

Metro Board Approved Policy

Coordinated Public Transit Human Services Transp.

Adopted: January 24, 2008

Historical Perspective

Full name of policy is: Coordinated Public Transit Human Services Transportation Plan.

LACMTA, as the Designated Recipient for federal JARC and NF funding for Los Angeles County, is responsible for conducting a competitive selection process for available finding and awarding grants to sub-recipients. LACMTA must also certify that the selection process employed has resulted in a fair and equitable distribution of funds and that the projects selected for funding were derived from a locally developed, coordinated public transit human services transportation plan ("the Coordinated Plan").

**Locally Developed, Coordinated
Public Transit-Human Services Transportation Plan
For Los Angeles County**

Prepared By:

Access Services, Inc. in Cooperation with
Los Angeles County Metropolitan Transportation Authority

DECEMBER 2007

A Locally Developed, Coordinated Public Transit-Human Services Transportation Plan for Los Angeles County Executive Summary

This Plan establishes the construct for a unified comprehensive strategy for transportation service delivery in Los Angeles County that is focused on unmet transportation needs of elderly individuals, persons with disabilities and individuals of low income.

THE COORDINATED PLAN: FEDERAL GUIDANCE REQUIRING THIS PLAN

This plan is prepared in response to the coordinated planning requirements of SAFETEA-LU (Safe, Accountable, Flexible, Efficient Transportation Act – A Legacy for Users, P.L. 190-059), set forth in three sections of the Act: Section 5316-*Job Access and Reverse Commute*, Section 5317-*New Freedom Program* and Section 5310-*Elderly Individuals and Individuals with Disabilities Program*. The Los Angeles County Metropolitan Transportation Authority (Metro) is the designated recipient for Sections 5316 and 5317 funds and will be responsible for programming such funds in accordance to federal guidelines.

The coordinated plan establishes a comprehensive strategy for transportation service delivery in Los Angeles County focused on unmet transportation needs of elderly individuals, persons with disabilities and individuals of low income. The coordinated plan must contain the following four (4) required elements:

- An **assessment of available services** identifying current providers (public and private);
- An **assessment of transportation needs** for individuals with disabilities, older adults, and people with low incomes — this assessment can be based on the experiences and perceptions of the planning partners or on data collection efforts and gaps in service;
- Strategies and/or activities and/or projects** to address the identified gaps between current services and needs, as well as opportunities to improve efficiencies in service delivery;
- Priorities for implementation** based on resources (from multiple program sources), time, and feasibility for implementing specific strategies and/or activities identified.

Access Services Inc. initiated development of this coordinated transportation plan as Los Angeles County's designated consolidated transportation services agency (CTSA). The Los Angeles County Metropolitan Transportation Authority (Metro) is the designated recipient for the funds discussed in this plan and will be responsible for its implementation. It was logical that Access Services be responsible for the plan preparation given its ongoing responsibility for related plans of the Social Services Transportation Improvement Act of 1979, consistent with California Code Sections 15975 and 15951-15952 which require that transportation planning agencies and county transportation commissions to prepare and adopt a coordinated plan.

APPROACH TO THE PLAN

The planning process involved quantitative analyses, including a demand estimation to gauge need and an inventory survey of countywide stakeholders to identify resources, needs and potential partners. Qualitative activities included public meetings and interviews with major agencies and organizations funding human services, with a representative group of direct service providers, and with representatives of the target group constituencies.

A critical element of the plan development approach was the **Strategic Planning Committee**. This group was formed from an invitee list of almost fifty organizations, including transit operators, elected officials, Federal Transit Administration officials, neighboring county representatives, and human services organizations serving Los Angeles County constituencies.

DEMAND ESTIMATION FINDINGS

A census-based estimate of demand was undertaken to identify the Los Angeles County target population and their potential trip demand. A range of 1.06 million to 1.77 million persons was estimated for the target population. These individuals are adults between the ages 16 to 64 who are low income or disabled and seniors age 65 and older. They represent between 11 percent and 19 percent of Los Angeles County's 2000 population of 9.5 million residents.

This proportion of the population was projected using general population estimates developed by the Southern California Association of Governments (SCAG) with other assumptions about changes in the senior population and the base adult population. These projections suggest that increasing proportions of Los Angeles County residents will be within the target populations, as follows:

- by 2010, up to 2.1 million persons or **20 percent of the population**;
- by 2020, up to 2.4 million or **21 percent of the population**; and
- by 2030, up to 2.7 million persons or **22 percent of the population**.

Trip demand was estimated for the target population. Average trips per day were estimated, as well as, the proportion of public transit trips. Potentially ranges of 58 to 97 million trips were projected to be needed by adults who are low income or disabled and seniors. In addition, those trips requiring special assistance were estimated at 10 percent of the total trips, reflecting of range of 5.8 to 9.7 million trips, which are not now provided or not adequately provided.

This contrasts favorably with the 6.5 million documented trips provided by the public paratransit providers in Los Angeles County, suggesting that the levels of unmet need are not impossible to meet and are within the range of what is now provided. This plan examines the characteristics and nature of those specialized transit trips that are needed and not currently available.

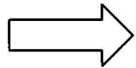
STAKEHOLDER INVENTORY FINDINGS

A total of 208 inventory surveys were returned from an extensive, countywide stakeholder listing, reflecting a 5.4 percent response rate. Although below a typical response rate of 7 to 15 percent for such surveys, respondents were nonetheless representative of the type and breadth of agencies and organizations in Los Angeles County involved with transportation to the target populations.

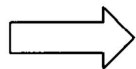
Inventory respondents were reasonably distributed among the five Metro sectors with the greatest number (31 percent) from the Westside/Central areas and the fewest from the South Bay (13 percent) and Gateway Cities (13 percent) respectively. Respondents' legal characteristics included: 48 percent private, non-profit agencies; 33 percent public agencies, 15 percent private for-profit agencies and four percent faith-based organizations. Key findings from the stakeholder survey included:



Medical trips ranked as the number one trip need by the human services organizations and **long-trips, beyond the local community**, ranked as the number one trip need by the public transit agencies. These are often the same type of trip, as medical trips generally require medium to longer distance travel, with medical destinations frequently outside jurisdictional boundaries and not served by locally oriented transportation providers.

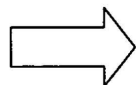


The **most frequently noted barrier** to coordination was the “**mixing**” of **clients** and consumers on transportation services. This issue is reported by agencies and organizations in other settings and presents challenges, especially in operating environments where vehicle resources are limited and where the profile of the client/customer base is varied, such as dialysis patients, adult day health care consumers and low-income children attending daycare. Another common barrier was **uncertainty about with whom to coordinate** where agencies indicated potential willingness to coordinate but no clarity as to with whom to do so.



Significant numbers of agencies indicated **interest in coordination**, while slightly over one-third of respondents indicated they were “not interested in coordination.” Among the coordination topics with the largest supporting groups were:

- Coordinated trip scheduling and dispatch – 22 percent
- Contracting with other agencies to provide trips – 15 percent
- Coordinated vehicle/ capital purchases – 15 percent
- Pooling or sharing of vehicles – 13 percent
- Joint purchase of equipment, supplies, insurance – 13 percent
- Shared fueling, maintenance, storage facilities – 12 percent



Public transit operators, for the most part, have predictable and stable funding sources, which include Federal, State, and local sources. Human services organizations report high levels of dependency upon donations and fees, with limited on-going funding. Surveyed human services agencies reported that more than half of their transportation funding (53 percent) goes to bus pass and token purchases.

STAKEHOLDER INVOLVEMENT PROCESS RESULTS

The stakeholder involvement effort included meetings and interviews with stakeholders, termed “appropriate planning partners” by the FTA. This included management and staff representatives of human services agencies and organizations, clients and consumers, public transit staff, and other governmental personnel. Key findings were characterized in terms of: 1) transportation needs; 2) barriers to coordination; and 3) suggestions for potential coordination projects. This process allowed considerable participation by stakeholders in the coordination “dialogue” and incorporation of significant stakeholder input into the plan.

NEEDS ASSESSMENT, RESOURCES AND GAPS

The unique and individualized needs reported and expressed through the inventory and stakeholder involvement processes were significant. These were discussed in two dimensions. First, in relation to *consumer-oriented characteristics* of need, including those of frail and able-bodied seniors, persons with a variety of disability-types, and low income individuals, including families and homeless persons. Secondly, *organizationally-oriented characteristics* of need include the trip types needed, the importance of on-time performance, transit pass and bus token issues, expanded hours and days of service, information needs, and bus facility requirements of safe transfer locations and bus shelter amenities, including bathrooms. Gaps in service were characterized as follows:

Institutional Communication Gaps exist, contributing to the difficulties of working between two very distinct service systems. For public transit, operating transportation services are its core business, around which significant infrastructure has been built. For human services agencies, transportation is a support service and often viewed as a distraction from agencies’ primary purposes.

Service Capacity is an issue where certain trip needs of the target populations are not being met, despite a significant Los Angeles County network of public transportation.

Meeting Individualized Needs remains a critical characteristic of the unmet specialized transportation need of this region. Providing service to those difficult-to-serve groups or difficult-to-meet trips are the challenges of this planning effort.

Improving Performance of Demand Response Services is critical to consumers and their agency and organization representatives, issues related to service quality. These include addressing on-time performance, late pick-ups, late arrivals, too-long travel times and no-show vehicles. Reliability of paratransit services is an important issue where problems can translate into critical situations for frail, vulnerable and dependent populations.

Improving Communication between Drivers, Dispatchers and Passengers is critical to improving the capability of services to address consumers’ mobility needs. This includes expanding transit’s ability to meet the diverse language needs of Los Angeles’ populations, evident particularly among frail elderly persons who do not speak English.

Non-emergency Medical Trips and Inter-Community Medical Trips surfaced as the consistently difficult-to-meet trip type needed across all groups. This is exacerbated in California by state-level policy related to MediCal reimbursement and in Los Angeles particularly where medically-oriented trips are typically long trips to distant regional facilities.

MEETING COORDINATION REQUIREMENTS AND TRANSLATING NEEDS INTO PROJECTS

The myriad of individualized needs emerging through discussions with agency representatives and with consumers helped develop project needs. Projects are discussed in relation to the ***type of consumer***, as with senior transportation, or the ***types of trips needed***, as with non-emergency medical transportation, or the ***types of transportation improvements*** necessary to effectively serve members of the target populations. Exhibit E-1 lists the gaps identified from stakeholders and provides examples of potential projects to meet those gaps.

Target Population	Special Transportation Needs and Concerns	Type of Transportation Modes	Potential Transit or Transportation Projects
Seniors, Able-Bodied	<ul style="list-style-type: none"> - Lack of knowledge about resources. - Concern about safety and security - Awareness of time when driving might be limited. 	<ul style="list-style-type: none"> - Fixed- route transit - Point deviation and deviated FR - Senior DAR - Special purpose shuttles: recreation, nutrition, shopping 	<ul style="list-style-type: none"> - Educational initiatives, including experience with bus riding BEFORE it is needed. - Buddy programs and assistance in "trying" transit - Transit fairs, transit seniors-ride-free days
Seniors, Frail and Persons Chronically Ill	<ul style="list-style-type: none"> - Assistance to and through the door. - On-time performance and reliability critical to frail users. - Assistance in trip planning needed. - Need for shelters - Need for "hand-off" for terribly frail 	<ul style="list-style-type: none"> - ADA Paratransit - Emergency and non-emergency medical transportation - Escort/ Companion Volunteer driven services - Special purpose shuttles 	<ul style="list-style-type: none"> - Escorted transportation options - Door-through-door assistance; outside-the-vehicle assistance. - Increased role for volunteers. - Technology that provides feedback both to consumer and to dispatch; procedures to identify frailest users when traveling. - Individualized trip planning and trip scheduling assistance. - Mileage reimbursement programs. - Appropriately placed bus shelters.
Persons with Disabilities	<ul style="list-style-type: none"> - Service quality and reliability - Driver sensitivity and appropriate passenger handling procedure - Concerns about wheelchair pass-bys - Need for shelters - Sometimes door to and through door or issues of "hand-off" 	<ul style="list-style-type: none"> - ADA Paratransit - Emergency and non-emergency medical transportation - Special purpose shuttles - Escort/ Companion Volunteer driven 	<ul style="list-style-type: none"> - Continuing attention to service performance; importance of time sensitive service applications - Driver education and attention to procedures about stranded or pass-by passengers with disabilities. - Aggressive program of bus shelters - Information as universal design solution
Persons of Low Income and Homeless Persons	<ul style="list-style-type: none"> - Easy access to trip planning information - Fare subsidies (bus tokens or passes) that can be provided in a medium that is not cash - Availability of tokens or passes - Breaking down the culture of poverty that uses transportation as the difficulty for not moving about the community. - Difficulties of mothers with multiple children - Need to bring along shopping carts 	<ul style="list-style-type: none"> - Fixed-route transit - Point deviation and deviated FR - Special purpose shuttles (work, training, Sp Ed.) 	<ul style="list-style-type: none"> - Train the trainers, staff who can train consumers to access public transit. - Creative fare options available to human services agencies. - Increased quantity of bus tokens available. - Bus passes available to those searching for jobs or in job training programs; cost-effective. - Special shuttles oriented to this population's predictable travel patterns. - Education extensive about transit; continued work to improve transit service levels (coverage, frequency, span of hours)
Persons with Sensory Impairments	<ul style="list-style-type: none"> - Difficulty in accessing visual or auditory information. - Possible door-to-door for visually impaired 	Same as for frail seniors	<ul style="list-style-type: none"> - Information in accessible formats - Guides (personal assistance) through information - Driver training critical to respond to needs.
Persons with Behavioral Disabilities	<ul style="list-style-type: none"> - Medications make individuals sun-sensitive and waiting in the sun is not an option. - Medications make for thirstiness; long hour waits in the heat can lead to dehydration. - Mental illnesses can make it frightening to be in the public spaces such as public bus stops. - Impaired judgment and memory makes for poor decision- 	<ul style="list-style-type: none"> - ADA Paratransit - Emergency and non-emergency medical transportation - Special purpose shuttles - Escort/ Companion Volunteer 	<ul style="list-style-type: none"> - Possibly special shuttles oriented to these known predictable travel needs. - Aggressive program of bus shelters - "Hand-off" can be critical to pass rider to a responsible party. - Important that driver understand riders' conditions.

PRIORITIES FOR PROJECT SELECTION

Meeting the specialized transportation needs of the three diverse and often overlapping segments of the population, seniors, persons with disabilities and low-income individuals is challenging. Actions and strategies developed will be incrementally effective in improving services, by providing a wider array of travel options to the target populations. This can be accomplished by gradually building the capacity of public transit and human service agencies/organizations to implement coordinated projects and programs. Both public transit and human service agencies/organizations must be active partners in this capacity building process.

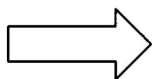
The actions necessary to increase the capacity of public transit to offer improved access and availability of transportation options for the target populations will differ from those actions and strategies needed to build capacity for human services transportation. Moreover, the need to build the capacity and reliability of human service transportation providers to complement public transportation services is critical, since the overall mission of these agencies/organizations is to serve individualized need, including operating services that public transportation cannot offer (e.g., non-emergency medical, door-through-door and escorted trips). For these reasons, project opportunities designed to strengthen the ability of human service agencies to continue to provide the hard-to-serve trip needs of seniors, persons with disabilities and low-income individuals should be encouraged.

Priorities relative to the development and funding of coordinated transportation projects identified through the locally developed comprehensive unified plan should:

1. Adequately address the unmet/underserved and individualizes transportation needs of the targeted populations;
2. Maintain consistency with current Federal and State funding regulations and requirements;
3. Be financially sustainable;
4. Include measurable goals and objectives, largely developed by the applicants;
5. Build and/or increase overall system capacity and service quality; and
6. Leverage and maximize existing transportation funding and capital resources, including human services funding.

PLAN VISION, GOALS AND RECOMMENDATIONS

A vision is proposed for Los Angeles County's locally developed plan:



**IMPROVED COMMUNITY MOBILITY FOR LOS ANGELES COUNTY SENIORS,
PERSONS WITH DISABILITIES AND PERSONS OF LOW INCOME**

To this end, we developed four (4) goals, supported by sixteen (16) implementing objectives to accomplish coordination in the county. In addition, a total of forty-two (42) implementing actions, strategies or projects are recommended. The goals, objectives, implementing actions or strategies and recommended projects are presented below and outlined in Chapter 8 of the full plan document, specifically in Table 8-2. The goals are responsive to the Federal guidance for the locally developed plan and establish the roadmap by which mobility needs of the Los Angeles County target populations can be addressed. The implementing strategies are the methods by which gaps in services and opportunities for

improved efficiencies may be effectuated, through various coordinated initiatives. The four goals and the potential projects suggested follow.

GOAL 1 - COORDINATION INFRASTRUCTURE

Given the level and diversity of needs in the county, a regional approach to facilitating coordination is needed, as no one agency or organization has the resources to effectuate the necessary cultural, institutional and operational changes needed to accomplish coordination goals. Coordination in Los Angeles County cannot be accomplished without dedicated staff and financial resources. Projects funded under this goal should establish and/or further the development of a mobility manager concept, to be implemented at a regional level, sub-regionally and at agency levels. This includes:

FUNDING CATEGORY: COORDINATION INFRASTRUCTURE
Projects submitted under this category should generally: <ol style="list-style-type: none">1. Establish a Regional Mobility Management capability to provide leadership on coordination of specialized transportation within Los Angeles County.2. Conceptualize tools to support voluntary, agency-level mobility manager capabilities and recruit human services and public transit agency participation.3. Develop visibility around specialized transportation issues and needs, encouraging high level political and agency leadership.

GOAL 2 – BUILDING CAPACITY

Acknowledging that more transportation capacity is needed to meet the needs of a growing population within Los Angeles County, this goal proposes more trip options for the target populations. This goal inherently requires a strengthening of the ability of human service agencies to provide trips that public transit cannot, thereby increasing not only capacity but access to services. The notions of reliability, quality of service and service monitoring are reflected under this goal, important for both public transit and human service agency transportation providers. Projects and activities under this category could involve the following:

FUNDING CATEGORY: BUILDING CAPACITY
Projects submitted under this category should generally: <ol style="list-style-type: none">1. Promote policies to increase the <u>quantity</u> of public transit and specialized transportation provided.2. Improve the <u>quality</u> of public and specialized transportation, with attention to meeting individualized needs.3. Improve transportation solutions between cities and between counties.4. Make capital improvements to support safe, comfortable, efficient rides for the target populations.5. Establish mechanisms to support transportation services provided by human services agencies.6. Establishing procedures to measure the quantities of trips provided, existing and new.

GOAL 3 – INFORMATION PORTALS

The need to broaden the reach of information related to transit and specialized transportation services for clients/consumers, as well as stakeholder agencies and organizations is critical. Los Angeles County has a wealth of transportation service resources. Points of access to transportation information must be expanded to make it easier for everyone to understand and use the transportation network. Activities proposed under this goal include:

FUNDING CATEGORY: INFORMATION PORTALS
Projects submitted under this category should generally: <ol style="list-style-type: none">1. Integration and promotion of existing information strategies, including 211, web-based tools and Access Services RideInfo to help get public transit and specialized transportation information to consumers.2. Development of information portal tools for wide distribution of existing information.3. Promoting opportunities to disseminate transportation information for human services agency line staff and workers.

GOAL 4 – COORDINATION POLICIES

There is a need to effectuate changes to governmental policies and practice that may discourage coordination – at local, regional, state and federal levels for the purpose of realizing coordination goals between the two systems. For example, there is a continuing effort to challenge and potentially change Medi-Cal reimbursement policies at the state level. Other policies will need to be identified and addressed over time, in part through measurement of the success, failure and impacts of implemented projects. Activities developed under this goal may include:

FUNDING CATEGORY: COORDINATION POLICIES
Projects submitted under this category should generally: <ol style="list-style-type: none">1. Work to establish non-emergency medical transportation policies to more cost-effectively meet medically-related trip needs.2. Establish processes by which implemented projects are evaluated against goals set by applicant agencies.3. Report on project successes and impacts at direct service levels, sub-regional levels and countywide levels and promote project success at state and federal levels.4. Review policies related to transportation of target population members between counties where the policies are a deterrent to transporting individuals to medical facilities within a reasonable distance of county borders.

SEQUENCING AND PRIORITIZATION OF RECOMMENDATIONS

Public transit and human service agencies/organizations providing specialized transportation service in Los Angeles County are documented in this plan as extensive and substantially funded. This plan proposes the enhancement and improvement of the existing network of services through coordination – specifically for seniors, persons with disabilities and persons of low income. A coordination vision is proposed of improved mobility for the target populations.

To accomplish this vision, several dozen implementing actions and strategies have been detailed in the body of the report with the expectation that there will be incremental implementation and refinement of actions and strategies over the next few years. The

strategies outlined should be viewed as guidance for public transit and human service agencies, as actual projects developed by stakeholders will be based upon their specific needs, resources and ability and willingness to work to establish coordination relationships with others.

Activities for an initial phase are recommended as follows.

ESTABLISHING COORDINATION INFRASTRUCTURE (GOAL 1)

Los Angeles County Regional Mobility Manager

The establishment and implementation of the regional mobility manager (RMM) function and gradual development of sub-regional mobility managers in at least 5 subregions in the county are the fundamental recommendations of the Plan. It is recommended that a regional mobility manager, including the governance body or technical advisory body discussed in the detail in Chapter 8, be put into place within one to two years.

As discussed previously, RMM roles and responsibilities can either be designated to an existing agency/organization, or a newly created entity can be formed. The RMM should further the goals outlined in the plan, and continue efforts to establish relationships between public transit and human service agencies, including technical assistance and cooperation with subregional mobility managers to develop coordinated transportation plans, programs and projects.

Subregional Mobility Managers

It has been demonstrated that although regional responses to planning can be effective in establishing the infrastructure needed to effectuate coordinated actions, knowledge of the transportation needs at the subregional level is important to support the regional goals and more adequately address individual needs.

Conceivably, a subregional mobility manager could be a public transit agency or organization, a human service agency/organization or a representative partnership of both agency/organization types within the same subregion. A total of five subregional mobility managers are envisioned consistent with the Metro service sector boundaries. There will likely be a developmental process to gradually increase the scope of these subregional entities to build and maintain viable partnerships. These entities would work cooperatively with and support the RMM in the development of plans and projects within their subregion, as well as, participate as members of the RMM advisory body.

Priority Phase 1 Strategies and Concepts

There are a few “basic” strategies and project concepts that if developed early, will work to support and promote the framework of a coordinated transportation environment as it matures. These can be funded in the near-term (i.e. 1-2 years). It is recommended that the RMM and/or other public transit and human services agencies/organizations explore the feasibility of implementing these strategies/project concepts at the regional and subregional levels. Strategies and project concepts to be immediately implemented can include:

- **IMPLEMENTATION OF A TRAVEL TRAINING PROGRAM FOR AGENCIES/ORGANIZATION STAFF AND THEIR CLIENTS.** A county-wide Travel Training program can become a focus of information exchange between agencies. A county-wide program will encourage greater utilization of transit for those in the targeted populations who can

and would use public transportation. Agency staff desiring to arrange transportation or refer their clients to transit, as well as, new and prospective clients and customers needing to travel to their various destinations would be candidates for training, participating in group training for both fixed-route and paratransit.

- **PUBLIC TRANSIT SHOULD DEVELOP A DATA COLLECTION PROCESS DESIGNED TO ASSIST HUMAN SERVICE AGENCIES AND ORGANIZATIONS.** Human service agencies operating transportation and their contractors must establish reliable trip counting procedures to ensure accuracy and consistency in accounting for senior, persons with disabilities and low-income persons' trips provided in the county. At a minimum human service agencies should be collecting data in the following categories:
 - One-way passenger boardings
 - Passenger pick-up and drop-off points by zip code
 - Passenger pick-up and drop-off points by street address
 - Passenger trip purpose
 - Time of day

The design of data collection methodologies should reflect an understanding of the issues of collecting and reporting certain categories of client information relative to the Health Insurance Portability and Accountability Act (HIPAA) and the Lanterman Developmental Disabilities Act as these relate to client confidentiality.

Improved trip counting and reporting will provide information on the level of services operated in the county, and help to identify patterns of travel. This will also encourage participation of human service agencies as partners with public transit in the planning and development of coordinated services. Moreover, data collection efforts should also be used to gain the necessary financial support and resources from Federal and State agencies and as a means to more clearly identify client and consumer needs in the county.

- **PROMOTE COORDINATED SERVICE DELIVERY MODELS THAT EMPLOY THE USE OF VOLUNTEER LABOR.** Focused in structured, defined geographic settings, the use of volunteers has been demonstrated to be highly successful in helping to meet the individualized mobility needs this plan identifies.
- **CONDUCT AN ANNUAL INVENTORY PROCESS TO CONTINUE TO BUILD AND NURTURE THE COORDINATION ENVIRONMENT.** This activity will serve to ensure that the data and information on transportation services, resources and needs is updated, which will provide a relatively sound basis for ongoing, coordinated planning activities.
- **DEVELOP ADDITIONAL PROCESSES TO FACILITATE BUS PASS PURCHASE PROGRAMS ON BEHALF OF CONSUMERS.** Many human services dollars go to purchase of bus passes and tokens but numerous problems exist around procuring these for agencies and their consumers.

The complete Plan is available on-line at www.metro.net/projects_plans/default.htm.