Coordinated Human Service Mobility Plan
2019 Update

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Federal Requirement

- DRPT is the lead agency for developing the CHSM plan for most of Virginia
  - The urbanized Northern Virginia area is included in MWCOG’s plan
- A CHSM plan must include input from seniors; individuals with disabilities; representatives of public, private, and nonprofit transportation and human service providers; and other members of the public
  - DRPT’s process to update the plan and include these groups in its development began in early 2018 and ended with a public comment period in fall 2019
Outreach Timeline

2018
- 1 Pop-up event
- 90 Participants in 3 Regional Coordination Calls
- 1 Statewide Steering Committee Meeting
- 16 in-person one-on-one interviews

2019
- 6 Community Conversations with 110 participants
- 6 Regional Workshops and Surveys with 126 total participants
- 6 Ride-along interviews
- 5 Special Topic Interviews and Surveys
- 14 Mobility Manager Interviews
Former Plans

• In previous years, we developed the CHSM Plans by planning district commission (PDC) region
  • More than 20 plans
  • Required annual grant applicant notification to the appropriate PDC

• Dividing plans in this way did not allow us to identify statewide gaps or make recommendations to address them
Update Process

• The approach for this update was to develop one statewide plan with regional elements
  • Many of the challenges that exist in one region exist in another.
• The new plan contains regional elements that address the unique challenges, needs, and goals of a single region while recognizing statewide gaps and goals
Figure 1. Overview of Virginia Regions

**NORTHERN REGION**
- Population: 2.7 million
- 65+ Population: 302,400 (11.4%)
- Residents with Disability: 199,800 (7.4%)
- Residents in Poverty: 180,900 (6.7%)
- Regional Challenges: Limited transit outside of metro DC area

**TIDEWATER REGION**
- Population: 1.7 million
- 65+ Population: 225,000 (13.0%)
- Residents with Disability: 187,000 (11.0%)
- Residents in Poverty: 210,000 (12.0%)
- Regional Challenges: Geography

**ALLEGHANY REGION**
- Population: 544,292
- 65+ Population: 108,858 (20.0%)
- Residents with Disability: 75,000 (14.0%)
- Residents in Poverty: 75,000 (14.0%)
- Regional Challenges: Safety of vulnerable populations, lack of quality-of-life trips

**SOUTHWEST REGION**
- Population: 392,112
- 65+ Population: 78,422 (20.0%)
- Residents with Disability: X (21.0%)
- Residents in Poverty: 71,000 (18.0%)
- Regional Challenges: Topography, interstate trips, lack of funding alternatives

**WESTERN REGION**
- Population: 881,911
- 65+ Population: 149,925 (17.0%)
- Residents with Disability: 119,940 (13.6%)
- Residents in Poverty: 129,641 (14.7%)
- Regional Challenges: Limited service, connectivity between urban areas

**CENTRAL REGION**
- Population: 1.8 million
- 65+ Population: 270,000 (15%)
- Residents with Disability: 223,200 (12.4%)
- Residents in Poverty: 214,200 (11.9%)
- Regional Challenges: Trips outside of agency service areas
2019 CHSM Plan

• Recognizes transportation needs of specialized populations and recommends approaches to meeting the needs
  • Seniors (FTA 5310 and Senior Grants)
  • Individuals with disabilities (FTA 5310 Grants)
  • Low-income
  • Veterans (for seniors; see above)
  • Homeless/precariously housed
  • Youth
Statewide Opportunities

• Trip Eligibility; Trips in Demand:
  • Recurring medical
  • Location-specific medical
  • Quality-of-life non-medical
  • Essential non-medical
  • Employment
  • After-hours
  • Multi-stop
  • Long-distance

• Education
• Service Alternatives
• Funding
Major Statewide Recommendations

• Develop a Statewide Steering Committee to identify and address issues that affect transportation at a high level
• Develop regional advisory committees that report back to the statewide steering committee
• Explore additional federal opportunities for funding
• Coordinate funding across state and federal programs
• Continue discussions with transportation network companies and other alternative providers
• Group trip types to maximize ridership
Central Region Actions

- Develop a unified message for rural jurisdiction elected and administrative officials about the ongoing public need for human services transportation.
- Ensure drivers are equipped with the proper training and resources to manage and provide aid to their potential passengers and those passengers' health issues and disabilities.
- Ramp up grassroots work with senior centers, doctor's offices, living facilities, and other relevant partners or potential partners (Area of focus).
- Focus education and publicity efforts on residential rental offices, community centers, and other public areas.
- Work with local jurisdictions to include human services transportation into local transportation planning (Regional strength).
- Work with hospitals, medical centers, and other health care facilities to catalog existing transportation programs for recurring medical trips; see how trips serving these facilities, if possible, can be shifted to other programs.
- Explore local funding to support trips for seniors, individuals with disabilities, and other vulnerable or special populations.
Questions?

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