

CTC

EVALUATION WORKBOOK

Florida Commission for the



Transportation Disadvantaged

CTC BEING REVIEWED: _____

COUNTY (IES): _____

ADDRESS: _____

CONTACT: _____ **PHONE:** _____

REVIEW PERIOD: _____ **REVIEW DATES:** _____

PERSON CONDUCTING THE REVIEW: _____

CONTACT INFORMATION: _____

INTRODUCTION AND BRIEFING:

The evaluation of the Lake County Community Transportation Coordinator (CTC) is conducted annually by the Transportation Disadvantaged Coordinating Board (TDCB) with the guidance of the Lake~Sumter Metropolitan Planning Organization (MPO) staff.

The Lake County Board of County Commissioners (BOCC) is the designated CTC for Lake County. On March 15, 2023 the Florida Commission for the Transportation Disadvantaged extended Lake County's CTC designation effective July 1, 2023 through June 30, 2028. Lake County BOCC selected RATP Dev USA as its transit provider for LakeXpress fixed route and Lake County Connection paratransit services. The current contract was originally entered into on October 7, 2022 for an initial five (5) year term with the option for two (2) subsequent one (1) year renewals.

The purpose of the annual review is to evaluate the CTC's performance. The evaluation ensures quality of service is being obtained and that it is being provided in the most cost effective, efficient, and unduplicated manner. The evaluation also ensures that all requirements are met in providing provision of any services by operators and coordination contractors in the coordinated system.

The evaluation was conducted utilizing the Commission for the Transportation Disadvantaged CTC Evaluation Workbook. The workbook outlines the formal process for evaluation of the CTC. The evaluation addresses the following areas:

- Entrance Interview and General Questions
- Chapter 427, Rules 41-2 and 14-90, CTD Standards, and Local Standards
- Compliance with the Americans with Disabilities Act
- Surveys: Riders, Contractors, and Purchasing Agencies
- On-site Observation of the System
- Findings and Recommendations

The CTC is in compliance with most applicable regulations, with only one finding. The finding falls under Compliance with 41-2, F.A.C.: Compliance with Local Standards. The CTC's accident rate for FY 2023 was 0.002% (2 accidents per 100,000 miles), which falls just short of meeting the standard of 0.001% (1 accident per 100,000 miles). Notably, this was also a finding during the last CTC Evaluation. However, the accident rate has decreased from the rate reported in the last CTC Evaluation (0.003%) and remains very low. The CTC reviewed accident reports and found that most accidents are the result of new drivers backing into fences or other parked vehicles. The recommendation is to review current training requirements to ensure that new drivers receive adequate training on backing the vehicle and to consider additional technology or policies that could help mitigate these types of accidents, if resources permit.

The rider surveys provided additional insight into the CTC's operations. Twenty-five riders responded to the survey and reported an average satisfaction score of seven (7) out of ten (10). Rider comments revealed that many riders appreciate and depend on the service. The most common feedback was about late pick ups, suggesting that even though the CTC's on-time performance rate is meeting their standard, riders may still see room for improvement. Several riders offered commendations to specific drivers, though two riders reported having a negative experiences with a driver. Other less common feedback included a desire for increased service hours, an upgraded payment system, and a reservation system that allows riders to book rides without speaking to a representative.

The evaluation report and recommendations to the CTC will be presented by the CTC Evaluation Subcommittee at the June 10, 2024 TDCB meeting. The final workbook with the recommendations/commendations will be transmitted to the Florida Commission for the Transportation Disadvantaged and the Sumter County CTC by MPO staff. The CTC will forward a status report to the TDCB within 30 working days.

LCB EVALUATION WORKBOOK

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REVIEW CHECKLIST & SCHEDULE

COLLECT FOR REVIEW:

- ☐ APR Data Pages
- ☐ QA Section of TDSP
- ☐ Last Review (Date:_____)
- ☐ List of Omb. Calls
- ☐ QA Evaluation
- ☐ Status Report (from last review)
- ☐ AOR Submittal Date
- ☐ TD Clients to Verify
- ☐ TDTF Invoices
- ☐ Audit Report Submittal Date

ITEMS TO REVIEW ON-SITE:

- ☐ SSPP
- ☐ Policy/Procedure Manual
- ☐ Complaint Procedure
- ☐ Drug & Alcohol Policy (see certification)
- ☐ Grievance Procedure
- ☐ Driver Training Records (see certification)
- ☐ Contracts
- ☐ Other Agency Review Reports
- ☐ Budget
- ☐ Performance Standards
- ☐ Medicaid Documents

ITEMS TO REQUEST:

- ☐ **REQUEST INFORMATION FOR RIDER/BENEFICIARY SURVEY** (Rider/Beneficiary Name, Agency who paid for the trip [sorted by agency and totaled], and Phone Number)
- ☐ **REQUEST INFORMATION FOR CONTRACTOR SURVEY** (Contractor Name, Phone Number, Address and Contact Name)
- ☐ **REQUEST INFORMATION FOR PURCHASING AGENCY SURVEY** (Purchasing Agency Name, Phone Number, Address and Contact Name)
- ☐ **REQUEST ANNUAL QA SELF CERTIFICATION** (Due to CTD annually by January 15th).
- ☐ **MAKE ARRANGEMENTS FOR VEHICLES TO BE INSPECTED** (Only if purchased after 1992 and privately funded).

INFORMATION OR MATERIAL TO TAKE WITH YOU:

- ☐ Measuring Tape ☐ Stop Watch

EVALUATION INFORMATION

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

1	Cover Page
5 - 6	Entrance Interview Questions
12	Chapter 427.0155 (3) Review the CTC monitoring of contracted operators
13	Chapter 427.0155 (4) Review TDSP to determine utilization of school buses and public transportation services
19	Insurance
23	Rule 41-2.011 (2) Evaluation of cost-effectiveness of Coordination Contractors and Transportation Alternatives
25 - 29	Commission Standards and Local Standards
39	On-Site Observation
40 – 43	Surveys
44	Level of Cost - Worksheet 1
45- 46	Level of Competition – Worksheet 2
47 - 48	Level of Coordination – Worksheet 3

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

INTRODUCTION AND BRIEFING:

- ☐ Describe the evaluation process (LCB evaluates the CTC and forwards a copy of the evaluation to the CTD).
- ☐ The LCB reviews the CTC once every year to evaluate the operations and the performance of the local coordinator.

The LCB will be reviewing the following areas:

- ☐ Chapter 427, Rules 41-2 and 14-90, CTD Standards, and Local Standards
 - ☐ Following up on the Status Report from last year and calls received from the Ombudsman program.
 - ☐ Monitoring of contractors.
 - ☐ Surveying riders/beneficiaries, purchasers of service, and contractors
-
- ☐ The LCB will issue a Review Report with the findings and recommendations to the CTC no later than 30 working days after the review has concluded.
 - ☐ Once the CTC has received the Review Report, the CTC will submit a Status Report to the LCB within 30 working days.
 - ☐ Give an update of Commission level activities (last meeting update and next meeting date), if needed.

USING THE APR, COMPILE THIS INFORMATION:

1. OPERATING ENVIRONMENT:

- ☐ RURAL ☐ URBAN

2. ORGANIZATION TYPE:

- ☐ PRIVATE-FOR-PROFIT
- ☐ PRIVATE NON-PROFIT
- ☐ GOVERNMENT
- ☐ TRANSPORTATION AGENCY

3. NETWORK TYPE:

- ☐ SOLE PROVIDER
- ☐ PARTIAL BROKERAGE
- ☐ COMPLETE BROKERAGE

4. NAME THE OPERATORS THAT YOUR COMPANY HAS CONTRACTS WITH:

5. NAME THE GROUPS THAT YOUR COMPANY HAS COORDINATION CONTRACTS WITH:

Coordination Contract Agencies				
Name of Agency	Address	City, State, Zip	Telephone Number	Contact

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

Name of Agency	% of Trips	Name of Contact	Telephone Number

7. REVIEW AND DISCUSS TD HELPLINE CALLS:

	Number of calls	Closed Cases	Unsolved Cases
Cost			
Medicaid			
Quality of Service			
Service Availability			
Toll Permit			
Other			

GENERAL QUESTIONS

Use the TDSP to answer the following questions. If these are not addressed in the TDSP, follow-up with the CTC.

1. DESIGNATION DATE OF CTC:
2. WHAT IS THE COMPLAINT PROCESS?

IS THIS PROCESS IN WRITTEN FORM? ☐ Yes ☐ No
(Make a copy and include in folder)

Is the process being used? ☐ Yes ☐ No

3. DOES THE CTC HAVE A COMPLAINT FORM? ☐ Yes ☐ No
(Make a copy and include in folder)
4. DOES THE COMPLAINT FORM INCORPORATE ALL ELEMENTS OF THE CTD'S
UNIFORM SERVICE REPORTING GUIDEBOOK?

☐ Yes ☐ No

5. DOES THE FORM HAVE A SECTION FOR RESOLUTION OF THE COMPLAINT?
☐ Yes ☐ No

Review completed complaint forms to ensure the resolution section is being filled out and follow-up is provided to the consumer.

6. IS A SUMMARY OF COMPLAINTS GIVEN TO THE LCB ON A REGULAR BASIS?
☐ Yes ☐ No

7. WHEN IS THE DISSATISFIED PARTY REFERRED TO THE TD HELPLINE?

8. WHEN A COMPLAINT IS FORWARDED TO YOUR OFFICE FROM THE
OMBUDSMAN PROGRAM, IS THE COMPLAINT ENTERED INTO THE LOCAL
COMPLAINT FILE/PROCESS?

☐ Yes ☐ No

If no, what is done with the complaint?

9. DOES THE CTC PROVIDE WRITTEN RIDER/BENEFICIARY INFORMATION OR BROCHURES TO INFORM RIDERS/ BENEFICIARIES ABOUT TD SERVICES?

☐ Yes ☐ No If yes, what type?

10. DOES THE RIDER/ BENEFICIARY INFORMATION OR BROCHURE LIST THE OMBUDSMAN NUMBER?

☐ Yes ☐ No

11. DOES THE RIDER/ BENEFICIARY INFORMATION OR BROCHURE LIST THE COMPLAINT PROCEDURE?

☐ Yes ☐ No

12. WHAT IS YOUR ELIGIBILITY PROCESS FOR TD RIDERS/ BENEFICIARIES?

Please Verify These Passengers Have an Eligibility Application on File:

TD Eligibility Verification			
Name of Client	Address of client	Date of Ride	Application on File?

13. WHAT INNOVATIVE IDEAS HAVE YOU IMPLEMENTED IN YOUR COORDINATED SYSTEM?

14. ARE THERE ANY AREAS WHERE COORDINATION CAN BE IMPROVED?
15. WHAT BARRIERS ARE THERE TO THE COORDINATED SYSTEM?
16. ARE THERE ANY AREAS THAT YOU FEEL THE COMMISSION SHOULD BE AWARE OF OR CAN ASSIST WITH?
17. WHAT FUNDING AGENCIES DOES THE CTD NEED TO WORK CLOSELY WITH IN ORDER TO FACILITATE A BETTER-COORDINATED SYSTEM?
18. HOW ARE YOU MARKETING THE VOLUNTARY DOLLAR?

GENERAL QUESTIONS

Findings:

Recommendations:

COMPLIANCE WITH CHAPTER 427, F.S.

Review the CTC contracts for compliance with 427.0155(1), F.S.

“Execute uniform contracts for service using a standard contract, which includes performance standards for operators.”

ARE YOUR CONTRACTS UNIFORM? ☐ Yes ☐ No

IS THE CTD’S STANDARD CONTRACT UTILIZED? ☐ Yes ☐ No

DO THE CONTRACTS INCLUDE PERFORMANCE STANDARDS FOR THE TRANSPORTATION OPERATORS AND COORDINATION CONTRACTORS?

☐ Yes ☐ No

DO THE CONTRACTS INCLUDE THE PROPER LANGUAGE CONCERNING PAYMENT TO SUBCONTRACTORS? (Section 21.20: Payment to Subcontractors, T&E Grant, and FY)

☐ Yes ☐ No

IS THE CTC IN COMPLIANCE WITH THIS SECTION? ☐ Yes ☐ No

Operator Name	Exp. Date	SSPP	AOR Reporting	Insurance

COMPLIANCE WITH CHAPTER 427, F.S.

Review the CTC last AOR submittal for compliance with 427. 0155(2)
“Collect Annual Operating Data for submittal to the Commission.”

REPORTING TIMELINESS

Were the following items submitted on time?

a. Annual Operating Report ☐ Yes ☐ No

Any issues that need clarification? ☐ Yes ☐ No

Any problem areas on AOR that have been re-occurring?

List:

b. Memorandum of Agreement ☐ Yes ☐ No

c. Transportation Disadvantaged Service Plan ☐ Yes ☐ No

d. Grant Applications to TD Trust Fund ☐ Yes ☐ No

e. All other grant application (____%) ☐ Yes ☐ No

IS THE CTC IN COMPLIANCE WITH THIS SECTION? ☐ Yes ☐ No

Comments:

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.”

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

Is a written report issued to the operator? ☐ Yes ☐ No

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?

Is a written report issued? ☐ Yes ☐ No

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

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

IS THE CTC IN COMPLIANCE WITH THIS SECTION? ☐ 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?

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?

☐ N/A

IS THERE A GOAL FOR TRANSFERRING PASSENGERS FROM PARATRANSIT TO TRANSIT?

☐ Yes ☐ No

If YES, what is the goal?

Is the CTC accomplishing the goal? ☐ Yes ☐ No

IS THE CTC IN COMPLIANCE WITH THIS REQUIREMENT? ☐ Yes ☐ No

Comments:

COMPLIANCE WITH CHAPTER 427, F.S.

Review of local government, federal and state transportation applications for TD funds (all local, state or federal funding for TD services) for compliance with 427.0155(5).

“Review all applications for local government, federal, and state transportation disadvantaged funds, and develop cost-effective coordination strategies.”

IS THE CTC INVOLVED WITH THE REVIEW OF APPLICATIONS FOR TD FUNDS, IN CONJUNCTION WITH THE LCB? (TD Funds include all funding for transportation disadvantaged services, i.e. Section 5310 [formerly Sec.16] applications for FDOT funding to buy vehicles granted to agencies who are/are not coordinated)

☐ Yes ☐ No

If Yes, describe the application review process.

If no, is the LCB currently reviewing applications for TD funds (any federal, state, and local funding)? ☐ Yes ☐ No

If no, is the planning agency currently reviewing applications for TD funds?
☐ Yes ☐ No

IS THE CTC IN COMPLIANCE WITH THIS SECTION? ☐ Yes ☐ No

Comments:

COMPLIANCE WITH CHAPTER 427, F.S.

Review priorities listed in the TDSP, according to Chapter 427.0155(7).

“Establish priorities with regard to the recipients of non-sponsored transportation disadvantaged services that are purchased with Transportation Disadvantaged Trust monies.”

REVIEW THE QA SECTION OF THE TDSP (ask CTC to explain):

WHAT ARE THE PRIORITIES FOR THE TDTF TRIPS?

HOW ARE THESE PRIORITIES CARRIED OUT?

IS THE CTC IN COMPLIANCE WITH THIS SECTION? ☐ Yes ☐ No

Comments:

COMPLIANCE WITH CHAPTER 427, F.S.

Ensure CTC compliance with the delivery of transportation services, 427.0155(8).

“Have full responsibility for the delivery of transportation services for the transportation disadvantaged as outlined in s. 427.015(2).”

Review the Operational section of the TDSP

1. Hours of Service:

2. Hours of Intake:

3. Provisions for After Hours Reservations/Cancellations?

4. What is the minimum required notice for reservations?

5. How far in advance can reservations be place (number of days)?

IS THE CTC IN COMPLIANCE WITH THIS SECTION? ☐ Yes ☐ No

Comments:

COMPLIANCE WITH CHAPTER 427, F.S.

Review the cooperative agreement with the local WAGES coalitions according to Chapter 427.0155(9).

“Work cooperatively with local WAGES coalitions established in Chapter 414 to provide assistance in the development of innovative transportation services for WAGES participants.”

WHAT TYPE OF ARRANGEMENT DO YOU HAVE WITH THE LOCAL WAGES COALITION?

HAVE ANY INNOVATIVE WAGES TRANSPORTATION SERVICES BEEN DEVELOPED?

IS THE CTC IN COMPLIANCE WITH THIS SECTION? ☐ Yes ☐ No

Comments:

CHAPTER 427

Findings:

Recommendations:

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

Compliance with 41-2.006(1), Minimum Insurance Compliance

“...ensure compliance with the minimum liability insurance requirement of \$100,000 per person and \$200,000 per incident...”

WHAT ARE THE MINIMUM LIABILITY INSURANCE REQUIREMENTS?

WHAT ARE THE MINIMUM LIABILITY INSURANCE REQUIREMENTS IN THE OPERATOR AND COORDINATION CONTRACTS?

HOW MUCH DOES THE INSURANCE COST (per operator)?

Operator	Insurance Cost

DOES THE MINIMUM LIABILITY INSURANCE REQUIREMENTS EXCEED \$1 MILLION PER INCIDENT?

☐ Yes ☐ No

If yes, was this approved by the Commission? ☐ Yes ☐ No

IS THE CTC IN COMPLIANCE WITH THIS SECTION? ☐ Yes ☐ No

Comments:

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

Compliance with 41-2.006(2), Safety Standards.
“...shall ensure the purchaser that their operations and services are in compliance with the safety requirements as specified in Section 341.061(2)(a), F.S. and 14-90, F.A.C.”

*Date of last SSPP Compliance Review*_____, *Obtain a copy of this review.*

Review the last FDOT SSPP Compliance Review, if completed in over a year, check drivers' records. If the CTC has not monitored the operators, check drivers' files at the operator's site.

IS THE CTC IN COMPLIANCE WITH THIS SECTION? ☐ Yes ☐ No

ARE THE CTC CONTRACTED OPERATORS IN COMPLIANCE WITH THIS SECTION?

☐ Yes ☐ No

DRIVER REQUIREMENT CHART

[illegible]

Sample Size:	1-20 Drivers – 50-100%	21-100 Drivers – 20-50%	100+ Drivers – 5-10%
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COMPLIANCE WITH 41-2, F.A.C.

Compliance with 41-2.006(3), Drug and Alcohol Testing

“...shall assure the purchaser of their continuing compliance with the applicable state or federal laws relating to drug testing...”

With which of the following does the CTC (and its contracted operators) Drug and Alcohol Policy comply?

- ☐ FTA (Receive Sect. 5307, 5309, or 5311 funding)
- ☐ FHWA (Drivers required to hold a CDL)
- ☐ Neither

REQUEST A COPY OF THE DRUG & ALCOHOL POLICY AND LATEST COMPLIANCE REVIEW.

DATE OF LAST DRUG & ALCOHOL POLICY REVIEW: _____

IS THE CTC IN COMPLIANCE WITH THIS SECTION? ☐ Yes ☐ No

Comments:

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

Compliance with 41-2.011(2), Evaluating Cost-Effectiveness of Coordination Contractors and Transportation Alternatives.

“...contracts shall be reviewed annually by the Community Transportation Coordinator and the Coordinating Board as to the effectiveness and efficiency of the Transportation Operator or the renewal of any Coordination Contracts.”

1. IF THE CTC HAS COORDINATION CONTRACTORS, DETERMINE THE COST-EFFECTIVENESS OF THESE CONTRACTORS.

Cost [CTC and Coordination Contractor (CC)]

	CTC	CC #1	CC #2	CC #3	CC #4
Flat contract rate (s) (\$ amount / unit)					
Detail other rates as needed: (e.g. ambulatory, wheelchair, stretcher, out-of-county, group)					
Special or unique considerations that influence costs?					
Explanation:					

2. DO YOU HAVE TRANSPORTATION ALTERNATIVES? ☐ Yes ☐ No
 (Those specific transportation services approved by rule or the Commission as a service not normally arranged by the Community Transportation Coordinator, but provided by the purchasing agency. Example: a neighbor providing the trip)

Cost [CTC and Transportation Alternative (Alt.)]

	CTC	Alt. #1	Alt. #2	Alt. #3	Alt. #4
Flat contract rate (s) (\$ amount / unit)					
Detail other rates as needed: (e.g. ambulatory, wheelchair, stretcher, out-of-county, group)					
Special or unique considerations that influence costs?					
Explanation:					

IS THE CTC IN COMPLIANCE WITH THIS SECTION? ☐ Yes ☐ 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.

Commission Standards	Comments
Local toll free phone number must be posted in all vehicles.	
Vehicle Cleanliness	
Passenger/Trip Database	

Adequate seating	
Driver Identification	
Passenger Assistance	
Smoking, Eating and Drinking	

Two-way Communications	
Air Conditioning/Heating	
Billing Requirements	

COMMISSION STANDARDS

Findings:

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.

Local Standards	Comments
Transport of Escorts and dependent children policy	
Use, Responsibility, and cost of child restraint devices	
Out-of-Service Area trips	
CPR/1st Aid	
Driver Criminal Background Screening	
Rider Personal Property	
Advance reservation requirements	
Pick-up Window	

<i>Measurable Standards/Goals</i>	<i>Standard/Goal</i>	<i>Latest Figures</i>	<i>Is the CTC/Operator meeting the Standard?</i>
Public Transit Ridership	CTC	CTC	
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
On-time performance	CTC	CTC	
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Passenger No-shows	CTC	CTC	
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Accidents	CTC	CTC	
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Roadcalls <i>Average age of fleet:</i>	CTC	CTC	
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Complaints <i>Number filed:</i>	CTC	CTC	
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Call-Hold Time	CTC	CTC	
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	

LOCAL STANDARDS

Findings:

Recommendations:

COMPLIANCE WITH AMERICANS WITH DISABILITIES ACT

REVIEW COPIES OF THE PUBLIC INFORMATION PROVIDED.

DOES PUBLIC INFORMATION STATE THAT ACCESSIBLE FORMATS ARE
AVAILABLE UPON REQUEST? ☐ Yes ☐ No

ARE ACCESSIBLE FORMATS ON THE SHELF? ☐ Yes ☐ No

IF NOT, WHAT ARRANGEMENTS ARE IN PLACE TO HAVE MATERIAL
PRODUCED IN A TIMELY FASHION UPON REQUEST?

DO YOU HAVE TTY EQUIPMENT OR UTILIZE THE FLORIDA RELAY SYSTEM?
☐ Yes ☐ No

IS THE TTY NUMBER OR THE FLORIDA RELAY SYSTEM NUMBERS LISTED WITH
THE OFFICE PHONE NUMBER? ☐ Yes ☐ No

Florida Relay System:
Voice- 1-800-955-8770
TTY- 1-800-955-8771

**EXAMINE OPERATOR MANUALS AND RIDER INFORMATION. DO CURRENT
POLICIES COMPLY WITH ADA PROVISION OF SERVICE REQUIREMENTS
REGARDING THE FOLLOWING:**

Provision of Service	Training Provided	Written Policy	Neither
Accommodating Mobility Aids			
Accommodating Life Support Systems (O ₂ Tanks, IV's...)			
Passenger Restraint Policies			
Standee Policies (persons standing on the lift)			
Driver Assistance Requirements			
Personal Care Attendant Policies			
Service Animal Policies			
Transfer Policies (From mobility device to a seat)			
Equipment Operation (Lift and securement procedures)			
Passenger Sensitivity/Disability Awareness Training for Drivers			

RANDOMLY SELECT ONE OR TWO VEHICLES PER CONTRACTOR (DEPENDING ON SYSTEM SIZE) THAT ARE IDENTIFIED BY THE CTC AS BEING ADA ACCESSIBLE AND PURCHASED WITH PRIVATE FUNDING, AFTER 1992. CONDUCT AN INSPECTION USING THE ADA VEHICLE SPECIFICATION CHECKLIST.

INSPECT FACILITIES WHERE SERVICES ARE PROVIDED TO THE PUBLIC (ELIGIBILITY DETERMINATION, TICKET/COUPON SALES, ETC...).

IS A RAMP PROVIDED? ☐ Yes ☐ No

ARE THE BATHROOMS ACCESSIBLE? ☐ Yes ☐ No

Bus and Van Specification Checklist

Name of Provider:

Vehicle Number (either VIN or provider fleet number):

Type of Vehicle: ☐ Minivan ☐ Van ☐ Bus (>22')
 ☐ Minibus (<= 22') ☐ Minibus (>22')

Person Conducting Review:

Date:

Review the owner's manual, check the stickers, or ask the driver the following:

- ☐ The lift must have a weight limit of at least 600 pounds.
- ☐ The lift must be equipped with an emergency back-up system (in case of loss of power to vehicle). Is the pole present?
- ☐ The lift must be "interlocked" with the brakes, transmission, or the door, so the lift will not move unless the interlock is engaged. Ensure the interlock is working correctly.

Have the driver lower the lift to the ground:

- ☐ Controls to operate the lift must require constant pressure.
- ☐ Controls must allow the up/down cycle to be reversed without causing the platform to "stow" while occupied.
- ☐ Sufficient lighting shall be provided in the step well or doorway next to the driver, and illuminate the street surface around the lift, the lighting should activate when the door/lift is in motion. Turn light switch on, to ensure lighting is working properly.

Once the lift is on the ground, review the following:

- ☐ Must have an inner barrier to prevent the mobility aid from rolling off the side closest to the vehicle until the platform is fully raised.
- ☐ Side barriers must be at least 1 ½ inches high.
- ☐ The outer barrier must be sufficient to prevent a wheelchair from riding over it.
- ☐ The platform must be slip-resistant.
- ☐ Gaps between the platform and any barrier must be no more than 5/8 of an inch.
- ☐ The lift must have two handrails.
- ☐ The handrails must be 30-38 inches above the platform surface.
- ☐ The handrails must have a useable grasping area of 8 inches, and must be at least 1 ½ inches wide and have sufficient knuckle clearance.
- ☐ The platform must be at least 28 1/2 inches wide measured at the platform surface, and 30 inches wide and 48 inches long measured 2 inches above the platform surface.

- ☐ If the ramp is not flush with the ground, for each inch off the ground the ramp must be 8 inches long.
- ☐ Lifts may be marked to identify the preferred standing position (suggested, not required)

Have the driver bring the lift up to the fully raised position (but not stowed):

- ☐ When in the fully raised position, the platform surface must be horizontally within 5/8 inch of the floor of the vehicle.
- ☐ The platform must not deflect more than 3 degrees in any direction. To test this, stand on the edge of the platform and carefully jump up and down to see how far the lift sways.
- ☐ The lift must be designed to allow boarding in either direction.

While inside the vehicle:

- ☐ Each securement system must have a clear floor area of 30 inches wide by 48 inches long.
- ☐ The securement system must accommodate all common wheelchairs and mobility aids.
- ☐ The securement system must keep mobility aids from moving no more than 2 inches in any direction.
- ☐ A seat belt and shoulder harness must be provided for each securement position, and must be separate from the security system of the mobility aid.

Vehicles under 22 feet must have:

- ☐ One securement system that can be either forward or rear-facing.
- ☐ Overhead clearance must be at least 56 inches. This includes the height of doors, the interior height along the path of travel, and the platform of the lift to the top of the door.

Vehicles over 22 feet must have:

- ☐ Must have 2 securement systems, and one must be forward-facing, the other can be either forward or rear-facing.
- ☐ Overhead clearance must be at least 68 inches. This includes the height of doors, the interior height along the path of travel, and the platform of the lift to the top of the door.
- ☐ Aisles, steps, and floor areas must be slip resistant.
- ☐ Steps or boarding edges of lift platforms must have a band of color which contrasts with the step/floor surface.

COMPLIANCE WITH AMERICANS WITH DISABILITIES ACT

Table 1. ADA Compliance Review - Provider/Contractor Level of Service Chart

Name of Service Provider/ Contractor	Total # of Vehicles Available for CTC Service	# of ADA Accessible Vehicles	Areas/Sub areas Served by Provider/Contractor

BASED ON THE INFORMATION IN TABLE 1, DOES IT APPEAR THAT INDIVIDUALS REQUIRING THE USE OF ACCESSIBLE VEHICLES HAVE EQUAL SERVICE?

☐ Yes ☐ No

ADA COMPLIANCE

Findings:

Recommendations:

FY ____/____ GRANT QUESTIONS

**The following questions relate to items specifically addressed in the FY _
____/____ Trip and Equipment Grant.**

DO YOU KEEP ALL RECORDS PERTAINING TO THE SPENDING OF TDTF DOLLARS FOR FIVE YEARS? (Section 7.10: Establishment and Maintenance of Accounting Records, T&E Grant, and FY _____)

☐ Yes ☐ No

ARE ALL ACCIDENTS THAT HAVE RESULTED IN A FATALITY REPORTED TO THE COMMISSION WITHIN 24 HOURS AFTER YOU HAVE RECEIVED NOTICE? (Section 14.80: Accidents, T/E Grant, and FY _____)

☐ Yes ☐ No

ARE ALL ACCIDENTS THAT HAVE RESULTED IN \$1,000 WORTH OF DAMAGE REPORTED TO THE COMMISSION WITHIN 72 HOURS AFTER YOU HAVE RECEIVED NOTICE OF THE ACCIDENT? (Section 14.80: Accidents, T/E Grant, and FY _____)

☐ Yes ☐ No

STATUS REPORT FOLLOW-UP FROM LAST REVIEW(S)

DATE OF LAST REVIEW:_____

STATUS REPORT DATED:_____

CTD RECOMMENDATION:

CTC Response:

Current Status:

CTD RECOMMENDATION:

CTC Response:

Current Status:

CTD RECOMMENDATION:

CTC Response:

Current Status:

CTD RECOMMENDATION:

CTC Response:

Current Status:

CTD RECOMMENDATION:

CTC Response:

Current Status:

CTD RECOMMENDATION:

CTC Response:

Current Status:

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? ☐ Yes ☐ No - How many minutes late/early?

Did the driver provide any passenger assistance? ☐ Yes ☐ No

Was the driver wearing any identification? ☐ Yes: ☐ Uniform ☐ Name Tag
☐ ID Badge ☐ No

Did the driver render an appropriate greeting?

☐ Yes ☐ No ☐ 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 ☐ No

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 the vehicle have two-way communications in good working order?

☐ Yes ☐ No

If used, was the lift in good working order?

☐ 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: _____ County: _____

Date of Ride: _____

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

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

Note: Attach the manifest

RIDER/BENEFICIARY SURVEY

Staff making call: _____

County: _____

Date of Call: / /

Funding Source: _____

1) Did you receive transportation service on _____? ☐ Yes or ☐ No

2) Where you charged an amount in addition to the co-payment? ☐ Yes or ☐ No

If so, how much?

3) How often do you normally obtain transportation?

☐ Daily 7 Days/Week ☐ Other ☐ 1-2 Times/Week ☐ 3-5Times/Week

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 _____ for use in publications.)

Additional Comments:

Contractor Survey

_____ County

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 complaint?

☐ Yes ☐ No

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 ☐ 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

Staff making call: Kelsey Peterson

Purchasing Agency name: You Thrive Florida (Mid Florida Community Services - DOEA)

Representative of Purchasing Agency: Yomaira Cornier

1) Do you purchase transportation from the coordinated system?

☒ YES

☐ NO If no, why?

2) Which transportation operator provides services to your clients?

Lake County Transit

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? _____

Level of Cost Worksheet 1



CTC Expense Sources

County: Lake CTC Status: In Progress CTC Organization: Lake County Board of County Commissioners

Fiscal Year: 07/01/2022 - 06/30/2023 CTD Status: Pending Submission

	Selected Reporting Period			Previous Reporting Period		
	CTC & Transportation Operators	Coordination Contractors	Total	CTC & Transportation Operators	Coordination Contractors	Total
Expense Sources						
Labor	\$ 169,050	\$ 303,444	\$ 472,494	\$ 151,881	\$ 386,092	\$ 537,973
Fringe Benefits	\$ 62,062	\$ 4,848	\$ 66,910	\$ 48,675	\$ 10,696	\$ 59,371
Services	\$ 1,644,508	\$ 5,352	\$ 1,649,860	\$ 894,335	\$ 8,233	\$ 902,568
Materials & Supplies Consumed	\$ 512,004	\$ 273,814	\$ 785,818	\$ 350,137	\$ 236,608	\$ 586,745
Utilities	\$ 9,075	\$ 15,414	\$ 24,489	\$ 6,703	\$ 7,442	\$ 14,145
Casualty & Liability	\$ 25,062	\$ 181,385	\$ 206,447	\$ 7,943	\$ 117,618	\$ 125,561
Taxes	\$ 0	\$ 6,366	\$ 6,366	\$ 0	\$ 1,863	\$ 1,863
Miscellaneous	\$ 0	\$ 0	\$ 0	\$ 0	\$ 504	\$ 504
Interest	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Leases & Rentals	\$ 0	\$ 12,600	\$ 12,600	\$ 0	\$ 12,600	\$ 12,600
Capital Purchases	\$ 820,682	\$ 0	\$ 820,682	\$ 448,417	\$ 73,171	\$ 521,588
Contributed Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Allocated Indirect Expenses	\$ 0	\$ 9,396	\$ 9,396	\$ 0	\$ 0	\$ 0
Purchased Transportation Services						
Bus Pass	\$ 0	N/A	\$ 0	\$ 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	\$ 1,981,800	N/A	\$ 1,981,800	\$ 1,875,783	N/A	\$ 1,875,783
Total - Expense Sources	\$ 5,224,243	\$ 812,619	\$ 6,036,862	\$ 3,783,874	\$ 854,827	\$ 4,638,701

Level of Competition Worksheet 2

1. Inventory of Transportation Operators in the Service Area

	Column A Operators Available	Column B Operators Contracted in the System.	Column C Include Trips	Column D % of all Trips
Private Non-Profit				
Private For-Profit				
Government				
Public Transit Agency				
Total				

2. How many of the operators are coordination contractors? _____

3. Of the operators included in the local coordinated system, how many have the capability of expanding capacity? _____

Does the CTC have the ability to expand? _____

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

5. Does the CTC have a competitive procurement process? _____

6. In the past five (5) years, how many times have the following methods been used in selection of the transportation operators?

	Low bid
	Requests for qualifications
	Negotiation only

	Requests for proposals
	Requests for interested parties

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

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
	Age of company
	Previous experience
	Management
	Qualifications of staff
	Resources
	Economies of Scale
	Contract Monitoring
	Reporting Capabilities
	Financial Strength
	Performance Bond
	Responsiveness to Solicitation

	Scope of Work
	Safety Program
	Capacity
	Training Program
	Insurance
	Accident History
	Quality
	Community Knowledge
	Cost of the Contracting Process
	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? _____

How many responded? _____

The request for bids/proposals was distributed:

_____ Locally _____ Statewide _____ Nationally

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

Level of Availability (Coordination)

Worksheet 3

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

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

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

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

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

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

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

Scheduling – How is the trip assignment to vehicles coordinated?

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

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

General Service Monitoring – How is the overseeing of transportation operators coordinated?

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

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

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

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

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

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

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

APPENDIX A: Complaint Process

ILLNESS

CTC Standard: If the customer becomes ill, or notices another passenger who appears ill, the customer should immediately inform the driver.

SURVEYS

CTC Standard: Customers must assist in completing surveys as a condition of participating in the Transportation Disadvantaged program.

HARDSHIP WAIVERS

CTC Standard: Hardship waivers may be granted to riders who cannot afford their co-pay, such as those who are on dialysis or other prolonged medical treatment programs. Detailed personal information must be submitted for consideration of a hardship waiver.

CLOSEST FACILITY

CTC Standard: All passengers of the Transportation Disadvantaged program will be required to be transported to the closest facility provided the customer's insurance is accepted at the location and the facility has availability to accommodate the customer's needs. This includes all customers under all programs, except the Americans with Disabilities Act program. Customers may be transported over County lines when the facility is closer than the nearest facility in the County and when it is deemed to be the most cost-effective means.

NON-STRANDED PROCEDURE

CTC Standard: Under no circumstance will the CTC leave a customer stranded at a location. If a customer does not return home by the normal time, immediately contact Lake County Connection at (352) 741-2612.

SCHEDULING AND CANCELLING TRIPS

CTC Standard: If a customer is in the care of a guardian and does not have the physical or cognitive capabilities to schedule or cancel their trips, their guardian must notify the operator of those concerns when the customers sign up for service.

4.1.13 LOCAL COMPLAINT AND GRIEVANCE PROCEDURE/PROCESS

A complaint is defined as any customer concern involving timeliness, vehicle condition, quality of service, personal behavior and other operational policies should be considered a complaint and should be addressed by the appropriate personnel.

Any complaint, verbal or written, should be researched to determine its validity. The resolution to complaints will vary depending on each situation. Some complaints can be resolved while speaking with the customer and others will require research to be resolved.

For any complaint received directly by the CTC, the complaint follow-up shall be handled in the following manner:

1. Complaint forms shall be completed.

2. The CTC staff shall notify the operator of the complaint by phone, scheduling software, e-mail, or fax to start an investigation into the complaint. When a complaint is made by phone, a written report shall also be sent.
3. On any written complaint or voice mail complaint received, a verbal acknowledgment will be made within 24 hours to the customer to inform the person that their complaint is being investigated.
4. Further, a written record of the complaint will describe and explain the remedial action taken within three (3) days of the date that the complaint was received and mailed to the customer. Within five (5) working days of receiving a complaint, a follow-up letter will be sent to the individual filing the complaint to determine if the problem has been resolved to the person's satisfaction. The customer will be informed of their right to contact the TD Ombudsman hotline at (800) 983-2435 if they are not satisfied with the resolution of the complaint.
5. At the discretion of the CTC and depending on the severity of the complaint, a verbal response may replace the written response, but the complaint will still be documented in the Monthly Report.
6. Complaints that are considered "HOT" shall be responded to within 24 hours. Hot complaints are addressed in the contract with the operator.
7. For any complaint received directly by the operator, the operator shall log the call into the system under the customer's file and resolve the complaint as soon as possible or no longer than five days after receipt of the complaint.

It is important to note that in addition to a timely follow-up and resolution to a complaint, it is also imperative that the problem that caused the complaint is eliminated.

The operator shall provide the CTC with a list of all such complaints monthly, along with the resolutions of the complaints.

4.1.14 COMMUNITY TRANSPORTATION COORDINATOR MONITORING PROCEDURES OF OPERATORS AND COORDINATION CONTRACTORS

4.1.14.1 Operator Monitoring

Lake County Transit annually reviews all contractors. As part of the review, LCT staff provides operators with a written letter, a proposed inspection date and a checklist of requested documents, which include employee files, compliance files, and employee training courses. Following the review, Lake County Transit provides the operator with a report, who then has 30 days to respond and provide proof that any deficiencies have been remedied.

4.1.14.2 Coordination Contractor Monitoring and Evaluation Criteria

Each coordination contractor is evaluated on an annual basis, similar to the annual review for operators. At a minimum, the review consists of the following items:



Lake County Office of Transit Services Complaint Form

Office of Transit Services
P.O. Box 7800
Tavares, FL 32778-7800

Operation Hours: 8 am to 5 pm
Monday – Friday

INTRODUCTION (Please type or print your information clearly)

Lake County Office of Transit Services is committed to providing safe and reliable Transit options within Lake County. Customers of Lake County Connection or LakeXpress are a fundamental aspect of our business and as such, their feedback is crucial to the growth and development Lake County's transportation services.

The Lake County Office of Transit Services Customer Complaint Policy has been established to ensure that passengers have an easy and accessible way to provide feedback to Lake County Office Transit Services regarding complaints, comments, suggestions, or concerns. A complaint form is available upon request.

All incident-related complaints must be filed within 180 days from the date of the incident. Feedback sent via e-mail, mail, or fax will receive a response within ten business days.

PART 1 – GENERAL INFORMATION – TYPE Check One – ADA ☐ Title VI ☐ EEO ☐ DBE ☐ Other ☐
See next page for definitions

Name:

Address:

City:

State: FL

Zip

Telephone:

Mobile:

Fax:

Transit Service – Check all that applies:

LakeXpress:

☐

Lake County Connection:

☐

Is the reason for this complaint related to an employee? ☐ Yes ☐ No If so, please complete the following:

Employee:

Route:

Incident Date, Time & Location:

Would you like a return call? ☐ Yes ☐ No

Is the basis of this complaint based on a protected Civil Rights Class, if so what type? (Check all that apply)

☐ Race ☐ Color ☐ National Origin ☐ Creed ☐ Sex ☐ Sexual Orientation ☐ Military Status

☐ Honorably Discharged Veteran ☐ The Presence of any Sensory, Mental, or Physical Disability

☐ Use of trained Guide Dog or Service Animal by a Person with a Disability

Please describe the nature of the complaint or the events that took place:

PART II - CERTIFICATION

I certify that the information on this form and any attachments are true and correct to the best of my knowledge.

Complainant's Signature

Date

If you are not satisfied with the final outcome, you have the right to file a complaint for appeal with one of the following organizations: Lake Sumter Metropolitan Planning Organization, Florida Commission for the Transportation Disadvantaged, Florida Department of Transportation or Federal Transit Administration

For Administrative Use Only:			
INVESTIGATION RESULTS:			
<u>ACTION TAKEN:</u>			
Investigated By:	Driver/Employee:	Vehicle No.	Date of Response:
Valid/Invalid:	Driver Counseled:	Response By:	
Date Logged:	Disciplinary Action:	Response Type:	
(Phone, fax, reported.)			
COMPLAINANT NOTIFIED BY TELEPHONE BY: _____ DATE: _____ TIME: _____			
COMMENTS:			

Definitions:

- [Americans with Disabilities Act \(ADA\)](#): prohibits discrimination based on disability
- [Title VI](#): prohibits discrimination based on race, color, or national origin
- [Equal Employment Opportunity \(EEO\)](#): prohibits discrimination toward an employee or job applicant based on race, color, religion, national origin, sex, age or disability. FTA investigates systemic charges of discrimination involving a transit agency's employment policies and practices. All individual complaints of discrimination must go to the [Equal Employment Opportunity Commission \(EEOC\)](#).
- [Disadvantaged Business Enterprise \(DBE\)](#): requires FTA funding recipients to comply with the DBE regulations (49 CFR Part 26).

APPENDIX B: Observational Rides

Jamie Lidgerwood

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: 3-14-24

Please list any special guests that were present: ?

Location: Lake Xpress Transit

Number of Passengers picked up/dropped off: 5

Ambulatory 2

Non-Ambulatory 3

Was the driver on time? ☒ Yes ☒ No - How many minutes late/early? 15-20 min.

Did the driver provide any passenger assistance? ☒ Yes ☐ No

Was the driver wearing any identification? ☐ Yes: ☒ Uniform ☐ Name Tag
☐ ID Badge ☐ No

Did the driver render an appropriate greeting?

☒ Yes ☐ No ☐ 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 ☐ No

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 the vehicle have two-way communications in good working order?

☒ Yes ☐ No

If used, was the lift in good working order?

☒ 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: Lake County: Lake

Date of Ride: 3-14-24

APPENDIX C: Rider Survey Results

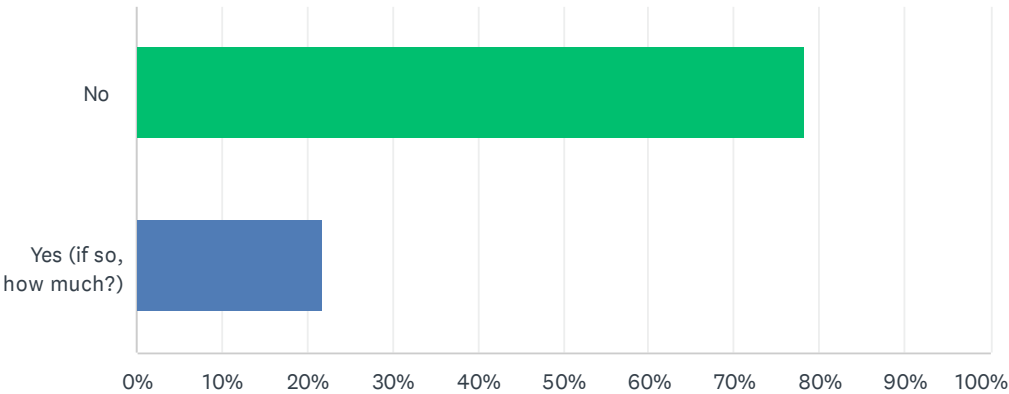
Q1 When was the last time you received transportation service from Lake County Connection?

Answered: 24 Skipped: 1

#	RESPONSES	DATE
1	failed attempt 4/23/2024	4/23/2024 9:55 AM
2	About 2 weeks ago	4/22/2024 4:02 PM
3	Never	4/19/2024 2:00 PM
4	04/18/2024	4/18/2024 1:21 PM
5	4/8/24	4/8/2024 4:30 PM
6	Last year	4/3/2024 9:39 AM
7	Today	3/29/2024 6:39 AM
8	03/25/2024	3/25/2024 1:23 PM
9	March 21, 2024	3/21/2024 4:34 PM
10	3/14/24	3/21/2024 2:16 PM
11	3/14/24	3/21/2024 2:15 PM
12	3/14/24	3/21/2024 2:14 PM
13	3/14/24	3/21/2024 2:11 PM
14	3/14/24	3/21/2024 2:09 PM
15	March 20, 2024	3/21/2024 12:33 PM
16	Today	3/13/2024 3:33 PM
17	N/A	3/11/2024 2:48 PM
18	never	3/11/2024 2:10 PM
19	March 8, 2024	3/8/2024 4:25 PM
20	Today	3/7/2024 2:30 PM
21	2/2024	3/6/2024 10:12 AM
22	I don't remember	3/4/2024 12:01 PM
23	Never	3/3/2024 8:43 PM
24	2/14/24	2/15/2024 4:46 AM

Q2 Were you charged an amount in addition to the co-payment?

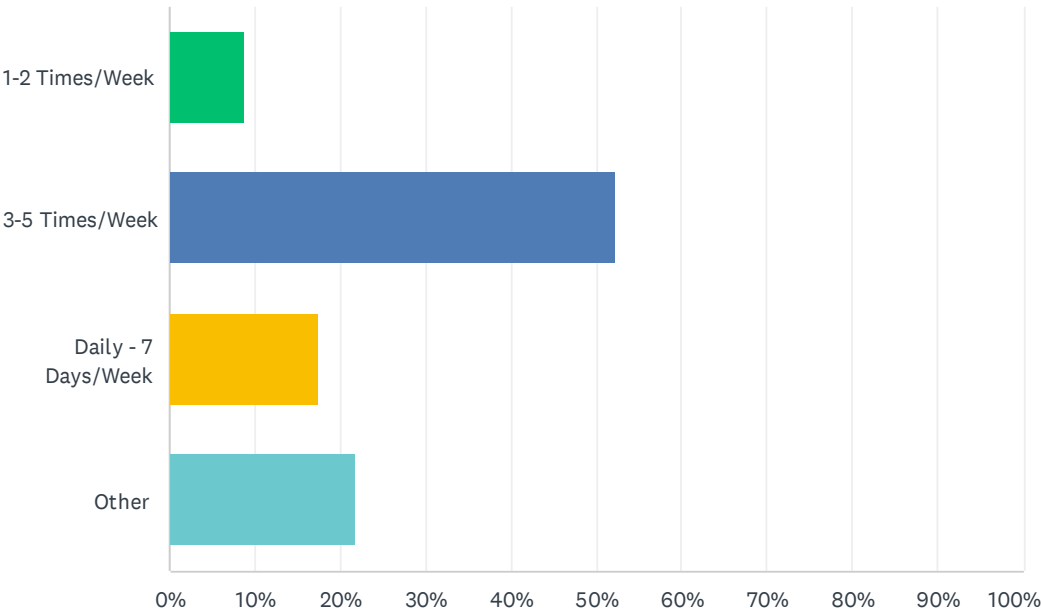
Answered: 23 Skipped: 2



ANSWER CHOICES	RESPONSES	
No	78.26%	18
Yes (if so, how much?)	21.74%	5
TOTAL		23

Q3 How often do you normally obtain transportation?

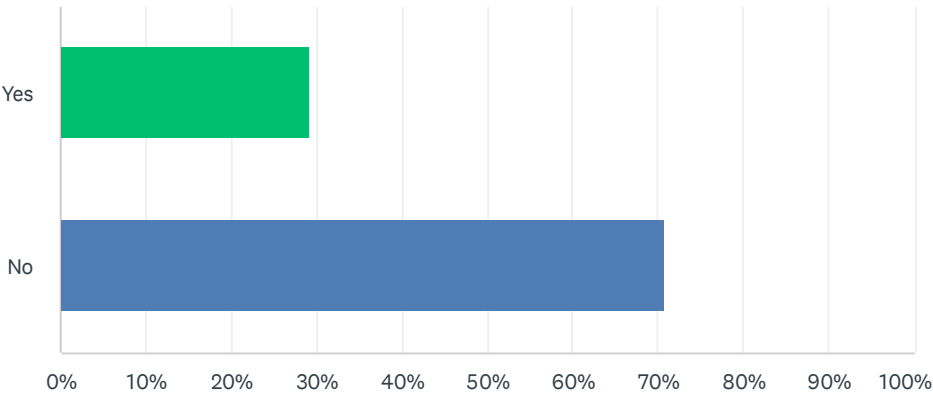
Answered: 23 Skipped: 2



ANSWER CHOICES	RESPONSES	
1-2 Times/Week	8.70%	2
3-5 Times/Week	52.17%	12
Daily - 7 Days/Week	17.39%	4
Other	21.74%	5
TOTAL		23

Q4 Have you ever been denied transportation services?

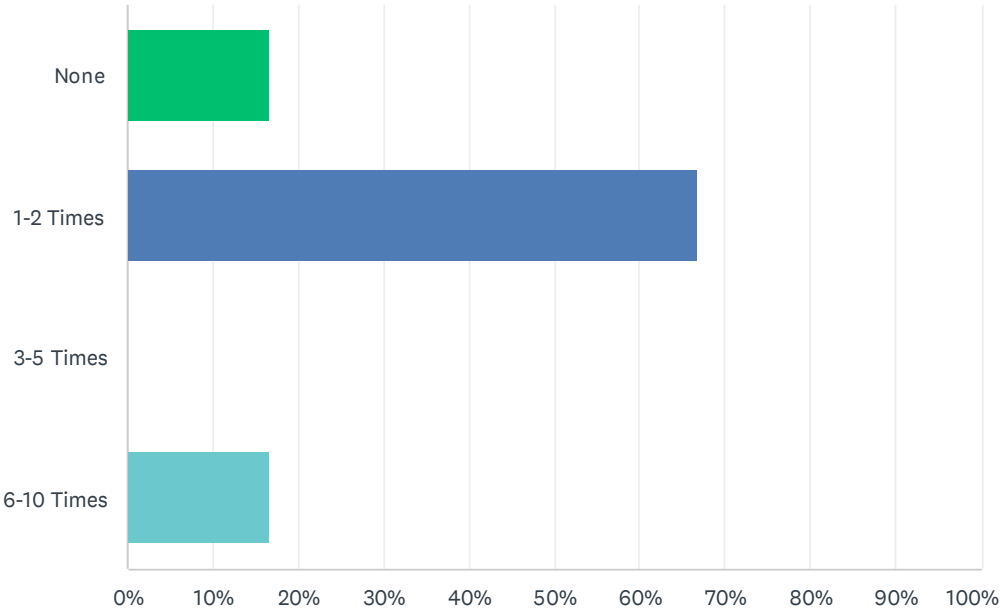
Answered: 24 Skipped: 1



ANSWER CHOICES	RESPONSES	
Yes	29.17%	7
No	70.83%	17
TOTAL		24

Q5 How many times in the last 6 months have you been refused transportation services?

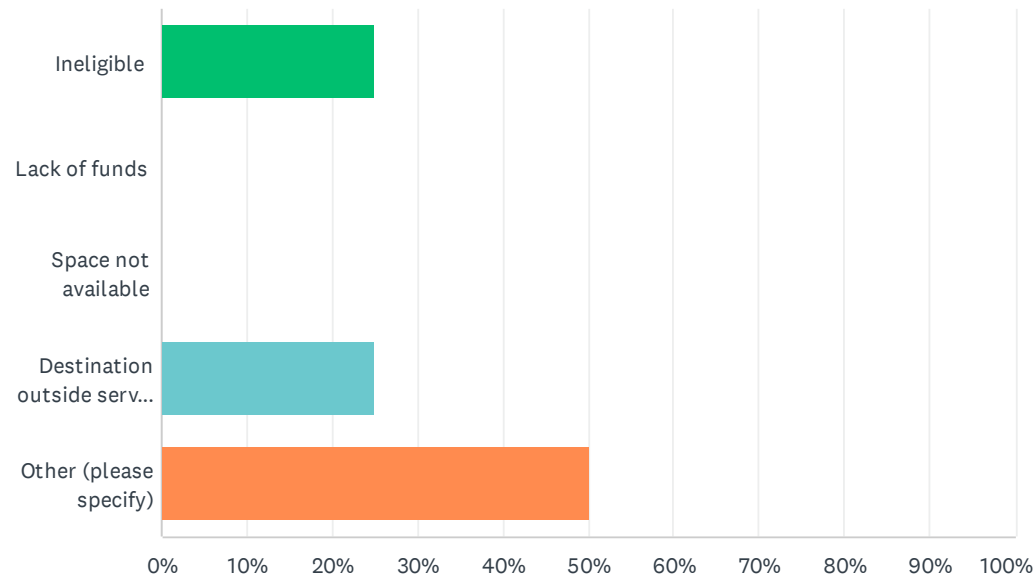
Answered: 6 Skipped: 19



ANSWER CHOICES	RESPONSES	
None	16.67%	1
1-2 Times	66.67%	4
3-5 Times	0.00%	0
6-10 Times	16.67%	1
TOTAL		6

Q6 What was the reason given for refusing you transportation services?

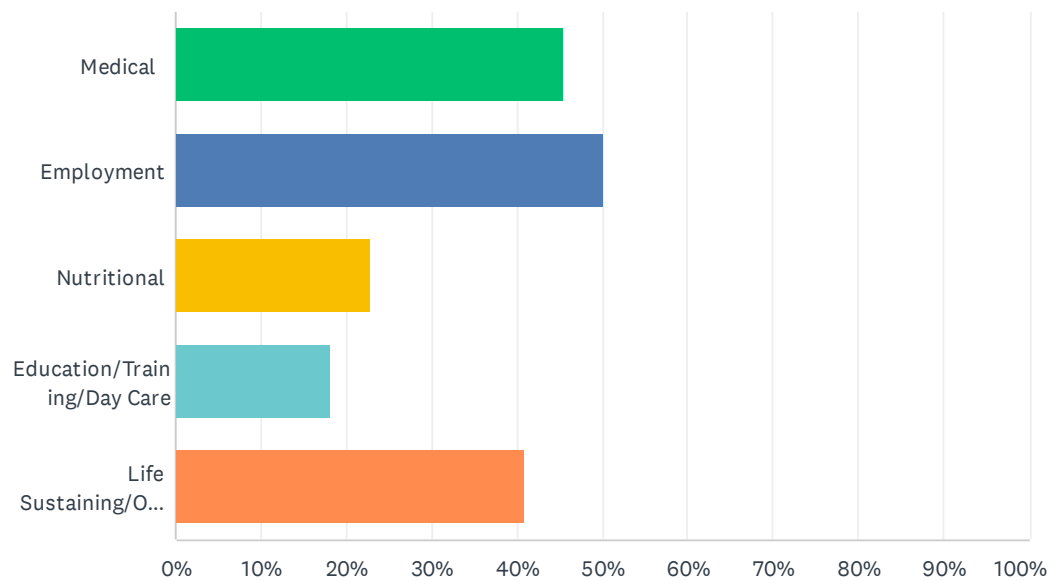
Answered: 4 Skipped: 21



ANSWER CHOICES	RESPONSES	
Ineligible	25.00%	1
Lack of funds	0.00%	0
Space not available	0.00%	0
Destination outside service area	25.00%	1
Other (please specify)	50.00%	2
Total Respondents: 4		

Q7 What do you normally use the service for?

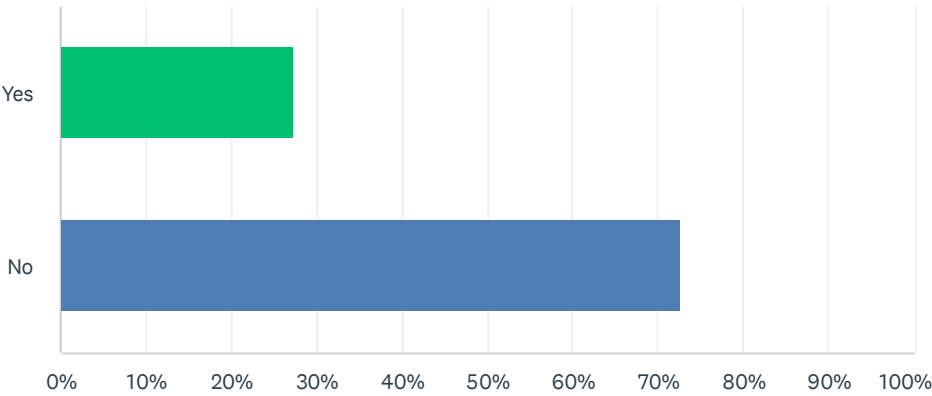
Answered: 22 Skipped: 3



ANSWER CHOICES	RESPONSES	
Medical	45.45%	10
Employment	50.00%	11
Nutritional	22.73%	5
Education/Training/Day Care	18.18%	4
Life Sustaining/Other	40.91%	9
Total Respondents: 22		

Q8 Did you have any problems with your last trip?

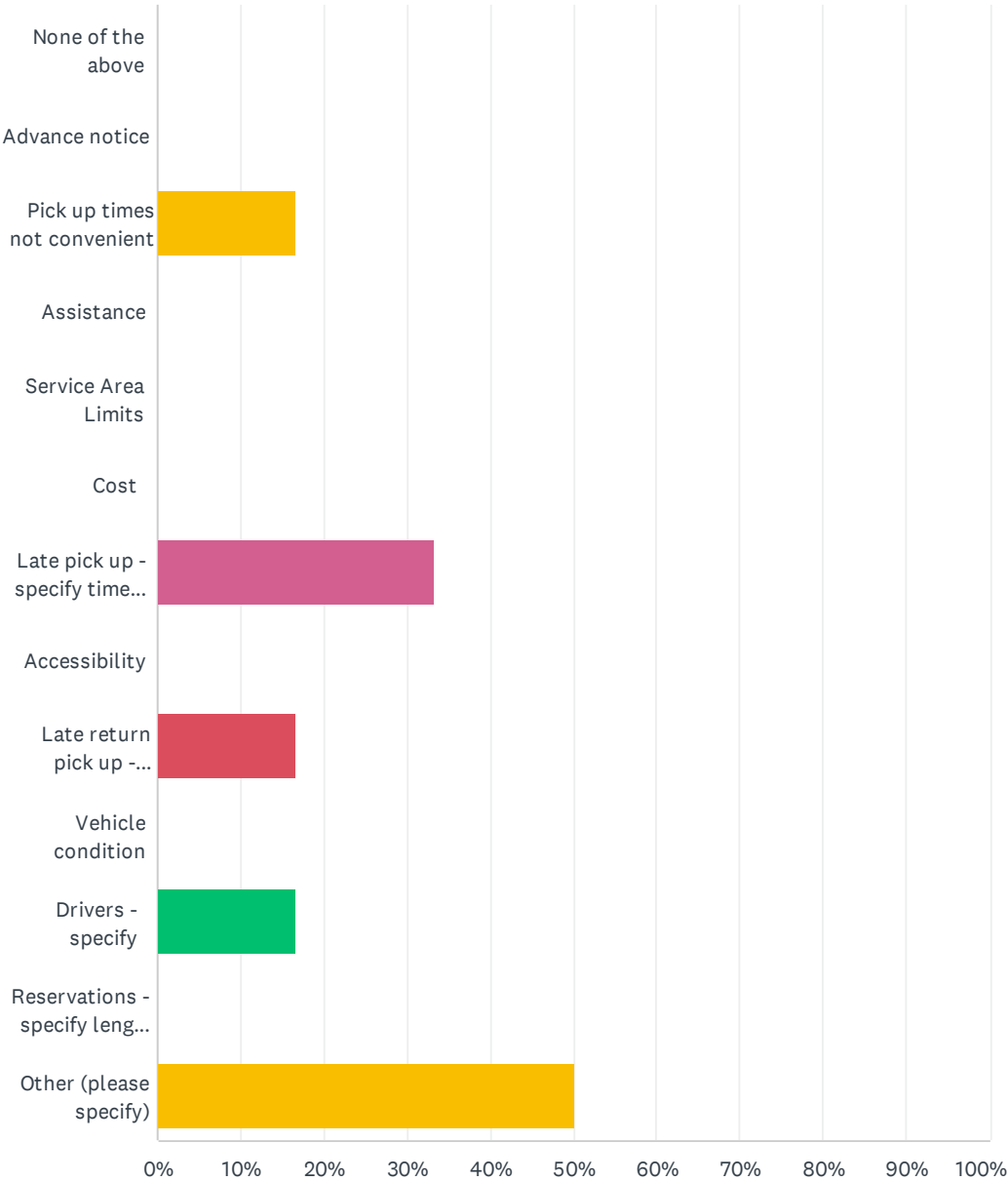
Answered: 22 Skipped: 3



ANSWER CHOICES		RESPONSES	
Yes		27.27%	6
No		72.73%	16
TOTAL			22

Q9 What type of problem did you have with your trip?

Answered: 6 Skipped: 19

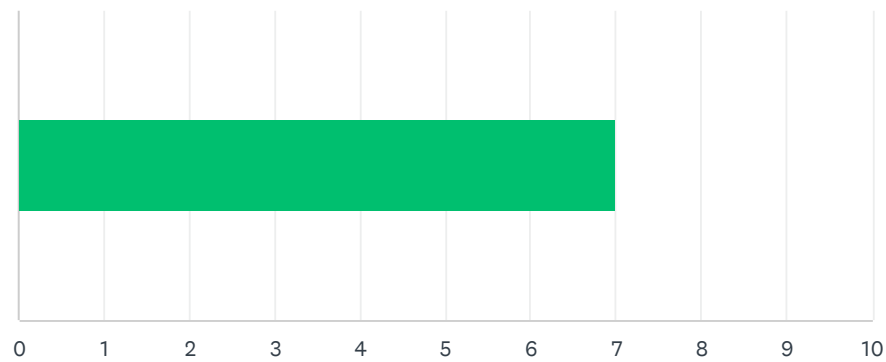


2024 Lake County Connection Rider Survey

ANSWER CHOICES	RESPONSES	
None of the above	0.00%	0
Advance notice	0.00%	0
Pick up times not convenient	16.67%	1
Assistance	0.00%	0
Service Area Limits	0.00%	0
Cost	0.00%	0
Late pick up - specify time of wait	33.33%	2
Accessibility	0.00%	0
Late return pick up - length of wait	16.67%	1
Vehicle condition	0.00%	0
Drivers - specify	16.67%	1
Reservations - specify length of wait	0.00%	0
Other (please specify)	50.00%	3
Total Respondents: 6		

Q10 On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving.

Answered: 22 Skipped: 3



ANSWER CHOICES	AVERAGE NUMBER	TOTAL NUMBER	RESPONSES
	7	154	22
Total Respondents: 22			

Q11 What does transportation mean to you?

Answered: 20 Skipped: 5

#	RESPONSES	DATE
1	It means a lot because I work in Orange County so it's very hard to get her (daughter) to school. She's on the spectrum so those rides are critical to her education.	4/22/2024 4:05 PM
2	Transportation means being able to have and keep a job, trips to the doctor, and groceries.	4/18/2024 1:25 PM
3	Freedom from having to ask family/co-workers for rides. Independence.	4/8/2024 4:31 PM
4	Means to relax and enjoy 😊 the ride	4/3/2024 9:41 AM
5	Getting to your places where you need to be	3/29/2024 6:40 AM
6	Independence!!	3/25/2024 1:26 PM
7	Helps me do what I need to do.	3/21/2024 4:34 PM
8	Being able to have access to this service is life saving.	3/21/2024 2:17 PM
9	Easy and safe	3/21/2024 2:15 PM
10	Getting where I need to go and home again without relying on family	3/21/2024 2:14 PM
11	Mobility, longevity, and overall happiness	3/21/2024 2:12 PM
12	Everything; I'm up the creek without it	3/21/2024 2:11 PM
13	Independence, freedom, and quality of life.	3/21/2024 12:35 PM
14	Access for all to get where they need to go- especially employment	3/11/2024 2:49 PM
15	Means getting picked up on time and delivered on time for class	3/11/2024 2:13 PM
16	I depend on it, to get me to point A & B	3/8/2024 4:29 PM
17	Transportation means that I can support myself and stay as independent for as long as possible.	3/7/2024 2:34 PM
18	Access to life, to the community, to the same things that people who are able to drive can get to.	3/6/2024 10:17 AM
19	It has been a lifesaver, It has made life a lot easier knowing that I can get to an appointment or work really lifts my spirits.	3/4/2024 12:04 PM
20	To transport someone from place to place	3/3/2024 8:47 PM

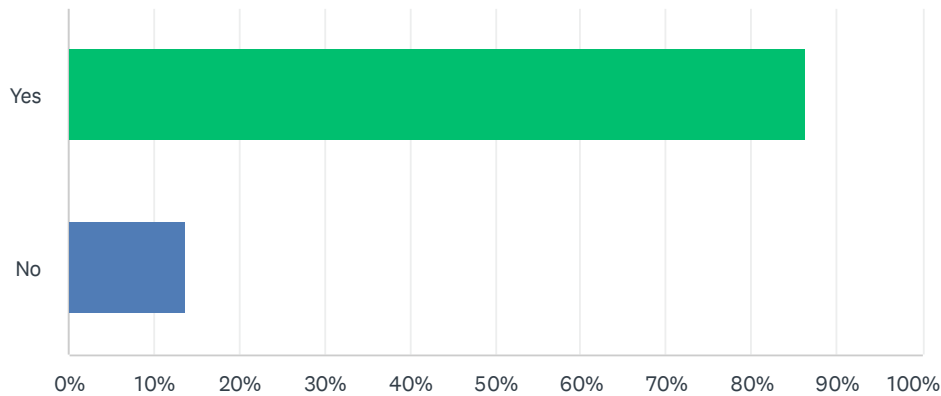
Q12 Do you have any additional comments you would like to share?

Answered: 14 Skipped: 11

#	RESPONSES	DATE
1	Sometimes driver is late and because she is on the spectrum that can be a problem. But they have been very polite and accommodating. Driver is sometimes 45 minutes to an hour late, but I get it because I know they can't always help it. One of the drivers always talks to her and treats her polite and with a lot of dignity, which is good. Drivers have been really nice, it's just the time.	4/22/2024 4:09 PM
2	The service has been very unreliable the last two weeks. I'm hoping it gets back to being relatively reliable.	4/18/2024 1:26 PM
3	No	4/3/2024 9:42 AM
4	No	3/29/2024 6:40 AM
5	Transportation availability needs to expand to weekends. Persons with disabilities have transportation needs outside of the week. Training needs to take place when dealing with individuals with visual impairments and their dog guides. Drivers are doing the minimal.. Not getting out of the van and not coming into the business to locate passenger. Training needs to take place with dispatch. When calling in to ask about rides or speaking to them about an issue; rude unprofessional attitudes are given. A payment system that does not include money or paper currency is important and other small cities have the ability through Tokin Transit are more convenient. A system to make reservations without speaking to an agent. It seems that none of these issues that are reported every year are being addressed.	3/25/2024 1:32 PM
6	Bus drivers are good and always take good care of me. Charlie is one of the best.	3/21/2024 4:35 PM
7	Note from staff - Respondent rated transportation service a 9.5 out of 10, but online survey only allows whole numbers.	3/21/2024 2:13 PM
8	Joanne was extremely pleasant and kind. I enjoyed having her as my driver.	3/21/2024 12:37 PM
9	Yes the service is good but no communication with the customers when something happens to the buses. It makes life a delay.	3/13/2024 3:38 PM
10	Services to adults with disabilities are critical to them obtaining employment.	3/11/2024 2:49 PM
11	Don't know how to schedule pick up times and return home when job requirements are outside of bus schedules	3/11/2024 2:15 PM
12	Yes, most definitely I feel there should be more improvements!.	3/8/2024 4:30 PM
13	Please keep providing this very valuable, and necessary, service.	3/6/2024 10:17 AM
14	Driver James should be fired for his mistreatment of riders, disregard for riders' health, and negative comments about the company, his boss, and riders.	2/15/2024 4:50 AM

Q13 May we anonymously use your comments in publications?

Answered: 22 Skipped: 3



ANSWER CHOICES	RESPONSES	
Yes	86.36%	19
No	13.64%	3
TOTAL		22