



Transportation for Older Adults

How can we enhance mobility in our rapidly aging region?

To gather a range of professional and provider perspectives on transportation for older adults in our region, Connecticut Community Foundation held three focus groups and three supplementary meetings from August-October 2015. There were 30 participants representing seven municipalities, three regional transit providers, Western CT Agency on Aging, home care, senior services, housing and philanthropy.

What's Working Well? Here's What They Told Us:

Regional Systems

North East Transit and HARTransit provide *door to door service* upon request

Northwestern Transit District dedicates one bus to its *inter-regional service*

Fixed routes are important options for seniors where they are available - Fastrak is starting to become popular with seniors

Americans with Disabilities Act transportation is available for seniors who qualify by disability and live within 3/4 mile of a public bus route

Some regional providers *coordinate state Dial-a-Ride funding and/or apply for federal monies* to give riders expanded services

Volunteer Transportation Programs

WHEELS provides medical rides (including out of area) for residents of New Milford, Roxbury, Sherman and Washington; all 20 volunteer drivers use WHEELS vehicles

FISH is an important asset in Woodbury for medical rides; RSVP supports FISH

Veterans' groups may be able to assist with VA appointments

Volunteers provide a *personalized* service

Local (Town) Programs

Single town services *often work well for local needs* such as shopping and in-town medical appointments

Frequently described as *personalized and responsive to resident needs*

Local drivers get to know their riders and *inform senior services directors about observed needs or changes*

Example: In Woodbury, people enjoy riding the bus and *act as informal ambassadors to welcome new riders*

Example: Southbury combined two transportation services using state Dial-a-Ride funds for coordination; *riders are able to travel out of town and ride numbers have increased*

Other Transportation Bright Spots

Kennedy Center provides training to help seniors and people with disabilities to use public transit

Torrington Assisted Medical Transportation Program (serving residents of Torrington, Litchfield and Harwinton) offers door to door service for a variety of medical needs including dialysis and cancer treatment

Transportation Issues, Needs and Goals Shared at the Focus Groups

What are the gaps and limitations in the current system?

Geographical Limitations



Crossing town boundaries is frequently a barrier in local systems

Out of region trips may be limited or nonexistent

Example: it is often *difficult to get to major medical centers* such as UConn, Yale, West Haven VA and Gaylord

Example: riders in Naugatuck often *cannot get to their doctors* in Southbury or at Griffin Hospital

Lack of Flexibility and 'User-Friendliness'



Riders often ask for...

Greater freedom to get around - *when and where they want to go* - including same day

The opportunity to *stop at different places (chained trips)*

More exact timing of rides rather than a 30-minute window

Evening transportation

People taking the reservations who are more helpful and *provide referrals for other options when they can't provide a ride*

Communication Challenges



There is a *maze of information* about transportation options and a *lack of public awareness* of what is available

Regional providers report that they do outreach presentations, but wind up speaking to their usual clientele

Providers report *difficulty in reaching those in need of rides* who are not connected to other services

Special Rider Needs



More riders are *disabled or medically compromised*

Those in need of assistance may be *reluctant or unable to hire an aide*

Many seniors request *help carrying grocery bags*; provider policies often say no

Long driveways and exterior stairs can be obstacles causing some people to become homebound

Dialysis transportation requests are increasing and place heavy demands on ride schedules

Medical procedures involving anesthesia require more help than drivers can provide

Capacity Limitations



Some providers can't keep up with request volume and ask people to *call 3-4 weeks in advance for medical rides*

Towns *may not be able to provide rides for shopping and recreation* because medical appointments are prioritized

Out of region medical appointments can *tie up a vehicle for long periods*

Some towns report *too much volume for one bus, but not enough for two*

Other Key Issues



Some towns are *not in any transit district*

There is *no public transportation* in many towns which *also impacts caregivers* trying to reach clients

Transit funding is stagnant and *federal funding is difficult to obtain* without an expert staff

Health provider offices may be reluctant to coordinate with transit schedules

Seniors may be *unable or unwilling to pay for rides*

Transportation Ideas and Suggestions from the Focus Groups

How should community transportation become more responsive to the needs and wants of older adults?

Coordination and Mobility Management

Single point of access - *one stop referral/ matching service for rides*

Mobility managers are funded in other parts of CT; often *work with the system as a whole* to assess resources and gaps

Regional collaboration for medical trips that are beyond the capacity of local providers

System of *hubs and linkage points* allowing providers to share legs of a trip

Expansion of *regional transportation and coordination in rural areas and small towns*

Expanded Volunteer Services and Roles

"Bus Buddy" - additional person to help on the bus with needs such as carrying grocery bags

A volunteer to stay with patient in the medical office *after anesthesia*, accompany them on the van and walk them into their home

WHEELS can serve new people provided they can get to New Milford

If volunteers handle some trips, *can save scarce transit resources for other rides*

Volunteers need *training for new roles*

New Models and Ideas for the Future

'Uber-type' system for seniors - would discounts or supported rides be possible?

Smart phone to pay fee for rides

Matching service using pool of drivers with private cars
- Rides for Ridgefield does this

Trolley for all ages that makes a circuit of businesses, medical offices and recreation

Combine aide or homemaker services with rides as some chore services do

Complete Streets are a priority

Increasing Use of ADA (Americans with Disabilities Act) Transit by Older Adults

ADA provides *many ride options* for those who qualify by disability and geography

Many people associate ADA with physical disabilities; people with cognitive and visual conditions can also qualify

Messaging needs to improve so potential riders and professionals get a clearer understanding of ADA Transit

Some seniors are resistant to paying fares; encourage comparison with cost of a car

Expanding Variety of Fleet

Small, efficient vans that don't require a commercial driver's license (CDL)

Use of a *car to supplement the van* in town services

Leverage systems that transport children (it's happening in other states)

Accessible taxis are being used in some places in CT (1 wheelchair and 3 ambulatory riders); can combine with a voucher

Education and Dissemination of Info

Info should be available *on paper and online*

Clear *inventory of available options by town* - too much info creates confusion

Better understanding of public bus and how it works

Travel training with Kennedy Center

Connect with *new referrals sources such as VNA's* to reach people who need rides

Next Steps Recommended by the Focus Groups

What would you like to learn about in order to address needs and improve your services?

- Transportation models including rural models, ways of combining rides with personal assistance, on demand 'Uber-type' services for seniors
- Starting a volunteer transportation program including costs, insurance, recruiting, screening and training volunteers; what's working around the country?
- Mobility management as a tool to improve the transportation system in our region
- Technology for scheduling and dispatching to increase efficiency and tap into unused capacity
- Funding opportunities for transportation including public/private partnerships
- Better ways to market programs to reach people who need the service

How can we work together to address the transportation needs of older adults?

Mobilize Older Adults	<ul style="list-style-type: none">● Develop an educational campaign with a dynamic presenter● Engage seniors and the public around transportation priorities
Engage Municipal Leaders	<ul style="list-style-type: none">● Reach out to key elected and appointed officials at the local level● Provide current information on issues, needs, programs, models and funding● Advocate by sharing practices of other communities and encouraging a review of policies to ensure that the town is responsive to the needs of older adults● Offer options for utilizing existing resources (e.g. town cars, insurance for volunteers) that might be used to enhance transportation options
Advocate on Regional and State Levels	<ul style="list-style-type: none">● Bring Councils of Government into conversation with senior services● Share grassroots knowledge with regional, state and transit district leaders● Host a legislative breakfast to discuss priorities and policy recommendations● Find a champion in the state legislature to advocate for a task force on transportation for older adults

Please join us in this effort! Connecticut Community Foundation looks forward to collaborating with Western CT Area Agency on Aging and our local, regional and state partners in moving ahead on the issues and needs described here. To share your ideas or ensure that you are on the email list for future meetings, contact Deborah Stein, Program Officer at Connecticut Community Foundation, at dstein@conncf.org or 203.753.1315 x.103.