connect them to the appropriate job opportunities, or vice versa.

Dial-a-ride capacity - fills quickly

Though dial-a-ride services are provided throughout the region, seats reportedly fill quickly. For instance, denials in Dakota County are typically around 200 per month, approximately ten per day. Another person stated that she tried to get a ride for her son one week in advance, and the dial-a-ride services were already full.

Limited options for same-day service

Same-day transportation services are limited. Fixed route and taxi services are available, though these are not feasible options for some populations, including some individuals with disabilities and frail older adults, especially those with limited incomes. There is also some same day capacity on Metro Mobility and Transit Link, but it is limited to cancels that come in on the day of service. For Metro Mobility customers, they also have the option of taking a same day taxi ride that the Council subsidizes at up to \$13 per one way trip.

Accessible pathways

Pathways to fixed route transit are not always accessible, even though a transit stop itself may be accessible. Additionally, snow can be a major impediment to accessing transit for people using mobility devices such as wheelchairs. When snow hasn't been removed from sidewalks, people who use wheelchairs can't access buses.

Limited options for low/no cost transportation services

The cost of transportation is prohibitive for some riders. This includes the cost of using transit services on a regular basis and the occasional need for higher level services, such as taxis and non-emergency medical transportation.

Long trips to medical and other services from outlying areas

People living far from the urban core of the area are often faced with long trips to access services in the urban core. Any long trip in a car is likely to be an even longer trip on a shared ride system. Additionally, trips from one suburban community to another are especially long on fixed route transit because transfers must be made through downtown, rather than taking a more direct route.

Other Mobility Barriers

The following mobility barriers are not presented in any particular order. It is important to note that these are still considered important barriers to mobility for older adults, individuals with disabilities and low-income residents, though they did not rise to the top priority list of issues to address over the next four years.

Inadequate transfer facilities for dial-a-ride service to coordinate with regular-route service

Regular-route service is typically less expensive than dial-a-ride service. Transportation costs can be reduced by using dial-a-ride programs to take people to regular-route service whenever possible. Then the majority of the trip can be made on regular-route service at a lower cost. One key is having facilities that allow for transfers. In some places, there are no or only minimal shelters, which makes transferring difficult, especially for vulnerable populations.

Reduction in available transportation options by transit and human service providers

Some transportation services have been eliminated since the 2007 plan.

Lack of service for short distance travel outside ADA service areas

Dial-a-ride service is only available for trips over one-half mile, or one-quarter mile in the Winter. This can be a challenge for frail older adults and people with disabilities that prevent them from traveling even these short distances.

ADA certification difficulties

Agencies report difficulties with the ADA certification process. It is a two-part application: a certified professional completes one form, and the applicant or their guardian completes the second part. Some certified professionals do not complete their part in a timely manner.

Fear of riding fixed route transit among older adults

Some people, especially older adults, do not feel comfortable using fixed route transit, either because they simply don't know how to ride it or because they perceive it as unsafe.

Some vehicles uncomfortable for older adults and people with disabilities

Some vehicles are uncomfortable for riders. For instance, the suspension in vehicles with a rear lift makes it so rider feels every dip and bump. Providers report that they need to have a stronger voice with the manufacturers.

Limited door-through-door service

Very few options exist for individuals who need assistance getting in and out of their residences and destinations.

V. Analysis and Input

Analysis of Prior Projects

Many projects have been implemented since the 2007 plan was approved. JARC and New Freedom recipients provided some data on the outcomes of these projects, though data is not available for all recipients. This section summarizes outcomes based on the available data, though impacts are likely greater than what is described here. Details on each project are included in **Appendix C**.

Ridership: Ridership on some services increased while others decreased. Ridership decreased 18% between 2008 and 2009 on Metro Transit's Normandale Route and by 85% between 2008 and 2009 on the Southwest Transit's weekday reverse commute route. Southwest Transit attributes their decrease to "soaring unemployment".

Ridership increased on two remaining routes as follows:

- 25% between 2009 and 2010 on Metro Transit's Cedar Point Commons route
- 0.4% between 2008 and 2009 on Emerge Community Development's Access to Jobs van transportation service

Service hours: Hours were expanded into later evening hours on Metro Transit. Additionally, service frequency was increased on Metro Transit from one time per hour to two times per hour on Route 219.

Service area: Overall, projects serve the entire region, though some projects focused on specific areas, including:

- SmartLink Dial-a-Ride in Scott and Carver Counties
- Accessible pedestrian signals installed in the Cities of Minneapolis and St. Paul.
- Anoka County job access project
- Door-to-door, accessible transit in Maple Plain, Mound, and Excelsior
- New Southwest Transit route to connect to Southdale Center
- Various transit route improvements

Project Summaries

Number of customer contacts: 38,491

Number of passenger trips: 707,880

Types of projects:
Information coordination, direct transportation, accessible pedestrian signals, mobile data computers, system coordination, hours expansion, carpools

Areas served: Region-wide by MTS and United Way; Scott, Carver, Anoka and Dakota Counties; Minneapolis, St. Paul, Maple Plain, Mound, Excelsior

Jobs targeted: 306,746

Populations served:
All, with particular focus on low-income/job seekers

Information: In 2008 and 2009, the Greater Twin Cities United Way added over 1,600 new transportation options to the statewide database and made over 22,000 customer contacts.

Population served: All populations were served across the projects implemented since 2007. However, JARC funds, benefiting low-income populations, were in higher demand than New Freedom funds, serving people with disabilities. Over 300,000 jobs were targeted with JARC-funded projects.

Oversight Committee Input

The oversight committee guiding the development of this plan assembled on December 14, 2011, to review the plan and identify action steps to fortify the region's coordination efforts. It was determined that there is a need for improved information sharing and a structure to continue coordination discussions. For example, recommendations include:

- Share information about best practices in human service transportation coordination
- Establish policy to require participation in Community Action Committee by grant recipients
- Develop and distribute fact sheet about FTA grant opportunities and grant application sample
- Work with organizations to prepare for grant applications
- Incorporate regional partners in Community Action Council meetings on quarterly to annual basis to share information and promote coordination

The Council has not identified the resources for these recommendations.

VI. Strategies

After updating the needs at the November 9, 2011, workshop, participants worked together to identify strategies to overcome each of the top nine identified needs listed in chapter IV.

The strategies are grouped in three categories:

Category 1 - Coordinate and Consolidate Transportation Services and Resources

- Coordinate Transportation Services
- Address Regulatory Barriers
- Share Resources

Category 2 - Mobility Strategies

- Mobility Management
- Expand Transportation Services
- Accessibility Enhancements

Category 3 - Communication, Training, and Organizational Support

- Centralize Information
- Educate the Public on Transportation Options
- Improve Awareness of Existing Resources and Programs

The strategies are listed in the following table in each of the categories above. Along with the strategies listed, there is an example of projects that would be eligible for funding. The table also identifies need addressed by each strategy and the priority of the need.

A criterion will be added to the solicitation process for distribution of Sections 5310 (Elderly And Disabled Program Capital Assistance For Specialized Transit Vehicles), 5316 (JARC), 5317 (New Freedom) funds that address these strategies.

Strategy	Need Addressed	Priority
Category 1: Coordinate and Consolidate Transportation Services and Resources		
Improve coordination among information lines – United Way 2-1-1, and MinnesotaHelp could improve the integration of transportation information into their processes and information. Metro Transit’s website could have a link to United Way and MinnesotaHelp. Metro Transit’s Transit Line could have information on United Way, MinnesotaHelp and other sources.	Information Needs	High
Address insurance issues related to shared transportation – Innovative options could be used for addressing barriers to human service transportation providers sharing transportation resources. These include enacting state law to remove insurance barriers among human service agencies, enabling strict training and procedural codes for drivers and maintenance workers across agencies, and the use of insurance brokers and consortiums. Additionally, there are state regulations that prevent Metro Mobility from being a Medicaid transportation provider. If these laws were changed, Metro Mobility could provide these services and improve coordination among programs.	Regulatory issues/service fragmentation	High
Establish mobility manager to address regulatory and billing issues – Identify a central entity to provide mobility management services can help to coordinate among the various transportation providers to overcome regulatory and billing barriers to coordination.	Regulatory issues/service fragmentation	High
Pool funding – Pooling funding between agencies to provide transportation services among compatible service populations and types of rides may help to relieve some funding strains while maintaining or increasing service levels.	Efficiency and Coordination	High
Identify match funds – Consider using other federal funds to match the FTA funds.	Efficiency and Coordination	High
Coordinate grant seeking – Coordinate search for grant funds, potentially through a mobility management service.	Efficiency and Coordination	High
Policy Change – The current cancellation window for dial-a-ride and ADA paratransit service is one hour. If it were two hours instead, this may allow for more same day reservations. This is a local policy decision.	Same day service limitations	Medium
Seek partners with similar mission for transportation agreement – Coordinate between agencies to provide more direct transportation routes than provided by fixed route transit. Support may be needed through mobility management-type services to help agencies develop useful agreements. It may also be useful to create a central collection of model agreements.	Trip length challenges	Low

Category 2: Mobility Strategies		
Establish mobility manager – Develop plan to establish Mobility Management program. Identify a central entity to provide mobility management services can help to coordinate among the various transportation providers.	Efficiency and Coordination	High
Increase off-peak transit service – Increase the availability and frequency of transit service during off-peak hours, where demand warrants. In particular, demand for service increases to key sites, such as areas with a large number of entry-level jobs, workforce centers and other human service centers.	Low service levels	Medium
Local shuttle/circulator service – Establish of circulator services or local shuttles to connect with transit stations, by a public transit or human service agency, could help to bridge service gaps in areas with limited transit availability.	Low service levels	Medium
Increase dial-a-ride capacity – Expand the dial-a-ride service, adding drivers and vehicles to meet demand for the service.	Low service levels	Medium
Expand ADA service hours – Expand ADA service beyond fixed route hours of operation.	Low service levels	Medium
Carpool programs – Establish stand-alone carpool programs and promote at major work sites, in retirement communities and other sites where large numbers of people have similar transportation needs.	Low service levels	Medium
Technology enhancements –Scheduling systems to allow for better integration between dial-a-ride and fixed route service.	Efficiency and Coordination	High
Technology enhancements –Scheduling systems to allow for same day reservations on dial-a-ride, ADA paratransit and other services.	Same day service limitations	Medium
Fixed routes across suburbs and within suburbs – Establish a complementary service alternative to the large bus regular route service, which cuts some of the extra stops through downtown, may help to decrease travel times.	Trip length challenges	Low
Free/reduced cost bus passes – Public transit agencies and human service agencies could coordinate to make free or reduced cost bus passes available to very low-income individuals.	Cost to consumers	Low
Taxi vouchers – Human service agencies could coordinate with taxi companies to establish a voucher or pre-paid taxi ride program for situations in which transit won't meet needs. These programs are typically a last resort, when no other options are viable. It can be a good approach for patient transportation upon discharge from the hospital.	Cost to consumers	Low
Volunteer driver programs – Expand volunteer driver programs to include additional outreach efforts to recruit more volunteers, stipends to incentivize participation, training modules for risk management and liability coverage coordination.	Trip length challenges	Low
Pathway enhancements – Pathway enhancements may include adding sidewalks where none exist, moving any blocking structures (e.g. telephone pole), repairing sidewalks, installing accessible pedestrian signals (APS), and timely snow removal.	Accessible pathway limitations	Low

Category 3: Communication, Training, and Organizational Support		
Improve awareness of information sources – There are a number of information sources already available about transportation options in the Twin Cities area. However, awareness of these resources is limited. Public awareness strategies can help to improve access to these resources and the transportation services that people access through them.	Information Needs	High
Awareness of travel training programs – Just as awareness about transportation services can be improved, awareness about travel training programs can be improved.	Information Needs	High
Fully use JARC and New Freedom funds – Improve information about the potential for use of the funds and fully expend available JARC and New Freedom dollars each year.	Efficiency and Coordination	High
Maximize ridership – Improve information about available service in order to maximize ridership on fixed route transit or other fixed routes services. Efforts to maximize ridership may also include surveying potential riders to ensure that services meet rider needs. Increased ridership on fixed route services should improve efficiency, thereby allowing for additional services to fill gaps.	Efficiency and Coordination	High
Improve public transit marketing to human service agencies – One opportunity to improve coordination is to improve the marketing of the regular route transit system to non-profits. For example, Metro Transit’s Marketing Department could provide customized information packets to social service agencies and directly to clients of these agencies. Metro Transit could also incorporate a demonstration and training session on the use of the Web based itinerary planning program. This could include specialized maps indicating the location of routes, the location of services, and pamphlets outlining transit works. In some instances, Metro Transit may want to produce personalized pamphlets for large, individual organizations. Metro Transit may want to also market specialized fare options, such as Go-To cards and bus tokens to human service agencies. Another area of marketing is to non-English speaking populations. Although Metro Transit has substantially expanded its efforts to communicate with these populations, barriers still exist. Service guides in other languages marketed specifically to human services organizations working with immigrant groups could help reduce barriers.	Information Needs	High
Travel training – Expand travel training, targeting those populations who could ride fixed route transit but who do not feel comfortable doing so.	Information Needs	Medium
“Bus buddy” program – Bus buddy programs provide extra assistance to individuals who cannot ride fixed route transit on their own. The bus buddy may be a person on staff at an agency, though they are more commonly volunteers. Colleges, senior volunteer programs, senior centers are a few potential sources for volunteers.	Information Needs	Medium

Appendix A: Transportation Inventory

Agency and county served	Contact	Agency type	Curb to curb	Door to door	Door through door	Travel training	Information and referral	Financial assistance	Pick up service limitations	Drop off service limitations
Anoka										
Coon Rapids Senior Services	763-767-6473	Public	x	x			x		Coon Rapids City Limits -- Seniors	Coon Rapids City Limits
Rise Incorporated	763-783-2814	Private non-profit	Unk	Unk	Unk				None	Anoka, Hennepin, Chisago, Western Ramsey counties
Anoka County Job Training Center	763-783-4819	Public				x	x	x	N/A	N/A
Anoka County Transit -- Traveler -- Metro Mobility	763-422-7088	Public	x	x	x				None, but must complete eligibility certification	NW Ramsey County
Northeast Contemporary Services, Inc.	651-636-3343	Private non-profit	x				x	x	None	Ramsey, Anoka, Hennepin, Washington
Opportunity Partners	952-238-4827	Private non-profit	x	x		x			None	Chaska, Victoria, Minneapolis, Brooklyn Park, Anoka Co. Dakota Co. Mtka, Plymouth, Coon Rapids, W. St. Paul
Volunteers of America / Anoka Care Center	763-421-2311	Private non-profit					x		N/A	N/A
Dakota										
GAPP Services -- volunteer	612-251-3850	Private non-profit	x				x		None	Metro area

Neighbors Inc	651-306-2143	Private non-profit	x	x	x			x	South St Paul, West St Paul, Inver Grove Heights, Mendota Heights, Mendota, Lilydale and Sunfish Lake	None
Hastings Family Service	651-437-7134	Private non-profit	x	x	x		x	x	Hastings School District 200	None
General Security Service Corporation -- Dakota County Juvenile Inmate Transports	952-858-5000	Private for-profit		x					None	None
ProAct, Inc.	651-289-3159	Private non-profit	x	x	x				None	Dakota County and parts of Hennepin, Ramsey and Washington Counties.
Dakota County -- DARTS -- Metro Mobility	651-234-2244	Public	x	x	x				Apple Valley, Burnsville, Eagan, Inver Grove Heights, Lilydale, Mendota, Mendota Heights, Rosemount, South St. Paul, Sunfish Lake, and West St. Paul. Must complete eligibility certification	Apple Valley, Burnsville, Eagan, Inver Grove Heights, Lilydale, Mendota, Mendota Heights, Rosemount, South St. Paul, Sunfish Lake, and West St. Paul.
Dakota County - DARTS - Transit Link	651-234-2244	Public	x						None	Dakota County
Opportunity Partners	952-238-4827	Private non-profit	x	x					None	Chaska, Victoria, Minneapolis, Brooklyn Park, Anoka Co., Dakota Co.,

										Minnetonka, Plymouth, Coon Rapids, W. St. Paul
Midwest Special Services, Inc	763-557- 1231	Private non- profit	x					x	None	Shoreview, Eagan, Apple Valley St. Paul Brooklyn Park
Hennepin										
Opportunity Partners	952-238- 4827	Private non- profit	x	x					Chaska, Victoria, Minneapolis, Brooklyn Park, Anoka Co. Dakota Co.	Chaska, Victoria, Minneapolis, Brooklyn Park, Anoka Co. Dakota Co. Mtna, Plymouth, Coon Rapids, W. St. Paul
VEAP (Volunteers Enlisted to Assist People)	952-888- 9616	Private non- profit	x	x			x	x	Bloomington, Richfield, Edina, South Mpls (south of 50th and west of Cedar) Low-income seniors 55+ and disabled	Bloomington, Richfield, Edina, Minneapolis (downtown and south), St Louis Park (Methodist Hosp and Park Nicollet Clinics only) Low-income seniors 55+ and disabled
PRISM	763-529- 1252	Private non- profit	x	x			x		St. Louis Park, Golden Valley, eastern Plymouth (east of Hwy. 494), Robbinsdale, Crystal, New Hope, Brooklyn Center, all of Ramsey and all of Washington counties	St. Louis Park, Golden Valley, eastern Plymouth (east of Hwy. 494), Robbinsdale, Crystal, New Hope, Brooklyn Center, Ramsey and Washington counties.
Hennepin County -- Human Services and Public Health	612-275- 3578	Public	x					x	None	Hennepin County
Plymouth Metrolink	763-509- 5535	Public	x	x					City of Plymouth	Minneapolis and Plymouth

Maple Grove Transit	763-493-2200	Public	x						Maple Grove and Osseo and downtown Minneapolis	Maple Grove and Downtown Minneapolis
Rise Incorporated	763-783-2814	Private non-profit	Unk	Unk	Unk	x	x	x	None	Anoka, Hennepin, Chisago, Western Ramsey counties
City of Shakopee	952-233-9346	Public	x						Does not pick up here	Shakopee, Minneapolis, Prior Lake
General Security Service Corporation -- Dakota County Juvenile Inmate Transports	952-858-5000	Private for-profit		x		x	x	x	None	None
Northeast Contemporary Services, Inc.	651-636-3343	Private non-profit	Unk	Unk	Unk				None	Ramsey, Anoka, Hennepin, Washington
ProAct, Inc.	651-289-3159	Private non-profit	x	x	x	x	x	x	Dakota County and parts of Hennepin, Ramsey and Washington Counties.	Dakota County and parts of Hennepin, Ramsey and Washington Counties.
Midwest Special Services, Inc	763-557-1231	Private non-profit	x	Unk	Unk				None	Shoreview, Eagan, Apple Valley St. Paul Brooklyn Park
Northeast Senior Services, Inc. - Volunteer	612-781-5096	Private non-profit	x	x	x				Northeast Minneapolis and St. Anthony Village, Colombia	Northeast Minneapolis and St. Anthony Village, Colombia
Transit Team, Inc. -- Metro Mobility	651-602-1100	Private for-profit	x	x	x				Must complete eligibility certification	None
Ramsey										
Northeast Contemporary Services, Inc.	651-636-3343	Private non-profit	Unk	Unk	Unk				Referral from county human service agency	Ramsey, Anoka, Hennepin, Washington

Phoenix Alternatives, Inc	651-407-7174	Private non-profit	Unk	Unk	Unk				None	Ramsey Co, Washington Co
Midwest Special Services, Inc	763-557-1231	Private non-profit	x	Unk	Unk				None	Shoreview, Eagan, Apple Valley St. Paul Brooklyn Park
Ramsey County Workforce Solutions -- DWP, MFIP, MFIP extension services	651-779-5650	Public				x	x	x	N/A	N/A
Rise Incorporated	763-783-2814	Private non-profit	Unk	Unk	Unk				Western Ramsey	Western Ramsey
Anoka County Transit-- Traveler -- Metro Mobility	763-422-7088	Public	x	x	x				NW Ramsey County, and must complete eligibility certification	NW Ramsey County
ProAct, Inc.	651-289-3159	Private non-profit	x	x	x				None	None
First Transit -- Metro Mobility	651-602-1120	Private for-profit	x	x	x				Must complete eligibility certification	None
Scott										
City of Shakopee - Circulator	952-233-9346	Public	x			x	x	x	Shakopee	Shakopee, Minneapolis, Prior Lake
Smart Link -- Transit Link	952-496-8341	Public	x						None	Scott, Carver, Hennipen Counties
Smart Link -- Metro Mobility	952-496-8001	Public	x	x	x				Must complete eligibility certification	None
Carver										
Smart Link -- Transit Link	952-496-8341	Public	x						None	Scott, Carver, Hennipen Counties

Smart Link -- Metro Mobility	952-496-8001	Public	x	x	x				Must complete eligibility certification	None
C.A.R.T. - Carver County Transit - volunteer	(952) 496-8341	Public	x	Unk	Unk				Medical appointments for anyone who has no other means of transportation.	Carver County
SouthWest Transit -- fixed route	(952)949-2BUS	Public	x						Chanhassen, Chaska and Eden Prairie	Chanhassen, Chaska, Eden Prairie and Minneapolis
Washington										
Northeast Contemporary Services, Inc.	651-636-3343	Private non-profit	x						None	Ramsey, Anoka, Hennepin, Washington
ProAct, Inc.	651-289-3159	Private non-profit	x	x	x				Parts of Washington County	Parts of Washington County
Phoenix Alternatives, Inc	651-407-7174	Private non-profit	Unk	Unk	Unk				None	Ramsey and Washington
Human Services, Inc. (HSI) -- Transporter -- Metro Mobility	651-275-4300	Private non-profit	x	x	x				Most areas of Washington County	Most areas of Washington County
Metro Area										
T.L.C. Special Transportation	952-882-0535	Private for-profit	Unk	Unk	Unk				None	None
Medical Assistance	1-866-467-1724	Public							Medicaid --65+ Plans	Funding agency
MN Dept. of Human Services	651 431-4008	Public							Funds counties and employment services providers who provide these services	Funds counties and employment services providers who provide these services

VA Medical Center	612-725-2000	Public	x	Unk	Unk				Veterans	Unknown
Metro Mobility -- ADA Service	612-602-1111	Public	x	x	x	x		x	Must complete eligibility certification	None
Metro Transit -- Fixed route	612-373-3333	Public	x			x		x	None	None
Transit Link	651-602-1111	Public	x			x	x	x	Must schedule in advance	None

Appendix B: Oversight Committee Members

Name		Title	Company/Agency	Division
Joan	Truhler	Employment Services Manager /MFIP-DWP	Ramsey County	Workforce Solutions
Anne	Lyman	Customer Service Supervisor	DARTS	N/A
Shelley	Jacobson	Chief Operating Officer	Twin Cities RISE!	N/A
Jacqueline	Peichel	Community Program Policy Consultant	Department of Human Services/MN Board on Aging	Aging and Adult Services
Sam	O'Connell	Sr. Transit Planner	Dakota County	Office of Transit
Kristina	Krull	Management Analyst	Dakota County	Office of Planning and Analysis
Gina	Baas		University of Minnesota	Center for Transportation Studies
Bob	Anderson		Metropolitan Area Agency on Aging	
Alan	Herrmann	Operations Supervisor	Scott County	Community Services
Fay	Simer	Senior Transportation Planner	MnDOT	Office of Transit
Dana	Rude		Metro Mobility	
Roz	McDonald	Office Manager/ Supervisor	Ramsey County Human Services	Disability Services
Ronda	Allis		Region Nine Development Commission	
Elizabeth	Johnson	Executive Director	PRISM	Nonprofit Dial-a-Ride, Car ownership/repair
Elaine	Koutsoukos	Senior Planner	Metropolitan Council	Metropolitan Transportation Services
Curtis	Buhman	Program Development Supervisor	Hennepin County	HSPHD
Michael	Mechtenberg	Planner	Metropolitan Council	Metro Transit
Rajean	Moone	Community Impact Consultant - Independence	Greater Twin Cities United Way	

Appendix C: Results of Prior Coordination Projects

Applicant	Project	Funding	2007 & 2008 Results	2009 Results	2010 Results
Anoka County Job Training Center	AnokAccess Project	1/01/2009-9/30/2011 - \$80,000			1,355 one-way trips, 23 targeted jobs. 62 customer contacts. Accomplishment - earmarking dial-a-ride/standing order rides services with daycare stops.
Greater Twin Cities United Way	United Way 2-1-1	10/01/2007-9/30/2009 - \$170,000	2008 - 10,306 customer contacts (an increase of 22% increase in transportation referrals), 800 new transportation options added to statewide database, over 1,500 transportation resources updated.	12,000 customer contacts; 835 new transportation options added to the statewide database, with 20% of those options targeting low income and people with disabilities.	
Scott and Carver Counties / SmartLink Transit	Scott County and Carver County Transit Collaboration / SmartLink Dial-A-Ride Increase and Coordination Efforts	10/01/2007-9/30/2011 - \$515,077	2008 - 2,700 customer contacts, 29,500 one-way trips. Added call-in time, extended customer service hours, expanded bus service, 2-way communication, Mobile Data computers	13,423 customer contacts, 208,334 one-way trips	
City of Minneapolis	Accessible Pedestrian Signal Demonstration Project	10/01/2007-9/30/2011 - \$275,000	Accessible Pedestrian Signals were installed at 9 signalized intersections.	APS installed along bus routes. 2-wire push buttons have been more reliable.	

Applicant	Project		2007 & 2008 Results	2009 Results	2010 Results
Metropolitan Council (Metropolitan Transportation Services)	Route 219	10/01/2007- 9/30/2011 - \$1,087,390	2008 - 7 months, 38,935 one-way trips, 5,737 revenue hours, 25,856 targeted jobs. Added additional weekday span of service until approximately 10:30 pm on weekdays; additional frequency, from once per hour to twice per hour, on weekdays between 6 am and 7 pm. Added Saturday service.	73,500 one-way trips	
Metropolitan Council (Metropolitan Transportation Services)	Route 721 Evening and Weekend Service		2008 - 7 months, 16,092 one-way trips, 959 revenue hours, 112,028 targeted jobs. Allowed the weekday span to be expanded to include evenings until 9:30 pm and Saturday and Sunday service.	28,900 one-way trips	
Metropolitan Council (Metropolitan Transportation Services)	Route 540 Normandale Lake Office Park		2008 - in 7 months, 23,385 one-way trips, 1,866 revenue hours, 10,555 targeted jobs. Extended service from rush hours only to all day service and additional crosstown service.	19,200 one-way trips	
Metropolitan Council (Metropolitan Transportation Services)	Route 612		2008 - 7 months, 1,698 one-way trips, 1,465 revenue hours, 5,962 targeted jobs. New route; all day Saturday service also provided.	4,300 one-way trips. Route eliminated due to low ridership.	

Applicant	Project		2007 & 2008 Results	2009 Results	2010 Results
SouthWest Transit	SouthWest Transit Weekday Reverse Commute	10/01/2007-9/30/2009 - \$70,000	2007 - 390 one-way trips, 309 revenue hours. 2008 - 5,645 one-way trips, 1,222 revenue hours, 135,306 targeted jobs. Increased frequency of service by implementing this new route from/to Southdale Center rather than downtown Minneapolis.	816 one-way trips; soaring unemployment rates affected ridership numbers and therefore affected the viability of the route.	
Emerge Community Development	Access to Jobs - Van Transportation	10/01/2007-9/30/2011 - \$808,162	2008 - in 4 months, 12,541 one-way trips, 1,300 targeted jobs.	26,100 one-way trips, 311 targeted jobs	26,201 one-way trips
Metro Transit	Route 14 Cedar Point Commons	10/01/2007-9/30/2011 - \$644,289	2008 - in 4 months, 12,541 one-way trips, 1,745.26 revenue hours, 1,300 targeted jobs. Extended route to serve the new Cedar Point Commons retail development and MSP Airport's air freight terminals.	48,424 one-way trips, 1,300 targeted jobs. Most of rides are taken by shoppers rather than workers.	60,600 one-way trips, 1,300 targeted jobs. Most of rides are taken by shoppers rather than workers.
City of Saint Paul	Accessible Pedestrian Signal Installation	10/01/2007-3/31/2012 - \$260,000	92 signalized intersections evaluated and prioritized for APS installation. Began process of purchasing the APS pushbuttons in late FY 2008.	Installed 4 APS along Snelling, 2 along W. 7th St., one along Mounds Blvd. (all along bus routes)	Installed APS along Cleveland Ave. and Summit Ave. Identified additional intersections for APS along transit routes.

Applicant	Project		2007 & 2008 Results	2009 Results	2010 Results
Human Services, Inc.	HSI Transporter North County Expansion	10/01/2007-9/30/2010 - \$75,111	2007 - 193 one-way trips, 171 revenue hours. 2008 - 3,372 one-way trips, 2,286 revenue hours.	3,548 one-way trips	2,575 one-way trips
City of Prior Lake, City of Shakopee, Scott County Rise, Inc.	BlueXpress Reverse Commute Rise Rides for Work Project	10/01/2009-9/30/2011 - \$436,000 10/01/2009-9/30/2011 - \$96,153			Took delivery of coach bus on September 21, 2010. 26,170 one-way trips. Two 15 passenger vans transported people with disabilities or other transportation barriers to jobs or work related activities.