



**PUBLIC  
TRANSPORTATION**

**ALTRANS**  
Gets You Places

# Human Services Coordinated Transportation Plan Fiscal Year 2017

**Cullman County  
Lawrence County  
Morgan County**

Prepared By



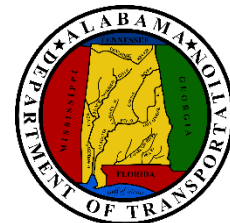
**North Central Alabama  
Regional Council of Governments**

# Human Services Coordinated Transportation Plan Fiscal Year 2017

**Cullman County  
Lawrence County  
Morgan County**

**North Central Alabama  
Regional Council of Governments  
P.O. Box C  
216 Jackson Street SE  
Decatur, AL 35602  
256-355-4515  
[www.narcog.org](http://www.narcog.org)**

**Jeffrey A. Pruitt, AICP – Executive Director  
Joseph F. Hester, AICP – Planning Director  
Robby Cantrell – Transportation Director  
Christina Argo – Planner  
Paula Garrett – Planner  
Shelby Selman – Planner**



This Public Involvement Plan was financed in part by the U.S. Department of Transportation, Federal Highway Administration, the Federal Transit Administration, the Alabama Department of Transportation, and produced by the North Central Alabama Regional Council of Governments (NARCOG) in fulfillment of requirements set forth in Title 23 USC 134 and 135 (as amended by MAP-21 Sections 1201 and 1202). The contents of this document do not necessarily reflect the official views or policy of the U.S. Department of Transportation.

**NORTH CENTRAL ALABAMA REGIONAL COUNCIL OF GOVERNMENTS**

**Resolution Number 2017 - 0010**

**Human Services Coordinated Transportation Plan FY 2017**

**WHEREAS**, the Alabama Department of Transportation (ALDOT) has contracted with the North Central Alabama Regional Council of Governments (NARCOG) to update the Human Services Coordinated Transportation Plan (HSCTP), for Cullman, Lawrence, and Morgan counties; and

**WHEREAS**, the Moving Ahead for Progress in the 21<sup>st</sup> Century act (MAP-21) requires that projects funded through the Enhanced Mobility of Seniors and Individuals with Disabilities program be derived from a locally developed plan; and

**WHEREAS**, the document has been prepared in accordance with the requirements of the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU); and

**WHEREAS**, the HSCTP is the instrument by which the NARCOG describes the current status and future plans for human services transportation planning; and

**WHEREAS**, the NARCOG staff has updated the HSCTP for FY 2017, which includes new demographic and regional context information.

**NOW THEREFORE, BE IT RESOLVED**, that the NARCOG Board of Directors hereby adopts the FY 2017 Human Services Coordinated Transportation Plan.

**RESOLVED** this 25<sup>th</sup> day of September, 2017

  
\_\_\_\_\_  
Chairman

  
\_\_\_\_\_  
Executive Director

# Table of Contents

Resolution .....	ii
1.0 Introduction .....	1
1.1 Regulations and Guidelines .....	1
1.2 Vision Statement.....	1
1.3 Goals.....	1
2.0 Regional Overview .....	3
2.1 Cullman County.....	3
2.1.1 Geographic Information .....	3
2.1.2 Population Characteristics .....	3
2.1.3 Common Destinations.....	3
2.2 Lawrence County .....	4
2.2.1 Geographic Information .....	4
2.2.2 Population Characteristics .....	4
2.2.3 Common Destinations.....	4
2.3 Morgan County .....	5
2.3.1 Geographic Information .....	5
2.3.2 Population Characteristics .....	5
2.3.3 Common Destinations.....	5
3.0 Transportation Services .....	6
3.1 Cullman Area Rural Transit System (CARTS) .....	6
3.2 NARCOG Regional Transit Agency (NARCOG Transit) .....	8
4.0 Private and Non-Profit Systems .....	10
5.0 Sources of Regional Transportation Funding.....	14
5.1 Section 5310 Overview.....	14
5.2 Section 5307 and 5311 Overview.....	14
5.3 Section 5316 Overview.....	15
5.4 Section 5317 Overview.....	15
5.5 State Funding .....	15
6.0 Strategies to Address Unmet Needs.....	16
7.0 Continuing Efforts .....	18
7.1 Public Review .....	18
7.2 Endorsement of the Plan.....	19
Appendices.....	20

## **1.0 Introduction**

### **1.1 Regulations and Guidelines**

On August 10<sup>th</sup>, 2005, President Bush signed into law the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU). In this legislation, a Coordinated Public Transit – Human Services Transportation Plan is required in several of the grant funds, including, 5310 (Elderly Persons and Persons with Disabilities), 5316 (Job Access and Reverse Commute), and 5317 (New Freedom). The primary goals of this coordinated plan is to minimize duplication, increase transit services, and receive input from transportation service providers, human service providers and the public. The purpose of the Human Services Coordinated Transportation Plan (HSCTP) is to improve transportation services for persons with disabilities, older adults, and individuals with lower incomes by ensuring that communities coordinate transportation resources provided through multiple federal programs.

In Alabama, The Alabama Department of Transportation (ALDOT) has contracted with the Alabama Association of Regional Councils (AARC) to develop regional plans. In North Central Alabama, the North Central Alabama Regional Council of Governments (NARCOG) is the agency responsible for this plan. The Alabama Department of Transportation (ALDOT) provides 80 percent of the funding while the remaining 20 percent is local matching funds. AARC is responsible for final delivery of the completed plans.

### **1.2 Vision Statement**

The staff of the North Central Alabama Regional Council of Governments (NARCOG) worked with the Regional Stakeholders Group (human service providers, transit providers, general public, etc.) to develop the following Vision Statement for the Human Services Coordinated Transportation Plan:

*We envision an efficient, coordinated transit system, where the local transit providers and human service organizations work together to meet the transportation needs of the people of North Central Alabama.*

### **1.3 Goals**

The North Central Alabama Regional Stakeholders Group developed the following Goals for the Human Services Coordinated Transportation Plan:

#### **Goal 1: Enhance Transportation Access**

It is the goal of the Regional Stakeholders Group and the North Central Alabama Regional Council of Governments to enhance and sustain transit services in the North Central Alabama Region through the coordination of existing and future transit services.

### Goal 2: Minimize Duplication

It is the goal of the Regional Stakeholders Group and the North Central Alabama Regional Council of Governments to minimize the duplication of transit services in the North Central Alabama Region through coordination of existing and future transit services.

### Goal 3: Provide Cost-Efficient Transit Services

It is the goal of the Regional Stakeholders Group and the North Central Alabama Regional Council of Governments to develop the most cost-efficient transit system possible in the North Central Alabama Region through the coordination of existing and future transit services and to identify and maximize the necessary resources to accomplish this.

### Goal 4: Sustain and Maintain Existing Services

It is the goal of the Regional Stakeholders Group and the North Central Alabama Regional Council of Governments that this plan supports maintaining the status quo where possible.

### Goal 5: Enhance Existing Traditional Transit Providers

It is the goal of the Regional Stakeholders Group and the North Central Alabama Regional Council of Governments to exploit available opportunities to enhance and expand existing traditional transportation services within the region. This includes (but is not limited to) Sections 5307 and 5311, Sections 5316 and 5317, Section 5310 as well as intercity bus transportation as defined in Section 5311.

### Goal 6: Explore and Implement Emerging Transportation Opportunities

It is the goal of the Regional Stakeholders Group and the North Central Alabama Regional Council of Governments to identify various service opportunities and associated funding streams to provide enhanced transportation opportunities to expanded populations in less traditional venues.

Central to these goals, will be the emphasis on cooperation and coordination among transportation service providers, regional and state transportation agencies, city and county governments and eligible clients. This plan will incorporate the coordination and development policies that will both eliminate overlapping services and fill gaps where services in the Region are lacking.

## **2.0 Regional Overview**

### **2.1 Cullman County**

*(Detailed demographic maps are located in the Appendices)*

#### **2.1.1 Geographic Information**

Cullman County is located in North Central Alabama and is situated between the William B. Bankhead National Forest, to the west, and the Mulberry Fork of the Black Warrior River, to the east. Cullman County is bordered by Lawrence and Morgan Counties in the NARCOG Region as well as the counties of Marshall, Blount, Walker, and Winston. The County Seat is the City of Cullman and there is a total of 11 incorporated municipalities within Cullman County. The total land area of Cullman County is approximately 735 square miles.

Cullman County is bisected by Interstate 65 and U.S. Highway 31 running north and south; and U.S. Highway 278 running east and west. Cullman County is convenient to Decatur, Birmingham and Huntsville. The City of Good Hope, which is located near the County center, is approximately 42 miles from Decatur, 45 miles from Birmingham, and approximately 58 miles from Huntsville.

#### **2.1.2 Population Characteristics**

Cullman County has a total population of 80,965, according to the 2011-2015 American Community Survey 5-Year Estimates. 77,478 or 95.7 percent of the population are White, 964 or 1.2 percent are Black, and 3,493 or 4.3 percent are Hispanic. 40,081 are males and 40,884 are females.

The population of Cullman County 65 years old and older is 14,033 or 17.3 percent. Cullman County has a disabled population of 12,641 or 15.8 percent. Of this number, 1,776, between the ages of 18 and 64, are employed.

The median income, according to the 2011-2015 American Community Survey 5-Year Estimates, was \$38,971 for Cullman County, and there were 3,842 families or 14,814 persons living below the poverty level. 4.4% of all households have no access to an automobile. The highest concentration of homes with no automobile are found in and around the City of Cullman.

#### **2.1.3 Common Destinations**

The vast majority of shopping areas, medical facilities, employment centers and restaurants are located within the City of Cullman along Alabama Highways 31, 69, and 157, as well as along U.S. Highway 278. Cullman County has one hospital (Cullman Regional Medical Center in Cullman), four nursing homes (three in Cullman, one in Hanceville), six assisted living facilities (three in Cullman, one in Hanceville, Holly Pond, and South Vinemont), two mental health facilities (Cullman), and eight senior centers (Brushy Pond, Colony, Cullman, Fairview, Hanceville, Holly Pond, West Point, and Crane Hill). There is one institute of higher education, Wallace State Community College in Hanceville.

## **2.2 Lawrence County**

*(Detailed demographic maps are located in the Appendices)*

### **2.2.1 Geographic Information**

Lawrence County is located in North Central Alabama and is situated between the William B. Bankhead National Forest, to the south, and the Tennessee River, to the north. Lawrence County is bordered by Cullman and Morgan Counties in the NARCOG Region as well as the counties of Winston, Franklin, Colbert, Lauderdale, and Limestone. The County Seat is the City of Moulton and there are a total of five incorporated municipalities within Lawrence County. The total land area of Lawrence County is approximately 691 square miles.

Lawrence County is bisected by Alabama Highway 24 running east and west; and Alabama Highway 33 running north and south. Alabama Highway 157 also bisects the County from the southeast corner to the northwest corner with U.S. Highway 72/Alabama Highway 20 cutting across the northern third of the County. Lawrence County also has heavily travelled sections of Alabama Highway 36, in the southeast and Alabama Highway 101 in the northwest. Lawrence County is convenient to Decatur, Huntsville and Florence. The City of Moulton, which is located near the County center, is approximately 21 miles from Decatur, approximately 48 miles from Huntsville and, approximately 35 miles from Florence.

### **2.2.2 Population Characteristics**

Lawrence County has a total population of 33,586, according to the 2011-2015 American Community Survey 5-Year Estimates. 25,978 or 77.3 percent of the population are White, 3,848 or 11.5 percent are Black, and 697 or 2.1 percent are Hispanic. 16,421 are males and 17,165 are females.

The population of Lawrence County 65 years old and older is 5,306 or 15.8 percent. Lawrence County has a disabled population of 6,872 or 20.6 percent. Of this number, 911, between the ages of 18 and 64, are employed.

The median income, according to the 2011-2015 American Community Survey 5-Year Estimates, was \$40,003 for Lawrence County, and there were 1,443 families or 6,225 persons living below the poverty level. 4.7% of all households have no access to an automobile. The highest concentration of homes with no automobile are found in and around the City of Moulton.

### **2.2.3 Common Destinations**

The vast majority of shopping areas, medical facilities, employment centers and restaurants are located within the City of Moulton along Alabama Highways 24, 33, and 157. Lawrence County has one hospital (Lawrence Medical Center in Moulton), one nursing home (Moulton), and seven senior centers (Caddo, Hatton, Moulton, Mount Hope, North Courtland, Speake, and Town Creek).



## **2.3 Morgan County**

*(Detailed demographic maps are located in the Appendices)*

### **2.3.1 Geographic Information**

Morgan County is located in North Central Alabama and is situated just south of the Tennessee River. Morgan County is bordered by Cullman and Lawrence Counties in the NARCOG Region as well as the counties of Limestone, Madison, and Marshall. The County Seat is the City of Decatur and there are a total of seven incorporated municipalities within Morgan County. The total land area of Morgan County is approximately 579 square miles.

Morgan County is bisected by Interstate 65 running north and south, and Alabama Highway 36 running east and west. Alabama Highway 67 also bisects the County from the southeast corner to the northwest corner with a section of U.S. Highway 72/Alabama Highway 20 in the northwest corner of the County. Morgan County also has heavily travelled sections of Alabama Highway 157, in the southwest and U.S. Highway 231 in the northeast. Morgan County is convenient to Huntsville and Birmingham. The City of Hartselle, which is located near the County center, is approximately 35 miles from Huntsville and, approximately 70 miles from Birmingham.

### **2.3.2 Population Characteristics**

Morgan County has a total population of 119,786, according to the 2011-2015 American Community Survey 5-Year Estimates. 99,051 or 82.7 percent of the population are White, 14,717 or 12.3 percent are Black, and 9,358 or 7.8 percent are Hispanic. 58,814 are males and 60,972 are females.

The population of Morgan County 65 years old and older is 18,332 or 15.3 percent. Morgan County has a disabled population of 19,679 or 16.7 percent. Of this number, 2,869, between the ages of 18 and 64, are employed.

The median income, according to the 2011-2015 American Community Survey 5-Year Estimates, was \$45,751 for Morgan County, and there were 4,141 families or 18,936 persons living below the poverty level. 5.5% of all households have no access to an automobile. The highest concentration of homes with no automobile are found in and around the City of Decatur.

### **2.3.3 Common Destinations**

The vast majority of shopping areas, medical facilities, employment centers and restaurants are located within the Cities of Decatur, Hartselle, and Priceville. Morgan County has three hospitals (Decatur Morgan Hospital – three campuses in Decatur), four nursing homes (two in Decatur, two in Falkville), six assisted living facilities (four in Decatur, one in Falkville, and Priceville), one mental health facility (Decatur), and eight senior centers (Decatur, Eva, Falkville, Hartselle, Lacey's Spring, Morgan City, Neel, and Somerville). There is one institute of higher education, Calhoun Community College, with facilities in Decatur.

### 3.0 Transportation Services

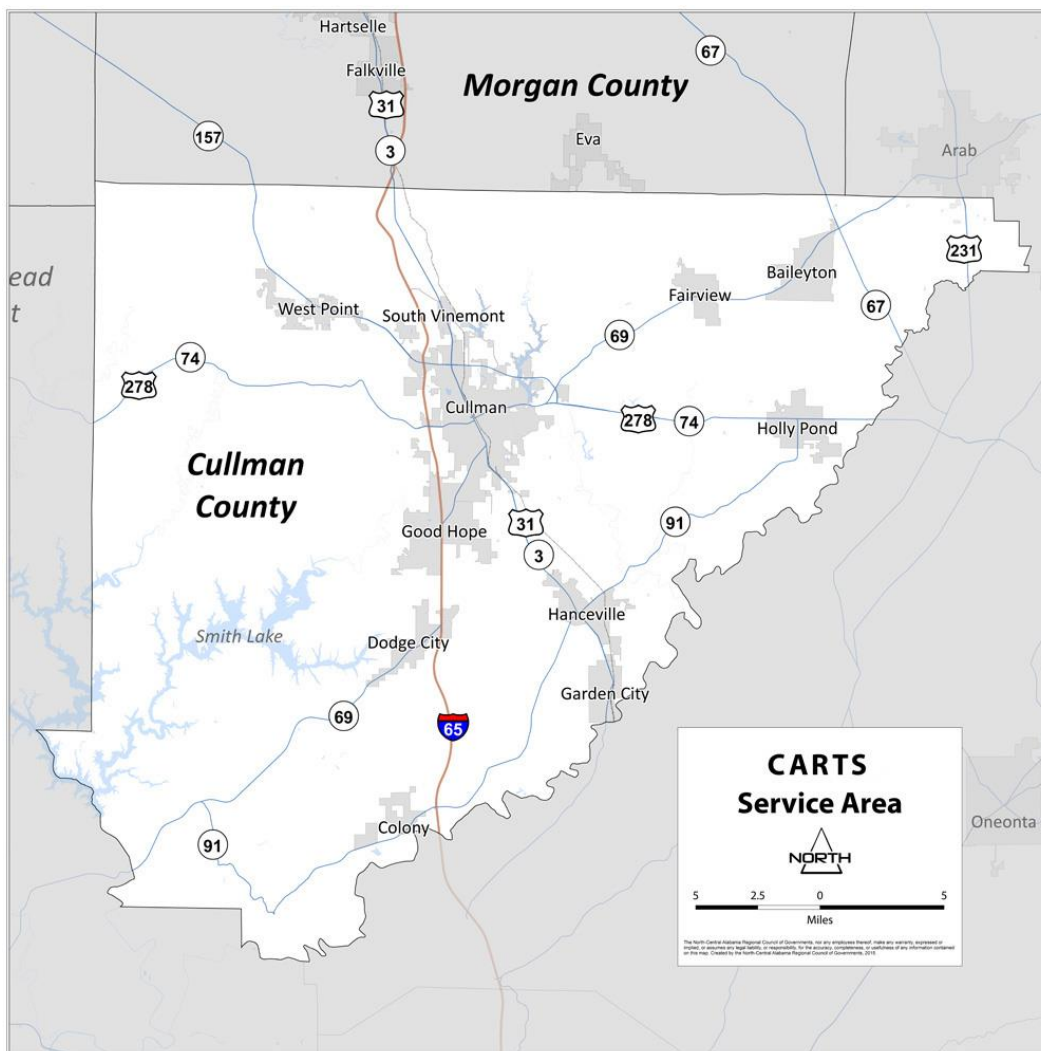
The NARCOG Region has a variety of public, non-profit, and private transportation service providers in the region. The public transportation service providers will be discussed in detail by county and the private and non-profit transportation service providers will be discussed region-wide.

#### 3.1 Cullman Area Rural Transit System (CARTS)

The Cullman Area Rural Transit System (CARTS) operates services throughout Cullman County. The following is current information and services provided by CARTS:

##### Service Area and Scheduling

The CARTS service area is all of Cullman County. Presently all CARTS routes are Demand/Response. The CARTS system also has four contract routes which are coordinated with Demand/Response.



### Days and Hours of Operation

Office hours are Monday thru Friday from 6:30 AM till 4:00 PM (Except Holidays)

### Shopping Routes

1. City Shopping Routes – Rider must live within the Cullman City Limits. Pick-ups are scheduled for 8 AM, 10 AM, or Noon on a first come – first served basis. Farebox rates apply to City Shopping Routes.
2. County Shopping Routes – County Shopping rates are \$3.00 round trip (which includes 3 scheduled stops) and \$0.50 per additional stop.
  - a. Monday – Vinemont, West Point, and Jones Chapel areas
  - b. Tuesday – Holly Pond, Welti, and Berlin areas
  - c. Wednesday – Cold Springs, Dodge City, and Good Hope areas
  - d. Thursday – Gold Ridge, Fairview, Baileyton, Simcoe, Colony, Hanceville, Garden City, and White City areas
  - e. Friday – Crane Hill and Logan areas

### Vehicles, Para Transit and Drivers

CARTS currently has thirty seven (37) vehicles ranging in size from a standard van to a thirty (30) passenger bus. Thirty-six of these vehicles are lift equipped. CARTS is a rural system provider and is not required to operate Para transit services. The CARTS currently has eight (8) full time drivers, twenty five (25) part time drivers and no volunteers.

### Fares

Fares vary, based on location and distance from the City of Cullman with distribution at one way fares of \$6.00 for one way over fifteen (15) miles, \$4.00 for one way fares from seven (7) to fifteen (15) miles, \$2.00 one way fares from zero (0) to seven (7) miles. Elderly and disabled riders receive a fifty percent (50%) discount.

### Social Service Providers / Transportation Services

CARTS has annual contracts with agencies such as Cullman County Center for the Developmentally Disabled, Cullman County Commission on Aging, Cullman Area Chamber of Commerce, and other agencies.

### Service Access

Ride reservations can be made from 6:30 AM to 2:30 PM, Monday through Friday Reservations must be made by 2:30 PM on the previous business day. No reservations made after 2:30 PM.

### CARTS Contact Information

Mailing Address: CARTS, P.O. Box 2518, Cullman, AL 35056

Physical Address: 1950 Beech Avenue SE, Cullman, AL 35056

Telephone: 256-734-1246

Website: <http://www.co.cullman.al.us/carts/carts.html>

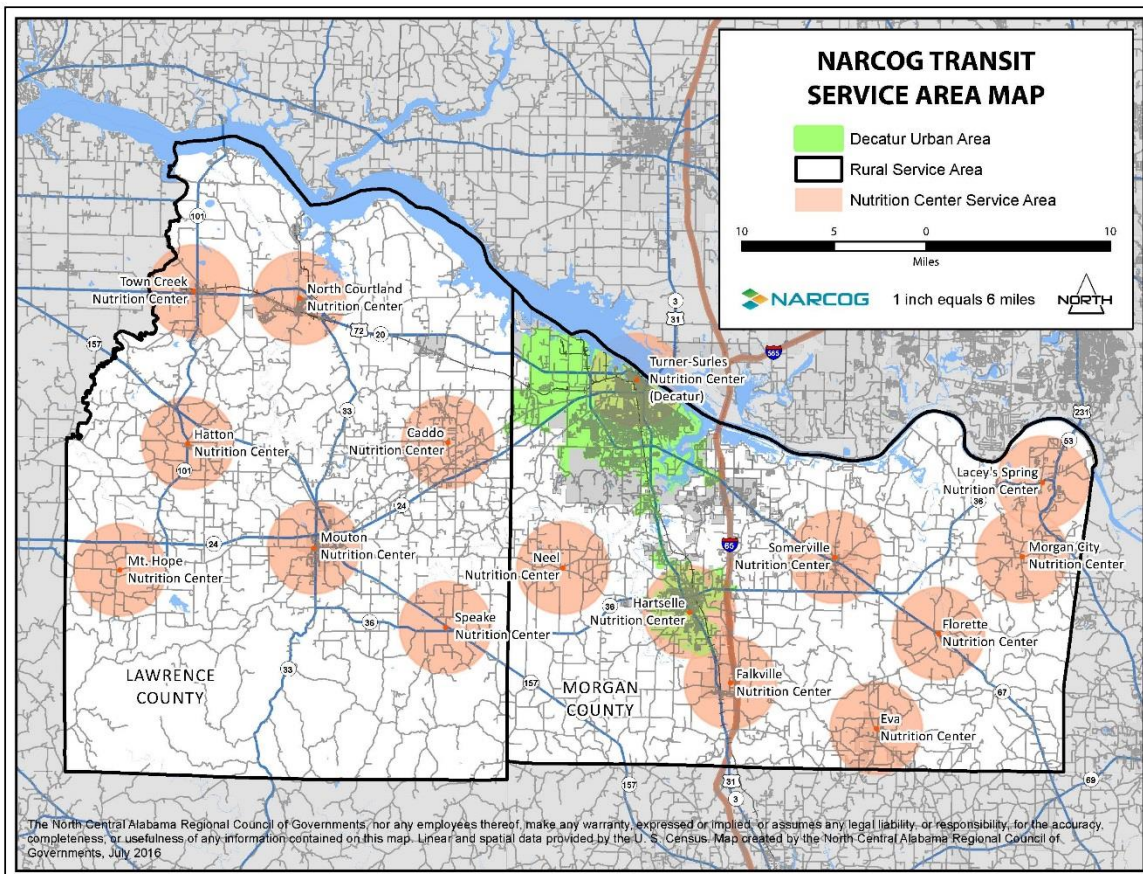
### 3.2 NARCOG Regional Transit Agency (NARCOG Transit)

The NARCOG Regional Transit Agency operates services throughout Lawrence and Morgan Counties. The following is current information and services provided by NARCOG Transit:

#### Service Area and Scheduling

The Regional Transit Agency of the North Central Alabama Regional Council of Governments (NARCOG) is commonly referred to as NARCOG Transit. The service area of NARCOG Transit includes all of Lawrence and Morgan County. NARCOG Transit began operations on October 1, 2016 with the consolidation of Lawrence County Public Transportation, which began operations in August 1982 and the Morgan County Area Transportation System, which began operations in October 1996. The Mission of the NARCOG Regional Transit Agency is to provide safe and affordable public transportation services to the people and businesses of Lawrence and Morgan counties in North-central Alabama.

Service outside the service area is provided infrequently for medical trips and for charter exempt trips within a 50-mile radius of the NARCOG Transit Office, located at 401 2nd Avenue SE, Decatur, AL, 35601. NARCOG Transit does not cross any state line.



### Days and Hours of Operation

NARCOG Transit is currently open Monday thru Friday from 7:00 AM to 5:00 PM.

### Vehicles, Para Transit, Drivers

NARCOG Transit currently operates thirty-eight (48) vehicles with twenty-one (21) of the vehicles having wheelchair lifts. While not currently required to operate Para Transit services, NARCOG Transit could develop the need and capability to provide such a service. NARCOG Transit currently has 12 full-time drivers, 26 part-time drivers and no volunteers.

### Fares

Standard fares for each demand response trip within the service area are:

\$2.00 for 0 to 5.0 miles

\$4.00 for 5.1 to 10.0 miles

\$6.00 for 10.1 to 15.0 miles

\$8.00 for 15.1 to 20.0 miles

\$10.00 for over 20 miles and up to the extent of the NARCOG Transit service area

Fares for trips outside of the NARCOG Transit service area are calculated at \$1.00 per mile, round trip, beginning at NARCOG Transit office, located at 401 2nd Ave SE, Decatur, AL, 35602. Trips outside the service area are generally restricted to medical or other charter exempt trips, and are limited to one stop.

### Social Service Providers / Transportation Services

NARCOG Transit provides transportation services on a daily basis to Terrell Industries, Department of Human Resources (DHR), Community Action Partnership of North Alabama, Mental Health Centers, Senior/Nutrition Centers, dialysis centers and medical centers in Lawrence County and Morgan County.

### Service Access

NARCOG Transit requires that anyone wanting to ride the transit system must call and schedule an appointment no later than twenty four (24) hours in advance and before 2:00 PM. Return or "will call" trips must be scheduled before 4:00 PM each day.

### Special Events

NARCOG Transit provides transportation services for special events as long as the event does not interfere with the normal daily service operations and service remains open to the public. Normal fares are applied to these services.

### NARCOG Transit Contact Information

Mailing Address: NARCOG Transit, 401 2<sup>nd</sup> Ave SE, P.O. Box C, Decatur, AL 35602

Telephone: 256-580-2088

## **4.0 Private and Non-Profit Systems**

### **4.1 Ability Plus, Inc**

*Morgan County*

Ability Plus, Inc. (API) serves Limestone, Madison, Morgan, and St. Claire counties in North Alabama. API provides door-to-door transportation services to existing clients using ten (10) fifteen passenger vans. 5310 funding is used for these vehicles. These vans are operated Monday through Friday from 8 AM to 5 PM and as needed on weekends and holidays.

#### **Contact Information**

Address: Ability Plus, Inc., 111 Research Blvd, Madison, AL 35758

Telephone: 256-489-4696

E-mail: [services@ability-plus.org](mailto:services@ability-plus.org)

Website: [www.ability-plus.org](http://www.ability-plus.org)

### **4.2 The ARC of Morgan County**

*Morgan County*

The ARC of Morgan County transports its clients in one van equipped with a lift. These clients participate in the programs offered by ARC on Wednesdays.

#### **Contact Information**

Address: The ARC of Morgan County, 2234 Graham Avenue SW, Decatur, AL 35601

Telephone: 256-355-6192

E-mail: [info@arcofmorgancounty.org](mailto:info@arcofmorgancounty.org)

Website: [www.arcofmorgancounty.org](http://www.arcofmorgancounty.org)

### **4.3 Boys and Girls Clubs of North Central Alabama**

*Lawrence County, Morgan County*

The Boys and Girls Club of Morgan and Lawrence Counties service inner-city, low-income children with two vans. They provide after school activities for these children at six locations in the City of Decatur (Morgan County) and one location in the Town of North Courtland (Lawrence County).

#### **Contact Information**

Address: Boys and Girls Clubs of North Central Alabama, 245B Jackson Street SE, P.O. Box 1431, Decatur, AL 35602

Telephone: 256-340-3464

E-mail: [bandgsports@charter.net](mailto:bandgsports@charter.net)

Website: [www.asafeplaceforkids.com](http://www.asafeplaceforkids.com)

## Locations

**Beech Street Unit**, 1602 Beech Street SE, Decatur, AL 35601, 256-355-2909

**Third Street Unit**, 407 Third Street SW, Decatur, AL 35601, 256-353-8782

**Sixth Street Unit**, 1404 Sixth Street NW, Decatur, AL 35601, 256-340-3460

**St. Paul's Unit**, 1700 Carridale Street SW, Decatur, AL 35601, 256-350-2611

**Morgan County Systems of Service Unit**, 2531 Highway 20, Decatur, AL 35601, 256-350-8434

**Priceville Unit**, 103 Faye Drive, Priceville, AL 35603, 256-686-1915

## **4.4 Centers for the Developmentally Disabled, North Central Alabama**

*Lawrence County, Morgan County*

The Centers for the Developmentally Disabled of North Central Alabama (CDDNCA) uses eight vans and buses to transport their clients to employment opportunities in the Decatur area. Three of the vehicles are equipped with lifts for wheelchair bound clients. CDDNCA is a grant recipient of Federal 5310 funds.

### Contact Information

Address: Central Office, 1602 Church Street SE, P.O. Box 2091, Decatur, AL 35602

Telephone: 256-350-1458

Website: [www.cddnca.org](http://www.cddnca.org)

Address: Bill Stewart Activity Center, 42 Morgan Street, Moulton, AL 35650

Telephone: 256-974-9185

Address: Decatur Day Program, 2806 Central Parkway SW, Decatur, AL 35603

Telephone: 256-355-7590

Address: Pine Ridge Day Camp, 113 Pine Hill Drive, Somerville, AL 35670

Website: [www.pineridgedaycamp.org](http://www.pineridgedaycamp.org)

## **4.5 Cullman Area Mental Health Authority**

*Cullman County*

The Cullman Area Mental Health Authority has a van route for patients participating in day treatment programs. Providers working with developmentally-disabled patients also provide transportation assistance as part of their client care. The Center also employs case managers to help arrange rides for clients, either through public transit or the Center's own transportation service, if it positively impacts their ability to manage symptoms.

### Contact Information

Address: Cullman Area Mental Health Authority, PO Box 2186, Cullman, AL 35056

Telephone: 256-734-4688

Website: <http://www.mentalhealthcareofcullman.org/>

Email: [hr@camha.com](mailto:hr@camha.com)

#### **4.6 Decatur Youth Services**

*Morgan County*

Decatur Youth Services helps facilitate and encourage a community-wide effort in combating the problems in our community involving our youth. These services are provided within the City of Decatur. Decatur Youth Services currently has five (5) vans that operate on weekdays and some Saturdays based on the needs of the participants.

##### **Contact Information**

Address: Decatur Youth Services, 1202 5<sup>th</sup> Ave SW, Building B, PO Box 488, Decatur, AL 35602

Telephone: 256-341-4690

Website: <http://www.decalabamausa.com/departments/youthservices/index.html>

#### **4.7 Kid One Transport**

*Cullman County, Morgan County*

Kid One Transport is a 501(c)(3) nonprofit organization that provides transportation to medical, dental, and mental health care services for children and expectant mothers who are transportation disadvantaged. They are the only transportation service of this kind within the state, facilitating access to a variety of health care services, including preventive care, behavioral counseling, high-risk prenatal care, and pediatric dialysis. Kid One operates in Morgan and Cullman counties. Approximately two-thirds of Kid One's transports are local, and the remaining one-third are long-distance to receive specialty care at hospitals in major metropolitan areas.

Kid One provides strictly non-emergency healthcare-related transportation. Clients can schedule appointments as many as thirty days in advance and ask for at least three days' advance notice. The scheduling system is "first come, first serve." Currently, they only provide transportation on weekdays, at times of day when healthcare providers are open to receive patients. Kid one will provide transportation to children up to age 19, as well as expectant mothers of any age, and they maintain a low denial rate of approximately 3%. No patient is denied a ride on the basis of their ability to pay. Families must register and fill out an application in order to start accessing service.

##### **Contact Information**

Address: Kid One Transport System, Inc., 110 12<sup>th</sup> Street N, Birmingham, AL 35203

Telephone: 800-543-7143

Website: <https://www.kidone.org/>

#### **4.8 Mental Health Center of North Central Alabama**

*Lawrence County, Morgan County*

The Mental Health Center of North Central Alabama (MHCNCA) is a recipient of Section 5310 funding. The MHCNCA has thirteen (13) fifteen (15) passenger vans that operate in Lawrence and Morgan Counties. Two of these vehicles are lift vehicles. The MHCNCA provides transportation



to clients attending day treatment programs through a van system that runs on a set schedule. This is generally well-utilized or at or near capacity. The MHCNCA will be replacing one 5310 vehicle that was destroyed in an automobile accident in June 2015. The MHCNCA submitted two 5310 applications for replacement vehicles in 2015.

Contact Information

Address: Mental Health Center of North Central Alabama, 1316 Somerville Rd SE, Ste 1,  
Decatur, AL 35601

Telephone: 256-355-5904 or 800-365-6008

Website: <http://www.mhcnca.org/>

## **5.0 Sources of Regional Transportation Funding**

Federal Transit Administration (FTA) Section 5307 Urban Area, Section 5310 Elderly Persons and Persons with Disabilities, Section 5311 Non-urbanized Area, Section 5316 Job Access and Reverse Commute (JARC), and Section 5317 New Freedom programs are sources of transportation funding for human service agencies and transit programs in the NARCOG Region. For agencies to receive Section 5307, 5310, 5311, 5316, and 5317 grant funds, the projects they propose must be consistent with strategies and recommendations contained in this Coordinated Transportation Plan. This section details the governance, eligible activities, funding requirements, and existing sub-recipients of these programs in Cullman, Lawrence, and Morgan Counties.

### **5.1 Section 5310 Overview**

This FTA program is intended to address the transportation needs of the elderly and persons with disabilities. In Alabama, the funding is distributed to the Alabama Department of Transportation (ALDOT), who then distributes the funds based on a competitive grant program. The funds are generally limited to capital purchases, which require a 20% local match. MAP-21 combined the Section 5317 (New Freedom) program with the 5310 program. Eligible 5317-type projects can now be funded with this program.

### **5.2 Section 5307 and 5311 Overview**

Section 5307 provides funding to census designated urbanized areas with a population of 50,000 or more. These funds are intended to be used for general public transit service (no qualifications are placed on riders). However, specialized transit service can be provided with these funds to address the needs of persons with disabilities that would involve rider qualifications. These funds can be used for planning, capital purchases, and operating expenses. Under MAP-21, job access and reverse commute projects are also eligible activities. Planning and capital projects generally require a 20% local match. Operating funds require a 50% local match.

Section 5311 provides funding for areas with a population fewer than 50,000. These funds are intended to be used for general public transit service (no qualifications are placed on riders). In Alabama, the funding is distributed to the ALDOT, who then distributes the funds based on a competitive grant program. The funds may be used for capital purchases, operating expenses, and administrative costs. Under MAP-21, job access and reverse commute projects are also eligible activities. The local matching requirements are generally 20% for capital and administrative expenses and 50% for operating expenses. Government agencies, transit operators, and non-profit agencies are eligible recipients.

### **5.3 Section 5316 Overview**

Under MAP-21, this program was combined with the 5307 and 5311 programs. However, Alabama has not used all of the funds made available under the previous transportation bill. The program will remain open until the remaining funds are exhausted. The purpose of this FTA program is to provide job-related transportation services to welfare recipients, low-income individuals, and reverse commuters. In Alabama, the funding is distributed to the ALDOT, who then distributes the funds based on a competitive grant program. Eligible program charges include planning, capital purchases, operating expenses, and administrative costs. The local matching requirements are generally 20% for planning, 20% for capital projects, and 50% for operating expenses.

### **5.4 Section 5317 Overview**

Alabama has not used all of the funds made available under the previous transportation bill. The program will remain open until the remaining funds are exhausted. The purpose of this FTA program is to provide additional transportation options to persons with disabilities. In Alabama, the funding is distributed to the ALDOT, who then distributes the funds based on a competitive grant program. The funds may be used for planning, capital purchases, operating expenses, and administrative costs. The local matching requirements are generally 20% for planning, 20% for capital projects, and 50% for operating expenses.

### **5.5 State Funding**

The State of Alabama does not provide any funding for transit service. State law prevents fuel taxes from being used for anything except road maintenance or construction. In addition, most of the state general funds are put aside for specific projects.

## 6.0 Strategies to Address Unmet Needs

Some of the greatest unmet needs in our Region are funding levels, lack of resources, days and hours of operation, and limitation of use outside of the Region as identified below as challenges to providing good and efficient transit to the people that depend on it.

**Challenge 1:** The lack of state and local government funding for transit projects.

- **Strategy A:** Education of elected officials, senior Alabama Department of Transportation (ALDOT) staff, and the general public about the benefits of a viable transit system in this region.
- **Strategy B:** Increased funding can be achieved by the Alabama Department of Transportation (ALDOT) increasing funding levels for various transit programs, local or state tax measures specifically for transit, or more private investment in transit in the region.

**Challenge 2:** Changing the mindset of the populace of the NARCOG region to be more accepting of transit.

- **Strategy:** The perception of mobility can be altered by using advertisements in print, television, and radio as well as the internet.

**Challenge 3:** The expansion of transit service areas and hours of operation.

- **Strategy A:** Expand into contiguous geographical areas in order to open additional opportunities in commuting to work, shopping, medical needs (located in Huntsville, Birmingham/UAB, or Montgomery (Veteran's Hospital), and other activities through the 5310 program as well as other, traditional transit programs.
- **Strategy B:** Expand the service areas in the Region in order to open additional opportunities for commuting to work, shopping, medical needs, and other activities through the 5310 program as well as other, traditional transit programs.
- **Strategy C:** Expand the hours and days of operation of current services to provide better benefit to all users
- **Strategy D:** Expand service areas and hours of operation where residents/disabled veterans and other citizens dependent upon transit services can be identified.
- **Strategy E:** Develop and support a methodology to sustain and support existing services, especially 5310, 5311 and 5316, and exploit opportunities to move forward with the establishment of regional transportation solutions and alternatives.
- **Strategy F:** Education of elected officials and the general public would help bring this issue to the forefront.

**Challenge 4:** The lack of coordination among public service providers, private service providers, and non-profit service providers.

- **Strategy:** Participation in the Human Services Coordinated Transportation Plan process is a beginning to open the lines of communication and coordination between these agencies.

**Challenge 5:** Coordination of services at common origins and destinations.

If the service providers could setup daily or weekly circular routes from common origins to common destinations and back, a synergy might be reached where the needs of the service providers and the needs of the travelling public might be more efficiently met.

- **Strategy A:** Identify common origins and destinations of the Low and Moderate Income (LMI) population (i.e. big box retails, medical and health facilities).
- **Strategy B:** Identify means and methodology of solutions for enhanced and more efficient scheduling.
- **Strategy C:** Consider solving scheduling issues/problems through technology such as routing and dispatching software, mobile data terminals, vehicle locating devices, and other web-based technologies.

**Challenge 6:** The establishment of work related transit services.

- **Strategy A:** Explore, and implement where practicable, van and work routes within the region and from within the region to contiguous areas with high employment potential.
- **Strategy B:** The sustainment and/or expansion of the Job Access Reverse Commute (JARC) program is one solution specifically suited for this type of activity.
- **Strategy C:** Promote employers and employees partnering with service providers to achieve the goal of more efficient transportation to and from work, as well as lower cost of transportation to the workers.

## **7.0 Continuing Efforts**

The NARCOG staff will monitor transit issues in the Region in order to determine whether this plan needs modification. The plan was reviewed and updated in Fiscal Year 2017. If the MAP-21 planning requirements continue past 2017 and funds are available, the plan will likely be revised in 2019.

Across the Region, transit providers, local agencies and the North Central Alabama Regional Council of Governments will work to address the most pressing transportation-related needs of the citizens of the Region.

To begin addressing the issues surrounding transportation barriers, the Alabama Department of Public Health (ADPH) conducted a series of email surveys and interviews (telephone and in-person) with representatives of 115 safety-net healthcare providers across the state. This sample of providers primarily included rural hospitals, rural health clinics, federally-qualified health centers, community mental health centers, and Department of Public Health social workers. The results of the survey, of the NARCOG Region, performed for the Alabama Community Health Improvement Plan (ACHIP) can be found in the Appendix.

### **7.1 Public Review**

The NARCOG staff held a public regional stakeholders meeting on September 10, 2015 in the NARCOG Board Room in Decatur, Alabama. Notification for this meeting was published in print media in all three counties in the NARCOG Region. Notifications were also posted on the NARCOG website, the NARCOG RPO website, as well as on the NARCOG Facebook page.

The NARCOG Staff presented the body of this plan at the September 10, 2015 meeting. Documentation and notes related to the 2015 stakeholders meeting are included in the Appendices.

The NARCOG staff held a second public regional stakeholders meeting on September 25, 2017 in the NARCOG Board Room in Decatur, Alabama. Notification for this meeting was published in print media in all three counties in the NARCOG Region. Notifications were also posted on the NARCOG website, the NARCOG RPO website, as well as on the NARCOG Facebook page.

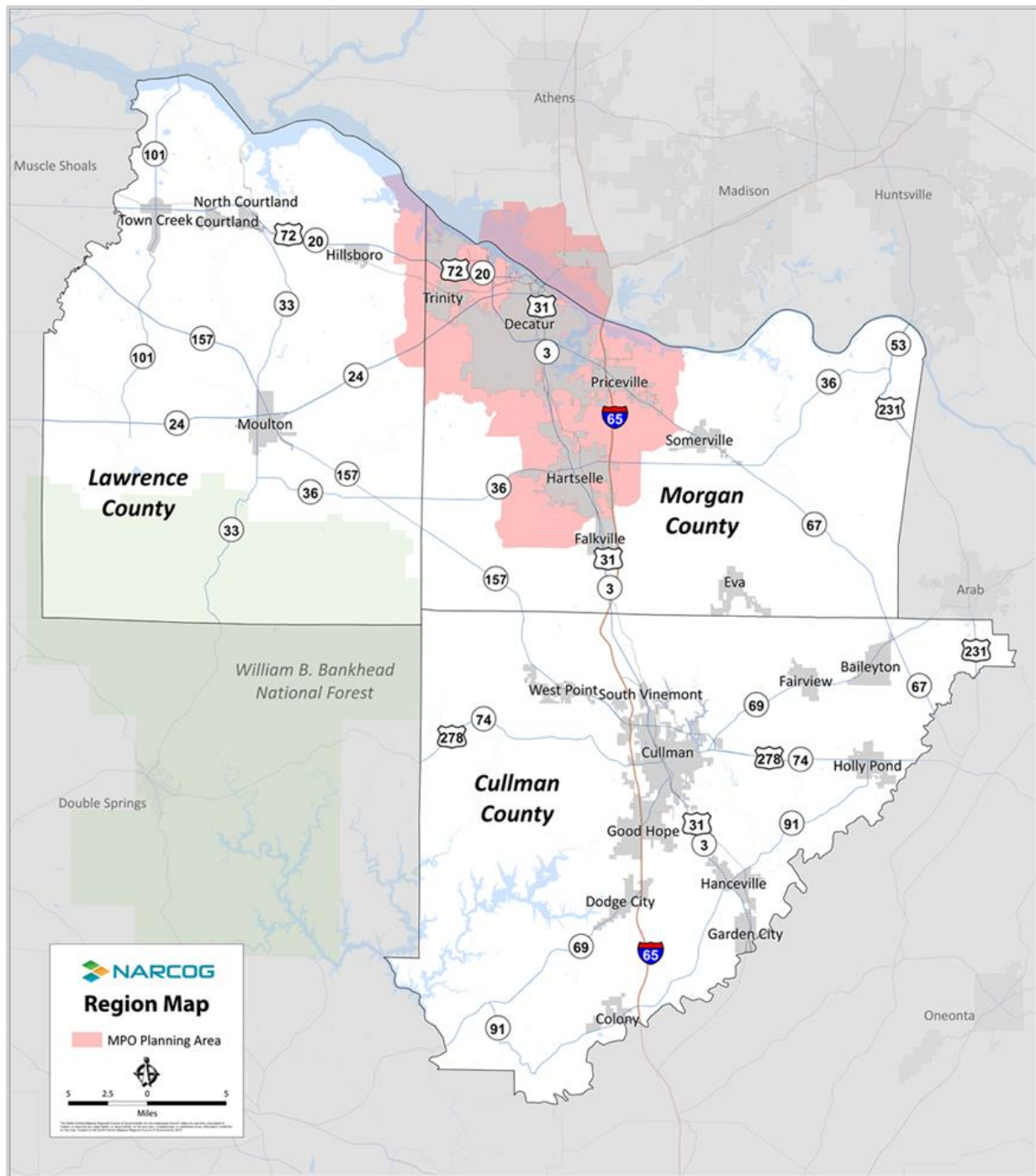
The NARCOG Staff presented the body of this plan as an update to the 2015 plan at the September 25, 2017 meeting. As this plan is updated frequently, the public is welcome to comment on or contribute to this plan at any time. Documentation and notes related to the stakeholders meeting are included in the Appendices.

## **7.2 Endorsement of the Plan**

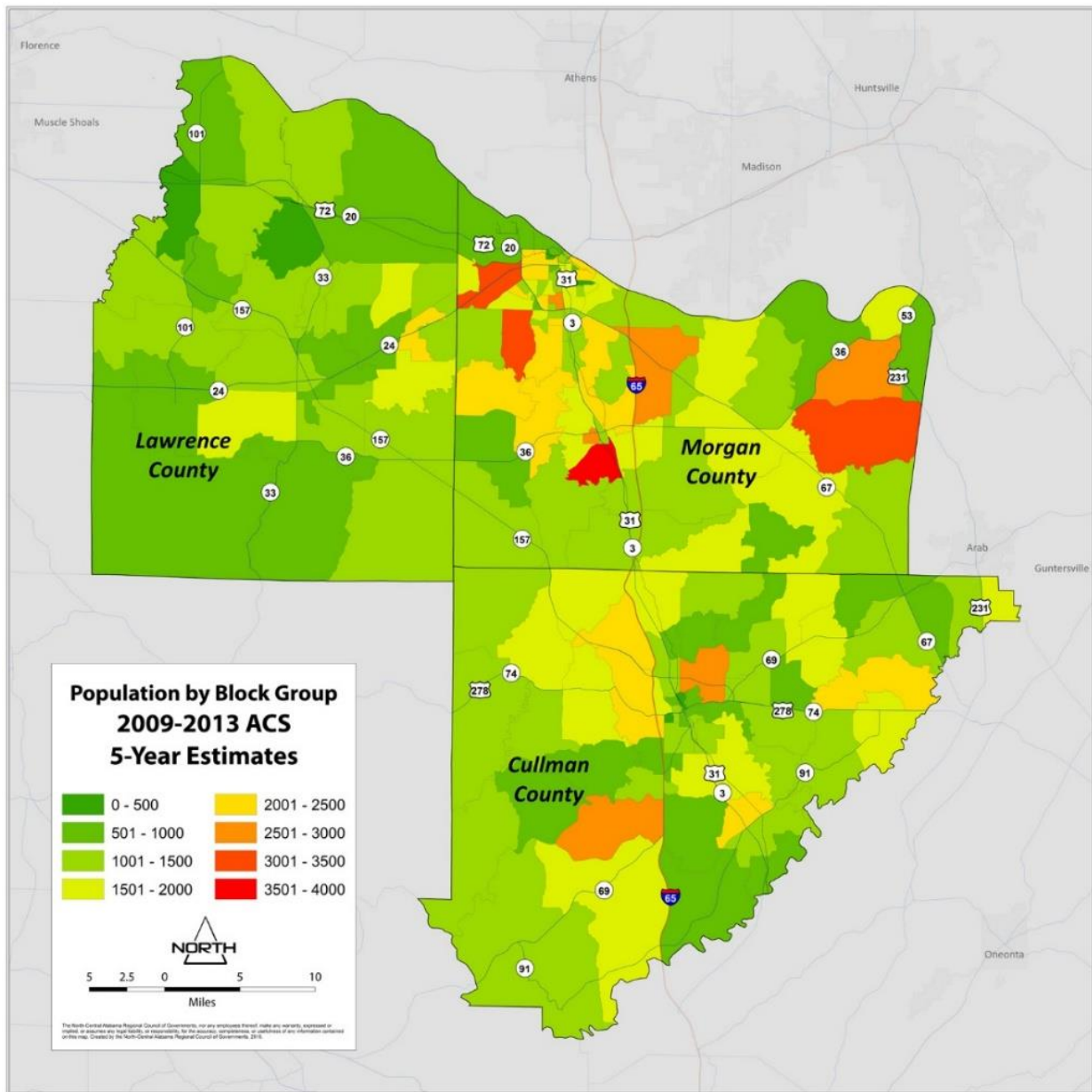
The NARCOG staff reviewed the comments received at the Regional Stakeholders public meeting and incorporated that information into this plan update. The NARCOG Board of Directors reviewed the plan, the public comments, and the staff responses to the comments at the September 25, 2017 meeting. The NARCOG Board of Directors reviewed and adopted the plan on September 27, 2017 and the plan was submitted to the Alabama Department of Transportation on September 30, 2017.

# Appendices

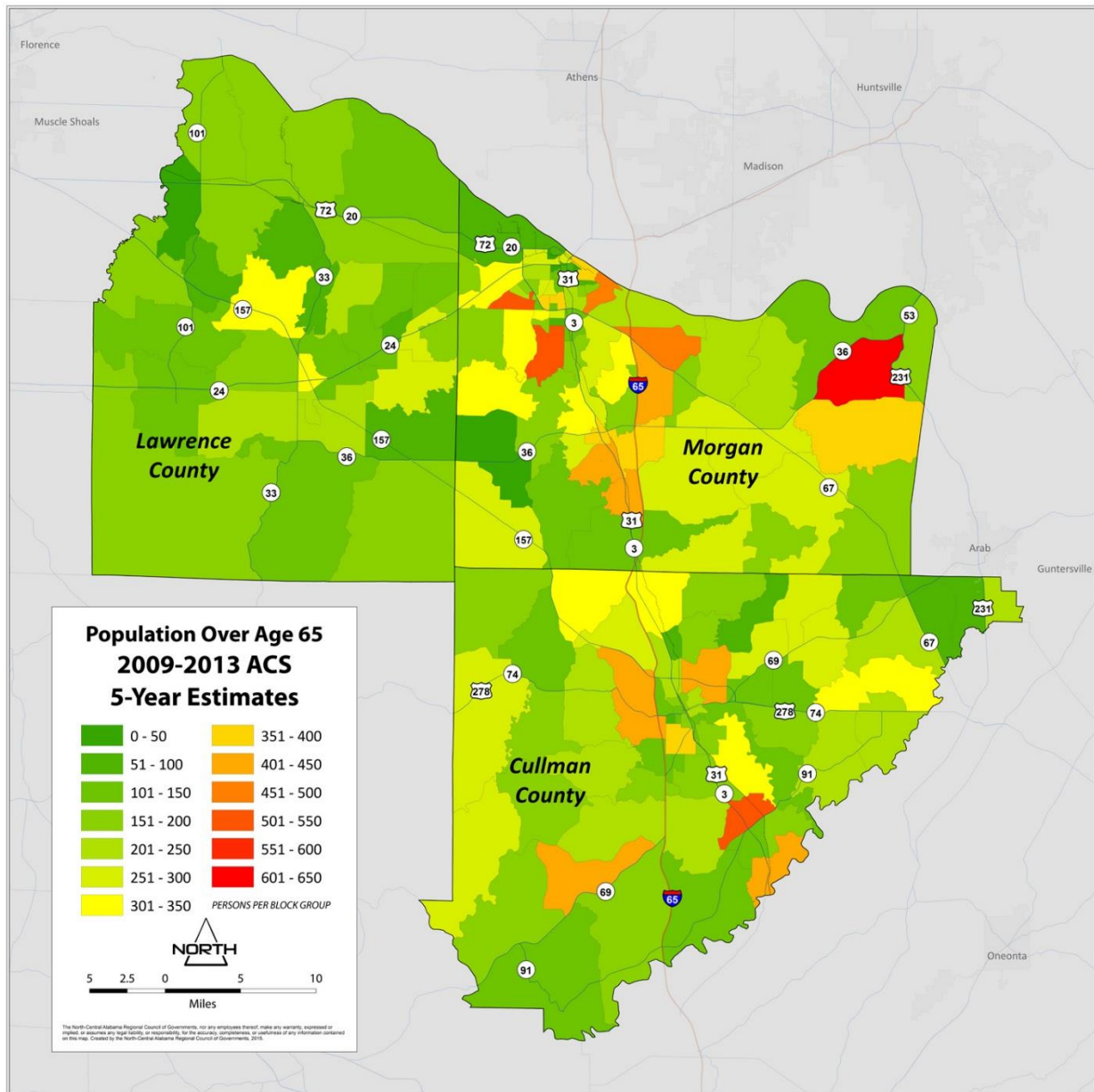




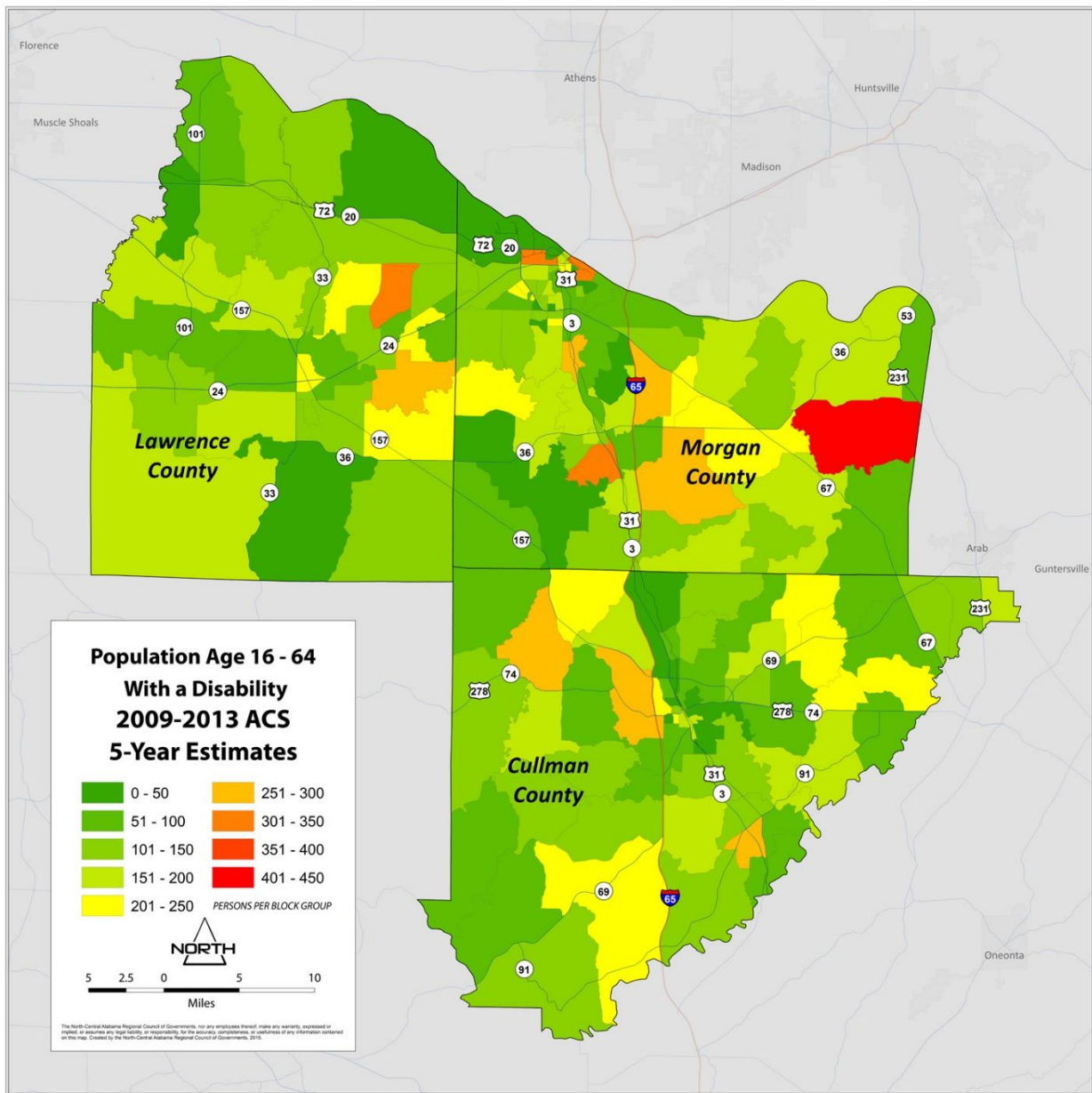
The North Central Alabama Regional Council of Governments, nor any employees thereof, make any warranty, expressed or implied, or assumes any legal liability, or responsibility, for the accuracy, completeness, or usefulness of any information contained on this map. Linear and spatial data provided by the United States Census. Created by the North Central Alabama Regional Council of Governments, 2015.



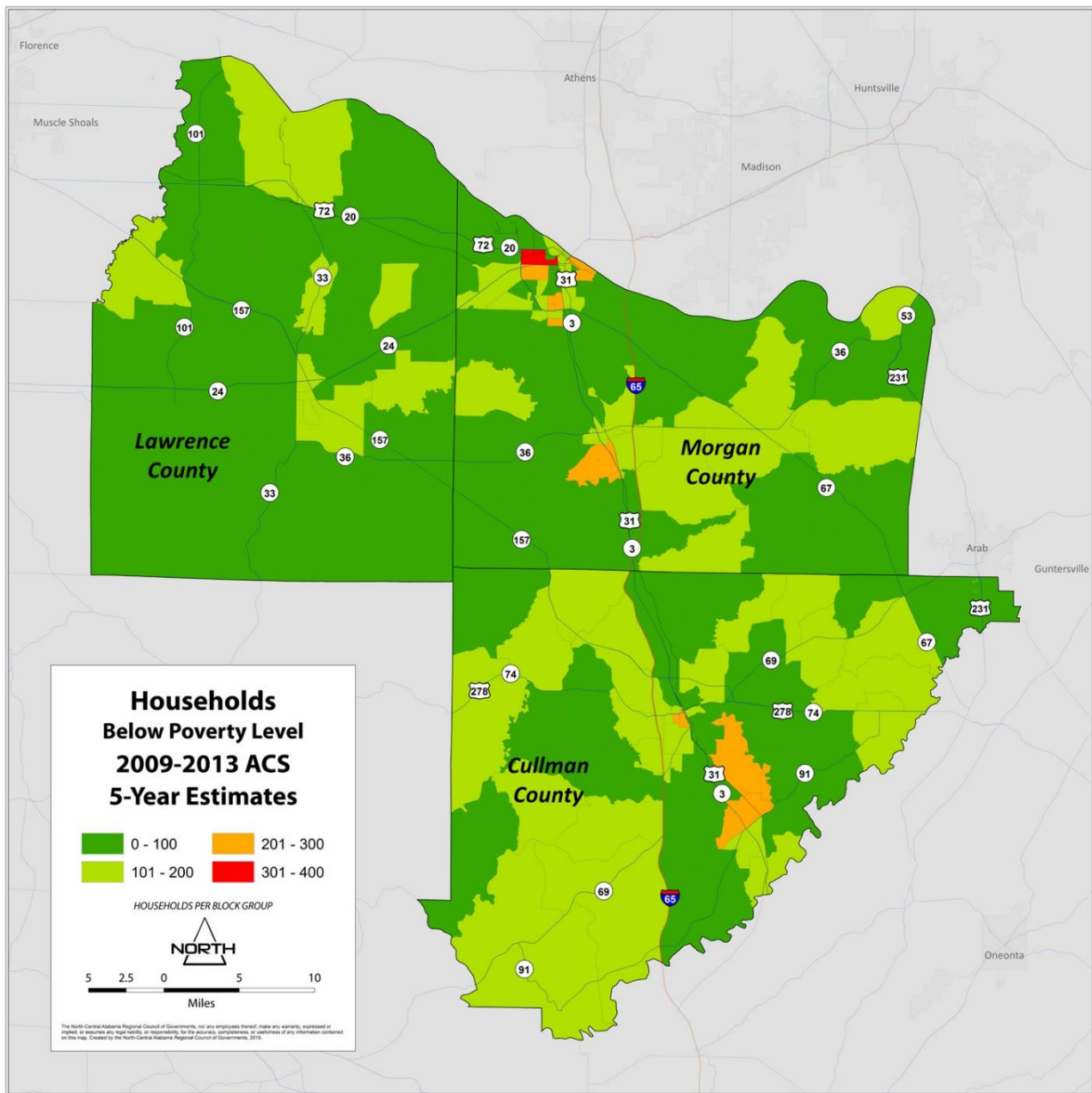
The North Central Alabama Regional Council of Governments, nor any employees thereof, make any warranty, expressed or implied, or assumes any legal liability, or responsibility, for the accuracy, completeness, or usefulness of any information contained on this map. Linear and spatial data provided by the United States Census. Created by the North Central Alabama Regional Council of Governments, 2015.



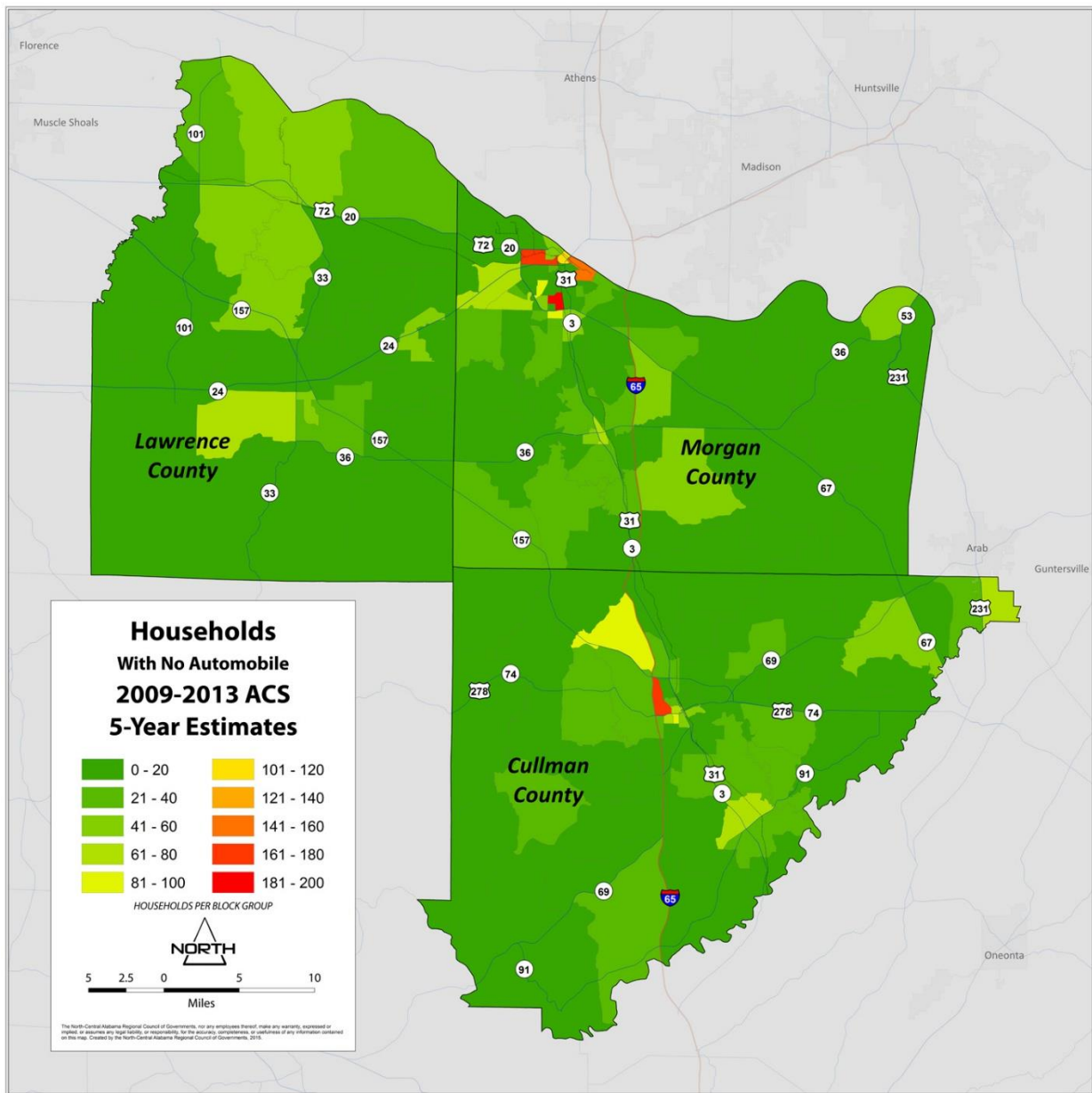
The North Central Alabama Regional Council of Governments, nor any employees thereof, make any warranty, expressed or implied, or assumes any legal liability, or responsibility, for the accuracy, completeness, or usefulness of any information contained on this map. Linear and spatial data provided by the United States Census. Created by the North Central Alabama Regional Council of Governments, 2015.



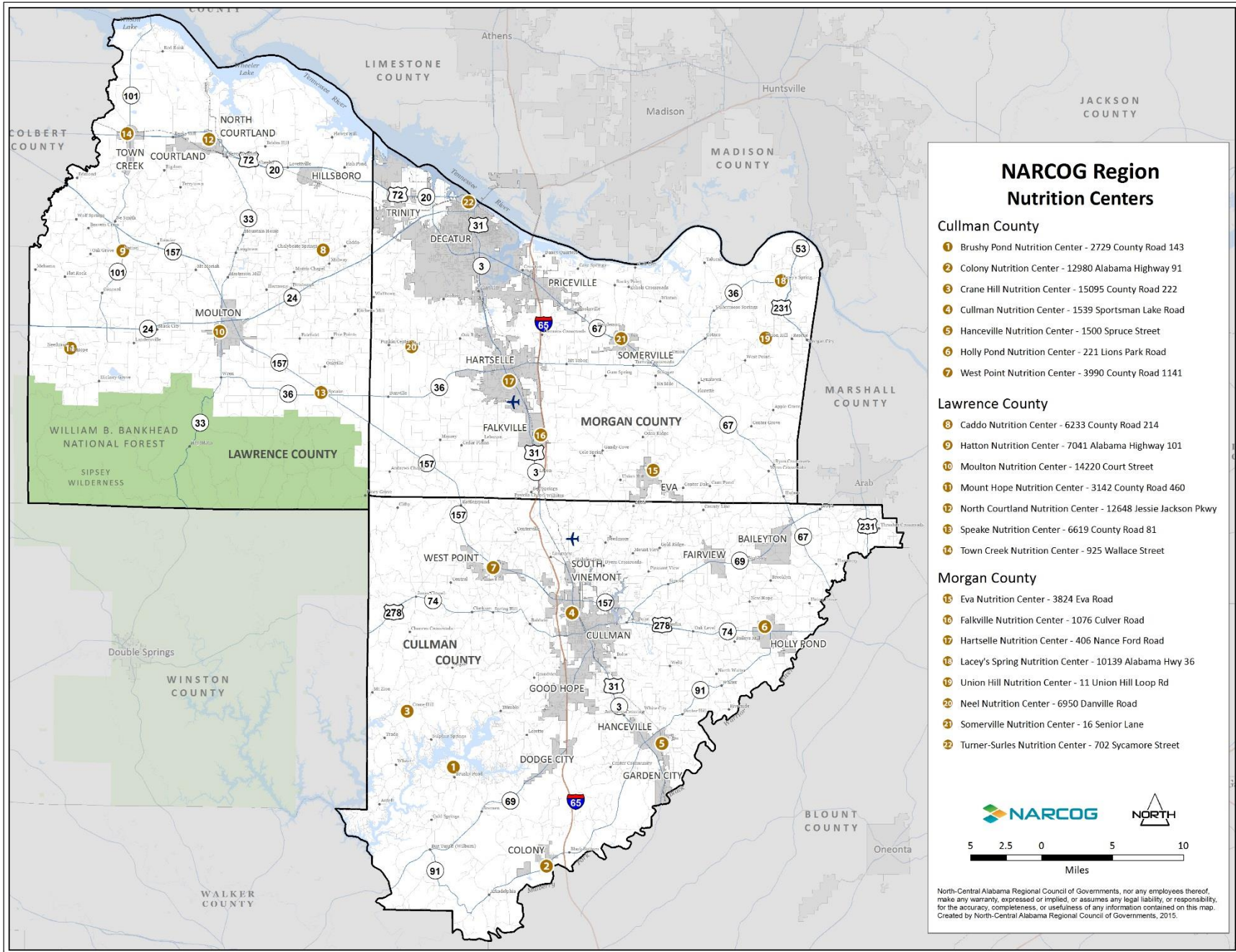
The North Central Alabama Regional Council of Governments, nor any employees thereof, make any warranty, expressed or implied, or assumes any legal liability, or responsibility, for the accuracy, completeness, or usefulness of any information contained on this map. Linear and spatial data provided by the United States Census. Created by the North Central Alabama Regional Council of Governments, 2015.



The North Central Alabama Regional Council of Governments, nor any employees thereof, make any warranty, expressed or implied, or assumes any legal liability, or responsibility, for the accuracy, completeness, or usefulness of any information contained on this map. Linear and spatial data provided by the United States Census. Created by the North Central Alabama Regional Council of Governments, 2015.



The North Central Alabama Regional Council of Governments, nor any employees thereof, make any warranty, expressed or implied, or assumes any legal liability, or responsibility, for the accuracy, completeness, or usefulness of any information contained on this map. Linear and spatial data provided by the United States Census. Created by the North Central Alabama Regional Council of Governments, 2015.



# Notices for Public Participation – September 10, 2015

**Facebook Page:** North Central Alabama Regional Council of Governments (NARCOG). Posts include: "NEWS, MEETINGS & EVENTS HAPPY MEDICARE BIRTHDAY PARTY", "HUMAN SERVICES COORDINATED TRANSPORTATION PLAN", and "SEPTEMBER 10, 2015 HUMAN SERVICES COORDINATED TRANSPORTATION PLAN".

**News Article:** "HUMAN SERVICES COORDINATED TRANSPORTATION PLAN". September 10th - 9:30-11:00am. Are you turning 65? We help you celebrate. NARCOG is hosting a Happy Medicare Birthday Party. We have trained Medicare counselors that can help you understand the whole picture and what's best for you. In other words, NARCOG's counselors can help you navigate the "Medicare Maze". Seating is limited, so please call 256-355-4315, ext. 240 to register.

**Public Meeting Notice:** HUMAN SERVICES COORDINATED TRANSPORTATION PLAN. Public Meeting. September 10, 2015. 10:00 AM. NARCOG CONFERENCE ROOM. www.narco.org

**Newspaper Clipping (The Cullman Times):** "SEPTEMBER 10, 2015 HUMAN SERVICES COORDINATED TRANSPORTATION PLAN". Public Meeting. The North Central Alabama Regional Council of Governments (NARCOG) will hold a public meeting Tuesday, September 10, 2015 at 10:00 AM in the NARCOG Conference Room located at 216 Jackson Street SE, Decatur, AL 35601. The purpose of this meeting is to discuss the update of the Human Services Coordinated Transportation Plan. This update of the plan is to develop strategies to enhance the public and private transportation services available to the public. The meeting is open to the public and is free of charge. It is encouraged to attend. Advance registration is not required. Seating is limited. Registration should be completed 48 hours prior to the event at (256) 355-4315. For more information, visit www.narco.org.

**Advertisements:** Handy Hands The Cullman Times BUSINESS & SERVICE DIRECTORY. We are pleased to introduce you to these choice area businesses. Please keep their names and numbers on hand for easy access to the goods and services you need. Services include: Animal Care, Construction, Home Improvement, Landscaping, Painting, Roofing, Tree Service, and more.

**Other Flyers:** "Future for amputees", "Hope Home Thrift", "Fender", "Emusic Music".



## Regional Stakeholders Meeting Invitation

# SEPTEMBER 10, 2015

## HUMAN SERVICES COORDINATED TRANSPORTATION PLAN

### Public Meeting

The North Central Alabama Regional Council of Governments (NARCOG) will hold a public meeting Thursday, September 10, 2015 at 10:00 AM regarding the Human Services Coordinated Transportation Plan for Cullman, Lawrence, and Morgan Counties. The meeting will be held in the NARCOG Board Room located at 216 Jackson Street SE, Decatur, AL 35601.

The purpose of this meeting is to discuss the update of the Human Services Coordinated Transportation Plan. The mission of this plan is to develop strategies to effectively provide transportation options to persons with limited transportation resources.

This meeting is open to the public and anyone interested in public transit is encouraged to attend. Anyone requiring special assistance to attend the meeting should contact the NARCOG Rural Planning Organization staff no later than forty eight (48) hours prior to the event at (256) 355-4515.



HUMAN SERVICES  
COORDINATED  
TRANSPORTATION  
PLAN

PUBLIC MEETING

NARCOG  
CONFERENCE ROOM

SEPTEMBER 10, 2015

10:00 AM

[www.narcog.org](http://www.narcog.org)

Regional Stakeholders Meeting Participant Sign-in Sheet 1 – September 10, 2015

SIGN-IN SHEET

Human Services Coordinated Transportation Plan (HSCTP)

Regional Stakeholders Public Meeting – September 10, 2015 @ 10:00 AM  
NARCOG Conference Room

NAME	AGENCY	ADDRESS	EMAIL
Joy Hester	NARCOG	Decatur, AL	joy.hester@adss.alabama.gov
Shelia Drain		Decatur, AL	
Robby Cantrell	NARCOG	Decatur, AL	robby.cantrell@adss.alabama.gov
Robbi Legre	AL Pub. Transit	Montgomery, AL	Robbi.L@al.gov
Lee Terry	Montgomery MPO	Montgomery, AL	lterry@decatur-al.gov
Carolyn Price	Senior Citizen	Decatur	price.carolyn@1@gmail.com
Heather Belz	NARCOG	Decatur	heather.belz@adss.alabama.gov
Kathleen Ross	U'way	"	Kross@uwncal.org
Rebra Gardner	MCATS	"	drains@co.morgan.al.us
Tammie Brammer	ADPH	Decatur	Tammie.Brammer@adph.state.al.us
Priscilla Nunelee	Volunteer Center	811 2 <sup>nd</sup> Ave Decatur	<del>Priscilla@volcomsig</del> priscilla@volcomsig
Lynn & Kristin	Community Action	Decatur	lynnlundberg@att.net
Tamisha Sales	Community Action	Central Pkwy SW	
Mari Juarez	Community Action	1909 Central Pkwy SW Decatur, AL 35001	mari.juarez@capra.org

**SIGN-IN SHEET**

**Human Services Coordinated Transportation Plan (HSCTP)**

Regional Stakeholders Public Meeting – September 10, 2015 @ 10:00 AM  
 NARCOG Conference Room

NAME	AGENCY	ADDRESS	EMAIL
Masha Hill	CAPPA	1909 Central Pkwy Decatur, AL	masha.hill@capna.org
Charla Hill	Community Action Mental Health Ctr of West	11 11	Charla.hill@capna.org
Lisa Coleman	Decatur MPO	1316 Spawneville Rd Suite 1	lcoleman@mbcncsa.org
Dwayne Helms			

## Regional Stakeholders Meeting Comments and Notes – September 10, 2015

1. M.C.A.T.S. is currently providing service to school age children for extracurricular activities off of school grounds at two different middle schools in the City of Decatur. A parent of one of the school age children has coordinated with M.C.A.T.S. to provide the students with pre-paid passes based on semester schedules of approximately 25 students.
2. A representative from the United Way discussed the 211 telephone resource for the general public to use in order to locate transportation services in their area.
3. A NARCOG representative discussed the availability of the Aging and Disability Resource Center (ADRC), a function of the Area Agency on Aging, which is managed by the NARCOG staff and is available Monday through Friday during normal business hours to help persons locate a wide variety of resources, including transportation services.
4. A member of the general public and M.C.A.T.S. rider provided the following comments/concerns:
  - a. Could the providers consider adding weekend service?
  - b. Could the number of stops per day be increased from 2 to 3, if not more?
  - c. Concern about access to emergency medical services with less than 24 hour notification.
  - d. Need for adult doctor visits in Huntsville and Birmingham
  - e. Concern about rates for Lawrence County riders.
5. A member of the general public provided the following comments/concerns via email:
  - a. I have worked at Calhoun Community College (with students with disabilities) for the past 25 years. Some time ago, the MCATS van would carry some students here to Calhoun - drop off at 8:30 and pick up at 1:30. That service, of course, was deleted; however, the need for such service is still in high demand - more so now than in the past. I have referred at least a dozen students to ADRC and NARCOG to seek assistance with transportation. They have been told that service is unavailable.
  - b. Today, our community is seeing more people who do not drive for various reasons (i.e., due to seizure disorders, physical disabilities, medications, insufficient funds for insurance or repairs, or suspended/voided licenses, etc.). Morgan, Lawrence, and Cullman counties need to come up with a solution. If we are not going to offer transportation to the public, whether providing vans or busses to the public, then we need to team up with another group, such as the Alabama Mountain Lakes Tourism Community, to come up with a plan and get more sidewalks and bike trails put along our main thoroughfares for non-drivers to use.
  - c. While in Decatur sitting at the traffic light at 6th Avenue and Lee Street, I watched an elderly gentleman come up Lee Street in the street with his mobile chair (yes, he was in the road as though he were driving a vehicle). At first, he was going against traffic, but then he "jay-wheeled" across Lee Street and turned into Lucky's and into the store.
  - d. While in Decatur sitting at the traffic light by Walgreens, McDonald's, and the WalMart "Minimart," I witnessed a young couple pushing a baby carriage across 6th

Avenue (almost getting clipped by someone making a right on red light) and through the parking lot to WalMart.

- e. While in the Hartselle area on Highway 36 (East), I witnessed a family (2 adults, 2 children and 1 in a stroller) walking in the road going East. Now, that is dangerous for those walking, not to mention or even imagine if someone where driving down the road reading emails and did not see them until it was too late (and my entire family witnesses this daily). It is dangerous.
- f. While in Hartselle on Highway 36 (East), I witnessed a young man on a bike driving into traffic on the highway. As a car approached him, the car "aimed" at the rider and someone in the rear seat on the passenger side proceeded to open his door in an attempt to "connect" with the biker. I'm not sure if they knew each other or if it was a "gag," but I did not find that very amusing. I saw that as dangerous.
- g. Now, since Alabama is trying to "Scale Back" and help Alabamians lose weight, the addition of bike and/or walking trails on our major thoroughfares would help give them the incentive to get moving more while offering them safety. Perhaps we could also get someone from that group to help with this project.



# SEPTEMBER 25, 2017 HUMAN SERVICES COORDINATED TRANSPORTATION PLAN

## Public Meeting

The North Central Alabama Regional Council of Governments (NARCOG) will hold a public meeting Friday, September 25, 2017 at 1:00 PM CDT regarding an update to the "Human Services Coordinated Transportation Plan" for Cullman, Lawrence, and Morgan counties. The meeting will be held in the NARCOG Conference Room located at 216 Jackson Street SE, Decatur, AL 35601.

The purpose of this meeting is to discuss the update of the "Human Services Coordinated Transportation Plan." The mission of this plan is to develop strategies to effectively provide transportation options to persons with limited transportation resources. This meeting is open to the public and anyone interested in public transit is encouraged to attend. Anyone requiring special assistance to attend the meeting should contact the NARCOG Rural Planning Organization staff no later than forty-eight hours prior to the event at (256) 355-4515.



## HUMAN SERVICES COORDINATED TRANSPORTATION PLAN

### PUBLIC MEETING

### NARCOG CONFERENCE ROOM

SEPTEMBER 25, 2017

1:00 PM

[www.narcog.org](http://www.narcog.org)



Regional Stakeholders Meeting Participant Sign-in Sheet – September 25, 2017

SIGN-IN SHEET

Human Services Coordinated Transportation Plan (HSCTP)

Public Meeting – September 25, 2017 @ 1:00 PM  
NARCOG Conference Room

NAME	AGENCY	ADDRESS	EMAIL
Robby Cantrell	NARCOG	P.O. Box C, Decatur, AL 35602	robby.cantrell@adss.alabama.gov
Joyce Edols	CARTS	PO Box 2878 Cullman, AL 35056	jedols@co.cullman,al.us
Kim Dohme	NARCOG	PO Box C Decatur AL 35602	Kim.dohme@adss.alabama.gov
Sally Hester	NARCOG	Decatur, AL	_____
Jeffrey Pugh	NARCOG		

## Regional Stakeholders Meeting Comments and Notes – September 25, 2017

1. Cullman Area Regional Transportation System (CARTS) Director, Joyce Echols reported that her agency is no longer providing transportation for special events due to the increased challenges presented by the “Charter Rule.” She discussed the increased occurrences of requests from churches and other organizations that cannot be met due to restrictions in the “Charter Rule.” The agency does everything in their power to reasonably accommodate any, and all, passenger requests.
2. NARCOG Transit Director, Robby Cantrell reported that, on several occasions, trips were denied because of the “Charter Rule.” There at least ten requests in the last 12 months for transit vehicles to be used as tour buses or shuttles for private groups, but all reasonable accommodations were met for passengers who were in need of trips to medical appointments, shopping, employment, and other regular services within normal operating hours. The biggest challenge to his agency was lack of funding and the need to expand service hours. Service expansion is something the agency will be looking at in the next 12 months.
3. Several telephone calls have been made to service providers where expanded service hours would allow better service for the citizens in the NARCOG Region. The City of Hartselle has been mentioned numerous times as a City that could use additional services.



**Alabama Community Health  
Improvement Plan (ACHIP)  
Community Health Assessment (CHA)  
Survey Results**

## **Region 11 – North-Central Alabama Regional Council of Governments**

*Counties: Cullman, Lawrence, Morgan*

The Alabama Community Health Improvement Plan (ACHIP) is based on the results of a comprehensive statewide Community Health Assessment (CHA) and was developed by the Alabama Department of Public Health (ADPH) – in collaboration with a varied cross-section of stakeholders – to address the top three statewide healthcare priorities. The highest identified priority is Access to Care, and the associated ACHIP workgroup’s defined goal is as follows: “To measurably improve access to care for all Alabamians by reducing transportation barriers, addressing the shortage of providers, closing insurance coverage gaps, and improving health literacy.”

To begin addressing the issues surrounding transportation barriers, ADPH conducted a series of email surveys and interviews (telephone and in-person) with representatives of 115 safety-net healthcare providers across the state. This sample of providers primarily included rural hospitals, rural health clinics, federally-qualified health centers, community mental health centers, and Department of Public Health social workers.

One objective of this assessment was to contribute to identifying the areas and patient demographics most impacted by a lack of transportation. A second objective was to identify potential gaps in information between healthcare providers, patients, and transportation agencies by collecting information on transportation issues and available resources from the providers’ perspective. Based on their experiences in treating their respective patient populations, representatives of each healthcare provider were asked to provide their input on the following topics:

- Types of transportation resources within their operating area, including those offered directly by the provider, that patients may use for their health care needs.
- Other local agencies or organizations that could potentially assist with providing non-emergency patient transportation.
- Groups of patients that have the most difficulty obtaining reliable transportation for their healthcare needs.
- The types of appointments representing the greatest challenges to people without reliable transportation.
- The scope and scale of transportation-related issues faced by their patients, and the accessibility and availability of transportation resources within their operating area.
- Other general comments regarding patient transportation issues and potential access-to-care solutions.

This statewide assessment included input from representatives of nine safety-net healthcare providers operating within the three counties of the North-Central Alabama Regional Council of Governments. These providers included:

- Two community mental health centers
- One federally-qualified health center
- Two rural health clinics
- One rural hospital
- Two Department of Public Health social workers
- Kid One Transport

**Currently available transportation options include:**

- CARTS public bus transportation in Cullman County
- Van systems provided by mental health centers for certain patient populations
- MCAT van in Morgan County
- Taxi services
- Kid One Transport
- Lawrence County transportation system

**Populations identified by these providers as being affected by transportation barriers include:**

- Low-income uninsured, non-Medicaid adults
- Elderly patients, who are often low-income and may have limited mobility and more significant health issues
- Homeless and indigent population
- Patients living in the most rural areas, outside the reach of available public transit, especially in Lawrence County, where public transportation is especially limited
- Mental health patient population – estimated up to 50% of Cullman Mental Health patients and 70-80% of Lawrence/Morgan patients are affected by transportation access issues

**Specific transportation-related barriers discussed include:**

- Scheduling and route limitations on available transportation resources
- Difficulties accessing and using the Medicaid NET system, and issues with delayed reimbursements
- Difficulties to the patient in maintaining regularly-scheduled appointments, such as checkup and follow-up visits, without reliable transportation access
- Fees and fares greater than what patients can afford, especially for taxi services, and even for rides obtained from friends and family members. For many patient groups, this is frequently a hardship.
- Difficulty in traveling greater distances to seek specialty care
- Patients with substance abuse problems are also faced with transportation problems if they cannot obtain a driver's license
- Lawrence County transportation system may only travel to areas where healthcare providers are located approximately once per week

**Several consequences of transportation-related barriers were discussed, including:**

- High rates of missed, canceled, and re-scheduled appointments (transportation is reported to be the primary cause of these)
- Filling prescriptions can be difficult
- Regularly missed appointments for preventative and follow-up care, leading to worsening health status and increased re-hospitalizations
- Mental Health patients also have increased difficulty obtaining important medications, delaying recovery and causing “chaos in their lives.” Can further exacerbate any co-morbid medical problems they have (estimated 80-90% of mental health patients in Limestone/Lawrence/Morgan)
- Multiple providers consider transportation to be among the highest-priority problems their patients face.
- When their transportation access is unreliable, patients may only present to healthcare providers when experiencing a more urgent medical issue
- Strain on healthcare personnel needing to provide or pay for rides for patients who are discharged from care but have no immediate way to get home
- Long delays and ride times for rural patients who are reliant on public transportation

**Transportation solutions currently in practice include:**

- Healthcare providers may pay for rides and/or provide transportation vouchers to cover the costs to patients who use public or private transportation for their appointments
- Case managers and social workers can provide assistance to patients when scheduling rides through public transportation or Medicaid NET providers
- Medicaid NET voucher and reimbursement systems
- Quality of Life Health Services has a mobile unit to provide additional healthcare services (dental, medical, optometry) to rural patients and reduce their transportation burden
- Churches may recruit volunteers to help provide rides to their members, but not on an organized, regular basis
- Expanding the use to telemedicine to reduce the need for patients to travel
- Healthcare providers working to accommodate patient transportation needs when scheduling appointments
- Recruitment of DHR to provide transportation assistance in Lawrence County

**Other suggestions for potentially improving access to transportation in this region include:**

- Involving other community or faith-based entities in providing healthcare transportation, if funding and liability barriers can be overcome
- Expansion of case management and social services workforce to assist patients in obtaining rides and meeting schedules
- Necessary to increase public awareness of available transportation services, as well as how to access them, including the Medicaid NET program
- Need to increase integration of transportation systems to better facilitate out-of-area travel between counties

A full summary of the information obtained by interviewing the sample of safety-net healthcare providers operating within the region is detailed in the proceeding pages.

**Cullman Mental Health Center**  
*Cullman County*

Cullman MHC has a van route for patients participating in day treatment programs. Providers working with developmentally-disabled patients also provide transportation assistance as part of their client care. The Center also employs case managers to help arrange rides for clients, either through public transit or through the Center's own transportation service, if it positively impacts their ability manage symptoms.

Any patient may schedule a ride through the local public transit system, though the requirement to schedule the pickup in advance is not always convenient for some patients. There is no transit that runs on a fixed route or schedule. Occasionally, churches have also provided volunteers to assist with providing transportation to needy patients.

Low-income patients struggle with transportation in general, but transportation barriers also become more substantial for patients living in the most rural areas of the county. There are numerous smaller communities nestled in Cullman County, and transportation for some is more difficult than it is for others.

Low transportation access is "always a high priority issue" to the mental health center's patient population. They estimate that transportation is a "significant issue" for up to 50% of the patients they serve, which could mean that the patient does not have a vehicle, has nobody to assist them with accessing the system, or does not have the money to pay fares.

Substance abuse is also a major issue here, which can present another form of transportation barrier in that patients with these types of health problems may not be able to get or maintain drivers' licenses in the first place.

**Mental Health Center of North Central Alabama, Inc.**

*Lawrence, Limestone, Morgan counties*

The MHC provides transportation to clients attending day treatment programs (in all counties, adults and children) through a van system that runs on set schedule. This is generally well-utilized at or near capacity. Unfortunately in Limestone and Lawrence counties, there is no public transportation. There is limited area coverage in Morgan County through the MCAT van, which clients can call ahead to arrange to be picked up for appointments. They MHC is not exactly sure how large the coverage area is. There are taxi services available, but their patients don't use them often due to cost.

Obtaining rides through friends, family, or neighbors is the only other recourse for most patients. This reliance on the schedules of others "contributes heavily to non-kept appointments." In general, patients at the Center will "regularly" miss appointments, something that occurs multiple times per week and has "been a headache for years." An estimate of the total rate of non-kept appointments was 30-35%.

Low transportation access was characterized as "a big problem, and has been for years." In all 3 counties, especially in Limestone and Lawrence "either you have transportation or you have to beg someone to give you a ride." The patients living in the furthest outlying areas are generally most impacted, but the transportation issue affects the spectrum of age, racial, and gender demographics. It is estimated that probably 70-80% of the MHC's patients are affected in some way by inadequate transportation.

Due to restricted transportation access, it can be difficult for patients to get to pharmacies and appointments regularly, limiting their access to medications negatively affecting the success and pace of their recover, especially when there is already constant stress in their lives stemming from their mental health problems. A patient not being able to adhere to a treatment schedule puts them at very high risk for relapse, and on top of that, and estimated 80-90% of patients have comorbid medical issues that can also be exacerbated without regular care.

There is a pilot grant-funded program to train Community Specialists through the state of Alabama. These are professionals who do much of what case managers do, can help with case management and also work with patients 1-on-1 to arrange transportation. It would be "extremely helpful" for mental health centers and other larger healthcare provider systems to have more people with these skills.

**Quality of Life Health Services, Inc.**

*Etowah, Cullman, Calhoun, Talladega, Blount, Cleburne, Marshall, DeKalb, Randolph, Clay, Cherokee, Macon counties*

Quality of Life Health Services covers 18 counties, up from 12 as recently as 2013. That year, they took over cases for a previous FQHC that was losing funding and had been closing satellite sites. By 2013, they were down to one site to cover the counties of Bullock, Chambers, Macon, Lee, Tallapoosa, and Russell. Quality of Life has recently opened a new site in Tuskegee, with future plans to expand with more sites in those counties. These are areas that they have identified as having a “great need” for transportation.

This FQHC formerly offered transportation assistance to maternity care patients, but has not been able to maintain that service. They’ve identified a limited transportation system for public housing residents in Gadsden, useful to their patients there because they only have one clinic located in one of the city’s public housing developments. Lee-Russell may also have a cooperative transit program for the elderly, bringing them to senior centers

There is a trolley system within Gadsden that is reliable and very affordable, \$1 or \$0.50 per ride. There are rural county transportation systems available throughout Quality of Life’s large coverage area, some of which serve only elderly patients, some a more broad clientele. Fees are generally low and affordable for local transportation needs. Kid One Transport is another resource that is commonly used, and they connect patients to the NET program if they have Medicaid coverage that makes them eligible for it.

It is difficult to get patients to return for follow-up and preventative appointments when they lack reliable transportation. If a patient is not immediately sick, and they can’t afford to commit the time or money it would require to see a doctor for non-emergent care, they are more likely to miss or cancel their appointments. Instead, patients with transportation barriers will present for acute care only when they are most in need of it.

In the most rural areas, Quality of Life’s sites may have to cover an entire county. It can be difficult to adequately service such a large area, especially if transportation is limited. Transportation access is a higher priority issue in some areas than others. The Gadsden area, where this system has numerous sites, does well. Anniston is also an area with improved healthcare access, where while they do not have a city transit system, most patients can make it to the FQHC sites there even by walking. Sites in Cullman also receive fewer patient complaints about transportation issues. In more rural areas, however, patients often report transportation as their largest obstacle to obtaining healthcare. The most challenged areas are those counties that Quality of Life has most recently begun to cover (Bullock, Chambers, Macon, Lee, Tallapoosa, Russell).

To help overcome transportation barriers, the FQHC system is currently expanding their use of telemedicine implementation. Since October 2012, they have also employed a mobile health clinic, a 40-foot long bus-like vehicle that is outfitted to provide dental, medical, and eye services. It features a multi-use chair that functions as exam table and dental exam chair, as well as a satellite communications dish to connect to the electronic health records network. This is mostly used to serve school-aged children, and most often around the Gadsden area, but they have expanded their coverage area somewhat since the program’s inception. With more funding to cover operating costs and potentially additional vehicles, it could be expanded further. They report that the dental services tend to be in the highest demand for patients who take advantage of this program.

This opportunity arose from a grant from the School Based Health Center program, which supplied the funding to buy the bus. Because units such as this come with a fully-equipped purchase cost of \$300,000-400,000, the start-up costs represent the biggest obstacle to other healthcare providers implementing such a program, though this representative did indicate that Franklin Primary Health Center (another FQHC based in Mobile) also has a mobile unit. It was suggested that trailer versions of this mobile unit would be a less expensive alternative to local or state governments, or healthcare systems. The trailers could be moved between various locations within a county/region or health system's coverage area on a rotating basis in order to provide services to more rural communities. Leaders in those communities would assume the responsibility of scheduling patient appointments and staffing the mobile clinic with the physicians, nurse practitioners, or other medical personnel necessary to provide care, while the financial costs of purchasing and maintaining the trailer and equipment could be diffused.

**Horizon Medical Clinic, LLC**  
**Midway Medical Clinic, LLC**  
*Cullman County*

Some patients ride the public bus in Hanceville (through CARTS), but this system only runs for certain hours, requires patients to schedule their rides in advance, and they charge a fare, all of which are potential barriers to access for certain patients.

In Jackson and DeKalb counties, transportation access isn't as much of an issue, but the clinics in Cullman county face the worst transportation-related problems with their patients, particularly among the Medicare and Medicaid populations, since Medicaid NET does not seem to operate in this area. The clinic does their best to schedule around the patients' availabilities and reschedule appointments when necessary. Most problems occur with patients getting to the appointments, not necessarily getting back home from them.

Limited transportation access increases the difficulty associated with maintaining almost any type of appointment, especially follow-up appointments and prescription refills.

The elderly seem to be the most affected segment of the patient population. They may experience increased difficulty staying aware of available resources, and are often income-limited, which affects their ability and willingness to pay the fares associated with transportation. Some of the senior citizens and adults here are also poorly educated and struggle to understand the Medicaid and Medicare programs: how referrals work, what services are and are not covered, and what resources they have access to. Overcoming these knowledge and information gaps can be just as crucial as overcoming transportation gaps.



**Lawrence Medical Center***Lawrence County*

Lawrence Medical Center presently does not offer any proprietary patient transportation systems. Their patients in need of assistance may use the local public transportation agency, consisting of just a few vans. There is a taxi service as well, and many patients also find rides from friends and family.

Regularly-scheduled physicians' appointments and tests become more difficult for patients without reliable transportation, especially if they live far from the hospital, since there are no other radiology/lab services available elsewhere in the county. Most physicians at other clinics will utilize the hospital's lab service, since that can be done on site any day of the week.

In this area, older adults aged 50 or older, some of whom may be homeless without family, seem to be the most impacted patient population; however, transportation is primarily linked to socioeconomic status than any other factor.

There have been a few incidents of ER patients being discharged without having a ride home. In these instances, the hospital would pay for a taxi home.

Overall, transportation barriers here are moderately significant, and it does create scheduling issues. And while the hospital does see some patients that have difficulty with transportation, it is possible that some people in the community may not even be getting to the hospital at all, and thus receiving no healthcare, because of lack of transportation.

## **Area II Public Health Social Work Director**

*Morgan*

*County*

Transportation-related healthcare access barriers are the area's largest public health issue, consistent in all 7 counties. The issues are especially large for the furthest-flung patients, and for patients that have to travel to Birmingham for specialist appointments.

The MCAT transportation system provides local public transportation within the area. It requires a voucher, and sometimes patients can't even afford that. Social workers will donate vouchers to clients, but in more rural counties, this transportation option doesn't even exist. Those patients may end up missing appointments since they are dependent on a family member or friend to take them, and this can cause exacerbated health issues, a loss of the doctor's services due to non-compliance, and potentially, increased emergency room visits and re-hospitalizations.

There is greater transportation access and resources in Madison County than in other counties in the area.

Most of the clients that county-level social workers work with are on Medicaid, but they also get frequent calls from people without health insurance and are also without the transportation means to access healthcare reliably. Patients in Lawrence, Jackson, and parts of Morgan counties seem to experience the most difficulties.

### **Lawrence County Public Health social work office**

*Lawrence County*

There is a public transportation system available in Lawrence County, but patients more often use private vehicles for their healthcare-related transportation – whether their own or by riding with someone they know. There are also routing and scheduling limitations on the transportation system, and they may only go to areas where doctors' offices are located one or twice per week. Improved coverage and availability of the current system would be a significant improvement. Currently, patients who use public transit may have to wait for very long times for their ride to pick them up either near their home or at the healthcare provider. A cost-effective individual cab system would be helpful, something people could schedule to use when needed.

Occasionally the social work department will use DHR to obtain patient transportation assistance, and individual churches will sometimes assist with ride payment for their members.

The elderly population, mostly those with more significant health issues, tends to be most impacted by low transportation access. Low-income, non-Medicaid adults are also faced with these barriers.

In general. If a patient needs to travel inside the county, it's usually not as much of an issue, but traveling outside the county becomes a problem. There is a need for more integrating of transportation systems between counties, but even for systems that do offer long-distance travel, cost becomes an issue for patients outside of the Medicaid program who don't have NET vouchers.

**Kid One Transport***Morgan, Cullman counties*

Kid One Transport is a 501(c)(3) nonprofit organization that provides transportation to medical, dental, and mental health care services for Alabama children and expectant mothers who are transportation disadvantaged. They are the only transportation service of this kind within the state, facilitating access to a variety of health care services, including preventive care, behavioral counseling, high-risk prenatal care, and pediatric dialysis. As a result, they collaborate with over 500 health care organizations, community service agencies, physicians, government agencies, and nonprofits throughout Alabama in order to meet the needs of the children and families they serve. They are also working closely with Alabama's Regional Care Organizations to help them prepare for implementation and to inform them on the transportation barriers that exist within each region.

Kid One has most recently added Morgan, Limestone, Madison counties to their operating area. In addition to those three, they have also extended their transportation coverage Chambers, Lee, Russell, Bullock, Marion and Marion counties – a total of eight new counties – within the past two years, bringing the size of their total coverage area up to 43 Alabama counties. They eventually seek to add coverage to the northeastern and southeastern regions of the state, where transportation barriers are significant, and ultimately to cover all 67 counties in the state. However, there are no present plans to add coverage to additional counties in the immediate future. The system cannot expand without additional revenues to cover the costs of additional vehicles and personnel, therefore funding is the principal reason for geographic limitations to their system. Currently, 81-82% of their funding is obtained through donations, private sources, and grants. They also receive some about 10-12% of their total reimbursements from Medicaid, but only about 40-50% of time that they service Medicaid patients.

Approximately two-thirds of Kid One's transports are local, and the remaining one-third are long-distance transports to receive specialty care at hospitals in Birmingham, Montgomery, or Tuscaloosa. Last year, they provided 13,000 local transports within Jefferson County, and approximately 7,000 longer-distance transports from other counties into Jefferson County. To Jefferson County they serve a role as economic catalysts, bringing 7,000 patients in to healthcare providers located there, however they receive no government or private funding from them. Children's of Alabama, as well as the City of Birmingham, used to be significant providers of funds, but these have been curtailed more recently. Some cities are more supportive of this service than others.

Kid One currently owns a fleet of twenty-one vehicles, five of which are wheelchair-accessible, so they are able to accommodate a wide range of patients. They provide strictly non-emergency healthcare-related transportation, and in some areas of their coverage map, they are the only dedicated healthcare transportation provider. Clients can schedule appointments as many as thirty days in advance, though they only ask for at least a three days' advance notice. The scheduling system is "first come, first serve," so there are limitations on the amount of patients that the system can handle at a given time. Additionally, they can currently only provide transportation on weekdays, at times of day when healthcare providers are open to receive patients. This reduces their liability and simplifies ride scheduling.

Kid One will provide transportation to children up to age 19, as well as expectant mothers of any age, and they maintain a low denial rate of approximately 3%. If a patient is denied a ride, it is typically due to high demand and related scheduling difficulties that have resulted in no vehicles being available in the patient's location at the requested time. No patient is denied a ride on the basis of their ability to pay, even though 83% of families they serve report a household income of less than \$10,000. Because there are no income requirements or restrictions on becoming a Kid One client, patients and their families need only to register and fill out an application in order to begin accessing their service. If the patient is a Medicaid recipient, Kid One asks them to facilitate Medicaid's NET reimbursement process, requesting that the payment be sent to Kid One in order for to cover the costs of their transportation. However, they have experienced problems with patients who collect the reimbursement themselves rather than have it sent directly to Kid One, and though they have notified the Alabama Medicaid Agency of this issue, changes to prevent it have been slow to arrive.

There are still many transportation-related barriers to their patient population, however. Even in some rural Alabama counties that lack local transportation providers, Kid One can only provide long-distance transport for specialized care, as it is logistically unfeasible to provide local transportation to all patients in these counties who may need it while continuing to provide essential long-distance transport to such a wide catchment area. They are only able to provide local transportation in more urban areas, where demand is high but transportation times are short. They also perceive one of the largest transportation-related healthcare access barriers to be in connecting rural patient populations to non-profits and other organizations that can help them. There is a need to reach out to rural communities and make it known to them the services exist and are available to assist them. "The education process for their clients is essential."