Community Action Partnership of Central Illinois, Inc.

CAPCIL TRANSIT
ICAM/HSCR/Mobility For All
Transportation Access and Mobility Grant

FINAL REPORT
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EXECUTIVE SUMMARY

The Innovative Coordinated Access and Mobility (ICAM) funds were authorized under Section 3006(b) of the FAST Act and awarded to Community Action Partnership of Central Illinois, Inc. in FY 2019 to help CAPCIL Transit increase access to medical transportation to seniors and vulnerable populations. The original intent was to access a self-serving scheduling database and to utilize shared LYFT drivers. Due to lack of interest in the Lyft program and having to use personal vehicles and with Covid 19 restrictions and concerns reducing the number of transports, we changed gears and began utilizing our agency staff and vehicles, paying wages and fuel expense for out-of-town medical trips with the ICAM funds.

The majority of CAPCIL’s transport is for vital medical appointments and many of our larger physician networks are located in larger cities anywhere from 30-60 miles away. Our smaller rural communities do not have large transportation systems such as metro buses, trains, taxis’ or even a large variety of ride sharing options available. With this in mind, we wanted to provide our seniors and vulnerable populations with a means to get to these critical types of services.

INTRODUCTION/BACKGROUND

Community Action Partnership of Central Illinois, Inc. (CAPCIL) is a community action agency serving six rural counties in Central Illinois (Dewitt, Fulton, Logan, Mason, Menard, and Piatt). Our Senior Transportation department, CAPCIL Transit, operates only in Logan and Mason Counties and is funded through our local Area Agency on Aging. The funding provided does not cover the costs of out-of-town transports, only local. The dispatch office and fleet vehicles are housed in Logan County, therefore, all transports in Mason County must originate with the driver beginning in Logan County and traveling up to 90 miles round trip. The demand for the out-of-town service to critical medical appointments has increased within the last couple of years and we only see the demand increasing for this service as our local hospital has shut down many of the services it had previously offered our community. Our most vulnerable customers, low-income seniors, need this service to thrive and to know they matter and that they haven’t been forgotten.
PROJECT OVERVIEW/DESCRIPTION

To utilize funds from the Partners for Enhanced Access to Treatment (PEAT) grant we established Goals and Objectives outlined below, with the Lyft service being included and later dismissed.

a. Project Goals and Objectives:
   i. Bring ride sharing options to Logan and Mason Counties
   ii. Transport more individuals to out-of-town appointments
   iii. Open service options to more than just senior riders

b. Project Description: PEAT was initially implemented to supplement our agency’s transportation department in being able to provide more out of town requests for medical needs with Lyft drivers and provide new software to allow our customers the option to book their rides online in real time. CAPCIL purchased the software, but we were unable to find Lyft drivers to meet the demand. We are still utilizing the software daily. The overall PEAT project plan included outreach to engage minorities, people with disabilities, low-income populations, and others. The PEAT project did provide increased access to medical transportation as well as more out-of-town requests through use of our own fleet vehicles and on-call drivers. The project served a rural community that has limited local medical resources.

KEY PARTNERSHIPS

In our efforts to meet the demand of the out-of-town rides to medical appointments we worked in conjunction with Springfield Memorial, HSHS St. John’s Hospital, Lincoln Memorial Hospital and Lincoln DaVita Dialysis to book rides for anyone in our service area needing rides to out-of-town
appointments such as radiation therapy, chemotherapy, and dialysis. We also hired retired, senior drivers to be on call for this service.

**IMPLEMENTATION**

Our project launched in September 2020 with the purchase of a software program, DispatchBot, that would enable our customers to have access to the database so they could schedule and/or book their own rides. We encountered issues right out of the gate as many of our customers are elderly and do not have access to internet or the knowledge to utilize the scheduler system. Also, we were unable to secure Lyft drivers after advertising the position. Once these key factors came to light, we shifted gears asking for an extension of the budget period. Using the funds remaining, we were able to increase access to these types of appointments by utilizing two additional on-call drivers that provided these transports. The funds helped cover the driver’s wages and the fuel expenses for the out-of-town trips until all funds were spent.

**IMPACTS OF COVID-19**

The hiring process for Lyft drivers was a big concern during the pandemic and limited our search efforts to secure these types of drivers. The customers were concerned that the drivers would not wear masks and keep their personal vehicles sanitized which would put our elderly customers at a higher risk.
PERFORMANCE MEASURES

The original request included the following performance measures:

Project Performance Measurements

<table>
<thead>
<tr>
<th>Key Performance Indicator</th>
<th>Measure</th>
<th>What does good look like?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase access to out-of-town medical appointments</td>
<td>Rides documented in ride booking software</td>
<td>Increase of 25%</td>
</tr>
<tr>
<td>Recruit Lyft Drivers for CAPCIL service area</td>
<td>Agreements on file for Lyft/CAPCIL Transit</td>
<td>5 Local Drivers</td>
</tr>
<tr>
<td>Implement new ride booking software with the ability for customers to book their own rides</td>
<td>Purchased software</td>
<td>Software is purchased and implemented within 120 days from the start of the grant</td>
</tr>
</tbody>
</table>

OUTCOME

Our original goal of providing ride sharing opportunities did not work out as we were unable to secure Lyft drivers. Since the onset of this attempt, we now know that Lyft availability has halted across the board.

Our goal to transport more individuals to out-of-town appointments was met as we increased ridership for these types of appointments by 90%.

Our goal to open service options to more than just senior riders was met as we were able to provide out-of-town rides for all ages.

KPI #1 Was successful with a 90% increase in out-of-town rides. This is due to not having to charge the customers for the rides. Before they would have to pay anywhere from $60.00 to $75.00 round trip.

KPI #2 Was aborted due to lack of interest for Lyft drivers.

KPI #3 Was successful with the purchase of the software, DisbatchBot (later bought-out by TripMaster), however the customers were unable to learn or they did not have access to the internet to book
their own rides. The software has been detrimental to our everyday use by CAPCIL Transportation dispatch to book rides when customers call.

**MOVING FORWARD/SUSTAINABILITY**

As we move forward, we feel grounded in our ability to book rides with our software that was purchased. We are continually learning new ways to use the software that makes us more efficient and effective in our community. We are honored to be able to help those who need out-of-town rides for vital, life-saving medical appointments. We have been able to provide rides for individuals going through weeks of radiation treatment to a facility that is 60 miles round trip and that is as life-changing for us as an agency, as it is for them. We continue to look for funds that will help us provide these rides on a regular basis.

**LESSONS LEARNED**

One of our struggles was the shift of leadership. We had a change in our Executive Director role and our Director of Transportation role during the time of implementation of the project and a loss and/or a lack of communication on the purpose and process of the project was encountered. We feel that we did the project justice in the end once we re-gathered and executed our goals that were obtainable and in the end are very happy that we helped save lives and provided our customers with the utmost respect and dignity that they deserve. Another lesson learned was the transition to the new software. We lost the previous records of transport. We have hard copies but that is a little more time-consuming to go back and track # of rides.