The Transportation Predicament: Getting People to Places

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DISCLAIMER

The contents of this report reflect the findings and views of the authors, who are responsible for the facts and the accuracy of the information presented herein. The contents do not necessarily reflect the official views or policies of the ACDD, and the ACDD assumes no liability for the information herein.
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1. The Predicament

Life is complicated for individuals with developmental disabilities (DD). Everything takes longer and usually requires planning. This is truer when it comes to transportation. For example, when most people run out of milk, they just get in the car and drive to the store to get more. The average individual with DD does not drive, so something as simple as running out of milk means doing without it until they can arrange a trip.

Furthermore, people with DD generally have a greater need for transportation—for medical appointments, therapy, jobs, job training, day habilitation, etc. Caregivers of these individuals incur substantial expenses, making it necessary for them to work outside the home. However, when the caregiver works outside the home, he/she is not able to provide for all of the transportation needs, which compounds the hardships. You can see how transportation—something most of us take for granted—is a predicament for caregivers and individuals with DD.

The Alabama Council on Developmental Disabilities (ACDD) wanted to get a better handle on transportation needs for individuals with developmental disabilities in the State of Alabama. The ACDD awarded a grant to the Regional Planning Commission of Greater Birmingham (RPCGB) to assess need and develop viable options for improvement.

The project consisted of three phases: (1) data collection in the form of public meetings, interviews, and surveys; (2) research; and (3) analysis and development of feasible alternatives. The RPCGB conducted at least one public meeting in each of the 67 counties in Alabama, interviewed every public transportation provider in the state, and collected over 1,000 surveys.
2. Interviews and Surveys

To gain insight about transportation needs and obstacles for individuals with developmental disabilities and their caregivers, at least one public meeting was held in each of the 67 counties in Alabama, and over 1,000 surveys were collected. Below is a summary of findings from interviewing people at those meetings and from surveys that were collected online and in person. These findings helped in developing the Viable Options for Implementation, Chapter 9.

Responses received from individuals were substantially similar throughout the state, whether they lived in urban, small urban, or rural locations. Interestingly, while people living in urban settings may have more transportation options, there seemed to be no less need. Rural dwellers expressed close ties with family, friends, and neighbors that they can call upon when they need a ride. Whereas, urban dwellers often expressed a lack of family and friends on whom to call, leaving them dependent on public transportation that may not serve their destinations or operate during the desired travel times.

*Family/caregivers and day program staff provide transportation*

When asking individuals with DD how they get where they need to go, the overwhelming response was by family and day habilitation staff. Of course, family support is expected and customary, as well as the expectation of staff to transport program participants to sponsored outings (such as bowling, movies, library, restaurants, etc.) and sometimes to healthcare visits. But it was surprising to discover the many, many staff members who selflessly give their time and resources to drive their own vehicles at nights and on weekends to transport their friends who just happen to be in their day program.

This is not a sustainable means of transportation, as there will come a day when the family/caregivers/staff are no longer able to drive, due to physical, mental, or financial limitations. When this happens, the change can throw an individual with DD into confusion and distress.

Caregivers cannot do it alone; they are stressed and overcommitted, attempting to balance work, home, spouse, and children with finances, physical limitations, and transportation. They need help from people and resources outside the family.
**Service hours are inadequate**
Fixed-route bus service is available in eight urban areas of Alabama, generally running on an hourly schedule and stopping after 6:00 pm weekdays (except in Birmingham, Mobile, and Montgomery). Only Birmingham, Calhoun County, Gadsden, Mobile and Montgomery operate on Saturday with a reduced schedule. Sunday service is not available in Alabama.

Demand response service is even more limited, operating only Monday through Friday, on average between 7:00am and 4:00pm.

**Service area is inadequate**
In Alabama, most rural demand response transportation serves the entire county, but there are numerous places where service is limited to city limits or a specified radius of the city center, leaving rural residents stranded. Some providers offer limited transport into adjacent counties (usually for medical appointments), but there is no regional, reciprocal transportation, meaning no pick-up of new passengers in an adjacent county to bring them back to the county of origin. Public transportation in Alabama only crosses the state line in Phenix City, Alabama and Columbus, Georgia (sharing an urbanized area), even though it may be more convenient and cost effective to do so in other places as well.

**Trip time is lengthy**
Most fixed routes in Alabama operate on a one-hour basis, making long trip times, especially on transfers and return trips. Demand response service (aka door-to-door) requires a reservation that must be made a minimum of 24 hours in advance. Scheduling is based on availability and rides are shared, meaning trip times can be lengthy. Additionally, pick-ups have a 30-minute window, meaning a rider must be ready 15 minutes before the scheduled pick-up time and the driver may not come until 15 minutes after the scheduled pick-up time. In other words, if the scheduled pick-up time is 9:00 a.m., a driver may come anytime between 8:45 a.m. and 9:15 a.m.

**Travel training is insufficient**
In areas with available public transportation, many individuals lack skills on how to use or access it. This creates anxiety and impedes their ability to travel independently. A few social service agencies in Alabama equip their clients with travel training, but no transportation providers in Alabama participate in similar instruction.
Drivers do not understand special needs
Many disabilities are not visually observed or obvious. Drivers need better training on how to effectively assist passengers in a variety of ways, and how to react (or not react) to certain behaviors. Taking a trip independently can be confusing (whether on a big bus, small bus, or car). It is important to make every passenger feel comfortable and able to reach their destination safely, without incident.

No public transportation available
Eight urban areas support fixed route service. Door-to-door service is available throughout most of Alabama, but there are 11 counties without any form of public transportation—Bullock, Butler, Coffee, Crenshaw, Dale, Elmore, Fayette, Geneva, Henry, Lamar, and Randolph—and 11 counties with limited transportation—Barbour, Colbert, Franklin, Lauderdale, Marion, Marshall, Mobile, Montgomery, Tuscaloosa, Washington and Winston. (See Map of Transit Availability on next page.) A Directory of Public Transportation, listing all providers by county, is available for viewing and download at www.rpcgb.org/transportation/dd.

Walking and biking are dangerous
Sidewalks and bike lanes in Alabama are, for the most part, nonexistent, making it necessary to walk and ride in streets or in other areas not designed for pedestrians or cyclists. For individuals living within a few miles of a town or grocery store, walking or biking is an obvious and convenient choice. But when walking or biking on a narrow two-lane road where vehicles are traveling in excess of 55 miles per hour, a driver may not see an individual until it is too late, especially if the driver is reaching the top of a hill. It can be especially dangerous for individuals with developmental disabilities, because their assessment of vehicle distance and speed may not be accurate, and reaction time may be slow.

Mobility devices make travel more difficult
No travel is simple for anyone using a mobility device. Uneven concrete, cracks, sand, rocks, and tree roots can cause tripping. If a wheelchair is involved, these conditions may make it impossible to traverse. When using a vehicle, it is often necessary to have special equipment, such as ramps or lifts and an extended seating and storage area. If an individual is able to drive, a vehicle may need to be altered to accommodate their abilities. Service animals present another level of difficulty—water and bathroom breaks for the animal; people’s lack of knowledge regarding accommodation, how to interact with the animal, and the animal’s purpose or function, such as audible alerts or retrieving.
Map of Transit Availability

TRANSPORT AVAILABILITY
- FULL
- LIMITED
- NONE
Price gouging happens
It would be nice to think that everyone wants to help people in need. Unfortunately, there are people who see need as an opportunity for gain. This occurs with taxi drivers taking a longer-than-necessary route and cashiers not bagging items that were purchased and/or not providing correct change. For the project team, it was most shocking to discover that in some areas, family and friends who are going into town for their own business will charge exorbitant fees to take others with them. On top of that, they expect payment for gas and lunch while there. We even heard stories of vehicles breaking down and owners demanding payment for repairs. Unthinkable!

Unable to get to/from work
In every group that was interviewed, there were individuals with developmental disabilities that wanted to work but were not able, because of a lack of transportation. These individuals expressed a desire to make money and be an active part of the community. Workers and caregivers typically told us of employers in the area that were willing to hire, but transportation was largely not available to the location or service hours were inadequate.

Working negatively affects government assistance
On the other side of the coin, many individuals would like to work, but will not try, because their government assistance would be reduced (at best) or lost, which may include healthcare benefits.

Regular use of taxicabs is not feasible
Taxicabs are nonexistent in most of Alabama, except in larger urban areas. Where they do exist, companies often are not in business very long, making it an unreliable option. Also, taxi rides are quite costly, making it infeasible for regular use (i.e., to work).

No travel spontaneity
For most Americans, a car is an appendage; it is part of us, an extension of our personality, and we think we deserve to have one. We use it to go where we want and when we want. For individuals without a vehicle, simple trips are difficult and there is no such thing as spontaneity. Every trip takes advance planning and is usually a result of necessity, rather than pleasure.
Desire for better access to social and recreational activities
As mentioned above, because of the need for advanced trip planning and feelings of being a burden to others, social and recreational activities are seen as optional and, as such, are insufficient unless an individual participates in a day program. Even then, participants expressed a desire to get out more at nights and on weekends to visit friends and significant others, or to go somewhere just for fun (e.g., movies, fishing, bowling, concerts, etc.).

Feelings of isolation
Individuals with developmental disabilities who do not work or attend day programs expressed a struggle with feeling isolated—especially in large urban areas. Being without access to transportation results in an emotional downward spiral. A lack of personal interaction leads to feelings of isolation that can lead to feelings of despondency and a lack of motivation and drive.

Medicaid payment for transportation is unsatisfactory
Transportation providers expressed their frustration in dealing with Medicaid. The amount paid for a trip is only a fraction of the true cost, leaving providers to bear the remainder. Another issue is that payment is sporadic and unpredictable. As such, providers have ceased supplying service for Medicaid. This is understandable from a provider’s perspective, but increases the transportation hardship on the Medicaid consumer.
3. Public Transportation Providers

The project team put significant effort into identifying and interviewing public transportation providers in every county. The directory is organized by county and contains contact information, type of service, hours, starting cost, and whether or not they accept Medicaid. If the line is blank, no public transportation is available in that county. Private for-profit providers are not included. A glaring service gap exists on nights and weekends. The Directory of Public Transportation in Alabama is available for download at www.rpcgb.org/transportation/dd.
4.  Review of Plans

Plans were gathered from agencies that affect or have a connection with transportation for individuals with developmental disabilities. These plans were reviewed to develop a broad understanding of their goals and strategies, and to ensure compatibility and cohesion of proposed alternatives resulting from this study.

Alabama Council on Developmental Disabilities
The ACDD recognizes that transportation is a critical need and specifically addresses it in Goal 1, Objective 2 of its Draft Goals and Objectives – 2017-2021:

   By 2021, ACDD will collaborate with transportation agencies, state and local agencies, organizations, and advocacy groups to identify and implement strategies to eliminate barriers to transportation for people with I/DD and others in targeted communities.¹

Alabama Department of Mental Health
Under the direction of the ACDD, there are 37 local 310 Boards that have been statutorily established to plan and oversee the provision of mental health care in a designated geographic area. All of their strategic plans were reviewed, with a focus on transportation matters.²

There were four general areas identified in the plans that were either directly or indirectly related to transportation: transportation, accessibility to care, employment, and telemedicine. Most of the plans identified needs and goals. Twelve of the 37 boards specifically mentioned transportation as a need, but only six included it in their goals. Many mental health agencies have vehicles to transport their clients, but only a couple also provide community transportation. So it is understandable that 310 boards did not have goals directly related to transportation, as they have little control over it. On the other hand, many plans had goals that attempt to address part of the transportation need by other methods, such as increasing community care centers and telemedicine efforts, and reducing wait lists.
An increase in employment opportunities was often mentioned as a need and/or goal; however, without adequate transportation, this goal cannot be met. It should also be noted that nine of the plans made no mention of any of the four areas listed above, i.e., transportation, accessibility to care, employment, and telemedicine.

**Human Services Coordinated Transportation Plans (HSCTPs)**

Human Services Coordinated Transportation Plans (HSCTPs) are developed by regional planning commissions through an inclusive process that involves representatives from public, private, and nonprofit transportation and human services providers, as well as the public. The intent of each plan is to bring affected people to the table to discuss human services transportation issues and identify opportunities to assist more people, reduce service gaps and overlaps, and increase cost effectiveness of the services provided.

Evaluation initially began by collecting and reviewing the HSCTPs from the 12 regional commissions in Alabama. These plans contain information on demographics, public transportation providers, human service organizations, barriers, service gaps, and strategies for improved access to transportation.

**Barriers and Service Gaps**

A review of the HSCTPs showed that regions across the state identified substantially similar transportation barriers and service gaps, despite population density or availability of services. Many of these findings are duplicative of the findings from the surveys and meetings listed above.

*Limited service days/hours/frequency*

In Alabama, fixed route service generally runs on an hourly schedule and stops after 6:00 pm weekdays (except in Birmingham, Mobile, and Montgomery). Only Birmingham, Calhoun County, Gadsden, Mobile and Montgomery operate on Saturday with a reduced schedule. Sunday service is not available anywhere in Alabama. Demand response service is even more limited, operating only on Monday through Friday, generally between 7:00 am and 4:00 pm.

*Public transportation is not available in some areas*

Most rural demand response transportation serves the entire county, but there are numerous places where no service is available or where service is restricted to city limits or a specified radius.
of the city center, leaving many residents stranded. Fixed route service attempts to cover those areas and facilities in a city that generate large traffic volumes (e.g., shopping centers, colleges, medical centers, etc.), but cannot cover every desired location for pick-up and destination.

**Lack of transportation alternatives**
Approximately two-thirds of the counties in Alabama have a demand response (door-to-door) bus service; larger urbanized areas have fixed route, taxi, and Uber services (Birmingham, Huntsville, Mobile, and Montgomery). Eleven counties have no transportation available to the public: Bullock, Butler, Coffee, Crenshaw, Dale, Elmore, Fayette, Geneva, Henry, Lamar, and Randolph.

**Public transportation is not affordable**
Although many plans cite a high cost for public transportation services, this is simply not true. According to AAA, the average cost per mile of driving a car (including, fuel, maintenance, insurance, license, etc.) is approximately 57.1¢. A one-way trip of 10 miles would cost $11.42 to drive. The average cost to make the same trip on a fixed route bus is $2.00, and for demand response (door-to-door) it is $6.00. This makes public transportation an affordable and attractive alternative!

**Infrastructure is not friendly for bicycle/pedestrian use**
Sidewalks and bike lanes in Alabama are, for the most part, nonexistent, making it necessary to walk and ride in streets or in other areas not designed for pedestrians or cyclists. For individuals living within a few miles of a town or grocery store, walking or biking is an obvious and convenient choice. But when walking or biking on a narrow two-lane road where vehicles are traveling in excess of 55 miles per hour, a driver may not see an individual until it is too late, especially if the driver is reaching the top of a hill. It can be especially dangerous for individuals with developmental disabilities, because their assessment of vehicle distance and speed may not be accurate, and reaction time may be slow.

**Service is unreliable**
Whether fixed route or demand response, untimeliness and vehicle breakdowns cause frustration for the rider and require a back-up plan for anyone using the system on a regular basis.
Unable to travel between counties/states
There is no regional, reciprocal transportation, meaning no pick-up of new passengers in an adjacent county to bring them back to the county of origin. Public transportation in Alabama only crosses the state line at Phenix City, Alabama and Columbus, Georgia (sharing an urbanized area), even though it may be more convenient and cost effective to do so in other places as well.

Insufficient number of ADA-accessible vehicles
For fixed route service, every vehicle must be ADA equipped. But for some door-to-door services, this is not true. High costs associated with accessible vehicles and their lesser demand makes it undesirable for every vehicle in a provider’s fleet to be ADA equipped. At times when the demand is greater, a rider needing an accessible vehicle may have to wait longer or may have to schedule their trip for another day or time.

Demand response trip time is excessive
Anyone riding on demand response public transportation will experience long trip times. To begin with, a 30-minute window of time is given for pick-up. That means the bus is supposed to arrive sometime between 15 minutes before the assigned pick-up time and 15 minutes afterward. After boarding, the bus may pick up and drop off several more people before the rider gets to the desired destination. The return trip may take even longer, depending on the schedules of other riders.

Stable funding; rising costs
Over the years, funding for transportation has remained fairly stable, but costs have increased. As a result, it has been necessary to reduce service times/frequency/areas to accommodate for this financial gap.

Inadequate training of dispatchers and drivers
Disabilities are not always obvious. Drivers and dispatchers need better training on how to effectively assist passengers and how to react (or not react) to certain behaviors. Taking a trip independently can be confusing (whether on a big bus, small bus, or car). It is important to make every passenger feel comfortable and able to reach their destination safely, without incident.

 Unsatisfactory and untimely Medicaid reimbursements
Payment by Medicaid to transportation providers is only a fraction of their cost, leaving the provider to bear the remainder. In addition, payment is sporadic and unpredictable. As such, providers have ceased supplying service for Medicaid. This is understandable from a provider’s perspective, but increases the hardship of transportation for the Medicaid consumer.
Demand is greater than the supply
Door-to-door transportation takes a lot of time and requires reservations to be made a minimum of 24 hours in advance. Sometimes the schedule is full and a request cannot be accommodated with only a day’s notice. Riders quickly learn that the sooner a trip is booked, the more likely it is that space will be available.

Many people are not aware of available service
Because the demand is greater than the supply, many public transportation providers do not advertise their services or engage in any marketing efforts. In some places it is a challenge to locate the name and phone number of a provider, even when there is knowledge that a service exists in the area.

Numerous and duplicative services
Numerous agencies receive funding for transportation (senior centers, VA, social service, mental health, schools, etc.). Some choose to use the money to purchase vehicles and provide transportation for their own clients; others purchase transportation for their clients through public or private providers. Many of these clients are in close proximity to each other’s pick-up or destination points, resulting numerous and duplicative trips.

Dishonest gain
Unfortunately, there are people who take advantage of others for personal gain, especially when the individuals are mentally or physically compromised. This happens when drivers take a long route or do not providing correct change, or when family members and friends benefit by charging excessive amounts for travel, because there are no other options.

Stigma of public transportation
There are no triggering factors anywhere in Alabama to encourage a person to use public transportation (i.e., lack of parking, high cost of parking, excessive congestion). As such, public transportation is generally used only by individuals who do not have access to transportation. This results in a perception that it is a service just for individuals who are impoverished or disadvantaged.
Strategies for Improvement

The HSCTPs also identified strategies for closing service gaps, as outlined below. Note that regional commissions are, by regulation, set up to provide direction and assistance to local governments, and do not have the authority or power to implement most of the strategies.

Establish a central call center/mobility manager

The ultimate goal for human service transportation is to have one coordinator that schedules all of the transportation services in a region. This makes it convenient for the consumer, reduces duplication of service while promoting efficiencies for the provider, and results in substantial cost savings.

Reduce duplication of service by promoting coordination of existing resources

A cursory review of all agencies that have used federal transportation funding for capital equipment and operating assistance reveals overlap, duplication, inefficiencies, and potential opportunities for coordination of resources.

Organize volunteer networks and involve faith-based organizations

The use of volunteers and faith-based organizations is rarely being utilized in Alabama. Some of the reasons cited are insurance complications and fear of lawsuits. However, these can be overcome. For more information about establishing a volunteer driver network, see Chapter 7.

Support efforts to establish state transit funding

Alabama is one of only four states (including Arizona, Hawaii, and Utah) that has no funding for public transportation. In fact, Alabama’s constitution actually precludes allocating funds for this purpose. Elected officials, ALDOT staff, and the general public need to be educated about the benefits of public transportation and the harmful effects of this constitutional prohibition.

Support efforts to combine transportation funding

A breakdown of agency funding (VA, seniors, health department, mental health, etc.) reveals an allotment for transportation as part of their allocation. This allotment is generally part of a lump sum contribution, and is often not used for transportation. Pooling of transportation dollars would result in greater productivity.

Develop education/outreach programs

Despite the fact that demand is greater than the supply, the availability of public transportation services (including agency phone numbers, service area, who can ride, how to schedule, operating hours, and cost) should be easily available to everyone.
**Improve service reliability, driver training, and communication**
Reliability, training, and communication involves work done prior to a passenger trip. Reliability is dependent on good maintenance. Drivers need ongoing training in customer service, operations, medical emergencies, safety, and manifestations of various disabilities. Communication among riders, dispatchers, and drivers is essential for smooth delivery and continuity of service.

**Expand service days/hours/frequency/area**
Expansion of service requires additional funding. However, there may be ways to reach unmet needs by using nontraditional methods. See Chapter 6, Service Alternatives.

**Encourage transportation alternatives**
There are multiple ways to deliver transportation; there is no such thing as "one size fits all." See Chapter 6, Service Alternatives.

**Assist providers with route and service development**
Regional councils should work with transportation providers and transit agencies to assess route viability and provide suggestions for alternative delivery methods. See Chapter 6, Service Alternatives.

**Use technology**
Scheduling software, mobile data terminals, and vehicle tracking all aid in service delivery and information to consumers, resulting in cost efficiencies and customer satisfaction.

**Examine potential for coordination across county/state lines**
There are many places in Alabama where it makes sense to coordinate across county lines. A good example of this is in Baldwin and Mobile, where BRATS and WAVE transit systems worked together with organizations and individuals from both sides of the bay to institute Baylinc.

**Create and use survey data to develop additional strategies**
Survey data is not only useful for painting a picture of what is happening, but should also be used to develop options for more appropriate delivery of services. Finding out what people need and want—where they travel most, when they travel most, where they are unable to travel—in a particular geographic area is helpful for effective service development.
**Work with local school systems to identify and recruit drivers**
Recruiting drivers is difficult and it is costly to get background checks, motor vehicle reports, drug testing, and physical examinations. Schools already perform this screening, and their bus drivers generally work part-time in the mornings and afternoons. This means they may be interested in driving part-time for another agency.

**Create networking opportunities for agencies and transportation providers**
Sometimes simply having open communication between users and providers can result in simple changes with big impacts. Third parties (like regional councils) can often be the conduit for this exchange.

**Research effect of increasing fares (elasticity)**
Most transportation providers do not want to raise fares, because they fear that riders will not be able to use the system. In fact, the American Public Transportation Association (APTA) estimates a value of -0.43 for the elasticity of ridership with respect to fare (for systems serving areas with populations of less than one million). The elasticity of ridership with respect to level of service as measured by vehicle miles is +0.61. The elasticity measures are interpreted as follows: a 10 percent increase in a transit fare would result in a 4.3 percent decrease in ridership, while a 10 percent increase in the service would generate a 6.1 percent increase in ridership. These elasticities show that, generally, transit riders are more sensitive to service levels than fares.

**Develop education/training for passengers**
Riding public transportation can be intimidating if a person has no previous experience. As part of this study, a training video has been created that demonstrates how to use transit and Uber. The video is available for viewing and can be downloaded at www.rpcgb.org/transportation/dd. The video is intended to provide helpful insight, but works best when accompanied by hands-on training.

**Use common origin-destination points to coordinate services**
Instead of several providers all covering the same area, attempt to organize smaller service areas with common origin and destination points where transportation can be coordinated, rather than duplicated.

**Support road improvements and access**
Poor access and road conditions cause increased trip times, adding to inefficiencies and rider frustration.
**Work with healthcare providers regarding scheduling**

In rural areas, rather than trying to cover every area every day, it is much more efficient to provide service to/from specified areas only on designated days of the week. If healthcare providers know a patient uses public transportation, they are generally very willing to accommodate the transit schedule. See Chapter 6, Service Alternatives.
5. Research

A review of published writings was conducted with regard to transportation, its impacts, what is being done in other states, and best practices. Significant findings are noted below.

Transportation and economic development are interconnected
Transportation, as a whole (passenger vehicles, freight, ports, rail, airports, transit, etc.), provides the basis for economic development. “Transportation is a measure of economic activity. . .physical movements precede financial transactions”.7 Efficient transportation systems provide opportunities and benefits that have a domino effect, i.e., employment, accessibility, and additional investments. On the other hand, deficient transportation systems have an economic cost, such as reduced opportunities and a lower quality of life.8

Transportation funding is inadequate
America’s transportation system is in dire need of repair and investment. The building of infrastructure that began in the mid-1900s was never intended to carry current loads, and funding for maintenance (without expansion) has fallen behind. In 2015, Anthony Foxx, Secretary of the US Department of Transportation, said that it would take $400 billion over the next six years just to maintain the current system. Yet, the most recent transportation bill budgeted only $325 billion for six years.9 This shortfall will eventually force a shift to mass transportation, which is also in a state of decline.

Technology is not being utilized
Public transportation systems in the State of Alabama are not using technology to gain efficiencies in delivery, cost, and customer service. A report by the Center for Urban Transportation Research states that “utilizing available technologies including mobile data terminals (MDT), computers, vehicle locator devices, geographic information systems, smart card technologies, and computerized scheduling and dispatching software, service can be provided more efficiently and overall costs can be lowered.”10
Scheduling software can have a significant impact in cost reduction by reducing time spent by dispatchers and drivers. Yet, in Alabama, scheduling software is pretty much only being utilized by fixed route complementary paratransit systems in the urbanized areas and by Kid One. MDTs are in every vehicle and instantly advise the driver of updated schedules due to delays and/or cancellations. Rural transportation providers could benefit greatly from both, because of the long headways and trip lengths.

Global Positioning Systems benefit consumers by letting them know real time information about the location of a vehicle and when it will be arriving. In addition, trip planning and online payment are helpful and convenient for riders.

Most transportation providers will tell you they don’t have the funds to spend on high-tech tools. However, cash-strapped agencies would see their dollar stretch further and customer satisfaction increase if new technologies were implemented.

**No state funding for public transportation**

Alabama is one of four states (including Arizona, Hawaii, and Utah) that have no funding for public transportation. In fact, Alabama is the only state that actually prohibits funding via constitutional mandate. In a state that is largely rural and has a low average income, this should be a priority.

**Minimal consideration for active transportation**

Infrastructure for bicyclists and pedestrians in Alabama is disconnected, in disrepair, and generally nonexistent. This means that anyone who wants to ride a bike or walk to a destination must share the road with vehicular traffic. The majority of roads where this would occur are narrow, two-lane roads with curves and hills, limiting sight distance. Individuals with developmental disabilities often have difficulty judging distance and speed, and could become confused in a compromising situation. Another consideration should be for Millennials, who typically support and prefer non-vehicular options for commuting.

**Health care benefits**

Perhaps the main benefit of public transportation is that it is directly linked to improved health care. Since Alabama consistently ranks in the top five least healthy states, this is particularly important. These health care improvements are seen in a range of areas.
• **Increased physical activity**
The Center for Disease Control (CDC) recommends 22 minutes of physical activity per day to stay healthy.\(^\text{11}\) Most public transportation passengers meet or exceed the recommended amount while walking to and from stops/stations.

• **Access to medical services and healthy food**
Increased accessibility to medical services reduces the frequency of rescheduled or missed appointments, delayed care, and missed or delayed medication use, which result in greater need for medical attention and hospitalization. Preventive care is practically non-existent when transportation is not readily available. Transportation can also be a factor in better nutrition, by providing accessibility to fresh fruit and vegetables.

• **Proper use of ambulance services**
One of many reasons for the misuse of ambulance services for nonemergency needs is because people do not have access to transportation. Not only does this result in trickle-down costs, but also causes a false overstaffing of ambulances and delayed care for patients with urgent medical problems.

• **Better air quality**
Exposure to traffic emissions has been linked to many adverse health effects including: premature mortality, cardiac symptoms, exacerbation of asthma symptoms, diminished lung function, increased hospitalization and others.\(^\text{12}\) Public transit use reduces pollution emissions, resulting in increased air quality and better health.

• **Improved mental health**
Getting outside, walking, and relaxing on public transportation, instead of driving in traffic, improves overall mental health.

**Less congestion; fewer crashes**
Traffic casualty rates decline as public transportation travel increases.\(^\text{13}\) Using public transportation results in fewer cars on the road. Fewer cars on the road results in fewer crashes.
Everyone benefits
Public transportation benefits everyone, not just users. As mentioned above, public transportation increases air quality and decreases congestion. People often think they would never use it, but in the event of a car breakdown or a physically/mentally limiting condition, it may be the only viable option, and it will be appreciated!

Disaster preparedness
In the event of an impending disaster (e.g., hurricane, flood, wildfire), public transportation vehicles can be utilized for evacuation to safety and shelter. An impending disaster commonly results in road overcrowding and gridlock, causing the stranding of people who are trying to evacuate.

Volunteers
A volunteer driver program involves individuals in the community providing rides to other community members who need transportation. This can be a cost-effective way to address transportation needs that may not be well-served by more traditional transportation methods. See Chapter 7, Establishing a Volunteer Driver Program.

Florida’s Commission for the Transportation Disadvantaged
The Florida Legislature created the Commission for the Transportation Disadvantaged (CTD) in 1989. The TD program is a coordinated statewide effort which groups riders together for a shared ride service. By definition, individuals who are “Transportation Disadvantaged (TD) are those persons who, because of age, income, or disability, are unable to transport themselves or purchase transportation.” Transportation services are available in all 67 Florida counties for those who are eligible. In other words, everyone in Florida lives within the service area.

The CTD sets policies and provides direction in the areas of quality assurance, technical assistance and training, contract management, and financial accountability. The CTD also administers the TD Trust Fund and implements all statutory provisions. Trust Fund contributions come from the Agency for Health Care Administration (Medicaid), motor vehicle registration fees, Public Transit Block Grant, FDOT State Transportation Trust Fund, and the Department of Highway Safety and Motor Vehicles.

Each county has a designated coordinator and planner to effectively manage the delivery of transportation services in, across, and through their counties. Multiple funding sources/agencies—CTD, Agency for Health Care Administration (Medicaid), Agency for Persons with Disabilities, Department of Elder Affairs, Department of Education, Department of Children and Families, Department of Health, Agency for
Workforce Innovation, Court of Appeals, and others—purchase transportation directly through the local coordinator. This direct coordination results in financial savings, efficiencies in service delivery, reduced fraudulent activity, and a comprehensive, statewide service area.

By far, this is the best example of coordinated transportation anywhere in the United States, and was recognized by the USDOT as a best practice model.
6. Service Alternatives

Public transportation is not “one size fits all.” Every type of transit has a niche and a travel need that it serves. When planners and politicians fail to recognize this, they build projects that fail to meet the needs of the people. A lack of understanding about appropriate transit type may stem from the car culture prevalent in the U.S., where most people have little experience with public transportation.

A motorist can use the same car to drive to a destination three blocks away, across town, or 500 miles away. To go longer distances, most drivers will use a freeway for faster travel while avoiding traffic control devices that exist on at-grade roadways. When traveling 500 miles or more, many prefer to fly rather than drive. The mode of travel usually depends on the purpose and distance of travel.

Such decision-making also applies when it comes to public transportation. In a number of cities around the world, multiple forms of public transportation can be found. People living in those cities choose different modes based on trip distance and purpose. For example, a rider would not expect a local bus to go fast, as it is designed to serve local destinations with stops located every few blocks. But even with buses, there is a wide variety of employment, depending on whether it is used for local service or commutes of 20 miles or more. In the case of the latter, vehicles with cushionier seats and a single door are often used.

In small urban areas, flexible transportation serves individuals with disabilities at a lower cost than demand-response. Also, in suburban communities, flexible transportation that uses small buses may encourage first-time users to leave their cars at home and utilize public transit to connect with regional destinations.

Public transit alternatives are limited only by the extent of one’s ideas. Ideas are usually generated by need and/or problems in an effort to create solutions. Therefore, depending on the situation and location, nearly any proposed option for public transportation could work. Listed below are some of the more common public transportation alternatives easily viable in Alabama. As such, rail is not included herein.
**Fixed Route**

Fixed-route bus service is the most widely-used mode of public transportation in the United States. Service is provided along a specific route with scheduled arrival/departure times at predetermined bus stops. One variation for low-density or rural areas is periodic scheduling, where buses serve different areas on different days of the week. Since the Americans with Disabilities Act of 1990 (ADA), all vehicles used for fixed-route public transportation must be wheelchair accessible, for equal access to all individuals.

Fixed-route systems are generally effective in meeting travel demand for intra-urban and suburban-urban trips, but are less useful in generating suburban-suburban and rural trips, as well as trips for the elderly and persons with disabilities. (Even though all public transit vehicles are ADA accessible, many individuals who are elderly or disabled are unable to get to the bus stop.) The basic advantages of fixed-route transit are that no reservations are required to access the service, no passenger screening or registration is needed (except for discounted fares to certain population segments), and large numbers of people can be transported at one time in a single vehicle. Disadvantages include system access limitations due to predetermined stops and schedules, difficulty of access for seniors and patrons with disabilities, and large buses may be perceived to be aesthetically displeasing, especially in suburban or rural areas.

**Deviated Fixed Route**

In a fixed-route system with deviation, a vehicle operates along a fixed route, making scheduled stops. Upon advanced request, vehicles will deviate from the route to pick up and drop off passengers within a specified zone. After deviating from the fixed route, a vehicle returns to the fixed route, serving the following scheduled stop from the point at which it departed. This procedure ensures that the vehicle does not skip any portion of the fixed route. In the event that no requests for deviation are received, the vehicle operates identical to a fixed-route service.

Deviated fixed-route service is the most common type of flexible public transportation service. It is most cost effective for use in smaller urban and rural communities. Route deviation may also be appropriate on lengthy routes with long headways and low ridership, or in areas where most origins and destinations are concentrated around a specific corridor. Although the cost per revenue mile of service is often higher for route-deviated systems, the cost per passenger trip is normally less. Cost savings are also realized because it eliminates the necessity for
complementary paratransit service along the route. Routes that deviate ¼ mile from the fixed route are considered demand responsive, and meet the requirements for provision of service under ADA.

**FIXED ROUTE WITH POINT DEVIATION**

Vehicles in point deviation systems serve designated stops or time points on a fixed schedule, but the route that the vehicle takes between time points is determined by the deviation schedule. Point deviation service is similar to demand response service, in that vehicles pick up and drop off passengers at their desired locations. However, point deviation also serves specific points on a fixed schedule. Requests for deviation are made to a system reservationist and/or scheduler. Typically, a limit is set for the number of deviations that can be accommodated within the time point schedule, filled on a first-come, first-served basis.

Point deviation works best in rural or suburban areas and usually operates with smaller vehicles than those used on traditional fixed-routes, due to the need to travel on residential streets. In more urban areas, point deviation may be implemented to provide access to fixed routes utilizing a time transfer system. Like deviated fixed-route service, point deviation is considered to be demand-responsive and does not require additional complementary paratransit service.

**EXPRESS BUS**

Express service connects a number of areas with the Central Business District or other major destinations. Service typically operates on a fixed route during morning and afternoon peak travel times. Routes often use freeways or major arterials and make fewer stops, creating more predictable and faster trips. Upgraded buses are often used, offering comfort and amenities such as Wi-Fi and luggage racks.

**BUS RAPID TRANSIT (BRT)**

BRT is a fixed-route bus mode operating in a dedicated or separated right-of-way for public transportation use (see picture at right). It provides high-speed bus service, regardless of traffic conditions. BRT combines the advantages of rail transit with the flexibility and lower capital cost of bus service, often using signal priority to minimize delays at intersections, and having features such as high-quality shelters or off-board ticketing.
**Paratransit**

Paratransit is defined as transportation service that supplements larger public transit systems by providing individualized rides without fixed routes or timetables. Primarily, paratransit service is based on demand and supplements the fixed-route in order to accommodate those persons who are unable to utilize conventional fixed-route bus service. Such services usually require previous-day, advance reservation.

Paratransit can be used as a feeder to a fixed-route bus system, or can be used where fixed-route ridership or cost effectiveness is low. Demand response service can be provided by taxis, vans or minibuses. In addition, service can be supplied through contracts with various providers including nonprofit agencies, for-profit transportation companies, volunteer organizations, and transit agencies.

Advantages of demand-response include door-to-door (or curb-to-curb) service, the ability to serve a larger geographic area, route flexibility, smaller and more comfortable vehicles, and the accommodation of individuals with special needs. Disadvantages include shared use of the vehicles, no direct travel between individual passenger origin and destination, a high degree of dispatch coordination, increased expenses, higher fares, and longer travel and wait times.

**DIAL-A-RIDE**

Dial-A-Ride (DAR) refers to demand-responsive, door-to-door or curb-to-curb service that is provided to the general public without regard to the functional ability of passengers. Customers request a trip in advance, are picked up at their origin, and dropped off at their destination. DAR usually takes one of three forms: (1) many-to-one (many origins to one destination); (2) many-to-few (many origins to a few destinations); or (2) many-to-many (many origins to many destinations). General public DAR is the most personal alternative to fixed-route service, but also the most expensive. DAR meets the requirements for provision of service under ADA and works best in low-density areas.

**Feeder Service**

Feeder service involves picking up passengers at a point of origin and transporting them to a bus stop. Vans or small buses are typically used for feeder service. One segment of the trip—either the portion from home to the stop or the fixed-route portion—is generally fare free. That is, passengers are charged a fare for the demand response portion of their trip and receive a free transfer to the fixed-route system or vice
versa. Upon arrival at the stop or station, the passenger disembarks and boards a fixed-route vehicle. The passenger then travels on the bus to a stop closest to the final destination. A third leg requiring feeder service may also be necessary to reach the final destination. Where point-to-point service is provided, careful scheduling is required to minimize wait times at transfer points.

When feeder service is used to provide ADA paratransit service to feed into the fixed-route system, it is important to understand that feeder service is not cost-effective for short trips. The longer the trip, the greater the cost-savings that may result from substituting a portion of the paratransit trip with fixed-route service. Therefore, suburban to urban or rural to urban trips are typically better candidates for feeder service than intra-urban trips.

**ZONE ROUTE**
Zone routes are demand response vehicles that operate along a corridor with established departure and arrival times at one or more endpoints in the zone. This is effective when there is not a defined corridor to travel, but specific a specific origin and/or destination that exists within an area.

**SHUTTLE SERVICE**
Shuttle Service picks up at one or more designated locations and drops off at one or more designated locations, often on a continuous basis. Usually, they connect major activity centers, such as an airport and downtown, stopping only at specified locations, such as hotels or car rental agencies. Shuttle service may also be provided during periods of unusually high demand, like special events, to move people between the event location and parking areas. Shuttles may be free or require a fare.

**Rideshare**
When fixed route and/or paratransit service is nonexistent or impractical, other solutions to driving alone may be viable. Ridesharing is the shared use of a vehicle by two or more persons for the purpose of traveling to work, school or other locations. Vehicles used for ridesharing include privately-owned automobiles or vans, or publicly-owned vans or buses (carpools, vanpools, or buspools). Trip origins and destinations of riders may vary. Passengers may share fuel, tolls, and parking expenses, and driving may be a rotated duty. Although riders most commonly
are people from the same household or neighborhood, a ride matching service operated by employers, a regional commuter assistance program, or transportation agency can facilitate ridesharing arrangements.

An emergency guaranteed ride home program (GRH) is generally considered crucial to the success of ridesharing. Many people are reluctant to rideshare for fear of being stranded at work in case of an emergency. Anxiety over ridesharing is reduced by guaranteeing participants a ride home in the event of a personal emergency or in the event an employee must work overtime. The guaranteed ride can be provided by taxi, short-term auto rental, company-owned car, shuttle service, or public transportation.

Ridesharing success is increased when:
- Travelers find others with similar schedules and points of origin and destination
- Trip distance is greater than 20 miles or trip time is 30 minutes or longer
- Parking is limited or unavailable
- Parking is expensive
- A guaranteed ride home program is offered
- Employers subsidize the cost of ridesharing
- Employers offer preferential parking and flexible work schedules for ride sharers

Ridesharing is a great option for individuals with developmental disabilities who hold full time jobs or travel to the same location on a regular basis.

**VANPOOLS**

The levels of carrying capacity, flexibility, costs, and convenience are in between those of transit and carpools. A vanpool typically consists of 7 to 15 people traveling together in a passenger van. The commuter vanpool concept typically works best for commuters traveling a distance of at least 20 miles. Vanpools are particularly effective in situations that include outlying work destinations with little or no public transit service. Therefore, commuter vanpools can be an effective alternative for workers with similar trip patterns and schedules. Vanpools may also be effective for employment sites that need workers on shifts that fall outside of a fixed-route service area.
Vanpool programs can earn federal and state formula funding by reporting the mileage to the National Transit Database. This revenue can be greater than the investment in the vanpool program, making the program a revenue generator. CommuteSmart is available in Birmingham, Huntsville, Mobile, and Montgomery to coordinate vanpool vehicles and provide rider matching services. CommuteSmart works with employers that often provide financial incentives to employees participating in vanpool programs. See www.CommuteSmart.org.

**CARPOOLS**

Carpooling is defined as two or more persons sharing a ride in a private vehicle. Census data show that, next to driving alone, it is the most prevalent commute alternative in the United States. Carpooling was first encouraged in this country during World War II, due to petroleum and rubber conservation measures. It has been promoted since the 1970’s in response to energy crises and as an air quality transportation control measure.

The matching processes for carpoolers range from sophisticated computerized systems to informal arrangements. More effective matching systems usually include information on specific origins and destinations, schedules, and travel routes. A sufficiently large pool of potential commuters is important for securing good matches. Carpools targeting commuters at the work site seem to be more effective than those focusing on residential areas. Trip time and trip length are determining factors for carpool success. Commutes with a distance of 24-54 miles or those averaging a minimum of 30 minutes attract the largest proportion of carpoolers.

A major advantage of carpooling is that it has the convenience of a private automobile. In addition, responsibilities for driving are shared among the carpoolers. However, there are some disadvantages when compared to driving alone. These include the necessity for set schedules, the constrained ability for individuals to run errands, and increased commute time (due to picking up additional passengers). In addition, some commuters feel that carpooling deprives them of their private time. CommuteSmart is available in Birmingham, Huntsville, Mobile, and Montgomery to coordinate carpools and rider matching services. See www.CommuteSmart.org.
**JITNEYS**

Jitney service usually consists of privately-operated vans carrying up to 15 passengers, operating on semi-fixed routes on a fairly regular basis. Most often, they operate on major thoroughfares, picking up passengers anywhere along the corridor. For an extra charge, they may deviate from the thoroughfare to deliver passengers to their homes. Jitneys usually do not follow a set schedule, but tend to stop less often than vehicles on conventional bus routes.

Jitneys can serve several functions. In major urbanized areas, jitneys operate to relieve overcrowding. In this capacity, jitneys can attract many passengers from the fixed-route public bus system who have been left at the bus stop due to capacity constraints. Another role for jitneys is to provide services in low-density areas where existing bus operations do not exist or fall below acceptable minimum standards. In both of these cases, service is usually negotiated by the transportation operator.

Jitneys can also work with the existing public transportation system by serving as feeders. In this case, jitneys pick up passengers in residential areas and deliver them to the main line of the bus system. Another way jitneys can function is as the primary providers of community-based transit. In this scenario, jitneys connect residents of low-income neighborhoods to medical centers, shopping centers, community activity centers, and other nearby destinations. Finally, jitneys may act as activity center connectors, traveling in and around areas of major commercial activity, such as employment centers and tourist attractions.

**Volunteer Programs**

Typically, volunteer programs try to match requests for transportation with the geographic area in which a volunteer driver or vehicle is available. This type of program can be effective for trips that are difficult or expensive to provide by using other modes. A volunteer organization can also help in providing an attendant service to citizens who live within the service area of a fixed-route or paratransit system, but need help in utilizing the service. The retired community is a good resource for volunteers. Volunteers gain personal satisfaction from helping others with restricted mobility. The primary drawback to this type of service is the need to locate and retain a pool of reliable volunteers.

In the current climate of federal and state funding cuts, the use of volunteers within community transportation may prove to be a viable and cost-effective alternative. This situation may become critical in the future, as the demand for transportation continues to grow. For information about establishing a volunteer program, see Chapter 7, Establishing a Volunteer Driver Program.
7. Establishing a Volunteer Driver Program

A volunteer driver program involves individuals in the community providing rides to other community members who need transportation, typically seniors and those with disabilities. Such programs can be a cost-effective way to address transportation needs that may not be well-served by more traditional services. *Stories From the Road* tells another side of the story—the satisfaction and purpose experienced by the volunteers.

Successful volunteer programs are not free. They require an investment of time, resources, and energy. Although there are costs involved with starting and maintaining a successful volunteer program, they are minimal in comparison to relying solely on paid employees. It is important to note that the costs associated with volunteer programs and volunteer laborers are not limited to actual dollars, but also include the investment of time and energy. Critical components of successful volunteer transportation programs include, but are not limited to, organization, recruitment, screening, training, insurance, and possible reimbursement for mileage and/or meals.

**Considerations**

There are different ways to design a volunteer driver program, and various resources exist to provide guidance on implementing such a program. Volunteer driver programs can be established as a stand-alone service (e.g., through a newly formed nonprofit), as a new service of an existing nonprofit, or as a subset of a public agency or organization, such as a public transit system, regional planning organization, or senior services department of a local government.
Volunteer drivers may use their own private vehicles, or they may use vehicles owned by the program. Volunteers often receive reimbursement for the miles they travel in providing the rides. Reimbursement rates should adhere to Internal Revenue Service (IRS) rules governing non-taxable income (currently $.54/mile). Another option is for the volunteer to waive reimbursement and claim the IRS-defined charitable mileage rate when filing their tax return (currently $.14/mile). This is one of the first parameters to be addressed when planning a new volunteer driver program.

Below are some briefly-described considerations for beginning a volunteer program. Information and resources for assistance with planning, implementing, and evaluating a volunteer driver program can be found in the Tools and Resources section of this chapter.

**TRANSPORTATION INVENTORY AND NEEDS ANALYSIS**
Gather information about transportation options, needs, and challenges in your community. Conduct surveys and community meetings, and engage potential partner agencies, with a focus on how a volunteer driver program would fit within the community. This information is available through your regional planning organization, which can be identified at http://alarc.org/.

**PROGRAM DESIGN**
Determine an appropriate service model, including details like vehicle type and ownership, service boundaries, trip purpose, and rider eligibility. Develop driver and rider applications, policies, and guidelines. If applicable, develop a driver recruitment and screening process, and a driver training plan. Be aware that many programs struggle to recruit and retain volunteer drivers.

**FINANCIAL**
Prepare a business plan and budget that includes the identification of funding sources (sponsors, grants, etc.). The plan will also estimate staffing requirements, functions, and remuneration.

**INSURANCE**
Complete a risk analysis and develop a risk management strategy that includes the identification of insurance options and driver screening. Securing adequate insurance coverage and minimizing risk are important steps when forming a program. In the event of an accident, the personal auto insurance policy on the volunteer’s vehicle is the first line of coverage. However, the program may be liable if the damages exceed the volunteer’s insurance limits. The appropriate level of insurance will vary based on program design, i.e., whether the program recruits volunteers, schedules rides, pays drivers, or owns vehicles. Most programs have a minimum of $1 million of liability insurance. Laws
on volunteer liability vary by state. The Federal Volunteer Protection Act of 1997 offers some limits to volunteer liability, but they may not apply if the volunteers are operating a motor vehicle.

In addition to insurance, volunteer driver programs can limit their exposure by considering driver screening (criminal background, DMV check, drug testing, and insurance verification), driver training (defensive driving, first aid, CPR, injury avoidance), driver evaluation, and waiver forms.

**Marketing and Evaluation**
A marketing strategy will need to be developed for reaching potential riders, funders, and other transportation and human service agencies. Incentives and recognition programs encourage driver retention. Services that have been provided should be tracked and an evaluation process developed that includes feedback for volunteers and riders.

**Models**
Volunteer driver programs vary in structure, depending on community needs and program resources. Approaches differ by service span, rider payment, vehicles used, whether or not the driver is provided by the sponsoring program or identified by the person needing the ride, and driver reimbursement, along with other design characteristics. More common volunteer driver program models are outlined below.

**Full Service**
The full service model coordinates all aspects of the program, such as driver recruitment, screening, scheduling, reimbursement, etc. In this model, the sponsoring organization recruits volunteer drivers and schedules rides based on participant requests. Vehicles used are owned by either the organization or volunteers.

For smaller operations, *Google Drive* can be used to schedule rides and match riders with drivers. (For more information on *Google Drive*, see the Resources section of this chapter.)

**Example: Volunteer Transportation Network (VTN)**
Volunteer Transportation Network (VTN) is a good example of a full service, nationwide program established by the Department of Veterans Affairs (VA). VTN allows volunteers to provide transportation to veterans using a volunteer’s own vehicle or a government-owned vehicle, including donated vehicles, county vehicles, vehicles owned by the Disabled American Veterans (DAV), public transportation, and contracted
transportation. There are several programs that fall under the umbrella of the VTN, but the DAV program is set forth below as an excellent example of coordination, which could be replicated by the Alabama Department of Mental Health.

- **Disabled American Veterans** funds a coordinator at individual medical centers who is responsible for managing transportation services. The local DAV has a memorandum of understanding (MOU) with the respective VA medical center. Volunteer drivers transport veterans without any charge to the vet. Vehicles for the transportation program are purchased by or donated to the DAV. DAV then donates the vehicles to the VA medical centers which provide insurance, fuel, and maintenance. DAV does not acquire wheelchair accessible vehicles, because of liability reasons and the use of volunteer drivers.

Volunteer drivers are required to meet the criteria specified in the VA handbook for volunteer transportation, including a background check, physical exam, orientation, and driver training. There are no rider eligibility criteria, other than that the individual must be a veteran traveling to or from the VA for medical services.

During 2012, DAV volunteer drivers transported over 782,000 veterans and traveled over 27.5 million miles, donating 1.9 million hours!

**TRAVEL REIMBURSEMENT AND INFORMATION PROGRAM (TRIP)**

TRIP was created by the Independent Living Partnership in Riverside, California in 1993. The model is a self-directed mileage reimbursement transportation service for special trip needs or specifically defined populations. Passengers recruit their own drivers and rides are arranged between passengers and their drivers. The organization of the TRIP service results in very limited staff and infrastructure. During 2009, over 100,000 rides were provided at a cost per ride of $4.96. TRIP is easy to start, easy to operate, and has been adopted in various communities across the country. Information about the model, including manuals, is available at [www.ilpconnect.org/triptrans](http://www.ilpconnect.org/triptrans).

TRIP is a low-cost, low-maintenance program, having an estimated first year budget for a newly-organized program of less than $75,000. Its operations require limited staff and infrastructure because it does not involve recruiting volunteer drivers, screening them, or training them. Instead, TRIP helps riders recruit their own drivers from among friends and neighbors. This approach to risk management transfers volunteer driver risk away from the sponsoring organization. An assumption of the TRIP approach is that people already have some knowledge of the character and behavior of their friends and neighbors and that they will make rational choices about asking people to be their volunteer drivers. TRIP remains outside of rider and volunteer transactions, dealing only with riders who have recruited personal volunteer drivers.
Service characteristics include:

- Passengers choose and recruit volunteer drivers from friends and neighbors
- Volunteer drivers receive mileage reimbursement payments through the passenger
- Rides are scheduled by passengers and volunteer drivers when mutually convenient
- Transportation is provided in the volunteer driver’s personal vehicle
- Transportation is available 24/7, as agreed upon between passengers and volunteer drivers
- Travel can be provided to cities, counties, or states outside the passenger’s residence
- Rides are free to passengers

In 2011, the American Association of Retired Persons endorsed the TRIP model as a successful way of using volunteers without having to maintain a volunteer pool.

**INDEPENDENT TRANSPORTATION NETWORK®**

The Independent Transportation Network’s ITNAmerica is a membership-based nonprofit organization having about an even number of paid staff and volunteer drivers to provide rides. Membership fees and ride fares help the organization provide reliable, 24/7 service. Founded in 1990 in Portland, Maine, ITNAmerica only serves seniors (age 60 and over) and those with visual impairments in communities of 180,000 or more.

ITNEverywhere is ITNAmerica’s newest community transportation initiative for rural and small communities. ITNEverywhere will accommodate people of all ages, incomes, and abilities, including older people and those who are less tech-savvy. ITNEverywhere will solve transportation problems for everyone by combining rideshare, carshare, volunteer transport, ITN affiliates, and community transport.

ITNAmerica includes innovative features that are applicable to many communities pursuing volunteer driver-based transportation solutions. Individuals may trade in their vehicle for ride credits. Volunteers may earn ride credits for driving, which they can use in the future or donate to a fund for lower income riders. In addition, businesses and healthcare providers in the community are encouraged to contribute to the cost of each ride taken to their locations.
ITNAmerica offers live webinars geared toward organizations and individuals interested in learning about the model and the steps to affiliation. With topics like “How to Start the ITN in Your Community,” the webinars feature ITNAmerica national staff and the leaders of several ITN affiliates (http://www.itnamerica.org/whats‐happening/webinars). ITNAmerica also maintains an interactive website tool for policymakers and the public (http://publicpolicy.itnamerica.org/). The 50 State Policy Database allows for a search of laws in all states that remove barriers for volunteer drivers or that create incentives for the use of private resources, e.g., ridesharing.

**Resources**

For assistance with planning and implementing a volunteer driver program, the resources below will be very helpful. In addition, a simple Google search of “volunteer driver programs” will yield a wealth of material about existing programs across the United States and Canada. This is helpful to see what others are doing and whether or not a similar-type program could be reproduced.

*Community Transportation Association of America* provides examples of transportation programs that utilize volunteer drivers, information on local collaboration and decision-making, and principles of volunteer management.
http://web1.ctaa.org/webmodules/webarticles/anmviewer.asp?a=776

*National Volunteer Transportation Center*, under the direction of the Community Transportation Association of America, was created in 2014 in response to the outpouring of interest in volunteerism related to the delivery of transportation services to many population groups including children, workforce participants and older adults. The Center provides training and direction regarding volunteer programs.

*Volunteer Drivers Guide -- A Guide to Best Practices* is a comprehensive resource for planning and running a volunteer driving program. It was developed by the Washington State Department of Transportation in coordination with the Agency Council on Coordinated Transportation and other partners. It contains model forms, templates and attachments.

*Coordinating Council on Access and Mobility* is a partnership of federal agencies working to improve the availability, quality and efficient delivery of transportation services to people with disabilities, older adults and people with low incomes. https://www.transit.dot.gov/ccam/
Google Drive is a good option for organizing and sharing files, including driver schedules, for smaller programs that want a readily available way to match volunteer availability with rider trip requests. Google Drive’s initial 15 GB of storage is free to all users and increased storage is available with a monthly paid subscription plan. Google Drive uses cloud storage, so once documents are loaded, they are accessible from any computer, smartphone, or tablet through the Google Drive app.

Users of Google Drive say that they develop a schedule as far in advance as possible, in order to make the best use of their drivers, who may only volunteer once a month. Maintaining and distributing schedules with Google Drive helps administrators schedule trip requests as they come in and quickly respond to any changes, ensuring that clients are never left without a ride.

Wheels, a volunteer-driver program administered by The Little House in Groveland, California, uses Google Drive to organize its 38 volunteers who live throughout rural Tuolumne County. Drivers are invited to a shared folder that contains the monthly client trip schedule and pertinent driver, scheduler, and client information.
8. Funding Alternatives

Although federal funds are available to help finance a portion of transit service improvement costs, no funds are contributed by the State of Alabama, putting an added burden on local funding. This chapter will identify and evaluate potential public transportation funding options.

A frequently raised objective is the desire for equity or a fair and appropriate distribution of costs and benefits. Equity in transportation projects can be defined and measured using two major categories. *Horizontal equity* refers to the distribution of impacts between people who are similar in wealth, abilities, and needs. It assumes that similar people should be treated equally, which is often interpreted to mean that people should “get what they pay for and pay for what they get,” unless subsidies are specifically justified. *Vertical equity* refers to the distribution of impacts between people who differ in wealth, ability or need. It assumes that cost burdens should be smaller and benefits greater for physically, economically, or socially disadvantaged people. Policies that follow these guidelines are considered to be *progressive*. Those that impose higher cost burdens on disadvantaged people, by comparison, are called *regressive*.

Equity analysis can consider various types of impacts and group people in various ways. For example, road pricing is generally considered regressive, since a given toll represents a larger portion of income to lower income than to higher income motorists. However, lower income people tend to drive less than wealthier people, and they tend to rely more on alternative modes, particularly on major urban corridors. As a result, road pricing may be less regressive than other roadway funding options (such as general taxes), and may be progressive overall if it leads to improved alternative modes, such as increased investment in cycling facilities and transit services.

Horizontal equity means that a program’s beneficiaries bear its costs. Better vertical and horizontal equity can be achieved through reliable public transportation improvements. Some benefits result from the service improvements themselves. Others result if the improvements reduce automobile travel or stimulate more compact development. Direct and indirect benefits to people and businesses include:

- Transit users benefit from improved convenience and comfort, financial savings, and improved safety and health.
- People who live or work near transit services have it available for current or future use.
• Motorists benefit from reduced traffic and parking congestion, and improved mobility for non-drivers that improves traffic safety and reduces emissions.

• Businesses benefit from improved employee and customer access, increased pedestrian traffic, reduced traffic congestion and parking costs, improved employee safety and fitness, and increased regional economic development.

It should be noted that equity analysis is subjective, depending on how equity is defined and impacts are measured. From some perspectives, it is most equitable to generate transit improvement funds from a narrowly defined group of beneficiaries, such as users, employers, and station area property owners. However, quality public transit tends to provide multiple, dispersed benefits. Even people who do not currently use public transit benefit from reduced congestion, increased public safety and health, improved mobility options, regional economic development, and environmental quality.

Based on a review of literature, 17 funding options were identified, including some that are widely utilized and others that are scarcely utilized (see table on next page). Because each funding option has disadvantages and constraints, and because the analysis is subjective, a variety of local funding sources should be used to finance transit improvements. This will ensure funding stability and make revenues less vulnerable to economic fluctuations. It should also be noted that funding for transit is best when tied to an overall transportation funding strategy that includes roads, sidewalks, bikeways, etc.
### Potential Options for Funding Public Transportation

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<th>Option</th>
<th>Description</th>
<th>Advantages</th>
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<td>Transit Fares</td>
<td>Increase fares or change fare structure to increase revenues</td>
<td>Frequently Used&lt;br&gt;Considered equitable&lt;br&gt;Only users pay</td>
<td>Opposition from users&lt;br&gt;May result in reduced usage</td>
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<tr>
<td>Property Taxes</td>
<td>Increase local property taxes</td>
<td>Frequently used&lt;br&gt;Distributes burden widely</td>
<td>Opposition from property owners</td>
</tr>
<tr>
<td>Sales Taxes</td>
<td>Special local sales tax</td>
<td>Distributes burden widely among residents and nonresidents</td>
<td>Opposition from residents</td>
</tr>
<tr>
<td>Fuel Fees</td>
<td>Additional fuel tax in region</td>
<td>Frequently used&lt;br&gt;Reduces traffic and fuel use&lt;br&gt;Only users pay</td>
<td>Too low to cover costs</td>
</tr>
<tr>
<td>Vehicle Fees</td>
<td>Additional fee for vehicles registered in the region</td>
<td>Charges vehicle owners&lt;br&gt;Applied in some jurisdictions</td>
<td>Does not affect vehicle use</td>
</tr>
<tr>
<td>Utility Levies</td>
<td>Charge to all utility accounts in the region</td>
<td>Easy to apply&lt;br&gt;Distributes burden widely</td>
<td>Often limited in size</td>
</tr>
<tr>
<td>Employee Levies</td>
<td>Charge to each employee within a designated area</td>
<td>Charges commuters</td>
<td>Requires complicated collection system&lt;br&gt;Discourages businesses from locating downtown</td>
</tr>
<tr>
<td>Road Tolls</td>
<td>Fee to use roads or bridges</td>
<td>Reduces traffic congestion&lt;br&gt;Only users pay</td>
<td>Costly to implement&lt;br&gt;Increases traffic on parallel routes</td>
</tr>
<tr>
<td>Vehicle Mileage Taxes</td>
<td>Distance-based fee on vehicles registered in the region</td>
<td>Reduces vehicle traffic</td>
<td>Costly to implement&lt;br&gt;Limits freedom of movement</td>
</tr>
<tr>
<td>Parking Taxes</td>
<td>Special taxes on commercial parking (users pay for parking)</td>
<td>Frequently used&lt;br&gt;Discourages driving</td>
<td>May discourage downtown development</td>
</tr>
<tr>
<td>Parking Levies</td>
<td>Property tax on parking spaces throughout the region</td>
<td>Large income potential&lt;br&gt;Distributes burden widely&lt;br&gt;Encourages compact development</td>
<td>Costly to implement&lt;br&gt;Opposition from property owners</td>
</tr>
<tr>
<td>Development Impact Fees</td>
<td>Fee on new development to help finance infrastructure, including transit</td>
<td>Charges beneficiaries</td>
<td>Discourages development</td>
</tr>
<tr>
<td>Land Value Capture</td>
<td>Special tax on property that benefits from a rapid transit service</td>
<td>High potential revenues&lt;br&gt;Charges beneficiaries</td>
<td>Costly to implement&lt;br&gt;Discourages transit-oriented development</td>
</tr>
<tr>
<td>Station Rents</td>
<td>Collect revenues from public-private development at stations</td>
<td>Charges beneficiaries&lt;br&gt;Benefits renters and users</td>
<td>Limited potential revenues</td>
</tr>
<tr>
<td>Station Air Rights</td>
<td>Sale of rights to build over transit stations</td>
<td>Maximizes use of space</td>
<td>Unsure of potential revenue&lt;br&gt;Costly to implement&lt;br&gt;Nearby land must be developed</td>
</tr>
<tr>
<td>Advertising</td>
<td>Sale of advertising on vehicles and at stations</td>
<td>Frequently used</td>
<td>Limited potential&lt;br&gt;Sometimes unattractive</td>
</tr>
</tbody>
</table>
9. Viable Options for Implementation

This transportation study has revealed many concerns, all of which cannot be alleviated. Most often, people point to money as the answer, but just like in a family or a business, successful management is doing more with less and finding ways to make the most of one’s resources. There are several things that can be done to improve transportation for individuals with developmental disabilities; some cost nothing more than time. Listed herein are only those options that are deemed viable for implementation in Alabama.

Refuse to accept “business as usual”

It is easy to be comfortable with “the way we’ve always done it,” even if it doesn’t work anymore. New options can seem overwhelming, especially in the field of transportation. Most agencies that are providing transportation in Alabama are not transportation experts. They do it out of necessity and do not have the time or resources to evaluate system efficiencies or effectiveness and make appropriate changes. There is good news! The Regional Planning Commission of Greater Birmingham has experts on staff to help with system evaluation, recommendations, and implementation. By way of another grant from the ACDD, this service is free of charge until October 2017. For more information, contact Laurel Land at 205-264-8473 or lland@rpcgb.org.

Develop volunteer driver networks

Volunteer drivers are a great way to extend transportation opportunities for all disadvantaged individuals. To some degree, individuals with developmental disabilities have created their own informal volunteer networks, having a list of folks who are willing and able to help with transportation needs. That network is usually insufficient to meet all of their needs, and some people may be uncomfortable asking outsiders for help. Having a formal network of individuals willing to provide transportation is an invaluable resource, extending the service capacity, days, hours, and area of existing transportation systems. Starting a network takes time to work out the details and recruit drivers. Once established, it can be enthusiastically successful. The Community

Paul Bunyan Transit is the public transit provider in Beltrami County in northern Minnesota. It has a volunteer driver program that accumulates over 300,000 miles each year in travel. Volunteers even drive to Fargo, North Dakota, more than 100 miles away.
Transportation Association of America is a good resource for assistance with planning, set-up, insurance, etc. More information on establishing volunteer driver networks can be found in Chapter 7.

**Vary transportation schedules**
Transportation providers often attempt to cover their entire service area every day. This can be difficult and taxing on the system, because the more area covered, the more deadhead miles traveled (operating with no passengers on board). A simple solution to increase efficiencies is to serve specified areas of the county on different days or different times of the day. The Regional Planning Commission of Greater Birmingham has experts on staff to help with system evaluation, recommendations, and implementation. By way of another grant from the ACDD, this service is free of charge until October 2017. For more information, contact Laurel Land at 205-264-8473 or lland@rpcgb.org.

**Travel training**
Whether an individual lives in a rural area or a large urban area, learning to navigate the transportation system can be daunting. It should be standard practice for DD programs and agencies to train participants how to use the local service(s). Triumph Services in Birmingham, Alabama, has a lot of experience training their participants how to use public transit and Uber. A training video giving helpful, basic information has been produced and can be used in any city where public transit or Uber is available. This video can be viewed and downloaded at: www.rpcgb.org/transportation/dd.

**Dispatcher and driver training**
Drivers usually receive training with regard to vehicle operation and passenger safety, but often lack training about individuals with special needs (including the use of service animals and mobility devices). Disabilities are not always obvious and dispatchers and drivers are not always sensitive to an individual’s limitations or aware of how to help individuals with disabilities. Drivers need better training on how to effectively assist passengers and how to react (or not react) to certain behaviors. This can cause frustration on both sides and create unnecessary conflict. Taking a trip independently can be confusing (whether on a big bus, small bus, or car), and it is important to make every passenger feel comfortable and able to reach their destination safely, without incident. Agencies serving individuals with disabilities could offer to help with training transportation providers, allowing interaction with their participants.

**Mobile clinics, food markets, etc.**
Bringing services to unserved or underserved areas is becoming more common, and reduces the need to transport individuals to the service. Most common are mobile health clinics, libraries, food markets, dentists, and veterinarians. A variation to offering services by way of a
temporary vehicular approach is to set up a permanent station, such as for telehealth. A video Internet station can be set up in a local church, library, or community center, providing access to medical care for individuals who do not have Internet.

**Establish a central call center/mobility manager**

The ultimate goal for human service transportation is to have one coordinator that schedules all of the transportation services in a region. This makes it convenient for the consumer, reduces duplication of service while promoting efficiencies for the provider, and results in substantial cost savings. The National Center for Mobility Management offers assistance with creating mobility management operations, and a detailed toolkit is available at [http://web1.ctaa.org/webmodules/webarticles/anmviewer.asp?a=2429&z=101](http://web1.ctaa.org/webmodules/webarticles/anmviewer.asp?a=2429&z=101) from the Community Transportation Association of America. For financial assistance, the Federal Transit Administration offers no-match grant funding for this purpose.18

**Use available technology**

Technology is a wonderful and helpful tool, creating ease and efficiency. In the transportation industry, numerous technological tools are available, but few providers in Alabama have instituted their use.

- **Website**
  
  A majority of transportation providers do not have useful or updated information available on a website. All providers were interviewed by phone to get accurate information for entry in the *Directory of Public Transportation in Alabama* (available at [www.rpcgb.org/transportation/dd](http://www.rpcgb.org/transportation/dd)). Most notably, it was surprising how many providers have no website. Every provider should have a website that has, at a minimum, a phone number, map or description of service area, and details of service days, times, and starting cost.

- **Automatic Vehicle Locators**
  
  Especially for demand response operations, all vehicles should be equipped with Automatic Vehicle Locators (AVL), to keep dispatchers up-to-date on the location of a vehicle and be able to accurately estimate the time of arrival. Providers having more than 3-4 vehicles could benefit from scheduling software. Although the initial investment can be costly and it takes 3 to 6 months to become proficient in its use, the time saving, efficient scheduling, and automatic reporting will pay for itself very quickly.
Mobile Data Terminals
Another helpful tool for demand response is mobile data terminals (MDTs) installed in every vehicle. There are many applications for MDTs such as managing paratransit trip manifests, collecting passenger and fare data, communicating with dispatch, and trip routing. Some are also capable of serving as a GPS-based navigation assistant for a vehicle operator. Because demand response is in a constant state of flux—cancellations, last-minute trips, delays (especially on return trips), roadwork and detours—this automation keeps the driver up-to-date and keeps the dispatcher from making frequent calls to every driver.

Apps
For fixed route transportation, real time apps and kiosks are great ways to let riders know routes, current location of the bus, and anticipated arrival time. The General Transit Feed Specification (GTFS) allows public transit agencies to publish their transit data, including information such as fixed-route schedules, routes, and bus stop data. GTFS is used for trip planning, maps, timetable generation, transit planning, and operations analysis. In addition, online payment is convenient for riders.

Crosswalks
Another place where technology can be used is at crosswalks, helping individuals safely cross a street. This could be a standard traffic or pedestrian signal, an audio signal, or more advanced technology such as Rectangular Rapid Flash Beacons (RRFBs) or In-Roadway Warning Lights (IRWLs). RRFBs are flashing amber LEDs that supplement warning signs at unsignalized intersections or mid-block crosswalks. RRFBs can be manually activated by pedestrians pushing a button or passively activated by a pedestrian detection system. IRWL automatically activates lights in the road that begin blinking as a pedestrian enters the crosswalk zone. Obviously, these are not applicable at every crosswalk, but can be beneficial at busy or dangerous intersections.

Consolidate transportation funding
Nearly every government-funded agency includes consideration for transportation in its allocation (Veterans Affairs, Department of Health, Department of Mental Health, departments of education, senior centers, etc.). Sometimes transportation does not appear as a separate line item and may not be obvious to the receiving entity. A review of areas served by a combination of these agencies would reveal considerable duplication. If agencies pooled their transportation resources into a consolidated arrangement, funding would be plentiful and service would be efficient. (See Florida’s Commission for the Transportation Disadvantaged in Chapter 5, Research.)

Obviously, this is not something that can be done overnight, but should be considered for the future, as funding continues to decrease and demand continues to increase.
10. What Can You Do?

There are some things that everyone can do, and other things that only some people can do to help promote transportation.

*Encourage transportation providers*
Transportation providers get a lot of calls when something goes wrong, even if it is a situation beyond their control (like trains stopped on the tracks). Drivers and dispatchers are usually hard-working, caring individuals doing their best to get people where they need to go with modest resources. Encourage your bus driver by thanking him/her for taking you where you need to go. Don’t stop there. Tell others how great it is to have such a resource in the community!

*Talk/send letters to legislators*
Alabama is one of only four states (including Arizona, Hawaii, and Utah) that has no funding for public transportation. In fact, Alabama’s constitution actually precludes allocating funds for this purpose. Elected officials need to be educated about the benefits of public transportation and the harmful effects of this constitutional prohibition.

*Be a champion for public transportation*
If your area does not have public transportation or needs better transportation, be the one to lead the way. Things usually happen when there is a champion who relentlessly pursues a cause.

*Spread the word*
Tell your friends, neighbors, parishioners, coworkers, etc. about the need for better transportation and help them get involved. Your enthusiasm will generate enthusiasm from others to participate in something that matters.

*Volunteer*
Volunteer to help in the local transportation office. Volunteer to drive a neighbor to the doctor. Volunteer to take your neighbor with you the next time you go to the store.
Organize Volunteer Drivers
Organizing an effective volunteer driver pool takes time and coordination; no one can do it alone. It is good to receive verbal support about an idea, but in order for the idea to come to fruition, it takes people who are willing to sacrifice their time and resources. Organization can be as simple as developing a list of people in your neighborhood who are willing to drive, and distributing it to individuals in need of transportation. Or it can be as complex as establishing a formal organization for the sole purpose of using volunteer drivers to provide trips to individuals who are disadvantaged.

Support financial efforts
No one likes increased taxation, but the cost of travel has increased over time. While we cannot pay our way out of the transportation hole we have created in the past 50 years, we also cannot continue to put our heads in the ground and pretend the need does not exist. When a tax increase or other funding option is on the ballot for a valid transportation initiative, do all that you can to ensure its approval.

“Money is kinda like bubble gum ... you gotta stretch it to make it last!”

Anonymous Monroe County participant
Endnotes

1 http://acdd.org/?s=state+plan

2 http://www.mh.alabama.gov/ADPR/310BoardStrategicPlans.aspx

3 http://www.dot.state.al.us/tpmpweb/mp/hscp.html

4 http://exchange.aaa.com/automobiles-travel/automobiles/driving-costs/#.V88RsWZFPY


11 www.cdc.gov

12 Centers for Disease Control, Recommendations for Improving Health through Transportation Policy, 2009.


14 Section 427.011(1) Florida Statutes.


18 For more information, contact Wiley Brooks at brookswi@dot.state.al.us or 334-353-6417 at the Alabama Department of Transportation.