



City of Hamilton

**Development of Policy Papers for Phase Two of the
Transportation Master Plan for the City of Hamilton
ACCESSIBILITY POLICY PAPER**

FINAL REPORT

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1. INTRODUCTION

1.1 Study Background and Objectives

The City of Hamilton *City-wide Transportation Master Plan* will provide inputs to the *Growth Related Integrated Development Strategy* (GRIDS) and make recommendations to Council on the adoption of a City-wide Transportation Policy that is cognisant of Vision 2020 and other City of Hamilton long-term planning objectives. The project has been divided into three distinct phases. The first phase consisted of the technical calibration of the existing transportation model to reflect current transportation conditions in Hamilton. The second phase, which is the object of this and other policy papers, will focus on the development of 23 policy papers in the following areas: Travel Demand, Urban Development, System Performance, Infrastructure Planning and Infrastructure Financing. Following the completion of the Policy Papers, the City will proceed to develop transportation scenarios (Phase 3 of the project) based upon the results of the policy work performed in Phase 2 and the land use scenarios developed through the broader GRIDS study and will test the efficiency and viability of these scenarios by integrating them into the calibrated model.

This policy paper addresses the issues of **Accessibility**, which is an issue that must be considered in virtually all planning decisions ranging from broad land use planning to more specific considerations such as road classification and access management. The remainder of this section provides a background on accessibility and the principles of accessible transportation. Section 2 reviews current policies that are in place as well as governing legislation. Section 3 addresses the issue of accessibility through three different lenses. Section 4 reviews accessibility policies in other jurisdictions. Section 5 outlines policy options for making Hamilton's transportation system more accessible while Section 6 provides specific recommendations. Section 7 evaluates the policy recommendations.

1.2 What is Accessibility?

In its broadest definition, "*Accessibility* (or just *Access*) is the ability to reach desired goods, services, activities and destinations (together called *opportunities*). For example, a highway or transit improvement can increase the services and jobs accessible from a neighbourhood. Access is the ultimate goal of most transportation, excepting the small portion of travel in which movement is an end in itself, (e.g., cruising, historic train rides, horseback riding, jogging)"¹

Accessibility can be viewed from different perspectives:

- **Location**, e.g. the ability for rural residents to take transit to get to a job in the downtown
- **Group** – e.g. the ability for a person with physical disabilities to use a bus
- **Activity** – e.g. the ability for a truck to stop on an arterial to make deliveries

Also varies by individual and their circumstances. For example a location may be accessible for persons with access to a car, but not by those who cannot afford a car or who do not have a drivers licence.

¹ Litman, T. TDM ON-line Encyclopedia, Accessibility Defining, Evaluating and Improving Accessibility

All of these factors must be considered when making decisions on future land use and transportation improvements.

The remainder of this paper generally focuses on accessibility from the perspective of persons with disabilities, and their ability to use the transportation system. Other barriers to transportation, including economic and cultural barriers are addressed in other policy papers:

- The issue of transportation costs, in the impacts on accessibility to jobs for low income individuals is discussed in the **Transit Targets** policy paper and to some extent in the **Energy Use and Greenhouse Gas Emissions** Paper.
- The issue of decreasing land use densities and its impact on accessibility between activities is discussed in the **Urban Structure and Land Use** policy paper.
- The issues of accessibility by walking and cycling is discussed in the **Walking and Cycling** Policy Paper as well as the **Urban Design** policy paper.

1.3 Accessible Transportation

"It is hereby declared that a safe, economic, efficient and adequate network of viable and effective transportation services *accessible to persons with disabilities* and that makes the best use of all available modes of transportation at the lowest total cost is essential to serve the transportation needs of shippers and travellers, *including persons with disabilities*, and to maintain the economic well-being and growth of Canada and its regions...."

Canada Transportation Act, CHAPTER C-10.4 (1996, c.10)

For residents of the City of Hamilton who have a disability (see below for definition), access means simply being able to use, enjoy and participate in the many aspects of society, including work, commerce and leisure activities. Transportation is a vital link that allows full participation. The City is committed to building a transportation system that provides equal access for all residents.

It is the current policy of the City of Hamilton to provide access to all of its programs, services and information to people with disabilities that is comparable to the level of access provided to others. This includes transportation systems and infrastructure.

1.3.1 EXAMPLES OF DISABILITIES

Disabled people are not a homogenous group and the access requirements vary depending on impairment. However, designing various modes of transportation and streetscape according to the principles of design-for-all and universal access would satisfy access requirements for various groups of disabled people – and improve the quality of transportation services for other people too. Examples of barriers people with different impairments come across are outlined below:

- People with physical impairments/mobility impairments face problems with physical obstacles such as high steps when boarding conventional transit buses and non-ramped grade separations making navigating public places or pedestrian pathways difficult or impossible.
- People with visual impairments face problems when information about transportation services are only made available in printed versions or in incomprehensible and unreliable speaker systems. Navigating public places or pedestrian pathways is also difficult if provisions are not made with tactile orientation guidance.

- People with hearing impairments also face problems when information such as transit's customer service is only made available in audible format.
- People with learning disabilities require easy-to-read transit information.
- Access to special services is also important for people with mental health problems, such as claustrophobia and anxiety, for whom the use of over-crowded buses can be problematic.

1.3.2 PRINCIPLES OF ACCESSIBLE TRANSPORTATION

Physical access and access to information is important in addressing a holistic approach to accessible transportation, including the street-environment. Further, there must be consideration of accessible transportation services in both the HSR urban transit service area as well as the rural areas of the City.

Physical access can be ensured by:

- Providing sidewalks and/or other pedestrian facilities to all destinations and ensuring these are barrier-free;
- Removal of unnecessary physical obstacles not only in transit buses but also in the street environment
- Providing signage and and guidance to from transit stops and key destinations; and
- Utilizing low floor accessible buses;
- Assistance by trained transit staff, with special disability awareness, to be available to assist with boarding;
- Including accessibility standards in the regulation of taxis (vehicle for hire industry).

Transit information must also be available in accessible formats. Audible information, text in sufficiently large and clear print, easy to understand information, induction loop systems, and to some extent tactile information are examples of accessible information.

For disabled motorists, transportation policies must provide:

- Appropriate numbers of designated parking spaces for people with a disability;
- Appropriate location of disability parking places in proximity to the destination; and
- Enforcement of parking restrictions.

Affordable transportation services are key for the disabled community, often on low income or provincial subsidy.

2. EXISTING CITY OF HAMILTON POLICIES

The City of Hamilton has proven to be progressive in addressing transportation and mobility for the elderly and disabled communities. Initiatives including the Planning Department's *Urban Braille System* addressing barrier free public spaces, the September 2002 publication of *A Social Vision for the New City of Hamilton*, and the September 2003 publication of their *2003 Accessibility Plan* address accessible transportation policy to an extent virtually unparalleled in North America.

The following sections highlight these initiatives as well as profile city public transportation operations and service delivery.

2.1 Current Roles and Responsibilities

The City of Hamilton has prepared an accessibility plan as a requirement of the Ontarians with Disabilities Act (ODA). The ODA received Royal Assent on December 14, 2001. The purpose of the Act is to "improve opportunities for persons with disabilities and to provide for their involvement in the identification, removal and prevention of barriers to their full participation in the life of the province". Sections of the Act applying specifically to municipalities were proclaimed on September 30, 2002 and require municipalities to prepare an **annual accessibility plan** and establish an accessible advisory committee, among other requirements.

The accessibility plan shall address the identification, removal and prevention of barriers to persons with disabilities in the municipality's by-laws and in its policies, programs, practices and services.

The accessibility plan shall include:

- a) A report on the measures the municipality has taken to identify, remove and prevent barriers to persons with disabilities;
- b) The measures in place to ensure that the municipality assesses its proposals for by-laws, policies, programs, practices and services to determine their effect on accessibility for persons with disabilities;
- c) A list of the by-laws, policies, programs, practices and services that the municipality will review in the coming year in order to identify barriers to persons with disabilities;
- d) The measures that the municipality intends to take in the coming year to identify, remove and prevent barriers to persons with disabilities; and
- e) All other information that the regulations prescribe for the purpose of the plan.

Under the Act, "barrier" means anything that prevents a person with a disability from fully participating in all aspects of society because of his or her disability, including a physical barrier, an architectural barrier, an information or communications barrier, an attitudinal barrier, a technological barrier, a policy or a practice ("obstacle").

Like other municipalities, the City of Hamilton is complying with the above directions. The City published its inaugural **Accessibility Plan** in September 2003. This comprehensive document is structured around the following chapter headings:

1. *Introduction*, addressing key definitions and the duties of municipalities;
2. *Identification of Participants* including the City's Advisory Committee for Persons with Disabilities and the Staff Access and Equity Support Committee;
3. *Key Contacts*;
4. *Municipal Highlights / Overview* addressing a demographic profile of the City;
5. *Mission, Vision, Values and Goals of the City*;
6. *Consultation Activities* throughout 2002 to August 2003;

7. *Plan Development Working Group;*
8. *Methods Used to Identify Barriers;*
9. *Barriers Identified* by type, how it was identified and responsibility for addressing the barrier;
10. *Operational Review* identifying the type of barrier, activity or initiative in addressing the barrier, the status and the responsible agency or municipal department;
11. *Decision-Making Review* that deals with barriers identified that relate to by-laws, policies and practices for which decisions or guidelines are set by Council or City administrative staff;
12. *Actions to be Completed Within 12 Months* identifies the activities to be addressed in the October 2003 to September 2004 period;
13. *Monitoring Progress* including a commentary on the preparation of quarterly monitoring reports; and
14. *Concluding Comments.*

Important elements in the authoring of the *2003 Accessibility Plan* were the creation of an Advisory Committee for Persons with Disabilities (ACPD) and a Staff Access and Equity Support Committee. Further, the City has an Access and Equity Coordinator responsible for spearheading the City's ODA compliance initiatives.

Hamilton's 2003 Accessibility Plan in fact sets the foundation for the City's transportation accessibility policy.

Existing City accessibility policies are addressed in Section 2.2.

The following sections profile current roles and responsibilities as they relate to operations and service delivery (transit and specialized transportation services); and ancillary transportation considerations (streetscape, parking, sidewalk design, etc.).

2.1.1 OPERATIONS AND SERVICE DELIVERY

The City of Hamilton's (Public Works Department) Transit Division's *Accessible Transportation Services (ATS)* is responsible for administering the City's programs to ensure accessibility to transportation services for persons with disabilities. It is based on the "Family of Services" concept of utilizing a variety of different services to accommodate the range of transportation needs of the (elderly and) disabled community. The "Family of Services" includes the following components:

D.A.R.T.S. Service: Advanced booked, door-to-door transportation is provided for registered customers under contract to the City. Ambulatory trips may be accommodated by sub-contract with Veterans Transportation (sedan taxi service), dependent on schedule availability of D.A.R.T.S. vehicles.

Taxi Scrip Service: All persons with disabilities who qualify for ATS are registered for the Taxi Scrip Program. Taxi Scrip provides customers with a 40% saving on the metered rate charged by taxi companies, with the remainder subsidized by the City. The customers book all trips directly with the taxi company.

Accessible Low Floor Buses (ALF): This service promotes an alternative means of accessible travel for persons with disabilities utilizing the existing (conventional transit) services provided by HSR. ALF - Accessible Low Floor buses are operating on several different routes in the Hamilton area. On Weekdays and Saturdays, certain routes only operate ALF buses, while on Sundays all routes operate ALF buses. The goal of HSR is to continue purchasing these buses so that in the future most routes will be operated using low floor buses. The ALF buses will serve riders with "no steps entry/exit". Curb level entrance will improve access for existing transit customers including persons who have trouble climbing stairs. Regularly scheduled public transit services will be available for users of wheelchairs, scooters, walkers and other mobility devices. The entire floor of these buses

between the front and centre doors is about 35cm above the ground. Upon request, the driver can lower the bus entrance to within 25cm of the ground or to within 10cm of the standard sidewalk. The front and centre door ramps can be extended by the driver onto the sidewalk. The slope of the ramp is virtually flat, providing easy access to the bus. In addition, fare payment is voluntary for persons in wheelchairs, wheeled walkers, scooters and for their assistants on conventional HSR service.

Trans-Cab, Trans-Link and Seniors Supermarket Charters are some of the other HSR services that provide improved accessibility for specific market segments.

2.1.2 TRANSPORTATION INFRASTRUCTURE

In addition to public transit operations and service delivery, there exist a number of ancillary transportation considerations (and the responsible party) including:

Disabled parking permit policies	→	Parking & Enforcement and Development Division, Planning and Development Department
Implementation including roads, sidewalk design, audible pedestrian signals, curb cuts and snow clearing; public buildings	→	Operations & Maintenance Division, Public Works
Barrier free design guidelines, building permits and Urban Braille	→	Development Division, Planning and Development Department; Public Works Department (construction)
Transit fleet and facilities	→	Fleet and Facilities Division, Public Works Department

Further, accessibility requirements for the taxi industry may be addressed through municipal regulatory/ by-law considerations. Such accessibility requirements may include specifications for percentages of fleets, the letting of licenses specific to accessible taxis, and driver training/disability awareness requirements.

2.2 Existing City of Hamilton Policies

As previously referenced, the City has prepared an *Accessibility Plan* (September 2003), pursuant to the Ontarians with Disabilities Act, that indeed addresses the requirements identified in 2.1, above.

2.2.1 TRANSIT AND SPECIALIZED TRANSIT

Policies exist which govern the delivery and use of accessible transportation services including D.A.R.T.S. and fixed-route transit. For the purposes of this Working Paper, a review of current transit and specialized transit operating policies and practices is not included. The Transit Division's *Accessible Transportation Services (ATS)* has committed to working with the City's Advisory Committee for Persons with Disabilities to review major policies regarding the delivery of D.A.R.T.S., including:

- Service eligibility and certification;
- Service parameters including hours of service, service area, service types, etc.; and

- Scheduling parameters including pick-up windows, call returns, trip cancellations and no-shows, etc.

Section 3.3 provides additional commentary on existing levels of specialized (D.A.R.T.S.) services.

2.2.2 TRANSPORTATION INFRASTRUCTURE

“The City of Hamilton and its Planning Department is on the leading edge of planning and design of accessible sidewalks and public spaces. The City of Hamilton is one of North America’s most accessible cities and is well known worldwide for its efforts to improve accessibility for all citizens.”²

Transportation infrastructure addresses barrier-free urban design considerations including streetscape and access to and from bus stops, etc. as well as ancillary considerations such as provision for disabled parking.

The city’s primary initiative in transportation infrastructure is their state-of-the-art barrier-free design standards as articulated in the *Urban Braille System*. A profile of the *Urban Braille System* is provided in Appendix A. In addition to Urban Braille, the Site Plan Guidelines Manual from the Planning Department promotes accessibility and helps developers to ensure their private projects are consistent with City initiatives in the public spaces.

The Urban Braille system is primarily designed for visually impaired persons and users of a variety of mobility devices such as wheelchairs and scooters and addresses the following:

- Directional change;
- Hierarchy of pathways (major path versus minor path);
- Entrances to buildings;
- Sidewalks and road boundaries;
- Ramps versus raised pedestrian crossings/intersections;
- Signage/way-finding; and
- Other information such as building information, addresses, etc.

Included in the system elements are bus stop detection strips to assist blind users to recognize the proximity of a bus stop or shelter.

Ancillary transportation infrastructure considerations include:

- Audible pedestrian crossing signals, a responsibility of the Traffic Section of Public Works, provides for audible crossing signals on an as-requested basis with consideration given to proximity to higher traffic areas of visually impaired pedestrians.
- Priority snow removal (responsibility of the Operations & Maintenance Division of Public Works) who have:
 - Developed procedures for proper snow removal from sidewalks, ramps and disabled parking spots;
 - Requires that snow not be stored in disabled parking spots; and
 - Ensures enforcement of the snow clearing by-law, which is a significant issue for those wishing to access fixed-route transit during winter months

² *Hamilton Urban Braille System: Urban Design for an Aging Society* by Sinisa (Sonny) Tomic

- Disabled parking program. For eligible people in receipt of a permit issued by the Provincial Ministry of Transportation there is a two-fold provision:
 1. The disabled placard program provides for the ability of permit holders for on-street parking throughout the city with few restrictions of time or space (parking is not permitted in “no stopping” zones for example); and
 2. The City’s Disabled Parking Program provides for specific designated parking spaces such as designating a spot at a place of residence. The disabled parking permit program assists disabled residents of a specific street with their parking difficulties by prohibiting parking by all motorists, except the abutting disabled resident who has the necessary parking permit. Disabled parking permits are available at no charge. There are 279 reserved disabled parking spaces in the City. Signage prohibiting parking except by permit is provided.

2.2.3 SOCIAL VISION

A Social Vision for the New City of Hamilton (September 2002) is the first publication of its kind to be developed by any municipality in Canada. Its endorsement in principle by Hamilton City Council has helped position the city as a national leader in the area of social development. The purpose of the Social Vision is to identify the priority areas for investing in people and their neighbourhoods. The Social Vision explains why the City of Hamilton needs such a vision and the commitment required to spearhead the project. The thrust of the document addresses such key issues as children and family, skills development and affordable housing. The vision does address *inclusion* and the ability of all members of the community to participate to the best of their ability. Further, reference is made to barrier-free design as the starting point for inclusion. It is within this latter context that elements of the Social Vision complement other municipal initiatives regarding accessible transportation policy.

3. BACKGROUND AND CONTEXT

This section provides:

- A discussion of an *accessible public policy framework* to put the development of accessible transportation policy into an appropriate context;
- A *market framework* within which population projections are translated into the incidence of transportation disability; and
- A *commentary on existing levels of accessible transportation* (D.A.R.T.S. and HSR) services.

3.1 Accessible Public Policy Framework

An understanding of an accessible public policy *framework* is germane to the development of accessible policy direction for the City. These elements are addressed in the core values of the city's *Social Vision* and are the foundation of both the city's *2003 Accessibility Plan* and *Urban Braille System*. Within this framework, the following shifts seem particularly relevant:

- The changing role of government
- The changing roles for individuals and communities
- The changing relationship between public policy and economic policy

Shifts in public policy and changing roles for government, communities, and individuals have obvious implications for persons with disabilities.

Together these shifts in public policy and social policy suggest that policy towards persons with disabilities will, in future, reflect the following directions:

- Inclusion will be defined at the *community* level - citizenship at the community level will be the primary context in which citizenship rights and responsibilities are expressed.
- Citizenship will be defined in an *individual* context - citizenship rights and responsibilities will reflect an individual's membership in the broader community, not membership in a particular category relating to a specific disability.
- The *rights* of citizenship will be complemented by *responsibilities* - the right to participate in community life will be matched by an expectation to contribute to community life.
- The *rights and responsibilities* of persons with disabilities will be implicitly defined through a variety of policy instruments. Specific rights and responsibilities of persons with disabilities are likely to be legislatively based.

These new directions are reflected in the following policy framework. A policy framework in today's context must address four different policy challenges. They are as follows:

1. *The Challenge of Societal Outcomes* -- This policy challenge relates to the impact of a policy decision, or public program upon the broader community, or society, i.e. beyond the impact on the client group targeted by the policy decision.

Relevant questions in transportation services for persons with disabilities would include the following:

- Do the services provided to persons with disabilities enhance their full participation in community life and enable fulfillment of their potential contribution? e.g. do services enhance the mobility of persons with disabilities? (Transportation as a means to an end)
- Are the services provided to persons with disabilities perceived to be equitable, relative to services provided to Canadians with other disadvantages and/or those without disabilities? e.g. how do services compare with other Canadians who may be transportation disadvantaged?

2. *The Challenge of Policy as "Business Policy"* -- This policy challenge relates to the pursuit of outcomes that are of a higher level than the objectives of a "stand-alone" program.

Relevant questions in transportation services for persons with disabilities would include the following:

- *Are the services provided appropriately linked and integrated with other public services?* The goal of transportation may be accessibility but the higher level of outcome that is expected involves full participation in, and contribution to, community life. Accordingly transportation services must be seen as only one element of a "basket of services" necessary to facilitate such participation and contribution.

3. *The Challenge of Program Policy* -- This policy challenge relates to the clients, "customers", "users", and/or "target audiences" identified as the direct and intended beneficiaries of a public program or service.

Relevant questions in transportation services would include the following:

- *Are the services provided on the basis of particular defining characteristics?* e.g. are services provided simply on the basis of age, such as 65 and older?
- *Are the services provided on the basis of need?* e.g. are services aimed at the needs of those who are transportation disadvantaged?
- *Do services reflect an appropriate balance between individual and community responsibility?* e.g. are fare structures appropriate given user needs and ability to pay?

4. *The Challenge of Administrative Policy* -- This policy challenge relates to the planning, budgeting, and controlling of the assets and resources expended in delivery of transportation services under the City of Hamilton's jurisdiction.

Each of these four policy challenges represents a discrete task of analysis. The relevant questions related to each challenge are necessarily linked to questions related to other challenges. However, the development of effective, efficient, and equitable policy is best facilitated when the tasks are individually addressed.

The Elements of Accountability

This tripartite goal of effectiveness, efficiency, and equity reflects the varying elements that comprise accountability in the regulatory and legislative environment. For example, the concept of effectiveness has migrated to a higher level of outcomes, i.e. beyond the level of a program. Fiscal

pressures place a continuing premium on efficiency and economy. And, in an era wants and needs for public services far exceed supply, equity is a key element of accountability.

Unbundling Policy, Management, and Service Delivery

Discrete analysis of each of the four policy challenges facilitates further analysis - the unbundling of policy, management, and service delivery. Historically, public administration bundled the three roles of policy development, management of resources, and implementation (delivery of services) into one continuous stream of activity. In recent years this trinity has been seen as divisible.

This separation of service delivery from management and policy roles offers the benefit of clarifying the differing accountabilities associated with each role. For example, organizations with roles in service delivery can logically be expected to concentrate on customer service. Organizations with management roles can be expected to focus on achievement of efficiencies. And organizations with policy roles and responsibilities can appropriately be expected to focus on definition, monitoring, and evaluation of policy outcomes at the “business policy” and/or “societal outcomes” level.

In the case of transportation services for persons with disabilities such outcomes include consideration of whether the “business of community living” is being facilitated by transportation services. Other outcomes would include consideration of whether transportation services for persons with disabilities were equitable, i.e. comparable with services delivered to those without disabilities.

Within a prescribed policy framework, it is important to recognize that while the Canadian Human Rights Act, equality by the Charter of Rights and Freedoms and the Ontarians with Disabilities Act (ODA) guarantee accessibility to persons with disabilities, people with disabilities still encounter instances where access is treated as a secondary consideration. It is important to ensure that in a discussion of ‘accessibility’, that we acknowledge physical barriers (to/from and boarding/disembarking public transportation services), psychological barriers, informational barriers, etc.

Similarly, it is important that we reflect the range of functional disabilities that may preclude or make the use of a specific transport mode difficult. This includes persons with mobility, agility, sensory, or cognitive disabilities as well as capturing those with mental illness or a cognitive disability.

3.2 Market Framework

This section provides a contextual overview of the characteristics of population in the in the City of Hamilton and factors that influence the need for accessible transportation. One of the primary factors influencing the number of physically disabled persons in the City is demographics and specifically aging of the population. Overall, the city’s population is projected to increase by an estimated 17 percent between 2001 and 2021. Conversely, it is projected that the transportation disabled population will increase by 33 percent during this same 20 year period (approximately 2 times the rate of population growth)³.

Changing demographics (i.e. aging population), growth in population through migration, and changes in settlement patterns certainly affect the demand for accessible transportation and an accompanying accessible infrastructure. However, there are several other factors that impact demand for disabled transportation. These issues are usually more social/political in nature and include, but are not limited to:

- Trends towards community-based living;

³ Extracted from the TransAccess database, a comprehensive database developed by Transport Canada and used for the purposes of this paper to derive the number of transportation disabled persons in the City of Hamilton.

- Expansion of adult day programs;
- Health care restructuring;
- Social policy framework; and
- Changes to service standards and other operational policies.

In the United States, recent research commissioned by the American Association of Retired Persons (AARP) suggests that the boomer generation, the first wave of which will be 65 years of age in 2011, will typically be “healthier” than that of previous generations. With greater expectations for mobility, this somewhat more affluent boomer generation will be a product of a more health conscious age group, while experiencing medical advances unprecedented in medical history. Future directions suggests the incidence of disability with aging will not escalate at the same rate that we have seen over the past quarter century. The increase in seniors does not necessarily indicate a proportionate need for the current mix of transit services. That is, there are mitigating circumstances that suggest the demand for specialized transit services will not increase at the same rate as the aging population. As the “baby boom” generation ages, the senior population will generally:

- Be healthier and more physically fit
- Have a higher level of education
- Have a higher disposable income
- Be less transit dependent with greater automobile ownership/access
- Be living independently
- Have a wider range of lifestyle preferences and higher mobility expectations
- Live longer

An opposing and concerning trend to the above trend is that fact because people are currently so dependent on cars for mobility, they may have health problems later on in life due to years of physical inactivity. Research in this area is just starting to emerge therefore the net impacts on mobility needs are inconclusive.

Figures used in identifying the number of transportation-disabled persons by functional disability were derived from data from the *TransAccess* Information Base. This information base uses data from the Health and Activities Limitation Surveys (HALS), undertaken by Statistics Canada, and allows users to forecast the number of persons with disabilities and their characteristics at the provincial and national levels. This database is the most comprehensive of its kind, conveying the incidence of disability in general and by specific functional disability. Table 3.1 identifies the number of transportation-disabled by functional disability for the years 2001, 2011, and 2021.

HALS uses the World Health Organization’s International Classification of Impairments and Handicaps to define a disability. The definition is as follows:

In the context of health experience, a disability is any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered to be normal for a human being.

Table 3.1: City of Hamilton – Transportation-Disabled Population by Functional Disability

Year	Population ⁽¹⁾	Transportation-Disabled by Functional Disability ⁽²⁾									
		mobility / agility		cognitive / mental		visual		other		Total	
2001	490,265	13,500	2.8%	8,000	1.6%	3,200	0.65%	4,800	1.0%	29,500	6.0%
2011	532,380	16,500	3.1%	8,500	1.6%	3,500	0.66%	5,100	1.0%	33,600	6.3%
2021	575,826	20,700	3.6%	9,200	1.6%	3,700	0.64%	5,500	1.0%	39,100	6.7%
% Change	17%	53%		15%		16%		15%		33%	

Source:

⁽¹⁾ City of Hamilton Facts and Figures, Winter 2003 (Based on City of Hamilton Forecasts, 2000)

⁽²⁾ Derived from data from the *TransAccess* Information Base, Transport Canada

It is important to recognize that by definition, *transportation disabled* does not imply an inability to use conventional fixed route transit and should not be interpreted as the potential demand for D.A.R.T.S., door-to-door transportation service. It does however; speak to the order of magnitude of the incidence of disability and those persons who may benefit from accessible transportation policy including current city initiatives.

3.3 Existing Levels of Accessible Transportation (D.A.R.T.S. and HSR)

The delivery of specialized public transport such as that provided by Accessible Transportation Services (ATS) (D.A.R.T.S. & taxi scrip) creates strategic planning challenges and financial pressures which are unprecedented. The crux of the issue before municipalities throughout North America is to deliver public transit services to the elderly and disability communities that satisfy community requirements and expectations in a cost-effective manner.

Hamilton’s response (as echoed throughout North America) has been the implementation of a “family of services”, addressing a continuum of functional disability:

- For those able to get to and board/disembark -- accessible (low floor & other ‘easier access’ features) fixed route buses;
- For those unable to use fixed route transit – for both ambulatory and those who use a mobility aid -- D.A.R.T.S.;
- For ambulatory disabled persons, not requiring accessible, purpose-built vehicles – taxi scrip.

The following presents commentary relating to existing policies, procedures and processes.

1. Registration / Eligibility

- D.A.R.T.S has a high degree of registrants per capita. At approximately 0.019 registrants per capita, it is one of the highest in the industry. This is a combination of demographics as well as differences in interpretation of registration qualifications.

- U.S. experience suggests many transit agencies are implementing stricter eligibility & certification processes in order to both address the increasing demand for paratransit services and maximize utility (and investment) of accessible fixed-route buses and related infrastructure. (typically results in many 'marginally disabled' no longer being eligible for paratransit services, i.e. older adults/seniors & some ambulatory disabled persons)

2. Area of Service

- D.A.R.T.S. area of service encompasses the entire City of Hamilton and as such includes the non-urbanized areas outside of the HSR service area.
- The relationship to the fixed route service area is an important consideration:
 - OHRC documents: a) Discussion Paper on Accessible Transit Services in Ontario (Jan. 16, 2001); and (b) Policy and Guidelines on Disability and the Duty to Accommodate (Nov. 23, 2000) address the need for "parallel" service for those unable to use conventional transit.
 - Americans with Disabilities Act (ADA) similarly recognized the need for "parallel" service for those unable to use conventional transit and requires the provision of paratransit services within $\frac{3}{4}$ of mile of a fixed route corridor. However, paratransit service need not be provided for trips (origins or destinations) outside of the $\frac{3}{4}$ mile parameter.
- In Ontario, the ODA is silent on the specific levels of specialized transit service that should be provided.
- Municipalities can provide para or specialized transit services wherever they see fit. Such services *outside* of the fixed route transit service area do not have to be governed by service parameters or levels of service that are as rigorous as those for fixed route transit. Specialized services may be deemed premium and subject to a premium fare.

3. Operating Framework

- Subscription Trip Service: D.A.R.T.S. has a relatively low percentage (approx. 43%) compared to many Canadian jurisdictions that are in the 60 and 70 percentage ranges (Regina, Sask. is reportedly 93%)

A lower percentage, while creating challenges in maximizing vehicle productivity, ensures an adequate level of service available for advanced booked trips (and not monopolized by subscription service)

- Level of Service: According to reported operating data, registered customers of the combined services provided by ATS (D.A.R.T.S. and taxi scrip) enjoy a level of specialized transit service greater than that of virtually any other community in the country. As measured by passengers per capita, the Hamilton services (at 1.2) appear to be close to twice that of the average for Canadian large systems.

Notwithstanding operational challenges shared by their counterpart throughout North America, D.A.R.T.S has a trip denial rate of approximately 6 %. While this is relatively high, industry experiences indicate denial rates vary between 0% to a reported 12 and 13% (Halifax, NS, and St.

Louis, MO, respectively). Cautionary note: there does not appear to an industry standard in the definition or calculation of a trip denial.

It is important to note that the ATS taxi scrip program, while limiting or rationing the amount of scrip purchased per month, does not have a trip denial rate. When viewing both the ATS dedicated and non-dedicated services, the overall trip denial rate (as a percentage of completed trips) becomes approximately 3%.

4. Municipal Investment / Subsidy

- In the absence of Provincial subsidy and consistent with the high level of service as discussed above, Hamilton appears to spend more per capita (close to \$18.00) on specialized services than most cities in Canada (Ottawa being the only exception and virtually the same amount as Toronto). This can certainly be indicative of the importance placed on this service by municipal authorities.
- Notwithstanding the level of municipal contribution and the relatively high subsidy per trip, it remains imperative that specialized transit seek alternate funding partners and revenue sources in order to preserve the current level of service delivery and community expectations. In the absence of alternate funding or revenue sources, para or specialized transit services throughout North America have been forced to reduce service levels and amend eligibility and certification processes in order to safeguard services for those who have little or no alternative. Hamilton is no exception and has sought alternate revenue sources such as an ATS program registration fee (as an alternative to reducing levels of service, amending eligibility or increasing fares).

5. Accessible Fixed Route Transit

- In the absence of Provincial subsidies, Hamilton recognizes the need to spend approximately \$4.5 million per year for the next 8 years in the procurement of accessible low floor buses targeting for a completely accessible fleet by approximately 2012. This compares favourably with other municipal transit systems in Ontario who are targeting for 100% accessible fleets by 2015 to 2017. At present, close to 50% of HSR's fixed route buses are accessible, low floor.

One key objective for Hamilton's Transit Division (HSR) is to accommodate the growing demand for D.A.R.T.S. services, while containing costs and providing mobility to all customers in a fiscally responsible manner. This presents a challenge, which HSR plans to address by continuing to develop an increasingly close relationship between the fixed route and D.A.R.T.S. specialized transit services. This will result in improved efficiency of the transit system through accessible vehicles and enhancements to encourage travel on accessible fixed routes by older adults and persons with disabilities. Approximately 45% of D.A.R.T.S. registrants are classified as ambulatory disabled, some of whom may be able to use the fixed route service as the infrastructure (including number/percentage of low-floor buses) becomes more accessible. This approach is to develop an integrated system that removes the physical and psychological barriers to fixed route transit use and to encourage its use.

From a public policy perspective, a key goal is to integrate as many persons with disabilities as possible and include persons with disabilities in all aspects of public life. Thus, the City of Hamilton may endorse a policy framework whereby accessibility requirements are meant to ensure that persons with disabilities can use public transportation without encountering preventable barriers. D.A.R.T.S. services are required only for those persons unable to use the accessible fixed route system, not for those that are reluctant or unwilling to use an accessible fixed route bus.

It is important to identify potential improvements in meeting fiscally responsible mandates in the delivery of D.A.R.T.S. services -- *demand management* measures. These measures are intended to ensure adequate customer and revenue volume for services, or to divert demand from more costly to less costly services using incentives, information, and other voluntary measures.

4. REVIEW OF PRACTICES IN OTHER JURISDICTIONS

As previously indicated, the City of Hamilton has proven to be progressive in addressing transportation and mobility for the elderly and disability communities. Initiatives including the Planning Department's *Urban Braille System* addressing barrier free public spaces, the September 2002 publication of *A Social Vision for the New City of Hamilton*, and the September 2003 publication of their *2003 Accessibility Plan* address accessible transportation policy to an extent virtually unparalleled in North America.

Several municipalities in the Province of Ontario have indeed completed an Accessibility Plan, in compliance with the ODA but the consultant's cursory review of such plans (including Burlington, York Region, and Ottawa) indicate a level of comprehensiveness less than that of Hamilton's 2003 document.

Anecdotally, it is reported that municipal departments in Ottawa and Winnipeg for example, have streetscape improvements to foster enhanced accessibility (including curb cuts) as a priority in their respective work programs.

The City of Calgary has published their *City Vision – Guiding Calgary's Growth (to 2024)* document addressing ten goals including accessibility. The guiding principle for accessibility states: "To ensure reasonable accessibility to all areas of the city for all citizens." Calgary's initiative includes the planning and development of accessible transportation systems, including pathways and transit-supportive design. Transit continues to work toward operating an entire fleet of accessible vehicles.

The challenges encountered in providing cost-efficient and effective paratransit services such as Hamilton's D.A.R.T.S. specialized transit services are causing transit agencies throughout North America to review their arrangements for service provision. A review of industry practices suggests that:

- Financial pressures have historically encouraged many transit agencies to seek an expanded role for the private sector in paratransit provision specifically in the area of supplemental sedan or taxi service.
- Rising demand has increased the use of multiple private operators, while there is a decreased use of non-profit providers in the industry.
- The implementation of various demand management strategies including travel training, free-fare programs, etc. have typically resulted in some "off-loading" of demand from the paratransit services to accessible fixed-route transit. Also of interest are anecdotal reports suggesting that there is a marginal increase in trip generation rates by older adults and persons with disabilities. That is, in addition to some "off-loading" of demand, additional trips are being taken on fixed-route transit.
- The use of coordinated paratransit service delivery programs appears to be primarily limited to smaller transit agencies.
- Notwithstanding the fact that many municipalities contract all or a portion of their paratransit services to the private sector, there is a *growing tendency* to bring some of the program responsibilities in-house.

This latter point appears to be a result of the recognition that in order to best address issues of accountability and to foster a more integrated approach between accessible conventional and paratransit services, core program responsibilities have been brought in-house. Such responsibilities include eligibility and certification /client registration / database management,

reservations, scheduling, and dispatch (or trip management). Further, there is a growing tendency for municipal transit operations to assume operation of core services, namely wheelchair accessible van or bus services and contract out supplemental services such as sedan, taxi or accessible taxi services.

Cost and accountability are the major factors driving decisions about paratransit service delivery methods. The other major determinants are responsiveness (equipment availability, ability to respond rapidly), experience with paratransit service delivery, and control over service delivery, quality and usage. Larger agencies are typically more concerned about eliminating labour union conflict. As a result, agencies are handling their own reservation and scheduling to control demand and have implemented performance standards, incentives, penalties, and increased numbers of transit monitoring practices to control quality.

Transit agencies are continuing to evolve their methodology for providing paratransit services. There is a growing tendency for municipal transit operations to assume operation of core services, namely wheelchair accessible van or bus services and contract out supplemental services such as sedan, taxi or accessible taxi services. Cost and accountability are the major factors driving decisions about paratransit service delivery methods.

With legislative or regulatory requirements (i.e., Ontarians with Disabilities Act) in Ontario still in its infancy, it is useful to site the legislative environment in the United States for “lessons learned” in addressing accessibility requirements or opportunities. Faced with many of the same challenges, specialized transit or paratransit operations in the U.S. operate within an environment governed by the Americans with Disabilities Act (ADA) – Civil Rights legislation recognizing the rights of the individual to fair and equitable access to all the services afforded to all citizens. It is important to understand that deterring potential passengers that can use accessible line services is not against the spirit of the ADA. A key goal of the ADA is to integrate as many persons with disabilities as possible and include persons with disabilities in all aspects of public life. Thus, the accessibility requirements of the ADA are meant to ensure that persons with disabilities can use public transportation without encountering preventable barriers. Paratransit services are required only for those persons unable to use the accessible fixed route system, not for those that are reluctant or unwilling to use an accessible fixed route bus.

The U.S. law intends for persons with disabilities to have equal access to facilities and to be able to participate fully in programs and services. Access to mainline, fixed route transit must be provided. While access to fixed route systems is emphasized, the law acknowledges that some persons with disabilities are not able to use fixed route services even if these services are accessible.

An emerging trend in the delivery of transportation services for the elderly and disabled communities throughout North America is that of alternate service delivery strategies including:

- Neighbourhood Circulator/Service Routes/Community Bus – This approach incorporates routes for fixed-route service designed specifically to reduce the distances that elderly persons and persons with disabilities must travel to get to and from bus stops. Typically, smaller vehicles are used, and vehicles will travel on neighbourhood streets or to mall or hospital doorways to reduce walking distances. While routes are designed to better meet the needs of persons with disabilities and elderly persons, they are open to the public. Services can be planned as feeders to other fixed route services and can include a route deviation option (see below).
- Route Deviation Service – In a route deviation service, a vehicle operates along a fixed route, making scheduled stops along the way. Vehicles will deviate from the route, however, to pick up and drop off passengers upon request. The vehicle then returns to the fixed route at the point at which it departed to accommodate the request. Several

variations are possible including client-specific deviation, and site-specific deviation. This concept is a variation on the joint-use of vehicles, previously discussed.

- Feeder Service – Feeder service provides transportation for people with disabilities on paratransit vehicles to and from a fixed-route bus stop. The service may also occur in the reverse order, with individuals traveling on a bus to a point where they may transfer to a paratransit/D.A.R.T.S. vehicle.

4.1.1 PRACTICES IN FARE POLICIES

Fare policies represent another element of accessibility. Reduce or free fare for the disabled are increasingly popular. Recently completed reviews in Burlington, York Region and Red Deer have addressed "free fare" policies. Reduced fare policies have been popular with management and elected officials resulting in demonstration periods to evaluate the impact of lower fares. Blanket policies are common and policies designed to encourage the disabled to use conventional transit are being explored as well. The latter approach allows overall savings on operating costs. Reduced fare policies for persons with a disability are common in the U.S. as a result of the Americans with Disabilities Act (ADA):

- Most offer reduced fare (i.e., MTA/Maryland and WMATA /Washington, DC offer 1/2 price for disabled.)
- BFT (Ben Franklin Transit) in Washington State offers free fares for seniors and \$.25 for disabled.
- AATA (Ann Arbor, Michigan) \$.25 for ADA registrants.
- Free fares on conventional transit for ADA registrants is also gaining popularity. Two examples include Miami-Dade, FL and Austin, TX; the latter having long standing history with free fares.

As noted previously, HSR already has an informal policy that on low floor buses, "payment is on a voluntary basis for persons in wheelchairs, wheeled walkers, scooters and for their assistants."⁴ A logical extension, based on experience elsewhere, would be to formalize this free fare policy and possibly extend it to all registered disabled transportation users.

⁴ As reported on HSR Website – Accessible Transportation Services <http://www.hamilton.ca/Living-Here/Transit/Accessible-Transportation/introducingalf.asp>

5. IDENTIFICATION OF POLICY OPTIONS

5.1 Building on Existing Policies

The City of Hamilton currently has an accessible transportation policy framework in place that is virtually unparalleled in North America. Recent initiatives include the Planning Department's *Urban Braille System* addressing barrier free public spaces, the September 2002 publication of *A Social Vision for the New City of Hamilton*, and the September 2003 publication of their *2003 Accessibility Plan*.

Hamilton's 2003 Accessibility Plan in fact sets the foundation for the City's transportation accessibility policy by articulating guiding principles and sets strategic direction.

Important elements in the authoring of the *2003 Accessibility Plan* were the creation of an Advisory Committee for Persons with Disabilities (ACPD) and a Staff Access and Equity Support Committee. Further, the City has an Access and Equity Coordinator responsible for spearheading the City's ODA compliance initiatives. A recent initiative of the Access and Equity Coordinator has been the preparation of an *accessibility audit* (to be completed in September 2004). It is through this coordinator position and accessibility audit activities that enhanced coordination between municipal departments will be facilitated.

Complementing the *2003 Accessibility Plan* are opportunities for additional policy direction including:

- An expanded partnership with conventional transit including:
 - Opportunities to divert some demand from D.A.R.T.S. to fixed-route services by deploying various demand management strategies including economic incentives (free fares on conventional transit) and address informational barriers (provide travel training and an accessible transit guide); and
 - Deploy the joint use of vehicles which may have D.A.R.T.S. vehicles serving both registered customers as well as the public at large in low density areas or where travel demand does not warrant a large conventional transit bus.
- Partnership with agencies or a more collaborative approach to mobility management.

In order to best serve the public transportation needs of Hamilton's disability and elderly communities, a number of policy considerations (including possible operations and service delivery concepts) were developed. Several ways exist in which the mobility of persons with a disability can be enhanced through changes to existing services and facilities. As previously discussed, paramount in addressing the challenges of the demand for public transportation is that of the *management* of demand. Thus, D.A.R.T.S. services needs to be seen as a complementary service to be provided whenever fixed route service is unable to or not appropriate to meet customers' needs. Fixed route services are to be utilized whenever possible and appropriate.

There are a number of important implications of this relationship between HSR fixed route and D.A.R.T.S. services, namely that of an integrated approach meeting the public transportation needs of the elderly and disability communities, incorporating:

- enhanced service efficiencies;
- integrated service planning and design; and

- development of strategies to maximize the use of fixed route services.

Opportunities specific to operations and service delivery are also driven by the need to be consistent with the prescribed policy framework and the need to provide 'equitable' service delivery including levels of service. Within this context, the following opportunities and subsequent possible strategies are presented.

Based on the market framework data, it is estimated that twenty to thirty percent of the present D.A.R.T.S. registrants could use conventional transit services (at least some of the time), if services were more accessible, user friendly (including training and accessible transit information dissemination), and perceived as providing as much passenger security as the specialized services.

5.2 Partnership with Conventional Transit

In spite of the growth in demand, D.A.R.T.S. services will not need to be expanded appreciably if more is done to ensure that persons with disabilities use HSR fixed route services whenever possible. Presently, the two systems are relatively independent since there have not been enough fully accessible routes to make close integration practical. However, with the gradual conversion of the regular transit fleet to fully accessible, over the next five to seven years, there will be opportunities to use fixed route bus services to meet some of the needs of many D.A.R.T.S. customers. A network of fully-accessible buses combined with cab-type services that circulate through neighbourhoods on a "relaxed" fixed route/fixed schedule basis are one example of service integration. Such a service can deviate on demand for eligible customers, while staying focused on major corridors or transfer centers, such as at the McMaster Medical Center, where all residents, including person with disabilities, can transfer to local accessible bus or specialized services.

Accessible buses would circulate through neighbourhoods connecting senior citizen homes, hospitals, shopping centers and cultural facilities instead of being limited to arterial roads.

Community based services including variations on the local accessible transit routes concept and HSR's Transcab services have proven successful in many applications throughout North America. For example, Madison, Wisconsin, one of the first cities to introduce community bus service, had reported a marginal decline in the number of trips some of their paratransit customers were taking on the Americans with Disabilities Act (ADA) paratransit services but reported that these same customers were in fact generating an increased number of trips as a result of the accessible, spontaneous services being offered. Similarly, community / Pulse services in Toronto have enabled the TTC's Wheel Trans service to influence customers' trip making and travel behaviour, alleviating some of the pressures on the Wheel Trans services.

As a matter of course, it is noted that HSR has been and continues to be receptive to partnerships and integrated approaches that will serve to provide effective and efficient choices for disabled customers.

In considering the interaction between conventional transit services and D.A.R.T.S. services, it is also important to consider fare policies, specifically a policy of providing reduced fares to registered disabled transit users wanting to take advantage of available conventional services, thereby reducing demand on accessible transit services. It is interesting to note that the experience in the specialized or paratransit industry with "free fare" policy is that while there may not be a significant number of trips "off-loaded" from the specialized transit service, registrants typically have increased their trip making rate and have chosen to make additional discretionary trips. This is viewed as an additional benefit of this policy as specialized transit customers choose to "get out and about" more frequently.

5.3 Joint Use of Vehicles

Infrequent rural and low-density urban transit service is sometimes referred to as “lifeline” transit. Lifeline transit services are designed to provide a basic connection to an urban area from smaller rural communities or low-density rural or urban areas where there is insufficient demand to support daily transit service coverage. Lifeline services are intended to serve transit dependent markets.

Opportunity exists for “lifeline” services to the rural and low-density (urban) portions of the city (outside of the urban transit service area) or to provide evening and weekend service within the current urban transit service area.

Lifeline services would be provided on a limited frequency. Evening service could be provided on two-hour headways and weekend services could be limited to one or two morning trips and one or two afternoon/early evening trips. The infrequent nature of lifeline services often limits usefulness and ridership. Lifeline services are a last resort service. More frequently scheduled route deviation services might be more appropriate to low-density service areas of the city.

While there exists limited demand, there is some opportunity to explore the joint use of D.A.R.T.S. vehicles. Such joint use may include the operation of paratransit vehicles on a fixed-route, fixed schedule basis available for the general public, plus route deviation for registered customers requiring door-to-door service.

Additional work is required to pursue this strategy including the development of service standards and operational / service planning. These activities are beyond the scope of the current study.

5.4 Partnership with Agencies

The structure of D.A.R.T.S. services is changing because of a number of externalities including shifts in provincial policy and funding scenarios, impacting on program delivery by several agencies and organizations in Hamilton. There is a need to develop more partnerships with social service agencies (e.g. community living associations), the medical community (hospitals and long term care facilities) and others in order to address group and agency services including the continuity of access to programs and services. Such partnerships will allow a more equitable distribution of the financial burden between customers (or users or clients), agencies, and taxpayers. Specifically, opportunities exist to:

- embrace the concept of mobility management in order to bring a more holistic perspective to transportation service delivery;
- promote group/agency service;
- offer charter type services tailored to meet specific travel needs and requirements; and
- provide service on a cost recovery basis for program related customer group/agency service.

It is important to preserve the integrity of D.A.R.T.S. services for those individuals who have little or no alternate modes of travel. D.A.R.T.S. is by definition, *shared-ride, public transit* for those unable to use accessible conventional HSR transit services. Building on the partnership concept or a collaborative approach to mobility management, there exists an opportunity for D.A.R.T.S. and HSR management to assume responsibility for the facilitation of agency or program specific transportation.

Integral to the success of such an initiative is the ancillary considerations of a public policy decision that D.A.R.T.S. is indeed *shared ride public transit* and that the City's transit budget ought not to be used to subsidize program specific transportation requirements.

Similarly, within a spirit of collaboration, the respective agencies, including the medical community must act upon their recognition that transportation is an integral part of their program delivery. As such, transportation must be included as a budgeted item; financial responsibility to be assumed by *their* funding partners.

Seeking cost-sharing and financial partners is an evolutionary process requiring dialogue and the building of partnerships or collaborative arrangements. As recommended in Section 6, the City through the Public Works Department's Transit Division could initiate discussions with community-based organizations and programs in an effort to *better coordinate client or program specific transportation needs*. This may be accomplished by initially convening a *Working Group* with community-based agencies / organizations whose clients are active users of D.A.R.T.S. Participation in such a *Working Group* might include (as examples only) Participation House, St. Joseph's Villa, Durand Seniors Residence, Seniors Activation Maintenance Program (SAM), PATH Employment Services, Hamilton Convalescent Centre, McMaster Medical Center, etc. The *Working Group* will address transportation as a barrier to program participation or accessing medical services, employment opportunities or education. Similarly, the group will jointly address opportunities for alternate transportation funding. This might include subscription D.A.R.T.S. at a premium fare or the establishment of a medical shuttle at or near a full cost recovery level. This latter scenario might include fixed route, with deviations, fixed scheduled D.A.R.T.S. serving key medical facilities including the McMaster Medical Centre. Under this type of scenario, D.A.R.T.S. registrants might book their medical appointments around the availability of transportation. Further, there may be opportunity to incorporate the use of D.A.R.T.S. in the delivery of non-emergency medical transportation, (including routine patient transfers), within prescribed patient care guidelines.

The development of operational and service delivery solutions (and opportunities for cost-sharing) will be a collaborative effort of HSR and community partners.

One tangible initiatives that can be done in partnership with community organizations is the development of a travel training/mobility program. A travel training program will assist D.A.R.T.S. registrants in the use of accessible conventional transit services, thereby providing additional transportation options for some D.A.R.T.S. customers. Travel training provides potential riders with the skills and information needed to use the fixed route service independently. Instruction can focus on use of the low floor ramps or other access features, route planning, landmark identification, street crossing safety, emergency procedures, stranger safety awareness, appropriate behaviour, or any combination of these. Training can be specific to a particular route or trip or can be designed to develop more general system use skills. Training can be provided by "peers" (individuals with disabilities or elderly persons who know and use the system) or by community service agency or transit agency staff or contractors.

6. RECOMMENDED POLICIES

It is important to identify potential improvements in meeting fiscally responsible mandates in the delivery of D.A.R.T.S. services -- *demand management* measures. These measures are intended to ensure adequate customer and revenue volume for services, or to divert demand from more costly to less costly services using incentives, information, and other voluntary measures.

The following presents a series of recommended policies designed to:

- Preserve the integrity of D.A.R.T.S. services for those persons with a disability, with little or no other transportation alternatives;
- Maximize the utility of the investments made by the City in accessible fixed route transit and accompanying infrastructure; and
- Recognize the legislative guidelines of the Ontario Human Rights Commission and the Ontarians with Disabilities Act.

Complementing the municipally prepared *2003 Accessibility Plan* are opportunities for additional policy direction as identified below.

Recommended Policy
Continue the practice of voluntary payment for persons with mobility devices using low floor buses and incrementally expand this policy in to all D.A.R.T.S registrants wishing to use conventional fixed route services, as a means of reducing total transit system costs.
Implementation
<ul style="list-style-type: none"> • Investigate the feasibility of providing free use of accessible fixed-route service to D.A.R.T.S. registrants. Given the potential benefits, not only in cost savings for the City, but in the further integration and expansion of transportation options available to D.A.R.T.S. service registrants, it is recommended that the administration select a sample of 50 to 100 frequent D.A.R.T.S. users to participate in a 12 month pilot. It is suggested that one half of the sample be requested to maintain a trip diary. • Develop an evaluation framework in order to gauge the effectiveness of this initiative.
Recommended Policy
Pursue service planning activities for the joint use of D.A.R.T.S. vehicles to provide limited D.A.R.T.S. and general public transit services in select areas outside of the urban transit service area and evening and weekend service in select areas within the urban transit service area.
Implementation
<ul style="list-style-type: none"> • Develop service standards and undertake service planning to incorporate the use of D.A.R.T.S. vehicles in the delivery of both conventional and specialized transit services in select areas, and during select times of day and days of the week.
Recommended Policy
Explore opportunities to partner with community-based organizations to improve the delivery of accessible transit services.
Implementation
<ul style="list-style-type: none"> • Initiate discussions with community-based organizations and programs in an effort to better coordinate client or program specific transportation needs. • Convene a <i>Working Group</i>: with community-based agencies / organizations whose clients currently are active users of D.A.R.T.S. • Develop a database of existing community-based agency transportation resources and

agency specific needs.

- Explore opportunities to partner with community based organizations in the development and administration of a travel training program for the City's residents.
- Facilitate the preparation of an *accessible transit guide*, articulating "how to use" instructions for the use of fixed route transit including planning and scheduling a trip, recognition of routes, an understanding of responsibilities and expectations of operator assistance, etc.

7. IMPACTS OF POLICY OPTIONS

7.1 Assessment Using Specific Guiding Principles

The issue of accessibility differs somewhat from other policy areas being considered in the Transportation Master Plan in that policy options are more heavily weighted to social goals than economic and environmental goals. In this section, recommended policies are assessed using specific guiding principles reflecting the unique aspects of accessibility policies. Each policy is also assessed using the more general assessment factors adopted for all policy areas as described in the following section.

























Assessment of policy options is based on select *guiding principles* including:

- Public policy criteria;
- Service quality and effectiveness criteria; and
- Human resource and risk management criteria.

These guiding principles and accompanying criteria are presented in the matrix below. The policy options are then assessed relative to the criteria in terms of the option's ability to "meet", "partially meet" or "does not meet" the principle.

Important: The evaluation is of the individual options and does not evaluate one option relative to another.

Exhibit 7.1: Assessment Of Policy Options

OPERATIONAL OPTIONS  Does Not Meet Principle  Partially Meets Principle  Meets Principle	EXPANSION OF "FREE-FARE" POLICY	SERVICE PLANNING FOR THE JOINT USE OF VEHICLES	COORDINATION OF COMMUNITY-BASED (Agency) TRANSPORTATION
Integration with conventional public transit objectives <ul style="list-style-type: none"> • Mobility for all residents & visitors including those with disabilities • Voluntary measures to "off-load" demand from paratransit to fixed route (mobility management strategies) • Assist in trip planning functions 			
Best meets City / HSR goals and objectives (including Social Vision, Urban Braille & Accessibility Plan)			
Complies with Legislative Requirements <ul style="list-style-type: none"> • ODA 			
Level of Service: <ul style="list-style-type: none"> • Accommodates current & projected demand for D.A.R.T.S. specialized transit service. 			
Desired business results are measurable <ul style="list-style-type: none"> • Monitoring, data management • Management reporting 			
Optimization of paratransit service levels with existing management resources			
Ease of Implementation & Governance			

OPERATIONAL OPTIONS ● Does Not Meet Principle ● Partially Meets Principle ● Meets Principle	EXPANSION OF “FREE-FARE” POLICY	SERVICE PLANNING FOR THE JOINT USE OF VEHICLES	COORDINATION OF COMMUNITY-BASED (Agency) TRANSPORTATION
Ability to react to changing market conditions <ul style="list-style-type: none"> Flexibility: ability to modify level & mode of service delivery 	●	●	●
Minimize labour relation impacts <ul style="list-style-type: none"> Harmonious labour relations 	●	●	●

7.2 General Assessment Factors

Assessment of policy options is based on factors for achieving sustainable growth and development across all of the policy papers developed in this project. They fall under the three major categories of **social, economic and environmental** impacts, and they are described briefly below.

Exhibit 7.2: Assessment Factors

Impact	Acts on	Description (or examples)
Social	Residential communities	Improves quality of life in neighbourhoods
	Safety and security	Reduces collisions; improves personal safety and security
	Ease of implementation & governance	Provides clarity, measurability, accountability
Economic	Development	Attracts employment, capital, optimal use of transportation infrastructure capacity, and future land use
	Land value	Increases land value, or does not decrease land values
	Operating and capital costs	Reduces or defers public and private costs of transportation capital (construction or acquisition of fixed infrastructure and rolling stock) and operations (maintenance, enforcement, delay, fuel, etc.)
	Congestion	Improves traffic flow (or slows deterioration thereof)
Environmental	Air quality	Reduction of Criteria Air Contaminants
	Noise and vibration	Minimizes noise impacts
	Natural environment	Improves water quality, green spaces, flora and fauna etc.

The rating system that will be used to apply these criteria is a visual five-point scale, to reflect a range from strong positive impact to strong negative impact. **(+, +, o, --, --)**

+ Represents the strong positive impact, **o** represents absence of significant impact either way, and **--** represents strong negative impact.

7.3 Summary of General Assessment

The factors described in Section 7.1 are applied to the policy options described in Section 6. The results of a preliminary qualitative assessment using the rating scheme described previously are provided in Exhibit 7.3.

Exhibit 7.3: Impacts of Policy Options

Policy Option	Social			Economic				Environmental		
	Residential Communities	Safety and Security	Ease of Implementation and Governance	Development	Land Value	Operating and Capital Costs	Congestion	Air Quality	Noise and Vibration	Natural Environment
Continue the practice of voluntary payment for persons with mobility devices using low floor buses and incrementally expand this policy in to all D.A.R.T.S registrants wishing to use conventional fixed route services, as a means of reducing total transit system costs.	+	0	-	0	0	+	0	0	0	0
Pursue service planning activities for the joint use of D.A.R.T.S. vehicles to provide limited D.A.R.T.S. and general public transit services in select areas outside of the urban transit service area and evening and weekend service in select areas within the urban transit service area.	+	0	-	+	+	+/-	+	0	-	0
Explore opportunities to partner with community-based organizations to improve the delivery of accessible transit services.	+	0	-	0	+	0	0	0	0	0