

MEASURE B PROGRAM COMPLIANCE REPORT

Signature Cover Sheet *Fiscal Year 2013-14*

Agency Name:

Bay Area Rapid Transit District (BART) as
part of the East Bay Paratransit Consortium

Revision Number:

1

Choose the type(s) of report you are submitting (*check all that apply; Tables 1-3 are required*)

- Annual Program Compliance Report – Bicycle and Pedestrian Safety Funds
- Annual Program Compliance Report – Local Streets and Roads Funds
- Annual Program Compliance Report – Mass Transit Funds
- Annual Program Compliance Report – Paratransit Funds
- Tables 1- 3: Program Summary of Revenues, Expenditures, and Reserves (Excel workbook)

List any additional attachments included in the submittal (*check all that apply*).

- Attachment A: Bicycle and Pedestrian Attachments
- Attachment B: Local Streets and Roads Attachments
- Attachment C: Mass Transit Attachments
- Attachment D: Paratransit Attachments
- Other Attachments (*clearly label additional attachments as needed*)

Certification of True and Accurate Reporting

By signing below, the agency manager and finance manager, or their designees certify the compliance information reported are true and complete to the best of their knowledge, and the audited dollar figures matches exactly to the Measure B revenues and expenditures reported in the compliance report and Tables 1-3.

X

Signature

Laura Timothy
Manager of Access and Accessible
Services

Date

2-18-2015

X

Signature

Chris Gan
Controller

Date

2/18/15

Pages originally numbered 2 – 23 have been intentionally removed as they are not needed for the BART Report.

BART's Paratransit Report is found on pages 24 – 30, below, using the original numbering sequence.

BART did not receive funds for any of the other areas.

PARATRANSIT PROGRAM

Compliance Report Summary *Fiscal Year 2013-14*

1. Did your agency receive Measure B Paratransit Funds in the reporting period of July 1, 2013 through June 30, 2014?

- Yes (Complete this Paratransit section.)
 No (Do not complete the Paratransit section)

2. Complete the below contact information.

CONTACT INFORMATION	
Paratransit Program Agency:	BART as part of the East Bay Paratransit Consortium
Contact Name:	Laura Timothy
Title:	Manager of Access and Accessible Services
Phone Number:	510-464-6446
E-mail Address:	ltimoth@bart.gov

3. Complete the Excel Worksheets Tables 1 to 3 for the Paratransit Program.
(Check the boxes below to indicate completion).

- Table 1: Measure B Revenues and Expenditures**
The values entered into Table 1 must match your agency's audited financial statements and compliance reports. Please contact Alameda CTC staff if you have questions before submitting your report. All dollar figures must match your audited financial statements and compliance report or Alameda CTC may reject your submission.
- Table 2: Summary of Expenditures and Accomplishments**
This table describes actual expenditures and activities incurred for FY 2013-2014 (FY 13-14).
- Table 3: Summary of Planned Projects and Reserve Funds**
This table describes your agency's plan to expend any remaining Measure B funds within the defined reserve policies of the funding agreement through FY 14-15 thru FY 17-18.

4. If your agency's ending MB Direct Local Distribution Program fund balance was greater than ZERO, describe why you have this fund balance and identify anticipated projects that will use these funds within the next year. *Indicate N/A if not applicable.*
Complete Table 3 Summary of Planned Projects and Reserve Funds.

N/A

5. Did your agency expend **MORE THAN** the amount of Measure B funds received in FY 13-14? If yes, how much more did you expend using prior fund balances? *Indicate N/A if not applicable.*

Measure B mandated pass-through Paratransit funds do not cover the cost of BART's share to operate the East Bay Paratransit Consortium. The majority of funds needed to pay for the ADA program are provided from BART's General Fund. There are no prior fund balances.

6. **Describe Reserve Funds.** If your agency has Measure B Reserve Funds identified, describe your process to allocate these funds and describe in detail your plan and time frame for using these funds. In addition, if the use of reserves requires additional agency approvals, what is your approval process? **Refer to Reserve Fund Guidance, and complete Table 3 Summary of Planned Projects and Reserve Funds.**

N/A

7. List the amount of the FY 13-14 Total Operating Expenses allocated to the following categories.

Category	Expense Amount
Management (oversight, planning, budgeting, etc.)	\$0.00
Customer Service and Outreach Activities	\$0.00
Trip Provision (direct or contracted taxis, vans, shuttles, etc.)	\$1,763,298
TOTAL MB Operating Expenses *:	\$1,763,298

8a. List the total number of trips provided and services provided in FY 13/14.

Trip / Service Types	Quantity (as of 12/31/14)
Number of One-way unduplicated trips	
ADA Mandated Paratransit	219,010
Door-to-Door Program / Van Services	N/A
Taxi Program	N/A
Fixed-Route Services	N/A
Group Trips	N/A
Volunteer Driver Program	N/A
Other (Specify here)	N/A
Number of contacts through Mobility Management/Travel Training	N/A
Number of Scholarships provided	N/A
Number of Meals Delivered	N/A

8b. Complete the table below with available service quality data for reservations and trips. If no data is available, skip this question and complete 8c and 8d.

Cancelled Trip Reservations (percent)	Passenger No shows (percent)	On-time Pickup (percent)	Late Pickup (percent)	Missed Trips, Provider No shows (percent)	Average Ride Time (minutes)
22.9%**	3.0%	91.4%	8.6%	0.21%	40.0

*Includes very late pickups

** includes 100% of cancellations, from same day to 7 days in advance of the trip. These reflect cancellations by the rider. Because most trips are round trips, one rider cancellation usually generates two trip cancellations.

8c. Describe your complaint and commendation process. Describe the process from beginning to end, including instructions you provide to customers for filing complaints or commendations, your document procedures, and your follow up.

- Individuals making a complaint receive a post card or a phone call, thanking them for the information, explaining we use complaints to review and improve the system. The individual is told they may call us back in 2 weeks if they would like to know the outcome of the research we conduct on their complaint. Riders who have specified an alternative format receive post cards in their specified format.
- Customer Response clerks research the complaint using tapes of calls, Vehicle GPS data, fixed route time, route mapping, etc. Once the Response clerk has investigated, the complaint is sent to the appropriate party (Service Provider or EBPC management) for their investigation and response.
- Complaints needing additional response are forwarded to the AC Transit and BART management for coordination and response.
- Complaints about individual staff are shared with the staff person and made a part of their file. The individual is counseled or re-trained. Progressive discipline procedures are used with individuals receiving multiple complaints.
- The Operations Manager reviews driver complaints regularly with the providers.
- Complaints about vehicles are investigated and repairs are made, if necessary.
- Complementary fare tickets are given to riders whose rides that were more than 60 minutes late, or situations where the vehicle never arrived.

8d. Describe any common or recurring complaints your program has received and any program changes as a result. Did the number of complaints increase or decrease compared to the prior year?

All customer complaints are tracked by type. Numbers of complaints are reported by category to staff and to the EBPC Rider Committee, called the Service Review Advisory Committee (SRAC). Complaint statistics and details are used to determine areas of the service needing attention. Information uncovered in the complaint process is used to improve the service, most often through specific attention to individual employees or through modification of service practices. The Broker's Operations Manager regularly reviews complaints and their responses to identify trends and issues.

Complaints as a percentage of revenue passengers in FY13/14 were 0.52%, identical to results in FY 12/13. Commendations in FY 13/14 were 0.24%, down slightly from FY12/13 results of 0.27%.

9. Does your agency have service quality data available about ridership? If so, enter the data in the applicable boxes below.

Number of Registered Riders (as of 6/30/14)	Number of Riders Added to Program in FY 13/14	Number of Riders on Wait List	Number of Accidents and Incidents*
17,253	Net 151	0	32

*Report incidents resulting in any of the following: a fatality other than a suicide, injuries requiring immediate medical attention away from the scene for two or more persons, property damage equal to or exceeding \$7,500, an evacuation due to life safety reasons, or a collision at a grade crossing.

** 5055 riders (both new to EBPC and recertifying riders) were certified as eligible to use the system; 4904 rider records were inactivated due to death; leaving the service area; not seeking recertification, etc.

10. Did your agency publish an article(s) that highlight Paratransit projects and programs funded by Measure B in an agency or Alameda CTC newsletter?

Yes. If yes, complete the table below and INCLUDE a copy of the article(s) as Attachment D: Paratransit Program Attachments.

Publication	Date Published (Month/Year)	Confirm Copy Attached? (Y/N)
D-1 Newsletter article for ACTC from EBPC	Sent to ACTC 8/28/13	Y
D-2 Newsletter article for ACTC from EBPC	Sent to ACTC 3/14/14	Y
D-3 On-Hold message	Played throughout FY 13/14	Y

No. If no, explain in the box below.

11. Did your agency include a description of the Paratransit projects and programs funded by Measure B on its website?

Yes. If yes, include a printout of the website as Attachment D and provide the URL below that contains updated and accurate project information.

Website Address	Confirm Printout Copy Attached? (Y/N)
D-4 EBPC website: http://eastbayparatransit.org/	Y
D-5 BART website: http://www.bart.gov/guide/accessibility/paratransit	Y
D-6 Learn BART! Last page attached. http://www.bart.gov/sites/default/files/docs/Learn_BART_Online5.3.pdf	Y

No. If no, explain in the box below.

12. Did your agency use signage that indicates use of Measure B funds for its Paratransit projects and programs?

Yes. If yes, include photos of the posted signage in Attachment D and describe the signage below.

Signage location / Project	Confirm Photos Attached? (Y/N)
D-7 Bumper Sticker on all EBPC vehicles	Y
D-8 Sticker placed on all MDC units in EBPC vehicles	Y

No. If no, explain in the box below.

13a. Describe your agency's effectiveness at meeting your planned FY 13-14 expenditures reported in the last compliance report and reasons for any variations. Agencies are expected to expend their planned expenditures from their individual projects and/or and reserve funds. **Did you expend the amount planned?**

All projected FY 13/14 Measure B funds received for planned expenditures were utilized for ongoing Operations of the mandated ADA program.

13b. If your agency expended LESS THAN the planned amount, provide detailed justification on why dollars were not spent, and reference specific projects that did not expend the funds as planned.
Indicate N/A if not applicable.

N/A

13c. If your agency expended MORE THAN planned amount for a particular project/reserve, explain why and describe any adjustments to the reserves to finance the surplus amount. Indicate N/A if not applicable.

Planned amount in FY13/14 application: \$1,699,002
Measure B FY 13/14 actual expenditures: \$1,763,298.
The reason BART expended more than the planned amount for the ADA program is that the actual Measure B distributions to BART were more than originally forecast.

14. Provide additional information, if necessary, to further explain Measure B expenditures for the Paratransit Program.

BART's primary objective will be to continue its partnership with AC Transit to provide ADA mandated paratransit through their joint venture, the East Bay Paratransit Consortium.