CTC EVALUATION WORKBOOK

Florida Commission for the



Transportation Disadvantaged

CTC BEING REVIEWED: BROWARD COUNTY TRANSIT

COUNTY: BROWARD

ADDRESS: 1 N. UNIVERSITY DRIVE, 3100-A, PLANTATION, FL 33324

CONTACT: PAUL STROBIS PHONE: 954-357-8321

REVIEW PERIOD: FY 2019-2020REVIEW DATES 03/01/21-06/30/21

PERSON CONDUCTING THE REVIEW: MPO STAFF

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LCB EVALUATION WORKBOOK

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EVALUATION INFORMATION

An LCB review will consist of, but is not limited to the following pages:

1	Cover Page
4 - 5	Entrance Interview Questions
	Chapter 427.0155 (3) Review the CTC monitoring of
6	contracted operators
	Chapter 427.0155 (4) Review TDSP to determine
9	utilization of school buses and public transportation
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Notes to remember:

- The CTC should not conduct the evaluation or surveys. If the CTC is also the PA, the PA should contract with an outside source to assist the LCB during the review process.
- Attach a copy of the Annual QA Self Certification.

ENTRANCE INTERVIEW QUESTIONS

INTRO	DUCT	ON AND BRIEFING:					
		ibe the evaluation process ation to CTD).	(LCB	evaluates the	е СТ	C and forwards	a copy of the
		eviews the CTC once ever cal coordinator.	y year	to evaluate t	the o	perations and p	erformance of
	LCB v	vill be reviewing the following	ng area	ıs:			
		Chapter 427, Rules 41-2 a Following up on the Statu Ombudsman program. Monitoring of contractors Surveying riders/beneficia	ıs Rep	ort from last	t yea	r and calls rece	eived from the
		vill issue a Review Report w rking days after review has			omm	endations to CT	C no later than
		the CTC has received the F CB within 30 working days.	Review	Report, the	СТС	will submit a St	tatus Report to
		an update of Commission I if needed.	evel ac	ctivities (last	mee	ting update and	d next meeting
Using	THE A	NNUAL OPERATING REPORT ((AOR),	COMPILE THIS	S INF	ORMATION:	
1.	OPEF	RATING ENVIRONMENT:		RURAL	X	URBAN	
2.	ORGA	ANIZATION TYPE:	X	PRIVATE-I PRIVATE I GOVERNI TRANSPO	NON MEN	-PROFIT	,
3.	NETV	VORK TYPE:	□ X	SOLE PRO PARTIAL E COMPLET	BRO		

- 4. NAME THE OPERATORS THAT YOUR COMPANY HAS CONTRACTS WITH: ARC Broward, Ann Storck Center, First Transit, , Miramar Senior Services, NE Focal Point, NW Focal Point, Transportation America, United Community Options.
- 5. NAME THE GROUPS THAT YOUR COMPANY HAS COORDINATION CONTRACTS WITH:

Agency for Community Treatment Services (ACTS), ARC Broward, Archways, Ann Storck Center, BARC Housing, Broward Children's Center, Cerebral Palsy Adult Home, Inc., Christina G. Smith Community Mental Health Foundation, City of Deerfield Beach –

Northeast Focal Point (NEFP), City of Lauderhill, City of Margate – Northwest Focal Point (NWFP), City of Miramar. City of North Lauderdale, City of Pembroke Pines – Southwest Focal Pont (SWFP), City of Tamarac, Douglas Gardens North, Friendship Circle, Gulf Coast Jewish Family and Community Services Center, Henderson Behavioral Health, Lighthouse of Broward, Memorial Hospital System- South Broward Hospital District, Sunrise Community Center, United Community Options, Woodhouse, Inc.

6. NAME THE ORGANIZATIONS AND AGENCIES THAT PURCHASE SERVICE FROM THE CTC AND THE PERCENTAGE OF TRIPS EACH REPRESENTS? NA (Recent APR information may be used)

Name of Agency	% of Trips	Name of Contact	Telephone Number

7. REVIEW AND DISCUSS TD HELPLINE CALLS:

OMBUDSMAN/TD	Number of calls	Closed Cases	Unsolved Cases
Cost	0	0	0
Medicaid NA	0	0	0
Quality of Service	0	0	0
Service Availability	0	0	0
Toll Permit	0	0	0
Other	0	0	0

COMPLIANCE WITH CHAPTER 427, F.S.

Review the CTC monitoring of its transportation operator contracts to ensure compliance with 427.0155(3), F.S.

"Review all transportation operator contracts annually." See TDSP, Pages 256-304; Appendix H

WHAT TYPE OF MONITORING DOES THE CTC PERFORM ON ITS OPERATOR(S) AND HOW OFTEN IS IT CONDUCTED?

- Contractors are required to provide CTC with updated Driver Rosters by the twentieth (20) calendar day of each month. Roster shall indicate driver's name, date of hire, training dates, last Drug and Alcohol test, Motor Vehicle Record (MVR) review date and date of latest criminal record check. Contractors are required to maintain updated Driver Rosters in the Computerized Trip Management System (CTMS)
- 2. Contractors must provide CTC with evidence all drivers have completed the training program offered by CTC prior to any driver providing service and must attend a refresher class or repeat new driver training a minimum of once every two (2) years. Classes include Defensive Driver, Passenger Assistance Technique, Responding to Client Incidents, SUNsational Service and other training required by Provider.
- 3. Training information shall be included in the monthly operating summary package. Additionally, drivers are required to participate in a driver training program developed by CTC. Contractors must require all personnel providing transportation to possess the following, which shall be filed with CTC prior to personnel providing paratransit service: current, valid Broward County Chauffeur's Registration in accordance with requirements of Chapter 22-1/2, Broward County Code of Ordinances. Provider ADEPT driver roster is submitted weekly to Broward County Risk Management department. They verify daily for driver license violations which would require driver removal from operating a vehicle. Driver Training Program shall include a minimum of eighty (80) hours of training prior to driving a service vehicle. This shall include the following: Passenger Assistance Technique; Defensive Driver; Responding to Client Incidents; Vehicle breakdown, Vehicle and/or Passenger Accidents; Vehicle Orientation; Trip Scheduling; and biannual refresher classes.
- 4. CTC requests MVRs for Contractor's drivers on a periodic basis. When a report shows evidence of violations, CTC will promptly notify Contractor and Taxi Section of Broward County's Division of Consumer Affairs. Contractor must have procedures to periodically review drivers' MVRs. Compliance is monitored by CTC staff. Per Contract "County may request and review State of Florida MVRs for Contractor's drivers on a monthly basis".
- 5. Training program includes methods for measuring effectiveness of training in developing skill and improving performance. Methods shall be based on performance indicators which measure proficiency and not solely on Contractor meeting minimum training hours required. Such measurement procedure shall be provided to CTC upon request.
- 6. CTC performs annual evaluations of Contractors ensuring compliance with the System Safety Program Plan, locally approved standards, FCTD and FDOT standards, annual operating data and insurance requirements.

- 7. CTC's direct involvement in day-to-day operations of service includes but is not limited to: on-street monitoring of drivers and vehicles, equipment and customer service inspections, contract compliance and quality control. Contractors cooperate fully with the CTC monitoring programs. Contractors provide full access to all driver records at operating facilities. Contractors are required to make available: work station, desk, telephone and chair if so requested.
- 8. CTC's on-street monitoring shall include but is not limited to: on-time performance, knowledge of service area and routing, driver assistance, manifest accuracy and completeness, driver and vehicle appearance, wheelchair lift condition and operation, wheelchair securement systems and use, safety equipment, driving habits and compliance with Florida Motor Vehicle Regulations. Language from Contractor Service Agreement (See page 6, #3).
- 9. Contractors provide CTC with service data via summary reports generated by CTMS and a bi-weekly invoice for each component of service for previous bi-weekly (Monday through Sunday) period. This information shall include but is not limited to the following: number of one-way passenger trips by type of trip; total hours of vehicle service; copies of daily reports for driver activity or other daily reports showing starting and ending times; starting and ending mileage for each vehicle; copies of trip tickets, log sheets or driver manifests; weekly reimbursement charges for services and denied trip requests.
- 10.CTC operates with zero trip denial rates. If one provider is unable to perform a requested trip due to capacity constraints another provider performs the trip.
- 11. Pursuant to Federal Transit Administration's (FTA) standards for precision, accuracy and accountability, CTC is required to report data to the National Transit Database (Section 15 data). As required by FTA, or CTC, Contractors shall collect Section 15 data and other "service supplied" information or "service consumed" information, as terms are defined in Section 15 of FTA regulations. Contractors are responsible for collection of financial and operational data, including on-board operational and passenger-related data and for transmittal to CTC on CTC approved forms as follows: operational and passenger-related data shall be submitted to CTC no less than weekly, financial data shall be submitted to CTC no less than quarterly and designated "service supplied" data shall be submitted to CTC thirty (30) days prior to termination of CTC's fiscal year. All source documents for Section 15 filings shall be subject to audit and shall be maintained by Contractors for five (5) years following final payment under their agreement with CTC.
- 12. Contractors must provide written monthly reports to CTC by the twentieth (20th) day of the month following the month of service. All required information shall be collected and reported individually for each funding component of service. Reports shall be submitted on a form developed by Contractor and approved by CTC and shall include, but not be limited to the following:
 - Brief Narrative: Brief narrative highlighting month's activities, unusual events, trends and other noteworthy observations.
 - Ridership: Number of one-way passenger trips, PCAs and Companions on a day-by-

day basis for each funding and fare entity and category.

- Miles and Hours: Total hours of service and vehicle miles on a day-by-day basis.
- Cost of Service: Total service revenue based upon contracted rates, collected fares and net revenue to provide service (total revenue less imputed fares).
- Service Quality Measures: On-time performance data, trips completed, missed trips and trip denials with an explanation.
- Efficiency Measures: Appropriate measures to include passengers per mile, hour or vehicle trip.
- Fleet Data: Updated fleet listings and status of all vehicles.
- Other: Accident/incident reports/briefs/findings, training activities/certifications, including sensitivity training and education, key personnel changes and suggested improvements.
- 13. All vehicles, wheelchair lifts or ramps and wheelchair securement devices are inspected annually by CTC staff. All vehicles must be approved, inspected and display an inspection sticker issued by CTC prior to providing service. Complaints received concerning any vehicle or its equipment, at CTC's discretion, may require vehicle to report to CTC's facility. If the complaint is related to safety issues, vehicle must report to the CTC immediately. Any vehicle found in violation of any contractual standard must be removed from service until violation is remedied.
- 14. CTC reserves the right through its agreements with Contractors, in its sole discretion, at any time, to inspect vehicles and maintenance facilities during normal working hours and to review Contractors' maintenance records.
- 15. Day-to-day monitoring is also conducted through CTC's Complaint Procedure. All client complaints shall be referred to CTC's Paratransit Customer Service. All complaints are entered into CTMS. Complaint will be forwarded to Contractor for written or electronic response. Contractor's responses shall be made within three (3) business days of receipt of complaint. Complaints of more serious nature such as injury, driver misconduct and client safety shall be responded to by the end of that business day. Complaints are tallied each month, indicating total number of complaints and type of complaints, for each Contractor. The complaint standard is established at 0.2% of trips delivered in a calendar month.

16. CTC works closely with CTD's Ombudsman I	Progra	am to re	solve	all servi	ce comp	laints
and inquiries. CTC investigates each item as	s desc	cribed a	bove (see #15), conta	cts all
concerned parties and sends CTD's Ombuds	man F	Program	a repo	ort on the	e resolut	ion of
the complaint/inquiry.						
Is a written report issued to the operator?	X	Yes		Nο		

If NO, how are the contractors notified of the results of the monitoring?

WHAT TYPE OF MONITORING DOES THE CTC PERFORM ON ITS COORDINATION CONTRACTORS AND HOW OFTEN IS IT CONDUCTED?

- Insurance Certificates are monitored and updated annually to ensure compliance with State and Local standards.
- Random site visits.
- Random vehicle inspections.
- Review of Annual Operating Report data.

Is a written report issued?	X	Yes		No	
If NO, how are the contractors	notified	d of the	results	of the	monitoring?

WHAT ACTION IS TAKEN IF A CONTRACTOR RECEIVES AN UNFAVORABLE REPORT?

Drivers and vehicles may be removed from service and/or termination of Coordination Agreement.

IS THE CTC IN COMPLIANCE WITH THIS SECTION? X Yes

No

ASK TO SEE DOCUMENTATION OF MONITORING REPORTS. COMPLIANCE WITH CHAPTER 427, F.S.

Review the TDSP to determine the utilization of school buses and public transportation services [Chapter 427.0155(4)]

"Approve and coordinate the utilization of school bus and public transportation services in accordance with the TDSP."

HOW IS THE CTC USING SCHOOL BUSES IN THE COORDINATED SYSTEM? N/A

School bus joint use program is not used in Broward County. Expense of liability insurance is a major concern raised by the School Board. In addition, lack of seat belts and air conditioning on school buses is a problem for TOPS clients. However, there is an agreement between Broward County Transit (BCT) and the School Board to provide emergency transportation services for residents to designated shelters in the event of a hurricane or other natural disaster. School Board services could be used for backup for assisted living facilities, mobile home parks and other congregate living sites.

Rule 41-2.012(5)(b): "As part of the Coordinator's performance, the local Coordinating Board shall also set an annual percentage goal increase for the number of trips provided within the system for ridership on public transit, where applicable. In areas where the public transit is not being utilized, the local Coordinating Board shall set an annual percentage of the number of trips to be provided on public transit."

HOW IS THE CTC USING PUBLIC TRANSPORTATION SERVICES IN THE COORDINATED SYSTEM?

BCT is dedicated to improving its fixed-route bus system on an ongoing basis and has completed the following improvements to enhance accessibility:

 Currently 3,851 bus stops are ADA compliant (280 bus stops cannot meet ADA requirements due to space/easement limitations) out of 4,581 bus stops which may be

- ADA accessible. There are ADA accessible bus stops on all routes. All bus drivers provide assistance upon request.
- All buses are equipped with voice annunciation systems which provide on-board automatic voice announcements in English, Spanish and Creole. They announce bus stops, major transfer points and safety advisories.
- All signage, both inside buses and at bus stops, complies with ADA regulations.

Clients requesting transportation services are directed to fixed-route service provided by BCT. Those unable to use fixed-route service are encouraged to apply for TOPS! paratransit service. Disabled clients who can use fixed-route bus service for some trips are granted ADA/TD conditional eligibility and use paratransit service only for trips where bus service is not accessible or navigable.

To help clients navigate fixed-route bus service, Paratransit Services offers a free Travel Training Program. A professional instructor provides personal and group lessons to teach riders how to use County buses. Paratransit eligible riders may call 954-357-8405 and make an appointment.

BCT provides service to 428 square miles within Broward County. BCT fixed-route buses connect with Palm Beach and Miami-Dade transit systems and Tri-Rail. BCT's fleet has 412 fixed-route buses (all BCT buses are wheelchair accessible and our bus operators provide assistance upon request) providing service on 42 weekday routes and 70 community buses operated in partnership with 18 municipalities. BCT transports 21.2 million passengers annually (82,768 daily) with an annual service mileage of 14.6 million miles. There are 42 BCT Routes and 50 Community Shuttle Routes Monday-Friday. 33 BCT Routes and 19 Community Bus Routes provide service on Saturdays and 32 BCT Routes and 6 Community Bus Routes provide service on Sundays. There are 4,581 designated bus stops and 976 bus stops have shelters with 75-100 shelters planned for in 2021.

BCT provides service into Miami-Dade and Palm Beach Counties.

Fixed-route service into Palm Beach County includes Route 19 to Sandalfoot and Route 10 to Mizner Park.

Fixed-route service into Miami-Dade County includes Route 18, 441 Breeze and University Breeze to Golden Glades; Route 2, 207th Street and University Drive; and Route 1, 28 and US 1 Breeze to Aventura Mall and 95 & 595 Express Buses from various Park & Rides to downtown Miami.

BCT provides free Wi-Fi on the 441 Breeze, US 1 Breeze, University Drive Breeze, Broward Breeze, all 6 express routes and the Broward Central Terminal. BCT operates 53 40' hybrid buses, 23 articulated diesel buses, 19 hybrid articulated buses and 49 MCI Over the Road Coaches.

Transit Technology

Computer Aided Dispatch/Automatic Vehicle Locator (CAD/AVL)

This computerized bus tracking technology locates buses in service. It allows real time monitoring of bus movements, better control of bus headway, closer schedule adherence

tracking and ability to direct maintenance crews faster in the event of vehicle breakdown or loss of communication. This technology allows BCT to improve dispatch efficiency and reliability of bus service. In addition, extensive information is collected for planning purposes.

Status: CAD/AVL uses cellular communications to provide frequent location reports from the bus and provides more reliable voice communications. CAD/AVL also allows real-time bus tracking information to be shared via website, mobile application, and passenger advisory signs located at bus stops and terminals. BCT is currently installing a new CAD/AVL system in fixed-route and community busses.

Automatic Passenger Counters (APC)

APCs count passengers when they board and exit buses. This technology enables BCT to develop or refine bus schedules and collect information for planning purposes. APCs reduce the cost of collecting ridership information. It increases the amount and quality of information obtained and permits continuous sampling of stop-by-stop ridership. APCs can be used to meet National Transit Database data reporting requirements for tracking ridership data, improving system on-time performance and to maximize operational efficiencies.

Status: BCT is exploring options to replace its existing Automatic Passenger Counter (APC) system with newer technology that will result in greater data quality and reliability. A new APC system will interface with the new CAD/AVL system currently being installed.

Real Time Transit Information

This technology provides better customer service by disseminating timely and accurate service information about projected bus arrival and departure times, disruptions and delays, transfers and other transportation services at select locations. It also provides customers other travel related information: date and time, transportation related security information, updates during emergencies and public service announcements. Access to information is provided through media including Passenger Advisory Signs (PAS), smart phones, mobile devices, internet, and dynamic message signs strategically located at bus shelters, transit centers, major office buildings and shopping centers. Riders use real time information to choose how they travel (bus, car or rail), which route and when. This technology ties into BCT's primary function – to give the best customer service by helping travelers make efficient use of time while waiting for a bus. Knowing when a bus will arrive or depart helps reduce traveler anxiety.

Status: The CAD/AVL system enables BCT to disseminate and provide bus arrival and departure times, delays and other traveler related information to provide improved customer service. CAD/AVL project scope includes PASs at three (3) major transfer locations and real-time information delivered through Interactive Voice Response (IVR), website, email, text messaging and mobile phone apps.

Traffic Signal Priority System (TSP)

TSP is an ITS strategy providing buses preference at traffic signals when they arrive at intersections or under certain conditions. BCT expects this technology to reduce bus delays and maintain schedules with minimum impact on cross street traffic. TSP will improve mobility, reliability and efficiency.

Status: BCT is actively collaborating with its regional partners such as FDOT and Broward MPO, as well as Broward County Traffic Engineering to determine its' potential application and benefits. Transit Division will begin testing this technology with the traffic light system once the CAD/AVL system is fully operational.

TOPS! Paratransit Customers and Fixed Route Service

Eligible conditional status ADA and/or TD Paratransit clients may ride Broward County fixed-route buses free-of-charge without affecting their paratransit eligibility.

All registered Nutrition Paratransit clients may ride Broward County fixed-route buses free-of-charge in lieu of utilizing paratransit service. Free use of fixed-route service will not cancel Nutrition Paratransit eligibility.

Broward County's fixed route service is the easiest and most affordable and economical way to travel throughout Broward County while the express bus service provides free, commuter park and ride locations, and travel along the major interstate highways to Miami on weekdays during morning and afternoon peak travel hours.

MyRide.Broward.org helps customers know when the next three buses will arrive at their location.

Customers needing assistance to plan a trip can call 954-357-8400 and be sure to tell the customer service agent:

- Where customer is (city, major intersection or address)
- Where customer would like to go (destination)
- What days of the week customer wants to travel
- What time of day customer will be traveling

Passengers who prefer online trip planning assistance for travel on BCT buses can log on to Google TransitTM at www.google.com/transit. BCT offers riders online trip planner as an alternative to driving directions. Passengers start by entering the starting and ending destination and expected departure or arrival time. Google TransitTM will provide up to three (3) suggested trip plans featuring trip maps, transfer instructions, and estimated arrival times.

Fares and Passes

New Mobile-Friendly Fareboxes

All BCT buses have been retrofitted with mobile-friendly fareboxes. The new fareboxes make travel easier and more convenient for customers, who are now able to purchase a bus pass using their smartphone. The new fareboxes can process various forms of payments including mobile tickets, smart cards, and cash. Customers will also be able to connect with all South Florida Transportation systems.

BCT Mobile Ticketing App

To purchase a ticket through the mobile ticketing app a customer needs to: 1. Download the Broward County Transit Mobile Ticketing App 2. Purchase ticket on customer's smartphone 3. Scan and ride. View the instructional video https://www.broward.org/BCT/Pages/Mobile-Ticketing-App.aspx

Mobile Ticketing Reduced Fare Pass Registration

In order to purchase reduced fare electronic bus passes in the Mobile Ticketing App, you must visit one of our locations for a Customer Service Agent to create your account.

Mobile Ticketing Registration is available at the following locations:

 Government Center West 1 North University Drive Plantation FL 33324 Second Floor

Hours: Monday - Friday, 9-11AM and 2-4PM

Broward Central Terminal

101 NW 1 Avenue

Fort Lauderdale FL 33301

Hours: Monday - Friday, 8AM - 5PM

Northeast Transit Center

304 Dr. Martin Luther King Jr. Boulevard

Pompano Beach FL 33060

Hours: Monday and Wednesday: 6:30AM - 2:30PM; Friday: 11AM - 5PM

Required Documentation:

Original documentation ONLY (Photocopies will not be accepted)

- Senior Fares (65 and older) Proof of age is required.
- Medicare or Disability Fares Proof of disability is required
 - A valid government issued photo I.D. is also required. All Medicare cards, doctor letters and Government issued photo I.D. cards must be originals.
- **College Bus Pass** Current college photo I.D. card or a current copy of the student's class schedule and a current photo I.D. is required.
- Youth fares (18 years or younger) Proof of age is required.

The BCT Bus Pass is a credit-card size fare card with a magnetic swipe. It is a cost-savings pass for daily, unlimited travel for a specific period of time.

Adult Fares (Ages 19-64)

- One-way Cash Fare \$2
- 3 Day Bus Pass \$12
 Unlimited rides for 3 consecutive days. Starts the first day the card is swiped on the bus.

- 7 Day Bus Pass \$20
 Unlimited rides for 7 consecutive days. Starts the first day the card is swiped on the bus.
- 10 Ride Bus Pass \$20
 Expires after the 10th ride is taken.
- All Day Pass \$5
 Available for purchase on the bus. Unlimited rides all day on BCT fixed routes.
- 31 Day Adult Bus Pass \$70
 Unlimited rides for 31 consecutive days. Starts the first day the card is swiped on the bus.
- Premium Express one-way cash fare \$2.65
- Premium Express 10 Ride Bus Pass \$26.50
- Premium Express 31 Day Bus Pass \$95

Senior Fares (65 and older) Medicare or Disability Fares (proof of disability required)

- One-Way Cash Fare Reduced \$1
- All Day Bus Pass Reduced \$4
- 31 Day Bus Pass Reduced \$40
- Premium Express One-Way Cash Fare Reduced \$1.30

Proof of age is required for a senior fare.

For a BCT Disabled Reduced Fare Photo I.D. Card, proof of disability is required with a Medicare card or a dated letter from a doctor (on Doctor's letterhead) stating 50 percent or more permanent disability or a Social Security Award Letter (letter must have the wording 'disabled individual'). A valid government issued photo I.D. is also required. All Medicare cards, doctor letters and Government issued photo I.D. cards must be originals. No copies will be accepted.

Youth Fares (18 years or younger)

- One-Way Cash Fare Reduced \$1
- All Day Bus Pass Reduced \$4
- 31 Day Bus Pass Reduced \$40
- Premium Express One-Way Cash Fare Reduced \$1.30

All bus passes are not exchangeable, refundable or transferable. Damaged cards are invalid. Lost, stolen or damaged cards will NOT be replaced by BCT.

College Bus Pass

• 31 Day College Bus Pass \$50

To purchase this pass, a current college photo I.D. card or a current copy of the student's class schedule and a current photo I.D. is required. The College Student bus pass is only available for sale at the Broward County Main Library (MN), North Regional/BC Library (NR), South Regional/BC Library (SR), Miramar Library (MI), Northwest Regional Library (NO), Tamarac Branch Library (TA), Alvin Sherman Library located at Nova Southeastern University, on some college campuses, and at the Central Bus Terminal and Northeast Transit Center.

All bus passes are not exchangeable, refundable or transferable. Damaged cards are invalid. Lost, stolen or damaged cards will NOT be replaced by BCT.

BCT partners with Broward County Homeless Initiative Partnership Administration to provide discounted bus passes, (50%), to agencies in Broward County serving homeless individuals. County Human Services provides BCT a list of agencies eligible to purchase discounted passes and is not a grant.

Transfers between regular BCT bus service and BCT Express bus service

Passengers using any BCT bus pass and transferring from a regular BCT route to an Express bus route, must pay a \$1.00 upgrade fee. Passengers with a Premium bus pass do not have to pay the \$1.00 upgrade fee. Passengers paying with cash, on a regular BCT bus route, will not be able to transfer to an Express bus route without paying the full premium fare when boarding the Express bus. Passengers using an All-Day bus pass will be required to pay the \$1.00 upgrade fee when boarding Express buses.

Transfers from BCT to other South Florida Transit Systems

When boarding a BCT bus, passenger pays the appropriate BCT fare and may request a transfer from the bus operator if transferring to Miami-Dade Transit (MDT), Palm Tran or Tri-Rail.

Transfers to BCT to other South Florida Transit Systems

When transferring from MDT, Palm Tran and Tri-Rail to BCT regular fixed-route bus service, passenger pays \$.50 with a transfer issued by MDT or Palm Tran and proof of fare payment such as Easy Card and receipt issued by Tri-Rail. Tri-Rail passengers boarding BCT at any locations other than at a Tri-Rail station will be required to pay the full fare.

Transfers between other South Florida Transit Systems and BCT Premium Express bus service

Transfers to MDT or Tri-Rail from Premium Express Service, a transfer is issued and passenger must pay appropriate MDT or Tri-Rail fare. Transfer from MDT or Tri-Rail to Premium Express Service, a \$.50 transfer fee is required with the appropriate transfer from MDT or Tri-Rail. The Premium Express Service does not connect with Palm Tran. The Easy Card issued by MDT and Tri-Rail is not accepted as payment on any BCT bus.

Upgrade Transfer Policy

From BCT local to BCT Express: BCT bus pass plus \$1 upgrade, pertains to holders of all BCT passes: All Day, 3 Day, 7 Day, 10 Ride, Adult 31 Day Regular, Adult 31 Day Senior, Disabled/Medicare, Youth and College Student Pass.

Bus Pass Purchase Online

Bus passengers and authorized vendors can purchase bus passes online after creating an "Access Broward" account. Visit www.broward.org/bct and click on "Fares," then select "Bus Pass Purchase." Broward County Transit (BCT) bus passes can be ordered online by making an electronic payment. Transit riders can order only 10-Ride, 7-Day, 31-Day Adult, 10-Ride Premium and 31-Day Premium bus passes. Reduced fare bus passes (Youth/Senior/Disabled/Medicare/College Student) must be purchased in person at the main terminal or authorized vendor locations as valid I.D. is required for age, student status and/or disability verification. Authorized bus pass vendors are able to purchase all bus passes online with the exception of the All-Day bus pass which can only be purchased onboard the bus.

When an online purchase is made, the customer will be sent an e-mail confirming the order. Standard shipping via the U.S. Postal Service (USPS) is free. Authorized bus pass vendors have the option of bus passes being shipped for free by USPS or by secure delivery for a graduated rate.

Online orders are usually processed within three business days. For orders shipped within the U.S., please allow 7-10 business days to receive your bus pass.

Orders may be placed 24-hours-a-day, seven-days-a-week; however, orders placed after 2:00 p.m. on Friday, weekends or holidays will be considered received the following business day and will usually be processed within three business days.

Online transaction information is processed using a 128-bit "Secure Socket Layer" (SSL) certificate. This protection makes it extremely difficult – if not impossible – for anyone to intercept personal or credit card information.

All online bus pass purchases are final; bus passes cannot be exchanged or refunded. BCT does not assume responsibility or liability for bus passes that are lost during shipping. Under Florida law, e-mail addresses are public records. If customers do not want their account registered email addresses released in response to a public records request, they should not register to purchase bus passes online.

BCT's Customer Relations and Communications Section develops and implements marketing, advertising and public relations programs to provide the public with information about current, new and enhanced bus service, special projects and events and benefits of riding public transportation. This section responds to a myriad of client inquiries and provides personal trip planning through the client information telephone center and Google Transit™ accessible on BCT's web site www.broward.org/bct.

Improvements are ongoing at www.broward.org/bct. Its redesign and more user-friendly layout have resulted in continued increases of monthly visits. Enhancements include 'Transit Flash," a monthly e-newsletter sent to a client e-mail database with up-to-date information online bus pass purchasing and translation from English to Spanish and Creole.

IS THERE A GOAL FOR	TRANSFERRING	PASSENGERS	FROM	PARATRAN	1SIT TO
TRANSIT?		Х	X Ye	s 🗆 No)

Is the CTC accomplish	ning the goal?		YES	X No
S THE CTC IN COMPLIANC	CE WITH THIS	REQUIREMENT?	Yes	X No
Comments:				
	COMPLIANCE	WITH 41-2 , F.A.C.		
Compliance with 41-2.006(1) the minimum liability insur incident…"				
A/LIAT ADE THE NAINHAUNA	LIABILITY INSI	URANCE REQUIREI	MENTS?	
	<i>(</i>			
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No

If yes, was this approved by the Commission? $\hfill\Box$ Yes $\hfill\Box$ No

Yes

X

IS THE CTC IN COMPLIANCE W	TITH THIS S	SECTION?	X Yes	□ No	
Comments:					
Compliance with 41-2.011(2), Ev	aluating Co	et Effectiv	onose of C	oordinatio	n Contractors
and Transportation Alternatives		JSI-LIIECIIV	reness of C	ooramatio	ii Contractors
"contracts shall be reviewed a		the Comr	nunity Trai	nsportatio	n Coordinator
and the Coordinating Board as t	to the effec	tiveness a	nd efficien		
Operator or the renewal of any	Coordinati	on Contrac	cts."		
1. IF THE CTC HAS COORD	ΙΝΑΤΙΟΝ Ο	CONTRACT	ORS DET	FRMINE T	HE COST-
EFFECTIVENESS OF THE					112 0001-
Cost [CTC and Coordination Cont	` ,	-	• • •		
See TDSP Appendix B, Provide	rs and Cod	CC #1	Contractor	CC #3	CC #4
Flat contract rate (s) (\$ amount /	NA	00#1	00 #2	00#3	00 #4
unit)	14/1				
Detail other rates as needed:					
(e.g. ambulatory, wheelchair,					
stretcher, out-of-county, group)					
AMBULATORY	¢10.40				
WHEELCHAIR	\$18.49				
VVIILLEOIDAIX	\$31.69				
Special or unique considerations	hat influend	ce costs?	•	•	
Explanation:					
2. DO YOU HAVE TRANSPO	RTATION	ALTERNAT	IVES?	□Yes	X No
(Those specific transportation ser	vices appro	ved by rule	or the Cor	nmission a	s a service not
normally arranged by the Com				itor,but pro	ovided by the
purchasing agency. Example: a r	neighbor pro	oviding the	trip)		
Cost ICTC and Transportation Alt	ornativo (Al	+ \1 NIA			
Cost [CTC and Transportation Alt	emauve (Ai	ı.)] INA			
None known to CTC	CTC	Alt. #1	Alt. #2	Alt. #3	Alt. #4
Flat contract rate (s) (\$ amount /				-	
unit)					
Detail other rates as needed:			1	1	

(e.g. ambulatory, wheelchair,							
stretcher, out-of-county, group)							
Special or unique considerations that	at influence	e costs?					
Explanation:							
		_		•	•	•	
IS THE CTC IN COMPLIANCE WITH	H THIS S	ECTION2	Y	Vac		No	

Rule 41-2 Findings: Recommendations:

COMPLIANCE WITH 41-2, F.A.C.	
Compliance with Commission Standards	
"shall adhere to Commission approved standards"	

Review the TDSP for the Commission standards. **See TDSP, Appendix G, Paratransit Contract**

Contract Commission Standards	Comments
Local toll free phone number must be posted in all vehicles.	Rule 41-2.006 (4) (f), F.A.C.: A local toll free for complaints or grievance shall be posted inside the vehicle. The local complaint process be outlined as a section in the local Service Plan including, advising the dissatisfied person about the Commission's Ombudsman Program as a step within the process as approved by the local coordinating board.
	Local Policy: Services provided by BCT may be reached by calling BCT Customer Service Paratransit Services Section, (954) 357-8400 #2 or 1-866-682-2258 (toll free within Dade, Broward and Palm Beach Counties) hearing impaired—(954) 357-8302. FCTD has a TD Hotline available Monday through Friday, 8:00 a.m. to 5:00 p.m., 1-800-983-2435 or TTY 1-800-648-6084. The phone numbers are posted in all TOPS! vehicles and are also included in the <i>Rider's Guide</i> , which is sent to all TOPS! customers.
Vehicle Cleanliness	Rule 41-2.006 (4) (h), F.A.C.: Interior of all vehicles shall be free of dirt, grime, oil, trash, torn upholstery, damaged or broken seats, protruding metal or other objects or materials which could soil items placed in the vehicle or provide discomfort for the passenger.
	Local Policy: Broward County Vehicle Standards: It is the responsibility of CONTRACTOR to ensure each vehicle meets standards established in the TDSP, MOA, FCTD and Chapter 341.061(2)(a), Florida Statutes and Rules. The following are minimum standards which must be met by CONTRACTOR at all times while providing services: Vehicle exterior or is free of grime, oil or other substance, cracks, breaks, dents and damaged paint that noticeably detracts from the overall appearance of the vehicle. Body molding should be in place, or if removed, holes filled and painted. Interior shall be free from dirt, grime, oil, trash or other material which could soil items and protruding metal or other objects that could damage items. Passenger compartment is clean, free of torn upholstery or floor coverings, damaged or broken seats, protruding sharp edges and vermin or insects. All vehicles shall be cleaned-inside and out daily.

Commission Standards	Comments
	Vehicles used in general service with capacity of fifteen (15) passengers or less cannot be more than five (5) years old.
Passenger/Trip Database	Rule 41-2.006 (4) (j), F.A.C.: Broward County passenger/trip data base must be maintained or accessible by the BCT paratransit services section on each rider being transported within the system.
	Local Policy: Required Records: Call representative shall confirm or record the following in CTMS for each call: A) PIN #; B) confirm Name, Address, Phone Number and Emergency Contact; C) determine if call is for a complaint or transportation; D) Verify eligibility: E) Verify Pick-up location; F) Determine drop-off location; G) Determine date of travel; H) Verify if pick-up or appointment; I) Determine appointment time; J) Determine if PCA or companion is traveling; K) Recap information; L) Save to wait-list and advise caller they will receive an automated call the night before advising the pick-up time.
	Client Pick Up: CONTRACTOR shall be required to provide door-to-door service. Drivers must go into lobbies or vestibules of buildings to locate and/or assist a client; however, drivers are prohibited from entering residences. Sounding a horn at the curb shall be insufficient notification of a ride's arrival. When client boards the vehicle, driver shall complete paperwork or utilize an alternate automated system indicating pickup. The following information, at a minimum, shall be recorded by driver: (A.) pick-up time (B.) vehicle odometer mileage; (C.) fare collected from passenger (D.) Other information as required by COUNTY.
	Section 15 Filing: Pursuant to FTA's standards for precision, accuracy and accountability, COUNTY is required to report data to National Transit Database (Section 15 data). As required by FTA or COUNTY, CONTRACTOR shall collect Section 15 data and other "service supplied" information or "service consumed" information, as terms are defined in Section 15 of FTA Regulations. CONTRACTOR shall be responsible for collection of financial and operational data, including onboard operational and passenger related data and transmittal to COUNTY on COUNTY approved forms as follows: (A.) Operational and passenger related data shall be submitted to COUNTY no less than weekly (B.) Financial data shall be submitted to COUNTY no less than quarterly and (C.) Designated service supplied data

Commission Standards	Comments
	shall be submitted to COUNTY thirty (30) days prior to termination of COUNTY'S fiscal year.
	All source documents for Section 15 filings shall be subject to audit and shall be maintained by CONTRACTOR for five (5) years following final payment under this Agreement.
Adequate seating	Rule 41-2.006 (4) (k), F.A.C.: Adequate seating for paratransit services shall be provided to each rider and escort, child or personal care attendant, and no more passengers than the registered passenger seating capacity shall be scheduled or transported in a vehicle at any time. For transit service provided by transit vehicles, adequate seating or standing space will be provided to each rider and escort, child, or personal care attendant, and no more passengers than the registered passenger seating or standing capacity shall be scheduled or transported in a vehicle at any time.
	Local Policy: Availability: "Availability" shall mean a measure of capability of transit system to be used by potential patrons such as hours system is in operation, route spacing, seating availability and pick-up and delivery time parameters.
	Denials/Refusal of Service: CONTRACTOR may refuse to provide contracted paratransit service to clients if vehicle capacity is insufficient to accommodate users at the time they wish to travel. When service is refused for vehicle capacity reasons, CONTRACTOR will notify the Call Center. Call Center will make other arrangements to provide the requested trip including contacting Client.
	Wheelchair to Seat Transfer: CONTRACTOR may ask clients who use wheelchairs if they wish to transfer from wheelchair to seat. Such transfer is at the discretion of the client and service may not be refused or denied based upon decision of client.
	Accessibility: CONTRACTOR shall provide sufficient dedicated vehicles, which shall include but not be limited to, an appropriate number of vehicles equipped with lift or ramp, wheelchair securement devices and spare vehicles to maintain service in case of vehicle breakdowns, suitable for transportation of clients to meet requirements specified in this Agreement. All vehicles, wheelchair lifts or ramps and wheelchair securement devices used for paratransit service shall meet all applicable ADA

Commission Standards	Comments
	regulations, be approved by COUNTY and are subject to annual COUNTY inspection. CONTRACTOR shall meet or exceed standards and requirements for accessible vehicles set forth in Architectural and Transportation Barriers Compliance Board (ATBCB) as published in 49 CFR Section 37.161, 37.163, 37.167, 37.169,38.21 and 38.23-38.33, on September 6, 1991. Failure to provide adequate vehicles to meet terms and conditions of this Agreement may result in termination of Agreement as provided by Article 15 herein.
Driver Identification	Rule 41-2.006 (4) (I), F.A.C.: Drivers for paratransit services, including coordination contractors, shall be required to announce and identify themselves by name and company in a manner that is conducive to communications with specific passengers, upon pickup of each rider, group of riders, or representative, guardian, or associate of the rider, except in situations where the driver regularly transport the rider on a recurring basis. Each driver must have a photo identification that is in view of the passenger. Name patches, inscriptions or badges that affix to driver clothing are acceptable. Local Policy: Trip Delivery: Safety of driver, riders, public and a positive experience for the rider and driver are of primary importance to COUNTY. CONTRACTOR shall ensure drivers provide service as follows: Wear either company photo identification or name badge,
	patch, inscription with the name of the company/driver and, at Contractor's option, a company designated uniform.
Passenger Assistance	Rule 41-2.006 (4) (m), F.A.C.: The paratransit driver shall provide the passenger with boarding assistance, if necessary or requested, to the seating portion of the vehicle. Boarding assistance shall include opening the vehicle door, fastening the seat belt or wheelchair securement devices, storage of mobility assistive devices and closing the door. Assisted access must be in a dignified manner. Drivers may not assist wheelchairs up or down more than one step, unless it can be performed safely as determined by the passenger, guardian and driver.
	Local Policy: Client Pick Up: CONTRACTOR shall be required to provide door-to-door service. Drivers must go into lobbies or vestibules of buildings to locate and/or assist client; however, drivers are prohibited from entering residences. Sounding a horn at the curb shall be insufficient notification of a ride's arrival. When client

Commission Standards	Comments
Commission Standards	boards the vehicle, driver shall complete paperwork, or utilize an alternate automated system, indicating pick-up has been made. The following information, at a minimum, shall be recorded by the driver: (A.) pick-up time (B.) vehicle odometer mileage (C.) fare collected from passenger; (D.) Other information as required by COUNTY.
	Door-to-Door Service: Clients shall be provided door-to-door service as defined by Article I herein. Sounding the horn at the curb shall not be acceptable as sufficient notification of driver's arrival. Door, used herein, shall be building's door, not an individual office or apartment door located within a building.
	Client Assistance: Boarding and disembarking assistance shall be provided to any client. Driver shall go to door, announce his or her arrival (e.g., face-to-face or by intercom) and provide any additional assistance which will ensure client's safe passage to and from vehicle and vehicle seat. Even if client indicates he or she does not require driver's assistance, driver shall take necessary precautions to ensure client's safe passage.
	Trip Delivery: Safety of driver, riders and public and a positive experience for rider and driver, are of primary importance to COUNTY. CONTRACTOR shall ensure drivers provide service as follows: Provide courteous and safe assistance to riders. Drivers: Driver Training Program must include a minimum of eighty (80) hours of training prior to (scheduled classroom training such as Defensive Driving may be accomplished during the first thirty (30) days of employment, due to class scheduling considerations) driving a service vehicle. All drivers providing service under this Agreement must be employees of CONTRACTOR and use of independent contractors is not allowed. Training must include, in addition to training requirements for all employees as set forth above, instruction in: Passenger Assistance Technique Certification or an equivalent course which must be approved by COUNTY prior to service delivery. Training shall include elderly and disabled client sensitivity, awareness and communications, passenger relations and assistance, hands-on assistance to visually impaired and
	dealing with service animals (guide dogs), assistance with mobility equipment including wheelchairs, scooters, walkers, canes, crutches, braces, etc.

Commission Standards	Comments
Smoking, Eating and Drinking	Rule 41-2.006 (4) (n), F.A.C.: Smoking is prohibited in any vehicle.
	Local Policy: Broward County Vehicle Standards: It is CONTRACTOR's responsibility to ensure each vehicle meet standards established in the TDSP, MOA, FCTD and Chapter 341.061(2)(a), Florida Statutes and Rules. The following are minimum standards which must be met by CONTRACTOR at all times while providing services: No smoking in vehicle.
Two-way Communications	Rule 41-2.006 (4) (p), F.A.C.: All vehicles ordered or put into service after adoption of this section of the Rule, and providing service within the coordinated system, shall be equipped with two-way communications in good working order and audible to the driver at all times to the base. All vehicles that are not equipped with two-way communications shall have two years to be in compliance after May 1, 1996.
	Local Policy: Broward County Communication: CONTRACTOR shall be required to provide a base radio station and two-way mobile radios and/or cellular telephones for CONTRACTOR owned vehicles and sufficient portable two-way radios and/or cellular telephones to enable office and field supervisors to communicate with each other and dispatch staff.
Air Conditioning/Heating	Rule 41-2.006 (4) (q), F.A.C.: All vehicles ordered or put into service after adoption of this section of the Rule, and providing service within the coordinated system, shall have working air conditioners and heaters in each vehicle. Vehicles that do not have a working conditioner or heater will be scheduled for repair or replacement as soon as possible. All vehicles that are not equipped with an air conditioner and/or heater shall have two years to be in compliance after May 1, 1996.
	Local Policy: Vehicle Standards: It is CONTRACTOR's responsibility to ensure each vehicle meet standards established in the TDSP, MOA, FCTD and Chapter 341.061(2)(a), Florida Statutes and Rules. The following are minimum standards which must be met by CONTRACTOR at all times while providing services: Vehicles are to be equipped with operable air-conditioning system. If air conditioning system becomes inoperable during the day, vehicle may continue to provide service only for the remainder of that day.

Commission Standards	Comments
Billing Requirements	Rule 41-2.006 (4) (i), F.A.C.: Billing requirements of the Community Transportation Coordinator to subcontractors shall be determined by the local Coordinating Board and provided in the local Service Plan. All bills shall be paid within 15 calendar days to subcontractors, after receipt of said payment by the Community Transportation Coordinator is a non-governmental agency.
	Local Policy Compensation: COUNTY shall compensate CONTRACTOR for services rendered in full compliance with terms and conditions of this Agreement.
	Compensation: CONTRACTOR shall be compensated for services delivered pursuant to terms and conditions of this Agreement as follows:
	Payment: COUNTY will remit payment to CONTRACTOR within thirty (30) days from date each report is received pursuant to Article 7.1. COUNTY shall comply with provisions of the "Florida Prompt Payment Act" as required by Section 1-51.6 of Broward County Code of Ordinances.
	Per contract language, "COUNTY shall remit payment to CONTRACTOR within thirty (30) calendar days of receipt of CONTRACTOR's completed monthly report and proper invoice as set forth in Article 8. COUNTY shall comply with provisions of the "Florida Prompt Payment Act" as required by Section 1-51.6 of Broward County Code of Ordinances." Disincentives: COUNTY shall reduce payment to CONTRACTOR by any disincentive deduction assessed for failure to comply with service, performance or maintenance requirements as specifically set forth by this Agreement.
	Reimbursement: COUNTY shall not process or remit payment for any reimbursement after sixty (60) days of the actual trip date.
	Noncompliance: In the event of failure by CONTRACTOR to comply with any requirement of this Agreement, COUNTY shall withhold payment until CONTRACTOR is determined to be in compliance. Noncompliance shall include, but not be limited to, the following: (A.) Services were improperly rendered. (B.) CONTRACTOR failed to meet service specifications. (C.) Services were otherwise questionable.

Commission Standards	Comments
	Fare Structure: COUNTY shall determine client fare structure for each service trip. COUNTY retains right to implement and CONTRACTOR shall comply with fare adjustments.
	Fare Collection: CONTRACTOR is responsible for collection of fares due and owing from client, maintenance of records and deposit receipts for fares collected, as per terms and conditions of this Agreement. CONTRACTOR shall accept all means of payment approved from time to time by COUNTY including, but not limited to, cash, passes, tickets, transit punch cards, transfers and electronic transit fare cards. All fares are collected as client boards' vehicle. Clients must pay exact fare when boarding and vehicle operators are not permitted to make change. Drivers will not be permitted to accept gratuities.
	Billing Functions: Billing functions shall be performed through CTMS.

COMMISSION STANDARDS
Findings:
Recommendations:
Recommendations.

COMPLIANCE WITH 41-2, F.A.C.

Compliance with Local Standards

"...shall adhere to Commission approved standards..."

Review the TDSP for the Local standards. **See TDSP, Appendix G Paratransit Contract**

Local Standards	Comments
Transport of Escorts and dependent children policy	Rule 41-2.006 (4) (b), F.A.C.: An escort of a passenger and dependent children are to be transported as locally negotiated and identified in the local Service Plan.
	Local Policy: Broward County complies with the transport of escorts and dependent children policy.
	Escort/PCA: "Escort/PCA" shall mean a person traveling as an aide to facilitate travel by a person with a disability. PCAs may include, but are not limited to, nurses, caretakers, and parents of clients. Pursuant to 42 CFR 37.125(i), client shall indicate, at time of registration, whether or not he or she travels with a PCA. No fare shall be collected from an Escort/PCA.
	"Mobility Aids" shall mean a device or animal used by a person to facilitate travel, including, but not limited to, Escort/PCA, wheelchair, walker, cane or service animal. Children younger than five (5) years old must be transported in an appropriate car seat. All eligible riders and companions, including children, must pay the one-way fare. CTC does not provide child safety seats. Children under eighteen (18) are not permitted to ride in the front seat of a paratransit vehicle.
Use, Responsibility and cost of child restraint devices	Rule 41-2.006 (4) (c), F.A.C.: Use of child restraint devices shall be determined locally as to their responsibility, and cost of such device in the local Service Plan.
	Local Policy: Broward County complies with use of child restraint devices.
	Child Restraints: As required by the Child Passenger Protection Act, the following requirements apply when transporting children:
	Children Under One (1) Year of Age: Children under one (1) year of age must be buckled into a federally-approved child safety seat when they ride in the back seat.
	Children One-to-Five Years of Age/Front Seat: Children under eighteen (18) are not permitted to ride in the front seat

Local Standards	Comments
	of a paratransit vehicle.
	Children One-to-Five Years of Age/Back Seat: Children one (1)-to-five (5) years of age must ride in a federally approved child passenger restraint until they are at least 5 years old and weigh more than 40 pounds. Children weighing more than 40 pounds but less than 8 years old or less than 4'9' tall must ride in a booster seat.
	CONTRACTOR is not required to provide a child safety seat. CONTRACTOR shall refuse to transport any child under five (5) years of age when a child safety seat is not provided by client or responsible party. This information shall be documented on drivers' log and shall be considered a client no show. CONTRACTOR agrees to comply with any subsequent provisions of this policy.
Out-of-Service Area trips	Rule 41-2.006 (4) (g), F.A.C.: Out of Service area trips shall be provided when determined locally and approved by the local Coordinating Board, except in instances where local ordinances prohibit such trips.
	Local Policy: Delivery of transportation service in Broward County continues to evolve into a multi-provider, intermodal, intercounty and coordinated system. BCT has service into Miami-Dade and Palm Beach Counties. The three (3) counties have designated several transfer locations for riders to transfer across service areas. The counties have an intercounty service agreement for paratransit delivery. Broward County works cooperatively with paratransit clients from other counties and states who request visitor status and show proof of current paratransit eligibility.
CPR/1st Aid	Rule 41-2.006 (4) (r,s), F.A.C.: Cardiopulmonary resuscitation policy shall be determined locally and provided in the local Service Plan. First aid policy shall be determined locally.
	Local Policy: Broward County complies with locally established emergency medical policy. Proper response to emergency medical needs of riders is to immediately contact 911.
Driver Criminal Background Screening	FCTD Standards Training Manual states: "A policy establishing the minimum driver criminal background screening to be performed should be developed and addressed in the service plan." It should be noted that this standard is not required by Rule 41-2 of the F.A.C., the Memorandum of Agreement or the Coordinated Transportation Contracting Instruction.

Local Standards	Comments
	Local Policy: Broward County Driver Roster: CONTRACTOR shall provide COUNTY with updated Driver Rosters by the twentieth (20th) calendar day of each month. Each roster shall indicate driver's name, date of hire, training dates, last Drug & Alcohol test, MVR review date and date of latest criminal record check.
	Driver Training: CONTRACTOR must provide COUNTY with evidence all drivers have completed the training program offered by CONTRACTOR prior to driver providing service. This training shall be included as part of the monthly operating summary package. Additionally, drivers shall be required to participate in a driver training program which may be developed by COUNTY. CONTRACTOR will receive information regarding any COUNTY program. CONTRACTOR shall require all personnel providing transportation under the Agreement to possess the following, which shall be filed with COUNTY Contract Administrator prior to-driver providing paratransit service: Current, valid Broward County Chauffeur's Registration in accordance with the requirements of Chapter 22-1/2, Broward County Code of Ordinances.
	COUNTY shall request State of Florida MVRs for CONTRACTOR'S drivers on a periodic basis. If report shows evidence of violations, COUNTY shall promptly notify CONTRACTOR and the Taxi Section of COUNTY Consumer Affairs Division. CONTRACTOR shall have procedures to periodically review driver's MVR's. Compliance shall be monitored by CTC. Background check completed biannually when the chauffeur's license is renewed.
Rider Personal Property	Rule 41-2.006 (4) (d), F.A.C.: Passenger property that can be carried by the passenger and/or driver in one (1) trip and can be safely stowed on the vehicle, shall be allowed to be transported with the passenger at no additional charge. Additional requirements may be negotiated for carrying and loading rider property beyond this amount. Passenger property does not include wheelchairs, child seats, stretchers, secured oxygen, personal assistance devices or intravenous devices.
	Local Policy Personal Belongings: "Personal Belongings" shall mean passenger property carried by passenger and safely stowed for transport with the passenger at no additional charge. "Personal Belongings" do not include for purpose of this definition wheelchairs, child seats, stretchers, secured oxygen-or personal assistive devices.

Local Standards	Comments
	Personal Property in Vehicles: Any personal property of a client found in a vehicle shall be retained by CONTRACTOR for a minimum of sixty (60) days after which, with prior approval of COUNTY, CONTRACTOR may dispose of said property.
Advance reservation requirements	Local Policy Advanced Reservation Service: "Advanced Reservation Service" shall mean service which is reserved by the client one (1) to three (3) days in advance.
	Same Day Service: "Same Day Service" shall mean service is provided on the same day a request for service is made.
	"Same Day Service": Requests for service made on the same day may be provided at the discretion of County and TOPS! Reservation Center. County attempts to make every reasonable effort to accommodate same day trip requests.
Pick-up Window	Local Policy On Time: "On Time" shall mean service vehicle arriving within fifteen (15) minutes before or fifteen (15) minutes after pick-up time recorded at time of the scheduled trip request. For example, a pick-up is scheduled at 10:15 a.m., riders shall expect to be picked-up between 10:00 a.m. and 10:30 a.m. Vehicle is on time if it arrives no earlier than 10:00 a.m. and no later than 10:30 a.m.
	Window: "Window" shall mean the period of time allowed prior to and after scheduled time of pick-up of any rider(s).
	Reservation Hours (Reservations): Requests for Service shall be made available to caller by TOPS! Reservation Center through a telephone operator, seven (7) days-a-week between 8:00 a.m. and 5:00 p.m. Reservations shall be available to client by TOPS! Reservation Center through reservation agents or online. Eligible clients must reserve paratransit service one (1) to three (3) days prior to the date of desired trip. Pick-up window will be communicated to client via automated telephone call the evening prior to the trip.
	Reservations shall be available to client by TOPS! Reservation Center through reservation agents or online. See TOPS! Rider's Guide for step-by-step on-line reservation details. Riders' Guide available at http://www.broward.org/BCT/Riders/Pages/Paratransit.aspx
	Scheduling and Dispatching: All trips must be scheduled by

Local Standards	Comments
	TOPS! Reservation Center and dispatched through CONTRACTOR's local dispatch facility using COUNTY supplied CTMS. The following requirements pertain to scheduling and dispatching: If CONTRACTOR fails to deliver client on time, client shall not be penalized for the return trip if he/she cannot be ready at the scheduled return pick-up time. A window of thirty (30) minutes will be from time client is ready for his/her return trip.
On-Time Pick Up and On- Time Arrival	On-Time Pick Up and On-Time Arrival – The Vehicle arrives at the designated pick-up location within the Pick-Up Window as established by the CTMS or earlier or the drop off location by the appointment time as requested by the customer.

Measurable Standards/Goals	Standard/Goal	Latest Figures	Is the CTC/Operator meeting the Standard?
Public Transit Ridership:	CTC Travel Training 120	0	no
Travel Training Program.			
Public Transit Ridership:	CTC Bus Pass	27,499	n/a
Bus Pass Program			
On-time performance:	CTC	% 80.89%	No
	07/01/2019-06/30/2020		
Accidents: Reported from the current AOR	CTC 2.5/100,000 miles	31	YES
Road calls: Reported from the current AOR	CTC	210	N/A
Average Age of Fleet:	CTC	100% Fleet < 6 years old	
CTC records		Olu	
Complaints: Rider complaints as reported to CTC (excluding WMR).	CTC 0.2% of trips delivered in a calendar month	Program wide:	Yes
	Transportation America	.05%	Yes
	First Transit		Yes

Measurable Standards/Goals	Standard/Goal	Latest Figures	Is the CTC/Operator meeting the Standard?
		.15%	
Call -Hold Time:	CTC <90 seconds		No
Inktel Direct, TOPS! Reservation Center:	TOP's Reservation Center <	seconds*	No
Reservation Center.	90 seconds	266	
*Per Ducati Reporting System.			

Worksheet 1

FLCTD

Annual Operations Report Section VII: Expense Sources



CTC Expense Sources

County: Broward

CTD Status: Approved

CTC Organization: Broward County

Fiscal Year: 07/01/2019 - 06/30/2020 **CTD Status:** Approved

	Selec	Selected Reporting Period			Previous Reporting Period		
	CTC & Transportation Operators	Coordination Contractors	Total	CTC & Transportation Operators	Coordination Contractors	Total	
Expense Sources							
Labor	\$ 15,912,585	\$ 2,476,632	\$ 18,389,217	\$ 16,704,213	\$ 2,721,700	\$ 19,425,913	
Fringe Benefits	\$ 2,186,375	\$ 765,586	\$ 2,951,961	\$ 1,838,896	\$ 964,696	\$ 2,803,592	
Services	\$ 3,565,607	\$ 271,286	\$ 3,836,893	\$ 4,383,997	\$ 371,645	\$ 4,755,642	
Materials & Supplies Consumed	\$ 1,305,622	\$ 674,926	\$ 1,980,548	\$ 1,260,745	\$ 869,878	\$ 2,130,623	
Utilities	\$ 498,374	\$ 123,779	\$ 622,153	\$ 314,292	\$ 71,656	\$ 385,948	
Casualty & Liability	\$ 2,478,894	\$ 663,248	\$ 3,142,142	\$ 2,052,254	\$ 570,988	\$ 2,623,242	
Taxes	\$ 583,364	\$ 4,210	\$ 587,574	\$ 515,292	\$ 4,471	\$ 519,763	
Miscellaneous	\$ 668,441	\$ 25,541	\$ 693,982	\$ 514,233	\$ 56,733	\$ 570,966	
Interest	\$ 18,000	\$ 1,334	\$ 19,334	\$0	\$ 1,206	\$ 1,206	
Leases & Rentals	\$ 560,302	\$ 20,991	\$ 581,293	\$ 447,337	\$ 10,743	\$ 458,080	
Capital Purchases	\$ 212,924	\$ 377,789	\$ 590,713	\$0	\$ 534,007	\$ 534,007	
Contributed Services	\$ 18,493	\$ 25,474	\$ 43,967	\$ 32,529	\$ 97,529	\$ 130,058	
Allocated Indirect Expenses	\$ 142,516	\$ 116,390	\$ 258,906	\$ 142,366	\$ 118,466	\$ 260,832	
Purchased Transportation Services							
Bus Pass	\$ 2,604,924	N/A	\$ 2,604,924	\$0	N/A	\$0	
School Board (School Bus)	\$0	N/A	\$0	\$0	N/A	\$0	
Transportation Network Companies (TNC)	\$0	N/A	\$0	\$0	N/A	\$0	
Taxi	\$0	N/A	\$0	\$0	N/A	\$0	
Contracted Operator	\$0	N/A	\$0	\$0	N/A	\$0	
Total - Expense Sources	\$ 30,756,421	\$ 5,547,186	\$ 36,303,607	\$ 28,206,154	\$ 6,393,718	\$ 34,599,872	

Level of Competition Worksheet 2

1. Inventory of Transportation Operators in the Service Area

** Number fluctuates.	Column A	Column B	Column C	Column D
Definition of		Operators		
operators in the area	Operators	Contracted in	Include Trips	% of all Trips
would have included	Available	the System.		

those in the region				
and we do not collect				
that data.				
Private Non-Profit	**	17		13%
	unknown	17	261,247	13 /0
Private For-Profit	**	3		32 %
	unknown	3	676,306	JZ /0
Government	**	7		6%
	unknown	1	122,341	0 /0
Public Transit				
Agency	1	1	1,022,750	49%
 Bus Pass trips 			1,022,730	
Total		28		100%
	1	20	2,082,644	100 /0

- 2. How many of the operators are coordination contractors? <u>24</u>
- 3. Of the operators included in the local coordinated system, how many have the capability of expanding capacity? <u>Given the funding, all of them.</u>

Does the CTC have the ability to expand? Yes

4. Indicate the date the latest transportation operator was brought into the system.

May 18, 2020: House of Hope

- 5. Does the CTC have a competitive procurement process? Yes
- 6. In the past five (5) years, how many times have the following methods been used in selection of the transportation operators?

1	Low bid
	Requests for qualifications
	Negotiation only

	Requests for proposals
	Requests for interested parties
	Requests for Letters of Interest

Which of the methods listed on the previous page was used to select the current operators?

Request for Letters of Interest

7. Which of the following items are incorporated in the review and selection of transportation operators for inclusion in the coordinated system?

	Capabilities of operator
X	Age of company
Х	Previous experience
Х	Management
Х	Qualifications of staff
Х	Resources

	Scope of Work
Χ	Safety Program
Χ	Capacity
Χ	Training Program
Χ	Insurance
Χ	Accident History

Χ	Economies of Scale
Χ	Contract Monitoring
Χ	Reporting Capabilities
Χ	Financial Strength
	Performance Bond
X	Responsiveness to Solicitation

Х	Quality
Χ	Community Knowledge
Χ	Cost of the Contracting Process
Χ	Price
	Distribution of Costs
	Other: (list)

8. If a competitive bid or request for proposals has been used to select the transportation operators, to how many potential operators was the request distributed in the most recently completed process?

Advertised on County website and followed County RFP publication and solicitation process.

How many responded?

7 for service providers, 2 bids for call center

The request for bids/proposals was distributed:

X Locally X Statewide X Nationally

9. Has the CTC reviewed the possibilities of competitively contracting any services other than transportation provision (such as fuel, maintenance, etc...)?

Yes - centralized reservation service

Level of Availability (Coordination)

Worksheet 3

Planning – What are the coordinated plans for transporting the TD population?

Coordinated plans for transporting the TD population are described in Broward County's TDSP. The TDSP is updated annually by the MPO and CTC and adherence to the plan is closely monitored. See the Introduction and Service Analysis of the current TDSP here: http://browardmpo.org/index.php/major-functions/transportation-disadvantaged-services.

Public Information – How is public information distributed about transportation services in the community?

Coordinated plans for transporting the TD population are described in Broward County's TDSP. The TDSP is updated annually by the MPO and CTC and adherence to the plan is closely monitored. For the MPO's current Public Participation Plan, please see: http://browardmpo.org/index.php/core-products/public-participation-plan-ppp. To view the current TDSP plan, please visit: http://browardmpo.org/index.php/major-functions/transportation-disadvantaged-services.

Certification – How are individual certifications and registrations coordinated for local TD transportation services?

TD Trips - Pursuant to Chapter 427 Florida Statutes, Broward County as the CTC under direction from CTD and in cooperation with the LCB, developed local eligibility guidelines. The CTC requires a written application for TD eligible clients, of whom there were 637 registered clients with TOPS! Door to door paratransit service and 3,204 registered clients for the TD Bus Pass Program. The CTC and LCB have an established Complaint and Grievance

Procedure for applicants and customers. Applicant may request a review of the application by the CTC program director. TOPS! performed over 205,163 TD trips.

Eligibility Records – What system is used to coordinate which individuals are eligible for special transportation services in the community?

ADA: ADA Eligible Trips - BCT is responsible for providing complementary paratransit services under the Americans with Disabilities Act of 1990. Clients under this service are eligible based upon Federal ADA Rules and Regulations. There were 14,777 eligible ADA clients registered with TOPS! paratransit service. TOPS! Performed 471,143 ADA trips.

ADA eligibility is determined by applicant's functional limitations in demonstrating ability to use a fixed-route bus and/or navigate the fixed-route system. Applicants complete a written application. A physician of the applicant's choice completes the medical section. Completed applications are reviewed by a third-party BCT-contracted medical functional assessment facility. Those applicants not receiving presumptive approval are sent for an assessment to determine appropriate service - ADA paratransit or fixed-route bus service. Assessments are conducted by a team of specifically trained professionals including physical and occupational therapists and comprise functional, cognitive, visual and respiratory evaluations. When determined applicant is not eligible for ADA paratransit service and fixed-route service is indicated, travel training is offered at no cost to applicant. Applicants who qualify and are enrolled in ADA paratransit service must apply for re-certification every three (3) years. The CTC has established an eligibility appeals board that meets as needed. BCT's Paratransit Services Section staff processed 5,706 applications and approved 6,413 applications for ADA and TD paratransit service this reporting period.

Call Intake – To what extent is transportation coordinated to ensure that a user can reach a Reservationist on the first call?

Telephone Services:

Courteous and Polite Dealings: TOPS! Reservation Center shall ensure personnel assigned to service telephone lines maintain a courteous and polite attitude relating to services. All personnel assigned to service telephone lines shall announce their names in all telephone calls related to services addressed within this Agreement.

Full Access To Service: Clients (within service area) shall be provided full, easy and toll-free access to paratransit services. Full access shall include Telephone Devices for the Deaf (TDD), and/or use of the Florida Relay Service provided by BellSouth (1-800-955-8770). TOPS! Reservation Center shall have staff trained in proper TDD usage and available to answer during all service hours.

Customer Telephone Line: Client reservation telephone lines shall be exclusively utilized for paratransit service client services and shall not be used by TOPS! Reservation Center for any other purpose. Telephone lines must be answered by properly trained staff during all service hours.

Answering and On-Hold Time Standards: TOPS! Reservation Center shall establish a system to ensure calls shall be answered within five (5) rings and on-hold time shall be kept at minimum while clients are booking transportation. Maximum hold time shall be defined as no more than ninety (90) seconds. TOPS! Reservation Center shall establish a plan detailing-how on-hold times may be kept to a minimum. This plan shall include maximum estimated hold

times for both peak and off-peak travel times. Approximate peak times on weekdays are 6:00 a.m. until 9:00 a.m. and 3:00 p.m. until 5:00 p.m.

Reporting Function: TOPS! Reservation Center shall have a reporting function on the telephone system which measures: number of calls by function, average length of call, hold times, abandoned calls, cancellations and other reporting capabilities.

Hotline: TOPS! Reservation Center shall provide a "hotline" telephone number (unpublished) for exclusive use by COUNTY staff. Telephone hotline shall provide for direct communication in resolving day-to-day operational issues and shall be active and functioning during all hours of service delivery. The hotline shall be answered within five (5) rings and on-hold time shall be kept at a minimum. Maximum on-hold time shall be defined as no more than ninety (90) seconds. Hotline telephone number shall be supplied to COUNTY prior to initiating service and shall not be provided to other parties.

Reservations – What is the reservation process? How is the duplication of a reservation prevented?

Reservation Hours (Reservations): All requests for service shall be made available to client through TOPS! Reservation Call Center at 1-866-682-2258 or online. Reservations service operates seven (7) days-a-week between 8:00 a.m. and 5:00 p.m. and online reservations are available twenty-four (24) hours a day, seven (7) days a week. Eligible clients shall reserve paratransit service one (1) to three (3) days prior to requested date of service. Next day reservations must be completed before 5 p.m. Pick-up times may be negotiated provided all negotiations comply with ADA regulations. Passengers will receive their Service Window for each trip the night before travel, between 5 p.m. and 9 p.m., through an automated system. If the Service Window provided is not convenient and the passenger would like to negotiate a different time or wishes to cancel the trip, they must contact the Call Center. The system will call the passenger via the most current phone number(s) on file. If the passenger has an answering machine or voicemail, the system will leave a message. When the vehicle is approximately ten (10) minutes away from the passenger's location, the passenger will receive an automated Advanced Arrival Reminder Notification call.

Reservations shall be available to client by TOPS! Reservation Center through reservation agents or online www.mytopstrips.org. See TOPS! Rider's Guide for step-by-step on-line reservation details. The Riders' Guide is available at www.broward.org/BCT (select "Paratransit").

All reservations are booked into CTMS-at the actual time of request and required data fields are updated, verified and entire reservation is read back to client for their approval. All reservations received during the day at TOPS! Reservations Center are constantly monitored and scheduled for efficiency, effectiveness and productivity.

Required Records: For each call, call taker shall, at a minimum, record the following information on the CTMS reservation screen:

- A. Name of client.
- B. Appropriate funding component of service.
- C. Client's Paratransit Service Identification Number.

- D. Pick-up location.
- E. Drop-off location.
- F. Desired drop-off time/appointment time
- G. Telephone number where caller can be reached.
- H. Number in party (including PCA and/or companion).

Trip Allocation – How is the allocation of trip requests to providers coordinated?

Trip/client/ allocations are determined during contract negotiations prior to execution of the agreement between CTC and transportation operators. Please note assigned site locations were voided at the start of the current Paratransit contract effective 1/1/2015.

Scheduling – How is the trip assignment to vehicles coordinated?

Scheduling: All trips must be scheduled through TOPS! Reservation Center. CONTRACTORS locally dispatch from Call Center supplied CTMS manifest. The following are requirements pertaining to scheduling and dispatching:

- A. Client is not permitted to request a specific driver.
- B. Appointment times and locations shall be confirmed with caller at time trip is reserved.
- Any changes made to an existing reservation shall be accompanied by supporting documentation a CTMS entry.
- D. If CONTRACTOR fails to deliver client to appointment on time, client shall not be penalized for return trip in the event client cannot be ready at scheduled return pick-up time. A window of thirty (30) minutes shall be given in situations involving late delivery to appointments from time client is ready for return trip.
- E. A minimum sixty (60) minute wait is required between the client's appointment time and the client's next pick up time.

Transport – How are the actual transportation services and modes of transportation coordinated?

Transportation providers are responsible for the actual provision of services set forth in their formal agreements with CTC.

Dispatching – How is the real time communication and direction of drivers coordinated?

Scheduling: All trips must be scheduled through TOPS! Reservation Center.

CONTRACTOR's dispatchers are required to communicate with drivers per Local Policy: Broward County Communication: CONTRACTOR shall be required to provide a base radio station and two-way mobile radios and/or cellular telephones for CONTRACTOR owned vehicles and sufficient portable two-way radios and/or cellular telephones to enable office and field supervisors to communicate with each other and dispatch staff.

General Service Monitoring – How is the overseeing of transportation operators coordinated? CTC staff monitors performance of transportation operators through on-site visits, random audits of trip records, examination of invoices and monthly reports, customer complaints and careful monitoring of contractual service standards.

Daily Service Monitoring – How are real-time resolutions to trip problems coordinated?

CTC staff, customer service representatives, MPO staff, other County staff and contracted operators work very closely together and with clients to resolve day-to-day service issues that arise, often with immediate resolution. CTC staff coordinates and documents all efforts.

Trip Reconciliation – How is the confirmation of official trips coordinated?

CTMS tracks and reports coordination of trips.

Billing – How is the process for requesting and processing fares, payments and reimbursements coordinated?

Invoices are generated by CTMS, reviewed for accuracy and approved by CTC staff and processed for payment by BCT.

Reporting – How is operating information reported, compiled and examined?

Reporting requirements are specified in formal agreements with operators and coordination contractors. CTC staff compiles, examines and approves all reports.

Cost Resources – How are costs shared between coordinator and operators (s) in order to reduce overall costs of the coordinated program?

Administration services related to the program (eligibility, customer service, and quality control) are performed by CTC. The operators' Scope of Services is related to on-street performance.

Information Resources – How is information shared with other organizations to ensure smooth service provision and increased service provision?

Information is shared during meetings with three boards/committees: the Broward County Advisory Board for Individuals with Disabilities, South Florida Regional Transportation Authority's ADA Advisory Committee, and the Broward MPO through the LCB as well as presentations at the Commission for Transportation Disadvantaged annual workshops for CTD staff and transportation professionals. Information is also shared with the following organizations in Broward County: Agency for Persons with Disabilities, Division of Blind Services, CareerSource Broward, Center for Independent Living, Vocational Rehab, Park 7 Veterans Club of Coral Springs, Veterans Affairs Voluntary Service (VAVS) Kling Clinic, South Florida AIDS Network (SFAN), Rock Island HOA, The Preserve at Palm-Aire, Learning Center for Vision Impaired Seniors, Lighthouse of Broward, National Federation of the Blind of Broward County, Davita Inc., Plantation Kidney Center, FMC Fresenius Dialysis Center, Tamarac Artificial Kidney Center, Club 55+ Senior Citizens "Coffee & Conversation" City of

Fort Lauderdale, City of Pembroke Pines - Southwest Focal Point Senior Center, Northeast Focal Point, Northwest Focal Point and Tamarac Community Center. Additionally, TD program information and applications can be found on our website: www.broward.org/BCT.

Overall – What type of formal agreement does the CTC have with organizations, which provide transportation in the community?

CTC has two (2) formal service contract agreements with operators of the paratransit system and 24 formal agreements with all coordination contractors.

On-SITE OBSERVATION OF THE SYSTEM

RIDE A VEHICLE WITHIN THE COORDINATED SYSTEM. REQUEST A COPY OF THE MANIFEST PAGE THAT CONTAINS THIS TRIP. Date of Observation: Please list any special guests that were present: Location: Number of Passengers picked up/dropped off: **Ambulatory** Non-Ambulatory Was the driver on time? □ No How П Yes many minutes late/early? Did the driver provide any passenger assistance? Yes No Was the driver wearing any identification? Yes No □ Uniform □ Name Tag □ ID Badge Did the driver render an appropriate greeting? Yes □ No П Driver regularly transports the rider, not necessary If CTC has a policy on seat belts, did the driver ensure the passengers were properly belted? Yes No Was the vehicle neat and clean and free from dirt, torn upholstery, damaged or broken seats, protruding metal or other objects? Yes Is there a sign posted on the interior of the vehicle with both a local phone number and the TD Helpline for comments/complaints/commendations? Yes No Does the vehicle have working heat and air conditioning? Yes No Does vehicle have two-way communications in working order? Yes No If used, was the lift in good working order? П Yes No Was there safe and appropriate seating for all passengers? Yes No Did the driver properly use the lift and secure the passenger? Yes No

If no, please explain:

CTC: Broward County Transit County: Broward

Date of Ride:

Funding Source	No. of Trips	No. of Riders / Beneficiaries	No. of Calls to Make	No. of Calls Made
CTD				
Medicaid NA				
Other				
Totals				

Number of Round Trips	Number of Riders/Beneficiaries to Survey
0 – 200	30%
201 – 1200	10%
1201 +	5%

Note: Attach the manifest

Staff/LCB Member making call:		County: BROWARD
Date of Call: / /	Funding Sc	ource:
1) Did you receive transportation service on □ Yes □ No		?
2) Where you charged an amount in addition to	the co-payment?	□ Yes □ No
If so, how much?		
3) How often do you normally obtain transporta ☐ 1-2 Times/Week ☐ 3-5Times/V	ation? Daily - 7 Veek Other	Days a Week
4) Have you ever been denied transportation s	ervices?	□ Yes □ No
If no, skip to question # 4 A. How many times in the last 6 months h	nave vou been refuse	d transportation services?
□ None □ 3-5 Times		
If none, skip to question # 4.		
B. What was the reason given for refusi		services?
☐ Ineligible☐ Lack of funds☐ Destination	: available In outside service are	а
Other	in outside service are	u
5) What do you normally use the service for?		
☐ Medical ☐ Education	/Training/Day Care	
☐ Employment☐ Life-Susta☐ Nutritional	ining/Other	
□ INUUIUOIIAI		
6) Did you have a problem with your trip on		
☐ Yes If yes, please state or choose pro☐ No - If no, skip to question # 6	blem from below	
What type of problem did you have wi		
☐ Advance notice☐ Pick up times not convenient	□ Cost□ Late pick up-spec	ify time of wait
□ Assistance	☐ Accessibility	
☐ Service Area Limits☐ Drivers - specify	□ Late return pick u□ Reservations - sp	. •
□ Vehicle condition	□ Other	cony length of wait
7) On a scale of 1 to 10 (10 being most satisfied receiving.	ed) rate the transporta	ation you have been
8) What does transportation mean to you? (Peuse in publications.)	rmission granted by _	for
Additional Comments		

Contractor name (optional)

1. Do the riders/beneficiaries call your facility directly to cancel a trip?	□Yes	□No
2. Do the riders/beneficiaries call your facility directly to issue a complain	t? □Yes	□No
3. Do you have a toll-free phone number for a rider/beneficiary to issue concomplaints posted on the interior of all vehicles that are used to transport ☐Yes ☐No		
If yes, is the phone number posted the CTC's?	□Yes	□No
4. Are the invoices you send to the CTC paid in a timely manner?	□Yes	□No
5. Does the CTC give your facility adequate time to report statistics?	□Yes	□No
6. Have you experienced any problems with the CTC?	□Yes	□No
If yes, what type of problems?		
Comments:		

PURCHASING AGENCY SURVEY NA

Staff making call: Purchasing Agency name: Page 2015 Agency Age
Representative of Purchasing Agency:
1) Do you purchase transportation from the coordinated system?
If no, why?
2) Which transportation operator provides services to your clients?
3) What is the primary purpose of purchasing transportation for your clients? Medical Employment Education/Training/Day Care Nutritional Life Sustaining/Other
4) On average, how often do your clients use the transportation system? ☐ 7 Days/Week ☐ 1-3 Times/Month ☐ 1-2 Times/Week ☐ Less than 1 Time/Month ☐ 3-5 Times/Week
5) Have you had any unresolved problems with the coordinated transportation system? ☐ Yes ☐ No - If no, skip to question 7
6) What type of problems have you had with the coordinated system? Advance notice requirement [specify operator (s)] Cost [specify operator (s)] Service area limits [specify operator (s)] Pick up times not convenient [specify operator (s)] Vehicle condition [specify operator (s)] Lack of passenger assistance [specify operator (s)] Accessibility concerns [specify operator (s)] Complaints about drivers [specify operator (s)] Complaints about timeliness [specify operator (s)] Length of wait for reservations [specify operator (s)] Other [specify operator (s)]
7) Overall, are you satisfied with the transportation you have purchased for your clients? □ Yes □ No - If no, why?

Contractor name (optional) Inktel (305) 523.1233 Ext: 99062

1.	Do the riders/beneficiaries call your facility directly to cancel a trip? Yes.
2.	Do the riders/beneficiaries call your facility directly to issue a complaint? Yes.
3.	Do you have a toll-free phone number for a rider/beneficiary to issue commendations and/or complaints posted on the interior of all vehicles that are used to transport TD riders? No – we operate the Call Center.
	If yes, is the phone number posted the CTC's? □Yes □No
4.	Are the invoices you send to the CTC paid in a timely manner? Yes.
5.	Does the CTC give your facility adequate time to report statistics? Yes.
6.	Have you experienced any problems with the CTC? No. If yes, what type of problems?
Com	ments: N/A

Contractor name: Transportation America (954) 463-0845

- Do the riders/beneficiaries call your facility directly to cancel a trip?
 No.
- Do the riders/beneficiaries call your facility directly to issue a complaint?
 No. Sometimes get calls, but redirect to the Call Center or Broward County.
- 3. Do you have a toll-free phone number for a rider/beneficiary to issue commendations and/or complaints posted on the interior of all vehicles that are used to transport TD riders?

No toll-free number as all calls are in Broward. Yes, provide local number. If yes, is the phone number posted for the CTC's?

Yes, phone number posted for the CTC.

- 4. Are the invoices you send to the CTC paid in a timely manner? **Yes**.
- 5. Does the CTC give your facility adequate time to report statistics? **Yes.**
- 6. Have you experienced any problems with the CTC? **No.**

If yes, what type of problems?

Comments: N/A

Contractor name (optional) Inktel (305) 523.1233 Ext: 99062

1.	Do the riders/beneficiaries call your facility directly to cancel a trip? Yes.	
2.	Do the riders/beneficiaries call your facility directly to issue a complaint? Yes.	
3.	Do you have a toll-free phone number for a rider/beneficiary to issue commendations and/or complaints posted on the interior of all vehicles that are used to transport TD riders? No – we operate the Call Center.	t
	If yes, is the phone number posted the CTC's?	
	□Yes □No	
4.	Are the invoices you send to the CTC paid in a timely manner? Yes.	
5.	Does the CTC give your facility adequate time to report statistics? Yes.	
	Have you experienced any problems with the CTC? No. Tyes, what type of problems?	
	yes, what type of problems!	
Сс	nments: N/A	

Contractor name: Transportation America TEL: (954) 463-0845

- Do the riders/beneficiaries call your facility directly to cancel a trip?
 No.
- Do the riders/beneficiaries call your facility directly to issue a complaint?
 No. Sometimes get calls, but redirect to the Call Center or Broward County.
- 3. Do you have a toll-free phone number for a rider/beneficiary to issue commendations and/or complaints posted on the interior of all vehicles that are used to transport TD riders?

Yes, provide local number.

If yes, is the phone number posted for the CTC's?

Yes, phone number posted for the CTC.

- 4. Are the invoices you send to the CTC paid in a timely manner? **Yes**.
- 5. Does the CTC give your facility adequate time to report statistics? **Yes.**
- 6. Have you experienced any problems with the CTC? **No.**

If yes, what type of problems?

Comments: During the pandemic, the CTC has been fabulous to work with and assisted with turning around our payments for invoicing very quickly.

Staff/LCB Member making call: 1644160 Cho	BALLAGO Wolther-	County:
Date of Call: 5 1 3 1 2 1	Funding So	urce:
1) Did you receive transportation service on _ X Yes No Preffy sure	May 21, 2020	?
2) Where you charged an amount in addition If so, how much?	to the co-payment?	Yes XNo
3) How often do you normally obtain transport X 1-2 Times/Week 3-5Times/	tation? Daily - 7 [Week X Other //	Days a Week of Onymore
4) Have you ever been denied transportation: If no, skip to question # 4	ths have you been re	XYes No fused transportation S X 6-10 Times
B. What was the reason given for refus Ineligible Space no Lack of funds Destination Cother Oriver rever showed 5) What do you normally use the service for? Medical Education Employment Life-Susta	t available on outside service area <i>Up- He was abo</i>	1
6) Did you have a problem with your trip on	oblem from below ith your trip? Cost Late pick up-specif Accessibility Late return pick up Reservations - spe	- length of wait ecify length of wait
receiving.	-,	,

8)	What	does	transportation	mean	to	you?	(Permission	granted	by
***	Nothu	79	for use in	publication	ons.)				
٥. ١	100		1						
	ditional C			1.11.1			tell him	1	
02.	della of	Thut G	drivers have Manas perc	ye lifti c	de ni	m once	eti	<u>11 77772</u>	
.1111	201 07	WILLUL) 172011G) 9 1 1 1 1	11010	hashkakalahanii	11.4 ////	i l		

Staff/LCB Member making call: BROWARD	Charlotte Mott	her - Ta		
Date of Call: 5/3/21	F	unding So	urce:	
1) Did you receive transportation X Yes No mut h	service on <u>March</u> kely - cant rement	1,200 ber date	26	_?
2) Where you charged an amount				XNO.
If so, how much?				
3) How often do you normally ob 1-2 Times/Week	tain transportation? X 3-5Times/Week	Daily - 7 D Other	ays a Weel	<
4) Have you ever been denied tr If no, skip to question # 4	ansportation services?		Yes	No
A. How many times in th	e last 6 months have your seconds of the second of the seconds of the second of th	ou been ref 1-2 Times	used transp	ortation Times
	iven for refusing you tran Space not available Destination outside se membeship rai ma			new form i
5) What do you normally use the	service for? Education/Training/Da XLife-Sustaining/Other			
XNo - If no, skip to questi	or choose problem from ton # 6 d you have with your trip? Cost nvenient	? k up-specif bility urn pick up	y time of wa - length of w cify length o	vait
7) On a scale of 1 to 10 (10 being receiving. 10 -drives	g most satisfied) rate the teally polite	transportati	on you have	been .

8) What	does	transportation	mean	to	you?	(Permission	granted	by
able to	get !	Stuff for use in	publicati	ons.)				
	da	re						
Additional C	Commer	nts						

Staff/LCB Member making call:	MANA GAMA		County:	
BROWARD	Charlotte	Mather	- Taylor	
Date of Call: 5 3 2		Funding Sc	ource:	
Did you receive transportation Yes No can't ren	n service on <u>Februa</u> nearber	ry 7, 202	Ó	?
2) Where you charged an amou	nt in addition to the co	o-payment?	Yes	XNO
If so, how much?				
 How often do you normally ob			Days a Week	
4) Have you ever been denied tr	ransportation services	?	Yes	No
If no, skip to question # 4 A. How many times in th	ne last 6 months hav	e vou heen re	fused transno	ortation
services? XNone If none, skip to questic	e 3-5 Times			
B. What was the reason g	niven for refusing you	transportation	services?	
Ineligible	Space not available Destination outside	ole		
5) What do you normally use the	service for?			
✓ Medical□ Employment✓ Nutritional	Education/Training Life-Sustaining/O	g/Day Care ther		
S) Did you have a problem with y Yes If yes, please state	your trip on 2/7/2	om below		
VNo - If no, skip to questi	ion # 6			
What type of problem di Advance notice	id you nave with your Cos			
Pick up times not co		e pick up-speci	fy time of wait	
Assistance Service Area Limits		essibility e return pick up	o - length of wa	ait
Drivers - specifyVehicle condition	□ Res	ervations - spe er	ecify length of	wait
7) On a scale of 1 to 10 (10 being receiving.	g most satisfied) rate	the transporta	tion you have	been

8)	What	does	transportation	mean	to	you?	(Permission	granted	by
	Very 1	relptul_	for use in	publicati	ons.)				
		1							
Ad	ditional C	ommen	ts						
	Some	times	transportation	n is	lat	- July			An a a nong a ga chia different
			,						

Staff/LCB Member making call: D. McGill	County: BROWARD			
Date of Call: 03 / 30 / 2021	Funding Source: _Cash			
1) Did you receive transportation service on 06- ? X Yes □ No	-29-2020			
2) Where you charged an amount in addition to	the co-payment? ☐ Yes X No			
If so, how much?				
3) How often do you normally obtain transporta ☐ 1-2 Times/Week X 3-5Times/W				
4) Have you ever been denied transportation solf no, skip to question # 4	ervices?			
A. How many times in the last 6 month	hs have you been refused transportation mes □ 1-2 Times □ 6-10 Times			
B. What was the reason given for refusing you transportation services? Ineligible Space not available Lack of funds Destination outside service area Other				
5) What do you normally use the service for? X Medical				
6) Did you have a problem with your trip on Ye Yes If yes, please state or choose pro X No - If no, skip to question # 6 What type of problem did you have with Advance notice Pick up times not convenient Assistance Service Area Limits Drivers - specify Vehicle condition	blem from below			
7) On a scale of 1 to 10 (10 being most satisfie receiving. 9	d) rate the transportation you have been			
8) What does transportation mean to you? I go	et to go where I need to go. (Permission			

granted by	Yes	for use in publications.)
Additional Commentsdriver	_Good	

Staff/LCB Member making call: P. Mollica	County: BROWARD
Date of Call: 4 / 1 / 2021	Funding Source:
Did you receive transportation service on 07-7 X□ Yes □ No	11-2019?
2) Where you charged an amount in addition to t	:he co-payment? □ Yes
□XNo If so, how much?	
3) How often do you normally obtain transportati ☐ 1-2 Times/Week ☐X 3-5Times/W	
 4) Have you ever been denied transportation set X□No If no, skip to question # 4 A. How many times in the last 6 months services? □ None □ 3-5 Tim If none, skip to question # 4. 	
B. What was the reason given for refusing Ineligible Space not a Lack of funds Destination Other	vailable
5) What do you normally use the service for? Medical Education/T Employment Life-Sustain Nutritional	raining/Day Care ing/Other
 □ Pick up times not convenient □ Assistance □ Service Area Limits □ Drivers - specify 	lem from below
7) On a scale of 1 to 10 (10 being most satisfied receiving1) rate the transportation you have been

8) _	What	does	transportation for use in		•	(Permi	ssion	granted	by
Add	ditional (Commer	nts						

Staff/LCB Member making call: P. Mollica	County: E	BROWARD	
Date of Call: 4 / 1 / 2021	Funding	g Source:	
1) Did you receive transportation service on 7/11/20)19?	X□ Yes	□ No
2) Where you charged an amount in addition to the	co-payment	? X□ Y	es
□No If so, how much? _\$_3.50			
3) How often do you normally obtain transportation? X□ 1-2 Times/Week □ 3-5Times/Week	? □ Daily □ Othe		Veek
 4) Have you ever been denied transportation service X□No If no, skip to question # 4 A. How many times in the last 6 months has services? □ None □ 3-5 Times If none, skip to question # 4. 	ave you bee		ansportation
B. What was the reason given for refusing your lineligible Space not avaiuble Destination out	lable		s?
5) What do you normally use the service for? X□ Medical □ Education □ Employment □ Life-Sustaining □ Nutritional	on/Training/[/Other	Day Care	
☐ Assistance☐ Service Area Limits☐ Drivers - specify☐ R	n from below our trip? cost ate pick up-s ccessibility ate return pic	specify time o ck up - length - specify leng	n of wait
7) On a scale of 1 to 10 (10 being most satisfied) ra receiving5	te the transp	oortation you	have been
8) What does transportation mean to you? (Permis	ssion granted	d by _Transp	ortation is a

big deal especially appointments.	 	_		tions.)	,	,	
Additional Comments		 					

Staff/LCB Member making call: D. McGill County: BROWARD

Date of Call: 03 / 25 / 202	1	Funding Source: _	_Cash
1) Did you receive transportation? X Yes □ No	n service on 06-30-2020		
2) Where you charged an amou	nt in addition to the co-	payment?	Yes XNo
If so, how much?			
3) How often do you normally ob X 1-2 Times/Week		□ Daily - 7 Days : □ Other	a Week
4) Have you ever been denied to If no, skip to question # 4 A. How many times in the services? X Non-If none, skip to question.	ne last 6 months have e	you been refused	
	□ Space not available□ Destination outside	9	ces?
	e service for? □ Education/Training X Life-Sustaining/Oth		
6) Did you have a problem with X Yes If yes, please state No - If no, skip to ques What type of problem of Advance notice Pick up times not confident Assistance Service Area Limits Drivers - specify Vehicle condition	e or choose problem fro tion # 6 lid you have with your to Cost convenient X Late Acce	rip? pick up-specify tim ssibility return pick up - len rvations - specify l	igth of wait
7) On a scale of 1 to 10 (10 beir receiving. 4	ng most satisfied) rate tl	ne transportation y	ou have been
8) What does transportation mea	an to you? Don't care to	answer. (Permiss	sion granted b

No	for use in publications.)
Additional Comments	_Late to place for that trip

Staff/LCB Member making call: D. McGill County: BROWARD

Date of Call: 03/ 25 / 2021		Funding Source	e: _Cash_	
1) Did you receive transportation service on 08 ? X Yes □ No	/ 05	/ 2019		
2) Where you charged an amount in addition to	the co	-payment?	□ Yes	X No
If so, how much?				
3) How often do you normally obtain transporta □ 1-2 Times/Week X 3-5Times/W	tion? 'eek	☐ Daily - 7 Da☐ Other	ıys a Weel	k
4) Have you ever been denied transportation self no, skip to question # 4	ervices?	?	□ Yes	X No
A. How many times in the last 6 month services? X None □ 3-5 TimesIf none, skip to question # 4.				
B. What was the reason given for refusir Ineligible Space not Lack of funds Destination Other	availab	le	ervices?	
5) What do you normally use the service for? X Medical	Trainin ning/Ot	g/Day Care her		
6) Did you have a problem with your trip on? Yes If yes, please state or choose pro X No - If no, skip to question # 6 What type of problem did you have wit Advance notice Pick up times not convenient Assistance Service Area Limits Drivers - specify Vehicle condition	th your to Cost Cost Late Acce Late	trip? t pick up-specify essibility return pick up - ervations - speci	length of	wait
7) On a scale of 1 to 10 (10 being most satisfied receiving. 7	d) rate t	the transportatio	n you hav	e been
8) What does transportation mean to you?	No cor	mment. (Permi	ission gra	inted by

	for use in publications.)
Additional Comments	

Staff/LCB Me	ember mak	ing call:	D. McGill	County	y: BROWARD		
Date of Call:	03/ 29	/ 2021			Funding Source	ce: _Cash_	
	ceive trans Yes		service on 11	/ 08 /	2019		
2) Where you	u charged a	an amour	nt in addition to	the co-	payment?	□ Yes	X No
If so, how mu	uch?						
			tain transporta X 3-5Times/W		□ Daily - 7 Da □ Other	ays a Wee	k
4) Have you If no, skip to			ansportation s	ervices?		□ Yes	X No
A. Ho se	•	nes in th X None	e □ 3-5 Tir		you been refu ☐ 1-2 Times		
_ _	Ineligible	ds	□ Space not□ Destination	availabl	ransportation se e e service area	ervices?	
	Medical		e service for? □ Education/ X Life-Sustai	/Training ning/Oth	g/Day Care ner		
X No - Wha 	s If yes, plea - If no, skip	ase state to questi roblem di otice es not co ea Limits pecify	or choose pro ion # 6 id you have wit	th your t ☐ Cost ☐ Late ☐ Acce ☐ Late	rip? pick up-specify essibility return pick up - ervations - spec	- length of	wait
7) On a scale receiving.		(10 bein	g most satisfie	d) rate t	he transportatio	on you hav	e been
8) What doe	s transpor	tation me	ean to you? N	Need up	dates of when	driver is	arriving.

(Permission granted by _	Yes	for use in publications.)
Additional Comments		

Staff/LCB Member making call: D.	McGill C	ounty: BROW	ARD	
Date of Call: 03/ 28 / 2021	Funding	Source: _N/A_		
1) Did you receive transportation se	ervice on 07-29-2	2019?	X Yes	No
2) Where you charged an amount in	n addition to the	e co-payment?	? □ Yes	X No
If so, how much?				
3) How often do you normally obtai ☐ 1-2 Times/Week X			- 7 Days a We	eek
4) Have you ever been denied trans If no, skip to question # 4 A. How many times in the I services? X None If none, skip to question a	last 6 months I □ 3-5 Times	have you beei		ısportatior
B. What was the reason give Ineligible	Space not ava	ailable		
5) What do you normally use the set X Medical	☐ Education/Tra		e	
6) Did you have a problem with you ☐ Yes If yes, please state or X No - If no, skip to question What type of problem did y ☐ Advance notice ☐ Pick up times not conv ☐ Assistance ☐ Service Area Limits ☐ Drivers - specify ☐ Vehicle condition	choose proble # 6 you have with y renient	our trip?	k up - length	of wait
7) On a scale of 1 to 10 (10 being neceiving. 10	nost satisfied) r	ate the transp	ortation you h	ave been
8) What does transportation mea Yes for use	•		(Permission o	granted by

Additional Comments Satisfied with Service	

RIDER/BENEFICIARY SURVEY (6)

Staff/LCB Member making call	D. McGill	County: BRO	OWARD		
Date of Call: 03/ 30 / 2020	Fundi	ng Source: _C	cash		
1) Did you receive transportation	on service on 08-	-26-2019?	X Yes	□N	0
2) Where you charged an amo	unt in addition to	the co-paym	ent?	□ Yes	X No
If so, how much?	_				
3) How often do you normally of X 1-2 Times/Week			aily - 7 Day Ither	/s a Weel	<
4) Have you ever been denied If no, skip to question # 4 A. How many times in services? X No If none, skip to quest	the last 6 montl ne □ 3-5 Tir	hs have you l			X No portation Times
B. What was the reason Ineligible Lack of funds Other	☐ Space not ☐ Destination	available		rvices?	
5) What do you normally use th X Medical Employment X Nutritional	□ Education/		Care		
6) Did you have a problem with X Yes If yes, please state No - If no, skip to que What type of problem Advance notice Pick up times not a Assistance Service Area Limit X Drivers - specify Vehicle condition	te or choose pro stion # 6 did you have wit convenient	th your trip?	up-specify t ity n pick up - l	length of	wait
7) On a scale of 1 to 10 (10 be receiving. <u>5</u>	ing most satisfie	d) rate the tra	nsportatior	າ you hav	e been
8) What does transportation Yes for	mean to you?		t. (Permis	ssion gra	nted by

Additional Comments	Need better driver's				

RIDER/BENEFICIARY SURVEY (7)

Staff/LCB Member making call: D.	McGill C	ounty: BROW	ARD	
Date of Call: 03/ 28 / 2021	Funding	Source: _N/A_		
1) Did you receive transportation se	ervice on 07-29-2	2019?	X Yes	No
2) Where you charged an amount in	n addition to the	e co-payment?	? □ Yes	X No
If so, how much?				
3) How often do you normally obtai ☐ 1-2 Times/Week X				eek
4) Have you ever been denied trans If no, skip to question # 4 A. How many times in the I services? X None If none, skip to question a	last 6 months I □ 3-5 Times	have you beei		ısportatior
B. What was the reason give Ineligible	Space not ava	ailable		
5) What do you normally use the set X Medical	☐ Education/Tra		e	
6) Did you have a problem with you ☐ Yes If yes, please state or X No - If no, skip to question What type of problem did y ☐ Advance notice ☐ Pick up times not conv ☐ Assistance ☐ Service Area Limits ☐ Drivers - specify ☐ Vehicle condition	choose proble # 6 you have with y renient	our trip?	ck up - length	of wait
7) On a scale of 1 to 10 (10 being neceiving. 10	nost satisfied) r	ate the transp	ortation you h	ave been
8) What does transportation mea Yes for use	•		(Permission o	granted by

Additional Comments Satisfied with Service	

RIDER/BENEFICIARY SURVEY (8)

Stan/LCB Mer	nberi	naking ca	I. D. MC	ااات	Count	y: BROV	VARD			
Date of Call:	03/	30 / 202	1	Fundii	ng Sour	ce: _Ca	sh	_		
1) Did you rec	eive t	ransportat	ion servic	ce on 03-	-24-2020 ʻ	?	X Yes		□ No	
2) Where you	charg	ed an amo	ount in ad	ldition to	the co-	-paymen	ıt?	□ Yes	X No	0
If so, how muc	h? _		_							
3) How often o X 1-2 T	do you imes/	ı normally Week	obtain tra □ 3-5	ansporta Times/V	ition? Veek	□ Dail □ Oth	y - 7 Da er	ys a W	eek	
serv	uestic man vices?	n # 4 y times in	the last	6 month	ns have	you be			nsportat	ior
□ In □ La	eligib ack of	the reason le funds	□ Sp □ De	ace not	availab	le		rvices	?	
□E	edica	l ment	□ Ed	ucation/	Training/Otl	g/Day Ca her	are			
□ No - What □ A □ P □ A □ S □ C	f yes, If no, type dvanc ick up ssista ervice Orivers ehicle	please standard please standard problem se notice and the secondition please standard please s	ate or cho estion # 6 did you convenie	ose pro have with	th your f Cost Late Acce X Late Rese Othe	trip? : pick up- essibility return p ervations	-specify ick up - s - speci	length fy leng	of wait th of wa	
7) On a scale receiving. <u>6</u>		10 (10 be	eing most	satisfie	d) rate t	the trans	portatio	n you h	nave bee	∍n
8) What doe	s trai Yes		n mean or use in p	-		dom .	(Permis	ssion (granted	by

Additional Comments _	_Needs to be on time

RIDER/BENEFICIARY SURVEY (9)

Staff/LCB Men	nber r	naking ca	I: D. Mo	cGill	County	: BROW	ARD		
Date of Call:	03/	29 / 202	1	Fundi	ng Sourc	ce: _Casl	h		
1) Did you rece	eive tı	ransportat	ion serv	ice on 01-	-07-2020?	•	X Yes		10
2) Where you	charg	ed an am	ount in a	ddition to	the co-	payment	?	□ Yes	X No
If so, how muc	h?		_						
3) How often d ☐ 1-2 T		ı normally Week						ys a Wee	k
serv	uestic man ices?	n # 4 y times in	the las	t 6 montl □ 3-5 Tir	hs have	you bee			
□ In □ La	eligib ack of	the reaso le funds		pace not	availabl	e .		rvices?	
□ Er	edical	ment	□E	ducation			re		
□ No - I What □ Ao □ Pi □ As □ Se □ D	f yes, f no, type dvanc ck up ssista ervice rivers	please st skip to que of problent e notice times not	ate or clestion # I did you Conven	hoose pro 6 u have wi	th your to ☐ Cost ☐ Late ☐ Acce ☐ Late	rip? pick up-s ssibility return p rvations	specify tick up -	time of ware length of fy length	f wait
7) On a scale of receiving. 7	of 1 to	o 10 (10 bo	eing mos	st satisfie	d) rate tl	he transp	oortation	n you hav	re been
8) What does	-	oortation r		you? N/A	A. (Perr	mission g	ranted	by	No

Additional Comments _	_TOPS! Needs another way to pay	

RIDER/BENEFICIARY SURVEY (10)

Staff/LCB Men	nber r	making (call:	D. McGill	C	County	: BROW	/ARD			
Date of Call:	03/	30 / 20	021	F	unding	Sourc	e: _Cas	h	-		
1) Did you rece	eive tı	ansport	tatior	n service o	n 06-30-	-2020?		X Yes		□ No	
2) Where you	charg	ed an a	mou	nt in additi	on to th	ne co-p	ayment	:?	□ Ye	s >	(No
If so, how muc	h?										
3) How often d				otain transp X 3-5Tim			☐ Daily ☐ Othe		ys a V	Veek	
serv	uestio many ices?	n # 4 y times	in th Non	ne last 6 m e □ 3-	nonths	have					
□ In □ La	eligiblack of	le		given for re □ Space □ Destir —	not av	ailable	•		rvices	s?	
□ Er	edical	ment		e service fo □ Educa X Life-Su	tion/Tra			re			
X No - I What □ Ao □ Pi □ As □ Se □ D	If yes f no, s type o dvanc ck up ssista ervice	, please skip to q of proble e notice times n	e stat quest em d e not co imits ify	e or choos tion # 6 lid you hav onvenient	e proble with y	your tr Cost Late p Acces Late	ip? pick up-s ssibility return p rvations	specify ick up -	· lengt	h of w	/ait
7) On a scale of receiving. 9	of 1 to	10 (10	beir	ng most sat	tisfied)	rate th	ne transp	oortatio	n you	have	been
8) What doe		•		mean to	-		۸. (Permiss	sion	grante	ed by

Additional Comments _	_Drivers are good	

RIDER/BENEFICIARY SURVEY (11)

Stan/LCB Memi	ber making cai	I. D. MCGIII	County: Br	KOWARD		
Date of Call:	03/ 30 / 202	1 Fund	ling Source: _	Cash	_	
1) Did you recei	ve transportati	on service on 0	9-20-2019?	X Yes	□ N	10
2) Where you ch	narged an amo	ount in addition	to the co-payr	ment?	□ Yes	X No
If so, how much	?	_				
3) How often do X 1-2 Tin		obtain transport □ 3-5Times			ys a Wee	:k
servic	estion # 4 many times in	the last 6 mon	ths have you			portatior
□ Ine □ Lac	ligible	n given for refus □ Space no □ Destinatio	t available		rvices?	
	dical	he service for? □ Education X Life-Susta	n/Training/Day aining/Other	y Care		
□ No - If What ty □ Adv □ Pic □ Ass □ Ser □ Dri □ Veh	yes, please stano, skip to que ype of problem yance notice k up times not sistance vice Area Limitivers - specify nicle condition	ate or choose pestion # 6 I did you have we convenient	vith your trip? ☐ Cost ☐ Late pick ☐ Accessibi ☐ Late retu ☐ Reservati X Other	up-specify ility ırn pick up - ions - speci	- length of	f wait of wait
7) On a scale of receiving. <u>8</u>	1 to 10 (10 be	eing most satisti	ed) rate the tr	ansportatio	n you nav	/e been
8) What does tr	-	nean to you? G use in publicatio		oice. (Perm	nission gr	anted by

Additional Comments	Need update of how close driver is to place for pick up
·	

RIDER/BENEFICIARY SURVEY (12)

Staff/LCB Member making call: D. McGill County: BROWARD	
Date of Call: 03/ 29 / 2021 Funding Source: _Cash	
1) Did you receive transportation service on 02-15-2020 ? X Yes □ No	
2) Where you charged an amount in addition to the co-payment?)
If so, how much?	
3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week X 1-2 Times/Week ☐ 3-5Times/Week ☐ Other	
4) Have you ever been denied transportation services?	0
If no, skip to question # 4 A. How many times in the last 6 months have you been refused transportati services? X None □ 3-5 Times □ 1-2 Times □ 6-10 Time If none, skip to question # 4.	
B. What was the reason given for refusing you transportation services? Ineligible Space not available Lack of funds Destination outside service area Other	
5) What do you normally use the service for? X Medical	
6) Did you have a problem with your trip on? Yes If yes, please state or choose problem from below X No - If no, skip to question # 6 What type of problem did you have with your trip? Advance notice Pick up times not convenient Assistance Accessibility Service Area Limits Drivers - specify Reservations - specify length of wait Other	t
7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have bee receiving. <u>8</u>	n
8) What does transportation mean to you? Independence. (Permission granted	by

	_yes	for use in publications.)
Additional C	omments	Good TOPS!

Staff/LCB Member making call: <u>Lisa VanVoorhis</u> County: BROWARD 03/30/2021 Date of Call: Funding Source: <u>Transportation Disadvantage</u> 06/30/2020 1) Did you receive transportation service on? □ No 2) Where you charged an amount in addition to the co-payment? ☑ No ☐ Yes \$0.00 If so, how much? 3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week ☐ 1-2 Times/Week □ 3-5Times/Week ☐ Other 4) Have you ever been denied transportation services? ☐ Yes ⊠ No If no, skip to question #4 A. How many times in the last 6 months have you been refused transportation services? ☐ 6-10 Times ☐ 3-5 Times ☐ 1-2 Times If none, skip to question #4. B. What was the reason given for refusing you transportation services? ☐ Space not available ☐ Ineligible ☐ Lack of funds ☐ Destination outside service area ☐ Other 5) What do you normally use the service for? ☐ Education/Training/Day Care ☐ Employment □ Life-Sustaining/Other 6) Did you have a problem with your trip on 06/30/2020? ☐ Yes If yes, please state or choose problem from below ☑ No - If no, skip to question # 6 What type of problem did you have with your trip? ☐ Advance notice ☐ Cost ☐ Pick up times not convenient ☐ Late pick up-specify time of wait ☐ Assistance ☐ Accessibility ☐ Service Area Limits ☐ Late return pick up - length of wait ☐ Drivers - specify ☐ Reservations - specify length of wait ☐ Vehicle condition □ Other 7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving. 8 8) What does transportation mean to you? (Permission granted by Michael Wysocki for use in publications.) **Additional Comments** Helps maintain independence and he uses it all the time.

Rider Initials: MICHAEL WYSOCKI

RIDER/BENEFICIARY SURVEY

Staff/LCB Member making call: <u>Lisa VanVoorhis</u> County: BROWARD Date of Call: | 03/31/2021 Funding Source: <u>Transportation Disadvantage</u> 09/26/2019 1) Did you receive transportation service on? ☐ No 2) Where you charged an amount in addition to the co-payment? ☐ Yes ☑ No \$0.00 If so, how much? 3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week ☐ 1-2 Times/Week □ 3-5Times/Week ☐ Other 4) Have you ever been denied transportation services? ☐ Yes ☑ No If no, skip to question #4 A. How many times in the last 6 months have you been refused transportation services? □ 1-2 Times ☐ 6-10 Times ☐ 3-5 Times If none, skip to question #4. B. What was the reason given for refusing you transportation services? ☐ Space not available ☐ Ineligible ☐ Destination outside service area ☐ Lack of funds ☐ Other 5) What do you normally use the service for? ☐ Education/Training/Day Care ☐ Employment □ Life-Sustaining/Other ☐ Nutritional Dialysis three time a week 6) Did you have a problem with your trip on 09/26/2019 ☐ Yes If yes, please state or choose problem from below ☑ No - If no, skip to question # 6 What type of problem did you have with your trip? ☐ Advance notice ☐ Cost ☐ Pick up times not convenient ☐ Late pick up-specify time of wait ☐ Assistance ☐ Accessibility ☐ Late return pick up - length of wait ☐ Service Area Limits ☐ Reservations - specify length of wait ☐ Drivers - specify ☐ Vehicle condition ☐ Other 7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving. 6.5 8) What does transportation mean to you? (Permission granted by Nicolai Cole for use in publications.)

RIDER/BENEFICIARY SURVEY

Rider: NICOLAI COE

Additional Comments <u>The service is definitely helpful</u>, but the return home trips tend to have long wait times. I am dependent on the service for dialysis treatments. I strongly feel that there should be a priority for those who are receiving treatments like Dialysis or chemotherapy to be pick up on time and delivered home first.

RIDER/BENEFICIARY SURVEY Rider: Noel Smith

Staff/LCB Member making call: Lisa VanVoor	rhis County: BROWARD
Date of Call: 04/01/2021	Funding Source: <u>Transportation Disadvantage</u>
1) Did you receive transportation service on?	06/29/2020 ⊠ Yes □ No
2) Where you charged an amount in addition	to the co-payment? □ Yes ☒ No
If so, how much? \$0.00	Does not have a co-pay
3) How often do you normally obtain transport ☐ 1-2 Times/Week ☐ 3-5Times/	
 ☑ None ☐ 3-5 Times ☐ If none, skip to question # 4. ☐ B. What was the reason given for refuse ☐ Ineligible ☐ Space not 	ns have you been refused transportation services? 1-2 Times □ 6-10 Times sing you transportation services?
☐ Employment	ducation/Training/Day Care fe-Sustaining/Other ysis 3x/week
6) Did you have a problem with your trip on Yes If yes, please state or choose p No - If no, skip to question # 6 What type of problem did you have w Advance notice Pick up times not convenient Assistance Service Area Limits Drivers - specify Vehicle condition	roblem from below
 7) On a scale of 1 to 10 (10 being most satisfi receiving. 9 8) What does transportation mean to you? (F publications.) 	

Additional Comments <u>Been using the transportation for over three years for his dialysis</u> treatments and they are very satisfied with the service

RIDER/BENEFICIARY SURVEY Rider: QAMARUL HASAN Staff/LCB Member making call: <u>Lisa VanVoorhis</u> County: BROWARD 03/30/2021 Date of Call: Funding Source: <u>Transportation Disadvantage</u> 10/17/2019 1) Did you receive transportation service on? □ No 2) Where you charged an amount in addition to the co-payment? ☐ Yes ☑ No \$0.00 If so, how much? 3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week ☐ 1-2 Times/Week ☐ 3-5Times/Week Other 4) Have you ever been denied transportation services? ☐ Yes ⊠ No If no, skip to question #4 A. How many times in the last 6 months have you been refused transportation services? ☐ 6-10 Times ☐ 3-5 Times ☐ 1-2 Times If none, skip to question #4. B. What was the reason given for refusing you transportation services? ☐ Space not available ☐ Ineligible □ Lack of funds ☐ Destination outside service area ☐ Other 5) What do you normally use the service for? ☐ Education/Training/Day Care ☐ Employment ☐ Life-Sustaining/Other □ Nutritional 6) Did you have a problem with your trip on 10/17/2019 ☑ Yes If yes, please state or choose problem from below ☐ No - If no, skip to question # 6 What type of problem did you have with your trip? ☐ Advance notice ☐ Cost ☐ Pick up times not convenient ☐ Late pick up-specify time of wait ☐ Accessibility ☐ Assistance ☐ Service Area Limits □ Late return pick up - length of wait had to call Uber for ride home ☐ Drivers - specify ☐ Reservations - specify length of wait ☐ Vehicle condition ☐ Other

7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving. 8.5

8) What does transportation mean to you? (Permission granted by <u>Qarmarul Hasan</u> for use in publications.)

Additional Comments <u>He doesn't use it very often because his wife transports him most of the time.</u> He is thankful for Broward County transportation service for when he needs it.

RIDER/BENEFICIARY SURVEY Rider: RALPH HOPHAN

Staff/LCB Member making call: <u>Lisa VanVoorhis</u> County: BROWARD
Date of Call: 3/30/2021 Funding Source: <u>Transportation Disadvantage</u>
1) Did you receive transportation service on?
2) Where you charged an amount in addition to the co-payment? ☐ Yes ☒ No
If so, how much? \$0.00
3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week ☐ 1-2 Times/Week ☐ 3-5Times/Week ☐ Other
4) Have you ever been denied transportation services? ☐ Yes ☒ No If no, skip to question # 4 A. How many times in the last 6 months have you been refused transportation services ☒ None ☐ 3-5 Times ☐ 1-2 Times ☐ 6-10 Times If none, skip to question # 4.
B. What was the reason given for refusing you transportation services? ☐ Ineligible ☐ Space not available ☐ Lack of funds ☐ Destination outside service area ☐ Other
5) What do you normally use the service for?
☑ Medical☐ Education/Training/Day Care☐ Employment☐ Life-Sustaining/Other☐ Nutritional
6) Did you have a problem with your trip on? ☐ Yes If yes, please state or choose problem from below ☒ No - If no, skip to question # 6 What type of problem did you have with your trip? ☐ Advance notice ☐ Cost ☐ Pick up times not convenient ☐ Late pick up-specify time of wait ☐ Assistance ☐ Accessibility ☐ Service Area Limits ☐ Late return pick up - length of wait ☐ Drivers - specify ☐ Reservations - specify length of wait ☐ Vehicle condition ☐ Other
7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving.
8) What does transportation mean to you? (Permission granted by Sandra Hophan, wife for use in publications.)
Additional CommentsHe passed away. His wife was very appreciative of the service and the drivers were very patient with her husband. He was not a patient person.

Staff/LCB Member making call: <u>Lisa VanVoorhis</u> County: BROWARD 03/31/2020 Date of Call: Funding Source: Transportation Disadvantage 06/24/2020 1) Did you receive transportation service on? □ No 2) Where you charged an amount in addition to the co-payment? ☑ No ☐ Yes \$0.00 If so, how much? No charge for copay 3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week ☐ 1-2 Times/Week □ 3-5Times/Week ☐ Other 4) Have you ever been denied transportation services? ☐ Yes ⊠ No If no, skip to question #4 A. How many times in the last 6 months have you been refused transportation services? ☐ 6-10 Times ☐ 3-5 Times ☐ 1-2 Times If none, skip to question #4. B. What was the reason given for refusing you transportation services? ☐ Ineligible ☐ Space not available □ Lack of funds ☐ Destination outside service area ☐ Other 5) What do you normally use the service for? ☐ Education/Training/Day Care ☐ Employment □ Life-Sustaining/Other ☐ Nutritional Dialysis treatments 3x/week 6) Did you have a problem with your trip on 06/20/2020? Can't recall that specific day ☑ Yes If yes, please state or choose problem from below ☐ No - If no, skip to question # 6 What type of problem did you have with your trip? ☐ Advance notice ☐ Cost ☐ Pick up times not convenient □ Late pick up-specify time of wait ☐ Assistance ☐ Accessibility ☐ Service Area Limits □ Late return pick up - length of wait ☐ Drivers - specify ☐ Reservations - specify length of wait ☐ Vehicle condition □ Other 7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving. 7 8) What does transportation mean to you? (Permission granted by Robert Rodriguez for use in publications.)

Rider: Robert Rodriguez

RIDER/BENEFICIARY SURVEY

Additional Comments <u>They come later than the pick window</u>. And they know because I keep calling. I have to be on the machine for a specific treatment time and when I arrive late I don't get the complete treatment prescribed.

RIDER/BENEFICIARY SURVEY Rider : SAMUEL PANTOL

Staff/LCB Member making call: Lisa VanVoorhis County: BROWARD
Date of Call: 3/30/2021 Funding Source: <u>Transportation Disadvantage</u>
1) Did you receive transportation service on? 3/2/2020 ⊠ Yes □ No
2) Where you charged an amount in addition to the co-payment? Yes No
If so, how much? \$0.00
3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week ☐ 1-2 Times/Week ☐ 3-5Times/Week ☐ Other
 4) Have you ever been denied transportation services? ☐ Yes ☐ No If no, skip to question # 4 A. How many times in the last 6 months have you been refused transportation services? ☐ None ☐ 3-5 Times ☐ 1-2 Times ☐ 6-10 Times If none, skip to question # 4. B. What was the reason given for refusing you transportation services? ☐ Inclinible
 ☐ Ineligible ☐ Lack of funds ☐ Destination outside service area ☐ Other
5) What do you normally use the service for? ☐ Medical ☐ Education/Training/Day Care ☐ Employment ☐ Life-Sustaining/Other ☐ Nutritional
6) Did you have a problem with your trip on? Yes If yes, please state or choose problem from below No - If no, skip to question # 6 What type of problem did you have with your trip? Advance notice
7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving.
8) What does transportation mean to you? (Permission granted by for use in publications.)
Additional Comments <u>Spoke with the Reception desk at the Plaza Assisted Living Facility and she advised he passed away last March.</u> <u>Did not feel it was appropriate for her to comment on his services.</u>

RIDER/BENEFICIARY SURVEY Rider :_Susan Stein

Staff/LCB Member making call: Lisa VanVoorhis County: BROWARD			
Date of Call: 03/31/2021 Funding Source: <u>Transportation Disadvantage</u>			
1) Did you receive transportation service on?			
2) Where you charged an amount in addition to the co-payment? ☐ Yes ☐ No			
If so, how much? \$0.00 There is no charge at all.			
3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week ☐ 1-2 Times/Week ☐ Other			
4) Have you ever been denied transportation services? ☐ Yes ☒ No If no, skip to question # 4 A. How many times in the last 6 months have you been refused transportation services? ☒ None ☐ 3-5 Times ☐ 1-2 Times ☐ 6-10 Times If none, skip to question # 4.			
B. What was the reason given for refusing you transportation services? ☐ Ineligible ☐ Space not available ☐ Lack of funds ☐ Destination outside service area ☐ Other			
5) What do you normally use the service for? ☑ Medical ☐ Education/Training/Day Care ☐ Employment ☑ Life-Sustaining/Other ☐ Nutritional She uses transportation for weekly dialysis Treatments 3x/week			
6) Did you have a problem with your trip on? Yes If yes, please state or choose problem from below No - If no, skip to question # 6 What type of problem did you have with your trip? Advance notice □ Cost □ Pick up times not convenient □ Late pick up-specify time of wait □ Assistance □ Accessibility □ Service Area Limits □ Late return pick up - length of wait □ Drivers - specify □ Reservations - specify length of wait □ Vehicle condition □ Other			
 7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving. 10 8) What does transportation mean to you? (Permission granted by <u>Susan Stein</u> for use in 			
publications.)			
Additional Comments <u>She is very satisfied with her transportation service</u> . <u>Since Covid the van only transports one person at a time, safety protocols, the driver is very nice and arrives on time</u> .			

RIDER/BENEFICIARY SURVEY Rider SYLVESTER TURNER

Staff/LCB Member making call: Lisa VanVoorhis County: BROWARD
Date of Call: 03/31/2021 Funding Source: <u>Transportation Disadvantage</u>
1) Did you receive transportation service on?
2) Where you charged an amount in addition to the co-payment? ☐ Yes ☐ No
If so, how much? \$0.00
3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week ☐ 1-2 Times/Week ☐ 3-5Times/Week ☐ Other
4) Have you ever been denied transportation services? ☐ Yes ☐ No If no, skip to question # 4 A. How many times in the last 6 months have you been refused transportation services? ☐ None ☐ 3-5 Times ☐ 1-2 Times ☐ 6-10 Times If none, skip to question # 4.
B. What was the reason given for refusing you transportation services? ☐ Ineligible ☐ Space not available ☐ Lack of funds ☐ Destination outside service area ☐ Other
5) What do you normally use the service for?
☐ Medical☐ Education/Training/Day Care☐ Employment☐ Life-Sustaining/Other☐ Nutritional
6) Did you have a problem with your trip on? Yes If yes, please state or choose problem from below No - If no, skip to question # 6 What type of problem did you have with your trip? Advance notice Pick up times not convenient Assistance Accessibility Service Area Limits Drivers - specify Reservations - specify length of wait Other
7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving.
8) What does transportation mean to you? (Permission granted by for use in publications.)
Additional Comments Contacted her 3x's, no call back to complete the survey

RIDER/BENEFICIARY SURVEY Rider: Tetriee Carter

Staff/LCB Member making call: Lisa VanVoo	rhis County: BR0	OWARD	
Date of Call: 03/31/2021	Funding Source: _Tr	ansportation Disadv	antage
1) Did you receive transportation service on?	06/29/2020	☐ Yes ☐] No
2) Where you charged an amount in addition	to the co-payment?	☐ Yes ☐ No	
If so, how much? \$0.00			
3) How often do you normally obtain transport ☐ 1-2 Times/Week ☐ 3-5Times/	•	Days a Week	
If none, skip to question # 4.	ns have you been refu 1-2 Times ☐ 6-10) Times	
B. What was the reason given for refus ☐ Ineligible ☐ Space no ☐ Lack of funds ☐ Destinat ☐ Other			
	ducation/Training/Day fe-Sustaining/Other	Care	
6) Did you have a problem with your trip on Yes If yes, please state or choose p No - If no, skip to question # 6 What type of problem did you have w Advance notice Pick up times not convenient Assistance Service Area Limits Drivers - specify Vehicle condition	roblem from below vith your trip? ☐ Cost	up - length of wait	
7) On a scale of 1 to 10 (10 being most satisfications).			
8) What does transportation mean to you? (Pe in publications.)	ermission granted by _		for use
Additional Comments <u>Contacted her 3x's</u> ,	no call back to com	plete the survey.	

RIDER/BENEFICIARY SURVEY Rider Name: THERESA FANNING

Staff/LCB Member making call: <u>Lisa VanVoorhis</u> County: BROWARD
Date of Call: 03/31/2021 Funding Source: <u>Transportation Disadvantage</u>
1) Did you receive transportation service on? 10/10/2019
2) Where you charged an amount in addition to the co-payment? Yes No
If so, how much? \$0.00
3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week ☐ 1-2 Times/Week ☐ 3-5Times/Week ☐ Other
4) Have you ever been denied transportation services? ☐ Yes ☐ No If no, skip to question # 4 A. How many times in the last 6 months have you been refused transportation services ☐ None ☐ 3-5 Times ☐ 1-2 Times ☐ 6-10 Times If none, skip to question # 4.
B. What was the reason given for refusing you transportation services? ☐ Ineligible ☐ Space not available ☐ Lack of funds ☐ Destination outside service area ☐ Other
5) What do you normally use the service for?
☐ Medical☐ Education/Training/Day Care☐ Employment☐ Life-Sustaining/Other☐ Nutritional
6) Did you have a problem with your trip on? Yes If yes, please state or choose problem from below No - If no, skip to question # 6 What type of problem did you have with your trip? Advance notice Pick up times not convenient Assistance Accessibility Service Area Limits Late return pick up - length of wait Drivers - specify Reservations - specify length of wait Other
7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving.
8) What does transportation mean to you? (Permission granted by for use in publications.)
Additional CommentsThe phone is unavailable or restricted service is unavailable for

RIDER/BENEFICIARY SURVEY Rider Name: THOMAS SNELL

Staff/LCB Member making call: Lisa VanVoc	orhis County: BROW	/ARD
Date of Call: 03/31/2021	Funding Source: <u>Tran</u>	sportation Disadvantage
1) Did you receive transportation service on?	08/09/2019	⊠ Yes □ No
2) Where you charged an amount in addition	to the co-payment?] Yes ⊠ No
If so, how much? \$0.00		
3) How often do you normally obtain transport ☐ 1-2 Times/Week ☐ 3-5Times		ays a Week
4) Have you ever been denied transportation If no, skip to question # 4 A. How many times in the last 6 mont ☑ None ☐ 3-5 Times ☐ If none, skip to question # 4.		•
	sing you transportation senot available tion outside service area	ervices?
	Education/Training/Day Ca ife-Sustaining/Other	are
6) Did you have a problem with your trip on ☐ Yes If yes, please state or choose p ☐ No - If no, skip to question # 6 ☐ What type of problem did you have v ☐ Advance notice ☐ Pick up times not convenient ☐ Assistance ☐ Service Area Limits ☐ Drivers - specify ☐ Vehicle condition	problem from below	- length of wait
 7) On a scale of 1 to 10 (10 being most satisfaceiving. 8 8) What does transportation mean to you? 		•
use in publications.)		

Additional Comments Had to move out of the area because of Covid 19. Only recently moved back to Broward and in the process of reapplying for the program. The program is definitely helpful when you don't have transportation.

RIDER/BENEFICIARY SURVEY Rider Name: WHITNEY JONES

Staff/LCB Member making call: <u>Lisa VanVoorhis</u> County: BROWARD
Date of Call: 03/31/2021 Funding Source: <u>Transportation Disadvantage</u>
1) Did you receive transportation service on?
2) Where you charged an amount in addition to the co-payment? ☐ Yes ☒ No
If so, how much? \$0.00 You have no copay
3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week ☐ 1-2 Times/Week ☐ Other ☐ Other
4) Have you ever been denied transportation services? ☐ Yes ☒ No If no, skip to question # 4 A. How many times in the last 6 months have you been refused transportation services? ☒ None ☐ 3-5 Times ☐ 1-2 Times ☐ 6-10 Times If none, skip to question # 4.
B. What was the reason given for refusing you transportation services? ☐ Ineligible ☐ Space not available ☐ Lack of funds ☐ Destination outside service area ☐ Other
5) What do you normally use the service for? ☑ Medical ☐ Education/Training/Day Care ☑ Employment ☐ Life-Sustaining/Other ☐ Nutritional
6) Did you have a problem with your trip on 06/30/2020? Can't recall a problem on that specific date Yes If yes, please state or choose problem from below No - If no, skip to question # 6 What type of problem did you have with your trip? Advance notice Pick up times not convenient Assistance Accessibility Service Area Limits Drivers - specify Reservations - specify length of wait Other Drivers and dispatchers can be rude
 7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving. 3 8) What does transportation mean to you? (Permission granted by <u>Whitney Jones</u> for use in publications.) Additional Comments <u>TOPS can do better with pick up times and reducing wait times.</u>

RIDER/BENEFICIARY SURVEY

Staff/LCB Member making call: CB for M. Magill County: BROWARD Date of Call: 4/14/21 Funding Source: n/a 1) Did you receive transportation service on 7/1/2019 and 6/30/2020? X Yes □ No 2) Where you charged an amount in addition to the co-payment? X No lf so, how much? 3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week X 1-2 Times/Week ☐ 3-5Times/Week □ Other 4) Have you ever been denied transportation services? □ Yes X No If no, skip to question #4 A. How many times in the last 6 months have you been refused transportation ☐ 3-5 Times ☐ 1-2 Times ☐ 6-10 Times □ None If none, skip to question #4. B. What was the reason given for refusing you transportation services? ☐ Ineligible ☐ Space not available □ Lack of funds □ Destination outside service area □ Other 5) What do you normally use the service for? X Medical ☐ Education/Training/Day Care ☐ Employment ☐ Life-Sustaining/Other ☐ Nutritional 6) Did you have a problem with your trip on Reported about 2-3 weeks ago driver speeding and scared her very bad. In addition, below X's X Yes If yes, please state or choose problem from below □ No - If no, skip to question # 6 What type of problem did you have with your trip? ☐ Advance notice ☐ Cost X Pick up times not convenient ☐ Late pick up-specify time of wait ☐ Assistance ☐ Accessibility □ Service Area Limits ☐ Late return pick up - length of wait occasionally 45 min-hour wait time X Driver speeding recklessly ☐ Reservations - specify length of wait ☐ Vehicle condition □ Other 7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving. 7 overall

8)	What does tra	nsportation mea	ın to you? (P	ermission grar	nted by G.	Williams for	use in
•	publications.)	"A lot because	l don't have a	any way to get	around.	Sometimes	have
	trouble balanc	ing and walking	so it helps a	lot."			
		T					

Additional Comments	
	<mark>n/a</mark>

RIDER/BENEFICIARY SURVEY

Staff/LCB Member making call: CB for Magill Gabriel County: BROWARD Date of Call: 4/14/21 Funding Source: n/a 1) Did you receive transportation service on 7/1/2019 and 6/30/2020? x Yes □No 2) Where you charged an amount in addition to the co-payment? X No □ Yes If so, how much? 3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week □ 1-2 Times/Week ☐ 3-5Times/Week X Other, less than 5 times ☐ Yes X No 4) Have you ever been denied transportation services? If no, skip to question #4 A. How many times in the last 6 months have you been refused transportation □ None □ 3-5 Times □ 1-2 Times ☐ 6-10 Times services? If none, skip to question #4. B. What was the reason given for refusing you transportation services? ☐ Ineligible
 ☐ Lack of funds
 ☐ Destination outside service area □ Other 5) What do you normally use the service for? ☐ Medical □ Education/Training/Day Care ☐ Employment X Other □ Nutritional 6) Did you have a problem with your trip on _____ ☐ Yes If yes, please state or choose problem from below X No - If no, skip to guestion # 6 What type of problem did you have with your trip? ☐ Advance notice □ Cost ☐ Pick up times not convenient ☐ Late pick up-specify time of wait ☐ Assistance □ Accessibility ☐ Service Area Limits ☐ Late return pick up - length of wait ☐ Reservations - specify length of wait ☐ Drivers - specify □ Other □ Vehicle condition 7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving. Overall 8 8) What does transportation mean to you? (Permission granted by for use in publications.) Helping out the disability community.

Additional Comments

Access ran out in November. Moved out of area. Fee in that area was very high for taxi (upwards of \$80) and I felt they took advantage of me.

(The TD Planning Administrator send a direct email to the client with a screenshot of the CTD webpage listing for CTC contact information by county (Escambia) so the client could tap into the paratransit services in that area.)

RIDER/BENEFICIARY SURVEY

Staff/LCB Member making call: CB for Melanie Magill County: BROWARD Date of Call: 4/14/21 Funding Source: n/a 1) Did you receive transportation service on 7/1/2019 and 6/30/2020? ☐ Yes X No 2) Where you charged an amount in addition to the co-payment? □ Yes □ n<mark>/a</mark> If so, how much? 3) How often do you normally obtain transportation?

□ Daily - 7 Days a Week □ 1-2 Times/Week X 3-5Times/Week for summer camp

Other 4) Have you ever been denied transportation services? ☐ Yes X No If no, skip to question #4 A. How many times in the last 6 months have you been refused transportation □ None □ 3-5 Times ☐ 1-2 Times □ 6-10 Times If none, skip to question # 4. B. What was the reason given for refusing you transportation services? ☐ Ineligible ☐ Space not available ☐ Lack of funds □ Destination outside service area □ Other 5) What do you normally use the service for? ☐ Medical X Education/Training/Day Care ☐ Employment ☐ Life-Sustaining/Other ☐ Nutritional 6) Did you have a problem with your trip on X Yes If yes, please state or choose problem from below □ No - If no, skip to question # 6 What type of problem did you have with your trip? ☐ Advance notice ☐ Late pick up-specify time of wait ☐ Pick up times not convenient ☐ Assistance ☐ Accessibility X Late return pick up - length of wait ☐ Service Area Limits □ Drivers - specify ☐ Reservations - specify length of wait □ Vehicle condition □ Other 7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving. Overall 8 8) What does transportation mean to you? (Permission granted by J. Blake's mom for use in publications.) "More independence for my son!"

Additional Comments "Late arrival for return from camp to home delayed and mom was forced to have to drive to pick up and bring home on a couple occasions." "Great program. Love it! Wish we could use it more but with Covid not travelling."

RIDER/BENEFICIARY SURVEY

Staff/LCB Men	nber making call:	CB for M. Mag	jill (County: BROW	/ARD				
Date of Call:	4/15/21			Funding Sour	ce: n/a				
1) Did you rece	eive transportation	n service on 7/	1/2019 aı	nd 6/30/2020?	X Yes	□ No			
2) Where you	charged an amou	int in addition to	the co-p	payment?	□ Yes	X No			
If so, how muc	h?								
3) How often d X 1-2 Ti	o you normally ol <mark>mes/Week</mark>	btain transporta □ 3-5Times/W	ition? /eek	□ Daily - 7 Da □ Other	ays a Wee	k			
4) Have you ev	ver been denied t	ransportation s	ervices?		□ Yes	X No			
A. How many times in the last 6 months have you been refused transportation services? None 3-5 Times 1-2 Times 6-10 Times If none, skip to question # 4.									
□ Ind □ La	was the reason eligible ack of funds ther	☐ Space not ☐ Destination	ng you tr available n outside	ansportation se e service area	ervices?				
5) What do you normally use the service for? X Medical									
☐ Yes It X No - I: What ☐ Ac ☐ Pi X As ☐ Se ☐ Dr	e a problem with yes, please state no, skip to ques type of problem of vance notice ck up times not cosistance ervice Area Limits rivers - specify ehicle condition	e or choose pro tion # 6 did you have wit onvenient	th your tr Cost Late Acces	m below ip? pick up-specify ssibility return pick up - rvations - spec	· length of	wait			
7) On a scale of receiving.	of 1 to 10 (10 beir Overall 10	ng most satisfie	d) rate th	ne transportatio	on you hav	ve been			
	ransportation me .) <mark>"Since I don't h</mark>								

a Covid vaccine. My main thing is to have to and from rides for medical reasons. If I did not have, that is one anxiety then that I don't have to worry about. I know they will be there. It has been a godsend for me."

Additional Comments

During callbacks the recording might not tell you what time they will pick you up. Mostly okay pick up times. Sometimes driver does not get out of vehicle to go to the door to announce/knock. Happens when they have to pick up more than one passenger on the route, not the stop. Due to the time on hold to make reservations I have given up as I had to hold so long. There should be a time limit. The recording is garbled. Not sure what is being offered or said regarding call back. Think it is about a certain age and that you won't lose your spot. Might want to check the recording for quality. When you make a reservation and you have to give a return trip time, sometimes when you go in a doctor's office your treatment is different and it is hard to predict how long you are going be in that location for care. If the driver is there but you are still hooked up to an IV the driver doesn't stay past the normal pickup period and that forces you to reschedule or find a ride. Suggest you offer to other riders that if they are also experiencing this that they pad the time for pickup so they don't have to arrange for a reschedule or find a ride. One of the drivers came to pick me up from a medical appointment and I was getting ready to get in the vehicle, but I had to go to bathroom. The driver told me to to and he would wait. This man was very understanding and patient and I was extremely grateful to him for that. Helped me to relax and enjoy the ride and not worry about soiling the vehicle or myself.

RIDER/BENEFICIARY SURVEY

Staff/LCB Member making call: CB for Magill County: BROWARD Date of Call: 4/15/21 Funding Source: n/a 1) Did you receive transportation service on 7/1/2019 and 6/30/2020? X Yes □ No 2) Where you charged an amount in addition to the co-payment? ☐ Yes X No If so, how much? 3) How often do you normally obtain transportation? ☐ Daily - 7 Days a Week □ 1-2 Times/Week X 3-5Times/Week □ Other □ Yes X No 4) Have you ever been denied transportation services? If no, skip to question #4 A. How many times in the last 6 months have you been refused transportation ☐ 3-5 Times ☐ 1-2 Times ☐ 6-10 Times □ None If none, skip to question #4. B. What was the reason given for refusing you transportation services? □ Space not available ☐ Ineligible □ Lack of funds ☐ Destination outside service area X Other did not know I had to reapply 5) What do you normally use the service for? ☐ X Education/Training/Day Care Employment ☐ Life-Sustaining/Other □ X Nutritional 6) Did you have a problem with your trip on ☐ Yes If yes, please state or choose problem from below X No - If no, skip to guestion # 6 What type of problem did you have with your trip? ☐ Advance notice ☐ Late pick up-specify time of wait ☐ Pick up times not convenient ☐ Assistance ☐ Accessibility ☐ Late return pick up - length of wait ☐ Service Area Limits □ Drivers - specify ☐ Reservations - specify length of wait □ Vehicle condition □ Other 7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving. Overall 8 8) What does transportation mean to you? (Permission granted for use in publications.) Independence to let me go where I want to go.

Additional Comments Happy and satisfied. Drivers are very polite and she likes being escorted to door to feel safe.