# CTC EVALUATION WORKBOOK

Florida Commission for the



# Transportation Disadvantaged

CTC BEING REVIEWED:	
COUNTY (IES):	
ADDRESS:	
CONTACT:	PHONE:
REVIEW PERIOD:	REVIEW DATES:
PERSON CONDUCTING THE RI	EVIEW:
CONTACT INFORMATION:	

### LCB EVALUATION WORKBOOK

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#### **REVIEW CHECKLIST & SCHEDULE**

#### **COLLECT FOR REVIEW:** APR Data Pages ☐ QA Section of TDSP Last Review (Date: \_\_\_\_) List of Ombudsman Calls \_ ☐ QA Evaluation (from TDSP) ☐ Status Report (from last review) AOR Submittal Date TD Clients to Verify **TDTF Invoices** Audit Report Submittal Date **ITEMS TO REVIEW ON-SITE: SSPP** Policy/Procedure Manual **Complaint Procedure** Drug & Alcohol Policy (see certification) ☐ Grievance Procedure Driver Training Records (see certification) ☐ Contracts ☐ Other Agency Review Reports Budget

Performance Standards

**Medicaid Documents** 

<u>ITEN</u>	MS TO REQUEST:
	<b>REQUEST INFORMATION FOR RIDER/BENEFICIARY SURVEY</b> (Rider/Beneficiary Name, Agency who paid for the trip [sorted by agency and totaled], and Phone Number)
	<b>REQUEST INFORMATION FOR CONTRACTOR SURVEY</b> (Contractor Name, Phone Number, Address and Contact Name)
	<b>REQUEST INFORMATION FOR PURCHASING AGENCY SURVEY</b> (Purchasing Agency Name, Phone Number, Address and Contact Name)
	<b>REQUEST ANNUAL QA SELF CERTIFICATION</b> (Due to CTD annually by January 15th). (requested from PSTA on 1/10/23)
	<b>MAKE ARRANGEMENTS FOR VEHICLES TO BE INSPECTED</b> (Only if purchased after 1992 and privately funded).
<u>INF(</u>	DRMATION OR MATERIAL TO TAKE WITH YOU:
	Measuring Tape Stop Watch

#### **EVALUATION INFORMATION**

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

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

#### **Notes to remember:**

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

#### ENTRANCE INTERVIEW QUESTIONS

#### INTRODUCTION AND BRIEFING:

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

3.	NETWOR	RK TYPE:
		SOLE PROVIDER
		PARTIAL BROKERAGE
		COMPLETE BROKERAGE
4.	NAMI	E THE OPERATORS THAT YOUR COMPANY HAS CONTRACTS WITH:
5.	NAMI	E THE GROUPS THAT YOUR COMPANY HAS COORDINATION

Coordination Contract Agencies				
Name of Agency	Address	City, State, Zip	Telephone Number	Contact

CONTRACTS WITH:

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

Name of Agency	% of Trips	Name of Contact	Telephone Number

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

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

#### **GENERAL QUESTIONS**

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

1.	DESIGNATION DATE OF CTC:
2.	WHAT IS THE COMPLAINT PROCESS?
	IS THIS PROCESS IN WRITTEN FORM?
	Is the process being used? $\square$ Yes $\square$ No
3.	DOES THE CTC HAVE A COMPLAINT FORM?  Yes No (Make a copy and include in folder)
4.	DOES THE COMPLAINT FORM INCORPORATE ALL ELEMENTS OF THE CTD'S UNIFORM SERVICE REPORTING GUIDEBOOK?  Yes No
5.	DOES THE FORM HAVE A SECTION FOR RESOLUTION OF THE COMPLAINT?  Yes No, resolution typically described in the comments section of complaint
	Review completed complaint forms to ensure the resolution section is being filled out and follow-up is provided to the consumer.
6.	IS A SUMMARY OF COMPLAINTS GIVEN TO THE LCB ON A REGULAR BASIS?
7.	WHEN IS THE DISSATISFIED PARTY REFERRED TO THE TD HELPLINE?
8.	WHEN A COMPLAINT IS FORWARDED TO YOUR OFFICE FROM THE OMBUDSMAN PROGRAM, IS THE COMPLAINT ENTERED INTO THE LOCAL COMPLAINT FILE/PROCESS?  Yes No
	If no, what is done with the complaint?

N	lame of Client	Address	of client	Date of Ride	Application on File?
	1	r rugiumity	v Ci iiiCauoli		
riease	e Verify These Pas	D Eligibility		oucanon on Fue:	
12.	Eligibility is des	cribed in the TD	SP beginning o	on page 27 (TDSP a	
11.	DOES THE RIC COMPLAINT P		ARY INFORM	ATION OR BROC	HURE LIST THE
10.	DOES THE RID OMBUDSMAN  Yes		ARY INFORM	ATION OR BROC	HURE LIST THE
	☐ Yes ☐	No	If yes, wha	nt type?	
	BROCHURES 7				ID DERVICED.

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



## **Cross-County Trips are BACK!**

**Your Intercounty Connection** 

**FOR JUST** 

## \$6/RIDE

Get cross-county trips between your home and work, medical services, school, and other lifesustaining needs.

This same-day service is available from 7 am - 7 pm • Monday - Saturday

#### **TO LEARN MORE:**

Contact the Transportation Disadvantaged (TD) eligibility office in the county where you live:

• PASCO COUNTY RESIDENTS:

Pasco County Public Transit:

727-834-3322 or SCAN OR



**PSTA Mobility Line:** 

727-540-1888, option 4 or SCAN QR



 HILLSBOROUGH COUNTY RESIDENTS: Sunshine Line:

813-272-7272 or SCAN OR

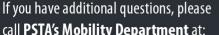


Once your county refers you to TD Tampa Bay, look for an e-mail from PSTA within one week so you can start taking cross-county trips.













14.	ARE THERE ANY AREAS WHERE COORDINATION CAN BE IMPROVED?
15.	WHAT BARRIERS ARE THERE TO THE COORDINATED SYSTEM?
16.	ARE THERE ANY AREAS THAT YOU FEEL THE COMMISSION SHOULD BE AWARE OF OR CAN ASSIST WITH?
17.	WHAT FUNDING AGENCIES DOES THE CTD NEED TO WORK CLOSELY WITH IN ORDER TO FACILITATE A BETTER-COORDINATED SYSTEM?
18.	HOW ARE YOU MARKETING THE VOLUNTARY DOLLAR?

	GENERAL QUESTIONS
Findings:	
Recommendations:	

Review the CTC contracts "Execute uniform contra- includes performance stand	cts for serv	ice using		ntract, which
ARE YOUR CONTRACTS UNIFO			0	
IS THE CTD'S STANDARD CON	TRACT UTILIZ	ED?	Yes	No
DO THE CONTRACTS INCLUDE OPERATORS AND COORDINAT			RDS FOR THE TRAI	NSPORTATION
	Yes	No		
DO THE CONTRACTS INCLUDE SUBCONTRACTORS? (Section 2	1.20: Payment to	Subcontracto No		
Operator Name	Exp. Date	SSPP	AOR Reporting	Insurance
Operator Name	Exp. Date	SSPP	AOR Reporting	Insurance
Operator Name	Exp. Date	SSPP	AOR Reporting	Insurance
Operator Name	Exp. Date	SSPP	AOR Reporting	Insurance
Operator Name	Exp. Date	SSPP	AOR Reporting	Insurance
Operator Name	Exp. Date	SSPP	AOR Reporting	Insurance
Operator Name	Exp. Date	SSPP	AOR Reporting	Insurance
Operator Name	Exp. Date	SSPP	AOR Reporting	Insurance
Operator Name	Exp. Date	SSPP	AOR Reporting	Insurance
Operator Name	Exp. Date	SSPP	AOR Reporting	Insurance

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

### REPORTING TIMELINESS Were the following items submitted on time? Yes a. Annual Operating Report No Any issues that need clarification? Yes No Any problem areas on AOR that have been re-occurring? List: Yes No b. Memorandum of Agreement c. Transportation Disadvantaged Service Plan Yes No Yes d. Grant Applications to TD Trust Fund No e. All other grant application (\_\_\_\_\_%) Yes No IS THE CTC IN COMPLIANCE WITH THIS SECTION? $\Box$ Yes No Comments:

Review the CTC monitoring of its transportation operator contracts to ensure compliance with 427.0155(3), F.S.

"Review all transportation operator contracts annually."

"Review all transportation operator contracts annually." WHAT TYPE OF MONITORING DOES THE CTC PERFORM ON ITS OPERATOR(S) AND HOW OFTEN IS IT CONDUCTED? Yes Is a written report issued to the operator? No If **NO**, how are the contractors notified of the results of the monitoring? WHAT TYPE OF MONITORING DOES THE CTC PERFORM ON ITS COORDINATION CONTRACTORS AND HOW OFTEN IS IT CONDUCTED? □ Yes □ Is a written report issued? No If **NO**, how are the contractors notified of the results of the monitoring? WHAT ACTION IS TAKEN IF A CONTRACTOR RECEIVES AN UNFAVORABLE REPORT?

#### ASK TO SEE DOCUMENTATION OF MONITORING REPORTS.

IS THE CTC IN COMPLIANCE WITH THIS SECTION?  $\Box$  Yes  $\Box$ 

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

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

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

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

HOW IS THE CTC USING PUBLIC TRANSPORTATION SERVICES IN THE COORDINATED

SYSTEM?	
□ N/A	
IS THERE A GOAL FOR TRANSFERRING PASSENGER  Yes No  If YES, what is the goal?	S FROM PARATRANSIT TO TRANSIT?
Is the CTC accomplishing the goal? Yes  IS THE CTC IN COMPLIANCE WITH THIS REQUIREME	□ No ENT? □ Yes □ No
Comments:	

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

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

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

Review priorities listed in the TDSP, according to Chapter 427.0155(7). "Establish priorities with regard to the recipients of non-sponsored transportation disadvantaged services that are purchased with Transportation Disadvantaged Trust monies." REVIEW THE QA SECTION OF THE TDSP (ask CTC to explain): WHAT ARE THE PRIORITIES FOR THE TDTF TRIPS? HOW ARE THESE PRIORITIES CARRIED OUT? IS THE CTC IN COMPLIANCE WITH THIS SECTION?  $\Box$  Yes  $\Box$ No Comments:

Ensure CTC compliance with the delivery of transportation services, 427.0155(8).

"Have full responsibility for the delivery of transportation services for the transportation disadvantaged as outlined in s. 427.015(2)."

Review the Operational section of the TDSP	
1. Hours of Service:	
2. Hours of Intake:	
3. Provisions for After Hours Reservations/Cancellations?	
4. What is the minimum required notice for reservations?	
5. How far in advance can reservations be place (number of days)?	
IS THE CTC IN COMPLIANCE WITH THIS SECTION? $\Box$ Yes $\Box$ No	
Comments:	

COMPLIANCE	WITH	<b>CHAP</b>	TER 427.	F.S.
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Review the cooperative agreement with the local WAGES coalitions according to Chapter 427.0155(9). "Work cooperatively with local WAGES coalitions established in Chapter 414 to provide assistance in the development of innovative transportation services for WAGES participants."				
WHAT TYPE OF ARRANGEMENT DO YOU HAVE WITH THE LOCAL WAGES COALITION?				
HAVE ANY INNOVATIVE WAGES TRANSPORTATION SERVICES BEEN DEVELOPED?				
IS THE CTC IN COMPLIANCE WITH THIS SECTION?				

	CHAPTER 427	
Findings:		
Recommendations:		

COMPLIANCE WITH 41-2, F.A.C.							
"ens	Compliance with 41-2.006(1), Minimum Insurance Compliance "ensure compliance with the minimum liability insurance requirement of \$100,000 per person and \$200,000 per incident"						
WHAT	ARE THE MINIMUM LIAE	BILITY INSURANCE REQU	JIREMENTS?				
	ARE THE MINIMUM LIAE TOR AND COORDINATIO	BILITY INSURANCE REQU ON CONTRACTS?	JIREMENTS IN THE				
HOW M	IUCH DOES THE INSURA	NCE COST (per operator)?					
	Operator	Insurance Cost	]				
-			_				
<u>-</u>							
	THE MINIMUM LIABILITY CIDENT?  Yes No	Y INSURANCE REQUIREM	ENTS EXCEED \$1 MILLION				
]	If yes, was this approved by t	the Commission?	s 🗆 No				
IS THE	CTC IN COMPLIANCE W	ITH THIS SECTION? $\Box$	Yes 🗌 No				
Comm	ents:						

	COMPLIANCE WITH 41-2, F.A.C.			
	Compliance with 41-2.006(2), Safety Standards.  "shall ensure the purchaser that their operations and services are in compliance with the safety requirements as specified in Section 341.061(2)(a), F.S. and 14-90, F.A.C."			
	Date of last SSPP Compliance Review, Obtain a copy of this review.			
$\supset$	Review the last FDOT SSPP Compliance Review, if completed in over a year, check drivers' records. If the CTC has not monitored the operators, check drivers' files at the operator's site.			
	IS THE CTC IN COMPLIANCE WITH THIS SECTION? $\Box$ Yes $\Box$ No			
	ARE THE CTC CONTRACTED OPERATORS IN COMPLIANCE WITH THIS SECTION? $\square  \text{Yes}  \square  \text{No}$			

#### DRIVER REQUIREMENT CHART

Driver Last Name	Driver License	Last Physical	CPR/1st Aid	Def. Driving	ADA Training	Other-
Sample Size:			6 21 100 Driv	yers 20.50%		ars 5 10%

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

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

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

#### COMPLIANCE WITH 41-2, F.A.C. Compliance with 41-2.006(3), Drug and Alcohol Testing "...shall assure the purchaser of their continuing compliance with the applicable state or federal laws relating to drug testing..." With which of the following does the CTC (and its contracted operators) Drug and Alcohol Policy comply? FTA (Receive Sect. 5307, 5309, or 5311 funding) **FHWA** (Drivers required to hold a CDL) Neither REQUEST A COPY OF THE DRUG & ALCOHOL POLICY AND LATEST **COMPLIANCE REVIEW.** DATE OF LAST DRUG & ALCOHOL POLICY REVIEW: \_ IS THE CTC IN COMPLIANCE WITH THIS SECTION? ☐ Yes No Comments:

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

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

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

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

Cost [CTC and Coordination Contractor (CC)]

	CTC	CC #1	CC #2	CC #3	CC #4
Flat contract rate (s) (\$ amount /					
unit)					
Detail other rates as needed: (e.g.					
ambulatory, wheelchair, stretcher,					
out-of-county, group)					
Special or unique considerations that	influence co	sts?			
Explanation:					

2. DO YOU HAVE TRANSPORTA (Those specific transportation service normally arranged by the Community purchasing agency. Example: a neigh	s approved l Transporta	by rule or the	e Commissio		
Cost [CTC and Transportation Altern	ative (Alt.)]				
	CTC	Alt. #1	Alt. #2	Alt. #3	Alt. #4
Flat contract rate (s) (\$ amount / unit)					
Detail other rates as needed: (e.g. ambulatory, wheelchair, stretcher, out-of-county, group)					
Special or unique considerations that	influence co	osts?	l		
Explanation:					
IS THE CTC IN COMPLIANCE WI	TH THIS SI	ECTION? [	] Yes [	□ No	

	RULE 41-2
Findings:	
Recommendations:	

<b>C</b>			4 4			$\boldsymbol{\alpha}$
COMPL	JANCE	WITH	41	-2.	F.A.	.C.

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

Review the TDSP for the Commission standards.

<b>Commission Standards</b>	Comments
Local toll free phone number must be posted in all vehicles.	
Vehicle Cleanliness	
Passenger/Trip Database	

Adequate seating	
Driver Identification	
Passenger Assistance	
Smoking, Eating and Drinking	

Two-way Communications	
Air Conditioning/Heating	
Billing Requirements	

	COMMISSION STANDARDS
Findings:	
Recommendations:	
Recommendations.	

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

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

	Review	the	<b>TDSP</b>	for th	ne Loca	l standards.
--	--------	-----	-------------	--------	---------	--------------

Local Standards 🔽	Comments	
Transport of Escorts and dependent children policy		$\bigcirc$
Use, Responsibility, and cost of child restraint devices		
Out-of-Service Area trips		
CPR/1st Aid		$\bigcirc$
Driver Criminal Background Screening		
Rider Personal Property		
Advance reservation requirements		
Pick-up Window		



Measurable Standards/Goals	Standard/Goal	Latest Figures	Is the CTC/Operator
			meeting the Standard?
Public Transit Ridership	CTC	CTC	
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
On-time performance	CTC	CTC	
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Passenger No-shows	CTC	CTC	
Tussenger I to shows	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Accidents 6 accidents total	CTC	CTC	
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Roadcalls	CTC	CTC	
	Operator A	Operator A	
Average age of fleet:	Operator B	Operator B	
	Operator C	Operator C	
Complaints	CTC	CTC	
	Operator A	Operator A	
Number filed:	Operator B	Operator B	
	Operator C	Operator C	
Call-Hold Time	CTC	CTC	
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	

	LOCAL STANDARDS
Findings:	
Recommendations:	

#### COMPLIANCE WITH AMERICANS WITH DISABILITIES ACT

# REVIEW COPIES OF THE PUBLIC INFORMATION PROVIDED. DOES PUBLIC INFORMATION STATE THAT ACCESSIBLE FORMATS ARE AVAILABLE UPON REQUEST? Yes No ARE ACCESSIBLE FORMATS ON THE SHELF? Yes No IF NOT, WHAT ARRANGEMENTS ARE IN PLACE TO HAVE MATERIAL PRODUCED IN A TIMELY FASHION UPON REQUEST? DO YOU HAVE TTY EQUIPMENT OR UTILIZE THE FLORIDA RELAY SYSTEM? Yes No IS THE TTY NUMBER OR THE FLORIDA RELAY SYSTEM NUMBERS LISTED WITH THE OFFICE PHONE NUMBER? Yes No Florida Relay System: Voice- 1-800-955-8770 TTY- 1-800-955-8771

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



Provision of Service	Training Provided	Written Policy	Neither	
Accommodating Mobility Aids				
Accommodating Life Support Systems (O <sub>2</sub> Tanks, IV's)				
Passenger Restraint Policies				
Standee Policies (persons standing on the lift)				
Driver Assistance Requirements				
Personal Care Attendant Policies				
Service Animal Policies				
Transfer Policies (From mobility device to a seat)				
Equipment Operation (Lift and securement procedures)				
Passenger Sensitivity/Disability Awareness Training for Drivers				
RANDOMLY SELECT ONE OR TWO VEHICLES SYSTEM SIZE) THAT ARE IDENTIFIED BY TH AND PURCHASED WITH PRIVATE FUNDIN INSPECTION USING THE ADA VEHICLE SPECIF	IE CTC AS BE NG, AFTER	EING ADA A 1992. CON		
INSPECT FACILITIES WHERE SERVICES ARE PI (ELIGIBILITY DETERMINATION, TICKET/COUP				
IS A RAMP PROVIDED?	☐ Yes □	No		
ARE THE BATHROOMS ACCESSIBLE?	☐ Yes ☐	No		

# **Bus and Van Specification Checklist**

Name of Provider:						
Vehicle Number (ei	ither V	IN or provider flee	t number	):		
Type of Vehicle:		Minivan		Van		Bus (>22')
		Minibus (<= 22')		Minibus (	>22')	
Person Conducting	Reviev	v:				
Date:						
Review the owner's	s manu	al, check the sticke	rs, or ask	the driver t	the followi	ng:
☐ The lift must	have a	weight limit of at le	east 600 pc	ounds.		
☐ The lift must vehicle). Is t	-	ipped with an emergoresent?	gency bac	k-up system	(in case of	closs of power to
		terlocked" with the interlock is engaged				
Have the driver lov	ver the	lift to the ground:				
☐ Controls to o	perate t	he lift must require	constant p	ressure.		
Controls mu "stow" while		the up/down cycle ed.	e to be re	versed with	out causing	g the platform to
illuminate th	e street	hall be provided in surface around the light switch on, to en	lift, the lig	thing should	l activate v	when the door/lift
Once the lift is on t	he grou	ınd, review the foll	owing:			
		barrier to prevent the platform is fully raise	-	y aid from ro	olling off t	he side closest to
☐ Side barriers	must be	e at least 1 ½ inches	high.			
☐ The outer bar	rrier mu	st be sufficient to p	revent a w	heelchair fro	om riding o	over it.
☐ The platform	ı must b	e slip-resistant.				
☐ Gaps betwee	n the pl	atform and any barr	ier must b	e no more th	nan 5/8 of a	an inch.
☐ The lift must	have tv	vo handrails.				
☐ The handrail	s must l	be 30-38 inches abo	ve the plat	form surface	e.	
		have a useable grase e sufficient knuckle			s, and mus	t be at least 1 ½
-		pe at least 28 1/2 in 48 inches long meas			-	

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

# COMPLIANCE WITH AMERICANS WITH DISABILITIES ACT

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

Name of Service Provider/ Contractor	Total # of Vehicles Available for CTC Service	# of ADA Accessible Vehicles	Areas/Sub areas Served by Provider/Contractor

BASE	D O	N TF	HE INF	ORMAT	TION I	N '	TABLE	1,	DOES	IT	APPEAR	THAT	INDIVIDUALS
REQU	JIRIN	G TH	E USE C	OF ACC	ESSIBI	ΕV	/EHICLI	ES I	HAVE E	QU	AL SERVI	CE?	
	Yes		No										

	ADA COMPLIANCE	
Findings:		
Recommendations:		

FY/_ GRANT QUESTIONS	
The following questions relate to items specifically addressed in the FY/ Trip and Equipment Grant.	
DO YOU KEEP ALL RECORDS PERTAINING TO THE SPENDING OF TDTF DOLLAIFOR FIVE YEARS? (Section 7.10: Establishment and Maintenance of Accounting Records T&E Grant, and FY)	
☐ Yes ☐ No	
ARE ALL ACCIDENTS THAT HAVE RESULTED IN A FATALITY REPORTED TO THE COMMISSION WITHIN 24 HOURS AFTER YOU HAVE RECEIVED NOTICE? (Section 14.80: Accidents, T/E Grant, and FY)	
□ Yes □ No	
ARE ALL ACCIDENTS THAT HAVE RESULTED IN \$1,000 WORTH OF DAMAGE REPORTED TO THE COMMISSION WITHIN 72 HOURS AFTER YOU HAVE RECEIV NOTICE OF THE ACCIDENT? (Section 14.80: Accidents, T/E Grant, and FY	
☐ Yes ☐ No	



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

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

CTD RECOMMENDATION:	
CTC Response:	
ere response.	
Command Status	
Current Status:	
CTD RECOMMENDATION:	
CTC Response:	
of officers of the sponsor.	
Current Status:	
Current Status:	
CTD RECOMMENDATION:	
CTC Response:	
•	
Current Status:	
Curront Status.	

# **PURCHASING AGENCY SURVEY**

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

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

### Level of Cost Worksheet 1

Insert Cost page from the AOR.

Florida Department of

Contact

Transporta <b>Rosdo</b>		ision for the	t .
1	4		-
9		A	
Tron	rspor	tation	

Disadvantaged

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#### **CTC Organization**

Help

County: Pinellas

CTC Status: Submitted

Reports

Date Initiated: 8/26/2022

Fiscal Year:

07/01/2021 - 06/30/2022

CTD Status: Under Review

**CTC Organization** 

CTC Coordinated System

CTC Trips CTC Vehicles & Drivers

CTC Revenue Sources CTC Expense Sources

* CTC Organization N	lame:	* Transportation Operators	Number	* Local Coordinating Board (LCB) Chairperson:
Pinellas Suncoast Tra	nsit Author	ity Yes 😺	5	Chair Patti Reed
* Address:		* Coordination Contractors	Number	* CTC Contact:
3201 Scherer Dr. N		Yes 🗸	11	Patrick Murray
* City:	* State:	* Zip		CTC Contact Title:
Saint Petersburg	F 🗸	Code:		Manager
		33716		* CTC Contact Email:
* Organization Type:				} pmurray@psta.net
Public Transit Author	rity 🗸			* Phone:
Network Type:				(727) 540-1988
Partial Brokerage	<b>~</b>			
Operating Environm	ent:			
Urban				
* Provide Out of Co Trips:	unty			
No	V			
		Added By: Catherine		
Date Added:	8/26/2022	Morales	Date Modified:	Modified By:

#### **CTC Certification**

I, Ross Silvers, CTC Rep., as the authorized Community Transportation Coordinator (CTC) Representative, hereby certify, under the penalties of perjury as stated in Chapter 837.06, F.S., that the information contained in this report is true, accurate, and in accordance with the accompanying instructions

CTC Representative (signature):

#### **LCB** Certification

I, Chair Patri Reed , as the Local Coordinating Board Chairperson, hereby, certify in accordance with Rule 41-2.007(6), F.A.C. that the Local Coordinating Board has reviewed this report and the Planning Agency has received a copy.

LCB Chairperson (signature):

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## **CTC Expense Sources**

County: Pinellas CTC Status: In Progress CTC Organization:

Pinellas Suncoast Transit Authority

Fiscal Year: CTD Status: Pending Submission

07/01/2021 - 06/30/2022

		Select	ed Reporting P	eriod	Previous Reporting Period			
	_	CTC &	Coordination	Total	CTC & Coordination		Total	
		ansportation	Contractors		Transportation	Contractors		
		Operators			Operators			
Expense Sources					r	1		
Labor	\$	4,485,151	\$ 487,751	4,972,902	\$ 4,924,110	\$ 441,533	5,365,64	
Fringe Benefits	\$	521,122	\$ 79,624	\$ 600,746	\$ 851,259	\$ 68,312	919,57	
Services	\$	194,863	\$ 150,334	345,197	\$ 1,116,735	\$ 189,942	1,306,67	
Materials & Supplies Consumed	\$	699,378	\$ 212,415	911,793	\$ 839,163	\$ 176,016	1,015,17	
Utilities	\$	529,489	\$ 20,128	549,617	\$ 114,171	\$ 17,381	131,55	
Casualty & Liability	\$	989,255	\$ 318,281	1,307,536	\$ 707,454	\$ 286,698	994,15	
Taxes	\$	266,050	\$ 1,900	267,950	\$ 9,212	\$ 2,587\$	5 11,79	
Miscellaneous	\$	790,197	\$ 20,774	810,971	\$ 322,542	\$ 10,985	333,52	
Interest	\$	537	\$ 173	710	\$ 777	\$ 1,482	2,25	
Leases & Rentals	\$	42,389	\$ 51,633	94,022	\$ 582	\$ 44,526	45,10	
Capital Purchases	\$	603,109	\$ 78,798	681,907	\$ 791,774	\$ 125,909	917,68	
Contributed Services	\$	0	\$ 0	5 0	\$ 13,327	(\$ O	13,32	
Allocated Indirect Expenses	\$	305,115	\$ 69,616	374,731	\$ 301,154	\$ 78,379	379,53	
<b>Purchased Transportation Services</b>								
Bus Pass	\$	0	N/A	5 0	\$ C	N/A	)	
School Board (School Bus)	\$	0	N/A	5 0	\$ C	N/A \$	)	
Transportation Network Companies (TNC)	\$	0	N/A	\$ 0	\$ 195,321	N/A\$	195,32	
Taxi	\$	0	N/A	\$ 0	\$ 137,618	N/A\$	137,61	
Contracted Operator	\$	0	N/A	\$ 0	\$ C	N/A\$	<u>,                                    </u>	
Total - Expense Sources	\$	9,426,655	\$ 1,491,427	10,918,082	\$ 10,325,199	\$ 1,443,750\$	11,768,94	

Date Created: 09/01/2022Created By: Catherine Date Modified: Modified By: Morales

#### Comments

\* Required Field

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## **CTC Revenue Sources**

County: Pinellas CTC Status: In Progress CTC Organization:

Pinellas Suncoast Transit Authority

Fiscal Year: CTD Status: Pending Submission

07/01/2021 - 06/30/2022

CTC Organization CTC Coordinated System CTC Trips CTC Vehicles & Drivers CTC Revenue Sources

		Selected Reporting Period				Previous Reporting Period			
	Tra	CTC & ansportation	Coordination Contractors	Total	Tr	CTC & ansportation	Coordination Contractors	Total	
		Operators				Operators			
Revenue Sources									
Agency for Health Care Administration	\$	0	\$ 60,083	\$ 60,08	3 \$	0	\$ 135,465 \$	135,4	
(AHCA)					۔ ا				
Agency for Persons with Disabilities (APD)	\$	654,748		\$ 778,31	8 \$	542,952		622,6	
Dept of Economic Opportunity (DEO)	\$		\$ 0	\$	0 \$	0			
Dept of Children and Families (DCF)	\$	0	\$ 655,645	\$ 655,64	5\$	0		346,2	
Dept of Education (DOE)	\$	0	\$ O	\$	0\$	21,315	\$ O \$	21,3	
Dept of Elder Affairs (DOEA)	\$	711,227	\$ O	\$ 711,22	7 \$	286,746	\$ O \$	286,7	
Dept of Health (DOH)	\$	0	\$ 0	\$	0\$	0	\$ 234,573 \$	234,5	
Dept of Juvenile Justice (DJJ)	\$	0	\$ 0	\$	0\$	0	\$ O \$		
<b>Commission for the Transportation Disad</b>	vant	aged (CTD)							
Non-Sponsored Trip Program	\$	2,262,788	N/A	\$ 2,262,78	8\$	2,010,607	N/A \$	2,010,6	
Non-Sponsored Capital Equipment	\$	0	N/A	\$	0\$	0	N/A\$		
Rural Capital Equipment	\$	0	N/A	\$	0\$	0	N/A\$		
TD Other	\$	0	N/A	\$	0\$	308,916	N/A\$	308,9	
Department of Transportation (DOT)							,		
49 USC 5307	\$	0	\$ 0	\$	0\$	0	\$ 0\$		
49 USC 5310	\$	1,453,269	\$ 24,311	\$ 1,477,58	0 \$	492,128	\$ 63,425\$	555,5	
49 USC 5311	\$	0	\$ 0	\$	0\$	0	\$ 0\$		
49 USC 5311 (f)	\$	0	\$ 0	\$	0\$	0	\$ O\$		
Block Grant	\$	0	\$ O	\$	0\$	0	\$ 0\$		
Service Development	\$	0	\$ O	\$	0\$	0	\$ 0\$		
Commuter Assistance Program	\$	0	\$ 0		0\$	0			
Other DOT	\$	337,243			3\$	0			
Local Government				· ·			<u> </u>		
School Board (School Bus)	\$	0	N/A	\$	0\$	0	N/A\$		
County Cash	\$	7,403,441	\$ 117,752	\$ 7,521,19	3 \$	0	\$ 113,093\$	113,0	
County In-Kind	\$		\$ 0		0\$	0		<u> </u>	
City Cash	\$	0	\$ 157,509	\$ 157,50	9 \$	0		120,3	
City In-Kind	\$		\$ 0		0\$	0		·	
Other Cash	\$	0	\$ 0		0\$	5,917,754	· · · · · · · · · · · · · · · · · · ·	5,917,7	
Other In-Kind	\$	-	\$ 0		0\$	0		, /-	
Local Non-Government	+		<u>'</u>				·		
Farebox	\$	27,819	\$ 21,025	\$ 48,84	4 \$	28,506	\$ 14,116\$	42,6	
Donations/Contributions	\$	205		· · ·	-	2,789		4,1	
In-Kind Services	¢.	32,859			-	13,327		41,0	

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Other Non-Government	\$	292,529\$	38,532	331,061	\$ 244,028	\$ 58,465	\$ 302,493
Other Federal & State Programs	•						
Other Federal Programs	\$	0 \$	175,887	175,887	\$ 115,584	\$ 153,547	\$ 269,131
Other State Programs	\$	61,322\$	96,773	158,095	\$ 555,597	\$ 86,976	\$ 642,573
Total - Revenue Sources	\$	13,237,450\$	1,502,734	14,740,184	\$ 10,540,249	\$ 1,435,165	\$ 11,975,414

Date Created: 09/01/2022Created By: Catherine Date Modified: Modified By: Patrick

Morales 09/09/2022 Murray

#### Comments

\* Required Field

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Reports

## **CTC Trips**

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County: Pinellas CTC Status: In Progress CTC Organization:

Pinellas Suncoast Transit Authority

**Previous Reporting Period** 

Fiscal Year: CTD Status: Pending Submission

07/01/2021 - 06/30/2022

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CTC Organization CTC Coordinated System CTC Trips CTC Vehicles & Drivers CTC Revenue Sources CTC Expense Sources

**Selected Reporting Period** 

	CTC & Transportation Operators	Coordination Contractors	Total	CTC & Transportatior Operators	Coordination Contractors	Total
Service Type - One Way				-	л	
Fixed Route/Fixed Schedule						
Daily Pass Trips	0	N/A	0	0	N/A	0
Weekly Pass Trips	4,754	N/A	4,754	0	N/A	C
Monthly Pass Trips	807,257	N/A	807,257	0	N/A	C
Deviated Fixed Route Service	0	N/A	0	0	N/A	C
Complementary ADA Service	158,933	N/A	158,933	230,787	N/A	230,787
Paratransit						
Ambulatory	145,740	32,334	178,074	163,705	27,692	191,397
Non-Ambulatory	28,463	837	29,300	1,717	728	2,445
Stretcher	0	0	0	0	0	C
Transportation Network Companies	0	N/A	0	12,288	N/A	12,288
Taxi	0	N/A	0	8,711	N/A	8,711
School Board (School Bus)	0	N/A	0	0	N/A	C
Volunteers	0	N/A	0	0	N/A	C
Total - Service Type	1,145,147	33,171	1,178,318	417,208	28,420	445,628
Contracted Transportation Operator						
How many of the total trips were provided by Contracted Transportation Operators? (If the CTC provides transportation services, do not include the CTC	333,136	N/A	333,136	396,209	N/A	396,209
Total - Contracted Transportation Operator Trips	333,136	0	333,136	396,209	0	396,209
Revenue Source - One Way						
Agency for Health Care Administration (AHCA)	0	1,731	1,731	0	252	252
Agency for Persons with Disabilities (APD)	62,980	8,869	71,849	49,740	7,792	57,532
Comm for the Transportation Disadvantaged (CTD)	846,566	N/A	846,566	52,792	N/A	52,792
Dept of Economic Opportunity (DEO)	0	0	0	О	О	(
Dept of Children and Families (DCF)	0	7,882	7,882	0	7,877	7,877
Dept of Education (DOE)	0	0	0	1,108		1,108
Dept of Elder Affairs (DOEA)	35,563	0	35,563			35,502
Dept of Health (DOH)	0	0	0	0	1,727	1,727
Dept of Juvenile Justice (DJJ)	0	0	0	0	0	

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., 0.00		0.5	200			
Dept of Transportation (DOT)	29,468	455	29,923	40,704	221	40,925
Local Government	126,218	9,425	135,643	197,451	6,120	203,571
Local Non-Government	38,858	1,015	39,873	33,965	1,320	35,285
Other Federal & State Programs	5,494	3,794	9,288	5,946	3,111	9,057
Total - Revenue Source	1,145,147	33,171	1,178,318	417,208	28,420	445,628
December Time One West						
Passenger Type - One Way			Y	Y	ir i	
Older Adults	35,855	4,575	40,430	55,855	71	55,926
Children At Risk	0	425	425	738	0	738

Passenger Type - One Way						
Older Adults	35,855	4,575	40,430	55,855	71	55,926
Children At Risk	0	425	425	738	0	738
Persons With Disabilities	264,692	21,428	286,120	321,252	22,208	343,460
Low Income	844,600	6,634	851,234	39,363	6,045	45,408
Other	0	109	109	0	96	96
Total - Passenger Type	1,145,147	33,171	1,178,318	417,208	28,420	445,628
	<u> </u>	•				

Trip Purpose - One Way									
Medical	509,950	8,216	518,166	129,252	9,018	138,270			
Employment	418,550	2,415	420,965	37,330	2,219	39,549			
Education/Training/Daycare	99,542	10,608	110,150	82,729	8,083	90,812			
Nutritional	36,242	3,695	39,937	25,327	2,782	28,109			
Life-Sustaining/Other	80,863	8,237	89,100	142,570	6,318	148,888			
Total - Trip Purpose	1,145,147	33,171	1,178,318	417,208	28,420	445,628			

Unduplicated Passenger Head Count (UDPHC)								
UDPHC	9,224	4,482	13,706	11,319	5,616	16,935		
Total - UDPHC	9,224	4,482	13,706	11,319	5,616	16,935		

Unmet & No Shows						
Unmet Trip Requests	0	N/A	0	0	N/A	0
No Shows	0	N/A	0	0	N/A	0
Customer Feedback						
Complaints	0	N/A	0	0	N/A	C
Commendations	0	N/A	0	0	N/A	C

Date Created: 09/01/2022Created By: Catherine Morales

Date Modified:

Modified By: Patrick

09/12/2022 Murray

#### **Comments**

\* Required Field

Add

Date Created	Created By	User Role	Date Modified	Modified By	*Comment	Delete	Save
09/12/2022	Patrick Murray	CTC User			Complementary ADA Service declined due to more riders using MOD		

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#### **CTC Vehicles & Drivers**

County: Pinellas CTC Status: In Progress CTC Organization:

Pinellas Suncoast Transit Authority

Fiscal Year: CTD Status: Pending Submission

07/01/2021 - 06/30/2022

CTC Organization CTC Coordinated System CTC Trips CTC Vehicles & Drivers CTC Revenue Sources CTC Expense Sources

	Selec	ted Reporting Po	eriod	Previo	ous Reporting Pe	riod
	CTC & Transportation Operators	Coordination Contractors	Total	CTC & Transportation Operators	Coordination Contractors	Total
Vehicle Miles				R	1	
Deviated Fixed Route Miles	0	N/A	0	0	N/A	0
Complementary ADA Service Miles	0	N/A	0	0	N/A	0
Paratransit Miles	1,752,142	293,722	2,045,864	912,513	243,881	1,156,394
Transportation Network Companies (TNC) Miles	0	N/A	0	96,192	N/A	96,192
Taxi Miles	0	N/A	0	56,168	N/A	56,168
School Board (School Bus) Miles	0	N/A	0	0	N/A	0
Volunteers Miles	0	N/A	0	0	N/A	0
Total - Vehicle Miles	1,752,142	293,722	2,045,864	1,064,873	243,881	1,308,754
Roadcalls & Accidents						
Roadcalls	9	4	13	225	9	234
Chargeable Accidents	6	5	11	28	1	29
Vehicle Inventory		-				
Total Number of Vehicles	293	73	366	229	87	316
Number of Wheelchair Accessible Vehicles	103	17	120	112	24	136
Drivers					,	
Number of Full Time & Part Time Drivers	404	154	558	327	168	495
Number of Volunteer Drivers	5	2	7	5	1	6

Date Created: 09/01/2022Created By: Catherine

Morales

Date Modified:

Modified By:

#### Comments

\* Required Field

Add

<b>Date Created</b>	Created By	User Role	Date Modified	Modified By	*Comment	Delete	Save
09/12/2022	Patrick Murray	CTC User			Number of drivers is higher		
					due to increased turn over and		
					need to provide coverage for		
					drivers being out due to		
					COVID.		

## Level of Competition Worksheet 2

1. Inventory of Transportation Operators in the Service Area

		Column A Operators	Column B Operators	Column C Include Trips	Column D % of all Trips
		Available	Contracted in the	merade Trips	70 OI an 111ps
			System.		
Priva	te Non-Profit				
Priva	te For-Profit				
Gove	ernment				
Publi	c Transit				
Agen	ıcy				
Total	1				
2.	How many o	f the operators are	coordination contract	ors?	
3.	Of the operator of expanding		e local coordinated sys	stem, how many ha	ve the capability
	Does the CT	C have the ability	to expand?		
4.	Indicate the	date the latest tran	sportation operator wa	s brought into the s	ystem.
5.	Does the CT	C have a competit	ive procurement proce	ess?	
6.		ve (5) years, how the transportation of	many times have the fooperators?	ollowing methods b	peen used in
	Low	bid		Requests for propo	osals
	Requ	ests for qualificati	ons	Requests for interes	ested parties
		tiation only			_
	Which of the operators?	e methods listed or	n the previous page wa	s used to select the	current

Which of the following items are incorporated in the review and selection of 7. transportation operators for inclusion in the coordinated system?

C1:11:4:
Capabilities of operator
Age of company
Previous experience
Management
Qualifications of staff
Resources
Economies of Scale
Contract Monitoring
Reporting Capabilities
Financial Strength
Performance Bond
Responsiveness to Solicitation

Scope of Work
Safety Program
Capacity
Training Program
Insurance
Accident History
Quality
Community Knowledge
Cost of the Contracting Process
Price
Distribution of Costs
Other: (list)

8.	If a competitive bid or request operators, to how many poten recently completed process?	1 1	-
	How many responded?		
	The request for bids/proposals w	as distributed:	
	Locally	Statewide	Nationally
9.	Has the CTC reviewed the poss	*	•

# Level of Availability (Coordination) Worksheet 3

Planning – What are the coordinated plans for transporting the TD population?
Public Information – How is public information distributed about transportation services in
the community?
Certification – How are individual certifications and registrations coordinated for local TD transportation services?
Eligibility Records - What system is used to coordinate which individuals are eligible for
special transportation services in the community?

Call Intake – To what extent is transportation coordinated to ensure that a user can reach a Reservationist on the first call?
Reservationist on the first can:
Reservations – What is the reservation process? How is the duplication of a reservation prevented?
Trip Allocation – How is the allocation of trip requests to providers coordinated?
Scheduling – How is the trip assignment to vehicles coordinated?

Transport – coordinated?	How a	are the	actual	transportation	services	and	modes	of tra	nsportation
Dispatching -	- How is	the real	l time co	ommunication a	and direction	on of d	lrivers c	oordina	nted?
General Service coordinated?	vice N	/Ionitor	ring –	How is the	overseein	ng of	transpo	ortation	operators
	_	_	_	_		_		_	
Daily Service	Monit	toring -	- How a	re real-time res	olutions to	trip p	roblems	coordi	nated?

Trip Reconciliation – How is the confirmation of official trips coordinated?
Billing – How is the process for requesting and processing fares, payments, and reimbursements coordinated?
Reporting – How is operating information reported, compiled, and examined?
Reporting – How is operating information reported, compiled, and examined?
Reporting – How is operating information reported, compiled, and examined?
Reporting – How is operating information reported, compiled, and examined?
Reporting – How is operating information reported, compiled, and examined?
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Reporting – How is operating information reported, compiled, and examined?
Reporting – How is operating information reported, compiled, and examined?
Reporting – How is operating information reported, compiled, and examined?
Cost Resources – How are costs shared between the coordinator and the operators (s) in order
Cost Resources – How are costs shared between the coordinator and the operators (s) in order
Cost Resources – How are costs shared between the coordinator and the operators (s) in order
Cost Resources – How are costs shared between the coordinator and the operators (s) in order
Cost Resources – How are costs shared between the coordinator and the operators (s) in order
Cost Resources – How are costs shared between the coordinator and the operators (s) in order

Information Resources – How is information shared with other organizations to ensure smooth service provision and increased service provision?
Overall – What type of formal agreement does the CTC have with organizations, which provide transportation in the community?