

## FINAL REPORT

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## RURAL TRANSPORTATION NEEDS ASSESSMENT AND OPTIONS ANALYSIS

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## Rural Mobility Study Final Report

### Introduction

This report presents the results of the Rural Transportation Needs Assessment and Options Analysis. The first task consisted of an inventory of transportation resources in the rural area in Washington, Warren and northern Saratoga counties surrounding the Glens Falls metropolitan area. The second task identified the transportation challenges facing residents of this area and quantified the mobility needs based on demographic analysis of the region. The third task produced a set of alternatives for addressing those needs and the fourth task consisted of public outreach and a survey to gather input on the findings of the study.

While social service agency clients and other transportation-disadvantaged individuals (older adults, people with disabilities, low-income families) constitute much of the population that faces mobility challenges in the study region, the study is not restricted to them. It also includes consideration of working-age people with no disabilities and moderate income who may, nonetheless, face mobility challenges or be one unlucky break away from facing serious hardship.

While it is far beyond the scope of this study to solve the economic challenges facing rural upstate New York, identifying the relationship between trends in the employment landscape and mobility is crucial to understanding the feasibility of potential improvements in transportation access in rural areas.

### **Inventory of Existing Services**

The study was intended to assess gaps in rural transportation for the entire population. Some of the transportation services listed below are available only to certain segments of the population. Since non-driving populations are by default most vulnerable to the need for transportation, this inventory attempts to catalog the existing services. Hence, the limitations of the systems are listed in terms of trip purpose, trip length, timing, etc. By showing which services are provided, this plan attempts to highlight the gaps in services that are missing.

The first step in building the inventory of existing services was assembling the list of agencies to contact. A/GFTC provided lists of agencies that had been involved with the Coordinated Human Services Transportation Plan (latest update 2014) and requests for funding from the federal section 5310 (Elders and Persons with Disabilities) program. The consultant team augmented this list with a few other organizations that were found through Internet searches and recommendations from other agencies.

The next step was to develop a series of questions to ask the agencies during telephone interviews. The questions covered details about transportation services that the agencies operated or contracted for, as well as information about transportation needs among their client populations. In this way, the interview served as both a means to assemble the inventory as well as stakeholder outreach regarding unmet needs.

The following sections present the results of the inventory. Greater Glens Falls Transit is included for the sake of completeness, even though the urban area where its service operates is not the focus of the study.

#### Greater Glens Falls Transit

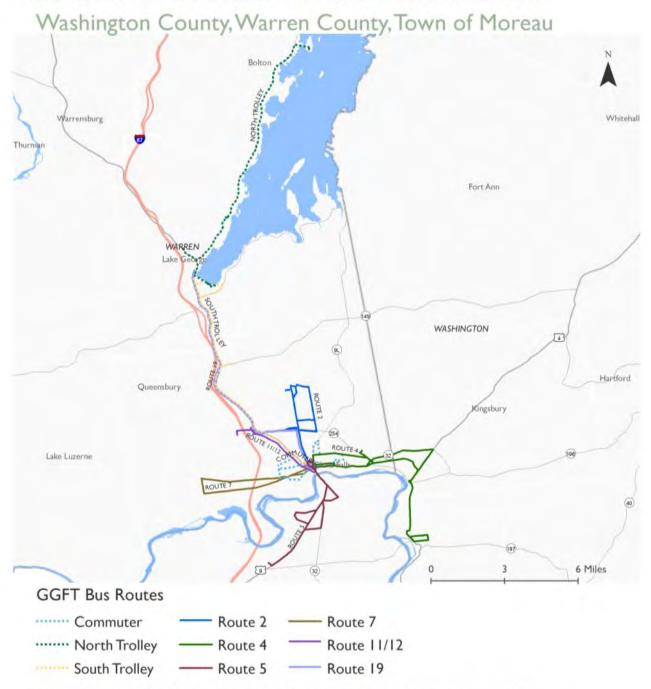
GGFT began operation in 1984 through a collaborative agreement among 11 contiguous municipalities. Today it operates a fleet of 18 transit vehicles and carries over 350,000 riders a year primarily in the census defined Glens Falls urban area which stretches across portions of Warren, Washington and northern Saratoga counties from Lake George (and Bolton Landing in the summer) south to the Towns of Moreau and Fort Edward. Its sole mission is transportation and has an annual operating budget of \$1.8 million. Year-round service operates from 6:30am through 10:00pm Monday through Friday with a somewhat more limited schedule on Saturdays. GGFT also operates a significant summer season trolley bus service between the Bolton Landing/Lake George area and Glens Falls seven days a week from 8:00am through 10:45pm from late June through Labor Day (and on weekends in spring and Fall). See Figure 1 for a map of GGFT bus routes.

The service level varies by route, with headways 30 minutes along a principal main north-south travel corridor that includes US Rte 4 in Fort Edward north along Rt 32 and US Rt 9 to Queensbury. Less frequent hourly and feeder routes extend this corridor to Lake George and additional points west and south to Moreau. Summer trolley service operates along Rt 9 and 9N at 15-30 minute intervals. GGFT also operates ADA complementary paratransit service, called FAME.

Over the years in general, GGFT has periodically studied and considered various types of scheduled transit services in more rural portions of the area but has consistently found insufficient demand to justify the local financial support to make them feasible. The only exception to this has been its summer service along the west shore of Lake George to Bolton Landing. This summer operation to Bolton Landing runs every two hours and carries approximately 2,500 riders per season. In 2014 GGFT did try extending the Bolton Landing operating season in the spring and fall but found very limited passenger demand and discontinued the service. Other rural service attempts include: a shuttle connection between Lake George and Warrensburg/Thurman to connect to a scenic train in 2015 but here also found <u>very</u> limited passenger demand and subsequently could not justify necessary local funding to support continued operation; and many years ago (1990's) GGFT ran a local shuttle in and around the Village of Whitehall but here again found the passenger demand to be very limited and the service was discontinued.

Figure 1

### A/GFTC Greater Glens Falls Transit



#### Non-profit and Social Service Agencies

Of the 24 non-profit organizations on the contact list, the consultant team was able to conduct interviews with and obtain information from 15. The other organizations were non-responsive in spite of multiple attempts via telephone and email. The results of the interviews are presented below and summarized in Table 1.

The largest transportation resource among the non-profit and social service agencies belongs to **CWI** (Community, Work and Independence). This agency owns five large buses and 16 cutaway vans based on a Ford F450 chassis. These vehicles transport individuals to CWI's many facilities for its day programs covering a wide range of services. It also owns a fleet of sedans and minivans for its resident program. While much of its service is operated in the urban area, CWI's reach does cover the rural portions of the A/GFTC region as well. Its vehicles operate primarily between 6:00 a.m. and 10:00 a.m. and then between 1:00 p.m. and 5:00 p.m. to transport clients to and from the day programs. CWI employs 23 full-time drivers and resident employees drive the smaller vehicles as needed. Annual funding, consisting of state and federal funds, amounts to about \$1 million. The transit vehicles carry an average of 486 riders per day, with annual ridership of 107,000. CWI serves all ages, from youth to elderly, as well as low-income individuals.

The next largest operation surveyed is the **Fort Hudson Nursing Center**. It owns seven wheelchair-accessible vans, which operate primarily between 7:00 a.m. and 9:00 a.m. and then between 2:00 p.m. and 5:30 p.m. These are operated by 6 part-time drivers. Half of the funding comes from the federal section 5310 program administered by NYSDOT and the other half comes from internal sources. Total annual funding is roughly \$150,000, serving an annual ridership of about 20,000 passengers. The vehicles can operate within a 15-mile radius of the facility, meaning that much of the service occurs within the urban area. The passengers are mostly Medicaid-eligible and fit within the guidelines of the 5310 program. Riders are carried to and from adult day programs at the facility, and residents are transported to medical appointments, to grocery stores, and to social activities.

The third largest operation interviewed is the **Liberty House Foundation**, which primarily serves mentally ill and developmentally disabled people. It owns five vans, four with a capacity of 12 passengers and one with a capacity of 8 passengers. A total of eight drivers are employed. Funding is derived from a variety of sources, including the Office for Persons with Developmental Disabilities, Office of Mental Health, ACCES-VR, and Counties (Warren & Washington). The vehicles carry about 40 passengers per day for an annual total of about 8,000 trips. These trips include going to and from the facility, as well as medical appointments, grocery shopping and social activities. The geographic area served includes Warren and Washington counties, specifically Warrensburg, Bolton Landing, Lake George, Fort Edward, Hudson Falls, Queensbury, Glens Falls, South Glens Falls and part of Fort Ann. Much of the transportation service occurs in the urban area.

Eight of the respondents had small fleets of three or fewer vehicles.

- **Cornell Cooperative Extension Warren County** Three minivans operated by 10 drivers. These are used only in conjunction with educational programs, either for the educators to deliver the program or occasionally for participants to attend the programs. The funding comes from fundraising and amounts to \$30,000 annually. The populations served include senior citizens for the Master Gardener program, youth, and low income households.
- **Conkling Center** Two MV-1 vans which can accommodate up to three adults (two if one is in a wheelchair). These vans are operated by four parttime drivers. The primary population served is older adults (55 plus) who can independently get in or out of the vehicle. Annual funding is approximately \$120,000, derived from the Center's endowment, grants and donations. Total annual ridership is in the range of 300 trips, plus or minus 50. The vans serve parts of Warren, Washington, and northern Saratoga counties within a radius of 25 miles from Glens Falls. All trip purposes are served, but service is limited by the available funding. A significant portion of operation is in urban area.
- **Greenwich Interfaith Fellowship** Two vans and volunteer drivers (approximately 23) driving their own vehicles. The vast majority of trips are for medical appointments. Funding is derived from the United Fund for the volunteer drivers and from the Interfaith Council of Churches for the van program. The program overall provides between 450 and 500 trips per year, with the majority (over 300) provided by volunteer drivers. Medical trips are limited to 4 per month for an individual. A limited number of grocery runs to Comfort Food and Hannaford are also operated (about once per week).
- Glens Falls Hospital Behavioral Health Services One 12passenger van operated by a staff member. Funding comes out of the hospital's general budget. Of the 30 or so people in the program, the van serves about two thirds of them, providing trips to and from the facility. The geographic area covers parts of Glens Falls and Hudson Falls.
- **Glens Falls Senior Center** One 12-passenger van operated by a staff member. Funding comes from donations and grants and amounts to about \$3,300 per year for operating costs. The van provides about 200-250 rides per month exclusively to members of the senior center. The geographic area is limited to a 10-mile radius around the facility, which means that the great majority of service is within the urban area. The van is not wheelchair accessible, but it serves a wide variety of trip purposes, including medical, social, community event and local business trips.
- **Lake Luzerne Senior Center** One 12-passenger van operated by a staff member. Funding is provided by the Office of Aging and the Town of Lake Luzerne. The van provides semi-monthly shopping trips to Glens Falls and occasional excursions to other locations (once per month). The population served is older adults who are independent.

- **Moreau Community Center** One 16-passenger bus, operated by one full-time driver. The bus is wheelchair accessible and was purchased with a section 5310 grant. Operating costs are covered 30% by the Town of Moreau, 20% by grants/donations, and 50% from fees for service. The primary population is older adults (55 plus) and people with disabilities. The bus operates weekdays from 8:00 a.m. to 4:00 p.m. On Mondays and Tuesdays, the bus provides medical trips or banking. On Wednesday, it provides shopping trips to Glens Falls or Hannaford in Moreau. On Thursdays and Fridays, it provides recreational trips such as to Albany or Greenwich. A significant portion of service is in the urban area.
- **Warren-Hamilton Counties Community Action** Two 15passenger vans purchased in 2010 with community services block grant funds. These vans, operated by staff members, serve seven communities in Warren County under contract: Warrensburg, Stony Creek, Thurman, Hague, Horicon, Johnsburg and Chestertown. The total operating expense is roughly \$50,000 per year, paid mostly by the towns/villages/hamlets, partly using funds from the Office for the Aging. The vans offer limited service (once per week for some communities, once per month for others) to transport seniors (age 60 and over) into the Glens Falls urban area for a wide variety of trip purposes (medical, shopping, errands, social). The vans pick up a group of seniors (organized by the town or a community leader) in the morning, transport them to the Glens Falls area, making multiple stops to drop off riders at various destinations and also transporting them between destinations, and then returning to the rural village in the afternoon. Precise ridership figures are not available, but the vans serve about 50 distinct individuals and carry between 700 and 1,000 passenger trips over the course of a year. The program has existed for 25 years or more and is somewhat smaller than in the past, as some communities have decided to offer their own service.
- **United Way** One van provided to the Kingsbury/Fort Edward Senior Center for shopping trips and to carry people to meal sites. The RSVP program is also coordinated through the United Way (see immediately below).

Another important transportation resource in both Washington and Warren Counties is **RSVP** which stands for Retired and Senior Volunteer Program. The program provides medical trips for people 55 and older plus people with disabilities. It is funded by the Mary McClellan Foundation and coordinated through the Tri-County United Way offices. It has dispatch offices in various locations, including Salem, Greenwich and Cambridge in southern Washington County. RSVP does not own any vehicles as the volunteer drivers use their own vehicles for transport. On average, about 27 volunteers provide transportation in a given month, about evenly divided between the Salem-Cambridge-Greenwich region in southern Washington County and the Warren-Northern Washington Couty region. The total number of rides provided in 2016 was 1,110, covering nearly 43,000 miles and consuming 2,726 volunteer hours. (All of these statistics are roughly 50-50 for the two regions.) Many drivers accept reimbursement (per

mile) for the service, but some do not. The total outlay for volunteer reimbursement in 2016 was \$18,985, resulting in a cost per mile of just 44 cents. There is significant unmet demand for service, as RSVP cannot find enough drivers to meet all of the requests for rides. As a result, trips are limited to medical appointments and clients are limited to 4 rides per month. RSVP tries not to carry Medicaid-eligible individuals, as they are supposed to use the Medical Answering Service network. There is no cost to the rider for these trips, but donations are accepted. RSVP provides an umbrella insurance policy for the drivers.

The final two respondents, Hudson Headwaters Health Network and Glens Falls Housing Authority, provide no transportation service. The information gained from these agencies is incorporated into the section on needs, below.

**Table 1: Summary of Non-profit Organization Transportation Resources** 

Agency	Vehicle Type	Num- ber	Number of Drivers	Funding	Annual Funding	Rider- ship	Geographic area	Population Served
CWI	Large buses; F450 cutaways	21	23 for day programs	State & Federal	\$1M	486/ day; 107K annual	AGFTC area	Youth to elder; low income
Fort Hudson Nursing Center, Inc.	Wheelchair accessible vans	7	6 part-time	50% from 5310; rest self	\$150K	20K	within 15 miles	E&D, mostly Medicaid eligible
Liberty House Foundation	Vans: 12- passenger and 8- passenger	5	8	Various govt agencies	N/A	40/day 8,000 last year	Warren/ Washington various villages	18-80 with mental health or dev/learning disability; 80% below poverty level
Cornell Cooperative Extension Warren County	Minivans	3	10	Fundraising	\$30K	N/A	Warren County	Program participants
Conkling Center	Minivans	2	4	Endowment, donations, grants	\$120K	350 in 2015	Within 25 miles of Glens Falls	55 and older, ambulatory
Greenwich Interfaith Fellowship, Inc.	10-passenger van; small van	2	5-7 PT plus 23 volunteers in own vehicles	United Fund and Interfaith Council of Churches	N/A	450 per year	Southern Washington County	Seniors for medical appts and occasional shopping trips
Warren Hamilton Counties Community Action	15-passenger vans	2	Staff members	Towns (from Office for Aging)	\$50K	700- 1,000 per year	Warren County	60 and older; all trip purposes

Agency	Vehicle Type	Num- ber	Number of Drivers	Funding	Annual Funding	Rider- ship	Geographic area	Population Served
Glens Falls Hospital Behavioral Health Services	12-passenger van	1	Staff members	General funds; cannot use Medicaid	N/A	serves 20 of the 30 in Day Prog	Glens Falls and Hudson Falls	18 and up; psych patients
Glens Falls Senior Center	12-passenger van	1	Staff members	Donations, grants	\$3,300	250 rides per month	10-mi radius of Glens Falls	Senior Center members- ambulatory with low income
Lake Luzerne Senior Center	12-passenger van	1	Staff member	Office of Aging and Town of LL (50-50)	N/A	N/A	Shopping trips to Glens Falls	60+
Moreau Community Center	16-pass bus	1	1	5310 to buy; 20% donations, 30% Town, 50% from fees	N/A	N/A	Within school district	55+, disabled
Tri County United Way	Van	1	N/A	N/A	N/A	N/A	Kingsbury/ Ft. Edward	Senior center members
RSVP	Personal cars	27	27	Mary McClellan Foundation	\$19,000 (for reim- burse- ment)	92 per month; 1,110 in 2016	Warren and Washington counties	55+ and disabled for medical trips only

#### **Washington County Agencies**

On December 1, the consultant team met with a group of officials representing Washington County agencies and non-profits that work closely with the County. Among these were the United Way and the Greenwich Interfaith Fellowship which have already been discussed above. Information about transportation resources available at these agencies is presented below.

The **Washington County Economic Opportunity Council, Inc.** is a non-profit organization, but works closely with County agencies. It has three cars that it operates with \$38,000 provided by the Office of Aging. These cars are used to provide medical trips and also social and shopping trips to a lesser extent for older adults in Washington County. They can also serve younger people with low incomes thanks to community services block grant funds. The agency also works with Granville and uses two days per week on Granville's van for network transport. EOC is also involved in the Headstart program for young children to provide transportation to medical appointments when Medicaid is not available, using seven or eight vans. This program serves 420 children younger than five years old.

The County's **Department of Social Services** does not own vehicles to provide transportation to clients, but its workers will occasionally do so. The agency uses taxis for the homeless population and will buy bus tokens for its employment unit to distribute to low-income individuals needing transportation to jobs.

Likewise the **Department of Public Health** does not provide transportation, but does contract for transportation for preschool programs to serve children age 3 to 5. This program is paid for with 50% County funds.

The **Aging and Disability Resource Center** (part of the Department of Social Services and the Office of Aging) provides home care and adult protective services for people 18 and older. Staff members transport clients to shopping and medical appointments using their cars, and also transport them to the agency office for meetings. The agency provides meals on wheels to over 300 seniors.

Finally, **Veterans Affairs** serves about 5,000 veterans in Washington County. In a given year, the agency provides transportation to about 900 veterans, taking them to the Albany Veterans Administration Hospital using either a van or a bus. The agency employs one full-time driver. The vehicle carries up to 10 riders per day, but it has a limited schedule due to inadequate funding. The agency is trying to develop a connection to a community health clinic in Glens Falls to provide more convenient healthcare access to its clients.

### **Warren County Agencies**

Agencies in Warren County were contacted by email and telephone. Information collected during these interviews is presented below.

The County's **Department of Social Services**, which includes the Youth Bureau, has a fleet of eight vehicles including seven cars and one van. These were

purchased with County funds, and the County has an additional van available that can be signed out when needed. The vehicles are used by case workers to reach clients and also to transport clients for visitations, to attend counseling sessions, school meetings, etc. For clients with great needs, the caseworkers will take them to grocery stores for shopping and other essential errands. DSS encourages people living in Glens Falls to use the bus system and distributes tokens to those who cannot afford the bus fare. The agency will also pay for taxis to take homeless people back to their temporary lodgings. The greatest need seen by DSS is for transportation in the northern reaches of Warren County where there is no bus service and to which it is difficult to find volunteer drivers to drive.

The **Office of Aging** provides home care and adult protective services for people 18 and older. The agency has no vehicles but refers people to RSVP and the Conkling Center when they need transportation. The Office will help fund transportation for social events in various towns (while the towns provide the vehicles).

**Veterans Affairs** operates trips from two pick-up points to the Albany VA medical center every weekday, accommodating appointments from 9:30 a.m. to 1:00 p.m. It owns two vans, one of which is wheelchair accessible, and transports 70 riders per month on average. The agency has three part-time drivers to operate the vans. The vans are also used for occasional other purposes, such as taking veterans to 4th of July and Memorial Day celebrations, and four trips per year to Albany airport. The vans will carry veterans who live in other counties whenever space is available (as long as those veterans are willing and able to make it to one of the pick-up points). In the past, volunteer groups named Ricky Rides and Thanks for Your Service had provided local transportation to veterans, but these have a very limited scale. The agency does not coordinate or schedule rides for the volunteers, but just provides contact information to any veterans who need such transportation.

### **Medicaid Transportation**

In New York State, non-emergency medical transportation (NEMT) funded by the federal Medicaid program is provided through the Medical Answering Service, or MAS. This is a private-sector brokerage that accepts trip requests from Medicaid-eligible individuals and schedules trips through the "most medically appropriate and cost-effective" means. The great majority of trips, particularly in rural areas, are completed by taxi companies. MAS has been working with GGFT to provide some NEMT trips within the Glens Falls urban area. MAS has had the statewide contract only since 2014, but it has been operating in New York since 2003. Prior to MAS, NEMT was offered through public transit agencies and other non-profit organizations, though in the rural areas of Washington and Warren counties, taxi companies have always provided most if not all of the NEMT service.

#### Taxi Companies

Taxis are used for a wide variety of purposes. For those lacking an automobile and access to any government-funded transportation program, a taxi may be the only source of mobility available. The MAS website lists 46 taxi companies serving Warren County and 50 taxi companies serving Washington County. Accounting for overlap, there are 54 distinct taxi companies listed for the two counties. It should be noted that not all of the taxi companies listed provide service to the general public; many are Medicaid-funded services that provide transportation to medical appointments only.

A survey of citizens of the Adirondack Gateway Region, commissioned by the Adirondack Gateway Council, found that about 20% of respondents stated that they used taxis on a weekly basis. The main purposes for these trips were medical, shopping, and work, with a few students taking taxis to school. About 75% of taxi users said that they paid less than \$10 per trip. The typical fare for trips within Glens Falls is likely about \$5, but trips in rural areas can cost substantially more. Some taxi companies offer small discounts (50 cents or a dollar) for frequent riders who use taxis to get to work. However, taxis are not typically seen as a long-term and sustainable transportation option for any given individual because of the cost and inconvenience of having to schedule every ride.

#### Ridehailing

On June 29, 2017, it became legal to operate ridehailing services in upstate New York. These services, such as Uber or Lyft, rely on individual contractors driving their own vehicles, dispatched through a smartphone app. Since there is no centralized fleet, this type of service could theoretically allow for increased taxistyle service to rural areas. However, it remains to be seen whether the cost of rides and low population density will make ridehailing a feasible transportation option in rural areas.

### **Demographic Analysis**

An analysis of demographics in the study region was conducted to provide an objective basis for evaluating the feasibility of potential mobility improvements. The viability of traditional transit services depends heavily on population density and the prevalence of people who rely on transit for mobility, typically older adults, people with low incomes, and especially people without access to an automobile. Demand response service and recent innovative solutions may depend somewhat less on these traditional measures for their success, but nonetheless, it is important to quantify potential demand and the location of vulnerable populations to the extent it is possible.

The following sections provide an overview of the study region in terms of its development pattern, distribution of household density and key demographic characteristics. The data source for household density is the 2010 Census, since it provides information at the Census block level—the most fine-grained level of geography. The other maps are based on the American Community Survey (ACS), representing an average of data from 2010 to 2014. These are presented at the Census block group level. In general, the maps presented here are an update of those contained in A/GFTC's 2014 Coordinated Human Service Transportation Plan.

### **Description of Regional Development Pattern**

The core of the region is the Glens Falls urbanized area, including the city of Glens Falls, and portions of four surrounding towns: Queensbury, Kingsbury, Fort Edward and Moreau. The portions of these towns that are in the urbanized area include West Glens Falls, Glens Falls North, Hudson Falls, Fort Edward, and South Glens Falls. These neighborhoods include suburban residential areas, village centers, industrial zones, and strip retail development. Beyond this urbanized area lies the majority of the region, in the rural portions of Warren and Washington counties, plus the rest of the Town of Moreau.

The development and population of Warren County is concentrated in the Queensbury area. Moving north and west from there, the rest of the county has extremely low population density and much of it lies in wilderness areas, with the exception of a few hamlets such as Warrensburg, Chestertown and Lake George.

Washington County is different, in that it has a larger number of villages and hamlets spread out through its long north-south expanse. The far northern portion of the county is largely devoid of development, but the US 4, NY 40 and NY 22 corridors (among others) connect numerous small towns and villages. Many farms fill in the areas in between the villages, to a much greater extent than in Warren County. The northern portion of the county is closely tied to the economy of Glens Falls (with some linkage to Rutland, VT), but the southern portion is more closely tied to the Albany-Troy metropolitan area and Saratoga.

### **Household Density**

Figure 2 shows the density of households per acre for the study region in the year 2010 by Census block. It is immediately obvious that the great majority of the region is very rural, with a density of less than one household per acre. The various villages and hamlets have blocks with densities of one to three households per acre, with perhaps a block or two with higher densities. According to the Transit Capacity and Quality of Service Manual (a TCRP report), traditional fixed-route transit requires a density of at least 3 households per acre, which is roughly equivalent to quarter-acre zoning (after the land used by roads and sidewalks is accounted for). It is clear that only the Glens Falls urban area has enough blocks with a density at least that high to support regular bus routes.

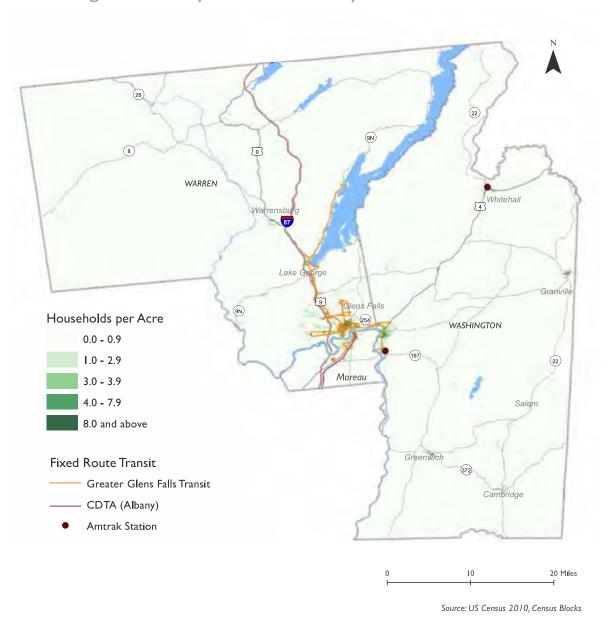
As described above, almost all of Warren County, outside of the southeast corner, falls into the lowest category of density. The hamlet of Warrensburg contains a small cluster of moderate density blocks, with a sprinkling of density farther north in Chestertown along US 9 and in North Creek where NY 28 joins the Hudson River. In Washington County, there are several larger villages such as Whitehall, Granville, Salem, Greenwich and Cambridge, plus other smaller

villages that are not labeled on the map. Unfortunately, from a transit perspective, these villages are separated by long distances, making any sort of scheduled service linking them together an expensive proposition.

Figure 3 shows close-ups of the Glens Falls area and several of the other larger villages in the study region. The Glens Falls map shows that the GGFT bus system (superimposed in orange lines) is closely aligned to the areas with the highest household density. All of the blocks with densities of at least 3 households per acre are within walking distance of a route, and indeed there are deviations from the main roadways that are clearly intended to serve specific housing developments. This is especially clear in Glens Falls North. Hudson Falls, which has the most extensive area of high density housing outside of Glens Falls, is served by GGFT's Route 4, which has the highest level of service of any of the routes in the GGFT system.

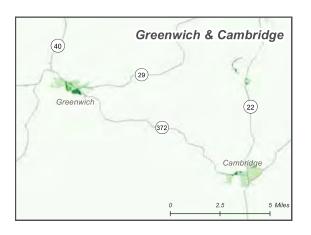
Figure 2

# A/GFTC Households per Acre Washington County, Warren County, Town of Moreau



### Figure 3

# A/GFTC Households per Acre Washington County, Warren County, Town of Moreau



ens Falls Transit CDTA (Albany) Amtrak Station

Source: US Census 2010, Census Blocks

#### Age

The age profile of the study region is displayed in a series of maps, shown in figures 4 through 10. Each map shows the percentage of the population in each Census block group that belongs to a specific age cohort. The maps also show the absolute number of people in that age group, since the block groups vary greatly in their geographic area. These maps are based on ACS data from 2010 to 2014.

Figure 4 shows the location and concentration of young children, age 14 and under. Since children of this age rarely move about independently, they are important more for showing where young families are located. These families may have need for child care services, and for those families who cannot afford a car (or a second car if the primary breadwinner takes a car to work every day), transportation can be a major challenge. The southern portion of Washington County has relatively high percentages of children, perhaps representing families with commuters to Saratoga and Albany, though the low density of many of these block groups means that the absolute numbers of children are not very high. The highest absolute figures are in the suburban areas around Glens Falls.

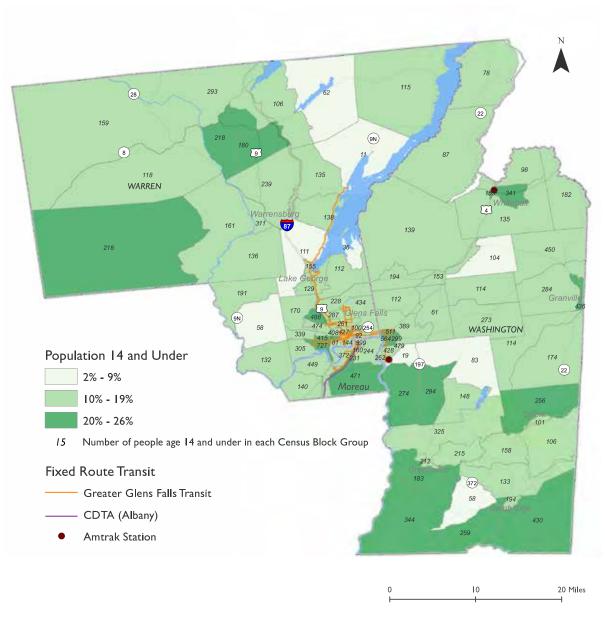
The next map (Figure 5) focuses on the teenage population which is beginning to enter the labor force and may have mobility needs independent of their parents. Most of the higher percentages and absolute numbers are in the block groups surrounding Glens Falls, though the large block group at the northern edge of Warren County has a relatively high percentage and over 200 individuals in this age group. The GGFT bus system reaches some of the higher-percentage block groups near Glens Falls, but not all of them.

Figure 6 shows young adults of college age. The highest incidence of this age group is a swath through the middle of Washington County from Granville through Fort Ann, as well as some sections of Glens Falls. There are very few people in this age group in southern Washington County and in most of Warren County. The departure of people in this age group from rural areas to major metro areas is a concern for much of the country.

Figure 7 covers a 15-year segment of the population, including the younger half of people of "working age" from 25 to 39. For most of the rural portions of Warren and Washington counties, this group represents between 10 and 19% of the population. In the central portion of the area, from the western section of Moreau through some of Glens Falls and then heading northeast to Whitehall, the percentage rises to over 20%. The absolute number of people in that age cohort in many of those block groups is over 500. It is safe to say that much of the workforce in Glens Falls lives in these block groups along US 4 to the north and east and along US 9 to the south and west.

Figure 4

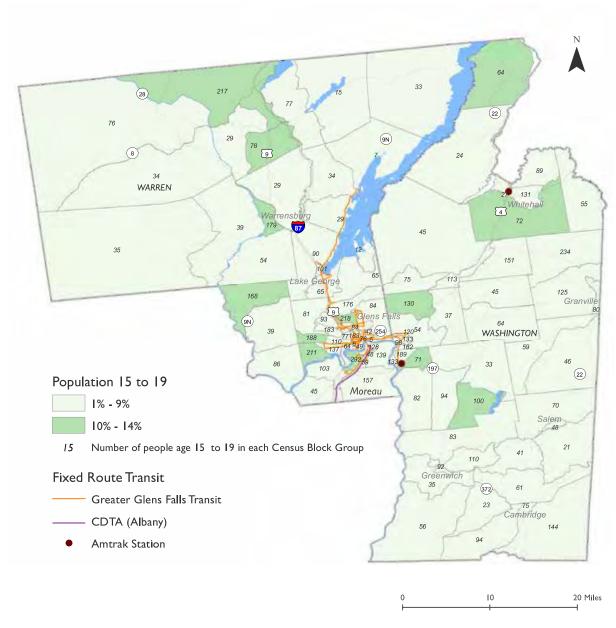
# A/GFTC Population 14 and Under Washington County, Warren County, Town of Moreau



Source: ACS 2010-2014, Census Block Groups Note: Correctional facilities in Fort Ann and Moreau closed in 2014.

Figure 5

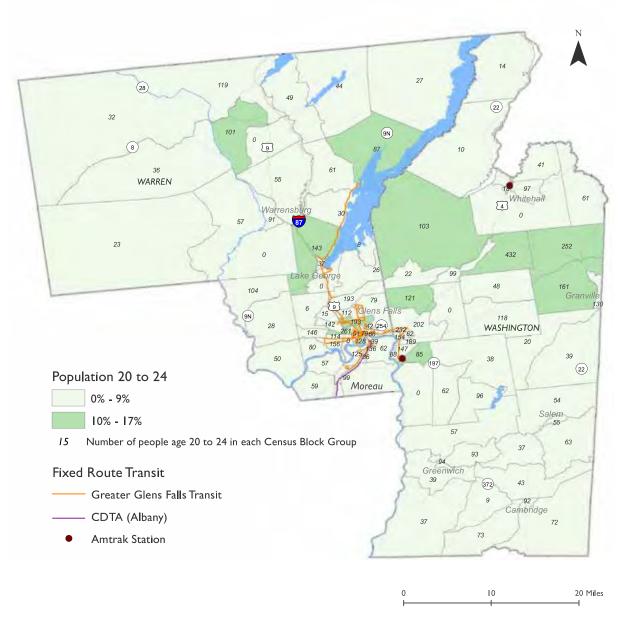
# A/GFTC Population 15 to 19 Washington County, Warren County, Town of Moreau



Source: ACS 2010-2014, Census Block Groups Note: Correctional facilities in Fort Ann and Moreau closed in 2014.

Figure 6

# A/GFTC Population 20 to 24 Washington County, Warren County, Town of Moreau



Source: ACS 2010-2014, Census Block Groups Note: Correctional facilities in Fort Ann and Moreau closed in 2014.

Figure 7

# A/GFTC Population 25 to 39 Washington County, Warren County, Town of Moreau

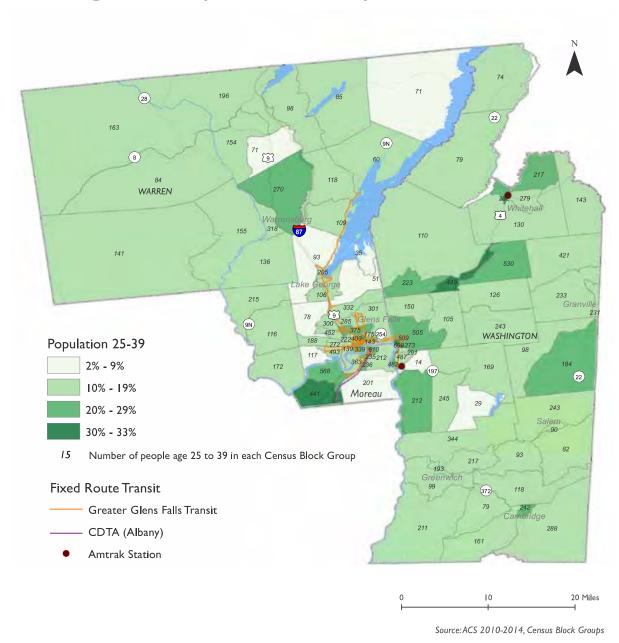


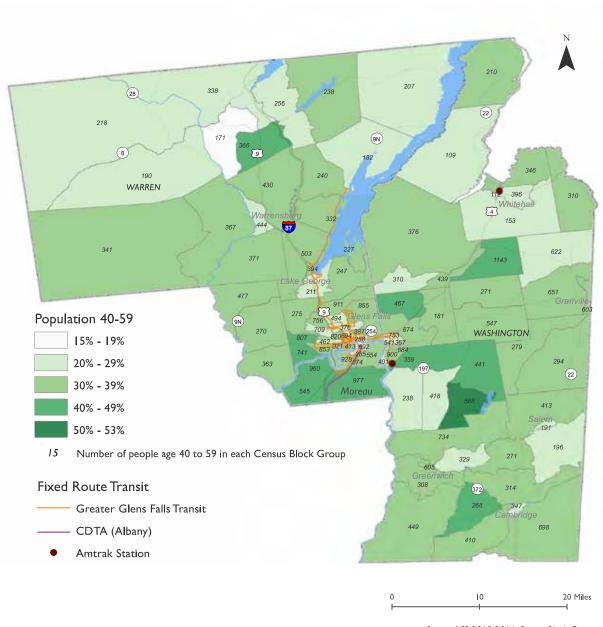
Figure 8 represents the largest age cohort of any of the maps in this series. As a result, the percentages and absolute figures are higher than on any of the other maps. The US 4 corridor does not show up as clearly on this map, other than the block group south of Whitehall with over 1,100 people age 40-59. Central Washington County appears more prominently than on Figure 6. The south and west sides of Glens Falls, including most of Moreau, has more than 40% of its residents in this age group, and the absolute numbers are large as well. As with the previous map, many of the people in this age group in close proximity to Glens Falls are likely working in the urbanized core of the region.

Younger seniors, those age 60-69, are concentrated along Lake George and, to a lesser extent, in the western portion of Washington County, as shown in Figure 9. The highest absolute figures are in some of the block groups surrounding Glens Falls, plus a block group between Whitehall and Granville, but there is a clear pattern of younger retirees settling around Lake George. These block groups are sparsely populated, so the absolute figures are not high. Presumably, the vast majority of these retirees are able to afford an automobile and are not yet so old as to be unable to drive.

The final map in the series (Figure 10) shows the concentration of seniors 70 years of age and older. There is again a clear concentration near Lake George, though more on the western shore. There are also large numbers and a high concentration of older seniors in block groups on the north side of Glens Falls. Many of these residents live in assisted living or other housing oriented toward seniors. The village of Granville also appears to host similar facilities. A significant number of older seniors live in the northwest corner of Warren County, with many of them likely in the hamlet of North Creek.

Figure 8

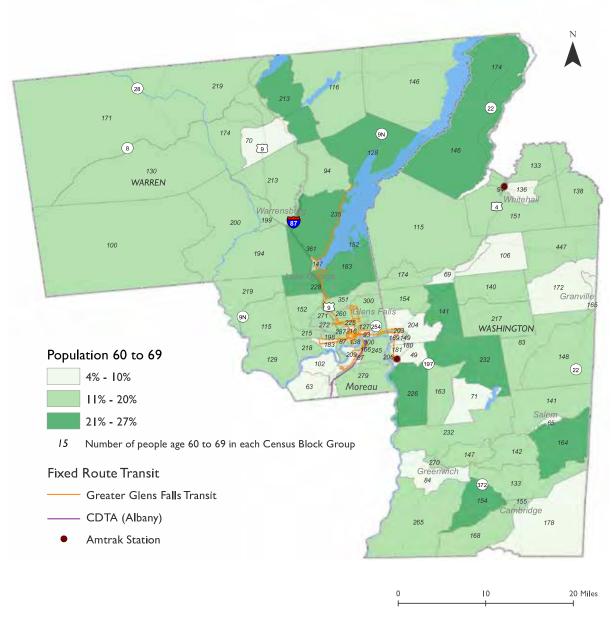
# A/GFTC Population 40 to 59 Washington County, Warren County, Town of Moreau



Source: ACS 2010-2014, Census Block Groups

A/GFTC Population 60 to 69

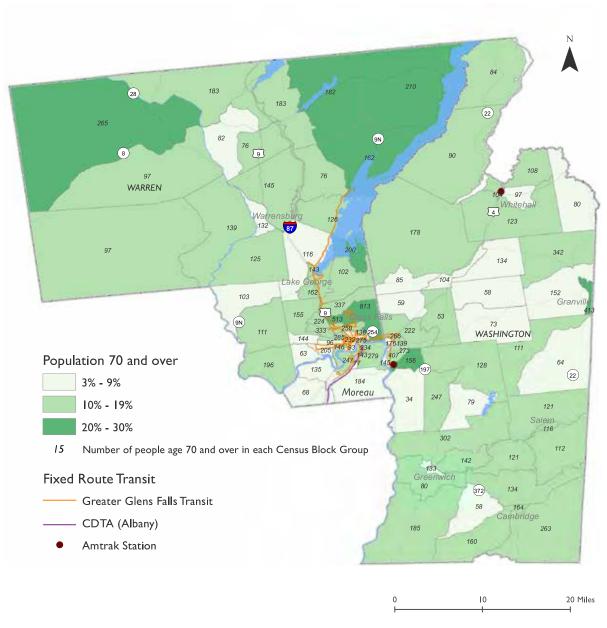
Washington County, Warren County, Town of Moreau



Source: ACS 2010-2014, Census Block Groups Note: Correctional facilities in Fort Ann and Moreau closed in 2014.

Figure 10

# A/GFTC Population 70 and Over Washington County, Warren County, Town of Moreau



Source: ACS 2010-2014, Census Block Groups Note: Correctional facilities in Fort Ann and Moreau closed in 2014.

#### **Income**

There are many definitions of low income used in different studies. For the purpose of this study, "very low income" is defined by the HUD threshold for a three-person family in the A/GFTC area. For the 2010-2014 period, this threshold was \$29,200. Among all households in the A/GFTC area, 26% qualify as very low income according to this definition.

Figure 11 shows the concentration of very low income households by block group. Outside of Glens Falls, the highest concentrations are in four block groups scattered across the area: Granville, Whitehall, the area south and west of Warrensburg, and the far northwest corner of Warren County, including such hamlets as Bakers Mills and North Creek. As with other maps, some of the highest absolute figures are in the block groups in and around Glens Falls. The block group containing much of Hudson Falls has nearly 500 very low income households as well as a high percentage. Three other block groups in the urban area also fall into the top percentage category. Most of the block groups in the southwestern portion of Washington County and the eastern portion of Warren County, as well as the suburban areas around Glens Falls, have relatively few very low income households.

#### Automobile Availability

There are several reasons a household may not own an automobile. The most common reasons in a generally rural area revolve around the inability to drive or to afford a car. These reasons would be correlated with age (older seniors), disability status, or very low income. Within cities or dense villages, some people may choose to live without a car if they are able to walk or take transit to their jobs and to take care of other personal business and shopping. No matter the reason, the lack of an automobile is the clearest marker of dependency on public transportation.

As shown in Figure 12, there are relatively few households overall that own zero vehicles. Many block groups have 20 or fewer such households, and several block groups have zero. Several block groups in Washington County have higher figures and moderate percentages of zero-vehicle households, most of which are in the larger villages such as Whitehall, Granville, Greenwich and Cambridge. The far northwest corner of Warren County again shows up as a moderate percentage and a not-insignificant number of households.

By far the highest numbers and highest percentages of zero-vehicle households are in the downtown area of Glens Falls and Hudson Falls. Several of these block groups have more than 100 households with no vehicles, and two of them have more than 200 such households, representing over 30% of the population. Fortunately, these areas are among the best served by the GGFT fixed route system and have excellent walking access to businesses in downtown Glens Falls or Hudson Falls.

#### **Trip Generators**

Figure 13 shows important trip destinations in the rural portion of the study area (destinations in the Glens Falls urban area are excluded to make the map easier to read). Large employers (more than 50 employees), government offices, grocery stores, and post offices are mapped to show places where people need to go on a regular basis.1

In Washington County, the map shows five grocery stores outside of the urban area: three in the Greenwich/Cambridge area, one in Granville and one in Whitehall. For people living outside of these towns and villages, shopping is a time-consuming chore, and for those without ready access to an automobile, it can be nearly impossible. Most of the large employers are located along or near NY 40 in Argyle and Greenwich. Many towns have no large employers.

In Warren County, most of the grocery stores are located either along US 9 or NY 9N, covering Warrensburg, Lake Luzerne, Bolton and Chestertown. There is also a market in North Creek. Although it is very sparsely populated, the southwestern portion of the county has poor access to grocery stores. There are few large employers outside of Warrensburg.

#### **External Trip Generators**

Figure 14 shows the study area in a broader context and highlights the influence of some of the more important activity centers outside of the A/GFTC region. Rutland, Saratoga Springs, Troy, Bennington, and Ticonderoga all have hospitals and significant employment and retail bases. Of course, the center of the Albany metropolitan area is not much further to the southwest from Troy.

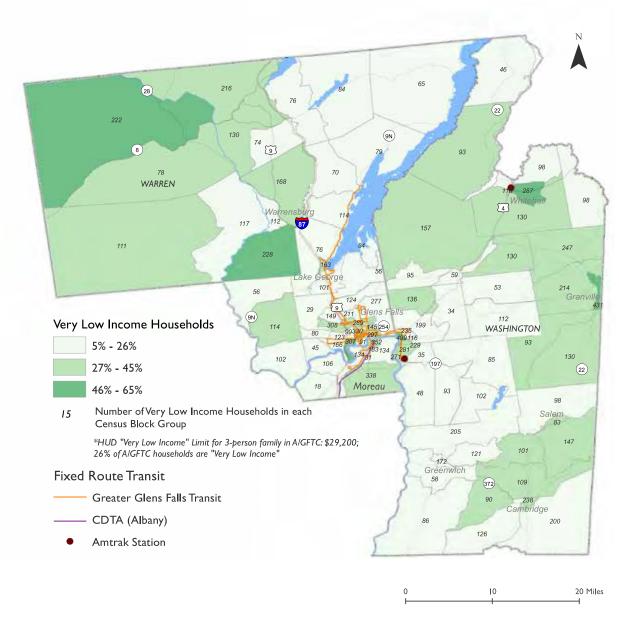
A 20-mile radius around each of these activity centers is shown, to indicate which parts of the study region may have stronger linkages to these external generators, for the purposes of commuting, shopping, medical or entertainment trips rathern than Glens Falls. It can be seen that southern Washington County experiences the strongest pull to generators outside of the region, and that most of Warren County and the central portion of Washington County are beyond these 20-mile rings and thus are less likely to generate frequent trips to these external areas.

In terms of the potential for transit connections to the external job centers, CDTA already operates the Northway Express along I-87 (with one trip per day originating in South Glens Falls) which connects to downtown Albany. It is very unlikely that any of the other external job centers have enough demand coming from a compact area to be able to support a scheduled bus service. Ridesharing and vanpools would be appropriate means of providing alternatives to driving to reach these locations.

<sup>1</sup> Locations of pharmacies and libraries were also examined. In all cases, pharmacies were located in close proximity to grocery stores and in almost every case, libraries were located in close proximity to government offices. Thus, for the sake of map clarity, pharmacies and libraries are not shown separately.

Figure 11

# A/GFTC Very Low Income Households Washington County, Warren County, Town of Moreau



Source: ACS 2010-2014, Census Block Groups Note: Correctional facilities in Fort Ann and Moreau closed in 2014.

Figure 12

# A/GFTC Zero Vehicle Housing Units Washington County, Warren County, Town of Moreau

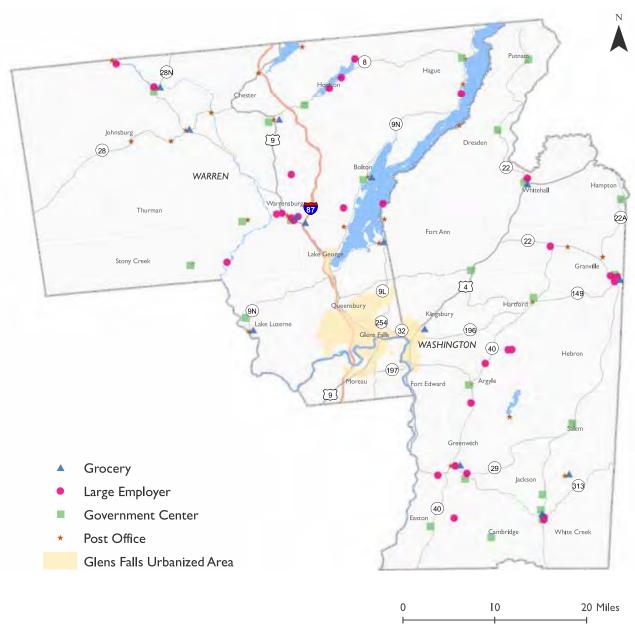


Source: ACS 2010-2014, Census Block Groups Note: Correctional facilities in Fort Ann and Moreau closed in 2014.

### Figure 13

## A/GFTC Destinations

### Washington County, Warren County, Town of Moreau

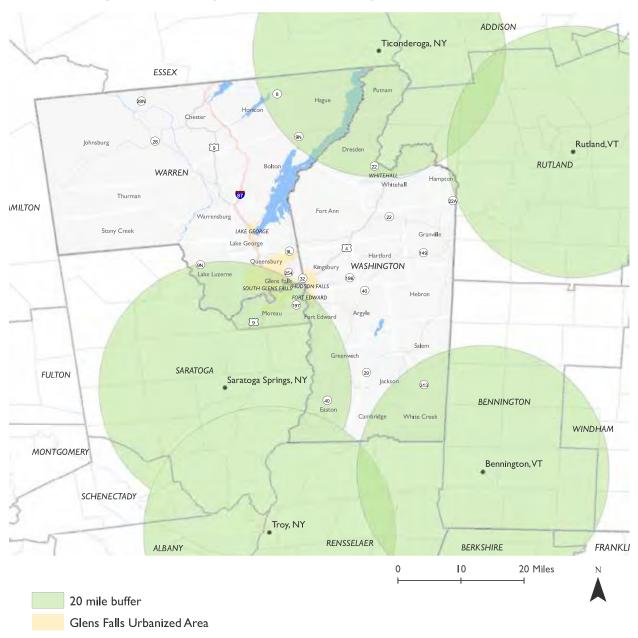


Destinations are approximate. Large employer destinations within one mile of Glens Falls Urbanized Area are excluded. Destination Source: A/GFTC

Figure 14

## A/GFTC Regional Generators

Washington County, Warren County, Town of Moreau



### **Unmet Needs and Underlying Causes**

A critical portion of this study was to identify transportation needs in the rural study region. The RFP for this project posed four questions to be answered:

- What constitutes an actual transportation need or deficiency?
- Are there specific groups that have less or no access to services?
- Are there specific geographical areas that are underserved?
- Can these groups and/or areas be prioritized as being likely to support new or expanded transportation service options?

Answers to these questions will be discussed in the sections that follow.

The answers are informed by several sources of information:

- The demographic analysis presented above,
- The interviews conducted with non-profits and government agencies involved with social services in the study region
- Prior data collection performed for the Adirondack Gateway Council as part of its Housing, Transportation and Fair Housing Equity Assessments.

The AGC study included a survey of 47 providers, including most, if not all, of the agencies contacted in the present study, plus towns and other governmental organizations. The responses from the survey confirm the findings of this study, emphasizing the lack of transit service in the rural areas of the region, especially those farthest removed from Glens Falls, and the transportation obstacles that seniors, homeless people, low income families and people with disabilities face. Some specific areas and connections mentioned include the northern reaches of Warren County (Warrensburg and areas north of there) and a link between South Glens Falls/Moreau and the county seat in Ballston Spa.

### Low Density in Rural Areas

The widespread availability and affordability of the automobile in the second half of the 20th Century made rural living feasible for people who are not farmers. Prior to the mobility offered by the automobile, non-farmers generally needed to live near a town center or a city to be able to get to a job in a reasonable amount of time, or if they were a craftsman of some type, to be in a town or city so that customers could get to them easily.

Cars—and in a climate like A/GFTC's, all-wheel drive cars—made it possible for people to spread into the countryside, removed from a town or village center by miles. Living in such places, however, necessitated the ongoing expense of owning and operating an automobile, as well as requiring the physical and mental ability to drive, which deteriorates with age. People living in rural areas who suddenly find themselves unable to drive, for financial or physical reasons, are forced to either move to a city, a town center, or a transit-accessible location, or to rely on friends/family and whatever public resources may exist to allow them to make the trips they need in order to survive.

For people living in small towns, villages and hamlets, cars have also become almost indispensible. Sweeping trends such as globalization, market consolidation, automation, and technological innovation have drastically affected employment and retail in small communities. Gone are the days when every small town has a sustainable employment base, as well as a grocery store, and other shops to take care of residents' needs. Economies of scale have largely driven small employers and shops out of business, replaced by supermarkets and superstores, not to mention online retailers. While in the past, people living in small towns may have been able to get to work and accomplish most or all of their shopping and personal business on foot, now it is rare to find such cases.

As shown in the previous section, there are people living in rural areas and small towns who have no cars available, and many more people with low income or of advanced age who may find it difficult to afford or drive a car. Even if they would like to move to a city or transit-accessible location, they may not be able to for a variety of reasons.

In spite of the mobility needs in rural areas and small towns/villages, traditional transit services are not well suited to meet these needs. Bus services require a minimum level of population density to be viable (see Household Density section above), and rural areas, by definition, do not have this level of density. Demand response service can meet some of these needs, but as will be discussed below, tends to be restricted to specific populations by existing funding sources, is very expensive to provide on a per-passenger basis, and for the rider has traditionally required advance planning and reservations, which makes it far inferior to the mobility provided by a car.

Other than relocation, new solutions are needed to increase mobility in rural areas. The next section considers mobility needs for various demographic groups.

### Needs by Demographic Group

Each segment of the resident population has its own distinct need for mobility. These needs differ by the type of trips taken (trip purpose), time of day, and accessibility, both in terms of physical accessibility for a person in a wheelchair, and the feasible walking distance between the vehicle and the origin and destination locations on either end of the trip.

#### Youth

For the purposes of this study, the Youth population segment is defined as people from age 15 to age 19. These are people who are beginning to have mobility needs separate from their family, perhaps because of after-school jobs, entertainment, sports, and other activities. While some of them may be fortunate enough to have access to a car for most or all of their needs, many of them do not. The most likely means of transport for this age group is getting a ride, either with a family member or with a friend. Other possible means of transport include walking or bicycling for short- to medium-range trips or taking transit for those located in Glens Falls and the immediately-surrounding areas.

Youths with after-school jobs would likely need transport from their high school to wherever their job is (a village center or a shopping mall, etc.) between 2:30 p.m. and 3:30 p.m., and then transport to a location near their home between 5:30 p.m. and 7:00 p.m. These trips would occur every day school is in session. Trips for social activities would be more likely to occur on Friday and Saturday evenings. Sports activities could happen almost any time, from the hours before to school starts, to the after school period and on weekends.

With respect to accessibility, teenagers are more likely than other demographic groups to be able to walk some distance between where the vehicle picks them up or drops them off and their origin and destination locations. In terms of the "severity" of the mobility need, it may be that teenagers' mobility needs are not quite as critical as those for other groups, in that they are unlikely to go hungry or lack medical treatment without independent mobility. That is not to say that independent mobility would not be a significant benefit to some teens, whose families could desperately use the extra income, or whose quality of life would be greatly enhanced by being able to participate in more activities than their current mobility situation allows.

#### Working Age

Referring back to the series of age maps in the prior section, the working age population covers people age 20-24, 25-39, and 40-59. There are certainly plenty of people in their sixties working as well, but for the purpose of this study, we will consider people 60-69 as "young retirees." People with disabilities in the working age group are considered separately below.

The primary concern of people in this age cohort is being able to get to work. As one stakeholder plainly put it during an interview, if you live in a rural area, "no car, no job." As described above, even in villages and small towns, the job opportunities are limited—more limited than in the past—so that people need to be able to commute to an urban area or industrial park.

Many of these commuting trips take place at "normal" weekday rush hours, such as 7:00 to 9:00 a.m. and 4:00 to 6:00 p.m., but many workers at industrial parks or health care facilities work second or third shift and may need to work on weekends. For new entrants to these jobs, the mobility need may be short-lived, since holding down the job could allow them to purchase an automobile, solving their mobility challenge.

However, until they can start a job, low-income people in rural areas are "stuck" in a situation that is difficult to emerge from, because any of the solutions require money. This situation may affect their health as well, especially if they are not eligible for or enrolled in Medicaid.

Working age people, of course, need to make other trips as well, for shopping, personal business, medical, child care, and social and recreational activities. But, as just stated, if they have a job, then they can likely afford a car. Thus, providing some form of mobility, at least on a temporary basis, to people in rural areas, can help solve their general mobility problem for the longer term.

#### **Older Adults**

Most programs designed to aid senior citizens begin at age 60, though there are some available to anyone 55 or older. It is difficult to treat all people 60 or older as a single group regarding transportation needs, because the needs of someone who is 62 may be very different from someone who is 87. Setting aside for the moment the younger seniors (who are more similar to working age adults, and likely do not have significant mobility needs unless they have a very low income or a disability), as people move toward the upper end of this age range, their needs have less to do with getting to jobs and more to do with medical appointments and basic needs such as meals and shopping.

Most programs geared toward older adults make medical transportation the highest priority, with weekly or biweekly shopping trips also provided when funding allows. Seniors who are enrolled in adult day programs usually are eligible for transportation to those programs. Some of these programs also provide transportation for occasional excursions and social activities. Please refer to the earlier section in this report about transportation resources available from non-profit agencies in the region.

Many older adults, when they can no longer drive, choose to relocate to housing that includes services for them, such as assisted living, or that is in an area where they can walk to take care of their basic needs. Seniors in rural areas who decide not to, or cannot afford to relocate, can have the greatest mobility needs and pose the greatest challenge to agencies that serve this population because of the costs involved in transporting them between their far-removed homes and the medical and other facilities that they need to reach. These challenges grow as their health declines. For instance, those with kidney disease need transportation three times per week for dialysis, but most programs only have enough resources to offer one or two trips per week. The patients must then rely on family and friends to provide the other rides.

While older adults are perhaps the group with the greatest transportation needs, they are also the group that benefits most from existing programs. It is generally recognized that the existing programs do not have sufficient funding to meet all of the needs of this population. Innovative solutions may help address the unmet needs of this population, but more funding in existing programs may be the simplest solution.

### **People with Disabilities**

As was true of older adults, "people with disabilities" is a broad category covering people facing a wide range of challenges, from physical disabilities to sensory, mental or cognitive disabilities. They can be of any age or income level, and live independently or with families. For many, but not all, people with disabilities, driving a car is not a feasible option.

The primary funding program from the Federal Transit Administration for older adults (section 5310) also covers people with disabilities. Thus, what was true about seniors benefitting from existing programs (and suffering from inadequate funding of those programs) is also true of people with disabilities.

People with disabilities who are working age may have little need to get to medical appointments but a significant need to get to a job. They may have other sources of income because of their disability, but still desire to have a job and be a productive member of society. If they can live independently, then they can choose to live in a place that offers access to their job via public transportation, but if not, then they may struggle with the choice between living with family members or in a facility that provides the support they need and being able to work outside of the home.

Transportation for people with disabilities obviously needs to account for accessibility for people using wheelchairs or other mobility devices, as well as visual and other impairments. As was found in the inventory of non-profit agencies, many of the vehicles being used in the region are not wheelchair accessible, but agencies make an effort to coordinate with others that have this resource (such as the Conkling Center) when the need arises.

### Needs by Specific Geographic Area

The following list summarizes the results of the demographic analysis and highlights areas with high degrees of transportation needs.

- Northwest corner of Warren County (hamlet of North Creek):
  - High percentage of older seniors
  - High percentage of low income
  - Moderate percentage of zero-vehicle households
  - No local transit services available
- Northern portion of Warren County/western shore of Lake George:
  - High percentage of older seniors
  - No local transit services available
  - Many stakeholder comments about needs in this area
- Village of Whitehall
  - High percentage of low income
  - Moderate percentage of zero-vehicle households
  - No local transit services available
- Warrensburg
  - High percentage of low income (especially south of village)
  - No local transit services available
- Granville
  - High percentage of older seniors
  - High percentage of low income
  - High percentage of zero-vehicle households
  - Senior shuttle available 15 hours per week
  - Compact, walkable development
- Greenwich
  - Moderate percentage of older seniors
  - Moderate percentage of zero-vehicle households
  - No local transit services available other than Greenwich Interfaith services (limited to medical trips)

- Cambridge
  - Moderate percentage of older seniors
  - Moderate percentage of zero-vehicle households
  - o No local transit services available other than Greenwich Interfaith services (limited to medical trips)
- Moreau
  - Moderate percentage of low income
  - Moderate percentage of zero-vehicle households
  - Close to GGFT service plus Community Center bus
  - o Connection needed to Ballston Spa (county seat)

This list is not meant to exclude other portions of the study area which also have people with transportation needs, but rather to highlight the greatest concentrations of need. As noted above, some areas with high need, such as Granville, also have some existing services, so that some of the needs are already being met.

# **Summary of Needs**

The sections above discussed many of the issues raised by the four questions posed earlier. In this summary section, we will try to provide direct answers to those questions.

- What constitutes an actual transportation need or deficiency? An actual transportation need exists when someone needs to make a trip and is unable to do so. The purpose of the trip could be for work, school, medical appointment, shopping, personal business, entertainment, social activity or another reason. Some of these purposes may be considered more "necessary" than others, but they are all important to the quality of life of that individual. In modern American society, an automobile and sufficient funds to pay for its operation address almost all needs. For people without access to a car, particularly those in rural areas where trip ends are spread apart and public transportation is scarce or non-existent, almost every trip constitutes an actual need or deficiency.
- Are there specific groups that have less or no access to services? The groups with the least access to services are those that are not covered by any existing federal, state or county transportation funding program. The largest such group would be people under age 55 who are not eligible for Medicaid and who do not have any qualifying disabilities. If such a person does not have a job, or has a very low-paying job, and lives in a rural area, he or she may have many unmet needs for transportation. As mentioned above, among people who are covered under various programs, there are many whose needs are not met by government and social service agencies because the available funding is not adequate.

- Are there specific geographical areas that are underserved? Most of the study region outside of the urbanized core is underserved, and the farther away from the Glens Falls-Hudson Falls-Fort Edward corridor, the lower the level of service available. Many of the social service agencies have geographic restrictions of a 10- or 25-mile radius around their facility, mainly due to funding limitations. The demographic analysis identified several areas with concentrations of people with transportation needs because of low income, age, or the lack of car ownership. These areas were listed on the preceding pages.
- Can these groups and/or areas be prioritized as being likely to support new or expanded transportation service options? The answer to this question is provided in the next section of the report, as potential service improvements and innovative transportation solutions are described and evaluated.

### **Alternatives**

In seeking potential solutions to the rural mobility problems found in the study area, the consultant team conducted a literature search using reports from the Transit Cooperative Research Program, its experience in working with rural areas across the country, and research into mobility-enhancement practices in other rural regions. Twenty alternatives were identified, eight from New York State and a dozen from other parts of the country. There was some overlap among these alternatives, as several were different approaches to the same type of service (such as ridesharing).

The alternatives went through a screening process, and the most promising ones were researched more fully. The nine best alternatives were then rated according to four feasibility measures:

- Scalability
- Level of Investment Needed
- Barriers Legal, Institutional or Other
- Ongoing Personnel Resources Required

Each alternative is rated on a 1 to 5 scale for each measure, and a low score is better in each case, indicating greater feasibility and lower costs or barriers.

An overall timeline is also suggested for each alternative, based mainly on the ratings.

- A "short" timeline indicates potential implementation within 1 to 2 years.
- A "medium" timeline refers to a 3 to 5 year period.
- A "long" timeline suggests more than 5 years before implementation.

Some of the alternatives have timelines that bridge between two of the periods, indicating some uncertainty regarding potential barriers or availability of funds. All of the ratings are summarized for easy comparison in a table at the end of the section.

## **ITN***Country*

• Needs addressed: Seniors, visually-impaired adults

Independent Transportation Network of America is developing a new initiative called ITN Country, targeted at rural areas. ITN Country is intended to be a program within an existing organization, which would have a large say in its service parameters, such as hours of operation, limitations on eligibility, fares, etc. To facilitate the spread of ITN Country, ITN is building a large on-line learning community where all of ITN's innovative programs are taught and supported.

The features of ITN *Country* include personal transportation accounts in which members can accumulate and spend ride credits. Seniors can trade in their vehicles for ride credits or earn credits as volunteer drivers themselves, banking them to plan for their own future needs. Relatives in other areas with ITN can also earn credits for a senior who needs rides.

The ITN Country program is still in development, with national rollout at least three years away. Communities interested in early adoption can pay a \$15,000 fee to be part of the research phase. In the longer term, ITN is hoping to charge only \$2,500 annually year for this service.

A/GFTC would need to work with existing service agencies, including those involved in the Coordinated Human Services Transportation Plan, to identify possible organizations under which ITN Country could operate. The options include:

- The largest non-profit transportation resource in the region is **Community**, Work and Independence of Glens Falls, a multifaceted service provider which offers clinical services, employment services, day programming for individuals with barriers, residential services, and transportation – and it already owns and operates five large buses and 16 cutaway vans.
- RSVP (Retired and Senior Volunteer Program): RSVP provides medical trips for people 55 and older plus people with disabilities. It has dispatch offices in various locations, including Salem, Greenwich and Cambridge in southern Washington County and the main office is housed at the United Way. RSVP does not own any vehicles as the volunteer drivers use their own vehicles for transport. On average, about 27 volunteers provide transportation in a given month.

The ratings for this alternative are as follows. Again, a lower rating on the 1 to 5 scale indicates a more feasible, better option.

- **Scalability rating**: 2 Scalability depends on promotion, driver recruitment and rider sign-ups; a non-profit may need additional resources to promote the program.
- **Investment rating**: 2 There is a \$15,000 fee to join during Phase 2. Ongoing fees may be as little as \$2,500 when national roll-out occurs.

- **Barriers rating**: 2 ITN *Country* is still in development; however, ITN America is a well-established organization.
- **Ongoing Resources rating**: 2 An ITN *Country* affiliate in the A/GFTC region would receive technical support from ITNAmerica, but may need A/GFTC resources to promote the program.
- **Ø Timeframe**: Medium

### **Rides to Wellness**

 Need addressed: Medical and wellness trips for anyone with transportation challenges

Rides to Wellness is a <u>Federal Transit Administration initiative</u> to increase partnerships between health and transportation providers and show the positive financial benefit of these partnerships. The FAST act authorized a five-year pilot program to finance innovative Rides to Wellness projects; the Vermont Agency of Transportation was among the first-round competitive grant winners in 2016 for its program. It is unclear when and if FTA will issue a second round of grants under this program.

The State of Vermont is in the early stages of implementing a Rides to Wellness demonstration program to establish resources to help people attend their scheduled medical appointments. Funds pay for staff time to receive calls and advise people on available means of transportation, as well as distributing gas cards and setting up rides with volunteer drivers or others. There is a good deal of flexibility as to how the program can be set up and what it can cover. The concept of "wellness" includes trips beyond those to the doctor, such as occasional trips to the grocery store, pharmacy or various types of therapy. Steadman Hill Consulting is assisting VTrans in establishing this program.

In the A/GFTC region, Hudson Headwaters may be a possible partner for a pilot program similar to what is being done in Vermont. Funds from the NYS Department of Health may be available to fund this initiative if a new round of FTA funding is not available in the near future. If federal or statewide funds are not available, A/GFTC and/or Hudson Headwaters could contact Springfield Medical Care Systems in Vermont for guidance on program implementation; Springfield Medical Care Systems has Care Coordinators at Community Health Centers who assist with non-emergency transportation, and the Springfield Hospital Adult Day Center uses an online customer portal to manage client transportation trips.

- **Scalability rating**: 2 − Low if local program run by healthcare provider or state; Medium if A/GFTC plays an active role.
- **Investment rating**: 2 − Low if local program run by healthcare provider or state; Medium if A/GFTC plays an active role.
- **Barriers rating**: 3 The program does not yet exist at a regional level; after development, Vermont will provide an example of a Rides to Wellness program administrative framework.
- **Ø Ongoing Resources rating**: 2 − Low if local program run by healthcare provider or state; High if A/GFTC plays an active role.
- **Ø Timeframe**: Short-Medium

## Telephone Call Center/Online Transportation Coordination

• Needs addressed: Awareness of available services among all vulnerable populations

For transit services to be used effectively, the riding public must be aware of their existence in order to to take advantage of them. A centralized call center paired with online resources that gather and provide information about all options available to the public make it much simpler to find out about and use these services. Two counties in New York have made significant efforts to establish these information clearinghouses.

The Schuyler County Transportation Call Center (Schuyler County, NY) connects riders with a network of providers, including Schuyler County Transit, Schuyler County Office for the Aging, RSVP, The Arc of Schuyler, and Veterans Services volunteer drivers. Options include public transit, door-to-door, rideshare, carpool, vanpool and voucher programs. Reservations must be made two days in advance, and payment varies by transportation providers; trip types (medical, shopping, etc.) vary by transportation provider. Funding comes from the Veterans Community Living Initiative, NYS DOT (Mobility Management from FTA 5311 funds), and Schuyler County Office for the Aging. It operates Monday-Friday from 9:00 a.m. to 2:30 p.m. The staff consists of one part-time person and a full-time supervisor (who mainly performs other activities). The training for this work, which includes the use of RouteMatch scheduling software, takes one to two months. The call center receives 200 to 250 calls per month.

Way2GO - Tompkins County (Tompkins County, NY) is an online resource and a 2-1-1 service that connects riders with medical transportation providers, carsharing, taxis, vanpool services, Zimride, and TDM employer services. Reservations and payment vary by transportation provider; trip types (medical, shopping, etc.) vary by transportation provider. Funding comes from Tompkins County Department of Social Services.

GGFT already provides informal call center services for the region, in that its staff often provides information on transportation options well beyond what GGFT itself operates. To upgrade this capacity to a formalized call center would mainly involve establishing the regular transfer of information from all service providers to GGFT so that it has up-to-date information on all transportation options, as well as an upgrade to the website to provide this information online. This would also likely involve additional staffing, either part- or full-time, to deal with additional call volume and to act as a liaison between the call center and the transportation providers. GGFT or A/GFTC may want to partner with Cornell Cooperative Extension Offices in Hudson Falls and Warrensburg on this effort; Way2Go is a project of the Cornell Cooperative Extension of Tompkins County, in partnership with the Tompkins County Department of Social Services.

- **Scalability rating:** 2 A/GFTC resources to promote new website/211 service.
- **Investment rating**: 3 A/GFTC coordination with transportation service providers for updated service information; website development.
- **Barriers rating:** 1 GGFT is already doing this and has indicated willingness to expand this capability

- **Ongoing Resources rating:** 2 Way2Go has <u>five staffers</u>, but that includes employer outreach and education programs. A more limited online/211 program would require fewer staff. Potential for shared-staffing arrangement funded by more than one agency.
- **Timeframe**: Short

### Tech-enabled Ridesharing

 Needs addressed: Access to jobs, other trip purposes for rural individuals without personal transportation

Various technology start-ups are in the process of developing the capacity for real-time ride aggregation through software that is distributed as a smartphone application. Working with a local partner, a fleet of vehicles (possibly accessible minivans) could be acquired and distributed to individuals who currently are in need of a vehicle and employment. These individuals would agree to drive for a specified number of hours per day (for which they would be paid) in return for having access to that vehicle for personal use at other times. The smartphone app would allow other people to request rides and the software would assign those trips to the drivers in as efficient a way as possible.

Costs for this program include the vehicle acquisition, driver compensation by some regional entity and the management costs associated with that. There would also be a fee for the use of the software platform. The ride aggregation software that was envisioned for this project was developed by Bridj, which terminated operations in May 2017. It is unclear at this time who will own the assets of Bridj and whether that party will attempt to maintain and expand the software.

- **Scalability rating:** 2 Once the program has started, expanding it will make it cheaper on a per unit basis
- **Investment rating:** 4 Vehicle acquisition; hiring and paying drivers (partly offset by fare revenue and/or government subsidy applied to this program)
- **Ø Barriers rating**: 5 The program does not yet exist, nor is there a pilot program. Bridj went out of business but software may be purchased by another entity.
- **Ø Ongoing Resources rating**: 3 Fee for use of software platform
- **Ø Timeframe**: Medium-Long

#### **ZimRide**

Need addressed: Access to jobs

ZimRide is an online rideshare/carpool matching service owned by Enterprise, developed by the same company that created Lyft. ZimRide riders pay for individual rides from drivers in a "Trusted Network" – typically a business, an educational campus, or a larger collection of organizations. There is a cost for an organization to have its employees use ZimRide, which varies depending on the number of employees and other factors.

#### Seasonal/Tourism Workforce

Ten of the largest employers outside of the Glens Falls urbanized area are in the tourism industry, with a cluster of smaller employers centered around Lake George.<sup>2</sup> A/GFTC, in partnership with the Adirondack Regional Chamber of Commerce, could work with regional resorts, camps, and conference facilities to coordinate with ZimRide to develop a "Lake George Trusted Network" to help facilitate rides for seasonal employees. ZimRide offers an online sign-up site for organizations, but the seasonal employers would need to work with their own HR departments to promote the program within their work places (this could also be facilitated in part by a local Chamber of Commerce, or similar organization). Employers in Saratoga Springs may also be a potential ZimRide network.

### Year-round Employers

As with seasonal employers, there are a number of large year-round industries in the region, mostly located in the urban area. One exception is the Fort Miller Group, the largest employer in the A/GFTC rural area, with over 250 employees. Creating an independent vanpool or carpool program would be costly and timeconsuming, but A/GFTC could encourage large employers to create and promote a trusted ZimRide network for their employees, similar to the seasonal example above. It should be noted that ZimRide would be equally valuable for large employers in the urban part of the Glens Falls area, since many of the employees of those firms live in the rural areas and could benefit from ridesharing. The formation of carpools and vanpools from the rural areas into Glens Falls would open up employment opportunities for people who currently cannot drive.

- **Scalability rating**: 2 A/GFTC outreach to businesses with a large commuting workforce.
- **Investment rating:** 1 No direct cost for A/GFTC after initial outreach; companies could contact ZimRide for cost information
- **Ø** Barriers rating: 1 ZimRide already operates in Tompkins County as Finger Lakes Rideshare.
- **Ø Ongoing Resources rating**: 1 Little or none required
- **Ø Timeframe**: Short

### iPool2

Need addressed: Access to jobs

As an alternative to ZimRide, A/GFTC could invest resources in iPool2, a free online ridematching program for commuters who live or work in the capital region (Albany). The program is administered by New York State's 511NY Rideshare program, which provides commuter information by region. iPool2 had

<sup>&</sup>lt;sup>2</sup> Large tourism-industry employers in A/GFTC rural area:

<sup>100-249</sup> employees: Brant Lake Camp in Brant Lake, Jimbo's Club at the Point in Brant Lake, Willard Mountain in Greenwich, Camp Chingachgook in Katskill Bay, Lake George **Escape Campgrounds in Diamond Point** 

<sup>50-99</sup> employees: Boy Scouts of America in Brant Lake, Northern Frontier Camp Office in North River, YMCA Conference Center in Silver Bay and 1000 Acres Ranch Resort in Stony Creek.

previously merged with A/GFTC's iPoolNorth; the consolidation was intended as a cost-sharing initiative, as well as to link the systems to reflect commutation patterns. However, now that the program is hosted by the 511NY system (rather than a standalone database), there may be benefit to reverting to separate online portals. This would allow for local promotion and an online presence customized to the A/GFTC area, while still allowing for ridematching to occur throughout the greater Capital District. It would also be possible to set up a vanpool service, similar to the one currently administered by CDTA through iPool2.

- **Scalability rating**: 2 Promote customized A/GFTC ridematching service.
- **Investment rating:** 2 Coordination with 511NY Rideshare to create separate online portals.
- **Ø Barriers rating**: 2 Coordination with 511NY Rideshare to create separate online portals.
- **Ø Ongoing Resources rating**: 2 Promote customized ridematching service.
- **Ø Timeframe**: Short-Medium

## GoGo Grandparent

• Need addressed: Senior transportation

GoGo Grandparent is a phone-based ridehailing service that allows senior citizens to call a service that connects them with Uber, Lyft, or other local ridehailing systems. The service also notifies a senior citizen's children or caretakers when they reach their destination safely. With the passage of a law in April to make ridehailing legal in New York, which took effect on June 29, 2017, this option becomes a high-feasibility program; A/GFTC or others would need to market it to senior service providers, but after that it just requires individual sign-ups online.

- **Ø Scalability rating**: 1 − Could scale as fast as ridehailing services.
- **Investment rating**: 1 Some marketing and promotion would be needed.
- **Ø Barriers rating**: 2 Ridehailing services are legal in New York State as of 6/29/17 but not yet well established
- **Ø Ongoing Resources rating**: 2 Little intervention needed other than promotion.
- **Ø Timeframe**: Short

## **Vehicles for Change**

 Needs addressed: Zero-vehicle households in rural areas; access to jobs and other trip purposes

Vehicles for Change (VFC), based in Maryland, is a non-profit organization which accepts donated cars, repairs the cars to meet quality and reliability standards, and awards the cars for as little as \$850 to eligible families, who are referred to VFC by social service agencies and meet eligibility criteria. Since 1999, VFC has awarded 5,400 cars to low-income families, mainly in Virginia and Maryland.

VFC also operates Freedom Wheels, a retail used-car lot that is open to the public. Some donated vehicles (such as luxury models or cars with a high book value) are sold through Freedom Wheels, in order to maximize the donor's tax

deduction and VFC's financial return. All proceeds go toward preparing more vehicles for deserving families.

A third component of VFC is an automotive repair training program. VFC's Full Circle Service Center in Halethorpe, MD has a program for ex-offenders who have been released from the corrections system. These trainees receive certification and can obtain jobs at auto repair shops. VFC has developed a partnership with the Maryland Transit Administration so that trainees can qualify to work as bus mechanics at MTA.

The greatest challenge for VFC is acquiring enough cars. They are able to award only about one out of five cars donated. In a northern climate with greater use of road salt and therefore more issues with rust, the award ratio may drop to one out of six or one out of seven. VFC partners with schools, charities, and car dealerships to increase vehicle donations. However, there are also many other charitable organizations competing for donated cars, including public radio stations, Kars for Kids, and other non-profits. None of these has the vehicle award component of VFC, which is its primary benefit to rural mobility. In Vermont and elsewhere in northern New England, Good News Garage, part of Ascentria Care Alliance, has a program very similar to VFC, but it has no current plans to expand into upstate New York.

VFC is beginning to expand its programs outside the Maryland-Virginia-Washington D.C. region; in 2015, it opened a second location in Detroit, Michigan. An expansion of VFC's program to the A/GFTC region could be set up as a franchise, with VFC providing knowledge, accounting and management support. VFC also suggests building partnerships with auto dealerships, which helps with car donations and repairs.

- **Scalability rating**: 4 Requires a high level of upfront investment or seed money; would need a local sponsor.
- **Ø Investment rating**: 3 Cost effectiveness of the program depends on the number of cars donated, fixed, and sold; A/GFTC may need to actively promote the program.
- **Ø Barriers rating**: 4 Uncertain of legal barriers; the program does not yet exist in the A/GFTC region, and would require a local advocate, as well as seed money.
- **Ø Ongoing Resources rating**: 2 "Vehicles for Change" could assist a local franchise, but community champions would need to develop and maintain partnerships.
- Ø Timeframe: Medium

# **Grant Writing Technical Assistance**

Needs addressed: Older adults, people with disabilities (potentially others depending on grants available)

Many non-profit and service organizations have limited staff resources, and they may not have the time to apply for grants. A/GFTC could 1) contract with a consultant to offer a grant-writing workshop to transportation service providers in the region interested in applying for non-governmental funding, or 2) identify a list of grant-writing resources (websites, online courses, etc.) for transportation service providers.

- **Scalability rating**: 2 Depends on available staff time
- **Investment rating**: 1 A/GFTC could contract with a grant-writing consultant or develop its own grant-writing workshop.
- **Ø Barriers rating**: 1 No barriers
- **Ø Ongoing Resources rating**: 2 A/GFTC staff hours to identify grant-writing resources; annual cost of grant-writing workshop.
- **Ø Timeframe**: Short

## **Ratings of Alternatives**

Table 2 below summarizes the ratings of the nine top alternatives.

**Table 2: Summary of Ratings of Alternatives** 

Service/Need Addressed	Timeline (Short-Medium- Long)	Ability to Scale Program Regionally (1 to 5 – low score is better)	Level of Investment Needed (1 to 5 – low score is better)	Barriers - Legal, Institutional or Other (1 to 5 – low score is better)	Ongoing Personnel Resources Needed (1 to 5 – low score is better)
<u>ITNCountry</u>	Medium	2	2	2	2
Seniors, visually- impaired adults		Scalability depends on promotion, driver recruitment and rider sign-ups; a non-profit may need additional resources to promote the program.	There is a \$15,000 fee to join during Phase 2. Ongoing fees may be as little as \$2,500 when national roll-out occurs.	ITN Country is still in development; however, ITNAmerica is a wellestablished program.	An ITN Country affiliate in the A/GFTC region would receive technical support from ITNAmerica, but may need A/GFTC resources to promote the program.
Rides to Wellness	Short-Medium	2	2	3	2
Medical and wellness trips for anyone with transportation challenges	Short if local program run by healthcare provider; Medium if a regional or state- run program.	Low if local program run by healthcare provider or state; Medium if A/GFTC plays an active role.	Low if local program run by healthcare provider or state; Medium if A/GFTC plays an active role.	The program does not yet exist at a regional level; after development, Vermont will provide an example of a Rides to Wellness program administrative framework.	Low if local program run by healthcare provider or state; High if A/GFTC plays an active role.
Transportation Call	Short	2	3	1	2
Center/ Online Transportation Coordination		A/GFTC resources to promote new website/2-1-1 service.	A/GFTC Coordination with transportation service providers for	GGFT is already doing this and has indicated willingness to expand	Way2Go has <u>five staffers</u> , but that includes employer outreach and education
Awareness of available services among all vulnerable populations			updated service information; website development.	this capability	programs. A more limited online/2-1-1 program would require fewer staff. Potential for shared-staffing arrangement funded by more than one agency.

Service/Need Addressed	Timeline (Short-Medium- Long)	Ability to Scale Program Regionally (1 to 5 – low score is better)	Level of Investment Needed (1 to 5 – low score is better)	Barriers - Legal, Institutional or Other (1 to 5 – low score is better)	Ongoing Personnel Resources Needed (1 to 5 – low score is better)
Tech-enabled ridesharing  Access to jobs, other trip purposes for rural individuals without personal transportation	Medium -Long	2 Once the program has started, expanding it will make it cheaper on a per unit basis	4 Vehicle acquisition; hiring and paying drivers (partly offset by fare revenue and/or government subsidy applied to this program)	5 The program does not yet exist, nor is there a pilot program. Bridj went out of business but software may be purchased by another entity.	3 Fee for use of software platform
ZimRide Access to jobs	Short	A/GFTC outreach to businesses with a large commuting workforce.	No direct cost for A/GFTC after initial outreach; companies could contact ZimRide for cost information	1 ZimRide already operates in Tompkins County as <u>Finger Lakes</u> <u>Rideshare.</u>	1 Little or none required
Ipool2 Access to jobs	Short- Medium	2 Promote customized A/GFTC ridematching service.	2 Coordination with 511NY Rideshare to create separate online portals.	2 Coordination with 511NY Rideshare to create separate online portals.	2 Promote customized A/GFTC ridematching service.
GoGo Grandparent Senior transportation	Short	1 Could scale as fast as ridehailing services.	1 Some marketing and promotion would be needed.	Ridehailing services are legal in New York State as of 6/29/17 but not yet well established	1 Little intervention needed other than promotion.

Service/Need Addressed	Timeline (Short-Medium- Long)	Ability to Scale Program Regionally (1 to 5 – low score is better)	Level of Investment Needed (1 to 5 – low score is better)	Barriers - Legal, Institutional or Other (1 to 5 – low score is better)	Ongoing Personnel Resources Needed (1 to 5 – low score is better)
Vehicles for Change Zero-vehicle households in rural areas; access to jobs and other trip purposes	Medium	4 Requires a high level of upfront investment or seed money; would need a local sponsor.	3 Cost effectiveness of the program depends on the number of cars donated, fixed, and sold; A/GFTC may need to actively promote the program.	4 Uncertain of legal barriers; the program does not yet exist in the A/GFTC region, and would require a local advocate, as well as seed money.	"Vehicles for Change" could assist a local franchise, but community champions would need to develop and maintain partnerships.
Grant Writing Technical Assistance Older adults, people with disabilities	Short	2 Depends on available staff time	A/GFTC could contract with a grant-writing consultant or develop its own grant-writing workshop.	1 No barriers	A/GFTC staff hours to identify grant-writing resources; annual cost of grant-writing workshop.

### Outreach

Following the development of the alternatives described above, A/GFTC and the consultant team sought to obtain input from as many relevant parties as possible. These included the non-profits and governmental agencies contacted in the early phases of the study, additional social service organizations, and members of the general public reached through a variety of means.

A/GFTC prepared a brief survey with input from the steering committee that was made available to all of the key stakeholder groups. These groups then distributed paper surveys to their constituents and/or encouraged them to go online to fill out the survey there. The survey form is shown in the appendix.

The Study Advisory Committee helped to identify the key stakeholder groups which included County agencies as well as non-profit organizations. The key agencies are listed below:

- Family Service Association of Glens Falls
- Open Door Mission, Glens Falls
- Baywood Center, Queensbury
- Warren Washington Association for Mental Health, Inc.
- Warren County Social Services
- Warren County Employment & Training Administration
- Washington County Employment & Training Administration
- Washington Saratoga Warren Hamilton Essex Board of Cooperative Educational Services (WSWHE BOCES)
- AHI Health
- Washington County Aging & Disability Resource Connection
- Warren County Aging & Disability Resource Connection
- Washington County EOC
- Long Term Care Council
- Community, Work and Independence (CWI)

In an effort to reach a wider audience, representatives from the team and A/GFTC introduced the project in the Adirondack Interagency Council Meeting on May 11, 2017. The council is a collaboration of health and human service agencies and businesses in the tri-county area: Warren, Washington and Saratoga Counties. A total of 240 completed surveys were received either on paper or online. The majority (193, or 80%) were completed on paper. These include 52 forms from the Association for Mental Health, 51 forms from the Family Service Association, 42 forms from the Baywood Center, 21 forms from Open Door Mission, 7 forms from CWI and 10 forms each from Warren County DSS and WSWHE BOCES.

The following section summarizes the results of the survey. It is important to note that the survey does not reflect the study area population in a statistically-valid way, but rather offers a snapshot of many of the constituents of existing social service agencies.

## **General Questions**

The survey covered a wide geographic range with respondents living in a total of 37 different municipalities. Glens Falls had the most respondents with 59 returned surveys. Queensbury was the next with 31 returned surveys, followed by Hudson Falls with 24 and Granville with 17. Figure 15 shows the self-reported geographic distribution of survey respondents.

Figure 15

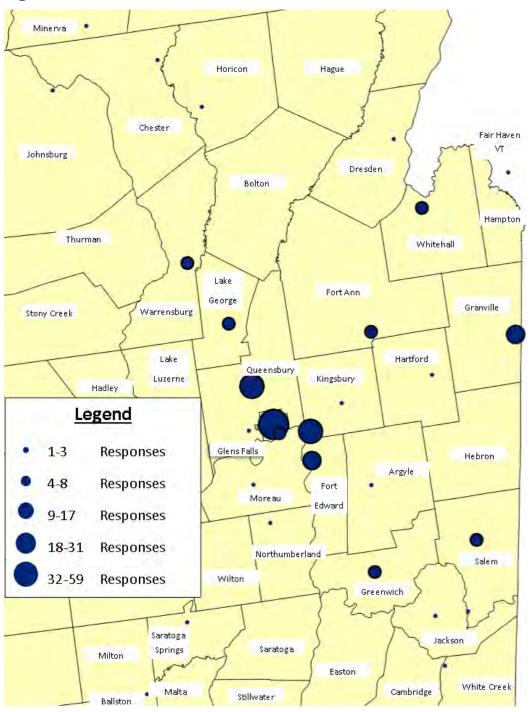
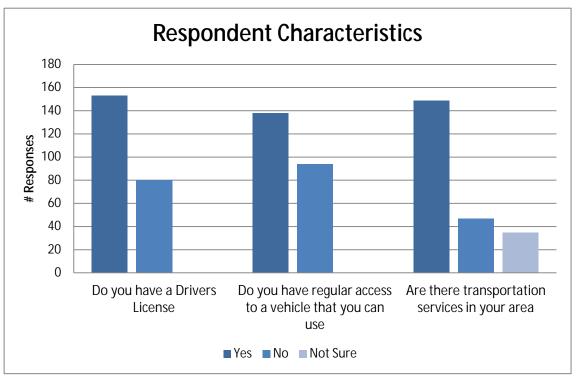


Figure 16 shows the responses to the first three survey questions.

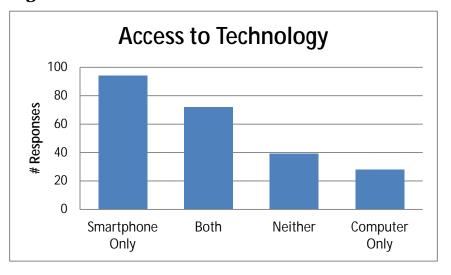
Figure 16



- Of all respondents, approximately two thirds (64%) have a driver's license.
- 58% of respondents have access to a vehicle
- 63% of the total said that transportation services are available in their area, 21% said that they do not have access to transportation, and the remaining 16% were unsure. Since the majority of respondents were clients of one of the agencies listed above, the low number of "not sure" responses indicates that the agencies do a good job of informing their clients what is available.

Figure 17

As seen in Figure 17, the majority of respondents (70%) stated that they have access to a smartphone while under half (44%) have a computer with Internet access. About 16% of respondents have neither a smartphone nor Internet access while 31% have access to both. The widespread availability of smartphones among the

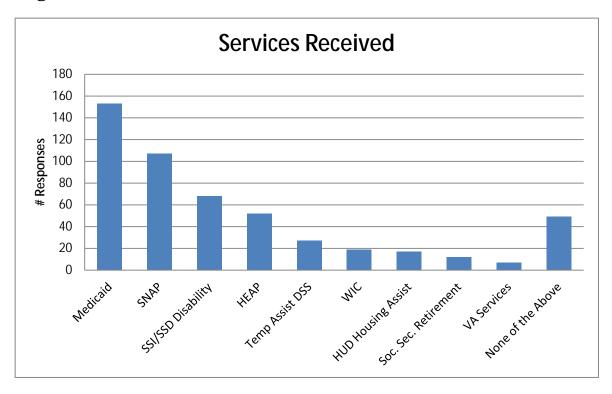


respondents suggests that information dissemination and the arrangement of transportation through smartphone apps may be more successful than traditional web-based methods.

The survey prompted respondents to identify any government benefits that they receive. The results are shown in Figure 18.

- Some 67% receive Medicaid benefits
- Next most used service is SNAP (45%) followed by SSI/SSD Disability
- About 20% of respondents do not receive any of the listed benefits.

Figure 18

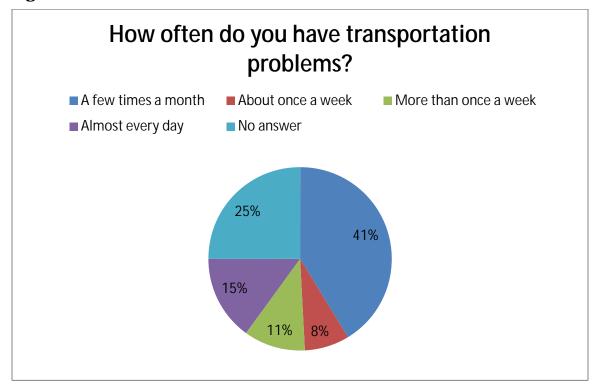


# **Transportation Specific Questions**

The survey questions 5 to 7 inquired about the timing and frequency of transportation problems people face and the types of trip for which they have difficulty finding a ride. Figure 19 shows the frequency of transportation problems for respondents in general. 60 respondents (25% of the total survey) left this question blank, presumably indicating that they do not have transportation problems. The percentages shown in Figure 19 represent the percentages of all surveys, but among people who answered this question:

- A majority (55%) had transportation problems a few times a month.
- About a quarter of respondents face transportation barriers several times per week.
- 20% face transportation problems almost daily.

Figure 19



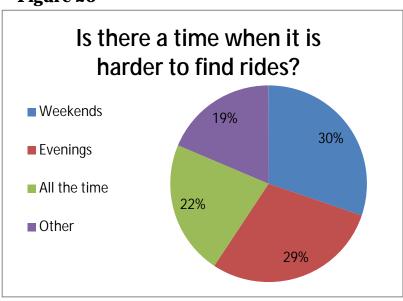
These results are consistent with the responses to question 7 (shown below in Figure 21) that indicate the majority of problems experienced by survey respondents are for trip purposes that require occasional trips (rather than daily trips) such as medical appointments and shopping.

The survey showed that transportation barriers are spread over a variety of times.

The percentages in Figure 20 reflect the 172 respondents who answered this question, indicating that they faced problems at least on occasion.

- 22% of respondents have trouble finding rides all of the time
- Evenings and weekends were both identified by between a quarter and a third of respondents

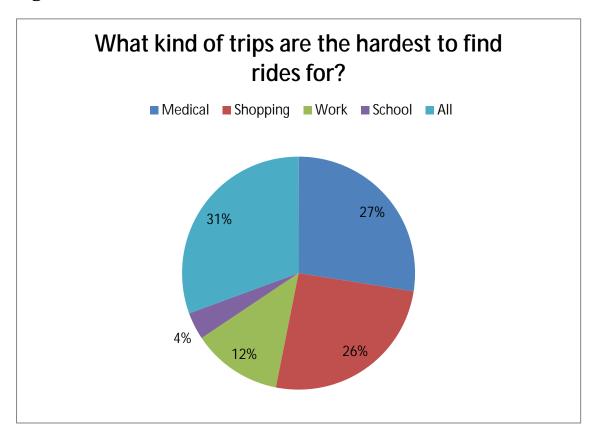
Figure 20



Some responses also noted seasonal difficulties and issues with transportation on holidays. A few "other" responses indicated problems only when their car broke down.

The next question asked about what kind of trips (trip purposes) respondents had difficulty making. There were 160 responses to this question, with the other 80 surveys leaving this question blank, likely because they feel it did not apply to them. Figure 21 shows that just under one third of the people who answered this question (31%) had difficulties finding rides for all types of trips. Medical and shopping trips were identified as trips that were difficult to accomplish. Work and school trips figured less prominently into the responses.

Figure 21



The prominence of medical trips in this result could indicate that many of the respondents were ineligible for Medicaid transportation, possibly because their household owned a car, or other reasons. The relatively low percentages for work and school could indicate that few of the respondents currently had jobs or were in school, or that if they were unable to hold a job because of a lack of transportation, they may have answered "All."

Question 8 on the survey sought to identify specific geographic locations that respondents had trouble reaching. Many of the responses were more generic in nature, reflecting trip purposes (such as "shopping" or "doctor") rather than

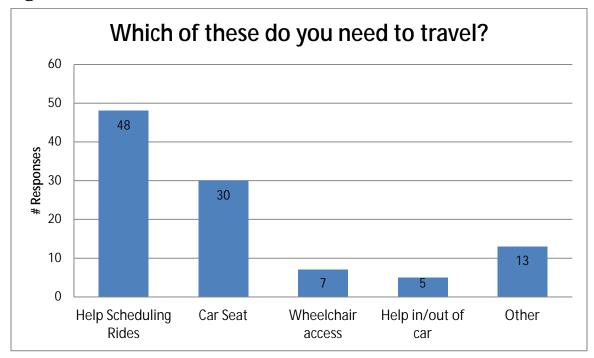
specific locations. Among the geographical locations mentioned, the most common (with at least three responses), in descending order, were as follows:

- 1. Queensbury
- 2. Glens Falls
- 3. Wilton Mall
- 4. Albany
- 5. Hudson Falls
- 6. Lake George
- 7. Saratoga
- 8. South Glens Falls

Other locations with one or two responses included Aviation Mall, Baywood Center, Court, Granville, SUNY Adirondack, Warren County HSB, Whitehall, Albany airport, Albany Medical Center, Conifer Park, Evergreen Court, Glen Street Shopping Center, Glens Falls Hospital, Great Escape, Megabus, Train Station, and Warrensburg Dental.

When asked about specific needs associated with their travel, as shown in Figure 22, the number one response was help scheduling rides (18% of returned surveys), followed by a car seat with 30 responses. A smartphone app that makes scheduling rides easier could have a significant impact on rural mobility. In Washington County, there is already a robust car seat initiative, with staff providing car seats and installation training. It may be possible to provide this service to non-governmental agencies and non-traditional partners, which would make existing transportation resources more available to parents.

Figure 22

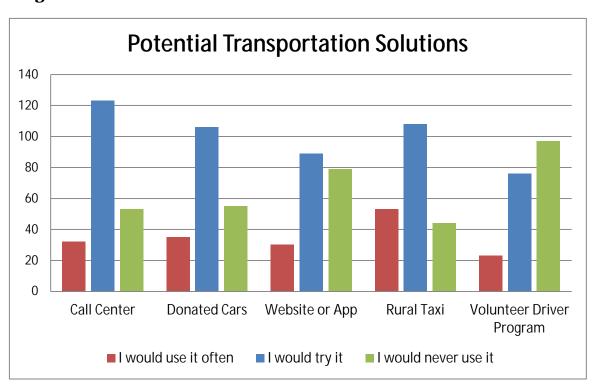


#### **Potential Solutions**

The reverse side of the survey form asked respondents to react to the potential solutions developed during the study. This list of solutions is a simplified version of the alternatives discussed in detail earlier in this report. It was not possible in this format to provide detailed descriptions of how each solution would work, thus the goal was to gauge a general reaction to a concept rather than determine the feasibility of an alternative in a robust way. Figure 23 shows the responses to potential transportation solutions. The percentages shown below represent responses divided by total surveys collected rather than the percentage of people who answered the question. For each option, there were between 25 and 37 respondents who did not fill in any choices.

- Overall, the most popular option was a rural taxi service, with 23% of respondents saying they would use it often and only 20% saying they would never use it. Nearly half of the surveys indicated that they would at least try such an option.
- The second most popular option was the call center, followed closely by the donated car program. Over 50% of respondents said they would try using the call center and 45% said they would try the donated car program. (It was not clear whether people were saying they would try donating their vehicle to the program or would try to receive a donated vehicle through the program.) About 15% of the respondents said they would use each of these options often, and about 23% said they would never use these options.

Figure 23



The website/app to facilitate ridesharing and the expanded volunteer driver program for seniors were somewhat less popular, with 35% and 42%, respectively, saying they would never use it. The volunteer driver program likely scored low because respondents who were not older adults likely felt that it was not open to them.

Figure 24 summarizes the reactions to the options by combining the first two choices into a "favorable" response. This graph makes it clear that the rural taxi was the most favored option, while the volunteer driver program for seniors had the fewest favorable responses. Again, it is possible that if the volunteer program had not been restricted to seniors, it may have scored better. In addition, the existence or lack of favorable response is only one element to take into account regarding the potential for implementation. It should be noted that the donated cars program and the volunteer driver program had the highest number of nonresponses (37 each).

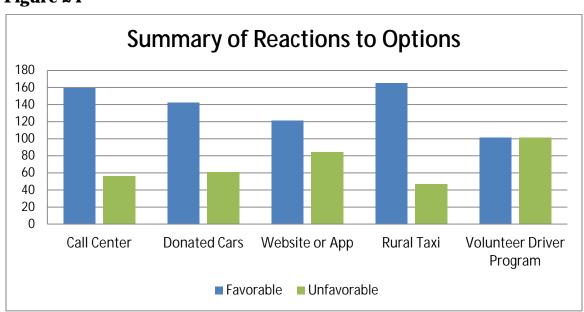


Figure 24

#### **Other Comments**

There were 31 other comments received in the survey. Six comments noted the economic impacts of transportation. These included the expense of driving and vehicle ownership as well as the inability to earn money because of limited access to jobs. Eight comments were mode specific—noting lack of bus service and the unreliability and perceived lack of safety associated with taxi cabs. A few comments noted communication difficulty with Medicab drivers (due to a language barrier) and the ability to schedule more than one appointment at a time.

# **Follow-up Communication**

According to the survey responses, Facebook is the best way to communicate information to the public with 70 responses. Newspaper and email were the next most popular methods of communication followed by websites and public agency staff. Eight respondents selected the other category. These responses included phone calls, text message, Instagram, and open door.

### Conclusion

Transportation access in rural areas has been a problem for a long time, exacerbated in recent decades as economic opportunities have shrunk and as the population in the northeastern US has aged. Globalization of manufacturing and consolidation of retail by superstores have reduced the viability of locallyprovided jobs and increased the transportation burdens on rural residents who have had to travel farther than they used to when each town or village had its own employment base.

Even in a period of relatively inexpensive fuel (Spring 2017), the cost of owning and operating a car can be prohibitive for many rural residents. For older residents and people with disabilities, driving may not be an option because of physical limitation. Sprawling development patterns that assume the availability of automobiles for everyone present major barriers to people who cannot drive. There are unfortunately many facilities oriented toward people who tend to be transportation-disadvantaged that are located far from village centers or existing public transportation services.

This study has attempted to identify transportation barriers and unmet needs in the rural region surrounding Glens Falls, and then to list potential options to address these needs. These options exhibit a wide range of potential effectiveness and scalability, as well as a range of resources needed for implementation.

The initial survey undertaken through area non-profits and county agencies shows a receptiveness to several of the options, especially for a call center and rural taxi service. Proponents of some of the programs, such as ITN Country and Vehicles for Change, stand ready to work with the Glens Falls region to create new rural mobility initiatives.

In all cases, in order for a program to succeed, it needs a local champion and a source of funding. Fortunately, many of the options do not have high price tags, and with local leadership and cooperation, they do have the potential to make a difference in the mobility options available to rural residents.

# **Next Steps/Recommendations**

As shown in the analysis of the alternatives, no one course of action will fulfill all of the transportation needs in the region. However, several options for implementation seem to have a greater potential to balance efficacy with feasibility. In addition, there are other actions that can be taken in the short term to maintain the momentum of this project into the future. It is recommended that the following action items be pursued:

Work with stakeholder agencies to identify potential host for **ITN***Country.* Given that the region already has seen success with the existing RSVP program, expansion of this service through ITN Country could represent a relatively low-cost way to provide more rides to seniors. Although CWI is also a potential candidate, the agency focus on services for the disabled reduces the potential benefit to rural residents. In either case, A/GFTC has the potential to program future UPWP planning funds

to enable assistance for training and implementation, if needed. RSVP staff has noted plenty of unmet demand and a lack of sufficient numbers of volunteers. The boost that would be provided by ITN Country would make this very effective program much more widely available and create a more significant regional impact.

- **Consult with NYS Department of Health and Hudson Headwaters about a Rides to Wellness program.** Given the prominent theme of medical transportation that has run through this entire study, a program focused on helping people reach their medical appointments will address an important need and would have positive ripple effects as the transportation-challenged population can become healthier.
- **Pursue the creation of a mobility manager position.** Of all of the alternatives identified, a staffed call center and online portal have the greatest potential to cut across demographic and geographic boundaries, which would theoretically create significant benefit. A shared-staffing scenario could potentially spread the financial burden across multiple agencies, increasing feasibility. The coordination efforts mentioned above would also be necessary for the success of the call center, so that the staff would always have up-to-date information about transportation options.
- Pursue standalone ridesharing gateway such as iPoolNorth. As stated in the alternative evaluations, the original decision to link iPoolNorth and iPool2 was made to create greater connections across MPO boundaries. Now that both of the systems are *de facto* linked through New York State's 511 system, the consolidation through a single web portal is no longer necessary. A/GFTC staff should begin the process to create a unique web presence, in conjunction with CDTC and NYSDOT. Although this option had the second-highest unfavorable rating on the survey, the low financial stake and relative ease of implementation still makes it a worthwhile activity to pursue.
- Continue outreach and coordination efforts with human service agencies and stakeholders. An ongoing theme of the stakeholder discussions, both related to this project and about rural transportation in general, is that communication between transportation providers, human service providers, and the MPO are both beneficial and elusive. In conducting the outreach for this study, lines of communication were created or strengthened. Ongoing coordination, perhaps through the Adirondack Interagency Council or other groups, should continue as this study is implemented.
- Monitor progress of ridehailing and consider future options. By the summer of 2018, ridehailing will have been legal in the A/GFTC area for a year. At that point, staff should evaluate how quickly ridehailing services have grown, their impact on the travel market, and their potential for solving rural mobility problems.