

Regionally Coordinated Transportation Plan



















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Executive Summary

This Regional Coordinated Transportation Plan ("Coordinated Plan") aims to make transportation more seamless for older adults, individuals with disabilities, and other people facing mobility challenges in the Capital Area region.

This executive summary provides an overview of the Coordinated Plan, focusing on the key points from each chapter. It includes three sections:

- Introduction (Chapter 1). This section explains why this Coordinated Plan is important, who it serves, and sets the stage for subsequent chapters.
- Taking Stock (Chapters 2–4). This section summarizes existing transportation services, transportation needs and gaps, and related planning efforts.
- Moving to Action (Chapters 5–8). This section covers goals, strategies, implementation, potential funding streams, and future considerations when looking ahead.





INTRODUCTION

For many people, getting from point A to point B can be a major barrier to living life fully, particularly for: older adults, people with disabilities, veterans, people with low incomes who may not be able to afford a car, youth, and people who speak limited English. How can we address transportation needs and fill gaps for these target population groups? Ultimately, answering this question is the purpose of this Coordinated Plan.

Key Terms: Coordinated Plan, Capital Area, and RTCC

What is a coordinated plan?

This document is the fourth update of the Coordinated Plan for the Capital Area region. Updates to coordinated plans must take place every 5 years.

Coordinated plans aim to improve transportation services for older adults, people with disabilities, and other marginalized populations. They are more formally known as **regionally coordinated public transit-human services plans,** and have a specific legal context at the federal, state, and regional levels (see Chapter 1 for more information).

What is the Capital Area?

The Capital Area is a 10-county region in Central Texas comprising Bastrop, Blanco, Burnet, Caldwell, Fayette, Hays, Lee, Llano, Travis, and Williamson counties.

What is the RTCC?

The Capital Area Regional Transportation Coordination Committee (RTCC) optimizes the benefits of public transportation resources—including health and human service transportation resources throughout the 10-county region. RTCC updates the Coordinated Plan every five years, and more specifically, they guide the project team that authored this report. RTCC is supported by the Capital Area Metropolitan Planning Organization (CAMPO) as the lead agency for coordinated planning.





TAKING STOCK

Existing Transportation Services

The following transportation services are available in the 10-county Capital Area region. More information, including a description of the Office of Mobility Management, is available in Chapter 2.



- Local Bus and Rail
 - CapMetro
 - Round Rock Transit
 - San Marcos Transit



- Rural Transportation
 - CARTS
 - Hill Country Transit District
 - Lago Vista Volunteers
 - Lakeway Service League
 - Community Resource Center of Texas



- Paratransit Services
 - MetroAccess
 - Pickup by CapMetro
 - Round Rock Paratransit



- Veterans Services
 - United for the People
 - U.S. Department of Veterans Affairs



- Volunteer Driving Organizations
 - Chariot
 - Drive a Senior ATX
 - Drive a Senior Faith in Action Northwest
 - Faith in Action
 - Senior Access
 - American Cancer Society Road to Recovery



- Long Distance Travel
 - Amtrak
 - Greyhound Bus
 - Coach USA Bus Company

Transportation Needs and Gaps

Demographic Characteristics

The primary focus of this Coordinated Plan is to improve transportation and access for the following target population groups:

- Older adults (age 65 and older)
- Individuals with disabilities
- Youth (ages 10 to 17)

Mobility Challenges of Target Populations

- Individuals living in poverty
- Individuals with limited English proficiency
- Veterans

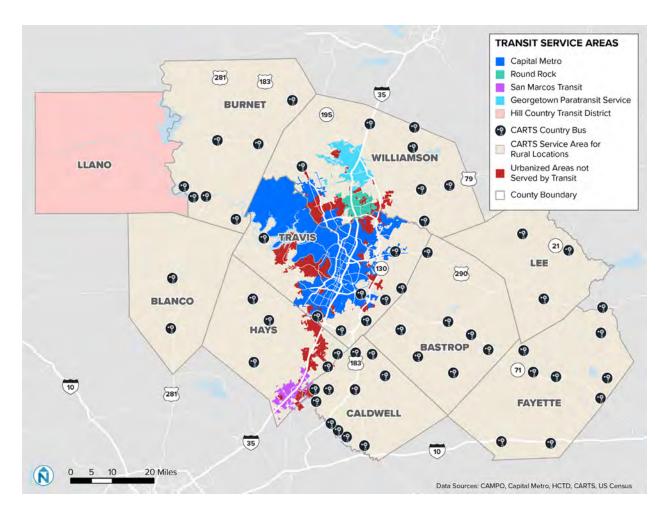
They represent between 5% and 11% of the total regional population and experience several common mobility challenges. More information, including demographic maps, is available in Chapter 3.

Target P	opulation	Population (2019)	% of Regional Population	Common Mobility Challenges
	Older Adults (age 65 and older)	252,249	11%	For several reasons, older adults may drive less often or not at all. Examples include health issues, comfort behind the wheel, or the need for assistive mobility devices. As such, they may need additional mobility support, including public transit.
	Youth Populations (ages 10 to 17)	233,242	10%	Youth populations may have difficulty getting to places like schools, after-school care, or community centers. This is partly because many aren't legally allowed to drive but could also be due to limited access to a vehicle or public transit.
	Individuals with a Disability	111,521	5%	Individuals with disabilities may have physical or cognitive challenges that make it difficult to operate a vehicle, or to travel on their own. They may need additional support for mobility from caregivers or family members.
Å	Individuals Living in Poverty	236,444	11%	People living in poverty tend to use transit more frequently than the general public because they may not have the means to purchase, own, maintain, or fuel a personal vehicle. Public transit may also be cost- prohibitive for these populations.
Å	Veterans	117,886	5%	Veterans often face barriers to receiving care, financial and otherwise. Those living in rural areas must travel longer distances for appointments and may have limited options for healthcare providers.
	Limited English Speakers	195,551	9%	Limited English speakers face additional challenges accessing and understanding available transportation services, including public transit.

Mobility and Access Conditions

For the demographic groups listed on the preceding page, access to public transit is critical.

Transit deserts are areas that are not served by public transit. People living in transit deserts have increased barriers to accessing basic services, particularly if they do not have access to a personal vehicle. Several urbanized areas do not currently have public transit available (shown in red on the map). These include Cedar Park and Hutto in Williamson County, areas near Lakeway and West Lake Hills in western Travis County, Pflugerville, Hornsby Bend, and areas immediately east and north of San Marcos in Hays and Caldwell counties (including Kyle and Buda). More information is available in Chapter 3.



Transportation Needs Assessment

Five themes emerged from our assessment of needs and gaps. More information is available in Chapter 3, including the inputs used for the assessment.

Coordination and collaboration

- More coordination and collaboration came up as a need among several stakeholders.
- Gaps in transportation service were a common theme. In particular, fixed-route transit and ADA paratransit do not serve several outlying areas of the region.
- Stakeholders noted that it was difficult to provide affordable transportation because many volunteer-led groups have issues with staffing, education, outreach, and service costs.

Access to key destinations

- Providing services for veterans and transportation to these services was a notable concern among several stakeholders.
- Access to healthcare is a major need for the region. Stakeholders expressed the need for transportation to provide more predictable access to healthcare appointments, such as dialysis and other critical services.
- Better transportation to employment is a common need among stakeholders.

Regional transportation needs

- The service needs of urban and rural areas are vastly different.
- Rapid growth can make it hard for transportation services to meet increasing demand. This can have implications on opportunities for federal funding.
- Some agencies noted geographic barriers to service such as rail lines and rivers that can cause major transportation disruptions and increase unreliability.
- Stakeholders noted specific gaps in service. This reflects the need to provide cost-effective transportation service to low-density areas.
- Stakeholders mentioned the need for a seamless regional transit system that is efficient, affordable, dependable, and safe.

Education and awareness

- A key concern among stakeholders was ensuring representation by target populations in feedback-gathering community engagement activities.
- Better mechanisms for disseminating information are necessary.

Funding

- Stakeholders noted a lack of funding. However, specific needs vary considerably.
- Rural agencies have unique funding needs.





Review of Existing Plans, Studies, and Reports

The project team reviewed 15 plans, studies, and reports, each with some connection to public transit and human services transportation in the Capital Area region whether that involves development, design, operations, or funding. The 15 documents include previous coordinated plans, regional transit and transportation agency plans, and statewide funding guidance.

Key Findings

- Rural populations continue to face relatively low transit access, transit use, and coordination challenges.
- Throughout the region, providing accessible access to transit facilities is a key priority.
- The speed of the region's growth can create funding and service obstacles.
- There is potential for coordination through interagency and public-private partnerships.

More information is available in Chapter 4.

MOVING TO ACTION

Vision

RTCC's vision continues to be relevant and did not change as part of this Coordinated Plan.

The vision of the RTCC is to provide full mobility

and access to healthcare, human services, employment, education, commerce, social and community services for all persons in the region by fostering the development of a seamless public transportation system that achieves efficiencies, eliminates duplication, increases coordination and addresses service gaps.

Mission

RTCC's mission statement was created for the 2005 plan and did not change as a part of this plan update.

To create a seamless transit system that

achieves efficiencies, eliminates duplication, increases coordination, and addresses service gaps.

Goals and Strategies

Goals determine what this plan is working to accomplish, while guiding RTCC strategy implementation.

The project team identified five goals for this Coordinated Plan. For each goal, several strategies emerged—some from prior coordinated planning efforts, others entirely new. More information is available in Chapter 5.

Plan Implementation

The summary table below shows the goals, strategies, and priority implementation levels. Additional information is available in Chapter 6, including a description of the prioritization process, proposed timelines, and proposed roles.

Goal Strategies	Priority
GOAL 1 Sustain Communication, Education, and Awareness Regionally	
1.1 Education materials on all mobility options in the region—not just public transportation	High
1.2 Work with OMM and stakeholders to establish a single source of information for transportation and mobility	High
1.3 Develop internal engagement and education pieces for stakeholders and regional partners about RTCC, the purpose, and what has been achieved over the last 15 years	Medium
1.4 Develop education materials for different audiences: workforce, students, healthcare	Medium
1.5 Develop engagement pieces, including talking points and education plan for public awareness of local/ regional services	Low
1.6 Train the trainer program for education and advocacy re: available services; connecting to human services	Low
1.7 Updates for stakeholders and partner agencies on medical transportation/Medicaid.	Low
GOAL 2 Strengthen and Sustain Financial Opportunities	
2.1 Identify "need" to determine if it can be fulfilled by existing service or whether the "need" requires new service through 5310 funding	
2.2 Become more strategic about what resources are available—what needs exist and whether the region is being strategic with the resources that exist	High
2.3 Develop a system to identify and promote funding opportunities for regional providers and programs	Medium
2.4 Part and/or full-time grant writing assistance	Medium
2.5 Advertise/organize competitive process for 5310 funding; examine how 5310 grant process is conducted	Low
2.6 Support the MPO's role as a regional planning leader as area grows; as wholistic decision-making agency	Low

Goal Strategies	Priority
GOAL 3 Define and Address Regional Transportation Needs	
3.1 Analyze travel patterns and regional demographics to better understand gaps in service areas	High
 3.2 Further identify public transportation infrastructure needs for in rural areas (i.e. bus shelters, ramps, bike racks, etc.) 	High
3.3 Expand affordable and/or free transit fare programs for qualifying populations; however, analyze if, by providing free fares, they are to places where people need to go	Medium
3.4 Collaborate with providers and local transportation/mobility programs to survey major employers and workforce development and transportation demand management (TDM) programs to determine shift times and how employees access work	Medium
3.5 Develop commuter travel shed data (How can RTCC show gaps visually for different audiences?)	Low
3.6 Encourage work placement organizations to coordinate and promote car and vanpooling in transit deserts	Low
3.7 Driver training and retention program development	Low
GOAL 4 Support Ongoing Coordination, Collaboration, & Partnerships	
4.1 Strengthen volunteer driver program & development/growth of volunteer network	High
4.2 Develop regional data management plan for consistent data collection, management, and reporting, including regular timelines for reporting data; and the development of a transportation database	High
4.3 Support, current microtransit programming for Metro Pickup and CARTS Now service pilots, encouraging expansion where applicable	Medium
4.4 Reinstate RTCC working groups for implementation of Regional Coordinated Plan	Medium
4.5 Travel training program	Low
4.6 Bus "buddy" network developed as a pilot	Low
4.7 Potential partnerships for those non-profits who may need support with vehicle maintenance	Low
4.8 Partnerships and/or support for administrative staff shortages	Low
GOAL 5 Enhance Access to Healthcare and Human Services	
5.1 Need to better coordinate with dialysis centers and other critical services (such as mental health facilities); taking employees who work at centers to work in emergency situations; MPO to map dialysis centers, medical & health facilities, etc.	High
5.2 Transit ready development guidance for new builds or developments that would not otherwise have access to public transportation	High
5.3 Support access to food pantries, libraries, and other existing community services by hosting informational webinars, meetings, and leave-behind materials informing the public how to use various forms of transit	Medium
5.4 Increase communication between HHS and transportation coordinators as well as workforce development (work on no-shows for both healthcare and transportation)	Medium
5.5 Work with Veterans Services and the Veterans Administration directly to ensure consistent access to services for the Veteran populations	Low
5.6 Create emergency management plan for the region; participate in an emergency management planning process	Low

Executive Summary

Performance Measures

For each strategy, lead organizations—with assistance from support organizations—must measure performance, to determine whether they're accomplishing the intended goals of the Coordinated Plan. For additional information on performance measurement, including sample performance measures for each strategy, see Chapter 7.

Potential Funding Streams

The Coordinated Plan cannot be implemented without funding. The table below—organized by Coordinated Plan goal—highlights some proposed funding streams for strategy implementation. Additional funding sources are available in Chapter 7.





Looking Ahead

Looking ahead, there are several important considerations for RTCC as the Coordinated Plan moves into implementation, including:

- Consider transit service expansion planning policies (CapMetro).
- Provide regular Coordinated Plan updates to stakeholders.
- Follow changes to the Non-Emergency Medical Transportation (NEMT) program.
- Lead and support organizations will be responsible for measuring performance.

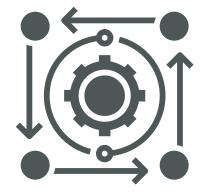


Introduction

This Regional Coordinated Transportation Plan-or "Coordinated Plan"-aims to make transportation more seamless for older adults, individuals with disabilities, and other people facing mobility challenges in the Capital Area region.

This chapter explains why this Coordinated Plan is important, who it serves, and ultimately sets the stage for subsequent chapters. It contains the following sections:

- Why a Coordinated Plan? This section explains why this plan is important.
- Timeline. This section presents a timeline of coordinated planning in the Capital Area region.
- Who does this Coordinated Plan serve? This section lists the target population groups for this Coordinated Plan.
- Plan Structure. This section describes the overall structure of this plan.



WHY A COORDINATED PLAN?

We all need to get around the Capital Area region in our day-to-day life, whether that means getting to work, making it to a medical appointment on time, running errands, shopping for groceries, or visiting loved ones.

For many people, getting from point A to point B can be a major barrier to living life fully: older adults, people with disabilities, veterans, people with low incomes who may not be able to afford a car, youth, and people who speak limited English. (More information on target population groups is available on p. 3-2 and in Chapter 3.)

This is especially true in rural areas, where distances between destinations can be very long, and public transit is less feasible. Even when destinations are nearby, invisible barriers like city limits can push places out of reach for reasons that aren't clear to most people. This is to say nothing of *visible* barriers like freeways, railroads, and rivers that can have similar effects.

How can we address transportation needs and fill gaps for these target population groups? Ultimately, answering this question is the purpose of this Coordinated Plan.

Key Terms: Coordinated Plan, Capital Area, and RTCC

What is a Coordinated Plan?

This document is the fourth update of the Coordinated Plan for the Capital Area region. Updates to coordinated plans must take place every 5 years.

Coordinated plans aim to improve transportation services for older adults, people with disabilities, and other marginalized populations. They are more formally known as **regionally coordinated public transit-human services plans**, and have a specific legal context at the federal, state, and regional levels. For more information on this context, see p. 1-3.

What is the Capital Area?

The Capital Area is a 10-county region in Central Texas comprising Bastrop, Blanco, Burnet, Caldwell, Fayette, Hays, Lee, Llano, Travis, and Williamson counties.



What is the RTCC?

The Capital Area Regional Transportation Coordination Committee (RTCC) optimizes the benefits of public transportation resources—including health and human service transportation resourcesthroughout the 10-county region. RTCC updates the Coordinated Plan every five years, and more specifically, they lead the project team that authored this report. RTCC is supported by the Capital Area Metropolitan Planning Organization (CAMPO) as the lead agency for coordinated planning. The RTCC is funded through CAMPO staff time using general planning funds (approximately \$25,000 per year in the Unified Planning Work Program).

How does this Coordinated Plan Fit Into the Federal, State, and Regional Context?

Federal Context

The Enhanced Mobility for Individuals and Individuals with Disabilities Program (Section 5310) is a federal source of transportation funding.

To receive funding under this program, projects must be part of a locally developed and approved coordinated public transit-human services plan often simply called a coordinated plan.

Furthermore, coordinated plans must:

- Incorporate participation by older adults and individuals with disabilities, as well as other stakeholders, including representatives of public, private, and nonprofit service providers.
- Be updated every 5 years—or every 4 years for areas that are in non-attainment.

State Context

In Texas, House Bill 3588, passed during the 2003 legislative session, initially addressed the coordination of public transportation in the state. Chapter 461 of the Bill states that regions will make an effort to coordinate to:

- 1. Eliminate waste in the provision of public transportation services
- 2.Generate efficiencies that will permit increased levels of service
- 3. Further the state's efforts to reduce air pollution

Texas Department of Transportation (TxDOT) and Regional Context

The TxDOT Public Transportation Division (PTN) oversees and supports statewide coordinated transportation efforts in 23 of their 24 regions, and provides high-level guidance on the elements those plans should include. Additionally, most regions also have a TxDOT Public Transportation Coordinator (PTC) that actively participates in the coordination plan development process.

The Texas Transportation Commission led the statewide charge for the 23 regions in Texas to begin developing their first-ever Coordinated Plans. The Capital Area Regional Transit Coordinating Committee (RTCC) was initially established in 2005 to develop the first Coordinated Plan for the Capital Area region.

The Capital Area Council of Governments (CAPCOG) facilitated the interim steering committee for the region's first Coordinated Plan. This responsibility has since transitioned to CAMPO.

TxDOT requires coordinated plans to have the following elements:

- Executive summary
- Introduction
- Transportation resources in the region
- Comprehensive assessment of the public's unmet transportation needs, assessment of overlaps and gaps in the delivery of transportation services, and gap analysis
- Planning for comprehensive services
- Integrated planning processes
- Vision, mission, goals, and objectives
- Sustain planning and implement plan
- Performance measures to evaluate effectiveness

The table below explains how this Coordinated Plan captures the elements required by TxDOT.

Location in this Coordinated Plan
Executive Summary
Chapter 1: Introduction
Chapter 2: Transportation Resources in the Region
Chapter 3. Transportation Needs and Gaps
Chapter 4. Review of Existing Plans, Studies, and Reports
Chapter 5. Goals and Strategies
Chapter 6. Strategy Prioritization and Plan Implementation
Chapter 7. Performance Measures and Funding Sources

Plan Chapter Organization: Alignment with TxDOT Requirements

RTCC TIMELINE

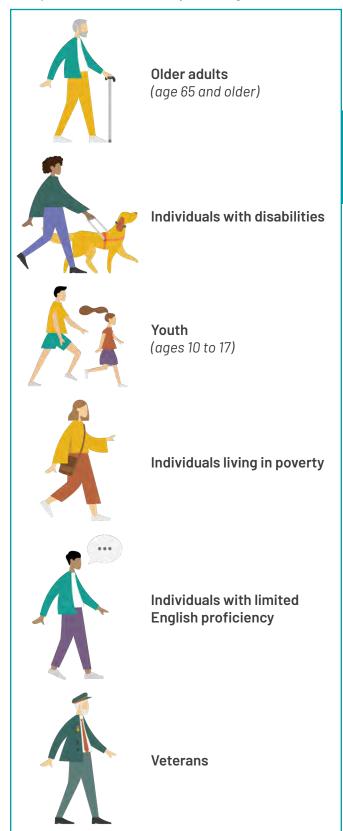
	2003	House Bill 3588 passes in the Texas State Legislature, requiring 24 regions (as identified by TxDOT) to develop coordinated plans.
	2005	The Capital Area region convenes (consisting of 10 counties) for the first time in the Fall of 2005, facilitated by Texas A&M Transportation Institute (TTI).
		CAPCOG becomes the lead agency of the original coordinated steering committee.
		Service Plan - Monthly facilitated meetings with TTI develop first Regionally Coordinated Public Transit-Human services plan.
		Regional Transportation Coordination Committee (RTCC) is born.
		Round Rock is awarded Job Access Reverse Commute funding to develop a plan for commuter service into the Greater Austin area.
	2007	RTCC receives awards and recognition for their consistent branding and marketing campaign, consisting of a website and speakers' bureau.
		RTCC forms working groups to begin working on the implementation elements of the first plan.
	2008	Implementation planning begins – one of the first projects is an agreement between CapMetro and Community Action Network to develop a discounted pass program for marginalized populations.
		CapMetro's Service Expansion Planning research begins, designed to fill gaps in the region.
		CapMetro adopts a Service Expansion Policy - The Policy provides a process for distributing federal transit funding in the region (Section 5307 Funds) and implementing transit service. Jurisdictions within the urbanized area, but outside the CapMetro service area can participate. This policy is revised in 2014.
	2009	CapMetro's Service Expansion Plan is finalized ; their transit planners, in partnership with Capital Area Rural Transportation System (CARTS), begin identifying cities and various unincorporated areas where the community is interested in transit service.
		CapMetro and CARTS begin researching implementation of mobility management , In conjunction with service expansion planning.
	2011	Coordinated Plan Update #2 - RTCC works with a consulting firm to begin process of updating the Coordinated Plan.
		CARTS begins Interurban Coach Routes designed to interface with intercity bus carriers and provide connectivity to other local and regional transit providers throughout the region.
	2013	First Mobility Manager is hired jointly between CARTS and CapMetro, and initially housed at CARTS.

2014-2023

	2014	CARTS begins commuter service between Austin and San Marcos when such service was discontinued by TX State.
	2016	Coordinated Plan Update #3 - The RTCC works with a consulting firm to update the Coordinated Plan for a third time.
	2017	CapMetro's first Pickup pilot is launched in June 2017 and operates for one year. Customers can request this on-demand transit service directly from their phone or through the app. Pickup is a shared-ride service and vehicles are completely accessible.
		City of Round Rock enters into an Interlocal Agreement with CapMetro to obtain local fixed route and commuter service directly from CapMetro. This agreement allows for seamless travel and fare system between Round Rock and Austin.
		City of Round Rock enters into an Interlocal Agreement with CARTS to provide a ticketing office at the Round Rock Transit Terminal. This provides connections between Round Rock and the CARTS Interurban & Greyhound network.
ß	2019	CapMetro's Manor Pickup service launches , providing service alternatives to those areas that are interested in demand response and may otherwise be unable to participate in the larger service area. CapMetro continues to expand this on-demand transit service throughout its service area and with regional partners.
	2021	CARTS initiates microtransit on-demand service with CARTS NOW in Bastrop and Taylor. Plans are being formulated to place such service in Lockhart and Marble Falls in 2022.
		CAMPO and the RTCC embark upon the fourth update of the regionally coordinated plan.
.er.	2023	Texas celebrates 20 years since initial coordinated planning legislation passed.

WHO DOES THIS COORDINATED PLAN SERVE?

The primary focus of this Coordinated Plan is to improve transportation and access for the following people, who tend to experience more mobility challenges.



These population groups typically depend on transit more and are less likely to have access to a personal vehicle. This can make mobility a challenge, particularly in rural areas and places where public transit isn't available.

Community Engagement for this Coordinated Plan

Community engagement for all coordinated plans must include older adults and individuals with disabilities. However, this Coordinated Plan goes beyond these minimum requirements: It is tailored to serve a wider range of marginalized groups in the Capital Area region.

In addition to older adults and people with disabilities, our community engagement took care to involve a wide range of population groups, such as the six groups listed above, as well as the organizations that represent and serve them—including health and human services agencies.

PLAN STRUCTURE

This Coordinated Plan includes 8 chapters and 4 appendices. Chapters 2 through 4 take stock of existing conditions and lay the groundwork for the rest of the document. Chapter 5 presents updated regional goals and objectives. Chapters 6 and 7 explain implementation strategies, timelines, and performance measures. Chapter 8 looks ahead to future considerations.

Executive Summary

Chapter 1. Introduction

This chapter covers the Coordinated Plan's background and purpose, populations served (and engaged), and project timeline.

Chapter 2. Transportation Resources in the Region

This chapter provides a list of current transportation providers and planning agencies in the Capital Area region.

Chapter 3. Transportation Needs and Gaps

This chapter assesses the known transportation needs and gaps, with demographic maps and supporting geographic analysis.

Chapter 4. Review of Existing Plans, Studies, and Reports

This chapter describes how this Coordinated Plan aligns with other municipal, rural, and statewide transportation planning efforts.

Chapter 5. Goals and Strategies

This chapter articulates the goals and objectives (or "strategies") of this Coordinated Plan.

Chapter 6. Strategy Prioritization and Plan Implementation

This chapter prioritizes strategies, and proposes an implementation plan—including timeline, priority, lead organization(s), and support organization(s)—to put into action when the Coordinated Plan is approved.

Chapter 7. Performance Measures and Funding Sources

This chapter presents performance measures to track progress on the strategies outlined in Chapter 6. It also provides a list of potential funding sources.

Chapter 8. Looking Ahead

• This chapter looks ahead to considerations that will likely have an impact on this Coordinated Plan in the future.

Appendices





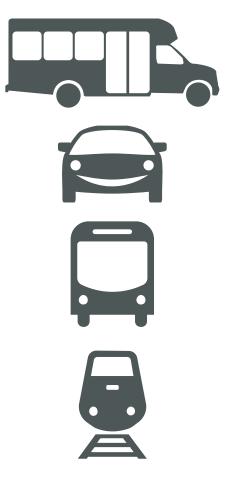
Transportation Resources in the Region

This chapter describes transportation resources for older adults, people with disabilities, and other target population groups identified in the previous chapter.

This chapter contains two sections:

2

- Existing Transportation Services. This section paints a picture of the transportation services that are available in the Capital Area region. It is a key stepping stone to determining transportation needs and gaps, which we cover in Chapter 3.
- Office of Mobility Management. This section explains the role of the Office of Mobility Management (OMM), which is a partnership between two of the region's public transit agencies, Capital Metropolitan Transportation Authority (CapMetro) and Capital Area Rural Transit System (CARTS).



EXISTING TRANSPORTATION SERVICES



- Local Bus and Rail
 - CapMetro
 - Round Rock Transit
 - San Marcos Transit



- Rural Transportation
 - CARTS
 - Hill Country Transit District
 - Lago Vista Volunteers
 - Lakeway Service League
 - Community Resource Center of Texas



- Paratransit Services
 - MetroAccess
 - Pickup by CapMetro
 - Round Rock Paratransit



- Veterans Services
 - United for the People
 - U.S. Department of Veterans Affairs



- Volunteer Driving Organizations
 - Chariot
 - Drive a Senior ATX
 - Drive a Senior Faith in Action Northwest
 - Faith in Action
 - Senior Access
 - American Cancer Society Road to Recovery



- Long Distance Travel
 - Amtrak
 - Greyhound Bus
 - Coach USA Bus Company
- More information and resources are available in the OMM Transportation Services Guide. The subsequent section describes the OMM in more detail.

Existing Transportation Providers

Service Type	Organization	Phone	Website	Description
	CapMetro	512-474-1200	Capmetro.org	Bus and rail service provider for the Austin metropolitan area
Local Bus	Round Rock Transit	512-218-7074	Capmetro.org/roundrock	Commuter and local bus service in Round Rock
and Rail	San Marcos Transit	(512)805-7433	sanmarcostx.gov/1300/ Transit	Local bus service to San Marcos
	CARTS	512-478-RIDE (7433)	RideCARTS.com	Serves Bastrop, Blanco, Burnet, Caldwell, Fayette, Hays, Lee, Travis, and Williamson counties
	Hill Country Transit District (The Hop)	254-933-3700 ext. 5013	takethehop.com	Serves Coryell, Hamilton, Lampasas, Llano, Mason, Milam, Mills, Bell and San Saba counties
Rural	Lago Vista Volunteers	512-267-1567		Serves Jonestown and Lago Vista areas
Transportation	Lakeway Service League	512-261-3514	lakeway.org	Serves Lakeway and The Hills areas
	Community Resource Center of Texas	830-693-0700	CRCTX.ORG	Provides rides to non-critical Medical and Dental appointments. Serves Burnet, Llano, Blanco, and Williamson counties.
Wheelchair	MetroAccess	Reservations: 512-852-7272 Eligibility: 512- 389-7501	Capmetro.org/ metroaccess	Demand-response, shared-ride service for people with disabilities offered by CapMetro
Accessible Services	Pickup by CapMetro	512-369-6200	Capmetro.org	On-demand transit operating in 10 locations throughout Austin
	Round Rock Paratransit	512-852-7272	Capmetro.org/roundrock	Round Rock ADA paratransit service
	United for the People	888-298-3220	unitedforthepeople.org	Fee-based transportation to VA appointments in Cedar Park, Austin, Georgetown, Hutto, Round Rock, Leander, and Pflugerville.
(Q) Veterans	U.S. Department of Veterans Affairs	1-877-222-VETS (8387)		The VA's Veterans Transportation Program offers Veterans many travel solutions to and from their VA health care facilities at little or no cost to eligible veterans.
Services	Vetrides	877-851-8838		Free rides to veterans, their dependents and caregivers living in Burnet, Llano, and Lampasas counties. Transport to Temple and San Antonio for VA appointments is available.
	Chariot	512-445-5552	chariot.org	Serves South/Southeast/Southwest Austin, Elgin, Lakeway, and Dripping Springs
	Drive a Senior ATX	512-472-6339	driveasenioratx.org	Serves North and West Austin
	Drive a Senior-Faith in Action Northwest	512-250-5021	driveaseniornorthwest.org	Serves Northwest Austin, Leander, and Cedar Park
Volunteer Driving	Faith in Action	512-868-9544	faithinactiongt.org	Serves Georgetown
Organizations	Senior Access	512-310-1060	senioraccesstx.org	Serving Manor, Pflugerville, Round Rock, Hutto, Northeast And East Austin
	American Cancer Society- Road to Recovery	1-800-227-2345		Transportation to and from treatment for individuals with cancer.
	Amtrak	800-872-7245	amtrak.com	Daily service between Chicago and San Antonio, with stops in Austin and Dallas
Long Distance	Greyhound Bus	512-458-4463	greyhound.com	Regional bus service between Monterrey, MX, and Dallas with multiple stops including Austin
Travel	Coach USA Bus Company	512-389-0090	iridekbc.com	Daily routes to Houston

OFFICE OF MOBILITY MANAGEMENT

The Office of Mobility Management (OMM) for Central Texas is a partnership between CapMetro and CARTS. OMM helps connect people with goods and services through the regional transit network. They work with 26 community partners to meet the mobility needs of older adults, people with disabilities, and veterans.

The OMM Transportation Services Guide (also available in Spanish) provides information such as when services are available, who is eligible, how to get in touch, and what costs are involved.

More specifically, the guide also provides a list of resources available to older adults, veterans, and people with disabilities, including disability parking permits information, volunteer driving organizations, and home health or personal care services. The image at right displays a sample page from the Guide.

Transportation Services Guide Snapshot

WHEELCHAIR ACCESSIBLE SERVICES

ACCESSIBLE TAXI SERVICES

Some Taxi companies in the greater Austin area offer pre-arranged and response/demand sedans and vans for riders with wheelchairs. Check the TAXICAB listing in the Yellow Pages of the local phone book. Some taxi companies that accommodate power wheelchairs and scooters are:

Austin Express Cab Service	
Yellow Cab	
ATX Taxi	
ACCESSIBLE VEHICLE RENTALS	

& VEHICLE CONVERSIONS

See yellow pages or web search under VANS RENTING & LEASING, WHEELCHAIR ACCESSIBLE VEHICLES.



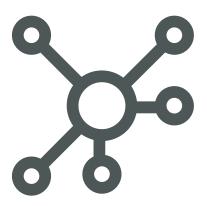
Transportation Needs and Gaps

A seamless transportation system is one that meets the needs of the people it serves. This chapter provides a clearer understanding of these needs—and gaps—in the Capital Area region.

Chapter 3 includes three sections:

3

- **Demographic Characteristics.** This section describes target populations, explains their common transportation challenges, and presents demographic information for each.
- Mobility and Access Conditions. This section combines demographic data, transit availability, and travel patterns, to reveal gaps in transit service.
- Transportation Needs Assessment. This section uses both outreach and quantitative analysis to uncover key themes in terms of transportation needs (and gaps) in the Capital Area Region.



DEMOGRAPHIC CHARACTERISTICS

This Coordinated Plan focuses on improving transportation and access to services for the following target population groups, representing at least 21% of the total regional population: older adults (age 65 and older), youth (ages 10 to 17), individuals with disabilities, individuals living in poverty, those with limited English proficiency, and veterans.

Historically, these population groups have depended more on transit and have had less access to personal vehicles. These conditions make mobility a challenge, particularly in rural areas and in locations without access to public transit. The table below summarizes how many people there are within each target group, as well as their common mobility challenges.

Target P	opulation	Population (2019)	% of Regional Population	Common Mobility Challenges
	Older Adults (age 65 and older)	252,249	11%	For several reasons, older adults may drive less often or not at all. Examples include health issues, comfort behind the wheel, or the need for assistive mobility devices. As such, they may need additional mobility support, including public transit.
	Youth Populations (ages 10 to 17)	233,242	10%	Youth populations may have difficulty getting to places like schools, after-school care, or community centers. This is partly because many aren't legally allowed to drive, but could also be due to limited access to a vehicle or public transit.
	Individuals with a Disability	111,521	5%	Individuals with disabilities may have physical or cognitive challenges that make it difficult to operate a vehicle, or to travel on their own. They may need additional support for mobility from caregivers or family members.
Å	Individuals Living in Poverty	236,444	11%	People living in poverty tend to use transit more frequently than the general public because they may not have the means to purchase, own, maintain, or fuel a personal vehicle. Public transit may also be cost- prohibitive for these populations.
Å	Veterans	117,886	5%	Veterans often face barriers to receiving care, financial and otherwise. Those living in rural areas must travel longer distances for appointments, and may have limited options for healthcare providers.
	Limited English Speakers	195,551	9%	Limited English speakers face additional challenges accessing and understanding available transportation services, including public transit.

Mobility Challenges of Target Populations and Percent

Source of population data: 2019 5-Year ACS Estimates. Total Capital Area population: 2,235,695.



11%

of 10-Countv

Population

Older Adults (Age 65+)

Older adults (age 65 and older) account for 11% of the population of the region. As the top table indicates, the share of older adults in the region is lower than that of the state (12%).

The counties in the region with the highest percentage of older adult populations include Llano (36%), Fayette (25%), and Blanco (25%).

The bottom table shows the distribution of older adults in the Capital Area region. Concentrations of older adults exist in the largest population centers, including central and northern Travis County, eastern Hays County, and central Williamson County, primarily due to the location of Sun City. Smaller pockets with notable concentrations include eastern Llano and southwestern Burnet counties, Bastrop County along Highway 71, and southeastern Hays County.

Older Adult Residents

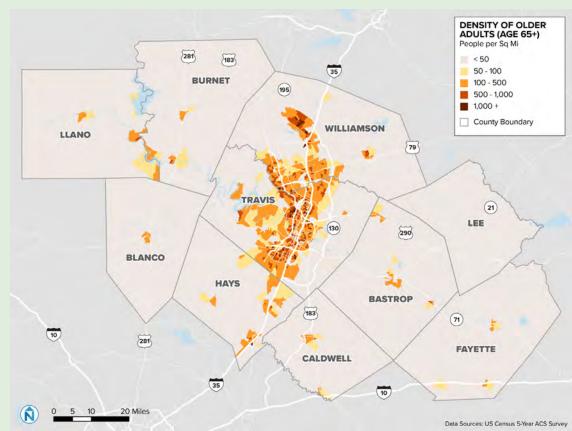
	Population (2019)	% of Population
10-County Region	252,249	11%
State of Texas	3,462,527	12%

Source: 2019 5-Year ACS Estimates

Older Adults by County

County	Population (2019)	% of County
Llano	7,656	36%
Blanco	2,874	25%
Fayette	6,187	25%
Burnet	10,203	22%
Lee	3,214	19%
Bastrop	12,303	15%
Caldwell	5,771	14%
Williamson	64,740	12%
Hays	22,818	11%
Travis	116,483	9%

Source: 2019 5-Year ACS Estimates



Distribution of Residents Age 65 or Older



Youth

Youth (ages 10 to 17 years) account for 10% of the population of the region. This is slightly lower than the state (12%)(see top table). The counties with the highest share of youth residents include Bastrop (12%), Williamson (12%), and Caldwell (11%).

The bottom table shows the distribution of youth in the region. The largest concentrations of youth residents are in the major population centers: Travis County, eastern Hays County, and southern Williamson County. Smaller notable concentrations of youth include Lockhart in Caldwell County, La Grange in Fayette County, eastern Llano County, and southwestern Burnet County.

Youth Residents

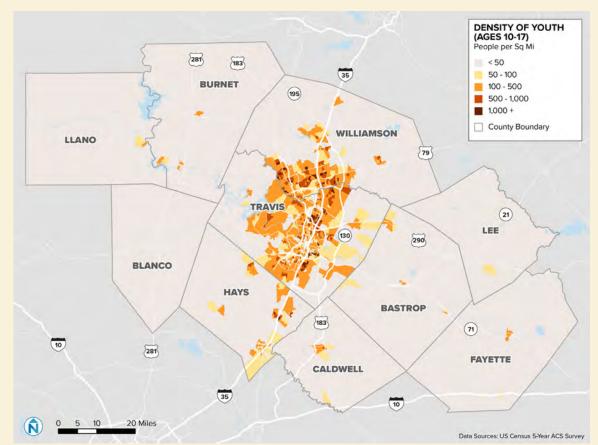
	2019	% of Population
10-County Region	233,242	10%
State of Texas	3,314,633	12%
Source: 2019 5-Year ACS Estimates		

ource: 2019 5-Year ACS Estimate

Youth Residents by County

County	2019	% of County
Bastrop	10,562	12%
Williamson	66,707	12%
Burnet	5,115	11%
Caldwell	4,703	11%
Hays	22,610	11%
Lee	1,809	11%
Fayette	2,396	10%
Travis	116,888	10%
Blanco	993	9%
Llano	1,459	7%

Source: 2019 5-Year ACS Estimates



Distribution of Youth Residents

10% of 10-County Population



Individuals with Disabilities

Individuals with disabilities account for 5% of the population in the region among those ages 20 to 64.¹ The share of individuals with a disability is lower than the state (6%) as observed in the top table at right. The counties with the highest share of individuals with disabilities include Llano (9%), Burnet (8%), and Blanco (7%) (bottom table).

The map shows the distribution of individuals with disabilities in the Capital Area region. Concentrations of individuals with disabilities are found in the largest population centers, including Travis County, eastern Hays County, and Williamson County. Smaller pockets with notable concentrations include Lockhart in Caldwell County, La Grange in Fayette County, Bastrop County along Highway 71, eastern Llano County, and southwestern Burnet County.

Population Density of Individuals with Disabilities

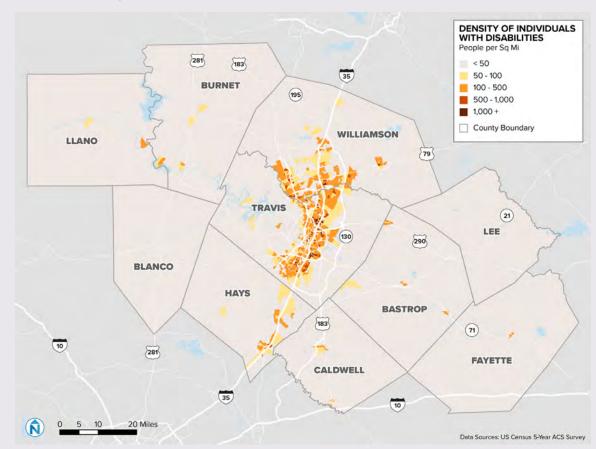
Individuals with a Disability

	2019	% of Population
10-County Region	111,521	5 %
State of Texas	1,580,052	6%
Source: 2019 5-Year ACS Estimates		

Individuals with a Disability by County

County	2019	% of County
Llano	1,997	9%
Burnet	3,855	8%
Bastrop	5,664	7%
Blanco	795	7%
Caldwell	2,889	7%
Fayette	1,620	6%
Hays	10,092	5%
Lee	858	5%
Travis	55,247	5%
Williamson	28,504	5%

Source: 2019 5-Year ACS Estimates



5% of 10-County Population

¹ Data for individuals with disabilities (of any age) at the block group level was unavailable at the time this analysis was conducted. Thus, the data presented in Figures 9 through 11 represents individuals with disabilities between the ages of 20 to 64, which was the most recent data available for mapping purposes.



Individuals Living in Poverty

Individuals living in poverty account for 11% of the population of the region. This is lower than the statewide percent (14%)(top table).

The counties with the highest share of people living in poverty are Caldwell (18%), Hays (13%), and Lee (12%) (bottom table).

The map shows the distribution of individuals in poverty. Concentrations of individuals in poverty are located in the largest population centers, including Travis County, eastern Hays County, and Williamson County. Smaller pockets with notable concentrations include central and southern in Caldwell County, La Grange in Fayette County, Bastrop County along Highway 71, eastern Llano County, and southwestern Burnet County.

Individuals Living in Poverty

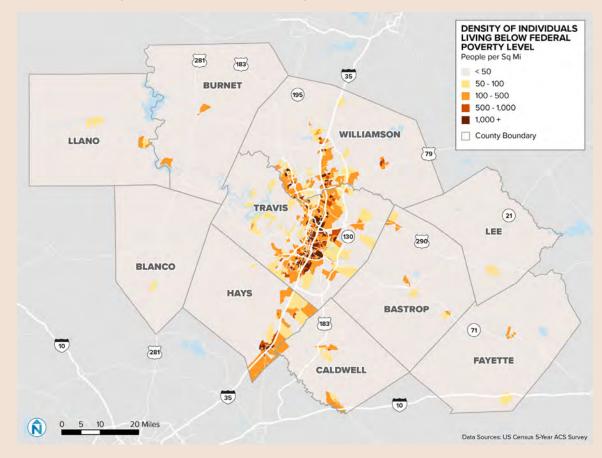
	2019	% of Population
10-County Region	236,444	11%
State of Texas	4,072,194	14%
Source: 2019 5-Year ACS Estimates		

Individuals Living in Poverty by County

County	2019	% of County
Caldwell	7,541	18%
Hays	28,214	13%
Fayette	2,929	12%
Lee	2,040	12%
Travis	143,785	12%
Bastrop	9,230	11%
Llano	2,211	11%
Burnet	4,661	10%
Blanco	1,015	9%
Williamson	34,818	6%

Population Density of Individuals Living in Poverty

Source: 2019 5-Year ACS Estimates



of 10-County Population



5%

of

10-County

Population

Veterans

Veterans account for 5% of the total population of the region. This is comparable to the statewide percent (5%)(top table).

The counties with the highest share of veterans include Llano (12%), Blanco (10%), and Burnet (9%)(bottom table).

The map shows the distribution of veterans in the region. The highest concentrations are in Travis County, northern and eastern Hays County, and central and southern Williamson County. Other notable clusters of veterans include central and southern Caldwell County, central Bastrop County, eastern Llano County, and southwestern Burnet County.

Current Veterans Affairs (VA) facilities are located in Travis County (Austin VA Clinic), Williamson County (Cedar Park VA Clinic), and Fayette County (LaGrange VA Clinic). Nearby VA Clinics outside of the region include those in New Braunfels, Seguin, and Temple.

Veterans

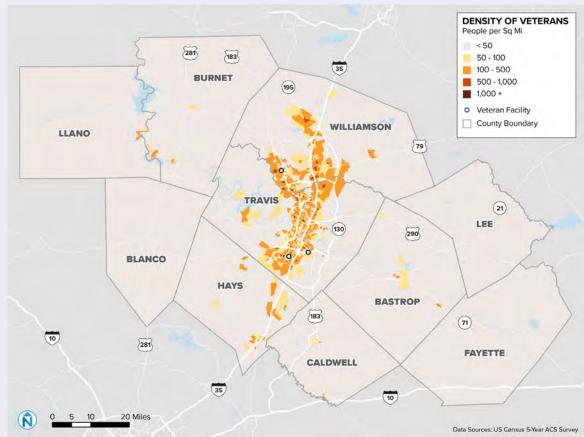
2019	% of Population
117,886	5 %
4,072,194	5%
	117,886

Source: 2019 5-Year ACS Estimates

Veterans by County

County	2019	% of County
Llano	2,522	12%
Blanco	1,145	10%
Burnet	4,017	9%
Bastrop	7,026	8%
Fayette	1,643	7%
Hays	11,990	6%
Lee	1,095	6%
Williamson	34,924	6%
Caldwell	2,163	5%
Travis	51,361	4%

Source: 2019 5-Year ACS Estimates



Veteran Population Density



9% of 10-County Population

Limited English Speakers

People with limited English proficiency account for 9% of the region's population. This is lower than the statewide share (13%)(top table).

According to the 2015 American Community Survey (ACS) Estimates², the most spoken languages in the region (other than English) are Spanish, Chinese, and Vietnamese.

The counties with the highest share of limited English speakers include Travis (11%), Caldwell (11%), and Bastrop (9%) (bottom table).

The map shows the distribution of limited English speakers in the region. The highest concentrations are in Travis County, eastern Hays County, and southern Williamson County. Smaller notable clusters of limited English speakers are in northern Bastrop County, central and southern Caldwell County, and southwestern Burnet County.

2 2015 was the most recent data available which included details on language proficiency for languages other than English.

DENSITY OF INDIVIDUALS WITH LIMITED ENGLISH PROFICIENCY People per Sq Mi 281 183 < 50 35 BURNET 50 - 100 195 100 - 500 500 - 1,000 1,000 + WILLIAMSON County Boundary LLANO TRAVIS (21) LEE 130 290 BLANCO HAYS BASTROP 183 (71) 10 281 FAYETTE CALDWELL (35) 10 0 5 10 20 Miles N Data Sources: US Census 5-Year ACS Survey

Density of Individuals with Limited English Proficiency

Veterans

	2019	% of Population
10-County Region	195,551	9 %
State of Texas	3,607,255	13%

Limited English Speakers by County

County	2019	% of County
Caldwell	4,761	11%
Travis	131,456	11%
Bastrop	7,439	9%
Hays	13,370	6%
Lee	1,061	6%
Williamson	33,525	6%
Blanco	405	4%
Burnet	1,964	4%
Fayette	1,039	4%
Llano	531	3%

Source: 2019 5-Year ACS Estimates

MOBILITY AND ACCESS CONDITIONS

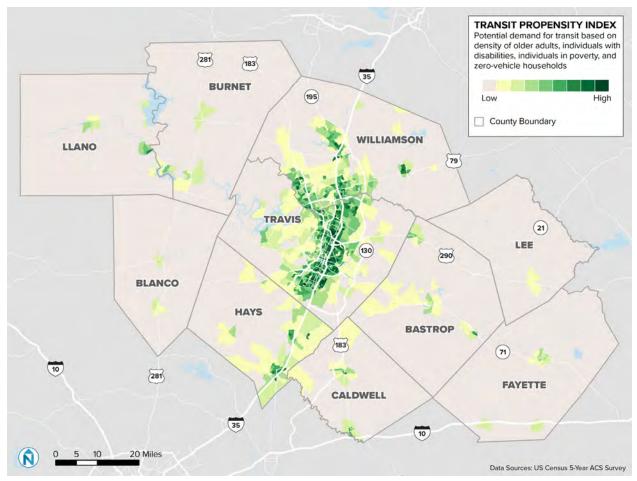
This section identifies where people are more likely to need transit (transit propensity), where transit is not available (transit deserts), and where people travel in the Capital Area region (trip generators and travel patterns).

Transit Propensity

Transit propensity measures where transit needs are higher than average, based on socioeconomic characteristics typically associated with transit ridership. In this analysis, transit propensity combines older adults, individuals with disabilities, individuals living in poverty, and zero-vehicle households.

Transit propensity, which is measured in density, closely aligns with overall

population density (see map). Areas with high concentrations of transit need include the population centers within Travis, Hays, and Williamson counties, and portions of Llano, Caldwell, and Bastrop counties. Transit propensity maps for each county are available in Appendix A.

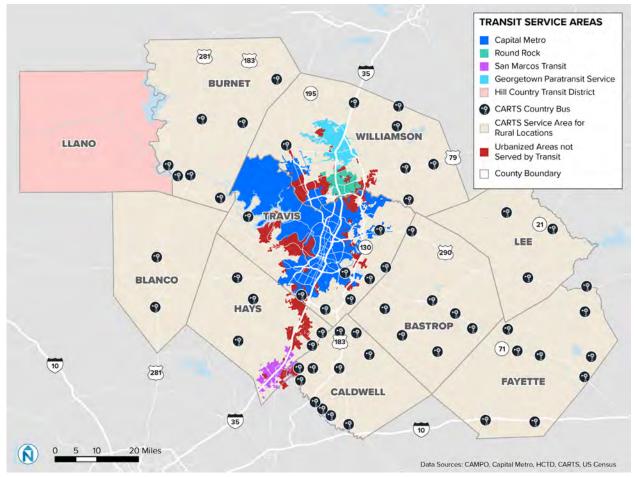


Transit Propensity Index

Transit Deserts

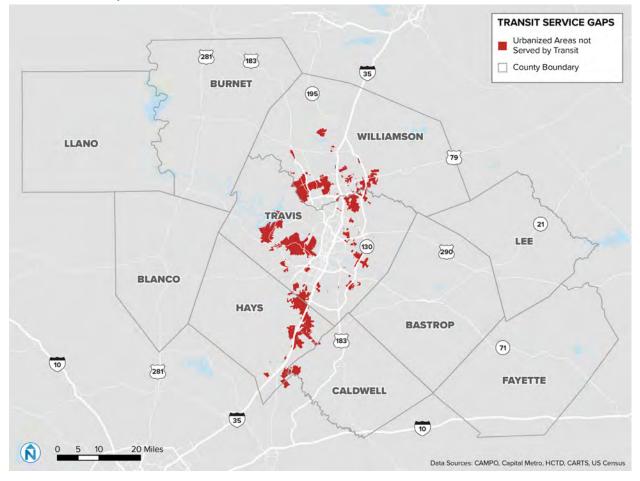
Transit deserts are areas that are not served by public transit. (This includes traditional scheduled transit service as well as on-demand service such as paratransit.) People living in transit deserts have increased barriers to accessing basic services, particularly if they do not have access to a personal vehicle.

Transit is available in much of the Capital Area region (see Transit Deserts map below). However, several urbanized areas do not currently have public transit (see Transit Service Gaps map on opposite page). These include Cedar Park and Hutto in Williamson County, areas near Lakeway and West Lake Hills in western Travis County, Pflugerville, Hornsby Bend, and areas immediately east and north of San Marcos in Hays and Caldwell counties (including Kyle and Buda). Transit desert maps for each county are available in Appendix A.



Transit Deserts

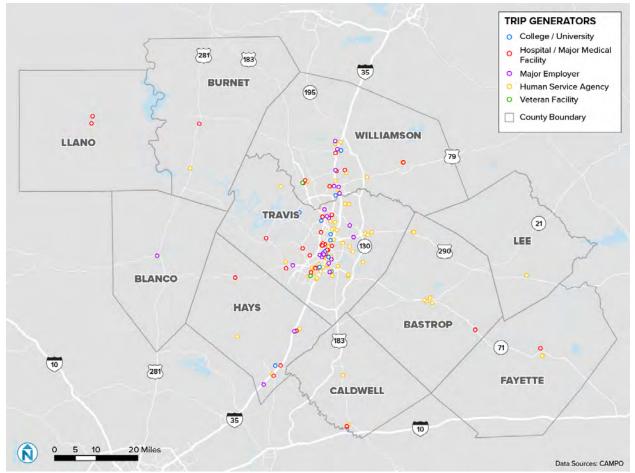
Transit Service Gaps



Trip Generators and Travel Patterns

Trip generators are important destinations, such as major employers and universities, that affect how and where people get around. For our target population groups, other more specific destinations are also key trip generators, including medical facilities, human service agencies, and veterans' facilities. They are primarily concentrated along the I-35 corridor in Hays, Travis, and Williamson counties (see map, below).





Note: Major employers are those with 500 or more employees.

Jobs and Industry in the Capital Area

Getting to and from work is an important part of our day-to-day travel patterns. The Capital Area is one of the fastest-growing regions in the nation, with thousands of new residents and jobs each year.

The top industries include government (16% of the workforce), professional and technical services (11%), accommodation and food services (10%), retail trade (10%), and health care and social assistance (10%).¹

The industries with the largest regional employment growth (by percent change) include mining (15%), professional and technical services (14%), healthcare and social assistance (13%), educational services (13%), and transportation and warehousing (13%).

¹ Source: CAPCOG 2020-2025 Comprehensive Economic Development Strategy



TRANSPORTATION NEEDS ASSESSMENT

This section presents an overview of transportation needs and gaps in the Capital Area region for the target population groups older adults, youth, individuals with disabilities, individuals living in poverty, veterans, and limited-English speakers. The overview draws from four inputs:

- Existing Conditions Analysis. The project team analyzed demographic characteristics and mobility and access conditions (earlier in Chapter 3), as well as available transportation services (Chapter 2).
- SCOT Analysis. Early in the development of the Coordinated Plan, RTCC identified organizational strengths, challenges, external opportunities, and threats (SCOT) regarding transportation in Central Texas.
- Stakeholder Interviews. The project team conducted 11 stakeholder interviews between August and September 2021. Stakeholders included transit providers, human service organizations, and local, regional, and state organizations.
- Affinity Groups. The project team held four meetings (11 participants) with affinity groups in January 2022 for:
 - Older adults, people with disabilities, and veterans
 - Community organizations
 - Communities of color, limited English speakers, and low-income individuals
 - Support agencies and service providers³

Five themes emerged in our assessment of needs and gaps:

- 1. Coordination and collaboration
- 2. Access to key destinations
- 3. Regional transportation needs
- 4. Education and awareness
- 5. Funding

These themes informed the goals, objectives, and strategies, as well as the prioritization of projects and programs discussed in future chapters.

³ An affinity group meeting for health care providers was scheduled twice, but no participants attended.



Coordination and Collaboration

More coordination and collaboration came up as a need among several stakeholders. Many expressed major concerns about the lack of coordination between agencies. Most could point to *some* level of coordination with other organizations and providers. For example, some stakeholders coordinate on service functions, such as making transfers free or otherwise more seamless. However, this type of coordination is rare, and areawide coordination is not widespread. On the other hand, some stakeholders mentioned that they do not coordinate with anyone, and expressed skepticism of—or disinterest in—working with others.

Gaps in transportation service were a common theme. In particular, fixed-route

transit and ADA paratransit do not serve several outlying areas of the region. Stakeholders noted that many marginalized populations, including people with low incomes, reside in gaps between fixed-route and ADA paratransit service areas.

Stakeholders noted that it was difficult to provide affordable transportation because many volunteer-led groups have issues with staffing, education, outreach, and service costs. Staff time and capacity were the primary concerns for volunteer organizations and other stakeholders. Many organizations have as few as one or two staff members dedicated to operations, and sometimes even maintenance activities.



Access to Key Destinations

Providing services for veterans and transportation to these services was a notable concern among several stakeholders. The regionalization of veterans' services means that each entity has their own ways, processes, and schedules, making coordination more difficult when changes occur.

Access to healthcare is a major need for the region. Stakeholders expressed the need for transportation to provide more predictable access to healthcare appointments, such as dialysis and other critical services.

Better transportation to employment is a common need among stakeholders. Large employers such as Tesla lack sufficient transportation options for those without access to vehicles.



Regional Transportation Needs

The service needs of urban and rural areas are vastly different. Unfortunately, these differences can be geographically complex due to service boundaries, municipal boundaries, and funding designations for place types. At least one transportation provider has created two advisory groups, one for urban areas and one for rural areas, to better understand service needs.

Rapid growth can make it hard for transportation services to meet increasing demand. This can have implications on opportunities for federal funding.

Some agencies noted geographic barriers to service such as rail lines and rivers that can cut off major routes and cause major transportation disruptions and increase unreliability.

Stakeholders noted specific gaps in service,

including suburban communities such as those in Williamson County, where residents do not have comparable access to public transit. This reflects the need to provide cost-effective transportation service to areas that do not meet the density required for fixed-route transit.

Stakeholders mentioned the need for a seamless regional transit system that is efficient, affordable, dependable, and safe. In areas where fixed-route transit is not feasible, stakeholders brought up park-and-ride lots as a possible solution.



Education and Awareness

A key concern among stakeholders was ensuring representation by target populations in feedback-gathering community engagement activities. Some agencies have begun using non-traditional measures to collect a wider, more representative sample of community feedback.

Better mechanisms for disseminating information are also necessary. One

stakeholder shared an example of organizations being unaware of FTA Section 5310 funding, which highlights the need to provide educational opportunities to new or existing service providers.



Funding

Stakeholders noted that the lack of funding hinders their ability to provide needed services for their communities. However, while funding is an issue across the region, the specific needs vary considerably between organizations. Some need additional funds to purchase new vehicles as they age beyond their useful life, while others are looking to hire, retain drivers, and expand their service.

Rural agencies have unique funding needs.

Organizations in rural towns with *smaller service areas* face an issue where their vehicles age but do not reach the miles needed to upgrade to new vehicles. By contrast, rural organizations that serve *large areas* have vehicles that are driven over exceptionally long distances. They voiced concern over the way their revenue miles are calculated, stating that funding sources do not cover the extremely long deadhead miles that accrue when returning from these trips.





4

Review of Existing Plans, Studies, and Reports

This Coordinated Plan does not exist in a vacuum. Rather, it coexists with other plans throughout the region. This chapter identifies these other plans, and explains how they relate to this effort.

Chapter 4 includes two sections:

- **Related Plans, Studies, and Reports.** This section lists the 11 plans, studies, and reports considered in this chapter.
- **Key Findings.** This section describes key findings and themes identified in the review.



RELATED PLANS, STUDIES, AND REPORTS

The 15 plans, studies, and reports included in this chapter have some connection to public transit and human services transportation in the Capital Area region—whether that involves development, design, operations, or funding. They include previous coordinated plans, regional transit and transportation agency plans, and statewide funding guidance.

Previous Coordinated Plans

- Coordinated Public Transit Health and Human Services Transportation Plan (CAMPO and Capitol Area RTCC, 2017)
- Capital Area Coordinated Plan: A Plan for Coordination of Public Transit-Health and Human Service Transportation (CAMPO and Capitol Area RTCC, 2012)

Regional Transit Plans

- 2045 Regional Transit Study (CAMPO, 2020)
- San Marcos Transit Plan (City of San Marcos, 2020)
- Travis County Transit Development Plan (Travis County, 2018)
- City of Georgetown Transit Development Plan (City of Georgetown, 2016)
- Round Rock Transit Development Plan (City of Round Rock, 2015) (2022 update in progress)

Regional Transportation Plans

- CAMPO 2045 Regional Transportation Plan
- Regional Arterials Concept Inventory (CAMPO, 2020)
- Regional Transportation Demand Management Plan (CAMPO, 2019)
- 2045 Regional Active Transportation Plan (CAMPO, 2017)

Statewide Funding Guidance

• Sources of Funding Transit in Texas: Final Report (Texas A&M Transportation Institute, 2017)



Report Synthesis

The key findings in this chapter synthesize the following information from the 12 plans listed:

- Goals and objectives
- Needs, gaps, and barriers related to transit access, service provision, and coordination
- Relevant strategies that support transit and human services transportation

Health and Human Service Plans

- Health and Human Services System Coordinated Strategic Plan for 2021-2025 (HHS, 2022)
- State Plan for Independent Living 2021-2023 (Texas State Independent Living Council, 2021)
- Area Agency on Aging Plan, 2022 (Area Agency on Aging of the Capital Area, 2020)



KEY FINDINGS

Rural populations continue to face relatively low transit access, transit use, and coordination challenges.

Public transit service and human services coordination is difficult in rural areas, leaving many in these areas underserved despite high needs. This is due to a combination of factors, including low densities, large service areas, sometimes long distances between activity centers and other key destinations—in addition to the longstanding cultural norms surrounding private automobile use.

The resulting poor connectivity to regional systems makes it difficult for residents to meet their basic needs using transit (e.g., medical care, education, shopping, and recreation). Additionally, small-scale human services transportation operations that are volunteerled and have low out-of-pocket costs, have diminished coordination potential.

Throughout the region, providing *accessible* access to transit facilities is a key priority.

In areas that are well-served by transit as well as those that are not, there is an urgency to ensure that first/last mile transit connections are well-designed, high quality, and accessible to people of all abilities.

There are opportunities to coordinate mobility strategies in other plans with the goals and objectives of this study. Examples include:

- Promoting facility design strategies in transportation demand management (TDM) and active transportation plans
- Coordinating Human Services Transportation Plan (HSTP) mobility management with TDM and other related efforts
- Ensuring HSTP strategies are included in improved or enhanced outreach and education strategies for active

transportation, TDM, or local transit services

- Developing protocols for sharing data and mobility options across agencies
- Targeting implementation priorities to high-need and vulnerable populations

The speed of the region's growth can create funding and service obstacles.

As the region continues to grow, certain areas can—and have—lost their eligibility for rural transit funding once included in the Austin urbanized area, regardless of current service provision, opportunities, or alternative funding options.

There is potential for coordination through interagency and public-private partnerships.

As transportation providers continue to update their policies and strategies, several interagency coordination opportunities arise, including:

- Coordinating fares and fare-free transfer opportunities between systems
- Incorporating new technologies across the region, including fare payment technology
- Developing complementary systemwide policies so users can move seamlessly from one system to the next

Transit agency rebranding and marketing efforts also provide opportunities to coordinate on messaging and branding so users are aware and comfortable using multiple transportation services.

Further, public-private partnership coordination opportunities continue to be promising avenues to provide support services in specific locations for specific needs, e.g., shuttles provided by large retailers or shopping centers.





Goals and Strategies

5

Goals are central to this Coordinated Plan. They articulate what we're trying to accomplish, guide the development of strategies, set the stage for measuring success, and ultimately help RTCC move toward a long-term vision.

Chapter 5 articulates the goals and objectives of this Coordinated Plan. They are guided by RTCC's vision and mission¹, as well as the findings in Chapters 2 through 4. We refer to objectives as "strategies" for the purposes of this plan.

This chapter includes the following sections:

- Vision and Mission. This section explains RTCC's vision and mission.
- **Goals.** This section presents the goals of this Coordinated Plan, and how they came about.
- Strategies. This section lists the strategies developed for each goal.



¹ As further outlined by the Public Transportation Division (PTN) of the Texas Department of Transportation.

VISION AND MISSION

RTCC established an agreed-upon **vision** in the 2011 Coordinated Plan update. They reviewed the vision statement in 2021 and determined that it held true:

The vision of the RTCC is to provide

full mobility and access to healthcare, human services, employment, education, commerce, social and community services for all persons in the region by fostering the development of a seamless public transportation system that achieves efficiencies, eliminates duplication, increases coordination and addresses service gaps.

The **mission** of RTCC is to update the Coordinated Plan every five years and work together to implement the strategy recommendations from that plan.

RTCC's mission statement, created for the 2005 plan, did not change as a part of this plan update:

To create a seamless transit system

that achieves efficiencies, eliminates duplication, increases coordination, and addresses service gaps.

What are Vision and Mission Statements?

Vision statements focus on the future. The horizon of a vision statement is typically long-term, capturing what an organization would like to become over time. As such, vision statements may only need updating every 10 years or more (if ever). There is little need to update the vision statement for a plan with a five-year horizon.

Mission statements highlight what the region does currently. Like vision statements, mission statements may only need be updated every 10 or more years, unless the work of the region is so dynamic that it warrants more frequent updates. Mission statements typically capture what a region is doing to achieve their goals.



GOALS

Goals are critical components of coordinated planning. They determine what this plan is working to accomplish, while guiding RTCC strategy implementation and activities.

RTCC developed goals for this coordinated plan during an October 2021 workshop. Since the workshop was virtual, the project team took care to ensure that RTCC members had several weeks to review and comment on the draft goals (and strategies).

RTCC first identified common themes around the SCOT (strengths, challenges, opportunities, and threats) analysis they had previously participated in. Based on those themes, the team identified five goals for the next five-year plan horizon:

GOAL 1 Sustain Communication, Education, and Awareness Regionally

RTCC addresses the need to coordinate public transportation services with human service needs in the Capital Area region. There is an ongoing need to educate regional partners on efforts made to date, and work with partners to solve problems regionally. Additionally, there is a need to inform the public about available services—transportation and human service—and how to use them.



GOAL 2 Strengthen and Sustain Financial Opportunities

Sustainable funding streams will always be a challenge for providers. However, with the onset of CARES and CRSSA act funding, providers have more options, though they are not always sustainable. In addition, rapid regional growth underscores need for service planning to meet the needs of the population.



GOAL 3 Define and Address Regional Transportation Needs

Regional needs include those of providers—ongoing maintenance, operations, and capital planning—as well as those of the community. Providers have worked together for 15 years to develop services and programs where there are gaps throughout the region. However, with rapid growth, the gaps not only grow and change, but sometimes move. Additionally, partners should work together to clearly understand where service gaps are within agency service areas.



Support Ongoing Coordination, Collaboration, & Partnerships

Connect the region regardless of the invisible barriers created by county lines, city limits, and transit service areas. Regional partners have made great strides to improve connectivity. However, as the region grows, they will need to continue working together to address connectivity.



Enhance Access to Healthcare and Human Services

RTCC can be the conduit to work with workforce development, Veterans services, housing, and special services to better understand client needs, and inform human service providers about available transportation and mobility options.

Goals and Strategies

STRATEGIES

Strategy development occurred organically, prior to the development of goals.

The project team first presented a list of strategies from the previous plan, and the group discussed which ones had been implemented, with the opportunity to determine if a strategy should be retained from the previous plan.

RTCC and the project team also developed new strategies. This included strategies to implement if money were not a constraint, which consideration for those strategies needed related to the COVID-19 pandemic.

GOAL 1

Goal | Strategies

$m \prime$ Sustain Communication, Education, and Awareness Regionally

- 1.1 Education materials on all mobility options in the region-not just public transportation
- 1.2 Work with OMM and stakeholders to establish a single source of information for transportation and mobility
- 1.3 Develop internal engagement and education pieces for stakeholders and regional partners about RTCC, the purpose, and what has been achieved over the last 15 years
- 1.4 Develop education materials for different audiences: workforce, students, healthcare
- 1.5 Develop engagement pieces, including talking points and education plan for public awareness of local/regional services
- 1.6 Train the trainer program for education and advocacy re: available services; connecting to human services
- 1.7 Updates for stakeholders and partner agencies on medical transportation/Medicaid.

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GOAL 2 Strengthen and Sustain Financial Opportunities

- 2.1 Identify "need" to determine if it can be fulfilled by existing service or whether the "need" requires new service through 5310 funding
- 2.2 Become more strategic about what resources are available—what needs exist and whether the region is being strategic with the resources that exist
- 2.3 Develop a system to identify and promote funding opportunities for regional providers and programs
- 2.4 Part and/or full-time grant writing assistance
- 2.5 Advertise/organize competitive process for 5310 funding; examine how 5310 grant process is conducted
- 2.6 Support the MPO's role as a regional planning leader as area grows; as wholistic decision-making agency

Goal | Strategies



GOAL 3 Define and Address Regional Transportation Needs

- 3.1 Analyze travel patterns and regional demographics to better understand gaps in service areas
- 3.2 Further identify public transportation infrastructure needs for in rural areas (i.e. bus shelters, ramps, bike racks, etc.)
- 3.3 Expand affordable and/or free transit fare programs for qualifying populations; however, analyze if, by providing free fares, they are to places where people need to go
- 3.4 Collaborate with providers and local transportation/mobility programs to survey major employers and workforce development and transportation demand management (TDM) programs to determine shift times and how employees access work
- 3.5 Develop commuter travel shed data (How can RTCC show gaps visually for different audiences?)
- 3.6 Encourage work placement organizations to coordinate and promote car and vanpooling in transit deserts
- 3.7 Driver training and retention program development



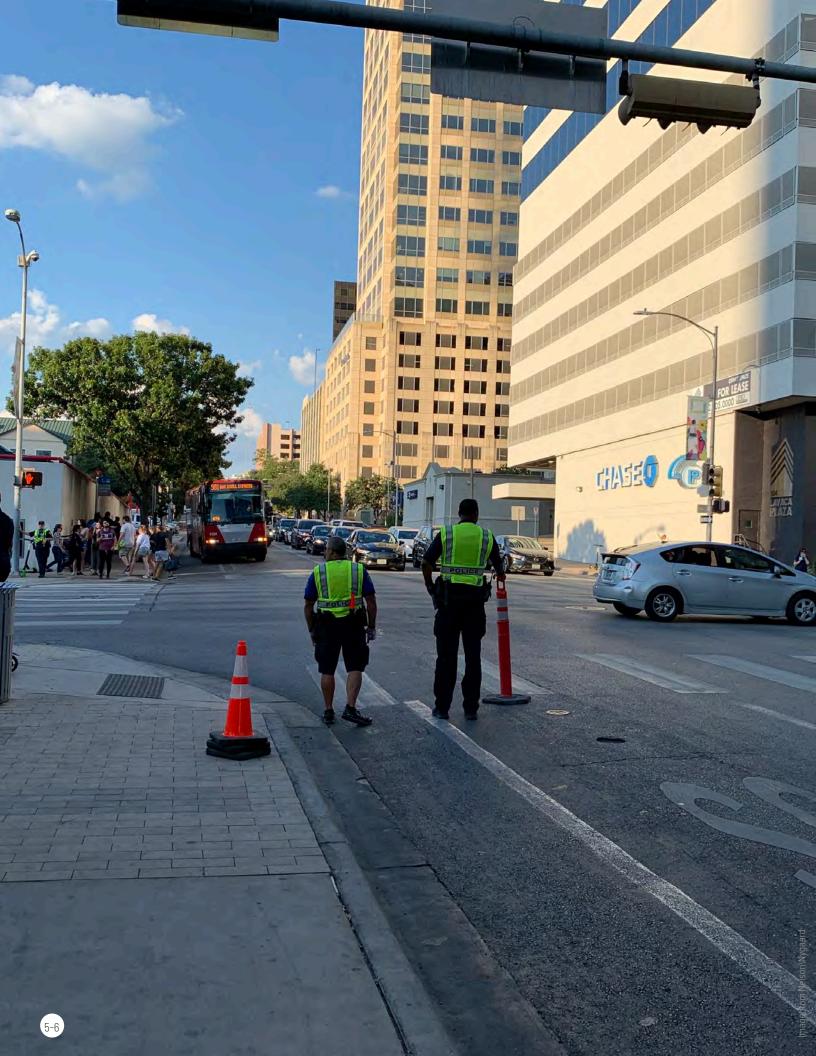
Support Ongoing Coordination, Collaboration, & Partnerships

- 4.1 Strengthen volunteer driver program & development/growth of volunteer network
- 4.2 Develop regional data management plan for consistent data collection, management, and reporting, including regular timelines for reporting data; and the development of a transportation database
- 4.3 Support, current microtransit programming for Metro Pickup and CARTS Now service pilots, encouraging expansion where applicable
- 4.4 Reinstate RTCC working groups for implementation of Regional Coordinated Plan
- 4.5 Travel training program
- 4.6 Bus "buddy" network developed as a pilot
- 4.7 Potential partnerships for those non-profits who may need support with vehicle maintenance
- 4.8 Partnerships and/or support for administrative staff shortages



Enhance Access to Healthcare and Human Services

- 5.1 Need to better coordinate with dialysis centers and other critical services (such as mental health facilities); taking employees who work at centers to work in emergency situations; MPO to map dialysis centers, medical & health facilities, etc.
- 5.2 Transit ready development guidance for new builds or developments that would not otherwise have access to public transportation
- 5.3 Support access to food pantries, libraries, and other existing community services by hosting informational webinars, meetings, and leave-behind materials informing the public how to use various forms of transit
- 5.4 Increase communication between HHS and transportation coordinators as well as workforce development (work on no-shows for both healthcare and transportation)
- 5.5 Work with Veterans Services and the Veterans Administration directly to ensure consistent access to services for the Veteran populations
- 5.6 Create emergency management plan for the region; participate in an emergency management planning process





6

Strategy Prioritization and Plan Implementation

With strategies developed, where and how should we focus our resources? This chapter explains how we've prioritized strategies, and what this means for implementation.

Chapter 6 includes two sections:

- Strategy Prioritization. This section explains the strategy prioritization process and presents the results of that process.
- Plan Implementation. This section provides implementation information for each strategy, including proposed timeline, priority level, and proposed roles.

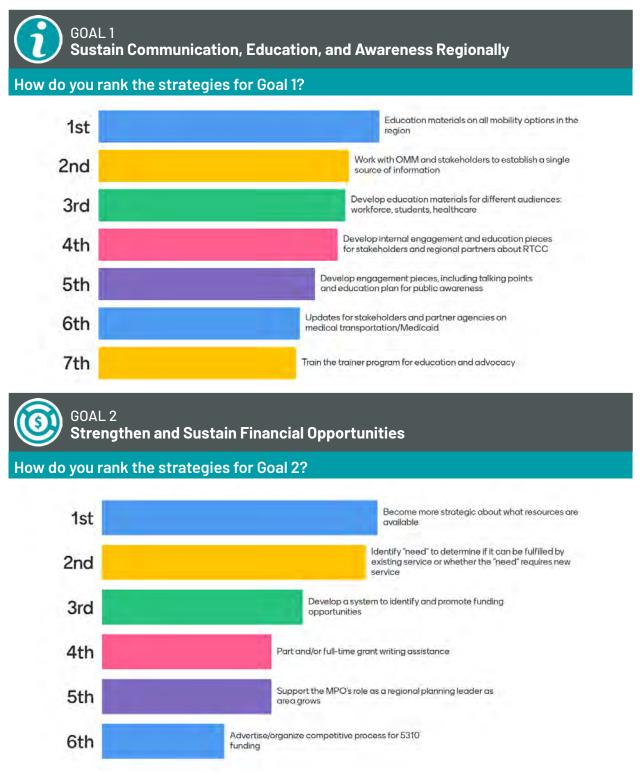
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STRATEGY PRIORITIZATION

For each goal, RTCC ranked strategies from highest to lowest priority during a January 2022 workshop. This exercise helped the project team assign timelines and potential funding sources to strategies (see the Plan Implementation section on p. 6-5).

A higher-ranking strategy is where RTCC intends to focus early efforts during implementation. Meanwhile, a lower ranking strategy does not mean that it is less important—simply that it may not be an early focus during implementation.

The results of the ranking exercise are available below.

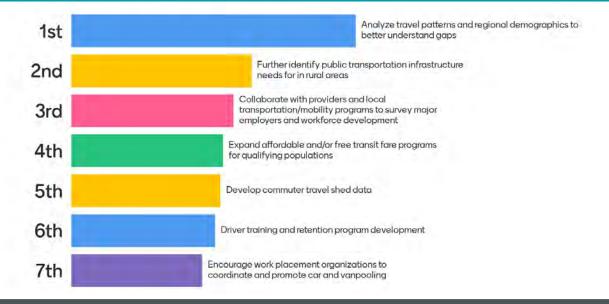




GOAL 3

Define and Address Regional Transportation Needs

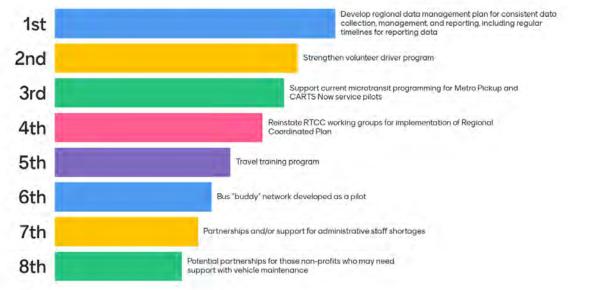
How do you rank the strategies for Goal 3?

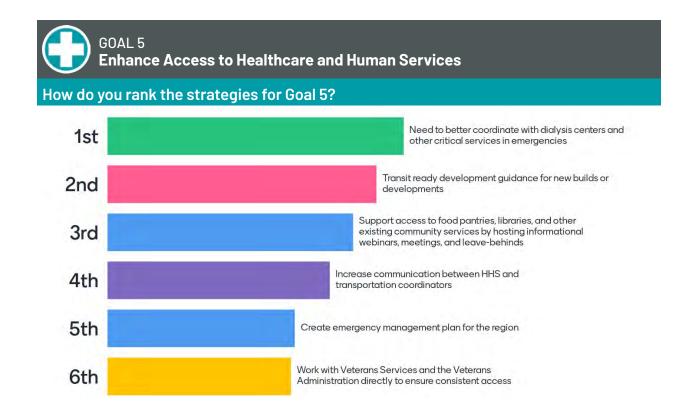


GOAL 4

Support Ongoing Coordination, Collaboration, & Partnerships

How do you rank the strategies for Goal 4?









PLAN IMPLEMENTATION

The project team used the strategy rankings to create an implementation plan. The implementation plan presents each strategy along with its goal, proposed timeline, priority level, and roles (proposed lead and support organizations).

Strategies listed in the top two spaces are high priority. Strategies in the third and fourth spaces are medium priority. Strategies in the fifth space and lower are low priority.

In terms of roles, the project team worked with RTCC to discuss lead and support organizations. Some volunteered to lead strategy implementation, while others offered general support.¹

Goal Strategies	Timeline	Priority	Lead Organization(s)	Support Organization(s)	
GOAL 1 Sustain Communication, Education, and Awareness Regionally					
1.1 Education materials on all mobility options in the region—not just public transportation	1 year or less	High	Movability	Senior Access, OMM	
1.2 Work with OMM and stakeholders to establish a single source of information for transportation and mobility	2-3 years	High	Movability	Senior Access, OMM	
1.2 Develop internal engagement and education pieces for stakeholders and regional partners about RTCC, the purpose, and what has been achieved over the last 15 years	1-2 years	Medium	TBD	CAMPO	
1.3 Develop education materials for different audiences: workforce, students, healthcare	1-2 years	Medium	TBD	Movability, CAMPO	
1.4 Develop engagement pieces, including talking points and education plan for public awareness of local/regional services	1-2 years	Low	TBD	Drive a Senior- ATX, Movability, CAMPO, Travis County	
1.5 Train the trainer program for education and advocacy re: available services; connecting to human services	1-2 years	Low	TBD	TBD	
1.6 Updates for stakeholders and partner agencies on medical transportation/Medicaid.	1 year or less	Low	CARTS	OMM	

¹ Organizations are also listed in a working document on the shared drive for CAMPO to continue to use for tracking and amendment purposes.

Goal Strategies	Timeline	Priority	Lead Organization(s)	Support Organization(s)	
GOAL 2 Strengthen and Sustain Financial Opportunities					
2.1 Identify "need" to determine if it can be fulfilled by existing service or whether the "need" requires new service through 5310 funding	2-3 years	High	CAMPO	Farm&City	
2.2 Become more strategic about what resources are available—what needs exist and whether the region is being strategic with the resources that exist	2-3 years	High	CAMPO	Farm&City	
2.3 Develop a system to identify and promote funding opportunities for regional providers and programs	2-3 years	Medium	CAMPO	TBD	
2.4 Part and/or full-time grant writing assistance	3-4 years	Medium	CAMPO	TBD	
2.5 Advertise/organize competitive process for 5310 funding; examine how 5310 grant process is conducted	1-2 years	Low	CAMPO	TBD	
2.6 Support the MPO's role as a regional planning leader as area grows; as wholistic decision- making agency	3-4 years	Low	CAMPO	Movability, Farm&City	
GOAL 3 Define and Address Regional Tra	nsportati	on Needs			
3.1 Analyze travel patterns and regional demographics to better understand gaps in service areas	2-3 years	High	CAMPO	Movability, Farm&City, Travis County	
3.2 Further identify public transportation infrastructure needs for in rural areas (i.e. bus shelters, ramps, bike racks, etc.)	3-5 years	High	CARTS	Farm&City	
3.3 Expand affordable and/or free transit fare programs for qualifying populations; however, analyze if, by providing free fares, they are to places where people need to go	3-5 years	Medium	OMM, CAPCOG	Movability	
3.4 Collaborate with providers and local transportation/mobility programs to survey major employers and workforce development and transportation demand management (TDM) programs to determine shift times and how employees access work	2-3 years	Medium	Movability	Senior Access	
3.5 Develop commuter travel shed data (How can RTCC show gaps visually for different audiences?)	3-5 years	Low	CAMPO	Movability, Farm&City, Travis County	
3.6 Encourage work placement organizations to coordinate and promote car and vanpooling in transit deserts	3-5 years	Low	Movability	TBD	
3.7 Driver training and retention program development	2-3 years	Low	TBD	TBD	

Goal Strategies	Timeline	Priority	Lead Organization(s)	Support Organization(s)
GOAL 4 Support Ongoing Coordination, C	tnerships			
4.1 Strengthen volunteer driver program & development/growth of volunteer network	3-4 years	High	Senior Access, CAPCOG	Drive a Senior- ATX
4.2 Develop regional data management plan for consistent data collection, management, and reporting, including regular timelines for reporting data; and the development of a transportation database	3-5 years	High	Movability, CAMPO	CapMetro
4.3 Support, current microtransit programming for Metro Pickup and CARTS Now service pilots, encouraging expansion where applicable	2-4 years	Medium	CapMetro Demand Response	Movability, Travis County
4.4 Reinstate RTCC working groups for implementation of Regional Coordinated Plan	Less than 1 year	Medium	CAMPO	Senior Access, CAPCOG
4.5 Travel training program	3-4 years	Low	CapMetro	TBD
4.6 Bus "buddy" network developed as a pilot	2-3 years	Low	TBD	TBD
4.7 Potential partnerships for those non-profits who may need support with vehicle maintenance	3-5 years	Low	TBD	Senior Access
4.8 Partnerships and/or support for administrative staff shortages	3-5 years	Low	TBD	TBD
GOAL 5 Enhance Access to Healthcare a	nd Human	Services	1	
5.1 Need to better coordinate with dialysis centers and other critical services (such as mental health facilities); taking employees who work at centers to work in emergency situations; MPO to map dialysis centers, medical & health facilities, etc.	2-3 years	High	CapMetro Demand Response	CAMPO, CAPCOG
5.2 Transit ready development guidance for new builds or developments that would not otherwise have access to public transportation	1-2 years	High	TBD	Movability, Farm&City
5.3 Support access to food pantries, libraries, and other existing community services by hosting informational webinars, meetings, and leave- behind materials informing the public how to use various forms of transit	1-2 years	Medium	OMM	Senior Access, CAMPO; Travis County
5.4 Increase communication between HHS and transportation coordinators as well as workforce development (work on no-shows for both healthcare and transportation)	4-5 years	Medium	TBD	Movability, CAMPO, CAPCOG
5.5 Work with Veterans Services and the Veterans Administration directly to ensure consistent access to services for the Veteran populations	3-5 years	Low	TBD	TBD
5.6 Create emergency management plan for the region; participate in an emergency management planning process	1-3 years	Low	CapMetro	Drive a Senior- ATX, CAPCOG





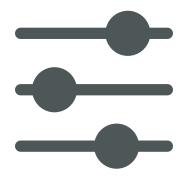
7

Performance Measures and Funding Sources

How can we implement our priority strategies, and check whether they're achieving the goals of this Coordinated Plan? The answer involves both funding sources and performance measures.

This chapter explains why and how to measure performance, as well as potential funding sources. It contains the following sections:

- **Purpose of Performance Measurement.** This section explains the importance of performance measurement ("why").
- Sample Performance Measures. This section proposes sample measures for reporting on strategy implementation ("how").
- **Potential Funding Sources.** This section is a list of possible funding sources from federal, state, local, and other levels.
- **Potential Funding Streams.** This section presents possible funding sources for each goal of the Coordinated Plan.





PURPOSE OF PERFORMANCE MEASUREMENT

For each strategy, lead organizations—with assistance from support organizations—must measure performance, to determine whether they're accomplishing the intended goals of the Coordinated Plan.

There are several benefits to measuring performance:

- Investments and outcomes. Is an investment in time, funding, or other resources making an impact on our goals in the way we had anticipated?
- Managerial efficiency. Measuring performance helps managers by informing decision-making.
- Administrative accountability. Measuring performance helps organizations provide accountability and transparency to stakeholders.
- **Consistency.** Consistently measuring performance over time makes comparisons easier and insights clearer.

Quantitative and Qualitative Measures

There are two main types of performance measures: quantitative and qualitative.

Quantitative measures can be quantified and are typically measured using a number. They are often but not always relatively objective.

Qualitative measures describe quality. They are often but not always relatively subjective. Qualitative measures can be more difficult to gather, analyze, and interpret than quantitative measures.

Coordinated plans depend on both qualitative and quantitative measures to determine whether strategies are achieving their intended goals.

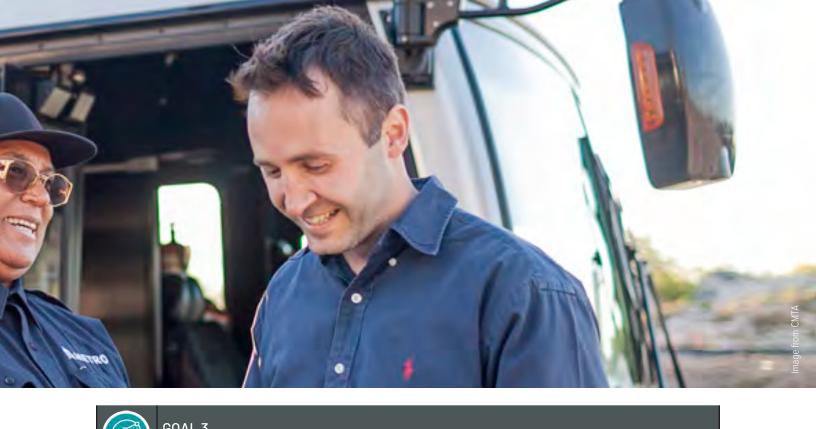
SAMPLE PERFORMANCE MEASURES

This section provides the initial recommended performance measures for each strategy. It is important to note that as the region moves forward with strategy implementation, this plan may be amended to reflect updated measures as are appropriate for various implementation stages. These recommended measures will help RTCC establish a baseline and measure the performance of strategies. However, they can be modified or tailored to the effort as needed.

GOAL 1 Sustain Communicatio	on, Education, and Awareness Regionally
Strategy	Qualitative/Quantitative Performance Measure(s)
1.1 Education materials on all mobility options in the region—not just public transportation	 RTCC to work with OMM to develop travel guide on all mobility options; guide developed in English and Spanish; distributed electronically Number of agencies/outlets electronic guide distributed to; number of individuals on blast lists
1.2 Work with OMM and stakeholders to establish a single source of information for transportation and mobility	 Develop "mobility options" website (whether housed within OMM or separately) with regularly updated transportation information Number of individual hits on website to access information Number of external stakeholders' website/single source distributed to Stories collected from individuals accessing the site; impacts info has on quality of life (applicable to all items throughout this Goal)
1.3 Develop internal engagement and education pieces for stakeholders and regional partners about RTCC, the purpose, and what has been achieved over the last 15 years	 RTCC timeline developed; number of stakeholders educated on the purpose/Vision/Mission of the RTCC through internal survey Stakeholder engagement plan developed in year 1 in conjunction with above engagement plan Annual update provided to boards regarding coordination progress
1.4 Develop education materials for different audiences: workforce, students, healthcare	 Within the education plan, RTCC develops specific engagement materials for workforce, students, and healthcare audiences, gauge education through surveys Distribution of materials at strategic events: forums, workshops, and other conferences for the specific audience(s)
1.5 Develop engagement pieces, including talking points and education plan for public awareness of local/regional services	 Engagement materials developed in year 1 with new branding Education/engagement plan developed with specific outreach in years 1-2; 3-5 Number of engagement events held in English/Spanish
1.6 Train the trainer program for education and advocacy re: available services; connecting to human services	 Train the trainer program developed in year 1 Number of RTCC members and stakeholders participating in training program Number of human service providers participating in training program Survey to determine public information knowledge once program is complete
1.7 Updates for stakeholders and partner agencies on medical transportation/Medicaid.	 RTCC develops informational one-pager on how medical transportation works with/impacts regional transportation providers, how medical transportation is funded, etc. Number of stakeholders educated on the impacts of medical transportation



GOAL 2 Strengthen and Susta	in Financial Opportunities
Strategy	Qualitative/Quantitative Performance Measure(s)
2.1 Identify "need" to determine if it can be fulfilled by existing service or whether the "need" requires new service through 5310 funding	 Conduct detailed needs assessment with 5310 grant funding requests Number of new services developed through 5310 awards (neutral for baseline) Number of projects that can be fulfilled with current services in operation Number of joint projects developed through shared 5310 funding requests
2.2 Become more strategic about what resources are available—what needs exist and whether the region is being strategic with the resources that exist	 Conduct detailed resource analysis (number of spare vehicles, for example) Detailed analysis of gaps within current service areas; number of gaps/ needs met through current service available Transportation funding saved by using current resources to address needs
2.3 Develop a system to identify and promote funding opportunities for regional providers and programs	 Provide RTCC membership information on grant opportunities at regular check-in meetings; number of stakeholders provided with funding opportunities Number of providers applying for funding because of learning about opportunities
2.4 Part and/or full-time grant writing assistance	 Overall grant funding awarded to agencies in the region as a result of support and assistance Number of new grant proposals being entered because of receiving assistance
2.5 Advertise/organize competitive process for 5310 funding; examine how 5310 grant process is conducted	 Develop stakeholder informational packets on timing of 5310 call for projects, how to apply, and materials needed Number of potential grantees information distributed to RTCC representation on 5310 selection committee
2.6 Support the MPO's role as a regional planning leader as area grows; as wholistic decision-making agency	 Transportation providers work closely with CAMPO on regional coordination planning



C	GOAL 3 Define and Address Regional Transportation Needs					
Str	ategy	Qualitative/Quantitative Performance Measure(s)				
3.1	Analyze travel patterns and regional demographics to better understand gaps in service areas	 Number of gaps identified by travel analysis Number of gaps addressed Target demographics whose needs are addressed (determined through surveys) 				
3.2	Further identify public transportation infrastructure needs for in rural areas (i.e., bus shelters, ramps, bike racks, etc.)	 Conduct inventory current rural infrastructure Survey to determine areas of most need for shelters, ramps, lighting, bike racks, etc. 				
3.3	Expand affordable and/or free transit fare programs for qualifying populations; however, analyze if, by providing free fares, they are to places where people need to go	 Develop analysis (whether based on commuter shed, above, or reverse commute patterns) to determine where marginalized populations need to go Utilize analysis to offer/expand affordable transit programs; measure through surveys—number of individuals receiving support to get where they need to go 				
3.4	Collaborate with providers and local transportation/mobility programs to survey major employers and workforce development and transportation demand management (TDM) programs to determine shift times and how employees access work	 Number of mobility programs and providers involved in survey development and distribution Number of surveys received Stories/anecdotes received from both employers and their employees on how they are utilizing TDM and the impact it has made on quality of life 				
3.5	Develop commuter travel shed data (How can RTCC show gaps visually for different audiences?)	 Develop commuter travel shed depicting travel patterns Number of marginalized households newly served by transportation services through travel shed data 				
3.6	Encourage work placement organizations to coordinate and promote car and vanpooling in transit deserts	 Number of organizations involved in promotions Number of carpools/vanpools developed 				
3.7	Driver training and retention program development	 Number of drivers who go through training program Percentage of drivers retained through 2 years, 5 years, etc. 				



	Support Ongoing Coordination, Collaboration, & Partnerships					
Strategy	Qualitative/Quantitative Performance Measure(s)					
4.1 Strengthen volunteer driver program & development/growth of volunteer network	 Number of volunteer drivers Percent growth of volunteer program annually Utilization tracking of volunteer driver program 					
4.2 Develop regional data management plan for consistent data collection, management, and reporting, including regular timelines for reporting data; and the development of a transportation database	 Regional data management plan developed; will include the strategies outlined in this plan, who is collecting the data (lead agency), frequency the data is collected, as well as reporting timelines (% plan implemented, number of strategies RTCC working on that year, etc.) Transportation database developed with quarterly reporting 					
4.3 Support current microtransit programming for Metro Pickup and CARTS Now service pilots, encouraging expansion where applicable	 Growth of microtransit pilots (percent coverage in areas not currently a part of service area) Number of passengers utilizing microtransit; new pilots 					
4.4 Reinstate RTCC working groups for implementation of Regional Coordinated Plan	 Working group formation/number of working groups formed Number of priority strategies addressed by working group(s) 					
4.5 Travel training program	 Number of participants utilizing travel training program 					
4.6 Bus "buddy" network developed as a pilot	 Number of "buddies" volunteering through the network Number of customers using bus buddy network Percent of riders retained through bus buddy network 					
4.7 Potential partnerships for those non-profits who may need support with vehicle maintenance	 Number of partnerships formed Vehicles serviced through partnerships; % of fleet(s) receiving service through partnership agreements 					
4.8 Partnerships and/or support for administrative staff shortages	MOUs created to partner on administrative staff sharingNumber of staff positions filled through partnerships					



GOAL 5 Enhance Access to Healthcare and Human Services

Strategy	Qualitative/Quantitative Performance Measure(s)			
5.1 Need to better coordinate with dialysis centers and other critical services (such as mental health facilities); taking employees who work at centers to work in emergency situations; MPO to map dialysis centers, medical & health facilities, etc.	 Develop plan for serving and coordinating with dialysis centers (passenger and employee transport, mapping centers, labeling priority centers) Number of facilities open during emergency situations due to transportation availability Decreased number of emergency room visits for those individuals who were able to receive transportation to medical appointments 			
5.2 Transit ready development guidance for new builds or developments that would not otherwise have access to public transportation	 Update transportation ready development guide (original created by CapMetro) Number of development firms educated on needs for public transit and how to coordinate with public transportation agencies 			
5.3 Support access to food pantries, libraries, and other existing community services by hosting informational webinars, meetings, and leave-behind materials informing the public how to use various forms of transit	 Number of outlets materials distributed to; percent of coverage at food pantries Attendees at webinars and meetings Number of new riders through the distribution of materials (measured through customer surveys) 			
5.4 Increase communication between HHS and transportation coordinators as well as workforce development (work on no-shows for both healthcare and transportation)	 Overall number of no-shows (work to reduce) Percent reduction in no-shows ROI for individual agencies from the reduction of no-shows 			
5.5 Work with Veterans Services and the Veterans Administration directly to ensure consistent access to services for the Veteran populations	 Number of veterans service organizations met with Number of new Veterans served by transportation services Anecdotal quotes and stories of Veterans who have benefitted from transportation services 			
5.6 Create emergency management plan for the region; participate in an emergency management planning process	 Number of regional transportation providers participating in emergency management planning process 			



MEASURING PERFORMANCE

As the lead agency for coordinated planning, CAMPO will ultimately be responsible for tracking and measuring the performance of strategy implementation. However, we should note that CAMPO is not necessarily the lead agency for the implementation of every strategy. As such, we recommend a consistent reporting and tracking matrix so that all agencies involved are using a consistent guide. Once the coordinated plan is adopted, the RTCC will continue to meet on a quarterly basis while establishing working groups for various implementation projects based on strategy prioritization. A sample tracking table is depicted following this paragraph, and we recommend that the RTCC and the working groups for strategy implementation report out using the tracking table on a quarterly basis, to align with TxDOT's quarterly progress index. The original reporting template may be found in Appendix E.

Sample Tracking Matrix

Goal	Strategy	Priority	Time	Lead	Measure	Status	Updates
1	Train the Trainer Program	High	6 months	OMM	# of individuals trained	In progress	Developed framework
4	RTCC Working Group Development	High	3 months	CAMPO	Working groups formed	Complete	Formed 5 working groups



POTENTIAL FUNDING SOURCES

Federal Transportation Funding

On March 15th, 2022, President Joe Biden signed into law a \$1.5 trillion spending bill to fund the federal government for the remainder of fiscal year 2022 ending September 30. The following information is from the National Conference on State Legislatures, outlining the amounts appropriated for transportation programs:

- Just over \$100 billion for federal transportation programs—a total of \$140 billion, a 60% increase, when adding the FY 2022 appropriation provisions are contained within the Infrastructure Investment and Jobs Act.
- \$61 billion for federal highway investments, along with \$9.5 billion from the

State Transportation Funding

The Public Transportation Division (PTN) of the Texas Department of Transportation (TxDOT) administers funding to transit providers operating within the legal requirements of the FTA. TxDOT aligns their funding allocations with the preparation of the Statewide Transportation Improvement Program (STIP), which includes Transportation Improvement Programs (TIPs) that are approved by metropolitan planning organizations. **infrastructure bill** for an FY 2022 total of \$70.5 billion, a 44% increase over 2021.

• \$16.3 billion for public transit, an increase of \$3.3 billion from FY 2021; when combined with the infrastructure bill, public transit funding totals \$20.5 billion in FY 2022, an increase of \$7.6 billion (58%).

The Federal Transportation Administration (FTA) has previously allocated formula funding to public transportation planning, service, and operations, and the above referenced amounts may be used for the same categories The State Transportation Funding section below explains some of these FTA funds, which states are responsible for allocating.

TxDOT provides the following federal formula definitions:

• FTA Section 5303: Funds authorized annually for planning and administrative activities by metropolitan planning organizations (MPOs). Each MPO receives federal gas taxes based on a minimum share, plus adjustments for population and air quality. Example uses: regional transportation plan preparation, transit planning, public participation planning.

- FTA Section 5304: Similar to Section 5303, these funds may be used for multimodal transportation planning in metropolitan areas. Plans should result in investment priorities for the given area and may be either short or long range.
- FTA Section 5307: Mass transit apportionment to urbanized areas based on population, population density, and operating performance. The department has authority over the distribution of funds to urbanized areas with a population of less than 200,000. TxDOT will limit annual project allocations to stay within the FTA apportionment.
- FTA Section 5309: Mass transit discretionary funds for capital projects only. The presence of an identifier number in the project description indicates the transit agency has received the funds requested. Otherwise, the numbers shown in each fiscal year simply reflect needs perceived by the requesting agencies and operators. Funding for the following formula programs (Section 5310 and 5311) is constrained to the Federal Transit Administration's published estimates of future funding levels.
- FTA Section 5310: Federal funds to public and private nonprofit entities for the transportation of elderly individuals and/ or individuals with disabilities. Grants are for capital equipment, preventive maintenance, and purchase of service only.
- FTA Section 5311: Funds for Rural Transit Programs. Thirty-nine entities in the state provide service in non-urbanized (rural) areas.

Local Funding

Local funding is an important supplement to urban and rural providers—and is also helpful for securing federal funding. Rural transit agencies have limited to no access to local funding sources and minimal opportunities to create such funding sources that would assist with local match for state and federal formula funding. A primary funding source for local match is Medicaid, provided for trips contracted through the statewide brokerage operated under contract by private transportation providers. Local funding may also come from grant opportunities, as well as entities that contribute in-kind services. Agencies like CapMetro receive sales tax revenue to help offset operating costs. In other areas, local funding may come from cities, counties, or public-private partnerships. No matter where the funds come from, local funding is critical to supplement both federal and state funds and is critical to the success of plan implementation.

Other Funding Sources

Other funding sources are available for transportation planning and services targeting marginalized populations. Two important sources are the National Aging and Disability Transportation Center (NADTC) and the National Center for Mobility Management (NCMM).

NADTC Funding and Community Grants

NADTC issues annual RFPs for a variety of transportation grants for older adults and individuals with disabilities. In 2021, NADTC announced a new funding opportunity, Equity and Accessibility: Transportation Planning Grant Program. Each year, NADTC typically announces grant opportunities in late Spring and awards them in August or September.

NADTC also offers community grants for assessing transportation needs. Community grants can fund new models to increase accessible transportation services for older adults and individuals with disabilities. They may supplement Section 5310 funds (Enhanced Mobility of Seniors and Individuals with Disabilities).

National Center for Mobility Management

NCMM—located at the Community Transportation Associate of America (CTAA) gets its funding from the FTA. It operates as a national technical assistance center and provides grant opportunities to support partnerships. NCMM has provided community planning grants to advance the goals of the Transit and Health Access Initiative.

POTENTIAL FUNDING STREAMS

The table below—organized by Coordinated Plan goals—highlights some proposed funding streams for strategy implementation. The list is not comprehensive, and is subject to change based on new funding allocations.

Funding opportunities not described above may also be potential sources. For example, funds for emergency planning and preparedness may be available for Goal 5.

Sustai Educa	GOAL 1 Sustain Communication, Education, and Awareness Regionally				
Potential Funding Sources	 In-kind agency assistance 5310 funding NCMM Grants 				
GOAL 2 Streng Oppor	2 gthen and Sustain Financial tunities				
Potential Funding Sources					
	and Address Regional portation Needs				
Potential Funding Sources					
GOAL 4 Suppo Collab	, ort Ongoing Coordination, oration, & Partnerships				
Potential Funding Sources	 5307 funding NADTC planning assistance NCMM community grants 				
	ce Access to Healthcare uman Services				
Potential Funding Sources	 NADTC planning assistance 5310 funding Emergency management funding (ARPA, etc.) 				







8

Looking Ahead

This chapter looks ahead to key considerations that will likely have an impact on this Coordinated Plan in the future.

Chapter 8 focuses on four considerations:

- Service Expansion Planning. How will population growth affect CapMetro's service planning, and in turn the strategies in this Coordinated Plan?
- Annual Reporting on the Coordinated Plan. How can RTCC provide more regular updates on Coordinated Plan progress?
- Medical Transportation. How might changes to funding for non-emergency medical trips affect this Coordinated Plan?
- Lead Agencies for Implementation. Who will report on progress for the strategies?



SERVICE EXPANSION PLANNING

Consider service expansion planning as strategy implementation moves forward.

CapMetro's Board of Directors adopted a Service Expansion Policy in June 2008 and revised in April 2014 to provide new or expanded transit service to jurisdictions within the urbanized area that are not currently served by CapMetro. The Service Expansion Policy is an implementation project from the 2005 Coordinated Plan for the Capital Area region.

The Policy stated that CapMetro may provide transit services to a community that is not currently a member if the requesting local government fully covered the cost of the new service. The purpose of the Policy was to help Capital Metro calculate the proposed costs of providing transit service to non-member communities.

Since 2008, however, several shifts have occurred: two decennial censuses (2010, 2020) and continued rapid growth; changes to formula funding amounts for transit; cities in the region have applied for recipient status; and the pandemic, which has affected not only how individuals use public transit, but where service is needed.

CapMetro's Office of Mobility Management has since taken over the role of using the Policy to



make connections with cities and jurisdictions not currently in the service area. There have been multiple agreements over the years for service provision, with more agreements planned.

The program requires cities to first complete a Transit Development Plan (TDP) to identify transit service needs and assist in developing transit alternatives and financing.

The jurisdictions that have adopted TDPs are the cities of Round Rock, Georgetown, Pflugerville, Hutto, Buda, and Travis County. Four jurisdictions have entered into Interlocal Agreements (ILAs) with CapMetro for service planned through the TDP process. These include the cities of Round Rock, Georgetown, Pflugerville, and Travis County.

ANNUAL REPORTING ON THE COORDINATED PLAN: STATE OF COORDINATION IN THE CAPITAL AREA

Provide regular Coordinated Plan updates to stakeholders.

Regular progress updates on the Coordinated Plan are important for stakeholders, such as boards of directors, city councils, health and human services leadership.

These updates should occur on an annual basis and provide a sort of "state of coordination" report for the Capital Area region. The update can present dashboards showing initial baseline performance metrics for the priority strategies for year one; followed by performance metric reporting each year that follows. This will help keep stakeholders apprised and build rapport.



MEDICAL TRANSPORTATION

Track changes to the Non-Emergency Medical Transportation (NEMT) program.

The Texas Department of Health and Human Services (HHS) coordinates the NEMT program. According to the HHS, the purpose of NEMT is to "provide transportation to the doctor, dentist, hospital, pharmacy, and other places that provide covered health care services for clients who have no other transportation options." The types of rides currently covered under NEMT include:

Types of rides

- Public transportation, like the city bus
- A taxi or van service
- Commercial transit, like a bus or plane, to go to another city for an appointment

Other services

- Money for gas
- Meals and lodging for children and youth 20 and younger staying overnight to get covered health care services
- Payment for some out-of-state travel



Previously, public transit providers bid upon these services. Providers relied on the award of these trips to fulfill local customer needs, and so that the funding received could be used as local match to receive Section 5311 funding, amongst other federal funding sources.

HHS changed the model for trip contracting and delivery several years ago. As such, providers were no longer able to contract out for these trips. In 2019, the Texas state legislature again changed the way NEMT services would be delivered.

In summer 2021, Medicaid clients with a health plan will receive their NEMT services directly from that health plan. Those individuals who do not have health plans are now asked to call a single number to book their medical transportation trips.

Additionally, HHSC and the health plans may now contract with transportation network companies, such as Uber or Lyft to provide NEMT services.

LEAD AGENCIES FOR IMPLEMENTATION

Lead and support organizations will be responsible for measuring performance.

RTCC met in two subsequent workshops in January and February of 2022 to discuss final strategy development and proposed lead organizations for each strategy.

The project team worked with RTCC to create an online matrix for keeping track of the proposed lead and support organizations that would help with strategy implementation. The matrix is a live, working document, so it is not included as a part of this report. RTCC membership will continue to have access to the matrix as they establish implementation working groups. During implementation, lead and support organizations will use the proposed performance measures associated with each strategy—and/or new ones



that emerge—to establish a baseline. The baseline may be as simple as a "yes, this item was completed" or "no, the item was not completed" or may be a number or percentage associated with the strategy itself. At this time, the lead and support agencies will be responsible for measuring performance, with CAMPO oversight for final reporting purposes.





Regionally Coordinated Transportation Plan

Appendices



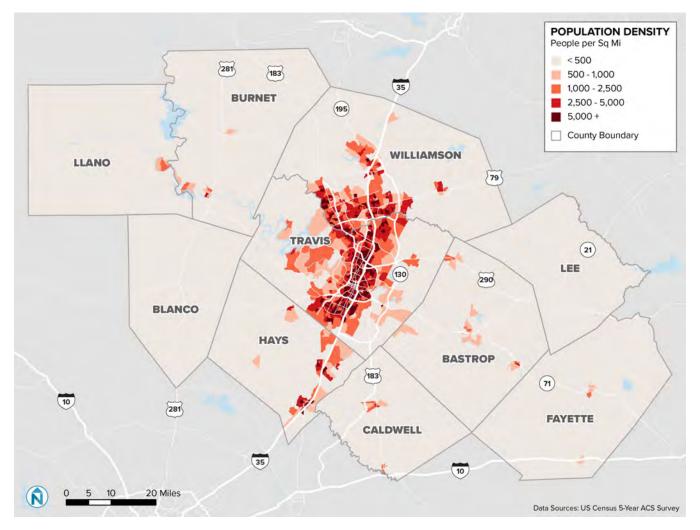
Appendix A: Maps By County Appendix B: Stakeholder Outreach Appendix C: Funding Soures for Public Transportation Appendix D: Plan Review Appendix E: Quarterly Reporting Tool from TxDOT

APRIL 2022

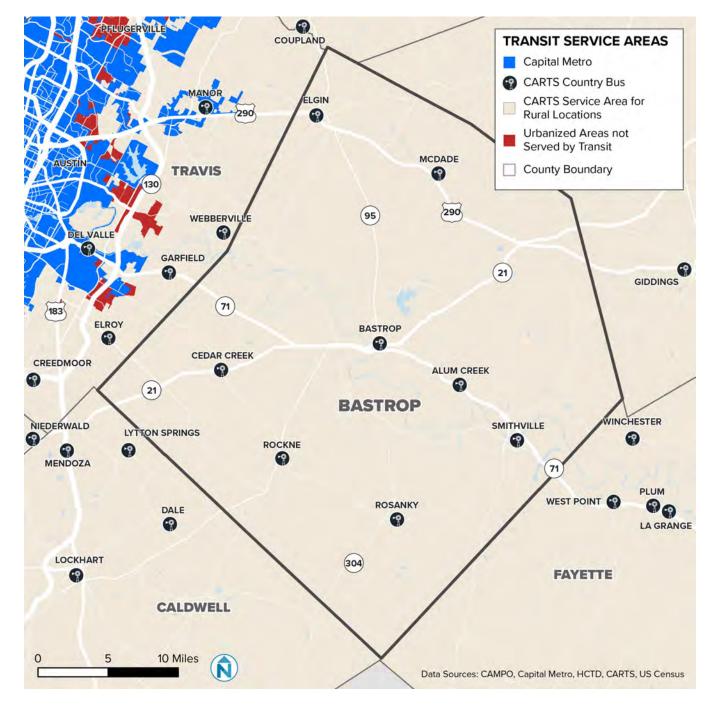
APPENDIX A

MAPS, BY COUNTY

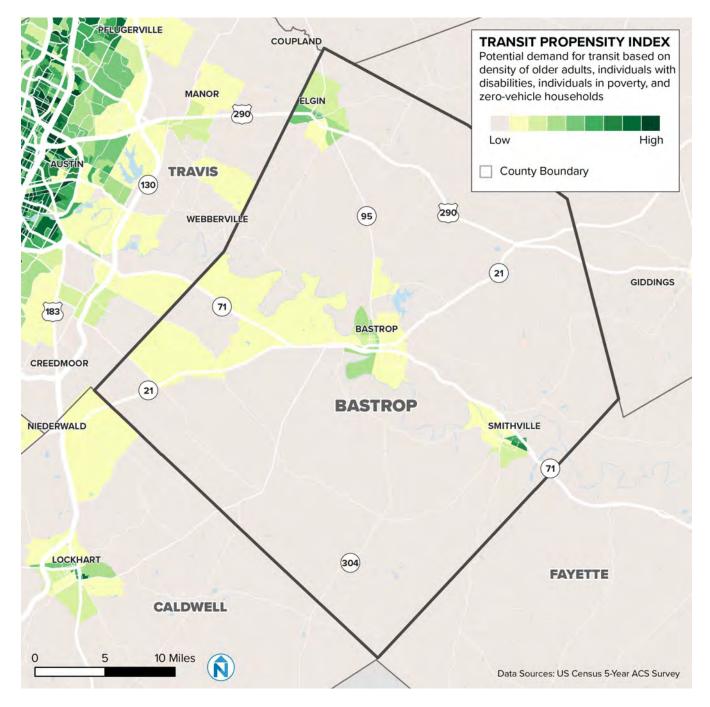




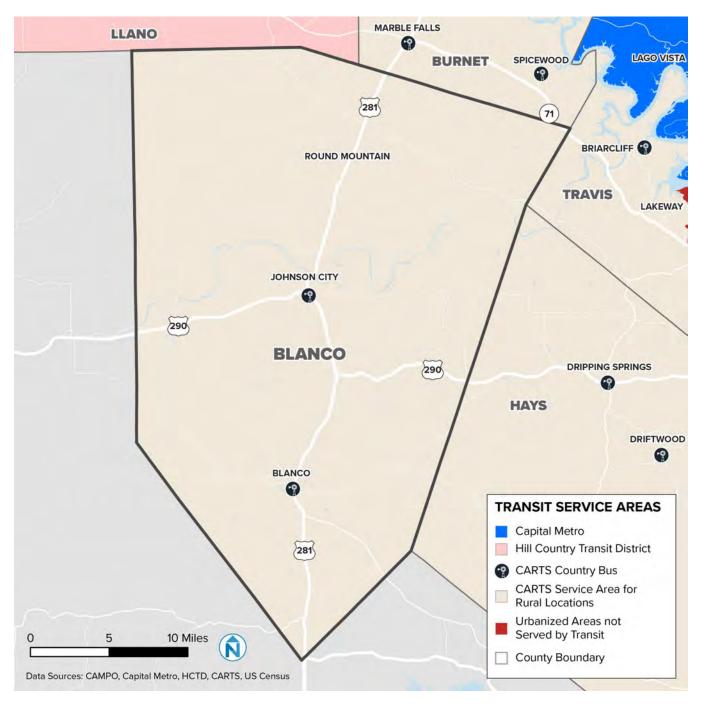
Ten-County Population Density



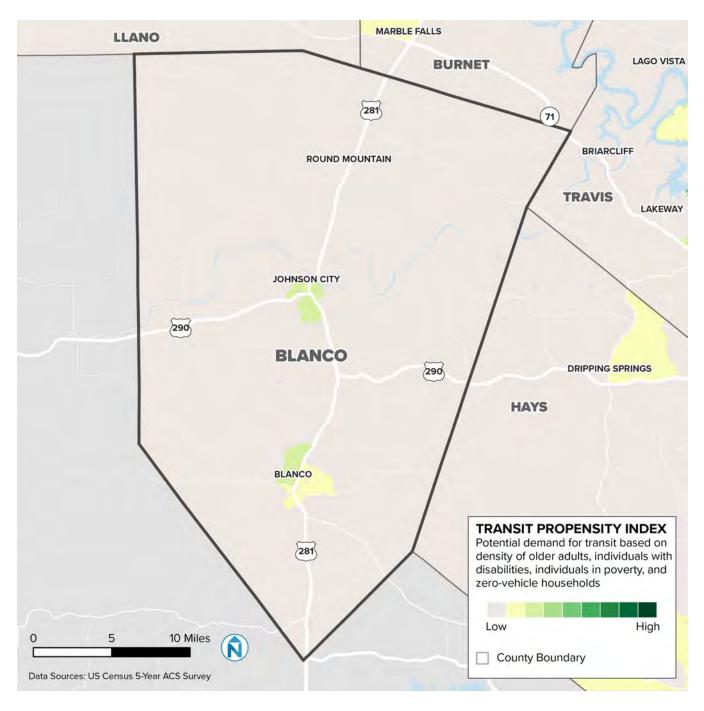
Bastrop County Transit Service Areas



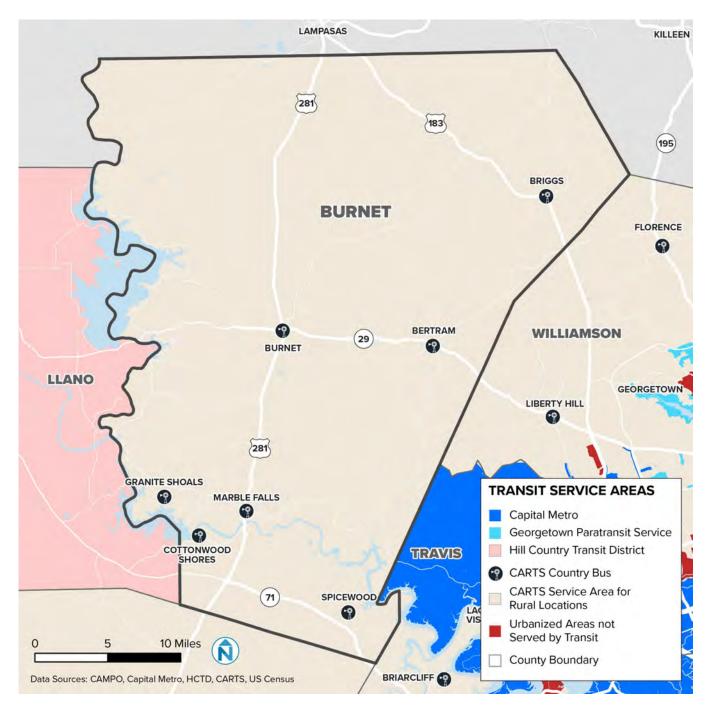
Bastrop County Transit Propensity



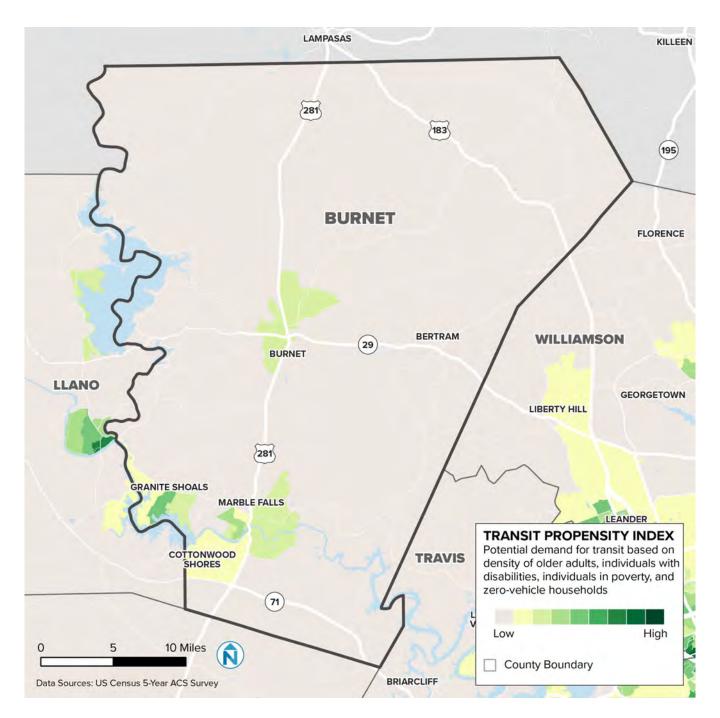
Blanco County Transit Service Areas



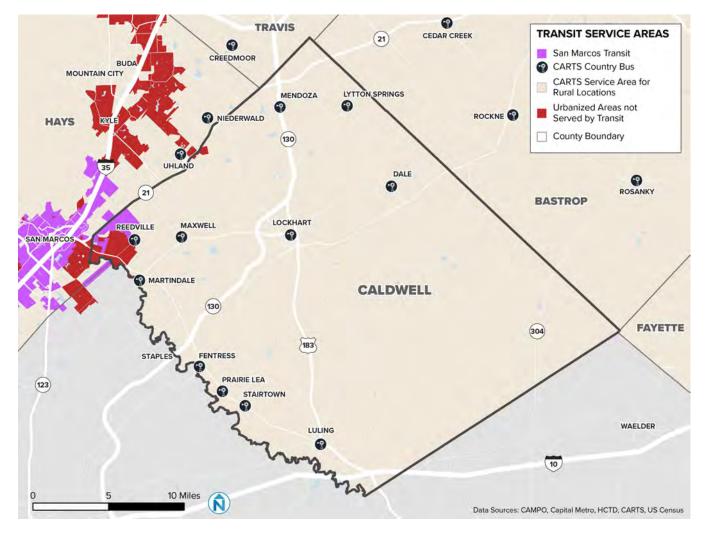
Blanco County Transit Propensity



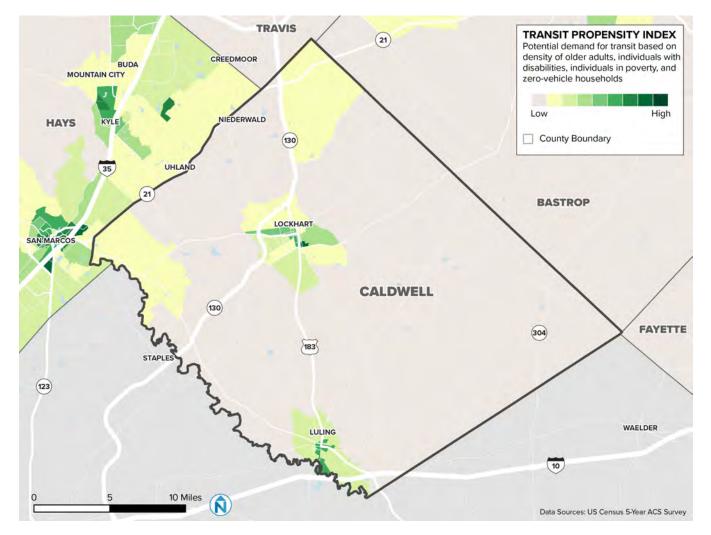
Burnet County Transit Service Areas



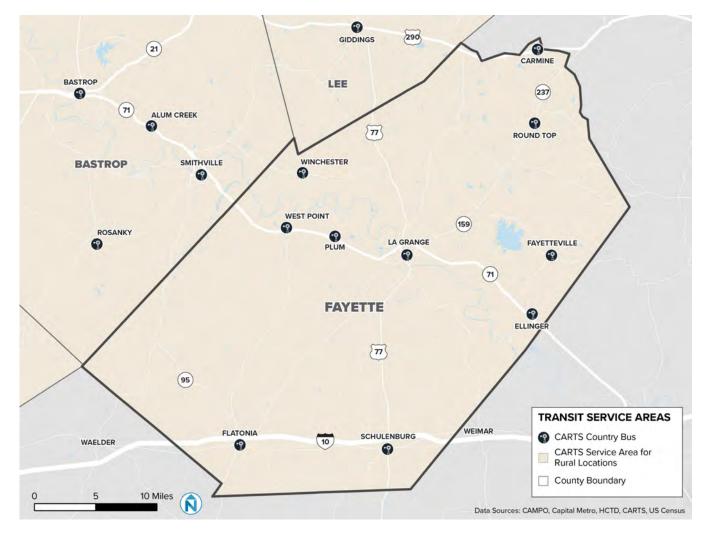
Burnet County Transit Propensity



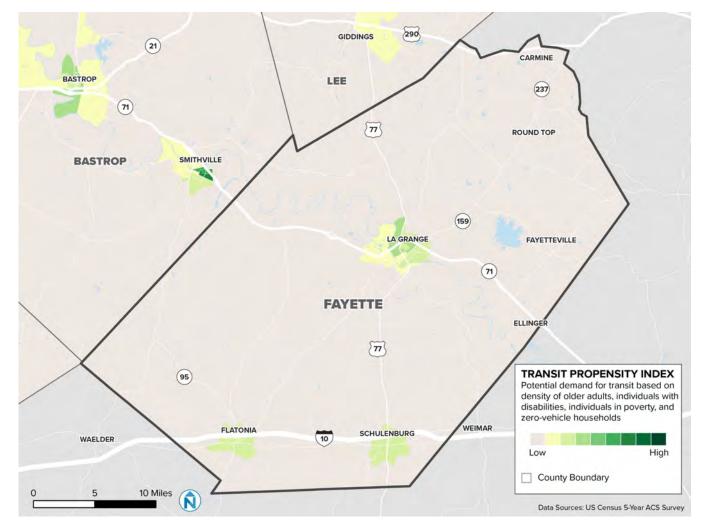
Caldwell County Transit Service Areas



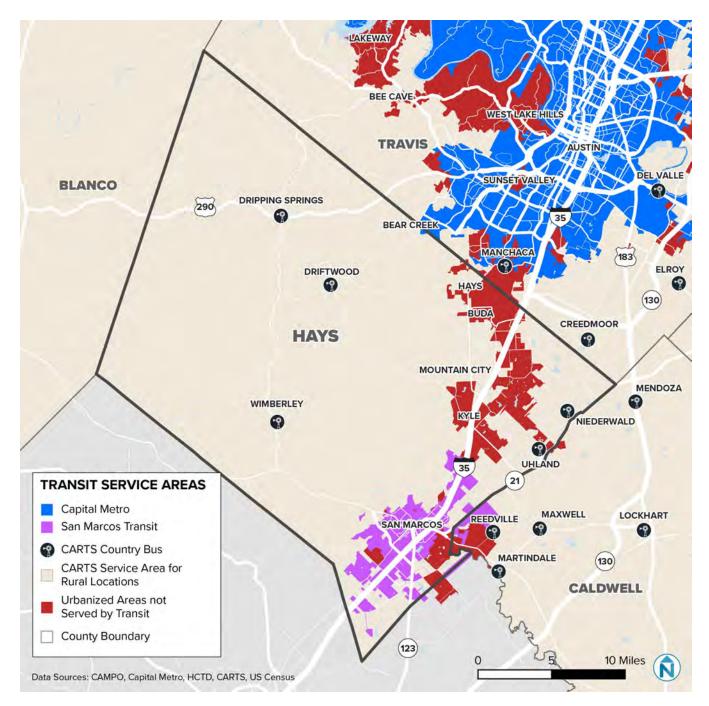
Caldwell County Transit Propensity



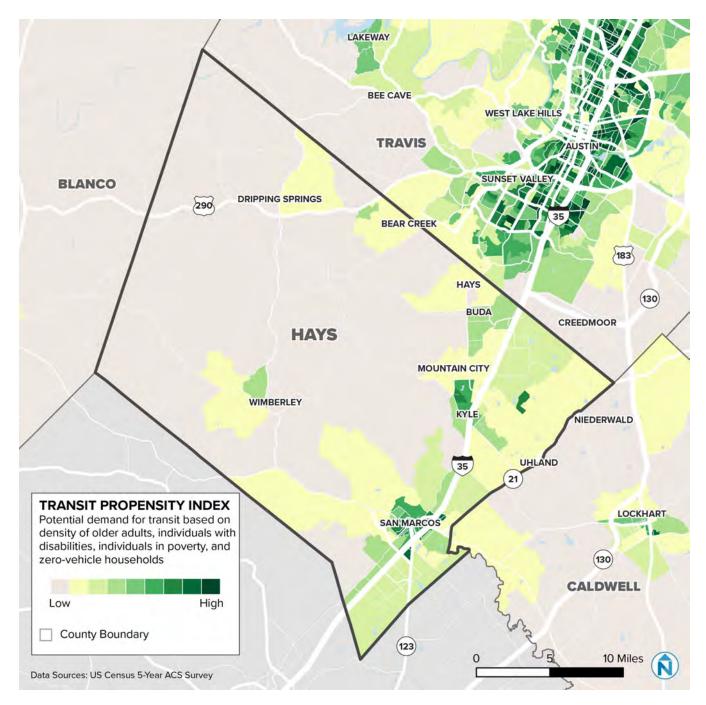
Fayette County Transit Service Areas



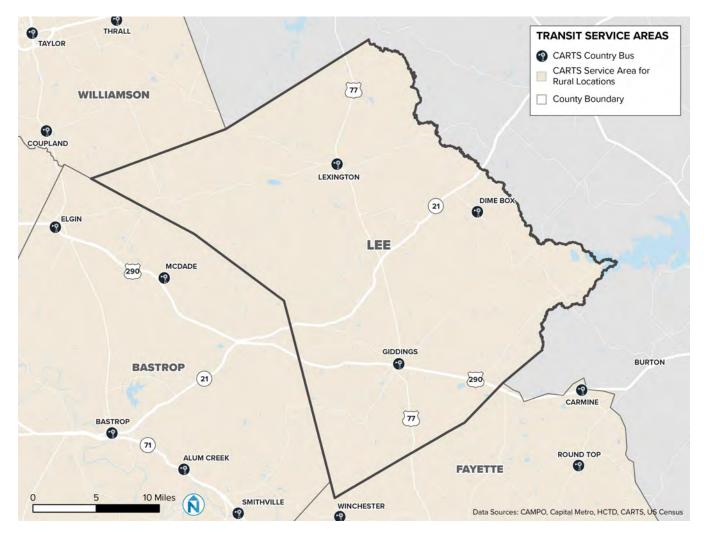
Fayette County Transit Propensity



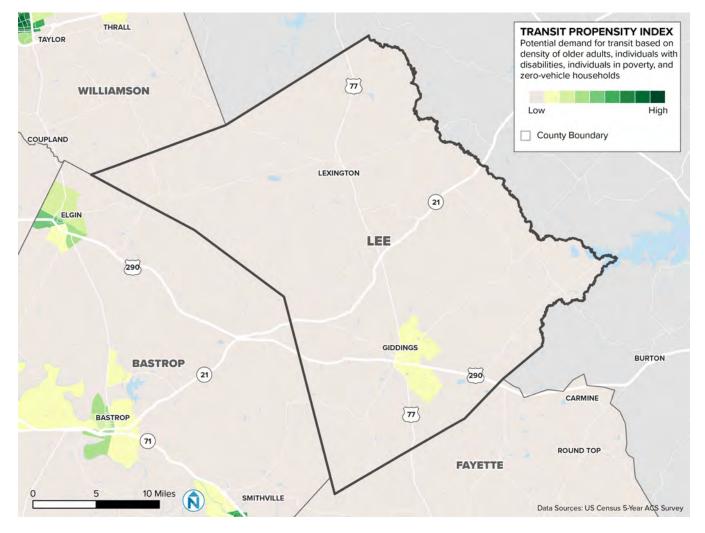
Hays County Transit Service Areas



Hays County Transit Propensity



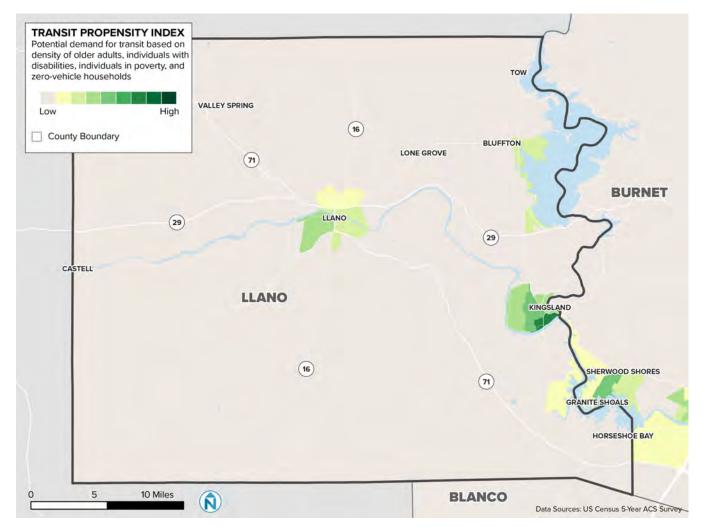
Lee County Transit Service Areas



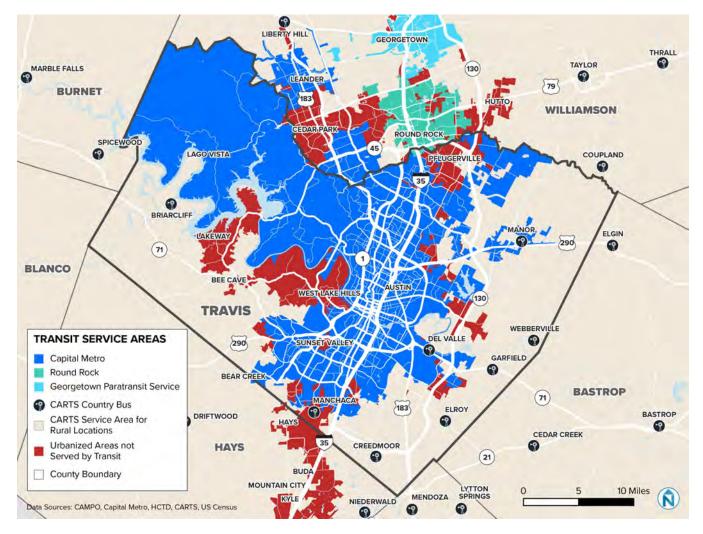
Lee County Transit Propensity

No map for Llano County; entire county served by Hill Country Transit District.

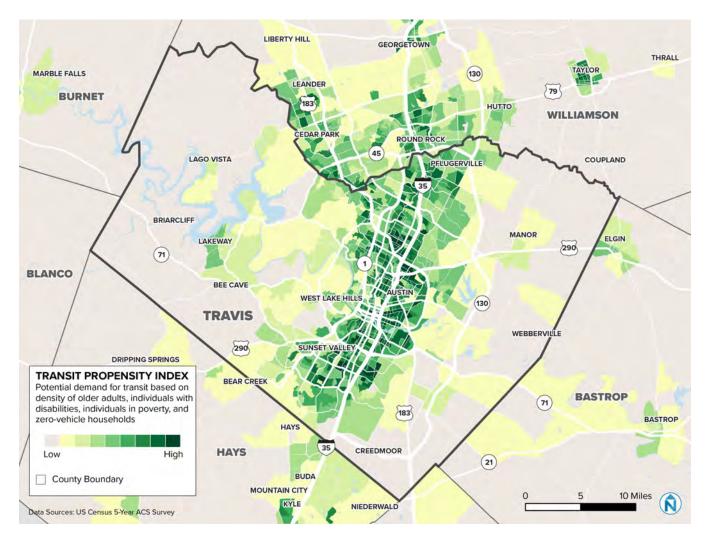
Llano County Transit Service Areas



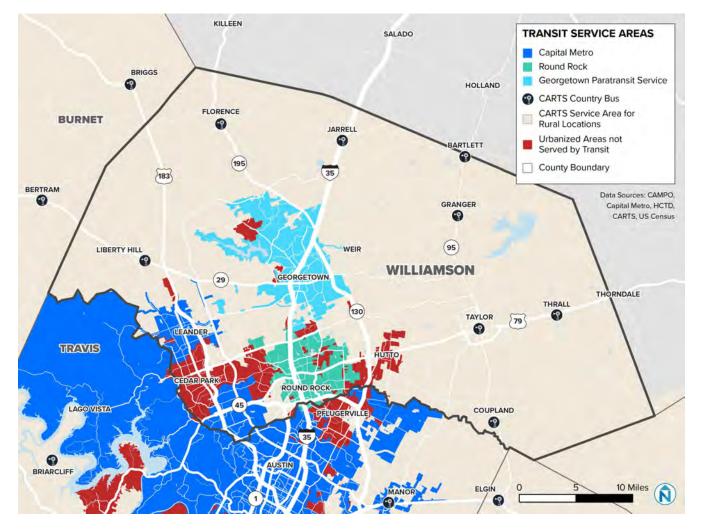
Llano County Transit Propensity



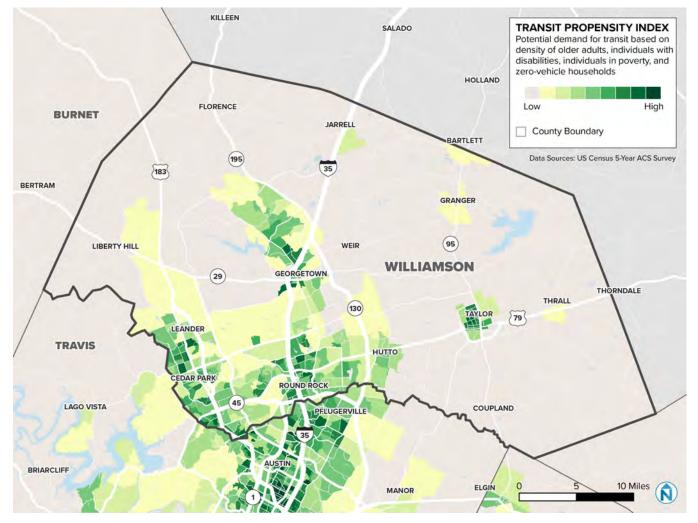
Travis County Transit Service Areas



Travis County Transit Propensity



Williamson County Transit Service Areas



Williamson County Transit Propensity

APPENDIX B

Stakeholder Outreach





Appendix B Stakeholder Outreach

Affinity Group Findings

The following is a compilation of insights gathered from focus group participants who represent various stakeholder organizations and affinity groups interested in the outcome of the Regionally Coordinated Transportation Plan. The individuals attended one of five focus group sessions to share their perceptions, opinions and insights related to the communities they serve. The objective of these sessions was to:

- Present the project and its goals
- Understand and document the stakeholder's interests, needs, and concerns relative to the project
- Facilitate deep-dive discussions on specific themes, considerations, or interests

Invitations to participate were emailed to over 140 selected contacts representing key community organizations that serve the Plan's priority populations. The recruitment effort included phone calls and personal e-mails to the majority of the organizations on the list. The focus groups were scheduled over four days with both noon and afternoon sessions to facilitate participation. No compensation was offered. Of the 26 total registrations, 11 participants attended the sessions. The consultant team prepared a discussion guide and led each 60-minute session as a group discussion or conducted it as an interview in cases where only one participant attended.

Participant Characteristics

We moderated 5 focus groups with individuals representing the following agencies / organizations:

- Seniors / People with Disabilities / Veterans January 20, 2022, from 12:00PM to 1:00PM
- 2. Community Organizations January 20, 2022, from 4:30PM to 5:30PM
- Communities of Color / Limited English Speakers / Low Income January 21, 2022, from 12:00PM to 1:00PM
- 4. Health Care Providers This session was scheduled twice but no participants attended
- Support Agencies / Service Providers January 24, 2022, from 12:00PM to 1:00PM

Representatives from the following organizations participated:

- Capital Metro
- Austin EMS Association



- Parking Mobility, City of Austin, Pedestrian Advisory Committee, ADAPT/PACT
- Boys and Girls Club of Georgetown
- Bluebonnet Trails Community Services
- Senior Access TX
- Habitat for Humanity of Williamson County
- Greater Austin Hispanic Chamber of Commerce
- Community Resource Centers of Texas
- Workforce Solutions Rural Capital Area
- Movability

Key Findings

SUMMARY

Navigating life and community

- Individuals with limited mobility depend on transportation options to get to medical appointments and prescription pickup; they struggle when those they regularly rely on are unavailable.
- Seniors and people with disabilities do use public transit, which has been improving its service. Yet, many residents are under the impression the service is not reliable or not safe enough for them and their loved ones.
- For some in need, it is a challenge accessing transit passes. Other transportation
 options are too expensive for them; many area organizations assist them by
 providing access to different transportation options. Bottom line, they navigate
 the best way they can, given their limited options.
- The COVID-19 Pandemic has generally decreased the use of transit, due to fear of getting infected and for the reduction in service (routes and frequency) caused by staff shortages.
- Rideshare services are too expensive and/or complicated for some and have very limited service for people with disabilities.
- Urban and rural communities have very different experiences and options when it comes to transportation. Many in rural communities face long commute times to access work and services. In many rural communities, public transit is not an option yet.
- Some lower income families do possess one family vehicle, but it is not in the best condition and needs to be shared by several family members.

Factors that influence travel methods

 Cost, convenience, availability, and familiarity are all factors that influence travel methods.



- Gentrification is pushing out of Austin, and away from reliable public transportation, those who need it the most. Toll roads are not an affordable option due to cost, for those pushed out of Austin.
- A lack of an efficient, multi-hour, dependable, and seamless regional transit system, along with local officials not implementing or cancelling too soon certain transportation options.
- Lack of knowledge/information regarding all transportation services available for the community.
- Some elderly residents don't feel comfortable using or are able to use public transit.
- Lack of alternate ADA-friendly travel options.
- Long distances combined with few transportation options greatly affect our rural community members
- Lack of nearby, convenient, and accessible childcare services represent a huge hurdle for some residents; it greatly affects residents' efforts to get to work on time/keep a job.

Navigating for special trips or events

 A variety of options are utilized, including CapMetro, non-emergency medical transportation, friends & family, their own car, community organizations' vehicles, volunteers, and rideshare. Yet, it varies greatly depending on the specific population.

Experience using public transportation

- The older population is less comfortable using public transportation; dependability on arriving on time to where they are heading is also an issue.
- For persons with disabilities, it varies, depending on their degree of disability and where are they going (having ADA-accessible infrastructure available for them there).
- Travel time and ADA-accessible vehicles are also important issues.
- Public transit schedules do not meet the needs of many potential users, to get to and from work.
- There is a need for more public transportation information in Spanish and other languages spoken in the region.
- For those living in rural communities, most of the time using public transportation is not an option.

Recommendations to improve transportation services

- Access to more transportation information in other languages, especially Spanish, would improve the use of public transportation.
- Ensure public transportation options to where big employers are located (i.e., Tesla)



- Provide more affordable transportation options in general, but more importantly ones that connect smaller communities with the rest of the region.
- Explore public-private partnerships to address current transportation needs.
- Improve regional transfers' timing, so that rides don't take that long.
- Work toward improving regional connections vs. each city working to solve their local issues.

Other comments

- Work with all health care providers in the region to explore ways for persons to get care closer to home.
- Improve ground infrastructure for those living with disabilities.

USER EXPERIENCE

On a regular basis, how do the clients your agency/organization represents navigate their life and community?

Seniors / People with Disabilities / Veterans

- The individuals I work with need the transportation to get to medical appointments, especially seniors, to go pick up medications and to go to dialysis. Transportation very much affects the community and their lifestyle.
- We see patients calling 911 with needs that not necessarily are best taken care of in the ER because those they regularly rely on for transportation to address these needs (like dialysis) have a scheduling conflict, childcare issues, or something going wrong with their car. So, our community health care medics try to work with CapMetro on setting up ways through which they have reliable sources of transportation to get to their anticipated medical appointments. We also see people going to the ER to get prescription refills instead of going to their pharmacy or getting minor medical procedures done that their primary care physician should be taking care of, because of facing different transportation issues. These are some examples of when we could use assistance in providing more resources and get easier access to CapMetro passes, which sometimes can be challenging.
- Most of our people, both seniors and people with disabilities, use the public transit system; the access to the service has been good; we are working with them closely on sidewalks, curb ramps, bus stops, and driver training; all things related to ADA regulations, which CapMetro as a federally funded organization is aware of. Yet, COVID has opened several opportunities, both good and bad. Bad, is that people are afraid to use public transit because of the virus' transmission. Good, CapMetro started a pickup service, and it is also picking up people on their paratransit service taking them to vaccination centers and such. The latter, unfortunately, is not well known. Due to COVID, a lot of people are



staying at their homes, using delivery services as much as possible for food, or relying on friends; CapMetro was also delivering food for a while. There is some telemedicine being practiced as well, but households with older adults, higher disability and/or lower income are not accessing services this way; so, 911 on the phone is the only resource they have, even though I encourage calling 311. Pre-COVID, I recall CapMetro having reduced fair tickets for agencies, I am not sure if this is still being offered.

The rideshare companies, which could be useful for older people and those with disabilities, don't have the accessible vehicles people need, you must know how to utilize technology to use them, you need to have a credit card, so they are not very user friendly for persons with low income. So, people will continue calling 911 because is the only resource that's responding to them during COVID.

Community Organizations

- Our client base, school children, as mostly not drivers. They get to us thanks to a great partnership with the school district and we have a fleet of buses that pick them up from school. They leave our facility when their parents get off work and can come and pick them up. The reason most of them come to us is that there isn't any place for them to be during the gap hours between school and when their parents can pick them up. None of our current families are using public transportation to pick up the kids; some families do carpool. Now we could increase the number older kids we serve (we get kids ages 6 through 18) if they had a means of independence to get back home using public transit.
- Serving all 10 area Counties makes it hard lumping them all together given the rural and urban natures of each one of the communities we serve. Our low-income clients typically choose to drive themselves. For some of our families, we provide early childhood interventions at home. In a typical workday, families are working at places (Austin, Temple, San Antonio) far from our location, it is difficult to get back for appointments, which means we are doing a lot of after hour services, so they can come when it's convenient for them. Now telehealth virtual services have made both our and our client's lives easier.
- For kids up to the age of 18, we offer services at their schools, so we catch them while they are there. Because of the extensive area that we serve, we have a TXDoT grant that we use to provide transportation; we have CARTS vouchers, as well as vouchers for any other public assistance. These work throughout six of the 10 counties we serve. For adult clients, we pay for a company that provides unique transportation for persons with intellectual and developmental disabilities, as well as behavioral health, primary health, substance abuse, and autism treatment needs. So, there are multiple options, but public transportation, in the traditional sense, is not typically one even though we have established a CARTS bus stop at each one of our campuses to make sure the service is available for those who choose using it.
- Our clients are active and independent; they call us when they have a need, asking for ideas of what resources are available for them.



Communities of Color / Limited English Speakers / Low Income

- Because Habitat for Humanity clients must have jobs generating enough income to pay for their home, most of them have a vehicle, although they may not have enough vehicles for transportation for their entire family, so they may be sharing one car. We were purposely buying properties along bus routes (near public spaces, medical services, and restaurants) in Georgetown. Then the City Council suspended bus service in the city, which is frustrating.
- Among the Latino community, we are looking at significant commute times for work and accessing services. They are sharing rides, as a cost-saving initiative. Some of the things we get a lot of feedback are access to transportation information, especially in Spanish. Oftentimes we end up translating information into Spanish.
- In Williamson County, there are certain transactions that are required to be in person, and we've worked with other organizations and transportation organizations to get clients to the right place at the right time.
- For the Latino community, which never really stopped working during the pandemic (as essential workers), and therefore needed to continue using the roadways, if anything, this highlights the need for an ongoing support regarding availability and access to information regarding transportation.

Health Care Providers

[Although the Health Care Provider session was scheduled twice, there were no participants]

Support Agencies / Service Providers

• Serving Burnet, Llano and Williamson Counties, given their relatively small populations it seems that the need for transportation options is not that high. But the population that we serve does have trouble getting around because they must go so much further to get their services, since we are more rural. They do use CARTS, and there's also a taxi service in Marble Falls; most of the time we must help people pay for the latter because it can get pricey. Another way they can navigate through the community, especially if they've got a medical problem - and have Medicare or Medicaid, is Med Lift. We also have a transportation program that we started internally; it is a voucher program based on the DETCOG (Deep East Texas Council of Governments). We also pay volunteers the IRS's business mileage rate to take people to where they need to go. Otherwise, people rely on family or friends. Now, when they use their own cars, the do need gas money. Bottom line, they navigate the best that they can because we don't have that many options out there. We are trying to figure out how to help people get to where they need to go; a lot of times they can't take a job because they must either walk or ride a bike to it, due to the mostly lack of public transportation (we do have CARTS, but is only a country bus, not a standard route).



- We see issues with people trying to get to work. A lot of times it is a job in a different County, and they don't have transportation that far. We have the same issue with CARTS because a lot of the area we cover is rural and they don't have any public transportation out there. We also have an issue with childcare. They can't get their kids over to their childcare center because it may be located somewhere else and there's not a lot of options for them.
- We work with a big variety of members; a lot of them are white collar tech sector and they are teleworking right now. We have newer members who are in the hospitality or restaurant industries who are having a harder time connecting their employees with commute, so a lot of them are driving alone, riding bikes, or trying to share an Uber with a coworker.

What factors influence their travel methods?

Seniors / People with Disabilities / Veterans

- The cost, convenience, availability, and familiarity are factors that affect them, especially seniors and those going to dialysis.
- Over the last few years, we've had a lot of people moving out of Austin into other areas, due to affordability, and now they can't access services like CapMetro's Metro Access and are facing additional costs to attend a dialysis appointment or visit their doctor in Austin, at least to get into Metro Access' service area. Those who are still living in Austin do have access to Metro Access and the Austin Parks and Recreation's Senior Transportation Program for seniors. This also applies for people who live in other areas like Round Rock, Kyle, and Buda that now have doctor's appointments in Austin.
- People do have family, friends, and neighbors who help them, but when those are not available, they don't have any other resources or backup plans.
- There is no seamless regional access to transit; if you've ever tried moving around the region through different service modes, it is very difficult, if not impossible. If you can use transit it takes extremely long and causes a lot of anxiety to users. If you live in the Central/Metropolitan area you have more connectivity through transit and other providers.
- Right now, transit service is not always readily available / as dependable because there's a lot of drivers out with COVID.
- Some people due to the cost of living move out of our service area; once there, they realize it is much more difficult accessing the services we offered, and just about anything else, using public transit.
- There is a lack of knowledge of the services being offered through public transportation, and how to use them. Yet, it is easier connecting with areas North and East of Austin, like Round Rock, Pflugerville, Manor, and Elgin than to areas South, such ask Kyle and Buda.
- Oftentimes, city officials from those cities surrounding Austin are not implementing the public transit services their residents need and people don't



know that they are the ones responsible for this; each city needs to fund these services, etc.

Community Organizations

- With seniors, we've found that the don't like using public transit because they don't feel comfortable nor have the energy to stand at a bus stop, if they have one near their home, and then navigate the system throughout the city. So, they need that extra one-on-one help that we provide door-to-door rather than curb to curb service. So, we're lending them a hand to walk to the car if they need it, getting in the car, getting out, and helping them with their groceries in and out of the car. Cost is a big factor for them; a lot cannot afford services like Lyft and other ride share services.
- For clients of age and able to use the service comfortably and safely, public transit is not an option they consider. Many get rides from friends, or get rides through our bus system, or directly from the school system itself. Our older clients, high school juniors and seniors, don't really look at public transit as an option to reliably get to and from the places they need to go; I would say there's a lack of awareness of what's available for them.
- Our aging population is looking for ease of access, timeliness, and flexibility to meet their independent schedule and getting where they need to go, like the grocery store, services, etc. Access-wise, some of our clients need lifts to get into a vehicle, so not any vehicle would do. Now, our younger kids, they prefer connecting virtually through video conferencing. For families with children, public transportation is difficult at best, that's why we offer our services at their home.
- Cost will always be an issue for our clients. UberEats is very popular with our families even though it is costly, but since they don't need to drive, the cost goes down.
- The new service model for us is offering services where our clients already are; we are inside schools. This is the most convenient for families as well as for the children.

Communities of Color / Limited English Speakers / Low Income

- Distance is probably the biggest issue in Williamson County, because of its size. There, the communities facing bigger challenges are not the one within the cities; and it is about getting from one community to the next, because most of the time, families are not working in the same community in which they live. Of course, cost is also challenging, especially right now with gas prices going up again. If we can get consistent, multi-hour transportation throughout the day people could adopt public transit and move faster in the region.
- Much of the Latino demographic travels to get to work and this travel is long and far away from where they live. Most of this demographic, according to Central Texas Regional Mobility Authority statistics, are not using the toll roads, they are simply inaccessible/unaffordable for them due to cost. For them, time is also an issue; for them the day starts much earlier and/or ends much later; therefore, we



need to consider for them the time of day for traveling. The communities we serve, when they are home, they tend to stay relatively close, no further than a 12-mile radius from home for personal travel; part of this is because of language barriers. Now, about heavy traffic, our demographic statistically will avoid high traffic areas – hoping to stay under the radar - trying to say away from law enforcement or other officials, due to the current political environment.

 Road construction and maintenance/repair also adds to commute time and increases gas consumption.

Health Care Providers

[Although the Health Care Provider session was scheduled twice, there were no participants]

Support Agencies / Service Providers

- Cost is a major influence. First off, most of the areas we serve do not have Uber service or is very limited. And the cost of an Uber would be too much for people out here because the highest you get paid is around \$20/hr. There is no convenient public transportation out here; CARTS tries to be as available as they possibly can, but they can only do so much. You must plan according to their schedule and where will they drop you off. It is very difficult finding a way of getting from where you live to where you work.
- The issue for us trying to get workers to their jobs. In Williamson County, where there's a higher income population, they are driving their vehicles to work, which seems to be working. But when we look at rural counties, sometimes people can't find any available ways to ride to work, so they just don't go there.
- Convenience is a big factor, and availability goes hand in hand with that. There
 are still somewhat limited transit schedules, and for those able to take transit,
 there's still a lot of cancellations of those services. I would say that childcare is
 another huge hurdle; there are so many uncertainties with it.

How do they navigate special trips or events?

Seniors / People with Disabilities / Veterans

- CapMetro has routes that go directly to the airport. There are also other nonemergency medical transportation options that can take you to the airport. Yet, this is more difficult for those who need wheelchair accessible vehicles.
- CapMetro works with a lot of seniors and AARP, scheduling events to teach them how to use the service and go to different places and events. They also offer a reduced fare ID for the senior community.
- Going to the airport is usually done with a friend or family.
- For wheelchair users, if there's something you must do spontaneously by yourself, you must rely on public transit (Cap Metro) if you are in the Metro area,



but for those outside of it, it's more complicated. Most of the for-profit transportation companies do not have vehicles which are wheelchair friendly.

 Due to COVID many services / volunteer organizations who used to offer things like drive a senior have all but disappeared.

Community Organizations

- For most of our special trips and event we do we use our own van which serves 14 passengers. Now, if they need to go to the airport, we try working with a volunteer or work on ridesharing options to drop them off.
- For special events we can provide transportation, eliminating the parent's need to transport their child somewhere. But on their own, families are mostly utilizing their car(s), even if sharing their one car between different family members, depending on their needs.
- Added to these, Uber has been popular for our clients where this service is available, especially when attending a one-time event, say going from Lockhart to Austin or Seguin to San Antonio.

Communities of Color / Limited English Speakers / Low Income

Some use services like Uber or Lyft but do so sparingly because of their cost.

Health Care Providers

• [Although the Health Care Provider session was scheduled twice, there were no participants]

Support Agencies / Service Providers

- With the people I deal with, there aren't any special trips or events; hardly anybody goes to the airport, since they can't afford it. The biggest "special" event they have is if they must go to the hospital or the ER; in that case they take the ambulance. They have enough trouble trying to get to the grocery store or to a restaurant. To go to the grocery store, we do have a transportation program that takes people to H-E-B; yet most people get a ride with a relative or a friend, or they drive their car, if they have one, which are usually older cars which tend to break down.
- Keeping in mind that we work with a huge variety of people, those who do have that option either drive alone or taking an Uber or Lyft. For special events like an Austin FC game, they do take MetroRail, which was heavily promoted for it.

What has been your clients' experience using public transportation?

Seniors / People with Disabilities / Veterans

• The older population is less comfortable using public transportation, especially if it will require multiple transfers, and sometimes not knowing how to use a specific service.



- For those with disabilities, it depends. There are those who can do things by themselves, for which public transportation works fine other than the lack of accessible sidewalks at certain locations.
- For veterans, due to COVID there's now only a couple of organizations providing transportation to medical appointments, and similar, to them and their families.
- The issue for all is how much the service options cost.
- EMS has gone to many buses to respond to medical or different violent issues and are aware that these situations are tough to deal with by bus operators. These issues decrease older people's desire to use buses. There is an interplay between safety and making sure people get to where they need to go.
- For people with disabilities, most of the barriers that existed (infrastructure, sidewalks, curb ramps, walk lights at the corners) have slowly become removed. What is still an issue are crazy drivers who are killing people at pedestrian crossings.
- The barriers that still exist are cost, access to public transit, travel time, the type of vehicles available (for those using wheelchairs).
- People with disabilities and seniors are afraid to go out when the weather is bad, and they are also afraid because of COVID. The isolation experience of having to stay home, is becoming a worse problem without the resources and people to provide transportation services.

Community Organizations

- Our seniors have had a very difficult time using special transit or CapMetro; a couple of clients have gotten lost where they got off at, missing their medical appointments. Most of our seniors are very careful of giving up that sense of control, and if they are going on a new bus system or a new route for them, they have a lot of fear and anxiety. Lyft and Uber have been good to use, and we've used them more than volunteers given the COVID pandemic. The good of these is that they get them where they need to go, the bad part is that for senior citizens, if they are late or if they don't go out right away, they don't wait for them, causing big problems for them, including appointment cancellation costs that we've had to pay for. There is a huge barrier for wheelchair-bound senior citizens, who can't leave home without the appropriate vehicles.
- Before the pandemic, the lack of our teenagers' awareness of what was available for them in the community led us to create an exposure program, where we took kids on bus rides. Their minds, of course, turn to Uber and other similar services, but in many cases, these are financially out of reach for them as a reliable way to commute.
- One of the most common things we hear is that public transportation's time schedule simply does not meet the time schedules of the persons we serve. That's why we offer them vouchers for Uber and Lyft, especially for younger persons, and we've also hired a transportation service, with retired peace officers helping us out; the trust factor is key here.



Communities of Color / Limited English Speakers / Low Income

- Accessing CARTS has been somewhat consistent; CARTS coordinators are multilingual – but it does not mean they speak all languages spoken in the region. Finding enough staff who speak Spanish (and other languages) is difficult, so there is a frustration all the time from non-English speakers for not being able to communicate. But I know that the service providers are trying hard to solve this issue.
- About 30% of our client base are non-English speakers.
- Latinos, in general, would like to have more transit information in Spanish; we've seen them using translation apps on phone to translate. But for the most part in Central Texas, accessibility to Spanish is easy to come by, it is the other languages that are the biggest issue. Yet, there has been tremendous improvements on this over the last 10 years.

Health Care Providers

[Although the Health Care Provider session was scheduled twice, there were no participants]

Support Agencies / Service Providers

- We don't have anything here other than CARTS or the HOP, depending on where you live. People have had good experiences when they use them, but again it is very limited what they can do/where they can go.
- Some of our clients are looking at the Tesla plant or other sites where they may be running multiple work shifts, but there's no public transportation to pick them up or drop them off during the second or third shift, so they are unable to take those positions.
- Likewise, looking at construction jobs, like the Tesla plant and others who are building further out, it is hard for employees to connect to transit. With public transit – especially with local buses - we hear concerns about frequency and safety, either real or perceived.

SUGGESTED IMPROVEMENTS

What recommendations can you offer to improve transportation services for your clients and/or your community?

Seniors / People with Disabilities / Veterans

- One would be affordable transportation options.
- Filling the gaps connecting smaller cities/communities that have no transportation options. For our clients who live here, and often live on fixed incomes, alternative transportation options are too expensive.



- Having public transportation better connect to our healthcare partners, like CommUnityCare and Seton (Ascension). We've seen situations of people being checked out of the hospital (after major procedures) and planning on walking back home because of lack of transportation options, and/or having transportation options to come back to the hospital for their follow up appointment(s).
- For people with predictable health care appointments, like dialysis patients, there should be ways of providing them with accessible transportation. Or at least having this as a backup in case their normal means of transportation fails.
- Get more public-private involvement, including hospitals and large corporations, to invest resources into transportation. For hospitals, they could also work on the timing of appointments (between 10AM and 2PM is the "golden time" to get them) and looking into closer (alternate) facilities to the homes of people who need to go in for a specific procedure, like dialysis. These would help prevent people missing their appointments.
- Improving regional transfers' timing, so the rides don't take that long.

Community Organizations

- There is a need of more awareness of what's available. We all need to help with spreading the word about what is available for people and how they can access it.
- It would be helpful having specific shuttle times, let's say from a high school to trusted locations (service providers); that would put parents at ease about allowing their kids to utilize it. If this was done long enough, it would gain tractions as a reliable, community-trusted, means of transportation.
- Sometimes the public transit schedule does not meet our clients' schedules, so we keep looking for other/new transportation opportunities. Sometimes we find a transportation option that meets a client's needs so we work with them asking if they can help pay for it, offsetting the cost for us.

Communities of Color / Limited English Speakers / Low Income

- Not giving up on a solution prematurely.
- Keep the community informed about the latest transportation opportunities, changes, pricing, etc.
- Getting different communities to play better together is the only way we are going to solve this; right now, some communities are trying to solve transportation issues on their own, instead of considering working together with neighboring ones. Connecting more regionally versus solving the problem locally.
- What you are doing is a great start: outreach to those who can speak of those they serve.
- The area needs to expand the transit service area, increase its availability and accessibility. Consider higher traffic areas, and expanding areas, like around the new Tesla plant on the East side.



Health Care Providers

[Although the Health Care Provider session was scheduled twice, there were no participants]

Support Agencies / Service Providers

- I know CARTS is working on offering rides on demand; they have brought that to Taylor already, and they are going to start it at Marble Falls. If that CARTS program could be expanded even just within Burnet County, that would make a huge difference for people living there. So, increasing accessibility to public transportation.
- Having more regional stops or parking spots for people to catch a bus into Austin or Round Rock, including Samsung and Tesla locations, would help, since house prices are so high in Austin that people are moving further out and they don't' have enough transportation options to get into work.
- Having more Park & Ride facilities would make a positive difference for a lot of people. That way they could reach some higher frequency transit lines with their cars and reach denser part of our region using public transportation. Also, there are a lot of people who do not live withing walking or biking distance to a bus stop or transit line. Then, I just think of better frequency and reliability on public transit... that would make a big difference for people.

SUGGESTED IMPROVEMENTS

Other Comments?

Seniors / People with Disabilities / Veterans

- There is high demand and lack of supply of transportation options; and we've gotten creative, but it does not work for everybody.
- Health care wise, at senior apartment complexes, why not have a visiting physician come to them instead of having residents go out to different clinics?

Community Organizations

- The idea of a rail system out of Cedar Park, basically following 183, seemed like something that could work, connecting Cedar Park, Round Rock, Hutto and Taylor, integrating rural, suburban, and urban areas along the route.
- The current rail system has a lot of faults, like allowing young people to travel down to Austin for a night out but being unavailable when it is time to head back home. I don't know if our seniors would ever use it, because of their frailty and vulnerability, without having somebody accompany them.
- I think there's a little bit of a "chicken and egg" argument in terms of investment vs. needs. There are needs that the transit system could address; yet the question is, how many people would use it at the start and at what point does the community trust the system, especially if there are new ventures involved?



 One thing we need to consider is that the world has changed a lot since the pandemic started. There are many people currently telecommuting that, when things go back to normal, I think there's going to be a different new normal than the traditional 9 to 5 workday, therefore transportation options will need to adapt accordingly.

Communities of Color / Limited English Speakers / Low Income

- Improving information, on and off-line, as far as fees, rates, hours, and routes for the different transportation services available; look at what other countries have done, for example, in Europe.
- Take into consideration what gentrification has been doing to the Latino community, forcing them to move further out of the city, to places with less transportation options.
- Take into consideration new languages being spoken in our area.
- Improve information on how to connect between transportation services offered in our different communities.

Health Care Providers

[Although the Health Care Provider session was scheduled twice, there were no participants]

Support Agencies / Service Providers

- Those who use bikes in Austin, want more protected bike lanes, not just a stripe painted on the road.
- For people with disabilities, it is a real challenge / barrier getting to some of the current transit stops.
- Just don't forget people living out in the surrounding counties when it comes to improving access to transportation.



Stakeholder Interviews

As part of the CAMPO Coordinated Plan's stakeholder outreach and engagement process, Nelson\Nygaard conducted a series of stakeholder interviews between the months of August and September of 2021. Stakeholders interviewed for this task included transit providers, human service organizations, and local, regional, and state agencies and organizations. The purpose of the stakeholder interviews was to:

- Understand the roles, perspectives, and vision of key transportation-related agencies and organizations in the study area.
- Identify transit and mobility needs and gaps, including those related to transportation services as well as structural needs, such as organization, management, and resources.
- Identify the key concerns, issues, and gaps related to the transportation and mobility situations of the varied priority populations across the varied geographic, geopolitical, and transportation-services contexts of the regional study area.
- Document the immediate and ongoing impacts of the COVID-19 pandemic.

At the onset of each interview, the project team encouraged stakeholders to speak freely and assured them that any comments or ideas expressed would be anonymous. The following service providers and organizations participated in interviews for this Plan:

- Capital Area Rural Transportation System (CARTS)
- Capital Metropolitan Transportation Authority (Capital Metro)
- Capital Metro Office of Mobility Management
- City of Round Rock
- City of San Marcos
- Hill Country Transit District
- Texas Department of Transportation
- Texas State University

Interview Guide

The following provides a high-level overview of the topics or questions that guided the discussion. This list is not intended to be comprehensive, nor were they intended to limit the scope of the discussion.

Getting To Know You

- Tell me about your organization and the services you provide:
- Do you currently work with other organizations (e.g. Capital Metro, CARTS, to coordinate services)?

Existing Conditions

 How transportation services within the region currently support individual or organizational interests?



• How is the transportation system working for priority populations (i.e., youth, Veterans, older adults, individuals with disabilities)?

Needs And Gaps

- Concerns of priority populations
- Barriers to improving the system and services for priority populations
- Markets that are not well served by the existing transportation system that are particularly important to serve
- Inefficiencies in public transportation other mobility options operating in the region

Recommendations/Opportunities/Priorities

- Key players to successful program development and/or service provision
- Opportunities to improve access to transit and mobility options
- Opportunities to make it easier and safer to walk and bike in your community
- What could be done differently for regional (transfer) trips?
- What specific service improvements would you like to see funded?
- How would you suggest those improvements best get funded?
- Additional examples of programs, policies, or improvements which CAMPO/RTCC should consider?
- Besides funding, what prevents transportation and mobility improvements
- Your vision for transportation in your community

APPENDIX C

Funding Sources for Public Transportation





Appendix C Funding Sources for Public Transportation

	Federal Program	Eligibility	Application
(Accelerating Innovative Mobility (AIM) (Link) Program Goals: Identify, test, and prove out new approaches, technologies and service models Promote the most promising mobility innovations that can be implemented more broadly through FTA's capital programs Establish a national network of transit stakeholders that are incorporating innovative approaches and business models to improve mobility The federal share of project costs under this program is limited to 80 percent. Proposers may seek a lower federal contribution. The applicant must provide the local share of the net project cost in cash, or in-kind, and must document in its application the source of the local match. 	 Eligible activities include all activities leading to the development and testing of innovative mobility, such as: Planning and developing business models Obtaining equipment and service Acquiring or developing software and hardware interfaces to implement the project Operating or implementing the new service model Evaluating project results. 	Application opportunities are posted in the form of a Notice of Funding Opportunity (NOFO) (link to March 2020 NOFO) In 2020, 25 public transit projects were selected across 24 states and 1 territory to receive \$14 million in funding. Funding amounts ranged from \$40,000 to \$2.3 million.
(2) American Rescue Plan Act of 2021 (link) (fact sheet) Includes \$30.5 billion in supplemental appropriations allocated to support the transit industry during the COVID-19 public health emergency.	 Appropriations include: \$26.6 billion allocated by statutory formulas to urbanized and rural areas and tribal governments. Eligible activities for urbanized areas include Planning, engineering, design and evaluation of transit projects and other technical transportation-related studies Capital investments in bus and bus-related activities such as replacement, overhaul and rebuilding of buses, crime prevention and security equipment and construction of maintenance and passenger facilities Capital investments in new and existing fixed guideway systems including rolling stock, overhaul and rebuilding of vehicles, track, signals, communications, and computer hardware and software. Associated transit improvements and certain expenses associated with mobility management programs Preventive maintenance and some Americans with Disabilities Act complementary paratransit service costs 	Applications are competitive and submitted online (2021 form <u>link</u>) FTA will send notification when funding is available for obligation through the Transit Award Management System (TrAMS). FTA most recently announced Notice of Funding Opportunity September 7, 2021 (<u>link</u>)



	Federal Program	Eligibility	Application
(3)	Better Utilizing Investments to Leverage Development (BUILD) Transportation Grants Program (formerly TIGER) (link) (press release) (fact sheet) Funds investments in transportation infrastructure, including transit. Overall, USDOT has awarded \$9.9 billion to more than 700 projects.	 RAISE projects are rigorously reviewed and selected on merit based on statutory criteria of: Safety Environmental sustainability Quality of life Economic competitiveness and opportunity State of good repair Partnership and innovation 	Current Notice of Funding Opportunity (link) for \$1.5 billion in total funding, representing a 50% increase in available funds compared to last year, when applicants requested \$10 in funding for every \$1 available. In 2021, 63 funded projects received funding amounts ranging between \$2 million and \$25 million (fact sheet) Deadline of April 14, 2022. Selections announced by August 12, 2022
(4)	Capital Investment Grants (CIG) – 5309 (link) Discretionary grant program funds transit capital investments, including heavy rail, commuter rail, light rail, streetcars and bus rapid transit. Fiscal years 2022-26 each have \$3 billion in authorized funding subject to appropriation, with additional \$1.6 billion per year in advanced appropriations. (funding info link)	 The Fixing America's Surface Transportation Act (FAST) requires projects fall under 1 of 3 categories (detailed guidance link): New Starts Total project cost is equal to or greater than \$300 million or total New Starts funding sought equals or exceeds \$100 million New fixed guideway system (light rail, commuter rail etc.) Extension to existing system Fixed guideway BRT system Small Starts Total project cost is less than \$300 million and total Small Starts funding sought is less than \$100 million New fixed guideway systems (light rail, commuter rail etc.) Extension to existing system Fixed guideway systems (light rail, commuter rail etc.) Extension to existing system Fordal project cost is less than \$100 million New fixed guideway systems (light rail, commuter rail etc.) Extension to existing system Fored guideway BRT system Corridor-based BRT system Corridor-based BRT system Core Capacity projects are substantial corridor-based investment in existing fixed guideway system, which must: Be located in a corridor that is at or over capacity or will be in five years Increase capacity by 10% "not include project elements designated to maintain a state of good repair" 	Federal transit law requires transit agencies seeking CIG funding to complete a series of steps over several years. New Starts and Core Capacity projects require completion of two phases in advance of receipt of a construction grant agreement – Project Development and Engineering. Small Starts projects require completion of one phase in advance of receipt of a construction grant agreement – Project Development. Projects must also be rated by FTA at various points in the process according to statutory criteria evaluating project justification and local financial commitment.



	Federal Program	Eligibility	Application
(5)	Enhancing Mobility Innovation (link) Promotes technology projects that center the passenger experience and encourage people to get on board, such as integrated fare payment systems and user-friendly software for demand-response public transportation. The federal share of project costs under this program is limited to 80%.	 Eligible projects fit under one of two topical areas: 1) Develop novel operational concepts and/or demonstrate innovations that improve mobility and enhance the rider experience, focused on innovative service delivery models, creative financing, novel partnerships, and integrated payment solutions, or other innovative solutions. This includes all activities leading to uncovering the next iteration of promising technologies, practices and strategies that accelerate innovations in mobility for transit, including, but not limited to, technology scanning and feasibility analysis, stakeholder engagement and outreach, planning, acquiring essential equipment or services, project implementation, modeling forecast of climate and equity impacts of proposed novel concepts and evaluating project results. 2) Develops software to facilitate demand-response public transportation that dispatches transit vehicles through riders' mobile devices or other means. Eligible activities may include establishing user needs; defining system requirements; development, validation and verification of the software; modeling and simulation; and/or pilot implementation, with a software solution. 	 On November 12, 2021, FTA released a Notice of Funding Opportunity (NOFO) to solicit project proposals for the Enhancing Mobility Innovation Competitive Funding Opportunity. The NOFO made available \$2 million in Fiscal Year 2021 funds. Project proposals were due January 11, 2022
(6)	Grants for Buses and Bus Facilities Program (link) To assist in the financing of buses and bus facilities capital projects, including replacing, rehabilitating, purchasing or leasing buses or related equipment, and rehabilitating, purchasing, constructing or leasing bus-related facilities.	 Eligible Activities Capital projects to replace, rehabilitate and purchase buses, vans, and related equipment, Capital projects to construct bus-related facilities, including technological changes or innovations to modify low or no emission vehicles or facilities. 	Competitive allocation provides funding for major improvements to bus transit systems that would not be achievable through formula allocations. Supplemental Form link FTA last announced a Notice of Funding Opportunity due November 19, 2021 (link)
(7)	Innovative Coordinated Access and Mobility Grants (ICAM) (<u>link</u>) To improve access to public transportation by building partnerships among health, transportation and other service providers	 Eligible Activities Innovative projects for the transportation disadvantaged that will improve the coordination of transportation services and non-emergency medical transportation services. 	In 2018, there were two funding opportunities under the initiative: the Innovative Coordinated Access and Mobility (ICAM) Pilot Program and Human Services Coordination Research (HSCR) grants. In 2021, only the ICAM funding is available. FTA last announced a Notice of Funding Opportunity due December 6, 2021 (link)



	Federal Program	Eligibility	Application
(8)	 Integrated Mobility Innovation (IMI) (link) Program goals are: Enhance transit industry preparedness for IMI Assist the transit industry to develop the ability to integrate IMI practices with existing public transit service Validate the technical and institutional feasibility of IMI business models, and document IMI best practices that may emerge from the demonstrations Measure the impacts of IMI on travelers and transportation systems Examine relevant public sector and Federal requirements, regulations, and policies that may support or hamper the public transit sector's adoption of IMI 	 Eligible Activities fall under three research focus areas: Mobility on Demand Transit Automation Mobility Payment Integration Activities can include: Planning and developing business models Obtaining equipment and service Acquiring or developing software and hardware interfaces to implement the project Operating the demonstration Providing data to support performance measurement and evaluation 	In 2020, \$20.3 million in funding was granted to 25 projects in 23 states (press release <u>link</u>) FTA last announced a Notice of Funding Opportunity due December 6, 2021 (<u>link</u>)
(9)	Metropolitan & Statewide Planning and Non-Metropolitan Transportation Planning - 5303, 5304, 5305 (link) Provides funding and procedural requirements for multimodal transportation planning in metropolitan areas and states. Planning needs to be cooperative, continuous, and comprehensive, resulting in long-range plans and short-range programs reflecting transportation investment priorities.	 Eligible planning activities: Support the economic vitality of the metropolitan area, especially by enabling global competitiveness, productivity, and efficiency Increase the safety of the transportation system for motorized and nonmotorized users Increase the security of the transportation system for motorized and nonmotorized users Increase the accessibility and mobility of people and for freight Protect and enhance the environment, promote energy conservation, improve the quality of life, and promote consistency between transportation improvements and State and local planned growth and economic development patterns Enhance the integration and connectivity of the transportation system, across and between modes, for people and freight Promote efficient system management and operation Emphasize the preservation of the existing transportation system 	Funds are apportioned to states by a formula that includes each state's urbanized area population in proportion to the total urbanized area population for the nation, as well as other factors. States can receive no less than .5 percent of the amount apportioned. These funds, in turn, are sub-allocated by states to MPOs by a formula that considers each MPO's urbanized area population, their individual planning needs, and a minimum distribution.



	Federal Program	Eligibility	Application
(10)	Public Transportation Innovation – 5312 (link) Provides funding to develop innovative products and services assisting transit agencies in better meeting the needs of their customers.	 Eligible Activities Research Development Demonstration Deployment projects Evaluation of technology of national significance to public transportation 	Funds may be allocated on a discretionary basis. No recent NOFAs available
(11)	 Real-Time Transit Infrastructure and Rolling Stock Condition Assessment Research and Demonstration Program Funds cooperative agreements to engage in demonstrations to assess and identify infrastructure deficiencies in public transportation rolling stock via innovative technologies to keep public transit assets in a state of good repair. Intended to help transit agencies: Explore advanced cutting-edge technologies that can provide real-time condition assessment of transit capital and facilities Allow a more effective way for transit agencies to assess, detect, monitor and track deficiencies and defects related to infrastructure and rolling stock Evaluate the cost-effectiveness and the practicality of proposed state-of-the art solutions 	This program is a research demonstration program and not a capital procurement program. The project proposals must include a research/synthesis phase, a development phase, and a demonstration phase. All phases are critical to project selection. To ensure proposed demonstration projects address the needs of transit agencies, FTA requires that applicants identify partnerships with at least one transit agency. FTA will assess the strength of those partnerships as part of its evaluation of applications.	Funding availability depending on FTA's Research, Development, Demonstration and Deployment Program. No recent NOFAs available.

APPENDIX D

Plan Review





Appendix D Plan Review

CAMPO and Capital Area RTCC, 2017

This most recent update to the Public Transit - Health and Human Services Transportation Plan builds upon the 2012 plan, with a focus on the current rural and medical/human services-based transit options within the Capital Area Council of Governments (CAPCOG) service area. The overarching aim of the plan is to design, preserve, and maintain transportation services for the public while increasing the efficiency, access, and public awareness of transportation services and mobility options.

The goals and objectives of the Coordinated plan are described in Figure D-1.

Figure D-1 Public Transit - Health and Human Services Transportation Plan (2017) – Goals and Objectives

Goal	Objectives
Preserve and expand transportation services for public and human service agencies, especially those that meet the critical needs of the transportation disadvantaged.	 Continue to improve coordination among agencies and providers. Work with transportation service providers and others to increase the level of service for existing transportation consumers. Work with transportation service providers and others to serve currently unmet transportation needs. Work with transportation service providers, the Office of Mobility Management and others to develop action plans to explore the use of additional transportation resources made available through coordination to preserve and expand transportation services
Maintain and improve the quality and safety of transportation services for the public.	 Identify, adopt, and implement measurement of common performance indicators for a coordinated public transit system. Facilitate demonstration projects that improve the quality of transportation services. Work with transportation service providers and others to identify, adopt and implement minimum training, vehicle, service, operator, privacy and other safety standards and policies for participants in the coordinated public transit system. Work with transportation service providers to track and improve the performance of the coordinated public transit system on an ongoing basis; and prepare an annual report on the state of the coordinated system. Identify problem areas and improve bus stop and pathway accessibility and safety.



Goal	Objectives
Secure formal state and local agency agreements and identify and address funding, regulatory, programmatic, attitudinal, and geographic barriers to implement coordinated transportation in the Capital Area.	 Adopt and maintain a Coordinated Public Transit-Health and Human Services Transportation Plan for the Capital Area. Establish formal written agreements among participating agencies and programs outlining the decision-making process for implementing a coordinated system. Secure the resources necessary to implement coordinated transportation services in the Capital Area region. Work with transportation service providers to adopt interlocal, interagency agreements on mentoring, cost sharing, funding mechanisms and arrangements for vehicle sharing. Identify legislative and regulatory changes that could remove barriers and support coordinated public transportation services.
Increase the efficiency of transportation services for public and human service clients	 Work with transportation service providers and others to develop processes to allow grouping of trips funded by multiple agencies or programs. Work with transportation service providers and others to identify operational and business functions of services that can be combined or coordinated across agencies. Advocate for public and private sector agencies to make land use planning and facility location decisions based on availability and location of public transportation. Work with transportation service providers and others to develop intermodal facilities that allow for seamless transfers between transportation providers.
Increase public awareness of mobility options and improve access to transportation services for the public.	 Develop and continue to implement a multi-agency marketing plan and develop materials that advertise the availability of coordinated public transit services. Gather public feedback on transportation coordination activities on a regular basis. Provide targeted training and information materials about available transportation services. Create user-friendly, single-entry phone and website access for passenger information.

Priority Needs Identified

Figure D-2summarizes the priorities identified in the plan. Priorities were identified through interviews with service providers, agencies, stakeholders, surveys, data analysis, and observation completed throughout the planning process.



Figure D-2 Public Transit - Health and Human Services Transportation Plan (2017) – Identified Priority Needs

Priority Need	Description
Service outside the transit system service area	The public transportation service area in the ten-county study area needs to expand to better serve the entire public. The greatest unmet needs are found in communities that are outside of the Capital Metro and CARTS service areas. Transportation options for the elderly and disabled also need to expand beyond the current, limited options.
Maintain transit in all communities	As towns in the CAMPO region grow, their status changes from "rural" to being included in the Austin urbanized area, causing the town to be ineligible for rural transit funding.
Unserved destinations and user groups within Capital Metro area	Even within the Capital Metro service area, improvements can be made to ensure that all can use the service despite level of ability, including addressing issues with accessibility of pathways and stops, working with developers and human service agencies to ensure transit sensitive facilities are near transit stops, and ensuring that users that have difficulty accessing fixed-route service but are not using ADA paratransit are having their needs met.
Seniors/disabled persons	While service is mostly good for these groups, the growing senior population in service areas and rural areas will be a consistent need.
Improve/expand connectivity across jurisdictions	Public transit systems should continue to improve connectivity both within the region and to destinations outside the region.
Continue coordination with human service agencies	Many transit trips involve a health or social service, and Medicaid transportation is the largest human service transportation program. Most human service transportation is small scale with low out-of-pocket costs, which has greatly diminished the potential to coordinate services.
Medicaid Transportation Program (MTP)	The Medicaid Transportation Program is the largest funder of human service transportation (estimated to be up to 95% of human service funding available for coordination). Improving coordination will help to eliminate inefficiencies and duplication of services.
Mobility management and coordination efforts	Though these efforts are currently underway, there are opportunities to expand and improve these efforts. Examples include: a one-stop shop for information, providing centralized leadership and coordination through RTCC, assisting non-profit agencies with grant applications, helping secure sponsorships and partnership, mentoring/education, coordinating training coordinating maintenance, coordinating/consolidating transportation resources, coordinating volunteer networks, and conducting planning efforts.
Development of sponsorships/partnerships	Public-private partnership opportunities can help support services in specific locations for specific needs. For example, large retailers can support specific shuttle routes, such as a former HEB shuttle operated by Capital Metro one day per week, shuttling residents of a senior center to HEB.



Priority Need	Description
Volunteer transportation	Currently, the Drive a Senior program largely fills this need, but there is still a gap in transportation for non-elderly persons in need of transportation.

Strategy Recommendations

The plan presented recommendations for strategies, projects, and partnerships for coordination and service improvements. Coordination strategies include planning, mobility management, coordination of services, traveler information and other coordination options. Service strategies involve coordinating or growing transit options for the future. A summary of the coordination and service strategy recommendations can be found in Figure D-3.

Figure D-3	Public Transit - Health and Human Services Transportation Plan (2017) -
-	Strategy Recommendations Summary

Recommendation	Description
Coordination Strategies	
Continue to pursue mobility management and coordination opportunities	The Capital Metro Office of Mobility Management (OMM) was created to address service gaps through transit planning efforts. Expanding the reach of this program and continuing to support OMM planning efforts helps eliminate service gaps in the region.
Work with developers, human service agencies, education facilities, employers, and the medical community to locate facilities with transit availability in mind	Coordination between developers and transportation decision-makers ensures that accessibility for all ages and abilities is considered. Capital Metro's Transit Ready Development Guide can be used in this process, in coordination with efforts from the OMM.
Medicaid coordination	This is primarily a planning effort to better connect Medicaid transportation with human services.
Improve coordination and support a seamless family of public transportation services	While Capital Metro and CARTS currently provide coordinated services, better technology and compatible fare payment will make coordinated use by the public easier.
Expand coordination between student/workforce transportation and jobs to connect all of the region's residents to opportunity	Potential partnerships for employee shuttles, student shuttles, and employer or school funded transportation contracts should be sought out
Conduct a review of CARTS' rural fixed-schedule service	Annual reviews of service are important to ensure that the right communities are being served on the right days, at the proper level of service.



Recommendation	Description
Service Strategies	
Expand transit service to the entire region	This strategy encourages focusing on expansion in the areas between CARTS and Capital Metro service. These include areas such as Hornsby Bend, Del Valle, and other parts of unincorporated Travis County. The Regional Transit Study planning process found that the OMM and Travis County are working together to expand service in those areas through a Capital Metro on-demand service.
Address unserved destinations within existing transit service areas	This strategy focuses on looking at specific service needs and exploring options outside of traditional public transit services.
Expand commuter service	Increased frequency, number of trips, and number of commuting locations provides flexibility for commuters and could allow providers to serve a larger number of commuters.
Expand efforts to improve the coordinated volunteer network	While Drive-a-Senior fills some need, an expansion of volunteer service to those with disabilities is necessary. There is also a need for volunteers with wheelchair accessible vehicles.
Coordinate service between Hill Country Transit (HCT) and CARTS	Coordination between CARTS and HCT's "The HOP" service would connect users and allow more regional coverage between Llano, Burnet, and Williamson counties.
Development of public-private partnerships	Public-private partnerships allow the private sector and other entities to contribute to public transit efforts, including sponsorships.
Non-traditional market development/shopper shuttles	This strategy can provide special service between activity centers (for example, neighborhood to shopping center), and typically targets transit-dependent populations.

Performance Measures

A summary of the defined performance measures can be found in Figure D-4.

Figure D-4 Public Transit - Health and Human Services Transportation Plan (2017) – Performance Measures Summary

Measure	Target	Data Source
More service is provided to more people		
Annual Public Transportation Trips/ Capita	Increase	Survey of Providers in Resource Inventory
% of workers who use public transportation for commuting	Increase	American Community Survey
Number of persons with disabilities and elderly persons served	Increase	Capital Metro/CARTS
The system is accessible, seamless and understood		
The system is accessible, seamless and understood	Increase	Capital Metro/CARTS



Measure	Target	Data Source	
% of population within 3/4 mile of fixed route transit	Increase	ACS Population; CAMPO transit network	
% of population within 5 miles of intermodal facility	Increase	ACS Population; CAMPO transit network	
The region is fully leveraging available funding and partnerships	s for transit		
Federal Transit Administration Funding awarded in the Region	Increase	TxDOT, Capital Metro, CAMPO	
Number of applications received in the RTCC region for JARC/New Freedom (urban and rural) and FTA 5310 Elderly and Disabled funding	Increase	TxDOT, CAMPO	
The system is cost effective and efficient			
Average operating cost / public transit trip	Decrease/ Limit Increase	Survey of Providers in Resource Inventory	

Implementation Priorities

The 5-year implementation prioritization strategy is summarized in Figure D-5.

Figure D-5 Public Transit - Health and Human Services Transportation Plan (2017) – Implementation Priorities

Priority Focus	Implementation Priority		
Year 1			
	Mobility management – Stakeholders will organize work groups, seek funding and determine who will perform which functions.		
	Conduct regional planning and funding activities – Continue short range transit Planning processes in each community interested in transit.		
	Rideshare/vanpool service – Implement planning for a rideshare program.		
 Mobility management and planning activities Planning in support of the future services 	Implement various low/no cost coordination activities:Human service vehicle sharingMentoring/technical support to human service agencies		
	Sponsorship program – The program should be designed and planned in the first year.		
	Initiate planning activities for volunteer programs – The first step is to secure an entity willing to take a lead role.		
	Initiate activities to coordinate Medicaid transportation services.		
Year 2			
	Human service coordination – Initiate mentoring opportunities.		





Priority Focus	Implementation Priority
	Coordinate HOP and CARTS services in Llano and Bartlett.
 Continuation of first year 	Continue regional planning process.
activitiesImplementation of new	Implement service in the service gap areas as funding becomes available.
services as funding becomes available	Sponsorship program – This program should be implemented in the second year.
 Vehicle procurement initiated 	Secure an entity to manage the volunteer program. Funding should be sought as well.
	Continue NEMT coordination activities.
Year 3	
	Where appropriate, planning activities will continue. Much of the energy should be focused on implementation.
Continuation of new service implementation as funding	The volunteer program should be implemented.
becomes available	Public/private partnerships should be initiated.
	Shopper shuttles should be started as funding is available.
Year 4	
Continuation of new service	Inter-regional connectivity should be in place.
implementation as funding becomes available	Additional sponsors should be recruited.
Year 5	
Measuring changesPlanning for new services of	over the next five years



Capital Area Coordinated Plan: A Plan for Coordination of Public Transit-Health and Human Service Transportation (2012)

CAMPO and Capitol Area RTCC, 2012

This previous update to the Capital Area Coordinated Plan focused on the built upon the 2006 plan, and provided the primary foundation for the 2017 update. The five goals and corresponding objectives in the 2017 plan (Figure D-1) are drawn from this plan. An additional goal and objectives in this plan related to quality of life and air pollution was removed from the 2017 update as it was determined to be out of scope.

The plan defined 10 key strategies, as described in Figure D-6.

Strategy	Sub Strategies
Expand Transit Service to the Entire Region	N/A
Maintain and Increase Transit Service as the Region Continues to Urbanize	 RTCC Should Facilitate the Coordination and Implementation Process in San Marcos RTCC Should Facilitate the Coordination and Implementation Process in Georgetown Develop Funding Mechanism for Communities Outside of the Transit Service Area
Address Unserved Destinations within Existing Transit Service Areas	 Continue to Identify and Inventory Major Destinations within Capital Metro's Service Area Develop Approaches to Continue to Serve Customers with Disabilities Beyond the ADA ¾ Mile Service Zone
Meeting Accessibility Needs of Seniors, Passengers with Special Medical Needs, and Persons with Disabilities	N/A
Expand Efforts to Improve the Coordinated Volunteer Network	N/A
Work with Developers, Human Service Agencies, Employers, and the Medical Community to Locate Facilities with Transit Availability in Mind	N/A
Medicaid Coordination	 Seek Pilot Project to Demonstrate the Effectiveness and Power of Coordinated Services. Engage Texas Health and Human Services Regarding the Medicaid Program

Figure D-6 Capital Area Coordinated Plan (2012) – Key Strategies



Strategy	Sub Strategies
Pursue Mobility Management and Coordination Opportunities	 Determine Mobility Management Functions. Develop a Process to Select a Mobility Manager. Seek Funding to Implement the Mobility Manager. Develop and Implement a Transportation Solutions Training Curriculum
Improve Coordination and Support a Seamless Family of Public Transportation Services	 Continue to Improve Connectivity between Transit Systems Continue to Overcome Barriers Coordinate Technologies Where Possible Formalize Mentoring Opportunities
Expand Coordination of Student and Workforce Transportation and Work to Connect all of the Region's Residents to Opportunity	N/A

Regional Transit Plans

City of Georgetown Transit Development Plan

City of Georgetown, 2016

The purpose of the Georgetown Transit Development Plan is to develop a local transit plan for the City of Georgetown that serves transit needs within the city limits and connects to existing and future regional transit options to form a regional transit network, improve overall mobility, support the region's environmental and economic sustainability, and help manage roadway congestion. The Connect North Corridor Plan is a driving force behind the transit development plan, and the service recommendations in this plan are intended to serve Georgetown's transit needs while also complementing the regional connections in Project Connect. A detailed summary of the goals, objectives, and related strategies identified in the plan can be found in Figure D-7.

Goal	Objective	Strategies
Provide a safe, reliable, efficient, and accessible transportation option for residents and visitors of Georgetown	Improve service efficiency and reliability for existing service by meeting or exceeding established standards of performance	 Identify key performance indicators specific to Georgetown; establish standards for these indicators that correlate with effective service delivery Establish a schedule for service evaluation and follow-up remedial actions Improve productivity in the service area

Figure D-7 Georgetown Transit Development Plan – Goals, Objectives, and Strategies



Goal	Objective	Strategies
Adequately address the mobility needs of Georgetown residents	Improve access to employment, healthcare, shopping, and recreation	 Identify locations of employment, healthcare, shopping, and recreation locations. Develop a Georgetown Transportation Provider Working Group to meet on a regular basis to coordinate transportation efforts in the community. Define delivery times for employment, healthcare, shopping, and recreation locations. Refine routing to provide more direct access to some of the major destinations in the city, within existing resources based on location and delivery time review
Maximize resource utilization and operational efficiency with respect to system administration and operations.	Maintain capital assets (vehicles and maintenance materials) in state of good repair.	 Develop objective standards for measuring conditions of capital assets. Establish performance measures for capital assets. Develop policies and standards for replacement and rehabilitation of capital assets
Develop a local system that operates effectively in the short-term, continues to develop an audience for regional transit options in the mid-term, and will connect the local community to the region in the long- term.	Provide access to activity centers today with an understanding of where future regional transit infrastructure is proposed to be located.	 Submit regional transit projects to the CAMPO Transportation Improvement Plan (TIP). Develop dedicated funding sources for local transit system. Promote transit and the Project Connect North Plan through city website and biennial Citizen Survey.

Service Plan

The service plan is focused on serving key markets and activity centers while creating a bi-directional network of direct and simple routes that operate with a timed transfer for most routes in downtown Georgetown. The route structure proposed in the service plan provides a base structure for service growth. Key components of the proposals in the service plan are as follows:

- 60-minute frequencies all day on the four core routes
- Bi-directional linear routing in all sectors of the city
- A downtown transfer center on 8th Street across from the library
- One-seat rides from Southwestern University and the neighborhoods in the east to the shopping in the west at Wolf Ranch and the Rivery area
- Service from all areas of the city to downtown
- Service to the Georgetown Recreation Center
- Transit connections to the primary shopping centers and medical facilities



- Six-day (Monday to Saturday) service
- Connections to the CARTS regional service to Round Rock and Austin
- Complementary curb-to-curb paratransit service for seniors and persons with disabilities
- Longer term service to Sun City in Phase 2

Future Service Expansion Priority Area #1

The goal of the Future Service Expansion Priority Area #1 is to further improve the operations by extending service to new markets. The Future Service Area adds service along the Williams Drive corridor with direct connections to the residential and retail centers and Sun City. The implementation of this service would occur outside of the three-year planning horizon of the TDP after the initial four-route system has time to operate and mature.

Intermodal Connectivity

The City of Georgetown plans to complement the future local bus system with connections to other transportation modes to help transit riders make first-mile and last-mile connections. Following are strategies the city has implemented or is pursuing towards this goal:

- Completed an audit of the existing sidewalk infrastructure and developed a master plan for improving its sidewalk network, including both refurbishment/replacement of existing sidewalk infrastructure and construction of new sidewalk facilities.
- Implemented a bike share program in downtown Georgetown.
- Prioritized making bike racks available on all Georgetown buses.

Paratransit Service

CARTS operates a curb-to-curb general public demand-response system throughout the Georgetown city limits. The plan recommends continuing to operate an ADA-only paratransit service within the boundaries of the city instead of the ³/₄-mile catchment area. The paratransit service will operate with one demand-response bus 12 hours per day on weekdays and 10 hours per day on Saturdays.

Fare Policy

The plan recommends a 10% farebox recovery rate be used as a goal for Georgetown. Because the Georgetown system is limited to the city limits, an initial base fare of \$1 is recommended, but it should be widely publicized by the city that fare structure will be reexamined and potentially adjusted based on ridership and desired revenue recovery percentage.

The plan also recommends that the city consider adding a reduced or half-fare for elderly people, people with disabilities, and school-aged children at the outset of service,



despite this type of fare negatively impacting the revenue recovery rate. Additional structural changes to fare policy such as adding weekly passes or other discounted fares should be reserved for a future fare analysis based on actual system utilization.

Marketing Plan

The plan recommends that a comprehensive marketing plan for the recommended system be developed to assist in implementing the new system through a partnership between the city and Capital Metro staff. It is further recommended that a distinctive system logo, vehicle paint scheme, signage, and theme for the new services be developed to generate a unique and positive image for the transit program, and that the image (logo/graphics) created be unique to the service area.

Local Funding Sources

The following local funding sources were identified:

- The Georgetown Health Foundation set aside \$600,000 over three years to help initiate transit service improvements.
- The financial plan assumes \$200,000 per year beginning the first full year of service.
- Additional revenue is assumed to come from advertising on wrapped vehicles. Projected revenue is based on \$1,000 per month per vehicle, yielding \$4,000 for two months of fixed route service in FY17, and \$24,000 per year thereafter.

The remaining local funding needed to meet capital and operating costs of the proposed transit system is expected to come from the City of Georgetown.

Performance Measures

The plan identifies specific metrics for the following performance measures:

- Passengers per revenue hour
- Fare recovery ratio
- Cost per passenger
- Cost per revenue hour
- On-time performance

Travis County Transit Development Plan

Travis County, Capital Metro, CARTS, 2018

The Travis County Transit Development Plan is a collaborative planning effort by Travis County, Capital Metro and CARTS to identify transit service gaps and potential solutions to fill gaps in urbanized areas of the county that currently fall outside of the Capital Metro service area. The goals, objectives, and strategies of the plan are described in Figure D-8.



Figure D-8	Travis County	Transit Development Plan ·	- Goals, Objectives,	and Strategies

Goal	Objective	Strategies
Address mobility needs and provide connectivity to destinations throughout Travis County and the Austin metropolitan area	Improve access to employment, healthcare, education, recreation, cultural, social service, entertainment, and retail centers	 Identify needs, major activity centers and key destinations and define projects that best serve the Travis County TDP planning zones. Implement transit services that maximize access to major destinations for each TDP planning zone. Facilitate seamless connections with other transportation modes.
Enhance transit to support the economy and preserve the environment	Simultaneously minimize environmental impact while supporting economic development	 Support the economy by enhancing access to economic opportunities for vulnerable populations and low-income individuals. Support workforce initiatives and economic development through enhanced job access. Maximize transit interface with non-motorized modes of transportation by encouraging integration through station design and amenities.
Provide a safe, convenient, reliable, and efficient transportation option that is accessible for all Travis County residents and visitors	Meet or exceed performance indicators and improve rider satisfaction	 Identify key performance indicators that correlate with effective service delivery throughout the County and monitor achievement. Follow a schedule for on-going service evaluation. Monitor customer satisfaction by tracking customer complaints.

Strategy Recommendations

The plan presented recommendations for zone-based projects, partnerships for coordination (identified in the plan as Community Based Solutions), and service improvements in urbanized areas that fall outside of the Capital Metro service area. A summary description of the strategy recommendations, and their applicable analysis zones, can be found in Figure D-9. A map of the region with the identified analysis zones and recommendation types can be found in Figure D-10.

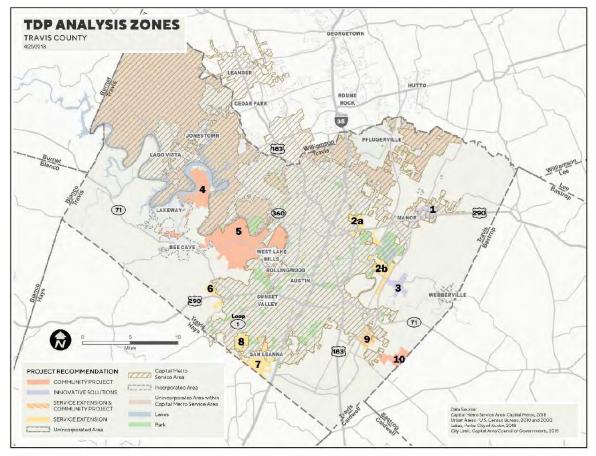
Туре	Applicable Zone(s)	Description
Mobility on Demand Pilots	1, 3	User-focused services that allow the user to schedule rides within a designated zone through an app or by phone. Users are picked up within 15 minutes of scheduling the ride. The vehicles used are vans or small buses and are wheelchair accessible. Zones are designed to provide access to Capital Metro bus routes and destinations within the zone.

Figure D-9 Travis County Transit Development Plan – Recommended Strategies



Туре	Applicable Zone(s)	Description
Community Based Solutions	4, 5, 9, 10	These projects are community focused and involve a variety of solutions to improve service. These include outreach and coordination with CARTS and non-profits, the Capital Metro vanpool program MetroRideShare, and the Capital Metro Vehicle Grant Program that provides vehicles to non-profits and faith-based organizations to use to provide needed transportation services in their community.
Service Extension Projects	2a, 2b, 6, 7, 8, 9	These are potential Capital Metro bus route extensions to reach more people in specific areas. The viability of the extensions will be determined after Capital Metro implements the Cap Remap, a more frequent, more reliable and better connected bus network scheduled for implementation in June 2018.

Figure D-10 Travis County Transit Development Plan - Analysis Zones





Implementation Plan

The specific strategies and their respective applicable analysis zones, lead sponsoring agency, and implementation target year are identified in Figure D-11.

Project	Zone(s)	Lead Sponsor	Target
Manor Area Mobility on Demand Pilot	1	FTA/Travis County	FY19
Central Health Clinic Pilot	2b, 3, 9, 10	Central Health/Travis County	FY19
Vehicle Grant Program Distribution	4, 5	Non-profit	FY19
Del Valle Route Extension Analysis	9	Incorporate into Capital Metro service analysis	FY19
School Bus Analysis	4, 5	Travis County	FY19
MetroRideShare Outreach	All	Capital Metro	FY19
Hornsby Bend Mobility on Demand Pilot	3	FTA/Travis County	FY20
Del Valle Route Extension	9	Capital Metro	FY20
Additional Route Extension Analysis	2a, 2b, 6, 7, 8	Incorporate into Capital Metro service analysis	FY20
Community 1st Bus Stop Analysis	2b	Incorporate into Capital Metro service analysis	FY21
Implement Next Priority Route Extension if viable	2a, 2b, 6, 7, 8	FTA/Travis County	FY21

Figure D-11 Travis County Transit Development Plan – Implementation Plan

Round Rock Transit Plan

City of Round Rock, 2015

The primary purpose of the Round Rock Transit Plan is to serve the transit needs of Round Rock residents. The plan serves as a blueprint for implementing new transit services within the City of Round Rock and connections to regional destinations in a logical and cost-effective manner.

Recommendations included in the plan are intended to:

- Improve local mobility and access to jobs, education, medical facilities, and shopping destinations
- Enhance connectivity to regional transit hubs
- Provide a convenient and reliable option for Round Rock residents commuting to Austin



Service Plan

Route recommendations in the plan are designed to serve a variety of transit markets and collectively enhance local and regional mobility by improving access to employment, education, retail, and medical destinations. The initial proposed route network consists of two local routes operating on weekdays serving the majority of destinations in Round Rock and two regional routes connecting Round Rock with downtown Austin and the University of Texas. Round Rock Transit Center, located on the western edge of downtown, serves as the primary connection point for local and regional services. Two additional local arterial routes are proposed for the future, providing service along the Old Settlers Boulevard and Gattis School Road corridor.

A summary of the service implementation plan through 2025 can be found in Figure D-12.

Year	Action
2015-2016	Current System
2017	Implement new routes and reduce demand-response service
2018	Increase the number of trips on Round Rock-Austin Express from 2 to 3 during each peak period
2019	Improve the peak headway on Round Rock-Howard Station from 60 to 30 minutes
2020	Increase the number of trips on Round Rock-Austin Express from 3 to 4 each peak period
2021	Improve the midday headway on Round Rock-Howard Station from 60 to 30 minutes
2022	Increase the number of trips on Round Rock-Austin Express from 4 to 5 each peak period
2023	 Extend evening service on Round Rock-Howard Station Extend morning and evening service on Round Rock Circulator Extend evening demand-response service to coincide with Round Rock-Howard Station
2024	Add Saturday service on Round Rock-Howard Station and Round Rock Circulator
2025	Implement Old Settlers routeImplement Gattis School route

Figure D-12 Round Rock Transit Plan - Service Implementation Summary

Paratransit Service

Currently, Round Rock operates demand response service that is open to the general public in the City of Round Rock and the Extra-Territorial Jurisdiction (ETJ). The first implementation year of the plan reduces the number of demand response vehicles from five to three; however, the span of service will match the fixed-route span of service, which satisfies geographic ADA requirements because the service is offered outside the



³/₄-mile requirement. The plan anticipates that existing riders who are able to ride fixedroute service will likely shift from demand response service to fixed-route service.

The plan recommends City of Round Rock should develop ADA paratransit policy to provide guidance on the following:

- Eligible populations some systems restrict demand response service to only those who qualify under ADA. Other systems provide service to ADA and seniors, and some are entirely open to the general public.
- Eligibility screening Round Rock currently has a process for identifying riders who qualify for a reduced fare. A similar process must be developed in accordance with ADA policies to determine eligibility for ADA trips. Adhering to the ADA eligibility determination process is a legal requirement and can be an effective way to manage demand for the service.
- Rider priority If serving ADA and general public populations with demand response service, Round Rock must develop a policy that prioritizes ADA passengers when reserving trips.
- Fares ADA fares may be no more than twice the fixed-route fare; however, demand response trips made by members of the general public may be set at a higher price.

Fare Policy and Coordination

The proposed fare structure, as described in Figure D-13, gives regular riders on Local routes a 40% discount over the cost of weekday roundtrips for four weeks, and users of the Express 31-Day Pass a 28.5% discount.

Pass	Local Fare	Express Fare
Single Ride	\$1.25	\$3.50
Single Ride, Reduced	\$0.60	\$1.75
Day Pass	\$2.50	\$7
Day Pass, Reduced	\$1.25	\$3.50
31 Day Pass	\$30	\$100
31 Day Pass, Reduced	\$15	\$50

Figure D-13 Proposed Fare Structure

The following fare policies are recommended based on best practices:

- Local Routes
 - Riders using cash pay every time they board a bus.
 - Riders wishing to transfer between Local routes or make a round trip should purchase a local day pass, good for unlimited rides on Local routes for the date of purchase.
 - Regular riders should purchase a Local 31-Day Pass, valid for unlimited rides 31 days from activation (first ride).



- Express Routes
 - Riders using cash pay every time they board a bus.
 - Riders making a cash-based one-way trip that includes using both Local and Express routes will pay for each trip separately (\$4.75 total).
 - Riders planning to make a round trip should purchase an Express day pass, valid for unlimited rides on Express and Local routes for the date of purchase.
 - Regular riders should purchase an Express 31-Day Pass, valid for unlimited rides on both Express and Local routes for 31 days from activation (first ride).
- Riders eligible for reduced fare include youth, seniors, and persons with disabilities.
- Children under the age of 5 ride for free.

The plan also recommends the City of Round Rock develop a revenue sharing agreement with Capital Metro in order to honor equivalent pass products between services.

It is further recommended that Round Rock pursue mobile ticketing or work with regional partners to explore the possibility of a regional smart card in order to provide a convenient cashless fare payment option already employed in the region.

Marketing

A summary of the marketing recommendations, and further opportunities to enhance or improve upon each recommendation, is shown in Figure D-14.

	Recommendations	Opportunities
Branding	Create transit service-specific branding (logo and colors)	 Develop branded name for transit (i.e., something other than Round Rock Transit) Develop service-specific branding for local and commuter routes
Buses and Bus Stops	 Install schedule and map holders at bus stops Provide printed schedules on- board buses 	 Implement on-board stop announcements Install way finding signage at major stops Install real-time arrival information at major stops
Online Information	 Build stand alone website including mobile-friendly version Develop GTFS schedule data for Google trip planner Create social media presence to provide service updates 	 Install AVL system and make real-time information available to third parties (app developers) Develop app specific for Round Rock transit services

Figure D-14 Round Rock Transit Plan – Marketing Recommendations and Opportunities



	Recommendations	Opportunities
Customer Service	 Develop Travel Training Program Distribute maps and schedules to local partners 	Staff Downtown Transit Center with transit "ambassador"

San Marcos Transit Plan

City of San Marcos, 2020

The San Marcos Transit Plan identifies the opportunities and challenges associated with transit today based on community feedback and detailed analysis. The plan provides an aspirational roadmap to coordinate and enhance transit in San Marcos over the next several years.

A detailed summary of the challenges and opportunities facing transit and mobility in San Marcos can be found in Figure D-15.

Figure D-15 San Marcos Transit Plan – Identified Challenges and Opportunities

Challenge	Description
Challenges	
Ridership impacts of COVID-19	The City of San Marcos reduced operating hours and frequencies of fixed-route and paratransit service for a four-month period in response to the initial COVID-19 outbreak. Fares were also eliminated during this period and the system remains fare-free during the development of this report. Social distancing measures were implemented on buses and at San Marcos Station, including limiting the number of available seats and requiring face coverings. Texas State University also adjusted operating hours, reduced frequencies, and limited seating on Bobcat Shuttle routes. CARTS continued regular service on interurban Route 1510 (Austin-San Marcos) but suspended service on interurban Route 1517 (Austin-Texas State University) for a 4-month period. Due to changes in employment, enrollment, activity, and attitudes it is unclear if transit demand and ridership will return to levels prior to COVID-19.
Infrequent local service	Municipal bus service in San Marcos has historically been scarce in terms of frequency, hours of operation, and days of service. Prior to 2015, San Marcos Transit consisted of ten routes providing hourly service. In January 2015, the system was restructured based on recommendations from the previous transit plan. Several routes were consolidated, and 30-minute service was introduced on two of five routes, or approximately 55% of bus stops in the city.
Limited street connectivity and pedestrian barriers	The City of San Marcos has nineteen at-grade Union Pacific Railroad crossings that impact transit schedule reliability. Interstate 35 and its parallel frontage roads span the entire 12.5-mile length of the city with only ten overpasses and underpasses. The Union Pacific Railroad and I-35 system along with high-speed state highways, farm-to-market roads, and ranch roads create significant barriers to transit. Gaps in the sidewalk and bike network further limit access to transit.



Challenge	Description
An isolated transit hub	San Marcos Station is the primary transfer point for San Marcos Transit, CARTS regional service, Greyhound, and Amtrak. The station location is situated approximately ½-mile south of Downtown San Marcos between two tracks and adjacent to a one-way road, resulting in out-of-direction travel, frequent train delays, and impacts to speed and reliability.
Divergent transit services	The service is currently designed to provide access on weekdays only. Service levels and ridership are low in comparison with peer cities. Complementary paratransit service connects individuals unable to ride the bus with pre-scheduled point-to-point transportation. Bobcat Shuttle is designed to transport students between university housing or private apartments and several points on campus. Service levels and availability are tied to the university academic calendar. Connectivity between San Marcos Transit and Bobcat Shuttle routes is limited to a few on-street locations.
Opportunities	
Qualify for additional Federal funding	Federal Transit Administration (FTA) Small Transit Intensive Communities (STIC) funding is awarded to small urban transit operators that exceed specific performance measures. By voluntarily reporting its ridership to the FTA, Texas State University helped the City of San Marcos qualify for \$1.3M in FY 2019 and \$1.4M in FY 2020. The City of San Marcos did not previously qualify for STIC funding. STIC funding may be used for operations, vehicle replacement, planning, engineering, design, and capital projects.
Expand transit access for the entire community	Employment and social services destinations not currently served by San Marcos Transit include an Amazon Fulfillment Center and the Village of San Marcos, which is home to San Marcos Women, Infants, and Children (WIC), Any Baby Can, Community Action of Central Texas, and the San Marcos-Hays County Family Justice Center. The Hays County Area Food Bank has plans to construct a 60,000 square foot distribution center at the Village campus. Texas State University students also expressed in interested in direct transit access to shopping destinations.
Improve multimodal connectivity	Relocating San Marcos Transit connections to downtown would be a major step towards achieving the Comprehensive Plan's objective of creating a connected network of efficient, safe, and convenient multimodal transportation options.
Respond to continued population and enrollment growth	Over the past decade, San Marcos' population has increased at a greater rate than Texas State University's student enrollment. The rapidly growing non-student population will likely increase demand for local bus service.

A detailed summary of the plan's key recommendations and opportunities can be found in Figure D-16.



Figure D-16 San Marcos Transit Plan – Key Recommendations

Recommendation	Description
Adopt service expansion plan	Adjust routes to serve emerging destinations, increase hours and frequency of service, and operate city routes on weekends.
Establish a Downtown Transit Plaza	Relocate local route connections from San Marcos Station to downtown to improve access to employment and Texas State University.
Adopt a paratransit policy	Enact new policies to reduce costs and ensure the system is benefitting the people that need it the most.
Eliminate on-board fare collection	Eliminate on-board fare collection for City of San Marcos transit and paratransit services to remove cost barriers, attract new riders, and eliminate the need for costly fare collection equipment on new buses.
Upgrade and standardize bus stops	Improve rider comfort and safety by upgrading amenities and information at bus stops.
Improve pedestrian access	Coordinate with Streets/Sidewalks division to improve access to transit. Coordinate with Traffic division to implement spot improvements at challenging intersections and priority treatments along major transit corridors.
Enter into an interlocal agreement with Texas State University	Establish an equitable formula and timeline for sharing transit funds awarded to the San Marcos urbanized area. The City of San Marcos is willing to work with Texas State University in obtaining FTA grantee status if desired.
Offer a real-time bus arrival app	Texas State University offers an app that provides real-time arrival predictions that is widely used by Bobcat Shuttle riders. Make the same app or a similar app available to San Marcos Transit riders.
Develop a unified brand	Partner with Texas State University to develop a single brand to make it easier for existing and potential riders to take advantage of complimentary transit services.
Expand marketing and communications	Strategic marketing and communications can attract new riders, maximize customer satisfaction, and build support from community members and local businesses.
Upgrade and right-size fleet	Replace aging vehicles with modern, low-floor, accessible vehicles. Assign the appropriate vehicles for each service type. Moving the University's fleet from a leased fleet to an owned fleet is a priority of fleet enhancement.
Design and construct an operations and maintenance facility	Reduce the operational cost of contracted services by investing in a facility that can accommodate the transit operation.
Design and construct a Downtown Transit Center	Upgrade the Downtown Transit Plaza to a permanent facility with an indoor waiting area, customer service desk, restrooms, operator break room, and other amenities.



2045 Regional Transit Study

CAMPO, 2020

The Regional Transit Study examines transit needs in the six-county region, focusing primarily on suburban and rural areas, and excluding the Capital Metro service area. The study provides guidance to transit service providers and local governments about how to address current and future transit needs, including, crucially, outlining steps local governments can take to continue to maintain transit service after losing eligibility for CARTS service. Most notably, the plan provides a transit options toolkit that gives detailed descriptions and guidance on the various types of transit and mobility options that can be pursued in the area, as well as detailed guidance on project selection and measuring performance.



Regional Transportation Plans

2045 Regional Transportation Plan

CAMPO, 2020

Metropolitan Planning Organizations are required by federal law to adopt a long-range transportation plan, also known as a Regional Transportation Plan (RTP). The most recent RTP was adopted by CAMPO in 2020, and is shaped by other plans, including: transportation demand management plan, the active transportation plan, arterials concepts, a transit study, and an incident management study. The purpose of the RTP is to outline an approach to managing congestion and planning for transportation needs region-wide for the next 25 years. The RTP consists of six overarching goals and a series of complementary objectives outlined in Figure D-17.

Figure D-17 2045 RTP Goals and Objectives

Goals	Objectives
Safety	 A. Crash Reduction – Reduce severity and number of crashes for all modes. B. Vision Zero - Support local government and transit agencies reaching vision zero metrics.
	C. Connectivity - Reduce network gaps to add connectivity, eliminate bottlenecks, and enhance seamless use across all modes.
	D. Reliability - Improve the reliability of the transportation network through improved incident management, intelligent transportation systems (ITS), transportation demand management (TDM)
Mobility	E. Travel Choices - Offer time-competitive, accessible and integrated transportation options across the region.
	F. Implementation – Plan and deliver networks for all transportation modes, with reduced project delivery delays.
	G. Regional Coordination - Continue inter-agency collaboration between transportation planning, implementation, and development entities.
	H. System Preservation – Use operations, ITS, and optimization techniques to expand the useful lifecycle of the multimodal system elements.
Ctauardahin	 Fiscal Constraint - Strategically prioritize fiscally constrained investments to maximize benefits to the region.
Stewardship	J. Public Health - Improve public health outcomes through air and water quality protection and active mobility.
	K. Natural Environment - Develop transportation designs that avoid, minimizes and mitigates negative impacts to water and air quality, as well as habitat.
	L. Economic Development – Enhance economic development potential by increasing opportunities to live, work, and play in proximity.
Economy	M. Value of Time - Enable mode choice and system management to keep people and goods moving and reduce lost hours of productivity



Goals	Objectives
	N. Access to Opportunity - Develop a multimodal transportation system that allows all, including vulnerable populations, to access employment, education and services.
Equity	O. Impact on Human Environment – Promote transportation investments that have positive impacts and avoid, minimize, and mitigate negative impacts to vulnerable populations.
	P. Valuing Communities – Align system functionality with evolving character and design that is respectful to the community and environment for current and future generations.
Innovation	Q. Technology - Leverage technological advances to increase efficiency of travel across all modes and for users of the network. R. Flexibility – Develop a system that is adaptable and flexible to changing needs and conditions.

Regional Transportation Demand Management Plan

CAMPO, 2019

The Regional Transportation Demand Management Plan provides a regional framework of priorities that identify projects, programs, policies, and strategies to manage traffic demand and congestion as the region continues to grow. The plan outlines projects, programs, policies, and strategies that focus on influencing travel behaviors, including providing travelers with more information and options for deciding how, where, and when to travel within the CAMPO region. The plan also outlines some strategic investments in transportation programs and infrastructure.

The TDM plan outlines a robust set of goals, objectives, and strategies, which have been summarized in Figure D-18.



Figure D-18 Regional TDM Plan – Goals, Objectives, and Strategies

Goal	Objective	Strategies
Regional Coordination	Document a collaborative plan where all TDM stakeholders have ownership and contribute to developing and maintaining a regional TDM system that benefits the entire CAMPO region	 Develop and implement regional solutions to transportation system congestion that cross jurisdictional lines Establish protocols for sharing transportation data and TDM options between agencies Develop and maintain a unified information source where travelers can access all elements of TDM in the region Promote greater regionalism and cooperation in the CAMPO region by working toward shared TDM goals Promote a quality of life that will attract businesses and residents to the region Establish a TDM Subcommittee of CAMPO's Technical Advisory Committee, with regular meetings to monitor and ensure the implementation of regional TDM programs
Incorporate TDM into the transportation planning process	Develop CAMPO polices with its partner agencies that promote and prioritize both programmatic and infrastructure investments in TDM projects and strategies	 Identify and support TDM projects and strategies before capacity projects when developing corridor studies, long range plans, and other planning documents Incorporate TDM measures into capacity expansion projects examples may include transit use on managed lanes, high-occupant vehicle lanes, and expanded intelligent transportation systems (ITS) Incentivize cities and counties to update development codes that better incorporate TDM elements Establish a targeted amount or percentage of specific funding categories of the Transportation Improvement Program and Regional Transportation Plan to TDM measures.
Provide Education and Outreach	Expand outreach and education to travelers, providing the transportation options available to them for getting from point A to point B	 Communicate directly to travelers about regional programs and options that already exist Promote the development of tailored TDM programs across the region Educate interested employers and trip generators on options, including flex schedules and teleworking Market TDM programs through mechanisms such as advertising and dynamic message signs Have regional agencies be more proactively involved in generating more participation in promoting multimodal transportation options and encourage employers to provide incentives to their employees who practice TDM strategies



Goal	Objective	Strategies
Improve the Transportation System	Enhance the performance of the region's multimodal transportation system, especially during peak periods	 Reduce the number of single-occupant vehicles to ensure efficient use of the roadway network Support greater use of transit, shared rides, and active transportation modes Incentivize all traditional roadway projects to have coordinated TDM education and outreach plans during construction phases Improve the reliability of the transportation network through improved incident management Enhance the reliability of travel times by shifting trips to off-peak periods Provide travelers with incident information and alternate route options through ITS and other outreach Work with agencies, private companies, and employers to improve connectivity and first/last mile trip segments Target congested corridors of regional importance for strategic infrastructure investment, such as managed lanes Document and evaluate performance measures over time to identify effective strategies.
Increase Mobility Choices for Travelers	Provide a range of transportation options throughout the region	 Optimize transit services throughout the region that provide alternatives to driving alone Implement projects that encourage everyday use of active transportation for commuting or other trips Provide information to travelers about joining carpools or vanpools Partner with transportation providers to expand first/last mile connections to reduce the need for driving Improve safety by providing transportation options to travelers with mobility challenges

Key recommendations in the TDM plan include the following:

- Establishing a TDM Subcommittee within CAMPO's Technical Advisory Committee to advance TDM in the region across the full spectrum of applications and processes.
- Continuing the development and monitoring the advancement of TDM in the region, led by CAMPO.
- Developing a listing of TDM projects and needs the region should address and include in the CAMPO 2045 Plan update.
- Updating the revised project selection criteria contained in this report, as needed, to accurately reflect the region's advancing TDM programs.



- Investigating additional TDM concepts to include in the project scoring criteria in CAMPO's call for projects as the region advances TDM.
- Continue exploring advances in TDM strategies for the region and update the TDM plan to document progress of TDM principles in the region.
- Establishing a cost-benefit analysis based on data collected and provided by TDM implementing agencies.
- Continuing and strengthening the regional platform that conducts targeted outreach and education to individuals, employers, and other trip generators, gathers and measures data from all agencies in the region, provides ridematching services for formal and informal carpools and vanpools, and serves as the place where all progress on TDM solutions are monitored and displayed.
- Updating the project scoring criteria for non-TDM categories before the next call for projects to award additional points to projects that incorporate TDM measures either during construction or after completion.
- Establishing a targeted amount or percentage of funding for the Transportation Improvement Program and Regional Transportation Plan to TDM measures.

2045 Regional Active Transportation Plan

CAMPO, 2017

The Active Transportation Plan covers walking and bicycle riding, as well as other nonmotorized or self-propelled modes including equestrianism, skateboarding, self-propelled scooters, and other personal mobility solutions, and is regionally focused to ensure that both urban and rural parts of the region are considered. A focus of the plan is first/last mile connections and safer facilities to get people to and from transit. The plan provides design guidance for roadway elements, intersections and crossings, and end-of-trip facilities. Strategies are proposed at the county level.

References to transit in the plan include connecting active transportation infrastructure to transit routes and stops, providing safe active transportation facilities, including, notably, sidewalks for those who use paratransit but could travel independently given safe facilities. The plan also emphasizes students at the Texas School for the Blind and Visually Impaired, seniors, and others who may be able to use a wheelchair or motorized scooter to travel independently given safe, well-connected infrastructure.

2045 Regional Arterials Concept Inventory

CAMPO, 2019

CAMPO's Regional Arterials Concept Inventory is a long-term plan that covers major roadways in the six-county CAMPO region, as well as the former Missouri-Kansas rail corridor in eastern Travis and Williamson counties. These evaluations are specific to roadways, but also evaluate transit priority lanes, managed lanes, and reversible lanes and propose making future arterial improvements as multimodal in nature as possible.



Multimodal considerations include transit, carpool/vanpool, active transportation, and SOV facilities.

The Inventory outlines four planning scenarios, each of which references transit directly or indirectly. Most notably, Scenario B includes a concept for a connected system of managed lanes restricted to only HOV and transit uses, including on major routes such as the RM 620 corridor, FM 973 north of US 290, Parmer Lane (FM 734), US 290 in addition to other roads. An analysis of this scenario typically found a 30% to 50% increase in the number of person-trips along a corridor when an HOV use was present.



Additional Plans

Sources of Funding Transit in Texas: Final Report

Texas A&M Transportation Institute, 2017

This report provides information on the federal, state, and local sources of revenue to fund transit in urban and rural areas in Texas.

Federal Funding Programs

Federal programs that provide funding for transit in Texas are summarized in Figure D-19.

Figure D-19 Summary of Identified Federal Funding Sources

Program	Description					
FTA Programs						
Sections 5303–5305 Metropolitan, Statewide, or Nonmetropolitan Transportation Planning Program	Provides formula funding and procedural requirements for multimodal transportation planning in metropolitan areas and states					
Section 5307 Urbanized Area Formula Program	Provides formula funding to public transit systems in urbanized areas with a population of 50,000 or more for public transportation capital, planning, and job access and reverse commute (JARC) projects, as well as operating expenses for public transit systems that meet specific criteria.					
Section 5309 Capital Investment Grants	Provides discretionary funds for major capital investments for new and expanded rail, bus rapid transit (BRT), and streetcars. The law requires that transit systems seeking CIG funding for a project complete a series of planning steps over several years to be eligible for funding.					
Section 5310 Enhanced Mobility of Seniors and Individuals with Disabilities	Provides formula funds to states and large urbanized areas for the purpose of meeting the transportation needs of seniors and people with disabilities.					
Section 5311 Rural Areas Formula Program	Provides formula funds to states to provide capital, planning, and operating assistance to support public transportation in rural areas with a population of less than 50,000.					
Section 5337 State of Good Repair Grants Program	Provides funding through a formula-based program for maintenance, replacement, and rehabilitation of the nation's rail transit systems and high-intensity motor bus systems that use high- occupancy vehicle (HOV) lanes, including BRT.					





Program	Description						
Section 5339 Buses and Bus Facilities Grants Program	Provides funding through a formula-based program and competitive grant programs to fund bus-related projects. The formula program is to replace, rehabilitate, and purchase buses and related equipment as well as to construct bus-related facilities. The competitive allocation provides funds for major improvements to bus transit systems that would not be achievable through formula allocations.						
Section 5340 Growing States and High-Density States Formula Program	Apportions additional funds by formula to Section 5307 and Section 5311 programs in Growing States and High-Density States. Eligible grant recipients in Texas receive funds for Growing States.						
USDOT Flexible Sources							
Transportation Investment Generating Economic Recovery (TIGER) Program	Provides a unique opportunity for the USDOT to invest in road, rail, transit, and port projects that promise to achieve national objectives						
National Highway Performance Program	Used for transit capital projects that will reduce delays or produce travel time savings on certain highways						
Surface Transportation Program Provides flexibility in the use of funds (as capital funding) for transportation capital improvements							
Congestion Mitigation and Air Quality Improvement (CMAQ) Program	Provides federal funding for projects that improve air quality and reduce congestion in areas that are in nonattainment of air quality standards						
Non-USDOT Federal Sources							
Food Stamp Employment and Trainin Nutrition Service	g Program from the U.S. Department of Agriculture, Food and						
Vocational Rehabilitation Grants from Administration.	the U.S. Department of Education, Rehabilitation Services						
	dicaid) for non-emergency medical transportation from the U.S. rvices, Centers for Medicare and Medicaid Services.						
Grants for Supportive Services and S Human Services, Administration on A	enior Centers (Title III B) from the U.S. Department of Health and ging.						
Community Development Block Gran Office of Community Planning and De	ts from the U.S. Department of Housing and Urban Development, evelopment.						
Workforce Investment Act programs from the U.S. Department of Labor, Employment and Training Administration.							
Veterans medical care benefits from t Administration.	he U.S. Department of Veterans Affairs, Veterans Health						



State of Texas Funding

TxDOT allocates funds according to the Texas transit funding formula. The formula allocates funds to each transit district according to need and performance:

- For urban transit districts, the allocation is 50% for need and 50% percent for performance.
- For rural transit districts, the allocation is 65% for need and 35% for performance.

For urban transit districts, 100% of the portion of the formula attributed to need is based on the population in each urbanized area. For rural transit districts, the portion of the formula attributed to need is based on the population (75%) and land area (25%) in each rural transit district.

The Need portion of urban funds are allocated in two tiers:

- **First tier:** urban transit districts that limit transit eligibility for all public transportation services to seniors and individuals with disabilities.
- Second tier: urban transit districts that provide any service to the general public.

Funds for performance are allocated based on how well a transit district performs according to specific criteria. For rural transit districts, the performance of passengers per revenue mile, revenue miles per operating expense, and local investment per operating expense are weighted equally (one-third weighting for each measure). For urban transit districts, funds are weighted as follows:

- Passengers per revenue mile: 30%
- Revenue miles per operating expense: 20%
- Local investment per operating expense: 30%
- Passengers per capita: 20%

Local Revenue Sources

Local sources of revenue that have been identified by the study are summarized in Figure D-20.

Revenue Type	Description
Fares	Revenues earned from the amount of fare the passengers pay on their own behalf, including special programs such as reduced passes or ticket prices for students, the elderly, or individuals with disabilities.
Local Contributions (Cash)	Funds allocated to transit out of general revenues of another entity that assist with paying operating and capital costs. Typically, these funds are from the government annual budgeting processes from general revenues.
Contributed Services (Non-cash)	Non-cash assets or services from another entity that benefit the transit operator, including assets or services that that benefits people outside the contributor's organization, such as building space or staff time.

Figure D-20 Summary of Identified Local Revenue Sources



Revenue Type	Description
Sales Tax	If a transit agency is independent and has the legal authority to impose a dedicated tax, this tax is called a directly levied tax. If the local or state government levies the tax for transit use, the tax is reported under local or state government sources of funds.
Auxiliary Transit Revenues	Revenues generated from the byproducts of the transit service, such as advertisements on vehicles, concessions in station areas, fees paid for transit identification cards, or fines paid for fare evasion.
Other Transportation Revenues	 Includes transportation services that are not open to the general public, such as: Charter services Exclusive school bus services
Non-Transit-Related Revenues	Funds earned from activities not associated with the provision of transit service, such as investment earnings, sales of maintenance services, rentals of revenue vehicles, rentals of transit agency buildings and property, parking fees, non-specified donations or grants, development fees, or rental car fees.
Other Contracts	Funds earned from non-federal or state contracts.

The findings of this review provide an understanding of the identified goals and objectives, transportation services, coordination gaps, and the largely pre-COVID-19 pandemic strategic direction of the various service providers and governmental and coordinating agencies in the region. The insight and findings from this review, in conjunction with the existing conditions analysis, served as foundational context for strategy development, discussed further in Chapter 6.

APPENDIX E

Quarterly Reporting Tool from TxDOT



RTCC QUARTERLY REPORTING INDEX

*adapted from TxDOT's reporting index

Goal	#	Strategy	Priority	Timeline	Lead Agency	Partner Agencies	Cost Range	Performance Measure	Status	Effort	Initial Steps	Progress Update / Notes

RTCC Quarterly Reporting Index

Goal	#	Strategy	Priority	Timeline	Lead Agency	Partner Agencies	Cost Range	Performance Measure	Status	Effort	Initial Steps	Progress Update / Notes
										-		
								-				