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October 14, 2020.

2:00 p.m. CST.

NADTC/Easterseals

Carrie Diamond.

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Welcome and thanks for joining us today. We will give people two more minutes to sign in before we get started.

If you would like to put your, where you are from in the chat box, so we can see where we have people located, and that would be great. Welcome to this National Aging and Disability Transportation Center webinar today. This is the first in our coordination connections series, and we are pleased to have with us folks from WexExpress, Cadillac Wexford Transit Authority to talk to us today. This webinar is being recorded. There is closed caption available if you hover on the bottom and click on closed captioning, there will be a link in the chat if you prefer the Streamtext. I'm pleased today to welcome Carrie Thompson and Kristen Kendall, they had responded early on, earlier this year to a survey that I did about coordination that is happening in different systems, and what that looks like in their system. I was so pleased to follow up with them and learn all about what they are doing, and thought it was so great that I wanted to bring it to the rest of you so that they could share what they are doing with you.

We have Carrie Thompson, who is the Executive Director of WexExpress, responsible for administering the goals and policies of the transit authority Board of Directors and directs the agency's staff including managers and drivers, welcome, and Kristen Kendall, mobility coordinator, where she helps seniors, veterans and people with disabilities to get to medical appointments. She joined WexExpress in 2017 and developed and launched the new freedom volunteer driver program. Thank you very much for being here. We will hold questions until the end, but if you do have questions, I encourage you to put them in the Q&A box throughout. Then we will get to those after they are done with their presentation. Thank you for joining us. I'll turn it over to Carrie and Kristen.

>> CARRIE THOMPSON: Thank you, good afternoon, everybody, we are very excited to be here, and we appreciate you being here with us. We are excited to talk to you about some of the things that we have done here in rural transit and some of the ways we use technology and creative partnerships to keep public transit on the cutting edge here in rural Michigan. I'll get started.

First thing I thought I should give you a snapshot of who we are as a public entity, I think it helps if other transits are on the line to compare yourself to see the size of the transit or if you partner with transit, helps to see what you can do on a small budget. Who we are, we are a public entity that provides public transportation services to all of Wexford County, we do that through demand response service, annual contracts for about $150,000 rides annually. We have a five member board, one liaison that helps us out. We have approximately 50 employees, and have about 29 buses.

All right. Next I want to share with you a little bit about our ridership. Over the last four years, we have experienced a record ridership, due to our technology upgrades and our community partnerships. We were headed towards another record year for 2020, but obviously COVID happened, so that slowed things down for us. We are starting to rebound nicely, we are at about 75 percent of where we were before. But I wanted to show you what can happen with ridership when you implement community partnerships that we will be talking about and some technology. As you are looking at this, we should note that the first year that we made major changes in technology and our partnerships within 2016, and you can see from there some big jumps forward in ridership. I wanted to mention that with did all of this with the, close to the same number of buses, same number of drivers and dispatchers. We found creative ways to, within the existing schedule, to find efficiencies to add more people.

All right. I get a lot of questions when I'm out in public about who is riding the bus and where they are going. I wanted to talk to you about that real quickly. I think that it's really important for transits to understand their demographics, when they are making big decisions. You can see that seniors are our biggest group when it comes to ridership population. Our senior age is a little lower than some transits, we are at age 55 where we give senior discounts, other transits have it at 60 or 65. They are our biggest population of rider. Next is the disabled community, you can see that they are right there in a average month of about 26 percent. When you are looking at these numbers, I should note that we picked a random month, it was January of 2020. These are monthly numbers. We transport about 13,000 people a month. Right after that you will see students, we do a lot of school of choice riders and after‑school programs, which drives that number up. We are continuing to add to those, this next year, we are hoping that number will obviously increase. Then you see adults make up about 18 percent of our monthly ridership. When we classify adult, we mean anybody who doesn't qualify as reduced fare for disabled population or senior or student. That is everyone else who is paying full fare.

Next, talk about where they are going, so we are excited about this particular aspect of transit and how it's changed. You can see our top two trip purposes are work and school, followed by typical things that you would see in a public transit like shopping and medical appointments, professional services, things you expect to see. But the reason work and school have emerged as our top two is because of our technology and we are able to operate at 93 percent on time performance, which makes it very easy for people to use the bus to get to work and school. This is really anything that is time sensitive. This has changed the way our community has viewed public transit, and we are really excited to be able to have services that choice riders want to use and when I say choice rider that is really defined as someone who chooses to use public transit rather than to purchase a car or to use other methods. We are very excited about that 93 percent. That again is technology related which I'll talk about in a minute.

How did we do that, how did we increase ridership and accomplish those changes? We did it through implementing technology advancements, service enhancements that were community driven, efficiency gains came naturally with the technology and service enhancements. We went through a process of engaging the community to change our public image, and come up with stronger community partnerships than we have ever had before.

I'm going to get a little more specific about those. Technology advancements, okay, so the biggest change that we obviously saw with some of the implementation of new dispatch software, there are many on the market, I should start with, capable systems. We chose route match for our software provider. We chose them because they were the best fit for our needs. We were looking for a system that was automated, that could assist with routing and that could show openings in the schedule. The biggest thing was because we wanted to work on the on‑time performance, was we wanted to have a program that would not allow a dispatcher to book a trip that would make anybody else late. Obviously, some of the older programs that you use for dispatching sometimes it's kind of like a herd them on the bus, herd them off mentality. We wanted to avoid that so we could keep our on‑time performance up for our demand/response service. That is something we should note, we do not have fixed routes here in Wexford County, we are very rural. The on‑time performance we are seeing is for our demand response service. The new dispatch software provided us with a lot of metrics that we did not have before, that we needed so that we could work better with our community. We are firm believers that you cannot manage what you cannot measure, and the system allowed us a lot of metrics to be able to do that. It also came with quite a few technologies that were what we call rider facing technologies, that really improved the experience of the rider, when they are on public transit. We have to face it that nobody wants base level service, and that includes public transit. They want those specialty services that improve their experience on the bus. Some of those for us with the software, like you could see from the list, were obviously rider alerts, so we heard a lot and some of our community focus groups, about people not wanting to have to wait outside for long periods of time. Our rider alerts work off of our onboard GPS system that comes with tablets on the buses for our dispatch system. What it does is gives out two types of alerts to riders. It will give a day prior notice, so say I have a ride set up for tomorrow morning at 8:00 a.m., tonight when the system shuts down, it takes all the rider information and makes automated phone calls out to passengers saying your ride is scheduled for tomorrow for a specific time to a specific location. It gives them the option to cancel from that phone call if they would like.

The second type of rider alert that our passengers benefit from, onboard GPS, so it knows when the bus is getting close to the next destination. It will give a call to that rider and allow them time to get their shoes and coat on, that kind of thing. It helps a lot with our senior population. We heard from them that it's hard to wait outside sometimes in the extreme heat or the extreme cold, and a lot of them will have medical conditions, that makes waiting outside in the heat or the cold hard for them. This has been a very large benefit for them. It also allows for on‑line booking of trips. We use text messages to book trips now too, and we use the chat site or sorry, chat feature on our new website which gives them all that information.

We also moved to mobile ticketing, so we use a company called Hopthru to do that, there is a lot on the market but that is the one we chose, with Hopthru, they can purchase their tickets and store them on their smart phone. They don't need Internet service to do that. Once they are on their phone, they can activate them at any time. It's interesting, when we were out in the community talking about how to bring mobile ticketing in, we heard a lot of people say, the seniors are never going to be able to do that, we are going to have a problem with seniors using Hopthru. Interestingly enough now, we are finding that seniors are our biggest user group. Once we train them on how to do that, we visited a couple of the high‑rises here in Cadillac and showed them how to use it, they are using it a lot more than other groups which is great because they don't have to worry about losings passes or knowing what they have and tracking a punch card. Others can purchase their tickets for them as well.

We have a new phone system and some onboard cameras, it's important as you start specifically with anything to do with younger children, it's important to have cameras on the buses, it does make the community feel secure.

After that, we have service enhancements. Everything that we try to do is community driven. This is no different. We held focus groups, we had focus groups, more over a couple years than most transits. We want to hear from people how we can change our system to meet the needs of the community. We don't just call up passengers, we have passengers and we have stakeholders from across the board and nonprofit organizations and private businesses and the chamber and you name it, we try to get them there to talk about where the transit can improve.

One of the things we kept hearing over the last couple years and we decided to implement as a service enhancement was equal service community wide. Sometimes it's hard for transits to focus on their entire county, and we were definitely experiencing that. We have one small city called Cadillac that drives about 85 to 90 percent of our ridership. We were getting people in the outside villages and communities that were saying, hey, we pay equal taxes, we should get equal service. With the changes to technology, we were able to add efficiencies in the system and open that up county wide for the entire day. We have extended hours into the evening now, and on weekends. It is very important that you provide public transit services when people need to go places. I don't think it would be fair if someone had a car and it just shut off at 5:00. I don't think it's fair transit would shut off at 5:00 or not operate on Saturday.

We have added extended hours to be here when people need us, and on Saturdays. We have added bike racks to buses. This was something that has been neat with collaboration between some of the groups that manage our trail systems, and so people are able or passengers are able to put their bikes on buses and then maybe finish their ride to work or to home, or if they ride to work and they don't want to ride home, they can call us and put their bike on a bus.

One of the very interesting things we have done with service enhancements is add a mobility coordinator. That is a brand‑new position for us. We are going to talk a little more about that in a few slides. But that's Kristen Kendall's position.

From all of these changes, we did have some efficiency gains that we were able to really identify and figure out how to solve over the last couple of years. I told you that our original technology was based on a lot of matrix which was helpful so one of the things that it allowed us to do is see how many no shows we were experiencing on the system. This was at the same time the system was experiencing a lot of growth over those couple of years so our ridership was continuing to go up. Instead of adding buses and drivers to the road we had to find other ways to improve efficiencies so we can add people in with the same number of resources, which can get a little sticky. But for us one thing that showed up quickly was the fact that we had a lot of no‑shows. And for anybody who is not in public transit, no shows are what they sound like. We pull up to a residence who has a ride scheduled, and they are not there. We wait our 3 minutes, no show, so those are literally what we call no shows. Anybody who cancels with less than an hour, we categorize them as no shows as well. We were experiencing about 15 percent of our ridership, our monthly ridership and so some months that was up to 1700. We knew that we had to put new policies in place in order to accommodate the riders who needed to get somewhere with the ones that were not calling in to cancel their rides.

We were able to do that through some policy changes and simple moving around and identifying our riders that needed assistance, and to let them know about our new policies. We reduced that down from 15 percent to 2 and a half percent, and in some months it's under 2 percent of our ridership, which opened up 1,000 additional slots in our schedule which we can now see because of our technology. The neat part is we were able to, before COVID, every one of those (indecipherable) on time performance, that always helps with efficiency gains. Then we also did a few things within the building changing policy and allowed for some energy savings, and so we have done a kind of mix of different things for efficiencies.

Speaking a little more about community collaboration, this is a very interesting collaboration with the community. We knew that we needed a public image. You can see on the left is our old image of what our buses look like, what the old '80s, we knew that we needed something different. The community was nicknaming us lots of fun things, buses that no one here appreciated and we knew we needed a new image. What we did was instead of picking out a image for ourselves and deciding that is what we are going to do, we held focus groups to look at the image and say does this work for you, doesn't it, what would you like to see? We got public involved in renaming the transit. You can see, we are called the Cadillac Wexford transit authority. CWTA for short, we had a lot of people that couldn't seem to put those letters in the correct order, and we knew that it wasn't a great public facing image. We will always be the Cadillac Wexford transit authority but we needed a public facing image. We wanted the public to be part of the change.

We went to our partners and stakeholders and passengers and employees, employees were a big part and we started talking to them about what it should look like, and tried to bring pride of ownership to the community when it came to this brand. We came up with a couple of different names, there were five or six of them and we let the community vote. They came up with WexExpress. We did the same thing with the logos and image. We wanted them to feel a part of their community and the changes that were happening. I have to say when I am out in public, talking about the transit, this is the number one compliment that we do get, is that they really like the new brand. We have several, that is our cityscape, we also have one that's got pine trees on it, we have another one that is lake related, because we have a lot of lakes here in Michigan. People really do like the new image.

Then before I turn it over to Kristen, I'm going to talk about stronger partnerships. I have to say that all of these changes, including the technology, would not be possible without really great community partners here in Wexford County, the communities rallied around the transit, and we do our best to keep communication open at all times to stay flexible with their changing needs. We really make sure it's our job to be a vital part of the community fabric here in Wexford County. If there is a transportation need, we want them calling us, not others, we definitely want them calling us. We worked really hard. You can see the list of partners there, it ranges from the council on aging here and health and human services, and there is a lot more. But these are our major partners that definitely come in when we have big changes coming in. You can see the partner with the schools and the YMCA and obviously community mental health, and so that's been a big part. The new freedom volunteer driver program, I'm going to talk about for a little while and then turn it over to Kristen. This has been an amazing program, a lot of fanfare, I wasn't expecting it to be as popular as it is, to be honest, two years ago when we started this. It's really quickly gained momentum under Kristen's leadership. She took it from literally zero passengers to where it is now. But I want to give you some background as to why it was important in our community and how it started.

We were having discussions with several different groups here in the area, including the senior networking advocacy group, there have been groups here that works with seniors, our Wexford County veterans, COA, human services organizations. We kept hearing the same thing over and over, which was the transits is great when you are inside the boundaries, inside county boundaries. But we see a gap in transportation when it comes to seniors, veterans, anybody with a disability going to a appointments outside the county boundaries. We have a lot of specialty type medical facilities in Michigan, including veterans clinics and U of M and Ann Arbor, several clinics in Detroit. What we were experiencing is seniors were having a hard time getting to them. When you look at typical public transit, anything that goes outside our boundaries can be a little scary. They go, I don't know, that is not where our funding is. So we had to get creative to figure out how do we do a couple things here to minimize the red tape for people who need to get to these appointments.

So we kept hearing like I said that they would give up. Let's say a senior has to call three or four places or they call one place and they get referred to another and another and another because their transportation or they have to be on hold, eventually they just give up. We found some of the other options that were private carriers were good for some people and way too expensive for others. We wanted to be able to utilize a very strong network of community partners to make this happen, because then you have buy in and you have a partnership that will go on because it benefits both parties.

We were able to secure funding to the new freedom volunteer, sorry, New Freedom Program which is funding with the help of M dot and SCA, we were able to do that and hire Kristen to start this program and work with our different partners to bring this to light. I'm going to turn it over to Kristen now, to talk about this program and tell you how it works. Go ahead, Kristen.

>> KRISTEN KENDALL: Thank you, Carrie. I was hired on to become mobility manager and coordinator. We work together closely with those partnering agencies. We started out very slowly, talking about how the program was going to be put together, and began recruiting volunteers. The New Freedom Program did recruit volunteers, and we began with two accessible vehicles, and have volunteers that were trained to drive them and knew how to do the securements properly. Our other volunteers drove their own vehicles and were reimbursed at 50 cents per mile for their trips. At that time all of our volunteers like we have very few as we started, but our partnering agencies came through and helped us find more volunteers and bring them to the table.

We also were taking passengers, all of our volunteers offered door to door service for nonemergency medical transportation, but we also take people to dental visits, vision and then also physical therapy. The volunteers are reimbursed at 50 cents a mile, because they are driving their own vehicle. We launched this program in January of 2018. Our first ride was quite memorable, it was a couple who had recently been in an auto accident, their vehicle that was an accessible vehicle for them was in the repair shop. They were in this accident and needed to get to traverse city which is about a hundred miles round trip for a critical doctor's appointment. We were able to use our accessible vehicle and transport them up to that appointment. They were so grateful and could not believe that this service was able to take them and get them to that appointment that was needed. Along with that, we do have, that first month we started out slowly, 63 rides in that very first month. And only traveled about 3,000 miles.

That was a slow beginning, but we grew rather quickly. I want to tell you about how we grew and how this process works. Seniors, veterans and people with disabilities contact me at the mobility office, to schedule their ride. We determine which way is the best way to get them to their transportation, whether it's through our local bus service, if they are within our county boundaries, or Department of Health and Human Services would be another option if they have Medicaid or Medicare and are eligible for that. Another option is other transportation companies in the area, and that is where if they need a little more assistance, such as a nurse or someone that can enter the home, then we have them contact those companies and go through that.

However, most of the time, our volunteer driver program is the best option for them. We can provide the service at no cost to the rider, because of our federal grant, we are able to match the federal dollars with our local partners, and are able to provide the ride at no cost to the riders. Our primary partners are the Wexford County council on aging and the Wexford County veterans services. They provide the 25 cents per mile for the ride and our federal grant matches the other 25 cents, thus giving the volunteer driver the full 50 cents per mile reimbursement for their trip.

Along with that we have secondary partners who encourage, who actually contact us, they are social workers or care coordinators through the Area Agency on Aging, will contact me directly and we set up and schedule the rides for their clients so they can get to their medical appointments as needed. We also work with a couple secondary partners that would be our nursing homes in the area, and also a hospital. In those cases we have what is considered private pay. Private pay is where a local match comes in, so they are companies that pay with a credit card and so that payment happens before the trip actually takes place. That is considered our private pay option, where businesses can pay ahead of time for that trip to happen.

Because this program was new, we started relatively small, and we wanted to make sure that all of our funding was in place and that we had the right people in place for volunteers before we did a lot of advertising. However, the need and the service in this community was even greater than we expected, and the partnering agencies did a good job of letting everyone know about the service, and word of mouth quickly spread. In January of 2020, just before COVID hit, we did 472 rides in that month. 11 were people with disabilities, and 53 of them were our veterans. Our main focus obviously has been our seniors, and 408 of them traveled and needed trips during that January time frame. Many of those don't know what they would do without this program. We have a lady that goes to Traverse city monthly for allergy shots and that she cannot get in the Cadillac area. We have a lady that went to Grand Rapids for chemotherapy, so that lady needed to go to have those cancer treatments done every week for quite a while, to make sure that her life was sustained through the chemotherapy. Their children and other family members were not able to take off work, especially when they had to go so often on a weekly basis, and this provided them that comfort that their loved one was taken care of and able to get to the life saving appointments. The New Freedom Program currently has 15 volunteers. They drive their own vehicles and on average they donate 738 hours per month, and the volunteers also travel about 18211 miles in that month time. Most of the trips are short, a hundred miles round trip, short to some people, longer for others, but a hundred miles round trip, to see a doctor or specialist in Traverse city. However, if you are a veteran and need to go to the VA hospital, that ride could be longer. The nearest VA hospital is in Saginaw which is about four hours round trip so 260 miles, or even Ann Arbor which is six hours or 425 miles. As you see, this is especially important to our veterans to get to these VA appointments. We have one veteran who almost lost his eyesight because before this program launched he was unable to get the necessary transportation to get to these appointments. Now that he's been using our services, had successful surgeries and been able to save his eyesight. He is eternally grateful for all that we have done to get him to Ann Arbor so often for those appointments and get them taken care of. We are thankful to our customers who continue to rely on us, the volunteers that put in their time and their effort and their vehicles, but also our partners who help us, provide that at no cost to any of the riders, so we are just so thankful for all of our communities, community partners and customers and volunteers to help us provide a safe, reliable service and help us improve our community. I'll turn it back over to Carrie.

>> CARRIE THOMPSON: We should mention and thank you, Kristen, Kristen has done an amazing job with this program, literally going from 0 passengers month one, we handed her the idea to almost 500 before COVID hit. She is still even with COVID 400 a month, she schedules through her office, she touches every phone call. We appreciate everything she's done and all the time she spends with our partners.

But as the result of the New Freedom Program we are hearing from our partners that the passengers are having improved health outcomes in our community. When before they were having trouble getting to maybe all their physical therapy appointments or their follow‑up visits after having a procedure, they are now able to do that. They depend on our volunteers to make that happen, so we are seeing a lot better health outcomes for our seniors and our veterans in Wexford County. It is definitely notable. When we create those better health outcomes, obviously we are creating a healthier community, where seniors can get out and enjoy the things that we all love in our community, and really it's, it helps everybody out all the way around.

So we are really excited to be able to bring this program. I know we are going to get to questions in a minute. I'll turn it back over to Carrie in a second. But I wanted to make sure that if anyone wanted to contact Kristen or I directly that you are able to do that. We are more than happy to answer any questions that you have. I will tell you that in developing this program, there were several variations around the country, and we definitely leaned on some of those people as well. We want to make sure that we are giving back in the same way. Our contact information is up there, feel free to contact us, if you want to dive a little deeper or have specific questions. But right now, I'll turn it back over to Carrie.

>> CARRIE DIAMOND: Thank you, Carrie and Kristen, I will echo chat comments, amazing presentation and awesome program. We do have several questions and I'll try and go through these in some semblance of order. But I want to remind people that you are a very rural, community, 575 square miles with a population of roughly 33,000. Keeping in mind all the amazing things that you have done and it being that rural, I think is really germane to many of the programs that are probably on this call.

First question, were you always a demand/response system?

>> CARRIE THOMPSON: Yes, we have been a demand response service from day one. We did demand/response and also obviously contract services with community mental health and that kind of thing.

>> CARRIE DIAMOND: Thank you. There were a couple comments and questions about the technology, and older adults, in terms of their access to and comfort level with the technology and using the technology. Can you speak a little more to that, and maybe a little more in depth about the training that you did specifically that you had mentioned earlier?

>> CARRIE THOMPSON: Sure. I should mention that my operations manager and IT manager, his name is Aaron, is on this call as well, he helps me with this every step of the way. We worked very hard to make it seamless for the passenger when it comes to technology. Right? When it comes to dispatch software, if we touch on that quickly, we wanted to make sure that they felt very comfortable and there was nothing extra that they had to do. They didn't want to book on‑line, they don't have to, they can still make the phone calls, we set it up in our dispatch software and they are still getting all of those benefits. We give them options. We let them say do you want our dispatcher, do you want to sign up for calls, here is what this means and what it would look like for you. We did a lot of training at senior complexes, so we have several senior high‑rise buildings here in Wexford county that really utilize our service a lot. What we did is set up time to go talk to all of them about the changes that were coming in, and exactly what it would mean to them, if they wanted to participate in some of those things, we did training seminars, one on one, where we would show them. We would actually help them set it up. Aaron who is very patient sat with them for hours through this, back in 16, 17 and 18 when we were really implementing a lot of change. We don't force anything on to our seniors. We put it out there, let them know about what is going on, and we are actually surprised at how often they would like to participate. It's not everyone, but it's pretty impressive, like I said with the mobile app we thought seniors would be our smallest user group. Because of some of the training and the videos we put on line to say this is how you work it, and our drivers, we trained our drivers as well to help people through that, the first time that they are using it, they really have been a large user group, the number one user group actually for us. That has been very surprising. Seniors want to participate a lot of times in technology, you just have to show them.

>> CARRIE DIAMOND: Great. Thank you. That leads into another question, along with your training and outreach it seems like you did a lot of focus groups. Somebody was asking about an agenda, and what you did in those focus groups. Can you expand a little bit about how you did that, and maybe what would have been on the agenda for one of those meetings?

>> CARRIE THOMPSON: Yes. What we typically would do and obviously each focus group is a little bit different, depending on the topic. Let's say we are talking about service enhancements, where the transit can do better. We bring a whiteboard over, like the old easel where you write on it, and we have questions on the top, we say simply, what do we do really well? We start with a positive. What do we do well, and they will tell us. We go through those things. Then we will ask them where could we do better, what could we do to make the service better for you and make the experience more pleasurable.

They literally, if you stay neutral, they will tell you exactly where they think that you are doing really well and where you can make improvements. What I always share with them is when they give us the positives, is we will do our best if we are making changes to protect those things that they hold dear that we think we are already doing well. It's nice when I bring them back to the staff to hear that. For the agenda, I pretty much go through questions for them that they can answer, and then they feel heard when we are writing them down in the community.

Do we do every single one of them? No. We don't do every single one of them. But people feel heard and validated and a part of the process, and that is the biggest part of a focus group. As you start to drill down, you can come back and say here is what we are thinking, what do you think about this. Does that answer what you were saying? The agenda kind of depends on the topic.

>> CARRIE DIAMOND: With those focus groups and with all of your partners, how long did you work to finally bring everybody to the same page as with your rebranding and your new services?

>> CARRIE THOMPSON: We kind of staggered them. I would say each one of the projects was probably about 6 to 8 months. But they were kind of running at the same time, but staggered, in a order that made sense for us. Obviously we had to go out and talk to the community about what they wanted before we could go out for new dispatch software. We needed to hear from them that they wanted more dependability, we had to talk to our staff, and talk about where we could improve before we could move forward.

>> CARRIE DIAMOND: Thank you. How have your services changed in light of the pandemic?

>> CARRIE THOMPSON: Really they slowed down a little. Right?

So obviously, in Michigan, we had some shutdowns. We never shut our doors. But we had some stay at home orders. At certain points we were running about 20 percent of our normal service. So what we did was essential service only. We made sure that we provided service for seniors to get to grocery, well, not just seniors, everyone to get to grocery stores, get to the bank, to get to the things you have to do for essential services. We reached out to the community and said, where else can we help? We delivered about 1,000 packages for seniors and veterans that were in need. The COA here, commission on aging, was receiving food donations. When they would arrive, obviously transportation and scheduling food deliveries isn't their main priority, it's taking care of seniors. They literally gave us the roster and a couple of volunteers and we set up all of those deliveries. We also got into delivering for pharmacies, and helping out in any way we could. But we were down to about 20 percent of ridership. Now we are back up to about 75 percent.

>> CARRIE DIAMOND: Have you changed any marketing and outreach to older adults, people with disabilities or students in light of the pandemic?

>> CARRIE THOMPSON: Yes. Really the biggest thing is building confidence back up, because there are some stigmas that go along with public transit where people think about the number of people touching handrails and all of those kinds of things. They get nervous about that. We have done a marketing video in conjunction with one of our statewide transit agencies called mass trans and there are about 20 agencies statewide that also did this with us. We did a campaign to talk about the buses are safe and clean and what we are doing. We focused on the fact that not all superheros wear capes. Some wear hats and uniforms and drive buses. We talked in detail about the cleaning of the buses and how we are here for you, and the best times and in the most challenging of times, and we are still here to connect the community, pretty much that we are not going anywhere. We did a lot of that type of marketing recently.

>> CARRIE DIAMOND: Great, thank you. Shifting a little to finances, you talked a lot about the partners that you have. Do any of them provide any financial assistance or matching funds for your program?

>> CARRIE THOMPSON: In the New Freedom volunteer driving program, yes, they provide quite a bit of financial help. What we do is reimburse volunteer drivers because they are in their personal vehicles the 50 cents a mile like Kristen talked about. To provide that at no cost to the passenger, that requires that the grant picks up half of that, so 25 cents, and our partnering agencies picks up the other 25 percent. For instance, if we have a senior that needs a ride to Ann Arbor, what Kristen would do is call up the COA and would say, I have this senior that would like to go and they would say yes, we authorize that, and then we would bill the grant 25 cents a mile and that partnering agency the other 25 cents, so it's no cost to the senior, to make it to that medical appointment.

We really could not do the new freedom volunteer driver program without our partners.

>> CARRIE DIAMOND: Do you contract to do Medicaid nonemergency medical transportation?

>> CARRIE THOMPSON: We do a little bit of that. Obviously, with the paths that our Medicaid dollar can take, 50 different routes it can take before it gets to transit, it is complicated. We will do it if HHS assists with that. But we do not bill Medicaid on our own, it's just for transit, becomes far too cumbersome. It is something all transits would like to do and we do talk about that at a state level when transits are together. But it's been very difficult to break into that, and it has been no different for us, as it has been a uphill battle to get there.

>> CARRIE DIAMOND: Thank you. There was a question about the service enhancement, the camera capabilities that you have. Does this mean every rider has the capability of viewing other riders on the bus or what is, is it more secure (overlapping speakers) considerations.

>> CARRIE THOMPSON: Public transit because it's a public space, you can have cameras on buses. We do have postings that say that the bus is being recorded, that kind of thing. We do not share them. The only person that can view them is someone in management here. We do occasionally, if we need to, we can share them with law enforcement or if we have a student who is on their way to school, and there is an issue, we will sometimes share that with the school, if it's appropriate. But other than that, those do not go anywhere else. You cannot live stream them or see them. But we can pull them here and see exactly what's happened on the buses during the day. Some transits I should say there are a couple of rural transits in Michigan, one I know of in particular that you can see them live stream as they pull them up, but that is just for the management team there as well. It is a, the public can't live stream them. The capability is there but for ours you have to pull the tape and watch them.

>> CARRIE DIAMOND: Shifting to the volunteer driver program, you said you had Routematch. Does that include scheduling for your volunteer driver program, any notifications, driver reimbursement payments, is that done through the software?

>> CARRIE THOMPSON: It is actually at this time not. We have been working towards that, to be totally honest and those of you in transit can probably understand this, but it's really, sometimes our programs take off at a rate where you just try to keep up, and obviously with the new freedom driver program, we experienced that over the last few years to go from 0 riders in the first month to have 63 and then to have almost 500 a month. Kristen is doing it all through her office. She has route match put in and we are going to be using it in the future. But as of right now, she is doing them through another program, called when I work, which we use for our drivers, which is a scheduling program, where they can go in and see their schedules and the riders that they are picking up on a individual basis. We will work towards getting it there but right now we are using a different program that has been working well.

>> CARRIE DIAMOND: Great. What tactics, you mentioned a few of them, but do you attract volunteer drivers, as that can be difficult to find full time paid drivers in rural areas, but also volunteers in those areas.

>> CARRIE THOMPSON: That is quite interesting, Kristen is very persistent. (chuckles) she literally goes to a lot of events where people kind of are more prone to donate their time, so Lyon's club, different types of groups. Kristen goes and gives presentations on a regular basis. She gets a lot through word of mouth. Some of our volunteer drivers make quite a bit through our reimbursement, you would be surprised. So we do get a handful of retired folks that do want some kind of employment, even though they are not our employee, but they want something to do every single day. We do have quite a few of those drivers that are working schedules that are very close to what our drivers would be if they actually worked for us, in doing these volunteer trips.

With her, it's persistence. We haven't done a lot of marketing, either for passengers to ride the system, and we haven't done a lot of marketing the other way. But she is visiting a lot of groups and a lot of word of mouth. She sometimes gets leads through her volunteers of people who might want to do it and through churches and that kind of thing. We do hear from our volunteers that they enjoy what they are doing, and enjoy talking to the people who are very thankful to get these rides.

>> CARRIE DIAMOND: Has the pandemic impacted the volunteer services?

>> CARRIE THOMPSON: Yes, obviously, some people were a little nervous at first to drive their vehicles with people inside that they may or may not know. As things have progressed forward, we are seeing a little less of that. We do have a few volunteers that aren't working right now. But that is okay, because our ride volume also went down during that time. Now it's starting to pick back up. We are starting to see volunteers come back out. But Kristen did a great job of doing the exact same training we did with our drivers for disinfecting and feeling secure about what you are doing with the information, and giving that to the volunteers so they can do it in their personal vehicles. We also have two accessible vehicles that people have mobility issues so they cannot get in and out of personal cars. We deep clean those every night as well as the volunteer, and we offer all those resources we have at the transit to those volunteers so they feel secure.

>> CARRIE DIAMOND: We could do another webinar and webinars have been done specific to volunteer drivers programs. Can you tell us about the training and insurance you carry for the volunteer driver program?

>> CARRIE THOMPSON: Kristen, do you want to go over that quick?

>> KRISTEN KENDALL: Quick overview as far as training goes, all our volunteers go through nationwide criminal background screening. We have a company that we use that we go through that with. We have, their personal insurance comes first because they are driving their own vehicle. But we also have FEMA insurance through the national insurance services that we contract through them for the additional liability insurance for our volunteers. They go through some training as far as sitting down with me, we go through what is expected of a volunteer, things that they should and should not be saying, keeping those conversations especially this time of year with all the politics so no religion, no politics, try to keep your conversations to meals and food and things that you can enjoy and things that are going on in the community that maybe they want to be invited to go do. We have them go through the CTA, has a volunteer safe driver course so they go through that course also, takes about 45 minutes for them to go through and do some defensive driving information and reiterate that they are going to be a safe driver.

All the volunteers we do supply them all with shirts, turquoise colored polo shirt so the riders know who to expect. I'm always doing the phone calls the day before letting them know which driver, what color vehicle and each driver as their own personal I.D. also that has their name and that they are a Wexford volunteer driver. We have been able to supply them, being in Michigan they needed coats and jackets, so we can make sure that they are still identified as a volunteer driver, and recently added hats to that list, so that everybody can make sure that these people are safe and that everything is going, they are on our drivers screening also, so we do make sure they have a safe driving record, and are able to go through them.

>> CARRIE DIAMOND: Love that consistency and branding with your volunteer driver program. That is really important. Finally, I think we will end with, you had mentioned that you are finding that the health outcomes of the people who ride your system are better. Are you tracking that, or do you have any quantitative data around that, or are looking to gather that in the future?

>> CARRIE THOMPSON: We don't have it right now. What we are experiencing is because the program is relatively new, we are experiencing, different organizations giving us a call and letting us know, and hearing from doctors facilities thanking us for the program, because what was happening before is people, say you have ten physical therapies, they might come to five, because they couldn't get someone to bring them to the other ones. The outcomes weren't as good as they are if you go through the entire process. We right now aren't tracking that. We are trying to find a way to make that tangible data, it's a little difficult. But we are hearing from the actual medical facilities, we are hearing from our partnering agencies and we are hearing from the people that are actually going through it that there is no way that they could have completed their therapy without the ride. That is what we are hearing. We are excited about that, the whole idea was to make better outcomes for people in our community.

>> CARRIE DIAMOND: Great. Thank you very much. Once again, I want to thank Carrie and Kristen and all of the folks at WexExpress for sharing your program. We had some great feedback in the chat about how amazing your program was, and inspiring as Margaret had just put down. I encourage people to check out their case study, there is a couple page case study that is on the NADTC website. We have a new coordination planning and public participation landing page at NADTC.org that I encourage you to check out and review that case study. There will be more case studies being published there in the upcoming weeks. This webinar recording will be available on the website as well, for future viewing, if you have enjoyed it so much you want other people to listen in, you can share that with others.

I encourage you to sign up for the NADTC E newsletter that comes out monthly, and then eBlasts that come out when there's special news coverage that needs to come to you. We appreciate you participating today. We thank the folks at WexExpress for sharing your inspiring story with us, and everything that you have done and the hard work that you have done to get there. We hope everybody has a great day. Thanks again.

Thank you very much, Carrie, Kristen, Aaron, thank you, Mary Kay for captioning. And we will go ahead and I will end the webinar. Thanks.

(end of webinar at 3:00 p.m. CST)

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