



recommendations chapters. A link to the full plan document, *Coordinated Human Services Transportation Plan for the Seacoast Region*, is available on the RPC website homepage (under the “Quick Links” section) at [www.rpc-nh.org](http://www.rpc-nh.org). The plan can be reviewed online, and we will be happy to supply full printed hardcopies upon request.

### **Overview of Planning Process**

According to the guidance developed by FTA for the development of regional transit coordination plans, the plans must include (1) an assessment of available services; (2) an assessment of needs; and (3) strategies to address gaps for target populations. SAFETEA-LU also stipulates that the plan be developed with input from a broad cross section of stakeholders, including public transit operators, health and human service transit providers, for-profit transit providers, transit users, relevant state agencies, and municipalities.

The ACT transit coordination planning process has involved participants from more than 20 organizations from Strafford and Eastern Rockingham Counties participating on a consistent basis over the past 2-3 years. A regional Transit Coordination Forum was held in Dover in March 2007, attended by representatives of thirty-eight county, state and federal agencies; transit providers, and health and human service agencies, as well as several transit system users.

The assessment of available services included two rounds of surveying of provider agencies: 1) an initial written survey; and 2) on-site interviews to clarify survey responses and gather additional information on agency resources willingness to coordinate services.

The assessment of needs included analysis of data from the US Census and the Office of Energy and Planning regarding trends in the growth of the senior population and other populations with a likelihood for transit dependence; data from NH Dept. of Health and Human Services (DHHS) on TANF and Medicaid clients; and data from CDFA and the regional planning commissions on likely destinations for transit service including major employers, multifamily housing developments, and childcare sites.

Finally, the plan assessed a range of strategies for closing gaps in access for transit dependent populations and the public at large, including various models for coordination of demand response services, as well as potential new fixed route service.

Short term recommendations in the plan focus on establishing a regional transit brokerage managed by COAST. This brokerage would centralize scheduling, dispatching, and billing of rides on vehicles owned and operated by multiple human service agencies. The benefits of the proposed system are: 1) improved access for system users, with one number to call rather than needing to dial multiple separate agencies; 2) streamlining of staffing needed for ride scheduling and dispatching; and 3) improved efficiency through improved ability to combine trips among agencies to similar destinations.

Longer term recommendations include working to secure more diversified and reliable funding for transit, including expanded state support and local contributions as well as JARC and New Freedom funding; adding new fixed routes and more evening and weeknight service on existing routes; and expanding demand response service in rural areas not readily served by traditional fixed route bus.

### **Action Requested of the MPO Policy Committee**

Staff and the MPO Technical Advisory Committee recommend that the MPO Policy Committee adopt the *Coordinated Public Transit/Human Services Transportation Plan for the Seacoast Region of New Hampshire* as the SAFETEA-LU-mandated regional public transit/human services transportation coordination plan for the eastern portion of the MPO region.

# **Coordinated Public Transit Human Services Transportation Plan**

## **For the Seacoast Region of New Hampshire**

Prepared for:

Alliance for Community Transportation

and

Seacoast Metropolitan Planning Organization

*(now the Rockingham and Strafford  
Metropolitan Planning Organizations)*

*Prepared by:*

*The Center for Health, Energy & the Environment, LLC*

*PO Box 424*

*Strafford, NH 03884*

*October 2007*

## TABLE OF CONTENTS

|  |    |
|--|----|
| 1.0 OVERVIEW/BACKGROUND.....   | 1  |
| 1.1 Introduction/Purpose.....  | 1  |
| 1.2 Plan Structure.....  | 2  |
| 2.0 STATE AND FEDERAL TRANSPORTATION INITIATIVES.....                    | 3  |
| 2.1 Statewide Coordination Plan.....                                     | 3  |
| 2.2 New Hampshire’s Long Range Transportation Plan.....                  | 4  |
| 2.3 Easter Seals Getting There Program.....                              | 4  |
| 2.4 Department of Health and Human Services.....                         | 4  |
| 2.5 Federal Initiatives.....   | 5  |
| 2.6 MPO Structure and Function.....                                      | 6  |
| 3.0 REGIONAL PLANNING PROCESS.....                                       | 9  |
| 3.1 History/Background.....  | 9  |
| 3.2 Current Planning Efforts.....  | 9  |
| 3.3 Public Participation and Outreach.....                               | 11 |
| 3.4 Goals and Objectives for Regional Coordinated Service.....           | 12 |
| 4.0 TRANSIT-DEPENDENT POPULATION AND SERVICE NEED.....                   | 13 |
| 4.1 Data Sources and Limitations.....                                    | 13 |
| 4.2 Demographic Profile.....   | 13 |
| 4.3 Coordinated Plan Target Populations – Socio-Economic Indicators..... | 19 |
| 4.3.1 Elderly.....   | 20 |
| 4.3.2 Disabled.....  | 23 |
| 4.3.3 Income and Poverty.....  | 27 |
| 4.3.4 TANF Recipients.....   | 32 |
| 4.3.5 Auto Availability.....   | 35 |
| 4.3.6 Other Transit-dependent Populations.....                           | 38 |
| 4.4 Typical Transit Destinations and Fixed Routes.....                   | 38 |
| 4.5 Regional Transit Need Estimate.....                                  | 40 |
| 5.0 PROFILE OF EXISTING SERVICES.....                                    | 42 |
| 5.1 Fixed-Route Services.....  | 42 |
| 5.2 Proposed Service Expansions.....                                     | 43 |
| 5.3 Demand-Response Services.....  | 44 |
| 5.4 Service Profile.....   | 47 |
| 5.5 Overview of Service Gaps.....  | 47 |
| 5.6 Strategies to Address Gaps in Service.....                           | 48 |

## TABLE OF CONTENTS

|   |    |
|---|----|
| 6.0 OPTIONS FOR SERVICE COORDINATION.....                 | 50 |
| 6.1 Introduction.....                                     | 50 |
| 6.2 Models of Coordinated Services.....                   | 51 |
| 6.3 Criteria for Selecting a Host Agency.....             | 55 |
| 6.4 Findings.....   | 55 |
| 7.0 FUNDING SOURCES.....                                  | 56 |
| 7.1 Introduction.....                                     | 56 |
| 7.2 Department of Transportation Programs.....            | 56 |
| 7.3 Department of Health and Human Services Programs..... | 59 |
| 7.4 Other Sources of Funding.....                         | 61 |
| 8.0 FINDINGS AND RECOMMENDATIONS.....                     | 64 |
| 8.1 Stakeholder Perspectives on Coordination.....         | 64 |
| 8.2 Recommendations.....                                  | 66 |
| 8.3 Conclusion.....                                       | 70 |

### APPENDIX A - Provider Survey Instruments

    ACT Web-Based Questionnaire  
    Transit Resource Center Interview Sheet  
    Excerpts from March 2007 Transportation Summit

### APPENDIX B - Coordinated Plan Public Notices

### APPENDIX C - Draft Memorandum of Understanding (MOU)

## 1.0 OVERVIEW/BACKGROUND

### 1.1 Introduction/Purpose

This document presents the *Coordinated Public Transit Human Services Transportation Plan* (“the Coordinated Plan”, or “the Plan”) for thirty-eight communities in the seacoast region of New Hampshire. The Plan has been developed by the Alliance for Community Transportation (ACT) and the Seacoast Metropolitan Planning Organization (MPO) as part of the region’s *Long Range Transportation Plan*; and in response to federal requirements in the 2005 Safe, Accountable, Flexible, Efficient Transportation Equity Act – A Legacy for Users (SAFETEA-LU).

SAFETEA-LU established a federal mandate for regional public transit human service coordination planning. The law requires that a public transit human service coordination plan be in place before transportation service providers may obtain federal funding targeted toward human services under applicable funding programs administered by the Federal Transit Administration (FTA).

According to the FTA, the purpose of human services transportation coordination is to improve transportation services for persons with disabilities, older adults and individuals with lower incomes by ensuring that communities coordinate transportation resources under multiple existing federal programs. Coordination can enhance transportation access, minimize duplication of services, and facilitate appropriate cost-effective transportation possible with available resources. The FTA authorization includes provisions for coordinating important transportation activities such as planning, funding, mobility management and development of new projects such as the nationwide United We Ride program, described in Section 2.5 of this Plan.

FTA has published a guidance document, *Planning Guidelines for Coordinated State & Local Specialized Transportation Services*, intended to assist states and MPOs in developing coordinated human services transportation plans. Coordination activities must involve public, private, and non-profit transportation services, human service providers, the public, and other entities that represent individuals who have special transportation service needs. Coordination plans should identify the transportation needs of individuals with disabilities, older adults, and individuals with limited income; assess available services and any gaps in service; and develop or improve strategies for meeting those needs and prioritizing services.

The lack of public transportation has been repeatedly identified as one of the most pressing human service needs in the seacoast New Hampshire region, and in fact, throughout New Hampshire. The 2004 United Way of the Greater Seacoast *Community SPAN* report indicated that transportation is the primary social environment issue in the seacoast New Hampshire region. According to the Policy Resource Center Institute for Health, Law and Ethics, in its Winter 2004, Issue 4 policy document - numerous studies have documented a history of unmet transportation needs, especially in the human services transportation sector; and “...New Hampshire inefficiently spends heavily on human service transportation with the result being duplicative efforts, lack of coordination among service providers, and a weak transportation infrastructure.”

The 2006 *New Hampshire Long Range Transportation Plan* acknowledged that while a wide variety of community transportation planning efforts exist across the state, some operate in relative isolation and in many cases user access is restricted by region or funding mechanism. As a result, special service vehicles often have excess capacity and travel redundant routes. The plan concludes: “[t]he result is inefficient planning and services - workers lose access to jobs, seniors miss medical and social appointments, and low-income populations can’t get to needed services.” The report further

notes that almost all inter-regional travel in and around the state requires a car due to the lack of extensive public transportation options.

The purpose then, of this *Coordinated Public Transit Human Services Transportation Plan*, is to create for the seacoast New Hampshire region, a comprehensive strategic approach to improving coordination between existing transportation systems and providers in order to strengthen services for those target populations having special transportation needs such as those with disabilities, older adults and those of limited income. The Plan seeks to identify ways to enhance transportation access, minimize duplication of services, and encourage the most cost-effective transportation possible. In addition to being a planning tool, this Plan will be used as an implementation document. It will serve as the framework for the prioritization, selection, and implementation of coordinated projects seeking to utilize federal funding assistance through applicable FTA programs.

## **1.2 Plan Structure**

The following sections of this Plan provide detailed data, findings, and recommendations related to:

- Federal, state, and regional transportation planning efforts made to date, including public participation efforts;
- Goals and objectives for enhanced transportation services within the region;
- An assessment of human service transportation needs in the region, including identification of those individuals with disabilities, older adults and those with limited incomes;
- An inventory of available human service transportation services focusing on the identification of areas where services may overlap and where gaps in service may exist; and
- The identification and prioritization of potential strategies to address gaps in services and actions to eliminate or reduce duplication and utilize resources in a more efficient manner; and recommendations for actions intended to achieve these goals.

## **8.0 FINDINGS AND RECOMMENDATIONS**

### **8.1 Stakeholder Perspectives on Coordination**

Results from provider surveys and interviews, feedback received at the Transportation Summit, and discussions at ACT meetings indicate that interested parties agree on moving forward to begin implementing a brokerage type system for demand-response transportation services in the seacoast region. Participants have expressed their willingness to make the commitment to such a system according to their individual capacities, missions, and needs.

Findings from stakeholder input are summarized below. These findings should be considered preliminary in nature, as the Transit Resource Center's work in analyzing results from the recent one-on-one interviews is not yet complete. However, the major themes and perspectives that have come out of the various provider surveys, interviews, forums and discussions seems to be consistent among respondents over time.

Providers cited a wide range of advantages and opportunities that could be gained from coordination of demand-response services, including many described by the Transportation Research Board in Section 6.1, including:

- Provide more services to growing population, especially the elderly.
- Non-transportation providers could stay more focused on their missions.
- Participation could be gained from more agencies, area employers, hospitals, and clinics.
- Expanded service territories and service options could be developed.
- Additional funding sources and amounts could be accessed.
- Improved efficiencies in service delivery could be achieved.
- Opportunities would be available for networking and sharing of resources, ideas, and information among providers.
- Cost savings are possible through reduced insurance costs and staff devoted to transportation.
- Clients could benefit through one-stop shopping via centralized dispatch.
- Enhanced services, including evening and weekend transportation could be provided.

At the same time, providers identified numerous potential concerns with a coordinated system. Stakeholder concerns and issues that will need to be addressed as the system is designed and implemented, fall into six general categories covering different facets of a coordinated effort. These areas and concerns are summarized below. As ACT continues to move toward the implementation phase, it will be extremely important to reach consensus as a group on these issues, at each decision step along the way.

#### Agency Capacity

Providers expressed concerns about increased levels of staff time, expense, and other resources that may be needed from them in a larger coordinated system. Many agencies are already stretched thin for resources. Some agencies questioned whether their policy makers and boards would ultimately agree to such an approach, even if staff feels that coordination is a viable option.

### Funding and Sustainability

Concerns were also raised over whether individual agencies might “gain or lose” with regard to continued access to funding. It was generally agreed that existing funding streams for agency services should be maintained. It is also clear that additional sources of funding will be needed in the future and that the coordination effort must show successful improvements in service in order to continue to be funded.

### Service Quality

While providers recognize the need for expanded transit service in the region, some are also hesitant about their agency’s involvement in a coordinated system out of concern that they could lose control of how their clients are served and prioritized. Several providers also expressed concern about the level of service that their current clients would receive under a coordinated system. These providers believe that it will be difficult for a brokered system to offer the same sort of personalized service vital to their clients.

By way of example, it is true that a new reservations agent at a brokerage would not have the same initial rapport with an elderly client, as does a program administrator at a small provider agency. However, that rapport can be built and operating standards instituted, to ensure that all clients are treated courteously and appropriate efforts are made to meet their needs.

Equally important to remember is that the current level of demand-response service is not fully meeting the needs of the region’s transit-dependent populations, and that expanding to meet those needs will require some institutional change. Coordination will allow expansion of the number of people served in the community, and an increase in the level of service for existing clients.

Some providers are concerned that they be able to continue giving priority to their existing clients with their existing vehicles. Additional clients could be added to existing runs so long as current clients are not refused service or made to wait an inordinately long time. Additional service efficiency could also be gained by serving new clients at times when vehicles would otherwise be idle. Agencies with concerns about adding any new riders to their existing runs could participate by simply allowing the coordinated system to use their vehicles during periods when they would otherwise sit idle.

### Logistics

Many providers have raised specific concerns over logistics. Processes must be put in place to manage key operational elements such as billing, client eligibility, record keeping, vehicle maintenance, geographic restrictions of some human service programs, and requests for same-day or emergency services. Well-crafted Memorandums of Understanding (MOU’s) can spell out performance standards, and serve to keep all parties “on the same page” with regard to the program and to participants’ expectations.

Liability coverage is an area of particular concern and uncertainty for most providers. Agencies often have coverage through insurance carriers that specialize in specific client populations (i.e. elderly or disabled individuals), and expanding coverage to carry other populations may require insurance policy changes. The most cost effective approach to liability coverage for a coordinated system may be in having each provider maintain its current insurance carrier, while adding the system broker as an additionally insured. The addition of another insured party on an existing policy is not typically expensive. The broker and providers would need to develop agreements specifying the circumstances

under which each party will be responsible when vehicles are being shared. Providers have shared some information on current insurance coverage levels however, some are not aware of their insurance costs as these costs are sometimes rolled into broader umbrella-type plans. Pinpointing these costs and comparing them against costs for a joint purchase of insurance will be a key implementation task.

### Stakeholder Involvement

Some providers expressed concerns over what they see as potential conflicts in areas such as differing agency priorities, maintenance of their internal controls, loss of flexibility, turf issues, and perhaps even hidden agendas. There may also be a certain level of distrust in a single agency having control over the service operation. Clearly, a key element in the continued effort to implement a coordinated system is in building trust, openness, mutual respect, shared goals, and collaborative thinking among all participating stakeholders.

It was also pointed out that additional involvement will be needed from various other constituencies such as the business community in order to meet the transit needs of employees; and from municipalities, especially the smaller towns, so that costs are not disproportionately borne by the larger cities in the region. Lastly, support from state agencies and congressional offices may be needed to address barriers that exist as a function of limitations or constraints in human services programs and funding mechanisms.

### Project Goals/Management

Providers expressed a range of concerns about the overall scope, direction, and viability of a regional transportation coordination effort. This type of effort has been proposed and discussed several times in the past, yet the idea has never progressed into substantive action. Providers are somewhat skeptical that this new effort will be any more successful than attempts in the past have been. There is also concern about the current lack of a clear vision and/or potentially competing visions of how a coordinated system would be designed and implemented. Questions were also raised over whether program expectations and goals are realistic and how a successful effort would even be defined. Finally, there was concern expressed over what organization would have authority for system management including oversight, dispute resolution, future expansion, and the like.

## **8.2 Recommendations**

The Alliance for Community Transportation, in collaboration with the Seacoast MPO, COAST, regional planning commissions, area stakeholders, the CTAA, and local, state, and federal agencies has made great strides over the last several years in defining a path toward its goals and objectives for a coordinated human services transportation system in the seacoast New Hampshire region.

- ACT has successfully pursued a comprehensive planning process; repeatedly brought key stakeholders to the table; and garnered substantial interest and commitment from a broad range of interested parties and the public.
- ACT has collected and evaluated a wide array of data and information on regional demographics, available services and gaps in existing services, agency capacities, and potential funding sources.
- ACT has evaluated a variety of options for service coordination suitable for the region, and has selected its preferred direction forward.

- Finally, ACT has obtained a significant three-year implementation grant from the Endowment for Health (EFH) and the United Way. Along with COAST's anticipated \$400,000 pass-through of FTA 5307 funds and in-kind support, the group can now begin to implement a regional brokerage system.

These significant achievements now put ACT in a good position to move from the planning phase to the implementation phase of the program. Several specific recommendations and action steps are provided below to assist ACT in its early implementation phase.

#### Short-Term Recommendations and Action Plan

The Transit Resource Center recently presented to ACT, a list of prioritized short-term actions to take toward implementation of a demand-response transportation brokerage system. Similar input was received from participants at the Transportation Summit. The tasks listed are based upon a set of basic assumptions relevant at this time:

- That ACT has the desire and authority to serve as the system's advisory committee going forward;
- That COAST is in the best position to assume the broker's role and that the COAST Board of Directors will approve this approach;
- That some agencies and providers are willing and ready now to enter into a brokerage agreement and assume roles as "designated providers", and that their Boards of Directors will approve this approach; and
- That the draft Memorandum of Understanding (MOU) circulated to ACT members (attached in Appendix C) is a viable starting point for cementing commitments and relationships, and that it can and should be revised as negotiations continue among the interested parties.

The following steps constitute necessary tasks that should be undertaken over the short term, perhaps within the next three to six months, to ensure that system development proceeds smoothly.

#### *1. Establish the oversight/advisory committee*

The role of this committee is to monitor the performance of the broker and provider agencies, and together with the broker to guide the development of the coordinated system. The specific duties and composition of the committee need to be more fully defined, and members recruited and trained. It is recommended that the ACT Executive Committee form the initial committee and add members as warranted along the way. Representatives from municipalities, the local business community, NH DOT, NH DHHS and other funding agencies may be appropriate future members.

#### *2. Establish COAST in the Broker role*

The agency best prepared to take on the broker role appears to be COAST. There was agreement among providers that housing a brokerage with an agency having a structure already in place for scheduling and dispatching was preferable to creating and staffing an

entirely new organization. COAST has an existing mandate to work with providers on coordinated efforts. It also has an extensive presence in the region; direct avenues of federal funding; existing contractual relationships with some providers; and in-house maintenance capability which can potentially be used to coordinate maintenance service for all vehicles in a combined system.

3. *Finalize agreements with interested providers*

The draft MOU can be used as a template for reaching agreement on the details of each agency's participation. Finalizing language will require additional input from decision makers at each participating provider agency and must specifically address operating standards, insurance coverage standards, and funding mechanisms.

4. *Meet with boards of directors of interested providers to present MOU and secure commitments*

Once an agreement has been reached among the Advisory Committee members on blanket MOU provisions, the MOU will need to be presented to the boards of directors of each provider for approval. This will also serve as an opportunity to negotiate specifics of vehicle availability, scheduling procedures, and reimbursement rates.

5. *Implement scheduling software*

Scheduling software will need to be purchased and implemented in order to initiate the brokerage system. Selection of the software needs to be made quickly and should be subject to approval by the broker (presumably COAST) who will need to use it. The initial software purchase can be funded under the Endowment for Health (EFH) grant, however over the longer term, software upgrades, new technologies and the like should be built into annual system administrative budgets.

6. *Initiate shared driver training*

Training of all drivers to meet the standards agreed upon in the draft Memorandum of Understanding can and should be initiated immediately. This is a rather simple initial step toward implementation.

7. *Establish the call center at COAST*

Establishing a call center will entail some restructuring or realignment of COAST's scheduling and dispatch procedures, hiring call center staff, purchasing computers, and equipping shared vans with appropriate communications equipment. Initially the EFH grant can cover some or all of these costs but over the longer term, these operating and capital costs will need to be funded from other sources.

8. *Begin shared ride scheduling*

Participating providers and COAST can begin immediately to share ride schedules, client lists, and vehicles once the MOU's are executed.

9. *Establish a marketing campaign to raise awareness of expanded demand-response service*

Raising awareness of new or expanded services under the coordinated system will be a key task for the broker and the oversight committee especially over the short term. Funding for outreach will need to be built into all program funding requests as time goes on. During the start-up phase funds can come from the EFH grant, but should eventually be built into annual administrative budgets.

Long-Term Recommendations and Action Plan

Recognizing that the scope of services provided by the coordinated brokerage will be rather limited initially, and that the EFH grant will expire in three years, the following recommendations are provided as general suggestions to help ACT in its planning efforts to ensure that the brokerage system can be sustained and perhaps even expanded over time.

1. *Ensure FTA 5310 Funding*

Ensure the continued availability of FTA Section 5310 funding for vehicle replacement for provider agencies. This funding should be prioritized for agencies that have signed on to participate in the regional brokerage initiative.

2. *Seek local funding sources*

Securing additional funding from a variety of local sources including municipalities, counties and the business community will be critical to the sustainability of transit programs in the region. This will be the case especially in matching FTA funds to expand fixed-route transit service in the region, but also to the development of a coordinated and expanded demand-response system. Local matching funding will be necessary for JARC funding, as well as most foundation support. The broker and the advisory committee will need to work with Regional Planning Commissions, municipal and county governments, and local business organizations to educate them on the coordinated system model, including budget needs and ridership estimates as compared to current funding and rides provided, as well as typical funding and service levels for other communities around the state.

3. *Advocate for dedicated state transit funding*

A core problem for transit systems throughout the state is the lack of dedicated state funding available to match federal transit dollars. While better coordination between NH DOT and NH DHHS will improve overall access to human service funding for coordinated systems, ultimately there is an ongoing need for more state funding for transit service available to all groups in the region. The broker and participating providers should work with the New Hampshire Transit Association to advocate for a dedicated, ongoing source of state funding for transit services.

4. *Secure resources to fund brokerage operations*

In a traditional brokerage system, the cost of maintaining the brokerage office is covered through administrative fees allowable under Medicaid and other transportation funding programs. In the long-term, a shift by NH DHHS to channel Medicaid transportation funding through regional brokerages should allow more stable funding for users to purchase rides and for the brokerage to staff and maintain a brokerage office.

5. *Expand transit access to low-income residents*

The current public transit system currently offers extensive access to a majority of the region's low-income population. However, to better address the needs of those in the smaller outlying towns, the coordinated system could pursue federal Job Access Reverse Commute (JARC) and JobLinks funding described in Section 7.2. JARC funding has been awarded in other regions to establish brokerage systems to provide rides to work for TANF clients, as well as providing employment to TANF clients in transportation system operations. JARC funding could also be used to support commute hour fixed-route service between the larger communities and outlying employment centers in the region. JARC funding requires a 50% non-federal match, which can be provided by TANF funds either directly from the state or through a regional Community Action Program.

6. *Expand fixed-route transit service in the region*

If funding opportunities become available, expansion of fixed-route service may provide significant opportunities for under-served populations. Extensive fixed-route service is usually not practical in an area with low population densities and dispersed development as is the case in many seacoast communities. However, this type of service may well become more viable as the region's population increases. Fixed-route service expansions would be an important component of expanded transit access for larger numbers of transit-dependent populations that are able to use public transit but are not eligible for funding programs such as Medicaid.

### **8.3 Conclusion**

It will be crucial to the long-term success of the program to periodically evaluate the system's effectiveness, assess its strengths and weaknesses, and to be willing to make changes as needed. ACT may wish to avail itself of the many guidance documents from CTAA, FTA and other MPOs. There are likely to be valuable insights to be gained from the lessons learned in prior efforts implemented across the state and in other parts of the country.

Updated data on the region's transit-dependent populations and needs, system capacity, funding levels and sources, and levels of consumer and stakeholder satisfaction will need to be collected and assessed in relation to service levels and focus at regular intervals over the operation of the program.

Lastly, as statewide initiatives develop over time, ACT may need to align and/or coordinate more directly with statewide programs. All of these aspects of operating and maintaining a regional brokerage will require the ongoing commitment, support and flexibility of ACT members, consumers, stakeholders, COAST, funding sources, and governmental agencies at all levels.