

COORDINATION  
on-demand door-to-door senior transit through public transit system

TRAINING AND SAFETY  
travel training for seniors on public transit services

INFORMATION AND EDUCATION  
program provides senior citizens with training

TECHNOLOGY  
automated computer system with terminals in vehicle

VOLUNTEER DRIVER PROGRAM  
client designates volunteer driver and uses service-owned vehicles

# *Innovations for Seniors*

SERVICE DELIVERY  
rural circuit routes with one-day per week per town service

## **Public and Community Transit Services Respond to Special Needs**

FUNDRAISING  
a foundation for raising funds for senior transportation

VEHICLE MODIFICATION  
bus modification with low-floor vehicles and distinctive colors

Produced by

*The Beverly Foundation*

and

call-a-ride service for weekend and nighttime trips

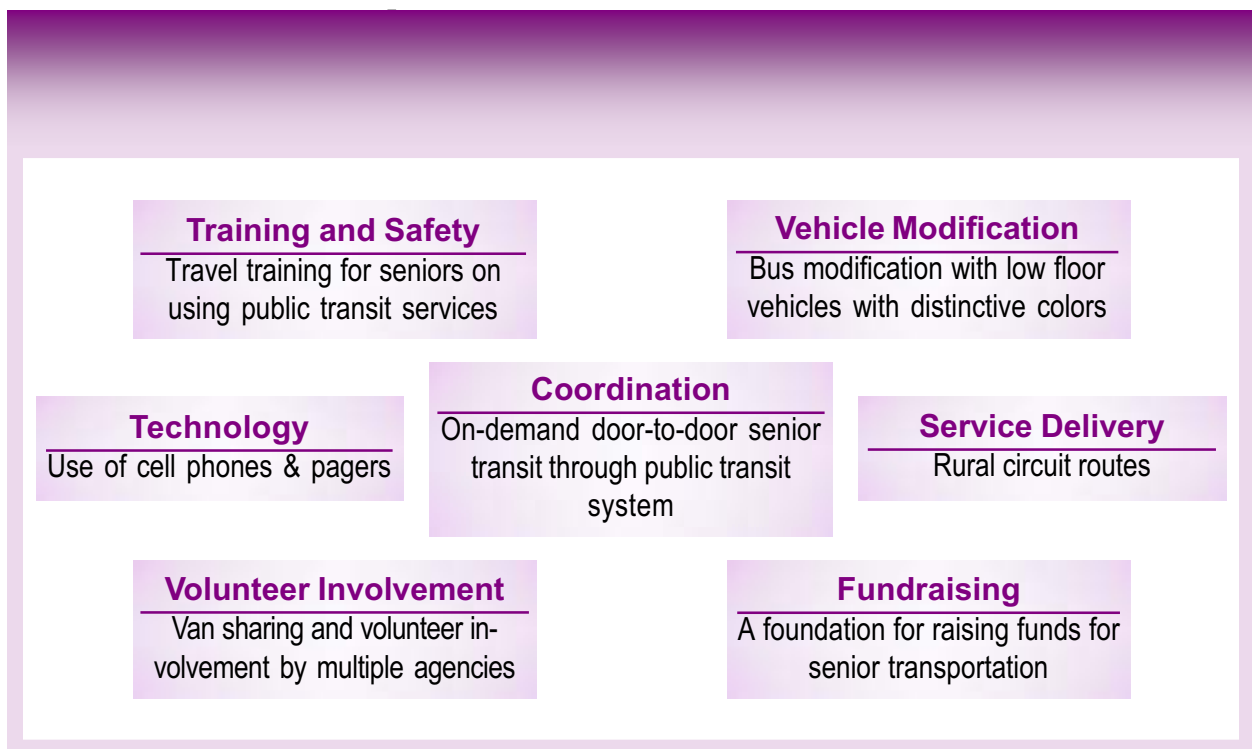
*The Community Transportation Association of America*

SCHEDULING  
hospitals and health care providers purchase tickets for senior rides

COST REDUCTION  
volunteer driver for a community van

This project was partially funded through the Community Action Transportation Project (CTAP), Office of Intergovernmental Affairs, U.S. Department of Health and Human Services. The views and conclusions expressed in the report do not necessarily reflect the formal policies of the U.S. Department of Health and Human Services.

This brochure introduces a variety of innovations that public and community transit services have made to improve their service delivery to seniors. In addition to the main categories below, subcategories also include: general, service expansion, efficiency, cost reduction methods, non-emergency medical transit, physical & social assistance, scheduling and route adjustment.



The brochure is a message of congratulations to transportation operators who are innovatively serving seniors...and a message of encouragement to others to consider incorporating innovations into their service activities.

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# Seniors & Transportation

In 2003, a partnership of the Community Transportation Association of America (CTAA) and the Beverly Foundation undertook a national survey of innovations for seniors in public and paratransit services. This brochure presents the survey findings and discusses the major innovations.

**Transportation Services.** Transportation can mean the difference in whether a senior can get to basic services as well as to enjoyable quality of life activities. What kind of transportation do seniors use? The majority drive their cars or travel by automobile with a family member, friend or neighbor. In fact 87% of those age 65+ have a valid drivers license. Public transportation accounts for only about 3% of trips by older people.

*The low use of public transportation by older adults is puzzling to many transportation providers.*

**Challenges.** While public and community transit services provide many seniors with the means of getting where they need to go, challenges with respect to access can make it difficult, if not impossible, for seniors to use them. For example, a woman who is age 85 and has never used a public or community transit service will probably find it socially and psychologically difficult to make the change. The challenges, however, are more than social or psychological. Seniors throughout the country have identified many reasons why they cannot use public and community transit services.

## Reasons why seniors do not use public transit

- concerns about safety
- inability to pay the costs
- unaware of existing options
- not able to walk to vehicle
- difficulty getting into vehicle
- not able to travel alone
- fearful of getting lost
- it is not senior friendly

**Innovative Solutions.** Many public and community transit services are working hard to try to meet the transportation needs of seniors. As one provider commented, “In meeting the needs of seniors, we meet the needs of all our riders, especially those who have a disability.” In other words, an innovative solution to an access problem faced by a senior will translate to better services for everyone.

This brochure discusses many of the innovations that have been developed to improve public and community transit access by seniors. The purpose is to identify, document and celebrate innovations that not only have improved transportation access of seniors, but provide helpful information and ideas that others can adapt.

## Senior Rider Problems and Solutions

Public and community transit service providers responding to the survey identified several solutions to problem statements about seniors who use their transportation services. The discussion of problems and solutions follows.

**Problem: Seniors have always driven their own automobile.** There is considerable research and literature about the traumas of seniors who want to or need to “give up their keys.” Seniors, caregivers and transportation providers know that making the transition from the freedom of driving one’s own car to dependency on public or community transit can be difficult. The providers who responded to the problem suggested a variety of solutions. Those identified most frequently were counseling, training and education.

### Solutions

- driver assures safe ride
- provide a senior travel buddy
- schedule group trips with peers
- offer subsidized taxi vouchers
- provide 1-on-1 travel training
- offer alternative choices
- refer to caseworker/counselor
- offer some rides in autos

*Seniors who drive may not experience problems with transportation. It is when they no longer drive that it can be difficult for them to get where they need to go.*

**Problem: Seniors need help getting to vehicle.** Seniors and their caregivers say that one of their major difficulties with public and community transit services is getting to the vehicle. That may include getting from their chair to the front door as well as getting from the door to the vehicle. The majority of providers who responded to the problem indicated that they allowed their drivers to provide door-to-door assistance. The second most common solution was the use of companions or volunteers. Some indicated they had an escort program or helpers to ride on the vehicle. Several indicated that they requested family or neighbors to help or to ride along. A number who offered special assistance to seniors did not indicate who actually provided it. Few said that they provided door-through-door assis-

### Solutions

- all receive door-to-door service
- driver assists: door to vehicle
- provide arm-in-arm assistance
- trained to assist: couch-to-van
- collaborate with volunteers and family members to help assist
- escorts/drivers enter residence
- invite family members along
- new policies: drivers to assist
- required to bring an aide
- operator helps upon request

*Accessible transportation is one of the leading problems facing seniors in our county.*

tance.

**Problem: Seniors are unable to sit for long periods of time.** One of the major complaints of seniors and their caregivers is that travel via public or community transit can take considerable time. According to one senior, “It can take four hours to make a 15 minute trip.” The majority of

### Solutions

- schedule around peak traffic
- schedule to pick seniors up last
- use pager to shorten time
- make direct trips and returns
- take seniors home in 2 groups
- place 1-on-1 with volunteers
- provide individual v. group trips
- provide breaks on long trips
- make frequent stops

providers that responded to the problem indicated that they resolved the issue by making changes in their schedules or by modifying their routes. Several indicated that they tried to

*For many frail elderly, a transportation escort is not a luxury; rather, the escort is an essential element of transportation access.*

provide individual rather than group rides while others said they set travel time limits.

**Problem: Seniors need someone to stay during appointments.** While seniors often need assistance getting to the vehicle, many seniors also need someone to help them get to appointments, stay during the appointment and help them back to the vehicle, as is the case with leaving the residence. Many providers responded to the problem by assigning, facilitating or paying someone to stay with the senior during appointments. Volunteers and escorts were the most common helpers identified. Others were family

#### Solutions

- care providers ride free
- driver may stay if requested
- transportation technician helps
- refer to a local agency
- assign a volunteer escort
- require an escort
- request they have an escort
- volunteer escort drivers stay
- an aide hired for position

*Public and community transit providers need to look after the people who are transportation dependent.*

members, companions, caregivers and aides. In several instances, volunteer drivers were identified as the helper.

**Problem: The senior has memory loss.** Family members, caregivers, neighbors and transportation providers express concern about the safety and security of seniors with memory loss who ride on public or community transit services. The most common response to this problem by providers was notations in rider records or on the trip manifest or trip sheet and having emergency contact information in the office or on the senior. One of the primary purposes appeared to be for driver awareness of the problem. Other methods of dealing with the problem included escorts, family volunteers and extra assistance and support from the driver.

#### Solutions

- assist seniors in scheduling trip
- passenger profile-impairment noted in file
- senior carries an information ID
- trip sheets logged for driver
- provides assistance to door
- required escort rides free
- driver never leaves passenger
- make calls to rider
- write-on calendar for rider use

#### 5 Major Complaints of Seniors

- advance schedule requirement
- hours of service
- limited service area
- being stranded/having to wait
- no help with transportation

**Major Complaints.** Seniors express dissatisfaction to transportation providers in using their transit services. Common complaints include: delays in being picked up, time requirements for travel, sharing rides, unavailability of services in the evenings & weekends, requirements to make requests ahead of time, distance limitations due to community/county boundaries and inability to travel because of not having an escort.

## Innovations: Concepts and Practices

Just what is an innovation? It generally is defined as a change from the norm or standard way of doing things. In other words it is a program, technique or activity perceived as new by an organization or group. It typically is viewed as legitimate, conventional and within the normative consensus of a community and its leaders. Innovation as a concept can be difficult to embrace, for while it often is seen as contextual for all organizations or communities, in fact it is specific to its organization or community. For example, the creation of a new scheduling system for solving an access problem may be an innovative change in one community, even though a similar scheduling system is a standard practice in the community next door.

### Characteristics of Innovations

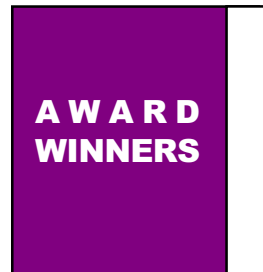
- responds to a problem
- mechanism for change
- requires trade offs
- in the eye of the beholder
- difficult to sustain
- difficult to recognize

Public and community transit providers were asked to identify innovations for improving services to seniors in the context of the challenges of problem solving. What follows are innovative solutions to some of these challenges.

<b>C</b>	difficulty scheduling rides	<b>I</b>	client designates volunteer (trained) driver and uses program vehicles
<b>H</b>	inability to get into vehicles	<b>N</b>	a portable step mounted on chassis
<b>A</b>	lack of available funds to hire drivers	<b>N</b>	volunteer driver for community van
<b>L</b>	limited availability of services	<b>O</b>	sharing community resources through brokering among services
<b>L</b>	lack of flexibility in fixed routes	<b>V</b>	expand fixed route system to stop at multiple senior "hang outs"
<b>E</b>	demand for expanded service	<b>A</b>	call-a-ride program weekends & nights rural circuit routes with 1-day per week service per town
<b>N</b>	paying for costs of transportation	<b>T</b>	no-cost transportation to health and enrichment activities
<b>G</b>	lack of information about service	<b>I</b>	travel training to teach seniors about costs, routes, schedules
<b>E</b>	communication with drivers	<b>O</b>	use of mobile data computer for real time exchange of information
		<b>N</b>	

According to some transportation providers, if transit agencies want to attract older riders, they will have to do more than wait for them to stop driving. They will have to adopt a more senior friendly approach for those who have stopped driving or seniors may choose to stay at home. The Beverly Foundation has identified the 5 A's of Senior Friendly transportation. They are: availability, accessibility, acceptability, affordability and adaptability.

## Innovations of Excellence



**Council on Aging & Human Services (COAST)**

Colfax, WA

**Community Association for Rural Transportation, Inc. (CART)**

Harrisonburg, VA

**Seniors' Resource Center (SRC)**

Denver, CO

### Discussion of Innovations

In late 2003, an expert panel was convened to identify three programs with Innovations of Excellence. In addition to receiving a cash award, the programs also were asked to present information about their program and innovations at national conferences on aging and transportation. What follows is a description of the problem, the innovation and the outcome.

A purple rectangle followed by a white square and the text "COAST" in bold, uppercase letters.

#### COAST

**Problem.** Small communities were able only to receive transportation on a monthly basis, unless rides were arranged for medical appointments. Seniors had to rely on monthly trips or volunteer rides to participate in activities in major cities. Because transportation could not be provided, seniors were unable to participate in many personal and community activities.

**Innovation.** A Community Vans Program was developed by COAST. The program supports communities throughout the county by acquiring vans with wheelchair lifts (to meet ADA requirements) and identifying a nonprofit agency that can act as the sponsor. Anyone in the community can use the van by fixed appointment, and it can be taken anywhere as long as there is an approved volunteer driver. Volunteer drivers are recruited and trained. The community agency schedules riders and volunteer drivers for use of the van, and is responsible for routine maintenance and for purchasing fuel. The agency can request donations to cover the cost. Another method of generating income is for COAST to contract with the community van program to provide Medicaid and other funded services to residents of communities who do not have such a program.

**Outcome.** The Community Vans program has made it possible for seniors to be more involved in social and recreational activities in their community and surrounding areas. It also has made it possible for communities to provide a new transportation option to their seniors and other residents. And finally, it has provided an economical means for COAST to provide transportation by enabling the community to provide its own transportation services.

 **CART**

**Problem.** Seniors with mobility problems, especially those in wheelchairs, were unable to travel to daily, overnight and out-of-town events like family reunions, weddings, birthdays and church. Additionally, CART had vehicles that were being underutilized.

**Innovation.** CART created a mechanism for making accessible vehicles with wheelchair lifts, not used in the evenings and weekends, available to seniors. The mechanism is a Designated Volunteer Driver Program. Both seniors and service agencies are asked to choose people to be their designated drivers so the vehicles can be used for individual as well as group rides. Designated drivers donate their time. CART includes the volunteer designated drivers on their insurance policy after they have successfully completed the training and testing program. Financing the program includes the use of grants to purchase vans and to cover operations costs.

**Outcome.** The Designated Volunteer Driver Program meets CART's expectation of providing elderly, disabled and low-income riders with transportation so that they can participate in family and community events and enjoy quality of life social activities. By creating this, CART has improved the utilization of its vehicles and expanded evening, weekend and overnight transportation for seniors.

 **SRC**

**Problem.** Although it had been in operation for 27 years, the Seniors' Resource Center was faced with several problems. (1) It realized that demand for senior transportation was outpacing supply. (2) It saw a 5-year landscape with a declining level of state and local investment. (3) It was referring riders to other services that probably were unable to provide rides. (4) As an 8-5 daytime service provider, it was unable to meet seniors' needs for travel to early morning medical and social service appointments.

**Innovation.** Preliminary research identified a number of transportation services that were available in the two counties where it focused its activities. Its innovation was to expand SRC's transportation services to older people by tapping into existing services in the community through transportation service brokering arrangements. By using existing funding from Medicaid and the Older Americans Act, SRC has become a funding source to other transportation providers for rides to basic social service and non-emergency medical service. Emphasis is on essential rides (therefore funding is unavailable for quality of life rides). The SRC brokering method determines which system is best for the rider (based on physical or mental needs of the rider) and negotiates rates.

**Outcome.** As a service provider as well as a service broker, SRC's transportation program has become much more complex than in the past. Today about 80% of SRC's clients are seniors. About 60% of its rides are brokered. The transportation service brokering agreements have made it possible for SRC to expand its geographic area, expand its hours of service and provide a single point of contact for riders.

## Innovations of Distinction

In addition, to the selection of three programs with Innovations of Excellence, three Innovations of Distinction also were selected. The names of the programs and their innovations are included below.

<b>INNOVATIONS OF DISTINCTION</b>	<b>Special Transit - Boulder, CO</b> Development of transportation contracts to serve general population to produce revenue that can be used to fund more door-to-door transit for seniors and persons with disabilities.
	<b>St. John's Council on Aging - St. Augustine, FL</b> Development of non-emergency medical transportation that is available to help older persons get home from the hospital 24/7 at a reasonable cost, with drivers trained in providing senior friendly transportation service.
	<b>SMART (Community Partnership Program) - Detroit, MI</b> Creation of a community partnership program that provides neighborhood based transportation services that supplement the regional service. SMART uses regional transit tax rebates and state and federal grants for providing coordinated service.

## I N N O V A T I O N S OF

<b>COAST</b> Post Office Box 107 Colfax, Washington 99111 Tel: (509) 397-4611 Fax: (509) 397-2917	<b>E X C E L L E N C E</b>	<b>D I S T I N C T I O N</b>	<b>St. John's County Council on Aging</b> 180 Marine Street St. Augustine, Florida 32084 Tel: (904) 823-4817 Fax: (904) 823-4831
<b>Seniors' Resource Center, Inc.</b> 3227 Chase Street Denver, Colorado 80212 Tel: (303) 235-6977 Fax: (303) 238-8497			<b>Special Transit</b> 4880 Pearl Street Boulder, Colorado 80301 Tel: (303) 447-2848 Fax: (303) 447-0686
<b>CART</b> 51 Kenmore Street Harrisonburg, Virginia 22801 Tel: (540) 820-3231 Fax: (540) 432-8647			<b>SMART</b> 660 Woodward Avenue, 9 <sup>th</sup> Floor Detroit, Michigan 48226 Tel: (313) 223-2309 Fax: (248) 244-8135

## A Thumbnail Sketch of Innovations

**Problem.** Lack of availability of transportation for seniors in rural area.

**Innovation.** New approach for flexible service scheduling to include destinations in rural areas and elimination of group requirement for travel to larger towns.

**Problem.** Inability to meet demand for door-to-door and door-through-door service.

**Innovation.** An “adopt-a-volunteer driver” program for seniors to identify and “adopt” a volunteer and make donations to pay for costs.

**Problem.** Limitation of services due to administrative and prearranged trip costs.

**Innovation.** Change to stored value card (TaxiCard) to subsidize taxicab transportation, replace paper vouchers and eliminate need for scheduled rides.

**Problem.** Inability of existing transit system to meet afternoon transit needs.

**Innovation.** Seniors paired with volunteer drivers for late afternoon rides home from the senior center.

**Problem.** Seniors are unable to take large number of medical trips because of not being ADA eligible.

**Innovation.** Tobacco settlement dollars used to fund non-emergency medical health-related trips for seniors not eligible for ADA transport.

**Problem.** Difficulty for seniors getting to dialysis because of transportation costs.

**Innovation.** A program for providing seniors with 50% of the taxi fare when they call and receive an authorization number.

**Problem.** Seniors unable to climb stairs to vehicle.

**Innovation.** Grab bars installed on vehicles and foam steps used for ease of boarding vehicle.

**Problem.** Lack of transportation in a rural region.

**Innovation.** Modified brokerage service where multiple agencies share drivers and vans and provide transportation service to seniors in multiple communities.

**Problem.** Seniors without ability to get to or pay for transit to and from doctor.

**Innovation.** Hospitals and health care providers purchase tickets to give to senior patients to use to pay for transportation to their services.

**Problem.** Inability of seniors to get into vehicles and to medical appointments.

**Innovation.** Personalized, escorted transportation service funded by grants and the community for seniors needing help with transportation to medical appointments.

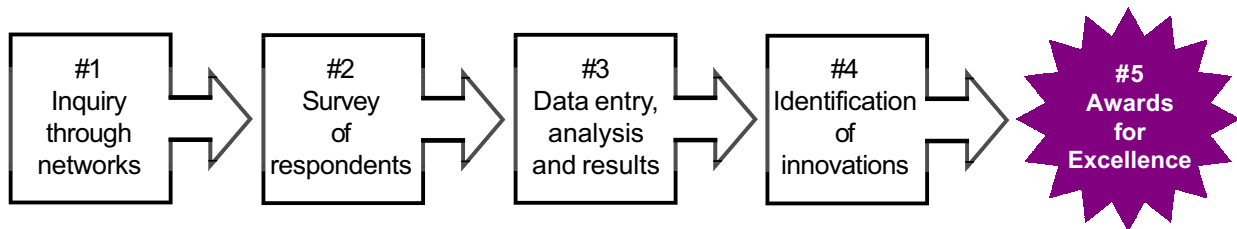
**Problem.** Bulk of transportation dollars being used for out-of-town, all day trips.

**Innovation.** New mileage reimbursement program developed to reimburse volunteers for providing long distance, all day trips.

## The Project at a Glance

**Partnership.** In early 2003 the Beverly Foundation and Community Transportation Association of America (CTAA) partnered to survey innovations that public and community transit services have initiated to improve their ability to meet the transportation needs of seniors. The purpose of the project was to identify, document, celebrate and disseminate information about innovations, many of which are likely to improve transportation services for other populations as well. The project is important because quite often seniors who no longer drive must depend on public and community transit services to meet their transportation needs. In many instances, however, the reasons that caused them to stop driving make it difficult or impossible for seniors to use these services.

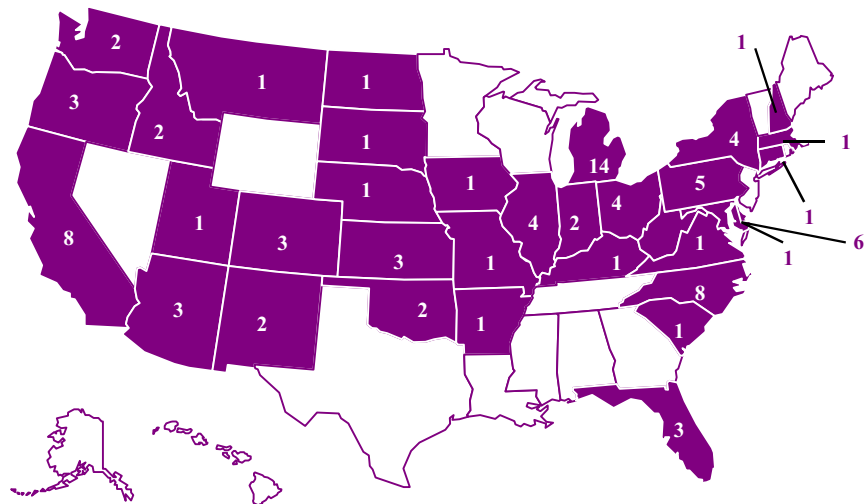
*Transportation dependency (on public and paratransit services) often begins when driving expectancy ends.*



**Method.** An inquiry and survey were conveyed to public and community transit services via the CTAA website and email system.

**Respondents.** Out of 167 inquires to all 50 states, 96 surveys were received from 33 states.

**Location.** The map indicates the location of services that responded to the survey. Interestingly, 48% are located in rural areas. 22% of the services are located in urban areas and 14% are located in suburban areas. 9% indicated they are located in a mix of areas.



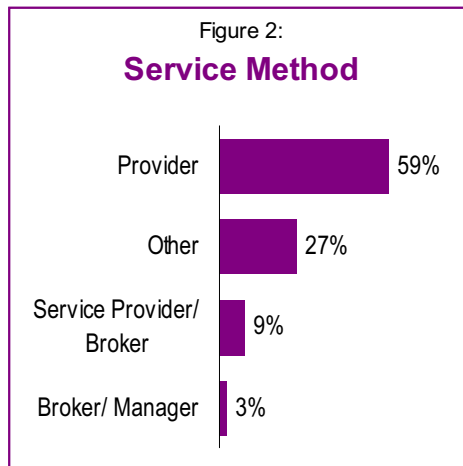
**Target Participants.** The target participants for the study were public and community transit services that provide transportation to the general population and have developed and implemented innovative programs or services that improve their ability to serve the older adult population or that improve the ability of the older population to access their services.

## A Sample of the Data

Figure 1:

Profile of Services		
<p><b>Trip Purpose</b></p> <ul style="list-style-type: none"> <li>73% medical</li> <li>38% shopping</li> <li>22% nutrition</li> <li>12% personal activities</li> </ul>	<p><b>Service Schedule</b></p> <ul style="list-style-type: none"> <li>90% weekdays</li> <li>42% weekend</li> <li>46% evenings</li> </ul>	<p><b>Scheduling</b></p> <ul style="list-style-type: none"> <li>57% same day</li> <li>70% 24-hours advance</li> <li>43% subscription</li> <li>37% 2 days advance</li> </ul>
<p><b>Service Area</b></p> <ul style="list-style-type: none"> <li>6% single community</li> <li>33% multiple communities</li> <li>34% county</li> <li>15% other</li> <li>10% mix</li> </ul>	<p><b>Service Pickup/Delivery</b></p> <ul style="list-style-type: none"> <li>73% door-to-door</li> <li>34% curb-to-curb</li> <li>25% door-through-door</li> </ul>	<p><b>Vehicles</b></p> <ul style="list-style-type: none"> <li>64% bus</li> <li>77% van</li> <li>26% taxi</li> <li>35% auto</li> <li>20% others</li> </ul>
	<p><b>Drivers</b></p> <ul style="list-style-type: none"> <li>57% paid</li> <li>25% paid/vol.</li> </ul>	

NOTE: Due to the option of providing no response or multiple responses on the survey, categories do not total 100%.



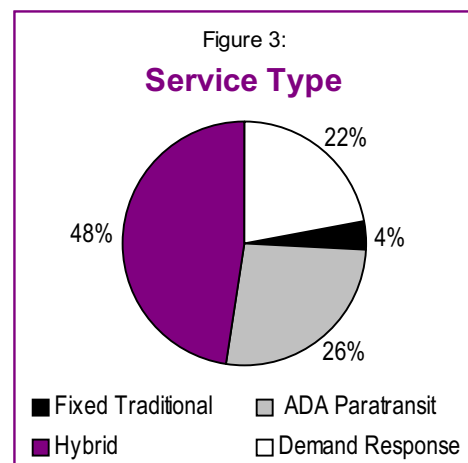
As Figure 1 indicates, public and community transit services responding to the survey tend to: (1) provide trips taken for medical purposes; (2) schedule rides 24-hours in advance; (3) offer weekday services; (4) offer door-to-door pickup and delivery; (5) pay their drivers; (6) serve counties or multiple communities; and (7) use vans and buses.

**Service Method.** As shown in Figure 2, of the methods of services that are offered, providers are in the majority (59%). Almost one third (27%) of the responding services represent a mix of providers,

broker/managers, provider/brokers, coordinators and the like. Only a small percentage of the respondents are provider/brokers (9%) or broker/managers (3%).

**Nature of Trips.** Only 36% of the trips provided to seniors are identified as trip chaining. Alternately, round trips and one-way trips are provided in the majority of services 93% and 57% respectively.

**Service Type.** Figure 3 indicates self-defined transportation provider roles played by the survey respondents.



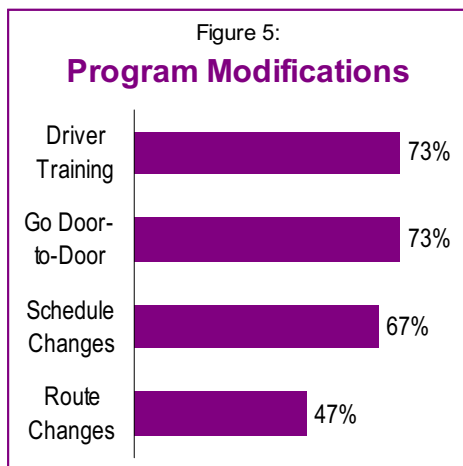
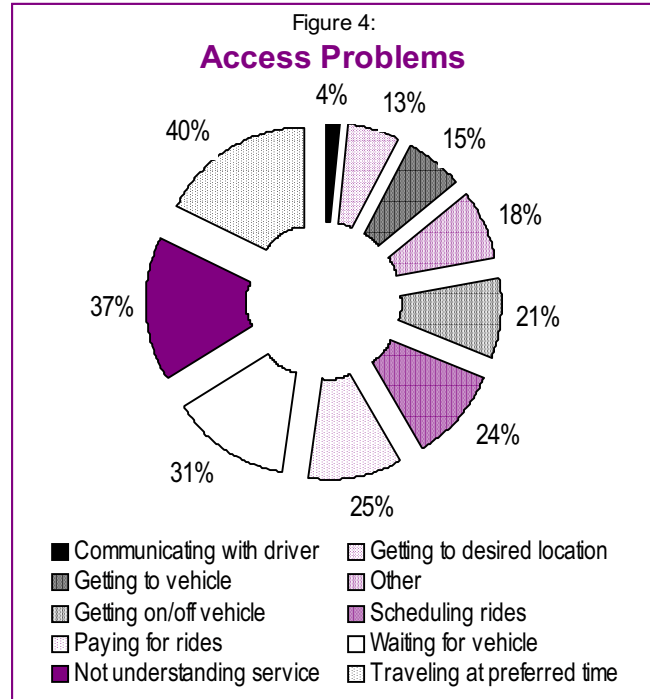
The majority (48%) of services could be described as hybrid in that they provide a mix of services such as fixed route, point-to-point, circular, ADA paratransit and demand response. Of the hybrids, 65% are service providers, 46% provide transportation in rural areas, 83% use vans and 78% provide door-to-door service.

**Income.** Sources of income are varied. They include fees (52%), contract income (58%), tax revenue (31%), fare box revenue (56%), and rider donations (47%). A large majority (83%) of the respondents identified government grants as a source of income.

**Special Needs and Requests.** 67% of the respondents say that seniors have special transportation needs and those age 85 and older have the greatest needs. 62% say that seniors make special requests and demands for transportation services.

**Access Problems.** From a list of 10 problems seniors encounter in accessing transportation services, providers identified time of travel (40%), not understanding how the service works (37%) and waiting for the vehicle (31%) as the top 3 problems. These and other access problems can be seen in Figure 4.

**Service Coordination.** Almost 90% of programs indicated service relationships with health care providers. Service relationships with senior housing, social services, nutrition programs and nursing homes also are strong. Other service relationships include those with recreation centers, work places and businesses.



**Program Modifications.** Figure 5 shows the types of modifications that transportation service providers say they make to accommodate the transportation needs of seniors. 96% report making at least one modification. Major modifications appear to be providing driver training (for physical assistance and sensitivity to seniors), going door-to-door and making schedule changes and route changes. Other modifications not illustrated on the chart include door-through-door (40%), volunteers ride along (29%) and providing escorts (24%). Only 14% of the services say they have made vehicle adaptations. Significantly, 72% say that their modifications have improved the transportation services for everyone.



This brochure was produced in February 2004 by the Beverly Foundation of Pasadena, California. Printing and distribution of the brochure was facilitated by the Community Transportation Association of America (CTAA). The overall project was undertaken as a partnership between the two organizations.

*Located in Pasadena, CA, the Beverly Foundation is a 501(c)(3) nonprofit organization whose purpose is to promote quality of life of America's older population through research, demonstration and education that addresses transportation mobility for seniors.*

*Located in Washington, DC, the Community Transportation Association of America (CTAA) is a national nonprofit professional membership organization. Its mission is to make transportation available, affordable and accessible, particularly for those who cannot use conventional public transit services.*

For more information about senior transportation innovations and options please visit the partners' websites.

[www.ctaa.org](http://www.ctaa.org)

[www.beverlyfoundation.org](http://www.beverlyfoundation.org)