Chapter 7. Solutions to Gaps

Possible solutions have been identified to address the gaps that emerged from the outreach process and review of local plans, including Community Based Transportation Plans. These solutions are based on suggestions received in the outreach process, and ideas contained in local plans. Appendix H summarizes each solution in terms of specific gaps that it addresses and any special implementation issues identified. Some solutions address multiple gaps, and some of the gaps are addressed by multiple solutions. The possible solutions are grouped into four main categories:

- Mobility management, travel training, and transportation coordination activities
- Additions or improvements to paratransit that exceed ADA requirements, and demand-responsive services other than ADA paratransit
- Additions or improvements to public transit services and transit access
- Solutions to address affordability barriers

Detailed project examples and descriptions are provided in this chapter, following a discussion of the preliminary evaluation criteria used to identify regional priorities among the overall list of solutions.

Preliminary Evaluation Criteria

To provide a basic framework for prioritizing solutions regionally, four criteria were applied to each of the projects with a simple “high,” “medium,” or “low” ranking in terms of the degree to which the project generally satisfied the basic requirements of community need/transportation benefits, coordination benefits, cost-effectiveness, and implementation considerations. The identification of these four criteria represents a synthesis of past regional planning and programming policy documents targeting low-income, senior, and/or disabled populations, including:

- Criteria initially reviewed with stakeholders during development of the 2007 Coordinated Plan as potential evaluation criteria for funding programs subject to the plan.
- Common evaluation criteria used in Community Based Transportation Planning efforts for project prioritization.
- Project evaluation criteria MTC has used previously for New Freedom and Lifeline Transportation Program guidelines (for JARC funding).
- Criteria used to prioritize regional sustainability strategies in MTC’s Transit Sustainability Project ADA Paratransit study.

The four criteria were averaged without any weighting to identify an overall regional priority level in the context of the region’s current needs and offerings. Rather than being conclusive, these criteria are preliminary, applied with the understanding that any of the proposed solutions might ultimately be
evaluated or weighted differently in a local context for a specific project proposal. In addition, Federally-established requirements will also apply to specific funding sources. Because FTA has yet to issue revised guidance for the new consolidated 5310 Program under MAP-21, these criteria are presented as general and preliminary guidelines for regional prioritization and may be subject to change depending on program requirements or specific priorities for future funding calls.

**Community Need/Transportation Benefits**

- **Acute needs:** The importance of needs are reflected in level of community support, and also in priority designation in locally-adopted plans or policies. Acute needs may include needs of small groups who have been left unserved by other programs due to expense or other difficulties.
- **Number of gaps and trip types:** Projects are preferred that address multiple gaps and serve multiple customer groups and trip purposes.
- **Number of beneficiaries:** In general, improvements that benefit many people are preferred to those that benefit few. However, the needs of relatively small groups might be considered particularly critical based on the “acute need” criterion above.
- **Unserved needs:** Projects are preferred that address gaps left by other services rather than duplicating, overlapping with, or competing with other services. The relative importance of needs may vary per local priorities.
- **Measurable benefits:** As much as possible, there should be ways to measure how a project is benefiting target groups, whether in terms of numbers of people served, numbers of trips provided, improved measures of service quality, etc.

**Coordination Benefits**

- Projects that support demonstrable coordination efforts, for example multiple organizations working together to address a need and sharing resources and capabilities, are desirable.
- Projects that support the regional coordination strategies identified in this plan (see Chapter 8) are preferable.
- Projects that address duplication of services or have the potential to share capacity between providers are preferable.
- Are there potentially multiple access points to and from a project or program? Can the service be readily coordinated with referrals to or from county or subregional mobility manager?

**Cost-Effectiveness**

- **Cost:** While specific cost estimates are not provided due to the scalability of most types of projects, projects with overall costs within a range that can realistically be funded with available sources, are preferable.
- **Cost per beneficiary:** A broad range of few to many beneficiaries is compared to the cost of a program. Even though a program’s total cost is low, if it reaches very few people it might still have a high cost per beneficiary. Similarly, even though a program’s total cost is high, if it reaches many people it might still have a low cost per beneficiary. It should be noted that the
cost of provision of service relates to service that exceeds the ADA requirements, since ADA-required paratransit service must be provided regardless of cost considerations.

- Funding eligibility: Projects which are not eligible for all the Federal sources covered by this plan would require state or local sources to implement instead.
- Leveraging resources: Could a potential project sponsor readily tap into other public or private funding sources, especially new sources not previously available?

**Implementation**

- Have existing or likely project sponsors been identified? Are they able to deliver the project?
- Implementation time-frame: Projects that will produce results quickly are preferred, as long as they are also sustainable. Projects with long-term payoffs should have some form of measurable accomplishments in the short run.
- Are there any significant barriers to implementation? Can they be overcome with some effort, or do very high barriers exist that could be insurmountable without major legal, structural, or institutional changes? Projects with minimal barriers to implementation are preferred.

Five tables are provided summarizing the priority strategies, one for each of the four basic solution categories, and one for other solutions that don’t fit into any of the other broader categories or which fit into multiple categories.

**Table 7-1. Mobility Management, Travel Training, and Transportation Coordination Activities**

<table>
<thead>
<tr>
<th>Proposed Solution</th>
<th>Overall Priority</th>
<th>Preliminary Evaluation Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Need/Benefit</td>
</tr>
<tr>
<td>Travel training and promotion to seniors and/or people with disabilities</td>
<td>High</td>
<td>H</td>
</tr>
<tr>
<td>Enhanced local information and referral systems, including One Call/One Click centers, comprehensive mobility guides</td>
<td>High</td>
<td>H</td>
</tr>
<tr>
<td>Human service transportation coordination (e.g. cost sharing arrangements, joint procurements, joint maintenance, vehicle sharing)</td>
<td>Medium-High</td>
<td>H</td>
</tr>
<tr>
<td>Enhanced regional information (using 511 or other means) about public transportation for paratransit users, people with disabilities, and speakers of languages other than English</td>
<td>Medium-High</td>
<td>M</td>
</tr>
<tr>
<td>Targeted marketing and “buddy” programs where experienced transit riders support new riders</td>
<td>Medium-High</td>
<td>M</td>
</tr>
<tr>
<td>Proposed Solution</td>
<td>Overall Priority</td>
<td>Preliminary Evaluation Criteria</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------</td>
<td>------------------</td>
<td>---------------------------------</td>
</tr>
<tr>
<td>Volunteer driver programs, including training and recruitment of drivers</td>
<td>High</td>
<td>H     H     H     M</td>
</tr>
<tr>
<td>Help for community organizations to expand service</td>
<td>High</td>
<td>H     H     H     M</td>
</tr>
<tr>
<td>Intelligent Transportation Systems (ITS) improvements</td>
<td>High</td>
<td>H     H     M     H</td>
</tr>
<tr>
<td>Taxi discount and voucher programs, including the possibility of purchase of a</td>
<td>Medium-High</td>
<td>M     H     H     M</td>
</tr>
<tr>
<td>guaranteed level of taxi service by transit agencies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sharing of provider training and methods</td>
<td>Medium-High</td>
<td>M     H     H     M</td>
</tr>
<tr>
<td>Non-emergency medical transportation for Medi-Cal patients and non-ADA eligible</td>
<td>Medium</td>
<td>H     H     M     L</td>
</tr>
<tr>
<td>seniors and people with disabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Premium services on ADA paratransit.</td>
<td>Medium</td>
<td>H     M     L     L</td>
</tr>
<tr>
<td>Feeder service connecting to fixed-route transit</td>
<td>Medium</td>
<td>H     M     L     L</td>
</tr>
<tr>
<td>Transfer assistance to help with multi-operator paratransit trips and transfers</td>
<td>Medium</td>
<td>H     M     L     L</td>
</tr>
<tr>
<td>between paratransit and fixed-route service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Demand-responsive group shopping service</td>
<td>Medium</td>
<td>M     M     M     M</td>
</tr>
<tr>
<td>Incentives or assistance for wheelchair-accessible taxicabs</td>
<td>Medium</td>
<td>M     M     M     L</td>
</tr>
<tr>
<td>Incentives or assistance to improve the quality of taxi service</td>
<td>Medium</td>
<td>M     M     M     L</td>
</tr>
<tr>
<td>Escorted travel on paratransit</td>
<td>Medium</td>
<td>M     L     M     M</td>
</tr>
<tr>
<td>Improved performance and service quality measurement with rider participation</td>
<td>Medium</td>
<td>L     M     M     M</td>
</tr>
</tbody>
</table>
Table 7-3. Additions or Improvement to Public Transit Service and Access to Transit

<table>
<thead>
<tr>
<th>Proposed Solution</th>
<th>Overall Priority</th>
<th>Preliminary Evaluation Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Need/ Benefit</td>
</tr>
<tr>
<td>Pedestrian infrastructure improvements in the vicinity of transit stops</td>
<td>High</td>
<td>H</td>
</tr>
<tr>
<td>Pedestrian safety planning, especially for low-cost, high-impact solutions</td>
<td>High</td>
<td>H</td>
</tr>
<tr>
<td>Transit information in accessible formats, including real-time information</td>
<td>Medium-High</td>
<td>H</td>
</tr>
<tr>
<td>Restoration of fixed-route transit services that have recently been cut</td>
<td>Medium-High</td>
<td>H</td>
</tr>
<tr>
<td>Expanded fixed route transit services</td>
<td>Medium-High</td>
<td>H</td>
</tr>
<tr>
<td>Better connections between transit systems</td>
<td>Medium-High</td>
<td>H</td>
</tr>
<tr>
<td>Increase awareness of wheelchair securement issues among transit and paratransit riders</td>
<td>Medium-High</td>
<td>M</td>
</tr>
<tr>
<td>Transit safety education</td>
<td>Medium-High</td>
<td>M</td>
</tr>
<tr>
<td>Senior-friendly shuttles, jitneys, or circulators</td>
<td>Medium</td>
<td>M</td>
</tr>
<tr>
<td>Targeted transit route and stop adjustments</td>
<td>Medium</td>
<td>M</td>
</tr>
<tr>
<td>Provide additional bus pass vendor outlets</td>
<td>Medium</td>
<td>M</td>
</tr>
<tr>
<td>Additional wheelchair spaces on transit vehicles</td>
<td>Medium</td>
<td>H</td>
</tr>
<tr>
<td>Additional driver training on accessibility issues and features</td>
<td>Medium</td>
<td>M</td>
</tr>
<tr>
<td>Targeted law enforcement to improve pedestrian safety near transit stops</td>
<td>Medium-Low</td>
<td>M</td>
</tr>
<tr>
<td>Courtesy or flag stops for people with disabilities</td>
<td>Medium-Low</td>
<td>M</td>
</tr>
</tbody>
</table>
### Table 7-4. Solutions to Address Affordability Barriers

<table>
<thead>
<tr>
<th>Proposed Solution</th>
<th>Overall Priority</th>
<th>Preliminary Evaluation Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bicycle assistance and safety training</td>
<td>Medium-High</td>
<td>H M H M</td>
</tr>
<tr>
<td>Auto loans for low-income families/individuals</td>
<td>Medium</td>
<td>H L M M</td>
</tr>
<tr>
<td>Offer or expand car sharing for low-income families/individuals</td>
<td>Medium</td>
<td>H L M M</td>
</tr>
<tr>
<td>Discounted transit fares or other subsidies beyond those already provided for seniors and people with disabilities</td>
<td>Medium</td>
<td>M M L M</td>
</tr>
<tr>
<td>Discounted transit fares for low-income youth or adults</td>
<td>Medium-Low</td>
<td>H L M L</td>
</tr>
<tr>
<td>Discounted paratransit fares</td>
<td>Low</td>
<td>M L L L</td>
</tr>
</tbody>
</table>

### Table 7-5. Other Solutions

<table>
<thead>
<tr>
<th>Proposed Solution</th>
<th>Overall Priority</th>
<th>Preliminary Evaluation Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training for older drivers</td>
<td>Medium-High</td>
<td>H L H M</td>
</tr>
<tr>
<td>Partnership with the DMV to assist people who have just lost their licenses</td>
<td>Medium-High</td>
<td>H H M L</td>
</tr>
<tr>
<td>Funding for the development of emergency planning and evacuation training programs</td>
<td>Medium</td>
<td>M H M L</td>
</tr>
<tr>
<td>Funding for specific technological improvements such as cell phones with GPS devices</td>
<td>Medium</td>
<td>M M M M</td>
</tr>
<tr>
<td>Increased funding flexibility to allow for more energy efficient vehicle purchases</td>
<td>Medium</td>
<td>L M H L</td>
</tr>
<tr>
<td>Funding assistance for items such as fuel purchases</td>
<td>Medium-Low</td>
<td>L M M M</td>
</tr>
<tr>
<td>Wheelchair breakdown service</td>
<td>Medium-Low</td>
<td>L L M L</td>
</tr>
<tr>
<td>Localized mobility device-sharing programs</td>
<td>Medium-Low</td>
<td>L L M L</td>
</tr>
</tbody>
</table>
Mobility Management, Travel Training, and Transportation Coordination Activities

- **Travel training** and transit familiarization. In an effort to promote the independence of elderly and disabled individuals, training to ride fixed-route transit should be provided.

  Seniors and people with disabilities who have never used public transportation have real concerns and fears of the unknown. Some have unrealistically negative impressions of public transportation that would be overcome by successful experiences using transit in the company of others. Relevant programs, provided free of charge, include one-on-one instruction about how to ride transit, bus buddies who ride along with new riders, group demonstrations and field trips.

- **Enhanced local information and referral systems** to provide better access to information about transit, paratransit, and community transportation resources, including One Call/One Click Centers and comprehensive mobility guides.

  Lack of information prevents some people from using public transportation. Information about smaller programs run by cities, counties, or community groups may be confusing or difficult to find. Enhanced information and referral could address the needs of people who do not speak English and people who cannot navigate internet-based information (such as 511.org and operator web sites). Comprehensive mobility information would permit creation of one-stop information sources covering not just transportation but potentially connecting also to resources for housing and social services for seniors and people with disabilities. Printed or online mobility guides including modes other than conventional transit and ADA paratransit, such as community-based transportation, and services provided by cities and counties, would help individuals and people who provide them information. Note that such a function may also be a part of a broader mobility management strategy.

- **Human service transportation coordination** through mobility management practices or brokerage to coordinate currently under-used resources and help address coordination barriers and avoid duplication of services.

  Mobility management could expand the availability of services beyond those required by ADA paratransit by coordinating currently underused resources such as vehicles operated by assisted living facilities and other senior housing. A mobility manager could also help with insurance to cover volunteer drivers and vehicles, insurance for shared vehicles, vehicle maintenance, recruiting volunteers, compliance with reporting and audit requirements, joint procurements, implementing cost-sharing arrangements between transit operators and human service transportation providers, and other issues that inhibit community-based transportation services.
A mobility manager could also provide comprehensive mobility information and connect individual riders with appropriate services.

- **Enhanced regional information** about public transportation for paratransit users, people with disabilities, and speakers of languages other than English.

  Enhanced regional information, whether in the form of additions to 511.org and the 511 telephone information service, or by other means, would help in making trips by multiple operators and increase understanding of public transportation in general. Live information about making trips on multiple operators is currently not available.

- **Targeted marketing** to encourage seniors and people with disabilities to ride transit.

  Promotions and programs such as free ride days, merchant sponsorships, organized field trips and “transit ambassadors” (seniors and people with disabilities who promote transit to their peers) would help seniors and people with disabilities learn about transit and how to use it. Multi-lingual marketing and information and Transit ambassadors able to work with non-English speakers are also needed.

### Additions or Improvements to Paratransit That Exceed ADA Requirements, and Other Demand Responsive Services

- **Volunteer driver programs** including steps that would support such programs, such as insurance, driver training, and assistance with recruitment.

  Volunteer driver programs may be helpful in providing escorted transportation, transportation before the ADA eligibility process is completed, assistance with shopping trips, and many other forms of service that ADA paratransit does not provide as listed earlier under the heading “Premium services on ADA paratransit.” This category may also include programs that use paid drivers, like the Independent Transportation Network operated in Portland, Maine. Another aspect of this program allows volunteer drivers to accumulate credits while they are driving so that they can use the credits when they need to be driven by other volunteers. However, lack of accessible vehicles may limit this option to those who do not use a wheelchair or are unable to transfer into an inaccessible vehicle.

- **Help for community organizations** to expand service.

  Increasing the supply of alternative services would address many of the limitations of existing paratransit services already noted. Assistance could take the form of providing retired
paratransit vehicles together with maintenance or operating assistance, or simply funding the purchase of new vehicles. Assistance with insurance issues would also be helpful.

- **Intelligent Transportation Systems (ITS) improvements** that enhance service in ways that go beyond requirements of ADA.

  Some ITS features, such as automated stop announcements, are being used to comply with ADA requirements (while also improving service for the general public). Others (such as automated vehicle location) are being used to improve the quality or efficiency of ADA paratransit and provide more accurate measures of service quality. Beyond these steps, ITS solutions can address issues that go beyond basic ADA compliance and service quality. For example, automated telephone technology or the Internet can be used to address the inconvenience for some riders of making reservations during regular business hours. Vehicle arrival notification, using automated phone calls or hand-held notification devices, might reduce the need to wait outside for a paratransit vehicle and reduce missed connections for passengers in large facilities or residential complexes.

- **Taxi discount or voucher programs**

  Taxi discounts would help address the lack of same-day paratransit and paratransit for people who are waiting for completion of their ADA paratransit eligibility applications. Discounted taxis can provide service at times when conventional transit service and ADA paratransit do not operate and for people with disabilities and seniors who are not ADA eligible but find transit unworkable for some trips. Taxis would provide direct rides for people who cannot endure occasional long paratransit ride times due to stops for other passengers. Taxi discounts can be provided using scrip, smart cards, vouchers, or electronic authorization by the subsidizing agency. In some parts of the Bay Area there are limited numbers of both accessible and non-accessible taxies. For this reason, the ability for wheelchair users to receive equivalent service will need to be addressed.

- **Sharing of provider training and methods** to improve paratransit service quality and consistency.

  Shared training on topics such as passenger assistance techniques, general principles of customer service, requirements of the ADA, ADA eligibility certification processes, complaint follow-up, coordinating transfers and multi-operator reservations have the potential to address customer issues with service quality and consistency. (Note that, to the extent such a project is limited to improving ADA paratransit service, it would not be eligible for New Freedom funding.)
• **Non-emergency medical transportation** for Medi-Cal patients and non-ADA eligible seniors and people with disabilities.

Numerous proposals for providing non-emergency medical transportation (NEMT) would require regional or state action. One thing that local providers can do on their own is become NEMT providers under existing Medi-Cal arrangements. This would address a lack of providers now available, improve access to medical care for people who have difficulty using ADA paratransit, and provide an alternative to ADA paratransit that provides a higher level of assistance, for example for dialysis patients. Since NEMT is free to the rider, this service would address issues of affordability related to frequent travel on ADA paratransit. Short-term medical transportation for non-ADA eligible seniors and people with disabilities is also needed.

• **Premium services** on ADA paratransit. Premium services could respond to desires for service that exceed ADA requirements. Examples include the following types of service:
  - **Service beyond the ADA-required three-quarter mile corridors around transit routes.** Some form of paratransit service beyond ADA-required areas would help people living in low-density and rural areas reach essential services.
  - **Service beyond the hours when transit routes are in operation.** Extended hours would help people who cannot drive and have no way to get around after transit (and therefore also ADA paratransit) stops running.
  - **Interim service in the period when ADA paratransit eligibility applications are pending.** Interim service would respond to needs of individuals when they first become disabled or are discharged from a hospital. Affordable, accessible transportation is generally not available before the individual is able to go through the process of obtaining ADA paratransit eligibility application materials and completing the application, and before the eligibility assessment process is completed. Under ADA regulations it can take up to 21 days to complete the eligibility process.
  - **Same-day requests.** Same-day service would respond to a need for trips to deal with non-emergency but urgent medical appointments requiring same-day attention.
  - **Seamless inter-jurisdictional and inter-agency trips.** Such trips would address issues related to uncoordinated fares, inaccessible transfer locations, and difficulty making reservations.
  - **Guaranteed exclusive rides with no stops for other passengers.** This feature would help riders who cannot tolerate long ride times, especially for long-distance trips.
  - **Intermediate stops** to allow passengers to stop en-route, for example to fill a prescription, without needing to wait for a second vehicle.
  - **Time-certain arrivals** for jobs, training, etc.
Fares charged for premium services could exceed those charged for ADA paratransit (“premium fares”). All of these service gaps can also be met by non-ADA services run by cities or community organizations. Many of these gaps can also be addressed with other solutions described in this section such as subsidized taxis and volunteer driver programs.

- **Feeder service** connecting to fixed-route transit.
  
  Feeder trips can be faster than shared-ride paratransit for certain lengthy trips and for some trips between paratransit service areas. This service, provided as an option for customers, is distinct from the mandatory feeder-service that ADA regulations permit operators to use as a service delivery method for certain passengers and trips.

- **Transfer assistance** or other measures to help with multi-operator paratransit trips and transfers between paratransit and fixed-route service.
  
  Trips between counties or other service areas, and in some cases within counties, are difficult to make because they often require transfers between operators. These trips may require more advance notice than other trips and may require multiple calls to make reservations. Problems with coordination of drop-off and pick-up at the transfer point inhibit travel and may result in individuals being stranded. Customers making connections between paratransit and fixed-route can also suffer from difficulties in coordination and would benefit from assistance in many cases. It may be most practical to provide transfer assistance at locations where staff is already present for other reasons.

- **Demand-responsive group shopping service**.
  
  A group shopping service would help people who can use transit for many trips, but cannot use it if they need to carry packages.

- **Incentives or assistance for taxicab companies to buy or convert accessible taxicabs**.
  
  Accessible taxicabs would extend the benefits of taxi discount programs to people who use wheelchairs (including larger wheelchairs and scooters) and cannot transfer to a typical automobile seat. Even without discounts, accessible taxicabs would expand the transportation options of wheelchair users. In practice, adding accessible taxis to a fleet and keeping them on the streets is a complex undertaking with several challenges that must be addressed for such efforts to be successful and be able to provide reliable service to customers. These include incentives for drivers to take on these routes (often such vehicles are not as fuel-efficient as standard vehicles in the fleet and don’t have alternative-fuel capabilities) and overcoming challenges in keeping such vehicles well maintained due to higher costs and heavy wear-and-tear on the equipment.
• Incentives or assistance to **improve the quality of taxi service** for people with disabilities and seniors.

The ability and willingness of seniors and people with disabilities to use taxicabs is limited not just by price and accessibility but by service quality issues, including driver training, passenger assistance, and reluctance to accept trips that require extra effort or may be perceived to be less likely to result in a tip. Local jurisdictions that regulate taxicabs do not always enforce existing local regulations and federal non-discrimination regulations.

• **Escorted travel** on paratransit.

Escorted travel can overcome difficulties faced by some people using ADA paratransit. Escorts could provide assistance beyond lobby areas of buildings for those who need it. For people who live in large complexes, escorts could address problems that occur when a paratransit vehicle cannot wait in front or in clear view of the customer’s front door. Escorted travel could also help people who currently miss return trips because they have difficulty finding and staying at a designated waiting spot. (Note, some volunteer driver programs also respond to this gap.)

• **Improved service quality measurement** with rider participation.

Programs that involve paratransit riders in measuring service quality can spot issues missed by traditional methods and increase consumer understanding of service delivery issues. Riders are provided with data collection forms and training about the importance of objective and complete observations. A neutral party recruits riders and compiles results with assured confidentiality.

### Additions or Improvements to Transit Services and Access to Transit

• **Infrastructure improvements** to improve pedestrian access, especially in the vicinity of transit stops.

Infrastructure improvement may include removing barriers on sidewalks, and improved or additional sidewalks, curb cuts, bus bulbouts, pedestrian crossings and signals (including audible signals and countdown signals), lighting, benches, shelters, and other pedestrian enhancements. Technological solutions akin to wayfinding devices might help blind people locate bus stops. These improvements would address problems that people have accessing transit service and also help people make some trips by walking. These improvements would help address traffic safety and fear of crime, bring existing facilities (in addition to key stations where accessibility is
mandated by ADA) up to ADA accessibility standards, and create accessible pathways to transit stops. Many of these improvements would involve working with local jurisdictions.

- **Pedestrian safety planning** and infrastructure improvements focusing on priorities for low-cost items such as retiming crosswalk signals and right-turn-on-red restrictions, as well as priorities for infrastructure improvements and targeted law enforcement in the vicinity of transit stops. Difficult street crossings and traffic conflicts are particularly dangerous for seniors and people with disabilities trying to use transit.

- **Transit information in accessible formats.**
  Transit routes and schedules can be hard to read for people with limited vision and can be confusing for people unfamiliar with transit. Making information, including real-time information, available in a wider variety of formats, standardized among transit systems, would help many older people and people with visual disabilities. More information or signage regarding the escalator and elevator status at transit stations would help some travelers better plan their trips.

- **Restoration of fixed-route transit services** in areas where service has recently been curtailed or eliminated.
  Reductions in transit service levels (frequency or hours/days of operation) can impact both fixed-route and ADA paratransit users. Many stakeholders spoke of the need to restore these services where they are most needed before new or expanded services are added.

- **Expanded fixed-route transit services** in areas with limited or no existing public transit services, nights and evenings, and on weekends.
  Limited service in some low-income areas and low-density areas makes it difficult for low-income persons, seniors, and people with disabilities to travel. Limited evening and weekend service is widespread.

- **Better connections between transit systems** especially where these are needed to reach regional medical facilities and county offices.
  Limited or uncoordinated schedules and physical issues at transfer points make it difficult to reach regional facilities and county offices. This is particularly true where counties are served by multiple transit operators (such as Contra Costa, Solano, Sonoma, eastern Alameda, and rural portions of San Mateo and Santa Clara counties). Connections between counties and between buses and regional rail services also pose barriers to reaching important destinations.
Coordination measures may include coordinated schedules, schedules that take into account time limitations of people making long trips, accessibility improvements at transfer points, restrooms at transfer points, and improved signage.

- **Increase awareness of wheelchair securement issues** among transit and paratransit riders. Many riders, suppliers of wheelchairs, and medical professionals who recommend or specify wheelchairs are not aware of options for mobility devices that are safe to use on public transportation. (Better cooperation among these groups may require regional or higher-level strategies.)

- **Transit safety education**
  Presentations by police officers to senior groups, in conjunction with transit agencies, can provide tips for riding transit safely and may help allay fears about crime on transit.

- **Senior-friendly shuttles**, jitneys, or circulators to shopping, medical facilities, and local services, including flexible route services.
  These services can help address some of the needs for short notice or spontaneous travel that are difficult using next-day ADA paratransit reservations. They can help address the travel needs of seniors who no longer drive but are not ADA paratransit eligible. They may accommodate riders with wheelchairs or shopping carts more easily than conventional transit services. Assistance with grocery bags would help people who can use fixed-route transit for most trips, but cannot use it if they need to bring home packages.

- **Targeted transit route and stop adjustments** to assist seniors and customers with disabilities.
  Scheduled variations in transit routes (such as commonly provided for schools or large employers) and locating bus stops based on the needs of seniors and people with disabilities, can make fixed-route service more usable and reduce dependence on paratransit. Paratransit ride data may show the locations of common destinations that customers could access by conventional transit service with minor adjustments in routes or schedules.

- **Provide additional bus pass vendor outlets**.
  Many transit users reported that it was difficult to purchase some types of fare products and that vendor locations were not conveniently located. Transit agencies could work to expand the reach of vendors of their fare products targeting those who buy discounted passes and other products.
• **Additional wheelchair spaces** on transit vehicles.

On some routes that are popular with customers who use wheelchairs (including larger wheelchairs and scooters), lack of wheelchair spaces is an issue. A particular priority would be routes with long intervals between buses where waiting for the bus is a hardship. Impacts on other customers, for whom space may also be an issue, would need to be considered.

• **Additional driver training** on accessibility issues and features.

Passengers with disabilities continue to report difficulty related to proper securement and being passed up at bus stops. Aside from discouraging pass-ups and training drivers on proper mobility aid securement, training could address advising passengers about the reasons for pass ups and arranging for back-up transportation when appropriate. (A regional strategy related to wheelchair securement may also be needed.)

• **Targeted law enforcement** to improve pedestrian safety near transit stops in areas of special concern to low-income communities, older people, and people with disabilities.

Crosswalk violations, parking violations, and occasional dangerous behavior by bicyclists and skateboarders, especially in the vicinity of transit stops, make it harder for many, especially older people, to use public transportation. Parking violations limit the ability of buses to pull up to the curb, making it difficult for older people and people with disabilities to board. Such law enforcement efforts could also include education or raising awareness of bicyclists and skateboarders about the impact to these activities on seniors and persons with disabilities.

• **Courtesy or flag stops** for people with disabilities.

Long distances between bus stops (such as on bus rapid transit lines), often implemented to speed bus operation, may prevent people with disabilities from using bus service. Allowing passengers to “flag down” a bus between marked stops, or allowing passengers on a bus to request a “courtesy stop” between marked stops can address this issue. While some transit systems in low-density areas may permit drivers to use their judgment to identify safe stopping locations, others may need to develop more detailed policies or specific safe courtesy stop locations. Practical policies would be needed about which passengers can request stops.
Solutions to Address Affordability Barriers

- **Bicycle assistance and safety training.**
  For those who are able to use bicycles, they are a flexible and affordable way to improve access and provide great mobility to users. As more transit systems improve their bicycle storage and carrying capacity, bicycles can be a valuable solution to the “last mile” gap in accessing transit. Programs that offer low-income clients new or rehabilitated bicycles can also offer safety and maintenance training to users to help them. For older adults, three-wheeled cycles can offer greater stability and security while providing an affordable and active form of mobility.

- **Auto loan programs** for low-income families/individuals.
  The high cost of owning and maintaining automobiles is another frequently cited transportation barrier for low-income families and individuals whom public transit does not serve with adequate frequency or coverage. Auto loan programs help provide low-interest loans to qualified program participants to assist with the costs of purchasing or repairing automobiles.

- **Offer or expand car sharing** for low-income families/individuals.
  Private car-sharing organizations, both non-profit and for-profit, are becoming an increasingly prevalent, affordable alternative to the high up-front and operating costs associated with car ownership. However, outreach in some Community Based Transportation Plans revealed that car-sharing “pods” (locations where vehicles are stored and available for use) are not always available in low-income neighborhoods.

- **Discounted transit fares beyond those already provided for seniors and people with disabilities.**
  This could also take the form of free transit during off-peak hours for riders with an ADA card, or very low-income riders with a Regional Transit Connection Discount Card. In the case of riders with an ADA card, the offer could extend to personal care attendants. Even with available discounts using the Regional Transit Connection Discount Card, fares can still be a problem for some people, especially for long trips involving zone fares or multiple operators. Even for trips on a single operator, very long trips can require multiple fares because of transfer time limits. An additional discount for ADA paratransit eligible riders may also be useful to encourage those with conditional eligibility to use fixed-route transit whenever possible.

- **Discounted transit fares or other subsidies for adults and youth with limited incomes.**
  The high cost of transit fares and passes, particularly for low-income, transit dependent families with children, is a recurring need that arises in Community Based Transportation Plan outreach.
FTA funds are generally not able to subsidize transit fares directly, but in some cases can support marketing of discounts or vouchers. Many social service agencies already provide free or discounted tickets or passes to eligible clients to participate in program activities, but growing funding constraints are putting more pressure on transit agencies to provide such discounts directly to consumers. However, eligibility determination and delivery of discounts might be carried out, the costs to transit agencies of subsidizing such discounts would be very high, and implementation would be a challenge given each operator sets its own fare policies and do not have mechanisms in place to means-test customers for the purposes of determining potential discount eligibility. MTC has already committed funding as part of the Third Cycle Lifeline Transportation Program to study the issue further at the regional level with the goal of identifying what steps could be taken by transit operators to rationalize the provision of discounted fares in the region to best target those with the greatest need, and what institutional barriers would need to be addressed and how to administer and provide such discounts.

- **Discounted paratransit fares** or other subsidies for people with limited incomes.
  Paratransit fares can be a significant issue for people with limited incomes, especially if they have high medical expenses or need to make frequent trips or use multiple systems requiring multiple fares. Discounted paratransit fares could be provided for people already on other means-tested programs. Subsidies for customers facing hardship could be provided through a non-profit organization.

**Other Solutions**

- **Training for older drivers**
  Training for older drivers may include components to increase awareness of public transportation options, how to ease the transition from driving to alternatives, and how to maintain safe driving skills. This may include partnering with existing providers of older driver training to incorporate transit familiarization into these programs.

- **Partnership with the DMV to assist people** who have just lost their licenses by providing information and assistance.
  Seniors who may need to begin limiting their driving, or who have had their license rescinded, may be afraid to try transit because they don’t know how to use it or because they have unrealistically negative perceptions of transit service. Cooperation with the DMV could help steer older people to needed assistance at the moment when license restrictions are imposed.
• Funding for the development of emergency planning and evacuation training programs.
In the past there has been a lack of specifically designated funds for emergency planning and evacuation of people with disabilities who may not be able to be transported by typical means used in large-scale evacuations.

• Funding for specific technological improvements such as mobile phones with GPS devices, or specialized smartphone applications.
Current funding parameters do not accommodate technology that could be useful for improved service delivery, to address problems such as locating riders at large complexes. Such technology could improve the customer service experience and reduce wait time for passengers on shared-ride services.

• Funding assistance for items such as fuel purchases or more energy-efficient vehicle purchases.
Fluctuations in fuel prices can have significant impacts on service providers, especially smaller providers and non-profits. It may also be challenging for smaller service providers to convert to more efficient or alternative-fuel vehicles when fuel prices rise or they lack access to alternative-fuel infrastructure. Current Federal and State contracts provide a limited range of vehicles for volume purchasing at discounted rates.

• Wheelchair breakdown service that would provide a ride home or to a repair facility for wheelchair users experiencing mechanical problems with their wheelchairs.
Such a service is lacking in many areas, and would provide an extra measure of confidence to enable wheelchair users to rely on fixed-route public transportation instead of paratransit.

• Localized mobility device-sharing programs
While it is common to see mobility devices offered to customers as a courtesy in large stores or shopping malls, no such amenities typically exist for seniors or people with disabilities accessing pedestrianized shopping areas in urban or town centers. In the United Kingdom, a national non-profit, the National Federation of Shopmobility, through affiliated local chapters, sponsors the provision of mobility devices such as scooters and wheelchairs and other amenities from a centralized location to enable those with mobility limitations to access all their shopping and other destinations within the district. Such a model could be piloted and tested in the Bay Area, either by a city, a business improvement district or association, or by a non-profit working in partnership with either or both of these.

Mobility device-sharing programs may also include programs that provide access to devices while the users own device is being repaired or replace.