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October 6, 2015

TO: Bradford County Transportation Disadvantaged Coordinating Board
FROM: Lynn Godfrey, AICP, Senior Planner
SUBJECT: Meeting Announcement

The Bradford County Transportation Disadvantaged Coordinating Board will meet **Tuesday, October 13, 2015 at 9:30 a.m.** in the City of Starke Commission Meeting Room located at 209 N. Thompson Street in the City of Starke. All Board members are encouraged to attend this meeting.

Attached is the meeting agenda and supporting materials. If you have any questions, please do not hesitate to contact me at extension 110.

Attachments

t:\lynn\td2015\bradford\memos\oct.docx

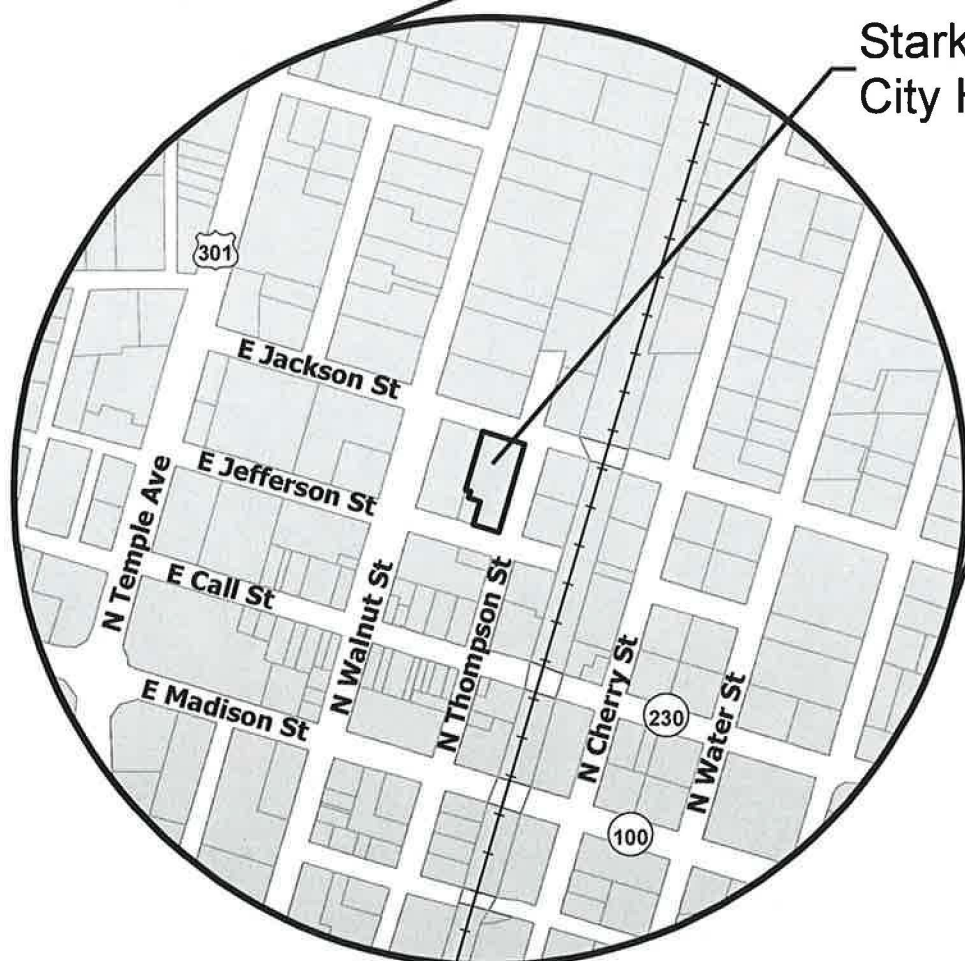
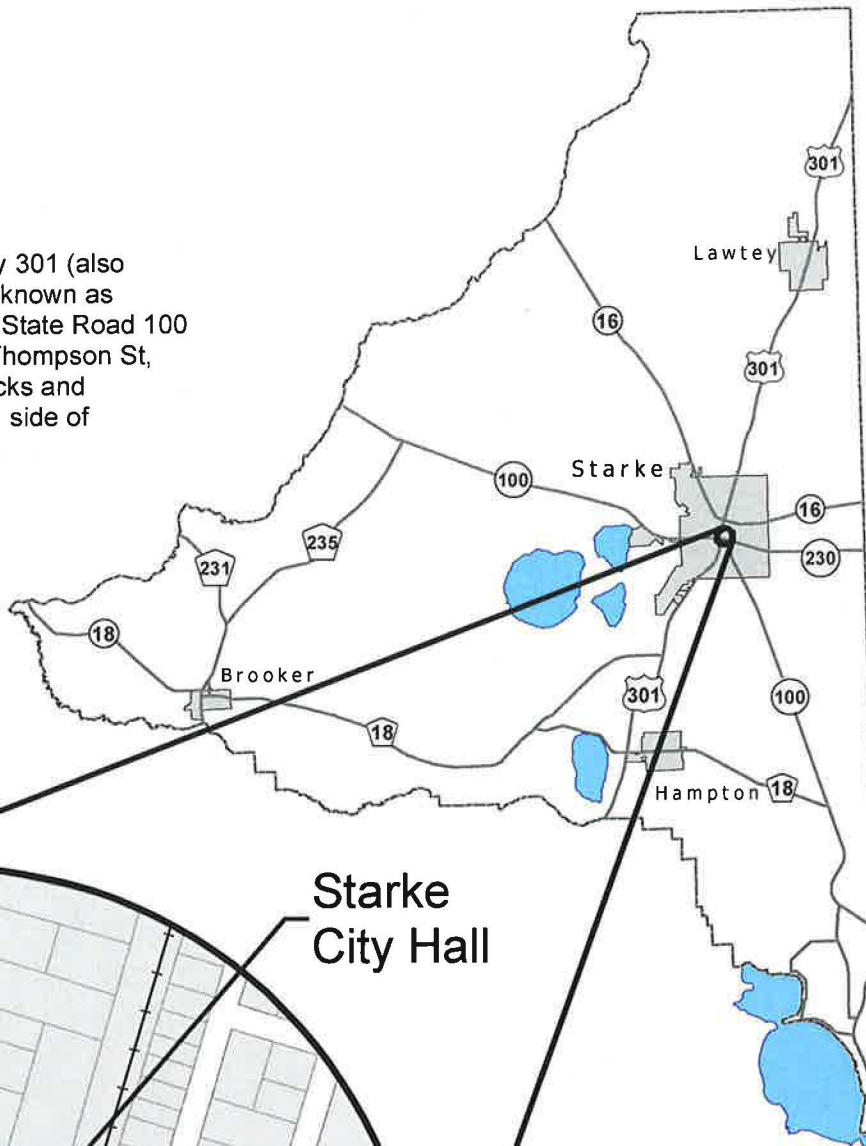
Dedicated to improving the quality of life of the Region's citizens,
by coordinating growth management, protecting regional resources,
promoting economic development and providing technical services to local governments.

Starke City Hall

North Thompson St

Starke, Florida 32091

Directions: From the intersection of U.S. Highway 301 (also known as Temple Ave) and State Road 100 (also known as Madison St) in the City of Starke head, East onto State Road 100 (also known as Madison St) travel two blocks to Thompson St, turn left (North) onto Thompson St, travel two blocks and Starke City Hall will be on the left, on the Western side of North Thompson St.



Starke
City Hall



1 inch = 450 feet





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**BRADFORD COUNTY
TRANSPORTATION DISADVANTAGED COORDINATING BOARD**

MEETING ANNOUNCEMENT AND AGENDA

City Commission Meeting Room
209 N. Thompson Street
Starke, Florida

Tuesday
October 13, 2015
9:30 a.m.

I. BUSINESS MEETING – CALL TO ORDER

A. Introductions

B. Approval of the Meeting Agenda

ACTION REQUIRED

**C. Approval of the July 21, 2015
Minutes**

Page 7

ACTION REQUIRED

II. NEW BUSINESS

A. Elect Vice-Chair

Page 11

ACTION REQUIRED

The Board needs to re-elect Mr. Steve Futch as the Board's Vice Chair or elect a new Vice-Chair

**B. Annual Performance Evaluation
ACTION REQUIRED**

Page 13

The Board needs to review and approve Suwannee River Economic Council's annual performance evaluation

C. Annual Operations Report

Page 73

NO ACTION REQUIRED

The Board needs to review the 2014/15 Annual Operations Report

D. Operations Reports

Page 91

NO ACTION REQUIRED

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promoting economic development and providing technical services to local governments.

III. OTHER BUSINESS

A. Comments

1. Members

2. Citizens

IV. FUTURE MEETING DATES

A. January 12, 2016 at 9:30 a.m.

B. April 12, 2016 at 9:30 a.m.

* Please note that this is a tentative meeting schedule, all dates and times are subject to change.

If you have any questions concerning the enclosed materials, please do not hesitate to contact me at 1-800-226-0690, extension 110.

**BRADFORD COUNTY
TRANSPORTATION DISADVANTAGED COORDINATING BOARD**

MEMBER/REPRESENTING	ALTERNATE/REPRESENTING
Commissioner Danny Riddick Local Elected Official/Chair	Commissioner Tommy Chastain Local Elected Official
Sandra Collins Florida Department of Transportation Grievance Committee Member	Janell Damato Florida Department of Transportation
Amanda Bryant Florida Department of Children and Families Grievance Committee Member	Jaime Sanchez-Bianchi Florida Department of Children and Families
Jeffrey Aboumrad Florida Department of Education Grievance Committee Member	Vacant Florida Department of Education
Vacant Florida Department of Elder Affairs	Vacant Florida Department of Elder Affairs
Pamela Hagley Florida Agency for Health Care Administration	Vacant Florida Agency for Health Care Administration
Linda Tatum Regional Workforce Board	Vacant Regional Workforce Board
Vacant Florida Association for Community Action Term ending June 30, 2017	Vacant Florida Association for Community Action Term ending June 30, 2017
Richard Sapp Public Education	Vacant Public Education
Barbara Fischer Veterans Grievance Committee Member Term ending June 30, 2017	Vacant Veterans Term ending June 30, 2017
Vacant Citizen Advocate Term ending June 30, 2015	Vacant Citizen Advocate Term ending June 30, 2015
Vacant Citizen Advocate - User Term ending June 30, 2015	Vacant Citizen Advocate - User Term ending June 30, 2015
Sherry Ruszkowski Persons with Disabilities Term ending June 30, 2015	Vacant Persons with Disabilities Term ending June 30, 2015
Vacant Elderly Term ending June 30, 2017	Vacant Elderly Term ending June 30, 2017
Vacant Medical Community Term ending June 30, 2016	Vacant Medical Community Term ending June 30, 2016
Vacant Children at Risk Term ending June 30, 2016	Vacant Children at Risk Term ending June 30, 2016
Steve Futch - Vice -Chair Private Transit Term ending June 30, 2016	Vacant Private Transit Term ending June 30, 2016

Note: Unless specified, members and alternates serve at the pleasure of the North Central Florida Regional Planning Council.

**BRADFORD COUNTY
TRANSPORTATION DISADVANTAGED COORDINATING BOARD**

MEETING MINUTES

City Commission Meeting Room
209 N. Thompson Street
Starke, Florida

Tuesday
July 21, 2015
9:30 a.m.

VOTING MEMBERS PRESENT

Commissioner Danny Riddick, Chairman
Jeffrey Aboumrad, Florida Department of Education
Sandra Collins, Florida Department of Transportation
Barbara Fischer, Veterans Representative
Linda Tatum, Regional Workforce Development Board
Sherry Ruskowski, Persons with Disabilities Representative

VOTING MEMBERS ABSENT

Steve Futch, Private Transit Representative, Vice-Chair
Richard Sapp, Public Education Representative
Amanda Bryant, Florida Department of Children and Families

OTHERS PRESENT

Cassey Bennett, Communities in Schools
Christine Eason-Louton, Four Corners Transportation Associates
Matthew Pearson, Suwannee River Economic Council

STAFF PRESENT

Lynn Godfrey, North Central Florida Regional Planning Council

I. BUSINESS MEETING CALL TO ORDER

Chairman Riddick called the meeting to order at 9:30 a.m.

A. Introductions

Chairman Riddick asked everyone to introduce themselves.

B. Approval of the Meeting Agenda

ACTION: Sandra Collins moved to approve the meeting agenda. Sherry Ruskowski seconded; motion passed unanimously.

C. Approval of the April 14, 2015 Minutes

ACTION: Linda Tatum moved to approve the April 14, 2015 meeting minutes. Barbara Fischer seconded; motion passed unanimously.

II. NEW BUSINESS

A. Bradford County Transportation Disadvantaged Service Plan Amendment

Ms. Lynn Godfrey, North Central Florida Regional Planning Council Senior Planner, stated that the Fiscal Year 2015/16 service rates charged by Suwannee River Economic Council must be approved by the Board and included in the Bradford County Transportation Disadvantaged Service Plan. She said the rates are included in the meeting materials for the Board to review and approve.

The Board reviewed the Fiscal Year 2015/16 service rates.

ACTION: Sandra Collins moved to amend the Bradford County Transportation Disadvantaged Service Plan to include the Fiscal Year 2015/16 service rates. Linda Tatum seconded; motion passed unanimously.

B. Bylaws

Ms. Godfrey stated that the Board needs to review and approve the Bylaws. She said staff is recommending an amendment to the Bylaws to allow 40 percent of voting members present to constitute a quorum.

The Board reviewed the Bylaws.

ACTION: Linda Tatum moved to approve the Bylaws as amended. Barbara Fischer seconded; motion passed unanimously.

C. Grievance Procedures

Ms. Godfrey stated that the Board needs to review and approve the Grievance Procedures. She said staff recommends deleting the reference to the Medicaid Program Grievance System since Medicaid Program transportation is no longer coordinated through Florida's Coordinated Transportation System.

ACTION: Linda Tatum moved to approve the Grievance Procedures as amended. Sherry Ruszkowski seconded; motion passed unanimously.

D. Appoint Grievance Committee Member

Chair Riddick appointed Ms. Linda Tatum to the Grievance Committee.

E. 2014/15 Compliance Monitoring Report

Ms. Godfrey stated that the Florida Commission for the Transportation conducted a compliance monitoring of Suwannee River Economic Council on May 29, 2015. She said the monitoring report is included in the meeting packet for the Board's review.

The Board reviewed the monitoring report.

G. Operations Reports

Ms. Godfrey stated that the operations reports for the first quarter of 2015 are included in the meeting packet for the Board's review. She said there is no action required on this agenda item.

The Board reviewed the operations reports.

III. OTHER BUSINESS

A. Comments

1. Members

There were no member comments.

2. Citizens

Ms. Christine Eason Louton said she represents Four Corners Transportation Associates and they represent individuals in the Melrose, Florida area who are in need of transportation. She said the Four Corners Transportation Associates is organizing a meeting in August of local elected officials and transportation providers to discuss the availability of transportation services in the Melrose area and discuss additional transportation opportunities.

IV. FUTURE MEETING DATES

Chairman Riddick stated that the next meeting of the Board will be held Tuesday, October 13, 2015 at 9:30 a.m.

ADJOURNMENT

The meeting adjourned at 10:30 a.m.

Coordinating Board Chair

Date



II.A
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October 6, 2015

TO: Bradford County Transportation Disadvantaged Coordinating Board
FROM: Lynn Godfrey, AICP, Senior Planner
SUBJECT: Elect Vice-Chair

RECOMMENDATION

Re-elect Mr. Steve Futch as the Board's Vice-Chair or elect a new Vice-Chair.

BACKGROUND

Chapter I. F. of the Board's Bylaws requires the Board to hold an organizational meeting each year for the purpose of electing a Vice-Chair. The Vice-Chair shall serve a term of one year starting with the next meeting. In the event of the Chair's absence, the Vice-Chair shall assume the duties of the Chairperson and conduct the meeting.

If you have any questions concerning this matter, please contact me at extension 110.

t:\lynn\td2015\bradford\memos\vicechair.docx

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October 6, 2015

TO: Bradford County Transportation Disadvantaged Coordinating Board

FROM: Lynn Godfrey, AICP, Senior Planner

SUBJECT: Annual Performance Evaluation

RECOMMENDATION

Approve the Suwannee River Economic Council's annual performance evaluation.

BACKGROUND

The Board is required to annually evaluate the transportation services provided by Suwannee River Economic Council. Attached is Suwannee River Economic Council's draft annual performance evaluation. If you have any questions concerning the attached evaluation, please contact me at extension 110.

Attachment

t:\lynn\td2015\bradford\memos\anneval.docx

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by coordinating growth management, protecting regional resources,
promoting economic development and providing technical services to local governments.

COMMUNITY TRANSPORTATION COORDINATOR EVALUATION WORKBOOK

Florida Commission for the



Transportation Disadvantaged

Community Transportation Coordinator: Suwannee River Economic Council

County: Bradford

Address: P.O. Box 70, Live Oak, FL 32060

Contact: Matthew Pearson, Executive Director Phone: 386-362-4115

Review period: July 1, 2014 - June 30, 2015

Community Transportation Coordinator Annual Performance Evaluation

Approved by the
Bradford County
Transportation Disadvantaged Coordinating Board

2009 NW 67th Place
Gainesville, FL 32653-1603
www.ncfrpc.org/mtpo
352.955.2000

Danny Riddick, Chair

with Assistance from



North Central Florida Regional Planning Council
2009 NW 67th Place
Gainesville, FL 32653-1603
www.ncfrpc.org
352.955.2200

October 13, 2015

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I. FINDINGS AND RECOMMENDATIONS

A. General Information

Areas of Noncompliance: None

Recommendations: None

Timeline for Compliance: None

B. Chapter 427, F.S.

Areas of Noncompliance: None

Recommendations: None

Timeline for Compliance: None

C. Rule 41-2, F.A.C.

Areas of Noncompliance: None

Recommendations: None

Timeline for Compliance: None

D. Bus/Van Ride

Areas of Noncompliance: Driver not wearing identification, TD Helpline phone number not posted in vehicle.

Recommendations: Drivers should always wear identification, post TD Helpline phone number in vehicles.

Timeline for Compliance: October 31, 2015

E. Surveys (see attachment)

Areas of Noncompliance: None

Recommendations: None

Timeline for Compliance: None

GENERAL QUESTIONS

1. What was the designation date of the Community Transportation Coordinator?
7/01/12
2. What is the complaint process?
See attached complaint process.
3. Does the community transportation coordinator have a complaint form?
 Yes (attached) No
4. Does the form have a section for resolution of the complaint?
 Yes No
5. Is a summary of complaints given to the Transportation Disadvantaged Board on a regular basis?
 Yes No
6. When is the dissatisfied party referred to the Florida Commission for the Transportation Disadvantaged Helpline?

If the Transportation Director is unable to resolve a complaint, the complainant will be referred to the Transportation Disadvantaged Helpline
7. When a complaint is forwarded from the Transportation Disadvantaged Helpline, is the complaint entered into the local complaint file/process?
 Yes No
8. Does the Community Transportation Coordinator provide written rider/beneficiary information or brochures to inform riders/beneficiaries about transportation disadvantaged services?
 Yes (attached) No
9. Does the rider/ beneficiary information or brochure list the Transportation Disadvantaged Helpline phone number?
 Yes No
10. Does the rider/ beneficiary information or brochure list the complaint procedure?
 Yes No
11. What is the eligibility process for Transportation Disadvantaged sponsored riders?
Individuals needing transportation assistance from Florida's Transportation Disadvantaged Program must complete an eligibility application (attached).
13. Does the Community Transportation Coordinator have a contract or agreement with the Regional Workforce Board?
 Yes No
14. What innovative ideas have you implemented in your coordinated system?
Providing and administering "regional" transportation service in four counties saves money. Our service rates are lower compared to other Community Transportation Coordinators in our region.

15. Are there any areas where coordination can be improved?
Transportation services purchased with local, state or federal funds should be purchased through Florida's Transportation Disadvantaged Program including the Medicaid Non-Emergency Medical Transportation Program.
16. What barriers are there to the coordinated system?
The Medicaid Non-Emergency Medical Transportation Program is fragmented and inefficient.
17. Are there any areas that the Community Transportation Coordinator feels the Florida Commission for the Transportation Disadvantaged should be aware of or assist with?
No
18. What funding agencies does the Florida Commission for the Transportation Disadvantaged need to work closely with in order to facilitate a better coordinated system?
Florida Agency for Health Care Administration and CareerSource Florida
19. How are you marketing the voluntary dollar?
No marketing system in place.

Complaint Process

All complaints received either written or verbal should be forwarded to the Director of Transportation. This includes complaints that have already been resolved by the dispatcher or driver.

Complaint form (attached) will be completed and resolution of complaint documented.

Complaints are files and kept to ensure proper tracking of complaints.

Complaints will be sent quarterly by County to the NCFPRC for reporting to the Local Coordinating Boards. Complaint totals will be submitted in the Annual Operating Report.

If resolution of complaint cannot be made by the Director of Transportation, the TD Helpline information should be shared with the rider.

SREC Transportation Complaint Form

Client Name: _____

Date: _____

Description of Incident:

Complaint Resolution:

Staff Signature: _____


Director of Transportation Signature: _____

SREC Transportation Complaint Form

Client Name: ?
Date: 5/14/14

Description of Incident:
Received phone call from Truck Driver with
complaint about one of SREC vans following
to close. (Tailgating) - Dixie County CR 351
After he had passed him. 11:00 am 5/14/14

Complaint Resolution:
Pulled Trip manifest to determine which
driver would have been in that
area on that date & time. Spoke
with driver about complaint and discussed
with him the safety concerns of following
to close to another vehicle.

Staff Signature: _____
Director of Transportation Signature: 

Suwannee River Economic Council, Inc.

Established
1966



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Administrative Office
Post Office Box 70
1171 Nobles Ferry Road, Bldg #2
Live Oak, Florida 32064
(386) 362-4115 Voice/TDD
mattpearson@suwanneec.net
Affirmative Action,
Fair Housing Agency

SREC's Vision

Our customers embrace the challenge to rise above the perils of poverty, and discover within themselves the courage and strength to succeed.

Suwannee River Economic Council's mission is to embrace a community full of potential; and to educate and motivate present and future generations to discover and realize the dream of a comfortable and productive lifestyle.

**Bradford County
Programs and Services**

For information on our Aging Programs:

- Alzheimer's Disease Initiative
- Community Care for the Elderly
- Emergency Home Energy Assistance for the Elderly
- Home Care for the Elderly
- Title III-B, C-1, C-2, IIIE

Bradford Meal Site
Hours: M - F 11:30 a. m. - 1:30 p. m.
1210 Andrews Circle
Starke, Florida



Mount Zion A.M.E. Church
Hours: M - F 11:30 a. m. - 1:30 p. m.
2229 Lake Street - Hwy 225 East 301
Lawtey, Florida

Mount Pisgah A.M.E.
Hours: Tuesday 10:30 a.m. - 2:00 p.m.
102 SE 44th Avenue
Starke, Florida

Contact
Bradford Service / Senior Center
1210 Andrews Circle
Starke, Florida 32091
(904) 964-6696 Voice/TDD

**Programs, Services, Eligibility
Aging Programs**

Alzheimer's Disease Initiative (ADI)

- Respite

Eligibility: Diagnosis as possible Alzheimer's or memory disorder.

Community Care for the Elderly (CCE)

- Case Management, Emergency Alert Response, Homemaker, Home Delivered Meals, Personal Care, and Respite

Eligibility: 60+ years of age, frail and elderly.

Emergency Home Energy Assistance for the Elderly (EHEAP)

- Assistance with utility bills, supply blankets, heaters and fans.

Eligibility: 60+ years of age with household income after specified exclusions of no more than 150% of the federally established poverty income guidelines for the household size.

Home Care for the Elderly (HCE)

- Case Management, Basic Subsidy (Caregiver Allowance), Special Subsidy

Eligibility: 60+ years of age. Asset/Income limitations, requires 24 hour care care by qualified caregiver.

**Programs, Services, Eligibility
Aging Programs**

Title III-B, C-1, C-2, IIIE

- Congregate Meal Sites, Health Support, Homemaker, Home Delivered Meals, Intake, Nutrition Education, Outreach, Respite, Screening, Telephone Reassurance, and Transportation
Eligibility: 60+ years of age

Programs, Services, Eligibility Emergency Assistance/Self Sufficiency

Care To Share

- Assist with utilities.

Eligibility: Florida Power & Light customers only. Must reside in FPL service area; Household income no more than 125% of poverty guidelines and documented emergency.

Community Services Block Grant (CSBG)

- Information & Referral; Family Self-Sufficiency; Case Management; Support Services; Application Assistance to other Social Service Agencies.

Eligibility: Income guidelines 125% of U.S. poverty guidelines and a documented emergency.

Emergency Food & Shelter Program (EFSP)

- Emergency assistance for food and housing.

Eligibility: Household income no more than 125% of the federally established income guidelines and certain asset limitations.

Low Income Home Energy Assistance Program

- Assistance with utility bills and utility crisis resolution.

Eligibility: Household income of no more than 150% of the federally established income guidelines and certain asset limitations; resident of the county.

Project Share

- Assist with utility bills.

Eligibility: Clay Electric Coop. customers only. Must reside in CEC service area. Household income no more than 125% of poverty guidelines and documented emergency.

Salvation Army

- Assist with utilities, rent/mortgage, food, medication and temporary housing.

Eligibility: Household income no more than 125% of poverty guidelines and documented emergency.

Programs, Services, Eligibility Housing/Transportation Programs

Weatherization Programs

- Minor home repairs to reduce infiltration of air and energy consumption.

Eligibility: Income guidelines; 200% of U.S. poverty guidelines based on family size; owner, renter, site built or mobile home eligible.

Transportation

- Transport elderly and disadvantaged to the doctor, medical facilities, meal sites, and shopping.

Eligibility: Income guidelines, Medicaid, disabled.

For reservations, scheduling, complaints/commendations and/or questions call (904) 964-6696, ext. 25.

Any complaints not resolved can be forwarded to the Director of Transportation at (386) 362-4115, ext. 241.

For Program information or complaints/commendations call TD Helpline at (800) 983-2435.

- Medicaid Broker Service
Transport Medicaid eligible clients to the doctor, medical facilities, meals sites and shopping.

Eligibility: Income guidelines, Medicaid Eligible

Any complaints not resolved can be forwarded to the Director of Transportation at (386) 362-4115, ext. 241.



*We Do Business in Accordance With the
Federal Fair Housing Law
(The Fair Housing Amendments Act of 1988)*

*It is illegal to discriminate against any person because
of race, color, religion, sex, handicap, familial status,
or national origin.*

**Bradford County
Programs and Services**

For information on:

Emergency Assistance/Self Sufficiency

- Care To Share
- Community Services Block Grant (CSBG)
- Emergency Food & Shelter Program
- Low Income Home Energy Assistance Program
- Project Share
- Salvation Army

Housing

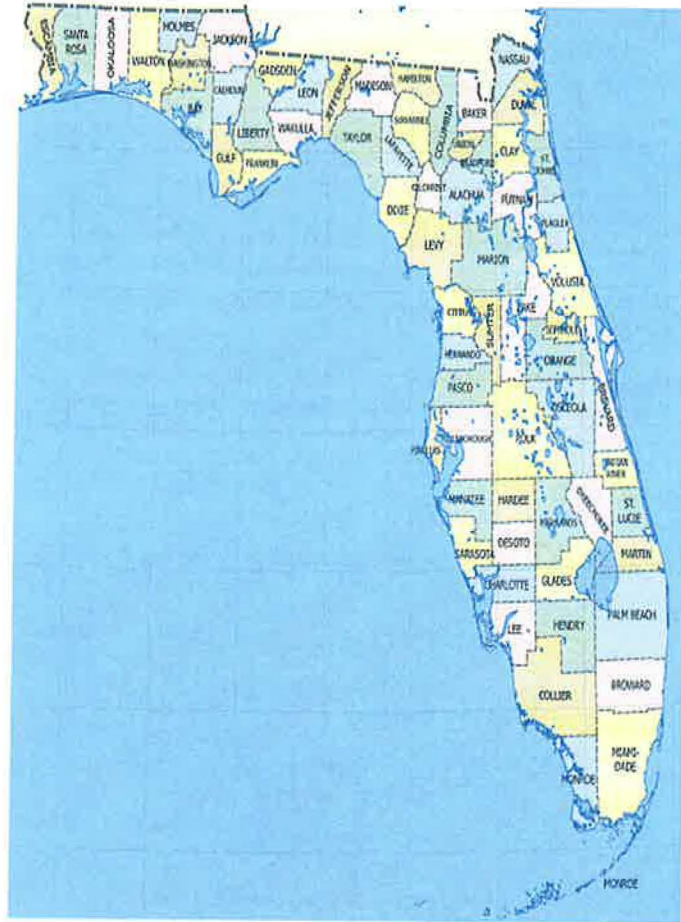
- Weatherization

Transportation

- Transportation Disadvantage Trust Fund
- Medicaid
- Medicaid Brokers
- Title IIIB

Contact
Bradford Service / Senior Center
1210 Andrews Circle
Starke, Florida 32091
(904) 964-6696 Voice/TDD

**Florida State Map
67 Counties**



Bradford County Brochure
Revised 07/29/14
Accessible formats are available upon request

Transportation Disadvantaged BENEFICIARY INTAKE FORM

SECTION 1 - DETERMINATION OF ELIGIBILITY

NAME: [REDACTED] ADDRESS: [REDACTED] CITY: TRENTON STATE: FL ZIP: 32683 GILCHRIST

SEX: M SSK: [REDACTED] TDD # ()

EMERGENCY CONTACT: [REDACTED] RELATIONSHIP: WIFE TELEPHONE: [REDACTED]

NAME	RELATIONSHIP	AGE	DRIV. LIC (Y/N)	TYPE OF VEHICLE
[REDACTED]	<u>WIFE</u>	<u>47</u>	[REDACTED]	<u>Jeep</u>

SECTION 2 - AVAILABILITY OF SUITABLE MODE OR TRANSPORTATION TO OTHER COMMUNITY LOCATIONS

Yes/No

- NO Do you have a valid Florida Driver's License? Year: _____ Model: _____
 Yes: _____ DL#: _____
 If nbl, why? can't see well enough
- Y Could you drive your car to medical appointments? Name: _____
 If not, why? Vehicle not reliable on long dri.
- N Could they transport you to medical appointments? Name: _____
 If not, why? _____
- N Could they transport you to medical appointments? Name: _____
 If not, why? _____
- N Do you live in a facility that provides transportation? Name: _____
 Could this facility transport you to medical appointments? If not, why? _____

12. Please list all Hospitals, Doctors and Medical Facilities that you visit on a regular basis:

HOSPITAL/DOCTOR/FACILITY	TYPE OF TREATMENT	NUMBER OF MONTHLY VISITS	REASON FOR VISIT
<u>SHANDS</u>	<u>7</u>	<u>2</u>	<u>until rear brake decal</u>

SECTION 3 - AVAILABILITY OF FEDERALLY FUNDED OR PUBLIC TRANSPORTATION

Yes/No

- NO Do you live on a bus route? _____
- No _____ If Yes, please describe them below.
- No _____ If Yes, please describe them below.

SECTION 4 - SPECIAL NEEDS
Please check or list any special needs:

Powered Wheelchair
 Cane
 Stretcher
 Respiator
 Manual Wheelchair
 Service Animal
 Walker

Other: _____

SECTION 5 - CERTIFICATION AND ACKNOWLEDGEMENT
I understand and affirm that the information provided in this application for CTD Medicaid Non-Emergency Transportation (NET) services is true and correct, to the best of my knowledge, and will be kept confidential and shared only with medical and transportation professionals involved in evaluating and determining my needs and eligibility for transportation to and from Medicaid eligible services and appointments. I understand that providing false or misleading information, or making fraudulent claims, or making false statements on behalf of others constitutes a felony under the laws of the State of Florida.

APPLICANT SIGNATURE: _____ DATE: 7/3/14

PLEASE RETURN THIS FORM TO:
Suwannee River Economic Council, Inc.
 314 NE 255th St, Cross City, FL 32628
 Or PO Box 953, Cross City, FL 32628
 352-498-7366

SECTION 6 - RESULTS OF INTERVIEW
DO NOT WRITE IN THIS SPACE - OFFICIAL OFFICE USE ONLY

NEW ELIGIBILITY APPLICATION: _____ (Y/N)
 REDETERMINATION: _____ (Y/N)
 DATE RECEIVED: _____
 REVIEWED BY: _____

 LETTER: _____ (Y/N)

 PCA NEEDED: _____ (Y/N)

No. 8197 P. 4

Aug. 31. 2015 9:22AM Suwannee River Economic Council

COMPLIANCE WITH CHAPTER 427, FLORIDA STATUTES

1. Are the Community Transportation Coordinator subcontracts uniform?
 Yes No
 2. Is the Florida Commission for the Transportation Disadvantaged standard contract utilized?
 Yes (attached) No
 3. Do the contracts include performance standards for the transportation operators and coordination contractors?
 Yes No
 4. Do the contracts include the proper language concerning payment to subcontractors?
 Yes No
 5. Were the following items submitted on time?

Annual Operating Report
 Yes No

Memorandum of Agreement
 Yes No

Transportation Disadvantaged Service Plan
 Yes No

Transportation Disadvantaged Trust Fund Grant Application
 Yes No

Other grant applications
 Yes No
 6. Does the Community Transportation Coordinator monitor its subcontractors and how often is monitoring conducted?
 Yes No Not applicable
 7. Is a written report issued to the operator?
 Yes No Not applicable
 8. What type of monitoring does the Community Transportation Coordinator perform on its coordination contractors and how often is it conducted?
Not applicable
-

STATE OF FLORIDA
COMMISSION FOR THE TRANSPORTATION DISADVANTAGED
STANDARD COORDINATION/OPERATOR CONTRACT

REVISED JAN 8 '12

THIS CONTRACT is entered into between the COMMUNITY TRANSPORTATION COORDINATOR, Suwannee River Economic Council, Inc., designated pursuant to Chapter 427, F.S., to serve the transportation disadvantaged for the community that includes the entire area of Bradford county, and hereinafter referred to as the "Coordinator" and Sunshine Industries, hereinafter referred to as the "Agency/Operator". The terms and conditions of this Contract are effective January 23, 2012 and will continue through January 22, 2013.

WHEREAS, the Coordinator is required, under Rule 41-2, F.A.C., Contractual Arrangements, to provide and/or enter into where cost effective and efficient; to enter into subcontract(s) or to broker transportation services to transportation operators; and

WHEREAS, transportation disadvantaged funds includes any local government, state or federal funds that are for the transportation of transportation disadvantaged; and

WHEREAS, the Coordinator desires to contract with the Agency/Operator for the provision of transportation services for the transportation disadvantaged; and

WHEREAS, the Coordinator believes it to be in the public interest to provide such transportation services through the Agency/Operator for the residents of the service area who are clients of the Agency/Operator; and

WHEREAS, the Agency/Operator will provide the Coordinator the opportunity to develop a proposal for any new transportation services needed; and

WHEREAS, the Agency/Operator, in an effort to coordinate available resources, will make available transportation services to the Coordinator.

WHEREAS, this Contract allows for the provisions of transportation services to be provided by the Agency/Operator, in accordance with Chapter 427, F.S., Rule 41-2, F.A.C., and the most current Community Transportation Coordinator policies.

NOW, THEREFORE, in continuation of the mutual covenants, promises and representations herein, the parties agree as follows:

THE AGENCY/OPERATOR SHALL:

- A. Provide services and vehicles according to the conditions specified in Attachment I.
- B. Coordinate available resources and make available transportation services to the Coordinator. Such services shall be provided in accordance with Attachment I.
- C. Every three (3) months, submit to the Coordinator a Quarterly Year to Date Operating Report (from the Annual Operating Report) detailing demographic, operational and financial data regarding coordination activities in the designated service area. The report shall be prepared on forms provided by the Commission for the Transportation Disadvantaged, hereinafter Commission, and according to the instructions for the forms.
- D. Comply with audit and record keeping requirements by:
 - 1. Utilizing the Commission recognized Chart of Accounts defined in the Transportation Accounting Consortium Model Uniform Accounting System for Rural and Specialized Transportation Providers (uniform accounting system) for all transportation disadvantaged accounting and reporting purposes. Agencies/Operators with existing and equivalent accounting systems are not required to adopt the Chart of Accounts in lieu of their existing Chart of Accounts but shall prepare all reports, invoices, and fiscal documents relating to the transportation disadvantaged functions and activities using the chart of accounts and accounting definitions as outlined in the above referenced manual.
 - 2. Maintaining and filing with the Coordinator such progress, fiscal, inventory and other reports as the Coordinator may require during the period of this contract.
 - 3. By reserving to the Coordinator, the right to conduct finance and compliance audits at any time. Such audits conducted by the Coordinator will be at the expense of the Coordinator.
- E. Retain all financial records, supporting documents, statistical records, and any other documents pertinent to this Agreement for a period of five (5) years after termination of this Agreement. If an audit has been initiated and audit findings have not been resolved at the end of the five (5) years, the records shall be retained until resolution of the audit findings. The Agency/Operator shall assure that these records shall be subject to inspection, review, or audit at all reasonable

times by persons duly authorized by the Coordinator or Commission or this Agreement. The Commission and the Coordinator shall have full access to and the right to examine any of the records and documents during the retention period.

F. Comply with Safety Requirements by:

1. Complying with Section 341.061, F.S., and Rule 14-90, F.A.C., concerning System Safety or complying with Chapter 234.051, F.S., regarding school bus safety requirements for those services provided through a school board;
2. Assuring compliance with local, state, and federal laws, and Commission policies relating to drug testing, and;
3. Complying with Coordinator's System Safety Program Plan (SSPP) for designated service area.

G. Comply with Commission insurance requirements by maintaining at least minimum liability insurance coverage in the amount of \$100,000 for any one person and \$300,000 per occurrence, general liability insurance rate of \$100,000 each accident and disease, and a \$1,000,000 policy limit in effect at all times during the existence of this Contract. Upon the execution of this Contract, the Agency/Operator shall add the Coordinator as an additional named insured to all insurance policies covering vehicles transporting the transportation disadvantaged. In the event of any cancellation or changes in the limits of liability in the insurance policy, the insurance agent or broker shall notify the Coordinator. The Agency/Operator shall furnish the Coordinator written verification of the existence of such insurance coverage prior to the execution of this Contract. School board vehicle insurance coverage shall be in accordance with Section 234.03, F.S. and 234.211, F.S. Insurance coverage in excess of \$1 million per occurrence must be approved by the Coordinator and/or the local Coordinating Board before inclusion in this contract or in the justification of rates and fare structures, s. 41-2.006(1), FAC..

H. Safeguard information by not using or disclosing any information concerning a user of services under this Agreement for any purpose not in conformity with the local, state and federal regulations, including but not limited to 45 CFR, Part 205.50, except upon order of a court of competent jurisdiction, written consent of the recipient, or his/her responsible parent or guardian when authorized by law.

I. Protect Civil Rights by:

1. Complying with Title VI of the Civil Rights Act of 1964 and Section 504 of the

Rehabilitation Act of 1973, as amended. The Agency/Operator gives this assurance in consideration of and for the purpose of obtaining federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other federal financial assistance to programs or activities receiving or benefiting from federal financial assistance and agreeing to complete a Civil Rights Compliance Questionnaire if so required by the Coordinator. Agency/Operator shall also assure compliance with:

- a. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C. 2000d et seq., which prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving or benefiting from federal financial assistance.
 - b. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on the basis of disability in programs and activities receiving or benefiting from federal financial assistance.
 - c. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits discrimination on the basis of sex in education programs and activities receiving or benefiting from federal financial assistance.
 - d. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from federal financial assistance.
 - e. The Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from federal financial assistance.
 - f. All regulations, guidelines, and standards lawfully adopted under the above statutes.
 - g. The Americans with Disabilities Act of 1990, as it may be amended from time to time.
2. Agreeing that compliance with this assurance constitutes a condition of continued receipt of or benefit from federal financial assistance, and that it is binding upon the Agency/Operator, its successors, subcontractors, transferees, and assignees for the period during which such assistance is provided. Assuring that operators, subcontractors, sub grantees, or others with whom the Coordinator arranges to provide services or benefits to participants or employees

in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the above statutes, regulations, guidelines, and standards. In the event of failure to comply, the Agency/Operator agrees that the Coordinator may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other appropriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.

J. Agency/Operator's obligation to indemnify, defend, and pay for the defense or at the Coordinator's option, to participate and associate with the Coordinator in the defense and trial of any claim and any related settlement negotiations, shall be triggered by the Coordinator's notice of claim for indemnification to the Agency/Operator. Agency/Operator's inability to evaluate liability or its evaluation of liability shall not excuse the Agency/Operator's duty to defend and indemnify within seven days after such notice by the Coordinator is given by registered mail. Only an adjudication or judgment after the highest appeal is exhausted specifically finding the Coordinator solely negligent shall excuse performance of this provision by the Agency/Operator. Agency/Operator shall pay all costs and fees related to this obligation and its enforcement by the Coordinator. The Coordinator's failure to notify Agency/Operator of a claim shall not release Agency/Operator of the above duty to defend.

K. Comply with all standards and performance requirements of the:

1. The Commission for the Transportation Disadvantaged (Attachment II);
2. The local Coordinating Board approved Transportation Disadvantaged Service Plan and;
3. Any entities that purchase service.

Failure to meet the requirements or obligations set forth in this Contract, and performance requirements established and monitored by the Coordinating Board in the approved Transportation Disadvantaged Service Plan shall be due cause for non-payment of reimbursement invoices until such deficiencies have been addressed or corrected to the satisfaction of the Coordinator.

L. Provide Corrective Action. A corrective action notice is a written notice to the Agency/Operator that the Agency/Operator is in breach of certain provisions of this Contract and that correction is required. Any corrective action notice will specify a reasonable time for corrective action to be completed. The Agency/Operator agrees to implement the Corrective Action specified in the notice and provide written documentation to substantiate the implementation of the Corrective Action.

- M. All contracts, subcontracts, coordination contracts will be reviewed annually by the Coordinator and local Coordinating Board for conformance with the requirements of this Contract.
- N. Return to the Coordinator any overpayments due to unearned funds or funds disallowed pursuant to the terms of this Contract that were disbursed to the Agency/Operator by the Coordinator. The Agency/Operator shall return any overpayment within thirty (30) calendar days after either discovery by the Agency/Operator, or notification of the Agency/Operator by the Coordinator or entity purchasing transportation, whichever is earlier. In the event that the Coordinator first discovers an overpayment has been made, the Coordinator will notify the Agency/Operator by letter of such a finding. Should repayment not be made in a timely manner, the Coordinator or purchasing entity will charge interest after thirty (30) calendar days after the date of notification or discovery, or the Coordinator will deduct said amount from future invoices.
- O. In performing this Contract, the Agency/Operator shall not discriminate against any employee or applicant for employment because of race, age, disability, creed, color, sex or national origin. Such action shall include, but not be limited to, the following: employment upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The Agency/Operator shall insert the foregoing provision modified only to show the particular contractual relationship in all its contracts in connection with the development of operation of the Contract, except contracts for the standard commercial supplies or raw materials, and shall require all such contractors to insert a similar provision in subcontracts relating to the performance of this Contract, except subcontracts for standard commercial supplies or raw materials. The Agency/Operator shall post, in conspicuous places available to employees and applicants for employment for Project work, notices setting forth the provisions of the nondiscrimination clause.
- P. By execution of this Contract, the Agency/Operator represents that it has not paid and, also, agrees not to pay, any bonus or commission for the purpose of obtaining an approval of its application for the financing hereunder. Funds disbursed to the Agency/Operator under this Contract shall not be expended for the purpose of lobbying the Legislature, the judicial branch, or a state agency.

THE COORDINATOR'S DUTIES:

- A. Recognize the Agency/Operator as described in Chapter 427, F.S., and Rule 41-2, F.A.C.
- B. Insure that entities with transportation disadvantaged funds will purchase transportation disadvantaged services through the coordinated system.
- C. At a minimum, annually monitor the Agency/Operator for insurance, safety and reporting requirements, pursuant to Chapter 427, F.S., and Rule 41-2, F.A.C. The information contained in the Annual Operating Report must be collected, at a minimum, quarterly from the Agency/Operator.

THE OPERATOR AND COORDINATOR FURTHER AGREE:

- A. Nothing in the Contract shall require the Coordinator to observe or enforce compliance with any provision thereof, perform any other act or do any other thing in contravention of any applicable state law. If any provision of the Contract is found by a court of law to violate any applicable state law, the purchasing entity will at once notify the Coordinator in writing in order that appropriate changes and modification may be made by the Coordinator and the Agency/Operator to the end that the Agency/Operator may proceed as soon as possible with the provision of transportation services.
- B. If any part or provision of this Contract is held invalid, the remainder of this Contract shall be binding on the parties hereto.
- C. Termination Conditions:
 - 1. Termination at Will - This Contract may be terminated by either party upon no less than thirty (30) days notice, without cause. Said notice shall be delivered by certified mail, return receipt required, or in person with proof of delivery.
 - 2. Termination due to Lack of Designation - In the event that the Coordinator so designated by the local Coordinating Board and approved by the Commission, loses its designation, this contract is terminated immediately upon notification to the Agency/Operator. Notice shall be delivered by certified mail, return receipt requested, or in person, with proof of delivery. Notice shall be effective upon receipt.
 - 3. Termination due to Disapproval of Memorandum of Agreement - In the event that the Commission does not accept and approve any contracted transportation

rates listed within the Memorandum of Agreement, this Contract is terminated immediately upon notification to the Agency/Operator. Notice shall be delivered by certified mail, return receipt requested, or in person, with proof of delivery. Notice shall be effective upon receipt.

4. Termination due to Lack of Funds - In the event funds to finance this contract become unavailable, the Coordinator may terminate the contract with no less than twenty-four (24) hours written notice to the Agency/Operator. Notice shall be delivered by certified mail, return receipt requested, or in person, with proof of delivery. Notice shall be effective upon receipt. The Coordinator shall be the final authority as to the availability of funds.
 5. Termination for Breach - Unless the Agency/Operator's breach is waived by the Coordinator in writing, the Coordinator may, by written notice to the Agency/Operator, terminate this Contract upon no less than twenty-four (24) hours notice. Notice shall be delivered by certified mail, return receipt requested, or in person with proof of delivery. Waiver by the Coordinator of breach of any provision of this Contract shall not be deemed to be a waiver of any other breach and shall not be construed to be a modification of the terms of this Contract, and shall not act as a waiver or estoppel to enforcement of any provision of this Contract. The provisions herein do not limit the Coordinator's right to remedies at law or to damages.
 6. Upon receipt of a notice of termination of this Contract for any reason, the Agency/Operator shall cease service and prepare all final reports and documents required by the terms of this Contract. A final invoice shall be sent to the Coordinator within thirty (30) days after the termination of this Contract.
- D. Renegotiations or Modifications of this Contract shall only be valid when they have been reduced to writing, duly approved by the Coordinator, and signed by both parties hereto.
- E. Agency/Operator shall assign no portion of this Contract without the prior written consent of the Coordinator.
- F. This Contract is the entire agreement between the parties.
- G. Attachments I and II are an integral part of the Contract and are hereby incorporated by reference into this Contract. All subsequent attachments are of an optional nature.

ATTACHMENT I
AGENCY/OPERATOR CONTRACT

SERVICE DESCRIPTION

1. The Agency/Operator will be able to provide:
(Type of Service - ambulatory, non-ambulatory, stretcher)
Ambulatory, Non-Ambulatory, and Stretcher

2. The Agency/Operator will be available to provide transportation
(Days and Hours of availability)
24 hours / 7 days

Days Agency/Operator will not be able to provide services:

(Holidays and other days not available)

As agreed upon by Contractor and Coordinator

3. Vehicles Agency/Operator will use to transport all passengers
(Vehicle Inventory attached)

4. Vehicle/Equipment Standards (if any)

(Identify standards such as functioning air conditions/heating, grab rails, stanchions, first aid kits, fire extinguishers, and adequate communication equipment)

See Attachment IV – Dixie County System Safety Program Plan

10/1/16

5. Driver Requirements (if any)

(Identify requirements of drivers such as current license, vision, dress, specialized training, relationship with riders - provide assistance, physical contact, communication)

See Attachment IV – Dixie County System Safety Program Plan

6. Training

(Identify required training of all personnel, including drivers, reservations, etc. Also provide how often this training is required and how it will be provided to operator's employees).

See Attachment IV – Dixie County System Safety Program Plan

7. Agency/Operator' fare structure

(Identify fare structure and what services are eligible and ineligible)

See Attachment

8. Billing/Invoicing and Reimbursement procedure for Agency/Operator.

(When, how often, what reports if any should be submitted)

Monthly

9. Reporting Requirements

(Include all Requirements of Commission, Coordinator, Local Coordinating Board and any Entities purchasing transportation.)

As agreed upon by Contractor and Coordinator

11/16

ATTACHMENT II

The Commission for the Transportation Disadvantaged Standards and Performance Requirements

Pursuant to Rule 41-2.006, Florida Administrative Code, the Community Transportation Coordinator and any Transportation Operator/Agency from whom service is purchased or arranged by the Community Transportation Coordinator shall adhere to Commission approved standards. These standards shall include:

- (a) Drug and alcohol testing for safety sensitive job positions within the coordinated system regarding pre-employment, randomization, post-accident, and reasonable suspicion as required by the Federal Highway Administration and the Federal Transit Administration;
- (b) An escort of a passenger and dependent children are to be transported as locally negotiated and identified in the local Transportation Disadvantaged Service Plan;
- (c) Child restraint devices shall be determined locally as to their use, responsibility, and cost of such device in the local Transportation Disadvantaged Service Plan;
- (d) Passenger property that can be carried by the passenger and/or driver in one trip and can be safely be stowed on the vehicle, shall be allowed to be transported with the passenger at no additional charge. Additional requirements may be negotiated for carrying and loading rider property beyond this amount. Passenger property does not include wheelchairs, child seats, stretchers, secured oxygen, personal assistive devices, or intravenous devices;
- (e) Vehicle transfer points shall provide shelter, security, and safety of passengers;
- (f) A local toll free phone number for complaints or grievances shall be posted inside the vehicle. The local complaint process shall be outlined as a section in the local Transportation Disadvantaged Service Plan including, advising the dissatisfied person about the Commission's Ombudsman Program as a step within the process as approved by the local Coordinating Board;
- (g) Out of service area trips shall be provided when determined locally and approved by the local Coordinating Board, except in instances where local ordinances prohibit such trips;
- (h) Interior of all vehicles shall be free from dirt, grime, oil, trash, torn upholstery, damaged or broken seats, protruding metal or other objects or materials which could soil items placed in the vehicle or provide discomfort for the passenger;

12/7/16

- (i) Billing requirements of the Community Transportation Coordinator to subcontractors shall be determined locally by the local Coordinating Board and provided in the local Transportation Disadvantaged Service Plan. All bills shall be paid within 15 calendar days to subcontractors, after receipt of said payment by the Community Transportation Coordinator, except in instances where the Community Transportation Coordinator is a non-governmental entity;
- (j) Passenger/trip database must be maintained or accessible by the Community Transportation Coordinator on each rider being transported within the system;
- (k) Adequate seating for paratransit services shall be provided to each rider and escort, child, or personal care attendant, and no more passengers than the registered passenger seating capacity shall be scheduled or transported in a vehicle at any time. For transit services provided by transit vehicles, adequate seating or standing space will be provided to each rider and escort, child, or personal care attendant, and no more passengers than the registered passenger seating or standing capacity shall be scheduled or transported in a vehicle at any time;
- (l) Drivers for paratransit services, including coordination contractors, shall be required to announce and identify themselves by name and company in a manner that is conducive to communications with the specific passenger, upon pickup of each rider, group of riders, or representative, guardian, or associate of the rider, except in situations where the driver regularly transports the rider on a recurring basis. Each driver must have photo identification that is in view of the passenger. Name patches, inscriptions or badges that affix to driver clothing are acceptable. For transit services, the driver photo identification shall be in a conspicuous location in the vehicle;
- (m) The paratransit driver shall provide the passenger with boarding assistance, if necessary or requested, to the seating portion of the vehicle. The boarding assistance shall include opening the vehicle door, fastening the seat belt or utilization of wheel chair securement devices, storage of mobility assistive devices, and closing the vehicle door. In certain paratransit service categories, the driver may also be required to open and close doors to buildings, except in situations in which assistance in opening/closing building doors would not be safe for passengers remaining on the vehicle. Assisted access must be in a dignified manner. Drivers may not assist wheelchair up or down more than one step, unless it can be performed safely as determined by the passenger, guardian, and driver;
- (n) All vehicles ordered or put into service after adoption of this section of the Rule, and providing service within the coordinated system, shall be equipped with two-way communications in good working order and be audible to the driver at all times to the base. All vehicles that are not equipped with two-way communications shall have two years to be in compliance after the adoption date of this section of the Rule;

130716

- (o) All vehicles ordered or put into service after the adoption of this section of the Rule, and providing service within the coordinated system, shall have working air conditioners and heaters in each vehicle. Vehicles that do not have a working air conditioner or heater will be scheduled for repair or replacement as soon as possible. All vehicles that are not equipped with an air conditioner and/or heater shall have two years to be in compliance after the adoption date of this section of the Rule;
- (r) First Aid shall be determined locally and provided in the local Transportation Disadvantaged Service Plan; and
- (s) Cardiopulmonary Resuscitation shall be determined locally and provided in the local Transportation Disadvantaged Service Plan.

14 of 16

01-01-2015 09:02

Contract Extension

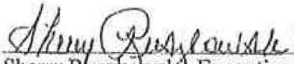
Between Agency and Provider

Hereby extends the Standard Coordination Contract between Suwannee River Economic Council, Inc. P.O. Box 70, Live Oak, Florida 32064 and


Coordinator Name Bradford ARC dba Sunshine Industries
1351 South Water Street
Starke, Florida 32091

Until 02/22/16. All conditions remain the same as in original contract.

Extension approval



Sherry Ruskowski, Executive Director
Bradford ARC dba Sunshine Industries



Matt Pearson, Executive Director
Suwannee River Economic Council, Inc.

2/12/15
Date

2/17/15
Date

COMPLIANCE WITH RULE 41-2 FLORIDA ADMINISTRATIVE CODE

1. How is the Community Transportation Coordinator using school buses in the coordinated system?
Suwannee River Economic Council does not have a contract with the Bradford County School Board to use their vehicles.
2. How is the Community Transportation Coordinator using public transportation services in the coordinated system?
Not applicable
3. Is there a goal for transferring passengers from paratransit to transit?
 Yes No Not applicable
4. What are the minimum liability insurance requirements? \$100,00/\$200,000
5. What are the minimum liability insurance requirements in the operator and coordination contracts? \$100,000/\$200,000
6. Does the minimum liability insurance requirements exceed \$1 million per incident?
 Yes No

Standards	Comments
Local toll free phone number must be posted in all vehicles.	Suwannee River Economic Council posts local toll free phone number in all vehicles.
Vehicle Cleanliness	Suwannee River Economic Council cleans all vehicles (interior/exterior) at least once a week.
Passenger/Trip Database	Suwannee River Economic Council maintains a passenger database.
Adequate seating	Suwannee River Economic Council provides adequate seating for all passengers.
Driver Identification	Suwannee River Economic Council requires drivers to identify themselves in a manner that is conducive to communications with specific passengers.
Passenger Assistance	Suwannee River Economic Council requires drivers to provide passengers with boarding and exiting assistance.
Smoking, Eating and Drinking	Smoking is prohibited in any vehicle. Eating and drinking on board vehicles is not permitted unless medically necessary.
Two-way Communications	All vehicles are equipped with two-way communications.
Air Conditioning/Heating	All vehicles have working air conditioners and heaters.
Billing Requirements	Suwannee River Economic Council complies with Section 287.0585, Florida Statutes.
Transport of Escorts and dependent children policy	Suwannee River Economic Council requires children under the age of 16 to be accompanied by and escort. Escorts must be provided by the passenger and able to provide necessary assistance to the passenger. Escorts are transported at the rates described in the established rate structure.
Use, Responsibility, and cost of child restraint devices	Suwannee River Economic Council requires all passengers under the age of 4 and or 50 pounds to use a child restrain device. Child restraint devices must be provided by the passenger.

Out-of-Service Area trips	Suwannee River Economic Council may require medical provider verification for any out of county transportation.
CPR/1st Aid	Suwannee River Economic Council does not require drivers to be trained in CPR. Suwannee River Economic Council requires that all vehicles be equipped with biohazard kits as required by State and Federal regulations.
Driver Criminal Background Screening	Suwannee River Economic Council conducts motor vehicle registration checks on drivers every six months.
Passenger Property	Suwannee River Economic Council allows passengers to have personal property that they can place on their lap or stow under the seat. Passengers must be able to independently carry all items brought on the vehicle.
Advance reservation requirements	Suwannee River Economic Council requires trips to be scheduled by 4:00 p.m. the day before service is requested.
Pick-up Window	Passengers shall be picked up 30 minutes before or 30 minutes after their scheduled pick-up time.

Measurable Standards/Goals	Standard/Goal	Is the Community Transportation Coordinator meeting the Standard?
Public Transit Ridership	Not applicable	Not applicable
On-time performance	90%	Yes
Accidents	No more than 1/100,000 miles	Yes
Roadcalls	No more than 5 roadcalls during the evaluation period.	Yes
Complaints	No more than 2/1,000 trips.	Yes
Call-Hold Time	Not applicable	Not applicable

Commission for the Transportation Disadvantaged NET Safety Compliance and Emergency Management Self Certification

THIS CERTIFIES CALENDAR YEAR 2015 DATE: 1/27/2015

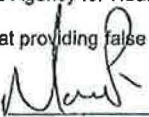
SUBCONTRACTED TRANSPORTATION PROVIDER: SUWANNEE RIVER ECONOMIC COUNCIL, INC.

ADDRESS: PO BOX 70, LIVE OAK, FLORIDA, 32064

In accordance with the Medicaid Non-Emergency Transportation Subcontracted Transportation Provider (STP) Contract with the Commission for the Transportation Disadvantaged, the above STP, hereby certifies to the following:

1. The adoption of a System Safety Program Plan and a Security Program Plan (a.k.a. Emergency Management Plan) based on established standards set forth in *Rule Chapter 14.90, F.A.C.* Such plans ensure the continuation of appropriate services during an emergency, including but not limited to localized acts of nature, accidents, and technological and/or attached-related emergencies, both natural and manmade;
2. Compliance with its adopted System Safety Program Plan and Security Program Plan, including:
 - a. Safety inspections of all service vehicles;
 - b. Applicable Drug and Alcohol procedures, including training and monitoring;
 - c. Driver Training and Monitoring.
3. Compliance with requirement of monitoring subcontracted operators;
4. Compliance with maintenance of support documentation for plans, inspections, training and monitoring, and that said documentation is available upon request by an authorized representative of the Commission or the Agency for Health Care Administration.

I understand that providing false information may result in an unfavorable action by the Commission.

Signature:  _____

Name: MATT PEARSON
(Type or Print)

Title: EXECUTIVE DIRECTOR



Bus Transit System Annual Safety and Security Certification

*Certifying Compliance with Rule 14-90, FAC to the
Florida Department of Transportation (FDOT)*

Certification Date (Current): 2015

Certification Year: (Previous): 2014

Name and Address of Bus Transit System: Suwannee River Economic Council, Inc.

PO Box 70

Live Oak, FL 32064

The Bus Transit System (Agency) named above hereby certifies the following:

1. *The Agency has adopted a System Safety Program Plan (SSPP) and a Security Program Plan (SPP) pursuant to the standards set forth in Rule Chapter 14-90, Florida Administrative Code.*
2. *The Agency is in compliance with its adopted SSPP and SPP.*
3. *The Agency has performed annual safety inspections on all operational vehicles in accordance with Rule Chapter 14-90, Florida Administrative Code.*
4. *The Agency has conducted reviews of SSPP and SPP and the plans are up to date.*

Blue Ink Signature: Matt Pearson *Date:* 1/12/15
(Individual Responsible for Assurance of Compliance)

Name: Matt Pearson *Title:* Executive Director

Name and address of entity(ies) which has (have) performed bus safety inspections and security assessments:

Name: See Attachment

Address: _____

Name of Qualified Mechanic who Performed Annual Inspections: _____

** Note: Please do not edit or otherwise change this form.*

Name and address of entity(ies) which has (have) performed bus safety inspections and security assessments:

1. Beck Chevrolet
1901 North Temple Avenue
Starke, FL 32091

2. King's Oil & Tire
PO Box 717
Cross City, FL 32628

3. Furst Automotive
109 West Duval Street
Live Oak, FL 32064

4. Revels Fast Lube
204 West Madison Street
Starke, FL 32091

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
CERTIFICATE OF COMPLIANCE

725-030-10
TRANSIT
1201

for a
SECTION 5311 SUBRECIPIENT
(Certifying compliance with 49 CFR Parts 40, 655)
To
Florida Department of Transportation

DATE 1/13/2015

Section 5311 Subrecipient Information:

AGENCY NAME: Suw River Economic Council, Inc.
ADDRESS: PO Box 70, Live Oak, FL 32064
PHONE: 386-362-4115

FDOT District Office Information:

NAME: Doreen Joyner-Howard, AICP
ADDRESS: 2198 Edlson Avenue, Jacksonville, FL
PHONE: 904-360-5650

I, Matt Pearson, Executive Director
(Name) (Title)

hereby certify that Suwannee River Economic Council and its applicable
(Name of Subrecipient)

contractor(s) (listing attached hereto) for _____
(Name of Subrecipient)

has (have) established and implemented an anti-drug and alcohol misuse prevention program in accordance with the provisions of 49 CFR Parts 40 and 655 as amended. I further certify that the employee training conducted under this part meets the requirements of 49 CFR Parts 40 and 655 as amended.



Signature

Attachment: (Applicable Contractor(s) - Name, Address, Phone #, Contact Person)

ON-SITE OBSERVATION OF THE SYSTEM

1. Date of Observation:

9/18/15

2. Please list any special guests that were present:

None

3. Location:

Invision N FL Outpatient Imaging/VA Medical Center

4. Number of Passengers picked up/dropped off

3

Ambulatory:

2

Non-Ambulatory

1

5. Was the driver on time?

Yes

No If no, how many minutes late/early?

6. Did the driver provide any passenger assistance?

Yes

No

7. Was the driver wearing any identification?

Yes

No

8. Did the driver render an appropriate greeting?

Yes

No

9. Did the driver ensure the passengers were properly belted?

Yes

No

10. Was the vehicle neat and clean, and free from dirt, torn upholstery, damaged or broken seats, protruding metal or other objects?

Yes

No

11. Is there a sign posted on the interior of the vehicle with both a local phone number and the Transportation Disadvantaged Helpline for comments/complaints/commendations?

Yes

No

12. Does the vehicle have working heat and air conditioning?

Yes

No

13. Does the vehicle have two-way communications in good working order?
 Yes
 No
14. If used, was the lift in good working order?
 Yes
 No
 Not Applicable
15. Was there safe and appropriate seating for all passengers?
 Yes
 No
16. Did the driver properly use the lift and secure the passenger?
 Yes
 No
 Not Applicable



PURCHASING AGENCY SURVEY

Purchasing Agency name: Title III B Aging Program
Representative of Purchasing Agency: Janis Owen

1) Do you purchase transportation from Suwannee River Economic Council?

X YES

NO

2) What is the primary purpose for purchasing your clients' transportation?

- Medical
- Employment
- Education/Training/Day Care
- X Nutritional
- Life Sustaining/Other

3) On average, how often do your clients use the transportation system?

- 7 Days/Week
- X 1-2 Times/Week
- 3-5 Times/Week
- 1-3 Times/Month
- Less than 1 Time/Month

5) Have you had any unresolved problems with the coordinated transportation system?

- Yes
- X No If no, skip to question 7

6) What type of problems have you had with the coordinated system?

- Advance notice requirement [specify operator (s)]
- Cost [specify operator (s)]
- Service area limits [specify operator (s)]
- Pick up times not convenient [specify operator (s)]
- Vehicle condition [specify operator (s)]
- Lack of passenger assistance [specify operator (s)]
- Accessibility concerns [specify operator (s)]
- Complaints about drivers [specify operator (s)]
- Complaints about timeliness [specify operator (s)]
- Length of wait for reservations [specify operator (s)]
- Other [specify operator (s)] _____

7) Overall, are you satisfied with the transportation you have purchased for your clients?

- X Yes
- No If no, why? _____

PURCHASING AGENCY SURVEY

Purchasing Agency name: Transportation Disadvantaged Program
Representative of Purchasing Agency: Florida Commission for the Transportation Disadvantaged

1) Do you purchase transportation from Suwannee River Economic Council?

YES

NO

2) What is the primary purpose for purchasing your clients' transportation?

- Medical
- Employment
- Education/Training/Day Care
- Nutritional
- Life Sustaining/Other

3) On average, how often do your clients use the transportation system?

- 7 Days/Week
- 1-2 Times/Week
- 3-5 Times/Week
- 1-3 Times/Month
- Less than 1 Time/Month

5) Have you had any unresolved problems with the coordinated transportation system?

- Yes
- No If no, skip to question 7

6) What type of problems have you had with the coordinated system?

- Advance notice requirement [specify operator (s)]
- Cost [specify operator (s)]
- Service area limits [specify operator (s)]
- Pick up times not convenient [specify operator (s)]
- Vehicle condition [specify operator (s)]
- Lack of passenger assistance [specify operator (s)]
- Accessibility concerns [specify operator (s)]
- Complaints about drivers [specify operator (s)]
- Complaints about timeliness [specify operator (s)]
- Length of wait for reservations [specify operator (s)]
- Other [specify operator (s)] _____

7) Overall, are you satisfied with the transportation you have purchased for your clients?

- Yes
- No If no, why? _____

PASSENGER SURVEY

1) Where you charged an amount in addition to the passenger fare?

- Yes
- No

2) How often do you use transportation?

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

3) Have you ever been denied transportation services?

- Yes
- No If no, skip to question # 4

A. How many times in the last 6 months have you been denied transportation services?

- None If none, skip to question # 4
- 1-2 Times
- 3-5 Times
- 6-10 Times

B. What was the reason given for refusing you transportation services?

- Ineligible
- Lack of funds
- Destination outside service area
- Space not available
- Other _____

4) What do you normally use the service for?

- Medical
- Education/Training/Day Care
- Employment
- Nutritional
- Life-Sustaining/Other

5) Do you have concerns with your transportation service?

- Yes. If yes, please state or choose problem from below
 - Advance notice
 - Pick up times not convenient
 - Assistance
 - Service Area Limits
 - Drivers - specify
 - Vehicle condition
 - Cost
 - Late pick up-specify time of wait
 - Accessibility
 - Late return pick up - length of wait
 - Reservations - specify length of wait
 - Other _____

No. If no, skip to question # 6

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

10

Additional Comments: None

PASSENGER SURVEY

1) Where you charged an amount in addition to the passenger fare?

- Yes
 No

2) How often do you use transportation?

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

3) Have you ever been denied transportation services?

- Yes
 No If no, skip to question # 4

A. How many times in the last 6 months have you been denied transportation services?

- None If none, skip to question # 4
 1-2 Times
 3-5 Times
 6-10 Times

B. What was the reason given for refusing you transportation services?

- Ineligible
 Lack of funds
 Destination outside service area
 Space not available
 Other _____

4) What do you normally use the service for?

- Medical
 Education/Training/Day Care
 Employment
 Nutritional
 Life-Sustaining/Other

5) Do you have concerns with your transportation service?

- Yes. If yes, please state or choose problem from below
- | | |
|---|--|
| <input type="checkbox"/> Advance notice | <input type="checkbox"/> Cost |
| <input type="checkbox"/> Pick up times not convenient | <input type="checkbox"/> Late pick up-specify time of wait |
| <input type="checkbox"/> Assistance | <input type="checkbox"/> Accessibility |
| <input type="checkbox"/> Service Area Limits | <input type="checkbox"/> Late return pick up - length of wait |
| <input type="checkbox"/> Drivers - specify | <input type="checkbox"/> Reservations - specify length of wait |
| <input type="checkbox"/> Vehicle condition | <input type="checkbox"/> Other _____ |

No. If no, skip to question # 6

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

10

Additional Comments: Appreciate service

PASSENGER SURVEY

1) Where you charged an amount in addition to the passenger fare?

- Yes
- No

2) How often do you use transportation?

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

3) Have you ever been denied transportation services?

- Yes
- No If no, skip to question # 4

A. How many times in the last 6 months have you been denied transportation services?

- None If none, skip to question # 4
- 1-2 Times
- 3-5 Times
- 6-10 Times

B. What was the reason given for refusing you transportation services?

- Ineligible
- Lack of funds
- Destination outside service area
- Space not available
- Other _____

4) What do you normally use the service for?

- Medical
- Education/Training/Day Care
- Employment
- Nutritional
- Life-Sustaining/Other

5) Do you have concerns with your transportation service?

- Yes. If yes, please state or choose problem from below
 - Advance notice
 - Pick up times not convenient
 - Assistance
 - Service Area Limits
 - Drivers - specify
 - Vehicle condition
 - Cost
 - Late pick up-specify time of wait
 - Accessibility
 - Late return pick up - length of wait
 - Reservations - specify length of wait
 - Other _____

No. If no, skip to question # 6

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

10

Additional Comments: None

PASSENGER SURVEY

1) Where you charged an amount in addition to the passenger fare?

- Yes
- No

2) How often do you use transportation?

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

3) Have you ever been denied transportation services?

- Yes
- No If no, skip to question # 4

A. How many times in the last 6 months have you been denied transportation services?

- None If none, skip to question # 4
- 1-2 Times
- 3-5 Times
- 6-10 Times

B. What was the reason given for refusing you transportation services?

- Ineligible
- Lack of funds
- Destination outside service area
- Space not available
- Other _____

4) What do you normally use the service for?

- Medical
- Education/Training/Day Care
- Employment
- Nutritional
- Life-Sustaining/Other

5) Do you have concerns with your transportation service?

- Yes. If yes, please state or choose problem from below
 - Advance notice
 - Pick up times not convenient
 - Assistance
 - Service Area Limits
 - Drivers - specify
 - Vehicle condition
 - Cost
 - Late pick up-specify time of wait
 - Accessibility
 - Late return pick up - length of wait
 - Reservations - specify length of wait
 - Other _____

No. If no, skip to question # 6

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

10

Additional Comments: Reliable service

PASSENGER SURVEY

1) Where you charged an amount in addition to the passenger fare?

- Yes
- No

2) How often do you use transportation?

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

3) Have you ever been denied transportation services?

- Yes
- No If no, skip to question # 4

A. How many times in the last 6 months have you been denied transportation services?

- None If none, skip to question # 4
- 1-2 Times
- 3-5 Times
- 6-10 Times

B. What was the reason given for refusing you transportation services?

- Ineligible
- Lack of funds
- Destination outside service area
- Space not available
- Other _____

4) What do you normally use the service for?

- Medical
- Education/Training/Day Care
- Employment
- Nutritional
- Life-Sustaining/Other

5) Do you have concerns with your transportation service?

- Yes. If yes, please state or choose problem from below
 - Advance notice
 - Pick up times not convenient
 - Assistance
 - Service Area Limits
 - Drivers - specify
 - Vehicle condition
 - Cost
 - Late pick up-specify time of wait
 - Accessibility
 - Late return pick up - length of wait
 - Reservations - specify length of wait
 - Other _____

No. If no, skip to question # 6

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

10

Additional Comments: None.

PASSENGER SURVEY

1) Where you charged an amount in addition to the passenger fare?

- Yes
- No

2) How often do you use transportation?

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

3) Have you ever been denied transportation services?

- Yes
- No If no, skip to question # 4

A. How many times in the last 6 months have you been denied transportation services?

- None If none, skip to question # 4
- 1-2 Times
- 3-5 Times
- 6-10 Times

B. What was the reason given for refusing you transportation services?

- Ineligible
- Lack of funds
- Destination outside service area
- Space not available
- Other _____

4) What do you normally use the service for?

- Medical
- Education/Training/Day Care
- Employment
- Nutritional
- Life-Sustaining/Other

5) Do you have concerns with your transportation service?

- Yes. If yes, please state or choose problem from below
 - Advance notice
 - Pick up times not convenient
 - Assistance
 - Service Area Limits
 - Drivers - specify
 - Vehicle condition
 - Cost
 - Late pick up-specify time of wait
 - Accessibility
 - Late return pick up - length of wait
 - Reservations - specify length of wait
 - Other _____

No. If no, skip to question # 6

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

10

Additional Comments: None.

LEVEL OF COST

**FLCTD
Annual Operations Report
Section VII: Expense Sources**

County: Bradford		Fiscal Year: July 1, 2014 - June 30, 2015	
Status: Saved with Issues			
Section VII: Financial Data			
2. Expense Sources			
Expense Item	Community Transportation Coordinator	Coordination Contractor	TOTAL EXPENSES
Labor (501):	\$153,896.00	\$0.00	\$153,896.00
Fringe Benefits (502):	\$63,973.00	\$0.00	\$63,973.00
Services (503):	\$21,180.00	\$0.00	\$21,180.00
Materials and Supplies Cons. (504):	\$56,591.00	\$0.00	\$56,591.00
Utilities (505):	\$15,560.00	\$0.00	\$15,560.00
Casualty and Liability (506):	\$21,029.00	\$0.00	\$21,029.00
Taxes (507):	\$157.00	\$0.00	\$157.00
Purchased Transportation Services (508)			
Bus Pass Expenses:	\$0.00	\$0.00	\$0.00
School Bus Expenses:	\$0.00	\$0.00	\$0.00
Other:	\$0.00	\$0.00	\$0.00
Miscellaneous (509):	\$1,464.00	\$0.00	\$1,464.00
Interest (511):	\$0.00	\$0.00	\$0.00
Leases and Rentals (512):	\$14,684.00	\$0.00	\$14,684.00
Annual Depreciation (513):	\$0.00	\$0.00	\$0.00
Contributed Services (530):	\$14,014.00	\$0.00	\$14,014.00
Allocated Indirect Expenses:	\$0.00	\$0.00	\$0.00
GRAND TOTAL:	\$362,548.00	\$0.00	\$362,548.00

LEVEL OF COMPETITION

1. Inventory of Transportation Operators in the Service Area

	Transportation Providers Available	Transportation Providers Contracted in the System.
Private Non-Profit	3	2
Private For-Profit	0	0
Government	0	0
Public Transit Agency	0	0
Total	2	2

2. How many of the operators are coordination contractors? 1

3. Does the Community Transportation Coordinator have a competitive procurement process?
 Yes
 No

4. What methods have been used in selection of the transportation operators?

<input type="checkbox"/>	Low bid
<input type="checkbox"/>	Requests for qualifications
<input type="checkbox"/>	Negotiation only

<input checked="" type="checkbox"/>	Requests for proposals
<input type="checkbox"/>	Requests for interested parties
<input type="checkbox"/>	



LEVEL OF COORDINATION

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

Suwannee River Economic Council distributes brochures in the community.

2. Eligibility – How is passenger eligibility coordinated for local transportation services?

Suwannee River Economic Council determines passenger eligibility except for passengers using Florida's Managed Medical Care Program.

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

Individuals call Suwannee River Economic Council to schedule all trips except trips provided through Florida's Managed Medical Care Program.

4. Reservations – How is the duplication of a reservation prevented?

Suwannee River Economic Council handles all trip reservations except trip reservations for Florida's Managed Medical Care Program.

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

Suwannee River Economic Council handles all trip allocations.

6. Scheduling – How is the trip assignment to vehicles coordinated?

Suwannee River Economic Council schedules all trips except for trips provided in Florida's Managed Medical Care Program.

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

Suwannee River Economic Council monitors transportation operators under contract with Suwannee River Economic Council.



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October 6, 2015

TO: Bradford County Transportation Disadvantaged Coordinating Board
FROM: Lynn Godfrey, AICP, Senior Planner
SUBJECT: 2014-2015 Annual Operations Report

RECOMMENDATION

Review the 2014/2015 Annual Operations Report.

BACKGROUND

Suwannee River Economic Council is required to submit an annual operations report to the Florida Commission for the Transportation Disadvantaged by September 15 of each year. Attached is the Fiscal Year 2014-2015 Annual Operations Report. If you have any questions concerning the attached report, please contact me at extension 110.

Attachment

t:\lynn\td2015\bradford\memos\laor.docx

FLCTD

Annual Operations Report

Section I: Face Sheet

County: Bradford	Fiscal Year: July 1, 2014 - June 30, 2015
Status: Ready	
Report Date:	08/04/2015
Period Covered:	July 1, 2014 - June 30, 2015
Coordinator's Name:	Suwannee River Economic Council, Inc.
Address:	P.O. Box 70
City:	Live Oak
Zip Code:	32064
Service Area:	Bradford
Contact Person:	Matt Pearson
Title:	Executive Director
Phone:	(386) 362 - 4115
Fax:	(386) 362 - 4078
Email:	mattpearson@suwanneec.net
Network Type:	Partial Brokerage
Organization Type:	Private Non-Profit
CTC Certification:	
<p>I, Matt Pearson, as the authorized Community Transportation Coordinator (CTC) Representative, hereby certify, under the penalties of perjury as stated in Chapter 837.06, F.S., that the information contained in this report is true, accurate, and in accordance with the accompanying instructions.</p>	
CTC Representative (signature)	

LCB Statement:	
<p>I, _____, as the local Coordinating Board Chairperson, hereby, certify in accordance with Rule 41-2.007(7) F.S. that the local Coordinating Board has reviewed this report and the Planning Agency has received a copy.</p>	
LCB Signature	

FLCTD
Annual Operations Report
Section II: General Info

County: **Bradford**

Fiscal Year: **July 1, 2014 - June 30, 2015**

Status: **Ready**

Section II: Coordinated System General Information

1. Provider Listing (include the CTC, if the CTC provides transportation services)

Number of Private Non-Profits: 2

Number of Private For-Profits: 0

Public Entities:

School Board: 0

Municipality: 0

County: 0

Transit Authority: 0

Other: 0

Total: 2

2. How many of the providers listed in 1 are coordination contractors?

1

FLCTD
Annual Operations Report
Section III: Passenger Trip Info

County: Bradford		Fiscal Year: July 1, 2014 - June 30, 2015	
Status: Ready			
Section III: Passenger Trip Information			
1a. One-Way Passenger Trips			
Type of Service	Service Area		
Fixed Route/Fixed Schedule	Within	Outside	Total
Daily Trip Tickets	0	0	0
Weekly Passes	0	0	0
Monthly Passes	0	0	0
Deviated Fixed Route Service			
	0	0	0
Paratransit			
Ambulatory	16380	4316	20696
Non-Ambulatory	1670	287	1957
Stretcher	99	0	99
Other Services			
School Board Trips	0	0	0
Total Trips	18149	4603	22752
1b. How many of the total trips were provided by contracted transportation providers (do not include the CTC, if the CTC provides transportation services)?			0
1c. How many of the total trips were provided by coordination contractors?			13365
2. One-Way Trips by Funding Source			
Agency for Health Care Administration			3628
Agency for Persons with Disabilities			13365
Agency for Workforce Innovation			0
Commission for the Transportation Disadvantaged			4667
Department of Children and Families			0
Department of Community Affairs			0
Department of Education			0
Department of Elder Affairs			1092
Department of Health			0

Department of Juvenile Justice	0
Florida Department of Transportation	0
Local Government	0
Local Non-Government	0
Other Federal Programs	0
Total:	22752
3. One-Way Trips by Passenger Type	
Was this information obtained by sampling?	yes
Elderly	
Low Income:	4321
Disabled:	370
Low Income and Disabled:	402
Other:	0
Children	
Low Income:	421
Disabled:	100
Low Income and Disabled:	0
Other:	0
Other	
Low Income:	5323
Disabled:	617
Low Income and Disabled:	11198
Other:	0
Total:	22752
4. One-Way Passenger Trips - by Purpose	
Was this information obtained by sampling?	yes
Medical Purpose	7777
Employment Purpose	0
Education/Training/Daycare Purpose	13365
Nutritional Purpose	1390
Life-Sustaining/Other Purpose	220
Total:	22752
5. Unduplicated Passenger Head Count	
5a. Paratransit/Deviated Fixed Route/ School Brd	502

5b. Fixed Route	0
Total:	502
6. Number of Unmet Trip Requests	
	23
Unmet Trip Requests by Type of Trip	
Unmet Medical	0
Unmet Employment	0
Unmet Education/Training/Daycare	0
Unmet Nutritional	0
Unmet Life-Sustaining/Other	23
Reason Trip was Denied (Optional)	
Lack of Funding:	0
Lack of Vehicle Availability:	0
Lack of Driver Availability:	0
Other:	0
7.) Number of Passenger No-shows	
	164
Passenger No-Shows by Funding Source (optional)	
CTD:	0
AHCA:	0
AWI:	0
DCF:	0
APD:	0
DOE:	0
DOEA:	0
Other:	0
8. Complaints	
Complaints by Service	3
Complaints by Policy	0
Complaints by Vehicle	0
Complaints by Other	0
Complaint Total:	3
9. Commendations	
Commendations by CTC	0

Commendations by Transportation Providers	0
Commendations by Coordination Contractors	0
Total Commendations:	0

FLCTD

Annual Operations Report

Section IV: Vehicle Info

County: Bradford	Fiscal Year: July 1, 2014 - June 30, 2015		
Status: Ready			
Section IV: Vehicle Information			
1. Mileage Information			
	Vehicle Miles		Revenue Miles
CTC:	130252		105802
Transportation Providers:	0		0
Coordination Contractors:	84992		79563
School Bus Utilization Agreement:	0		0
Total:	215244		185365
2. Roadcalls			
	0		
3. Accidents			
	Chargeable		Non-Chargeable
Total Accidents Person Only:	0		0
Total Accidents Vehicle Only:	0		0
Total Accidents Person & Vehicle:	0		0
Total Accidents:	0		0
Grand Total:	0		
4. Total Number of Vehicles			
	14		
		Count	Percentage
a. Total vehicles that are wheelchair accessible:		13	92.00%
b. Total vehicles that are stretcher equipped:		1	7.00%

FLCTD
Annual Operations Report
Section V: Employee Info

County: Bradford		Fiscal Year: July 1, 2014 - June 30, 2015	
Status: Ready			
Section V: Employee Information			
1. CTC and Transportation Provider Employee Information			
			Hours
Full-Time Drivers	3		6610
Part-Time Drivers	3		3755
Volunteer Drivers	0		0
Total Hours:			10365
Maintenance Employees	0		
Dispatchers	1		
Schedulers	0		
Call Intake/Reserv./Cust. Serv.	0		
Other Operations Employees	0		
			Hours
Other Volunteers	0		0
Administrative Support	1		
Management Employees	1		
Total	9		
2. Coordination Contractors Employee Information			
			Hours
Full-Time Drivers	3		7030
Part-Time Drivers	3		3270
Volunteer Drivers	0		0
Total Hours:			10300
Maintenance Employees	0		
Dispatchers	0		
Schedulers	0		
Call Intake/Reserv./Cust. Serv.	0		

Other Operations Employees	0	
		Hours
Other Volunteers	0	0
Administrative Support	0	
Management Employees	0	
Total	6	
		TOTAL HOURS: 20665

FLCTD

Annual Operations Report

Section VI: Revenue Sources

County: Bradford		Fiscal Year: July 1, 2014 - June 30, 2015	
Status: Ready			
Section VI: Financial Data			
1. Detailed Revenue and Trips Provided by Funding Source			
Revenue Source	CTC and Transportation Providers	Coordination Contractors	TOTAL REVENUES
Agency for Health Care Administration			
Medicaid Non-Emergency	\$82,544.00	\$0.00	\$82,544.00
Medicaid Non-Emergency (under fixed fee service with AHCA)	\$0.00	\$0.00	\$0.00
Agency for Persons with Disabilities			
Comm Care for Dis Adults/Aging & Adult Services	\$0.00	\$0.00	\$0.00
Developmental Services	\$0.00	\$142,921.00	\$142,921.00
Other (specify)	\$0.00	\$0.00	\$0.00
Agency for Workforce Innovation			
WAGES/Workforce Board	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
Commission for the Transportation Disadvantaged			
Non-Sponsored Trip Program	\$119,848.00	\$0.00	\$119,848.00

Non-Sponsored Cap. Equip.	\$0.00	\$0.00	\$0.00
Rural Capital Equip.	\$6,282.00	\$0.00	\$6,282.00
TD Other (specify)	\$0.00	\$0.00	\$0.00
Department of Children and Families			
Alcohol, Drug Abuse & Mental Health Program	\$0.00	\$0.00	\$0.00
Family Safety & Preservation	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
Department of Community Affairs			
Community Services	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
Department of Education			
Carl Perkins Vocational Ed. Act	\$0.00	\$0.00	\$0.00
Division of Blind Services	\$0.00	\$0.00	\$0.00
Vocational Rehabilitation	\$0.00	\$0.00	\$0.00
Day Care Programs	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
Department of Elder Affairs			
Older Americans Act	\$16,881.00	\$0.00	\$16,881.00
Community Care for the Elderly	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
Department of Health			
Children's Medical Services	\$0.00	\$0.00	\$0.00
Office of Disability Deter.	\$0.00	\$0.00	\$0.00

County Public Health Unit	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
Department of Juvenile Justice			
(specify)	\$0.00	\$0.00	\$0.00
Department of Transportation			
49 USC 5307 (Section 9)	\$0.00	\$0.00	\$0.00
49 USC 5310 (Section 16)	\$0.00	\$0.00	\$0.00
49 USC 5311 (Section 18)	\$133,042.00	\$0.00	\$133,042.00
490USC 5311(f) (Section 18i)	\$0.00	\$0.00	\$0.00
Block Grant	\$0.00	\$0.00	\$0.00
Service Development	\$0.00	\$0.00	\$0.00
Commuter Assistance Program	\$0.00	\$0.00	\$0.00
Other DOT (Specify)5316	\$0.00	\$36,151.00	\$36,151.00
Local Government			
School Board Service	\$0.00	\$0.00	\$0.00
Complementary ADA Service	\$0.00	\$0.00	\$0.00
County Cash	\$0.00	\$0.00	\$0.00
County In-Kind	\$0.00	\$0.00	\$0.00
City Cash	\$0.00	\$0.00	\$0.00
City In-Kind	\$0.00	\$0.00	\$0.00
Other Cash (specify)	\$0.00	\$0.00	\$0.00
Other In-Kind (specify)	\$0.00	\$0.00	\$0.00
Local Non-Government			
Farebox	\$0.00	\$0.00	\$0.00

Donations, Contributions	\$0.00	\$0.00	\$0.00
In-Kind Services	\$0.00	\$0.00	\$0.00
Other Non-Government	\$15,180.00	\$0.00	\$15,180.00
Other Federal or State Programs			
(specify)	\$0.00	\$0.00	\$0.00
(specify)	\$0.00	\$0.00	\$0.00
(specify)	\$0.00	\$0.00	\$0.00
GRAND TOTAL:			
	\$373,777.00	\$179,072.00	\$552,849.00

FLCTD
Annual Operations Report
Section VII: Expense Sources

County: Bradford		Fiscal Year: July 1, 2014 - June 30, 2015	
Status: Saved with Issues			
Section VII: Financial Data			
2. Expense Sources			
Expense Item	Community Transportation Coordinator	Coordination Contractor	TOTAL EXPENSES
Labor (501):	\$153,896.00	\$0.00	\$153,896.00
Fringe Benefits (502):	\$63,973.00	\$0.00	\$63,973.00
Services (503):	\$21,180.00	\$0.00	\$21,180.00
Materials and Supplies Cons. (504):	\$56,591.00	\$0.00	\$56,591.00
Utilities (505):	\$15,560.00	\$0.00	\$15,560.00
Casualty and Liability (506):	\$21,029.00	\$0.00	\$21,029.00
Taxes (507):	\$157.00	\$0.00	\$157.00
Purchased Transportation Services (508)			
Bus Pass Expenses:	\$0.00	\$0.00	\$0.00
School Bus Expenses:	\$0.00	\$0.00	\$0.00
Other:	\$0.00	\$0.00	\$0.00
Miscellaneous (509):	\$1,464.00	\$0.00	\$1,464.00
Interest (511):	\$0.00	\$0.00	\$0.00
Leases and Rentals (512):	\$14,684.00	\$0.00	\$14,684.00
Annual Depreciation (513):	\$0.00	\$0.00	\$0.00
Contributed Services (530):	\$14,014.00	\$0.00	\$14,014.00
Allocated Indirect Expenses:	\$0.00	\$0.00	\$0.00
GRAND TOTAL:	\$362,548.00	\$0.00	\$362,548.00

**PERFORMANCE TRENDS
BRADFORD COUNTY, 2013-2015**

PERFORMANCE STANDARD	PERFORMANCE MEASURE	Fiscal Year 2012/2013	Fiscal Year 2013/2014	Fiscal Year 2014/2015	Percent Change (2013/2014 - 2014/2015)
TOTAL SERVICE	Total Passenger Trips	32,124	22,203	22,752	2%
	Ambulatory Trips	29,800	19,916	20,696	4%
	Non-ambulatory trips	2,215	2,185	1,957	-12%
	Stretcher Trips	109	102	99	-3%
	Total Revenue Vehicle Miles	196,755	185,186	185,365	0%
	Total Vehicle Miles	237,801	216,187	215,244	0%
	Total Driver Hours	10,210	10,040	10,365	3%
SERVICE EFFECTIVENESS	Passenger Trips/Revenue Vehicle Mile	0.16	0.12	0.12	2%
	Miles Per Trip	7	10	9	-3%
	Passenger Trips/Vehicle Mile	0.14	0.10	0.11	3%
	Passenger Trips/Driver Hour	3.1	2.2	2.2	-1%
COST EFFECTIVENESS & EFFICIENCY	Total Revenue	\$632,519.00	\$601,554.00	\$552,849.00	-9%
	Total Expenses	\$690,779.00	\$687,727.00	\$362,548.00	-90%
	Cost/Passenger Trip	\$21.50	\$30.97	\$15.93	-94%
	Cost/Revenue Vehicle Mile	\$3.51	\$3.71	\$1.96	-90%
	Cost/Vehicle Mile	\$2.90	\$3.18	\$1.68	-89%
	Cost/Vehicle	\$49,341.36	\$49,123.36	\$25,896.29	-90%
Cost/Driver Hour	\$67.66	\$68.50	\$34.98	-96%	
VEHICLE UTILIZATION	Total Vehicles	14	14	14	0%
	Passenger Trips/Vehicles	2,295	1,586	1,625	2%
	Total Vehicle Miles/Vehicle	16,986	15,442	15,375	0%
	Total Revenue Vehicle Miles/Vehicle	14,054	13,228	13,240	0%
SAFETY	Total Number of Accidents	0	0	0	#DIV/0!
	Accidents/100,000 Miles	0	0	0	#DIV/0!
SERVICE AVAILABILITY	Average Miles Between Roadcalls	237,801	216,187	215,244	0%
	Roadcalls	0	0	0	#DIV/0!
	Number of Unmet Trip Requests	20	21	23	9%
	Passenger No-Shows	188	174	164	-6%

* Source: Annual Operations Reports.



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October 6, 2015

TO: Bradford County Transportation Disadvantaged Coordinating Board
 FROM: Lynn Godfrey, AICP, Senior Planner
 SUBJECT: Operations Reports

RECOMMENDATION

No action required. This agenda item is for information only.

BACKGROUND

Attached are the following reports for the Board's review:

1. Suwannee River Economic Council Operations Report April - June 2015;
2. Fiscal Year 2015/16 Transportation Disadvantaged Trust Fund Status Report;
3. Suwannee River Economic Council Complaint/Commendation Report April - June 2015;
and
4. Suwannee River Economic Council Trip Denial Report April - June 2015.

If you have any questions regarding the attached reports, please do not hesitate to contact me.

Attachments

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QUARTERLY OPERATING REPORT
BRADFORD COUNTY
APRIL - JUNE 2015

OPERATING DATA	SREC	ARC of Bradford	TOTAL
NUMBER OF INVOICED TRIPS	2,416	3,537	5,953
Aging Program - Title III-B	422		422
Transportation Disadvantaged Program	1,247		1,247
Florida Agency for Persons with Disabilities		3,537	3,537
Florida Managed Medical Care Program (Medicaid)	747		747
TOTAL VEHICLE MILES	26,231	21,618	47,849
TOTAL REVENUE VEHICLE MILES	19,149		19,149
TOTAL VEHICLE HOURS	2,005	1,120	3,125
TOTAL DOLLARS INVOICED	\$52,968.23	\$38,777.90	\$91,746
Aging Program - Title III-B	\$6,481.92		\$6,482
Transportation Disadvantaged Program	\$31,504.46		\$31,504
Florida Agency for Persons with Disabilities		\$38,777.90	\$38,778
Florida Managed Medical Care Program (Medicaid)	\$14,981.85		\$14,982
AVERAGE COST PER TRIP	\$21.92	\$10.96	\$15.41
Aging Program - Title III-B	\$15.36	\$0.00	\$15.36
Transportation Disadvantaged Program	\$25.26	\$0.00	\$25.26
Florida Agency for Persons with Disabilities	\$0.00	\$10.96	\$10.96
Florida Managed Medical Care Program (Medicaid)	\$20.06	\$0.00	\$20.06
AVERAGE COST PER MILE	\$2.02	\$1.79	\$1.92
AVERAGE COST PER REVENUE VEHICLE MILE	\$2.77		\$4.79
AVERAGE COST PER HOUR	\$26.42	\$34.62	\$29.36
TRIP PURPOSE*			
Medical	1,994	167	2,161
Employment			0
Education/Training			0
Fixed		2,848	2,848
Inclusion		130	130
Shopping			0
Meal Site	422		422
Recreation			0
Other		150	150
NUMBER OF TRIPS DENIED	0		0
NUMBER OF SINGLE PASSENGER TRIPS PROVIDED	282		282
PERCENT OF SINGLE PASSENGER TRIPS	12%	0%	5%
NUMBER OF ACCIDENTS	0		0
NUMBER OF VEHICLES	8	10	18
AVERAGE TRIPS PER VEHICLE	302	354	331
AVERAGE MILES PER TRIP	11	6	8
NUMBER OF ROADCALLS	1		1

QUARTERLY OPERATING REPORT
BRADFORD COUNTY
APRIL - JUNE 2014

OPERATING DATA	TOTAL
NUMBER OF INVOICED TRIPS	5,520
Medicaid (FCTD)	497
Title III-B	191
TD Trust Fund	1,472
Agency for Persons with Disabilities	3,360
Medicaid (HMO)	0
TOTAL VEHICLE MILES	17,101
TOTAL REVENUE VEHICLE MILES	15,023
TOTAL VEHICLE HOURS	1,431
TOTAL DOLLARS INVOICED	\$97,209.00
Medicaid (FCTD)	\$30,244.00
Title III-B	\$2,934.00
TD Trust Fund	\$33,676.00
Agency for Persons with Disabilities	\$30,354.00
Medicaid (HMO)	\$0.00
AVERAGE COST PER TRIP	\$17.61
Medicaid (FCTD)	\$60.85
Title III-B	\$15.36
TD Trust Fund	\$22.88
Agency for Persons with Disabilities	\$9.03
Medicaid (HMO)	#DIV/0!
AVERAGE COST PER MILE	\$5.68
AVERAGE COST PER REV. VEH. MI.	6
AVERAGE COST PER HOUR	68
TRIP PURPOSE*	
Medical	2,045
Employment	38
Education/Training	0
Fixed	2,696
Inclusion	95
Shopping	0
Meal Site	191
Recreation	0
Other	455
NUMBER OF TRIPS DENIED	0%
NUMBER OF SINGLE PASSENGER TRIPS PROVIDED	332
PERCENT OF SINGLE PASSENGER TRIPS	0.1
NUMBER OF ACCIDENTS	0
NUMBER OF VEHICLES	18
AVERAGE TRIPS PER VEHICLE	307
AVERAGE MILES PER TRIP	3
NUMBER OF ROADCALLS	1

CTC: Suwannee River Economic Council
 Transportation Disadvantaged Program Service Rates:
 Ambulatory: \$1.83 per passenger mile
 Wheelchair: \$3.14 per passenger mile
 Stretcher: \$6.55 per passenger mile

**2015-2016 TRANSPORTATION DISADVANTAGED TRUST FUND SUMMARY
 BRADFORD COUNTY**

MONTH/YEAR	CONTRACT AMOUNT	TOTAL DOLLARS SPENT	STATE FUNDS SPENT 90%	LOCAL MATCH 10%	TOTAL AMOUNT REMAINING	NUMBER OF TRIPS	AVERAGE COST PER TRIP
Jul-15	\$133,160.00	\$11,095.24	\$9,985.72	\$1,109.52	\$122,064.76	466	\$23.81
Aug-15	-	\$11,096.80	\$9,987.12	\$1,109.68	\$110,967.96	421	\$26.36
Sep-15	-	\$11,097.30	\$9,987.57	\$1,109.73	\$99,870.66	394	\$28.17
Oct-15	-				\$99,870.66		#DIV/0!
Nov-15	-				\$99,870.66		#DIV/0!
Dec-15	-				\$99,870.66		#DIV/0!
Jan-16	-				\$99,870.66		#DIV/0!
Feb-16	-				\$99,870.66		#DIV/0!
Mar-16	-				\$99,870.66		#DIV/0!
Apr-16	-				\$99,870.66		#DIV/0!
May-16	-				\$99,870.66		#DIV/0!
Jun-16	-				\$99,870.66		#DIV/0!
TOTAL	-	\$33,289.34	\$29,960.41	\$3,328.93	-	1,281	\$25.99

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**BRADFORD COUNTY
 QUARTERLY SUMMARY OF SERVICE COMPLAINTS/COMMENDATIONS
 APRIL - JUNE 2015**

TYPE OF COMPLAINT	Suwannee River Economic Council	Resolved
Vehicle Condition		-
Driver's Behavior		-
Client Behavior		-
Tardiness - Late pickup		-
Tardiness - Late dropoff		-
No Show by Operator		-
Dispatch/Scheduling		-
Service Denial		-
Other		-
TOTALS	0	-
COMMENDATIONS		-

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**BRADFORD COUNTY
UNMET TRANSPORTATION NEEDS
APRIL - JUNE 2015**

REASON FOR TRIP DENIAL	NUMBER OF TRIP DENIALS
Lack of Funding	
Trip Purpose	
Out of Service Area Trip	
Insufficient Advance Notice	
After Hours Trip Request	
Weekend Trip Request	
Other	
TOTALS	0

Source: Suwannee River Economic Council

**ATTENDANCE RECORD
BRADFORD COUNTY
TRANSPORTATION DISADVANTAGED
COORDINATING BOARD**

MEMBER/ORGANIZATION	NAME	10/14/14	1/6/15	4/14/15	7/21/15
Chair	Commissioner Danny Riddick	P	P	P	P
Alternate Chairperson	Commissioner Tommy Chastain	A	A	A	A
Florida Department of Transportation	Sandra Collins	P	P	A	P
Alternate Member	Janell Damato	A	A	A	A
Florida Department of Children and Families	Amanda Bryant		A	A	A
Alternate Member	Jaime Sanchez-Biachi		A	A	A
Agency for Health Care Administration	Pamela Hagley				
Alternate Member	(Vacant)				
Florida Department of Education	Jeffrey Aboumrad	P	P	P	P
Alternate Member	(Vacant)				
Public Education	Richard Sapp	A	A	P	A
Alternate Member	(Vacant)				
Citizen Advocate	(Vacant)				
Alternate Member	(Vacant)				
Citizen Advocate-User	(Vacant)				
Alternate Member	(Vacant)				
Elderly	(Vacant)				
Alternate Member	(Vacant)				
Veterans	Barbara Fischer	P	P	P	P
Alternate Member	(Vacant)				
Persons with Disabilities	Sherry Ruskowski	A	P	A	P
Alternate Member	(Vacant)				
Florida Association for Community Action	(Vacant)				
Alternate Member	(Vacant)				
Florida Department of Elder Affairs	(Vacant)				
Alternate Member	(Vacant)				
Children at Risk	(Vacant)				
Alternate Member	(Vacant)				
Private Transit	Steve Futch	P	P	P	A
Alternate Member	Laura Crews				
Regional Workforce Board	Linda Tatum	A	A	A	P
Alternate Member	(Vacant)				

LEGEND KEY: P-Present A-Absent - Not Applicable (newly appointed member)

ATTENDANCE POLICY: According to Article III, Section 5 of the Coordinating Board bylaws: "The North Central Florida Regional Planning Council shall review and consider rescinding the appointment of any voting member of the Board who fails to attend three consecutive meetings."

