

**Catherine Mick:** We are going to get started here. My name is Katie Mick. I'm the Chief Administrative Officer for the Executive Office of Health and Human Services. I am delighted to see so many of you in the audience today. I've had the opportunity to speak with a few of you in advance. The conversation today will be your conversation. We are here to listen to your input, suggestions, and ideas today.

I wanted to run through some additional opening information, however. The first thing I would like to do is talk about issues related to this space. Emergency exits are located in all four corners of the auditorium. Fire extinguishers are located at both the front right and left side of the auditorium near where the Commission Members are sitting. There are bathrooms located at the rear of the auditorium to the crowd's left. Accessible bathrooms are located to the rear, via the elevator, on the lower level.

For those of you who did not have an opportunity to sign in at the front door, we are asking that - if you are interested in speaking - you may sign in now so that we can keep track of those who would like to speak and also keep on schedule. We want to be cognizant of everyone's time here today and make sure that everyone has an opportunity to speak. I'll go over the ground rules in just a moment.

I did want to let you know that for communication access at this meeting we have a CART provider. Please be mindful of our communications rules by raising your hand and identifying yourself by name before you speak. Also, should you require a Spanish language interpreter, we do have that available. Does anyone at this point need a Spanish language interpreter? Please raise your hand. The interpreter is not here yet.

Just a couple of other points of business - we'll come back to that when our Spanish language Interpreter arrives. We wanted to note that the Commission has established a website which is noted on the flier materials available in the front of the room near the sign-in sheets. We have this flier available in English, Spanish, large print, and Braille. The website is listed on the flier as well. I'll spell it out for you: [www.MBTA.com/execorder530](http://www.MBTA.com/execorder530). The reason why I wanted to introduce this first is that the CART file from this meeting as well as those from the other public sessions, will be available on that website for the public to review in the coming weeks. Secondly, the Commission has an e-mail address as follows: [execorder530@MBTA.com](mailto:execorder530@MBTA.com). We also have a telephone number for messages only. It is (617) 222-6260. Again, this information is all available on the fliers near the sign-in sheet. We would ask that if you have additional comments after this session, and you want to provide those to us, you use one of those mechanisms or attend a future meeting.

Again, I wanted to first take a moment to introduce the members of the Commission that are here today. I am Catherine Mick. I'm the Chief Administrative Officer for the Executive Office of Health and Human Services. I'm here representing Secretary JudyAnn Bigby. We recognize that an accessible, well coordinated, efficient transportation system is a really big issue. Otherwise, none of you would be here today taking time out of your busy schedules to provide your insights. We have a responsibility to find permanent solutions to these long-standing mobility issues and on behalf of Secretary Bigby, I thank you for being here.

I will start to my left for the other Commission Members to identify themselves and speak about the role they are serving on this Commission.

**Michael Lambert:** My name is Michael Lambert. I work for the MBTA and am here representing General Manager Jonathan Davis.

**Anne Hartstein:** I'm Secretary of Elder Affairs Anne Hartstein.

**Mohammed Khan:** Hi. My name is Mohammed Khan. I'm the Administrator of the Montachusett Regional Transit Authority located in Fitchburg.

**Judith O'Connor:** My name is Judith O'Connor. I'm the Millbury Council on Aging Director. Millbury is a town located outside of Worcester.

**Cheryl Lucier-Poppe:** I am Cheryl Lucier-Poppe from the Department of Veterans Services. I am here representing Secretary Coleman Nee on this Commission.

**Will Rodman:** My name is Will Rodman. I manage the Boston office of Nelson-Nygaard. I've been working on paratransit and human services transportation issues for the past 30 years.

**Denise Karuth:** Hello. My name is Denise Karuth. I work for the Stavros Independent Living Center. I was the Chair of the Governor's Commission on Accessible Transportation that was organized in the 1980s by Governor Michael Dukakis.

\_\_\_\_\_: I'm here from the Greater New England Chapter of the National Multiple Sclerosis Society representing Linda Guidod from our organization.

**Francis Gay:** Hello. My name is Francis Gay. I am the Administrator of the Greater Attleboro-Taunton Regional Transit Authority in southeastern Massachusetts.

**Jini Fairley:** Hi. My name is Jini Fairley. I am one of two consumers on this Commission. I use both the MBTA RIDE and the MetroWest Regional Transit Authority paratransit system. I'm the Director of Services at the MetroWest Center for Independent Living.

**Rebecca Deusser:** Hello. I'm Rebecca Deusser. I'm here representing Secretary Jay Gonzales.

**Thomas Cahir:** Hello. May I say a few words here? Good afternoon and thank you to the administration of Cape Cod Community College for accommodating us when we needed a facility. For those who are not familiar with me, I formerly worked for the State and worked on precisely these kinds of issues - the issues we are charged with addressing now. I see many of my former colleagues, particularly Joanne Champa, who made these issues a priority because they are important to thousands of folks in the Commonwealth who are in need of public transportation and many disabled folks who need reliable transportation.

I commend the Patrick/Murray administration for signing this Executive Order and creating this Commission. The Commission will certainly make a difference when we develop a report, which we'll be doing within the next 180 days. We are charged with looking at the Commonwealth as a transportation network and finding ways to improve the social services and paratransit services across the State. What I'm trying to do as I listen to the folks who testify is to find ways to maximize efficiency. I think that if we use state resources efficiently and keep the cost down, we can look at all the taxpayer-funded vehicles and look at ways to do things better – share rides as my colleague Mohammed Khan has been talking about. I'm pleased to participate today and look forward to hearing others who will be making comments and observations.

Lastly, I wanted to say that over at the Cape Cod Regional Transit Authority – I've been there for over a year now – we are making a lot of changes, hopefully in a very positive way. We have been investing in technology to create efficiencies; we are looking at service in real-time; we have the ability to purchase more vehicles and make the transportation services more accessible. Focusing on addressing the needs of our senior population, Cape Cod and Barnstable is a bellwether to the rest of the nation. We have a significant senior population that cares a lot about transportation accessibility.

I want to say, Madam Chair, thank you for chairing this session today. I look forward to listening to the testimony and hopefully learning things for developing a report. Thank you.

**Catherine Mick:** Thank you for welcoming all of us to the Cape. It is a beautiful day to be here for sure. I want to highlight an overview of what the Commission's charge is and give you a framework of the discussion that will be underway. The Commission for Reform of the Community, Social Service and Paratransit Transportation was created by Governor Patrick in April of 2011. The purpose of this Commission is to conduct a real comprehensive review of all paratransit, community and human services transportation across the Commonwealth so that we can gather the public's input regarding these services and provide detailed actionable recommendations to the Governor in a report in the next several months. Public stakeholder input is really critical to all of this. It is crucial for us, as Commission members, to have a better understanding of your transportation needs and of your concerns and of your experiences as we gather our ideas and create recommendations for real sustainable reform. For this reason we are looking forward to hearing from you all today and hearing what you have to say.

I want to take a moment to welcome Clinton Bench. I want to introduce to him as well.

**Clinton Bench:** Thank you. My name is Clinton Bench. I am the Deputy Director for Planning at the Massachusetts Department of Transportation. I'm representing the co-chair of the Commission, Secretary Richard Davey. Thanks, Katie.

**Catherine Mick:** Thank you. We want to be very cognizant and respectful of your time here today in order that everyone who wishes to speak will have an opportunity to do so. So that this session runs smoothly, I am going to run through, very briefly, how we are structuring the session as well as ground rules we are asking that folks take into consideration as you provide your testimony.

As I indicated before, there is a sign-in sheet located at the front of the auditorium. Anyone wishing to speak should indicate that on the sheet. Please raise your hand if you did not sign in or you did sign in but didn't indicate that you wish to speak. We'll make sure that someone gets to you and gets the information. Second is that only one person speaks at a time. We would ask that the person who is speaking may not speak again until everyone in the room has had an opportunity to speak. We want to make sure, again, that everyone's voice and opinion is heard today. We have two people who will be walking around the auditorium with microphones - Paula George and Joanne Champa. When we call your name, you can raise your hand and one of them will hand you the microphone. We ask that you limit your comments to three minutes. The Commission staff will indicate when the time is up. We'll sound a soft alarm. There will be a one-minute warning signal so you understand where we are in terms of time. This is a small group, so I think we can certainly work with what time we have available to us and who is here. We do want to be understanding and respectful for folks who will be joining us over the course of two hours today and make sure that we have time for others to speak as well as additional folks join us.

We would ask that you keep your comments focused on the overarching goals of this Commission. If you are unable or do not wish to make a comment at this point, as we indicated earlier, there are other platforms to do so. You can send an e-mail to the e-mail address that's on the flier in the front of the room. You can call the phone line we provided earlier. The TTY number is (617) 222-5415; this is indicated on our flier. Or, you can send snail mail to the MBTA at 45 High Street, Fifth Floor, c/o Executive Order 530, Boston, MA 02210. For those with speech disabilities, we'll allow extra time for commentary and we'll ask that Commission staff repeat what has been said if there's anything that is unclear.

Given the level of attendance that we have at the moment and the interest in speaking, I would ask that the Commission members hold their comments and questions until after the speaker list has been completed. At that point in time, I'll look to the Commissioners to see if there are any questions or clarifying comments.

I think all of you who are sitting here today have a very large vested interest in the issues at hand. We are asking your input to really better understand what we can do in order to use our resources that are available to us more effectively and efficiently to meet our obligation to provide

quality services. We would be most grateful if you could focus on any ideas for service improvements or modifications to the existing service system that could help maintain or enhance our current level of service and the delivery method of those services that would enhance quality, customer service, or the efficiency of those services that you describe those to us. Second, that if you have any ideas, suggestions, or feedback around potential modifications to any existing eligibility processes that are utilized by The RIDE, the regional transit authorities, or human service agencies that you describe those to us as well.

At this point in time, we will open up the meeting to public comment. The first person who has indicated that she would like to speak here today is Jane Perry. Could you please identify yourself.

**Jane Perry:** Thank you very much. Good afternoon and thank you for the opportunity to allow me to address this Commission. There are people on this Commission who know me. I'm visually impaired, as my white cane indicates. I'm here representing the visually impaired, disabled, and senior citizens as a transportation advocate. The most important thing is that I've been a paratransit rider for the past 32 years. It is a great venue to get to where you have to go - such as when I worked at the hospital, currently when I have to do errands, go to church, and do things independently even though I cannot drive.

Paratransit is a wonderful thing. The best asset is the drivers. They are the driving force behind any RTA. They are kind and understanding and they do everything that they can to provide the best ride you can possible have. It is a safe ride. They understand that maybe you have to go a long distance to your house, or that you are in a wheelchair. Sometimes when you schedule a ride, those things are not in the system. That needs to be addressed. The other thing that is positive - CCRTA recently instituted a policy to address scheduling multiple rides within one day so you don't have to take a taxicab. In Falmouth there is only one taxicab that gives a 25% discount to the seniors and the disabled.

What should we do going forward? What are the positive outcomes that I see this Commission should look into? First of all I think that they should have a seamless software program throughout the State. Another issue is when I go to Boston to use The RIDE, or if I have to go to Springfield to visit a friend, I have to transfer all of my information to the local RTA so they will know I've been riding the paratransit and I'm eligible. There should also be a seamless card, such as the Charlie Card or the blind access card, so you don't have to go from one billing venue to another.

CCRTA has implemented a fare system that I think is great. They used to do advance billing. Now, it is pay as you go. I think that's a good system because people often realize that they would have to pay in advance and would not have enough money because they are on fixed incomes. I think it would be useful to have mandatory driver training and in-service training.

It would be helpful to have a working group at each of the RTAs to hear the problems - every RTA has problems. We have to work through them together. I think the advisory group should consist of (in our RTA on the Cape) one seasoned long-term driver, a fairly new driver, a person who uses the services, and a disabled individual from the upper Cape, lower Cape and mid-Cape.

Please be mindful that most people do not have access to a computer - even though we are in the 21<sup>st</sup> Century. I think we should do more outreach, more coordinating of services such as a quarterly newsletter, reaching out to the Councils on Aging, having meetings with seniors or the Chamber of Commerce. When there's money available, I think we should have all-day, Sunday service, which we don't have now - all-day holiday service, and extended hours at night so we do not have to pay the exorbitant taxi fares to go out to dinner or to the movies or a meeting. I use community access station to stay informed of local news because if I were to take a cab to my Town Hall to attend a meeting, it would cost me \$25 one way.

We need to think of cost savings for the seniors in our town. Every Cape Cod town has a senior population that approximates a third of the total population. We live in an area that is best described as a hand with the fingers being villages. I live in a village within a village in the Town of Falmouth. We had to give up our extra bus for the Falmouth Council on Aging due to funding constraints. We are at a loss without that bus. The seniors really relied on that. In closing, I would like to say that it is really nice to see my friend, Jini Fairley.

For those on this Commission who do not ride the bus, you really need to get out there and ride the bus in your area because the problems are not here at this table, or in the boardroom, they are out there. As I say at every advisory board meeting that I go to, I'm a firm believer that until I go to the big bus stop in the sky, I will be using paratransit to maintain my independence.

"Charlie" is next. If you take public transportation or paratransit on the Cape, I can guarantee you that you will not get lost. You will say "that was a great experience, I think I'll do it again." We need to realize that public transportation is fun, fundamental, and it is for everyone. Again, I thank you for the opportunity to address this group and I will happily entertain any questions. Thank you very much.

**Thomas Cahir:** It is not really a question. A lot of folks from the Cape know Jane. I want to publicly acknowledge her enormous contributions not just today, but for years on the Cape to make us a better public transportation system. I've met with her in my office several times since I've been the Administrator. She's had invaluable recommendations for improvement. We continue to consult her. As we develop this report, her input is going to be very useful. So Jane, standby. We may be calling on you for assistance. Thank you for all your good work and advocacy.

**Jane Perry:** I look forward to working with you. Please do not hesitate to call upon me.

**Catherine Mick:** As no one else indicated that they are interested in making a comment at today's session, I'm going to run through the list here because people may have changed their minds since they initially signed in. We have quite a few people sitting in the audience today. If you do not wish to make a comment, if you could just indicate that, we'll move on to the next person. Donna Lessier, Corey Brinkhart, Cathy Taylor, Eve? Would you like to speak?

**Eve \_\_\_\_\_:** Thank you. My name is Eve. I work for the Council on Aging for the Town of Bourne. I'm the bus driver. I started working for the Council on Aging about nine years ago. I came from a small town called Millis. I was a school bus driver. When I moved to the Cape, I had no knowledge of public transportation - we either walked wherever we wanted go in our little farm town or we had our own cars. When I moved here, and took the job as bus driver working with seniors, I didn't realize how much of a need there is out there for our senior population and also for individuals with disabilities. I'm not only the bus driver, but I'm the eyes and ears of some of the seniors who have no family or do have family that doesn't even care about them.

There is a need for transportation and much more for these seniors. They need one-on-one, and I think that's what we really need to look at. You are asking these seniors to give up their licenses because they've been in so many accidents out there that we've seen on the news. If you don't give them a choice with the transportation or some means of transportation, they will continue to drive because they know that they have no other way to get around. I think that's what we really need to look at. I'm really glad that I came here today to see, you know, what this is really all about. Thank you.

**Thomas Cahir:** I live in Bourne and I know with Judy on the panel, she's the expert on the Council on Aging concerns we can have some positive insight into your situation. We had a discussion at the Lawrence hearing. During that discussion, Judy O'Connor said that she will provide transportation to anyone in her town - not just seniors. In my travels, I oftentimes hear that there are insurance concerns or other issues that prevent Councils from doing the

necessary transportation that we would all like to see. I know that here on the Cape, Paula George has a great relationship with all 15 Councils on Aging, and I'm in having either Judy or the young lady from Bourne explain if there are enough drivers to handle the work that needs to be done in the Town of Bourne.

**Eve \_\_\_\_\_**: The problem with Bourne is that we are on the upper Cape - on the line where Barnstable and Plymouth counties meet. I have found that if a senior needs to be transported to Plymouth County, anyplace in Plymouth County and I'm not available, there are no public alternatives for them. They have to take a cab because the system that serves Plymouth County will not come to Barnstable County to pick them up.

If I'm not available and they have to travel anywhere on Cape and islands, another reference would be the RTA. If they are going to Plymouth or Wareham or Dartmouth or certain other medical facilities, they have no options. That's a problem that is encountered frequently. To take a taxi from Wareham to Bourne is \$40.00. That's a lot of money.

**Thomas Cahir**: I have a question for you. Are there resources - to Jane's point - trainings or other things that you might think would make your job easier or help the town attract people to be drivers?

**Eve \_\_\_\_\_**: I'm a town employee. I get paid by the town. I'm in their budget. People driving other buses are typically those under the Senior Tax Workoff Program. This program allows individuals to work for a certain number of hours per year and have a reduction on their property taxes.

Not just anybody can get inside a bus and drive it. Drivers need some kind of training. Granted it is not a CDL vehicle, but passengers are seniors. Drivers need to be particularly alert while driving. They need driver training not just to help the passengers, but for themselves as well. Right now we have only one driver. Two buses - one driver. I was working 40 hours a week. My hours were reduced recently. The funding to pay drivers is just not available.

**Judith O'Connor**: Bravo that you are a driver for a Council on Aging. I am a Council on Aging Director – I am not unique, but what we do is far more than others do. I use an awful lot of volunteers to fully utilize the vans that I have. Getting the vans from Joanne (Champa) - she's like a best friend, I might add, you can do a lot. What we've decided to do in the Worcester area, I'm in a small town outside of Worcester, is transport one town out in every direction. I'll give you an example - Worcester, Grafton, Sutton, and Shrewsbury. What we've decided to do is overlap. If I go into Grafton more Grafton would go into Upton. It would piggyback so we can do a little bit more and go a little bit further. This is a little slow in coming because trying to get Council on Aging Directors to participate in this type of program is difficult.

We are at the end of the food chain. If a budget is going to be cut, what are the first two programs to go. Let's see – the Library and Council on Aging. We are always fighting for funds. I don't want you to give up. I think that what you are doing and trying to do - giving rides to elderly people and getting them as far as Plymouth and wherever else they need to go is something this Committee is going to work on - to piggyback on best practices. You know you don't have to reinvent the wheel. Let's try to make what we have work. I applaud you. I think I need more Council on Aging Directors to pay attention to what you are saying because your ideas are so important.

**Eve \_\_\_\_\_**: Bourne also has volunteers as well who transport people in their own vehicles. The problem is that because the Town reimburses for mileage, volunteers need to inform their insurance carriers that they are being paid to transport passengers. The insurance carriers require that volunteer drivers purchase a rider on their automobile insurance. It's too expensive for the volunteers, so they can't continue. When I first started the job we had 12 volunteer drivers, now I'm down to three.

**Judith O'Connor:** I have a suggestion for you. Do you have a Friends Group?

**Eve \_\_\_\_\_ :** We do.

**Judith O'Connor:** Emmett Schmarsow from the Executive Office of Elder Affairs has strongly suggested that every Council on Aging needs a Friends Group. If you don't have one, shame on you. There are insurance policies that Friends Groups can purchase on behalf of volunteers. I have one of those policies. It insures 12-15 volunteers a day - not the same ones - it is a blanket policy. You need to call your insurance company. The cost is minimal, probably \$350 a year. It is so worth it. Truly, you need to look into it. Call me. I'll help you, truly.

**Catherine Mick:** Valerie would you like to speak? Clay Schofield?

**Clay Schofield:** I guess I can say something. Thanks. I'm with the Cape Cod Commission and do a lot of transportation planning. I've been involved with this quite a bit. I hear that a lot -- people need to speak up. One group -I don't know if they are here - Power in Aging on the Cape - have been doing a lot of work on documenting elder issues. I think you should get in touch with them. They have been doing it for quite a while. Tom (Cahir) has been working with them. They have a comprehensive set of statistics that I would recommend strongly.

Another problem I encounter as I speak to people is that they don't know what is available to them. Outreach to the community is very important. There are specialized needs here when working with Wampanoag Tribe. They are scattered, but to get them to Suffolk County is an issue. The other specialized issue is the aging population. I think we are at 24%. I don't know what the latest number is for year-round population, but I do know that when the snowbirds get here, we are at close to 50%. They have needs and we need to address those needs, if not, our seniors will continue to drive and that in itself is an issue. We need to expand our efforts beyond public transportation. I'm an advocate now, as I too am getting older, for larger signs and green turn arrows and other low-cost enhancements. That's all I have to say. Thank you.

**Thomas Cahir:** Thanks for mentioning Power in Aging on the Cape, Clay. Paula George, my Deputy Administrator, is actively involved with this group. I am working closely with them to develop a plan to address senior needs, so I appreciate that comment. The current Census data indicates record growth for seniors in our region. We must continue to plan keeping in mind the needs of that population.

Also, I wanted to mention that, I may have mentioned this earlier, President Schatzberg, the President of Cape Cod Community College is here with us now. I don't know if you want to say anything ...

**President Schatzberg:** I just wanted to apologize that I was not here to greet and welcome you as you were getting started. I was delayed at another meeting. Thank you for holding this session here. This is the kind of thing that we see as part of our mission of public information service. We are grateful that Tom chose us to host this event. I also want to say that we have here about 1,000 people in what is called the Academy for Lifelong Learning - 50+ year old individuals who come to the campus to take classes. Enrollment in this program has increased from 500 last year to over 800 students. We also have a job training program for young people with severe disabilities called Project Forward. That program currently has approximately 175 registered students.

These issues are very real for us as well. We want to provide accessibility for individuals to enable them to become economically secure. We are appreciative of what Tom (Cahir) is doing for public transportation.

**Catherine Mick:** Glen? Julie Borin?

**Julie Borin:** Hi. My name is Julie. I work for the Massachusetts Commission for the Blind. I am a Certified Orientation and Mobility Specialist. Mobility Specialists are instructors who work with individuals who are legally blind or completely blind. Their ability to travel varies greatly and involves many different skills. There's a huge spectrum to become independent. Someone mentioned earlier that people need to get out there and test the system by riding the bus. I'm out there. A lot of clients that I work with would have a good chance of being able to travel ore independently using the regular transit system if we had more accessible pedestrian signals, if we had the warning signals where they need to be.

Signage - someone just mentioned signage for people who are legally blind. Traffic engineers continue to design very wide, round corners. These types of designs are very dangerous for pedestrians crossing the street. There are also many crosswalks in areas of low driver-visibility. Sometimes I have to instruct clients that I do not recommend them crossing at certain intersections because there is no visibility for drivers when individuals are in the crosswalk. These changes require money at the front end – but produce real savings at the back end. Many individuals would like to use the public services but based on their skill levels in the spectrum, they may not be able to until we have made improvements within the community to help them do that.

A lot of communities and a lot of roads don't have sidewalks - from Cape Cod to Boston. One of our clients who lives on the Cape has a 45 minute walk to the bus stop. He lives on a very dangerous road with no shoulder or sidewalk. More sidewalks are needed. The laws went into effect that the sidewalks need to be cleared in the winter. Nobody is enforcing that law! The Towns don't know who is responsible for enforcement. The Police say it is the Traffic Department - the Traffic Department says it is the Police. Things like cleared sidewalks could increase an individual's ability to use the regular public transit system.

We have the draft of a new application for paratransit within the MBTA. There was -I believe I heard from my boss - that something has come up about orientation and mobility assessments for anybody who is blind or legally blind. We do not have the capacity within the Massachusetts Commission for the Blind to be able to handle such assessments at this time. I often fill out the forms of those clients I am working with.

There is a big misconception about the ability of individuals with disabilities being able to walk to transit services. Travel training, which teaches skills like traversing a path of travel is not even remotely close to what orientation and mobility training is. We take in 90% of information through vision as human beings. When vision is impaired, there is a skill level that needs to be achieved to learn to be able to travel. Travel training is about getting yourself organized - how to do things and where to go, etc. We do travel training within what we do. I just want to make sure that this misconception is known by the Commission. We talk about having one universal application, however, we do not have an accessible format for a paratransit application for a person who is blind.

Individuals have difficulty gaining access to transportation because there is little or no connectivity between many services. An example is that a young man living in Carver called three different transit organizations, but could not obtain transportation to go to Cape Cod Community college. He would have had to arrive at 5:45 AM so that he could get the paratransit ride on the Cape. That would mean leaving Carver and transferring in Wareham. I don't think they were operating at the hour he needed to get to school.

Accessibility to the bus stops is another issue, similar to what I was talking about with intersections and sidewalks. Jane mentioned how difficult it would be to do her grocery shopping. Say you can take public transportation, the bus stops right outside your house and stops at a Shaw's. You can be left at the nearest bus stop to Shaw's, get to the sidewalk, and cross an open parking lot to get to the door of the market. There's no sidewalk, nothing to follow as a blind individual-- just open space to get into the shopping plaza. We need to plan our communities

better in order to make them more accessible. We need to be sure that if an individual is dropped off near his/her destination, the remaining leg of the trip is safe. That's all I have to say. Thanks.

**Catherine Mick:** Julie, you had mentioned MCB's inability to do assessments. I am unclear. Can you speak to this further?

**Julie Borin:** Although I have not reviewed the whole new MBTA RIDE application myself, it is my understanding that anyone who is visually impaired, legally blind, or completely blind would be subject to an in-person assessment by an orientation mobility specialist.

**Jini Fairley:** Julie, I have been noticing something about the applications. I'm also legally blind and I don't know if you are speaking to one particular MBTA/RTA as far as what is downloadable. It is hard to get some universality between every RTA, but it is one of those things that I am looking into - not only the way they are accessible off the Internet for download, but in how they get filled out. Obviously the doctor for an ADA applicant fills out part of it and the person may need some help, but perhaps if they were more accessible online, it could be possible. I'm glad you brought that topic up because it has been on my mind as well. Yes, I had the same question about the assessment procedure. I think you are referring to the eligibility process, probably the in-person assessment. It will require an in-person interview. Is that what you are referring to?

**Julie Borin:** We got the feeling from the-draft application that anybody with a visual impairment, legal blindness, or complete blindness would be required to have an assessment. Many of the State residents are certified, but may not be actively working with a sighted person to assist them. If every application came in and had to be processed, that would be something of a capacity that MCB could not handle in the 21 day period allotted.

\_\_\_\_\_: You are referring to the eligibility process?

**Jini Fairley:** The general requirements for ADA complementary transit state that significant limitations exist if an individual cannot read signs or navigate intersections or safely travel through busy stations. Perhaps someone at this meeting can clear up whether given these situations a person would be required to have an in-person assessment. Most legally blind people cannot read signs to see where they are and at which stop they just got off, even when there are audible signs or audible announcements on the MBTA. You make a great point about getting to and from places even when transportation is available, particularly one the final leg of the trip is to traverse a large open parking lot or an area with no sidewalks. Denise brought this up by saying that if you are using a wheelchair, you might get to the bus stop, but there's no way to get on the sidewalk. There's only a grass berm and someone with a wheelchair cannot get to the stop. We are hearing you, and I really like all the different points that you made for us to hear. Thank you, Julie.

**Julie Borin:** One more thing when talking about cost efficiencies - it would be of tremendous value to assist individuals to develop independent travel skills. If we had speaking signs, such as those in San Francisco, if we had other things that could help somebody navigate through some of the subway stations, more individuals would be able to travel using the fixed route public transit system. Thank you.

**Catherine Mick:** Edward Dolan, would you like to speak?

**Edward Dolan:** Hello, my name is Ed Dolan. I'm the Vice President of Local\_\_\_\_. I represent many employees who deliver transportation services here on the Cape. I've heard a lot of interesting ideas from people today. The Commission is certainly going to have a problem in this day and age of budget cuts in order to implement things to increase services.

I believe the RTAs are facing a 5% budget cut and are trying to deliver the same services this year on less money. I think that the Legislative leadership for transportation in the House is

putting forward a bill for transportation funds. And how do you guys improve service or make recommendations to improve service in that kind of an environment? One idea that I know that no one has spoken about is reducing the number of transportation vendors. Currently the State funds 16 different RTAs to administer transportation statewide. It would seem to me that there's a lot of duplication involved in having 16 different organizations basically deliver the same service statewide. I don't know if it is within your purview, but you may be able to maintain service or expand service in a fiscally challenged State by reducing or condensing the number of RTAs that deliver the services statewide. I guess that concludes my comments.

**Catherine Mick:** Thank you. Tom (Cahir)?

**Tom Cahir:** Thanks Katie, and thanks Ed for your comments. Ed is one of the drivers that Jane alluded to earlier and takes great pride in the work he does every day. He does a great job. He's correct, particularly at the Federal level. We are all aware of pending catastrophic cuts that may occur. We are meeting to create efficiencies as well. Some of the service is being provided in a positive way. We are looking at ways that we can proceed more efficiently.

I don't want to get too technical, but it is important to note that 6 of the 16 RTAs have contracts with the Executive Office of Health and Human Services to act as brokers for human service transportation. Cape Cod RTA is one of the six. In our role as broker, we provide some of the services using our own resources, while others are brokered out to private providers such as taxi cab companies. We are always looking for advice and counsel on how we can provide those services better or more efficiently. We are certainly cognizant of the potential resource reduction, but if we could create efficiencies long term, we could combat some of the resulting issues. Your points are well-taken. I appreciate your comments.

**Catherine Mick:** Thank you Mr. Dolan. I wanted to echo what Tom is saying here. That's one of the fundamental challenges that this Commission and others within the Administration and community continue to face. We are faced with continued restrictions on available resources, but our needs continue to grow and change and expand. Therefore, it is incumbent upon us to look at doing things differently and seek out viable options for doing things differently so we can really address the needs that we see that continue to grow and expand and change. Thank you very much for your comments. They are appreciated.

Cathy Reilly?

**Cathy Reilly:** I'm Cathy Reilly. I'm from Provincetown and work for the Council on Aging. I've been working up there for a little over a year as an outreach coordinator. My concern is that I see a lot of folks over 60 (seniors) and under 60 with disabilities and think that we do a great job in town by helping folks get here and there, shopping, or to local medical appointments. We have a van and we are also served by an RTA bus. We get up to Hyannis twice a month for medical appointments and shopping twice a month as far as Hyannis with that bus. The Council on Aging covers the needs around town pretty well. I'm wondering if there's any way that we could get transportation, even if it is only one trip a week, from Provincetown to Boston for medical appointments. I feel that's such a hardship for people to get to their appointments. Right now the arrangement is that they have to get to Wellfleet and get transportation from there. I know that it works for some folks, but for others it is a real hardship.

My other concern is that if there is anyone who wants to come to courses here at the Community College, like the Lifelong Learning Program, it is a very difficult trip. I think that the RTA service called The Breeze does come to this area. I understand that it takes hours for folks to navigate that system to get here and then maybe to have to wait around for a very long time to get back. That's been the experience of a couple of people I know from around town.

**Catherine Mick:** Mr. Estes? I am having difficulty reading the first name. If you would like to speak, could you please raise your hand and identify yourself.

**Steve Estes:** I think that some of the opinions voiced have been good, but I think we should really do this thing totally differently. I would take all of the RTAs and I would combine them into one RTA because it would be a lot better. New Jersey does it, and it works very, very well. Unfortunately, I would hope that this was the time when Obama and his men would give us the money we could so we could make our RTAs a lot better. We have operations budgets ... and I thought that if we had our base operations budget, with the price of gas and Obama helping us, maybe we could get 20% more to turn these RTAs around because they really need to be turned around because there are places where if you work five days a week, you need to get to the mall on your days off, and you cannot do it because there is no service. This is true in Framingham.

Another thing is that RTAs should try to extend as far as they can. We should try to get all the RTAs to connect. If there's one RTA we would not have border problems. I think that the Cape Cod RTA needs to assess the demand for the flexroute because it should go to Yarmouth. I think there's demand for that service. One time when I rode the flexroute it had left from Provincetown and dropped seven people in Wellfleet Center. I got on at Wellfleet Center. The bus got all the way down to Stop & Shop in Orleans not picking up anyone, then we picked up an additional seven people. We all got off at Star Market, because that is where the route ends. It seems that buses are running where there is no demand, and where there is demand, no buses are running. Thank you very much.

**Thomas Cahir:** Thank you Katie and thank you for your comments. I don't think I mentioned earlier that we just got a new operator. The General Manager and Assistant General Manager have been working with us and their input has been invaluable in terms of monitoring the existing services and looking at ways to improve efficiencies and services. Your input is valuable. We need to continue to work on those things. You will see marked improvement very shortly. You should get this gentleman's name so we can talk to him about other examples. Thank you Katie.

**Catherine Mick:** At this point, we have run through everyone who is here who has signed in. I want to ask if there's anyone else who we may have missed either through the sign-in process or who wanted to provide additional testimony. Thank you.

**Sue \_\_\_\_\_:** My name is Sue and I'm here to represent Senator Dan Wolf. Thank you very much for meeting down here and listening to what people are talking about - what's going on on the Cape and what is not going on on the Cape. I wanted to thank Tom (Cahir), the head of our RTA. He's great and the RTA has been working really hard to both improve efficiency and be innovative. They are really doing a great job. Also, I'd like to thank Jane Perry who also does a great job in advocating. We need to listen to her. The senior centers do a great job with what they have available on senior transportation. I was very glad to hear somebody bring up the Power in Aging group. They are a very dynamic group. They are really, really wanting to go great guns on senior transportation. They have been collecting information and they will be making recommendations. I highly recommend that you work with them and figure out a way to get together with them. Again, from Senator Wolf, I don't know if he would disagree with very much of what has been said here today. He's there to help you when you are ready to launch your recommendations and make things better for everybody. Thank you again for coming.

**Catherine Mick:** Thank you. Given that we have time here, this session is scheduled until 5:00 PM, and we have run through the list of folks who have indicated that they wish to speak, I want to open the meeting up at this point to Commission members for additional follow-up questions and input as well as additional dialogue. Jane in the front has her hand up as well.

**Jane Perry:** Thank you for letting me address you again. My name is Jane Perry and I live in East Falmouth. I have a couple of additional comments. I want to thank Julie for being here. She's my mobility instructor and I'm glad she's here. What she said is very true. I'm living in Falmouth and I'm involved with many town government organizations. As Tom (Cahir) knows, we are working to get audible pedestrian signals at two busy intersections. We are hoping to have construction underway in the year 2014. What I would also like to suggest - I know that we are

talking mostly about paratransit – has to do with fixed-route. It is important that the drivers announce stops. Many of the drivers have been doing this and it is very helpful.

I want to thank you for having this session and all of the sessions on public transportation. I've gone to many seminars through CORD. I am glad to see CORD represented here today. I too am a member.

Lastly, as Julie mentioned, it would be very helpful for the handrails on the MBTA subway system to be audible so that an individual would know in which direction to go - inbound or outbound. Talking kiosks are very important for people with low vision.

Tom (Cahir) gave me a lot of kudos. He always does. I've known him for a very long time. I'd like to go on the record - and he might get upset with me, but that's too bad - in saying that there is nobody more passionate, more understanding, or striving harder to get funding for transportation than Mr. Cahir. And, if it were not for his father, Representative Jeremiah Cahir, I would not have had the help to become such a strong advocate for public transit. If not for his father and Ted Kennedy, we would not have a good paratransit or any transportation on the Cape.

I have to leave very shortly in order to make my connections home. I took the DART bus from my house, got on the Sealine bus, and took the Villager out to the bus stop. I will do it in reverse. When I get home, I have to find a ride because there's no service after 6:30 or 7:00 PM. I know that budget cuts and funding play a role in these very difficult times. If we are really sincere about this Executive Order, we need to find a way to get more buses on the road and more people on those buses.

\_\_\_\_\_: Julie, you had mentioned that there is a general misconception out there between travel training and mobility orientation services. Here we are, set us straight. I don't know the basic definitions.

**Julie Borin:** Individuals who are travel trainers often don't have background certification licensure type of credentials. They work with many people with various disabilities. My experience with them is that they will do things like teach people how to read a bus schedule; instruct on what time to take the bus; how to make connections between services; how to time a trip. They will go over reading maps and things of that nature. We do that with individuals who are blind, but we also work on all of the senses to understand what is going on in the environment. We work on crossing streets, cane skills, traveling with a guide dog, knowing whereabouts in getting from Point A to Point B, sensing those things in the immediate environment, knowing how to find talking signs and talking kiosks. A lot of individuals have great mobility skills, but don't have the orientation skills.

As I said before, as human beings, 90% of the information we take in from the environment to help us make decisions is visual. We have to increase how we get that information, change how that information comes when we have a visual impairment. That's a whole other set of skills that has nothing to do with travel training and how to take a bus or get to Gate Bat the airport.

**Will Rodman:** A follow-up question. Is there a shortage of orientation and mobility specialists?

**Julie Borin:** Yes. But there's also a lack of funding to get all of the ones we do have working. UMass Boston has an online program - a Federally funded granted Master's Degree. Because there's such a shortage overall in the country, the Federal government offers grants. The public schools are having difficulty finding orientation mobility specialists as well.

My husband works for Cape Cod Collaborative. His boss wanted to know if I was available to contract with them to provide mobility orientation. There's just no one around. So, of course, we could provide more services more quickly and efficiently if we had more specialists employed by

MCB. Because we just serve adults, we do what we can with what we have. I think it is the same as everything else funding, funding, funding. It would be great if we could have it all. Thank you.

**Anne Hartstein:** I'm from Elder Affairs. I want to thank everyone for coming. What we heard today is very indicative of what we are going to hear for the next ten years. We have an aging population with a greater number of disabilities. We have more and more people who are going to have to give up driving and will still need to get around. The Cape is a perfect example about where the rest of us will be five years from now. It is helpful to have information coming from all of you about what we've been doing. Elder Affairs, as you know and Emmett Schmarsow has mentioned, has been working with Councils on Aging throughout the State. We are trying to expand those programs.

What I think I keep hearing is that we need to figure out how to utilize the resources that we have now better. We need to become more efficient, use the vehicles better - don't drive vehicles without people in them; direct vehicles to where they need to go. It is helpful to hear from each of you and to hear your experiences in the communities. I want to thank you for talking about that. One of the things that we are working on as an Administration is really looking at universal design and how to create systems that don't have to be special for people to use them. It is very similar to what you were saying regarding better systems in terms of information sharing and the accessibility of that information.

Many people, with proper training, can use the public transportation system as it now stands. If we can't provide them the skill set, we will have to continue to provide special transportation for special access. I think when we are looking at the future, we need to develop systems that actually serve everyone better.

I want to thank you all. The whole issue of visibility around curbs is an amazingly critical safety issue for everyone - not just for people with visual capacity decrease, but for everyone, everyone who is a pedestrian. We need to look at everyone for those kinds of things. I want to thank you all for sharing these things and I think we'll make great progress with the information we've gotten today.

\_\_\_\_\_,: I don't have a particular individual that I want to address this to, but the issue of taxis has been mentioned as cost prohibitive. I wanted to get some feedback about whether taxi fleets on the Cape are fully accessible for an individual who needs an accessible taxi. I was interested in any feedback from this group.

**Thomas Cahir:** I can speak to that, and Paula (George) can speak to that better than I. We just purchased several accessible taxis and are currently working with our vendors around this issue. The vendors have come in to talk to us about the service that we are expecting them to provide. Paula, can you speak briefly about how many and who will be providing service and some of the regulations?

**Paula George:** Actually, Clay Schofield from the Cape Cod Commission had done a study in order to develop the Public Transit Human Services Coordination Plan for the Cape Cod region. This Plan is necessary in order for the region to participate in several Federal funding programs. The Cape Cod Regional Transit Authority and other transportation providers in the region worked closely with Clay as he developed the Plan. When his final report came out, it was very eye-opening for us because none of us had ever before been aware of who was providing accessible taxi service on the Cape. As it turns out, it was one of the major barriers on the Cape because there was not anybody on the Cape doing it.

Community Connections, because of their work with a large number of disabled individuals, had put together a business model which would enable individuals with disabilities to have greater access to non-program related transportation. The problem was that when they figured out the cost of the vehicles, the cost of fuel, the salary of the drivers, etc. the per person fare that would

have to be charged was prohibitive. They put that model on the shelf and did nothing with it. It was based on that report, when ARRA money became available, that we decided to undertake an accessible taxi program.

It was our thought that if we could purchase accessible taxis and basically supply them to our providers on the Cape at no cost, they could provide the service at a much lower base cost. The insurance, maintenance, and drivers would be the responsibility of the providers. It turns out that three providers had a keen interest in working with us on this project. We have ordered seven accessible taxis through Northern Bus Sales in Hudson, New Hampshire. They are the same taxis that Francis Gay (GATRA) is providing in his area. Frank's program has been very successful.

The three providers that are interested in working with us are our three day habilitation providers: Community Connections, Cape Abilities, and HAC Habilitation Assistance Corporation - so the taxis have been ordered now, and we are working with them to come up with a program that we feel will work best on Cape Cod as opposed to having taxis running all over Cape Cod all hours of the night. We are looking forward to developing an effective program.

**Thomas Cahir:** We've worked with providers to learn how the taxis can best be utilized. I understand they want a 24-hour service. We are going to have them accessible almost all of the time, but are working on identifying ways to make them most useful. Paula's leadership has been great. We are looking to a very vibrant program on the Cape.

\_\_\_\_\_ : I don't know if anybody from the Commission attended the Great Neighborhood Summit at UMass in Boston during the Spring. I'm not sure which State department hosted the event. There are five or six projects within the State they are working on to develop "Great Neighborhoods," in which everything is accessible within the neighborhood including all transportation. They have models on how those neighborhoods would be built. I think it is Federally directed. A group of people who are trying to make improvements - such as you - may want to be in touch with the conveners of the Great Neighborhood Summit.

**Clinton Bench:** I'm Clinton Bench. I would like to follow-up on Julie's comments, particularly the sidewalk issue -- making bus stops accessible and such. I'm wondering if you or anybody else here has had specific experiences that they could kind of describe now that lack of access has either made a particular trip not possible or could have possibly changed the mode that the traveler had to use. I'm wondering whether this concept of making sure that our sidewalks are shoveled simply and that paths are cleared could actually end up being a cost efficiency in the end because it would actually make a more cost effective transportation more accessible rather than have someone take on more expensive services. I'm wondering if there's any experience along those lines.

**Thomas Cahir:** We just purchased 40 beautiful Cape Cod style bus shelters with ARRA funds. These shelters have been strategically placed on our routes throughout Cape Cod. We entered into a contract with Cape Abilities to maintain them on our behalf. They are getting a big kick out of maintaining them. It has been a great partnership. It is another successful story. You are right. It is an issue. We don't get as much snow down here as others, but enough to make it difficult for folks to access the buses. It is an issue worthy of attention.

**Julie Borin:** I don't know how many examples you want, but I have plenty for you. A gentleman who is a full-time professional in one of our State agencies, was traveling to the bus stop along a sidewalk that was about a single shovel-width. Because of the snow mounds, he was not seen and the bus went right by him. Many of my clients have only a conditional approval to use the ADA service. A lot of time the eligibility is conditioned on weather - particularly snow and ice. Last winter was quite bad. Many individuals with guide dogs could not travel because the sidewalks were in such bad condition. They were not touched at all.

Another example -I was working with a gentleman in Brockton. We were meeting at the BAT intermodal center. We were working together to help him learn to cross streets in Boston where he was attending law school. He could not get to the bus stop from his apartment. Then we've got the narrow streets. Someone mentioned that the wide corners affect everybody. It is incredibly dangerous for blind individuals to walk on a street that is not fully plowed to the shoulder.

I've seen women with baby carriages trying to navigate. I had to call the City of Brockton because the snow was piled up on the sidewalk in front of the stop. Things like this - communication and awareness of things that won't cost us anything if we are already doing them. We need to know who is accountable for performing the tasks. Does that help? Do you want more examples?

**Clinton Bench:** I appreciate that. I think it is important for us to have those examples for the record so that we can discuss them as we work toward a set of recommendations for the Governor. What I thought was most interesting was the concept of conditional eligibility based on the weather. That may point to that in certain situations our lack of making sure, as communities, that are sidewalks are cleared, and that people have accessible paths of travel actually make it so they can't use the cost efficient mode of service - the fixed bus route. Instead they have to use the door-to-door or curb-to-curb service. That's something to consider.

**Angie \_\_\_\_\_:** I have an example. I'm Angie and I'm a transportation planner in Taunton. I used to be a travel trainer on the Vineyard and we had an instance with someone in an electric wheelchair. It had snowed and the road had been plowed. The gentleman was able to get to the bus stop and board. When he got to his stop at home, he realized there were snow mounds on either side. He could not get to the curb cut to get off the sidewalk. He had to wait until the next bus and try to get to the next stop.

I also have a couple of other comments. They are sort of off topic. I wanted to mention that I was hoping that there could be a session like this in southeastern Massachusetts to cover Fall River, New Bedford, and the Taunton area. Boston and Cape Cod are both a bit far for people to travel from that area.

I also wanted to say that it seems easier to get capital funds for paratransit vehicles, but not for operating funds. Maybe that would be something to think about. It is obviously not a good situation to have vehicles when we don't have drivers.

\_\_\_\_\_: We have two transportation planners from the different regional planning agencies. And anybody else who may wish to respond. Do either of you or others see a particular change in travel patterns - either due to more aging population or places that are difficult to access now or times of day that people are traveling when they didn't used to travel? I guess the bottom line is, should our focus in terms of the destination envelope that we make sure we do serve - should that be changing as transportation providers just based on the way that the economy is different now?

**Clay Schofield(?):** A couple of things that surprised me when we were working on the outer Cape – one is serving medical centers and another is serving the shopping centers. There was an increase in ridership to medical centers, but the most frequent stops were Stop & Shop and Shaw's. We got feedback that people were happy that they could get to the super market more than once a week and they didn't have to take a cab. Some of those elements of everyday life have to be considered. We noted that many people had other options in reaching medical appointments, or were unwilling to change their ordinary paths of travel for medical purposes. However, new opportunities for shopping and social events were a big deal for the elderly population.

**Angie \_\_\_\_\_:** I just wanted to echo what was said about medical trips. When I was on the Vineyard, people voiced a need to get to Boston. We had one customer who was able to use

"The LIFT," Martha's Vineyard's paratransit system. She was able to get to the ferry and off the ferry, but not from the ferry to Cape Cod RTA's Boston bus. I could not get her from Falmouth to that van. I had the Falmouth Council on Aging volunteer to drive her. The volunteer driver would~take her from Woods Hole to the van and then up to Boston. She had to take Peter Pan Bus Lines back. Getting to Boston for just one visit is difficult. But there are often several follow-up appointments necessary. Ironically we were just talking about this yesterday. We provide a Boston hospital bus every day except Thursday. A few years ago we cut Thursday service. I asked the staff if they felt that we could restore the service to five days a week. We go to 15 different facilities.

**Michael Lambert:** I'm Mike Lambert from the T. The T will be moving toward in-person assessments for eligibility starting next summer. The T is holding an information session on October 3 from 3:30 PM 6:00 PM at the Transportation Building. It is our plan to hire a service provider to do the assessments. We are looking into which customers would be required to have an assessment, and if there will be customers who would be inherently eligible. Please feel free to come to that meeting and listen to the current plans. Please see our website for more information.

**Cheryl Poppe:** As I mentioned earlier, Cape Cod Regional Transit Authority is doing a lot for Veterans for transportation, but I guess I was putting out a question if there was anyone in the audience who had served in the military who could speak to Veterans' issues or if you know of anyone. I know on the Cape you have a substantial number of military Veterans and retirees.

**Denise Karuth:** I have been making notes listening to all of this wonderful testimony. Thank you all for coming. Let's see, I wish I could thank Jane in person. All of you had many good things to say, and I really appreciate that. I'm going to go down a random list. In terms of audible pedestrian signals, I know there's a lot of designs out there, and I believe there's a company in Rhode Island, I could try and find the name, I've traveled enough so that I've seen several different types of audible pedestrian signals. I know that there are some that make people who live or work close-by upset -like the chirping birds. They go nuts because they get sick of listening to the cardinals. They don't want the electronic bird signals. One that I was extremely impressed with was in Stockholm, Sweden. It was a signal with a very loud ticking sound. The ticking sound emanated from the push button, so it would help a person who was visually impaired to find the button. It would go - "Tick, tick, tick" after you pressed the button and would continue to go "tick, tick, tick" and then it would rapidly "tick, tick." Then you knew it was safe to cross. Because it was in the pole where the push button was, not only could you find the push button, the thing didn't have to be so annoyingly loud, you just needed to know when you had to start. It was loud enough so that someone who was hard of hearing could hear it as well. I thought it was a good way to do it.

In the 1980s there was a statewide access pass to help people transfer from one RTA's ADA service to another's service. That may be something worth providing again. There may have been a little bit of trouble getting from paratransit service to paratransit service run by RTAs. That might be something to revive.

In-service training for employees is very helpful- not only for the drivers but for people who answer the phones. Anyone who has contact with the people who use paratransit should receive training. I know that the MBTA has had a number of advisory committees for decades. I served on them for decades myself. I think that it could be helpful.

I agree that seniors don't have access to computers and are not familiar with that technology, so we need to do better outreach to that population. I know that our buses don't run on holidays for fixed route especially in areas where there are not accessible taxis. I think it would be extremely helpful. I know that my friend, Lenore, was virtually paralyzed from multiple sclerosis and her family lived in Taunton. Wherever she lived, she could have made a connection to visit her family. But the service did not run on holidays. Christmas was the one day of the year that she wanted to

be with her family. She had to pay about \$300 for round-trip transportation through some non-profit MassHealth vendor to get home at Christmastime. I know that there are lots of people like Lenore. I think if we could find our way to providing some kind of holiday service, at least until there's better access to accessible taxis, that would be great. There are not enough accessible taxis in this state. I know of way more communities that don't have them, including my own Town, Northampton. I worked really hard to get accessible taxis in Boston. I worked with the State to do it, but it fell through. With the encouragement of the people in the State, I filed a lawsuit against the City of Boston to get accessible taxis. We got the taxis on the road. They all went to the airport and sat waiting for people who had lots of luggage. When you get them, it is important that they get used, at least to some extent, for their intended use. They are multipurpose vehicles so we cannot claim them all the time. And driver training - that's a huge issue. A lot of people will get you into the taxis, but it can be a challenge depending on how the taxi is laid out.

I was wondering about the Cape, as far as medical transportation for MassHealth is concerned, are the vendors private companies? Does the regional transit authority provide any of those trips to the hospitals in that area?

**Thomas Cahir:** We do. Fifty percent of all MassHealth transportation is on our own services. We, obviously, serve only trips that are Cape to Cape. We have seven providers that do MassHealth transportation. We do the long distance stuff that they can't do. It is rare that we have a MassHealth customer on the Boston Hospital Bus we run. It leaves the Cape early and comes back late in the afternoon. If we can fit it in, we do. With Boston providers, we'll put more than one or two members on the same bus.

**Denise Karuth:** Let's see. I was wondering about the other way around, could some of the Cape Cod folks who are not necessarily MassHealth eligible to on those buses? Could it be used to provide transportation in the opposite direction? The lack of affordable, accessible transportation can lead to the institutionalization of folks who are elders with disabilities, folks with multiple disabilities who are not elders, and it costs way more to put a person in a nursing home than it does to pay for transportation. That might be one thing to think about.

There's a new purpose-built vehicle, the MV-1. I can tell you more about it. I'm wondering if there's categorical eligibility for blind people on paratransit or if that's shifting. At some point, I would love to hear from someone like you, if you thought that was a reasonable thing to do. My own experience is that people with disabilities who use accessible public transit will use it whenever than can.

The last thing I'll mention is doctors. Getting transportation for medical trips can be a challenge, especially someone who is getting chemotherapy or other difficult treatments. We need to find ways that will help them. Thank you for your patience.

Catherine Mick: Thank you for your points, Denise. Thank you also, just to acknowledge the work of the Cape Cod Regional Transit Authority on behalf of our MassHealth members. MassHealth is another significant area of our overall Commonwealth budget. We appreciate the efforts that you make, as well as all of the transit authorities acting as brokers in the human services transportation system, to maximize efficiencies and really provide excellent quality service to our members.

I wanted to make sure that we ended here on time. I realize that folks do have potential rides and transportation connections to make here today. Again, I'd like to thank the folks in the audience for participating and providing your feedback and providing your time and listening to one another. It has been tremendously helpful for those of us sitting here. We welcome a further opportunity to dialogue with you.

Again, we've given you our dedicated e-mail address, the webpage, and again the file - the CART

services that have been documented here today will be provided and put up on the webpage in the coming weeks. And thank you again for voicing all of the concerns and really great ideas. I think that there is a lot of food for thought that has come out of today's discussion that the Commission members will bring back to further work sessions as well as to further public listening sessions.

I have one quick announcement. Our next public comment and dialogue session will be held on October 4<sup>th</sup> from 3:00 PM - 5:00 PM at Union Station at Union Hall, 34 Washington Street, Worcester. There are three sessions following that. One being October 12<sup>th</sup>, also from 3:00 PM - 5:00 PM at the Pioneer Valley Regional Planning Commission in Springfield; one October 27<sup>th</sup> from 3:00 PM - 5:00 PM at the Berkshire Regional Transit Authority in Pittsfield; and the final one on November 7<sup>th</sup> at the State Transportation Building in Boston. All of the sessions are being held from 3:00 PM - 5:00 PM. Thank you for your time and input. We look forward to working with all of you on these issues.