Acknowledgments

SACOG would like to thank the following for their assistance and input into the Coordinated Plan:

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Executive Summary

The Sacramento Area Council of Governments recognizes an increasing need to plan for and address the mobility needs of the growing regional population. Transportation is key to residents remaining active, accessing medical care, shopping and services, employment, recreational, volunteer and learning opportunities, and avoiding social isolation. A broad range of transportation services is currently offered in the region. While there is currently a range of transportation services available to people with lower incomes, seniors and persons with disabilities in the Region, gaps in service remain due to geography, limitations in fixed-route and demand-responsive services, program/funding constraints, eligibility limitations, knowledge and training. According to Department of Finance projections, the number of people age 65 or older in the Sacramento Region will increase by approximately 294,000, or 34 percent, between 2010 and 2040. In particular, there is a growing population of the frail elderly who experience mobility difficulties but are not considered to be ADA-eligible, who do not consider themselves disabled, and who are often aging in place in rural and suburban areas, making obtaining the transportation services they need more difficult.

The Sacramento Region is facing significant growth in its population, including the populations of seniors, growth in the working-age population, and growth in the working-age population with severe disabilities. This growth is taking place in both more urbanized Sacramento County, and the less urbanized portions of the Region where transportation alternatives are limited. This poses not only a challenge for those who are not able to drive, especially those who have few family or income resources to afford alternatives, but also for all communities who will be called upon to provide expanded transportation services to meet residents’ needs.

The SACOG Public Transit and Human Services Transportation Coordinated Plan is intended to show how human service agencies can work together with transportation providers to address the transportation needs of people with disabilities, seniors, and people with limited incomes. The SACOG Coordinated Plan is meant to broaden the dialogue and support further collaboration between public transportation providers, human service agencies, and others to link people with the transportation services that they need. The description of transportation services and the connections and relationships represented in this report are drawn from discussions with transportation and human services staff, stakeholder input, and outreach meetings.

A Coordinated Plan is required under the Fixing America’s Surface Transportation Act (FAST Act) of December 2015. As suggested by the Federal Transit Administration (FTA) the plan offers an overview of what transit services are available, where there are gaps in those services, and includes potential solutions to close those service gaps. With the Updated SACOG Coordinated Plan in place, federal funds specifically directed toward services to lower income persons, seniors and people with disabilities will remain available to the SACOG Region’s transit operators. The types of services provided with these funds must be included in the SACOG Coordinated Plan. The FAST Act requires the prioritization of projects and strategies be included in the Coordinated Plan for awardees to receive Section 5310 funds.
CHAPTER 1: COORDINATED PLAN AND METHODOLOGY

State and Federal Requirements for Coordination

The California State Transportation Development Act (TDA) is administered by the California Department of Transportation (Caltrans) within the State of California State Transportation Agency (CalSTA), and provides two major sources for the funding of public transportation in California through regional planning and programming agencies such as the Sacramento Area Council of Governments (SACOG). The TDA funds a wide variety of transportation programs, including planning and program activities, pedestrian and bicycle facilities, community transit/special needs transport services, public transportation, and bus and rail projects. The TDA requires that transit operators coordinate their services, so that transit services are not duplicative and use the limited funds available in the most efficient way possible.

Federal transit law (Fixing America’s Surface Transportation [FAST] Act) requires that projects selected for funding under the Enhanced Mobility for Individuals and Individuals with Disabilities (Section 5310) Program be "included in a locally developed, coordinated public transit-human services transportation plan," and that the plan be "developed and approved through a process that included participation by seniors, individuals with disabilities, representatives of public, private, and nonprofit transportation and human services providers and other members of the public" utilizing transportation services. These coordinated plans identify the transportation needs of individuals with disabilities, older adults, and people with low incomes, provide strategies for meeting these needs, and prioritize transportation services for funding and implementation. The SACOG Public Transit and Human Services Transportation Coordinated Plan, hereby known as the Coordinated Plan, is a direct result of the 2004 Executive Order: Human Service Transportation Coordination (Executive Order 13330, Federal Register, Vol. 69, No. 38, Thursday, February 26, 2004) furthered by federal and state directives and the Executive Order calls for human service agencies within the Department of Health and Human Services and providers of transportation funded through the Federal Transit Administration to:

- Promote interagency cooperation and minimize duplication and overlap of services;
- Determine the most appropriate, cost-effective transportation services within existing resources; and
- Improve the availability of transportation services to the people who need them.

For a description of potential funding sources, refer to the funding resources section of the appendices.

Plan Objectives and Development

The SACOG Coordinated Plan follows the July 11, 2013, and June 6, 2014, Federal Register and FTA Circular C 9070.1G guidance regarding the FTA proposed elements of a coordinated plan:

- An assessment of available services that identifies current providers (public, private, and nonprofit);
• An assessment of transportation needs for individuals with disabilities, older adults, and
people with low incomes. This assessment may be based on the experiences and perceptions
of the planning partners or on more sophisticated data collection efforts, and gaps in service;
• Strategies and/or activities to address the identified gaps and achieve efficiencies in service
delivery; and
• Relative priorities for implementation based on resources, time, and feasibility for
implementing specific strategies/activities identified.

The SACOG Coordinated Plan reviews public and private transportation providers and the human
service agencies, both public and not-for-profit, that utilize the transportation services. The Plan
also analyzes community/volunteer based transportation providers and the services they provide.

The SACOG Coordinated Plan mainly affects the distribution of FTA Section 5310 funding.
Agencies and organizations can do a variety of things with Section 5310 funds. Section 5310
projects should assist seniors and individuals with disabilities with transportation. The Section 5310
Program gives capital, operating and mobility management grants to non-profit agencies and public
transport providers of transportation services to seniors and persons with disabilities. The projects can
be public transportation services that go beyond those required by the ADA, projects that increase
access to and use of fixed route public transport by individuals with disabilities (decreasing use of
ADA complementary services), and public transportation alternatives that assist seniors and people
with disabilities.

**Relationship of this Plan to Regional Planning**

The SACOG Coordinated Plan is anchored to the following regional planning documents:

(see following page)
<table>
<thead>
<tr>
<th>Document</th>
<th>Reference</th>
<th>Notes</th>
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<tbody>
<tr>
<td>SACOG Public Transit and Human Services Transportation Coordinated Plan (June 2007) Amended 3-9-09, 1-5-12, 10-16-14, and February 2017</td>
<td>As part of FAST Act, SACOG must develop a Coordinated Plan to serve the Enhanced Mobility of Seniors and Individuals with Disabilities Program (Section 5310)</td>
<td>The SACOG Metropolitan Transportation Plan/Sustainable Communities Strategy (MTP/SCS our RTP) was adopted on February 18, 2016. The MTP/SCS includes an analysis of public and special needs transit services.</td>
</tr>
<tr>
<td>SACOG – Filling the Gap – A Guide to Volunteer Transportation Programs (June 2019)</td>
<td>This Guide assessed opportunities for alternatives and improvements to existing public transportation services for seniors, persons with disabilities, and low-income residents in more rural communities in El Dorado, Sutter, and Yuba Counties. It explored the use of volunteers to expand community transportation options.</td>
<td>The goal of the Guide is to help and encourage more communities to consider developing volunteer transportation programs to fill the gaps in the existing transportation systems and provide a range of information on volunteer transportation programs.</td>
</tr>
<tr>
<td>SACOG Regional Transportation Study (Household Travel Survey) (November 2018)</td>
<td>The Sacramento Regional Transportation Study collected a rich set of demographic and travel behavior data from a representative set of 4,010 households in the six-county SACOG planning area.</td>
<td>The study collected data from 8,321 persons, representing 146,000 (linked) trips across 34,000 complete person-days during all days from April 10 to May 21, 2018. Future work at SACOG will focus on incorporating this dataset into regional modeling, analysis, and planning.</td>
</tr>
<tr>
<td>Older Adult Transportation and Age-Friendly Communities Study (August 2017)</td>
<td>Review of region’s demographics, current transportation services, what different areas across the country are doing to meet older adult needs and preferences, and identified potential strategies for future research, pilot programs and action/implementation.</td>
<td>The Older Adult Transportation and Age-Friendly Communities Study was funded by a Caltrans Planning Grant and informed by the SACOG Blueprint and MTP/SCS.</td>
</tr>
<tr>
<td>SACOG Public Participation Plan (August 2013)</td>
<td>Federal transportation regulations require metropolitan planning organizations such as SACOG to adopt a plan to provide the public with opportunities to be involved in the transportation planning process.</td>
<td>The SACOG Coordinated Plan uses the Public Participation Plan methodology.</td>
</tr>
<tr>
<td>Study Name</td>
<td>Description</td>
<td>Goals</td>
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<td>2011 SACOG Lifeline Transit Study</td>
<td>Built upon the Coordinated Plan to examine more specifically the public transportation needs of low-income and other transit-dependent residents of the SACOG region.</td>
<td>Focused on low-income and transit dependent population needs, including those of low-income transit- dependent seniors and people with disabilities.</td>
</tr>
<tr>
<td>2007 Senior and Disabled Mobility Study</td>
<td>SACOG identified the need to address more intensely the mobility needs of the rapidly growing population of seniors and persons with disabilities in the Sacramento Region.</td>
<td>The work done and information gathered for the Senior and Disabled Study is used in SACOG’s Public Transit and Human Services Transportation Coordinated Plan.</td>
</tr>
</tbody>
</table>
Methodology and Public Involvement

Much of the information presented in the SACOG Public Transit and Human Services Transportation Coordinated Plan (Coordinated Plan) comes from the SACOG Guide to Volunteer Transportation Programs (2019), SACOG Regional Transportation Study (2018), Older Adult & Age Friendly Communities Study (2017), Metropolitan Transportation Plan/Sustainable Communities Strategy (MTP/SCS, 2016), Lifeline Transit Study (2011), and the SACOG Senior and Disabled Mobility Study (2007).

The SACOG Guide to Volunteer Transportation Programs assessed opportunities for alternatives and improvements to existing public transportation services for seniors, persons with disabilities, and low-income residents in more rural communities in El Dorado, Sutter, and Yuba Counties, and explored the use of volunteers to expand community transportation options. The SACOG Regional Transportation Study gathered travel information from just over four-thousand households across the SACOG six-county region. The Older Adult & Age Friendly Communities Study explored the current and projected changes in the age spectrum of the SACOG region’s population, and the implications for transportation, housing and community supports that can contribute to the health and quality of life of the region’s residents across the age spectrum. The MTP/SCS reached out through a series of public workshops and opinion polls that considered transportation and land use choices and how the decisions made will shape the SACOG region’s future. The Senior and Disabled Mobility Study and Lifeline Transit Study received input from a technical advisory committee made up of public transit, specialized/paratransit transit service providers, human service providers, and representatives of advocate organizations for seniors, persons with disabilities, and those with lower incomes.

SACOG’s Public Transit and Human Service Transportation Coordinated Plan for the six-county region, includes the urbanized areas of El Dorado, Placer, Sacramento, Yolo, Yuba, and Sutter counties as well as the small urban/rural areas. The Federal Register recommendations from the FTA on the coordinated plan state that regional planning agencies should focus on obtaining input on human services/special needs transportation services.

Unmet Transit Needs Process

The California Transportation Development Act (TDA) requires that the Regional Transportation Planning Agency (RTPA) hold Unmet Transit Needs hearings to obtain transit needs requests from transit users/stakeholders in the RTPA area. SACOG is the RTPA for four counties Sacramento, Sutter, Yolo and Yuba counties. SACOG holds six Unmet Transit Needs hearings each year in the jurisdictions in the four RTPA counties. Human services transportation is defined as dial-a-ride/paratransit, non-emergency medical transportation, community/volunteer transportation etc. Coordinated Plan input, as well as input received from previous Unmet Transit Needs hearings, has been used to identify gaps in human services/special needs transportation services.

Coordinated Plan Meetings and Other Outreach

In Placer and El Dorado counties, two separate RTPAs, the Placer County Transportation Planning Agency (PCTPA) and the El Dorado County Transportation Commission (EDCTC) respectively,
conduct the Unmet Transit Needs hearing process in those counties. SACOG collected input on the Coordinated Plan through outreach meetings in the six counties. PCTPA and EDCTC also provided previous Unmet Transit Needs comments.

SACOG has also shared the Coordinated Plan information with various community groups.

**Stakeholder Meetings and Input**

In addition to the unmet transit needs process and other outreach, this Coordinated Plan uses input received as part of the Coordinated Plan Outreach. In June 2019, SACOG conducted outreach sessions in the six-county region. The purpose of the outreach sessions were to hear directly from people in each of the six counties in the region, including service providers, older community residents, those with disabilities, and persons with lower incomes, about the barriers to mobility that those groups face, key locations people want or need to reach, and local preferences for transportation-related improvements that would help people travel more easily to their destinations. Also, SACOG accepted comment via phone, regular mail, and email.

**Plan Availability – Use and Ongoing Refinement**

The SACOG Coordinated Plan was first put out for public review in June 2007 after receiving input from the Board of Directors.

SACOG made one minor amendment to the SACOG Coordinated Plan in January 2012 prior to the adoption of the SACOG Metropolitan Transportation Plan/Sustainable Communities Strategy that was adopted in fiscal year 2012-2013. SACOG made a second amendment in October 2014 prior to the FTA 5310 funding round. SACOG made a third update in February 2017 prior to most recent FTA 5310 funding round. This most current update, August 2019, is being completed to update gaps and solutions based on recent input, to include more recent demographic information where available, and additional information on potential transportation mobility options for the target populations from recent SACOG studies and outreach efforts. SACOG will continue to make amendments to the Coordinated Plan as needed to keep the information presented as up-to-date as possible.

This document fulfills all of the FTA requirements for a Coordinated Plan. The SACOG Coordinated Plan will be used to evaluate applications for FTA Section 5310 funds from the region’s transportation operators. The information from the Plan will also be used for on-going service planning related to human services/special needs transportation services in the SACOG region, and as a reference for other regional transportation planning efforts.
All urbanized areas of the six-county SACOG region are served by “fixed-route” transit services, i.e., those that run on regular routes and fixed schedules.

The ADA also made it mandatory for providers of fixed-route transit services to offer comparable demand-responsive services to those who could not use fixed-route services. Demand-responsive services, or transportation services for which the passenger calls in advance for a pick-up, have been provided for many years in the Sacramento region, some exclusively to those with disabilities and others providing service to seniors and/or the general public. The demand-responsive transportation services operated by public transit operators are used by significant numbers of seniors and persons with disabilities. For example, in FY 2016-17, Paratransit Inc. reported that it served 432,000 unlinked passenger trips.¹

Jurisdictions and public transit operators are also piloting general public on-demand transit or microtransit services that operate similarly to transportation network companies (TNCs). Users of these on-demand services can schedule same day or future rides within the on-demand service area via a smartphone app or phone call, which arrive within a set time period with fares similar to the standard cost of fixed-route transit.

Public transportation services are supplemented in many parts of the SACOG region with transportation services provided by local agencies, community-based, and non-profit organizations.

The following sections summarize current transportation services available in each county in the region.

**El Dorado County**
El Dorado County is one of the fastest growing counties in the region. It includes the historic city of Placerville, the county seat, communities such as Cameron Park and El Dorado Hills with their expanding residential developments, and older more rural communities such as Camino – home to Apple Hill – and Pollock Pines. The Coordinated Plan does not examine South Lake Tahoe as it is not part of the SACOG Region.

**Fixed-Route Service**
El Dorado Transit provides all public transit services in the western slope of the county, including:

- Six fixed routes serving Placerville (east/west), Pollock Pines (east/west), Cameron Park and Diamond Springs. The Saturday Express serves Placerville and Pollock Pines, and Diamond Springs.
- 11 morning commuter buses to downtown Sacramento and 11 return buses, plus two reverse commuter routes from downtown Sacramento to Placerville in the morning and two from Placerville to Sacramento in the afternoon.

¹ National Transit Databased – Transit Agency Profile of Paratransit, Inc. FY 2016-17
The 50 Express runs from Placerville the Iron Point Light Rail Station, Folsom Lake College and Kaiser clinic in Folsom.

**Demand-Responsive Service**
El Dorado Transit also provides:
- Dial-A-Ride services primarily for seniors and persons with disabilities.
- ADA Complementary Paratransit service.
- Daily service to the Placerville and El Dorado Hills Senior Centers.
- Weekday shuttle services for clients of Mother Lode Rehabilitation Enterprises, Inc. (M.O.R.E.) who are diagnosed with a developmental disability.
- SAC-MED, shared-ride transportation on Tuesdays and Thursdays. The service takes senior, disabled and general public passengers with a reservation from five pick-up points in El Dorado County to non-emergency medical appointments in Folsom, Sacramento and Roseville.

**Supplemental/Human Services Transportation**
El Dorado County offers a Senior Shuttle, which provides transportation with an advance reservation to seniors 60+ for weekly grocery shopping trips, and monthly outings to a senior nutrition site for lunch. The service is not wheelchair accessible.

**Placer County**

Another fast growing county in the region, Placer County includes the city of Auburn, the county seat; Roseville, considered a regional retail and job center, and its neighbor, Rocklin; the city of Lincoln, home along with Roseville to a large Sun City senior community; and other smaller communities such as Granite Bay, Loomis, Colfax, Foresthill and other more rural areas. The Coordinated Plan does not include communities in the Lake Tahoe area since they are not part of the SACOG region.

**Fixed-Route Service**

- The City of Roseville offers 11 fixed routes in Roseville, along with 10 morning commuter buses to downtown Sacramento, ten evening returns, with four morning and evening reverse commute runs to Roseville from downtown Sacramento, and three evening reverse commute runs from Roseville to downtown Sacramento.
- The City of Auburn operates two deviated fixed routes in Auburn on weekdays, and one on Saturdays.
- The City of Lincoln with the assistance of Placer County Transit operates one local fixed route, and one school tripper within the city on weekdays.
- Placer County Transit offers five intercity fixed routes, making connections between Auburn, Sacramento Light Rail, Lincoln, Rocklin, Newcastle, Penryn, Loomis, Sierra College, Colfax, Alta, and Roseville. Placer County Transit also operates the Placer County Express commuter bus service with four runs into downtown Sacramento in the morning and four returning to Placer County in the evening during the week.
**Demand-Responsive Service**

Roseville Transit offers ADA Paratransit service, an origin-to-destination transit service, plus dial-a-ride service that provides curb-to-curb service and includes same-day and general public service subject to availability. Both services operate with an advance reservation, within Roseville city limits, seven days a week.

The City of Lincoln with the assistance of Placer County Transit offers Dial-a-Ride service to seniors, persons with disabilities and the general public. It serves passengers anywhere within City limits plus the Thunder Valley Casino twice daily on request.

Placer County Transit offers Dial-a-Ride services for Granite Bay, Loomis, Rocklin, and along Highway 49.

The Placer County Transportation Planning Agency (PCTPA) has designated the Western Placer Consolidated Transportation Service Agency (WPCTSA) as the Consolidated Transportation Service Agency serving western Placer County. The WPCTSA is a joint powers agency with the power to provide and coordinate social service transportation for the western portion of Placer County, including services for the elderly and individuals with disabilities. WPCTSA services went into effect in January 2009.

WPCTSA in partnership with the City of Roseville provide free Mobility Training to help seniors or people with special needs learn how to safely and independently use the bus throughout the south Placer area on Roseville Transit, Placer County Transit, and Auburn Transit. Mobility Training sessions are available for individuals and groups.

WPCTSA programs are intended to provide transportation services for Placer County residents who are not able to use conventional public transit services operating within western Placer County. Each program responds to a unique transportation need not otherwise currently met or met well within a prescribed service area. WPCTSA currently collaborates with Seniors First, Inc., a local non-profit organization, to fund various programs.

**WPCTSA Transportation Services**

The WPCTSA designated the City of Roseville as the lead agency to establish and operate the regional Transit Ambassador Program. The program educates new passengers in becoming familiar with western Placer County transit services and provides assistance to passengers at transit transfer points.

The WPCTSA currently collaborates with Seniors First, Inc., a local non-profit organization, to provide two additional programs:

1. **Health Express Non-Emergency Medical Transportation**
   WPCTSA and Seniors First provide a non-emergency medical transportation service called Health Express. Placer County residents who are seniors or have disabilities can use this
advanced-registration shared-ride basis service to reach medical appointments in Placer and Sacramento Counties.

2. **My Rides Program**
   WPCTSA and Seniors First also operate the My Rides program which connects Placer residents who are seniors, have disabilities, or have children under the age of five with volunteers who can provide transportation to non-emergency medical appointments and essential needs destinations. The program is available across Placer County but is dependent on volunteer availability.

3. **Bus Pass Subsidy Program**
   WPCTSA provides bus pass subsidies to eligible social service agencies. The program reimburses these agencies for some of the cost of providing bus passes to their clients who cannot afford them.

The WPCTSA also purchases retired (surplus) dial-a-ride vehicles from Placer transit operators and sells these vehicles to local non-profit social service organizations for a nominal amount for use to transport elderly and/or disabled clients.

WPTSA and the City of Roseville also operate the South Placer Transit Call Center. With the Call Center, Placer County residents can call one number to make reservations for Dial-A-Ride or Health Express, find out information on bus delays, get assistance with trip-planning, and access resources for every transit service in south Placer County.

Based on the WPCTSA Short Range Transit Plan, the WPCTSA also plans to implement the following programs:

- Integrate Connect Card into WPCTSA's programs.
- Partner with Health Care Entities to provide transportation to and from medical appointments, particularly outside current public transit service hours.

**Supplemental/Human Services Transportation**

Other transportation providers in Placer County include the following:

- **PRIDE Industries** provides worksite and day program transportation for adult program participants with disabilities within Placer (or Sacramento) county utilizing buses and vans.

**Sacramento County**

As the largest in the region in terms of population, Sacramento County also has a larger number of transportation providers.

**Fixed-Route Service**

The Sacramento Regional Transit District (SRTD) operates three light rail lines and 69 fixed-route bus services in its 418-square-mile service area.
South County Transit (SCT/Link) operates service in the southernmost part of Sacramento County. SCT/Link offers general public dial-a-ride service in Galt, as well as limited service to other communities in the Delta, an express route along Highway 99 connecting Lodi, Galt, Elk Grove and Sacramento, and the Sacramento Commuter connecting Galt and downtown Sacramento.

e-tran is the City of Elk Grove’s transit service. It offers nine local bus routes within Elk Grove, including a weekend shuttle service. e-tran also offers nine commuter routes to Sacramento, including connections to the Meadowview and Butterfield light rail stations, and to SCT/Link’s Highway 99 service, as well as two reverse commute routes from Sacramento to Elk Grove.

**Demand-Responsive Service**

Paratransit, Inc. has a contract with SRTD to provide complementary ADA paratransit service within ¼ of a mile of active light rail stops and bus routes within SRTD’s service boundary in Sacramento County. As the designated CTSA for Sacramento County (excluding the southernmost portion of the county), Paratransit, Inc. also provides non-ADA service directly and through community partners. They operate over 150 vehicles. Paratransit, Inc. provides trip planning and services to 11 community partners, ranging from United Cerebral Palsy to the Society for the Blind. Their maintenance shop provides services to 40 other agencies in the Sacramento region. Paratransit offers mobility training for county residents on using SRTD buses and light rail, and to residents of the SACOG region.

SCT/Link provides general public Dial-a-Ride service within Galt. SCT/Link also provides service once a week for the general public between Galt and Southeast Sacramento County, and twice a week for seniors and persons with disabilities between Galt and medical facilities in Sacramento.

e-van provides Dial-a-Ride service to Elk Grove residents who qualify under the ADA. e-van operates within Elk Grove, and also provides service to medical facilities in Sacramento.

Sacramento Regional Transit offers SmaRT Ride microtransit service a curb-to-curb service that is open to the general public to any destination with the boundaries of a specific zone. SmaRT Ride connects passengers to all destinations throughout the zone including shopping centers, restaurants, movie theaters, community centers, parks, schools and medical facilities, Monday through Friday. Regular Basic and Discount Fares apply.

SmaRT Ride is operated by the Sacramento Regional Transit District (RT).
  - **Zone 1:** Citrus Heights/Antelope/Orangevale, Monday-Friday, 6 AM – 9 PM
  - **Zone 2:** Franklin/South Sacramento, Monday-Friday, 7 AM – 7 PM

**Supplemental/Human Services Transportation**

Other transportation providers in Sacramento County include the following:

- The American Cancer Society’s Road to Recovery program provides transportation to ambulatory cancer patients without other alternatives to reach cancer-related treatment and medical appointments.
ACC Rides Transportation Services provides door-to-door transportation using volunteer drivers, supplemented by some paid staff, using a fleet of wheelchair accessible small buses and minivans. ACC Rides is open seven days a week: Monday thru Friday 6:00am-6:00pm, Saturday 8:00am-5:30pm, and Sunday 9:00am-4:00pm.

ACC Rides serves seniors 60 and older while targeting underserved communities and seniors with physical/cognitive limitations. Riders must reside in one of the following ten zip codes in Sacramento County: 95814, 95818, 95820, 95822, 95823, 95824, 95828, 95831, 95832, and 95758 zip code in the City of Elk Grove.

ACC Rides also transports seniors from the Delta region, which includes parts of Hood-Franklin, Courtland, Locke, and Walnut Grove. Transportation services include bringing riders to doctor appointments, to go to life saving treatments such as dialysis and chemotherapy, to go shopping, attend lunch at selected “Meals on Wheels by ACC All Seasons Cafe” sites, attend Sunday service, and other personal errands. ACC Rides also provides shopping shuttles to senior apartment complexes and shuttle service to churches and community-based organization for special events.

ACC Rides received a donated six-passenger minivan, which is currently used by the Cordova Senior Center to transport seniors who reside near and around the Cordova area to attend senior lunch programs and other activities held at the center.

Easter Seals operates two large buses that provide round trip transportation for adults with disabilities to Sacramento area Easter Seals programs, M-F.

Easter Seals utilizes these two buses plus an additional four large buses, two pickup trucks and one van to provide transportation for Easter Seals program participants to various activities, worksites, and appointments during the day, M-F.

Easter Seals (as a CTSA partner) coordinates with e-tran to transport program participants from the Elk Grove area to their Sacramento area program, M-F.

Easter Seals (as a CTSA partner) also provides transportation from an underserved area in Rancho Cordova to Easter Seals in Sacramento, M-F.

PRIDE Industries provides worksite and day program transportation for adult program participants with disabilities within Sacramento (or Placer) county utilizing buses and vans.

The County of Sacramento offers a Senior Companions Program (SCP) through the Department of Health and Human Services’ Senior and Adult Services. SCP Senior Volunteers provide escorted transportation services for frail seniors and disabled adult clients of Partner Agencies, listed at www.scp sacramento.org.

The Society for the Blind offers transportation for those attending classes at its midtown location, as well as for its senior retreat program and Senior Impact Program.

Stanford Settlement offers transportation to and from the Sister Jeanne Felion Senior Center for lunch using 15-passenger vans, plus door-to-door car transportation and escort for seniors to doctor’s appointments using volunteers. To be eligible, seniors must live in zip
codes 95815, 95833, 95834, or parts of 95836, 95837 or 95838, and request medical escort at least 3-4 days in advance.

- Sutter SeniorCare PACE provides transportation to eligible participants who are 55 years of age or older or meet the requirements of skilled nursing home care as determined by the PACE organization’s interdisciplinary team assessment and certified by the California Department of Healthcare. Transportation services are offered to approximately 270 participants (2016) in thirty-six Sacramento County zip codes to the Sutter Health Adult Day Health Center (ADHC) and also includes trips to outside specialist appointments, community outings, dialysis, personal needs, non-emergency and hospital discharges, and other various locations within the community. Participants reside in thirty six zip codes: 95624, 95758, 95820, 95822, 95823, 95824, 95826, 95827, 95828, 95829, 95831, 95832, 95757, 95605, 95608, 95610, 95621, 95628, 95652, 95660, 95811, 95814, 95815, 95816, 95817, 95818, 95819, 95821, 95825, 95833, 95834, 95835, 95838, 95841, 95842, and 95864. The Sutter Health SeniorCare PACE program provides services Monday through Friday from 8 AM to 5 PM using 17 vehicles obtained through various funding sources including the FTA 5310 program.

- United Cerebral Palsy offers weekday fixed route, door-to-door service for people with developmental disabilities to various community educational and vocational programs throughout the Greater Sacramento area.

**Yolo County**

Besides its cities of Winters, Woodland, Davis – home to UC Davis – and West Sacramento, Yolo County includes numerous smaller communities such as Madison and Esparto and more outlying rural areas like the Capay Valley.

**Fixed-Route Service**

The Yolo County Transportation District (YCTD) operates YOLOBUS, which offers local fixed routes within Woodland and West Sacramento and intercity routes serving Davis, West Sacramento, Winters, Woodland, downtown Sacramento, Sacramento International Airport, Capay, Dunnigan, Esparto, Madison, Yolo, Knights Landing, Vacaville, and Cache Creek Casino.

Unitrans provides fixed-route transit service in the city of Davis for UCD students and the general public. UC Davis operates a UCD Med Center and UC Berkeley Shuttle.

**Demand-Responsive Service**

YCTD also operates the following curb-to-curb Dial-a-Ride services:

- Local service for persons with disabilities in Woodland;
- Local service and to medical appointments in Sacramento for West Sacramento seniors and persons with disabilities;
• Intercity service between the communities of Winters, Woodland, Davis, West Sacramento, Sacramento International Airport and downtown Sacramento.

Davis Community Transit operates origin-to-destination Dial-a-Ride service for persons with disabilities within the City of Davis.

The City of West Sacramento offers West Sacramento On-Demand microtransit service a curb-to-curb service that is open to the general public to any destination with the boundaries of the City. Passengers who are able may be asked to walk a short distance (200-500 feet) to meet their ride and help make the service as efficient as possible. West Sacramento On-Demand connects passengers to all destinations throughout the City including shopping centers, restaurants, community centers, parks, schools and medical facilities, Monday through Saturday. Riders book their trips through either a smartphone app or via phone. Standard fares available for riders 13 and older, and half fare discounts apply to seniors (65+) and individuals with disabilities. On-Demand has group pricing where a traveler can add additional travelers to their trip for a reduced cost, as well as a weekly pass that allows riders 4 one-way trips a day. The service operates 6 AM – 11 PM weekdays, and 9 AM – 11 PM on Saturdays.

Supplemental/Human Services Transportation

Other Yolo County transportation providers include:

• Shores of Hope (formerly United Christian Centers) in West Sacramento, which transports mentally disabled adults to the local adult day employment and recreational program, takes West Sacramento, Woodland, and Davis clients to the John H. Jones Clinic for substance abuse and to Sacramento for medical treatment, transport homeless and homeless with disabilities to cold weather shelter around West Sacramento.

• Winters Senior Foundation offers volunteer provided medical appointment rides to seniors 55 and over living within the boundaries of the Winters Joint Union School District. Riders do not need to register they can simply call the Winters Senior Foundation to schedule a ride. Volunteer drivers provide the no fee rides using their own vehicles, and must provide their DMV driving record and proof of insurance before participating.

• Woodland Community Care Car, operating two vans driven by volunteers within Woodland to take ambulatory seniors to and from medical, dental and legal appointments, beauty or barber shops, visits to a spouse or relative in a hospital or nursing home, shopping, banking, Social Security, the Senior Center, Employment and Social Services Department, library and post office. The vans also take passengers to the Woodland Senior Center for their lunch program.

• Yolo Adult Day Health Center in Woodland, which operates three buses and two mini-vans to bring clients to their program. Yolo Adult Day Health also utilizes Older Americans Act funds via the Agency on Aging Area 4 to distribute vouchers to non-ADHC seniors accessing paratransit services in Yolo County.
• Yolo County Veterans Service Office which uses two vans driven by volunteers to take local veterans to medical appointments at Veterans’ hospitals at Mather, McClellan, Martinez, Mare Island, and occasionally San Francisco.

Yuba and Sutter Counties

Yuba and Sutter Counties are home to two larger cities, Marysville and Yuba City, and two large unincorporated urban communities, Linda and Olivehurst, as well as two small cities, Live Oak and Wheatland, and numerous unincorporated rural areas. There has been abundant development on the city fringes and in outlying rural communities over the last ten years, with a large population of commuters to jobs in Sacramento, Placer and Yuba Counties and beyond.

Fixed-Route Service

Yuba-Sutter Transit offers six fixed routes serving Yuba City, Marysville, Yuba College, Olivehurst and Linda, and commuter and midday service to downtown Sacramento, including six morning and evening schedules on Highway 99, four morning and evening schedules using Highway 70, and three midday schedules. Local service is generally offered from 6:30 a.m. to 6:30 p.m. Monday – Friday and from 8:30 a.m. to 5:30 p.m. on Saturdays. There is no service on Sundays or major holidays.

Yuba-Sutter Transit also offers three rural route-deviation services providing scheduled access to the Yuba City / Marysville urban area from the Cities of Live Oak and Wheatland and selected Yuba County foothill communities. These services offer two or three round trips three or five days per week.

Demand-Responsive Service

Yuba-Sutter Transit provides Dial-a-Ride service to seniors and persons with disabilities, and the general public in the evenings, within the Yuba City, Marysville, Linda and Olivehurst urban area. Service is operated from 6:30 a.m. to 9:30 p.m. Monday – Friday and from 8:30 a.m. to 5:30 p.m. on Saturdays. There is no service on Sundays or major holidays.

Supplemental/Human Services Transportation

• The American Cancer Society offers its “Road to Recovery” transportation service to ambulatory cancer patients in Yuba and Sutter Counties for cancer-related appointments.

• PRIDE Industries provides worksite transportation for adult program participants with disabilities within the Yuba City/Marysville urban area and Live Oak utilizing small buses.

• Easter Seals operates two large buses that provide round trip transportation for adults with disabilities to Yuba area Easter Seals programs, M-F. These buses also drive the program participants to various activities, worksites, and appointments during the day.

Various private companies including Heart-to-Heart, L.O.R. Transportation and Merit Med-Trans provide MediCal-subsidized, non-emergency medical trips within the area.
CHAPTER 3: NEEDS ASSESSMENT

The following Chapter outlines the needs for public and human services transportation services and coordination identified as part of this Plan. Demographic projections indicate growth in the populations most likely to require public transportation assistance: seniors, persons with disabilities, and low-income households. Stakeholder input also identified issues with existing transportation services that affect mobility and indicated region-wide and county-specific needs for expanded services and coordination.

Senior Population Change
Population projections have been developed by the California Department of Finance (DOF). DOF projections are from a regional economic model which makes assumptions about future levels of migration into each county.

According to DOF projections, the number of people age 75 or older in the Sacramento region, and who are the most likely to need transportation assistance, will increase by more than 300,000 between 2010 and 2040. As shown in Table 1 below, in each of the six counties, growth for each age cohort is expected to increase as a proportion of the regional total.

<table>
<thead>
<tr>
<th>County</th>
<th>2010</th>
<th>2020</th>
<th>2030</th>
<th>2040</th>
</tr>
</thead>
<tbody>
<tr>
<td>El Dorado</td>
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<td></td>
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<tr>
<td>Total</td>
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<td>189,576</td>
<td>206,010</td>
<td>222,972</td>
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<td>% Total Pop 65+</td>
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<td>23%</td>
<td>29%</td>
<td>27%</td>
</tr>
<tr>
<td>Placer</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
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<td>508,439</td>
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<td>62,007</td>
<td>82,826</td>
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<tr>
<td>% Total Pop 65+</td>
<td>16%</td>
<td>22%</td>
<td>26%</td>
<td>27%</td>
</tr>
<tr>
<td>Sacramento</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
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<tr>
<td>% Total Pop 65+</td>
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<td>15%</td>
<td>19%</td>
<td>21%</td>
</tr>
<tr>
<td>Sutter</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
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<tr>
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<td>12,972</td>
</tr>
<tr>
<td>% Total Pop 65+</td>
<td>13%</td>
<td>16%</td>
<td>19%</td>
<td>20%</td>
</tr>
</tbody>
</table>
Between 2010 and 2040, the state Department of Finance projects those aged 65+ to comprise 55 percent of regional population growth, including a doubling of those 85 and over. By the year 2040, the six-county region is projected to have 22 percent of the population aged 65 and over. DOF currently projects that the number of older adults will increase both numerically and as a percentage share of the population in each of the six counties over the study period. However, this growth will not be even.

The most dramatic graying percentage-wise will continue to occur in outlying counties which presently have lower median ages. According to DOF’s data, percentage of those age 65+ will be greatest in El Dorado and Placer counties. Sacramento, Yolo, Sutter, Yuba counties, will see more moderate increases in those aged 65+.

Nonetheless, the largest absolute growth will take place in Sacramento County, to over 402,000 residents aged 65+ by 2040. This compares with Placer County with about 138,000, or just under a third of Sacramento County’s older adult population, and El Dorado County at about 61,000 aged 65+, or about 15 percent of Sacramento’s older population. (Without the South Lake Tahoe area, these county projections would be slightly reduced.) Additionally, regional projections are for a drop in the ratio of working age adults to each person 65+ from 4.4 to 1 in 2010 to 2.3 to 1 by 2040.

Persons with Disabilities: Population Change

The Census Bureau defined a disability in the 2010 Census as a long-lasting physical, mental, or emotional condition. A disabling condition can make it difficult for a person to undertake everyday activities such as walking, climbing stairs, dressing, bathing, learning, or remembering, and can prevent a person from being able to go outside the home alone, to travel independently, or to work at a job or business.

In the 2018 Sacramento Regional Transportation Study, respondents were asked if they had a disability that limited their ability to go outside their home. Overall, 5% of people who responded
reported a disability that limited their mobility. As was expected, the average number of personal trips made by persons with a disability (1)\textsuperscript{2} was lower compared to persons without a disability (3.8).\textsuperscript{2}

A “severely disabled” custom category has been created by SACOG that consists of only those persons whose disabilities make self-care and independent living more difficult. This custom category was created to more accurately represent the population who require some type of assistance, are frequently reliant on public transportation, and would most likely be dependent on demand-responsive or human services transportation.

Table A “Severely disabled population in 2017 with projections to 2040” in the Appendix provides projections of this “severely disabled” population in 10-year increments from 2020-2040. In the absence of more certainty on future disability rates, county-level disability rates have been held constant at 2017 estimated levels to try to account for potential offsetting increases and decreases for different age groups. The 2017 disability rate was applied to DOF county projections to project out the population with severe disabilities at the end of each 10-year increment.

What is striking is that the “severely disabled” population is projected to increase by 31% between the year 2017 and 2040, to just under 230,000 people in the Region due to overall population growth. Those currently aged 34-54, a group that according to studies may be showing higher disability rates, will be ages 55-75 by 2040.

In all counties, the percentage of severely disabled among those 18-64 exceeded the percentage of severely disabled seniors 65+.

Location of Population Growth

Dispersion of the senior population has occurred in the Sacramento region. Over the 40-year period from 2000-2040, Census data and estimates show that, as population spread out from central Sacramento, so did a portion of the senior population. Maps 1 thru 9 in the Appendix illustrate that outlying counties have had increasingly larger concentrations of seniors living in areas that are suburban, semi-rural and rural. Suburban differences are notable in the Sacramento region. Growth in the older population cohorts has been increasing in newer outlying suburbs, such as El Dorado Hills, that have few public transit options and rely extensively on autos for transportation.

A portion of the growth in the population age 65 and older will continue to occur in newer suburban areas in the outlying SACOG counties that currently have only basic or no access to transit services. More urbanized Sacramento County is also projected to have a large number of senior residents. Based on CA Department of Motor Vehicles (DMV) data only 70 percent of those 75 years or age or older in the SACOG region had driver licenses. Placer and El Dorado counties have the highest proportions of senior drives with 76-77 percent respectively.

\textsuperscript{2} SACOG, Sacramento Regional Transportation Study, 2018.
Lower Income Population

A portion of seniors are also low-income, with limited resources to afford to pay for transportation or other services. Table B in the Appendix identifies low-income seniors by age group. Regionwide in 2017, about 9.2% of those 65+ fell below the federal poverty line. Sacramento and Yuba Counties had the highest percentage of low-income seniors 65 and older, while El Dorado County had the lowest.

A portion of the working-age population with disabilities also faces limited income. Table C in the appendix shows that of the approximately 363,000 people falling below the federal poverty line in the Region, about 107,000 or 30% have some form of disability. Of the disabled population that is in poverty, 37% are working-age (18-64) compared with 15% who are 65+. Specific income data is not available to refine this analysis further for those in SACOG’s “custom category” with severe disabilities.

Table D shows that the proportion of the working age population in the region who were below the federal poverty line in 2017 was between approximately 5 to 14 percent. This group is more likely to be transit dependent to reach work and training opportunities. According to 2017 Census estimates regionally 2.3% of owner-occupied households have no vehicle available, and 12.7% of renter occupied households have no vehicle available to them. These data appear to show some correlation between vehicle ownership and poverty with households of people who rent having significantly less availability of personal vehicles than those households headed by a homeowner. In total, just under 57,000 households or 11% do not have a vehicle available to get to necessary destinations such as work, grocery shopping, medical appointments, etc.

Poverty is an issue throughout the SACOG region. Many may think of the urban areas of the region as having the highest levels of poverty. In fact, a much larger proportion of the population affected by poverty are in the suburban and rural areas of the region as can be seen in Maps 10 through 14 in the Appendix. This illustrates that the need for access to reliable, affordable and relatively convenient public transportation throughout the SACOG region. As the federal poverty line is seen by many as extremely low, the above referenced maps may understate the population of those with difficulty affording transportation services.

Even assuming disability rates remain constant, sheer population growth, especially among senior age cohorts, suggests a significant increase in the population eligible for demand-responsive services. In 2017, approximately 12% of the total regional population qualified, and with many demand-responsive systems serving seniors over a specified age regardless of disability, by 2040 that percentage is likely to increase even more.

Consideration needs to be given to how to identify and target seniors, lower income persons and persons with disabilities who have the fewest resources for transportation support. More data will also be needed to project the need for ADA/special transportation services for those with severe disabilities among working-age and senior populations.
Common Destinations

The following are common destinations identified by stakeholders across the region:

**Medical Services**

- Kaiser Permanente facilities in Elk Grove, Folsom, Sacramento (Downtown, Morse Ave., Point West, South Sacramento), Roseville (Riverside, Eureka Rd., Park Lane Pharmacy), and Lincoln
- UCD Medical Center in Sacramento and UC Davis clinics
- Sutter and Dignity medical facilities/Mather Veterans Administration hospital
- County health clinics
- County/outpatient mental health clinics
- Other local hospitals and clinics (e.g., Auburn Faith, Dewitt Clinic, Woodland Memorial, MedClinics, urgent care clinics)
- Medical complexes/doctor’s offices surrounding hospitals
- Dialysis centers
- Specialized services like wheelchair repair centers in Sacramento and Roseville
- Adult day health care

**Education/Employment**

- Services/centers for people with various disabilities – e.g. programs for blind/visually impaired, deaf/hearing impaired, those with developmental disabilities, independent living programs, disability training programs, adult day programs
- One-stop centers
- CalWORKS
- Employment Development Department
- Department of Rehabilitation
- Adult education programs
- Colleges and universities
- Access to school buses

**Government Services**

- Federal, state, county offices
- Social Security offices
- Public libraries
- Legal services
- County Social Services
• Post Office

**Shopping/Errands**

• Grocery stores
• Pharmacies
• Big box stores like K-Mart, Wal-Mart, Target, Home Depot
• Downtown areas
• Shopping malls – traditional and outlets
• Banks
• Pet stores/veterinary clinics

**Social/Recreational Opportunities**

• Senior centers
• Religious congregations
• Movie and other theaters
• Gyms/athletic clubs
• Community pools
• Community centers
• Sports arenas
• Nature centers/lakes/rivers
• Fairs and special community events

**Connections for Longer Distance Travel**

• Sacramento International Airport
• Amtrak stations
• Greyhound bus stations
Unmet Needs and Gaps

Stakeholders have identified a variety of gaps and issues with existing transportation services that limit mobility on the part of seniors, persons with disabilities, and those with low incomes.

Non-Emergency Medical Transportation

Reaching medical appointments was considered one of the greatest unmet needs for those who must rely on public transit or demand-responsive services. Issues identified with existing transportation services include:

- Those needing to reach medical facilities in another city or county can encounter difficulties trying to cross geographic boundaries, especially where eligibility requirements differ.
- Most demand-responsive services require advance reservations, making it difficult to reach a doctor for a same-day appointment because of an illness or emergency.
- It is hard to predict how long a medical appointment will last, so it is difficult to schedule a timely pick-up.
- Waits for pick-up can be long and generally difficult for someone in ill health.
- Transit agency demand-responsive programs, most of which are curb-to-curb, require clients to wait outside for a pick-up, and if they are late it can be a particular hardship for someone who is frail or ill, especially in hot, cold, or wet weather.
- Some people are too frail to utilize curb-to-curb service, and require greater assistance to and from the vehicle.
- Seniors with dementia can be too confused to successfully reach an appointment without escort.
- Van transportation itself can exacerbate certain medical conditions.
- Demand for demand-responsive services especially by dialysis clients keeps growing, decreasing capacity for other users.
- Schedules are not always coordinated between agencies on route connections to reach medical centers.
- TNCs can be an option for those that have access to the technology necessary to request a ride and can afford and these more expensive services. These services are usually not accessible to disabled persons that use mobility devices like wheelchairs and scooters, and frequently refuse rides to those with service animals.

For those able to access the initial route in their home community, in some cases intercity travel options are very good, with agencies providing direct service without transfers or waiting. These included: both Auburn and Lincoln to the Roseville Galleria, Lincoln to Roseville Kaiser, and El Dorado to Folsom Kaiser and Folsom Lake College.
Unfortunately, many other trips are not easy for transit-dependent patients, requiring long trips, significant wait times and multiple transfers. For example, consulting transit agency websites for current routes and schedules:

- For someone trying to reach Kaiser Roseville from Auburn, the trip requires 2 hours and 3 transfers.
- Elk Grove to Kaiser South takes 1-1.5 hours with at least one transfer. Elk Grove to the Elk Grove Promenade Medical Center takes up to 1 hour with one transfer.
- Yuba City to Kaiser Morse takes up to 2.5 hours and 3 transfers, with half the time spent waiting for transfers and is only available Monday through Friday.
- Outside of Tuesdays and Thursdays when SAC-MED is available, depending on the time of day, traveling from El Dorado County to Mercy Folsom can take up to 3 hours and up to two transfers, with a potential hour wait for the transfer.
- Davis to Kaiser South takes 2.5 hours and at least two transfers, with almost one third of the time spent waiting.
- Auburn to Pride Industries in Roseville is difficult trip on public transit – routing can take up to 3 hours and three transfers.

These findings bear out the difficulties reported by stakeholders with travel across city/county boundaries, even to key destinations.

**Demand-Responsive Service**

Concerns extended to demand-responsive service generally. Stakeholders identified the following as issues with Paratransit/Dial-a-Ride systems region wide that inhibit mobility:

- Requirements for advance scheduling
- Insufficient service in terms of hours, capacity, and geographic areas served
- Long waits for pick-ups
- Difficulty of intercity connections that include forced transfers
- Curb-to-curb service that is insufficient for those who need additional help to/from the vehicle or to carry packages.

**Fixed-Route Transit**

For seniors, persons with disabilities, and low-income families who can or do use fixed-route transit, besides the concerns raised above, stakeholders across the region also identified these issues:

- Insufficient service, especially midday, evenings, weekends, holidays, and in more far flung suburban and rural areas
- Lack of fixed-route transit near where people live and serving their destinations
- Ride times that are long, especially if there is a need to transfer
• Bus stops that are far from destinations and/or have poor physical access
• Cost, especially with fare increases and transfers
• Drivers not following rules and training concerning riders who are seniors or have disabilities
• Insufficient transit information reaching the public.
• Lack of system integration across the geographic boundaries of providers, resulting in poor timing and schedule coordination, difficulty for riders to connect for intercity travel, and/or requiring multiple transfers.

Maps 10-14 developed by SACOG (see Appendix) show current transit services overlaid on areas in the SACOG Region that are more heavily populated by households with lower incomes. Certain locations in the region appear to have sections that are less well served by transit, despite the concentration of lower income families. This kind of mapping can be a useful tool for identifying and planning transit services for areas that are potentially underserved.

County Issues

County-specific issues were also identified through stakeholder interviews, workshops and unmet needs hearings, as listed below:

**El Dorado County**

• Many people live outside the Dial-a-Ride boundary and so do not qualify for service.
• Taxi service and TNC rides are expensive.
• There are no supplementary volunteer programs.
• Dial-a-Ride subscription service is full with a waiting list, making it hard for working people to rely on the service as it is first-come, first-served for those without a subscription.

**Placer County**

• Intercity travel is difficult from Auburn, Lincoln and other outlying towns to Roseville for jobs, shopping, programs such as PRIDE, and medical services, and across county lines to destinations in Sacramento County.
• Small print size is difficult to read in transit information
• There are limits on shopping bags/packages
• Sun City senior communities in Roseville or Lincoln do not provide transportation services for residents who, as they age, are no longer able to drive, relying instead on resident volunteers. Most volunteer-provided services cannot transport people who use wheelchairs because of issues with disabled users’ limited ability to transfer from a wheelchair to a vehicle.
• Clients with similar profiles may or may not qualify for transportation services because of eligibility requirements.
• Some contracting agencies don’t permit CTSA to carry other programs’ clients even when going to the same destination.
• Placer County Transit schedules do not necessarily coordinate with the light rail schedule at Watt/I-80.
• Need for service that can come to a senior’s home that offers same day service/flexibility especially for medical appointments.
• Mobility issues make using fixed route transit challenging in particularly when transfers are required.
• South Placer “one-stop” call center needs more marketing/publicity.
• Granite Bay Community Dial-a-Ride only serves Granite Bay making other senior/social activities available nearby hard to access due to multiple transfers.
• Microtransit or similar on demand service needed in Roseville.
• Publicize the availability of Roseville Transit ambassador/mentor programs to encourage more use of public transit.
• Dial-a-Ride and paratransit services need to operate across jurisdictional boundaries.
• More marketing of fixed route and specialized public transit services.

Sacramento County

• Transfers are sometimes across the street and/or very tight, and if a bus is missed there can be a long wait for the next one given infrequent schedules.
• Riders may not know to ask drivers to communicate when there is a potential to miss a key transfer.
• Seniors have fears of getting lost, of safety at transit stops, and of using transit at hours when many teenagers are present.
• Bus drivers are unable to enforce priority seating for elderly and disabled persons.
• Incorrect information is sometimes provided by customer service agents.
• There is a lack of notice about stop location changes, route diversions, closures, road construction barriers, and the like.
• No system or Transportation Management Association is available to help organize accessible taxi services or shuttles in neighborhoods.
• Individuals are sometimes denied a ride on paratransit due to lack of next-day or same-day space.
• Many fixed route services that service outlying areas end too early.
• Better communication is needed between transit operators to provide smoother transfers.
• Make transit stops welcoming, clean, and comfortable so those new to transit or transitioning from driving more at ease using public transit.
• Require TNCs, along with all taxi companies, have accessible vehicles available that can accommodate wheelchairs.

• Create better public awareness of the advantages of public transit by having more “try transit” commute challenges and events with policy makers using transit.

• Consider a payroll-based fee to support public transportation services.

• Specialized services need to be available on demand and offer door-to-door assistance without the need for advanced scheduling.

• Increase space on transit vehicles for mobility devices.

• Low cost/free transit during low usage times to increase ridership and offer incentive for potential riders.

• Bring back the senior lifetime transit pass for seniors 75 years of age and older.

**Yolo County**

• There is an insufficient amount of mobility training for passengers who could be encouraged to use fixed route buses instead of demand-responsive service.

• Dial-a-Ride vehicles are insufficient at peak travel times.

• There is inadequate gap service for wheelchair users and in smaller communities, especially for emergencies and unplanned situations.

• Need more accessible taxis.

• Insufficient service is available for low-income residents of the Yolo housing authority development in Winters to reach employment within and outside Yolo County.

• Drivers not always communicating sufficiently with blind/visually impaired clients that have arrived or that bus is full.

• Have DMV go out to groups focused on issues around aging and disability to share information on restricted driver licenses and other transportation options.

• Make sure fixed route transit stops/routes are in accessible locations, are well lit, and safe.

• Expand microtransit to give seniors and those with disabilities more transportation options and better access to fixed route transit.

• Public transit operators coordinate more with cities and counties on how to assist homeless individuals with transportation.

• Free transit passes for seniors when they must stop driving.

• More significantly discounted transit services for seniors, disabled persons, and those with low incomes.

• More complete streets to improve access to transit services.

• Make sure that microtransit vehicles are equally equipped for accessibility.
• Do no run microtransit where productive fixed route transit currently runs.

**Yuba and Sutter Counties**

• There is no fixed-route service on Sundays or holidays
• Some buses still have steep steps that can be hard to climb.
• There is insufficient information and training on using the transit system.
• There are some who live outside the Dial-a-Ride boundary in Sutter and Yuba counties and so do not qualify for service.
• It can cost $40-50 to use taxi service and TNCs are not readily available.
CHAPTER 4: STRATEGIES AND/OR ACTIVITIES TO ADDRESS IDENTIFIED GAPS AND ACHIEVE EFFICIENCIES IN SERVICE DELIVERY

Coordination

Regionally, SACOG administers the 511 system (www.sacregion511.org), a clearinghouse for transportation information in the six-county SACOG region. The 511 website, phone system, and smart phone application allow users to obtain information on transportation within the region, as well as travel information from the adjoining regions (San Francisco Bay Area, etc.). The region has helped a majority of the fixed route transit operators get their service information into the Google automated transit trip planning system, which allows users to plan trips and receive itineraries, whether for short neighborhood trips or long regional trips from county to county.

The SACOG regional transit operators coordinate their services in a variety of ways. A majority of the fixed route transit providers operate inter-jurisdictional trips for commute purposes, as well as for everyday travel needs of their customers. Some of the region’s operators have multi-agency dispatching and scheduling for demand responsive services. Some of the transit providers also share their maintenance facilities with other smaller, not-for-profit and specialized transportation providers.

The SACOG Transit Coordinating Committee (TCC) brings together area transit operators to coordinate their operations, capital and maintenance functions. The TCC coordinates transit studies and systems on a regional basis, disseminates federal, state and local transit information, reviews and comments on the MTP/SCS and the MTIP, gives input into SACOG’s Overall Work Program, and provides a forum for the region’s transit operators to discuss transit plans and issues. TCC members come together each year to program funds for their systems’ operations and maintenance needs, as well as for capital bus replacement and expansion.

Current and Future Efforts to Improve Coordination

SACOG in partnership with the region’s fixed route transit operators, has implemented an automated trip planning (ATP) system using the Google Transit tool. The Google Transit tool allows transit riders to plan regional trips using multiple operators. The itinerary provided by the Google Transit tool includes approximate walking distances, transit travel times, and fares. The ATP is linked to the Sacramento Region 511 traveler information system that SACOG administers.

One of the main issues that stakeholders conveyed was the difficulty in making cross-jurisdictional trips. Many of these trips were for medical appointments. The Placer County Transportation Planning Agency (PCTPA) initiated a study on coordination and/or consolidation of the various demand-responsive services offered in Placer County, as a majority of the transit operators now provide some form of demand-responsive transit service of their own and a CTSA operates there as well. This study resulted in the creation of the Western Placer CTSA, which now works with non-profit organizations that provide demand-responsive services and non-emergency medical transportation to residents that aren’t served by the existing fixed route transit operators’ demand-responsive services.
SACOG is currently implementing with nine of the region’s transit operators a single fare medium called the Connect Card. A majority of the fixed route transit operators in the SACOG region are participating in the Connect Card. In the future, demand-response operators may also participate in the Connect Card, and the technology could also be expanded to allow the use of smart phones for payment in addition to the Connect Card. The Connect Card will increase the ability for seamless travel on the regional transit network and facilitate multi-jurisdictional transit trips.

In 2019 SACOG released “Filling the Gap – A Guide to Volunteer Transportation Programs.” This Guide assessed opportunities for alternatives and improvements to existing public transportation services for seniors, persons with disabilities, and low-income residents in more rural communities in El Dorado, Sutter, and Yuba Counties, where fixed-route and demand response transit may be more limited and service is costly to provide. It explored the use of volunteers to expand community transportation options. The goal of the Guide is to help and encourage more communities to consider developing volunteer transportation programs to fill the gaps in the existing transportation systems and synthesized a range of information on volunteer transportation programs.

For 2018 SACOG released a Regional Transportation Study based on a regional household travel survey. The Study collected a rich set of demographic and travel behavior data from a representative set of households in the six-county SACOG planning area. The Study used innovative and representative sampling methods to provide a quality dataset, decreasing the nonresponse bias from low-income households and roughly doubling the number of TNC users. The study also used innovative data collection methods, leveraging smartphones to capture most travel data, resulting in higher and more accurate trip rates and more precise trip times, distances and person-miles traveled. The Study report summarized responses, focusing on evaluating the success of the sample plan and providing descriptive statistics for key questions in the survey and key travel behaviors from the travel diaries. Future work at SACOG will focus on incorporating this dataset into regional travel modeling, analysis, and planning.

In 2017 SACOG completed the Older Adult Transportation & Age Friendly Communities Study. The Study explored the current and projected changes in the age spectrum of the SACOG region’s population, and the implications for transportation, housing and community supports that can contribute to the health and quality of life of the region’s residents across the age spectrum. SACOG reviewed the demographics of the region, current transportation services, what agencies and regions are doing across the country to meet older adult needs and preferences, and identified potential strategies for future research, pilot programs and action/implementation.

SACOG also worked to identify environmental justice issues throughout the region with the Lifeline Transit Study (2011). These issues include lack of transit services to certain areas where populations of lower income persons are high, as well as transit challenges faced by seniors who live in suburban ‘senior communities’ that have limited or no access to public transportation. SACOG brought together representative stakeholders to give their input on environmental justice related transportation problems that they and those in their communities face.

SACOG sees Public Transit and Human Services Transportation Coordination as an on-going process, to be considered on a regular basis. SACOG will continue to make use of the existing Social Service Transportation Advisory Councils (SSTAC) that advise the SACOG board on the state-required Unmet Transit Needs process to give input on Coordinated Transit/Human Services
Transportation issues. The SSTACs are made up of potential transit users who are 60 years of age or older; physically disabled; social service providers for seniors, including a transportation provider; a social service provider for persons of limited means; and representatives of the CTSA (Consolidated Transportation Services Agency), including a transit operator(s).

**Recommendations for Additional Coordination Efforts and Improvements**

Many recommendations emerged from stakeholder outreach. Recommendations follow particularly for efforts to improve coordination and community partnerships, and for innovative and/or low-cost efforts by transit agencies, human service transportation providers, local governments, community-based organizations, and other to improve mobility for seniors and persons with disabilities and/or low-incomes.

**Planning and Funding**

1. Work with SACOG on funding resources to expand the availability of fixed-route, demand-responsive, on demand, and shuttle services.

2. Incorporate issues and recommendations raised in this Plan and other related study efforts into local transit operator studies, such as Short-Range Transit Plans.

3. Continue to coordinate with SACOG and the county human services departments on mapping that overlays current transit routes with lower income and environmental justice communities, and review transit routes and frequencies of service in those areas for service revisions/expansions to better meet local needs.

**Fixed-Route Transit Connections and Service**

4. Review and consider schedule revisions to improve fixed-route connections across geographic boundaries to key destinations, such as major medical facilities.

5. Encourage transit agencies routinely provide notice to other transit providers in the region of service cuts, revisions, route changes or expansions under consideration, so that impacts on intercity connections can be considered up front in the planning process on the part of all affected agencies.

6. Seek funding support for local shuttle services from retailers and medical providers, in partnership with transit agencies and/or social service providers. Work with large medical facilities, dialysis clinics, local governments, transportation management associations, and/or community-based organizations on public/private partnerships to provide transportation services to medical appointments and/or major retail centers. Work with businesses to provide discounts/incentives to use public transit.

**Transit Stops**

7. Develop community partnerships to implement safety improvements at key bus stops and light rail stations. Sacramento Regional Transit has already begun working with city/county...
law enforcement, the business community, educational institutions and others on light rail station safety improvements. Continue and expand such efforts.

8. Work with local governments to increase crossing times at key intersections using federal guidelines for the pace of older and disabled persons, and improve intersections and sidewalks for safe travel to and from key transit stops. Work with local governments and property owners/ managers on accessible paths of travel through large parking lots at key destinations.

9. Develop volunteer bus stop audit teams composed largely of seniors and/or persons with disabilities to audit conditions at stops and stations. Develop an Adopt-a-Stop or bus stop enhancement program to encourage private and nonprofit organizations to help maintain and beautify bus stops and add amenities.

**Demand-Responsive Service**

10. Seek funding to offer more door-to-door assistance.

11. Improve coordination between demand-responsive service providers, and seamlessness of the system for the user, regardless of which program a client is eligible for, e.g., a one-stop application form or call-in system even if the user is being served by multiple carriers.

12. Review opportunities with other demand-responsive and nonprofit providers to utilize existing vehicles for multiple program clients, possibly with assistance from SACOG’s Social Services Transportation Advisory Councils. The State’s Mobility Action Program will also be looking at program and funding requirements that limit transportation systems’ efficient use of vehicles in serving clients across different programs.

13. Work with facilities and local governments to obtain priority parking for Dial-a-Ride vehicles at common destinations.

14. Work with hospitals and clinics to offer on-site escort services for patients using curb-to-curb transportation services but needing more assistance to reach doctor’s offices.

15. Encourage agencies and organizations to pilot innovative services like on-demand or microtransit services to more effectively serve riders and connect them to fixed route transit.

**Information and Training**

16. Improve passenger notice on changes to routes, stops, construction delays, Dial-a-Ride pick-up changes, etc.

17. Increase and reinforce driver training concerning rules and practices for transporting seniors and persons with various forms of disability.

18. Educate more people about the complex issues around aging and mobility. Better publicize the effects of housing choices on senior and disabled mobility, and the public and personal costs
of individual choices to locate away from transportation and other services. Develop partnerships with Realtors®, visitors’ bureaus, and other sources of information for those seeking housing in an area to help inform potential senior and disabled buyers and renters and their families of transportation and other services that are or are not available in the area, to encourage more informed choices.

19. Increase outreach and education on alternatives to driving and availability of mobility training programs. Increase publicity on public transit services. Improve the readability of transit schedules, including producing large print versions. Publicize the availability of ride-sharing and matching programs. Market volunteer driver programs.

20. Establish mobility training programs in all jurisdictions to make transit and alternatives to driving more accessible and user-friendly to seniors and persons with disabilities, including those who may never have utilized it before. Develop transit ambassador/buddy programs to provide personal assistance to seniors and persons with disabilities who are learning to use fixed-route transit.

21. Partner with blindness organizations to expand and promote cane travel training for people who are blind/visually impaired in independent mobility and how to access fixed-route transit.

**Local Government Policies**

22. Work with local governments on policies requiring developers to pay for bus shelters and transit stop amenities.

23. Work with local governments to require developers of “active” senior communities to provide transportation or to contribute funds to mitigate the costs of local transportation services that will be needed as residents age, through development agreements, developer fees, or other mechanisms.

**New Programs**

24. Collaborate on a program of “transit scrip” to enable seniors and low-income persons with disabilities to reach fixed-route transit services via a connection by taxi, volunteer driver, community organization, or TNC. Work with CBOs to become scrip recipients for services and/or distribution mechanisms to populations needing the most financial assistance for transportation connections.

25. Catalyze shared driver cooperatives, in which a full-time driver provides service to a regular group of seniors and/or persons with disabilities who share the monthly cost of the driver and receive personalized transportation service when desired.

26. Increase availability of regulated, accessible, subsidized local and intercity taxi services.

27. Encourage TNCs to make ADA accessible vehicles part of their fleet.

28. Establish a community-coordinated volunteer driver program.
29. Leverage TNCs by subsidizing rides, including rides outside the TNCs that are ADA accessible.

The following are also specific strategies and activities, sorted by cost, that were recommended in each county to improve mobility for low-income populations, seniors and those with disabilities.

**El Dorado County**

**Lower Cost Strategies/Activities**

- Strengthen design review to enable better transit access in new developments.
- Offer increased information on transit options.
- Provide assistance with climbing bus stairs if “kneeling” buses are not physically feasible for certain areas.
- Provide more mobility training on using fixed route transit and alternatives to driving.

**Higher-cost options**

- Improve pedestrian crossings, especially near Prospector Plaza and at Highway 50 and Spring Street.
- Provide community shuttles or microtransit zones to connect riders to bus stops on fixed routes.
- Develop a community-coordinated volunteer program to fill transportation gaps.
- Expand demand-responsive service.
- Expand the Senior Center Shuttle’s service area.
**Placer County**

**Lower Cost Strategies/Activities**

- Improve coordination of local fixed-route services.
- Improve transit stops.
- Improve Dial-a-Ride dispatching to insure correct and timely pick-ups at home and destinations.
- Increase driver sensitivity training.
- Make more available information on alternatives to driving through the DMV, community locations and the media.

**Higher-cost options**

- Develop more shuttle services: within shopping centers, to medical centers and other key services, and to special/community events from senior residences.
- Increase door-to-door assistance.
- Increase availability of accessible, subsidized, local and intercity taxi services.
- Add on-demand or microtransit services.

**Sacramento County**

**Lower Cost Strategies/Activities**

- Include greater emphasis on universal design and transit-oriented development in city and county planning processes.
- Require any project listed in the Metropolitan Transportation Plan/Sustainable Communities Strategy to demonstrate that the project will work for all possible users.
- Develop guidelines and funding criteria that support better design for high speed roads and pedestrian and bicycle access, including such items as resting places in route to bus stops. Increase public participation through greater public outreach and information on transportation and planning meetings, including those of SACOG.
- Increase sensitivity and ADA communication, training, supervision, and accountability for drivers and customer service staff.
- Develop customer appreciation systems to recognize good drivers.
- Provide more management support for drivers to remove problem riders.
Higher cost options

- Increase funding for transit.
- Focus transit funds on more frequent midday, evening, weekend, and microtransit service.
- Improve bus stop amenities such as shelters and benches
- Increase low-floor buses
- Undertake upgrades to wheelchair restraints and expand number of wheelchair tiedown locations
- Expand usage of real-time transit information technology.
- Provide incentive pay to recognize good drivers.
- Undertake safety improvements at bus stops and on buses, especially downtown, including improved lighting and visibility at stops.
- Offer smaller vehicle and jitney services.
- Expand demand-responsive, microtransit, and community/volunteer transportation programs.
- Offer more taxis that are regulated, insured, supervised, offer a variety of passenger payment options and accessible vehicles, and include discounts/sliding scales/subsidies for low-income seniors/persons with disabilities.
- Look at distance-based pricing.
- Look at priority for rides based on medical need.

Yolo County

Lower Cost Strategies/Activities

- Enforce driver stop announcements.
- Provide sensitivity training for all drivers on smooth driving of large buses or Dial-a-Ride vehicles, and including simulations to understand varied impairments.
- Develop a centralized list, managed by a transportation broker or coordinator, of groups or agencies with accessible vehicles who could transport disabled persons during unplanned situations, such as an illness at work or a vehicle break-down.
- Provide more information and training on using alternatives to driving, including transit buddies.

Higher-cost options

- Increase bus service, including nights and weekends
- Develop supplemental, subsidized, accessible (ramp-equipped) taxi service.
• Expand demand-responsive service hours and wheelchair space.
• Provide greater same-day flexibility for adding riders seeking destinations similar to those with advance reservations.
• Develop shuttles to high-demand destinations.
• Expand on-demand or microtransit services.

**Yuba and Sutter Counties**

**Lower Cost Strategies/Activities**

• Provide more complete travel planning information.
• Provide more mobility training.

**Higher-cost options**

• Provide more frequent and Sunday bus service.
• Provide shuttles to key shopping and service locations.
• Develop a local volunteer driving program.
CHAPTER 5: REQUIREMENT FOR PRIORITIZATION

The FAST Act, the surface transportation bill authorizing funding through the Section 5310 program, requires that the prioritization of projects and strategies be included in the Coordinated Plan so eligible agencies and organizations can apply for and potentially be awarded Section 5310 funds. This prioritization also helps Caltrans select projects for Section 5310 funding in the non-urban areas of the SACOG region. The need for project prioritization is important since there are many more requests for FTA 5310 funds than there are funds available for distribution. This Plan could also serve as a reference for SACOG decision making when new funding becomes available.

The list of priorities was developed based on stakeholder input and the analysis of information throughout the Plan. Four main strategies were chosen that address the needs and gaps that are identified in the Plan:

1. Maintain and evaluate existing transportation services
2. New or expanded services that meet identified needs or gaps
3. Coordination of transportation resources
4. Marketing and Mobility Management

For each identified strategy a table is included below of priorities for funding and implementation. There are three priority levels for these strategies going from High to Low. Each table shows examples and the demographic population (senior, disabled, lower income), the needs or gaps in transportation service. The prioritization tables are included below.

1. Maintain and evaluate existing transportation services

<table>
<thead>
<tr>
<th>Level</th>
<th>Priorities</th>
<th>Applicable Population(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>Maintain existing effective and efficient transportation services</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
<tr>
<td>High</td>
<td>Continue providing existing curb-to-curb, door-to-door, and door-through-door services for trips such as non-emergency medical transportation and grocery shopping in circumstances where paratransit is insufficient, inappropriate, or unavailable</td>
<td>Senior &amp; Disabled</td>
</tr>
<tr>
<td>High</td>
<td>Maintain assets in a state of good repair</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
<tr>
<td>Medium</td>
<td>Evaluate effectiveness of existing services</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
<tr>
<td>Medium</td>
<td>Study alternative funding sources for transportation</td>
<td>Senior &amp; Disabled</td>
</tr>
</tbody>
</table>
2. New or expanded services that meet identified needs or gaps

<table>
<thead>
<tr>
<th>Level</th>
<th>Priorities</th>
<th>Applicable Population(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>Develop or expand transit or transportation solutions in areas with little or no other transportation options based on identified needs or gaps</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
<tr>
<td>High</td>
<td>Develop or expand transit or transportation solutions in areas with sufficient densities to support specialized transportation or coordinated services based on identified needs or gaps</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
<tr>
<td>High</td>
<td>Provide new curb-to-curb, door-to-door, or door-through-door services for trips such as non-emergency medical transportation and grocery shopping in circumstances where paratransit is insufficient, inappropriate, or unavailable</td>
<td>Senior &amp; Disabled</td>
</tr>
<tr>
<td>Medium</td>
<td>Improve first-mile/last-mile strategies to better connect to transit</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
<tr>
<td>Medium</td>
<td>Increase work-based transit service hours of operation to assist nontraditional work schedules</td>
<td>Disabled &amp; Lower Income</td>
</tr>
<tr>
<td>Medium</td>
<td>Increase the level of service on fixed-route services</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
</tbody>
</table>

3. Coordination of transportation resources

<table>
<thead>
<tr>
<th>Level</th>
<th>Priorities</th>
<th>Applicable Population(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>Increase interagency coordination efforts to maximize existing capacity</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
<tr>
<td>High</td>
<td>Increase interagency coordination of resources</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
<tr>
<td>Medium</td>
<td>Implement interagency partnerships to secure funding</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
<tr>
<td>Medium</td>
<td>Develop policies, programs, and partnerships to provide innovative transportation solutions</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
</tbody>
</table>

4. Marketing and Mobility Management

<table>
<thead>
<tr>
<th>Level</th>
<th>Priorities</th>
<th>Applicable Population(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>Increase public awareness of available transit and specialized transportation services</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
<tr>
<td>High</td>
<td>Improve access to available services through coordination and better customer service that connects riders to transit or specialized transportation services that best meet their needs</td>
<td>Senior &amp; Disabled</td>
</tr>
<tr>
<td>Medium</td>
<td>Provide educational and informational resources to encourage more individuals to use public transportation services</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
<tr>
<td>Medium</td>
<td>Evaluate and upgrade transit stops and amenities where appropriate.</td>
<td>Senior, Disabled, &amp; Lower Income</td>
</tr>
</tbody>
</table>
Conclusion

SACOG has produced this Public Transit and Human Services Transportation Coordinated Plan to provide data, information and recommendations that SACOG, local governments, service providers, community-based organizations and leaders, advocates, and community residents can use to begin to address the needs for mobility and transportation options among the Region’s population of seniors, those with low incomes, and with mobility-impairing disabilities.

Through the Coordinated Plan, SACOG has identified a significant need to address mobility issues for seniors, persons with disabilities and those with lower incomes in the Sacramento Region and many possible strategies for doing so. Some of these solutions are simple and inexpensive, some are more costly, and some require significant coordination and funding to implement.

In the future, SACOG will be encouraging next steps by stakeholders throughout the Region in prioritizing, planning, and seeking to implement appropriate solutions in each county throughout the region.

SACOG produced this Plan to fulfill the requirements of FAST Act, but also to focus increased attention on the Region’s increasing populations of seniors and persons with disabilities, as well as the population of people with low incomes, and on the growing demand for transportation programs and services. SACOG expects that this Coordinated Plan and future updates will support the partnerships needed to begin planning strategies now to facilitate regional mobility over the years to come.
Appendix A
Potential Funding Sources
**FTA Grant Programs**

The Fixing America’s Surface Transportation (FAST) Act was signed into law in December 2015. The act, which supports transit funding through fiscal year 2020, reauthorizes FTA programs and includes changes to improve mobility, streamline capital project construction and acquisition, and increase the safety of public transportation systems across the country. View [FTA’s FAST Act highlights](#) page.

The act’s five years of predictable formula funding enables transit agencies to better manage long-term assets and address the backlog of state of good repair needs. It also includes funding for new competitive grant programs for buses and bus facilities, innovative transportation coordination, workforce training, and public transportation research activities. The selected federal funding programs listed below will benefit seniors, people with disabilities, and those with lower incomes. This funding will help keep existing accessible transportation services operating, with the potential for expansion, and keep transportation facilities safe and accessible to allow the target populations to continue to travel for recreational and necessary reasons.

<table>
<thead>
<tr>
<th>Title</th>
<th>Description</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Buses and Bus Facilities Grants Program - 5339</strong></td>
<td>Provides funding through a competitive allocation process to states and transit agencies to replace, rehabilitate and purchase buses and related equipment and to construct bus-related facilities. The competitive allocation provides funding for major improvements to bus transit systems that would not be achievable through formula allocations.</td>
<td>Competitive</td>
</tr>
<tr>
<td><strong>Capital Investment Grants - 5309</strong></td>
<td>FTA’s primary grant program for funding major transit capital investments, including heavy rail, commuter rail, light rail, streetcars, and bus rapid transit, this discretionary grant program is unlike most others in government. Instead of an annual call for applications and selection of awardees, the law requires that projects seeking CIG funding complete a series of steps over several years to be eligible for funding.</td>
<td>Competitive</td>
</tr>
<tr>
<td><strong>Enhanced Mobility of Seniors &amp; Individuals with Disabilities - Section 5310</strong></td>
<td>Formula funding to states for the purpose of assisting private nonprofit groups in meeting transportation needs of the elderly and persons with disabilities.</td>
<td>Competitive</td>
</tr>
<tr>
<td><strong>Flexible Funding Programs - Surface Transportation Block Grant Program - 23 USC 133</strong></td>
<td>Provides funding that may be used by states and localities for a wide range of projects to preserve and improve the conditions and performance of surface transportation, including highway, transit, intercity bus, bicycle and pedestrian projects.</td>
<td>Formula</td>
</tr>
<tr>
<td><strong>Formula Grants for Rural Areas - 5311</strong></td>
<td>Provides capital, planning, and operating assistance to states to support public transportation in rural areas with populations less than 50,000, where many residents often rely on public transit to reach their destinations.</td>
<td>Formula</td>
</tr>
<tr>
<td><strong>Grants for Buses and Bus Facilities Formula Program - 5339(a)</strong></td>
<td>Provides funding to states and transit agencies through a statutory formula to replace, rehabilitate and purchase buses and related equipment and to construct bus-related facilities. In addition to the formula allocation, this program includes the discretionary Bus and Bus Facilities Discretionary Program.</td>
<td>Formula</td>
</tr>
<tr>
<td><strong>Metropolitan &amp; Statewide Planning and Non-Metropolitan Transportation Planning - 5303, 5304, 5305</strong></td>
<td>Provides funding and procedural requirements for multimodal transportation planning in metropolitan areas and states. Planning needs to be cooperative, continuous, and comprehensive, resulting in long-range plans and short-range programs reflecting transportation investment priorities including planning for the transportation needs of seniors, individuals with disabilities, and those with lower incomes.</td>
<td>Formula</td>
</tr>
<tr>
<td><strong>Mobility on Demand (MOD) Sandbox Demonstration Program - 5312</strong></td>
<td>Funds projects that promote innovative business models to deliver high quality, seamless and equitable mobility options for all travelers.</td>
<td>Competitive</td>
</tr>
<tr>
<td><strong>Public Transportation Innovation - 5312</strong></td>
<td>Provides funding to develop innovative products and services assisting transit agencies in better meeting the needs of their customers including seniors, individuals with disabilities, and those with lower incomes.</td>
<td>Competitive</td>
</tr>
<tr>
<td><strong>Rural Transportation Assistance Program - 5311(b)(3)</strong></td>
<td>Provides funding to states for developing training, technical assistance, research, and related support services in rural areas. The program also includes a national program that provides information and materials for use by local operators and state administering agencies and supports research and technical assistance projects of national interest.</td>
<td>Formula</td>
</tr>
<tr>
<td><strong>State of Good Repair Grants - 5337</strong></td>
<td>Provides capital assistance for maintenance, replacement, and rehabilitation projects of existing high-intensity fixed guideway and high-intensity motorbus systems to maintain a state of good repair. Additionally, SGR grants are eligible for developing and implementing Transit Asset Management plans.</td>
<td>Formula</td>
</tr>
<tr>
<td><strong>Tribal Transit Formula Grants - 5311(c)(2)(B)</strong></td>
<td>Provides funding to federally recognized Indian tribes to provide public transportation services on and around Indian reservations or tribal land in rural areas. Funding is provided as a set-aside within of the Formula Grants to Rural Areas program and allocated both by statutory</td>
<td>Formula</td>
</tr>
<tr>
<td><strong>Urbanized Area Formula Grants - 5307</strong></td>
<td>Provides funding to public transit systems in Urbanized Areas (UZA) for public transportation capital, planning, job access and reverse commute projects, as well as operating expenses in certain circumstances.</td>
<td>Formula</td>
</tr>
</tbody>
</table>
Appendix B
Tables
### Severeely Disabled Population in 2017 with projections to 2040

**Table A**

<table>
<thead>
<tr>
<th>County</th>
<th>2017 Total Population 2017</th>
<th>&quot;Severely disabled&quot; 18 to 64 yrs</th>
<th>% of total population that is &quot;severely disabled&quot; 18 to 64 yrs</th>
<th>&quot;Severely disabled&quot; 65-74 yrs</th>
<th>% of total population that is &quot;severely disabled&quot; 65 to 74 yrs</th>
<th>&quot;Severely disabled&quot; 75+ yrs</th>
<th>% of total population that is &quot;severely disabled&quot; 75+ yrs</th>
<th>Census 2017</th>
<th>2020</th>
<th>2030</th>
<th>2040</th>
</tr>
</thead>
<tbody>
<tr>
<td>El Dorado</td>
<td>7.6%</td>
<td>183,777</td>
<td>6,773</td>
<td>3.7%</td>
<td>2,460</td>
<td>1.3%</td>
<td>4,747</td>
<td>2.6%</td>
<td>13,980</td>
<td>14,421</td>
<td>15,671</td>
</tr>
<tr>
<td>Placer</td>
<td>5.4%</td>
<td>372,281</td>
<td>8,107</td>
<td>2.2%</td>
<td>3,147</td>
<td>0.8%</td>
<td>9,003</td>
<td>2.4%</td>
<td>20,257</td>
<td>21,622</td>
<td>24,747</td>
</tr>
<tr>
<td>Sacramento</td>
<td>7.9%</td>
<td>1,480,422</td>
<td>57,882</td>
<td>3.9%</td>
<td>18,296</td>
<td>1.2%</td>
<td>41,382</td>
<td>2.8%</td>
<td>117,560</td>
<td>124,903</td>
<td>139,572</td>
</tr>
<tr>
<td>Sutter</td>
<td>7.0%</td>
<td>94,357</td>
<td>3,218</td>
<td>3.4%</td>
<td>1,275</td>
<td>1.4%</td>
<td>2,077</td>
<td>2.2%</td>
<td>6,570</td>
<td>7,062</td>
<td>7,739</td>
</tr>
<tr>
<td>Yolo</td>
<td>4.9%</td>
<td>211,123</td>
<td>5,281</td>
<td>2.5%</td>
<td>1,496</td>
<td>0.7%</td>
<td>3,653</td>
<td>1.7%</td>
<td>10,430</td>
<td>11,314</td>
<td>12,929</td>
</tr>
<tr>
<td>Yuba</td>
<td>8.2%</td>
<td>72,464</td>
<td>3,664</td>
<td>5.1%</td>
<td>924</td>
<td>1.3%</td>
<td>1,336</td>
<td>1.8%</td>
<td>5,924</td>
<td>6,465</td>
<td>7,089</td>
</tr>
</tbody>
</table>

Sources: American Community Survey 2017 5 year estimates
DOF Population Projections

"severely disabled" - this is the percentage of the population that has "independent living" and "self care" disabilities according to ACS 2017 5 yr est.
The % of 'severely disabled' persons was held constant at the year 2017 level and was used to project the 'severely disabled' population out to 2040.
<table>
<thead>
<tr>
<th>County</th>
<th>Population that is 65 years and over</th>
<th>65+ &amp; Low Income</th>
<th>% of Senior HHLDs 65+ &amp; LI</th>
</tr>
</thead>
<tbody>
<tr>
<td>El Dorado County</td>
<td>34,780</td>
<td>2000</td>
<td>5.8%</td>
</tr>
<tr>
<td>Placer County</td>
<td>67,343</td>
<td>5240</td>
<td>7.8%</td>
</tr>
<tr>
<td>Sacramento County</td>
<td>191,684</td>
<td>19591</td>
<td>10.2%</td>
</tr>
<tr>
<td>Sutter County</td>
<td>13,596</td>
<td>1307</td>
<td>9.6%</td>
</tr>
<tr>
<td>Yolo County</td>
<td>23,974</td>
<td>2045</td>
<td>8.5%</td>
</tr>
<tr>
<td>Yuba County</td>
<td>8,605</td>
<td>955</td>
<td>11.1%</td>
</tr>
</tbody>
</table>

Source: Census ACS 2017 5 year estimate

** The terms poverty and low-income are used
## Low-income population with Disabilities

<table>
<thead>
<tr>
<th></th>
<th>Total Population</th>
<th>Total Pop 65+</th>
<th>Total Pop In Poverty*</th>
<th>Population in Poverty with a Disability</th>
<th>Of Total Pop in Poverty % w/ a Disability</th>
<th>Under 18</th>
<th>18 to 64 years</th>
<th>65 years and over</th>
</tr>
</thead>
<tbody>
<tr>
<td>El Dorado County</td>
<td>183,777</td>
<td>34,780</td>
<td>17,996</td>
<td>5,500</td>
<td>31%</td>
<td>187</td>
<td>2205</td>
<td>1004</td>
</tr>
<tr>
<td>Placer County</td>
<td>372,261</td>
<td>67,343</td>
<td>30,473</td>
<td>8,033</td>
<td>26%</td>
<td>289</td>
<td>2814</td>
<td>2180</td>
</tr>
<tr>
<td>Sacramento County</td>
<td>1,480,422</td>
<td>191,684</td>
<td>246,203</td>
<td>75,391</td>
<td>31%</td>
<td>4,059</td>
<td>28108</td>
<td>10,287</td>
</tr>
<tr>
<td>Sutter County</td>
<td>94,357</td>
<td>13,596</td>
<td>15,805</td>
<td>4,180</td>
<td>26%</td>
<td>325</td>
<td>1385</td>
<td>599</td>
</tr>
<tr>
<td>Yolo County</td>
<td>211,123</td>
<td>23,974</td>
<td>39,686</td>
<td>6,160</td>
<td>21%</td>
<td>310</td>
<td>2906</td>
<td>1072</td>
</tr>
<tr>
<td>Yuba County</td>
<td>72,464</td>
<td>8,605</td>
<td>13,598</td>
<td>6,062</td>
<td>45%</td>
<td>473</td>
<td>2336</td>
<td>502</td>
</tr>
</tbody>
</table>

Source: Census ACS 2017 5 year estimate

*Poverty is defined by the Census Bureau as when the total income for a family or unrelated individual falls below the federal poverty threshold - then the family or unrelated individual is classified as being "below the poverty level" or "in poverty."

<table>
<thead>
<tr>
<th>Size of Family</th>
<th>Federal Poverty Level 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$12,060</td>
</tr>
<tr>
<td>2</td>
<td>$16,240</td>
</tr>
<tr>
<td>3</td>
<td>$20,420</td>
</tr>
<tr>
<td>4</td>
<td>$24,600</td>
</tr>
<tr>
<td>5</td>
<td>$28,780</td>
</tr>
<tr>
<td>6</td>
<td>$32,960</td>
</tr>
<tr>
<td>7</td>
<td>$37,140</td>
</tr>
<tr>
<td>8</td>
<td>$41,320</td>
</tr>
<tr>
<td>for each add'l +</td>
<td>$4,180</td>
</tr>
<tr>
<td>Poverty Status</td>
<td>El Dorado County, California</td>
</tr>
<tr>
<td>----------------</td>
<td>----------------------------</td>
</tr>
<tr>
<td>Total:</td>
<td>183,777</td>
</tr>
<tr>
<td>Income below poverty level:</td>
<td>17,996</td>
</tr>
<tr>
<td>Child population (under 18)</td>
<td>4,334</td>
</tr>
<tr>
<td>Working age pop (18-64) below the poverty level</td>
<td>11,662</td>
</tr>
<tr>
<td>Seniors (65 and over)</td>
<td>2,000</td>
</tr>
<tr>
<td>Working age below the poverty level as a % of the total population</td>
<td>6.3%</td>
</tr>
<tr>
<td>Child population below the poverty level as % of the total population</td>
<td>2.4%</td>
</tr>
<tr>
<td>Seniors below the poverty level as % of the total population</td>
<td>1.1%</td>
</tr>
<tr>
<td>% of the population in poverty that is children (under 18)</td>
<td>24.1%</td>
</tr>
<tr>
<td>% of the population in poverty that are working age</td>
<td>64.8%</td>
</tr>
<tr>
<td>% of the population in poverty that are seniors</td>
<td>11.1%</td>
</tr>
</tbody>
</table>

U.S. Census Bureau - ACS 2017 5 year estimate
## DMV Licensing by Age

### Table E

<table>
<thead>
<tr>
<th>County</th>
<th>Total Licensees</th>
<th>Total Population 2018</th>
<th>Licensees</th>
<th>Percentage licensed within Total age group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>55-64</td>
<td>65-74</td>
<td>75+</td>
</tr>
<tr>
<td>El Dorado</td>
<td>153,200</td>
<td>31,412</td>
<td>23,821</td>
<td>16,003</td>
</tr>
<tr>
<td>Placer</td>
<td>302,466</td>
<td>52,936</td>
<td>43,707</td>
<td>35,468</td>
</tr>
<tr>
<td>Sacramento</td>
<td>1,049,556</td>
<td>186,671</td>
<td>128,013</td>
<td>88,059</td>
</tr>
<tr>
<td>Sutter</td>
<td>67,501</td>
<td>11,766</td>
<td>8,311</td>
<td>6,564</td>
</tr>
<tr>
<td>Yolo</td>
<td>140,078</td>
<td>22,554</td>
<td>16,497</td>
<td>11,744</td>
</tr>
<tr>
<td>Yuba</td>
<td>49,620</td>
<td>8,885</td>
<td>5,888</td>
<td>3,840</td>
</tr>
</tbody>
</table>

Sources: DOF 2018 Population Estimates
DMV data 2018

Placer and El Dorado Counties have the highest proportions of senior drivers in the SACOG region.
### Vehicle Availability by Age

<table>
<thead>
<tr>
<th>County</th>
<th>Total # of Households</th>
<th>HHLDS w/ No Vehicle</th>
<th>HHLDR 65 years and older</th>
<th>% of the Households with No Vehicle Available</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>% All</td>
</tr>
<tr>
<td>El Dorado County</td>
<td>51,948</td>
<td>3,205</td>
<td>1,582</td>
<td>6.2%</td>
</tr>
<tr>
<td>Placer County</td>
<td>98,153</td>
<td>5,352</td>
<td>3,155</td>
<td>5.5%</td>
</tr>
<tr>
<td>Sacramento County</td>
<td>295,276</td>
<td>38,606</td>
<td>14,431</td>
<td>13.1%</td>
</tr>
<tr>
<td>Sutter County</td>
<td>18,357</td>
<td>2,122</td>
<td>1,019</td>
<td>11.6%</td>
</tr>
<tr>
<td>Yolo County</td>
<td>37,809</td>
<td>5,657</td>
<td>1,775</td>
<td>15.0%</td>
</tr>
<tr>
<td>Yuba County</td>
<td>15,063</td>
<td>1,971</td>
<td>555</td>
<td>13.1%</td>
</tr>
</tbody>
</table>

Source: ACS 2017 5 year estimates
Appendix C
Maps

maps can also be viewed at:

SACRAMENTO AREA COUNCIL OF GOVERNMENTS

RESOLUTION NO. 50 – 2019

APPROVING SACOG PUBLIC TRANSIT AND HUMAN SERVICES
TRANSPORTATION COORDINATED PLAN

WHEREAS, the Sacramento Area Council of Governments (SACOG) is the Metropolitan Planning Organization and the Regional Transportation Planning Agency responsible for transportation planning in the Sacramento region; and

WHEREAS, SACOG is responsible for preparing and adopting the Metropolitan Transportation Plan/Sustainable Communities Strategy (MTP/SCS) and the Metropolitan Transportation Improvement Program (MTIP); and

WHEREAS, SACOG is responsible for developing a coordinated public transit/human services transportation plan that must generally include all regional FTA Section 5310 Enhanced Mobility of Seniors and Individuals with Disabilities projects and strategies; and

WHEREAS, SACOG has reviewed and followed the federal transportation legislation Fixing America’s Surface Transportation Act (FAST Act), the July 11, 2013, and June 6, 2014, Federal Register notices, and FTA Circular C 9070.1G that reflect the FTA required elements of a coordinated plan; and

WHEREAS, SACOG has updated the SACOG Public Transit and Human Services Transportation Coordinated Plan for the six counties it serves including the rural, small urbanized and large urbanized areas; and

WHEREAS, SACOG will submit the updated SACOG Public Transit and Human Services Transportation Coordinated Plan to the appropriate State of California and U.S. Federal agencies;

NOW THEREFORE, BE IT RESOLVED, that SACOG certifies that:

1. SACOG has completed the regional SACOG Public Transit and Human Services Transportation Coordinated Plan as required by the Fixing America’s Surface Transportation Act (FAST Act);

2. FTA 5310 Projects funded will be generally included in the SACOG Public Transit and Human Services Transportation Coordinated Plan;

3. Projects funded will be included in the MTIP; and
4. The projects funded will be consistent with SACOG's MTP/SCS.

PASSED AND ADOPTED, this 15th day of August 2019, by the following vote of the Board of Directors:

AYES: Directors Allard, Ledesma (for Cabaldon), Douglass, Flores, Frost, Gayaldo, Gore, Harris, Jankovitz, Jennings, Joiner, Kennedy, Leahy, Neu, Onderko, Peters, Samayoa, Saragosa, Saylor, Schenirer, Slowey, Spokely, Suen, Tica, Veerkamp, West, Vice Chair Frerichs, and Chair Sander

NOES: None

ABSTAIN: None

ABSENT: Directors Kozlowski, Lozano, and Stallard

__________________________
David Sander
Chair

__________________________
James Corless
Executive Director