

INDIAN RIVER COUNTY
TRANSPORTATION DISADVANTAGED
SERVICE PLAN

FISCAL YEAR 2011 - 2012

Designated Official Planning Agency
Indian River County Metropolitan Planning Organization

Community Transportation Coordinator
Indian River County Senior Resource Association

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The Transportation Disadvantaged Local Coordinating Board hereby certifies that an annual evaluation of the Community Transportation Coordinator was conducted consistent with the policies of the Commission for the Transportation Disadvantaged and all recommendations of that evaluation have been incorporated in this Service Plan. The Board further certifies that the rates contained herein have been thoroughly reviewed, evaluated and approved. This Transportation Disadvantaged Service Plan was reviewed in its entirety and approved by this Board at an official meeting held on:

05/26/11
Date:

Coordinating Board Chairman
Commissioner Bob Solari

Approved by the Commission for the Transportation Disadvantaged

Date:

Executive Director

Transportation Disadvantaged Local Coordinating Board Members

| Agency | Representative | Vote For or Against |
|--------------------------------------------------------------------------|----------------------------|---------------------|
| Department of Children and Families | Melissa McInturff | |
| Division of Vocational Rehabilitation | Cathy Viggiano | |
| Florida Department of Veteran's Affairs | Joel Herman | |
| Florida Department of Transportation | Jayne Pietrowski | |
| Florida Association of Community Action - Economic Opportunities Council | Sue Rux | |
| Public Education Community | George Millar | |
| Elderly Representative | Toni Teresi | |
| Citizen Advocate Representative | Dr. Harry Hurst | |
| Citizen Advocate & User Representative | Kathleen Geyer | |
| Chairman-Representative of Designated Official Planning Agency (DOPA) | Commissioner Bob Solari | |
| Disabled Community Representative | William Lundy Parden | |
| Florida Department of Elder Affairs | Dalia Dillon | |
| State Coordinating Council on Early Childhood Services | Laurie Sang | |
| Florida Agency for Health Care Administration | Cindy Barnes | |
| Private Transportation Industry | Vacant | |
| Mass/Public Transit Industry | Not Applicable | |

I. DEVELOPMENT PLAN

A. Introduction to the Service Area

1. Background of the TD Program

On May 8, 1990, the Indian River County Board of County Commissioners approved the transmittal of the county's application to the state to become the local Designated Official Planning Agency (DOPA) for the provision of transportation disadvantaged planning activities in the Indian River County Area. This action initiated the county's participation in the transportation disadvantaged system.

In June of 1990, the State Commission for Transportation Disadvantaged (CTD) appointed the Indian River County Board of County Commissioners as the local Designated Official Planning Agency (DOPA) for the provision of transportation disadvantaged planning activities in the county. In August 1990, the Board of County Commissioners (BCC) appointed eleven members to the Local Coordinating Board (LCB).

On August 23, 1990, the Local Coordinating Board recommended that the Board of County Commissioners approve the submittal of a transportation disadvantaged planning grant application to the State Commission for the Transportation Disadvantaged. Acting as the DOPA for Indian River County, the Board of County Commissioners approved the grant application submittal, and the grant application was subsequently approved by the state. Not only did this grant provide funding for preparation of the Coordinated Transportation Disadvantaged Development Plan, but this grant also provided funds for staff support of the DOPA and LCB.

Among its other responsibilities, the DOPA, acting on a recommendation from the LCB must choose a local Community Transportation Coordinator (CTC). The BCC/DOPA recommended that the State Commission for the Transportation Disadvantaged (CTD) appoint the Indian River County Senior Resource Association as the county's Community Transportation Coordinator. This recommendation was accepted, and the Senior Resource Association was appointed as the local CTC in October 1990. According to state regulations, the CTC must be designated every three years through a competitive bid process. In 2003, the CTD designated the Indian River County Senior Resource Association, Inc., as the county's CTC for the next five fiscal years.

Starting January 1, 2000, the Indian River County Metropolitan Planning Organization became the county's Designated Official Planning Agency. The designation of the MPO as the DOPA is consistent with the state law and regulations.

DESIGNATED OFFICIAL PLANNING AGENCY (D.O.P.A.)

The Designated Official Planning Agency is the official agency designated by the Transportation Disadvantaged Commission to fulfill the functions of transportation disadvantaged planning. According to Chapter 427, Florida Statutes, and Rule 41-2, the Designated Official Planning Agency has the following responsibilities and duties.

- * Recommend the Community Transportation Coordinator for approval by the Commission for the Transportation Disadvantaged;
- * Appoint Local Coordinating Board members;
- * Provide staff and resources for Local Coordinating Board meetings and administrative duties;
- * Develop a Coordinated Transportation Disadvantaged Service Plan;
- * Annually update the Coordinated Transportation Disadvantaged Service Plan;
- * Review the CTC's performance as evaluated annually by the LCB;
- * Approve renewal or change to the Community Transportation Coordinator on an annual basis;
- * Review LCB funding applications to the Commission for the Transportation Disadvantaged for local, state and federal funds;
- * Approve funding applications for transportation disadvantaged funds;
- * Review the LCB's Annual Operating Report;
- * Review the Community Transportation Coordinator's Memorandum of Agreement;
- * Review the LCB's Annual Budget Estimate Report.

LOCAL COORDINATING BOARD (L.C.B.)

The purpose of a Local Coordinating Board (LCB) is to identify local transportation disadvantaged service needs and provide information, advice, and direction to the community transportation coordinator on the coordination of transportation disadvantaged services. According to Chapter 427, Florida Statutes, and Rule 41-2, a Transportation Disadvantaged Local Coordinating Board has the following responsibilities and duties.

- * Review and approve the community transportation disadvantaged service plan, including the Memorandum of Agreement (MOA), prior to submittal to the TDC;
- * Evaluate services provided in meeting the approved coordinated transportation plan;
- * Conduct an annual performance evaluation of the Community Transportation Coordinator (CTC) and forward the results of the evaluation to the BCC/DOPA and CTD;
- * In cooperation with the CTC, review and provide recommendations to the CTD on all funding applications affecting the transportation disadvantaged;

- * Consolidate the Annual Budget Estimates of all anticipated federal and local governments funds to be provided for transportation disadvantaged services in the county and forward same to the Board of County Commissioners/DOPA and CTD;
- * Review the coordination strategies of service provision to the transportation disadvantaged in the county and develop inter and intra county agreements to improve coordination;
- * Evaluate multi-county or regional service opportunities;
- * Seek the involvement of the private and public sector, volunteers, public transit, school districts, elected officials and others in any plan for improved service delivery;
- * Review coordination strategies for transportation disadvantaged services in the area to seek innovative ways to increase ridership to a broader population;
- * Jointly develop with the CTC applications for available transportation disadvantaged funds;
- * Appoint a Grievance Subcommittee and develop procedures to process, investigate and resolve complaints or recommendations for improvement of services from agencies, users, or potential users of the system in the county;
- * Maintain and provide LCB minutes to the CTD and chair of the BCC/DOPA.

Local Coordinating Board Membership -

Chapter 427, Florida Statutes, and Rule 41-2, Florida Administrative Code, specifically outline the mandated requirements of a Local Coordinating Board's structure and duties. According to those regulations, the Coordinating Board must consist of sixteen (16) voting members.

The Transportation Disadvantaged Commission's "Coordinating Board Operating Guidelines", provide guidance to a DOPA in establishing its LCB. As per those guidelines, a DOPA should appoint individuals to the LCB who have positions of responsibility within an agency at a level high enough to allow them to respectively represent their agency during Coordinating Board discussions and votes. Specifically, the guidelines recommend that a Coordinating Board consist of the following voting members:

- (1) A member of the DOPA who is an elected official to serve as the official chairperson for all Coordinating Board meetings;
- (2) A representative of the Florida Department of Transportation;
- (3) A representative of the Florida Department of Children and Families;
- (4) A representative of the Public Education Community;
- (5) A representative of the Florida Department of Labor and Employment Security;

- (6) A person who is recognized by the Florida Department of Veteran's Affairs as a representative of the veterans in the service area;
- (7) A person who represents the economically disadvantaged and is recognized by the Florida Association for Community Action (President) as their Representative;
- (8) A person over sixty years of age representing the elderly in the service area;
- (9) A handicapped person representing the handicapped in the service area;
- (10) A representative who is recommended by the state coordinating council of early childhood services;
- (11) A representative of the Florida Department of Elder Affairs;
- (12) A representative of the local private for-profit transportation industry; and
- (13) A representative of the Mass/Public Transit Industry
- (14) A representative of the Florida Agency for Health Care Administration
- (15 and 16) Two citizen advocate representatives, one must represent a user of the system.

Additional non-voting members may be appointed by the DOPA.

As structured by the Indian River County DOPA, the LCB membership is consistent with the CTD's guidelines. Currently, there are two vacancies on the LCB—one for a representative of the private transportation industry and a citizen's advocate/user. A representative for Mass/Public Transit Industry is not applicable for the county.

COMMUNITY TRANSPORTATION COORDINATOR (C.T.C)

A Community Transportation Coordinator plays a vital role in providing transportation disadvantaged services to the community. As stated in the definitions, a CTC must ensure that transportation services for the disadvantaged are coordinated among the service providers. According to Chapter 427, Florida Statutes, and Rule 41-2, a Community Transportation Coordinator has the following responsibilities/duties:

- * In cooperation with the LCB develop, implement and monitor a Community Transportation Disadvantaged Service Plan;
- * Execute uniform contracts for services using a standard contract, which includes performance standards for operators (may subcontract or broker services) with LCB approval;
- * Collect annual operation data for submittal to the commission;

- * Review operator contracts annually with LCB;
- * Prepare an annual operation report to be submitted to the Commission for the Transportation Disadvantaged by October 1 of each year (prior to submittal, report must be approved by the Local Coordinating Board and the Designated Official Planning Agency);
- * Approve and coordinate utilization of school bus and public transit services in accordance with the TD Service Plan;
- * In cooperation with the LCB review the utilization of all federal, state and local funds for transportation disadvantaged, and jointly develop cost-effective coordination strategies;
- * In cooperation with the LCB develop and negotiate, implement, monitor an annual MOA which includes a TD Service Plan, service delivery forms, and conditions agreed upon between the CTC and all agencies using federal, state and local monies for submittal to the commission;
- * Conduct the overall administration, monitoring, coordination, arrangement and delivery of transportation disadvantaged services;
- * Ensure compliance with minimum state liability insurance requirements;
- * Ensure compliance with minimum state operation and service safety requirements;
- * Ensure compliance with any applicable state or federal laws relating to drug testing or any TDC approved drug testing policy.
- * In cooperation with the LCB and pursuant to criteria developed by the Commission for the Transportation Disadvantaged, establish priorities with regard to the recipients of non-sponsored TD services that are purchased with TD trust fund money.
- * Have full responsibility for the delivery of transportation services for the transportation disadvantaged.

2. Designation Date & System History

In order to provide the most cost effective, efficient transportation services to the transportation disadvantaged population of the State of Florida, the Florida Legislature enacted Chapter 427, F.S. in 1979. This Statute calls for the coordination of transportation services for the transportation disadvantaged (elderly, handicapped and economically disadvantaged) in every county in the state. Under Chapter 427, an Administrative Rule (Rule 41-1) was promulgated setting forth the detailed requirements to implement coordination.

Chapter 427 and Rule 41-2 call for the designation of a Community Transportation Coordinator (CTC). As the Designated Official Planning Agency (DOPA), the Indian River County Board of County Commissioners, in October 1990, appointed the Indian River County Senior Resource

Association, Inc. (SRA), formerly known as the Indian River County Council on Aging, to take this responsibility.

Transportation for senior citizens and other transportation disadvantaged persons was one of the original goals of the Indian River County Senior Resource Association as defined in its Charter in 1974. Since the SRA's purchase of its first 15-passenger van in 1975, the transportation program has grown continuously. The Association now operates 57 vehicles throughout all of Indian River County. Fifty-three vehicles are equipped with wheelchair lifts, all of which are buses or hi-top conversion vans suitable to serve the elderly and handicapped. Vans and buses have been purchased with federal capital funds (Section 5310, Section 5311, and Section 5307), FDOT corridor grant funds, as well as local contributions.

In addition to the Senior Resource Association, the Abilities Resource Center also provides transportation service to transportation disadvantaged persons. Together, these two organizations comprise the coordinated system for transportation disadvantaged services.

The Abilities Resource Center (formerly known as the Association for Retarded Citizens) is a non-profit organization that began as two separate organizations in mid 1970. One organization was known as the Vocational Training and Sheltered Workshop in Indian River County, Inc., and the other was the Association for Retarded Citizens. Both non-profit groups were interested in providing services for the handicapped. The Workshop provided services, while the ARC provided programs for children. The common thread of the two groups was that of "services for the handicapped".

In the 1980's, the two groups merged and retained the name of the Association for Retarded Citizens (ARC). The range of services included: Infant Intervention, day services for preschool aged children who were at risk, sheltered workshop experiences for handicapped adults, support work on a paper recycling crew, residential living, and transportation. The major funding source was HRS; later, the United Way accepted ARC as one of its agencies. Goodwill now also provides some workshops for the handicapped.

Indian River County is served on a daily basis from 6:30 a.m. to 5:30 p.m. Monday through Friday by the CTC using Senior Resource Association and county vehicles. At times during the day when the SRA does not have space to meet Medicaid demand and on evenings and weekends, non-emergency service is provided by Indian River Medical Center. On certain holidays, the SRA provides a duty vehicle and driver to meet non-emergency needs. CTC clients must call (772) 569-0903 to connect for long distance between 8:00 a.m. to 5:00 p.m., Monday thru Friday to schedule a return trip from out of county. Medicaid appointments require a 72-hour minimum advance reservation.

Funds for operations come from grants from Indian River County, the Commission for the Transportation Disadvantaged, Title III B (Older Americans Act), Medicaid, FDOT 5311, FTA 5307, State Block Grant, Department of Children and Families, and CCE (Community Care for Elderly) and local funds from the Cities of Fellsmere and Sebastian.

3. Organization Chart

Figure 1 shows the Transportation Disadvantaged Organization chart for Indian River County.

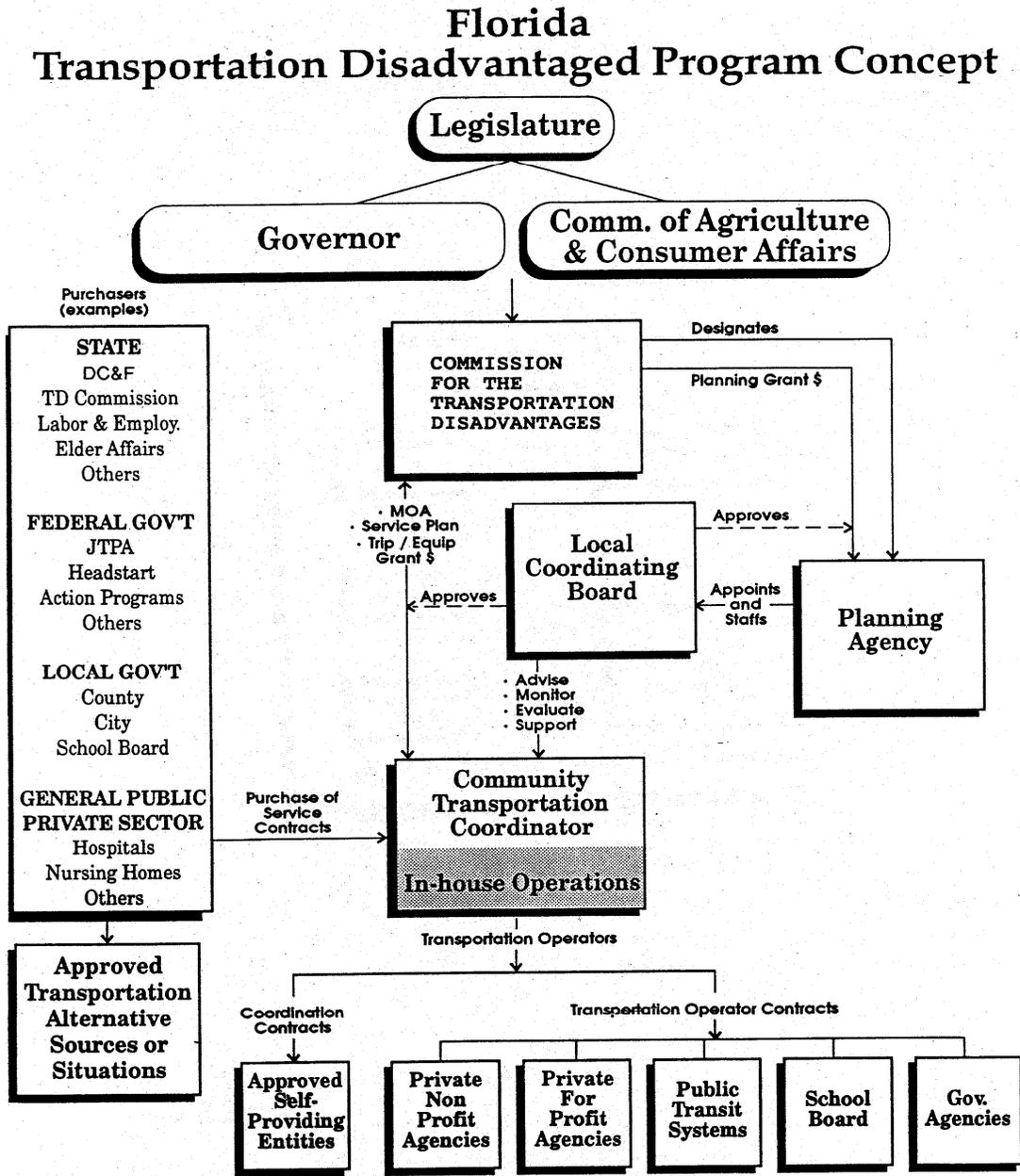


Figure 1

4. Consistency Review of Other Plans

a. Local Government Comprehensive Plans

The TDSP is consistent with the goals, objectives, and policies of the adopted Indian River County Comprehensive Plan and the comprehensive plans of municipalities in the county. The transportation element of each of these plans contains an objective to coordinate future transportation planning activities with the Florida Department of Transportation and Indian River County.

Indian River County adopted a transportation element of its comprehensive plan. The TDSP is consistent with the goal and objectives of the County's Transportation Element. The goal of the Transportation Element is stated below:

GOAL: Indian River County shall have a safe, efficient, and accessible transportation system which provides for mobility of all residents and visitors, encourages freedom of choice among alternative modes of travel, respects the natural and built environment, meets the stated needs of local jurisdictions, and is determined to be financially feasible.

b. Regional Policy Plans

The Treasure Coast Strategic Regional Policy Plan was adopted by the Treasure Coast Regional Planning Council in 1996. The Treasure Coast region includes the counties of Indian River, St. Lucie, Martin, and Palm Beach. The TDSP is consistent with the Treasure Coast Strategic Regional Policy Plan.

Goal 19 of the Regional Comprehensive Policy Plan addresses transportation issues of the region. The TDSP specifically relates to the following policies in the Regional Plan's transportation section:

POLICY 19.1.1.4 The expansion of mass transit service in the Treasure Coast Region shall be supported by assisting local governments in applying and qualifying for federal assistance funding where consistent with other regional policies.

POLICY 19.1.2.1 Services which improve the mobility opportunities for transit dependent groups, especially the poor, the handicapped, the aged, and the young, shall be provided.

POLICY 19.1.2.2 Transportation disadvantaged services in all counties shall be coordinated with existing or planned public transit systems.

c. Transit Development Plan

The Transit Development Plan (TDP), prepared and adopted by the Indian River County MPO, describes the area's transit needs for the next five years. Section 341.052, Florida Statutes requires that transit providers who receive a Public Transit Block Grant must complete a Transit

Development Plan, and Rule 14-73, Florida Administrative Code, states the required elements of a Transit Development Plan:

1. an identification and listing of community goal and policies with respect to transportation and land use in general and specifically to transit service and will be evaluated by the Local Coordinating Board.
2. an analysis of services currently provided in the community by public and private transit service providers. The analysis must identify any variation between the identified transit needs and the services provided, and must present alternatives for addressing deficiencies. Public participation must be used in selecting alternatives for implementation
3. a five-year program for implementing the alternative selected; the first two years of which may be described in more detail than the last three
4. consistency with approved local government comprehensive plans and the MPO's long range transportation plan

The TDP, developed through community involvement, analyzes the current opportunities for transit, provides a community goal and objectives for transit, and presents an improvement plan to lead the transit system toward the stated transit goal.

d. Commission for the Transportation Disadvantaged 5Yr/20Yr Plan

The TDSP is consistent with the Commission for the Transportation Disadvantaged Plan.

e. MPO Long Range Transportation Plans

The TDSP is consistent with the Indian River County Metropolitan Planning Organization's adopted 2030 Long Range Transportation Plan, specifically the following goals:

- GOAL 1: A connected, responsive, aesthetically pleasing, and efficient transportation system that meets the needs of Indian River County residents, visitors, and businesses.
- GOAL 2: Viable travel alternatives which enhance mobility.
- GOAL 3: A transportation system that is sensitive to the natural and social environment.

f. Transportation Improvement Program

Each year, the Indian River County MPO adopts a five-year Transportation Improvement Program (TIP), which lists all state and federally funded transportation projects in the county. Funding for transportation disadvantaged service and fixed route transit service is included in the TIP.

5. Local Coordinating Board Certification

INDIAN RIVER COUNTY COORDINATING BOARD MEMBERSHIP CERTIFICATION

Name (MPO/DOPA): Indian River County Board of County Commissioners
 Address: 1801 27th Street, Vero Beach, FL 32960

The Metropolitan Planning Organization/Designated Official Planning Agency named above hereby certifies to the following:

1. The membership of the Local Coordinating Board, established pursuant to Rule 41-2.012(3), FAC, does in fact represent the appropriate parties as identified in the following list; and
2. The membership represents, to the maximum extent feasible, a cross section of the local community.

| REPRESENTATION | MEMBER'S NAME | ALTERNATE'S NAME |
|----------------------------------|----------------------|------------------|
| 1. Chairman | Comm. Bob Solari | |
| 2. Seniors | Toni Teresi | |
| 3. Disabled | William Lundy Parden | |
| 4. Citizen Advocate | Dr. Harry Hurst | |
| 5. Citizen Advocate/User | Vacant | |
| 6. Veteran Services | Joel Herman | Becky Mitchell |
| 7. Community Action | Sue Rux | Jackye Jennings |
| 8. Public Education | George Millar | Al Davis |
| 9. FDOT | Jaclyn Meli | Larry Merritt |
| 10. FDC&F | Ellen Higinthotham | |
| 11. FDLES | Cathy Viggiano | Tina Herzik |
| 12. FDEA | Hylan Bryan | |
| 13. FAHCA | Cindy Barnes | |
| 14. State Coordinating Coun. | Laurie Sang | Kathleen Hiro |
| 15. Private Transp. Industry | Vacant | |
| 16. Mass/Public Transit Industry | N/A | |

SIGNATURE: _____

DATE: 5/27/10

B. Service Area Profile/Demographics

1. Service Area Description

As shown in Figure 2, Indian River County is the northernmost of the five counties in FDOT District 4.

In recent decades, Indian River County has experienced tremendous population growth - an increase of 25% since 2000. According to the Bureau of Economic and Business Research, all of this growth was attributable to migration. With 141,475 citizens in the county in 2009, 27% of them over the age of 65, and many in that age group unable to transport themselves, Indian River County has a high number of transportation disadvantaged persons.

Vero Beach, Sebastian, and Fellsmere are the primary population centers, with a large minority population living in the Gifford, Wabasso, Oslo, Florida Ridge, and Fellsmere areas.

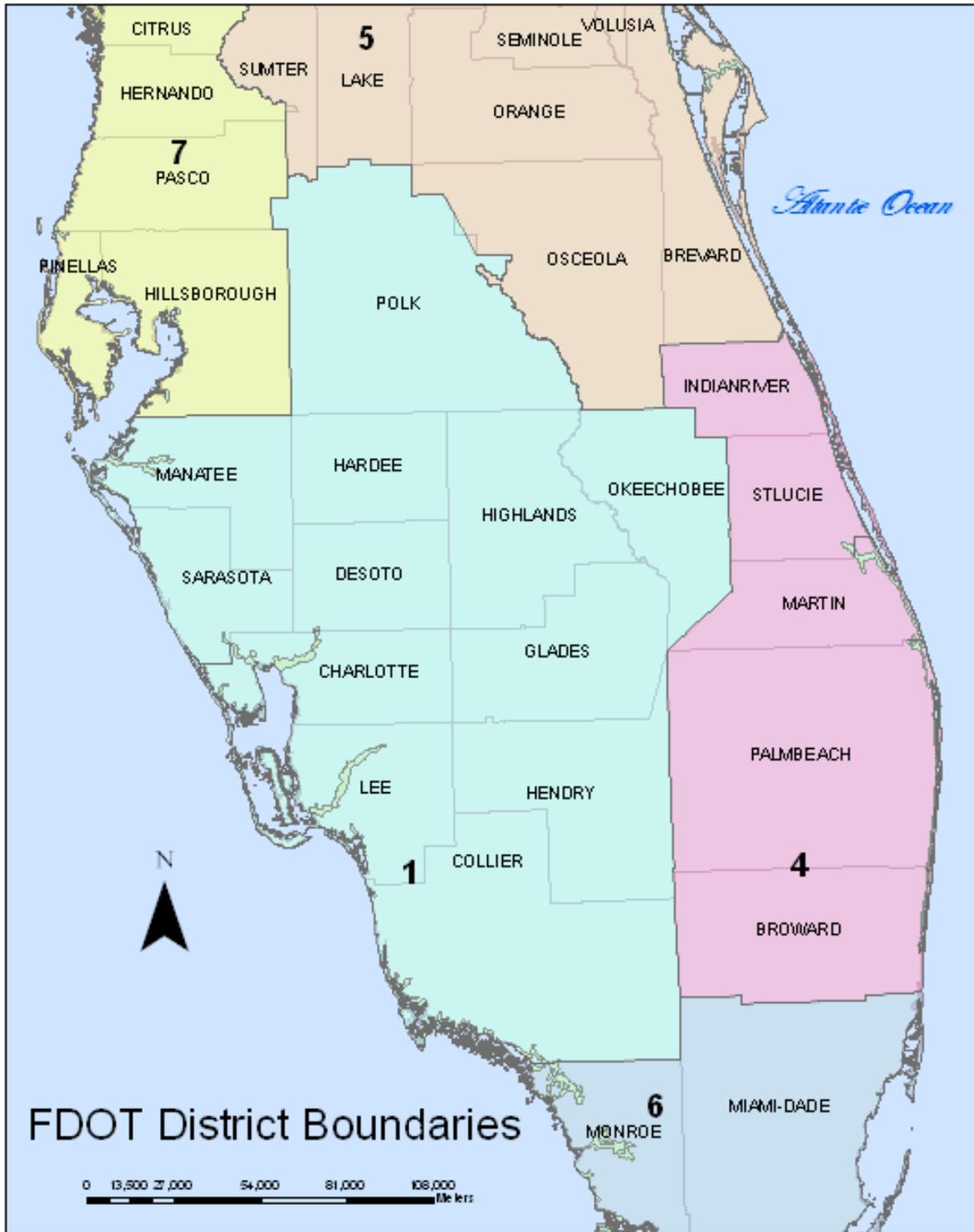


Figure 2

Using 57 vehicles including seven passenger mini-vans, lift equipped van conversions, hi-top van conversions, and 25' and 31' cutaway buses, the Coordinated Transportation System traveled over 900,000 miles last year. The total number of rides each month approximates 60,000 one-way trips.

Using both Fixed Route and Paratransit service, the Coordinated Transportation System serves local Business, Public Health, Mental Health, Social Security, Unemployment, Job Service, New Horizons, WIC, AFDC, County Administration services, County Welfare, County libraries, Medical facilities for treatment and therapy, in and out of county Medicaid providers, nutrition sites providing congregate meals, shopping, and social needs.

Services provided by the Coordinated Transportation System fit the context of a coordinated service system. Services are accessible and acceptable to all client groups, regardless of race, religion or ethnic background. Efforts are constantly made through door-to-door outreach and client input to improve the levels of service to low-income persons and minorities. Efforts are taken to make them aware of services offered. Continual efforts are made to seek out and service all handicapped, especially the non-ambulatory, deaf and blind.

a. Communities in Service Area

Figure 3 shows the communities in the service area. These communities are: Sebastian, Vero Beach, Fellsmere, Indian River Shores, and Orchid.

2. Demographics

a. Land Use

Current and future land use patterns have a substantial influence on the characteristics of transit systems. Land use characteristics such as development type and density provide an indication of the present and future transit demand.

In terms of population density, Indian River County is a low-density community. With 347,520 acres in the county as a whole, the overall population density was approximately 0.33 persons per acre in 2000 and 0.41 persons per acre in 2009. Since most of the development has taken place in the eastern one-third of the county, a more appropriate measure would consider the population density of the urbanized area, the land east of I-95. Using the land area of the urbanized area of the county (about 80,000 acres), the overall population density was only about 1.41 persons per acre in 2000 and 1.77 persons per acre in 2009.

b. Demographics

Population

One of the key components of any successful planning effort is the projection of future conditions. In the development of a plan, an understanding of the future population and the forces that influence

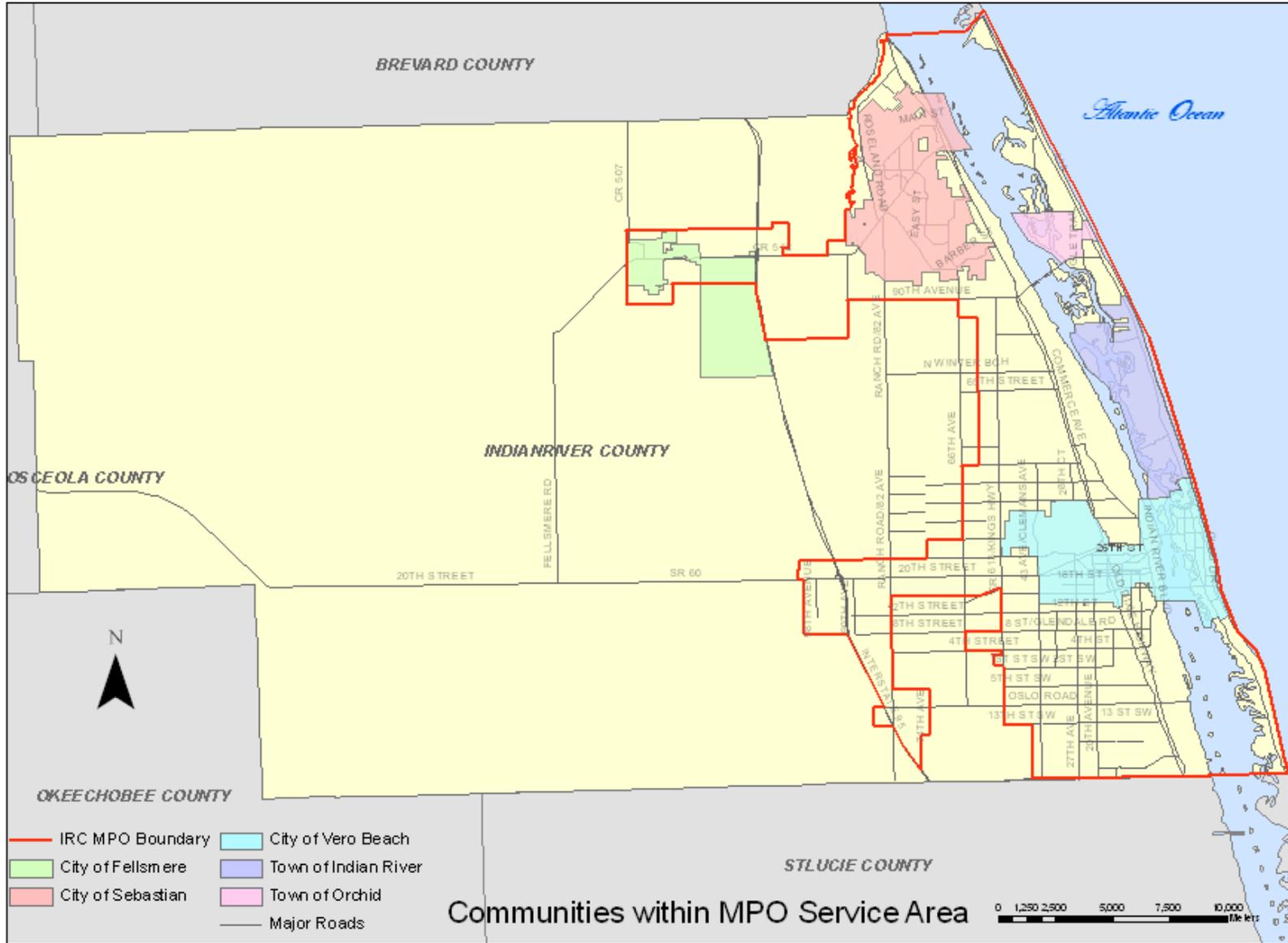


Figure 3

population growth is essential. Before projecting the future population, however, it is necessary to first study historic and current population patterns and identify the trends that will direct future growth.

The following analysis of population is intended to provide an assessment of the amount and direction of growth of Indian River County. The discussion of population focuses on three factors: historic population, current trends, and population projections. Each of these builds upon the other to provide the foundation upon which the plan rests. The historic population provides an insight to the development and growth, which has resulted in the current status of the community. Together with the current assessment, past trends provide the basis for formulating population projections.

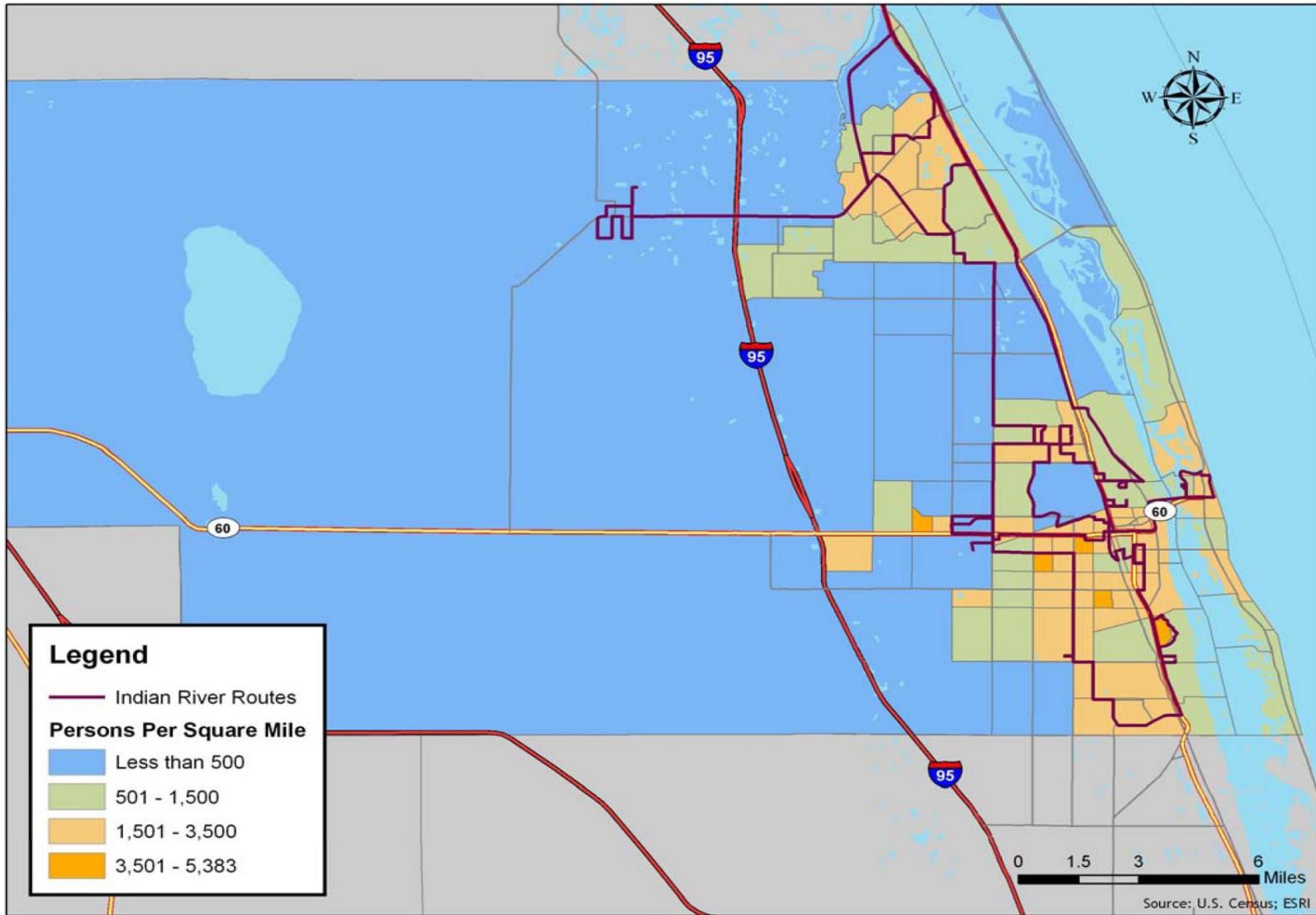
Population analysis is important since the transportation-disadvantaged segment of the community is a component of the entire population. By examining factors such as population increase, age, education, race, income, and unemployment, a general estimate of the transportation-disadvantaged population can be derived. This population analysis addresses the entire Indian River County area as shown on Figure 4.

The historic population of Indian River County from 1930 to 2009 is shown in Table 1. This chart also provides the numerical and percentage increase of population for each 10 year increment during that period. The data indicate that Indian River County has experienced tremendous growth since its formation in 1925. Overall, the county population has experienced over a 2,000 % increase, from 6,724 in 1930 to 141,475 in 2009.

Table 1
Historic Population 1930-2009, Indian River County

| Year | Population | 10 year Increase | % Increase |
|-------------|-------------------|-------------------------|-------------------|
| 1930 | 6,724 | | |
| 1940 | 8,957 | 2,233 | 33.2 |
| 1950 | 11,872 | 2,915 | 32.5 |
| 1960 | 25,309 | 13,437 | 113.2 |
| 1970 | 35,992 | 10,683 | 42.2 |
| 1980 | 59,896 | 23,904 | 66.4 |
| 1990 | 90,208 | 30,312 | 50.6 |
| 2000 | 112,947 | 22,739 | 25.20 |
| 2001 | 115,716 | ----- | ----- |
| 2002 | 118,149 | ----- | ----- |
| 2003 | 121,129 | ----- | ----- |
| 2004 | 126,796 | ----- | ----- |
| 2005 | 130,043 | ----- | ----- |
| 2006 | 135,215 | ----- | ----- |
| 2007 | 139,757 | ----- | ----- |
| 2008 | 141,667 | ----- | ----- |
| 2009 | 141,475 | ----- | ----- |

Sources: U.S. Census Bureau and Bureau of Economic and Business Research



Population Density By Block Group (2006)

Source: 2008 TDP Update, Stanley Consultants & the Center for Urban Transportation Research

Figure 4

Components of Population Change -

Population growth is the result of two processes: natural growth and migration. Natural growth consists of births minus deaths. A population with a high proportion of younger persons and/or a high birth rate is likely to have positive natural growth, whereas a population with a high proportion of older persons and/or a low birth rate is likely to experience a decrease in population. Migration, on the other hand, is the movement of people from one location to another. Many factors contribute to the decision to relocate to another area; these include economic, health and family factors, to name a few. Florida, like many other Sunbelt states, has received a great number of new residents from other regions of the country. Table 2 identifies the components of growth in Indian River County. Since 1980, more than 98% of the county's population growth has been the result of migration. The growth pattern for Indian River County from 1970-2000 indicates an increase in the percentage of growth due to migration, and it is evident that this growth affects the number, type, and location of transportation-disadvantaged persons in the county.

Table 2
Components of Population Change 1970 – 2000, Indian River County

| Period | Natural Increase | % | Migration | % |
|-----------|------------------|-------|-----------|-------|
| 1970-1975 | 423 | 4.1 | 9,839 | 95.9 |
| 1975-1980 | 321 | 2.4 | 13,321 | 97.6 |
| 1980-1990 | 426 | 1.4 | 29,886 | 98.6 |
| 1990-2000 | -2,554 | -11.2 | 25,293 | 111.2 |

Source: University of Florida, Bureau of Economic and Business Research

Socioeconomic Characteristics

With respect to estimates and projections of the size and distribution of the transportation-disadvantaged population, certain characteristics of the population are even more important than overall population estimates and projections. Several characteristics in particular, including age, income, education, and race, provide a basis for estimating and projecting the transportation disadvantaged population.

- Age - Age is one indicator of the transportation-disadvantaged population. For example, the segment of the population which is 65 years and older has a high incidence of being transportation disadvantaged. Because many people in that age group are unable to transport themselves, that age category has a high number of transportation disadvantaged people.

The data in Tables 3 and 4 show the numerical and percentage breakdown of the county population by age and over time. While all age groups increased in size in each ten-year census period, there are certain differences that can be observed. The most notable difference is in the oldest age group, 65+, which has nearly doubled in each period, resulting in a 99-fold increase within 1930 to 2000. By contrast, the two youngest groups have increased by factors of 7.2 for those under 5, and 9.3 for those between 6 and 19.

Table 3
Age of Population 1930 – 2000, Indian River County

| Year | Under 5 | 6-19 | 20-34 | 35-64 | 65+ | Total |
|------|---------|--------|--------|--------|--------|---------|
| 1930 | 729 | 2,009 | 1,711 | 1,940 | 334 | 6,724 |
| 1940 | 766 | 2,535 | 2,270 | 2,770 | 616 | 8,957 |
| 1950 | 1,323 | 2,871 | 2,517 | 4,115 | 1,046 | 11,872 |
| 1960 | 2,794 | 6,476 | 4,017 | 8,493 | 3,529 | 25,309 |
| 1970 | 2,824 | 9,861 | 5,478 | 11,578 | 6,251 | 35,992 |
| 1980 | 3,837 | 11,674 | 11,769 | 20,392 | 12,224 | 59,896 |
| 1990 | 4,918 | 14,447 | 15,929 | 30,322 | 24,592 | 90,208 |
| 2000 | 5,259 | 18,772 | 14,859 | 41,085 | 32,972 | 112,947 |

Source: U.S. Bureau of Census, Census of Population

Table 4
Percent of Population by Age 1930 – 2000, Indian River County

| Year | Under 5 | 6-19 | 20-34 | 35-64 | 65+ |
|------|---------|------|-------|-------|------|
| 1930 | 10.7 | 29.9 | 25.5 | 28.9 | 5.0 |
| 1940 | 8.6 | 28.3 | 25.3 | 30.9 | 6.9 |
| 1950 | 11.1 | 24.2 | 21.2 | 34.7 | 8.8 |
| 1960 | 11.0 | 25.6 | 15.9 | 33.6 | 13.9 |
| 1970 | 7.9 | 27.4 | 15.2 | 32.2 | 17.3 |
| 1980 | 6.4 | 19.5 | 19.6 | 34.1 | 20.4 |
| 1990 | 5.4 | 16.0 | 17.7 | 33.6 | 27.3 |
| 2000 | 4.7 | 16.6 | 13.1 | 36.4 | 29.2 |

Source: U.S. Bureau of Census, Census of Population

The percentage of the total population contained in each age group provides a better indication of the aging of the population. Once again, the most obvious trend occurs in the over-65 age cohort. This group has consistently commanded a larger share of the population and has increased from just 5% of the total in 1930 to over 29% in 2000. The only other group that has increased is the 35-64 age group; this group increased from 28.9% in 1930 to 36.4% in 2000. The two youngest age groups have both declined as a percent of the total population. The age group in the workforce, those between 20 and 65, has remained fairly consistent over time, with 54.4% in 1930 and 49.5% in 2000. Therefore, it is the pre-school and school age population, those under 20 years old, which have lost ground to the elders. Those population groups under 20 years of age represented only 21.3% of the total in 2000, compared with 40.6% in 1930, despite a numerical increase of nearly 21,293 persons during the 1930 to 2000 period.

Indian River County's population is older than that of Florida and the United States as is evident from Table 5. The median age of the county population in 2000 was 47 years, while in 1980 it was 39.6 years. This represents an increase of 7.4 years from 1980 to 2000. According to Census Bureau estimates released in 2009, the percent of the county's population aged 65 or above has increased slightly since 2000.

Table 5
Median Age 1970 - 2000

| | 1970 | 1980 | 1990 | 2000 |
|---------------------|------|------|------|------|
| United States | 27.9 | 30.9 | | 35.7 |
| Florida | 32.3 | 34.7 | 36.4 | 38.7 |
| Indian River County | 34.5 | 39.6 | 44.0 | 47.0 |
| Martin County | 39.6 | 43.0 | 44.5 | 47.3 |
| Palm Beach County | 35.5 | 40.2 | 39.9 | 41.8 |
| St. Lucie County | 31.4 | 34.0 | 37.9 | 42.0 |

Source: Bureau of Census, Census of Population

- Race – Race or minority status, in conjunction with other factors, is an indicator of an area's transportation disadvantaged population. For that reason, the racial composition of the county's population must be examined.

The racial makeup of the county population has changed over time. As indicated in Table 6, the percentage of blacks decreased from 28.7% of the population in 1930 to 8.09% in 2000. During the same period, the white population increased from 71.28% to 83.44%. In addition to these groups, the 2000 Census lists 7,381 or 6.53% as Hispanic and Latino, and 2,173 persons or 1.92% of the county population as other races including American Indian, Asian, Pacific Islander, and others.

According to the Census Bureau estimates for 2008, the black population has increased slightly to 8.95% of the county while the Hispanic/Latino population has increased significantly to 10.27%.

Table 6
Racial Composition 1930-2000, Indian River County

| | White | % | Black | % | Hispanic/Latino | % | Other | % |
|------|--------|-------|-------|------|-----------------|------|-------|------|
| 1930 | 4,793 | 71.28 | 1,931 | 28.7 | | | - | |
| 1940 | 6,288 | 70.20 | 2,669 | 29.8 | | | - | |
| 1950 | 9,180 | 77.30 | 2,962 | 29.0 | | | - | |
| 1960 | 19,920 | 78.70 | 5,380 | 21.3 | | | 9 | |
| 1970 | 29,409 | 81.70 | 6,514 | 18.1 | | | 69 | 0.2 |
| 1980 | 51,172 | 85.40 | 7,765 | 13.0 | | | 959 | 1.6 |
| 1990 | 81,418 | 90.25 | 7,660 | 8.5 | | | 1,130 | 1.25 |
| 2000 | 94,250 | 83.44 | 9,143 | 8.09 | 7,381 | 6.53 | 2,173 | 1.92 |

Source: U.S. Bureau of Census, Census of Population

- Income - Income is one of the major indicators of the number of transportation-disadvantaged persons in the population. Comparisons of income utilize three income indicators: per capita income, household and family income, and incidence of poverty.

Indian River County's per capita income compares favorably to the nation and the state. In the 90's, the county has consistently been above the nation and the state; however, the margin of difference is decreasing.

**Table 7
Income And Poverty Status**

| | MHI 1969 | MHI 1979 | MHI 1989 | MHI 1994 | MFI 1969 | MFI 1979 | MFI 1989 | %PBP 1979 | %PBP 1989 | %PBP 1999 |
|-----|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------------|--------------|--------------|
| IRC | 6415 | 15101 | 28961 | 37700 | 7219 | 17607 | 33569 | 12.3 | 8.7 | 9.3 |
| FL | 7117 | 14675 | 27483 | 29294 | 8267 | 17280 | 32212 | 13.5 | 12.7 | 12.5 |
| US | | 16841 | | 32264 | | 19917 | 35225 | 12.4 | 13.1 | 11.8 |

MHI = Median Household Income /MFI= Median Family Income/ %PBP = Below Poverty Income

Source: U.S. Bureau of Census, Census of Population; Florida Statistical Abstract

Table 7 provides family and household income and the incidence of poverty for families and individuals. Just as with per capita income, household and family incomes in Indian River County were reported above state levels for 1979 and 1989. The margin of difference above state levels, in fact, increased in both categories during this period. Both the state and the county, however, remain below the national median family income.

The rate of poverty among families and persons in Indian River County remained below state and national levels. In fact, contrary to the national trend, the rate of poverty among individuals decreased at both the state and county levels.

- Households

The number of households and average household size can greatly impact planning efforts. Household size, in conjunction with income and other factors, can be an indicator of the number of transportation disadvantaged persons in the population. Since a household is defined as the person or persons occupying a dwelling unit, it is easy to understand that as the average household size decreases, the number of households increases relative to the population.

Table 9 shows the number of households and persons per household in the county. This table indicates that households have increased at a rate faster than the population as a whole. This has occurred because the average number of persons per household has decreased.

**Table 8
Households And Persons Per Household, Indian River County**

| Year | Households | Persons Per Household | | |
|------|------------|-----------------------|------|------------|
| | | % Increase | | % Increase |
| 1950 | 3,653 | 3.19 | | ---- |
| 1960 | 8,247 | 125.8 | 3.05 | -4.4 |
| 1970 | 12,329 | 49.5 | 2.90 | -4.9 |

| Year | Households | Persons Per Household | | |
|------|------------|-----------------------|------|------------|
| | | % Increase | | % Increase |
| 1980 | 23,331 | 89.3 | 2.49 | -14.1 |
| 1990 | 38,057 | 63.2 | 2.33 | -6.4 |
| 2000 | 49,137 | 29.11 | 2.25 | -3.43 |

Source: U.S. Census of Population, University of Florida, Bureau of Economic and Business Research

Due to several factors, the average household size has been decreasing in the United States. Families are having fewer children and delaying the birth of children; young adults are no longer living with parents but moving out on their own, and older persons are living longer and not returning to their children in their later years. Combined, these factors have led to a decrease in the average household size both nationally and in Indian River County. The county's average household size is smaller than the state's but larger than that of the Treasure Coast region.

c. Economy

There are many factors in the economy that affect the number of transportation disadvantaged persons in the population. Overall, however, the health of the local economy can greatly influence the stability and quality of life in the county. Indicators of local economic conditions include: unemployment, employment by major industrial sectors, and earnings in those sectors. Of these indicators, one that can be used to estimate the number of transportation disadvantaged persons is unemployment.

- Labor Force/Employment

The total labor force is normally defined as the number of people of working age (16 thru 65 years old) multiplied by labor participation rates. Table 9 displays Indian River County's total labor force and unemployment rates for the last fifteen years. Over those fifteen years, the total labor force increased by 22,297 people or 55%. During the same period, Indian River County's unemployment rate increased by 2.9 percentage points. For each of the years listed in Table 9, Indian River County's unemployment rate is well above the State of Florida's unemployment rate. In 1994, Indian River County's unemployment rate was 4.4 percentage points above the State unemployment rate. In comparison, Indian River County's unemployment rate was 2.5 percentage points above the state average in 2009.

Table 9
Labor Force And Unemployment Rate, Indian River County

| Year | Labor Force | Average Annual Unemployment Rate for IRC | Average Annual Unemployment Rate for State |
|------|-------------|------------------------------------------|--------------------------------------------|
| 1994 | 40,231 | 11.1% | 6.7% |
| 1995 | 41,172 | 9.8% | 5.5% |
| 1996 | 43,208 | 8.9% | 5.3% |
| 1997 | 44,109 | 8.1% | 5.0% |
| 1998 | 44,993 | 7.9% | 4.5% |

| Year | Labor Force | Average Annual Unemployment Rate for IRC | Average Annual Unemployment Rate for State |
|------|-------------|------------------------------------------|--------------------------------------------|
| 1999 | 45,043 | 7.5% | 4.0% |
| 2000 | 45,001 | 6.4% | 3.8% |
| 2001 | 46,700 | 7.3% | 4.7% |
| 2002 | 49,195 | 7.9% | 5.7% |
| 2003 | 49,693 | 8.0% | 5.3% |
| 2004 | 55,398 | 7.6% | 4.7% |
| 2005 | 57,294 | 4.6% | 3.8% |
| 2006 | 59,596 | 4.2% | 3.3% |
| 2007 | 60,439 | 5.8% | 4.1% |
| 2008 | 62,237 | 8.1% | 6.2% |
| 2009 | 62,528 | 13.0% | 10.5% |

Source: Florida Agency for Workforce Innovation, Labor Market Statistics Center, Local Area Unemployment Statistics.

The county's unemployment rate is also cyclical. Generally, the unemployment rate is higher during the summer months. The cyclical rate is attributed to the seasonal nature of the citrus and tourism sectors.

- Major Employers

Table 10 demonstrates the type of employment diversity in Indian River County. Four of the twenty-two largest employers listed in Table 10 are in the service industry. Piper Aircraft and Novurania are the only manufacturing employer listed in Table 10. One of the employers listed in the top twenty-two is in agricultural related businesses, which have major fluctuations in employment depending on the time of year. In 2009, public administration employers represented three of the top twenty-two major employers in Indian River County. At the same time, retail trade employers represented two of the top twenty-two major employers in the county.

Table 10
Largest Employers 2008/2009, Indian River County

| Largest Employers in Indian River County (2009) | | | | | | | |
|-------------------------------------------------|-----------|----------------------------------------|----------------------------------------------|-----------|-----------|-----------|----------|
| 2009 Rank | 2008 Rank | Name | NAICS Major Group | Employees | | | |
| | | | | Total | Full-time | Part-time | Seasonal |
| 1 | 1 | School District of Indian River County | Educational Services (NAICS 61) | 2,147 | 2,147 | 0 | 0 |
| 2 | 2 | Indian River County | Public Administration (NAICS 92) | 1,706 | 1,548 | 98 | 60 |
| 3 | 3 | Indian River Medical Center | Health Care and Social Assistance (NAICS 62) | 1,671 | 1,093 | 253 | 325 |
| 4 | 4 | Publix Supermarkets | Food and Beverage Stores (NAICS 445) | 1,104 | 535 | 569 | 0 |

| Largest Employers in Indian River County (2009) | | | | | | | |
|-------------------------------------------------|-----------|-------------------------------------|------------------------------------------------------------------------------|-----------|-----------|-----------|----------|
| 2009 Rank | 2008 Rank | Name | NAICS Major Group | Employees | | | |
| | | | | Total | Full-time | Part-time | Seasonal |
| 5 | 5 | The New Piper Aircraft | Transportation Equipment Manufacturing (NAICS 336) | 700 | 700 | 0 | 0 |
| 6 | 7 | City of Vero Beach | Public Administration (NAICS 92) | 561 | 489 | 67 | 5 |
| 7 | 8 | John's Island | Accommodation (NAICS 721) | 475 | 250 | 50 | 175 |
| 8 | 9 | Indian River Estates | Health Care and Social Assistance (NAICS 62) | 442 | 222 | 136 | 84 |
| 9 | 10 | Wal-Mart | General Merchandise Stores (NAICS 452) | 404 | 293 | 111 | 0 |
| 10 | 6 | Sebastian River Medical Center | Health Care and Social Assistance (NAICS 62) | 380 | 380 | 0 | 0 |
| 11 | 11 | Visiting Nurse Association | Health Care and Social Assistance (NAICS 62) | 348 | 195 | 153 | 0 |
| 12 | 14 | CVS Warehouse/Distribution | Transportation and Warehousing (NAICS 47-48) | 278 | 278 | 0 | 0 |
| 13 | 12 | Grand Harbor Management | Construction (NAICS 23) & Real Estate (NAICS 531) | 312 | 208 | 73 | 31 |
| 14 | 13 | Disney's Vero Beach Resort | Accommodation (NAICS 721) | 300 | 195 | 66 | 39 |
| 15 | 16 | St. Edwards School | Educational Services (NAICS 61) | 218 | 134 | 9 | 75 |
| 16 | 17 | Sun Ag, Inc. | Agricultural, Forestry, Fishing, and Hunting (NAICS 11) | 235 | 100 | 0 | 135 |
| 17 | NR | Captain Hiram's Restaurant & Resort | Restaurant/Resort | 219 | 85 | 134 | 0 |
| 18 | 18 | City of Sebastian | Public Administration (NAICS 92) | 212 | 154 | 58 | 0 |
| 19 | 19 | Medical Data System | Collection Agency (NAICS 561440) | 186 | 171 | 15 | 0 |
| 20 | 21 | Flight Safety International | Educational Services (NAICS 611) Technical and Trade Schools (NAICS 6115) | 155 | 111 | 44 | 0 |

Source: IRC Chamber of Commerce (January 2009). Note: NR = Not Ranked

Source: IRC Chamber of Commerce (2009). Note: NR = Not Ranked Last Year

d. Major Trip Generators/Attractors

The identification of major trip generators and attractors helps determine the demand for transit. Trip production areas are those portions of the county where major residential developments are located. These developments produce trips. Trip attraction areas are locations with shopping, recreation, medical, employment, and other facilities. People are attracted to these areas by the services or facilities available there. Figures 5 show major trip production and attraction areas in the county.

The major shopping areas for the county are located in the Vero Beach area. Shopping locations include US 1 south of the downtown Vero Beach area where K-Mart is situated, SR 60 east of the downtown area where Treasure Coast Plaza and Miracle Mile Plaza are located, and the south county area where the South Vero shopping center is located. Another major shopping area is the SR 60 corridor from 58th Avenue westward to past I-95. In this area, there are a number of retail facilities, including the Ryanwood shopping center, a Wal-Mart Superstore, Sams, the Prime Outlet shopping center, a regional mall, and other proposed shopping centers. The Sebastian area is served by shops in the Sebastian downtown area, the Roseland Shopping Center, and a Wal-Mart Superstore. Other convenience shopping facilities are located throughout the county along major roadways.

Figure 6 shows the location of fixed routes serving major trip generators and attractors areas within the county. Following is a brief description of the fixed route/dial a ride and demand response systems within the county as well as scheduling and dispatching process.

Fixed Route/Door to Door Service

The Indian River County Senior Resource Association operates a scheduled, fixed route system six days per week. Service is available for all riders at no charge. There are currently 14 routes operating throughout the county on weekdays and 5 routes operating on Saturdays. The Main Transit Hub, near downtown Vero Beach, serves as a transfer facility for 7 of the 14 routes. For those areas not served by the routes above, a door to door service operates from 6:30 a.m. - 5:30 p.m. five days a week. Headways for the fixed-route system are one hour.

Demand Response

Medical demand response service is provided throughout the entire county between 6:30 a.m. and 5:30 p.m. Most pick-ups are scheduled every ½ hour for ambulatory, 45 minutes for wheelchair. Transportation services for medical clients are multiple pick-up whenever scheduling permits and individual passenger loading when required. Because of the nature of regular doctor visit trips, more than one client may be asked to share a van.

Two wheelchairs can be accommodated in the lift equipped vehicles. Clients are asked to make reservations for shopping a minimum of 24 hours in advance, and medical reservations are requested a minimum of 48 hours in advance. Medical appointments can be scheduled up to 45 days in advance.

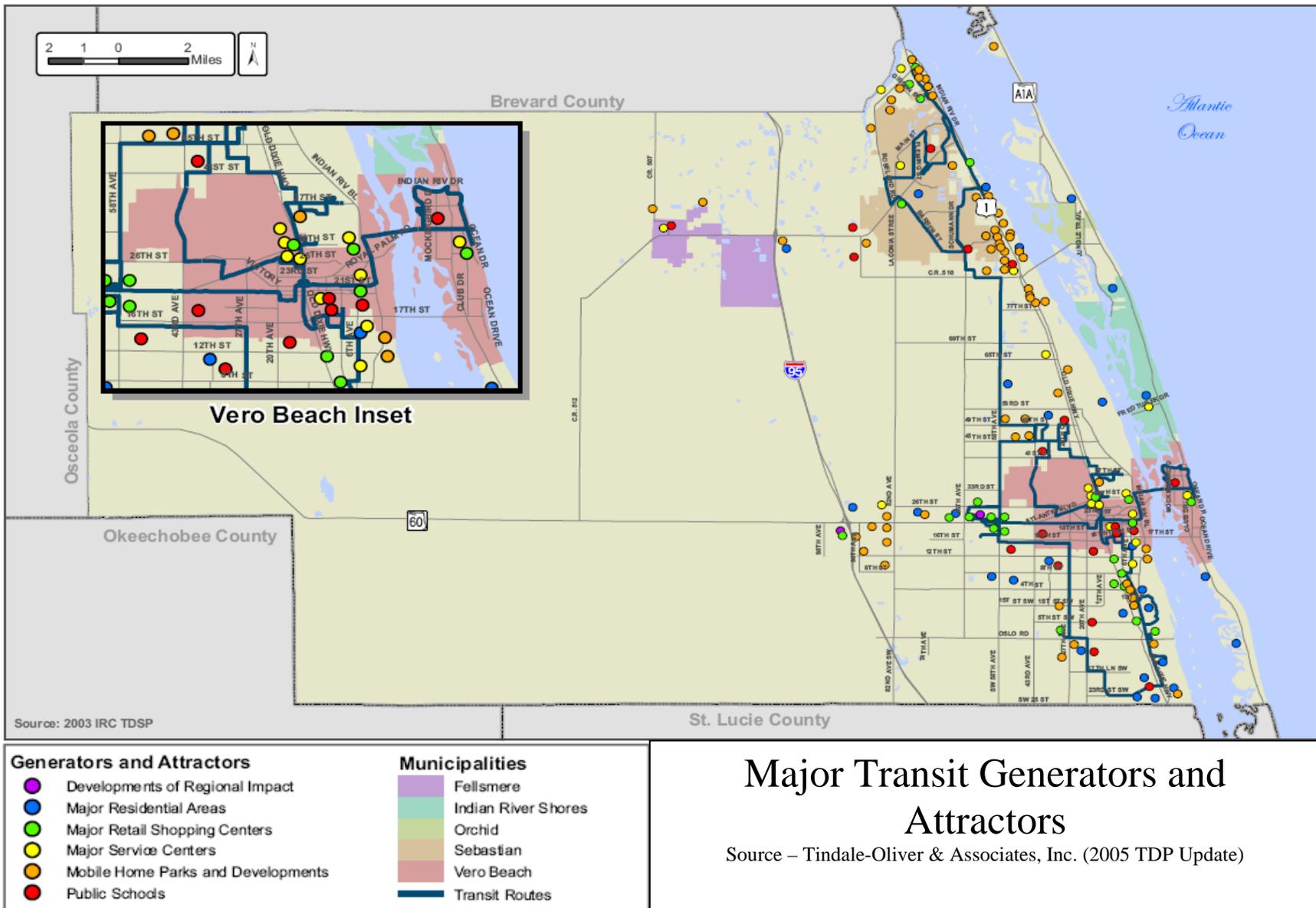
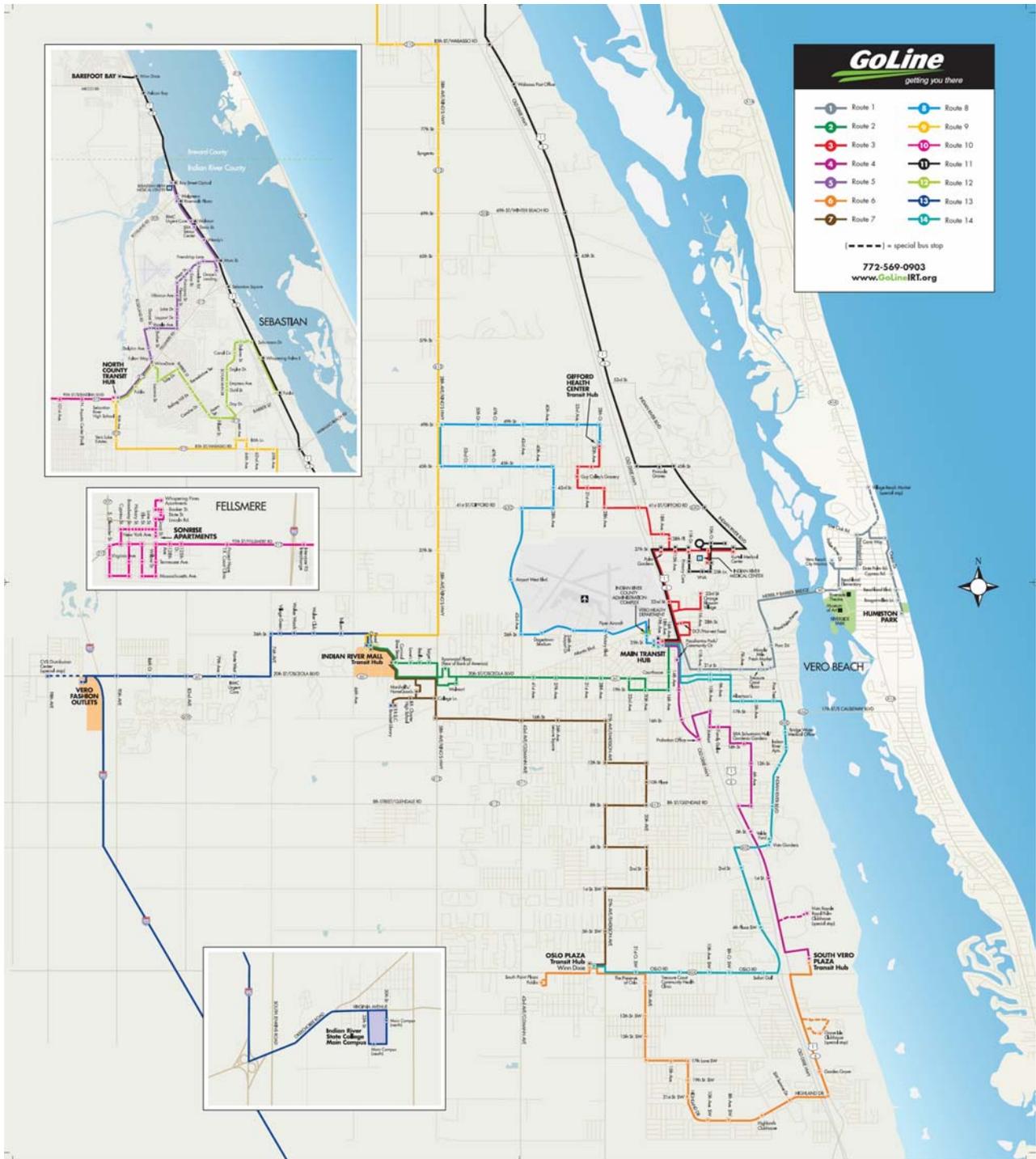


Figure 5



Fixed Route Map

Figure 6

Scheduling and Dispatching Demand Response Services

Before scheduling a trip, a client's eligibility for certain sponsored programs is determined. The minimum advanced reservation policy is as follows: for shopping trips, the advanced reservation requirement is 24 hours; for medical trips, the advanced reservation requirement is 48 hours; for Medicaid trips, the advanced reservation requirement is 72 hours.

- A. Clients are assigned to the appropriate vehicle in accordance with their geographic location.
- B. When demand response requests are received, the Office Manager determines the need for a lift-equipped vehicle. If necessary, a patient's appointment is changed to conform to transportation availability. The schedulers notify clients of any changes in appointment times.
- C. Trips are scheduled and dispatched by computer. Vehicle manifests are printed out each afternoon for the following day's schedule by 2:00 p.m.
- D. Medicaid appointments for transportation after 5:30 are scheduled on vehicles under contract for mid-day overflow, after hours, and weekend service.

Drivers are given the daily manifests on which they record the following information, and manifests are returned daily to the data entry clerk for Trip Validation:

- Beginning and ending mileage
- Beginning and ending hours
- First passenger pick-up time and mileage
- Last passenger drop off time and mileage
- Gallons of gas purchased and cost
- Verification of service for each client:
 - Each one-way trip
 - No show clients
 - Not ready
 - Cancellations
 - Denials
 - Fare Collection (Medicaid Co-Payment)

In December 1995, the Senior Resource Association became the sole authority for approval, coordination, scheduling, invoicing and payment of non-emergency Medicaid service for Indian River County residents. Additional staff was added for coordinating and monitoring Medicaid and keeping up with the coordinated system data.

3. Inventory of Available Transportation Operators in the Service Area

See Pages 45-46.

C. Service Analysis

1. Forecasts of Transportation Disadvantaged Population

The Florida coordinated Transportation System provides trips for transportation disadvantaged persons in two population groups. Following is the definition of these two population groups.

Potential TD population (TD Category I): All persons who are elderly, disabled, or low income.

TD Population: Persons who are transportation disadvantaged according to the eligibility guidelines in Chapter 427, F.S. (i.e. persons who are unable to transport themselves or to purchase transportation, and children who are “high risk” or “at risk”).

To estimate the number of persons in the county considered to be transportation disadvantaged, those portions of the general population that could potentially be transportation disadvantaged must be examined. In doing so, it is necessary to consider the components of the transportation disadvantaged population. These components include the population segment consisting of persons who are less than 16 years old, older than 60 years old, the handicapped population and other segments of the population consisting of persons who for other reasons are unable to transport themselves or to purchase transportation.

In order to develop an accurate estimate of the transportation disadvantaged population, the county examined two major groups representing transportation disadvantaged. These two groups are the disabled (handicapped) disadvantaged population, and the non-disabled low income disadvantaged population.

The handicapped population consists of all physically and mentally disabled (handicapped) individuals within the county. The non-disabled low income population consists of all individuals who, because of their income status, are unable to purchase transportation. This population segment consists of all low income persons, including the minority low income population, the unemployed low income population, and the non-minority low income population.

A significant portion of the transportation disadvantaged population consists of handicapped individuals. One group that has developed estimates of the handicapped population in each county is the Center for Urban Transportation Research (CUTR) at the University of South Florida at Tampa. CUTR has provided these estimates by age group. According to CUTR, Indian River County's percentage of handicapped persons in various age groups is: the 0-17 age group, 3.8%; the 18-44 age group, 6.3%; the 45-59 age group, 16.5%; the 60-69 age group, 36.9%; and the 70+ age group, 39%. By applying these percentages to the appropriate age group, it is estimated that there were 30,340 handicapped persons in the county in 2009.

The other portion of the county's transportation disadvantaged population is the non-disabled low income group. The number of non-disabled low income persons has been utilized as a primary indicator of the transportation disadvantaged population. Since not everyone in this group is transportation disadvantaged, the percentage of the population below the poverty level has been

utilized as a secondary indicator to get an accurate estimate of the non-disabled low income transportation disadvantaged population. The county's poverty level percentage per 2000 census data was 9.3%. This percentage has been applied to the non-disabled segment of the population to determine the number of non-disabled low income persons.

Using the county's 2009 population estimate of 141,475 persons and subtracting the estimated 30,340 handicapped persons from that amount yields an estimate of 111,135 as the county's non-disabled population. By applying the poverty level percentage of 9.3% to the non-disabled population, it is estimated that 10,336 persons are non-disabled, low-income transportation disadvantaged in 2009.

Through aggregating the estimates of the transportation disadvantaged population for each of the categories referenced above, an estimate of the county's total transportation disadvantaged population can be obtained. Based on this methodology, it is estimated that there are 71,583 TD Category I persons or 50.6% of the county's 2009 population, and 40,676 or 28.8% of the county's 2009 population as TD Category II persons.

The methodology utilized to estimate the number of transportation disadvantaged persons in the county is summarized below:

**Table 11
TD Population Estimate (2009)**

| | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------|----------------------------|---------|
| a) Total 2009 Population | | | | | 141,475 |
| b) 2000 % of population 60+ | | | | | 35% |
| c) Estimated 2009 60+ population | | | | | 49,516 |
| | | | | | |
| Age Groups | % of Pop. in Each Age Group | Pop. of Age Groups | % Disabled | Disabled Population | |
| d) 0-17 | 18.70% | 26,456 | 3.80% | 1,005 | |
| e) 18-34 | 15.52% | 21,957 | 6.30% | 1,383 | |
| f) 35-54 | 24.95% | 35,298 | 16.50% | 5,824 | |
| g) 55-64 | 13.48% | 19,071 | 36.90% | 7,037 | |
| h) 65+ | 27.35% | 38,693 | 39.00% | 15,090 | |
| | | | | | |
| i) Total Disabled Population | | | | | 30,340 |
| j) Non-Disabled Population | | | | | 111,135 |
| k) % Below Poverty Level (from 2000 census) | | | | | 9.30% |
| l) Low Income Non-Disabled Population | | | | | 10,336 |
| | | | | | |
| Potential TD population (TD Category I) = (all persons 60+) +(59 and younger disabled persons) + (non-disabled low income) = c + (d+e+f+(g/2)) + l | | | | | |
| Potential TD population (Category I) | | | 71,583 | 50.60% | |
| | | | | | |
| TD population (TD Category II) = (Disabled population) + (non-disabled low income) = i+ l | | | | | |
| Potential TD population (Category II) | | | 40,676 | 28.8% | |

Source – Indian River County MPO

Population Projections

Since population growth will determine future requirements for housing, transportation, recreation, schools and other public and private facilities and services, population projections are essential tools in any planning activity. A population projection is essentially an attempt to provide an accurate forecast of the future population; in this case a forecast of the transportation disadvantaged population. As with any other forecast, the reliability of a population projection depends on the accuracy of data, the appropriateness of the methodology and the validity of the assumptions used in preparing it.

On a yearly basis, the University of Florida, Bureau of Economic and Business Research (BEBR) prepares population projections for the state and each of the state's 67 counties. Projections for the state are made utilizing a cohort component methodology in which births, deaths, and migration are projected separately for each age-sex cohort or group. Using different assumptions, BEBR produces a high, medium, and low series of projections. It is generally believed that the medium series is most likely to produce accurate forecasts of the Florida population.

For Indian River County, BEBR medium series projections reflect an average growth rate of 1.7% through the year 2030. This projected county growth rate is lower than what recent historical data indicate. For instance, Indian River County's 2006 growth rate was 3.9 %, while the county's 2007 growth rate was 3.3%. In 2009, however, the county's growth rate fell to a negative 0.1%.

In general, about 50.6% of Indian River County's population are considered to be transportation disadvantaged category I persons and 28.8% are considered to be TD category II persons. Assuming that this percentage will remain constant in the future, projections of the county's transportation disadvantaged population can be made. Table 12 also provides an estimate of the transportation disadvantaged population.

Table 12
Transportation Disadvantaged Population Projections 2007 – 2030

| Year | Population | Potential TD Popln. Category I – 50.6% of Total | Potential TD Popln. Category II – 28.8% of Total |
|-------------|-------------------|----------------------------------------------------------------|-----------------------------------------------------------------|
| 2009 | 141,475 | 71,583 | 40,676 |
| 2010 | 142,300 | 72,000 | 40,913 |
| 2015 | 155,000 | 78,426 | 44,564 |
| 2020 | 169,300 | 85,662 | 48,676 |
| 2025 | 183,400 | 92,796 | 52,730 |
| 2030 | 196,900 | 99,626 | 56,611 |

Source: Population Projections: University of Florida (BEBR), TD Population Projections: Indian River County MPO

Based on county population distribution, it is estimated that the majority of the transportation disadvantaged population is located within the cities of Vero Beach, Sebastian, and Fellsmere, and within the areas of Vero Beach South, Florida Ridge, the State Road 60 Corridor, and Gifford. At least 90% of the transportation disadvantaged population is within these areas. Of these areas, those with a lower income and higher concentration of substandard housing, such as Gifford, Wabasso, and Oslo, have a higher percentage of transportation disadvantaged persons than other areas. Large concentrations of elderly persons are located within mobile home parks situated to the west of Vero Beach along State Road 60 east of I-95. The handicapped are generally distributed throughout the county with no major concentrations being identified.

Besides the age and handicapped factors, another factor contributing to the number of transportation disadvantaged is income. Families with incomes below the poverty level are considered to be transportation disadvantaged. Historical data show a high percentage of families with incomes below the poverty level in the Gifford, Wabasso, and Oslo areas as well as in the City of Fellsmere. The Oslo area is part of a sub-area of the county identified as Florida Ridge.

2. Needs Assessment

A transportation disadvantaged needs assessment involves comparing the supply of transportation disadvantaged services to the demand for those services. Based upon an analysis of the supply and demand for those services in Indian River County, the amount of unmet need within the county can be identified. Then, alternatives can be developed to allocate resources in a way that efficiently and effectively meets those needs.

Quantity and Type of Trips

As identified in the existing conditions section of this report, approximately 28.8% of the county's population can be categorized as transportation disadvantaged persons (category II). Accordingly, the 2009 Indian River County transportation disadvantaged category II population numbered approximately 40,676 and category I numbered approximately 71,583. These transportation disadvantaged persons reside throughout the county, with larger concentrations occurring in areas with a high percentage of families below the poverty level, areas with a major concentration of substandard housing, and areas with a higher population density.

According to the community transportation coordinator, the county's transportation disadvantaged providers served approximately 16,400 riders in FY 2008/09. As indicated in the existing conditions section of this plan, vehicles operated by the larger transportation disadvantaged service providers such as IRC Senior Resource Association are operating at full capacity.

Generally, those vehicles which operate below capacity are those where providers respond to emergencies. Currently, all non-emergency trips are provided through the coordinated transportation disadvantaged system. Coordination of services eliminates duplication and ensures that vehicles are available to provide service to a larger portion of the county's TD population.

Routes and Schedules

Due to the nature of their service, many providers are demand-oriented, transporting clients when called and requested. Given the types of clients and the nature of their trips, some of these providers could not function with fixed routes and fixed schedules. For other transportation disadvantaged clients, however trips sometimes can be more flexible. Unlike medical or work trips, shopping, recreation and other similar trips can be planned to correspond to established schedules.

Besides demand responsive service, another approach exists to meet the transportation needs of the transportation disadvantaged population. This involves establishment of a fixed route, fixed schedule system. As its name indicates, a fixed route, fixed schedule system involves buses or other vehicles which operate on set routes at regular times.

Generally, the existence of fixed routes and fixed schedules differentiates transit or mass transit from paratransit. By definition, paratransit involves demand responsive service provision. However, a designated area of service and daily schedule can be established as part of a paratransit system. To assign a fixed area, and to establish a fixed daily schedule system, several factors must be considered. These include:

- Location of major residential developments including mobile homes
- Location of major medical and social facilities
- Location of educational facilities
- Location of major shopping centers
- Location of clients for major providers and purchasers

These and other factors are determinants as to whether a fixed area, fixed schedule system is economical and feasible. The CTC and the major provider in the county, the Senior Resource Association, has established a fixed route schedule service. By using generalized service areas, the SRA consolidates trips and maximizes vehicle usage.

One problem with the SRA's current transportation disadvantaged service provision seems to be with some clients who do not adhere to certain operating procedures. One such procedure requires advance reservation for trips, whenever possible. According to SRA staff, however, some clients, particularly Medicaid clients, fail to call the SRA to schedule a trip until the last possible time - often only 15 minutes before a doctor's appointment that may have been made months in advance.

While adherence to operating procedures will enhance transportation disadvantaged service in the county, there is a need to further refine the route structure and service area system in order to increase efficiency and achieve economy. Any such changes to routes and service areas must correspond to geographic levels of demand.

It is the responsibility of the CTC to develop an efficient and economic means to provide transportation disadvantaged services and to effectively use its resources and the resources of other

providers to accomplish this. Table 13 identifies attractors and clients by service area to show the geographic distribution of demand.

Table 13
Generalized Areas for Provision of a Coordinated Transportation Disadvantaged Service

| Major Location of TD Persons | % of TD Persons | Attractors | Service Area |
|--------------------------------------|-----------------|-----------------------------------------------------------------------|------------------------|
| Gifford | 30 | -Medical Facilities -Social Service Agencies -Shopping Centers | North |
| Wabasso Fellsmere Winter Beach | 24 | -Medical Facilities - Social Service Agencies -Shopping Centers | North |
| Florida Ridge Vero Beach South | 20 | -Medical Facilities -Social Service Agencies -Shopping Centers | South |
| S.R. 60 Corridor Vero Beach | 10 | -Medical Facilities -Social Service Agencies -Shopping Centers | West/Central and Beach |
| Barrier Island | 3 | -Medical Facilities -Shopping Center | Central and Beach |
| Sebastian Roseland | 10 | -Medical Facilities -Social Service Agencies -Shopping Center | North |
| Unallocated portion of the county | 3 | -Medical Facilities -Social Service Agencies -Shopping Center | |
| Total | 100% | | |

Analysis of Supply Versus Demand

As indicated earlier, it is estimated that the demand for transportation disadvantaged service in Indian River County is more than the existing transportation disadvantaged service system's capacity. With respect to that capacity, however, there are indications that barriers to the efficient utilization of resources prevent the expansion of transportation disadvantaged service. Reducing or eliminating these barriers then could potentially increase system capacity.

3. Barriers to Coordination

Insurance, funding, automation, and agency support are the greatest barriers to a fully coordinated transportation system in Indian River County. Sponsoring agencies must ensure that funding for their agency's sponsored transportation is coordinated through the Community Transportation Coordinator. Also, there must be an incentive for agencies to participate in the coordinated system. In addition, entities

applying for local, state and Federal funding for transportation must have the endorsement of the CTC prior to approval of funds.

Since not all counties are fully coordinated, it is possible for operators to conduct business outside of their approved area without the proper coordination. Not until the state holds all counties accountable for full coordination of their service can coordination be achieved.

An analysis of the existing transportation disadvantaged service system indicates that several barriers to the adequate provision of transportation disadvantaged services exist. These are:

- Insurance - Insurance requirements stipulated in Rule 41-2 have been identified by several agencies as a barrier to the provision of transportation disadvantaged services.
- Lack of Funding - Lack of sufficient funding is another major barrier. Existing unmet needs cannot be accommodated without a capacity expansion of the existing system. Any such capacity expansion, however, would involve increases in both operating and capital costs. Not only is there insufficient funding for such system expansion, there are not enough monies to adequately support the present level of transportation disadvantaged services.

D. Goals, Objectives and Strategies

The goals, objectives, and strategies are the most important parts of the plan. Strategies, as identified in the plan, are statements in the plan that identify the action which the CTC, LCB, and/or DOPA must take in order to implement the Transportation Disadvantaged Service plan. As courses of action committed to by the county (CTC, LCB, DOPA), strategies provide the basis for all county action in relation to the provision of transportation-disadvantaged services. Objective 13 identifies a target for transferring clients to the lower cost fixed-route system.

Goals

It is the goal of Indian River County to ensure that efficient, safe, and convenient transportation is available twenty-four (24) hours a day, seven (7) days a week to health care, employment, education, shopping, social services, and other life sustaining activities for citizens who are unable to transport themselves, or to purchase transportation because of physical or mental disability, income status, or age.

OBJECTIVE 1 Designation and Evaluation of the CTC

At all times there will be a community transportation coordinator and a set of criteria for the annual performance evaluation of the Community Transportation Coordinator and a Request for Proposal (RFP) procedure for designation of the Community Transportation Coordinator as needed.

OBJECTIVE 2 Reliability

The average number of vehicle miles between emergency road calls will be more than 90,000 miles.

OBJECTIVE 3 Local Revenue

The amount of the local revenue will be at least 25% of total expenses.

OBJECTIVE 4 Safety

Number of accidents per 100,000 vehicle miles will be less than 1.

OBJECTIVE 5 Coordination

The Community Transportation Coordinator (CTC) will have signed contracts with all needed transportation disadvantaged providers.

OBJECTIVE 6 Service Effectiveness

The average number of trips taken per paratransit passenger will be more than 1.4 per year.

OBJECTIVE 7 Cost Efficiency/Effectiveness

The average operating expenses per passenger trip will be less than \$20.00.

OBJECTIVE 8 Vehicle Utilization

The average number of trips per driver hour will be more than 1.5 trips.

OBJECTIVE 9 Waiting Time

Clients' average pick-up waiting time will not exceed 45 minutes.

OBJECTIVE 10 Public Relations

The coordinator will have a public information plan to increase public awareness of available transportation disadvantaged services.

OBJECTIVE 11 Prioritization

The TD prioritization list will be maintained for non-sponsored transportation disadvantaged trips.

OBJECTIVE 12 Eligibility

The county's eligibility criteria will be maintained for non-sponsored transportation disadvantaged trips.

OBJECTIVE 13 Utilization of Transit System

At least 1% of paratransit clients will be transferred to transit system per year.

OBJECTIVE 14 On-time Performance

The system will achieve a 90% on-time performance.

OBJECTIVE 15 Complaint Quality of Service

The system will receive no more than two defined and determined TD complaints per year.

OBJECTIVE 16 Accumulated No-Shows

The number of accumulated no-shows will increase by no more than 5% from the previous year.

Transportation Disadvantaged Strategies

- | | | |
|----------|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Strategy | 1. | The Community Transportation Coordinator (CTC) will coordinate with all transportation disadvantaged providers, utilize all available sources, and establish a program for provision of TD services. Vehicles are purchased through Section 5310 and Section 5307. The TD funds will be used solely for operations. Computer hardware will be purchased with Section 5307 funds and have been budgeted in the Section 5307 grant application to replace all existing computers. |
| Strategy | 2. | The Community Transportation Coordinator will, on a regular basis, review its organizational structure and designate (or adds) staff and computer equipment as needed to serve the transportation disadvantaged service needs in Indian River County. |
| Strategy | 3. | The CTC, in coordination with the LCB, will apply for State and available Federal funds intended for the provision of transportation disadvantaged services as defined in 427 F.S. |
| Strategy | 4. | The CTC, in coordination with the LCB, will pursue local government or private agency funds appropriated or contributed for the provision of transportation disadvantaged services. |
| Strategy | 5. | For the provision of service, the Coordinator will draft and execute contracts with public and private agencies receiving state or federal funds for the |

provision of transportation services to transportation disadvantaged persons. Contracts will confirm the designation as sub-contractor and will include a description of service to be provided, minimum performance standards, safety and insurance requirements, payment schedule, and financial and statistical reporting requirements. The contracts will also ensure continued use of vehicles purchased or being purchased with transportation disadvantaged funds and funds contributed by private non-profit agencies.

- Strategy 6. The CTC will evaluate and monitor all providers and perform periodic spot checks for quality assurance. The CTC shall consider the following factors while developing performance standards:
- safety program
 - drug free workplace
 - cost associated with service provision
 - environmental considerations such as recycling, energy saving, alternative fuels, pollution
 - vehicle cleanliness
 - vehicle handicapped accessibility
 - insurance
 - accident data
 - drivers cleanliness, courtesy
 - provision of operational and financial data to the CTC in a timely manner.
- Strategy 7. The CTC will maintain its database consisting of information on routes, schedules, facilities, vehicles, locations and number of clients, and frequency of use of services. The CTC will serve as a clearinghouse for information about transportation disadvantaged services and related information.
- Strategy 8. The CTC will maintain its current system for vehicle inventory, maintenance, and update this system on a regular basis.
- Strategy 9. The CTC will coordinate with all transportation disadvantaged providers to remove all barriers such as insurance coverage for provision of transportation disadvantaged services.
- Strategy 10. The CTC will draft and execute agreements with local public or private agencies providing local funds to match State and/or Federal funds for transportation services to ensure that these funds are available for each corresponding FY.
- Strategy 11. The Coordinator will implement this plan by:
- (a) Coordinating services among subcontracting agencies to eliminate duplication of service and providing greater operating efficiency while still providing a high level of service to clients.

- (b) Continuing an advance reservation system that requires reservations to be made at least 24 hours before the transportation is actually needed. This system will enable the coordinator to match clients with available providers more efficiently than with an immediate response system. Some short-response trips could be served in cases of emergency or availability of space.
- Strategy 12. The CTC, in coordination with the LCB, will conduct an evaluation of the services provided which will include the following:
- (a) Progress towards elimination of duplication and expansion of services.
 - (b) Degree of annual improvement in:
 - (1) Meeting the needs of transportation disadvantaged community.
 - (2) Efficiency of system operation.
 - (3) Effectiveness of service delivery.
- Strategy 13. The Coordinator will prepare recommendations for inclusion in the Annual Local TD Service Plan for changes in the TD program and changes in financial resources if needed. The recommendations at minimum will include the following information for all program changes:
- (a) Description of change
 - (b) Year of proposed implementation
 - (c) Amount and type (planning, capital or operating) of proposed expenditures.
 - (d) Proposed source(s) of funding identified by Federal catalogue numbers, state appropriation number or appropriate description for private or local government contributions
- Strategy 14. The CTC will prepare and execute a Memorandum of Agreement (MOA) for service provision between the CTC and the Commission for the Transportation Disadvantaged (CTD) for each operating fiscal year.
- Strategy 15. The CTC will prepare and submit applications for capital grants to be used to replace existing vehicles, after a determination of vehicle replacement needs.
- Strategy 16. The CTC will develop a volunteer network for assistance with the TD program.
- Strategy 17. The Transportation Disadvantaged Local Coordinating Board (LCB) shall evaluate the performance of the Community Transportation Coordinator and provide a recommendation to the DOPA for continuation or replacement of the community transportation coordinator.
- Strategy 18. The Designated Official Planning Agency, Transportation Disadvantaged Local Coordinating Board, and Community Transportation Coordinator shall ensure that services are available on a non-discriminatory basis regardless of

one's race, color, creed, age, sex, national origin, religion, familial status, handicap or marital status.

- Strategy 19. The Designated Official Planning Agency (DOPA), in coordination with the community transportation coordinator (CTC), will coordinate with private providers to encourage inducement of additional private funds to the transportation disadvantaged system.
- Strategy 20. The CTC shall implement CTD's customer eligibility criteria.
- Strategy 21. The CTC shall coordinate more effectively with transportation providers to meet recreational needs when vehicles are not fully scheduled
- Strategy 22. The CTC will pursue Coordination Contracts with transportation providers not currently under contract (Indian River Volunteer Ambulance Squad and American Cancer Society).
- Strategy 23. The CTC will pursue Purchase of Service contracts with private agencies for sponsored trips.

E. Implementation Plan

1. 3-Year Transportation Disadvantaged Improvement Program

For the next three years (FY 2011/12, FY 2012/13, and FY 2013/14), the Community Transportation Coordinator does not intend to utilize the TD trip/equipment funds for any capital improvements. All of the TD trip/equipment funds will be used for providing trips to the non-sponsored TD population.

Proposed Vehicle Purchases

Funding Source

FY 2011/12

- 3 - 25' cutaway buses
- 9 - high top modified vans

Sec. 5307
Sec. 5307 and Sec. 5310

FY 2012/13

- 3 - 31' buses
- 2 - 25' cutaway buses
- 6 - high top modified vans
- 4 - minivans

Sec. 5307
Sec. 5307
Sec. 5307 and Sec. 5310
Sec. 5307

FY 2013/14

- 2 - 31' buses
- 2 - 25' cutaway buses
- 3 - high top modified vans

Sec. 5307
Sec. 5307
Sec. 5307 and Sec 5310

2. Implementation Schedule

An important part of any plan is its implementation. Implementation involves execution of the plan's policies and strategies. It involves taking actions and achieving results. For the transportation Disadvantaged Service Plan, implementation involves various activities. While some of these actions will be ongoing, others are activities that will be taken by certain points in time. For each strategy in this plan, Table 14 identifies the type of action required, the responsible entity for taking the action, and the timing.

To implement the Transportation Disadvantaged Service Plan, several different types of actions must be taken. These include: coordinating with all TD providers, applying for funding, providing services to the TD population, preparing evaluation and monitoring reports, and others.

Overall plan implementation responsibility will rest with the DOPA and the Community Transportation Coordinator.

Vehicles are purchased through Section 5310 and Section 5307. The TD funds will be used solely for operations. Computer software updates will be purchased with Section 5307 funds and have been budgeted in the Section 5310 grant application and Shirley Conroy Grant.

A system is in place with daily input for operational and maintenance purposes on all vehicles. This system appears to be completely adequate at this time. No update is planned at present.

Contracted operators are responsible to keep records on their own and are monitored by the CTC.

EVALUATION & MONITORING PROCEDURES OF THE TDSP

To be effective, a plan must not only provide a means for implementation; it must also provide a mechanism for assessing the plan's effectiveness. Generally a plan's effectiveness can be judged by the degree to which the plan's objectives have been met. Since objectives are structured, as much as possible, to be measurable and to have specific timeframes, the plan's objectives are the benchmarks used as a basis to evaluate the plan.

Table 15 identifies each of the objectives of the Transportation Disadvantaged Service Plan. It also identified the measures to be used to evaluate progress in achieving these objectives. Most of these measures are quantitative. Besides providing evaluation measures, Table 15 also identifies timeframes associated with meeting the objectives.

All contractors are monitored annually to assure that all credentials are current. The annual review is done at the contractor's place of business by the Transportation Coordinator. Distribution of funds is based on historical use. Distribution is approved by the Local Coordinating Board.

**Table 14
Transportation Disadvantaged Service Plan - Implementation Matrix**

| Strategy # | Type of Action | Responsibility | Timing |
|-------------------|----------------------------------------------------------|------------------------------------------------|-------------------|
| 1 | Coordination | CTC | Ongoing |
| 2 | Review of the CTC's structure | CTC | Ongoing |
| 3 | Funding applications | CTC/LCB | Annually |
| 4 | Pursue local funds | CTC/LCB | Annually |
| 5 | Providers contract | CTC | Annually |
| 6 | Providers evaluation | CTC | Annually/Periodic |
| 7 | Database | CTC/LCB | Ongoing |
| 8 | Vehicle Inventory and maintenance | CTC | Ongoing |
| 9 | Removal of barriers | CTC/LCB | Ongoing |
| 10 | Local agreements for funds | CTC/Local Governments /Other local agencies | Annually |
| 11 | Plan implementation | CTC | Ongoing |
| 12 | Evaluation of providers | CTC/LCB | Annually |
| 13 | Recommendation for changes to the local TD program | CTC | Annually |
| 14 | MOA | CTC/CTD | Annually |
| 15 | Application for capital grant | CTC | As needed |
| 16 | Development of a volunteer network | CTC | Ongoing |
| 17 | CTC evaluation | LCB | Annually |
| 18 | Provision of non-discriminatory services | DOPA/LCB/CTC | Ongoing |
| 19 | Private funding | DOPA/CTC | Ongoing |
| 20 | Customer eligibility | CTC | Ongoing |
| 21 | Meeting recreational need | CTC | Ongoing |
| 22 | Coordination with providers not currently under contract | CTC | Ongoing |
| 23 | Purchase of service contracts | CTC | Ongoing |

Table 15
Transportation Disadvantaged Service Plan - Evaluation Matrix

| Objective # | Measure | Timeframe |
|--------------------|-----------------------------------------------------------|------------------|
| 1 | Existence of a CTC and CTC evaluation criteria | Annually |
| 2 | Number of vehicle miles between road calls | Annually |
| 3 | Amount of local revenue as percentage of total expenses | Annually |
| 4 | The average number of accidents per 100,000 vehicle miles | Annually |
| 5 | Existence of signed providers contracts | Annually |
| 6 | Number of one way passenger trips per vehicle mile | Annually |
| 7 | Average operating expenses per passenger trip | Annually |
| 8 | Average vehicle miles traveled per TD capita | Annually |
| 9 | Clients waiting time | Annually |
| 10 | Existence of a public information plan | Annually |
| 11 | Existence of a prioritization list | Annually |
| 12 | Existence of eligibility criteria | Annually |
| 13 | Transfer of 1% of paratransit clients to transit system | Annually |

II. SERVICE PLAN

A. Operations Element

1. Types, Hours, and Days of Service

The Coordinated Transportation System, through the Senior Resource Association as Partial Broker and using coordination and operator contracts, provides fixed route, dial-a-ride, and Paratransit service for the ambulatory and wheelchair, non-emergency service 24 hours a day, 7 days a week. The SRA operates dispatching and coordinating services 7:00 AM to 2:00 PM for next day booking, 6:00 PM for others, Monday through Friday, excluding holidays. Group outings are also coordinated and scheduled using available vehicles in the coordinated fleet. TD Coordination Contracts with Veterans Council, and the Abilities Resource Center provide the principal operators of the system.

The CTC provides door to fixed route bus stop service for anyone who lives more than 1/4 mile from the closest fixed bus stop to the nearest fixed bus stop. All clients are directed to fixed route services unless they are unable to use the fixed route due to special circumstances.

IRMH provides Medicaid transportation service when the SRA vehicles are filled, after hours and on weekends and holidays. These services are for Medicaid clients sponsored by the Agency for Health Care Administration (AHCA). As funding increases, SRA will continue to expand services to meet the growing needs.

2. Accessing Services

a. Eligibility

- i) A minimum 24 hours advance notice is needed for shopping, etc. (48 hours for medical appointments) for reservations throughout the coordinated system and one weeks advanced notice is strongly encouraged. Availability of service is on a first call, first served basis.
- ii) Office hours for reservation services are 6:30 AM to 6:00 PM. The office is closed on designated holidays.
- iii) Procedures for dispatching back-up service are determined by the Medicaid Coordinator. After-hours service is handled by the Medicaid Coordinator. Drivers have a cell phone number to call and the Transportation Director has a vehicle equipped with radio to contact the driver at all times.
- iv) The CTC provides door-to-door service to anyone eligible for this service. All clients are directed to fixed route unless they meet door-to-door eligibility.

The Commission for the Transportation Disadvantaged has stated the following policy for eligibility requirements. Policy Statement: It is the intent of the Commission for the Transportation

Disadvantaged to set forth eligibility requirements for customers of the Transportation Disadvantaged Program. Based on this policy, the TDLCB and CTC has established following local eligibility criteria.

The CTC shall ask each client the following questions and shall establish a file for each client.

- Birth date
- Number of people in the household
- Household's total gross annual income
- If he or she is a client of another program, specify: _____
- If there is any other way available to him or her to get to his or her destination
- If there is any fixed route mass transit available within 2 blocks of their home and their destination
- If he or she has any physical or mental disability

At a minimum, CTC shall use the following criteria to determine eligibility for utilizing Transportation Disadvantaged Trust Fund non-sponsored monies. The following clients may be eligible to utilize the TDTF monies:

- Client that is younger than 16 years old or older than 60 years; or
- Client with a physical or mental disability; or
- Client that belongs to a very low income household (less than 50% of the county's median household income);

The above individuals can utilize TDTF if all of the following conditions exist:

- No other funding is available for providing transportation to the client; and
- No other means of transportation is available including but not limited to, relatives, friends, neighbors, or free trips provided by some social or religious organizations; and
- A fixed Route Public Transit is not available or client is not able to use it; and
- Client cannot afford to purchase the trip.

No self declarations allowed. The CTC will use an enrollment process that substantiates the individual's ability to meet the criteria listed and any other CTC determined criteria.

b. Prioritization

The following list of priority has been established by the Local Coordinating Board for the non-sponsored transportation disadvantaged trips. As all providers have very limited number of non-sponsored seats available, it is imperative that clients request service as far in advance as possible.

Prioritization of Non-Sponsored Transportation Disadvantaged Trips, Indian River County

- a. Medical Trips
- b. Grocery Shopping/Congregate Meal Trips
- c. Social Service Agency Trips
- d. Employment/Job Training/Volunteer Service Trips

- e. Social Trips
- f. Other Non-Grocery Shopping Trips
- g. Other Trips

c. No-Show Policy

A No-Show policy is in place to discipline clients who make reservations and then do not make the trip when the vehicle arrives. If a client has three no-shows within a 90 day period, their services are suspended for 90 days. For any given 90 day period, the no show procedure implemented CTC sends a warning letter if two no shows occur. If a third no show occurs within this time frame, transportation services are suspended for 90 days from that date. After the first 90 day no show suspension, there will be another 90 day suspension of transportation services for each additional no show.

SAMPLE NO-SHOW LETTER

This is a notice to inform you of your second “no show” for the transportation services reserved through the Indian River County Senior Resource Association (county’s Community Transportation Coordinator). Our records indicate that you did not show up for transportation services on _____ and _____. The Indian River County Transportation Disadvantaged Local Coordinating Board has established the following policy for clients who are “no shows”. If, for any reason, you do not show up three (3) times within a three month period for reserved transportation trips, your use of transportation services will be suspended for 90 days.

Please be advised that if you are not able to utilize a reserved transportation service on any given day, you must call 569-0903 to cancel your pick up as far in advance as possible.

Sincerely,

Karen Wood
Transportation Director

d. Other Accessibility Policies and Procedures

All trips are coordinated as best possible; however, with threatened fiscal reductions all Paratransit needs for transportation in Indian River County cannot be met; therefore, clients are being encouraged, where possible, to transition to fixed route services to reduce costs. The CTC will coordinate, provide and/or arrange, to the best of its ability, the most effective transit system possible.

3. Transportation Operators and Coordination Contractors

In accordance with state law, the CTC may contract with other agencies in either a provider/operator or coordination capacity. Contract operators provide transportation service to citizens of Indian River County who meet the established criteria for Transportation Disadvantaged Trust Funding identified on page 43. Operators must comply with all system safety and program requirements as well as all policies established by the CTC.

Coordination contractors are chosen because of their ability to efficiently meet the specialized transportation requirements of a particular segment of the population. These providers receive operations funding from a variety of sources and can establish their own policies, including carrying passengers who may not otherwise qualify for TDTF funding. By entering into a coordination contract, however, the agency may qualify for vehicle purchase grants from the state.

Contract operators are interviewed by the CTC. The CTC will, on a regular basis, check mileage, ridership, trip cost and annual audit records of contractors. Final approval of contractors will be by the TDLCB.

The primary transportation operator in Indian River County is the Indian River County Senior Resource Association (SRA). The SRA provides transportation for ambulatory and non-ambulatory; wheelchair and stretcher, for elderly, disabled, and transportation disadvantaged citizens of all ages using both Paratransit and deviated fixed route services. Reimbursable fare structure for Paratransit trips in the service area is: \$4.12 for routine group trips (Multi loaded); \$10.79 for ambulatory trips; \$18.49 for wheelchair trips and \$38.52 per trip. Fixed route transportation is provided free of charge.

The Abilities Resource Center provides ambulatory and non-ambulatory, non-emergency Paratransit service for the disabled and otherwise transportation disadvantaged using a nine vehicle fleet. Reimbursable fare structure for Paratransit trips in the service area is: \$5.99 for routine group trips (Multi loaded); \$13.57 for individual trips.

In addition, All County Ambulance provides ambulatory, non-ambulatory, and stretcher non-emergency transportation services for transportation disadvantaged citizens as directed by the CTC and those patients discharged from the hospital on very short notice and cannot be accommodated by the SRA.

Contact information for the transportation operators and coordination contractors in Indian River County is as follows:

1. Transportation Operator

Indian River Co. Senior Resource Association, Inc.
694 14th St.
Vero Beach FL 32960
49 vehicles

Karen Deigl, CEO
569-0760

- | | |
|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|
| <p>2. Transportation Operator Abilities Resource Center 1005 22nd Avenue Vero Beach FL 32960</p> | <p>563-9534</p> |
| <p>3. Coordination Contractor All County Ambulance 3050 Airmans Drive Fort Pierce, Florida 32946 6 vehicles</p> | <p>Transportation (772) 465-1111</p> |

Finally, Indian River County has a number of additional transportation providers to meet the various needs of the community for which no contract is currently in place. These include:

- | | |
|------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <p>1. Indian River Volunteer Ambulance Squad 1729 17th Avenue Vero Beach FL 32960</p> | <p>567-3160</p> |
| <p>2. American Cancer Society Private Non-Profit 1517 20th Avenue Vero Beach, Florida</p> | <p>562-2272</p> |
| <p>3. Economic Opportunity Council Private Non-Profit 1456 Old Dixie Hwy, Building B PO Box 2766 Vero Beach, Florida</p> | <p>562-4177</p> |
| <p>4. New Horizons of the Treasure Coast Private Non-Profit 2300 3rd Court, Suite C Vero Beach, Florida 32960</p> | <p>778-7217</p> |
| <p>5. Club Kar 1050 Old Dixie Hwy Vero Beach, FL 32960</p> | <p>778-8287</p> |

4. Public Transit Utilization

From November 1992 to October 1994, variable fixed route public transportation was provided through the generosity of a private foundation and the United Way.

This seed money was given to establish a pilot program with one vehicle, intended to ensure that transportation alternatives of a fixed nature become well established in the County. Currently, 14 fixed routes operate throughout the county. Hubs are located near downtown Vero Beach, at Indian River Mall, Oslo Plaza, South Vero Plaza, the Gifford Health Center, and near the intersection of CR

510 and CR 512. Five routes operate six days per week, while all other routes operate five days per week. A Dial-a-Ride system will be used to insure full capacity ridership.

Clients will call at least 24 hours in advance to be picked up at their door and transported to the nearest fixed route connecting points at the closest time allowable to meet the fixed route vehicle. Medicaid clients have been geocoded and a route established through the low-income area of Gifford. There is no fee for the fixed route transit service.

5. Vehicle Inventory

a) Table 16 provides vehicle inventory listings:

Table 16
Indian River County Senior Resource Association, Inc.
Vehicle Inventory

| SRA BUS# | YEAR | MAKE | MILEAGE | MODEL | VIN | AMB / WC | START SERV. | COST (\$) |
|---------------|-------------|------|---------|-----------------|-------------------|----------|-------------|-----------|
| 101 - SRA | 2002 - C | DGE | 123,945 | CARAVAN | 2B4GP44362R735691 | 7 | 4/03 | 18,826 |
| 156 - IRC | 1999 - C | FDR | 170,373 | 25' CUTAWAY BUS | 1FDXE40F1XHB63789 | 18-2 | 8/99 | 31,000 |
| 162 - SRA/IRC | 1999 - G | FDR | 211,397 | 25' CUTAWAY BUS | 1FDXE45F2YHB43156 | 20-2 | 7/00 | 31,000 |
| 164 - SRA | 2002 - G | FDR | 106,869 | 3500 CONV. VAN | 1FTSS34L82HA66311 | 9-2 | 10/02 | 38,000 |
| 166 - SRA | 2002 - C | FDR | 97,032 | 3500 CONV. VAN | 1FTSS34L12HA66313 | 9-2 | 10/02 | 38,000 |
| 167 - SRA | 2002 - C | FDR | 115,200 | 3500 CONV. VAN | 1FTSS34L32HA66314 | 9-2 | 10/02 | 38,000 |
| 168 - SRA | 2002 - G | FDR | 116,770 | 3500 CONV. VAN | 1FTSS34L52HA66315 | 9-2 | 2-Oct | 38,000 |
| 171 - TD | 2002 - C | FDR | 123,248 | 3500 CONV. VAN | 1FTSS34L02HA66318 | 9-2 | 10/02 | 38,000 |
| 172 - SRA/IRC | 2002 - C | FDR | 128,355 | 3500 CONV. VAN | 1FTSS34L22HA66319 | 9-2 | 10/02 | 32,000 |
| 174 - SRA/IRC | 2002 - G | FDR | 199,703 | 25' CUTAWAY BUS | 1FDXE45F62HB11737 | 20-2 | 8/02 | 44,000 |
| 175 - IRC | 2003 - G | FDR | 178,230 | 25' CUTAWAY BUS | 1FDXE45F33HA86443 | 20-2 | 7/03 | 44,000 |
| 176 - IRC | 2003 - G | FDR | 164,651 | 25' CUTAWAY BUS | 1FDXE45F53HA86444 | 20-2 | 7/03 | 44,000 |
| 177 - SRA/IRC | 2003 - C | FDR | 140,885 | 3500 CONV. VAN | 1FTSS34L33HB37383 | 9-2 | 10/03 | 38,210 |
| 178 - SRA | 2003 - C | FDR | 145,227 | 3500 CONV. VAN | 1FTSS34L23HB54501 | 9-2 | 10/03 | 40,328 |
| 179 - SRA | 2003 - C | FDR | 154,682 | 3500 CONV. VAN | 1FTSS34L43HB54502 | 9-2 | 10/03 | 40,328 |

| SRA BUS# | YEAR | MAKE | MILEAGE | MODEL | VIN | AMB / WC | START SERV. | COST (\$) |
|-----------|-------------|------|---------|----------------------|--------------------|----------|-------------|-----------|
| 180 - TD | 2004 - C | FDR | 123,907 | FREESTAR MINI VAN | 2FMZA50694BA70876 | 7 | 03/04 | 19,500 |
| 181 - TD | 2004 - C | FDR | 147,840 | FREESTAR MINI VAN | 2FMZA50604BA70877 | 7 | 03/04 | 19,500 |
| 182 - TD | 2004 - C | FDR | 140,382 | FREESTAR MINI VAN | FMZA50624BA70878 | 7 | 03/04 | 19,500 |
| 183 - SRA | 2004 - C | FDR | 127,770 | VAN TERRA | 1FDWE35LX3HB39439 | 11-2 | 04/04 | 42,000 |
| 184 - SRA | 2004 - G | FDR | 159,638 | VAN TERRA | 1FDWE35L23HB40066 | 11-2 | 04/04 | 42,000 |
| 186 - SRA | 2004 - C | FDR | 129,978 | VAN TERRA | 1FDWE35LG3HB40068 | 11-2 | 04/04 | 42,000 |
| 187 - SRA | 2005 - C | FDR | 77,304 | VAN TERRA | 1FDWE35225HB24825 | 11-2 | 10/05 | 47,525 |
| 188 - SRA | 2005 - C | FDR | 87,026 | VAN TERRA | 1FDWE35L45HB24826 | 11-2 | 10/05 | 47,525 |
| 189 - IRC | 2006 - C | FDR | 76,405 | VAN TERRA | 1FDWE35L55HB24835 | 11-2 | 10/05 | 47,000 |
| 190 - IRC | 2006 - C | FDR | 84,523 | VAN TERRA | 1FDWE35L36HA26498 | 11-2 | 10/05 | 47,000 |
| 191 - IRC | 2005 - C | FDR | 86,607 | VAN TERRA | 1FDWE35L76HA12720 | 11-2 | 10/05 | 47,000 |
| 192 - IRC | 2006 - C | FDR | 102,877 | VAN TERRA | 1FDWE35L56HA26499 | 11-2 | 10/05 | 47,000 |
| 193 - IRC | 2006 - C | FDR | 71,919 | VAN TERRA | 1FDWE35L96HA43743 | 11-2 | 10/05 | 47,000 |
| 194 - IRC | 2006 - C | FDR | 95,043 | VAN TERRA | 1FDWE35L976HA43742 | 11-2 | 10/05 | 47,000 |
| 195 - IRC | 2005 - C | FDR | 73,105 | VAN TERRA | 1FDWE35L85HB24828 | 11-2 | 10/05 | 47,000 |
| 196 - IRC | 2005 - C | FDR | 98,977 | VAN TERRA | 1FDWE35L65HB24827 | 11-2 | 10/05 | 47,000 |
| 197 - IRC | 2005 - C | FDR | 84,314 | VAN TERRA | 1FDWE35LX5HB24832 | 11-2 | 10/05 | 47,000 |
| 198 - IRC | 2006 - C | FDR | 65,695 | VAN TERRA | 1FDWE35L15HB24833 | 11-2 | 10/05 | 47,000 |
| 199 - IRC | 2006 - G | CVY | 112,907 | 5550 (Dis) 31' - Bus | 1GBE5V1256406922 | 24-2 | 2/06 | 85,000 |
| 200 - IRC | 2006 - G | CVY | 118,978 | 5550 (Dis) 31' - Bus | 1GBE5V1236F407020 | 24-2 | 2/06 | 85,000 |
| 201 - IRC | 2006 - G | CVY | 121,595 | 5550 (Dis) 31' - Bus | 1GBE5V1226F407459 | 24-2 | 2/06 | 85,000 |
| 202 - IRC | 2007 - G | CVY | 101,478 | VAN TERRA | 1GBJG31UX71109075 | 11-2 | 1/07 | 56,000 |
| 203 - IRC | 2007 - G | CVY | 109,810 | VAN TERRA | 1GBJG31U671109543 | 11-2 | 1/07 | 56,000 |
| 204 - IRC | 2007 - G | CVY | 116,546 | VAN TERRA | 1GBJG31U871108488 | 11-2 | 1/07 | 56,000 |

| SRA BUS# | YEAR | MAKE | MILEAGE | MODEL | VIN | AMB / WC | START SERV. | COST (\$) |
|-----------|-------------|------|---------|----------------------|-------------------|----------|-------------|-----------|
| 205 - SRA | 2007 - C | CVY | 61,214 | VAN TERRA | 1GBJG31U371136635 | 11-2 | 4/07 | 56,000 |
| 206 - SRA | 2007 - C | CVY | 91,042 | VAN TERRA | 1GBJG31U071137760 | 11-2 | 4/07 | 56,000 |
| 207 - SRA | 2007 - C | CVY | 94,563 | VAN TERRA | 1GBJG31U071138472 | 11-2 | 4/07 | 56,000 |
| 208 - IRC | 2007 - G | CVY | 73,041 | 5550 (Dis) 31' - Bus | 1GBE5V1947F422463 | 24-2 | 11/07 | 86,000 |
| 209 - IRC | 2007 - G | CVY | 65,720 | 5550 (Dis) 31' - Bus | 1GBE5V19X7F422676 | 24-2 | 11/07 | 86,000 |
| 210 - IRC | 2009 - G | GMC | 25,661 | 5550 (Dis) 31' - Bus | 1GDE5V1939F402733 | 24-2 | 3/09 | 86,000 |
| 211 - IRC | 2009 - G | GMC | 24,888 | 5550 (Dis) 31' - Bus | 1GDE5V1999F402834 | 24-2 | 3/09 | 86,000 |
| 212 - IRC | 2009 - G | GMC | 26,364 | 5550 (Dis) 31' - Bus | 1GDE5V1919F402925 | 24-2 | 3/09 | 86,000 |
| 213 - SRA | 2009 - C | CVY | 5,085 | VAN TERRA | 1GBJG31K191166301 | 11-2 | 11/09 | 66,426 |
| 214 - SRA | 2009 - C | CVY | 6,479 | VAN TERRA | 1GBJG1K491167426 | 11-2 | 11/09 | 66,426 |
| 215 - SRA | 2009 - C | CVY | 6,042 | VAN TERRA | 1GJG31K591167709 | 11-2 | 11/09 | 66,426 |
| 216 - SRA | 2009 - C | CVY | 7,110 | VAN TERRA | 1GBJG31K491167460 | 11-2 | 11/09 | 66,426 |
| 217 - SRA | 2009 - C | CVY | 7,931 | VAN TERRA | 1GBJG31K491166499 | 11-2 | 11/09 | 66,426 |
| 218 - IRC | 2009 - G | GMC | 4,796 | 5550 (Dis) 31' - Bus | 1GBE5V1929F407981 | 24-2 | 1/10 | 86,000 |
| 219 - IRC | 2009 - G | GMC | 2,593 | 5550 (Dis) 31' - Bus | 1GBE5V1979F413274 | 24-2 | 1/10 | 86,000 |
| 220 - IRC | 2009 - G | GMC | 3,049 | 5550 (Dis) 31' - Bus | 1GBE5V1909F413231 | 24-2 | 1/10 | 86,000 |
| 221 - IRC | 2009 - G | GMC | 1,857 | 5550 (Dis) 31' - Bus | 1GBE5V1969F413315 | 24-2 | 1/10 | 86,000 |
| 222 - SRA | 2009 - G | GMC | 1,630 | 5550 (Dis) 31' - Bus | 1GBE5V1949F413183 | 24-2 | 1/10 | 86,000 |

Source – Indian River County, Senior Resource Association, Inc.

6. System Safety Program Plan

**Indian River County Senior Resource Association
Safety Certification**

Date: May 13, 2010

NAME: Karen Wood

ADDRESS: 694 14th Street Vero Beach, FL 32960

THE BUS TRANSIT SYSTEM NAMED ABOVE HEREBY CERTIFIES TO THE FOLLOWING:

1. The adoption of a System Safety Program Plan (SSPP) in accordance, at a minimum, with established FLORIDA DEPARTMENT OF TRANSPORTATION safety standards set forth in Rule Chapter 14-90.
2. Compliance with the adopted standards of the SSPP.
3. Performance of safety inspections on all buses operated in accordance with Rule 14-90.009.

SIGNATURE: _____

TITLE: Transportation Director

NAME AND ADDRESS OF ENTITY(IES) WHICH HAS (HAVE) PERFORMED SAFETY INSPECTIONS:

NAME: _____

ADDRESS: 694 14th Street Vero Beach, FL 32960

**Indian River County Senior Resource Association
SYSTEM SAFETY PROGRAM PLAN**

Chapter 1: MANAGEMENT

COMMITMENT TO DEVELOPMENT OF A SYSTEM SAFETY PROGRAM PLAN

To ALL Indian River County Senior Resource Association Transportation Personnel:

Indian River County Senior Resource Association's Transportation Department is organized to provide safe, courteous, clean, convenient, reliable, affordable, and effective transportation services to residents of all ages in Indian River County. This includes the elderly, infirm, and transportation disadvantaged.

Indian River County Senior Resource Association will strive to operate as safely as possible. All Indian River County Senior Resource Association staff are charged with the responsibility of ensuring the safety of employees, property, passengers, and those who come in contact with the system.

Florida Department of Transportation directs Indian River County Senior Resource Association to devise, implement, and administer a comprehensive and coordinated Systems Safety Program Plan (SSPP) to prevent, control, and resolve unsafe conditions which may occur as a result of our service operations. The SSPP must be approved by the Community Transportation Coordinator (CTC), who has authority to stop any operation which may be determined to be hazardous or creating an unusual condition.

It is the duty of each Indian River County Senior Resource Association employee to cooperate with our administration and the CTC to provide necessary information to help in any investigation or inspection in conjunction with this agreement that they may undertake.

PURPOSE:

The SSPP describes the function and responsibilities that will be implemented and maintained to achieve a high level of transportation safety at Indian River County Senior Resource Association. The SSPP will be a means of improving communications, documentation, and coordination and to reduce injuries, property damage, and delays in service. The SSPP will apply to all areas of Indian River County Senior Resource Association's operations.

A. Goals and Objectives

The overall goal of Indian River County Senior Resource Association is to provide transportation service in a safe, reliable manner and reduce costs associated with accidents.

The following objectives shall be applied to all aspects of Indian River County Senior Resource Association's operations in reducing accidents and be presented to all during

training. The objectives for attaining the safest operating conditions and environments are as follows:

1. To ensure all drivers are in top physical condition to entrust the safe transport and assistance to the riders.
2. To ensure all drivers are trained in safe driving, passenger assistance and vehicle maintenance requirements.
3. To ensure that all vehicles are maintained to the highest safety standard and in top maintenance condition.
4. Identify unsafe conditions;
5. Develop and implement methods to control or eliminate hazards;

It is Indian River County Senior Resource Association's intent to comply with these standards, at a minimum, and certify to the Department of Transportation annually the following:

- a. A SSPP has been developed in accordance with Rule Chapter 14-90 (11/92), and will be updated annually as necessary.
- b. Compliance of the SSPP by Indian River County Senior Resource Association.
- c. Safety inspections have been performed on all equipment pursuant to Rule Chapter 14-90. That Indian River County Senior Resource Association will suspend system operations of any person or vehicle presenting an immediate danger to public safety.

Each driver's work period will be documented with: total days worked, on-duty hours, driving hours, and time reporting on and off duty each day.

Chapter 2: VEHICLES AND EQUIPMENT

Currently, Indian River County Senior Resource Association has 49 vehicles in use for transportation purposes. Inventory of these vehicles, including ID #, Make & Type, FDOT control no. (if appropriate), ambulatory and non-ambulatory seating capacities, wheelchair equipped or not, average service miles per month, current mileage, assessment of vehicle condition, anticipated retirement date, and source of funding (if Local, State, or Federal government funding) is attached in Appendix IV.

These vehicles are operated in a routine and demand response paratransit system, with 10 vehicles operating fixed routes. All client trips are coordinated with the Community Transportation Coordinator.

All vehicles will have posted inside the telephone number to make either compliments or complaints.

Chapter 3: OPERATIONAL FUNCTIONS

DRIVERS:

Indian River County Senior Resource Association prohibits a driver from driving a vehicle with a suspended, canceled or revoked license. A driver receiving a notice that his or her license to operate a motor vehicle has been suspended, canceled or revoked must notify the supervisor of the contents of the notice before the end of the business day following the day he or she received the notice.

No driver will be permitted to operate a vehicle more than 12 hours in any one 24 hour period, or drive after having been on duty for 16 hours in any one 24 hour period.

A driver's work period shall begin from the time a driver first reports for duty.

A driver may be permitted to drive for more than the regulated hours if the hours are necessitated by adverse conditions resulting from weather, road or traffic, or emergencies resulting from an accident, medical reasons or disaster.

The driver of a vehicle may be permitted to exceed the regulated hours in order to reach a regularly established relief point, provided the additional driving time does not exceed one hour.

No driver shall drive a vehicle when impaired, or so likely to be impaired, by fatigue, illness or other causes, as to make it unsafe for the driver to begin or continue driving. Indian River County Senior Resource Association prohibits any driver from driving a vehicle when impaired by such condition as to make it unsafe for the driver to begin or continue driving.

All Indian River County Senior Resource Association vehicles will be operated at all times in compliance with the applicable traffic regulations, ordinances and laws of the State of Florida and Indian River County.

VEHICLES:

Prior to operation of a vehicle, or no less than daily, an inspection or test shall be made of the following parts and devices to ascertain that their vehicle is in a safe condition and in good working order:

1. Service brakes
2. Parking brakes
3. Tires and wheels
4. Steering
5. Horn
6. Lighting devices
7. Windshield wipers
8. Rear vision mirrors,
9. Passenger doors.
10. Exhaust system
11. Equipment for transporting Wheelchairs
12. Safety and emergency equipment.

If any system or portion thereof is believed to be unsafe for passenger service or poses a danger to public safety, it will be reported immediately to the Transportation Director, on his absence the Office Manager, who will review the situation and determine if the vehicle will be immediately suspended from service until the discrepancy is corrected.

Tires will be properly inflated in accordance with the manufacturer's recommendations. No vehicle will be operated with a tread groove less than required in Rule 14-90.007(19) Vehicles will not be left unattended with passenger(s) aboard for an extended period of time, or longer than 15 minutes.

Vehicles will not be left unattended in an unsafe condition with passenger(s) aboard at any time.

At no time will a vehicle be left unattended with keys in the ignition.

No employee will drive, move or cause to be driven or moved, on any street or highway, any vehicle which:

1. Is in such unsafe condition as to endanger any person or property.
2. Does not contain those safety parts or is not at all times equipped with safety equipment and devices in proper condition and adjustment as required by Chapter 316, Florida Statutes, and this rule chapter.
3. Is equipped in any manner in violation of Chapter 316 Florida Statutes, and this rule chapter.

A vehicle will not be operated with doors open, and doors will not be opened until the vehicle is stopped.

No passenger will be permitted to stand on vehicles which are not designated and constructed for the purpose.

Passengers will not be permitted in the step well of any vehicle while the vehicle is in motion.

Vehicles will not be fueled with passengers aboard.

All children under 4 years/40 lbs. must be in child seats provided by the escort or not carried.

Birth to 9 month - Infant Carrier

9 month to 4 years - Child Seat

4 years - over 40 lbs - lap/shoulder belt

No person is permitted to drive Indian River County Senior Resource Association vehicles without the permission of the Transportation Director who is responsible for ensuring that all drivers are insured and have the appropriate license.

Indian River County Senior Resource Association vehicles will not be used at any time for personal use.

All drivers will wear at all times a picture identification tag which identifies them as an authorized driver for Indian River County Senior Resource Association.

Chapter 4: DRIVING REQUIREMENTS QUALIFICATIONS

Minimum qualifications for drivers are as follows:

- All drivers are required to have a Commercial or Class C Driver's License with a passenger endorsement.
- Drivers will carry their current driver's license at all times.
- Indian River County Senior Resource Association will require proof of valid license for all employees who drive in accordance with Chapter 322, Florida Statutes, and maintain a current legible photographic record of each driver's license.
- A current record of the different types of vehicles and equipment each driver is capable of driving and operating.
- All drivers must have a minimum of one year's safe driving record, certified by the State Department of Motor Vehicles.
- A driver's record will be checked prior to employment and annually to verify their driving record history. AMS Driver Record Service Reports for Florida will be requested from the Florida Department of Highway Safety and Motor Vehicles, Tallahassee, Florida (Appendix II) Drivers will report all accidents, speeding tickets and other violations within 24 hours to their supervisor who will report to the CTC.

MOTOR VEHICLE RECORD GUIDELINES:

The following guidelines will be used to evaluate individual driver Motor Vehicle Records MVRs as well as the overall loss potential of drivers as a group. These minimum guidelines will be used in selecting acceptable applicants for driving position, with annual rechecks to identify employees with a higher risk of vehicle accidents. By closely monitoring the total number of accidents and convictions, a determination can be made whether additional safety measures are required to prevent vehicle accidents from occurring.

Individual driver minimum standards:

- * No MVR with a major conviction
- * No MVR containing more than:
 - 2 minor convictions in the last 3 years or
 - 1 at-fault accident and 1 minor conviction in the last 3 years.

Total driver force minimum standards:

- * No MVRs with a major convictions
- * At least 50% of all drivers should have MVRs that are "clear"

Major Conviction -- any that involves:

- * Driving while intoxicated or under the influence of alcohol or drugs
- * Failure to stop and report an accident

- * Homicide, manslaughter or assault arising out of operation of the motor vehicle
- * Driving while license suspended
- * Reckless driving
- * Possession of opened container of alcoholic beverages
- * Speed contest, drag racing, or attempting to elude an officer of the law
- * Making a false accident report
- * Driving while impaired

Minor Conviction -- any moving traffic citation received which is not a “major conviction.”

This category, however, does not include cases involving:

- * Motor vehicle equipment, load or size requirement
- * Improper display or failure to display license plates
- * Failure to sign or display registration card or insurance cards
- * Failure to wear seat belt.

Definitions:

At-fault Accident - any accident where the driver is designated as having caused the accident or negligently contributed to its occurrence.

- * Any accident which requires a non-recoverable payment will be considered an At-Fault Accident with or without a ticket conviction.

Clear MVR - a clear MVR is free from major convictions for the full time period covered by the MVR and has no minor convictions and no At-Fault Accidents for the last three years.

Physical Examinations:

Drivers will have a physical examination at least once every two years, stating the individual is fully qualified to carry out all the duties of a driver. Report of physical exam will be in accordance with Title 49, C.F. R, Part 391, Subpart E, Subsection 391.43 "Medical Examination: Certificate of Physical Examination." Appendix I. Drivers will be offered

Drivers will receive at least 8 hours of on the job training prior to being assigned a vehicle to drive by themselves.

Drivers will be provided with written operational and safety procedures before driving on a street or highway unsupervised.

Driving under the influence of alcohol or drugs is forbidden and any violation of this policy will result in immediate dismissal for misconduct.

Drivers and all passengers must wear seat belts at all times while vehicle is in motion. There will be no smoking in vehicles by anyone. Seatbelt exemption for public transit vehicles.

Rubber gloves will be provided in each vehicle and must be worn by driver when physically handling patients.

At end of each shift the driver will fill the vehicle with gas and clean inside.

DAILY VEHICLE INSPECTIONS:

Daily, each driver will write and submit a daily inspection report using the inspection sheet in Appendix III.

EMERGENCY:

Driver is to report to the office immediately, via two way radio in the van, any incident that happens while patient is in his/her care, no matter how minor it may seem, which may cause injury to patient and complete a detailed, written report of incident upon returning to office at the end of the shift. Driver is not to discuss accident with anyone without first talking to Supervisor.

In the event of an accident or other emergency occurring in or near the vehicle, the driver will notify the dispatcher by radio communication, and remain at the scene. The dispatcher will contact a doctor, police or other emergency agency (911), as appropriate. If the radio is inoperable, use the nearest telephone or direct another person to do so.

Passengers are to be reassured and advised to remain seated. If it is hazardous to remain in the vehicle, help them exit in an orderly manner. It may be necessary to ask the assistance of another individual. Take the required steps to control the crisis, such as administering CPR, First Aid, or using the fire extinguisher. Wait until help arrives, or notify the dispatcher when the situation is clear.

On return to base, the driver will prepare a detailed report of the incident and all appropriate automobile and workman's compensation insurance papers, and turn them in to the supervisor who will follow up as appropriate.

Chapter 5: MAINTENANCE

All vehicles will contain the required equipment and devices required by Rule 14-90.007.

All Indian River County Senior Resource Association vehicles are under the Florida Department of Transportation Preventative Maintenance Inspections program. Detailed inspection and reporting requirements are in Appendix VI.

Indian River County Senior Resource Association will assure that all vehicles operated, and all parts and accessories on all vehicles, which may affect safety of operation, including frame, and frame assemblies, suspension systems, axles and attaching parts, wheels and rims, and steering systems, are regularly and systematically inspected, maintained and lubricated at a minimum in accordance with the standards developed and established in this SSPP to ensure they are in safe and proper operating condition.

All operable transit vehicles are to be inspected at least annually in accordance with established standards. Safety inspections are to be performed by qualified personnel as

specified in Rule 14-90.009(2) Appendix V. Detailed inspection requirements and inspection forms (FDOTr31/dd7/91) are attached as Appendix VI.

A log will be maintained indicating the types of inspections, maintenance and lubrication intervals to be performed on each vehicle and the date or mileage when these services are due.

Maintenance records will be maintained for a minimum of four years. Annually, Indian River County Senior Resource Association will submit a safety certification to the Florida Department of Transportation verifying the adoption and compliance with a SSPP with the standards set forth in Rule 14-90.

Chapter 6: STANDARDS FOR TRANSPORTING WHEELCHAIR CLIENTS

Never transfer, assist or move a client when you are not absolutely sure that this move will be safe.

Do not take any risks for your sake as well as the client's.

All wheelchairs and equipment must be secured at all times so that they cannot move, even when no patients are aboard.

When placing a client in a wheelchair or removing a client from a wheelchair, make sure both brakes are locked. Be sure to have foot paddles in back position.

When transporting clients in a wheelchair, make sure when going down an incline you back the wheelchair down incline, never forward.

When driver is loading wheelchair on lift, driver must be sure that retaining gate on lift is securely locked, and be in such a position that he/she can keep a hand on the patient's wheelchair and the control to operate the lift at the same time.

Wheelchair and patient must be secured in van so that there is no movement of the chair either for and aft or side to side and seat belt is securely fastened on patient.

Patients using oxygen must have own oxygen and oxygen must be flowing when they are picked up. There must be sufficient oxygen to complete the trip. Drivers are not allowed to start, monitor, or adjust the flow of oxygen.

Special attention needs to be made for visually impaired clients, assuring them verbally of their safety and destination.

Chapter 7: STANDARDS FOR TRANSPORTING STRETCHER CLIENTS

Never transfer, assist or move a client when you are not absolutely sure that this move will be safe, and do not take any risks for your sake as well as the client's.

LIFTING TECHNIQUES:

Safety Precautions: Use the strong leg, back and abdominal muscles when you lift. When the back and abdominal muscles contract together, the back “locks” into a normal lordosis (the natural inward curve in the lumbar spine) to maintain the lordosis throughout the lift.

The legs, buttocks, and thighs work actively to raise and lower the body and the weight. The farther away the weight is from the body, the harder the muscles have to work. Keep the weight close to the body.

Ergodynamics of Lifting: Two people should lift objects that weigh more than 60 pounds. Whenever possible, slide -- not lift -- objects more than 60 pounds. A roll-in cot meets this goal.

By far the most difficult lifting task is lifting from below the knuckle height (less than 30 inches from the ground). More than 75 percent of industrial lifting back injuries occur from lifting below this level. Unfortunately, many lifts are lower than this level. Use the highest level whenever possible. In certain situations, use a two stage lift: 1) from the lowest height to an intermediate height and 2) to the fully extended position

All team members should be trained in proper lifting techniques. Team members need to communicate with their partners throughout all lifting and handling tasks. Use commands that are easy for team members to understand. Verbally coordinate each lift from the beginning to the end.

The Rules Of Lifting:

1. Know the weight (ask the patient's weight if you can and add the weight of the equipment).
2. Know your physical ability and limitations.
3. Keep your back locked in a normal lordosis.
4. Use your leg, abdominal, and back muscles.
5. Keep the weight close to your body.
6. Communicate clearly and frequently with your partner.

Safe Lifting of Cots and Stretchers:

1. Approach the cot and evaluate the total weight.
2. If the weight is within the limits for a two-person lift, begin the lift. If not, summon additional help. Always work in pairs to avoid imbalance.
3. Begin the lift by locking your back muscles in the natural lordosis. Use a power-lift position or squat-lift position, whichever one in which you can most comfortably maintain your lumbar lordosis in an inward curve.
4. There are two types of lift positions: the power lift and the squat lift.

The Power-lift Position is advantageous for people with weak knees or quadriceps because the knees are only partially bent. Place your feet a comfortable distance apart. Tighten your back and abdominal muscles to lock your back in a slight inward curve. Straddle the object if you can. Keep your feet flat on the floor. Distribute your weight on the balls of your feet or slightly behind them. As you return to the standing position, make sure your back is locked in and your upper body comes up before your hips.

Remember to keep your feet flat. If the weight is over your heels, there will be an imbalance that can injure you. If you have muscle weakness or tightness, it will be difficult to keep your feet flat during the lift. Lifting with your heels off the ground will decrease the base of support and will force your back into a flexed position. Wear shoes with adequate heel height to allow your heels to stay flat on the ground throughout the lift.

If you have to lift the object in front of your feet, your trunk won't be vertical, it will be angled forward 30-50 degrees. Keep this angle from the hip and not the waist.

The Squat-lift Position is an alternative for people with one weak leg or ankle, or for those with healthy knees and strong legs. It is harder on the knees and quadriceps than the power lift.

Place your weakest leg or the leg with any knee or ankle pain slightly forward. This foot will always stay flat on the ground. Squat down until you can grasp the cot or stretcher. Push yourself up with your strong leg. As you return to the standing position make sure your back is locked in and your upper body comes up before your hips.

The Power Grip is a cylindrical grip: The palm and fingers contact the object and all the fingers are bent at the same angles. Whenever possible, use the power grip in lifting. This hand position allows you to develop the maximum force. Use the power grip when controlling the force such as pushing or maneuvering the cot or when grasping the backrest release mechanism. Position the hands at least 10 inches apart.

The next stage of the lift is concentrating on keeping your back in the locked-in position and standing up leading with your head. A natural tendency is to begin the lift with the hips. To avoid doing this, squeeze your shoulder blades together and lift your chin slightly.

When setting a stretcher or backboard down, reverse the lift exactly. Since gravity is helping you down, a frequent mistake is to bend forward from the waist. Control the set-down as you controlled the lift; it is not a drop. You control the descent of the stretcher by using your back and leg muscles.

Remember, bending forward not only places the muscles at a disadvantage, it adds your entire upper body weight to the lift load.

CARRYING:

Precautions for Carrying: Carrying heavy loads should take no more than one minute by a two-person team. This lifting generates a high amount of muscle fatigue which significantly

increases the potential for injury. Whenever possible, transport patient on equipment that can be rolled. Not all equipment can be rolled. Basket stretchers and backboards must be lifted and carried but they can sometimes be placed on a cot and rolled.

The Rules for Carrying:

1. Know the weight (ask the patient's weight if you can and add the weight of the cot or stretcher).
2. Know your partner's capabilities.
3. Have a plan and communicate it.
4. Keep the weight as close to your body as possible.
5. Keep your back in a locked-in position and don't twist.
6. Keep the back straight.
7. Bend from the hips, not the waist.
8. Do not hyperextend the back.

The Correct Carrying Procedure:

1. Use correct lifting techniques to lift the stretcher. It may take additional people to do this safely. Work in even numbers to maintain balance). Avoid leaning toward or away from the weight.
2. Problems can occur when partners are greatly mismatched in height and strength. Unequal pairing can injure the weaker person due to competition with the stronger partner. The stronger partner can also be injured if the weaker fails to lift. In ideal situations, both partners will have adequate strength to perform their jobs. The pairing of the two weakest people will be as efficient and safe as the pairing of the two strongest individuals, assuming they meet individual strength and body requirements.

One-Handed Carrying Technique:

One-handed carrying of emergency medical equipment can also lead to injury. Pick up and carry with the back in the locked-in position. Avoid leaning to either side to compensate for the imbalance. Again, leg strength and flexibility are extremely important.

Correct Carrying Procedure on Stairs:

When transporting a patient up or down stairs, you lift and carry at the same time, plus reach, push, or pull. You'll need strength endurance, and coordination for injury-free carrying on stairs. Get as many people to help as you need to support the patient. The Correct technique: Keep your back locked-in position and bend from the hips, not from the waist. Keep the weight and your arms as close to your body as possible. It is mechanically easier to use a stair chair than a stretcher. Avoid hyperextension by tightening your abdominal muscles and leaning back from your knees.

REACHING:

Reaching, if done incorrectly, can lead to an overstretching of the ligaments in the back. Contraction of the back muscles and maintenance of the normal lumbar curvature can help prevent injury.

The Rules for Reaching:

1. Keep your back in a locked-in position
2. When reaching overhead, avoid a hyper extended (sway back) position
3. Never twist your back when reaching.

Application of Reaching Rules:

Forward reaches of greater than 15-20 inches in front of the body are not recommended though they are sometimes necessary. The muscles in the shoulders and upper back can only maintain a continuous position for short amounts of time.

You can sustain a 100% effort for six seconds and a 50% effort for only one minute before becoming fatigued. After one minute the injury potential skyrockets.

Correct Reaching for Log Rolls:

When it is necessary to roll the patient onto his or her side while lying on a bed or the ground, you must lean over the patient. Take care to keep your back straight; lean from your hips and use the strong shoulder muscles to help with the roll.

PUSHING AND PULLING:

Several factors are important when pushing and pulling patient transport equipment. Follow the recommended wheel maintenance of your equipment and it will reduce the force required to start moving the cot.

Check the floor surface. The force required to move the equipment will vary according to the type of surface. Push from the area between the waist and shoulder. If the object is significantly below waist level, then the push or pull should come from a kneeling position.

Pushing or pulling from an overhead position is not advisable. You may need to change your leg positioning during push-pull tasks. When you move your legs, keep your back locked in the normal lordosis.

Maneuvering requires greater strength than pushing straight. Maneuvering is solely an activity of the shoulder and arm muscles and does not allow for the use of the body weight.

Rules for Pushing and Pulling:

1. Push whenever possible.
2. Always keep your back locked in.
3. Bend your knees whenever you pull so that the line of pull is through the center of your body.
4. Keep the weight close to your body.

Typical pulling posture increases risk of injury since people tend to round out their spines when pulling. Correct pulling is only possible if you keep your back straight and the load is between your shoulders and hips.

During pushing or pulling you should always try to keep your elbows bent with your arms close to your sides as possible to prevent upper back, neck, and shoulder injury. Position your hands and arms to allow the force of the push or pull to be through the center of your body.

Chapter 8: TRAINING

Training and testing will be a regular part of the safety plan to demonstrate that all employees are capable to safely operate each different type of vehicle before driving on a street or highway unsupervised. Driver training testing will include:

1. Explicit instructional and procedural training regarding operational and driving requirements, defensive driving, equipment inspections and handling of emergencies.
2. Training will be provided for operators of special needs vehicles for all special equipment such as wheelchair lifts, ramps, and wheelchair securement devices.
3. A road test of sufficient duration will be given by the CTC or a person designated by the CTC, who is competent to evaluate and determine driving skills. The test will enable the person giving the test to evaluate the skill of the person taking the test at handling the vehicle and associated equipment.
4. First aid and CPR certificate which is a two-year American Heart Association certified is given to established employees. New employees are certified after 90 day probation period.

Indian River County Senior Resource Association will be responsible for arranging, documenting and certifying pre-service and in-service training which will include the following:

Staff Development and Training Plan

| Title, Subject, Content of Training Objectives | Date of Training | Length of Training | Proposed Trainer(s) | Number of Participants | Pre-Service | In-Service | Estimated Cost for Training | Proposed Funding Source |
|-------------------------------------------------------|-------------------------|---------------------------|----------------------------|-------------------------------|--------------------|-------------------|------------------------------------|--------------------------------|
| Automated Dispatch | | .25 hrs. | Trans. Coordinator | | X | | | |
| Record Keeping | | .25 hrs. | Trans. Coordinator | | X | | | |
| Agency Policy, Procedures & Objectives | | .5 hrs. | Trans. Coordinator | | X | | | |
| Transfer Techniques | | 1 hr. | Training Officer | | X | X | | |
| Defensive Driving | | 4 hrs. | Training Officer | | X | | | |
| Operation of Vehicle & Equipment | | 1 hr. | Training Officer | | X | | | |
| CPR Recertification | | 3 Hrs. | Training | | X | X | | |

| Title, Subject, Content of Training Objectives | Date of Training | Length of Training | Proposed Trainer(s) | Number of Participants | Pre-Service | In-Service | Estimated Cost for Training | Proposed Funding Source |
|------------------------------------------------|------------------|--------------------|---------------------------------|------------------------|-------------|------------|-----------------------------|-------------------------|
| | | | Officer | | | | | |
| First Aid Recertification | | 3 hrs. | Continuing Education Instructor | X | X | | | |
| Accident & Emergency Procedures | | 1 hr. | Training Officer | X | | | | |

Chapter 9: FEDERAL, STATE, & LOCAL REGULATIONS, ORDINANCES OR LAWS

State law requires Indian River County Senior Resource Association to develop a System Safety Program Plan that complies with state minimum equipment and operational safety standards established pursuant to Subsection 341.061, Florida Statutes (Appendix V), and to at least annually inspect all equipment operating in accordance with established standards. Minimum state standards are contained in Rule Chapter 14-90, Florida Administrative Code, Appendix V.

7. Inter-county Services

There are currently no inter-CTC agreements in place; however, there is a great deal of expressed interest in the CTC coordinating transportation for clients on the Northern boundary of St. Lucie County who need transportation to Medical facilities in Indian River County. It is recognized that clearer lines will be drawn when all adjoining counties are under a fully coordinated system. In the long term, it is an achievable goal to have inter-county coordinated transportation when adjacent counties are all on automated scheduling systems and exercising full coordination responsibilities.

8. Marketing Plan

a. Mission Statement

To provide safe, reliable, efficient and cost effective public transportation service, including fixed-route and demand responsive paratransit for all residents and visitors in Indian River County.

b. Executive Summary

The Indian River County Senior Resource Association, a private nonprofit entity, serves as the Community Transportation Coordinator for Indian River County. Paratransit door-to-door service and fixed-route service are both provided by Indian River Transit.

Mass public transportation service is available on 14 fixed routes which run five days per week with the only exceptions being Thanksgiving, Christmas and New Year's Days. Saturday service is available on 5 routes.

While identifying some basic goals necessary for the advancement of the Indian River Transit Public Transportation System:

- to increase visibility and awareness of the system;
- to increase support of its role in the community; and
- to increase the use of the system by providing potential riders with pertinent information;

It was also determined that a structured, measurable marketing plan was necessary to achieve these goals.

Marketing for the fixed route system needs to be a coordinated blend of research, community outreach, public relations, sales promotions and advertising. Each of these is a distinct activity but the overall objectives are the same - to attract riders and build support for the Indian River Transit Public Transportation System.

c. Marketing Goals

PUBLIC PERCEPTION

Goal #1 Promote the Indian River Transit Public Transportation System as a dependable, economical, accessible public service.

Objectives

- Inform the public of the economic and positive social and ecological impacts that transportation has on the community.
 - Action Step: Design Brochure
- Seek to educate and inform the community that it is more economical, safer and less stressful to use public transportation than owning/using an automobile.
 - Action Step:
- Create a visual image recognized by the community as mass transportation to be used by everyone not just seniors or the disabled.
 - Action Step

Goal #2 Improve the public image to the point where a 70% positive response is being obtained from all attitude surveys/interviews of Indian River Transit Public Transportation System riders.

Objectives

- Conduct semi-annual survey of riders to include a passenger questionnaire to be handed out when riders come on board.
- Periodically interview riders while they are using the system.
- Respond to complaints about service, routes or schedules in writing within ten working days.

GOVERNMENTAL/POLITICAL

Goal #3 Increase governmental/political awareness and support of the Community Coach and Indian River Transit Public Transportation System at the local, state and, federal levels.

Objectives

- Make annual presentations of system goals, accomplishments and plans before local governing bodies.
- Obtain funding to maintain and enhance the present fixed route transit system by ten percent.
- Meet with state legislators prior to the start of session to convey transportation concerns.
- Apply for additional funding from Department of Transportation grants, etc. as federal, state and local monies become available.
- Keep apprised of the Federal Register as to availability of additional grants or funding sources.

Goal #4 Involve the business community in Community Coach and Indian River Transit Transportation System projects and programs.

Objectives

- Stimulate support by making the business community aware that transportation encourages people to travel and spend at grocery stores, malls, hair salons, theaters, doctors' offices, etc.
- Assist in developing and providing for public transportation access to existing and new residential or commercial facilities.
- Secure business community partnerships to augment operational costs and for user incentive programs or promotions.

MEDIA

Goal #5 Create a positive and cooperative attitude between the Community Coach and Indian River Transit Public Transportation System and the media thus helping to increase public awareness and support.

Objectives

- Meet with newspaper editors and radio and television station managers annually.
- Increase rapport with editorial writers of area publications and newscasters by keeping them up to date with technical information and trends.
- Maintain ongoing relationship with reporters and newscasters through periodic calls, letters, etc.

PUBLIC INFORMATION/PROMOTIONS

Goal #6 Develop a public information and promotion program for the Community Coach and Indian River Transit Public Transportation System that will reinforce current ridership and educate and persuade potential riders.

Objectives

- Develop promotions highlighting on-time service, safety, vehicle cleanliness, and passenger assistance including special needs.
- Inventory information needs by rider and non-rider groups and how it effects their decision to ride
- Design a user information system with maps, schedules and signage.
- Participate in community activities to showcase vehicles and drivers.
- Use print and electronic media to highlight positive aspects of using the system.

EQUIPMENT

Goal #7 Offer to the public visually appealing vehicles containing interior comforts that meet their physical and psychological needs.

Objectives

- Make equipment exteriors compatible with community expectations and interiors clean, comfortable, and as attractive as possible.
- Use trolley type vehicle as an enticement for non-traditional riders.
- Maintain consistency of vehicle quality, color and style for easy identification.
- Establish use of an identifiable logo for the system.

ROUTES/SCHEDULES/SERVICES

Goal #8 Address community needs relating to the establishment of the Community Coach and Indian River Transit Public Transportation System's routes and schedules.

Objectives

- Identify geographic areas and groups that might benefit from fixed route service.
- Plan and implement varied services in keeping with the modified fixed route system.
- Project future service needs as those needs relate to expanding routes, schedules and manpower allocations.
- Match schedules to trip needs by geographic, demographic and portion of day to be served.
- Schedule changes to accommodate the community's requests as well as operation limitations.
- By 2010 the hours of operation will accommodate employment transportation.

PERSONNEL

Goal #9 Maintain a team of well-trained employees who are company, service and community oriented, and who value their position in the community as

representatives of the Community Coach and Indian River Transit Public Transportation System.

External Objectives

- Increase community awareness and perception of system personnel, especially drivers by improving appearance and attitude of drivers through uniforms and I. D. Tags.

Internal Objectives

- Increase perceived self-value of all system employees.
- Build positive community, service, and company spirit and attitude.
- Provide for visitors and tours.
- Improve communications among operations, management, and drivers.
- Seek input from employees and ridership before decisions are made on routing, signage, or use of space changes.

FARES AND RESOURCES

Goal #10 Ensure a balanced fare structure that maximizes Indian River Transit Public Transportation System use and is easily understood while placing value on ridership and complete fare accountability.

Objectives

- Create an atmosphere of willingness to support and provide subsidies for public transit development.
- Increase the availability and opportunity of advance fare programs.
- Establish and implement work trip incentive programs with private business and governmental agencies.

PLANNING

Goal #11 Monitor public and private residential and commercial developments and secure the inclusion of the Indian River Transit Public Transportation System's position within them.

Objectives

- Incorporate transportation plans with other planning efforts by city and county departments when appropriate.
- Coordinate transportation needs with local street departments, trafficking, engineering and emergency services whenever necessary.
- Improve communication on planning and implementation programs between and among local agencies.

III. QUALITY ASSURANCE

A. Service Standards

1. Drug and Alcohol Testing

Indian River County Senior Resource Association, Inc., Drug-Free Workplace Program, Substance Abuse Program (June 1994)

Background

In response to the Omnibus Transportation Employee Testing Act of 1991, the Federal Transportation Administration (FTA) has published two regulations prohibiting drug use and alcohol misuse by transit employees and requiring transit agencies to test for prohibited drug use and alcohol misuse. These regulations are 49 CFR part 653 “Prevention of Prohibited Drug Use in Transit Operations,” and 49 CFR part 654, “Prevention of Alcohol Misuse in Transit Operations” that mandate urine drug testing, and breath alcohol testing for safety-sensitive positions and prevents performance of safety-sensitive functions when there is a positive test result. However, 49 CFR 40, 653 & 654 supersede when there is a conflict. In addition, the Department of Transportation has issued 49 CFR, Part 40 “Procedures for Transportation workplace Drug and Alcohol Testing Programs” requiring each direct recipient of Federal funds to certify that it has provided a drug-free workplace (See Appendix XIX). The Act requires that the recipient publish a statement prohibiting the use/abuse of controlled substances in the workplace, and requires the establishment of a drug-free awareness program.

a. Statement of Purpose

The Indian River County Senior Resource Association recognizes the problem of substance abuse (including alcohol) in our society. Drug and alcohol addictions are complex, yet treatable diseases. Likewise, we see substance abuse as a grave threat to our staff, clients and care givers. We are addressing this problem by introducing a new Substance Abuse Policy to ensure the agency will have a drug-free workplace, encompassing all employees.

While the Indian River County Senior Resource Association understands employees and applicants under a physician’s care are required to use prescription drugs, abuse of prescribed medications will be dealt with in the same manner as the abuse of legal/illegal substances. If an employee is instructed to take prescribed medication from a physician and it impairs his/her abilities, that employee must inform his/her supervisor and get permission to be relieved of work until prescribed medication is no longer necessary.

The ultimate objective of this policy is to protect the safety of the passengers, clients, employees, and the public by ensuring that all employees are fit for duty. Respect for individual privacy will be balanced with our obligation to keep a safe, productive drug-free environment. We would like to encourage those who use illegal drugs or abuse alcohol to seek help in overcoming their problem. In

this way, fully rehabilitated abusers who remain drug free can return to work as employees in good standing. With these basic objectives in mind, the agency has established this policy, with regard to use, possession or sale of alcohol and other drugs.

b. Definitions

- 1) “Legal Drug” includes alcohol, prescribed drugs and over-the-counter drugs, which have been legally obtained and are being used solely for the purpose for which they were prescribed or manufactured.
- 2) “Illegal Drug” is any drug which (1) is not legally obtained; (2) may be legally obtainable but has not been legally obtained, or (3) is being used in a manner or for a purpose other than as prescribed. Any illegal drug or any substance identified in Schedules I through V of Section 202 of the Controlled Substance Act (21 U.S.C. 812), and as further defined by 21 CFR 1300.11 through 1300.15.
- 3) “Fitness for Duty” means the employee is free from the effects of drugs and/or alcohol and their corresponding hangover effects. No employee shall use alcohol four (4) hours prior to reporting for duty or during the hours they are on call. Not only is an individual’s concentration, reflexes, coordination and judgment impaired during the use of the drug (the “high), but these skills may also be significantly impaired during the hangover. Fitness for duty may be determined by, but is not limited to the following observed behaviors:
 - i. Observed alcohol or drug abuse during work hours on agency premises or in a client’s home.
 - ii. Apparent physical state of impairment
 - iii. Odor of alcohol on breath
 - iv. Incoherent mental state
 - v. Marked changes in personal behavior that are otherwise unexplainable to other factors
 - vi. Deteriorating work performance that is not attributable to other factors
 - vii. Accidents or other action that provide reasonable cause to believe the employee may be under the influence
 - viii. A report of drug use, provided by a reliable and credible source.
 - ix. Evidence that an individual has tampered with drug test during his employment with the current employer.

c. Procedures

The Indian River County Senior Resource Association’s policy is to employ a work force free from use of illegal drugs and abuse of alcohol. All employees will be subject to urine drug testing and breath alcohol testing. Indian River County Senior Resource Association can elect to include hair testing when they perceive a need to further test. Any employee who refuses to comply with a request for testing who provides false information in connection with a test, or who attempts to falsify test results through tampering, contamination, adulteration, or substitution shall be removed from duty immediately, and their employment terminated. Refusal can include an inability to

provide a specimen, hair sample or breath sample without a valid medical explanation, as well as a verbal declaration, obstructive behavior, or physical absence resulting in the inability to conduct the test. It is a standard of conduct that the Indian River County Senior Resource Association employees shall not use illegal drugs or abuse alcohol. In order to maintain this standard, the agency shall establish and maintain the procedures set forth.

1) General Procedures

- i. The Indian River County Senior Resource Association, Inc. is dedicated to assuring fair and equitable application of this substance abuse policy. Therefore, the manager and supervisors are required to use and apply all aspects of this policy in an unbiased and impartial manner. Any supervisor/manager who knowingly disregards the requirements of this policy, or who is found to deliberately misuse the policy in regard to subordinates, shall be subject to disciplinary action, up to and including termination.
- ii. Any employee who fails to immediately notify the CEO of any criminal drug statute conviction shall be subject to disciplinary action up to and including termination.
- iii. An employee reporting for work who is unfit for duty or is unable to properly perform duties will be suspended without pay for that day and receive a written warning.
- iv. The supervisor should determine “fitness for duty” in coordination with another supervisor or manager, if possible.
- v. If a subordinate suspects another employee of being “unfit for duty”, the subordinate should report his/her concern to a supervisor or manager immediately.
- vi. If, in the opinion of the supervisor, the employee is considered “unfit for duty,” then he/she should be sent home by taxi or other safe mode of transportation, accompanied, if necessary, by the supervisor or other employee. Depending on the determination of the observed impairment, the employee may be referred to a facility for an evaluation, and will not be allowed to drive.
- vii. It is not the duty of the supervisor to determine if substance abuse has or has not occurred; the determination is for “fitness for duty” only.

2) Grounds for Termination or Discipline

- i. An employee bringing onto the agency’s or client’s premises or property, having possession of, being under the influence of, possessing in the employee’s body, or urine in any detectable amount, or using, consuming, transferring, selling or attempting to sell or transfer any form of illegal drug as defined above while between the beginning and ending of the employee’s work day, whether on agency business, property or not, is guilty of misconduct and is subject to discipline including discharge or suspension from employment without pay, even for the first offense. Failure to submit to required medical or physical examinations or tests is misconduct and is grounds for discharge or suspension from employment without pay.

- ii. Most states have established limits of 0.10% of alcohol in your blood as the maximum allowed. Others have reduced this limit to 0.05%. If the initial test indicates an alcohol concentration of 0.02 or greater, a second test will be performed to confirm the results of the initial test. An employee who has a confirmed alcohol concentration of 0.04 will result in removal from his/her position for eight hours, without pay, unless a retest results in a concentration measure of less than 0.04. An alcohol concentration of 0.04 or greater will be considered a positive test and in violation of this policy.
- iii. However, because the Indian River County Senior Resource Association believes any amount of alcohol in the workplace is unacceptable, an employee who is under the influence of alcoholic beverages any time while on agency business or at any time during the hours between the beginning and ending of the employee's work day, whether on agency business or property or not, shall be guilty of misconduct and is subject to discipline, including discharge or suspension from employment without pay, even for the first offense.
- iv. Failure to submit to required medical or physical examinations or tests is misconduct and is grounds for discharge or suspension from employment without pay.
- v. When drug test results are positive and the employee is referred to a treatment facility, termination will result if the employee refuses treatment, or does not comply with the treatment recommended.
- vi. Employees who test negative will receive full pay and benefits during the suspension period.
- vii. The consequences of a positive drug test include the possible denial of workers' compensation benefits.
- viii. If the employee has a "shy bladder" he/she will be given up to three hours to produce a sufficient urine specimen for a drug test. During the four hour period an employee would be given up to 40 ounces of fluid before making a second attempt to provide a complete specimen. The employee will be instructed to drink 8 ounces of fluid each 30 minutes during the four hour time frame until the 40 ounce maximum is reached. Refusal to drink the fluids would be treated as refusal to test.

d. Drug Testing

The Indian River County Senior Resource Association will be using drug tests to detect alcohol and drug use by employees. The type of drug test we will be using is the urinalysis and breath testing for alcohol. The drug test is a chemical analysis of an individual's urine to determine if one or more of the prohibited substances is present in the person's system.

Tests for alcohol concentration will be conducted by Breathalyzer test sample and utilizing a National Highway Traffic Safety Administration (NHTSA) approved evidential breath testing device (EBT) operated by a trained breath alcohol technician (BAT). For further description refer to, III PROCEDURES B.2 (Grounds for Termination or Discipline).

Any employee that has a confirmed positive drug or alcohol test will be removed from his/her position, informed of educational and rehabilitation programs available, and evaluated by a Substance Abuse Professional (SAP), where applicable. A positive drug and/or alcohol test will also result in disciplinary action up to and including termination.

The urine specimen is first screened to determine if the specimen is free from the presence of the prohibited substances. If the test indicates that there may be a presence of one or more of the substances, a second, more sophisticated test is performed. The second test, a Gas Chromatography/Mass Spectrometry (GC/MS) test is extremely accurate, with false readings nearly impossible.

The drugs that will be tested for include marijuana, cocaine, opiates, phencyclidine, amphetamines and alcohol. Employees will be tested when there is reasonable suspicion that they have used the prohibited substance, and after accidents resulting in personal injury, death or property damage.

Because our system's testing procedures were designed to protect the employee's privacy and dignity, only a limited number of people will have knowledge of the testing. Confidential records will only be released to the Medical Review Officer (MRO), Breath Abuse Technician (BAT), Substance Abuse Professional (SAP), Rosalie Webster (Director of Human Resources and/or a designee by written request), Reporting and confidentiality procedures are outlined in Section 5 and 6 of the Medical Review Officers' contract.

In compliance with U.S. DOT procedures for Transportation Workplace Drug Testing Programs (49 CFR Part 40), and the State of Florida, Department of Labor and Employment Security, Division of Workers' Compensation Drug Test Requirements, F.S. 440.102, all new employees will be tested before they are hired, and all advertised positions will indicate that the Indian River County Senior Resource Association is a drug-free workplace. Additionally, anyone returning to work after receiving treatment for substance abuse will be tested.

Active employees may be randomly selected to submit to drug and/or alcohol testing at a laboratory chosen by the Indian River County Senior Resource Association. Reasonable suspicion, as described in Definitions, "Fitness for Duty" will also be a basis for requiring any employee to be tested. Whenever possible, the supervisor should have the employee observed by a second supervisor or manager before requiring testing.

If the test results are positive, the employee may be referred to a treatment facility. If an employee is granted leave of absence for substance abuse rehabilitation, he/she will be required to participate in all recommended after-care and work rehabilitation programs.

The transit system affirms the need to protect individual dignity, privacy, and confidentiality throughout the testing process. Handling of tests and confidentiality shall be in conformance with 49 CFR Part 40, and as described below:

1. Except as required by law or expressly authorized in this section, the Indian River County Senior Resource Association shall not release employee information that is contained in records required to be maintained under 49 CFR sections 653.71 and 654.51.
2. An employee is entitled, upon written request, to obtain copies of any records pertaining to the employee's use of alcohol or controlled substances, including any records pertaining to his or her alcohol or controlled substances tests. Up to 10 pages will be provided free of copying charges. The Indian River County Senior Resource Association shall promptly provide the records requested by the employee. Access to an employee's records shall not be contingent upon payment for records other than those specifically requested.
3. The Indian River County Senior Resource Association shall release information regarding an employee's records as directed by the specific, written consent of the employee authorizing release of the information to an identified person. Release of such information is permitted only in accordance with the terms of the employee's consent.
4. Records shall be made available to a subsequent employer upon receipt of a written request from an employee.
5. The Indian River County Senior Resource Association may disclose information required to be maintained under 49 CFR Parts 653 and 654 pertaining to an employee/applicant, or the decision-maker in a lawsuit, grievance, or other proceeding initiated by or on behalf of such individuals, and arising from the results of an alcohol and/or controlled substance test administered under this part, or from the employer's determination that the employee engaged in conduct prohibited by this policy (including, but not limited to, a workers' compensation or other proceeding relating to a benefit sought by the employee).
6. The Indian River County Senior Resource Association shall make available copies of all results of a requested alcohol and/or controlled substances testing conducted under this policy and any other information pertaining to this alcohol misuse and/or controlled substance use prevention program, when requested by the U.S. Secretary of Transportation and any DOT agency, and all non-confidential/non-proprietary information, at cost, if requested by the employee/applicant.
7. When requested by the National Transportation Safety Board as part of an accident investigation, the Indian River County Senior Resource Association shall disclose information related to its administration of a post-accident alcohol and/or controlled substance test administered following the accident under investigation.

BLIND PERFORMANCE TESTING

The Indian River County Senior Resource Association will comply with blind testing to ensure quality control procedures with our laboratories. This procedure is designed to keep testing laboratories "sharp". Such procedures require submitting to laboratories urine specimens with

fictitious identifiers, that either contain no drugs or have been spiked with known quantities of specific drugs. The specimens are “blind” because they cannot be distinguished from specimens taken from employees subject to testing.

The Department of Transportation’s rules on blind performance testing applies to all covered employers, regardless of size. They require employers to submit three blind samples for every 100 employee specimens submitted for testing, up to a maximum of 100 blind samples per calendar quarter. Approximately 80% of the blind samples from employers with 2,000 or more covered employees must be “blanks”, i.e. contain no drugs; the remainder must be positive for one or more drugs per sample (and in such a distribution that all drugs to be tested are included in approximately equal frequencies of challenge). Positive specimens must be spiked only with those drugs for which the employer is testing. Employers with fewer than 2,000 covered employees must be “blanks”, i.e. contain no drugs; the remainder must be positive for one or more drugs per sample (and in such a distribution that all drugs to be tested are included in approximately equal frequencies of challenge).

Positive specimens must be spiked only with those drugs for which the employer is testing. Employers with fewer than 2,000 covered employees may submit blind samples in the 80-20 ration required of larger employers, or they may submit only blanks or two separately labeled portions of a specimen from the same non-covered employee.

Consortia are responsible for submitting blind samples on their members’ behalf. This means that each individual member need not submit any blind specimens independently; rather, the consortium must submit three blind samples for every 100 samples it submits on members’ collective behalf.

POST ACCIDENT TESTING

All employees will be required to undergo urine and Breathalyzer testing if they are involved in an accident with a Senior Resource Association vehicle that results in a fatality. This includes all employees that are on duty in the vehicles and any other whose performance could have contributed to the accident. In addition, a post-accident test will be conducted if an accident results in injuries requiring transportation to a medical treatment facility; or one or more vehicles incurs disabling damage that requires towing from the site and the employee could have contributed to the accident. (The employee need not have received a citation).

Following an accident, the employee will be tested as soon as possible, but not to exceed eight hours for alcohol testing and 32 hours for drug testing. Any employee involved in an accident must refrain from alcohol use for eight hours following the accident or until he/she undergoes a post-accident alcohol test. Any employee who leaves the scene of the accident without justifiable explanation prior to submission to drug and alcohol testing will be considered to have refused the test and their employment terminated. Employees tested under this provision will include not only the operations personnel, but any other covered employees whose performance could have contributed to the accident.

RETURN-TO-DUTY TESTING

All employees who previously tested positive on a drug or alcohol test must test negative and be evaluated and released to duty by the Substance Abuse Professional before returning to work.

Employees will be required to undergo frequent unannounced random urine, hair and breath testing during the period of their re-entry contract.

FOLLOW-UP TESTING

Once allowed to return to duty, an employee shall be subject to unannounced follow-up testing for at least 12 but not more than 60 months. The frequency and duration will be recommended by the substance abuse professional as long as a minimum of six tests are performed during the first 12 months after the employee has returned to duty.

EMPLOYEE REQUESTED TESTING

Any employee who tests positive for the presence of illegal drugs or alcohol above the minimum thresholds set forth in 49 CFR Part 40, as amended, will be evaluated by a Substance Abuse Professional (SAP). An SAP is a licensed or certified physician, psychologist, social worker, employee assistance professional, or addiction counselor with knowledge of and clinical experience in the diagnosis and treatment of alcohol-related disorders. The SAP will evaluate each employee to determine what assistance, if any, the employee needs in resolving problems associated with prohibited substance abuse or misuse.

Assessment by an SAP does not shield an employee from disciplinary action or guarantee employment or reinstatement with the Indian River County Senior Resource Association, Inc.

If an employee is allowed to return to duty, he/she must properly follow the rehabilitation program prescribed by the Indian River County Senior Resource Association Drug Free Policy, the employee must pass return-to-duty drug and alcohol tests, and be subject to unannounced follow-up tests for a period of one to five years. The cost of any treatment or rehabilitation services will be paid directly by the employee or their insurance provider. Employees will be allowed to take accumulated sick leave and vacation leave to participate in the prescribed rehabilitation program.

RE-ENTRY CONTRACTS

Employees who re-enter the work force must agree to a re-entry contract. That contract may include (but is not limited to):

1. A release-to-work statement from an approved Substance Abuse Professional
2. A negative test for drugs and/or alcohol
3. An agreement to unannounced frequent follow-up testing
4. A statement of expected work-related behaviors
5. An agreement to follow specified after-care requirements with the understanding that violation of the re-entry contract is grounds for termination.

e. Training

PURPOSE: To conform with the Personnel Policies of the Indian River County Senior Resource Association and to provide a drug-free workplace.

REQUIRED TRAINING: Supervisors who make reasonable suspicion determinations shall receive at least 60 minutes of training on the physical, behavioral and performance indicators of probable drug use and 60 minutes on probable alcohol use.

Safety-sensitive employees shall be provided a minimum of 120 minutes/2 hours of orientation and training on this policy and its implementation and on the adverse effects of drug and alcohol abuse on personal health, safety, and the work environment.

Any questions regarding this policy or any other aspect of the Drug-free and Alcohol-free Program should contact:

Karen Wood
Senior Resource Association, Inc.
694 14th Street
Vero Beach, FL 32960
772-569-0760

COMMUNITY TRANSPORTATION COORDINATOR STANDARDS

1. Driver criminal background screening.
All drivers are screened for criminal background checks and driver's license records before hiring. Local background checks are performed by Indian River Sheriff's Department.
2. Escorts and children.
All children under 12 years of age or individuals unable to conduct their own daily affairs must be accompanied by an adult or an aide. Child restraint seats are provided for children 3 years of age or younger. These seats are federally approved and standards are from code 316.613. Escorts are not charged.
3. Rider property
All riders' property is the responsibility of the rider and provider assumes no responsibility for said property (six grocery bag limit per person).
4. Vehicle transfer points.
Transfer points appear in the schedule.
5. Complaints and grievances.
Complaints and grievances are handled through the attached Grievance Policy
6. Vehicle related requirements.

Vehicle requirements are according to DOT standards.

7. Out of Service area trips.
Out of Service area trips are handled on a per need basis according to individual service contracts and providers.
8. Billing requirements of CTC toward subcontractors.
If the CTC without reasonable cause fails to make payment to the subcontractors and suppliers within seven (7) working days after the receipt by the CTC of full or partial payment, the CTC shall pay to the subcontractors and suppliers a penalty in the amount of one-half of one percent of the amount due, per day, from the expiration of the period allowed herein for payment. (F.S. 2000, Chapter 287/Part I/287.0585. Late payments by contractors to subcontractors and suppliers; penalty).
9. Public Transit Systems Ridership
Public transit ridership is reported in the Annual Operating Report (AOR).
10. Monitoring of Subcontractors.
Subcontractors will be monitored annually by the CTC.
11. Liquidated Damages
Liquidated Damages will be handled according to DOT policies.
12. Client/trip data base
The client/trip data base is maintained at the main office of the CTC.
13. Driver ID
All drivers have identification badges.
14. Seating
Seating is on a first come, first served basis. Not to exceed manufacturer requirements.
15. Passenger loading assistance
All passengers needing assistance will be given assistance by the driver of the vehicle.
16. Smoking, eating or drinking on vehicles
No smoking, eating or drinking will be allowed on any CTC vehicles.
17. Passenger No-Show policy
Passengers with no-shows will receive a warning letter after two (2) no-shows and will be removed from the system for a period of ninety (90) days after three (3) no-shows.
18. Vehicle Air Conditioning and or heater
All CTC vehicles are equipped with air conditioning and heaters.
19. Communication systems required for vehicles to base.

All CTC vehicles are equipped with radios hooked up to the county 800MHZz system.

20. Passenger Assistance
Drivers will assist passengers with packages (limit six), when needed.
21. Accidents
All accidents will be reported immediately to the CTC and appropriate accident forms will be filled out to document the nature of the accident, cause, and results. All drivers involved in an accident must immediately be tested for illegal substances.
22. Road Call.
The County Road & Bridge Department will assist in Road Calls.
23. Quantify Service Standards

The following local standards are established by the LCB:

- Service Effectiveness: Minimum passenger trips per vehicle mile 0.15
- Cost Efficiency/Effectiveness: Average operating expenses per passenger trip less than \$6.31
- Safety: Number of accidents per 100,000 vehicle miles: less than 0.6
- Reliability: The average number of vehicle miles between road call: 45,000 miles
- Vehicle Utilization: The average number of vehicle miles traveled per TD capita: more than 21 miles
- Complaints are recorded in a log book, kept in the CTC's transportation office and reviewed by transportation coordinator monthly.
- Presently call-hold time is controlled by the office manager (only 2 dispatchers with one being the office manager).
- The scheduled pick-up time is recorded on driver daily manifest and actual pick-up time is recorded by the driver. On time performance is checked monthly by transportation coordinator.
- The pick-up window established by the I.R.C. SRA is 45 minutes maximum. A non scheduled ADA-vehicle is available to take transfer clients to assure of this window.

B. Local Grievance Procedures/ Process

The Indian River County Transportation Disadvantaged Coordinating Board has adopted the following grievance procedures. The purpose for this framework is to have complaints resolved in an expedient and fair procedure.

The creation of a procedure for formal resolution by a grievance committee is mandated by law under Chapter 427, Florida Statutes, and Rule 41, Florida Administrative Code. Membership of the Grievance Committee is appointed by the Transportation Disadvantaged Coordinating Board. The Grievance Committee is composed of the following five Board members:

1. A veterans' representative, recognized by the Florida Department of Veterans' Affairs;
2. A Florida Department of Transportation representative;
3. A public education community representative;

4. A citizen over 60 representing the elderly; and
5. A citizen advocate representative and user of the system.

The Grievance Committee meets as often as is required to resolve complaints but only after the first line of the resolution process has been completed and the grievance pursues the formal procedures.

Grievance Procedures

| TIME FRAME (work days) | STEPS |
|---------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | First line of resolution process (informal) |
| | 1. Complainant notifies the Transportation Disadvantaged Coordinator of the grievance and any documentation related to the matter. This may be in the verbal or written form, preferably written. |
| 5 days | 2. Coordinator creates a standard file on the grievance which includes all available information, dates, history, etc. for reviewing grievance. |
| 5 days | 3. Coordinator meets with appropriate parties to discuss grievance. |
| | 4. Coordinator documents their decision on the resolution of the grievance and forwards copy of document to complainant, Chairperson of the Transportation Disadvantaged Coordinating Board and Metropolitan Planning Organization Director. The written decision will include a statement of the complainant's rights to file a formal grievance with the Grievance Committee. |
| | Second line of resolution process (formal) |
| 5 days | 5. Upon receipt of the Coordinator's decision for resolution of the grievance, the Complainant has five working days to decide if the proposed resolution is agreeable. If not, the Complainant may submit a written request for a formal Grievance Committee review of the complaint. This request should be addressed to the Coordinator with a copy to the Transportation Disadvantaged Coordinating Board Chairperson and Metropolitan Planning Organization Director. It should include grievance, the decision of the Coordinator and basis for the dissatisfaction of the proposed resolution. |
| Up to 15 | 6. Upon receipt of the Complainant's formal request, Up to the Coordinator will have up to fifteen (15) working days to set up a Grievance Committee meeting. The meeting must be scheduled within fifteen (15) working days from the date the Coordinator receives the request. The Coordinator will contact the appropriate persons to participate in the meeting and make available all documents to the Grievance Committee members at least three (3) working days before the scheduled meeting. |

- 5 days
7. The Grievance Committee shall meet with the Coordinator and Complainant. There shall be a minimum of three Committee members present. The Committee shall consider the issues.
 8. The Grievance Committee will have five (5) working days to reach a majority recommendation for resolution of the grievance. A written decision will be forwarded to the Complainant, the Metropolitan Planning Organization Director and the Community Transportation Coordinator. The decision shall also include a statement of the Complainant's rights to file a grievance with the State Commission for the Transportation Disadvantaged Grievance Committee.

Final line of resolution (formal)

9. If the Complainant is still not satisfied with the action of the Grievance Committee, they may file a formal complaint with the State's Commission for the Transportation Disadvantaged Grievance Committee.

All records of the grievance, including the Coordinator's and Grievance Committee reports, will be maintained by the Coordinator and made available upon request by the Commission for the Transportation Disadvantaged Grievance Committee.

C. Evaluation Process

The Transportation Disadvantaged Local Coordinating Board (TDLCB) shall evaluate the performance of the Community Transportation Coordinator and provide a recommendation to the DOPA for continuation or replacement of the Community Transportation Coordinator. To facilitate this evaluation process, the TDLCB developed a set of criteria for the coordinator evaluation. On September 11, 1992, the Board of County Commissioners, acting as the county's Designated Official Planning Agency (DOPA), approved the CTC's evaluation procedures and standards.

According to state requirements, the county can utilize its own CTC evaluation criteria to evaluate the performance of the CTC. The state, however, is requiring that the following modules from the CTD's evaluation workbook be used as part of the CTC's performance evaluation:

- Competition
- Cost Effectiveness and Efficiency
- Availability of Service

1. CTC Evaluation Process

Florida Rule Chapter 41-2, implementing the provisions of Chapter 427, Florida Statutes, places upon the Community Transportation Coordinator (CTC) the responsibility for the overall planning, administration, monitoring, coordination, arrangement and delivery of transportation disadvantaged (TD) services within its designated service area (Rule 41-2.011 (1)). This rule also requires that the

Local Coordinating Board (LCB) on a continuous basis evaluate the services provided by the County Transportation Coordinator and provide an evaluation of the Coordinator's performance in general and relative to Transportation Disadvantaged Commission's standards.

a. Responsibilities And Timeframe

The Transportation Disadvantaged Local Coordinating Board (TDLCB) must evaluate the performance of the Community Transportation Coordinator (CTC) on an annual basis and provide a recommendation to the Designated Official Planning Agency (DOPA) for continuation or replacement of the Community Transportation Coordinator.

Evaluation Subcommittee

The TDLCB shall designate an Evaluation Subcommittee on an annual basis consisting of three voting members of the TDLCB to evaluate the previous year's performance of the Community Transportation Coordinator and to provide a written report to the TDLCB.

Timeframe

- a) The evaluation report must cover the period from July 1 to June 30, corresponding to the timeframe of the Annual Operating Report (AOR). The evaluation subcommittee's report must be submitted for the TDLCB's consideration at the November meeting of the TDLCB.
- b) One additional evaluation report per year may be requested by the TDLCB members. The request for additional evaluation reports must be approved by the majority vote of the TDLCB members.

b. Evaluation Criteria

The following evaluation standards have been developed to allow the Local Coordinating Board to assess the performance of the Coordinator using locally developed criteria which incorporate those performance criteria provided by the Transportation

Disadvantaged Commission. These standards address four areas: coordination/planning, operation, costs/financial management, and utilization.

Coordination/Planning

Coordination is defined by Chapter 427, Florida Statutes, as "the arrangement for the provision of transportation service to the transportation disadvantaged in a manner that is cost effective, efficient, and reduces fragmentation and duplication of services". These standards are intended to measure how well the County Transportation Coordinator (CTC) manages to bring together operators and consumers to ensure quality transportation for transportation disadvantaged persons at a reasonable cost.

| Performance Ranking | | | | | |
|----------------------------------------|-----------|------|---------|------|----------|
| Criteria | Excellent | Good | Average | Poor | Comments |
| 1) CTC's work toward implementation of | | | | | |

| Performance Ranking | | | | | |
|---------------------------------------------------------------------------------------------------------------|-----------|------|---------|------|----------|
| Criteria | Excellent | Good | Average | Poor | Comments |
| the Coordinated Transportation Disadvantaged plan strategies as identified in the annual elements of the plan | | | | | |
| 2) CTC's effort toward expansion of the coordinated system (signing additional contract with providers) | | | | | |
| 3) CTC's effort to make the most effective use of existing TD services | | | | | |
| 4) CTC's effort for obtaining additional funding | | | | | |
| 5) CTC's reservation and scheduling system | | | | | |
| 6) CTC's promotional and marketing campaign | | | | | |
| 7) CTC's effort to coordinate participation in inter-county trips | | | | | |
| 8) Others (please specify) | | | | | |

Operation

Operation involves the actual delivery of services to the transportation disadvantaged. It is considered to be the aspect of the overall evaluation most indicative of the coordinator's performance. The standards in this area measure what service is available to the TD public and how well it is provided. Many of the standards in this section are specific requirements required within Rule Chapter 41-2.

| Performance Ranking | | | | | |
|------------------------------------------------------------------------------------------------|-----------|------|---------|------|----------|
| Criteria | Excellent | Good | Average | Poor | Comments |
| 1) CTC's safety plan as measured annually by a declining number of no fault accidents per mile | | | | | |
| 2) CTC's effort to provide services on a 24 hours per day, seven days per week basis | | | | | |
| 3) CTC's available insurance | | | | | |
| 4) CTC's accessibility (how easy it is to contact CTC) | | | | | |
| 5) CTC's method of recording, reporting and resolving complaints | | | | | |
| 6) CTC's system to ensure that all | | | | | |

| Performance Ranking | | | | | |
|---------------------------------------------------------------------------------------------------------|-----------|------|---------|------|----------|
| Criteria | Excellent | Good | Average | Poor | Comments |
| equipment used complies with federal, state, TD Commission and local policies | | | | | |
| 7) CTC's system to ensure that contractors' performance meets required specifications | | | | | |
| 8) CTC's system of performing client satisfaction surveys and reporting to the TDLCB | | | | | |
| 9) CTC's effort on reducing the clients waiting time consistent with the plan | | | | | |
| 10) CTC's on time performance record | | | | | |
| 11) CTC's effort to avoid missing scheduled trips | | | | | |
| 12) CTC's system of recording all refusals caused by system limitation and reporting to the TDLCB | | | | | |
| 13) CTC's employee training program | | | | | |
| 14) CTC's system to ensure that service is provided on a non-discriminatory basis | | | | | |
| 15) CTC's effort to prioritize trips | | | | | |
| 16) CTC's data base regarding routes, schedules, facilities, vehicles, locations, and number of clients | | | | | |
| 17) CTC's effort to identify unmet needs | | | | | |
| 18) CTC's vehicle inventory and maintenance system | | | | | |
| 19) CTC's record for submittal of the MOA to the TDC on time | | | | | |
| 20) Others (please specify) | | | | | |

Cost/Financial Management

Costs and Financial Management standards reflect requirements for proper methods of calculating, recording and reporting of service costs. Standards contained in this section reflect guidance contained in Rule Chapter 41-2.

| Performance Ranking | | | | | |
|--------------------------------------------|-----------|------|---------|------|----------|
| Criteria | Excellent | Good | Average | Poor | Comments |
| 1) CTC's fully allocated one-way passenger | | | | | |

| Performance Ranking | | | | | |
|-------------------------------------------------------------------------------------------------------------------------|-----------|------|---------|------|----------|
| Criteria | Excellent | Good | Average | Poor | Comments |
| trip cost compared to other similar jurisdictions | | | | | |
| 2) CTC's system of recording the appropriate costs and reporting to the TDLCB | | | | | |
| 3) CTC's account system concurrence with a uniform accounting system for rural and specialized transportation providers | | | | | |
| 4) CTC's effort to raise local funds | | | | | |
| 5) CTC's effort to develop an equitable fare structure and solicit client contributions as appropriate | | | | | |
| 6) CTC's effort to utilize all federal, state, and local funds | | | | | |
| 7) CTC's effort to reduce one-way passenger trip cost | | | | | |
| 8) Others (please specify) | | | | | |

Utilization Review

Utilization, like Operation, represents the practical aspect of the Coordinator's responsibilities. These standards are intended to measure the degree to which the Coordinator has provided coordinated transportation services, which include the greatest possible involvement of local agencies and the most effective use of resources and funding.

| Performance Ranking | | | | | |
|---------------------------------------------------------------------------------------------------------------------------|-----------|------|---------|------|----------|
| Criteria | Excellent | Good | Average | Poor | Comments |
| 1) CTC's system to ensure provision of most effective and efficient service | | | | | |
| 2) CTC's effort to utilize volunteers' time and vehicles | | | | | |
| 3) CTC's effort to utilize the vehicles of all non-profit organizations | | | | | |
| 4) CTC's system of matching clients with appropriate vehicles | | | | | |
| 5) CTC's flexibility to rotate vehicles based on the number of reservations and the clients' origins and the destinations | | | | | |
| 6) CTC's system for regular review of its organization and equipment | | | | | |

| Performance Ranking | | | | | |
|-----------------------------------------|-----------|------|---------|------|----------|
| Criteria | Excellent | Good | Average | Poor | Comments |
| 7)CTC's efforts to utilize school buses | | | | | |
| 8) Others (please specify) | | | | | |

2. CTC Monitoring Procedures of Operators and Coordination Contractors

The CTC is responsible for evaluating and monitoring all TD provider (operator) and performing periodic spot checks for quality assurance. While evaluating the operators the CTC considers the following factors:

- Safety Program
- Drug-free Workplace Policy
- Cost associated with service provision
- Vehicle conditions (cleanliness, handicapped accessible)
- Provision of operational and financial data to the CTC in a timely manner
- Insurance
- Accident data
- Drivers cleanliness, courtesy
- Environmental considerations such as recycling, energy saving, alternative fuels, pollution
- Others

3. Coordination Contract Evaluation Criteria

As part of the annual operation report and MOA all coordination contracts are reviewed by the CTC and LCB and continuation of the contract is recommended if contractors provide the most cost-effective and efficient utilization of TD funds. The CTC and LCB while providing contracts must ensure that the TD needs of the community are best served.

4. Official Planning Agency Evaluation Process

The LCB is reviewing the performance of the official planning agency's staff on a regular basis. They make sure that all the duties of the LCB and DOPA are addressed in a timely manner (all reports, funding applications, agenda items, etc. are provided according to the schedule). Also, staff will be reviewed through the CTC's Quality Assurance and Program Evaluation (QAPE) process.

D. By-Laws for the Transportation Disadvantaged Local Coordinating Board (LCB)

| | |
|-------------|----------------------------------------------------|
| Section 101 | Short Title |
| Section 102 | Authority |
| Section 103 | Jurisdiction |
| Section 104 | Effective Date |
| Section 105 | Preamble |
| Section 106 | Purpose & Functions |
| Section 107 | Membership |
| Section 108 | Appointment, Qualifications and Terms of Office |
| Section 109 | Officers and Duties |
| Section 110 | Regular LCB Meetings |
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| Section 114 | LCB Meeting Agenda |
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| Section 117 | Subcommittees |
| Section 118 | Administration |
| Section 119 | Technical Advisory Committee |

Section 101 Short Title

This chapter, the terms and provisions contained herein, shall be known as the "By-laws for the Transportation Disadvantaged Local Coordinating Board (LCB)" of Indian River County, Florida.

Section 102 Authority

- (1) These by-laws are adopted pursuant to the authority contained in Chapter 427, Florida Statutes and Rule Chapter 41-2, Florida Administrative Code.
- (2) Whenever any provision of these by-laws refer to or cite a section of Chapter 427, Florida Statutes or Rule Chapter 41-2, Florida Administrative Codes it shall be deemed to refer to those sections, as amended.

Section 103 Jurisdiction

These by-laws shall be effective throughout Indian River County. Indian River County includes the unincorporated area as well as the municipalities.

Section 104 Effective Date

The provisions in this chapter were adopted on February 21, 1991 and became effective on same.

Section 105 **Preamble**

The Local Coordinating Board has been created pursuant to Chapter 427, Florida Statutes and Rule Chapter 41-2, Florida Administrative Code. The following sets forth the by-laws, policies and procedures which shall serve to guide the proper functioning of the Local Coordinating Board (LCB). The intent is to provide guidance for the operation of the LCB to ensure the accomplishment of transportation disadvantaged planning and development of tasks to create an efficient and safe public transportation system.

Section 106 **Purpose and Functions**

- (1) The citizens of the area shall be involved in the transportation disadvantaged planning process by the establishment of a Local Coordinating Board (LCB). The purpose of the LCB shall be to identify local service needs and to provide information, advice and direction to the Community Transportation Coordinator (CTC) on the coordination of services to be provided to the transportation disadvantaged population.
- (2) The Board shall meet at least quarterly and shall perform the following duties:
 - (a) Maintain official meeting minutes, including an attendance roster, reflecting official action and provide a copy of same to the State Commission for the Transportation Disadvantaged and the Chairperson of the Designated Official Planning Agency (DOPA).
 - (b) Review and approve the Memorandum of Agreement including the Transportation Disadvantaged Service Plan.
 - (c) On a continuing basis, evaluate services provided under the designated service plan. Annually, prior to the Coordinator's annual evaluation, provide the Metropolitan Planning Organization (MPO) or Designated Official Planning Agency (DOPA) with an evaluation of the Coordinator's performance in general and relative to the State Transportation Disadvantaged Commission standards and the completion of the annual service plan. Recommendations relative to performance and the renewal of the Coordinator's contract shall be included in the report.
 - (d) In cooperation with the CTC, review and provide recommendations to the Commission and the MPO or DOPA on all applications for local government, state or federal funds relating to transportation of the transportation disadvantaged in the designated service area to ensure that any expenditures within the designated service area are provided in the most cost effective and efficient manner.
 - (e) Review coordination strategies for service provision to the transportation disadvantaged in the designated service area to seek innovative ways to improve cost effectiveness, efficiency, safety, working hours and types of service in an effort to increase ridership to a broader population. Such strategies should also encourage

multi-county and regional transportation service agreements between area Community Transportation Coordinators and consolidation or adjacent designated service areas when it is appropriate and cost effective to do so.

- (f) Appoint a Grievance Subcommittee as outlined in the TDSPlan to process, investigate and resolve complaints and make recommendations to the Local Coordinating Board for improvement of service from agencies, users or potential users of the system in the designated service area. The LCB shall establish procedures to provide regular opportunities for issues to be brought before such subcommittee and to resolve them in a timely manner.
- (g) In coordination with the CTC, jointly develop applications for funds that may become available.
- (h) Review and approve the Coordinator's Annual Operating Report, outlining the accomplishments and activities or other areas of interest to the Commission and the MPO or DOPA for the most recent operating year period.
- (i) Develop and maintain a vehicle inventory and utilization plan of those vehicles purchased with transportation disadvantaged funds for inclusion in the Board Annual Report to the Commission.

Section 107

Membership

- (1) LCB voting membership may be attained in the following ways:
 - (a) An elected official may be chosen by his peers to serve as Chair;
 - (b) A representative may be selected by a state or local agencies and be recommended to the Designated Official Planning Agency to serve on the Board.
- (2) The LCB membership shall include the following voting members:
 - (a) Chairperson - Representative of the Designated Official Planning Agency (DOPA);
 - (b) A representative of the Florida Department of Transportation (FDOT);
 - (c) A representative of the Florida Department of Children and Families (FDC&F);
 - (d) A representative of the Public Education Community;
 - (e) A representative of the Florida Department of Labor and Employment Security (FDLES);
 - (f) A person who is recognized by the Florida Department of Veterans Affairs, representing the veterans in the county;
 - (g) A person who is recognized by the Florida Association for Community Action, representing the economically disadvantaged in the county;
 - (h) A person over sixty, representing the elderly in the county;
 - (i) A handicapped person, representing the handicapped in the county;

- (j) Two citizen advocate representatives in the county; one who must be a user of the system;
 - (k) A representative of the Florida Department of Elder Affairs (FDEA);
 - (l) A representative of the State Coordinating Council of Early Childhood Services (CCECS);
 - (m) A representative of the Florida Agency for Health Care Administration (FAHCA);
 - (n) A representative of the Private Transportation Industry; and
 - (o) A representative of the Mass/Public Transit industry if applicable.
- (3) Additionally, the DOPA may appoint persons who apply for non-voting membership appointments. Should the county have a public mass transit operator he or she shall be appointed as a non-voting member by the DOPA.
- (4) Non-voting members shall sit with same rights and privileges as other members, except that non-voting members shall not have the right to present motions or second same, or to vote upon any motion of the LCB.

Section 108

Appointment, Qualifications and Terms of Office

- (1) The LCB shall encourage affected state/local agencies, the DOPA and interested citizens in Indian River County to nominate representatives to serve as voting members on the LCB.
- (2) Each LCB member is expected to demonstrate his or her interest in the LCB activities through regular attendance at scheduled LCB meetings. If any voting member misses three (3) consecutive meetings for unexcused reasons, the LCB Chairman shall review and determine if a recommendation for removal should be provided to the DOPA. If that voting member is an agency representative rather than a citizen member, the DOPA shall send written communication to the agency head to report the three consecutive un-excused absences, and request a recommendation for a replacement to be appointed by that agency.
- (3) In the event a member resigns, such member shall submit his/her resignation in writing to the DOPA. The resignation shall take effect upon receipt of the letter.
- (4) LCB members shall be appointed to terms as follows:
- (a) Except for the Chair, and state agency representatives, the members of the Board shall be appointed for three (3) year staggered terms with initial membership being appointed equally for one, two and three years. The Chair shall serve until replaced by the DOPA.
- (5) Vacancies shall be filled in the same manner as the initial appointment.
- (6) The DOPA shall recommend that alternates be nominated by the agency representatives to serve in their place should they be absent.

- (7) Each member of the LCB may request that the DOPA recognize one designated alternate who may vote in the absence of that member on a one-vote-per-member basis.

Section 109 **Officers and Duties**

- (1) The LCB voting membership shall hold an organizational meeting as part of their first meeting of each year for the purpose of electing a Vice Chair from its voting membership. The LCB will also confirm the yearly calendar of meetings at the January meeting.
- (2) The Chair shall accept nominations either in written or verbal form at the meeting specified in Section (1) above.
- (3) If a quorum (one-half of the total membership, plus one) is in attendance, Vice Chair shall be elected by a majority of the members present at the organizational meeting and shall serve a term of one year.
- (4) The Chair shall preside at all meetings. In the event of his or her absence, or at his or her direction, the Vice Chair shall preside.
- (5) In the event of the permanent incapacitation or removal from the LCB of the Chair or Vice Chair, a new Chair will be chosen from his or her peers of elected officials and named by the DOPA, or a new Vice Chair elected from the membership at the next scheduled meeting.
- (6) The Chair shall sign all appropriate forms and letters.

Section 110 **Regular LCB Meetings**

- (1) LCB meetings shall be held at least quarterly or on an as-needed basis at a date, time and place to be designated by the Chair. Regular meeting dates and times may be changed by the Chair or Vice Chair to accommodate holidays or for other reasons.
- (2) In the event that the Chair or Vice Chair wishes to cancel or change the meeting time and/or date of a regular meeting, advance notice of such cancellation or change shall be given at least seven (7) working days before such meeting was to have taken place.
- (3) No less than fourteen (14) working days prior to a regular LCB meeting, notice and tentative agendas shall be sent to the members of the LCB and local media services.

Section 111 **Special LCB Meetings**

- (1) A special meeting of the LCB may be called by the Chair or a majority of the voting members by a phone vote. Each voting and non-voting member of the LCB will receive a notification of such special meeting stating the date, hour and place of the meeting and the purpose for which such meeting is called, and no other business shall be transacted at that meeting.

- (c) The Chair shall state every question coming before the LCB and announce the position of the LCB on all matters coming before it;
- (d) A simple majority vote of the voting members present shall govern and conclusively determine all questions of order not otherwise covered. Individual dissent shall be recorded and represented as such;
- (e) No individual member shall represent an individual opinion to the press, State, Federal or local officials or any other party as being the consensus/findings of the LCB unless previous discussion and a majority vote was taken at LCB meeting;
- (f) The Chair shall call the LCB meeting to order at the appointed hour;
- (g) In the absence of the Chair and Vice Chair, the County staff representative shall determine whether a quorum is present and in that event shall call for election of a temporary Chair. The temporary Chair shall preside at the meeting and relinquish the chair upon conclusion of the meeting;
- (h) Any LCB member who must be absent from any LCB meeting shall notify the LCB secretary of the absence as soon as convenient;
- (i) Any LCB member who is presented with a voting conflict of interest under Section 112.3143, Florida Statutes must file a "Form 8B Memorandum of Voting Conflict for County, Municipal and other Local Public Officers" and comply with the instructions contained therein. A voting conflict occurs when the measure to be voted on could inure to the LCB members special private gain or to the special gain of a principal (other than a governmental agency) by whom the Board member is retained. The secretary of the Board shall provide any member with form 8B upon request.
- (j) Any LCB member who has disagreement with Committee or Board policies shall state same in a letter to the LCB Chair and the DOPA chair prior to seeking a resolution;
- (k) The vote upon any resolution, motion or other matter shall be a voice vote, unless the Chair or any member requests that a roll call be taken;
- (l) Upon every roll call vote, the LCB secretary shall call the roll, tabulate the votes, and announce the results;
- (m) The minutes of prior meetings may be approved by a majority of the voting members present, and upon approval shall become the official minutes;
- (n) Any citizen who is not a member of the LCB can be placed on an agenda upon prior written request of a regular meeting of the LCB and be heard concerning any matter within the scope of the jurisdiction of the LCB;
- (o) Any citizen who is not a member of the LCB shall not be permitted to address the LCB on any matter not appearing on the agenda, unless the LCB shall first grant permission to be heard by a majority of the voting members present;
- (p) Any citizen who is not a member of the LCB shall not be entitled as a matter of right to address the LCB on any matter listed on the official agenda which is not scheduled for public hearing, discussion or debate, unless the LCB shall first grant permission to be heard by the majority of the voting members present at the meeting.
- (q) Each person, other than the LCB members and County staff members who address the LCB shall give the following information for the minutes:
 1. Name;
 2. Address;
 3. Representing;

4. Whether or not he or she is being compensated by the person(s) for whom he or she speaks; and whether he or she, or any member of his or her immediate family, has a personal financial interest in the pending matter.
- (r) Unless further time is granted by the LCB, each person shall limit his or her address to five (5) minutes; and
 - (s) All remarks shall be addressed to the LCB as a body and not to any member thereof. No person, other than LCB members and the person having the floor, shall be permitted to enter into any discussion, either directly or through a member, without permission of the presiding officer. No question shall be asked of a LCB member except through the presiding Chair.

Section 117

Subcommittees

- (1) LCB Subcommittees shall be designated by the LCB as necessary to investigate and report on specific subject areas of interest to the LCB. These subcommittees shall include, but are not limited to:
 - (a) Paratransit, Intercounty travel and future public transportation development;
 - (b) Fare structure and service area needs assessment; and
 - (c) Directions for future growth and funding sources
- (2) LCB Subcommittees may be designated as necessary to deal with administrative and legislative procedures. These subcommittees may include, but are not limited to:
 - (a) Administrative matters (CTC evaluation, etc.);
 - (b) By-law amendments, and
 - (c) Grievance matters.

Section 118

Administration

- (1) The MPO staff director, or designee, shall be the direct liaison between the LCB Chair and the DOPA.
- (2) MPO staff, Community Development Department staff, BCC office staff, and Legal Department staff shall serve as the support staff of the LCB.
- (3) MPO staff is responsible for the minutes of all meetings and all notices and agendas for future meetings.
- (4) MPO staff shall furnish recording capability for all meetings.
- (5) MPO staff will assist the Chair in the preparation, duplication and distribution of all printed materials necessary for meetings.

- (6) All official actions of the LCB are to be recorded and kept in permanent minute files by MPO staff. These files shall be open to public inspection during regular office hours of the County staff office located at 1840 25th Street in Vero Beach, Florida.

Section 119

Technical Advisory Committee

(1) Purpose

The purpose of the Transportation Disadvantaged Technical Advisory Committee is to:

- (a) review technical merits of work activities; and
- (b) when requested by the TDLCB, provide comment, advice and direction to be incorporated in the decision-making process of the Transportation Disadvantaged Coordinating Board.

(2) Definition

An entity composed of representatives appointed by the Transportation Disadvantaged Local Coordinating Board may review technical merits of the County Transportation Disadvantaged Program, provide information, clarification, advice and recommend actions for the LCB to consider.

(3) Membership

All members of the Indian River County Transportation Disadvantaged Technical Advisory Committee shall be approved by the Transportation Disadvantaged Local Coordinating Board.

Membership shall be limited to a maximum of five (5) members. Members will be approved at the discretion of the Transportation Disadvantaged Local Coordinating Board.

Any public or private transportation provider, Transportation Disadvantaged Local Coordinating Board member, funding agency, governmental agency or user of the paratransit system may request membership status.

(a) Voting Members

Each approved member or his/her Alternate has voting privileges.

(b) Voting

A quorum shall be necessary for a vote to be taken. Members or their Alternates must be present to cast a vote. A roll call shall be made upon request of a member. All votes, whether pro or con, or a tie, shall be forwarded (with comment if requested by Technical Advisory Committee member) to the Transportation Disadvantaged Local Coordinating Board.

(c) Alternates

Members may designate in writing an Alternate to be approved by the Transportation Disadvantaged Local Coordinating Board. The alternate shall vote only in the absence of that member on a one-vote per member basis.

(d) Quorum

A quorum will be required for an official meeting. A majority of the total voting membership shall constitute a quorum. Authorized Alternates shall be counted as members present. Majority is defined as one-half plus one members of the total Transportation Disadvantaged Technical Advisory Committee members.

(4) Officers

(a) Chairperson

At its first meeting, the Transportation Disadvantaged Technical Advisory Committee shall elect one of its voting members to serve as the official Chairperson to preside at all Transportation Disadvantaged Technical Advisory Committee meetings for the year. The Chairperson shall be elected by a majority vote of a quorum of the Technical Advisory Committee members.

(b) Vice-Chairperson

The Transportation Disadvantaged Technical Advisory Committee shall elect one of its voting members to serve as the official Vice-Chairperson. In the event of the Chairperson's absence, the Vice-Chairperson shall assume the duties of the Chairperson and conduct the meeting.

(c) Executive Secretary

The Planning staff shall serve the TAC in an administrative and coordinating capacity. The TDLCB secretary shall serve the TAC in a secretarial capacity.

(5) Terms Of Tenure

The Chairperson and Vice-Chairperson are elected by the Transportation Disadvantaged Technical Advisory Committee at its first meeting. The tenure of the Chairperson and the Vice-Chairperson shall be for a period of one year.

(6) Attendance

The Board shall review and consider rescinding the appointment of any member of the Technical Advisory Committee who fails to attend or send an alternate to three (3) consecutive meetings.

(7) Administration

(a) Staff Support

The MPO and/or the Community Development Department shall provide the Transportation Disadvantaged Technical Advisory Committee with sufficient staff support and resources to enable the Transportation Disadvantaged Technical Advisory Committee to fulfill its responsibilities. These responsibilities include providing sufficient staff:

1. To manage and oversee the operations of the Technical Advisory Committee; and
2. To assist in the scheduling of meetings, preparing meeting agendas and agenda packages, and other administrative duties.

(b) Meetings

The Transportation Disadvantaged Technical Advisory Committee meetings shall be called at the discretion of the Transportation Disadvantaged Technical Advisory Committee Chairperson.

All meetings are opened to the public. Any individuals will be given an opportunity to address the TAC members and request their comments be forwarded to the TDLCB.

(c) Meeting Notices

Planning staff shall give all Transportation Disadvantaged Technical Advisory Committee members and interested parties approximately seven days advance notice and a copy of the agenda for scheduled monthly meetings.

(d) Agenda and Minutes

Planning staff shall prepare the agenda for each TAC meeting. The TDLCB secretary shall maintain an official set of minutes for each Transportation Disadvantaged Technical Advisory Committee meeting. The minutes shall include an attendance roster and reflect official recommendations by the Transportation Disadvantaged Technical Advisory Committee. Copies of all minutes shall be sent to the Transportation Disadvantaged Coordinating Board Chairperson.

Any individual, profit or not-for profit business or governmental unit may initiate a request for consideration of an item to be placed on the agenda. Such request is to be submitted to the Planning Department in written form at least fourteen days prior to the next regularly scheduled Transportation Disadvantaged Technical Advisory Committee meeting.

(8) Duties

The Transportation Disadvantaged Technical Advisory Committee has the following duties:

- (a) Review the Transportation Disadvantaged Service Plan and make recommendations to the Transportation Disadvantaged Local Coordinating Board.
- (b) Review the Memorandum of Agreement and make recommendations to the Transportation Disadvantaged Local Coordinating Board.
- (c) Review and evaluate services provided by the CTC in meeting the approved Service Plan.
- (d) Review the Overall Transportation Disadvantaged Program annually and submit comments to the Transportation Disadvantaged Local Coordinating Board for their consideration.
- (e) In cooperation with the Planning Department staff, review and provide recommendations to the Commission for the Transportation Disadvantaged (CTD) on funding applications affecting the transportation.
- (f) Review coordination strategies with adjacent counties as well as service provision to the transportation disadvantaged in the designated Indian River County service area.

- (g) Evaluate multi-county or regional opportunities for provision of transportation disadvantaged services.
- (h) Review and evaluate inter-county and intra-county agreements to improve coordination amongst transportation disadvantaged providers as a way to reduce costs for service delivery, maintenance, insurance, and/or other identified strategies.
- (i) Review and evaluate involvement of the private and public sector, volunteers, public transit, school districts, elected officials and others in any plan for improved service delivery.
- (j) Review by September 1 each year, an Annual Operation Report (AOR) prepared by the CTC outlining the accomplishments and activities, or other areas of interest to the Commission for the Transportation Disadvantaged (CTD), for the most recent operating year period.
- (k) Periodically review the CTC's vehicle inventory and utilization plan for those vehicles purchased with Transportation Disadvantaged funds.
- (l) Review Monthly Operating report of the Community Transportation Coordinator (CTC).
- (m) Review complaints or recommendations brought forth to the Transportation Disadvantaged Technical Advisory Committee for improvement of services from agencies, users, or potential users of the system in the designated service area.

Originally Adopted On February 21, 1991.

IV. FINANCIAL ELEMENT

Summarized below are expenses and trip rates for the most recent fiscal year (FY 2009/10).

**Table 19
Indian River County Senior Resource Association, Inc.
Cost/Revenue Allocation and Fare Structure Justification**

Calculation of unit cost -

| | Total Expense | Evaluation Period 7/09-6/10 | | | Average Cost/Mile |
|---------------------------------------------|----------------------|------------------------------------|--------------------|----------------------|--------------------------|
| | | Total Trips | Total Miles | Cost per Trip | |
| CTC totals per worksheet 7 and worksheet 8a | \$1,637,594 | 60,800 | 774,284 | \$26.95 | \$2.12 |

**Table 20
Community Coach
Rate Calculations for FY 09/10**

| CTC Rate Justification | Trip Rate | Mileage Rate |
|-------------------------------|------------------|---------------------|
| Ambulatory Trip | \$17.50 | \$1.31 |
| Wheelchair Trip | \$30.01 | \$2.25 |
| Stretcher Trip | \$62.52 | \$4.68 |
| Group Trip – per passenger | \$7.66 | \$0.57 |
| Group Trip – per group | \$47.47 | \$3.55 |

APPENDIX A
PHYSICAL EXAMINATION FOR PUBLIC-SECTOR BUS DRIVER
DOT FORM 775-030-01

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Distribution: 1. Retain Copy in Doctor's File 2. Send Original to Employer | FLORIDA DEPARTMENT OF TRANSPORTATION PUBLIC TRANSIT OFFICE PHYSICAL EXAMINATION FOR PUBLIC-SECTOR BUS DRIVER (To Be Filled in By Examining Physician) | Date of Examination | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Driver's Name: _____ <input type="checkbox"/> Preemployment Examination <input type="checkbox"/> Biennial Examination | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address: _____ City _____ State _____ Zip Code _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Social Security Number: _____ Date of Birth: _____ Age: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 10%;">Health History:</td> <td style="width: 5%;">Yes</td> <td style="width: 5%;">No</td> <td style="width: 15%;"></td> <td style="width: 5%;">Yes</td> <td style="width: 5%;">No</td> <td style="width: 15%;"></td> <td style="width: 5%;">Yes</td> <td style="width: 5%;">No</td> <td style="width: 30%;"></td> </tr> <tr> <td></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Asthma</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Nervous Stomach</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Head or Spinal Injuries</td> </tr> <tr> <td></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Kidney</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Rheumatic Fever</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Seizures, Fits, Confusion, or Fainting</td> </tr> <tr> <td></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Tuberculosis</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Muscular Disease</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Extensive Refinement by Illness or Injury</td> </tr> <tr> <td></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Syphilis</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Psychiatric Disorder</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Any other Nervous Disorder</td> </tr> <tr> <td></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Gonorrhea <input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Cardiovascular Disease <input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Suffering from Any Other Illness</td> </tr> <tr> <td></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Diabetes</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Gastrointestinal Ulcer <input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Permanent Defect from Illness, Disease or Injury</td> </tr> </table> | | | Health History: | Yes | No | | Yes | No | | Yes | No | | | <input type="checkbox"/> | <input type="checkbox"/> | Asthma | <input type="checkbox"/> | <input type="checkbox"/> | Nervous Stomach | <input type="checkbox"/> | <input type="checkbox"/> | Head or Spinal Injuries | | <input type="checkbox"/> | <input type="checkbox"/> | Kidney | <input type="checkbox"/> | <input type="checkbox"/> | Rheumatic Fever | <input type="checkbox"/> | <input type="checkbox"/> | Seizures, Fits, Confusion, or Fainting | | <input type="checkbox"/> | <input type="checkbox"/> | Tuberculosis | <input type="checkbox"/> | <input type="checkbox"/> | Muscular Disease | <input type="checkbox"/> | <input type="checkbox"/> | Extensive Refinement by Illness or Injury | | <input type="checkbox"/> | <input type="checkbox"/> | Syphilis | <input type="checkbox"/> | <input type="checkbox"/> | Psychiatric Disorder | <input type="checkbox"/> | <input type="checkbox"/> | Any other Nervous Disorder | | <input type="checkbox"/> | <input type="checkbox"/> | Gonorrhea <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Cardiovascular Disease <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Suffering from Any Other Illness | | <input type="checkbox"/> | <input type="checkbox"/> | Diabetes | <input type="checkbox"/> | <input type="checkbox"/> | Gastrointestinal Ulcer <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Permanent Defect from Illness, Disease or Injury |
| Health History: | Yes | No | | Yes | No | | Yes | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | Asthma | <input type="checkbox"/> | <input type="checkbox"/> | Nervous Stomach | <input type="checkbox"/> | <input type="checkbox"/> | Head or Spinal Injuries | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | Kidney | <input type="checkbox"/> | <input type="checkbox"/> | Rheumatic Fever | <input type="checkbox"/> | <input type="checkbox"/> | Seizures, Fits, Confusion, or Fainting | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | Tuberculosis | <input type="checkbox"/> | <input type="checkbox"/> | Muscular Disease | <input type="checkbox"/> | <input type="checkbox"/> | Extensive Refinement by Illness or Injury | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | Syphilis | <input type="checkbox"/> | <input type="checkbox"/> | Psychiatric Disorder | <input type="checkbox"/> | <input type="checkbox"/> | Any other Nervous Disorder | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | Gonorrhea <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Cardiovascular Disease <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Suffering from Any Other Illness | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | Diabetes | <input type="checkbox"/> | <input type="checkbox"/> | Gastrointestinal Ulcer <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Permanent Defect from Illness, Disease or Injury | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| General Appearance and Development <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Vision: For Distance: Right 20/____ Left 20/____ Without Corrective Lenses _____ With Corrective Lenses _____ Evidence of Disease or Injury Right _____ Left _____ Color Test: _____ Horizontal Field of Vision: Right _____ Left _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Audiometric Test: Decibel Loss at 500 Hz _____ 1,000 Hz _____ 20,000 Hz _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Throat: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Thorax: Heart _____ If Organic Disease is present, is it fully compensated? _____ Blood Pressure: Systolic _____ Diastolic _____ Pulse: Before Exercise _____ Immediately After Exercise _____ Lungs: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Abdomen: Scars: _____ Abnormal Masses: _____ Tenderness: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gastrointestinal: Ulceration or Other Diseases: <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Genito-Urinary: Scars: _____ Urethral Discharge: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Reflexes: Romberg: _____ Pupillary _____ Light: Right _____ Left _____ Accommodation: Right: _____ Left: _____ Knee Jerks: Right: Normal _____ Increased _____ Absent _____ Left: Normal _____ Increased _____ Absent _____ Remarks: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extremities: Upper: _____ Lower _____ Spine _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Laboratory and Other Special: Urine: Specific Gr. _____ Ab. _____ Sugar _____ Drug Screen _____ Other Laboratory Data (Seriology, etc) _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| Findings: | Radiological Data _____ <input type="checkbox"/> Controlled Substance Test Performed | Electrocardiograph _____ <input type="checkbox"/> Controlled Substance Test NOT Performed |
| General Comments: _____ | | |
| Name of Examining Doctor (Print) _____ | | Signature: _____ |
| Address of Examining Doctor: _____ | | |
| MEDICAL EXAMINER'S CERTIFICATE | | |
| <p>I certify that I have examined _____ (Print Applicant/Driver's Name) in accordance with instructions printed on the reverse side of this form, and (Florida Department of Transportation Rul 14-90.0041, FAC). This examination is valid for twenty-four (24) months from the date performed unless a limited validation period is indicated: _____ months</p> <p>A complete examination for this person is on file in my office at _____ (address)</p> <p>_____</p> <p>(Date of Examination) (Name of Examining Doctor) (Signature of Examining Doctor)</p> <p>_____</p> <p>(Signature of Driver/Applicant) (Address of Driver/Applicant) (Employer of Applicant)</p> <p>The following will be completed only when the visual test is conducted by a licensed ophthalmologist or optometrist)</p> <p>_____</p> <p>(Date of Examination) (Name of ophthalmologist or optometrist)</p> <p>_____</p> <p>(Address of ophthalmologist or optometrist) Signature of ophthalmologist or optometrist)</p> | | |
| Instructions to Physicians are Printed on Reverse Side) | | |

Instructions for Performing and Recording Physical Examinations

The examining physician should review these instructions before performing the physical examination. Answer each question yes or no where appropriate. The examining physician should be aware of the rigorous physical demands and mental and emotional responsibilities placed on the driver of a public-sector bus. In the interest of public safety the examining physician is required to certify that the driver does not have any physical, mental, or organic defect of such a nature as to affect the driver's ability to operate safely a public-sector bus according to the requirements established by the bus transit system.

General Information. The purpose of this history and physical examination is to detect the presence of physical, mental, or organic defects of such a character and extent as to affect the applicant's ability to operate a public-sector bus safely according to the physical requirements established by the bus transit system. The examination should be made carefully and at least as complete as indicated by the attached form. History of certain defects may be cause for rejection or indicate the need for making certain laboratory tests or a further, and more stringent, examination.

Defects may be recorded which do not, because of their character or degree, indicate that physical qualification should be denied. However, these defects should be discussed with the driver/applicant and he should be advised to take the necessary steps to ensure correction, particularly those of which, if neglected, might lead to a condition likely to affect his ability to drive safely.

General Appearance and Development. Note marked overweight. Note any posture defect, perceptible limp, tremor, or other defects that might be caused by alcoholism, thyroid intoxication, or other illnesses.

Head - Eyes. When other than the Snellen chart is used, the results of test must be expressed in values comparable to the standard Snellen test. If the applicant wears corrective lenses, these should be worn while applicant's visual acuity is being tested. In recording distance vision use 20 feet as normal. Report all vision as a fraction with 20 as numerator and the smallest type read at 20 feet as denominator. Note ptosis, discharge, visual fields, ocular muscle imbalance, color blindness, corneal scar, exophthalmos, or strabismus, uncorrected by corrective lenses. If the driver habitually wears contact lenses, or intends to do so while driving, there should be sufficient evidence to indicate that he has good tolerance and is well adapted to their use. The use of contact lenses should be noted on the record.

Ears. Note evidence of mastoid or middle ear disease, discharge, symptoms of aural vertigo, or Meniere's Syndrome. When recording hearing, record distance from patient from which a forced whispered voice can first be heard. If audiometer is used to test hearing, record decibel loss at 500 Hz, 1,000 Hz, and 2,000 Hz.

Throat. Note evidence of disease, irremediable deformities of the throat likely to interfere with eating or breathing, or any laryngeal condition which could interfere with the safe operation of a public-sector bus.

Thorax - Heart. Stethoscopic examination is required. Note murmurs and arrhythmias, and any past or present history of cardiovascular disease, of a variety known to be accompanied by syncope, dyspnea, collapse, enlarged heart or congestive heart failures. Electrocardiogram is required when findings so indicate.

Blood Pressure. Record with either spring or mercury column type sphygmomanometer.

Lungs. If any lung disease is detected, state whether active or arrested; if arrested, your opinion as to how long it has been quiescent.

Gastrointestinal System. Note any diseases of the gastrointestinal system.

Abdomen. Note wounds, injuries, scars, or weakness of muscles of abdominal walls sufficient to interfere with normal function. Any hernia should be noted if present. State how long and if adequately contained by truss.

Abnormal Masses. If present, note location, if tender, and whether or not applicant knows how long they have been present. If the diagnosis suggests that the condition might interfere with the control and safe operation of a public-sector bus more stringent tests are recommended.

Tenderness. When noted, state where most pronounced, and suspected cause. If the diagnosis suggests that the condition might interfere with the control and safe operation of a public-sector bus, more stringent tests are recommended.

Genito-Urinary. Urinalysis is required. Acute infections of the genito-urinary tract, as defined by local and state public health laws, indications from urinalysis of uncontrolled diabetes, symptomatic albumin-urea in the urine, or other findings that may indicate health conditions likely to interfere with the control and safe operation of a public-sector bus.

Neurological. If positive Romberg is reported, indicate degrees of impairment. Pupillary reflexes should be reported for both light and accommodation. Knee jerks are to be reported absent only when not obtainable upon reinforcement and as increased when the foot is actually lifted from the floor following a light blow on the patella, sensory vibratory and positional abnormalities should be noted.

Extremities. Carefully examine upper and lower extremities. Record the loss of impairment of a leg, foot, toe, arm, hand or fingers. Note any and all deformities, the presence of atrophy, semiparalysis or paralysis, or varicose veins. If a hand or finger deformity exists, determine whether sufficient mobility and strength exist to enable the driver to operate pedals properly. Particular attention should be given to and a record should be made of, any impairment or structural defect which may interfere with the driver's ability to operate a public-sector bus safely.

Spine. Note deformities, limitation of motion, or any history of pain, injuries or disease, past or presently experienced in the cervical or lumbar spine region. If findings so dictate, radiologic and other examinations should be used to diagnose congenital or acquired defects; or spondylolisthesis and scoliosis.

Recto-Genital Studies. Disease or conditions causing discomfort should be evaluated carefully to determine the extent to which the condition might be handicapping while lifting, pulling, or during periods or prolonged driving that might be necessary as part of the driver's duties.

Laboratory and Other Special Findings. Urinalysis is required, as well as such other tests as the medical history or findings upon physical examination may dictate are necessary. A serological test is required if the applicant has a history of luetic infection or present physical findings indicate the possibility of latent syphilis. Other studies deemed advisable may be ordered by the examining physician.

Controlled Substances Testing. If a test for controlled substances is performed as part of the medical examination, the medical examiner is to check the box next to the statement, "Controlled substances test performed" on the medical examination form. If a test for controlled substances is not performed, the medical examiner is to check the box net to the statement, "Controlled substances test not performed".

The physician must date and sign his findings upon completion of the examination.

APPENDIX B DRIVER'S DAILY INSPECTION FORM

Name: _____ Date: _____ Vehicle No. _____

Inspections are to be made daily, prior to placing the vehicle in service. Inspection forms are to be turned into the Transportation Coordinator at the end of the day with the daily driver manifest.

| Mark in the left hand column an "N" if attention is required or "OK" if the conditions are safe | Note conditions requiring supervisor attention below: | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|--------------------------|--------------------------|------------------------------------|--------------------------|--------------------------|--------------------------------------|--------------------------|--------------------------|-----------------------------------------|--------------------------|--------------------------|-------------------------|--------------------------|--------------------------|---------------------------------------|--------------------------|--------------------------|-------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------------------|--------------------------|------------------|-------------------------------------------------|
| 1. LOOK OUTSIDE THE VEHICLE | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%; text-align: left;">OK</th> <th style="width: 10%; text-align: left;">Not OK</th> <th></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Windshield, mirrors, front windows</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Headlights - wipe clean</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Exhaust - tailpipe clear</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Bump tires</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Under the vehicle oil leak/water leak</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Vehicle clean</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Check fluid level (oil/water/brake)</td> </tr> </tbody> </table> | OK | Not OK | | <input type="checkbox"/> | <input type="checkbox"/> | Windshield, mirrors, front windows | <input type="checkbox"/> | <input type="checkbox"/> | Headlights - wipe clean | <input type="checkbox"/> | <input type="checkbox"/> | Exhaust - tailpipe clear | <input type="checkbox"/> | <input type="checkbox"/> | Bump tires | <input type="checkbox"/> | <input type="checkbox"/> | Under the vehicle oil leak/water leak | <input type="checkbox"/> | <input type="checkbox"/> | Vehicle clean | <input type="checkbox"/> | <input type="checkbox"/> | Check fluid level (oil/water/brake) | <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> | | | |
| OK | Not OK | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Windshield, mirrors, front windows | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Headlights - wipe clean | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Exhaust - tailpipe clear | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Bump tires | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Under the vehicle oil leak/water leak | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Vehicle clean | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Check fluid level (oil/water/brake) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. LOOK INSIDE THE BUS | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Seats, floor clean</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Door clear</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Fire Extinguisher/first aid kit</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Litter, rubber gloves</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Mouth to mouth breather</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Insurance card/registration</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Handicapped registration/card</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Driver area clear</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Windshield clear</td></tr> </tbody> </table> | <input type="checkbox"/> | <input type="checkbox"/> | Seats, floor clean | <input type="checkbox"/> | <input type="checkbox"/> | Door clear | <input type="checkbox"/> | <input type="checkbox"/> | Fire Extinguisher/first aid kit | <input type="checkbox"/> | <input type="checkbox"/> | Litter, rubber gloves | <input type="checkbox"/> | <input type="checkbox"/> | Mouth to mouth breather | <input type="checkbox"/> | <input type="checkbox"/> | Insurance card/registration | <input type="checkbox"/> | <input type="checkbox"/> | Handicapped registration/card | <input type="checkbox"/> | <input type="checkbox"/> | Driver area clear | <input type="checkbox"/> | <input type="checkbox"/> | Windshield clear | <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> |
| <input type="checkbox"/> | <input type="checkbox"/> | Seats, floor clean | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Door clear | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Fire Extinguisher/first aid kit | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Litter, rubber gloves | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mouth to mouth breather | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Insurance card/registration | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Handicapped registration/card | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Driver area clear | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Windshield clear | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. STARTING THE ENGINE | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> <td>Check gauges (oil pressure/water temp/battery charge)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Radio check</td> </tr> </tbody> </table> | <input type="checkbox"/> | <input type="checkbox"/> | Check gauges (oil pressure/water temp/battery charge) | <input type="checkbox"/> | <input type="checkbox"/> | Radio check | <hr/> <hr/> | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Check gauges (oil pressure/water temp/battery charge) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Radio check | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. WITH THE ENGINE RUNNING, CHECK FROM THE DRIVERS SEAT: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Mirror, inside lights</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Steering movement</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Horn, Defroster, Fan, Heater, Blower</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Windshield Wipers</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Hazard warning lights</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Parking brake release and reset</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Brake pedal height and feel</td></tr> </tbody> </table> | <input type="checkbox"/> | <input type="checkbox"/> | Mirror, inside lights | <input type="checkbox"/> | <input type="checkbox"/> | Steering movement | <input type="checkbox"/> | <input type="checkbox"/> | Horn, Defroster, Fan, Heater, Blower | <input type="checkbox"/> | <input type="checkbox"/> | Windshield Wipers | <input type="checkbox"/> | <input type="checkbox"/> | Hazard warning lights | <input type="checkbox"/> | <input type="checkbox"/> | Parking brake release and reset | <input type="checkbox"/> | <input type="checkbox"/> | Brake pedal height and feel | <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mirror, inside lights | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Steering movement | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Horn, Defroster, Fan, Heater, Blower | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Windshield Wipers | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Hazard warning lights | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Parking brake release and reset | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Brake pedal height and feel | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. OUTSIDE CHECKS REQUIRED BEFORE YOU DRIVE AWAY: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> <td>Turn signals - right/left-front/rear</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Hazard warning lights</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Headlights - high beam/low beam</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Brake lights/tail lights warning lights</td> </tr> </tbody> </table> | <input type="checkbox"/> | <input type="checkbox"/> | Turn signals - right/left-front/rear | <input type="checkbox"/> | <input type="checkbox"/> | Hazard warning lights | <input type="checkbox"/> | <input type="checkbox"/> | Headlights - high beam/low beam | <input type="checkbox"/> | <input type="checkbox"/> | Brake lights/tail lights warning lights | <hr/> <hr/> <hr/> | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Turn signals - right/left-front/rear | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Hazard warning lights | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Headlights - high beam/low beam | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Brake lights/tail lights warning lights | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. FINAL CHECKS AS YOU MOVE THE VEHICLE | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | |
|--------------------------|--------------------------|------------------------------|-------|
| <input type="checkbox"/> | <input type="checkbox"/> | Seat belt fastened | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Brakes, stop and hold | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Steering movement tight | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Transmission shifts smoothly | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | Vehicle tracking straight | _____ |

7. **ADDITIONAL CONDITIONS NOTED THAT REQUIRE SUPERVISORY ATTENTION:** _____
 I certify that these conditions were checked by me this day and that all conditions noted and unsafe conditions reported to the Transportation Coordinator.

SIGNATURE OF DRIVER: _____

APPENDIX C
NEW HIRE AND ANNUAL DRIVER RECORD CHECK

New Hire drivers –

New hire license checks are submitted and evaluated upon return before employment hire date.

Employed Drivers –

License checks are submitted annually to the State of Florida evaluated upon return and put into the driver's personal file.

APPENDIX E
FLORIDA ADMINISTRATIVE CODE: CHAPTER 14-90 (11/92): Equipment and
Operational Safety Standards Governing Public-Sector Bus Transit Systems.

Minimum Guidelines For Recipient Grievance Procedures

APPLICABLE TO ALL ACTIONS DEEMED TERMINATIONS, SUSPENSIONS, OR REDUCTIONS IN SERVICE; TRANSFERS OR DISCHARGES; AND ADVERSE DETERMINATIONS RELATING TO SCREENING OR ANNUAL REVIEW.

NOTICE OF DECISION OF ACTION TO BE TAKEN AND EXPLANATION OF THE GRIEVANCE PROCEDURE FOR REVIEWING THAT DECISION

- Notice of decision and explanation of the grievance procedure must be mailed no less than 30 calendar* days prior to the date action will be taken. (Prior notice is not applicable where the health or safety of the individual is endangered if action is not taken immediately; however, notice must be made as soon thereafter as practicable)

- The Notice must contain:
 - A statement of what action is intended to be taken;
 - The reasons for the intended action;
 - The specific law, rule, regulation, or change of law that requires the action;
 - An explanation of:
 - The individual's right to a grievance review if requested in writing and delivered within 14 calendar* days of the Notice postmark (assistance in writing, submitting and delivering the request must be offered and available to the individual),
 - The individual's right, after a grievance review, for further appeal,
 - The right to seek redress through the courts if applicable;
 - An explanation of the circumstances under which current benefits, if any, are continued if a grievance review is requested, and until a final decision is made to discontinue services; and
 - A statement that the individual may represent herself or use legal counsel, a relative, a friend, or other qualified representative in the requested review proceedings.

- All records of the above activities must be preserved and remain confidential.

GRIEVANCE REVIEW PROCEDURE UPON TIMELY RECEIPT OF A WRITTEN REQUEST FOR REVIEW

- Within 7 calendar* days of the receipt of a request for review, the provider must acknowledge receipt of the request by a written statement delivered to the requester. This statement must also provide notice of:
 - The time and place scheduled for the review;

The designation of one or more impartial reviewers who have not been involved in the decision at issue;
The opportunity to examine, at a reasonable time before the review, the individual's own case record, and to a copy of such case record at no cost to the individual;
The opportunity to informally present argument, evidence, or witnesses without undue interference at a reasonable time before or during the review;
A contact person for any accommodations required under the Americans with Disabilities Act;
Assistance, if needed, in order to attend the review; and
The stopping of the intended action until all appeals are exhausted.

- All grievance reviews must be conducted at a reasonable time, date and place by one or more impartial reviewers who have not been directly involved in the initial determination of the action in question.
- The reviewer(s) must provide written notification to the requester within 7 calendar* days after the grievance review of:
 - The decision, stating the reasons therefore in detail;
 - The effect the decision has on current benefits, if favorable, or the circumstances regarding continuation of current benefits until all appeals are exhausted;
 - The individual's right to appeal an adverse decision to the Area Agency on Aging by written request within 7 calendar* days;
 - The availability of assistance in writing, submitting and delivering the appeal to the appropriate agency;
 - The opportunity to be represented by herself or by legal counsel, a relative, a friend or other qualified representative.

PROCEDURE FOR APPEALS OF A GRIEVANCE REVIEW DECISION UPON TIMELY RECEIPT OF A WRITTEN APPEAL TO THE AREA AGENCY ON AGING

- Within 7 calendar* days of the receipt of a notice of appeal of a grievance review decision, the AAA must acknowledge receipt of the notice of appeal by a written statement delivered to the appellant. This statement must also provide notice of:
 - The time and place scheduled for the appeal;
 - The designation of one or more impartial AAA officials who have not been involved in the decision at issue;
 - The opportunity to examine at a reasonable time before the appeal the individual's own case record to date, and to a copy of such case record at no cost to the individual;
 - The opportunity to informally present argument, evidence, or witnesses without undue interference during the appeal;
 - Assistance, if needed, in order to attend the appeal; and
 - The stopping of the intended action until all appeals are exhausted.

- All appeals of grievance reviews must be conducted at a reasonable time, date and place by one or more impartial AAA officials who have not been directly involved in the initial determination of the action in question.
- The designated AAA official(s) must provide written notification to the requester within 7 calendar* days after considering the grievance review appeal of:
 - The decision, stating the reasons therefore in detail;
 - The effect the decision has on current benefits, if favorable, or the circumstances regarding continuation of current benefits until all appeals are exhausted;
 - The individual's right to appeal, if applicable. Except for Medicaid Waiver actions, the written notification must also provide notice of the individual's right to appeal an adverse decision to the Agency on Health Care Administration (AHCA) for a fair hearing procedure (Medicaid Waiver actions only); and
 - The availability of assistance in requesting a fair hearing, including a notice regarding accommodations as required by the ADA.
- All records of the above activities must be preserved and remain confidential.

*In computing any period of time prescribed or allowed by these guidelines, the last day of the period so computed shall be included unless it is a Saturday, Sunday, or legal holiday, in which event the period shall run until the end of the next day which is neither a Saturday, Sunday, or legal holiday.

Note: ALSO SEE 42 C.F.R. 431.200-246 AND AHCA RULES 59G-1.010(85), (98) AND (99), F.A.C., "FAIR HEARINGS," "GRIEVANCE," AND "GRIEVANCE PROCEDURE"

APPENDIX F
PREVENTATIVE MAINTENANCE INSPECTIONS REQUIREMENTS
ANNUAL SAFETY INSPECTION FORM

Vehicle:

Inspection Date:

Individual Performing Inspection:

Item: Discrepancy(ies)

- A. ___ Horn
- B. ___ Windshield wipers
- C. ___ Mirrors
- D. ___ Wiring and Battery(ies)
- E. ___ Service and Parking Brakes
- F. ___ Warning Devices
- G. ___ Directional Signals
- H. ___ Hazard Warning Signals
- I. ___ Lighting systems &
Signal Devices
- J. ___ Handrails and Stanchions
- K. ___ Standee Line and Warning
- L. ___ Doors and Interlock Devices
- M. ___ Step wells and Flooring
- N. ___ Emergency Exits
- O. ___ Tires and Wheels
- P. ___ Suspension System
- Q. ___ Steering System
- R. ___ Exhaust System
- S. ___ Seat Belts
- T. ___ Safety Equipment
- U. ___ Equip for Transporting
Wheelchairs

Remarks: To include any damage or malfunction of system components and recommendations for necessary repairs.

Signature of Inspector: