

### Transportation Disadvantaged Local Coordinating Board (TDLCB) Meeting

Marion County Growth Services - Training Room 2710 E. Silver Springs Blvd., Ocala, FL 34470

### March 9, 2023 - 10:00 AM

### **AGENDA**

- 1. CALL TO ORDER AND ROLL CALL
- 2. PLEDGE OF ALLIGENCE
- 3. PROOF OF PUBLICATION
- 4. PRESENTATION
  - A. Major Forrest McIntyre Salvation Army (Page #3)
- 5. ACTION ITEMS
  - A. Community Transportation Coordinator (CTC) Evaluation (Page #5)
- 6. CONSENT AGENDA
  - A. Minutes December Meeting (Page #307)
- 7. DISCUSSION ITEMS
  - A. Next meeting Workshop Topics (Page #315)
  - B. Transportation Disadvantaged Paratransit Service Study (Page #316)
  - C. <u>2020 Census Update</u> (Page #333)
- 8. COMMENTS BY TDLCB MEMBERS
- 9. COMMENTS BY TPO STAFF
- 10. COMMENTS BY TRANSPORTATION COORDINATOR (CTC)
- 11. PUBLIC COMMENT

Anyone wishing to speak on a specific agenda item or under the Public Comment section is requested to fill out a "Public Comment" card and provide it to TPO staff. Speakers will be limited to two minutes.

### 12. ADJOURNMENT

All meetings are open to the public, the TPO does not discriminate on the basis of race, color, national origin, sex, age, religion, disability and family status. Anyone requiring special assistance under the Americans with Disabilities Act (ADA), or requiring language assistance (free of charge) should contact Liz Mitchell, Title VI/Nondiscrimination Coordinator at (352) 438-2634 or liz.mitchell@marioncountyfl.org forty-eight (48) hours in advance, so proper accommodations can be made.

Pursuant to Chapter 286.0105, Florida Statutes, please be advised that if any person wishes to appeal any decision made by the Board with respect to any matter considered at the above meeting, they will need a record of the proceedings, and that, for such purpose, they may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

The next regular meeting of the Ocala Marion Transportation Disadvantaged Local Coordinating Board will be held on June 8th, 2023.



TO: Transportation Disadvantaged Local Coordinating Board

FROM: Ocala Marion TPO

**RE:** Presentation

### **Summary**

A presentation of the Salvation Army and the services they provide.

### **Attachment(s)**

Presentation.

### **Action Requested**

None - Informative only.

Any additional comments and/or suggestions please contact Liz Mitchell, <a href="mailto:liz.mitchell@marionfl.org">liz.mitchell@marionfl.org</a>.



TO: Transportation Disadvantaged Local Coordinating Board

FROM: Ocala Marion TPO

**RE:** Community Transportation Coordinator Annual Evaluation 2023

#### **Summary:**

The Florida Commission for the Transportation Disadvantaged designates a Community Transportation Coordinator (CTC) for each county/service area. The CTC is responsible for coordinating and/or providing transportation services to individuals who are transportation disadvantaged. You are considered "transportation disadvantaged" due to age, income, or a disability, you cannot drive, or do not have access to other transportation options.

Access is provided to medical appointments, employment, educational and other life sustaining services, including, groceries, shopping, meals, and social events, to those who are eligible.

In accordance with Florida Statutes, Chapter 427, and the Florida Commission for the Transportation Disadvantaged the Marion County Community Transportation Coordinator (CTC) evaluation is conducted annually by members of the Transportation Disadvantaged Local Coordinating Board (TDLCB) with assistance from the Ocala Marion Transportation Planning Organization (TPO) as the Designated Official Planning Agency (DOPA). The TDLCB evaluates the CTC in order to ensure quality of service is being provided in the most cost effective and efficient manner.

This is accomplished through:

- audits
- series of interviews
- quality checks
- rider call surveys
- ride-along for observation

The evaluation encompasses management, operations, service, safety, vehicle maintenance, drivers and training, performance standards, grievance/complaint procedures, and quality assurance, utilizing the Commission for the Transportation Disadvantaged CTC Evaluation Workbook.

### **Findings:**

In summary, the TPO found that all of the required policies and procedures, contracts and contract management, grievance/complaint procedures, performance, quality and safety standards were in place and being adhered to. All vehicles were on a maintenance schedule and in good working order. The

A transportation system that supports growth, mobility, and safety through leadership and planning

Marion County • City of Belleview • City of Dunnellon • City of Ocala

drivers are trained with continual training updates. There is a zero tolerance substance abuse policy enforced complete with pre-employment drug and alcohol background checks. The riders speak highly of the overall system and feel that they are being provided a quality service.

The TPO has provided a few recommendations as well as commendations as a result of our evaluation.

### **Recommendations:**

The pertinent phone numbers on each bus continues to be too small. Due to the fact that service is geared for the disadvantaged, many are unable to get up close to view the Ombudsman and complaint phone numbers. These numbers need to be larger and centralized so that those seated on opposite sides of the isle are still able to see the numbers. Also, for distance viewing from the back of the bus, and the wheelchair riders that are secured in the very back.

### **Commendations:**

Marion Transit continues to make the changes required to maintain happy riders. Last year the TPO recommended a sealed drop box for comments so that riders could provide input on an ongoing basis. This led to an additional day being added to the Blue line in Dunnellon. The comments were unanimous that the riders wanted Friday added to the Blue Line. We commend MT for readily and eagerly making the necessary changes requested by their riders.

We want to extend a very special thanks to our volunteers that are members currently serving on our TDLCB Board. These volunteers took time out of their work schedules to call our TD riders for a quick survey and/or a ride-along. Thank you to:

Call Survey: Susan Hanley Department. of Elder Affairs

Tracey Sapp Department of Health

Brandon Palermo Center for Independent Living
Jeffrey Askew Department of Veterans Affairs

Ride-along: Andrea Melvin Center for Independent Living

Liz Mitchell Ocala Marion TPO

We wish continued success to Marion Transit, their drivers and staff.

### Attachment(s)

Copy of the Commission for the Transportation Disadvantaged evaluation workbook.

#### **Action Requested**

Board review and approval with Chair signature.

Any additional comments and/or suggestions please contact Liz Mitchell, liz.mitchell@marionfl.org.

# CTC EVALUATION WORKBOOK

Florida Commission for the



# Transportation Disadvantaged

CTC BEING REVIE	EWED:	Marion I	ransit Services	
COUNTY (IES):		Marior	า	
ADDRESS:	1101 S	W 20th Ct., Oca	la, FL 34471	
CONTACT: CI	ayton Murch	_ PHONE	352-6	20-3519
REVIEW PERIOD:	1/2022 - 12/2022	_ REVIE	W DATES:	2/2023
PERSON CONDUC	TING THE RE	VIEW:	Liz Mitche	ell
CONTACT INFOR	MATION:	352-438-2634	liz.mitchell@m	arionfl.org

# LCB EVALUATION WORKBOOK

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## **REVIEW CHECKLIST & SCHEDULE**

### **COLLECT FOR REVIEW:**

- APR Data Pages
- ☑ QA Section of TDSP
- $\blacksquare$  Last Review (Date:  $\frac{2/2022}{}$ )
- ∠ List of Omb. Calls
- QA Evaluation
- Status Report (from last review)
- TD Clients to Verify
- ▼ TDTF Invoices
- Audit Report Submittal Date

### **ITEMS TO REVIEW ON-SITE:**

- SSPP
- ☑ Policy/Procedure Manual
- ☑ Drug & Alcohol Policy (see certification)
- ⊠ Grievance Procedure
- ☑ Driver Training Records (see certification)
- Contracts
- Budget
- □ Performance Standards
- Medicaid Documents

## **ITEMS TO REQUEST:**

×	<b>REQUEST INFORMATION FOR RIDER/BENEFICIARY SURVEY</b> (Rider/Beneficiary Name, Agency who paid for the trip [sorted by agency and totaled], and Phone Number)
×	<b>REQUEST INFORMATION FOR CONTRACTOR SURVEY</b> (Contractor Name, Phone Number, Address and Contact Name)
	<b>REQUEST INFORMATION FOR PURCHASING AGENCY SURVEY</b> (Purchasing Agency Name, Phone Number, Address and Contact Name)
×	REQUEST ANNUAL QA SELF CERTIFICATION (Due to CTD annually by January 15th).
	MAKE ARRANGEMENTS FOR VEHICLES TO BE INSPECTED (Only if purchased after 1992 and privately funded).
INF(	DRMATION OR MATERIAL TO TAKE WITH YOU:
×	Measuring Tape Stop Watch

### **EVALUATION INFORMATION**

# An LCB review will consist of, but is not limited to the following pages:

1	
1	Cover Page
5 - 6	Entrance Interview Questions
12	Chapter 427.0155 (3) Review the CTC monitoring of
	contracted operators
13	Chapter 427.0155 (4) Review TDSP to determine utilization
	of school buses and public transportation services
19	Insurance
23	Rule 41-2.011 (2) Evaluation of cost-effectiveness of
	Coordination Contractors and Transportation Alternatives
25 - 29	Commission Standards and Local Standards
39	On-Site Observation
40 - 43	Surveys
44	Level of Cost - Worksheet 1
45- 46	Level of Competition – Worksheet 2
47 - 48	Level of Coordination – Worksheet 3

### **Notes to remember:**

- The CTC should not conduct the evaluation or surveys. If the CTC is also the PA, the PA should contract with an outside source to assist the LCB during the review process.
- Attach a copy of the Annual QA Self Certification.

# ENTRANCE INTERVIEW QUESTIONS

### INTRODUCTION AND BRIEFING:

<b>V</b>	Describe the evaluation process (LCB evaluates the CTC and forwards a copy of the evaluation to the CTD).					
<b>7</b>	The LCB reviews the CTC once every year to evaluate the operations and the performance of the local coordinator.					
	The L	CB will be reviewing the following areas:				
	<b>√</b>	Chapter 427, Rules 41-2 and 14-90, CTD Standards, and Local Standards				
	<b>7</b>	Following up on the Status Report from last year and calls received from the Ombudsman program.				
	<b>✓</b>	Monitoring of contractors.				
	<b>/</b>	Surveying riders/beneficiaries, purchasers of service, and contractors				
7	The LCB will issue a Review Report with the findings and recommendations to the CTC no later than 30 working days after the review has concluded.					
<b>✓</b>		the CTC has received the Review Report, the CTC will submit a Status Report to CB within 30 working days.				
		an update of Commission level activities (last meeting update and next meeting if needed.				
USING	THE A	PR, COMPILE THIS INFORMATION:				
1. OF	PERAT	ING ENVIRONMENT:				
	<b>✓</b>	RURAL URBAN				
2. OF	RGANI	ZATION TYPE:				
		PRIVATE-FOR-PROFIT				
	<b>✓</b>	PRIVATE NON-PROFIT				
		GOVERNMENT				
		TRANSPORTATION AGENCY				

3. I	NETWO!	RK TYPE:
	×	SOLE PROVIDER
		PARTIAL BROKERAGE
		COMPLETE BROKERAGE
4.	NAM	E THE OPERATORS THAT YOUR COMPANY HAS CONTRACTS WITH:
N/A	Ą	

# 5. NAME THE GROUPS THAT YOUR COMPANY HAS COORDINATION CONTRACTS WITH:

	Coordin	ation Contract Age	encies	
Name of Agency	Address	City, State, Zip	Telephone Number	Contact
Advocacy Resource	2800 SE Maricamp	Ocala, FL	352.387.2210	Sean McLaughlii
Florida Center for th	1411 NE 22nd Ave.	Ocala, FL	352.873.4700	Anissa Pieriboni

# 6. NAME THE ORGANIZATIONS AND AGENCIES THAT PURCHASE SERVICE FROM THE CTC AND THE PERCENTAGE OF TRIPS EACH REPRESENTS? (Recent APR information may be used)

Name of Agency	% of Trips	Name of Contact	Telephone Number
N/A			

### 7. REVIEW AND DISCUSS TO HELPLINE CALLS:

	Number of calls	Closed Cases	<b>Unsolved Cases</b>
Cost	0	0	0
Medicaid	0	0	0
Quality of Service	0	0	0
Service Availability	0	0	0
Toll Permit	0	0	0
Other	0	0	0

# **GENERAL QUESTIONS**

Use the TDSP to answer the following questions. If these are not addressed in the TDSP, follow-up with the CTC.

1.	DESIG	SNATIC	N DAT	E OF CTC:	July 1	, 2020 -	June 3	0, 202	5		
2.				PLAINT PE			eded to	appro	priate	area.	
				N WRITTEI	_	?	×	Yes		No	
		rocess b			,		$\boxtimes$	Yes		No	
3.				VE A COM		FORM?	×	Yes		No	
4.				AINT FORM EREPORTI No				ELEME	ENTS C	F THE CTD	)'S
5.	DOES	THE FO	ORM H	AVE A SEO	CTION F	OR RES	OLUTI(	ON OF	ТНЕ С	OMPLAINT	?
			_	l complain d follow-						section is	
6.	IS A S	UMMA Yes	RY OF	COMPLAI No	NTS GIV	EN TO	ГНЕ LC	CB ON	A REG	ULAR BAS	IS?
7.	Comp	,	re res							PLINE? ey will then	be
8.	OMBU	JDSMA	N PRO	NT IS FOR' GRAM, IS ' PROCESS? No						ГНЕ HE LOCAL	
	If no, v		lone wi	th the comp	laint?						

9.	DOLD	1112	10110	O VIDE WINIT	RS/ BENEFICIARIES ABOUT TD SERVICES?
	×	Yes		No	If yes, what type?
	are dis	tributed t	to local i		n. Brochures are also available on the bus or on-site and aborhoods and through the mail. Information is also
10.				BENEFICIAR MBER? No	Y INFORMATION OR BROCHURE LIST THE
11.				BENEFICIAR EDURE? No	Y INFORMATION OR BROCHURE LIST THE
12.	They ar	e require	d to prov	ride various docum	ROCESS FOR TD RIDERS/ BENEFICIARIES? nents to meet eligibility. They are vetted through a process that nditions, income level and location or residence.

Please Verify These Passengers Have an Eligibility Application on File:

T			
Name of Client	Address of client	Date of Ride	Application on File?
Lorraine DeMauex	6061 SW 84th St.,Ocala, FL 34476	1/20/23	Yes
Cindy Gunion	17425 SE 24th Ct., Summerfield, 34491	1/23/23	Yes
Frances Miller	10968 SW 80th Ct., Ocala, 34481	1/12/23	Yes
Angela Ribaudo	9511 SE 168th Elderberry PL, The Villages, 32162	11/21/22	Yes
Peter Valladdres	9273 SW 82nd Terr, Ocala, 34481	1/27/23	Yes

# 13. WHAT INNOVATIVE IDEAS HAVE YOU IMPLEMENTED IN YOUR COORDINATED SYSTEM?

Our two current deviated routes function well and now attempting to attain new deviated fixed routes. In partnership with our planning agency we are acquiring an analysis of the counties most needed, equity areas to determine the area to institute a new deviated route. Extensive focus on defensive driving, hazard identification and reducing the potential for accidents, specifically road safety.

14. ARE THERE ANY AREAS WHERE COORDINATION CAN BE IMPROVED?

MT maintains vigilance in looking for ways to improve the efficiency of the system. However funding limitations can be a hinderance.

15. WHAT BARRIERS ARE THERE TO THE COORDINATED SYSTEM?

Attempting to keep up with increasing demand in a timely fashion and the increased work load of coordinating with other entitites.

16. ARE THERE ANY AREAS THAT YOU FEEL THE COMMISSION SHOULD BE AWARE OF OR CAN ASSIST WITH?

Assist in providing awareness to more funding opportunities.

17. WHAT FUNDING AGENCIES DOES THE CTD NEED TO WORK CLOSELY WITH IN ORDER TO FACILITATE A BETTER-COORDINATED SYSTEM?

All agencies that have the ability to assist with funding. Visibility to other available grant opportunities.

18. HOW ARE YOU MARKETING THE VOLUNTARY DOLLAR?

Not at this time. There is no formal marketing budget.

	GENERAL QUESTIONS
Findings:	
Recommendations:	
Recommendations.	

Review the CTC contracts for compliance with 427.0155(1), F.S. "Execute uniform contracts for service using a standard contract, includes performance standards for operators."	which
ARE YOUR CONTRACTS UNIFORM? Yes No	
IS THE CTD'S STANDARD CONTRACT UTILIZED? Yes No	
DO THE CONTRACTS INCLUDE PERFORMANCE STANDARDS FOR THE TRANSPORTA OPERATORS AND COORDINATION CONTRACTORS?	TION
▼ Yes □ No	
DO THE CONTRACTS INCLUDE THE PROPER LANGUAGE CONCERNING PAYMENT TO SUBCONTRACTORS? (Section 21.20: Payment to Subcontractors, T&E Grant, and FY)  Yes  No	)

No

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes

Operator Name	Exp. Date	SSPP	AOR Reporting	Insurance
Marion Transit Services	6/30/25	5/14/21	9/14/22	1/31/23

Review the CTC last AOR submittal for compliance with 427. 0155(2) "Collect Annual Operating Data for submittal to the Commission."

REPORTING TIMELINESS						
	owing items submitted on time?  Annual Operating Report  Any issues that need clarification?  Any problem areas on AOR that have the List:  None	oeen re-	⊠ □ -occurri	Yes Yes ng?	×	No No
c. d. e.	Memorandum of Agreement Transportation Disadvantaged Service Plan Grant Applications to TD Trust Fund All other grant application (100%) IN COMPLIANCE WITH THIS SECTION?	X X X	Yes Yes Yes Yes		No No No No	
Comments						

Review the CTC monitoring of its transportation operator contracts to ensure compliance with 427.0155(3), F.S. "Review all transportation operator contracts annually." WHAT TYPE OF MONITORING DOES THE CTC PERFORM ON ITS OPERATOR(S) AND HOW OFTEN IS IT CONDUCTED? Monitoring occurs daily, each bus contains cameras and software that provides visual and audio, as a result they are monitored at various intervals throughout the day. Is a written report issued to the operator? П Yes No If **NO**, how are the contractors notified of the results of the monitoring? An email or a meeting if needed, and disciplinary action is taken at the time of an incident. WHAT TYPE OF MONITORING DOES THE CTC PERFORM ON ITS COORDINATION CONTRACTORS AND HOW OFTEN IS IT CONDUCTED? There is no set schedule but monitored annually. Review of documents, driving credentials and triannual certificate. □ Yes ⊠ No Is a written report issued? If **NO**, how are the contractors notified of the results of the monitoring? There is no report provided unless there is a disciplinary or counseling associated with the review. WHAT ACTION IS TAKEN IF A CONTRACTOR RECEIVES AN UNFAVORABLE REPORT? Depending on the circumstances, a corrective action plan is initiated. IS THE CTC IN COMPLIANCE WITH THIS SECTION? 

✓ Yes No

ASK TO SEE DOCUMENTATION OF MONITORING REPORTS.

will send

Review the TDSP to determine the utilization of school buses and public transportation services [Chapter 427.0155(4)]

"Approve and coordinate the utilization of school bus and public transportation services in accordance with the TDSP."

HOW IS THE CTC USING SCHOOL BUSES IN THE COORDINATED SYSTEM?

School buses are used for emergency services. In the event of an emergency, hurricane or natural disaster, buses are utilized to transport residents to shelters or other needed areas. MT assists the county school system by bridging the gap and transporting children that are homeless or in temporary shelters, alleviating the burden on the school bus system.

**Rule 41-2.012(5)(b):** "As part of the Coordinator's performance, the local Coordinating Board shall also set an annual percentage goal increase for the number of trips provided within the system for ridership on public transit, where applicable. In areas where the public transit is not being utilized, the local Coordinating Board shall set an annual percentage of the number of trips to be provided on public transit."

HOW IS THE CTC USING PUBLIC TRANSPORTATION SERVICES IN THE COORDINATED SYSTEM?  $\square$ MT maintains constant vigilance on new and innovative ways to utilize the system. IS THERE A GOAL FOR TRANSFERRING PASSENGERS FROM PARATRANSIT TO TRANSIT? |x|Yes No If YES, what is the goal? Riders are re-evaluated and transitioned to SunTran services if they are deemed eligible on a continual basis. This is done through a mapping system in accordance with where the riders reside. Yes  $\square$ Is the CTC accomplishing the goal? No IS THE CTC IN COMPLIANCE WITH THIS REQUIREMENT? Yes No Comments:

Review of local government, federal and state transportation applications for TD funds (all local, state or federal funding for TD services) for compliance with 427.0155(5).

"Review all applications for local government, federal, and state transportation disadvantaged funds, and develop cost-effective coordination strategies."

IS THE CTC INVOLVED WITH THE REVIEW OF APPLICATIONS FOR TD FUNDS, IN CONJUNCTION WITH THE LCB? (TD Funds include <u>all</u> funding for transportation disadvantaged services, i.e. Section 5310 [formerly Sec.16] applications for FDOT funding to buy vehicles granted to agencies who are/are not coordinated)  Yes  No
If Yes, describe the application review process.  TD fund applications are presented to the LCB for review and approval prior to submittal to the TD Commission or FDOT.
If no, is the LCB currently reviewing applications for TD funds (any federal, state, and local funding)? $\Box$ Yes $\Box$ No
If no, is the planning agency currently reviewing applications for TD funds?  Yes No
IS THE CTC IN COMPLIANCE WITH THIS SECTION?   Yes   No
Comments:

Review priorities listed in the TDSP, according to Chapter 427.0155(7). "Establish priorities with regard to the recipients of non-sponsored transportation disadvantaged services that are purchased with Transportation Disadvantaged Trust monies."

REVIEW THE QA SECTION OF THE TDSP (ask CTC to explain):

MT is in compliance with all policies and procedures. Quality assurance has been reviewed and MT has followed the criteria in accordance with FDOT's monitoring process.

### WHAT ARE THE PRIORITIES FOR THE TDTF TRIPS?

- 1. Medical Needs kidney dialysis, cancer treatments, therapy/doctor appointments
- 2. Life Sustaining Activities food, prescriptions, shopping, medicaid recertification
- 3. Education life skills training, day treatment programs for abused/neglected children
- 4. Employment- Daily to work and return home
- 5. Business banking, Social Security, visits to hospital/nursing homes
- 6. Recreational Trips Social interaction

#### HOW ARE THESE PRIORITIES CARRIED OUT?

The LCB sets the guidelines and service is provided in accordance with availability following the priorities/guidelines set.

IS THE CTC IN COMPLIANCE WITH THIS SECTION?	×	Yes	No
Comments:			

42 "I	nsure CTC compliance with the delivery of transportation services, (7.0155(8)). Have full responsibility for the delivery of transportation services for the ansportation disadvantaged as outlined in s. 427.015(2)."					
Re	view the Operational section of the TDSP					
1.	Hours of Service:					
	Monday - Friday from 8:00am - 5:00pm or until all return trips/passengers are completed.					
2.	Hours of Intake: Passengers are requested to make appointments between 7am and 5pm so the can be picked up to two hours prior and returned home within service hours. Riders living in outlying areas may need to be ready up to three hours prior to pickup time.					
3.	Provisions for After Hours Reservations/Cancellations?					
Arrangements may be made for dialysis and other special situations with early, lat Saturday appointments. Service may be available 24 hours per day, 7 days a week prior arrangements are made.						
4.	What is the minimum required notice for reservations?					
	Notice is required seventy-two (72) hours in advance. Recurring trips, such as for dialysis or therapy can be scheduled on a permanent basis.					
5.	How far in advance can reservations be place (number of days)?					
	Trips may be scheduled as early as 2 weeks, but not later than seventy-two (72) hours in advance.					
IS	THE CTC IN COMPLIANCE WITH THIS SECTION?  Yes  No					
Co	omments:					

<b>COMPLIANCE</b>	WITH	CHAPTER	427	$\mathbf{F}\mathbf{S}$
COMILIANCE	*****		74/	

,
Review the cooperative agreement with the local WAGES coalitions according to Chapter 427.0155(9). "Work cooperatively with local WAGES coalitions established in Chapter 414 to provide assistance in the development of innovative transportation services for WAGES participants."
WHAT TYPE OF ARRANGEMENT DO YOU HAVE WITH THE LOCAL WAGES COALITION?  N/A
TANE AND DIVIOUATINE WAS CIECUTE ANGEODETATION GERMICEG REEN
HAVE ANY INNOVATIVE WAGES TRANSPORTATION SERVICES BEEN DEVELOPED?
Starting wages for drivers were raised from \$13.00 to \$15.00 an hour
IS THE CTC IN COMPLIANCE WITH THIS SECTION?   Yes   No
Comments:

	CHAPTER 427	
Findings:		
Recommendations:		
Recommendations:		

COMPLI	IANCE WITH 41-2, F.A	C.
Compliance with 41-2.006(1), iensure compliance with the \$100,000 per person and \$200,000	he minimum liability ir	-
WHAT ARE THE MINIMUM LIAB		
The coverage rates are \$100,000	per person and \$300,000 p	per incident.
WHAT ARE THE MINIMUM LIAB OPERATOR AND COORDINATION	N CONTRACTS?	
The coverage rates are \$100,000 p	per person and \$300,000 p	er incident.
HOW MUCH DOES THE INSURAN	NCE COST (per operator)?	
Operator	Insurance Cost	
Marion Transit Services	\$ 227,714	
DOES THE MINIMUM LIABILITY PER INCIDENT?	INSURANCE REQUIREM	ENTS EXCEED \$1 MILLION
☐ Yes ⊠ No		
If yes, was this approved by the	he Commission?	s □ No
IS THE CTC IN COMPLIANCE WI	TH THIS SECTION?	Yes 🛘 No
Comments:		

### COMPLIANCE WITH 41-2, F.A.C.

### Compliance with 41-2.006(2), Safety Standards.

"...shall ensure the purchaser that their operations and services are in compliance with the safety requirements as specified in Section 341.061(2)(a), F.S. and 14-90, F.A.C."

Date of last SSPP Compliance Review	5/14/21,	Obtain a copy of this review
Review the last FDOT SSPP Compliance Review records. If the CTC has not monitored the operation		

ARE THE CTC CONTRACTED OPERATORS IN COMPLIANCE WITH THIS SECTION?

No

IS THE CTC IN COMPLIANCE WITH THIS SECTION? 

✓ Yes

▼ Yes □ No

### DRIVER REQUIREMENT CHART

Driver Last Name	Driver License	Last Physical	CPR/1st Aid	Def. Driving	ADA Training	Other-
Aquino	Yes	3/24/22	N/A	8/11/22	4/26/22	TAPCO
Baker	Yes	6/25/22	N/A	8/11/22	6/16/20	TAPCO
Desmarais	Yes	8/1/22	N/A	8/11/22	8/4/22	TAPCO
Formella	Yes	1/11/23	N/A	8/11/22	8/17/20	TAPCO
Garcia	Yes	1/12/23	N/A	8/11/22	1/25/21	TAPCO
Gray	Yes	9/1/22	N/A	9/15/21	9/14/21	TAPCO
Hamilton	Yes	1/27/22	N/A	8/11/22	11/17/20	TAPCO
Hickle	Yes	9/15/21	N/A	8/11/22	5/4/22	TAPCO
Joseph	Yes	11/30/21	N/A	11/19/20	12/13/22	TAPCO
Menger	Yes	7/27/22	N/A	8/11/22	8/2/22	TAPCO
Osbourne	Yes	10/13/22	N/A	8/11/22	10/27/20	TAPCO
Pizarro	Yes	12/22/22	N/A	8/11/22	10/20/20	TAPCO
Porter	Yes	4/27/22	N/A	8/11/22	7/21/20	TAPCO
Rodriguez	Yes	6/29/22	N/A	8/11/22	2/10/23	TAPCO
Taylor	Yes	8/3/22	N/A	8/11/22	8/11/22	TAPCO

**Sample Size**: 1-20 Drivers – 50-100% 21-100 Drivers – 20-50% 100+ Drivers – 5-10%

Driver Last Name	Driver License	Last Physical	CPR/1st Aid	Def. Driving	ADA Training	Other-
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						
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N/A						
N/A						
N/A						
N/A						
N/A						
N/A						
N/A						

<u>Sample Size</u>: 1-20 Drivers – 50-100% 21-100 Drivers – 20-50% 100+ Drivers – 5-10%

/
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# Compliance with 41-2.006(3), Drug and Alcohol Testing

"shall assure the purchaser of their continuing compliance with the applicable state or federal laws relating to drug testing"
With which of the following does the CTC (and its contracted operators) Drug and Alcohol Policy comply?
<ul> <li>▼ FTA (Receive Sect. 5307, 5309, or 5311 funding)</li> <li>□ FHWA (Drivers required to hold a CDL)</li> <li>□ Neither</li> </ul>
REQUEST A COPY OF THE DRUG & ALCOHOL POLICY AND LATEST COMPLIANCE REVIEW.
DATE OF LAST DRUG & ALCOHOL POLICY REVIEW:
IS THE CTC IN COMPLIANCE WITH THIS SECTION? ■ Yes □ No
Comments:

### COMPLIANCE WITH 41-2, F.A.C.

Compliance with 41-2.011(2), Evaluating Cost-Effectiveness of Coordination Contractors and Transportation Alternatives.

"...contracts shall be reviewed annually by the Community Transportation Coordinator and the Coordinating Board as to the effectiveness and efficiency of the Transportation Operator or the renewal of any Coordination Contracts."

1. IF THE CTC HAS COORDINATION CONTRACTORS, DETERMINE THE COST-EFFECTIVENESS OF THESE CONTRACTORS.

Cost [CTC and Coordination Contractor (CC)]

	CTC	CC #1	CC #2	CC #3	CC #4
Flat contract rate (s) (\$ amount / unit)					
Detail other rates as needed: (e.g. ambulatory, wheelchair, stretcher, out-of-county, group)					
Ambulatory	33.76				
Wheelchair	57.88				
Special or unique considerations that	influence co	osts?	<u>I</u>		
N/A					
Explanation:					

2. DO YOU HAVE TRANSPORTATION ALTERNATIVES?  Yes No (Those specific transportation services approved by rule or the Commission as a service not normally arranged by the Community Transportation Coordinator, but provided by the purchasing agency. Example: a neighbor providing the trip)  Cost [CTC and Transportation Alternative (Alt.)]					
	CTC	Alt. #1	Alt. #2	Alt. #3	Alt. #4
Flat contract rate (s) (\$ amount / unit)		7410.71	7 XIV. 11 Z	1111.113	11100 11-1
Detail other rates as needed: (e.g. ambulatory, wheelchair, stretcher, out-of-county, group)					
Special or unique considerations that influence costs?					
Explanation:					
IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No					

	RULE 41-2	
Findings:		
Recommendations:		

# COMPLIANCE WITH 41-2, F.A.C.

# Compliance with Commission Standards "...shall adhere to Commission approved standards..."

Review the TDSP for the Commission standards.

<b>Commission Standards</b>	Comments
Local toll free phone number must be posted in all vehicles.	All vehicles have the toll free contact information posted as well as readily available from the driver.
Vehicle Cleanliness	The entire bus is misted with a disinfectant at the end of the day and all hard surfaces are wiped down, any debris is removed. Throughout the day surfaces are wiped as needed between riders.
Passenger/Trip Database	All information on trips and scheduling is maintained in a map-based computer software program called Route Match.

Adequate seating	All seating is according to manufacturer's recommended capacity and usage. The driver and passengers are properly seated using the provided seat restraint devices. There is also space to accommodate 4 wheelchairs with seat and wheel restraints. Additionally, rider's utilize spaced seating for social distancing.
Driver Identification	When transporting passengers, all drivers will have a picture identification displayed at all times. Drivers have name tag and company logo on their uniform and or person for identification.
Passenger Assistance	Door-to-door service is available to all clients. Drivers are required to assist all passengers from the door of their pick-up point onto the vehicle as well as, off the vehicle and to the door at their destination. Drivers may not assist wheelchairs up or down more than one step unless it can be performed safely as determined by the driver.
Smoking, Eating and Drinking	All vehicles have a sign posted stating smoking, eating and drinking is prohibited on board the vehicle.

Two-way Communications	Driver has audible accessibility with base at all times. All vehicles are equipped with a two-way radio for communication.
Air Conditioning/Heating	All vehicles are equipped with air conditioners and heaters. They are regularly maintained and make sure they are always functioning properly.
Billing Requirements	All riders are expected to pay fare at the time they receive services. Passengers must have exact change; drivers do not carry cash.

	COMMISSION STANDARDS
Findings:	
Recommendations:	

#### COMPLIANCE WITH 41-2, F.A.C.

# Compliance with Local Standards "...shall adhere to Commission approved standards..."

Review the TDSP for the Local standards.

Local Standards	Comments			
Transport of Escorts and dependent children policy	Escorts must be at least 16 years old, limited to one per rider and pay the standard fare. Dependent children may be transported if the child is over 5 years old and the medical appointment is for the child.			
Use, Responsibility, and cost of child restraint devices	Children under 5 must be in an appropriate safety seat. Child seat may be provided by the transport company if requested or can be furnished by the rider. Driver is responsible for properly securing the child and the child seat.			
Out-of-Service Area trips	Out-of-service area trips provided only as approved by LCB and CTC.			
CPR/1st Aid	Not required for drivers to be trained.			
Driver Criminal Background Screening	Criminal background and drug check (with local law enforcement and Florida Dept. of Law Enforcement) are done prior to date of hire.			
Rider Personal Property	Riders may carry personal property on vehicles if it can be placed on lap or under seat. Drivers may not handle customer's property. Exception is shopping trips, customer may have 2-3 bags, and driver may assist to ensure bags are safely stowed on vehicle.			
Advance reservation requirements	Trips must be scheduled a minimum of 72 hours prior to date of travel or 2 weeks in advance of date of travel.			
Pick-up Window	There is a two hour pick-up window prior to appointment time. Three hours are required for outlying areas.			

Measurable Standards/Goals	Standard/Goal	Latest Figures	Is the CTC/Operator meeting the Standard?
	CTC	CTC	Stattaat at
Public Transit Ridership	Operator A	Operator A	N/A
	Operator B	Operator B	N/A
	Operator C	Operator C	N/A
	CTC	CTC	IN/A
On-time performance			
	Operator A	Operator A	N/A
	Operator B	Operator B	N/A
	Operator C	Operator C	N/A
Passenger No-shows	CTC	CTC	
	Operator A	Operator A	N/A
	Operator B	Operator B	N/A
	Operator C	Operator C	N/A
Accidents	CTC	CTC	
recidents	Operator A	Operator A	N/A
	Operator B	Operator B	N/A
	Operator C	Operator C	N/A
Roadcalls	CTC	CTC	
Roadcans	Operator A	Operator A	N/A
A CC	Operator B	Operator B	N/A
Average age of fleet:	Operator C	Operator C	N/A
Complaints	CTC	CTC	
Complaints	Operator A	Operator A	N/A
N1 C1 - 1	Operator B	Operator B	N/A
Number filed:	Operator C	Operator C	N/A
Call-Hold Time	CTC	CTC	
Cuii IIOIu IIIIIC	Operator A	Operator A	N/A
	Operator B	Operator B	N/A
	Operator C	Operator C	N/A

	LOCAL STANDARDS
Findings:	
Recommendations:	

#### COMPLIANCE WITH AMERICANS WITH DISABILITIES ACT

# EXAMINE OPERATOR MANUALS AND RIDER INFORMATION. DO CURRENT POLICIES COMPLY WITH ADA PROVISION OF SERVICE REQUIREMENTS REGARDING THE FOLLOWING:

Provision of Service	Training Provided	Written Policy	Neither
Accommodating Mobility Aids	Yes	Yes	
Accommodating Life Support Systems (O <sub>2</sub> Tanks, IV's)	Yes	Yes	
Passenger Restraint Policies	Yes	Yes	
Standee Policies (persons standing on the lift)	Yes	Yes	
Driver Assistance Requirements	Yes	Yes	
Personal Care Attendant Policies	Yes	Yes	
Service Animal Policies	Yes	Yes	
Transfer Policies (From mobility device to a seat)	Yes	Yes	
Equipment Operation (Lift and securement procedures)	Yes	Yes	
Passenger Sensitivity/Disability Awareness Training for Drivers	Yes	Yes	

RANDOMLY SELECT ONE OR TWO VEHICLES PER CONTRACTOR (DEPENDING ON SYSTEM SIZE) THAT ARE IDENTIFIED BY THE CTC AS BEING ADA ACCESSIBLE AND PURCHASED WITH PRIVATE FUNDING, AFTER 1992. CONDUCT AN INSPECTION USING THE ADA VEHICLE SPECIFICATION CHECKLIST.

There are no vehicles that have been purchased with private funding.

INSPECT FACILITIES WHERE SERVICES ARE PROVIDED TO THE PUBLIC
(ELIGIBILITY DETERMINATION, TICKET/COUPON SALES, ETC).

IS A RAMP PROVIDED?	×	Yes	No
ARE THE BATHROOMS ACCESSIBLE?	×	Yes	No

#### **Bus and Van Specification Checklist**

Name	of Provider:	Mari	on Transit				
Vehicl	e Number (eitl	her VI	N or provider fleet n	umber	):	Vehicle	± #2111
Type o	of Vehicle:		Minibus (<= 22')		Van Minibus (	(>22')	Bus (>22')
Persor	n Conducting I	Review	Liz Mitchell - O	cala Ma	arion TPO		
Date:	2/10/23						
×	The lift must be vehicle). Is the The lift must be the li	nave a voe equipe pole j	I, check the stickers, weight limit of at least pped with an emerger present? erlocked" with the branterlock is engaged.	600 po ncy back akes, tra	ounds. k-up system ansmission,	(in case of	Floss of power to
Have t	the driver lowe	er the l	ift to the ground:				
×	Controls to op	erate th	ne lift must require con	nstant p	ressure.		
×	Controls must allow the up/down cycle to be reversed without causing the platform to "stow" while occupied.						
×	Sufficient lighting shall be provided in the step well or doorway next to the driver, and illuminate the street surface around the lift, the lighting should activate when the door/lift is in motion. Turn light switch on, to ensure lighting is working properly.						
Once t	the lift is on the	e grou	nd, review the follow	ing:			
×			parrier to prevent the polatform is fully raised		aid from re	olling off tl	he side closest to
×	Side barriers n	nust be	at least 1 ½ inches hi	gh.			
×	The outer barr	ier mus	st be sufficient to prev	ent a w	heelchair fr	om riding o	over it.
×	The platform r	nust be	e slip-resistant.				
×	Gaps between	the pla	tform and any barrier	must be	e no more th	nan 5/8 of a	an inch.
×	The lift must h	nave tw	o handrails.				
×	The handrails	must b	e 30-38 inches above	the plat	form surfac	e.	
×			nave a useable graspi sufficient knuckle clo	•		s, and mus	t be at least 1 ½
$\times$	The platform	must b	e at least 28 1/2 inch	es wide	measured a	at the platf	orm surface, and

30 inches wide and 48 inches long measured 2 inches above the platform surface.

	If the ramp is not flush with the ground, for each inch off the ground the ramp must be 8 inches long.
	Lifts may be marked to identify the preferred standing position (suggested, not required)
Have t	the driver bring the lift up to the fully raised position (but not stowed):
×	When in the fully raised position, the platform surface must be horizontally within $5/8$ inch of the floor of the vehicle.
×	The platform must not deflect more than 3 degrees in any direction. To test this, stand on the edge of the platform and carefully jump up and down to see how far the lift sways.
×	The lift must be designed to allow boarding in either direction.
While	inside the vehicle:
×	Each securement system must have a clear floor area of 30 inches wide by 48 inches long.
×	The securement system must accommodate all common wheelchairs and mobility aids.
×	The securement system must keep mobility aids from moving no more than 2 inches in any direction.
×	A seat belt and shoulder harness must be provided for each securement position, and must be separate from the security system of the mobility aid.
Vehicl	es under 22 feet must have:
	One securement system that can be either forward or rear-facing.
	Overhead clearance must be at least 56 inches. This includes the height of doors, the interior height along the path of travel, and the platform of the lift to the top of the door.
Vehicl	es over 22 feet must have:
×	Must have 2 securement systems, and one must be forward-facing, the other can be either forward or rear-facing.
×	Overhead clearance must be at least 68 inches. This includes the height of doors, the interior height along the path of travel, and the platform of the lift to the top of the door.
×	Aisles, steps, and floor areas must be slip resistant.
×	Steps or boarding edges of lift platforms must have a band of color which contrasts with the step/floor surface.

#### COMPLIANCE WITH AMERICANS WITH DISABILITIES ACT

Table 1. ADA Compliance Review - Provider/Contractor Level of Service Chart

Name of Service Provider/ Contractor	Total # of Vehicles Available for CTC Service	# of ADA Accessible Vehicles	Areas/Sub areas Served by Provider/Contractor
Marion Transit Svcs	47	47	Marion County

BASE	D ON	THE	INFORMATION	IN	TABLE	1,	DOES	IT	APPEAR	THAT	<b>INDIVIDUALS</b>
REQU	IRING	THE U	JSE OF ACCESSI	BLE	VEHICLI	ES I	HAVE E	QU.	AL SERVI	CE?	
×	Yes		No								

	ADA COMPLIANCE				
Findings:					
Recommendations:					

FY 2022 /2023 GRANT QUESTIONS					
The following questions relate to items specifically addressed in the FY _ 2022 /2023 Trip and Equipment Grant.					
⊠ Yes □ No					
ARE ALL ACCIDENTS THAT HAVE RESULTED IN A FATALITY REPORTED TO THE COMMISSION WITHIN 24 HOURS AFTER YOU HAVE RECEIVED NOTICE? (Section 14.80: Accidents, T/E Grant, and FY)					
□ Yes □ No					

ARE ALL ACCIDENTS THAT HAVE RESULTED IN \$1,000 WORTH OF DAMAGE REPORTED TO THE COMMISSION WITHIN 72 HOURS AFTER YOU HAVE RECEIVED NOTICE OF THE ACCIDENT? (Section 14.80: Accidents, T/E Grant, and FY  $\underline{^{2022-2023}}$ )

 $\times$ Yes No

Yes

### STATUS REPORT FOLLOW-UP FROM LAST REVIEW(S)

DATE OF LAST REVIEW:	STATUS REPORT DATED:
CTD RECOMMENDATION:	
CTC Response:	
Current Status:	
CTD RECOMMENDATION:	
CTC Response:	
Current Status:	
CTD RECOMMENDATION:	
CTC Response:	
CTC response.	
Current Status:	
1	

CTD RECOMMENDATION:
CTC Response:
ere response.
Current Status:
Current Status.
CTD DECOMMENDATION.
CTD RECOMMENDATION:
CTC D
CTC Response:
Current Status:
CTD RECOMMENDATION:
CTC Response:
CTC Response.
Current Status:
Current Status.

#### ON-SITE OBSERVATION OF THE SYSTEM

RIDE A VEHICLE WITIN THE COORDINATED SYSTEM. REQUEST A COPY OF THE MANIFEST PAGE THAT CONTAINS THIS TRIP.

Date of Observation: 2/6/23				
Please list any special guests that were present:				
Location: Ocala				
Number of Passengers picked up/dropped off: 5				
Ambulatory 4				
Non-Ambulatory				
Was the driver on time? Yes \( \Dag{No} \) No - How many minute	s late	/early?		
Did the driver provide any passenger assistance? Yes \(\Bar{\text{V}}\) Yes	)			
Was the driver wearing any identification?  Yes: Unified to Badge I		<b>©</b> €N	ame 7	ag
Did the driver render an appropriate greeting?  Yes Driver regularly transports the rider, not	neces	sary		
If CTC has a policy on seat belts, did the driver ensure the passengers were		perly b	elted?	? No
Was the vehicle neat and clean, and free from dirt, torn upholstery, damage protruding metal or other objects?		broke Yes	n seat	s, No
Is there a sign posted on the interior of the vehicle with both a local phone Helpline for comments/complaints/commendations?	1000	yes		TD No
Does the vehicle have working heat and air conditioning?	V	Yes		No
Does the vehicle have two-way communications in good working order?	M	Yes		No
If used, was the lift in good working order?	9	Yes		No

Date of Ride: 0//6/03				
CTC: Marion Transit	County: _	Mar	ion	
If No, please explain:				
Did the driver properly use the lift and secure the passenger?		Yes		No
Was there safe and appropriate seating for all passengers?		Yes		No

<b>Funding Source</b>	No. of Trips	No. of Riders/Beneficiaries	No. of Calls to Make	No. of Calls Made
CTD				
Medicaid				
Other				
Other				
Other)				
Other				
Totals				

Number of Round Trips	Number of Riders/Beneficiaries to Survey		
0 - 200	30%		
201 – 1200	10%		
1201 +	5%		

Note: Attach the manifest

Staff making call: Andrea Me Date of Call: 2/6 23		nty: Manon ding Source: ADA
1) Did you receive transportation s	ervice on	√23_? Yes or □ No
2) Where you charged an amount i	n addition to th	ne co-payment?  Yes or  No
If so, how much?		
3) How often do you normally obta ☐ Daily 7 Days/Week ☐ Othe	_	
4) Have you ever been denied trans	sportation servi	ices?
No. If no, skip to question # 4		
A. How many times in the None	last 6 months h	have you been refused transportation services?
☐ 1-2 Times	☐ 6-10 Tin	
If none, skip to question		
B. What was the reason give	en for refusing	you transportation services?
☐ Ineligible	☐ Space no	ot available
☐ Lack of funds	☐ Destinat	ion outside service area
Other	-	
5) What do you normally use the s	ervice for?	
Medical	_	on/Training/Day Care
☐ Employment	☐ Life-Sus	staining/Other
☐ Nutritional		
6) Did you have a problem with yo	our trip on	?
☐ Yes. If yes, please state	or choose pro	blem from below
■ No. If no, skip to quest	ion # 6	
What type of problem of	lid you have w	ith your trip?
☐ Advance notice		☐ Cost
☐ Pick up times not co	onvenient	☐ Late pick up-specify time of wait
☐ Assistance		☐ Accessibility
☐ Service Area Limits	<b>.</b>	Late return pick up - length of wait

☐ Drivers - specify	Reservations - specify le	ength of wait
☐ Vehicle condition	☐ Other	
7) On a scale of 1 to 10 (10 being most sat	isfied) rate the transportation you hav	e been receiving.
8) What does transportation mean to you? use in publications.)	(Permission granted by	for
Additional Comments:		
Only way to get to me	edical appointments	

Staff making call: Andrea Melvir Date of Call: 3/6 23	County: Manon Funding Source: TD
Did you receive transportation service	e on 2/4/23? Yes or 1 No
2) Where you charged an amount in add	lition to the co-payment?  Yes or  No
If so, how much?	
3) How often do you normally obtain tr	
Daily 7 Days/Week Other D	☐ 1-2 Times/Week ☐ 3-5Times/Week
4) Have you ever been denied transport	ation services?
Yes	
No. If no, skip to question # 4	
	months have you been refused transportation services
□ None □	3-5 Times
$\Box$ 1-2 Times $\Box$	6-10 Times
If none, skip to question # 4.	
_	or refusing you transportation services?
	Space not available
☐ Lack of funds L	Destination outside service area
Other	
5) What do you normally use the servic	e for?
Medical	Education/Training/Day Care
☐ Employment ☐	Life-Sustaining/Other
☐ Nutritional	
6) Did you have a problem with your tr	ip on?
☐ Yes. If yes, please state or c	hoose problem from below
No. If no, skip to question # What type of problem did yo	
Advance notice	Cost
_	
☐ Pick up times not conver	
☐ Assistance	☐ Accessibility
☐ Service Area Limits	☐ Late return pick up - length of wait

☐ Drivers - specify	Reservations - specify	ength of wait
☐ Vehicle condition	☐ Other	
7) On a scale of 1 to 10 (10 being most satis	sfied) rate the transportation you hav	e been receiving.
8) What does transportation mean to you? (use in publications.)	(Permission granted by	for
Additional Comments:		
saves lot of mileage.	tgns	

Staff making call: Andrea Melm Date of Call: 2/6/23	County: Marion Funding Source: TD
1) Did you receive transportation service of	on 2/433? Yes or 1 No
2) Where you charged an amount in additi	on to the co-payment?  Yes or No
If so, how much?	
3) How often do you normally obtain tran  Daily 7 Days/Week Other  1-2 times/mont  4) Have you ever been denied transportati  Yes	1-2 Times/Week 3-5 Times/Week
No. If no, skip to question # 4	nonths have you been refused transportation services?
	3-5 Times
	5-10 Times
$\Box$ 1-2 Times $\Box$ 6 If none, skip to question # 4.	o-10 Times
· · · · · · · · · · · · · · · · · · ·	refusing you transportation services?
☐ Ineligible ☐ 5	Space not available
☐ Lack of funds ☐ I	Destination outside service area
☐ Other	
5) What do you normally use the service i	For?
☑ Medical ☐ I	Education/Training/Day Care
☐ Employment	ife-Sustaining/Other
☐ Nutritional	
6) Did you have a problem with your trip	on?
Yes. If yes, please state or cho	ose problem from below
No. If no, skip to question # 6	
What type of problem did you	have with your trip?
☐ Advance notice	☐ Cost
☐ Pick up times not convenie	nt Late pick up-specify time of wait
☐ Assistance	☐ Accessibility
☐ Service Area Limits	☐ Late return pick up - length of wait

☐ Drivers - specify	☐ Reservations - specify length of wa	ait
☐ Vehicle condition	Other	
7) On a scale of 1 to 10 (10 being most satisfied	d) rate the transportation you have been rece	iving.
8) What does transportation mean to you? (Per use in publications.)	mission granted by	for
Additional Comments:		
I wish they could take	me more places	
Very important to me.		

Staff making call: Andrea Melrin	County: Manon
Date of Call: $2/4/23$	Funding Source: TD
1) Did you receive transportation service	on <u>2/4/23</u> ?
2) Where you charged an amount in add	ition to the co-payment?  Yes or  No
If so, how much?	
3) How often do you normally obtain tra  ☐ Daily 7 Days/Week ☐ Other ☐  ☐ 1-2 x per mo  4) Have you ever been denied transporta  ☐ Yes	1 1-2 Times/Week 3-5Times/Week
- 1	
No. If no, skip to question # 4  A. How many times in the last 6	months have you been refused transportation services?
	3-5 Times
☐ 1-2 Times ☐	6-10 Times
If none, skip to question # 4.	
	r refusing you transportation services?
☐ Ineligible ☐	Space not available
☐ Lack of funds ☐	Destination outside service area
☐ Other	
5) What do you normally use the service	e for?
■ Medical □	Education/Training/Day Care
☐ Employment ☐	Life-Sustaining/Other
☐ Nutritional	
6) Did you have a problem with your tri	p on
Yes. If yes, please state or cl	noose problem from below
No. If no, skip to question #	6
What type of problem did yo	u have with your trip?
☐ Advance notice	☐ Cost
☐ Pick up times not conven	ient
☐ Assistance	☐ Accessibility
☐ Service Area Limits	☐ Late return pick up - length of wait

☐ Drivers - specify	Reservations - specify length of	wait
☐ Vehicle condition	☐ Other	
7) On a scale of 1 to 10 (10 being most satis	sfied) rate the transportation you have been re	eceiving.
8) What does transportation mean to you? (use in publications.)	(Permission granted by	for
Additional Comments:		
It's how I can got	to my modical appointm	rents
		_



#### **Actual Trips Summary - FL\_Marion**

For Time Period: 2/6/2023

Printed: 2/6/2023 7:33:32AM

	me: Unassigr Name: William	ned Ve n A. Ashberger	ehicle: Bus 2001				
Driv Signatu	-	erser //		es Out		Cash Tickets	
Customer Name	Pick Up Time	Pick Up Address	Drop Off Time	Drop Off Address	Mobility Type	Customer Pay	Telephone Ext.
Currie, Glenn	9:30:00AM	Shady Acres 8660 SW 27th Ave # 7 Ocala, FL 34476	10:00:00AM	Ocala Dental Care 2415 SW 27th Ave Ocala, FL 34471	Ambulatory	\$ 0.00	(352) 873-4498
Funding Source: T		ments [Gate Code *7111	F/W]				
Delapuente, Margaret	9:45:00AM	Highlands @ Heathbrook 5101 SW 60th St Rd #4104 Ocala, FL 34474	10:15:00AM	Marion Physician Assoc 1040 Sw 2nd Ave Ocala, FL 34471	Ambulatory	\$ 2.00	(352) 304-6664
Request Time: 10 Funding Source: T Assistance Needs:	):15 am D						
Nelson, Donald	9:45:00AM	Shady Road Villa MHP 9100 Sw 27th Ave -#A3 Ocala, FL 34476	10:15:00AM	Boissoneault Oncology 2020 Se 17th St Ocala, FL 34471	Ambulatory	\$ 2.00	(352) 553-6314





Pĭck Up Time	Pick Up Address	Drop Off Time	Drop Off Address	Mobility Type	Customer Pay	Telephone Ext.
:15 am						
10:15:00AM	1783 Sw 108th Ln APT B Ocala, FL 34476	10:45:00AM	Fresenius STE #404 2701 Sw College Rd Ocala, FL 34474	Wheelchair	\$ 0.00	(352) 318-9278
:45 am 311 General Com	ments [Doesn't speak Englis	h]				7
2:30:00PM	Transitions Life Center 3360 Nw Gainesville Rd Ocala, FL 34475	3:00:00PM	1566 Sw 153rd Ct Ocala, FL 34481	Ambulatory	\$ 2.00	(352) 322-7120
30 pm 311 Requires Doo	or-to-Door assistance					
2:30:00PM	Transitions Life Center 3360 Nw Gainesville Rd Ocala, FL 34475	3:00:00PM	7635 NW Hwy 225-A Ocala, FL 34482	Ambulatory	\$ 0.00	(352) 732-4088
	10:15:00AM  10:15:00AM  45 am 311  General Com 2:30:00PM  30 pm 311  Requires Doc	Time Address  15 am  10:15:00AM 1783 Sw 108th Ln APT B Ocala, FL 34476  45 am  311 General Comments [Doesn't speak Englis  2:30:00PM 2:30:00PM 360 Nw Gainesville Rd Ocala, FL 34475  30 pm  311 Requires Door-to-Door assistance  Transitions Life Center 3360 Nw Gainesville Rd	Time Address Time  15 am  10:15:00AM 1783 Sw 108th Ln APT B	Time	Time	Time



Request Time: 2:30 pm
Funding Source: 5311
Assistance Needs: General Comments [Corner of 225A & Corner of 22



# On-SITE OBSERVATION OF THE SYSTEM

RIDE A VEHICLE WITIN THE COORDINATED SYSTEM. REQUEST A COPY OF THE MANIFEST PAGE THAT CONTAINS THIS TRIP.

Date of Observation: 2-10-23				
Please list any special guests that were present:				
Location: Didellon				3
Number of Passengers picked up/dropped off: 5  Ambulatory 5				
Non-Ambulatory				
Was the driver on time? Yes \( \Boxed{\sigma} \) No - How many minute	es late	e/early	?	
Did the driver provide any passenger assistance? Yes \( \sigma \) Yes	lo.			
Was the driver wearing any identification?   ☐ Yes: ☐ United Did Badge ☐	form No		Name	Tag
Did the driver render an appropriate greeting?  Yes Driver regularly transports the rider, not	neces	sary		
If CTC has a policy on seat belts, did the driver ensure the passengers we	re pro	perly l	belted	?
Was the vehicle neat and clean, and free from dirt torn upholstery, damage	ged or	Yes	n seat	No
protruding metal or other objects?		Yes	I Scal	
Is there a sign posted on the interior of the vehicle with both a local phone	e num	ber an	d the	TD
Helpline for comments/complaints/commendations?	-	Yes		No
Does the vehicle have working heat and air conditioning?	U	Yes	П	No
Does the vehicle have two-way communications in good working order?	0	Yes		No
If used, was the lift in good working order?	0	Yes		No

Date of	Ride: 2-10-23				
CTC:	Marion Transit	_ County: _	Mar	ion	
If No,	please explain:				
Did the d	river properly use the lift and secure the passenger?		Yes		No
Was there	e safe and appropriate seating for all passengers?	Q	Yes		No

Funding Source	No. of Trips	No. of Riders/Beneficiaries	No. of Calls to Make	No. of Calls Made
CTD				
Medicaid				
Other				
Other	0.1			
Other)				
Other				
7 4 7 2				
			1 20	
			VI .	
Totals				

Number of Round Trips	Number of Riders/Beneficiaries to Survey
0 – 200	30%
201 – 1200	10%
1201 +	5%

Note: Attach the manifest

County: MARION			
Funding Source: 53/1			
on <u>⊃-10-23</u> ?			
tion to the co-payment?  Yes or No			
nsportation?			
1-2 Times/Week			
ion services?			
months have you been refused transportation services?			
3-5 Times			
6-10 Times refusing you transportation services?			
☐ Space not available			
☐ Destination outside service area			
for?			
Education/Training/Day Care			
☐ Life-Sustaining/Other			
on?			
pose problem from below			
have with your trip?			
☐ Cost			
ent			
☐ Accessibility			
☐ Late return pick up - length of wait			
t			

☐ Drivers - specify	☐ Reservations - specify le	ngth of wait
☐ Vehicle condition	☐ Other	
7) On a scale of 1 to 10 (10 being most sat	isfied) rate the transportation you have	been receiving.
8) What does transportation mean to you? use in publications.)	(Permission granted by	for
Additional Comments:		

Staff making call: <u>Liz Mit</u>	<u>ch</u> ell	County:	MARION
Date of Call: 2/10/23		Funding Source	e: <u>5311</u>
1) Did you receive transpor	tation service of	n_2/10/23	? Yes or No
2) Where you charged an ar	nount in additio	on to the co-payn	nent?   Yes or   No
If so, how much?			
3) How often do you norma	lly obtain trans	portation?	
☐ Daily 7 Days/Week ☐	Other 1	-2 Times/Week	☐ 3-5Times/Week
4) Have you ever been deni- ☐ Yes ☐ No. If no, skip to questi	on # 4		
The state of the s	The second secon		een refused transportation services?
None	E151	5 Times	
1-2 Times	OF REAL PROPERTY.	10 Times	
If none, skip to on B. What was the rea		fusing you trans	portation services?
☐ Ineligible	- /	pace not available	
☐ Lack of fund	s D	estination outside	e service area
☐ Other			
5) What do you normally us	e the service fo	r?	
☐ Medical	□ Е	lucation/Training	g/Day Care
☐ Employment	□ Li	fe-Sustaining/Ot	her
☐ Nutritional			
6) Did you have a problem	with your trip o	n	?
Yes. If yes, plea	se state or choo	se problem from	below
☑ No. If no, skip to What type of pro	The state of the s	ave with your tri	p?
☐ Advance noti	ce	☐ Cos	t
☐ Pick up times	not convenien	t 🛮 Late	e pick up-specify time of wait
☐ Assistance		☐ Acc	essibility
☐ Service Area	Limits	☐ Late	e return pick up - length of wait
			and the control of th

☐ Drivers - specify	☐ Reservations - specify length of wait
☐ Vehicle condition	☐ Other
1 9 1	sfied) rate the transportation you have been receiving.
8) What does transportation mean to you? (use in publications.)	(Permission granted by Royal for
Additional Comments:  Both Ton & L	Anny Aux GRATE

Staff making call: <u>Liz Mitchell</u> Date of Call: 2/10/23		ounty: M nding Source	ARION
1) Did you receive transportation	n service on	1/14/23	? ☐ Yes or ☐ No
2) Where you charged an amour	nt in addition to	the co-paym	ent?  Yes or  No
If so, how much?			
3) How often do you normally o	btain transporta	ition?	
☐ Daily 7 Days/Week ☐ Ot	her	imes/Week	3-5Times/Week
4) Have you ever been denied tr	ansportation ser	vices?	
Yes			
No. If no, skip to question #	4		
	ne last 6 months	have you be	en refused transportation services?
☐ None	□ None □ 3-5 Times		
☐ 1-2 Times	☐ 6-10 T	imes	
If none, skip to quest B. What was the reason p		ag vou transr	nortation comicae?
☐ Ineligible		not available	A RESIDENCE OF THE PARTY OF THE
☐ Lack of funds			
Other	L Desun	ation outside	service area
d one			
5) What do you normally use the	e service for?		
☐ Medical	☐ Educat	ion/Training	/Day Care
☐ Employment	☐ Employment ☐ Life-Sustaining/Other		ner
☐ Nutritional			
6) Did you have a problem with	your trip on	1/1/2	
Yes. If yes, please st		oblam from	halow
No. If no, skip to que		oblem nom	below
What type of problem		with your trip	5?
☐ Advance notice		☐ Cost	
☐ Pick up times not	convenient	☐ Late	pick up-specify time of wait
☐ Assistance		The state of the s	essibility
☐ Service Area Lim	its		return pick up - length of wait

☐ Drivers - specify	☐ Reservations - specify length of wait
☐ Vehicle condition	☐ Other
10	fied) rate the transportation you have been receiving.
What does transportation mean to you? (I use in publications.)	Permission granted by HepTh for
Additional Comments:	of Both drivers
AND STAAP	

Staff making call: Liz Mite	chell —	County:	MARION	
Date of Call: 2/10/23		Funding Source:	5311	
1) Did you receive transport	ation service o	n 21-9-23?	☐ Yes or ☐ No	
2) Where you charged an an	nount in additio	on to the co-payme	ent?  Yes or  No	
If so, how much?				
3) How often do you norma	lly obtain trans	portation?		
Daily 7 Days/Week	Other	2 Times/Week	☐ 3-5Times/Week	
4) Have you ever been denied	A STATE OF THE PARTY OF THE PAR	on services?		
☐ No. If no, skip to question	on # 4			
A. How many times    None	A few charter at the property of the principle of	ontns nave you bee -5 Times	en refused transportation services?	
1-2 Times		☐ 6-10 Times		
If none, skip to q B. What was the reas	uestion # 4.	A A AMERICA	ortation services?	
☐ Ineligible	I S	pace not available		
☐ Lack of fund	s $\square$ D	estination outside	service area	
Other				
5) What do you normally us	se the service for	or?		
☐ Medical		ducation/Training/	Day Care	
☐ Employment	01	ife-Sustaining/Oth	er	
☐ Nutritional				
6) Did you have a problem	with your trip o	m <u>a-9-83</u>		
☐ Yes. If yes, plea	se state or choo	ose problem from b	pelow	
No. If no, skip to What type of pro	14 to 7	nave with your trip	?	
☐ Advance not	A STATE OF THE PARTY OF THE PARTY OF	☐ Cost		
☐ Pick up times	s not convenier	nt 🛮 Late	pick up-specify time of wait	
☐ Assistance			essibility	
☐ Service Area	Limits		return pick up - length of wait	

☐ Drivers - specify	☐ Reservations - specify	length of wait	
☐ Vehicle condition	☐ Other		
7) On a scale of 1 to 10 (10 being most sati	sfied) rate the transportation you have	ve been receiving.	
8) What does transportation mean to you? use in publications.)	(Permission granted by	for	
Additional Comments:			

Staff making call: Liz Mitchell		County:		MARION		
Date of Call: 2/10 /2	3	Fund	ing Source:	5311		
1) Did you receive transpo	ortation serv	vice on Fei	day?	Yes or No		
2) Where you charged an	amount in a	ddition to the	e co-payme	nt?  Yes or  No		
If so, how much?						
3) How often do you norm	nally obtain	transportatio	n?			
☐ Daily 7 Days/Week	☐ Other	1-2 Time	es/Week	☐ 3-5Times/Week		
4) Have you ever been der	nied transpo	rtation service	ces?			
☐ No. If no, skip to ques A. How many time		t 6 months ha	ive you bee	n refused transportation services?		
☐ None		☐ 3-5 Time	s			
☐ 1-2 Times		☐ 6-10 Tim	es			
If none, skip to B. What was the re			you transpo	ortation services?		
☐ Ineligible		Space no	available			
☐ Lack of fun	ids	☐ Destination	on outside s	service area		
Other						
5) What do you normally	use the serv	ice for?				
☐ Medical		☐ Education/Training/Day Care				
☐ Employmen	nt	☐ Life-Sustaining/Other				
Nutritional		7				
6) Did you have a problen	n with your	trip on	?			
☐ Yes. If yes, ple		4, 5 3 4 4 4	lem from b	elow		
No. If no, skip	to question	# 6				
What type of p		you nave wit	- C	(		
		A-040-74	☐ Cost	NECESTAL CONTRACTOR		
☐ Pick up tim	es not conv	enient	-	pick up-specify time of wait		
☐ Assistance			= 1000	ssibility		
☐ Service Are	ea Limits		☐ Late	return pick up - length of wait		

Reservations - specify length of wait
☐ Other
atisfied) rate the transportation you have been receiving
? (Permission granted by for
organized with your
as-timing and what of how
with your service
cheat of all Love this service



# Scheduled Trips Summary - FL\_IVIarion For Time Period: 2/10/2023

Printed: 2/9/2023 3:05:03PM

0800 AM STWT)

Signat	ure 18m	LAWIN		es Out		Cash Tickets	
Customer Name	Pick Up Time	Pick Up Address	Drop Off Time	Drop Off Address	Mobility Type	Customer Pay	Telephone Ext.
May, Gordon	11:30:00AM	Rio Vista Community 18981 Sw 109th St Dunnellon, FL 34432	12:00:00PM	Workout Anytime 11352 N Williams St #201 Dunnellon, FL 34432	Ambulatory	\$ 0.00	(352) 804-7432
unding Source: 5 ssistance Needs:	2:00 pm 311 count Assorted	Cash Check No Charge	Pre-Purchased Tic				
	12:00:00PM	Workout Anytime 11352 N Williams St #201 Dunnellon, FL 34432	12:30:00PM	Rio Vista Community 18981Sw 109th St Dunnellon, FL 34432	Ambulatory	\$ 0.00	(352) 804-7432

Funding Source: 5311 Assistance Needs:

Fare Type: Account Assorted Cash Check No Charge Pre-Purchased Ticket Taxi Vouchers



Pick Up Time	Pick Up Address	Drop Off Time	Orop Off Address	Mobility Type	Customer Pay	Telephone Ext.
12-20 00 DM	22057 Sw Surf Blvd	1:00:00PM	Walmart 11012 N Williams St Dunnellon, FL 34432	Wheelchair Electric	\$ 0.00	(352) 697-3286
	12-20-00PM	Time Address  Rainbow Lakes Estates	Time Address Time  Rainbow Lakes Estates 22057 Sw Surf Blvd	Time Address Time Address  Rainbow Lakes Estates 22057 Sw Surf Blvd 11012 N Williams St	Time	Time

Funding Source: 5311

Assistance Needs: General Comments [uses electric w/c]

Fare Type : Account Assorted Cash Check No Charge Pre-Purchased Ticket Taxi Vouchers

	Klinski, Catherine		Rainbow Lake Estates 4525 Sw Azalea Ct Dunnellon, FL 34431		L.A. Salon & Spa 11582 N Williams St #504 Dunnellon, FL 34432	Ambulatory	\$ 0.00	(352) 208-1776
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Request Time: 1:30 pm Funding Source: 5311

Assistance Needs: Requires Door-to-Door assistance [GETS DIZZY]

Fare Type : Account Assorted Cash Check No Charge Pre-Purchased Ticket Taxi Vouchers

	Klinski, Catherine	2;30:00PM	L.A. Salon & Spa 11582 N Williams St #504 Dunnellon, FL 34432	3:00:00PM	Publix 11352 N Williams St Dunnellon, FL 34432	Ambulatory	\$ 0.00	(352) 208-1776
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Request Time: 3:00 pm Funding Source: 5311

Assistance Needs: Requires Door-to-Door assistance [GETS DIZZY]

Fare Type: Account Assorted Cash Check No Charge Pre-Purchased Ticket Taxi Vouchers

Randolph, Robert	3:00:00PM	Walmart 11012 N Williams St Dunnellon, FL 34432	3:30:00PM	Rainbow Lakes Estates 22057 Sw Surf Blvd Dunnellon, FL 34431	Wheelchair Electric	\$ 0.00	(352) 697-3286
Request Time: 3:0	00 pm						

Request Time: 3:00 pm Funding Source: 5311

Assistance Needs: General Comments [uses electric w/c]





Customer // Name	Pick Up Time	Pick Up Address	Drop Off Time	Drop Off Address	Mobility Type	Customer Pay	Telephone Ext,
are Type: Acc	ount Assorted	Cash Check No Charge F	re-Purchased Tid	cket Taxi Vouchers			
Klinski, Catherine		Publix 11352 N Williams St Dunnellon, FL 34432	4:00:00PM	Rainbow Lake Estates 4525 Sw Azalea Ct Dunnellon, FL 34431	Ambulatory	\$ 0.00	(352) 208-1776
Request Time: 4:0	0 pm						M.

Funding Source: 5311
Assistance Needs: Requires Door-to-Door assistance [GETS DIZZY]

Fare Type: Account Assorted Cash Check No Charge Pre-Purchased Ticket Taxi Vouchers

CALLIN!

VIC MARTINEZ

Publik 11352 U. Williams ST. BULUELLON, FI 34432 Heleu Burler -





Staff making call: Troug S  Date of Call: 2/10/2023	County: MARICA				
Date of Call: 2/10/2023	Funding Source:				
1) Did you receive transportation ser	vice on last fri day? Yes or No				
2) Where you charged an amount in	addition to the co-payment?   Yes or   No				
If so, how much?	Just 84				
3) How often do you normally obtain	transportation?				
☐ Daily 7 Days/Week ☐ Other					
4) Have you ever been denied transp	ortation services?				
☐ Yes					
No. If no, skip to question # 4  A. How many times in the last	at 6 months have you been refused transportation services?				
□ None	☐ 3-5 Times				
☐ 1-2 Times	☐ 6-10 Times				
If none, skip to question # B. What was the reason given	44. If for refusing you transportation services?				
☐ Ineligible	☐ Space not available				
☐ Lack of funds	☐ Destination outside service area				
Other					
5) What do you normally use the ser	vice for?				
Medical	☐ Education/Training/Day Care				
☐ Employment	** Life-Sustaining/Other Shopping				
☐ Nutritional					
6) Did you have a problem with your	2-3-2023 trip on last Friday?				
	r choose problem from below				
No. If no, skip to questio	n # 6				
	you have with your trip?				
Advance notice	Cost				
☐ Pick up times not con	venient				
☐ Assistance	☐ Accessibility				
☐ Service Area Limits	☐ Late return pick up - length of wait				

☐ Drivers - specify		☐ Reservations - specify length of wait				
☐ Vehicle con	ndition	☐ Other				
7) On a scale of 1 to 10 (1	0 being most satisfied)	rate the transportation you have be	en receiving.			
8) What does transportations use in publications.)  Additional Comments:	on mean to you? (Perm 14 means they 90 - Shopping	ission granted by take me where I wou g, to the DR,—t bring	for not to me night back			
-						

Staff making call: Iracy Stayter   Date of Call: 2/10 2023	County: Man CO  Funding Source:		
2,10 , 2 , 5	2.9.2023		
1) Did you receive transportation service	on yesterday? Kyes or 1 No		
2) Where you charged an amount in addit			
If so, how much?	Just		
3) How often do you normally obtain tran	sportation?		
☐ Daily 7 Days/Week ☐ Other ☐ Screeting	1-2 Times/Week 3-5Times/Week		
4) Have you ever been denied transportation			
☐ Yes			
No. If no, skip to question # 4  A. How many times in the last 6 m	nonths have you been refused transportation services?		
□ None □ :	3-5 Times		
☐ 1-2 Times ☐ 6	5-10 Times		
If none, skip to question # 4.			
B. What was the reason given for	refusing you transportation services?		
☐ Ineligible ☐ S	Space not available		
☐ Lack of funds ☐ 1	Destination outside service area		
Other			
5) What do you normally use the service	for?		
Medical 🔲 1	Education/Training/Day Care		
☐ Employment 🖳	fe-Sustaining/Other		
☐ Nutritional	Snopping		
	2.9.2023		
6) Did you have a problem with your trip			
☐ Yes. If yes, please state or cho			
No. If no, skip to question # 6 What type of problem did you			
☐ Advance notice	☐ Cost		
☐ Pick up times not convenie	nt		
☐ Assistance	☐ Accessibility		
☐ Service Area Limits	☐ Late return pick up - length of wait		

☐ Drivers - s	pecify	☐ Reservations - specify length of wait
☐ Vehicle co.	ndition	☐ Other
7) On a scale of 1 to 10 (1	0 being most satisfied)	rate the transportation you have been receiving.
8) What does transportations use in publications.)  Additional Comments:	on mean to you? (Perm It means I car I go to the Da	ission granted by <u>Coundace ludwig</u> for n get out of my nouse + get food 2. If I need to
"wonderful ser	rvice + wonde	rful that they care about
us seniors"	111111	

Staff making call: Toncy Suryton		-
Date of Call: 2/9/2023	Funding Source:	
1) Did you receive transportation service	Injects	l No
2) Where you charged an amount in addi-	tion to the co-payment? I Yes or A	No
If so, how much?	Seo \$2 eaen way	
3) How often do you normally obtain tran	nsportation? 2×1 month	
☐ Daily 7 Days/Week ☐ Other ☐	1-2 Times/Week 3-5Times/We	eek
4) Have you ever been denied transportat	ion services?	
☑ Yes		
☐ No. If no, skip to question # 4  A. How many times in the last 6 r	months have you been refused transpo	ortation services?
	3-5 Times	
☐ 1-2 Times ☐	6-10 Times	
If none, skip to question # 4.		
B. What was the reason given for	refusing you transportation services?	
☐ Ineligible ☐	Space not available  Would like to 1	
☐ Lack of funds ☐	Destination outside service area	
· not medical a	e purview of what they do " appointments or shopping	courthouse, cr
5) What do you normally use the service	for?	1000
	Education/Training/Day Care	
☐ Employment ☐	☐ Life-Sustaining/Other	
☐ Nutritional		
6) Did you have a problem with your trip	on?	
☐ Yes. If yes, please state or cho	pose problem from below	
No. If no, skip to question # 6 What type of problem did you		
Advance notice	☐ Cost	
☐ Pick up times not convenie		me of wait
☐ Assistance	☐ Accessibility	MA VI TIMIL
☐ Service Area Limits	☐ Late return pick up - le	ength of wait

☐ Drivers - specify	☐ Reservations - specify length of wait
☐ Vehicle condition	Other
7) On a scale of 1 to 10 (10 being most sati	sfied) rate the transportation you have been receiving.
8) What does transportation mean to you? use in publications.)	(Permission granted by <u>Roberta Jussel</u> for
Additional Comments:	
Extremely important other	misel wouldn't be able to go te
my doctors appointments.	Its critical,

Staff making call: TRACY SURYTEN Date of Call: 2/9 /2023	County: Manch Funding Source:
1) Did you receive transportation ser	vice on yesterday? Kyes or \ No
2) Where you charged an amount in	addition to the co-payment?   Yes or No
If so, how much?	pays nothing for DR. appts + \$2 each way if she goes shopping
3) How often do you normally obtain	transportation?
☐ Daily 7 Days/Week ☐ Other	☐ 1-2 Times/Week ☐ 3-5Times/Week
4) Have you ever been denied transp	ortation services?
☐ Yes	
No. If no, skip to question #4	
	at 6 months have you been refused transportation services?
□ None	☐ 3-5 Times
☐ 1-2 Times	☐ 6-10 Times
If none, skip to question #	4 4.  I for refusing you transportation services?
☐ Ineligible	☐ Space not available
☐ Lack of funds	☐ Destination outside service area
Other	Fig. 1804 Action of the Astrophysical Street
5) What do you normally use the ser	vice for?
Medical	☐ Education/Training/Day Care
☐ Employment	☐ Life-Sustaining/Other
☐ Nutritional	
	21812023
6) Did you have a problem with your	
Yes. If yes, please state of	r choose problem from below
No. If no, skip to question What type of problem did	n # 6 you have with your trip?
☐ Advance notice	☐ Cost
☐ Pick up times not con	venient
☐ Assistance	☐ Accessibility
☐ Service Area Limits	☐ Late return pick up - length of wait

☐ Reservations - specify length of wait
Other
ed) rate the transportation you have been receiving
rmission granted by for
n't drive"
]

Staff making call: Susan Hankey Date of Call: 2/13/2023	County: Marion Funding Source:
1) Did you receive transportation service	
2) Where you charged an amount in addit	
	\$2.00 each time
3) How often do you normally obtain tran	•
☐ Daily 7 Days/Week ☐ Other ☐	1-2 Times/Week ☐ 3-5Times/Week
4) Have you ever been denied transportati  ☐ Yes	on services?
No. If no, skip to question # 4  A. How many times in the last 6 n	nonths have you been refused transportation services?
□ None □ 3	3-5 Times
☐ 1-2 Times ☐ 6	5-10 Times
If none, skip to question # 4. B. What was the reason given for	refusing you transportation services?
☐ Ineligible ☐ S	Space not available
☐ Lack of funds ☐ I	Destination outside service area
☐ Other	
5) What do you normally use the service f	for?
	Education/Training/Day Care
Employment I	
☐ Nutritional	interested in possible
6) Did you have a problem with your trip	on?
☐ Yes. If yes, please state or cho	ose problem from below
No. If no, skip to question # 6 What type of problem did you	have with your trip?
Advance notice	□ Cost
☐ Pick up times not convenie	
☐ Assistance	☐ Accessibility
☐ Service Area Limits	
- Service Area Lillins	Late return pick up - length of wait

☐ Drivers - specify	☐ Reservations - specify length of wait
☐ Vehicle condition	Other
7) On a scale of 1 to 10 (10 being most sa	tisfied) rate the transportation you have been receiving.
8) What does transportation mean to you? use in publications.)	(Permission granted by for
Additional Comments:	
Everything has been	great. The drivers are
wonderful.	

Staff making call: Susan Hand Date of Call: 2/13/2023	ey Cou Fun	unty: Marion ding Source:
1) Did you receive transportation se	ervice on <u>Z/</u>	69/2023 ? ■ Yes or ■ No
2) Where you charged an amount in	addition to t	the co-payment?   Yes or   No
If so, how much?		\$2,00 a ride
3) How often do you normally obta		
☐ Daily 7 Days/Week ☐ Other	1-2 Ti	mes/Week 3-5Times/Week
4) Have you ever been denied trans ☐ Yes ☐ No. If no, skip to question # 4	portation serv	vices?
	ast 6 months	have you been refused transportation services?
□ None	☐ 3-5 Tin	nes
☐ 1-2 Times	☐ 6-10 Ti	imes
If none, skip to question B. What was the reason giv		ng you transportation services?
☐ Ineligible		not available
☐ Lack of funds	☐ Destina	ation outside service area
☐ Other	4	
5) What do you normally use the se	ervice for?	
Medical		ion/Training/Day Care
☐ Employment	☐ Life-Su	ustaining/Other
☐ Nutritional		
6) Did you have a problem with yo	ur trip on	?
☐ Yes. If yes, please state		
No. If no, skip to questi What type of problem d		with your trip?
☐ Advance notice		☐ Cost
☐ Pick up times not co	nvenient	☐ Late pick up-specify time of wait
☐ Assistance		☐ Accessibility
☐ Service Area Limits		☐ Late return pick up - length of wait

☐ Drivers - specify	Reservations - specify length of wait
☐ Vehicle condition	☐ Other
7) On a scale of 1 to 10 (10 being most sati	sfied) rate the transportation you have been receiving.
8) What does transportation mean to you? use in publications.)	(Permission granted by for
Additional Comments:	
Uses a walker and is ve	ery slow. The drivers treat me
with "great dignity, Kinx	dness, and patience?

Staff making call: Susan Date of Call: 2/B/2023	Hanley Co Fu	unty: Marion
1) Did you receive transportation		63/2023? ■ Yes or □ No
2) Where you charged an amou		the co-payment?  Yes or  No
If so, how much?		test \$4,00 each time
3) How often do you normally	obtain transporta	tion?
☐ Daily 7 Days/Week ☐ O	ther 1-2 Ti	mes/Week 3-5Times/Week
4) Have you ever been denied t	ransportation ser	vices?
No. If no, skip to question		
		have you been refused transportation services?
□ None	☐ 3-5 Tir	
1-2 Times	☐ 6-10 T	imes
If none, skip to ques B. What was the reason		ng you transportation services?
☐ Ineligible	☐ Space	not available
☐ Lack of funds	☐ Destina	ation outside service area
Other	_	
5) What do you normally use th	ne service for?	
Medical	<u> </u>	ion/Training/Day Care
☐ Employment	☐ Life-St	ustaining/Other
Nutritional -gr	roceries	
6) Did you have a problem with	your trip on	?
☐ Yes. If yes, please s	tate or choose pr	oblem from below
No. If no, skip to qu	iestion # 6	
What type of proble	m did you have	with your trip?
☐ Advance notice		☐ Cost
☐ Pick up times no	t convenient	☐ Late pick up-specify time of wait
☐ Assistance		☐ Accessibility
☐ Service Area Lir	nits	☐ Late return pick up - length of wait

☐ Drivers - specify	☐ Reservations - specify length of wait
☐ Vehicle condition	Other
7) On a scale of 1 to 10 (10 being most sa	atisfied) rate the transportation you have been receiving
8) What does transportation mean to you? use in publications.)	? (Permission granted by for
Additional Comments:	
They have changed my	life. I have no car. I go to
Mid-Florida Therapy a	nd it is the only way I can
get there,	

Date of Call: 2/13 / 2023	ey County: Marion
Date of Call: 2/13/2023	Funding Source:
1) Did you receive transportation serv	vice on 2/3/2023? Yes or No
2) Where you charged an amount in a	addition to the co-payment?   Yes or No
If so, how much?	
3) How often do you normally obtain	transportation?
☐ Daily 7 Days/Week ☐ Other	☐ 1-2 Times/Week ☐ 3-5Times/Week
4) Have you ever been denied transpo	ortation services? M-W-F dalysis
No. If no, skip to question #4 A. How many times in the las	t 6 months have you been refused transportation services?
□ None	☐ 3-5 Times
☐ 1-2 Times	☐ 6-10 Times
If none, skip to question # B. What was the reason given	4. for refusing you transportation services?
☐ Ineligible	☐ Space not available
☐ Lack of funds	☐ Destination outside service area
☐ Other	
5) What do you normally use the serv	rice for?
Medical	☐ Education/Training/Day Care
☐ Employment	☐ Life-Sustaining/Other
☐ Nutritional	
6) Did you have a problem with your	trip on?
Yes. If yes, please state or	choose problem from below
No. If no, skip to question What type of problem did	
☐ Advance notice	☐ Cost
☐ Pick up times not conv	renient
☐ Assistance	☐ Accessibility
☐ Service Area Limits	☐ Late return pick up - length of wait

☐ Drivers - specify	☐ Reservations - specify length of wait
☐ Vehicle condition	Other
7) On a scale of 1 to 10 (10 being most sat	isfied) rate the transportation you have been receiving
8) What does transportation mean to you? use in publications.)	(Permission granted by for
Additional Comments:	
The drivers are very pers	sonable and good drivers too.
Sometimes have to wait	- a long time to get picked up
to go home after dialysi	is but does not complain

1) Did you receive transportation service on	Staff making call: Susan Han Date of Call: 2/14/2023	Cour Fund	nty: Marion ding Source:		
If so, how much?  3) How often do you normally obtain transportation?  Daily 7 Days/Week  Other  1-2 Times/Week  3-5Times/Week  4) Have you ever been denied transportation services?  Yes  No. If no, skip to question # 4  A. How many times in the last 6 months have you been refused transportation services?  None  3-5 Times  1-2 Times  6-10 Times  If none, skip to question # 4.  B. What was the reason given for refusing you transportation services?  Ineligible  Space not available  Lack of funds  Destination outside service area  Other  5) What do you normally use the service for?  Medical  Education/Training/Day Care  Employment  Life-Sustaining/Other  Nutritional  6) Did you have a problem with your trip on?  Yes. If yes, please state or choose problem from below  No. If no, skip to question # 6  What type of problem did you have with your trip?  Advance notice  Cost Pick up times not convenient Late pick up-specify time of wait	1) Did you receive transportation so	ervice on <u> </u>	3/2023 ? ∑ Yes or □ No		
3) How often do you normally obtain transportation?  Daily 7 Days/Week  1-2 Times/Week  3-5 Times/Week  4) Have you ever been denied transportation services?  Yes  No. If no, skip to question # 4  A. How many times in the last 6 months have you been refused transportation services?  None  3-5 Times  1-2 Times  6-10 Times  If none, skip to question # 4.  B. What was the reason given for refusing you transportation services?  Ineligible  Space not available  Lack of funds  Destination outside service area  Other  5) What do you normally use the service for?  Medical Education/Training/Day Care  Employment Life-Sustaining/Other  Nutritional  6) Did you have a problem with your trip on?  Yes. If yes, please state or choose problem from below  No. If no, skip to question # 6  What type of problem did you have with your trip?  Advance notice	2) Where you charged an amount in	addition to th	ne co-payment?   Yes or   No		
□ Daily 7 Days/Week □ Other ☑ 1-2 Times/Week □ 3-5Times/Week  4) Have you ever been denied transportation services? □ Yes ☑ No. If no, skip to question # 4  A. How many times in the last 6 months have you been refused transportation services? □ None □ 3-5 Times □ 1-2 Times □ 6-10 Times If none, skip to question # 4.  B. What was the reason given for refusing you transportation services? □ Ineligible □ Space not available □ Lack of funds □ Destination outside service area □ Other □ Other □ Life-Sustaining/Day Care □ Employment □ Life-Sustaining/Other □ Nutritional  6) Did you have a problem with your trip on □ ? □ Yes. If yes, please state or choose problem from below ○ No. If no, skip to question # 6 ○ What type of problem did you have with your trip? □ Advance notice □ Cost □ Pick up times not convenient □ Late pick up-specify time of wait	If so, how much?				
4) Have you ever been denied transportation services?  Yes  No. If no, skip to question #4  A. How many times in the last 6 months have you been refused transportation services?  None 3-5 Times 1-2 Times 6-10 Times If none, skip to question #4.  B. What was the reason given for refusing you transportation services? Ineligible Space not available Lack of funds Destination outside service area Other  Shadical Education/Training/Day Care Employment Shadical Life-Sustaining/Other Nutritional  6) Did you have a problem with your trip on Yes. If yes, please state or choose problem from below No. If no, skip to question #6 What type of problem did you have with your trip? Advance notice Pick up times not convenient Late pick up-specify time of wait	3) How often do you normally obta				
No. If no, skip to question # 4  A. How many times in the last 6 months have you been refused transportation services?  None 3-5 Times  1-2 Times 6-10 Times  If none, skip to question # 4.  B. What was the reason given for refusing you transportation services?  Ineligible Space not available  Lack of funds Destination outside service area  Other	☐ Daily 7 Days/Week ☐ Other	1-2 Tin	nes/Week 3-5Times/Week		
No. If no, skip to question # 4  A. How many times in the last 6 months have you been refused transportation services?  None 3-5 Times  1-2 Times 6-10 Times  If none, skip to question # 4.  B. What was the reason given for refusing you transportation services?  Ineligible Space not available  Lack of funds Destination outside service area  Other  5) What do you normally use the service for?  Medical Education/Training/Day Care  Employment Life-Sustaining/Other  Nutritional  6) Did you have a problem with your trip on?  Yes. If yes, please state or choose problem from below  No. If no, skip to question # 6  What type of problem did you have with your trip?  Advance notice Cost  Pick up times not convenient Late pick up-specify time of wait	4) Have you ever been denied trans	portation serv	ices?		
A. How many times in the last 6 months have you been refused transportation services?  None 3-5 Times 1-2 Times 6-10 Times If none, skip to question # 4.  B. What was the reason given for refusing you transportation services? Ineligible Space not available Lack of funds Destination outside service area Other  Shadical Education/Training/Day Care Employment Life-Sustaining/Other Nutritional  6) Did you have a problem with your trip on? Yes. If yes, please state or choose problem from below No. If no, skip to question # 6 What type of problem did you have with your trip? Advance notice Cost Pick up times not convenient Late pick up-specify time of wait					
None		la é arianta t			
☐ 1-2 Times ☐ 6-10 Times  If none, skip to question # 4.  B. What was the reason given for refusing you transportation services? ☐ Ineligible ☐ Space not available ☐ Lack of funds ☐ Destination outside service area ☐ Other			: '프로스타트'), '성용, '성명, '(이 1일 기업이 대한 기업이 대한 기업이 가입니다.		
If none, skip to question # 4.  B. What was the reason given for refusing you transportation services?    Ineligible					
B. What was the reason given for refusing you transportation services?    Ineligible			nes		
□ Lack of funds □ Destination outside service area □ Other			g you transportation services?		
Other  5) What do you normally use the service for?  Medical	☐ Ineligible	☐ Space no	ot available		
5) What do you normally use the service for?    Medical	☐ Lack of funds	☐ Destinat	ion outside service area		
Medical	Other	-			
☐ Employment ☐ Life-Sustaining/Other ☐ Nutritional  6) Did you have a problem with your trip on? ☐ Yes. If yes, please state or choose problem from below No. If no, skip to question # 6 What type of problem did you have with your trip? ☐ Advance notice ☐ Cost ☐ Pick up times not convenient ☐ Late pick up-specify time of wait	5) What do you normally use the se	ervice for?			
On Nutritional	Medical	☐ Education	on/Training/Day Care		
6) Did you have a problem with your trip on?  Yes. If yes, please state or choose problem from below  No. If no, skip to question # 6  What type of problem did you have with your trip?  Advance notice  Cost  Pick up times not convenient  Late pick up-specify time of wait			staining/Other		
☐ Yes. If yes, please state or choose problem from below  No. If no, skip to question # 6  What type of problem did you have with your trip?  ☐ Advance notice ☐ Cost  ☐ Pick up times not convenient ☐ Late pick up-specify time of wait	☐ Nutritional				
No. If no, skip to question # 6 What type of problem did you have with your trip?  Advance notice  Cost  Pick up times not convenient  Late pick up-specify time of wait	6) Did you have a problem with you	ur trip on	?		
What type of problem did you have with your trip?  ☐ Advance notice ☐ Cost ☐ Pick up times not convenient ☐ Late pick up-specify time of wait	☐ Yes. If yes, please state	or choose pro	blem from below		
☐ Advance notice ☐ Cost ☐ Pick up times not convenient ☐ Late pick up-specify time of wait			ith your trin?		
☐ Pick up times not convenient ☐ Late pick up-specify time of wait		id you have w	( ) ( <u>) 1</u> ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (		
		nvaniant			
I L Assistance I L Accessibility		nycinciit	☐ Accessibility		
☐ Service Area Limits ☐ Late return pick up - length of wait					

☐ Drivers - specify	☐ Reservations - specify	length of wait
☐ Vehicle condition	☐ Other	
7) On a scale of 1 to 10 (10 being most sat	tisfied) rate the transportation you ha	we been receiving.
8) What does transportation mean to you? use in publications.)	(Permission granted by	for
Additional Comments:		
It has been a very good	experience for me.	

Staff making call: Jeffrey Asker Date of Call: //21/23		ounty: MA	cio~	
Did you receive transportati	on service on	1/24/2	?	
2) Where you charged an amou	unt in addition to	the co-paym	nent?  Yes or No	
If so, how much?				
3) How often do you normally	obtain transport	ation?		
☐ Daily 7 Days/Week ☐ C	Other 1-2 T	imes/Week	☐ 3-5Times/Week	
4) Have you ever been denied t	transportation se	rvices?		
		s have you be	en refused transportation services?	
□ None	☐ 3-5 Ti	☐ 3-5 Times		
If none, skip to question # 4.		imes		
B. What was the reason		ng you transp	portation services?	
☐ Ineligible		not available	TROUGHT SAND SAND SAND	
☐ Lack of funds	Destin	ation outside	service area	
☐ Other				
5) What do you normally use th	ne service for?			
Medical	## 이번 <u>프</u> 로 (10년 1일 년	ion/Training	/Day Care	
TO THE SECURITY OF THE SECURI		ustaining/Oth	staining/Other	
☐ Nutritional		ANG 200		
6) Did you have a problem with	your trip on			
☐ Yes. If yes, please s	tate or choose pr	oblem from	below	
No. If no, skip to qu What type of proble		with your trip	?	
☐ Advance notice		☐ Cost		
Pick up times no	t convenient	☐ Late	pick up-specify time of wait	
☐ Assistance		-	ssibility	
☐ Service Area Limits		☐ Late	return pick up - length of wait	

☐ Drivers - specify	Reservations - specify length of wait
☐ Vehicle condition	Other
7) On a scale of 1 to 10 (10 being most satisfied)  8) What does transportation mean to you? use in publications.)	sfied) rate the transportation you have been receiving  Hehry  (Permission granted by wykoff for
Additional Comments:	
Jor't Know What	I WOULD Do. Legally
BLIND.	
need suc for	Shopping I.E. NEW
- need svc for phone from ver	rizon -
	oublix store; instead
of Aldi/Walmar	7

Staff making call: Deffrey Date of Call: 1/2023	ASKEWC	ounty:_MAn	hoi
Date of Call: 1/21/2023	F	unding Source: _	
1) Did you receive transportation	service on 1	7 Jan 27 9	Yes or No
2) Where you charged an amount	t in addition to	the co-payment	t? Yes or No
If so, how much?			
3) How often do you normally ob	otain transport	ation?	
☐ Daily 7 Days/Week ☐ Oth	ner 🛭 1-2 T	imes/Week [	3-5Times/Week
4) Have you ever been denied tra	nsportation se	rvices?	
No. If no, skip to question # 4		s <b>p</b> alalah salam <b>s</b> i barah	
A. How many times in the	e last 6 months  3-5 Ti		refused transportation service
☐ 1-2 Times	☐ 6-10 T		
If none, skip to question  B. What was the reason gives	on # 4.		ation services?
☐ Ineligible	☐ Space not available		
☐ Lack of funds	☐ Destination outside service area		
☐ Other	777	A THE PERSON	
5) What do you normally use the	service for?		
Medical	Marin In Co., part of the Co.	tion/Training/Da	v Care
☐ Employment	Value of the said	ustaining/Other	
☐ Nutritional			
6) Did you have a problem with y	our trip on	?	
☐ Yes. If yes, please stat	te or choose pr	roblem from bel	ow
No. If no, skip to ques What type of problem		with your trip?	
☐ Advance notice		☐ Cost	
☐ Pick up times not c	onvenient	☐ Late pic	k up-specify time of wait
☐ Assistance	14 74	☐ Accessi	A STATE OF THE RESIDENCE OF THE RESIDENC
			ATTACA ST. MARKET OF MARKET AND ADMINISTRATION OF THE PARTY OF THE PAR

☐ Drivers - specify ☐ Vehicle condition	☐ Reservations - specify length of wait ☐ Other
7) On a scale of 1 to 10 (10 being most sati	isfied) rate the transportation you have been receiving
B) What does transportation mean to you? use in publications.)	(Permission granted by Linda schehl for A ride to Appt.
Additional Comments:	

Staff making call: Jeffrey As Date of Call: 1/27/23	KEN CO	ounty: MA	rism
Date of Call: 1/27/23	Fu	inding Source:	
1) Did you receive transportation		7	
2) Where you charged an amoun	t in addition to	the co-paymen	nt? Yes or No
If so, how much?			
3) How often do you normally of	btain transporta	ition?	
☐ Daily 7 Days/Week ☐ Oth	ner 1 1-2 T	imes/Week	☐ 3-5Times/Week
4) Have you ever been denied tra  ☐ Yes	insportation ser	rvices?	
No. If no, skip to question #	4		
Control of the contro			refused transportation services
☐ None	☐ 3-5 Times		
☐ 1-2 Times	☐ 6-10 T	imes	
If none, skip to question B. What was the reason g		ng you transpor	tation services?
☐ Ineligible	☐ Space not available		AND TO VOUSTON
☐ Lack of funds	☐ Destination outside service area		
☐ Other			A STATE OF THE STA
5) What do you normally use the	service for?		
Medical		ion/Training/D	ay Care
☐ Employment	☐ Life-Sustaining/Other		23 CO. C.
☐ Nutritional		The state of the s	
6) Did you have a problem with y	our trip on	121/230	
☐ Yes. If yes, please star			low
No. If no, skip to ques What type of problem	stion # 6		
☐ Advance notice		☐ Cost	
☐ Pick up times not o	convenient	☐ Late pi	ck up-specify time of wait
☐ Assistance		☐ Access	
☐ Service Area Limit	ts		turn pick up - length of wait

☐ Drivers - specify	☐ Reservations - specify length of wait
☐ Vehicle condition	☐ Other
7) On a scale of 1 to 10 (10 being most sati	isfied) rate the transportation you have been receiving.
8) What does transportation mean to you? use in publications.)	(Permission granted by KC STARKS for
Additional Comments:	
	1 1 1 1
means weigh.	-s to me. couldn't
nears weigh.	ed to Go. I.E. My docto

Staff making call: UE Hray AS	KEW	County: MANION Funding Source:		
Date of Call: 1/7/23		Funding Source:		
1) Did you receive transportation s	ervice on	1/26/23? Yes or No		
2) Where you charged an amount is	n addition	to the co-payment?  Yes or No		
If so, how much?				
3) How often do you normally obta		ATTENDED TO A STATE OF THE PARTY OF THE PART		
☐ Daily 7 Days/Week ☐ Other	□ 1-2	? Times/Week 3-5Times/Week		
4) Have you ever been denied trans	portation	services?		
	ast 6 mon	ths have you been refused transportation services?		
☐ None	□ 3-5	□ 3-5 Times		
		Times		
If none, skip to question B. What was the reason give		using you transportation services?		
☐ Ineligible ☐ Space		ce not available		
☐ Lack of funds	☐ Destination outside service area			
☐ Other				
5) What do you normally use the se	rvice for?			
		cation/Training/Day Care		
☐ Employment				
☐ Nutritional				
6) Did you have a problem with you	ır trip on _	?		
☐ Yes. If yes, please state	or choose	problem from below		
No. If no, skip to question				
✓ What type of problem di  ☐ Advance notice	a you nav			
	A. A. Tu	Cost		
☐ Pick up times not con	rvenient	☐ Late pick up-specify time of wait		
☐ Assistance		☐ Accessibility		
☐ Service Area Limits		☐ Late return pick up - length of wait		

☐ Drivers - specify	☐ Reservations - specify length of wait
☐ Vehicle condition	☐ Other
7) On a scale of 1 to 10 (10 being most sati	sfied) rate the transportation you have been receiving.
8) What does transportation mean to you? use in publications.)	(Permission granted by Dehnis, ROEll for
Additional Comments:	
I wouldn't Be KE	chair bound.
Appt. wheel	chair bound.
*	

Staff making call: 13 (and an Date of Call: 2/13/23	Palerma Cou Fur	unty: Marron Inding Source: Transportation	Dreatvantage		
1) Did you receive transportation		Δ	ð		
2) Where you charged an amoun	t in addition to t	the co-payment? 🛘 Yes or 🗀 No			
If so, how much?					
3) How often do you normally o  ☐ Daily 7 Days/Week ☐ Otl	_	tion? mes/Week			
4) Have you ever been denied tra	ansportation serv	vices?			
☐ No. If no, skip to question # A. How many times in th		have you been refused transportation	services?		
☐ None	☐ 3-5 Tim	nes			
1-2 Times	☐ 6-10 Ti	mes			
If none, skip to quest		g you transportation services?			
	Space r				
C		ation outside service area			
Other		ation outside service area			
5) What do you normally use the	_	ion/Training/Day Cara			
_	☐ Medical       ☐ Education/Training/Day Care         ☐ Employment       ☐ Life-Sustaining/Other				
_	LI Life-Su	istaining/Otner			
☐ Nutritional					
6) Did you have a problem with	your trip on	?			
☐ Yes. If yes, please sta	ate or choose pr	oblem from below			
☐ No. If no, skip to que					
What type of problem	i did you have v	_			
Advance notice		Cost			
Pick up times not	convenient	☐ Late pick up-specify time of	wait		
☐ Assistance		☐ Accessibility	☐ Accessibility		
☐ Service Area Lim	its	Late return pick up - length	of wait		

☐ Drivers - specify	Reservations - specify length of wait
☐ Vehicle condition	☐ Other
7) On a scale of 1 to 10 (10 being most satisfied) r	rate the transportation you have been receiving.
8) What does transportation mean to you? (Permi use in publications.)	ssion granted by Sadye Hughesfor
Additional Comments:	
Phone number was discon	mocted.

Staff making call: Brandan Pal	erma	County: Marion			
Date of Call: 2/13/23		Funding Source: Transportation Disadvantag			
1) Did you receive transportation se	ervice on	Yes or No			
2) Where you charged an amount ir	additio	n to the co-payment?    Yes or    No			
If so, how much?					
3) How often do you normally obta					
☐ Daily 7 Days/Week ☐ Other	□ 1.	-2 Times/Week 3-5Times/Week			
4) Have you ever been denied trans  Yes	portatio	n services?			
☐ No. If no, skip to question # 4					
		nths have you been refused transportation services?			
□ None		3-5 Times			
1-2 Times		10 Times			
If none, skip to question B. What was the reason give		fusing you transportation services?			
_		☐ Space not available			
☐ Lack of funds		☐ Destination outside service area			
- Other					
5) What do you normally use the se	ervice fo	r?			
☐ Medical	☐ Ed	☐ Education/Training/Day Care			
☐ Employment	Li	fe-Sustaining/Other			
☐ Nutritional					
6) Did you have a problem with you	ur trip oı	n?			
☐ Yes. If yes, please state	or choo	se problem from below			
☐ No. If no, skip to questi What type of problem d		ave with your trip?			
☐ Advance notice	•	☐ Cost			
☐ Pick up times not co	nvenient	Late pick up-specify time of wait			
☐ Assistance		☐ Accessibility			
☐ Service Area Limits		☐ Late return pick up - length of wait			

☐ Drivers - specify	Reservations - specify length of wait
☐ Vehicle condition	☐ Other
7) On a scale of 1 to 10 (10 being most satis	sfied) rate the transportation you have been receiving.
8) What does transportation mean to you? (use in publications.)	Permission granted by Wanda Hawkins for
Additional Comments:	
Not interested.	

Staff making call: Brandon Pal	usma Count	y: Macien		
Staff making call: Brandon Pal Date of Call: 2/7/23	Fundi	ng Source: Transportation	Disadvantag	
1) Did you receive transportation ser				
2) Where you charged an amount in	addition to the	co-payment?  Yes or  No		
If so, how much?				
3) How often do you normally obtain	/.			
☐ Daily 7 Days/Week ☐ Other	✓ 1-2 Time	s/Week		
4) Have you ever been denied transp  ☐ Yes	ortation service	es?		
No. If no, skip to question # 4				
_		ve you been refused transportatio	n services?	
☐ None	☐ 3-5 Times			
1-2 Times	☐ 6-10 Time	es		
If none, skip to question # B. What was the reason given		you transportation services?		
Ineligible	Space not available			
☐ Lack of funds	•			
Other	_ Destinatio	n outside service uncu		
5) What do you normally use the ser-	vice for?			
☑ Medical		/Training/Day Care		
☐ Employment				
☐ Nutritional				
6) Did you have a problem with your	trip on <u>21</u>	7/23?		
☐ Yes. If yes, please state of				
No. If no, skip to question	n # 6			
What type of problem did	you have with	your trip?		
☐ Advance notice		☐ Cost		
☐ Pick up times not convenient		☐ Late pick up-specify time of	wait	
☐ Assistance		☐ Accessibility		
☐ Service Area Limits		☐ Late return pick up - length	of wait	

☐ Drivers - specify	☐ Reservations - specify length of wait
☐ Vehicle condition	☐ Other
7) On a scale of 1 to 10 (10 being most satisfied)	rate the transportation you have been receiving.
8) What does transportation mean to you? (Perm use in publications.)	ission granted by Gladys Harris for
Additional Comments:	
Survival. I love Marian	Transit, all of the drivers,
and I appreciate it all	the time.

☐ Drivers - specify	☐ Reservations - specify length of wait
☐ Vehicle condition	Other
7) On a scale of 1 to 10 (10 being most sati	isfied) rate the transportation you have been receiving.
8) What does transportation mean to you? use in publications.)	(Permission granted by Alfred Hames for
Additional Comments:	
It helps me alat	because I can hardly walk,
I'm 86.	

Staff making call: Brandon Po Date of Call: 2/2/23	County: Funding	Marie g Source: T	ransportation	Disalvanta
1) Did you receive transportation se	rvice on <u>1/31</u>	123 ?	Yes or No	,
2) Where you charged an amount in	addition to the co	o-payment?	☐ Yes or ☐ No	
If so, how much?				
3) How often do you normally obtai ☐ Daily 7 Days/Week ☐ Other			3-5Times/Week	
4) Have you ever been denied transp	ortation services	;?		
Yes				
No. If no, skip to question # 4  A. How many times in the la	et 6 months have	vou boon w	ofused transportati	ion gomicos?
None	3-5 Times	, you been it	rused transportati	on services:
1-2 Times	☐ 6-10 Times			
If none, skip to question				
B. What was the reason give	n for refusing you	u transporta	tion services?	
☐ Ineligible	☐ Space not av	vailable		
☐ Lack of funds	☐ Destination	outside serv	vice area	
Other				
5) What do you normally use the ser	vice for?			
Medical		raining/Day	Care	
☐ Employment	Life-Sustain	ning/Other		
☐ Nutritional				
6) Did you have a problem with you	r trip on 1/31/	(23?		
☐ Yes. If yes, please state of			w	
No. If no, skip to question				
What type of problem die		your trip?		
☐ Advance notice	1	☐ Cost		
☐ Pick up times not con	venient	☐ Late pick	c up-specify time of	of wait
☐ Assistance		☐ Accessib	ility	
☐ Service Area Limits	1	☐ Late retu	rn pick up - length	ı of wait

☐ Drivers - specify	☐ Reservations - specify length of wait
☐ Vehicle condition	Other
7) On a scale of 1 to 10 (10 being most satisfied) r	ate the transportation you have been receiving.
8) What does transportation mean to you? (Permisuse in publications.)	ssion granted by Barbara George for
Additional Comments:	
Every driver has been so eyesight, and they are so	1 - ()
I am so glad the service	e is in Ocala.

Staff making call: Brandon Falumo	County: Marion	
Date of Call: 1/26/23	Funding Source: Transportation Disadvantage	
1) Did you receive transportation service on	U	
2) Where you charged an amount in addition	n to the co-payment?  Yes or  No	
If so, how much?		
B) How often do you normally obtain transp	ortation?	
☐ Daily 7 Days/Week ☐ Other ☐ 1-	2 Times/Week ☐ 3-5Times/Week	
4) Have you ever been denied transportation	services?	
Yes		
No. If no, skip to question # 4		
<u> </u>	nths have you been refused transportation services?	
	Times	
	0 Times	
If none, skip to question # 4. B. What was the reason given for ref	dising you transportation services?	
☐ Ineligible ☐ Spa		
☐ Lack of funds ☐ De		
Other	stination outside service area	
5) What do you normally use the service for	?	
Medical		
☐ Employment ☐ Lif		
☐ Nutritional		
6) Did you have a problem with your trip on	1/25/23?	
☐ Yes. If yes, please state or choos	e problem from below	
No. If no, skip to question # 6		
What type of problem did you ha	ve with your trip?	
☐ Advance notice	☐ Cost	
☐ Pick up times not convenient	☐ Late pick up-specify time of wait	
☐ Assistance	☐ Accessibility	
☐ Service Area Limits	☐ Late return pick up - length of wait	

☐ Drivers - specify	☐ Reservations - specify length of wait
☐ Vehicle condition	☐ Other
7) On a scale of 1 to 10 (10 being most satisfied) rat	e the transportation you have been receiving.
8) What does transportation mean to you? (Permiss use in publications.)	ion granted by Pauline Farmah for
Additional Comments:	
I walk with a case, and	I wouldn't be able to
move to Ocala without :	Ł.

Staff making call: Brandon Pal Date of Call: 2/3/23	Count Fundi	: Marion g Source: Transpor	tation Disadvantage
1) Did you receive transportation ser		*	0
2) Where you charged an amount in	addition to the	o-payment? 🛮 Yes	or <b>V</b> No
If so, how much?			
3) How often do you normally obtain  Daily 7 Days/Week  Other	n transportation  1-2 Time	? ∕Week ☑ 3-5Time	s/Week
4) Have you ever been denied transp  Yes	ortation servic	s?	
No. If no, skip to question # 4  A. How many times in the last	<u> </u>	e you been refused tra	nsportation services?
□ None	☐ 3-5 Times		
1-2 Times	☐ 6-10 Time		
If none, skip to question #B. What was the reason given		ou transportation servi	ces?
☐ Ineligible	☐ Space not		
☐ Lack of funds	_	outside service area	
Other	-		
5) What do you normally use the ser	vice for?		
☑ Medical	☐ Education	Γraining/Day Care	
☐ Employment	☐ Life-Susta	ning/Other	
☐ Nutritional			
6) Did you have a problem with you	r trip on 2/2	123 ?	
☐ Yes. If yes, please state of	r choose probl	m from below	
No. If no, skip to questio What type of problem did		vour trin?	
Advance notice	i you have will	Cost	
☐ Pick up times not con	venient	Late pick up-spec	ify time of wait
☐ Assistance	v ontont	Accessibility	ny thire of wait
☐ Service Area Limits		Late return pick u	n langth of wait
i Scivice Area Lilling		Late return pick u	p - ichgui or wait

☐ Drivers - specify	Reservations - specify length of wait
☐ Vehicle condition	☐ Other
7) On a scale of 1 to 10 (10 being most satisfie	d) rate the transportation you have been receiving.
8) What does transportation mean to you? (Per use in publications.)	rmission granted by Wallington Gailton for
Additional Comments:	
Transportation means a	lat
-	

Staff making call: Brandon Pa Date of Call: 1/26/23	iluma (	County: Marton Funding Source: Transportation Disadvanta
1) Did you receive transportation ser	vice on _	N/A ? ☐ Yes or ☐ No
2) Where you charged an amount in	addition t	o the co-payment?  Yes or  No
If so, how much?		
3) How often do you normally obtain ☐ Daily 7 Days/Week ☐ Other	•	
4) Have you ever been denied transp ☐ Yes	ortation s	ervices?
<ul><li>No. If no, skip to question # 4</li><li>A. How many times in the la</li><li>☐ None</li></ul>	st 6 montl	ns have you been refused transportation services?
$ \begin{array}{c}                                     $	☐ 6-10 # 4	Times
		sing you transportation services?
☐ Ineligible	☐ Space	e not available
☐ Lack of funds	☐ Desti	nation outside service area
☐ Other		
5) What do you normally use the ser	vice for?	
☐ Medical	☐ Educ	ation/Training/Day Care
☐ Employment	☐ Life-	Sustaining/Other
☐ Nutritional		
6) Did you have a problem with you	r trip on _	?
☐ Yes. If yes, please state of	or choose	problem from below
☐ No. If no, skip to questio What type of problem did		e with your trip?
☐ Advance notice		☐ Cost
☐ Pick up times not con	venient	☐ Late pick up-specify time of wait
☐ Assistance		☐ Accessibility
☐ Service Area Limits		☐ Late return pick up - length of wait

☐ Drivers - specify	Reservations - specify length of wait
☐ Vehicle condition	Other
7) On a scale of 1 to 10 (10 being most sati	isfied) rate the transportation you have been receiving.
8) What does transportation mean to you? use in publications.)	(Permission granted by Roberta Felton for
Additional Comments:	
Rider did not pick	up telephone - 2 calls made

# **Contractor Survey**

Marion County

# Advocacy Resources

Contractor na	ame (optional)
1. Do the riders/b	peneficiaries call your facility directly to cancel a trip?
2. Do the riders/b	eneficiaries call your facility directly to issue a complaint?
=	toll-free phone number for a rider/beneficiary to issue commendations and/or osted on the interior of all vehicles that are used to transport TD riders?  No
If yes, is the µ  ✓ Yes	whone number posted the CTC's?  No
4. Are the invoice	es you send to the CTC paid in a timely manner?  No
5. Does the CTC	give your facility adequate time to report statistics?  No
	rienced any problems with the CTC?
If yes, what ty	ype of problems?
	es you send to the CTC paid in a timely manner? RC Marion ,

### STATE OF FLORIDA

### COMMISSION FOR THE TRANSPORTATION DISADVANTAGED

### AGENCY CONTRACT

Effective: January 1, 2023 to December 31, 2023

THIS CONTRACT is entered into between the COMMUNITY TRANSPORTATION COORDINATOR, MARION SENIOR SERVICES, INC. designated pursuant to Chapter 427, F.S., to serve the transportation disadvantaged for the community that includes the entire are of Marion County, and hereinafter referred to as the "Coordinator" and ADVOCACY RESOURCE CENTER MARION, INC. hereinafter referred to as the "Agency".

WHEREAS, the Coordinator is requitted, under Rule 41-2.011, F.A.C., when cost effective and efficient, to enter into contract with a transportation Agency to provide transportation services; and

WHEREAS, transportation disadvantaged funds include any local government, state or federal funds that are for the transportation of transportation disadvantaged; and

WHEREAS, the Coordinator desires to contract with the Agency for the provision of transportation services for the transportation disadvantaged; and

WHEREAS, the Coordinator believes it to be in the public interest to provide such transportation services through the Agency for the residents of the service area who are clients of the Agency; and

WHEREAS, the Agency will provide the Coordinator the opportunity to develop a proposal for any new transportation services to the Coordinator,

WHEREAS, the Agency, in an effort to coordinate available resources, will make available transportation services to the Coordinator,

WHEREAS, the Contract allows for the provisions of transportation services be provided by the Agency, in accordance with Chapter 427, F.S., Rule 41-2, F.A.C., and the most current Community Transportation Coordinator policies.

NOW, THEREFORE, in consideration of the mutual covenants, promises and representations herein, the parties agree as follows:

### THE AGENCY SHALL:

- A. Provide services and vehicles according to the conditions specified in Attachment I.
- B. Coordinate available resources and make available transportation services to the Coordinator. Such services shall be provided in accordance with Attachment I.
- C. Annually, submit to the Coordinator a Year to Date Operating Report (from the Annual Operating Report) detailing demographic, operational and financial data regarding coordination activities in the designated service area period covering July 1, trough June 30 and due by August 1 every year. The report shall be prepared on forms provided by the Commission for the Transportation Disadvantaged, hereinafter Commission, and according to the instructions for the forms.
- D. Comply with audit and record keeping requirements by:
  - 1. Utilizing the Commission recognized Chart of Accounts defined in the <u>Transportation Accounting Consortium Model Uniform Accounting System for Rural and Specialized Transportation Providers</u> (uniform accounting system) for all transportation disadvantaged accounting and reporting purposes. Agencies with existing and equivalent systems are not required to adopt the Chart of Accounts in lieu of their existing Chart of Accounts but shall prepare all reports, invoices, and fiscal documents relating to the transportation disadvantaged functions and activities using the chart of accounts and accounting definitions as outlined in the above referenced manual.
  - Maintaining and filing with the Coordinator such progress, fiscal inventory and other reports as the Coordinator may require during the period of this contract.
  - By reserving to the Coordinator, the right to conduct finance and compliance audits at any time. Such audits conducted by the Coordinator will be at the expense of the Coordinator.

- E. Retain all financial records, supporting documents, statistical records, and any other documents pertinent to the Agreement for a period of five (5) years after termination of this Agreement. If an audit has been initiated and audit finding have not been resolved at the end of the five (5) years, the records shall be retained until resolution of the audit findings. The Agency shall assure that these records shall be subject to inspection, review, or audit at all reasonable times by persons duly authorized by the Coordinator shall have full access to and the right to examine any of the records and documents during the retention period.
- F. Comply with Safety Requirements by:
  - Complying with Section 341.061, F.S., and Rule 14-90, F.A.C., concerning System Safety or complying with Chapter 234.051 F.S., regarding school bus safety requirements for those services provided through a school board;
  - 2. Assuring compliance with local, state, and federal laws, and Commission policies relating to drug testing, and;
  - Complying with Coordinator's System Safety Program Plan (SSPP) for designated services area.
- G. Comply with Commission insurance requirements by maintaining at least minimum liability insurance coverage in the amount of \$100,000 for any one person and \$200,000 per occurrence at all times during the existence of this Contract along with Workers Comp. Upon the execution of this Contract, the Agency shall add the Coordinator as an additional named insured to all insurance policies covering vehicles transportation disadvantaged. In the event of any cancellation or changes in the limits of liability in the insurance policy, the insurance agent or broker shall notify the Coordinator. The Agency shall furnish the Coordinator written verification of the existence of such insurance coverage prior to the execution of this Contract. School board vehicle insurance coverage shall be in accordance with Section 234.03, F.S. and 234.211, F.S. Insurance coverage in excess of \$1 million per occurrence must be approved by the Coordinator and /or the local Coordinating Board before inclusion in this contract or in the justification of rates and fare structures, s. 41-2.006 (1), FAC.
- H. Safeguard information by not using or disclosing any information concerning a user of services under this Agreement for any purpose not in conformity with the local, state and federal regulations, including but not limited to 45 CFR, Part 205.50, except upon order of a court of competent jurisdiction, written consent of the recipient, or his/her responsible parent or guardian when authorized by law.

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### I. Protect Civil Rights by:

- 1. Complying with Title VI of the Civil Rights Act of 1964 and Section 504 of the Rehabilitation Act of 1973, as amended. The Agency gives this assurance in consideration of and for the purpose of obtaining federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other federal financial assistance to programs or activities receiving or benefiting from federal financial assistance and agreeing to complete a Civil Rights Compliance Questionnaire if so require by the Coordinator. Agency shall also assure compliance with:
  - a. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C. 2000d et seq., which prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving or benefiting from federal financial assistance.
  - b. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on basis of disability in programs and activities receiving or benefiting from federal financial assistance.
  - c. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits discrimination on the basis of sex in education programs and activities receiving or benefiting from federal financial assistance.
  - d. The Age Discrimination Act of 1975, as amended, 42 U.S.C.6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from federal financial assistance.
  - e. The Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from federal financial assistance.
  - f. All regulations, guidelines, and standards lawfully adopted under the above statutes.
  - g. The Americans with Disabilities Act of 1990, as it may be amended from time to time.
    - HIPAA: Agency agrees to enter into an agreement with Coordinator to comply with requirements of the federal Health Insurance Portability and Accountability Act of 1996 (HIPPA) and the associated regulations, 45 C.F.R. parts 160-164, as may be finalized and amened (the Privacy Rule) and 45 C.F.R.142.308 (a) as may be finalized and amended (Chain of Trust requirement) establishing required safeguards to ensure the security and confidentiality of protected client information. See Attachment IV.

- 2. Agreeing that compliance with this assurance constitutes a condition of continued receipt of or benefit from federal financial assistance, and that it is binding upon the Agency, its successors, subcontractors, transferees, and assignees for the period during which such assistance is provided. Assuring that agency's subcontractors, subgrantees, or others with whom the Coordinator arranges to provide services or benefits to participants or employees in employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the above statutes, regulations, guidelines, and standards. In the event of failure to comply, the Agency agrees that the Coordinator may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other appropriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.
- J. Agency's obligation to indemnify, defend, and pay for the defense or at the Coordinator's option, to participate and associate with the Coordinator in the defense and trail of any claim and any related settlement negotiations, shall be triggered by the Coordinator's notice of claim for indemnification to the Agency. Agency's inability to evaluate liability or its evaluation of liability shall not excuse the Agency's duty to defend and indemnify within seven days after such notice by the Coordinator is given by registered mail. Only an adjudication or judgement after the highest appeal is exhausted specifically finding the Coordinator solely negligent shall excuse performance of this provision by the Agency. Agency shall pay all costs and fees related to this obligation and its enforcement by the Coordinator's failure to notify Agency of a claim shall not release Agency of the above duty to defend.
- K. Comply with all standards and performance requirements of the:
  - 1. The Commission for the Transportation Disadvantaged (Attachment II);
  - The local Coordinating Board approved Transportation Disadvantaged Service Plan and;
  - 3. Any entities that purchase service.
    Failure to meet the requirements or obligations set forth in this Contract, and performance requirements established and monitored by the Coordinating Board in the approved Transportation Disadvantaged Service Plan be due cause for non-payment of reimbursement invoices until such deficiencies have been addressed or corrected to the satisfaction of the Coordinator.

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- L. Provide Corrective Action. A corrective action notice is a written to the Agency that the Agency is in breach of certain provisions of this Contract and that correction is required. Any corrective action notice will specify a reasonable time for corrective action to be completed. Agency agrees to implement the Corrective Action specified in the notice and provide written documentation to substantiate the implementation of the Corrective Action.
- M. All contracts, subcontracts, coordination contracts will be reviewed annually by the Coordinator and local Coordinating Board for conformance with the requirements of this Contract.
- N. Return to the Coordinator any overpayments due to unread funds or funds disallowed pursuant to the terms of this Contract that were disbursed to the Agency by the Coordinator. The Agency shall return any overpayment within thirty (30) calendar days after either discovery by the Agency, or notification of the Agency by the Coordinator or entity purchasing transportation, whichever is earlier. In the event that the Coordinator first discovers an overpayment has been made, the Coordinator will notify the Agency by letter of such a finding. Should repayment not be made in a timely manner, the Coordinator or purchasing entity will charge interest after thirty (30) calendar days after the date of notification or discovery, or the Coordinator will deduct said amount from future invoices.
- O. In performing this Contract, the Agency shall not discriminate against any employee or applicant for employment because of race, age, disability, creed, color, sex or national origin. Such action shall include, but not be limited to, the following: employment upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, modified only to show the particular contractual relationship in all its contracts in connection with the development of operation of the Contract, except contracts for the standard commercial supplies or raw materials, and shall require all such contractors to insert a similar provision in subcontracts relating to the performance of this Contract, except subcontracts for standard commercial supplies or raw materials. The Agency shall post, in conspicuous places available to employees and applicants for employment for Project work, notices setting forth the provisions of the nondiscrimination clause.
- P. By execution of this Contract, the Agency represents that it has not paid and, also, agrees not to pay, any bonus or commission for the purpose of obtaining an approval of its application for the financing hereunder. Funds disbursed to the Agency under this Contract shall not be expended for the purpose of lobbying the Legislature, the judicial branch, or a state agency.

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### THE COORDINATOR SHALL:

- A. Recognize the Agency as described in Chapter 427, F.S., and Rule 41-2, F.A.C.
- B. Insure that entities with transportation disadvantaged funds will purchase transportation disadvantaged services through the coordinated system.
- C. At a minimum, annually monitor the Agency for insurance, safety and reporting requirements, pursuant to Chapter 427, F.S., and Rule 41-2, F.A.C. The information contained in the Annual Operating Report must be collected, at a minimum, quarterly from the Agency.

### THE AGENCY AND COORDINATOR FURTHER AGREE:

- A. Nothing in the Contract shall require the Coordinator to observe or enforce compliance with any provision thereof, perform any other act to do any other thing in contravention of any applicable state law. If any provision of the Contract is found by a court of law to violate any applicable state law, the purchasing entity will at once notify the Coordinator in writing in order that appropriate changes and modification may be made by the Coordinator and the Agency to the end that the Agency may proceed as soon as possible with the provision of transportation services.
- B. If any part or provision of this Contract is held invalid, the remainder of this Contract shall be binding on the parties hereto.

### C. Termination Conditions:

- Termination at Will This Contract may be terminated by either party upon no less than thirty (30) days' notice, without cause. Said notice shall be delivered by certified mail, return receipt required, or in person with proof of delivery.
- Termination due to Lack of Designation In the event that the Coordinator
  so designated by local Coordinating Board and approved by the
  Commission, loses its designation, this contract is terminated immediately
  upon notification to the Agency. Notice shall be delivered by certified mail,
  return receipt requested, or in person, with proof of delivery. Notice shall
  be effective upon receipt.
- 3. Termination due to Disapproval of Memorandum of Agreement In the event that the Commission does not accept and approve any contracted transportation rates listed within Memorandum of Agreement, this Contract is terminated immediately upon notification to the Agency. Notice shall be delivered by certified mail, return receipt requested, or in person, with proof of delivery. Notice shall be effective upon receipt.

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- 4. Termination due to Lack of Funds In the event funds to finance this contract become unavailable, the Coordinator may terminate the contract with no less than twenty-four (24) hours written notice to the Agency. Notice shall be delivered by certified mail, return receipt requested, or in person, with proof of delivery. Notice shall be effective upon receipt. The Coordinator shall be the final authority as to the availability of funds.
- 5. Termination for Breach Unless the Agency's breach is waived by the Coordinator in writing, the Coordinator may, by written notice to the Agency, terminate this Contract upon no less than twenty-four (24) hours' notice. Notice shall be delivered by certified mail, returned receipt requested, or in person with proof of delivery. Waiver by the Coordinator of breach of any provision of this Contract shall not be deemed to be a waiver of any other breach and shall not act as a waiver or estoppel to enforcement of any provision of this Contract. The provisions herein do not limit the Coordinator's right to remedies at law or to damages.
- 6. Upon receipt of a notice of termination of this Contract for any reason, the Agency shall cease service and prepare all final reports and documents required by the terms of this Contract. A final invoice shall be sent to the Coordinator within thirty (30) days after the termination of this Contract.
- D. Renegotiations or Modifications of this Contract shall only be valid when they have been reduced to writing, duly approved by the Coordinator, and signed by both parties hereto.
- E. Agency shall assign no portion of this Contract without the prior written consent of the Coordinator.
- F. This Contract is the entire agreement between the parties.
- G. Attachments I and II are an integral part of the Contract and are hereby incorporated by reference into this Contract. All subsequent attachments are of an optional nature.
- H. Notice and Contract:

The name and address of the contract manager for the Coordinator for this Contract is:

Name: CLAYTON MURCH Address: 1101 SW 20TH CT. OCACA FL 34471

Title: TRANSPORTATION Telephone: 352 620 - 3501

	Agency responsible for administration of the program , telephone:			
of this Contract, notice of the name	tatives are designated by either party after execution and address of the new representative will be ty and said notification attached to originals of this			
This contract and its attachments co the parties hereto.	ontain all the terms and conditions agreed upon by			
WITNESS WHEREOF, the parties here	eto have caused these presents to be executed			
Agency:	Community Transportation Coordinator			
Advocacy Resource Center Marion, Inc.	Marion Senior Services			
Some Wangh lin, CEO	Tennifer Martinez; Exec. Director Name & Title of authorized individual			
2/2/23 Date:	2/8/23 Date:			
	In the event that different represent of this Contract, notice of the name rendered in writing to the other particontract.  This contract and its attachments contract the parties hereto.  WITNESS WHEREOF, the parties here Agency:  Advocacy Resource Center Marion, Inc.  Authorized Signature  Sau Way lin, Contract Marion and Mario			

I - Service Description

II – Standards & Performance Requirements

III - HIPPA Assurance

# ATTACHMENT I SERVICE DESCRIPTION ADVOCACY RESOURCE CENTER MARION, INC.

- The agency will be able to provide: (Type of service ambulatory, non-ambulatory, stretcher, population, purpose)
   Transportation for our 14 developmentally disabled adults to doctor & dental appointments, banks, grocery shopping, employment and volunteer jobs, weekly activities, church bowling, all Special Olympics events, outings (picnics, field trips, movies, etc.) All our residents are ambulatory.
- The agency will be available to provide transportation: (Days & hours of availability). 24 hours a day, 7 days a week for our 14 residents.
   Days agency will not be able to provide services: (Holidays & other days not available). We provide services 365 days a year.
- 3. Vehicles agency will use to transport all passengers: (Vehicle inventory attached)
- Vehicle/equipment standards, if any: (Identify standards such as functioning air conditions/heating, grab rails, stanchions, first aid kits, fire extinguishers, adequate communication equipment).
  - All vehicles must display the Agency's name, phone number and vehicle number unless confidentially of client is required.
  - Vehicles used to fulfill non-emergency medical transportation services needs must comply with provisions of Rule 10C-7-45, FL Administrative Code and be issued a wheelchair permit if vehicle is equipped and used for transportation of wheelchairs.
  - Vehicles must be equipped with properly functioning heating and air conditioning units.
  - Stanchions and grab rails shall be functionally located throughout appropriate vehicles.
  - Wehicles shall be properly maintained within reasonable limits which prevent hazardous conditions from occurring. Vehicles purchased with federal, state or local government funds must be maintained according to grant conditions. Vehicles may be subject to inspection by the FL Dept. of Transportation and/or the Coordinator.
  - Vehicles must have a first aid kit and fire extinguisher.
  - Vehicles must be equipped with two-way radio or equivalent communication device.

- Toll free number for complaints shall be posted in each vehicle. In Marion County: 352-620-3071. (MSS Transportation)
- Driver requirements, if any: (Identify requirements of drivers such as current license, vision, dress, specialized training, relationship with riders – provide assistance, physical contact, communication)

### Drivers employed by the Agency shall:

- a) Perform their duties in due regard for the safety, comfort, and convenience of users and their property.
- b) Have a current valid Florida Chauffeurs/Class D License or commercial driver license.
- c) All drivers must pass a pre-employment and annual DOT physical examination and drug screen for public section bus driver and have vision which is correctable to 20/50.
- d) Dress appropriately and wear a photo identification.
- e) Announce him/herself at the scheduled time, the driver must obtain clearance from the dispatcher before leaving the location without picking up the user.
- f) Open and close vehicle door when user enters and exits vehicle, and provide additional assistance to user if required or requested.
- Training: (Identify required training of all personnel, including drivers, reservations, etc. Also provide how often this training is required and how it will be provided to agency's employees)
  - Driver and Agency personnel shall be trained by the Proposer to accommodate the special transportation needs of the elderly, disabled and/or socially disadvantaged users. The program developed should include a minimum of the following:
    - a. Defensive driving technique
    - Instruction on minor, daily maintenance procedures, such as checking oil, and battery, fan belts, tire pressure, coolant level, etc.
    - c. Training on the proper manipulation of wheelchair passengers.
    - d. CPR
    - e. First Aid
    - f. Training in required forms and procedures.
    - g. Sensitivity and awareness toward others.
- 7. Agency fare structure: (Identify fare structure and what services are eligible and ineligible) n/a

 Billing/invoicing and reimbursement procedure for agency: (When, how often, what reports if any should be submitted) n/a Reporting requirements: (Include all Requirements of Commission, Coordinator, Local Coordinating Board and any entities purchasing transportation)

Quarterly – Annual Operating Report cumulative data using approved TD Commission forms (previously distributed).

Other reports as may be required from time to time by CTC or funding entities.

### ATTACHMENT II

# The Commission for the Transportation Disadvantaged Standards and Performance Requirements

Pursuant to Rule 41-2.006, Florida Administrative Code, the Community Transportation Coordinator and any Transportation Agency from whom service is purchased or arranged by the Community Transportation Coordinator shall adhere to Commission approved standards. These standards shall include:

- (a) Drug and alcohol testing for safety sensitive job positions within the coordinated system regarding pre-employment, randomization, post-accident, and reasonable suspicion as required by the Federal Highway Administration and the Federal Transit Administration;
- (b) An escort of a passenger and dependent children are to be transported as locally negotiated and identified in the local Transportation Disadvantaged Service Plan;
- (c) Child restraint devices shall be determined locally as to their use, responsibility, and cost of such device in the local Transportation Disadvantaged Service Plan;
- (d) Passenger property that can be carried by the passenger and/or driver in one trip and can be safely stowed on the vehicle, shall be allowed to be transported with the passenger at no additional charge. Additional requirements may be negotiated for carrying and loading rider property beyond this amount. Passenger property does not include wheelchairs, child seats, stretchers, secured oxygen, personal assistive devices, or intravenous devices:
- (e) Vehicle transfer points shall provide shelter, security, and safety of passengers;
- (f) A local toll free phone number for complaints or grievances shall be posted inside the vehicle. The local complain process shall be outlined as a section in the local Transportation Disadvantaged Service Plan including, advising the dissatisfied person about the Commission's Ombudsman Program as a step within the process as approved by the local Coordinating Board;
- (g) Out of service area trips shall be provide when determined locally and approved by the local Coordinating Board, except in instances where local ordinances prohibit such trips;
- (h) Interior of all vehicles shall be free from dirt, grime, oil, trash, torn upholstery, damaged or broken seats, protruding metal or other objects or materials which could soil items placed in the vehicle or provide discomfort for the passenger;

- (i) Billing requirements of the Community Transportation Coordinator to subcontracts shall be determined locally by the local Coordinating Board and provided in the local Transportation Disadvantaged Service Plan. All bills shall be paid within 15 calendar days to subcontractors, after receipt of said payment by the Community Transportation Coordinator, except in instances where the Community Transportation Coordinator is a non-governmental entity;
- Passenger/trip data base must be maintained or accessible by the Community Transportation Coordinator on each rider transported within the system;
- (k) Adequate seating for paratransit services shall be provided to each rider and escort, child, or personal care assistant, and no more passengers than the registered passenger seating capacity shall be scheduled or transported in a vehicle at any time. For transit services provided by transit vehicles, adequate seating or standing space will be provided to each rider and escort, child, or personal care attendant, and no more passengers than the registered passenger seating or standing capacity shall be scheduled or transported in a vehicle at any time;
- (I) Drivers for paratransit services, including coordination contractors, shall be required to announce and identify themselves by name and company in a manner that is conductive to communications with the specific passenger, upon pickup of each rider, group of riders, or representative, guardian, or associate of the rider, except in situations where the driver regularly transports the rider on a recurring basis. Each driver must have photo identification that is in view of the passenger. Name patches, inscriptions or badges that affix to driver clothing are acceptable. For transit services, the driver photo identification shall be in a conspicuous location in the vehicle;
- (m) The paratransit driver shall provide the passenger with boarding assistance, if necessary or requested, to the seating portion of the vehicle. The boarding assistance shall include opening the vehicle door, fastening the seat belt or utilization of wheel chair securement devices, storage of mobility assistive devices, and closing the vehicle door. In certain paratransit service categories, the driver may also be required to open or close doors to buildings, except in situations in which assistant in opening/closing building doors would not be safe for passengers remaining on the vehicle. Assisted access must be in a dignified manner. Drivers

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- may not assist wheelchair up or down more than one step, unless it can be performed safely as determined by the passenger, guardian, and driver;
- (n) All vehicles ordered or put into service after adoption of this section of the Rule, and providing service within the coordinated system, shall be equipped with twoway communications in good working order and be audible to the driver at all times to the base. All vehicles that are not equipped with two-way communications shall have two years to be in compliance after the adoption date of this section of the Rule;
- (o) All vehicles ordered or put into service after the adoption of this section of the Rule, and providing service within the coordinated system, shall have working air conditioners and heaters in each vehicle. Vehicles that do not have a working air conditioner or heaters will be scheduled for repair or replacement as soon as possible. All vehicles that are not equipped with an air conditioner and/or heater shall have two years to be in compliance after the adoption date of this section of the Rule;
- (p) First Aid shall be determined locally and provided in the local Transportation Disadvantaged Service Plan; and
- (q) Cardiopulmonary Resuscitation shall be determined locally and provided in the local Transportation Disadvantaged Service Plan.

# Attachment IV HIPAA CONFIDENTIALITY AGREEMENT between Advocacy Resource Center Marion, Inc. (Vendor) and

Marion Senior Services, Inc.

### PURPOSE:

This agreement is made and entered into in order to ensure that clients' <u>Protected Health Information</u> (PHI) is appropriately safeguarded and that exchange of information as a Vendor of MSS be made with integrity and confidentiality.

The Vendor agrees to maintain the confidentiality of any information provided to them by MSS in accordance with the <u>Health Portability and Accountability Act of 1996</u> (HIPAA) and associated regulations as set forth in Title 45 Code of Federal Regulation, Part 160 and 164, as may be amended (the Privacy Rule) and 45 Code of Federal Regulations 142.308 (a)(2) as may be finalized and amended (Chain of Trust requirement)

Vendor may use and/or disclose PHI only as permitted or required by this agreement or as otherwise required by law. Vendor may disclose PHI to, and permit the use of PHI by its employees only to the extent directly related to the necessary for the performance of the services and will be no more than the minimum PHI necessary to perform the services. Vendor will not use or disclose PHI in a manner inconsistent with obligations under the Privacy Rule, or that would violate the Privacy Rule if disclosed or used in such a manner.

Security measures maintained by Vendor shall include administrative safeguards, physical safeguards, technical security services and technical security mechanisms as necessary to protect such PHI. Upon request MSS, Vendor shall provide a written description of such safeguards.

The Vendor agrees to amend this agreement from time to time, as necessary, for MSS to comply with requirements of the Privacy Rule.

Vendor agrees that it will immediately report to MSS any use or disclosure of PHI received from MSS that is not authorized by or otherwise constitutes a violation of this agreement.

Vendor agrees that upon termination of this agreement, it shall contact MSS with regard to any information currently in its possession that was received from or created on behalf of MSS, to determine whether MSS wishes to have said information returned to them or from Vendor to provide certification that information was destroyed.

Authorized Signature

Date: 2/2/2.2

### CORRDINATION AGREEMENT

### BETWEEN

### COMMUNITY TRANSPORTATION COORDINATOR

#### AND

### THE FLORIDA CENTER FOR THE BLIND, INC.

WHEREAS, Marion Senior Services in its role as the Community Transportation Coordinator (CTC) for Marion County, hereafter known as the CTC, and;

WHEREAS, in the capacity, the CTC has initiated a program to provide community transportation service clients, agencies, and organizations, provided such service complies with Chapter 427, Florida Statutes and Chapter 41-2 and 19-90, Florida Administrative Code, and;

WHEREAS, the Florida Center for the Blind, Inc., (hereafter referred to as AGENCY) is considered to be a Bonafede (x private-not-for-profit-agency or \_\_\_\_\_ private-for-profit enterprise) operating in Marion Country and is eligible for the services of the CTC. The transportation services described herein are deemed to comply with all applicable with all applicable state laws and regulations, and;

WHEREAS, the AGENCY currently provides services using its own vehicles in the provision of transportation to transportation disadvantaged clients that are unique in nature, and will provide the CTC the opportunity to develop a proposal for any new transportation services needed,

NOW THEREFORE, the CTC and AGENCY, in consideration of the mutual covenants hereinafter set forth, agree as follows:

- 1. AGENCY shall maintain daily records of ridership and provide such to CTC quarterly.
- 2. AGENCY shall act as a transportation provider based on the availability of AGECY vehicles.
- AGENCY, when acting as provider, shall furnish all vehicles which conform to the laws of the State of Florida as provided in Florida Statutes 427, and shall maintain same in good mechanical and clean condition.
- AGENCY has developed and implemented a System Safety Program Plan (SSPP) and agrees to abide by said policy.
- AGENCY shall maintain a minimum liability insurance rate of \$100,000 per person, and \$300,000 per incident in effect at all times.
- 6. AGENCY shall conduct a criminal background screening for all drivers. Should the AGENCY acquire vehicles that require a CDL license to operate, AGENCY shall conduct pre-employment drug screening and pre-employment physicals for all drivers at said time. However, the AGENCY shall conduct drug and/or alcohol testing when any of the following conditions exist:
  - In the event a qualified supervisor/company official has reasonable suspicion to believe that a covered employee has engaged in prohibited drug use and/or alcohol misuse;
  - b. In the event of a fatal accident; or
  - c. In the event of a non-fatal accident if an individual suffers bodily injury and immediately received medical treatment away from the scene of the accident, any vehicle incurs disabling damage as the result of the

occurrence and a vehicle is transported away from the scene by a tow truck, or the transit vehicle is removed from operation.

- AGENCY will provide training to include safety, vehicle operations, and passenger sensitivity in accordance with Florida Statutes 427.
- 8. AGENCY agrees to submit an Annual Operation Report, Certificates of Compliance, Federal Transit Administration Drug and Alcohol Reports and quality assurance report to the CTC annually.
- 9. INDEMNIFICATION The AGENCY shall pay on behalf of or indemnify and hold harmless <u>Marion Senior Services</u>, its employees, officers, agents and volunteers from and against all claims, actions, damages, fees, fines, penalties, defense costs (including attorney fees and court costs, whether such fees and costs are incurred in negotiations, collection of attorney's fees or at the trail level or on appeal), suits or liabilities which may arise out of any actual alleged negligent act, error, omission, or any default of the AGENCY (or AGENCY's officers, employees, agent, volunteers and subcontractors, if any) performance or failure to perform under terms of this contract. This indemnification and hold harmless agreement shall survive the termination of expiration of this agreement.
- No changes to this Agreement or the Performance contemplated hereunder shall be made unless the same are in writing and signed by both parties hereto.
- 11. This Agreement may be terminated by either party by providing five (5) day written notice to the other party. This Agreement shall be for a period beginning <u>01-01-2023</u> and expires on <u>12-31-2023</u>, unless terminated at an earlier date as described above.
- 12. AGENCY shall not be allowed to assign its rights, duties, and obligations pursuant to the Agreement to any entity (i) with AGENCY is affiliated (ii) into which AGENCY may be merged or reorganized, or (iii) to which all or a portion of AGENCY's capital, stock, or assets may be sold without the prior written consent of CTC Marion County which shall not be unreasonably withheld. If approval for assignment is obtained, is shall not release the AGENCY from any liability or obligation under the Agreement.
- 13. Any notices, invoices, reports or any other type of documentation required by this Agreement shall be sufficient if sent by the parties postage paid in the United States mail, postage paid to the addresses listed below.
- 14. Due to safety concerns and issues presented in the past, the AGENCY and CTC have agreed that all transportation services provided by the CTC for the AGENCY's clients seeking training services at the AGENCY will not be allowed to coordinate their own transportation to and from the AGENCY.

Name: Anissa Pieriboni	Name:Jennifer Martinez				
Title: President/CEO	Title: <u>Executive Director</u>				
Address:	Address:				
1411 NE 22 <sup>nd</sup> Avenue	1101 SW 20th Court				
Ocala, Florida 34470	Ocala, Florida 34471				
Telephone:(352) 873-4700	Telephone:(352) 620-3501				
Fax:(352) 873-4751	Fax: (352) 620-3501				
Electronic mail address: apieriboni@flblind.org	Electronic mail address: <u>JMartinez@marionseniorservices.org</u>				
Florida and the venue for any legal or judic interpretation of this Agreement shall be in	The state of the s				
IN WITNESS THEREOF, the parties have executed the	ne Agreement of the date first above written.				
COUNTY/CTC:	AGENCY:				
Marion Senior Services	Florida Center for the Blind, Inc.				
(Name of COUNTY/county/CTC)	(Name of Agency)				
Jennifer Martinez	Anissa Pieriboni				
(Printed or Typed Name)	(Printed or Typed Name)				
Executive Director	President/CEO				
(Printed or Typed Title)	(Printed or Typed Title)				
$\bigcirc$ X	Dente				
(Signature)	(Signature)				
11/30/22	November 30, 2022				
(Date)	(Date)				

**AGENCY'S Authorized Representative:** 

COUNTY'S Authorized Representative:

# **PURCHASING AGENCY SURVEY**

Staff making call: N/A
Purchasing Agency name:
Representative of Purchasing Agency:
<ul><li>1) Do you purchase transportation from the coordinated system?</li><li>☐ YES</li></ul>
□ NO If no, why?
2) Which transportation operator provides services to your clients?
3) What is the primary purpose of purchasing transportation for your clients?
☐ Medical
☐ Employment
☐ Education/Training/Day Care
☐ Nutritional
☐ Life Sustaining/Other
4) On average, how often do your clients use the transportation system?
7 Days/Week
☐ 1-3 Times/Month
☐ 1-2 Times/Week
_
Less than 1 Time/Month
☐ 3-5 Times/Week

5) Have you had any unresolved problems with the coordinated transportation system?
☐ Yes
☐ No If no, skip to question 7
6) What type of problems have you had with the coordinated system?
Advance notice requirement [specify operator (s)]
☐ Cost [specify operator (s)]
☐ Service area limits [specify operator (s)]
☐ Pick up times not convenient [specify operator (s)]
☐ Vehicle condition [specify operator (s)]
☐ Lack of passenger assistance [specify operator (s)]
☐ Accessibility concerns [specify operator (s)]
☐ Complaints about drivers [specify operator (s)]
☐ Complaints about timeliness [specify operator (s)]
☐ Length of wait for reservations [specify operator (s)]
Other [specify operator (s)]
7) Overall, are you satisfied with the transportation you have purchased for your clients?
☐ Yes
□ No If no, why?

### Level of Cost Worksheet 1

Insert Cost page from the AOR.

INSERTED AS FOLLOWS



# **CTC Expense Sources**

County: Marion CTC Status: Submitted CTC Organization: Marion Senior

Services, Inc.

**Fiscal Year:** 07/01/2021 - 06/30/2022 **CTD Status:** Under Review

	Selec	Selected Reporting Period			Previous Reporting Period		
	CTC & Transportation Operators	Coordination Contractors	Total	CTC & Transportation Operators	Coordination Contractors	Total	
Expense Sources							
Labor	\$ 1,749,995	\$ 109,695	\$ 1,859,690	\$ 1,538,313	\$ 147,128	\$ 1,685,441	
Fringe Benefits	\$ 182,054	\$ 7,551	\$ 189,605	\$ 492,476	\$ 30,577	\$ 523,053	
Services	\$ 406,172	\$0	\$ 406,172	\$ 9,645	\$0	\$ 9,645	
Materials & Supplies Consumed	\$ 384,003	\$ 25,137	\$ 409,140	\$ 508,720	\$ 23,240	\$ 531,960	
Utilities	\$ 33,850	\$ 9,549	\$ 43,399	\$ 14,699	\$ 8,753	\$ 23,452	
Casualty & Liability	\$ 323,897	\$ 62,069	\$ 385,966	\$ 6,578	\$ 34,674	\$ 41,252	
Taxes	\$ 24,085	\$ 5,957	\$ 30,042	\$ 388,201	\$0	\$ 388,201	
Miscellaneous	\$ 71,098	\$ 32,269	\$ 103,367	\$ 827	\$0	\$ 827	
Interest	\$ 717	\$0	\$ 717	\$0	\$0	\$0	
Leases & Rentals	\$ 7,057	\$0	\$ 7,057	\$ 236	\$0	\$ 236	
Capital Purchases	\$ 529,768	\$0	\$ 529,768	\$0	\$ 65,516	\$ 65,516	
Contributed Services	\$0	\$0	\$0	\$0	\$0	\$ 0	
Allocated Indirect Expenses	\$ 16,375	\$0	\$ 16,375	\$0	\$0	\$ 0	
Purchased Transportation Services							
Bus Pass	\$0	N/A	\$ 0	\$0	N/A	\$ 0	
School Board (School Bus)	\$0	N/A	\$0	\$0	N/A	\$ 0	
Transportation Network Companies (TNC)	\$0	N/A	\$0	\$0	N/A	\$0	
Taxi	\$0	N/A	\$0	\$0	N/A	\$0	
Contracted Operator	\$0	N/A	\$0	\$0	N/A	\$0	
Total - Expense Sources	\$ 3,729,071	\$ 252,227	\$ 3,981,298	\$ 2,959,695	\$ 309,888	\$ 3,269,583	

09/08/2022 08:25 AM Page 16 of 19

# Level of Competition Worksheet 2

1. Inventory of Transportation Operators in the Service Area

	Column A	Column B	Column C	Column D
	Operators	Operators	Include Trips	% of all Trips
	Available	Contracted in the		
		System.		
Private Non-Profit				
Private For-Profit				
Government				
Public Transit	5			
Agency	<b>3</b>			
Total	5			

2.	How many of the operators are coordination contractors? 2
3.	Of the operators included in the local coordinated system, how many have the capability of expanding capacity? $N/A$
	Does the CTC have the ability to expand? Yes
4.	Indicate the date the latest transportation operator was brought into the system. N/A
5.	Does the CTC have a competitive procurement process? Yes
6	In the past five (5) years, how many times have the following methods been used in

In the past five (5) years, how many times have the following methods been used in selection of the transportation operators?

Requests for qualifications  Requests for interested parties  Y  None	Low bid	Requests for proposals
Negotiation only Y None	Requests for qualifications	Requests for interested parties
Negotiation only	Negotiation only	X None

Which of the methods listed on the previous page was used to select the current operators?

N/A		

transportation operators for inclusion in the coordinated system? Capabilities of operator Scope of Work Age of company Safety Program Previous experience Capacity Training Program Management Qualifications of staff Insurance Accident History Resources

Which of the following items are incorporated in the review and selection of

Economies of Scale **Contract Monitoring** Reporting Capabilities Financial Strength Performance Bond

Responsiveness to Solicitation

Quality Community Knowledge Cost of the Contracting Process Price Distribution of Costs Other: (list) None

8.	operator	•	potential or	oposals has been perators was the		-	
	How ma	ny responded?					
	The requ	uest for bids/prop	osals was dist	ributed:			
	N/A	Locally	N/A	Statewide	N/A	Nationally	
9.			1	es of competitivel ruel, maintenance,	•	g any services of	her

7.

# Level of Availability (Coordination) Worksheet 3

Planning – What are the coordinated plans for transporting the TD population?

Plans are coordinated between Marion Transit Services and the LCB.

Public Information – How is public information distributed about transportation services in the community?
Marion Senior Services has an outreach division that distributes brochures, and ads. The website, web links and bus decals that provide MT's name and phone number are utilized.
Certification – How are individual certifications and registrations coordinated for local TD transportation services?
Certification is given to Seniors over 60, persons with disabilities, low income, children at risk, disadvantaged residents with priority given to those who do not own or drive a vehicle and do not have family or friends to assist them and live within designated TD funding area.
Eligibility Records – What system is used to coordinate which individuals are eligible for special transportation services in the community?
The criteria is based on where the rider resides, there is also a vetting process that considers physical ability, age, medical conditions, and income level.

Call Intake – To what extent is transportation coordinated to ensure that a user can reach a Reservationist on the first call?
There is an automated system that answers and places them in a waiting pattern until one of the reservationists is available. There are three (3) reservationists taking calls at any given time.
Reservations – What is the reservation process? How is the duplication of a reservation prevented?
Reservationist utilizes a system (RouteMatch) that confirms the customer is an existing rider, schedules the trip in the system and triggers an alert should there be a duplication. If it is a new customer it is determined what funding will be utilized and proper scheduling procedure is followed.
Trip Allocation – How is the allocation of trip requests to providers coordinated?
N/A
Scheduling – How is the trip assignment to vehicles coordinated?
A trip scheduler assigns by geographic location utilizing RouteMatch.

Transport – How are the actual transportation services and modes of transportation coordinated?
The RouteMatch system allocates trips according to trip type and time of day.
Dispatching – How is the real time communication and direction of drivers coordinated?
Drivers are given a manifest with a list of scheduled riders in the morning. They maintain communication and results throughout the day with the RouteMatch system on tablets and two-way communication as needed.
General Service Monitoring – How is the overseeing of transportation operators coordinated?
The CTC oversees the managers and the managers oversee the operators.
Daily Service Monitoring – How are real-time resolutions to trip problems coordinated?
Dispatchers utilize RouteMatch system to identify nearby drivers available to lend assistance. Drivers have two-way communication systems on the buses and dispatch is in contact with them at any time.

Information Resources – How is information shared with other organizations to ensure smooth service provision and increased service provision?
The outreach program, website, brochures distributed to local merchants, neighborhoods and through the mail, in-person presentations. There is continuous communication and coordination with SunTran for client vetting and route optimization.
Overall – What type of formal agreement does the CTC have with organizations, which provide transportation in the community?
Suntran, MT handles their ADA clients.



January 31, 2023

Florida Department of Transportation, District Five Attn: Ms. Diane Poitras, Transit Programs Administrator 420 W. Landstreet RD Orlando, FL 32824

**RE: AGENCY CONTACT INFORMATION** 

To: District Five

This letter provides certification of the current agency contacts:

- Ms. Jennifer Martinez, Executive Director jmartinez@marionseniorservices.org
- Mr. Clayton Murch, Transportation Director <u>cmurch@marionseniorservices.org</u>
- Ms. Tamara Grant-Powell, Finance Director tpowell@marionseniorservices.org
- Mr. Herman Schulz, Transit Manager hschulz@marionseniorservices.org
- Ms. Karen Eads, Trips Manager <u>kwilliams@marionseniorservices.org</u>
- Mr. Ken McKelvy, Transit Manager <u>kmckelvy@marionseniorservices.org</u>

Sincerely,

Clayton Murch, Transportation Director





### MARION TRANSIT CLIENT INTAKE FORM

MARION TRANSIT SERVICE IS PROVIDED ACCORDING TO THE FOLLOWING NEEDS AS SPACE IS AVAILABLE:

MEDICAL • LIFE SUSTAINING ACTIVITIES • EDUCATION • WORK • BUSINESS • RECREATIONAL

SECTION I - DETERMINATION OF ELIGIBILITY
LAST NAME: DE MAUEX FIRST NAME: LIRRAINE MI:
ADDRESS: 6061 SW 84 ST CITY: WCASA STATE: F1 ZIP: 34476.
COUNTY: 1/1AR1177 TELEPHONE #: 352)873 - 4164 CELL#()
DOB: 04, 1/ 1941 SS# 140 32 2/450
OTHER HOUSEHOLD MEMBERS (LIST EACH MEMBER)
NAME: ARE RELATIONSHIP:AGE:PHONE:
EMERGENCY CONTACT: MARY Bruck RELATIONSHIP: FRIEND AGE: PHONE: 352 854 1745
Transportation Disadvantaged (eligibility criteria) - Attach any documentation for eligibility claimed:
Mental or Physical Disability Poor*81_Age**
(*Poor = Income level at or below 150% of the Federal Poverty Guideline / Age** = 60+ or <16 years old.)
SECTION II - AVAILABILITY OF TRANSPORTATION
YES/NO
2. 7 DO YOU HAVE A VALID DRIVER'S LICENSE? 3. 1 COULD YOU DRIVE YOUR CAR TO MEDICAL APPTS? 4. 1 DOES ANYONE IN YOUR HOUSEHOLD HAVE A CAR? 5. 1 COULD THEY DRIVE YOU TO YOUR APPOINTMENTS? IF NOT, WHY? I SAN X I THE YOU'RE
LIST ALL HOSPITALS, DOCTORS, AND MEDICAL FACILITIES THAT YOU VISIT ON A REGULAR BASIS:
NAME OF TYPE OF # MONTHLY
HOSPITAL/DOCTOR/FACILITIES: TREATMENT? VISITS?
124.0. Philips per
De Regnalls Uncogolgist Unintes.
SECTION III -
YES / NO
1. NO YOU LIVE ON A <b>SUNTRAN</b> ROUTE? WHAT IS THE DISTANCE TO THE NEAREST BUS STOP?
2 DO YOU HAVE ANY LIMITATIONS THAT WOULD PREVENT YOU FROM RIDING THE BUS?  PLEASE DESCRIBE:
3 ARE YOU ENROLLED IN ANY OTHER PROGRAM(S) THAT WILL PAY FOR OR PROVIDE TRANSPORTATION?
PLEASE LIST: 1115TKJ GEH/+

# SECTION IV -PLEASE CHECK OR LIST ANY SPECIAL NEEDS, SERVICES OR MODES OF TRANSPORTATION YOU REQUIRE DURING TRANSPORTATION: WHEELCHAIR \_\_\_\_\_, POWER WHEELCHAIR \_\_\_\_\_, CANE\_\_\_\_\_, WALKER \_\_\_\_\_, SERVICE ANIMAL \_\_\_\_\_, OXYGEN \_\_\_ PERSONAL CARE ATTENDANT \_\_\_\_\_\_, LIFT TO LOAD \_\_\_\_\_, SCOOTER \_\_\_\_ Amb OTHER: SECTION V -I ATTEST ALL INFORMATION IS CORRECT TO MY KNOWLEDGE AND ANY CHANGES WILL BE REPORTED TO MARION TRANSIT IMMEDIATELY: SIGNATURE OF APPLICANT: vared DATE: 1,20 SIGNATURE OF PREPARER (IF OTHER THAN APPLICANT) PREPARER - PRINT NAME: OFFICE USE ONLY INITIAL REVIEW: NAME (LAST, FIRST): SECTION VI -INITIAL AUTHORIZATION APPROVAL DATE: 1 / 20 /2023 DENIED DATE: REASON: MANAGER REVIEW - IF DENIED TITLE: BY:\_\_ \_\_\_\_\_ DATE: \_\_\_\_\_\_ / COMMENTS: PERIODIC REVIEWS (EVERY 3 YEARS MINIMUM) DATE: 2/10/2023 BY: DATE: BY: \_\_\_\_ DATE: DATE: BY: \_\_\_\_\_ DATE: DATE: BY:\_\_\_\_\_ DATE: DATE: BY:\_\_\_\_\_ DATE: DATE: DATE: BY: DATE:





## MARION TRANSIT CLIENT INTAKE FORM

MARION TRANSIT SERVICE IS PROVIDED ACCORDING TO THE FOLLOWING NEEDS AS SPACE IS AVAILABLE:

MEDICAL \* LIFE SUSTAINING ACTIVITIES \* EDUCATION \* WORK \* BUSINESS \* RECREATIONAL

SECTION I - DETERMINATION OF ELIGIB	ILITY		
LAST NAME: Gunion	FIRST NAME:	Zindy Mi:	
ADDRESS: 17425 SE 124Th		perfield STATE: FZ ZIP: 3440	71
county: Marion	TELEPHONE #: (352)	CELL#: ()	-
DOB: 03 / 23 / 1	949 ss#: 293	- 46- 6863	
OTHER HOUSEHOLD MEMBERS (LIST EACH MEMBER)		20 00.00	
NAME: none	RELATIONSHIP:	AGE;PHONE:	
EMERGENCY CONTACT: Cindy Rob	inson relationship: Neighb	MAGE: PHONE: 440-409. 2420	
Transportation Disadvantaged	(eligibility criteria) - Attach any	documentation for eligibility claimed:	
Mental or Physical		Age**	
/ ~	pelow 150% of the Federal Poverty Guide		
SECTION II - AVAILABILITY OF TRANSPO		7.77	
YES / NO	KIAHON		
1. 4 DO YOU OWN A CAR?			
2 DO YOU HAVE A VALID DRIVER'S LIC	ENSE?	10 Clare 1 2 Clare 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
3 COULD YOU DRIVE YOUR CAR TO N	EDICAL APPTS? IF NOT, V	vHY? Unable drive/ brokenhi,	P
DOES ANYONE IN YOUR HOUSEHOL     DOES ANYONE IN YOUR HOUSEHOL		, ,	
	O CAN TRANSPORT YOU TO APPOIN		
7. N DO YOU HAVE FRIENDS WHO CAN T	RANSPORT YOU TO YOUR APPOINTM	MENTS?	
LIST ALL HOSPITALS, DOCT	ORS, AND MEDICAL FACILITIES THAT	YOU VISIT ON A REGULAR BASIS:	
NAME OF	TYPE OF	# MONTHLY	
HOSPITAL/DOCTOR/FACILITIES:	TREATMENT?	VISITS?	
Orthopedic Institute	Orthopedic	Every 3 months	
The state of the s		- Carried Francisco (1972)	
Firebook Co.			
SECTION III -			
YES / NO			
	E? WHAT IS THE DISTANCE TO THE		
, PLEASE DESCRIBE:	AT WOULD PREVENT YOU FROM RIDI	NG THE BUS?	
	PROGRAM(S) THAT WILL PAY FOR O	R PROVIDE TRANSPORTATION?	
· · · · · · · · · · · · · · · · · · ·			

# PLEASE CHECK OR LIST ANY SPECIAL NEEDS, SERVICES OR MODES OF TRANSPORTATION YOU REQUIRE DURING TRANSPORTATION: WHEELCHAIR \_\_\_\_\_, POWER WHEELCHAIR \_\_\_\_\_, CANE \_\_\_\_\_, WALKER \_\_\_\_\_, SERVICE ANIMAL \_\_\_\_\_, OXYGEN \_\_\_\_ PERSONAL CARE ATTENDANT \_\_\_\_\_, LIFT TO LOAD \_\_\_\_ OTHER: SECTION V -LATTEST ALL INFORMATION IS CORRECT TO MY KNOWLEDGE AND ANY CHANGES WILL BE REPORTED TO MARION TRANSIT IMMEDIATELY: SIGNATURE OF APPLICANT: (IF OTHER THAN APPLICANT) PREPARER - PRINT NAME: OFFICE USE ONLY INITIAL REVIEW: NAME (LAST, FIRST): SECTION VI -INITIAL AUTHORIZATION APPROVAL DATE: 123,23 DENIED DATE: REASON: MANAGER REVIEW - IF DENIED TITLE: BY:\_\_\_\_ DATE: / COMMENTS: PERIODIC REVIEWS (EVERY 3 YEARS MINIMUM) DATE: 2/9/2013 DATE: DATE: DATE: DATE: BY: \_\_\_\_\_ DATE: DATE: BY: DATE: DATE: BY: DATE: DATE: DATE:

SECTION IV -





## MARION TRANSIT CLIENT INTAKE FORM



MARION TRANSIT SERVICE IS PROVIDED ACCORDING TO THE FOLLOWING NEEDS AS SPACE IS AVAILABLE:
MEDICAL · LIFE SUSTAINING ACTIVITIES · EDUCATION · WORK · BUSINESS · RECREATIONAL

SECTION I - DETERMINATION OF ELIGIBILITY	TY		
LAST NAME:	FIRST NAME:	-RANCES	_MI:
ADDRESS: 10948 Sev 80 = C+	CITY: OCALI	STATE: //	ZIP: 3448/
COUNTY: //ARIM	TELEPHONE #: (352)2	91 2014 CELL#: (	<u> </u>
DOB: 0/ 1 0/ 1/93	7 ss#: 006	. 40 . 201	4
OTHER HOUSEHOLD MEMBERS (LIST EACH MEMBER)			
NAME: MM	RELATIONSHIP:	AGE: PHONE:	
EMERGENCY CONTACT: /////	RELATIONSHIP: SISTEN	AGE: PHONE: 352	572-9191
Transportation Disadvantaged (eli	5/ster	Oakridge Nu	irsing Aime
Mental or Physical Disa	ability Poor*	St Age*	
(*Poor = Income level at or below	w 150% of the Federal Poverty Guid	eline / Age** = 60+ or <16 years old.)	
SECTION II - AVAILABILITY OF TRANSPORT	TATION		
YES / ŅO			
1 DO YOU OWN A CAR?	0.50	\.	C. A. Guin Jan Za
2. Y DO YOU HAVE A VALID DRIVER'S LICEN. 3. OULD YOU DRIVE YOUR CAR TO MEDI		MUYO CAUNOT WE	ine at
4. DOES ANYONE IN YOUR HOUSEHOLD H		s fine due To	lige Styry
5COULD THEY DRIVE YOU TO YOUR APP	그러워 보고 하고 있는 아이를 사고 생겨를 내려가 되었다. 그리는 그 사람은 그리는 것이 없는 것이다.	1	Jalvinno
6. DO YOU HAVE FAMILY MEMBERS WHO TO YOU HAVE FRIENDS WHO CAN TRAIN			renery.
LIST ALL HOSPITALS, DOCTOR	S. AND MEDICAL FACILITIES THA	T YOU VISIT ON A REGULAR BASIS	3:
NAME OF	TYPE OF	# MONTHLY	
HOSPIFAL/DOCTOR/FACILITIES:	TREATMENT?	VISITS?	
DINHA.	Dep.	Smarhs	
			_
			_
SECTION III			
SECTION III -			
YES / NO  1. DO YOU LIVE ON A SUNTRAN ROUTE?	WHAT IS THE DISTANCE TO THE	NEADEST BUS STORS	
2. DO YOU HAVE ANY LIMITATIONS THAT V			
PLEASE DESCRIBE:			
3 ARE YOU ENROLLED IN ANY OTHER PR	ROGRAM(S) THAT WILL PAY FOR C	PROVIDE TRANSPORTATION?	
I denote blot.	112000		

SECTION IV -				47
	IST ANY SPECIAL NEEDS, SERVICE, POWER WHEELCHAIR	_, CANE, WALKER _	, SERVICE ANIMAL	
OTHER: Amb	PERSONAL CARE ATTENDANT _	, LIFT TO LOAD	, SCOOTER	
SECTION V - I ATTEST ALL INFORMAT SIGNATURE OF APPLICATION SIGNATURE OF PREPARE (IF OTHER THAN APPLICATION PREPARER – PRINT NAME)	RER HARLE	$\left( \begin{array}{c} \end{array} \right)$	DATE:	12, 2623 117
========		========		========
OFFICE USE ONLY				
NAME (LAST,FIRST):  SECTION VI	Santiago, Cyndi			
INITIAL AUTHORIZATION	The state of the s			
APPROVAL DATE:\_	, 12, 2023			
DENIED DATE:		REASON:		
MANAGER REVIEW - IF	DENIED			
BY :	TITLE:		DATE:/	i
COMMENTS:				
PERIODIC REVIEWS (EV	ERY 3 YEARS MINIMUM)			
BY: Cenali	DATE: 1/26/2023	BY:	DATE:	
BY:	DATE:	BY:		
BY:	DATE:	BY:	DATE:	
BY:	DATE:	BY:		
BY:	DATE:	BY:	DATE:	
BY:	DATE:	BY:	DATÉ:	





# MARION TRANSIT CLIENT INTAKE FORM

MARION TRANSIT SERVICE IS PROVIDED ACCORDING TO THE FOLLOWING NEEDS AS SPACE IS AVAILABLE:

MEDICAL • LIFE SUSTAINING ACTIVITIES • EDUCATION • WORK • BUSINESS • RECREATIONAL

LAST NAM	195	bando	OF ELIGIBILITY	F	IRST NAME:	Angela		MI: _	
	s: 9511	SE 1684	Elderbeiry Pl		The Vil	-	STATE: _F\		32162-185
COUNTY:		Marion		TELEPHO		1	CELL #: ( <sup>G</sup> r	100 DATE 1 AV	
DOB:	2	/ 12 MBERS (LIST EACH M	/ 1944 EMBER)		144	34			
NAME:				RELATIONS	SHIP:	AGE:	PHONE:		
EMERGE	NCY CONTA	ACT: BILL	White	RELATIONS	SHIP: Other	AGE: _	PHONE: 201	-55 <b>6</b> -8	1920
	Transpo	and the second second second		ity criteria)			ntation for eligibil		ed:
			or Physical Disability	0/ -641 - 751		oor*		Age**	
	ν,				eral Poverty C	Suideline / Age*	* = 60+ or <16 years o	ld.)	
SECTIO	N II - AVA	LABILITY OF	TRANSPORTATIO	<u>N</u>					
3. No 4. No 5. No 6. No 7. No	DOES AN COULD ' DO YOU	NYONE IN YOUR THEY DRIVE YOU HAVE FAMILY ME	R CAR TO MEDICAL A HOUSEHOLD HAVE A TO YOUR APPOINT EMBERS WHO CAN T WHO CAN TRANSPO	A CAR? MENTS? TRANSPORT	IF NO YOU TO APP	POINTMENTS?	the lives alo	ne	
		NAME OF		TYPE O	F	THAT YOU VISI	T ON A REGULAR BA # MONTHLY	ASIS:	
	HOSPITAL/	DOCTOR/FACILIT	IES:	TREATME! Sialusis	NT?		VISITS?		
-	B. 1. 1. 1. 0.	000111		DICCIO 210		1	12-110		
SECTIO	<u>N III</u> -								
YES .N	DO YOU DO YOU PLEASE	HAVE ANY LIMITA DESCRIBE:	TRAN ROUTE? WHA ATIONS THAT WOUL	D PREVENT	YOU FROM	RIDING THE BU	JS?		
3	ARE YOU PLEASE		NY OTHER PROGRA	AM(S) THAT V	VILL PAY FO	R OR PROVIDE	TRANSPORTATION	?	

# PLEASE CHECK OR LIST ANY SPECIAL NEEDS, SERVICES OR MODES OF TRANSPORTATION YOU REQUIRE DURING TRANSPORTATION: WHEELCHAIR \_\_\_\_\_, POWER WHEELCHAIR \_\_\_\_\_, CANE \_\_\_\_, WALKER \_\_\_\_, SERVICE ANIMAL \_\_\_\_, OXYGEN \_\_\_\_ PERSONAL CARE ATTENDANT \_\_\_\_\_, LIFT TO LOAD \_\_\_\_\_, SCOOTER \_\_\_\_ OTHER: SECTION V -LATTEST ALL INFORMATION IS CORRECT TO MY KNOWLEDGE AND ANY CHANGES WILL BE REPORTED TO MARION TRANSIT IMMEDIATELY: SIGNATURE OF APPLICANT: (IF OTHER THAN APPLICANT) OFFICE USE ONLY INITIAL REVIEW: NAME (LAST, FIRST): SECTION VI -INITIAL AUTHORIZATION APPROVAL DATE: 11 / 21 / 2022 DENIED DATE: \_\_\_\_\_/ \_\_\_ REASON: MANAGER REVIEW - IF DENIED TITLE: BY: \_\_ DATE: COMMENTS: PERIODIC REVIEWS (EVERY 3 YEARS MINIMUM) DATE: 1/9/2023 BY: DATE: BY: BY:\_\_\_\_\_ DATE: DATE: DATE BY: \_\_\_\_\_ DATE: DATE: DATE: DATE: BY: \_\_\_\_ DATE: DATE: DATE:

SECTION IV -





## MARION TRANSIT CLIENT INTAKE FORM

MARION TRANSIT SERVICE IS PROVIDED ACCORDING TO THE FOLLOWING NEEDS AS SPACE IS AVAILABLE:

MEDICAL - LIFE SUSTAINING ACTIVITIES - EDUCATION - WORK - BUSINESS - RECREATIONAL

SECTION 1 - DETERMINATION OF ELIGIBILITY LAST NAME: Valladaves	1	Doter	1,0
ADDRESS: 9273-4 SW 82 nd Ten	FIRST NAME: \(\)		ZIP: 34481
COUNTY: Marion	TELEPHONE #: (35) 237	STATE: 7	_ ZIP;
DOB: 05/31/1941 OTHER HOUSEHOLD MEMBERS (LIST EACH MEMBER)	ss#: 126 .	30 - 66	42
NAME: Barbara Valladares	RELATIONSHIP: Luife A	GE: PHONE: 352	1.237.7442
EMERGENCY CONTACT: Same	_ RELATIONSHIP:A	GE:PHONE:	
Transportation Disadvantaged (eligibi	lity criteria) – Attach any doc	cumentation for eligibilit	y claimed:
Mental or Physical Disability	Poor*	Ag	ge**
(*Poor = Income level at or below 150	0% of the Federal Poverty Guideline	/ Age** = 60+ or <16 years old	.)
SECTION II - AVAILABILITY OF TRANSPORTATION	ON		
1. DO YOU OWN A CAR? 2. U DO YOU HAVE A VALID DRIVER'S LICENSE? 3. N COULD YOU DRIVE YOUR CAR TO MEDICAL 4. DOES ANYONE IN YOUR HOUSEHOLD HAVE 5. N COULD THEY DRIVE YOU TO YOUR APPOINT 6. N DO YOU HAVE FAMILY MEMBERS WHO CAN 7. NO YOU HAVE FRIENDS WHO CAN TRANSPO	A CAR?  IMENTS?  IF NOT, WHY  TRANSPORT YOU TO APPOINTMEN  DRT YOU TO YOUR APPOINTMEN	? ENTS? TS?	SIS:
HOSPITAL/DOCTOR/FACILITIES:	TREATMENT?	VISITS?	
Wisdo Pri	mary	Every mos	ith
Town + Country Ph	ysical Therapy	3X Week	_
SECTION III -  YES / NO  1.	LD PREVENT YOU FROM RIDING	THE BUS?	

# PLEASE CHECK OR LIST ANY SPECIAL NEEDS, SERVICES OR MODES OF TRANSPORTATION YOU REQUIRE DURING TRANSPORTATION: WHEELCHAIR \_\_\_\_\_, POWER WHEELCHAIR \_\_\_\_\_, CANE\_\_\_\_\_, WALKER \_\_\_\_\_, SERVICE ANIMAL \_\_\_\_\_, OXYGEN \_\_\_\_\_ PERSONAL CARE ATTENDANT \_\_\_\_\_, LIFT TO LOAD \_\_\_\_, SCOOTER \_\_\_\_ OTHER: SECTION V -LATTEST ALL INFORMATION IS CORRECT TO MY KNOWLEDGE AND ANY CHANGES WILL BE REPORTED TO MARION TRANSIT IMMEDIATELY: SIGNATURE OF APPLICANT: \_ (IF OTHER THAN APPLICANT) PREPARER - PRINT NAME: OFFICE USE ONLY INITIAL REVIEW: NAME (LAST, FIRST): SECTION VI -INITIAL AUTHORIZATION APPROVAL DATE: 1 /27 / 23 DENIED DATE: REASON: MANAGER REVIEW - IF DENIED BY:\_\_\_\_\_\_DATE: COMMENTS: PERIODIC REVIEWS (EVERY 3 YEARS MINIMUM) DATE: BY: DATE: DATE: DATE: DATE: BY:\_\_\_\_\_ DATE: DATE: BY: DATE: DATE: DATE: \_\_\_\_\_ DATE:

SECTION IV -



### **COMPLAINT & COMPLIMENTS PROCEDURE**

### 1.0 Purpose

1.1 This document spells out the proper procedure for handling Complaints or Compliments for Marion Transit. Because we provide a community service, the agency is subject to receiving complaints and/or compliments regarding our service, employees or both.

Marion Transit strives to provide excellent service to our clients/customers.

### Customers have the right to:

- File complaints without fear of retaliation;
- Prompt investigations and effective resolutions; and
- Current and complete program information.

### Customers are responsible for:

- · Filing complaints in a timely manner (state local time frame), and
- Providing CTC with pertinent information.

### **Determination of complaint:**

- Title VI: Discrimination based on race, color, religion, sex, or national origin.
- ADA: Discrimination of qualified disabled individual, solely by reason of such disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination in programs, services or activities sponsored by a public entity.

### Time Frame for complaints:

- Title VI: No later than 180 days from the date of the alleged discrimination.
- ADA: No later than 60 days from the date of the alleged discrimination.
- Record retention of complaints filed is 5 years.

Note: Title VI / ADA Complaint form is available on Marion Transit webpage.

### 2.0 Roles Responsibilities

- **2.1 Supervisors/Managers** responsible for ensuring that complaints are fully investigated in a timely manner. Proposed actions for improvement are documented and if warranted disciplinary action is taken. Compliments are also documented and discussed with the employee.
- **2.2 Drivers/Employees** responsible for providing a service to our customers that meet or exceed expectations. Notify their respective supervisor as soon as practical of any potential



## Page 2 COMPLAINT & COMPLIMENTS PROCEDURE CONTINUED

situation(s) that may cause someone to initiate a complaint against the agency and/or employee.

#### 3.0 Procedures

Any Marion Transit employee can receive a compliment or complaint from a citizen. When a compliment or complaint is being made the employee receiving the information is required to document with as much information including; who, what, when, where, how, and why. Forms are available to document both types of incidents and may be accessed by contacting the Transit Office Assistant.

Once the incident is documented, it should be forwarded to the respective supervisor/manager for further investigation. The supervisor/manager will make the Transportation Director aware of the complaint or compliment and forward the report(s) once the investigation is completed.

In the case of a complaint, the supervisor/manager will propose actions to remedy the situation. Both the supervisor/manager and Transportation Director will determine outcomes.

Once a complaint or compliment is completed, copies of the report will be placed in the respective Marion Transit employee folder and/or Master Index Folder. The person making the complaint should be notified of the outcome if warranted.

Complaints that may warrant severe disciplinary action will be brought to the attention of the Executive Director and Human Resources.

All complaints and/or compliments should be kept in a common index file for easy access by Month/Year.

Note: Copies of forms are attached.

+++ END +++

# Marion Senior Services, Inc. d/b/a Marion Transit

Title VI Complaint Form

### TITLE VI COMPLAINT FORM

Consistent with Title VI of the Civil Rights Act of 1964 and the Americans with Disabilities Act of 1990 (ADA), the Agency has designated an individual as the Title VI/ADA Coordinator. The coordinator is responsible for accepting complaints of discrimination on the basis of race, color, national origin, sex, age, disability, religion and family status in the provision of services, activities, programs, or benefits provided by the Agency.

A complaint shall be submitted in writing within the following time frames:

- <u>Title VI: No later than 180 days from the date</u> of the alleged discrimination based on race, color, religion, sex or national origin.
- ADA: No later than 60 days from the date of the alleged discrimination of a qualified disabled individual shall, solely by reason of such disability, be excluded from the participation in, be denied the benefits of or be subjected to discrimination in programs, services or activities sponsored by Marion Senior Services, Inc.

Complaints shall include the name, address, and phone number of the complainant, along with the location, date and description of the problem. Complaints shall be processed in accordance with the applicable law.

Note: Marion Senior Services, Inc. does not discriminate based on race, color, national origin, sex, age, disability, religion or family status in any program or service. Persons with questions about nondiscrimination or those needing special accommodations under the ADA or language services should contact the **Transportation Director (352) 620-3071.** 

To file a complaint, complete the form below and mail to Marion Senior Services, Inc. d/b/a Marion Transit at 1101 SW 20<sup>th</sup> Court, Ocala, FL 34471.

Please submit this form in person at the address below, or mail this form to:

Marion Senior Services, Inc. d/b/a Marion Transit ATTN: Transportation Director 1101 SW 20<sup>th</sup> Court Ocala, FL 34471

# Submit a Civil Rights/ADA Complaint:

Section I				
Name:				
Address:				
Telephone (Home):	v	Vork:		
Electronic Mail Address:				
Accessible Format Requirements (Circle):	Large Print	Audio Tape	TDD	Other
Section II				
Are you filling this complaint on your own *If you answered "yes" to this question, go If not, please supply the name and relations	to Section III	[ ] Yes*		] No laining for:
Name	Rel	ationship		
Please explain why you have filed for a thir	d party:			
Please confirm that you have obtained the p behalf of a third party.	ermission of th	ne aggrieved par [ ] Yes	ty if you a	re filing on
Section III				
I believe the discrimination I experienced w [ ] Race [ ] Color [ ] National Origin [ [ ] Family Status	as based on (c	heck all that app Religion [ ] Di	lies): sability [	] Age
Date of Alleged Discrimination (Month, Da	y, Year)			
Explain as clearly as possible what happene Describe all persons who were involved. Inc (s) who discriminated against you (if knowr witnesses. Please include any other informa allegations. Please also provide any other do	clude the name a) as well as na tion that would	and contact info mes and contact l assist us in our	ormation o information investigat	f the person on of any ion of the

# Section IV Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court? [ ] Yes [ ]No If yes, check all that apply: [ ] Federal Agency [ ] State Agency [ ] Federal Court [ ] Local Agency [ ] State Court Please provide information about a contact person at the agency/court where the complaint was filed. Name: Title: Telephone: Section V Name of the agency complaint is against: Contact Person: Telephone Number: You may attach any written materials or other information that you think is relevant to your complaint. Signature and date required below. Signature Date

# Marion Senior Services, Inc. d/b/a Marion Transit

Title VI Complaint Form

# <u>TÍTULO VI FORMULARIO DE QUEJA</u>

De acuerdo con el Título VI de la Ley de Derechos Civiles de 1964 y la Ley de Estadounidenses con Discapacidades de 1990 (ADA), el Condado designó a un individuo como Coordinador del Título VI / ADA del Condado. El Coordinador es responsable de aceptar quejas de discriminación por motivos de raza, color, origen nacional, sexo, edad, discapacidad, religión y estado familiar en la prestación de servicios, actividades, programas o beneficios provistos por el Condado. Las quejas se presentarán por escrito dentro de los siguientes plazos:

<u>Título VI: a más tardar 180 días a partir de la fecha</u> de la supuesta discriminación <u>ADA: a más tardar 60 días a partir de la fecha</u> de la supuesta discriminación

Las quejas incluirán el nombre, la dirección y el número de teléfono del demandante, junto con la ubicación, la fecha y la descripción del problema. Las quejas se procesarán de acuerdo con la ley aplicable.

El Condado de Marion no discrimina por raza, color, origen nacional, sexo, edad, discapacidad, religión o estado familiar en ningún programa o servicio. Las personas con preguntas sobre la no discriminación o aquellos que necesitan alojamiento especial bajo la ADA o los servicios de idiomas deben comunicarse con **Director de Transporte al (352) 620-3071**.

Para presentar una queja, complete el siguiente formulario y envíe por correo a Marion Senior Services, Inc. d/b/a Marion Transit al 1101 SW 20th Court, FL 34471.

Envíe este formulario en persona a la siguiente dirección, o envíe este formulario por correo a:

Marion Senior Services, Inc. d/b/a Marion Transit ATTN: Transportation Director 1101 SW 20th Court Ocala, FL 34471

# Presentar una queja de Derechos Civiles / ADA: Sección I Nombre: Dirección: Teléfono (casa): Dirección de correo electrónico: Requisitos de formato accesible (círculo): Letra grande Cinta de audio TDD Otro Sección II ¿Está llenando esta queja en su propio nombre? 1 Si No \* Si respondió "sí" a esta pregunta, vaya a la Sección III De lo contrario, proporcione el nombre de la relación de la persona por la que se queja: Nombre Relación Explique por qué ha solicitado un tercero: Confirme que ha obtenido el permiso de la parte perjudicada si está presentando una demanda en nombre de un tercero. ] Si ] No Sección III Creo que la discriminación que experimenté se basó en (marque todo lo que corresponda): Raza 1 Color [ ] Origen Nacional ] Género Estado [ ] Discapacidad Edad ] Religión familiar Fecha de presunta discriminación (Mes, Día, Año) Explique lo más claramente posible qué sucedió y por qué cree fue discriminado. Describe a todas las personas que estuvieron involucradas. Incluya la información del nombre y del contacto de la persona (s) que lo discriminó (si lo sabe), así como los nombres y la información

de contacto de cualquier testigo. Incluya cualc investigación de las alegaciones. También pro relevante para esta queja.			
Sección IV			
¿Ha presentado esta queja ante cualquier cualquier tribunal federal o estatal?	otra	ag	encia federal, estatal o local, o ante
[ ] Si [ ] No			
En caso afirmativo, marque todo lo que corre	spon	da:	
[ ] Agencia Federal	1	]	Agencia del Estado
[ ] Corte Federal [ ] Tribunal Estatal	1	]	Agencia Local
Título: Agencia: Dirección:			
Teléfono:			
Sección V			
El nombre de la queja de la agencia está en co	ontra	9	
Persona de contacto:			
Número de Teléfono:			
Puede adjuntar cualquier material escrito u o su reclamo.	otra i	nfo	rmación que considere relevante para
Firma			Fecha



ROUT	NG#		

# **Compliment Report**

	MARION TRANSIT	
Date:		
Bus # & Driver:		
Written By:		
Compliment made by:	Address / Phone:	
Compliment Details:		
Supervisor Comments:		
Supervisor Name & Signature: Director Comments:		
Director Signature & Date:		



ROUTING #	

# **Complaint Report**

	MARION TRANSIT	
Date:		
Bus # & Driver:		
Written By:		
Complaint made by:	Address / Phone:	
Complaint Details:		
Supervisor Comments:		
Supervisor Name & Signature:		
Director Comments:		
Director Signature & Date:		



R	n I	17	LII	11	2	ł

# **Complaint Report**

MA	ARION TRANSIT
Date: 10/18/2021	
Bus # & Driver: #1406 / Manny Vizcarrondo	*
Written By: Cyndi	
Complaint made by: Richard Curkala	Address / Phone: 352-694-1523
Complaint Details: He said that he came out of Ollie's, he was about 6 ca turned red and the bus crossed 3 lanes of traffic and t	rs behind the bus, the light turned green and the bus didn't go. The light turned right. He said that someone needs a drivers lesson.
Supervisor Comments: Returned a call to Noccurred. Video reviewed, not found. I washen switching lanes at all times.  Supervisor Name & Signature: Herman Director Comments:	Mr. Curkala (Caller) He did not recall what time of day this ill discuss with driver Manny, and ask him to use caution
Director Signature & Date:	



**ROUTING #** 

21-12-147

# **Complaint Report**

NAA	DION	TDA	NICIT

MARION TRANSIT						
Date: 12/13/2021 @ 10:25 AM happened 11/15/2021 for her ride home  Bus # & Driver: Fred LaSalle						
Complaint made by: Jewel Dixon	Address / Phone: 352-421-0034					
Complaint Details: She said that when Fred picked her up from the of his seat to help her, she said that she about fe he should help.	doctor office last month, that he waved her over to the bus, he didn't get out Il on the steps but she was able to catch herself so she didn't fall. She said that					
Supervisor Comments: I remi clients on and off the Supervisor Name & Signature: KEN M	The bus.  Kelvy/Ken M Kelvy					
Director Comments:						
Director Signature & Date:						



**ROUTING #** 

22-02-08

# **Complaint Report**

BAAC	1101	11 (0.10)	ARI	CI	т.
MAR		I I K	$\mathbf{A}$	31	
The state of the s			100 100		

Date: 2/10/2022 happen	ed at approx 3:25 ish
------------------------	-----------------------

Bus # & Driver: #2004 / Jose Garcia

Written By: Cyndi

Complaint made by: Jessica

Address / Phone: 407-666-0058 (No need to call back)

## **Complaint Details:**

She said that they were on 464 and an accident happened, she said that she put on her blinker to merge to the other lane, and she said that the driver cut sped up and took off, she had to slam on the brakes to avoid hitting the truck that was involved in the accident. She said that it is very unprofessional she said that she had a 14 month old baby in the car. She said that she wants the driver to be aware of his surroundings. And don't cut other cars off.

Supervisor Comments: Video not found on playback for 02/10/2022. I will discuss with Driver Jose and ask him to be aware of his surroundings to avoid any future misunderstandings.

Supervisor Name & Signature: #ferman Schol 2/16/2027
Director Comments:

Director Signature & Date: Compos Mun 2/18/2022



**ROUTING #** 

22-02-09

# **Complaint Report**

**MARION TRANSIT** 

Date: 2/10/2022

Bus # & Driver: #2102 / Rosemary Formella

Written By: Cyndi

Complaint made by: Donald Stofflet

Address / Phone: 352-289-4967

### **Complaint Details:**

Mr. Stofflet states that the shoppers were dropped off at 9:30 am and should have been picked back up about 11:30 am, he said that she didn't get back to pick them up until approx. 12:05 pm. He said that while they were waiting for the bus, there was a man that said that he was hungry, so he went inside to grab some cooked chicken for the man. He said that Rosemary yelled at him because he was not out waiting when she got there, saying you only get 2 hours and that is it. He said that as soon as she pulled up and opened the doors, Robert Strait and Meredith Meadows got off the bus and went to the liquor store, to use the bathroom. He said that when there are clients with medical appointments that they have to wait for the medical appointments to finish before they can go home.

Supervisor Comments: Discussed with Driver Rosemary, she said at no time did she raise her voice to Mr. Stofflet. Video reviewed Unfounded. Called Mr. Stofflet – left voice message he was not available. Rosemary will also communicate with him to explain we have one bus going into his area (Forest) which brings in shoppers / medical appointments and brings them all back together on the same bus.

Supervisor Name & Signature:

**Director Comments:** 

Director Signature & Date:

2/18/2022

#### **GRIEVANCE PROCEDURES**

#### OCALA MARION TRANSPORTATION DISADVANTAGED LOCAL COORDINATING BOARD

#### **Article 1: Preamble**

The following will set forth the grievance procedures which shall serve to guide the Ocala Marion TPO Transportation Disadvantaged Local Coordinating Board (TDLCB). The Community Transportation Coordinator (CTC) will receive and attempt to satisfy any concerns by any person(s). If for any reason the complainant is not satisfied with the resolution determined by the CTC then the procedures herein will assist in acquiring a satisfactory resolution. This will provide procedures and policies for fulfilling the requirements of chapter 427, Florida Statutes, Rule 41-2 of the Florida Administrative Code (FAC), and subsequent laws setting forth requirements for the establishment of grievance procedures.

### **Article II: Name and Purpose**

Name: The Grievance Committee is a Subcommittee of the Transportation Disadvantaged Local Coordinating Board, but will hereinafter be referred to as the Grievance Subcommittee.

Purpose: The primary purpose of the Grievance Subcommittee is to process, investigate and make recommendations to any and all unresolved grievances and/or complaints. To provide a formal grievance process by the TDLCB to address concerns by any person or agency including but not limited to, users, potential users, agencies, and other interested parties. The Grievance Subcommittee will provide a mechanism for issues to be brought before the committee which shall meet as often as necessary to address unresolved complaints in a timely manner.

#### **Article III: Definitions**

- 1. Community Transportation Coordinator (CTC): An entity and or person appointed to ensure that coordinated transportation services are provided to the transportation disadvantaged population in a designated service area.
- 2. A Grievance is defined as any ongoing service problem that interferes with accessing a major life activity, such as work, healthcare, employment, education, shopping, social activities, or other life sustaining activities.
- 3. Service Complaint: Any routine incidents and/or dissatisfaction that occur, are reported to the driver, dispatcher, or other individuals involved with the daily operations, and are

resolved within the course of a reasonable time period suitable to the complainant. Service complaints may include but are not limited to:

- a. Late trips (late pickup, late drop off, and/or late returns)
- b. No-show by Transportation Operator
- c. No-show by client
- d. Client Behavior
- e. Driver Behavior
- f. Passenger discomfort
- g. Refusal of service to client for any reason
- 4. Formal Grievances: A written complaint to document any concerns or an unresolved service complaint regarding the operation or administration of TD services by the Transportation Operator, Community Transportation Coordinator, agencies, or Local Coordinating Board. Formal Grievances may include, but are not limited to:
  - a. Chronic or unresolved service complaints
  - Violation of specific laws governing the provision of Transportation
     Disadvantaged Services (i.e., Chapter 427 of Florida Statutes, Chapter 41-2 of
     Florida Administrative Code and accompanying documents, Sunshine Law and/or
     ADA violations)
  - c. Contract disputes (Agencies/Operators)
  - d. Bidding disputes
  - e. Agency compliance
  - f. Conflicts of interest
  - g. Supplanting of funds
  - h. Billing and/or accounting procedure violation
  - i. Denials of applications for paratransit services

### **Article IV: Membership**

- 1. Members of the Grievance Subcommittee shall serve on a voluntary basis and shall consist of at least five (5) voting members.
- 2. Each member of the Grievance Subcommittee shall serve at the discretion of the TDLCB.
- 3. The CTC shall not serve on the Grievance Subcommittee.
- 4. Grievance Subcommittee members will meet if a grievance is brought before the committee.

- 5. When a meeting of the Grievance Subcommittee is necessary, staff to the TPO shall schedule the meeting. Meetings shall be held at the time and place as the Grievance Subcommittee may determine.
- 6. The Members shall serve a term of one year, with allowances for multiple terms.
- 7. The Grievance Subcommittee shall elect a Chairperson and Vice-Chairperson.
- 8. A simple majority shall be present in any official action.
- 9. No voting member will have a vote on an issue that is deemed a conflict of interest.

### <u>Article V: Filing Complaints and Grievances – STEP 1</u>

- 10. All formal grievances must contain the following:
  - a. Must submit in writing
  - b. Name and address of complainant
  - A clear and concise statement of the grounds for the grievance and supplemented by supporting documentation
  - Exact date and time of incident
  - Exact location of incident
  - Any witnesses to incident (including name and address)
  - Vehicle unit number, license number, color and type
  - Any other information affiliated with the complaint
  - c. An explanation by the complainant of the improvements needed to address the complaint

All written complaints can be sent to:

Marion Senior Services 1101 SW 20<sup>th</sup> Court Ocala, Florida 34471

A complaint form has been created (see page 8) indicating all of the above-mentioned items.

- 11. The CTC must post the contact person and telephone number for access to information regarding reporting service complaints or filing a formal grievance in each of their vehicles in plain view of riders.
- 12. The CTC will have ten (10) working days from the date of notification of the complaint to address or investigate the problem.

- 13. The CTC will investigate the problem and respond in writing, within ten (10) working days of notification to the complainant as to what action was taken. Such action will contain an explanation of the facts that lead to the CTC's decision and provide a method or ways to bring about a resolution.
- 14. The Grievance Subcommittee and TDLCB Board will receive a copy of all grievances and responses.

### <u>Article VI: Appeal Process – STEP 2</u>

- 1. If the complainant is dissatisfied with the CTC's response and/or recommendation they may file an appeal with the Grievance Subcommittee.
- 2. The complainant may only file after they have sought satisfaction directly from the CTC and received a response. Complainant must demonstrate that they have unsuccessfully attempted to resolve the issue with the CTC. Every effort will be made by the CTC to resolve service problems. However, if unable to resolve the problem and/or the complainant wishes to take further action, then the CTC will provide the complainant with assistance in following the Grievance Procedures.
- 3. The appeal must be filed within ten (10) days from the date of notification of final decision from the CTC.

The appeal must be in writing and addressed to:

Ocala Marion Transportation Planning Organization ATTN: TDLCB Grievance Subcommittee 2710 E. Silver Springs Blvd. Ocala, Florida 34470

- 4. Once an appeal has been received, the Grievance Subcommittee shall meet and render its recommendation within thirty (30) working days of the date the appeal was filed.
- 5. The complainant shall be notified in writing of the mutually agreed upon date, time and place where the appeal shall be heard. This written notice shall be mailed at least ten (10) working days in advance of the meeting.

- 6. A written recommendation will be rendered to all parties involved within ten (10) working days from the date of the recommendation and will include the following, in writing:
  - a. Statement that a meeting was held and the involved parties were given an opportunity to present their position(s).
  - b. The issues discussed and clearly defined
  - c. Reason(s) for the recommendation based on the information provided
- Grievance Subcommittee must report all grievances and recommendations to the full Transportation Disadvantaged Local Coordinating Board.

## Article VII: Appeal to the Transportation Disadvantaged Local Coordinating Board - STEP 3

- 1. If the complainant is dissatisfied with the recommendation of the Grievance Subcommittee he/she may continue the appeal process with the TDLCB as follows.
- 2. The appeal must be in writing and filed within ten (10) working days from the date of final recommendation from the Grievance Subcommittee.
- 3. Appeal to the TDLCB can only be filed after the complainant has sought satisfaction directly from the Grievance Subcommittee.
- 4. The appeal should demonstrate a clear violation of a specific law, regulation, contractual agreement, or circumstance.

Address all appeals to:

Ocala Marion Transportation Planning Organization ATTN: TDLCB 2710 E. Silver Springs Blvd. Ocala, Florida 34470

- 5. Once an appeal has been received, the TDLCB shall meet and render its recommendation within sixty (60) working days of the date the appeal was filed.
- 6. The complainant shall be notified in writing of the mutually agreed upon date, time and place where the appeal shall be heard. This written notice shall be mailed at least ten (10) working days in advance of the meeting.

- 7. A written recommendation will be rendered to all parties involved within ten (10) working days from the date of the recommendation and will include the following, in writing:
  - a. Statement that a meeting was held and the involved parties were given an opportunity to present their position(s).
  - b. The issues discussed and clearly defined
  - c. Reason(s) for the recommendation based on the information provided

## Article VIII: Appeal to the Commission for the Transportation Disadvantaged - STEP 4

If the complainant is dissatisfied with the recommendation of the TDLCB, he/she may continue the process with the TD Ombudsman Program by calling the following number(s): 1-800-983-2435. For hearing and speech impaired customers call, 711 (Florida Only) Florida Relay System or (850) 410-5708 for TTY via written correspondence to:

Florida Commission for the Transportation Disadvantaged Attn: Ombudsman Program 605 Suwannee Street, MS-49 Tallahassee, FL 32399-0450

#### **Article IX: General**

The Transportation Disadvantaged Local Coordinating Board Grievance Procedures may be amended by a two-thirds (2/3) vote of members present, if a quorum exists, and all Members have been notified of proposed changes at least seven (7) working days in advance of the meeting.

The implementation of these rules and procedures will ensure quality control and the ability to provide an impartial body to hear complaints and submit recommendations regarding the grievance as indicated.

Apart from this grievance/appeal process, aggrieved parties with proper standing may also have recourse through Chapter 120, Florida Statutes Administrative Hearing Process, or the judicial court system.

## CERTIFICATION

The undersigned hereby certifies that he/she is the Chairperson of the Ocala Marion TPO Transportation Disadvantaged Local Coordinating Board and that the foregoing is a full, true and correct copy of the Grievance Procedures of this Local Coordinating Board as adopted by the Ocala Marion TPO Transportation Disadvantaged Local Coordinating Board on the 8th day of December 2022.

Commissioner Michelle Stone, TDLCB Chairperson

Robert Balmes, TPO Director

## **COMPLAINT FORM**

## OCALA MARION TRANSPORTATION DISADVANTAGED LOCAL COORDINATING BOARD

Complair	nant(s) Name:		Complainant(s) Address:		
Complair	nant(s) Phone Numbe	er:	Complainant(s) Email:		
Complair	nant(s) Representativ	e's Name, Address, Phone Number and	Relationship (e.g. friend, att	corney, parent, etc.):	
Names of	f the Individual(s) Wh	nom You Allege a Complaint Against (If R	(nown):		
Name an	d Address of Agency,	Institution, or Department Whom You	Allege a Complaint Against:		
	Date of incident:	Vehicle Unit/License NoColor-Type		Time of Incident:	
Please list allegation		number(s) of any person, if known, that can	be contacted for additional inf	ormation to support or clarify your	
	olain as clearly as possib y be attached if needed.	ole HOW, WHY, WHEN and WHERE is your allo	eged complaint. Include as muc	h information as possible. Additional	l
Please ind	icate what would be an	acceptable resolution:			
Com	plainant(s) or Complain	ant(s) Representatives Signature:		Date of Signature:	
Pleas	e submit to: Addres	s in the step process	□ Ad	ditional Pages are attached.	

## **TDLCB COMPLAINT TRACKING FORM**

Name of Complainant:	
COMPLAINT TO THE CTC -STEP 1	File Number
Date of 1st. Complaint:	Date of 1 <sup>st</sup> . Resolution:
Action Taken (including date of letter):	
APPEAL = COMPLAINT TO THE TDLCB GRIEVAN	CE SUBCOMMITTEE – STEP 2
Date of 2 <sup>nd</sup> Complaint: Date of Subcommittee Hearing:	
Action Taken (including date of letter):	
APPEAL = COMPLAINT TO THE TDLCB - STEP 3	
Date of 3 <sup>rd</sup> Complaint:	Date of 3 <sup>rd</sup> Resolution:
Date of TDLCB Hearing:	
Action Taken (including date of letter):	

ADDEAL	TO THE	CORARAICCIOR	LEAD THE	TDANCDODT	ATIONI DICAE	N/A NITA CED	CTED 4
APPEAL	= 10 1HE	COMMISSION	IFURIHE	IKANSPUKIA	ATION DISAL	JVANTAGED -	- SIEP 4

Date	sent:		

## American with Disabilities Act Transportation-Related ADA Policies and Procedures

Marion Transit is committed to complying with all applicable provisions of the Americans with Disabilities Act, as amended (ADA), and applicable state and local laws and maintains liability coverage for required services to individuals with disabilities. It is Marion Transit's policy not to discriminate against any participant or employee regarding any terms or conditions of their participation with programs at Marion Senior Services, Inc. and access to services provided within, including transportation, on the basis of such individual's disability.

Consistent with this policy of non-discrimination, Marion Transit, will provide reasonable accommodations to an individual with a disability, as defined in the ADA or applicable law, who has made Marion Transit aware of his or her disability at intake, unless doing so would cause an undue hardship to the agency.

The agency also wishes to participate in a timely, good faith, interactive process with a disabled participant to determine effective reasonable accommodations, if any, which can be made in response to a request for accommodations. Requests should be made to the Transportation Director. By working together in good faith, the Agency hopes to implement any reasonable accommodations that are appropriate and consistent with its legal obligations.

Any participant who has questions regarding this policy or believes that he or she has been discriminated against based on a disability should notify the Transportation Director or Human Services Director. All such inquiries or complaints will be treated as confidential to the greatest extent possible and will only be disclosed on a need-to-know basis.

## **Terms Used in This Policy**

As used in this ADA policy, the following terms have the indicated meaning:

- Disability: A physical or mental impairment that substantially limits one or more major life activities of the individual, a record of such an impairment, or being regarded as having such an impairment.
- Major life activities: Term includes caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating and working.
- Substantially limiting: In accordance with the ADA final regulations, the determination
  of whether an impairment substantially limits a major life activity requires an
  individualized assessment, and an impairment that is episodic or in remission may also
  meet the definition of disability if it would substantially limit a major life activity when
  active. Some examples of these types of impairments may include epilepsy,
  hypertension, asthma, diabetes, major depressive disorder, bipolar disorder and
  schizophrenia. An impairment, such as cancer that is in remission but that may possibly
  return in a substantially limiting form, is also considered a disability under EEOC final
  ADA regulations.

- Reasonable accommodation: Includes any changes or adjustments to the human services transportation program and may include making existing transportation services readily accessible to and usable by individuals with disabilities.
- Undue hardship: An action requiring significant difficulty or expense by Marion Transit in determining whether an accommodation would impose an undue hardship on Marion Transit factors to be considered include:
  - o The nature and cost of the accommodation.
  - The overall financial resources of the facility or facilities involved in the provision of the reasonable accommodation, the number of persons affected, the effect on expenses and resources, or the impact of such accommodation on the operation of the facility.
  - The type of operations of the agency, including its composition, structure and functions.

## **Right to Use Marion Transit Transportation Services**

Transportation services will not be denied to any participant with a disability, if the individual is capable of using the service and abides by Marion Transit rider rules (see below).

Marion Transit further does not require an individual with a disability to use designated priority seats, if the individual does not choose to use these seats.

Marion Transit does not require that an individual with a disability be accompanied by an attendant.

#### **Rules for Rider Conduct**

Marion Transit may refuse service to any individual who engages in violent, seriously disruptive, or illegal conduct, or represents a direct threat to the health or safety of others.

The definition of "direct threat" is intended to be interpreted consistently with the parallel definition in the Department of Justice regulations. That is, CFR, Title 49, Part 37 does not require a public entity to permit an individual to participate in or benefit from the services, programs, or activities of that public entity when that individual poses a direct threat to the health or safety of others. In determining whether an individual poses a direct threat to the health or safety of others, a public entity must make an individualized assessment, based on reasonable judgment that relies on current medical knowledge or on the best available objective evidence, to ascertain: the nature, duration, and severity of the risk, the probability that the potential injury will actually occur, and whether reasonable modifications of policies, practices, or procedures or the provision of auxiliary aids or services will mitigate the risk.

Marion Transit strictly prohibits the use of alcohol and/or drugs, and/or the possession of a firearm/weapon by any participant while on board a vehicle. The use of drugs and/or alcohol or the possession of a firearm/weapon will result in immediate discharge.

Marion Transit Drivers will make reasonable attempts resolve issues with riders. If service is denied, the Driver will document the incident or incidents leading to the service denial on the incident Report (see Exhibit A Incident Report), substantiating how such an incident rises to the level of seriously disruptive behavior or a direct threat.

Marion Transit "Rider Disciplinary Policy" covers this in more depth and should be referred to.

## Boarding and Securement: Policies and Procedures for Wheelchair-Bound Participants

It is the policy of Marion Transit to comply with all the legal requirements of Federal and State laws and regulations as they pertain to individuals with disabilities. Marion Transit transit program provides quality transportation services without discrimination to all persons, including individuals with disabilities. Service is provided in a manner that meets the following goals:

- 1. Provide safe, accessible and dignified services to all persons.
- 2. Expedite the safe and efficient boarding, securing, transporting and alighting of all passengers, regardless of mobility status.
- 3. Accommodate the wide range of mobility aids within the confines of available vehicles and standard equipment.
- 4. Minimize potential damage to mobility aids and transit system equipment in the process.

Marion Transit's transit program has the capacity to carry a wheelchair and occupant. A wheelchair is defined as a mobility aid belonging to any class of three or four-wheeled devices used by individuals with mobility impairments, whether operated manually or powered. A "common wheelchair" does not exceed 30 inches in width and 48 inches in length measured two inches above the ground and does not weight more than 800 or 1000 pounds when occupied based on the capacity of the bus lift.

Marion Transit does not allow Segway personal transportation devices onto transportation vehicles, nor does the agency allow such devices in its offices.

**Boarding**: Drivers and scheduling practices will provide adequate time for a passenger with a disability to board and/or disembark the vehicle. It is the responsibility of the driver to determine the safest location for passenger boarding based on conditions and individual needs upon arrival at the pick-up site. The passenger will maneuver the mobility aid to the vehicle. Only a properly trained transit employee can operate the lift, secure the wheelchair on the lift and in the securement station.

A person with a disability who is not using a wheelchair or other seated mobility aid may use the lift to board or alight the vehicle upon request.

Drivers will make themselves available for assistance to persons with disabilities and will assist upon request of the passenger. Drivers will leave their seat to assist a passenger with using the vehicle ramp, lift and/or securement systems. Drivers will use the accessibility-related equipment and features on their vehicles.

**Securement**: Securement of the "common wheelchair" class of mobility device is the responsibility of the driver and drivers will be trained in the proper operation of all securement equipment based on manufacturer specifications. Marion Transit utilizes universal tie-downs to secure mobility devices.

Marion Transit shall respond to requests for reasonable modification to policies and practices consistent with its transportation program, unless the request would fundamentally alter the nature of Marion Transit's services, programs or activities. All requests for modification are to

be in writing (any format) with the name of the individual requesting modification and other relevant contact information and shall be delivered to the Transportation Director. Forms are also available on the <a href="https://www.mariontransit.org">www.mariontransit.org</a> website.

## **ADA Complaint Procedures**

Marion Transit's Transportation Director and leadership staff are responsible for ADA grievances. The ADA Coordinator is the Transportation Director as the ADA Coordinator's alternate is the Human Resources Director to address the agency's compliance with ADA regulations as it relates to the transportation program and ADA transportation related concerns and grievances.

<u>No later than 60 days from the date</u> of the alleged discrimination of a qualified disabled individual shall, solely by reason of such disability, be excluded from the participation in, be denied the benefits of or be subjected to discrimination in programs, services or activities sponsored by Marion Senior Services, Inc.

Transportation related ADA concerns, grievances or complaints are required to be submitted to Transportation Director at 1101 SW 20<sup>th</sup> Court, Ocala, Florida 34471 on the agency's Complaint Form (see Exhibit B for complete instructions on the process). This form is also available on the agency website <a href="https://www.mariontransit.org">www.mariontransit.org</a>

Note: Clients may appeal any action by Marion Transit with regards to paratransit service within 10 days by submitting a written appeal to: Executive Director, Marion Senior Services, Inc., 1101 S.W. 20<sup>th</sup> Court, Ocala, Florida 34471. The rider will be notified after a complete investigation within 5 working days after the written appeal request.

#### **Equipment for Accessible Service**

Marion Transit shall ensure that vehicle operators and other personnel are thoroughly trained on the operation and make use of accessibility-related equipment or features required by Part 38 of this title and shall maintain in operative condition those features of facilities and vehicles that are required to make the vehicles and facilities readily accessible to and usable by individuals with disabilities. These features include lifts and other means of access to vehicles, securement devices, signage and systems to facilitate communications with persons with impaired vision or hearing.

Marion Transit shall establish a system of regular and frequent maintenance checks of lifts sufficient to determine if they are operative (this is part of the Daily Pre/Post Trip Inspection conducted on every vehicle). Drivers are required to immediately report to the Transit Manager any failure of a lift or other accessibility feature. Accessibility features shall be repaired promptly if they are damaged or out of order. When an accessibility feature is out of order, Marion Transit shall take reasonable steps to accommodate individuals with disabilities who would otherwise use the feature.

Vehicle accessibility features include:

- Lifts and ramps
- Mobility aid securement areas and systems
- Lighting
- Seatbelts and/or shoulder harnesses (required to be used by all passengers)
- Signage

#### Facility features include:

- Signage
- Accessible paths to and within facilities
- Ramps

## **Wheelchairs and Other Mobility Devices**

Marion Transit's transit program has the capacity to carry a wheelchair and occupant. Marion Transit does not allow Segway personal transportation devices onto transportation vehicles, nor does the agency allow such devices in its Centers.

#### **Service Animals**

Marion Transit allows passengers to bring a service animal. When booking a trip, riders should advise reservations they will have a service animal riding with them.

#### **Effective Communications**

Marion Transit will make every accommodation to communicate with persons who have disabilities affecting hearing, speaking, reading, writing or comprehension, as long as the accommodation does not place an undue burden upon the organization.

## **ADA Training for Employees**

Marion Transit has designed a training program that provides complete information on accessibility-related equipment and accommodations required by the ADA training is thoroughly define in the agency's Transportation Operating Policies and Procedures (Exhibit C). Employees further acknowledge that they have received and read the agency's transportation-related ADA Policy as documented with Exhibit D and is include in driver training files.

ADA training ensures that employees understand the importance of keeping equipment and accommodations in good working order and that employee provide excellent customer service to people with disabilities. The training program:

- Covers all aspects of service delivery;
- Includes regular updates as necessary on new technologies and refresher in-service training on serving people with disabilities;
- Addresses both technical tasks (operating all accessibility equipment and features) and human relations (providing assistance to individuals with disabilities in boarding, alighting and securement, sensitivity & etiquette in serving persons with disabilities, communicating with individuals with different types of disabilities); and,
- Vehicle mechanics (maintaining all accessibility equipment and keeping maintenance and repair records).

Marion Transit's Transportation Director, reporting to the Marion Senior Services, Inc. Executive Director, is responsible for the oversight of the transportation program, including its policies and procedures, and supervising employees to ensure they provide proper and consistent levels of service to individuals with disabilities.

## **Description of Services and Scheduling Rides**

Transportation services are offered Monday – Friday from 5:00 a.m. to \*7:00 p.m. transportation service requests are to be made up to 2 weeks but not less than prior day in advance of your appointment time. Transportation requests must be made by calling Reservations at 352-620-3072 Monday through Friday 8:00 a.m. to 5:00 p.m.

(\*ADA & Dialysis riders may make special request with Reservations)

## **Reasonable Modifications Requests**

Marion Transit shall respond to requests for reasonable modification to policies and practices consistent with its transportation program, unless the request would fundamentally alter the nature of Marion Transit's services, programs or activities. All requests for modification are to be in writing (any format) with the name of the individual requesting modification and other relevant contact information and shall be delivered to the Transportation Director. Forms are also available on the agency website <a href="https://www.mariontransit.org">www.mariontransit.org</a>

#### **Use of Cell Phones**

Each Driver has read and signed acknowledging the use of cell phone policy which forbids use of cell phones while driving.

## **Ridership by Unaccompanied Minors**

Marion Transit provides transportation to unaccompanied minors as long as the minor is accompanied by an adult. Unaccompanied minors (ages 15 and above) are provided transportation services to/from school activities and/or doctor's appointments with prior approval/permission granted by the minor's parent/guardian.

#### **Travel Attendants**

Marion Transit allows for participants to be accompanied by travel attendants in the event that it is necessary, and the vehicle is not to capacity. Prior knowledge of ridership by a participant traveling with an attendant is necessary to make sure the vehicle is not to capacity.

## Food and/or Beverage Consumption

There is no consumption of food and/or beverages permitted on Marion Transit vehicles.

#### **Bicycles and Strollers**

Marion Transit makes all reasonable accommodations for bicycles and strollers as appropriate.

## Oxygen and Other Health Aids

Marion Transit does not prohibit an individual with a disability from traveling with a respirator or portable oxygen supply, as long as the health aid is classified as a portable oxygen concentrator as defined in 49 CFR, 177.870(e).

A DIVISION OF

## **Marion Senior Services, Inc.**

# Title VI Complaint Form or ADA Complaint Form

(Circle One)

Consistent with Title VI of the Civil Rights Act of 1964 and the Americans with Disabilities Act of 1990 (ADA), the Agency has designated an individual as the Title VI/ADA Coordinator. The Coordinator is responsible for accepting complaints of discrimination on the basis of race, color, national origin, sex, age, disability, religion and family status in the provision of services, activities, programs, or benefits provided by the Agency.

A Complaint shall be submitted in writing within the following time frames:

- <u>Title VI: No later than 180 days from the date</u> of the alleged discrimination based on race, color, religion, sex or national origin.
- <u>ADA: No later than 60 days from the date</u> of the alleged discrimination of a qualified disabled individual shall, solely by reason of such disability, be excluded from the participation in, be denied the benefits of or be subjected to discrimination in programs, services or activities sponsored by Marion Senior Services.

Complaints shall include the name, address, and phone number of the complainant, along with the location, date and description of the problem. Complaints shall be processed in accordance with the applicable law.

Note: Marion Senior Services, Inc. does not discriminate based on race, color, national origin, sex, age, disability, religion or family status in any program or service. Persons with questions about nondiscrimination or those needing special accommodations under the ADA or language services should contact **Transportation Director** (352) 620-3071.

Please submit this form in person at the address below, or mail this form to:

Marion Transit Services a Division of Marion Senior Services, Inc. ATTN: Transportation Director 1101 SW 20<sup>th</sup> Court Ocala, FL 34471

A DIVISION OF

## **Marion Senior Services, Inc.**

## **Submit a Civil Rights Title VI/ADA Complaint:**

Section I	
Name:	
Address:	
Telephone (Home):	Work:
Electronic Mail Address:	
Accessible Format Requirements (Circle):  Large Prin	t Audio Tape TDD Other
Section II  Are you filling this complaint on your own behalf?  *If you answered "yes" to this question, go to Section If not, please supply the name and relationship of the	III
Name	_ Relationship
Please explain why you have filed for a third party:	
Please confirm that you have obtained the permission behalf of a third party.	of the aggrieved party if you are filing on [ ] Yes [ ] No
Section III I believe the discrimination I experienced was based of [ ] Race [ ] Color [ ] National Origin [ ] Gender [ ] Family Status	
Date of Alleged Discrimination (Month, Day, Year)	
Explain as clearly as possible what happened and why Describe all persons who were involved. Include the r (s) who discriminated against you (if known) as well a witnesses. Please include any other information that wallegations. Please also provide any other documentat	name and contact information of the person as names and contact information of any yould assist us in our investigation of the

A DIVISION OF

## Marion Senior Services, Inc.

Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court?  [ ] Yes
[ ] Yes [ ] No If yes, check all that apply: [ ] Federal Agency [ ] State Agency [ ] Federal Court [ ] Local Agency
If yes, check all that apply:  [ ] Federal Agency
[ ] Federal Agency [ ] State Agency [ ] Local Agency
[ ] Federal Court [ ] Local Agency
[ ] State Court
Please provide information about a contact person at the agency/court where the complaint wa filed.
Name:
Title:
Agency:
Address:
Telephone:
Section V
Name of the agency complaint is against:
Contact Person:
Title:
Telephone Number:
You may attach any written materials or other information that you think is relevant to you complaint.
Signature and date required below.
SignatureDate



1101 S.W. 20<sup>th</sup> Court, Ocala, Florida 34471 352-620-3519

## Marion Transit Performance Measures

#### • Timing of advanced scheduling requests

Marion Transit takes reservations at least three working days before appointment and up to two weeks in advance. Currently our county demographics play a large part in this, however, with new scheduling software (currently in acquisition) Marion Transit will strive to reduce the minimum days required to schedule service.

#### On-time passenger pick-up

Random manifests are reviewed periodically to monitor on-time performance. Adjustments are made after reviewing and discussed with the drivers for improved performance. Those passengers who live in outlying areas of Marion County are required to make their appointments during a window of time that allows transit to be able to pick them up and deliver them in a timely manner. This window may be adjusted to accommodate the client when there is not another alternative. *Marion Transit is in negotiations to purchase and install updated scheduling software that will help improve this* as well as provide a more detailed "real-time" analysis.

#### • Improved routing to minimize passenger wait times

It is one of the goals of Marion Transit to *minimize passenger dwell time*. We monitor this through rider surveys and driving time logs. *Marion Transit is in negotiations to purchase and install updated scheduling software that will help improve this* as well as provide a more detailed "real-time" analysis.

#### • Error rates for passenger pick-up and drop-off

This is monitored and addressed by occurrence but not necessarily a frequent event.

#### • Collection of public posting of passenger satisfaction survey ratings

Marion Transit conducts at least annual customer satisfaction surveys by actual passengers. These surveys are reviewed and analyzed with the overall results being posted on our Facebook page as well as website.

Agency: Marion Senior Services, Inc. d/b/a – Marion Transit

Name of Responder: Clayton Murch, Transportation Director Email address: cmurch@marionseniorservices.org

Phone number: 352-620-3519



RON DESANTIS GOVERNOR 420 W. Landstreet Orlando, Florida 32824 KEVIN J. THIBAULT, P.E. SECRETARY

May 14, 2021

Tom Wilder Transportation Director Marion Senior Services 1101 Southwest 20<sup>th</sup> Court Ocala, Florida 34471

Re: Marion Senior Services System Safety Program Plan Letter of Concurrence (2021)

Dear Mr. Wilder:

The Department has completed a review of the System Safety Program Plan (SSPP) during Marion Senior Services' 2021 Triennial Review. We find the SSPP to comply with the 2019 FDOT State Management Plan, FDOT Procedural Topic No. 725-030-009-j, and Florida Administrative Code (F.A.C.) Rule Chapter 14-90. Therefore, the Department is in concurrence with the Marion Senior Services SSPP.

We appreciate the opportunity to review the document and ensure compliance with state requirements. Please include a copy of this letter as an appendix to your agency's SSPP. The Department also recommends proper documentation of the receipt of concurrence letter in the plan's activity log.

If you have any questions, please contact me at (321) 319-8174 or e-mail diane.poitras@dot.state.fl.us.

Sincerely,

Docusigned by:
Diane Poitras
1053F40140014E0...
DIane Poitras

Transit Programs Administrator

**District Five** 

DP/bg

# MARIONTRANSIT A DIVISION OF











# BUS TRANSIT SYSTEM SAFETY PROGRAM PLAN (SSPP)



Adopted: July 2016

Latest Review / Update: September 21, 2022

## **SSPP Document Activity Log**

Date	Activity (Review/Update/Addendum/ Adoption/Distribution)	Concerned Person (Signature)	Remarks
7/29/2016	Review/Update	Tom Wilder	Updated document
5/25/2017	Update & Annual Review	Tom Wilder	Updated document
10/12/2017	Review/Update	Tom Wilder	Added background check level. Added refresher course topic syllabus.
12/1/2017	Review/Update	Tom Wilder	Added to Accident/Incident reporting to FDOT within 24 hours.
5/30/2018	Routine REVIEW/ UPDATE	Tom Wilder	Added MT Policies to Appendix K
10/01/2019	Routine Review	Tom Wilder	No Changes
7/08/2020	Review/Update	Tom Wilder	New flow chart, duties updated, removed quarterly meeting (due to COVID 19) requirement. Changed MSS to Marion Transit.
3/10/2021	Review/Update	Tom Wilder	Updated accident procedures (Appendix K-1.0-5.0)
5/1/2022	Review/Update	Clayton Murch	New flow chart, duties updated, positions updated, updated director information, restored quarterly safety meetings (was suspended due to COVID 19)

# SSPP Document Activity Log (Continued)

Date	Activity (Review/Update/Addendum/ Adoption/Distribution)	Concerned Person (Signature)	Remarks
7/21/2022	Review/Update	Clayton Murch	Updated MRO information in the Substance Abuse Policy. Updated agency's contact information.
9/21/2022	Review/Update	Clayton Murch	Updated FDOT address. Updated Client intake process and forms to include 3-yr eligibility review

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2.0	SYSTEM SAFETY GOALS AND SSPP
	2.1 SSPP Control and Update Procedures
3.0	HAZARD AND SECURITY PLAN (HSP)
4.0	SYSTEM DESCRIPTION
5.0	ORGANIZATION STRUCTURE AND SYSTEM SAFETY RESPONSIBILITIES
	<ul> <li>5.1 Your Community Transit Organization Chart</li></ul>
6.0	QUALIFICATION AND SELECTION OF DRIVERS
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11.0	SAFETY DATA ACQUISITION & ANALYSIS
12.0	HAZARD IDENTIFICATION AND RESOLUTION
	12.1 Hazard Identification
13.0	EVENT INVESTIGATION
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16.0	VEHICLE EQUIPMENT STANDARDS & PROCUREMENT CRITERIA
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## Appendices -

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- Appendix B: Substance Abuse Policy
- Appendix C: Maintenance Plan
- Appendix D: Preventative Maintenance Guidelines
- Appendix E: Medical Examination Form 725-030-011
- Appendix F: Radio Operating Procedures
- Appendix G: Internal Safety Audit Checklist
- Appendix H: Bus Transit System Annual Safety and Security Certification Form
- Appendix I: SSPP Addendums (placeholder for future updates)
- Appendix J: Text Formatting Palette
- Appendix K: Marion Transit Procedures
  - a. Operations Staff Accident Procedures / Responsibilities
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  - c. Biohazard Clean Up Procedure
  - d. Bus Evacuation Procedure/Plan
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  - aa. Supervisor Incident Review

## 1.0 Management Safety Commitment and Policy Statement

Marion Transit is committed to providing safe, secure, clean, reliable, and efficient transportation services to the patrons. This policy statement serves to express management's commitment to and involvement in providing and maintaining a safe and secure transit system.

The mission of Marion Transit "Is to provide Public Transportation that offers riders a high-quality safe, reliable, and efficient paratransit experience".

Section 341.041, Florida Statutes (F.S.); Section 334.044(2), F.S.; and Section 341.061(2)(a), F.S., requires the establishment of minimum equipment and operational safety standards for all governmentally owned bus transit systems; privately owned or operated bus transit systems operating in this state which are financed wholly or partly by state funds; all bus transit systems created pursuant to Chapter 427, F.S.; and all privately owned or operated bus transit systems under contract with any of the aforementioned systems. Safety standards for bus transit systems are provided by Rule Chapter 14-90, Florida Administrative Code (F.A.C.), hereinafter referred to as Florida Administrative Code Rule 14-90. Bus transit systems are required to develop, adopt, and comply with a System Safety Program Plan (SSPP), which meets or exceeds, the established safety standards set forth in Florida Administrative Code Rule 14-90.

In the interest of safety and security, and in order to comply with the statutory requirements, Marion Transit has developed and adopted this System Safety Program Plan (SSPP) that complies with established safety standards set forth in Florida Administrative Code Rule 14-90. The SSPP is intended to document all policies, functions, responsibilities, etc. of the agency necessary to achieve a high degree of system safety and applies to all areas of the transportation system, including procurement, administration, operations, maintenance, etc.

Marion Transit management is responsible for maintaining a coordinated safety system in order to identify and prevent unsafe acts and conditions that present a potential danger or threat to public safety. Management has responsibility for maintaining and implementing the SSPP and complying with the policies, procedures, and standards included in this document. All departments, personnel, and contract service operators are charged with the responsibility of adhering to this SSPP. Any violation of safety and security practices is subject to appropriate administrative action. Management is ultimately responsible for enforcing the SSPP and maintaining a safe and secure system.

This plan was reviewed by the Marion Seni	or Services, Inc. Executive Board on <u>11/9/2022</u> .
	Jennifer Martinez, Executive Director Marion Senior Services, Inc. Date:11/9/2022
	Attest:
	Clayton Murch, Transportation Director Marion Transit

## 2.0 System Safety Goals and SSPP

Marion Transit has established the following goals for the system safety program:

- Achieve a high standard of system safety in all areas of the transportation system
- Develop and implement a comprehensive, systematic, and coordinated program to identify, assess, and control all safety hazards
- Develop and maintain a high level of safety awareness among all employees through preemployment screening and systematic training and testing programs
- Establish safety standards for contract service operators and ensure compliance
- Ensure that system safety is integrated with daily operations through operational standards and procedures, vehicle maintenance, inspections, record keeping, audits, quality assurance and quality control
- Ensure that all vehicles and equipment operated by the agency meet established safety standards
- Maintain a formal process for event investigation, emergency preparedness and response, and handling security threats
- Ensure a drug free workplace
- · Comply with all regulatory requirements.

#### In addition:

- High Passenger Satisfaction
- On-time performance
- Minimized Passenger Dwell (wait) time
- Passenger Safety
- Deliver Excellent Customer Service
- Safe driving

### The purpose of this SSPP document is to:

- Establish and document system safety policies and procedures in compliance with Florida Administrative Code Rule 14-90
- Establish a coordinated and documented process to implement the SSPP during the operations of the system in order to achieve system safety goals
- Identify and delegate safety functions and responsibilities to units and personnel within the organization and contract service operators
- Facilitate internal and external safety audits to identify, track, and resolve safety program deficiencies.

In accordance with Florida Administrative Code Rule 14-90 (included in Appendix A), the SSPP addresses the following safety elements and requirements:

- Safety policies and responsibilities
- Vehicle and equipment standards and procurement criteria
- Operational standards and procedures
- Bus driver and employee selection
- Driving requirements
- Bus driver and employee training
- Vehicle maintenance
- Investigations of events
- Hazard identification and resolution
- Equipment for transporting wheelchairs
- Safety data acquisition and analysis
- Wireless communication plan and procedure
- Safety standards for private contract bus transit system(s) that provide(s) continuous or recurring transportation services for compensation as a result of a contractual agreement with Marion Transit.

## 2.1 SSPP Control and Update Procedures

Marion Transit management will review the SSPP annually, update the document as necessary, and implement the changes within a timeframe that will allow the agency to timely submit the annual self-certification of compliance to the Florida Department of Transportation (FDOT). The annual review of the SSPP will be conducted as part of an internal audit beginning October 1st of each calendar year and ending prior to the end of the same calendar year. Necessary updates outside the annual update window will be handled as SSPP addendums which will be incorporated in the body of the SSPP during subsequent annual update.

All proposed changes will be documented by the management as proposed SSPP addendums and distributed to all affected parties including employees and contract service operators. All parties must comment within two weeks of the issuance of the proposed changes unless otherwise specified. Following the approval of any modifications to the SSPP by the Executive Director, management staff will distribute the SSPP addendum to all affected parties, with a cover memo highlighting the changes. All parties receiving the updates are required to sign for its receipt and acknowledge their responsibility in implementing the changes. Management will document and retain the proof of SSPP receipt by all employees during initial hire and subsequent updates. Agency's governing board will adopt the SSPP annually following the internal audit and a copy of the adopted SSPP will be distributed to all employees and contract service providers. A copy of the adopted SSPP will also be forwarded to the FDOT District Office. Document reviews of the SSPP by the local agency, any subsequent updates, addendums, adoption, and distribution activities will be documented in the SSPP Document Activity Log included in this document.

## 3.0 Hazard and Security Plan (HSP)

In accordance with Florida Administrative Code Rule 14-90, Marion Transit has adopted, and implemented a Hazard and Security Plan (HSP), often referred to as the Security Program Plan (SPP), which covers the hazard and security portion of the system safety program. The HSP contains information about prevention, mitigation, preparedness, response, recovery, and associated organizational responsibilities. The purpose of the HSP/SPP is to specify:

- Actions required of employees on a daily, weekly, monthly, and annual basis to prevent or reduce the likelihood of security and emergency events from occurring, and to mitigate the effects of those events that do occur
- Measures needed to prepare for incidents occurring within the transportation system and in the surrounding community
- Agency procedures that should be established to respond to security hazards and emergencies that affect the system and its customers
- Formal processes to recover from routine security events or major emergencies
- Roles, responsibilities, and interagency coordination required to respond to a disaster or security event.

The HSP/SPP addresses the following hazard and security elements and requirements:

- Security policies, goals, and objectives
- Organization, roles, and responsibilities
- Emergency management processes and procedures for mitigation, preparedness, response, and recovery
- Procedures for investigation of events described under subsection 14-90.004(5), F.A.C.
- Procedures for the establishment of interfaces with emergency response organizations
- Procedures for interagency coordination with local law enforcement jurisdictions
- Employee security and threat awareness training programs
- Security data acquisition and analysis
- Emergency preparedness drills and exercises
- Requirements for private contract transit providers that engage in continuous or recurring transportation services for compensation as a result of a contractual agreement with the bus transit system.
- Procedures for SPP maintenance and distribution.

## **System Safety Program Plan (SSPP)**

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The HSP/SPP has been adopted separately from the SSPP. Bus transit systems are prohibited by Section 119.071(3)(2), Florida Statutes, from publicly disclosing the SPP, as applicable under any circumstance. The document is maintained in a secure location by the management and access to the document is restricted to select agency personnel and appropriate FDOT personnel exercising oversight in this area. On-site access to the HSP/SPP is granted to regulatory authorities (FDOT, FTA, etc.) on as-needed basis. Select portions of the HSP/SPP may be shared with employees depending on their job responsibilities.
Any additional text for Chapter 3.0 must be inserted above this point for formatting/page numbering purposes.

## 4.0 System Description

## History:

Service on Wheels, later to become Marion County Senior Services, came into being in August 1973, with an idea and a \$100.00 check from Blessed trinity Church. The idea was to provide hot noontime meals for some of Ocala's most needy.

The First Presbyterian Church had established a volunteer program called VISION-"Volunteers in Service in our Neighborhood". Since VISION recruited volunteers, and Service on Wheels needed volunteers to deliver meals, the two worked well together. Karen May, Director of Vision, supervised both programs and served as the first Service on wheels Board President. Diane Morthland was the part-time M.O.W. Director from 1973-1976. Karen May, Linda Foy and other volunteers wrote letters to local organizations for financial help, recruited some volunteers, found someone to prepare the meals (Julian's Marion Lunch), and they were off running. They delivered 13 meals the first day.

In the early days, church groups, clubs, organizations and fees from the participants kept the program going. The program grew to a point where additional funding was necessary to continue; therefore, Service on Wheels applied for and became a United Way Agency.

In mid1975, the S.O.W. Board decided to apply for a federal grant for a Nutrition Program for the Elderly, through Older Americans Act funds of 1964 which provided daily meals at congregate dining sites.

Nancy Picard, a volunteer who served as the director of the Nutrition Program for the first 6 months, wrote the first grant. Diane Morthland was hired to take her place in July 1976. The budget totaled \$90,145 and we served 100 meals daily (five days a week).

In October 1976, a new program funded through Older Americans Act funds was added to provide transportation and homemaker service. The first Director for this program was Eleanor Preston, wife of the Ft. King Presbyterian Church minister, Dr. Frank Preston. The office was located on the grounds of that church and started off with one leased van and 3 homemakers.

In January 1977, the Nutrition Program and the Homemaker/Transportation Program combined and moved to an office next door to our present office, with Diane Morthland as Executive Director for the combined programs.

In the beginning S.O.W. (Meals on Wheels) and the Marion County Nutrition Program operated separately but shared the same Board of Directors. The name was changed from Service on Wheels to Marion County Senior services, Inc. in April 1979 and in October of 1979 the two services combined to share staff and office space.

We still maintain independent Meals on Wheels Program, which is funded as it was in the beginning, with local donations, United Way funding, and fees based on a sliding scale. Maintaining this separate program allows us to serve needy clients of any age. The federal programs are restricted to those 60 years of age and older. Local match funds (cash or in-kind) are required to secure grant funds.

In 1980, MCSS began participation in the state-funded Community Care for the Elderly Program. CCE is a continuum of care for functionally impaired, frail, elderly to live independently in their homes for as long as possible. Case managers plan both in-home support services as well as other community resources (such as food stamps, SSI, Medicaid, legal services, doctor appointments, etc.) while working with the clients until their problems are solved.

In 1982, the Metropolitan Planning Organization designated Marion County Senior Services as the Community Transportation Coordination Provider for the transportation disadvantaged in Marion County including coordinating all transportation trips using public funds such as Medicaid. Operating, administrative and capital funds were provided by the Florida Department of Transportation. Since 1991, the Transportation Disadvantaged Commission has also provided funds to pay for clients not sponsored by any agency or organization. Sponsored trips include Medicaid and elder programs. We currently operate 37 daily routes to transport elderly, disabled and transportation-disadvantaged persons throughout Marion County. In 1994 our transportation service was renamed Marion Transit Services to more accurately reflect the diverse ridership.

In 1989, three new state-funded programs were added: Community Care for Disabled Adults, Alzheimer's disease Initiative and Community Care for the Elderly Diversions Program.

These programs allowed us to provide services to severely disabled adults 18-59, to provide more frequent and intensive in-home services to clients at risk of nursing home placement and to provide much needed support, particularly respite, to Alzheimer's victims.

Additional programs/services added in 1993: Medicaid Waiver services for low-income clients who would otherwise be placed in nursing homes at a greater cost to the state (replacing the elderly Diversions Program) and Preventative/Health Promotion Services (Title III-F) funded through Older Americans Act.

Beginning January 1, 1996, we began administering the Home Care for the Elderly Programs, which offers case management and subsidy payments to caregivers as an alternative to institutionalization. II-F funds were discontinued. In May Diane Morthland retired after 23 years with our agency. Gail Cross became the new Executive Director.

In order to expand needed services; in 1977 we implemented an intensive volunteer recruitment program for in-home services with a special grant from the

Department of Elder Affairs. State funded programs began requiring a co-pay based on income from all clients.

From small volunteer-based program in the 70's and then a recipient of program grants, Marion County Senior Services has evolved into two primary contractor roles for our community. We serve as the "lead agency" and service provider for state and federally funded contracts to provide services to elderly and disabled through specific "contracts" for service with our regional Area Agency on Aging. And we are the designated Community Transportation Coordinator providing public Paratransit service to elderly, disabled, and underprivileged people throughout Marion County the Commission for Transportation Disadvantaged, Florida Department of Transportation, and SunTran (for Complementary ADA trips).

In January 2011, Marion County Senior Services' name changed to Marion Senior Services, Inc. The primary purpose for changing the name was to remove the connotation that the Agency was part of Marion County government.

Marion Transit is a division of Marion Senior Services, Inc.

## Marion Transit System Profile (As of 09/21/2022):

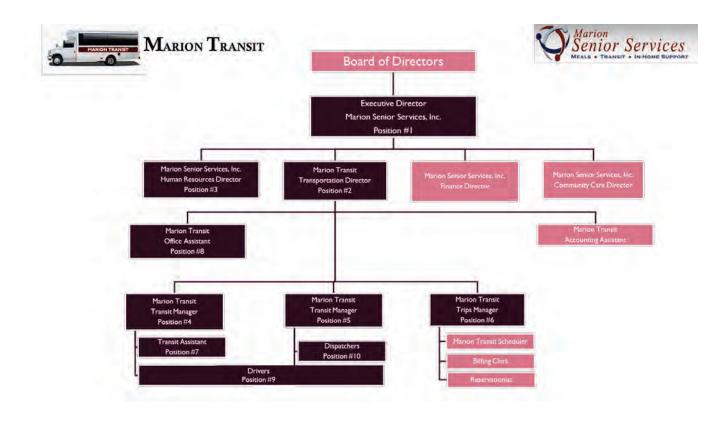
- Total Number of drivers: 37
- Full-time: 31 Part-time: 6 Volunteers: 0 in transportation
- Number of operational buses: 46
- Buses W/C accessible: 46
- Number of Type I buses (>22' length) 40 Type II buses (<22' length)
- Dispatch Location(s):1101 SW 20<sup>th</sup> Court, Ocala, FL Marion Transit
- Maintenance Locations:
- Advance Tire & Service, 2199 NW 10<sup>th</sup> Street, Ocala, FL 34475
- Fishers Auto Care 2021 SW 27th Avenue, Ocala, FL 34471
- Don's Garage 218 SW 10th Street, Ocala, FL 34471
- Advanced Vehicle Modifications (Lift) 2520 NW 6th Street, Ocala, FL
- Community Transportation Coordinator (CTC): Yes
- CTC Operator: Yes
- CTC Name: Marion Senior Services, Inc. D/B/A Marion Transit
- Contracted passenger service operations: None at this time.
- Contract operator has own adopted SSPP and SPP approved by transit system or CTC: N/A
- Contract operator adopts and implements the Transit System's CTC's SSPP: N/A

Any additional text for Chapter 4.0 must be inserted above this point for formatting/page numbering purposes.

# 5.0 Organization Structure and System Safety Responsibilities

Management has the overall responsibility of safe and secure operations of Marion Transit and any contract service operators (N/A at this time). Each employee is required to carry out specific system safety responsibilities, depending on his/her position, in compliance with the SSPP. The organization information provided below describes each position and the reporting structure; the table in the following page shows system safety responsibilities of each position.

## 5.1 Marion Transit Organizational Chart



## 5.2 Marion Transit Transit System Safety Responsibilities by Position

System Safety Task	Frequency		Management Responsibilities by Position				Staff	Staff Responsibilities by Position			
		Position 1	Position 2	Position 3	Position 4	Position 5	Position 6	Position 7	Position 8	Position 9	Position 10
Oversee and assure SSPP and HSP/SPP compliance	Daily	X	X		X	X	0		J	Ü	10
Random inspections of Departments for safety compliance (pre-trip inspections, driver files, maintenance records, etc.)	Quarterly/ As needed		Х		Х	Х		x			
SSPP and HSP/SPP review and distribution	Annual/ As needed	X	X		Х	Х			X		
Intra-agency coordination and safety briefings	Monthly		X		Х	X			X		
Inter-agency coordination (FDOT, law enforcement, emergency response organizations, etc.)	As needed	X	Х		Х	X	x				
Facility inspection / generator	Monthly		X		Х	X		X			
Employee safety training and testing and record keeping	Initial hire/ quarterly & ongoing		Х	Х	Х	Х			Х		
Drug free workplace (policy maintenance, employee training and testing, etc.)	Initial hire/ Quarterly + Randoms		X	х	х	Х					
Driver license validity check and record maintenance	Initial hire/ Monthly		Х	Х	Х	Х			Х		
Administrative/Human Resource safety actions	As needed			X							
Safety and security data acquisition and analysis	On an ongoing basis		X		Х	Х					
Medical examination of drivers and record keeping	Initial hire/ biennium			Х							
Vehicle and equipment procurement	As needed		Х		Х	Х					
Pre-trip inspections and record keeping	Daily				Х	Х		Х		Х	

## System Safety Program Plan (SSPP)

System Safety Task	Frequency	P-1	P-2	P-3	P-4	P-5	P-6	P-7	P-8	P-9	P-10
Vehicle maintenance and record keeping	Daily				Х	Х		X			
Annual safety inspections and record keeping	Annual		Х		Х	Х	X	X	Х		
Event investigation and record keeping	As needed		X		X	X			X		
Investigate safety complaints	As needed		Х	Х	Х	Х	Х	Х			
Pre-employment screening	Initial hire			Х							
Employee time recording and maintenance	Daily		Х		Х	Х	Х				
Internal safety audits	Annual/As needed		X		X	X					
Records maintenance, retention, and distribution	Daily/As needed		X	X	X	X	X		X		
Vendor safety and security compliance oversight	Daily/As needed		X		X	X		X			
Hazard identification and resolution	Daily		X	X	X	X	X	X	X	X	X
Compliance with SSPP	Daily	Х	Х	Х	Х	Х	Χ	Х	Х	Х	Х
Self-certification of safety compliance	Annual		Х		Х	Х	X				

## 5.3 System Safety Responsibilities of Contract Service Operator(s)

Marion Transit requires all contract service operators to fully comply with the established safety standards set forth in Florida Administrative Code Florida Administrative Code Rule 14-90. Contract operators have the option to either adopt and implement the SSPP and HSP/SPP of Marion Transit, or develop, adopt, and implement their own program plans, but must ensure compliance with Florida Administrative Code Florida Administrative Code Rule 14-90. If the contract service operator opts to develop their own SSPP and HSP/SPP, the program plans must be reviewed and approved by Marion Transit management prior to initiation of service. In addition, each contractor/subcontractor shall submit a safety and security certification to Marion Transit no later than January 15th, annually for the prior calendar year period.

The certification shall attest to the following:

- The adoption of an SSPP and an HSP/SPP in accordance with established standards set forth in Florida Administrative Code Florida Administrative Code Rule 14-90.
- Compliance with its adopted SSPP and HSP/SPP.
- Performance of safety inspections on all buses operated by the system in accordance with Florida Administrative Code Rule 14-90.
- Reviews of the SSPP and HSP/SPP have been conducted to ensure they are up to date.

#### The certification shall include:

- The name and address of the contractor/subcontractor, and the name and address of the
  entity(ies) who performed bus safety inspections and security assessments during the
  prior calendar year, if different from that of the contractor/subcontractor.
- A statement signed by an officer or person directly responsible for management of the contractor/subcontractor attesting to compliance with Florida Administrative Code Florida Administrative Code Rule 14-90.

Contractors/subcontractors are subject to audits and inspections on an announced or unannounced basis at the discretion of Marion Transit management. Marion Transit, or its contractor, will conduct safety and security reviews of contract operators, at least once every three years, to ascertain compliance with the provisions of Florida Administrative Code Florida Administrative Code Rule 14-90. Marion Transit will prepare and submit a report of the audit to the affected contract operator within 30 business days of completion of the review containing the following:

- Identification of the findings, including a detailed description of any deficiency.
- Required corrective action and a schedule for implementation of the corrective action to be taken for each deficiency.
- Any required suspension of bus transit system service should Marion Transit determine of the continued operation of the service, or a portion thereof, poses an immediate danger to public safety.

If the contract operator fails to correct specific deficiency(ies) in accordance with Florida Administrative Code Florida Administrative Code Rule 14-90 and the established implementation

# System Safety Program Plan (SSPP) schedule, Marion Transit will notify the FDOT District Office and initiate actions to dismiss the contract.

Any additional text for Chapter 5.0 must be inserted above this point for formatting/page numbering purposes.

## 6.0 Qualification and Selection of Drivers

Marion Transit management is responsible for ensuring that the following minimum standards are met when hiring new drivers.

- Must possess a valid Florida driving license of appropriate class.
- Level 2 background screening pursuant to FSS chapter 435.
- Criminal background check (with local law enforcement and the Florida Department of Law Enforcement) and driving records check including, but not limited to, the following items:
  - Driving records
  - Instant Social Security Number validations
  - o Instant identification of applicant's county of residence for the past seven years
  - County felony criminal history checks for up to three counties per applicant and other criminal records checks
  - o Education verification
  - Employment reference checks
  - Personal reference check
  - o Workers' Compensation claims
- Complete employment application.
- Successful completion of pre-employment physical including an eye examination and drug screening test.
- Signed acknowledgement of receipt and agreement to comply with drug-free workplace policy.
- Signed acknowledgment of receipt and agreement to comply with SSPP.
- Successful completion of required orientation, training and testing to demonstrate and
  ensure adequate skills and capabilities to safely operate each type of bus or bus
  combination before driving on a street or highway unsupervised.
- Signed acknowledgment of receipt and compliance with the following written operational and safety procedures <u>before</u> driving on a street or highway unsupervised.
  - o Communication and handling of unsafe conditions, security threats, and emergencies.
  - o Familiarization and operation of safety and emergency equipment, wheelchair lift equipment, and restraining devices.
  - Application and compliance with all applicable federal and state laws, rules and regulations.
- Drivers are required to write and submit a daily bus inspection report pursuant to Florida Administrative Code Florida Administrative Code Rule 14-90.006, F.A.C.
- Personnel licensed and authorized by the bus transit system to drive, move, or road test
  a bus in order to perform repairs or maintenance services when it has been determined
  that such temporary operation does not create unsafe operating conditions or create a
  hazard to public safety are not bound to the following two provisions:
  - Training and testing to demonstrate and ensure adequate skills and capabilities to safely operate each type of bus or bus combination before driving on a street or highway unsupervised.

 Bus transit systems shall provide written operational and safety procedures to all bus drivers before driving on streets or highways unsupervised.

Noncompliance with any regulatory or agency specific requirement may result in an employee administrative action up to and including suspension or termination of employment. It is the policy of Marion Transit to screen applicants to eliminate those that pose a safety or security threat to the agency or who would not be capable of carrying out agency safety and security policies.

#### **Essential Requirements**

- · High School diploma or equivalent.
- Must be able to pass the DOT Physical Requirements.
- 2 years' verifiable experience in transporting passengers or other commercial driving experience.
- Ability to use a portable radio and/or phone
- Clean driving record that meets company's insurance standards
- Understand and to carry out detailed but uninvolved written or oral instructions.
- Basic math skills including addition, subtraction, division and multiplication of numbers and currency.
- Excellent Customer Service skills and experience interacting with the public
- Good people skills to include good communication, and the ability to deal with and manage large groups and communicate clear instructions.
- Be familiar with the Marion County Address System and able to locate addresses using maps and/or GPS.

Any additional text for Chapter 6.0 must be inserted above this point for formatting/page numbering purposes.

#### 7.0 Driver Safety Training and Testing

All employees and drivers of Marion Transit and all contract service providers are required to complete all training and testing requirements to demonstrate and ensure adequate skills and capabilities to safely operate each type of bus or bus combination before driving on a street or highway unsupervised. The Transit Manager is responsible for conducting and documenting all training and testing activities utilizing a certification process. Noncompliance with any regulatory or agency specific guideline or requirement may result in suspension or termination of employment. This section of the SSPP discusses the training and testing programs to be administered by the Transit Manager.

#### 7.1 Initial Driver Training and Testing

Upon hire and prior to being placed into road service, all drivers are required to complete a total of 80 hours of training and testing in the following areas:

- 1. Bus transit system safety and operational policies and procedures.
- 2. Operational bus and equipment inspections.
- 3. Bus equipment familiarization.
- 4. Basic operations and maneuvering.
- 5. Boarding and alighting passengers.
- 6. Operation of wheelchair lift and other special equipment.
- 7. Defensive driving.
- 8. Distracted driving.
- 9. Passenger assistance and securement.
- 10. Handling of emergencies and security threats.
- 11. Security and threat awareness.
- 12. Driving conditions.
- 13. 60 minutes of drug awareness and 60 minutes of the effects of alcohol abuse.

As part of the driver training program, specific procedures have been incorporated to instruct the driver on how to safely approach and depart from a transit bus stop to avoid contact with pedestrians and other hazards.

In addition, new drivers are required to successfully undergo a road test with an experienced driver. A new-hire check-off list must be completed to ensure the employee has received all required 14-90 training and information before being authorized for over-the-road service.

After successful completion of each training and testing module, the agency is required to document and record the satisfactory completion of the employee's training and submit to the Transportation Director. Certificates of completion will be maintained in the driver files for a minimum of 5 years.

#### **System Safety Program Plan (SSPP)**

All newly hired employees are also provided instructional training by the HR Director and Transit Manager per agency's HSP/SPP. Drivers are given instruction in Marion Transit rules and standard operating procedures in the following areas:

- General rules: General rules of the agency including employee conduct codes.
- Personal appearance and conduct: Cover uniforms, grooming, and employee conduct.
- Customer service: Covers expectations of employees when dealing with the public; includes instruction on how and to whom to report security incidents, and types of individuals or situations to be aware of and report.
- Traffic laws: Covers applicable traffic-related laws and regulations, drug and alcohol testing, and drug and alcohol use restrictions.
- Fare handling: Covers fare collection procedures and provides instruction in dealing with fare disputes, conflict resolution, and notification of security personnel.
- Americans with Disabilities Act requirements: Provides instruction in complying with ADA requirements and providing service to disabled patrons.
- Radio procedures: Provides instruction on radio procedure for both routine and emergency radio traffic. Includes instruction on reporting crimes, suspicious acts, and potentially hazardous situations.
- Report writing: Provides instruction on report writing, and reporting requirements.
- Substance abuse policy: Provides information on the drug and alcohol testing program.
- Occupational Safety and Health Administration (OSHA) standards: Covers blood borne pathogens and other occupational exposure to health hazards.

The HR Director and Transportation Director will develop and maintain a Training Manual for new hire training and testing of employees as part of the Safety Training Program. The manual will contain training course content, curriculum, lesson plans, testing requirements, etc. All training and testing activities will also be adequately documented by the Transit Manager.

#### 7.2 On-Going/Refresher Training and Testing

The HR Director and Transportation Director will develop and maintain a Training Manual for ongoing and refresher training and testing of employees. The manual will contain training course content, curriculum, lesson plans, testing requirements, etc. On-going/refresher training and testing sessions will be conducted as necessary to remain compliant with Florida Administrative Code Florida Administrative Code Rule 14-90. The drivers are required to attend training and testing in all areas specified by Florida Administrative Code Florida Administrative Code Rule 14-90 at least once every three years.

Ongoing and refresher training will be conducted but is not limited to the following topics:

- Bus transit system safety and operational policies and procedures.
- Operational bus and equipment inspections.
- Bus equipment re-familiarization.
- Operation of wheelchair lift and other special equipment.

#### **System Safety Program Plan (SSPP)**

- Defensive driving.
- Distracted driving.
- Passenger assistance and securement.
- Handling of emergencies and security threats.
- Security and threat awareness.
- Drug awareness and the effects of alcohol abuse.

Marion Senior Services also requires quarterly mandatory safety meetings. Any training during these meetings will be documented.

All training and testing activities are to be recorded and retained in files for a minimum of five years.

#### 7.3 Remedial Training and Testing

Marion Transit will employ remedial training for drivers who have been involved in a serious collision or have developed unsafe driving behaviour or other driving problems. Other causes for remedial training may include persistent customer complaints, supervisor recommendations, or a result of ongoing evaluations. Depending on the circumstances, the Transportation Director will determine the appropriate remedial training and testing, the results of which will also be documented and retained in files.

#### 7.4 NIMS Training

The National Incident Management System (NIMS) provides a consistent nationwide template to enable all government, private-sector, and nongovernmental organizations to work together during domestic incidents (<a href="http://www.fema.gov/emergency/nims/">http://www.fema.gov/emergency/nims/</a>). The NIMS system requires that transit agencies comply with a number of specific activities to ensure personnel who will be conducting activities in response to emergencies use the standard Incident Command System (ICS).

Marion Transit HSP/SPP requires that management staff take available NIMS training to understand this requirement and to coordinate regularly with outside organizations to prepare for coordinated responses to incidents. In addition, all employees will be provided security training and drills every six months to ensure they are familiar with emergency policies. All training and testing activities will also be recorded and retained in files.

Any additional text for Chapter 7.0 must be inserted above this point for formatting/page numbering purposes.

#### 8.0 Records Management

The Transportation Director is responsible for implementing a record management program that includes maintenance, retention, distribution, and safe disposal of all safety and security records of the agency in compliance with state and federal regulations.

All safety and security documents of the agency (SSPP, HSP/SPP, etc.) will be periodically revised, as needed, to ensure that they are up to date. Revisions and updates will be communicated with employees, contractors, and regulatory agencies as they occur or as deemed necessary by the management, depending on the nature of the revision or update. The HSP/SPP is considered a confidential document and will be retained in a secure location by management.

Marion Transit will maintain and retain the following records for at least five years:

- Records of bus driver background checks and qualifications
- Detailed descriptions of training administered and completed by each bus driver
- A record of each bus driver's duty status which will include total days worked, on-duty hours, driving hours, and time of reporting on and off duty each day
- Event investigation reports, corrective action plans, and related supporting documentation
- Records of preventive maintenance, regular maintenance, inspections, lubrication, and repairs performed for each bus
- Records of annual safety inspections and documentation of any required corrective actions
- Completed and signed medical examination reports for each bus driver

In addition, Marion Transit will retain records of daily bus inspections and any corrective action documentation for a minimum of two weeks.

An organized paper and electronic filing system will be maintained by the agency, adequately backed up to prevent potential loss of information. All sensitive personnel records will be protected from public access. When ready for disposal, both paper and electronic data will be disposed of in a secure manner ensuring that critical information is protected.

Any additional text for Chapter 8.0 must be inserted above this point for formatting/page numbering purposes.

#### 9.0 Drug and Alcohol Program

Marion Transit has established a Zero Tolerance Substance Abuse Policy Statement in accordance with 49 C.F.R. Part 32 and a substance abuse management and testing program in accordance with 49 C.F.R. Parts 40 and 655, October 1, 2009, a copy of which is included in Appendix B. The Substance Abuse Program Manager is responsible for ensuring the implementation of a drug and alcohol testing program for all safety-sensitive employees as identified and described within the subject policy.

The intent of the policy is to:

- Assure that employees are not impaired in their ability to perform assigned duties in a safe, productive, and healthy manner;
- Create a workplace environment free from the adverse effects of drug and alcohol abuse or misuse;
- Prohibit the unlawful manufacture, distribution, dispensing, possession, or use of controlled substances; and
- Encourage employees to seek professional assistance when substance abuse adversely
  affects their ability to perform their assigned duties.

Violation of this substance abuse policy is subject to disciplinary actions.

Any additional text for Chapter 9.0 must be inserted above this point for formatting/page numbering purposes.

#### 10.0 Vehicle Maintenance Program

The function of the maintenance plan is to provide a consistent systematic program to properly maintain and service vehicles to meet or exceed the manufacturer's recommended maintenance schedule. Marion Transit vehicle maintenance program will ensure that all buses operated, and all parts and accessories on such buses, including those specified in Florida Administrative Code Florida Administrative Code Rule 14-90.007, F.A.C., and any additional parts and accessories which may affect safety of operation, including frame and frame assemblies, suspension systems, axles and attaching parts, wheels and rims, and steering systems, are regularly and systematically inspected, maintained, and lubricated to standards that meet or exceed the bus manufacturer's recommendations and requirements. The Transportation Director is responsible for ensuring that a Maintenance Plan consistent with 14-90 has been developed and implemented by the agency and that all vehicles operated are regularly and systematically inspected, maintained, and lubricated according to the agency's Maintenance Plan and Preventative Maintenance Guidelines (included in Appendix C and Appendix D, respectively).

#### 10.1 Daily Vehicle Inspections (DVI)

Drivers are required to perform daily vehicle inspections prior to operating the assigned vehicle, during routes, and after all route schedules are completed. The pre-trip inspection includes an inspection of the following parts and devices to ascertain that they are in safe condition and in good working order:

- Service brakes
- Parking brakes
- Tires and wheels
- Steering
- Horn
- Lighting devices
- Windshield wipers
- Rear vision mirrors
- Passenger doors
- Exhaust system
- Equipment for transporting wheelchairs
- Safety, security, and emergency equipment

During the scheduled trips and at the end of the day, the operator will note any additional findings and submit the daily vehicle inspection forms. The process and form/s to be utilized for daily vehicle inspections is included in agency's preventative maintenance guidelines. The daily vehicle inspection forms must be complete with the operator's signature and a check in each box to document that the items are "OK" or a defect is noted in the comments section. If the driver finds any mechanical or other problems that could compromise the safety of the vehicle at any point, the drivers will immediately inform the Transit Manager and the vehicle will not be scheduled for service until repaired. Failure to report deficiencies by drivers may result in an administrative action taken against the employee.

The Transit Manager & Transit Assistant will review the daily inspections and document the corrective actions taken as a result of any deficiencies identified by the operator. Daily inspection records will be retained for a minimum of two weeks. **The Transit Manager and Transit** 

Assistant will periodically conduct vehicle inspections behind the drivers who have completed the vehicle inspections to ensure that the daily vehicle inspections are adequately performed. Once defects are noted they will be prioritized and sorted into categories for repairs. Once a defect is noted on the inspection form and repaired, the documentation will be attached to the work/repair order and filed in the maintenance files.

#### 10.2 Preventive Maintenance

A preventative maintenance schedule is implemented to inspect for safety hazards and to maintain vehicles in a manner conforming to safety regulations. Marion Transit will perform scheduled preventive maintenance and safety inspections on all vehicles at every 6,000-mile interval according to the agency's maintenance plan (comply with FDOT PM Edition 4.1). As preventative maintenance inspections are scheduled by projected mileage, the agency will allow 10%-mile deviations in mileage interval, so long as the actual mileage interval meets the manufacturer's recommended maintenance schedule. When a vehicle is due for an inspection, it will be taken out of service until the inspection is completed. This allows a series of repairs to be carried out while minimizing costs and optimizing the number of operational vehicles. If a vehicle is "down" for an extended period of time due to unavoidable circumstances, preventative maintenance will be temporarily suspended until the vehicle can be returned to service. However, the annual inspection will be conducted on all vehicles regardless of "up/down" status and/or mileage accrued.

The Transit Manager and Transportation Director will regularly perform Quality Control (QC)/Quality Assurance (QA) checks to ensure that the inspections and repairs, both in-house and contracted, are completed and documented properly. Each vehicle will have a written record documenting preventive maintenance, regular maintenance, inspections, lubrication and repairs performed. Such records will be maintained for at least five years and include, at a minimum, the following information:

- Identification of the bus, the make, model, and license number or other means of positive identification and ownership
- Date, mileage, description, and each type of inspection, maintenance, lubrication, or repair performed
- If not owned by Marion Transit, the name of any person furnishing a bus
- The name and address of any entity or contractor performing an inspection, maintenance, lubrication, or repair

For tracking purposes, a maintenance log will be kept containing vehicle ID, make and type of vehicle, year, model, special equipment, inspections, maintenance and lubrication intervals, and date or mileage when services are due.

#### 10.3 Bus Safety Inspections

Safety inspections are part of the maintenance inspections and are performed every 6,000 miles on all buses operated by Marion Transit. The Transit Manager is responsible for ensuring that each individual performing a bus safety inspection is qualified as follows:

• Understands the requirements set forth in Florida Administrative Code Florida Administrative Code Rule 14-90 and can identify defective components.

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- Is knowledgeable of and has mastered the methods, procedures, tools, and equipment used when performing an inspection.
- Is ASE certified with at least one year of training and/or experience as a mechanic or inspector in a vehicle maintenance program and has sufficient general knowledge of buses owned and operated by the bus transit system to recognize deficiencies or mechanical defects.

Each bus receiving a safety inspection shall be checked for compliance with the requirements for safety devices and equipment as referenced or specified by Florida Administrative Code Florida Administrative Code Rule 14-90. Specific operable equipment and devices as required by Florida Administrative Code Florida Administrative Code Rule 14-90 include the following as applicable to Type I and II buses:

- Horn
- Windshield wipers
- Mirrors
- Wiring and batteries
- Service and parking brakes
- Warning devices
- Directional signals
- Hazard warning signals
- Lighting systems and signaling devices
- Handrails and stanchions
- Standee line and warning
- Doors and brake interlock devices
- Step wells and flooring
- Emergency exits
- Tires and wheels
- Suspension system
- Steering system
- Exhaust system
- Seat belts
- Safety equipment
- Equipment for transporting wheelchairs
- Working speedometer

A safety inspection report will be prepared by the individual(s) performing the inspection and will include the following:

- Identification of the individual(s) performing the inspection
- Identification of the bus transit system operating the bus
- The date of the inspection
- Identification of the bus inspected
- Identification of the equipment and devices inspected including the identification of equipment and devices found deficient or defective

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#### 11.0 Safety Data Acquisition & Analysis

Understanding safety data is an important step towards allocating important and scarce resources to implement safety program elements. Safety data relative to transit provider operations can be used to determine safety trends in system operation. The following data will be collected and retained by Marion Transit on an ongoing basis:

- Accident and incident data
- Maintenance data including daily vehicle inspection forms
- Passenger claims and complaints
- Records of crimes and rule violations occurring in and around the transit agency

The data will be analyzed by Marion Transit management both qualitatively and quantitatively for safety hazard identification, resolution and risk management purposes. The analysis results will be useful for identifying necessary actions to minimize safety risks. Analysis of safety data will also help improve system performance, not only in respect to safety, but also in overall delivery of service to the public. In addition, trend analyses of safety data can help determine the effectiveness of safety initiatives that have been implemented. The results of such analysis will be shared with agency staff and law enforcement agencies on, at minimum, an annual basis for awareness and support.

Any additional text for Chapter 11.0 must be inserted above this point for formatting/page numbering purposes.

#### 12.0 Hazard Identification and Resolution

Hazard management is a mechanism by which hazards are identified, analyzed for potential impact on the operating system, and resolved in a manner acceptable to the management and regulatory agencies. Marion Transit hazard management consists of three primary components – hazard identification, hazard categorization, and hazard resolution.

#### 12.1 Hazard Identification

By means of safety data acquisition and analysis and coordination with the Transit Manager, the Transportation Director will identify system hazards on an ongoing basis.

#### 12.2 Hazard Categorization

Once the key system hazards have been identified, the Transportation Director will categorize the hazards based on severity and probability of occurrence.

Hazard severity is a subjective measure of hazard, supported by factual data, and will be categorized as follows –

- Catastrophic Death or system loss
- Critical Severe injury, severe occupational illness, or major system damage
- Marginal Minor injury, minor occupational illness, or minor system damage
- Negligible less than minor injury, occupational illness, or system damage

Hazard probability is a subjective measure of likelihood that a specific hazard will occur and will be categorized as follows –

- Frequent Likely to occur frequently
- Probable Likely to occur several times
- Occasional Likely to occur sometime
- Remote Unlikely but possible to occur
- Improbable So unlikely that it can be rejected from consideration

#### 12.3 Hazard Resolution

Once the hazards are identified and categorized, subsequent analysis will be undertaken to resolve the issue and minimize risk associated with the identified hazard. A hazard resolution matrix will be developed combining hazard severity and hazard frequency, as shown in the matrix on the following page, to identify the level of acceptance for a specific hazard/risk.

Hazard Resolution Matrix	Catastrophic	Critical	Marginal	Negligible
Frequent	Unacceptable	Unacceptable	Unacceptable	Acceptable with reservation
Probable	Unacceptable	Unacceptable	Undesirable	Acceptable with reservation
Occasional	Unacceptable	Undesirable	Undesirable	Acceptable
Remote	Undesirable	Undesirable	Acceptable with reservation	Acceptable
Improbable	Acceptable with reservation	Acceptable with reservation	Acceptable with reservation	Acceptable

The results of the analysis will be shared by the Transportation Director with the Executive Director on an ongoing basis to identify appropriate actions. All "unacceptable" hazards must be eliminated, and measures will be taken for the remaining risk acceptance categories to minimize risk. The results of such analysis will be shared with agency staff and law enforcement agencies on a quarterly basis for awareness and support.

Any additional text for Chapter 12.0 must be inserted above this point for formatting/page numbering purposes.

#### 13.0 Event Investigation

For the purpose of this SSPP, events are considered accidents or incidents that involve a transit vehicle or take place on Marion Transit controlled property. An "accident" is an event that causes damage to a vehicle, individual, or property while the vehicle is in motion. It may involve a single vehicle or multiple vehicles. An "incident" is defined as an event that causes damage to a vehicle, individual, or property, which is not an accident.

Any event involving a bus or taking place on property controlled by a transit system and resulting in a fatality, injury, or property damage will be investigated by Marion Transit. All events included but not limited to the following, will be investigated:

- A fatality, where an individual is confirmed dead within 30 days of a bus transit system related event, excluding suicides and deaths from illnesses.
- Injuries requiring immediate medical attention away from the scene for two or more individuals.
- Property damage to bus transit system buses, non-bus transit system vehicles, other bus system property or facilities, or any other property. Marion Transit will have the discretion to investigate events resulting in property damage less than \$1,000.
- Evacuation of a bus due to a life safety event where there is imminent danger to passengers on the bus, excluding evacuations due to operational issues.

In case of all events, drivers are required to contact the local law enforcement, dispatcher, and emergency medical services (as required) immediately. Supervisors will be sent to the scene depending on the severity of the event at the discretion of the Transportation Director and/or Transit Manager. Each investigation will be documented in a final report that includes a description of the investigation activities, identified causal factors, and any identified corrective action plan. Each corrective action plan will identify the action to be taken by the bus transit system and the schedule for its implementation. The Transportation Director will monitor and track the implementation of each corrective action plan. Investigation reports, corrective action plans, and related supporting documentation will be maintained by the Transportation Director for a minimum of five years from the date of completion of the investigation.

Marion Transit will notify FDOT within 24 hours of any accident or casualty involving project vehicles/equipment and submit related reports as required by FDOT. This notification will be accomplished by emailing the respective District 5 project coordinator for Marion Transit.

#### **FTA Post-Accident Thresholds**

Must perform a DOT post-accident test when there is an occurrence associated with the operation of a mass transit vehicle, if as a result:

#### **FATAL ACCIDENT**

1. An Individual *dies* (Must Test); or

#### NON-FATAL ACCIDENT

Unless the Marion Transit driver's performance can be <u>completely discounted</u> as a contributing factor to the accident

2. An individual suffers bodily injury and immediately <u>receives medical treatment</u> away from the scene of the accident; or

('Individual' refers to a transit employee, pedestrian, passenger on the mass transit vehicle

or person in the other vehicle(s))

3. A vehicle (including non-transit vehicle) incurs disabling damage as the result of the occurrence and a vehicle is *transported away from the scene by a tow truck or other vehicle*; or

(in which the mass transit vehicle involved is a bus, electric bus, van or automobile)

4. The mass transit vehicle is <u>removed from operation</u>.

(in which the mass transit vehicle involved is a rail car, trolley car, trolley bus, or vessel)

#### Who to Test

- 1. Covered employee operating the mass transit vehicle, unless the transit employee's performance can be *completely discounted* as a contributing factor to the accident.
- 2. Other covered employee who could have contributed to the accident.

#### Time Limitations for Post-Accident Testing

- ✓ Employee must remain readily available for testing
- ✓ Alcohol & Drug testing must begin as soon as practicable following the accident

Any additional text for Chapter 13.0 must be inserted above this point for formatting/page numbering purposes.

#### 14.0 Medical Exams for Bus Transit System Drivers

This section of the SSPP establishes Marion Transit medical examination requirements for all applicants for driver positions and for existing drivers.

- Medical examination requirements include a pre-employment examination for applicants, an examination at least once every two years for existing drivers, and a return to duty examination for any driver prior to returning to duty after having been off duty for 30 or more days due to an illness, medical condition, or injury.
- Medical examinations will be performed and recorded according to FDOT Form Number 725-030-11, or equivalent, Medical Examination Report for Bus Transit System Driver, Rev. 05/09, included in Appendix E.
- Medical examinations will be performed by a Doctor of Medicine or Osteopathy, Physician Assistant, or Advanced Registered Nurse Practitioner licensed or certified by the State of Florida. If medical examinations are performed by a Physician Assistant or Advanced Registered Nurse Practitioner, they must be performed under the supervision or review of a Doctor of Medicine or Osteopathy.
- An ophthalmologist or optometrist licensed by the State of Florida may perform as much of the medical examination as it pertains to visual acuity, field of vision, and color recognition.
- Upon completion of the medical examination, the examiner shall complete, sign, and date the medical examination form and maintain the original at his or her office.
- Upon completion of the medical examination, the examiner shall complete, sign, and date the medical examination certificate and provide a copy to Marion Transit.
- Upon completion of the medical examination the driver shall provide their driver license number, signature, and date on the medical examination certificate.
- Completed and signed medical examination certificate for each bus driver, dated within the past 24 months, will be maintained on file for a minimum of five years from the date of the examination.
- Marion Transit will not allow a driver to operate a transit bus without having on file a completed medical examination certificate dated within the past 24 months.

Any additional text for Chapter 14.0 must be inserted above this point for formatting/page numbering purposes.

#### 15.0 Operating and Driving Requirements

The Transportation Director and Transit Manager are responsible for overall compliance with all operating and driving requirements of the SSPP.

It is the responsibility of every Marion Transit employee who performs driving and/or operational duties to strictly adhere to the following requirements:

- Under no circumstances is a driver allowed to operate a vehicle without having the appropriate and valid driver's license in his or her possession.
- Drivers are not permitted to drive a bus when his or her driver license has been suspended, cancelled, or revoked. A driver who receives a notice that his or her license to operate a motor vehicle has been suspended, cancelled, or revoked is required to notify his or her supervisor of the contents of the notice immediately, if possible, otherwise no later than the end of the business day following the day he or she received the notice. Violation of this policy may result in disciplinary actions including suspension or termination of employment.
- Marion Transit management will annually check Motor Vehicle Records (MVR) for all drivers for investigating information on license suspensions, revocations, accidents, traffic violations, unpaid summons, etc. Marion Transit management will also check driver license status of each driver utilizing the Florida Department of Highway Safety and Motor Vehicles website - https://www6.hsmv.state.fl.us/DLCheck/main.jsp.
- Buses must be operated at all times in compliance with applicable traffic regulations, ordinances, and laws of the jurisdiction in which they are being operated.
- Florida Administrative Code Florida Administrative Code Rule 14-90 defines "On Duty" and "Off Duty" status of drivers as follows -
  - On Duty" means the status of the driver from the time he or she begins work, or is required to be in readiness to work, until the time the driver is relieved from work and all responsibility for performing work. "On Duty" includes all time spent by the driver as follows:
    - (a) Waiting to be dispatched at bus transit system terminals, facilities, or other private or public property, unless the driver has been completely relieved from duty by the bus transit system.
    - (b) Inspecting, servicing, or conditioning any vehicle.
    - (c) Driving.
    - (d) Remaining in readiness to operate a vehicle (stand-by).
    - (e) Repairing, obtaining assistance, or remaining in attendance in or about a disabled vehicle.
  - NOTE: The amount of on-duty hours is monitored by Supervisors to ensure complience by reviewing daily schedules (they are not scheduled for more than 11 hours) and electronic time-clocks.
  - "Off-Duty" means any time the driver is not on duty, required to be in readiness to work, or under any responsibility to perform work. Such time shall not be counted towards the maximum allowed on-duty hours within a 24-hour period.

- Drivers are not permitted to drive more than 12 hours in a 24-hour period, or drive after having been on duty for 16 hours in a 24-hour period. A driver is not permitted to drive until the requirement of a minimum eight consecutive hours of off-duty time has been fulfilled. A driver's work period begins from the time he or she first reports for duty to his or her employer. A driver is permitted to exceed his or her regulated hours in order to reach a regularly established relief or dispatch point, provided the additional driving time does not exceed one hour.
- Drivers are not permitted to be on duty more than 72 hours in any period of seven consecutive days; however, any 24 consecutive hours of off duty time shall constitute the end of any such period of seven consecutive days. A driver who has reached the maximum 72 hours of on duty time during the seven consecutive days is required to have a minimum of 24 consecutive hours of off duty time prior to returning to on duty status.
- A driver is permitted to drive for more than the regulated hours for the safety and protection
  of the public when conditions such as adverse weather, disaster, security threat, a road
  or traffic condition, medical emergency, or an accident occur.
- Drivers are not permitted to drive a bus when his or her ability is impaired, or likely to be impaired, by fatigue, illness, or other causes, likely to create an unsafe condition.
- Drivers will not report for duty or operate any vehicle while under the influence of alcohol
  or any other substance, legal or illegal, that may impair driving ability. All employees are
  required to comply with agency's Substance Abuse Policy.
- Drivers are required to conduct daily vehicle inspections and reporting of all defects and deficiencies likely to affect safe operation or cause mechanical malfunctions.
- Drivers are required to immediately report any defect or deficiency that may affect safe operations or cause mechanical malfunctions. Any defect or deficiency found shall be properly documented on a Daily Vehicle Inspection (DVI) form and should be submitted to the Transit Manager.
- The Transit Manager will review daily inspection reports and document corrective actions taken as a result of any deficiencies identified by daily inspections.
- A bus with any passenger doors in the open position will not be operated with passengers aboard. The doors will not be opened until the bus is stopped. A bus with any inoperable passenger door will not be operated with passengers aboard, except to move a bus to a safe location.
- Drivers will ensure that during darkness, interior lighting and lighting in stepwells on buses shall be sufficient for passengers to enter and exit safely. Adherence to pre-trip inspection requirements help insure the ability of this requirement to be met.
- Passengers will not be permitted in the stepwells of any bus while the bus is in motion, or to occupy an area forward of the standee line.
- Passengers will not be permitted to stand on buses not designed and constructed for that purpose.
- Buses will not be refueled in a closed building. The fueling of buses when passengers are being carried will be reduced to the minimum number of times necessary during such transportation.
- Drivers are required to be properly secured to the driver's seat with a restraining belt at all times while the bus is in motion.

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- Buses will not be left unattended with passengers aboard for longer than 15 minutes. The
  parking or holding brake device will be properly set at any time the bus is left unattended.
- Buses will not be left unattended in an unsafe condition with passengers aboard at any time.
- Drivers are prohibited from leaving keys in the vehicle for any reason at any time the bus is left unattended.
- Transit vehicles will not be used at any time for uses other than those that are authorized and permitted according to state and federal program requirements.

Noncompliance with these requirements may result in disciplinary actions including suspension or termination of employment.

#### 15.1 Wireless Communication

"Wireless communication device" means an electronic or electrical device capable of remote communication. Examples include cell phones, personal digital assistants (PDAs) and portable computers (commonly called laptop computers). "Personal wireless communications device" means an electronic or electrical device that was not provided by the bus transit system for business purposes. "Use of a wireless communication device" means use of a mobile telephone or other electronic or electrical device, hands-on or hands-free, to conduct an oral communication; to place or receive a telephone call; to send or read electronic mail or a text message; to play a game; to navigate the Internet; to play, view, or listen to a video; to play, view, or listen to a television broadcast; to play or listen to music; to execute a computational function, or to perform any other function that is not necessary for the health or safety of the person and that entails the risk of distracting the employee from a safety-critical task. Use of an electronic or electrical device that enhances the individual's physical ability to perform, such as a hearing aid, is not included in this definition.

Marion Transit requires all drivers to fully comply with the following wireless communication policies –

Policies on the use of a personal wireless communication device:

- The use of a personal wireless communication device is prohibited while the transit vehicle is in motion.
- All personal wireless communication devices must be turned off with any earpieces removed from the operator's ear while occupying the driver's seat.
- In an emergency, if a driver is unable to use the radio (e.g., driver is separated from the vehicle due to a need to evacuate, or the radio is inoperable because it is beyond the radio coverage area or other malfunction), a personal cellular phone may be used to contact the agency. In such situation the driver must park the vehicle in a safe place off the road and call the direct line to the dispatcher.
- Drivers are not permitted to use any wireless communication device issued by the bus transit system while the transit vehicle is in motion except brief radio communications with the dispatcher. If the driver must use the radio for a long duration, he/she must stop the vehicle in a safe place off the road.

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- The use of a wireless communication device is prohibited while loading or unloading a
  wheelchair patron or while conducting any other safety related duty that require the driver's
  undivided attention. If wireless communication is necessary, the driver will use a company
  issued wireless communication device before or upon completion of the safety related
  task.
- Employees are permitted to use wireless communication devices issued by the bus transit system in the following situations
  - o A driver needing to communicate with the dispatcher and vise-versa.
  - o A driver requesting medical or emergency assistance.
  - A driver reporting an illegal activity, a traffic accident, a road hazard, or a safety or security threat.

Marion Transit requires all employees to follow the radio operating procedures included in Appendix F.

### 16.0 Vehicle Equipment Standards & Procurement Criteria

Marion Transit will procure vehicles utilizing the Transit Research-Inspection-Procurement Services (TRIPS) program, formerly known as the Florida Vehicle Procurement Program (FVPP), and other State Programs strictly adhering to the vehicle equipment standards and procurement criteria specified in 14-90.007.

- All buses procured and operated must meet the following minimum standards, as applicable:
  - a. The capability and strength to carry the maximum allowed load and not exceed the manufacturer's gross vehicle weight rating (GVWR), gross axle weighting, or tire rating.
  - b. Structural integrity that mitigates or minimizes the adverse effects of collisions.
  - c. Federal Motor Vehicle Safety Standards (FMVSS), 49 C.F.R. Part 571, Sections 102, 103, 104, 105, 108, 207, 209, 210, 217, 302, 403, and 404, October 1, 2008, hereby incorporated by reference.
- Proof of strength and structural integrity tests on new buses procured will be submitted by manufacturers or bus transit systems to the Department.
- In addition, every bus operated by the agency will be equipped as follows:
  - o Mirrors. There shall be two exterior rear vision mirrors, one at each side. The mirrors shall be firmly attached to the outside of the bus and so located as to reflect to the driver a view of the highway to the rear along both sides of the vehicle. Each exterior rear vision mirror, on Type I buses shall have a minimum reflective surface of 50 square inches. Neither the mirror nor the mounting shall protrude farther than the widest part of the vehicle body except to the extent necessary to produce a field of view meeting or exceeding the requirements of this section. All Type I buses shall, in addition to the above requirements, be equipped with an inside rear vision mirror capable of giving the driver a clear view of seated and standing passengers. Buses having a passenger exit door that is located inconveniently for the driver's visual control shall be equipped with additional interior mirrors to enable the driver to view the passenger exit door. In lieu of interior mirrors, trailer buses and articulated buses may be equipped with closed circuit video systems or adult monitors in voice control with the driver.
  - Wiring and Batteries. Electrical wiring shall be maintained so as not to come in contact with moving parts, heated surfaces, or be subject to chafing or abrasion which may cause insulation to become worn. Every Type I bus manufactured on or after February 7, 1988, shall be equipped with a storage battery electrical power main disconnect switch. The disconnect switch shall be practicably located in an accessible location adjacent to or near to the battery and be legibly and permanently marked for identification. Every storage battery on a public-sector bus shall be mounted with proper retainment devices in a compartment which provides adequate ventilation and drainage.
  - Brake Interlock Systems. All Type I buses having a rear exit door shall be equipped with a rear exit door/brake interlock that automatically applies the brake upon driver activation of the rear exit door to the open position. Brake interlock application shall

remain activated until deactivated by the driver and the rear exit door returns to the closed position. The rear exit door brake interlock on such buses shall be equipped with an identified override switch enabling emergency release of the brake interlock function. The override switch–shall not be located within reach of the seated driver. Air pressure application to the brake during brake interlock operation, on buses equipped with rear exit door/brake interlock, shall be regulated at the equipment's original manufacturer's specifications.

- Standee Line and Warning. Every bus designed and constructed to allow standees shall be plainly marked with a line of contrasting color at least two inches wide, or be equipped with some other means to indicate that all passengers are prohibited from occupying a space forward of a perpendicular plane drawn through the rear of the driver's seat and perpendicular to the longitudinal axis of the bus. A sign shall be posted at or near the front of the bus stating that it is a violation for a bus to be operated with passengers occupying an area forward of the line.
- o Handrails and Stanchions. Every bus designed and constructed to allow standees shall be equipped with overhead handrails for standee passengers. Overhead handrails shall be continuous, except for a gap at the rear exit door, and terminate into vertical stanchions or turn up into a ceiling fastener. Every Type I and Type II bus designed for carrying more than 16 passengers shall be equipped with handrails, stanchions, or bars at least 10 inches long and installed to permit safe on-board circulation, seating and standing assistance, and boarding and alighting by elderly and handicapped persons. Type I buses shall be equipped with a safety bar and panel directly behind each entry and exit stepwell.
- Flooring, Steps, and Thresholds. Flooring, steps, and thresholds on all buses shall have slip resistant surfaces without protruding or sharp edges, lips, or overhangs, in order to prevent tripping hazards. All step edges and thresholds shall have a band of color(s) running the full width of the step or edge which contrasts with the step tread and riser, either light-on-dark or dark-on-light.
- Doors. Power activated doors on all buses shall be equipped with a manual device designed to release door closing pressure.
- Emergency Exits. All buses shall have an emergency exit door, or in lieu thereof, shall be provided with emergency escape push-out windows. Each emergency escape window shall be in the form of a parallelogram with dimensions not less than 18" by 24", and each shall contain an area of not less than 432 square inches. There shall be a sufficient number of push-out or kick-out windows in each vehicle to provide a total escape area equivalent to 67 square inches per seat, including the driver's seat. No less than 40% of the total escape area shall be on one side of the vehicle. Emergency escape kick-out or push-out windows and emergency exit doors shall be conspicuously marked with a sign or light and shall always be kept in good working order so that they may be readily opened in an emergency. All such windows and doors shall not be obstructed either inside or outside so as to hinder escape. Buses equipped with an auxiliary door for emergency exit shall be equipped with an audible alarm and light indicating to the driver when a door is ajar or opened while the engine is running. Supplemental security locks operable by a key are prohibited on emergency exit doors unless these security locks are equipped and connected with an ignition interlock system or an audio visual alarm located in the driver's compartment. Any supplemental security lock system used on emergency exits shall be kept unlocked whenever a bus is in operation.

- Tires and Wheels. Tires shall be properly inflated in accordance with manufacturer's recommendations.
  - i. No bus shall be operated with a tread groove pattern depth:
    - 1. Less than 4/32 (1/8) of an inch, measured at any point on a major tread groove for tires on the steering axle of all buses. The measurements shall not be made where tie bars, humps, or fillets are located.
    - 2. Less than 2/32 (1/16) of an inch, measured at any point on a major tread groove for all other tires of all buses. The measurements shall not be made where tie bars, humps, or fillets are located.
  - ii. No bus shall be operated with recapped, regrooved, or retreaded tires on the steering axle.
  - iii. Wheels shall be visibly free from cracks and distortions and shall not have missing, cracked, or broken mounting lugs.
- Suspension. The suspension system of all buses, including springs, air bags, and all other suspension parts, shall be free from cracks, leaks, or any other defect which may cause its impairment or failure to function properly.
- Steering and Front Axle. The steering system of all buses shall have no indication of leaks which would or may cause its impairment to function properly, and shall be free from cracks and excessive wear of components that may cause excessive free play or loose motion in the steering system or above normal effort in steering control.
- Seat Belts. Every bus shall be equipped with an adjustable driver's restraining belt in compliance with the requirements of FMVSS 209, "Seat Belt Assemblies" 49 C.F.R. 571.209—October 1, 2008, and FMVSS 210, "Seat Belt Assembly Anchorages" 49 C. F. R. 571.210 October 1,2008, hereby incorporated by reference.
- Safety Equipment. Every bus shall be equipped with one fully charged dry chemical or carbon dioxide fire extinguisher, having at least a 1A:BC rating and bearing the label of Underwriter's Laboratory, Inc. The fire extinguishers shall be maintained as follows:
  - i. Each fire extinguisher shall be securely mounted on the bus in a conspicuous place or a clearly marked compartment and be readily accessible.
  - ii. Each fire extinguisher shall be maintained in efficient operating condition and equipped with some means of determining if it is fully charged.
  - iii. Every Type I bus shall be equipped with portable red reflector warning devices in compliance with Section 316.300, Florida Statutes.
- Persons with Disabilities. Buses used for the purpose of transporting individuals with disabilities shall meet the requirements set forth in 49 C.F.R. Part 38, October 1, 2008, hereby incorporated by reference, as well as the following:
  - i. Installation of a wheelchair lift or ramp shall not cause the manufacturer's GVWR, gross axle weight rating, or tire rating to be exceeded.
  - ii. Except in locations within 3 1/2 inches of the bus floor, all readily accessible exposed edges or other hazardous protrusions of parts of wheelchair lift assemblies or ramps that are located in the passenger compartment shall be padded with energy absorbing material to mitigate injury in normal use and in

- case of a collision. This requirement shall also apply to parts of the bus associated with the operation of the lift or ramp.
- iii. The controls for operating the lift shall be at a location where the bus driver or lift attendant has a full view, unobstructed by passengers, of the lift platform, its entrance and exit, and the wheelchair passenger, either directly or with partial assistance of mirrors. Lifts located entirely to the rear of the driver's seat shall not be operable from the driver's seat, but shall have an override control at the driver's position that can be activated to prevent the lift from being operated by the other controls (except for emergency manual operation upon power failure).
- iv. The installation of the wheelchair lift or ramp and its controls and the method of attachment in the bus body or chassis shall not diminish the structural integrity of the bus nor cause a hazardous imbalance of the bus. No part of the assembly, when installed and stowed, shall extend laterally beyond the normal side contour of the bus or vertically beyond the lowest part of the rim of the wheel closest to the lift.
- v. Each wheelchair lift or ramp assembly shall be legibly and permanently marked by the manufacturer or installer with the following information:
  - 1. The manufacturer's name and address.
  - 2. The month and year of manufacture.
  - A certificate that the wheelchair lift or ramp securement devices, and their installation, conform to State of Florida requirements applicable to accessible buses.
- Wheelchairs. Wheelchair lifts, ramps, securement devices, and restraints shall be inspected and maintained as required by this rule chapter. Instructions for normal and emergency operation of the lift or ramp shall be carried or displayed in every bus.

Any additional text for Chapter 16.0 must be inserted above this point for formatting/page numbering purposes.

#### 17.0 Internal and External Safety Audits

The Transportation Director is responsible for conducting announced and unannounced internal safety audits of Marion Transit units and contract operators. Annual internal safety audits will be conducted starting October 1st of each calendar year and ending prior to the end of the same calendar year utilizing the internal audit checklist included in Appendix G. The annual audit results will be documented by the Transportation Director in a report containing the following:

- Identification of the findings, including a detailed description of any deficiency.
- Required corrective action and a schedule for implementation of the corrective action to be taken for each deficiency.
- Any required suspension of bus transit system service should Your Community Transit determine the continued operation of the service, or a portion thereof, poses an immediate danger to public safety.

In addition, announced and unannounced periodic internal audits will be conducted by the Transportation Director or designee(s) to ensure compliance with all the objectives and requirements of SSPP and Florida Administrative Code Rule 14-90. Safety audits (sampling) of vehicles and records will be conducted on random basis, but at least annually. Pre-Post Trip Inspections will also be utilized to monitor safety concerns/issues on a daily basis. Facility inspection will be conducted once every week to identify and resolve potential safety and security hazards. The HR Director will regularly perform Quality Control (QC)/Quality Assurance (QA) checks to ensure that safety compliance, both in-house and contracted, is achieved at all times. Contractors/subcontractors are subject to audits and inspections on an announced or unannounced basis at the discretion of Marion Transit management. Marion Transit, or its contractor, will conduct safety and security reviews of contract service operators, at least once every three years, to ascertain compliance with the provisions of Florida Administrative Code Rule 14-90.

Marion Transit management will work closely with regulatory agencies (FDOT, FTA, etc.) when external audit notifications are received and allocate resources, as necessary, to facilitate the audits.

Any additional text for Chapter 17.0 must be inserted above this point for formatting/page numbering purposes.

#### 18.0 Certification

The Transportation Director will submit an annual safety and security certification to the FDOT utilizing the self-certification form included in Appendix H. The certification will be submitted no later than February 15, for the prior calendar year period unless otherwise required by FDOT. The certification will attest to the following:

- The adoption of an SSPP and an SPP in accordance with established standards set forth in Florida Administrative Code Rule 14-90.
- Compliance with the adopted SSPP and SPP.
- Performance of safety inspections on all buses operated by the system in accordance with Florida Administrative Code Rule 14-90.
- Reviews of the SSPP and SPP have been conducted to ensure they are up to date.

#### The certification will also include:

- The name and address of Marion Transit, and the name and address of the entity(ies)
  who performed bus safety inspections and security assessments during the prior calendar
  year, if different from Marion Transit.
- A statement signed by the Chief Executive Officer/signatory authority responsible for the management of Marion Transit attesting to compliance with Florida Administrative Code Rule 14-90.

Any additional text for Chapter 18.0 must be inserted above this point for formatting/page numbering purposes.

#### 19.0 Appendices

- Appendix A: Rule Chapter 14-90, F.A.C.
- Appendix B: Substance Abuse Policy
- Appendix C: Maintenance Plan
- Appendix D: Preventative Maintenance Guidelines
- Appendix E: Medical Examination Form 725-030-011
- Appendix F: Radio Operating Procedures
- Appendix G: Internal Safety Audit Checklist
- Appendix H: Bus Transit System Annual Safety and Security Certification Form
- Appendix I: SSPP Addendums (placeholder for future updates)
- Appendix J: Text Formatting Palette
- Appendix K: Marion Transit Procedures
  - a. Operations Staff Accident Procedures / Responsibilities
  - b. Pre-Trip / Post-Trip Daily Inspections
  - c. Biohazard Clean Up Procedure
  - d. Bus Evacuation Procedure/Plan
  - e. Transportation for Life Sustaining Activities
  - f. Lift & Wheelchair Procedure/Policy
  - g. Closing Procedure for Dispatch
  - h. Railroad Crossings Procedure
  - i. Proper Use of Two-Way Radios
  - j. Reasonable Modification Policy
  - k. Employee Incident & Injury Report Procedure
  - I. Vehicle Inspections
  - m. Complaint & Compliments Procedure
  - n. Alternative Internet Access
  - o. Customer Rights & Responsibilities
  - p. Scope of Work for Community Transportation Coordinators
  - g. Rider Disciplinary-Suspension Policy
  - r. Marion Transit STAR of the Month
  - s. Client Intake Procedure / Form
  - t. Trip Rate Procedure
  - u. Bus Road Call & Wrecker Procedure
  - v. Disadvantaged Business Enterprise (DBE) Policy/Procedure
  - w. About our Clients
  - x. Bus Video Review Policy
  - v. Asset Management Plan
  - z. Client Injury Report
  - aa. Supervisor Incident Review

### Appendix A Rule Chapter 14-90, F.A.C.

## Appendix B Substance Abuse Policy

## Appendix C Maintenance Plan

## Appendix D Preventative Maintenance Guidelines

## Appendix E Medical Examination Form 725-030-011

## Appendix F Radio Operating Procedures

## Appendix G Internal Safety Audit Checklist

# Appendix H Bus Transit System Annual Safety and Security Certification Form

# Appendix I SSPP Addendums (placeholder for future updates)

# Appendix J Text Formatting Palette

### Formatting/Styles

Report margins:

Top margin = 1" Bottom margin = 1" Left margin = 1.25" Right margin = .75"

Heading levels:

### **Heading One**

Arial 18 pt bold; centered; paragraph spacing = 20 pt after

#### Heading 2

Arial 12 pt bold; left-aligned; line spacing-single; paragraph spacing = 6 pt before, 14 pt after Body Text: Arial 11, single spaced, one blank line between paragraphs.

Bulleted List: Arial 11 pt; line spacing-single; paragraph spacing = 6 pt before

### **General Instructions**

How to Update Table of Contents:

Right click on table of contents and choose *update field*—you will then have the option of updating the entire table of contents or just the page numbers.

How to Add New Section:

Under *Page Layout Menu*, choose *Breaks*, then *Section Break*, then *Next Page*. Heading numbers should update automatically in new section.

# Appendix K Marion Transit Procedures

- a. Operations Staff Accident Procedures / Responsibilities
- b. Pre-Trip / Post-Trip Daily Inspections
- c. Biohazard Clean Up Procedure
- d. Bus Evacuation Procedure/Plan
- e. Transportation for Life Sustaining Activities
- f. Lift & Wheelchair Procedure/Policy
- g. Closing Procedure for Dispatch
- h. Railroad Crossings Procedure
- i. Proper Use of Two-Way Radios
- j. Reasonable Modification Policy
- k. Employee Incident & Injury Report Procedure
- I. Vehicle Inspections
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- n. Alternative Internet Access
- o. Customer Rights & Responsibilities
- p. Scope of Work for Community Transportation Coordinators
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- x. Bus Video Review Policy
- y. Asset Management Plan
- z. Client Injury Report
- aa. Supervisor Incident Review



### **Diane Poitras**

District Transit Programs Administrator FDOT District Five Modal Development Office 420 W Landstreet Road, MS 594 Orlando, FL 32824 Phone: 407-482-7860

Email: diane.poitras@dot.state.fl.us





FDOT District Five Modal Development Office 420 W Landstreet Road, MS 594 Orlando, FL 32824



RON DESANTIS GOVERNOR 420 W. Landstreet Rd. Orlando, FL 32824

KEVIN J. THIBAULT, P.E. SECRETARY

May 3, 2021

Tom Wilder
Transportation Director
Marion Senior Services
1101 Southwest 20<sup>th</sup> Court
Ocala, Florida 34471

Re: Marion Senior Services – 2021 Florida Department of Transportation (FDOT) Triennial Review Compliance Notice

Dear Mr. Wilder:

This letter is to confirm that the 2021 Marion Senior Services' FDOT Triennial Review conducted on January 26 and 27, 2021, is now closed. Following the Triennial Review Report originally transmitted on March 17, 2021, the Department has found Marion Senior Services in compliance with the FDOT regulations for providing public transportation services and for receiving federal funding programs 49 U.S.C. §5310, §5311, and §5339. A summary of review findings is provided in Attachment A of this notice. Thank you for cooperating with the FDOT review team to work towards compliance in various areas of Marion Senior Services' public transportation program.

Your cooperation during the process was greatly appreciated. The Department looks forward to continuing its valued partnership with Marion Senior Services to provide safe and efficient public transportation for the residents of Marion County.

Should you have any questions or require additional information, please do not hesitate to contact me directly at (321) 319-8174 or e-mail <a href="mailto:diane.poitras@dot.state.fl.us">diane.poitras@dot.state.fl.us</a>.

Sincerely,

Diane Poitras

1053F40140014E0.
Diane Poitras

Transit Programs Administrator

FDOT District Five

c:

Carlos Colon, Transit Project Coordinator - FDOT, District Five Sophia Villavicencio-Ortiz, In-House Consultant – VHB Jennifer Martinez, Executive Director – Marion Senior Services Herman Schulz, Transit Manager – Marion Senior Services Ken McKelvy, Transit Manager – Marion Senior Services

Attachment A – Findings Summary

Review Category	Review Area/Finding Level	Details	
Charter Bus/School Bus	No Findings	Not Applicable	
Civil Rights: Americans with Disabilities Act (ADA)	No Findings	Not Applicable	
Civil Rights: Disadvantaged Business No Findings Enterprise		Not Applicable	
Civil Rights: Equal Employment Opportunity	No Findings	Not Applicable	
Civil Rights: Title VI Program	Plan and Support Documents / Area of Concern	Agency's Title VI Plan does not identify the racial breakdown of the Transportation Disadvantaged Local Coordinating Board (TDLCB) in the region.	
Civil Rights: Title VI Program	Plan and Support Documents / Area of Concern	Agency's Title VI Plan did not conclude include the American Community Survey maps and tables provided by FDOT.	
Coordinated Plans  Coordinated Public Transportation/Human Services / Area of Concern		"Section 5310 CFR 9070.1G Coordinated Public Transit-Human Services Transportation Plan. On December 4, 2015, Congress enacted the Fixing America's Surface Transportation (FAST) Act, which provides funding for highway and transit programs. The FAST Act has been extended through fiscal year 2021 in September of 2020. The law includes transportation planning requirements. Among these, FAST requires that local communities have a coordinated human services transportation plan. Projects funded by the Federal Transit Administration's (FTA) Section 5310 (Enhanced Mobility for Seniors and Individuals with Disabilities) Program, "must be derived from a locally developed, coordinated public transit-human services transportation plan." In addition to promoting local transportation coordination, this	

Review Category Review Area/Finding Level		Details
		requirement is intended to improve transportation services for persons with disabilities, older adults and individuals with lower incomes. FTA defines a coordinated plan as a unified, comprehensive strategy for public transportation service delivery that defines the transportation needs of individuals with disabilities, seniors, and individuals with limited incomes, lays out strategies for meeting these needs and prioritizes services.
		<ul> <li>Requires public participation for the planning process, the TDLCB meetings are part of the coordinated system but not a part of the planning process.</li> <li>Agency should work with Ocala/Marion TPO on this process to update this plan.</li> <li>MSS is required to develop a Coordinated Public Transit-Human Services Transportation Plan which can also be used to meet the Commission for Transportation Disadvantaged requirements for the TDSP.</li> </ul>
Drug & Alcohol Testing	Drug and Alcohol Policy / Area of Concern	Agency may be including employees in the federal testing program that are not performing safety-sensitive functions (as defined by FTA rule, 49 CFR Part 655.4). Federal testing of employees who are not covered by the rule is prohibited.
Drug & Alcohol Testing	Pre-Employment- Testing and Background Checks / Deficiency	USDOT rule, 49 CFR Part 40.25 requires all transportation employers to perform drug and alcohol background checks when an applicant or transferee is being placed into a safety-sensitive position and has previously held a DOT-covered position within the 2 years prior to date of application. Agency was not able to provide documentation that DOT-previous employer drug and alcohol background checks (inquiries) are being performed.

Review Category	Review Area/Finding Level	Details	
Project Management/Financial Information	Procurement / Area of Concern	Agency's procurement policy does not include language explaining the graduated purchasing authority that is followed and language explaining the agency's appeal and protest procedures.	
Project Management/Financial Information	Procurement / Area of Concern	Agency should update the addendum concerning SAM.gov check to make it clear that any proposed vendor that will be paid with federal funds must not be excluded or disqualified through the Excluded Parties List System (EPLS) by completing a verification search on the following link: Sam.gov/SAM/	
Project Management/Financial Information	Procurement / Area of Concern	FDOT address on DBE plan is outdated.	
Project Management/Financial Information	Procurement / Area of Concern	Agency's procurement policy did not include reference that procurements utilizing federal funds will be in accordance to 2 CFR 200.317 – 200.326.	
Safety and Security Driver Qualifications / Observation		The CUTR team reviewed a random selection of driver records to ensure that all licenses, medical examinations, and training requirements were in compliance with Chapter 14-90, FAC and the agency's SSPP. Marion Senior Services is doing a good job ensuring they are in compliance with these requirements.	
Safety and Security Rules and SOPs / Deficiency		Marion Senior Services operators observed during the virtual ride-along did not operate the bus in accordance with the agency's rules and regulations and in observance of local, state, and federal laws.	
Safety and Security	Accidents / Deficiency	Marion Senior Services does not address the following requirements for Event Investigation as outlined in Rule 14-90 FAC.:  • Events are investigated and documented in a final report that includes a description of the investigation activities, identified causal factors, and any identified corrective actions - Documentation not consistent with agency's SSPP	

Review Category	Review Area/Finding Level	Details
		Corrective action plans are developed by the bus transit system that will identify planned actions and schedule for implementation - Documentation not consistent with agency's SSPP Does the agency monitor and tracks the implementation and completion of each corrective action - Documentation not consistent with the agency's SSPP Does the agency have a follow-up procedure in place to ensure that the corrective action is working - Documentation not consistent with the agency's SSPP Does the agency conduct annual/periodic safety and hazard analysis of data – agency stated that this requirement is under implementation
Safety and Security	Accidents / Deficiency	Marion Senior Services does not address the requirement of notification and investigation reports, findings, causal factors, corrective action plans, supporting documents as outlined in Rule 14-90 FAC. – Several files are incomplete missing CAP implementation documentation along with CAP monitoring documentation.
Safety and Security Hazards / Deficiency		Marion Senior Services does not conduct a hazard analysis to assess the level of risk the seating capacity and configuration could pose if a vehicle needed to be evacuated in an emergency situation for vehicles with more than three (3) wheelchair positions as outlined in FDOT guidelines.
Safety and Security	Emergency Management and Security / Deficiency	Marion Senior Services does not address the following requirements for the development and adoption of a Security Program Plan as outlined in Rule 14-90 FAC.  Approved Security Program Plan (SPP) – The document is not signed. Certification requirements SPP requirements for contractors

Review Category	Review Area/Finding Level	Details
		<ul> <li>Procedures for oversight and monitoring of contractors compliance with security requirements</li> <li>Review threat and vulnerability assessment</li> <li>Procedures for SPP maintenance and distribution: includes disclosure prohibition per Section 119.071(3)(a), F.S. – disclosure prohibition is not included.</li> </ul>
Equipment Management	No Findings	Not Applicable
Facility Maintenance	No Findings	Not Applicable
National Transit Database (NTD)	No Findings	Not Applicable
Vehicle Maintenance	Vehicle Files / Observation	Marion Senior Services has an excellent PM program. The program is well documented and maintenance practices are consistent with the agency's written policies. Performance measures also indicated the program is efficient.
Vehicle Maintenance	Vehicle Files / Vehicle Files	A safety-sensitive defect was identified during the on-site vehicle inspection. The critical nature of the defect resulted in the vehicle being removed from service by the FDOT District 5 Representative.
Vehicle Maintenance	Maintenance Plan / Maintenance Plan	The fleet roster does not include all of the vehicles currently operated by Marion Senior Services to provide passenger transportation.
Vehicle Maintenance	Pre and Post-Trip Inspections / Pre and Post Trip Inspections	Although the drivers checked the wheelchair lift and interlock during their pre-trip inspection observation, they did not seem completely familiar with all of their safety functions.



January 31, 2023

Florida Department of Transportation, District Five Attn: Ms. Diane Poitras, Transit Programs Administrator 420 W. Landstreet RD Orlando, FL 32824

RE: VEHICLE MAINTENANCE PLAN

To: District Five

This letter provides certification that <u>Marion Senior Services</u>, <u>Inc. d/b/a Marion Transit</u> has not made any changes to the Vehicle Maintenance Plan implemented <u>November 2017</u> to comply and incorporate FDOT Preventative Maintenance Standards Manual Edition 4.1.

The Preventative Maintenance Plan is attached for reference if necessary.

Sincerely,

Clayton Murch, Transportation Director



### PREVENTIVE MAINTENANCE MANUAL

for

# **M**ARION TRANSIT

Revised – November, 2017

# Complies with and incorporates FDOT Preventative Maintenance Standards Manual Edition 4.1



#### **Maintenance Plan Outsource**

It is the goal of Marion Transit to maintain an effective preventative maintenance program by utilizing proper management of parts, equipment and fleet. Marion Transit strives to operate a proactive maintenance program as opposed to reactive. Some ways they hope to accomplish this are by ensuring efficient cost-effective repairs and improving quality assurance measures. Scheduling work allows time, materials, tools, equipment, and labor to be managed easier than having unpredictable maintenance costs, workloads, and vehicle downtime. A maintenance plan has been adopted to make these goals attainable.

The maintenance plan is a "living document" including schedules and reports which will be updated periodically to reflect changes in maintenance policies, equipment, and program improvements.

#### **Vehicle Maintenance**

The current Marion Transit vehicle fleet is attached.

Marion Transit maintains the vehicles by performing the following regularly scheduled preventative maintenance inspections:

#### **Pre-Trip Inspections**

Vehicles receive a daily or pre-operational inspection that includes the following items:

- Lighting Devices
- Windshield wipers
- Interior Gauges and Warning System
- Climate Control
- Mirrors
- All Lights, Mirrors, Wipers and Warning Devices
- Parking Brakes
- Service Brakes
- Steering
- Horn
- Fire extinguisher
- Emergency Exit Windows and Door
- Passenger Doors
- Tires and Wheels
- Exhaust System
- Interlock System, if equipped
- Wheelchair Lifts and Ramp.
- Belts and Securement Devices.
- First Aid Kit & Bloodborne Spill Kit.
- Reflective Triangles.
- Fire Suppression System, if equipped.



These inspections are performed by driver's by completing a pre-trip inspection form. See attached. Forms are documented with the operator's signature and a check in each box to ensure whether items are "OK" or a defect is found. Details of the defect are noted in the comments section. Completed pre-trip inspection forms are submitted to the dispatcher and reviewed before the vehicle begins service. If a safety defect is found during the pre-trip inspection, the vehicle is repaired before returning to service. Once a defect is repaired it will be acknowledged in one of the following ways:

- The repair is noted on the pre-trip inspection form, along with a signature and date of repair; or
- A completed work order form describing the repair is attached to the pre-trip inspection form.

Pre-trip inspection forms are filed in the Transit Manager's Office and kept on file for a minimum of 14 days.

During scheduled trips and at the conclusion of transportation service the operator will note any defects on a post-trip inspection checklist to be turned in to dispatch at the end of the day. Defects that are consistent with the safety sensitive items listed on the pre-trip inspection are repaired before the vehicle returns to service. Defects that are not safety related are scheduled for repair at a later date.

#### **Preventative Maintenance Inspections**

Vehicles receive scheduled preventative maintenance inspections every 6000 miles. Vehicle mileages are tracked using both manual & electronic methods to schedule upcoming preventative maintenance inspections. When a vehicle is due for inspection, it is taken out of service until the inspection and all necessary repairs are completed. A preventative maintenance inspection checklist is used to inspect components in a progressive method. See attached. The inspections are performed in an A,B,A,C sequence every 6000 miles to ensure vehicle safety.

Marion Transit uses the following outsource maintenance facilities to conduct the preventative maintenance inspections and repairs:

- Construction Tire & Maintenance 3021 NW 21 Street, Ocala 352-629-3506
- AAMCO 661 SW 17<sup>th</sup> Loop, Ocala 352-369-9928
- Thermo King of Ocala 6015 NW 44 Ave., Ocala 352-867-7700
- ACE Auto Air 2120 S. Pine Ave., Ocala 352-732-2511
- Don's Garage 218 SW 10<sup>th</sup> Street, Ocala 352-732-7153

Marion Transit has provided the maintenance facilities performing the preventative maintenance inspections with the Preventative Maintenance Standards Manual to use as guidelines for performing these inspections. See attached. In addition, the Marion Transit has maintained a signed Preventative Maintenance Agreement with the outsourced facility outlining the roles and responsibilities of each party regarding preventative maintenance vehicle inspections.



Upon completion of the preventative maintenance inspection, the maintenance facility provides Marion Transit with a completed preventative maintenance inspection checklist form and a receipt for purchased services. This information is filed in the vehicle history files located in room 132.

All repairs that are considered to be safety related are made before the vehicle returns to service. Cosmetic repairs and repairs that are not safety related are scheduled for repair at a later date.

#### **Maintenance Policies and Procedures**

#### **Vehicle History Files**

Vehicle history files are maintained for each vehicle for the life of that vehicle. Each file includes the following:

- Identification of the vehicle, including make, model, license number or other means of positive identification and ownership;
- Date, mileage and description of each inspection, maintenance, repair or lubrication performed;
- If not owned by the transit Marion Transit, the name of the person or company furnishing service with this vehicle;
- The name and address of any business firm performing an inspection, maintenance, repair or lubrication.

#### **Lift Maintenance**

As part of the preventative maintenance on wheelchair lifts, a complete cycle of the lift is performed during the operators' pre-trip inspection. The operators report, by the most immediate means available, any lift failures.

The lifts are serviced on preventative maintenance inspections according to the manufacturer's specifications. Instructions for normal and emergency operation of the lift or ramp are carried or displayed in every accessible vehicle.

#### Accidents

All accidents are tracked by the frequency, type, and which party was at fault through incident reports that are completed within 12 hours of the time of the incident. <u>See attached (incident report form)</u>

Accident Investigation Reports are completed with the following information:

- Events are investigated and documented in a final report
- Description of investigation activities
- Identified causal factors
- Corrective actions
- Schedule of implementation of corrective actions

In the event of an accident the primary responsibility of all staff is to ensure the safety of the passengers. Marion Transit accident procedure is attached.



#### **Road Calls**

Road calls are defined as any in-service interruptions caused by failure of some functionally necessary element of the vehicle. When failures occur they are called in to the Marion Transit. The Transportation Coordinator makes towing arrangements to bring the vehicle to an outsource maintenance facility if necessary. Road call repairs are completed in the most expeditious manner to reduce the vehicle's down time. All related repair and towing expenses are filed in the vehicle's history file. Road calls are documented and monitored by the Transportation Coordinator and are analyzed to identify maintenance trends.

#### Cleaning

It is the duty of the assigned driver to perform a daily walkthrough on the vehicle and ensure there is no debris on the flooring or step wells that could result any falls or slips. Unsafe conditions are corrected before any scheduled trips. Drivers are also responsible for daily cleaning of their assigned bus.

#### **Information Management**

Maintenance activities are regularly monitored and analyzed by the Transit Manager and Transit Assistant. This information is used to adjust the preventative maintenance program as needed.

#### Warranty

A warranty recovery system, or warranty records of claims submitted and received, are maintained by Marion Transit. All warranty paperwork is filed in the bus folders.

Warranty repairs are identified by maintaining a list of items from the manufacturer that are under warranty and when the warranty expires. When a component fails it is checked against the list for time and/or mileage to determine if it is still under warranty. Documentation of warranty repairs, claims, and a recovery program are kept on file to guarantee the cost of the defects under warranty is paid by the equipment manufacturer and not the Marion Transit. All warranty claims are pursued until the claim is settled.



### **PRE-TRIP & POST-TRIP INSPECTIONS**

Before utilizing vehicles for transportation service, FDOT requires drivers to conduct pre-trip inspections. The pre-trip inspection is significant in the detection of vehicle deficiencies that can impact passenger safety.

All agencies, whether their maintenance is performed in-house or outsourced, must complete a pre-trip inspection form. The pre-trip inspection form ensures that vital vehicle components are inspected before a vehicle departs for service. Table 1 identifies the minimum pre-trip inspection components and approved procedures. These components are also identified under Chapter 14-90 of the Florida Administrative Code and the FDOT State Management Plan.

Table 1: Pre-Trip Inspection Components & Procedures

Component	Procedure
Service Brakes	<ul> <li>From the driver's seat, pump the brake pedal three or four times, and then hold constant downward pressure on the pedal for at least five seconds. The brake pedal should hold firm and not drift down.</li> <li>If equipped with a hydraulic brake reserve system, with the key off, depress the brake pedal and listen for the sound of the reserve system electric motor.</li> <li>If equipped with hydro boost system or vacuum assist system, with the key off, pump the brake at least five times and depress the brake pedal. It should feel firm. Remain holding the pedal and start the engine. The pedal should move slightly to the floor and then rise.</li> <li>Check that the warning buzzer or brake light is off.</li> </ul>
Parking Brakes	<ul> <li>Apply the parking brake and shift vehicle into low gear slightly pulling against the brakes. Vehicle should not move.</li> </ul>



Table 1: Pre-Trip Inspection Components & Procedures (cont.)

C	Para dama
Component	Procedure
Tires & Wheels	<ul> <li>The minimum tire tread depth on steering axle (front tires) is 4/32 inch in every major groove. No re-caps are allowed on the steering axle.</li> <li>The minimum tire tread depth on all other tires is 2/32 inch in every major groove.</li> <li>Check all tires for uneven tread wear and cuts or damage to tread and sidewalls.</li> <li>Check for tire inflation by hitting the tires with a mallet or similar device to check for flats. To check for exact tire inflation a tire air gauge must be used.</li> <li>Check rims for bends, damage, or welds. Rims must not have any welding repairs.</li> <li>Check valve stems for damage and for missing valve caps.</li> <li>Check that the wheels and hubs are free of oil or grease. Oil or grease present could indicate a leaking hub or axle seal.</li> <li>Check that all lug nuts are present. Check for signs of rust streaks or shiny threads that could indicate loose lug nuts.</li> </ul>
Steering	<ul> <li>With the engine running, turn the wheel back and forth. Steering play should not exceed 2 inches (on a 20-inch wheel) until the front wheels barely move.</li> </ul>
Horn	Check that the horn works properly.
Lighting Devices	<ul> <li>Turn on exterior lights. Turn on 4-way flashers. Perform a complete walk around of the exterior of the vehicle and check all lights for proper operation and lens for cleanliness.</li> <li>Turn off 4-way flashers and turn on left turn signal and check left signal lights for operation.</li> <li>Turn on right turn signal and check right signal lights for operation.</li> <li>Turn on hi-beam head lights and check for operation.</li> <li>Checking brake lights and back-up lights may require assistance. With someone in the driver's seat, instruct them to step on the brake pedal while observing the operation of the brake lights. At this time have the assistant place the vehicle in reverse. Check back-up light operation and back-up alarm if equipped.</li> <li>Turn on all interior lights and check for operation.</li> </ul>
Windshield Wipers	<ul> <li>Starting from the exterior of the vehicle, check the condition of the wiper blades and that the arms and blades are secure.</li> <li>From the interior of the vehicle, check that the windshield washer works correctly and that the wipers operate smoothly</li> <li>Windshield should be clean with no obstructions or damage to glass.</li> </ul>
Mirrors	<ul> <li>Rear view mirrors and side view mirrors should be secure with no mirror bracket damage. Check for proper adjustment. Check mirror glass for cleanliness or fading.</li> </ul>
Climate Control	<ul> <li>Operate and check heater and air conditioning controls through all selector ranges and check varying fan speed for proper function.</li> <li>Check rear unit as applicable.</li> </ul>
Emergency Exit Windows and Doors	<ul> <li>Inspect side and rear windows for cracks, scratches and proper function of opening mechanisms.</li> <li>Check emergency exits to ensure all exits function properly and stay shut after opening.</li> </ul>
Passenger Doors	<ul> <li>Check doors for damage and that they operate smoothly. Hinges should be secure with seals intact.</li> <li>Check door entry area for debris and any loose or extensively worn flooring.</li> </ul>



Table 1: Pre-Trip Inspection Components & Procedures (cont.)

Component Interior Gauges	Procedure
Interior Gauges	
and Warning	<ul> <li>Activate ignition switch and check all warning indicator lights (oil, battery, check engine, ABS, etc.) for proper operation. If the vehicle is equipped with gauges, check proper readings after the engine has been started.</li> </ul>
Exhaust	<ul> <li>Check tailpipe for placement and secure mounting.</li> </ul>
System	<ul> <li>Start engine and listen for exhaust leaks and check for exhaust fumes in areas other than the tailpipe end.</li> </ul>
Wheelchair Lift	Check wheelchair lift doors for operation and damage.
and Ramp	<ul> <li>Cycle lift from stow position to floor level and check outboard roll stop barrier for proper latching.</li> </ul>
	<ul> <li>Cycle lift to ground level and check for any leaking, damaged, missing parts, and for smooth operation. Raise lift from ground level. With platform slightly off ground, make sure outboard roll stop barrier raises and it is latched securely. This must be performed by visually inspecting and latching mechanism to ensure it is in the correct locked position and by physically attempting to pull/push barrier down with an adequate amount of force to make certain the barrier is securely latched.</li> </ul>
	<ul> <li>Continue to raise lift to floor level and check for any unusual noises or abnormal operation. Check all warning lights and audible signals for proper operation. Due to varying lift configurations, refer to your lift's Owner's Manual for a list of warning lights and audible alarms to ensure all of these safety warning devices are working properly.</li> <li>Stow lift.</li> </ul>
	<ul> <li>With lift door in the open position, check shift interlock by trying to shift vehicle into gear. Bus should not shift out of park.</li> </ul>
	<ul> <li>Inspect retractors for damaged webbing and proper locking.</li> </ul>
	Inspect shoulder belts.
	<ul> <li>Inspect foldaway seats for operation.</li> <li>Inspect floor anchors.</li> </ul>
Belts and Securement Devices	<ul> <li>Check for proper number and condition of belts, tie downs and any other securement devices</li> </ul>
Interlock Systems	<ul> <li>If equipped, check to ensure interlock system is working properly. Vehicle should not shift out of park with either the front door or lift door open.</li> </ul>
	<ul> <li>If the rear emergency exit door is open or closed, and locked, the vehicle should not start.</li> <li>Check for audible alarm and warning light if rear door is open with vehicle running.</li> </ul>
Safety,	Check for properly charged and rated fire extinguisher.
Security, &	Check for properly charged and raced line exclinguisher.     Check for safety triangles and flares, if equipped.
Emergency	Check for first aid kit, if equipped.
Equipment	
Fire Suppression	<ul> <li>Check the fire suppression gauge and ensure that the gauge indicates the fire suppression system is properly functioning. The arrow should be pointing in the green area of the gauge.</li> </ul>
Additional Items	<ul> <li>Your agency may require additional items to be checked during the pre-trip/post-trip inspection, such as fluid checks, engine, hoses and belts under the hood. Check these additional items as necessary using procedures set forth by your agency.</li> </ul>



### **ABC Progressive Inspections**

Preventative maintenance inspections for Marion Transit are scheduled in a progressive method by using a predetermined target mileage (6000 miles). Intervals, however, should not exceed 6,000 miles.

Note: Older, "spare" vehicles that do not meet the target mileage within a year will be scheduled for a "C" Annual Inspection/Maintenance annually.

The ABC progressive inspection method is comprised of three progressive levels: "A" level inspections, "B" level inspections and "C" level inspections. Inspections should be performed in the following sequence: A, B, A, C. For example, Marion Transit inspections using a 6,000 mile interval, the inspections would follow this sequence:

### **6000 MILE Preventive Maintenance Schedule**

Α	6000 MILES	Α	54,000 MILES	Α	102,000 MILES	Α	150,000 MILES
В	12,000 MILES	В	60,000 MILES	В	108,000 MILES	В	156,000 MILES
Α	18,000 MILES	Α	66,000 MILES	Α	114,000 MILES	Α	162,000 MILES
С	24,000 MILES	С	72,000 MILES	С	120,000 MILES	С	168,000 MILES
Α	30,000 MILES	Α	78,000 MILES	Α	126,000 MILES	Α	174,000 MILES
В	36,000 MILES	В	84,000 MILES	В	132,000 MILES	В	180,000 MILES
Α	42,000 MILES	Α	90,000 MILES	Α	138,000 MILES	Α	186,000 MILES
С	48,000 MILES	С	96,000 MILES	С	144,000 MILES	С	192,000 MILES

Note: Maintenance shall not exceed 10% of scheduled maintenance mileage.

### **Conducting Preventative Maintenance Inspections**

The following tables provide a step-by-step guide for conducting preventative maintenance inspections using the ABC progressive inspection method. Table 3 identifies the minimum components/items that must be inspected during an "A" level inspection. Table 4 identifies the components/items that must be inspected during a "B" level inspection, and Table 5 identifies "C" level inspection items.

ABAC inspections are cumulative. This means that "B" level inspections must also include "A" level inspections, and "C" level inspections must include both "A" and "B" level inspections.

FDOT has determined that the following vehicle components require a vehicle lift to be properly inspected. The "Item #" in parentheses corresponds to numbers on the FDOT-approved "Preventative Maintenance Inspection Report" Checklist. This form is included in the Preventative Maintenance Standards Manual.:

- Torque rods (Item #60)
- Ball joints (Item #61)
- Steering Gear/Linkage & Arms (Item #62)
- Lube Chassis (Item #64)
- Drive shaft & U-joints (Item #65)
- Differential Oil Level/Clean Breather/Axle seals (Item #66)
- Drain and refill differential fluid (Item #67)



- Replace transmission fluid and filter (Item #68)
- Front Wheel Bearings (Item #69)
- Air Tank Mounting/Lines & Valves (Item #71)
- Exhaust System for Mounting/Leaks/Restrictions (Item #72)
- Underbody/Mounts & Frames (Item #73)
- Fuel Tank Mounting & Fuel Leaks (Item #74)
- Brake Foundation/Lines/Rotors/Drums (Item #82)
- L/Front Brakes % Worn (Item #83)
- R/Front Brakes % Worn (Item #84)
- L/Rear Brakes % Worn (Item #85)
- R/Rear Brakes % Worn (Item #86)

Additionally, it is beneficial for the following vehicle components to be suspended on a lift to ensure accuracy:

- Engine Oil & Filter (Item #53)
- Shocks/Springs/MOR/ryde (Item #59)



### Table 3: "A" Level Inspection Components

The "Item #" in these tables correspond to numbers on the FDOT-approved "Preventative Maintenance Inspection Report" Checklist. This form is included in the Preventative Maintenance Standards Manual.

Item #	Comment				
	Component				
Interi					
1	Passenger Door/ Check Operation of All Interlocks and/or Starter Interrupt  Check to ensure interlock system is working properly when parking brake is applied.  Vehicle should not come out of park with either the front door or wheelchair lift door open. If equipped, check passenger door sensitive edge operation.				
	Standee Line & Warning				
2	On vehicles designed to allow standees, check the condition of the standee line and sign. The line must be of contrasting color at least two inches wide and the sign, prohibiting anyone from occupying a space forward of the line, must be posted at or near the front of the vehicle.				
3	Flooring/ Steps/ All Interior Panels Inspect floor covering for tears, rips, or gouges. Inspect headliner for damage, sag, or dirt. Inspect the condition of side panels. Check steps for yellow edge or nosing to pronounce presence of steps.				
4	Wheelchair Belts/ Floor Anchors Check wheelchair seat belt lap extensions and wheelchair shoulder harnesses for proper function. Inspect wheelchair securement devices for damaged webbing and proper operation of locking mechanism. Inspect floor tie down anchors. Ensure the vehicle is equipped with the proper amount of securement devices for the number of wheelchair positions.				
5	Passenger Seat Condition/ Foldaway Seat Operation  Seat covering for the driver and passenger seats should be inspected for rips, tears, gouges, exposed springs, and security of floor mounting. Arm rest(s) should be inspected for proper attachment to seat(s). Check folding seats for proper operation of adjustment controls. Check the driver's seat for proper fore and aft movement and tracks should be lubricated as necessary.				
6	Passenger Seat Belts Seat belts should be inspected for proper retraction mechanisms and damaged webbing.				
7	Stanchions & Hand Rails Inspect condition of the grab rails and stanchions for the standee passengers. Tighten grab rails as necessary. Note if extensive repairs are necessary.				
8	Roof Hatches/ Operation  Check roof hatches to ensure proper function and that they shut and open properly.				
	Emergency Door and Window Operation				
9	Check emergency door operation to ensure proper function. Check window exits to ensure all exits function properly. Ensure that all emergency exit signage is clear and legible.				

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Item #	Component
	Fire Extinguisher/ First Aid Kit/ Emergency Triangles/ Spill Kit
10	Inspect the above mentioned safety equipment to ensure it is in proper working order, securely mounted, and easily accessible. Fire extinguisher must be fully charged with a dry chemical or carbon dioxide, having at least a 1A:BC rating and bearing the label Underwriters Laboratory Inc.  Check maintenance tag for expiration date and condition of all components for damage or conditions that may prevent operation. Nozzle outlets must be unobstructed and properly aimed.
	Fire Suppression System
11	If equipped with fire suppression system check "System OK" LED is illuminated. Check that system is properly charged and that all instruction labels are intact, clean, and legible. Ensure inspection tag for expiration date. Check the condition of all components for damage or conditions that may prevent operation. Nozzle outlets must be unobstructed, properly aimed, and must have their protective covers.  Follow the fire suppression system manufacturer's guidelines for servicing the system.
	Interior Lights
12	Inspect the interior lights. Check step well lights if applicable for proper function by opening door. Check dome light switch/rheostat. Check turn signal and the hi-lo beam switches as well as the indicators on dash for proper function.  Check all emergency exit lights at emergency windows and rear exit door.
	Vehicle Registration/ Plates
13	Check condition and currency of license plate and registration and appropriate manuals.  Ensure accident report forms and other appropriate documents are up to date and available in the vehicle. Check for wheelchair lift operating manual, if applicable.
Drive	rs Compartment
14	Brake & Accelerator Pedals  Check pedals for sticking, binding, or failure to return to normal position. Check pedals for excessive pad wear.
	Driver's Seat & Belt
15	Check the driver's seat for proper fore and aft movement, and tracks should be lubricated as necessary. Check the driver's seat belt for proper retraction mechanisms and damaged webbing.
	Horn Operation
16	Check horn. The horn must be capable of emitting a sound audible under normal conditions from a distance of not less than 200 feet.
	Service Brake Operation
17	From the driver's seat, pump the brake pedal three or four times and then hold constant downward pressure on pedal for at least five seconds. The brake pedal should hold firm and not drift down. If equipped with a hydraulic brake reserve system, with the key off, depress the brake pedal and listen for the sound of the reserve system electric motor. If equipped with hydro boost system or vacuum assist system, with the key off, pump the brake at least five times and depress the brake pedal. It should feel firm. Remain holding the pedal and start the engine. The pedal should move slightly to the floor and then rise. Check that the warning buzzer or light is off.



### Table 3: "A" Level Inspection Components (cont.)

Item #	Component
18	Ignition System (Start Engine)  When starting the engine, listen for starter drag or grind, belt squeal, and any other unusual noises. As engine warms, monitor all gauges. Check shift selector for smooth operation and can be shifted into all ranges.
19	Check All Gauges/ Switches  Activate ignition switch and check all warning indicator lights (oil, battery, engine, etc.) for proper operation. If the vehicle is equipped with gauges, check proper readings after the engine has been started. Check all switches, levers, and knobs for proper function.
20	Check Fast Idle Check fast idle system for proper operation.
21	Check Air System Pressures/ Perform Leak Down Test  Drain all air tanks and check operation of system drier. Build air system to maximum air pressure and observe governor cut out (100- 125 psi). Shut off engine and chock wheels if necessary. Release emergency brake and make a full brake application and hold for one minute. Check air gauge to see if pressure drops more than three pounds in one minute. Next, rapidly pump the foot brake. Buzzer should activate before air pressure drops below 60 psi. Continue to pump brakes until emergency brake pops up. This should occur at approximately 40 psi. The amount of time it takes to build the air pressure is important. Air pressure should go from 85psi to 100psi in 40 seconds.
22	Shift Lever Operation  Move the shift lever into each gear and ensure the detents are operating correctly.
23	Parking Brake Operation  While the vehicle is on an incline, apply the parking brake and shift vehicle into low gear slightly pulling against the brakes. Vehicle should not move. If the vehicle cannot be checked on an incline, lightly accelerate the vehicle while the parking brake is applied. Again, the vehicle should not move. Parking brake should be adjusted to hold the vehicle in all terrains.
24	Back-Up Alarm  While depressing the brakes shift the vehicle into reverse and check the audible back-up alarm.
25	Driver's & Panel Lamps Inspect the interior lights. Check step well lights if applicable for proper function by opening door. Check dome light switch/rheostat. Check turn signal and the hi-lo beam switches as well as the indicators on dash for proper function.  Check all emergency exit lights at emergency windows and rear exit door. Check all dash and gauge lights for proper operation.
26	Interior Mirrors/ Sun Visor  Check inside rear view mirror(s) for proper mounting, adjustment, and condition of the glass.  Also check the right and left exterior mirrors for adequate field of vision. Check sun visor.

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	3: "A" Level Inspection Components (cont.)
Item #	Component
27	<u>Windshield Wipers &amp; Washers</u> Inspect windshield for cracks, scratches, and any visible damage. Operate windshield wipers through all ranges on wet glass. Check washer fluid level.
28	Climate Control System/ Fans  Operate and check heater and air conditioning controls through all selector ranges and check varying fan speed for proper function. Check rear unit output as applicable.
29	Fare Collection System  If equipped, ensure fare collection equipment is securely mounted and operating properly.
30	Cleanliness Check the general cleanliness of the vehicle interior.
	Exterior Inspection
31	Check for Damage/ Corrosion/ Bumpers & Mounts/ Decals
	Inspect exterior of vehicle for signs of body damage, missing trim, decals, paint condition, and any signs of developing rust. Check front and rear bumpers. Inspect for loose, damaged or missing hardware. Note and repair any significant damage. Inspect the outside of all windows for cracks, blemishes, or other damage. Inspect mirror brackets for secure mounting or rusting. Check mirrors for broken/fading glass.
32	Condition of All Glass Inspect the outside of all windows for cracks, blemishes, or other damage.
33	Wiper Blades & Arms Inspect condition of windshield wiper blades and arms. Replace if needed.
34	Exterior Mirrors Inspect mirror brackets for secure mounting or rusting. Check mirrors for broken/fading glass.
35	Check Light Lenses & Reflectors  Check the condition of the exterior light lenses and reflectors.
36	Check Operation of All Lights  Outside assistance may be required when making this check. Check parking, low and hi beam headlights, turn signal operation front and rear, and hazard flashers. Turn on all outside clearance lights and check operation. At this time also check license plate lights, back-up lights, brake lights, decal lights. All lighting must comply with the minimum requirements set for the in Florida Statutes 316.220, 316.221, 316.224, 316.225, 316.226, 316.234, and 316.235.



	3: "A" Level Inspection Components (cont.)
ltem #	Component
	-
37	Condensor Fan Operation
	Visually inspect fan blades for cracks, bends and proper clearance from shroud or screen.
	Check for debris. Turn on the air conditioning system and check fan operation. Listen for
	any unusual noises.
38	All Access Doors/ Engine Cover & Latch Operation
	Inspect exterior access doors and lubricate hinges or spring latches as necessary. Check
	hood latch and lubricate. Check hood retainer bar.
39	Tire Damage & Wear
	Inspect all tires for signs of uneven wear due to imbalance or improper front end
	alignment, check for exposed cord or steel belts, inspect valve cores, and check
	sidewalls for scrubbing or damage. Determine tread depth using tread depth gauge.
	Tread group pattern depth shall not be any less than 4/32 (1/8) inch, measured at any
	point on a major tread groove for tires on the steering axle and no less than 2/32 (1/16)
	inch measured at any point on a major tread groove for all other tires. Check air
	pressure in all tires including spare using tire air gauge. Check condition of spare tire and
	mounting.
	Check tires for cuts, nails, or other embedded foreign objects. Check all wheels, including spare, for any damage, welds, or improper bead seating of tire. Check for missing
	balance weights. Check hubcaps for secure mounting.
	balance weights. Check hubcaps for secure mounting.
40	Check Wheels/ Lug Nuts/ Valve Stems
	Check wheel lugs for proper torque. Inspect rims for any signs of damage or cracks.
	Check for any missing lug nuts.
41	Fuel Cap and Door
	Check fuel cap for proper fit and any signs of damage to fuel servicing piping/hoses.
42	Leveling
	Check vehicle for proper leveling.
	Engine Compartment
43	Clean Batteries and Terminal Ends/ Check Electrolyte Level
	Check battery mounting tray condition for corrosion and wear. Check battery case for
	cracking or damage. Check post and fasteners for corrosion – clean and cover with
	protectant. If applicable check and service water levels. If equipped with a maintenance
44	free battery, check "green" indicator.
44	Check Battery Hold Downs/ Cables/ Ground Straps Check battery hold downs/ Check cables for fraving or signs of deterioration. Check
	Check battery hold downs. Check cables for fraying or signs of deterioration. Check
45	battery slide out tray for proper function.  Record Voltage Output
43	Record battery output voltage.
46	Check Belts/ Tensioners & Hoses/ Air Compressor Mounting
40	Inspect all belts for signs of wear, fraying, cracks, glazing, and proper tension. Inspect
	heater hoses and connections. Check air compressor mounting for alignment, milloose bolts and bracket fractures and/or breaks.



Component
Component
Check All Fluids Check transmission fluid level with the fluid warm and the engine running. Check color of fluid for any signs of overheating. Also check the fluid levels for engine oil, engine coolant, power steering fluid, brake fluid and windshield washer fluid.
Inspect for Leaks Inspect all lines, hoses and reservoirs for signs of leakage. Check engine, transmission, differential and all engine accessories for signs of leaks around gaskets, seals, drain plugs, etc. Repair as necessary.
Check Radiator Core/ Mounts Inspect radiator cap for signs of leaks or pressure loss. Before removing the cap allow the engine to cool down. Relieve any built-up pressure in the system. Remove and inspect the radiator cap. At this time, the radiator cores and the interior of the radiator housing may be visually inspected for corrosion or clogging. Also, if circulation problems are suspected, operation of the water pump and circulation of the coolant may be verified with the engine running.
Check Wiring for Routing/ Chafing & Loose Connections Inspect wiring for signs of chafing, corrosion, loss of insulation and crimping. Ensure wiring does not come in contact with moving parts or heated surfaces.
Check Engine Mounts Check for any signs of loose hardware or deterioration.
Replace Engine Oil & Filter  Change oil according to manufacturer's specifications either under the normal or severe duty operating conditions. The information listed below defines which schedule you need to follow for each vehicle.
<ul> <li>If operating under every day driving conditions, use the recommendations for normal operating conditions.</li> </ul>
<ul> <li>If operating under the following conditions listed below, use the recommendations for severe operating conditions:         <ul> <li>Making frequent short trips (less than five miles)</li> <li>Driving in hot weather stop-and-go traffic</li> <li>Driving at sustained high speeds during hot weather</li> <li>Driving in areas with heavy dust (gravel roads, construction zones, etc.)</li> <li>Making frequent short trips (less than 10 miles) when temperatures are below freezing</li> <li>Extensive idling and/or low speed driving for long periods of time (taxi, police, door-to-door delivery, etc.)</li> </ul> </li> <li>Towing a trailer</li> </ul>
Check Air Filter  Remove air filter and inspect. Inspect air intake hoses and clamps. Visually inspect all vacuum hoses and connections. Replace air filter as needed.



### Table 3: "A" Level Inspection Components (cont.)

Item	
#	Component
55	Check Fuel Filter
	Check and/or replace fuel filter. Inspect fuel lines for leaks or damage.
56	Check/ Clean A/C Filters & Cores/ Lines for Routing/ Chafing
	Remove filters and clean or replace, if equipped. Inspect lines for any signs of leaks or chafing. Clean condenser and evaporator fins of any debris.
57	A/C Compressor Mounting/ Clutch
	Inspect compressor for any loose or missing hardware. Check pulley alignment and
	correct if needed. Ensure all wiring is securely routed.

### Chassis/Drive Line

#### 61 Check Ball Joints

Inspect all ball joints according to manufacturer's recommendations. Lubricate after inspection. Check king pins if applicable.

Due to varying road conditions, vehicle type, age of vehicle, and type ofjoint, it is recommended that you check the ball joints on every "A" inspection or if any of the following symptoms are observed:

- · Front wheel shimmy at low speed
- Steering wander
- Clunking noises from the front suspension
- Camber wear on the tires

Note: Most original equipment ball joints today are designed to provide many miles of durability. Many never make it that far for a variety of reasons. One is wear. The constant friction created by turning and driving creates friction between the ball stud and bearing. The rougher the roads and the heavier the vehicle, the faster the rate of wear will occur. Wear can be further accelerated by contamination and/or lack of lubrication. With a greaseable joint, lubing the chassis periodically is necessary to maintain a layer of grease within the joint. Lubing the joint also helps flush out the old grease and contaminants, which

extends the service life of the joint. Most OEM ball joints today as well as some aftermarket replacement joints are "sealed for life" and have no grease fittings. Load carrying ball joints do tend to wear at a faster rate than their unloaded counterparts because of the weight they carry. That's why the lower ball joints on an SLA (short long arm) suspension typically wear out before the upper joints.

#### 62 Steering Gear/ Linkage & Arms

Check steering column for any absence or looseness of U-bolts or positioning parts; worn, faulty, or any welded universal joints. Check steering wheel broken spokes or cracks and for securement.

Check steering box for any mounting bolts loose or missing, any cracks in gear box or mounting brackets. Check for any looseness of the pitman arm on the steering gear output shaft. Check for leaks.



	5. A Lever hispection components (cont.)
ltem	
#	Component
63	Steering Shaft & Free Play Check for any motion, other than rotational, between any linkage member and its attachment point. Check for loose clamps or clamp bolt on tie rod or drag link. Check for linkage components that are not secured with proper pins or devices. Check for any looseness in any threaded joint.
64	<u>Lube Chassis</u> Lubricate all steering and suspension zirk fittings.
66	Check Differential Oil Level/ Clean Breather/ Check Axle Seals  Check for proper level. Ensure breather is clean. Check seals for any signs of leakage.  Ensure all hardware is secure.
72	Check Exhaust System for Mounting/ Leaks/ Restriction Check the exhaust system for mounting, routing, leaks and restrictions.
Whee	lchair Lift Inspection
75	Lift Manufacturer Tag/ Month & Year Manufactured/ State of FL Certificate Check that each wheelchair lift or ramp are legibly and permanently marked by the manufacturer or installer with the following information:  The manufacturer's name and address The month and year of manufacture
	A certificate that the wheelchair lift or ramp securement devices, and their installation, conform to State of Florida requirements applicable to accessible buses.
76	<u>Check Lift Wiring for Routing/ Chafing &amp; Loose Connections</u> Inspect all lift wiring for proper routing. Inspect pendant cord for any damage.
77	Check Lift for Damage/ Inspect Lift Anchor Bolts Inspect lift towers for proper alignment. Ensure lift mounting hardware is secure.
78	Cycle Lift – Check all Safety Systems Including Barriers  Cycle lift from stow position to floor level and check outboard roll stop barrier for proper latching. Continue to lower lift to ground level and check for any leaking, damaged, missing parts, and for smooth operation. Raise lift from ground level. With platform slightly off ground make certain the outboard roll stop barrier raises and it is latched securely. This must be performed by visually inspecting the latching mechanism to ensure it is in the correct locked position and by physically attempting to pull/push barrier down with an adequate amount of force to make certain the barrier is secured. Continue to raise lift to floor level and check for any unusual noises or abnormal operation. Stand on lift platform or place at least 50 pounds of weight on platform and attempt to stow lift. Lift should not fold in. Remove weight and stow lift. Due to varying lift configurations refer to your lifts Owner's Manual for a list of warning lights and audible alarms to ensure all of these safety warning devices are working properly.
79	Record Lift Cycle Count  Document the lift cycle count on your preventative maintenance inspection form.
80	Check for Hydraulic Leaks/ Level Inspect cylinders, hoses, pump and reservoir for any signs of leaks. Check for proper fluid level.
81	Clean, Lubricate & Adjust Lift As Needed Check lift padding and labels. Check lift manual operation and instruction label. Lubricate appropriate lube points. (see illustrations at the end of this section) Refer to original owner's manual for lift adjustments if necessary.



Tubic	5. A Level inspection components (cont.)
Item #	Component
Tire Tr	ead Depth/Inflation
87	L/ Front Record the tread depth for the left front tire.
88	Record the tread depth for the right front tire.
89	R/R Inside  Record the tread depth for the right rear inside tire, if applicable.
90	Record the tread depth for the right rear outside tire.
91	L/R Inside  Record the tread depth for the left rear inside tire, if applicable.
92	L/R Outside  Record the tread depth for the left rear outside tire.
93	L/Front  Record the air pressure for the left front tire.
94	R/ Front Record the air pressure for the right front tire.
95	Record the air pressure for the right rear inside tire, if applicable.
96	Record the air pressure for the right rear outside tire.
97	L/R Inside  Record the air pressure for the left rear inside tire, if applicable.
98	L/R Outside  Record the air pressure for the left rear outside tire, if applicable.



### Table 4: "B" Level Inspection Components

Remember, during a "B" level inspection, all "A" level components must also be checked.

Itom	
Item #	Component
Chass	sis/Drive Line
59	Shocks/ Springs/ MOR/ryde
	Inspect shock absorber cylinders for signs of leakage. Check bushings for signs of wear and the
	mounting brackets for secure mounting. Inspect coil and/or leaf springs for signs of damage or
	wear. Check MOR/ryde shear springs if equipped. If equipped with air springs check for leaks,
	cracks and dry rotting.
60	Torque Rods
	Inspect for any damaged or missing bushings. Ensure all hardware is intact and secure.
65	Check Drive Shaft & U-Joints
	Check the driveshaft chock wheels if needed and place transmission in neutral. Grasp either
	side of the u-joint and rotate it back and forth while
	watching and feeling for any play between the cross and the yoke. If the cross moves inside
	the yoke, replacement of the u-joint is warranted. Check slip joint for play.
	On vehicles with two piece drive shafts, check center support bearing for excessive
	compression of the rubber insulator. Inspect the center support bearing by rotating the inner
	race while holding the outer race. Replace if there is evidence of roughness or wear.
	Lubricate driveline u-joints and slip yoke.
70	Check Brakes (Pull Wheels)
	Remove wheels and inspect all brake pads/linings for wear.
71	Air Tank Mounting/Lines and Valves
	Check air tank(s), lines and valves for secure mounting. Look for any loose or missing hardware.
	Check for leaks.
73	Underbody/ Mounts & Frames
	Inspect underbody mounts and frame for proper securement. Look for any loose or missing
	hardware, bushing deterioration, cracks, etc.
74	Fuel Tank Mounting & Fuel Leaks
	Check fuel tank for secure attachment to vehicle by inspecting for loose, broken or missing
	mounting bolts or brackets (some fuel tanks use springs or rubber bushings to permit
	movement).
	Check fuel system for any visible leak at any point.
Brake	Inspection
82	Brake Foundation/ Lines/ Rotors/ Drums
02	Check rotors/drums for wear, scoring, and warping. Check calipers/cylinders and brake lines for
	signs of wear, chafing or leaks. Check for any dirt or grease accumulation on the brake system.
83	L/ Front % Worn
	Record the wear observed on the left front brake.
84	R/ Front % Worn
	Record the wear observed on the right front brake.
85	L/ Rear % Worn
	Record the wear observed on the left rear brake.
86	R/ Rear % Worn
	Record the wear observed on the right rear brake.
	-



Table 4: "B" Level Inspection Components (cont.)

Item #	Component	
Test	Test Drive	
99	Check Engine Performance Start engine and check for any unusual noises. Check exhaust stream for any unusual color, odor or sound. Check for any active or inactive fault codes and if the engine has any outstanding Technical Service Bulletins from manufacturer. During operational test drive, check for smoothness of acceleration.	
100	<u>Check Shift Points</u> During operational test drive, check operation and position of shift lever and indicator.  Check operation in each gear. Check shift points through all gear ranges in drive position.	
101	Steering  During operational test drive, check the centering of the steering wheel and the smoothness of turns. Also check for looseness in steering wheel.	
102	<u>Suspension</u> During operational test drive, check for proper tracking of the vehicle, balance of tires, and front end alignment.	
103	Brakes Check for smooth pedal operation during braking. Check for any pulling, vibrating or shaking while braking. Check for any unusual noises such as grinding or squealing coming from wheels.	
104	<u>Speedometer</u> During operational test drive, check operation of speedometer.	

### "C" Level Inspection -

**Annual Inspections** will be noted during "C" Level Inspections by circling the "Annual" Inspection type on the Preventive Maintenance Inspection Report. These annual inspections are required annually for each bus.



### Table 5: "C" Level Inspection Components

Remember, during a "C" level inspection, all "A" and "B" level components must also be checked.

Item	
#	Component
Engine	- Compartment
49	Test Anti-Freeze Protection
	Test antifreeze for proper protection level using the correct testing equipment. The protection
	should be at least -34 degrees which represents a 50/50 mixture of water and antifreeze. More
	protection may be desired depending on your specific climate region. Coolant should appear
	clean and translucent.
	Add, change or flush coolant as necessary to provide adequate protection.
58	A/C Pressure Check  Each spring, prior to the season for constant air conditioning use, the air conditioning system
	should be scheduled for a thorough operational check. The system should be checked with the
	appropriate air conditioning service equipment and gauges. Check the entire system for leaks.
	Note: The Freon level should be checked and serviced as necessary.
	If the system is to be serviced with the opening of a closed system, the complete system should
	be evacuated; the receiver dryer replaced and the system must be completely recharged,
	including refrigerant oil.
	Note: All air conditioning work involving opening the system for repair and recharging must
	be performed by a licensed certified technician.
Chass	s/Drive Line
69	Check Front Wheel Bearings
	Remove and inspect front wheel bearings, clean and lubricate or replace if necessary.
OEM	Recommended Intervals
67	Drain & Refill Differential
	Drain and refill differential fluid according to the vehicle's OEM recommended interval. Invoices
	or work orders documenting this must be placed in the vehicle's history file.
68	Replace Transmission Fluid/ Filter
	Remove transmission pan and drain fluid according to the vehicle's OEM recommended
	interval. If the transmission torque converter is equipped with a drain plug, drain fluid from it
	as well. Inspect debris in the bottom of pan for signs of internal transmission damage. Check
	the color of fluid for signs of overheating. Remove and replace filter screen. Note any
	abnormalities on the check off sheet. Invoices or work orders documenting this must be placed
	in the vehicle's history file.

### 105. <u>\*Video System – if equipped</u>

Ensure system is in working order. This inspection is performed by the Transit Manager or Transit Assistant and noted as part of the Annual Inspection.



#### **OEM Recommendations**

All vehicles contain an OEM (Original Equipment Manufacturer) manual where specific vehicle components are recommended for inspection or maintenance service. These OEM recommendations must be performed within the designated mileage intervals provided in the OEM manual in order for the vehicle to remain under active warranty status.

The Preventative Maintenance Inspection Report form identifies these vehicle component items that are typically inspected or serviced using OEM recommended intervals. Agencies must list in their maintenance plan each OEM recommended vehicle component and target mileage interval that will be used.

The inspection or service of these items must be clearly documented on a work order or invoice and filed in the vehicle's maintenance history file. The work order or invoice must state the date and vehicle mileage (odometer reading) at the time of the inspection or service to ensure it was conducted within the recommended mileage interval stated in the OEM manual.

The remaining vehicle components listed in the FDOT Preventative Maintenance Standards Manual that do not have OEM manufacturer recommended target mileage intervals must continue to be inspected using the intervals and methods described in the FDOT Preventative Maintenance Standards Manual.

### Oil Changes

Agencies should choose a target mileage for conducting oil changes that meets or exceeds OEM manufacturer recommendations. Agencies are encouraged to perform oil changes during the vehicle's preventative maintenance inspection as this is the most efficient way of reducing vehicle downtime.

Many people are taught that vehicles must receive oil changes every 3,000 miles or 3 months, as this has become a normal practice for maintaining personal vehicles. However, in most cases where the vehicles do not have high mileages and are not operating under severe conditions, the target oil change interval can easily exceed 3,000 miles. However, the target oil change interval cannot exceed 6,000 miles unless it meets an OEM recommended mileage interval or unless the agency has supporting documentation from an oil analysis program. In these cases, the target mileage interval must be provided in the agency's maintenance plan along with any related documentation, such as oil analysis program data or a copy of the OEM manual recommendation.

If an agency intends to exceed the 6,000 mile oil change interval, the agency must use a systematic approach. At a minimum, the agency must use an oil analysis program to examine wear metals, silica, coolant contamination, and fuel contamination. Wear metals consist of zinc, copper, chromium, tin, and aluminum. Prior to extending the oil change intervals, the agency must pull a minimum of six oil samples for each vehicle using the preventative maintenance inspection interval described in the agency's maintenance plan to establish a baseline on wear metals and silica.

The baseline serves as an average on wear metals and silica – as long as neither are showing unusually high. During the oil sample analysis, at least 75% of the fleet must fall into the same parameters of not showing contamination. Fuel or coolant contamination indicates a problem



that must be addressed immediately. After establishing a baseline on wear metals and silica and provided that oil samples do not show contamination, the agency should extend oil change intervals in 500 mile increments until the agency sees a rise in either silica or wear metals in the oil sample analysis.

If the agency detects a rise in either silica or wear metals, the agency should use the previous interval as the established extended oil change interval. There must be documentation of this process kept on file. The agency must also continue to monitor the oil samples through a regular fluid analysis program since conditions could change that might affect oil contamination, potentially changing the extended oil change intervals. Agencies should seek approval from FDOT before implementing extended oil change intervals.

### **Documenting Preventative Maintenance Inspections**

The FDOT Preventative Maintenance Standards Manual provides a recommended preventative maintenance inspection form titled Preventive Maintenance Inspection Report that uses the ABC progressive inspection method and complies with FDOT's minimum maintenance requirements. A sample of this form is provided as Figure 3 on the following page. Agencies may alternately choose to create their own preventative maintenance inspection forms to use. However, the form must include, at a minimum, all items listed on the FDOT-approved form.

Preventative maintenance inspection forms must be thoroughly completed and include basic information about the inspection such as the date and mileage at the time of the inspection. It must also properly identify whether each vehicle component item inspected was found to be ok or deficient. If a safety sensitive item is found to be defective, the vehicle cannot be utilized for service again until the appropriate repairs have been made.

Any repair work conducted as a result of defects identified during the preventative maintenance inspection should be attached to the inspection form. Completed preventative maintenance inspection forms and corresponding work orders should then be filed in the vehicle's history file for the life of the vehicle.

necessary repair should be filed in the vehicle history file along with the corresponding preventative maintenance inspection form that showed the defect.



### **Repairing Defects**

When defects are found during preventative maintenance inspections, they must be documented on the preventative maintenance inspection form as being defective. All safety defects found during the preventative maintenance inspections must be repaired before the vehicle resumes transportation service. Again, FDOT has determined that the following vehicle components are considered to be safety sensitive items:

- Steering System
- Service and Parking Brakes
- Suspension and Undercarriage
- Tires, Wheels and Wheel End Components
- Fuel and Exhaust Systems
- All Lights, Mirrors, Wipers and Warning Devices
- Interlock Systems
- · Interior Controls, Gauges, and Safety Equipment
- Wheelchair Lifts
- Air System
- Emergency Exits (doors, windows, etc.)
- Fire Suppression Systems

All non-safety related defects can be repaired at a later date in cases where agencies need to wait for parts to be ordered or vehicles are needed for transportation service. In these cases, the preventative maintenance inspection that showed the defect should be noted that a repair has been scheduled for repair at a later date. A work order or invoice documenting the necessary repair should be filed in the vehicle history file along with the corresponding preventative maintenance inspection form that showed the defect.



#### "Outsourced" Maintenance Plan Requirements

For agencies who outsource all of their maintenance activities, all maintenance program procedures and practices related to the following elements must be included in your maintenance plan:

- 1. Vehicle history file policies
- 2. Vehicle fleet roster information
- 3. Preventative maintenance inspection practices
- Identification of outsource maintenance providers used and their respective specialties
- 5. Wheelchair lift maintenance activities
- 6. Scheduled maintenance activities
- 7. Pre-trip/post-trip inspection practices
- 8. Accident reporting and resulting maintenance practices
- 9. Road call procedures and practices
- 10. Warranty procedures
- 11. Vehicle cleaning practices
- 12. Information management procedures and practices

**END** 



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/31/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the noticy(les) must have ADDITIONAL INSURED provisions or be endorsed

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#### STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION

#### CERTIFICATE OF COMPLIANCE

for a

# SECTION 5311 SUBRECIPIENT (Certifying compliance with 49 CFR Parts 40, 655)

To Florida Department of Transportation

DATE 2/5/2022	
Section 5311 Subrecipient Information:	FDOT District Office Information:
AGENCY NAME: Marion Senior Serive, Inc.	NAME: FDOT District 5, Modal Development Office
ADDRESS: 1101 SW 20th Court Ocala, FL 34471	ADDRESS: 420 W. Landstreet, Orlando, FL 32824
PHONE: 352-620-3071	PHONE: (321) 319-8174
I, Clayton Murch	, Transportation Director
(Name)	(Title)
hereby certify that Marion Senior Services, Inc. d/b/a Marion T (Name of Subrecepie	
contractor(s) (listing attached hereto) for N/A	and the same of th
	(Name of Subrecepient)
has (have) established and implemented an anti-drug and alco	phol misuse prevention program in accordance with the
provisions of 49 CFR Parts 40 and 655 as amended. I further	certify that the employee training conducted under this part
meets the requirements of 49 CFR Parts 40 and 655 as amen	ded.
	Clarton March
	Signature

Attachment: (Applicable Contractor(s) - Name, Address, Phone #, Contact Person)

Return-to-Duty

Follow-Up

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Return-to-Duty

Follow-Up

TOTAL

## **Substance Abuse Policy**

Zero Tolerance In accordance with USDOT and FTA Regulations

MARIONTRANSIT is dedicated to providing safe, dependable, and economical transportation service to its patrons. MarionTransit employees are a valuable resource and it is our agency's goal to provide a safe, healthy and satisfying working environment, free of the potential dangers posed by a safety-sensitive employee's use of prohibited drugs or misuse of alcohol.

This policy is established to comply with the Federal Transit Administration regulations codified as 49 CFR Part 655, as amended and USDOT regulations codified as 49 CFR Part 40, as amended. *Policy provisions authorized by MarionTransit are italicized and bolded throughout this policy.* All other policy provisions are implemented under the authority of the United States Department of Transportation (USDOT) and the Federal Transit Administration (FTA).

This policy is approved by: J

Jennifer Martinez

Title of approving official:

Executive Director - Marion Senior Services, Inc.

Signature of approving official:

Date signed:

July 22, 2022

Policy effective date:

July 22, 2022



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- 2. Employee Applicability
- USDOT/FTA Prohibited Drugs
- 4. Pre-employment Drug and Alcohol Background Checks
- 5. Pre-employment Testing
- 6. Random Testing
- 7. Reasonable Suspicion Testing
- 8. Post Accident Testing
- 9. Urine Specimen Collections
- 10. Refusal to Submit to USDOT/FTA Required Drug Testing
- 11. Urine Specimen Analysis
- 12. Role of the Medical Review Officer (MRO)
- 13. Consequence for MRO Verified Positive Drug Test
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- 15. Alcohol Prohibition
- 16. Alcohol Testing
- 17. Consequence for USDOT/FTA Alcohol Violation
- 18. Refusal to Submit to USDOT/FTA Required Alcohol Testing
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#### 1. Testing Program Background

The Omnibus Transportation Employee Testing Act of 1991 (OTETA) directed the United States Department of Transportation (USDOT) to promulgate regulations outlining the procedures for transportation workplace drug and alcohol testing. The USDOT regulations titled, "Procedures for Transportation Workplace Drug and Alcohol Testing" are codified as 49 CFR Part 40. The regulations ensure uniform practices for specimen collections, laboratory analysis, medical review, result reporting and the Return-to-Duty process for violating employees. The regulations are applicable to safety-sensitive employees in transportation workplaces throughout the nation (transit, railroad, aviation, commercial drivers, etc.).

The OTETA also directed each transportation administration to craft industry-specific regulations that define which employees are subject to testing, the testing circumstances, policy statement requirements and training requirements, relevant to that industry. Marion Transit is required to comply with both the USDOT regulations described above, as well as the Federal Transit Administration regulations "Prevention of Prohibited Drug Use and Alcohol Misuse in Transit Operations" which are codified as 49 CFR Part 655.

#### 2. Employee Applicability

This policy and the USDOT/FTA testing program apply to all safety-sensitive *MarionTransit* employees. The policy also applies to volunteers who are required to hold a Commercial Drivers License (CDL) and volunteers that receive remuneration in excess of actual expenses accrued while carrying out assigned duties. Adherence to this policy and the USDOT/FTA testing program is a condition of employment in a safety-sensitive position with *MarionTransit*. All employees of *MarionTransit* who perform, or could be called upon to perform, any of the following duties are defined as safety-sensitive employees:

- 1. Operate a public transportation vehicle, while in or out of service
- 2. Control the movement of a public transportation vehicle

The MARIONTRANSIT positions classified as safety-sensitive include:

- Transportation Director
- Transit Manager
- Transportation Trip Manager
- Transit Assistant
- Transportation Office Assistant
- Transportation Accounting Clerk
- Transportation Dispatchers
- Transportation Reservation Clerks
- Transportation Scheduler
- Transit Drivers



#### 3. USDOT/FTA Prohibited Drug Classes

- Amphetamines
- Cocaine
- Marijuana
- Opioids
- Phencyclidine (PCP)

#### 4. Pre-employment Drug and Alcohol Background Checks

In accordance with 49 CFR Part 40.25, *MarionTransit* must make and document good faith efforts to perform drug and alcohol background checks for all applicants applying for a safety-sensitive position and all current employees applying for transfer into a safety-sensitive position. Testing information will be requested from each of the applicant's previous DOT covered employers during the two years prior to the date of application. *MarionTransit* must obtain the applicant's written consent for the release of their drug and alcohol testing information from their previous DOT covered employers to *MarionTransit*. Applicants refusing to provide written consent are prohibited from performing safety-sensitive functions for *MarionTransit*.

Safety-sensitive applicants who have previously violated the USDOT testing program must provide documentation that they have successfully completed the USDOT's Return-to-Duty process with a DOT-qualified Substance Abuse Professional (SAP). Failure to provide satisfactory documentation will exclude the applicant from being hired or transferred into a safety-sensitive position with *MarionTransit*.

#### Pre-Employment Testing

All applicants for safety-sensitive positions shall undergo a pre-employment urine drug test. MARIONTRANSIT must receive an MRO-verified negative drug test result prior to the applicant's first performance of any safety sensitive function, including behind-the-wheel training.

If an applicant's pre-employment urine drug test result is verified as positive, the applicant will be excluded from consideration for employment in a safety-sensitive position with MARIONTRANSIT. The applicant will be provided a list of USDOT-qualified Substance Abuse Professionals.

An employee returning from an extended leave period of 90 consecutive days or more, and whose name was <u>also</u> removed from the random testing pool for 90 days or more, must submit to a pre-employment urine drug test. *MarionTransit* must be in receipt of a negative drug test result prior to the employee resuming any safety-sensitive function.

#### 6. Random Testing

Safety-sensitive employees will be subject to random, unannounced testing. *MarionTransit* will perform random testing in a manner that meets or exceeds the FTA minimum annual testing requirements, as amended. The selection of employees for random testing will be made using a scientifically valid method. All safety-sensitive employees will have an equal chance of being selected each time a random draw is performed. Random alcohol tests will be conducted just



before, during or just after the employee's performance of a safety-sensitive function. Random drug tests may be conducted anytime an employee is on duty, on call for duty or on standby for duty.

Once an employee is notified that they have been selected for a random test, they must proceed immediately to the testing location. Failure to proceed immediately may be deemed a refusal to test.

#### 7. Reasonable Suspicion Testing

All safety-sensitive employees must submit to reasonable suspicion drug and/or alcohol testing when a supervisor or company official trained in detecting signs and symptoms of drug use and alcohol misuse has made specific, contemporaneous, articulable observations concerning an employee's appearance, speech, behavior and/or body odor. Reasonable suspicion testing for alcohol misuse will occur when observations are made just before, during, or just after the employee's performance of a safety-sensitive function. Reasonable suspicion testing for prohibited drugs may be conducted anytime an employee is on duty or on standby for duty and a trained supervisor has made the observations.

#### 8. Post-Accident Testing

<u>Fatal Accidents</u>: Safety-sensitive employees must submit to post-accident drug <u>and</u> alcohol testing following an accident involving a public transportation vehicle that results in the loss of human life. In addition to a surviving operator of the vehicle, any other surviving, safety-sensitive employee whose performance could have contributed to the accident must also be tested.

<u>Non-Fatal Accidents</u>: All safety-sensitive employees whose actions cannot be completely discounted as a contributing factor must submit to post-accident drug and alcohol testing when a non-fatal accident meets one or more of the following thresholds:

- An individual suffers bodily injury and immediately receives medical treatment away from the scene
- One or more vehicles incurs disabling damage that <u>requires</u> the vehicle(s) to be towed away from the accident scene
- If the public transportation vehicle is a rail car, trolley car, trolley bus or vessel and has been removed from service.

MARIONTRANSIT officials will use the best information available at the scene, to determine if a safety-sensitive employee's performance can be completely discounted as a contributing factor to the accident.

Post-accident drug and alcohol tests will be conducted as soon as practicable following the accident. Any safety-sensitive employee involved in an accident must refrain from alcohol use for eight (8) hours following the accident or until the employee undergoes a post-accident alcohol test. Any safety-sensitive employee who leaves the scene of the accident without a justifiable reason or explanation prior to submitting to drug and alcohol testing will be deemed



to have refused the test. However, employees are not prohibited from leaving the scene of an accident to obtain assistance in responding to the accident or to obtain necessary emergency medical care.

#### Urine Specimen Collections

Urine specimen collections will be conducted in accordance with USDOT rule, 49 CFR Part 40, as amended. Collectors will be appropriately trained and qualified to perform urine specimen collections for USDOT covered employers. Urine specimen collectors will use the split-specimen collection method and will afford the donor (employee) the greatest degree of privacy permitted per 49 CFR Part 40, as amended. When an observed collection is required, the observer will be of the same gender as the donor (employee).

#### 10. Refusal to Submit to Urine Drug Testing

The following actions constitute a "refusal to test" in accordance with 49 CFR Part 40, as amended:

- (1) Failure to appear for any test within a reasonable time, as determined by the employer, consistent with applicable DOT agency regulations, after being directed to do so by the employer (pre-employment testing not applicable).
- (2) Failure to remain at the testing site until the testing process is completed (after the process has been started)
- (3) Failure to provide a urine specimen for any drug test required by this part or DOT agency regulations
- (4) In the case of a directly observed or monitored collection in a drug test, fail to permit the observation or monitoring of your provision of a specimen
- (5) Failure to provide a sufficient amount of urine when directed, and it has been determined, through a required medical evaluation, that there was no adequate medical explanation for the failure
- (6) Failure or decline to take an additional drug test the employer or collector has directed you to take
- (7) Failure to undergo a medical examination or evaluation, as directed by the MRO as part of the verification process, or as directed by **MARIONTRANSIT**
- (8) Failure to cooperate with any part of the testing process (e.g., refuse to empty pockets when directed by the collector, behave in a confrontational way that disrupts the collection process, fail to wash hands after being directed to do so by the collector).
- (9) For an observed collection, failure to follow the observer's instructions to raise your clothing above the waist, lower clothing and underpants, and to turn around to permit the observer to determine if you have any type of prosthetic or other device that could be used to interfere with the collection process.
- (10) Possessing or wearing a prosthetic or other device that could be used to interfere with the collection process.
- (11) Admitting to the collector or MRO that you adulterated or substituted the specimen.
- (12) When the MRO verifies your drug test result as adulterated or substituted.

Refusing to submit to a USDOT/FTA required test is a violation of the USDOT/FTA testing



program. Employees are required to be immediately removed from safety-sensitive duty and provided a list of USDOT-qualified Substance Abuse Professionals. *Per MarionTransit authority, violation of the USDOT/FTA testing program will result in termination of employment.* 

#### 11. Urine Specimen Analysis

All specimens will be transported or shipped to a laboratory certified by the Department of Health and Human Services (DHHS). All specimens will be analyzed at the laboratory in accordance with 49 CFR Part 40, as amended. The procedures that will be used to test for the presence of prohibited drugs will protect the employee and the integrity of the drug testing process, safeguard the validity of the test results and ensure that the test results are attributed to the correct employee. Laboratory confirmed drug test results will be released only to a certified Medical Review Officer (MRO) for review and verification.

#### Negative-Dilute Specimens

Upon receipt of an MRO verified negative-dilute drug test result with creatinine levels greater than 5 mg/dl and less than 20 mg/dl, MarionTransit will require applicants and employees to submit to a second urine collection per 49 CFR Part 40.197. The collection of the second specimen will not be conducted using direct observation procedures. The MRO verified result of the second urine drug test will be accepted by MarionTransit as the final result and the test of record. MarionTransit will apply this policy provision uniformly for all pre-employment and random urine drug tests reported by the Medical Review Officer to have creatinine levels greater than 5mg/dl but less than 20mg/dl (negative-dilute results). Once notified that a second collection is required, employees must proceed immediately for testing. An employee's failure to report immediately may be deemed as a refusal to submit to testing, which is a violation of the USDOT/FTA testing program. Per MarionTransit authority, violation of the USDOT/FTA testing program will result in termination of employment.

#### 12. Role of the Medical Review Officer (MRO)

The role of the Medical Review Officer is to review and verify laboratory confirmed test results obtained through a DOT-covered employer's testing program. When a non-negative drug test result is received, the MRO will communicate with the donor (employee) to determine if a legitimate medical explanation exists. When a legally prescribed medication has produced a non-negative result, the MRO will verify the prescription and report the result as "negative" to MARIONTRANSIT. Medical conditions and other information obtained by the MRO during the interview with the donor will be maintained in a confidential manner. However, if the MRO believes that a medication prescribed to the donor may pose a significant safety risk, the MRO will require the donor to contact his/her prescribing physician and request that the physician contact the MRO within 5 business days. The MRO and prescribing physician will consult to determine if the employee's medication use presents a significant safety risk. MarionTransit will be notified by the MRO when the outcome of the consultation results in a determination that the donor's medication use presents a significant safety risk. If the employee's prescribing physician fails to respond, the safety concern will be reported to MARIONTRANSIT without consultation. Based on the MRO recommendation, MarionTransit may deem the employee medically disqualified from performing safety-sensitive functions. The MRO assigned to review



and verify laboratory drug test results for MARIONTRANSIT is:

Dr. Suzanne L. Steele, M.D.
Vault Health
1100 Easton Road, Suite F
Willow Grove, PA 19090
T 800. 732. 3784 / F 215. 396. 5609
www.fssolutions.com / E info@fssolutions.com

#### 13. Consequence for MRO Verified Positive Drug Test

When MarionTransit is notified of an MRO verified positive drug test, or a test refusal due to adulteration or substitution; the violating employee will be immediately removed from safety-sensitive duty and provided a list of DOT-qualified Substance Abuse Professionals. Applicants will be excluded from hire and provided a list of DOT-qualified Substance Abuse Professionals. Per MarionTransit authority, violation of the USDOT/FTA testing program will result in termination of employment.

#### 14. Split Specimen Testing

As an important employee protection, split specimen collection procedures will be used for all USDOT/FTA urine collections. When an employee challenges an MRO verified result, he/she may request that the split specimen (bottle B) be tested at a different DHHS certified laboratory that conducted the test of the primary specimen (bottle A). Instructions for requesting the split specimen test will be provided by the Medical Review Officer during his/her interview with the donor (employee). In accordance with USDOT rule, MarionTransit will ensure that the fee to process the split specimen test is covered, in order for a timely analysis of the split specimen. MarionTransit may seek reimbursement for the cost of the split specimen test.

#### 15. Alcohol Prohibition

Safety-sensitive employees are prohibited from consuming alcohol while performing safety-sensitive functions, within (4) four hours prior to performing a safety sensitive function, or during the hours that they are on call or standby for duty. No safety-sensitive employee shall report for duty or remain on duty while having an alcohol concentration of 0.02 or greater. Safety-sensitive employees must not consume alcohol within eight (8) hours following an accident or until the employee submits to post-accident testing, whichever occurs first.

#### Alcohol Testing

All alcohol screening tests and confirmation tests will be performed in accordance with USDOT rule, 49 CFR Part 40. The procedures that will be used to test for alcohol misuse will protect the employee and the integrity of the testing process, safeguard the validity of the test results, and ensure the test results are attributed to the correct employee.

When an alcohol-screening test indicates a blood alcohol concentration (BAC) of 0.02 or greater, a confirmation test will be performed using an evidential breath-testing device listed on the USDOT/ODAPC webpage as an "Approved Evidential Breath Measurement Device". The confirmed blood alcohol concentration (BAC) result will be transmitted by the technician to MARIONTRANSIT in a confidential manner. A safety-sensitive employee who has a confirmed

blood alcohol concentration (BAC) of 0.02 or greater but less than 0.04 will be removed from safety-sensitive duties for a period of at least (8) eight hours or until test results fall below 0.02.

#### 17. Consequence for a USDOT/FTA Confirmed Alcohol Violation

A safety-sensitive employee who has a confirmed blood alcohol concentration (BAC) of 0.04 or greater has violated the USDOT/FTA testing program and will be removed from safety-sensitive duty and provided a list of DOT-qualified Substance Abuse Professionals. *Per MarionTransit authority, violation of the USDOT/FTA testing program will result in termination of employment.* 

#### 18. Refusal to Submit to Alcohol Testing

The following actions constitute a refusal to submit to an alcohol test:

- (1) Fail to appear for any test within a reasonable time, as determined by the employer, consistent with applicable DOT agency regulations, after being directed to do so by the employer.
- (2) Fail to remain at the testing site until the testing process is complete
- (3) Fail to provide an adequate amount of saliva or breath for any USDOT required alcohol test
- (4) Fail to provide a sufficient breath specimen, and the physician has determined, through a required medical evaluation, that there was no adequate medical explanation for the failure
- (5) Fail to undergo a medical examination or evaluation, as directed by the [Agency]
- (6) Fail to sign the certification at Step 2 of the ATF
- (7) Fail to cooperate with any part of the testing process.

Refusing to submit to a USDOT/FTA required test is a violation of USDOT/FTA testing program. Employees must be immediately removed from safety-sensitive duty and provided a list of USDOT-qualified Substance Abuse Professionals. Per Marion Transit authority, violation of the USDOT/FTA testing program will result in termination of employment.

#### 19. MARIONTRANSIT Testing Program Contacts

Designated Employer Representative (Drug & Alcohol Program Manager)
Clayton Murch, Transportation Director
1101 SW 20<sup>th</sup> Court, Ocala, FL 34471
352-620-3519
cmurch@marionseniorservices.org

Alternate (back-up) Program Manager
Donna Tackett, Human Resources Director
1101 SW 20<sup>th</sup> Court, Ocala, FL 34471
352-620-3501
dtackett@marionseniorservices.org



The referenced USDOT and FTA regulations, as well informational material related to this testing program are available for review and/or download from the Florida Department of Transportation's Substance Abuse Management Website: <a href="http://sam.cutr.usf.edu">http://sam.cutr.usf.edu</a>. Further information may be obtained from the USDOT's Office of Drug and Alcohol Policy and Compliance website: <a href="https://www.transportation.gov/odapc">https://www.transportation.gov/odapc</a> and the Federal Transit Administration's (FTA) website: <a href="https://transit-safety.fta.dot.gov/DrugAndAlcohol/Default.aspx">https://transit-safety.fta.dot.gov/DrugAndAlcohol/Default.aspx</a>





#### Transportation Disadvantaged Local Coordinating Board (TDLCB) Meeting

Marion County Growth Services Training Room 2710 E. Silver Springs Blvd., Ocala, FL 34470 December 8, 2022 10:00 AM

#### **MINUTES**

#### **Members Present:**

Michelle Stone
Jeffrey Askew (arrived at 10:10am)
Glorybee Perez (Emilio Santiago arrived at 10:13am and attended as an alternate)
Tracey Sapp (Monica DaSilva attended as an alternate)
Susan Hanley
Andrea Melvin
Carressa Hutchinson (arrived at 10:27am)
Keith Fair

#### **Members Not Present:**

Glorybee Perez Lauren Debik Carlos Colon Iris Pozo Anissa Pieriboni Steven Neal Jeff Aboumrad Ronald Graham

#### **Others Present:**

Rob Balmes, TPO Shakayla Irby, TPO Elizabeth Mitchell, TPO Clayton Murch, Marion Senior Services Karen Williams, Marion Senior Services Herman Schulz, Marion Senior Services Ken McKelvy, Marion Senior Services

#### **Item 1. Call to Order and Roll Call**

Chairwoman Michelle Stone called the meeting to order at 10:05am. Secretary Shakayla Irby called the roll and a quorum was present with a special quorum of at least four voting member's present in-person.

Ms. Melvin made a motion to proceed with the special quorum. Mr. Fair seconded, and the motion passed unanimously.

An in-person quorum was met with the arrival of Mr. Askew at 10:10am.

#### **Item 2. Pledge of Allegiance**

Chairwoman Stone led the board members in the Pledge of Allegiance.

#### **Item 3. Proof of Publication**

Secretary Shakayla Irby stated that the meeting had been published December 1, 2022 online on the TPO website and Facebook and Twitter pages, the City of Ocala, Belleview, and Dunnellon websites. The meeting was also published to the December 1, 2022 edition of the Ocala Star Banner.

#### **Item 4a. Grievance Procedures**

TPO staff annually reviewed and/or amended the TDLCB Grievance Procedures to assure that all elements of the Grievance Procedures were in alignment with Florida statutes, regulations and codes. The Grievance Procedures serve to guide the TDLCB in satisfying any concerns or issues by any person(s) regarding the services provided by Marion Transit in its role as the Community Transportation Coordinator (CTC).

The Grievance Procedures were provided to the board to review and the board members had no changes at the time.

Ms. Hanley made a motion to accept the Grievance Procedures as presented. Mr. Fair seconded, and the motion passed unanimously.

#### Item 4b. Bylaws

TPO staff annually reviewed and/or amended the TDLCB Bylaws to assure that all elements of the Bylaws are in alignment with Florida statutes, regulations and codes. The Bylaws guide the TDLCB in assisting Marion Transit in its role as Community Transportation

TDLCB Meeting Minutes – December 8, 2022 Approved –

Coordinator (CTC) deliver quality service to the Transportation Disadvantaged (TD) community.

There was noted a phrasing change to the Bylaws in Article VII of the document. The change is listed below:

**Previously read:** Work cooperatively with local Welfare Transition Program (WTP) coalitions established in Chapter 445, FS, to provide assistance in the development of innovative transportation services for WTP participants.

**Changed to read:** Work cooperatively with local workforce development boards established in Chapter 445, to provide assistance in the development of innovative transportation services for participants in the welfare transition program.

The board reviewed the Bylaws and had no additional changes at the time.

Ms. Melvin made a motion to approve the Bylaws as presented. Ms. Hanley seconded, and the motion passed unanimously.

#### Item 4c. Board Elections – Vice Chair

Per the TDLCB Bylaws, a Vice-Chair shall be elected at the last regular meeting of the calendar year. The Officer may be elected by a majority of the present voting members. The term shall be for one full calendar year. The current Vice-Chair was Andrea Melvin, Center for Independent Living.

Mr. Askew made a motion for Ms. Melvin to continue as Vice-Chair. Ms. Hanley seconded, and the motion passed unanimously.

#### <u>Item 4d. Board Elections – Grievance Subcommittee</u>

Ms. Mitchell said that Members of the Grievance Subcommittee would serve on a voluntary basis. Each member of the Grievance Subcommittee would serve at the discretion of the TDLCB.

Grievance Subcommittee members would meet if a grievance was brought before the committee. When a meeting of the Grievance Subcommittee is necessary, the TPO staff would schedule the meeting. Meetings would be held at the time and place as the Grievance Subcommittee would determine.

Members would serve a term of one year, with allowances for multiple terms. The Grievance Subcommittee would elect a Chairperson and Vice-Chairperson. A simple majority would be present in any official action and no voting member would have a vote on an issue that was deemed a conflict of interest.

The board had discussion and agreed that the current four Grievance Subcommittee members would remain: Jeffrey Askew, Steven Neal, Keith Fair, and Anissa Pieriboni.

Ms. Melvin made a motion for the four current Grievance Subcommittee members to remain.

Ms. Hanley seconded, and the motion passed unanimously.

#### **4e. Meeting Schedule for 2023**

It was a requirement that TDLCB members met quarterly, at a minimum. A total of four (4) Transportation Disadvantaged Local Coordinating Board (TDLCB) meetings had been proposed during calendar year 2023 in March, June, September, and December.

Meetings would take place quarterly on the second Thursday of the coordinating month at 10:00 AM except for December which would take place on the first Thursday of the month to accommodate holiday schedules.

The board reviewed and no changes were made to the 2023 meeting schedule.

Mr. Fair made a motion to approve the 2023 meeting schedule. Ms. Melvin seconded, and the motion passed unanimously.

#### **Item 5. Consent Agenda**

Mr. Askew made a motion to approve the Consent Agenda. Ms. Melvin seconded, and the motion passed unanimously.

#### Item 6a. Volunteers for CTC Evaluation

Ms. Mitchell asked for volunteers to assist with the CTC evaluation.

Pursuant to Chapter 427 Florida Statutes 427.015(2), the performance of the Community Transportation Coordinator (CTC) shall be evaluated annually based on the Commission for the Transportation Disadvantaged's (CTD) approved evaluation criteria.

The evaluation would include an analysis of all relevant elements within the operations of Marion Transit Services. Examples include:

- Policies & Procedures
- Vehicle Operations & Maintenance
- Grievance Procedures
- Budget
- Contracts and Contract Management
- Driver Certification & Training
- Performance Standards
- Safety Standards
- Quality Assurance

The evaluation would begin mid-January 2023.

The following board members offered to be a volunteer with the CTC evaluation:

Jeffery Askew Michelle Stone Susan Hanley Andrea Melvin (Brandon Palermo)

#### **6b. 2023 Discussion Topics for Presentations**

Chairwoman Stone opened the floor for board members to offer topics for presentations in the upcoming year board meetings and the following topics were suggested:

- Update from SunTran on new routes and information- Steven Neal
- How affordable housing tied into public transportation- Keith Fair
- Services provided by the Salvation Army
- Veteran Services- Jeffrey Askew
- The Census Updates- Rob Balmes

#### **Item 7. Comments by TDLCB Members**

Emilio Santiago introduced himself to the board and said that he was temporarily filling in on behalf of the Agency for Health Care Administration.

Mr. Fair inquired about the percentage of growth with Marion Transit riders.

Mr. Murch responded that Marion Transit was still feeling the effects of Covid and estimated a growth of 10% for the year.

FAAST Training flyers were provided by Ms. Andrea Melvin with the Center for Independent Living of North Central Florida. *See the flyers on pages 7-8 for reference.* 

#### **Item 8. Comments by TPO Staff**

Mr. Balmes provided a brief update on the Safety Action Plan.

On November 29, 2022, the TPO Board adopted Commitment to Zero: An Action Plan for Safer Streets in Ocala Marion. The final plan and appendices were viewable on the TPO's project page: https://ocalamariontpo.org/safety-plan.

Mr. Balmes said that the participation by TDLCB members throughout the process was greatly appreciated and helped lead to the development of a comprehensive plan document.

Specifically, the feedback and guidance shared at the June 16, 2022 Workshop helped greatly with the development of safety strategies and emphasis areas. The TPO looked forward to continued work with TDLCB members related to transportation safety in Ocala/Marion County.

#### **Item 10. Comments by CTC**

Mr. Clayton Murch gave the following comments and updates.

- Marion Transit received additional tablets that would allow drivers to utilize Google maps for directions.
- Spot mirrors for the front of the Marion Transit buses would be installed as a safe guard for the non-riding public and riders safer.
- In November 2022, the Marion Senior Services parking lot paving had been completed.
- The roof of Marion Senior Services had been replaced and completed on December 7, 2022.
- All the Marion Transit drivers had completed Defensive Driving Courses with part of the course being Commentary Drives to help drivers identify obstacles while they are driving.
- During weather events, Marion Transit partnered with the Emergency operations Center (EOC) to help with evacuations to and from shelters.
- Ridership had exceeded the 2020 Covid numbers.
- Marion Transit increased wages in August 2022 from \$13 to \$15 and that enabled Marion Transit to attract a better caliber of drivers and they were in a good place with staffing.

#### **Item 11. Public Comment**

There was no public comment.

#### **Item 12. Adjournment**

Respectfully Submitted By:
Shakayla Irby, TPO Administrative Assistant





In collaboration with Mobility Express AND Florida Alliance for Assistive Services and Technology The Center for Independent Living presents:

# **Mobility Express Presentation**

This training will cover information and equipment that helps accommodate for lift chairs, power chairs, vehicle modifications, and more!

January 17, 2023, 9:30am to 10:30am Please call to reserve a seat, space is limited!



The Center for Independent Living 2760 SE 17th Street, Suite 300 Ocala, FL 34471 (352) 368-3788



In collaboration with Thera-mate AND Florida Alliance for Assistive Services and Technology

The Center for Independent Living presents:



This virtual training will cover Thera-Mate Pro, which helps those with limited mobility better take care of their health and personal hygiene

Monday, December 19th, 2022 at 10:00 am Zoom Meeting ID: 870 2708 5029 Passcode: cilncf2022



The Center for Independent Living 2760 SE 17th Street, Suite 300 Ocala, FL 34471 (352) 368-3788



TO: Transportation Disadvantaged Local Coordinating Board

FROM: Ocala Marion TPO

**RE:** Workshop Topics

#### **Summary**

In June we will be having a TD Public Workshop in addition to our regularly scheduled meeting. The Workshop is designed to provide an instructional, educational and/or training environment keeping TD at the forefront.

#### Attachment(s)

None

#### **Action Requested**

We are looking for suggestions as to what the Board is looking for in terms of topics to cover for this workshop and/or areas of interest.

Any additional comments and/or suggestions please contact Liz Mitchell, liz.mitchell@marionfl.org.



**TO:** Transportation Disadvantaged Local Coordinating Board

FROM: Ocala Marion TPO Staff

**RE:** Transportation Disadvantaged Service Analysis

#### **Summary**

The TPO is working in 2023 with Marion Transit (MT) to conduct an analysis of transportation disadvantaged and rural public transportation service. This service analysis is meant to assess modifications to transportation disadvantaged rural services and to meet the growing demand in Marion County. Additionally, impacts from the 2020 Census also are impacting the need for the analysis. An important aspect of this project will involve identifying areas of the County to maximize the use of existing levels of available transit service funding. This project corresponds directly to the implementation of Goal 1 of the Transportation Disadvantaged Service Plan (TDSP): "To provide the best possible transportation service to those in the service area".

As identified in the TDSP managed by the TPO, the Critical Need disadvantaged population in Marion County is estimated to be 24% or 84,900 residents, including 33,200 non-elderly residents. The Critical Need population includes individuals who, due to physical limitations or low income, are unable to transport themselves or purchase transportation and are dependent upon others to obtain access to health care, employment, education, shopping, social activities, and other life-sustaining activities. Over the next five years, the number of Critical Need trips in Marion County is projected to increase by 9.2%. Additionally, Marion County continues to age with residents over 65 now representing about 29% (109,000) the total population.

This project is funded through the Unified Planning Work Program (UPWP) using Federal Transit Administration (FTA) 5305d planning funds. On January 24, 2023, the TPO Board approved the allocation of UPWP funding to conduct this study.

The project will specifically involve a Task Order with the TPO's General Planning Consultant Kimley-Horn and Associates to complete a transportation disadvantaged service analysis on the Census-designated Rural and small Urban areas of Marion County. Included with this memo is an overview presentation and detailed Task Order Scope of Services, outlining the work to be completed.

#### Attachment(s)

- Presentation
- Letter of Support, Marion Transit
- Scope of Services

Any additional comments and/or suggestions please contact Liz Mitchell, <a href="mailto:liz.mitchell@marionfl.org">liz.mitchell@marionfl.org</a>.

# Transportation Disadvantaged Service Analysis

March 9, 2023





- Project to serve the Transportation
   Disadvantaged Local Coordinating Board
   (TDLCB) and Marion Transit
- Collaborative process with Marion Transit
- Specialized, third party services to conduct a Service Area Study Analysis



Implementation of TDSP, Goal 1:

"To provide the best possible transportation service to those in the service area."

Maximize existing funding, services









 Critical Need Disadvantaged Population is 23% or 84,900 residents – 9% Trip Growth 2025

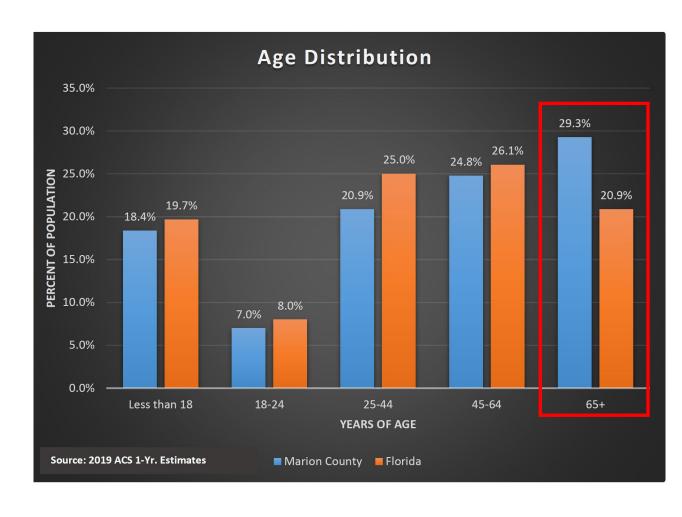
**Table 1.10: Critical Need Transportation Disadvantaged** 

County TD Population by Age	Total Population with Disability by Age	% with a Severe Disability by Age	Total Population with Severe Disability by Age	% of Total Pop with Severe Disability by Age	% of Severe Disability Below Poverty Level	Total Severe Disability Below Poverty Level
<18	4,102	6.10%	1,547	2.30%		
18-64	29,089	15.20%	6,315	3.30%		
Total Non-Elderly	33,192	12.83%	7,862	3.04%	28.60%	2,249
65+	51,657	48.30%	7,700	7.20%		
Total Elderly	51,657	48.30%	7,700	7.20%	11.70%	901
Total	84,849	23.21%	15,563	4.26%		3,150

Source: CUTR, Paratransit Service Demand Estimation Tool. Based on paratransit service operating 277 days annually, accounting for some Saturdays.



 Over 65 is the largest population group in Marion County at 29% or 109,000 residents



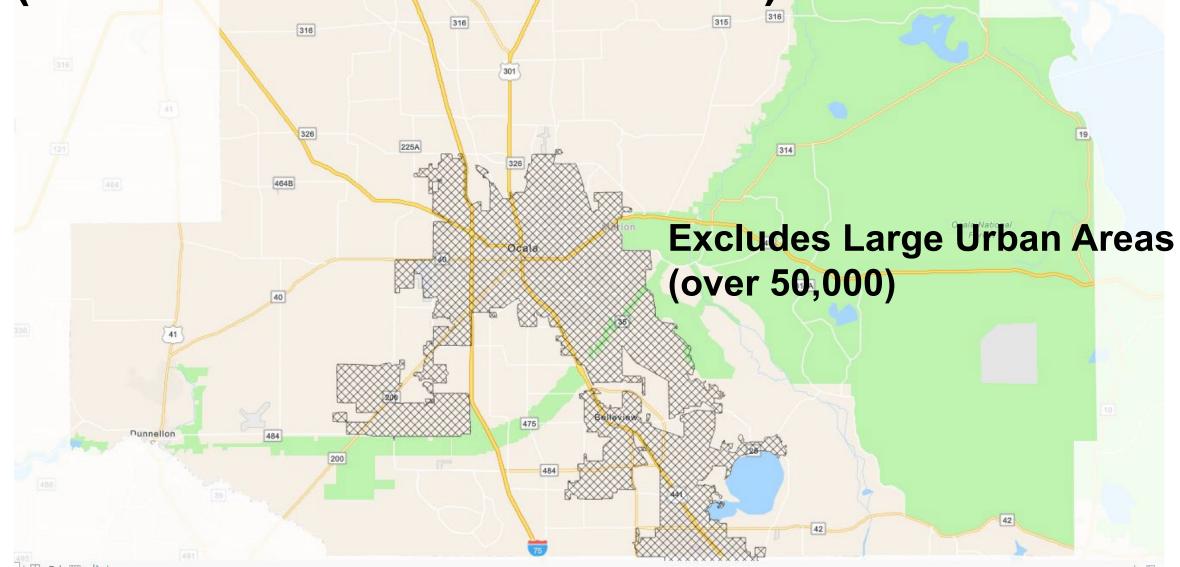


# Changes from the 2020 US Census

- No longer two types of urban areas "Urbanized Area" or "Urban Cluster"
- Now only "Urban" or "Rural"
- Impacts to Marion Transit (5311)



# Study Area – Marion County (Small Urban and Rural Areas)





## Purpose

- Conduct a Service Area Analysis to identify areas of the county/community that may be served or better served by Marion Transit
  - Transportation Disadvantaged, Rural 5311 program
- Maximize existing funding and services to meet the community's needs



## **Tasks**

- 2020 Census Urban Area and Demographic Analysis
  - Identify all target populations
  - Assess Demand and Needs
- Development of Service Options
  - On-Demand, Zone-Based, etc.



## Deliverables

- Feedback, Coordination with TDLCB members and Marion Transit
- Complete a Service Analysis Report
- Presentation to TDLCB at June 8 Meeting



# **Questions, Comments?**



To: Rob Balmes and Liz Mitchell

From: Clayton Murch, Transportation Director Marion Transit

Date: November 17, 2022

Subject: Deviated-Fixed-Route expansion into additional areas of Marion County

I have reviewed the Transit Service Analysis provided by Kimley-Horn. I approve of the scope of the proposal. This analysis should provide valuable insight and enable us to better focus our efforts on service expansion into other areas of Marion County.

As stated previously, we are currently analyzing deviated-fixed-route expansion into the Forest area and potentially the Reddick/Citra area. The thorough analysis of the new census data (referenced in this study) will greatly assist us in determining both the feasibility and the future potential to serve clients in these and/or other areas of the county. If one or both areas are determined to not be the best options for expansion, the analysis will identify in which other areas expanded service would be most advantageous. That fact alone would help to ensure that we are providing expanded services to the locations that need it the most, both now and in the future.

Sincerely,

Transportation Director / Community Transportation Coordinator

Marion Senior Services, Inc. dba Marion Transit



# Ocala Marion County TPO Marion Transit Service Analysis Scope of Services

#### **Introduction**

The Ocala Marion Transportation Planning Organization (TPO) works with Marion Transit (MT) to provide public transportation services throughout Marion County. MT makes use of FTA Section 5311 Program funding to provide public transportation services to areas of the County outside of the Census urbanized area. As the Community Transportation Coordinator (CTC), MT also assumes responsibility for ensuring coordination of local transportation services consistent with the rules defined by the Florida Commission for the Transportation Disadvantaged (FCTD). That responsibility includes provision of doorto-door paratransit services to meet the transportation needs for medical, life-sustaining, educational, work, business, and recreational activities for Marion County's TD population, as well as other recipients in the County.

#### <u>Purpose</u>

The TPO and MT are seeking to reevaluate transportation disadvantaged and rural public transportation service levels based on forthcoming 2020 US Census urbanized area boundaries. The result of that service evaluation is implementation of modified transportation disadvantaged and rural transportation services that meet growing transportation demand in the community. An important aspect of this project is identifying areas and/or communities that will maximize use of the existing levels of available transit service funding. This project corresponds directly to the implementation of Goal 1 of the Transportation Disadvantaged Service Plan (TDSP): "To provide the best possible transportation service to those in the service area".

The following scope of work defines required tasks to be performed by Kimley-Horn to support the TPO and MT staff in completion of this project

#### Scope of Services

#### Task 1: Project Management and TDLCB Coordination

Kimley-Horn will identify a single project lead to coordinate all project activities and actively manage the project schedule. At the onset of the project, Kimley-Horn will prepare for and facilitate a project kick-off meeting with TPO and MT staff. The draft project schedule, major milestones, data collection needs, and other strategic policy and project expectations will be discussed at the kick-off meeting.

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Following the kick-off meeting, Kimley-Horn will schedule monthly project status meetings with the project team. The project status meetings will be conducted as virtual meetings or conference calls and will support the effort to adequately address all project tasks in a timely and efficient manner. These progress meetings will address project progress, work products, upcoming activities, and issues that must be addressed to maintain the project schedule.

In addition to the project kickoff meeting and monthly status meetings, Kimley-Horn will prepare for and lead one presentation to the Marion County Transportation Disadvantaged Local Coordinating Board (TDLCB). The meeting will be focused on sharing results of the service analysis to the TDLCB and gathering input on needs.

#### **Deliverables**

- In-Person Project Kickoff Meeting and site visit
- Monthly Project Status Meetings
- Monthly Progress Reports and Invoicing
- A presentation to the TDLCB upon completion

#### Task 2: 2020 Census Urbanized Area and Demographic Analysis

Kimley-Horn will use the latest ACS 5-year data to conduct a demographic analysis of transit supportive areas in Marion County. Transit supportive populations will include zero-vehicle households, elderly, low-income, and disabled populations. To support that analysis, Kimley-Horn will develop a transit propensity index that will provide a composite scoring and representation of analysis variables in one geographic analysis.

The demographic analysis will focus on areas outside of the revised urbanized area as defined by the 2020 Census. In this way, target populations in rural areas (i.e., outside of the urbanized area) can be identified.

In addition to the review of Census data, Kimley-Horn staff will review TPO population and employment forecasts to identify areas of potential growth.

#### **Deliverables**

- Supporting visual aids (i.e., maps) that delineate the newly defined urban and rural areas within the County
- Demographic analysis map series
- Transit Propensity Index

#### **Task 3: Development of Service Options**

The development of service options will be the product of several resources, including coordination with the MT team, input from the TDLCB, and information compiled through Tasks 1 and 2 of this project. Kimley-Horn will develop a set of proposed service options including the opportunity for on-demand or zone-based services. Kimley-Horn will

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prepare for and facilitate a meeting with TPO and MT staff to discuss the proposed options and how to group them for potential future implementation.

Service options will be defined individually or in groups and will include operational details to support decisions on implementation and prioritization. Operational details will include service hour estimates, fleet and staffing requirements, capital and technology needs, and estimates for both operating and capital costs.

#### **Deliverables**

- Draft Service Options
- Meeting with TPO and MT Transportation Director

#### Task 4: Draft and Final Reports

Kimley-Horn will prepare and submit a draft report to TPO and MT staff. The draft report will summarize activities performed as part of the project and will include details on implementation options. Edits and revisions will be compiled into a final report to be submitted to staff.

#### **Deliverables**

- Draft Service Analysis Report
- Final Service Analysis Report

#### Time of Completion

This project is anticipated to be completed within a 3 to 4-month period. The project timeframe will be contingent on release of updated census data in December 2022. Kimley-Horn staff will develop a project schedule, which will outline the key milestones, dates, and deliverables, for the project after the project Kickoff Meeting.

#### **Project Budget**

The work assignment budget in the attached Table A reflects the lump sum fee estimate for the tasks and specific deliverables outlined in this scope of services. Staff rates are consistent with contract rates included in the Agreement between Kimley-Horn and Marion County for Project RFQ#20Q-121 – General Planning Consultant for TPO dated August 18, 2020 and Modified July 6, 2022.

Invoices will be processed monthly by the Kimley-Horn based on the percent work completed for each task.

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TO: Transportation Disadvantaged Local Coordinating Board

FROM: Ocala Marion TPO Staff

RE: 2020 U.S. Census Update, Urban Areas

#### Summary

The U.S. Census Bureau released the finalized listing of 2020 Urban Areas. According to the U.S. Census, the population of the 2020 Ocala Urban Area is 182,647. Additionally, the other U.S. Census-designated Urban Areas in Marion County include: Marion Oaks with a population of 19,077; Rainbow Springs with a population of 4,667; and Lake Bryant with a population of 3,632. Further information will be shared at the TDLCB meeting, including updates from discussions taking place at the TPO Board.

Attached to this memo is the table listing of the 2020 Urban Areas for Marion County. The source of this information may also be found directly on the Census Bureau's website. <a href="https://www.census.gov/programs-surveys/geography/guidance/geo-areas/urban-rural.html">https://www.census.gov/programs-surveys/geography/guidance/geo-areas/urban-rural.html</a> Census Webpage

https://urban-boundary-functional-class-update-2020-fdot.hub.arcgis.com/ Florida Department of Transportation (FDOT) Census Page

#### Attachment(s)

- 2020 Census Urban Area Listing, Marion County
- 2020 Census Urban Area Maps, Marion County
- 2020 Census FAQ's

Any additional comments and/or suggestions please contact Liz Mitchell, liz.mitchell@marionfl.org.

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64567 Ocala, FL	182,647	83,908	323,814,545	125.03	575,486	0.22	1,460.88
87285 The VillagesLady Lake, FL	161,736	98,242	255,167,012	98.52	10,004,321	3.86	1,641.65
07472 Beverly HillsHomosassa SpringsPine Ridge, FL	96,729	50,309	307,760,295	118.83	9,556,843	3.69	814.03
54739 Marion Oaks, FL	19,077	7,620	42,289,206	16.33	16,200	0.01	1,168.36
73251 Rainbow Springs, FL	4,667	2,540	14,797,799	5.71	69,853	0.03	816.84
46489 Lake Bryant, FL	3,632	2,123	7,753,525	2.99	605,447	0.23	1,213.23

Each Urban Area must encompass 2,000 housing units or at least 5,000 people, measured at Census Block Level

This is a change from 2010 Census of 2,500 people

#### **2020 Census Urban Areas FAQs**

Updated December 2022

#### **Release Schedule**

Q: When will the 2020 Census Urban Areas be announced?

**A:** Release schedule for products:

December 29, 2022:

• Federal Register Notice with list of 2020 Census Urban Areas with their 2020 Census population, housing units, and land area, as well as separate tables of this same information.

#### January 2023:

- 2020 Census Urban Areas Wall Map
- TIGERweb service updated with 2020 Census Urban Areas
- TIGER/Line Shapefiles
- TIGER/Line Geodatabases
- Relationship Files
- Census Geocoder updated with 2020 Census Urban Areas

#### Later in 2023:

- Cartographic Boundary Files May 2023
- Additional maps

#### Federal Register

Q: When were the final 2020 Census Urban Area criteria published in the Federal Register?

**A:** The criteria for defining 2020 Census Urban Areas were published in the *Federal Register* on Thursday, March 24, 2022., Final criteria clarifications will be published in the **2020 Census Qualifying Urban Areas and Final Criteria Clarifications** *Federal Register* Notice on Thursday, December 29, 2022.

Q: Where can I find the Federal Register Notice for the 2020 Census urban area final criteria?

A: https://www.govinfo.gov/content/pkg/FR-2022-03-24/pdf/2022-06180.pdf

**Q:** Where can I find the *Federal Register* Notice containing 2020 Census Urban Area final criteria clarifications?

**A:** https://www.census.gov/programs-surveys/geography/guidance/geo-areas/urban-rural.html

Q: When were the proposed 2020 Census Urban Area criteria published in the Federal Register?

**A:** The proposed 2020 Census Urban Area criteria were published in the *Federal Register* on February 19, 2021.

Q: Where can I find the proposed 2020 Census Urban Area criteria Federal Register Notice?

**A:** https://www.federalregister.gov/documents/2021/02/19/2021-03412/urban-areas-for-the-2020-census-proposed-criteria

#### **Urban Areas Criteria**

**Q:** What is the definition of an urban area?

**A:** Urban areas represent densely developed territory, and encompass residential, commercial, and other nonresidential urban land uses. Each urban area must encompass at least 2,000 housing units or at least 5,000 people. This is a change from the previous minimum of 2,500 people which had been in place since the 1910 Census.

Urban areas are defined primarily based on housing unit density measured at the census block level. Three housing unit densities are applied during the delineation process:

- Initial urban core: at least 425 housing units per square mile. Based on the national average of 2.6 people per occupied housing unit, this density threshold is similar to the 1,000 people per square mile used in 2000 and 2010 when delineating initial urban cores.
- Remainder of urban area: at least 200 housing units per square mile. This is similar to the 500 people per square mile density used for the 2000 and 2010 Censuses, based on the national average of 2.6 people per occupied housing unit.
- At least one high-density nucleus of at least 1,275 housing units per square mile required for qualification. This ensures that each urban area contains a high-density nucleus typical of what one would expect to find within an urban area. In addition to the change in minimum thresholds for qualification and the change to use of housing unit density, the Census Bureau also will no longer distinguish between urbanized areas of 50,000 or more people and urban clusters of less than 50,000 people.

Q: Can you tell us if the population for our urban area is above or below 50,000?

**A:** The population of each 2020 Census Urban Area is in the **2020 Census Qualifying Urban Areas and Final Criteria Clarifications** *Federal Register* Notice published December 29, 2022 and available on the Census Bureau's Urban and Rural website: <a href="https://www.census.gov/programs-surveys/geography/guidance/geo-areas/urban-rural.html">https://www.census.gov/programs-surveys/geography/guidance/geo-areas/urban-rural.html</a>.

**Q:** Why was the change made from the original proposed minimum qualification thresholds of 4,000 housing units or 10,000 people, to the final thresholds of 2,000 housing units or 5,000 people? Was it available for public comment? If so, what were the objections in the public comment?

A: This change was in response to public comment and concerns that the increase from the 2,500-people threshold of the past 110 years (the 2,500-people threshold was adopted in 1910) to 10,000 people or 4,000 housing units was too high and would result in loss of statistical data and loss of statistical comparability for those communities (data will still be available for all incorporated places and census designated places regardless of population size). We have periodically received comments from data users and rural analysts that our 2,500-people threshold was too low, especially when compared to minimum thresholds for urban areas used by other federal agencies. Lowering the threshold to 2,000 housing units or 5,000 people represents a compromise between those concerned about loss of data and those who have expressed concerns that our urban area threshold was too low and out of alignment with thresholds used by other agencies.

**Q:** Why was the originally proposed density of 385 housing units per square mile raised to 425 housing units per square mile?

A: There are three housing unit density thresholds for the final 2020 UA criteria. The change from 385 to 425 resulted from responses to various aspects of the criteria and our research in response to public comments. Some commenters noted that we utilized two population density thresholds (500 and 1,000 people per square mile, or PPSM) in previous decades and expressed concern that sole reliance on the proposed 385 housing units per square mile (HPSM) threshold (which was equivalent to 1,000 PPSM) would result in underbounding of some urban areas, especially when census blocks on the fringe of an urban area contained urban land uses, but had relatively large land areas, resulting in lower densities. Others expressed concern that exclusion of such blocks from an urban area resulted in too many noncontiguous pieces of qualifying urban territory. To address these concerns, we introduced the "lowdensity fill" criterion, which utilizes a 200 HPSM threshold to account for irregularly shaped census blocks on the fringe of an urban area that contain urban development, but because of relatively larger land area, have lower population densities. The "low-density fill" criterion also minimizes the number of noncontiguous UA pieces. Based on continued research and review of settlement patterns, we decided to adopt a higher threshold of 425 HPSM for delineation of initial cores in order to avoid initially extending too far into rural territory and then utilize the lower 200 HPSM threshold to fill in gaps. The third density threshold—1,275 HPSM—is utilized to ensure that each urban area contains at least one densely settled nucleus typical of what one would expect for an urban area.

Q: How will the classification of census blocks as urban or rural differ from 2010?

**A:** There are two main changes to the criteria that affect the classification of blocks as urban or rural. First, we are using census blocks as the only "geographic building block" throughout the entire delineation, whereas for the 2010 Census delineation process census tracts were utilized in the initial stage and then individual census blocks were analyzed and add to the qualifying census tracts. The use of census tracts at the initial stage improved processing of data, but led to the inclusion of some territory with typically rural land uses; that is, the overall population density of the census tract was high

enough to qualify for inclusion in an urban area, with the result that low-density census blocks containing rural land uses were defined as urban. The second change is that we will not be including low-density census blocks that form the hop and jump corridors (resulting in noncontiguous, multi-piece urban areas). Those low-density census block hop and jump connections were included for the 2010 Census as well as in previous decades. Both of these changes will result in blocks no longer qualifying as urban, but will have little impact on the total population/housing unit counts of the urban areas.

**Q:** How will urban area names change for the 2020 Census, will additional names be added on to the 2010 Urban Area names?

**A:** A number of 2020 Census Urban Areas have additional place names added because of the inclusion of housing unit counts as the secondary naming criteria. This was designed to provide more accurate naming in seasonal communities such as beach towns and mountain resorts, and more accurately reflect the known names of the urban areas overall. In most cases the primary name stayed the same as that from 2010, but there are cases where additional names were added for 2020.

Q: Why does the Census Bureau review and make changes to urban area criteria?

A: Since 1950, when the urbanized area concept was introduced, the Census Bureau has periodically reviewed and revised the criteria for delineating urban areas and introduced conceptual and methodological changes to ensure that the urban-rural classification keeps pace with changes in settlement patterns, development, and with changes in theoretical and practical approaches to interpreting and understanding the definition and extent of urbanization. This assures that the definitions of, and data for, Census Bureau-defined urban areas reflect changes in the nature of settlement as well as the needs of researchers and analysts when conceptualizing and reporting on the urban-rural landscape and urban-rural settlement. Fundamentally, we are delineating boundaries of a concept—urbanization—that can be seen on the landscape and changes over time as new development occurs and density of settlement increases, but also as changes in terms of the way in data users, researchers, and decision-makers perceive and interpret what is "urban" and what is "rural." Periodic review of the urban-rural classification and criteria ensures its continued usefulness and relevance for statistical data tabulation and analysis, and ensures that the delineation process utilizes the best possible data, procedures, and methodologies.

**Q:** Is it true that the Census Bureau is no longer defining urbanized areas?

**A:** No. The Census Bureau will no longer identify an individual urban area as either an "urbanized area" or an "urban cluster", but we will refer to all qualified areas as "urban areas" regardless of population size. We will publish population and housing counts for each urban area when we announce results of the 2020 Census Urban Area delineation. Data users and programs will be able to use those counts and subsequent American Community Survey estimates to categorize urban areas according to population size.

#### **Urban-Rural Classification**

**Q:** Why does the Census Bureau delineate urban areas?

A: The Census Bureau delineates urban and rural areas for statistical purposes; that is, to tabulate and present data for the urban and rural population, housing, and territory within the United States, Puerto Rico, and the Island Areas. The Census Bureau's urban areas represent densely developed territory and encompass residential, commercial, and other non-residential urban land uses. The Census Bureau's urban and rural classification provides an important baseline for analyzing changes in the distribution and characteristics of urban and rural populations. The Census Bureau's delineation of urban areas also supports the Office of Management and Budget's delineation of metropolitan and micropolitan statistical areas. Urban areas of 50,000 or more people form the urban cores of metropolitan statistical areas; urban areas of at least 10,000 and less than 50,000 people form the urban cores of micropolitan statistical areas.

Q: How does the Census Bureau define "urban" and "rural?"

A: The Census Bureau's urban-rural classification is fundamentally a delineation of geographical areas, identifying both individual urban areas and the rural portion of the nation. The Census Bureau's urban areas represent densely developed territory, and encompass residential, commercial, and other nonresidential urban land uses. For the 2020 Census, an urban area will comprise a densely settled core of census blocks that meet minimum housing unit density requirements, along with adjacent territory containing non-residential urban land uses as well as territory with low population density included to link outlying densely settled territory with the densely settled core. To qualify as an urban area, the territory identified according to criteria must encompass at least 2,000 housing units or at least 5,000 people. "Rural" encompasses all population, housing, and territory not included within any urban area. The specific criteria used to define urban areas for the 2020 Census were published in the Federal Register of March 24, 2022. Final criteria clarifications will be published in the 2020 Census Qualifying Urban Areas and Final Criteria Clarifications Federal Register notice on Thursday, December 29, 2022 as well as separate tables on <a href="https://www.census.gov/programs-surveys/geography/guidance/geo-areas/urban-rural.html">https://www.census.gov/programs-surveys/geography/guidance/geo-areas/urban-rural.html</a>.

Q: Were there changes to the urban area delineation criteria for the 2020 Census?

**A:** Yes. A description of differences between the 2020 Census Urban Area criteria and 2010 Census Urban Area criteria are available on our website. Changes include:

- Raising the minimum threshold for qualification as an urban area to 2,000 housing units or 5,000 people.
- Use of primarily housing unit density instead of population density when delineating urban areas.
- No longer including low-density hop and jump corridor blocks in the urban area (resulting in noncontiguous urban areas).

 Use of Longitudinal Employer-Household Dynamics Origin-Destination Employment Statistics (LODES) commuting data to determine whether to split agglomerations of continuous urban development and if so, where to draw the boundary.

Q: What are hops and jumps?

A: "Hops" and "jumps" provide a means for connecting outlying densely settled territory with the main portion of the urban area. A hop provides a connection from one urban area core to other qualifying urban territory along a road connection of 0.5 miles or less in length; multiple hops may be made along any given road corridor. This criterion recognizes that alternating patterns of residential development and non-residential development are a typical feature of urban landscapes. A jump provides a connection from one urban area core to other qualifying urban territory along a road connection that is greater than 0.5 miles, but less than or equal to 1.5 miles in length; only one jump may be made along any given road connection. The jump concept has been part of the urban area delineation process since the 1950 Census, providing a means for recognizing that urbanization may be offset by intervening areas that have not yet been developed. The Census Bureau changed the maximum jump distance from 1.5 miles to 2.5 miles with the Census 2000 criteria and retained the 2.5-mile distance in the 2010 Census criteria. The Census Bureau returned to the 1.5-mile maximum distance with the 2020 Census criteria.

Q: How often does the Census Bureau update the boundaries of urban areas?

**A:** The Census Bureau reviews and updates urban area boundaries every ten years, following the decennial census. Census blocks provide the "building blocks" for applying housing unit density and other measures and delineating each urban area. The use of housing unit density at the census block level provides the opportunity to update urban areas between decennial censuses based on address/housing unit counts contained in the Census Bureau's Master Address File, which is updated annually. At this time, however, the Census Bureau has not made specific plans to update urban areas between censuses.

**Q:** How do urban areas compare to the Office of Management and Budget's metropolitan and micropolitan statistical areas?

**A:** Urban areas form the urban cores of metropolitan and micropolitan statistical areas, respectively. Each metropolitan statistical area will contain at least one urban area of 50,000 or more people; each micropolitan statistical area will contain at least one urban area of at least 10,000 and less than 50,000 people. Metropolitan and micropolitan statistical areas represent the county-based functional regions associated with urban centers (hence, the generic term "core based statistical areas").

Q: When did the Census Bureau begin defining urban and rural areas?

**A:** The Census Bureau first defined urban places in reports following the 1880 and 1890 Censuses. At that time, the Census Bureau identified as urban any incorporated place that had a minimum population

of either 4,000 or 8,000, depending on the report. The Census Bureau adopted the current minimum population threshold of 2,500 for the 1910 Census; any incorporated place that contained at least 2,500 people within its boundaries was considered urban. All territory outside urban places, regardless of population density, was considered rural. The Census Bureau began identifying densely populated urbanized areas of 50,000 or more population with the 1950 Census, taking into account the increased presence of densely settled suburban development in the vicinity of large cities. Outside urbanized areas, the Census Bureau continued to identify as urban any incorporated place or census designated place of at least 2,500 and less than 50,000 people. The Census Bureau introduced the urban cluster concept for the 2000 Census, replacing urban places located outside urbanized areas. Urban clusters were defined based on the same criteria as urbanized areas, but represented areas containing at least 2,500 and less than 50,000 people. Starting with the 2020 Census, the Census Bureau ceased distinguishing between urbanized areas and urban clusters. "Rural" continues to be defined as any population, housing, or territory outside urban areas.

Q: How has the Census Bureau's urban-rural definition changed over time?

A: From the 1910 Census through the 1940 Census, the Census Bureau defined "urban" as any incorporated place that contained at least 2,500 people within its boundaries. Additional criteria were applied to classify certain New England towns and other areas as urban. This accounted for selected geographic areas that had urban characteristics but were not identified as incorporated places by the Census Bureau. Increasing suburbanization, particularly outside the boundaries of large incorporated places led the Census Bureau to adopt the urbanized area concept for the 1950 Census. At that time, the Census Bureau formally recognized that densely settled communities outside the boundaries of large incorporated municipalities were just as "urban" as the densely settled population inside those boundaries. The Census Bureau adopted a number of changes to the urban area definition and delineation criteria for the 2000 Census, notably, identifying urban clusters of at least 2,500 and less than 50,000 peoples, defined using the same density-based criteria as urbanized areas. The Census Bureau adopted two key changes for the 2020 Census: 1) raising the minimum threshold for qualification as an urban area to at least 2,000 housing units or at least 5,000 people and 2) using primarily housing unit density to identifying qualifying census blocks instead of population density.

**Q:** Who uses the Census Bureau's urban and rural definitions?

A: There are a variety of ways in which the Census Bureau's urban and rural definitions are used:

- Data users and researchers interested in analyzing data for urban and rural population and housing use the Census Bureau urban and rural areas, and data tabulated for those areas.
- Analysts use urban area data to study patterns of urbanization, suburban growth and development, and urban/rural land area change.
- Various federal and state agencies use the Census Bureau's urban and rural definitions as the
  basis for their own urban and rural definitions and settlement classifications for use in
  tabulating and presenting statistical data. The National Center for Education Statistics uses the
  Census Bureau's urban and rural definitions in its locale codes classification. The U.S.
  Department of Agriculture uses the Census Bureau's urban-rural classification as the basis for

- various urban and rural classifications used to analyze and report on demographic and economic patterns in rural areas.
- Other government agencies use the Census Bureau's urban and rural definitions to determine
  program eligibility and in their funding formulas. For example, the Federal Highways
  Administration uses Census Bureau urban areas of 50,000 or more population to establish
  Metropolitan Planning Organizations. For rural health programs, a clinic qualifies as a rural
  health clinic if it is located outside the boundaries of any Census Bureau urban area.

**Q:** Does the Census Bureau allow local governments and other groups to participate in the delineation of urban area boundaries?

A: No. The Census Bureau's urban and rural area definitions provide a baseline for a wide variety of data users, researchers, and analysts; it is important to our statistical data users that we define urban areas in a nationally consistent and objective manner. In addition, although the Census Bureau does not take into account the needs of specific non-statistical programs, we are aware of the potential programmatic advantages or disadvantages deriving from the size of an urban area and urban/rural status. For that reason also, it is important that we define urban areas in an objective manner, applying the same criteria and delineation methodology throughout the United States, Puerto Rico, and the Island Areas. Prior to each decennial census, the Census Bureau publishes in the *Federal Register* proposed criteria for delineating urban areas for public review and comment, in addition to meeting with various data user and stakeholder groups to ensure that the urban area concept and criteria continue to meet users' needs and expectations, while maintaining continuity with previous decades' definitions. The final criteria adopted for application with decennial census and other data to delineate urban areas reflects the comments received through the *Federal Register* comment process.

Q: Is there an appeals process if I disagree with the location of an urban area boundary?

A: The Census Bureau does not have an appeals process for their urban areas. We will work with tribal, federal, state, or local agencies as well as stakeholders, as appropriate, to ensure understanding of our classification and delineation of specific urban areas. The Census Bureau applies published criteria with statistical and other publicly available data to identify a nationally consistent set of urban areas, defined in as objective a manner as possible. Prior to each decennial census, the Census Bureau publishes in the Federal Register proposed criteria for delineating urban areas for public review and comment. The final criteria adopted for application to decennial census and other data to delineate urban areas reflect the comments received through the Federal Register comment process. Because of the numerous and varied use of the Census Bureau's urban-rural classification, many conflicting even within a single community, the specific definitions are not able to be challenged, rather the specific uses of the Census Bureau's urban-rural classification must be challenged to determine if their use is appropriate.

**Q:** How will my area's classification affect my funding?

**A:** Program eligibility and funding formulas are determined by the federal and state agencies making determining eligibility and providing funding. For information about how the new urban and rural

definitions may affect your area's funding, please contact the respective grant-making agencies. The Census Bureau will work with tribal, federal, state, or local agencies as well as stakeholders, as appropriate, to ensure understanding of our classification and the definition of specific urban areas.

- December 29 2020 Census Urban Areas
   Released (tables, no maps)
- January 19 2020 Census Maps available
- Based on Final Urban Area Criteria published by Census Bureau in March 2022
  - Urban Areas 2,000 housing units or 5,000 population
  - Change from 2010 (2,500 population)

Ocala Urban Area – 182,647

(156,909 – 2010 Urbanized Area)

Marion Oaks Urban Area – 19,077

(14,160 – 2010 Urban Cluster)

Villages-Lady Lake Urban Area – 161,736

(112,991 – 2010 Urbanized Area)

Beverly Hills-Homosassa-Pine Ridge Urban Area – 96,729

(80,962 – 2010 Urbanized Area)

Rainbow Springs Urban Area – 4,667

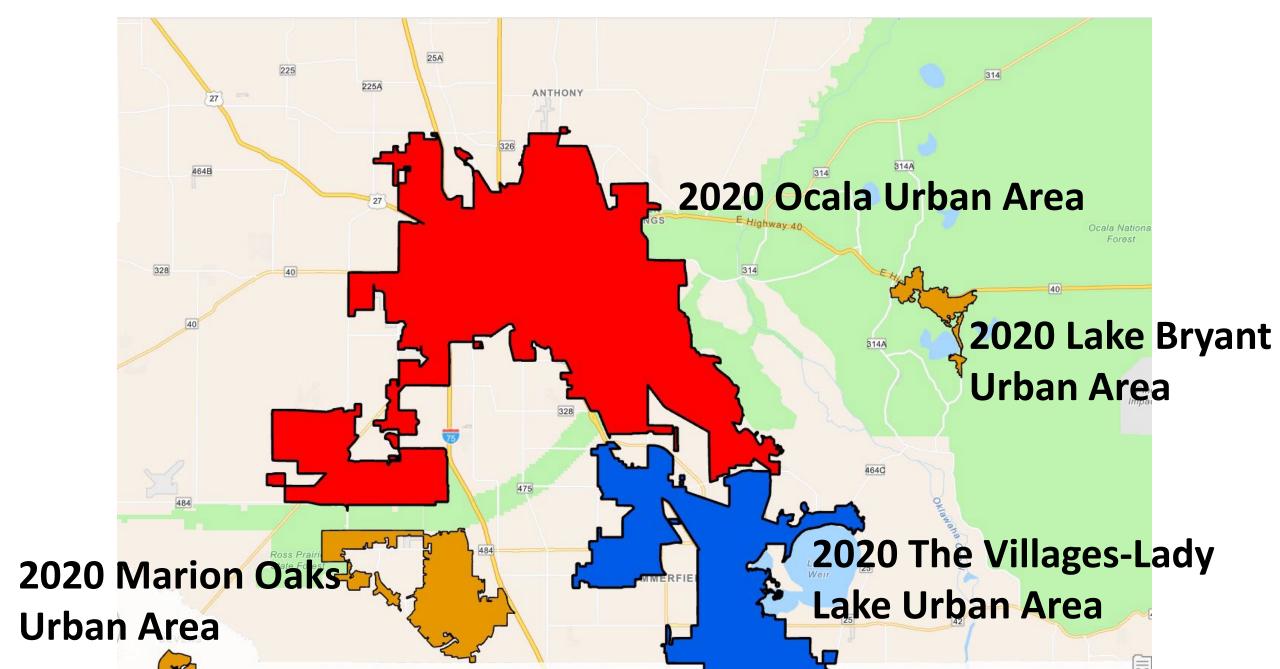
(5,155 – 2010 Urban Cluster, Rainbow Lakes Estates)

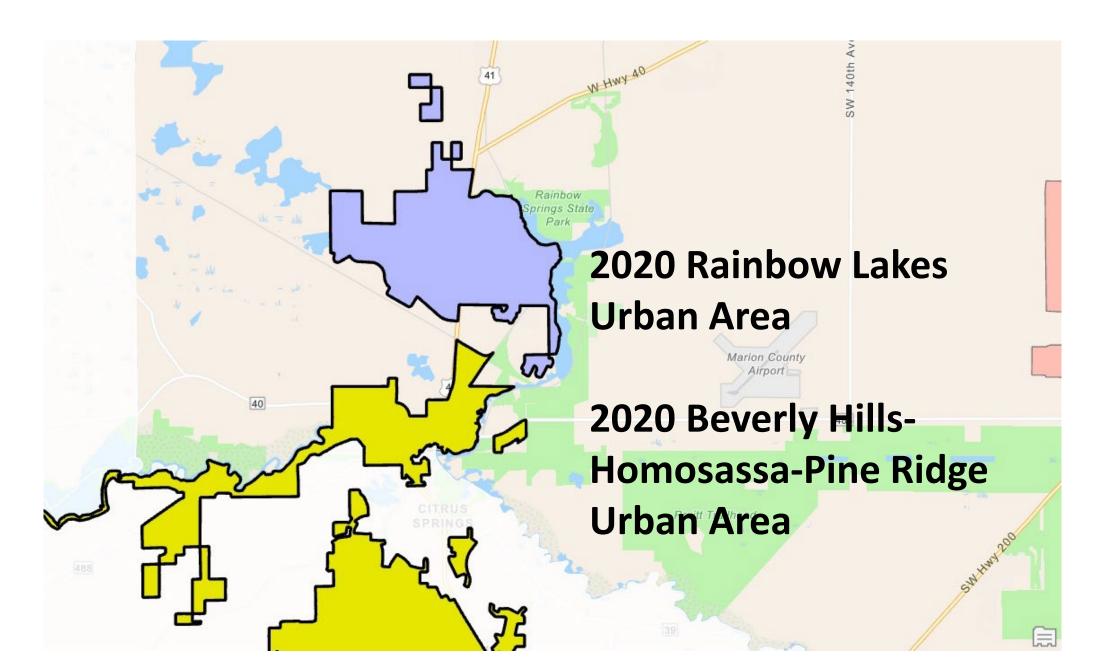
Lake Bryant Urban Area – 3,632

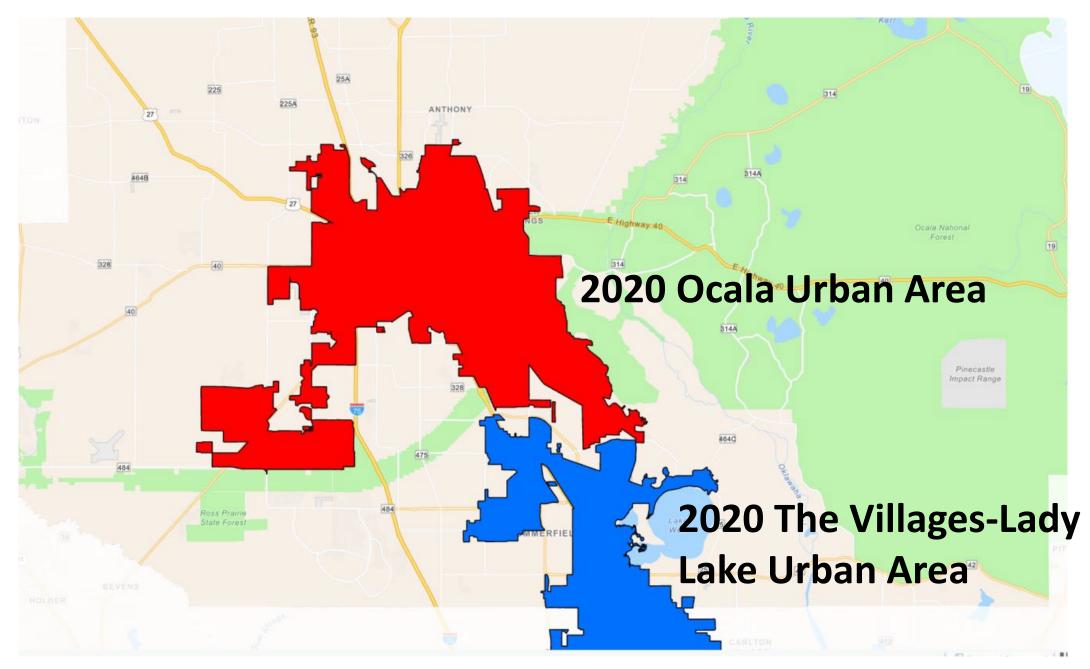
(3,552 – 2010 Urban Cluster)

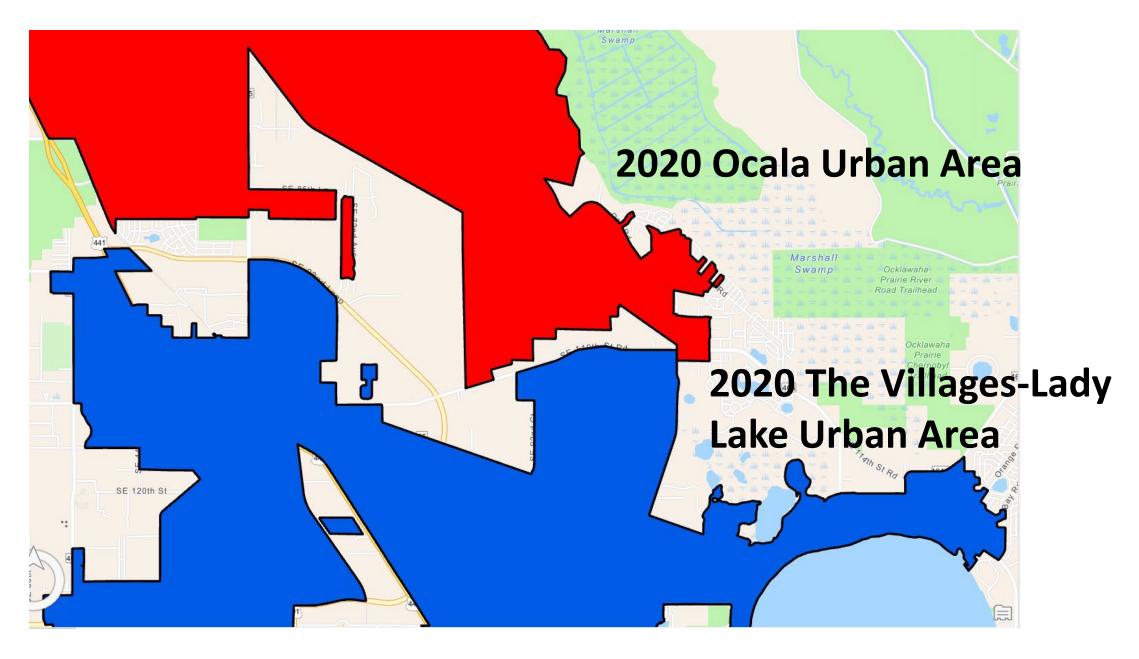
# Transportation Management Area (TMA) Designation

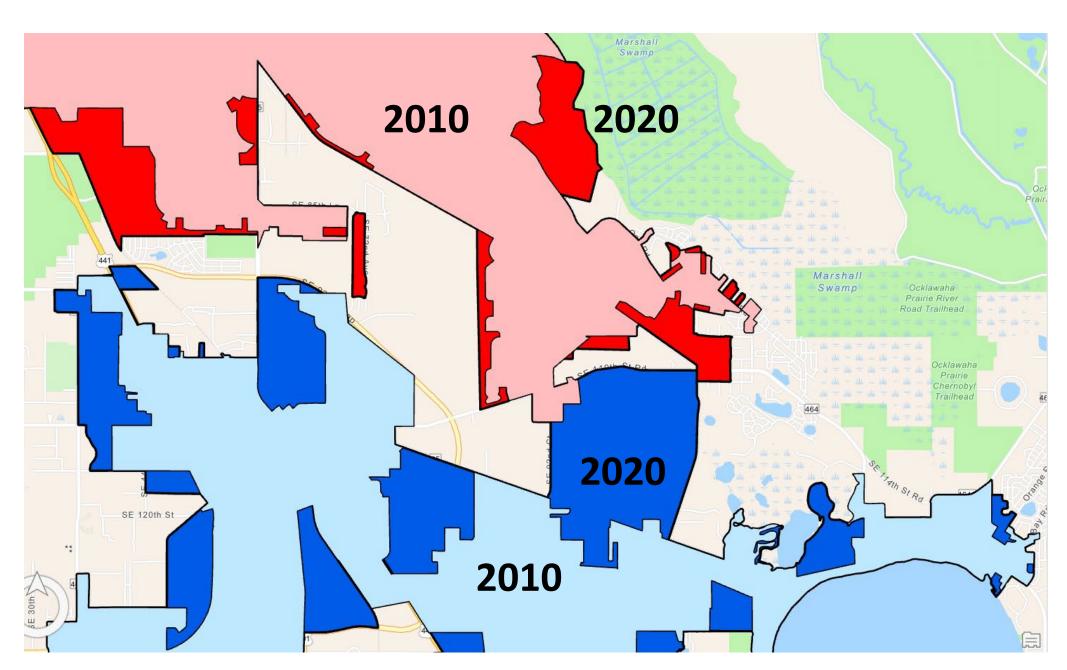
- Census Urban Area > 200,000 population
- U.S. DOT Secretary designates TMA's
- Per 49 U.S. Code Section 5303(k)
- Request by Governor and MPO/TPO to the U.S.
   DOT Transportation Secretary (if warranted)

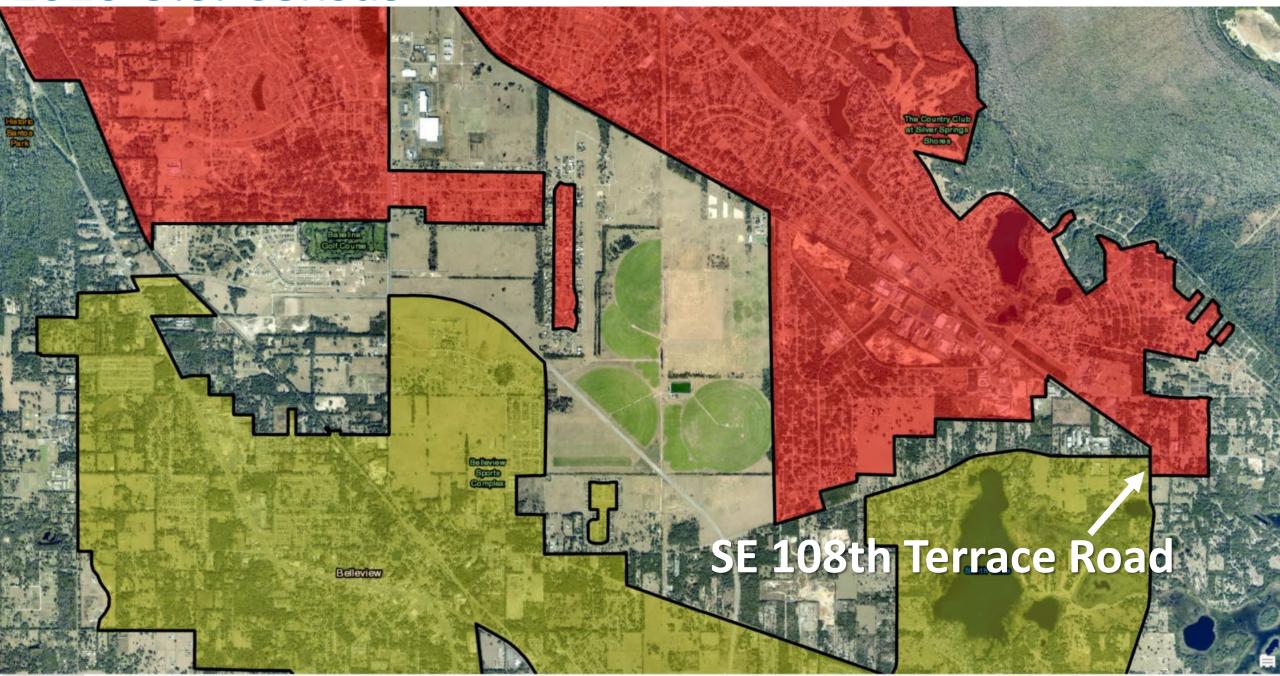












## 2020 U.S.

