

SACRAMENTO REGIONAL TRANSIT DISTRICT

# **ADA Paratransit Plan**

## **Final Plan**

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Board of Directors on August 10, 2009**

**Board of Directors on October 25, 2010-Eligibility Revision**

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<b>Chapter 1. Introduction .....</b>	<b>1</b>
Process .....	1
<b>Chapter 2. Description of Current ADA Paratransit Service .....</b>	<b>2</b>
<b>Chapter 3. Current and Emerging Issues .....</b>	<b>12</b>
<b>Chapter 4. ADA Paratransit Plan .....</b>	<b>24</b>
Service Area and Hours .....	24
Eligibility .....	26
Fares .....	27
Service Quality .....	27
Reservations .....	28
No-Show Policy .....	29
Financial and Demand Projections .....	29
<b>Chapter 5. Non-ADA and Supportive Services .....</b>	<b>32</b>
Non-ADA Paratransit .....	33
Supportive Policies and Services .....	35
Figure 1      ADA (Type I) and Type II Service Areas .....	5
Figure 2      Paratransit Fleet Composition .....	8
Figure 3      Comparison of Paratransit Policies to ADA Requirements .....	10
Figure 4      Paratransit Ridership: Fiscal Years 2002-03 to 2007-08 .....	10
Figure 5      Paratransit Ridership Trend .....	11
Figure 6      Shares of ADA and Non-ADA Service .....	11
Figure 7      2005 Population Density .....	14
Figure 8      2013 Population Density .....	15
Figure 9      Population Growth: 2005 - 2013 .....	16
Figure 10     Length of Type I and Type II Trips .....	16
Figure 11     Most Common Paratransit Destinations .....	19
Figure 12     Projected Demand and Operating Costs: 2008 – 2018 .....	32

# Chapter 1. Introduction

As a public operator of transit services, the Sacramento Regional Transit District (RT) is required by the Americans with Disabilities Act (ADA) to provide complementary paratransit services for people who, due to a disability, are unable to use RT's fixed-route bus and rail services for some or all of their trips. Since 1992 RT has met its ADA paratransit obligation through a Collaborative Agreement with Paratransit, Inc. Paratransit, Inc. is an independent non-profit organization that is designated as a Consolidated Transportation Services Agency (CTSA) for the Sacramento region by the Sacramento Area Council of Governments (SACOG) under provisions of the Transportation Development Act (TDA).

RT first submitted an ADA Paratransit Plan to the Federal Transit Administration (FTA) in 1992, as required by the ADA implementing regulations, showing how it would comply with the paratransit requirements of the ADA. The ADA Paratransit Plan was updated annually for five years, as required by the regulations, but has not been updated since 1997. In view of the many changes that have occurred since 1997 and the need to plan for challenges ahead, RT decided to prepare a new ADA Paratransit Plan. While such plans are no longer submitted to or received by FTA, they do provide an official statement of how a transit agency intends to comply with the paratransit requirements of the ADA.

The plan covers the period from fiscal year 2008-09 through 2017-18. It includes a description of current services, a discussion of issues and trends that affect RT's ability to provide paratransit services, recommended service and policy changes, a demand forecast, and a financial and operating plan with projections of trips provided and costs. The plan concludes with a chapter about non-ADA and supportive services.

## Process

This document builds on a public process that began in February of 2008 with a presentation to RT's Mobility Advisory Council (MAC). MAC appointed an Ad Hoc Committee to work with RT staff and consultants on the ADA Paratransit Plan. The Ad Hoc Committee reviewed a preliminary report that included a description of existing ADA paratransit service, a discussion of current and emerging issues, and preliminary financial and demand projections for the ten-year period of the plan. Over the course of three meetings, the Ad Hoc Committee discussed potential changes to ADA paratransit service and provided recommendations on each issue. On September 23, 2008, RT held a public workshop at Paratransit, Inc. at which proposed ADA Paratransit Plan recommendations were presented. Participants had the opportunity to discuss and comment on the recommendations with RT staff and consultants, and to have their comments transcribed verbatim by two court reporters. On March 4, 2009 a preliminary version of the final plan recommendations was presented to MAC. On June 9, 2009, RT held a second public workshop in the RT auditorium similar in format to the September 2008 workshop.

This ADA Paratransit Plan is being prepared in conjunction with a TransitAction Plan that covers all modes of service and will provide a planning, policy, financial and operational framework for developing and delivering transit projects and programs over the next 25-plus years through 2035.

## Chapter 2. Description of Current ADA Paratransit Service

ADA paratransit service in the Sacramento region provides door-to-door, shared-ride transportation for individuals whose disabilities prevent them from using RT's bus and light-rail system, and also to people who are 75 years of age or older. Paratransit rides are normally available seven days a week, including holidays, from 6:00 AM to 12:30 AM (half an hour past midnight), although limited trips are available prior to 6:00 AM and after 12:30 AM within  $\frac{3}{4}$  of a mile of RT bus and LR service in operation.

### Eligibility

ADA paratransit service in the Sacramento region is available for individuals whose disabilities prevent them from using RT's bus and light-rail system, and also to people who are 75 years of age or older. People who apply for and qualify for service based on disability are referred to as "ADA paratransit eligible" riders, and people who apply for and qualify for service based on age are referred to as "age eligible" riders. Many ADA paratransit eligible riders are 75 or older, and many age eligible riders would probably qualify as ADA paratransit eligible if they were to apply for this designation. However, riders and the trips they take are referred to as ADA paratransit eligible or age eligible based on how the riders applied for service.

In practice, service for ADA paratransit eligible and age eligible riders is the same service, provided with the same vehicles and drivers, with the same reservations, scheduling and dispatch processes, and subject to the same service standards.

People wishing to ride Paratransit must apply to Regional Transit, which determines whether the conditions for ADA paratransit eligibility or age eligibility, depending on which application type was submitted, are met. The application for age eligibility includes the following explanation:

*Please be aware that Senior Transportation Service is a non-ADA program, which is funded locally and separate from the paratransit service that is sponsored by Regional Transit (RT) in accordance with the Americans with Disabilities Act (ADA). Federal regulations require that ADA paratransit trips must take priority over any other non-ADA programs, and therefore, it is possible that limitations may be placed on the Senior Transportation Service in the future. If you are concerned about limited service under the Senior Transportation Service, and you have a disabling condition, you may want to consider applying for ADA service. If you are disabled and will need to use paratransit service outside of the greater Sacramento area, we recommend you apply for ADA service.*

Applicants for ADA eligibility are required to fill out an eight-page application and describe their disability or condition that prevents them from using fixed-route service. When RT receives the completed application, it is evaluated, and eligibility is determined based on the applicant's functional ability to use RT's fixed-route transit system. As explained by RT's eligibility brochure, an applicant may be eligible for ADA paratransit service if, as a result of a specific disability or health-related condition, the applicant is:

1. Unable to travel to or from transit stops or stations within the service area; or

2. Unable to independently board, ride or exit an accessible fixed-route (bus or light rail) vehicle; or
3. Cannot independently "navigate the system" even if the applicant is able to get to a transit stop and can get on and off the vehicle. (Example: A person who can't ride the bus independently, recognize bus stops, understand how to complete bus trips, determine the fare, etc.)

RT may request additional information, such as a phone or in-person interview with the applicant, or written medical/professional verification if one was not provided with the application. As required by ADA, RT notifies applicants by letter of its decision within 21 days of receipt of the completed application. An applicant who does not get written notice of RT's eligibility determination within 21 days of receipt of the completed application may ask for and receive paratransit services until a decision is made.

As described in RT's brochure "Requirements for ADA Paratransit Service Eligibility," determinations are made using four categories:

- **Unconditional** – Due to a disability or health condition, the applicant is always prevented from independently using the fixed-route buses or light rail trains.
- **Conditional** – Prevented from using the fixed-route bus or light rail at times when certain disabling or extreme environmental conditions exist. Paratransit, Inc. service is available at these times only. (Example: A person who uses a manual wheelchair and who cannot negotiate steep terrain would be eligible for paratransit on a conditional basis when using fixed-route service for a particular trip requires crossing a hilly area.) Paratransit, Inc. may limit services to conditionally eligible persons on a trip-by-trip basis. For example, a person with a developmental disability who is travel-trained to use regular bus service solely between home and work may only be eligible for paratransit service for trips to other destinations.
- **Temporary** – The applicant has a health condition or disability that temporarily prevents them from using the fixed-route service. Temporary eligibility can be either conditional or unconditional. (Example: An individual's condition may improve over time or may be aided by travel training.)
- **Ineligible** for ADA paratransit service.

It is left to riders themselves to observe their conditions of eligibility.

## Service Area

Trips are provided in two areas:

- **"Type I" Trips:** As required by ADA, trips are provided within an area extending three-quarters of a mile around RT bus routes and rail stations. In areas of Yolo and Placer County that are within three-quarters of a mile of an RT route or station, but where RT does not have authority to operate, trips may be provided directly by Paratransit, Inc., or by arranging a transfer to the paratransit operator in the neighboring area. The Type I or ADA service area changes according to the time of day and day of the week. It includes only locations within three-quarters of a mile of bus routes and rail stations that are actually in service at the time of a requested paratransit trip, as well small areas not inside any corridors but which are surrounded by such corridors. RT will continue to provide

ADA paratransit service to “Age Eligible” riders where the origin and destination are within RT’s Type I ADA paratransit service area boundary.

- **“Type II” Trips:** In addition, trips are provided in most areas within RT’s boundaries as of the time of the last ADA Paratransit Plan, which include Sacramento, Carmichael, Fair Oaks, Rancho Cordova, Citrus Heights, Antelope, Rio Linda, Elverta, Orangevale, Laguna, and North Highlands. In addition residents of these areas can travel to and from Elk Grove. (Elk Grove operates its own ADA paratransit service for its residents.) The Type II service area is significantly larger than the ADA or Type I paratransit service area, especially to the east and south. Trips that begin or end beyond the ADA-required service area but within the Type II service area are called “Type II” trips.

RT is federally mandated to provide Type I trips to ADA eligible individuals. RT and Paratransit collaboratively fund Type I and Type II trips using RT resources and other resources available to Paratransit, Inc. as the CTSA, such as Measure A and Transportation Development Act Article 4.5 funds. Figure 1 shows the maximum extent of the ADA-required service area and the larger Type II service area. In the case of Elk Grove, which began operating its own transit services in 2005, Paratransit, Inc. does not serve trips by Elk Grove residents, except in the case of trips within the ADA service area, but does serve trips to and from most parts of the city by residents of other jurisdictions.<sup>1</sup>

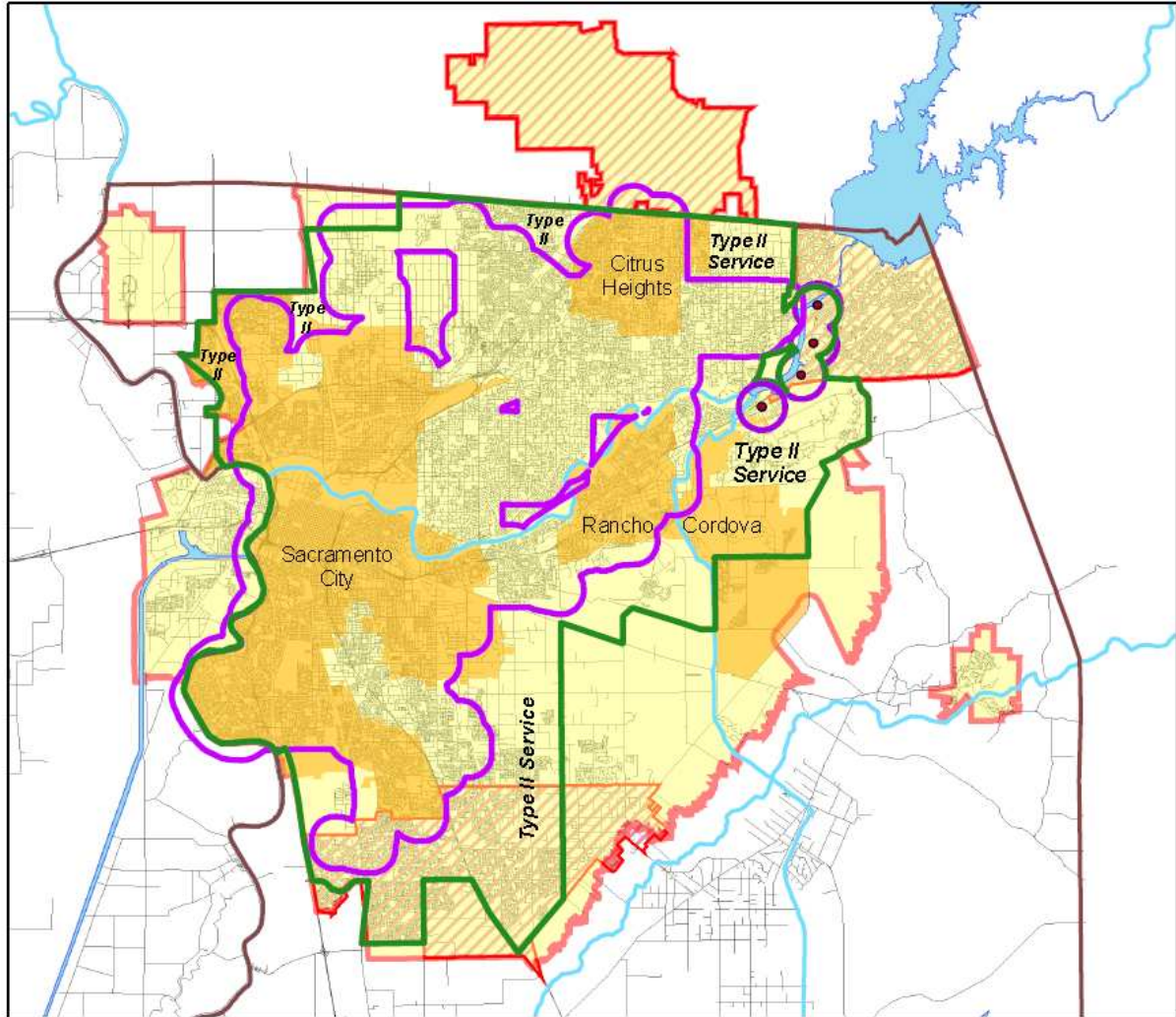
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<sup>1</sup> Elk Grove began contracting with MV Transportation for operation of paratransit service for its residents effective August 27, 2007. From 2005 until then, Paratransit, Inc. provided this service under contract to the City, separate from the service covered by the collaborative agreement with RT.

Figure 1 ADA (Type I) and Type II Service Areas

Paratransit Service Area falls within RT Service Area

RT Service Area extends out to Urban Services Boundary and includes City of Sacramento, Citrus Heights, Folsom Light Rail Stations and Rancho Cordova. Excludes: Davis, Roseville, Woodland, Folsom (excluding Light Rail Stations) and Elk Grove (excluding existing fixed route bus service).



-  RT ADA Paratransit Service Area
-  RT Service Area
-  Paratransit Inc. Type II Service Boundary
-  Folsom & Hazel Light Rail Stations
-  Included City
-  Excluded City
-  Sacramento County

RT Plan h3 Dept  
JUN 2003

## Fares

The fare within the service area is \$4.50 each way, increased from \$4.00 in January 2009, payable with exact change or pre-purchased coupons only. The fare is twice the basic adult cash fare on RT fixed-route service, as permitted by ADA regulations. A monthly pass is available for \$100. The cash fare has increased in three steps from \$3.00 since 2005, while the monthly pass has remained constant. Non-ADA service is provided to Sacramento International Airport (which is beyond the ADA and Type II service areas) for \$8.00 cash each way. On June 22, 2009 the Sacramento Regional Transit District Board of Directors approved a fare increase which will go into effect on September 1, 2009. At that time, the paratransit fare will increase to \$5.00 and the monthly pass will increase to \$125.

## Reservations

Paratransit trips have to be reserved in advance. The ADA regulations require that reservations be taken one day in advance, and optionally up to 14 days in advance, at least during normal business hours and comparable hours before every service day. Paratransit, Inc. takes reservations 7:00 AM to 7:00 PM daily including holidays. Ride requests may be made one to two days in advance, but not later than 5:00 PM one day before the ride date. Same-day emergency service is not normally provided. Customers are asked for the time they would like to be picked up. As permitted by ADA, reservation takers then negotiate trip times by searching for available space up to one hour on either side of the requested pick-up time. If space exists, the customer is offered a "ready time" and a trip confirmation number. If no space is available at the time requested, and an alternative time cannot be negotiated, a non-guaranteed "standby" reservation may be offered or Paratransit, Inc. may deny the trip request. Current policy is that if Paratransit, Inc. is not able to schedule the trip by 5:00 PM the day before service, the trip request is considered to have been denied.

Paratransit, Inc. does not accept reservations based on appointment times at a passenger's destination. However, reservation takers can suggest pick-up times based on a passenger's desired arrival time at a destination. Return trips need to be scheduled in advance, and passengers are advised to use their "best guess" when scheduling a return pick-up time.

A customer can also request a "standing ride" or subscription for trips that recur weekly at the same time to and from the same addresses. Paratransit maintains a subscription waiting list, which is reviewed periodically to see if establishing a subscription will create increased ride-sharing opportunities. All subscription scheduling is based on time, geography, and direction of the trip—not on a first-come, first-served basis. Subscriptions account for about 7% of paratransit trips, but may account for a much higher percentage of peak-hour trips.

## Service Quality

ADA regulations require maintaining certain levels of service quality in order to avoid "capacity constraints" that would have the effect of limiting the availability of paratransit service to eligible people. In particular the regulations do not allow trip caps, waiting lists, or any "substantial number" of trip denials, missed trips, significantly late pick-ups, excessively long ride times, or long hold times. There is no cap on the number of trips that will be provided overall or to any person. There is no waiting list to become a paratransit rider. Paratransit, Inc. monitors and reports denials, late pick-ups, long ride time, and average hold time. For fiscal year 2007-08, denials were 0.34% of trip requests, 90% of pick-ups were on-time (in the 30-minute window), 95% of rides took no more than 60 minutes, and the average hold time was 1.7 minutes.



## Passenger Assistance

Paratransit drivers will escort passengers to and from the main door of their pick-up locations and help passengers get on and off the vehicle. They can stow small personal belongings. Passengers who need other types of help, like filling prescriptions, managing several bags or packages, etc., are advised to bring along a personal attendant.

## Personal Attendants and Companions

As required by ADA, customers may be accompanied by personal attendants or companions. As explained by the Rider Information Guide, a personal attendant assists the passenger with daily life functions and may provide assistance during the ride or at the destination. Customers who need assistance to travel are strongly encouraged to ride with a personal attendant. Personal attendants are not required to pay fares and must be picked up and dropped off at the same locations as the passenger. A passenger's need for a personal attendant must be registered with the Paratransit, Inc., program. The Guide also explains the rules about companions. A rider may arrange to bring one companion along on each ride in addition to a personal attendant. Companions must be picked up and dropped off at the same addresses. Additional companions may be scheduled if space is available. Companions pay the same fare as the registered passenger. These policies comply with the requirements of the ADA regulations.

## Boarding the Vehicle

Passengers are given a 30-minute pickup window in which the vehicle will arrive. For example, if the negotiated ready time is 8:00 AM, the 30-minute pickup window is 8:00 AM to 8:30 AM. The passenger is required to be ready to board at 8:00 AM, and the vehicle is considered late beginning at 8:31 AM. When the vehicle arrives within the pickup window, the driver will wait no more than five minutes. If the vehicle arrives before the pickup window starts, the passenger may board if they are ready. If the passenger is not ready, the driver will wait until the pickup window starts and then an additional five minutes. If the passenger is not available to board by the end of the five-minute waiting period, and did not cancel the reservation at least two hours in advance, then the trip is considered a no-show.

## No-Show Policy

RT policy specifies that a rider's eligibility will be suspended "for a documented pattern, within any 30-day period, of misuse of system capacity within your control." A system of graduated suspensions is available as follows: first suspension, seven days; second suspension, 14 days; third suspension, 30 days. As required by ADA regulations, the policy states that suspensions will not be imposed for circumstances that are beyond the rider's control, such as:

- A sudden personal emergency
- Sudden or worsening illness
- Inability to get through on Paratransit, Inc., phone lines
- Late arrival of the vehicle
- Disruptive behavior caused by a disability

The suspension policy does not specify how many no-shows would amount to a pattern of misuse of system capacity. The no-show suspension policy is not currently being enforced.

Other methods are being used to limit no-shows and late cancellations. Riders are reminded in phone messages about the importance of cancelling trips they do not need and letters are sent to riders who have multiple no-shows explaining how no-shows affect other riders. Riders who cancel their trips less than two hours before the scheduled pick-up time are asked about their reasons, and each case is classified as justified or not.

## Facilities and Equipment

Paratransit, Inc. operates from a modern, fully-equipped facility on Florin Road in Sacramento. The facility is a former auto dealership that was donated to the organization. It includes administrative offices, a reservations and dispatch center, parking for vehicles, driver training and break areas, and a well-equipped maintenance facility that maintains the paratransit fleet and vehicles belonging to many other agencies including those that participate in Paratransit Inc.'s CTSA services. Paratransit service is operated using a fleet of 121 vehicles as shown in Figure 2. Most of the vehicles are small buses (cutaway or body-on-chassis vehicles), but there are also six minivans and 10 station wagons. The vehicles vary in age from one to 12 years.

**Figure 2 Paratransit Fleet Composition**

Year/Make/Model	Number of Vehicles	Average Mileage January 2009	Original Fund Source	Date Acquired
1997 Ford Candidate	3*	115,540	2 RT Capital Grant 3 Section 5310	April/October 1997
1999 Ford Aerotech	23*	233,858	10 Section 5310 27 RT Capital Grant	March/October 1999
2001 Ford Aerotech	5*	195,188	RT Capital Grant	December 2001/April 2002
2002 Ford Aerotech	15*	218,423	Section 5310	May/July 2002
2003 Ford Aerotech	12*	118,826	RT Capital Grant	October 2004
2004 El Dorado Startran	3*	128,420	PI Lease	October 2004
2006 Chevy Minivan	6	77,415	PI Purchase	June/July 2006
2006 Dodge Magnum	9	73,312	PI Purchase	December 2006
2007 Dodge Magnum	1	46,798	PI Purchase	July 2007
2007 GMC C5500	5	33,892	Section 5310	December 2007
2007 Ford E450	44	11,622	31 RT Capital Grant 13 Section 5310	January - July 2008
Grand Total	121			

\*The 61 oldest vehicles, marked by stars, are all scheduled for retirement.

## Comparison to ADA Requirements

Paratransit service exceeds ADA requirements in many respects, including:

- Eligibility is provided to anyone age 75 or older regardless of ability to use transit.
- The service area goes well beyond the 3/4-mile area around the maximum extent of bus routes and light rail stations.
- Although about 23% of riders have conditional (also known as restricted) eligibility, it is left to riders themselves to apply conditions of eligibility.
- Reservations are taken earlier in the morning and later in the evening than required.
- A \$100 monthly pass is available, good for unlimited rides. A rider who makes 12 or more round trips in a month pays less than the basic \$4.50 fare allowed by ADA.

In the case of eligibility and service area, the portion of service that exceeds ADA requirements is tracked and reported. It is considered to be the financial responsibility of Paratransit, Inc., rather than RT, using fund sources such as Measure A and TDA Article 4.5.

Figure 3 provides a summary comparison of paratransit policies and ADA requirements.

## Ridership Trends

Figure 4 shows the trend in paratransit ridership over the past six years. Figure 5 gives the total ridership in graphical form. Ridership has been reported separately for Type I and Type II trips only since 2005-06. Age-eligible and ADA-eligible trips have been reported separately only since January 2007. The reported figures show a jump in Type II trips in 2007-08 which corresponds to slow growth in Type I trips. This appears to indicate a difference on how trips are counted rather than a difference in actual trip making. Fiscal year 2005-06 stands out as a year of very little growth. This may reflect the beginning of Elk Grove paratransit service which began in January 2005. Overall, ridership has grown by 30% over the six-year period, and by an average of 5.4% each year.

**Figure 3 Comparison of Paratransit Policies to ADA Requirements**

Issue	ADA Requirement	Paratransit Policy
Eligibility	Unable to use fixed-route transit due to a disability for the particular trip being requested.	ADA Eligible: Unable to use fixed-route transit due to a disability. Trip-by-trip eligibility is self-enforced by riders. Age Eligible: 75 years of age or older
Service area	Origins and destinations within ¾ mile of a bus route or rail station, when the bus or rail station is in service	Type I: ADA required area Type II: all remaining areas within the RT district, including portions of Elk Grove formerly in the RT district for non-Elk Grove residents.
Reservations hours	During RT business hours and comparable hours on weekend days	7:00 AM to 7:00 PM every day (until 5:00 PM for next-day reservations)
Hours of service	All times that bus or rail service operates.	6:00 AM to 12:30 AM every day. Limited trips are available prior to 6:00 AM and after 12:30 AM within ¾ of a mile of RT bus and LR service in operation.
Advance reservations	One day in advance; optionally up to 14 days in advance.	One or two days in advance
Fares*	Twice the basic fixed-route fare: \$4.50 based on the current \$2.25 basic fixed-route fare.	\$4.50 per trip. \$100 monthly pass good for unlimited rides. \$8.00 for non-ADA airport service.
Service Quality (Capacity Constraints)	No trip caps No waiting lists No substantial number of trip denials, missed trips, significantly late pick-ups, excessively long ride times, long hold times	No trip caps or waiting list to become a rider. Denials: 0.34% of trip requests Late trips: 90% of pick-ups on-time (in the 30-minute window) Long trips: 95% of rides no more than 60 minutes Hold time: average 1.7 minutes. (All statistics are for Fiscal Year 2007-08.)

\*The RT Board of Directors approved a fare increase on June 22, 2009. Effective September 1, 2009, the paratransit fare will increase to \$5.00 for a one-way trip and the monthly pass will increase to \$125.

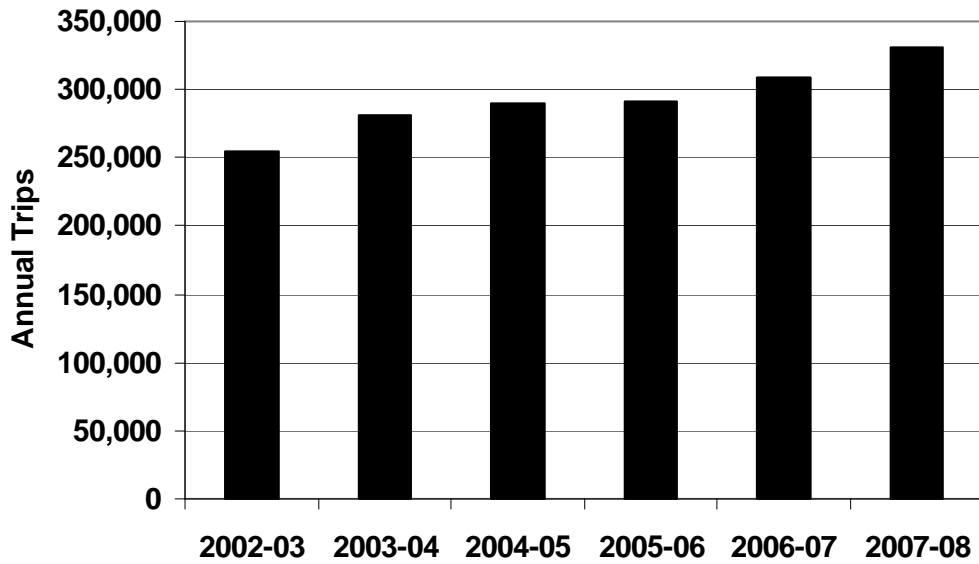
**Figure 4 Paratransit Ridership: Fiscal Years 2002-03 to 2007-08**

	2002-03	2003-04	2004-05	2005-06	2006-07	2007-08
Trips Provided	255,260	281,057	289,500	291,620	309,219	330,616
Type I Trips				266,514	281,913	288,974
Type II Trips				25,106	27,306	41,642**
ADA Trips*					252,403	256,695
Growth in Trips Provided		10.1%	3.0%	0.7%	6.0%	6.9%

\*ADA trips (excludes Type II and age-eligible) estimated from second half for 2006-07.

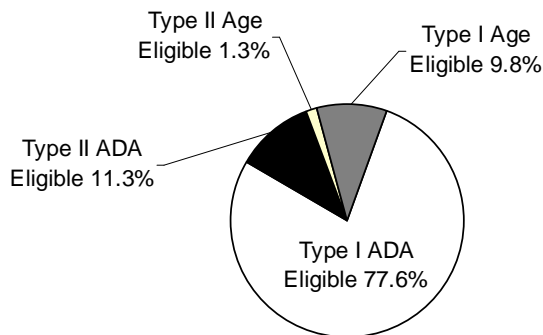
\*\*The jump in Type II trips from 2006-07 to 2007-08 appears to be due a change in reporting method.

Figure 5 Paratransit Ridership Trend



Note that the various categories of ADA and non-ADA service overlap with each other. That is, age-eligible trips can be Type I (inside the required ADA service area) or Type II (outside the required ADA service area), as can ADA paratransit eligible trips. To help clarify this, Figure 6 shows the percentage of total ridership made by each of the four possible combinations of trip types and eligibility types in Fiscal Year 2007-08.

Figure 6 Shares of ADA and Non-ADA Service



## **Chapter 3. Current and Emerging Issues**

This section identifies issues that will need to be addressed, some of which are affecting service already and some of are likely to impact service in the near future.

### **Growing Population**

A growing population Sacramento County will bring with it growth in the demand for ADA paratransit.

The SACOG Senior and Disabled Mobility Study noted that the size of the SACOG Region's population of elders and persons with disabilities is expected to grow significantly in the future. While many will have no difficulty traveling, many others will need various forms of assistance to remain mobile. The SACOG study used projections from the State Department of Finance (DOF) showing that the number of people age 65 and older in Sacramento County will grow by 20% between 2000 and 2010, and by 74% between 2000 and 2020. The number of people age 75 and older in Sacramento County is expected to grow at a somewhat slower rate: by 16% between 2000 and 2010 and by 38% between 2000 and 2020.

While older people probably make up a majority of ADA paratransit eligible people, they probably are a minority of the riders on paratransit on a typical day. That is because older people generally travel less than younger people. Analysis for a recent Transit Cooperative Research Program project suggests that paratransit demand may actually grow in proportion to total population rather than in proportion to senior population. According to the DOF, total population in Sacramento County will grow by 26% between 2000 and 2010.

The SACOG study reviews the evidence about whether the size of the population with disabilities is growing faster than the general population. Some of this evidence seems to suggest that rates of disability are falling, at least among seniors, but there is some evidence of rising rates among younger people due to obesity. Given the conflicting evidence, the SACOG study assumes that, within each age group, the percentage of people with a disability will remain about constant. Using the DOF projections, SACOG projects that the number of "severely disabled" people in Sacramento County will grow only slightly more than the general population: by 27% between 2000 and 2010, and by 59% between 2000 and 2020.

However, other projections developed by SACOG for transportation planning indicate that Sacramento County is growing much less than projected by DOF. Whatever the exact amount of growth, paratransit demand will grow as a result and paratransit service will need to accommodate this additional demand if it is not served by some other means.

### **Non-ADA Service**

RT has committed to continuing to support use of certain funds for services that go beyond ADA requirements, such as the existing Age eligible and Type II service provided by Paratransit, Inc. using TDA Article 4.5 funds and Measure A senior-disabled funds. The future of Type II service will depend on growth trends in outlying areas where RT either does not provide transit service or provides service that does not operate at certain times such as nights and weekends.

The SACOG study notes that population is growing faster in more outlying areas including newer suburbs, semi-rural and rural areas with more limited transportation alternatives. However, the areas of most rapid growth are mainly outside of Sacramento County, for example in Placer and Yolo counties, which are not served by Regional Transit or Paratransit, Inc. Within Sacramento County, SACOG projects significant growth in downtown Sacramento and in the Natomas corridor to the northwest; more outlying areas with significant growth are mainly in the southern part of the service area. In the southern area, much of the fastest growth is in Elk Grove whose residents are not served by Paratransit, Inc. Figures 7 and 8 show projected growth between 2005 and 2013 in “traffic analysis zones” which are used by SACOG for its regional transportation model. In numerical terms, as shown in Figure 9, SACOG’s projections indicate that population in the non-ADA (Type II) service area will grow by 33% between 2005 and 2013 compared to 7% in the ADA service area. Growth in both areas is projected to moderate in the years after 2013. SACOG’s projections indicate that demand for Type II service may grow much faster than demand for Type I ADA service, at least through 2013. Figure 9, in the last column, also shows total cumulative growth from 2005 through 2018.

Figure 7 2005 Population Density

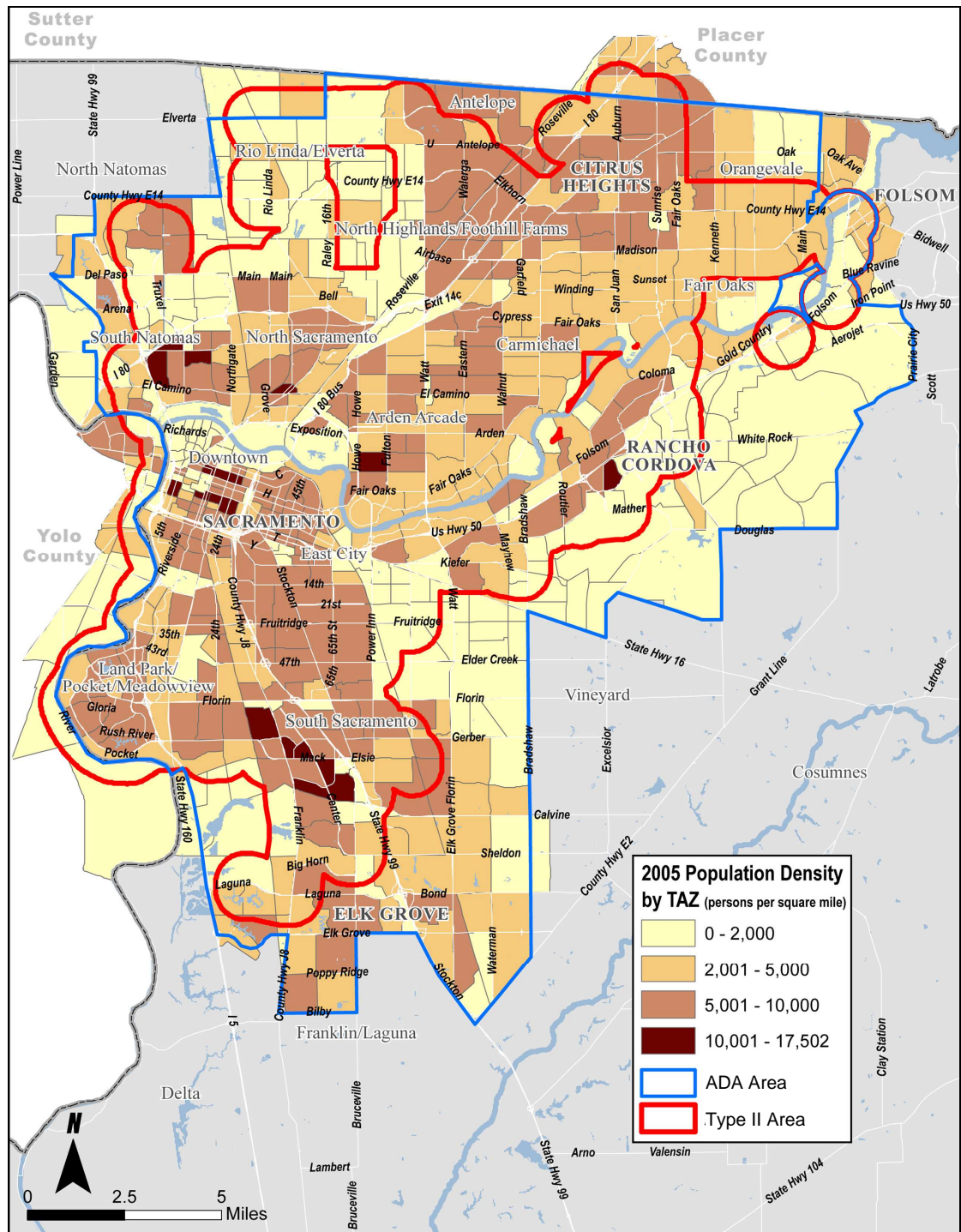
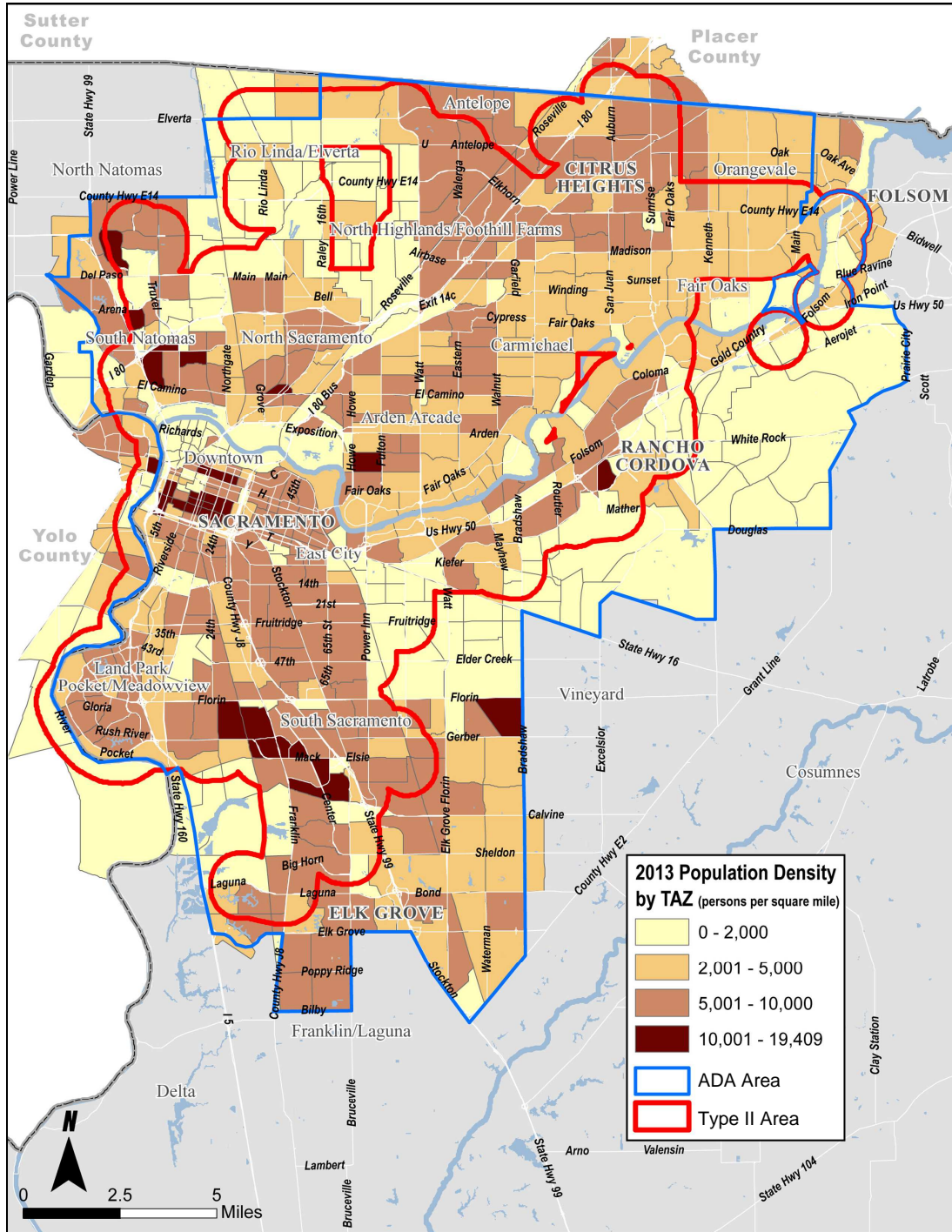




Figure 8 2013 Population Density



**Figure 9 Population Growth: 2005 - 2013**

	Population			Population Growth	
	2005	2013	2018	2005-2013	2005-2018
ADA service area	968,762	1,036,054	1,081,270	6.9%	11.6%
Type II service area	175,011	232,481	259,123	32.8%	48.1%

Source: GIS analysis by Nelson\Nygaard using SACOG TAZ projections.

The future of Type II service will also be affected by the cost of providing Type II trips. Type II trips are probably more expensive to provide than Type I trips, since Type II trips are longer on average than Type I trips. An analysis of trip data from April through June 2008 shows that, on average, Type II trips are 49% longer than Type I trips. As shown in Figure 10, most Type II trips go between a location that is within the ADA service area and a location that is beyond the ADA service area, but a small percentage go between two points that are both beyond the ADA service area. Since the size of the ADA service area changes depending on time of day, the analysis is shown by time period. Within each time period, trips that go between the non-ADA and ADA service areas are longer than trips that stay within the ADA service area, but trips that go between locations out of the ADA service are generally shorter. Overall, the average Type I trip, entirely within the ADA service area, was 5.8 miles long, while the average Type II trip was 8.6 miles long.

**Figure 10 Length of Type I and Type II Trips**

Time period	In ADA - In ADA		In ADA - Out of ADA		Out of ADA - Out of ADA	
	% of trips*	Avg. Length (miles)	% of trips*	Avg. Length (miles)	% of trips*	Avg. Length (miles)
Weekday 7 AM - 6 PM	90.7%	5.8	8.8%	8.9	0.5%	4.7
Weekday 9 PM - 10 PM	87.3%	5.2	11.2%	8.4	1.4%	9.1
Saturday Noon - 1 PM	87.5%	4.9	10.7%	6.9	1.8%	4.1
Sunday Noon - 1 PM	81.4%	5.2	15.1%	9.4	3.5%	2.1

Source: Paratransit, Inc. trip files for April – June 2008. \*Percentages add across.

It is possible that demand for service by age-eligible riders will also grow faster than demand for service by ADA-eligible riders. This would be true if the population of people age 75 and older grows faster than the general population. However, the DOF projections quoted above actually show less growth in the age 75 and older group than in the general population. This may seem contrary to general expectations about the graying of America and the aging of the Baby Boom, but people who will turn 75 in 2013 (halfway through the time period of this plan) are those who were born in 1938, long before the postwar boom.

Many people who apply for age-eligibility might well qualify for ADA paratransit eligibility if they were to apply for it. If limitations were placed on service for age-eligible riders at some point, it is likely that many age-eligible paratransit riders would apply for and receive ADA paratransit eligibility.

## Issues from SACOG's Senior and Disabled Mobility Study

In June 2005 SACOG held workshops throughout the six-county region to hear concerns about transportation for seniors and people with disabilities. Issues raised specifically regarding paratransit and other "demand responsive" services included:

- Requirements for advance scheduling
- Insufficient service in terms of hours, capacity, and geographic areas served
- Long waits for pick-ups
- Difficulty of intercity connections
- Curb-to-curb service that is insufficient for those who need additional help to/from the vehicle or to carry packages.

The SACOG study includes the following observations:

*"Those needing to reach medical facilities in another city or county may encounter difficulties trying to cross geographic boundaries, especially where eligibility requirements differ. Most demand-responsive services require advance reservations, making it difficult to reach a doctor for a same-day appointment because of an illness or emergency. It is also hard to predict how long a medical appointment will last, so it is difficult to schedule a timely pick-up. Transit agency demand-responsive programs, which are all curb-to-curb, require clients to wait outside for a pick-up, and if they are late it can be a particular hardship for someone who is frail or ill, especially in hot, cold, or wet weather. Seniors with dementia can be too confused to successfully reach an appointment without escort, while van transportation itself can exacerbate certain medical conditions. Meanwhile demand for demand-responsive services especially by dialysis clients keeps growing, decreasing capacity for other users."*

Since the study is regional in scope some of these issues may not apply to ADA paratransit in the RT area, especially the difficulty of travelling to medical appointments in other jurisdictions. Issues about return trips from medical appointments and difficulties of frail seniors and people with dementia almost certainly apply just as much to ADA paratransit in the RT area as to other services in the region. Specifically with respect to Sacramento County, the SACOG study notes the following:

*"Workshop participants and other service providers observed that at times there are long waits for client pick-ups, which can be especially difficult after medical appointments and for frail elders. Additionally, they noted that there can be a lack of next-day space and individuals are sometimes denied a ride because of insufficient capacity."*

Regarding improvements to demand-responsive transportation in Sacramento County, the SACOG study notes the following:

*"In general, workshop attendees and service providers interviewed wanted to see more options and gap-filling services. These included smaller vehicle and jitney services, expanded demand-responsive and community/volunteer transportation programs, and more taxis that are regulated, insured, supervised, offer a variety of passenger payment options and accessible vehicles, and include discounts/sliding*

*scales/subsidies for low-income seniors/persons with disabilities. Workshop participants prioritized more funding for these purposes, as well as looking at distance-based pricing, and priority for rides based on medical need. Participants also observed that developers of senior residential communities such as Sun City should have some responsibility to provide transportation services.”*

Specific recommendations for demand-responsive transportation from the SACOG study include:

- Incorporate issues and recommendations raised into local transit operator studies, such as Short-Range Transit Plans.
- Expand demand-responsive services, including shuttles.
- Offer door-to-door assistance.
- Provide and/or prioritize same day non-emergency medical transportation.
- Encourage priority parking for Dial-a-Ride vehicles at common destinations.
- Improve passenger notice on changes to pick-ups.
- Increase driver training concerning rules and practices for transporting seniors and persons with various forms of disability.
- Catalyze shared driver cooperatives, in which a full-time driver provides service to a regular group of seniors and/or persons with disabilities who share the monthly cost of the driver and receive personalized transportation service when desired.
- Work with hospitals and clinics to offer on-site escort services for patients using curb-to-curb transportation services but needing more assistance to reach doctor's offices.
- Increase availability of regulated, accessible, subsidized local and intercity taxi services.

Many of these recommendations involve improvements beyond the scope of ADA paratransit, for example same-day medical trips. Others relate to additional services that could fill gaps not served by ADA paratransit, or reduce dependence on paratransit by some riders. Regarding door-to-door assistance, Paratransit, Inc's policy is for drivers to escort passengers to and from the main door of pick-up locations and help them get on and off the vehicle. Drivers can stow small personal belongings, but if passengers need other types of help, like filling prescriptions, managing several bags or packages, etc., they are advised to bring along a personal attendant.

## **Trends in Human Services Programs and Transportation**

Some ADA paratransit trips are made to participate in various programs and services that are provided by public and community organizations. Since ADA paratransit trip purposes are not asked or recorded, the number of these trips is not known. In addition, agencies and organizations that serve people with disabilities provide or pay for transportation that is separate from ADA paratransit.

In the Sacramento region, many agencies provide services in collaboration with Paratransit, Inc. in its capacity as a Consolidated Transportation Services Agency (CTSA). Paratransit, Inc. has provided data showing that participating agencies carried 458,827 “CTSA trips” in the 12 months from March 2007 through February 2008. This is considerably more than the 321,746 paratransit trips provided in the same period (ADA and age-eligible, Type I and Type II). The CTSA trips include trips to adult day health care, to senior nutrition program, and to training and jobs for people with developmental disabilities under the auspices of Alta California Regional Center. Still

other similar trips occur that are not under the CTSA umbrella. For example, Medi-Cal (California's version of the Federal Medicaid program for low-income people) pays for an unknown number of trips, typically using private for-profit carriers.

In most ADA paratransit programs, trips to agency sponsored programs such as workshops and adult day health care make up a large portion of the service. In comparison, they make up a relatively small part of the service in Sacramento, most likely because of the CTSA service. Using a list of trips in the first half of 2007, it appears that there are only a handful of organizations to which Paratransit, Inc. carries a large number of trips on a typical day. Figure 11 shows the named places in the Paratransit, Inc. trip listings that account for more than ten drop offs on a typical weekday. Of these, only Easter Seals would probably be considered a human service agency or program. In addition, many of the dialysis trips might be covered by Medi-Cal but would not necessarily be eligible for Medi-Cal transportation depending on the frailty of the individuals making the trip.

**Figure 11 Most Common Paratransit Destinations**

Destination	Number of Locations	Approximate Drop Offs per Weekday
Dialysis	33	43
Easter Seals	13	40
Kaiser	34	31
UC Davis (medical)	16	28
American River College	8	15
Sacramento Community College	6	14

Source: Paratransit, Inc. trip records for January – June 2007.

Changes to human service programs and their transportation arrangements could have a major impact on ADA paratransit service. For example cuts in Medi-Cal could result in some trips that are now being provided by Medi-Cal providers being requested instead as ADA paratransit trips. Although some Adult Day Health Care (ADHC) trips are made on ADA paratransit, far more are provided on CTSA service (over 94,000 in the last year according to data from Paratransit, Inc.). Paratransit, Inc. assists agencies in providing ADHC trips on CTSA service. Arrangements vary, but may include providing a vehicle, maintenance, insurance, or fuel or some combination of these. According to Paratransit, Inc. staff, additional Measure A funding beginning in 2010 may allow more ADHC trips to be carried under the CTSA. However, other changes to state regulations governing ADHC programs could result in the programs encouraging more of their clients to use ADA paratransit. Currently, transportation is considered part of the core services for which ADHC agencies are paid by Medi-Cal, but this may change in the near future. Similarly, according to Paratransit, Inc. staff, the Alta California Regional Center has reduced its transportation program and these trips will most likely end up on ADA paratransit.

Overall, the future of human service transportation is unknown, but has the potential for very large impacts on ADA paratransit.

## Improving Efficiency and Effectiveness

Meeting the challenges that face paratransit will require multiple approaches, including steps to make more efficient and effective use of resources. This section describes some of the measures that have been proposed at various times. Some measures were suggested in the performance audit conducted by Mundle & Associates in 2004. Others have been suggested by members of RT's Mobility Advisory Council (MAC).

**Enforce the suspension policy.** RT has a policy that a rider's eligibility will be suspended "for a documented pattern, within any 30-day period, of misuse of system capacity within your control." Misuse of system capacity would include chronic no-shows or late cancellations that result in vehicle space going wasted. The policy is not currently being enforced. About 7% of reservations are cancelled late, and 3.4% of scheduled trips result in no-shows. Enforcing the no-show policy would have the potential to reduce these rates and allow more efficient use of vehicles. Enforcing the policy would involve an active role for RT in setting clear criteria for how many late cancellations or no-shows constitutes a pattern of misuse of system capacity. FTA guidance on this issue requires that a no-show suspension policy take account of how frequently a person rides paratransit, since a very frequent rider who is very conscientious about cancelling unneeded reservations might have more no-shows than an infrequent rider who rarely bothers to cancel an unneeded reservation. RT would also need to set policies and be involved in evaluating individual cases to ensure that, as required by ADA, riders are not suspended for events that occur for reasons beyond their control. RT would also be responsible for handling appeals. Adopting a revised no-show policy should include a public participation process with input from riders.

**Apply conditions of eligibility when booking trips.** Currently rides are scheduled for customers with conditional (also known as "restricted") eligibility without consideration of whether the rider could make the trip using RT buses or light rail. ADA paratransit eligibility determinations do state specific conditions of eligibility in many cases, but it is up to riders themselves to abide by these conditions. Applying conditional eligibility in the reservations process can be as simple as asking callers whether their conditions let them use RT when they plan to travel. It could also involve detailed examination of specific bus routes, bus stops, light rail stations, and sidewalks that would be used and whether the customer would face barriers that prevent making a trip by bus or rail, taking into account that customer's specific disabilities. It could also involve consideration of seasonal issues (hot weather in summer or cold, wet weather in winter) or time of day.

Applying conditional eligibility in the reservations process might require obtaining more detailed information in the ADA eligibility screening process. It would require stating conditions using clear categories that can be consistently applied by paratransit reservations agents and schedulers. Systems that have applied this method have found that it does encourage riders to travel by means other than ADA paratransit.

**Enhance the eligibility screening process.** Enhancing the eligibility screening process would have benefits beyond enabling trip-by-trip application of conditional eligibility. Applicants for ADA eligibility are required to fill out an eight-page application and describe their disability or condition that prevents them from using fixed-route service. Applicants may optionally complete a one-page "Request For Professional Verification" and have a healthcare professional complete an optional one-page "Professional Verification" form (both included in the eight-page application form). RT's staff of three eligibility specialists review the applications to determine if the applicant is eligible for ADA paratransit, and if so whether the applicant should receive unconditional, conditional, or temporary eligibility. The eligibility specialist may request additional information,

such as a phone or in-person interview with the applicant, or written medical/professional verification if one was not provided with the application.

As of the middle of 2008, for about 40% of applicants, the decision was based on the paper application plus the results of a call by an eligibility specialist to the applicant or the person who filled out the application form on behalf of the applicant to clarify apparently conflicting information or to complete missing information. For about 9% of applicants, the decision was based on the paper application plus a phone call and an in-person interview. In-person interviews are informal and do not follow a set format or protocol. The open-end format of the interview allows for a more complete exploration of the applicant's condition and situation. In some cases, an applicant is asked to come in to complete a request for professional verification if the eligibility technician feels one is needed. In recent months, RT has been making an effort to interview a larger portion of applicants, either by phone or in person.

The results of the determination process are entered in a database, including any conditions (or restrictions) of eligibility, and the applicant is sent a letter with the decision, information about using paratransit, and/or information about appeals. In identifying conditions of eligibility, the technicians work from a listing of more than 20 possible conditions and may add conditions as needed. A sampling of the conditions includes:

- Characteristics of specific trips such as multiple transfers, needing to cross wide streets, or travel to an unfamiliar destination.
- "Bad days" that result from the customer's disability, such as days when the disability causes extreme fatigue, blurry vision, confusion, or paranoia.
- Weather or other environmental situations when the customer's disability prevent use of fixed-route transit, such as rain, high winds, darkness, or heat.
- Other factors, including days when the customer is undergoing dialysis and a catch-all category of "days when you are unable to travel independently due to your health-related condition."

As explained in a document called "Questions and Answers about Restricted Eligibility," riders are asked to enforce conditions of eligibility themselves: "At this time, RT and Paratransit, Inc. are relying on you to self-determine your need for paratransit services for a trip based upon your eligibility status. In other words, you are 'on your honor.'"

According to RT's eligibility specialists, until recently many applicants were seeking ADA eligibility in order to qualify for the paratransit group pass, which allowed them to ride RT buses and light rail for free. The time needed to process these applications detracted from the reviewers' ability to conduct a careful review of other applications. Since the group pass has been eliminated, the volume of applications may moderate, which would allow reviewers to devote more time to each application.

Enhancements to the current process that RT may consider include:

- **Pre-screening prior to formal application.** Rather than circulating eligibility application forms in the community and making them available on its website, RT could encourage potential applicants to call for a consultation with an eligibility technician. The technician would explain the eligibility rules and then send out application materials. In addition, RT could provide community organizations with a short flyer that explains the rules and

provides a short series of self-evaluation questions that potential applicants can answer for themselves prior to calling for the complete application package.

- **Confidential professional verification.** All applicants would be required to provide an authorization for a healthcare professional to confirm information about the disability or health condition that is the basis for ADA paratransit eligibility. RT would then send a confidential inquiry to the named professional, which should be limited to confirming the disability or health condition and, if necessary, providing supplementary information about how it affects the applicant's abilities. Healthcare professionals should not be asked to render a judgment about ADA paratransit eligibility.
- **Telephone interviews of all applicants.** Assuming that the volume of applications is reduced by elimination of the ADA group pass, all applicants could be interviewed by telephone to review their application and confirm critical information. As needed this interview could be combined with a request to come to the office for an in-person interview.
- **Functional testing.** Many transit agencies conduct functions testing (also called functional assessments) for some or all applicants. A functional assessment is a task analysis used to evaluate independent ability to perform each of the functions required for the use of fixed-route public transit. For each functional area, the assessment determines whether an applicant is able to perform the functions independently, consistently, and within a reasonable level of effort or risk. Functional assessments are often conducted in a real transit environment, but may also be conducted in simulated transit conditions. Functional assessments are different depending on whether an applicant's condition will affect physical, cognitive or sensory abilities. While conducting functional assessments would add to the cost of the eligibility process, experience at other transit systems shows that the cost is more than offset by savings from not providing service to unqualified individuals.
- **Procedures for conducting trip-by-trip eligibility assessments.** Beginning with the most frequent riders with restricted eligibility and riders with relatively clear-cut conditions, paratransit staff would begin evaluating individual trip requests to determine if they require paratransit or could be made using fixed-route transit. These assessments would be conducted "off-line," not as part of the reservations process. However, the customers would be notified that their trips will be reviewed and that their trip could be determined ineligible. As needed the reviews would include field observations and interviews with riders. As reviews are completed for specific trips, the findings of these reviews would be added to customer's files so they are available to reservations agents.

Changes to the eligibility process should be the subject of a public participation process including input by paratransit riders.

**Provide and promote alternatives to ADA paratransit service.** Various methods may be used to transition more trips to RT's fixed-route system, including deviated fixed route (e.g., Neighborhood Ride), further accessibility enhancements on fixed-route service, and an expanded travel training program. All of these are already being done, but could be expanded and could become more effective in combination with an enhanced eligibility process and conditional eligibility for paratransit reservations. The TransitAction Plan includes a variety of measures that should reduce the need for ADA paratransit and make the overall public transportation system more attractive to people with disabilities. These measures are discussed more in the chapter on "Non-ADA and Supportive Services."



Some transit systems encourage use of fixed-route service by providing for free use of the service for people with ADA paratransit eligibility. However, RT's experience with this, under the paratransit group pass program, has not been positive. The program appears to have resulted in significant numbers of people applying for ADA paratransit eligibility in order to obtain the group pass. The pass was eliminated effective December 1, 2008.

**Consider using more small vehicles for paratransit service.** Some paratransit providers have found that smaller vehicles, not only minivans and station wagons but also ordinary sedans, can be used very effectively to increase service efficiency. They are faster than larger vehicles both for boarding and operation in traffic and are cheaper to operate. Sedans cannot carry wheelchair users unless they can transfer to a seat, but modern scheduling software can efficiently schedule rides onto a mixed fleet of sedans and wheelchair-accessible vehicles with no loss of productivity or user convenience. Disadvantages of a mix fleet include reduced flexibility in operations and opportunities for error such as sending an inaccessible vehicle to pick up a wheelchair user. Conflicts with customers can also arise, since many customers prefer a sedan to a small bus, but it is typically not feasible to guarantee this.

**Ask SACOG to address coordination with other organizations that have vehicles.** Members of MAC pointed out the many assisted living facilities that are being built have shuttles for the residents, as do large senior-oriented developments and many medical centers. Coordination with these organizations could help to address capacity issues on paratransit. SACOG, as the agency responsible for planning CTSA service in Sacramento County, can best address this issue.

**Redefine subscription trips and establish priorities.** An unusual feature of Paratransit, Inc.'s ADA paratransit is that only 7% of trips are booked as subscriptions. In most ADA paratransit systems, subscription trips account for 50% or more of trips. Many of these subscriptions are for people traveling to dialysis and to programs such as adult day health care and workshops. In some paratransit systems, trips for these purposes or other essential needs are given priority in determining which trips will be provided as subscriptions. It is widely believed that subscriptions improve paratransit efficiency, since schedules for these trips can be optimized over time and there is no need for call-takers to repeatedly book them. Paratransit, Inc.'s policy is to provide subscriptions only when it is more efficient to do so than to book trips through the call-in process. The current subscription policy is consistent with encouraging agencies to provide coordinated transportation under the CTSA umbrella rather than relying on paratransit. A more conventional subscription policy might have some operating advantages.

## Chapter 4. ADA Paratransit Plan

The ADA Paratransit Plan describes the basic policies which will define the services by which RT plans to comply with the complementary paratransit provisions of the Americans with Disabilities Act. These policies address the service criteria spelled out in the ADA regulations. The plan also includes forecasts of demand and operating costs, as well as a discussion of assumptions concerning trends and decisions about other services that underlie the forecasts.

### Service Area and Hours

ADA Requirement	Adopted ADA Plan	Current Practice
<p><u>Area</u> All areas within ¾ mile of a route or light rail station</p> <p><u>Hours</u> All times when a route or station is in service in each area</p>	<p><u>Area</u> Most of the RT district as of 1996 (see Figure 1)</p> <p><u>Hours</u> 6:30 AM – 12:30 AM every day. Limited trips are available prior to 6:00 AM and after 12:30 AM within ¾ of a mile of RT bus and LR service in operation.</p>	<p><u>Area and Hours</u> As in the plan</p> <p><u>Funding</u> RT’s contribution covers only the ADA-required area and hours. Paratransit, Inc. as CTSA pays for service to areas beyond the ADA-required areas and times.</p>

Revised ADA Plan Policy
Provide ADA paratransit service within the area and hours required by ADA.

The current service exceeds ADA requirements significantly in terms of service area and hours. Already, the portion of the service that exceeds ADA requirements is tracked separately and reported as Type II service. The ADA service area changes according to the routes and rail stations that are in service at any given time of day. In practice, given the current extent of fixed-route service, the size of the ADA service changes relatively little. RT is federally mandated to provide Type I trips to ADA eligible individuals; however, RT and Paratransit collaboratively fund Type I and Type II trips using RT resources and other resources available to Paratransit, Inc. as the CTSA, such as Measure A and Transportation Development Act Article 4.5 funds. The policy change clarifies that only those trips that meet the ADA requirements are considered ADA paratransit. As a party to the CTSA agreement, RT will work with others to continue providing service beyond the ADA required area and hours. Further discussion is provided in the chapter on “Non-ADA and Supportive Services.”

In some places, the ¾ mile area around a route or station may extend into a neighboring jurisdiction where RT does not operate. Depending on circumstances, paratransit to these areas may be provided directly, with financial participation by the neighboring jurisdiction, or by arranging a transfer to a neighboring operator. If a transfer is necessary, care will be taken to ensure that the trip still complies with ADA requirements regarding fares and service quality.

Over the ten-year period of the plan, the area and hours of RT bus and rail services are likely to change. For example, Scenario C of the TransitAction Plan calls for significant expansion of bus and light rail services in most of the current Paratransit, Inc. service area and some areas beyond

that. It also calls for 24-hour bus and rail service in some areas. If these changes come to fruition, the service area and hours of ADA paratransit will expand correspondingly.

## Eligibility

ADA Requirement	Adopted ADA Plan	Current Practice
<p><u>Basic requirement</u> Unable independently to use fixed-route transit due to a disability</p> <p><u>Companions and attendants</u> Must be allowed to ride with the eligible person.</p> <p><u>Conditional eligibility</u> Eligibility may be only for specific trips.</p> <p><u>Application process</u> Must strictly limit service to those who are eligible.</p>	<p><u>ADA Eligibility</u> Eligibility conforms to ADA requirements.</p> <p><u>Age Eligibility</u> Service is also provided to anyone age 75 or older.</p>	<p><u>ADA Eligibility</u></p> <ul style="list-style-type: none"> <li>• Eight-page application</li> <li>• Optional professional verification</li> <li>• Some interviews</li> <li>• Honor system for conditional eligibility</li> </ul> <p><u>Age Eligibility</u></p> <ul style="list-style-type: none"> <li>• Abbreviated application</li> </ul>

### Revised ADA Paratransit Policy

- ADA service will be defined as service to people meeting ADA disability requirements.
- Enforce conditional eligibility with clearer, simpler rules.
- Transition Age-based eligibility program to the CTSA.
- Require professional verification.

The basic definition of who is ADA paratransit eligible is the same as currently used. RT has conducted a public process to update the methods used for receiving and reviewing applications for ADA paratransit eligibility as discussed in the chapter on Issues and Trends. RT also plans to implement trip-by-trip review of conditional eligibility. In order to do this, RT plans to work cooperatively with RT’s paratransit service provider and the community to establish simplified conditions of eligibility and workable, clear-cut procedures that paratransit staff can apply with an appropriate level of effort and that customers can understand as reasonable and fair.

The revised policy regarding ADA eligibility clarifies that service for age-eligible individuals is not considered ADA paratransit. Due to fiscal constraints, RT is no longer able to fund non-ADA programs; therefore, by the end of fiscal year 2010-2011, RT will provide all individuals who are currently using paratransit service under the Age-based eligibility program an opportunity to become re-certified under the ADA paratransit eligibility criteria. Individuals determined ineligible for ADA paratransit service will be referred to the CTSA (Paratransit, Inc.) for Age-based certification. RT supports the funding of this service through state and local CTSA funding sources designated for senior and disabled transportation, within the Type I service area.

## Fares

ADA Requirement	Adopted ADA Plan	Current Practice
No more than twice the basic adult fare for a comparable fixed-route trip  Attendants ride free.  Companions pay the same fare as the eligible rider.	Maintain fares within ADA regulatory limits.	<u>Basic fare</u> Twice RT fare (currently \$4.50 per trip)  <u>Monthly pass</u> \$100 (not an ADA requirement)  Airport fare (non-ADA service) \$8

### Revised ADA Plan Policies

No change from the current adopted ADA Plan

The basic fare will change as fixed-route fares change. For example, when fixed-route fares increased from \$2.00 to \$2.25 on January 1, 2009, the basic paratransit fare increased from \$4.00 to \$4.50. Effective September 1, 2009, due to changing economic conditions, the RT Board increased the fixed-route fare to \$2.50 and the paratransit fare to \$5.00. The monthly pass exceeds ADA requirements and provides a significant discount for frequent riders. For example, a rider who makes a roundtrip every weekday pays on average less than \$2.50 per trip. The Board also increased the paratransit monthly pass price from \$100 to \$125 effective September 1, 2009. Service to Sacramento International Airport is not considered a component of ADA paratransit, and the \$8.00 fare for this service may be changed as circumstances require.

## Service Quality

ADA Requirement	Adopted ADA Plan	Current Practice
No limits on availability of paratransit service to eligible people  No trip caps  No waiting lists  No substantial number of: <ul style="list-style-type: none"> <li>• Trip denials or missed trips</li> <li>• Significantly late pick-ups</li> <li>• Excessively long ride times</li> <li>• Long hold times</li> </ul>	As required by the ADA regulations	No trip caps or waiting list to become a rider. <u>Denials</u> : 0.34% of trip requests, <u>Late trips</u> : 90% of pick-ups on-time (in the 30-minute window) <u>Long trips</u> : 95% of rides no more than 60 minutes <u>Hold time</u> : average 1.7 minutes  (All statistics are for Fiscal Year 2007-08.)

**Revised ADA Plan Policies**

- No trip caps or waiting list to become a rider.
- Serve all demand for required complementary paratransit service by ADA paratransit eligible individuals.
- Provide service that meets standards for on-time performance, ride time, and telephone hold time.

The revised policy clarifies existing policies as they pertain specifically to the ADA paratransit portion of the service. With respect to on-time performance, ride time, and telephone hold time, RT’s existing plan is to provide service that maintains service quality that does not limit the availability of paratransit service to eligible people. To provide a clearer definition of what this entails, RT will work with the community and Paratransit, Inc. to establish specific performance standards defining the levels of service that are considered acceptable, including percentages of trips that should meet each standard.

**Reservations**

ADA Requirement	Adopted ADA Plan	Current Practice
<u>Advance notice</u> Schedule and provide service in response to requests one day in advance.	<u>Advance notice</u> One or two days in advance	As stated in the adopted ADA Plan
<u>Negotiation of trip time</u> No more than one hour before or after the requested time	<u>Negotiation of trip time</u> As required	
<u>Hours</u> Normal business hours and comparable hours before every service day	<u>Hours</u> 7:00 AM to 7:00 PM every day (before 5:00 PM for next day)	
<u>Subscriptions</u> Allowed but not required	<u>Subscriptions</u> Provided if they result in efficient service	

**Revised ADA Plan Policies**

- As part of ADA Paratransit service, reservations will be taken one day in advance during normal business hours.
- No change in negotiation or subscription policy

Although only reservations made one day in advance during normal business hours will be considered part of RT’s ADA paratransit service, reservations will continue to be taken using the existing policies. However, taking reservations two days in advance, early in the morning, and in the evening will be considered non-ADA services.

## No-Show Policy

ADA Requirement	Adopted ADA Plan	Current Practice
<p><u>Suspensions</u> Service can be suspended for a reasonable period of time if riders have a pattern or practice of missing scheduled trip (no-shows)</p> <p><u>Fairness</u> No suspensions for no-shows beyond the rider's control</p> <p><u>Notice</u> Written notice is required</p> <p><u>Appeals</u> Riders must be able to appeal suspensions</p>	<p>Same as the requirements</p>	<p>Late cancellations (less than two hours ahead) are counted as no-shows</p> <p>Valid excuses for late cancellations are recorded</p> <p>No one is suspended</p>

### Revised ADA Plan Policies

No change from the current adopted ADA Plan. Enforce suspension policy.

While no change in the basic policy is planned, RT does plan to develop and implement an improved no-show process within the parameters of this policy. No-shows waste time for everyone, and there are over 1,000 no-shows per month. A small percentage of riders account for many of the no-shows that occur. In fact, 97% of riders have one or zero no-shows per month on average. The improved no-show process will be developed using a public process and will clarify how many no-shows or late cancellations can result in a suspension. It will formally establish that late cancellations (less than two hours ahead) may be counted as a type of no-show, as under the current practice. The policy will make allowance for frequent riders as suggested by FTA guidance and will ensure that no one is unfairly suspended. Once the new process is adopted, it will be enforced.

## Financial and Demand Projections

Planning for the future requires consideration of the level of demand that may be expected in the future and the financial resources that will be needed to serve that demand. This plan is intended to cover the ten years from 2009 through 2018. Demand and cost have been projected for two TransitAction Plan scenarios:

- Scenario A: Base Case – Financially Constrained to Existing Sources** assumes status quo transit and paratransit services. ADA paratransit would operate using the same hours and service area as now, growing as needed to accommodate increasing demand. As recommended in the ADA Plan, the eligibility process would be revised, including implementation of trip-by-trip eligibility determinations for riders with conditional eligibility.
- Scenario C: Integrated Transit Solution** assumes greatly expanded transit services, with a corresponding expansion of ADA paratransit services. As described more fully in

the chapter on Non-ADA and Supportive Services, Scenario C also includes services and programs that will reduce dependence on ADA paratransit such as deviated fixed-route services (e.g., neighborhood ride), universal design concepts like low-floor buses, and application of complete streets features like sidewalks and places with shade to sit.

All scenarios assume continued travel training and CTSA coordination of service for social service agencies. The projections take account of past ridership trends, projected growth in population, and comparison of Sacramento to other areas.

Scenario C is further divided into three “tiers” corresponding to services that could be implemented assuming various levels of new funding:

- **Tier 1:** Existing and committed projects and improvements that can be funded with existing funding sources (including the ¼¢ sales tax assumed in the SACOG Metropolitan Transportation Plan)
- **Tier 2:** Projects that would be implemented with an additional funding source (e.g. ½ cent sales tax)
- **Tier 3:** Projects within the overall TMP vision but that do not meet planned thresholds for service and will require changes to land-use (to generate higher density and more ridership), changes to road network planning and designation, changes to complementary measures such as local parking policies, and further funding sources (above those in Tiers 1 and 2)

Projections have been prepared through 2035, which is the period covered by the TransitAction Plan, but only the first ten years (through 2013) apply to the ADA plan. The assumptions used are as follows.

### **Base Case (Scenario A)**

- ADA paratransit trips will increase by an average of 5% per year in the first two years. This is approximately the average rate of growth in total paratransit trips seen over the past five years. The effect of having recently eliminated denials is assumed to result in continuing demand growth.
- After two years, application of the new eligibility process is assumed to result in more moderate demand growth of 3% per year.
- In the first two years, the RT contribution will increase in proportion to trips, using the budgeted amount for fiscal year 2008-09 as a baseline. A 3% annual allowance for general inflation and increasing costs of fuel has been made.
- After two years, it is assumed that an improved cost allocation process will be in place that takes account of the fact that ADA trips are shorter on average than non-ADA trips.
- Paratransit fares will grow in step with inflation.

### **Tier 1**

Same as the Base Scenario except:

- Added bus service in the existing area (“base area”) reduces demand growth to 2% beginning in the Year 5 (2013).



## **Tier 2**

Same as Tier 1 except:

- Added bus service in the base area reduces demand growth to 1% beginning in the Year 5 (2013).
- Service area expands beginning in Year 5 adding about 13% to the population in the ADA required area by Year 10.
- Service expansion adds ridership equal to about 1% of base-area ridership each year, reaching 6% of base-area ridership by Year 10.

## **Tier 3**

Same as Tier 2 through Year 10 (2018), then:

- Added bus service in the base area reduces demand growth to 0% beginning in Year 11 (2019).
- Service area expansion continues through 2035 adding about 31% to the population in the ADA required area by 2035 (total added compared to base area).
- Service expansion adds ridership equal to about .05% of base-area ridership each year beginning in Year 11, reaching 14.5% of base-area ridership by 2035.

All of the Tiers assume that implementation of new service and expansion of the service area will await development of new revenue sources. As a result, all of them have relatively slight impacts on demand and cost in the ten years of the ADA Paratransit Plan. Briefly:

- Tier 1 reduces demand due to added bus service without adding any significant service area.
- Tier 2 is virtually identical to Tier 1 through 2013 because added ridership from service area expansion balances demand reduction due to service additions within the base area.
- Tier 3 affects only the years after 2018. Demand added by expanding the service area is more than offset by demand reductions in the base area due to reduced headways and infrastructure improvements.

**Figure 12 Projected Demand and Operating Costs: 2008 – 2018**

Fiscal Year	Base Case		Tier 1		Tier 2		Tier 3	
	ADA Trips	Cost to RT	ADA trips	Cost to RT	ADA trips	Cost to RT	ADA trips	Cost to RT
2008	256,695	\$10,969,000	256,695	\$10,969,000	256,695	\$10,969,000	256,695	\$10,969,000
2009	263,298	\$11,846,520	263,298	\$11,846,520	263,298	\$11,846,520	263,298	\$11,846,520
2010	276,463	\$11,312,585	276,463	\$11,312,585	276,463	\$11,312,585	276,463	\$11,312,585
2011	284,756	\$12,001,521	284,756	\$12,001,521	284,756	\$12,001,521	284,756	\$12,001,521
2012	293,299	\$12,732,414	293,299	\$12,732,414	293,299	\$12,732,414	293,299	\$12,732,414
2013	302,098	\$13,507,818	299,165	\$13,376,674	299,194	\$13,448,556	299,194	\$13,448,556
2014	311,161	\$14,330,444	305,148	\$14,053,534	305,178	\$14,201,740	305,178	\$14,201,740
2015	320,496	\$15,203,168	311,251	\$14,764,643	311,252	\$14,993,790	311,252	\$14,993,790
2016	330,111	\$16,129,041	317,476	\$15,511,733	317,417	\$15,826,613	317,417	\$15,826,613
2017	340,014	\$17,111,300	323,826	\$16,296,627	323,673	\$16,702,212	323,673	\$16,702,212
2018	350,215	\$18,153,378	330,303	\$17,121,236	330,024	\$17,622,679	330,024	\$17,622,679
2035	578,851	\$49,593,309	462,503	\$39,625,145	390,848	\$34,495,949	356,488	\$32,602,931

Note: ADA Paratransit trips and cost only. Additional trips and cost for age-eligible service not included.

## **Chapter 5. Non-ADA and Supportive Services**

While the main subject of this plan is ADA complementary paratransit, RT recognizes that other services will be necessary in order to meet the local travel needs of people with disabilities and seniors. ADA paratransit is a limited “safety net” of services that are required as a matter of civil rights to ensure that people with disabilities have public transportation service that is comparable to the service that is available to people who can use RT’s bus and rail services. ADA paratransit is not, and was never intended to be, a comprehensive service that meets all the needs of people with disabilities. Examples of services not included in ADA paratransit include:

- Service for people with disabilities who are ADA paratransit eligible and seniors who have curtailed driving but who live beyond the ADA service area or who need to travel when ADA paratransit does not operate.
- Service for people with disabilities who are ADA paratransit eligible, but who need more assistance that can be provided by ADA paratransit.
- Same-day service for urgent, but non-emergency needs.

Currently RT and Paratransit, Inc. provide a variety of services that address these needs. Some of these have been included in prior ADA paratransit plans but are not included in the current plan. Currently these services are supported in large part by funding that Paratransit, Inc. is able

to claim because of its designation by SACOG as a Consolidated Transportation Services Agency for Sacramento County. The principal funding sources are:

- **Measure A.** A portion of the Measure A sales tax is dedicated to “Senior and Disabled Transportation Services.” The original Measure A ran from 1989 to 2009. Voters approved a new, thirty-year Measure A in 2004, which will run from 2009 to 2039. For the first ten years of the new Measure A, which coincide with the period of this plan, 3.5% of the sales tax revenue will be provided to the CTSA based on a five year, annually updated business plan recommended by the CTSA and approved by the Sacramento Transportation Authority Board. Some of these funds replace funds that have been provided to the CTSA by the City and County of Sacramento. The percentage of sales tax revenue dedicated to Senior and Disabled Transportation Services is planned to go up to 4.5% in years 11 through 20 and to 5.5% in years 21 through 30 of the new Measure A. The new Measure A expenditure plan estimated that \$212 million would be provided to the CTSA over 30 years.
- **Transportation Development Act, Article 4.5.** Under Article 4.5 of the California Transportation Development Act (TDA), a portion of funds generated for each county's Local Transportation Fund (LTF), which is derived from a ¼ cent of the general sales tax, can be claimed by CTSA's for, “community transit services, including such services for those, such as the disabled, who cannot use conventional transit services.” Up to 5% of the LTF, after funding is taken out for administration, planning, and pedestrian and bicycle project, can be allocated under Article 4.5.

RT plans to continue to support use of the Measure A and TDA Article 4.5 funds to provide paratransit services that go beyond ADA requirements. These are described in more detail later in this chapter.

In addition to supporting funding for non-ADA paratransit, RT plans to provide expanded transit services that will be attractive for many older people and people with disabilities. RT will also support policies that will help create streets and neighborhoods in which older people and people with disabilities can more easily walk to destinations and to and from RT's bus and rail services. These services and policies are described in more detail in the TransitAction Plan and are briefly summarized later in this chapter.

## **Non-ADA Paratransit**

This section describes paratransit services that go beyond ADA requirements that are currently provided by Paratransit, Inc. or might be added in the future. Decisions about the future of these services will depend on funding and discussions among a variety of organizations, including RT, Paratransit, Inc., SACOG, the City and County of Sacramento, other cities, community organizations, and individual seniors and people with disabilities. RT will participate in these discussions and continue to support use of Measure A and TDA Article 4.5 funds to help pay for non-ADA paratransit services.

**Age-eligible service.** Prior ADA paratransit plans have included service for anyone age 75 or older. Anyone age 75 or older can submit an abbreviated application to RT. Applicants need only provide proof of age based on a copy of their driver's license, State of California ID card, birth certificate, or passport. Many people who receive age eligibility would probably qualify for ADA eligibility if they were to apply. Under existing rules, however, it is much easier for them to apply for age eligibility. Although Paratransit, Inc. keeps track of the number of trips provided to

age-eligible riders, there is no difference in the service provided to age-eligible and ADA-eligible riders. Depending on funding and demand for the federally-mandated service to ADA-eligible riders, it is possible that limits might need to be placed on age-eligible service at some time in the future. In that case, many age-eligible customers would probably apply for and obtain ADA eligibility.

**Service beyond the ADA-required service area.** Prior ADA paratransit plans, the last of which was completed in 1997, have included service to most of the RT district at that time. Paratransit, Inc. provides service throughout this area for both ADA-eligible and age-eligible riders. The portion of service provided to origins or destinations beyond the ADA-required service area (three-quarters of a mile around RT bus routes and rail stations that are operating at the time of the trip), is considered “Type II” service. Paratransit, Inc. tracks statistics about Type II trips, but otherwise there is no difference between ADA service and Type II service. The future of Type II service will depend on a variety of factors:

- Over the ten-year period of the plan, the area and hours of RT bus and rail services are likely to change. For example, Scenario C of the TransitAction Plan calls for significant expansion of bus and light rail services in most of the current Paratransit, Inc. service area and some areas beyond that. It also calls for 24-hour bus and rail service in some areas. If these changes come to fruition, many trips now considered Type II service would become ADA service.
- Population in the current non-ADA service area will probably grow faster than population in the current ADA service area. As detailed earlier, SACOG projections indicate that population in the non-ADA (Type II) service area will grow by 33% between 2005 and 2013 compared to 7% in the ADA service area.
- Type II trips tend to be longer than ADA trips, and therefore more expensive to provide. As detailed earlier Type II trips are 49% longer than ADA trips.

These trends, combined with increasing demand for ADA-mandated service and funding limitations, could make it necessary to limit the availability of Type II service in some way at some time in the future. At the same time, RT hopes to reduce the need for both ADA and Type II paratransit service through expanded bus and rail services and the other “supportive services” described later in this chapter.

**Extended reservations period.** At present, Paratransit, Inc. takes reservations one day in advance from 7:00 AM to 5:00 PM and two days in advance from 7:00 AM to 7:00 PM. Under this ADA plan, only taking reservations one day in advance during normal business hours will be considered part of RT’s ADA paratransit service. While no change in practice is planned, taking reservations two days in advance, early in the morning, and in the evening will be considered non-ADA services. At this time, there does not appear to be any operational or financial reason to change the current practice.

**Airport service.** Paratransit service to Sacramento International Airport has always been considered non-ADA service. It is offered at a premium fare.

**Coordinated social service agency service.** A major portion of Paratransit, Inc.’s activity consists of coordination of service provided by and for numerous social service agencies. This activity is carried out by Paratransit in its capacity as CTSA and is separate from the paratransit service provided in cooperation with RT. The CTSA trips include trips to adult day health care, to senior nutrition program, and to training and jobs for people with developmental disabilities under

the auspices of Alta California Regional Center. It is included here for the sake of perspective and completeness. In addition, the existence of this CTSA service probably reduces the demand for ADA paratransit. As a result of CTSA service, very few ADA paratransit trips are provided to social service programs. In comparison, trips to social service programs typically take up half or more of the capacity of ADA paratransit services in other metropolitan areas.

**Other services.** Other non-ADA service could be added in the future as funding permits. Possible additions to service might include same-day reservations for urgent trips (not including medical emergencies) and door-through-door service involving an added degree of assistance to riders.

## Supportive Policies and Services

The TransitAction Plan that has been developed in parallel with this ADA Paratransit Plan lays out a vision for RT through 2035 that would reduce the need for ADA Paratransit by providing transit services that are more attractive to and usable by people with disabilities and seniors. Features envisioned in the TMP include:

- Expanded transit services of all types, including more frequent local bus service, bus rapid transit, and light rail.
- Local shuttle services that provide direct service to popular locations (e.g. airport or shopping malls)
- Neighborhood Circulators. These services can bring passengers to higher capacity services (e.g. rail or high frequency bus services). They can also be used to serve areas where larger vehicles cannot operate – either due to the size of the roads or lower levels of passenger demand. Typically they use smaller vehicles carrying 18-35 passengers. Drivers may offer more personalized assistance than on conventional bus services, and buses may deviate (go off route) in response to passenger requests to reduce walking distances.
- Shelters, stops, and park and rides with climate-controlled areas, real-time information about bus and train arrivals, and video cameras for greater security.
- Landscaping, tree planting and public art integrated into the design of waiting areas.
- Convenience facilities integrated with park and ride sites (e.g. car washing, dry cleaning, coffee shops, etc.)
- Wayfinding to help passengers get to and from key shopping, government, education and tourist destinations
- “Complete streets” and corridors to provide safe and easy access to the transit system. (Complete streets are roadways designed and operated to enable safe, attractive, and comfortable access and travel for all users. Pedestrians, bicyclists, motorists and public transport users of all ages and abilities are able to safely and comfortably move along and across a complete street.)

RT also envisions incorporating universal design principles in future services. Universal design stresses features that are attractive and easy to use for the broadest possible spectrum of people, including but not limited to people with disabilities. Applications of universal design in transit service might include low-floor vehicles, clear audio and visual stop announcements, smooth pedestrian pathways, wider walkways, and the wayfinding aids mentioned above.