Ohio Department of Transportation

OTEC 2016
Coordinated Locally Developed Plans

October 2016
Study Goal:
- Quantify and understand transit needs

Study Objectives:
- Quantify how well existing transit services match today’s needs (existing conditions)
- Understand Ohio’s demographics and travel trends
- Identify services needed to address today’s/tomorrow’s needs
- Take into account industry best practices
Demographic Trends in Ohio

- Ohio is growing very slowly
  - Most counties are expected to lose population

- Ohio is getting poorer
  - Especially in rural areas, but also urban areas

- Ohio is getting older
  - Especially in rural areas

- Household composition and size are changing
  - Smaller households
  - Fewer traditional households

- Current growth driven by foreign-born population
  - Higher expectations for transit service
Ohio is Growing Older

60+ Population in Ohio by County, 2010

60+ Projected Population in Ohio by County, 2050

Source: Miami University
Poverty in Ohio by County

1. Ohio poverty rate has eclipsed the poverty rate of the U.S.

2. Poverty rate in urban areas (densely populated places with 2500+ more people) is much greater than in rural areas

3. Poverty rate in metros is higher in the central city than its suburbs

4. Poverty rate is highest in rural Appalachian Ohio

Changing Travel Behaviors

Driving less and using transit more
- Especially younger people
- But decrease in travel is generation-wide, and reflects, non-economic changes in society

Preference for urban lifestyles
- Medium sized and big cities
- Compact neighborhoods

But there is demand-supply mismatch for these types of communities in Ohio and across the country
Changes in Housing Preferences

- Growing preference for attached and smaller detached homes across all generations
- Home ownership rate has been declining since 2004 (pre-Recession)
- Demand for large-lot homes will not return to peak-level of 2011
- Half of all new housing demand is for attached homes and the other half for small lot homes – a reversal from past preferences
Transit Hierarchy

Fixed Route
Transit service with regular, pre-designated, pre-scheduled routes. Riders use designated stops and travel on larger vehicles.

Deviated Fixed Route
Transit service with the flexibility to travel off the designated route, stops, and schedule within service time or distance limits.

Dial-A-Ride (General Public Demand Response)
Door-to-door or curb-to-curb transit service that operates in small to medium sized vehicles in rural areas or areas of low passenger demand between requested pick-up and drop-off locations.

Human Service Transportation
Transit service provided by public transit agencies, social service agencies, and private providers for those who are considered transportation disadvantaged, including persons with disabilities, low-income individuals, and older adults.

Non-Emergency Medical Transportation
Transportation for eligible Medicaid recipients who need access to medical care or other Medicaid eligible services. Vehicles are typically equipped with wheelchairs and stretchers.

Width indicates relative (land) area served
(for example: non-emergency medical transportation is available statewide)
Combine all Specialized Transportation
What is a Coordinated Plan
Locally Developed, Coordinated Public Transit-Human Services Transportation Plans
- Gaps in Public Transit and Human Service Transportation
- Opportunities to Work Together

Requirement for Federal Transit Administration (FTA) Section-5310 funding.
- Section-5310: Enhanced Mobility of Seniors and Individuals with Disabilities
"developed and approved through a process that included participation by seniors, individuals with disabilities, representatives of public, private, and nonprofit transportation and human services providers and other members of the public."
ODOT’s Guidance

- Coordinated Planning Guidance – ODOT Office of Transit
  - Based on FTA’s circulars
  - Applies only to Section 5310 funding

- Each plan requires an agency lead

- As of 2015, 78 of Ohio’s 88 counties have a coordinated transportation plan
Project Scope
Support Regional Services

- Consultant Selected, project kickoff meeting Sept 2016

**Part 1**: Develop Public Transit-Human Service Transportation Districts across Ohio with the intention of identifying the natural divisions that makes sense with travel patterns.

**Part 2**: Develop a PT-HST Regionally Developed Coordinated Plan and Template.
Part 1 – PT-HST Regions

Ohio has;
- 88 counties,
- Ohio has 61 Public Transit systems,
- Hundreds of non-profits and for profits, and
- 1,000 ways of administering these services
Part 1 – PT-HST Regions

- Step 1: Mapping exercise of all districts and planning regions. Identify any natural boundaries for regional public transit-human service transportation regions.
- Step 2: Review all regulations and determine if there are any challenges to providing funding at a future regional level.
Part 1 – PT-HST Regions

- Step 3: Public Involvement / Project Advisory Group
- Step 4: Analyze all data received and comments received, develop recommended regions.
- Step 5: Repeat steps 3 and 4
Part 1 – PT-HST Regions

- Step 6: Recommend Regions
- Step 7: Recommend specific agency leads for each region (only in terms of the coordinated plan)
- Step 8: Recommend regulation and policy amendments
Part 12 – Regional Coordinated Plans

■ Step 1: Literature research and best practice of regional developed coordinated plans. Inventory of existing plans.
■ Step 2: Evaluate excising plan requirements and all sources of planning guidance.
■ Step 3: Re-develop existing requirements for Ohio.
Part 12 – Regional Coordinated Plans

- Step 4: Compile a set of relevant demographics to seniors and individuals with disabilities
- Step 5: Develop regional plan templates
- Step 6: Select one region to pilot a regionally developed coordinated plan
- Step 7: Develop first ever regional developed coordinated plan
What Else will this effect?
What is Mobility Management

Mobility management is an approach to designing and delivering transportation services that starts and ends with the customer. It begins with a community vision in which the entire transportation network—public transit, private operators, cycling and walking, volunteer drivers, and others—works together with customers, planners, and stakeholders to deliver the transportation options that best meet the community’s needs.
It is About….

Building a foundation for independence for all riders and especially older adults and people with disabilities.
It is About…

Working Together
Good Timing
Improve Human Service Coordination

- Ohio spends an estimated $247 million annually
  - Five state health and human service agencies spend $228m
  - ODOT spends $14.5m on vehicles, technology and mobility managers

- Opportunities to improve coordination, expand resources and operate more service

Continuum of Integration

- **Communication**
  - Sharing information—acting independently, but establishing a regular forum for communication as opportunities arise.

- **Coordination**
  - Acting jointly (on an informal basis)—working together on selected functions by non-binding action.

- **Collaboration**
  - Acting jointly (on a formal basis)—working together on selected functions by binding action (interlocal agreements, MOUs).

- **Consolidation**
  - Total integration—merging selected (or all) functions by mutual consent and legal transfer of authority to a single legal entity.
Cabinet Level Human Service Coordination

Dedicated to increase the access of Human Services Transportation to all Ohioans;

- **Aligning** transportation policy to allow for **increased** coordination
- **Effectively** spend allocated funds to **continually improve** existing needs and growing demand.
- **Sharing** insights and experiences with our partner agencies to **improve process**
Thank You

Chuck Dyer
Administrator | Office of Transit
Ohio Department of Transportation
Chuck.Dyer@dot.ohio.gov
www.dot.state.oh.us/transit
www.TransitNeedsStudy.ohio.gov/