

**Metro Mobility and Mainline Bus
Accessibility**
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**Consumer Research Study
Draft Final Report**

Regional Transit Board

Mears Park Centre
230 East 5th Street
St. Paul, Minnesota

ILIUM ASSOCIATES, INC.

500 108th Avenue NE, Suite 2450
Bellevue, WA 98004
206.646.6525 FAX 206.646.6522

Marketing Research & Management
Program Development
Environmental & Graphic Design
Marketing Communications

ILIUM

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Consultant's report prepared for
the Regional Transit Board

Preface

This study was developed and managed by the staff of the Regional Transit Board, with review and comment from the Mainline Bus Task Force of the RTB Transit Accessibility Advisory Committee. Ilium Associates, Inc. of Bellevue, Washington conducted the study and prepared this report.

Ilium wishes to acknowledge and gratefully thank both RTB staff and Task Force members. Each provided valuable insight and thoughtful comments. Special thanks go to Ms. Cynthia Curry, the RTB Project Manager, for her positive direction and her attention to achieving project objectives, schedule, and budget.

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I. Introduction

Introduction

This study was undertaken to provide information from Metro Mobility users for the planning and development of lift-equipped mainline bus service, and to assess the use and satisfaction of currently operated door-thru-door services. The study is one component of the RTB regular route accessibility work plan currently being implemented by RTB. This plan was prepared to develop the most effective implementation of newly purchased MTC lift-equipped buses. This study is, also, part of on-going RTB efforts to improve transportation services for disabled persons, and to gain important information from users of current door-thru-door services.

Objectives

The RTB developed five objectives for the study. From these objectives, a comprehensive research methodology was formulated.

1. Identify and describe the potential riders of accessible mainline bus service.
2. Identify the travel needs of this group as they relate to mainline bus service development.
3. Determine the perceived barriers to using the service and the features that would attract riders.
4. Determine the rider satisfaction and use of existing transportation services.
5. Determine communication strategies for new and existing services.

Research Plan

The research plan devised to meet the study objectives involved a combination of quantitative and qualitative research methods, and an opportunity for community involvement and comment.

A total of four research tasks were undertaken.

1. A randomly selected telephone survey of 400 Metro Mobility users who reside in Minneapolis or St. Paul. This survey included 100 potential users of mainline accessible service.
2. Four focus groups with Metro Mobility users to discuss mainline accessible bus service.
3. Four community forums to provide an opportunity for interested citizens to discuss mainline accessible bus service and comment on service development, service implementation, barriers, and needs.
4. A review of secondary data including operational data, internal memorandums, former research reports, RTB plans and programs.

Telephone Survey Methodology

To determine the potential rider audience for accessible mainline service and to gain opinions on Metro Mobility service, a telephone survey was conducted of people eligible to use Metro Mobility.

The Metro Mobility Administrative Center provided a list of all people eligible to use Metro Mobility with a residence in Minneapolis or St. Paul. This list included 10,730 eligible individuals, and was dated March 20, 1990.

Individuals were identified by randomly identifying names on the list using a technique that gives each person on the list an equal chance to be selected. A call was made to this individual, and up to three call backs were made to interview this person before substituting another person from the list.

If the selected individual could not be interviewed because of their disability, the interviewer asked if there was a person in the household who could answer a few questions for the selected individual. If so, this person was interviewed and asked to represent the views of the randomly selected individual.

Every reason was recorded for not being able to interview a person. The reasons and incidence is shown next.

Reason why person could not be interviewed:

Deceased	17
Moved	48
Cannot be interviewed at any time (medical, health)	22
Refused	69
Hearing impairment	8
Speech impairment	5
Other (disconnected or wrong numbers)	134
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Total	303

Questionnaire Development and Pretest

A draft questionnaire was developed by the consultant and submitted to RTB for review. This review included RTB staff and management and the TAAC Task Force on Mainline Bus Service. After several revisions and further review, the questionnaire was approved for pretesting.

The questionnaire was pretested with 25 randomly selected individuals. A few minor corrections were made to interviewer instructions as a result. Pretest results were presented to RTB staff and the final survey questionnaire was approved for fielding.

A copy of the questionnaire is included in the appendix.

Interviewing

All interviewing was conducted from Ilium Associates, Inc. offices located in Bellevue, Washington. Telephone calls were made seven days a week. No calls were made after 8:00 PM Minnesota time. Interviews were conducted in April, 1990.

Sampling, Weighting

The sampling plan specified a total of 400 interviews, with 100 of the interviews with potential users of mainline accessible service. The final tally was a total of 420 interviews, of which 28 were not included in the data set because they no longer traveled.

Only 34 potential users of mainline accessible service were identified in the first 300 interviews conducted. Oversampling was conducted to gain more potential users in the final total sample. As a result, the final data reported was weighted to correct for the oversampling. Each person was assigned a different fractional weight depending on which of the two samples he/she was collected from. The first sample was a simple random sample of clients from the Metro Mobility list. The second sample from that list selected only those persons with some interest in using the mainline service; this sample was collected after the original data collection, and was done to increase the number of cases available for analysis in this important group. Without weighting it would appear that there was more interest in bus use because of this oversampling. The two samples were weighted as a function of the probability of selecting a person from the population. The weights were 1.153 and .226 for the first and second samples, respectively, a ratio of about 5.1 to 1. The exact weight values were calculated to keep the final number of cases in the analysis at the same 392 as in the raw data.

Verification/Coding

All surveys were reviewed and verified by the Ilium project manager. A double coding technique was used to ensure accuracy of data entry.

Sampling Reliability

The Metro Mobility list contained 10,730 names, from which 410 calls were made in the first phase of calling to produce 328 usable interviews. The roughly three percent included in this portion of the sample is large enough to give a reliability of plus-or-minus five percent, at the 95% confidence level, for percentage questions showing a 30-70 split. In more detail:

95% Confidence Intervals

<i>qu. split</i>	<i>+ or -</i>
5-95	2.5%
15-85	<4%
30-70	5%
50-50	<6%

The second set of 64 questionnaires came from a second sampling of the list for those individuals who might be interested in riding the bus. A total of 514 calls was made to garner the additional 64. For analysis purposes these respondents have been "weighted" together with the original sample. The weighting process gives about a 5:1 weighting of first vs. second sample. Thus, the slight contribution of the second set is unlikely to make any major changes in the confidence intervals above for percentages found in the weighted analyses.

Definitions

To properly understand and interpret the data presented in this report, it is important to understand the definitions used in the development of the research. A significant amount of time was spent establishing many of these definitions. As part of the process for reviewing the telephone survey questionnaire, each definition was examined by the RTB project manager and staff, and the Transit Accessibility Advisory Committee's Task Force on Mainline Service.

Rider:

A person eligible to use Metro Mobility service and who has used the service at least once a month in the past year.

Potential Rider (Mainline Accessible Service):

A person eligible to use Metro Mobility and who would find it not at all difficult or somewhat difficult to travel from their home to a place two blocks away, and who is willing to try the service.

Mobility:

To determine a range of mobility for those eligible to use Metro Mobility service, each rider was asked a series of questions regarding their health condition. All individuals indicating difficulty climbing stairs were identified as the group within the Metro Mobility population as having some mobility limitation. From this group, people who use a wheelchair were identified. People using a cane, walker, crutches or leg brace were separately identified as another. The third group identified are those individuals who have difficulty climbing stairs but do not use any mobility aid.

Service Provider:

A non-profit or for-profit organization contracted to provide door-thru-door service.

Focus Groups

A total of four groups were held over a two day period. Two of the groups were held in Minneapolis and two in downtown St. Paul. Participants were randomly selected from the Metro Mobility certification list and asked to participate. In addition, RTB staff provided a list of potential participants, and several participants were recruited to include a range of disabilities in the groups.

The moderator's outline is available in the focus group section of this report.

Community Forums

To gain additional information from the disabled community, four community forums were conducted.

The community forums were organized by RTB staff, with some assistance from the consultant. Ilium staff provided review of a direct mailer designed by RTB to promote the forums, and developed a short forum questionnaire.

The mailer and the questionnaire are available in the report appendix.

Report Organization

This report has been organized into sections based on the research plan and study objectives. A separate executive summary has also been prepared.

I. Introduction

- ☐ Objectives
- ☐ Methods

II. Telephone Research

- ☐ Metro Mobility
- ☐ Mainline Bus Service Potential

III. Focus Group Research

IV. Community Forums

V. Findings and Recommendations

II. Telephone Survey Results

Telephone Survey Results

This section presents the results of the randomly selected telephone survey of Metro Mobility users. The section includes reporting of collected data and analysis of the data. As appropriate, information is compared to research conducted in 1987. A complete data set and analytical tables are available in the appendix.

The section is divided into two major sub-categories: Use and Characteristics of Metro Mobility Riders; Mainline Accessible Bus Market. Each of these categories is separated into the following sections.

Use and Characteristics of Metro Mobility Riders

- ☐ Use
- ☐ High Frequency Users
- ☐ Trip Purpose
- ☐ Health Condition
- ☐ Service Evaluation
- ☐ Complaint Process
- ☐ Communications
- ☐ Future Service Options
- ☐ Demographics, Characteristics

Mainline Accessible Bus Market

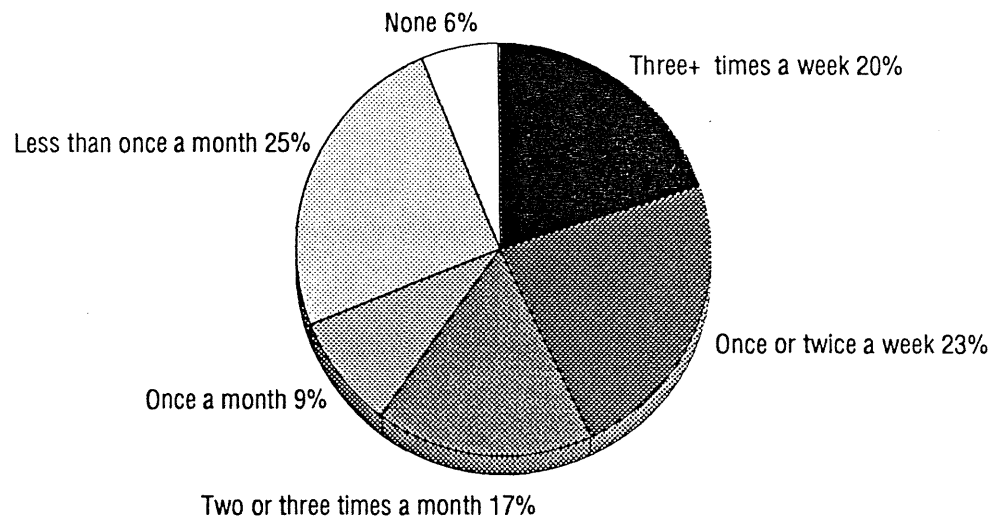
- ☐ General Market
- ☐ Former MTC Riders
- ☐ Market Potential

Use of Metro Mobility

1. Travel Frequency

As shown on the following graph, 43% of those eligible to use the service ride often, at least once a week, one in five are riding nearly every day. Only 6% of those eligible to use the service do not ride.

In the past year, how often have you used Metro Mobility?



Those people eligible to use the service but who ride less than once a month or not at all were asked to state a reason why. The majority of comments indicate people no longer needed to use the service either because they no longer travel or get a ride by some other means. Importantly, a few people indicated they had received poor service and no longer use the service as a result.

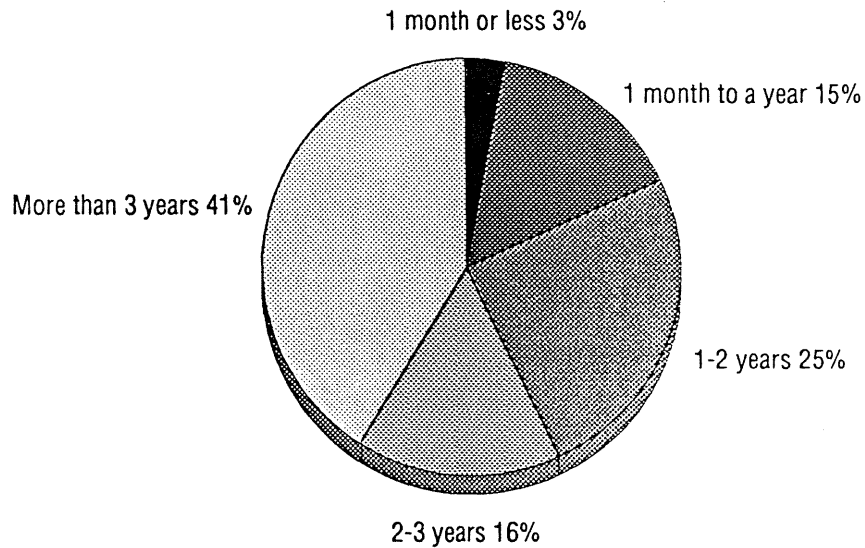
- ☐ Needs help to get into the building.
- ☐ "Didn't pick me up on time; after 1-1/2 hours, my son came and picked me up."
- ☐ "Have family members take me."

- ☐ Very bad experience with the driver. Never picked her up after dropping her off and left her stranded for 4 hrs. Strapped her in too tight in wheelchair and she had pain later.
- ☐ Takes regular bus normally. Stops outside her building. Only takes Metro Mobility when she has doctor's appointment.
- ☐ Have dizzy spells.
- ☐ Friends give her rides.
- ☐ "Don't get out too often. Wouldn't pick me up at right time for operation."
- ☐ In nursing home now.
- ☐ Don't have time. Don't like to call ahead 24 hours.
- ☐ Afraid of snow storms and cars.
- ☐ "No need, I can still drive."
- ☐ "My wife is an invalid, so I have to stay home with her. It's too hard to find someone to stay with her when I want to go out."
- ☐ 24 hr. notification is inconvenient, so she just catches a ride.
- ☐ She used it all the time, but she has a caretaker that lives with her and has a car of her own.

2. History of Use

A majority of people (57%) have been using the service for two or more years. Also of importance is the percent of new riders, those who have been riding less than a year. Nearly one in five are new riders. This is a large number of new people using the service, and a major reason for growth in demand. This group would also impact communication needs.

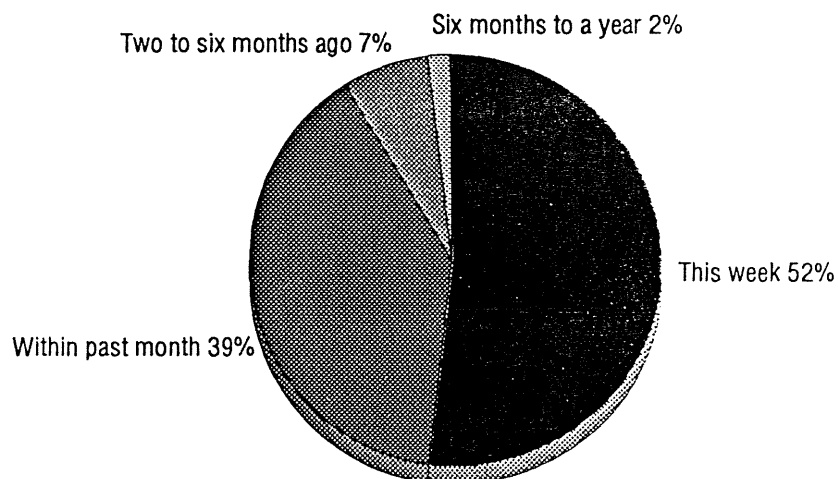
How long have you been using Metro Mobility Service?



3. Last Time Used

Since the travel frequency question related to use in the past year, a second question concerned the last time of use. As shown, 89% of those eligible have used the service in the past month, 51% in the past week.

When was the last time you used Metro Mobility?

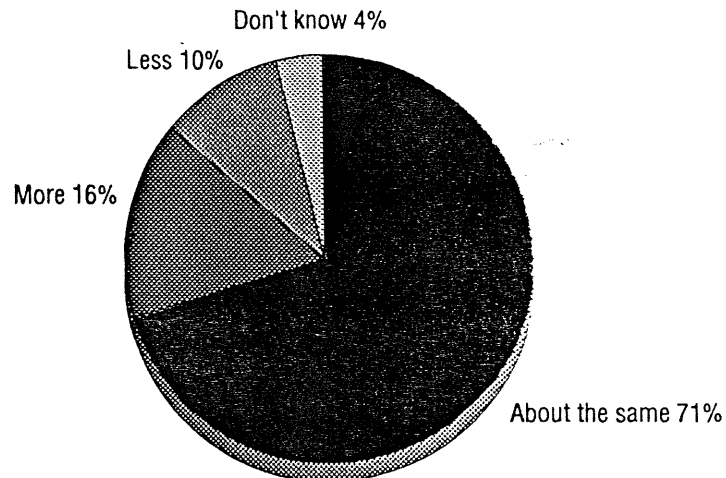


4. Increased, Decreased Use

While 71% of the current users are using the service the same in the past year, 16% are using it more and 10% less. This difference, 6%, is another reason for the increase in demand; current riders are riding more often.

As compared to 1987 data, 3% of Metro Mobility users expected to decrease their use and 41% expected to use the service more often.

Are you using Metro Mobility about the same, more or less than you have in the past year?



People who had recently changed their use of the service were asked to state a reason. People who had recently increased their use of the service generally appear to have recently increased their general mobility, or travel needs based on a change in health condition. Recent decreases are also health related or a change in availability of alternative transportation.

Reasons For Increases

- ☐ Easy to use.
- ☐ More as I go to school.
- ☐ Service on Saturdays.

- ☐ Going more places.
- ☐ More doctor appointments this year.
- ☐ Starting to find more opportunities for places to work and go.
- ☐ "Because my daughter moved and doesn't take me anywhere anymore."
- ☐ Need it for doctor's appointments.
- ☐ Convenient for him, so use more often.

Reasons For Decrease in Use

- ☐ Just had hip surgery.
- ☐ Getting more handicapped.
- ☐ Took her to doctor, but did not come and pick her up, so she hasn't used it since.
- ☐ Son is living with her now and he takes her everywhere.
- ☐ Friends have car now.
- ☐ Job reasons - doesn't work anymore at the same place.
- ☐ Used it more when her sister was in the hospital.
- ☐ No rides available.

High Frequency Users

A special analysis was conducted separating and comparing high frequency users of Metro Mobility with less frequent users. A high frequency rider uses the service at least once a week. The data reported next indicate the habits or characteristics of frequent users that differ from less frequent users.

1. Trip Purpose

As compared to low frequency users, high frequency riders use the service more for shopping, personal business, visiting, work and eating out.

Trip Purpose	High	Low
Shopping	71%	29%
Personal business	72%	28%
Visiting	72%	28%
Work	85%	14%
Eating out	87%	13%

2. Standing Order

High frequency users are more likely to have a standing order (91% vs. 9%).

3. Service Ratings

There were no significant differences between high and low frequency users for service quality ratings or general satisfaction with Metro Mobility service.

4. Complaints

There were no significant differences between high and low frequency users for number of times complained or complaint processing. High frequency users were more satisfied with the outcome of the complaint process (59% vs. 41%).

5. MTC Former Use

High frequency riders were less likely to have used an MTC bus in the past (29% vs. 71%).

6. Service Options

High frequent users rate several service options more important than low frequency users. They believe it is more important to increase the availability of the service and to increase information about the service.

They are less likely to think transfers to MTC are important or improving the Minnesota Rideshare program.

Importance Rating	High	Low
Metro Mobility availability	63%	37%
Information availability	63%	37%
Transfers to MTC	41%	59%
Rideshare Accessibility	33%	67%

7. Communications

High frequency users are more likely to indicate that information distributed in the van is more effective. Less frequent users tend to favor information in the media or in agency newsletters. There were no differences for information mailed to the home.

Effective Communications	High	Low
Van or taxi distribution	53%	47%
Media	47%	53%
Agency	34%	66%

8. Car Availability

More frequent users are less likely to have a car available (34% vs. 66%), and if they do have a car available, they are more likely to say it is available only part of the time (60% vs. 40%).

9. Potential for Accessible Mainline Service

More frequent users are less likely to be potential mainline accessible bus users. 91% state they cannot use the service as compared to 83% of less frequent users.

10. Demographics

More frequent users are less likely to be retired (37% vs. 63%), or unemployed because of their disability (45% vs. 55%).

Trip Purpose

1. Purpose

Trip purpose is shown for 1990 and for 1987 data. The greatest majority of use is for health related purposes. Shopping has increased from 43% to 64%, and visiting friends remains a significant trip purpose (47%).

For what kind of trips do you use Metro Mobility?

	1990	1987
Health related purposes such as doctor or dentist appointments, therapy or dialysis	98%	87%
Shopping	64%	43%
Person business such as banking or going to the barber or beauty shop	49%	40%
Visiting friends or relatives	47%	44%
Meetings	12%	34%
Volunteer work	8%	16%

1990	1987	
Work for pay	14%	16%
School or Vocational training	6%	12%
Church or Synagogue	24%	23%
Eating out	14%	32%
Recreation that has a scheduled time such as theater, concerts or movies	7%	28%
Other recreation that does not have a scheduled time	6%	25%
Social services, Senior Center	7%	-

2. Multiple Use, Day

10% of Metro Mobility riders use the service for more than one trip purpose in a typical day.

Health Condition

A person's health condition was determined by two methods. The first method recorded the disability code from the Metro Mobility certification list for each person interviewed. The second method involved a series of questions relating to a person's health condition and mobility as it impacts their travel needs.

1. Metro Mobility Codes

The Metro Mobility certification list includes a code that identifies a person by disability, by mobility and by sensory characteristic. The following charts indicate the weighted percentages and person's interviewed by these categories.

Disability	Weighted Percent	Number
Aids	.29	1
Alzheimers	1.52	6
Amputation	2.75	11
Arthritis	26.71	104
Cancer	.99	4
Coordination	9.56	37
Cerebral Palsy	2.34	9
Diabetes	2.46	10
Epilepsy	.88	3
Head injury	.99	4
Hearing impaired	.35	1
Heart disease	10.03	39
Kidney disease	1.04	4
Lung disease	3.63	14
Mental illness	.29	1
Mental retardation	2.64	10
Multiple Sclerosis	2.93	11
Osteoporosis	4.46	17
Parkinson's	2.17	7
Paralysis	1.76	7
Post Polio	1.34	5
Quadriplegia	.29	1
Spinal Cord	1.76	7
Stroke	6.04	23
Vision impaired	5.57	22
Severe aging	3.52	14
Other	2.34	9

Mobility	Weighted Percent	Number
Artificial limb	.29	1
Brace	.58	2
Cane	35.46	138
White cane	5.28	21
Crutch	2.34	9
Guide dog	.58	2
Lark cart	.58	2
None	28.90	113
Oxygen tank	.58	2
Walker	5.40	21
Manual wheelchair	16.96	66
Power wheelchair	2.40	9

Sensory Code	Weighted Percent	Number
None	79.57	341
Blind	11.87	47
Deaf	.94	4
Mental handicapped	7.19	28
Other	.41	2

2. Survey Responses

People interviewed were asked a series of questions to determine their health characteristics as they relate to difficulty of travel by car, bus, van or taxi.

- ☐ 83% indicate difficulty climbing stairs
- ☐ 37% have difficulty hearing or seeing even with the aid of glasses or a hearing device
- ☐ 16% have difficulty grasping coins or other small objects
- ☐ 21% use a wheelchair
- ☐ 52% use a cane, walker, crutches or leg brace

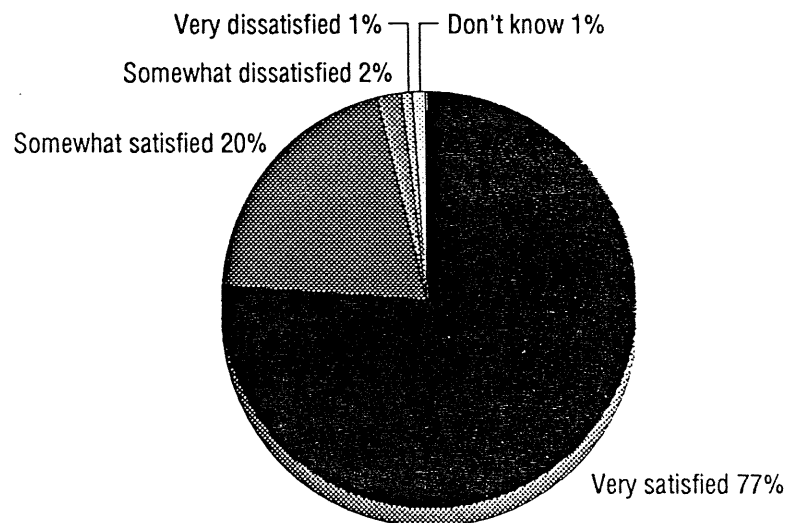
Service Evaluation

A series of questions were asked to determine an overall rating of the service, ratings of specific characteristics, most needed improvement, and the number of times service has been available or delivered properly.

1. Overall Service Rating

Three-quarters of current riders are very satisfied with the service, an additional 20% are somewhat satisfied. By comparison, in 1987, 70% of the users rated the service as "top quality."

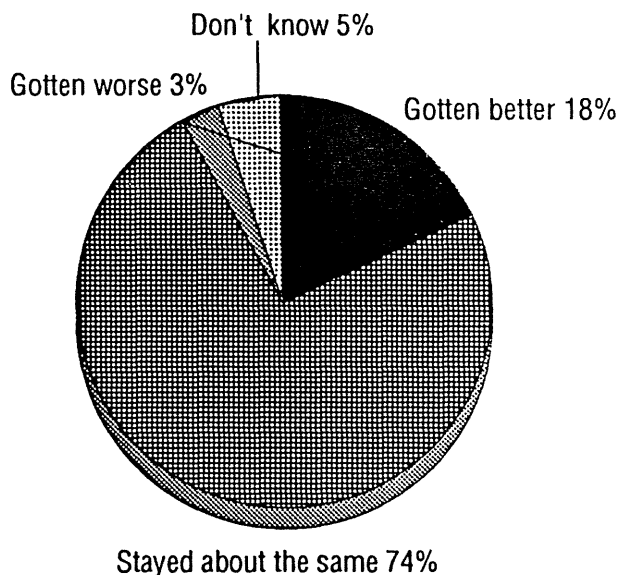
In general, how satisfied are you with the Metro Mobility service you receive?



2. Service Quality in Past Year

Nearly one in five users indicate service has improved in the past year, only 3% indicate service quality has decreased.

In the past year, do you think the Metro Mobility service has...



People were asked in what ways has the service improved or gotten worse. It is interesting to note that many of the positive and negative comments related to on-time performance. In the past year on-time service delivery has improved for some, not for others. Many of the other positive comments relate to driver courtesy.

Better

- ☐ They are more on time.
- ☐ Phone service is better and the van is more on time.
- ☐ Good drivers!
- ☐ Covers more area now.
- ☐ Never wait long.
- ☐ Cleaner and more English speaking characters.
- ☐ Come on time; better service.

- ☐ Better vans. Drivers are better.
- ☐ Drivers are courteous.
- ☐ Bonnie is great, very helpful. Cabs are cleaner.

Worse

- ☐ They're never ever on time - something is always wrong.
- ☐ Dispatchers are bad.
- ☐ Harder to get rides now.
- ☐ Go with Ebanesor now, used taxi before (Yellow Cab).
- ☐ Takes too long to get picked up.
- ☐ Unpredictable service.

3. Ratings of Service Characteristics

A total of eleven service characteristics were rated. As shown below, Metro Mobility users are very satisfied with the comfort and condition of the vehicles, driver assistance and courtesy, vehicle cleanliness, ride safety, and travel time. Items that are rated with somewhat less satisfaction are pick-up time and arriving at the destination on time. One out of four customers rated these items as not satisfied.

	Satis- fied	Neither	Not Satis- fied	Don't Know
The comfort and condition of the vehicles	96%	1%	2%	0%
The courtesy and assistance of the drivers	96%	1%	2%	0%
The driving skill of drivers	86%	8%	4%	1%
The amount of information available about Metro Mobility	83%	8%	8%	2%
The helpfulness and courtesy of people who answer the phone at the provider	87%	5%	8%	1%
How often the provider picks you up at the time you requested	72%	8%	18%	2%
How often the provider arrives at your destination on time	75%	7%	20%	1%
Calling 24 hours in advance to schedule a trip	77%	3%	19%	1%
The cleanliness of the vehicles	96%	1%	2%	0%
How safe you feel when riding	98%	1%	1%	0%
The length of time your trip takes	94%	1%	4%	1%

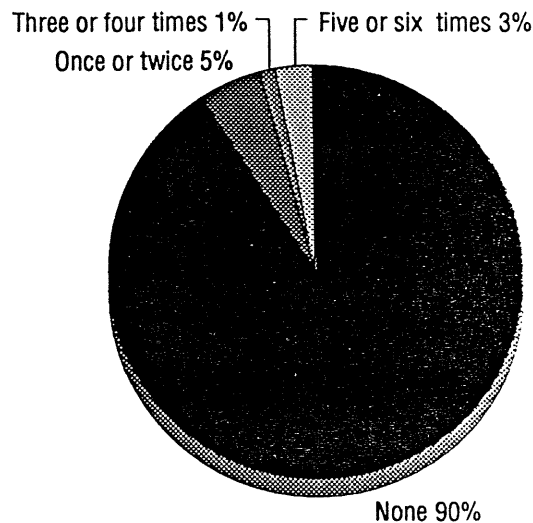
4. Service Availability, Delivery

Riders were asked a series of questions to determine the incidence of trip denials, time shifts, and on-time pick-up.

Service Denial

7% of the users indicate service being denied at least once in the past month.

In the past month, how many times have you requested a trip and it was refused?



As a second indicator of the availability of the service, riders were asked if there was any time during the previous month that they did not make a trip because transportation was not available (this could be any transportation option including Metro Mobility).

A total of 12% indicated they did not make a trip in the previous month because transportation was not available.

These people were then asked to describe the situation. Examining the responses indicates many did not make a trip because of lack of Metro Mobility availability, or the twenty-four hour in advance trip order requirement.

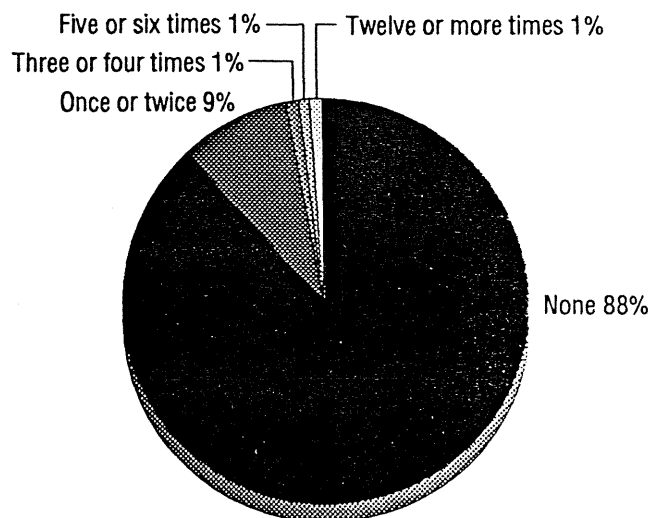
- ☐ "Had to go to doctor. Could take me there, but couldn't pick me up to return."
- ☐ Saw eye doctor at 2:00 to 5:00 - no ride available.
- ☐ Too many riders that day.

- ☐ Medical Center - charged her an extra \$1. and she didn't have it so she couldn't go.
- ☐ Lots of places.
- ☐ Would like to go to banks or drug stores without waiting one hour when it only takes 5 minutes.
- ☐ Couldn't call 24 hrs. in advance.
- ☐ Sister lives out of range of Metro Mobility, so she can't go to see her.
- ☐ Easter Sunday was all booked up.
- ☐ Not showing up (Metro Mobility).

Time Shift

As compared to service demand, a slightly larger percentage (13%) have been asked to shift a pick-up time in the past month.

In the past month, how many times has the service provider asked you to change the pick-up time you requested?



Time Change

8% have had a trip scheduled then been called later in the day to have the time changed.

In the past month, how many times have you had a trip scheduled, then been called later in the day by the provider to have the time of the trip changed?

None	91%
Once or twice	5%
Three or four times	2%
Ten or more times	1%

For the people who were requested to change, 16% stated the change in time was inconvenient. The remaining 85% stated the change was not a problem.

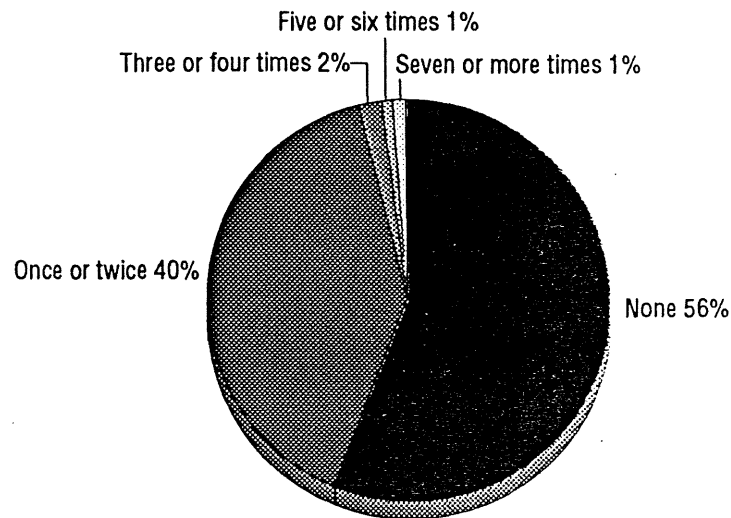
Arrive Early

45% have experienced an early arrival in the past month, the van or taxi arriving more than 10 minutes early from the scheduled arrival time.

Arrive Late

45% have experienced a late pick-up in the past month.

In the past month, how many times has the provider arrived early? This means more than 10 minutes before your scheduled pick-up time.



5. Likelihood of Riding More

One indication of service satisfaction and how well the service meets people's needs is the likelihood of riding more if improvements are made in the service. The likelihood is, also, an indicator of future demand, from current users riding more often.

As shown, only 5% of current users would be very likely to ride more often if improvements were made in specific service characteristics.

25% rated Metro Mobility service as excellent, and 64% rated it good.

Excellent	25%
Good	64%
Fair	11%
Poor	0%

Improving Metro Mobility

The following comments were recorded when people were asked what one improvement they would like to see in Metro Mobility service.

- ☐ More money for program, so providers would be more willing to expand especially with evening and weekend services. Also, more dollars might result in less driver turnover, thus providing more timely and quality services.
- ☐ Same day call in.
- ☐ \$1 a ride add up, \$10 - \$14 per week, \$40 - \$48 per month.
- ☐ A little bit less outrageous over eight miles, friendlier, less smelly drivers (and cars that don't smell like an ashtray).
- ☐ "I'd like to see it be a bit more spontaneous - more than a one-day notice."
- ☐ "Is alright for what I use it for."
- ☐ That drivers have more training. Tying down the chairs securely.
- ☐ In case of emergency, assure E.R. there needs to be a back-up system.
- ☐ It's hard to get a ride sometimes.
- ☐ Fare prices consistent between all providers.
- ☐ Better timeliness on both ends - mostly return trip.

- ☐ Some drivers not very good - set up committee to "evaluate" drivers.
- ☐ "I would command that there would be a NO SMOKING sign (including drivers) and that the radios should be turned off."
- ☐ To have call-backs done in evening.
- ☐ \$3.75 for one-way lowered.
- ☐ Not to see any rides reserved.
- ☐ Better vehicles, drivers, on the dot info about what times are available and yes/no for ride times.
- ☐ Extended hours/expansion of choice provider so that they can pick up in areas they presently can't serve.
- ☐ Less turn downs - certain hours.
- ☐ Providers adhere to the NMAC rules.
- ☐ More providers in the under-serviced areas.

Mainline Accessible Service

A number of questions were asked to determine people's requests for where mainline accessible buses should serve, days of operation and times.

What medical facilities should the MTC lift-equipped buses serve?

- ☐ University of Minnesota Medical
- ☐ Hennepin County Medical Center,
Riverside Medical Center
- ☐ Ramsey Hospital, U. of M. Campus
- ☐ United Hospital
Mt. Sinai Hospital

- ☐ Methodist, North Memorial, MMC, HCMC, Abbott, Sr. Kenny
- ☐ Kenny Institute, Abbott Northwestern Hospital, Fairview St. Mary, Met. Medical Center
- ☐ MCMC, Sister Kenny, Southdale Medical Center

What shopping centers, malls or neighborhood shopping districts should the MTC lift-equipped buses serve?

- ☐ Targets
- ☐ All shopping centers
- ☐ All of the "dales"
- ☐ Target Midway & Rainbow Foods
- ☐ Ridgedale, Southdale, Knollwood, (Might consider using them with transfer points to hook up with Metro Mobility)
- ☐ Rosedale, Maplewood, Har Mar
- ☐ Roseville area shopping centers, downtown Minneapolis and St. Paul
- ☐ Cub foods - Lake St.
- ☐ Apache Plaza
- ☐ Minnehaha Mall, Cedar Riverside

What other places (or community events) would you like the MTC lift-equipped buses to serve?

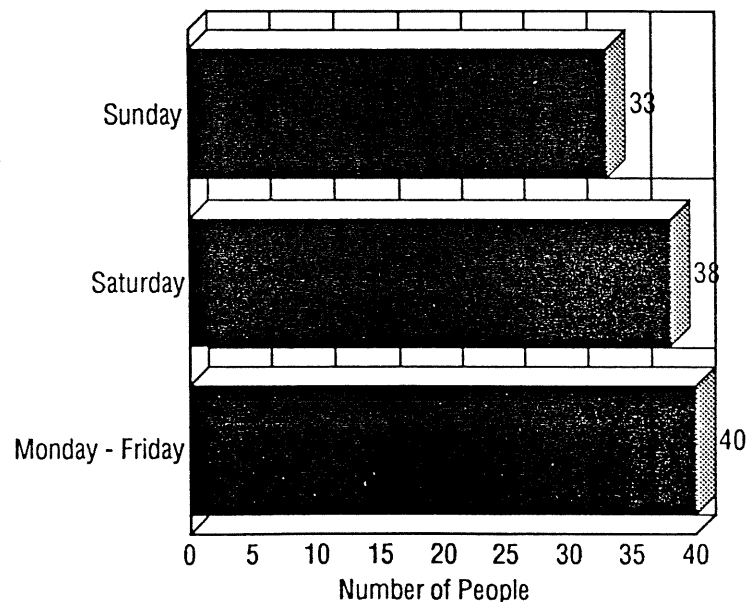
- ☐ Civic Center
- ☐ Walker Art Center, Institute of Arts, University of Minn., Maples Community College
- ☐ Uptown area, Lake Harriet Bandstand, Downtown
- ☐ What about churches
- ☐ Park service centers

- ☐ Fairgrounds
- ☐ Arboretum, State Fair
- ☐ Airport
- ☐ Civic Center, Guthrie Theater, Ordway
- ☐ Met Center, Metrodome and summer festivals
- ☐ Might give thought to State Fair, Canterbury Downs, Valley Fair, Minneapolis Zoo
- ☐ Centennial Building, ACT, Griggs Midway Building

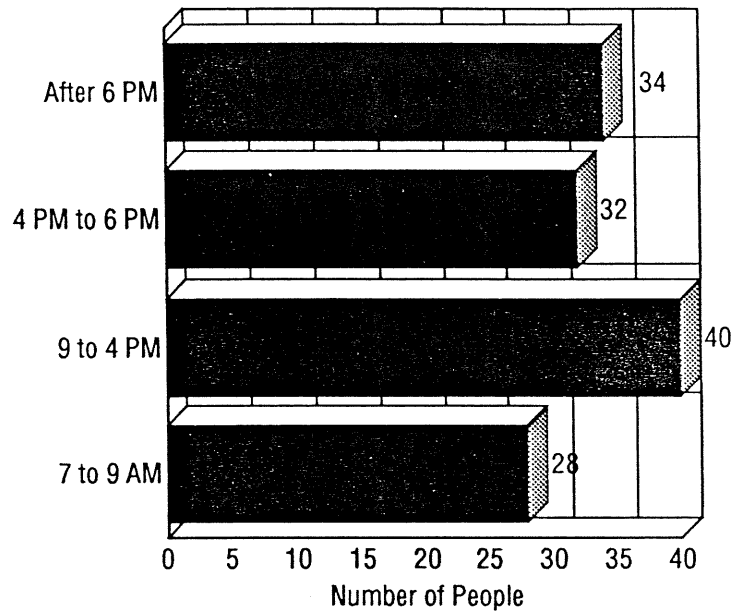
Days and Hours of Operation

Most people indicated the service should operate seven days a week, most hours of the day. There is a slight preference for 9 AM to 4 PM service, and Monday to Saturday service.

Days of Week



Hours of Day



General Comments

An opportunity was provided for general comments and suggestions concerning improving transportation.

- ☐ Intensive driver training and lift-maintenance.
Phase buses in route by route, and routes by handicapped buildings.
- ☐ Make it available for everyone at every level, time and days as the MTC routes.
- ☐ That the drivers shouldn't smoke and have their radios turned down.
- ☐ Equip 12 bus, one going Maryland Avenue to Rice University Ave.
also Como Stryker Lines
- ☐ Have ambulatory people use cab instead of cans.
- ☐ Suggest route 5 as a top priority because it serves Sister Kenny Institute.

Appendix

- ☐ Go back to central/opr. system and let them handle the division.
- ☐ Make pick up times and be ready when van arrives to pick person up.
- ☐ Make sure drivers are informed/aware of care/concerns of the handicapped. Not be too impatient or ultra-concerned with making all stops on time.
- ☐ Work with some phone operators, dispatchers with phone courtesy.
- ☐ Would like all providers to do services as well as Twin City Mobility does.
- ☐ "I would also suggest giving consideration to a dial-a-lift program, so as to make lift-equipped buses available to a larger number of people and a larger area. I think it would also be helpful for possible users of lift-equipped buses to be informed about winter time use on lift-equipped buses. Things to consider - how soon after a snow bill bus stops be cleaned. Will snow plow crews refrain from plowing bus stops closed. How timely will lift-equipped buses run during cold to extreme cold weather. How reliable will lifts be in winter weather maybe providing some test data, or use data in climates similar to that here."

V. Significant Findings and Recommendat- ions

Significant Findings and Recommendations

This research project has produced a large amount of valuable information for the continued development of accessible transportation services in the Minneapolis, St. Paul metropolitan area. The information was developed from a combination of randomly selected, statistically valid quantitative research, and citizen involvement. This combination proved very effective in the formulation of recommendations for implementation of mainline accessible service and improvement of Metro Mobility service.

The significant findings and recommendations presented in this section were prepared to address the objectives of the research project and several other issues that surfaced when the research plan was implemented. They have been organized by the following topics. In some cases only findings are reported, in others both findings and recommendations are presented.

- ☐ Value of Metro Mobility
- ☐ Disabled Population Travel Needs
- ☐ Importance of Service Quality
- ☐ MMAC: Service Planning, Marketing
- ☐ Metro Mobility Identification
- ☐ Mainline Accessible Service Barriers
- ☐ Mainline Accessible Service Target Market
- ☐ Mainline Accessible Service Service Design Features
- ☐ Mainline Accessible Service Service Implementation
- ☐ Mainline Accessible Service Marketing

◆ Finding:

Metro Mobility provides a valuable and effective service that meets many of the transportation needs of people with disabilities.

- ☐ For a significant portion of the riders, the service is their only means of transportation.

- ☐ People rely on the service and use the service frequently. They use it for a variety of trip purposes, with the highest portions for medical trips and shopping. The availability of service allows people to visit friends, conduct personal business, attend community events and go to church.
- ☐ The people who use the service are more likely older and have incomes under \$10,000.
- ☐ The service has increased the mobility of people with disabilities, and the opportunity to be involved in community activities and work.

◆ Finding:

People with disabilities have diverse travel needs, and a number of these needs are not met by the current design of Metro Mobility service.

- ☐ Like the general non-disabled population, those with disabilities have travel needs that are diverse -- some can be planned, others are spontaneous, travel occurs anytime, any day, for any purpose.
- ☐ Metro Mobility is designed as an advance reservation, group riding service. It is not designed to serve travel needs that cannot be planned, or that change quickly. Examples of these trip needs are emergency travel, airport pick-up, midday business travel.
- ☐ Some of these needs will be met with implementation of mainline accessible services, others will not or will not be until the mainline system is 100% accessible.

❖ Recommendation:

To meet the diverse travel needs of the disabled community there should be more travel options available. These options may relate to gaining accessibility for current services (for example, vanpools and airport limos), or be an option developed from a currently operating service (some availability for emergency trips from Metro Mobility service providers).

◆ Finding:

Service quality is as important to users as service availability

- ☐ As determined by the research, the quality of the service (particularly on-time performance) is more of a concern to Metro Mobility users and impacts more users than service availability.
- ☐ People use the service frequently and have learned what is required (calling at 6 AM) to order a trip.
- ☐ The one problem with the service is on-time pick-up. While a majority of service is delivered on-time, there is a concern with both early and late pick-ups.

❖ Recommendation:

Plans and programs to improve the service should place equal emphasis on quality of service delivered as quantity of service.

◆ Finding:

The current combination of MMAC as "administrator" and for profit or non-profit contractors as service providers has worked well. But there is little being delivered, service planning or marketing being done. Improvements to these areas could improve service efficiency and quality.

- ☐ Metro Mobility serves a large number of trips a day (4000 - 5000). This is a substantial amount of service being delivered that equals to a system that is a sizeable transportation entity.
- ☐ The system works remarkably well especially considering service is provided in such a large area and by so many different agencies/operators, and that all service is door-thru-door.
- ☐ The current role of MMAC is confined to processing information (eligibility, complaints) and contract management. This is little or no service planning or marketing.

- ☐ As the demand for the service grows, there will be increased need for improvements in operating efficiency and potentially for "demand management."
- ☐ Users would like improvements to communications about the service.
- ☐ Some functions (such as driver sensitivity and safety training) may best be conducted by one entity.

❖ **Recommendation:**

Consideration should be given to strengthening the service planning and marketing functions related to the provision of door-thru-door services and for some common operational functions to be conducted by one entity for all service providers. Some trips currently made door-thru-door may best be served by subscription type services.

◆ **Finding:**

Identification of Metro Mobility service is weak, and not well defined.

- ☐ There is little concern for the image or identity of Metro Mobility as a valuable public service, yet a substantial amount of public money is spent on the service.
- ☐ When the trip assurance program is implemented, a customer may not know the name of the service provider assigned to pick them up. If an unfamiliar service provider shows up, the customer may not understand or make "the connection" that the taxi or van is for them.
- ☐ With increasing competition for financial resources to support the service, it is more important for the general public to be aware of Metro Mobility service.

❖ **Recommendation:**

Develop a graphic standard and specifications for application of the Metro Mobility identity on and in the vehicles.

◆ Finding:

Significant barriers exist for the use of mainline accessible bus service.

- ☐ There is a lack of knowledge of MTC service: routes, schedules, paying the fare, locations of bus stops.
- ☐ There is a fear of the unknown, and the unfamiliar. As an example, people who use Metro Mobility travel door-to-door. As a result, they are unfamiliar with pathways to the bus stop and from the bus stop to their destination.

People feel secure in the Metro Mobility van; they do not feel safe or secure waiting for a bus.

People are unsure if their wheelchair (or three wheel vehicle) will be able to use the lift and be secured on the bus.
- ☐ There is a fear of being stranded by mainline bus service. Currently, riders know and understand they will not be stranded (no matter how long the wait) by Metro Mobility.
- ☐ Weather is a barrier, both snow and cold, as well as the impact of snow on bus operations.
- ☐ There is a concern that current mainline bus passengers will be inconvenienced, making the passenger with disabilities feel uncomfortable.
- ☐ A significant majority of Metro Mobility users are elderly who are very satisfied with the service they receive. Their habits will be unlikely to change.
- ☐ Current Metro Mobility users are highly satisfied with the service they receive. For many the service is more convenient because it is door-to-door.

❖ Recommendation:

- ☐ Develop and implement a comprehensive and thoughtful service implementation and marketing program that addresses these barriers.

◆ Finding:

Target market for accessible mainline bus service.

- ❑ The market size is relatively small, defined as approximately 6% of Metro Mobility riders with a mobility limitation. However, the study scope did not address individuals who are not currently certified who may be potential riders. Also, the service has yet to be implemented. Experience in other markets indicates the use grows over time if the service is implemented and operated successfully. As a result, the current size should be considered a base to grow from.
- ❑ As compared to all Metro Mobility users, the market is:
 - more likely younger, under 60 years of age.
 - mobile (high frequency of trips for many trip purposes).
 - more likely male.
 - those with a positive, "can do" attitude.
 - not as well served by Metro Mobility, specifically the 24 hours in advance trip reservation requirement.
 - there seems to be no correlation to health condition or degree of disability with willingness to use the service.

◆ Finding and ❖ Recommendations: Service Design Features

- ❑ Initially, the majority of use will be midday, non-peak hours, Monday to Friday.
- ❑ Potential riders are very concerned about service dependability, buses being on-time and lifts working. Providing more frequent service on fewer routes (versus less frequent service on more routes) is preferred.

- ☐ Routes selected should serve shopping and medical destinations. There were many requests for service to one of the major regional suburban shopping malls.
- ☐ Location of accessible housing and the pathway from the housing to the bus stop is very important to route selection.
- ☐ To maximize travel opportunities, it may be appropriate to change current route interlining, and examine end of route designations.

◆ Finding and ❖ Recommendations: Service Implementation

- ☐ The planning process should identify the list of routes to be implemented over the next several years and the timing of the implementation. To help insure a successful implementation, it is recommended that only one or two routes be made accessible at any one service change.
- ☐ A comprehensive driver training and sensitivity program is a key to the success of the service. This program should communicate to drivers the diverse health conditions that exist, and sensitivities to limitations in mobility, sensory or mental conditions.
- ☐ Pathways to and from the bus stop will need to be examined.
- ☐ Procedures for operation in snow and when the lift malfunctions must be defined, and reviewed with the disabled community. Once approved, these procedures must be communicated to the target audience.
- ☐ A guaranteed ride home program should be included as part of the service implementation program. Such a program should be designed to eliminate the potential rider's fear of being stranded at their destination.
- ☐ A dedicated phone "hotline" should be established for a person to call for up-to-date information on detours and to report emergencies (being stranded).

◆ Finding and ❖ Recommendations: Marketing

- ☐ While the market for this service is at the outset small, with proper development it will grow.
- ☐ The marketing program should be organized by route, and be a "grass roots", neighborhood oriented effort. A media blitz type program will not work.
- ☐ The program should emphasize travel training, opportunities for potential riders to use the lift prior to trying the service, meeting the drivers and clear how-to-use materials.
- ☐ The program should not oversell the service or raise expectations.
- ☐ The key benefits are "go when I want to go"; the benefit of not having to plan travel 24 hours in advance.
- ☐ Direct mail will be effective. The purpose of the mailer needs to be clearly marked on the outside of the envelope.
- ☐ Special user information aids should be developed for initial program implementation. These should include a map of accessible routes with accessible activity centers displayed, a easy-to-understand schedule brochure, a how-to-ride brochure, and a brochure that lists (and shows pictures) of wheelchairs (and three wheel vehicles) that can be accommodated on the lift.
- ☐ A system to communicate route changes, detours (snow and regular) and service changes must be set up.
- ☐ A non-coin fare payment method should be developed and implemented. As part of the initial marketing campaign consideration should be given to free passes or tickets.
- ☐ Accessible housing staff need to be included in the marketing program. They will need to be trained in the system "how-to", and, as important, they should be organized to be advocates for the service.
- ☐ The marketing program must include a communication component to the general bus riding public. It should inform riders of the program and what they can do to "welcome" these new MTC passengers.

Regional Transit Board
Metro Mobility and Regular Route Accessibility Survey

FACE SHEET

Respondent Name _____

Telephone number _____ Zip code 55 _____ 04-06

Accessibility Code _____ 07-11

Hello, my name is _____. I am conducting a survey of people eligible to use Metro Mobility. The survey is sponsored by the Regional Transit Board (Use only if necessary). I work for an independant research firm, I.A. Research. If you have any questions about the survey please call the Regional Transit Board at 229-2714 and ask for Cynthia Curry.

May I please speak with Mr/Mrs _____?

(IF RESPONDENT IS PERSON WHO ANSWERED PHONE, GO TO INTRODUCTION)

(IF PERSON IS NOT AT HOME OR JUST CAN'T COME TO THE PHONE "RIGHT NOW", ARRANGE FOR CALL BACK BY ASKING:)

I will need to conduct the interview with Mr./Ms. _____

What is a good time for me to call back?

Time to call _____ Day _____

(IF PERSON CANNOT BE INTERVIEWED BECAUSE OF THEIR DISABILITY, ASK:)

Is there someone available who could answer a few questions for Mr./Ms. _____ concerning using Metro Mobility?

(IF YES, GET ON PHONE, GO TO INTRODUCTION. IF NO, DETERMINE IF AND WHEN SOMEONE WILL BE AVAILABLE. IF SO, RECORD NAME, DAY, TIME TO CALL; OTHERWISE POLITELY TERMINATE, RECORDING REASON BELOW.)

Name _____

Time to call _____ Day _____

Reason why person cannot be interviewed:

Deceased.....1
 Moved.....2
 Cannot be interviewed at any time (medical, health).3
 Refused.....4
 Hearing impairment.....5
 Speech impairment.....6
 Other (record:)_7

QUESTIONNAIRE

Introduction

This survey concerns how to improve transportation services in the Twin Cities including Metro Mobility service.

The answers you give me will be kept strictly confidential. We need to know your true opinions. What you tell me will not affect in any way your eligibility to use Metro Mobility.

1. In the past year, about how often have you (has he/she) used Metro Mobility? Would you say...

Three or more times a week, or...1 GO TO Q 3
Once or twice a week, or.....2 GO TO Q 3
Two or three times a month.....3 GO TO Q 3
Once a month.....4 GO TO Q 3
Less than once a month.....5 GO TO Q 2

DO NOT READ Don't know.....6 Politely terminate

DO NOT READ Refused.....7 Politely terminate

DO NOT READ None.....8 GO TO Q 2 13

2. (IF NONE OR LESS THAN ONCE A MONTH, ASK:) Is there a reason why you (he/she) haven't used the service recently? (GO TO Q 11)

14

(IF HEALTH HAS DETERIORATED AND/OR NO LONGER TRAVELS, POLITELY TERMINATE)

3. How long have you (he/she) been using Metro Mobility service?
- 1 month or less.....1
1 month to 1 year.....2
1 - 2 years.....3
2 - 3 years4
More than 3 years.....5
Don't know.....5 15

4. When was the last time you (he/she) used Metro Mobility? (DO NOT READ)
- This week.....1
Within past month.....2
2 to 6 months ago.....3
6 months to year.....4
Don't know.....5
Refused.....6 16

5.	Are you (Is he/she) using Metro Mobility <u>about the same, more, or less</u> than you (they) have in the past year?	About the same.....1 More.....2 Less.....3 Don't know.....4	17
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6. (IF LESS OR MORE, ASK:) Is there a reason why you (he/she) are using Metro Mobility less (more) than you used to? (RECORD)

18

7.	For what kind of trips do you (they) use Metro Mobility? (READ LIST, RECORD ALL MENTIONS)	YES	NO	
	Health related purposes such as doctor or dentist appointments, therapy or dialysis.....	1	2	19
	Shopping.....	1	2	20
	Personal business such as banking or going to the barber or beauty shop.....	1	2	21
	Visiting friends or relatives.....	1	2	22
	Meetings.....	1	2	23
	Volunteer work.....	1	2	24
	Work for pay.....	1	2	25
	School or Vocational training.....	1	2	26
	Church or Synagogue.....	1	2	27
	Eating out.....	1	2	28
	Recreation that has a scheduled time such as theater, concerts, or movies.....	1	2	29
	Other recreation that does not have a scheduled time.....	1	2	30
	Social Services, Senior Center.....	1	2	31

8.	On a typical day, do you use Metro Mobility for more than one kind of trip?	Yes.....1 No.....2 Don't know.....3 Refused.....4	32
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9.	Do you (Does he/she) have a standing order to ride Metro Mobility or do you (they) call in your (their) order each time you (they) travel?	Standing order.....1 Call in each time.....2	33
----	--	---	----

10.	When you use Metro Mobility, do you require a vehicle with a wheelchair lift?	Yes, always.....1 Yes, sometimes.....2 No.....3	34
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I am going to read a list of health characteristics that may make it difficult to travel, either by car, bus, van or taxi.

Do you (Does he/she) have:	YES	NO	DK/NS	
11. Difficulty climbing stairs?	1	2	3	35
01.If yes, do you (they) use a wheelchair? (If yes, Go to Q 13)	1	2	3	36
02.(If not in wheelchair, ask:) Do you (they) use a cane, walker, crutches or leg brace?	1	2	3	37
12. Difficulty walking or standing for more than a few minutes?	1	2	3	38
13. Difficulty hearing or seeing? (Even with hearing aid or glasses)	1	2	3	39
14. Difficulty grasping coins or other small objects?	1	2	3	40
15. How far is the nearest MTC bus stop from your home? (ONLY READ 1 - 3)	1 to 2 blocks.....1 3 to 4 blocks.....2 More than 4 blocks.....3 Don't know.....4 Refused.....5			41
16. How difficult would it be for you (he/she) to travel from your (his/her) home to a place two blocks away? This would be travel by walking or with the aid of a wheelchair, cane or other device. Would it be. . .	Not at all difficult.....1 Somewhat difficult.....2 Very difficult.....3 Refused.....4			42

(IF NOT AT ALL DIFFICULT OR SOMEWHAT DIFFICULT, ASK Q 17, OTHERWISE GO TO Q 20 IF PRESENT METRO MOBILITY RIDER [Q1]; IF NOT PRESENT RIDER GO TO Q 45.)

17. If new and improved MTC bus service was introduced near your (his/her) home and this new service included a bus with a lift, making getting on and off the bus easy, would you say you would....

READ 1-3	Definitely would ride.....1	GO TO Q 19	
	Might ride, or.....2	GO TO Q 19	
	Definitely would not ride...3	GO TO Q 18	
	Don't know.....4	GO TO Q 18	43

18. What is the most important reason why you (he/she) would not consider using this new service option? (RECORD MULTIPLE MENTIONS, DO NOT READ)
- | | YES | NO | |
|--|-----|----|--|
|--|-----|----|--|

Health.....	1	2	44
Routing; that is where the buses go.....	1	2	45
How often the buses run.....	1	2	46
How safe you feel while waiting for the bus or riding the bus.....	1	2	47
Cold weather.....	1	2	48
Lack of information about riding the bus.....	1	2	49
Cost to ride.....	1	2	50
Having to make transfers.....	1	2	51
Other (RECORD).....	1	2	52

GO TO Q 20 IF PRESENT METRO MOBILITY RIDER: (IF NOT PRESENT METRO MOBILITY RIDER, GO TO Q 45.)

19. Now, I'd like to ask about the trips you make in a typical month in and around the Minneapolis/St. Paul area. Counting a round trip as one trip . . .

- A. About how many trips in a typical month do you make to go
- to work
 - to school
 - grocery shopping
 - shopping (not for groceries)
 - to medical or dental appointments
 - on personal business (banking, hairdresser, social service)

(IF NO TRIPS OF THAT TYPE WERE MADE, ENTER 00 IN "a" COLUMN OF GRID BELOW, AND GO ON TO NEXT TRIP TYPE. FOR EACH TYPE OF TRIP MADE IN THE LAST MONTH, i.e. WORK, SHOPPING, ETC. ASK QUESTIONS B - E. RECORD IN GRID BELOW, USING ROW FOR THAT.

- B. What day of the week do you make trips to _____?
- C. What time do you usually make trips to _____?
- D. What time do you usually return from _____?
- E. To what part of town do you usually make these trips for _____?

(Code these columns only if person makes trips of given type)

		(Code these columns only if person makes trips of given type)			
CODES:	00 None 99 DK, refused	1: Weekday 2: Sat 3: Sun 4: Sat & Sun 5: Varies 6: DK, ref	1: 5-6:59 2: 7-8:59 am 3: 9 am-3:59 pm 4: 4 -5:59 pm 5: 6-8:59 pm 6: 9 pm to mid. 7: Varies 8: DK, refused	1: Downtown Minneapolis 2: Downtown St. Paul 3: Minn. Campus/Medical Center 4: Airport 5: Zoo 6: VA Hospital 7: MetroDome 8: Courage Center 9: Brookdale Mall 10: Rosedale Mall 11: Southdale Mall 12: Ridgedale Mall 13: Met Sport Center 14: Abbot Northwest - Sister Kenny Medical Centers 15: Other	
	A: No. trips per week to...	B: Day of Week	C: Time of Day (TO)	D: Time of Day (FROM)	E: Destination
Work	— —	—	—	—	53-58
School	— —	—	—	—	59-65
Grocery shopping	— —	—	—	—	66-72
Non-grocery shopping	— —	—	—	—	73-79
Medical/dental	— —	—	—	—	80-86
Personal business	— —	—	—	—	87-93

53-58

59-65

66-72

73-79

80-86

87-93

GO TO Q 20 IF PRESENT METRO MOBILITY RIDER:
(IF NOT PRESENT RIDER, GO TO Q. 45)

Service Evaluation

Now, just a few questions concerning the service you currently receive from Metro Mobility.

20. In general, how satisfied are you (is he/she) with the Metro Mobility service you receive?
- | | |
|----------------------------|---|
| Very satisfied..... | 1 |
| Somewhat satisfied..... | 2 |
| Somewhat dissatisfied..... | 3 |
| Very dissatisfied..... | 4 |
- DON'T READ:
- | | |
|-----------------|------|
| Don't know..... | 5 |
| Refused..... | 6 94 |

21. Now I would like you to rate some specific characteristics of the service you (he/she) receive (s). Please tell me whether you are satisfied or not satisfied with each of the following service characteristics.

	<u>Satis- fied</u>	<u>Neither</u>	<u>Not Satis- fied</u>	<u>Don't Know</u>	
A. The comfort and condition of the vehicles	1	2	3	9	95
B. The courtesy and assistance of the drivers	1	2	3	9	96
C. The driving skill of drivers	1	2	3	9	97
D. The amount of information available about Metro Mobility service	1	2	3	9	98
E. The helpfulness and courtesy of people who answer the phone at the provider	1	2	3	9	99
F. How often the provider picks you up at the time you requested	1	2	3	9	100
G. How often the provider arrives at your destination on time	1	2	3	9	101
H. Calling 24 hours in advance to schedule a trip	1	2	3	9	102
I. The cleanliness of the vehicles	1	2	3	9	103
J. How safe you feel when riding	1	2	3	9	104
K. The length of time your trip takes	1	2	3	9	105

22. If improvements were made in some of these items, how likely would you be to ride more than you do now?
Would you say... Very unlikely.....1
 Somewhat unlikely.....2
 Somewhat likely, or.....3
 Very likely to ride
 more often?.....4

DO NOT READ: Already ride as much as can..5
 It depends.....6
 Don't know.....7

106

23. (IF "VERY LIKELY" OR "SOMEWHAT LIKELY, ASK:) About how many more trips in a typical month would you make?

_____ (A ROUND TRIP COUNTS AS ONE). 107-108

24. In the past year, do you (they) think the Metro Mobility service has..
(READ 1-3 ONLY)

 Gotten better.....1
 Has stayed about the same.....2
 Or, has gotten worse.....3

 Don't know.....4
 Refused.....5 109

(IF BETTER OR WORSE, ASK)

25. In what way has it gotten (better or worse)?

110

26. In the past month, how many times have you (has he/she) requested a trip and it was refused?

CODE: 98 = REFUSED
 99 = DON'T KNOW
 00 = NONE

_____ 111-112

27. In the past month, how many times has the service provider asked you (him/her) to change the pick-up time you (they) requested?

CODE: 00 = NONE
 98 = REFUSED
 99 = DON'T KNOW

_____ 113-114

28. In the past month, how many times have you (has he/she) had a trip scheduled, then been called later in the day by the provider to have the time of the trip changed?

CODE: 00 = None
99 = Don't know

115-116

29. (IF ASKED TO CHANGE IN Q 25, ASK) Was this change of pick-up time inconvenient for you (them)?

Yes.....1
No.....2
Depends.....3
Don't know.....4 117

30. In the past month, how many times has the provider not shown up for a scheduled trip?

00 = None
99 = Don't know

118-119

31. In the past month, how many times has the provider arrived early? That is more than 10 minutes before your scheduled pick up time.

00 = None
99 = Don't know

120-121

32. In the past month, how many times has the provider arrived late? That is more than 10 minutes after the scheduled pick-up time.

00 = None
99 = Don't know

122-123

33. Have you (he/she) ever called to complain about the Metro Mobility service? Yes.....1 Go to Q 35
No.....2 Go to Q 34
124

34. (IF NO) Have you not called because you believe it could affect your eligibility to use Metro Mobility??

Yes.....1
No.....2 125

GO TO Q 39

35. (IF YES) Did you call the provider or the Metro Mobility Administrative Center?

Service provider.....1
Metro Mobility.....2
Other/Don't Know.....3 126

36. Was the complaint processed fairly and with courtesy?

Yes.....	1	
No.....	2	
Don't know.....	3	127

37.. Do you know if the complaint
was resolved?

Yes.....	1	
No.....	2	
Don't know.....	3	128

38. Were you (they) satisfied with the outcome ?

Yes.....	1	
No.....	2	
Don't know.....	3	129

39. A number of options are being considered to improve transportation services for people with disabilities in the Twin Cities. For each option mentioned please tell me if you (they) consider(s) the improvement important, or not important.

(ROTATE ORDER, BEGINNING WITH ITEM MARKED WITH "X")

	<u>imprt.</u>	(Neu- <u>tral</u>)	Not <u>imprt</u>	Don't <u>Know</u>	
1. Increasing avail- ability of door- thru-door service	1	2	3	9	130
2. Increasing informa- tion on transporation services available to you	1	2	3	9	131
3. Improving phone service at the provider	1	2	3	9	132
4. Equipping MTC regular route buses with a lift	1	2	3	9	133
5. Improving the comfort and condition of the vehicles used for door-thru-door service	1	2	3	9	134
6. Accessible planning for light rail system	1	2	3	9	135
7. Offering opportun- ities to transfer from door-thru-door service to MTC bus service	1	2	3	9	136
8. Enhancing access- ibility of the Minnesota Rideshare Program	1	2	3	9	137

40. Of the options being considered, which one do you think is most important? (REPEAT THE LIST IF NECESSARY. ENTER THE NUMBER (1-8) OF THE OPTION.)

138

0 = None
8 = No improvement needed or OK as is
9 = Don't know

41. During the past month, was there any place you would have liked to have gone but could not because transportation was not available?

Yes.....1
No.....2
Don't know.....3
Refused.....4

139

42. (IF YES) What was the situation? (RECORD)

140

43. In addition to the trips you make on Metro Mobility, about how many other trips do you (does he/she) make by some other means in a typical month?
(COUNT A ROUND TRIP AS ONE)

Code 97: none
Code 98: don't know
Code 99: refused

141-142

44. How do you (does he/she) make these trips? (RECORD, IF AUTO, ASK IF AS DRIVER OR AS PASSENGER)

143

Former MTC Riders

45. Have you (has he/she) ever used a regular route MTC bus?

Yes.....1
No.....2
Don't know.....3
Refused.....4

144

46. (IF NO) Is there a reason why?

145

47. (IF YES) Did you (he/she) ride in the:

Past month or.....1 GO TO Q 49
Within the past year or.....2 GO TO Q 48
Within the last 3 years.....3 GO TO Q 48

146

48. Why did you (he/she) stop using the regular route MTC bus?
(PROBE IF CHANGE IS HEALTH RELATED, SERVICE RELATED, OR
PREFER DOOR-THRU-DOOR)

147

Now just a few more questions. All of your answers will be kept
strictly confidential.

49. Are you (Is he/she) able
to drive?

Yes.....1
No.....2
Don't know.....3
Refused.....4

148

50. When you (he/she) need to
make a trip, is there a car
available for you (him/her)
to use, either to drive or
as a passenger?

Yes.....1
No.....2
Don't know.....3
Refused.....4

149

51. (IF YES, ASK) Is the car
or ride available.....

Only some of the time.....1
Most of the time.....2
or all of the time.....3
Don't know.....4

150

52. Metro Mobility gets information to people about the door-thru-door service in several ways. As I read each one of these ways, please tell me if this method is an effective or not effective way to provide information to you.

	<u>Effective</u>	<u>Not Effective</u>	<u>Don't Know</u>	
1. Information distributed in the van or taxi	1	2	9	151
2. Information mailed to your home	1	2	9	152
3. Information available at an activity center or place you travel to	1	2	9	153
4. Information in a newspaper or on the radio	1	2	9	154
5. Information available in a newsletter from a social service agency	1	2	9	155
53. Have you ever used a lift-equipped regular route bus, either in the Twin Cities or someplace else?	Yes.....1 No.....2 Don't know.....3			156

54. How many people live in your (his/her) household now? ____ 157-158

(RECORD NUMBER, COUNT RESPONDENT AS ONE, CODE 99 IF REFUSED)

55. Are you (Is he/she)...	Employed full time.....1 Employed part time.....2 Retired.....3 Looking for work.....4 Unemployed because of disability.....5 Not employed.....6 Refused.....7	159
56. What type of housing do you (does he/she) live in?	Private home.....1 Apartment2 Condominium.....3 Townhouse.....4 Group home or facility.....5 Or some other type.....6 Refused.....9	160

57. What was the last grade or year you (he/she) completed in school? Less than 7 years1
 Middle school (7-9).....2
 Part high school (10-11).....3
 High school graduate.....4
 Some college.....5
 College graduate.....6
 Don't know, refused.....9 161

(DO NOT READ LIST)

58. Next, how old were you (he/she) on your (their) last birthday?

(CODE 00 = IF REFUSED)

162-163

59. For statistical purposes, we would like to know your (his/her) family's total combined income before taxes in 1989. I will read you a list of income categories. Please stop me when I come to the right one. (Read 1-5 only) \$5,000 or less.....1
 \$5,000 to \$9,999.....2
 \$10,000 to \$14,999.....3
 \$15,000 to \$25,000.....4
 Over \$25,000.....5
 Refused.....6
 Don't Know.....7 164

60. Record sex of subject. Male.....1
 Female.....2 165

Those are all the questions I have. Thank you for your help.

I hereby attest that this is a true and honest interview.

 Interview signature

 Date: Month, day

Focus Group Research: Recruitment Guide

Hello, my name is _____ from IA research. We have been conducting a study among people who have used METRO MOBILITY service for their transportation needs.

1. Do you currently use MM? Yes _____
No _____ (IF NO, TERMINATE)
2. Are you in a wheelchair? Yes _____
No _____
3. When you ride with MM, do you use a vehicle that has a lift to assist you into the vehicle?
Yes _____
No _____
4. Do you have a standing order with MM?
Yes _____
No _____

We would like you to join us for a focus group discussion next: Wednesday, May 2/Thursday, May 3.

The discussion will be for research purposes only. There will be a group leader and another 8 or 9 people such as yourself. It will last about two hours and you will be paid \$35 for your time. If you plan to use MM to attend, just bring the receipt for reimbursement.

Will you be able to join us from: Wednesday 4 - 6 PM (Alternate) 6 - 8 PM

Thursday 11 AM - 1 PM (Alternate) 1 PM
- 3 PM

IF NO, TERMINATE WITH A THANK YOU

IF YES, thank you so much. Let me give you the details. Would you like to write this down? The discussion group will be held at the offices of:
Wednesday: Project Research, University Tech. Center, 1313 5th St. & SE, Room 312, Minneapolis. Thursday: CIMR, Minnesota Mutual Center, 400 N. Robert St. St. Paul. RECONFIRM TIMES

Will you be using MM? Yes _____ No _____

IF YES, you will need to make the arrangement with MM. We will call you early next week to confirm.

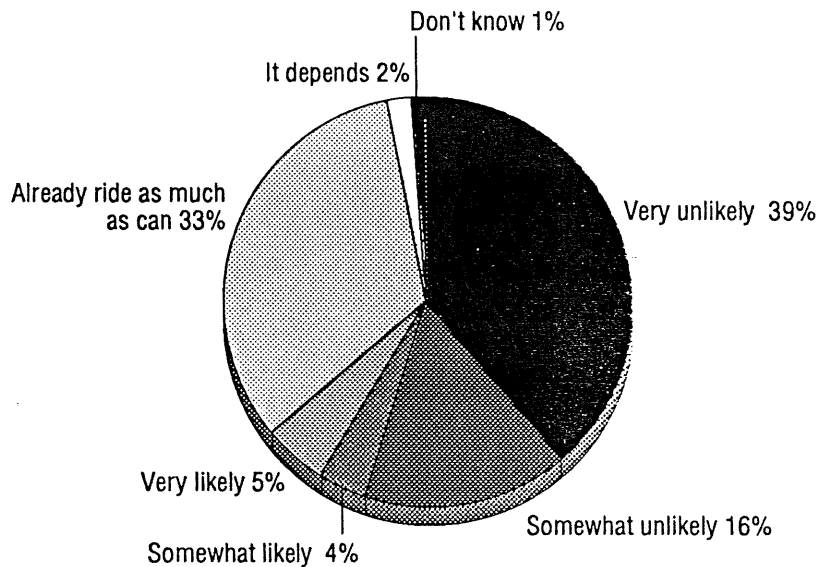
Regional Transit Board
Metro Mobility and Regular Route Accessibility Survey
Weighted Percentages (for 392 respondents)

Zip code 55 ____ 46

Accessibility Code ____ 7-11

Disability (7-8)	%	Mobility (9-10)	%	Sensory Code (11)	
00	.29	00		0	79.57%
01 AIDS	.29	01 Amigo cart		1 Blind	11.87
02 Alzheimer's	1.52	02 Artificial limb	.29	2 Deaf	.94
03 Amputation	2.75	03 Brace	.58	3 Mental handicapped	7.19
04 Arthritis	26.71	04 Cane	35.46	4 Other	.41
05 Cancer	.99	05 White cane	5.28		
06 Coordination	9.56	06 Crutch	2.34	Σ weights	388
07 Cerebral Palsy	2.34	07 Gerrie chair			
08 Diabetes	2.46	08 Guide dog	.58		
09 Emphysema		09 Lark cart	.58		
10 Epilepsy	.88	10 None	28.90		
11 Frederick's Ataxia		11 Oxygen tank	.58		
12 Head injury	.99	12 Rascal chair			
13 Hearing impaired	.35	13 Scooter			
14 Heart disease	10.03	14 Stroller			
15 Kidney disease	1.04	15 Walker	5.40		
16 Lung disease	3.63	16 Manual wheelchair	16.96		
17 Muscular Dystrophy		17 Power wheelchair	2.40		
18 Mental disability					
19 Mental illness	.29	Σ weights	390		
20 Mental retardation	2.64				
21 Multiple Sclerosis	2.93				
22 Neurological disorder		.64			
23 Osteoporosis	4.46				
24 Parkinson's	2.17				
25 Paralysis	1.76				
26 Post Polio	1.34				
27 Quadriplegia	.29				
28 Spinal Cord	1.76				
29 Stroke	6.04				
30 Vision impaired	5.57				
31 Wheelchair user					
32 Severe aging	3.52				
33 Other	2.05				
Σ weights	390				

If improvements were made in some of these items, how likely would you be to ride more than you do now?



The number of increased trips per week by the likely or somewhat likely group is shown next.

One or two	4%
Three to four	3%
Five to six	1%
Seven to eight	4%
Nine or more	1%

Complaint Process

The complaint procedure was evaluated to determine the number of complaints and how effective complaints are being processed.

1. Number

A total of 18% of Metro Mobility users indicate they have ever called to register a complaint. They are lower than the 28% statistic reported in 1987.

2. Willingness to Complaint

Of those people who had not called to register a complaint, only 2% did not do so because they believed that by complaining, their eligibility would be affected.

3. Who Called

People called the service provider or the Metro Mobility Administrative center in equal numbers.

Did you call the provider or the Metro Mobility Administrative Center?

Service provider	48%
Metro Mobility	50%
Other	2%

4. Complaint Resolution

A significant majority of people who filed a complaint (80%) indicate the complaint was processed fairly, and three of four state they know how the complaint was resolved. 69% were satisfied with the outcome.

Was the complaint processed fairly and with courtesy?

Yes	79%
No	12%
Don't know	9%

Do you know if the complaint was resolved?

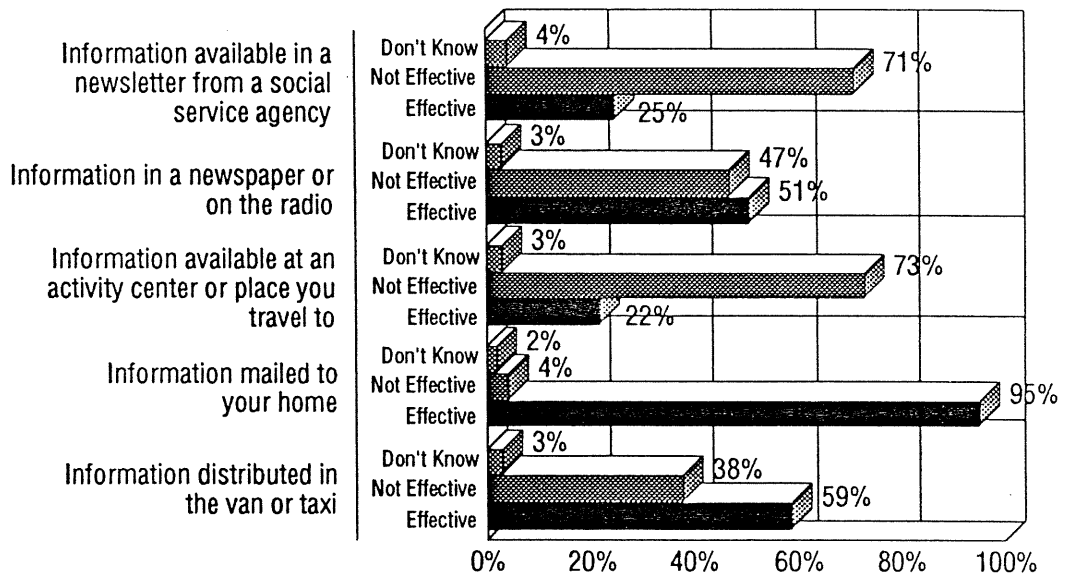
Yes	72%
No	5%
Don't know	24%

Were you satisfied with the outcome?

Yes	69%
No	17%
Don't know	14%

Communications

Riders clearly have a preference for gaining information about door thru door service. They strongly prefer the information be mailed to their home.



Future Service Options

Metro Mobility riders were asked to indicate if a number of future service options were important or not important. The options included increased availability of current services and communications, improvements to service quality, and new service options.

As shown, Metro Mobility riders rate increased door-to-door service and increased information substantially higher than any other item.

	Not Import- ant	Neu- tral	Import- ant	Don't Know
Increasing availability of door-thru-door service	80%	8%	10%	2%
Increasing information on transportation services available to you	77%	7%	16%	1%
Improving phone service at the provider	27%	25%	48%	0
Equipping MTC regular route buses with a lift	34%	20%	42%	4%
Improving the comfort and condition of the vehicles used for door-thru-door service	27%	26%	41%	5%
Accessible planning for light rail system	19%	19%	51%	11%
Offering opportunities to transfer from door-thru- door service to MTC bus service	13%	16%	54%	17%
Enhancing accessibility of the Minnesota Rideshare Program	10%	16%	53%	21%

When asked to rank the options by stating the one option that is most important, one-third of the riders indicated no improvement was needed and an additional 19% indicated none.

None	19%
Availability of door-thru-door service	9%
Information on services available	2%
Improving provider phone service	1%
Lift on MTC buses	2%
Comfort & condition of vehicles	3%
Accessible light rail planning	1%
Door-thru-door to MTC transfers	0%
Minnesota Rideshare Program accessibility	0%
No improvement needed or OK as is	33%
Don't know	34%

Demographics, Characteristics

Rider demographics and selected characteristics are shown next.

1. Auto Availability

8% of current riders indicate they are able to drive a car. 66% indicate a car is never available to them, and of those who indicate a car was available, 47% state it is only available some of the time.

Are you able to drive?

Yes	8%
No	91%

When you need to make a trip, is there a car available for you to use, either to drive or as a passenger?

Yes	34%
No	66%

If the car or ride available

	Yes	Total
Only some of the time	47%	16%
Most of the time	29%	10%
or all of the time	21%	7%
Don't know	3%	1%

2. Standing Order

8% of those eligible indicate having a standing order. This compares to 14% reported in the 1987 survey.

3. Wheelchair Lift

26% of those eligible indicate requiring a wheelchair lift either always or sometimes. This compares to 35% reported in 1987.

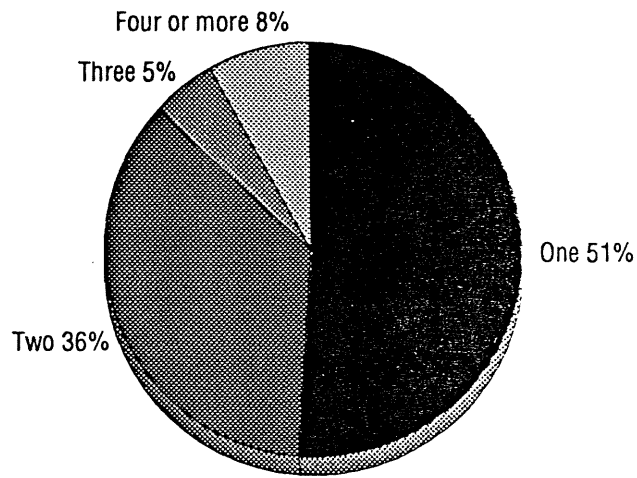
When you use Metro Mobility, do you require a vehicle with a wheelchair lift?

Yes, always	21%
Yes, sometimes	5%
No	74%

4. Number in Household

Half of those eligible to use the service live alone.

How many people live in your household now?



5. Employment

12% of those eligible to use the service are employed full or part time. Three out of four are retired.

Employed full time	4%
Employed part time	9%
Retired	77%
Looking for work	8%
Unemployed because of disability	1%
Not employed	1%

6. Housing

What type of housing do you live in?

Private home	47%
Apartment	41%
Condominium	1%
Townhouse	1%
Group home or facility	8%

7. Education

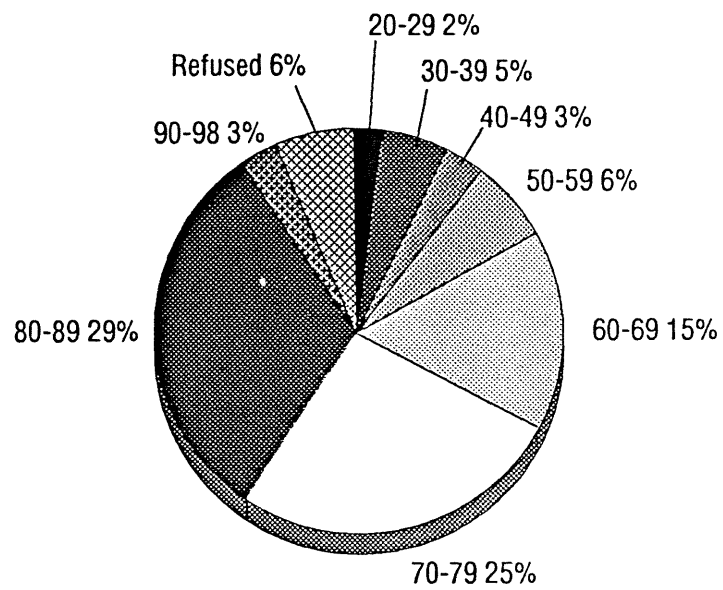
51% of those eligible are at least high school graduates.

What was the last grade or year you completed in school?

Less than 7 years	1%
Middle school	11%
Part high school	24%
High school graduate	31%
Some college	12%
College graduate	8%
Don't know, refused	12%

8. Age

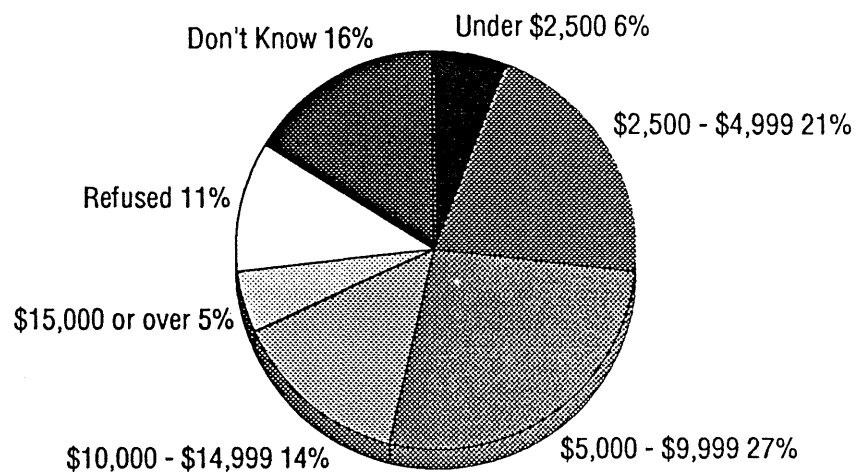
Half of those eligible to use the service are over 70 years of age, one in three are over 80 years old. As reported in the 1987 data, 57% were 65 or older and 34% were 75 or older.



9. Income

Half of those eligible have a family income under \$10,000, 27% under \$5,000. This compares to 31% in 1987.

For statistical purposes, we would like to know your family's total combined income before taxes in 1989. I will read you a list of income categories.



10. Sex

80% of those eligible are female.

Mainline Bus Accessibility

In this section the market for mainline accessible bus service is defined in terms of size and user characteristics. The survey questionnaire included a set of very specific questions relating to market size and further analysis of this group identified a number of specific characteristics. In addition, several other areas were investigated to assist in the description of the potential market. These included former MTC riders who are now Metro Mobility users, and trips not currently taken on Metro Mobility.

Ever Used

Only 3% of those currently eligible to use Metro Mobility have used a lift-equipped regular route bus.

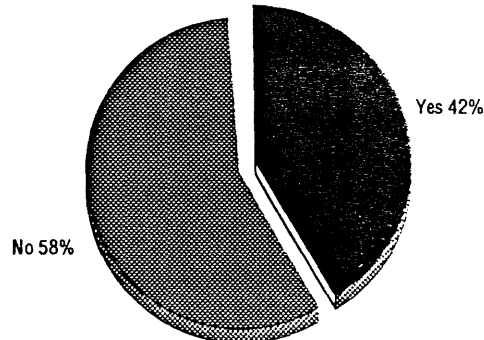
Have you ever used a lift-equipped regular route bus, either in the Twin Cities or some place else?

Yes	3%
No	96%

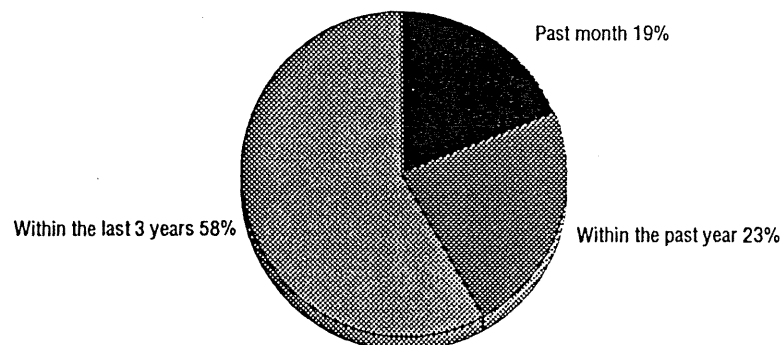
Former MTC Riders

Former MTC riders make up a large segment (41%) of those eligible to use Metro Mobility. Of those who are former riders, 19% have used MTC service in the previous month.

Have you ever used a regular route MTC bus?



Did you ride in the:



The following reasons were given for not using regular route MTC service. Nearly all relate to health condition.

- ☐ Need wheelchair lift.
- ☐ Can't stand or walk without help and cannot get down to the bus stop in wheelchair without help.
- ☐ Needs someone to be with her all the time.
- ☐ Legs make it too hard to ride the bus, a lift would help.
- ☐ Knee replacements.
- ☐ Can't walk up the steps or get to the bus stop.
- ☐ Been in wheelchair and is hooked up to oxygen tank.
- ☐ Became ill and it is too much of a risk to walk to the bus stop alone.
- ☐ She can walk, but with a cane and it's very hard for her to climb stairs.

Former riders were asked why they had stopped riding MTC service. While the majority of comments related to a change in health condition that made it difficult to use, several comments indicated poor driver performance as a reason (drivers take off too fast). Given their age, experience, and preference for Metro Mobility service, these people are most likely not potential mainline accessible bus users.

- ☐ Bus is too far away from home. Too hard to transfer from bus to bus.
- ☐ Too hard to walk to bus.
- ☐ Became handicapped and is in a scooter.
- ☐ Broke leg in four places and can't step up or walk to the bus stop and wait for the bus.
- ☐ "Moved away from bus, I don't know the schedule."
- ☐ Doesn't go close enough to places she wants to go.

- ☐ "Took off before I was sitting down."
- ☐ Drivers take off too fast.
- ☐ Can't see well.
- ☐ Inconvenient.
- ☐ Needs a companion with her to read the numbers on the bus and it was too difficult to find anyone.
- ☐ Poor routing and health deteriorated making it almost impossible.
- ☐ Too much of a hassle.

Other Trips

Trips not currently made by Metro Mobility were examined as part of the market potential analysis. Two-thirds of Metro Mobility riders use the service exclusively. Only very small percentages of people make more than five trips a month by some other means.

In addition to the trips you make on Metro Mobility, about how many other trips do you make by some other means in a typical month?

None	67%
One or two	13%
Three to four	7%
Five to six	2%
Seven to eight	2%
Nine to ten	1%
Eleven and over	3%
Don't know	2%

Market Potential

The methodology to determine market potential for mainline accessible bus service was devised to identify users of the lift. The methodology initially determined those individuals with a mobility impairment by defining people with difficulty going upstairs. From this group those people who would be willing to consider the service were identified. The methodology included all those eligible to use Metro Mobility (current riders and those eligible but not riding at present).

The group of people who indicated a difficulty climbing stairs (83% of the total of those eligible) were identified as the initial target market. From this group, people were divided by the degree of difficulty they would have traveling outside their home. They were asked how difficult it would be to travel from their home to a place two blocks away. This was with the aid of a wheelchair or some other device. From the group with little or no travel difficulty, the potential target market was determined. This was defined by people indicating a willingness to consider using MTC accessible service.

1. Difficulty Traveling Two Blocks

86% of those eligible to use Metro Mobility indicated it would be very difficult to travel two blocks from their home.

Difficulty traveling two blocks from home (with or without mobility aid).

Not at all difficult	7%
Somewhat difficult	7%
Very difficult	86%

2. Willingness to Consider

From those indicating some difficulty or no difficulty (14% of the total), the group with the potential to use the service was determined. A total of 37% indicate some willingness (might ride or definitely would ride).

If new and improved MTC bus service was introduced near your home and this new service included a bus with a lift, making getting on and off the bus easy, would you say you would...

Definitely would ride	22%
Might ride, or	15%
Definitely would not ride	57%

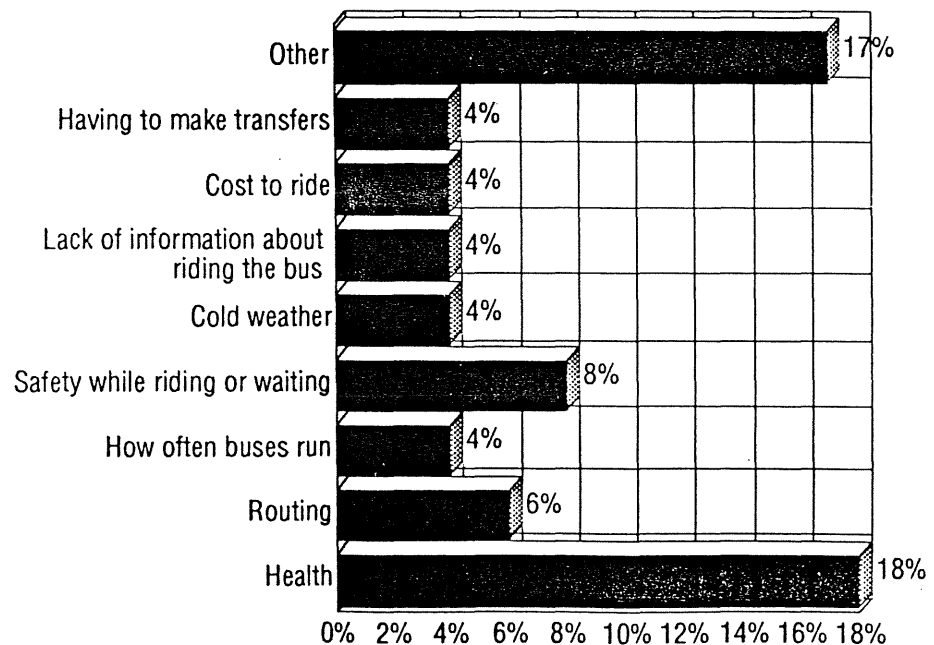
3. Market Size

By combining responses for those who would have little or no difficulty accessing the bus, with those willing to consider the service, the size of the potential market for lift use was determined. This equals 6.3% of those individuals with some mobility limitation.

4. Reasons For Not Considering Mainline Bus Service

Most people who could access the service but are not willing to consider mainline service indicate health as the reason.

What is the most important reason why you would not consider using this new service option?



5. Description of Potential Users

Those individuals indicating a willingness to consider mainline accessible service were separately analyzed to determine characteristics and habits different from the group of Metro Mobility users who can access the service and will not consider using it, and those that cannot access the service.

- ☐ They are less likely to be high frequency users of Metro Mobility. This is indicated by comparing row percentages for frequent users, three or more times a week and one to two times a week.

How often you used MM in the past year:

		Can Not	Will Not	Would
Total %s:		86.2%	7.5%	6.3%
3+/wk	c%	20.2%	20.6%	12.0%
	r%	88.3%	7.7%	3.9%
1-2/wk	c%	24.7%	13.7%	8.0%
	r%	93.2%	4.4%	2.2%
2-3/mo	c%	18.1%	24.1%	.0%
	r%	89.7%	10.2%	.0%
1/mo	c%	8.6%	3.4%	24.0%
	r%	80.5%	2.7%	16.6%
< 1/mo	c%	22.3%	37.9%	48.0%
	r%	76.5%	11.2%	12.2%
None	c%	5.9%	.0%	8.0%
	r%	90.9%	.0%	9.0%

Chi sq.= 27.16 df= 10 p=.0024

- ☐ There were no differences reported for how long a person has been eligible to use the service, when they last used Metro Mobility, whether they recently changed use and if they had a standing order.

- As compared to those who do not wish to ride or cannot access the service, the target market has fewer mobility problems. They are less likely to have difficulty climbing stairs. They are less likely to use a cane or have difficulty walking, standing, hearing or seeing. There was no significant differences between people using a wheelchair.

Difficulty climbing stairs:

		Can Not	Will Not	Would
Yes	c%	87.5%	58.6%	48.0%
	r%	91.0%	5.2%	3.7%
No	c%	12.5%	37.9%	52.0%
	r%	63.6%	16.6%	19.7%

Chi sq.= 48.67 df= 4 p <.0001

Use cane:

		Can Not	Will Not	Would
Yes	c%	67.1%	29.6%	45.0%
	r%	91.9%	3.7%	4.2%
No	c%	32.8%	70.3%	55.0%
	r%	76.0%	15.2%	8.8%

Chi sq.= 17.74 df= 2 p= .0001

Difficulty walking or standing:

		Can Not	Will Not	Would
Yes	c%	78.7%	57.1%	36.3%
	r%	91.5%	5.6%	2.8%
No	c%	20.9%	42.8%	63.6%
	r%	72.6%	12.6%	14.7%

Chi sq.=25.14 df= 4 p <.0001

- ☐ 24% have difficulty hearing or seeing, even with glasses or a hearing aid.
- ☐ 84% are within one or two blocks of a current MTC bus stop. Only 4% of the target group do not know the location of the nearest MTC stop.
- ☐ They are a little less satisfied with Metro Mobility service.

Satisfaction with MM:

		Can Not	Will Not	Would
Very satisfied	c%	79.2%	66.6%	50.0%
	r%	91.2%	5.5%	3.2%
Somewhat satisfied	c%	18.4%	33.3%	35.7%
	r%	80.7%	10.5%	8.7%
Somewhat dissatisfied	c%	2.0%	.0%	7.1%
	r%	83.3%	.0%	16.6%
Very dissatisfied	c%	.4%	.0%	.0%
	r%	100.0%	.0%	.0%
Don't know	c%	.0%	.0%	7.1%
	r%	.0%	.0%	100.0%
Chi sq.= 26.66		df= 8	p =.0008	

- ☐ No significant differences were indicated for any of the new service options (increasing Metro Mobility availability, light rail planning, rideshare).
- ☐ Potential lift users are more likely to have used MTC in the past.

Ever used an MTC bus:

		Can Not	Will Not	Would
Yes	c%	37.7%	57.1%	78.2%
	r%	78.7%	10.0%	11.2%
No	c%	61.9%	42.8%	21.7%
	r%	92.4%	5.3%	2.2%
Don't know	c%	.3%	.0%	.0%
	r%	100.0%	.0%	.0%

Chi sq.= 17.63

df= 4

p =.0014

☐ No differences were reported in any demographic variable.

III. Focus Group Research

Focus Group Research

Introduction

In March 1990, the Regional Transit Board contracted with Ilium Associates, Inc. for a Metro Mobility Research Study. The study was divided into two distinct research phases:

Quantitative Phase which was a telephone survey of 400 Metro Mobility users.

Qualitative Phase which was comprised of four focus group sessions with Metro Mobility users.

The findings detailed in this section represent the results of the qualitative phase of the research.

Objectives

The objectives of the focus group sessions were as follows:

To collect in-depth information from Metro Mobility users regarding their knowledge of and attitude toward mainline lift-equipped buses.

To discuss barriers toward attempting to ride accessible mainline bus service.

Methodology

There were a total of four focus groups held over a two day period (May 2 and 3, 1990). Two groups were held in Minneapolis at the facilities of Project Research and two in St. Paul at the CIMR facilities.

A total of 35 participants attended.

These participants were selected randomly from the Metro Mobility certification list, within the various mobility definitions. A listing of certification categories for the participants is as follows:

AMPWMMXX	HDIWMXXX	HRTNNXXX
VIXNNBXX	ARTNNXXX	VIXCNBXX
COOCNXXX	COOXXXDX	COOWMXDX
HRGWMXDX	HRTCXXX	CPWPXXX
OTHCNBXX	HDIXXXX	PPXWMXXX
DIRNNXXX	VIXBRBXX	SCDNNBXX
MSXCXXX	HRTWMXXX	HRGCNXDX
CPNNXXX	AMPWMXXX	COOCNXXX
VIXCWBXX	VIXCNBXX	OTHGDBXX
CPWPXXX	KIDNNXXX	OSTCNXXX
COOWMXXX	CPWPXXX	

Transportation was paid for and each participant was paid \$25 for their time.

Sessions lasted approximately two hours and were moderated by Carolyn Perez Andersen of Ilium Associates, Inc.

Prior to the focus group session, a moderator's outline was prepared and submitted to RTB, for review, comment and approval. Modifications were made and a final outline submitted to and approved by RTB. A copy of the final outline is included on the next page.

Moderator's Outline

I. Introduction

Purpose of a Focus Group

Issues to be discussed:

- ☐ 78 New lift-equipped buses to be placed on service in regular MTC routes.
- ☐ One more option to make public transportation accessible to all.

Planners need to know whether that's a good idea, how you can use it, where these routes should go and how to get you information.

II. Current Travel Habits

Where do you make most frequent trips

How do you get there

Does the Metro Mobility system work - why/why not are you satisfied with the service.

IV. Use of Regular Route Service

Any experience here or elsewhere

Would you use it again?

V. Idea of Regular Route Accessible Service

Good

Bad

Advantages

Disadvantages

Could you use - How, Purposes

VI. Features Needed to Motivate

- ☐ Curb Cuts
- ☐ Benches
- ☐ Shelters
- ☐ Entrances/Maneuverability, Heaters
- ☐ Braille
- ☐ Audio announcements

VII. Ideas From Other Cities and Here

Both Metro Mobility and regular route accessibility - how should that work?

1. Program where certain routes are accessible and others are served by Metro Mobility. Advantage/ Disadvantage
2. Routes access and call ahead day before to schedule lift bus for non-access routes.
3. Hourly lift-equipped buses to specific location.
4. Who
5. Transferring to rail and other buses - important?

VIII. Operating Specifics

How do we know a bus is lift-equipped?

Who should use lift-equipped buses- wheelchair only or not

Training

What training/educating do you need

What do you need from drivers

What if lift is not operational - what should the policy be?

Assistance needed from driver

Bus stop signs - special indication?

Schedules - special indication

IX. Route Specifics

Examination of a few routes to discuss whether these might be advisable to introduce accessible service.

Minneapolis/St. Paul 16 - Crosstown Minneapolis to St. Paul via University Avenue (through U. of Mn)
7 minutes off-peak; 3 min - peak

Minneapolis 19 - Robbinsdale/Crystal through Minneapolis CBD to Lake Nokomis

Minneapolis/St. Paul 21 Crosstown St. Paul CBD - So. Maples via Lake. Transfer to 15 other MTC routes.
10 min - o/p; 5 min - peak

Minneapolis 2 - Crosstown U of Mn to Franklin & Hennepin.
Transfers to 15 other routes
30 min/op; 10 min. - peak

33 Weekday Rush hour only

Park and Ride lot - Rosedale Shop Center; Roseville Ice Arena
15 min (peak only)

St. Paul 3 - St. Thomas College via Grand through St. Paul CBD
20 - 30 PM min; 10 min - peak

St. Paul 4 - Crosstown via Snelling
All routes intersect
Limited service airport
20 min - off peak; 10 min - peak

X. How Should New Services be Communicated

Did you know about the lift-equipped demonstrations on Rts.16 and 19.

Did you receive enough information?

What kind of contact/information is needed?

Advertising?

Who else should be reached?

Non-disabled? Drivers?

XI. Any Other Advice

Current Travel Habits

How Participants Travel

The majority of participants in all four groups used Metro Mobility exclusively; the next largest group were those who combined Metro Mobility with rides from family or friends. A few used mainline bus service as well as Metro Mobility. Those who used both public transportation services tended to have more daily activities and be more active.

Where Participants Travel

Generally, the trip destinations are quite varied in location. Types of trips, however, fall into the familiar categories with grocery shopping being the most common, and doctor visits also being mentioned very frequently. Many participants worked or have volunteer positions, but they do not seem to be in the majority. Many participants used Metro Mobility for social contacts and visits.

Some were quite concerned that mainline lift-equipped service would replace Metro Mobility, and that this would severely limit their social activities. Their feelings were summed up by a participant who stated: "There would be no social life for handicapped people if you take Metro Mobility away from us." Another participant stated she would become a recluse, were Metro Mobility to be taken away.

Satisfaction with Metro Mobility

Most participants are very satisfied with Metro Mobility. Those that have chronic problems usually seem to have a provider problem rather than a problem with the overall system itself.

The two most often heard complaints from the group were:

1. Having to call in the day before to be picked up.

Calling in the day before is a problem for many people whose health situation may alter from day to day.

- ☐ "I can't tell what the day has coming - whether I can walk or not - so I don't know if I'm going to need them."
"When you got to go, you've got to go."
- ☐ "You don't always have the time to take Metro Mobility."

2. Pick up for the return trip home is not punctual.

Many experienced long delays in being picked up for their return trip home.

- ☐ "We have to wait extra time to be picked up."
- ☐ "Dispatchers don't seem to understand how long it takes to get across the city."
- ☐ "Return trip is very difficult. Sometimes you have to wait a long time. They get behind."
- ☐ "It seems I have to wait an extra long time to get home."

In spite of those two items, the level of satisfaction with Metro Mobility is quite high. A very large number of users stated they would give up the spontaneity and flexibility of using mainline service in order to keep the door thru door service. When asked whether they would be willing to pay more to use the door thru door service rather than mainline bus service, those same people agreed that they would.

- ☐ "I would find a way to pay more - even if it meant I didn't go out as much."
- ☐ "I'm on a limited income, so I'd just go out less."

One participant suggested Metro Mobility should run as a club whereby participants paid an annual fee based on projected usage. Those using it daily would pay a much higher fee than those who used it only a few times a year.

Metro Mobility in its current mode is viewed so positively that, in fact, several participants viewed the discussion of their use of mainline service as a veiled threat to take Metro Mobility away. A few queried why it was to be taken away and why they were being forced to use a service that did not cater to their needs very well.

- ☐ “Why should we get on the mainline when this service is working so good for us?”
- ☐ “Are they forcing us on these buses to justify buying the 78 buses?”

Awareness Barriers and Proposed Uses of New Lift-Equipped Buses

Only one or two participants within the four groups were aware of the 78 new lift-equipped buses that have been ordered, and very few had any experience using the lift-equipped MTC buses that ran in the Route 16 and 19 demonstration.

Those who had used it had mixed reactions. One complained that the driver passed her by because he “didn’t want to go through all the rigmarole”; another stated that the equipment had broken down and most of the other passengers had to get off and take another bus while the driver and maintenance personnel fixed the lift. This incident caused her a great deal of stress.

- ☐ “When the lift got stuck, I was really embarrassed. People had to get off the bus and get on another one, and it was pretty embarrassing.”

When participants were questioned whether they would use the new buses, there were a variety of reactions. The biggest majority, however, were quite satisfied with Metro Mobility and saw little reason to utilize mainline bus services.

- ☐ “There is no perfect system, but what we have now is as close as you can get.”
- ☐ “Door to door is what I feel most comfortable with.”

- ☐ "Why should we have to transfer?"
- ☐ "I guess the nicest thing about the Metro system as it is, is that we are guaranteed no matter where we are or what time of the day it is, we cannot be stranded somewhere. Somebody with that provider or another one has to pick you up. That's something we'd need - a guarantee that if something does happen that we wouldn't be sitting out on the street somewhere."
- ☐ "I would go with the Metro Mobility system. This is a nice concept, but I would not want to change over until I was fairly certain that it was something that I could do."
- ☐ "For a guide dog, the lifts won't work. The dogs aren't trained to get on a lift. And many people won't let go of their dogs (to let the dog board first) because the dog might frighten other people on the bus."
- ☐ "I can't think of a service that would work as well as Metro Mobility."

One of the major deterrents to riding mainline bus service is safety. A majority of participants felt insecure about walking to or waiting for a bus because of perceived crime factors.

- ☐ "I would worry if I rode the bus because there's always a couple of blocks to walk."
- ☐ "There's been a lot of fighting on the buses and this is real scary."
- ☐ "Crime is way up and we're sitting ducks."
- ☐ "People who are disabled and carry a cane or something feel like we're setting ourselves up for some sort of mugging, but Metro Mobility door-to-door service makes me feel much more secure."
- ☐ "There are too many young rowdies on the bus."
- ☐ "I'm concerned about the crime - it makes us more vulnerable - that's a position I don't want to be involved with. With Metro Mobility at night it feels more secure."

Participants were asked whether daylight hour services would be more attractive and help alleviate concerns about crime. Some felt that running the lift-equipped mainline bus service during daylight hours only would be beneficial; others disagreed.

- ☐ "The real worry is after dark so if they could run till 9:00 PM maybe...."
- ☐ "I think 7:00 PM would be late enough. It's dark by 7:00 in the winter."
- ☐ "You're not safe no matter where you go. Some areas are worse than others. And there are many handicapped buildings that are in the worst neighborhoods because the land itself was cheap to purchase."
- ☐ "I'm not afraid. I feel safe taking the bus."

Still others were concerned about the physical problems of getting to or from the bus stop. Winter weather was viewed as especially detrimental.

- ☐ "I'd be concerned about the distance from the bus stop to where I was going. There aren't enough curb cuts and also the incline of the street and smoothness of the terrain can be problems."
- ☐ "In the winter, I can't be outside more than 10-15 minutes so I would have to have a heated shelter."
- ☐ "I would take a bus because I can walk, but in the wintertime, the streets are too icy."
- ☐ "In the winter there is too much snow and buses can't get to the curb."
- ☐ "When it's real icy, then I got problems."

Several participants suggested it would be better to offer service during spring and summer months only, however the majority of participants felt that the service should operate year around.

- ☐ "I think it would be a good idea to have it all the time."
- ☐ "I would want to use it whenever possible."

Another major safety consideration involved boarding the bus. Many of those able to walk to the bus stop had a great deal of trouble getting onto the first step.

- ☐ "I just can't make that first step."
- ☐ "The last time I rode a bus, I had to put everything on the street and take both hands and lift that one foot off of that step so that I could go on. I'll never forget it so I gave up."
- ☐ "They don't get to the curb and you take this much (curb height) off of a step, it makes it much easier, but they don't bother to get to the curb."
- ☐ "The trouble with buses now is that the steps are so high."

Once on the bus, many participants have also experienced problems with the bus moving before they are seated.

- ☐ "And then you get on the bus and you're putting your money in and they pull away and it knocks you down."
- ☐ "I have trouble getting on the bus and then if the driver moves too fast, I've taken some nasty spills."
- ☐ "Sometimes they jerk the bus and I lose my balance."
- ☐ "It's hard for me to climb on and off a bus. With Metro Mobility, you have help if you need, but if you go on a bus and you make it, then okay; otherwise, too bad."
- ☐ "I can take a bus, but not very well. I have a balance problem and I wear a brace. And standing on a bus when it starts to move is a real harrowing experience. I've gone kaput a few times."
- ☐ "They pull away or jerk the bus every time I've ridden; I'm very frightened of that."
- ☐ "One of the problems they have is that they have a schedule to meet, but they should allow time for people to get seated before they take off."

How the lifts would operate and the role the driver would play are the two key questions regarding the new equipment.

- ☐ “You can’t imagine the fear I have of falling off the lift while the lift is going up. It’s an absolute must the driver be trained how to load a wheelchair on a lift.”
- ☐ “I would prefer the lift in many cases because I wouldn’t have to worry about the curb, but I just don’t know with me, I think it would be a ‘mell of hess’.”
- ☐ “I would need someone to take hold of me or something to hold onto.”
- ☐ “There would have to be someone to work the lift and help me.”
- ☐ “I would try it if a driver could help.”
- ☐ “Lifts are fine if they’re used correctly.”

Since a couple of participants had experience with malfunctioning lifts and/or non-experienced drivers, several participants wondered how long they would have to wait at a stop should a lift malfunction.

- ☐ “Two hours is not acceptable.”
- ☐ “An hour might be okay if the weather was nice and I didn’t have to be somewhere at a certain time.”
- ☐ “I think an hour is too long. They should send another bus right out.”

A bigger concern and the barrier that seems the most universally named concerns the length of time it would take to use the lift, or board the bus even if a lift isn’t required, and get the disabled person settled.

- ☐ “I’m just wondering if that isn’t going to provoke the public. I know how some people are now — they shove me and other people yell at me.”
- ☐ It disturbs other people; it really does.”

- ☐ "Using the lifts must take a lot of time. I sure don't want to cause any trouble for people."
- ☐ "This is really going to tie traffic up."
- ☐ "I don't think the public would stand for it, especially in rush hour; it would be a complete disaster."
- ☐ "Disabled people would be more comfortable if we got on a bus with four or five other people in wheelchairs on the bus. I think the lift buses should just be for handicapped, but run on regular routes."
- ☐ "People would complain that they were late for work because of the person in the wheelchair."

Awareness of In-Service Lift-Equipped Buses

Many participants could not read overhead signs and several mentioned that they had to come out of the shelter to look for the handicapped symbol by the door to know whether the bus was lift-equipped.

Some suggestions to improve visibility included:

- ☐ a large circle of a contrasting color on the front of the bus.
- ☐ flags on each side of windshield.
- ☐ large sticker in right front window.
- ☐ large print letters on top of windshield or in overhead sign.

The blind participants suggested a beeper or horn when the bus pulled to the curb.

Driver and Passenger Sensitivity

For the most part, participants felt the Metro Mobility drivers were helpful. They indicated that this had improved over the last couple of years. In fact, they are so comfortable with the Metro Mobility drivers, that the MTC drivers are viewed with great apprehension.

- ☐ "Courtesy from city bus drivers is not going to be the same."

Many participants have had negative experiences with drivers while using the mainline service or they perceive problems.

- ☐ "Bus drivers are very busy. They will go by a disabled person rather than wait."
- ☐ "Drivers don't like to help with the lifts."
- ☐ "I've had bus drivers whiz on by me."
- ☐ "One driver said 'Don't you know you can use Metro Mobility?'"
- ☐ "They have a schedule to keep so they won't wait for us."
- ☐ "The younger drivers especially are crude and rude."
- ☐ "Most of all, the driver gets annoyed."
- ☐ "I don't think they are trained very well before they are put on the street."

The types of training for drivers that were suggested ranged from operational aspects to sensitivity sessions.

- ☐ "They must know how to operate the lift. During the demonstration, they'd stop and the driver would have to get out a paper to operate the lift."
- ☐ "They need to pull up to the curb."
- ☐ "Drivers should use the loud speakers to call out street names; that's what they're there for."

- ☐ "Use common courtesy so people don't fall."
- ☐ "We (group of blind persons) offered to get together with them in a meeting, but they didn't go for it. They should have a meeting with some of these types of passengers."
- ☐ "They need to train for blind and deaf and deaf/blind people."

As for other passengers, it has already been pointed out that the participants were extremely concerned about the feelings and attitudes of the public. All agreed that a public awareness campaign should be undertaken.

- ☐ "People aren't patient. They need to know there will be a delay and to have a little patience."
- ☐ "The public doesn't understand how the whole network (mainline and Metro Mobility) works. They should know this."
- ☐ "I think a poll should be taken of the public to see if they will put up with the handicapped on the buses and what they would be willing to do to help."
- ☐ "They should know that we handicapped have a right to be out there and to show some sensitivity."
- ☐ "It will take some time to work through all the bugs, so just be patient."
- ☐ "Take another bus if they're in such a hurry."

Routing

Group participants had little in the way of specific routing advice. Most felt that lift-equipped bus routes that looped around medical complexes and senior citizen housing areas would be more heavily utilized. A few thought routes to major shopping areas would attract disabled riders.

When asked about the need for lift-equipped regular route airport service, the majority of participants reacted negatively.

- ☐ “Who would use that?”
- ☐ “We don’t have the money to take airplane trips.”
- ☐ “We wouldn’t use it but once a year or less.”

Communication of Services

The majority of the participants receive and read the Metro Mobility newsletter. This was viewed as a good method to reach them. Others felt that anything mailed to their homes would be read either by them or to them by someone else.

- ☐ “I’m not able to read a bus schedule; if you could just mail me the schedule for the three routes that I use, someone could read it to me.”
- ☐ “My husband reads me the newsletter, so put it in that and I’ll hear about it.”
- ☐ “I’d need a schedule mailed to me every time it changed.”

With regard to using new lift-equipped mainline service, there was a great deal of information they felt they would need.

- ☐ “We’d need information about how to use the service, when it would run, maps, what would happen if the lift didn’t work - everything.”
- ☐ “Hold more forums so we can see how things work.”

Everyone agreed that announcements of major new services or changes to service should be broadcast on TV and radio news shows.

- ☐ “Announce it on the TV news programs. Lots of people watch them.”

Several participants suggested that the various organizations that work with the disabled community should be kept informed and encouraged to make announcements to their members through whatever methods they employ to reach their membership.

A few suggested posting information on buses and Metro Mobility vans; others disagreed for two very different reasons:

- ☐ Some felt that people would not bother to read the information on a bus or van.
- ☐ Others felt that the private providers would not want to encourage use of mainline service as it would decrease their business.

In summary, direct mail was seen as the most effective method.

IV. Community Forums

Community Forums

Four community forums were conducted for the general public to learn of RTB accessibility plans, and for the public to provide information to RTB in an informal format. A new MTC lift-equipped bus was demonstrated at each forum, and a short questionnaire was given to participants to fill out and return.

The forums were an opportunity for interested citizens to discuss and comment on accessible public transit options. They proved quite valuable for both RTB and the research effort. The information gained from the participants, especially comments on mainline bus accessibility, helped define and interpret many of the statistical data identified by the telephone survey.

Locations

Locations and meeting times were selected to provide maximum opportunity for the public to attend one of the four forums.

Lewis Park 180 Wayzata St. Paul	Wednesday, May 9 1:30 - 4:00 PM
Seward Square 2121 So. 9th Street Minneapolis	Wednesday, May 9 7:00 - 9:00 PM
Grasslands 11940 Xeon St. NW Coon Rapids	Thursday, May 10 10:00 AM - noon
Hennepin County Gov't Center Level A - Auditorium	Thursday, May 10 7:00 - 9:00 PM

Panelists

Five panelists attended each forum representing RTB, TAAC, MTC and the consultant. At two of the forums, a representative from light rail planning and development attended.

Michael Ehrlichmann,
RTB Chairperson

Judith Hollander,
RTB Director of Planning and Programs

Mary O'Harra Anderson,
Chairperson, RTB Transit Accessibility Advisory
Committee (TAAC)

Bob Prowda,
Ilium Associates, Inc.
Marketing Research Consultant

Tom Vida,
MTC Assistant Director of Transportation

Questionnaire

A short questionnaire was available at each forum for participants to fill out and return. The objective of the questionnaire was to gain specific comments on accessible services, particularly lift-equipped mainline service, and to provide an opportunity for people who did not want to address the panel to provide comments.

Attendance

The attendance at each forum was estimated at 35 to 60 participants.

Forum Comments

Each forum was video taped and audio recorded. These tapes are available at RTB. The following represent the consultant's notes from the participants commentary and general impressions.

- ☐ Forums were well attended and many of the participants at each forum choose to speak. The overwhelming majority of comments were thoughtful, important concerns regarding accessible services, particularly implementation of mainline bus service. There were very few complaints about Metro Mobility service or "grandstanding".
- ☐ As compared to the statistical profile of Metro Mobility users provided by the quantitative study, forum attendance tended to be younger, male, and people in wheelchairs.
- ☐ There was a very positive attitude toward mainline service, with many people indicating a willingness to try the service. Most understood the benefits of the service.
- ☐ People with a number of different disabilities attended the forums, and there was a range of the severity of their disabilities. There seemed to be no relationship between willingness to try the service and degree of disability.
- ☐ A major concern was driver training for accessible mainline service. It would be very important that the training involve awareness and sensitivity to a variety of different disabilities, and the range of degree of disability.
- ☐ A number of comments involved a concern for service dependability, including on-time schedule adherence, lift operation and procedures for unusual situations, for example:
 - When there are more than two people in wheelchairs waiting at the stop.
 - When the weather is fine in the morning but it snows during the day.

- When lifts malfunction.
- Missing a bus late at night.
- ☐ People were looking for a “safety net” or “Trip insurance”, an ability to get back home no matter what happens.
- ☐ There was a need to identify what models and styles of wheelchairs and three-wheeled vehicles would or would not work (on the lifts or tie downs).
- ☐ Key benefits identified: “Go when I want to go”, “When a friend calls,” “flexibility”, “independence,” “spontaneous.”
- ☐ The impact of snow was a concern including removal at bus stops, impact on bus schedule, snowplows piling snow at stops, pathways and bus detours.
- ☐ It appeared that a positive attitude by accessible housing staff could be very important to the use of the service. These individuals could influence people’s willingness to use the service and may be an important conduit for two-way information flow about the service, how it’s operating, complaints and requests.
- ☐ Travel training should be made available. Many of the people who are motivated to try the service have very little knowledge of MTC service, operations, schedules, — basic bus riding knowledge required for anyone to use transit. Accessible housing staff should be invited and encouraged to participate.
- ☐ Because most of these people now go door-to-door, pathways to and from the bus stop is unknown territory. This may need to be a component in travel training.
- ☐ Most people stated the greatest need to travel was midday, with shopping and medical trips the trip purpose.
- ☐ Some people indicated a need for a “shopper’s bus,” an accessible service on a schedule that would take people to a shopping center. This would not be regular mainline service but an alternative to many individual’s requesting Metro Mobility Service.
- ☐ People did not want to transfer from bus to bus.

Questionnaire Results

A total of forty-five questionnaires were returned. Results have been tabulated and verbatim comments provided. Since questionnaires were not distributed in a controlled, random method, the results are not necessarily representative of the people who attended the forums or of the disabled community. However, the results are useful as qualitative information important in service and marketing development.

Use of Metro Mobility

Most of the people (91%) who completed the questionnaires have used Metro Mobility in the past month.

People use Metro Mobility for a variety of trip purposes, with regular shopping indicated the most. The "other" category included visiting friends, recreational trips and social events.

Trip Purpose

