
Coordinated Transit - Human Services Transportation Plan 2010

***Region 3: Belknap County, Merrimack County (excluding
Hooksett) and the Towns of Deering & Hillsborough
from Hillsborough County***



Prepared by the Central New Hampshire Regional Planning Commission,
and the Lakes Region Planning Commission



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The Central NH Regional Planning Commission and the Lakes Region Planning Commission have endeavored to produce a plan that is based on the most current and up to date information available, along with the substantial contributions by various agencies, groups, and the public while following Federal guidance through each step of the plan update process.

Executive Summary

This study was conducted by the Central New Hampshire Regional Planning Commission and the Lakes Region Planning Commission in response to the “Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users” (SAFETEA-LU). The plan area covers Belknap County, Merrimack County (excluding Hooksett), and Hillsborough and Deering from Hillsborough County. SAFETEA-LU stipulates that projects selected for funding under the following three programs are “derived from a locally developed, coordinated transit-human services transportation plan” and that the plan is “developed through a process that includes representatives of public, private, and nonprofit transportation and human services providers and participation by members of the public.”

- 5310 - Special Needs of Elderly Individuals and Individuals with Disabilities
- 5316 - Job Access and Reverse Commute
- 5317 - New Freedom

The following table provides a general introduction to the goals and objectives of each of these three programs:

Special Needs of Elderly Individuals and Individuals with Disabilities (S. 5310)	Job Access & Reverse Commute (S. 5316)	New Freedom (S. 5317)
To provide funding for those projects that aim to increase the general mobility of senior Americans and individuals with disabilities.	<p>Improve access to transportation services to employment/employment related activities for welfare recipients and eligible low-income individuals.</p> <p>Provide financial assistance for transportation services planned, designed, and carried out to meet the transportation needs of eligible low-income individuals.</p>	<p>To provide tools to overcome existing barriers facing Americans with disabilities seeking integration into the workforce and full participation in society.</p> <p>Expand transportation mobility options available to persons with disabilities beyond the requirements of the Americans with Disabilities Act of 1990.</p>

Federal guidance identifies 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; and
4. Priorities for implementation based on resources (from multiple program sources), time, and feasibility for implementing specific strategies and/or activities.

In conducting this study, the plan team established a working group of providers and stakeholders in the region which helped to guide the study and provide invaluable insight and advice. The study area was extensively analyzed during the plan development process. The first step was to establish a demographic profile of the region. 2000 U.S. Census Data was utilized along with more current population estimates from the New Hampshire Office of Energy and Planning. Population projections also proved to be an invaluable tool in planning for future expansion of services in the region. Key findings to emerge from this demographic analysis include:

- 2008 population estimates indicate that the region's population has increased by almost eight percent since the year 2000 increasing from 187,235 individuals to 202,186.
- 2030 population projections forecast a 32 percent increase in population in the region to 247,320 inhabitants.

Increasing population will inevitably result in greater demand for transit and human services in the region. The demographic analysis focused specifically on the three target populations for this plan: Elderly Individuals, Disabled Individuals and Low-Income residents of the region. The elderly (13.3 percent) and low-income (6.4 percent) populations in the region are generally comparable to state averages for these target groups. The population in the region is growing older over time, with some municipalities projected to experience increases of their over 65 population in excess of 200 percent of their over 65 population by 2030.

Census data also indicate that the region contains almost double the amount of disabled inhabitants (28.8 percent) which exceeds the state average of 15.7 percent. This is a critical demographic indicator and highlights the need for increased coordination between human service agencies and transit providers in the region.

Household vehicle availability is a good indication of specific transit need. There are communities in the region where over 99 percent of the population has access to a private vehicle, while other communities have over 12 percent of their population without access to a vehicle. This is a major indicator of specific transit need in communities, particularly given the sprawling, more rural nature of the majority of towns in the region.

The existing regional transit options along with commuting patterns were also analyzed. While most towns in the region have some form of transit service available to them, there are widespread discrepancies in the level of service available. Obviously, the fixed route systems, Concord Area Transit and the Winnepesaukee Transit System, have the highest ridership in the region and target the largest populations due to their locations in the cities of Concord and Laconia. Specific problems identified during the transit options analysis was the lack of service in the region on evenings and weekends, often the time when the target populations for this plan are in most need of service.

A comprehensive needs analysis was conducted by the plan team to establish the barriers to increased coordination in the region, and to identify potential strategies to improve coordination between transit providers and human service agencies. It should be noted that this needs analysis actively pursued the views and opinions of both transit providers and users from the three target populations in the region under the following headings:

Transportation Needs Update

Primary needs identified for improvements to the public transit system in the region were to increase opportunities to use the system for everyday tasks such as getting to and from medical appointments, places of employment, social service facilities, shopping and social events, educational opportunities, and religious services. Current capacity and service times in the region do not support ease of use, specifically with the fixed route systems in the region. The need for expanded services to local destinations was identified, as well as regional and out of state destinations.

One particularly prominent unmet need that emerged was the lack of transportation options for individuals who have been under the care of the Merrimack County Department of Corrections. The Department of Corrections deals with a large amount of people each year with low or no income, of which many have severe disabilities and are frequently homeless. When individuals are released from the correctional facility in Boscawen they have no public transport services available to them. Similarly people who have to attend the facility for services such as pre-trial arrangements are again provided with little or no transit options. Improving services around this key facility will require improved coordination between transit and human services in the region.

Significant barriers to transportation usage were identified by providers and users. Increased education and training, for both users and drivers was identified as a key priority to improve service in the region. Training drivers on how to serve persons with disabilities emerged as a common theme, as did improving existing facilities for elderly individuals and the disabled population. These improvements should take the form of accessibility improvements to vehicles as well as increased provision of shelters and accessible bus stops.

Promotion of the existing transit options was also identified as an area for improvement. Many participants stated that they do not know about the transit options available to them due to a lack of basic information such as websites, schedules and multi-lingual information.

The lack of door to door and door through door service was also identified as a concern. By offering increased services in these categories each of the three target populations will benefit.

Real and Perceived Obstacles to Coordination

Funding issues and lack of coordination between service providers dominates this section. Insufficient funding, stovepipe funding and difficulties in obtaining local matching funds were identified as major barriers to coordination in the region.

The high cost of fuel, insurance and employing drivers were also identified as issues by transit providers. By increasing coordination, it may be possible to reduce these costs and improve service. Specific transit users identified their own inability to pay for multiple transit services as an obstacle to coordination. Both users and providers identified the lack of coordination between the different transit agencies in the region as an issue. Also, lack of coordination between the larger cities and local rural communities in the region emerged as an issue. Specifically, smaller communities would like an expansion of fixed route services from the larger cities to their towns but may not be in a position to fund this service.

Multiple carriers serving the same population and the lack of an integrated ticketing service for the region require additional coordination. The creation of a common payment system has the potential to improve users' ability to obtain tickets for transit services.

The development of a common call center / regional transportation brokerage was identified as a key step in improving coordination in the region. Specific technologies to improve scheduling and coordination were also discussed. This improvement would be the responsibility of the Transportation Brokerage to implement when a broker is in place.

Key Players and their Responsibilities

The leading transit providers in the region, such as Community Action Program Belknap – Merrimack Counties, Inc. were identified as being instrumental in the establishment of a Regional Transportation Brokerage and promoting increased coordination in the region. Local municipalities and municipal officials, state governmental agencies and Regional Planning Commissions were also identified as key players in assisting with increased coordination of transit and human services. Individual organizations were also identified. Improving coordination is a key task for all interested parties.

Finding an individual / organization to take the lead in the coordination process was identified as a primary task and is a process that should be started immediately to ensure improved services are delivered as early as possible.

The table below provides an analysis of some of the major needs identified throughout this plan update process.

Transit Needs, Resources and Potential Improvements

Target Population	Special Transportation Needs & Concerns	Types of Transportation Modes	Potential Transit Improvement Projects
Elderly: Able Bodied	<ul style="list-style-type: none"> - Lack of knowledge about resources - Concern about safety and security - Awareness of time when driving may be limited - Increased service 	<ul style="list-style-type: none"> - Fixed routes - Demand response service - Special purpose vehicles: recreation, shopping, services, social activity 	<ul style="list-style-type: none"> - Educational initiatives, including experience with transit riding before it is needed - Buddy programs and assistance in trying transit - Incentivized fares for seniors
Elderly: Frail	<ul style="list-style-type: none"> - Assistance to and through the door - On time performance and reliability critical to frail users - Assistance in trip planning needed - Need for shelters - Increased service 	<ul style="list-style-type: none"> - ADA Paratransit - Emergency and non-emergency medical transportation - Escort/Companion services - Special purpose vehicles 	<ul style="list-style-type: none"> - Escorted transportation options - Door-through-door assistance; outside vehicle assistance - Technology that provides feedback both to the consumer and to dispatch - Individualized trip planning and trip scheduling assistance - Appropriately placed bus-shelters
Persons with Disabilities	<ul style="list-style-type: none"> - Service quality and reliability - Driver sensitivity and appropriate passenger handling procedures - Concerns about wheelchair pass-bys - Need for shelters - Door-to-door or door-through-door service for certain individuals - Difficulty in accessing visual or auditory information - Increased service 	<ul style="list-style-type: none"> - ADA Paratransit - Emergency and non-emergency medical transportation - Escort/Companion services - Special purpose vehicles 	<ul style="list-style-type: none"> - Continuing attention to service performance; importance of time sensitive service applications - Driver education and attention to procedures when dealing with passengers with disabilities - Appropriately placed bus shelters
Persons of Low Income	<ul style="list-style-type: none"> - Easy access to trip planning information - Fare subsidies that can be provided in a medium that is not cash (bus tokens or passes) - Availability of bus tokens or passes - Increased service 	<ul style="list-style-type: none"> - Fixed Route transit - Demand response services - Special purpose vehicles: employment, training, education 	<ul style="list-style-type: none"> - Train the trainers, staff who can train consumers to access public transit - Creative fare options available to human services agencies - Increased quantity of bus tokens available - Bus passes available to those searching for jobs or in job training programs - Increase education about transit, continue to work on improving transit service levels (coverage, frequency, span of hours)

After examination of the transit needs expressed throughout the study process, the plan team developed the following vision statement to help to frame discussions on how best to improve coordination in the region:

Vision Statement: Increased Coordination between Transit and Human Services in the Region

Transportation providers, purchasers, riders, and the community at large in the Region 3 area will work together for mutual benefit to gain economies of scale, eliminate duplication, and expand and improve the quality of service to address the transportation needs of people with transportation challenges.

To assist in meeting this vision, the project team developed strategic goals, each accompanied by a set of implementation objectives. The goals were developed from public input obtained during the plan update process and the recommendations contained in the 2008 Coordinated Transit & Human Services Transportation Plan. These goals are responsive to the federal guidance for a locally developed plan and establish the roadmap by which the mobility needs of the region's target populations can be addressed. The implementation objectives are the methods by which gaps in services and opportunities for increased efficiencies may be effectuated.

While each of the goals are of equal importance, the implementation objectives are listed in priority order as determined by the Region 3 stakeholders who attended meeting 2 of the plan update process.

Goal 1: Establish the Region 3 Regional Coordinating Council.

Implementation Objectives:

1. Establish the Region 3 RCC.
2. Secure adequate funding and commitment from federal and state agencies to develop and maintain the Region 3 RCC.
3. Once the Region 3 RCC is in place, it should work to appoint the Regional Transportation Coordinator.

Goal 2: Increase coordination between transportation providers, users, and other interested agencies in the Region 3 area.

Implementation Objectives:

1. Establish a common call center for general information/scheduling rides. This call center should be multi-lingual such as the model in use at Concord Hospital. Call center should be automated in order to run 24 hours and manned during normal business hours.
2. A clear and effective common website with the facilities for ride scheduling, timetables, and general information should be established (this should be multi-lingual). Seek funds to develop a web based Find-A-Ride system to guide riders to the most efficient and appropriate transportation service provider. The CNHRPC currently operates a web-based Find-A-Ride system which could serve as a useful tool when expanding facilities in the future.

3. Identify priority origin and destination points outside of the region and coordinate transportation services with these surrounding communities.
4. Ensure that adequate scheduling software is in place in order to develop a clear system of operations.
5. Implement an automated reminder call system to contact riders the day before a scheduled ride.
6. Seek funding to procure new equipment to assist with real-time operations, security, and scheduling.
7. Identify the key issues relative to the performance of transit providers in the region, both positive and negative and report on specialized transportation projects and solutions as applicable.
8. Compile a database of frequent users of transit and their origin/destination in order for better coordination to take place.
9. Examine the possibility of implementing a common payment option for all transit services in the region, such as a common swipe card.

Goal 3: Pursue a funding strategy that leverages local, state, federal, and private resources.

Implementation Objectives:

1. Develop partnerships with local institutions and private sector organizations to make contributions to public transportation services. Community Action Program Belknap – Merrimack Counties, Inc. has experience with this approach having raised matching resources for vehicle maintenance, purchase and operation.
2. Providers should group together under the guidance of the RCC/Transportation Brokerage to have increased purchasing power and better utilization of resources when seeking federal funding opportunities.
3. Seek JARC funds to offer bus pass subsidies for low-income individuals to/from jobs and employment related activities.
4. Add voucher programs to assist fare payment by low-income workers and low-income seniors.
5. Where applicable, utilize non-NHDOT funds such as Medicaid, Temporary Assistance for Needy Families (TANF) and Older American Act (Title IIIB) as matching resources. This is a strategy that has been successfully used by the Tri-County CAP in Berlin, NH and Community Action Program Belknap – Merrimack Counties, Inc.
6. Under the guidance of the Region 3 RCC, identify barriers to coordination as a result of funding difficulties and ensure that the correct funding opportunities are sought to address issues such as insurance, financing, etc.

Goal 4: Enhance the existing transportation facilities in the Region 3 area and on specific routes that lead to and from the region to ensure that existing capacity is improved.

Implementation Objectives:

1. Improve/establish services along the following regional corridors (or any potential combinations of these corridors):
 - Concord – Manchester – Boston
 - Seacoast – Laconia
 - Seacoast – Manchester (NH Route 101)

- Seacoast – Concord (NH Route 4)
 - Dartmouth – New London – Concord
 - Keene – Peterborough – Hillsborough – Hopkinton – Concord
 - Laconia – Tilton – Boscawen – Concord
 - Alton – Allenstown
 - Wolfeboro – Alton – Pittsfield
2. Establish feeder services to connect to fixed transit routes. Where possible these feeder services should be funded at some level by municipalities who have a need for access to the fixed route services in operation. Specific locations identified at Meeting 1 include:
 - Services to and from Concord: Allenstown, Barnstead, Boscawen, Bow, Epsom, Hillsborough, Pembroke, Pittsfield.
 - Services to and from Franklin: Andover, Boscawen, Danbury, Hill, New London, Salisbury, Wilmot.
 - Services to and from Laconia: Alton, Barnstead, Bethlehem, Pittsfield, Plymouth, Meredith, Rochester, Wolfeboro.
 3. Promote an enhanced volunteer driver program in the region.
 4. Research liability insurance options for human service organizations, including general liability for vehicle operations and for volunteer-based programs; widely distribute information about these findings and resources.
 5. Promote vehicle maintenance, vehicle loaner, vehicle back up programs, and driver sharing for human services agencies.
 6. Identify access impairments to bus stops and repair or construct safe travel paths so seniors and people with disabilities can easily use transit. Curb cuts; drop down plates, etc.
 7. Promote additional ridership of fixed route and demand response services through increased marketing efforts.
 8. Improve vehicles with updated equipment such as Mobile Data Terminals (MDT) for improved manifest display, immediate additions/deletions/confirmations to trips, improved communication and tracking.
 9. Establish basic reporting tools, including driver logs, dispatch logs, and standardized definitions of terms that can be easily adopted by human services agencies and utilized in reporting on transportation services provided.
 10. Identify and seek funding for safe and reliable services for transporting children to school, outside of school hours these vehicles could be utilized to provide transportation services for the region.

Goal 5: Establish a clear and effective education and training program for transit users and providers.

Implementation Objectives:

1. Implement a rider education program to inform each of the target groups about services available to them.
2. Initiate a comprehensive customer service program for transit providers and human service agencies to address the specific needs of transit users such as cultural differences, multi lingual needs, physical and mental needs.
3. Expand mobility training for both riders and drivers so those with decreased mobility will have better opportunities to use regular fixed-route buses and vehicles.

4. Initiate shared driver training between different agencies.
5. Establish a clear program making door to door service available to all eligible paratransit riders which would deal with physical requirements for both users and providers.

Goal 6: Encourage local land use planning policies that promote effective and sustainable transit planning.

Implementation Objectives:

1. Provide education and technical support to communities in the Region related to effective and sustainable transit planning. Potential land use and transit policies in the region may include:
 - Modification of existing zoning regulations to expedite creation of a variety of development types. Revised zoning codes, Prime Urban District zoning, and creation of overlay districts can encourage higher densities, mixed use developments and transit oriented development in appropriate areas.
 - The encouragement of mixed-use districts to improve the viability of local shops and businesses, increase housing options, provide social diversity, increase personal and convenience, and most importantly, offer transportation choices.
 - The adoption of design guidelines that will allow local municipalities to communicate the community's expectations and desired type of development.
 - Encouragement of development of vacant land and reuse of older sites. Infill development can contribute to the creation of concentrated activity centers and, because of its proximity to existing commercial areas and neighborhoods, encourage transit use.

The document concludes with a summary of potential funding opportunities available from and a variety of sources, including the Federal Transit Administration, The New Hampshire Department of Transportation, the New Hampshire Department of Health and Human Services, as well as local sources and private foundations.

1.0 Introduction

The purpose of this project is to prepare an updated Coordinated Public Transit and Human Services Transportation Plan for Belknap County and portions of Hillsborough and Merrimack counties that is consistent with the requirements of the Safe, Accountable, Flexible, and Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU). In the region an initial Coordinated Public Transit-Human Services Transportation Plan was formally adopted by both planning commission's Transportation Advisory Committee's in June 2008 to address these issues. This plan update helps ensure that evolving transit and human service needs are continually met by the appropriate federal transit funding.

This planning policy document is a joint effort between the Central New Hampshire Regional Planning Commission and the Lakes Region Planning Commission, and covers Belknap County, Merrimack County (excluding Hooksett), and Hillsborough and Deering from Hillsborough County.

SAFETEA-LU was signed into law on August 10, 2005, and authorizes the provision of \$286.4 billion in guaranteed funding for federal surface transportation programs over five years (Fiscal Years 2005-2009), including \$52.6 billion for federal transit programs. As of September 30, 2009 the SAFETEA-LU Act has formally expired however; Congress has initiated a number of temporary extensions to the program. It is likely that this practice will continue until lawmakers reach agreement on a comprehensive reauthorization of the Act, possibly after the 2010 midterm elections. Starting in Fiscal Year 2007, projects funded through three programs included in SAFETEA-LU—the Job Access and Reverse Commute Program (JARC – Section 5316), New Freedom (Section 5317) and the Formula Program for Elderly Individuals and Individuals with Disabilities (Section 5310)—are required to be derived from a locally developed, coordinated transit-human services transportation plan. The Federal Transportation Administration (FTA) indicates that a coordinated transit-human services transportation 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”.

1.1 SAFETEA-LU Planning Requirements

The FTA issued program circulars (FTA C9770.1F, FTA C9050.1, and FTA C9045.1) effective May 1, 2007, to provide guidance on the administration of the three programs subject to this planning requirement. Each of these circulars stipulate that projects selected for funding under the Section 5310, JARC, and New Freedom programs are “derived from a locally developed, coordinated transit-human services transportation plan” and that the plan is “developed through a process that includes representatives of public, private, and nonprofit transportation and human services providers and participation by members of the public”.

This federal guidance specifies four required elements of a coordinated 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; and

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

The three sources of funds subject to this plan are intended to improve the mobility status of persons with disabilities, older adults, and low-income individuals, as described below.

- 5310 - Special Needs of Elderly Individuals and Individuals with Disabilities – This program provides formula funding for the purpose of assisting private nonprofit groups in meeting the transportation needs of the elderly and persons with disabilities when the transportation service provided is unavailable, insufficient or inappropriate to meeting these needs. Funds are apportioned based on each State's share of population for these groups of people. Most funds are used for capital improvements, but acquisition of transportation services under contract, lease or other arrangements and state program administration are also eligible expenses. Funding is provided based on an 80 percent Federal share and a 20 percent local match.
- 5316 - Job Access and Reverse Commute – Grants under this program are intended to provide new transit services to assist welfare recipients and other low-income individuals with access to jobs, training and child care. Reverse Commute Grants are designed to develop transit services to transport workers to suburban job sites. Eligible activities include capital and operating costs of equipment, facilities and associated capital maintenance items related to providing access to jobs. Operating costs, capital costs and other costs associated with reverse commute by bus, train, carpool, vans or other transit services are also eligible for funding.
- 5317 - New Freedom – The purpose of this program is to encourage services and facility improvements to address the transportation needs of persons with disabilities that go beyond those required by the Americans with Disabilities (ADA) Act. Funding is provided for capital and operating costs associated with these services, and ten percent of funding may be used for planning, administration and technical assistance. Funding is allocated through a formula based on population of persons with disabilities.

Table 1: Special Needs of Elderly Individuals and Individuals with Disabilities, JARC & New Freedom - Summary of Program Goals

Special Needs of Elderly Individuals and Individuals with Disabilities (S. 5310)	Job Access & Reverse Commute (S. 5316)	New Freedom (S. 5317)
To provide funding for those projects that aim to increase the general mobility of senior Americans and individuals with disabilities.	<p>Improve access to transportation services to employment/employment related activities for welfare recipients and eligible low-income individuals.</p> <p>Provide financial assistance for transportation services planned, designed, and carried out to meet the transportation needs of eligible low-income individuals.</p>	<p>To provide tools to overcome existing barriers facing Americans with disabilities seeking integration into the workforce and full participation in society.</p> <p>Expand transportation mobility options available to persons with disabilities beyond the requirements of the Americans with Disabilities Act of 1990.</p>

1.2 Project Goals

In order to meet the requirements of SAFETEA-LU, the State of New Hampshire formed the Governor's Taskforce on Community Transportation. This resulted in the organization of a permanent Statewide Coordinating Council (SCC) in 2007 whose role is to set statewide coordinating policy to be implemented at the regional level, assist regional coordination efforts, and monitor the results of coordination efforts statewide. The SCC will oversee multiple Regional Coordinating Councils (RCC) and their Regional Transportation Coordinators (RTC) that act as regional brokers. The area consisting of Belknap County and portions of Hillsborough and Merrimack Counties is designated as the Region 3 RCC area. Therefore, one of the key goals of this project is to establish a competent, accessible and appropriate Regional Coordinating Council, along with a Regional Transportation Coordinator, which will ultimately be responsible for the coordination of transit and human services in Belknap County and portions of Hillsborough and Merrimack Counties.

While primarily a planning policy document, this Coordinated Transit-Human Services Transportation Plan will also be used as an implementation tool and as a framework for the prioritization and selection of projects to utilize federal funding assistance through the three FTA programs mentioned above. The New Hampshire Department of Transportation is required to distribute SAFETEA-LU funds to each of the eligible Regional Coordinating Councils in the State, and starting in Fiscal Year 2007, to certify that projects funded are derived from the region's coordinated plan. An overarching goal of this planning effort, then, is to respond to SAFETEA-LU requirements for receiving these federal funds.

The plan also provides an opportunity for a diverse range of stakeholders with a common interest in human service transportation to convene and collaborate on how best to provide transportation services for these targeted populations. Specifically, the stakeholders are called upon to identify service gaps and/or barriers, identify the solutions most appropriate to meet these needs based on local circumstances, and prioritize these solutions for inclusion in the plan.

Stakeholder outreach and participation is a key element to the development of this plan. Federal guidance issued by the FTA specifically requires this participation, and recommends that it come from a broad base of groups and organizations involved in the coordinated planning process, including (but not limited to); area transportation agencies, transit users and potential users, public transportation providers, private transportation providers, non-profit transportation providers, human service agencies funding and/or supporting access for human services, advocacy organizations, community-based organizations, elected officials, and other government agencies that administer programs for targeted populations.

This plan is intended to both capture local and regional stakeholder issues, and to establish the framework for potential future planning and coordination activities.

1.3 Federal and State Initiatives to Promote Coordination

Coordinated planning is a way to forge a common vision, avoid working at cross purposes, and align work programs toward common goals. Incentives to coordinate human services transportation programs are defined and elaborated upon in numerous initiatives and documents at the federal, state and regional levels. Coordination can enhance transportation access, minimize duplication of services, and facilitate cost-effective solutions with available resources.

Coordination at the Federal Level:

In February 2004 President George W. Bush issued an Executive Order calling for the creation of an interagency council comprised of representatives from a number of federal departments and agencies. In response to the Executive order, the Federal Interagency Coordinating Council on Access and Mobility (CCAM) was created. The CCAM established the United We Ride Action Plan in late 2004, which contained a number of key objectives to improve the interrelationship between transit and human services:

- Promote interagency cooperation and the establishment of appropriate mechanisms to minimize duplication and overlap of federal programs and services so that transportation disadvantaged persons have access to more transportation services.
- Facilitate access to the most appropriate, cost-effective transportation services within existing resources.
- Encourage enhanced customer access to the variety of transportation resources available.
- Formulate and implement administrative, policy, and procedural mechanisms that enhance transportation services at all levels.
- Develop and implement a method for monitoring progress on achieving the goals of this order.

This action plan led to the creation of the national ‘United We Ride’ program. United We Ride is a federal interagency initiative that supports states and localities in developing coordinated human service transportation delivery systems. In addition to state coordination grants, United We Ride provides state and local agencies with transportation coordination and planning self assessment tools such as ‘A Framework for Action’, technical assistance, and other resources to help communities succeed in their coordination efforts.

The CCAM also developed a set of five recommendations for further federal transportation integration, that support the goals of simplifying access, reducing duplication, and improving cost-effectiveness in order to increase coordination between transit and human service agencies. These recommendations ultimately resulted in the passage of the 2005 SAFETEA-LU Act, which in turn required new aspects to be added to state and regional plans for those areas to be eligible to receive federal funds.

Coordination at the State Level:

For over a decade, the State of New Hampshire has recognized the need to better coordinate and improve transportation statewide. In 1994, a coordinating committee was formed to review and make recommendations on transportation opportunities. Their findings were developed into a proposed statewide strategy and work plan. As a result of this effort, the NH Office of Energy and Planning (OEP) formerly the NH Office of State Planning undertook a *Statewide Transit Coordination Study* in 1995.

The OSP study reviewed existing transit services in the state and made several recommendations for developing a coordinated system “to better utilize diminishing funds and more efficiently provide services to clients.” The study’s recommendations included the formation of a State Coordinating Council along with strategically positioned Regional Coordinating Councils to review and coordinate transit needs and to competitively select a Regional Transportation Coordinator that would provide needed transportation services within specified regions of the state. The recommendations from this study were never implemented.

In 2004, then Governor Craig Benson signed Executive Order 2004-6 establishing the Governor’s Task Force on Community Transportation. Under the Executive Order, the Task Force was charged with developing strategies to improve coordination between human services and transit into a coordinated statewide plan to “establish a well-coordinated, interconnected, accessible, statewide transportation system for all transit users in New Hampshire.”

The Task Force consisted of representatives from NH Department of Transportation (DOT), NH Department of Health and Human Services (DHHS), the Governor’s Commission on Disability; and representatives from the Rural Transportation Access Network as well as members of the public. The Task Force’s recommendations became the ‘Statewide Coordination of Community Transportation Services Plan’.

Statewide Coordination of Community Transportation Services Plan:

This plan, prepared by Nelson Nygaard Consulting Associates, and formally adopted in 2006, reiterated the recommendations from the 1995 Office of State Planning effort and went further by recommending the formation of a formal organizational structure to implement transportation coordination activities throughout the state.

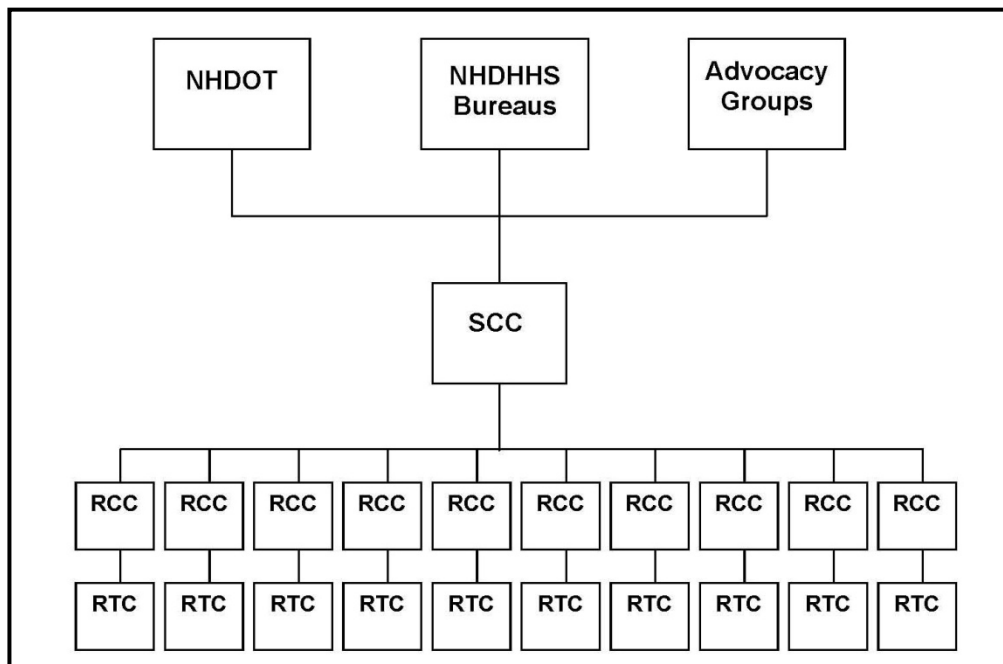
The plan’s findings indicated broad provider and agency support for regional transportation coordination activities. Responders agreed that coordination would result in a reduction of duplicative services and expand service coverage. They also felt that the system should be consistent with the concurrent DHHS implementation of the “Granite Care” program, further described below.

The current statewide plan recommends the creation of an institutional and geographic framework for coordinating services, and an organizational structure for implementation and oversight of

transportation service and coordination activities. A Statewide Coordinating Council comprised of major funding agencies and other stakeholders acts primarily as an advisory body. The state is geographically divided into a number of Regional Coordinating Councils which are overseen directly by the state council. Regional councils would be comprised primarily of regional representatives of funding agencies and service providers. The regional councils would work with providers to create local service designs and to implement coordination policies. They would also provide direct oversight of their respective Regional Transportation Coordinators, who would provide the regional transit brokerage services.

As described in the statewide plan, the role of the broker would be to “coordinate the service delivery of customers of sponsoring organizations so as to maximize the use of scarce resources and combine ride-sharable trips sponsored by different organizations.”

Figure 1: State of New Hampshire Coordination Framework



Source: Governor’s Taskforce on Community Transportation, *Statewide Coordination of Community Transportation Services*, October 2006.

New Hampshire’s Long Range Transportation Plan:

The New Hampshire Long Range Transportation Plan, formally adopted in May 2008, is a statewide planning document formulated to establish strategic direction for further investment and management of state transportation assets over the next twenty years. It is an objective of the plan to broaden the range of transportation choices available to the public, and integrate its transportation policies with consideration for land use, environmental preservation, local and statewide economic needs and human services. The Long Range Plan offers the following strategic vision for transportation in New Hampshire:

In the year 2030, transportation in New Hampshire will enhance environmental quality, promote sustainable economic development and land use, and preserve the State's unique character and quality of life. Transportation in New Hampshire will provide safe and secure mobility and travel for all of the state's residents, visitors and goods movements, is well-maintained and reliable, and provides seamless interstate and intrastate connectivity.

The plan acknowledges that greater coordination between human services and transportation is needed. While there are a wide variety of community transportation services available, many operate in relative isolation, and in many cases user access is restricted by region or by funding mechanism, which ultimately results in “inefficient planning and services; workers lose access to jobs, seniors miss medical and social appointments, and low income populations can't get to needed services.”

Department of Health and Human Services (DHHS):

‘Granite Care’ is another statewide program, developed by the DHHS under the Medicaid Modernization program. As a member of the Governor’s Task Force on Community Transportation DHHS has been involved in the statewide transportation planning process, and has begun work toward development of a statewide transportation network and transit brokerage system for Medicaid eligible, non-emergency medical trips. Among a set of broader Medicaid related goals, Granite Care has two transportation service goals:

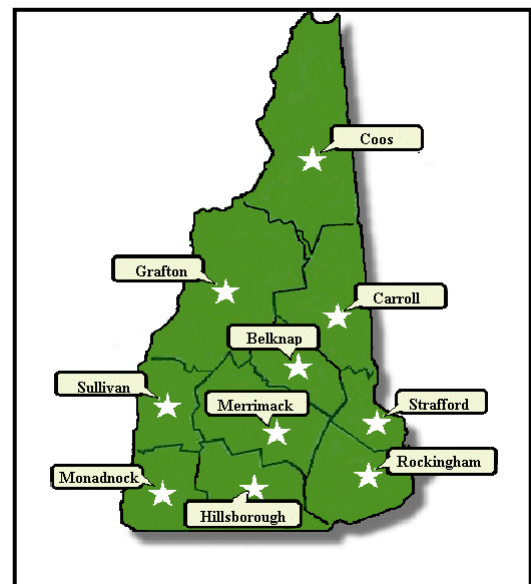
- To increase access to preventative services before underlying ailments require costly acute or long term care.
- To provide services that support individuals living independently in their communities as long as feasible, rather than them being institutionalized.

Another program, “Service Link,” established in 2000 and affiliated with DHHS, is a statewide network of community based connections for elders, adults with disabilities or chronic illness, and their families and caregivers. It consists of thirteen Service Link Resource Centers and many satellite offices around the state which provide one stop information, referrals and assistance about local resources including transit, which are available to these target populations. Service Link’s chief objectives are to reduce duplication and enhance coordination in the delivery of human services.

1.4 Regional Planning Commission Structure and Function

The Region 3 Regional Coordinating Council Area spans the Central New Hampshire Regional Planning Commission and a portion of the Lakes Region Planning Commission administrative boundaries, as well as containing three towns from the Upper Valley Lake Sunapee Regional Planning Commission. Due to the regional boundaries selected by the NH SCC, both the CNHRPC and LRPC are responsible for the development of this Coordinated Transit-Human Services Transportation Plan. Both Regional Planning Commissions are required to develop and maintain a Long Range Transportation Plan that identifies transportation policies for their regions over a twenty-year horizon; a Transportation Improvement Program (TIP), listing prioritized

Figure 2: Statewide ServiceLink Resource Centers



projects to be implemented; and a Unified Planning Work Program, a two year transportation planning work plan and budget for the organization.

This document, the Coordinated Transit and Human Service Transportation Plan, will be incorporated into the Regional Planning Commission's existing and future planning programs upon formal adoption.

The following chapter describes the methodology that was followed in this plan making process.

2.0 Project Methodology

As mentioned in Section 1, the four required elements of a coordinated plan, as outlined by FTA in the May 15, 2007 guidance for the JARC, New Freedom and Section 5310 programs 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 efficiency)
4. Implementation priorities based on funding, feasibility, time etc.

This chapter describes the steps that were undertaken to develop these elements of the Region 3 coordinated transit and human services transportation plan.

2.1 Literature Search/Best Practices

The initial task in this plan making process was to conduct a review of recent local, regional and statewide studies that have examined transportation needs in the region, particularly those concerned with the elderly population, people with disabilities and those with a low income. The purpose of this step was to consider the findings emerging from these plans related to unmet transit needs.

Secondly, a literature search was completed of other coordination activities focused on those covering similar areas to the Region 3 RCC area. A literature search is a useful tool for providing insight into how other regions and agencies address transportation coordination. This information was gathered through the research of published plans and studies related to coordination, and supplemented with telephone interviews to select agencies asking them to describe their experiences.

The results of the literature search are located in Appendix A

2.2 Demographic Profile

A demographic profile of the service area was prepared using census data and other relevant planning documents. During this step, the June 2008 Coordinated Transit and Human Services Plan was an invaluable asset as it contained much of the census data that is still relevant to the area. Through the gathering of demographic information the plan team established a framework for better understanding the local characteristics of the study area, with a focus on the specific populations subject to the goals of the plan; the elderly population, persons with disabilities and the low-income population.

2.3 Document Existing Transportation Services

This step involved documenting the range of public transportation services that exist in the study area. These services include public fixed route and paratransit services, and transportation services provided or sponsored by other social service agencies. Most of the 50+ existing transit providers in the region are relatively small in scale and target specific geographic areas and groups, particularly the elderly and disabled populations. Providers vary in size and reach, and include small organizations with volunteers, public entities, private businesses, larger municipal efforts including Concord Area Transit (CAT) and Winnepesaukee Transit System, and longer distance service like Concord Coach Service.

2.4 Stakeholder Involvement

Stakeholder involvement and public participation was implemented through a multifaceted approach as described below.

Public Outreach

A series of public outreach presentations were conducted to inform the plan update process. Staff members from the Central New Hampshire Regional Planning Commission visited select groups such as the Statewide Independent Living Council and a number of senior communities throughout the region. Two public meetings were held during the plan update process, the first on January 13 in Concord, the second on February 17 in Laconia. The purpose of these meetings was: 1) to directly solicit the views and experiences of transit providers, potential transit providers, interested stakeholders such as municipal officials and advocacy groups, and potential transit users in the region 3 area regarding transportation barriers that they face; and 2) to facilitate discussion regarding potential solutions and establish criteria used for prioritizing these solutions. Efforts were made to engage specific stakeholder groups such as non-English speaking populations. Attendees also included public and private transportation providers.

An advertising campaign was developed for these workshops using printed media, dedicated pages on both planning commission's websites and word of mouth. Public notices were distributed in local and regional newspapers before the meetings. Meeting flyers and project brochures were created and distributed to every town and city in the region. Flyers were also distributed and posted at a number of private businesses, retail stores, grocery stores, and post offices. Over 200 project brochures and several hundred flyers were distributed in preparation for the public outreach meetings.

**Figure 3: Public Meeting No.1
Brochure Distributed**

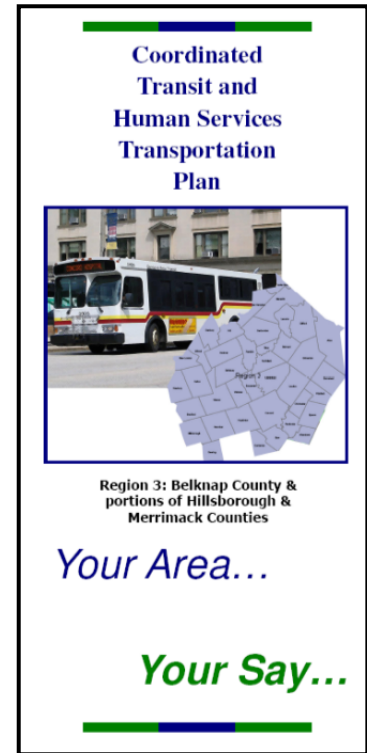


Figure 3: Selection of Images from Public Outreach Efforts Undertaken



Stakeholder Surveys / Interviews

A secondary strategy employed was to discuss human service transportation coordination in-depth with a broad range of stakeholders with a vested interest in coordination, including representatives from human service agencies, transportation providers, advocacy organizations and others. The goals of the stakeholder interviews were established as follows:

- Confirm barriers that may prevent effective coordination
- Focus on potential solutions and strategies that could enhance coordination
- Summarize the findings to key issues of concern, or strategies most feasible to pursue

2.5 Needs Assessment

An important step in completing the plan was to identify transportation service needs or gaps. The needs assessment provides the basis for recognizing where and how service for the population groups of concern needs to be improved.

The primary focus of the outreach meetings described above, was to collect and synthesize information about transportation gaps and barriers faced by seniors, persons with disabilities and low income individuals. The results of the needs assessment are summarized in Chapter 4.

2.6 Identification of Solutions

Coupled with the need to identify transportation gaps is the need to identify corresponding potential solutions to address them. The solutions include a range of possibilities – one solution may address several transportation gaps. Similarly, some gaps are addressed by multiple solutions. These solutions differ from specific projects in that they may or may not be fully defined, e.g., a project sponsor is not identified, or project costs are not estimated.

2.7 Coordination Strategies

In addition to considering which projects or solutions could directly address identified transportation gaps, it is important to consider how best to coordinate services so that existing resources can be used as efficiently as possible. These strategies outline a more comprehensive approach to service delivery with implications beyond the immediate funding of local projects, which may be short-term in nature. The examination of these coordination strategies is intended to result in consideration of policy revisions, infrastructure improvements, and coordinated advocacy and planning efforts which, in the long run, can have more profound results to address service deficiencies.

A range of potential coordination strategies were identified primarily through direct consultation with a number of key stakeholders already involved in the planning and implementation of human service transportation. These stakeholders were asked to identify successful coordination efforts, as well as barriers, or additional steps that are needed to promote coordination.

3.0 Region 3 Demographic Characteristics

3.1 Data Sources and Limitations

Sources of demographic and socio economic characteristics data included in this section have been obtained from a variety of sources including the U.S. Census Bureau, NH Office of Energy and Planning, NH Department of Health and Human Services, NH Department of Safety, and regional planning commissions. Specific sources of data used in the tables and maps are listed in their respective narrative sections below.

There are many sources of potential uncertainty surrounding the data presented in the sections below. These uncertainties can lead to over- or under- estimates of present and future transit needs within the region. Some identified data limitations and sources of uncertainty include:

- The most current U.S. Census data available are ten years old.
 - Non current income and poverty data from 1999, the latest year for which data is available from the U.S. Census Bureau
 - Non current household automobile availability data from the 2000 U.S. Census.
- Future population projections from the NH Office of Energy and Planning are based on 2000 Census data.
- Disability data from the U.S. Census Bureau, which defines disability conditions in a much broader way than the Americans with Disabilities Act (ADA).
- Non current income and poverty data from 1999, the latest year for which data is available from the U.S. Census Bureau.

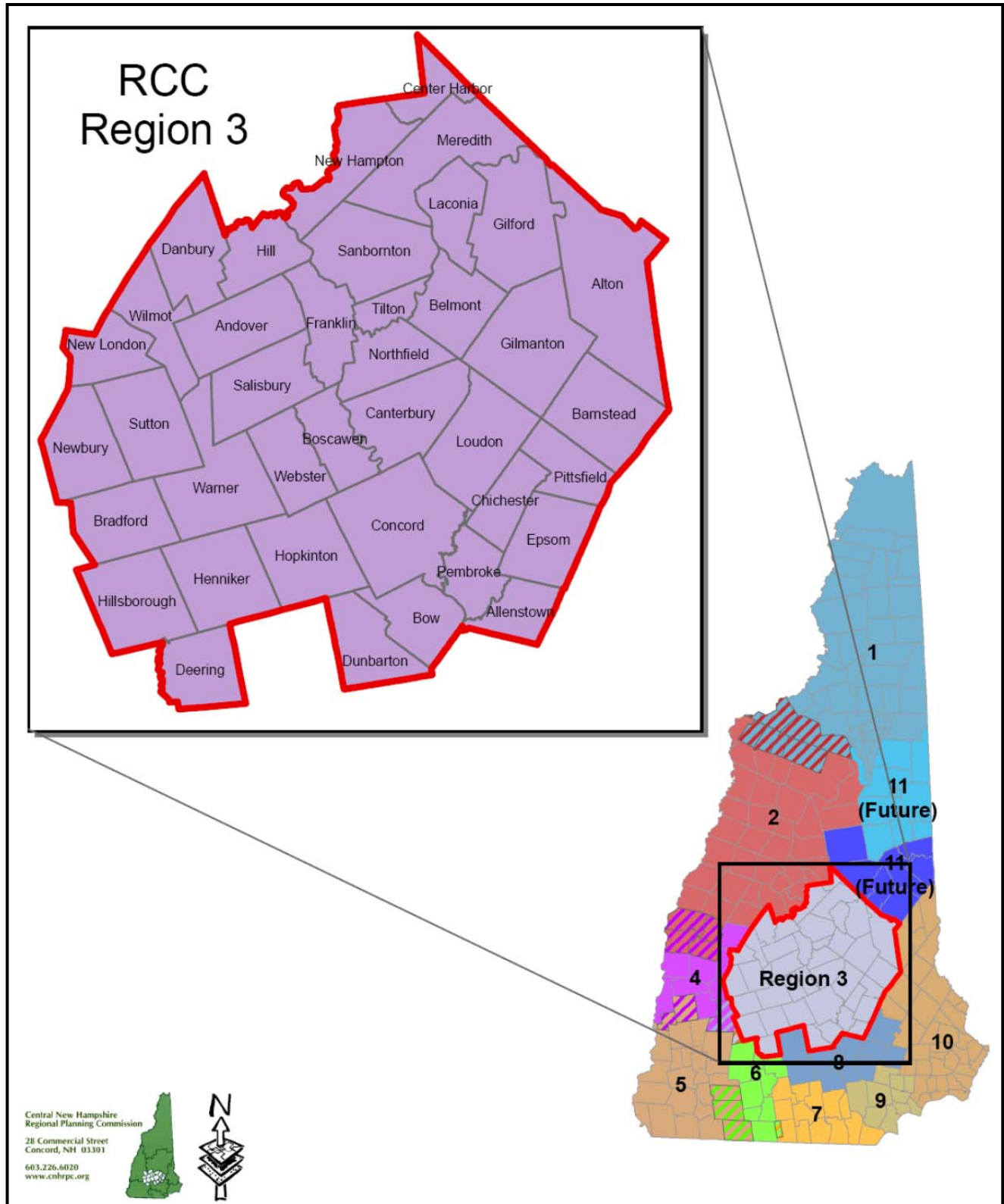
Given these limitations and sources of uncertainty, the data presented below in the tables, maps and narrative sections should only be used as a planning tool to help understand general demographic characteristics of the region; and to identify general levels and geographic concentrations of transit dependent populations.

3.2 Study Area

The municipalities covered by this plan are distributed across Belknap, Hillsborough, and Merrimack Counties and include:

- Belknap County – Alton, Barnstead, Belmont, Center Harbor, Gilford, Gilmanton, Laconia, Meredith, New Hampton, Sanbornton and Tilton
- Hillsborough County – Deering and Hillsborough
- Merrimack County – Andover, Allenstown, Boscawen, Bow, Bradford, Canterbury, Chichester, Concord, Danbury, Dunbarton, Epsom, Franklin, Henniker, Hill, Hopkinton, Loudon, Newbury, New London, Northfield, Pembroke, Pittsfield, Salisbury, Sutton, Warner, Webster and Wilmot.

Map 1: New Hampshire RCC Regions



3.3 Population Demographics

The NH Office of Energy and Planning (OEP) is required by law (RSA 78-A:25) to estimate the population of the State's municipalities on an annual basis. The most current data are from 2008, and represent the best available representation of the Region 3 population. RSA 78-A:25, also stipulates that the definition of a resident must be the same as that of the U.S. Decennial Census to ensure conformity between both data sets. As a result, we are presented with a more current population visual for the Region as opposed to the 2000 U.S. Census counts. The 2008 population figures are **ESTIMATES** and are so labeled.

As illustrated in Map 2, the Region 3 area contains a total of 39 towns and cities with an estimated population of 202,186 inhabitants in 2008. Estimates from the NHOEP indicate that between 2000 and 2008, population grew by 7.8 percent throughout the region, with smaller towns, on average, experiencing higher growth rates than the larger cities and towns. Population figures range from just over 1,000 inhabitants in Hill to over 42,000 in the City of Concord. The region encompasses approximately 1,464 square miles or 15.7 percent of the state's total area of 9,351 square miles. Estimated population density in the region is 138 persons per square mile, slightly lower than the 2008 estimated state population density of 140 persons per square mile. The region includes both outlying rural communities with large geographic areas and low population densities, as well as the more centralized cities of Concord, Franklin and Laconia which consist of smaller geographic areas with higher populations and densities. These three cities are home to 34 percent of the region's total population. The remaining thirty-six communities each have populations of less than 10,000 and together account for 66 percent of the region's population.

3.4 Population Projections

The NHOEP prepares projections or forecasts of future population for the state and its political subdivisions. The projections are used by a wide variety of government agencies and private interests to guide public policy and estimate future target populations. The current population projections available (2010 – 2030) are the third iteration based on the 2000 U.S. Census. Previous OEP projections were published in December 2002 and September 2004. The three sets of projections combine census data with birth and death data from the NH Bureau of Vital Records to develop survival and fertility rates and age-specific migration rates. The births and deaths span the nineties and allow rates to be specific to New Hampshire. The projections can be applied directly and unaltered to guide planning policy documents in the state.

Projections from the NHOEP indicate that between 2000 and 2030, population is expected to grow by an estimated 31.8 percent throughout the region, over 5 percent more than the projected population growth for New Hampshire as a whole. Table 2 shows the community, regional and state population projections for 2030.

Table 2 also illustrates that the smaller, more rural towns of Barnstead, Bow, Gilmanton, Newbury, Salisbury, Sutton and Webster may expect population increases of more than 45 percent by 2030. It is expected that Alton will experience a 58 percent increase in its population during that time. In

comparison, the three largest municipalities in the region – Concord, Franklin and Laconia – can expect population increases ranging from 6.8 to 25.4 percent over the next two decades.

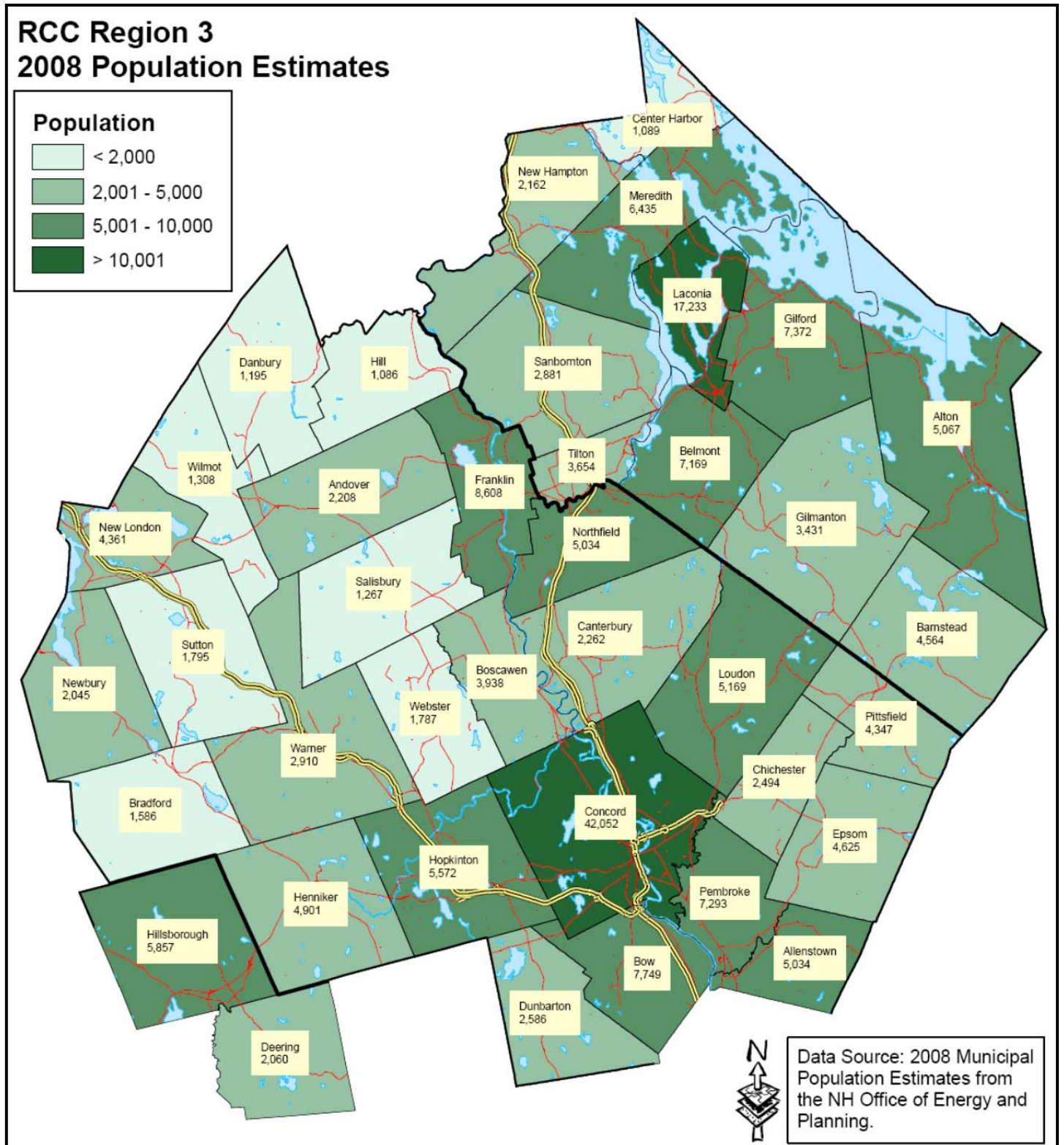
New Hampshire's population is also growing older over time, reflecting both the aging of the population and immigration of retired individuals from other states. By 2030, the population aged 65 and older is expected to more than double in NH. Within the Region 3 area, elder populations are expected to increase dramatically (200) percent in both Belknap and Merrimack Counties.

Meanwhile, projected growth in the youth populations aged between 0 – 19 is expected to decrease by 0.1 percent during the same time period.

Table 2: Region 3 Population Profile

Municipality	2000 Total Population	2008 Total Population (EST)	% Increase 2000 - 2008	2030 Projected Population	% Increase Projected 2000 - 2030
Allenstown	4,843	5,034	3.9%	6,070	25.3%
Alton	4,502	5,067	12.5%	7,120	58.0%
Andover	2,109	2,208	4.7%	2,730	29.4%
Barnstead	3,886	4,564	17.4%	5,650	45.4%
Belmont	6,716	7,169	6.7%	9,460	40.8%
Boscawen	3,672	3,938	7.2%	5,060	38.0%
Bow	7,138	7,749	8.6%	11,030	54.5%
Bradford	1,454	1,586	9.1%	2,070	42.3%
Canterbury	1,979	2,262	14.3%	2,730	38.0%
Chichester	2,236	2,494	11.5%	3,080	37.8%
Concord	40,687	42,052	3.6%	51,020	25.4%
Center Harbor	1,017	1,089	7.1%	1,380	35.6%
Danbury	1,071	1,195	11.6%	1,470	37.2%
Deering	1,875	2,060	9.9%	2,470	31.7%
Dunbarton	2,226	2,586	16.2%	3,140	41.0%
Epsom	4,021	4,625	15.0%	5,510	37.0%
Franklin	8,405	8,608	2.4%	9,200	9.5%
Gilford	6,803	7,372	8.4%	9,560	40.5%
Gilmanton	3,060	3,431	12.1%	4,480	46.4%
Henniker	4,433	4,901	10.6%	6,060	36.7%
Hill	992	1,086	9.5%	1,330	34.0%
Hillsborough	4,931	5,857	18.8%	6,780	37.5%
Hopkinton	5,399	5,572	3.2%	6,970	29.1%
Laconia	16,411	17,233	5.0%	17,520	6.8%
Loudon	4,481	5,169	15.3%	6,170	37.7%
Meredith	5,943	6,435	8.3%	8,340	40.3%
Newbury	1,705	2,045	19.9%	2,510	47.2%
New Hampton	1,929	2,162	12.1%	2,770	43.4%
New London	4,116	4,361	5.9%	5,460	32.6%
Northfield	4,548	5,034	10.7%	6,050	33.0%
Pembroke	6,897	7,293	5.7%	9,070	31.5%
Pittsfield	3,931	4,347	10.6%	5,340	35.8%
Salisbury	1,137	1,267	11.4%	1,650	45.1%
Sanbornton	2,581	2,881	11.6%	3,680	42.6%
Sutton	1,541	1,795	16.5%	2,250	46.0%
Tilton	3,477	3,654	5.1%	4,360	25.4%
Warner	2,760	2,910	5.4%	3,870	40.2%
Webster	1,579	1,787	13.2%	2,320	47.0%
Wilmot	1,144	1,308	14.3%	1,590	38.9%
Study Area	187,635	202,186	7.8%	247,320	31.8%
New Hampshire	1,235,786	1,315,000	6.4%	1,565,040	26.6%

Map 2: 2008 Regional Population Estimates



3.5 Coordinated Plan Target Populations – Socio-Economic Indicators

This Coordinated Plan is primarily concerned with the transportation needs and transportation service options for specific transit-dependent populations. Target populations of interest include the elderly, disabled, low-income populations and those without vehicles. These target populations are less likely to have their own means of transportation, and are more likely to be dependent upon public or private transit service. The following sections are supported by 2000 U.S. Census figures and any reference to demographic data is sourced from these data sets.

3.6 Elderly

The elderly population aged 65 and older generally has a higher dependence on transit, as the ability to drive tends to diminish with age. Table 3 details the percentage of persons aged 65 and older who reside in the region by municipality. Based on 2000 census data, 24,986 persons 65 and older reside in the region. This amounts to 13.3 percent of the total population, slightly higher than the statewide elderly population percentage on 12.0 percent. Map 3 illustrates the geographic distribution of the region's elderly population.

Predictably, the three largest municipalities in the region – Concord, Franklin and Laconia – have nearly 40 percent (9,600 individuals) of the total elderly population. The Town of New London has the highest percentage (29.8) of elderly relative to its total population. The towns of Alton, Boscawen, Center Harbor, Gilford, Meredith, Newbury, Sutton and Tilton all have 15 percent or greater of their total population aged 65 or older. Henniker has the lowest percentage (7.9) of elderly, perhaps due to the community being home to New England College and thus having a larger than average percentage of individuals younger than 21 years old.

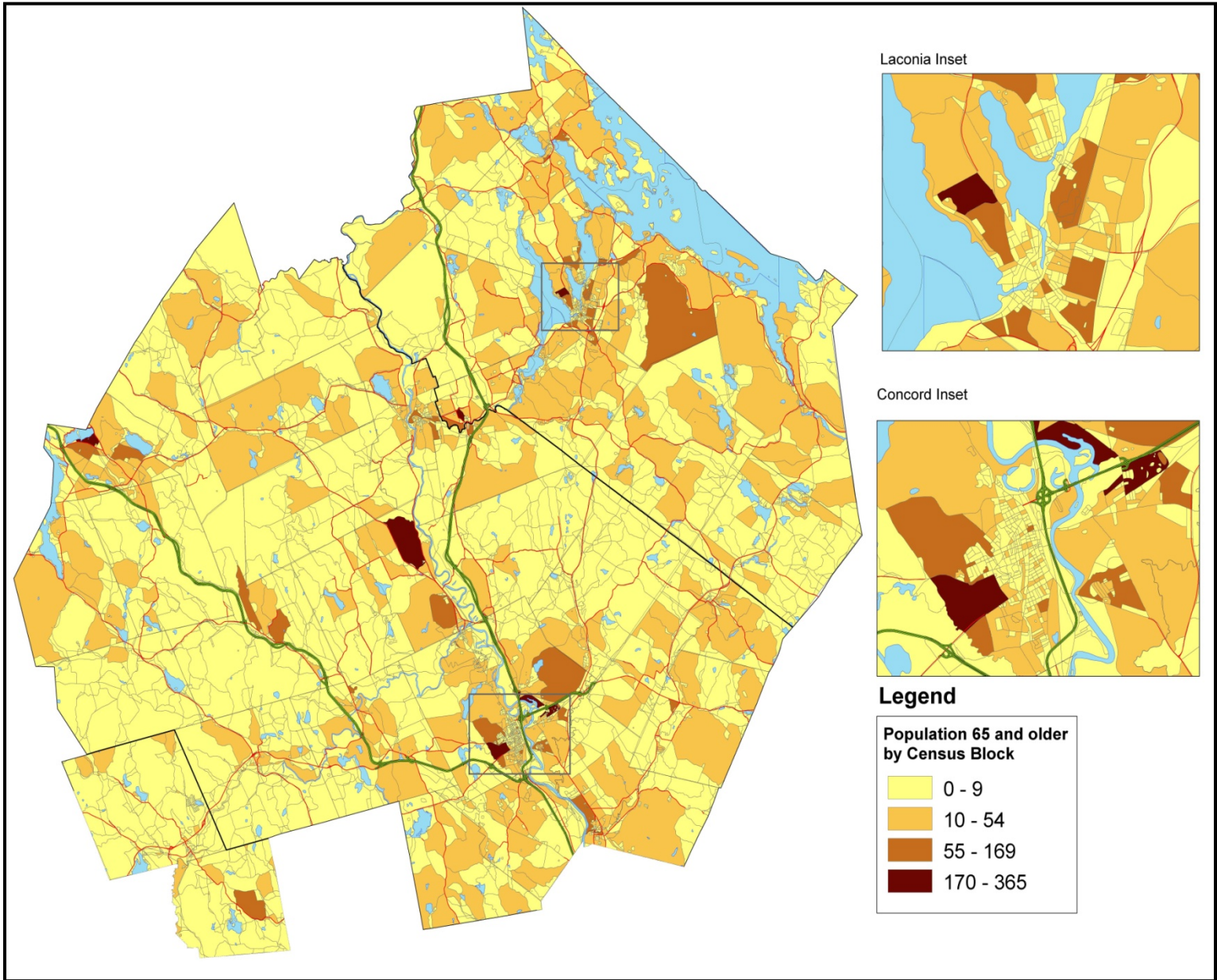
The high elderly population growth anticipated over time indicates increasing need for transit and human services in the region. The American Association of Retired Persons estimates that approximately 20 percent of Americans aged 65 and over do not drive. These figures are likely to increase as the general population ages over time.

The availability of adequate transportation enables older persons to live independently in their communities, helps to prevent isolation and the possible need for long-term care placement. Without an adequate transportation system many older people, who do not drive, must rely on family and friends to provide transportation. Clearly, improving the relationship between transit and human services in the region will benefit the elderly population to a significant degree. The alternative to easy access transport is isolation, loss of self-esteem and potentially an increase in the cost of care.

Table 3: Elderly Population Profile – 2000

Municipality	2000 Total Population	Elderly Population (age 65+)	Elderly Population Percentage
Allenstown	4,843	513	10.6%
Alton	4,502	695	15.4%
Andover	2,109	267	12.7%
Barnstead	3,886	423	10.9%
Belmont	6,716	764	11.4%
Boscawen	3,672	681	18.5%
Bow	7,138	603	8.4%
Bradford	1,454	184	12.7%
Canterbury	1,979	205	10.4%
Chichester	2,236	223	10.0%
Concord	40,687	5564	13.7%
Center Harbor	1,017	173	17.4%
Danbury	1,071	137	12.8%
Deering	1,875	201	10.7%
Dunbarton	2,226	158	7.1%
Epsom	4,021	564	14.0%
Franklin	8,405	1233	14.7%
Gilford	6,803	1145	16.8%
Gilmanton	3,060	359	11.7%
Henniker	4,433	352	7.9%
Hill	992	101	10.2%
Hillsborough	4,931	628	12.7%
Hopkinton	5,399	720	13.3%
Laconia	16,411	2828	17.2%
Loudon	4,481	375	8.4%
Meredith	5,943	999	16.8%
Newbury	1,705	276	16.2%
New Hampton	1,929	241	12.4%
New London	4,116	1228	29.8%
Northfield	4,548	197	8.7%
Pembroke	6,897	680	9.9%
Pittsfield	3,931	408	10.4%
Salisbury	1,137	114	10.0%
Sanbornton	2,581	282	10.9%
Sutton	1,541	244	15.8%
Tilton	3,477	587	16.9%
Warner	2,760	338	12.2%
Webster	1,579	146	9.2%
Wilmot	1,144	150	13.1%
Study Area	187,635	24, 986	13.3%
New Hampshire	1,235,786	147, 970	12.0%

Map 3: Elderly Population by Census Block



3.7 Disabled

The term disability often conjures up images of the most obvious types of impairments: mobility impairments that necessitate the use of a wheelchair, visual impairments that lead to the use of a cane, and so forth. But disabilities may be physical or cognitive, may be readily observed or “hidden” (such as epilepsy, arthritis, and diabetes), and may result from a variety of causes.

Disabled individuals typically rely on a higher number of transit trips, as many disabilities deny this population the ability to operate a vehicle. Many disabled individuals require vehicles with specialized equipment such as wheelchair lifts. Some may also require door-to-door service with specialized assistance in getting on and off vehicles.

The U.S. Census Bureau collects data on disability for non-institutionalized individuals aged 5 and older. However, it should be noted that disability data is self reported by the surveyed households and does not necessarily align with eligibility requirements for state or federal human services under Americans with Disabilities (ADA) programs. Similarly, there is no clear definition within census data as to which categories of disability result in transit dependence. The Census Bureau defines disability as one or more of the following:

- a) Blindness, deafness, or a severe vision or hearing impairment;
- b) A substantial limitation in the ability to perform basic physical activities, such as walking, climbing stairs, reaching, lifting or carrying;
- c) Difficulty learning, remembering or concentrating; or
- d) Difficulty dressing, bathing, or getting around inside the home.

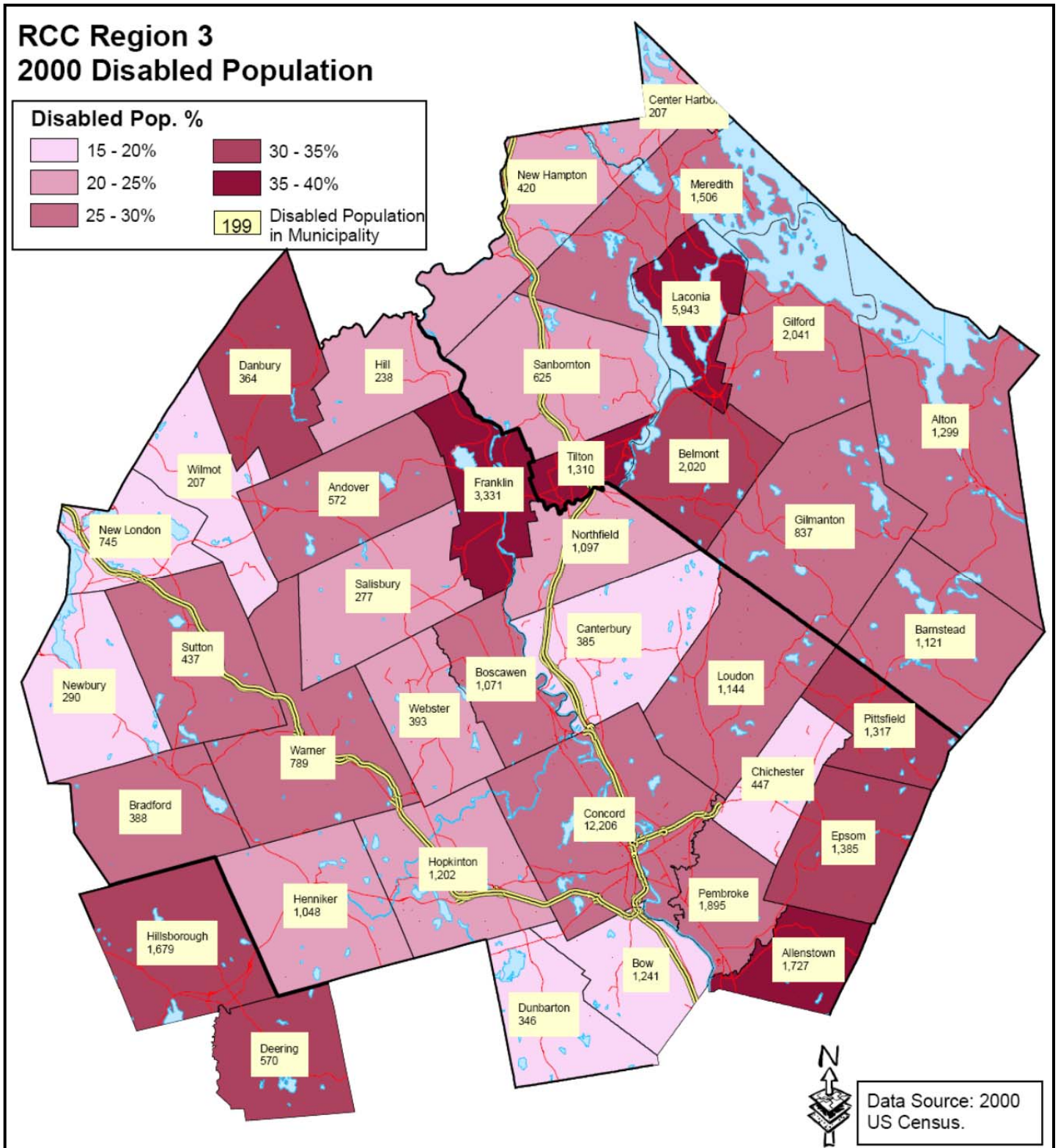
In addition, people 16 years old and over are considered to have a disability if they have difficulty going outside the home alone to shop or visit a doctor’s office, and people 16-64 years old are considered to have a disability if they have difficulty working at a job or business.

Table 4 provides information on the region’s disabled individuals by municipality. Approximately 28.8 percent or 54,120 of the region’s total population over age five are reported to have some form of disability. This figure is almost double the state disabled percentage of 15.7. The three largest municipalities – Concord, Franklin and Laconia – have almost 40 percent of the region’s disabled population, or 21,480 individuals. The communities of Allenstown, Belmont, Danbury, Franklin, Hillsborough, Laconia, Pittsfield, and Tilton each have over 30 percent disability rates within their total populations, which is a matter of serious concern when considering the future needs of transit and human services in the region. Conversely, the town of Dunbarton has the lowest disabled percentage of all the region’s municipalities with 15.5 percent.

Table 4: Disabled Population Profile - 2000

Municipality	2000 Total Population	Disabled Population	Disabled Population Percentage
Allenstown	4,843	1,727	35.6%
Alton	4,502	1,299	28.8%
Andover	2,109	572	27.1%
Barnstead	3,886	1,121	28.8%
Belmont	6,716	2,020	30.1%
Boscawen	3,672	1,071	29.2%
Bow	7,138	1,241	17.4%
Bradford	1,454	388	26.7%
Canterbury	1,979	385	19.5%
Chichester	2,236	447	19.9%
Concord	40,687	12,206	29.9%
Center Harbor	1,017	207	20.3%
Danbury	1,071	364	33.9%
Deering	1,875	570	30.4%
Dunbarton	2,226	346	15.5%
Epsom	4,021	1,385	34.4%
Franklin	8,405	3,331	39.6%
Gilford	6,803	2,041	30.0%
Gilmanton	3,060	837	27.3%
Henniker	4,433	1,048	23.6%
Hill	992	238	23.9%
Hillsborough	4,931	1,679	34.0%
Hopkinton	5,399	1,202	22.3%
Laconia	16,411	5,943	36.2%
Loudon	4,481	1,144	25.5%
Meredith	5,943	1,506	25.3%
Newbury	1,705	290	17.0%
New Hampton	1,929	420	21.7%
New London	4,116	745	18.1%
Northfield	4,548	1,097	24.1%
Pembroke	6,897	1,895	27.4%
Pittsfield	3,931	1,317	33.5%
Salisbury	1,137	277	24.3%
Sanbornton	2,581	625	24.2%
Sutton	1,541	437	28.4%
Tilton	3,477	1,310	37.7%
Warner	2,760	789	28.6%
Webster	1,579	393	24.9%
Wilmot	1,144	207	18.1%
Study Area	187,635	54, 120	28.8%
New Hampshire	1,235,786	193,893	15.7%

Map 4: Disabled Population



3.8 Income and Poverty

Another strong indicator of transit dependency is income. Lower income households are less able to purchase, insure and maintain a vehicle, along with other spending restrictions that they may have. In the Region 3 area, especially in the smaller outlying towns without fixed transit services, not having a vehicle is likely to mean that individuals cannot adequately access jobs, health care, shopping venues, and other vital community services.

The tables and maps on the next three pages present data on income, and poverty status for the year 1999. The overall median household income in the region was \$48,658, slightly lower than the state median income of \$49,467. Seventeen of the 39 communities have median household incomes higher than the state median. Towns with the highest household incomes include Bow, Canterbury, Dunbarton, Hopkinton, New London and Salisbury. Communities with the lowest household incomes include Allenstown, Danbury, Laconia, Pittsfield and Tilton.

The overall median per-capita income for the region was \$24,263. However there is a wide range across the region. Per-capita income ranges from a low of \$17,155 in Franklin to a high of \$37,556 in New London. This statistic highlights the vast discrepancies between municipalities in the region.

In such a diverse region, with varying levels of income from town to town, a more specific measure of transit need is reflected in the population with incomes that fall below the federal poverty level. The U.S. Census Bureau measures poverty using a complex set of thresholds that vary by family size, number of children and age of the householder. That data collected by the Census Bureau excludes some sub-populations such as those living in college dormitories, institutionalized individuals, those living in military quarters, and unrelated individuals under fifteen years of age. Therefore the poverty data presented in Table 6 is based on approximately 97 percent rather than 100 percent, of the total regional population. 1999 is the most recent year for which census based income and poverty data are available. It should therefore be noted that these data may not accurately reflect current income and poverty status within the region.

Given these limitations, the region had an overall poverty rate of 6 percent or 11,181 individuals. This rate is slightly lower than the overall state rate of 6.4 percent. The three largest municipalities have almost 49 percent of the region's poverty level population, or almost 5,500 individuals. The remaining thirty-six smaller towns are home to the remaining 51 percent of the region's population below the poverty level, amounting to 5,761 individuals. Map 6 present the geographic distribution of poverty level populations across the region.

Franklin and Danbury had the highest percentage of population living below the poverty level, at 12.6 and 11 percent respectively. This is a much higher percentage than any other community in the region. The towns of Bow, Hopkinton and Salisbury had the lowest poverty rates in the region, all at under 2 percent.

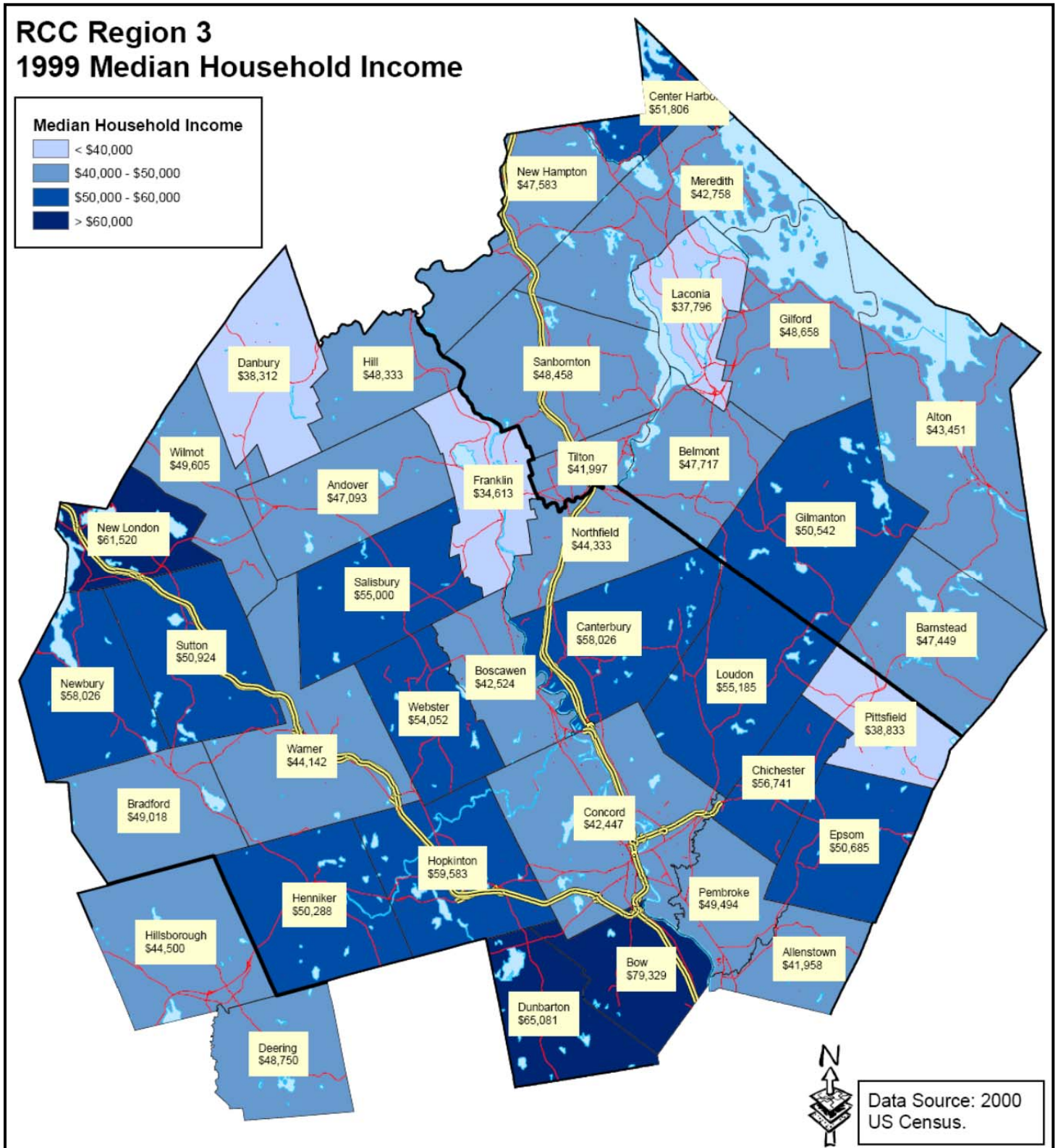
Table 5: Regional Income (1999)

Municipality	Median Household Income (\$)	Per Capita Income
Allenstown	41,958	18,851
Alton	43,451	25,940
Andover	47,093	21,627
Barnstead	47,449	19,773
Belmont	47,717	19,986
Boscawen	42,524	18,732
Bow	79,329	29,557
Bradford	49,018	22,240
Canterbury	58,026	27,374
Chichester	56,741	24,115
Concord	42,447	21,976
Center Harbor	51,806	25,627
Danbury	38,312	18,339
Deering	48,750	20,856
Dunbarton	65,081	27,892
Epsom	50,685	22,026
Franklin	34,613	17,155
Gilford	48,658	32,667
Gilmanton	50,542	23,163
Henniker	50,288	24,530
Hill	48,333	21,004
Hillsborough	44,500	20,122
Hopkinton	59,583	30,753
Laconia	37,796	19,540
Loudon	55,185	24,673
Meredith	42,758	24,867
Newbury	58,026	29,521
New Hampton	47,583	20,336
New London	61,520	37,556
Northfield	44,333	18,466
Pembroke	49,494	20,800
Pittsfield	38,833	21,082
Salisbury	55,000	23,112
Sanbornton	48,458	22,879
Sutton	50,924	24,432
Tilton	41,997	19,578
Warner	44,142	21,587
Webster	54,052	20,852
Wilmot	49,605	25,629
Study Area	48,658	24,263
New Hampshire	49,467	23,844

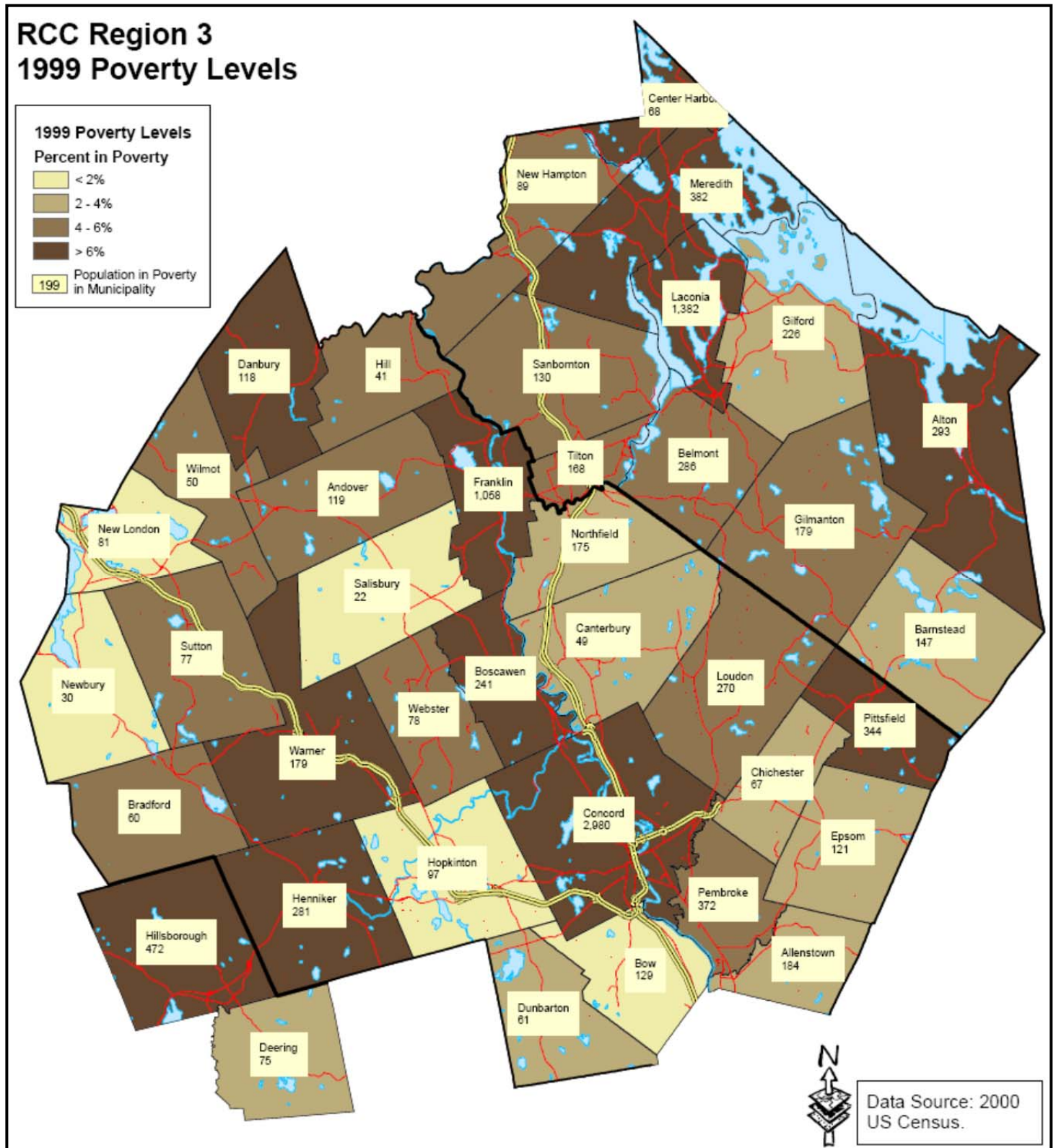
Table 6: Regional Poverty Levels (1999)

Municipality	Population Below Federal Poverty Level (#)	Poverty Rate (%)
Allenstown	184	3.8
Alton	293	6.5
Andover	119	5.6
Barnstead	147	3.7
Belmont	286	4.3
Boscawen	241	6.5
Bow	129	1.8
Bradford	60	4.1
Canterbury	49	2.5
Chichester	67	3.0
Concord	2980	7.3
Center Harbor	68	6.7
Danbury	118	11.0
Deering	75	4.0
Dunbarton	61	2.7
Epsom	121	3.0
Franklin	1058	12.6
Gilford	226	3.3
Gilmanton	179	5.8
Henniker	281	6.3
Hill	41	4.1
Hillsborough	472	9.5
Hopkinton	97	1.8
Laconia	1382	8.4
Loudon	270	6.0
Meredith	382	6.4
Newbury	30	1.8
New Hampton	89	4.6
New London	81	1.9
Northfield	175	3.8
Pembroke	372	5.4
Pittsfield	344	8.7
Salisbury	22	1.9
Sanbornton	130	5.0
Sutton	77	5.0
Tilton	168	4.8
Warner	179	6.5
Webster	78	4.9
Wilmot	50	4.4
Study Area	11,181	6.0%
New Hampshire	78,530	6.4%

Map 5: Median Household Income



Map 6: Municipal Poverty Levels



3.9 Auto Availability

The greatest indicator of transit need for the general public is typically the level of auto ownership, since individuals without the use of a vehicle have to make transit trips to access basic day to day services. Again, especially in the smaller outlying towns without fixed transit services, not having a vehicle is likely to ensure that individuals cannot effectively access jobs, education, health care, shopping venues and other vital community services.

As illustrated in Table 7 and on Map 7, the region had 4,314 households or 5.9 percent of all households without an available vehicle in 1999. This was slightly higher than the statewide figure of 5.8 percent. The cities of Concord, Franklin and Laconia have amongst the highest percentages of households without a vehicle at 9.5, 12.2 and 10.0 percent respectively. This accounts for 60 percent of the total regional amount, or 2,619 households. This figure is clearly representative of the more urbanized land patterns to be found in the region's largest cities. The town of Pittsfield has 10.5 percent of its population without access to a vehicle, while Allenstown, Meredith, Northfield and Tilton also come in at the higher end of the scale.

In contrast, towns such as Dunbarton, Salisbury, Hopkinton and Canterbury all have auto availability rates of over 97 percent. This statistic again points to the need to focus transit and human service improvements on the towns displaying the highest percentage of elderly, low income and disabled residents.

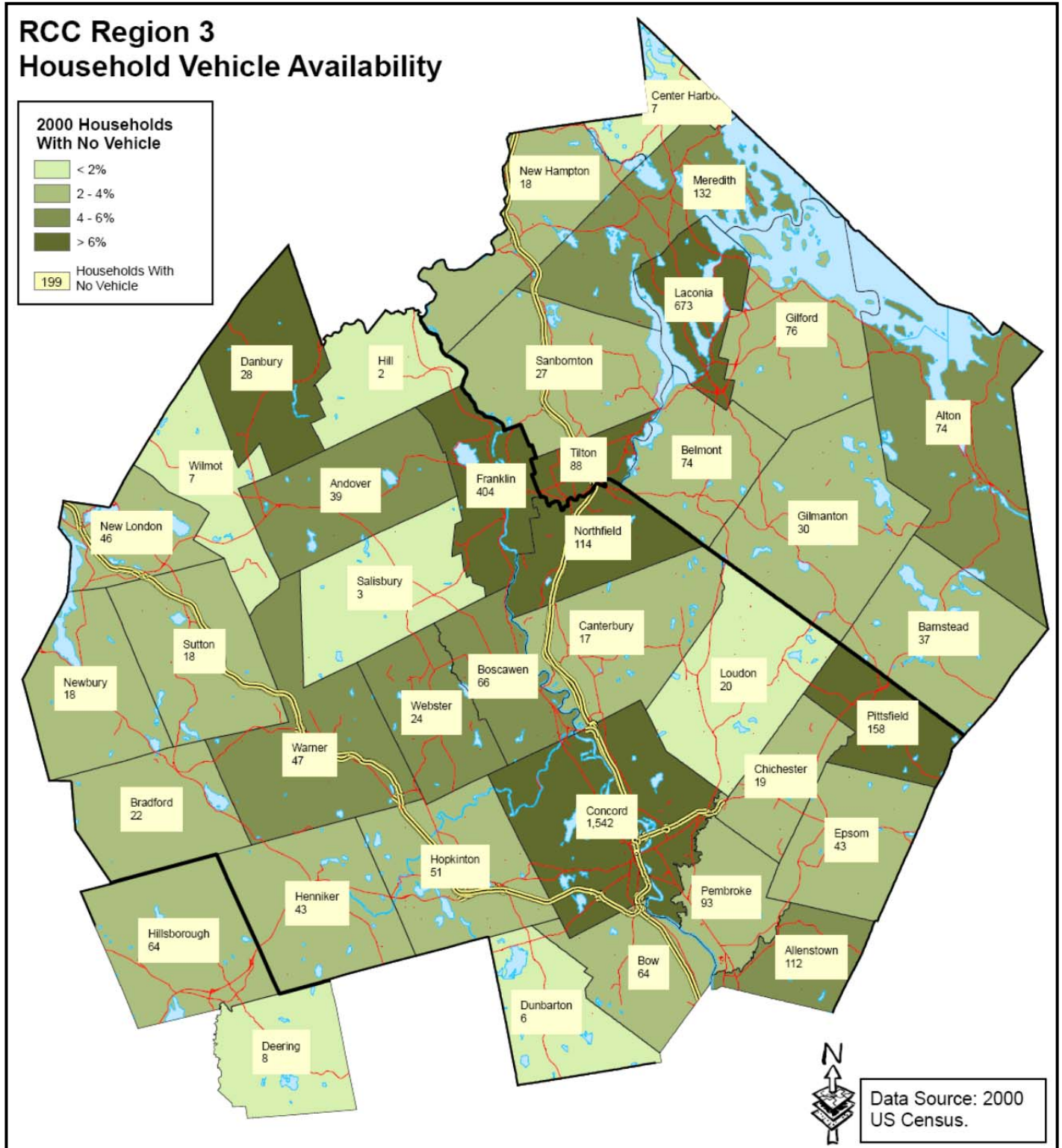
3.10 Other Transit Dependent Populations

While not specifically evaluated in this plan, other transit dependent populations may exist. These populations include individuals who have been temporarily disabled due to injury or illness; those who have lost their driving privileges; or those households with fewer vehicles who may need one at any given time. In addition, the youth population is less likely to have access to a vehicle for transportation to after school jobs, educational and extra-curricular activities and recreational purposes. These populations are likely to be at least occasionally dependent upon public transit systems or other means of getting from place to place.

Table 7: Households with no Vehicle Available

Municipality	Total Number of Occupied Households (2000)	Number of Households with no Vehicle Available (2000)	% of Households with no Vehicle Available (2000)
Allenstown	1902	112	5.9
Alton	1825	74	4.1
Andover	823	39	4.7
Barnstead	1422	37	2.6
Belmont	2641	74	2.8
Boscawen	1260	66	5.2
Bow	2304	64	2.8
Bradford	559	22	3.9
Canterbury	749	17	2.3
Chichester	823	19	2.3
Concord	16281	1542	9.5
Center Harbor	417	7	1.7
Danbury	435	28	6.4
Deering	713	8	1.1
Dunbarton	814	6	0.7
Epsom	1491	43	2.3
Franklin	3319	404	12.2
Gilford	2766	76	2.8
Gilmanton	1165	30	2.6
Henniker	1585	43	2.7
Hill	382	2	0.5
Hillsborough	1921	64	3.3
Hopkinton	2084	51	2.5
Laconia	6724	673	10.0
Loudon	1611	20	1.2
Meredith	2447	132	5.4
Newbury	694	18	2.6
New Hampton	723	18	2.5
New London	1574	46	2.9
Northfield	1706	114	6.7
Pembroke	2661	93	3.5
Pittsfield	1498	158	10.5
Salisbury	435	3	0.7
Sanbornton	969	27	2.8
Sutton	618	18	2.9
Tilton	1360	88	6.5
Warner	1048	47	4.5
Webster	581	24	4.1
Wilmot	459	7	1.5
Study Area	72,789	4,314	5.9%
New Hampshire	474,606	27,360	5.8%

Map 7: Households with no Vehicle Available



4.0 Commuting Data

A major part of the transportation picture in the region involves commuting to work. Commuting data are also useful in identifying heavily travelled routes in the region which could ultimately benefit from increased transportation options. Data discussed in the following section are from the 2000 US Census.

Table 8: Commuting Data

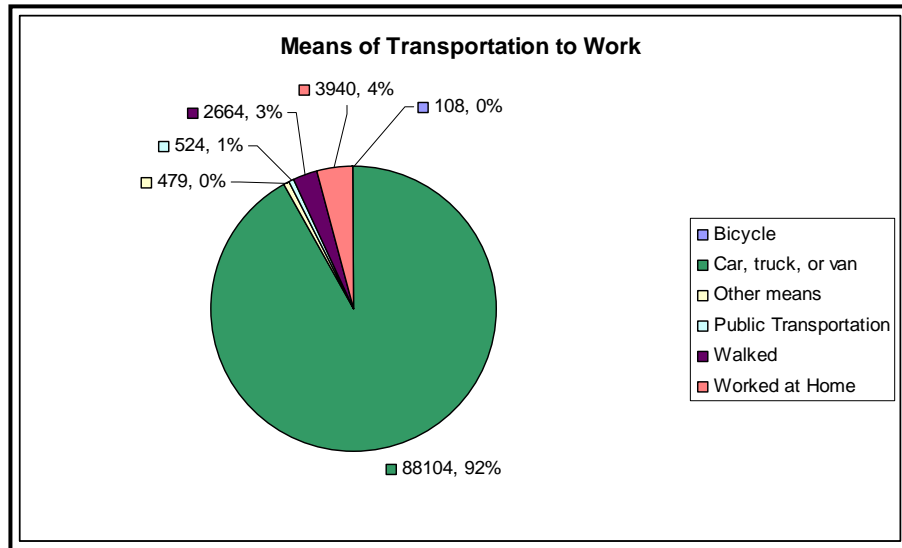
Commuting Data			
Merrimack County (Excluding Hookset) & the Towns of Deering and Hillsborough		Belknap County	
	2000		2000
Residents working	69,676	Residents working	28,253
Residents working in Merrimack County	48,051	Residents working in Belknap County	19,044
Residents commuting out of Merrimack County	21,625	Residents commuting out of Belknap County	9,209
Nonresidents commuting into Merrimack County	22,296	Nonresidents commuting into Belknap County	7,023

Just over 88,000 or 92 percent of the residents in the study area identified the private automobile as their preferred mode of transportation to and from their places of employment. This clearly highlights that the private automobile is the most prominent form of transportation in the region, which is a theme that is prevalent throughout the state. The remaining 8 percent of the residents are distributed between citizens that work at home (4%), walked (3%), those who use public transit (0.8%) and those who cycle (0.2%). When reviewing these data it is clear that, public transportation is not heavily utilized by those commuting to and from work in the region. Individuals with the means to purchase and operate their own vehicle see this as a far more viable option than public transportation. Therefore, the sections of the population who typically rely on public transit services in the region are those identified in this plan.

Just over 32 percent or 30,834 residents of the region worked outside their county boundaries in 2000. 27,374 individuals worked in counties other than Belknap and Merrimack while 3,460 residents worked out of state, the majority of these in Massachusetts. The private automobile allows residents to explore job opportunities in other regions, creating an increase in long distance commuting. Effective public transportation offers similar benefits to those without access to a private automobile however, the existing system in place in the region does not always offer a viable

alternative to private automobile use. A summary of the means of transportation are shown in the figure 4.

Figure 4: Means of Transportation to Work (1999)



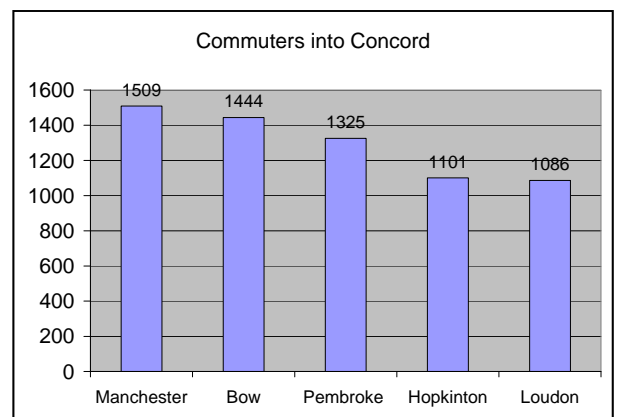
The municipalities of Concord, Franklin, and Laconia are the three most populous communities in the region and are the major employment centers in the study area. Therefore, these three communities are the focus of this analysis. Commuting patterns into these three locations is first analyzed, representing the commuting “in” data. Second, an analysis of where residents of Concord, Franklin, and Laconia were commuting to was conducted, representing the commuting “out” analysis.

4.1 Commuting In Data

Concord:

In 2000, there were a total of 35,498 commuters to Concord, of which 28,044 originate in the study area. This is the largest destination for commuters in the region, making up 15% of all journeys to work that originate in the study area. Approximately 12,722 people both live and work in Concord, the remaining 22,776 commute from elsewhere. The city of Manchester 18 miles south of Concord had the highest number of commuters to Concord with 1,509. The neighboring towns of Bow (1444), Pembroke (1325), Hopkinton (1101), and Loudon (1086) also saw large numbers of commuters to Concord.

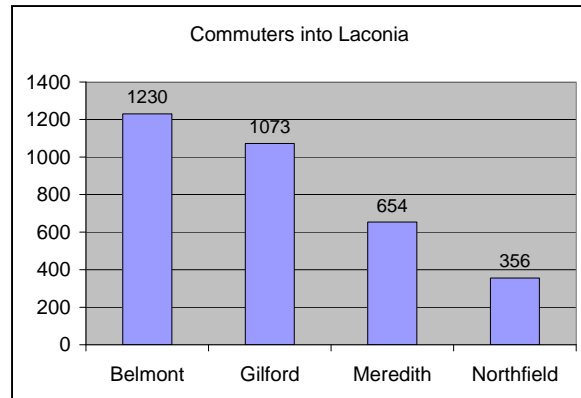
Figure 4: Commuters into Concord



Laconia:

There were a total of 10,744 commuters to Laconia, of which 9,371 originate in the study area. Belmont (1,230), Gilford (1,073), Meredith (654), Gilmanton (358) and Northfield (283) are the towns which provide the largest number of commuters into Laconia which is representative of the close geographical locations of these communities. Approximately 4,074 people both live and work in Laconia, the remaining 6,670 commute from elsewhere.

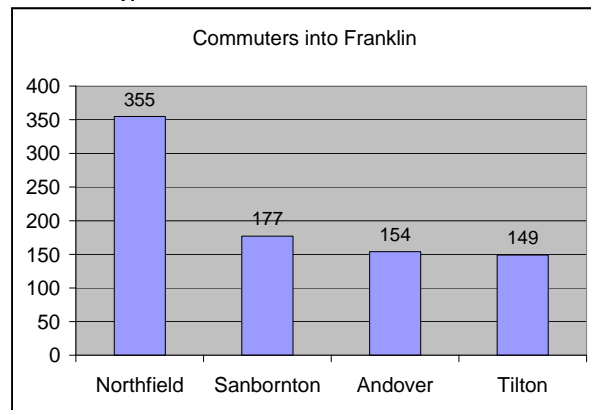
Figure 5: Commuters into Laconia



Franklin:

Franklin has significantly fewer commuters than Concord and Laconia. Approximately 3,579 commuters identified Franklin as their destination point. Of these 3,124 originated in the study area. 1,339 people were recorded as living and working in Franklin, the remaining 2,240 commute from elsewhere. Commutes to Franklin primarily originate in the towns of Northfield (355), Sanbornton (177), Andover (154), and Tilton (149).

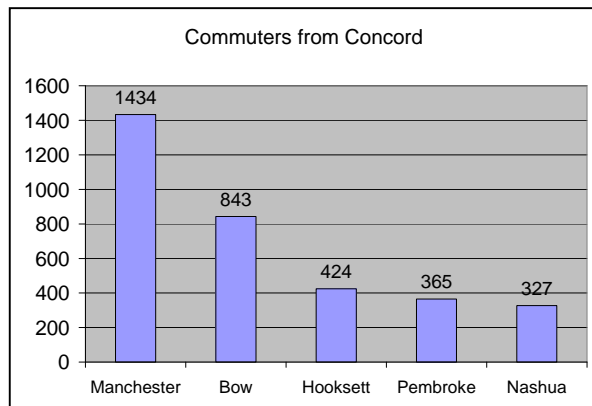
Figure 6: Commuters into Franklin



4.2 Commuting Out Data

Concord:

Figure 7: Commuters from Concord

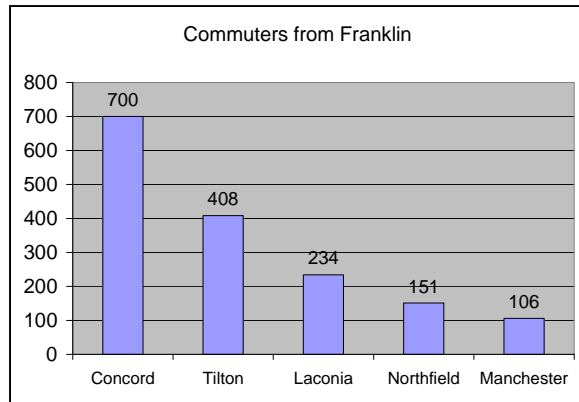


A total of 6,744 individuals reported commuting from Concord to their place of employment in the 2000 Census. The most common destination for Concord residents is Manchester with 1,434 commuters. Residents also commute to the towns of Bow (843 commuters), Hooksett (424 commuters) and Pembroke (365.) With the exception of Hooksett, all of these cities are adjacent to Concord. Also of note is that 327 commuters travel to the city of Nashua despite the distance of 35 miles.

Franklin:

2,516 outward commuters were recorded in Franklin. The most common destinations Franklin residents travelled to for employment were Concord (700), Tilton (408), Laconia (234), and Northfield (151).

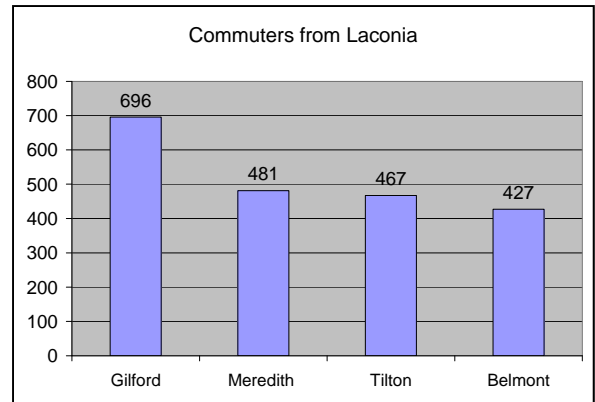
Figure 8: Commuters from Franklin



Laconia:

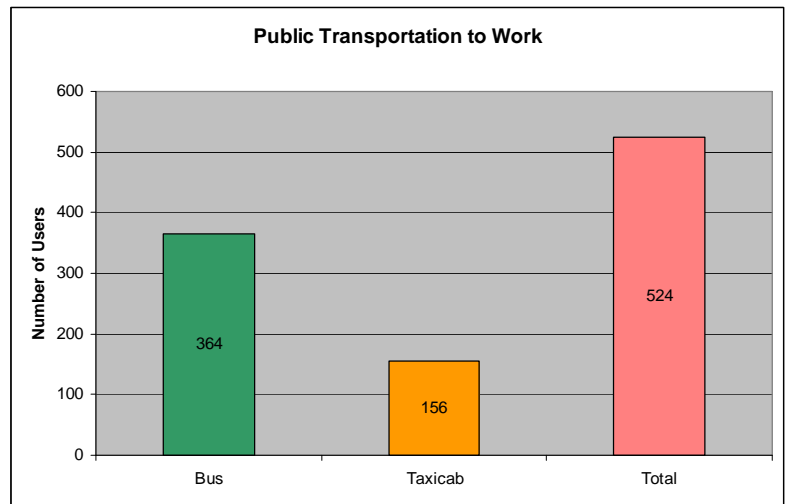
3,529 outward commuters were recorded in Laconia. The top destinations were recorded as Gilford (696), Meredith (481), Tilton (467), and Belmont (427).

Figure 9: Commuters from Laconia



The use of public transportation to go to work in the study region is very minimal according to the US census information. A total of 524 individuals use public transportation to go to work in the study region. Out of the 524 individuals, seventy percent of them (364 individuals) use the local bus system and the remaining thirty percent (156 individuals) use taxi to get to work.

Figure 10: Use of Public Transportation to Work



5.0 Existing Transit Services in the Region

Public transportation services in the region consist of local and regional public transportation services, inter-city bus, and a variety of specialized transportation options, which are available to sub-segments of the community. The largest providers and services are listed here; details on individual services are provided in Appendix 4.

5.1 Concord Area Transit

Concord Area Transit (CAT), managed by Community Action Program Belknap – Merrimack Counties, Inc. operates a combination of fixed-route and demand-responsive services locally within the city of Concord. Demand response service also extends to local communities outside of the Concord city limits. Among these services, CAT operates four fixed routes on weekdays that are scheduled according to a loose hub and spoke model, wherein all four routes intersect at the State House/Eagle Square stop in the middle of downtown. This is the only permitted transfer area between buses (other than the inter-city bus terminal on Stickney Avenue). The regular adult fare for services is \$1.25 for the fixed route lines and \$1.00 to ride on the trolley all day. Discounts are available for bulk purchases (monthly passes and multiple ticket books) and for older adults aged 60 years or more and students. Children under the age of 5 ride for free. The four routes are:



Penacook route: This route connects Concord with Penacook to the north. It runs from Concord Hospital toward the State House/Eagle Square hub, then turns north through downtown and finally terminates at Briar Pipe in Penacook.

Heights route: This route serves eastern neighborhoods of Concord, running from Wal-Mart and Steeplegate Mall in the east to downtown, looping at the Kennedy Building/Storrs Street. The route operates predominantly via Loudon Road, with a deviation to serve the Havenwood housing development on Christian Avenue. The Heights route also serves the Post Office and inter-city bus terminal.

Industrial Park: This route provides cross-town connections, linking east and west Concord between Industrial Park Drive in the east and St. Paul's School in the west. The route serves Concord Hospital, District Court (westbound only), Eagle Square/State House, regional bus terminal, the Post Office, Airport Road/Eagles Bluff, Regional Drive, the Industrial Park area, Pembroke Road, and the Havenwood housing development on Christian Avenue. It also serves the inter-city bus terminals and two trips per day go to the Department of Health and Human Services regional office on Terrill Park Drive.

Trolley service: The trolley service operates along a loop route from the State House/Eagle Square stop to the NHTI campus. The Trolley route forms a loop around Commercial Drive/Fort Eddy Road, and is operated bi-directionally. The route follows a slightly different path in each direction due to one-way traffic patterns and serves the intercity bus terminal, but only in the clockwise direction. All three routes operate with one-hour headways and the Trolley route operates with half-hour headways.

Specialized transportation services are available to specific population groups, including seniors and persons with disabilities. CAT operates two specialized transportation services:

Concord Senior Transit (CST) provides specialized service to the city's senior citizens. This service is intended to provide on demand accessible transportation to and from medical appointments, shopping, social activities, employment and education opportunities. CST operates Monday through Friday from 7:30 am to 3:30 pm. The regular fare for CST services is \$1.00 per ride. Riders contact CAT dispatchers to schedule a ride on the CST.

Special Transit Service (STS) provides specialized service to persons with disabilities. It serves as the complimentary ADA component for the fixed route system providing demand-response service anywhere within $\frac{3}{4}$ of a mile of the CAT fixed route system. The fare for this service is \$2.50 per ride. Riders contact CAT dispatchers to schedule a ride on the STS.

There is existing coordination of services between CAT and the WTS, as well as the RTS which are all under the umbrella of Community Action Program Belknap – Merrimack Counties, Inc.

In late 2009 / early 2010 Concord Area Transit undertook a comprehensive service analysis in order to deliver a more sustainable and efficient service. At the time of producing this plan the routes mentioned above were still in operation but may be subject to change in the near future.

5.2 The Winnepesaukee Transit System (WTS)

The Winnepesaukee Transit System provides its services to five municipalities in the region:

- Belmont
- Franklin
- Gilford
- Laconia
- Tilton

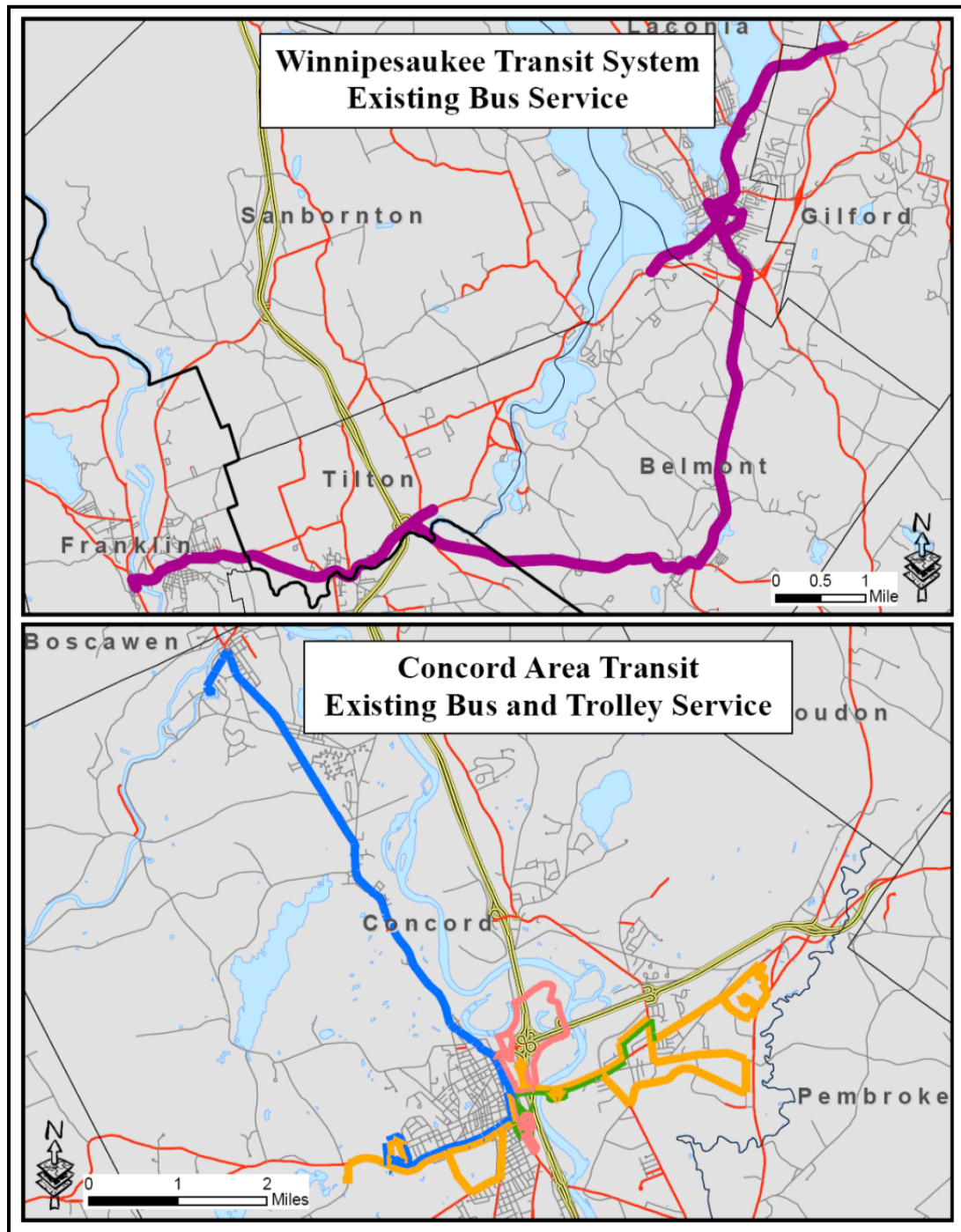
Managed by Community Action Program Belknap – Merrimack Counties, Inc, the service is designed as a fixed route system with predefined stops and estimated arrival times. It will also pick up people who live within one quarter mile from the route if scheduled by 4:00pm on the previous day.

5.3 Concord Coach Lines

This system operates inter-city buses with daily service between Concord and Boston (including South Station and Logan Airport), arriving/departing roughly every hour. The first bus departs at 5 am and the last bus leaves at 7pm from Concord. Concord Coach Lines also operates two buses daily

that connect Concord with northern New Hampshire cities and towns, including service to/from Berlin (via Conway and Meredith) and to/from Littleton via Plymouth. Parking at the bus station is free. The bus station is accessible via public transportation. According to the Concord Coach Lines office information, buses that travel during peak hours are regularly filled to capacity.

Map 8: Fixed Route Local Transportation Routes



5.4 Boston Express

This coach/bus line provides service connecting Concord with South Station and Logan Airport in Boston via North Londonderry and Salem. Service travels on I-93 and operates daily service to Concord with departures and arrivals.

5.5 Rural Transportation System

The Rural Transportation System operated by Community Action Program Belknap-Merrimack Counties, Inc. is a demand response service that provides a link to community services for seniors (aged 60 and over) and disabled individuals using a wheelchair or other device intended to aid the user. This program is offered to those seeking to maintain independence while facing the challenge of limited physical mobility, financial resources or lack of personal transportation.

Rides are available Monday through Friday on buses based in Belmont, Bradford, Franklin, Laconia, Meredith, and Pittsfield. Vehicles are routed through many communities, depending on service requests, which provide service to residents of the more outlying rural areas. Routes are planned from specific pickup areas to rider-selected medical offices and shopping centers in the destination zone. Routes are tailored to offer door-to-door service and assistance in loading and unloading. Due to funding levels, all routes are operated on a part-time basis, with the exception of Laconia which operates 7.5 hours, Monday through Friday.

5.6 Carroll County Transit Program

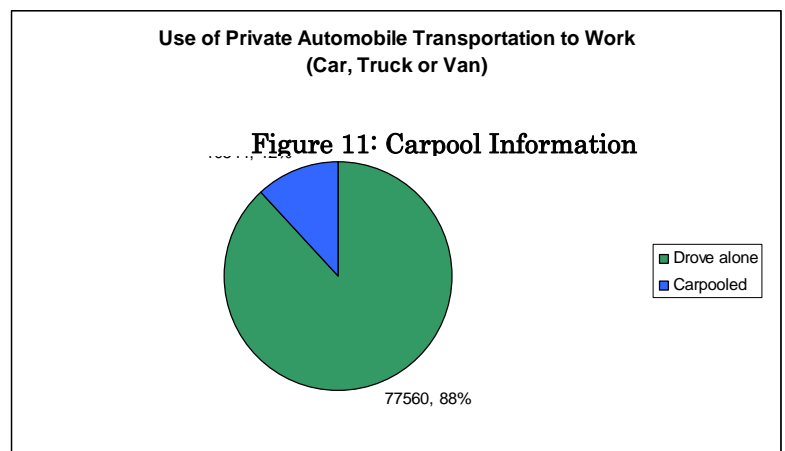
It is projected that the Carroll County Transit Program will be operational by July 1, 2010. Although not based in the Region 3 area, the planned service will provide transportation services for residents of Laconia heading northwards, and from Center Harbor and Meredith southward. Once operational this transit service will provide a valuable link to cities and towns outside the region 3 area and has the potential to serve as a valuable addition to increasing coordination between transit and human service providers in the region 3 area and beyond.

5.7 Other Providers

In addition to the fixed route services provided, community human service transportation providers also serve the region. These services generally serve specific subsets of the general population, or offer services for certain trip purposes only, for example trips to and from medical appointments. Many of these service providers are members of the Belknap – Merrimack Community Action Program (CAP) and the Community Provider Network, a consortium of human service transportation providers that operate in the wider Concord area. For a full list of transit providers in the region and the services they provide, please see Appendix 4

5.8 Carpool Information and Rideshare Programs

As mentioned in the previous section, the use of private automobile is the most common mode of transportation in the



study area. Rideshare programs throughout the state should play an important role in minimizing traffic congestion, promoting a better environment and producing more opportunities for people to get to and from their places of employment. As figure 11 demonstrates, out of the 88,104 people that used their car, truck or van as identified in the 2000 U.S. Census, 88% of them drove alone while the remaining 12% carpooled. These figures indicate that the most preferable alternative method of commuting to work alone in the study region is the carpool.

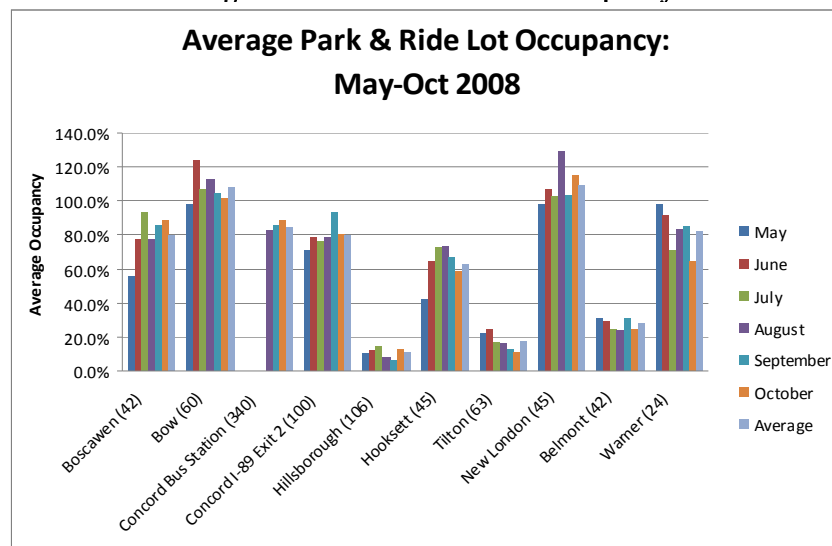
The New Hampshire Rideshare Program is a free commuter matching service provided by the NH Department of Transportation and dedicated to finding an alternative way for commuters to travel to and from work. NH Rideshare uses Geographical Computer Matching to provide commuters with information and assistance about ridesharing and alternatives to the single occupancy vehicle including carpools, vanpools, buses, and trains. You can register for the NH Rideshare program at the following location: <http://www.nh.gov/dot/nhrideshare/>

The Central New Hampshire Regional Planning Commission's Program for Alternative Transportation and Health (PATH) supplements the statewide ridesharing effort for commuters in the Central New Hampshire Regional Planning Commission Region by promoting alternatives to driving alone. PATH membership is free and open to all individuals who live or work in Central New Hampshire Regional Planning Commission region. PATH offers incentives for people that carpool, use public transit, bicycle or walk to work. PATH also works with employers by helping them find safe and reliable ways to support employees struggling with transportation issues and to offer the solutions as benefits to employees. PATH works with employers to identify analyze major transportation issues around their workplaces and helps employers develop and implement innovative and effective solutions. PATH also works with employers to promote commuting alternatives, develop transit options specific to workplaces, and identifies incentives to help employers encourage commuting alternatives. For more information on the program see: <http://www.path-nh.org/>

5.9 Park & Ride Options in the Study Area

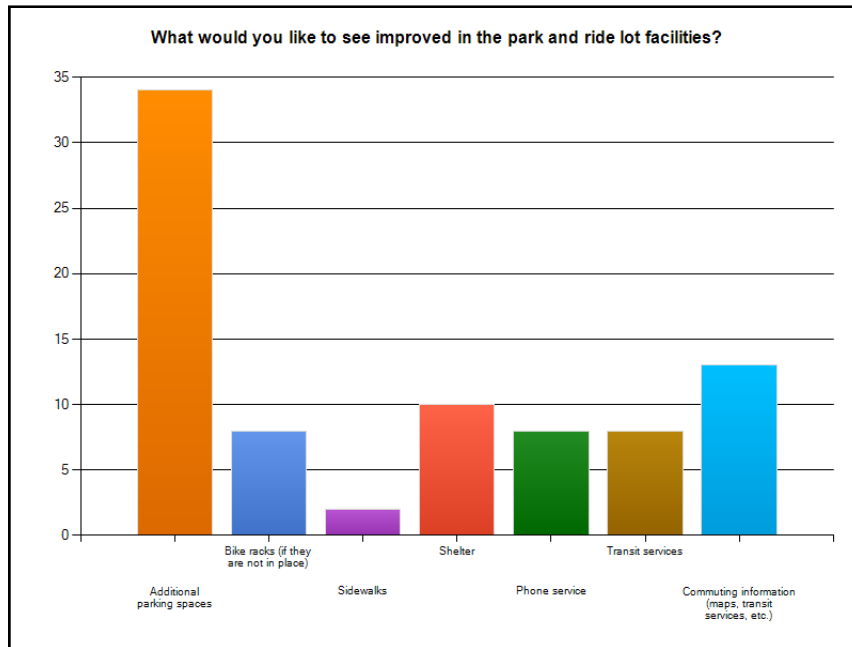
There are currently twenty-five Park & Ride lots throughout New Hampshire, eleven of which are within the study area. CNHRPC staff carried out a capacity analysis of the Park & Ride lots in the study area from May to October 2008, with the exception of New Hampton. The overall usage of the Park & Ride lots in the region is close to 80 percent of its capacity on weekdays. Figure 12 shows the individual results for each lot in the study area.

Figure 12: Park & Ride Lot Occupancy



CNHRPC staff also undertook an analysis study of the Park & Ride lots in September 2009. As part of this study, staff administered a survey to Park & Ride users to better understand what type of facilities were needed at the existing lots. Just over half of respondents said they would like additional parking spaces. Respondents also identified interest in having commuting information and shelters available at the Park & Ride locations. Figure 13 below displays the preferred improvements identified during the study period.

Figure 13: Potential Park & Ride Improvements



The existing Park & Ride lots in the region are a crucial component of the transportation infrastructure. They are especially effective in facilitating both Rideshare opportunities available to the study area's population. In the future, potential may exist to expand the role of the existing Park & Ride lots as multi-modal transportation centers for carpools, buses, bicycles and pedestrians. Better utilization of these lots can lead to more efficient transportation and increased opportunities for coordination in the region. Park & Ride lots with effective multi-modal transit options could potentially serve as centralized drop-off/pick-up points in the region and could ultimately lead to better opportunities for the low-income, disabled and elderly populations to utilize transit services.

Map 9 displays the location of the existing Park & Ride facilities in the study area.

Map 9: Region 3 Park & Ride Locations



6.0 Transit Service Operational Profile

A general picture of the region's human service transit profile can be illustrated through the evaluation of the information provided by the ten transit providers in the region who returned a comprehensive survey regarding their current operational profile. Due to the preliminary nature of results from these responses, provider services can only be characterized here, in a general sense. More detailed analysis of currently available services and service gaps will be forthcoming as the Region 3 Regional Coordinating Council is established and will provide greater detail on the region's overall service profile.

The following transit providers responded to the survey administered in January/February 2010:

Organization	Services Provided
Center Harbor, Meredith, and Moultonborough Community Caregivers	Demand response human services transportation
Community Action Program Belknap- Merrimack Counties - RTS	Demand response
COA Chapin Senior Center (Kearsarge Area COA)	Site specific transit provision
Concord Area Transit	Fixed Route & Demand Response
Easter Seals NH Special Transit Service	Statewide Human Service/Transportation Demand Response Service
The Friends Program	Human Service/Transportation Demand Response Service
New Hampshire Hospital	Demand response door to door service for patients. Also Arranges transportation for patients through other providers
Twin Rivers Community Volunteers	Demand response human services transportation
Winnepesaukee Livery LLC	Private Transportation provider – local, regional and out of state
Winnepesaukee Transit System	Fixed Route & Demand Response

From the ten responses received, it appears that every community in the region has some form of transportation service available to them. In addition, several providers also serve client populations outside of the study area. For example individual client services to Manchester, and less frequently

to Boston for medical appointments emerged as the predominant destinations outside of the region. Each of the transit providers operates year round, but none of the public/human service providers offer service on weekends. Neither of the fixed route systems in the region, Concord Area Transit and the Winnepesaukee Transit System provides service at weekends or after 6:00pm on weekdays.

The timeframe for scheduling demand responsive service varies greatly between providers. The majority of providers ask for at least 24 hours notice, however requests for certain medical rides need to be made from 2-3 days to one week in advance. The most common form of contacting drivers is by cell phone or with trip sheets/written directions. Mobile radios are also utilized. The different technologies used by the individual transit providers' offer little opportunity for coordination between agencies, and has been identified as a barrier to coordination throughout this plan update process.

The majority of drivers employed by the different agencies have received some form of formal training prior to commencing employment. However, this training ranges from NHDOT/FTA regulated training to on the job training from fellow employees. While the majority of providers surveyed have taken specific steps to ensure drivers are competent in dealing with people with disabilities and older adults who may have physical limitations, more formalized training is needed for drivers in certain agencies.

On average over 50 riders per week require personal care assistants on transit trips throughout the region. In reality this number is probably far higher, as there are a number of transit agencies who have yet to respond to this survey¹. It was unclear from the survey responses whether these assistants had to pay to use the service, and this is a matter which requires further examination. One possible incentive used in different regions throughout the country is to offer free rides to personal care assistants/family members through a "buddy program."

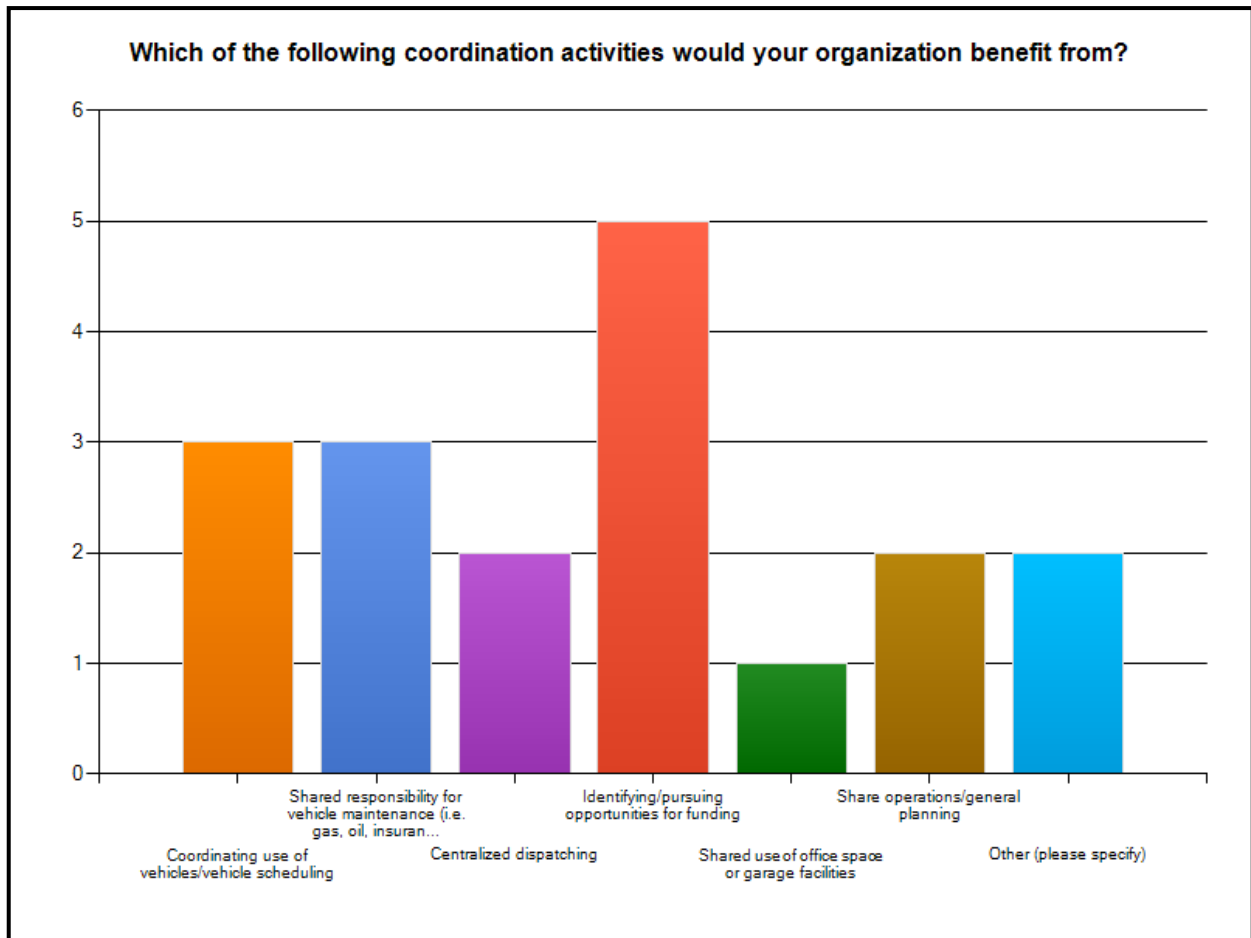
Very few of the transit providers reported a high frequency of refusing clients rides. On average 5 client rides are refused per week. The main reason for this is that the transit provider does not serve the geographic location requested or that insufficient notice was provided by the individual/organization requesting the service. All but one of the transit providers employs at least one full-time administrative staff member whose takes incoming calls and emails requesting transit service among other tasks. This is a positive statistic as with this type of experienced administrative

¹ The Transit Providers Survey will remain open throughout the public comment and observation period of this Draft Coordinated Transit and Human Services Plan. To access the survey please visit our website: <http://www.cnhrpc.org/transportation/CoordinatedTrans.html>

staff available opportunities for increased coordination between service providers in the region have the possibility to improve with the right technologies in place.

When asked about increased opportunities for coordination, 90 percent of the respondents identified some type of increased coordination between different agencies as being beneficial to their overall service provision. Figure 14 graphically represents the most favored responses from providers in the region for increasing coordination.

Figure 14: Transit Providers – Potential Coordination Activities



Coordinating the use of vehicles, shared vehicle scheduling, and identifying and pursuing opportunities for shared funding emerged as the most favored coordination activities among transit providers in the region. These three coordination themes have been echoed throughout the plan update process. Specifically, during the needs assessment exercise undertaken at the initial kick off meeting of the plan update process, identifying and pursuing opportunities for shared funding and

the coordination of vehicles emerged as the most prominent themes to better increase coordination between service providers in the region.

6.1 Overview of Service Gaps: Transit Providers

It is very important in the transportation planning process to identify and then work to fill gaps in existing services. This is a technique that can seamlessly apply to the process of better coordinating transit and human services in the region. Even with the limited data available at this time, significant gaps in service to transit dependent populations can be identified from the transit provider's perspective:

- A significant portion of transit dependent individuals live in the more rural, outlying towns without access to fixed route transit services. These towns may also be underserved by area specific human service agencies that are more likely to operate in larger communities that have higher concentrations of the target populations.
- Many potential transit clients in the region, especially working low income individuals and TANF recipients, would be likely to benefit from expanded evening and weekend services.
- Paratransit users sometimes need a level of service above and beyond what is required by the ADA, such as service provided on the same day it is requested, where and when the fixed route service does not operate, or have the ability to accommodate “uncommon” wheelchairs of mobility devices.
- Some drivers may not have been adequately trained to comfortably accommodate disabled individuals and older adults with physical limitations.
- Better advertising of services may increase ridership on routes provided throughout the region.

The following section details the overall transit needs assessment which was undertaken by the plan development team during the plan update process.

7.0 Needs Assessment

This chapter considers the findings of the tasks undertaken in previous chapters. Understanding the unique and individualized needs reported and expressed during the plan update processes enabled the project team to begin to understand the vast array of consumer needs in the Region 3 study area. On January 13, 2010, the plan team held an initial kick off meeting in Concord to assess unmet transit and human service needs in the region. At this meeting over 60 participants from human service agencies, transit providers and other interested parties throughout the study area were asked to identify their unmet needs through a series of group breakout sessions. Guided by planning commission staff the participants considered the provision of existing and future transit and human services under a number of different categories:

- **Transportation Needs Update**
 - What do you need public transportation for?
 - Where do you need to go using public transportation?
 - What do you consider to be personal / client physical needs when it comes to transportation?
- **Real and Perceived Obstacles to Coordination**
 - What are the most common transportation related issues you / your clients face?
 - How is coordination or lack of, a benefit / obstacle to your current transportation needs?
 - How do you think transit providers in the region should increase coordination?
- **Key Players and their responsibilities**
 - Who should be involved in improving transportation in the region?
 - What should their responsibility be?
 - How else can we address the concerns you have about the coordination of transit and human services in the region?

Participants at this meeting provided a wide array of information on current and unmet transportation needs in the region. Information was collected on issues ranging from the physical needs of transit riders to requests for increased or new services along particular routes and corridors. Due to the large amount of feedback received at this meeting and throughout the plan update process, it is best to group this information under each of the specific headings outlined above. For more specific information regarding this section please see Appendix D: Transportation Needs Assessment Specifics.

7.1 Transportation Needs Update

Primary public transit system needs identified for improvements in the region were to increase opportunities to use the system for everyday tasks such as getting to and from medical appointments, places of employment, social service facilities, shopping and social events, educational opportunities, and religious services. Current capacity and service times in the region do not support ease of use, specifically with the fixed route systems. The need for expanded services to local destinations was identified, as well as regional and out of state destinations.

A prominent unmet need that emerged during the study period was the lack of transportation options for individuals who have been under the care of the Merrimack County Department of Corrections. The Department of Corrections deals with a large amount of people each year with low or no income, of which many have severe disabilities and are frequently homeless. When individuals are released from the correctional facility in Boscawen they have no public transport services available to them. Similarly people who have to attend the facility for services such as pre-trial arrangements are again provided with little or no transit options. Improving services around this key facility will require improved coordination between transit and human services in the region.

Significant barriers to transportation usage were identified by providers and users. Increased education and training, for both users and drivers was identified as a key priority to improve service in the region. Training drivers on how to serve persons with disabilities emerged as a common theme, as did improving existing facilities for elderly individuals and the disabled population. These improvements should take the form of accessibility improvements to vehicles as well as increased provision of shelters and accessible bus stops.

Promotion of the existing transit options was also identified as an area for improvement. Many participants stated that they do not know about the transit options available to them due to a lack of basic information such as websites, schedules and multi-lingual information.

The lack of door to door and door through door service was also identified as a concern. By offering increased services in these categories each of the three target populations will benefit.

7.2 Real and Perceived Obstacles to Coordination

Difficulties with obtaining funding from a combination of federal, state and local resources and lack of coordination between service providers dominates this section. Insufficient funding, stovepipe funding and difficulties in obtaining local matching funds were identified as major barriers to coordination in the region.

The high cost of fuel, insurance and employing drivers were also identified as issues by transit providers. By increasing coordination, it may be possible to reduce these costs and improve service. Specific transit users identified their own inability to pay for multiple transit services as an obstacle to coordination. Both users and providers identified the lack of coordination between the different transit agencies in the region as an issue. Also, lack of coordination between the larger cities and local rural communities in the region emerged as an issue. Specifically, smaller communities would like an expansion of fixed route services from the larger cities to their towns but may not be in a position to fund this service.

Multiple carriers serving the same population and the lack of an integrated ticketing service for the region require additional coordination. The creation of a common payment system has the potential to improve users' ability to obtain tickets for transit services.

The development of a common call center / regional transportation brokerage was identified as a key step in improving coordination in the region. Specific technologies to improve scheduling and

coordination were also discussed. This improvement would be the responsibility of the Transportation Brokerage / Regional Transit Coordinator to implement when a broker is in place.

7.3 Key Players and their Responsibilities

The leading transit providers in the region, such as Community Action Program Belknap – Merrimack Counties, Inc. were identified as being instrumental in the establishment of a Regional Transportation Brokerage and promoting increased coordination in the region. Local municipalities and municipal officials, state governmental agencies and Regional Planning Commissions were also identified as key players in assisting with increased coordination of transit and human services. Individual organizations were also identified. Improving coordination is a key task for all interested parties.

Finding an individual / organization to take the lead in the coordination process was identified as a primary task and is a process that should be started immediately to ensure improved services are delivered as early as possible.

Table 9 offers a brief synopsis of the transit needs, resources and potential improvement strategies collected during the needs assessment for each of the three target populations of this plan.

Table 9: Transit Needs, Resources and Potential Improvements

Target Population	Special Transportation Needs & Concerns	Types of Transportation	Potential Transit Improvement Projects
		Modes	
Elderly: Able Bodied	<ul style="list-style-type: none"> - Lack of knowledge about resources - Concern about safety and security - Awareness of time when driving may be limited - Increased service 	<ul style="list-style-type: none"> - Fixed routes - Demand response service - Special purpose vehicles: recreation, shopping, services, social activity 	<ul style="list-style-type: none"> - Educational initiatives, including experience with transit riding before it is needed - Buddy programs and assistance in trying transit - Incentivized fares for seniors
Elderly: Frail	<ul style="list-style-type: none"> - Assistance to and through the door - On time performance and reliability critical to frail users - Assistance in trip planning needed - Need for shelters - Increased service 	<ul style="list-style-type: none"> - ADA Paratransit - Emergency and non-emergency medical transportation - Escort/Companion services - Special purpose vehicles 	<ul style="list-style-type: none"> - Escorted transportation options - Door-through-door assistance; outside vehicle assistance - Technology that provides feedback both to the consumer and to dispatch - Individualized trip planning and trip scheduling assistance - Appropriately placed bus-shelters
Persons with Disabilities	<ul style="list-style-type: none"> - Service quality and reliability - Driver sensitivity and appropriate passenger handling procedures - Concerns about wheelchair pass-bys - Need for shelters - Door-to-door or door-through-door service for certain individuals - Difficulty in accessing visual or auditory information - Increased service 	<ul style="list-style-type: none"> - ADA Paratransit - Emergency and non-emergency medical transportation - Escort/Companion services - Special purpose vehicles 	<ul style="list-style-type: none"> - Continuing attention to service performance; importance of time sensitive service applications - Driver education and attention to procedures when dealing with passengers with disabilities - Appropriately placed bus shelters
Persons of Low Income	<ul style="list-style-type: none"> - Easy access to trip planning information - Fare subsidies that can be provided in a medium that is not cash (bus tokens or passes) - Availability of bus tokens or passes - Increased service 	<ul style="list-style-type: none"> - Fixed Route transit - Demand response services - Special purpose vehicles: employment, training, education 	<ul style="list-style-type: none"> - Train the trainers, staff who can train consumers to access public transit - Creative fare options available to human services agencies - Increased quantity of bus tokens available - Bus passes available to those searching for jobs or in job training programs - Increase education about transit, continue to work on improving transit service levels (coverage, frequency, span of hours)

8.0 Goals & Implementation Objectives

The following section of the plan sets out a series of goals and accompanying implementation objectives to improve coordination between human services and transportation in the Region 3 area. The vision statement below was developed by the project team during the preparation of the updated Coordinated Transit and Human Services Transportation Plan for Region 3.

Vision Statement: Increased Coordination between Transit and Human Services in the Region

Transportation providers, purchasers, riders, and the community at large in the Region 3 area will work together for mutual benefit to gain economies of scale, eliminate duplication, and expand and improve the quality of service to address the transportation needs of people with transportation challenges.

To assist in meeting this vision, the project team has developed a number of strategic goals, each accompanied by a set of implementation objectives to establish increased coordination in the region. The goals, developed from a combination of public input obtained during the plan update process and the existing recommendations in the 2008 Coordinated Transit & Human Services Transportation Plan, are responsive to the federal guidance for the locally developed plan. These goals which are all of equal importance, establish the roadmap by which the mobility needs of the region's target populations can be addressed. The implementation objectives are the methods by which gaps in services and opportunities for increased efficiencies may be effectuated, through various coordination efforts.

The implementation objectives below are listed in priority order as determined by the Region 3 stakeholders who attended meeting 2 of the plan update process.

8.1 Goal 1: Establish the Region 3 Regional Coordinating Council.

Under the New Hampshire *Statewide Coordination of Community Transportation Services Plan*, a Regional Coordinating Council (RCC) will need to be established for the Region 3 area. The Region 3 RCC should include regional representatives of funding agencies and service providers, and will work with providers to create local service designs, implement coordination policies, and provide feedback to the Statewide Coordinating Council.

Implementation Objectives:

1. Establish the Region 3 RCC.
2. Secure adequate funding and commitment from federal and state agencies to develop and maintain the Region 3 RCC.
3. Once the Region 3 RCC is in place, it should work to appoint the Regional Transportation Coordinator.

8.2 Goal 2: Increase coordination between transportation providers, users, and other interested agencies in the Region 3 area.

Given the level and diversity of needs in the region, a regional approach to facilitating coordination is needed, as no one agency or organization has the resources to effectuate the necessary cultural, institutional, and operational changes needed to accomplish coordination goals. Increased and effective coordination cannot be accomplished without dedicated staff and financial resources. Therefore, it is recommended that a regional transportation brokerage be established in the region. This brokerage would be selected by the Region 3 Regional Coordinating Council and would manage coordination efforts throughout the region.

Implementation Objectives:

1. Establish a common call center for general information/scheduling rides. This call center should be multi-lingual such as the model in use at Concord Hospital. Call center should be automated in order to run 24 hours and manned during normal business hours.
2. A clear and effective common website with the facilities for ride scheduling, timetables, and general information should be established (this should be multi-lingual). Seek funds to develop a web based Find-A-Ride system to guide riders to the most efficient and appropriate transportation service provider. The CNHRPC currently operates a web-based Find-A-Ride system which could serve as a useful tool when expanding facilities in the future.
3. Identify priority origin and destination points outside of the region and coordinate transportation services with these surrounding communities.
4. Ensure that adequate scheduling software is in place in order to develop a clear system of operations.
5. Implement an automated reminder call system to contact riders the day before a scheduled ride.
6. Seek funding to procure new equipment to assist with real-time operations, security, and scheduling.
7. Identify the key issues relative to the performance of transit providers in the region, both positive and negative and report on specialized transportation projects and solutions as applicable.
8. Compile a database of frequent users of transit and their origin/destination in order for better coordination to take place.
9. Examine the possibility of implementing a common payment option for all transit services in the region, such as a common swipe card.

8.3 Goal 3: Pursue a funding strategy that leverages local, state, federal, and private resources.

Funding for increased transportation services in the Region 3 area has emerged as one of the most prominent issues during the plan development process. Obtaining funding for public transportation is a challenging and time consuming process, especially with regard to obtaining local matching resources. This is especially true in rural and small urban regions where there are limited abilities to raise resources through local taxes or fees.

Implementation Objectives:

1. Develop partnerships with local institutions and private sector organizations to make contributions to public transportation services. Community Action Program Belknap – Merrimack Counties, Inc. has experience with this approach having raised matching resources for vehicle maintenance, purchase and operation.
2. Providers should group together under the guidance of the RCC/Transportation Brokerage to have increased purchasing power and better utilization of resources when seeking federal funding opportunities.
3. Seek JARC funds to offer bus pass subsidies for low-income individuals to/from jobs and employment related activities.
4. Add voucher programs to assist fare payment by low-income workers and low-income seniors.
5. Where applicable, utilize non-NHDOT funds such as Medicaid, Temporary Assistance for Needy Families (TANF) and Older American Act (Title IIIB) as matching resources. This is a strategy that has been successfully used by the Tri-County CAP in Berlin, NH Community Action Program Belknap – Merrimack Counties, Inc.
6. Under the guidance of the Region 3 RCC, identify barriers to coordination as a result of funding difficulties and ensure that the correct funding opportunities are sought to address issues such as insurance, financing, etc.

8.4 Goal 4: Enhance the existing transportation facilities in the Region 3 area and on specific routes that lead to and from the region to ensure that existing capacity is improved.

Acknowledging that more transportation capacity is needed to meet the needs of a growing population within the Region 3 area, this goal proposes an enhancement of existing facilities to provide more trip options for target populations. This goal inherently requires a strengthening of the ability of human service agencies to provide trips that public transit cannot thereby increasing both capacity and access to services. Reliability, quality of service, and service monitoring are reflected under this goal, important for both public transit and human service agency transportation providers.

Implementation Objectives:

1. Improve/establish services along the following regional corridors (or any potential combinations of these corridors):
 - Concord – Manchester – Boston
 - Seacoast – Laconia
 - Seacoast – Manchester (NH Route 101)
 - Seacoast – Concord (NH Route 4)
 - Dartmouth – New London – Concord
 - Keene – Peterborough – Hillsborough – Hopkinton – Concord
 - Laconia – Tilton – Boscaawen – Concord
 - Alton – Allenstown
 - Wolfeboro – Alton – Pittsfield
2. Establish feeder services to connect to fixed transit routes. Where possible these feeder services should be funded at some level by municipalities who have a need for access to the fixed route services in operation. Specific locations identified at Meeting 1 include:

- Services to and from Concord: Allenstown, Barnstead, Boscowen, Bow, Epsom, Hillsborough, Pembroke, Pittsfield.
 - Services to and from Franklin: Andover, Boscowen, Danbury, Hill, New London, Salisbury, Wilmot.
 - Services to and from Laconia: Alton, Barnstead, Bethlehem, Pittsfield, Plymouth, Meredith, Rochester, Wolfeboro.
3. Promote an enhanced volunteer driver program in the region.
 4. Research liability insurance options for human service organizations, including general liability for vehicle operations and for volunteer-based programs; widely distribute information about these findings and resources.
 5. Promote vehicle maintenance, vehicle loaner, vehicle back up programs, and driver sharing for human services agencies.
 6. Identify access impairments to bus stops and repair or construct safe travel paths so seniors and people with disabilities can easily use transit. Curb cuts; drop down plates, etc.
 7. Promote additional ridership of fixed route and demand response services through increased marketing efforts.
 8. Improve vehicles with updated equipment such as Mobile Data Terminals (MDT) for improved manifest display, immediate additions/deletions/confirmations to trips, improved communication and tracking.
 9. Establish basic reporting tools, including driver logs, dispatch logs, and standardized definitions of terms that can be easily adopted by human services agencies and utilized in reporting on transportation services provided.
 10. Identify and seek funding for safe and reliable services for transporting children to school, outside of school hours these vehicles could be utilized to provide transportation services for the region.
 11. Consider the restoration of fixed route transit services to the Manchester St. area of Concord.

8.5 Goal 5: Establish a clear and effective education and training program for transit users and providers.

Many participants at Meeting 1 and survey participants explained that either they do not know how to utilize the existing public transit system available, or where public transit exists in their communities they would not know how to use it. Support for new training programs for individual users to increase awareness, knowledge, and skills of transportation options that are available will enhance mobility for individuals with disabilities, the elderly, people with low incomes, and the general public. Similarly, drivers and transit providers should be instructed how to deal with riders who may not be comfortable with their transit options and who have specific issues with regard to physical and mental barriers to transit.

Implementation Objectives:

1. Implement a rider education program to inform each of the target groups about services available to them.
2. Initiate a comprehensive customer service program for transit providers and human service agencies to address the specific needs of transit users such as cultural differences, multilingual needs, physical and mental needs.
3. Expand mobility training for both riders and drivers so those with decreased mobility will have better opportunities to use regular fixed-route buses and vehicles.
4. Initiate shared driver training between different agencies.

5. Establish a clear program making door to door service available to all eligible paratransit riders which would deal with physical requirements for both users and providers.

8.6 Goal 6: Encourage local land use planning policies that promote effective and sustainable transit planning.

Working collaboratively to address land use and transportation issues will allow the communities in Region 3 to develop solutions that are acceptable to all. This will require a coordinated and inclusive effort to develop land use plans and supporting transportation systems. This effort should also result in a clearer understanding of how various strategies can positively impact the region. The SAFETEA-LU program actively promotes the need to consider land use through the federally-supported transportation planning program. One of the eight planning factors outlined (see 23 USC 134 (h) (1)) states the following:

(E) protect and enhance the environment, promote energy conservation, improve the quality of life, and promote consistency between transportation improvements and State and local planned growth and economic development

The more we understand about the influence of land use on travel behavior, we will be able to make better decisions regarding land use changes and the supporting transportation system.

Implementation Objectives:

1. Provide education and technical support to communities in the Region related to effective and sustainable transit planning. Potential land use and transit policies in the region may include:
 - Modification of existing zoning regulations to expedite creation of a variety of development types. Revised zoning codes, Prime Urban District zoning, and creation of overlay districts can encourage higher densities, mixed use developments and transit oriented development in appropriate areas.
 - The encouragement of mixed-use districts to improve the viability of local shops and businesses, increase housing options, provide social diversity, increase personal and convenience, and most importantly, offer transportation choices.
 - The adoption of design guidelines that will allow local municipalities to communicate the community's expectations and desired type of development.
 - Encouragement of development of vacant land and reuse of older sites. Infill development can contribute to the creation of concentrated activity centers and, because of its proximity to existing commercial areas and neighborhoods, encourage transit use.

9.0 Funding Sources

Identifying funding to implement an effective transit and human services coordination program in the region is an essential step in the planning process. Coordination of services entails significant and continued financial and institutional commitment.

While the regulatory basis for this Coordinated Plan under SAFETEA-LU focuses on three specific federal funding programs, this section outlines funding from and applicability of a variety of sources, including the Federal Transit Administration, The New Hampshire Department of Transportation, the New Hampshire Department of Health and Human Services, as well as local sources and private foundations.

Some of the funding programs listed below are more appropriate than others for the start-up phase of a coordinated program, but most could eventually prove to be applicable to ongoing program funding. Depending on the type of service adopted and its stage of implementation, appropriate funding sources and amounts will change. For example, a broader range of funding sources is likely to be available for demand-response service than for regular fixed route service, which is typically supported with FTA funds.

An important factor common to nearly all the funding programs listed below is that they require non-federal (local, state, or private) matching funds. Securing matching funds is a challenge for all transit systems in New Hampshire. With this in mind, potential sources of matching funds are discussed below. It should be stressed that the successful implementation of a coordinated system will require ongoing funding commitments.

9.1 NH Department of Transportation Programs

FTA Non-Urbanized Area Formula Program (Section 5311)

Section 5311 funds are allocated by FTA to states for public transportation projects in non-urbanized areas, by a formula based solely on the non-urbanized population in each state. Program funds require a 20% non-federal match and may be used for capital, operating and administrative assistance to state agencies, local public bodies, non-profit organizations, and operators of public transportation services. There is no limit on funds used for operating expenses. As many of the region's towns are considered rural, funding for enhanced services may be available for those communities.

FTA Capital Grants (Section 5309)

These funds for capital purchases offer long-term funding potential for vehicles and facilities. The process of seeking a capital earmark can be lengthy and requires the cooperation of the congressional delegation since earmarks are made by Congress. To the extent that such capital requests will be made by the state as part of the potential reauthorization of the SAFETEA-LU program, or as an individual budget appropriation request, the Region 3 RCC should be sure to make its funding needs known to both the DOT and the state's congressional delegation.

FTA Capital Assistance Program for Elderly & Disabled Persons (Section 5310)

This program provides formula funding to states for the purpose of assisting private non-profit groups and certain public bodies in meeting the transportation needs of elders and persons with disabilities. Funds may be used only for capital expenses or purchase-of-service agreements on an 80%/20% matching basis. The DOT prioritizes vehicle replacement over fleet expansion with this funding program, and SAFETEA-LU requires that applicants participate in regional coordination planning efforts. NH DOT now requires recipients of 5310 funding to participate in regional coordination planning initiatives. Agencies that do not participate in implementation of regional coordination efforts are unlikely to be able to secure 5310 funding in the future.

FTA New Freedom Program (Section 5317)

The New Freedom formula grant program aims to provide additional services and facility improvements to address the transportation needs of individuals with disabilities, which go beyond those required by the Americans with Disabilities Act. Funding is provided for capital and operating costs associated with these services. Up to ten percent of funds may be used for planning, administration, and technical assistance. Funding is allocated through a formula based on the population of persons with disabilities and is subject to public participation and coordinated planning under SAFETEA-LU requirements.

FTA Job Access and Reverse Commute (JARC) Program (Section 5316)

The Job Access and Reverse Commute grant program is primarily intended to fund the development and maintenance of transportation services designed to transport welfare recipients and eligible low income individuals to and from jobs and activities related to their employment. The JARC program authorizes grants aimed at developing new transportation services for low-income workers and/or filling in gaps in existing services. Reverse Commute projects are intended to provide transportation to suburban jobs from urban, rural and other suburban locations - but not necessarily just for low-income people. Eligible JARC funded projects include late-night and weekend service, guaranteed ride home services, shuttle services, expanded fixed route transit, ride-sharing and carpooling, and car loan programs. Capital funds require a 20% non-federal match and operating funds require a 20% non-federal match.

Up to 10% of federal funds can be used for project administration. State Temporary Aid to Needy Families (TANF) funds can be used as matching funds, and could be secured for funding in the region. The primary beneficiaries of this program are low-income families that otherwise would have a difficulty getting to jobs and related services, such as childcare and training opportunities.

Job Links Employment Transportation Initiative

The Job Links program was established by Congress in 1993 as a demonstration project to test alternate means of filling gaps between employment transportation needs and available services for individuals underserved by public transit. The program uses FTA and Department of Labor funding, and is administered by the Community Transportation Association of America (CTAA). Grants are

available for pilot projects for a period of one year on a 50%/50% matching basis. Funds may be used for a range of projects to improve employment transportation, including coordination of demand-response service, and specific fixed-route services that target workers. Project allocations are typically in the range of \$100,000-\$150,000.

Rural Transit Assistance Program (RTAP) Section 5311(b)(2)

The FTA under the Section 5311 Rural Public Transportation Program, provides funding to states intended for education, staff development, and technical assistance for rural transit operators. In New Hampshire, these funds are used to support rural transit activities such as training, technical assistance, research, and support services. This program does not fund operational or capital expenditures. It does not require a local matching share.

Federal Highway Administration (FHWA) Surface Transportation Program (STP)

These funds are typically used for highway construction and are handled by the New Hampshire DOT. However, they may also be used for any capital project, including transit systems. Nationally, 4 to 5 percent of STP funds are used for transit projects such as bus procurement or transit facilities, with the vast majority paying for highway projects. States may elect to transfer or “flex” a portion of STP funding for any projects eligible for funds under FTA programs except urbanized area formula operating assistance. The program requires a non-federal match of 20%. In FY2008, NH DOT took the major step of flexing \$800,000 in STP funding into the 5310 program to provide capital funding for the purchase of service contracts to purchase rides and to supplement the capacity of new regional brokerage entities.

Congestion Mitigation and Air Quality (CMAQ) Program

These funds are available to states for programs that reduce traffic congestion and improve air quality. All states receive CMAQ funds. States without non-attainment areas (regions with excessive levels of air pollution) can transfer their CMAQ allocation to their Surface Transportation Program fund allotment. A non-federal match of 20% is required. CMAQ funding for transit is typically spent to purchase buses, vans or rail cars; for transit passenger facilities; or for operating support for transit service. Funding may be used for all projects eligible under FTA programs including operating assistance, for up to three years. There is a long turnover period in the application process, and CMAQ funding for demand-response service would be difficult to justify, as this type of service does not necessarily remove traffic from the roads, nor result in fewer total trips.

9.2 Department of Health and Human Services Programs

Many federal programs apart from traditional transit programs provide funds that can be used for transportation purposes. These funds are typically reserved for addressing the transportation needs of the specific population being served by the program, and often can only be used for transportation related to that program, not for more general transportation-related needs of the participants. In some cases, program funds can also be used for general access or to expand overall service in a coordinated system.

Medicaid

The Medicaid program accounts for the largest share of DHHS transportation expenditures. DHHS is making a concerted effort to better coordinate the transportation services offered by its various divisions both internally and in conjunction with the Department of Transportation, the results of which should be visible in a few years. The New Hampshire DHHS, through its Granite Care program development is reevaluating how it funds Medicaid transportation. DHHS is exploring various options including channeling funds through regional brokerages across the state. Any change in funding resulting from this evaluation is most likely to occur over the longer term. The likelihood of state funding in the short term is somewhat limited, so attention must be paid to securing private foundation support or other flexible funding, at least for the initial phases of implementation.

Temporary Assistance for Needy Families (TANF)

TANF is the current name for the federal welfare program, formerly called Aid to Families with Dependent Children. The DHHS Division of Family Assistance (DFA) administers TANF funds. Of the four main purposes of the TANF program, transit service meets two: 1) providing assistance to needy families; and 2) ending dependence of needy parents by promoting job preparation, work, and marriage. TANF funds may be used for direct assistance and for other types of benefits. Assistance activities are defined in 45 CFR Part 260.31 and are subject to a variety of spending limitations and requirements including work activities, time limits, child support assignment, and data reporting.

A state may also choose to fund activities that are not considered direct assistance. These latter activities do not have the same requirements and limitations. Direct assistance includes benefits directed at basic needs (e.g. food, clothing, shelter, utilities, household goods, personal care items, and general incidental expenses) even when conditioned on participation in a work activity or other community service activity. In New Hampshire, all able bodied TANF adults must participate in the NH Employment Program (NHEP). Appropriate NHEP activities include employment, job search, on-the job training, job readiness, alternative work experience, adult basic education, vocational skills training, post secondary education and barrier resolution. TANF provides many support services to facilitate participation in the above activities. Support services may include childcare, mileage reimbursement, bus passes, books, fees and supplies, tuition, and reimbursements for other services in order to remove barriers to participation in activities. TANF funds may also be used for grants to develop or expand services that promote its major goals. TANF funds have been committed as matching funds for JARC applications elsewhere in the state, and may be a key component of ongoing funding for the region's coordinated transit program.

New Hampshire Employment Program

One of the ongoing expenses of a coordinated transportation system is funding for drivers. Through the state's Employment Program, this could be achieved at a low cost. The New Hampshire Employment Program on-the-job training program offers an incentive to employers to hire and train eligible applicants including potentially, transit drivers. This program reimburses the employer up to 50% of the employee's wages up to a maximum of \$3,500 for the duration of the contract; the training cannot exceed a 26-week period.

The Alternative Work Experience Program is a community service program designed to provide individuals in the Employment Program with work experience opportunities in public and non-profit agencies. Agencies are eligible if they provide NHEP participants with unpaid work activities that will help them to upgrade job skills, develop good working habits, establish a recent work history, and gain a better understanding of the employer/employee relationship. Employers participating in this program also serve to provide a vital community service by increasing job opportunities for these individuals.

Older Americans Act, Title III

Funding that emerges from this federal legislation supports the network of agencies and organizations needed to provide home and community based care for the elderly. It also leverages resources from other federal, state, and local entities. One of the permitted uses of the funds under Title III B - Supportive Services, is transportation for eligible citizens. To receive services, one must be 60 years of age or older. Preference is given to minorities and those with low-incomes. The DHHS Department of Elderly and Adult Services administer Title III-B funding in New Hampshire.

Community Transportation Assistance Project (CTAP)

Sponsored by the U.S. Department of Health and Human Services and administered by the

Community Transportation Association of America, this project is intended to help improve coordination of human services transportation and public transit resources. It strives to help human service transit providers meet their obligations under the Americans with Disabilities Act, and to encourage coordination between DHHS-funded transportation and other community public transit services. This program offers technical information and assistance to human service transportation providers to ensure safe, successful, and cost efficient transportation.

9.3 Local Sources of Funding

The long-term success of coordinated transportation in the region will depend largely on securing ongoing local funding to match FTA dollars. Some potential sources of matching funds are described below.

Local General Fund Appropriations

Securing additional municipal-level funding must be a continued focus of coordinated efforts in the coming years, and will involve presenting the coordinated transportation plan and proposed service improvements to Boards of Selectmen, welfare officers, housing authorities, and other municipal officials. Local budgets are perennially tight, and expected budget cuts at the state level are likely to make them tighter. However, municipalities are the main source of matching funds for most transit systems in the state, and a higher commitment will be necessary from each community. In addition, many local governments provide small grants or donations to support local health and human services agencies, some of which could possibly be directed toward transportation.

Local Option Fee for Transportation Funding

One means of generating local funding would be through local vehicle registration fees. A New Hampshire law passed in 1997 (RSA 261.153, as amended) permits municipalities to collect additional motor vehicle registration fees of up to \$5.00 per vehicle to support a municipal transportation improvement fund. Municipalities can establish the required fee based on anticipated funding needs for transportation improvements. The additional fee would be collected from all vehicles, both passenger and commercial, with the exception of all terrain vehicles. Of the amount collected, up to 10 percent, but not more than \$0.50 of each fee paid, may be retained for administrative costs. The remaining amount would be deposited into a municipal transportation improvement fund to help pay for improvements to local or regional transportation system including roads, bridges, bicycle and pedestrian facilities, parking and intermodal facilities and public transportation.

Use of the local option fee has several advantages as a local funding source for public transportation. First, it is established as a dedicated source of funds for local transportation.

Second, it is stable from year to year and not subject to an annual appropriations process. Third, it has the capacity to raise significant money to fund local matching obligations of both a coordinated demand-response system and potential expansion of fixed-route service in the region.

9.4 Private Sources of Funding

Business Support

There are several Chambers of Commerce organizations in the study area which have the potential to enhance coordination efforts. Chambers of Commerce may be able to play a key role in approaching large employers, such as hospitals, supermarkets, higher education institutions and retailers who want the business of transit riders and need transportation for their workers. Businesses may be willing to pay for part of the cost of delivering those riders to their doors. Many local businesses also support the NH United Way program through corporate giving, employee volunteerism, and in-kind donations. Some of these contributions generate funds that can turn into grants to support coordinated transportation programs.

Sales of Services and Products

Transit systems often bring in additional dollars through the sale of products and services. One of the most common sources of such income is the sale of advertising space inside or outside the vehicles. Locally, Concord Area Transit already realizes some revenues from transit advertising. Several of the local providers also charge fares or fees for transportation services. As a rule, these fees do not generate much revenue for the agencies.