
IV. *Research*

Research

In order to fully understand the issues and influences that transportation has on the quality of life in Allegany County and to successfully design, implement, and evaluate the Allegany County Coordinated Public Transit-Human Services Transportation Plan, the Allegany County Transportation Task Force will apply a systematic, multifaceted approach to its research. ACTTF will conduct both primary and secondary research, gathering both quantitative and qualitative data, and act upon its findings accordingly.

Qualitative research involves an in-depth understanding of **human behavior** and the **reasons** that govern human behavior. Qualitative research appears in words rather than numbers and is useful for collecting information about feelings and impressions.

Quantitative is designed to count and measure knowledge, attitudes, beliefs, and behaviors; yields numerical data that is analyzed statistically.

Secondary research involves obtaining, synthesizing, and analyzing existing data about the problem statement and/or the population it effects. Secondary research will include, but not limited to:

- Published literature and journal articles,
- Public and private transportation provider annual reports
- Legislation and policy reviews
- Local Community Needs Assessments

Primary research is the process of collecting one's own data, from designing the method of data collection through analysis and reporting on the new information. Primary research will include, but is not limited to:

- Current local transportation system analysis
- Focus Groups
- Community Surveys
- In-depth Interviews
- Concept Mapping
- SWOT Analysis

The following section will detail the various research strategies and methodologies that the Allegany County Transportation Task Force will conduct to complete this phase of the Plan. As research is conducted, supplemental information will be added to the report.

A. Needs Analysis

A preliminary needs analysis was performed by ACTTF during the Transportation Stakeholders Meeting attended by 35 representatives from the following sectors: Health and Human Services, Allegany County Government, Local Government, Allegany County Transportation Providers, Representatives from Steuben and Yates County Transportation Planning and Allegany County Planning. During this meeting two activities were performed. Concept Mapping identifying the impact of a Coordinated Transportation System ([Appendix Concept Mapping](#)) and Needs analysis for the ideal coordinated transportation system ([Appendix Visioning Session](#)).

From these activities the need for a coordinated transportation plan was most supported by its cost effectiveness, increase in services, economic benefits and possible funding opportunities. Eight workgroups were comprised to identify key elements for inclusion in the ideal coordinated transportation system. In addition to the continuation of the Allegany County Transportation Task Force serving as a guiding force along with needs for funding for the activities of data collection, analysis and management of the plan and application there of, the workgroups concluded the following needs for the transportation system.

The elderly followed by those either employed or seeking employment were supported as having the highest ranked need for transportation services. Medical and social needs of consumers should be met followed by the needs of employees and those seeking educational services. Seven of the eight workgroups concluded that increased quality of service should be the primary focus to promote increased ridership of public systems. Finally, each of the workgroups concluded that the system would require a financial sustainability plan along with brains and vision for management.

B. Unmet Needs Analysis

The continued funding of replacement vehicles for Allegany ARC and ARA as needed are the highest priority need identified for FTA (5310) programs. The continuation of those services are significant elements in meeting the transportation service needs of Allegany County residents faced with mental or physical disabilities. Allegany County's existing public transit service also provides a significant level of transportation service to County residents. The current levels of FTA and NYSDOT funding are critical to maintaining those services. The Plan assumes that current funding of replacement vehicles and operating assistance levels funded by the FTA and NYSDOT (not from the Section 5310, 5311, and 5316 programs) continues to be available.

A preliminary unmet needs analysis (Appendix Unmet Needs) was performed by ACTTF. Surveys were completed by 13 Human Service Agencies as to their consumers unmet transportation needs. The three highest indicated needs are as follows: 85% Lack of access due to geographic location; 69% Lack of services available to needed areas; and 69% Limitations of service times.

One of the most significant populations identified with unmet needs to date has been residents living in remote areas as well as those seeking employment and higher education services. Funding to expand those services may be needed in the near future.

ACTTF will collect more thorough data pertaining to consumers unmet needs from additional sources via surveys and focus groups. Target populations to be accessed include but are not limited to: Public Transit users, Non Public Transit users, Employers, and Senior Citizens. GIS mapping of existing transit service will be utilized to give further detail as to service area duplication that has potential to be reduced as well as geographical gaps in service areas.

C. SWOT Analysis: Strengths, Weakness, Opportunity, Threat

A SWOT Analysis is a strategic planning tool used to evaluate the **Strengths**, **Weaknesses**, **Opportunities**, and **Threats** involved in a project or in a business venture. It involves specifying the objective of the business venture or project and identifying the internal and external factors that are favorable and unfavorable to achieving that objective. SWOT is defined as:

- * **Strengths:** attributes of the organization that are helpful to achieving the objective.
- * **Weaknesses:** attributes of the organization that are harmful to achieving the objective.
- * **Opportunities:** *external* conditions that are helpful to achieving the objective.
- * **Threats:** *external* conditions that are harmful to achieving the objective

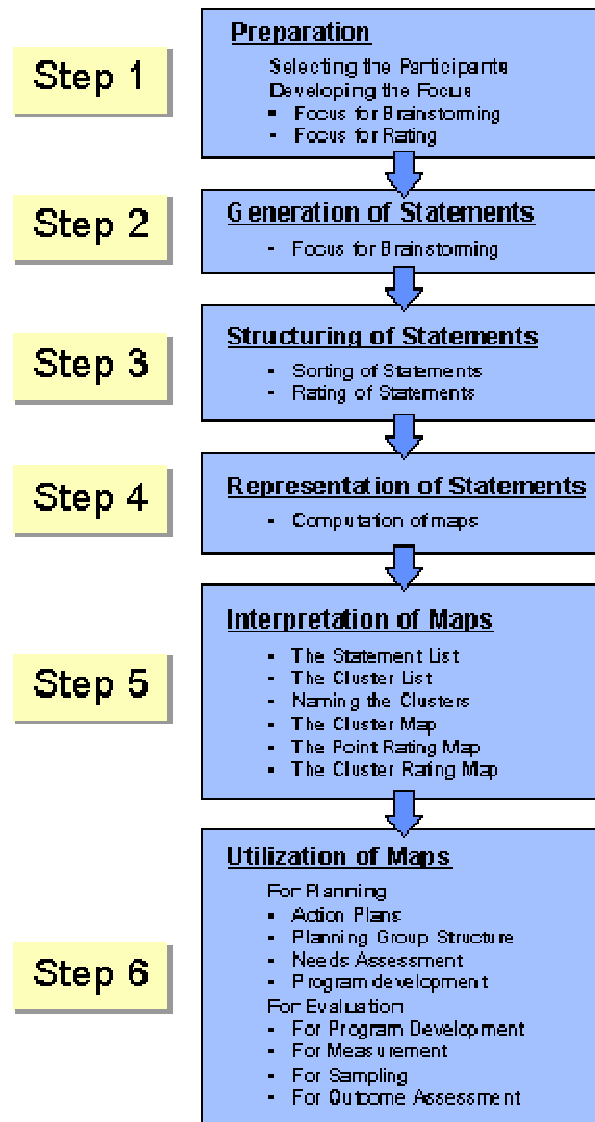
The Allegany County Transportation Task Force conducted a SWOT Analysis* on May 3, 2007 with key stakeholders with the following results:

<p style="text-align: center;"><u>Strengths</u></p> <ul style="list-style-type: none"> • Use of Friendship House is free, accessible, and well established as a resource center • Adult Education Task Force • Recent research conducted by some Task Force members • Online resources and models from other successful rural transportation projects, i.e. the <u>Toolkit for Rural Community Coordinated Transportation Services</u>. • Formal partnerships with local human service agencies • Wheels for Work and Allegany County Transit programs • The Federal funding/grants already in existence in addition to research at the Federal level to support the development of rural transportation programs, i.e. Job Access Reverse Commute (JARC); the Low Income Car Ownership clearinghouse (LICO) and the CAR Act (Creating Access to Rides) of 2005 	<p style="text-align: center;"><u>Weakness</u></p> <ul style="list-style-type: none"> • Limited resources • Task Force still in its infancy (Forming/Norming) stage • Some key players/stakeholders are missing • Reliable funding and sustainability • Confusing regulations in applications for funding and partnership
<p style="text-align: center;"><u>Opportunities</u></p> <ul style="list-style-type: none"> • Support from educational institutions • Expanding partnerships/bringing in key stakeholders • Experienced grant writers amongst task force members • Increased transportation funding • Increased trip cost efficiencies for programs and providers • Expanded travel • Service quality improvement 	<p style="text-align: center;"><u>Threats</u></p> <ul style="list-style-type: none"> • Turfism • Bureaucracy • Lack of motivation/commitment • Lack of leadership • “Spatial mismatch of labor supply and demand” (Summers, 1986) • Outreach to individuals who may be reluctant to use public transport because of the associated stigma • Program by program variations in elig for services • Billing, accounting, recordkeeping and reporting • Funding issues, including differing matching ratios and funding cycles • Service regulation such as prohibitions on crossing local or state boundaries

* See the “Research Section” of the Work Plan – SWOT Analysis; for next steps.

D. Concept Mapping

Dr. William M.K. Trochim, Cornell University, defines concept mapping as a type of structured conceptualization that can be used by groups to develop a conceptual framework that can guide evaluation or planning. In the typical case, Dr. Trochim establishes that six steps are involved:



The Allegany County Transportation Task Force has started to initiate Concept Mapping*, along with the additional research strategies outlined and described within this document, to help identify and establish a conceptual framework for its Coordinated Human Service Transportation System. A Key Stakeholders meeting was held on June 18, 2007 with representatives from all sectors of Allegany County. The results of the meeting will be used in the Concept Mapping Process.

* See the “Research Section” of the Work Plan – Concept Mapping; for next steps.

E. Asset Mapping of Current Providers

1. Inventory of Services and Resources

In order to identify the multitude of community assets currently existing in Allegany County; ACTTF will conduct a Transportation Services Inventory to examine the three key components of the transportation system; human services transportation providers, public transit, privately owned, and neighboring counties transportation providers. This exercise will allow ACTTF to review the strengths existing in Allegany County in relation to transportation services. This information will assist in the development of the plan’s design, implementation and on-going evaluation.

Asset mapping:

- Focuses on effectiveness and strengths of current services and the community
- Builds interdependencies
- Identifies means people and/or organizations can give of their talents, skills and resources
- Seeks to empower communities to address critical issues

Once we know the full breadth of people, organizational, and institutional resources that exist in the community, we can then move in the direction of identifying gaps in the current transportation system. Thus, as priorities “needs” are uncovered, we have excellent information about the rich pool of people and groups available to elicit for ACTTF membership.

Currently, the following transportation providers have been identified through preliminary research:

Human Services Transportation Providers	Public Transit/ Privately Owned	Neighboring Counties Transportation Providers
ACCORD Corporation <ul style="list-style-type: none"> • Head Start • Early Head Start • Wheels to Work Program 	Allegany ACT	American Cancer Society- Finger Lakes Region
Allegany County Office for the Aging		Faith in Action- Steuben County
Allegany County Arc		Hornell Area Transit (HAT)
Allegany County Department of Social Services		Veterans’ Administration
Allegany Rehabilitation Associates (ARA)		
Home Care & Hospice		
Salvation Army		

As future transportation providers are identified or services are modified, information will be updated to the Transportation Services Inventory list in the Plan.

*** See the “Research Section” of the Work Plan – Asset Mapping; for next steps.**

Human Services Transportation Providers

Allegany Arc

240 O'Connor Street, Wellsville, New York 14895

585-593-5700

Email: communityrelations@alleganyarc.org

Website: www.alleganyarc.org

Allegany Arc

The Allegany Arc provides transportation for individuals with disabilities. The transportation department is a NYSDOT approved contract carrier that consists of 7 fixed run bus routes. These routes serve most of Allegany County on a Monday through Friday service schedule. The Allegany Arc transportation department also provides service through contracts to organizations, which include health care services, human service agencies, and County funded programs. The department also provides shuttle services for County events such as the Allegany County Fair, Wellsville Balloon Rally, and Andover Maple Festival. The Allegany Arc provides approximately 75,000 rides annually; including 4500 contracted rides and travels over 335,000 per year.

**Allegany County Community Opportunities and Rural Development
ACCORD Corporation Head Start and Early Head Start
PO Box 573, 84 Schuyler Street, Belmont, NY 14813
585-268-7605
Website: www.accordcorp.org**

Head Start and Early Head Start

Allegany County Community Opportunities and Rural Development (ACCORD) Corporation is a non-profit community action agency serving Allegany, Cattaraugus, and Wyoming Counties for over 35 years. ACCORD provides Head Start and Early Head Start services to children and families in Allegany County. Head Start is a comprehensive child development program for at risk children and families, which includes home and center based educational components; mental health and disabilities services; health and nutrition services; and family and community partnership services. ACCORD operates center-based programs in agency owned centers in Wellsville and Friendship and school based centers in Bolivar, Cuba, Genesee Valley, Rushford and Wellsville and serves families from across the county in the home based program option.

The Head Start and Early Head Start programs consider student transportation between home and the center sites as an integral part of the program to assist in meeting family needs. ACCORD owns and operates a total of nine buses used to transport children to and from center based programs as well as to transport children and their families to socialization events, field trips, policy council meetings and parent committee meetings.

Allegany County Community Opportunities and Rural Development
ACCORD Corporation Wheels to Work Program
PO Box 573, 84 Schuyler Street, Belmont, NY 14813
585-268-7605
Website: www.accordcorp.org

Wheels to Work

A vehicle loan to assist TANF or TANF qualified individuals with the purchase of a vehicle essential for transportation to their workplace. Maximum loan is \$3300. Current funding from the NYS Office of Temporary and Disability Assistance allows for 12 loans to be made in Allegany and 12 loans in Cattaraugus County. Community Solutions for Transportation funding by the Allegany Department of Social Services allows for an additional eight loans to be made to Allegany County residents. Applicants must be able to meet the following criteria and attend three seminars on car maintenance, personal finances, and safe driving.

Wheels for Work Eligibility criteria: United State citizen or qualifying TANF alien; Resident of New York State; TANF or TANF qualified individuals (income less than 200 percent of poverty level); Employed and in need of a vehicle for transportation to work; Pregnant woman or minor child in the household or non-custodial parent; Loan repayment ability.

Allegany County Department of Social Services
County Office Building, 7 Court Street, Belmont, New York 14813
877-629-8104
Website: www.alleganyco.com

Allegany County Department of Social Services

All Medicaid applicants/recipients will receive notification regarding medical transportation at the time of application and recertification.

DEFINITIONS

Should definitions be required for terms not included below, the source for such definitions should be the Section 505.10 of the Social Services Regulations.

Advance notice for transportation is required at least two business days (before 2 p.m.) in advance of a Medicaid service. When this advance notice cannot be given, such as in an urgent care situation, the ACDSS Medical Transportation Unit (MTU), attempt to arrange transportation, but cannot guarantee the ability to do so. In general, an intake will not be processed with less than two business day's notice; urgent care appointments are an exception.

Eligible recipients are people who are Medicaid eligible at the time of the request. Provisional coverage does not constitute Medicaid eligibility. The need for transportation must be established via the Intake Form. Allegany County Medicaid nursing home residents are deemed eligible for transportation services. If an applicant is determined to be ineligible for transportation services, ACDSS will send a locally designed denial notice. In unusual circumstances in which an applicant appears to be Medicaid eligible and the need for medical treatment is extreme, the Department may deem a person eligible for transport prior to the actual date of determination. (Examples of extreme medical need include dialysis, chemotherapy, and radiation therapy.) All such decisions are made on a case-by-case basis and require the express approval of appropriate Department supervisory staff.

Emergency ambulance transportation means the provision of ambulance transportation for the purpose of obtaining hospital services for a recipient who suffers from a severe, life-threatening, or potentially disabling condition that requires the provision of emergency medical services while the recipient is being transported. Emergency transportation is usually obtained through a 911 call.

Emergency medical services mean the provision of initial urgent medical care including, but not limited to the treatment of trauma, burns, and respiratory, circulatory, and obstetrical emergencies.

Medicaid services are those services that are eligible for Medicaid reimbursement. If an individual provider is eligible for but refuses to accept Medicaid payments, the service will still be considered a Medicaid service. Medicaid will NOT pay for trips to grocery stores, court-ordered evaluations, social model day care for adults, day care for children, visitation with family members, AA meetings, TASA related services, employment and training programs, HLA blood testing for paternity, etc. If there is any question about a destination, consult the ACDSS Medical Transportation unit.

Non-emergency ambulance transportation means the provision of ambulance transportation for the purpose of obtaining necessary medical care or services to a recipient whose medical condition requires transportation by an ambulance service. The ordering medical professional makes this determination.

Non-emergency medical transportation means all trips that do not require emergency care and are not the result of an accident or emergent illness. This may include transportation provided in a range of vehicles, such as private automobile, bus, taxi, or ambulance service.

Prior approval means the specific approval of the ACDSS Medical Transportation Unit for medical transportation. Such approval may be requested and/or provided either for individual, specific appointments, or blanket approval for a number of appointments. All medical transportation must have prior approval, except in cases documented as bonafide emergencies.

Routine, service area requests are defined as timely requests for non-emergency medical transportation within Allegany County and contiguous counties, or Buffalo, Rochester, or Erie, PA.

Service area means Allegany and the contiguous counties (Steuben, Wyoming, Livingston, Cattaraugus, Potter, and McKean counties). Also included are Buffalo, NY, Rochester, NY, and Erie, PA.

Urgent care includes illnesses or injuries for which emergency care is not required, but in which a person should be seen by a medical practitioner at the earliest possible convenience. This includes visits scheduled on the same or next day due to sickness. ACDSS or its agent will verify the date and time that the appointment was made with the medical practitioner.

GENERAL OPERATIONAL INFORMATION

All medical transportation, except for bonafide emergency, requires prior approval by the ACDSS MTU. This prior approval includes verification of Medicaid eligibility and determination of mode of transport. Possible modes of transportation include but are not limited to: ambulance/stretchers transport, wheelchair transport, taxi, fixed route bus, other provider, provider and private vehicle. Medical transportation on weekends, evenings, and holidays is limited and requires administrative approval.

Transportation to and from Medicaid services must receive prior approval by the staff from the ACDSS MTU, whose staff will review and approve or deny routine service area requests (see definition).

When a Medicaid recipient requires emergency (see definition) ambulance transportation from the hospital to another facility, hospital staff will make arrangements for such ambulance transportation, with the bill for this service sent directly to ACDSS. Again, emergency transports do not require prior approval. The same information is required as in any request and must be verified by the hospital personnel. All air transport requests and billings will be reviewed by administration. If hospital or nursing home staff make arrangements for ambulance transport for non-emergency situations without prior approval from ACDSS, the hospital or nursing home making the arrangements is responsible for payment for this service.

TRIPS ELIGIBLE FOR MEDICAID REIMBURSEMENT

Medicaid incurs responsibility for payment only for trips made to and from a Medicaid service (see definition).

In addition, ACDSS MTU will generally only assume responsibility for trips within the service area (see definition). Trips outside this area require a written statement from the referring physician that the medical service is not available within the service area. Recipients who choose to travel outside the service area without such documentation and prior approval are personally responsible for the costs of this transportation.

ACDSS is responsible to assure that recipients can access medical services, but not necessarily to pay for the transportation. The costs of Medicaid transportation will be covered under the following conditions.

- Transportation will be arranged for MA recipients who provide advance notice (see definition) and receive prior approval (see definition). All appointments must be confirmed on a doctor's pre-printed prescription pad, with the date and time of appointment noted. This documentation must be submitted to the transportation provider on the return trip. Failure to provide documentation of the medical appointment will result in the Medicaid recipient being charged for the cost of the trip, regardless of mode of transport. Transportation provided may include any or all of the following:
 - Fixed route bus. Ambulatory Medicaid recipients are expected to walk up to one-mile to/from their home or their Medicaid service provider to access a fixed route bus. Exceptions to this one-mile rule are made on a case-by-case basis. ACDSS MTU
 - Curb-to-curb service. Medicaid recipients living beyond one mile from a fixed route bus will be eligible for curb-to-curb service from their homes. The same is true for Medicaid recipients who are traveling to service providers' offices that are more than one mile from a fixed route bus. This special pick up/drop off may be provided by detour of a fixed route bus, taxicab, or by other special arrangement for this purpose.
- If a Medicaid recipient owns a car that is licensed, registered, and road-worthy, (s) he is expected to use this vehicle for medical transportation. Similarly, if the recipient has regular and consistent access to private transportation, (s)he is expected to use this for medical transportation. The Transportation Provider MA recipients who transport themselves will be eligible for reimbursement by DSS MTU, under the following terms and conditions.
- Requests for reimbursement must be made directly to DSS MTU, and must be accompanied by the following:
 - Confirmation of each appointment on a doctor's pre-printed prescription pad, with the date and time of appointment noted.
 - Completed ACDSS voucher.
- There will be no reimbursement for the first 100 miles traveled in any given calendar month.
- After the first 100 miles, reimbursement will be made at 20 cents per mile from the MA recipient's residence to the service provider and back, plus parking and tolls as documented by receipt, OR the cost of public transportation for such trip, whichever is the lower cost.
- All vouchers must be mailed to:
 - Allegany County Department of Social Services
 - Medical Transportation Unit
 - 7 Court Street
 - Belmont, NY 14813-1077
 - Payment will be mailed from ACDSS.

When MA recipients must travel in excess of 55 miles (one way) to a medical service, it is possible to receive reimbursement directly from ACDSS for other related expenses. Such requests must be approved in advance by ACDSS, and are limited to the items detailed below. These costs may be paid for the MA recipient, his/her required attendant (one attendant), or his/her member of the immediate family providing transportation. Receipts must be submitted to ACDSS along with the request for payment.

- Meals: Breakfast \$2.50 maximum
 Lunch \$3.50 maximum
 Dinner \$5.00 maximum
- Lodging: As determined on a case-by-case basis.

In order to ensure timely transportation to obtain prescriptions (medications and/or durable medical equipment), Medicaid recipients are expected to use a pharmacy or other provider close to either the doctor's office or their homes. Recipients are expected to ask the doctor to phone in a prescription at the time of the appointment; this will help protect against unnecessary transportation delays.

ARRANGING FOR MEDICAL TRANSPORTATION

The ACDSS MTU is solely responsible for prior approvals of medical transportation. If a request for medical transportation is received by staff in the Temporary Assistance or Child Support unit, the person needing the transportation should be directed to call the Medical Transportation Unit. If a Caseworker or Senior Caseworker in the Services unit receives a request for medical transportation, the worker receiving the request should document as much information as possible, and submit that information to the Medical Transportation Unit for approval/denial and transmission to a provider.

The ACDSS MTU will verify Medicaid eligibility via the WMS system prior to approving medical transportation. (Eligibility for other services does not guarantee MA eligibility.)

Last minute urgent care appointments must be discussed with a manager for consideration of approval. Although CDSS MTU will attempt to arrange for transportation to and from such appointments, there is no guarantee that such arrangements will be made.

Recipients may be asked to reschedule non-emergency appointments to coincide with other planned transports. The ACDSS MTU will assist with this when necessary.

Medical transportation providers will wait up to five minutes for any rider. If a rider delays more than five minutes, we will assume that the ride is no longer needed. We require a doctor's statement stating the medical reason for an attendant to accompany.

Should an MA recipient have any limitations that may affect his/her ability to travel, those limitations must be made known at the time that transportation is requested. This includes requests for an aide or attendant (one aide/attendant per recipient). Children under 16 years of age must have written parental consent to ride unattended. We require a doctor's statement stating the medical reason for an attendant to accompany.

Blanket Approvals

If a blanket approval is granted, documentation must be maintained of the start and end dates. Blanket approvals may be authorized for a maximum of six months. The documentation must also indicate the type(s) of service(s) covered by the blanket approval, for example: ARA, dialysis, physical therapy, or cancer treatment. It is the MA recipient's responsibility to contact DSS MTU regarding transportation arrangements for the approved service(s) during the approval period. Medical appointments not noted as included in the blanket approval require per-appointment approval. (Example: John Jones has a blanket approval for participation at ARA. He needs to see a dentist. He must call the ACDSS MTU and receive a separate approval for transportation to/from the dental appointment.)

Blanket approvals are generally only granted for such ongoing, regularly scheduled medical appointments as the types noted above. Requests for a wider variety of medical care require the express approval of the ACDSS MTU.

If a recipient abuses a blanket approval (e.g. no shows), the person's blanket approval will be rescinded, and (s) he will revert to per-appointment approval.

Confirmation and Cancellation

All Medicaid recipients must call the ACDSS MTU, between 2:00 and 4:00 pm the day before a scheduled trip to confirm the appointment and verify pick up and return times (see Steps to Arrange for Transportation below). Failure to confirm the appointment in this manner cancels the ride. Recipients must also call the ACDSS MTU to cancel any ride if they are unable to take a scheduled trip.

In limited instances, such as dialysis patients, the Transportation Coordinator will notify the recipient that (s) he does not need to confirm each trip, but rather only confirm changes or cancellations.

If a recipient does not have a telephone, or otherwise has a legitimate reason for not being able to confirm an appointment, this must be stated at the time of requesting transportation. The Transportation Coordinator on a case-by-case basis will make determinations. If an exception has been made for a recipient that allows him/her to not call to confirm the appointment, and (s) he subsequently abuses the privilege by not being available for the appointment, the privilege may be revoked.

Recipients who fail to meet their ride as confirmed must discuss the no show with an approved ACDSS staff as outlined below.

No Shows and Other Problems

To help ensure wellness among Medicaid recipients, strong positive relationships between the ACDSS and medical practitioners, and cost effectiveness for the medical transportation providers, it is important for Medicaid recipients to follow through on all scheduled appointments. The ACDSS has therefore instituted a policy to encourage this follow through and eliminate no shows.

Similarly, to protect other Medicaid recipients, transportation providers, and other interested parties, it is important for all Medical transportation users and providers to conduct themselves in a safe and responsible manner during all transports. Examples of unsafe and irresponsible behavior include but are not limited to: use of profanity or other offensive language, verbally or physically threatening a driver or rider, language or behavior of a sexual nature toward a driver or rider, and any criminal behavior.

Further, on occasion, despite reasonable precautions, physical accidents that actually or potentially result in injury occur.

For the purposes of this section, all of the above problems will be referred to as incidents. The procedures that follow will be used in the handling of incidents. ACDSS reserves the right to skip any step(s) in this procedure in response to a more serious incident.

1st incident

- Transportation Provider provides ACDSS with a written incident report.
- If a rider problem, ACDSS sends standard letter, reinforcing follow through and informing the recipient that future incidents will require a face-to-face discussion with ACDSS staff.
- If a provider problem, the ACDSS MTU discusses problem with provider, including plan to avoid future problems.

2nd incident

- Transportation Provider provides ACDSS with a written incident report.
- If a rider problem, ACDSS contacts recipient (by phone, if possible) scheduling face-to-face interview. Interview discussion includes importance of appropriate behavior while receiving medical transportation and outcomes of failure to comply. Recipient receives written notice at time of interview.
- If a provider problem, ACDSS MTU meets with the provider, requiring a written corrective action plan.
- Date of interview must be documented.

3rd incident

- Transportation Provider provides ACDSS with a written incident report.
- If a rider problem, ACDSS requires face-to-face meeting with recipient prior to any more medical transportation trips. Meeting again stresses importance of appropriate behavior, and outcomes of failure to comply. Notice includes Fair Hearing information.
- If a provider problem, ACDSS MTU sends provider notification of cancellation of qualifications.

Trips Outside the County

Most travel to Buffalo, Rochester, Gowanda, and other cities outside Allegany County will be limited. Travel to each of these cities will be arranged a maximum of two days per week. Medicaid recipients are required to make their appointments in these areas on the days that transportation is scheduled to them; if the recipient is unable to schedule his/her appointment on one of those two days, (s) he must discuss this with the ACDSS MTU. The need for additional transportation will be made on a case-by-case basis.

We need a statement, preferably via fax, from the recipient's physician stating the medical reason why the patient cannot be treated in our common marketing area.

Trips will be made to Buffalo and Rochester on Tuesdays and Thursdays, and to Gowanda on Mondays and Wednesdays. Transportation Providers will make trips to these cities each of the noted days, based upon documented need. Riders traveling to these more distant locales will travel as a group, and should therefore be prepared for meal times, extended wait times, etc.

These schedules are subject to modification.

Steps Needed in Arranging Transportation

1. Medicaid recipient seeking medical transportation contacts ACDSS MTU for prior approval at least two business days in advance of appointment. ACDSS MTU will complete an Intake Form.
2. Based on information provided on the Intake Form and their experience with the recipient and his/her location, the ACDSS MTU determines if the recipient can take a fixed route bus or needs special arrangements, making those special arrangements when needed.
3. Medicaid recipient calls the ACDSS MTU between 2:00 and 4:00 pm on the business day before transport to confirm the trip and obtain information about pickup and return times.

Steps Needed in Arranging Own Transportation

1. Medicaid recipient contacts the ACDSS MTU for prior approval at least two business days in advance of the appointment.
2. ACDSS MTU completes Intake Form and provides needed vouchers and related forms.
3. Medicaid recipient mails completed forms to ACDSS MTU at the end of month for reimbursement.

Allegany County Office for the Aging
17 Court Street, Belmont, New York 14813
585-268-9390 or 1-866-269-9390
Email: ofa@alleganyco.com Website: www.alleganyco.com

Allegany County Office for the Aging

OFA provides expert information, assistance and services for Allegany County residents 60 years of age and older and their caregivers. Services include nutrition, in-home services, housing assistance, benefits assistance, transportation, referrals and advocacy. OFA receives federal funding under the Older Americans Act and state funding through the New York State Office for the Aging. Local matching funds are provided by Allegany County and generated partly by donations and participant contributions.

The OFA operates a volunteer transportation service program with 75 volunteers. Transportation is provided to medical appointments, grocery stores, pharmacies and banks. Volunteers are reimbursed at the I.R.S. rate, a total of \$20,580. In 2006 volunteers provided 3,701 rides to 134 people giving 2,780 hours of service.

The OFA also contracts with Allegany Arc to provide rides to the Wellsville Community Center for senior participants.

HomeCare & Hospice Transportation Services
118 North Main Street, Wellsville, New York 14895
585-593-7600 or 1-800-464-7015
Email: mjmcninch@homecare-hospice.org Website: www.communitycarewny.org

HomeCare & Hospice

HomeCare & Hospice Transportation (HomeBound Wheels) is an assisted non-emergency medical transportation service, which serves the Genesee, Wyoming, Cattaraugus, and Allegany County areas. They currently have contracts in force with the Cattaraugus County Department of Social Services and with Private Pay individuals. Present vehicle inventory includes: two station wagons and one wheelchair accessible van for transporting patients/clients. All drivers are Certified Home Health Aides. Hours of operation vary based on patient/client need. Transportation for patients/clients is provided to distances as far away as Jamestown, Buffalo, Rochester, and all points between.

In order to transport an individual, they must require assistance to and from their home to the vehicle. The only transport allowed is to medically necessary appointments such as physician visits, dental visits, therapy visits, and etc. The NYSDOT only allows for transport of persons receiving other services (i.e. LPN, Home Health Aide, Personal Care Aide, or Home Attendant) in the wheelchair accessible van. Transportation to any individual who meets the other criteria is available in one of the two station wagons.

Charges for services are as follows:

Wagon \$22.03 flat rate + \$1.11 per loaded mile

Van \$25.43 flat rate + \$1.18 per loaded mile

Prices include all travel time and any assistance needed from pick-up location to point of service. Aide wait time, if required (patient requires attendant after arrival at point of service) \$15.00 per hour.

Salvation Army
PO Box 549, 25 East Pearl Street, Wellsville, New York 14895
585-593-2640
Email: stephen.lyle@use.salvationarmy.org
Website: www.salvationarmyusa.org

Salvation Army

Transportation available to youth enrolled in Kids Café After School Nutritional Program: Tues and Wed from Wellsville Elementary

Public Transit/ Privately Owned Transportation Providers

Allegany County Transit (ACT)
268-5680 or 1-800-284-2415
Email: acta@froggernet.com

Allegany County Transit

Allegany County Transit (ACT) is provided under contract by a private operator, First Transit, Inc. Transfer service to Hornell Area Transit is available through Allegany County Transit (ACT). Extended service coverage provided through the transfer option allows Allegany County residents to access the Steuben County area. ACT also makes available transfers in Belmont to Shortline Bus System to take passengers to the Elmira Binghamton area.

Allegany County Transit is a mass public transportation system consisting of fixed route services and route deviation services. All services are available to the general public. Fixed route services travels throughout Allegany County Monday through Friday. Transportation is available to Cattaraugus County on fixed route service and to Steuben County via transfer with Hornell Area Transit. A.C.T. will link with Shortline in Belmont to take passengers to the Elmira Binghamton area.

Fixed Route service fares are \$1.00 per boarding and \$0.50 for senior citizens (over 60 years old) and disabled. Exact fares are required. Agencies and others may decide to use tokens instead of cash for their clients, in this case, \$1.00 and \$0.50 tokens can be purchased through A.C.T. and dispersed to riders by the agency who purchased them. Monthly passes are available for fixed route services for only \$30.00 per month with unlimited rides. Riders must present pass to driver while boarding. Call A.C.T. to obtain passes. Passes must remain in the riders possession during entire trip. Time points are indicated in the schedules. Potential passengers may “Flag” or motion to the regular route A.C.T. drivers for a ride. Drivers will stop at any location that is safe to do so. You must be visible to the driver. If we don’t see you, the driver will continue on his/he route. (Drivers on Medicaid runs will not stop for regular route customers.) Riders requiring mobility aides (wheelchairs) should call the A.C.T. office 24 hours ahead of their appointment to ensure timely service.

Route Deviation is when the driver deviates off their fixed route up to ¾ of a mile to embark passengers at their door. The fare for this service is \$2.00 per boarding and requires the rider to call the A.C.T. office.

Table 1 - ACT Property System Characteristics

System	Annual Ridership	Basic Coverage
Allegany County Transit, ACT	N/A	Belmont, Fillmore, Friendship, Olean, Whitesville, Alfred, Wellsville, Angelica, Belfast, Scio, Caneadea, Houghton, Rushford, Black Creek, Little Genesee, Ceres, Bolivar, Allentown, Alfred Station, Andover, Bolivar, Richburg, Cuba, Friendship, Belvidere, Whitesville, Hallsport, Stannards, Shongo, and Short Track (Allegany County)

General info: Appendix
Routes: Appendix

Neighboring Counties Transportation Providers

American Cancer Society Lakes Region
1400 Winton Road North, Rochester, NY 14609-5896
(800) 227-2345
Website: www.cancer.org

American Cancer Society

Transportation assistance with cancer related appointments. Fee: None

Faith in Action Steuben
PO Box 117, 20 Broadway, Hornell, New York 14843
(607) 324-1138
Email: faithinactiongha@hotmail.com
Website: www.fiavolunteers.org

Faith in Action

Primarily assist the frail, elderly and disabled (60+ years of age) who have no other means to get transportation. Transportation services are offered door-to-door. Services are provided by volunteer drivers who use their own vehicles. Volunteers offer any transportation assistance that helps individuals continue living independently (medical, nutritional, and limited social needs.) Service Area: Western Steuben/Eastern Allegany Counties

Hornell Area Transit
(607) 324-7910
Website: www.hatrides.com
Email: hatc@infoblvd.com

Hornell Area Transit

Hornell Area Transit operates 5 routes, four of which operate on Saturday- times of service vary with each route but basically run from 6 or 8 AM to 4:30-6:30 PM. The Alfred route serves both colleges and the downtown Village of Alfred, thus allowing for transfers to and from the Allegany County Transit (ACT). This affords the passenger opportunities to travel within 2 counties via the various public transportation systems available. Our schedules are available for downloading from hatrides.com. Monthly and Student passes are available for purchase. A detailed description of the transit operator and its service coverage is provided in Appendix.

System	Annual Ridership	Basic Coverage
Hornell Area Transit	116,542	Alfred State, Town of Alfred, Alfred University (Allegany Co.), Canaseraga, City of Hornell, Village of Arkport, Town of Hornellsville, Almond, Town of Avoca, Village of Bath, Village and Town of Canisteo, Village and Town of Cohocton, Village and Town of Wayland (Steuben County)

VA Medical Center, Bath
76 Veterans Avenue, Bath, New York 14810
(607) 664-4000
Website: www.va.gov/visns/visn02

VA Medical Center

Disabled American Vets: Riders do not need to be disabled vets in order to use the services. Two weeks notice is requested. No oxygen or wheelchairs and patients must be able to enter/exit van by self. Transportation by volunteer drivers is available to the Bath VA from Elmira, Corning, Bath, Wellsville & Hornell. From Elmira, Corning, Bath: (607) 734-0583; From Wellsville, Hornell: (607) 664-4780. *Patient Transportation Assistance:* Provides transportation for VA Medical Center Patients traveling to and from scheduled appointments at VA Health Care Facilities throughout upstate NY. (Van rides and special mode transportation for veterans with special travel needs.) Patients must have a scheduled appointment and may be subject to VA travel eligibility guidelines.

F. Service Provider Operations and Capacity

1. Vehicle Fleet Status and Evaluation

In a coordinated setting, maintaining accurate and timely information on vehicle fleets is important in order for all coordination participants to be confident about the reliability and safety of the coordinated services system being provided. Further, especially during the initial coordination efforts, accurate information on all vehicles available for service delivery in relation to service requirements is necessary.

ACCTF will create a common form that all participating organizations and other transportation service providers will complete.

The form will include but is not limited to the following information for each organization providing direct transportation service:

- Organization contact information: name, mailing address, phone, fax, contact person and email address
- Types of Transportation service provided (fixed, rail, paratransit, on demand)
- Eligibility requirements or prohibitive for ridership
- Provision of service defined as direct or contracted
- General fleet characteristics - for each vehicle the following information will be collected:
 - Manufacturer
 - Model
 - Year
 - Purchase price
 - Sources of funding (local, state, federal)
 - Odometer reading
 - Date of reading
 - Type of vehicle (automatic, van, light transit, transit)
 - Physical length of vehicle
 - Seating capacity – seated and wheelchair
 - Rating of operating condition (excellent, good, fair, poor)
 - Year of scheduled replacement
 - Additional features

Broader considerations within the inventory survey will also be considered such as:

- Use characteristics of vehicles (days and times of use)
- Availability of vehicles for sharing among organizations
- Opportunities for sale and re-use of older vehicles in lighter duty circumstances
- Support of volunteer or small community programs

2. Provider Interest in Coordination and Resource Sharing

Additional information will be gathered through the use of one on one interviews and surveys to collect information pertaining to transportation service providers potential interest in the following coordination efforts specific to resource sharing:

- Pooling of financial resources
- Joint use, pooling or sharing of vehicles among agencies
- Purchasing of vehicles cooperatively
- Centralized fueling of vehicles
- Centralized maintenance services for vehicles
- Centralized scheduling of passenger trips
- Contracting to purchase transportation service vs. continued to operation
- Contracting to provide transportation service to other agencies needing service

3. Volunteers

Volunteers can save money for transportation agencies and can provide services that would not otherwise be available. Individuals whose travel needs may be poorly served by traditional transit and paratransit operations may be served through the use of volunteers.

Funding and other resources need to be scaled to specific plans for volunteer involvement.

Areas to be considered for data collection include but are not limited to:

- Availability (current or future)
- Public interest
- Recruitment
- Training
- Local conditions
- Size of geographic area to be covered
- Level of travel demand
- Transportation reimbursement
- Liability concerns
- Driver incentives

Many transportation services have successfully used volunteers. Some of the larger and more successful efforts include those in Riverside County, California and Portland Oregon. The Transportation Reimbursement and Information Project (TRIP) complements public transportation services and will be investigated along with other logic models for application of expanded volunteer transportation services.

4. GIS Mapping System

A geographic information system (GIS) is a system for capturing, storing, analyzing and managing data and associated attributes which are spatially referenced to the earth. In the strictest sense, it is a computer system capable of integrating, storing, editing, analyzing, sharing, and displaying geographically-referenced information.

A database model of a network of roads and related features is a form of GIS data that is used for vehicle navigation systems. Such a map database is a vector representation of a given road network including road geometry (segment shape), network topology (connectivity) and related attributes (addresses, road class, etc). Geographic Data Files (GDF) is an ISO standard for formulating map databases for navigation. An Automotive navigation system will combine map-matching, GPS coordinates, and Dead Reckoning to estimate the position of the vehicle. The map database is also used for route planning and guidance, and possibly advanced functions involving active safety, driver assistance and location-based services.

GIS Mapping may assist in the development of a Coordinated Transportation Plan through the following means:

- 1) Current Transportation System Assessment and Analysis- by overlaying current public and private transportation routes, gaps in routes and duplication in services may be discovered. By overlaying current public and private transportation routes with current utilization rates and priority demographic population bases can assist in the restructuring of transportation routes for greater mobility and utilization.
- 2) Consumer Transportation Navigation; i.e. Route Planning and Guidance- through an internet or phone-base system, consumers may better plan transportation routes according to travel needs; i.e. time of routes, potential route connections for greater access, etc.

GIS Mapping is included in technology opportunities under Research and Mobility Plan in the Allegany County Coordinated Public Transit-Human Services Transportation Plan.

G. Consumer Perspective

1. Consumer Survey Analysis

Community Surveys will be distributed through community events and via Allegany County Transportation Task Force members; including but not limited to public transportation providers, private transportation providers, health and human service agencies, government agencies, adult education providers, and those serving priority populations; seniors, individuals with disabilities, and those seeking employment. Although sampling will not be conducted on a random basis; a broad mix of respondents will represent a extensive range of perceptions from across county zip codes and demographics.

Sample survey tools from the United We Ride Tool Kit will be identified and reviewed by ACTTF members to determine the appropriateness for local needs. Survey questions may be added when appropriate. Sample survey tools are included in this section.

Using SPSS software, summary statistics will be calculated from the responses of the survey questions. AWSRHN personnel and ACTTF members will complete data analysis. A Consumer Survey Report will be drafted and presented to ACTTF to assist in the planning, implementation and evaluation process.

*** See the “Research Section” of the Work Plan – Consumer Survey Analysis; for next steps.**

2. Focus Groups

Methodology

Focus Groups are a qualitative data research technique where the group is defined in terms of purpose, size, composition, and procedures. The purpose of this study will be to listen and gather data about how people feel or think about a coordinated transportation system; including "Doers" defined as those who currently utilize public/private transportation and "Non-Doers" defined as those who do not utilize public/private transportation. Representatives from priority populations will be targeted for focus group research; including seniors, individuals with disabilities, and the unemployed.

Allegany/Western Steuben Rural Health Network, Inc. will recruit participants utilizing contact information from ACTTF members. Audience screening will be conducted upon participant registration to guarantee that participants met the defined criteria; (1) Allegany County resident, (2) Doer vs. Non-Doer, and (3) representatives from the priority populations. Recruitment will be conducted in three steps:

Step 1: Formal Invitation

Step 2: Follow-up Personal Phone Call

Step 3: Confirmation Letter

To better accommodate participants' schedules, focus groups will be offered at various times of day; including early morning, late morning, early afternoon, late afternoon, and evening sessions. Refreshments will be offered at each site and groups will be conducted in a relaxed, non-threatening environment to create a comfortable, conducive atmosphere for sharing ideas and experiences. In addition, focus groups will be offered on assorted days of the week; attempting to overcome any barriers for participation; i.e. work schedule, etc.

Questioning Routes will be carefully designed to stimulate thought-provoking conversation, reviewed for clarity, and sequenced for flow and will be consistent throughout the Focus Groups, allowing for comparisons and contrasts.

Each focus group will be digitally recorded. Transcripts and comprehensive notes will be created from the recordings. Focus Group data will be analyzed using the Long-Table Approach, which will allow the information to be studied; identifying themes and categorizing results. A full-report, including important quotes and recommendations will be provided to ACTTF for planning and evaluation/monitoring process.

***See the "Research Section" of the Work Plan – Focus Groups; for next steps.**

H. Best Practice Models

1. Coordinated Transportation Methods

Several case studies specific to applied coordinated transportation methods in rural communities are available through the United We Ride – Framework for Action as well as the Transit Research Board of the National Academies Transit Cooperative Research Program (TCRP) Report 101: Toolkit for Rural Community Coordinated Transportation Services

Additional information is available from The Coordinating Council on Access and Mobility, CCAM. Through their efforts a database has been designed to provide case study information of useful practices identified to be highly effective in meeting three service provision goals: increased efficiency, simplified access, and reduced duplication.

Of this available information ACTTF will research further the logic models of applied coordination based on data research and analysis.

2. Coordination Planning Logic Models

Coordination activities have been implemented in various ways across the various states. Several common elements of success emerged from examining the results of each of these coordination efforts. The ideas/actions/items that have proven to be effective and essential components of the coordination process and could be applied are found within the following reports, supported by the Department of Transportation, which will be referred to throughout the coordination process.

United We Ride – Framework for Action

The Framework for Action is a comprehensive evaluation and planning tool to help state and community leaders and agencies involved in human service transportation and transit services, along with their stakeholders, improve or start coordinated transportation systems following the Goals set forth below:

United We Ride Action Plan

Implementing the Executive Order on Human Service Transportation

GOAL 1: EDUCATION and OUTREACH

To develop an education plan for coordinated human service transportation resulting in enhanced customer access at the local level for individuals with disabilities; older adults; and individuals with lower incomes.

GOAL 2: CONSOLIDATED ACCESS

To simplify access to transportation services and to enhance customer service through the development of a comprehensive and coordinated transportation system.

GOAL 3: REGULATORY BARRIERS

To reduce restrictive and duplicative laws, regulations, and programs related to human service transportation at the Federal level.

GOAL 4: COORDINATED PLANNING

To ensure comprehensive planning for the coordination of human service transportation for individuals with disabilities, older adults, and persons with lower incomes.

GOAL 5: COST ALLOCATION

To standardize cost allocation processes.

GOAL 6: USEFUL PRACTICES

To document successful strategies in coordinating human service transportation at the Federal, State, Tribal, and Local levels.

Transit Research Board of the National Academies Transit Cooperative Research Program (TCRP) Report 101: Toolkit for Rural Community Coordinated Transportation Services

This report examines strategies and practices used to coordinate rural transportation services and identifies model processes used for local coordination efforts in rural communities. It is designed to enhance the abilities of rural communities to apply the benefits of coordination to their localities. The Toolkit made coordination easier by providing information, instructions and examples of lessons learned –both do’s and don’ts – from actual implementation experiences.

The coordination process has a number of well-defined steps, stages or building blocks. These are similar to those described in transportation planning handbooks, in marketing and in operations research. The goals set forth are as follows:

GOAL 1: Initiate the Improvement Process

Form a working group, move forward

GOAL 2: Analyze Existing Conditions

Collect data; understand issues, needs and circumstances; define local conditions

GOAL 3: Establish focus and Direction

Agree on the problem, develop consensus, set direction

GOAL 4: Design alternative Courses of Action

Develop alternative coordination strategies and service designs

GOAL 5: Assess Alternative Options

Select the best coordination service option to implement

GOAL 6: Implement the Preferred Choice

Formulate action plans and implement coordinated transportation services

GOAL 7: Evaluate and Improve the System(s)

Review and evaluate progress; reconfigure services and strategies as necessary