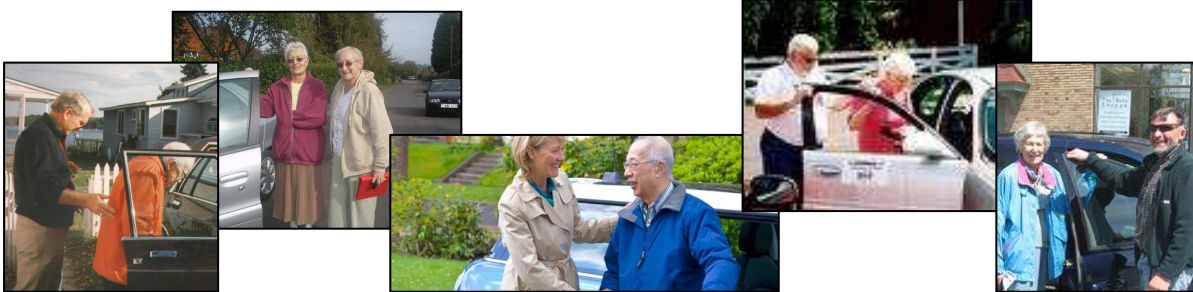


Integrating Volunteer Drivers into Regional Community Transportation Coordination Programs

*Evidence-Based Practices from Nationwide Programs and
Recommendations for the NH Seacoast Region*



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Please refer to Appendix A and B and Section IX for a listing of these incredible assistants.

GLOSSARY OF ACRONYMS

AARP	American Association of Retired Persons
ADA	Americans with Disabilities Act (Federal legislation)
CAP	Community Action Program
CCE	Community Care for the Elderly (Florida)
COAST	Cooperative Alliance for Seacoast Transportation (New Hampshire)
COAST	Council on Aging and Human Services Transportation (Washington)
CTAA	Community Transportation Association of America
ERTC	Exeter Region Transportation Committee
FTA	Federal Transit Administration
FTE	Full Time Equivalent
JARC	Job Access Reverse Commute (federal funding program)
MTM	Medical Transportation Management (Missouri)
NCSL	National Conference of State Legislatures
NEMT	Non-Emergency Medical Transportation (eligible for Medicaid funding)
NHDHHS	NH Department of Health and Human Services
NHDOE	NH Department of Education
NHDOT	NH Department of Transportation
RCC	Regional Coordinating Council
RCT	Rural Community Transportation (Vermont)
RPC	Rockingham Planning Commission
RSVP	Retired Senior Volunteer Program
RTC	Regional Transportation Coordinator (or broker)
SAFETEA-LU	Safe Accountable Flexible Efficient Transportation Equity Act – a Legacy for Users
SCC	State Coordinating Council for Community Transportation
STP	Supplemental Transportation Programs (for seniors)
TRB	Transportation Research Board
UWGS	United Way of the Greater Seacoast
VIM	Volunteers in Motion (Florida)
VNA	Visiting Nurses Association
VPTA	Vermont Public Transportation Association (Vermont)
YCCAC	York County Community Action Corporation (Maine)

I. INTRODUCTION

The limited nature of public transportation in New Hampshire creates significant barriers to accessing basic life needs such as health care, employment, grocery shopping, and social services and civic activities. The elderly, individuals with disabilities, and low-income residents of the state and region are most affected by these barriers. Only a fraction of the municipalities in New Hampshire's Greater Seacoast region are served by traditional public transportation, and a still smaller fraction of communities statewide have such service. Numerous non-profit health and human service agencies similarly provide transportation for specific client groups, but collectively meet only a small slice of the transportation need.

To begin to address this need, in recent years agencies around the Seacoast region have been working to develop a coordinated brokerage system that would centralize scheduling and dispatching of rides for multiple agencies. At the State level the NH Department of Health and Human Services and other state agencies are working through the State Coordinating Council for Community Transportation (SCC) to develop a statewide network of regional transportation brokerages to manage transportation services for Medicaid and other state and federal programs.

The establishment of the SCC represents a significant step in acknowledging that providing community transportation is a State function, and that coordination of health and human service transportation and other public transit is a critical step in improving transportation access. In its enabling legislation, the State Coordinating Council (SCC) is charged to “develop, implement, and provide guidance for the coordination of shared ride transportation options so that senior citizens and persons with disabilities can access local and regional transportation services.” The goal is to improve allocation and use of resources, coordinate service, streamline funding and reporting processes, and improve access to transportation services. Under the SCC the state will be apportioned into 10 community transportation regions, each overseen by a Regional Coordinating Council (RCC). Several regions of the state have been proactively preparing for the implementation of this new system, and with the support of funders such as the Endowment for Health have laid the groundwork for becoming designated as a Regional Coordinating Council. In the NH Seacoast region, the Alliance for Community Transportation (ACT) is one such group.

Beyond developing regional brokerages, one of the keys to managing the cost of community transportation services will be developing networks of volunteer drivers and integrating these volunteers with the other transportation services coordinated through the brokerages. In some regions of the state strong volunteer driver programs already exist, in other areas these have yet to be developed. In the ACT region, Transportation Assistance for Seacoast Citizens (TASC) provides rides to seniors and individuals with disabilities eight Seacoast area towns. TASC has seen rapid growth in trip demand since its inception in 2006, and is grappling with how to meet expanding demand with limited resources.

Research has been done at the national level by the Beverly Foundation and others on best practices for developing and sustaining volunteer driver programs. Relatively little information has been gathered on best practices for integrating volunteer drivers with a range of other service providers in a brokerage setting. To support the development of TASC, ACT, and other local transit coordination initiatives such as the Exeter Regional Transportation Committee (ERTC), the Rockingham Planning Commission (RPC) secured grant funding from the

Endowment for Health to study integration of volunteer drivers into brokerage systems. The lessons learned will ensure that TASC is well positioned to be integrated as a provider in the ACT regional brokerage system. Additionally, the study results will be offered to assist other regions in the development of integrated volunteer driver programs. The specific goals for the grant project are as follows:

1. Identification of Best Practices for integrating volunteer drivers into regional human service transportation brokerages.
2. Develop recommendations for implementing these Best Practices in the context of developing the TASC volunteer driver program to become a provider in the Alliance for Community Transportation (ACT) regional brokerage serving Stafford and Eastern Rockingham Counties. The study will also seek to address more general recommendations applicable to other regions.
3. Dissemination of findings to organizations within the Seacoast Region and elsewhere in the State of New Hampshire with an emphasis on solutions most applicable or feasible given existing conditions in New Hampshire (existing organizations, existing funding mechanisms, existing and anticipated public policy.)

While our research Case Studies brought us in contact with a good sample of exemplary coordinated transportation systems from around the country that served to inform our recommendations, this report is bound to fall short on the goal of being able to generalize our findings to truly fit other regions in New Hampshire. As with most human service efforts, one size does not fit all. Even within the same state, what works in one community may not work in another. We need, in fact, to be cautious in our use of the word “Best” (as in “Best Practices”) as it relates to the use of volunteers in coordinated systems. As one of our Advisory Committee members aptly pointed out, “Best” is a moving target; no pun intended. What is best in one setting may not be best in another site or in another time. What we have tried to capture, then, is what practices have created success elsewhere and what we can learn from them. For example, a key to coordinated transportation planning identified time and again is the relationships and partnerships that are developed. We know that variations in community resources, local concerns, and local conditions result in vastly different solutions to what seems to be the same needs. While we can identify best practices and important elements, each community will have unique assets that may help address the challenge of providing and integrating volunteers into transportation systems.

We are fortunate in that volunteerism is strong in New Hampshire, and that we have a history of using volunteers to provide many services here that in other states are provided by the public sector. That volunteers will need to be part of any community transportation system is not in question in rural New Hampshire or in any other part of rural or suburban America. At the same time, this report should not be interpreted as suggesting that volunteers are a silver bullet solution to meeting the transportation needs of our communities. Even though volunteer drivers donate their time, often their vehicles, and occasionally their gasoline, there are other significant costs to running effective and sustainable volunteer programs. The questions we ask here focus on how volunteer programs can be designed to have the greatest impact on service coordination and accessibility, cost containment, and consumer satisfaction given the resources of a region or community.

These are questions we, as a state, are well positioned to tackle. New Hampshire's citizens appear to be ready for change and willing to pay for greater access. A December 2005 survey of NH residents' views on the "use, availability, and need for public transportation" (conducted by the Institute on Disability at the University of New Hampshire in collaboration with the Community Action Program Belknap-Merrimack Counties, Inc. and the Endowment for Health) found support for developing multimodal community transportations systems. In spite of living in a state with a poor track record on access to public transportation, our citizens are very supportive of developing and funding options for seniors, individuals with disabilities, and the general public. For example, survey participants were in favor of instituting the supplemental \$5.00 fee on local automobile registrations enabled under RSA 261:153 for this purpose (the "Local Option Fee"). It is in this positive climate that our communities have an opportunity, with the formation of the State Coordinating Council, to succeed in implementing innovative changes and in developing transportation for our present and future riders.

Defining the Target Population

In determining "best practices for integrating volunteer drivers into regional human service transportation brokerages" in this region, it is necessary to be clear about whether our goal in using volunteers is to make the community accessible to all people who find themselves in need of public transportation, or if our goal is to improve the quality of services to a narrower (frail or disabled) portion of the population who are in need but cannot use traditional public transit. It is this latter group that is generally served by what are called "Supplemental Transportation Systems," i.e. ones that provide a higher level of services geared toward individual needs.

Along with frail seniors and people with disabilities, the larger category of people in need of public transportation may include those who are unable to afford a car, individuals who have temporarily lost their license, or children in need of transport due to protective custody. The second group is a more inclusive definition and encompasses the clients of health and human service agencies who have disabilities and/or health challenges and seniors who have had to give up their licenses and/or cars for a variety of reasons.

Ideally, any transportation system would address the transportation needs of all citizens. While the State Coordinating Council has a long term goal of developing an infrastructure for general community transportation, its starting point is the coordination of existing services and funding streams, which by necessity means that it will serve the smaller category of individuals in need of transportation. In particular the SCC is focused as a starting point on Medicaid-funded non-emergency medical transportation. This is also true of the volunteer driver program in the Seacoast. TASC has been focused on seniors and ambulatory people with health challenges and/or disabilities. The purpose of rides under TASC is to support individuals to live independently through access to essential life-sustaining activities/services. The regional program, the Alliance for Community Transportation (ACT), seeks to coordinate transportation for "seniors, low-income [individuals] and persons with disabilities," thus taking on a broader piece of transportation than TASC has been serving it its two years of existence. Many but not all brokerages analyzed in our Case Studies address the broader population of individuals who rely on transportation services, while others have more narrow eligibility criteria more in line with ACT and with TASC.

II. LITERATURE REVIEW

In seeking answers to our research questions, we found ourselves exploring the work of a number of experts in the fields of senior transportation. Much of this work was done by or in conjunction with the Community Transportation Association of America (CTAA). In consulting our own region's CTAA "ambassador," Beverly Ward, as well as CTAA's Coordinator of Senior Transportation Programs, Jane Hardin, it was clear that we were, in a sense, breaking somewhat new ground. The main research question posed by this study – how to integrate volunteer drivers into brokerages - has not directly been addressed in previous transportation literature or published studies. The librarian at the Transportation Research Board (TRB) was unable to provide any resources of merit. In fact, Elizabeth Ellis, who sits on the committee on para-transit at the Transportation Research Board, indicated that her committee had recently submitted an idea for research on volunteer drivers that would get at the type of issues raised by our grant project. She too had not come across any material that dealt with our specific question.

The literature and research coming out of major resources in the field, such as the Beverly Foundation, CTAA, TRB, Easter Seals' Project Action, and FTA's United We Ride initiative provide considerable guidance for meeting the transportation needs of seniors and people with disabilities. Much is written on how to bring communities together to plan successful transportation systems. There are also a number of good resources to guide communities and/or organizations in implementing volunteer driving programs, particularly for those who are elderly and/or experience disabilities. The State of Washington's Volunteer Driver Program manual is frequently cited in the literature and was almost always mentioned when speaking to the coordinators of volunteer transportation programs in different parts of the country.

For the purposes of identifying best practices for integrating volunteers into brokerage systems, our starting place was to identify the basic characteristics of good transportation for the target group(s), and the characteristics of good volunteer driving programs. A listing of the benefits of using volunteers in coordinated transportation is included to emphasize the importance of volunteers to both the system and the rider. All this information has been synthesized from the resources mentioned earlier, and is listed in Section IX –Resources. In addition, we also gathered current information on volunteerism in New Hampshire to establish an understanding of the environment in which we were working.

The Beverly Foundation is a key source of information on effective volunteer driver programs. The Beverly Foundation engages in research, funds demonstration projects, and publishes technical assistance materials to "foster new ideas and options to enhance mobility and transportation for today's and tomorrow's older population"; and has identified critical aspects of successful transportation programs and systems. A number of published reports authored by Helen Kerschner, Jane Hardin and Jon Burkhardt over the past eight years cover *Supplemental Transportation Programs for Seniors* – defined as a "transportation program or service that supplements or complements traditional public transportation services". Kerschner and Hardin have also produced a profile on the plight of seniors in rural America and shed light on issues in service delivery. Through surveys and reviews of programs across the nation, they have identified the characteristics of successful programs and the services provided by programs using volunteer drivers. Much of the latter comes from the Foundation's analysis of the *Faith in Action*

programs funded by the Robert Wood Johnson Foundation. These reports, along with the Administration on Aging/United We Ride study Seniors Benefit from Transportation Coordination Partnerships – A Toolbox, provided the source for many of the Case Studies selected for this project.

Foremost in looking at transportation brokerages is the challenge of creating a system that is coordinated and sustainable. The steps and process for success have again been well documented by the professionals mentioned above. For our purposes, we are going to assume that the brokerage in our region of concern, and the others that are being created in New Hampshire, will be built on solid community foundations. When CTAA consultant Jane Hardin was asked to identify what, in her experience, are the keys to sustainability of coordinated transportation systems, she listed the following:

- Committed board members with appropriate business and managerial knowledge
- Oversight procedures in place so board has a method of reviewing operations
- Planning for transition in both staff and board leadership; developing and training likely successors
- Ongoing process of being alert to industry and consumer trends; having a nimble organization that can adapt to changes
- Developing champions of your organization, e.g., elected officials, key government agency staff, influential members of the community

This advice was echoed by a number of the transportation coordinators from the Case Study agencies when discussing sustainability of their volunteer driver programs.

The body of information related to coordinated transportation from the previously cited sources recognizes the use of volunteers as part of the system in meeting the needs of passengers, and sets the bar for transit services to seniors and people with disabilities. In the case of faith-based transportation, volunteers are the full extent of the system, but their target population is more narrowly defined than in a brokerage system. The faith-based volunteers also provide an array of supports to help people live as independently as possible. As the research shows, few faith-based programs identify with the “transportation field” or speak the language of transit systems, yet they are the provider of transportation for their clients and they see this service as integral to their work. In the case of brokerages with volunteer driver programs, the agencies we interviewed clearly could not meet the needs of their consumers without their volunteer drivers. In both models it is important to emphasize that while the consumer may ride for free, developing and sustaining a volunteer driving program is not free and requires substantial financial and human resources. With few exceptions, all Case Study programs were challenged by the need for secure and adequate funding for their volunteer program. Whether relying of community-based resources or a combination of federal, state, and local supports, the stability of the volunteer program requires that attention be constantly paid to the bottom line.

A. Best Practices in Supplemental Transportation Programs

In identifying “best practices” in transportation for seniors, others have observed that what seniors say they need and want from a community transportations system sounds a lot like what

any individual might desire or expect from a public transit system. The big difference is, of course, that people who do not necessarily have to rely on others for rides can often make different choices if they are not happy with a public service. They may also be more emotionally resourceful and better able to adapt if they find services do not meet their expectations or their needs.

The Beverly Foundation's list of best practices below is worth noting if you are hopeful, as we are in the New Hampshire Seacoast, that providing transportation for seniors and/or individuals with disabilities is the starting place for a future that has coordinated community transportation for all citizens who cannot drive themselves. Interestingly, there is no agreement among transportation experts as to whether it is necessary to develop one specialized transit system just for seniors and individuals with disabilities, and then have a separate one for the general population. This debate is fueled in part by the fact that many successful coordinated public transit systems started out as specialized transportation in an attempt to help some citizens. A number of these exemplary programs began with as little as a handful of volunteers and a van, and over time morphed into a transit system for everyone.

The Beverly Foundation listing below of best practices comes from the research done on *Supplemental Transportation Programs for Seniors (STPs)* -- 74% of which are found in rural areas. Not all STPs included in the Foundation's research use volunteer drivers, and these systems may rely on any combination of buses, vans, or automobiles. Volunteer drivers may use their own car or drive an agency vehicle. A 2004 overview of STPs showed that 34% of these programs use volunteers only, 20% used a mix of volunteers and paid drivers, and 42% had paid drivers only. We are using this research as a source for essential quality and performance indicators. It is clear from reviewing the literature that the more rural the region for a brokerage transit system, the more likely it is to depend on volunteers for some part of its service provision.

Whether with a paid professional or a with a volunteer driver, whether by van, bus or car, these are the characteristics the Beverly Foundation's research has determined to be critical to transportation for senior populations:

- Service is **available** when it is needed: it is reliable, on time, and it meets the scheduling needs of riders; there is stability and dependability in the provision of services regardless of trip purpose.
- Service is **accessible** to the various riders: transportation options vary to accommodate need and assistance is available as needed; bus schedules and signs are accurate and readable; vehicles come to the door; escorts are available for those with mental or physical limitations.
- Service has **acceptable** standards of service: riders understand what and when and how services are available and know how to use them; riders feel comfortable calling for rides and feel safe and secure using the service; rider training may be available to facilitate use of services; vehicles are clean; drivers are courteous and dependable.
- Service is **affordable** for the rider: services are no cost or low-cost for those with limited incomes; there are vouchers or coupons to assist with out-of-pocket expenses; "senior days" exists to promote use of public transit.

- Service is **adaptable** to the diverse needs of riders: the system evolves to meet the changing needs of its passengers; partnerships are sought to maximize flexibility of the system; routes change as demographics change.

Given the rural nature of much our state, and the lack of public funding for transportation in New Hampshire, the advantages of integrating volunteer drivers into a regional brokerage system should be kept foremost in mind and not be considered an add-on when planning a system – whether the system is “coordinated”, “consolidated” or simply “cooperative” in design. The most obvious reason to consider volunteers is the ability to fill gaps. Volunteers go where buses cannot because of geography and/or distance, and they can be available when buses and other human services providers are not.

Volunteers are being used in a variety of settings: as part of transportation systems, human service agencies, public entities, and also in stand-alone organizations. In many instances, people would not be able to leave their homes were it not for volunteer drivers. If there is no reimbursement to the driver, as in the case of Transportation Assistance for Seacoast Citizens (TASC), these rides are a tremendous financial asset to the brokerage and the client. Even if volunteers are reimbursed for mileage, there are still substantial cost savings over the use of paid professional drivers. The benefits to a transportation system, the individual, and the community in using volunteer drivers (as identified by the Beverly Foundation’s work) are enormous:

❖ Benefits of Volunteers to a Transportation System

- *The cost-savings in personnel and equipment can be substantial.* Systems with paid drivers spend up to 50% of their budgets in salaries alone. Volunteers work well beside paid drivers and do not jeopardize these jobs; there are more than enough passengers for all modes available. Volunteer drivers enable providers to keep their costs down by reducing need for vehicle purchases. By matching riders and drivers according to geographical location, shorter trips can be more affordable in cases where drivers are reimbursed for mileage.
- *Volunteers are generally used to fill gaps in transportation systems.* They maximize resources and help to enhance the efficiency and cost-effectiveness of the services. Though some individual volunteer rides can be expensive if mileage is reimbursed, they are often the only option when a rider needs to go long distances beyond what public transit systems or other agencies cover. In large brokerages or locales where regular public transit is available, volunteers may also be used to bring people to the bus stops.
- *Volunteers can fulfill various organizational roles:* dispatching riders, recruiting drivers, promoting the services, and training and/or supervising other volunteer drivers.
- *Volunteers may provide assistance so that paid personal care assistants are not needed.*

❖ Benefits of Volunteers to System Riders

- *Volunteers can make accessible transportation more affordable for many individuals.*
- *Volunteers can provide a higher level of service without additional cost. Ninety-seven percent of volunteer driver programs are able, at minimum, to escort passengers from their door to the door of their destination (referred to as door-to-door as opposed to curb-to-curb service.) Most also provide some level of assistance at the destination, such as helping the passenger into the building and/or office (door-through-door.)*
- *Volunteer drivers play a key role in meeting the non-medical and social needs of riders who might otherwise have to use a for-profit taxi or special car service to leave home. Individuals find they are able to get out more frequently and at a lower cost to them.*
- *Though not a common practice, in some places riders are also able to recruit and schedule their own rides, thus giving them a greater sense of control of their lives.*

❖ Benefits of Volunteers to Communities

- *In the broader picture of community health, volunteers engage in preventative health care: getting out can mean the difference between isolation and social interaction, between wellness and illness, between independent living and costly institutional care, between community engagement and social isolation, between expensive town, county, and state supported services and individual self-help.*
- *Volunteer drivers not only directly benefit the riders, but they assist families who are trying to juggle the demands of all their loved ones. The reduced stress of knowing individuals can get to appointments and be out in the community has a huge impact on everyone involved.*
- *Aside from meeting the medical needs of riders, volunteer drivers play a critical role in improving the quality of life for all community members by assuring diversity is not hidden away. The visibility and participation in our communities of people who are older, frail and/or have disabilities is an important factor in building communities that care for one another.*
- *Drivers themselves benefit from their relationships with their passengers and the services they provide to them. Over 60% of volunteer drivers are retired, and over half of these people have been volunteer drivers for three years or more. This is work that provides a high level of satisfaction and personal rewards.*
- *Volunteer driving is well suited to not only those who have retired, but also to those looking for a flexible volunteer opportunity within their own town or region.*

B. Best Practices in Volunteer Driving Programs

There are a number of “how-to” and “best practice” publications available to organizations setting out to establish volunteer driving programs. It is not within the scope of this report to get into the “how-to’s” of setting up a volunteer service. Three of the commonly cited publications on the subject of best practices for volunteer driving program are discussed below.

Volunteer Drivers Guide - Washington State Department of Transportation

As mentioned earlier, probably the most cited, most comprehensive, and most utilized volunteer driving program manual is the Washington State Department of Transportation’s *Volunteer Drivers Guide*. It was developed in recognition of the fact that the use of volunteers was essential in coordinated transportation systems that provide rides to persons who cannot drive. It provides the nuts and bolts of developing and maintaining a program including sample forms used for various pieces of the system. When we inquired about best practices for integrating volunteers into brokerages, the staff at both CTAA and the Beverly Foundation, as well as various transit systems in our Case Studies, consistently directed us to the Washington manual. It does not, however, address the question of the relationship between the volunteer program and the larger transportation system.

Succeeding with Volunteer Transportation - Dennis Studebaker

Though written over 15 years ago, this is an informative down-to-earth presentation of advantages and disadvantages of using volunteer drivers, the challenges of running volunteer driver programs and how to start from scratch. Studebaker was the director of Sonoma County’s Volunteer Wheels program. The guide covers day-to-day operating questions that arise, liability issues, staffing needs, software considerations, marketing and recruitment, volunteer management, etc. and makes a good companion to Washington’s manual for anyone contemplating a volunteer driving program. Writing from a time that predates the development of most brokered transit systems, his advice regarding the position of a volunteer program is not out of line with the role of volunteer driving programs in many coordinated systems today: “Meet only needs which aren’t currently being met. Clearly identify the needs you are trying to meet. Be very precise.”

Both of these publications place great importance on having policies and procedures in place for the protection of the passengers, the volunteer drivers, and the sponsoring organization. Even programs that start out in small-town environments, with a neighbor-to-neighbor intent, need to assure that their volunteer program is run in a professional manner and the drivers receive some training. Volunteer drivers - whether they use their own car, the client’s car or an agency-owned or leased vehicle - are acting on behalf of the agency and thus have a legal connection to it. The starting place, as for any organization, is to develop clear goals

STAR Search - Faith in Action Volunteer Driver Programs - The Beverly Foundation

In studying what makes a successful volunteer driving program, the Beverly Foundation in 2007 undertook an extensive survey of 225 of the 750 programs funded under the Robert Wood

Johnson Foundation's *Faith In Action* initiative. The results are published in its *STAR Search Survey*. This Robert Wood Johnson Foundation program was developed to support interfaith volunteer caregiving services for the elderly and people with disabilities. For these providers, transportation is just one of many services they offer. The Foundation's survey found that only 3% were exclusively transportation providers, and that the vast majority of these volunteer programs generally do not have relationships with transportation service providers in their areas. This sets them apart from TASC, which began as a faith-based volunteer program and only provides transportation.

The inclusive nature of *Faith in Action* programs thus comes with its own challenges when attempting to translate their best practices for volunteers into a system that is designed to provide only transportation services, and focuses on curb-to-curb service, such as TASC. However, the overview data for these programs offer a good summary of successful volunteer driving programs in terms volunteer activity, the nature of the service needs, and how those services are being delivered.

Key Findings of Robert Wood Johnson Foundation Study of Faith in Action Programs

Characteristics of Volunteer Driver Programs

- Seventy percent of the *Faith in Action* programs serve rural communities while 42% serve urban areas and 47% serve suburban regions; some cover more than one designation. They play a particularly critical role in the rural areas traditionally not well served by conventional transportation providers who may not be able to accommodate the distances or navigate the terrain.
- Eighty-six percent of these programs use volunteer drivers only, while only one percent exclusively use paid staff. Thirteen percent have a combination of volunteer and paid drivers. Regardless of this, 96% of the drivers use their own vehicles, 16% use agency or leased vehicles, and 14% use the rider's vehicle. As noted earlier in discussing levels of service provided by volunteers, 82% of the *Faith in Action* programs have clients who require some door-through-door service. Seventy-nine percent are able to also remain at the destination with the rider.

Cost of Services

- It is almost impossible to generalize about the cost of transportation service, because it is just one of many services provided by the Faith in Action programs, and most do not separate out their budgets by service. When asked, agencies reported budgets ranging from \$0 to over \$790,000 with a median cost of \$10,500. The Beverly Foundation could not draw any conclusions from this except to say that all the agencies had paid staff so there are clearly costs involved.
- Seventy-two percent rely on grant support and 76% have other sources of funding, such as fundraising and contributions. Most do not charge fees, 65% accept donations from riders.

Risk Management

- This is always a concern when using volunteers, yet does not appear to be an issue for 92% of the *Faith in Action* respondents. They identify a number of policies and activities that appear to mitigate any problems. These include a careful process of recruiting, screening and training drivers as well as ongoing management and evaluation of their volunteers.
- Eighty-five percent have volunteer managers to whom the drivers report, and 83% train their drivers. Seventy-seven percent have a written job description for their drivers. The collision rate is low and found to be consistent with other volunteer driving programs.
- The Beverly study found that *Faith in Action* programs share a low rate of collisions resulting in legal liability (one percent over five plus years of operation), consistent with other transportation services using volunteer drivers. Along with good risk management factors, it is assumed, but not explored in their study, that only good drivers volunteer for such service, and that volunteer drivers take more care when transporting older individuals.

Service Features

- Services are most often provided during the daytime, and the majority of the *Faith in Action* programs provide transportation on Saturdays and Sundays. Of the Beverly STAR Award finalists, 80% provide Saturday rides and 76% do Sunday as well (the latter attributed to the connection to the faith community.) In addition, 44% provide rides at night.
- Not unlike TASC, most of the rides are characterized as life sustaining - i.e., 80% are for medical purposes (all types) and 42% are for shopping (grocery and general). Eighteen percent of rides are to hair appointments, errands, social activities, family visits and other recreational activities.
- There is some variability in how much advance notice these programs require in order to accommodate the transportation needs of their clients. Almost half (48%) require two days notice, and 26% require more than two days. Only 14% were able to meet needs with a 24-hour notification. Providers observe that their programs work best without too much advance notice (not more than 2-days) because often their clients do not know if they will feel up to going out and/or may forget they have asked for a ride.

C. General Trends in Volunteerism

Volunteers, regardless of the type of service they provide, can be found in small natural community groups, neighborhoods, faith-based organizations, foundations, service groups, and medical and governmental groups. Recruitment of volunteers for driving appears to be a challenge to all programs reviewed in the literature, including the faith-based organizations, and the care and feeding of volunteers through recognition and support is critical to any program that

relies on volunteers for their success. A quote from a 2004 presentation on PasRide in California says a lot about those who volunteer to drive: “Volunteer drivers are...the most difficult to recruit but once you’ve got them you’ve got them.” The majority of those who volunteer as drivers, as in other arenas, do this work because they want to give back to their community. Ninety five percent of those who serve as volunteer drivers express satisfaction with their service, and 76% enjoy it because they get to know others. While many volunteers express concerns about driving people they do not know or the logistics of providing rides (time, distance, and personal care requirements), many programs have volunteers who stay with them year after year. Volunteer drivers are described as the “face of transportation” for many segments of the population and they tend to be very dedicated volunteers.

In looking at the trends and statistics related to volunteerism, it appears that a word of caution is appropriate. A 1985 report by L.L. Martin published in the journal for Specialized Transportation Planning and summarized in TRIS (the Transportation Research Board’s on line library) stated, “the lack of empirical research on the characteristics of volunteer drivers in specialized transportation may prompt individuals interested in volunteer recruitment to seek guidance from the general literature on volunteers and volunteerism.” The report urges that in the planning and development of volunteer driving programs one not assume that the available data and information on volunteerism are transferable. It is the report's contention that those who volunteer as drivers may have a profile that is unique to the very specialized nature of this task. Thus, the following state and national data depicting the trends in volunteerism may not be as useful as we would like it to be in discussing the state of volunteerism in 2008 and what we can look forward to.

The rising cost of gasoline is a challenge for volunteer driver programs today more so than in 1985 when the L.L. Martin report came out. The impact of recent fuel price spikes on recruitment is not yet documented, but programs to anticipate changes. As an indicator of how the cost of gasoline may affect the bottom line, the U.S. Internal Revenue Service has raised the mileage deduction for unreimbursed business travel to 58.5 cents a mile, up from 50.5 cents for the first half of 2008. This may help volunteer drivers who receive reimbursement from programs at the federal rate, but those who drive without compensation can only continue to deduct 14 cents/mile for this donation of time and gas. The inability of the government to recognize the value of this service is not unique to this country. According to the Susan J. Ellis, who writes for the volunteer web site “Energize”, Canada also has the 14 cents rule in its tax code. Programs that use volunteers can hope that the special relationship of riders and drivers, and the fact that many drivers see themselves as riders in the near future, may be of help in recruiting drivers in spite of rising fuel costs.

In trying to get a handle on volunteers in New Hampshire, we consulted the most recent report put out by the Corporation for National and Community Service, entitled *Volunteering in America* (2007). According to this publication, 330,000 New Hampshire volunteers gave 41.1 million hours of service in 2006. Overall 39.2% of NH residents volunteered their time in 2006. They “engaged in civic life by volunteering, working with their neighbors, or attending public meetings.” The chart below shows the breakdown of types of volunteer service. It does not specify transportation activities thus we cannot know if transportation would come under the category of “social or community service”, “hospital or other health, or “other.” On average

people over the age of 55 give 72 hours per year, and the national average for those 65 and older is 100 hours. For those in the 55-64 age range in New Hampshire, their 2003-2006 average was down 3%. Those 65 years and older, however, 25.2% of whom volunteer, show an increase of 1% above the National average for this time period.

Interestingly, New Hampshire saw a 12.6% increase in its rate of volunteerism between 1989 and 2006, making it the 4th highest increase in the nation for that period, the 3rd highest in the Northeast region. However, from 2002-2006, our state rate of volunteering increased only 0.5%, and it ranks #19 amongst the states in percentage of population volunteering, and 26th in hours volunteered. With a large population of people over age 65, one might expect to see more than a 0.5% increase in volunteerism. Between 1990-2000 the US Census Bureau shows the population aged 65+ in Rockingham County increased by 28%, as compared to 18% for the state of New Hampshire, and only 12% for the nation as a whole. In general, an increase in the over 65 population should bring an increase in potential volunteers, though there are no data currently available to suggest that those new to a state are more or less likely to volunteer than those who have been long-term residents. The challenge is to insure that senior volunteer participation exceeds senior need for transportation services.

QuickTime™ and a
TIFF (Uncompressed) decompressor
are needed to see this picture.

Where do people in NH volunteer?

Volunteers in America 2007

Nationally, religious organizations account for 35.3% of volunteers. This figure is influenced by the southern states, which have the highest rates of volunteerism and the highest percentage of faith-based volunteers. In New England, with lower rates of church attendance, TASC's faith-based initiative has had to reach beyond its partnering congregations to recruit drivers. This said, it still obtains a healthy percentage of its volunteers from several of its member congregations.

D. Liability and Volunteer Drivers

In spite of the high satisfaction rates among volunteer drivers, they do have concerns that are unique to the nature of their work. Driving programs do not enjoy the legislative protection that exists for other volunteer activities through good Samaritan laws, and one of the biggest barriers to recruitment appears to be concerned around liability. While nationally volunteer drivers have a lower accident rate than average, and very few volunteer drivers have ever been sued, liability issues are a constant concern on the part of both drivers and agencies. On the passenger side, riders need to feel confident that the person picking them up will be safe to ride with, is trustworthy, and is reliable. On the agency side, they also need to know their recruits are safe and trustworthy drivers who will represent the agency well and most likely will not be in an accident. In programs where volunteers provide door-through-door service, risk and risk management take on an added dimension. Most concerns can be addressed through agency policies and procedures, driver training, and setting of clear expectations. Nonetheless, agencies need to pay close attention to how they handle insurance coverage once they decide to provide door-through-door service.

While the use of volunteer drivers is common to all rural systems, it is up to each state to determine what legal and civil protections may be offered to volunteer drivers. The federal *Volunteer Protection Act of 1997* grants civil immunity to volunteers for nonprofit organizations or governmental entities, assuming the volunteer is properly credentialed and not acting in a negligent manner. Under New Hampshire's RSA 508, the statute that addresses volunteers, they are immune from civil liability if serving on behalf of an organization. However, RSA 508 specifically exempts "transportation activities" from this immunity, along with any "gross negligence or reckless or criminal conduct." New Hampshire's statute is in line with about half the states in excluding motor vehicles from immunity protections. RSA 508:15, enacted in 2006, provides civil immunity for volunteers "unless damages arise from the operation of a motor vehicle or other malfeasance." It also places limits on damage or injury claims against a nonprofit organization. In most if not all states, agencies in NH rely on volunteers' personal automobile insurance, and carry secondary policies to cover any additional costs should an accident occur. While agencies may ask passengers to sign waivers stating they will not sue the driver or organization for damages resulting from an accident, the effectiveness of these waivers is questionable.

According to the National Conference of State Legislatures (NCSL) *Volunteer Driver Liability and Immunity* survey done in 2006 on behalf of the American Association of Retired Persons (AARP), states may enact additional protections beyond the *Volunteer Protection Act*. Some states have passed laws that provide some protections to volunteer drivers, but these are few. The shining lights of progress come from Georgia and Oregon. These states both have statutes that limit liability to volunteers who "transport senior citizens." Oregon also includes "disabled persons" in its law. Most legislation dealing with volunteer programs, however, are "civil liability statutes" concerning individual drivers or the organization/agency the driver is serving. There have not been enough cases resolved in the courts for the NCSL survey to capture how any of the volunteer driving programs have fared. The report concluded that liability and insurance coverage for the individual driver and the sponsoring agency is varied and ambiguous from state to state, and that this probably will not change anytime soon since no legislature is

likely to enact laws that jeopardize consumer rights to recourse in cases of negligence or malfeasance

FINDINGS:

- Seniors and people with disabilities need what any rider expects from public transportation: safe, dependable and convenient service.
- Over half of all supplemental transportation programs for seniors (74% of which are in rural areas) use volunteer drivers.
- Volunteers provide greater flexibility and service options, and cost savings to coordinated transportation systems.
- Riders and drivers both benefit from participating in volunteer driver programs.
- There are well-developed guidelines to assist in starting volunteer driver programs
- Interfaith programs have a record of success in meeting the transportation needs of seniors and others.
- The impact of gasoline prices on volunteer recruitment is still unknown.
- Nationally NH is 19th in the percent of its population that volunteers, and 26th in number of hours given. With a significant population increase expected in people over 65, NH may improve this rate of volunteerism but it may also be additionally challenged by a growing need for rides.

III. EXISTING CONDITIONS

The following chapter describes existing conditions related to Community Transportation in the NH Seacoast Region, including: 1) the range of agencies currently providing transportation services in the region; 2) local, regional and statewide efforts to coordinate these transportation services; and 3) the TASC volunteer driver program, through which we seek to implement the Best Practices identified in this report.

A. Existing Community Transportation Services in the NH Seacoast

Numerous non-profit agencies provide transportation services to clients coming to and from their facilities. These include health care programs, adult daycare centers, nutrition programs, senior centers, and other of health related services. Several national programs, such as the American Cancer Society and the American Red Cross, find volunteer drivers to assist people with medical treatments. In addition, there are faith-based organizations with volunteer drivers available to help fellow members. The region has a fixed route public transportation system in COAST, while other agencies provide scheduled “shopping bus” services. Individual towns are also stepping in to provide transportation for medical appointments, shopping, and other life-enhancing activities to senior citizens. The following are examples of providers and/or efforts being made in this region:

- Lamprey Health Care Senior Transportation Program: Runs a weekly shopping van in each of the 29 towns it serves in Rockingham County. This is a low-cost door-to-door service. With two weeks advanced notice, Lamprey also provides wheelchair accessible van service for medical appointments.
- Rockingham Nutrition Meals on Wheels Senior Transportation: Provides door-through-door transportation for Exeter residents to local appointments, grocery stores, and other downtown locations. It is funded by the Town and is low-cost to residents.
- Rye Senior SERVE: Provides weekly rides to the grocery store, library, and social luncheons for Rye seniors. Operates a donated van with a volunteer driver. Donations are encouraged.
- The Cooperative Alliance for Seacoast Transportation (COAST): A public transit agency, COAST serves eleven communities with a regular fixed route bus service, as well as para-transit service for riders with disabilities as required by the Americans with Disabilities Act.

While these agencies provide critical services with available resources, they collectively meet only a fraction of the need in the region. According to the New Hampshire Office of Energy and Planning, the population over age 65 in Rockingham County is projected to more than double between 2000-2015, from approximately 28,000 in 2000 to over 57,000 in 2015. By 2015, people over the age of 65 will make up 18% of the total regional population and by 2025 this figure will go up to 28%. Currently, according to the AARP, one in five Americans over the age of 65 does not drive. In Rockingham County alone, by 2015 this equates to a projected 11,400 seniors who will be in need of transportation assistance.

In an effort to improve transportation for seniors and others who do not drive, the Exeter Region Transportation Committee (ERTC) was formed in May 2007 and has been meeting monthly since. Comprised of representatives of four non-profit transportation providers - COAST, Lamprey Health Care Senior Transportation, Rockingham Nutrition Meals on Wheels, and TASC - as well as civic and public leaders, this group has worked to identify ways to increase public access of and support for current services, and to improve communication and coordination among these agencies. In addition, it seeks to enhance transportation resources and assure the stability and growth of the system through program improvements and development of other funding sources. To this end, the ERTC succeeded in getting the voters of Exeter to pass a \$2.50/vehicle "Local Option" supplemental vehicle registration fee for the purpose of accruing funds to support public transportation, with an emphasis on the needs of seniors. The town began collecting the fee in August 2008, and with input from the ERTC began allocating proceeds to provider agencies in 2009, including TASC, Lamprey, Meals on Wheels and a re-instituted taxi voucher program. The ERTC also initiated a monthly column in the Exeter News-Letter in May 2008 called "Got Wheels?" The column is a useful to for furthering community awareness of public transportation issues, services, opportunities and needs.

The ERTC has accomplished a great deal to build public support for community transportation funding in Exeter, expanding services to transit dependent residents and helping sustain regional agencies that also serve other towns. While nominally a regional organization, municipal officials from the Town of Exeter have participated in the group more extensively than other communities. In early 2009 the ERTC evaluated whether to work on broadening membership to include representation from all 12 communities in the combined SAU-16 and TASC service areas that were its original geographic focus. The group concluded that investing time in creating this sort of a sub-regional initiative would distract from the broader goal of getting the ACT brokerage up and running as rapidly as possible. Consequently the ERTC has reconstituted itself as the Exeter Transportation Committee, which will work with the Town to continue expansion of multi-modal transportation options locally, while encouraging the provider agencies involve to actively engage in the ACT brokerage planning process.

B. Transportation Assistance for Seacoast Citizens (TASC)

The TASC volunteer driving program serves eight communities in eastern Rockingham County: Exeter, Greenland, Hampton, Hampton Falls, North Hampton, Rye, Seabrook and Stratham. It was started in 2006 as an interfaith effort under the umbrella of Trinity Episcopal Church in Hampton NH. The church provides in-kind office space at Hobbs House in Hampton where the offices of Trinity Church are located. TASC is overseen by an Advisory Board and staffed by a Coordinator who is hired for 30 hours per week.

Since it recruited its first drivers and signed on its first riders, TASC has seen a steady growth on both sides of the system, though the demand for rides has consistently outpaced available supply of drivers such that TASC has carefully limited advertising of its service. With the exception of not being able to accommodate individuals in wheelchairs or those in need of considerable physical assistance getting to the vehicle, TASC has managed to provide transportation that is "available, accessible, acceptable, affordable, and adaptable" – the best practice characteristics outlined earlier. This is no small achievement for an under-staffed and under-funded program.

Regional Demographics and TASC Service Data:

TASC services are available to senior citizens and other adults whose physical or medical condition prevents them from driving. 70% of TASC clients are over the age of 60, 32% are 81-90 years old and 23% are 71-80. When asked why they are requesting TASC's services, 36% state they no longer drive, 31% say it is due to a disability that prevents them from driving, and 18% do not drive due to a medical condition. Lack of access to a car, apart from age or disability, was originally considered as a criterion for eligibility but has been eliminated due to capacity. TASC does not have the capacity to serve the needs of those needing daily transportation to work or job training programs; nor does TASC have the capacity to meet the needs of young single parents who are stranded at home and need rides to essential services. This latter category is one that the United Way of the Greater Seacoast (UWGS) is particularly concerned about for the very reason that presently there is no transportation system designed to help these folks access their community if they live too far from a COAST bus route. While TASC recognizes this need for transportation, it is not set up to fill the demand.

Fifty-eight percent of TASC's referrals originate from nonprofit social service or health agencies, with medical/health services being the purpose for 73% of the rides. Another 12% are self-referrals from word of mouth. This figure may be somewhat influenced by the presence of publicly supported Senior Housing in Exeter and Hampton where information is easily shared. The town of Exeter, which has a history of senior transportation via a town-subsidized taxi service that was in service from the late 1990s until the taxi company went out of business in 2006, has the highest rate of TASC usage. Sixty-three percent of TASC trips are being provided for Exeter residents. The remaining categories of referrals (other transportation agencies, newspaper articles, TASC drivers, TASC brochure) each amount to about five to seven percent. Since it began providing rides, TASC has intentionally limited its advertising of services in an effort to contain demand and assure that it had enough drivers to keep up with ride requests.

During 2008 TASC drivers provided 2,705 trips, or an average of 225 per month, representing a 40% increase over 2007. This is not, however, truly representative of the impact of this program. During the week starting April 1, 2008, the coordinator had 42 requests for rides, most of which were round trip. This would roughly translate into 336 one-way trips for that month. Only a small percentage of TASC trip requests are actually one-way. An increasing number of clients needing regular trips, often multiple days of the week, have found their way to TASC. These are people undergoing physical therapy and dialysis. Currently there are few times when TASC coordinates rides with other providers, mostly because there are few low cost options available. The local dialysis center will call a taxi for clients when TASC cannot find a driver, and the cost is picked up by the dialysis center. Medicaid does not presently reimburse rides provided by volunteer programs such as TASC because they will only reimburse only the standard fare paid by the general public, while TASC is a free service

TASC, in comparison to the Case Study programs described in the next chapter, covers a rather small geographical area. The eight towns it serves total approximately 108 square miles. The area population is just over 61,000, with a resulting density of 565 people per square mile, though the individual towns' population densities vary from as few as 166 to as many as

947 people per square mile. To date about 90% of TASC rides are within its core eight-town region. However, to date TASC has provided rides to 21 destination towns, some over an hour drive away. On average, the drivers live 5 miles from their passengers and the trip itself is just under five miles. An average TASC driver spends less than one and a half hours per week, making fewer than two trips per week. These averages do not reflect the fact that some drivers provide multiple trips per week while others drive only once a month at most.

The reasons TASC riders give for not driving are varied, as is the type of disability reported as the reason for needing a ride. Some TASC riders could navigate the COAST bus system if it stopped at their door or even within a block or two of their home and if they live in an area with sidewalks. The rural nature of this region makes it a challenge to provide this level of bus access, in part because of how remote some roads are. Narrow roadways and tight turning radii also impede planning accessible bus stops. A smaller though regular number of riders utilize TASC for non-medical services such as hairdresser appointments, grocery shopping and other community errands. These types of trips are commonly recognized as critical in reducing isolation and maintaining the emotional well being of seniors.

TASC Organizational Structure

- Board: There are currently four members of the TASC Advisory Board. They include the ministers from two supporting congregations, Rockingham Planning Commission's Senior Transportation Planner and a Hampton resident who is also an RPC Commissioner for Hampton. A member of the Hampton Community Coalition, who works at Hobbs House where TASC is located, also attends meetings but has no official status.

To date the TASC Board has functioned as an advisory board rather than a formal working Board of Directors. There are no standing subcommittees, although ad hoc committees engage in fundraising and are currently developing an application for 501(c)(3) non-profit status. The organization has operated to date under Trinity Church's nonprofit status. With only four members and no working committees, TASC has limited partnerships in the community.

- Staff: As originally planned, TASC was an interfaith effort and each participating faith community was to provide a Site Coordinator who would take care of recruiting and managing drivers within its membership and/or geographic location. A separate corps of volunteers was envisioned to provide assistance in taking ride reservations at the call center. The participation of the partnering churches, of which there are six, has not developed as planned. There are no church Site Coordinators, and all calls come into and are dispatched by the TASC Coordinator. This is not necessarily a negative since the TASC Coordinator and Advisory Board have come to see the consistency of providing telephone coverage with a primarily volunteer staff as too unpredictable. However, developing the corps of Site Coordinators for the various congregations is still a goal for the organization.

The Coordinator position was initially hired to work 20 hours/week, though this was expanded to 30 hours a week in mid-2007 to reflect growing demands on her time. The

Coordinator is responsible for all aspects of the service: volunteer recruitment and training, passenger registration, staffing the call center and dispatching all rides, public awareness, fundraising, data collection, etc. There is no back up for when the Coordinator is sick or goes on vacation, except to close the office. Without office support staff or volunteers, time is limited for building relationships in the community that are needed to support the program in a number of areas: financial, marketing, recruitment and public awareness.

- Dispatching: There is typically a three-day advance notice requested for rides. As these come in, the Coordinator enters them into her computer in a word document. This document is sent weekly or biweekly to drivers via email. The names, addresses and telephone numbers of the riders are listed at the top of the email and then the specific ride requests are listed under the days of the week. Drivers then call or email the rides they will do. Regular trips with regular drivers may not appear on the weekly email. Drivers who do not use email are sent a copy through the regular post.

TASC's procedure of allowing drivers to self-select rides gives them control of their driving schedule, aiding in driver retention. Drivers appreciate this ability to easily fit their volunteering around their own schedule. Even people with hectic daily agendas have found they can find time to give back to their community by providing rides.

- Data Collection: The Coordinator uses a combination of spreadsheet and word processing programs for data collection, resulting in duplicative data entry. TASC is currently working with a software developer (offering his time on a pro bono basis) on a new database system that will streamline processes of recording reservations, matching riders to drivers, and tracking system statistics.
- Volunteer Recruitment and Training: The Coordinator has a "road show" which is presented to churches and service clubs throughout the service area and has been effective in recruiting drivers in some towns. The goal is to have at least ten drivers from each of the eight towns. This has been achieved in two communities from which most of the passengers come. In 2007, 14 percent of rides requested went unfilled due to a lack of drivers. In 2008 this figure dropped to seven percent.

After an initial telephone interview and completion of the criminal background check and motor vehicle check, volunteers receive a two-hour orientation by the TASC Coordinator and are given a four-page handout of policies and procedures. Driver orientations are usually done in small groups. Since TASC only provides curb-to-curb services, volunteers are not given training in providing physical assistance to riders. Riders are interviewed over the telephone and then receive a registration form along with a two-page handout on how to request a ride, what to expect from the driver, and what is expected of them. Passengers with physical or mental disabilities requiring special vehicles or driver training are not eligible for TASC rides and are referred to Lamprey Healthcare or other appropriate provider.

The Coordinator is readily available to talk with drivers who encounter difficulties or have concerns or feedback regarding their experience, and considerable time is spent on the telephone providing these supports to drivers as well as riders. Riders will sometimes call and check in. The Coordinator may also check in with individual riders who seem in need of support. This speaks to TASC's desire to have Site Coordinators in place that may be able to provide additional telephone contact. These calls sometimes lead to helping riders get connected to other resources in the community.

- Quality Assurance and Program Evaluation: TASC tracks a range of indicators, including drivers, unduplicated riders, total trips, mileage/trip, and trips by town. TASC has not undertaken a formal passenger or driver survey, but when passengers call for rides, the Coordinator will ask about how things went the last time they used TASC. A record is kept of all passenger comments, both positive and negative. Three riders have been dropped from the program since it started. No incident requiring the dropping of a driver has occurred, and there has not been a situation where a passenger refused to ride with a particular driver.
- Funding: TASC's expenses for 2008 were approximately \$32,000. Its funding to date has come from United Way of the Greater Seacoast Grants, a NH Charitable Foundation Grant, private donations, and contributions from four partnering churches and community service clubs.

C. Alliance for Community Transportation (ACT)

Another piece of the region's transportation effort is The Alliance for Community Transportation (ACT), which has been meeting for several years. Formed with a goal of improving access to transportation services in the region and thus reducing geographic barriers to accessing health care and other basic life needs, it is a partnership of health and human service agencies, municipalities, and regional planning agencies from Strafford and Eastern Rockingham Counties. ACT is working to achieve its goal through a combination of: 1) coordinating transportation services and resources; and 2) working jointly to secure additional public and private resources to expand the region's capacity to provide human service transportation.

There are approximately seventeen organizations actively engaged in planning efforts. These organizations include Strafford Network, COAST, United Way of the Greater Seacoast, Community Partners, Rockingham Regional Planning Commission, Strafford Planning Commission, Homemakers Health Services, Strafford County Community Action Committee Inc., McConnell Center, Transportation Assistance for Seacoast Citizens (TASC), City of Dover, Avis Goodwin Community Health Center, Lamprey Health Care, Rockingham County Community Resource Network, Farmington Community Preservation Guild, Northern Strafford County Health and Safety Council, and Seacoast Mental Health, and Easter Seals New Hampshire.

ACT served as an Advisory Committee in the development of the Regional Coordinated Plan for Public Transit and Human Service Transportation required by SAFETEA-LU, the most recent Federal transportation appropriations and policy legislation passed in 2005. This plan calls for

development of a regional transit brokerage, which would centralize reservations, scheduling, dispatching, and billing of rides for multiple transportation provider agencies in the region. To implement this plan ACT has secured pilot funding from the Endowment for Health, as well as from the United Way of the Greater Seacoast (UWGS), which will be matched with Federal Transit Administration New Freedom program funds secured by COAST. Launch of the ACT brokerage is currently anticipated for some time in 2009.

ACT is also in the process of formalizing itself to serve as the Regional Coordinating Council (RCC) for Strafford County, eastern Rockingham County, and two communities in southern Carroll County. The role of these Regional Coordinating Councils is further discussed in the following section.

D. Statewide Coordination

ACT's efforts dovetail with similar coordination planning efforts on the State level. In 2005-2006 the New Hampshire Department of Transportation (NH DOT) and the New Hampshire Department of Health and Human Services (NH DHHS) worked jointly with the Governor's Task Force on Community Transportation to complete a plan entitled *Statewide Coordination of Community Transportation Services*. Also known as the United We Ride report, the plan responded to new Federal guidelines related to coordination of transit services funded by the FTA and US Department of Health and Human Services. The report identifies a number of problems with the delivery of human service and other community transportation in New Hampshire, such as duplication of effort in scheduling and dispatching; lack of coordination resulting in lost opportunities to combine trips; lack of data collection and performance measurements; and cumbersome contracting procedures. It also noted that segregated funding streams created by individual Federal and state agencies have created artificial barriers to coordination of services at the regional and local levels.

The plan proposed a structure for statewide coordination in New Hampshire through a system of Regional Coordinating Councils (RCCs) to guide development of transit coordination efforts in each region; and Regional Transportation Coordinators (RTCs), agencies that would operate regional brokerages under contract to the NH Department of Health and Human Services. The ACT region corresponds to Region 10 (Seacoast Metro) identified in the United We Ride plan. The whole network is overseen by a State Coordinating Council (SCC) established by the NH Legislature in 2007. As of late 2008 the SCC is working to finalize boundaries for the RCCs, establish a process for approving RCCs and selection of RTCs, and identify software needs for trip scheduling, and billing and reporting between NHDHHS and the RTCs.

ACT has taken initial steps to formalize itself as the RCC for the Greater Seacoast region. ACT members are currently reviewing a draft Memorandum of Understanding for RCC formation, and draft RCC Bylaws adapted from the United We Ride report. ACT has internally identified COAST as the preferred broker for the region. Based on the most recent information from NHDHHS, though, the region will need to go through a formal, competitive Request for Proposals (RFP) process to select the RTC that will contract with NHDHHS to broker Medicaid transportation.

E. Barriers to Coordination

New Hampshire faces a number of barriers unique to our state though, like the weather, it may only feel that way to us. While it is doubtful that local control and the decentralization of the tax structure plays quite as strong a role in resource allocation and decision making elsewhere in the country, other States have been faced with challenges in addressing transportation needs and have managed to forge ahead.

1. **Funding:** The structure of transportation funding, starting at the Federal level, is a significant obstacle to building coordinated transportation systems. According to the Governor's Commission on Disability, there are 64 different streams of federal funding for transportation available to states. This is a reflection of how greatly transportation intersects all parts of our society: the economy, employment, health, education, criminal justice, the disabled community, the elderly, children, families, community life and so on. Each of these 64 potential sources of revenue for transportation comes with specific criteria, rules and regulations, and they come into a variety of state and local agencies. They also sometimes do not even come to New Hampshire - we miss opportunities to apply for available funds because no one has the time to write the grant. Applying for, managing, allocating, and tracking these funds requires human and financial resources that are often not available.

At the State level, despite language calling for expanding transit in New Hampshire's Long Range Transportation Plan and Climate Action Plan, the State Legislature has not made adequate funding of public transportation a priority. New Hampshire consistently ranks near the bottom among the fifty states in funding for public transportation. In 2006 New Hampshire spent \$0.45 per capita on public transit, compared to a median investment of \$4.65 per capita for all states. In the State FY2010 budget operating assistance for public transportation was cut by more than 75%. The two departments partnering in the implementation of the State Coordinating Council for Community Transportation have limited resources to put toward this effort. The SCC has no funds of its own for either investing in transit or for staff.

Part of this is a general under-funding of the State's transportation network as a whole. The buying power of the State Highway Fund has fallen by more than half since the State gas tax was last increased in 1991, as construction cost inflation has outpaced growth in highway fund revenues. In 2007 the NH Department of Transportation identified that it would take over 30 years to construct the projects listed in the State Ten Year Transportation Improvement Plan due to cost inflation and inadequate funding. Since that time the Ten Year Plan has been overhauled to remove many projects, but the Legislature has not acted to increase gas tax revenues. Most of the projects removed from the Plan remain as needs, and as these projects are pushed further into the future the costs to construct them will continue to escalate.

As of June 2008, the State was facing a revenue shortfall of \$135 million, and the Department of Health and Human Services was looking at a \$15 million budget reduction as part of an attempt to balance the State budget. NHDOT faces a \$250 million deficit in funding over the next two years, growing to a projected \$1 billion deficit by 2018. Along

with a realignment and consolidation of Federal resources, New Hampshire must make the funding of transportation in general, and public transportation specifically, a priority and develop other sources of revenue. It cannot afford to wait for the negative health, economic, social, and environmental consequences of a failing transportation infrastructure to become any greater than they already are.

While implementing a volunteer driver program is key to any successful community transportation system, it is important to keep in mind that, as Jane Hardin from CTAA has pointed out, volunteer programs are not free. As with professional services, they require general administration support. None of the programs surveyed covered their program costs through passenger fees. The ability to access a variety of funding mechanisms was key to all of the brokerage programs as was the support of State and County funds to support the volunteer program.

2. State Government: There are examples in New Hampshire of State agencies working across departments and sharing resources, but this is not the norm and to date there has not been a mandate to do so. Transportation falls under the purview of a number of state agencies, depending on the source of funding and the client base to be served by the transportation. The amount of human and financial resources going toward solving the same problem is not known but is sure to be staggering. Strong, clear leadership from the top and a legislative mandate to aggregate public transportation resources are needed so that resources can be used in a statewide coordinated system. While the legislature created the State Coordinating Committee, it has not required that all the State Departments involved in public transportation (overseeing, regulating, providing, funding, developing, etc.) come together and pool resources. There is no clear incentive for state and local transportation providers to change how they do things. In this climate, it will likely take a great deal of effort at the community level, working against a funding system that is set up to encourage isolated and territorial service delivery, to accomplish lasting change.
3. Local Control: What New Hampshire is most proud of is also one of the things that makes accessing transportation services so difficult in this state. Our emphasis on “home-rule” (and perhaps our New England independence) often includes skepticism of regional initiatives. Even when we talk about the importance of “community” we tend to mean the town we live in or the organization we work for. Neither towns nor nonprofit human service agencies have built into their problem solving a habit of joint planning and resource sharing. The use of property taxes to fund local and county government, and the fact that nonprofits are often competing for the same limited dollars, breed “turf” issues and are obstacles to cooperation.

The relationship among state, county and local government, and how resources are allocated, does not hold communities accountable for activities that in other states are considered part of how things get done. When control gets spread thinly so do resources. The NHDHHS Bureau of Elderly and Adult Services (BEAS) oversees the Federal Administration on Aging funds, and develops the State’s *Plan on Aging*. It is charged with “collaborating with other advocacy groups on senior issues” yet the local Council on Aging in Exeter, which in the past oversaw the senior transportation taxi voucher program, appears to be disconnected to any larger system and its voice is barely heard. The BEAS is also the state mechanism for

funding volunteer transportation related to the Retired Senior Volunteer Program (RSVP), but the local program funds are not used to reimburse RSVP volunteers for driving others, a common practice elsewhere in the country.

COAST bus routes are limited by which towns are willing to participate in its funding. Obtaining town funding to support regional initiatives such as COAST or TASC, requires a time consuming town-by-town, even voter-by-voter, effort. While this provides voters with a tremendous amount of control over their local budget and the use of their tax money, it is inefficient in terms of the labor cost of establishing, maintaining and managing many small funding streams, and does little to encourage towns to engage in shared decision making, planning and joint funding of transportation or any other public service.

Another way the “local control” mind set is seen is within human service agencies. Partly because of this and partly because funding is a huge issue for all nonprofits in New Hampshire, local providers are often reluctant to engage in resource-sharing discussions. Agencies are often very protective of their relationships with their clients and express concerns that their clients will lose out if they partner with others in providing transportation. There is often a sense that only their program can provide the human touch required by their clients. This comes up in the context both of having a centralized call center, and having one agency’s clients ride on another agency’s vehicles.

4. Public Awareness: The impact that the lack of affordable, accessible public transportation has on the lives of people with disabilities, the elderly who no longer drive, children in foster care, people who cannot afford to keep a car on the road, individuals with acute and chronic health issues and many others, is generally under appreciated by the general public. Until we do a better job of education and awareness, the public’s fear of higher taxes will work against any attempt to significantly change State policy. There is a tremendous amount of good will and desire for change on the part of those working in the transportation field and those trying to access transportation on the part of their clients. These groups have yet to harness their power together for the purpose of visible and vocal political action.
5. New England Independence: As mentioned above, in New Hampshire we are proud of our independent natures and our ability to “make do”, such that it is often difficult for people to admit they can use some help. The May 2007 survey of Senior Transportation needs done in the Exeter area found that 78% of seniors expressed concerns about feeling dependent and were reluctant to ask for a ride from a family member or a friend even though they knew that person would be glad to help out. This reluctance may account for the 71% of respondents to this survey that expressed a willingness to use public transportation. This high level of interest in transportation options was also found in the 2005 statewide survey *New Hampshire Resident View on the Use, Availability, and Need for Public Transportation*, done by the UNH Institute on Disability under an Endowment for Health grant. The majority indicated they would like to have a greater access to public transportation, and 20% of those surveyed felt there was a need for some form of public transportation in their community.

That said, introducing a new way of doing business might not come easily regardless of publicly expressed support. The notion of having some form of “public transportation” for

people who have not grown up with this type of service may conflict with people's sense of order. In Exeter, for example, one of the Selectmen has publicly expressed the opinion that all that is needed to meet the needs of the few people who need a ride is to reinstate the taxi voucher system that had been offered by the town until 2006. There is a sense among some long-time residents that "business as usual" is enough and there is no need to provide more services even though, as noted above, citizens say they need it and would use it. That our disproportionately aging population presents challenges not hitherto presented and requires new solutions is not an easy sell in this region.

6. Climate and Geography: New Hampshire is not the only state challenged by its climate and geography. Six months of the year we have potentially inclement weather during which many seniors and people with disabilities are reluctant or unable to venture out due to ice and snow. On the flip side, we also, as in every other non-urban locale, have seniors who even in good weather should not be behind the wheel but who continue to drive because of the lack of transportation options. The risk for these drivers and others on the road is exacerbated in the winter months.

The rural nature of our region also precludes regular buses from traveling down a significant percentage of the residential streets. In addition, in areas of low population density transportation providers are challenged to determine economically viable service routes. Even in areas where a bus route may only be one quarter mile away, there may not be sidewalks or even safe shoulders on which to travel to the bus stop for those who have the wherewithal to walk. Once there, places to sit and wait and shelters from rain, wind or snow do not exist.

7. Liability: In 2007, the same piece of legislation that enacted the State Coordinating Council for New Hampshire included some protection to volunteer drivers with regard to insurance coverage. The amendment to RSA 412:17 (effective as of January 1, 2008) prohibits automobile insurance companies from refusing to issue a policy "solely because the applicant is a volunteer driver." In addition, policy holders' rates cannot be raised or a surcharge added based on the volunteer driving activities of anyone on the policy or in the household. There was an attempt to enact more comprehensive driver protections but this was killed in committee because, according to Representative James Kennedy, the language of the proposed legislation did not protect riders against driver negligence.

In spite of this relative lack of protection, the use of volunteer drivers is growing and it is not likely that this trend will change even if the laws do not keep up. The National Conference of State Legislatures survey referenced earlier acknowledged what other experts have been saying, "the key ingredient to the success of many special transportation programs is the use of volunteer drivers." It also echoed concerns about the difficulty of recruiting drivers in light of the risks.

In Minnesota, the Department of Transportation, The Department of Human Services, and the Department of Commerce cooperated in producing a volunteer drivers brochure for Minnesota called "Getting There Safely: Insurance and Liability Information." (See Appendix E.) It directly addresses concerns that drivers have about their exposure to liability,

the insurance laws of the state, and what protections can be expected as volunteers should an accident occur, and what they should do. It is clearly one part of their risk management. TASC's insurance carrier, CIMA, provides volunteers with a pamphlet called "Volunteers Insurance Service" (See Appendix E.) Under the heading "excess volunteer liability insurance" and "excess automobile liability insurance" they explain the basic coverage extended to volunteer drivers.

If we are to be successful recruiting and retaining drivers in the long term in New Hampshire it behooves us to provide our volunteer drivers with a clear understanding of all the current laws and protections. It also is in our best interest to work toward strengthening protections for those few who may be in an accident through no fault of their own. New Hampshire should look at the legislation passed in Georgia and Oregon as models for supporting the use of volunteer drivers.

FINDINGS

- The local, regional and state efforts to create a coordinated system for this area are aligned and making progress.
- TASC's growth in just over two years demonstrates its success in using volunteer drivers to meet some of the transportation needs in its service area.
- The formation of the SCC is a significant step toward better utilization of existing resources for transportation. Even so, New Hampshire cannot meet its transportation needs on \$.17 per capita expenditure for public transit.
- The political/cultural climate of New Hampshire is a barrier to funding a coordinated regional transportation system.
- New Hampshire has sought, through legislation, to provide some protection for volunteer drivers in the area of insurance coverage, but has not adequately addressed liability issues.

IV. BEST PRACTICE CASE STUDIES

A. Case Study Identification

In selecting volunteer driver programs to use as Case Studies, we sought agencies with a number of characteristics that would make their practices most transferable to the NH Seacoast context:

- Programs serving rural and suburban areas
- Programs incorporating volunteers in a range of capacities, including driving as well as call taking and ride coordination
- Programs using exclusively volunteer drivers as well as programs using a mix of volunteer and paid professional drivers
- Programs with differing public and private structures, and differing relationships to public transit agencies.
- Programs with and without a faith-based component, reflecting the faith-based aspect of TASC her in the Seacoast.

In particular we sought programs that had already been identified as exemplary by various national studies. We went to a number of sources for guidance and spoke to several people prominent in the field. Of great help were reports from the Beverly Foundation; the United We Ride/Administration on Aging report “Seniors Benefit From Transportation Coordination Partnerships – A Toolbox” written by Jon Burkhardt; and discussions with Jane Hardin and Bev Ward at CTAA.

We identified seven agencies that incorporate volunteer drivers as part of a multi-modal transportation system. While we refer to them as "brokerages" here, it was pointed out to us by Tri-CAP (Tri County Action Program in Minnesota) that some of the selected transportation providers are not, in fact, brokerages in the sense that they do not contract and/or coordinate rides outside of their own organization, rather they simply provide multi-modal services. Therefore, we have some apples and oranges issues in this study, a distinction that has some relevance to our implementation recommendations particularly in the area of funding. This aside, we tried mostly to stay with programs serving rural areas and ones that seemed to have differing “brokerage” sponsors and/or relationships to public entities. All had volunteer driving programs playing a prominent role in service delivery. Some varied in vehicle access and ownership. Two brokerages were chosen from our neighboring state of Vermont. The second Vermont brokerage was selected in order to look at how transportation services vary within the same statewide framework.

Along with seven transportation brokerages, our ten Case Studies included three *Faith in Action* programs. The *Faith in Action* volunteer programs are clear in their identity as social service providers, not transportation programs per se. Though *Faith in Action* programs generally are not part of transportation brokerages, they are included in our study in order to look at stand-alone volunteer programs that provide transportation and to consider other aspects of their services that may be useful in TASC's current role as a stand-alone transportation provider. From interviewing the TASC Coordinator and the literature on *Faith in Action* programs, it is clear that both the volunteers and the Volunteer Coordinator play an important social role in the lives of their

clients. Thus, we need to pay attention to this aspect of operating a successful volunteer transportation organization. The award winning *Faith in Action* programs we surveyed received Robert Wood Johnson Foundation grants through a rigorous competition and were reviewed by nationally recognized professionals in the field of specialized transportation services. Two of the *Faith in Action* programs serve rural areas. The third serves a suburban area.

This study originally intended to include a for-profit transportation brokerage, such as Logisticare, in its identification of exemplary practices. However, there were no such programs acknowledged as best practices in our literature search or in talking with CTAA and Beverly Foundation consultants. A Google search provided links to the for-profit websites as well as complaints filed against these businesses. One non-profit transportation provider, who has over 25 years of experience in the field, ventured that the reason we were coming up empty in our search for exemplary for-profit brokerages is that these organizations have a practice of undercutting local providers, not of cooperating and collaborating. Be that as it may, we could find no reference to the use of volunteer drivers by for-profit providers. Given our findings that volunteers are an essential part of a brokerage system, there appears to be little basis from which to recommend a for-profit approach for a coordinated system in New Hampshire.

The following ten agencies are the focus of the Case Studies in this chapter, and each is described in significant detail in the coming pages. Please refer to Appendix B for each agency's specific contact information.

Regional Brokerage Programs

1. Rural Community Transportation, St. Johnsbury VT
2. Stagecoach Transportation Services, Inc., Randolph, VT
3. Tri-CAP, St. Cloud, MN
4. Volunteers in Motion, Brevard County, FL
5. York County Community Action Corporation, Sanford, ME
6. Council on Aging and Human Services Transportation (COAST) Colfax, WA
7. Area IV Agency on Aging Senior Transportation Program, Twin Falls, ID

Faith in Action Programs

8. Rum River Interfaith Caregivers, Princeton, MN
9. Macomb County Interfaith Volunteer Program, Center Line, MI
10. Faith in Action Community Connections, Ellsworth, ME

The fragility of community-based human service transportation systems cannot be emphasized enough. Many of the programs reviewed in the literature and cited for their innovations and exemplary practices mentioned both funding and volunteer recruitment as ongoing challenges. The complex nature of transportation brokerages, the existence and requirements of multiple funding sources, and the patchwork approach to Federal funding make this a difficult field at best. One brokerage on our "short list" of programs for our Case Study was CART (Community Association for Rural Transportation, Inc.) in Harrisburg VA, which has won several awards and, in 2003, received an Easter Seals' *Project ACTION* grant. Just a few years later CART was

no longer operating. The Vermont system, started over 15 years ago, has built a statewide partnership under the umbrella of the Vermont Public Transportation Association. But they have recently learned that the State is negotiating with the for-profit company Medicaid Transportation Management (MTM) out of Missouri. How MTM will impact a system that has regionally coordinated its Medicaid rides through its VPTA members is of great concern to those providers and is now under review by the state.

B. Case Study Methodology

Once we made our selection and gathered general information about the programs' demographics and volunteer services, we determined what survey questions would provide information about the areas that seemed most problematic and/or challenging to us. They generally fell into the following categories: rider eligibility and parameters; coordination and dispatching; funding and compensation; and, volunteer recruitment, training and retention.

The volunteer driver coordinator or transportation director for each agency was contacted by telephone the first week in April to obtain their willingness to participate in an on-line survey and follow-up interview. In these initial conversations all expressed interest in and support of the project and were looking forward to learning the outcomes of the questionnaire. The questions were entered into a *Survey Monkey* document and the link was emailed to the contact person in each of the 10 programs on April 10th. All surveys were returned within a two-week period and a grid of the answers was developed to capture the multiple choice and short answer responses. *Survey Monkey* also provided a bar graph of the quantitative answers. (See Appendix D.)

The Advisory Committee reviewed the responses and on May 2nd follow up questions were generated for the consultant's telephone interviews with the survey participants. These were emailed to the survey participants on May 8th and follow up telephone discussions took place beginning on May 12th. This new material was reviewed with the Advisory Committee and the findings of Best Practices are the result of this work.

C. Brokerage Agency Profiles from Survey & Interview Results

We will start with profiles of the seven brokerage agencies, based on information provided on the surveys and from follow-up interviews. The three *Faith in Action* programs will be addressed in the next section.

1. Rural Community Transportation - St. Johnsbury, Vermont

Rural Community Transportation (RCT) is a nonprofit corporation serving the elderly, people with disabilities, and the public. Its mission is to “encourage the use, development and support of public transportation through the provision of coordinated, consolidated, non-duplicative transportation services: and to promote the planning and development of public transportation for the Northeast Kingdom including the counties of Caledonia, Essex, Lamoille and Orleans.” It was established in 1991 with a handful of volunteers and one van for the purpose of coordinating Medicaid transportation and grew to become the model for the Vermont Public Transportation Association. (VPTA is a network of 14 public

transportation brokerages each with its own service components and parameters. VPTA provides support, facilitates information and resource sharing. Members meet regularly to discuss Medicaid issues, review policies, and share other transportation developments).

This regional agency serves 4 counties covering 2, 474 square miles with a population of 89,719 as of the 2000 Census. Of this regional population, 14% or 13,099 are over the age of 65. RCT has 12 midsize buses, 13 vans and 200 volunteer with personal vehicles, and provides 200,000 trips per year for its clients. Of these trips 20% are provided by volunteers, -- a total of 41,844 trips in 2007. RCT provides non-emergency medical trips for Medicaid, and has contracts with the Area Agency on Aging, Adult Day Services, Northeast Kingdom Human Services, Central Vermont Council on Aging, Out and About, and the Northeast Kingdom Community Action.

Clients are eligible for rides by being authorized by one of the agencies listed above. The agencies fax their ride needs to RCT, which schedules all the trips using a “least cost” method. Anyone over the age of 60 who is assessed by the Area Agency on Aging to be in need of transportation assistance may use RCT. Non-medical personal care trips are accepted. Medicaid eligible riders may call directly to request a ride for non-emergency medical care once approved.

The coordination of the volunteers is done by their Safety and Operations Manager. This person does all the volunteer related paper work, intake, background checks (motor vehicle and national criminal checks), and handles all complaints. Drivers must carry the \$100,000/\$300,000 minimum private insurance. The Safety and Operations Manager also takes care of all the vehicles and operations for RCT, including the buses. This person manages between 150 and 200 volunteer drivers. RCT has 4 ride dispatchers and two intake people assigning rides from two sites. A third office is a staging area only for the drivers and calls from this area are forwarded to the St. Johnsbury dispatcher. A staff person goes to this location once in the morning and once in the afternoon to give drivers their manifests. A two-day notice is required, but many of their requests come in as much as a month in advance because they are regular trips for people with standing appointments. For example the State Department of Children and Families’ “Reach Up” program will book rides a month ahead for people going to work. RCT will do multiple trips a week for riders but may also place limits to conserve resources. For example, they may do 2 of 3 dialysis rides and have the rider pay for the third ride. They have a 2-hour cancellation policy or the referring agency will be billed for the ride.

RCT volunteer drivers are very professional. They submit their availability and are assigned rides. These drivers tend to be consistent in the days/times they will work and let the office know if there are any changes. Drivers receive a daily manifest of their trips and submit their paperwork every two weeks. They are reimbursed (with their home as the start point) at the Federal mileage rate (currently 50.5 cents/mile as of June 2008.) This is non-taxable income. RCT pays out \$80,000 to volunteer drivers every two weeks.

Two other volunteer programs overseen by RCT are the “Hardship Rides” and the “Personal Choice Rides” initiatives. These are considered more expensive rides because there are not multiple passengers being transported at once. “Hardship Rides” are Medicaid rides where the passenger, or a relative, does the driving and is reimbursed for the trip starting at the rider’s home. The “Personal Choice Rides” reimbursement also commences at the rider’s home. These are cases where the passenger will only accept a ride from someone they know.

RCT works hard on cost sharing in order to stretch state dollars available for transportation. For example, they always try to have three passengers per vehicle. This way they reimburse the driver for just the one trip and can bill each agency for 1/3 of the cost since it is split between each individual passenger’s source of funding. This means that each of these agencies can provide three times the volume of rides than if the passengers rode alone or use the savings for other parts of their service delivery.

RCT recoups 100% of the cost of its volunteer program by charging an Administration Fee to community organizations, schools or other State departments (e.g. Dept. of Justice, Association for the Blind) for its services. Their \$6 per trip fee plus mileage along with the Medicaid contract pays for the recruitment, coordination, billing and other aspects of the volunteer program. The agencies served feel that the \$6 fee is a deal since RCT’s cost sharing program saves them money.

RCT’s contract with Medicaid includes the payment of an administration fee, which covers the cost of running their volunteer program. The fee is based on the average cost per trip from the previous year’s data. Van rides for Medicaid work differently and are based on actual cost for operations and administration. The vans are owned by the Agency on Transportation for the State (VTrans) that has a capital fund and determines how and when vehicles are replaced. This statewide approach has cost savings all around.

2. Stagecoach Transportation Services, Inc. - Randolph, Vermont

Stagecoach is also part of Vermont’s statewide brokerage and serves 30 towns in the southeastern part of the state. Its mission is to provide “transportation to the elderly, persons with disabilities, and general public of Orange and northern Windsor counties; promote the conservation of petroleum resources through the development and operation of public transportation services; promote a coordinated and comprehensive approach in providing public transportation services to individual consumers, social service agencies, commuter groups, medical institutions, retail centers, and municipalities, including connections with other area and regional transportation providers; and participate in public transportation planning and development, including informing the public of the environmental and economic advantages of public transportation and encouraging the further development within Vermont of public transportation services.”

Its service area is approximately 1,100 square miles with a population of 50,000. 13.8% or 6,900 are over 65. They provide 100,000 trips per year, 15,000 of which are provided by volunteers using their own cars. The service area includes the city of White River Junction. Volunteer drivers do not cover this community and riders who are unable to use the public

bus are transported by taxicab as the most cost effective means given the short distances traveled. There are about 10,000 trips a year using the cab service.

Stagecoach has two full-time “Ride Coordinators” who do both the volunteer coordinating and the dispatching of rides. They take the incoming calls, determine the appropriate mode, look at the resources available and figure out how the trip is being paid for. The “mode” is determined by cost effectiveness and availability. Volunteer rides are scheduled one week in advance, though they do try to fill requests whenever they come in. The vehicle choices through this providing agency are a public deviated fixed-route bus, lift vans (contracted), volunteer driver, or cab. Volunteers are reimbursed for mileage and are used for the longer rides and rural areas not served by the bus. In addition to the Medicaid transportation provided, Stagecoach has a local agreement with the Vermont Council on Aging to provide transportation to six senior centers, and receives funds from 9 social service partners for its “Ticket to Ride Program.”

A unique feature of Stagecoach is its “Ticket to Ride Program” which covers 80% of the cost of a ride, for any trip purpose to people over the age of 60 or with disabilities. Fares are determined by distance. The nine social service partners that help to fund it have established annual caps for riders accessing this program: \$500 for an individual; \$750 for a family with two eligible riders; and, \$1000 for wheelchair service. There is no cap for people needing dialysis or going to cancer treatments unless all the funds in this program have been depleted for the fiscal year.

Funding for Stagecoach comes from FTA Section 5311 Rural Transit funds, the Federal Congestion Mitigation Air Quality (CMAQ) program, state and local funds, social service partners, and employers. Medicaid pays mileage reimbursement for volunteers. Unanswered is what happens when the three years of CMAQ pilot funding ends.

The software used by Stagecoach for ride scheduling, billing, and data tracking was created for the VPTA’s regional entities and is used by all the members of VPTA. This facilitates efficient information sharing and reporting for local, state, and federal purposes.

3. Tri-CAP - St. Cloud, Minnesota

Tri-CAP stands for “Tri County Action Program”, which is a federally-designated Community Action Program serving three counties in rural Minnesota, though not all the CAP services are available in all three counties. The mission of Tri-CAP’s Transit Connection and Volunteer Driver Program is to “provide safe, dependable, affordable and courteous transportation services for people in rural Stearns and Benton counties.”

Tri-CAP made the point that it is not a brokerage; it does not schedule rides for organizations outside of its own programs. Its Transit Connection runs a public curb-to-curb bus service for the three counties. Reservations are required and can be booked up to two weeks ahead though riders may call the same day to request a ride. The town-to-town schedules are available on line. Buses operate five days a week, and are completely accessible. The Dial-A-Ride bus service is available to those living within a 20-mile radius of St. Cloud and there are

two smaller Dial-A-Ride programs in other towns. Dial-A-Ride trips are configured based on the length of time the total route takes, not the availability of a seat on the bus. If the ride keeps the route length manageable, the ride is scheduled. If not, it is made for another day. Riders may call the same day or they can reserve a ride two weeks in advance. Tri-CAP's Volunteer Driver Program is only for those unable to use the public transit due to personal limitations and/or the day and time of service need.

Tri-CAP covers 1,753 square miles with a population of 182,784. Eleven percent or 20,106 residents of the region are over 65. In 2007, the Volunteer Driver Program provided 18,500 trips with 35 volunteer drivers. Riders may call one of several numbers to request a ride but all calls from all parts of the system (regular transit riders, Dial-A-Ride and Volunteer rides) come into one central dispatcher.

The Volunteer Driver Program serves clients of health and human service agencies with whom Tri-CAP has contracts. A dispatcher who has the drivers' fixed schedules arranges the rides in advance. If driver availability changes they let the dispatcher know. The key to their dispatch success is their automated system that enables them to double up on rides – thus increase rides and decrease the cost of service. Dispatchers refer riders to the appropriate transit option when the calls come in, and will call a driver to try and accommodate a need if a request comes in at the last minute.

Seniors who are not eligible for rides through a contracted social/human services agency cannot utilize the Volunteer Driver Program unless they pay for the ride. Cost is figured on "dead-head" mileage (driver's door back to driver's door) such that the cost is significant.

Funding for the volunteer program comes from contracts with three counties and four "medical assistance" programs. The Counties are charged an Administration fee plus mileage for volunteer rides. Tri-CAP reports its Medicaid rides to the County and the County in turn bills Medicaid and reimburses Tri-CAP. Volunteers receive a daily "start up" rate of \$4.00 and are reimbursed for mileage. Without the administration fee, Tri-CAP could not run the Volunteer Driver Program. The bus is operated with FTA Section 5311 rural transit funds but there are no Federal or State funds coming directly to the volunteer program. They have not determined the "cost per ride" of the volunteer program.

The success of Tri-CAP's Volunteer Driver Program has led to a growing number of small human service agencies obtaining grant funding to start their own volunteer driving programs. Tri-CAP is thus able to refer rides elsewhere if unable to fill a request. Recognizing the need for communication and coordination to better utilize this growing number of volunteer resources more efficiently, Tri-CAP received a "New Freedom" grant this year. The New Freedom Grant program is designed to support supplemental transportation services for individuals with disabilities that go beyond the basic requirements of the ADA. The New Freedom program allows certain trip types to be prioritized, which cannot be done with most FTA funding streams. Tri-CAP uses its New Freedom funding to make medical rides a priority, thus fitting in well with Tri-CAP's own volunteer program. The Transit Director reports that the goal of increasing interagency coordination has not yet been met; the smaller agencies apparently do not see the advantage to them in forming

partnerships and thus do not have a “stake” in trying to coordinate with the larger transit provider. Tri-CAP is hoping the second grant year will build more trust and result in success.

One challenge Tri-CAP has observed over the years is the growing savvy and service demands of its riders. Once the public understands that volunteer drivers are available to fill gaps when the fixed or deviated route transit or van service does not match their appointment needs, this becomes the preferred choice. For example, if the bus in their area comes Monday/Wednesday/Friday, clients begin to book their appointments for Tuesdays in order to have the convenience of a private car. Tri-CAP has had to be very careful about explaining who is eligible for volunteer rides, to assure that those who really can take a bus do.

4. *Volunteers in Motion - Brevard County, Florida*

This program was started in 1996 by Space Coast Area Transit to specifically meet the needs of elderly citizens who could not use the fixed route bus system due to health issues. At that time, Florida determined that addressing the medical and grocery transportation needs of frail seniors was key to enabling them to live independently in their own homes. While community access for social activities was acknowledged as being an important aspect of health, the State assigned priority to medical and grocery needs in order not to overwhelm its ability to provide rides. The Transit Director does admit that there is a grey area in its criteria and they do accommodate pharmacy, bank, and Post Office needs, as they are able.

Volunteers in Motion covers a region of 1,028 square miles with a population of 534,359. 20% or 10,687 residents of the region are over 65. Considered to be a rural area, the density is quite a bit higher than any other transportation program included in this study. It is selected to be in our research because it is the only program in which volunteers never drive their own vehicles. Space Coast volunteers are trained to drive agency-owned, specially equipped vans.

To qualify for a Volunteers in Motion (VIM) ride, one must be over 60 and not be able to use a public bus. Seniors who can take the regular Space Coast transit are not eligible. Those under 60 who are in poor health and have no other services available to them can also use Volunteers in Motion but the agency will not receive reimbursement for these rides. This is not a Medicaid transportation provider. Florida’s Medicaid system, which is reportedly very good, has its own separate transportation for medical appointments. There is another volunteer program in the area called Senior Transfer in which volunteers drive their own cars. People who do not fit VIM’s criteria are referred to that program.

The funding for this program flows through a centralized system. The nonprofit Senior Resource Alliance, which is the Area Agency on Aging for Central Florida, receives Federal funds related to elder services for this region. They in turn contract with the Community Service Council’s Community Care for the Elderly, which in turn contracts with Space Coast. Riders mostly come via referrals from Community Care for the Elderly (CCE) and must be registered with CCE in order for Volunteers in Motion to be able to bill CCE. They do have an agreement whereby rider eligibility can be determined by a VIM assessment and paperwork is sent into CCE. CCE sends VIM its list of clients each month who are

authorized to receive this service. Under this contract, VIM can provide transportation to the grocery store for Medicaid riders who cannot get State Medicaid funds and will bill CCE for these rides.

VIM is staffed by a full-time Program Coordinator (Lori Hamilton) and a part-time Staff Assistant. All ride requests are taken by these two staff members, and the Program Coordinator does an initial telephone screening if the person is new. A home visit is done for every client as part of the registration process, and takes care of the assessment and paperwork if CCE's pre-registration has not been completed. The visit assures that the information given over the phone is accurate and enables the Program Coordinator to match riders with volunteer drivers. Data are entered by the Program Coordinator and checked by the Assistant. In the Coordinator's absence, the Assistant fills in. There are 25 volunteer drivers and a fleet of 9 conversion vans. They have 250 riders who call one week in advance as a "courtesy to the volunteers" so that the schedule can be made out a week ahead. There is some deviation from this policy simply because riders forget to call. The Program Coordinator works out the weekly schedule on Thursdays for the upcoming week. Customers are called that Friday and are given their pick up time. There are no limits to frequency of rides, and the Program Coordinator remarked, "Customers respect the service limits and don't ask for too much."

The average driver works 3-4 hours per week. Some work set days and times, others are more flexible. Rides are schedule by geographic area first, then by time, and they strive to group riders but may drive one at a time. Summer is a very active time for VIM. Sometimes one driver will do the outbound route and another will do the trip home. The vans are low to the ground and have manual ramps for walkers and wheelchairs. Drivers serve as escorts when needed to get the person to and from the van.

The Space Coast Transit Director, Jim Liesenfelt, feels that the volunteer program is strong because it is under Space Coast's wing. The salaries, office space, accounting services, gas, vehicle maintenance, insurance, etc. are all taken care of by the larger entity. There is not a separate budget for this program and Volunteers in Motion does not engage in any fundraising. It is estimated that VIM costs \$100,000-\$125,000 per year to operate. Space Coast receives \$75,000 from the Community Service Council and "determines how much service they can provide with what funds are available and just cram people into buses." They do not match riders to funding sources or bill out according to people and trips, though they do report their trips to the Community Service Council. FTA Section 5307 funds take care of Space Coast's capital needs and it contracts with Ryder for all its maintenance.

In spite of being an established stable program, Mr. Liesenfelt echoed a strong sentiment heard from the other programs we interviewed: the paid coordinator is an important key to the success of the volunteer component. The relationships are a big factor and a lot of the volunteers "feel personal loyalty and attachment" to this person. Jim noted "the program would take a hit if Lori [Hamilton] left. She would be hard to replace." Lori makes herself available to the volunteers after hours to talk about any issues that may have arisen that day.

Geographically, the area covered is a challenge. The county is 72 miles long and 12 miles wide. It is split into 3 zones with the office in the most populated middle zone. There is a satellite office 20 miles south. It is not staffed full time but rather one of the main office staff go once a day to give volunteers their schedules, or communicate and/or work via fax, telephone and computers to communicate with those volunteers. They keep the volunteers within their zone for driving, and there are 5 vans working out of the main office and 4 out of the southern site. The north is more remote and at present they do not have high enough demand and enough drivers to establish a county facility (such as a library) as a “staging area” to keep a van.

5. *York County Community Action Corporation (YCCAC) - Sanford, Maine*

This Federally-designated Community Action Program started in 1965, and since 1981 its transportation program has been directed by one of the groundbreakers in the field of community transportation, Connie Garber. The mission of YCCAC is to “alleviate the effects of poverty, attack its underlying causes and to promote the dignity and self-sufficiency of the people of York County, Maine.” The transportation program started with one van in 1969 and while it does not have a separate mission, its brochure states that it “helps York County residents to be self-sufficient by providing transportation to community services and other destinations which they would otherwise not be able to reach.” The co-location of all aspects of YCCAC’s services facilitates communication and enhances its ability to address client needs that may arise beyond transportation.

YCCAC has benefited from State leadership and commitment. According to Ms. Garber, in 1984 the State of Maine recognized the need to improve transportation opportunities for specific groups who were not able to access a demand-response fixed-route system. Its priorities included transportation for children in foster care needing to get back and forth to home; children in protective custody with visitation rights; adults in protective custody due to mental health issues; and, seniors who are frail or disabled. These were the populations the State sought to serve through volunteers.

YCCAC is the brokerage as well as the operator of the county’s transit system. It is comprised of seven transit options, including 17 fixed bus routes and an extensive volunteer driving program. It is designated by the Maine Department of Transportation as a regional transportation program that facilitates access to and coordination of multiple funding sources. Many of its passengers are participants in the “MaineCare” Medicaid program. All ride requests are filled according to service eligibility and need with the goal of achieving the most cost effective and efficient match. If YCCAC cannot fill a ride it may call another provider, such as York Hospital, to see if they have a volunteer driver if the hospital is the destination. There are several organizations with a small pool of drivers that can be utilized. They also have subcontracts with two for-profit taxi services because they have found that sometimes that is the most cost-effective ride.

YCCAC covers 991 square miles of York County with a population of 202,232. Seniors over the age of 65 accounts for 13.9% or 28,110 of the population. The agency is located in Sanford, the largest town in the County with a population of about 25,000, situated 35 miles

from Portland. The volunteer program runs 7 days a week. The most recent data shows 71,198 trips provided by 112 volunteers. Of this total, 328 seniors made 11,545 trips. YCCAC volunteers average over 300 daily trips.

Eligibility for YCCAC volunteer rides is very strict and this program works closely with the entire system. Most seniors in the area take the bus, and fragility is not a criterion for a volunteer ride. The bus drivers help passengers get on and off buses. However, if a person takes the bus one way but their appointment ends after the bus hours, a volunteer driver will be scheduled to complete the round trip. Seniors who do not fit the income guidelines or who need transportation for non-medical reasons may be limited to the fixed-route bus.

Rides are dispatched by 3 full time dispatchers using a specifically designed computer software system that has enabled them to increase their trip volume. Wednesdays and Thursdays are primary scheduling days. They have a template for clients that are regular and do these on Tuesday morning so that by Tuesday afternoon those regular rides are scheduled through to the Friday of the following week. (Some rides, such as to dialysis, are booked further in advance and do not appear on the list of daily rides to schedule because the volunteer will already have this information.) Rides are scheduled according to priority and they are grouped in one vehicle as much as possible. “Dialysis and cancer care and other critical services” and “court mandated transports” come first. Two-day notice is requested and the dispatchers notify the riders 24 hours ahead to confirm the ride or let them know they do not have a driver. In cases of cancellations, they will plug in any unfilled rides. YCCAC serves all ages and riders are tracked in the system according to the funding sources for which they are eligible.

Over 50% of the time the dispatchers match rides with drivers based on the driver’s weekly schedule of availability received ahead of time. The rest of the time dispatchers contact drivers to work out the schedule and assign riders. Most drivers do multiple rides per day. Volunteers come into the office daily to pick up their schedules and to turn in their mileage. Rides are matches by geographical location of driver and rider since they provide reimbursement from driver door to driver door. If they have too many volunteers in a location they will not accept new volunteer applications from that area.

Most of their volunteers are retired people or those who physically are no longer able to do their job. They may receive disability payments but want to get out of the house and do something they feel is worthwhile. Some people drive for the mileage reimbursement and some drive to give back to the community. These drivers are “professional volunteers” and see this as their job. They are given pagers for text messaging so they can be reached in cases of last minute cancellations or rerouting needs. If a driver’s car breaks down, they are able to reach other drivers on the road to come to their assistance.

The average trip is about 45 miles. They also do longer medical rides into Boston or NHDHHS rides way up north to help transport children. Drivers may wait up to two hours for a return trip on an appointment. In cases of child transports, YCCAC tries to keep the same driver on both ends. While they are not an emergency service, once a month some of the drivers volunteer to provide what is called “after hours” duty for non-medical emergency

rides. If the Volunteer Coordinator receives such a call, she arranges for the ride with whoever is on duty. YCCAC also has an arrangement with the local homeless shelter for use of its van and driver in emergencies and the Volunteer Coordinator may dispatch the ride through the shelter.

YCCAC has a well-developed volunteer training and retention program. They require four “continuing education units” from their drivers each year and offer classes twice a year. Two basic courses on confidentiality and safety are required of all drivers. Credit can be earned through four courses taken elsewhere on topics such as stress reduction, first aid, CPR, and other health-related programs. They also tap into the local Adult Education classes for offerings. YCCAC goes beyond the annual appreciation luncheon with awards and monthly volunteer newsletters that are common to volunteer programs. YCCAC provides free annual inspections of volunteer cars and discounts on tires. Through an arrangement with Sprint, they also offer 15% discounts on cell phone purchases. Drivers who bring in new volunteer receive a “recruitment gift.” Quality is monitored through a quarterly random survey of rider satisfaction done by email or telephone. The computer program identifies every 7th trip in a particular time frame and identifies for the rider the day, time and destination of the ride for their feedback on specific questions.

YCCAC’s transportation budget is complicated and they look for sources other than Federal funds, such as Cancer Care, to “grow the service”. They have a Social Service Block Grant that is part of the agency’s contract with the State Department of Health and Human Services and it provides some funding for transportation services. In general though, the federal funds that come to the agency for transportation are attached to other parts of the system. They have about 30 revenue streams, including Federal, State, Municipal, and agency contracts. Every ride is attached to a source of revenue. Not all riders come with funding streams however. For example, Medicare does not pay for transportation even for someone in needs of dialysis. In such cases, YCCAC will double a Medicare rider up with a Medicaid or MaineCare eligible riders and thus they can recoup the cost of the ride. They cannot determine the cost of a trip because there are too many variables involved. As we have seen from other brokerages, their goal is to use the fewest possible miles when booking a ride and to find the most efficient use of resources. Sometimes this may be using a taxi instead of a volunteer. They view volunteer miles to be the least productive trips because they often are ones that need 1:1 aides and cannot be grouped.

As gas prices go up, YCCAC expects to see an increase in need for volunteers as more and more people will be unable to afford to drive. They may also see a decrease in the number of people willing to drive. At present, some drivers view the reimbursement as non-taxable income; they don’t consider the wear and tear on the car. This may change as gas prices increase.

6. Council on Aging and Human Services Transportation (COAST) - Colfax, Washington

The Council on Aging and Human Services is a ‘nonprofit, public benefit, social service agency’ which “provides a broad range of programs, including social services, nutrition, transportation, and home care.” The COAST transportation program has been delivering

“specialized public transportation services” for over 25 years both through direct and brokered providers. Washington is the state that wrote *Volunteer Driver: A Guide to Best Practices*, the guidelines used by most programs, and the Executive Director of COAST, Karl Johanson, is one of its editors. Like Connie Garber in Maine, Mr. Johanson has a long history in community transportation and was involved with the creation of CTAA.

COAST is both a provider and a broker of services and has been described as “one of the most coordinated transportation services in the U.S.” It serves a large nine county two-state rural area and its funding comes from a wide range of sources, including three Area Agencies for the Aging. It provides service to the general public, acts as a regional dispatch center for specialized services, trains drivers, oversees an insurance pool, has a vehicle loan program and does school transportation. It has a “highly supportive” relationship with a conventional fixed route public bus system that operates in one city even though they may compete for the same Federal funds. These two entities have been part of the “local coordination coalition” for which COAST has been the lead agency since 1983 and the bus is a contracted provider for COAST. For example, a rider who needs ADA assistance but does not fit into the strict ADA guidelines can access the public ADA bus under a separate contract COAST has with the other transit provider for this service.

COAST's service area covers 23,000 square miles including four counties in Washington and four counties in Idaho, with a population of 165,221. Approximately 13.3% of the population is over 65. The volunteer program makes about 500 trips per month using 22 volunteer drivers. 50% of their trips are Medicaid eligible and 50% are clients with special needs, elderly, individuals with long-term health issues. Some drivers do as many as 35 trips a month covering 2000 miles. In April 2008 one volunteer covered 2,600 miles doing 56 trips. Drivers are reimbursed at the Federal rate. As with YCCAC in Maine, many of them are retired and see this nontaxable money as income even though they have wear and tear on their car and gas to pay for.

COAST's Transportation Director, Gail Griggs, has been with the agency 11 years. Under her an in-house Volunteer Coordinator works part-time on transportation and part-time on other agency work. This person does all the paperwork, training and orientation related to volunteer drivers. Once recruited and in the system, the drivers are passed along to the Mobility Manager (dispatcher) who works full time. COAST also has a part time Mobility Manager who comes in 2-3 days a week. (The Transportation Director and the billing person may also pick up the phone if need be.) The Mobility Manager is the one who develops the close relationship with the volunteer drivers, getting to know what they prefer for rides, local vs. long distance trips, and other preferences. Rides are booked no more than two weeks in advance. COAST accepts calls a day ahead but prefers more notice. Rides are assigned to drivers according to the driver's availability, and once the trip is assigned the dispatcher will call the rider to confirm and gives the driver's name. The driver will then call the rider to confirm the day before or day of to make sure ride is a go. If not, the drivers will call into the office looking for another ride. In addition to their in-house volunteer escort drivers, COAST has contracts with at least one other volunteer program (it had more but they closed.) This program is able to dispatch its own rides but if reimbursement from COAST is desired, prior authorization is needed. Rides made after-ours, weekends and evenings, can receive

retroactive authorization.

COAST owns vehicles that it directly dispatches. It also uses grant funds to purchase vehicles which are then ‘assigned’ to partners. Thirdly it contracts with agencies that own their own vehicles. All ride requests are assigned according to the “lowest cost, most appropriate available” provider. Those requesting a ride will not necessarily know at the time the call is placed whether they will receive volunteer or paid services. The Mobility Manager makes the determination based on passenger need, time of year, date/time of ride, and availability of transport options. Contracted agencies vary in their own eligibility criteria. When a contracted agency appears to be the best match for a ride, the Mobility Manager contacts that agency with the request and that agency does the match with a driver and calls back to confirm that the ride is set.

Volunteer drivers are also used for COAST’s two volunteer van programs. Through its Community Vans Program, it turns over the full use of a COAST-owned van to an organization such as the Lion’s Club or the Chamber of Commerce. In turn the organization establishes a community entity to oversee this van for public use. The community organization has full responsibility for the use, scheduling and basic upkeep of the van, including helping to raise funds for its eventual replacement. COAST trains the volunteer drivers (which may be the same people that do other driving for COAST), provides technical assistance, and provides insurance coverage. This is a well-established program with set procedures, training, and implementation standards to assure its success. In the second program, COAST vans take people from rural areas into the larger shopping areas or towns. They do about 5 trips each month in each town. These vans are then made available after-hours, through loan or lease, to churches and denominational nursing homes, for weekly needs such as rides to church on Sundays. COAST’s umbrella insurance covers volunteer drivers whether they use their own car or a van.

Funding for administration and driver reimbursement of the volunteer program is filtered through COAST. A broad range of State and Federal funds are used to support the program including FTA Section 5311 rural transit funds, FTA Section 5703 urban transit funds, FTA Section 5310 capital funds for senior and disabled transportation, FTA Job Access Reverse Commute (JARC) programs, and State of Washington POSE funds. As a Medicaid broker, COAST agrees to provide a contracted or capitated number of trips in exchange for which it receives bulk funding. It is not required to bill Medicaid for individual rides and does not separate its volunteer rides by type. COAST is said to have the highest percentage of volunteer rides of any of the 13 brokerages in the state. In addition to these funds, United Way specifically designates some of its support to be used to reimburse drivers.

7. Area IV Agency on Aging Senior Transportation Program - Twin Falls, Idaho

Associated with the College of Southern Idaho, this nonprofit brokerage coordinates 5 very distinct programs including a “Trans IV” public transit’s dial-a-ride bus service, a taxi voucher program, Senior Center transportation programs, and RSVP volunteers. Established in 1982, Area IV Agency partners with the College’s Trans IV bus service in Twin Falls to cover the more urban part of the region with its wheelchair-accessible vehicles. Serving eight

south central Idaho counties, Area IV Agency works hard to match riders with the most appropriate resource using volunteers in a variety of ways. These programs are the “main source of accessible and affordable transportation for older adults in this highly rural area” and it is exemplary in being able to provide its services on a very low budget. Trans IV has 18 wheelchair-accessible vehicles and the Senior Center programs have 7 vans and 2 buses. For a period of time, in order to increase bus ridership by seniors, Trans IV offered them one weekly free bus trip, with any additional trips costing \$3.00.

The Area IV Agency on Aging has offices in two sites within the eight counties it covers. This is an area of 11,508 square miles with a population of 162,000 of which 13% or 21,060 are over 65. Six of the counties are able to be served by the volunteer Senior Transportation Program the other two are too sparsely populated to be served. This transportation program is only available to seniors without physical disabilities. It is administered by the local Retired Senior Volunteer Program (RSVP) and has a part-time (19.5 hrs) transportation coordinator at each site. They work 9am to 1pm 5-days a week. There is an RSVP volunteer who works 4-8 hours a week and covers the paid staff when they are sick or on vacation. This person also answers phones and dispatches rides as needed.

RSVP, though under a large multimodal transportation system, seems more aligned with *Faith in Action* organizations in its service delivery. Yet, it clearly benefits from being part of a larger system in terms of organizational and financial stability. In addition to transportation, RSVP volunteers provide in-home “homemaker” supports and respite care. The RSVP director is full-time and oversees all aspects of the program. It receives funding to oversee 500 volunteers. Thirty-two volunteers are dedicated to transportation and provide 400-500 trips each month. Drivers are reimbursed at the College of Southern Idaho’s rate of \$0.40 a mile, and they try to limit rides to 10 miles per round trip.

RSVP receives \$65,000 annually through the Federal Corporation for National Community Service. This supports the salaries of their 2 full-time equivalent staff. There are three sources of funding for transportation: State Transportation Funds that come through a contract with the Office on Aging; an \$18,000 “Community Health Improvement Grant” each year from St. Luke’s Hospital to support the medical transportation; and, private donations made by passengers and their families. The Community Health Improvement Grant is a “big chunk” of their transportation money since they do not do any Medicaid transportation; the broker has another provider for Medicaid. RSVP does not engage in fundraising, as that would put them in competition with the College that provides office space and other in-kind support.

RSVP has its own separate volunteer board that oversees the entire program. It is described as “very strong” and the RSVP volunteers are “the best” – they are very reliable and dedicated.

D. Faith in Action Program Profiles (Not Brokerage-Affiliated)

Programs included in the Case Study all received *2007 STAR Awards for Excellence and Special Recognition* from the Beverly Foundation. Macomb and Rum River were the winners of the

Award for Excellence, and Community Connections received a *Special Recognition Award*. Criteria for the award selection included organizational sustainability, relationships with human and transportation services, and client-centered practices. Each of the following three “faith-based” programs varies in the extent to which the organizations and volunteers are rooted in their individual religious communities. There is very much a neighbor-to-neighbor sense to these programs, and some participating congregations prefer to provide services only to their members. The intimate nature of these volunteer programs may account for this preference. That said, one program described itself as “more of a community program than a church program, with volunteers participating simply because they want to help others.” Regardless of the motivation, these volunteers are the point of access for many older adults and individuals with disabilities in the communities they serve, and the level of program service is impressive. Also impressive are the small budgets of these programs. Macomb’s is less than \$50,000, Rum River’s is under \$70,000, and Community Connections is around \$45,000.

8. *Macomb County Interfaith Volunteer Program - Center Line, Michigan*

Founded in 1992, its mission is to “respond to the ever-growing needs of older and physically challenged adults living in our communities who struggle daily to maintain their independence at home while providing meaningful opportunities for volunteers of all ages to enrich their lives and live out their faith by helping others.”

While this is a suburban program located near Detroit, this program was included with our Case Studies because of its conscious relationship to the county public transit system and its use of its volunteer driving program to “supplement” available services, making rides available to people at all hours, morning, night and weekends and extending its range outside of the municipal service area. It is also well connected with other social service as well and transportation service providers. As with other *Faith in Action* programs and human service agencies, they provide a high level of personal assistance to people who are frail and/or disabled.

Macomb has between 400-500 volunteers, 300 of which can be considered “active.” In 2007, Macomb had 158 volunteer drivers serving 219 seniors. They reported over 4,000 trips though this figure may be about 10% lower than actual rides since some volunteers are “not good at turning in their trip sheets.” 90% of their rides are for medical appointments and to the grocery store. 90% of long distance rides are medical. It is not uncommon for volunteers to drive 20-30 miles and some prefer the trips into Detroit and Ann Arbor. Their clients are not necessarily isolated individuals; many have families who are unable to take off from work during the day to get members to medical appointments.

The force behind this successful program, its founder and current director is, Karyn Dombrowski Curro. For the first year, it was a one-person agency and the director worked 70 hours a week. This is not an unusual story and many successful programs started similarly. Conscious of the danger of being dependent on one person, they now work hard to cross train their staff in order to fill any voids should they occur. In addition to Ms. Curro, who works 35 hours/week and oversees the operation, writes the grants, and does all the financial and other reporting, they are staffed as follows: a 0.75 FTE Office Coordinator who handles

intake and supervises staff; a full-time Volunteer Coordinator who does all the client assessments in-home, volunteer training, and community public awareness activities; a part-time Transportation Coordinator who matches rides to drivers and spends 80% of her time dispatching rides (125-130 trips per month); and two to three part-time clerical staff. At least every 90 days (and every two weeks for new clients and volunteers) the Volunteer Coordinator checks in with clients to find out how the services are going.

Macomb also has a relationship with the local college which provides volunteers to come in and do phone support through their “phone buddies” program. They train community volunteers to do this as well, many of whom work from their home. This may cut down on riders who want to chat when they call in with a request. Nonetheless, they do have people who are anxious about their ride and will call back multiple times a day to find out if it has been scheduled. This is when they find it is good not to have the dispatcher be the same person who answers the phone.

This agency uses the Federal Title V Job Training Partnership Act funds for office staff to answer the phone and do basic office work. This helps to keep their costs down. While these employees have few skills and receive on-the-job training and supervision, they work 18-20 hours a week at no direct cost to Macomb. Title V staff work for up to six months. They are able to fill out service requests as they come in thus freeing up others from this task. New clients are passed onto the paid staff for intake.

Ride requests, which as mentioned above are filled out by the people who answer the phone, are received at least two days ahead unless it is a medical emergency. Macomb encourages people to let them know even more in advance because some drivers prefer to have their rides scheduled 2-3 weeks ahead. The Transportation Coordinator works daily to schedule rides. They have self-created Access software system for record keeping but it is not used for scheduling. They found that the skill level of their Title V office staff and their use of volunteers made a manual system more reliable. They do their data collection manually and enter it into the Access system later. The Transportation Coordinator has all the drivers’ preferences and parameters in a notebook and matches accordingly, though 50% of the time she finds changes in driver availability. Once a driver is found, the Coordinator calls the client and tells them the first name of the driver and reconfirms the date/time/location of the ride. Later, the assigned driver calls the rider for additional confirmation, and does so again on the day of the ride.

They have two other programs available to clients that also provide transportation. One is a “matching” program where a volunteer is matched with a client for regular weekly activities, such as appointments and grocery runs. This only involves about 10% of their volunteer pool and does not appear in their weekly ride dispatching. They also have 7 local faith groups who prefer to meet their own congregational needs. They have their own coordinators who work about 5 hours a month. These clients are registered through Macomb. In turn, it provides volunteer training and support. This arrangement enables 30 more clients to be served. 80% of the transportation and other needs of these 30 clients are done through the partnering churches and the rest come back to Macomb.

The total budget for this agency is \$180,000. 60% of their funding comes from local fundraising and the rest from is state and federal funding through the Area Agency on Aging. Transportation makes up 50% of their service provision but only costs them about \$50,000. They keep costs down partly through using Title V workers who are not paid by the agency. They do provide some mileage reimbursement, at \$ 0.25 per mile, for the 20-30 drivers each year who request it. Money for this comes through a \$5000 subcontract from “SMART”, a Michigan initiative.

As with many nonprofits their biggest challenge is finding good board and committee members. They try to find community people who have contacts and skills that are needed, but as the Director observed, “Out of 500 volunteers, you may find one good committee member.” There are times when standing committees simply do not function because they cannot find a chair. Ms. Curro finds that a “good committee member can bring in \$1000 to \$5000 just by who they are.” They have five regular annual events: a Bowl-A-Thon, a spaghetti dinner, a formal dinner with a speaker and awards, a golf outing, and a community sweepstakes with benefit night at a local restaurant. The sponsorships they receive from businesses for these events are their biggest moneymakers, not the sale of tickets.

9. Rum River Interfaith Caregivers - Princeton, Minnesota

Founded in 1996, the mission of Rum River Interfaith Caregivers is to “provide volunteer services to individuals and families living in difficult life circumstances in an effort to enable those served to maintain their independence, dignity and quality of life.”

In this rural area with very limited public transportation options, it can take an entire day to go from one city to the other by bus. There are 30 faith organizations participating in Rum River and they have 75 “active” volunteer drivers, including about 30 who are regularly scheduled each week. Like New Hampshire, they have “snow birds” that head south for the winter months to contend with in their volunteer pool. They try to match volunteers with congregations, though they do not find that this matters to most volunteers. Rum River tries hard to use drivers only once a week, and they find they do not have regular requests from passengers or drivers for particular people.

Rum River serves three small cities/towns and surrounding areas located about 45 minutes outside of Minneapolis-St. Paul. This covers an area of about 11 square miles with a population of 10,795 and a density of 900 people per square mile. They serve about 102 seniors, and annually they provide over 5,000 trips. The Transportation Coordinator works part-time dispatching rides and serves other agency functions the rest of the time. Thursday is when the Transportation Coordinator makes out the schedule for the following week. This is mostly accomplished by Friday at the latest, with minor spill over into Monday. A two-day notice for a ride is required. A little over half the rides are dispatched anew each week; the others are subscription trips which are recurring services.

Rides are limited by distance and frequency. They feel the driver’s gas expense needs to be factored into their services, and do not go to the larger shopping areas if needs can be met locally, even if the local stores are more expensive. Shopping trips and grocery trips are once

a week or once every two weeks. Medical trips are unlimited but if someone has radiation 5 times a week Rum River will do one or two rides and family/friends/church cover the others.

In addition to the Transportation Coordinator, Rum River has a full-time Operations Manager. The CEO, Administrative Assistance and Bookkeeper are each part-time. Their budget is \$160,000 a year, and 30% of their funding comes from their thrift store which is operated by two employees. They receive annual grants from the Area Agency on Aging under the Department of Health and Human Services and from United Way. They also accept donations.

They use the Elderberry (www.elderberry.org) software system that was designed for the Institute on Living programs. It is Microsoft Access based and works well for all their programs. They color code their services and schedules and the Transportation Coordinator can easily track the “ongoing” versus daily ride schedules.

10. Faith in Action Community Connections - Ellsworth, Maine

Its director, Jo Cooper, who had come from another nonprofit social service organization that had provided transportation among other services, started this program five years ago. Faith in Action (FIA) Community Connection’s mission is to “offer free services to the elderly and disabled in Hancock County, in order that they can live independently, with dignity, and a strong quality of life.”

Community Connections covers Hancock County and the Greater Ellsworth area that has a population of 53,797, of which 15.9% or 9,349 residents are over the age of 65. This is a very rural area of 1,587 square miles with 33 people per square mile. Community Connections serves 400 clients with 140 volunteers, though some volunteers are seasonal and some are sporadic. They provide over 6,000 trips annually. As with other programs, they try to find volunteers who are located geographically closest to the client. The Director and a part-time assistant do scheduling.

Jo believes that the *Faith in Action* model is based on developing a coalition and she is always looking for ways to partner with others to provide the transportation piece of their work. FIA Community Connections is “not a religious organization, but rather a program supported by a coalition of community organizations, health care providers, volunteer groups and 10 local churches.” Thus they appear to draw from a wide segment of their community, and have a relationship with the local bus company as well. Ms. Cooper has identified a number of agencies that do transportation and tries to use them when geographically it makes sense. She believes that the more local, neighbor to neighbor, you keep the service the more successful you will be.

There are a number of smaller volunteer programs in the area that are one-person operations. Jo describes them as run by “good people trying to help people who live in this rural area.” Feeling that these smaller efforts could support one another and thus provide some protection from burn out or closing if the one-person resource gets sick or moves, FIA Community Connections has tried to reach out to them and has had some success with a program in Deer

Isle that has 4-5 volunteer drivers. These one-person programs rely on one neighbor doing all the service needs for another neighbor. Even though they are also easily overwhelmed with transportation needs for things like three times a week dialysis, they are often not interested in coordinating with others. FIA Community Connections actually finds these rides easy to fill because they are regular and predictable.

FIA Community Connections is also involved in a county-wide transportation planning group working to do more linking of services, to access some DOT funds, and to develop other volunteer driving programs. They feel that better local coordination may help them tap into underutilized funds through MaineCare for rides that the DOT is unable to fill. They are also hoping to get the food pantries in the area to offer rides. Ms Cooper meets regularly with the New England FIA network as well to exchange ideas. Their relationship with the local Community Action Program, which covers two counties and provides transportation from MaineCare/Medicaid, is a loose one. CAP will call them if they are stuck for a ride at the last minute and sometimes reimbursement for a volunteer driver is obtained this way.

Leadership is key to success, and FIA Community Connections is involved in a strategic planning process to assure stability and plan for “succession” so that if Jo Cooper leaves the program will be strong. This will involve writing a procedural manual. They are also checking in with the community at-large to determine public perception and support, and strengthen these local relationships. Presently, financial support comes from several sources, including donations, United Way, small grants, fundraisers, and town contributions. The latter is quite small. For example, the town of Ellsworth (the largest in this region) gives \$750 annually.

E. Findings Of Best Practices From Case Studies

Although our Case Study agencies did not all serve the same populations, there were a number of areas of consistency across all agencies, and several additional areas of commonality when the brokerage data were separated out from the *Faith in Action* data. With few exceptions the Beverly Foundation criteria for Best Practice – that transportation services be “available, accessible, acceptable, affordable and adaptable” - were characteristic of service delivery within each program. The *Faith in Action* programs, by their reliance completely on volunteer drivers, had some limitations in “accessibility” for individuals with significant disabilities, though two out of three did include them in their service population. The following summarized the main findings from our survey.

1. Volunteer Driver Roles, Recruitment, and Retention

Running a successful program that depends on volunteer drivers requires a commitment on the part of the agency to support a “volunteer coordinator” position. While volunteers may play support roles within an agency (e.g. assisting with celebrations, newsletters, recruitment activities,) there were volunteer coordinators overseeing the programs drivers. The volunteer coordinators in all of the programs surveyed played a critical role in the recruitment, training and retention of their volunteers.

Volunteer Driver Roles:

- Volunteer drivers assist in a variety of ways in **the recruitment** of other volunteer drivers. **Word of mouth** from drivers was identified as one of the most effective recruitment tools available to programs and volunteers are encouraged in this role.
- With the exception of the *Faith in Action* programs, volunteer drivers were used to **fill system gaps**. No “best practice” emerged among our Case Study programs as to who should be eligible for volunteer rides. When asked about criteria for assigning volunteer drivers within brokerage system, decisions are based on the **most efficient and cost-effective use of resources**. There are clear criteria for being served by the entire system, including volunteers, and riders are assigned according to what makes the best use of human, physical and financial resources. For example, in areas where they exist, fixed or deviated bus routes are the favored mode, and volunteers in these instances are used to fill gaps in their bus system. Age and frailty do not keep people from being assigned to buses or group vans, even in rural route transit areas. Though all 10 programs included “seniors” in their answer to the survey question of who is eligible for rides, **age was usually not a sufficient on its own to be eligible for volunteer rides**. A number of volunteer programs had contracts with human service agencies that set the eligibility criteria for the volunteer program.
- Volunteer drivers are used in cases where **distance and/or days/hours of trip** request prevent the use of a public bus or other transportation providers. Having volunteers available before and after hours and on weekends, and being able to get into hard to reach rural areas, are the reasons volunteer drivers make these systems exemplary. With this flexibility comes a warning from one of the directors interviewed: riders frequently become sophisticated in their use of volunteer resources and their ability to schedule the use of a private car over a public bus. Riders have been known to purposefully book medical appointments on days that the bus in their area does not run, thus becoming eligible for the preferred individual ride.
- Transportation for the purposes of **accessing medical appointments** is the largest part of the volunteer service provision of all Case Study programs. Most brokerage systems use volunteers for Medicaid eligible rides and received reimbursement for these trips. A couple of brokerages use a separate contracted service, not their volunteers, for Medicaid rides. Seven out of ten programs profiled serve people with disabilities and those with low-incomes that are not specifically eligible for funding programs. In looking at the brokerage programs only, 100% serve people with disabilities and those with low incomes. However, in only one (where volunteers drive accessible agency vans) are volunteer drivers transporting people using conversion vans.
- Six of the ten Case Studies identified **specialized training** for their volunteers. Both of the Vermont programs and Washington’s COAST program provide passenger assistance training so that their volunteers can transport people with special needs. Those programs that provide door-through-door services seem to take care to assure their volunteers are adequately prepared to assist clients. YCCAC has the most comprehensive program in

this regard, with required classes and annual Continuing Education Units. All of these training programs and opportunities demonstrate agency **attention to risk management**, which is born out by the low incidence of problems related to the use of volunteer drivers.

- Florida's Volunteers in Motion model was unique in that it uses its **volunteers to drive agency-owned vans** rather than private cars. The use of volunteers to transport individuals requiring lift-equipped vehicles provides a cost-savings to consumers who are unable to use a fixed or deviated bus service. In rural areas where covering long distances with professional para-transit services can be prohibitively expensive, volunteer driven vans can be huge cost-savings to coordinated systems.
- Washington's COAST Community Van program offers another **unique use of volunteer drivers** through the **distribution of agency-owned vans into communities**. This program enables local service groups to have full use of a van to address community needs in whatever way it sees fit. All drivers are volunteers and the community's sponsoring agency operates it under strict guidelines and procedures developed by COAST. Vans may be used to meet medical, social, recreation, cultural, or other needs of community members.

Volunteer Driver Recruitment:

- The recruitment of volunteers to cover large geographic areas requires that attention be paid to the **geographic distribution of volunteer drivers** in order to achieve efficiency and cost-effectiveness. Programs will discontinue recruitment efforts in locales where they have enough volunteers in order to avoid the time and expense of having drivers matched to riders who not live nearby. By the same token, programs will step up recruitment efforts to fill gaps.
- The ideal **number of volunteer drivers to recruit** depends on the number of hours volunteers work and, in some cases, the ability of the program to reimburse drivers. No specific ratio of drivers per number of riders was determined, though programs with sophisticated dispatching systems and more "full-time" volunteer drivers receiving mileage reimbursement could handle a higher trip volume per driver. *Faith in Action* programs had larger volunteer pools, with drivers averaging just one to two trips/week.
- Nine of ten programs felt that **public presentations to service clubs/organizations and word of mouth** from drivers were highly effective recruitment tools. York County Community Action Corporation was the only agency that did not do formal public awareness presentations to recruit volunteers. YCCAC does, though, have a Volunteer Driver Program brochure that is put in all the transit buses and other strategic public places along with brochures for other parts of its service system.
- **Newspaper ads** were also noted by eight of ten agencies as a method for recruitment, though on further questioning it was noted that these are not typically paid ads. Several programs have arrangements with the publisher of their local "weekly shopper" to put in

volunteer ads when they have some unused ad space. Most of the programs have newsletters, some dedicated to volunteers, and the *Faith in Action* programs put notices in the bulletins of their partnering organizations.

- The use by Area IV Agency on Aging (Idaho) of its federal Corporation for National and Community Service **RSVP** funds to support transportation and include it as part of its brokerages is something to pay attention to. This places driver recruitment in the most natural setting for recruiting volunteers, and **the majority of volunteer drivers are of retirement age**. In addition, RSVP comes with an organizational identity that can only make the job of attracting motivated volunteers that much easier.

Volunteer Driver Retention:

- Without exception, these organizations sponsor regular events and activities to **recognize their volunteers**, and understand the importance of this to their program. Given that driver word of mouth is cited as one of the best methods of recruitment, regular activities to recognize volunteers are an important part of a successful program.
- When asked about the **length of service and burnout** by volunteers, the average seems to be between 3-5 years, with several organizations reporting volunteers staying with them 10-15 years. “Burnout” is not a big issue, though in follow-up discussion some Volunteer Coordinators expressed concern regarding the impact recent economic hardships may have on both their drivers and passengers. Drivers who are “full-time” and carry regular passengers were felt to be more at-risk for stress. These Volunteer Coordinators were considering ways that the agency could better monitor and address the health and wellness of their volunteers. For the survey, however, half the reasons cited for driver loss seemed to be unrelated to the act of volunteer driving. The *Faith in Action* programs expressed some concern that they may be asking “too many times or too much” of some of their volunteers who end up leaving though they had no concrete evidence that this is the case.
- There are several practices related to volunteer retention learned, in particular from YCCAC, which go beyond recognition and are worth consideration. These indicate a level of **valuing volunteers** and a sense of expanding the variety and nature of **community partnerships** on behalf of the volunteers. Asking volunteers what they would like to learn about is another way of valuing volunteers and increasing participation in volunteer activities. Examples of volunteer retention strategies are:
 - Offering annual automobile inspections to volunteer drivers
 - Arranging for discounts from area merchants, such as a tire store and a cell phone service
 - Giving pagers to drivers so that they can be reached (by text) in case of changes in schedule, and if a driver breaks down or needs assistance they can contact the office
 - Asking that volunteers obtain a set number of “continuing education units” each year and offering courses such as CPR, or counting related outside courses such as a community class in stress reduction.

- Arranging for “continuing education” opportunities that last only one or two hours, thus limiting the additional time volunteers are expected to give.
- Providing placards, displayed in the car window, to identify the car as part of the transportation system.

2. Service Delivery

Assuring Quality:

- In talking with these Transportation Coordinators and Directors, it is clear that they take very seriously the best practices identified by the Beverly Foundation in evaluating transportation for seniors that are listed in Chapter II of this report (e.g. available, acceptable, accessible, affordable, etc.). While all responded that they “measure the success” of their volunteer program by their data on trips provided, there is a **strong sense of mission** regardless of the size or make up of the providing agency. Not being able to fill a ride request appeared to be a rare occurrence for all of the programs. In addition to trip completion, the *Faith in Action* programs and Idaho’s RSVP also specifically mentioned that they solicit direct feedback from their clients and volunteers and most do surveys.
- Programs, to assure quality services whether drivers use their own or agency vehicles, employ a variety of **risk management practices**. These included formal orientation programs for drivers and riders, specialized driver training, telephone follow up with passengers, written surveys, feedback from drivers, vehicle identification placards, and a number of support activities for volunteer drivers,

Criteria for Ride Scheduling & Eligibility:

- Seventy percent of our respondents **prioritize trips by purpose**, with medical rides coming first. They work hard to assure that they have a sufficient pool of volunteers, and it is rare that ride requests are not filled. Brokerages with riders in need of regular services, such as those on dialysis or cancer treatments and those with other regularly scheduled medical needs, try to schedule these rides weeks and months ahead thus eliminating them from weekly or daily dispatching. All the brokerages **provide drivers with mileage reimbursement** and this seems to professionalize their drivers to a degree. They appear to have a **consistent and reliable pool of drivers** and often receive fairly regular schedules from them. They do not have problems filling long-distance trip needs and a number have drivers who prefer these trips.
- Only **one** Case Study, a *Faith in Action* program, **limited rides per week and distance**. This is not all that surprising in the context of the rising price of gas and that fact that *Faith in Action* drivers are not reimbursed. Rum River does grocery store trips weekly or biweekly, and if a service or product can be found locally the ride is restricted by distance. Medical rides are unlimited, though multiple weekly needs (such as radiation 5 times a week) are shared with other resources (family/friends/churches) whenever possible.

- Nine of the ten programs identified **senior citizens as a population eligible for rides**, though these need not, as mentioned earlier, be volunteer driver rides. Tri-CAP did not list “seniors” because their riders must all come through contracts with social services agencies, and each agency has specific criteria to determine eligibility. *Faith in Action* programs focus on people in need of in-home supports due to age or disability.

Dispatching Rides:

- The survey indicated that rides for the most part (89%) were assigned by a dispatcher. In follow-up conversation, it was clear that all programs, even the smaller *Faith in Action* programs, **separated program management and volunteer coordination duties from the task of dispatching rides**. Some trained the person who answered the agency’s telephone to take down the ride requests. This arrangement freed the program and/or volunteer coordinator to concentrate on other aspects of the service. Depending upon the size of the program, the **dispatcher was full or part time**, and the programs had staff able to fill-in when the regular dispatcher was unavailable. All seemed to request 48 hours advance notice though they tried to fill last minute requests as able. Many worked on scheduling a week in advance and give drivers their weekly ride schedule.
- The dispatch/rider communication is a variation on a theme. Most dispatchers are using a **computerized system**, designed specifically for their program, to enter, assign and track trips. Generally dispatchers call drivers directly to make assignments and/or discuss availability and preferences. These variables are mostly known ahead of time by the dispatcher since **many volunteers appear to commit to a set block of time and days**, which facilitates the process. None of the surveyed programs appear to use email to communicate with their drivers, partly because many of the drivers are older citizens who do not use computers the way younger people do. A number of dispatchers do most of their scheduling on a specific day of the week for the following week.
- Riders who like to stay on the phone and talk, which was a concern for TASC, did not show up as a problem. While all programs acknowledge that some riders just need to talk, they do not see themselves in a role of providing telephone support and were comfortable in communicating their time constraints without leaving hurt feelings. There seemed to be a **high level of professionalism as well a caring** on the part of all we spoke with. One of the *Faith in Action* programs, Macomb, had a separate “telephone buddy” support program staffed by their volunteers and students from a local college. Even so, they find some riders have a high level of anxiety and call multiple times to find out if their ride has been scheduled. This is when it is good to have someone other than the dispatcher answering the telephone.

Cost Effectiveness:

- With regard to affordability, **volunteer rides are free** to the riders, though donations to the volunteer driving program (not to the volunteers) are clearly welcomed from the riders and/or their families.

- Grouping rides to maximize resources is common in the larger programs surveyed. This is aided by the technology available to the dispatcher and by the advanced notice given by riders. Programs find they can lower transportation costs by grouping non-Medicaid and Medicaid riders. In cases where rides are billed back to human services agencies, the **grouping can spread the cost of rides across several programs.**
- There is **no consensus** as to the **number of square miles** a volunteer program can cover. Geographic distances mean different things to those living in the northeast versus those in the northwest. The need for a regional office depends on what you define as a “region.” Dispatchers consistently take into account **how far the driver lives from the passenger.** In cases where the driver is being reimbursed from driver door to driver door (dead heading) geographical location is an important factor in scheduling rides. Two programs mentioned specifically that they recruit drivers based on the geographical needs of the program and one indicated that it stops accepting volunteer applications from areas where it already has enough drivers. This attention to geography makes good sense regardless of driver reimbursement:
 - It is cost-effective to the driver to minimize miles put on the car and gas consumed.
 - It uses less driver time and thus makes that driver available for more riders.
 - It promotes a sense of neighbor helping neighbor that can increase satisfaction and aid in driver recruitment.
- Using volunteers in settings where **professional paid drivers** also work is **not an issue.** All the programs found there was more than enough work and their paid drivers did not feel threatened by or in competition with the volunteer program.

3. Funding and Compensation

- All programs had **multiple funding streams** to support their services, though it was generally difficult for the larger brokerages to separate out funding used to support their volunteer program from their broader operation. The *Faith in Action* programs, Volunteers in Motion and RSVP, gave specific dollar amounts when asked the cost of the volunteer transportation program. Four programs came up with figures that were impressively lean for their transportation services (\$45,000-\$70,000), which was not surprising for the *Faith in Action* programs and is born out nationally. Volunteers in Motion was higher (at over \$100,000), due in part to the cost of agency-owned vehicles.
- The brokerages usually listed the **Federal programs**, such as FTA Section 5311, FTA Section 5310, and Medicaid as sources, along with county and municipal government funds and contracts with agencies. The *Faith in Action* programs, Idaho’s RSVP, and Volunteers in Motion do not receive Medicaid reimbursement, the latter two being part of a system with a separate Medicaid provider. In spite of multiple funding sources, the only program which expressed complete confidence in the stability of its funding and seemed not to have budget concerns is Florida’s Volunteers in Motion.

- Vermont’s RCT describes its funding as sustainable because they operate under a “**cost recovery mind set**” by which they will not provide a ride if they cannot find the money to cover the costs. RCT indicates it knows exactly how much a ride in each part of the transportation system costs and advocates with their funders for the appropriate reimbursement. They have a dollar amount for volunteer rides that they expect to be captured by their volunteer program.
- In states of the brokerages surveyed, volunteer programs are permitted to recover **Medicaid reimbursement for volunteer rides** regardless of fare policy, e.g. whether a fare is charged for the rides. The Medicaid Administration fee goes to the agency and mileage goes to reimburse the volunteer.
- All **brokerage programs compensate volunteer drivers for their mileage** when using their own cars. There seemed to be a high level of professionalism that came along with the drivers seeing this volunteer effort as a “job” from which they earned income. These programs seemed to have drivers that put in more days and hours and were more willing to offer their schedules in advance.
- ***Faith in Action* volunteers by and large are not compensated** except for Macomb, which has recently seen an increase in requests for compensation due to rising fuel costs.
- Vermont’s RCT and Minnesota’s Tri-CAP charge their partnering agencies an **administration fee** which they say makes it possible to run the volunteer program. The cost savings to the partners, in being able to farm out their clients’ transportation needs, makes it well worth it to them to pay this fee.
- If you do not count FTA capital grants for vehicle replacement, Vermont’s two programs and Florida’s Volunteers in Motion are the only programs that do not list **grants** as a source of income.
- Macomb is the only *Faith in Action* program to **capture some funds through their regional public transportation agency**. This speaks to its work establishing relationships to the public transit system and other human services agencies in its community so that it is viewed as a viable resource outside of the faith community.

Donations and Fundraising

- As mentioned earlier, there are no fares for volunteer rides but 9 of 10 programs accept, and even encourage, **free-will donations** from riders and families to the agency. FIA Community Connections explains in the consumer guide that it gives to all clients that the agency is “funded with individual donations, bequests, small grants, and holds fund raising events. Without adequate funding we will not be able to continue this program.” The impression for all providers who solicit donations is that clients are glad to make contributions, as they are able.

- Four brokerage programs (Rural Community Transportation, Stagecoach, Volunteers in Motion and YCCAC) **do not engage in any fundraising**. This is in contrast to other programs, in particular the *Faith in Action* programs, which use a lot of staff and/or board time chasing dollars and depend hugely on grants and community fundraisers.
- All the *Faith in Action* Programs and Washington’s COAST engage in **fundraising activities** to support their transportation program. In the case of COAST, the fundraising appears to be tied to its Community Vans program. While fundraising is a labor-intensive activity, it **can serve to increase community awareness** of the program, the needs, and the opportunities. Macomb holds five regular fundraisers each year, which appear to be part of the fabric of their community.

4. Marketing

This was not a topic covered directly by the survey, though marketing becomes an important activity at two ends of the system: one, as a **public awareness tool** for those in need of transportation, and two as a means of gaining the community’s awareness of the needs being addressed by the service and translating this into financial support. For a volunteer driver program not connected to a transportation call center such as TASC, marketing the transportation services is important for these two reasons as well as being a **tool for volunteer recruitment**. Given the volume of trips provided by all the Case Study programs, and their low rate of unfulfilled trips, marketing efforts to recruit riders and drivers is treated as a serious endeavor. The fragility of funding is reason enough for programs to have a marketing and public awareness plan with multiple components targeting various audiences and with an eye to the bottom line.

In addition to citing a number of recruitment strategies used in the community, all of the programs were easily **accessed via their web sites** and varied in comprehensiveness of the information. All had a number to call, hours of operation, and their mission. Though the current senior population may not use the Internet as their primary means of gaining information, increasingly they are and many have family that do. A website that is linked to other services, thus not dependent on a searcher needing the correct name of the volunteer transportation provider seems important. In most cases when the area was “Googled” as part of our research, the volunteer transportation program was easily found.

5. Leadership and Sustainability

While funding is a primary concern when considering a program’s sustainability, it is not the only one. As mentioned at the beginning of this report with regard to Virginia’s CART program, **the way organizational leadership is handled can have an immense impact on the agency’s future**. A number of the Case Study programs made this point during our discussion and one (FIA Community Connections) is presently engaged in strategic planning to address this piece of the issue of sustainability. Good programs have good people, and some have clearly come about through the sheer work and will of those people. However, programs that depend on the personal gifts and energy of one person, even those with strong boards, probably cannot be sustained. The agencies interviewed had in place, or were

developing processes to protect them from closing should key people leave. Many had positions and/or functions shared by two staff so that coverage was available in times of illness or vacation.

FINDINGS

- Volunteer driver programs have been at the forefront of successful regional transportation programs and were the starting place for a number of model brokerage systems.
- There is no optimum geographic area across which a volunteer program can be run. Programs covering large geographic areas may have satellite offices.
- Volunteer drivers are a cost effective way to provide transportation, especially to fill gaps in diverse regional systems. However, volunteer programs are not without costs - they require adequate staff and funding.
- Brokerage systems have difficulty meeting the needs of individuals in rural areas without volunteer drivers.
- Volunteer drivers can be used for transporting riders not only in private cars, but also in agency-owned vehicles such as lift-equipped vans.
- Brokerage systems typically have clear criteria for service eligibility and prioritize their rides by purpose. As with all modes of transportation, volunteer rides are assigned according to cost effectiveness and efficiency.
- The role of the ride dispatcher is critical to system efficiency and cost effectiveness.
- Volunteer Coordinators are essential in maintaining a viable recruitment and retention program.
- Creating stable and diverse funding streams is important to sustainability: the agencies, businesses, health care providers, etc who benefit from the system should help pay for the services through administration fees.
- Bulk Medicaid funding can provide stability to programs. Medicaid reimbursement should be captured as well to assist volunteer driver recruitment and retention.
- While this is not currently the practice in NH, Medicaid funds can be used to reimburse volunteer driver programs even where there are no fees charged for the rides provided.
- Donations cannot be the main source of funding for a volunteer program, but need to be part of the mix. Passengers often want to contribute to the ride cost, as they are able.
- Fundraising is an integral part of volunteer driver programs, especially where limited public resources exist.
- Marketing and Public Awareness are critical aspects of a sustainability strategy.
- Good leadership from a single individual can create model volunteer driver programs and brokerage systems. Programs cannot, however, depend on the talents and energies of any one individual and be considered stable and sustainable – they must plan for succession.

V. IMPLEMENTATION

A. Recommendations for TASC as an Agency

There are advantages to being a “stand-alone” provider, and to being part of a brokerage system, as seen from the vantage point of our Case Study programs where we found successes in both arenas. A logical next step in the development of TASC is integrating into the planned ACT brokerage, which will create new opportunities for coordination of call center and ride dispatching functions. Through the Exeter Region Transportation Committee, TASC has explored the potential to consolidate these functions with the two agencies with which it regularly collaborates (Lamprey Health Care and Meals on Wheels). However, inconsistent service area boundaries and the impending launch of the ACT brokerage have led the agencies to decide against a separate call center for a subset of the ACT region. TASC should seek to integrate call taking and dispatch functions into the regional call center such that more staff time can be devoted to volunteer recruitment and retention, increasing service capacity, fundraising, and expanding its reach into the community.

1. Service Provision and Program Design

Eligibility

On the surface, the population served by TASC matched many of our Case Study agencies. In reality, few of the volunteer programs in brokerage systems provided rides based solely on a rider’s age or transportation dependency. There were other criteria based on need, funding, and relationships with other agencies. If TASC remains a stand-alone entity, it will eventually need to engage in some level of triage or it will have difficulty keeping up with demand. Volunteer driver programs cannot be viewed as the primary solution to the lack of public transportation for seniors who no longer drive. The benefit of volunteer drivers to a coordinated system is their flexibility in filling gaps. TASC now communicates with other local providers, and is increasingly referring clients back and forth, particularly with Lamprey Healthcare. Riders needing to go to the grocery store are often referred to the Lamprey shopping bus, and TASC has tried to help riders access the American Cancer Society’s Road to Recovery program for cancer care rides. Yet it must be recognized that in six of the eight communities in TASC’s service area there are currently no other economically feasible options for rides to essential appointments in much of the region. Lamprey Healthcare does provide rides to medical appointments, but they require at least three weeks notification. If TASC is an active part of the brokerage system, as is hoped, the system will help define TASC’s niche. Nonetheless, the potential for overwhelming its capacity will remain until other parts of TASC, including staffing and sustainable funding, are further developed. If this does not occur it may be appropriate to restrict certain types of rides, as Rum River does, to once or twice a week and refer others to Lamprey or another provider. The challenge is that typically riders have turned to TASC because of a lack of other options for repetitive trips like dialysis.

Ride Sharing and Geographical Matching

TASC has a fairly steady and consistent pool of riders. To optimize the use of volunteer drivers and to make its model more efficient, TASC should consider restructuring the way it matches riders and drivers to increase sharing rides. While TASC encourages ride sharing, it is up to drivers to decide when and where they go, since driving is strictly a voluntary function with no mileage reimbursement. The majority of its drivers come from two communities. One is the town in which the TASC Coordinator is a well-known community leader, and the other is one of the largest communities in the service area and has a history of local transportation support. In this context, it is difficult to turn away volunteers who are willing and able to go longer distances to pick up passengers. It is not unusual for drivers from one town to travel to other towns to pick up a rider, and then drive back in the direction from whence they came. Consideration for how much time and distance drivers are covering to meet the needs of TASC clients should be built not just into dispatching functions but also in the recruitment of new volunteers. This not only can save on gas and time, it also increases the neighbor-to-neighbor aspect of the program, which a number of our Case Study agencies felt was an important consideration. In the context of a brokerage system, with the potential to reimburse drivers for mileage, there are cost savings in ride sharing and in geographical sensitivity.

Call Center

As touched on above, TASC would benefit from having its calls answered by someone other than its Volunteer Coordinator. This could be a partner agency with unused call center capacity, or could be additional volunteer or paid staff working out of TASC's office. In none of the Case Study agencies did one staff person currently function in the multiple roles that exist in TASC – a reflection of TASC's infancy stage and its fortune in having a Coordinator who is able to fulfill many roles at once. By sharing the call center function with another agency, there are efficiencies in staff time and staff costs. While personal contact is one of TASC's strengths, trained call center staff are able to provide a friendly and welcoming presence without being overburdened by client need.

Dispatching Software

There is no “best” when it came to what software system is used for scheduling and dispatching rides. Most agencies surveyed had developed their own or modified something on the market. Except for one program that is “in transition” and learning a new system used by a regional brokerage, all were able to easily access data for various reporting functions. TASC is presently using an Excel based system that does not serve the agency well in terms of easy access to data or ride dispatching. Having a system that can easily be used by other staff and/or volunteers who can fill in when needed, and minimize duplication of data entry, are the most important criteria. At the State level NHDHHS is in the process of designing a new software system for use by regional brokerages such as ACT, though it is unclear at present whether this system will include modules for scheduling and volunteer management, or solely communication between NHDHHS and regional brokers on billing and client eligibility tracking.

Staffing

- a. Dispatching: Along with taking requests for rides, TASC needs more than one person who can dispatch rides. Expanding TASC staff and/or working with others to engage in cross training will reduce TASC's current vulnerability by ending reliance on one person knowing all parts of the service.
- b. Volunteer Coordinator: This role can be shared by the Program Coordinator making one full time position, or TASC could have two part-time staff. At present, because there is only one person doing everything, the recruitment and "care and feeding" of volunteers takes a back seat to receiving requests and scheduling rides. For example, it may take several weeks from the time a driver contacts TASC to completing the process of getting the new driver into the system. In addition to implementing better processes for volunteer recruitment, TASC needs more staff time to communicate with and recognize its volunteers on a regular basis. While the Coordinator does an excellent job making her drivers feel individually valued, there is a missed opportunity for social networking that retired people often look for when deciding to volunteer. This may serve to enhance driver recruitment.
- c. Program Coordinator/Transportation Coordinator: This position can be combined as indicated above or stand-alone. With the rapid growth TASC has seen in its first two years of operation, it is recommended that this position be stand-alone. The Program Coordinator is the "face" of volunteer transportation in the community and needs to be actively engaged in marketing and public awareness as part of the sustainability of the program. As the "executive director" of the program, the Coordinator is intimately involved with the board in assuring the stability of the program and overseeing the other staff and volunteers. This person needs to also be in a position to work with other agencies in the ongoing development of transportation options and be responsive to the changing needs of the community. This is not possible if the Coordinator is also dispatching rides and registering new drivers.

Quality Assurance

One measure of quality for all programs surveyed is service provision. TASC has done an admirable job of filling ride requests given the rapid growth it has experienced. That it cannot always fill 100% of the requests is due, in part, to the staffing issues mentioned above. In addition, there is a critical lack of transit alternatives for most of its riders in the towns served. TASC is burdened with a number of riders who have multiple healthcare trip needs (such as dialysis) each week. With a reworking of staffing and increased attention to volunteer recruitment, TASC will be able to turn down fewer trips.

Many of the Case Study programs also had a formal and regular method of receiving and documenting feedback from riders and drivers. TASC has many positive anecdotal stories from its riders and drivers, but formalizing a process of monitoring customer and driver satisfaction is also recommended.

While not a direct “quality assurance” measure, peer support and education benefits are important to the development of both staff and programs. Time and resources need to be built in so that TASC’s coordinator, and any future staff, can benefit from formal and informal professional growth opportunities.

2. Sustainability

The biggest challenge facing TASC, and one that must take priority, is that of funding sustainability. Some aspects of this were addressed above under “Service Provision and Program Design”. The hardest piece for almost all programs studied is funding, whether it be a program that is part of a brokerage or a stand-alone, though clearly there are greater protections for those that are part of the brokerage.

The following “sustainability” recommendations apply whether or not TASC partners with ACT:

Board Development

During the summer of 2008 TASC formalized its Advisory Committee into a Board of Directors as part of preparing to apply for Federal 501(c)(3) non-profit status. Along with this change in name needs to come a change in expectations for Board involvement in building and sustaining the organization, as well as steps to expand the Board and plan for succession.

- a. Board Makeup and Succession: TASC’s Board should expand to include broader representation from individual communities, as it looks to expand its municipal funding base, and from community stakeholders that benefit from TASC’s services. Given that over 80% of TASC rides are for medical purposes, at least one representative of a medical facility should be recruited to the Board. Other representatives from private business would be helpful in expanding the agency’s connections in the community, as would specific skill sets such as legal expertise.
- b. Board Involvement and Committees: TASC needs to develop working committees to adequately support the work of the organization. These should include fundraising/grants, marketing and public awareness, volunteer recruitment and retention, and personnel. The full board should be involved in the development of a strategic plan in the coming year.

Funding

It is clear that TASC has become a vital resource to this region. Its future will depend upon increasing its budget to allow for sufficient staffing and stabilizing its sources of income. To this end, the Exeter Region Transportation Committee worked with the Town of Exeter to implement a supplemental vehicle registration fee (the "Local Option Fee") of \$2.50 per vehicle annually, with proceeds to be used to expand access to community transportation for populations in need of rides

Another potential source of revenue for TASC, used by most of the case study agencies, is Medicaid Non-Emergency Medical Transportation (NEMT) funding. As noted earlier, the NHDHHS Medicaid program will reimburse volunteer drivers for mileage in providing Medicaid trips. However, in the case of organized volunteer driver programs NHDHHS has had a policy, based on its interpretation of federal rules, of reimbursing only the fare paid by the general public. Given that TASC is a free service, to date NHDHHS has taken the position that it would not reimburse for the mileage driven by TASC volunteers. Other states, including Maine and Vermont, have been able to respond to this problem by treating reimbursement to agencies for agency-coordinated volunteer mileage as an administrative expense under the Medicaid program, a designation which allows greater flexibility.

NHDHHS will need to develop a solution of this sort as it moves to establish a statewide network of regional brokers to coordinate Medicaid NEMT trips. Until an NEMT broker is in place for the Seacoast region, TASC should identify what percentage of its trips are potentially eligible for Medicaid reimbursement and work with NHDHHS to pursue this approach.

An additional approach to generating trip-based income would be partnering with Easter Seals of New Hampshire's TRAC program. TASC would provide transport for Easter Seals' clients residing in the TASC service area who are able to ride in a regular car. This would save Easter Seals the cost of dispatching a van from Manchester, or contracting with a private lift-equipped van provider to pick up one rider, thus saving resources for Easter Seals and providing revenue for TASC.

There are a number of other practices from our Case Study agencies that TASC can adopt which would expand its sources of funding to build stability in the program. The following are recommended:

- a. Town Contributions: TASC has begun the process of seeking public funding from each of the eight towns it serves. In 2008 one town (Hampton Falls) included funding directly in the town human services budget. In Exeter TASC partnered with the Exeter Region Transportation Committee to establish the "Local Option Fee" with proceeds dedicated for senior transportation. For 2009 TASC focused on general warrant article funding requests and secured commitments totaling \$23,200 from four of the communities.
- b. Hospital Donations: Questions have been raised recently by several NH hospitals regarding whether they can fund transportation programs without running afoul of the Stark Law, which prohibits physician self-referral of Medicare and Medicaid clients. There are numerous examples of hospitals funding community transportation programs and not running afoul of the law, provided that the transportation program does not exclusively serve the contributing hospital. Improving access for their clients has a value to Exeter Hospital and its related medical practices, and the vast majority of TASC trips are for medical appointments. TASC has ample data on trips provided to specific medical facilities that may be incorporated into funding proposals to those facilities. As part of TASC's upcoming work to expand its Board, a representative from Exeter Health Resources would be an excellent addition.

- c. Rider Donations: TASC has recently taken steps to track voluntary rider donations, and this information is being incorporated into their budget process and included in their orientation materials. While none of the case study programs indicated that rider donations were a major source of revenue, almost all accepted donations. TASC already has some passengers and families that donate to them. In the survey of former Exeter taxi voucher participants in May 2007 it was clear that many people would be more than happy to pay something for a ride. The benefits to TASC in seeking this revenue source, and the psychological benefits to the riders cannot be overlooked.
- d. Administration Fees: TASC should explore the idea of contracts with medical groups such as Core Physicians, dialysis centers, human service provider agencies, grocery stores, or other organizations, by which the agency would agree to pay TASC a modest administration fee to support the dispatching of rides to their facilities. Several of the case study agencies had developed similar arrangements. Since TASC is not in a position to guarantee rides, the administration fee could be on a per-ride basis.
- e. Funding Support for Staff: There are several sources of staff support that may be available to TASC and well worth investigation. Given the success of multiple case studies in working with the Corporation for National and Community Service, TASC should look into securing RSVP or VISTA positions to fill this support role. The logistics of ride requests and dispatching make this position one that could potentially be filled by someone with mobility issues that may limit employment in other areas. At present, though, the in-kind office space it receives may be a challenge to accessibility.
- f. Fundraisers: TASC has relied on a few funding sources rather than identifying the multiple sources needed to sustain its program. TASC should likely consider developing one or more annual fundraising events that pull stakeholders together and build its identity in the community. It should seek unique partners in this, such as car dealers, gas stations, grocery stores, and medical professionals. These regular fundraisers will serve TASC in several ways:
 1. To raise needed revenue
 2. To act as a public awareness and marketing tool
 3. To build community partnerships as you engage others in your event
 4. To recruit volunteers

Board support, in the way of a strong fundraising committee, and/or dedicated staff time will be required to develop and implement community fundraisers.

3. Replication

The above modifications to TASC's model of service provision make it more adaptable for replication in other parts of the ACT service region as well as other communities, and make it attractive in a number of ways:

- Conceptualizing TASC in partnership with ACT where certain functions can be shared can make start-up less costly and less daunting.
- By providing a model for a regional Volunteer Driver Coordinator, human services and nonprofit agencies can consolidate efforts that currently are only marginally functioning, thus making replication an attractive prospect.
- The call center model makes it more easily absorbed by existing agencies that already have someone consistently available to answer phones and take service requests.
- Developing multiple community-based funding sources that can be tweaked to reflect the specific community and the relationships that exist helps TASC to be absorbed into the individual fabric of the community.
- All New Hampshire towns are eligible for the Local Option Fee as a significant source of support for public transportation services, including the expansion of volunteer programs.
- Taking advantage of software to facilitate the dispatching process will be less dependent on one person or one location.
- Developing software that can communicate across systems and is capable of providing essential service data for record keeping, dispatching, reporting and fundraising purposes makes it easier to integrate TASC into other agencies and/or a brokerage system.

B. Recommendations for ACT on Integration of Volunteer Drivers

Consideration for the integration of the volunteer driving program will need to be part of ACT's decision-making process as it establishes its goals and selects a broker contractor for the Seacoast region. The following section identifies issues and recommendations for ACT to consider planning its volunteer component

Scope of ACT Brokerage Services & TASC Integration

The eventual relationship between the ACT brokerage and TASC will depend in part on the range of transportation services that ACT chooses to provide. While ACT has identified a broad goal of expanding transportation access for seniors and individuals with disabilities, at this point the only funds NHDHHS and NHDOT are proposing to channel through brokerages on a statewide basis are for Medicaid non-emergency medical transportation (NEMT). A critical niche that TASC fills for the towns it serves is providing rides to seniors and others who may not be eligible for specific human service funding programs, but are nonetheless unable to drive. Individual TASC riders and TASC member communities depend on this service, and it must not be lost in integrating TASC and ACT.

If an ACT brokerage is focused solely on Medicaid, TASC could participate as a provider of Medicaid trips within its service towns, but would need to maintain its own call center capacity to handle requests from non-Medicaid riders. Ideally ACT will pursue its broader goal of improving community transportation - coordinating services for provider agencies with multiple funding streams beyond NHDHHS- from the outset. This would be a preferred scenario from a range of perspectives, including a broader population served, greater efficiencies, and a broader funding base to support fixed call center costs. This would also be preferable from TASC's perspective, as it would provide the opportunity to fully integrate its call center capability if ACT is supportive. Call taking could be handled centrally by the

ACT broker, while municipal and other community-generated funds allocated to TASC could be focused on volunteer recruiting and management, and eventually mileage reimbursement.

Expanding TASC, Replicating TASC, or an In-House Volunteer Corps for ACT

At present TASC covers only 8 of the 38 communities in the ACT region. ACT will eventually need a volunteer program with the capacity to cover its entire region. As an established program, TASC would be a natural base on which to build a larger volunteer driver corps with the capacity to serve the whole ACT region. This could be accomplished by 1) expanding TASC to cover the whole 38-town service area as the volunteer arm of ACT; 2) developing multiple sub-regional volunteer programs similar to TASC, each of which would be affiliated with ACT as independent providers; or 3) developing a new region-wide volunteer program while TASC maintains its current service area. A summary of advantages and disadvantages of each scenario is below:

1. Restructuring TASC as region-wide volunteer arm of ACT

Advantages

- Build on TASC's existing experience and volunteer base
- Work with faith communities as a source of volunteers
- Existing community-based image of the organization likely helpful in recruiting volunteers and attracting municipal contributions.
- Minimizes public confusion, especially with municipalities and private funders such as UWGS, around multiple regional entities with similar missions related to community transportation.

Challenges/Disadvantages

- TASC's current relationships with municipalities may need to be reset regarding expectations of service levels.
- Expanding into new communities beyond its existing service area changes the "local face" of TASC which could make volunteer recruitment more of a challenge. Additional volunteer coordinator staff could be designated based on geography to address this.

2. Creating multiple sub-regional volunteer programs similar to TASC

Advantages

- Build on TASC's existing structure, experience and volunteer base.
- Work with faith communities as a source of volunteers.
- Community-based image of the organization helpful in recruiting volunteers and attracting municipal contributions.
- Each sub-regional program would deal with a limited geography, allowing better responsiveness to specific town needs.

Challenges/Disadvantages

- Tends to reinforce a regional fragmentation and competition for resources

(funding as well as drivers) that may not be avoidable for existing provider agencies, but should likely not be replicated.

- Likely to create duplicative administrative structures.
- Has potential to create confusion in branding and public understanding of the transportation program

3. Creating a new region-wide ACT volunteer program separate from TASC

Advantages

- Allow TASC to focus on current service area and local needs beyond the NHDHHS programs likely to be the focus of ACT at start-up.
- Allows ACT broker to develop volunteer program within its own structure.

Challenges/Disadvantages

- Duplication of call center capacity, and competition for local and regional funding and volunteer drivers, as the TASC driver pool extends beyond the eight towns where rides are provided
- Creates confusion in branding and public understanding of the transportation program
- Creates confusion for consumers in TASC communities regarding where to call for a ride.

Of the three options the first - building on the base of TASC to develop a region-wide volunteer program within the ACT brokerage - appears to make the most sense given existing resources in the region and goal of minimizing fragmentation and duplication of effort.

Use of Volunteer Drivers in the ACT Brokerage

We have described the use of volunteers in a variety of transportation systems with differing criteria for matching trip types with volunteer drivers. Once ACT establishes itself as a Regional Coordinating Council (RCC) and selects its broker contractor, the RCC, broker, TASC and other participating agencies will need to determine how volunteer capacity will be used in the regional system in conjunction with other agency vehicles and funding streams. Everyone needs to be in agreement on the system gaps a volunteer program will fill.

The general rule of thumb among the case study agencies is that volunteers are used for trip requests that cannot be met or would be too costly to meet through other parts of the transportation system, due to overall trip distance, lack of proximity to fixed route services, time of day or day of the week, or funding eligibility. Since regular public transit service is limited to only 11 of the 38 towns in the region, the gaps to be filled are large. Volunteers can be a component of this, but resources will need to be developed for new public transit services. ACT will also need to balance the demands on volunteer resources between Medicaid and non-Medicaid trip needs. It would be advantageous to the Medicaid broker to place as many Medicaid rides as possible with relatively low-cost volunteers to meet their NHDHHS contract obligations. If ACT has also secured municipal contributions to expand service beyond Medicaid it will need to be careful not to allow Medicaid trips to wholly

absorb its resources. This potential conflict is lessened if statewide or region-wide funding can be secured for service beyond Medicaid.

Service Efficiencies and Cost Effectiveness

How cost and service efficiencies are achieved will depend in part on the answer to the above questions about use of volunteers, and in part on how the volunteer program relates to other pieces of the regional brokerage. In general the case studies showed efficiencies when volunteer driver programs share functions such as reservations, scheduling and dispatching with the agencies' other demand response transportation services. Ideally TASC can become integrated with ACT such that it does not need to maintain a separate call center capacity. ACT and NHDHHS will need to be careful in developing an RFP for Medicaid brokerage services to set the expectation that the broker will eventually handle multiple services beyond Medicaid, including a volunteer network to be used for both Medicaid and non-Medicaid rides. To NHDHHS' credit, they have moved away from their initial concept of a stand-alone Medicaid brokerage, which would likely have created conflict in volunteer recruitment and lost opportunities to group trips across funding programs.

Program Management

When ride dispatching is separated from volunteer coordination, case study examples indicated that one full-time staff position can manage anywhere from 80-200 volunteer drivers. It has already been noted under recommendations for TASC that the call-taking/scheduling/dispatching role be split from the volunteer management role. It is further recommended that the Volunteer Coordinator/Volunteer Program Manager be charged with facilitating communication and coordination between the volunteer component and others aspects of the brokerage. The recruitment of volunteers should be consolidated to enhance consumer understanding that this is a "coordinated system" and to assist in volunteer management, training, oversight and retention activities.

That said, geography and local control are important factors when discussing cost and efficiency. TASC currently has a pool of approximately 50 drivers that is stretched to cover the needs of an eight town area with an estimated 2005 population of about 62,000. Also note that this is with very limited marketing of the service. The 2005 population of the 38-town ACT service area was approximately 268,000. While COAST and other agencies provide other service options in the largest of these communities, a volunteer pool serving the whole ACT service area should be at least 4-5 times larger than the current TASC pool. This points to an eventual need for more than one full time staff position involved with volunteer recruitment, training and management for the region as a whole. It may be appropriate to divide this role regionally, with one position serving eastern Rockingham County and one covering Strafford and southern Carroll Counties. While the ACT region is considerably smaller in terms of land area than any of our Case Study regions, few of the case study agencies were working with funding from 38 separate municipalities aside from state, federal and private sources. If municipal funding is to play a significant role in ACT and the maintenance of a regional volunteer program, then at least 2.0-3.0 FTE in volunteer coordination and management staff will likely be necessary.

Sustainability

The volunteer driver program needs to be specifically considered as ACT develops strategies for sharing transportation resources among its partners. Case study agencies providing Medicaid transportation recovered the cost of those trips through a combination of mileage reimbursement for the volunteer drivers and administrative fees to cover call center and management costs. Several Case Study agencies also charge administration fees to agencies for which they provide rides. The terms for these fees would be included in a Memorandum of Agreement among the members of ACT, setting out the actual operating and reimbursement terms for the brokerage.

Building and sustaining capacity to providing services to members of the public who are not clients of any specific agency (seniors, individuals with disabilities or others) will be a tougher challenge. These services will need to be covered through a combination of other federal, state, county, local and private sector funding. It will be important to closely coordinate efforts to generate these funds among ACT and its participating agencies, and emphasis should be put on expanding state or county funding.

2. Innovation

Community Van Program

As the Regional Coordinating Council, ACT should assure that group buying power for equipment and insurance is achieved. One opportunity for this would be initiating a Community Van Program as described in Chapter IV under Washington State's COAST program. Such an initiative could be added to the next update to the Coordinated Public Transit/Human Services Transportation Plan to make it eligible for Section 5310 or New Freedom funding. According to Sönke Dornblut, the Community Vans Program strategy of placing vans in communities and having them driven and maintained through volunteer efforts is not unlike one strategy European countries use to successfully address their rural transportation needs. ACT could sponsor a pilot project in one community and, under strict guidelines and agreements, determine if this is a strategy that can be used across the region to improve access to communities.

FINDINGS

- An effective volunteer driver network will be critical for ACT to cost-effectively meet Medicaid transportation needs in the region and otherwise expand transportation access for its target populations. TASC would provide a natural base on which to build a larger regional volunteer driver network.
- ACT needs to determine the nature and extent of the gaps that will be filled by the volunteer program. Case study agencies tended to restrict eligibility for volunteer trips, and use volunteers primarily for trips that could not be provided on fixed route or other services due to factors of distance, destination or time.
- Partnering with ACT will be an important next step in TASC's evolution and an

important consideration in replicating volunteer programs in other regions.

- A system of administrative fees should be developed for ACT participants, medical facilities, or other agencies seeking volunteer rides for clients.
- A region-wide volunteer program for ACT will require more than one staff position to assure adequate geographical and community participation in the recruitment and retention of volunteer drivers.
- Funding strategies to broaden community support and stakeholder involvement are critical to sustaining and expanding TASC. In particular, being able to provide rides to individuals who are not eligible for specific NHDHHS funding streams will require significant additional funding.
- ACT should consider developing a "Community Vans Program."

VI. OPPORTUNITIES FOR THE STATE

There is a Buddhist saying along the lines of, “when you change the way you look at things the things you look at change.” Sometimes what looks like a downward trend can be an opportunity for change and improvement. While we may be a ways out from the tipping point with regard to vocal public support for aggressive allocation of resource for and coordination of transportation, there are a number of factors working in favor of changing the way we look at and do things that may be in our favor.

A. State Government

Two developments that hold promise for change in New Hampshire are the formation the State Coordinating Council for Community Transportation (SCC), and the current efforts of NHDHHS to restructure Medicaid non-emergency medical transportation (NEMT) through a network of ten Regional Coordinating Councils (RCCs) and Regional Transportation Coordinators (RTCs) throughout the state. The SCC has a mission to develop policies for coordination of transportation services among multiple state agencies, develop technology to administer the various funding streams going to the regional brokerages, and evaluate the effectiveness of the regional brokerages as they start coordinating transportation in each region.

An element that is unclear in the creation of the SCC is its role in making funding recommendations to the State. Ideally the SCC can play a role in gathering information on the extent of need for improved transportation services statewide, and present a case to the Governor and Legislature for dedicating adequate State funding to address that need. Hopefully the SCC can also work with RCCs and RTCs to take advantage of economies of scale. At the service level, this could mean that vehicles, oil and fuel are bulk purchased, and vehicle service contracts and insurance premiums are pooled and purchased at a lower rate.

Piloting use of brokerages with Medicaid - the largest pool of funding for demand response transit in the state - will provide concrete data on the impact of coordination on managing costs and improving mobility. To gain greatest efficiencies from the new brokerage structures though, NHDHHS should begin channeling other funding streams to the regional brokers as soon as possible.

B. Demographics

A challenge for many facets of New Hampshire's future is what local demographer Peter Francese describes as the in-migration of seniors and the out-migration of young people. There is no doubt that the senior population in the NH Seacoast is growing rapidly, due in part to the aging Baby Boom population but also due to the number of retirement communities being built. According to the recruitment director at Exeter Health Resources it is becoming more and more difficult to fill vacancies at all levels of their organization, due to a lack of affordable workforce housing for young families who want to live and work here. In addition, those who find housing further away find the commute too costly and there is no public transportation available.

In the short term, an increase in relatively young retirees in their 60s or 70s will add to the pool of potential volunteer drivers. In the coming decade, though, these seniors will begin to need rides themselves. Further, families who in the past have depended upon younger generations for assistance will find that this generation lives in another state, either because the older adults have moved to retire in New Hampshire, or the younger adults have moved away in search of affordable housing and jobs. At the same time, the rapid growth of the senior population presents an opportunity by increasing public awareness of the need for transportation options, and hopefully public support for providing those options.

C. Fuel Costs & Mileage Reimbursement

The number of people participating in New Hampshire's Share-A-Ride commuter program has jumped in recent months. Clearly the higher cost of fuel means that more people are searching for alternatives to driving alone. There is a strong incentive for individuals to pool their resources. The same incentive may be felt by organizations as their costs for fuel increase - ride sharing via a brokerage system will become more palatable as organizations find they can no longer afford to provide transportation for their clients at the level they are used to.

It is anticipated that fuel costs will have some effect on both recruitment of new drivers and seasoned volunteers. Those who in the past have provided both local and long-distance rides without reimbursement may find it hard to continue to do so at the same level.

Unlike most of the agencies in the case studies, TASC drivers are not reimbursed for mileage or gas. Most of the case study agencies identified mileage reimbursement as critical to recruiting and retaining a cadre of "professional" volunteer drivers. These volunteers tend to provide stability within the driver pool, drive more often, and be more open to regular schedules. The need to reimburse for mileage becomes even greater as fuel prices rise – one case study agency reported a 30% increase in requests for gas reimbursement in response to increased prices in the spring of 2008. While prices have come down from the peak of July 2008, this is likely to be a temporary effect.

As noted earlier, NHDHHS' Medicaid program has a policy of reimbursing for a Medicaid trip only the fare that would be paid by the general public. Given that TASC is a free service, to date NHDHHS has taken the position that it would not reimburse for the mileage driven by TASC volunteers. To ensure the viability of regional volunteer driver programs, the State will need to

provide mileage funding to drivers coordinated through local and regional agencies such as TASC just as it reimburses Medicaid clients or family members who provide Medicaid eligible trips. It will also need to develop a system of per-trip administrative fees similar to those in Maine, Vermont and other states. This will be critical as regional brokerages collectively covering the entire state seek to recruit large pools of volunteers.

D. Liability

While concerns about liability are expressed by community groups trying to plan transportation, and from individuals considering becoming a volunteer driver, there is no clear documentation of liability issues in use of volunteer drivers in New Hampshire.

In 2007 the State passed legislation which prevents insurance companies from denying coverage to an individual or raising their insurance premiums solely because that individual participates as a volunteer driver. It is not clear that this legislation has fully addressed the need for liability protection for volunteer drivers though. TASC has had one driver resign because her insurance company threatened to cancel not her drivers insurance but her umbrella insurance policy if she provided volunteer driver services.

Being free of a history of legal actions against volunteer drivers, both in New Hampshire and nationally, should make it easier for New Hampshire to enact legislation to specifically protect volunteer drivers from a no-fault accident. Being proactive in protecting volunteer drivers sends a strong message of commitment to transportation and to the use of volunteers as part of a formal system of community transportation.

To help regional volunteer programs improve their risk management, and reduce the liability exposure of both agency and driver, the SCC should also consider statewide implementation of volunteer driver training standards. This may serve to enhance recruitment and retention of volunteer drivers and it establishes an expectation of excellence. Offering some kind of state (SCC) approved driver safety training to volunteers, for example, may also become a mechanism for community awareness and drive recruitment (see below.)

E. Driver recruitment

Recruitment concerns were echoed in all programs surveyed, and TASC has consciously not advertised its services out of concern that demand for rides not outpace the supply of volunteer drivers. This study did not find that competition for volunteers was an issue for most volunteer driving programs. Several had drivers that volunteered for other agencies as well.

The process of recruiting drivers provides programs with an opportunity to increase the public's awareness of this transportation resource. It can also enhance the passenger's feeling of contributing to the program in cases where the passenger helps to recruit drivers. In the 2007 Exeter Region Transportation Survey of seniors over the age of 65, 78% expressed concerns about imposing on others for rides. Using riders as a means to recruit drivers makes them a partner in the success of the program and not just a recipient of services.

F. Funding

If regional brokerages such as ACT are to be able to provide community transportation services beyond State obligations for Medicaid or other NHDHHS programs, additional public funding will be necessary. Part of the funding solution is likely to be expanded use of the Local Option vehicle registration fee, enabled under RSA 261:153, as a mechanism for generating additional municipal revenue for transit. The adoption of the Local Option Fee not only generates public funds to support transportation, but it also places the discussion of, and planning for, transportation services and choices in the public arena.

At the same time, while New Hampshire's tradition of local control with regard to providing public services has many positives, it is also one of the major factors responsible for the fragmented and confusing way in which community transportation is provided in New Hampshire – or more commonly not provided. Securing and sustaining funding for ACT from 38 separate municipalities, even considering the opportunity of the Local Option Fee, is likely impractical.

While most of the case study agencies dealt with larger regions than ACT's, none of them relied on splintered municipal funding in this way. Also, the efficiencies gained by case study agencies in first seeking to place ride requests on fixed route transit before using volunteer resources can only be realized presently in the 10 towns in the region served by COAST. Statewide only 34 of New Hampshire's 234 communities have regular fixed route transit service. To address these concerns, an expanded commitment from the State to fund community transportation, or potentially regional funding at the county level, would be valuable steps toward building stable and efficient regional brokerage systems.

FINDINGS

- While transit coordination has been discussed in New Hampshire for at least 15 years, the formation of the State Coordinating Council and network of Regional Coordinating Councils are among the most significant steps to date in developing comprehensive regional community transportation systems around New Hampshire.
- Restructuring Medicaid non-emergency medical transportation to work through regional brokerages will provide an opportunity to meet growing Medicaid transportation needs in a more efficient manner, and hopefully support development of services beyond Medicaid rather than shifting costs. New federal Medicaid rules may make this more challenging, given new prohibitions on provider agencies serving as brokers, and use of Medicaid funding as match for FTA funding.
- Local dollars will always be a part of the funding mix for transit in New Hampshire, and the "Local Option" vehicle registration fee enabled by RSA 261 is a valuable yet still underutilized tool for generating municipal funding for transit. At the same time, attempting to build large regional systems serving dozens of communities based primarily on local funding contributions has major challenges, including the time necessary to establish and manage dozens of contracting relationships, and the potential for annually shifting service areas and service levels based on many municipal budget allocations. Developing consistent and sustainable service around the state will require

increased commitments from the State. Given the close link between transportation access and county responsibility for nursing home care, counties may become a logical regional funding partner if a system is developed that serves all communities in a county.

- New Hampshire's aging population may increase the pool of young retirees available to serve as volunteer drivers in the short run, but in the coming decade will result in dramatic growth in the population needing transportation.
- Recent fuel price increases have increased public awareness of need for community transportation, and also highlight that sustaining volunteer programs will require adequate funding to reimburse for mileage.
- NH can further support volunteer driver programs by following models from states such as Georgia and Oregon that provide additional liability protection to volunteer drivers.

VII. CONCLUDING REMARKS

Many people of good will and considerable skill have been involved over the past two decades in trying to expand access to community transportation in New Hampshire. Improving the state's transportation system to provide options beyond the private automobile is a central goal of the State's Long Range Transportation Plan, and has been identified by numerous other state agencies concerned with human services, economic development, education and environmental protection. Yet to date this widespread recognition has not translated into legislative action or budgetary allocations to develop needed public transportation improvements.

We are hopeful that the current confluence of rapidly increasing need, heightened public awareness of the value of transit, and increased coordination and cooperation among provider agencies will exert pressure and build political will at the state and local levels to provide basic mobility for all in New Hampshire. Volunteer driver programs will need to be a part of this, but cannot be the backbone of a community transportation system. Each of the Case Study brokerages operated as one part of a multi-faceted transportation system. The establishment of the State Coordinating Council and multiple Regional Coordinating Councils around the state is a significant step in this direction. If these efforts are to be successful in truly improving mobility for the public at large, though, the SCC and RCCs will need to look beyond improving the efficiency of existing NHDHHS programs to address broader issues of funding.

Transit advocates must create an environment in which our citizens expect public investment in our transportation infrastructure and view the funding of community transportation as a State obligation. The establishment of the Statewide Coordinating Council, which includes very capable transportation professionals and experts, is a huge step forward in looking at policy development and decision-making. To be successful, this effort will need funding, and interagency collaboration in all aspects of transportation must be legislatively mandated. Without the money and political power to provide real action we will remain stalled. For all we have asked, these questions remain to be answered:

- How will New Hampshire move from a \$ 0.45 per capita investment in public transportation to a financial commitment that has the potential to meet needs as outlined in the State's United We Ride transit coordination plan?

- Who will have the mandate and how will decisions be made to redistribute funds to assure maximum efficiency and collaboration in service delivery?
- How will Federal funds that have traditionally gone to specific agencies be allocated for use in a reorganized and consolidated effort to realize a statewide system?
- Can New Hampshire utilize its county government structure to overcome its aversion to sharing local tax revenues and partner in funding solutions that involve consolidation and collaboration across boarders and regions?
- How can local public and civic entities, such as town governments and Councils on Aging, be mobilized to make transportation a priority and help develop resources?
- Will the above-mentioned entities enable consumer voices, particularly those who are disabled or elderly to be heard?
- How will the State Coordinating Council take advantage of advances in information technology systems and web usage by the general public to enhance communication and facilitate coordination in the development of the RCCs and in use of volunteer drivers?
- Does the SCC have the necessary level of authority over agency planning and budgeting to achieve its goals? Is there a need for a broader mandate for the SCC, and/or a statewide Transportation Advisory Committee with strong public transit representation to ensure a more balanced allocation of state transportation resources between highways and transit?

VIII. RESOURCES

Individuals:

- Eileen Boswell, Information Specialist, CTAA
- Bev Ward, Ambassador, CTAA
- Jane Hardin, Coordinator, Senior Transportation Programs CTAA
- Jessica Fomalont, Librarian, Transportation Research Board
- Elizabeth Ellis, AICP with KFH Group, Bethesda MD (referred from Jessica)
- Christopher Jenks, Director of Cooperative Research Board, TRB

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IX. APPENDICES

APPENDIX A: PROJECT ADVISORY COMMITTEE

APPENDIX B: CASE STUDY AGENCY CONTACTS

APPENDIX C: CASE STUDY SURVEY INSTRUMENT

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APPENDIX A

ADVISORY COMMITTEE – ENDOWMENT FOR HEALTH GRANT

Robin Albert, Director
Volunteer Action Center, United Way of the Greater Seacoast

Scott Bogle, Senior Transportation Planner
Rockingham Planning Commission

Carol Gulla, Coordinator
Transportation Assistance for Seacoast Citizens

Mickey McIver, Director
Easter Seals Special Transit Services

Rad Nichols, Executive Director
Cooperative Alliance for Regional Transportation (COAST)

Sönke Dornblut, Clinical Assistant Professor
UNH – Institute on Disability

APPENDIX B

CASE STUDY AGENCY CONTACTS

Area IV Agency on Aging Senior Transportation Program
Bruce Stevens, RSVP Director
Twin Falls, ID
208-736-2122

COAST Transportation
Gail Griggs, Program Director
Karl Johanson, Exec. Director of Council on Aging and Human Services Transportation Program
Colfax, WA
509-397-2935

Faith in Action Community Connection
Jo Cooper, Director
Ellsworth, ME
207-664-6016

Macomb County Interfaith Volunteer Program
Karyn Dombrowski, Executive Director
Center Line, MI
586-757-5551

Rum River Interfaith Caregivers
Randy Shalstrom, Operations Manager
Princeton, MN
763-389-3762

Rural Community Transportation
Mary Grant, Director
St. Johnsbury, VT
802-748-8170

Stagecoach Transportation Services
David Palmer, Director
Randolph, VT
802-728-3773

Tri County Action Program (Tri-CAP)
Linda Elfstrand, Transportation Director
St. Cloud, MN
320-202-7824

Volunteers in Motion
Lori Hamilton, Coordinator
Jim Liesenfelt, Transit Director for Space COAST Transit
Cocoa, FL
321-635-7999

York County Community Action Corporation (YCCAC)
Connie Garber, Transportation Director
Sanford, ME
207-324-5762

APPENDIX C

CASE STUDY SURVEY INSTRUMENT



survey title:

Integrating Volunteer Drivers into Brokerage

Systems [Edit Title](#)

[design survey](#)

[collect responses](#)

[analyze results](#)

[View Summary](#)

[Browse Responses](#)

[Filter Responses](#)

[Download Responses](#)

[Share Responses](#)

current report: [Default Report](#) [Add Report](#)



Response Summary

Total Started Survey: 10

Total Completed Survey: 10 (100%)

Page: Please tell us about your agency

1. What is your agency mission statement? If your agency's mission is broader than transportation, do you have a separate mission statement for your volunteer driving program? If so please provide this statement as well.

Response
Count

view

8

answered question

8

skipped question

2

2. Who is eligible for rides through your volunteer program? (check all that apply)

Response
Percent Response
Count

Senior Citizens 90.0% 9

Individuals with Disabilities 70.0% 7

Medicaid Recipients 50.0% 5

Other clients of specific human service funding programs (please specify) 50.0% 5


Low-income individuals not specifically eligible for funding programs 70.0% 7

General Public 50.0% 5


Other (please specify) view 3

<i>answered question</i>	10
<i>skipped question</i>	0


3. Do you limit trip purpose? (Medical, shopping, employment, social, etc.)

	Response Percent	Response Count
Yes <input type="text"/>	50.0%	5
No <input type="text"/>	50.0%	5
If yes, please describe eligible trip types:  view		6
<i>answered question</i>		10
<i>skipped question</i>		0

4. Do you prioritize trips by purpose?

	Response Percent	Response Count
Yes <input type="text"/>	70.0%	7
No <input type="text"/>	30.0%	3
If yes, please describe what trip types receive priority  view		7
<i>answered question</i>		10
<i>skipped question</i>		0

5. Do you have any sort of cap on rides per week per client and/or distance per week per client?

	Response Percent	Response Count
Yes, on rides per week per client	0.0%	0
No, on rides per week per client <input type="text"/>	100.0%	10
Yes, on distance per week per client	0.0%	0
No, on distance per week per client <input type="text"/>	90.0%	9
If yes, please describe cap threshold(s)  view		3
<i>answered question</i>		10
<i>skipped question</i>		0

6. What types of vehicles are driven by volunteers (check all that apply)

		Response Percent	Response Count
Volunteers drive their own vehicles	<input type="checkbox"/>	90.0%	9
Volunteers drive clients' vehicles	<input type="checkbox"/>	20.0%	2
Volunteers drive agency-owned cars or minivans	<input type="checkbox"/>	20.0%	2
Volunteers drive agency-owned lift equipped vehicles	<input type="checkbox"/>	20.0%	2
answered question			10
skipped question			0

7. If volunteers drive vehicles other than their personal vehicles, is special training provided or additional insurance coverage?

		Response Percent	Response Count
Special training is provided	<input type="checkbox"/>	66.7%	2
Additional insurance coverage is provided	<input type="checkbox"/>	100.0%	3
If yes, please describe:	<input type="text" value="view"/>		3
answered question			3
skipped question			7

8. How is your program funded?

	Response Count
<input type="text" value="view"/>	10
answered question	
10	
skipped question	
0	

9. Do you charge a fare?

	Response Percent	Response Count
Yes	0.0%	0

No	<input type="checkbox"/>	60.0%	6
Sometimes	<input type="checkbox"/>	40.0%	4
answered question			10
skipped question			0

10. Do you accept free-will donations by riders?

		Response Percent	Response Count
Yes	<input type="checkbox"/>	90.0%	9
No	<input type="checkbox"/>	10.0%	1
answered question			10
skipped question			0

11. Do fares or suggested donations vary by trip types? (e.g. medical vs. social)

		Response Percent	Response Count
Yes	<input type="checkbox"/>	0.0%	0
No	<input type="checkbox"/>	90.0%	9
Sometimes	<input type="checkbox"/>	10.0%	1
answered question			10
skipped question			0

12. Do fares vary by trip length?


		Response Percent	Response Count
Yes	<input type="checkbox"/>	40.0%	4
No	<input type="checkbox"/>	60.0%	6
Sometimes	<input type="checkbox"/>	0.0%	0
answered question			10
skipped question			0

13. Do fares vary by vehicle involved? (private volunteer vehicle vs. lift-equipped van)


		Response	Response
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	Percent	Count
Yes <input type="checkbox"/>	20.0%	2
No <input type="checkbox"/>	80.0%	8
Sometimes	0.0%	0
answered question		10
skipped question		0

14. How are fares and/or donations determined?

	Response Count
 view	10
answered question	10
skipped question	0


15. Does your agency receive reimbursement on a per-ride basis from a program such as Medicaid? If so, does this reimbursement go to the volunteer? Is it kept by the agency?

	Response Count
 view	10
answered question	10
skipped question	0


16. Do you have a volunteer coordinator/manager?

	Response Percent	Response Count
This a full-time position. <input type="checkbox"/>	40.0%	4
This position dedicated full time to transportation <input type="checkbox"/>	40.0%	4
The position has other job responsibilities beyond transportation. <input type="checkbox"/>	40.0%	4
answered question		10
skipped question		0


17. How are rides assigned to drivers?

		Response Percent	Response Count
Dispatcher assigns rides	<input type="checkbox"/>	88.9%	8
Drivers select rides/clients	<input type="checkbox"/>	22.2%	2
Other (please specify)	<input type="text"/> 		4
answered question			9
skipped question			1

18. Does the volunteer coordinator receive drivers' schedules in advance? If so, how far in advance?

		Response Percent	Response Count
Does not receive schedules in advance	<input type="checkbox"/>	66.7%	2
One day	<input type="checkbox"/>	0.0%	0
One week	<input type="checkbox"/>	33.3%	1
One month	<input type="checkbox"/>	0.0%	0
Other (please specify)	<input type="text"/> 		8
answered question			3
skipped question			7

19. How many volunteers are managed by your volunteer manager?


		Response Count
	<input type="text"/> 	10
answered question		10
skipped question		0

20. What is your sense of how many volunteers can be managed by one full time volunteer manager position?


		Response Count
	<input type="text"/>	

 view	10
answered question	10
skipped question	0


21. Do you think there is a maximum size to the geographic areas across which a volunteer program can be run? to what extent is the local sense of "neighbor helping neighbor" important?

	Response Count
 view	10
answered question	10
skipped question	0

22. How do you recruit volunteers?


	Response Percent	Response Count
Newspaper ads <input type="text"/>	80.0%	8
Public presentations to service clubs/faith organizations <input type="text"/>	90.0%	9
Word of mouth, drivers <input type="text"/>	90.0%	9
Word of mouth, clients <input type="text"/>	60.0%	6
Other (please specify)  view		2
answered question		10
skipped question		0

23. What have you found to be the most productive sources of volunteers?


	Response Percent	Response Count
Service clubs	0.0%	0
Faith organizations <input type="text"/>	25.0%	2
No particular affiliations <input type="text"/>	75.0%	6
Other (please specify)  view		4
answered question		8

<i>skipped question</i>	2
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24. Do volunteers fill other roles besides driving?

	Response Percent	Response Count
Volunteer coordination <input type="text"/>	50.0%	2
Dispatchers <input type="text"/>	25.0%	1
Volunteer Recruiters <input type="text"/>	50.0%	2
Public awareness <input type="text"/>	75.0%	3
Event planners <input type="text"/>	50.0%	2
Other (please specify) <input type="text"/> 		6
<i>answered question</i>		4
<i>skipped question</i>		6

25. Do you compensate volunteers in any way? (milage reimbursement, gas cards)

	Response Count
<input type="text"/> 	10
<i>answered question</i>	10
<i>skipped question</i>	0

26. What sorts of recognition to you provide to volunteers?


	Response Count
<input type="text"/> 	10
<i>answered question</i>	10
<i>skipped question</i>	0

27. Do you attempt to schedule multiple riders at once with a volunteer driver?


	Response Percent	Response Count
Yes <input type="text"/>	60.0%	6

No	<input type="checkbox"/>	10.0%	1
Sometimes	<input type="checkbox"/>	30.0%	3
answered question			10
skipped question			0


28. What have you found to be the average length of volunteer service?

		Response Count
	 view	10
answered question		10
skipped question		0

29. What factors have you identified that contribute to volunteer burnout?

		Response Count
	 view	10
answered question		10
skipped question		0

30. What sorts of metrics or indicators do you use to measure the success of your volunteer program?


		Response Count
	 view	10
answered question		10
skipped question		0

31. If you are a faith-based organization, does your program coordinate with a regional transportation brokerage?

		Response Percent	Response Count
Yes		0.0%	0
No	<input type="checkbox"/>	75.0%	3

Sometimes	<input type="checkbox"/>	25.0%	1
answered question			4
skipped question			6

32. If # 31 is "yes" or "sometimes", have you encountered challenges integrating your service with a broader public transportation program?

		Response Percent	Response Count
	 view		4
answered question			4
skipped question			6


33. How are volunteer drivers incorporated into your brokerage system?

		Response Percent	Response Count
the volunteer program is part of our agency	<input type="checkbox"/>	62.5%	5
The volunteer program is a separate organization to which we assign rides		0.0%	0
The volunteer program is a separate organization to which we refer rides		0.0%	0
We have both an in-house volunteer program and work with other volunteer organizations	<input type="checkbox"/>	37.5%	3
answered question			8
skipped question			2


34. Do you refer riders to another organization?

		Response Percent	Response Count
Yes	<input type="checkbox"/>	90.0%	9
No	<input type="checkbox"/>	10.0%	1
answered question			10
skipped question			0

35. If you do refer riders, do you first gather information to help guide your referral? (i.e. oncology patient is referred to American Cancer Society, etc.)

	Response Percent	Response Count
Yes <input type="checkbox"/>	88.9%	8
No <input type="checkbox"/>	11.1%	1
If yes, how do you handle this? 		8
answered question		9
skipped question		1

36. Do you find that you compete for volunteers with other organizations?

	Response Percent	Response Count
Yes <input type="checkbox"/>	10.0%	1
No <input type="checkbox"/>	70.0%	7
Sometimes <input type="checkbox"/>	20.0%	2
If yes, please describe 		2
answered question		10
skipped question		0

37. Do you have both volunteer and paid drivers?


	Response Percent	Response Count
Yes <input type="checkbox"/>	40.0%	4
No <input type="checkbox"/>	60.0%	6
answered question		10
skipped question		0

38. If "yes" on #37, how do you determine which rides are assigned to volunteers and which rides are assigned to paid drivers?


	Response Count
	8

<i>answered question</i>	8
<i>skipped question</i>	2

39. Have you encountered any problems with having a mix of volunteer and paid drivers? If so, how have you dealt with these?

	Response Count
 view	8
<i>answered question</i>	8
<i>skipped question</i>	2

40. Do volunteers provide rides for clients with special needs? (physical limitations, developmental disabilities, mental illness, etc.) If so, do you provide any special training and does the training differ between volunteer and professional/paid drivers?

	Response Count
 view	10
<i>answered question</i>	10
<i>skipped question</i>	0

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APPENDIX D

VOLUNTEER LIABILITY PAMPHLETS

Minnesota's Volunteer Liability pamphlet in hard copy format

TASC's liability pamphlet in hard copy format

WE COULDN'T DO IT WITHOUT YOU!

It's a fact: many people in our communities need help getting to the places they need to go. Whether they are no longer able to drive, they have a disability that prevents them from driving, or there is no public transportation available -- many of our neighbors are not as mobile as they would like to be.

Who provides the helping hand? Volunteer Drivers!

Volunteer Drivers are vital to the well-being of our community. You are often the only transportation that links people with critical services and activities necessary for a healthy, productive life.

WE WANT YOU TO FEEL SAFE.

The liability of volunteers as they do their work has become a concern in recent years. While accidents do happen, the reality is that very few volunteers have ever been sued. And we want to keep it that way.

If you're starting to get worried, don't. We hope this brochure will reassure you about how safe you are, and also answer your questions. Knowing the facts about Minnesota law and how your insurance works should keep you feeling great about volunteering.

The truth is, volunteers in most situations are protected by law.

How you are protected is determined by the kind of agency for which you volunteer. According to current Minnesota law:

- Volunteers in programs operated by voluntary, nonprofit agencies and organizations (those exempt under MN Statute 290.05) are immune from civil liability as long as they are acting in

good faith and within the scope of their volunteer responsibilities. There are exceptions to this general rule for instance, when the volunteer directly injures someone or causes wrongful death. If the injury occurs in a car accident, the volunteer's automobile liability insurance provides coverage of a lawsuit. See "The 'what ifs?' of accidents and liability" section.

Volunteers in established programs operated by state or local units of government (for example, the city, county, park, or school district) are protected by the state or local unit of government for which they volunteer. They are *indemnified* which means that in case of a lawsuit, the unit of government will provide legal assistance and/or pay damages. The exceptions noted above also apply.

- Volunteers in programs operated by for profit organizations (some nursing homes or residential care facilities, for instance) are not covered by immunity or indemnification under state law. In this case, ask if the organization has a risk management program and/or insurance for volunteers, and how it affects you.

Keep in mind that your insurance works for you.

- **Your insurance rates will not be increased** just because you use your car as a Volunteer Driver. However, your rates may be affected if you drive a significant number of additional miles each year.
- **Insurance companies cannot refuse to pay claims** because you use your car as a Volunteer Driver. Keep in mind, though, that your personal auto policy does not cover "a vehicle used for hire or as a taxi." Basically, this means you should not accept payments or gifts from passengers it could be viewed as using your vehicle "for hire."
- You can receive a donation that goes to your volunteer organization. Plus, your organization may *reimburse* you for normal mileage expenses, as long as the

reimbursement rates fall within Internal Revenue Service (IRS) regulations. Call (800) 829-1040 if you need details. Reimbursement that exceeds IRS regulations could be considered taxable income.

- Insurance companies cannot cancel, or refuse to renew, your personal auto insurance policy because you are a Volunteer Driver. If you think this has happened, contact the Enforcement Division of the Department of Commerce at (651) 296-2488.

FOR MORE INFORMATION

Contact the following organizations:

- ▶ Minnesota Department of Commerce: Consumer Response Team 651-296-2488, or toll free 800-657-3602.
- ▶ Minnesota Board On Aging 651-431-2500 MN Relay: 711 or 1-800-627-3529 www.mnaging.org
- ▶ Minnesota Department of Transportation: Office of Transit 651-366-4191

For help managing a safe volunteer program, your organization may want to contact the Nonprofit Risk Management Center www.nonprofitrisk.org

Thanks for helping Minnesotans get where we need to go!

Remember:

This brochure does not take the place of your insurance policy or legal advice. Volunteer immunity and indemnification laws are relatively new in Minnesota and have not yet been tested in the courts. Refer to your insurance agent or attorney with specific questions. Your insurance policy is the legal document that decides the insurance coverage in each case.



VOLUNTEER DRIVERS

Getting There Safely

Insurance & Liability Information

Minnesota Board on Aging,
Minnesota Department of Human Services
and
Minnesota Department of Commerce
and
Office of Transit, Department of Transportation



The 'what ifs?' of accidents and liability:

■ What if I'm in an accident as a Volunteer Driver and a passenger is injured?

Minnesota law provides for personal injury protection coverage which compensates victims of automobile accidents without proof of negligence on anyone's part ("personal injury insurance protection"). In this case, an injured passenger's own automobile insurance provides reimbursement for medical expenses or lost income (within specified limits).

Injured passengers should first seek coverage for medical and lost wage expenses under their own personal injury protection insurance policy, or the policy on a vehicle where they are a resident of the household. If the passenger has no policy, under no-fault law the driver's policy would provide coverage.

The second part of the law provides for *automobile liability insurance*. As a Volunteer Driver, your automobile liability insurance covers you for "bodily injury and property damages resulting from your negligence." Thus, if a passenger sues you for injuries suffered in an accident while riding in your car, your personal automobile insurance policy provides coverage.

There are exceptions, such as commuter vans and vehicles used to transport children as part of family day care programs, or to school, or a school-sponsored activity. Please check with your insurance agent if you have a question.

■ What if my passenger falls and is injured as I walk that person to or from my car?

Coverage is the same if an accident occurs while entering or alighting from the vehicle. (See previous 'what ifs'.) If the passenger falls going into a building, the party responsible for the accident is liable.

■ What if I'm in an accident but I'm driving the organization's vehicle, not my own?

Since liability "follows the vehicle" the organization's insurance will provide coverage. Personal injury protection coverage benefits will be provided by the passenger's automobile insurance. If the passenger has no policy, the organization's personal injury protection insurance will respond.

■ What if I'm transporting items (meals, equipment, blood) rather than people?

The organization for whom you're volunteering should assume responsibility for property in your care because your personal automobile insurance policy will not cover others' property. Check with the organization to make sure its insurance covers its transported property.



BE PREPARED ---- THE BEST WAY TO STAY SAFE.

As a Volunteer Driver, you should:

Check your own insurance before volunteering, and also ask about the organization's insurance. Be sure the organization will cover property transported in your vehicle.

- Make sure you have a valid driver's license. The standard "Class C" driver's license applies to most vehicles a volunteer could drive, but there are exceptions for vehicles such as school buses. Ask your volunteer organization if a special license is needed.
- Attend all job-related orientation and training offered by your volunteer organization, and keep records of your participation. Know and abide by all established policies and procedures.
- Have all passengers wear seat belts. When transporting children, use age-appropriate seat restraints.
- Stay within the scope of your volunteer responsibilities. Insurance provides coverage for you as a volunteer only for accidents that happen while you are carrying out the duties you are specifically asked to perform.
- Take a defensive driver training course. Minnesota law provides 10% credit on insurance rates for drivers age 55 and older who complete the course and show evidence to their insurance company.

- Report any medical problems that might affect your driving to the volunteer organization.
- Keep your car well-maintained.

The volunteer Organization should:

- Check for a valid driver's license and adequate automobile insurance.
- Provide orientation, training, and refresher training to stimulate and increase volunteers' driving skills and ability to help passengers.
- Provide a job description outlining the scope of the volunteer's responsibilities, with clear instructions and policies spelled out.
- Accept volunteers as part of a team, including them in training and meetings that pertain to their volunteer responsibilities.
- Establish and communicate lines of supervision, so volunteers know to whom they are responsible.
- Inform drivers of tax regulations and benefits.
- Maintain accurate volunteer records.

Proud Partners of **TASC**

- **Trinity Episcopal Church**
Hampton, NH
- **Irving Oil Company**
Portsmouth, NH
- **Stratham Community Church**
Stratham, NH
- **Bethany Church**
Greenland, NH
- **Rockingham Planning Commission**
Exeter, NH
- **First Unitarian Universalist Society**
Exeter, NH
- **United Church of Christ**
North Hampton, NH
- **First Congregational Church**
Hampton, NH
- **Rotary Club**
Hampton, NH
- **The Towns of:**
*Exeter, Hampton,
Hampton Falls & Stratham*



TASC
c/o HOBBS HOUSE
200 HIGH STREET
HAMPTON, NH 03842



Funding provided by:



AND

**New Hampshire
Charitable Foundation**

Telephone: (603) 926-9026
Email: coordinator@tasc-rides.org

Find us on the web at:
www.tasc-rides.org

TASC Volunteer Drivers-
2008 "Spirit of the Seacoast" Award

PLACE
\$.44 STAMP
HERE

TRANSPORTATION ASSISTANCE FOR SEACOAST CITIZENS

PROVIDING CONVENIENT COMMUNITY TRANSPORTATION

TASC's corps of volunteer drivers offers rides to senior citizens and other adults with disabilities or chronic medical disorders that prevent them from driving. If you live in :

Exeter
Greenland
Hampton
Hampton Falls
North Hampton
Rye
Stratham
Seabrook

TASC is a resource that can help with some of your transportation needs.

DO YOU NEED TRANSPORTATION ASSISTANCE?

- You must complete a **TASC** registration form.
- **TASC** will review the form to confirm eligibility.

Because volunteer drivers use their own vehicles, **TASC** cannot accommodate wheelchairs. You need to be able to get to a car with little or no assistance.

VOLUNTEER, IT'S GOOD FOR YOU!

Studies show that volunteering leads to improved physical and mental health! *

TASC is a great volunteer opportunity for active people who think they don't have time to volunteer! **TASC** volunteer drivers choose when they'll provide rides—once a week, once a month, once in a blue moon—driving for **TASC** can easily fit your busy schedule.

TASC volunteer drivers must be at least 25 years old and possess a valid driver's license and a favorable driving record. You must have a legally registered, inspected and insured vehicle. You will need to complete a volunteer application that includes a motor vehicle and criminal background check.

FOR VOLUNTEER APPLICATIONS OR PASSENGER REGISTRATIONS:

Call **TASC** at (603) 926-9026
Please leave your name and mailing address and we'll gladly send you the appropriate information.

WHERE IS **TASC** LOCATED?

**TASC c/o HOBBS HOUSE
200 HIGH STREET
HAMPTON, NH 03842**

* <http://www.americorps.gov/about/newsroom/releases>

If you would like to volunteer for **TASC**, please complete the following information and detach and return this card to the address on front:

NAME: _____ Phone Number: Daytime: _____ Evening: _____

Mailing Address: _____

I would like to make a donation to **TASC** which will help provide transportation assistance to transit dependent people who have no other means of transportation.

\$10 \$25 \$50 \$100 Other amount: _____

**KINDLY MAKE CHECKS PAYABLE TO:
TASC**

C/O HOBBS HOUSE
200 HIGH STREET, HAMPTON, NH 03842