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Practices for Establishing ADA Paratransit Eligibility **Assessment Facilities**

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75 pages | 8.5 x 11 | PAPERBACK ISBN 978-0-309-43269-6 | DOI 10.17226/22184

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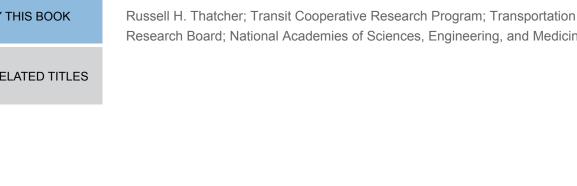
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TRANSIT COOPERATIVE RESEARCH PROGRAM

TCRP SYNTHESIS 116

Practices for Establishing ADA Paratransit Eligibility Assessment Facilities

A Synthesis of Transit Practice

CONSULTANT Russell H. Thatcher TranSystems Corporation Boston, Massachusetts

SUBJECT AREAS Public Transportation • Society

Research Sponsored by the Federal Transit Administration in Cooperation with the Transit Development Corporation

TRANSPORTATION RESEARCH BOARD

WASHINGTON, D.C. 2015 www.TRB.org

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TRANSIT COOPERATIVE RESEARCH PROGRAM

The nation's growth and the need to meet mobility, environmental, and energy objectives place demands on public transit systems. Current systems, some of which are old and in need of upgrading, must expand service area, increase service frequency, and improve efficiency to serve these demands. Research is necessary to solve operating problems, to adapt appropriate new technologies from other industries, and to introduce innovations into the transit industry. The Transit Cooperative Research Program (TCRP) serves as one of the principal means by which the transit industry can develop innovative near-term solutions to meet demands placed on it.

The need for TCRP was originally identified in *TRB Special Report 213—Research for Public Transit: New Directions,* published in 1987 and based on a study sponsored by the Federal Transit Administration (FTA). A report by the American Public Transportation Association (APTA), *Transportation 2000,* also recognized the need for local, problem-solving research. TCRP, modeled after the longstanding and successful National Cooperative Highway Research Program, undertakes research and other technical activities in response to the needs of transit service providers. The scope of TCRP includes a variety of transit research fields including planning, service configuration, equipment, facilities, operations, human resources, maintenance, policy, and administrative practices.

TCRP was established under FTA sponsorship in July 1992. Proposed by the U.S. Department of Transportation, TCRP was authorized as part of the Intermodal Surface Transportation Efficiency Act of 1991 (ISTEA). On May 13, 1992, a memorandum agreement outlining TCRP operating procedures was executed by the three cooperating organizations: FTA, the National Academy of Sciences, acting through the Transportation Research Board (TRB); and the Transit Development Corporation, Inc. (TDC), a nonprofit educational and research organization established by APTA. TDC is responsible for forming the independent governing board, designated as the TCRP Oversight and Project Selection (TOPS) Committee.

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The TCRP provides a forum where transit agencies can cooperatively address common operational problems. The TCRP results support and complement other ongoing transit research and training programs.

TCRP SYNTHESIS 116

Project J-7, Topic SB-25 ISSN 1073-4880 ISBN 978-0-309-27172-1 Library of Congress Control Number 2014959839

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Cover figure:

Boarding low-floor ramp-equipped bus. (Courtesy: Valley Metro.)

FOREWORD

Transit administrators, engineers, and researchers often face problems for which information already exists, either in documented form or as undocumented experience and practice. This information may be fragmented, scattered, and unevaluated. As a consequence, full knowledge of what has been learned about a problem may not be brought to bear on its solution. Costly research findings may go unused, valuable experience may be overlooked, and due consideration may not be given to recommended practices for solving or alleviating the problem.

There is information on nearly every subject of concern to the transit industry. Much of it derives from research or from the work of practitioners faced with problems in their dayto-day work. To provide a systematic means for assembling and evaluating such useful information and to make it available to the entire transit community, the Transit Cooperative Research Program Oversight and Project Selection (TOPS) Committee authorized the Transportation Research Board to undertake a continuing study. This study, TCRP Project J-7, "Synthesis of Information Related to Transit Problems," searches out and synthesizes useful knowledge from all available sources and prepares concise, documented reports on specific topics. Reports from this endeavor constitute a TCRP report series, *Synthesis of Transit Practice*.

This synthesis series reports on current knowledge and practice, in a compact format, without the detailed directions usually found in handbooks or design manuals. Each report in the series provides a compendium of the best knowledge available on those measures found to be the most successful in resolving specific problems.

PREFACE

By Donna L. Vlasak Senior Program Officer Transportation Research Board The report examines the state of the practice in implementing and conducting determinations of ADA paratransit eligibility. It identifies and documents the types of facilities and equipment that are being used and the characteristics, benefits, and costs of establishing ADA paratransit assessment facilities for in-person interviews and functional assessments. The report is intended for transit managers and eligibility process managers who are considering options for making ADA paratransit eligibility determinations.

Information was acquired through a literature review and detailed survey responses from 24 of 30 selected agencies, yielding a response rate of 80%. Also, five case examples offer more detailed information on the variety of transit agency approaches and types of facilities and equipment used.

Russell H. Thatcher, TranSystems Corporation, Boston, Massachusetts, collected and synthesized the information and wrote the report, under the guidance of a panel of experts in the subject area. The members of the topic panel are acknowledged on the preceding page. This synthesis is an immediately useful document that records the practices that were acceptable within the limitations of the knowledge available at the time of its preparation. As progress in research and practice continues, new knowledge will be added to that now at hand.

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PRACTICES FOR ESTABLISHING ADA PARATRANSIT ELIGIBILITY DETERMINATION FACILITIES

SUMMARY

All public transit agencies that operate fixed-route transit services also provide complementary paratransit service for persons who, because of a disability, are prevented from using the fixed-route service for some or all of their trips. Complementary paratransit is required by the Americans with Disabilities Act of 1990 (ADA). Each transit agency that provides complementary paratransit also has a process for determining who is "ADA paratransit eligible."

Eligibility for complementary paratransit is complex and trip-based—that is, if eligible individuals can make some trips by fixed-route transit, they are only eligible for paratransit for the trips that cannot be made by bus or train. Processes must determine not only if applicants are eligible, but the specific travel abilities and the conditions under which they can and cannot use fixed-route transit services.

Given the complexity of ADA paratransit eligibility, many transit agencies have gone beyond paper applications to include in-person interviews and functional assessments in their eligibility determination processes. As of 2012, 48% of transit agencies conducted in-person interviews and 37% requested that some applicants participate in functional assessments.

This report examines the state of the practice in implementing and conducting determinations of ADA paratransit eligibility. In particular, it looks at the various processes, facilities, equipment, and tools used by transit agencies that include in-person interviews and functional assessments. The study included:

- A review of the literature related to ADA paratransit eligibility;
- A survey of 30 transit agencies, with responses from 24 (80%), identified as using in-person interviews and functional assessments to make eligibility determinations; and
- Follow-up with five agencies selected as case examples to gather detailed information on the design of outdoor routes and indoor facilities used for conducting functional assessments, the decision-making process used to develop the approach and facilities, and experiences and lessons learned.

The literature review identified guidance and tools for assessing travel abilities, including guidance specific to assessing those travel skills needed to use fixed-route transit, as well as tests and tools of general physical and cognitive abilities that are used as part of overall assessments. Little literature was identified regarding the actual design or operation of eligibility assessment centers or facilities.

The survey of selected transit agencies indicated that different approaches and processes are used. The primary differences can be characterized as follows.

Outdoor versus indoor assessments: In some cases, agencies assess the ability to get to and from transit stops and stations by walking with applicants in the real environment whenever possible. A few agencies include rides on buses or trains as part of the assessment. Indoor facilities are used when travel in the real environment is precluded or to test certain abilities that are not always observed on the walk—such as getting on and off buses if an actual bus

trip is not taken. In other instances, all aspects of travel in the community and on buses and trains are simulated using indoor facilities and props.

Separate versus combined assessments: Some agencies use separate assessments for applicants with physical, cognitive, and sensory disabilities. Different types of professionals are also used in some instances to make each type of observation (e.g., physical or occupational therapists to assess physical abilities). Other agencies make observations of all types of abilities using a combined assessment that is designed to test physical, cognitive, and sensory skills.

The 24 agencies surveyed were fairly evenly divided in their approaches. Nine rely primarily on outdoor assessments, with limited indoor facilities that are used mainly as a backup. Ten conduct assessments outdoors whenever possible, but also have some indoor props with which to make certain observations. Five do assessments entirely indoors with props and simulations.

Fourteen agencies have separate tests and tools for assessing applicants with physical versus cognitive disabilities. Ten make combined observations over a common assessment course. Only one agency indicated a specific assessment for applicants with vision disabilities. Most others either make general observations of vision abilities as part of a combined assessment or make determinations of eligibility for applicants with significant vision disabilities using information from application forms, interviews, and professionals familiar with the applicants.

Most agencies use contractors to assist with the process—mainly with functional assessments. Nineteen of the 24 systems use contractors to assist with physical functional assessments, 18 use contractors to assist with cognitive assessments, and 15 use contractors to assist with assessments of applicants with vision disabilities. Transit agency staff often review application forms and collect information from professionals familiar with applicants. Responsibility for initial interviews was split, with transit agency staff conducting interviews in 12 cases, contractors conducting interviews in 10 cases, and both in one case (one agency does not have initial interviews).

Twenty-two of the 24 transit agencies surveyed have one central facility for eligibility determinations and assessments. Two agencies with very large service areas have multiple eligibility facilities (one has three and one has five). One of the agencies that has a primary central facility also has two temporary sites and a mobile evaluation unit to conduct assessments in remote parts of its service area.

Fourteen of the 24 transit agencies own or lease the facilities used for making eligibility determinations. Contractors provide the facilities at the other 10 agencies.

The size of the facilities used ranges from 702 ft² to 19,500 ft². The average size is 7,884 ft² for processes that relied more heavily on indoor simulations and props. Where assessments are done mainly outdoors, facilities average 2,538 ft².

Facility build-out costs also varied significantly, from \$765 to \$1.2 million. The average cost was \$336,225 where significant indoor simulations and props are used and \$89,927 where assessments are performed mainly outdoors.

The case examples indicated that most transit agencies used guidance developed by Easter Seals Project ACTION (ESPA) to construct indoor props to simulate travel by fixed-route transit. Most agencies that rely significantly on indoor assessments have mock-ups of curbs and curb ramps, various surfaces (uneven and broken pavement, gravel, and grass), ramps of various lengths and slopes, and pathways with cross-slopes. Most also have mock-ups of buses or full-sized buses located within the facilities. Besides the specific design of indoor and outdoor routes and props used for functional assessments, the case examples also identified important facility design considerations, including:

- Adequate sized waiting areas for applicants, as well as other individuals attending the interviews and assessments;
- Adequate sized pickup and drop-off areas for applicants arriving by paratransit;
- The maintenance of privacy in areas where interviews and assessments are conducted; and
- Multiple elevators if facilities are in shared buildings.

The case examples revealed that public involvement is important if eligibility determination processes are changed to include in-person interviews and functional assessments. Public input is also important in facility design.

Staff at all five transit agencies studied in detail indicated that they were generally pleased with the change to in-person interviews and functional assessments. Staff at these agencies also indicated that their local communities had largely accepted the new processes. Several agencies noted that well-designed and equipped facilities helped them build public confidence in the overall eligibility determination process.

CHAPTER ONE

INTRODUCTION

Public entities that operate fixed-route transit services are required by the Americans with Disabilities Act of 1990 (ADA) to provide complementary paratransit service for individuals who are prevented, because of their disabilities, from using fixed-route transit. Agencies that provide complementary paratransit must also have a process for determining who is "ADA paratransit eligible." U.S.DOT regulations implementing the ADA contain specific eligibility criteria for complementary paratransit service. The regulations also require that transit agencies strictly limit determinations of ADA paratransit eligibility to those individuals who meet these criteria. Strictly limiting eligibility to the regulatory criteria is important to ensure that the right to complementary paratransit is only conferred when use of fixed-route transit is truly prevented. It is also important for ensuring the long-term sustainability of complementary paratransit services.

A growing number of transit agencies are including inperson interviews and functional assessments in the processes they use to determine ADA paratransit eligibility. Interviews and assessments are being incorporated in a variety of ways and use a variety of facilities and equipment.

OBJECTIVES

Relatively little research has been done to document the ways in which in-person interviews and functional assessments are being applied and the facilities and equipment that have been developed to implement them. The purpose of this synthesis study is to identify and document the types of facilities and equipment that are being used and the characteristics, benefits, and costs of establishing ADA paratransit assessment facilities for in-person interviews and functional assessments.

In addition to describing the actual physical facilities and equipment, and the way they are implemented, this report examines the decision-making processes used to establish such facilities, including community involvement and outreach. The challenges, benefits, and outcomes of various approaches and facilities are presented. Costs related to facilities and equipment, including initial construction and ongoing annual operating costs, are also provided.

The results of this synthesis will provide transit agencies with information on current practices to develop facilities for incorporating in-person interviews and functional assessments for determining ADA paratransit eligibility. The report does not recommend specific approaches—this is a local decision that is affected by local conditions and circumstances. Instead, the report provides information on various approaches that have been taken by transit agencies, the outcomes achieved, and the lessons learned.

The report is intended for transit managers and eligibility process managers who are considering options for making ADA paratransit eligibility determinations. It is also intended for board members and officials who are reviewing recommendations and making decisions on local determination processes. The information provided will be useful to transit agencies that currently have paper application processes and are considering options for doing in-person interviews and assessments, as well as agencies that already have in-person processes but are evaluating their processes and considering alternative approaches.

METHODOLOGY

The study was conducted under the direction of an expert panel of policymakers and practitioners, and was begun with a search of the relevant literature. This included reports and articles describing the use of in-person interviews and functional assessments, as well as the facilities and equipment created to implement them.

A survey of selected transit agencies was then conducted to identify current practices. Information from the literature search, as well as the knowledge of the expert panel and the study team, was used to identify transit agencies for the survey. Since only about one-third of all transit agencies include in-person functional assessments as part of their eligibility determination processes, and only a subset of these have special facilities for conducting assessments, the number of known agencies appropriate for the survey was limited. Thirty agencies were identified and sent surveys, and follow-up done to encourage participation. Twenty-four of the 30 agencies (80%) completed the survey.

The survey gathered information about current eligibility determination processes, types of functional assessments employed, detailed information about facilities and equipment used, start-up and ongoing costs, and process outcomes.

Five case example sites were then identified for more detailed study. These sites were selected, using the survey results, to represent a variety of approaches and types of facilities and equipment. Detailed floor plans and outdoor assessment routes (where applicable) were obtained from each. Follow-up calls were made to gather information about implementation issues and lessons learned.

REPORT ORGANIZATION

Chapter two provides a summary of the information gathered during the literature search, including the current use of in-person interviews and functional assessments; types of eligibility determination processes that have been developed; and facility and equipment requirements used for each approach. A list of references and a bibliography are provided at the end of the report.

Chapter three presents the results of the survey of selected transit agencies. It includes:

- General information about each responding agency (service area population, eligibility applications per year);
- Elements of the eligibility process (applications, interviews, types of assessments);
- Functions performed in-house and by contractors;
- Types of facilities and facility ownership;
- Facility features and equipment;
- · Features of outdoor routes; and
- Determination outcomes.

Chapter four presents the five case examples. The case examples describe different eligibility determination approaches including processes with low-cost facilities and equipment, as well as more elaborate facilities and equipment. Qualitative information, such as implementation issues and lessons learned, was also obtained and is provided.

Chapter five then offers some conclusions based on the information gathered. It also suggests topics for future research.

CHAPTER TWO

LITERATURE REVIEW

A review of the literature was conducted as a first step in the study. It focused on processes used to determine ADA paratransit eligibility and facilities created to support these processes. Other literature on the regulatory criteria for eligibility was identified, but is not included in this report.

The literature review included a search of the Transportation Research Information Services (TRIS) database as well as Google searches on ADA paratransit eligibility, ADA paratransit eligibility facilities, and other similar phrases. Reviews were also conducted of trade publications, including articles in *Metro Magazine* and APTA's *Passenger Transport* magazine. Compliance review reports by FTA, which contained descriptions of eligibility determination processes, were also reviewed.

ELIGIBILITY DETERMINATION INFORMATION

Three basic sources of information for making determinations of ADA paratransit eligibility were identified in the literature (1-3). These included:

- Information from applicants (application forms or inperson interviews),
- Information from professionals familiar with applicant disabilities and functional abilities, and
- Information from in-person functional assessments.

Prior to the passage of the ADA in 1990 most transit agencies used only paper applications, sometimes with additional information from professionals, to determine eligibility for paratransit services (4). Since the creation of ADA paratransit eligibility, which is based on functional ability, there has been increased use of in-person interviews and in-person functional assessments (5, 6). These sources of information are better able to go beyond simple verification of a disability and determine individual functional ability.

The U.S.DOT regulation implementing the ADA anticipated more thorough eligibility determinations and addressed the use of in-person functional assessment. In discussing eligibility determination and the general requirement for the process to not be burdensome, the interpretive section of the regulation states:

The process may include functional criteria related to the substantive eligibility criteria of §37.123 and, where appropriate, functional evaluation or testing of applicants. The substantive eligibility process is not aimed at making a medical or diagnostic determination. While evaluation by a physician (or professionals in rehabilitation or other relevant fields) may be used as part of the process, a diagnosis of a disability is not dispositive. What is needed is a determination of whether, as a practical matter, the individual can use fixed route transit in his or her own circumstances. That is a transportation decision primarily, not a medical decision (7).

TCRP Report 163 (5) examined the types of information and processes used by transit agencies to determine ADA paratransit eligibility. In 2012, a survey was sent to all transit agencies identified in the National Transit Database as providing ADA paratransit service. Information about eligibility determination processes was provided by 127 agencies. As shown in Table 1, most transit agencies (85%) reported using paper applications as part of the process. Most agencies (70%) also indicated obtaining information from professionals familiar with applicants to verify the existence of a disability and to acquire information about specific functional abilities.

The use of in-person interviews was reported by just under half (48%) of all agencies. Twenty-seven percent indicated interviewing all applicants, and a subset of these reported that they use in-person interviews in lieu of paper application forms. Twenty-one percent noted that they ask only some applicants to participate in in-person interviews and use the interviews to supplement information obtained from paper application forms.

Thirty-seven percent of respondents indicated that in-person functional assessments were used—with 13% reporting that all applicants participate in assessments and 24% using assessments only some of the time.

"Other" information reported by 10% of agencies included a telephone follow-up with applicants and information from family members or friends.

TYPES OF IN-PERSON DETERMINATION PROCESSES

Determination processes that only involve reviews of paper applications or information provided by professionals do not require special facilities beyond staff offices. Similarly, processes that use in-person interviews but not functional assessments require no specialized facilities or equipment. The

TABLE 1

TYPES OF INFORMATION AND PROCESSES USED TO MAKE ADA PARATRANSIT ELIGIBILITY DETERMINATIONS, 2012 SURVEY OF TRANSIT AGENCIES

Sources of Information	Total	% of Total Respondents
Paper applications completed by applicants or others on their behalf	115	85%
Information from professionals familiar with applicants	95	70%
In-person interviews of all applicants	37	27%
In-person interviews of <i>some</i> applicants	28	21%
In-person functional assessments of all applicants	18	13%
In-person functional assessments of <i>some</i> applicants	33	24%
Other	13	10%
Total Respondents	127	

Source: TCRP Report 163 (5).

study therefore focused on processes that included in-person interviews and functional assessments.

TCRP Synthesis 30 includes four case studies that describe eligibility determination processes used by transit agencies in Los Angeles (California), Pittsburgh (Pennsylvania), Las Vegas (Nevada), and San Mateo County (California) (4). Compliance review reports conducted by FTA since 2000 and posted on their website (http://www.fta.dot.gov/civilrights/ 12875_3899.html) also contain descriptions of the processes used by agencies to determine ADA paratransit eligibility. A study conducted in 2008 by Valley Metro in Phoenix (Arizona) also includes detailed descriptions of the eligibility determination processes used in Salt Lake City (Utah), Las Vegas (Nevada), Los Angeles (California), and Orange County (California) (7).

The literature suggests the following two general approaches to the use of in-person interviews and functional assessments.

Interviews with Separate Physical, Cognitive, and Sensory Functional Assessments

This first approach is based on a model developed by Easter Seals Project ACTION (ESPA), and was developed in 2003 with the input of seven transit agencies that had significant experience conducting in-person interviews and functional assessments. It was updated by ESPA in 2014 (8).

Applicants first participate in the in-person interview. Determinations are made based on information from the interview when possible. If additional information is needed, one or more functional assessments are conducted. Separate functional assessments are used depending on the particular disabilities of the applicants. Physical functional assessments typically begin with a general assessment of balance and gait. Tools such as the Tinetti Balance and Gait Test, or the Get Up and Go Test, are used. This general assessment of balance and gait is used to determine if a more extensive physical functional assessment is appropriate. If appropriate, the physical assessment continues with a walk along a predetermined route that includes features such as curbs and curb ramps, street crossings, hills, cross-slopes, and various surfaces. Assessments are typically conducted outdoors in the real environment. Back-up indoor routes are used when travel outdoors is not appropriate owing to severe weather. The ESPA model and guidance suggest that physical functional assessments be conducted by physical therapists (PTs), occupational therapists (OTs), or professionals with similar competencies.

Assessments of cognitive abilities are conducted using one or more validated tests and tools. These include the Functional Assessment of Cognitive Transit Skills (FACTS) test or the Mini Mental Status Exam (MMSE). FACTS is a simulation of travel by fixed-route transit that was developed and validated for assessing applicants with intellectual disabilities. The MMSE is a test of memory, orientation, and counting skills that is often used to screen for dementia. Individuals trained in proper administration and scoring can conduct these tests.

The ESPA model suggests that assessments of applicants who are legally blind be performed by orientation and mobility (O&M) specialists. The assessment involves an interview with such a specialist and a walk in the real environment if appropriate. Applicants with low vision, but who are not legally blind, can be asked to participate in physical functional assessments conducted by PTs or OTs. As an alternative to functional assessments, the ESPA model suggests that the eligibility of applicants with vision impairments be based on information obtained from applicants and professionals familiar with them.

Interviews with Combined Assessments of General Mobility

This approach also begins with an in-person interview. If information gathered in the interview is not sufficient to make a determination of eligibility, it is followed by an outdoor or indoor walk to assess general mobility. Physical, cognitive, and sensory functional abilities are all observed in this one assessment. Features such as curbs and curb ramps, slopes, street crossings, and rough or unstable surfaces are included along the walk to assess physical functional ability. Cognitive functional ability is assessed by asking applicants to follow directions to complete the walk, demonstrate safe street crossing skills, count change to simulate paying a fare, reading and understanding bus schedules, or recalling information provided during the walk. Sensory abilities are assessed by having applicants read street signs or recognize landmarks as they navigate the route.

In some processes, outdoor walks in the real environment are used whenever possible. Indoor routes are developed for use when severe weather precludes outdoor travel.

Other processes use elaborate indoor facilities, which are designed to simulate travel in the community. Ramps of various slopes are used to simulate hills, and mock-ups of street crossings and traffic controls are often included. Full-sized, fixed-route buses with lifts or ramps or mock-ups of buses are also often included within the facility. Curbs, curb ramps, and rough or unstable surfaces (e.g., artificial grass or gravel) are features along the indoor walk.

Various types of professionals are used to administer combined assessments. Some transit agencies use PTs and OTs; others use nurses, social workers, or other social service or medical professionals.

Processes similar to this are described in FTA compliance reviews and studies of industry practices (2, 7, 9).

ELIGIBILITY DETERMINATION PROTOCOLS, FACILITIES, AND EQUIPMENT

Relatively little literature exists that describes the protocols, facilities, and equipment used in ADA paratransit eligibility determinations. The most extensive information is contained in the ESPA guidance for the model process described previously. Some information is also available for the standardized tests, such as the Tinetti, Get Up and Go, FACTS, and MMSE, which are sometimes used as part of the process to determine ADA paratransit eligibility.

Physical Functional Assessments— ESPA Model Process

The ESPA guidance contains detailed instructions for conducting physical functional assessments (10). The suggested assessment has 17 different elements. It is recommended that the assessment be conducted outdoors in the real environment whenever possible. It is important that back-up indoor facilities be available when severe weather precludes an outdoor assessment.

Table 2 describes each element of the ESPA suggested physical functional assessment, with the outdoor route features needed to conduct the assessment in the real environment listed. Back-up indoor facilities are also provided. Special equipment and tools are also noted.

The assessment begins with the Tinetti Balance and Gait test, which is described in the following section. Vital signs (pulse, blood pressure, and blood oxygen level) can then be recorded before and during the walk, although this is an optional part of the process. Based on these first two elements, an outdoor (preferred) or indoor (back-up) walk along a predetermined route is then taken. Observations made along the route help to determine the ability to get to and from transit stops and stations include the ability to:

- Walk up to 0.5 mile,
- Go up and down curbs and curb ramps,
- · Negotiate various slopes and surfaces, and
- Cross streets with and without traffic controls.

Several abilities related to boarding and riding transit services are then assessed, including:

- Navigating flights of stairs (if there are nonaccessible rail stations),
- Using elevators (if there are accessible rail stations),
- Navigating bus stairs (if there are inaccessible buses still in the fleet),
- Boarding buses by means of lifts or ramps,
- Paying fares,
- · Getting to and from securement areas on vehicles,
- · Standing on moving vehicles, and
- Using the Stop Request system (for bus services).

These abilities can be assessed by incorporating a trip on the bus or rail system into the outdoor walk or this can be done by using mock-ups or back-up indoor features.

Tinetti Balance and Gait Test

This common clinical test for assessing static and dynamic balance is suggested as part of the ESPA physical functional assessment. It can be used to assess an applicant's risk of falling while standing on a moving vehicle or walking to and from transit stops and stations. It is also used to determine if full physical functional assessments are appropriate. If applicants are determined to be high fall risks, eligibility is typically granted without further assessment.

Assessment Element	Outdoor Route Features (preferred)	Indoor Facilities (back-up)	Other Equipment
Tinetti Balance & Gait Test (see separate description)	Not applicable	Armless and non-rolling chair; walking path with centerline and 12 in. marked variations	None
Measure Vital Signs (optional)	Not applicable	Private space	Oximeter; blood pressure cuff and watch
Distance/Endurance	¹ / ₂ mile (2,640 ft) route with markers every 330 ft; places to rest along the way	Hallways or open spaces to simulate ½ mile walk with markers every 330 ft and places to rest	Watch to record time for each 330 ft segment
Curbs and Curb Ramps	Two 6-in. curbs and two curb-ramps along the route (observe going up and down)	Mock-ups of 6-in. curb and curb ramp	None
Different Surfaces	Areas along route with as many of the following as possible: broken/uneven pavement, grass, gravel, loose dirt, sand	Simulated broken/uneven pavement; artificial grass; gravel, loose dirt, sand	None
Slopes	1:16 slope for 30 ft; 1:12 slope for 30 ft; 1:8 slope for 16 ft; 5% cross-slope	Ramps and walkways with these slopes and distances	None
Street Crossing	One controlled and one uncontrolled intersection along route	Simulated street crossing with controls	None
Stairs (systems with rail service)	Rail station with stairs (or see Indoor Back-up)	Flight of stairs	
Elevators (systems with rail service)	Rail station with elevator (or see Indoor Backup)	Elevator	None
Bus Stairs (only if buses not 100% accessible)	Spare bus or bus trip on route (or see Indoor Back-up)	Mock-up of bus stairs (three 12 in. stairs)	None
Bus Lifts (if lifts used in fleet)	Spare bus or bus trip on route (or see Indoor Back-up)	Spare bus or bus lift mock-up	None
Bus Ramps (if ramps used in fleet)	Spare bus or bus trip on route (or see Indoor Back-up)	Spare bus or bus ramp mock-up	None
Pay Fare (both bus and rail, if applicable)	Rail station/bus on route (or see Indoor Back-up)	Farebox and/or fare machines	Fare media
Get to/from Securement Area	Spare bus or bus trip on route (or see Indoor back-up)	Spare bus or mock-up of entry to securement area	None
Stand on Moving Vehicle	Bus or rail trip on route (or see Indoor Back-up)	Tinetti Balance & Gait Test (see above)	None
Signal for Destination	Bus or rail trip on route (or see Indoor Back-up)	Actual or mock-up of stop signaling system	None

TABLE 2
FACILITIES AND EQUIPMENT REQUIRED FOR ESPA PHYSICAL FUNCTIONAL ASSESSMENT

Source: Determining ADA Paratransit Eligibility: An Approach, Guidance and Training Materials (2).

Minimal facilities and equipment are required to administer the Tinetti test. A nonrolling chair without armrests is needed. A walking path in a room or along a hallway is also needed. The walking path should have a marked centerline as well as markings on either side of the centerline. An ideal walkway includes 12 in. by 12 in. nonslip floor tiles.

The assessment begins by observing the applicant's posture while seated. The applicant's ability to rise and be reseated without using her/his arms for support is assessed. Standing balance, balance and recovery when nudged, and balance turning around with eyes closed, is then assessed. A short walk, turn, and return is then observed to assess gait, including step symmetry, step continuity, body sway, walking stance, and deviation from the walking path. Specific points (0, 1, 2) are given based on observations. A balance score, gait score, and total score are then tabulated.

Instructions for administering the Tinetti Balance and Gait test are available online from a number of sources (10).

Timed Get Up and Go Test

An alternative to the Tinetti test is the Timed Get Up and Go test, or the more comprehensive Get Up and Go test. Like the Tinetti test, it requires limited facilities and equipment again only a nonrolling, armless chair and a short walking path. The test has two parts; the first part involves timing how long it takes the applicant to stand, walk three meters, turn around, walk back, and be seated. If applicants are able to do this without difficulty or unsteadiness within a prescribed timeframe, no further observations are needed. If unsteadiness is observed or the task takes longer than prescribed, additional tests and observations are made. These include tests and observations very similar to the Tinetti test (i.e., balance with eyes closed, balance and recovery when nudged).

Instructions for administering the Timed Get Up and Go test or the Get Up and Go test are available from a number of sources online (11).

Functional Assessment of Cognitive Transit Skills (FACTS) Test

The FACTS test was developed for ESPA to provide a lowcost, reliable tool for assessing the independent travel abilities of persons with intellectual disabilities (12). FACTS incorporates the features of several standardized cognitive tests into a simulated bus trip. The test begins with simple skills, such as recognizing bus stop signs, and progresses to more difficult skills, such as remembering and picking out the correct bus and route. The test starts with a trip requiring a single bus and progresses to a trip requiring two buses and a transfer. Applicants must also complete a wayfinding exercise along a route with four landmarks. Several parts of the test assess abilities to problem solve and handle unexpected situations. Judgment, safety skills, and appropriate reactions to strangers are also assessed.

The test is hierarchical—it is terminated when the applicant's abilities are exceeded. It also uses a train-test-train design to determine current abilities as well as potential to learn. If applicants respond incorrectly to a specific item, the tester reinstructs and tests a second time. If the applicants respond correctly with reinstruction, their score is reduced.

A rigorous validation process was used to validate the test (13). It is the only test identified in the literature, specific to using fixed-route transit, which has been validated to be an accurate predictor of abilities.

The test can be administered by trained nonprofessionals, and guidelines for administering the test are available free of charge from ESPA.

Some equipment and props are needed to administer FACTS. This includes specific photographs of signs, buses, people, and street scenes. Nine large posters and a space at least 800 ft² in size is also needed for the wayfinding exercise.

Posters for the wayfinding portion of the test must be set up to meet very specific guidelines. Two set-up options are specified and are shown in Appendix C. Detailed instructions for creating the needed photographs and posters, and for setting up the posters, are available from ESPA.

Mini Mental Status Exam (MMSE)

The Mini Mental Status Exam (MMSE) is a brief test that is widely used to screen for memory-related issues, particularly dementia. The test includes questions that assess orientation to time and place, the ability to remember and repeat words, basic counting and arithmetic skills, and basic motor skills (by copying simple drawings). The test takes only about 10 minutes to administer and does not require any special props or facilities. Instructions for administering the MMSE are available from a number of sources online (*14*).

Facility Costs

TCRP Report 163 provides some information about the cost of building eligibility assessment centers (5). Costs are reported to vary significantly from system to system. The typical cost of setting up an assessment center is noted as being from \$50,000 to \$100,000. The report notes, though, that documented costs have ranged from a low of about \$15,000 to as much as \$350,000. Set-up and build-out cost depends on the size of the facility needed and whether extensive testing is done indoors versus in the real environment.

Ongoing facility costs depend on the size of the facility, local commercial rents, and whether a new facility is needed. The report notes that assessment centers range in size from 2,000 ft² to 15,000 ft². Different rents, utility costs, and maintenance costs vary significantly based on the size of the facility.

DETERMINATION OUTCOMES

The literature suggests that processes that use in-person interviews and functional assessments have more thorough and accurate eligibility determination outcomes than processes that rely solely on paper applications and/or information from professionals familiar with applicants (1, 4, 5, 7, 15). These studies have found that, on average, transit agencies that rely on paper applications find 88% of applicants unconditionally eligible, 11% conditionally eligible, and 1% eligible on a temporary basis. Transit agencies that include in-person interviews and functional assessments in the process find, on average, approximately 63% of applicants unconditionally eligible, 28% conditionally eligible, and 9% eligible on a temporary basis. Information from these studies is presented in Table 3.

The literature also suggests that there is significant "selfselection" in processes that use in-person interviews and functional assessments (4). Many people who initially express interest in applying for ADA paratransit eligibility do not

TABLE 3
REPORTED ADA PARATRANSIT ELIGIBILITY DETERMINATION OUTCOMES FOR PAPER
VERSUS IN-PERSON DETERMINATION PROCESSES

Type of Process	Determination Outcomes								
Type of Flocess	Unconditional	Conditional	Temporary	Not eligible					
Paper Applications with Professional Verification	88%	11%	1%	7%					
In-Person Interviews and	63%	28%	9%	7%					
Functional Assessments	Range: 38%-75%	Range: 8%-54%	Range: 2%-17%	Range: 1%-23%					

Source: TCRP Report 163 (5).

complete the process when asked to appear in-person for interviews and functional assessments.

Finally, the literature also suggests that with more thorough determinations, particularly better identification of specific and measurable conditions of eligibility, it is possible to implement trip-by-trip eligibility (determining if certain trips requested by conditionally eligible riders can be made by fixedroute transit) (5). A review of trip-by-trip eligibility determinations by KC Metro in Seattle (Washington) found that about 7.5% of trips by conditionally eligible riders are made on fixed-route transit rather than ADA paratransit. A review of trip eligibility by ACCESS in Pittsburgh (Pennsylvania) found that 15% of trips by conditionally eligible riders are made on fixed-route transit rather than on ADA paratransit.

The impacts of more rigorous eligibility determinations on ADA paratransit demand were studied and documented in *TCRP Report 119* (16). An aggregate statistical model based on data from 28 sample systems was developed to improve the estimation of ADA paratransit demand. This model suggested a demand elasticity of -0.29 for the percentage of applicants found "conditionally" eligible (i.e., a 1% higher percent of applicants found conditionally eligible compared with the mean value of 21% corresponds to a 0.29% decrease in demand). It also suggested that systems that do trip-bytrip eligibility screening experience significantly lower ADA paratransit demand than systems that do not do trip screening.

IMPORTANCE OF THOROUGH ADA PARATRANSIT ELIGIBILITY DETERMINATIONS

As the paratransit requirements of the ADA have been implemented, the demand for and cost of this service has risen. Within the defined service area and hours of operation ADA paratransit service must be provided for all trips that cannot be made by eligible individuals on fixed-route transit. All trip purposes must be served and capacity cannot be constrained. Several papers and reports have noted the importance of making thorough determinations of ADA paratransit eligibility (17-19). Providing ADA paratransit only for people who meet the regulatory eligibility requirements and trips that they cannot make on fixed-route transit is an important part of being able to sustain appropriate and compliant services.

IMPLEMENTATION OF IN-PERSON ELIGIBILITY DETERMINATION PROCESSES

Finally, the literature review identified a few papers, articles, and case studies describing the implementation of in-person eligibility processes and the opening of eligibility centers. This included an online case study for the TriMet process in Portland (Oregon), three articles about the new facility and process implemented by Valley Metro in Phoenix (Arizona), and one paper describing the process implemented by SamTrans in San Carlos, California (20-24).

CHAPTER THREE

SURVEY RESULTS

A survey was developed with Project Panel input to gather information about eligibility determination processes, facilities, and equipment from selected transit agencies. A copy of the survey is provided in Appendix A. The survey requested information about:

- Types of information used to make eligibility determinations
- Process elements (application forms, interviews, assessment)
- In-house versus contractor responsibilities
- Eligibility determination facility ownership
- · Eligibility determination facility features and equipment
- Initial facility set-up costs
- Annual facility operating costs
- Features of outdoor routes (if used)
- Process and outcome statistics.

Transit agencies were also asked to provide floor plans of eligibility determination facilities and maps of any outdoor assessment routes.

The survey was sent to 30 transit agencies identified as using in-person interviews and functional assessments to make determinations of eligibility. Recent research reports, as well as the general knowledge of the study team and Project Panel, were used to identify the types of processes used by each agency. Agencies were also selected to provide geographic and system size diversity.

A total of 24 transit agencies completed the survey, an 80% response rate. One small agency responded indicating that, contrary to what was stated in the literature, they did not conduct in-person interviews or functional assessments. The following is a summary of information provided.

RESPONDING AGENCIES

Table 4 lists the 24 transit agencies that responded to the survey, organized by service area population. The service area population, number of ADA paratransit applications received per year, and number of eligibility determinations made each year is provided for each agency. Respondents represent systems of varying size. The service area population ranges from 245,069 [Anchorage Public Transportation Department (Muni in Anchorage)] to 11,638,106 [Access Services, Inc. (ASI) in Los Angeles]. Four respondents make less than

1,000 ADA eligibility determinations per year; seven between 1,000 and 2,999 determinations per year; seven between 3,000 and 4,999 determinations per year; three from 5,000 to 9,999 determinations per year; and three make 10,000 or more determinations per year.

ELIGIBILITY DETERMINATION PROCESSES AND SOURCES OF INFORMATION

Table 5 shows the sources of information and processes used by each agency to make eligibility determinations. This includes how information is gathered from applicants and professionals identified by applicants, and the types of in-person functional assessments used. Agencies are again listed from smallest to largest service area size.

Applicant Forms

Nineteen of the 24 transit agencies have forms that are completed by applicants. Eleven request that applications be mailed in and reviewed before in-person interviews and functional assessments are scheduled. Eight agencies ask applicants to bring completed forms to the interviews.

One agency [Regional Transportation Commission of Southern Nevada (RTC)] completes the application form as part of the interview and one agency [Orange County Transportation Authority (OCTA)] completes a form by telephone and then asks applicants to sign it when they come in for interviews.

Three agencies do not use application forms; all information from applicants is obtained through in-person interviews.

Professionals Verification

All 24 agencies use information from medical or health professionals familiar with applicants' disabilities or functional abilities to help make eligibility determinations. In 11 of the agencies, part of the application form must be completed by a professional. Eight agencies request information from a medical or health professional only when needed and ask applicants to identify appropriate professionals when this is required. Five agencies invite applicants to submit information from medical or health professionals; however, this is not required.

TABLE 4
SURVEY RESPONDENTS

Acronym	Transit Agency City, State	Service Area Population (2012 NTD)	ADA Paratransit Applications/ Year ⁽¹⁾	ADA Paratransit Determinations/ Year ^(1, 2)
Muni	Anchorage Public Transportation Department, Anchorage, AK	245,069	797	705
CCRTA	Corpus Christi Regional Transit Authority, Corpus Christi, TX	342,412	927	785
STA	Spokane Transit Authority, Spokane, WA	394,120	1,818	2,008
Pierce	Pierce County Public Transportation Benefit Area, Tacoma, WA	557,069	3,233	3,233
SamTrans	San Mateo County Transit District, San Carlos, CA	737,100	2,888	2,888
JTA	Jacksonville Transportation Authority, Jacksonville, FL	838,815	1,209	968
DTS	Department of Transportation Services, Honolulu, HI	953,207	4,629	4,673
CMTA	Capital Metropolitan Transit Authority, Austin, TX	1,023,135	3,029	2,889
COTA	Central Ohio Transit Authority, Columbus, OH	1,081,405	2,056	1,910
ACCESS	Port Authority of Allegheny County, Pittsburgh, PA	1,415,244	725	725
TriMet	Tri-County Metropolitan Transportation District, Portland, OR	1,469,790	3,338	3,338
MTA	Nashville Metropolitan Transit Authority, Nashville, TN	1,583,115	1,132	1,020
BCT	Broward County Transit, Ft. Lauderdale, FL	1,780,172	5,358	3,758
RTC	Regional Transportation Commission of S. Nevada, Las Vegas, NV	1,886,011	5,560	5,560
KC Metro	King County Metro, Seattle, WA	1,957,000	6,122	4,834
UTA	Utah Transit Authority, Salt Lake City, UT	2,165,290	1,161	1,133
Metro Mobility	Metro Mobility, Minneapolis, MN	2,314,701	8,612	8,561
DART	Dallas Area Rapid Transit, Dallas, TX	2,423,480	3,732	3,067
OCTA	Orange County Transportation Authority, Orange, CA	3,014,923	7,871	6,166
SEPTA	Southeastern Pennsylvania Transportation Authority, Philadelphia, PA	3,320,234	6,295	2,989
Valley Metro	Valley Metro, Phoenix, AZ	3,629,114	4,753	4,753
MBTA	Massachusetts Bay Transportation Authority, Boston, MA	4,181,019	11,114	12,352
RTA	Regional Transportation Authority, Chicago, IL	6,133,037	15,960	13,298
ASI	Access Services, Inc., Los Angeles, CA	11,638,106	39,483	39,483

⁽¹⁾Self-reported "annual" data. Likely CY 2013 or FY 2013 or 2014 as data were provided in January and February 2014.

⁽²⁾Annual determinations can vary slightly from applications received depending on the number of applications in process.

TriMet asks applicants to identify a medical or health professional and sign a medical release form. Agency staff then contacts these professionals directly to get information. In addition to acquiring information from professionals in application forms, Spokane Transit Authority (STA) follows up with professionals if new information is brought up in interviews. Massachusetts Bay Transportation Authority (MBTA) follows up with professionals in all cases before applicants are found not eligible. Valley Metro asks applicants to provide the name of a professional who can be contacted if needed, and encourages applicants to provide any verification they have, but does not require this information.

In-Person Interviews

Twenty-two of the 24 agencies conduct in-person interviews. Fourteen require all applicants, or at least all new applicants, to participate in interviews. Valley Metro officially requires interviews, but noted that in rare cases where immediate service is needed and eligibility is clear it has made determinations without interviews. KC Metro conducts phone interviews with all persons who submit applications forms.

Five agencies make some determinations based on information from applicants and professionals and only require some applicants to participate in interviews. RTA, Tri-County Metropolitan Transportation District (TriMet), and ASI require all new applicants and most, but not all, riders seeking recertification to participate in interviews. Muni requires interviews of all applicants except those with end stage renal failure who are using the service primarily for dialysis transportation.

Southeastern Pennsylvania Transportation Authority (SEPTA) noted that interviews are part of the functional assessments conducted by contractors. Broward County Transit (BCT) refers some applicants for functional assessments. While the contractor who conducts the assessments may discuss issues with applicants during the assessment, BCT does not consider this to be a separate interview.

Physical Functional Assessments

All 24 agencies include physical functional assessments as part of the eligibility determination process. Thirteen include the Tinetti Balance and Gait test as part of the assessment. Corpus Christi Regional Transit Authority (CCRTA) uses the Timed Get Up and Go test rather than the Tinetti test. Port Authority of Allegheny County (ACCESS) noted that PTs who conduct the assessments sometimes record vital signs (pulse and blood oxygenation levels) before, during, and after the assessment. (Note that many other agencies most likely do this as well but did not note it separately.)

Four agencies conduct physical functional assessments outdoors in the real environment. Five agencies have created indoor routes and do not take applicants outdoors. Fifteen

TABLE 5 ADA PARATRANSIT ELIGIBILITY DETERMINATION PROCESSES

			ication orm	n			ofessio				n-Persentervie			Phy Asses	vsical smen	ts		Cog Asses	nitive sment	īs	As	Visio sessm	
Transit Agency	Mailed In	Brought to Interview	Completed at Interview	Other	Part of Application Form	Obtained as Needed	Can be Submitted (Opt.)	Req. of Some Applicants	Other	Req. of All Applicants	For Some Applicants	Other	Tinetti Balance/Gait Test	Indoor Route	Outdoor Route	Other	FACTS	MMSE	Part of Overall Assess.	Other	By O&M Specialist	Part of Overall Assess.	Other
Muni	•					٠					(1)			•					٠			٠	
CCRTA	•				٠					•				•	•	(2)				(3)		٠	
STA	•				•				(4)		•		٠	•	•		•	•	•			•	
Pierce	•					•	•				•				•	(5)				(6)		•	
SamTrans							•			•				•					•			•	
JTA		•			•					•			•	•	•		•						(7)
DTS						•	•			•			•	•	•	(8)		•	•			•	
CMTA		•			•					•			•	•	•				•			•	
COTA		•			•					•				•				•	•				
ACCESS	•				•					•			•		•	(9)	•	•					(10)
TriMet	•								(11)			(12)	•	•	•	(13)	•	•					
MTA		•			•					•			•				•					•	
BCT	•				•									•	•				•			٠	
RTC			•			٠				•					•		•	•					(14)
KC Metro	•				•							(15)		٠	٠				•	(16)		٠	
UTA		•						•		•	-		•	•	•		•	•	-		•	-	
Metro	•				•						•		•	•	•		•		•			•	
Mobility					-														-				(17)
DART	•			(10)	•					•		<u> </u>	•	•	•		—	•	•				(17)
OCTA	•			(18)		•				-	(10)		•	•	•		•		•			•	(20)
SEPTA Valley	-	•				•			(21)	•	(19)	(22)	-	•	•		-		•			•	(20)
Valley Metro									(21)			(22)							•				
MBTA						•	•		(23)	•			•	•	•		<u> </u>	•	•			•	(24)
RTA		•				•	•		(23)	⊢		(12)	•	•	•	(25)	•	•	•	(26)		•	(24)
ASI			•			•	-		(27)			(12)	┢┻	•	-	(23)	—		•	(20)		•	(20)
A31			•			•			(21)										•			•	

Notes:

⁽¹⁾Interviews required for all applicants except those with end stage renal disease applying mainly for dialysis transportation.

(2)Timed Get Up & Go test.

⁽³⁾Cognitive assessment developed by transit agency.

⁽⁴⁾New information brought up during interview is verified by eligibility contractor. ⁽⁵⁾Power mobility device boarding/deboarding and use.

⁽⁶⁾Psychologist to perform as needed standardized testing, in-person interviews with travel training staff.

⁽⁷⁾Applicants bring visual acuity statement to interview. Decision based on interview and vision information.

⁽⁸⁾During inclement weather, assessments are done in office building where interviews are conducted.

⁽⁹⁾Indoor bus mock-up. When appropriate (based on diagnosis) physical therapist also uses pulse oximeter to measure pulse and oxygen saturation at baseline, during and after exertion.

⁽¹⁰⁾ESPA recommended approach. (If low vision but not legally blind, assess as part of physical functional assessment. If legally blind, grant at least conditional eligibility.)

⁽¹¹⁾Obtained for all applicants by eligibility determination staff with Medical Release Form.

⁽¹²⁾Required of all new applicants and most, but not all, recertifications.

⁽¹³⁾Fixed-route trip on bus and/or light rail as appropriate.

⁽¹⁴⁾Determinations for applicants with vision disabilities based on interviews and professional verification information.

⁽¹⁵⁾Phone interviews conducted with all applicants who submit completed application forms.

⁽¹⁶⁾Assess additional cognitive skills using portions of FACTS test. ⁽¹⁷⁾Determined through interviews, application, and information from professionals. Have O&M specialist under contract who can be consulted.

⁽¹⁸⁾Completed via phone, verified, and signed at interview.

⁽¹⁹⁾Interviews conducted as part of functional assessments by contractors.

⁽²⁰⁾If vision screening (i.e., field test) is provided by the applicant's eye care practitioner, it is sent to the contracted vision professional for interpretation; if applicant does not have an eye doctor, applicant is scheduled for a vision assessment by the contracted vision professional.

⁽²¹⁾Professional contact information is requested and applicants are encouraged to provide it, but it is not required.

⁽²²⁾Interviews have been waived in very rare cases where immediate service is needed and eligibility is clear.

⁽²³⁾Requested prior to "not eligible" determinations.

⁽²⁴⁾Verification from vision care specialists at state Commission of the Blind, as needed.

⁽²⁵⁾Primarily outdoor assessments but use indoor depending on weather; use curb and lift platforms indoors; use modified Tinetti.

⁽²⁶⁾Observations also made as part of physical assessments if this is also conducted.

(27)Required of all new applicants. After three-year certification period, some recertification applicants may be required to participate in in-person interview to continue eligibility if there is reason to believe their functional abilities may have changed.

agencies have both outdoor and indoor routes that are used for physical functional assessments. In some cases, part of the route is indoors and part is outdoors. In several cases, the indoor route is used during inclement weather. For example, Department of Transportation Services (DTS) noted that during inclement weather the assessments are done in the office building where the eligibility staff is located.

TriMet noted that it includes a ride on the bus and light rail service as part of the physical functional assessment. Pierce County Public Transportation Benefit Area (Pierce) noted that it includes an assessment of power wheelchair users' command of the device and ability to board and deboard from transit vehicles (likely done by other agencies as well).

Cognitive Functional Assessments

Fifteen agencies have separate cognitive assessments that are used with applicants who report cognitive disabilities. Eleven use the FACTS test (explained in chapter two) and 10 use the MMSE (also explained in chapter two). Six of these agencies use both FACTS and MMSE. CCRTA noted that it has developed its own cognitive functional assessment. KC Metro noted that it uses parts of the FACTS test. Eight of these agencies also make observations regarding cognition during the physical functional assessment to supplement the FACTS and MMSE tests.

SEPTA indicated that its contractors use psychologists to administer standardized tests of cognition. SEPTA also noted that some applicants with cognitive disabilities are interviewed by its travel trainers as part of the process.

Seven agencies assess cognitive abilities as part of a combined assessment along the same routes that are used to assess physical functional abilities.

Vision Assessments

Only one agency [Utah Transit Authority (UTA)] uses O&M specialists to assess applicants with vision disabilities. Sixteen agencies assess vision along the same outdoor or indoor route used to assess other abilities.

Dallas Area Rapid Transit (DART), SEPTA, Jacksonville Transportation Authority (JTA), ACCESS, MBTA, RTC, and Central Ohio Transit Authority (COTA) base determinations for applicants with vision disabilities on information provided by applicants and professionals who are familiar with them. SEPTA refers applicants to a contracted vision professional if they do not have their own professional to provide a visual acuity statement. MBTA requests information from the State Commission for the Blind if applicants are not able to provide verification of disability.

AGENCY AND CONTRACTOR RESPONSIBILITIES

Twenty of the transit agencies surveyed contract out for assistance with the eligibility determination process. Table 6 shows the division of responsibilities between transit agency staff and contractor staff. Four agencies have hired staff with appropriate qualifications and perform all parts of the process in-house.

In most cases, transit agency staff reviews application forms, reviews or obtains information from medical professionals, and conducts interviews. Contractor staff sometimes assists with reviewing application materials and collecting information from professionals, but are more often involved in administering functional assessments.

Transit agency staff is responsible for reviewing application material in 13 programs; contractors do this in one program, the task is shared in seven programs, and in three processes there are no application forms.

Transit agency staff review or obtain information from professionals in 14 programs, contractors have responsibility for this task in four programs, the task in shared in four programs, and there is no specific responsibility for obtaining information from professionals in two programs.

Transit agency staff conducts interviews in 12 programs, contractors conduct interviews in ten programs, the task is shared in one program, and there are no interviews in one program.

Contractors perform physical functional assessment in 17 programs, transit staff in five programs, and the responsibility is shared in two programs.

Contractors also perform cognitive assessments in 14 programs, transit staff in six programs, and both in four programs. Greater involvement of transit staff in cognitive assessments reflects that these assessments can be conducted by trained staff with various experience and backgrounds.

Contractors perform vision assessment in 12 programs, transit staff in two systems, and both in three systems. As noted earlier, this is done in most cases using a combined physical/cognitive/vision assessment process. In seven programs, determinations for applicants with significant vision loss (legal blindness) do not involve functional assessments and are instead based on information provided by applicants and professionals.

Most transit agencies (19) retain responsibility for making final determinations, contractors are given this responsibility in three programs, and decisions are a shared responsibility in two programs.

Twelve of the 18 transit agencies that contract out for assistance with the process work with local contractors. This

Transit Agency	Contractor(s)	Rev. Application Forms	Obtain Professional Verif.	Conduct Interviews	Conduct Physical Assess.	Conduct Cognitive Assess.	Conduct Vision Assess.	Make Final Determination
Muni	N/A	Т	Т	Т	Т	Т	Т	Т
CCRTA	Two OTRs	Т	В	В	В	В	В	Т
STA	Innovative paradigms; Nurse Tammy RN	В	С	С	С	В	С	Т
Pierce	NW Center for Integrative Medicine; psychologist	В	Т	С	В	В	В	Т
SamTrans	C.A.R.E. evaluators	N/A	N/A	С	С	С	С	С
JTA	Industrial ATC, LLC	Т	Т	Т	С	С	N/A	Т
DTS	Paratransit, Inc.	N/A	С	С	С	С	С	С
CMTA	Concentra	В	В	Т	С	С	С	В
COTA	N/A	Т	Т	Т	Т	Т	N/A	Т
ACCESS	Easter Seals of Western Pennsylvania	Т	Т	Т	С	Т	N/A	Т
TriMet	Medical Transportation Management	Т	Т	Т	С	С	N/A	Т
MTA	Functional Solutions	Т	Т	Т	С	С	С	Т
BCT	Neurological Rehab. Center Program Services, Inc.	В	Т	N/A	С	С	С	Т
RTC	Nevada Community Enrichment Program	Т	Т	Т	С	В	N/A	Т
KC Metro	Harborview Medical Center, Dept. of Rehabilitation Medicine	Т	N/A	Т	С	С	С	Т
UTA	Orientation & mobility specialist (personal services contract)	Т	Т	Т	Т	Т	В	Т
Metro Mobility	N/A	Т	Т	Т	Т	Т	Т	Т
DART	N/A	Т	Т	Т	Т	Т	N/A	Т
OCTA	C.A.R.E. evaluators	В	В	С	С	С	С	Т
SEPTA	Moss Rehab.; Bryn Mawr Rehab.; Mercy Health Systems	Т	Т	С	С	С	С	Т
Valley Metro	C.A.R.E. evaluators	С	С	С	С	С	С	Т
MBTA	Paratransit, Inc., dba Innovative Paradigms	N/A	С	С	С	С	N/A	С
RTA	Community Alternatives Unlimited, Inc.	В	Т	С	С	С	С	Т
ASI	C.A.R.E. evaluators	В	В	С	С	С	С	В

TABLE 6 AGENCY AND CONTRACTOR RESPONSIBILITIES

T = transit agency staff; C = contractor staff; B = both; N/A = not applicable.

includes a variety of rehabilitation and disability service companies and agencies. Eight transit agencies contract with national companies that provide eligibility determination services.

NUMBER, LOCATION, AND OWNERSHIP OF ELIGIBILITY DETERMINATION FACILITIES

Table 7 provides information about the number of facilities used by transit agencies that responded to the survey. It also indicates facility ownership and whether the eligibility services are located with other transit agency or contractor services or in separate facilities.

Number of Determination Locations

All but two of the transit agencies that completed the survey indicated that a single eligibility determination facility is used. Two agencies—RTA and SEPTA—indicated multiple facilities; SEPTA has three facilities that serve its four-county service area, RTA has five facilities that serve a large sixcounty area. One agency (ASI) has a main facility to serve most of its area. It then has two temporary locations and a mobile evaluation unit to serve two parts of the service area that are somewhat separate and remote.

Ownership and Location

At 14 locations, the eligibility facilities are owned or leased by the transit agencies. In nine of these programs the eligibility facilities are located in buildings that also house transit agency administrative offices or are in transit centers. In eight programs, the eligibility facilities are in buildings with other transit administrative offices.

The facility at STA is located in a downtown transit center. In five programs, the eligibility determination services are housed in a separate building leased or owned by the transit agency.

Contractors provide the facilities in ten programs. In four programs, the eligibility services are housed in buildings that are used by the contractor to provide other services

		Facility Ownership/Location							
Transit	No. of	No. of Transit agency			Contractor				
Agency	Facilities	In transit facility	ansit Separate In contractor Separate		Other				
Muni	1	•							
CCRTA	1	•							
STA	1	•							
Pierce	1	•							
SamTrans	1				•				
JTA	1		•						
DTS	1				•				
CMTA	1	•							
COTA	1		٠						
ACCESS	1		•						
TriMet	1		•						
MTA	1	•							
BCT	1				•				
RTC	1			•					
KC Metro	1			•					
UTA	1		٠						
Metro Mobility	1	•							
DART	1	•							
OCTA	1				٠				
SEPTA	3			•					
Valley Metro	1	• (1)							
MBTA	1				٠				
RTA	5			•	•				
ASI	1 ⁽²⁾				•				

TABLE 7 ADA PARATRANSIT ELIGIBILITY DETERMINATION FACILITIES OWNERSHIP AND LOCATION

⁽¹⁾ Co-located with a new customer service center.

⁽²⁾ One central location in the Los Angeles basin. Temporary sites and a mobile evaluation unit to evaluate applicants in the Santa Clarita and Antelope valleys.

(e.g., rehabilitation services and community services). In six programs the contractors have leased space in buildings separate from any other services they might provide in the area. The contractor for the RTA, which has five separate facilities, has a combination of facilities located together with other services and facilities that are separate from other services it provides.

CO-LOCATED PROGRAMS AND SERVICES

The survey also asked if transit agencies co-locate their eligibility programs with travel training services or transportation information and resource centers. Results are shown in Table 8.

Twelve of the transit agencies that have travel training programs have co-located these services with their eligibility determination programs. If applicants indicate interest in travel training, this allows them to meet with travel trainers at the same time.

Ten transit agencies noted that other transportation information and resources are available at the eligibility determination facility. In some cases, specific resource centers have been created. Figure 1 shows the resource center created by KC Metro, which includes information on available transportation services as well as safety equipment for traveling in the community, provided to interested applicants free of charge. In other cases, eligibility is co-located with customer service centers or other outlets with transit information.

INDOOR FACILITY SPACE, AMENITIES, AND PROPS

Table 9 provides information about the types of spaces, amenities, and props located at each of the eligibility facilities. Most program facilities (22) also housed administrative staff involved in eligibility determinations. Administrative staff was at different locations in two programs. One program (RTA), which has multiple facilities, indicated that administrative offices are located at one facility and other facilities are used just for interviews and assessments.

Most program facilities (14) also had space for eligibility file storage. In some cases, central files were at other locations. Some systems have also implemented paperless processes; all information is scanned or entered electronically and there are no paper files.

All 24 programs had waiting areas and restrooms. All but two programs also had interview rooms. Muni did not indicate rooms designated specifically for interviews. BCT noted that its functional assessment contractor does not conduct formal

	Other Programs and Services at Facility							
Transit Agency	Translatin in a	Transportation information and	Other					
	Travel training	resources	Other					
Muni	•	lesources						
CCRTA	•							
STA	•	•	(1)					
Pierce	•	•	(-)					
SamTrans								
JTA								
DTS	•							
CMTA	•	•						
COTA	•							
ACCESS	•	•						
TriMet			(2)					
MTA	•							
BCT								
RTC								
KC Metro		•						
UTA	•							
Metro Mobility								
DART		•	(3)					
OCTA		•						
SEPTA								
Valley Metro	•	•	(4)					
MBTA		•						
RTA								
ASI	•							

Source: TCRP Report 163 (5).

⁽¹⁾ Customer service and call center for fixed-route transit.
 ⁽²⁾ While there is no transportation resources center at the facility,

other transportation services are discussed during the interview.

⁽³⁾ Located in DART Headquarters, which has transit information and

DART retail store.

(4) Customer service center.

interviews, but rather discusses travel issues with applicants as part of the assessment.

Eighteen of the 24 transit agencies that completed the survey indicated that scales for weighing applicants and their wheelchairs are located at the eligibility facilities. The other

0 0 9

Getting the

six agencies obtain information about the weight of mobility devices from applicants or other sources.

The survey also asked agencies what specific props were located within the facilities to assist with physical functional assessments. Nine agencies indicated that facilities included extensive props for simulating all types of physical environment and transit equipment features. This includes:

- A measured course for determining maximum reasonable walking distance;
- Curb and curb ramps;
- Ramps with various slopes and cross-slopes;
- Varied surfaces, such as grass, uneven pavement, or unstable surfaces (gravel);
- A transit bus or a mock-up of a bus; and
- A simulated street crossing complete with simulated traffic controls.

Facilities at three other agencies had most of these same features: SEPTA notes that it has a simulated street crossing, but no traffic controls; RTC reports that its facility has all of these features except a bus or bus mock-up; and Capital Metropolitan Transit Authority (CMTA) had all features except a simulated street crossing and ramps.

Eleven agencies noted that their indoor facilities have more limited props. These agencies conduct physical functional assessments primarily outdoors in the real environment and use their indoor facilities as a back-up when there is inclement weather. These facilities typically had an indoor route that could be used to determine maximum reasonable walking distance and simulations of curbs or curb ramps. Three also had mock-ups of transit buses.

Four agencies (Pierce, DTS, DART, and MBTA) relied mainly on outdoor assessments. Facilities were used as a back-up and typically had an indoor measured course that could be used as needed, but did not have special props such as simulations or mock-ups as part of the facilities.

FIGURE 1 KC Metro (Seattle) Transportation Resource Center. (Courtesy: TranSystems.)



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TABLE 9 INDOOR FACILITY SPACES, AMENITIES, AND PROPS

								Р	hysica	al Ass	essme	ent Pro	ops	-		
Transit Agency	Admin. Offices	File Storage	Waiting Area	Restrooms	Interview Room(s)	Scale	Measured Course	Curb/Curb Ramp	Ramps	Varied Surfaces	Bus or Bus Mock-up	Simul. Street Crossing	Simul. Traffic Controls	Other	Separate Cognitive Assess. Area	Other
Muni	•	•	•	•			٠	٠	٠	٠	٠	٠	٠			
CCRTA			•	•	•		٠			٠						(1)
STA	•	•	•	•	•	•					٠				•	
Pierce	•	•	•	•	•										٠	
SamTrans	•		•	•	•	•	٠	٠	٠	٠	٠	٠	٠	(2)		
JTA	•	•	•	•	•	•		٠	٠						•	
DTS	•		•	•	•	•	٠									(3)
CMTA	•		٠	•	•	•	٠	•		٠	•			(4)		
COTA	•	•	•	•	•	•	•	•	٠	٠	•	•	٠			
ACCESS	•	•	•	•	•		•	•			•			(5)	•	(6)
TriMet	•	•	•	•	•	•	•	•	٠	٠	•	•	٠		•	
MTA	•	•	•	•	•	•		•								
BCT	•	•	•	•	•	•	•	•	•	•	•	•	•			
RTC	•	•	•	•	•	•	•	•	•	٠		•	•		•	
KC Metro	•		•	•	•	•	٠	٠			٠					
UTA	•	•	•	•	•	•	٠	٠	٠	٠	٠	٠	٠		•	
Metro Mobility	•	•	•	•	•		•	•	•	•					•	
DART			•	•	•	•	•									
OCTA	•		•	•	•	•	•	•	•	•	•	٠	•			
SEPTA	•		•	•	•	•	•	•	•	•	•	•	L			
Valley Metro	•	•	•	•	•	•	•	•	•	•	•	•	•			
MBTA	•		•	•	•	•	•		•	L			L	(7)	•	(8)
RTA	(9)	•	•	•	•	<u> </u>	•	•		•			L	(10)	•	
ASI	•		•	•	•	•	•	•	•	٠	•	•	٠			

Notes:

⁽¹⁾Area for taking vital signs.

⁽²⁾Bus stop signs.

⁽³⁾ID card printer; identification photos taken on iPad.

⁽⁴⁾Conference/meeting room.

⁽⁵⁾Elevator.

⁽⁶⁾Paratransit broker administrative offices.

⁽⁷⁾Indoor route only used if weather prevents use of outdoor route.

⁽⁸⁾IT server room, kitchen area.

⁽⁹⁾At one site only.

(10)Lift platform.

Several agencies noted other spaces or props not included as choices in the survey, such as a space for recording vital signs, a transit lift platform (rather than a full bus mock-up), an elevator, bus stop signs, break rooms/kitchen areas, and equipment for taking ID photos. It is likely that other agencies also have this type of equipment (particularly ID photo and break rooms), but did not mention it separately in the survey.

Ten agencies indicated that their facilities also include spaces created for administering cognitive functional assessments. This is typically a space for administering the FACTS test (see chapter two and Appendix C).

FACILITY SIZE AND COSTS

Transit agencies were also asked to provide information about the size (square footage) of their eligibility determination facilities, the costs for building out and setting up the facilities, and the annual costs of facility operation (nonlabor costs such as rent, utilities, maintenance, etc.). The information provided is shown in Table 10.

Nineteen agencies provided information about the size of the space used for eligibility determinations. This included indoor space for assessments, office space for eligibility staff,

Transit Agency	Facility Size (ft ²)		Reported Build-Out Cost	Reported Annual Operating Cost	Year Occupied
Muni	N/A	Т	N/A	\$27,200	2002
CCRTA	1,962	Т	\$765 (1)	N/A (2)	2009
STA	1,765	Т	\$242,653	\$4,500	2012
Pierce	2,858	Т	(3)	(2)	2007
SamTrans	N/A	С	(4)	(4)	2013
JTA	1,900	Т	N/A	\$6,421	2007
DTS	1,932	С	\$86,000	\$96,142	2009
CMTA	3,750	Т	\$175,000 (5)	\$281,100	2013
COTA	3,276	Т	\$147,980 (6)	\$12,000	2011
ACCESS	2,230	Т	\$25,000	\$20,700	2000
TriMet	8,330	Т	\$250,530	\$144,000	2010
MTA	1,658	Т	\$2,000+(7)	(2)	2012
BCT	3,800	С	N/A	N/A	N/A
RTC	1,420	С	(4)	\$17,928	2004
KC Metro	4,064	T/C	\$17,000 (8)	(4)	N/A
UTA	5,625	Т	N/A	N/A	2006
Metro Mobility	N/A	Т	(3)	(2)	N/A
DART	702	Т	N/A (3)	N/A (2)	2003
OCTA	5,800	С	\$50,000	\$102,142	2010
SEPTA	N/A	С	\$58,842 (9)	\$20,000 (9)	2000
Valley Metro	15,317	T/C (10)	\$1,200,000 (11)	\$320,000	2011
MBTA	5,100	С	\$171,000 (12)	\$272,000	2012
RTA	N/A	С	N/A	N/A	N/A
ASI	19,500 (13)	С	\$310,000 (13)	\$124,959	2008

TABLE 10 FACILITY SIZE AND COSTS

T = transit agency; C = contractor; N/A = not available.

(1) \$265 for medical equipment (2 oximeters, blood pressure cuff, and stethoscope); \$500 for mock-up of street crossing, including street light and activation button.

⁽²⁾ Part of transit facility operating costs. Not separated.

⁽³⁾ Space modifications made as part of overall headquarters build. Costs not separated.

⁽⁴⁾ Part of assessment contract (cost per assessment) and not separated out.

⁽⁵⁾ Rough estimate. Unable to provide exact figures as some work still in progress.

⁽⁶⁾ Transit agency purchased building for combined ADA paratransit operations and assessment center. Pro-rated purchase cost for assessment portion of building was \$690,000. Build-out of assessment center

after purchase was \$147,980.

⁽⁷⁾ Scale cost about \$2,000. Curb and curb ramp built in-house and costs not recorded.

(8) \$7,000 for combined scale/wheelchair measuring device; \$10,000 for bus mock-up, curb, and ⁽⁹⁾ Build-out and annual operating cost for the largest of three contractors (Moss Rehab).

⁽¹⁰⁾ Specifications for build-out were developed jointly with the contractor. The owner of the building then made the modifications as part of the lease.

⁽¹¹⁾ \$1.2 million cost includes build-out cost for co-located customer service offices as well. Costs not split out between customer service and eligibility.

⁽¹²⁾ \$130,000 building improvements, \$41,000 in furnishings, \$45,300 in computer and phone equipment (not included in table).

⁽¹³⁾ Based on 2009 report and study [National Transit Institute 2010 (1)].

and common space such as waiting areas and restrooms. Facility size ranged from 702 ft² (DART) to 19,500 ft² (ASI).

Fourteen agencies provided build-out cost information. Build-out costs ranged from a low of \$765 (CCRTA) to \$1,200,000 (Valley Metro).

Fourteen agencies also provided annual facility operating costs, which ranged from \$4,500 per year (STA) to \$320,000 per year (Valley Metro).

Much of the variation in size appears to relate to the extent of indoor assessment props. Table 11 outlines facility size,

build-out costs, and annual facility operating costs for the 11 agencies that indicated extensive indoor props (see Table 9 and previous discussion) compared with facility size for the 13 agencies with more limited indoor assessment props that rely primarily on outdoor physical assessments. Facilities with extensive indoor props averaged 7,884 ft² in size (4,708 not including Valley Metro and ASI) compared with 2,538 ft² for facilities with more limited props.

Build-out costs for the facilities with extensive props ranged from \$50,000 to \$1,200,000 and averaged \$326,225although this figure was skewed by the cost of the Valley Metro facility. The average cost was \$163,470 if Valley TABLE 11

С	SIZE, BUILD-OUT COSTS (AS REPORTED), AND ANNUAL OPERATING COSTS (AS REPORTED) FOR FACILITIES WITH EXTENSIVE VERSUS MORE LIMITED PROPS									
]	Transit Agency	Facility Size (ft ²)	Build-Out Cost	Annual Operati						
		E 11.1 1.1								

Transit Agency	Facility Size (ft ²)	Build-Out Cost	Annual Operating Cost
	Facilities with	Extensive Indoor Props	
Muni	N/A	N/A	\$27,200
SamTrans	N/A	N/A	N/A
COTA	3,276	\$147,980	\$12,000
TriMet	8,330	\$250,530	\$144,000
BCT	3,800	N/A	N/A
RTC	1,420	N/A	\$17,928
UTA	5,625	N/A	N/A
OCTA	5,800	\$50,000	\$102,142
SEPTA	N/A	\$58,842	\$20,000
Valley Metro	15,317	\$1,200,000	\$192,000
ASI	19,500	\$310,000	\$124,959
Averages	7,884 (1)	\$336,225 (2)	\$80,029
	Facilities with	h Fewer Indoor Props	
CCRTA	1,962	\$765	N/A
STA	1,765	\$242,653 (3)	\$4,500
Pierce	2,858	N/A	N/A
JTA	1,900	N/A	\$90,000
DTS	1,932	\$86,000	\$96,142
CMTA	3,750	\$175,000	\$281,100
ACCESS	2,230	\$25,000	\$20,700
MTA	1,658	\$2,000	N/A
KC Metro	4,064	\$17,000	N/A
Metro Mobility	N/A	N/A	N/A
DART	702	N/A	N/A
MBTA (4)	5,100	\$171,000	\$272,000
RTA	N/A	N/A	N/A
Averages	2,538	\$89,927	\$127,407 (5)

N/A = not available.

⁽¹⁾ 4,708 ft² average not including Valley Metro and ASI.

⁽²⁾ \$163,470 average not including Valley Metro.

⁽³⁾ Includes bus or bus mock-up.

⁽⁴⁾ Large number of staff offices to make 12,352 determinations per year.

⁽⁵⁾ \$52,835 average not including MBTA and CMTA.

Metro is not included. Build-out costs for facilities with more limited props ranged from \$765 to \$252,653 and averaged \$89,927. Four of the seven facilities with more limited props were built out for less than \$25,000.

Annual operating costs for facilities with extensive props averaged \$80,029. Facilities with more limited props cost an average of \$127,407 per year—which was somewhat skewed by costs reported by the MBTA and CMTA. The MBTA has a large facility for a staff that makes more than 12,000 determinations per year. CMTA's is located in a transit facility in downtown Austin, with a high allocated lease (depreciation) cost. Not counting the MBTA and CMTA costs, average annual operating cost for facilities with limited props was \$52,836.

OUTDOOR ROUTE FEATURES

Table 12 summarizes information about the outdoor routes used to make eligibility determinations. Six transit agencies conduct all assessments indoors and do not utilize outdoor routes. Eight of the 15 transit agencies that provided information about the length of their outdoor routes indicated that they are 0.5 mile (2,640 ft) in length—in keeping with the guidance developed by ESPA (see chapter two). Two are very close to this recommended distance—2,500+ ft at Pierce and 2,972 ft at BCT. Two agencies have routes of 0.25 mile (1,320 ft), one is 660 ft, and two are 0.75 mile (3,960 ft) in length.

All of the outdoor routes have measured intervals so that assessors can time how long it takes applicants to complete each part of the route. Most have rest areas along the way, and the majority also have many of the features suggested in the ESPA guidance, including:

- Curbs,
- Curb ramps,
- Hills,
- Broken pavement,
- Other surfaces,
- · Uncontrolled street crossings, and
- Controlled street crossings.

TABLE 12 OUTDOOR ROUTE FEATURES

	Outdoor Route Features												
Transit Agency	Total Distance (ft)	Measured Intervals	Rest Area(s)	Curb(s)	Curb Ramp(s)	Hill(s)	Broken Pavement	Other Surfaces	Uncontrolled Crossing	Controlled Crossing	Bus Ride	Train Ride	Other
Muni	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CCRTA	660	•	•	•	•	•	•	•		•			
STA	N/A	•	•	•	•	•	٠	٠	•	•			(1)
Pierce	2,500+	٠	٠	•	•	•				•			
SamTrans	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
JTA	N/A	•	•	•	•	•							
DTS	2,640	•	•	•	•	•	•	•	•	•			(2)
CMTA	3,960	•	•	•	•	•	•			•			
COTA	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
ACCESS	2,640	•	•	•	•	٠	•	•	•	•			(3)
TriMet	2,640	•	٠	•	•				•	•	•	•	
MTA	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
BCT	2,972	٠	•	•	•	•	٠	٠	•	•			(4)
RTC	1,320	٠	•	•	•	•		٠	٠	•			
KC Metro	2,640	•	•	•	٠	٠	٠		•	•			
UTA	3,927	•	•	•	•	•	•	•	•	•		•	
Metro Mobility	3,960	•	•	•	•	•	٠			•			(5)
DART	2,640	٠		•	٠	•	٠	٠		•	•	•	
OCTA	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
SEPTA	1,320	•	•	•	٠	٠	٠	•	•	•			
Valley Metro	2,640 (6)	٠	•	•	•		٠	٠	٠	•			(7)
MBTA	2,640	•	•	•	•	•	٠	•					(1)
RTA	2,640	•		•	•					•			(3)
ASI	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

N/A = not applicable. ⁽¹⁾Stairs, elevators. ⁽²⁾Driveways, elevators, stairs. ⁽³⁾Cross-slope. ⁽⁴⁾Grass.

 ⁽⁵⁾Use downtown skyways between buildings and through retail space during bad weather.
 ⁽⁶⁾Outdoor route is 2,640 feet (0.5 mile). Together with distance travelled during indoor portion of assessment (0.25 mile), total observed distance is 0.75 mile. ⁽⁷⁾Light rail station (not a trip on the rail, but navigating the station).

Transit	Determination Outcomes (no./%)								
Agency	Unconditional	Conditional	Temporary	Not Eligible	Other	Totals			
Muni	383 (54.3%)	259 (36.7%)	Included (1)	63 (8.9%)	0	705			
CCRTA	592 (75.4%)	143 (18.2%)	29 (3.7%)	20 (2.6%)	(0.1%) (2)	785			
STA	1,688 (84.1%)	271 (13.5%)	Included (3)	49 (2.4%)	0	2,008			
Pierce	2,445 (75.6%)	620 (19.2%)	N/A	168 (5.2%)	0	3,233			
SamTrans	1,958 (68.2%)	464 (16.2%)	398 (13.9%)	51 (1.8%)	0	2,871			
JTA		879 (90.8%)	• • •	89 (9.2%)		968			
DTS	3,536 (75.7%)	564 (12.1%)	362 (7.7%)	211 (4.5%)	0	4,673			
CMTA	1,489 (51.6%)	604 (20.9%)	659 (22.8%)	137 (4.7%)	0	2,889			
COTA	1,341 (70.2%)	372 (19.5%)	187 (9.8%)	10 (0.5%)	0	1,910			
ACCESS	354 (48.8%)	207 (28.6%)	67 (9.2%)	97 (13.4%)	0	725			
TriMet	1,960 (58.7%)	877 (26.3%)	387 (11.6%)	114 (3.4%)	0	3,338			
MTA	688 (67.5%)	290 (28.4%)	0	42 (4.1%)	0	1,020			
BCT	2,698 (80.3%)	482 (14.3%)	97 (2.9%)	83 (2.5%)	0	3,360			
RTC	2,687 (48.3%)	1,378 (24.8%)	552 (9.9%)	878 (15.8%)	65 (1.2%)	5,560			
KC Metro	3,355 (69.4%)	1,428 (29.5%)	Included (3)	51 (1.1%)	0	4,834			
UTA	726 (64.1%)	304 (26.8%)	54 (4.8%)	7 (0.6%)	42 (3.7%)	1,133			
Metro Mobility	6,601 (77.1%)	1,151 (13.4%)	571 (6.7%)	238 (2.8%)	0	8,561			
DART	1,919 (62.6%)	822 (26.8%)	Included (3)	326 (10.6%)	0	3,067			
OCTA	4,912 (80%)	638 (10.3%)	544 (8.8%)	72 (0.8%)	0	6,166			
SEPTA	1,689 (56.5%)	1,091 (36.5%)	170 (5.7%)	39 (1.3%)	0	2,989			
Valley Metro	3,207 (67.5%)	881 (18.5%)	520 (10.9%)	145 (3.1%)	0	4,753			
MBTA	8,724 (70.6%)	689 (5.6%)	992 (8.0%)	141 (1.1%)	1,806 (14.6%) (4)	12,352			
RTA	10,532 (79.2%)	2,370 (17.8%)	263 (2.0%)	133 (1.0%)	0	13,298			
ASI	22,385 (56.7%)	7,300 (18.5%)	4,857 (12.3%)	4,941 (12.5%)	0	39,483			

 TABLE 13

 ADA PARATRANSIT ELIGIBILITY DETERMINATION OUTCOME STATISTICS

⁽¹⁾ Temporary determinations included in conditional determinations.

⁽²⁾ Other is another type of conditional/temporary.

⁽³⁾ Temporary determinations included in unconditional and conditional determinations.

⁽⁴⁾ Visitors and medical necessity.

Two agencies (TriMet and DART) incorporate bus and rail trips into the outdoor route for some applicants. One agency (UTA) incorporates trips on its rail system as part of the route.

ELIGIBILITY DETERMINATION OUTCOMES

Table 13 provides determination outcomes for each agency. This includes total determinations per year; the number and percentage of applicants granted unconditional, conditional and temporary eligibility; and the number and percentage found not eligible. Three agencies did not record temporary as a separate category and included these determinations in unconditional or conditional eligibility. One agency granted non-ADA eligibility for applicants needing immediate service for life-sustaining medical treatments.

The percentage of applicants granted unconditional eligibility ranged from 48.3% to 84.1%. Conditional eligibility ranged from 12.1% to 36.5% (note that Muni reported 36.7%; however, this includes applicants granted temporary eligibility; therefore, nontemporary conditional was likely 5 to 10 percentage points lower). Temporary eligibility, for the agencies that recorded this, ranged from 2% to 22.8%. The percentage of applicants found not eligible ranged from 0.6% to 15.8%. CHAPTER FOUR

CASE EXAMPLES

This chapter contains more detailed information about eligibility determination processes and eligibility facilities used by several of the transit agencies that were surveyed. Transit agencies highlighted were selected to illustrate the range of possible approaches—from basic facilities with limited special props, to elaborate facilities with extensive props. Agencies were also selected to illustrate processes that rely primarily on outdoor assessments in the real environment (with limited indoor facilities often used as a back-up) and processes that conduct indoor assessments with more elaborate facilities and indoor props.

DEPARTMENT OF TRANSPORTATION SERVICES, HONOLULU, HAWAII

DTS uses a process that relies primarily on outdoor assessments in the real environment with limited indoor facilities and props. DTS contracts with Paratransit, Inc. (dba Innovative Paradigms), which manages all aspects of the process.

Eligibility Determination Process and Facilities

To apply for ADA paratransit eligibility, new and recertifying individuals simply contact DTS's eligibility center to arrange a date and time for an in-person interview and functional assessment. DTS does not require applicants to complete a paper application. Information from health/medical professionals is required of some applicants or obtained as needed. Contractor staff at the eligibility center gathers general information from applicants such as name, address, phone number, type of disability, and mobility aids used at the initial contact. Staff informs applicants that they may be asked to participate in an outdoor walk and reviews a list of the information they should bring to the interview. Applicants with psychiatric or vision disabilities are requested to bring documentation of the disability to the interview. Applicants are invited to bring any available information that might be helpful for understanding their disability and functional ability, but this is not required. Staff also asks if transportation to and from the interview is needed; if so, this is arranged in conjunction with the DTS paratransit contractor.

DTS's single eligibility center is located on the 8th floor of an office building at 1100 Ward Avenue in downtown Honolulu, and serves the DTS paratransit area that encompasses the entire Island of Oahu. A floor plan of the center is provided as Figure 2. This plan shows the lobby and administrative office area, and includes a waiting area (A), a separate reception area with two desks and office equipment (B), four staff offices that serve as interview rooms (C), an open area between the offices (D), and a kitchen area with an information technology closet (E). The center is 1,932 ft² in size. Accessible restrooms are located a short distance from the main entrance of the eligibility center, down the common hallway.

When applicants arrive at the eligibility center, they are asked to complete a four-page intake form to verify general information (name, address, phone number, etc.) already on file. Applicants are also asked to sign a release of information form to allow staff to contact and obtain additional information from professionals such as medical, vision, or mental health care providers; social workers; or therapists. An Applicant Agreement, which details the eligibility process, is included in the four page packet, and applicants are asked to acknowledge that they have read the agreement by signing the form.

The intake form is reviewed by intake staff and a tablet computer is used to take a photo of the applicant, which is used to create a photo ID card if the applicant is determined to be eligible.

The applicant is assigned to one of three mobility coordinators (MCs) at the center. The MCs are required to have experience working with people with disabilities, such as job trainers or counselors, or occupational therapy assistants (OTAs). Other center staff includes two administrative assistants, a travel trainer, and a manager who also conducts interviews as needed (seven total).

The MCs review the information in the intake form and then conduct an extensive interview. If information obtained in the interview indicates a physical disability, MCs perform a Tinetti Gait and Balance test at the end of the interview. This test is done in the central open area between the staff offices.

If the Tinetti test indicates a high risk of falling, no further physical functional assessments are conducted. If the results of this test indicate no significant risk of falling, applicants are asked to complete a walk with the MC. The walk involves using the building elevators to get to the first floor (A) and then an outdoor walk along a measured course that is 0.5 mile

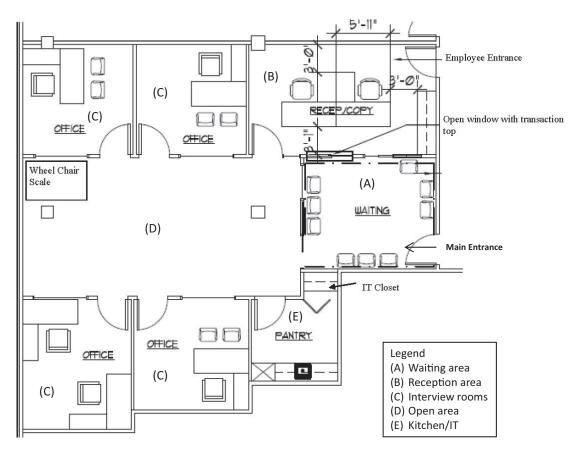


FIGURE 2 DTS eligibility center floor plan. (Courtesy: DTS and Innovative Paradigms.)

long (2,640 ft). A map of the outdoor route is provided as Figure 3. Photos showing some of the outdoor route features are provided in Figure 4 (a-d).

After exiting the building, applicants walk one block on Ward Avenue, cross Ward Avenue at a light-controlled intersection to a park (B), navigate various surfaces within the park (C), and return to Ward Avenue where they cross again and travel one block on South Beretania Street (D). They then cross Hale Makai Street at a light-controlled intersection (E), travel one block on Hale Makai Street (F), cross again at an uncontrolled intersection (G), walk one block on South Hotel Street to the building entrance (H), and return using the elevators to the eligibility center (marked as HVEC on Figure 3). In addition to the controlled and uncontrolled street crossings, the route includes curbs, curb ramps, stairs, hills, broken pavement, and various other surfaces. There are also driveways that create cross-slopes.

In the unlikely event of bad weather in Honolulu, an indoor measured route has been established using the hall-ways, lobby area, and elevators within the office building (see Figure 5).

Applicants with dementia or memory-related disabilities may be asked to complete the Mini Mental Status Exam (MMSE). Depending on the results and on information from the interview, they may also be asked to complete the outdoor or indoor walk. Their ability to follow instructions to complete the course, use the elevator, safely cross streets, and remain oriented to their location is assessed along the walk.

Applicants with some vision loss, but not legally blind, may also be asked to complete the outdoor or indoor walks. The ability to read street signs, navigate along the pathways, and safely cross streets is assessed. Determinations for applicants with significant vision loss are based on information provided by applicants and professionals familiar with applicants. Determinations for applicants with psychiatric disabilities and seizure conditions are also based on information from applicants and professionals.

To allow for a paperless environment, all records are scanned, saved on a secure server, and any paper is shredded.

Decision-Making Process

DTS implemented its current process in 2009. Prior to this, determinations were made based largely on a paper application, with in-person interviews and assessments conducted on an as-needed basis. Leading up to the current process, DTS had experienced a steady increase in demand for its ADA para-transit service (The Handi-Van). A study was commissioned

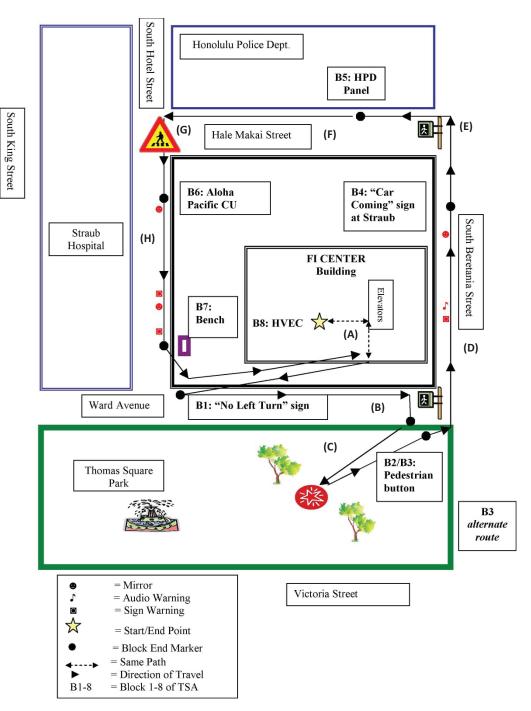


FIGURE 3 DTS outdoor assessment route. (Courtesy: DTS and Innovative Paradigms.)

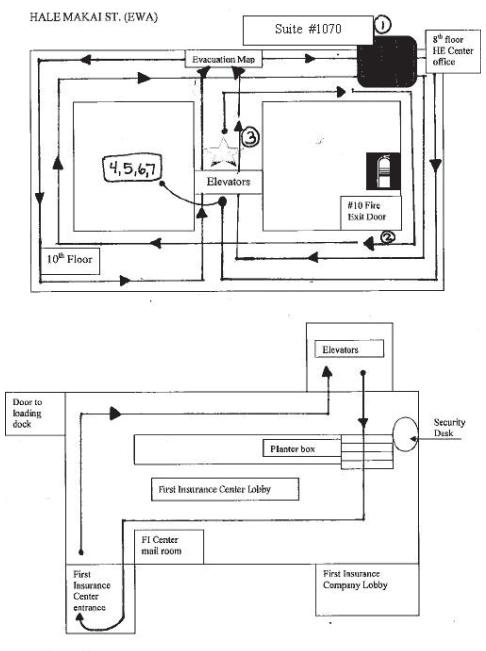


(c)

(**d**)

FIGURE 4 Photos of DTS outdoor route: (*a*) Sidewalk; (*b*) Controlled intersection; (*c*) Varied surfaces; (*d*) Dirt path in park. (*Courtesy*: DTS and Innovative Paradigms.)

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TSA INDOOR COURSE

WARD AVE.

FIGURE 5 DTS indoor (back-up) assessment route. (Courtesy: DTS and Innovative Paradigms.)

of the The Handi-Van service to help ensure that its trips were provided when riders truly could not use fixed-route transit. One of the suggestions was for a more thorough eligibility determination process.

The study included extensive community outreach. DTS's active advisory committee was also involved in the study, the preparation of a Request for Proposal (RFP) for an eligibility contractor, review of proposals, and the final design of the current process.

Build-Out and Operating Costs

DTS reported that the contractor allocated approximately \$86,000 to build-out the eligibility center; almost all of which was spent on building and equipping the offices, waiting area, and other common areas. Beyond the photo ID equipment and a scale for weighing mobility devices, no special equipment was purchased and no props were built.

Annual rent, utilities, and other facility costs total \$96,142.

Process Statistics and Outcomes

DTS reported that its contractor conducts 4,629 interviews each year. A total of 4,348 functional assessments are performed each year.

The contractor makes eligibility decisions and then prepares and sends letters of determination. DTS spot checks determinations and oversees the appeals process.

The DTS contractor has found 75.7% of all applicants to be unconditionally eligible, 12.1% to be conditionally eligible, 7.7% to be eligible for temporary service, and 4.5% to not be eligible.

Overall Experience and Lessons Learned

DTS indicated that it has been pleased with the new process. Staff noted that there were some initial concerns expressed by applicants and the community—primarily about the time and distance to get to and from the eligibility center, and questions about staff qualifications. These issues have been far outweighed, however, by satisfaction with how easy it is to complete the new process—there is no application or need to visit medical professionals to acquire health information, and everything (the interview and assessment) can be accomplished in one visit.

The DTS contractor, which also manages similar processes in Boston (Massachusetts) and Spokane (Washington), described several lessons learned from its experiences at all current locations.

- It is important to consider access to the eligibility center by paratransit vehicles. The amount of pickup and dropoff space depends of the application volume and the percentage of applicants who will need transportation. The number of applicants who use the paratransit service will also depend in part on ease of access by fixed-route transit as well as private automobile. In larger operations, care must be taken to simultaneously accommodate multiple paratransit vehicles in order to move applicants in and out of the facility. This can impose a large space demand outside of the facility itself. Depending on the physical layout, the logistics of moving paratransit vehicles in and out can be challenging. Space needed to load and unload wheelchairs is significant.
- Access by private automobile must also be considered. Depending on the community, many people may arrive at the facility in personal vehicles and parking needs to be provided. If there are fees for parking, vouchers to cover the cost of the trip should be included in the budget and made available to applicants.
- While Innovative Paradigms offers a paperless process, some communities may still require paper applications or the archiving of certain paper records. If this is the case, space for record storage must be included in the facility design.

- The accessibility of the center, as well as any larger building and area within which it is housed, must be considered. This includes push button access on all doors that applicants might use. The accessibility of restrooms and other common spaces must also be considered.
- Waiting areas for individuals arriving or departing from the eligibility process should be large enough to accommodate the anticipated volume including companions, family, or others who may come with them.
- The administrative staff managing the waiting area should be separated from visitors if at all possible (an arrangement similar to that used in medical offices works well). This is important because receptionists are often occupied making appointments or communicating with others about confidential matters.
- Some entertainment in the waiting area is appropriate. The DTS contractor noted that videos of *I Love Lucy* are shown in the waiting areas of facilities it manages.

PORT AUTHORITY OF ALLEGHENY COUNTY/ ACCESS TRANSPORTATION SYSTEMS, PITTSBURGH, PENNSYLVANIA

Access Transportation Systems (ACCESS) serves as the paratransit broker for the Port Authority of Allegheny County (PAAC). ACCESS manages the eligibility determination process for ADA paratransit services as well as contracting of service delivery. ACCESS is considered a pioneer in the development and implementation of in-person interviews and functional assessments for determining ADA paratransit eligibility. Physical functional assessments are conducted outdoors in the real environment whenever possible. Some indoor props are used to supplement the outdoor route. Cognitive assessments are done using the FACTS and MMSE tests.

Eligibility Determination Process and Facilities

Persons interested in applying for ADA paratransit eligibility contact ACCESS to receive a paper application form. Applicants are also required to provide professional verification of disability that includes diagnosis, date of onset, and prognosis. More detailed information from medical professionals is obtained by ACCESS staff for applicants with psychiatric disabilities, vision impairment, and seizure conditions.

Applicants return the form and verification to ACCESS, which then reviews it to ensure that all required information has been provided. ACCESS then contacts applicants to schedule in-person interviews and functional assessments. Based on the information provided, some applicants are scheduled for interviews only and not functional assessments. During calls to schedule appointments, staff explains the in-person process so that applicants will be prepared for an outdoor walk. Staff also requests that applicants come with any mobility device or devices they use when traveling in the community, reminds them to take any prescribed medications, and asks if they need transportation. If transportation is needed, it is scheduled on the ADA paratransit service. Because ACCESS is located close to reliable fixed-route transit and with ample nearby parking, about half of all applicants use transit or arrive by car.

All new applicants are required to appear in person. Recertification is done approximately 85% of the time based on simply an updated paper application. Subsequent interviews and functional assessments are required only if there a change in a mobility device(s) that significantly affects functional abilities.

The assessment center and eligibility staff are located in the ACCESS offices, which are on the 4th floor of an office building at 650 Smithfield Street in downtown Pittsburgh. A floor plan of the ACCESS offices, including the eligibility determination areas, is provided as Figure 6. Photos of props and other facilities at the eligibility office are shown in Figure 7 (a-c). ACCESS administrative offices, including the office of the eligibility program manager are labeled (A). When applicants arrive, they are greeted at the main reception area (B1) and directed to the eligibility waiting room (B2), which is furnished with chairs, a water cooler, magazines, a clock, and a television monitor that plays selected public television shows featuring various neighborhoods in Pittsburgh.

ACCESS has two full-time employees who process applications, schedule appointments, arrange transportation, conduct interviews, give the FACTS and MMSE tests, make final



FIGURE 6 ACCESS main offices, including Eligibility Determination Program. (Courtesy: ACCESS Transportation Systems.)

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(a)



(b)

(c)

FIGURE 7 ACCESS indoor eligibility facilities: (a) Half-bus mock-up; (b) Disembarking using bus ramp; (c) Securement area in bus mock-up. (*Courtesy*: ACCESS Transportation Systems.)

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determinations, and send out determination letters. ACCESS contracts with Easter Seals of Western Pennsylvania for the service of two PTs, who work at the ACCESS offices and perform physical functional assessments.

A member of the ACCESS staff meets applicants in the eligibility waiting room, shows them to one of the two offices used for interviews (D), conducts the interview, and, if the applicant has a cognitive disability, administers either the MMSE or the FACTS test. Props for the FACTS test are located in the space marked (G) in Figure 6. A photo of the applicant is also taken.

The staff person next decides if a physical functional assessment is needed. Determinations are made for about 30% of applicants based on information derived from application forms, medical/health professionals, and interviews (including cognitive assessments). The FACTS or MMSE tests are performed about 18% of the time, while about 67% of applicants participate in physical functional assessments.

If a physical functional assessment is required, a PT meets the applicant and escorts them to the physical functional assessment area (F). The PT explains the process, conducts a brief interview, and uses a pulse oximeter to record baseline pulse and blood oxygen levels. The PT then conducts a Tinetti Balance and Gait test to determine the applicant's risk of falling—in part to determine if applicants can stand on a moving vehicle and navigate certain terrain, but also to help decide if it is appropriate to proceed with a full functional assessment. A mock-up of a curb and curb ramp and of a low-floor bus are located in the assessment area (see Figure 7 a–c) and are used to determine if the applicant can step up and down 6-in. curbs, navigate curb ramps, use ramps to enter and exit low-floor buses, and navigate to and from a seat or securement area.

Next, the PT requests that the applicant walk to the elevators, go to the first floor, and complete the outdoor assessment. A full outdoor route, as well as a shortened route, are available. The full route (called Route Two) is shown in Figure 8, the shortened route (Route One) is Figure 9, and photos taken along the routes are provided in Figure 10 a–d.

The full outdoor assessment is 0.5 mile long and involves the following:

- Navigating two curb ramps and crossing a light-controlled intersection at 7th Avenue and Smithfield Street;
- Proceeding down 7th Avenue to Grant Street and navigating curb ramps and a controlled crossing at 7th Avenue and William Penn Place;
- Navigating two more curb ramps and a controlled street crossing at 7th Avenue and Grant Street;
- Proceeding down Grant Street to Strawberry Way, navigating additional curb ramps, and crossing Strawberry Way;
- Proceeding up Strawberry Way across William Penn Place, which is an uncontrolled street crossing. Beyond William Penn Place, Strawberry Way is a smaller alley

with uneven and broken pavement and a variety of walking obstacles (see Figure 10*d*).

- Navigating two more curb ramps and a second uncontrolled street crossing at Strawberry Way and Smithfield Street; and
- Proceeding along Smithfield Street back to the ACCESS offices.

Along the way there are benches and natural resting areas (places where applicants can sit or lean to rest).

If it becomes obvious that the applicant cannot complete the full route, the PT has the option to shorten the route by taking one of the side streets before Grant Street. A route that is half the distance (0.25 mile) involves crossing at William Penn Place [see Alternate Route (Route One) in Figure 9].

In severe weather, the PT uses the hallways in the building to simulate an outdoor walk. Even in severe weather, ACCESS tries to have applicants at least complete one street crossing the crossing at Smithfield and 7th Avenue, which is just outside the entrance to the building.

Applicants with limited vision, but who are not legally blind, also participate in the indoor and outdoor functional assessments. Applicants who are legally blind are granted at least conditional eligibility and any conditions are developed using information provided by the applicant and professionals familiar with them. Similarly, determinations for applicants with severe psychiatric disabilities or seizure conditions that significantly affect their ability to travel independently by fixed route are made based on information obtained from the application, medical professionals, and the in-person interview. Applicants with less severe psychiatric disabilities or seizure conditions who also have a physical disability might be asked to participate in the indoor and outdoor functional assessment.

Unlike many other agencies that responded to the survey, ACCESS does not have a scale for measuring the weight of the applicant's mobility devices at its assessment center. ACCESS staff noted that vehicles in the system can accommodate up to 800 pounds and it is rare they encounter mobility devices that exceed this weight. Rather than ask all mobility device users to be weighed, ACCESS gathers information on an as-needed basis. If a large applicant using a power wheelchair applies, general questions about the person's weight are asked. The make and model of the wheelchair, as well as any add-ons such as extra batteries, are noted. ACCESS staff researches the weight of the mobility device online and calculates the combined weight of the applicant and the wheelchair. If the 800-pound maximum is exceeded, the applicant is alerted to the problem. Attempts are made to agree on ways that transportation can continue to be provided, such as using another mobility device when traveling by transit or having the person board separately from the mobility device. ACCESS does have a template on the floor of the indoor functional assessment area that is used to determine if mobility devices exceed the maximum width or length than can be accommodated on vehicles.

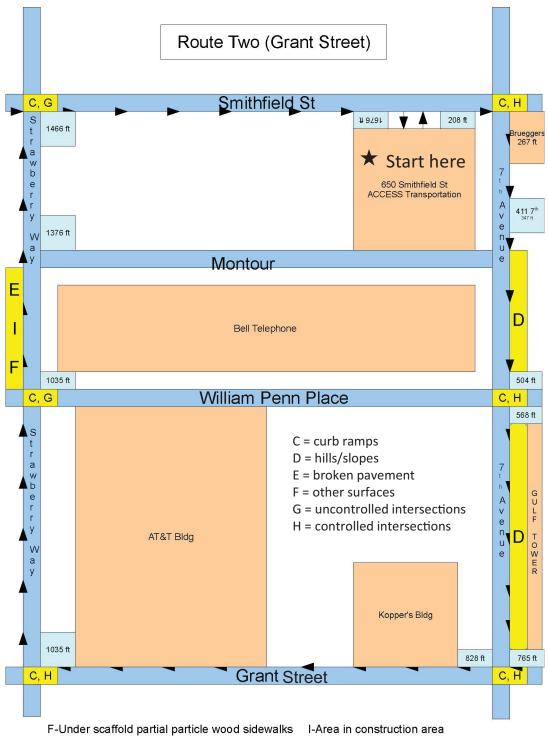


FIGURE 8 ACCESS' full 0.5 mile outdoor assessment route. (Courtesy: ACCESS Transportation Systems.)

Decision-Making Process

ACCESS was one of a handful of transit agencies that used in-person functional assessments to determine eligibility for paratransit services before the passage of the ADA. A simple test of whether riders could board and exit inaccessible buses using stairs was used. Individuals with physical disabilities were asked to participate in this assessment. Eligibility for riders with other types of disabilities was determined based on a paper application process.

It was therefore natural for ACCESS to consider continuing with in-person assessments after the passage of the ADA. Alternatives for expanding the prior assessment to cover all

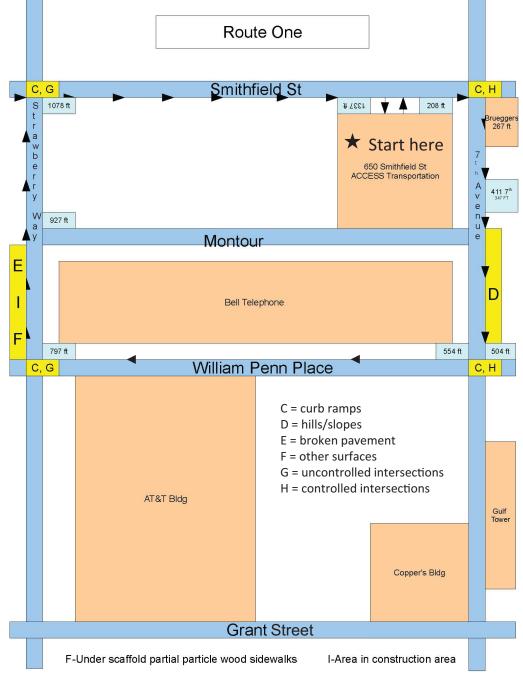


FIGURE 9 ACCESS' alternate 0.25 mile outdoor assessment route. (*Courtesy:* ACCESS Transportation Systems.)

categories of ADA paratransit eligibility were developed as part of the ADA paratransit planning process in 1991. The process included extensive outreach, public workshops, discussions with ACCESS's consumer advisory committee, and a public hearing. The input was largely in support of continuing an in-person process. The primary concern and request from the community was that the process be equitable and fair, and that all applicants be asked to appear in person, and not just individuals with physical disabilities. Because the development of the eligibility determination process was completed at the same time that the ADA paratransit plan was being developed, all aspects of ADA paratransit service were discussed together. Primary community concerns about the plan were: (1) that the service area not be reduced from all of Allegheny County to just the minimum required 0.75-mile corridors; and (2) that fares not be raised to the maximum allowed, which was twice the fixed-route fares. ACCESS and PAAC agreed that if the community



(c) (d) FIGURE 10 ACCESS' outdoor assessment route: (*a*) Controlled intersection at Grant and 7th Avenue; (*b*) Uncontrolled street crossing; (*c*) Curbs and uneven surfaces; (*d*) Uneven surfaces along Strawberry Way. (*Courtesy*: ACCESS Transportation Systems.)

supported thorough eligibility determinations they would attempt to continue to serve the entire county and preserve ADA paratransit fares similar to fixed-route fares. The agencies have been able to keep this agreement.

In 2002, ACCESS was one of the transit agencies selected by ESPA to assist with the development of guidance for in-person eligibility determination processes. ACCESS closely follows the guidance that was developed.

Multiple facilities were not considered during the planning process. Downtown Pittsburgh is the geographic center of Allegheny County and ACCESS staff noted that getting to the commercial business district rarely takes more than 30 minutes. One eligibility assessment site was considered adequate to serve residents throughout the area.

Build-Out and Operating Costs

ACCESS reported that the new props for its indoor assessment area were constructed with the assistance of Port Authority of Allegheny County (PAAC) maintenance and construction employees. Total cost for the indoor equipment and props came to \$25,000. The office space for the eligibility program was available within the larger ACCESS offices and minimal costs were incurred in the ensuing renovation.

Annual rent, utilities, and maintenance for the assessment program portion of the facility is approximately \$20,700.

Process Statistics and Outcomes

ACCESS makes about 725 ADA paratransit eligibility determinations each year. The relatively small number of determiACCESS finds 48.8% of all applicants to be unconditionally eligible, 28.6% to be conditionally eligible, 9.2% to be eligible for temporary service, and 13.4% to not be eligible.

Lessons Learned

ACCESS indicated that it has been generally pleased with the process. Staff also noted that there has been good community acceptance from the start, which can be attributed to the extensive outreach and community involvement that was conducted.

For many years ACCESS used low-cost indoor props in order to be as cost-effective as possible. This included a static bus lift and a simple plywood mock-up of a curb and curb ramp. The agency recently worked with PAAC to construct the more elaborate bus mock-up and curb/curb ramp mock-up shown in Figure 7. Greater applicant satisfaction and confidence in the process has been reported from those who have completed the functional assessment since the improved props were added.

ACCESS strongly believes that outdoor assessments in the real environment provide the most accurate picture of true travel abilities. With a substantial reliance on outdoor assessments, and limited indoor props, it can be a challenge to ensure thorough determinations when severe weather precludes outdoor walks; therefore, the experience and training of the PTs becomes critical when indoor assessments are done. Maximum reasonable walking distance must be estimated based on more limited and less stressful indoor walks, and the ability to navigate various surfaces must be deduced based on the Tinetti test. The ability to safely cross streets is the most difficult issue to determine using only indoor observations, which is why ACCESS almost always has applicants go outside briefly and cross one busy intersection, even in severe weather.

It is also important to plan for emergencies and develop a strong safety plan when doing outdoor functional assessments. The PTs who conduct assessments are given dedicated cell phones that ring immediately in the ACCESS offices and have no other purpose. The PTs try to ensure that the applicants do not venture so far on the outdoor course that they will find it difficult to return. However, this does happen on rare occasions. ACCESS keeps mobility devices on hand that can be used to assist applicants who start but cannot finish the outdoor route.

A logistical lesson that was learned from experience is that if the assessments are on the upper floors of a shared building it is important to have more than one elevator. Otherwise the process can be delayed and interrupted while waiting for elevators to become available. ACCESS staff also noted that it is important when in a leased office facility to be sure that restrooms are fully accessible and preferably located on the same floor and close to the eligibility determination area.

ACCESS has learned that the waiting area needs to be large enough to not only accommodate the maximum number of applicants expected at any time, but those who might accompany them. It is also important that the area be able to accommodate all applicants if there are issues with transportation and some have to wait for rides (or when others arrive early).

ACCESS also noted that it is important to ensure privacy throughout the process. The functional assessment area should be separate from spaces where other applicants or employees might be located. Interviews rooms and waiting rooms should not have a view of the functional assessment area.

Finally, ACCESS staff noted that keeping the process on schedule can be a challenge. Although ACCESS requires that applications be completed and sent in advance, which helps to plan the types of assessments that likely will be needed, interviews can run long and functional assessments that were not initially expected might have to be conducted. Some down time needs to be built into the scheduling of appointments. In addition, it can be helpful if the eligibility staff is crosstrained to assist with parts of the process.

TRI-COUNTY METROPOLITAN TRANSPORTATION DISTRICT, PORTLAND, OREGON

The Tri-County Transportation District (TriMet) has facilities for both indoor and outdoor functional assessments. TriMet utilizes FACTS and the MMSE for assessments of applicants with cognitive disabilities. A contractor assists with functional assessments. TriMet staff review applications, gather information from health care professionals familiar with applicants, conduct interviews, and make final determinations.

Eligibility Determination Process and Facilities

Individuals interested in applying for ADA paratransit eligibility are required to complete an application form. Applications can be requested from TriMet eligibility staff or downloaded from TriMet's website. Human service and disability agencies in the service area also have copies of application forms that they make available to clients and program participants. TriMet works closely with these agencies to ensure that they have the latest version of the application materials.

Part of the application form requests the name of a health professional who can be contacted to acquire information about the applicant's disability and functional abilities. The form also includes a release of such information that is to be signed by the applicant.

Two TriMet administrative staff (accessible transportation program assistants) review the application forms once they are received. If the Medical Release Forms are complete, they immediately (same day) fax forms to the named health professionals requesting verification of disability and information about functional ability. The goal is to obtain such information in all cases and to have this information prior to the time of in-person interviews and functional assessments.

The administrative staff also assigns applications to one of four eligibility coordinators (ECs). The ECs review the application form and enter the information into TriMet's eligibility computer module.

Once the information has been entered, a full-time staff person (eligibility scheduler) contacts the applicants to arrange in-person interviews and assessments. The interview and assessment are briefly described so the applicants will be prepared for a possible outdoor walk. Applicants are also asked to bring the mobility device or devices that they use when traveling within the community. Applicants are also asked if they will need transportation; if yes, this is arranged through TriMet's ADA paratransit service.

All new applicants are requested to participate in an interview and assessment as needed. Most riders who are recertifying are also asked to appear in person; however, for some riders a second in-person interview and assessment is waived and recertification only involves submitting an updated application form. TriMet only recently implemented this simplified recertification process for riders whose functional abilities are not likely to change. The agency indicated it will most likely expand the simplified process in the future.

When applicants arrive they are greeted by an Accessible Transportation Program (ATP) assistant and the appropriate EC is also alerted. TriMet indicated that applicants are typically assigned to the EC that originally reviewed the application form, but that for scheduling flexibility any EC can meet with any applicant at this time.

The ECs greet the applicants and proceed to an area where they can take photos and measure and weigh mobility devices (as needed). This is followed by the interview. If an applicant has a cognitive disability, the EC may also conduct the MMSE.

Based on information in the application form, obtained from medical professionals, and obtained in the interview, ECs decide if functional assessments are needed. If so, the ECs notify TriMet's functional assessment contractor— Medical Transportation Management (MTM). MTM provides an on-site manager and two assessment evaluators (AEs). One of the AEs escorts the applicant to where functional assessments are conducted.

Applicants with physical disabilities complete an indoor assessment, as needed, followed by an outdoor assessment.

Applicants with cognitive disabilities, primarily those with intellectual disabilities, are asked to participate in the FACTS test. Some applicants with vision disabilities also participate in indoor or outdoor assessments. Determinations for persons with significant vision impairments are made based on information they themselves provide and verification of disability and abilities from medical professionals. Similarly, some applicants with psychiatric disabilities and seizure conditions may also be asked to participate in assessments, particularly if there is an indication of some independent travel. However, determinations for applicants with significant psychiatric or seizure conditions are made based on information from the application forms, interviews, and a professional(s) familiar with their medical history.

TriMet's Transit Mobility Center is located across from the agency's downtown transit mall in Portland. It is notable that TriMet carefully chose the name of the facility to emphasize that the goal of the process is to assess broader transit mobility skills, rather than just determine eligibility for ADA paratransit services. The facility has two distinct areas; one is the area that houses TriMet staff and is used to conduct interviews, the other is where indoor functional assessments are conducted and that houses MTM staff. Figures 11–13 show the floor plans for these two areas. Photos that show portions of these areas, with letter codes are provided as Figure 14 (a–f). A summary of TriMet staffing is also provided on Figure 11.

As shown in Figure 11, the main entrance of the Center is off NW Davis Street. The TriMet area includes administrative offices (A), a reception area and waiting room (B), a restroom (C), five offices for the ECs (D), an area for measuring and weighing mobility devices (E), a kitchen/break area (F), and banks of file cabinets for file storage (H).

The waiting area has 15 chairs and there are three others nearby—adequate seating for the number of applicants scheduled plus others who might accompany them. The waiting area has bottled water, magazines, and a telephone. A TV wall monitor shows classic shows such as *Little House on the Prairie* and *I Love Lucy*, which are intended to help applicants relax before their interview and assessment.

To access the assessment area, applicants exit on NW 5th Avenue and proceed about one-half block up the avenue. The main entrance to the assessment area is on the same block, just up NW 5th Avenue (see Figure 12). The MTM administrative space in the assessment area includes a reception/waiting area (A), four offices for the manager and two AEs (B), open offices for future expansion as needed (C), an interview room (D), a conference room (E), and a kitchen/break room (F). The large open area is used for indoor assessments.

The location of indoor assessment equipment and props is shown in Figure 13. Applicants wait in the reception area just inside the main entrance. Interviews are conducted in the designated interview room, the conference room, or one of the staff offices (depending on the schedule and number

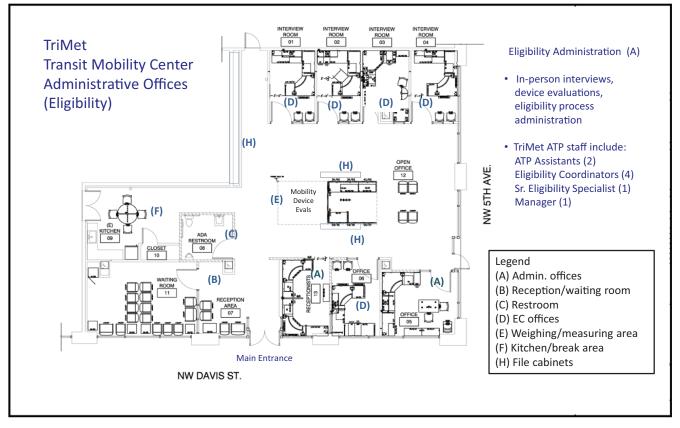


FIGURE 11 TriMet Transit Mobility Center administrative offices. (Courtesy: TriMet.)

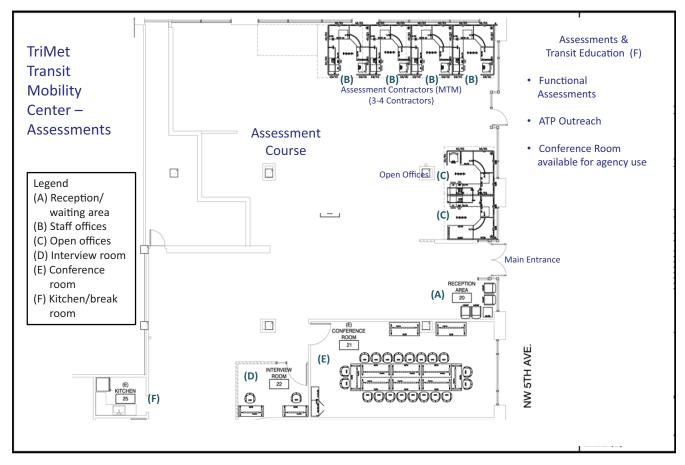
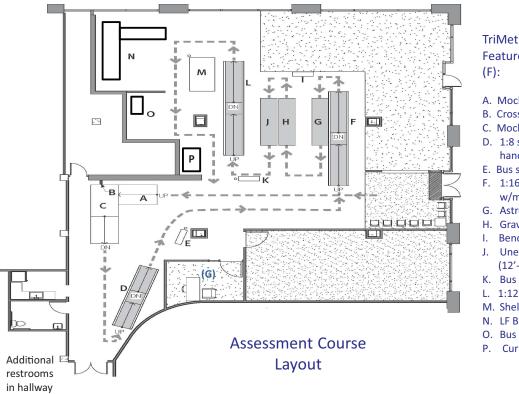


FIGURE 12 TriMet Transit Mobility Center contractor administrative area. (Courtesy: TriMet.)

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TriMet Transit Mobility Center Features of Assessment Course

- A. Mock curb cut
- B. Crosswalk signal
- C. Mock sidewalk and curb cut
- D. 1:8 slope (16'-0") w/metal handrails
- E. Bus stop with bench/pole
- F. 1:16 slope (24'-0" long) w/metal handrail
- G. Astroturf surface (12' 0")
- H. Gravel surface (12-0")
- Bench (NIC)
- Uneven pavement surface (12'-0'')
- K. Bus stop with bench and pole (NIC)
- L. 1:12 slope (24'-0" long)
- M. Shelter with bus stop pole
- N. LF Bus mock-up with curb
- O. Bus lift and stairs
- P. Curb step-up

FIGURE 13 TriMet Transit Mobility Center indoor assessment course layout. (Courtesy: TriMet.)

of applicants). The Tinetti Balance and Gait test is used to ensure that it is appropriate to ask applicants to complete the assessment course. The indoor assessment then includes:

- Navigating to and then up a curb ramp (A)
- Activating a pedestrian traffic control device at the top of the curb ramp (B)
- Going down a curb ramp (C) and navigating a simulated street crossing
- Ascending an 8-ft ramp and descending an 8-ft ramp with a 1:8 slope (D)
- A bus stop with a bench is then placed after this ramp if applicants need to rest (E)
- Walking to and then going up and down a 12-ft ramp with a slope of 1:16 (F)
- Navigating a 12-ft area of Astroturf (G)
- Navigating a 12-ft area of gravel (H)
- Another bench is then located at this point (I)
- Navigating 12 ft of uneven pavement (J)
- Another rest area is here (bus stop with bench) (K)
- Going up and down a 12-ft ramp with a 1:12 slope (L)
- Walking to and then boarding a low-floor bus mock-up by means of a ramp, navigating to and from a seat or securement area, and exiting the bus mock-up (N)
- Navigating on and off a bus lift and up and down bus stairs (O)
- Stepping up and down a 6-in. curb (P).

As noted earlier, TriMet asks certain applicants with cognitive disabilities to complete the FACTS test (primarily those with intellectual disabilities, which is the population for which FACTS was developed and validated). Part of the test is administered in the Interview Room. The wayfinding portion of the test is set up along the indoor route. This is shown in the photo collage as Figure 14f.

If applicants successfully complete the indoor assessment and demonstrate even greater abilities, they participate in an outdoor assessment. The outdoor route is shown in Figure 15. There are several outdoor assessment options. The standard outdoor assessment is as follows:

- Up NW 5th Avenue across NW Everett (controlled crossing) to NW Flanders Street (A);
- Cross NW 5th Avenue at NW Flanders (controlled crossing) (B);
- Down NW 5th Avenue, across NW Everett (controlled crossing) to NW Davis (C);
- Along NW Davis, crossing NW 4th Avenue (uncontrolled) to NW 3rd Avenue (D);
- Up NW 3rd Avenue to NW Everett (E);
- Down NW Everett, across NW 4th Avenue (uncontrolled) and NW 5th Avenue (controlled) to NW 6th Avenue (F);
- Down NW 6th Avenue to NW Davis (G);
- Along NW Davis to NW 5th Avenue (H); and
- · Back in the main entrance of the Transit Mobility Center (TriMet offices) (I).

The standard outdoor course is 0.5 mile in length (2,640 ft) and passes by or near the main entrances of the Center at





(b)



(c)



(**d**)

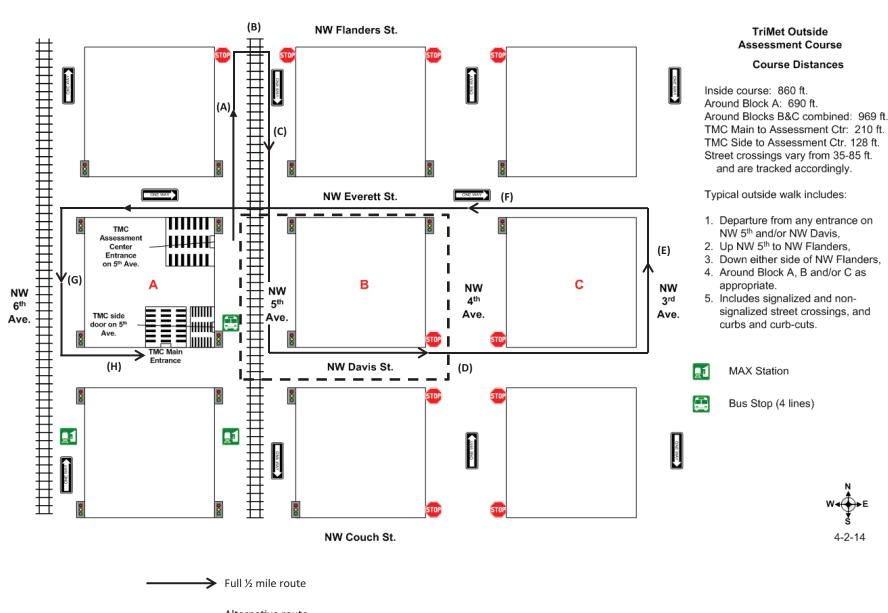


(e)



(**f**)

FIGURE 14 TriMet Transit Mobility Center: (*a*) Waiting area with TV; (*b*) Mobility device measurement area; (*c*) Ramps and various surfaces; (*d*) Low-floor ramp-equipped bus mock-up; (*e*) Bus lift and stairs mock-ups; (*f*) FACTS Wayfinding posters along route. (*Courtesy*: TriMet.)



- - - - · Alternative route

FIGURE 15 TriMet outdoor assessment course. (Courtesy: TriMet.)

several points in case the assessment needs to be terminated. There are also benches where applicants can rest along the way.

If AEs determine from the indoor assessment that an applicant can travel some additional distance, but not the full outdoor route, an alternative route is used that loops one block around the downtown transit mall—denoted by the dotted line in Figure 15.

A third option, as appropriate, is to ask applicants to complete a combined bus and light rail trip. At the end of the standard route, applicants can board one of several TriMet buses that travel down NW 5th Avenue along the light rail tracks. After four to six blocks they can exit at a light rail station, wait for and board the light rail train, and return to a station that is one block from the main entrance to the Center (below NW Davis).

If AEs believe that an applicant has the ability to always travel by fixed route, and are likely not ADA paratransit eligible, they will typically have them complete the indoor course, the standard outdoor course, and also the trip by bus and train.

Decision-Making Process

Prior to the implementation of the current in-person process in April 2010, TriMet made eligibility determinations based on a paper application that only obtained information from the applicants. Verification of disability and information from a medical/health professional was optional. There had been a steady growth in riders and ridership. The rising cost of the service raised concerns about long-term sustainability. TriMet also observed changes in the way that eligibility determinations were being made across the country, with increased use of in-person interviews and functional assessments.

An internal working group, which included staff from the operations, legal, accessibility, and finance departments, was established in 2008 to consider changes to the process. This group reviewed the current process, reviewed the process recommended by ESPA, and examined processes at other transit agencies. Following five meetings over four months the working group presented a recommendation to the Executive Director for review and approval by the internal leadership team. The recommendation to implement an in-person process was approved at the end of 2008.

TriMet next took the plan to its Committee on Accessible Transportation (CAT). Together with CAT it convened a public workshop. Extensive outreach was done to riders and local disability and social service agencies. Approximately 90 people participated in the workshop. Community input was gathered from CAT and the workshops during the first six months of 2009. A final plan with the community and CAT support was finalized in July 2009.

The Transit Mobility Center was built and an RFP process conducted for an assessment contractor from July 2009 through the end of the year. TriMet staff and contractor staff moved into the Center in January 2010 and began conducting interviews and assessments for new applicants only in April 2010. Recertification of current riders began a month later, in May 2010, once staff felt confident with the new process. Recertifications started slowly, about 100 per month with the most frequent riders, and were gradually increased (currently there are about 380 recertifications per month).

A key part of the plan was to build the Transit Mobility Center in-house in a building leased by the transit agency. TriMet believed that doing this, rather than contracting out to build the facility, was less expensive. The maintenance shop constructed the bus mock-up and other props using spare bus parts, relatively basic materials, and existing staff. Portland also donated the traffic controls used in the simulated street crossing.

Build-Out and Operating Costs

The build-out of the entire facility, including the TriMet staff offices, the contractor staff offices, and the indoor assessment area cost \$250,530 and, as noted earlier, took about six months to complete.

Annual operating costs, including rent, utilities, and facility maintenance costs are approximately \$144,000.

Process Statistics and Outcomes

About one-half of all decisions are made at the end of the interview without functional assessments and one-half include assessments. Thirty to 50 applicants each month complete the indoor assessment, the outdoor assessment, and also a trip on the bus and light rail. These tend to be applicants that are found to be able to use fixed-route transit for most or all trips.

TriMet reports making about 3,300 eligibility determinations each year. TriMet finds about 58.7% of applicants to be unconditionally eligible and 26.3% to be conditionally eligible. Temporary eligibility is granted to about 11.6% of applicants, and about 3.4% of applicants are determined to be able to use the fixed-route service for all trips and not eligible for paratransit.

Lessons Learned

At the outset of the new process, the assessment contractor hired PTs and OTs to serve as AEs. Although these types of professionals are preferred, over time the contractor has found it difficult to attract and keep the necessary PTs and OTs. TriMet believes that most PTs and OTs prefer to work in rehabilitation rather than only perform ability assessments. TriMet and the contractor have actively recruited PTs and OTs, but indicated that other health professionals are also used. One of the current AEs is a recreational therapist and qualified travel trainer; the other two AEs have experience as emergency medical technicians and other work experience with people with disabilities.

TriMet indicated that they have been surprised by the number of service providers, caregivers, and others who accompany applicants to the interviews and assessments. The in-person process has proven to be an excellent opportunity to educate riders and the broader support community about ADA paratransit service—what it is and what it is not. The TriMet Eligibility Manager believes this public education has been as beneficial as the improvements in the accuracy and thoroughness of the determinations.

Scheduling appointments with applicants has proven to be one of the more challenging parts of the process. TriMet and the assessment contractor have the resources to be able to offer appointments in only two or three days; however, many applicants would like to schedule appointments several weeks in advance.

The process through which information is gathered from medical/health professionals has also evolved. TriMet started by faxing two-page forms to these professionals; however, getting this level of detail was sometimes difficult. A condensed one-page form was then developed. TriMet has had more success requesting basic disability verification information at the outset and then following up if more detailed information is needed.

The vast majority of applicants (approximately 90%) use TriMet's ADA paratransit service to get to and from the Center. This is the case even though there is excellent access to fixed-route transit—the downtown transit mall is just across the street—and there is also plenty of parking in the area. To accommodate the number of paratransit vehicles coming and going from the Center, TriMet worked with the city to get a dedicated bus stop in front of the building. This has been important for minimizing pick-up and drop-off delays.

TriMet indicated that it has been pleased with the new process. Staff also noted that the community appears to have accepted the new process. The agency credits much of the success to a positive working relationship with the assessment contractor. A sound cooperative working relationship has been developed that has allowed TriMet to make changes and improvements to the process as issues are identified.

Finally, while building the Center in-house and leasing the facility has proven to be cost-effective, TriMet indicated that in the future it may have limited interest and competition for the assessment contract. Because the contractor is only asked to supply limited staff, not to build-out and provide the facility, the contract is relatively small. There has been less local and national interest in the contract from PT and OT firms than TriMet had hoped.

CENTRAL OHIO TRANSIT AUTHORITY, COLUMBUS, OHIO

The Central Ohio Transit Authority (COTA) is an example of a transit agency that conducts eligibility determinations in an indoor environment by transit agency staff. It is also an example of a combined assessment that makes observations of physical, cognitive, and sensory abilities along a common indoor course.

Eligibility Determination Process and Facilities

Individuals interested in applying for ADA paratransit eligibility are instructed to call COTA to request an application or to download a copy of the application from COTA's website. Part of the form is completed by the applicant and part must be completed by a medical professional familiar with the applicant.

After completing the application, the individual schedules an interview and assessment. At this time, COTA staff confirms that the application (including the professional verification) has been satisfactorily completed and reminds the applicant to bring the form with them to the assessment. Staff also gathers some basic information about disability, provides information about the interview and assessment so that the applicant knows what to expect, and asks the applicant to bring any mobility device they may use when traveling in the community. Applicants are also asked if they need transportation to and from the assessment center. If transportation is needed, it is arranged with the COTA paratransit operations center.

All new applicants are asked to participate in an interview and functional assessment. Some individuals are granted "permanent" eligibility, and are able to recertify using a simplified paper application and do not need to appear in-person. Riders not granted permanent eligibility are also asked to appear in-person for interviews and functional assessments. COTA is considering a simplified recertification process that would require completion of an updated application form, but not participation in another assessment, for riders whose functional abilities are not likely to change.

The assessment center is located with the ADA paratransit garage and operations center. Two floor plans are provided as Figures 16 and 17. Figure 16 shows the entire facility, including administrative and storage areas. Figure 17 provides more detail on the assessment course and props and indicates ramp lengths and slopes, types of surfaces, and other design information. Figure 18 (a-d) is a collage of pictures showing certain parts of the course.

As indicated in Figure 16, the reception area and lobby are located outside the main assessment area (A). The waiting area has six chairs (two oversized and four regular), a television that shows a video featuring COTA's accessible fixed-route and ADA paratransit services, magazines, and community service brochures provided by local agencies.

The facility also includes a restroom (B), two offices for COTA's eligibility administrators (EAs) that also function as interview rooms (C), an area with a scale for assessing the size and weight of mobility devices (D), an Ohio-required lactation room (for mothers who need to breast feed their infants (E), a recovery room with a large comfortable chair and water for individuals who need to rest during or after the

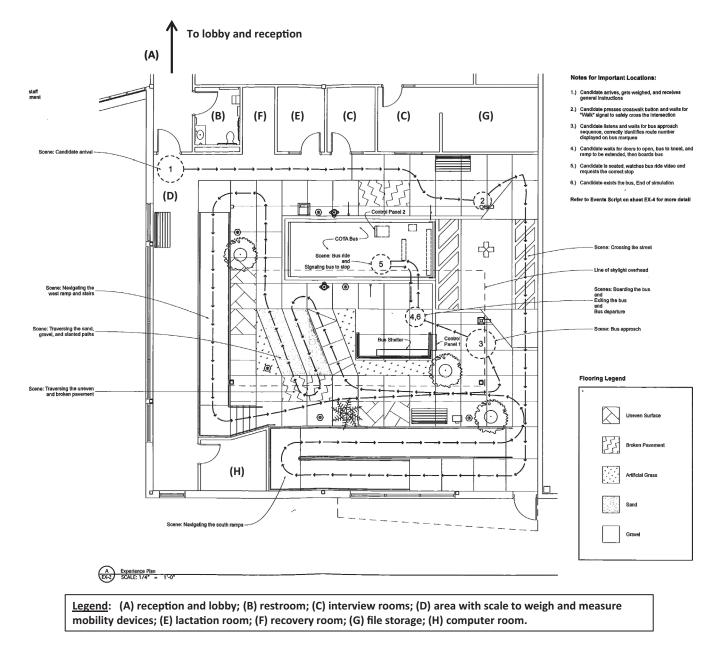


FIGURE 16 Floor plan of COTA eligibility center. (Courtesy: COTA.)

assessment (F), a file storage area (G), and an electronics and computer room (H) for the technology that controls the electronics along the assessment course. The indoor course, where assessments are conducted, is in the central part of the facility. COTA administrative offices, including the office of the eligibility manager, are located outside the assessment area.

Visitor parking is provided at the building for applicants who choose to arrive by car. Fixed-route transit service is also nearby; however, COTA indicated that the building is in an industrial area and there are no sidewalks from nearby bus stops to the facility.

When applicants arrive, they are greeted by a receptionist who collects the completed application form and any other documentation. This material is given to one of the two EAs who conduct the assessment. A photo of the applicant is also taken and used to make a photo ID if the applicant is determined to be eligible.

After reviewing the application form and any other information provided, the EA greets the applicant, proceeds to the assessment course area, and provides an overview of the process and course. If the applicant is using a wheelchair, the EA records its size and weight. The EA then takes the applicant through the indoor assessment course. The elements and flow of the course are shown in Figure 16. Ramp specifications and other prop descriptions are included in Figure 17. The following is a description of the course:

• The assessment begins with a short walk (about 50 ft) that includes ascending a 6-ft ramp with a 1:12 slope.

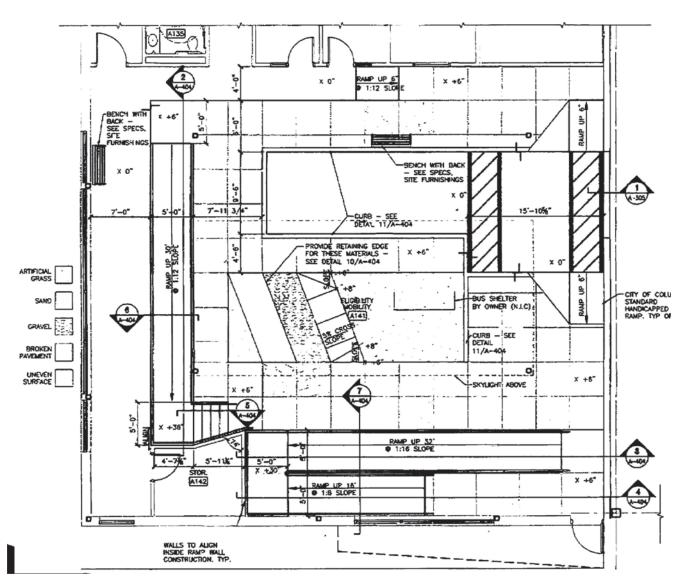


FIGURE 17 Detail of COTA indoor assessment props. (Courtesy: COTA.)

- At the top of the ramp is the start of a simulated street crossing with traffic controls. The applicant activates the pedestrian crossing signal, waits for the light to change, and crosses the street. As shown in Figure 18*a*, the area is painted to resemble a streetscape.
- Next, the applicant walks up a 16-ft ramp with a 1:8 slope, turns and descends a 32-ft ramp with a 1:16 slope.
- The applicant then walks to and navigates across an area with a variety of surfaces, including artificial grass, gravel, broken and uneven pavement, and sand.
- Next, the course loops around the facility, up a 30-ft ramp with a 1:12 slops, down five stairs, and to an area that is a simulated bus stop with a shelter, bench, and modified low-floor ramp-equipped bus.
- If the applicant has a cognitive or vision disability, the EA uses a control panel at the bus stop to program the sequenced arrival of several buses. The bus mock-up has light-emitting diode (LED) signs that respond to the

programmed sequence. The EA tells the person to look for a particular bus. The applicant identifies the correct bus, boards the bus, and navigates to a seat or securement area. The EA then shows the applicant a photo of where they should disembark. The inside of the windshield of the bus is a television screen onto which videos of actual routes can be projected. Five different routes were filmed and any of the five can be played on the windshield to simulate travel along the route. When the applicant sees the landmark described, she/he signals to exit, and then exits the bus. This portion of the assessment was adapted from the FACTS test.

- If the applicant has a physical disability and no cognitive or vision disability, she/he simply boards the bus, navigates to and from a seat or securement area, and exits the bus.
- The standard assessment is completed once the applicant exits the bus.





FIGURE 18 COTA Indoor Assessment Course (*a*) Simulated street crossing; (*b*) Half-bus with bus stop area and different surfaces; (*c*) Controls for bus stops routes; and (*d*) TV in windshield of bus. (*Courtesy*: COTA.)

If the EA still has questions about endurance and maximum walking distance, the applicant is requested to walk certain portions of the course again. Additional routes have been measured to simulate walks of up to 0.5 mile (2,640 ft).

Once the assessment is complete, the applicant returns to an office/interview room where an interview is conducted. Unlike processes set up by other agencies, COTA conducts the interview after the assessment is completed, which allows the EAs to discuss any issues observed along the course.

Most applicants are asked to complete the assessment course, including applicants with physical disabilities, mild to moderate cognitive disabilities, and low vision. If the EA determines from the application information or during the initial introduction that an applicant has significant cognitive or vision disabilities and cannot independently wayfind,

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the assessment course is not used and the EA proceeds directly to an interview. The course is also not used for applicants with significant and uncontrolled seizure disorders or psychiatric disabilities. Such determinations are based on information from the application, the interview, and from health professionals familiar with the applicant.

COTA has two full-time EAs, one full-time mobility coordinator who schedules appointments and arranges transportation, and one part-time mobility coordinator who does intake. There is also one full-time program manager. Therefore, in total, there are 4.5 full-time employees dedicated to the eligibility determination process.

COTA does not require that the EAs be PTs or OTs. The two EAs at the time of the study were a clinical counselor and an individual with a Master's Degree in human service management and human ecology.

Decision-Making Process

Prior to implementing the current process, COTA used a paper application and follow-up telephone call with applicants or professionals, as needed. If additional information was needed, some applicants were asked to participate in interviews conducted by the local Goodwill Industries. There were no functional assessments.

Over time, COTA realized that it was difficult to make thorough determinations based primarily on a paper application, and the current process was implemented so that better determinations could be made. Rising demand and cost was not a major factor in the decision; it was more that COTA wanted to be able to make better determinations.

COTA spent about two years investigating alternative processes and discussing them with the community. It contacted and visited several agencies that had implemented in-person processes. During this time, COTA worked closely with its Accessible Transportation Advisory Committee (ATAC), which is made up of riders, as well as its Mobility Advisory Board (MAB), comprised of local agency representatives. Both committees provided input on the new process and supported the final plan to build an assessment center.

COTA and its advisory committees always assumed that a single assessment center would be sufficient. Given the size of the service area, multiple facilities did not need to be considered.

In addition to local input, COTA used the guidance provided by ESPA on the recommended elements of a functional assessment. The design work was done by a local architectural firm. ATAC was particularly involved in reviewing plans as they were developed and advising COTA as the facility was being built.

Build-Out and Operating Costs

COTA's eligibility center covers 3,276 ft², about 60 ft by 60 ft. COTA built the operations center from the ground up and incorporated the eligibility center. The pro-rated building purchase cost for just the eligibility assessment area was estimated by staff to be about \$690,000. Build-out of the assessment center cost \$147,980, which included everything except the modified bus and the murals on the walls of the Columbus streetscape. The bus was donated by Ohio State University. COTA maintenance staff made modifications to the bus to make it exactly like buses in the COTA fleet. The bus—originally a 40-footer—was also shortened by cutting it in thirds and welding the front and back sections together to make a half bus.

Facility operating costs are not allocated separately. Based on the portion of the total building space and on the total building costs, COTA estimated that annual facility operating costs were approximately \$12,000.

Process Statistics and Outcomes

COTA makes approximately 2,000 determinations each year. Most recently, 70.2% of all applicants were found to be unconditionally eligible; 19.5% to be conditionally eligible; 9.8% to be eligible for temporary service; and 0.5% to not be eligible.

Experiences and Lessons Learned

COTA staff indicated that the agency is pleased with the eligibility center and the switch to in-person interviews and assessments. They also noted that the community largely accepts the new process. Little push-back was received from the community when the change was made, which COTA attributes at least in part to the extensive public input and involvement. Because the new process was discussed for about two years, most riders were well aware of the coming change.

COTA noted that a small percentage of applicants have complained about having to complete the assessment course and a few have refused to participate. This happens most often with applicants who have ambulatory disabilities who believe that completing the course will be a significant effort. In such cases, the EAs conduct interviews and follow-up with medical professionals to verify the disability and extent of functional limitation. With few exceptions, most of these applicants do have significant functional limitations and are found to be eligible.

COTA noted that it has received some comments from the community about the indoor assessment not fully simulating the real environment—particularly the impacts of severe weather and real-world street crossings. To compensate for these limitations, COTA focuses on these issues in the interviews. In terms of lessons learned, the following two things were mentioned:

- Two waiting areas—one for arriving applicants and one for applicants waiting for return rides—would be helpful. With only one waiting area, there can be significant interaction between those who have just completed the process and those waiting for interviews and assessments. Minimizing this interaction would be helpful.
- COTA indicated that in hindsight it can see the benefit of having an outdoor route as well as indoor props that simulate travel. It would like to add an outdoor route but is challenged by the location. Being located with the paratransit operations center means that the location is in a more industrial area and there are no sidewalks.

It was estimated that between 80% and 90% of applicants request assistance with transportation. If transportation is needed to and from the center, it is arranged using the regular ADA paratransit service; something that has worked well. There have been some minor issues with late drop-offs; however, when this occurs, staff at the center contacts the paratransit operations staff and reschedules the return trip to a slightly later time. There is parking for private automobiles at the facility, but relatively few applicants arrive by car. There are also fixed-route bus stops near the center; however, as noted previously, there are no sidewalks to or from the bus stops.

VALLEY METRO, PHOENIX, ARIZONA

The Regional Public Transportation Authority (or Valley Metro) utilizes both indoor and outdoor functional assessments, as well as the FACTS test to make determinations of ADA paratransit eligibility. It has also developed one of the more extensive and elaborate facilities for conducting indoor assessments. Contractor (C.A.R.E. Evaluators) staff is used to complete most process functions; however, Valley Metro staff makes final determinations and prepares the final documentation for all decisions.

Eligibility Determination Process and Facilities

Individuals must first complete a brief, two-page application form that requests general information about disability and mobility aids. The name of a medical professional who can be contacted on an as-needed basis for verification of disability is requested, but not required. The form can be requested by contacting the eligibility program, can be downloaded from Valley Metro's website, or can be completed online and then printed. Applicants then bring the completed form with them to the interview. Applicants can also complete an application over the phone, which is then signed when they come in.

Once individuals have completed the form, they call the eligibility program to schedule an interview and assessment. During this call, contractor staff requests general information about disability and mobility aids, provides a brief overview of the process so applicants come prepared for an outdoor walk, asks individuals to come with the mobility aid they use when traveling in the community, confirms that the application form has been completed, and reminds people to bring the form with them. Staff also asks if transportation is needed to and from the Mobility Center. Because the Center is on a light rail line and several bus routes, fixed-route options are also available.

ADA paratransit service is decentralized throughout most of the area, with several cities operating services. Multiple transfers can be required to travel across the region, which can be cumbersome to arrange. For this reason, rather than using the local ADA paratransit service, Valley Metro has a contract with a local transportation company to provide service to and from the Mobility Center. Approximately 75% of applicants request transportation.

All new applicants are required to appear in-person for an interview and functional assessment as needed. Riders whose functional abilities are not likely to change over time (which is determined as part of the initial assessment) do not need to return to be recertified, but only to submit an updated application form.

The Mobility Center is located on the first floor of an office building at the corner of 45th Street and E. Washington Street in East Phoenix. As noted previously, it is convenient to both the new light rail service and to several bus routes. A floor plan of the Center is provided as Figure 19 and a collage of photos of the Center is provided as Figure 20 (a-d).

Applicants enter the Mobility Center from the building's main lobby. They are directed to a check-in area that is just past the waiting rooms (A in Figure 19). At check-in, the completed application is collected, a photo is taken, and the applicant is asked to review and sign several waivers—one giving permission for the assessment and a second acknowl-edging that they did not provide the name of a medical/health professional familiar with them (if this is not included on the application).

Applicants are then directed to the arrival waiting room (B). There is a second waiting room for applicants who have completed the process and are waiting for a return ride home.

Applicants are assigned to one of the evaluators and the application is provided for their review. The evaluator greets applicants and directs them to one of the offices where interviews are conducted (C). If an applicant has indicated a cognitive disability, locating the correct office is part of the assessment. Offices have numbers similar to bus routes (e.g., 91A) and applicants are asked to identify the correct room. Evaluators decide based on information from the application and interview whether to conduct one or more functional assessments. For applicants with cognitive disabilities

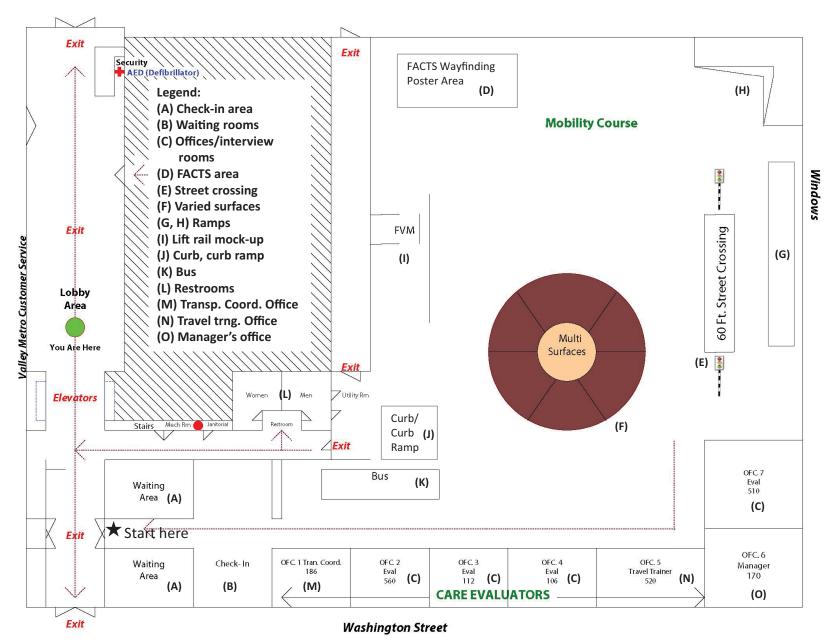


FIGURE 19 Floor plan of Valley Metro Mobility Center. (Courtesy: Valley Metro.)



(a)

(b)



(c)

(d)

FIGURE 20 Valley Metro's Mobility Center (*a*) Mobility Center from E. Washington Street; (*b*) Interior from ramp area (H) toward light rail (I) and offices; (*c*) Full-size bus and boarding area (K); and (*d*) Boarding low-floor ramp-equipped bus. (*Courtesy*: Valley Metro.)

this might include the FACTS test. Part of the FACTS test is conducted in the interview room and part—the wayfinding exercise—is conducted in the space marked (D) in Figure 19. A simulated street crossing (E) is also included along the way.

If an applicant indicates a physical disability, baseline pulse and oxygen levels are recorded using a pulse oximeter. A physical functional assessment is then conducted, which includes the following indoor elements:

- Navigating across several different surfaces—gravel, grass, uneven pavement (F).
- Activating a pedestrian traffic light and completing a 60-ft (six lane) simulated street crossing (E).
- Navigating up and down a 30-ft ramp with a 1:12 slope (G).
- Navigating up a 16-ft ramp with a 1:8 slope and then down a 30-ft ramp with a 1:16 slope (H).
- Using an automatic fare vending machine at a mock-up of a light rail platform and stations (I).

- Navigating a curb and curb ramp to reach a mock-up of a bus stop (J).
- Boarding and exiting a ramp-equipped, low-floor bus and getting to and from a seat or securement area (K).
- Walking other pathways within the center to reach a total distance of 0.25 mile.

In addition to the spaces and props indicated earlier, the Mobility Center includes accessible restrooms (L), an office for the Transportation Coordinator (M), a travel training office (N), and an office for the contractor's on-site manager (O). Areas for lunch or breaks are provided in other parts of the office building.

If applicants complete the indoor course, evaluators decide if an outdoor assessment is also appropriate. Approximately 45% of all applicants are asked to complete the indoor route, and about 12% are asked to attempt the outdoor route (or about one in four who complete the indoor route). Valley Metro has a policy of not undertaking outdoor assessments if

the temperature is above 105°F. The outdoor route is shown in Figure 21 and includes the following:

- Exiting the building and navigating an uncontrolled crossing of N. 45th Street at E. Washington Street (A in Figure 21).
- Proceeding down E. Washington Street and crossing 44th Street—six-lane controlled intersection (B).
- Crossing the westbound lanes of E. Washington Street (three lanes controlled) to reach a light rail station located in the median (C).
- Re-crossing the westbound lanes of E. Washington Street and N. 44th Street (C and B).
- Walking along a sidewalk on the grounds of a hotel and office building complex (D).
- Walking along DuPont Circle (E) and then navigating an uncontrolled crossing of N. 45th Street back to the Mobility Center.

Valley Metro employs one full-time eligibility program coordinator who reviews information provided by applicants and contractor staff, makes final determinations, and prepares and sends determination letters. The coordinator also oversees and manages the eligibility contractor.

CARE Evaluators, the contractor, employs a full-time manager, a full-time intake receptionist, a full-time transportation coordinator, two full-time evaluators, and one half-time evaluator.

Valley Metro's RFP for an eligibility contractor initially specified that staff conducting assessments be either PTs or OTs. During the procurement process, this was expanded to PT assistants, OT assistants, or persons having a medical, psychology, or sociology background. Current evaluators have backgrounds in sociology and psychology; the manager has a medical background.

In addition to the eligibility determination staff, the contractor has one full-time travel trainer and one part-time travel training assistant; both are located at the Mobility Center. If applicants indicate an interest in travel training, they are introduced to one of the travel training staff for follow-up. Travel training staff also train individuals identified through other outreach efforts.

Decision-Making Process

Before implementing the current in-person process, Valley Metro made ADA paratransit eligibility decisions using a paper application, supplemented by professional verification and follow-up with applicants and named medical professionals. Although the process had reasonable outcomes, Valley Metro noted the shift in the industry in the early 2000s to a greater use of in-person processes. A study of the ADA paratransit service, including the eligibility process, was commissioned in 2006. Several public meetings and workshops were sponsored as part of the study. One of the study recommendations was to consider using in-person interviews and functional assessments to make eligibility determinations. The Valley Metro Board supported the recommendation; however, some in the community were concerned about a change in the process. Valley Metro staff continued to meet with riders and agencies from 2007 to 2009 to discuss alternatives. In 2009, Valley Metro visited transit agencies in Las Vegas, Los Angeles, Orange County (California), and Salt Lake City to review the in-person processes implemented by these agencies. Information from these systems was shared with the community as the discussion about eligibility continued.

Several benefits of an in-person process were identified during the public input process. With more thorough and accurate determinations it was agreed that the standard term of eligibility could be extended from three to five years. It was also agreed that many riders would only need to appear in person one time and that a simplified recertification process could be used for those whose functional abilities were not likely to change. Finally, Valley Metro agreed to implement free fixed-route service for riders who were determined ADA paratransit eligible. Free fixed-route fares had been under consideration for some time, but there was concern that the program would significantly increase the number of paper applications received. An in-person eligibility determination process would help ensure that people did not apply and become eligible just to get the free fixed-route service.

Over time, more riders and agencies began to support the idea of an in-person process. Some of the community concern was also addressed with continued meetings and discussion. A tipping point came when Arizona Bridge to Independent Living, the area's independent living center, expressed its support for a new process.

In 2010, Valley Metro developed an RFP for an eligibility contractor and began its search for a location for the Mobility Center. The contractor selected had experience in building eligibility facilities in Los Angeles and San Mateo (California) and worked closely with Valley Metro on the final design. The new Mobility Center was opened and the new in-person eligibility process began being used in 2011.

Multiple eligibility centers were considered during the public input process. Valley Metro's ADA paratransit service area is very large—almost 1,000 square miles. Three distinct areas are served; the Phoenix/Scottsdale area, the East Valley, and the West Valley. A decision was made to have one primary center because of the added cost of building and staffing several centers. Possible inconsistencies in determinations with different staff in separate centers were also raised during the planning process. To make travel to and from the Center as easy as possible, Valley Metro has a dedicated

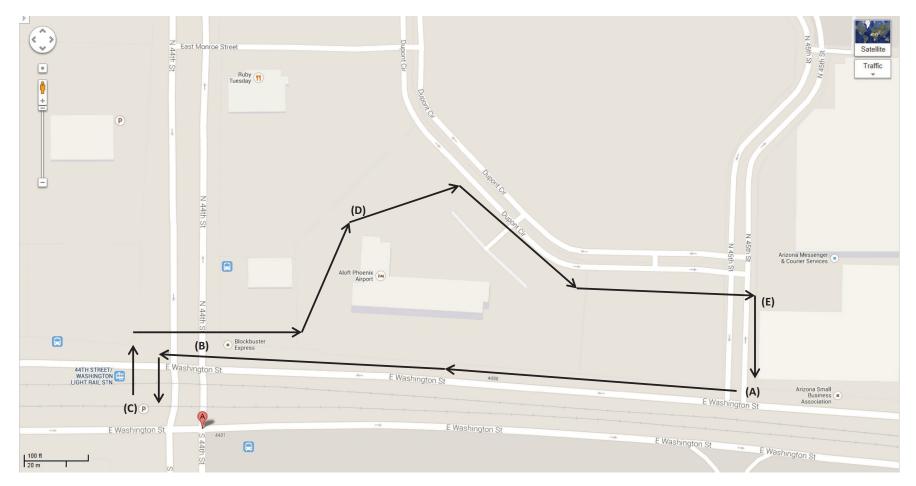


FIGURE 21 Valley Metro outdoor assessment route. [Source: TranSystems (developed using Google Maps traffic view).]

contract for eligibility transportation. The local paratransit service, which requires transfers between communities, is not used.

Valley Metro is considering a process that would first involve the review of an expanded paper application form. From the paper application, it would attempt to identify applicants who clearly do not need to participate in indoor or outdoor assessments. These applicants would still be asked to appear for an interview; however, several interview sites could be identified throughout the service area. A single facility would still be used for applicants who would be asked to participate in functional assessments.

Build-Out and Operating Costs

The Mobility Center is located with Valley Metro's Customer Service Center. The building was modified and space was prepared for both programs at the same time. The Mobility Center occupies 15,317 ft² of the building. Build-out costs for the Mobility Center were about \$1,200,000. Annual facility operating costs (rent, utilities, and building maintenance) for the Mobility Center portion of the building are estimated at \$320,000.

Process Statistics and Outcomes

In calendar year 2013, Valley Metro performed 4,753 eligibility assessments. Outcomes for this 12-month period were 67.5% unconditional, 18.5% conditional, 10.9% temporary, and 3.1% not eligible. Staff noted that conditional determinations have increased since August 2013 and were about 25% at the end of the year.

Lessons Learned

In general, Valley Metro staff indicated that the switch to an in-person process and other changes in eligibility policies have been beneficial. They also noted that the community has largely accepted the new process and that the new Mobility Center has been an important part of that acceptance. Having a well-designed and complete facility has helped with community confidence in the process. Staff at Valley Metro noted several lessons learned:

- Extensive community involvement was very important. In particular, staff noted that the creation of a large stakeholder group, with broad representation from the community, was helpful. This group was able to assist Valley Metro in its outreach to the community and was able to help answer questions that riders and others in the community had about a new process.
- Considering the benefits of an in-person process, such as the ability to implement a free fixed-route fare program, extend the term of eligibility, and create a simplified recertification process, was important for community acceptance.
- Having both an indoor and an outdoor route helps to better consider things that are difficult to simulate in an indoor setting, such as street crossings, changes in lighting, and outdoor stimulations and distractions. This also helped address community concerns that the process needs to accurately consider travel in the real environment.
- Staff qualifications are important. The current evaluators, who have psychology and sociology backgrounds, have excellent interviewing and observation skills but more limited skills and experience assessing physical functional abilities. Given that the primary disability of most applicants is physical, Valley Metro is considering changes in requirements in future assessment contractor RFPs to stress experience and skills with physical assessments.
- The Mobility Center houses a full-sized low-floor bus. If this is being considered, Valley Metro advises designing the facility to include a pathway and door large enough to remove and replace the bus to properly reflect any changes in the future fleet.

CHAPTER FIVE

CONCLUSIONS

Since the passage of the Americans with Disabilities Act of 1990 (ADA), a growing number of transit agencies have incorporated in-person interviews and functional assessments into the processes used to determine eligibility for ADA paratransit services. As noted in chapter two, 48% of transit agencies now include in-person interviews in their eligibility determination processes. Thirty-seven percent (37%) request that applicants participate in functional assessments is sometimes accompanied by the creation of facilities, equipment, and props to support the process.

This synthesis study examined the types of facilities, equipment, and props that have been developed. A literature search was first conducted to identify existing information about eligibility processes and facilities, followed by a survey of selected transit agencies. Using information from the literature review and the knowledge of the project panel and study team members, 30 transit agencies that have developed facilities were identified and sent survey forms. Responses were received from 24, an 80% response rate. Survey responses were then reviewed and summarized.

Five transit agencies were then selected for more detailed study. Selections were made to represent a variety of approaches and types of facilities.

The literature review, survey responses, and case examples revealed that transit agencies that use in-person interviews and functional assessments to determine ADA paratransit eligibility gather similar information and make similar observations of the functional abilities of applicants. Most rely on a combination of information from applicants, medical/health professionals who are familiar with them, as well as results from interviews and functional assessments.

Although there is some variation, most agencies assess physical abilities by making observations related to maximum reasonable walking distance, walking speed, balance, and the ability to negotiate along a path with curbs, curb ramps, and various surfaces. Four of the 24 transit agencies surveyed make these observations in the real environment along a predetermined outdoor route. Five agencies have created indoor routes and simulations of the travel environment and make these observations along these indoor courses. Fifteen agencies have some indoor facilities and props, such as mock-ups of buses and curbs/curb ramps, and make some observations indoors and other observations along an outdoor course.

Greater variation exists in the tests and observations used to make determinations for applicants with cognitive disabilities. Each system that was studied makes observations related to skills such as orientation, attention to task, memory, and judgment, but does so in a variety of ways. Some rely primarily on information from medical/health professionals and the interviews. Others make a variety of observations along indoor or outdoor assessment routes, including following directions to navigate the route, recognition of landmarks along the way, judgment when crossing streets, recognizing bus routes, or paying the correct fares. Other systems supplement information from interviews and assessment route observations with tests that were designed and validated to predict cognitive abilities—such as Functional Assessment of Cognitive Transit Skills (FACTS) and Mini Mental Status Exam (MMSE).

There is also some variation in facilities and equipment related to assessment of cognitive abilities. Eleven of the 24 agencies surveyed use FACTS and have space and equipment for conducting this standardized test. Seven agencies make observations related to cognitive abilities along the same indoor or outdoor routes used to assess physical functional abilities. The remaining systems rely primarily on interviews, information from professionals familiar with applicants, or results of the MMSE—which require no special facilities beyond interview rooms.

Similar variation exists in approaches for assessing applicants with vision disabilities. Sixteen of the 24 agencies surveyed make observations related to orientation and wayfinding along established indoor or outdoor routes if applicants have limited vision, but some travel skills. Seven agencies rely on information provided by applicants and medical/health professionals familiar with the applicants, which requires no special facilities. One agency contracts with orientation and mobility specialists to conduct personalized evaluations of applicants with vision disabilities.

The survey found that indoor and outdoor assessment facilities have many common elements. Most use the guidance developed by Easter Seals Project ACTION (ESPA) to design indoor facilities and outdoor routes. Outdoor assessment routes, where used, are typically up to 0.5 mile in length and include crossings of both controlled and uncontrolled

intersections. Outdoor routes also contain various types of surfaces and, to the extent allowed by local conditions, some changes in running and cross-slope. Indoor assessment routes can include simulations of curbs and curb ramps, mock-ups of buses or bus ramps and lifts, ramps of varying slopes and lengths, simulations of street crossings, and simulations of various walking surfaces.

The extent and types of indoor facilities and props depends on the degree to which decisions rely on indoor assessments and observations. Five of the 24 agencies surveyed conduct all parts of the assessments indoors and have created facilities that include all of the simulations and equipment noted earlier. Another six agencies have extensive indoor facilities that include most of the simulations and props noted previously, and make initial comprehensive assessments indoors. Outdoor routes and facilities are then used if applicants are able to complete the indoor assessments. The facilities at all 11 of these agencies also included basic features such as reception and waiting areas, restrooms, and interview rooms.

More limited indoor facilities and props are used at the other 13 agencies surveyed, which rely primarily on conducting assessments outdoors in the real environment. The types of facilities used by these 13 agencies includes measured indoor courses used when weather prevents an outdoor assessment (eight agencies); mock-ups of curbs and curb ramps (seven agencies); mock-ups of buses (four agencies); simulations of varied walking surfaces (four agencies); and ramps to simulate hills (three agencies). The facilities at these agencies also included reception and waiting areas, restrooms, and interview rooms.

Facilities used by the 11 agencies with more extensive indoor equipment and simulations ranged in size from 1,420 ft² to 19,500 ft², and averaged 7,884 ft². Facilities used by the 13 agencies that had limited indoor assessments and relied more on outdoor assessments ranged in size from 702 ft² to 5,100 ft² and averaged 2,538 ft².

Build-out costs for the more extensive indoor facilities ranged from \$50,000 to \$1,200,000 and averaged \$336,225. Build-out costs for facilities that only included some assessment equipment ranged from \$765 to \$242,653 and averaged \$89,927.

Based on the sample of processes studied, determination outcomes do not appear to be related to whether assessments are done indoors or outdoors, or on the extent of indoor facilities or props. As noted in chapter two, the thoroughness of outcomes is generally considered to be related to the percentage of applicants found conditionally eligible. Processes that used well-equipped indoor facilities and props did not produce higher percentages of conditionally eligible riders; agencies with the largest and most extensive facilities sometimes had relatively low percentages of conditionally eligible riders. Similarly, not all agencies that relied on outdoor assessments reported high levels of conditional eligibility. The thoroughness of determination outcomes likely depends as much, if not more, on the skills of the staff conducting assessments. Although the guidance developed by ESPA suggests that staff conducting physical functional assessments be physical therapists, occupational therapists, or professionals with similar skills, not all transit agencies use this type of staff.

The five transit agencies studied in more detail as case examples reported several important experiences and lessons learned:

- Staff noted that the agencies were generally pleased with the change they had made from a paper application process to in-person interviews and functional assessments.
- Staff also indicated that riders and their communities were largely accepting of the new process and facilities. Several noted that thorough public involvement was critical for gaining public acceptance of the new process.
- Several agencies noted that well-designed assessment facilities helped with public acceptance and confidence in the process.
- It was also noted that including an in-person element to the process helps with educating the public about the nature of ADA paratransit services. During interviews, eligibility staff can discuss service policies and answer any questions that applicants may have.

Several basic logistical and design issues were also noted, including:

- Having adequate waiting room space;
- Having adequate space for vehicles to drop off and pick up applicants;
- Having multiple elevators if the assessment center is in a shared office building;
- Ensuring and independently verifying the accessibility of any buildings that house the eligibility program;
- Verifying the accessibility of restrooms;
- Locating restrooms close to the interview and assessment areas;
- Maintaining confidentiality by separating administrative offices, interview rooms, and waiting areas from areas where functional assessments are conducted;
- Having separate waiting areas, if possible, for arriving applicants and applicants who have completed the process and are waiting for return rides;
- Allowing some down time for the unexpected—longer than expected interviews, additional assessments not initially expected, issues with transportation, and other incidents; and
- Cross training staff to help with work flow and to better manage a dynamic process.

Several agencies believed that it was important to use the real environment to assess certain abilities that are hard to simulate—particularly street crossings. There was also some sense that the general level of effort and stress is different when traveling outdoors in the real environment versus indoors in a controlled setting.

The cost to build and maintain eligibility facilities varied significantly. Much of the variation was related to how much of the process was conducted indoors and the extent of indoor props and equipment. Build-out costs can also be controlled somewhat by locating programs in facilities where extensive work does not have to be done on staff offices and general office space. Two agencies also used transit agency maintenance and construction staff to help build facilities and props and believed that this saved on costs. Several agencies were successful in getting the assistance of local communities or agencies to help design or provide needed equipment (e.g., traffic lights, buses).

Questions raised by the review and possible areas of future study include:

- The relationship between assessment staff qualifications and process outcomes.
- The validity of "combined" processes (i.e., general observations along an indoor or outdoor route), rather than

use of established tests such as FACTS and MMSE, for assessing the abilities of applicants with cognitive and vision disabilities.

- Alternatives for assessing cognitive functional abilities.
- Alternatives for assessing applicants with vision disabilities.
- The accuracy of determinations done entirely indoors, particularly in predicting the ability to cross streets and in managing the stimulations and distractions in the real environment.
- Validation of the FACTS test for additional populations, beyond applicants with intellectual disabilities.
- How to better use information gathered in the eligibility determination process to decide if specific trips can be made on fixed-route transit.
- How to better use information gathered to expand travel options for applicants.
- Integration of eligibility determination and travel training and experiences with encouraging travel training where appropriate (and the number of people who benefit from travel training).
- Approaches for evaluating customer satisfaction with various types of eligibility determination processes.
- Good practices in deciding appeals of initial eligibility determinations.

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APPENDIX A Survey Instrument

TCRP Project J-07, Synthesis Topic SB-25 ADA Paratransit Assessment Centers Survey

Study Objectives: This TCRP Synthesis study is examining facilities used by transit agencies to make determinations of ADA paratransit eligibility. In particular, it is examining facilities that are used for in-person interviews and functional assessments. This includes indoor facilities as well as outdoor routes and courses used for functional assessments. The study is gathering information about facility design, equipment and props used, the initial cost of creating the facilities, and the ongoing costs of operating the facilities.

Your transit agency has been identified as one that uses in-person interviews and/or functional assessments to make ADA paratransit eligibility determinations. It would be appreciated if you could provide the information requested below. Once we have received this information, we will follow-up with you to be sure we understand your eligibility determination process and the facilities that you use. If some of the information requested below is not readily available, please provide what you can and we can gather remaining information as part of our follow-up call. Thank you for your assistance.

GENERAL INFORMATION

Transit Agency Name:	
Address:	

Contact Person:

Title:

Phone #:

Email:

ADA PARATRANSIT ELIGIBILITY DETERMINATION PROCESS INFORMATION

1. For each of the following, please indicate if it is part of your ADA paratransit eligibility determination process.

- a. Paper application forms completed by applicants or others on their behalf
 - \Box Yes \Box No

If Yes, are application forms:

 \Box Completed and sent in

Fax #:

- \Box Completed and brought to interview appointments
- \Box Completed at the time interviews are conducted
- \Box Other:

b. Verification of disability and/or functional abilities by professionals familiar with applicants

 \Box Yes \Box No

If Yes, is information from professionals:

- □ Obtained by applicants and included as part of the application form
- □ Obtained on an "as needed" basis by eligibility determination staff
- □ Not required, but can be submitted by applicants
- □ Required to be provided by applicants with certain disabilities
- \Box Other:

c. In-person interviews

🗆 Yes 🛛 No

If Yes, are interviews:

- □ Required for all applicants
- \Box Conducted only for some applicants
- \Box Other:

d. Physical functional assessments

 \Box Yes \Box No

If Yes, what types of physical functional assessments are used (check all that apply)?

- 🗌 Tinetti Balance & Gait Test
- $\hfill\square$ Indoor assessment along a designed route with simulated barriers
- \Box Outdoor assessment along a designated route with various types of barriers
- \Box Other:

e. Cognitive functional assessments

\Box Yes \Box No

If Yes, what types of cognitive functional assessments are used (check all that apply)?

- □ Functional Assessment of Cognitive Transit Skills (FACTS)
- □ Mini Mental Status Exam (MMSE)
- □ Cognitive abilities are assessed along with physical abilities as applicants navigate the indoor/outdoor assessment route
- \Box Other:

f. Assessments of vision

 \Box Yes \Box No

If Yes, what types of functional assessments are used to assess vision (check all that apply)?

- □ Assessment by an O&M specialist
- □ Vision is assessed along with physical and cognitive abilities as applicants navigate the indoor/outdoor assessment route
- \Box Other:

2. Does your transit agency contract out for assistance with determinations of ADA paratransit eligibility?

 \Box Yes \Box No

If Yes, please list the compan(ies) or organization(s):

	Transit Staff	Contractor Staff	Both	Not Applicable
		Stall	Boui	
Review of application forms				
Obtain information from professional				
Conduct interviews				
Conduct physical functional assessments				
Conduct cognitive functional assessments				
Conduct assessment of vision				
Make final eligibility determination				

If Yes, please indicate whether transit agency or contractor staff perform the following tasks:

ADA PARATRANSIT ELIGIBILITY DETERMINATION FACILITIES AND EQUIPMENT

3. How many locations/facilities are used for conducting interviews and/or functional assessments?

- \Box One central location
- \Box More than one location (indicate number of sites): ()

4. Which of the following statements best describes the facility(ies)?

- \Box The eligibility facility(ies) are located within transit centers/facilities
- □ The eligibility facility(ies) are owned/leased by the transit agency but are separate from transit facilities
- □ The eligibility facility(ies) are located within the facilities of the company/organization we contract with for assistance with the process
- □ The eligibility facility(ies) are owned/leased by the company/organization we contract with, but are not colocated with other services provided by the contractor
- \Box Other:

5. Please attach or scan and send a floor plan of the facility, or portion of the facility, that is used for ADA paratransit eligibility determinations. <u>Note</u>: If you use more than one facility, please select and provide a floor plan for the one facility that you feel is most adequate.

6. What space, equipment, or props are included within the facility (check all that apply)?

- \Box Administrative offices (A)
- \Box Waiting area for applicants (B)
- \Box Restrooms (C)
- □ Interview rooms (D)
- □ Scale for weighing applicants using large mobility devices (E)
- □ Area for conducting indoor physical functional assessments (F)
 - □ Measured course for assessing distance/endurance
 - □ Mock-up of curb/curb-ramp
 - \Box Ramps to simulate hills/slopes
 - \Box Variety of surfaces to simulate travel over varied terrain
 - □ Bus or bus mock-up to simulate boarding/disembarking
 - □ Measured area to simulation street crossing
 - □ Mock-up of traffic controls as part of street crossing
 - \Box Other:
- □ Separate area for conducting cognitive functional assessments, such as FACTS (G)
- \Box Space for paper determination files (H)
- \Box Other: (I)

If possible, please label the facility floor plan using the letters above (A-I) to indicate the location of each of the above areas. If this is not easily possible, we will go over the facility layout as part of our telephone follow-up.

7. What is the total square footage of the facility, or portion of the facility, dedicated to ADA paratransit eligibility determinations? sq.-ft.

If possible, include a scale on the floor plan, or provide one measurement that we can use to estimate size of the facility and functional areas.

8. Are any of the following services also located at the facility (check all that apply)?

- \Box Travel training services
- \Box Transportation resource center
- \Box Other:

9. What was the cost to modify and equip the *facility illustrated in the attached floor plan* when it was first established? \$

10. If you have multiple eligibility determination sites, what was the cost to modify and equip all of your facilities? \$

11. Who did the initial facility build-out?

- \Box Transit agency
- □ Eligibility contractor
- \Box Other:

12. In what year did you start using the current facility(ies)?

13. In the most recent fiscal year, what was the annual facility cost for the facility illustrated in the attached floor plan?

Rent (or depreciation if transit owned facility)	\$
Utilities and maintenance costs	\$
Other:	\$
TOTAL	\$

14. If you use *multiple facilities*, what was the annual *facility* cost for *all of your facilities*?

Rent (or depreciation if transit owned facility)	\$
Utilities and maintenance costs	\$
Other:	\$
TOTAL	\$

15. If an outdoor route is used for functional assessments, please attach or scan and send a map or sketch of the route. **Note**: If you have multiple facilities, just provide a map or sketch of the outdoor route associated with the facility shown in the

attached floor plan.

- $\hfill\square$ Map or sketch of outdoor route is attached or is being sent
- \Box We do not use an outdoor route for functional assessments

a. Which of the following are included along the outdoor route (check all that apply)?

- □ Measured intervals for assessing maximum travel distance (up to ft)
- \Box Rest areas along the route (A)
- \Box Curbs (B)
- □ Curb-ramps (C)
- \Box Hills or slopes (D)
- \Box Broken sidewalk pavement (E)
- \Box Other varied surfaces (F)
- \Box Uncontrolled street crossing (G)
- \Box Controlled street crossing (H)
- \Box Other: (I)

If possible, please label the outdoor route map using the letters above (A-I) to indicate the location of each of the above features. If this is not easily possible, we will go over the route features as part of our telephone follow-up.

b. Does the outdoor route include a trip on a bus or train, if appropriate?

- \Box Yes, a trip on a bus is sometimes made
- □ Yes, a trip on a train is sometimes made
- 🗆 No

ADA PARATRANSIT ELIGIBILITY DETERMINATION STATISTICS

16. Please provide as many of the following process statistics as possible:

Number of completed applications received

Number of in-person interviews conducted

Number of physical assessments conducted

Number of cognitive assessments conducted

Number of vision assessments conducted

OR

Number of combined assessments conducted

17. Please provide as many of the following outcome statistics as possible:

Total determinations in most recent year

- Unconditionally Eligible Conditionally Eligible
- Temporary

Not Eligible

***** THANK YOU *****

Please return this completed form and attachments to Russell Thatcher at:

rhthatcher@transystems.com

APPENDIX B List of Survey Respondents

Transit Agencies That Responded to Survey

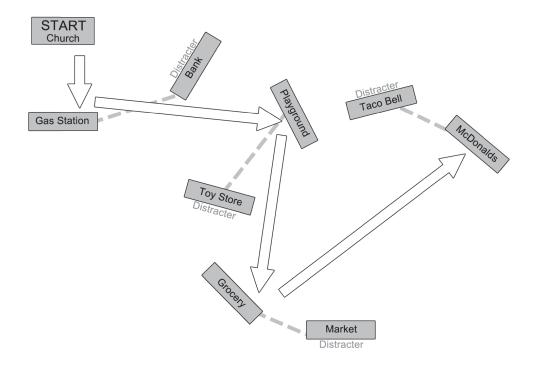
Access Services, Inc., Los Angeles, CA
Anchorage Public Transportation Department (Muni), Anchorage, AK
Broward County Transit (BCT), Ft. Lauderdale, FL
Capital Metropolitan Transit Authority, Austin, TX
Central Ohio Transit Authority (COTA), Columbus, OH
Corpus Christi Regional Transit Authority, Corpus Christi, TX
Dallas Area Rapid Transit, Dallas, TX
Department of Transportation Services, Honolulu, HI
Jacksonville Transportation Authority (JTA), Jacksonville, FL
King County Metro (KC Metro), Seattle, WA
Massachusetts Bay Transportation Authority (MBTA), Boston, MA
Metro Mobility, Minneapolis, MN
Nashville Metropolitan Transit Authority, Nashville, TN
Orange County Transportation Authority, Orange, CA
Pierce County Public Transportation Benefit Area, Tacoma, WA
Port Authority of Allegheny County (ACCESS), Pittsburgh, PA
Regional Transportation Authority, Chicago, IL
Regional Transportation Commission of S. Nevada (RTC), Las Vegas, NV
San Mateo County Transit District, San Carlos, CA
Southeastern Pennsylvania Transportation Authority, Philadelphia, PA
Spokane Transit Authority, Spokane, WA
Tri-County Metropolitan Transportation District, Portland, OR
Utah Transit Authority (UTA), Salt Lake City, UT
Valley Metro, Phoenix, AZ

APPENDIX C

Set-Up Requirements for FACTS Wayfinding Exercise

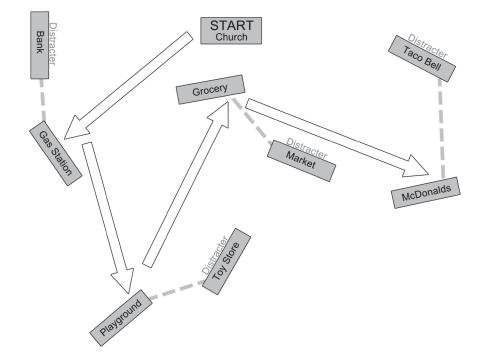
Sample Poster Placement - 1

- Try to have only the next two choices in clear view
- This is especially important for targets, less so for distracters
- Don't put all targets on same side (i.e. all left or all right)
- Avoid a straight line, circle, etc.
- Orient posters to help obscure them
- Use furniture to hide and as obstacles
- Church should be near testing table and natural start



Sample Poster Placement - 2

- Try to have only the next two choices in clear view
- This is especially important for targets, less so for distracters
- Don't put all targets on same side (i.e. all left or all right)
- Avoid a straight line, circle, etc.
- Orient posters to help obscure them
- Use furniture to hide and as obstacles
- Church should be near testing table and natural start



A4A	Airlines for America
AAAE	American Association of Airport Executives
AASHO	American Association of State Highway Officials
AASHTO	American Association of State Highway and Transportation Officials
ACI–NA	Airports Council International-North America
ACRP	Airport Cooperative Research Program
ADA	Americans with Disabilities Act
APTA	American Public Transportation Association
ASCE	American Society of Civil Engineers
ASME	American Society of Mechanical Engineers
ASTM	American Society for Testing and Materials
ATA	American Trucking Associations
СТАА	Community Transportation Association of America
CTBSSP	Commercial Truck and Bus Safety Synthesis Program
DHS	Department of Homeland Security
DOE	Department of Energy
EPA	Environmental Protection Agency
FAA	Federal Aviation Administration
FHWA	Federal Highway Administration
FMCSA	Federal Motor Carrier Safety Administration
FRA	Federal Railroad Administration
FTA	Federal Transit Administration
HMCRP	Hazardous Materials Cooperative Research Program
IEEE	Institute of Electrical and Electronics Engineers
ISTEA	Intermodal Surface Transportation Efficiency Act of 1991
ITE	Institute of Transportation Engineers
MAP-21	Moving Ahead for Progress in the 21st Century Act (2012)
NASA	National Aeronautics and Space Administration
NASAO	National Association of State Aviation Officials
NCFRP	National Cooperative Freight Research Program
NCHRP	National Cooperative Highway Research Program
NHTSA	National Highway Traffic Safety Administration
NTSB	National Transportation Safety Board
PHMSA	Pipeline and Hazardous Materials Safety Administration
RITA	Research and Innovative Technology Administration
SAF	Society of Automotive Engineers
SAFETEA-LU	Safe, Accountable, Flexible, Efficient Transportation Equity Act:
0/11 21 2/12 20	A Legacy for Users (2005)
TCRP	Transit Cooperative Research Program
TEA-21	Transportation Equity Act for the 21st Century (1998)
TRB	Transportation Research Board
TSA	Transportation Research Board Transportation Security Administration
U.S.DOT	United States Department of Transportation