

Ride Sharing – Bridging the Digital Divide to Improve Mobility For Seniors and Persons with Disabilities

Section A - Project Description

Accessible, affordable and reliable transportation is a necessity for seniors and younger persons with disabilities who want to remain living independently in the setting of their choosing. Over the past few years, ride sharing applications, available via smart phones, have revolutionized the way people meet their transportation needs. Currently very few older adults utilize Ride Sharing apps and there is no program currently in place that actively promotes the use of Ride Sharing apps to the target populations. Clackamas County Social Services is requesting funding through this grant solicitation for an innovative pilot project that will determine if Ride Sharing apps are a viable alternative for seniors and persons with disabilities who cannot independently meet all of their transportation needs with available personal resources and public services.

The project will be carried out in two phases. Phase One will, through research and focus groups, determine the interest on the part of members of the target populations to using Ride Sharing apps, identify barriers to the use of those applications, and propose strategies to overcome those barriers. Phase Two will launch a small scale ride sharing project in at least two areas in Clackamas County; one rural and one urban. Surveys will be used to determine if the use of Ride Sharing applications increases the ability of members of the target populations to remaining living independently.

The pilot project will answer the following questions.

Phase One

- What technology is currently available that allows for Ride Sharing?
- What are the barriers to using currently available technology by seniors and persons with disabilities?
- Is there additional functionality that needs to be developed to allow for greater participation by seniors and persons with disabilities?
- What is the appropriate role of government and non-profit organizations in Ride Sharing, including the vetting of riders and drivers, providing insurance, and promoting the program?
- How does access to technology and the need for training impact the ability of members of the target populations to use Ride Sharing apps?
- How to ensure the safety of Ride Share users?

Phase Two

- Does the use of Ride Sharing apps increase mobility options for the target population?
- Do project participants report an improvement in their perceived ability to remain living independently?
- Do project participants report an improvement in their quality of life?
- Do project participants report an increase in the ability to use technology?

- What financial support is needed to support a Ride Sharing program?
- Does the use of Ride Sharing apps create greater community connections?

In Phase One, the Project Coordinator will conduct research and hold focus group with rural and urban dwelling seniors and persons with disabilities to determine the answers to the Phase One questions listed above. The work will be guided by a project steering committee comprised of seniors, persons with disabilities, technology experts, and people working in government and the non-profit sector. The committee will include both urban and rural participants.

The information gathered and analyzed in phase one will inform the policies and procedures that will allow for the launch of two Ride Sharing projects. One project will take place in Lake Oswego. The rural area to be served has not yet been identified. Clackamas County will work with the network of 10 Senior Centers operating in the County to identify a rural area that is interested in participating in the pilot project. Marketing and outreach material will be created. A robust evaluation process will be developed that will answer the Phase Two questions. It is estimated that 50 individuals will participate in the pilot project, either as riders or drivers. All riders will be members of the target populations. Drivers may be members of the wider community, including adults younger than age 60 without a disability.

Project Significance

New assistive technology, including ride sharing applications available on smart phones, and computers, offers the possibility that seniors and persons with disabilities can take more control of their transportation at a very low cost while at the same time facilitating stronger connections between community members.

There are several barriers to seniors and persons utilizing currently available technology. These include safety concerns, lack of access to technology, and the need for training. This pilot project will identify barriers to the use of ride sharing applications, investigate opportunities to overcome these barriers, and implement solutions in order to increase transportation options for members of the target populations.

Transportation is an essential need in our society and allows individuals to remain in their own homes and communities while retaining access to essential services and supports. Vulnerable populations experience unique barriers to meeting their transportation needs.

A recent report from Transportation for America titled “Aging in Place: Stuck without Options” shows that as we age and lose the ability to drive, safe transportation options are hard to come by. By age 75, 31% of American seniors no longer drive and must find alternatives. For those living in rural areas and those without strong support networks, social isolation and the inability to meet basic needs is a common outcome of lack of mobility.

Like much of Oregon, Clackamas County is a large, diverse county with limited transportation options.

A comprehensive Senior Needs Assessment was conducted in 2010. The assessment included a county-wide phone survey conducted by Portland State University, numerous one-on-one interviews, and community asset mapping projects in six communities. Throughout the assessment process, a lack of transportation options was noted as a significant barrier. When faced with the inability to drive oneself, older residents encounter less than optimal or no viable transportation choices, which makes aging in place more difficult in Clackamas County.

- The countywide survey found that 42 percent of respondents did not think public transportation was adequate.
- The route maps created as part of the community asset mapping process reflected a strong dependence on a personal automobile to access the resources within the community and across the County.
- When asked “What would you like to do but are unable to do?” interviewees overwhelmingly cited transportation as an issue. Responses included “cultural events happen at night when I don't drive”, “lack of accessible places to park”, “no transportation to Clackamas Aquatic center”, “anything that requires evening transportation or a companion”, “I don't travel due to the expense”, “can't take public transportation”, “would like to be in blind bowlers league but need to practice”, “transportation to rifle range”, and “get to the store”.

Currently in Clackamas County there is a patchwork of transportation programs available to meet the needs of seniors and persons with disabilities. This includes paratransit services offered by transportation systems, and van and volunteer transportation programs operated by senior centers and Clackamas County Social Services. Even with five transit systems operating in the county, over 28% of the county's population lives more than ¼ of a mile from a fixed route bus route, making it very difficult for seniors and people with disabilities to access public transit. Some barriers to the use of the current systems include:

- Public transit is not available throughout Clackamas County.
- Hours and locations of public transit make it less accessible for many individuals
- Other transportation resources that are no or low cost are very limited and only available to certain groups.
- Programs such as the Transportation Reaching People (TRP) program do not offer weekend or evening service.
- Many services require scheduling rides days, if not weeks, in advance.
- Financial constraints on service providers limit the ability to meet the growing need.

Like Oregon as whole, Clackamas County is experiencing a demographic imperative to address issues of aging in place. Clackamas County contains a mixture of both rural and urban land and is a large county encompassing 1,868 square miles. The county's population is estimated at 375,992 based on the 2010 US Census and has grown with an increase in population of 11.1% between 2000 and 2010. While the general population has increased 11% between 2000 and 2010, the population of individuals aged 60+ increased more than 50% during the same time period. According to the 2012 American Community Survey, 9.3% of the population aged 18 to 64 have a disability. Approximately half of the county's

residents live in unincorporated areas, including rural areas. Clackamas County has a diverse population, with approximately 13% of the residents reporting as Hispanic/Latino in ethnicity. Residents aged 65+ number 51,231 (13% of total population).

Maintaining mobility as our communities age is vitally important. Seniors and persons with disabilities who do not have access to transportation are more at risk of losing independence, have poorer health outcomes, and can lose critical social connections that help maintain emotional well being. Special Needs transportation programs in Clackamas County do not meet the needs of all seniors and younger persons with disabilities, and are not funded to meet the current demand. Currently available resources will be stretched even more as the population ages. By creating a system where seniors and younger persons with disabilities can access ride sharing opportunities, transportation needs can be met in a way that preserves independence and reserves the systems operated by transit systems, non-profits and government for those individuals who need a higher level of assistance.

Numbers to be served by the pilot project

An estimated 50 individuals will participate in Phase Two of the pilot project. This includes both riders and drivers.

Measurable Outcomes

The primary objective of this pilot project is to help individuals remain in their own home or community of their choosing by increasing their transportation options. Outcomes will be measured by questionnaires administered before, during and after program participants engage with the pilot.

- 50% of riders will report an improvement in their perceived ability to remain living independently
- 50% of project participants will report an improvement in their understanding on how to use technology
- 75% of riders will report an improvement in their ability to meet their transportation needs
- 75% of riders and drivers will report a greater sense of community
- 50% of riders will report an improvement in their quality of life.

The specific strategies to achieve the measurable outcomes listed above will be determined in Phase One of the project. Phase One will answer the following questions:

- What technology is currently available that allows for Ride Sharing and which of these technologies is best suited to meet the needs of the target population?
- What training is required to allow members of the target population to use Ride Sharing technology?
- What are the access issues that need to be addressed, including the financial costs of purchasing technology and ongoing monthly charges?
- What systems are needed to promote the safe use of Ride Sharing apps.

- What is the appropriate role of government and non-profit organizations in Ride Sharing, including the vetting of riders and drivers, providing insurance, and promoting the program?
- How does access to technology and the need for training impact the ability of members of the target populations to use Ride Sharing apps?
- How to ensure the safety of Ride Share users?

Replicating the Pilot in other areas

This project is highly replicable and scalable. The project will investigate barriers in both urban and rural communities and will utilize technology that is readily available

Section B – Proposer Capacity and Data Collection

Clackamas County Social Services is the Area Agency on Aging for Clackamas County and has been providing services to seniors and persons with disabilities since 1985. Services provided include Aging and Disability Resource Center (ADRC), Oregon Project Independence (OPI), Options Counseling for individuals seeking information about Long Term Services and Supports, Care Transitions to prevent hospital readmissions, and Gatekeeper services. The agency’s Volunteer Connection provides opportunities for county residents to give back and include RSVP, Transportation Reaching People, Family Caregiver Support, Senior Health Insurance Benefits Assistance (SHIBA), and Money Management.

The agency is committed to equitable access for all populations. Examples include:

- ADRC employees speak Spanish.
- Recent targeted outreach to the Russian community has increased the number of Russians calling for Family Caregiver Support services.
- Agency staff participate in LGBTQ outreach efforts and recently staffed an information table at the Pride Parade.
- Interpreters and the language line are available to all staff so diverse populations can access services when needed.
- Visual cues, including a welcoming sign in three languages in the main lobby, and “Safe Space” signs in all public areas, are two examples of how the agency proactively communicates its value of inclusivity.
- The agency has long standing participation in HINT, the Hispanic Inter-agency Networking Team. Spanish and Russian speakers are employed in the Energy Assistance program

Community Partners

The proposal includes the participation of two Senior Centers, one in Lake Oswego and one as yet to be determined in the rural part of Clackamas County. Mary’s Woods, a Continuing Care Retirement Community will be hosting focus groups and will be contributing the time of an Encore Career volunteer with expertise in the technology sector. Members from the Disability Services Advisory Council of DHS/APD will participate on the project steering committee, as will a representative from Ride Connection, a regional provider of Special Needs Transportation. The County’s Public Health Division will contribute in-kind resources to perform the required external evaluation. A member of the County’s Communication office will assist with the development of outreach and marketing materials. As the pilot rolls out, additional partners will be recruited, including faith and service groups whose members are interested in providing rides.

Capacity to Collect Data

Clackamas County Social Services receives funding from over 30 sources, including state, federal, county and foundations. Each funder has unique requirements for data collection and reporting that agency

staff successfully meet. A number of databases are utilized to collect data, including RTZ for ADRC activities, Service Point for homeless programs, and Oregon Access.

One example of the agency's ability to collect and report data is the Homeless Management Information System (HMIS). HMIS is a locally administered data system used to record and analyze client data across projects for individuals and families who are homeless or at risk of becoming homeless. Data quality standards are set nationally by the Department of Housing and Urban Development (HUD) and are monitored regularly through a local Data Quality and Training Plan. For the reporting period of October 2013 through May of 2014, Clackamas County Social Services had an HMIS data quality and accuracy rate of 99.67%.

Definition and measurement of improved quality

The primary objective of this pilot project is to help individuals remain in their own home or community of their choosing by increasing their transportation options. Outcomes will be measured by questionnaires administered before, during and after program participants engage with the pilot.

External entity to provide independent evaluation

The County Public Health Department will be providing the services of an epidemiologist to conduct the evaluation component.

Section C – Workplan and Timeline

The outcome of Phase One is to determine the interest on the part of members of the target populations in using Ride Sharing apps, to identify barriers to the use of those applications and propose strategies to overcome those barriers. This will be accomplished by hiring staff, establishing the project steering committee, and conducting research and holding focus groups.

Activity (Responsible Party)	August 2014	Sept 2014	Oct 2014	Nov 2014	Dec 2014	Jan 2015
Hire Project Coordinator and provide oversight (Director - Clackamas County Social Services)	Develop job description Post job announcement	Complete hiring process	Oversight of staff and project progress	Oversight of staff and project progress	Oversight of staff and project progress	Oversight of staff and project progress (This activity will continue through Phase Two)
Establish Project Steering Committee (Director - Clackamas County Social Services and Project Coordinator)	Members identified	Regular meetings established	Regular meetings held	Ongoing	Ongoing	Ongoing (This activity will continue through Phase Two)
Answer Phase One questions with research and focus groups (Project Coordinator and Project Steering Committee)		Finalize project parameters	Conduct research and hold focus groups	Conduct research and hold focus groups	Conduct research and hold focus groups	Finalize Phase One recommendations

Phase Two will determine, through the actual experiences of project participants, if the use of Ride Sharing apps increases transportation options and helps individuals to remain living independently.

Activity (Responsible Party)	Feb 2015	March 2015	April – Oct 2015	Nov 2015
Develop processes and procedures identified through research and focus group. (Project Coordinator)	Processes and procedures drafted	Processes and procedures finalized		
Develop evaluation methodology and survey tool (Project Coordinator and Health Dept. Epidemiologist)	Evaluation methodology and survey tool developed			
Develop outreach and marketing materials. (Project Coordinator and County Communication Officer)	Outreach and marketing materials developed Identify opportunities to conduct outreach and recruitment			
Conduct outreach to potential project participants (Project Coordinator)		Outreach begins	Outreach continues until project reaches goal of 50 participants	
Establish two pilot projects (Project Coordinator)	Identify rural area to be served by pilot		Ongoing enrollment of riders and drivers	
Collect baseline and final data (Health Dept. Epidemiologist)			Surveys administered to all project participants upon enrollment and at intervals determined by project evaluator	
Final Report (Project Coordinator)				Final Report submitted to DHS

Section D - Budget

The primary budget line item for the Ride Share Pilot is staffing costs. A .5 FTE Project Coordinator will be hired to perform the majority of the work for the pilot. A materials and services line item is included that will cover mileage reimbursement and the cost of outreach and marketing materials.

In-kind donations include the cost of the evaluator, the development (but not production) of outreach and marketing materials, technology consultation, and supervisory time.

Budget Activity by Fiscal Quarter

A Project Coordinator will be hired in the first fiscal quarter (August of 2014). Costs for staff salaries and mileage will be expended at a regular rate throughout the project, with roughly 1/6 of the expenditures occurring in each of the project’s six fiscal quarters. Expenses for outreach and marketing will occur in fiscal quarters three through five (March 2015 through August 2015).

Grant Funds

Line Item	Description	Budgeted Amount
Staff	.5 FTE Project Coordinator Salary and Fringe	\$38,000
Materials and Services	Mileage	\$1,600
	Outreach and marketing materials	\$2,000
Indirect Charges	The agency Indirect Rate is 22%	\$8,360
Total		\$49,960

In Kind Donations

Line Item	Description	Budget Amount
Supervision	.125 FTE of Agency Director Salary and Fringe	\$12,500
Marketing and Outreach	20 hours of assistance from Communication Specialist valued at \$52/hour	\$1,040
Project Evaluation	50 hours of assistance from Public Health Epidemiologist to perform the Project Evaluation valued at \$49/hour	\$2,450
Technology Consultation	Through Mary’s Woods , assistance from Rob May, retired technology executive	\$5,000
Total		\$40,990

Title	Salary (Annual)	Fringe (annual)
Project Coordinator (.5 FTE)	\$28,000	No fringe costs for .5 FTE

Phase One

Phase One will be accomplished in six months; from August 2014 to January of 2015. Activities that will occur in Phase One include; hiring staff, establishing project steering committee, performing research and hold focus groups. Costs for Phase One include six months of salary for the Project Coordinator, plus mileage expenses. Total expenditure for Phase One are \$17,985.

Phase Two

Phase Two will be completed between February of 2015 and November of 2015. Activities that will occur in Phase Two include: developing process and procedures for the pilot project, developing the evaluation methodology, developing and distributing outreach and marketing material, operating two pilot projects, collecting and analyzing data, and completing the final report. Costs for Phase Two include salary and fringe for the project coordinator, mileage expenses, and marketing expenses. Total expenditure for Phase Two are \$31,975.