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COMMUNITY PLANNING ASSOCIATION
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Mobility Concept: Human Services
Transportation Organizations

Report No. 03-2011

Mobility Concept: Human Services Transportation Organizations

Essential Mobility

A human services transportation organization (HSTO) is a partnership concept similar to a transportation management organization (TMO)¹. The main purpose of either organization is to provide and encourage alternative modes of transportation to/from an activity center, building upon transit services if they already exist. These partnerships usually involve local employers, government agencies, transportation providers and others interested in working together to address transportation issues in a community or neighborhood.

The intent of an HSTO is to target the needs of patients and clients of health care and other human services providers within a given area. Potential sponsors include hospitals and medical offices and clinics, public health services and other government agencies (such as Social Security or Veterans Affairs) interested in collaborating on transportation issues in a small area – usually around a hospital or cluster of human services providers. It may or may not include commuters, but it is generally feasible to include them when considering the efficient use of resources.

Mobility Management

Mobility Management focuses on using all available resources to augment and advance mobility for all people, rather than concentrating on a particular mode of transportation, such as the automobile. Its goal is to increase the efficiency of various transportation modal options.

The Federal Transit Administration has established a policy that tasks state and local governments with meeting the transportation needs of the most vulnerable citizens.



Characteristics

Structure of Services

The structure and characteristics of an HSTO can vary based on the size and range of the members, which may include public or private hospitals, various businesses, non-profit organizations, and government service providers, such as health and welfare offices. Each HSTO would be unique.

¹ See COMPASS Report 11-2010, Transportation Management Organizations: Characteristics and Feasibility <<http://www.compassidahoh.com/documents/prodserv/reports/COMPASSTMOFeasibilityReportFINALJune2010.pdf>>

Various shuttle programs exist around the country, particularly in service to a single large urban or university hospital or veterans' hospital/clinic. These shuttle services bring patients to/from a single site² (see Figure 1), or offer shuttles to connect campuses or multiple buildings in one campus (see Figure 2). They are operated by and serve one organization. Some of these shuttles charge riders a fee with door-to-door services³ while others provide free connections for patients/clients, staff, and students among select locations⁴.

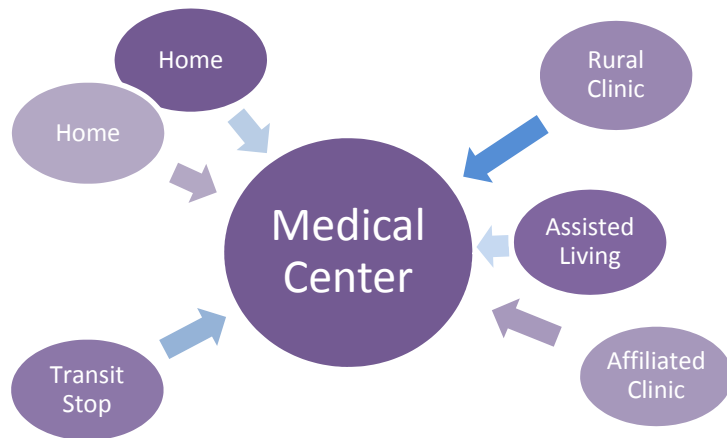


Figure 1: Single Service Center

An HSTO is different than most existing shuttles. It is a cooperative effort that serves both functions, connecting clients from multiple or scattered locations to the

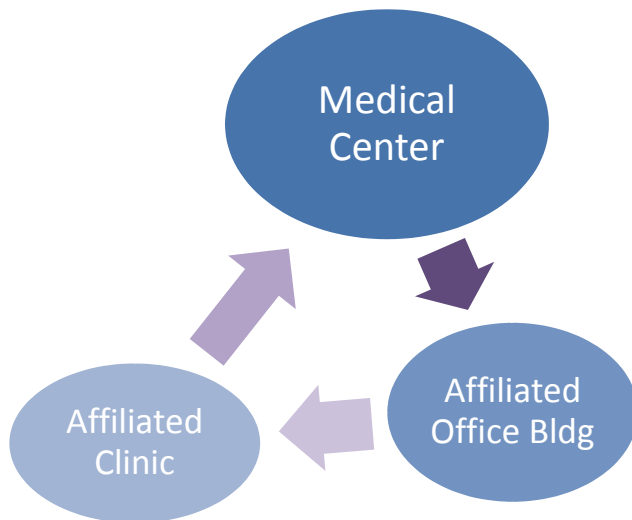


Figure 2: Connecting Services

doors of several cooperating service providers (see Figure 3 on following page). It is intended to bring clients, and possibly commuters, from within a designated service area or from designated sites to each of the different sponsors/members of the HSTO.

² See St. Clair Hospital in Pittsburgh < <http://www.stclair.org/18>> and Tri-City Medical Center in Oceanside, CA < <http://www.tricitymed.org/patients-visitors/getting-here/index.aspx>>

³ See Road Runners service at El Camino Hospital in Mountain View, CA < www.elcaminohospital.org/Patient_Services/Patient_Resources/Road_Runners_Transportation>

⁴ Examples: Univ. of CA San Francisco < www.campuslifeservices.ucsf.edu/transportation/shuttles> and Boston Medical Center (Boston Univ.) < www.bmc.org/patients/directions/bus-shuttlebuses.htm>

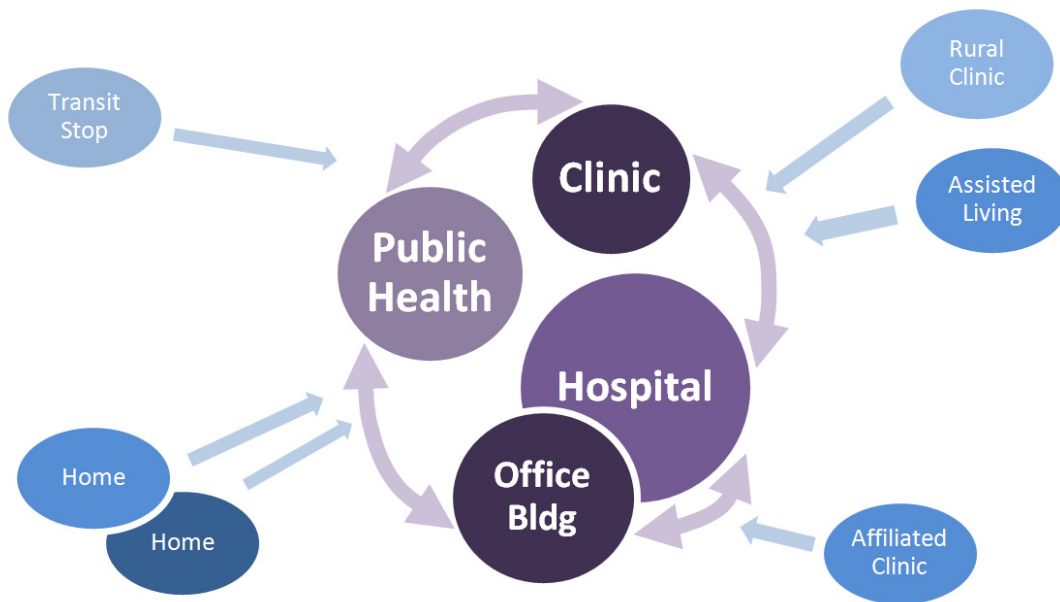


Figure 3: HSTO model with multiple source sites and cluster of destinations

Organizational Structure

As with a TMO, an HSTO may be a business association, a joint operation, a public-private partnership that draws a diverse membership, or a cooperative. Several structures of existing TMOs and travel assistance organizations could be used as patterns for an HSTO. These include:

- ❖ **Business Association:** A business association is a collection of businesses within a geographic range, usually the medical/professional neighborhood around one or more hospitals. Formation of the association may be through contracts, memoranda of understanding, or business agreements among company leaders. The service area may be large and cater to patients and clients who cannot drive, or it could target neighborhoods, cities, or rural area(s) without good transit connections or reasonable access to health/human services. HSTOs formed as business associations would normally be privately funded. In some cases a single business or hospital may establish an HSTO to address a specific transportation need.
- ❖ **Joint Operation:** Both local and regional government agencies can provide institutional support for establishing an HSTO. Such arrangements may be funded with public dollars from a mixture of agencies, and can be supplemented by monetary support from private businesses that benefit from the transportation services (see also Public-Private Partnerships, below). Regional public agencies can provide benefits beyond those provided by city agencies as they serve a broader area and may include a more diverse group of stakeholders and multiple transportation providers.

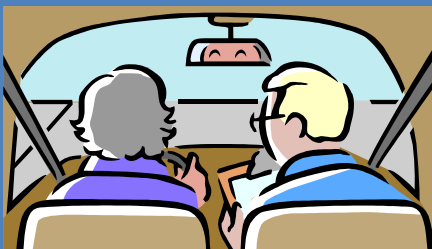
Cooperative Example

One example of a successful transportation cooperative is ITN America, which operates in several metropolitan areas around the country. ITN connects volunteer drivers with seniors and visually impaired citizens. Each rider opens an account and pays a mileage fee to reimburse costs to drivers who volunteer their time using their own vehicles.

ITN also allows ride banking – drivers volunteer trips and receive credits in their own account for later use. Family members can also contribute cash to the account of a loved one, or volunteer as a driver and donate trip credits to an account in any ITN service area.

Trips may be anywhere within the prescribed service area for any purpose (not just medical appointments).

Please visit www.itnamerica.org for more information.



potential models for an HSTO, but a few are included as example organizations below.

❖ **Public-Private Partnership:** When private businesses (including non-profit hospitals) and government agencies share interest in providing services to the same neighborhood or cluster of human services providers a public-private partnership may be a good solution. Either public or private interests may take the lead in the organization, with financial assistance and cooperation from private and public sources.

❖ **Ad Hoc Organization/Cooperative:** Examples of ad hoc groups include neighborhood associations and non-profit/advocacy groups. These organizations often receive a mixture of public and private support, and vary in service size depending on the intended function of the organization. An ad hoc group may also sponsor options with lower costs such as a rider/driver cooperative or connection service (ride share program). A number of Treasure Valley commuters use the RideshareOnline.com to make connections and eRideShare.com⁵ for longer distance travel.

❖ **Other Models:** Private services and taxis, especially networks that include wheelchair accessible vehicles, are two other options to augment transportation for human services. Although private services are provided by and serve a single organization or business, many of them possess qualities that clearly illustrate various HSTO principles. They are not explored in this document as

⁵ For more information see < www.rideshareonline.com > and < www.erideshare.com >.

Example Organizations

There are several TMOs and other transportation services in existence that illustrate the main organizational structures and/or key features of an HSTO.

Name, Location, URL	Organization/Service Description
<p>36 Commuting Solutions Boulder, CO http://www.36commutingsolutions.org/</p>	<p>Public-Private Partnership</p> <ul style="list-style-type: none"> • 40+ businesses, 7 local governments, University of Colorado at Boulder • Annual dues based on size • Promotes alternative transportation, mobility on U.S. Highway 36 • Carpool, vanpool matching services, bike maps
<p>Boston Medical Boston University Medical Center and School of Medicine Boston, MA http://www.bmc.org/patients/directions/bus-shuttlebuses.htm</p>	<p>Joint Operation</p> <ul style="list-style-type: none"> • Large teaching hospital complex with multiple medical and other services in the vicinity • Several free shuttle services for employees, students, and patients with connections to <ul style="list-style-type: none"> ○ Public Health Commission ○ Department of Veterans Affairs (VA) Medical Center ○ Affiliated neighborhood health centers ○ Boston University Charles River campus ○ Subway station
<p>Disabled American Veterans Nationwide http://www.dav.org/volunteers/Ride.aspx</p>	<p>Ad Hoc</p> <ul style="list-style-type: none"> • Hospital service coordinators at all 172 VA medical centers • Incentives offered for volunteer drivers • In some areas a van is provided for drivers
<p>ITN America Several Metro Areas www.itnamerica.org</p>	<p>Cooperative</p> <ul style="list-style-type: none"> • Person, group, or agency sponsors local program • Mileage fee charged to users' account <ul style="list-style-type: none"> ○ Friends can donate trips, money to user • Volunteer drivers reimbursed for mileage • Trips from/to any point in service area
<p>Lloyd District TMA Portland, OR www.lloydtma.org</p>	<p>Business Association</p> <ul style="list-style-type: none"> • Large and small business collaboration • Coordinates carpool and parking programs • Advocates for Lloyd District businesses
<p>Patient Transport Express Tri-City Medical Center Carlsbad, Oceanside, Vista, CA www.tricitymed.org</p>	<p>Private Service (by/for one entity)</p> <ul style="list-style-type: none"> • Free service to patients in service area who need assistance getting to appointment/procedure <ul style="list-style-type: none"> ○ Public hospital of Tri-City Healthcare District • Service to hospital and nearby affiliated outpatient services • Supplements transit service (3 bus lines)

Name, Location, URL	Organization/Service Description
RideshareOnline.com Washington and Idaho www.rideshareonline.com	Ad Hoc <ul style="list-style-type: none"> • Managed by Washington Department of Transportation • Matches riders with multiple commuting, school, and event travel options <ul style="list-style-type: none"> ○ Carpools, vanpools, schoolpool connections ○ Bus/rail options, bicycling options
Road Runners Transportation Service Mountain View, CA http://www.elcaminohospital.org/Patient_Services/Patient_Resources/Road_Runners_Transportation	Ad Hoc <ul style="list-style-type: none"> • Service of El Camino Hospital Auxiliary volunteers • Fee for services - \$4.50 - \$28 each way • Rides from patient homes to medical, dental, outpatient appointments at hospital and affiliates • Also rides to senior centers, banks, barber/beauty shops within 10 miles of hospital
University of California San Francisco San Francisco, CA http://www.campuslifesciences.ucsf.edu/transportation	Joint Operation <ul style="list-style-type: none"> • Shuttle routes to connect hospital/medical campuses around the city • Connections to San Francisco General Hospital, university housing, transit (BART), VA medical center
Washington University School of Medicine St. Louis, MO http://www.wuphysicians.wustl.edu/page.aspx?pageID=164	Private Service <ul style="list-style-type: none"> • Two free shuttles for patients and families • Within hospital campus • Connection to affiliated outpatient services and select lodging (including Ronald McDonald House)

Benefits

The three main beneficiaries of HSTOs are the clients/riders of the service, the businesses and agencies that receive them, and the general public. The clients/riders and sponsoring businesses reap obvious benefits from such services, but there are other advantages more difficult to measure. The more reliable transportation for clients may translate into fewer missed appointments, and in cases where commuters also use the service there may be fewer late arrivals or missed shifts. This benefits both the client/patient and the service provider.

An HSTO service may also decrease the demand on parking space for sponsoring organizations, thus allowing expansion of services even though space is not available for additional parking.

At-large public benefits include the reduced costs and demands on the paratransit system and extends the reach and effectiveness of the transit system where transit/paratransit exist. In some cases, it could be advantageous for local transit/paratransit operators to provide financial support to an HSTO, which could

be a more cost effective approach to meeting service needs than extending transit/paratransit services. The public also benefits from the improved health of patients with better access to service providers, and a possible (slight) reduction in traffic congestion and greenhouse gas emissions from fewer vehicles on the roadways. An HSTO may also free up time for caregivers and others who would normally miss work or other activities to drive a patient to an appointment.

Determining Feasibility

Needs

Identifying transportation needs is essential to building a successful HSTO. Conducting an investigation of the activity center/surrounding area is the first assessment strategy to identify the need for an HSTO. Not only can an investigation provide information about possible partners and resources, it also can provide information about parking, accessibility, and connectivity. Surveying potential partners, particularly those with some sort of private or ad hoc transportation service already in place, can help determine feasibility.

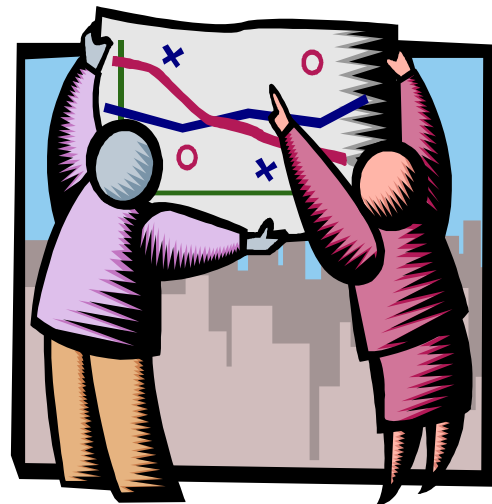
The other side of the needs assessment is the patients/clients of the providers. A GIS analysis of client addresses, affiliated sites, and existing services/capabilities can help partners focus efforts. Surveying clients is another valuable method in determining specific transportation needs. Specific strategies and services can then be formulated to help address those needs.

The possibility of including commuter trips (employees, students, and volunteers) in the HSTO structure should not be ignored. If vehicles are dedicated for patients during the workday, they may be used more efficiently by adding commute trips before and after the workday.

Employees and employers may also find a benefit in augmenting existing transit services with shuttle services to a multi-modal or multi-route transit station. In communities with limited transit operating hours, some employees may have a weekend shift or schedule that begins or ends when buses aren't running. An HSTO could provide the missing link for such commuters.

Goals and Strategies

Most HSTO goals seek to improve mobility options and accessibility for clients/patients to the immediate area and expand the service area or potential pool of clients and patients. Reducing missed and late appointments and



shifts may also be high on the list.

Once the goals are identified for a proposed HSTO, strategies can be developed to meet the goals of the group and individual stakeholders. Establishing performance measures is an important step toward ensuring the strategies are implemented and goals get accomplished. This approach must consider resources the TMO will have available.

Stakeholder Support and Funding

Engaging the appropriate stakeholders in HSTO development is essential to the success of the organization. Understanding the needs of the organization and matching the HSTO services to those needs will help both providers and clients embrace and support an HSTO. It is important to understand the economic climate in which the organizations operate and to acknowledge financial opportunities or constraints that may present.

Engaging local governments and non-profit organizations can open the door for partnership opportunities and support for HSTO activities and projects. Local governments and transit providers can create conditions that incentivize the formation of HSTOs. As with TMOs, for example, local ordinances that regulate parking could include credits/incentives to participate in a complete transportation system like an HSTO. Public-private partnerships can also provide HSTOs with funding and in-kind support in exchange for services.

HSTOs require sufficient funding and support to implement their strategies and services. Having a variety of funding sources and participants is ideal for HSTOs, as this provides organizations with the flexibility to perform a variety of functions, as well as the ability to carry on in the event one funding source deteriorates. Funding typically may come from dues, grants, service fees, donations, or even local improvement districts.

Potential Services

The services that an HSTO provides depend on the needs and desires of the stakeholders involved in its formation, as well as the funding sources available for its operation. Some HSTOs may operate on minimal resources and volunteers and provide limited services, while others may have significant and/or secure funding and staff support for programs and services.



As with TMOs, an HSTO can offer a wide variety of services and support a myriad of activities. This includes services that may serve commuters as well as patients and clients:

- Alternative and public transportation information/networking
- Door-to-door services

- Guaranteed/emergency ride home programs
- Parking incentives (for riding instead of driving)
- Personal trip or commute planning assistance
- Ride matching/carpool services
- Shuttle services (point-to-point, such as offices in the vicinity, or to a clinic, retirement home, etc.)
- Special needs services
- Specialized program assistance-jurisdiction specific (such as a community without transit services)
- Transportation/mobility advocacy
- Transit subsidy/passes (day pass/reimbursement for clients, other passes for commuters)
- Vanpool provider/subsidy

Conclusions and Recommendations for the Treasure Valley

When establishing an HSTO it is important to consider the needs of the service providers in the surrounding area, the market environment, and available resources. A formal structure is not always the appropriate solution to address the transportation problems or needs. Considering the economic climate in the Treasure Valley and surrounding areas, and that most of the potential HSTO clusters are relatively less-developed, an HSTO may not be feasible in the Treasure Valley at this time. However, as both of the large hospitals in the region, Saint Alphonsus and St. Luke's Regional Medical Centers, have expanded their service networks, creating transportation links within the networks may provide an impetus for HSTO development.

One of the service needs in the Treasure Valley and beyond is improving access to medical and human services from small communities, where citizens need to travel to the larger communities (Nampa, Caldwell, Meridian, Boise) for medical treatment. For some of the smaller communities, including Greenleaf, Notus, Parma, Melba, and Wilder, transportation options to hospitals and other services in larger communities are limited. Other communities in eastern Oregon and western Idaho have similar needs for better access to major medical services in the Treasure Valley.

Potential Locations

There are a number of places or neighborhoods in the Treasure Valley with a concentration of health care and other human services providers. Stakeholders in any of these clusters may find the formation of an HSTO to be both beneficial and feasible.

Most of the sites listed have some limited transit service within walking distance – via only one Valley Ride route. Only the central Boise locations have multiple bus routes operating nearby.

Examples of hospital activity centers in the Treasure Valley:

- + Saint Alphonsus, Boise (Curtis Rd./Emerald St.)
- + Saint Alphonsus, Nampa (formerly Mercy Medical, 12th Ave./Iowa Ave.)
- + St. Luke’s/Elks Rehab/Veterans Medical Center, Boise (State St./Fort St.)
- + St. Luke’s, Meridian (Eagle Rd./Magic View Dr.)
- + West Valley Medical Center, Caldwell (10th Ave./Logan St.)

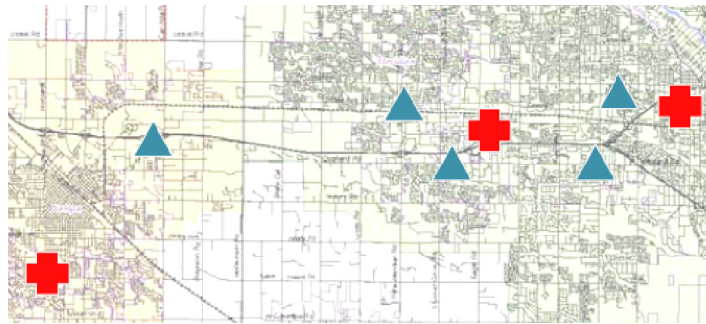


Figure 4: Some potential HSTO locations in the Treasure Valley.

Examples of other activity centers or clusters with HSTO potential:

- ▲ Depts. of Labor and Health and Welfare, Caldwell (Franklin Rd./Aviation Way)
- ▲ Mercy North Medical Center, Nampa (Flamingo Ave./Garrity Blvd.)
- ▲ Medical Offices in South Meridian (Overland Rd./Eagle Rd.)
- ▲ Saint Alphonsus Clinic/Downtown Eagle (Highway 44/ Eagle Rd.)
- ▲ Social Security/Black Eagle Center, Boise (Overland Rd./Maple Grove Rd.)

A feasible model for an HSTO in the Treasure Valley could begin with a partnership or agreement between one or more of the hospitals in the region and a local transportation service provider, such as Valley Regional Transit, Treasure Valley Transit or a senior center. A local transportation provider could assist in analyzing the needs and possible solutions, providing vehicles or identifying potential funding sources.