



HSTP Steering Committee Meeting (Human Services Transportation Plan)/

HSTP Rural Subcommittee/HSTP Urban Subcommittee (in lieu of Lack of Quorum)

Tuesday, June 4, 2024 – 12:00 PM

Open to the Public

**Meeting Location:
456 Fulton St., Suite 420, Peoria, IL 61602**

To join the meeting from a computer, tablet or smartphone:

<https://meet.goto.com/TCRPC/hstp-meeting>

To dial in using a phone:

United States: [+1 \(408\) 650-3123](tel:+14086503123)

Access Code: 329-465-365

Agenda

- 1. Welcome, Introductions, & Roll Call**
- 2. Public Comment**
- 3. Approval of April 2, 2024 minutes**
- 4. Provider and Agency Updates**
- 5. Presentation from Meghan Brake:**
 - a. Illinois Center for Transition and Work**
- 6. Region-wide surveys**
- 7. HSTP Coordinator Report**
- 8. Other**
 - a. Next meeting: Tuesday, August 6, 2024, at 12:00 p.m.**
- 9. Adjourn**

Opportunities for public comment will be afforded.

For more information, contact Reema Abi-Akar at (309) 673-9796 ext. 231 or rabiakar@tricityrplc.org, or visit <http://www.tricityrplc.org/transportation/transit/>

In compliance with the Americans with Disabilities Act, should any person wishing to attend this meeting need special accommodations for signing or other communications, please contact the Tri-County Regional Planning Commission Office at (309) 673-9330.

**Human Services Transportation Plan Steering Committee
Tuesday, April 2, 2024 – 12:00 PM**

Tri-County Regional Planning Commission (TCRPC)
Suite 401, 456 Fulton St., Peoria, IL 61602

Meeting Minutes

1. Welcome, Introductions, & Roll Call

Reema Abi-Akar called the meeting to order at 12:02 p.m.

RURAL AREA SUBCOMMITTEE				
Name	Organization	Representing	Present	Absent
Shelly Entrekina*	FCRT/FCRC	Fulton	~X	
Barb Long*				X
Doug Manock*	Fulton County Board/PCOM	Fulton		X
Audra Miles*			X	
Joe Coffin	Thrive Community Services	Knox	X	
Kraig Boynton	City of Galesburg	Knox	X	
Hannah Fuchs	Marshall-Stark PCOM	Marshall		X
David Lueders	Marshall County Board	Marshall	~X	
Mary Patton	AARP	Peoria	~X	
Heather Bouchez	Best Buddies	Peoria	~X	
Traci Dowell	MSW Projects	Stark		X
Renee Razo	CIAOA	Stark		X
Vivian Hagaman	Tazewell County Board	Tazewell		X
Max Schnieder	Tazewell County Board	Tazewell		X
Tyler Rogers	ADDWC	Woodford		X
Troy Maxwell	We Care	Woodford		X
URBAN AREA SUBCOMMITTEE				
Dawn Harper	EPIC	Agency	X	
Thane Hunt**	Advocates for Access	CIL	X	
Dr. ShamRA Robinson*	Greater Peoria Mass Transit District	Provider		X
Angel Marinich*				X
Kylie Rathmann	Express Employment Professionals	Agency	X	
Chris Mitchell*	Paratransit Users	User		X
Connie Schiele*			~X	
Jim Bremner	Washington Township	Partner	X	
Greg Cassidy	TCRC	Agency		X

* = Shared seat

** = Proxy Vote

~ = Present via phone or internet

Also in attendance:

Reema Abi-Akar, TCRPC
Jared Arthur, Snyder Village
Loni Baker, Stone-Hayes CIL

Gabriel Guevara, TCRPC
Melissa Ohrwall, IDOT

2. Public Comment

No public comment.

3. Approval of February 6, 2024 minutes

While there was no quorum of the combined HSTP Steering Committee, a quorum of the Urban Area Subcommittee was present in person, so Reema asked if anyone from the group opposed allowing the Urban Subcommittee to vote to approve the minutes on behalf of the whole group. No attendees opposed.

Kylie Rathmann motioned to approve the minutes, and Thane Hunt seconded. Reema conducted a roll call vote of the Urban Area Subcommittee to approve the February 6, 2024 minutes, and they were unanimously approved.

4. Provider and Agency Updates

Thrive Community Services (Formerly KCCDD)

Joe Coffin had nothing to report.

City of Galesburg

Kraig Boynton reported that his organization had narrowed their RFP for dispatch software down to two firms. They hope to have software in the next six months.

Illinois Department of Transportation

Melissa Ohrwall reported that CVP application award letters were posted in January. They are set to begin building vehicles in July. More information about anticipated delivery timelines for each vehicle type is coming soon, as the larger vehicles take more time to construct. Contracts for the vehicles will be sent to agencies near delivery of the first vehicles. Melissa specified that non-profit partners' GATA profiles must be in good standing. The next CVP application will likely be in 2025. Informational sessions will be held closer to that time.

Fulton County PCOM

Audra Miles reported that the county has submitted the DOAP and 5311 their organization had submitted their application.

Advocates for Access

Thane Hunt gave no report.

Tri-County Regional Planning Commission

Gabriel Guevara reported that TCRPC's Active Transportation Plan survey was open until April 8. Reema said she would send the survey to those who had not received it or were not on the email list.

Express Employment Professionals

Kylie Rathmann reported having the same issues as before, difficulties transporting qualified people to jobs on the outskirts of town or outside normal bus hours.

Washington Township

Jim Bremner reported they had signed up three new riders in the last six weeks. They now total over 40 riders. He reported that ridership has recently held steady while still recovering from a COVID-19 drop-off.

EPIC

Dawn Harper gave no report.

Paratransit User

Connie Schiele praised the increased ridership in Washington Township and expressed support for outer-county transportation access.

Best Buddies

Heather Bouchez gave no report.

Fulton County Rural Transit (FCRT)

Shelly Entrekin gave no report.

Snyder Village

Jared Arthur gave no report.

AARP

Mary Patton gave no report.

Marshall County Board

David Lueders gave no report.

5. APTA Recommended Practices for Naloxone (Narcan) for Transit Agencies

Reema presented on recently issued American Public Transit Association (APTA) Recommended Practices for naloxone (Narcan) programs for Transit Agencies. Reema introduced fentanyl and provided basic facts on its effects

and potency. She highlighted growing concern about potential exposure to transit operators and staff. Reema noted some common symptoms of fentanyl overdose and highlighted the capabilities of naloxone to save overdosing individuals.

APTA guidance recommends identifying and coordinating with stakeholders, designating personnel to carry naloxone, and developing robust policies and procedures to establish a new program. Recommended training practices include exploring existing programs and considering current laws, regulations, and trainings. Reema highlighted the necessary conditions and recommendations for storing and maintaining the necessary supply of naloxone, including the inability to store it in vehicles.

Jim Bremner added a comment about the availability of free Narcan locally through Trillium Place. Jim also gave a comment about the Central Illinois Families Anonymous group for families of people experiencing addiction.

Mary Patton asked how drivers would be able to acquire naloxone on a route if it cannot be stored in the vehicles. Thane Hunt responded that drivers could take naloxone with them on route and remove it from the vehicle upon returning.

6. HSTP Coordinator Report

Reema reported that TCRPC will release their Call for Projects on April 17. Applications are due June 8. \$175,040 of Section 5310 funding is available in the pool for any urban projects. The application for Section 5310 funding is incorporated in a Combined Funding Application Google Form with other funding streams. Reema gave a walkthrough of the Combined Funding Application Google Form and demonstrated how to navigate to the Section 5310 funding section.

Reema reiterated that the TCRPC Active Transportation Plan Survey closes on April 8. More surveys for the HSTP Committee to disseminate will likely be available around the next HSTP Committee meeting.

Joe Coffin shared a comment about the direction of bicycle traffic when sharing the road with vehicles.

7. Other

Kylie Rathmann inquired about the results of TCRPC's in-person bus route audit. Reema responded that the report would be shared with the committee when it is finished.

8. Adjourn

The meeting was adjourned at 12:40 p.m.

**Agency Survey
Transportation Needs Assessment**

Human Service Agencies, Elected Officials, Churches and Other Organizations

The purpose of this survey is to improve your community's public transportation system by identifying your client's transportation needs.

General:

Date: (mm/dd/yy) Counties/communities served:

Zip code: Agency/Entity name:

Your Organization:

1. Please indicate the type(s) of service your organization provides. (Check all that apply)

- | | | |
|-----------------------------------------------|---------------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Senior | <input type="checkbox"/> Client/consumer transportation | <input type="checkbox"/> Economic development |
| <input type="checkbox"/> Medical | <input type="checkbox"/> Government | <input type="checkbox"/> Community development |
| <input type="checkbox"/> Disability | <input type="checkbox"/> Housing | <input type="checkbox"/> Religious |
| <input type="checkbox"/> Employment | <input type="checkbox"/> Education | <input type="checkbox"/> Other |
| <input type="checkbox"/> Counseling | <input type="checkbox"/> Recreation/fitness | |
| <input type="checkbox"/> Food and/or clothing | <input type="checkbox"/> Legal | |

2a. Does your organization provide client transportation in any of the following ways? (Check all that apply)

- Operate transportation vehicles directly
- Contract with transportation provider to serve clients
- Staff or volunteers provide client transportation
- Purchase or subsidize fares (or passes) for clients with local transportation providers.

Please indicate which provider(s) in the box below.

2b. If your organization operates transportation vehicles directly, how many vehicles do you operate?

Service and Needs:

3. Please indicate how current public transportation service could be improved in your community.
(Check all that apply)

- | | |
|----------------------------------------------------------------------------|------------------------------------------------------------------------|
| <input type="checkbox"/> Expanded hours of operation | <input type="checkbox"/> Accessibility of service |
| <input type="checkbox"/> Central dispatch/information source (one phone #) | <input type="checkbox"/> Affordability of service |
| <input type="checkbox"/> Better way to call for a ride | <input type="checkbox"/> Better coordination between service providers |
| <input type="checkbox"/> Expanded service outside of town | <input type="checkbox"/> Other, please specify in box below |

4a. Are there unmet public transportation needs in your community? Yes No

4b. If yes, what group(s) have unmet transportation needs? (Check all that apply)

- Senior citizens General public Low income persons
 Persons with disabilities Students Other

Transportation Needs:

5. What type(s) of trips do your clients need? (Check all that apply)

- Shopping Family/friends visits Religious
 Medical inside county Employment Entertainment
 Medical outside county Social service appointments

6a. Do your clients need medical transportation outside the county? Yes No

6b. If yes, where? _____

6c. How often? (Check all that apply)

- Daily Weekly Monthly ad hoc

7. When do your clients need public transportation? (Check all that apply)

- Weekdays, before 7:00 AM Weekdays, after 10:00 PM Weekends, 5:00 PM to 10:00 PM
 Weekdays, 7:00 AM to 5:00 PM Weekends, before 7:00 AM Weekends, after 10:00 PM
 Weekdays, 5:00 PM to 10:00 PM Weekends, 7:00 AM to 5:00 PM Other

8. Please list the top three towns in your county that need to improve public transportation services to better serve your clients.

9. What type of public transportation do your clients/consumers need? (Check all that apply)

- Fixed route scheduled bus service (pick-up at designated bus stops) Door-to-door demand response (call ahead for scheduled pick-up for elderly or persons with disabilities)
 Fixed route, deviated service (bus operates regular routes, can go off routes on request) Taxi or ride hailing services
 Curb-to-curb demand response service (call ahead for scheduled pick-up)

10. How much should a one-way trip cost within your community?

- Less than \$1.00 \$3.00 \$6.00
 \$1.00 \$4.00 Other, please specify:
 \$2.00 \$5.00

11. If you could change one thing about public transportation for your clients, what would it be and why?

Community Transportation Survey

The purpose of this survey is to help improve your community's transportation system by finding out your transportation needs. Even if you don't need transportation at this moment, please consider what your future needs might be if you were unable to drive for any reason.

General:

Date (mm/dd/yy): _____ County name: _____

Transportation Needs:

1. Do you or members of your household have access to (and can afford) a car or other vehicle that is running, licensed and insured? Circle one: **Yes** **No**

2a. Are there trips you or members of your household can't make because of a lack of transportation?

Circle one: **Yes** **No**

2b. If yes, what kind of trips: (Check all that apply)

- | | | | |
|------------------------------------------------------------|------------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------------|
| <input type="checkbox"/> Work | <input type="checkbox"/> Shopping | <input type="checkbox"/> Kids activities (pool, park, skating etc.) | <input type="checkbox"/> Religious |
| <input type="checkbox"/> Medical appointments | <input type="checkbox"/> Social/entertainment | <input type="checkbox"/> Senior nutrition or day center | <input type="checkbox"/> Other |
| <input type="checkbox"/> Visiting friends or family | <input type="checkbox"/> School | <input type="checkbox"/> Other agency appointments | |

3. How do you or members of your household travel now? (Check all that apply)

- | | | |
|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Drive or ride in household member's vehicle | <input type="checkbox"/> Walk, bike, use wheelchair, etc. | <input type="checkbox"/> Public transportation |
| <input type="checkbox"/> Drive or ride in someone else's vehicle (other than a household member's) | <input type="checkbox"/> Church or social service agency vehicle | <input type="checkbox"/> Other |

4a. Do you or members of your household currently use public transportation? Circle one: **Yes** **No**

4b. If yes, what types of public transportation do you or members of your household use?

Circle all that apply: **Bus** **Taxi** **Van** **Other** **N/A**

5a. Would you or members of your household use public transportation if it was available?

Circle one: **Yes** **No** (If no, skip to question 9)

5b. If available, what types of public transportation would you or members of your household use?

Circle all that apply: **Bus** **Taxi** **Van** **Other**

5c. If available, how would you or members of your household prefer to get a ride? Check all that apply)

- Catch a bus at a bus stop** **Call ahead for a ride (curb-to-curb demand response service),**

- Call ahead for a ride (door-to-door demand response service for seniors or people with disabilities)**

6a. Please list locations (city/town names) that you or members of your household would travel to using public transportation

6b. Using public transportation, how often would you or members of your household travel to the communities listed above? (Circle all that apply) **Daily** **Weekly** **Monthly**

7. What times would you or members of your household need public transportation? (Check all that apply)

<input type="checkbox"/> Weekdays, before 7:00	<input type="checkbox"/> Weekends, 7:00 AM to 5:00 PM
<input type="checkbox"/> Weekdays, 7:00 AM to 5:00 PM	<input type="checkbox"/> Weekends, 5:00 PM to 10:00 PM
<input type="checkbox"/> Weekdays, 5:00 PM to 10:00 PM	<input type="checkbox"/> Weekends, other times
<input type="checkbox"/> Weekdays, after 10:00 PM	<input type="checkbox"/> Holidays

8. How much would you or members of your household be willing to pay for a one-way trip within your county? (Circle one) **Less than \$1.00** **\$1.00** **\$2.00** **\$3.00** **\$4.00** **\$5.00** **\$6.00 or more**

9. What would you like to change about your household's experience with public transportation and why?

Demographics:

10. What is your zip code? _____

11. In what age range do you belong?

Circle one: **Under 20** **20-29** **30-39** **40-49** **50-59** **60-69** **70-79** **80+**

12. How many people live in your household? Circle one: **1** **2** **3** **4+**

13. Does anyone in your household have a disability (physical, mental, etc.) which limits the ability to drive?

Circle one: **Yes** How many people? _____ **No**

14. Do any of your household members need transportation to medical appointments outside the county?

Circle one: **Yes** What city/county? _____ **No**

11. How do you think that transportation coordination could be better in the community?

12. What are a few things that the community does well when it comes to transportation?

13. Are there any other issues or concerns you would like to share about your transportation experience?

14. Please rate your overall experience with the transportation issues below, by circling 0-5.

Transit Customer Service Issue	N/A	Poor	Fair	Excellent		
The ease of finding public transit system information.	0	1	2	3	4	5
The ability to connect to other transit agencies.	0	1	2	3	4	5
The affordability of the service.	0	1	2	3	4	5
Reliability of the service	0	1	2	3	4	5
The ease of scheduling rides.	0	1	2	3	4	5
From transit customer service issues listed above, what are the most important to you?						

For more information about this survey, please reach out to Reema Abi-Akar at the Tri-County Regional Planning Commission: 309-673-9330

SURVEY of TRANSPORTATION PROVIDERS

AGENCY NAME:

DATE:

LOCAL COORDINATION EFFORTS

1. What do you see as the greatest barrier to coordination and mobility in your service area?

2. What strengths do you see in coordination efforts of public and human service transportation in your service area?

3. In your assessment, what enhancements are most needed to improve the coordination of public and human service transportation in your service area?

4. If there are any other issues, concerns, or information relevant to this topic, please feel free to address them in the space provided below.

5. Based on your experience, what are the barriers to coordination of transportation services? (Check all that apply).

- Federal Regulations
- State Regulations
- Liability Issues
- Satisfied with existing transportation program, do not see need to coordinate
- Reluctance of area transportation providers to coordinate
- Other (Explain)
- Not enough equipment
- Incompatible Clients
- Funding

6. Are your agency's transportation services coordinated with other transportation providers in your area?

Coordinated Service Type	With which organizations/agencies do you coordinate?
Central dispatching	
Referral of clients	
Provide service for persons with disabilities	
Joint driver training	
Emergency back-up	
Provide transportation services for another agency	
Other (please explain):	

For more information about this survey, please reach out to Reema Abi-Akar at the Tri-County Regional Planning Commission: 309-673-9330