



Fiscal Year 2011-12

Program Plan Review Schedule

Friday, April 29, 2011

10:00 – 10:15	Set-up
10:15 – 11:00	Alameda
11:05 – 12:05	San Leandro
12:05 – 12:20	Break
12:20 – 1:20	Oakland
1:20 – 1:35	MSL Discussion
1:35 – 2:20	Emeryville
2:25 – 3:10	Pleasanton
3:15 – 4:00	LAVTA
4:00 – 4:10	Wrap-up



MEMORANDUM

To: Paratransit Advisory Planning Committee (PAPCO)

From: Staff

Date: April 29, 2011

Subject: Fiscal Year 2011/12 Program Plan Review

We look forward to your participation in the annual program plan review process. As a PAPCO member, Program Plan Review is one of your key responsibilities. This year, PAPCO will be responsible for reviewing and recommending funding for Measure B funded paratransit programs totaling over **\$8.95 million dollars**. Please see the schedule attached at the front of this binder for the times for this day. All meetings will be held at the Alameda CTC, located at 1333 Broadway, Suite 300. **Please plan to arrive 15 minutes before the first presentation to get settled and have a brief orientation.**

Each program is scheduled for a minimum 45-minute time slot on one of the two review dates. During that slot, program managers will provide a 10 minute presentation of their program, followed by a brief staff report including any dramatic changes and questions identified through the Finance Subcommittee. You will then have an opportunity to ask questions of each of the program managers before making your recommendation.

Enclosed are the program plans you are responsible for reviewing on your date. For each program, you have been provided the following:

- Staff Summary Form
- Application PDF
- Application Table 1

Please review these documents carefully before the meeting and come prepared with comments. We recommend that you review key questions developed by staff about each program (Part II, Question 6). Since the Finance Subcommittee will not be held in time to include those questions in the packet, questions are being emailed separately to program managers.

As part of your recommendation, you will have the opportunity to make comments or suggest ideas to the program managers regarding their programs. Once you make your comments or suggestions, you may simply send a program plan on to the full committee (then the Commission) for approval without comment, or you may attach comments or questions that you believe should be pursued by CTC staff.

Remember that most jurisdictions have their own citizen advisory committee that they have worked with to design their program. Your job is not to reinvent individual programs, but rather to encourage the best overall service in the County through coordination/mobility management, ensuring consumer involvement, and offering your own experiences for making programs more responsive to consumer needs. Your final recommendations will go before the full PAPCO in May for final approval before going to the Commission.

We look forward to seeing you on your program review date. If you have any further questions, please don't hesitate to call Naomi at (510) 208-7469.

Overall Fiscal Year 2011/12 Program Plan Review Schedule

Date	Schedule
4/29/11	10:00 – 10:15 Set-up
	10:15 – 11:00 Alameda
	11:05 – 12:05 San Leandro
	12:05 – 12:20 Break
	12:20 – 1:20 Oakland
	1:20 – 1:35 MSL Discussion
	1:35 – 2:20 Emeryville
	2:25 – 3:10 Pleasanton
	3:15 – 4:00 LAVTA
	4:00 – 4:10 Wrap-up

Date	Schedule
5/2/11	10:00 – 10:15 Set-up
	10:15 – 11:30 EBP
	11:35 – 12:20 Berkeley
	12:20 – 12:35 Break
	12:35 – 1:20 Albany
	1:25 – 2:25 Hayward
	2:30 – 3:15 Union City
	3:20 – 4:05 Newark
	4:10 – 4:55 Fremont
	4:55 – 5:00 Wrap-up

Background Information

Overview of Paratransit Programs in Alameda County

There are 13 different paratransit programs in Alameda County. Broadly speaking, these programs can be categorized into “Mandated” programs and “Non-Mandated” programs.

Mandated programs are a federal mandate by the Americans with Disabilities Act, which was passed in 1990, and requires that public transit systems make their services fully accessible, including providing services for people who, because of their disability, cannot ride regular buses and trains. In Alameda County, AC Transit and BART have partnered to form the East Bay Paratransit Consortium which provides the mandated service in our region.

In addition, Livermore Amador Valley Transit (LAVTA) in Livermore, and Union City Transit in the City of Union City also provide mandated services. However, LAVTA and Union City do not receive funding under the “mandated paratransit” portion of Measure B. They receive funding through the cities they serve, and offer both mandated and non-mandated services. Only AC Transit and BART receive funding from the “mandated services” portion of Measure B.

Mandated services are required by federal law to provide paratransit services to individuals who live within a 3/4 mile radius of a regular bus or rail route during the days and hours that the regular services are offered. Other requirements of the mandated services are that they provide next day service; charge fares no more than twice the undiscounted fixed route fare; accept requests for all types of trips without prioritization; operate during the same

hours as regular transit services; and allow no pattern or practice of denials. Individuals who wish to use mandated paratransit in their area are required to complete an application and an interview to determine their eligibility.

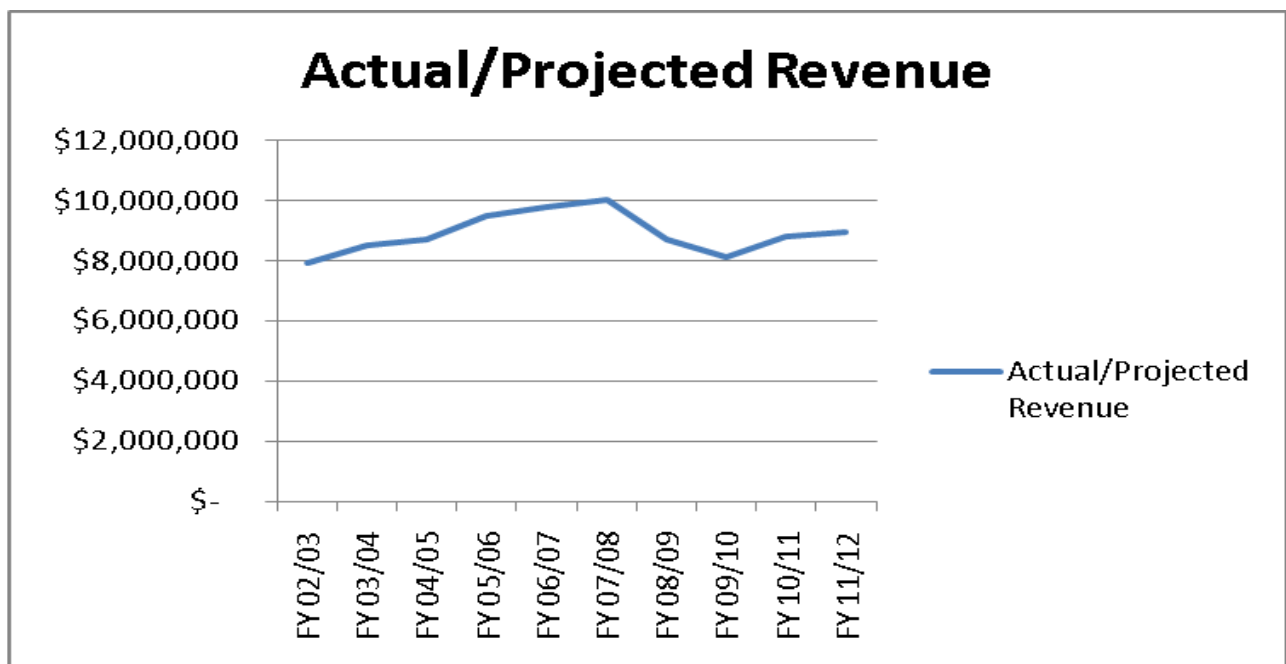
Non-mandated programs, on the other hand, have much more flexibility in how they design their programs. Each City in the County has designed their paratransit programs to meet the needs of their local jurisdiction. The major difference between the mandated and non-mandated or “City-based” programs, aside from the absence of federal regulations, are that they focus more on providing paratransit services for seniors and offer a range of different types of paratransit services, including taxi, van service, and shuttle service.

PAPCO Appointments and Vacancies

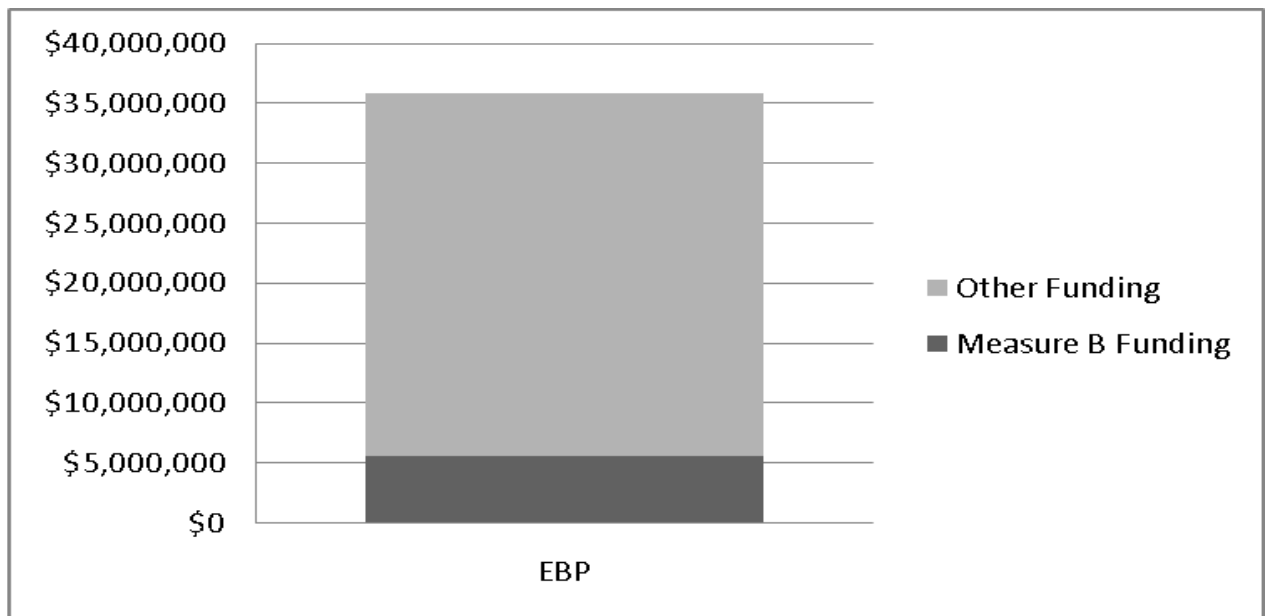
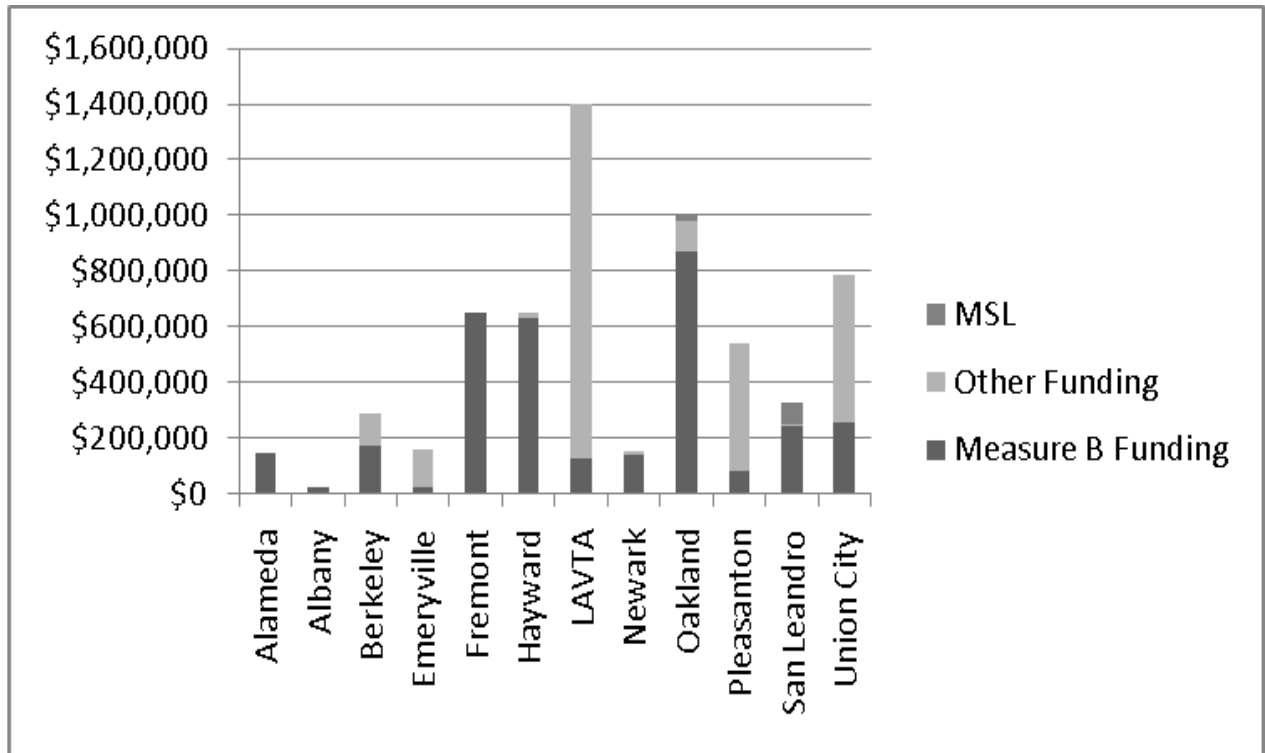
Appointer	Member
A. C. Transit	Hale Zukas
BART	Harriette Saunders
LAVTA	Esther Waltz
Union City Transit	Larry Bunn
City of Alameda	<i>Vacant</i>
City of Albany	<i>Vacant</i>
City of Berkeley	Aydan Aysoy
City of Emeryville	Joyce Jacobson
City of Dublin	Shawn Costello
City of Fremont	Sharon Powers
City of Hayward	Vanessa Proee
City of Livermore	Jane Lewis
City of Newark	<i>Vacant</i>
City of Oakland; Councilmember Rebecca Kaplan	Rev. Carolyn M. Orr
City of Piedmont	<i>Vacant</i>
City of Pleasanton	Carmen Rivera-Hendrickson
City of San Leandro	<i>Vacant</i>
City of Union City	Clara Sample
Supervisor Scott Haggerty District 1 - Cities of Pleasanton, Livermore, most of Fremont and a portion of Sunol	Herb Hastings Maryanne Tracy-Baker

Appointer	Member
Supervisor Nadia Lockyer District 2 - Cities of Hayward (incorporated portion), Newark, Union City, Fremont (Niles, Brookvale and everything North of Decoto Road), and unincorporated Sunol (everything North of Highway 84 only)	Herb Clayton Michelle Rousey
Supervisor Wilma Chan District 3 - includes San Leandro, Alameda, San Lorenzo, Ashland, Hillcrest Knolls and the Fruitvale, San Antonio, Chinatown portions of Oakland.	Sylvia Stadmire Renee Wittmeier
Supervisor Nate Miley District 4 - East Oakland, Oakland Hills, Castro Valley, Ashland, Cherryland, Fairview and Dublin	Betty Mulholland Sandra Johnson Simon
Supervisor Keith Carson District 5 - Cities of Albany, Berkeley, Emeryville, Piedmont and large portions of Oakland, namely West Oakland, North Oakland (Rockridge and Montclair), and the Fruitvale and San Antonio districts	Jonah Markowitz Will Scott

Measure B Revenue Trends



Program Proportions of Measure B Funding



**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

Part I. General Program Information

- 1. Paratransit Program:** City of Alameda
- 2. Program Manager/Representative:** Gail Payne
- 3. Program Plan Review Date and Time:** April 29, 10:15am
- 4. Measure B Amount for Base Program Funding:** \$145,742
- 5. Measure B Amount for Minimum Service Level Grant:** N/A
- 6. Program Base Services Overview:** Refer to Table 1
- 7. Potential Riders Projected for next Fiscal Year:** 12,300 (mistake-rides?)
- 8. Total Rides Projected to be Provided in next Fiscal Year:** 12,300
- 9. Meal Delivery Program?** ☐ Yes ☒ No
Measure B Funds Allocated to Meal Program: N/A
- 10. Purchasing EBP tickets?** ☒ Yes ☐ No
Total EBP Tickets to be Purchased in Next Fiscal Year: 12 people/\$1000
(250?)
- 11. Proposed changes for next Fiscal Year?** ☒ Yes ☐ No

Changes: Shuttle service expanding.

- Add a new Central Loop on Thursdays to expand the geographic coverage.
- Reduce West Loop to Tuesdays and expand to cover more of West Alameda.
- Revise the East Loop to encompass more of Bay Farm Island, Lincoln Avenue, and High Street.
- Reduce the eligibility age to use the shuttle from 62 years and older to 55 years and older to attract more riders.
- Restrict the taxi services to Alameda County, use expiration dates on vouchers, restrict MRTIP to five per month and require taxi meters.

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

Part II. General Program Analysis

1. Efforts related to Coordination/Mobility Management

Public Works Department staff will look into having reciprocal agreements with other Alameda County jurisdictions to ride the Paratransit shuttle.

2. Identified needs/priorities that will not be met by the Program

None specified.

3. Status of Jurisdiction's PAPCO appointees/vacancies: Refer to Cover Memo

4. Subcommittee comments from last year's program plan review

- Great program; keep going.
- Would like a new shuttle.
- Commends program on use of resources. Free services are good.
- Overall, in better shape than last year. Would like updates because of leadership change.
- Commends on the scholarship program. Make sure Meals on Wheels recipients are still getting service.
- Commends on shifting and foresight for other categories.
- Likes program and likes outreach to all areas. Concerned about Meals on Wheels support.
- Going in the right direction.
- Keep the momentum going.

5. Final recommendation after last year's program plan review

A motion to conditionally approve City of Alameda's plan was made by Betty Mulholland and seconded by Harriette Saunders. The motion carried unanimously. The condition for the City of Alameda's approval is in-person quarterly reporting to include updates on the base program and MRTIP, update on staff changes, and confirmation that meal delivery is being done by other City departments/agencies.

6. Staff identified questions for current fiscal year (PAPCO members can use these as examples during the question rounds)

- A. Since you've changed the parameters of your medical return trips, have you seen a decrease in "problem" trips?

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

- B. What else can you tell us from the surveys about how your shuttle service is being received?
- C. When do you anticipate your reserve not exceeding the three month operational reserve? Do you anticipate problems with service expectations at that time?

7. Financial audit Program Compliance Report performed and compliance opinion given? X Yes _ No

8. Consumer involvement in planning process

Two surveys for the shuttle service have been conducted in August 2010 and January 2011 with 96% and 95% stating "satisfied." The annual taxi survey occurs. Staff reports were written for the recent outreach effort between December 2010 and March 2011. From December 2010 through March 2011, Public Works staff presented the survey results and the proposed modifications to the Paratransit Program to the Transportation Commission (December), the Recreation and Park Commission (January), the Social Service Human Relations Board (January), the Commission on Disability Issues (February) and the City Council (March).

Part III. Financials

1. Finance Subcommittee Questions: To be provided at meeting

2. Revenue Trends: Refer to Cover Memo

3. Proportion of Measure B Funding: Refer to Cover Memo
Source(s) of other funding (if applicable): N/A

4. Fund Reserves and Net Revenues Planned for 2011-2012

Fund balance--undesignated	\$64,485
Undesignated funds % of planned Meas B rev	44.2%
Reserve funds--designated for capital	\$0
Capital funds reserved < 4 years	N/A
Reserve funds--designated for operations	\$32,500
Reserve funds = or < than 3 months M B rev	Y
Total Fund Reserves going into FY	\$96,985
Planned Net Revenue at end of FY	\$32,579

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

Part IV. Minimum Service Level Grants

1. **Applying for an MSL Grant?** _ Yes X No
Amount of Request: \$_
2. **Which other programs have applied for an MSL Grant and for how much?**
3. **MSL Gap(s) needing to be closed and application answers:** Refer to Application PDF
4. **Additional questions/comments about application for MSL Grant?**
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Part V. Preliminary Recommendation (Committee Member Notes)

With respect to this application, I want to send the following recommendation to the full PAPCO (*please check one*):

- ☐ Recommend **approval of base funding without MSL grant** (MSL Grant not requested or not recommended).
- ☐ Recommend **approval of base funding with MSL grant of \$_____**.
- ☐ Recommend **conditional approval with recommended actions** (for example, recommend funds continue to flow but place program on watch list and require quarterly reports to PAPCO, hold back funds until program updates plan or budget, recommend partial funding until specified actions are taken).
- _____
- _____
- _____
- ☐ Don't recommend approval.

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**



Annual Paratransit Program Application for Measure B Funding

Fiscal Year 2011-2012 (July 1, 2011 through June 30, 2012)

Note: In July 2010, the Alameda County Transportation Improvement Authority (ACTIA) merged with the Alameda County Congestion Management Agency to become the Alameda County Transportation Commission (Alameda CTC). Agencies and jurisdictions that have paratransit pass-through fund agreements with ACTIA must continue to submit annual paratransit program application forms. See below for submittal instructions.

This document includes the PDF application form and instructions for submittal.

Requirements and Instructions

Measure B paratransit fund recipients are required to submit to the Alameda CTC one electronic version of two documents for the annual program application submittal.

Paratransit Program Application Deadline: April 8, 2011

The Annual Paratransit Program Application submittal includes a PDF and Table 1 and Table 2 Attachments for each program.

1. Paratransit Program Application (PDF)
2. Paratransit Program Application Table 1 and Table 2 Attachments (one Excel workbook)

Electronic submission: Save the online PDF form to your hard drive with your agency name and date in the file name (e.g., Albany_FY11-12_Paratransit_Program_Application_040611.pdf). You can start work on the PDF and finish it later; simply save it to your hard drive. Also, complete the Table 1 and Table 2 workbook and include your agency name and date in the file name. Submit one copy of both the PDF and Table 1 and Table 2 Attachments via email by April 8, 2011. Send it to narmenta@alamedactc.org. If you have questions, you can reach Naomi Armenta via email or at (510) 208-7469.

Paratransit Program Application

Due by April 8, 2011

Agency Name:	City of Alameda Public Works Department
Date Submitted:	April 8, 2011
Name and Title of Submitter:	Gail Payne
Secondary Agency Contact Name:	Obaid Khan
Phone Number:	510-747-7948
Fax:	510-769-6030
E-mail:	gpayne@ci.alameda.ca.us

Clearly label additional attachments as needed.

1. **What amount of funds are you applying for?** Fill in the boxes below. Note: Mandated and non-mandated funds should match the projects on the website at:
[http://www.actia2022.com/files/managed/Document/1900/RevDist%20FY11 12%20projec
tion.pdf](http://www.actia2022.com/files/managed/Document/1900/RevDist%20FY11%2012%20projection.pdf)

Mandated Amount (AC Transit and BART only)	Non-mandated Amount	Minimum Service Level Gap Grant Amount
	\$145,742.17	

2. **What type of paratransit projects and programs will Measure B fund?** To answer this question, complete the Table 1 Attachment (Table 1 tab) in the Excel workbook. Describe the projects and/or programs your agency plans to implement with Measure B funding during fiscal year 2011-2012 (FY 11-12).

Continue to the next page of this application to answer question 2A.

2A. Please provide a short narrative description for each service component listed in question 2 and describe any planned changes. (max. 1,300 characters)

- Shuttle Service: Provides Alameda's senior and disabled residents with access to major shopping destinations and medical facilities around the City of Alameda. The shuttle operates from 9:00 a.m. to 4:00 p.m. on Tuesdays (West Loop), Wednesdays (East Loop) and Thursdays (Central Loop).
- Medical Return Trip Improvement Program: Free taxi service provided to EBP-certified residents to return home from medical appointments.
- Premium Taxi Program: Taxi services (not limited to medical trips) at 50% discount for eligible residents.
- Group Trips: City of Alameda Paratransit supports transportation for recreation programs run through Mastick Senior Center and Alameda Recreation and Park Department.
- Scholarship Program: HUD-defined low income individuals are eligible for up to two free EBP coupon books when they purchase two at the regular price.

3. Is your program currently meeting Minimum Service Levels? See the appendix.

- ☒ Yes
☐ No
☐ Not Applicable (*Americians with Disabilities Act (ADA) mandated provider*)

3A. If no, which ones are you not meeting and how?
(max. 255 characters)

4. How many potential riders do you estimate will use this service this coming fiscal year?
Fill in the box below.

**Potential Riders
in FY 11-12**

12,300

5. Please provide details regarding your vehicle fleet. To answer this question, complete the Table 2 Attachment (Table 2 tab) in the Excel workbook.

6. Does your program provide meal delivery?

☐ Yes

☒ No

6A. If faced with revenue shortfalls, how do you balance meal delivery with trip requests?
(max. 255 characters)

7. Describe your driver training program. (max. 500 characters)

The transportation service providers are in charge of their own driver training. The contracts have an extensive section stating the expectations on how the drivers should treat the program participants.

8. Describe your policies concerning timely pick-ups or drop-offs. Include what window your program allows, if there is a standard for the percentage of pick-ups or drop-offs that must occur within the window, the policy concerning early pick-ups, and whether there is a maximum amount of lateness after which you count a provider no-show or missed trip.
(max. 500 characters)

9. Describe your policies concerning the maximum time a rider may be on a vehicle. Indicate if there is a maximum time, and if there is a standard for the percentage of total trips that must fall within this maximum time. (max. 255 characters)

#8 (Input Cell is Corrupted): Transportation service providers must pick-up participants within 30 minutes of a no-show. Participants should call the taxi company if the ride is delayed for ten minutes and to alert Mastick.
#9: Not applicable.

- 10. What are your policies for reserving trips?** What are your policies for reserving individual trips (including subscriptions/standing orders or same-day trips) and for reserving group/program trips? What advance notice do you require or allow? Are there limits on availability? *(max. 500 characters)*

Reservations are made directly with the taxi service provider at least 30 minutes prior to the desired trip time. Riders requiring a lift-equipped van should call the day before they need the ride.

- 11. How far in advance is a rider required to cancel a trip before you count the trip as a no show?** Describe these for each type of trip below. What is your policy concerning riders with repeated no-shows or late cancellations? Please describe your policy for subscriptions/standing orders, same-day trips, or group/program trips as applicable. *(max. 500 characters)*

Taxi riders are requested to cancel a trip at least 15 minutes before the trip to prevent a no-show.

- 12. What is the maximum and average time between receiving an application and enrolling an applicant in the program?** *(max. 255 characters)*

Enrollment takes place in no more than three working days.

- 13. Is there a waiting list?**

☐ Yes
☒ No

- 13A. If yes, what are the policies that apply to it? How many people are on it? What is the average wait?** Describe your answer in the box below. *(max. 500 characters)*

- 14. Describe your complaint and commendation process.** Describe your process from beginning to end, including instructions you provide to customers for filing complaints or commendations, your documentation procedures, your follow up, and any changes you have made to your program as a result of customer complaints and commendations.
(max. 500 characters)

The Rider Guide encourages program participants to send complaints to Mastick Senior Center and to provide the following information:

- Rider name, address and telephone number
- Date and time of incident
- Details of the incident

City staff compiles and documents annual survey results, and contacts its transportation service provider(s) to resolve any issues that may arise. The City has hired new transportation service

- 15. Describe how you will coordinate services with other Measure B paratransit services and/or mandated ADA paratransit services so that people can make trips throughout Alameda County.** Examples of coordination may include, but are not limited to, reciprocal fare agreements, reciprocal agreements to provide trips into adjoining areas, arrangements for clients to ride on other systems, and transfer arrangements. Attach copies of agreements or memoranda of understanding for coordination if available.
(max. 500 characters)

Public Works Department staff will look into having reciprocal agreements with other Alameda County jurisdictions to ride the Paratransit shuttle.

- 16. Describe planned outreach to ensure that potential users of the services, including coordinated services, learn about them.** (max. 500 characters)

Advertisements will be displayed at the Alameda Theatre, telephone book, street banner, City's government access channel, Alameda Journal and Alameda Sun and potentially on the Alameda Patch. An additional bus wrap will provide an expanded explanation of the shuttle service. The web site also helps promote the program: www.AlamedaParatransit.com.

- 17. Describe your planning process.** List all activities undertaken in connection with this plan, including consumer or public meetings; meetings with other agencies; presentations to boards, commissions, or committees; and provide general dates for these activities.
(see questions 17A through 17D that follow; max. 500 characters)

From December 2010 through March 2011, Public Works staff presented the survey results and the proposed modifications to the Paratransit Program to the Transportation Commission (December), the Recreation and Park Commission (January), the Social Service Human Relations Board (January), the Commission on Disability Issues (February) and the City Council (March).

17A. Has this plan been reviewed by a local paratransit advisory committee?

- ☒ Yes
☐ No

17B. If yes, list the committee name and date of the meeting.

Commission on Disability Issues, February 28, 2011

17C. Describe any surveys or analysis conducted and staff reports. (max. 255 characters)

- Two surveys for the shuttle service have been conducted in August 2010 and January 2011 with 96% and 95% stating "satisfied." The annual taxi survey occurs. Staff reports were written for the recent outreach effort between December 2010 and March 2011

17D. Describe how the planning process is connected to the service plan: How do the planned services correspond to the results of the planning process? (max. 255 characters)

The City Council approved the modifications to the Paratransit Program on March 15, 2011.

18. If proposing service changes, what identified needs or priorities will the proposed changes meet? What needs or priorities will the proposed service changes still not meet? (max. 500 characters)

- Add a new Central Loop on Thursdays to expand the geographic coverage.
- Reduce West Loop to Tuesdays and expand to cover more of West Alameda.
- Revise the East Loop to encompass more of Bay Farm Island, Lincoln Avenue, and High Street.
- Reduce the eligibility age to use the shuttle from 62 years and older to 55 years and older to attract more riders.
- Restrict the taxi services to Alameda County, use expiration dates on vouchers, restrict MRTIP to five per month and require taxi meters

19. Describe how you will measure customer satisfaction, for example, by participating in a countywide rider survey, tracking customer comments, or other means? (max. 255 characters)

Annual survey for shuttle service and taxi program.

- 20. How will you obtain and/or track necessary financial and operating information for program management and reporting?** If private vendors or contractors provide the information, what steps will you take to verify or check the accuracy of the information? If performance data is collected by sampling, what steps will you take to ensure that samples are representative and randomized? *(max. 500 characters)*

Contractors provide monthly updates on ridership information. The taxi providers state the trip cost and the mileage for each rider. The shuttle provider lists any assistants or individuals in wheelchairs that used the service as well as the time of boarding. Staff checks the accuracy of the trip costs and mileage for the trip destinations, and regularly boards the shuttle at unscheduled times.

- 21. During July 1, 2011 through June 30, 2012 (FY 11-12), what amount of Measure B (MB) Paratransit Funds will your agency receive and expend?** Fill in the boxes below.

Note: Interest/Other MB Income includes interest on unspent Measure B balances and other Measure B income, such as grant funds.

FY 10-11 Unspent MB Balance	MB Revenues in FY 11-12	Interest/Other MB Income	MB Expended in FY 11-12	Ending MB Balance
\$96,985.00	\$145,742.17	\$475.00	\$210,623.00	\$32,500.00

- 22. What amount of non-Measure B revenues will your agency receive during FY 11-12?** Fill in the box below if you will receive non-Measure B funds.

Non-Measure B Revenues

- 22A. Describe the specific types of non-Measure B funding your agency will receive.**
(max. 255 characters)

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- 23. Do you intend to apply for federal Section 5310 funds, Alameda CTC gap grant funds, or other grant funds in the next fiscal year?**

☐ Yes
☒ No

- 23A. If yes, describe the types of grant funds for which you intend to apply.**

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24. Do you intend to apply for Minimum Service Level gap grant funding for the next fiscal year?

- ☐ Yes
☒ No

24A. If yes, please fill in the amount you intend to apply for in question 1 and complete question 32.

24B. If no, and your answer to question 3 is no, meaning you will not meet Minimum Service Levels, please explain. (max. 255 characters)

25. How do you plan to use undesignated reserve Measure B funds (FY 10-11 Unspent MB Balance from question 21)? Fill in the boxes below with any operating or capital Measure B reserves.

Operating Reserve <i>(eligible for up to three months of service funds)</i>	Capital Reserve <i>(may be held for up to three years)</i>	Date of Capital Reserve Initiation	Undesignated Funds <i>*(End MB – (operations + capital) = Undesignated)</i>
\$32,500.00			

25A. Describe the use of the undesignated funds below. (max. 255 characters)

26. If applicable, why are the planned expenditures in FY 11-12 more than the amount of Measure B funds the agency expects to receive during FY 11-12? For instance, if your agency faces a funding shortage, will you use reserve Measure B funds from a previous fiscal year(s)? (max. 255 characters)

The City is spending more money on staff time and marketing to initiate and revise the shuttle service, which began in April 2010.

27. What are your FY 11-12 operating expenses by category? Fill in the boxes below. Provide additional information in questions 27A and 27B if you have contract and miscellaneous expenditures.

Labor, Fringe <i>(for recipient staff)</i>	Admin. Costs <i>(for printing, postage, supplies, etc.)</i>	Contracts <i>(see 27A below)</i>	Transportation <i>(expenses recipients paid, not included in contracts)</i>
\$42,260.00	\$9,500.00	\$88,000.00	\$0.00
Taxi Reimbursement	Meal Delivery	EBP Ticket Purchase	Miscellaneous <i>(see 27B below)</i>
\$50,000.00	\$0.00	\$0.00	\$20,863.00
Total Operating Expenses <i>(sum of all eight categories)</i>			
\$210,623.00			

27A. List the contracted firms below, and if more than one, list the amount your agency will pay to each. (max. 255 characters)

MV - \$78,000
Michael's Coach/A-Paratransit \$10,000

27B. Describe any miscellaneous expenditures below; include the amounts for each item. (max. 255 characters)

Scholarship program, benches and bus stop signs for bus stops and marketing

28. Of these total expenditures, what amount is allocated for the following?
Fill in the boxes below.

Management <i>(oversight, planning, budgeting, etc.)</i>	Customer Service and Outreach Activities	Trip Provision <i>(direct or contracted taxis, vans, shuttles, etc.)</i>
\$27,410.00	\$39,713.00	\$143,000.00

29. What are your planned Measure B capital expenditures during FY 11-12?
Fill in the box below.

Total Capital Expenditures
\$4,000.00

29A. Describe planned capital expenditures, such as purchase of vehicles or durable equipment, below. (max. 255 characters)

The purchase of five benches for approximately \$4,000 and bus stop signs for \$500.

30. What are your anticipated net revenues? The box below autopopulates based on previous entries.

Net Revenues
\$32,579.17

31. Please provide information on the Governing Body Resolution to authorize submittal of the plan.

☐ Copy attached

☒ Pending action on: 05/03/11 (indicated date this item is scheduled for action)

32. If requesting Minimum Service Level (MSL) funding, please complete the table and questions 32A through 32E below.

MSL Your Program Anticipates Not Meeting <i>(see appendix)</i>	Describe How Your Program Falls Below This MSL	MB Funds Requested to Meet This MSL

32A. Please explain any community-specific issues that impact your ability to not meet MSLs.
Please describe below. (max. 500 characters)

- 32B. Have you explored and documented other transportation options for seniors and people with disabilities provided by nonprofit organizations in your community that might also close this service gap. Please describe below. (max. 500 characters)**

- 32C. If MSL gap funding is not available to meet this need, are other funding sources available to meet this need? Please describe below. (max. 255 characters)**

- 32D. If other funding is not available, how will you prioritize which MSLs to cut? (max. 255 characters)**

- 32E. Does your program provide ADA-equivalent service to those awaiting certification, outside the ADA service corridor or needing transportation outside of ADA-available times in your jurisdiction? (max. 255 characters)**

Not applicable.

Program Plan Application Appendix

PAPCO-approved Minimum Service Levels

	Minimum Service Level (MSL)	A Program <i>Exceeds</i> this MSL if ...
1.	Regarding who programs serve: <ul style="list-style-type: none"> • People 18 and above with disabilities who are unable to use fixed route services • Seniors 80 and above without proof of a disability 	<ul style="list-style-type: none"> • It serves minors with disabilities. • It serves seniors under 80 without proof of disability.
2.	Regarding the type of service programs provide: <ul style="list-style-type: none"> • Accessible individual demand-responsive service 	<ul style="list-style-type: none"> • It offers additional services for participants, such as group trips or meal delivery.
3.	Regarding the time and days service is provided: <ul style="list-style-type: none"> • At least five days per week between the hours of 8 a.m. and 5 p.m. (excluding holidays) 	<ul style="list-style-type: none"> • It offers service more than five days a week. • Its service hours begin before 8 a.m. and/or extend after 5 p.m.
4.	Regarding the service area of a program: <ul style="list-style-type: none"> • Residents using this program are able to meet life needs, including but not limited to travel to major medical facilities, full service grocery stores and other basic necessities, if ADA services, or coordination between base programs are unable to provide these trips. 	<ul style="list-style-type: none"> • It provides trips to locations beyond those which residents would travel to fulfill life needs, such as recreational trips outside city boundaries.
5.	Regarding fares: <ul style="list-style-type: none"> • Fares should be comparable to East Bay Paratransit and equated to distance for van/sedan trips • Fares for Taxi trips should not exceed 50 percent of the total cost of the trip. 	<ul style="list-style-type: none"> • Riders pay less than they would for a comparable trip on East Bay Paratransit for a van/sedan trip. • Riders pay less than 50 percent of the total cost of the taxi trip.
6.	Regarding interim service for individuals applying for or awaiting ADA certification: <ul style="list-style-type: none"> • Interim service should be provided within three business days on receipt of application. • Interim service should be provided at the request of a health care provider or ADA provider. 	<ul style="list-style-type: none"> • It provides interim service in less than three business days.
7.	Regarding reservations: <ul style="list-style-type: none"> • Programs should accept reservations between the hours of 8 a.m. and 5 p.m. Monday through Friday. 	<ul style="list-style-type: none"> • It accepts reservations before 8 a.m. and/or after 5 p.m. • It accepts reservations on weekends.

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012
Table 1 Attachment: Summary of Planned Projects

Note: Definitions for each drop-down menu appear as Comments (scroll over the column title or in the Review mode, choose "Show All Comments"). The document is set up to print Comments at the end.

Project Description								Status	Deliverables				Planned Expenditures			
Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H	Column I	Column J	Column K	Column L	Column M	Column N	Column O	Column P	Column Q
Project Category	Project Phase	Project Type	Project Name	Project Description (including type of vehicle, accessibility status, and eligibility requirements)	Project Service Area, Days/Hours of Service, and Trip Limits per Year per Rider	Rider Fares	Provider Average Cost per Trip	Project Status (at the end of June 2012)	Quantity Planned Completed by June 2012	Trip Type Description (other details about trip service)	Planned Number of Trips Funded by Measure B FY 11-12*	Miscellaneous (other details about trip or program)	Measure B Paratransit Pass-through Expenditures FY 11-12	Other Measure B Funds to Be Expended on Project in	Other Non-Measure B Funds to Be Expended on Project in	Total Project Cost in FY 11-12 (columns N+O+P=Q)
Drop-down Menu	Drop-down Menu	Drop-down Menu						Drop-down	(total number of							
Senior and Disabled Services	Operations	Group Trips	City of Alameda Mastick Senior Center Group Trips	Group trips to a variety of locations around the Bay Area	20 trips per year	varies	\$500 per bus trip; \$12 per rider	Continuing or Ongoing	800	Other (describe in Column K)	800	people served	\$10,000.00			\$10,000.00
Senior and Disabled Services	Operations	Individual Demand-response Trips	Premium Taxi Service	50 percent discounted taxi rides for eligible residents	Alameda County, 24 hrs & 7 days/wk, 10 per quarter	50% discount of taxi rides	\$5 per trip	Continuing or Ongoing	2,000	Taxi Trips	2,000		\$10,000.00			\$10,000.00
Senior and Disabled Services	Operations	Individual Demand-response Trips	Medical Return Trip Improvement Program	For EBP-certified, taxi trip home from medical appointment	Alameda County, 24 hrs & 7 days/wk, 5 per month	free for rider	\$20 per trip	Continuing or Ongoing	2,000	Taxi Trips	2,000		\$40,000.00			\$40,000.00
Senior and Disabled Services	Operations	Shuttle or Fixed-route Trips	City of Alameda Paratransit Shuttle Trips	Fixed-route shuttle service three days per week; free for users	City of Alameda; three loops (West on Tues, Central on Thurs and East on Weds), 9 a.m. to 4 p.m.	free for rider	\$10 per trip	Continuing or Ongoing	7,500	Same-day Trips	7,500		\$78,000.00			\$78,000.00
Senior and Disabled Services	Operations	Individual Demand-response Trips	Scholarship Program	Provides subsidized EBP ticket booklets	up to two free EBP ticket books each year when two are purchased	50% discount of ticket books	\$80 subsidy per rider	Continuing or Ongoing	12	Other (describe in Column K)	12	people served	\$1,000.00			\$1,000.00
Senior and Disabled Services	Construction (includes PS&E)	Capital Purchase	Benches for the shuttle bus stops; additional bus stop signs/poles	Enables frail and individuals w/disabilities to wait easily at shuttle stop	shuttle stops			Initiated in FY 09/10	10	Other (describe in Column K)	10	benches; bus stop signs	\$4,500.00			\$4,500.00
Senior and Disabled Services	Operations	Management	Other Professional Svcs	Staff time to oversee the Paratransit program	Provides quality control to ensure money is well spent			Continuing or Ongoing		Other (describe in Column K)		staff time	\$25,000.00			\$25,000.00
Senior and Disabled Services	Operations	Customer Service and Outreach	Postage	postage for mailings	Helps spread the word about the program			Continuing or Ongoing		Other (describe in Column K)		postage	\$2,000.00			\$2,000.00
Senior and Disabled Services	Operations	Customer Service and Outreach	Part-time staff	Staff time to provide outreach for program and day-to-day contact with consumers	Provides vouchers, schedules, materials and other information about the program; provides a way for the other staff to better understand the needs of the consumers			Continuing or Ongoing		Other (describe in Column K)		staff time	\$14,850.00			\$14,850.00
Senior and Disabled Services	Operations	Customer Service and Outreach	Supplies	general office supplies and forms printing	Provides schedules and other outreach materials			Continuing or Ongoing		Other (describe in Column K)		office supplies and printing	\$7,500.00			\$7,500.00
Senior and Disabled Services	Operations	Customer Service and Outreach	Promotions and advertising	Created ads and displayed them in newspapers	Helps spread the word about the program			Continuing or Ongoing		Other (describe in Column K)		ads, shuttle schedules, bus wrap, brochures and web site	\$15,363.00			\$15,363.00
Senior and Disabled Services	Operations	Management	Fixed Charges	Provides workers compensation and risk management	Provides the needed insurance for operations			Continuing or Ongoing		Other (describe in Column K)		insurance	\$2,410.00			\$2,410.00
																\$0.00
								TOTALS:	12,322		12,322		\$210,623.00	\$0.00	\$0.00	\$210,623.00

*Percentage of total dollars spent to Measure B funds is relative to percentage of trips provided.
(Total \$/Measure B \$) approx. = (Total trips provided/Measure B-funded trips provided).

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012
Table 1 Attachment: Summary of Planned Projects

Cell: A5
Comment: Project Category: Disabled Services: Services primarily created for mobility for people with disabilities. Meals on Wheels: Delivery of meals. Senior & Disabled Services: Transportation services for seniors and people with disabilities. Senior Services: Services primarily created for senior mobility. Other: Use Other if none of the above apply, and define other by selecting Project Type (Column C) and providing Project Description (Column E).
Cell: B5
Comment: Project Phase: Construction (includes PS&E): Construction of a new capital project, including development of the preliminary engineering and construction documents: the plans, specifications, and estimates. Environmental: Preparation of environmental documents, such as those related to the California Environmental Quality Act (CEQA) or the National Environmental Policy Act (NEPA). Maintenance: Maintenance, repairs, renovation, or upgrade of existing facility or infrastructure. Operations: Operations such as transit, which may include routine maintenance and procurement, or lease of vehicles/equipment. Project Completion/Closeout: Inspection/project acceptance, final invoicing, final reporting, and processes for closing out project. Scoping, Feasibility, Planning: Early capital project phases, such as project scoping, feasibility studies, and planning. Other: Use if none of the above apply, and define the project phase by selecting Project Type (Column C) and describe the phase under Project Description (Column E).
Cell: C5
Comment: Project Type: Capital Purchase: Purchase of equipment, vehicles, or facilities. Customer Service and Outreach: Staffing and benefits for customer service as well as costs associated with marketing, education, outreach, and promotional campaigns and programs. EBP Ticket Purchase: Amounts paid to East Bay Paratransit for tickets plus associated costs, for example, distribution. Group Trips: One-way passenger trips considered group trips. Includes vehicle operation and contracts. See Individual Demand-response Trips. Individual Demand-response Trips: Taxi service, door-to-door trips, van trips, etc. Includes actual operation cost and contracts for vehicle operation, scheduling, dispatching, vehicle maintenance, supervision, and fare collection (including ticket or scrip printing and sales) for the purpose of carrying passengers. Management: Staffing and benefits to manage programs, projects, and services. Meal Delivery: Costs associated with vehicle operation, scheduling, dispatching, vehicle maintenance, and supervision for the purpose of delivering meals, whether provided in-house, through contracts, via taxicab, or by grantees. Shuttle or Fixed-route Trips: Shuttle service or fixed-route bus service, for example. Includes vehicle operation and contracts. See Individual Demand-response Trips. Other: Use if none of the above apply. Describe the Type under Project Description (Column E).
Cell: I5
Comment: Project Status: Choose project status on June 30, 2012: Planning in FY 11-12, Initiated in FY 11-12, Continuing or Ongoing, or Closed Out in FY 11-12.
Cell: K5
Comment: Trip Type Description: Lift/ramp Assisted: Trips that include lift or ramp assistance. Taxi Trips: Any type of taxi trip. Same-day Lift/ramp-assisted Trips: Trips that include lift or ramp assistance and are same-day service. Same-day Trips: Same-day service. Other: If Trip Type is not applicable to your program, choose Other and provide a description in Column K.

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012

Table 2 Attachment: Vehicle Fleet

Instructions: Please complete table below. If necessary, please contact your contractors to obtain the information.

[illegible]

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

Part I. General Program Information

- 1. Paratransit Program:** City of San Leandro
- 2. Program Manager/Representative:** Joann Oliver, Louie Despeaux
- 3. Program Plan Review Date and Time:** Apr 29, 11:05am
- 4. Measure B Amount for Base Program Funding:** \$243,066
- 5. Measure B Amount for Minimum Service Level Grant:** \$75,000
- 6. Program Base Services Overview:** Refer to Table 1
- 7. Potential Riders Projected for next Fiscal Year:** 400
- 8. Total Rides Projected to be Provided in next Fiscal Year:** 8,772
- 9. Meal Delivery Program?** ☐ Yes ☒ No
Measure B Funds Allocated to Meal Program: N/A
- 10. Purchasing EBP tickets?** ☐ Yes ☒ No
Total EBP Tickets to be Purchased in Next Fiscal Year: N/A
- 11. Proposed changes for next Fiscal Year?** ☒ Yes ☐ No

Changes: Riders would like the Shuttle to operate later than 3 pm. We plan to expand the operating hours should funds become available.

Part II. General Program Analysis

- 1. Efforts related to Coordination/Mobility Management**
 - FLEX Shuttle has stops at AC Transit and BART providing access to regional transportation.
 - San Leandro uses the universal paratransit application developed through TAC.
 - City of San Leandro and City of Hayward piloted the Hayward-San Leandro Shuttle Connection allowing passengers to transfer to the

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

neighboring city's paratransit service. This service stopped when Hayward stopped their shuttle in order to revamp the service.

- Travel Training is offered at the Community Center.

2. Identified needs/priorities that will not be met by the Program

We included questions about taxi vouchers in our survey. 42% of survey respondents said that they need same day transportation. 55% said that they would use a taxi voucher service if it was available.

3. Status of Jurisdiction's PAPCO appointees/vacancies: Refer to Cover Memo

4. Subcommittee comments from last year's program plan review

- Please put an emergency plan in place.
- Approve of the \$20 registration fee.
- Good program. More action plans should be documented for public.
- The \$20 registration fee is good; good program. Like the shuttle service; some people have even stopped driving cars because of it.
- Consider charging a fee for the shuttle to raise funds for medical trips.
- Great need for door-to-door service—could charge a fee.
- San Leandro has been lenient with seniors; perhaps charging a few dollars for the shuttle is necessary.

5. Final recommendation after last year's program plan review

A motion to approve City of San Leandro's plan was made by Harriette Saunders and seconded by Betty Mulholland. The motion carried unanimously.

A motion to approve the staff recommendation on MSL funding (\$75,000 Minimum Service Level Grant for the City of San Leandro) was made by Jonah Markowitz and seconded by Betty Mulholland. The motion was carried unanimously.

6. Staff identified questions for current fiscal year (PAPCO members can use these as examples during the question rounds)

- A. How does the opening of your new Senior Center affect your paratransit program?
- B. What are ridership trends for your Medical Trips?

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

7. Financial audit Program Compliance Report performed and compliance opinion given? X Yes _ No

8. Consumer involvement in planning process

Public input for the Annual Paratransit Plan was collected through the Annual Survey and the following meetings:

- February 2011 - Annual Survey of all registered riders
- February 17, 2011 - Senior Commission
- February 22, 2011 - Annual FLEX Workshop - Marina Community Center
- February 24, 2011 - Annual FLEX Workshop - Main Library
- March 17, 2011 - Senior Commission

Part III. Financials

1. Finance Subcommittee Questions: To be provided at meeting

2. Revenue Trends: Refer to Cover Memo

3. Proportion of Measure B Funding: Refer to Cover Memo

Source(s) of other funding (if applicable): \$20/year Annual Registration Fee
for Paratransit Program

4. Fund Reserves and Net Revenues Planned for 2011-2012

Fund balance--undesignated	\$0
Undesignated funds % of planned Meas B rev	0%
Reserve funds--designated for capital	\$0
Capital funds reserved < 4 years	N/A
Reserve funds--designated for operations	\$4,267
Reserve funds = or < than 3 months M B rev	Y
Total Fund Reserves going into FY	\$38,702
Planned Net Revenue at end of FY	\$4,267

Part IV. Minimum Service Level Grants

1. Applying for an MSL Grant? X Yes _ No

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

Amount of Request: \$75,000

- 2. Which other programs have applied for an MSL Grant and for how much?**
Oakland – \$25,000
- 3. MSL Gap(s) needing to be closed and application answers:** Refer to Application PDF
- 4. Additional questions/comments about application for MSL Grant?**
 - A. Even though it's a few years off, do you expect the Kaiser opening in San Leandro to affect demand for Medical Trips?

Part V. Preliminary Recommendation (Committee Member Notes)

With respect to this application, I want to send the following recommendation to the full PAPCO (*please check one*):

- ☐ Recommend **approval of base funding without MSL grant** (MSL Grant not requested or not recommended).
- ☐ Recommend **approval of base funding with MSL grant of \$_____**.
- ☐ Recommend **conditional approval with recommended actions** (for example, recommend funds continue to flow but place program on watch list and require quarterly reports to PAPCO, hold back funds until program updates plan or budget, recommend partial funding until specified actions are taken).

- ☐ Don't recommend approval.

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**



Annual Paratransit Program Application for Measure B Funding

Fiscal Year 2011-2012 (July 1, 2011 through June 30, 2012)

Note: In July 2010, the Alameda County Transportation Improvement Authority (ACTIA) merged with the Alameda County Congestion Management Agency to become the Alameda County Transportation Commission (Alameda CTC). Agencies and jurisdictions that have paratransit pass-through fund agreements with ACTIA must continue to submit annual paratransit program application forms. See below for submittal instructions.

This document includes the PDF application form and instructions for submittal.

Requirements and Instructions

Measure B paratransit fund recipients are required to submit to the Alameda CTC one electronic version of two documents for the annual program application submittal.

Paratransit Program Application Deadline: April 8, 2011

The Annual Paratransit Program Application submittal includes a PDF and Table 1 and Table 2 Attachments for each program.

1. Paratransit Program Application (PDF)
2. Paratransit Program Application Table 1 and Table 2 Attachments (one Excel workbook)

Electronic submission: Save the online PDF form to your hard drive with your agency name and date in the file name (e.g., Albany_FY11-12_Paratransit_Program_Application_040611.pdf). You can start work on the PDF and finish it later; simply save it to your hard drive. Also, complete the Table 1 and Table 2 workbook and include your agency name and date in the file name. Submit one copy of both the PDF and Table 1 and Table 2 Attachments via email by April 8, 2011. Send it to narmenta@alamedactc.org. If you have questions, you can reach Naomi Armenta via email or at (510) 208-7469.

Paratransit Program Application

Due by April 8, 2011

Agency Name:	City of San Leandro
Date Submitted:	04/11/11
Name and Title of Submitter:	Joann Oliver, Recreation and Human Services Manager
Secondary Agency Contact Name:	Louie Despeaux, Senior Services Supervisor
Phone Number:	510-577-3463
Fax:	510-577-3470
E-mail:	joliver@sanleandro.org

Clearly label additional attachments as needed.

1. **What amount of funds are you applying for?** Fill in the boxes below. Note: Mandated and non-mandated funds should match the projects on the website at:
[http://www.actia2022.com/files/managed/Document/1900/RevDist%20FY11 12%20projection.pdf](http://www.actia2022.com/files/managed/Document/1900/RevDist%20FY11%2012%20projection.pdf)

Mandated Amount (AC Transit and BART only)	Non-mandated Amount	Minimum Service Level Gap Grant Amount
\$243,065.84		\$75,000.00

2. **What type of paratransit projects and programs will Measure B fund?** To answer this question, complete the Table 1 Attachment (Table 1 tab) in the Excel workbook. Describe the projects and/or programs your agency plans to implement with Measure B funding during fiscal year 2011-2012 (FY 11-12).

Continue to the next page of this application to answer question 2A.

2A. Please provide a short narrative description for each service component listed in question 2 and describe any planned changes. (max. 1,300 characters)

Shuttle Service

The Shuttle service consists of a series of shuttle stops throughout the City at key locations such as residential facilities, shopping, transit and community centers. Eligible walk-on passengers can access the shuttle at any shuttle stop. Deviated stops that are close to the shuttle route can be accommodated for pick-up and drop-off. Passengers can also flag the vehicle to stop at any safe location along the route.

Service Area – City of San Leandro

Days of Operation - Monday - Friday

Hours of Operation – 9:00 am – 3:00 pm

Eligibility – Disabled Adults (18+) and Seniors 60+

Reservations – None required, walk-on passengers

Fare - Free

Wheelchair Accessibility - (2) Wheelchair Accessible Shuttle Buses

Medical Transportation/Demand Response – MSL Grant

Reservation based service providing trips for medical purposes within Alameda County.

Service Area – Alameda County

Days of Operation - Monday - Friday

Hours of Operation – 8:00 am – 5:00 pm

Eligibility – Disabled Adults (18+) and Seniors 75+

Reservations - Advance reservation required

Fare - \$4.00/10 Miles

Wheelchair Accessibility - (1) Wheelchair Accessible Shuttle Bus

Interim Service - Provided for eligible individuals who are not yet enrolled with East Bay Paratransit.

3. Is your program currently meeting Minimum Service Levels? See the appendix.

☐ Yes

☒ No

☐ Not Applicable (*Americans with Disabilities Act (ADA) mandated provider*)

3A. If no, which ones are you not meeting and how?

(max. 255 characters)

PROGRAM SERVICE AREA - The Shuttle operates within the city limits. Residents must travel throughout Alameda County for medical transportation.

INTERIM SERVICE FOR INDIV. APPLYING FOR OR AWAITING ADA CERT. - Most interim trips are for medical purposes.

4. How many potential riders do you estimate will use this service this coming fiscal year?

Fill in the box below.

**Potential Riders
in FY 11-12**

400

5. Please provide details regarding your vehicle fleet. To answer this question, complete the Table 2 Attachment (Table 2 tab) in the Excel workbook.

6. Does your program provide meal delivery?

☐ Yes

☒ No

6A. If faced with revenue shortfalls, how do you balance meal delivery with trip requests?
(max. 255 characters)

NA

7. Describe your driver training program. (max. 500 characters)

The city believes that well trained, friendly, customer service oriented drivers are key to the success of the paratransit program. Training includes, but is not limited to, customer service, City paratransit service policies and procedures, first aid, vehicle equipment, incident reporting, emergency procedures, sensitivity training, use of wheelchair lifts and tie-down procedures. Drivers are required eight hours minimum National Safety Council Defensive Driving course or equivalent.

8. Describe your policies concerning timely pick-ups or drop-offs. Include what window your program allows, if there is a standard for the percentage of pick-ups or drop-offs that must occur within the window, the policy concerning early pick-ups, and whether there is a maximum amount of lateness after which you count a provider no-show or missed trip.
(max. 500 characters)

Shuttle performance is determined by the departure and arrival time of each bus at the start/finish point. Each bus must depart no later than five (5) minutes after the scheduled depart time for each run, and arrive back at the Shuttle finish point no later than five minutes after the scheduled arrival time for each run. Required minimum on-time performance is 97 percent of all scheduled runs. Medical transportation has a 20 minute window and 97 percent required on-time performance.

9. Describe your policies concerning the maximum time a rider may be on a vehicle. Indicate if there is a maximum time, and if there is a standard for the percentage of total trips that must fall within this maximum time. (max. 255 characters)

To date, it has not been necessary to set a maximum ride time limit. Average ride time for medical service is currently 18 minutes. One full loop of the Shuttle is 49 minutes on the North Route and 56 minutes on the South Route.

- 10. What are your policies for reserving trips?** What are your policies for reserving individual trips (including subscriptions/standing orders or same-day trips) and for reserving group/program trips? What advance notice do you require or allow? Are there limits on availability? *(max. 500 characters)*

Individual trip reservation is 5 days in advance, no later than 24 hours.
Standing orders are permitted for interim service (ice.. dialysis) while individual is waiting for EBP certification.
Same day trips are provided if space is available.

- 11. How far in advance is a rider required to cancel a trip before you count the trip as a no show?** Describe these for each type of trip below. What is your policy concerning riders with repeated no-shows or late cancellations? Please describe your policy for subscriptions/standing orders, same-day trips, or group/program trips as applicable. *(max. 500 characters)*

We recognize that emergencies arise, but riders who do not cancel their trip at least 24 hours in advance will be considered a no show. Riders who have three no shows within a three month period may be suspended from service. Prior to suspension riders are verbally counseled and written warnings are issued. Every effort is made to educate and assist our riders and, to date, we have not found it necessary to suspend service to any of our riders.

- 12. What is the maximum and average time between receiving an application and enrolling an applicant in the program?** *(max. 255 characters)*

Average Enrollment Time - 7 working days
Maximum Enrollment Time - 14 working days

- 13. Is there a waiting list?**

☐ Yes
☒ No

- 13A. If yes, what are the policies that apply to it? How many people are on it? What is the average wait?** Describe your answer in the box below. *(max. 500 characters)*

NA

- 14. Describe your complaint and commendation process.** Describe your process from beginning to end, including instructions you provide to customers for filing complaints or commendations, your documentation procedures, your follow up, and any changes you have made to your program as a result of customer complaints and commendations.
(max. 500 characters)

Complaints are responded to immediately upon receipt. A complaint log is maintained. Complaints are valued by staff because they help us to understand how the service is working and where there are problems that we need to address.

- 15. Describe how you will coordinate services with other Measure B paratransit services and/or mandated ADA paratransit services so that people can make trips throughout Alameda County.** Examples of coordination may include, but are not limited to, reciprocal fare agreements, reciprocal agreements to provide trips into adjoining areas, arrangements for clients to ride on other systems, and transfer arrangements. Attach copies of agreements or memoranda of understanding for coordination if available.
(max. 500 characters)

FLEX Shuttle has stops at AC Transit and BART providing access to regional transportation. San Leandro uses the universal paratransit application developed through TAC. City of San Leandro and City of Hayward piloted the Hayward-San Leandro Shuttle Connection allowing passengers to transfer to the neighboring city's paratransit service. This service stopped when Hayward stopped their shuttle in order to revamp the service. Travel Training is offered at the Community Center.

- 16. Describe planned outreach to ensure that potential users of the services, including coordinated services, learn about them.** (max. 500 characters)

The Flex Shuttle Service is advertised on the City's web site and community access channel. Information is included in the Recreation Guide which is distributed to every household three times per year. FLEX Information is available at all City facilities and staff routinely conduct outreach off site by visiting senior living facilities, neighborhood meetings, etc. At the same time we provide information about the San Leandro - Hayward Shuttle Connection and EBP.

- 17. Describe your planning process.** List all activities undertaken in connection with this plan, including consumer or public meetings; meetings with other agencies; presentations to boards, commissions, or committees; and provide general dates for these activities.
(see questions 17A through 17D that follow; max. 500 characters)

Public input for the Annual Paratransit Plan was collected through the Annual Survey and the following meetings:
February 2011 - Annual Survey of all registered riders
February 17, 2011 - Senior Commission
February 22, 2011 - Annual FLEX Workshop - Marina Community Center
February 24, 2011 - Annual FLEX Workshop - Main Library
March 17, 2011 - Senior Commission

17A. Has this plan been reviewed by a local paratransit advisory committee?

- ☒ Yes
☐ No

17B. If yes, list the committee name and date of the meeting.

Senior Commission - March 17, 2011. The application was not completed, but the planned service

17C. Describe any surveys or analysis conducted and staff reports. (max. 255 characters)

In Feb. 2011 we conducted the annual survey, held two workshops and met with the paratransit advisory body. Since we made significant changes last year, our goal was to get input on the revamped service and identify any needed "tweaks" to the service.

17D. Describe how the planning process is connected to the service plan: How do the planned services correspond to the results of the planning process? (max. 255 characters)

There are no service changes planned for 2011-12. Even with the significant changes that were implemented in 2010-11, riders indicated that they are satisfied. 73% of the respondents rated the service Fair - Good. (2% Poor, 25% Don't Know)

18. If proposing service changes, what identified needs or priorities will the proposed changes meet? What needs or priorities will the proposed service changes still not meet? (max. 500 characters)

Riders would like the Shuttle to operate later than 3 pm. We plan to expand the operating hours should funds become available.

Based on Central County Mobility Workshop input, CTC staff is considering expansion of the South County gap funded taxi voucher program into Central County. We included questions about taxi vouchers in our survey. 42% of survey respondents said that they need same day transportation. 55% said that they would use a taxi voucher service if it was available.

19. Describe how you will measure customer satisfaction, for example, by participating in a countywide rider survey, tracking customer comments, or other means? (max. 255 characters)

Surveys, Customer Comment Cards, Complaint Log, Feedback gathered through workshops and other outreach efforts, Volunteer "Secret" Rider

- 20. How will you obtain and/or track necessary financial and operating information for program management and reporting?** If private vendors or contractors provide the information, what steps will you take to verify or check the accuracy of the information? If performance data is collected by sampling, what steps will you take to ensure that samples are representative and randomized? *(max. 500 characters)*

We hold quarterly performance review meetings with the vendor. The vendor must make all records available upon request.

- 21. During July 1, 2011 through June 30, 2012 (FY 11-12), what amount of Measure B (MB) Paratransit Funds will your agency receive and expend?** Fill in the boxes below.

Note: Interest/Other MB Income includes interest on unspent Measure B balances and other Measure B income, such as grant funds.

FY 10-11 Unspent MB Balance	MB Revenues in FY 11-12	Interest/Other MB Income	MB Expended in FY 11-12	Ending MB Balance
\$38,702.00	\$243,065.00		\$360,000.00	\$4,267.00

- 22. What amount of non-Measure B revenues will your agency receive during FY 11-12?** Fill in the box below if you will receive non-Measure B funds.

Non-Measure B Revenues
\$7,500.00

- 22A. Describe the specific types of non-Measure B funding your agency will receive.**
(max. 255 characters)

\$20/year Annual Registration Fee for Paratransit Program

- 23. Do you intend to apply for federal Section 5310 funds, Alameda CTC gap grant funds, or other grant funds in the next fiscal year?**

☐ Yes
☒ No

- 23A. If yes, describe the types of grant funds for which you intend to apply.**

NA

24. Do you intend to apply for Minimum Service Level gap grant funding for the next fiscal year?

- ☒ Yes
☐ No

24A. If yes, please fill in the amount you intend to apply for in question 1 and complete question 32.

24B. If no, and your answer to question 3 is no, meaning you will not meet Minimum Service Levels, please explain. (max. 255 characters)

NA

25. How do you plan to use undesignated reserve Measure B funds (FY 10-11 Unspent MB Balance from question 21)? Fill in the boxes below with any operating or capital Measure B reserves.

Operating Reserve <i>(eligible for up to three months of service funds)</i>	Capital Reserve <i>(may be held for up to three years)</i>	Date of Capital Reserve Initiation	Undesignated Funds <i>*(End MB – (operations + capital) = Undesignated)</i>
\$4,267.00			\$4,267.00

25A. Describe the use of the undesignated funds below. (max. 255 characters)

If the 2010-11 Ending Balance exceeds projections and is sufficient, we will add one hour service per day to the FLEX Shuttle.

26. If applicable, why are the planned expenditures in FY 11-12 more than the amount of Measure B funds the agency expects to receive during FY 11-12? For instance, if your agency faces a funding shortage, will you use reserve Measure B funds from a previous fiscal year(s)? (max. 255 characters)

NA

27. What are your FY 11-12 operating expenses by category? Fill in the boxes below. Provide additional information in questions 27A and 27B if you have contract and miscellaneous expenditures.

Labor, Fringe <i>(for recipient staff)</i>	Admin. Costs <i>(for printing, postage, supplies, etc.)</i>	Contracts <i>(see 27A below)</i>	Transportation <i>(expenses recipients paid, not included in contracts)</i>
\$67,000.00	\$10,000.00	\$208,000.00	
Taxi Reimbursement	Meal Delivery	EBP Ticket Purchase	Miscellaneous <i>(see 27B below)</i>
			\$75,000.00
Total Operating Expenses <i>(sum of all eight categories)</i>			
\$360,000.00			

27A. List the contracted firms below, and if more than one, list the amount your agency will pay to each. *(max. 255 characters)*

We will contract for the shuttle and medical transportation. We are currently doing an RFP and do not have an approved contract for 2011-12 at this time. The budget is based on estimated rates.

27B. Describe any miscellaneous expenditures below; include the amounts for each item. *(max. 255 characters)*

\$75,000 - Medical Transportation (MSL Grant)

28. Of these total expenditures, what amount is allocated for the following?
Fill in the boxes below.

Management <i>(oversight, planning, budgeting, etc.)</i>	Customer Service and Outreach Activities	Trip Provision <i>(direct or contracted taxis, vans, shuttles, etc.)</i>
\$51,300.00	\$25,700.00	\$283,000.00

29. What are your planned Measure B capital expenditures during FY 11-12?
Fill in the box below.

Total Capital Expenditures
\$0.00

29A. Describe planned capital expenditures, such as purchase of vehicles or durable equipment, below. (max. 255 characters)

NA

30. What are your anticipated net revenues? The box below autopopulates based on previous entries.

Net Revenues
\$4,267.00

31. Please provide information on the Governing Body Resolution to authorize submittal of the plan.

- ☐ Copy attached
☒ Pending action on: 06/06/11 (indicated date this item is scheduled for action)

32. If requesting Minimum Service Level (MSL) funding, please complete the table and questions 32A through 32E below.

MSL Your Program Anticipates Not Meeting <i>(see appendix)</i>	Describe How Your Program Falls Below This MSL	MB Funds Requested to Meet This MSL
Program Service Area	The FLEX Shuttle operates within the City limits. Medical trips in Alameda County.	\$75,000.00
Interim Service	Interim service is primarily requested for medical transportation.	

32A. Please explain any community-specific issues that impact your ability to not meet MSLs.
Please describe below. (max. 500 characters)

San Leandro has a wide range of services and amenities that allow residents to meet most life needs within the City limits, with the exception of medical care. The Shuttle goes to San Leandro Hospital and the route was modified to go by several medical offices. However, riders must travel throughout Alameda County to meet their medical needs.

32B. Have you explored and documented other transportation options for seniors and people with disabilities provided by nonprofit organizations in your community that might also close this service gap. Please describe below. (max. 500 characters)

Options include family, friends, taxi, AC Transit/BART, EBP and residential facilities that provide transportation. Many of our riders do not have family or friends that can take them to appointments. Alzheimer's Services and Stepping Stones provide transportation to their clients, but non-profit resources are very limited. Some residential facilities provide transportation, but most do not. Many of our riders are not well enough to use public transportation and cannot afford a taxi.

32C. If MSL gap funding is not available to meet this need, are other funding sources available to meet this need? Please describe below. (max. 255 characters)

We would continue to seek other funding. In light of current City budget constraints it is not possible for the City to subsidize this service.

32D. If other funding is not available, how will you prioritize which MSLs to cut? (max. 255 characters)

Should funding not be available, we would eliminate the medical transportation service and continue to operate the FLEX Shuttle.

32E. Does your program provide ADA-equivalent service to those awaiting certification, outside the ADA service corridor or needing transportation outside of ADA-available times in your jurisdiction? (max. 255 characters)

The City Paratransit Program serves all of the incorporated City of San Leandro. East Bay Paratransit provides service to all parts of San Leandro.

Program Plan Application Appendix

PAPCO-approved Minimum Service Levels

	Minimum Service Level (MSL)	A Program <i>Exceeds</i> this MSL if ...
1.	Regarding who programs serve: <ul style="list-style-type: none"> • People 18 and above with disabilities who are unable to use fixed route services • Seniors 80 and above without proof of a disability 	<ul style="list-style-type: none"> • It serves minors with disabilities. • It serves seniors under 80 without proof of disability.
2.	Regarding the type of service programs provide: <ul style="list-style-type: none"> • Accessible individual demand-responsive service 	<ul style="list-style-type: none"> • It offers additional services for participants, such as group trips or meal delivery.
3.	Regarding the time and days service is provided: <ul style="list-style-type: none"> • At least five days per week between the hours of 8 a.m. and 5 p.m. (excluding holidays) 	<ul style="list-style-type: none"> • It offers service more than five days a week. • Its service hours begin before 8 a.m. and/or extend after 5 p.m.
4.	Regarding the service area of a program: <ul style="list-style-type: none"> • Residents using this program are able to meet life needs, including but not limited to travel to major medical facilities, full service grocery stores and other basic necessities, if ADA services, or coordination between base programs are unable to provide these trips. 	<ul style="list-style-type: none"> • It provides trips to locations beyond those which residents would travel to fulfill life needs, such as recreational trips outside city boundaries.
5.	Regarding fares: <ul style="list-style-type: none"> • Fares should be comparable to East Bay Paratransit and equated to distance for van/sedan trips • Fares for Taxi trips should not exceed 50 percent of the total cost of the trip. 	<ul style="list-style-type: none"> • Riders pay less than they would for a comparable trip on East Bay Paratransit for a van/sedan trip. • Riders pay less than 50 percent of the total cost of the taxi trip.
6.	Regarding interim service for individuals applying for or awaiting ADA certification: <ul style="list-style-type: none"> • Interim service should be provided within three business days on receipt of application. • Interim service should be provided at the request of a health care provider or ADA provider. 	<ul style="list-style-type: none"> • It provides interim service in less than three business days.
7.	Regarding reservations: <ul style="list-style-type: none"> • Programs should accept reservations between the hours of 8 a.m. and 5 p.m. Monday through Friday. 	<ul style="list-style-type: none"> • It accepts reservations before 8 a.m. and/or after 5 p.m. • It accepts reservations on weekends.

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012
Table 1 Attachment: Summary of Planned Projects

Note: Definitions for each drop-down menu appear as Comments (scroll over the column title or in the Review mode, choose "Show All Comments"). The document is set up to print Comments at the end.

[illegible]

*Percentage of total dollars spent to Measure B funds is relative to percentage of trips provided.
(Total \$/Measure B \$) approx. = (Total trips provided/Measure B-funded trips provided).

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012
Table 1 Attachment: Summary of Planned Projects

Cell: A5

Comment: Project Category:

- Disabled Services: Services primarily created for mobility for people with disabilities.
- Meals on Wheels: Delivery of meals.
- Senior & Disabled Services: Transportation services for seniors and people with disabilities.
- Senior Services: Services primarily created for senior mobility.
- Other: Use Other if none of the above apply, and define other by selecting Project Type (Column C) and providing Project Description (Column E).

Cell: B5

Comment: Project Phase:

- Construction (includes PS&E): Construction of a new capital project, including development of the preliminary engineering and construction documents: the plans, specifications, and estimates.
- Environmental: Preparation of environmental documents, such as those related to the California Environmental Quality Act (CEQA) or the National Environmental Policy Act (NEPA).
- Maintenance: Maintenance, repairs, renovation, or upgrade of existing facility or infrastructure.
- Operations: Operations such as transit, which may include routine maintenance and procurement, or lease of vehicles/equipment.
- Project Completion/Closeout: Inspection/project acceptance, final invoicing, final reporting, and processes for closing out project.
- Scoping, Feasibility, Planning: Early capital project phases, such as project scoping, feasibility studies, and planning.
- Other: Use if none of the above apply, and define the project phase by selecting Project Type (Column C) and describe the phase under Project Description (Column E).

Cell: C5

Comment: Project Type:

- Capital Purchase: Purchase of equipment, vehicles, or facilities.
- Customer Service and Outreach: Staffing and benefits for customer service as well as costs associated with marketing, education, outreach, and promotional campaigns and programs.
- EBP Ticket Purchase: Amounts paid to East Bay Paratransit for tickets plus associated costs, for example, distribution.
- Group Trips: One-way passenger trips considered group trips. Includes vehicle operation and contracts. See Individual Demand-response Trips.
- Individual Demand-response Trips: Taxi service, door-to-door trips, van trips, etc. Includes actual operation cost and contracts for vehicle operation, scheduling, dispatching, vehicle maintenance, supervision, and fare collection (including ticket or scrip printing and sales) for the purpose of carrying passengers.
- Management: Staffing and benefits to manage programs, projects, and services.
- Meal Delivery: Costs associated with vehicle operation, scheduling, dispatching, vehicle maintenance, and supervision for the purpose of delivering meals, whether provided in-house, through contracts, via taxicab, or by grantees.
- Shuttle or Fixed-route Trips: Shuttle service or fixed-route bus service, for example. Includes vehicle operation and contracts. See Individual Demand-response Trips.
- Other: Use if none of the above apply. Describe the Type under Project Description (Column E).

Cell: I5

Comment: Project Status:

- Choose project status on June 30, 2012: Planning in FY 11-12, Initiated in FY 11-12, Continuing or Ongoing, or Closed Out in FY 11-12.

Cell: K5

Comment: Trip Type Description:

- Lift/ramp Assisted: Trips that include lift or ramp assistance.
- Taxi Trips: Any type of taxi trip.
- Same-day Lift/ramp-assisted Trips: Trips that include lift or ramp assistance and are same-day service.
- Same-day Trips: Same-day service.
- Other: If Trip Type is not applicable to your program, choose Other and provide a description in Column K.

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012

Table 2 Attachment: Vehicle Fleet

Instructions: Please complete table below. If necessary, please contact your contractors to obtain the information.

Vehicle Fleet								
Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H	Column I
				Capacity				
Make	Type of Vehicle(s) (specify bus, large van, minivan, sedan)	Fuel Type	Lift/Ramp Equipment (specify lift, ramp, or none)	Ambulatory	Wheelchair	Number of Vehicles	Owner (specify if contractor)	City that vehicle(s) are garaged in
2008 Chevrolet HD Senator Cutaway Bus	Bus	Gas	Lift	22	7	2	MV Transp., Inc.	Contractor Garage (San Leandro)
2008 Ford Sentinel Bus	Buss	Gas	Lift	8	2	1	MV Transp., Inc.	Contractor Garage (San Leandro)

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

Part I. General Program Information

- 1. Paratransit Program:** City of Oakland
- 2. Program Manager/Representative:** Hakeim McGee
- 3. Program Plan Review Date and Time:** Apr 29, 12:20pm
- 4. Measure B Amount for Base Program Funding:** \$868,385
- 5. Measure B Amount for Minimum Service Level Grant:** \$25,000
- 6. Program Base Services Overview:** Refer to Table 1
- 7. Potential Riders Projected for next Fiscal Year:** 1,175
- 8. Total Rides Projected to be Provided in next Fiscal Year:** 27,200
- 9. Meal Delivery Program?** ☐ Yes ☒ No
Measure B Funds Allocated to Meal Program: N/A
- 10. Purchasing EBP tickets?** ☐ Yes ☒ No
Total EBP Tickets to be Purchased in Next Fiscal Year: N/A
- 11. Proposed changes for next Fiscal Year?** ☐ Yes ☒ No

Changes: ☐

Part II. General Program Analysis

- 1. Efforts related to Coordination/Mobility Management**
Currently, there are no formal coordination agreements in place or planned. However, OPED staff will continue to attend TAC and any coordination meetings held by ACTC or other agencies.
- 2. Identified needs/priorities that will not be met by the Program**
None specified.

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

- 3. Status of Jurisdiction's PAPCO appointees/vacancies:** Refer to Cover Memo
- 4. Subcommittee comments from last year's program plan review**
- I wish you luck since reduced Measure B funding; perhaps you could use Local Streets and Roads funds.
 - Perhaps you could use Local Streets and Roads funds.
 - Good job training people.
 - Hope that you can coordinate with other agencies to keep providing service to seniors and people with disabilities.
 - The program makes a difference and has helped East Bay Paratransit.
 - No negatives (the Local Streets and Roads dollars odds seem slim).
- 5. Final recommendation after last year's program plan review**
A motion to approve City of Oakland's plan was made by Clara Sample and seconded by Sharon Powers. The motion carried unanimously.
A motion to approve the staff recommendation on MSL funding (\$25,000 Minimum Service Level Grant for the City of San Oakland) was made by Jonah Markowitz and seconded by Betty Mulholland. The motion was carried unanimously.
- 6. Staff identified questions for current fiscal year (PAPCO members can use these as examples during the question rounds)**
- A. Please describe how the affiliated grant programs, GRIP and TUGO, intersect with your base program?
 - B. Please describe how your van program is different from other city-based door-to-door transportation programs?
- 7. Financial audit Program Compliance Report performed and compliance opinion given? X Yes _ No**
- 8. Consumer involvement in planning process**
- Regular attendance at the Mayor's Commission on Aging and the Commission on Persons with Disabilities respective meetings.
 - Evaluation of the annual program satisfaction survey responses with our department head and division manager.

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

- A presentation to Mayor's Commission on Persons with Disabilities on November 10, 2010.
- A televised presentation to Mayor's Commission on Aging on December 1, 2010.
- A scheduled televised presentation to the Life Enrichment Committee on May 24, 2011.

Part III. Financials

1. Finance Subcommittee Questions: To be provided at meeting

2. Revenue Trends: Refer to Cover Memo

3. Proportion of Measure B Funding: Refer to Cover Memo
Source(s) of other funding (if applicable): Farebox revenue

4. Fund Reserves and Net Revenues Planned for 2011-2012

Fund balance--undesignated	\$0
Undesignated funds % of planned Meas B rev	0%
Reserve funds--designated for capital	\$0
Capital funds reserved < 4 years	N/A
Reserve funds--designated for operations	\$0
Reserve funds = or < than 3 months M B rev	N/A
Total Fund Reserves going into FY	\$0
Planned Net Revenue at end of FY	\$25,000

Part IV. Minimum Service Level Grants

1. Applying for an MSL Grant? X Yes _ No
Amount of Request: \$25,000

2. Which other programs have applied for an MSL Grant and for how much?
San Leandro – \$75,000

3. MSL Gap(s) needing to be closed and application answers: Refer to Application PDF

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

4. Additional questions/comments about application for MSL Grant?

- A. If you did not receive the MSL grant, how soon would you need to start placing consumers on a waiting list?
- B. You noted that a Gap grant pays for interim service during EBP certification, when do you anticipate that funding to run out? How will that affect future service?

Part V. Preliminary Recommendation (Committee Member Notes)

With respect to this application, I want to send the following recommendation to the full PAPCO (*please check one*):

- ☐ Recommend **approval of base funding without MSL grant** (MSL Grant not requested or not recommended).
- ☐ Recommend **approval of base funding with MSL grant of \$_____**.
- ☐ Recommend **conditional approval with recommended actions** (for example, recommend funds continue to flow but place program on watch list and require quarterly reports to PAPCO, hold back funds until program updates plan or budget, recommend partial funding until specified actions are taken).

- ☐ Don't recommend approval.



Annual Paratransit Program Application for Measure B Funding

Fiscal Year 2011-2012 (July 1, 2011 through June 30, 2012)

Note: In July 2010, the Alameda County Transportation Improvement Authority (ACTIA) merged with the Alameda County Congestion Management Agency to become the Alameda County Transportation Commission (Alameda CTC). Agencies and jurisdictions that have paratransit pass-through fund agreements with ACTIA must continue to submit annual paratransit program application forms. See below for submittal instructions.

This document includes the PDF application form and instructions for submittal.

Requirements and Instructions

Measure B paratransit fund recipients are required to submit to the Alameda CTC one electronic version of two documents for the annual program application submittal.

Paratransit Program Application Deadline: April 8, 2011

The Annual Paratransit Program Application submittal includes a PDF and Table 1 and Table 2 Attachments for each program.

1. Paratransit Program Application (PDF)
2. Paratransit Program Application Table 1 and Table 2 Attachments (one Excel workbook)

Electronic submission: Save the online PDF form to your hard drive with your agency name and date in the file name (e.g., Albany_FY11-12_Paratransit_Program_Application_040611.pdf). You can start work on the PDF and finish it later; simply save it to your hard drive. Also, complete the Table 1 and Table 2 workbook and include your agency name and date in the file name. Submit one copy of both the PDF and Table 1 and Table 2 Attachments via email by April 8, 2011. Send it to narmenta@alamedactc.org. If you have questions, you can reach Naomi Armenta via email or at (510) 208-7469.

Paratransit Program Application

Due by April 8, 2011

Agency Name:	City of Oakland
Date Submitted:	04/08/11
Name and Title of Submitter:	Brendalynn Goodall
Secondary Agency Contact Name:	Hakeim McGee
Phone Number:	510-238-6137
Fax:	510-238-7207
E-mail:	bgoodall@oaklandnet.com

Clearly label additional attachments as needed.

1. **What amount of funds are you applying for?** Fill in the boxes below. Note: Mandated and non-mandated funds should match the projects on the website at:
http://www.actia2022.com/files/managed/Document/1900/RevDist%20FY11_12%20projection.pdf

Mandated Amount (AC Transit and BART only)	Non-mandated Amount	Minimum Service Level Gap Grant Amount
	\$868,384.56	\$25,000.00

2. **What type of paratransit projects and programs will Measure B fund?** To answer this question, complete the Table 1 Attachment (Table 1 tab) in the Excel workbook. Describe the projects and/or programs your agency plans to implement with Measure B funding during fiscal year 2011-2012 (FY 11-12).

Continue to the next page of this application to answer question 2A.

2A. Please provide a short narrative description for each service component listed in question 2 and describe any planned changes. (max. 1,300 characters)

Oakland Paratransit will continue to provide the following subsidized services for Oakland and Piedmont seniors age 70 and over and adult persons with disabilities that limit their ability to use public transit on a regular or limited basis:

- * Taxi scrip transportation for ambulatory and folding wheelchair riders through contracted vendors.
- * Van voucher transportation for non-transferring riders with wheelchairs through contracted vendors.

No planned changes at this time.

3. Is your program currently meeting Minimum Service Levels? See the appendix.

☒ Yes

☐ No

☐ Not Applicable (*Americians with Disabilities Act (ADA) mandated provider*)

3A. If no, which ones are you not meeting and how?

(max. 255 characters)

N/A

4. How many potential riders do you estimate will use this service this coming fiscal year?

Fill in the box below.

**Potential Riders
in FY 11-12**

1,175

5. Please provide details regarding your vehicle fleet. To answer this question, complete the Table 2 Attachment (Table 2 tab) in the Excel workbook.

6. Does your program provide meal delivery?

☐ Yes

☒ No

6A. If faced with revenue shortfalls, how do you balance meal delivery with trip requests?
(max. 255 characters)

N/A

7. Describe your driver training program. (max. 500 characters)

The City Administrator's Office provides taxi training, which includes regulations, map reading, geography, customer courtesy, defensive driving, communications and transporting people with disabilities.

Van drivers receive a more intensive training through their employers in classroom and behind the wheel. The training includes vehicle operation, defensive driving, sensitivity training, CPR, first aid, safe handling of wheelchairs and other needed skills.

8. Describe your policies concerning timely pick-ups or drop-offs. Include what window your program allows, if there is a standard for the percentage of pick-ups or drop-offs that must occur within the window, the policy concerning early pick-ups, and whether there is a maximum amount of lateness after which you count a provider no-show or missed trip.
(max. 500 characters)

Taxi service there is generally on-demand service. During busy times, the expectation is to respond in less than an hour of transport requests. Van service providers are required to adhere to a 15 minute window since these transports tend to be by advance reservation.

If a company has a less than 90% on-time performance, the contract may be terminated. This information is compiled from riders through annual survey responses and complaints.

9. Describe your policies concerning the maximum time a rider may be on a vehicle. Indicate if there is a maximum time, and if there is a standard for the percentage of total trips that must fall within this maximum time. (max. 255 characters)

There is no policy for a standard ride time. Our riders primarily ride individually and are not subjected to multiple stops.

- 10. What are your policies for reserving trips?** What are your policies for reserving individual trips (including subscriptions/standing orders or same-day trips) and for reserving group/program trips? What advance notice do you require or allow? Are there limits on availability? *(max. 500 characters)*

Individual Trip Reservation – Subscriptions (Standing Orders): Subscription trips are available to a limited number of riders for dialysis or cancer treatments. They are scheduled with advance notice.

Individual Trip Reservation – Same Day Trips: Taxi trips are offered on same day demand. Van trips are offered upon vehicle availability.

Group/Program Trips: Service currently not offered.

- 11. How far in advance is a rider required to cancel a trip before you count the trip as a no show?** Describe these for each type of trip below. What is your policy concerning riders with repeated no-shows or late cancellations? Please describe your policy for subscriptions/standing orders, same-day trips, or group/program trips as applicable. *(max. 500 characters)*

Individual Trips– Subscriptions (Standing Orders): OPED recommends that riders call the company to cancel rides at least one hour in advance.

Individual Trips– Same Day Trips: Rarely a no-show because it is generally on demand taxi service. However, a 30 minute call is recommended. One hour for a same day van trip.

Group/Program Trips: Service currently not offered.

- 12. What is the maximum and average time between receiving an application and enrolling an applicant in the program?** *(max. 255 characters)*

Assuming that the applicant has submitted all of the required documentation, the average and maximum processing time is not to exceed 7 business days.

- 13. Is there a waiting list?**

☐ Yes
☒ No

- 13A. If yes, what are the policies that apply to it? How many people are on it? What is the average wait?** Describe your answer in the box below. *(max. 500 characters)*

N/A

- 14. Describe your complaint and commendation process.** Describe your process from beginning to end, including instructions you provide to customers for filing complaints or commendations, your documentation procedures, your follow up, and any changes you have made to your program as a result of customer complaints and commendations.
(max. 500 characters)

Registrants are provided a riders guide that instructs the following:

- Record the date, company, driver's name and vehicle #
- Contact the taxi company directly or report the information to OPED
- OPED will document the information whether it is a complaint or commendation, then communicate with the company and place a follow up status call to the client
- If the report is a serious issue, the complaint is forwarded to the City Administrator's Office for

- 15. Describe how you will coordinate services with other Measure B paratransit services and/or mandated ADA paratransit services so that people can make trips throughout Alameda County.** Examples of coordination may include, but are not limited to, reciprocal fare agreements, reciprocal agreements to provide trips into adjoining areas, arrangements for clients to ride on other systems, and transfer arrangements. Attach copies of agreements or memoranda of understanding for coordination if available.
(max. 500 characters)

Currently, there are no formal coordination agreements in place or planned. However, OPED staff will continue to attend TAC and any coordination meetings held by ACTC or other agencies.

- 16. Describe planned outreach to ensure that potential users of the services, including coordinated services, learn about them.** (max. 500 characters)

OPED is listed in printed materials distributed by the City including:

- Multi-language brochures distributed at senior centers, community information fairs, etc.
- Departmental brochure with description and inserts.
- Departmental web page.

Presentations at:

- Senior residences

- 17. Describe your planning process.** List all activities undertaken in connection with this plan, including consumer or public meetings; meetings with other agencies; presentations to boards, commissions, or committees; and provide general dates for these activities.
(see questions 17A through 17D that follow; max. 500 characters)

- Regular attendance at the Mayor's Commission on Aging and the Commission on Persons with Disabilities respective meetings.
- Evaluation of the annual program satisfaction survey responses with our department head and division manager.
- A presentation to Mayor's Commission on Persons with Disabilities on November 10, 2010.
- A televised presentation to Mayor's Commission on Aging on December 1, 2010.
- A scheduled televised presentation to the Life Enrichment Committee on May 24, 2011.

17A. Has this plan been reviewed by a local paratransit advisory committee?

- ☒ Yes
☐ No

17B. If yes, list the committee name and date of the meeting.

Scheduled for May 24, 2011 - Life Enrichment Committee Meeting

17C. Describe any surveys or analysis conducted and staff reports. (max. 255 characters)

Annual program survey results were compiled and reviewed by our department head and division manager. That information will be incorporated a City Council Agenda Report that will be reviewed and approved by the Life Enrichment Committee on May 24.

17D. Describe how the planning process is connected to the service plan: How do the planned services correspond to the results of the planning process? (max. 255 characters)

The planning process yields client input and guidance from our advisory groups that directly impact our service plan. The program design is guided by desired service levels that serves as a base for best practice analysis based on performance goals.

18. If proposing service changes, what identified needs or priorities will the proposed changes meet? What needs or priorities will the proposed service changes still not meet? (max. 500 characters)

No proposed service changes at this time.

19. Describe how you will measure customer satisfaction, for example, by participating in a countywide rider survey, tracking customer comments, or other means? (max. 255 characters)

Customer satisfaction will be gauged through various forms of client feedback, including an annual survey. Additional information will derive from Oakland Commissions that deal with senior and disabled issues and the community at-large.

- 20. How will you obtain and/or track necessary financial and operating information for program management and reporting?** If private vendors or contractors provide the information, what steps will you take to verify or check the accuracy of the information? If performance data is collected by sampling, what steps will you take to ensure that samples are representative and randomized? *(max. 500 characters)*

Contract payments and program tracking occurs in-house. Our fiscal department oversees all financial activity. Records are audited annually. The accuracy of information is important for all required reports to governing entities. Services are provided by private companies and payment requests are reviewed by staff prior to approval. Contractors are required to submit detailed information and supporting documentation.

- 21. During July 1, 2011 through June 30, 2012 (FY 11-12), what amount of Measure B (MB) Paratransit Funds will your agency receive and expend?** Fill in the boxes below.

Note: Interest/Other MB Income includes interest on unspent Measure B balances and other Measure B income, such as grant funds.

FY 10-11 Unspent MB Balance	MB Revenues in FY 11-12	Interest/Other MB Income	MB Expended in FY 11-12	Ending MB Balance
\$0.00	\$868,384.56	\$25,000.00	\$893,384.56	\$0.00

- 22. What amount of non-Measure B revenues will your agency receive during FY 11-12?** Fill in the box below if you will receive non-Measure B funds.

Non-Measure B Revenues
\$114,395.00

- 22A. Describe the specific types of non-Measure B funding your agency will receive.**
(max. 255 characters)

Farebox revenue.

- 23. Do you intend to apply for federal Section 5310 funds, Alameda CTC gap grant funds, or other grant funds in the next fiscal year?**

- ☒ Yes
☐ No

- 23A. If yes, describe the types of grant funds for which you intend to apply.**

Alameda CTC gap grant funds.

24. Do you intend to apply for Minimum Service Level gap grant funding for the next fiscal year?

- ☒ Yes
☐ No

24A. If yes, please fill in the amount you intend to apply for in question 1 and complete question 32.

24B. If no, and your answer to question 3 is no, meaning you will not meet Minimum Service Levels, please explain. (max. 255 characters)

N/A

25. How do you plan to use undesignated reserve Measure B funds (FY 10-11 Unspent MB Balance from question 21)? Fill in the boxes below with any operating or capital Measure B reserves.

Operating Reserve <i>(eligible for up to three months of service funds)</i>	Capital Reserve <i>(may be held for up to three years)</i>	Date of Capital Reserve Initiation	Undesignated Funds <i>*(End MB – (operations + capital) = Undesignated)</i>
\$0.00	\$0.00		\$0.00

25A. Describe the use of the undesignated funds below. (max. 255 characters)

There will not be any reserve funds.

26. If applicable, why are the planned expenditures in FY 11-12 more than the amount of Measure B funds the agency expects to receive during FY 11-12? For instance, if your agency faces a funding shortage, will you use reserve Measure B funds from a previous fiscal year(s)? (max. 255 characters)

The Measure B allocation will primarily be exhausted on service provision and customer service. The additional administrative overhead will be covered by farebox revenue, which is necessary to conduct business.

27. What are your FY 11-12 operating expenses by category? Fill in the boxes below. Provide additional information in questions 27A and 27B if you have contract and miscellaneous expenditures.

Labor, Fringe <i>(for recipient staff)</i>	Admin. Costs <i>(for printing, postage, supplies, etc.)</i>	Contracts <i>(see 27A below)</i>	Transportation <i>(expenses recipients paid, not included in contracts)</i>
\$347,910.00	\$65,488.00	\$594,381.56	\$0.00
Taxi Reimbursement	Meal Delivery	EBP Ticket Purchase	Miscellaneous <i>(see 27B below)</i>
\$0.00	\$0.00	\$0.00	\$0.00
Total Operating Expenses <i>(sum of all eight categories)</i>			
\$1,007,779.56			

27A. List the contracted firms below, and if more than one, list the amount your agency will pay to each. (max. 255 characters)

Veterans Transportation - \$145,000; Friendly Transportation - \$145,000; and VIP Express Transport - \$304,381.56.

27B. Describe any miscellaneous expenditures below; include the amounts for each item. (max. 255 characters)

No miscellaneous expenditures planned at this time.

28. Of these total expenditures, what amount is allocated for the following?
Fill in the boxes below.

Management <i>(oversight, planning, budgeting, etc.)</i>	Customer Service and Outreach Activities	Trip Provision <i>(direct or contracted taxis, vans, shuttles, etc.)</i>
\$272,270.00	\$141,128.00	\$594,381.56

29. What are your planned Measure B capital expenditures during FY 11-12?
Fill in the box below.

Total Capital Expenditures
\$0.00

29A. Describe planned capital expenditures, such as purchase of vehicles or durable equipment, below. (max. 255 characters)

No capital purchases planned.

30. What are your anticipated net revenues? The box below autopopulates based on previous entries.

Net Revenues
\$25,000.00

31. Please provide information on the Governing Body Resolution to authorize submittal of the plan.

☐ Copy attached

☒ Pending action on: 05/31/11 (indicated date this item is scheduled for action)

32. If requesting Minimum Service Level (MSL) funding, please complete the table and questions 32A through 32E below.

MSL Your Program Anticipates Not Meeting <i>(see appendix)</i>	Describe How Your Program Falls Below This MSL	MB Funds Requested to Meet This MSL
MSL 1	Potential service cuts and a possible waiting list may be created.	\$25,000.00

32A. Please explain any community-specific issues that impact your ability to not meet MSLs.
Please describe below. (max. 500 characters)

The primary impacts have derived from the overall effects of the economic decline. City of Oakland General Funds are no longer available to our program and Measure B revenues have declined. Therefore, our ability to sustain current service levels for our current clients is diminishing, with the potential inability to enroll new participants.

- 32B. Have you explored and documented other transportation options for seniors and people with disabilities provided by nonprofit organizations in your community that might also close this service gap. Please describe below. (max. 500 characters)**

No other same-day taxi and van service options have been identified. Local community transportation providers serve specific client bases; therefore they are not a solution. East Bay Paratransit is a possible option for our dialysis riders; however, an influx of our clientele would be an unfair burden for EBP considering their current service demands and the rapid turn-around necessary to get our current clients registered and scheduled for transport to such a vital medical service.

- 32C. If MSL gap funding is not available to meet this need, are other funding sources available to meet this need? Please describe below. (max. 255 characters)**

There are currently no other funding sources to meet our needs. We would be forced to cut services and personnel service hours.

- 32D. If other funding is not available, how will you prioritize which MSLs to cut? (max. 255 characters)**

Only MSL 1 will be impacted as we will potentially have to cut services and create a waiting list for new applicants.

- 32E. Does your program provide ADA-equivalent service to those awaiting certification, outside the ADA service corridor or needing transportation outside of ADA-available times in your jurisdiction? (max. 255 characters)**

We currently provide these services through a Cycle 4 Gap Grant designed specifically to address these transport areas.

Program Plan Application Appendix

PAPCO-approved Minimum Service Levels

	Minimum Service Level (MSL)	A Program <i>Exceeds</i> this MSL if ...
1.	Regarding who programs serve: <ul style="list-style-type: none"> • People 18 and above with disabilities who are unable to use fixed route services • Seniors 80 and above without proof of a disability 	<ul style="list-style-type: none"> • It serves minors with disabilities. • It serves seniors under 80 without proof of disability.
2.	Regarding the type of service programs provide: <ul style="list-style-type: none"> • Accessible individual demand-responsive service 	<ul style="list-style-type: none"> • It offers additional services for participants, such as group trips or meal delivery.
3.	Regarding the time and days service is provided: <ul style="list-style-type: none"> • At least five days per week between the hours of 8 a.m. and 5 p.m. (excluding holidays) 	<ul style="list-style-type: none"> • It offers service more than five days a week. • Its service hours begin before 8 a.m. and/or extend after 5 p.m.
4.	Regarding the service area of a program: <ul style="list-style-type: none"> • Residents using this program are able to meet life needs, including but not limited to travel to major medical facilities, full service grocery stores and other basic necessities, if ADA services, or coordination between base programs are unable to provide these trips. 	<ul style="list-style-type: none"> • It provides trips to locations beyond those which residents would travel to fulfill life needs, such as recreational trips outside city boundaries.
5.	Regarding fares: <ul style="list-style-type: none"> • Fares should be comparable to East Bay Paratransit and equated to distance for van/sedan trips • Fares for Taxi trips should not exceed 50 percent of the total cost of the trip. 	<ul style="list-style-type: none"> • Riders pay less than they would for a comparable trip on East Bay Paratransit for a van/sedan trip. • Riders pay less than 50 percent of the total cost of the taxi trip.
6.	Regarding interim service for individuals applying for or awaiting ADA certification: <ul style="list-style-type: none"> • Interim service should be provided within three business days on receipt of application. • Interim service should be provided at the request of a health care provider or ADA provider. 	<ul style="list-style-type: none"> • It provides interim service in less than three business days.
7.	Regarding reservations: <ul style="list-style-type: none"> • Programs should accept reservations between the hours of 8 a.m. and 5 p.m. Monday through Friday. 	<ul style="list-style-type: none"> • It accepts reservations before 8 a.m. and/or after 5 p.m. • It accepts reservations on weekends.

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012
Table 1 Attachment: Summary of Planned Projects

Note: Definitions for each drop-down menu appear as Comments (scroll over the column title or in the Review mode, choose "Show All Comments"). The document is set up to print Comments at the end.

[illegible]

*Percentage of total dollars spent to Measure B funds is relative to percentage of trips provided.
(Total \$/Measure B \$) approx. = (Total trips provided/Measure B-funded trips provided).

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012
Table 1 Attachment: Summary of Planned Projects

Cell: A5

Comment: Project Category:
Disabled Services: Services primarily created for mobility for people with disabilities.
Meals on Wheels: Delivery of meals.
Senior & Disabled Services: Transportation services for seniors and people with disabilities.
Senior Services: Services primarily created for senior mobility.
Other: Use Other if none of the above apply, and define other by selecting Project Type (Column C) and providing Project Description (Column E).

Cell: B5

Comment: Project Phase:
Construction (includes PS&E): Construction of a new capital project, including development of the preliminary engineering and construction documents: the plans, specifications, and estimates.
Environmental: Preparation of environmental documents, such as those related to the California Environmental Quality Act (CEQA) or the National Environmental Policy Act (NEPA).
Maintenance: Maintenance, repairs, renovation, or upgrade of existing facility or infrastructure.
Operations: Operations such as transit, which may include routine maintenance and procurement, or lease of vehicles/equipment.
Project Completion/Closeout: Inspection/project acceptance, final invoicing, final reporting, and processes for closing out project.
Scoping, Feasibility, Planning: Early capital project phases, such as project scoping, feasibility studies, and planning.
Other: Use if none of the above apply, and define the project phase by selecting Project Type (Column C) and describe the phase under Project Description (Column E).

Cell: C5

Comment: Project Type:
Capital Purchase: Purchase of equipment, vehicles, or facilities.
Customer Service and Outreach: Staffing and benefits for customer service as well as costs associated with marketing, education, outreach, and promotional campaigns and programs.
EBP Ticket Purchase: Amounts paid to East Bay Paratransit for tickets plus associated costs, for example, distribution.
Group Trips: One-way passenger trips considered group trips. Includes vehicle operation and contracts. See Individual Demand-response Trips.
Individual Demand-response Trips: Taxi service, door-to-door trips, van trips, etc. Includes actual operation cost and contracts for vehicle operation, scheduling, dispatching, vehicle maintenance, supervision, and fare collection (including ticket or scrip printing and sales) for the purpose of carrying passengers.
Management: Staffing and benefits to manage programs, projects, and services.
Meal Delivery: Costs associated with vehicle operation, scheduling, dispatching, vehicle maintenance, and supervision for the purpose of delivering meals, whether provided in-house, through contracts, via taxicab, or by grantees.
Shuttle or Fixed-route Trips: Shuttle service or fixed-route bus service, for example. Includes vehicle operation and contracts. See Individual Demand-response Trips.
Other: Use if none of the above apply. Describe the Type under Project Description (Column E).

Cell: I5

Comment: Project Status:
Choose project status on June 30, 2012: Planning in FY 11-12, Initiated in FY 11-12, Continuing or Ongoing, or Closed Out in FY 11-12.

Cell: K5

Comment: Trip Type Description:
Lift/ramp Assisted: Trips that include lift or ramp assistance.
Taxi Trips: Any type of taxi trip.
Same-day Lift/ramp-assisted Trips: Trips that include lift or ramp assistance and are same-day service.
Same-day Trips: Same-day service.
Other: If Trip Type is not applicable to your program, choose Other and provide a description in Column K.

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012

Table 2 Attachment: Vehicle Fleet

Instructions: Please complete table below. If necessary, please contact your contractors to obtain the information.

Vehicle Fleet								
Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H	Column I
				Capacity				
Make	Type of Vehicle(s) (specify bus, large van, minivan, sedan)	Fuel Type	Lift/Ramp Equipment (specify lift, ramp, or none)	Ambulatory	Wheelchair	Number of Vehicles	Owner (specify if contractor)	City that vehicle(s) are garaged in
Ford E250	Large Van	Gas	Lift	4	2	2	VIP Express Transport, Inc. - Contractor	Oakland
Ford E150	Large Van	Gas	Lift	4	2	1	VIP Express Transport, Inc. - Contractor	Oakland
Ford E350	Large Van	Gas	Lift	4	2	1	VIP Express Transport, Inc. - Contractor	Oakland
Ford Freestar	Minivan	Gas	Lift	3	2	2	VIP Express Transport, Inc. - Contractor	Oakland
Ford Crown Victoria	Sedan	37 Gas 7 CNG	None	4	0	44	Veterans Transportation, Inc. - Contractor	Oakland
Dodge Caravan	Minivan	Gas	None	6	0	2	Veterans Transportation, Inc. - Contractor	Oakland
Dodge Caravan	Minivan	Gas	Ramp	2	2	5	Veterans Transportation, Inc. - Contractor	Oakland
Ford Crown Victoria	Sedan	Gas 15 CNG	None	4	0	141	Friendly Transportation, Inc. - Contractor	Oakland
Ford Winstar	Minivan	Gas	Ramp	4	1	8	Friendly Transportation, Inc. - Contractor	Oakland
Ford Escape Hybrid	Small Jeep	Gas-electric	None	4	0	17	Friendly Transportation, Inc. - Contractor	Oakland

**Minimum Service Level Grant Request Comparison
FY 2011/12**

	City of Oakland	City of San Leandro
Amount requested	\$25,000	\$75,000
MSL not being met	Who programs serve – Potential service cuts and a possible waiting list may be created.	<p>Program Service Area – The FLEX Shuttle operates within the City limits. Medical trips in Alameda County are provided with the current MSL grant.</p> <p>Interim Service – Interim service is primarily requested for medical transportation.</p>
Measure B Base Program Funding 11/12	\$868,385	\$243,066
Reserves and Net Revenues	<ul style="list-style-type: none"> • Entering year with no Reserves • Finishing year with Net Revenue of \$25,000 (may be calculation error) 	<ul style="list-style-type: none"> • Entering year with no Reserves • Finishing year with no Net Revenue
Projected service through MSL grant	1,282 projected trips	1,271 projected trips
Have you explored and documented other transportation options for seniors and people with disabilities provided by non-profit organizations in your community that might also close this service gap?	No other same-day taxi and van service options have been identified. Local community transportation providers serve specific client bases; therefore they are not a solution. East Bay Paratransit is a possible option for our dialysis riders; however, an influx of our clientele would be an unfair burden for EBP considering their current service demands and the rapid turn-around necessary to get our current clients registered and scheduled	Options include family, friends, taxi, AC Transit/BART, EBP and residential facilities that provide transportation. Many of our riders do not have family or friends that can take them to appointments. Alzheimer's Services and Stepping Stones provide transportation to their clients, but non-profit resources are very limited. Some residential facilities provide transportation, but most do not. Many of our riders are not well enough to use public transportation and cannot

	City of Oakland	City of San Leandro
	for transport to such a vital medical service.	afford a taxi.
If MSL gap funding was not available to meet this need, would other funding sources be available to meet this need?	There are currently no other funding sources to meet our needs. We would be forced to cut services and personnel service hours.	We would continue to seek other funding. In light of current City budget constraints it is not possible for the City to subsidize this service.

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

Part I. General Program Information

- 1. Paratransit Program:** City of Emeryville
- 2. Program Manager/Representative:** Kevin Laven
- 3. Program Plan Review Date and Time:** April 29, 1:35pm
- 4. Measure B Amount for Base Program Funding:** \$22,426
- 5. Measure B Amount for Minimum Service Level Grant:** N/A
- 6. Program Base Services Overview:** Refer to Table 1
- 7. Potential Riders Projected for next Fiscal Year:** 7,820 (mistake-rides?)
- 8. Total Rides Projected to be Provided in next Fiscal Year:** 7,300
- 9. Meal Delivery Program?** X Yes _ No
Measure B Funds Allocated to Meal Program: \$200
- 10. Purchasing EBP tickets?** X Yes _ No
Total EBP Tickets to be Purchased in Next Fiscal Year: 500
- 11. Proposed changes for next Fiscal Year?** X Yes _ No

Changes: Due to customers informing staff of the increased EBP rider fees, our service plan now allows for an increased amount of tickets that can be purchased.

Part II. General Program Analysis

- 1. Efforts related to Coordination/Mobility Management**
The Accessible Group Trips program is open to any senior citizen or people with disabilities. The taxi reimbursement, EBP discount ticket and meals-on-wheels programs are only for Emeryville residents by design. Quarterly travel trainings along with heavy promotion of all paratransit programs.

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

- 2. Identified needs/priorities that will not be met by the Program**
None specified.
- 3. Status of Jurisdiction's PAPCO appointees/vacancies:** Refer to Cover Memo
- 4. Subcommittee comments from last year's program plan review**
 - Plan is improving, especially on financials. Great that the board member is active.
 - On track. Great at this point.
 - Great program. Hope it gets better.
 - Keep up the good work; make sure to contact shut-ins.
 - Continuity in staff is helping.
- 5. Final recommendation after last year's program plan review**
A motion to approve City of Emeryville's plan was made by Jonah Markowitz and seconded by Clara Sample. The motion carried unanimously.
- 6. Staff identified questions for current fiscal year (PAPCO members can use these as examples during the question rounds)**
 - A. Is your program participation growing?
 - B. Please describe your plan to integrate your grant-funded shuttle into your base program?
- 7. Financial audit Program Compliance Report performed and compliance opinion given? X Yes _ No**
- 8. Consumer involvement in planning process**
Staff collects feedback from customers after every group trip and feedback is gathered from the Commission on Aging and Friends of the Emeryville Senior Center Non-Profit meetings. This feedback shapes the funding formula proposed in this application.

Part III. Financials

- 1. Finance Subcommittee Questions:** To be provided at meeting
- 2. Revenue Trends:** Refer to Cover Memo

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

3. Proportion of Measure B Funding: Refer to Cover Memo

Source(s) of other funding (if applicable): City's in-kind support in providing the staff to run the Paratransit programs.

4. Fund Reserves and Net Revenues Planned for 2011-2012

Fund balance--undesignated	\$5,000
Undesignated funds % of planned Meas B rev	0%
Reserve funds--designated for capital	\$0
Capital funds reserved < 4 years	N/A
Reserve funds--designated for operations	\$4,000
Reserve funds = or < than 3 months M B rev	Y
Total Fund Reserves going into FY	\$9,000
Planned Net Revenue at end of FY	\$9,000

Part IV. Minimum Service Level Grants

1. Applying for an MSL Grant? _ Yes X No

Amount of Request: \$ _

2. Which other programs have applied for an MSL Grant and for how much?

3. MSL Gap(s) needing to be closed and application answers: Refer to Application PDF

4. Additional questions/comments about application for MSL Grant?

-

Part V. Preliminary Recommendation (Committee Member Notes)

With respect to this application, I want to send the following recommendation to the full PAPCO (*please check one*):

☐

Recommend **approval of base funding without MSL grant** (MSL Grant not requested or not recommended).

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

- ☐ Recommend **approval of base funding with MSL grant of \$_____.**
- ☐ Recommend **conditional approval with recommended actions** (for example, recommend funds continue to flow but place program on watch list and require quarterly reports to PAPCO, hold back funds until program updates plan or budget, recommend partial funding until specified actions are taken).

- ☐ Don't recommend approval.



Annual Paratransit Program Application for Measure B Funding

Fiscal Year 2011-2012 (July 1, 2011 through June 30, 2012)

Note: In July 2010, the Alameda County Transportation Improvement Authority (ACTIA) merged with the Alameda County Congestion Management Agency to become the Alameda County Transportation Commission (Alameda CTC). Agencies and jurisdictions that have paratransit pass-through fund agreements with ACTIA must continue to submit annual paratransit program application forms. See below for submittal instructions.

This document includes the PDF application form and instructions for submittal.

Requirements and Instructions

Measure B paratransit fund recipients are required to submit to the Alameda CTC one electronic version of two documents for the annual program application submittal.

Paratransit Program Application Deadline: April 8, 2011

The Annual Paratransit Program Application submittal includes a PDF and Table 1 and Table 2 Attachments for each program.

1. Paratransit Program Application (PDF)
2. Paratransit Program Application Table 1 and Table 2 Attachments (one Excel workbook)

Electronic submission: Save the online PDF form to your hard drive with your agency name and date in the file name (e.g., Albany_FY11-12_Paratransit_Program_Application_040611.pdf). You can start work on the PDF and finish it later; simply save it to your hard drive. Also, complete the Table 1 and Table 2 workbook and include your agency name and date in the file name. Submit one copy of both the PDF and Table 1 and Table 2 Attachments via email by April 8, 2011. Send it to narmenta@alamedactc.org. If you have questions, you can reach Naomi Armenta via email or at (510) 208-7469.

Paratransit Program Application

Due by April 8, 2011

Agency Name:	City of Emeryville
Date Submitted:	04/11/11
Name and Title of Submitter:	Kevin Laven, Administrative Analyst
Secondary Agency Contact Name:	Brad Helfenberger, Adult Services Manager
Phone Number:	510-450-7813
Fax:	510-652-0933
E-mail:	klaven@emeryville.org

Clearly label additional attachments as needed.

1. **What amount of funds are you applying for?** Fill in the boxes below. Note: Mandated and non-mandated funds should match the projects on the website at:
http://www.actia2022.com/files/managed/Document/1900/RevDist%20FY11_12%20projection.pdf

Mandated Amount (AC Transit and BART only)	Non-mandated Amount	Minimum Service Level Gap Grant Amount
	\$22,426.46	

2. **What type of paratransit projects and programs will Measure B fund?** To answer this question, complete the Table 1 Attachment (Table 1 tab) in the Excel workbook. Describe the projects and/or programs your agency plans to implement with Measure B funding during fiscal year 2011-2012 (FY 11-12).

Continue to the next page of this application to answer question 2A.

2A. Please provide a short narrative description for each service component listed in question 2 and describe any planned changes. (max. 1,300 characters)

Taxi Reimbursement Program: Reimburse seniors over 60 years old in Emeryville for 90% of their taxi fares, up to \$80 per quarter (or \$320/year).

EBP Discount Ticket Program: Sell EBP tickets at 10% of cost to EBP certified customers in Emeryville. Customers can purchase a maximum of \$80 worth of tickets per quarter (or \$320/year)

Meals on Wheels Volunteer Driver Milage Reimbursement Program: Reimburse milage costs at Federal reimbursement rate to volunteers who deliver meals

Accessible Group Trips Program: Provide ADA-accessible transportation for group trips throughout the Bay Area, State and Western US Region for Seniors and People with Disabilities.

3. Is your program currently meeting Minimum Service Levels? See the appendix.

- ☒ Yes
☐ No
☐ Not Applicable (*Americians with Disabilities Act (ADA) mandated provider*)

3A. If no, which ones are you not meeting and how?
(max. 255 characters)

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4. How many potential riders do you estimate will use this service this coming fiscal year?
Fill in the box below.

Potential Riders in FY 11-12
7,820

5. **Please provide details regarding your vehicle fleet.** To answer this question, complete the Table 2 Attachment (Table 2 tab) in the Excel workbook.

6. **Does your program provide meal delivery?**

- ☒ Yes
☐ No

6A. **If faced with revenue shortfalls, how do you balance meal delivery with trip requests?**
(max. 255 characters)

We would explain to the volunteers that we no longer have the funds to reimburse for the mileage. Most volunteers would keep delivering meals without the reimbursement as we haven't had a request in almost two years.

7. **Describe your driver training program.** (max. 500 characters)

All drivers that are employed by the City are required to have a Class B License. Currently three (3) employees were given instruction by a hired consultant. Employees watch videos, train behind the wheel with the consultant, and gain hands-on experience on how to use the ADA lift/tie downs on our buses/vans. Sensitivity training is handled on a individual basis to each driver to ensure great customer service if problems arise.

8. **Describe your policies concerning timely pick-ups or drop-offs.** Include what window your program allows, if there is a standard for the percentage of pick-ups or drop-offs that must occur within the window, the policy concerning early pick-ups, and whether there is a maximum amount of lateness after which you count a provider no-show or missed trip.
(max. 500 characters)

We do not provide pick-ups or drop-offs as EBP or taxis provide this individual service.

9. **Describe your policies concerning the maximum time a rider may be on a vehicle.** Indicate if there is a maximum time, and if there is a standard for the percentage of total trips that must fall within this maximum time. (max. 255 characters)

None.

- 10. What are your policies for reserving trips?** What are your policies for reserving individual trips (including subscriptions/standing orders or same-day trips) and for reserving group/program trips? What advance notice do you require or allow? Are there limits on availability? *(max. 500 characters)*

First come, first served for accessible group trips. EBP and taxis set their own policies for reserving trips.

- 11. How far in advance is a rider required to cancel a trip before you count the trip as a no show?** Describe these for each type of trip below. What is your policy concerning riders with repeated no-shows or late cancellations? Please describe your policy for subscriptions/standing orders, same-day trips, or group/program trips as applicable. *(max. 500 characters)*

Accessible group trips must be cancelled one week prior to the trip for a full refund. If less than a week, a refund is given if another rider can be found to fill the space vacated. A no show for a trip does not get a refund. The Adult Services Manager can make exceptions for refunds based on medical or emergency scenarios.

- 12. What is the maximum and average time between receiving an application and enrolling an applicant in the program?** *(max. 255 characters)*

1-3 days. Maximum length is 5 days.

- 13. Is there a waiting list?**

☐ Yes
☒ No

- 13A. If yes, what are the policies that apply to it? How many people are on it? What is the average wait?** Describe your answer in the box below. *(max. 500 characters)*

- 14. Describe your complaint and commendation process.** Describe your process from beginning to end, including instructions you provide to customers for filing complaints or commendations, your documentation procedures, your follow up, and any changes you have made to your program as a result of customer complaints and commendations.
(max. 500 characters)

Feedback is encouraged at the Senior Center's Advisory Council meetings on the paratransit programs. Participants are encouraged to provide comments and feedback on the paratransit programs, both positive and negative, via comment cards or evaluations. The Senior Center welcomes compliments, concerns, and suggestions on all paratransit services in writing, in person or by a one-on-one meeting with staff.

- 15. Describe how you will coordinate services with other Measure B paratransit services and/or mandated ADA paratransit services so that people can make trips throughout Alameda County.** Examples of coordination may include, but are not limited to, reciprocal fare agreements, reciprocal agreements to provide trips into adjoining areas, arrangements for clients to ride on other systems, and transfer arrangements. Attach copies of agreements or memoranda of understanding for coordination if available.
(max. 500 characters)

The Accessible Group Trips program is open to any senior citizen or people with disabilities. The taxi reimbursement, EBP discount ticket and meals-on-wheels programs are only for Emeryville residents by design.

- 16. Describe planned outreach to ensure that potential users of the services, including coordinated services, learn about them.** (max. 500 characters)

Quarterly travel trainings along with heavy promotion of all paratransit programs. Travel trainings are advertised in the Senior Centers monthly newsletter, the LINK, which is mailed to over 1,000 citizens throughout the East Bay monthly. The information is also accesible on line on the City's website 24/7. Finally, the information is published in the City's City News and Activity Guide that is mailed to all residents in Emeryville three times a year.

- 17. Describe your planning process.** List all activities undertaken in connection with this plan, including consumer or public meetings; meetings with other agencies; presentations to boards, commissions, or committees; and provide general dates for these activities.
(see questions 17A through 17D that follow; max. 500 characters)

The planning process is primarily based on the past needs and feedback. Group trips continue to fill up even as we offer more accessible trips, so we continue to

17A. Has this plan been reviewed by a local paratransit advisory committee?

- ☐ Yes
☒ No

17B. If yes, list the committee name and date of the meeting.

17C. Describe any surveys or analysis conducted and staff reports. (max. 255 characters)

Staff collects feedback from customers after every group trip and feedback is gathered from the Commission on Aging and Friends of the Emeryville Senior Center Non-Profit meetings. This feedback shapes the funding formula proposed in this application

17D. Describe how the planning process is connected to the service plan: How do the planned services correspond to the results of the planning process? (max. 255 characters)

An example is the increased reimbursement of EBP discount tickets. Due to customers informing staff of the increased rider fees, our service plan now allows for a increased amount of tickets that can be purchased.

18. If proposing service changes, what identified needs or priorities will the proposed changes meet? What needs or priorities will the proposed service changes still not meet? (max. 500 characters)

Due to customers informing staff of the increased EBP rider fees, our service plan now allows for a increased amount of tickets that can be purchased.

19. Describe how you will measure customer satisfaction, for example, by participating in a countywide rider survey, tracking customer comments, or other means? (max. 255 characters)

Staff track customer feedback through group trip surveys, a feedback box, and will plan on completing a mailed survey to the non-group trip participants in FY2011-2012.

- 20. How will you obtain and/or track necessary financial and operating information for program management and reporting?** If private vendors or contractors provide the information, what steps will you take to verify or check the accuracy of the information? If performance data is collected by sampling, what steps will you take to ensure that samples are representative and randomized? *(max. 500 characters)*

The City's Finance Department's provides staff with audited financial statements and unaudited monthly reports. Operating information is tracked by staff in the Senior Center.

- 21. During July 1, 2011 through June 30, 2012 (FY 11-12), what amount of Measure B (MB) Paratransit Funds will your agency receive and expend?** Fill in the boxes below.

Note: Interest/Other MB Income includes interest on unspent Measure B balances and other Measure B income, such as grant funds.

FY 10-11 Unspent MB Balance	MB Revenues in FY 11-12	Interest/Other MB Income	MB Expended in FY 11-12	Ending MB Balance
\$9,000.00	\$22,426.46	\$200.00	\$22,626.46	\$9,000.00

- 22. What amount of non-Measure B revenues will your agency receive during FY 11-12?** Fill in the box below if you will receive non-Measure B funds.

Non-Measure B Revenues
\$133,120.00

- 22A. Describe the specific types of non-Measure B funding your agency will receive.**
(max. 255 characters)

City's in-kind support in providing the staff to run the Paratransit programs.

- 23. Do you intend to apply for federal Section 5310 funds, Alameda CTC gap grant funds, or other grant funds in the next fiscal year?**

☐ Yes
☒ No

- 23A. If yes, describe the types of grant funds for which you intend to apply.**

--

24. Do you intend to apply for Minimum Service Level gap grant funding for the next fiscal year?

- ☐ Yes
☒ No

24A. If yes, please fill in the amount you intend to apply for in question 1 and complete question 32.

24B. If no, and your answer to question 3 is no, meaning you will not meet Minimum Service Levels, please explain. (max. 255 characters)

25. How do you plan to use undesignated reserve Measure B funds (FY 10-11 Unspent MB Balance from question 21)? Fill in the boxes below with any operating or capital Measure B reserves.

Operating Reserve <i>(eligible for up to three months of service funds)</i>	Capital Reserve <i>(may be held for up to three years)</i>	Date of Capital Reserve Initiation	Undesignated Funds <i>*(End MB – (operations + capital) = Undesignated)</i>
\$4,000.00	\$0.00		\$5,000.00

25A. Describe the use of the undesignated funds below. (max. 255 characters)

The Gap Grant shuttle service, '8-To-Go', will be in transition from a funded gap grant to a volunteer program. Staff anticipates that Measure B funding will help fund the 8-To-Go in the future and would like to save a little extra for the unforeseen.

26. If applicable, why are the planned expenditures in FY 11-12 more than the amount of Measure B funds the agency expects to receive during FY 11-12? For instance, if your agency faces a funding shortage, will you use reserve Measure B funds from a previous fiscal year(s)? (max. 255 characters)

The Paratransit program collects revenue for the group trips in the amount of \$120,000.00 as well as 10 percent of all EBP sales. The remainder is off-set by the City's General Fund to support the Paratransit program.

27. What are your FY 11-12 operating expenses by category? Fill in the boxes below. Provide additional information in questions 27A and 27B if you have contract and miscellaneous expenditures.

Labor, Fringe <i>(for recipient staff)</i>	Admin. Costs <i>(for printing, postage, supplies, etc.)</i>	Contracts <i>(see 27A below)</i>	Transportation <i>(expenses recipients paid, not included in contracts)</i>
\$133,120.00	\$0.00	\$0.00	\$17,926.46
Taxi Reimbursement	Meal Delivery	EBP Ticket Purchase	Miscellaneous <i>(see 27B below)</i>
\$2,500.00	\$200.00	\$2,000.00	\$0.00
Total Operating Expenses <i>(sum of all eight categories)</i>			
\$155,746.46			

27A. List the contracted firms below, and if more than one, list the amount your agency will pay to each. *(max. 255 characters)*

--

27B. Describe any miscellaneous expenditures below; include the amounts for each item. *(max. 255 characters)*

--

28. Of these total expenditures, what amount is allocated for the following?
Fill in the boxes below.

Management <i>(oversight, planning, budgeting, etc.)</i>	Customer Service and Outreach Activities	Trip Provision <i>(direct or contracted taxis, vans, shuttles, etc.)</i>
\$66,560.00	\$66,560.00	\$22,626.46

29. What are your planned Measure B capital expenditures during FY 11-12?
Fill in the box below.

Total Capital Expenditures
\$0.00

29A. Describe planned capital expenditures, such as purchase of vehicles or durable equipment, below. (max. 255 characters)

n/a

30. What are your anticipated net revenues? The box below autopopulates based on previous entries.

Net Revenues
\$9,000.00

31. Please provide information on the Governing Body Resolution to authorize submittal of the plan.

☐ Copy attached
☒ Pending action on: 05/03/11 (indicated date this item is scheduled for action)

32. If requesting Minimum Service Level (MSL) funding, please complete the table and questions 32A through 32E below.

MSL Your Program Anticipates Not Meeting <i>(see appendix)</i>	Describe How Your Program Falls Below This MSL	MB Funds Requested to Meet This MSL

32A. Please explain any community-specific issues that impact your ability to not meet MSLs.
 Please describe below. (max. 500 characters)

- 32B. Have you explored and documented other transportation options for seniors and people with disabilities provided by nonprofit organizations in your community that might also close this service gap. Please describe below. (max. 500 characters)**

- 32C. If MSL gap funding is not available to meet this need, are other funding sources available to meet this need? Please describe below. (max. 255 characters)**

- 32D. If other funding is not available, how will you prioritize which MSLs to cut? (max. 255 characters)**

- 32E. Does your program provide ADA-equivalent service to those awaiting certification, outside the ADA service corridor or needing transportation outside of ADA-available times in your jurisdiction? (max. 255 characters)**

Program Plan Application Appendix

PAPCO-approved Minimum Service Levels

	Minimum Service Level (MSL)	A Program <i>Exceeds</i> this MSL if ...
1.	Regarding who programs serve: <ul style="list-style-type: none"> • People 18 and above with disabilities who are unable to use fixed route services • Seniors 80 and above without proof of a disability 	<ul style="list-style-type: none"> • It serves minors with disabilities. • It serves seniors under 80 without proof of disability.
2.	Regarding the type of service programs provide: <ul style="list-style-type: none"> • Accessible individual demand-responsive service 	<ul style="list-style-type: none"> • It offers additional services for participants, such as group trips or meal delivery.
3.	Regarding the time and days service is provided: <ul style="list-style-type: none"> • At least five days per week between the hours of 8 a.m. and 5 p.m. (excluding holidays) 	<ul style="list-style-type: none"> • It offers service more than five days a week. • Its service hours begin before 8 a.m. and/or extend after 5 p.m.
4.	Regarding the service area of a program: <ul style="list-style-type: none"> • Residents using this program are able to meet life needs, including but not limited to travel to major medical facilities, full service grocery stores and other basic necessities, if ADA services, or coordination between base programs are unable to provide these trips. 	<ul style="list-style-type: none"> • It provides trips to locations beyond those which residents would travel to fulfill life needs, such as recreational trips outside city boundaries.
5.	Regarding fares: <ul style="list-style-type: none"> • Fares should be comparable to East Bay Paratransit and equated to distance for van/sedan trips • Fares for Taxi trips should not exceed 50 percent of the total cost of the trip. 	<ul style="list-style-type: none"> • Riders pay less than they would for a comparable trip on East Bay Paratransit for a van/sedan trip. • Riders pay less than 50 percent of the total cost of the taxi trip.
6.	Regarding interim service for individuals applying for or awaiting ADA certification: <ul style="list-style-type: none"> • Interim service should be provided within three business days on receipt of application. • Interim service should be provided at the request of a health care provider or ADA provider. 	<ul style="list-style-type: none"> • It provides interim service in less than three business days.
7.	Regarding reservations: <ul style="list-style-type: none"> • Programs should accept reservations between the hours of 8 a.m. and 5 p.m. Monday through Friday. 	<ul style="list-style-type: none"> • It accepts reservations before 8 a.m. and/or after 5 p.m. • It accepts reservations on weekends.

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012
Table 1 Attachment: Summary of Planned Projects

Note: Definitions for each drop-down menu appear as Comments (scroll over the column title or in the Review mode, choose "Show All Comments"). The document is set up to print Comments at the end.

[illegible]

*Percentage of total dollars spent to Measure B funds is relative to percentage of trips provided.

(Total \$/Measure B \$) approx. = (Total trips provided/Measure B-funded trips provided)

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012
Table 1 Attachment: Summary of Planned Projects

Cell: A5
Comment: Project Category: Disabled Services: Services primarily created for mobility for people with disabilities. Meals on Wheels: Delivery of meals. Senior & Disabled Services: Transportation services for seniors and people with disabilities. Senior Services: Services primarily created for senior mobility. Other: Use Other if none of the above apply, and define other by selecting Project Type (Column C) and providing Project Description (Column E).
Cell: B5
Comment: Project Phase: Construction (includes PS&E): Construction of a new capital project, including development of the preliminary engineering and construction documents: the plans, specifications, and estimates. Environmental: Preparation of environmental documents, such as those related to the California Environmental Quality Act (CEQA) or the National Environmental Policy Act (NEPA). Maintenance: Maintenance, repairs, renovation, or upgrade of existing facility or infrastructure. Operations: Operations such as transit, which may include routine maintenance and procurement, or lease of vehicles/equipment. Project Completion/Closeout: Inspection/project acceptance, final invoicing, final reporting, and processes for closing out project. Scoping, Feasibility, Planning: Early capital project phases, such as project scoping, feasibility studies, and planning. Other: Use if none of the above apply, and define the project phase by selecting Project Type (Column C) and describe the phase under Project Description (Column E).
Cell: C5
Comment: Project Type: Capital Purchase: Purchase of equipment, vehicles, or facilities. Customer Service and Outreach: Staffing and benefits for customer service as well as costs associated with marketing, education, outreach, and promotional campaigns and programs. EBP Ticket Purchase: Amounts paid to East Bay Paratransit for tickets plus associated costs, for example, distribution. Group Trips: One-way passenger trips considered group trips. Includes vehicle operation and contracts. See Individual Demand-response Trips. Individual Demand-response Trips: Taxi service, door-to-door trips, van trips, etc. Includes actual operation cost and contracts for vehicle operation, scheduling, dispatching, vehicle maintenance, supervision, and fare collection (including ticket or scrip printing and sales) for the purpose of carrying passengers. Management: Staffing and benefits to manage programs, projects, and services. Meal Delivery: Costs associated with vehicle operation, scheduling, dispatching, vehicle maintenance, and supervision for the purpose of delivering meals, whether provided in-house, through contracts, via taxicab, or by grantees. Shuttle or Fixed-route Trips: Shuttle service or fixed-route bus service, for example. Includes vehicle operation and contracts. See Individual Demand-response Trips. Other: Use if none of the above apply. Describe the Type under Project Description (Column E).
Cell: I5
Comment: Project Status: Choose project status on June 30, 2012: Planning in FY 11-12, Initiated in FY 11-12, Continuing or Ongoing, or Closed Out in FY 11-12.
Cell: K5
Comment: Trip Type Description: Lift/ramp Assisted: Trips that include lift or ramp assistance. Taxi Trips: Any type of taxi trip. Same-day Lift/ramp-assisted Trips: Trips that include lift or ramp assistance and are same-day service. Same-day Trips: Same-day service. Other: If Trip Type is not applicable to your program, choose Other and provide a description in Column K.

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012

Table 2 Attachment: Vehicle Fleet

Instructions: Please complete table below. If necessary, please contact your contractors to obtain the information.

[illegible]

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

Part I. General Program Information

- 1. Paratransit Program:** City of Pleasanton
- 2. Program Manager/Representative:** Pam Deaton
- 3. Program Plan Review Date and Time:** Apr 29, 2:25pm
- 4. Measure B Amount for Base Program Funding:** \$79,873
- 5. Measure B Amount for Minimum Service Level Grant:** N/A
- 6. Program Base Services Overview:** Refer to Table 1
- 7. Potential Riders Projected for next Fiscal Year:** 350
- 8. Total Rides Projected to be Provided in next Fiscal Year:** 16,000
- 9. Meal Delivery Program?** ☐ Yes ☒ No
Measure B Funds Allocated to Meal Program: N/A
- 10. Purchasing EBP tickets?** ☐ Yes ☒ No
Total EBP Tickets to be Purchased in Next Fiscal Year: N/A
- 11. Proposed changes for next Fiscal Year?** ☐ Yes ☒ No

Changes: PPS staff is not proposing any service changes for FY 11-12. Staff hopes to continue to meet the demand for door-to-door service and continue coordination with valley transit providers. With a new paratransit contractor (American Logistics) in the valley, PPS staff will work hard to maintain strong coordination efforts.

Part II. General Program Analysis

- 1. Efforts related to Coordination/Mobility Management**
The City of Pleasanton maintains a MOU with Livermore Amador Valley Transit Authority (LAVTA) who serves as the primary ADA provider in the Tri-Valley. When PPS is at capacity or closed, LAVTA provides service to PPS ADA

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

clients. Coordination of county-wide rides, transfer of clients, and joint marketing and training opportunities occur regularly. PPS and staff from Senior Support Program of the Tri-Valley provide rider assessment services as well as coordinate trips.

2. **Identified needs/priorities that will not be met by the Program**
None specified.
3. **Status of Jurisdiction's PAPCO appointees/vacancies:** Refer to Cover Memo
4. **Subcommittee comments from last year's program plan review**
 - Great program!
 - With cutbacks still able to make improvements.
 - Wonderful Volunteer Driver program.
 - Coordination with other agencies is great.
 - Cost effective effort is good.
 - Drivers are nice.
 - Good presentation—great job!
 - Good presentation; thought went into it.
 - Like concern for disabled residents, in particular, and seniors.
 - Love sculptures on Downtown Route.
5. **Final recommendation after last year's program plan review**
A motion to approve City of Pleasanton's plan was made by Herb Hastings and seconded by Betty Mulholland. The motion carried unanimously.
6. **Staff identified questions for current fiscal year (PAPCO members can use these as examples during the question rounds)**
 - A. How will the involvement of American Logistics affect your MOU/agreement with LAVTA?
 - B. How does the DTR affect your door-to-door program?
7. **Financial audit Program Compliance Report performed and compliance opinion given? X Yes _ No**
8. **Consumer involvement in planning process**
As part of the annual planning process, 750 PPS users were sent our service evaluations on March 21, 2011 seeking input on the program. A free ride was

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

offered to anyone completing the survey with findings to be reviewed by the PPS Task Force and the Alameda CTC. Staff worked with the PPS Task Force to develop five (5) new outcome measures as goals for FY 10-11. The PPS Task Force reviewed the plan at its 1/21/11 & 4/15/11 meetings & the Sr Ctr Advisory Committee provided input on 1/10/11.

Part III. Financials

1. Finance Subcommittee Questions: To be provided at meeting

2. Revenue Trends: Refer to Cover Memo

3. Proportion of Measure B Funding: Refer to Cover Memo

Source(s) of other funding (if applicable): Fares -- \$48,000

MTC TDA 4.5 -- \$51,445

City of Pleasanton General funds -- \$360,463

4. Fund Reserves and Net Revenues Planned for 2011-2012

Fund balance--undesignated	\$0
Undesignated funds % of planned Meas B rev	0%
Reserve funds--designated for capital	\$0
Capital funds reserved < 4 years	N/A
Reserve funds--designated for operations	\$0
Reserve funds = or < than 3 months M B rev	N/A
Total Fund Reserves going into FY	\$0
Planned Net Revenue at end of FY	\$0

Part IV. Minimum Service Level Grants

1. Applying for an MSL Grant? _ Yes X No

Amount of Request: \$ _

2. Which other programs have applied for an MSL Grant and for how much?

3. MSL Gap(s) needing to be closed and application answers: Refer to Application PDF

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

4. Additional questions/comments about application for MSL Grant?

-

Part V. Preliminary Recommendation (Committee Member Notes)

With respect to this application, I want to send the following recommendation to the full PAPCO (*please check one*):

- ☐ Recommend **approval of base funding without MSL grant** (MSL Grant not requested or not recommended).
- ☐ Recommend **approval of base funding with MSL grant of \$_____**.
- ☐ Recommend **conditional approval with recommended actions** (for example, recommend funds continue to flow but place program on watch list and require quarterly reports to PAPCO, hold back funds until program updates plan or budget, recommend partial funding until specified actions are taken).

- ☐ Don't recommend approval.



Annual Paratransit Program Application for Measure B Funding

Fiscal Year 2011-2012 (July 1, 2011 through June 30, 2012)

Note: In July 2010, the Alameda County Transportation Improvement Authority (ACTIA) merged with the Alameda County Congestion Management Agency to become the Alameda County Transportation Commission (Alameda CTC). Agencies and jurisdictions that have paratransit pass-through fund agreements with ACTIA must continue to submit annual paratransit program application forms. See below for submittal instructions.

This document includes the PDF application form and instructions for submittal.

Requirements and Instructions

Measure B paratransit fund recipients are required to submit to the Alameda CTC one electronic version of two documents for the annual program application submittal.

Paratransit Program Application Deadline: April 8, 2011

The Annual Paratransit Program Application submittal includes a PDF and Table 1 and Table 2 Attachments for each program.

1. Paratransit Program Application (PDF)
2. Paratransit Program Application Table 1 and Table 2 Attachments (one Excel workbook)

Electronic submission: Save the online PDF form to your hard drive with your agency name and date in the file name (e.g., Albany_FY11-12_Paratransit_Program_Application_040611.pdf). You can start work on the PDF and finish it later; simply save it to your hard drive. Also, complete the Table 1 and Table 2 workbook and include your agency name and date in the file name. Submit one copy of both the PDF and Table 1 and Table 2 Attachments via email by April 8, 2011. Send it to narmenta@alamedactc.org. If you have questions, you can reach Naomi Armenta via email or at (510) 208-7469.

Paratransit Program Application

Due by April 8, 2011

Agency Name:	City of Pleasanton
Date Submitted:	April 12, 2011
Name and Title of Submitter:	Pam Deaton, Recreation Supervisor
Secondary Agency Contact Name:	Kathleen Yurchak, Community Services Manager
Phone Number:	925-931-5367
Fax:	925-485-3685
E-mail:	pdeaton@ci.pleasanton.ca.us

Clearly label additional attachments as needed.

1. **What amount of funds are you applying for?** Fill in the boxes below. Note: Mandated and non-mandated funds should match the projects on the website at:
http://www.actia2022.com/files/managed/Document/1900/RevDist%20FY11_12%20projection.pdf

Mandated Amount (AC Transit and BART only)	Non-mandated Amount	Minimum Service Level Gap Grant Amount
	\$79,873.00	

2. **What type of paratransit projects and programs will Measure B fund?** To answer this question, complete the Table 1 Attachment (Table 1 tab) in the Excel workbook. Describe the projects and/or programs your agency plans to implement with Measure B funding during fiscal year 2011-2012 (FY 11-12).

Continue to the next page of this application to answer question 2A.

2A. Please provide a short narrative description for each service component listed in question 2 and describe any planned changes. (max. 1,300 characters)

The City of Pleasanton Paratransit Service will continue to provide door-to-door services to Pleasanton & Sunol residents 60+ years and ADA eligible Pleasanton/Sunol residents 18+ years. The service is available Monday-Friday, 8:00 am to 5:00 pm, and Saturday, 9:00 am to 4:00 pm. There is a two week reservation window, with most clients reserving within the same week. Same day service is not available due to limited resources. The PPS service area covers all of Pleasanton and Sunol. Limited service for medical appointments is provided to San Ramon, Dublin and Livermore. The primary trip purposes are for medical appointments and basic living needs. Fares: in-town service for residents \$3.00 and non-residents \$3.50 and out-of-town service for residents \$3.50 and non-residents \$4.00. For FY 11-12, 350 unduplicated clients will be served and 16,000 rides will be provided. As Pleasanton's core paratransit service for Pleasanton, the goal is to reduce isolation, increase socialization, and encourage independent living, thereby minimizing the need for institutionalization and enhancing the quality of life for residents no longer able to drive. The City of Pleasanton is committed to this service and will contribute \$360,463 to the program or a subsidy of 67%.

3. Is your program currently meeting Minimum Service Levels? See the appendix.

- ☒ Yes
☐ No
☐ Not Applicable (*Americians with Disabilities Act (ADA) mandated provider*)

3A. If no, which ones are you not meeting and how?
(max. 255 characters)

4. How many potential riders do you estimate will use this service this coming fiscal year?
Fill in the box below.

Potential Riders in FY 11-12
350

5. Please provide details regarding your vehicle fleet. To answer this question, complete the Table 2 Attachment (Table 2 tab) in the Excel workbook.

6. Does your program provide meal delivery?

- ☐ Yes
☒ No

6A. If faced with revenue shortfalls, how do you balance meal delivery with trip requests?
(max. 255 characters)

7. Describe your driver training program. (max. 500 characters)

Monthly staff meetings include training on topics such as CPR & First Aid certification, review of daily inspections and safety protocols, updates on valley wide transit and social service agencies, customer service concerns, and emergency preparedness. One-on-one driver audits are completed biannually to assure all drivers meet safety standards. Random Drug and Alcohol Testing is completed on all drivers.

8. Describe your policies concerning timely pick-ups or drop-offs. Include what window your program allows, if there is a standard for the percentage of pick-ups or drop-offs that must occur within the window, the policy concerning early pick-ups, and whether there is a maximum amount of lateness after which you count a provider no-show or missed trip.
(max. 500 characters)

Door-to-Door on-time performance standards were developed using ADA guidelines, and focus on a pick-up window of 15 (+/-) minutes of stated times. The PPS Task Force standard is that 90% of all pick-ups shall occur within the 15 minute window.
A completely missed trip is noted as a pick-up more than one hour late. The PPS standard is no more than 24 missed trips per year.
On-time performance is tracked daily using software. Reports are generated and reviewed by staff and funding agencies.

9. Describe your policies concerning the maximum time a rider may be on a vehicle. Indicate if there is a maximum time, and if there is a standard for the percentage of total trips that must fall within this maximum time. (max. 255 characters)

The maximum time a rider may be on a PPS vehicle is one (1) hour. As part of the scheduling software criteria, PPS established a one (1) hour maximum ride time. All trips are to be within the one (1) hour ride time.

- 10. What are your policies for reserving trips?** What are your policies for reserving individual trips (including subscriptions/standing orders or same-day trips) and for reserving group/program trips? What advance notice do you require or allow? Are there limits on availability? *(max. 500 characters)*

A trip can be scheduled up to two (2) weeks in advance, with most riders reserving round trips. Rides are reserved on a first-call, first-served basis. Reservations for subscription trips are limited, and include primarily dialysis and frail nutrition site clients. Approximately 30% of the annual rides are subscribed. Due to service demands, PPS is not able to make same-day reservations or provide group trips.

- 11. How far in advance is a rider required to cancel a trip before you count the trip as a no show?** Describe these for each type of trip below. What is your policy concerning riders with repeated no-shows or late cancellations? Please describe your policy for subscriptions/standing orders, same-day trips, or group/program trips as applicable. *(max. 500 characters)*

The PPS Missed Service Policy states that patrons regardless of trip type can notify PPS of a schedule change up to two (2) hours before an appointment without being documented as a no-show. This policy provides progressive sanctions for patrons that display a pattern involving intentional, repeated, or regular "missed service" activity. The progression process ranges from counseling, a written warning, to a three (3) or six (6) day suspension. Riders can formally appeal any sanction.

- 12. What is the maximum and average time between receiving an application and enrolling an applicant in the program?** *(max. 255 characters)*

Applications are processed within five (5) days after they are received. Applications are accepted by mail, walk-in, or facsimile. During FY 09-10, 203 new clients registered and used PPS. In FY 10-11, it is estimated that 200 new riders will register.

- 13. Is there a waiting list?**

☐ Yes
☒ No

- 13A. If yes, what are the policies that apply to it? How many people are on it? What is the average wait?** Describe your answer in the box below. *(max. 500 characters)*

- 14. Describe your complaint and commendation process.** Describe your process from beginning to end, including instructions you provide to customers for filing complaints or commendations, your documentation procedures, your follow up, and any changes you have made to your program as a result of customer complaints and commendations.
(max. 500 characters)

Complaints/commendations are directed to the PPS Supervisor, who deals with the issues on a one-on-one basis. Suggestions/concerns come from a variety of sources, including: the annual evaluation tool, phone calls, City of Pleasanton web site, letters and suggestions from the PPS Task Force. Staff issues are dealt with directly by the Supervisor on a one-on-one basis and are documented in personnel files and are used in evaluations.
Safety bars were added to the bus as result of rider comment.

- 15. Describe how you will coordinate services with other Measure B paratransit services and/or mandated ADA paratransit services so that people can make trips throughout Alameda County.** Examples of coordination may include, but are not limited to, reciprocal fare agreements, reciprocal agreements to provide trips into adjoining areas, arrangements for clients to ride on other systems, and transfer arrangements. Attach copies of agreements or memoranda of understanding for coordination if available.
(max. 500 characters)

The City of Pleasanton maintains a MOU with Livermore Amador Valley Transit Authority (LAVTA) who serves as the primary ADA provider in the Tri-Valley. When PPS is at capacity or closed, LAVTA provides service to PPS ADA clients. Coordination of county-wide rides, transfer of clients, and joint marketing and training opportunities occur regularly. PPS and staff from Senior Support Program of the Tri-Valley provide rider assessment services as well as coordinate trips.

- 16. Describe planned outreach to ensure that potential users of the services, including coordinated services, learn about them.** (max. 500 characters)

Some of the outreach efforts include: development of a variety of written materials such as brochures and flyers, inclusion in the City's Park and Rec Activity Guide which is delivered to 28,000 households 3 times a year, updates on the City's web site, outreach fairs including the PPS Annual Transit Fair, listing in the Tri-Valley Pocket Guide for Human Services, and cross promotion during ticket sales (BART, Wheels, PPS tickets) of over \$60,000 annually.

- 17. Describe your planning process.** List all activities undertaken in connection with this plan, including consumer or public meetings; meetings with other agencies; presentations to boards, commissions, or committees; and provide general dates for these activities.
(see questions 17A through 17D that follow; max. 500 characters)

As part of the annual planning process, 750 PPS users were sent our service evaluations on March 21, 2011 seeking input on the program. A free ride was offered to anyone completing the survey with findings to be reviewed by the PPS Task Force and the Alameda CTC. Staff worked with the PPS Task Force to develop five (5) new outcome measures as goals for FY 10-11. The PPS Task Force reviewed the plan at its 1/21/11 & 4/15/11 meetings & the Sr Ctr Advisory Committee provided input on 1/10/11.

17A. Has this plan been reviewed by a local paratransit advisory committee?

- ☒ Yes
☐ No

17B. If yes, list the committee name and date of the meeting.

Pleasanton Paratransit Task Force, 1/21/11 & 4/15/11, Pleasanton City Council Mtg 5/3/11

17C. Describe any surveys or analysis conducted and staff reports. (max. 255 characters)

On March 21, 2011, 750 PPS users were sent surveys asking for feedback on the service. Free rides were provided to all who completed the survey. The survey findings will be reviewed by staff and PPS Task Force members and included in the year end report.

17D. Describe how the planning process is connected to the service plan: How do the planned services correspond to the results of the planning process? (max. 255 characters)

Input from the annual PPS survey and from the PPS Task Force is used to make improvements to the program. During FY 10-11, staff worked to increase awareness of PPS among younger ADA clients, which was an outcome measure developed by the PPS Task Force.

18. If proposing service changes, what identified needs or priorities will the proposed changes meet? What needs or priorities will the proposed service changes still not meet? (max. 500 characters)

PPS staff is not proposing any service changes for FY 11-12. Staff hopes to continue to meet the demand for door-to-door service and continue coordination with valley transit providers. With a new paratransit contractor (American Logistics) in the valley, PPS staff will work hard to maintain strong coordination efforts.

19. Describe how you will measure customer satisfaction, for example, by participating in a countywide rider survey, tracking customer comments, or other means? (max. 255 characters)

PPS staff will continue to complete annual PPS rider surveys, which is a valuable source of feedback. On-going feedback at staff meetings, PPS Task Force meetings, and the City Customer Service cards also provide feedback.

- 20. How will you obtain and/or track necessary financial and operating information for program management and reporting?** If private vendors or contractors provide the information, what steps will you take to verify or check the accuracy of the information? If performance data is collected by sampling, what steps will you take to ensure that samples are representative and randomized? *(max. 500 characters)*

Financial records management is done by the City of Pleasanton. Punch card sales and redemption procedures are as follows:
Punch cards are sold to Pleasanton residents at \$30.00; nonresidents \$35.00. Drivers punch the cards according to the destination. A daily record of punch card sales is maintained at the Senior Center and balances with the City's Finance Department's records.
Statistical record keeping is done through a software system and includes a variety of trip data.

- 21. During July 1, 2011 through June 30, 2012 (FY 11-12), what amount of Measure B (MB) Paratransit Funds will your agency receive and expend?** Fill in the boxes below.

Note: Interest/Other MB Income includes interest on unspent Measure B balances and other Measure B income, such as grant funds.

FY 10-11 Unspent MB Balance	MB Revenues in FY 11-12	Interest/Other MB Income	MB Expended in FY 11-12	Ending MB Balance
\$0.00	\$79,873.00	\$0.00	\$79,873.00	\$0.00

- 22. What amount of non-Measure B revenues will your agency receive during FY 11-12?** Fill in the box below if you will receive non-Measure B funds.

Non-Measure B Revenues
\$459,908.00

- 22A. Describe the specific types of non-Measure B funding your agency will receive.**
(max. 255 characters)

The following non - Measure B dollars are projected:
Fares -- \$48,000 MTC TDA 4.5 -- \$51,445 City of Pleasanton General funds -- \$360,463

- 23. Do you intend to apply for federal Section 5310 funds, Alameda CTC gap grant funds, or other grant funds in the next fiscal year?**

☐ Yes
☒ No

- 23A. If yes, describe the types of grant funds for which you intend to apply.**

--

24. Do you intend to apply for Minimum Service Level gap grant funding for the next fiscal year?

- ☐ Yes
☒ No

24A. If yes, please fill in the amount you intend to apply for in question 1 and complete question 32.

24B. If no, and your answer to question 3 is no, meaning you will not meet Minimum Service Levels, please explain. (max. 255 characters)

--

25. How do you plan to use undesignated reserve Measure B funds (FY 10-11 Unspent MB Balance from question 21)? Fill in the boxes below with any operating or capital Measure B reserves.

Operating Reserve <i>(eligible for up to three months of service funds)</i>	Capital Reserve <i>(may be held for up to three years)</i>	Date of Capital Reserve Initiation	Undesignated Funds <i>*(End MB – (operations + capital) = Undesignated)</i>

25A. Describe the use of the undesignated funds below. (max. 255 characters)

--

26. If applicable, why are the planned expenditures in FY 11-12 more than the amount of Measure B funds the agency expects to receive during FY 11-12? For instance, if your agency faces a funding shortage, will you use reserve Measure B funds from a previous fiscal year(s)? (max. 255 characters)

--

27. What are your FY 11-12 operating expenses by category? Fill in the boxes below. Provide additional information in questions 27A and 27B if you have contract and miscellaneous expenditures.

Labor, Fringe <i>(for recipient staff)</i>	Admin. Costs <i>(for printing, postage, supplies, etc.)</i>	Contracts <i>(see 27A below)</i>	Transportation <i>(expenses recipients paid, not included in contracts)</i>
\$480,969.00	\$2,364.00	\$5,300.00	\$40,955.00
Taxi Reimbursement	Meal Delivery	EBP Ticket Purchase	Miscellaneous <i>(see 27B below)</i>
\$0.00	\$0.00	\$0.00	\$10,193.00
Total Operating Expenses <i>(sum of all eight categories)</i>			
\$539,781.00			

27A. List the contracted firms below, and if more than one, list the amount your agency will pay to each. (max. 255 characters)

The City of Pleasanton does business with Trapeze Software (\$4,300 per year) for support & maintenance of the dispatch software and Alameda County Radio (\$1,000 per year) for repair of the bus radios.

27B. Describe any miscellaneous expenditures below; include the amounts for each item. (max. 255 characters)

Miscellaneous services are for Driver Training - including Defensive Driving classes, DOT Policy and Procedures, Capital One-on-One Driver Audits.

28. Of these total expenditures, what amount is allocated for the following?
Fill in the boxes below.

Management <i>(oversight, planning, budgeting, etc.)</i>	Customer Service and Outreach Activities	Trip Provision <i>(direct or contracted taxis, vans, shuttles, etc.)</i>
\$59,060.00	\$32,900.00	\$447,821.00

29. What are your planned Measure B capital expenditures during FY 11-12?
Fill in the box below.

Total Capital Expenditures
\$0.00

29A. Describe planned capital expenditures, such as purchase of vehicles or durable equipment, below. (max. 255 characters)

--

30. What are your anticipated net revenues? The box below autopopulates based on previous entries.

Net Revenues
\$0.00

31. Please provide information on the Governing Body Resolution to authorize submittal of the plan.

☐ Copy attached

☒ Pending action on: May 3, 2011 (indicated date this item is scheduled for action)

32. If requesting Minimum Service Level (MSL) funding, please complete the table and questions 32A through 32E below.

MSL Your Program Anticipates Not Meeting <i>(see appendix)</i>	Describe How Your Program Falls Below This MSL	MB Funds Requested to Meet This MSL

32A. Please explain any community-specific issues that impact your ability to not meet MSLs.
Please describe below. (max. 500 characters)

--

- 32B. Have you explored and documented other transportation options for seniors and people with disabilities provided by nonprofit organizations in your community that might also close this service gap. Please describe below. (max. 500 characters)**

- 32C. If MSL gap funding is not available to meet this need, are other funding sources available to meet this need? Please describe below. (max. 255 characters)**

- 32D. If other funding is not available, how will you prioritize which MSLs to cut? (max. 255 characters)**

- 32E. Does your program provide ADA-equivalent service to those awaiting certification, outside the ADA service corridor or needing transportation outside of ADA-available times in your jurisdiction? (max. 255 characters)**

Program Plan Application Appendix

PAPCO-approved Minimum Service Levels

	Minimum Service Level (MSL)	A Program <i>Exceeds</i> this MSL if ...
1.	Regarding who programs serve: <ul style="list-style-type: none"> • People 18 and above with disabilities who are unable to use fixed route services • Seniors 80 and above without proof of a disability 	<ul style="list-style-type: none"> • It serves minors with disabilities. • It serves seniors under 80 without proof of disability.
2.	Regarding the type of service programs provide: <ul style="list-style-type: none"> • Accessible individual demand-responsive service 	<ul style="list-style-type: none"> • It offers additional services for participants, such as group trips or meal delivery.
3.	Regarding the time and days service is provided: <ul style="list-style-type: none"> • At least five days per week between the hours of 8 a.m. and 5 p.m. (excluding holidays) 	<ul style="list-style-type: none"> • It offers service more than five days a week. • Its service hours begin before 8 a.m. and/or extend after 5 p.m.
4.	Regarding the service area of a program: <ul style="list-style-type: none"> • Residents using this program are able to meet life needs, including but not limited to travel to major medical facilities, full service grocery stores and other basic necessities, if ADA services, or coordination between base programs are unable to provide these trips. 	<ul style="list-style-type: none"> • It provides trips to locations beyond those which residents would travel to fulfill life needs, such as recreational trips outside city boundaries.
5.	Regarding fares: <ul style="list-style-type: none"> • Fares should be comparable to East Bay Paratransit and equated to distance for van/sedan trips • Fares for Taxi trips should not exceed 50 percent of the total cost of the trip. 	<ul style="list-style-type: none"> • Riders pay less than they would for a comparable trip on East Bay Paratransit for a van/sedan trip. • Riders pay less than 50 percent of the total cost of the taxi trip.
6.	Regarding interim service for individuals applying for or awaiting ADA certification: <ul style="list-style-type: none"> • Interim service should be provided within three business days on receipt of application. • Interim service should be provided at the request of a health care provider or ADA provider. 	<ul style="list-style-type: none"> • It provides interim service in less than three business days.
7.	Regarding reservations: <ul style="list-style-type: none"> • Programs should accept reservations between the hours of 8 a.m. and 5 p.m. Monday through Friday. 	<ul style="list-style-type: none"> • It accepts reservations before 8 a.m. and/or after 5 p.m. • It accepts reservations on weekends.

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012
Table 1 Attachment: Summary of Planned Projects

Note: Definitions for each drop-down menu appear as Comments (scroll over the column title or in the Review mode, choose "Show All Comments"). The document is set up to print Comments at the end.

[illegible]

*Percentage of total dollars spent to Measure B funds is relative to percentage of trips provided.
(Total \$/Measure B \$) approx. = (Total trips provided/Measure B-funded trips provided).

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012
Table 1 Attachment: Summary of Planned Projects

Cell: A5	
Comment: Project Category:	
	Disabled Services: Services primarily created for mobility for people with disabilities.
	Meals on Wheels: Delivery of meals.
	Senior & Disabled Services: Transportation services for seniors and people with disabilities.
	Senior Services: Services primarily created for senior mobility.
	Other: Use Other if none of the above apply, and define other by selecting Project Type (Column C) and providing Project Description (Column E).
Cell: B5	
Comment: Project Phase:	
	Construction (includes PS&E): Construction of a new capital project, including development of the preliminary engineering and construction documents: the plans, specifications, and estimates.
	Environmental: Preparation of environmental documents, such as those related to the California Environmental Quality Act (CEQA) or the National Environmental Policy Act (NEPA).
	Maintenance: Maintenance, repairs, renovation, or upgrade of existing facility or infrastructure.
	Operations: Operations such as transit, which may include routine maintenance and procurement, or lease of vehicles/equipment.
	Project Completion/Closeout: Inspection/project acceptance, final invoicing, final reporting, and processes for closing out project.
	Scoping, Feasibility, Planning: Early capital project phases, such as project scoping, feasibility studies, and planning.
	Other: Use if none of the above apply, and define the project phase by selecting Project Type (Column C) and describe the phase under Project Description (Column E).
Cell: C5	
Comment: Project Type:	
	Capital Purchase: Purchase of equipment, vehicles, or facilities.
	Customer Service and Outreach: Staffing and benefits for customer service as well as costs associated with marketing, education, outreach, and promotional campaigns and programs.
	EBP Ticket Purchase: Amounts paid to East Bay Paratransit for tickets plus associated costs, for example, distribution.
	Group Trips: One-way passenger trips considered group trips. Includes vehicle operation and contracts. See Individual Demand-response Trips.
	Individual Demand-response Trips: Taxi service, door-to-door trips, van trips, etc. Includes actual operation cost and contracts for vehicle operation, scheduling, dispatching, vehicle maintenance, supervision, and fare collection (including ticket or scrip printing and sales) for the purpose of carrying passengers.
	Management: Staffing and benefits to manage programs, projects, and services.
	Meal Delivery: Costs associated with vehicle operation, scheduling, dispatching, vehicle maintenance, and supervision for the purpose of delivering meals, whether provided in-house, through contracts, via taxicab, or by grantees.
	Shuttle or Fixed-route Trips: Shuttle service or fixed-route bus service, for example. Includes vehicle operation and contracts. See Individual Demand-response Trips.
	Other: Use if none of the above apply. Describe the Type under Project Description (Column E).
Cell: I5	
Comment: Project Status:	
	Choose project status on June 30, 2012: Planning in FY 11-12, Initiated in FY 11-12, Continuing or Ongoing, or Closed Out in FY 11-12.
Cell: K5	
Comment: Trip Type Description:	
	Lift/ramp Assisted: Trips that include lift or ramp assistance.
	Taxi Trips: Any type of taxi trip.
	Same-day Lift/ramp-assisted Trips: Trips that include lift or ramp assistance and are same-day service.
	Same-day Trips: Same-day service.
	Other: If Trip Type is not applicable to your program, choose Other and provide a description in Column K.

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012

Table 2 Attachment: Vehicle Fleet

Instructions: Please complete table below. If necessary, please contact your contractors to obtain the information.

[illegible]

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

Part I. General Program Information

- 1. Paratransit Program:** Livermore Amador Valley Transit Authority (LAVTA)
- 2. Program Manager/Representative:** Jeff Flynn, Kadri Külm
- 3. Program Plan Review Date and Time:** April 29, 3:15pm
- 4. Measure B Amount for Base Program Funding:** \$128,699
- 5. Measure B Amount for Minimum Service Level Grant:** N/A
- 6. Program Base Services Overview:** Refer to Table 1
- 7. Potential Riders Projected for next Fiscal Year:** 1,600
- 8. Total Rides Projected to be Provided in next Fiscal Year:** 45,600
- 9. Meal Delivery Program? _ Yes X No**
Measure B Funds Allocated to Meal Program: N/A
- 10. Purchasing EBP tickets? _ Yes X No**
Total EBP Tickets to be Purchased in Next Fiscal Year: N/A
- 11. Proposed changes for next Fiscal Year? X Yes _ No**

Changes: Dial-A-Ride operations is currently contracted out to a company called MV Transportation. As of July 1, 2011 the service will be provided by a new contractor American Logistics Company (ALC). With the new contractor all Dial-A-Ride policies will remain the same.

Part II. General Program Analysis

- 1. Efforts related to Coordination/Mobility Management**
Dial-A-Ride service area covers the cities of Livermore, Dublin & Pleasanton, & goes beyond the ADA 3/4 mile minimum boundary requirement along a fixed route. Through a memorandum of understanding, the City of Pleasanton provides ADA mandated coverage to Pleasanton residents for trips with both

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

an origin and destination in Pleasanton from 8:00am to 5:00pm Monday - Friday, and 9:00am & 4:00pm on Saturday. LAVTA provides ADA paratransit services both before & after Pleasanton's in-service hours as well as on Sundays in all three jurisdictions. LAVTA participates in the regional ADA eligibility determination program, as well as the RTC Card, and has extensive coordination efforts with Pleasanton Paratransit Service (PPS), County Connection in Contra Costa County, and the East Bay Paratransit. Through a MOU, PPS provides ADA mandated coverage to Pleasanton residents during the days & times they are operating & LAVTA provides ADA paratransit service when PPS is not operating.

- 2. Identified needs/priorities that will not be met by the Program**
None specified.
- 3. Status of Jurisdiction's PAPCO appointees/vacancies:** Refer to Cover Memo
- 4. Subcommittee comments from last year's program plan review**
 - You're doing a good job. I just have concerns about keeping the community informed, once you terminate of Route 55 so that they have alternative services.
 - A+ for optimism.
 - Do good work with limited budget.
 - Overall, good improvement.
 - Would like more dollars in taxi program.
 - Section 7 concern [Naomi said the base program should be separate from grant reporting as per ACTIA].
 - The fees are not giving a true picture.
 - Want to see more accessible taxis.
 - Agree that need accessible taxis. Overall, a good program.
 - Good job.
 - Basically a good program.
 - Excellent travel training program.
- 5. Final recommendation after last year's program plan review**

A motion to approve LAVTA's plan was made by Harriette Saunders and seconded by Audrey Lord-Hausman. The motion carried unanimously.

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

6. Staff identified questions for current fiscal year (PAPCO members can use these as examples during the question rounds)

- A. What elements of American Logistic's performance do you intend to monitor most closely at the beginning?
- B. How will the variety of vehicles affect chair size limitations?

7. Financial audit Program Compliance Report performed and compliance opinion given? X Yes _ No

8. Consumer involvement in planning process

LAVTA has a passenger relations committee (WHEELS Accessible Advisory Committee) that meets to discuss passenger concerns and aid LAVTA with the improvement of its services and facilities. The WAAC is comprised of membership from each jurisdiction and social/human services agencies. Service provision for patrons and the planning process for the implementation of new services is coordinated through the WAAC. Over the previous year, these meetings occurred on 9/8/10, 11/3/10, 1/5/11, & 3/2/11.

Part III. Financials

1. Finance Subcommittee Questions: To be provided at meeting

2. Revenue Trends: Refer to Cover Memo

3. Proportion of Measure B Funding: Refer to Cover Memo

Source(s) of other funding (if applicable): TDA, STA, FTA, passenger fares

4. Fund Reserves and Net Revenues Planned for 2011-2012

Fund balance--undesignated	\$0
Undesignated funds % of planned Meas B rev	0%
Reserve funds--designated for capital	\$0
Capital funds reserved < 4 years	N/A
Reserve funds--designated for operations	\$0
Reserve funds = or < than 3 months M B rev	N/A
Total Fund Reserves going into FY	\$0
Planned Net Revenue at end of FY	\$0

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**

Part IV. Minimum Service Level Grants

1. Applying for an MSL Grant? _ Yes X No

Amount of Request: \$_

2. Which other programs have applied for an MSL Grant and for how much?

3. MSL Gap(s) needing to be closed and application answers: Refer to Application PDF

4. Additional questions/comments about application for MSL Grant?

-

Part V. Preliminary Recommendation (Committee Member Notes)

With respect to this application, I want to send the following recommendation to the full PAPCO (*please check one*):

- ☐ Recommend **approval of base funding without MSL grant** (MSL Grant not requested or not recommended).
- ☐ Recommend **approval of base funding with MSL grant of \$_____**.
- ☐ Recommend **conditional approval with recommended actions** (for example, recommend funds continue to flow but place program on watch list and require quarterly reports to PAPCO, hold back funds until program updates plan or budget, recommend partial funding until specified actions are taken).

☐ Don't recommend approval.

**Alameda CTC Special Transportation for Seniors and People with Disabilities
Paratransit Program Plan Application Staff Summary Form
Fiscal Year 11/12**



Annual Paratransit Program Application for Measure B Funding

Fiscal Year 2011-2012 (July 1, 2011 through June 30, 2012)

Note: In July 2010, the Alameda County Transportation Improvement Authority (ACTIA) merged with the Alameda County Congestion Management Agency to become the Alameda County Transportation Commission (Alameda CTC). Agencies and jurisdictions that have paratransit pass-through fund agreements with ACTIA must continue to submit annual paratransit program application forms. See below for submittal instructions.

This document includes the PDF application form and instructions for submittal.

Requirements and Instructions

Measure B paratransit fund recipients are required to submit to the Alameda CTC one electronic version of two documents for the annual program application submittal.

Paratransit Program Application Deadline: April 8, 2011

The Annual Paratransit Program Application submittal includes a PDF and Table 1 and Table 2 Attachments for each program.

1. Paratransit Program Application (PDF)
2. Paratransit Program Application Table 1 and Table 2 Attachments (one Excel workbook)

Electronic submission: Save the online PDF form to your hard drive with your agency name and date in the file name (e.g., Albany_FY11-12_Paratransit_Program_Application_040611.pdf). You can start work on the PDF and finish it later; simply save it to your hard drive. Also, complete the Table 1 and Table 2 workbook and include your agency name and date in the file name. Submit one copy of both the PDF and Table 1 and Table 2 Attachments via email by April 8, 2011. Send it to narmenta@alamedactc.org. If you have questions, you can reach Naomi Armenta via email or at (510) 208-7469.

Paratransit Program Application

Due by April 8, 2011

Agency Name:	Livermore Amador Valley Transit Authority (LAVTA)
Date Submitted:	4/8/2011
Name and Title of Submitter:	Kadri Kulm, Paratransit Planner
Secondary Agency Contact Name:	Tamara Edwards, Financial Analyst
Phone Number:	925-455-7555
Fax:	925-443-1375
E-mail:	kkulm@lavta.org

Clearly label additional attachments as needed.

1. **What amount of funds are you applying for?** Fill in the boxes below. Note: Mandated and non-mandated funds should match the projects on the website at:
[http://www.actia2022.com/files/managed/Document/1900/RevDist%20FY11 12%20projection.pdf](http://www.actia2022.com/files/managed/Document/1900/RevDist%20FY11%2012%20projection.pdf)

Mandated Amount (AC Transit and BART only)	Non-mandated Amount	Minimum Service Level Gap Grant Amount
\$128,698.86		

2. **What type of paratransit projects and programs will Measure B fund?** To answer this question, complete the Table 1 Attachment (Table 1 tab) in the Excel workbook. Describe the projects and/or programs your agency plans to implement with Measure B funding during fiscal year 2011-2012 (FY 11-12).

Continue to the next page of this application to answer question 2A.

2A. Please provide a short narrative description for each service component listed in question 2 and describe any planned changes. (max. 1,300 characters)

All Measure B funding will be used to provide ADA mandated door-to-door paratransit service called Wheels Dial-A-Ride. Dial-A-Ride service area covers the cities of Livermore, Dublin & Pleasanton, & goes beyond the ADA 3/4 mile minimum boundary requirement along a fixed route. Dial-A-Ride operates from 4:30am to 1:30am seven days a week.

Through a memorandum of understanding, the City of Pleasanton provides ADA mandated coverage to Pleasanton residents for trips with both an origin and destination in Pleasanton from 8:00am to 5:00pm Monday - Friday, and 9:00am & 4:00pm on Saturday. LAVTA provides ADA paratransit services both before & after Pleasanton's in-service hours as well as on Sundays in all three jurisdictions.

Dial-A-Ride operations is currently contracted out to a company called MV Transportation. As of July 1, 2011 the service will be provided by a new contractor American Logistics Company (ALC). With the new contractor all Dial-A-Ride policies will remain the same.

3. Is your program currently meeting Minimum Service Levels? See the appendix.

☐ Yes

☐ No

☒ Not Applicable (*Americians with Disabilities Act (ADA) mandated provider*)

3A. If no, which ones are you not meeting and how?

(max. 255 characters)

4. How many potential riders do you estimate will use this service this coming fiscal year?

Fill in the box below.

**Potential Riders
in FY 11-12**

1,600

5. Please provide details regarding your vehicle fleet. To answer this question, complete the Table 2 Attachment (Table 2 tab) in the Excel workbook.

6. Does your program provide meal delivery?

☐ Yes

☒ No

6A. If faced with revenue shortfalls, how do you balance meal delivery with trip requests?
(max. 255 characters)

N/A

7. Describe your driver training program. (max. 500 characters)

Starting July 1, 2011, American Logistics Company (ALC) will train drivers. Drivers will undergo 40 hours of training before starting work focusing on passenger safety, defensive driving, customer sensitivity, and the ADA. Behind the wheel training will also be provided. Before being hired by ALC, all drivers must already be licensed. ALC will perform background checks, monitor insurance, licenses, and drug testing required by California and Federal law as MV Transportation does today.

8. Describe your policies concerning timely pick-ups or drop-offs. Include what window your program allows, if there is a standard for the percentage of pick-ups or drop-offs that must occur within the window, the policy concerning early pick-ups, and whether there is a maximum amount of lateness after which you count a provider no-show or missed trip.
(max. 500 characters)

LAVTA has the policy of a 30 minute window for all pick-ups on WHEELS Dial-A-Ride. The vehicle can be at a clients location from 15 minutes before to 15 minutes after the scheduled pick-up time. If the patron is picked up after the designated window, then the trip is for all intents and purposes considered a late pickup, WHEELS Dial-A-Ride responsibility. Patrons are provided a free ride if the vehicle arrives more than 30 minutes after the end of the pickup window.

9. Describe your policies concerning the maximum time a rider may be on a vehicle. Indicate if there is a maximum time, and if there is a standard for the percentage of total trips that must fall within this maximum time. (max. 255 characters)

The general operational standard is that Dial-A-Ride trips should not take longer than the same trip on fixed route would take, including walking to/from bus stops and transferring. Trip times over this amount of time are generally considered excessive.

- 10. What are your policies for reserving trips?** What are your policies for reserving individual trips (including subscriptions/standing orders or same-day trips) and for reserving group/program trips? What advance notice do you require or allow? Are there limits on availability? *(max. 500 characters)*

All trips need to be reserved 1 to 7 days in advance. Reservations are taken on the weekdays from 8am to 5pm and on the weekends from 8am to 4pm. If customer's requested pick-up time is not available, customer is offered alternative pick-up times up to one hour before and after the requested time in accordance with the ADA.

- 11. How far in advance is a rider required to cancel a trip before you count the trip as a no show?** Describe these for each type of trip below. What is your policy concerning riders with repeated no-shows or late cancellations? Please describe your policy for subscriptions/standing orders, same-day trips, or group/program trips as applicable. *(max. 500 characters)*

All rides need to be cancelled at least 2 hours before the scheduled pick-up time. Riders who have 3 or more "missed services" (no-shows and late cancellations) in a calendar month AND the ratio of "missed services" divided by trips taken is more than 20% will have the following sanctions imposed on a progressive basis (# of months is calculated over a rolling 24 month period):

1. Phone call
2. Warning letter

- 12. What is the maximum and average time between receiving an application and enrolling an applicant in the program?** *(max. 255 characters)*

LAVTA has an ADA mandated 21 calendar day window for the completion of applications. Average completion time is 7-10 days.

- 13. Is there a waiting list?**

- ☐ Yes
☒ No

- 13A. If yes, what are the policies that apply to it? How many people are on it? What is the average wait?** Describe your answer in the box below. *(max. 500 characters)*

N/A

- 14. Describe your complaint and commendation process.** Describe your process from beginning to end, including instructions you provide to customers for filing complaints or commendations, your documentation procedures, your follow up, and any changes you have made to your program as a result of customer complaints and commendations.
(max. 500 characters)

Both paratransit and fixed route patrons can either call customer service line at 925-455-7500 or enter their complaint via the online form on wheelsbus.com. When patrons file a complaint, the complaint and all information are entered into a web-based customer service database, which assigns the complaint to a LAVTA or contractor staff member based on the department in question. The staff person has 2 days to make a preliminary response & 7 to ultimately resolve/close the complaint.

- 15. Describe how you will coordinate services with other Measure B paratransit services and/or mandated ADA paratransit services so that people can make trips throughout Alameda County.** Examples of coordination may include, but are not limited to, reciprocal fare agreements, reciprocal agreements to provide trips into adjoining areas, arrangements for clients to ride on other systems, and transfer arrangements. Attach copies of agreements or memoranda of understanding for coordination if available.
(max. 500 characters)

LAVTA participates in the regional ADA eligibility determination program, as well as the RTC Card, and has extensive coordination efforts with Pleasanton Paratransit Service (PPS), County Connection in Contra Costa County, and the East Bay Paratransit.

Through a MOU, PPS provides ADA mandated coverage to Pleasanton residents during the days & times they are operating & LAVTA provides ADA paratransit service when PPS is not operating.

- 16. Describe planned outreach to ensure that potential users of the services, including coordinated services, learn about them.** (max. 500 characters)

LAVTA fully markets its Fixed Route services and provides information to clients desiring information regarding the complimentary paratransit services. The LAVTA Staff also visit senior centers and other community events to provide information about different services, including the complimentary wheelchair marking and tether strap program and Para-Taxi program.

- 17. Describe your planning process.** List all activities undertaken in connection with this plan, including consumer or public meetings; meetings with other agencies; presentations to boards, commissions, or committees; and provide general dates for these activities.
(see questions 17A through 17D that follow; max. 500 characters)

LAVTA has a passenger relations committee (WHEELS Accessible Advisory Committee) that meets to discuss passenger concerns and aid LAVTA with the improvement of its services and facilities. The WAAC is comprised of membership from each jurisdiction and social/human services agencies. Service provision for patrons and the planning process for the implementation of new services is coordinated through the WAAC. Over the previous year, these meetings occurred on 9/8/10, 11/3/10, 1/5/11, & 3/2/11.

17A. Has this plan been reviewed by a local paratransit advisory committee?

- ☐ Yes
☒ No

17B. If yes, list the committee name and date of the meeting.

The advisory committee will review the plan at their May 11, 2011 meeting.

17C. Describe any surveys or analysis conducted and staff reports. (max. 255 characters)

LAVTA performs an annual customer service survey of Dial-A-Ride users. In addition, ACTIA performed a survey in 2010. LAVTA uses Trapeze to analyze trip patterns and determine how to most efficiently schedule trips.

17D. Describe how the planning process is connected to the service plan: How do the planned services correspond to the results of the planning process? (max. 255 characters)

The service is constantly under review by staff but is not subject to any major planning process at this time. The public is welcome to comment to staff and to the Board in person, via mail, via email, or telephone.

18. If proposing service changes, what identified needs or priorities will the proposed changes meet? What needs or priorities will the proposed service changes still not meet? (max. 500 characters)

There are no planned changes to policies or service area. LAVTA exceeds the ADA minimum requirement. The operator will change in July 1, 2011 but all policies, fares, reservations, etc will remain exactly as they are today.
The change in contractor will provide fiscal savings to LAVTA to continue to allow LAVTA to exceed the ADA minimum mandate. Passengers will see a wider variety of vehicles including sedans and accessible minivans to better serve their needs.

19. Describe how you will measure customer satisfaction, for example, by participating in a countywide rider survey, tracking customer comments, or other means? (max. 255 characters)

LAVTA measures customer satisfaction by participating in countywide rider surveys and tracking customer comments. It has also been LAVTA's experience that the Wheels Accessible Advisory Committee (WAAC) is a great source of customer satisfaction.

- 20. How will you obtain and/or track necessary financial and operating information for program management and reporting?** If private vendors or contractors provide the information, what steps will you take to verify or check the accuracy of the information? If performance data is collected by sampling, what steps will you take to ensure that samples are representative and randomized? (max. 500 characters)

The contractor is required to submit monthly invoices and detailed records on paratransit service. Trips, fares, hours, and miles are reviewed closely before accepting the materials for payment. LAVTA also tracks vehicles in the field and listens to and reviews phone calls.

- 21. During July 1, 2011 through June 30, 2012 (FY 11-12), what amount of Measure B (MB) Paratransit Funds will your agency receive and expend?** Fill in the boxes below.

Note: Interest/Other MB Income includes interest on unspent Measure B balances and other Measure B income, such as grant funds.

FY 10-11 Unspent MB Balance	MB Revenues in FY 11-12	Interest/Other MB Income	MB Expended in FY 11-12	Ending MB Balance
\$0.00	\$128,698.86	\$0.00	\$128,698.86	\$0.00

- 22. What amount of non-Measure B revenues will your agency receive during FY 11-12?** Fill in the box below if you will receive non-Measure B funds.

Non-Measure B Revenues
\$1,268,714.14

- 22A. Describe the specific types of non-Measure B funding your agency will receive.** (max. 255 characters)

TDA, STA, FTA, passenger fares

- 23. Do you intend to apply for federal Section 5310 funds, Alameda CTC gap grant funds, or other grant funds in the next fiscal year?**

☒ Yes
☐ No

- 23A. If yes, describe the types of grant funds for which you intend to apply.**

LAVTA intends to apply for any available grants.

24. Do you intend to apply for Minimum Service Level gap grant funding for the next fiscal year?

- ☐ Yes
☒ No

24A. If yes, please fill in the amount you intend to apply for in question 1 and complete question 32.

24B. If no, and your answer to question 3 is no, meaning you will not meet Minimum Service Levels, please explain. (max. 255 characters)

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25. How do you plan to use undesignated reserve Measure B funds (FY 10-11 Unspent MB Balance from question 21)? Fill in the boxes below with any operating or capital Measure B reserves.

Operating Reserve <i>(eligible for up to three months of service funds)</i>	Capital Reserve <i>(may be held for up to three years)</i>	Date of Capital Reserve Initiation	Undesignated Funds <i>*(End MB – (operations + capital) = Undesignated)</i>
\$0.00	\$0.00	0	\$0.00

25A. Describe the use of the undesignated funds below. (max. 255 characters)

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26. If applicable, why are the planned expenditures in FY 11-12 more than the amount of Measure B funds the agency expects to receive during FY 11-12? For instance, if your agency faces a funding shortage, will you use reserve Measure B funds from a previous fiscal year(s)? (max. 255 characters)

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27. What are your FY 11-12 operating expenses by category? Fill in the boxes below. Provide additional information in questions 27A and 27B if you have contract and miscellaneous expenditures.

Labor, Fringe <i>(for recipient staff)</i>	Admin. Costs <i>(for printing, postage, supplies, etc.)</i>	Contracts <i>(see 27A below)</i>	Transportation <i>(expenses recipients paid, not included in contracts)</i>
\$89,752.00	\$40,732.00	\$1,240,000.00	
Taxi Reimbursement	Meal Delivery	EBP Ticket Purchase	Miscellaneous <i>(see 27B below)</i>
\$10,000.00			\$16,929.00
Total Operating Expenses <i>(sum of all eight categories)</i>			
\$1,397,413.00			

27A. List the contracted firms below, and if more than one, list the amount your agency will pay to each. (max. 255 characters)

American Logistics Company

27B. Describe any miscellaneous expenditures below; include the amounts for each item. (max. 255 characters)

Membership dues \$1,017, taxes and fees \$271, Insurance \$7,342, Non-contracted maintenance \$5,000, Professional services \$3,300

28. Of these total expenditures, what amount is allocated for the following?
Fill in the boxes below.

Management <i>(oversight, planning, budgeting, etc.)</i>	Customer Service and Outreach Activities	Trip Provision <i>(direct or contracted taxis, vans, shuttles, etc.)</i>
\$79,329.00	\$0.00	\$1,240,000.00

29. What are your planned Measure B capital expenditures during FY 11-12?
Fill in the box below.

Total Capital Expenditures
\$0.00

29A. Describe planned capital expenditures, such as purchase of vehicles or durable equipment, below. (max. 255 characters)

None

30. What are your anticipated net revenues? The box below autopopulates based on previous entries.

Net Revenues
\$0.00

31. Please provide information on the Governing Body Resolution to authorize submittal of the plan.

☒ Copy attached
☐ Pending action on: (indicated date this item is scheduled for action)

32. If requesting Minimum Service Level (MSL) funding, please complete the table and questions 32A through 32E below.

MSL Your Program Anticipates Not Meeting <i>(see appendix)</i>	Describe How Your Program Falls Below This MSL	MB Funds Requested to Meet This MSL

32A. Please explain any community-specific issues that impact your ability to not meet MSLs.
 Please describe below. (max. 500 characters)

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32B. Have you explored and documented other transportation options for seniors and people with disabilities provided by nonprofit organizations in your community that might also close this service gap. Please describe below. (max. 500 characters)

32C. If MSL gap funding is not available to meet this need, are other funding sources available to meet this need? Please describe below. (max. 255 characters)

32D. If other funding is not available, how will you prioritize which MSLs to cut? (max. 255 characters)

32E. Does your program provide ADA-equivalent service to those awaiting certification, outside the ADA service corridor or needing transportation outside of ADA-available times in your jurisdiction? (max. 255 characters)

Program Plan Application Appendix

PAPCO-approved Minimum Service Levels

	Minimum Service Level (MSL)	A Program <i>Exceeds</i> this MSL if ...
1.	Regarding who programs serve: <ul style="list-style-type: none"> • People 18 and above with disabilities who are unable to use fixed route services • Seniors 80 and above without proof of a disability 	<ul style="list-style-type: none"> • It serves minors with disabilities. • It serves seniors under 80 without proof of disability.
2.	Regarding the type of service programs provide: <ul style="list-style-type: none"> • Accessible individual demand-responsive service 	<ul style="list-style-type: none"> • It offers additional services for participants, such as group trips or meal delivery.
3.	Regarding the time and days service is provided: <ul style="list-style-type: none"> • At least five days per week between the hours of 8 a.m. and 5 p.m. (excluding holidays) 	<ul style="list-style-type: none"> • It offers service more than five days a week. • Its service hours begin before 8 a.m. and/or extend after 5 p.m.
4.	Regarding the service area of a program: <ul style="list-style-type: none"> • Residents using this program are able to meet life needs, including but not limited to travel to major medical facilities, full service grocery stores and other basic necessities, if ADA services, or coordination between base programs are unable to provide these trips. 	<ul style="list-style-type: none"> • It provides trips to locations beyond those which residents would travel to fulfill life needs, such as recreational trips outside city boundaries.
5.	Regarding fares: <ul style="list-style-type: none"> • Fares should be comparable to East Bay Paratransit and equated to distance for van/sedan trips • Fares for Taxi trips should not exceed 50 percent of the total cost of the trip. 	<ul style="list-style-type: none"> • Riders pay less than they would for a comparable trip on East Bay Paratransit for a van/sedan trip. • Riders pay less than 50 percent of the total cost of the taxi trip.
6.	Regarding interim service for individuals applying for or awaiting ADA certification: <ul style="list-style-type: none"> • Interim service should be provided within three business days on receipt of application. • Interim service should be provided at the request of a health care provider or ADA provider. 	<ul style="list-style-type: none"> • It provides interim service in less than three business days.
7.	Regarding reservations: <ul style="list-style-type: none"> • Programs should accept reservations between the hours of 8 a.m. and 5 p.m. Monday through Friday. 	<ul style="list-style-type: none"> • It accepts reservations before 8 a.m. and/or after 5 p.m. • It accepts reservations on weekends.

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012
Table 1 Attachment: Summary of Planned Projects

Note: Definitions for each drop-down menu appear as Comments (scroll over the column title or in the Review mode, choose "Show All Comments"). The document is set up to print Comments at the end.

Project Description								Status	Deliverables				Planned Expenditures			
Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H	Column I	Column J	Column K	Column L	Column M	Column N	Column O	Column P	Column Q
<div>Project Category</div> <div>Drop-down Menu</div>	<div>Project Phase</div> <div>Drop-down Menu</div>	<div>Project Type</div> <div>Drop-down Menu</div>	<div>Project Name</div>	<div>Project Description (including type of vehicle, accessibility status, and eligibility requirements)</div>	<div>Project Service Area, Days/Hours of Service, and Trip Limits per Year per Rider</div>	<div>Rider Fares</div>	<div>Provider Average Cost per Trip</div>	<div>Project Status (at the end of June 2012)</div> <div>Drop-down Menu</div>	<div>Quantity Planned Completed by June 2012 (total number of one-way passenger trips, tickets purchased, etc.)</div>	<div>Trip Type Description (other details about trip service)</div> <div>Drop-down Menu</div>	<div>Planned Number of Trips Funded by Measure B FY 11-12*</div>	<div>Miscellaneous (other details about trip or program)</div>	<div>Measure B Paratransit Pass-through Expenditures FY 11-12</div>	<div>Other Measure B Funds to Be Expended on Project in FY 11-12 (includes gap or MSL grants, stabilization)</div>	<div>Other Non-Measure B Funds to Be Expended on Project in FY 11-12 (includes the general fund)</div>	<div>Total Project Cost in FY 11-12 (columns N+O+P=Q)</div>
		Individual Demand-response Trips	WHEELS Dial-A-Ride	Transportation provided for ADA paratransit eligible clients	Service Area: Livermore, Dublin, and Pleasanton; Days/Hours: 7 days a week from 4:30am to 1:30am	\$3.50 each way	\$25 per trip	Continuing or Ongoing	45,600	Other (describe in Column K)	5,148	Lift/Ramp assisted trips for the riders who need a lift/ramp, and non-accessible vehicle trips for riders who do not need a lift/ramp.	\$128,699	\$0.00	\$1,243,114.14	\$1,371,813.00
Disabled Services	Operations															
																\$0.00
																\$0.00
																\$0.00
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								TOTALS:	\$45,600.00		5148		\$128,698.86	\$0.00	\$1,243,114.14	\$1,371,813.00

*Percentage of total dollars spent to Measure B funds is relative to percentage of trips provided.
(Total \$/Measure B \$) approx. = (Total trips provided/Measure B-funded trips provided).

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012
Table 1 Attachment: Summary of Planned Projects

Cell: A5

Comment: Project Category:

- Disabled Services: Services primarily created for mobility for people with disabilities.
- Meals on Wheels: Delivery of meals.
- Senior & Disabled Services: Transportation services for seniors and people with disabilities.
- Senior Services: Services primarily created for senior mobility.
- Other: Use Other if none of the above apply, and define other by selecting Project Type (Column C) and providing Project Description (Column E).

Cell: B5

Comment: Project Phase:

- Construction (includes PS&E): Construction of a new capital project, including development of the preliminary engineering and construction documents: the plans, specifications, and estimates.
- Environmental: Preparation of environmental documents, such as those related to the California Environmental Quality Act (CEQA) or the National Environmental Policy Act (NEPA).
- Maintenance: Maintenance, repairs, renovation, or upgrade of existing facility or infrastructure.
- Operations: Operations such as transit, which may include routine maintenance and procurement, or lease of vehicles/equipment.
- Project Completion/Closeout: Inspection/project acceptance, final invoicing, final reporting, and processes for closing out project.
- Scoping, Feasibility, Planning: Early capital project phases, such as project scoping, feasibility studies, and planning.
- Other: Use if none of the above apply, and define the project phase by selecting Project Type (Column C) and describe the phase under Project Description (Column E).

Cell: C5

Comment: Project Type:

- Capital Purchase: Purchase of equipment, vehicles, or facilities.
- Customer Service and Outreach: Staffing and benefits for customer service as well as costs associated with marketing, education, outreach, and promotional campaigns and programs.
- EBP Ticket Purchase: Amounts paid to East Bay Paratransit for tickets plus associated costs, for example, distribution.
- Group Trips: One-way passenger trips considered group trips. Includes vehicle operation and contracts. See Individual Demand-response Trips.
- Individual Demand-response Trips: Taxi service, door-to-door trips, van trips, etc. Includes actual operation cost and contracts for vehicle operation, scheduling, dispatching, vehicle maintenance, supervision, and fare collection (including ticket or scrip printing and sales) for the purpose of carrying passengers.
- Management: Staffing and benefits to manage programs, projects, and services.
- Meal Delivery: Costs associated with vehicle operation, scheduling, dispatching, vehicle maintenance, and supervision for the purpose of delivering meals, whether provided in-house, through contracts, via taxicab, or by grantees.
- Shuttle or Fixed-route Trips: Shuttle service or fixed-route bus service, for example. Includes vehicle operation and contracts. See Individual Demand-response Trips.
- Other: Use if none of the above apply. Describe the Type under Project Description (Column E).

Cell: I5

Comment: Project Status:

- Choose project status on June 30, 2012: Planning in FY 11-12, Initiated in FY 11-12, Continuing or Ongoing, or Closed Out in FY 11-12.

Cell: K5

Comment: Trip Type Description:

- Lift/ramp Assisted: Trips that include lift or ramp assistance.
- Taxi Trips: Any type of taxi trip.
- Same-day Lift/ramp-assisted Trips: Trips that include lift or ramp assistance and are same-day service.
- Same-day Trips: Same-day service.
- Other: If Trip Type is not applicable to your program, choose Other and provide a description in Column K.

Alameda CTC Paratransit Program Application - July 1, 2011 through June 30, 2012

Table 2 Attachment: Vehicle Fleet

Instructions: Please complete table below. If necessary, please contact your contractors to obtain the information.

[illegible]