

# COORDINATED PUBLIC TRANSIT-HUMAN SERVICES TRANSPORTATION PLAN

FOR THE DURHAM, NC URBANIZED AREA

**DRAFT MAY 7, 2024** 

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# Introduction

This section provides an overview of the Coordinated Public Transit-Human Services Transportation Plan, including why it exists, who the stakeholders are, and what the process of updating the plan entails.

# **Executive Summary**

The Durham-Chapel Hill-Carrboro Metropolitan Planning Organization (DCHC MPO) is the regional organization responsible for transportation planning for the western part of the Research Triangle area in North Carolina.

Every five years, the DCHC MPO is tasked with developing a Coordinated Public Transit -Human Services Transportation Plan (hereafter referred to as the "Coordinated Plan") to better serve local seniors and persons with disabilities. In order to develop the Coordinated Plan, stakeholders from the area must identify needs as well as produce plans or strategies to meet and prioritize those needs. This document lists this information as well as provides a review of transit services currently available to older adults and those with disabilities.

A wide array of transportation partners, passengers, advocates, human services partners, and other members of the community were invited to participate in workshops that were designed to determine needs, produce strategies to meet the needs, and prioritize those strategies.

The five main areas for improvement as determined at the 2019 Coordinated Plan workshop and through additional public comment were:

- Coordination/Mobility Hub for Human Services and Public Transportation
- Expanded Transportation Services
- Expanded Education Services
- Application Process Improvements
- Bus Stop Access Improvements

The 2024 Coordinated Plan workshops determined that these needs remain relevant. In particular, the desire for a mobility hub, education services, and application process improvements continue to be significant indicators of a greater need for regional mobility management.

# **Coordinated Planning**

# What Federal Legislation Guides this Plan?

The requirement to develop a Coordinated Plan originates from the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU) of 2005. This act required designated recipients of Section 5307 and Section 5310 funds to develop a plan as a condition of receiving these federal funds and the plan would address the transportation needs of older adults, individuals with disabilities, and low-income populations. There have since been several reauthorizations of this requirement including the Moving Ahead for Progress in the 21st Century Act (MAP-21) of 2012.

The DCHC MPO Coordinated Plan Update of 2019 was developed under the next reauthorization known as the Fixing America's Surface Transportation (FAST) Act, which was signed into law on December 4, 2015. The FAST Act provides long-term funding for surface transportation infrastructure planning and investment. The FAST Act was reauthorized as the Infrastructure Investment and Jobs Act (IIJA) on November 15, 2021. The IIJA continues the requirement that local communities have a "coordinated public transit-human services transportation plan" in order to improve mobility for seniors and individuals with disabilities by removing barriers to transportation services; it also included \$550 billion in new investments for expanding transportation mobility options, among other needed improvements.

This Coordinated Plan fulfills the Coordinated Plan requirement for all Section 5307 and Section 5310 recipients within the DCHC MPO area.

# What is the Coordinated Planning Process?

Federal transit law requires that projects selected for funding under the Section 5310 program be "included in a locally developed, coordinated public transit-human services transportation plan," according to FTA C 9070.1G (page V-I).

According to the same guidance, a locally developed, coordinated public transit-human services transportation plan, or coordinated plan, identifies the transportation needs of individuals with disabilities, seniors, and people with low incomes; provides strategies for meeting those local needs; and prioritizes transportation services and projects for funding and implementation based on available resources.

As defined in the federal guidance, public transportation is regular, continuing sharedride surface transportation services, which are open to the general public or a segment of the general public defined by age, disability, or low incomes and the services currently available to them. Public transportation does not include: intercity passenger rail transportation provided by Amtrak; intercity bus service, charter bus service; school bus service; sightseeing service; courtesy shuttle service for patrons of one or more specific

establishments; or intraterminal or intrafacility shuttle service. Public transportation can be broadly broken down into the following categories:

- Fixed Route bus or rail service that follows consistent routes and schedules.
- Americans with Disabilities Act (ADA)
  Complementary Paratransit transportation services for persons whose disabilities prevent them from using the fixed route system. All fixed route operators (excludes commuter bus/rail) are required to provide this service for eligible individuals with a service area that is within 3/4 mile of fixed route services.
- **Demand Response** other non-fixed route services that provide transportation services for the public (eligibility criteria may apply based on factors other than disability)





Human services transportation, as defined in the federal guidance, includes a broad range of transportation service options designed to meet the needs of transportation disadvantaged populations including older adults, those with disabilities, and those with lower incomes. Individuals have different needs and may require a set of different services depending on their abilities, their environment, and the options available in their communities. Examples of human services transportation may include: dial-a-ride (responding to individual door-to-door transportation requests); the use of bus tokens and/or transit passes for fixed route scheduled services; and accessing taxi vouchers and/or mileage reimbursement to volunteers or program participants.

Transportation is a key factor in being able to access human services agencies. These agencies provide assistance and support for a variety of economic and personal needs such as:

- **Senior Services** (i.e. healthcare, home care, social activities)
- **Disability Services** (i.e. accessibility, employment, education)
- **Social Services** (i.e. housing, food, clothing)

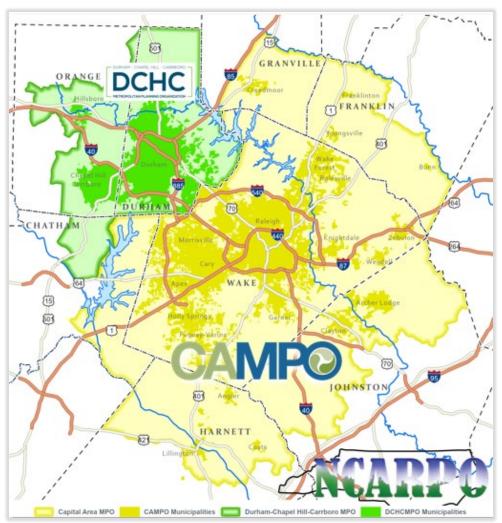
While some human services agencies may have their own vehicles to provide their clients with rides to and from their locations, others may pay for a share of services through a transit provider, already be located within an existing public transit service area, or have little to no means of providing assistance to reach their locations.



Another important factor in creating this Coordinated Plan is to consider other Coordinated Plans that are being created within our approximate area. Many Metropolitan Planning Organizations (MPOs), like DCHC MPO, are responsible for the creation and update of Coordinated Plans. There are two such MPOs that border the DCHC MPO: Capital Area MPO (CAMPO) to the east and Burlington-Graham MPO (BGMPO) to the west. Rural Planning Organizations (RPOs) are also required to have Coordinated Plans as a condition of using Section 5310 funds. For the first time in 2024, these RPO plans will be consolidated into a single Statewide Coordinated Plan.

As always in transportation planning work, this plan is also subject to amendments as part of the 3C process (comprehensive, cooperative, and continuing).

# **Coordinated Plan Boundaries**



Note: The boundaries as presented in this map are subject to change due to Census updates. NCARPO refers to the North Carolina Association of Rural Planning Organizations, which represents the white area.

# What is Mobility Management?

Mobility management refers to a strategic approach aimed at improving transportation options and services within a community or region. It focuses on maximizing the efficiency, effectiveness, and accessibility of transportation resources to meet the diverse needs of travelers, including seniors, individuals with disabilities, and low-income populations. Mobility management seeks to promote sustainable, efficient, and inclusive transportation solutions that enhance mobility and quality of life for all members of the community.

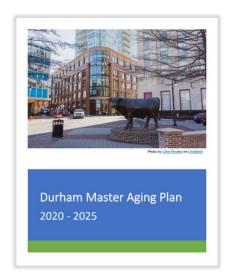
Key aspects of mobility management include:

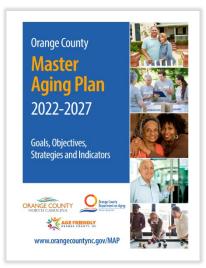
- **Coordination:** Mobility management involves coordinating various transportation providers, services, and resources to create a seamless and integrated transportation network. This may include public transit agencies, paratransit services, ridesharing programs, volunteer driver programs, and other modes of transportation.
- **Information and Outreach:** Emphasis is put on providing accurate and accessible information to travelers about available transportation options, routes, schedules, fares, and eligibility criteria. Outreach efforts target underserved populations to ensure that they are aware of the transportation services available to them.
- **Partnerships:** Mobility management relies on partnerships between public agencies, private organizations, non-profit groups, and community stakeholders. By working together, these partners can leverage their resources and expertise to address transportation challenges more effectively.
- **Innovation:** Mobility management encourages the adoption of innovative technologies and strategies to improve transportation services and address emerging needs. This may include the use of mobile apps for trip planning and fare payment, the integration of real-time transit information systems, and the implementation of flexible on-demand transportation solutions.
- Accessibility: Mobility management aims to enhance accessibility for all travelers, including those with disabilities, older adults, and individuals with limited mobility. This may involve ensuring that transportation services are physically accessible, providing door-to-door assistance for passengers with special needs, and offering travel training programs to help individuals navigate the transportation system independently.
- Evaluation and Continuous Improvement: This element involves monitoring and evaluating the performance of transportation services and initiatives to identify areas for improvement. By collecting data on ridership, service quality, customer satisfaction, and other metrics, mobility managers can make informed decisions and optimize the allocation of resources over time.

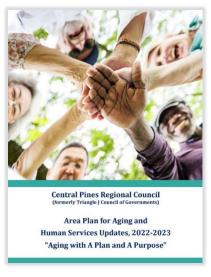
In other words, the Coordinated Plan is a useful tool for determining to what degree mobility management is present in the region. The more gaps that are identified in the plan, the greater the need for additional mobility management. Those in mobility roles have many different titles but work towards many of the same goals. These may include expected titles such as mobility managers and transportation coordinators but may also include social services coordinators, community engagement specialists, technology access specialists, and senior services coordinators. Our regional workshops suggest that a more centralized mobility management system, such as a regional call center with consistent information accessibility, is needed for the DCHC MPO area.

There are also a variety of existing plans that aim to address mobility management goals. Some examples include the Durham Master Aging Plan, the Orange County Master Aging Plan, and the Central Pines Regional Council Area Plan for Aging and Human Services. All of these plans support planning for the well-being of older adults and include some degree of transportation needs.

### **Aging Plans**





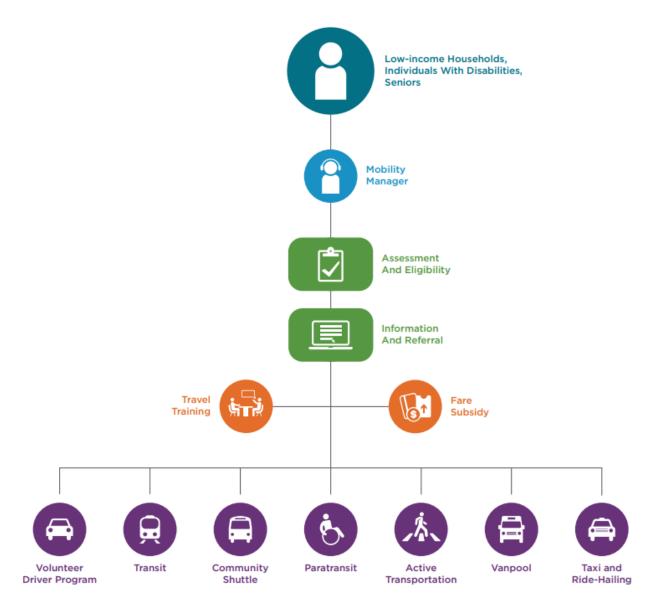


Durham City/County

**Orange County** 

Central Pines

# **Potential Mobility Management Services Structure**



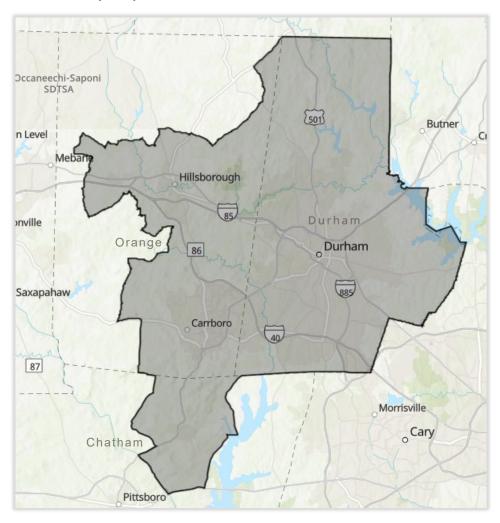
Source: MTC Coordinated Plan

# **Existing Conditions**

This section outlines the geographic boundaries that are covered in this plan update and well as the demographic proportionality of the transportation-disadvantaged communities specific to this plan: older adults, those with disabilities, and lower-income individuals.

# **DCHC MPO Planning Area**

The Durham Chapel Hill Carrboro Metropolitan Planning Organization (DCHC MPO) is a policy body that coordinates and makes decisions on transportation planning issues for the DCHC MPO area, which includes: Durham County in its entirety; a portion of Orange County including the Towns of Chapel Hill, Carrboro, and Hillsborough; and northeast Chatham County (see map below). These boundaries are determined by taking the Durham urbanized boundaries as determined through the Census and forecasting the expected boundary 20 years from now.



The DCHC MPO is comprised of the MPO Board, the Technical Committee (TC), local governments, and the state of North Carolina. The DCHC MPO is also one of the ten urban areas in North Carolina designated as a Transportation Management Area (TMA). A TMA is an urban area with a population of over 200,000 people. Additional information about the DCHC MPO can be found at dchcmpo.org.

# **Demographics**

As of the 2020 Census, the Durham urbanized area (UZA) population is the fourth largest urban area in the state of North Carolina with a population of 396,118, behind Charlotte, Raleigh, and Winston-Salem. As of January 1, 2023, the DCHC MPO boundaries increased that population count to 462,954.

Member	% UZA Population *
City of Durham	58.38%
Durham County	11.15%
Chapel Hill	12.33%
Carrboro	4.22%
Hillsborough	1.98%
Orange County	7.03%
Chatham County	4.91%

Distribution of population in urban areas amongst DCHC MPO members Source: 2025 DCHC MPO Unified Planning Work Program

As of the publishing of this plan, the new DCHC MPO boundaries are being finalized as the result of the 2020 Census. The results of those final boundaries will discern the block groups that are used to determine more accurate demographic counts and this data will be analyzed more thoroughly in the DCHC MPO Environmental Justice Report.

For the purposes of this report, population data listed below is based on Census identified boundaries such as townships and entire counties using 2022 American Community Survey (ACS) 5-Year Estimates.

# **Transportation-Disadvantaged Communities**

The Coordinated Plan aims to improve mobility for three specific transportation-disadvantaged communities: older adults, individuals with disabilities, and those with low-incomes. However, other transportation-disadvantaged communities such as rural residents, minority and ethnic communities, homeless individuals, those with limited English proficiency, and households without a car often also benefit from mobility improvements.

These demographic groupings are also not exclusive. For example, 2022 ACS data for Durham County estimates that 47,909 people (or 14.6% of the County's non-institutionalized population) are 65 years or older and 12,270 of those adults (or 25.6%) have a disability. When you look at adults in Durham County who are 75+, those with a disability increases to 40.3%.

Subject	Durham County	Orange County	Chatham County
Total Non-Institutionalized Civilian Population	327,415	149,549	79,162
With a disability	36,569 (11. <mark>2%)</mark>	12,925 ( <mark>8.6%)</mark>	8,522 (10.8%)
With a hearing difficulty	6,643 (2.0%)	4,234 (2.8%)	2,706 (3.4%)
With a vision difficulty	4,506 (1.4%)	2,094 (1.4%)	1,081 (1.4%)
With a cognitive difficulty	15,496 ( <mark>5.0%)</mark>	4,498 <mark>(3.1%)</mark>	2,513 (3.3%)
With an ambulatory difficulty	18,989 <mark>(6.2%)</mark>	5,241 (3.6%)	3,438 (4.6%)
With a self-care difficulty	6,985 ( <mark>2.3%)</mark>	1,590 (1.1%)	1,586 (2.1%)
With an independent living difficulty	13,419 ( <mark>5.1%)</mark>	4,101 (3.4%)	2,966 (4. <mark>6%)</mark>
Total Population 65+	47,909	24,104	20,072
With a disability	12,270 ( <mark>25.6%)</mark> (75+ is 40.3%)	6587 <mark>(27.3%)</mark> (75+ is 41%)	5351 <mark>(26.7%)</mark> (75+ is 40%)
Total Population Low-Income (households under \$50,000; 80% of median)	27.7%	29.3%	28.5%

Source: 2022 ACS Data

# **Low Income Population**

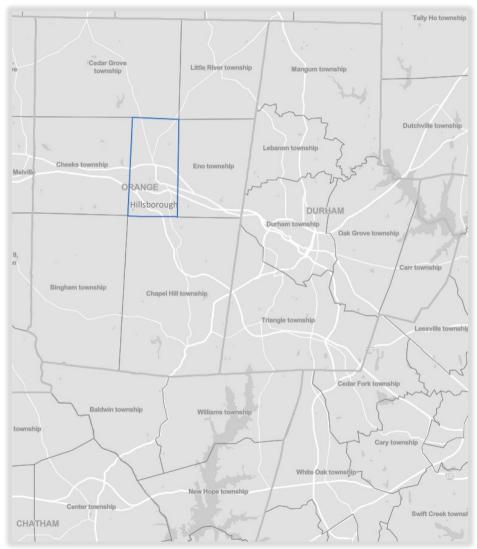
There are many ways to determine whether an individual or a household is considered low-income, and these values can vary from federal to state to local averages. For the purposes of this plan, we will consider low-income households as those that are less than 80% of the median household income. This plan will also review Census estimates for poverty, which consist of two measures: a pretax money income compared to a poverty threshold that is adjusted by family consumption and the Supplemental Poverty Measure (SPM).

	Median / Low Income	Poverty
Durham County	\$80,089 / \$64,071	10.5%
Durham Township	\$57,253 / \$45,802	19.6%
Orange County	\$89,291 / \$71,433	14%
Chapel Hill Township	\$85,837 / \$68,670	14.8%
Hillsborough Township	\$82,520 / \$66,016	7.2%
Chatham County	\$77,906 / \$62,325	9.4%
Williams Township	\$129,065 / \$103,252	2.7%

Source: 2022 ACS Data

When looking at poverty by age in the different townships, Durham township has the largest poverty level in the population under 18, Chapel Hill and Williams townships are largest for those 18-64, and Hillsborough is largest for 65 and older.

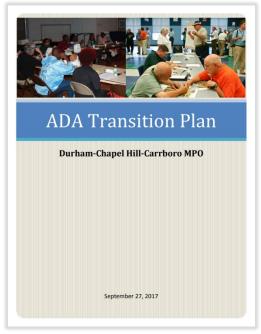
# **Township Boundaries**



### **Persons with Disabilities**

Planning transportation for those with disabilities can look different from one type of disability to another. A hearing impairment may necessitate improved visual wayfinding whereas visual difficulty may lead to increased need for tactile landing pads. An ambulatory disability may require a wheelchair lift or onboard storage for a walker whereas a cognitive disability may require additional travel training materials.

Another plan that works to address mobility access for those with disabilities is the DCHC MPO ADA Transition Plan. This plan was last updated in 2017 and is a comprehensive review of what is required to bring the DCHC MPO into full ADA compliance.



2022 ACS data approximates that 11.2% of residents in Durham County currently have a disability, with the most common disability being ambulatory. In Orange County, approximately 8.6% of residents have a disability and in Chatham County that number increases to 10.8%. Across the 3 counties, close to 60,000 people are estimated to have a disability.

# **Older Adult Population**

There is no "one size fits all" age for when a person becomes an older adult, also known as a senior or elderly person. For the purposes of the Coordinated Plan, older adults will be identified as those who are 65 years of age or older as that is the standard for existing federal programs such as Medicaid. However, there are some transit operations in the DCHC MPO area where older adults become eligible once they turn 60.

	Median Age	65+
Durham County	36.1	14.8%
Durham Township	32.4	11.2%
Orange County	36	16.4%
Chapel Hill Township	30.1	13.4%
Hillsborough Township	42.9	17.9%
Chatham County	48.3	25.6%
Williams Township	59	39.4%

Source: 2022 ACS Data

# **Funding Sources**

This section provides an overview of the different fund sources that are available across the DCHC MPO area, including federal formula funds, state funds, transit plan funds, and other funding opportunities.

# **Federal Funding**

The Federal Transit Administration (FTA) provides annual, formula-based funding to transit agencies, state departments of transportation, and metropolitan planning organizations (MPOs) to support a variety of transportation projects and activities. This funding is distributed according to predetermined formulas outlined in federal law and these funding programs are named based on the section where they are located within the United States Code (i.e. Section 5307).

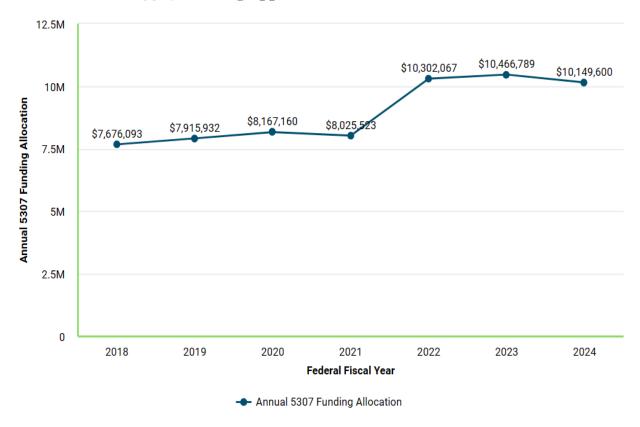
Formula-based funds include Section 5307 (Urbanized Area), Section 5310 (Enhanced Mobility of Seniors and Individuals with Disabilities), Section 5311 (Rural Areas), Section 5337 (State of Good Repair), and Section 5339 (Bus and Bus Facilities). Multiple fund sources are used for transportation planning due to the diverse needs across different areas and populations, the need for equitable distribution of funds, for predictability of funds so that recipients can properly budget for their needs, and other critical factors.

FTA also has funding programs that are not formula-based: those programs are competitive, and FTA has discretion in which projects are awarded funding.

# **Section 5307 Funding**

Section 5307 funds, also known as Urbanized Area Formula Grants, are aimed at improving mobility and accessibility within urbanized areas. These funds can be used for capital investments, operating expenses, planning activities, and other initiatives that enhance public transit services. In 2024, the Durham Urbanized Area received an allocation of \$10,149,600 to be split between GoDurham, GoTriangle, Orange County Public Transit, Chapel Hill Transit, and Wake County (limited eligibility).

### Annual Section 5307 Funding Apportionments for the Durham Urbanized Area



Source: Apportionments | FTA (dot.gov)

# **Section 5310 Funding**

The Enhanced Mobility of Seniors and Individuals with Disabilities Funding (hereafter referred to as "Section 5310 funding") seeks to provide funding, "for the purpose of assisting private nonprofit groups in meeting the transportation needs of older adults and people with disabilities when the transportation service provided is unavailable, insufficient, or inappropriate to meeting these needs." (FTA Circular 9070.1G) This program provides formula funding for the purpose of meeting the transportation needs of older adults and people with disabilities when the transportation services provided are unavailable, insufficient, or inappropriate to meeting these needs. Funding is apportioned based on various factors such as population, age, and disability statistics.

Eligible projects under Section 5310 funding are divided into "traditional" category and "nontraditional" or "other" category. At least 55% of program funds must be used on traditional projects.

The following capital improvements and activities are classified as part of traditional Section 5310 projects:

- transit vehicles: buses and vans
- wheelchair lifts, ramps, and securement devices
- transit-related information technology systems, including scheduling/routing/one-call systems
- mobility management programs
- acquisition of transportation services under a contract, lease, or other arrangement

Nontraditional or "other" Section 5310 projects could include, but are not limited, to the following:

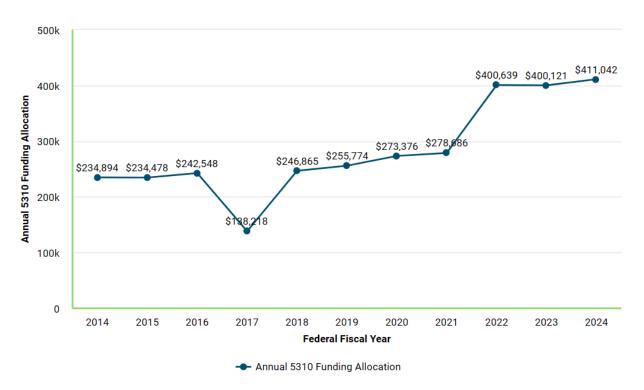
- travel training
- volunteer driver programs
- providing accessible paths to bus stops, including sidewalks, curb cuts, accessible pedestrian signals (APS) or other features
- wayfinding and signage
- incremental cost of providing same day service or door-to-door service
- purchasing vehicles to support new accessible taxi, ride sharing and/or vanpooling programs
- mobility management programs

These funds can be passed through either the state department of transportation or through other designated recipients. The funds can then be allocated to subrecipients which can include private nonprofit organizations, state or local government authority, or operators of public transportation. Funds are available for a total of three years and the amount is based on the state or the urban area proportion of seniors and those with disabilities.

The City of Durham is the designated recipient for Section 5310 funds apportioned for the Durham urbanized area (UZA). The Durham-Chapel Hill-Carrboro Metropolitan Planning Organization (DCHC MPO) administers the program in accordance with federal law and regulations through a competitive call process according to the approved Section 5310 DCHC MPO program management plan. This call has typically taken place

biennially and current available funding is \$811,163 between the allocations for 2023 and 2024.





Source: Apportionments | FTA (dot.gov)

# **Section 5311 Funding**

The Section 5311 Formula Grants for Rural Areas program provides funding for designated rural areas with populations less than 50,000. Section 5311 funds are not directly included in the coordinated public transit – human service planning requirements, but they are an important transportation funding resource for rural communities and often used to support human service transportation. These funds are distributed to states using a formula based on land area, population, revenue vehicle miles and low-income individuals in rural areas. The funds are designated to support public transportation in rural communities and can be used for capital and operating projects. Section 5311 funds can be used to fund up to 80 percent of the cost of a capital project and up to 50 percent of the cost of an operating project. These funds are distributed by the North Carolina Department of Transportation (NCDOT).

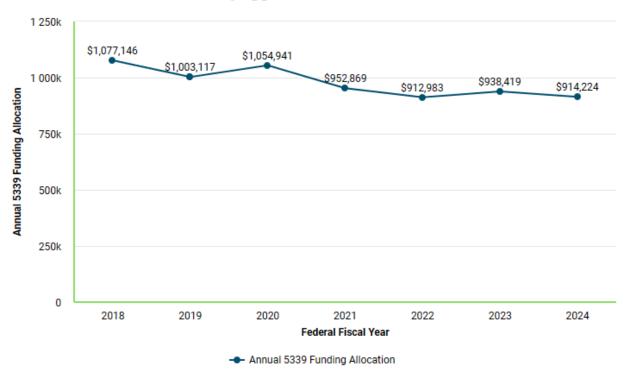
# **Section 5337 Funding**

The Section 5337 State of Good Repair Formula Grants program provides funding to support the maintenance, repair, and replacement of aging transit infrastructure and assets. This includes maintenance of capital projects and activities such as those for vehicles, facilities, equipment, and technology systems. This allocation is based on factors such as age, condition of transit assets, and the mileage of vehicles.

# **Section 5339 Funding**

The Section 5339 Bus and Bus Facilities formula grant program provides funding for the purchase, rehabilitation, and construction of buses and related facilities. This includes purchasing new buses, rehabilitating existing buses, constructing bus facilities such as maintenance facilities or bus stations, and purchasing equipment related to bus operations. Funds are allocated based on factors such as the population of the urbanized area, and the age and condition of current transit buses.

### Annual Section 5339 Funding Apportionments for the Durham Urbanized Area



Source: Apportionments | FTA (dot.gov)

# **State Funding**

In addition to federal funds, NCDOT provides funding for rural and human service transportation programs. These funds are available to rural portions of both Chatham and Orange Counties.

# **Elderly and Disabled Transportation Assistance Program** (EDTAP)

In 1989, the state legislature recognized the rapidly growing population of older adults and enacted the North Carolina Elderly and Disabled Transportation Assistance Program (EDTAP), setting up the appropriation of funds on a formula basis. To be eligible for EDTAP funding, counties must have an approved Community Transportation Services Plan (CTSP), a transportation advisory board that includes representation from agencies and programs that serve the transportation-disadvantaged, and coordinate services consistent with the local CTSP. Eligible trip purposes can include human services agency appointments, pharmacy pickups, group trips to community special events, and attending public hearings.

# **Employment Transportation Assistance Program**

The Employment Transportation Assistance Program provides operating assistance for employment transportation needs. The funds help Department of Social Service (DSS) clients that transition off Work First or Temporary Assistance for Needy Families (TANF) in the last 12 months. The program also supports Workforce Development Program participants and/or the general public to travel to work, employment training, and/or employment related destinations.

# Rural General Public (RGP) Program

The Rural General Public (RGP) funds are available through NCDOT to community transportation systems that serve rural populations. The program is fully funded from the state and is available to community transit systems that service the general public. In Orange County, transportation services are provided for individuals who live outside the EDTAP urban boundary or do not have a human service agency or organization that will pay for the transportation service.

# **County Transit Plans and the Transit Tax**

In addition to federal and state funding programs, the Research Triangle also has local funding that is designated for transit projects. This is critical to funding transportation projects as these funds can help provide the required local match that is needed to access most federal funds.

These local funds are implemented through three County-specific transit plans: the Durham County Transit Plan, the Orange County Transit Plan, and the Wake County Transit Plan. Funds consist of three dedicated revenue streams for each transit plan:

- Half-cent sales and use tax
- Three-dollar increase to GoTriangle regional vehicle registration fee
- Seven-dollar county vehicle registration fee

An additional five-percent vehicle rental tax was initially included as a revenue source when the Transit Plans were last updated but was rescinded by the GoTriangle Board of Trustees in 2023. Of the three plans, only the Durham County and Orange County plans are located within the DCHC MPO planning area while the Wake County plan is located within the CAMPO planning area.

GoTriangle as the regional transit authority, also works to coordinate operations between the three plans for continuity across county lines. Examples of this coordination include evaluating how transfers will work from one provider to another, communicating potential differences on fare structure such as reduced fare passes, consolidating user interfaces and apps to reduce travel training needs, using the same or similar bus technology that easily integrates with other providers such as fare collection boxes, and having greater purchasing power to reduce costs for bulk purchases such as for automated passenger counters (APCs).

# **Durham County Transit Plan**

The Durham County Transit Plan contains all transit-related projects that are expected to be completed in Durham County by 2040 based on revenue streams prior to the loss of the vehicle rental tax. These projects have a significant impact on the existing needs in this Coordinated Plan due to the number of projects that are specific to mobility needs and the needs of transportation-disadvantaged communities, such as:

- Committing to having all 1,324 bus stops in the County paved with Americans with Disabilities Act (ADA) accessible pads by 2030
- Funding the GoDurham Senior Shuttle, which provides older adults with access to healthy groceries
- Using the Direct Investment in Mobility Equity (DIME) grant to support fares for low-income riders

- Supporting the GoDurham Connect service in Eastern and Northern Durham
- Providing funds for GoDurham ACCESS ADA paratransit (including expansion of services) and employment and education access

# **Orange County Transit Plan**

The Orange County Transit Plan was last updated in 2022 and consists of transit-related projects that are expected to be completed in Orange County over the next 20 years. Projects also address mobility though funding is more limited than in Durham County. Examples include:

- Service expansion of the EZ Rider in Chapel Hill, which provides demand response services
- Funding for urban Orange County ADA paratransit expansion as the result of fixed route expansion
- Rural ADA paratransit and demand response services
- Mobility-on-demand service expansion
- Low-cost fare passes for low-income individuals

# **Research Triangle Transit Plans**

















# **Other Funding**

Additional federal funding is available through the DCHC MPO, provided a local match can be provided and the project or studies are considered local priorities. The DCHC MPO holds an annual Call for Projects as part of its Locally Administered Projects (LAP) program which scores project applications on a series of factors and awardees receive a portion of the MPO's discretionary funds. These discretionary funds currently consist of:

- Surface Transportation Block Grant (STBG)
- Congestion Mitigation and Air Quality (CMAQ) improvement
- Transportation Alternatives Program (TAP)
- Carbon Reduction Program (CRP)

Previously awarded projects include paved bus landing pads, bus shelters, pedestrian and bicycle paths, and wayfinding signage.

Transit planning and technical studies related to urban public transportation can also be funded through available Section 5303 funding. In 2025, GoDurham received \$224,144 and Chapel Hill Transit received \$215,355 in Section 5303 funds.

# **Inventory of Services**

The Durham urbanized area (UZA) is currently served by a number of public transportation, human service, and private transportation providers. Available transportation services in the Durham UZA are described in this section.

# **Current Transportation Services**

Transit services in the DCHC MPO planning area are served by GoTriangle across the Triangle region, by GoDurham in Durham County, by Chapel Hill Transit and Orange County Public Transportation in Orange County, and Chatham Transit in Chatham County.



**Map of Existing Public Transportation Services** 

The Piedmont Authority for Regional Transportation (PART) also operates a commuter bus service known as the Alamance Burlington Express that travels from the Burlington area down to Chapel Hill and back. GoCary operates demand response service strictly for Cary residents in which residents can in and out of Durham and Orange Counties.



# **Chapel Hill Transit**

Chapel Hill Transit (CHT) provides public transportation services to the communities of Chapel Hill, Carrboro, and the University of North Carolina (UNC) at Chapel Hill. Services include a Safe Ride Program that operates on Thursday, Friday, and Saturday evenings during the UNC Fall and Spring semesters.

Offered in connection with CHT fixed route service, EZ Rider is a complementary ADA paratransit service which uses lift-equipped vehicles to transport individuals with physical and cognitive disabilities that prevent them from using Chapel Hill Transit's regular bus service. This service operates within a 3/4 mile radius of fixed-route services, operates on the same schedule as the nearest fixed route, and passengers must be certified through an application process to use the service. EZ Rider has an online reservation request system that can be accessed outside of service hours as well as a handbook on how to ride.

CHT also runs a Senior Shuttle for Chapel Hill and Carrboro seniors. The shuttle has a set weekly schedule, operating Monday through Friday from 8:00AM to 4:40PM, along a fixed route that includes stops at several assisted living facilities, local grocery stores, shopping centers, and the Seymour Senior Center. Trips are not reserved for this service and space is available on a first-come first-serve basis.

CHT also runs a service known as the Tar Heel Express. This service runs strictly during special events for the Town of Chapel Hill and events at UNC's Kenan Stadium and Dean Smith Center. All transit services through CHT are fare free.

For individuals who own a vehicle and are interested in using transit to complete a leg of their trip, parking permits are available at select Park and Ride locations.

### **Resources:**

Email - chtransit@townofchapelhill.org

Customer Service (Trip Planning & Feedback) – 919-485-7433

EZ Rider Application - 919-969-4920

EZ Rider Reservations - 919-969-5544

Website – <u>chtransit.org</u>



# **GoDurham**

The City of Durham assumed the operation of the local bus system in 1991 from Duke Power, naming it the Durham Area Transit Authority (DATA). In October 2010, the City of Durham entered into an agreement with Triangle Transit to oversee the management of Durham's fixed-route and demand- response (GoDurham ACCESS) services. As part of a regional rebranding effort in March 2015, DATA became GoDurham, and Triangle Transit became GoTriangle.

GoDurham provides fixed route service for the City of Durham and the urbanized areas of Durham County. GoDurham ACCESS is the name of the demand response transit service that operates in the City of Durham and Durham County. This service provides complementary ADA paratransit service for qualified individuals and is provided during the same hours and on the same days as the regular fixed-route service. While it is required to provide this service within a ¾ mile radius of fixed route service, GoDurham ACCESS receives additional funding to provide ADA service beyond that boundary.

GoDurham ACCESS also provides transportation options for County residents who are 60 years or older, have a disability, need work-related, medical, human services government, or personal care trips, and reside in rural areas of Durham County, as well as providing sponsored eligible service trips (Medicaid, Public Health, Work First) to residents of both the City and County. GoDurham ACCESS also has a Senior Shuttle that provides residents from 10 senior communities with weekly access to the local Walmart.

GoDurham dropped fares during the COVID-19 pandemic and remains fare free through June 2024. The decision on whether to return to fares will coincide with the adoption of the budget in June 2024.

Individuals who have access to a vehicle and would like to use transit for part of their trip, can park at several Park and Ride lots and access the bus from those locations.

### **Resources:**

Customer Service – 919-485-7433

GoDurham ACCESS Application – 919-560-1551, Option 4

GoDurham ACCESS Reservations – 919-560-1551, Option 2

Website – godurhamtransit.org



# **Orange County Public Transportation**

Orange County Public Transportation (OCPT) provides fixed-route, complementary ADA paratransit, and demand-response services within Orange County. The costs for the three fixed-route services vary: the Hillsborough Circulator is fare free, and the two Connector services are \$2 for the general public, \$1 for children ages 6-17, and fare free to for seniors (60+), children under 6, and persons with disabilities who are ADA certified.

Demand response services include Medicaid Non-Emergency Medical Transportation (NEMT) for Department of Social Services (DSS) clients, and three state-funded services as part of the Rural Operating Assistance Program (ROAP). These ROAP services are:

- Elderly and Disabled Transportation Assistance Program (EDTAP) trips cost \$3 one way
- Rural General Public (RGP) trips cost \$12.75 one way
- Employment and Transportation Assistance Program (EMPL)/Department of Social Services (DSS): Work First Program eligible trips are fare free

More details on these programs can be found in the state funding section of this plan.

The Orange County Transportation Advisory Board is the Orange Unified Transportation (OUT) Board, which advises OCPT on its operations and recommends policy to the Board of Commissioners. Transit services provided by OCPT connect with Chapel Hill Transit and GoTriangle.

### **Resources:**

Email - octransportationservices@orangecountync.gov

ADA Paratransit Application – 919-245-2008 (or online)

Website – <u>orangecountync.gov/3117/Public-Transit</u>



# **GoTriangle**

Triangle Transit was created to plan, finance, organize, and operate a public transportation system for the Triangle area, which includes the urbanized areas of Orange, Durham, and Wake counties. As part of a regional rebranding effort in March 2015, Triangle Transit became GoTriangle.

GoTriangle serves the general public with fixed-route and complementary ADA paratransit services (GoTriangle Access). GoTriangle's "core" fixed routes provide service all day whereas their "regional" and "regional express" routes operate only on peak hours and are more commonly known as commuter bus services.

While fares were dropped during the COVID-19 pandemic, GoTriangle will return to fares on July 1, 2024. Fare passes will be \$2.50 for a single trip but will have a \$5 daily cap, \$10 weekly cap, and an \$80 monthly cap when tracked using a GoPass. Discounted and free fare passes will also be available for eligible individuals.

A regional list of park and ride locations as well as travel training are available on the GoTriangle website.

### **Resources:**

GoTriangle Access Assistance - 919-485-7468

GoTriangle Access Application (also available for download) – 919-485-7468

Website – gotriangle.org



# **Chatham Transit Network**

Chatham Transit Network (CTN) is the countywide transportation provider for rural and urban areas of Chatham County. CTN is a 501(c)(3) private non-profit transportation system that is governed by a Transportation Advisory Board (TAB). CTN operates a demand-response service called In County Service which is open to the general public and trips must begin and end in Chatham County.

CTN had previously operated subscription and fixed route services which are no longer in service.

Fares for In County Service are charged per mile as follows:

• o to 5 miles: \$2

• 5 to 10 miles: \$4

• 10 to 20 miles: \$7

• 20 or more miles: \$7 plus \$3 for each 10-mile increment

### **Resources:**

Reservations – 919-542-5136 (or online)

Website -chathamtransit.org

# **Other Transportation Services**

Private transportation providers also contribute to service within the DCHC MPO area. These include vehicle for hire operations such as taxicabs or limousines, and on-demand transportation providers such as Uber and Lyft. Duke University provides several fixed route services as well as an on-demand van service, though it is not open to Duke Medical patients. UNC provides on-demand and fixed route services for students and employees, including a Pedestrian Accessibility Shuttle Service (PASS) that uses golf carts for additional access points for those with disabilities. Lincoln Community Health Center supplies its clients with paratransit transportation services to allow access to clinics and operates a small fleet of lift-equipped vehicles.

# **Projects that Have Previously Received Section 5310 Funding**

It is important to keep in mind that once services have been introduced to a community and have been established with some degree of permanency, changes to those services should be avoided or limited. Changes require evaluations due to the riders who may have come to rely on those services. However, sustaining those services requires consistent funding resources. When it comes to Section 5310 funds, there are a number of agencies that currently draw funds from this funding pool. Some previously funded projects as of this plan update include:

- Orange County Public Transportation
  - Senior Transportation Expansion, Assessment, and Mobility Manager (since 2016)
- Chapel Hill Transit
  - o EZ Rider Senior Shuttle (since 2016)
  - o ADA Bus Stop Review and Design Work (2018-2022)
- GoDurham
  - o ACCESS ADA Trips Beyond 3/4 Mile Radius (since 2016)
  - County Access for Demand Response Service (2016-2022)
- DCHC MPO
  - o Administration of the Section 5310 Program (continuously funded)

# Stakeholder Workshops

This section contains an overview of the workshops that were held for this plan update, including who was invited, who participated, and the feedback that was collected.

Federal transit law requires that projects selected for funding under the Section 5310 program be included in a locally developed, coordinated public transit-human services transportation plan. The DCHC MPO has taken the responsibility of developing the coordinated plan for the Durham urbanized area (UZA).

DCHC MPO's strategy to develop a coordinated plan was to include ample outreach for participation among; transportation partners, passengers and advocates, human services partners, and other stakeholders as required by FTA C 9070.1G (page V-3).

# **Outreach**

The draft schedule for the update to the Coordinated Plan and associated stakeholder workshops were initiated through presentations to the DCHC MPO Technical Committee and Board at their February 2024 meetings. Members were asked to provide feedback on workshop locations and stakeholders.

Four workshops were then scheduled, three of which were held in-person and one that was held virtually. Each workshop was scheduled for 2.5 hours and options for provided for both morning and afternoon participation. The three in-person workshops were held in transit-accessible locations with two of those locations being senior centers in an effort to get increased feedback from older adults. These in-person workshops were also geographically dispersed throughout the DCHC MPO to provide greater opportunities for participation, and were held in downtown Durham, Hillsborough, and Chapel Hill. The virtual workshop was held for those who were unable to attend an in-person workshop, possibly because they do not currently have reasonable access to transportation at this time.

Workshops were then advertised through various forms of media. Announcements were posted on our website, through social media (X, Facebook) and social networking platforms (Nextdoor, Eventbrite), sent out via email to an extensive Coordinated Plan stakeholder list, and posted through the MPO e-newsletter which consists of DCHC MPO members and the general public, and through the Central Pines Regional Council e-newsletter. These announcements were targeted to DCHC MPO members, public transit agencies, human services agencies, non-profit organizations, and to the general public.

More details on the timeline of this outreach, the stakeholder list, and outreach materials can be found in Appendix A.

# **Workshop Agenda**

Workshop attendees were provided agendas that consisted of approximately 2 hours of scheduled activities. Agenda items included a presentation on the background of the Coordinated Plan and an overview of existing transit services, and was followed by a series of group discussions regarding mobility needs.

These interactive sessions required participants to first identify existing transportation needs and gaps in service, then identify strategies, activities, and projects that could be completed to address these needs and gaps, and finally to prioritize those strategies, activities, and projects. Prioritization is critical in this step due to limited available resources and understanding what the community believes are the most critical priorities. Participants in each workshop were provided three different colored stickers and were asked to prioritize the needs and strategies that were most important to them. Colors represented priorities as follows: the pink sticker was the highest priority, the orange sticker was the second highest priority, and the green sticker was the third highest priority.

To facilitate these activities, participants were provided with details on what projects had previously been funded through the Coordinated Plan as well as the outcomes of previous discussions in workshops during the last plan update.

The workshop agenda can be found in Appendix B of this plan.

# Identification of Needs/Gaps in Service, Strategies to Meet Needs, and Prioritization

Similar to the 2019 update of the Coordinated Plan, the following fives themes are still relevant based on the 2024 stakeholder workshops:

# Coordination/Mobility Hub for Human Services and Public Transportation

Participants mentioned how crucial coordination is for receiving accurate, updated, and straightforward information such as for Duke Medical that has over 2,000 touchpoints for clients possibly needing transportation services.

### Expanded Transportation Services

Participants mentioned gaps in services and what options might be available to fill that gap, even if using less traditional methods. For example, a church in north Durham conducted a study and found existing transportation service gaps for its seniors and wanted to understand what options might exist for starting a volunteer driver program. This is also useful for those who are

otherwise worried about taking a service like Lyft or Uber where they do not know the operator. Other discussion focused on service that limits options for last-minute trips, late night travel, and access to more diverse cultural and natural places.

### **Expanded Education Services**

Participants mentioned a lack of information on what services individuals are eligible for, how ADA certification works from one transit agency to another, and not understanding the differences between overlapping service areas, such as those shared by both Chapel Hill Transit and Orange County Public Transportation.

### **Application Process Improvements**

Participants mentioned variation in ADA certification policies that led to confusion over elements such as who was eligible, who was required to sign different documentation, and how they would be informed of changes to any procedures. Additional barriers include passenger illiteracy or other needed assistance in filling out application forms.

### **Bus Stop Access Improvements**

Participants mentioned feeling unsafe having to cross wider roads to access bus stops, as well as limited sidewalk infrastructure or issues with vehicles blocking access to existing infrastructure.



**Mobility Hub Concept** 

Mobility hubs allow users to access multiple types of transportation modes in a centralized location and promotes information sharing.

**DRAFT MAY 7, 2024** 34 The following table represents discussions from the 2024 stakeholder workshops, including different identified gaps and needs, some strategies to meet those needs, the level of prioritization that should be given to these strategies based on stakeholder discussions, and the cost associated with these strategies. Prioritization is based on workshop discussions and are ranked as either low, moderate, or high priority. Cost is based on the expected overall funding need associated with each task and is listed as a low, moderate, or high cost using \$, \$\$, and \$\$\$, respectively.

GAPS AND NEEDS	STRATEGIES	PRIORITIZATION	COST
Technological barriers to entry for transit users (i.e. no access to	Provide service schedules at bus stops	LOW	\$\$
internet, concern about safety of online services, fares that are cashless)	Provide call-in numbers to access rideshare without an app	LOW	\$
	Consolidate user-required apps across region/services	MODERATE	\$
	Provide cash options or go fare free	LOW	<b>\$-\$\$</b>
Transportation access screening and service eligibility (i.e. required signatures,	Establish communication channel between human services and transit agencies	MODERATE	\$
policies, ADA form assistance)	Provide more direct access to mobility managers (providers and public)	LOW	\$
	Provide information on relationship between Medicaid and transportation	LOW	\$
	Streamlined screening process for transportation access regionally (including education on eligibility)	LOW	\$\$
	Electronic platform for universal reference/use	MODERATE	\$\$
	Provide community outreach for passengers that are not actively riding due to inability to fill out application forms	MODERATE	\$

GAPS AND NEEDS	STRATEGIES	PRIORITIZATION	COST
Educational resources and outreach gaps (i.e. how a user understands regional	Provide differentiation of roles in the region, such as for Central Pines Regional Council	LOW	\$
connectivity, opportunities)	Provide comparison of services where areas are overlapping (i.e. Chapel Hill and Orange County)	HIGH	\$
	Provide communities with list of fund sources available to them for smaller, more localized transportation projects	LOW	\$
	Determine a centralized way to share service updates, such as changes to stops, routes, and alternate forms of transportation across all services in Triangle	LOW	\$\$
Bus stop access improvements	Facilities planning	LOW	\$\$\$
(i.e. vehicles blocking entry, locations across	Increased trails/sidewalks	MODERATE	\$\$\$
wide roads)	Review of current infrastructure relative to needs of transportation-disadvantaged communities	LOW	\$\$
Reduction in bus drivers as a result of COVID-19	Provide more direct high school and college educational programs for drivers	LOW	\$\$
	Create regional job board for all open positions	LOW	\$
	Support mentorship through grants	LOW	\$\$
Customer service issues (i.e. information out of date, inaccurate or incomplete information provided, busses never arrive)	Support a regional call center for consistent information from a single source with comprehensive service information	LOW	\$\$
	Procure improved bus tracking software and/or hardware	LOW	\$\$

GAPS AND NEEDS	STRATEGIES	PRIORITIZATION	COST
Services too limited (i.e. need late-night service, last minute trips, access to cultural and natural spaces)	Initiate volunteer driver programs to fill in existing service gaps	LOW	\$
	Offer deviated or weekend routes to places that are important for social and health purposes (i.e. cultural and natural spaces)	MODERATE	\$\$\$
	More regional route options covering larger service areas with more frequency	HIGH	\$\$\$
	Provide more on-demand service rather than demand response for flexibility in travel	HIGH	\$\$
	Provide services later into the evening	LOW	\$\$\$
	Provide more transportation services for seniors in Durham	HIGH	\$\$\$
Services are inefficient (i.e. excessive trip times, pick-up and drop-offs are not timely, few people are riding, commuter services are too limited and bus operators have large gaps in work day, need to book well in advance)	Provide incentives for people to ride and provide residents with more comprehensive overview of services	LOW	\$\$
	Better coordination of bus schedules with timing for when people are more likely to need services (i.e. throughout day)	MODERATE	\$
	Reduce travel and waiting times through more efficient planning	HIGH	\$\$
	Coordinate land use decisions with access to transit	LOW	\$
Limited transportation access across county lines (i.e. services limited to within 10 miles of county borders, driving to pick- up points)	Determine applicable fund sources for cross-county transportation service	HIGH	\$
	Determine impact of current cross-county service limitations	HIGH	\$

# **Additional Factors**

This section provides an overview of ongoing opportunities in the DCHC MPO area and across the region, as well as challenges such as impacts from COVID-19.

# **Opportunities**

Transportation planning efforts are continually evolving and so it is important to understand what is currently in development. One area of improvement is taking place regarding GoDurham's ACCESS services. GoDurham is transitioning to using an operating platform called Spare Labs to improve ride-sharing capabilities and includes opportunities for eligible individuals with disabilities to apply for and schedule service for ADA paratransit online. Other improvements for GoDurham service include extension of the County program into Wake County and expansion of the Senior Shuttle.

Chapel Hill Transit has just received a grant award through the Areas of Persistent Poverty Program to financially plan and design a new app-based, on-demand microtransit system to serve a two-mile corridor of the planned North-South Bus Rapid Transit (NSBRT). The NSBRT is an 8.2 mile long planned project that stretches from Eubanks Road in north Chapel Hill to Southern Village in the south. The plans for this Bus Rapid Transit corridor in the area combines high-capacity buses with exclusive traffic lanes and traffic signal priority to decrease travel time and improve the rider experience.

Ongoing studies are being done to further understand larger scale transit opportunities. The regional Freeway, Arterial, Street, and Tactical (FAST) 2 transit study is intended to make our freeways and regional boulevards "transit ready" as well as update freeway technology and efficiently connect the region to the central Triangle area and the airport. The Bus Speed and Reliability study is being completed in Durham County to further improve the efficiency of specific corridors in that part of the region.

The S-Line freight rail line from Raleigh to Richmond will also have large regional impact. This project was awarded a \$1.09 billion discretionary federal grant in late 2023 and additional funding has been awarded to corridor identification and development of future connections from Raleigh to Winston-Salem, on either side of the DCHC MPO area.

The region also has an ongoing Transportation Demand Management (TDM) program called Triangle Transportation Choices that has regular funding opportunities for alternative forms of transportation. Previous awardees have included City of Durham, GoTriangle, Town of Chapel Hill, Town of Carrboro, University of North Carolina Chapel Hill, and Duke University. Activities under this program vary but can include bike workshops, incentives for using alternate modes of transportation, or promoting rideshare or carpooling options.

Regional improvements are also taking place in healthcare with connecting patients to transportation. The 7CS+ workgroup is a learning collaborative comprised of stakeholders from local health care systems, health insurance plans, and human services agencies from 7 counties around the Triangle region who are looking to understand their roles in the transportation sector.

# **Challenges (COVID-19 Impacts)**

The COVID-19 pandemic resulted in service changes across all transportation modes and impacted the transportation access of older adults and those with disabilities. There were impacts to service capacity in which passengers were spaced out and fewer people could ride at one time, as well as rapid changes to safety guidance which caused concerns or uncertainty about a passenger's level of safety. This created challenges for agencies in complying with ADA requirements such as prohibiting capacity constraints and meeting requests from riders needing assistance from drivers, in other words providing service while maintaining necessary social distancing.

On a wider scale, it became apparent that more preparation was needed in the event of a major service disruption such as this one. It is important to consider what lessons have been learned over the course of the pandemic that can be used to start planning for future disruptions to transit service.

**Plexiglass Driver Shield** 



Delays Due to Additional Cleaning Procedures



Source: Transportation for People with Disabilities and Older Adults During COVID-19: Lessons for Emergency Response (2024)

# Appendix

# **Appendix A: Outreach**

## **Outreach Timeline**

February 13 – Presented to the DCHC MPO Technical Committee

February 27 – Presented to the DCHC MPO Board

February 29 – News and calendar announcements added to our website

March 4 – Workshop announcements initially made on social media (Facebook, X)

- 7 shares
- 4 likes
- 712 impressions

March 5 - Workshops were publicized in Eventbrite and in CPRC Pine Needler

• 14 people had signed up (registration was not required); 3 attended

March 6 – Workshop announcement sent to stakeholders via email

• Limited feedback was received during this time

March 7 – Workshop announcement in DCHC MPO newsletter

March 11 – Workshop events added to NextDoor

- Hillsborough Area (Passmore Center) 9,408 impressions
- Chapel Hill Area (Seymour Center) 5,162 impressions
- Durham Area (County Admin Building) 5,422 impressions
- All Areas (Virtual Event) 14,351 impressions

## Stakeholder List

A Helping Hand Club Nova

Aging Well Durham Compass Center

Ameri Health Caritas NC DCHC MPO Board Members & Alternates

Autism Society of North Carolina DCHC MPO Staff

B&D Integrated Health Services DCHC MPO Technical Committee & Alternates

BikeDurham Department of Public Health, Durham County

Burlington-Graham MPO Downtown Durham, Inc.

Capital Area MPO Duke University

Caring House Duke University Medical Center

Carrboro Town Council Durham Center for Senior Life

Carrboro Town Manager Durham Chamber of Commerce

Carrboro Transportation Advisory Board Durham City Council

Carver Rehabilitation Center Durham City Manager

Central Pines Agency on Aging Durham County Aging and Adult Services

Central Pines RPO Durham County Board of Commissioners

Chapel Hill Parks and Recreation Durham County Community Living Programs

Chapel Hill Planning Department Durham County Manager

Chapel Hill Town Council Durham County Transportation Advisory Board

Chapel Hill Town Manager Durham Department of Social Services for the

Chapel Hill Transit Blind

Chapel Hill Transportation and Connectivity

Durham Exchange Club Industries

**Advisory Board** 

Chapel Hill-Carrboro Chamber of Commerce Durham Mayor's Committee for Persons with

**Durham Housing Authority** 

Chatham Aging Services Disabilities

Chatham County Board of Commissioners El Centro Hispano

Chatham County Manager El Futuro, Inc.

Chatham Transit Network End Hunger Durham

Chatham Transportation Advisory Board Environmental Protection Agency

City of Durham Equity & Inclusion Extraordinary Ventures in Chapel Hill

City of Durham General Services Federal Highway Administration

Foundation for Health Leadership & Innovation

GoDurham / GoDurham ACCESS / City of Durham

Golden Leaf Foundation

GoTriangle

**GoTriangle Board of Trustees** 

**Helping Hands Mission** 

Hillsborough City Council

Hillsborough City Manager

Interfaith Council for Social Services

Kerr Tar Council of Governments

Lincoln Community Health Center

NC DHHS Disability Services

NCDOT Div 5

NCDOT Div 7

NCDOT Div 8

Nelson Nygaard (short range transit plan

consultant)

North Carolina State University

Orange County Advisory Board on Aging

**Orange County Board of Commissioners** 

Orange County Department of Social Services/

Non-Emergency Medicaid Services

Orange County Department on Aging

Orange County Manager

Orange County Transportation Advisory Board

Orange Public Transportation

Peer Learning of Chapel Hill

Pettigrew Rehabilitation Center

Piedmont Triad RPO

**Project Access of Durham County** 

Rainbow 66 Storehouse

Raleigh-Durham Airport Authority

**Reality Ministries** 

Ronald McDonald House Charities (of the

Triangle)

Samaritan Health Center

Senior Care Management Associates

Senior PharmAssist

Triangle Disability Awareness Council

UNC Carolina Institute for Developmental

Disabilities

**UNC Health Alliance** 

**UNC Memorial Hospital** 

**Unity Center of Peace** 

University of North Carolina

**Urban Ministries of Durham** 

Veterans Bridge Home

Well Care Health

## **Email Invitation**

Title: Join Us to Help Update Your Local Coordinated Transportation Plan



Hello regional partners,

The DCHC MPO is in the process of updating our <u>Coordinated Transportation Plan</u> and we are looking for your feedback!

This plan is updated every five years and is a process of identifying transportation needs, providing strategies for meeting those needs, and prioritizing services to meet those needs for **older adults (65+)**, **those with low incomes, and those with disabilities**. If your service areas extend beyond the <u>DCHC MPO boundaries</u> (which is the basis for this plan update) and into rural areas of North Carolina, you may also be interested in the <u>Statewide Coordinated Plan</u>.

#### **How To Get Involved**

The DCHC MPO will be holding a <u>series of workshops</u> to get feedback from the community. These workshops are open to the public and are scheduled for the following locations and times:

- Orange County Passmore Center 103 Meadowlands Drive, Hillsborough, NC 27278
  - o Monday, March 18 1:00PM-3:00PM
  - <u>Eventbrite Link</u>
- Orange County Seymour Center 2551 Homestead Road, Chapel Hill, NC 27516
  - o Wednesday, March 20 9:00AM-11:30AM
  - o **Eventbrite Link**
- Durham County Administration Building (room 466) 201 E Main Street, Durham, NC 27701
  - Thursday, March 21 9:00AM-11:30AM
  - Eventbrite Link
- Zoom Virtual Meeting <u>Link</u> (passcode: 245360)
  - o Wednesday, April 10 1:00PM-3:30PM
  - o Eventbrite Link

While registration for these workshops is not required, registration is appreciated in understanding our expected attendance and allows you to save the event to your personal calendar.

If you are unable to attend any of these workshops, we are planning to record the final virtual workshop for future viewing so that you can provide feedback based on the materials presented. The draft plan will then be available for additional comment before it is adopted.

If you have any comments or questions, please feel free to reach out. Thank you!

#### **Newsletter Posts**

#### **DCHC MPO e-Newsletter**

Workshops Planned for Inclusive Transportation & Mobility



## Join us at an upcoming workshop and provide feedback!

The MPO will be hosting a series of workshops aimed at improving mobility for older adults, those with low incomes, and those with disabilities. To learn more about this effort, visit our <u>website</u> or <u>sign up for a workshop</u>. There are options for both in-person and virtual workshops, and registration is not required (though it is appreciated).

Sign up for a workshop

# **Central Pines Regional Council e-Newsletter**



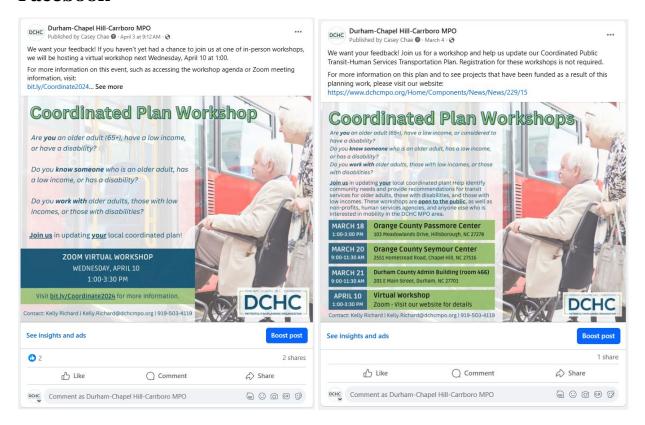
# Coordinated Plan Update for Mobility of Older Adults and those with Disabilities

Join the Durham-Chapel Hill-Carrboro Metropolitan Planning Organization (DCHC MPO) in updating our Coordinated Public Transit-Human Services Transportation Plan. This plan addresses existing mobility and future needs for older adults and those with disabilities in the urbanized areas of Durham, Orange, and Chatham counties. Four workshops will be available to learn more and provide input. These workshops are open to the public, human services agencies, and anyone else who is interested in mobility in the area.

**Learn About Workshops** 

## **Social Media Posts**

#### **Facebook**

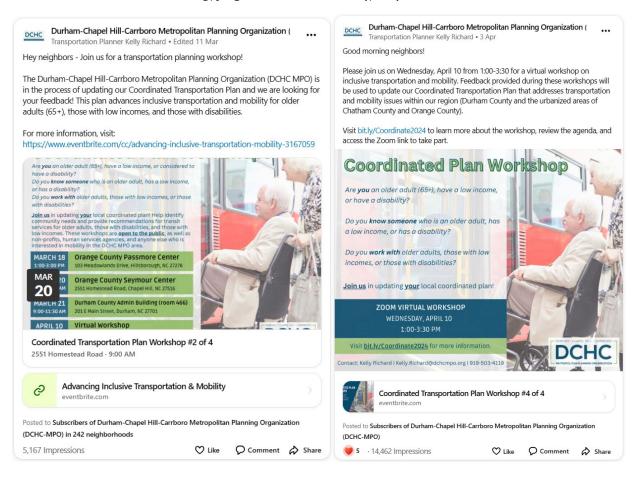


#### **Twitter**



## **Nextdoor**

When these workshops were posted, the area covered by the DCHC MPO boundaries in Nextdoor had a reach of 185,983 members and 114,664 households.



# **Appendix B: Workshop Agenda** (Front & Back)



Kelly.Richard@dchcmpo.org (919) 503-4119 dchcmpo.org



# **Coordinated Plan Workshop**

	20 MINUTES	Welcome & Introductions
$\triangleleft$	15 MINUTES	Background and Overview of Plan
	20 MINUTES	Overview of Existing Transit Services
Z	20 MINUTES	Identify Transportation Needs and Gaps in Service
5	20 MINUTES	Identify Strategies, Activities, and Projects to Address Gaps
$\forall$	15 MINUTES	Prioritize Strategies, Activities, and Projects Based on Available Resources
	10 MINUTES	Wrap Up and Next Steps

SECTION 5310 FUNDS

The Durham-Chapel Hill-Carrboro Metropolitan Planning Organization (DCHC MPO) receives around \$275,000 per year in 5310 funds. These funds are used for enhanced mobility of **seniors** and individuals with disabilities. Projects selected to receive these funds must be derived from a locally developed, Coordinated Public Transit-Human Services Transportation Plan, also known as a coordinated plan. Human services transportation that is provided by or on behalf of a human services agency for access to agency services or to meet basic, day-to-day mobility needs of these communities, are eligible to receive funds.

**DEFINITIONS** 

#### Coordinated Plan

A locally developed, coordinated transportation plan that identifies the transportation needs of older adults (65+), individuals with disabilities, and those with low incomes, provides strategies for meeting these needs, and prioritizes services for funding and implementation.

#### **Public Transportation**

Regular, continuing shared-ride services that are open to the general public or a segment of the general public (excludes Amtrak, school buses, courtesy shuttles, & sightseeing buses)

#### PREVIOUSLY FUNDED PROJECTS

Since 2016, six (6) different services have been funded using 5310 funds. These are the 1) Chapel Hill EZ Rider Senior Shuttle, 2) an Orange County Mobility Manager, 3) GoDurham ACCESS Americans with Disabilities Act (ADA) trips beyond 3/4 mile, 4) GoDurham ACCESS for demand response services within the county, 5) Chapel Hill Transit ADA bus stop review and design work, and 6) DCHC MPO administration.

#### PREVIOUSLY RECORDED NEEDS

#### Coordination/Mobility Hub for Human Services and Public Transportation

Create a mobility hub for the entire region, which would include a healthcare element.
 Paratransit service providers to develop a centralized computer system for scheduling.
 Coordinate funding and share resources among agencies. Create a website or an app to
 better access services, such as scheduling and updating information. Develop an app for
 vehicle tracking for paratransit ridership. Coordination of overall funding. Create a process
 for the reduction or the elimination in the rate of "no show" ridership, which negatively
 impacts efficiency. Use paratransit software to include detailed information and requests
 from clients with special needs.

#### **Expanded Transportation Services**

• Provide more opportunities for underutilized vehicles to offer non-healthcare related transit (e.g. grocery store routes) that would improve the quality of life of seniors and persons with disabilities. Increase senior social trips, which leads to better mental health of the recipient. Coordinate ADA applications and provide gap funding while individuals wait for approval to use service. Allow for home pick-up and return trips for services in different areas, including crossing over county lines. Set a paratransit cost that is equal among all transit services in the region. Extend holiday operating hours to 10pm. Include paratransit services in GoDurham's fare free day. Expand paratransit service to neighboring cities and towns. Provide additional door-to-door service (e.g. Uber, taxi, current public transit, etc.). Provide additional work trips for low-income people in rural areas. Streamline and shorten the process for schools requesting trips for incoming disabled students.

#### **Expanded Education Services**

 Expand travel training for all transit agency staff. Encourage hospitals to screen patients for transportation needs. Create a higher level of comfort among seniors while using public transportation. Improve the transit service providers understanding of clients' needs.
 Present better information for trip planning to riders (e.g.. sheltered stations, stop location, etc.). Conduct policy workshops more frequently. Provide better information to clients.

#### Application Process Improvements (passengers applying for service)

Transit service to expand assistance to persons who are in need, but are not eligible for ADA
paratransit service and are not covered by other services. Provide gap funding to passengers
while waiting for ADA qualification results. Develop receiving of ADA applications in the
region. Establish person-centered eligibility and certification rather than rigid criteria.
Shorten the interview and application process for ADA approval.

#### **Bus Stop Access Improvements**

• Bus stops are too far apart and often without ADA improvements, and riders are unaware of transit alternatives. Increase the number of accessible bus stops.

# **Appendix C: Workshop Prioritization Activity**Workshop Participant List

#### **Local Residents**

Nancy Park

**Deborah Harris** 

**Sharon Harris** 

Len Cone

Maple Osterbrink

#### **DCHC MPO Members**

Brandi Beeker (Orange County mobility manager)

Melissa McCullough (Town of Chapel Hill)

Thanh Schado (Chatham County)

Kim Johnson (GoTriangle)

Lindsay Smart (City of Durham)

Curtis Scarpignato (Durham County)

#### **Human Services**

Fred Johnson (Duke University Family Medicine and Community Health)

## **Nonprofits**

Katrina Williams (Durham Exchange Club Industries, Inc)

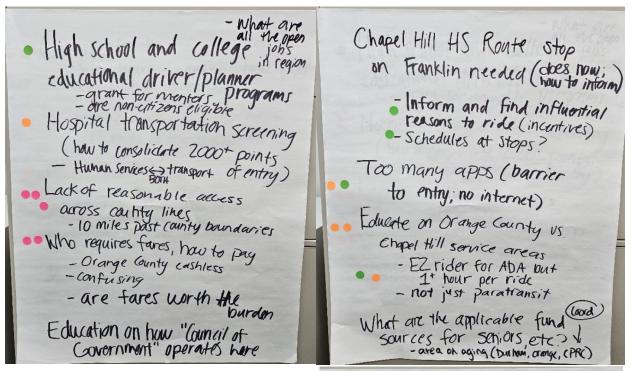
Henry Broadway (Temple Baptist Church)

#### Other/Regional

Shuchi Gupta (Central Pines Regional Council)

Karyl Fuller (Central Pines Rural Planning Organization)

# **Workshop Discussion and Prioritization Activities**



Commuter laws
- select hours - operator hour gaps
- education on operations
(ned app + 1D)
- too commuter focused when
it comes to transportation

Paratransit (ADA) eligibility form
- need an MD signature initially
but can be 07, metationist, other
- not following own pointy
- electronic Platform for universal use
(no mailing barrier)

Medicaid
- management (phonett, depts)

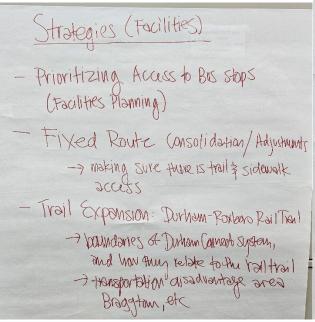
Transportation Needs/6aps

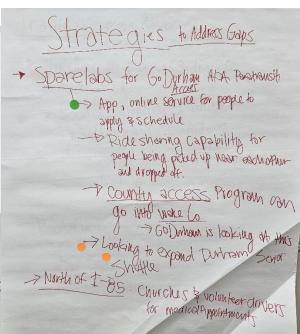
Timeliuss of pick-ups & dropoffs
for disabled

Scrvius along the border of
woke Durham / boundary

Tive on wake side, need to
get to work in Durham & have
to drive to pickup pllnb.

Durvey done by Church in Northum
in Northern Durham
In Northern Durham
Not confortable calling where etc
illiteracy, cont fill out form, need usistance





#### Room 1

- Orange County Durham carrboro customer service and lack of access between locations
- EZ rider service gaps and access to services well in advance
- 1.3.
- 1.4.
- 1.5.

(Services area gaps and coordination across ADA services-i.e someone might be in EZ rider zone and needs to go to Durham, how do we make that possible)

#### Room 2

- 2.1. Lack of bike lanes and larger vehicles blocking areas lack of connectivity
- 2.2. Access to bus stops across large road areas
- 2.3. Services later in the evening are needed
- 2.4. Changes in services meaning you have to find new ways to get around
- 2.5. More routes (regionally) without going through the main hub, larger service areas, more frequency
  - land use related to wealthier neighborhood development
- 2.6. Cannot access specific cultural and natural spaces, that are important for social and health purposes
  - Possibly less frequent but deviated route to these locations
- Weekend options

#### Room 3

- 3.1. Issues with what app to follow, such as inaccuracies for Google Maps... what should people use
- 3.2. Coordination with standards on timing based on actual needs
- 3.3. For opportunities for last minute trips and pilot programs to test services (see: Durham Connect)
- 3.4. Mobility Management how to access services such as rideshare without app, but maybe a call-in number (ex. Transloc app Orange County)
  - Worrying about safety of online services
- 3.5. Access to the mobility managers more directly

# **Appendix D: Commonly Used Acronyms**

**3C** – Comprehensive, Cooperative, Continuing

**ACS** – American Community Survey

**ADA** – Americans with Disabilities Act

**APC** – Automated Passenger Counters

**APS** – Accessible Pedestrian Signals

**BGMPO** – Burlington-Graham Metropolitan Planning Organization

**BRT** – Bus Rapid Transit

**CAMPO** – Capital Area Metropolitan Planning Organization

**DCHC MPO** – Durham-Chapel Hill-Carrboro Metropolitan Planning Organization

**DIME** – Direct Investment in Mobility Equity

**DSS** – Department of Social Service

**EDTAP** – Elderly and Disabled Transportation Assistance Program

**FAST** – Fixing America's Surface Transportation

FTA – Federal Transit Administration

IIJA – Infrastructure Investment and Jobs Act

NCARPO – North Carolina Association of Rural Planning Organizations

**NCDOT** – North Carolina Department of Transportation

**RGP** – Rural General Public

**RPO** – Rural Planning Organizations

**SAFETEA-LU** – Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users

**SPM** – Supplemental Poverty Measure

**TANF** – Temporary Assistance for Needy Families

TC - Technical Committee

TMA – Transportation Management Area

**UZA** – Urbanized Area

# **Appendix E: Public Comment**

they can't help us much.

This section represents all comments received over the course of the Coordinated Plan update. Additional comments received during release of this plan for public comment will be included here.

#### **Comments**

#### Nancy Park

Here are my views about a Coordinated Transportation Plan for me. I will try to attend the March 20 workshop before 11:30 AM but I want to go on record with my own views about transport services for myself and other older adults as well as others in my area of Orange County.

I live in Heritage Hills, a development of 220 homes off Smith Level Road south of Carrboro, in unincorporated Orange County, and just a tiny bit north of the Chatham County line. We are just one of several neighborhoods in this category as well as being an area with numerous rural homes. I am 84 years old and still drive - but not at night and not on highways. My husband is 80 and he drives - but frankly, it is becoming scary for me to be his passenger. We have two adult children in the area and we can arrange transport with them sometimes, but they have busy jobs and young children, so

We want to age in place and we understand that it is a goal of local government too. Some transportation resources we know about include:

- 1. If we don't have a strict time of arrival for something we want to do in town, we can afford to use an Uber. But, if we have to be somewhere on time, Uber's are too expensive I was charged more than \$40 recently for a ride I'd expected to cost about \$13 but was kicked into "surge" pricing because I needed to be on time for an appointment. I've heard that advance scheduled Ubers can be even more expensive.
- 2. We are aware of grocery and pharmacy delivery services that will be free or affordable for us when needed, though they will limit social outlets particularly for grocery shopping.
- 3. We think there may be some transportation made available by UNC Hospitals, but I can't find any online.
- 4. The public transportation services currently offered by Orange County are so limited as to be useless to us.

In order for the age-in-place goal to be achieved - public transportation services for us and others in similar circumstances - it would need to include:

- 1. No buses: a. our streets are not suitable, b. for our health and sociability we walk our streets which have no sidewalks and c, our population is not numerous enough for buses to be economical anyway.
- 2. A system for shared rides and volunteer rides set up for each neighborhood or limited area participation not one countywide big system.
- 3. A system of cars or vans on call that works at night and seven days a week so that we can attend religious/cultural events as well as medical appointments and all the other things active old people want and need to do.
- 4. A system that is door-to-door or door-to-bus stop.
- $5.\,$  A system that is free to low income users and affordable for others. (Scheduled Ubers can be exorbitant!)
- 6. A system that includes an easy-to-use app and a phone contact for people who are not native speakers of "internet".
- 7. A system that would include teens and college students as eligible users to get to school since the school bus system isn't working.
- 8. A system that welcomes people younger than 65 who self-identify as "afraid to drive", who can't afford to drive themselves, or whose usual transport is temporarily unavailable. In other words, a system that works for everybody when they need it.

Cheri Bowers	owers Hi Mrs. Richard.	
	We are looking for transportation for my mother and I just read you will be advancing inclusive transportation. She is permanently in an electric wheelchair. Could you keep us posted on any Orange County options. She currently uses Orange County when it is available and lives on Eden Drive in Hillsborough.	
	Thanks so much!	
	Cheri Bowers Co-founder, Whitted Bowers Farm www.whittedbowersfarm.com	

## **NextDoor Feedback**



Emma M. · Riverwalk · 13w

Don't forget about the need for safe transportation for the disabled and aged riders. I find it limiting by no availability on weekends. TransLoc was Annoyingly unreliable and not worth it.



Emma M. · Riverwalk · 14w

I read your document and although interesting it was slight on contact information. As a disabled adult I am using Orange County Transportation Services.

However at times I need to go outside of the area for important events. Will you please inform me of the availability for this type of services?



Trudi A. • Duke Homestead • 15w

I have a friend who is visually impaired and is trying to find a place to live and only has a limited income of \$600 and can't find anywhere to live within that range even trying to just rent a room. It is so unfair because he can't work or drive and now he can't find a place to live. It is so unfair.



Leto C. • Eno Cabin • 15w

Thanks for posting here. There are many folks in rural areas here who lack access to reliable transportation. Is any thought being given to electric vehicle sharing services or van services for people who need to get to work/ hold care/family violence protection, list goes on?