

Commonwealth of the Northern Mariana Islands

## Human Services Transportation Coordination Plan



“**Connecting People**” to needed destinations through coordination between transit and human services transportation providers.

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## **Introduction**

The purpose of the Human Services Transportation Coordination Plan is to improve transportation options for older adults, individuals with disabilities, and persons with low incomes through improved coordination of all publicly funded transportation in the Commonwealth of the Northern Mariana Islands (CNMI).

The Plan is prepared in accordance with Federal Transit Administration (FTA) guidelines. Using comprehensive outreach efforts the plan identifies existing transportation services, critical needs and viable strategies for older adults, individuals with disabilities and low-income residents of the CNMI. Outreach efforts included in-person and telephone interviews, focus groups, town hall meetings, and online surveys.

The plan addresses several transportation challenges in providing for the target populations. Challenges include the ability to connect with passengers in areas off the main roads, lack of information about the available transportation, a need for a higher level of transportation assistance for the elderly, a need for more accessible transportation for persons with disabilities, and a need for an overall infrastructure that can manage coordination between transportation services.

Demographics indicate a growing need for publicly funded transportation for access to education, employment, medical services, social services, religious services, shopping for basic needs, and social and recreational activities. This plan outlines the steps needed to address the many challenges and includes an overall vision for coordinating human services transportation. This plan shall be a tool in coordinating the human service transportation programs in the CNMI, resulting in improved communications and streamlined operations for everyone involved.

COTA based the initial publication of this plan on historical data of the limited public transportation services of the CNMI. As COTA conducts community outreach and public input activities, COTA shall update the plan. COTA shall solicit the services of a private consultant to expedite the process.

## **Plan Outline**

This Human Services Transportation Coordination Plan is separated into the following sections:

1. Project Overview
2. Project Methodology
3. Demographic Profile
4. Inventory of Transportation Providers
5. Service Gaps and unmet Needs
6. Strategies and Priorities
7. Recommended Action Plan

## **Project Overview**

Transportation plays an important role in people's lives in the Commonwealth of the Northern Mariana Islands. Regardless of age, ability or economic status, people need to be able to get around in the community. They need to get around so that they can receive medical care and social services, shop for necessities, visit with family and friends or perhaps attend classes at the local college. Reliable and accessible transportation means a full life in the community.

Starting in Fiscal Year 2007, projects funded through three programs in SAFETEA-LU – the Formula Program for Elderly Individuals and Individuals with Disabilities (Section 5310), the Job Access and Reverse Commute Program (JARC, Section 5316), and New Freedom (Section 5317) - must be part of a locally developed, coordinated public transit-human services transportation plan. SAFETEA-LU guidance issued by the Federal Transportation Administration (FTA) states that the plan should be a “unified, comprehensive strategy for public transportation service delivery that identifies the transportation needs of individuals with disabilities, older adults, and individuals with limited income, laying out strategies for meeting these needs, and prioritizing services.” Federal guidance specifies four required elements of the plan, as follows:

1. An assessment of available services that identifies current transportation providers (public, private, and non-profit).
2. An assessment of transportation needs for individuals with disabilities, older adults, and people with low incomes. This assessment can be based on the experiences and perceptions of the planning partners or on more sophisticated data collection efforts, and gaps in service.
3. Strategies, activities, and/or projects to address the identified gaps between current services and needs, as well as opportunities to achieve efficiencies in service delivery.
4. Identification of coordination actions to eliminate or reduce duplication in services and strategies for more efficient utilization of resources.

5. Priorities for implementation based on resources (from multiple program sources), time, and feasibility for implementing specific strategies and/or activities.

### *Older adult transportation*

The Older Americans Act (OAA) was signed into law in 1965 due to growing concern over older adults' access to health care and their general well-being. It established the federal Administration on Aging (AoA) to advocate on behalf of Americans 60 or older and to implement assistance programs for older adults, especially those at risk of losing their independence. Transportation is a major service under the OAA. It provides access to nutrition and other services offered by the AoA, as well as to medical and other essential services required by an aging population. Although no funding is specifically designated for transportation, funds can be used for transportation under several sections of the OAA, including Title III (Support and Access Services) and the Home and Community-Based Services (HCBS) program.

The Office of the Aging is the CNMI agency on aging. In addition to its policy research activities, the Office of the Aging provides oversight and funding for programs that serve elderly residents of CNMI, including transportation services.

### *Medical transportation*

The Medicaid program of the Department of Health and Human Services was established in 1965 under Title XIX of the Social Security Act (Public Law 89-87). This program pays for basic health care services for low-income individuals and long term care for older adults and people with disabilities. Federal regulations require that all states that receive federal Medicaid funds must assure that Medicaid recipients have transportation provided to/from medical appointments.

### *Employment related transportation*

The Workforce Investment Agency (WIA) of the CNMI provide financial and other support to low-income residents. Their program is designed to assist able-bodied adults to become active members of the CNMI workforce. WIA puts emphasis on skill-building, training, on-the-job experience, job search and employment. Their services are designed to remove barriers to getting and keeping a job. Transportation is a major barrier to employment.

### *Project Methodology*

The four required elements of a coordinated plan, as outlined by FTA are:

1. An assessment of current transportation services
2. An assessment of transportation needs

3. Strategies, activities and/or projects to address the identified transportation needs (as well as ways to improve efficiencies)
4. Implementation priorities based on funding, feasibility, time, etc.

### ***Starting Point***

The starting point for building a successful coordination plan requires identifying and assessing community needs and existing resources. This process involves input from a wide range of stakeholders and customers. COTA designed methods utilized during the course of this project to reach out to public, private, and non-profit organizations and to transportation users such as older adults, individuals with disabilities, individuals with low incomes, youth, and families. The process used to prepare the key findings presented in this plan involved:

1. Making Initial Contact
2. Retaining a contractor to conduct a feasibility study
3. Involving Stakeholders and the Public
4. Developing a Demographic Profile
5. Inventorying Existing Services
6. Assessing Existing Conditions and Needs
7. Identifying and Evaluating Strategies

### ***Initial Contact***

Initial contact is necessary to discuss expectations, success factors and community stakeholders. Initial contact with the CNMI community shall be by written correspondence. A contractor shall take over the process and conduct a feasibility study for a fixed / flexed route public transportation system. COTA shall have oversight of the project with input of the Advisory Council.

### ***Stakeholder and public involvement***

Stakeholder and public input is a key element in the planning process. COTA invites government, private and non-profit agencies as well as members of the public to participate in the identification of service gaps and unmet needs do. The list of unmet needs that result from stakeholder input shall serve as a starting point for the development of strategies. The list below is of potential participants of the project:

Stakeholder	Type	Representing
Autism Society of the CNMI	Nonprofit	Individuals with disabilities
Center for Independent Living	Public	Individuals with disabilities

Stakeholder	Type	Representing
Coalition for Anti-stigma of Mental Illness	Nonprofit	Individuals with disabilities
Council on Developmental Disabilities	Public	Individuals with disabilities
Department of Community and Cultural Affairs, Office of the Aging	Public	Older Adults
Excelsior Advantage	Private	Individuals with disabilities, older adults
NMPASI	Nonprofit	Individuals with disabilities, older adults
Northern Marianas College	Public	General public
Office of the Aging	Public	Older Adults
Office of Vocational Rehabilitation	Public	Individuals with disabilities
PSS Special Education	Public	Individuals with disabilities
Public Health	Public	Individuals with disabilities
Saint Michael's	Private	Individuals with disabilities, older adults
Saipan Health Clinic	Private	Individuals with disabilities, Older adults
Social Security	Public	Individuals with disabilities, older adults, and low-income
Workers' Compensation	Public	Individuals with disabilities
Workforce Investment Agency	Public	Low-income

### ***Interviews:***

COTA shall conduct interviews of transportation providers including public, private and non-profit organizations. The interviews are to obtain information about services provided and any needs identified in the process.

### ***Focus Groups:***

A minimum of two focus groups shall be held with individuals who are in one of the target populations or who work directly with them.

### ***Survey:***

A survey shall be conducted to collect detailed information about transportation services, opinions about transportation needs, and expectations of a public transportation system.

### ***Town Hall Meetings:***

Town hall meetings shall be conducted at specific residential sites throughout the CNMI. From the town hall meetings, COTA will get a sense of specific needs in different areas of the islands. Both qualitative and quantitative data shall be gathered at these meetings.

### ***Demographic Profile***

A demographic profile for the CNMI and for the individual islands of Saipan, Tinian and Rota shall be prepared using the 2000 and 2010 U.S. Census reports and additional material from local agencies. The profile provides a basis for understanding the unique characteristics of CNMI, focusing on the three demographic groups that are subject to this plan: Older adults, individuals with disabilities and persons with low income.

### ***Target population***

The target population for this Coordination Plan includes

Older Adults – individuals 55 years of age or older

Individuals with disabilities – as defined by the US Census Bureau comprises individuals with sensory, physical, mental, self-care, going outside the home, and employment disabilities

Persons with low income – individuals with incomes below the federal poverty line, which is based on the number of people in each household

According to the 2000 and 2010 US Census, the population of the CNMI was:

Area	Population 2000	Population 2010	# change	% change
<b>Saipan</b>	62,221	48,220	-14,172	22.7
<b>Tinian</b>	3,540	3,136	-404	-11.4
<b>Rota</b>	3,283	2,527	-756	-23
<b>TOTAL</b>	69,221	53,883	-15,338	-22

Major events that affected the CNMI population were the pull out of the garment industry and the US takeover of the CNMI immigration

#### Race and Ethnicity

The CNMI is a highly diverse community. As a result, its residents speak many languages. For effective communications, it is important to know how many people speak a language other than English and may not speak English very well.

#### Population trends for older adults

According to the US Census, the number of Americans age 65 or older will increase approximately 81 percent by 2025. This trend will significantly impact publicly funded transportation due to the increased need for assistance as people grow older.

#### Population trends for individuals with disabilities

The US Census Bureau recognizes various disability categories. They include sensory, physical, mental, self-care, going outside the home, and employment disabilities. Individuals with disabilities residing in CNMI has [increased / decreased] between 2000 and 2010.

According to a study conducted by the CNMI Autism Commission, autism is the fastest growing developmental disability in the CNMI. A private psychologist reported 1 case in 2004 and served a total of 48 patients by 2010. At the start of the 2007 school year, CNMI Public School System had enrolled 58 autistic students ages 3 – 21. By the close of the school year in May 2011, there were 91 documented cases.

#### Population trends for persons with low incomes

For the purpose of this plan, low income is defined as incomes below the federal poverty level. This is determined according to the threshold measures set by the Social Security Administration.

## US Census Bureau Poverty Thresholds, 2010

Size of family unit	Poverty thresholds
<b>One person (unrelated individual)</b>	11,139
<b>Under 65 years</b>	11,344
<b>65 years and over</b>	10,458
<b>Two people</b>	14,218
<b>Householder under 65 years</b>	14,676
<b>Householder 65 years and over</b>	13,194
<b>Three people</b>	17,374
<b>Four people</b>	22,314
<b>Five people</b>	26,439
<b>Six people</b>	29,897
<b>Seven people</b>	34,009
<b>Eight people</b>	37,934
<b>Nine people or more</b>	45,220

*Inventory of Transportation Providers*

COTA shall compile a comprehensive inventory of current transportation services in the CNMI. They shall contact service providers by mail, email, telephone, survey, and interview. As the project progresses and COTA obtains new information, they shall update the inventory. COTA is in the process of contracting a private organization to conduct a Fixed-Flexed Route Feasibility Study. The bulk of the data gathered about transportation providers will be obtained from this effort.

*Summary of providers*

The CNMI consists of fourteen islands of which the three main islands are Saipan, Tinian, and Rota. All three islands share the same issues of a weak transportation system. Demand response para-transit service, under the title "Saipan Call-a-Ride" is provided on the island of Saipan and serves special interest groups. Service is available Monday through Friday from 4:00 am to 9:00 pm. and is available on Saturdays from 4:00 am to 5:00 pm. Normally, there are no services on Sundays and holidays.

Curb-to-curb and door-to-door service is available upon request to persons with disabilities and those 55 years of age or older. Eligibility is also extended to individuals with functional inability to use regular passenger vehicles. Passengers call in advance to request for the service. The Call-A-Ride program currently relies on volunteers to keep it operational.

### Capital plans

With a special focus on those who are economically restricted, COTA plans to implement a major upgrade to the CNMI public transportation system and provide a variety of intra and inter-island options. The Call-A-Ride program is currently the only public transportation available on Saipan and has been for the past 11 years. The new system calls for services for pedestrians, bicycles, and an interisland ferry. The current fleet consists of 3 light duty vehicles with a capacity of 8 regular or 2 wheelchair passengers.

COTA intends to purchase additional medium duty busses of greater capacity than what is currently operating. Estimated expenditures for the purchases is over \$300 K over the next 2 years. This figure is based on very limited information from only a few potential sources. It is likely that more capital purchase are planned for later years.

### Traffic generators, origins and destinations

Major traffic generators for older adults, individuals with disabilities and persons with low income include hospitals, other health provider sites, social service agencies, employers, post-secondary education institutions and shopping sites.

The feasibility study that will be conducted for COTA shall map population densities of individuals with disabilities throughout the CNMI. I shall also identify traffic patterns, key locations or corridors with the greatest potential demand for a coordinated public transit system.

### Service Gaps and unmet Needs

A critical step in developing this plan is identifying gaps and needs in the services. The needs assessment process provides the basis for recognizing how to improve transportation service within the CNMI for older adults, individuals with disabilities and individuals of low income.

Unmet transportation needs of the CNMI will be identified through:

- Stakeholder and public input (meetings, town halls, interviews, surveys)
- Existing documentation
- Analysis of the CNMI demographics profile
- Community outreach programs and training

The needs will be categorized according to: a) rider concerns, b) provider challenges, and c) priority needs. It is important to note that identified needs from this process are based on perceptions of the respondents. A detailed study to validate the perceived problems is beyond the scope of the plan.

## Strategies and Priorities

Identifying coordination strategies is the next step in the planning process. The COTA team will develop the initial strategies. COTA will subsequently modify the initial strategies as the community needs and feasibility studies are completed.

Understanding the needs of the community and identifying gaps in existing services can best be obtained with a planned and systematic process. Surveys, interviews and focus groups shall provide initial data for analysis. COTA and a team of stakeholders shall analyze the initial data and modify initial assumptions and hypotheses if necessary. Town hall meetings shall be the forum for presenting key findings of the needs assessment process.

### Strategic Vision

In the interest of establishing a foundation of success, a general vision for human services transportation coordination in the CNMI was developed.

“**Connecting People**” to needed destinations through coordination between transit and human services transportation providers.

### Strategic goals and objectives

After the needs and feasibility studies are completed COTA will have a clearer view of what the most appropriate public transportation solution would look like. The findings of the studies feed data to the development of CNMI short and long-term public transportation plans. The plan shall include a prioritized list of public transportation projects. Each project shall be divided in specific objectives. Each objective shall be divided in specific and measurable goals.

The initial COTA strategy includes the following projects:

1. Identify community expectations and unmet needs
2. Identify all transportation providers and information about their operations and available resources.
3. Develop and implement a Mobility Management Center
4. Develop and implement a one call – one click center
5. Develop a COTA web site to include a portal for customer requests, feedback and information source.
6. Expand the current fleet to include the addition of 4 medium-duty busses
7. In the next 4 years, construct a permanent COTA facility
8. In the next 5 years, construct a COTA maintenance facility that includes 3 covered/indoor maintenance bays (2 with pit and 1 without), an exterior wash

platform, a hazardous material storage facility, hazardous waste temporary storage area, tools and small equipment storage, and a maintenance operations office.

9. Conduct a comprehensive public awareness and outreach program

The first step to meeting the COTA objectives is to establish a Mobility Management Center (MMC). A MMC can provide a variety of services and functions to facilitate transportation coordination. The MMC will oversee the implementation of a One Call – One Click Program. The program will include a “211” system that callers can speak directly to a live operator, describe their needs and receive information and referrals. During peak periods and off-duty hours, callers have the options of touch-tone menu selections to receive pre-recorded information on commonly requested topics or leave a voicemail message.

211 operators maintain structured databases with information about the human and social services offered in Saipan, Tinian and Rota. The database shall include basic information such as the name and telephone number of the agency and its days and hours of operations. For para transit services the databases also include information for on eligibility for the program. Typical eligibility criteria for transportation services are age, disability, income, place of residence and trip purpose.

### **Recommended Action Plan**

No single agency acting alone has the resources needed to develop, implement and manage programs that satisfies all the community human services needs. Creative solutions and the active participation by a wide variety of organizations and individuals is needed.

Projects from organizations across the CNMI United can complement each other and create an environment for increased collaboration and aligning of resources. Achieving multiple goals with a single project offers significant benefits as budget concerns continue to influence planning.

For coordination to be effective, COTA, public, private and nonprofit human services providers, riders, government and the public have important roles to play. This total community concept shall be implemented under a formally organized, single human services transportation coalition.

As new projects are identified, and funding secured, they must be prioritized and set to a timeline. Each project shall have a detailed cost estimate, implementation plan, evaluation criteria and performance measures. Projects that will potentially be financed by federal funds must be included in the COTA Transportation Improvement Plan (TIP).

## **Conclusion**

We anticipate that the initial setup of COTA operations will rely heavily on two pending contracts. These are the feasibility study and the Strategic Master Plan which will provide information on community transportation needs and expectations. Initial COTA projects are designed to implement a public transportation operations in the CNMI and shall play a central role in the development and execution of this Human Services Transportation Coordination Plan.