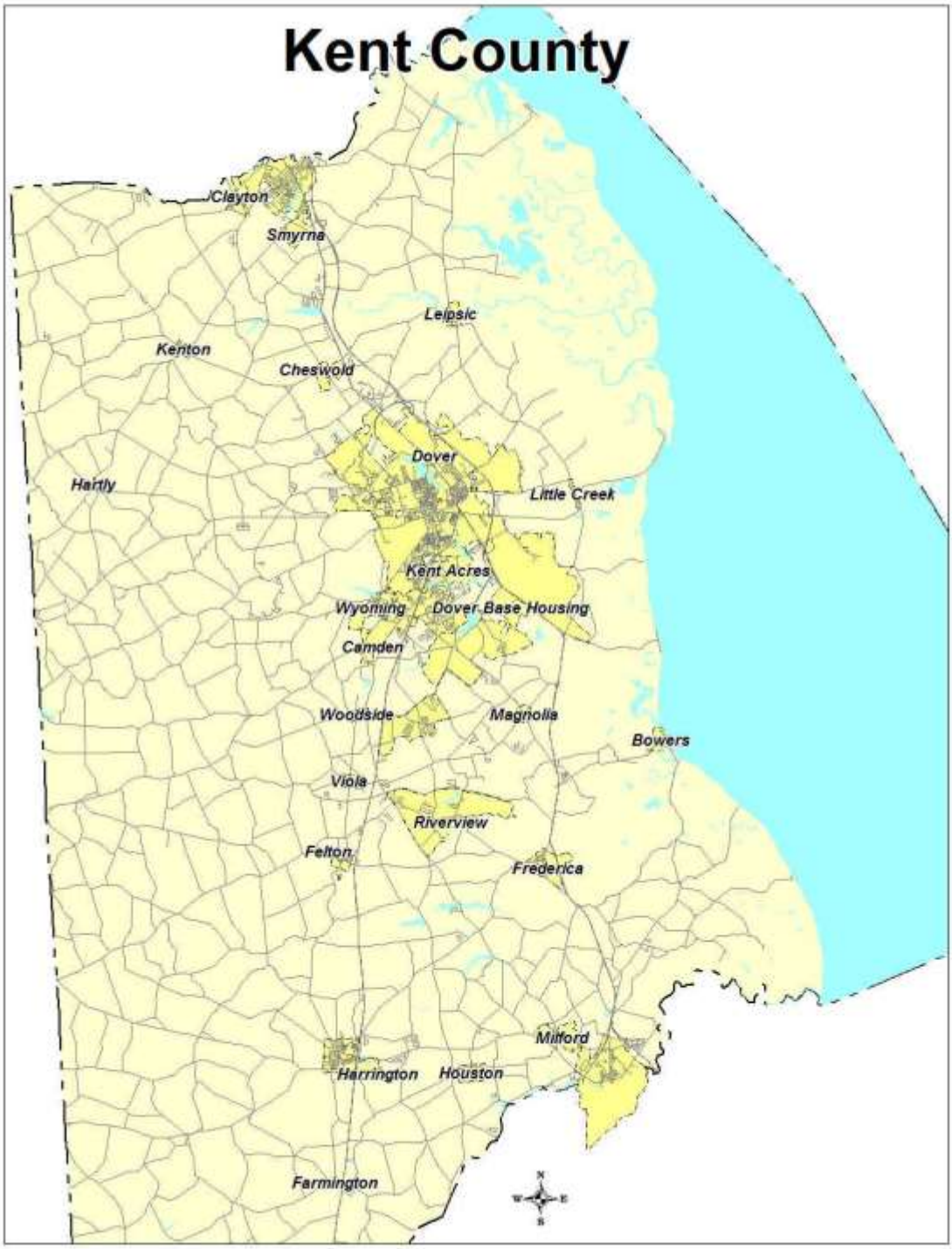
Kent County Coordinated Transit/Transportation Plan



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1.0 Introduction/Background

President George Bush released an Executive Order on Human Service Transportation Coordination in February 2004 to improve the human service transportation coordination of individuals with disabilities, older adults, and people with lower incomes. The Executive Order established the Interagency Transportation Coordinating Council on Access and Mobility (CCAM), representing 11 Federal departments. There are currently 62 Federal programs run by these Federal departments that provide some kind of transportation service for seniors, people with disabilities, or individuals with lower incomes (General Accounting Office, June 2003). These funds result in a myriad of services that are not coordinated or managed efficiently at the State and local level. As a result CCAM launched United We Ride (UWR), a national initiative to implement the requirement of the Executive Order.

In January 2005, the Delaware Transit Corporation (DTC) received funding for a UWR grant from the U.S. Department of Transportation, Federal Transit Administration (FTA), and partners at the Department of Health and Human Services (DHHS), Labor, and Education. The specific purpose of the grant is to conduct a statewide assessment - using the Framework for Action, a comprehensive evaluation and planning tool provided by the grant - to assist with the development of a Statewide Action Plan.

On August 10, 2005, President Bush signed into law the Safe, Accountable, Flexible, Efficient, Transportation Equity Act: A Legacy of Users, commonly referred to as SAFETEA-LU. SAFETEA-LU requires that communities develop a coordinated public transit – human services transportation plan (a coordinated plan) by fiscal year 2007. Starting in fiscal year 2006, projects funded through three programs included in SAFETEA-LU, namely, the Job Access and Reverse Commute Program (JARC, Section 5316), New Freedom (Section 5317), and the Elderly Individuals and Individuals with Disabilities (Section 5310) are required to have originated from a coordinated plan.

SAFETEA-LU's requirement of a coordinated plan and United We Ride's goals and objectives are in accord; to afford elderly citizens, persons with disabilities and /or low incomes greater access to transportation services, reduce duplication of services and gain greater efficiencies in the distribution of human transportation services. Encompassed in the coordinated plan must be an assessment of available services, an assessment of clearly defined needs and strategies to address deficiencies for target populations. All projects funded via the aforementioned programs must meet the needs identified in the coordinated plan.

Utilizing the Framework for Action, an assessment of Delaware's human service transportation system was conducted through several statewide working group meetings. The working group meetings culminated with a statewide conference to which the public, political representatives, state agency personnel, civic associations and other interested organizations will be in attendance. The meetings were held September 13th, 14th, 21st, and October 26, 2005 and February 14, 2006. The conference on the UWR Human Service Transportation Coordination Action Plan was held on March 29, 2006.

Several months after the conference, the momentum that led up to the conference dissipated. So, we took a step back to re-strategize. We realized mid-stream that trying to initiate such an effort from a statewide perspective was an enormous endeavor. As a result, the following steps were implemented.

- We refocused our attention on creating an Interagency Coordinating subcommittee in each county comprised of participating state agencies, 5310 recipients, public and private organizations.
- The Metropolitan Planning Organizations (MPO) in New Castle and Kent County began playing a greater role in facilitating the coordinated plan development process.
- The Delaware Department of Transportation (DelDOT) led the effort to develop the coordinated plan for Sussex County.

2.1 Federal Funding Programs

SAFETEA-LU requires that projects selected for funding under the Elderly Individuals and Individuals with Disabilities (5310), Job Access and Reverse Commute (JARC) (5316), and New Freedom (5317) programs be derived from a locally developed coordinated plan and that the plan be developed through a process that includes representatives from the public, private, and non-profit transportation and human service providers and the public. Projects funded under these programs are required to be selected though a competitive process. A brief description of the programs and eligible projects for each are described below.

2.2 Job Access and Reverse Commute (JARC) (5316)

To provide funding for local programs that offer job access and reverse commute services to provide transportation for low-income individuals who may live in the city and work in the suburbs. Sources of matching funds are expanded to encourage coordination with other programs such as those funded by the Department of Health and Social Services. The following are examples of programs that can be funded using JARC funds.

- Late-night and weekend service
- Guaranteed Ride Home Program
- Vanpools or shuttle services to improve access to employment or training
- Car-share or other projects to improve access to autos
- Access to childcare and training

2.3 Elderly and Disabled Program (5310)

Provides funding through a formula program to increase mobility for the elderly and persons with disabilities. Funds allocated to States for capital cost of providing services. States may allocate funds to organizations if they are designated to provide coordinated service. The allocation is made on the basis of the number of elderly and persons with disabilities in each state.

2.4 New Freedom

The New Freedom formula grant program aims to overcome existing barriers facing Americans with disabilities seeking integration into the work force and full participation in society. The intent of the program is to encourage the development of transportation services and transportations alternatives that go beyond the minimal requirements of the Americans with Disabilities Act of 1990. The following bulleted sections list projects that are considered new public transportation services beyond the minimal requirements of ADA and new transportation alternatives beyond the ADA.

2.3.1 New Public Transportation Services beyond the minimal requirements of ADA

- Expansion of paratransit service beyond the ¾ mile required by ADA

- Expansion of current hours of operation for paratransit services that are beyond those provided on fixed route services
- Provision of same day service
- Provision of escorts for through the door service

2.3.2 New Public Transportation Alternatives Beyond the ADA

- Purchasing vehicles for new accessible taxi, ride sharing and /or vanpool programs
- Expenses related to new voucher programs offered by human service providers
- New volunteer driver and aide programs
- Operational planning for the purchase of intelligent transportation technologies

A complete listing of eligible projects for New Freedom funds is found in Appendix A.

The following spreadsheet lists the allocations for the all three programs by county for fiscal year 2006.

Table 1: Federal Program Allocations by County

	New Castle	Kent	Sussex
Elderly Persons and Persons with Disabilities (5310	$406,515 (Statewide)		
Job Access Reverse Commute (5316)	$156,161	$47,028	$60,739
New Freedom (5317)	$126,493	$31,712	$48,048

2.4 Plan Goals

Governor Ruth Ann Minner designated the Delaware Department of Transportation (DelDOT) as the designated recipient for Sections 5310, 5316 and 5317 program funds. The Delaware Transit Corporation (DTC) as an agent for DelDot will distribute the funds to local entities through a competitive process. SAFETEA-LU requires that all projects funded through the next funding cycle, effective July 1, 2007, be obtained from strategies identified in a coordinated plan. The overarching goals of this planning effort are to satisfy the requirement of both the designated recipient and SAFETEA-LU for receiving these funds.

Further, an important goal of this plan is to develop and provide a network of diverse stakeholders with a common interest in human service transportation an opportunity to convene and collaborate on how best to provide transportation services to the targeted populations identified in the three programs noted above. Most importantly, the stakeholders are called upon to identify service gaps, identify unmet needs and/or barriers to coordination and strategically develop solutions that are most appropriate to meet the identified needs. In addition, stakeholders will develop priorities to meet these needs based on available funding and local circumstances for inclusion in the plan.

Stakeholder outreach and participation is key to the development of the plan. Federal guidance issued by FTA specifically requires participation, and recommends that it come from a broad base of groups and organizations involved in human service transportation. Participants in the plan development process include, but are not limited to, transportation planning agencies, public transportation providers, private transportation providers, non-profit transportation providers, human service agencies, advocacy organizations, community based organizations and elected officials.[1]

[1] Federal Register: March 15, 2006 (Volume 71, Number 50, pages 13459-60)

3.0 Existing Efforts to Promote Human Service Coordination

3.1 The mission of our State: Livable Delaware

The mission of our State, as it relates to the coordination of human service transportation, is embedded in Governor Ruth Ann Minner's Livable Delaware Plan. The Livable Delaware Plan is a planning tool assisting state agencies in understanding what role they play in the lives of Delaware's citizens. The goal of the plan is to direct growth to areas where infrastructure, services, and planning are in place to handle the phenomenal growth Delaware is experiencing.

Both the House of Representatives and the State Senate took steps to solidify Governor Minner's Livable Delaware Plan by passing Senate Bill 105. This legislation exemplifies our State's top down approach toward coordination and collaboration of transportation resources. This law effectively created the Livable Delaware Advisory Council on Planning and Coordination. The advisory council, chaired by the Lieutenant Governor, is comprised of representatives of local governments, counties, the Delaware Department of Transportation (DelDOT), The Transportation Management Association of Delaware (TMA), civic associations, non-profit organizations, private for profit entities, and others.

In response to the aforementioned legislation, all state agencies were required by executive order to review their policies and revise them to be consistent with the Livable Delaware Plan. Noted below are three goals listed in "The Livable Delaware" document that compliments SAFETEA-LU and United We Ride

- *Goal #1: Direct investment and future development to existing communities, urban concentrations, and growth areas;*
- *Goal #9: Promote mobility for people and goods through a balanced system of transportation options;*
- *Goal #10: Improve access to educational opportunities, health care and human services for all Delawareans*.

3.2 Governor's Commission on Community Based Alternatives for Persons with Disabilities:

The Governor's Commission on Community Based Alternatives for Persons with Disabilities is charged with improving Delaware's system of supports and services in the community for persons with disabilities. Members including government officials, legislators, practicing professionals, and self-advocates involved in the disability community have proposed 10 goals for the next five years that will improve access to services in the areas of Assessment, Employment, Healthcare, Hosing, a Money Follows the Person program and Workforce Development. Below are the guiding principles that form the foundation of the Commission's mission and the prioritized goals and objectives as they relate to transportation.

Guiding Principles

- *Seek a balance between the provider and the user*

- *Services should reflect and respond to the transition throughout people's lives – to/from education, to/from employment, to/from services etc.*
- *Universal health coverage should be available for all people, regardless of disability status*
- *Seek self-directed, self-managed services when possible*
- *Consumer choice*
- *Outcome data for all public services and programs across all divisions should be used to make programmatic and funding decisions*
- *"Least restrictive environment"*

Goal 4: Ensure that reliable transportation services and choice are available.

- *Objectives*
    - *A. Develop accessible taxi service*
    - *B. Expand fixed route service*
    - *C. Provide additional paratransit service*
    - *D. Provide non-medical emergency transport*
    - *E. Develop same-day paratransit service*
    - *F. Provide driver education]*
    - *G. Provide coordinated repair services*
    - *H. Promote accessible car/van pooling*
    - *I. Dedicate funding sufficient to meet demand*
    - *J. Enhance personal vehicle ownership programs*
    - *K. Review motorist signage policy*
    - *L. Develop employer-sponsored transportation*
    - *M. Ensure that destination are accessible and appropriate and enforcing Transit Oriented Development*

3.3 Temporary Assistance for Needy Families (TANF) Team:

As was mentioned above, the Livable Delaware initiative exemplifies the top down approach toward coordination and collaboration of transportation resources. DTC has established a model coordination effort with the JARC program. This grant was awarded to four State agencies, consisting of the Department of Labor (DOL), Delaware Economic Development Office (DEDO), DelDOT and Department of Health and Social Services (DHSS) to provide transportation to low-income and TANF clients. The TANF team meets regularly to assess the progress of the program's intent and identify pocket locations of low-income residents in need of transportation services. DTC was awarded the American Public Transportation Association's (APTA) Welfare to Work award for collaboration and innovation in 2001. The TANF Team transportation initiatives, funded by the JARC grant provide specific services to meet the needs of the low-income residents in each of the three counties. In the more urban New Castle County, a late night and Sunday shuttle provides work transportation, in Kent County, a fixed route service connects the more rural west side to the fixed route service in Dover. In Sussex County, demand response van service operates for welfare recipients as well as a shuttle to connect three economically depressed towns to employment opportunities in Salisbury, MD. These programs as well as additional fixed route services in each county have been

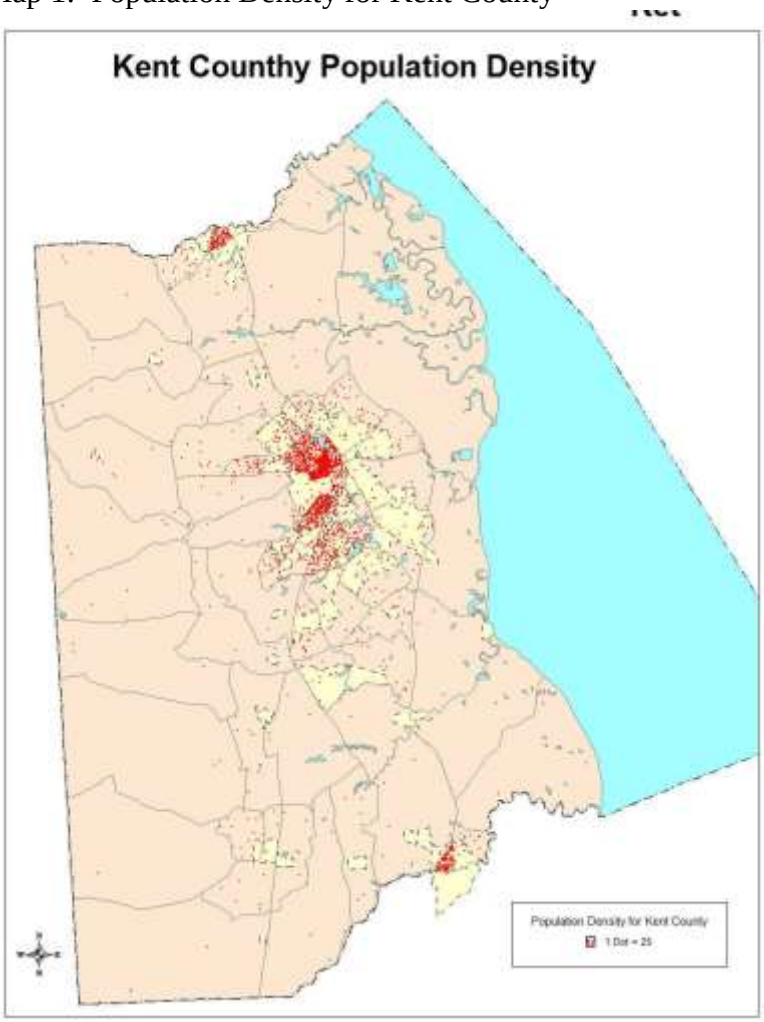
invaluable additions to transit allowing low-income residents help toward self-sufficiency.

4.0 Demographic Profile:

Located on the eastern seaboard of the United States, and bordered by New Jersey, Pennsylvania and Maryland, Delaware ranks 49th in the nation in size with a total area of 1,982 square miles. Kent County, centrally located between New Castle and Sussex County is a part of the Dover Metropolitan Statistical Area. With a total land area of 594 square miles, U.S. Census estimates Kent County having a total population of 140,205.

As was noted in the introduction of this document, our efforts to step back and re-strategize stem from the realization that developing a statewide coordinated plan would require multiple solutions tailored to the needs identified in each county. Ranked 7th in the nation, Delaware has a population density of 401.1 persons per square mile. The population density for Kent County is 215 persons per square mile. Kent County is mostly rural with the City of Dover as the main hub of economic activity. Map 1 depicts the population density associated with Kent County.

Map 1: Population Density for Kent County



Population Characteristics

The following charts provide statistical information on persons with disabilities, low-income individual and elderly citizens.

Table 2: Population Characteristics

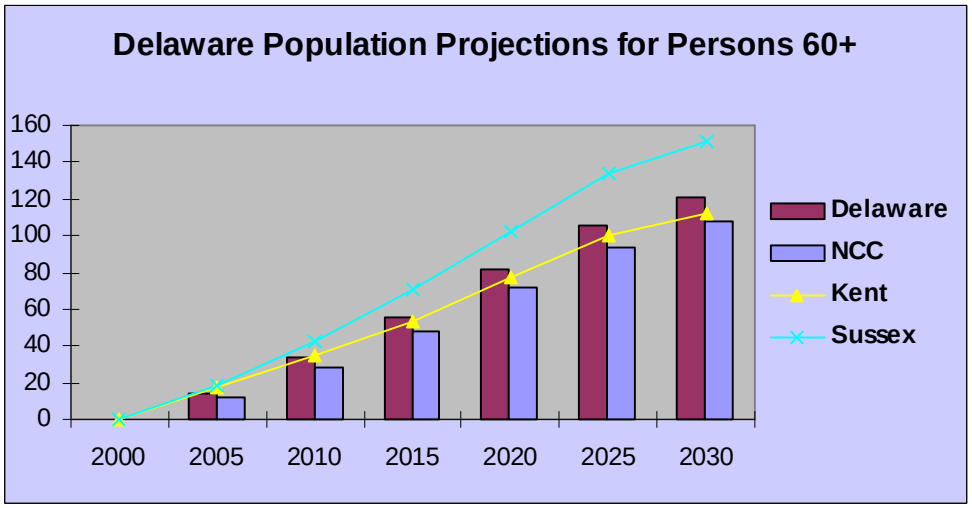
Area	Total Pop.	% of State Pop.	% of person age 65+	% person w/ disability	% families poverty level
Delaware	818,587		13%	14.3%	10.40%
New Castle	505,271	61.7%	11.3%	14.1%	10.10%
Kent	140,205	17.1%	11.9%	17.6%	10.70%
Sussex	173,111	21.1%	19%	14.4%	11%

Note: The 2005 American Community Survey universe is limited to the household population and excludes the population living in institutions, college dormitories, and other group quarters.

4.1 Older Adults:

Elderly residents make up 13% of Delaware's population. Census data for 2005 estimates older adults comprising approximately 11.9% Kent County. The graph below depicts the projected population growth for persons 60 years of age and older. The projected percentage change in year 2030 from 2000 for Kent County is 119%. In 2030 there will be approximately 296,739 elderly citizens in Delaware representing a percentage increase of 120.8%[2].

Chart 1: Projected Population Growth for Persons 60+



[2]Source:

Delaware Population Consortium, Annual Population Projections

September 23, 2003, Version 2003.0

In the year 2025 the projected increase of persons 60 years and older will represent nearly one-third of Delaware's population. Elderly citizens will comprise 21% of the residents in Kent County

4.2 Persons with Disabilities:

Attempting to solidify the definition of, and develop metrics for, disability has been an on going effort of the Census Bureau and other statistical bodies for a number of years. The challenges of developing reliable statistics are complex and numerous. The information cited in this document is consistent with the Census 2000 and 2005 estimates. According to the census bureau disability is defined as, "A long-lasting physical, mental, or emotional condition. This condition can make it difficult for a person to do activities such as walking, climbing stairs, dressing, bathing, learning, or remembering. This condition can impede a person from being able to go outside the home alone or to work at a job or business." The disability statistics cited in this document differ from the definition and process used to determine eligibility for paratransit services at DTC. According to the Americans with Disabilities Act, data about disabled persons experiencing difficulties going outside the home and work disabilities are important to ensure comparable public transportation services for all segments of the population.

Approximately 16% of the American public reported a disability in the 2000 census. Since 2000 the number of disabled citizens in Kent County increased by approximately 3% from 21,712 to 22,508, moving the statistic just above the national average.

4.3 Low Income:

On August 22, 1996, "The Personal Responsibility and Work Opportunity Reconciliation Act of 1996" (P.L.104-193, also known as PRWORA) became law. This comprehensive, bipartisan legislation changed the nation's welfare system into one requiring work in exchange for time-limited cash assistance. It created the Temporary Assistance for Needy Families (TANF) program, which replaced the Aid to Families with Dependent Children (AFDC).

The U.S. Census uses income thresholds by family size and composition to determine who is in poverty. If the total income of the family is below the threshold, then every person considered a member of that family is considered in poverty.

Nationwide, approximately 13.3 % of Americans are considered in poverty. Statewide, and in Kent County, statistics for individuals considered below the poverty line is below the national average.

Another measure used when estimating statistics of individuals or families who are low income is the use of Temporary Assistance for Needy Families funds (TANF) administered by the Department of Health and Social Services (DHSS). TANF is Delaware's main cash assistance program. It is administered through a joint effort of the Division of Social Services (DSS), Delaware Department of Labor, Delaware Department of Transportation and the Delaware Economic Development Office. The goal of TANF is

to give people temporary help until they get a job. Within the program both the State and the TANF client have responsibilities. The State provides positive incentives for the family to become self-sufficient, and the family must accept responsibility to become self-sufficient and self-supporting.

Table 3: February 2005 TANF Statistics

February 2005 TANF statistics			
Total Caseload			
Month	Number	% Change Since 1/1993	% Change Since 4/1994
		-11,285	-11,803
Current Month	6,186	-45.18%	-47.59%
Same Month Last Year	6,114	-45.82%	-48.20%
10/95 Caseload	10,260	-9.08%	-13.07%

The statistics in Table 3 show that since January 1993 the caseload of TANF clients decreased 45.18% from 11,285 to 6,186. These statistics epitomize the success Delaware has had in assisting people away from public assistance and onto a path of financial independence.

The new law succeeded in reducing the number of recipients receiving TANF funds. However, according the Report of the Public Assistance Task Force, The Realities of Poverty in Delaware 1999 Update, poverty continues to escalate. One key aspect of poverty in Delaware is the location factors that contribute to the need for public assistance. Lack of evening and weekend service prevent low-income persons from accessing jobs in the suburbs and rural areas throughout Kent County. In an effort to meet this demand DTC utilizes the JARC funds to support the following bus route.

Following is a summary of the Harrington to Dover Shuttle funded by the grant.

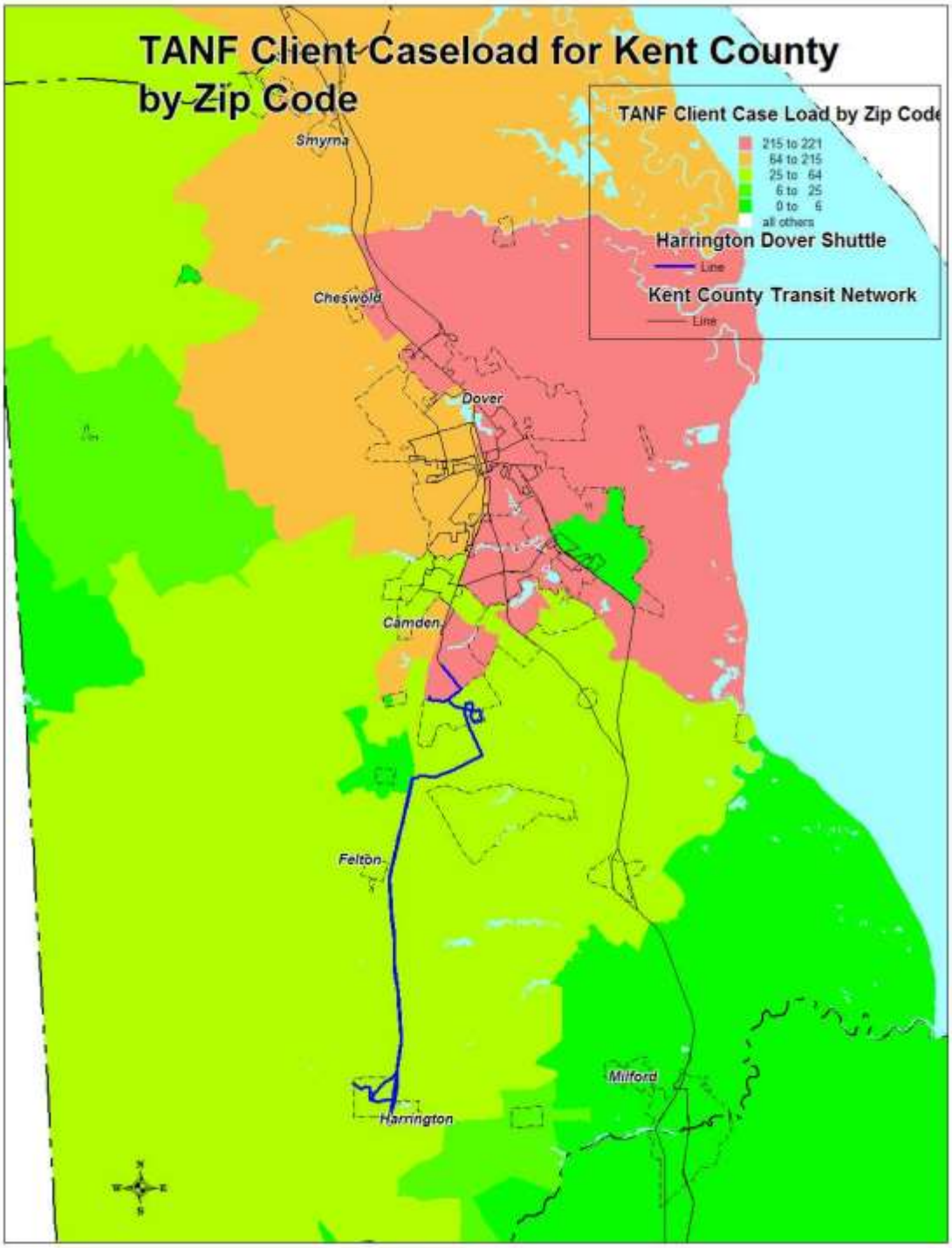
The Harrington to Dover Shuttle is a fixed route shuttle service connecting with DART First State bus routes. This shuttle serves low-income residential areas and Polytech High School. The shuttle started operation January 2002 and has been open to the public since its inception.

Since January 2002, the Harrington-Dover Shuttle has been free of charge due to the federal Job Access grant that funds the shuttle. Federal budget cuts have drastically reduced the Job Access grant amount causing a deficit. The TANF Team (the four agency team that received the grant) began charging a $1.00 fare per ride on May 21, 2007. Table 4 shows the operating statistics for the Harrington Dover service and Map 2 depicts the TANF client caseload by zip code for Kent County.

Table 4: TANF Harrington to Dover Shuttle in Kent County

Route #	Start Date	# of Trips	# of Days/wk	Hours/Wk. Day	Hours/yr.
Harrington/Dover Shuttle	3-Jan-02	14	5	13.65	3467.1

Map 2: Kent Client Caseload by Zip Code and DTC's Harrington Dover Shuttle



5.1 Stakeholder Participation and Public Outreach

After receiving notification of the United We Ride grant in January 2005, DTC formed an internal working group to develop a planning agenda for the Statewide United We Ride Conference. Several methodologies were employed to get maximum participation for Delaware's United We Ride Conference and the development of the coordinated plan. Between the months of August 2005 and March 2006 the Coordinated Human Service Outreach Record comprised of well over 50 entries detailing meetings with state agency personnel and internal staff. Within that time period, presentations were given to the Elderly and Disabled Technical Advisory Committee (EDTAC), the Governors' Commission on Community Based Alternatives, and the TANF Team. In addition, a web link was created on DTC's web site to inform the public about the conference. Two weeks before the conference a reminder conference invitation card was sent to everyone on the Initial United We Ride Contact List and the Conference Invitation List.

A total of 123 persons were invited to the conference, with 68 persons attending the United We Ride Conference held at the Modern Maturity Center in Dover, Delaware on March 29, 2006. The initial United We Ride Contact List, the Conference Invitation List and the list of attendees are documented in Appendix B.

Since the conference, the MPO's in Kent and New Castle County have been facilitating the plan development process and as such developed a list of contacts and participants for the development of the coordinated plan. On average, there has been one meeting held in Kent and New Castle County every month.

These meeting resulted in the following task being accomplished:

- Stakeholders were educated on the requirements stipulated by SAFETEA-LU
- Identification of available transportation services
- Identification of gaps in services and unmet needs
- Identification of potential strategies
- Prioritization of solutions based on the availability of resources

Letters of invitations were sent out to state agencies, private and non-profit transportation providers, community and civic associations and 5310 recipients. In addition, surveys were distributed to gain greater insight on the availability of transportation services.

Public meetings will be held in August and September in Kent and New Castle County. The purpose of the meetings will be to gain acceptance of the plans from the general public and offer them the opportunity to comment on the findings and strategies identified in the plans.

6.0 Existing Transportation Services

According to the Delaware Transportation Directory 2006, there are 68 transportation providers in Delaware. The table below organizes the directory by the type of service each company provides. Of the total number of providers, 8.7% are non-profit transportation entities. These non-profit transportation entities receive funding for the provision of the majority, if not all, of transportation services for seniors, people with disabilities, or individuals with lower incomes. Table 5 documents the list of providers for Kent County and the services they provide. The myriad of services currently provided by the non-profit entities are not coordinated or managed efficiently at the State and local level.

Table 5: Delaware Transportation Directory 2006

Kent County									
	For Profit	Non-Profit	Airport Shuttle Service	Charter Service	Formal Limousine Service	Medical Transportation	Public Transportation	School Bus Transportation	Taxi Service
After 6	x		x		x		x		
A Personal Touch Limousine	x		x		x		x		
Class Limousine Service	x		x						
D & K's Transportation	x					x			
DART First State		x				x	x		
Dawson Bus Service	x			x				x	
Department of Health and Social Services		x				x	x		
Diamond Transport	x		x			x	x		
Five Star Limousine Service	x		x	x		x			x
Generations Home Care		x				x	x		
Golden Chariot	x		x				x		
Joy Transportation	x						x		
Limousines Unlimited	x		x	x	x		x		
Prime Care Medical Transport	x					x			
Racing Limos of Dover	x		x		x				
SMI Transportation	x		x			x			
Wadkins Garage									x
Sussex County									
	For Profit	Non-Profit	Airport Shuttle Service	Charter Service	Formal Limousine Service	Medical Transportation	Public Transportation	School Bus Transportation	Taxi Service
DART First State		x				x	x		
Delmarva Transportation	x					x	x		
Department of Health and Social Services		x				x	x		
First State Community Action Agency		x				x			
Generations Home Care		x				x	x		
Jor-Lim, Inc	x		x	x				x	
Laidlaw Transit Services	x						x		

Surfside Limousine Service	x		x	x	x				
Transit U / The Jolly Trolley of Rehoboth Beach	x			x		x			

DTC and the Department of Health and Social Services directly, or indirectly, provide the majority of trips to seniors, people with disabilities and low-income individuals. As such, a brief description of the services they provide will follow.

6.1 Delaware Transit Corporation (DTC – Dart First State)

6.1 Paratransit

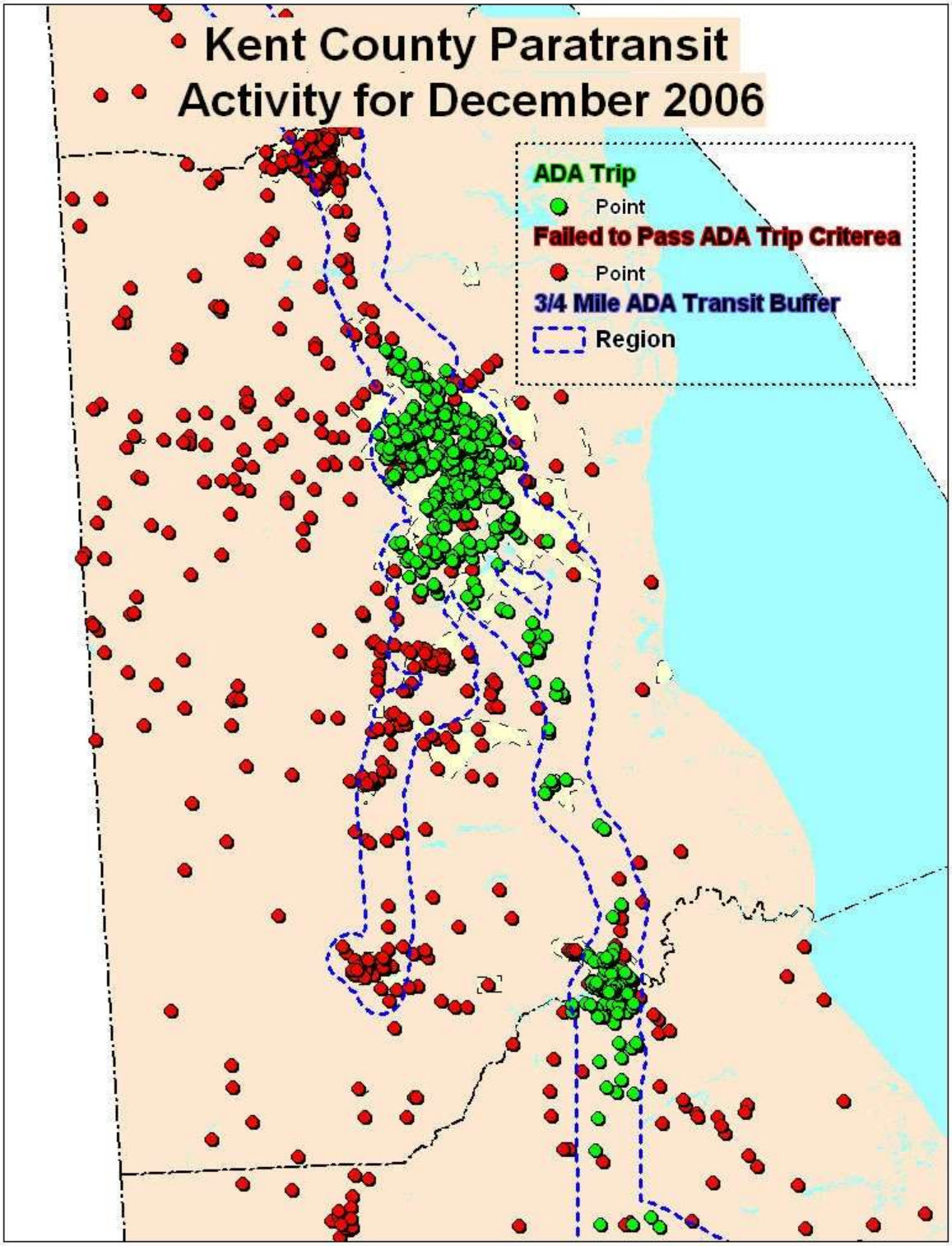
DTC provides demand response, door-to-door, paratransit services throughout the state. The Americans with Disabilities Act of 1990 (ADA), requires transit agencies to provide paratransit services for eligible riders within 3/4 mile of the alignment of fixed route services. DTC provides such services throughout Delaware, currently averaging 3,700 paratransit trips per day. DTC also provides paratransit services for renal care patients statewide, and senior citizens (65+) in Kent and Sussex Counties. Paratransit is among the fastest growing segment of DTC's services, approaching an average increase of 12% in ridership for fiscal year 2006. There were 791,755 total Paratransit trips statewide in FY06. There are expected to be 835,864 Paratransit trips statewide in FY07.

Below is a map of paratransit activity in Kent County. The map database was designed to determine whether a previously taken paratransit trip met the requirements of what qualifies as an ADA trip. In order for a trip to meet the ADA requirements, the first and second leg (Pick-Up and Drop-Off) of the trip had to have occurred

- within the three quarter mile boundary (P),
- during the time when fixed route service was in operation (P)
- and on a day when fixed route service was available (P).

If either leg of the trip was beyond the three quarter mile boundary (FP), occurred on a day when fixed route service was not in operation (FD), or occurred at a time when fixed route service was not available (FT) then the trip failed to pass the criteria set by ADA to be classified as an ADA trip. This map exemplifies how DTC's paratransit system and policies determining eligibility go beyond the requirements of the Americans with Disabilities Act and the regulations established by the US Department of Transportation.

Map 3: Kent County Paratransit Activity



6.2 Fixed Route

DTC's system is small particularly relative to the extensive geographic breadth of its system. DTC's fleet currently amounts to 215 vehicles, 198 of which are operated directly by the agency. Private carriers operate the other 17. Seventy percent of DTC's fleet is concentrated in New Castle County, with the balance distributed in Kent and Sussex Counties. Unlike the less populous counties, most of New Castle's vehicles operate on fixed-route services. By comparison, only 9% and 5% of DTC's fleet in Sussex and Kent Counties, respectively, operated on such routes. The relatively high proportion of paratransit services in these counties reflects DTC's greater orientation toward providing basic mobility services there. Table 6 lists the statistics associated with DTC's fleet statewide.

Table 6: Delaware Transit Fleet May 2007

Fleet					
	Fixed Route	**Paratransit**	**Total**	**Fixed %**	**Paratransit**
New Castle	153	116	269	71.16%	52.97%
Kent	13	47	60	6.05%	21.46%
Sussex	20	56	76	9.30%	25.57%
Contract	17			7.91%	
Inter-County	10			4.65%	
Training	2			0.93%	
Total	215	219	**434**		

6.3 Kent County Fixed Route

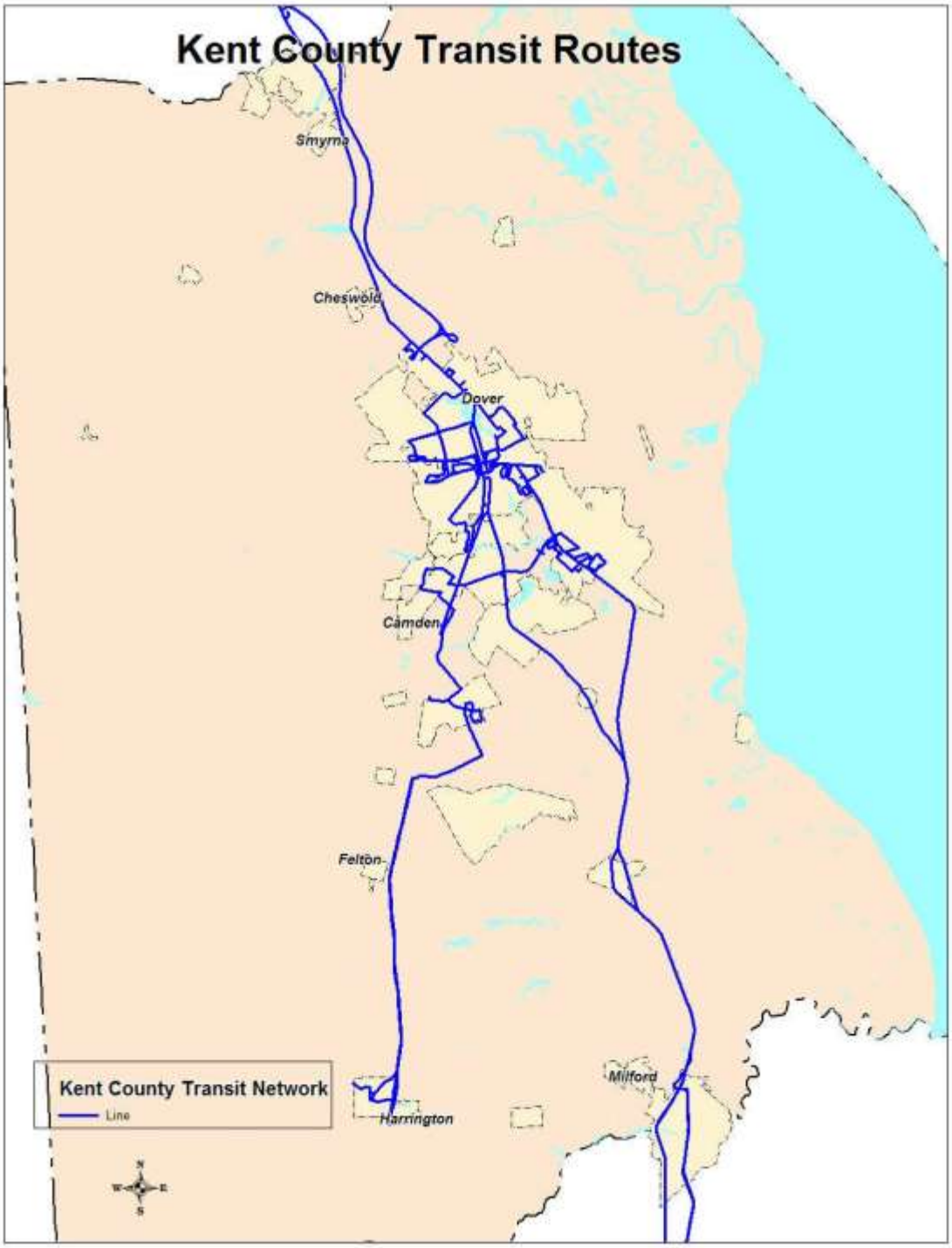
DTC serves Kent County with a radial/loop transit system focused on the Water Street Transfer Center in downtown Dover. The system provides basic mobility for the city's transit-dependent households; accessibility to the State capital, Dover Air Force Base, Dover's downtown area and nearby colleges; and circulation throughout the Dover community.

DTC operates 13 fixed-route, scheduled services in Kent County, primarily between 6 a.m. and 6 p.m. on weekdays, with no service on evenings or weekends. Dover benefits from a system of 11 bus routes that provide enough spatial coverage to bring almost all parts of the city within walking distance of a transit stop. All of these bus routes operate on clock-face headways in a timed-transfer system that pulses from the Water Street Transfer Center. All but four of DTC's routes in Kent County operate at headways of 60-minutes. The few others run 30-minute headways. Fixed-route services in Kent County operate until 6pm, while paratransit continues until 10 p.m.

6.4 Inter-County Service

DTC operates a highly successful inter-county route from Wilmington to Dover via SR-1. The overall goal of the route is to reduce the one-way travel time to make it comparable to the single occupant vehicle. Route 301 operates 10 local round trips and 6 one-way express trips during weekdays between 4:38 a.m. and 8:48 p.m.

Map 4: Kent County Fixed Routes Transit Network



6.5 5310 Services

In 2006, the FTA Section 5310 program provided 346,185 trips to the residents of Delaware. The FTA and the State of Delaware jointly fund the program. These trips covered 1,249,051 miles throughout the year, and 99,979 hours were spent providing special transportation services through the use of the 5310 vehicles.

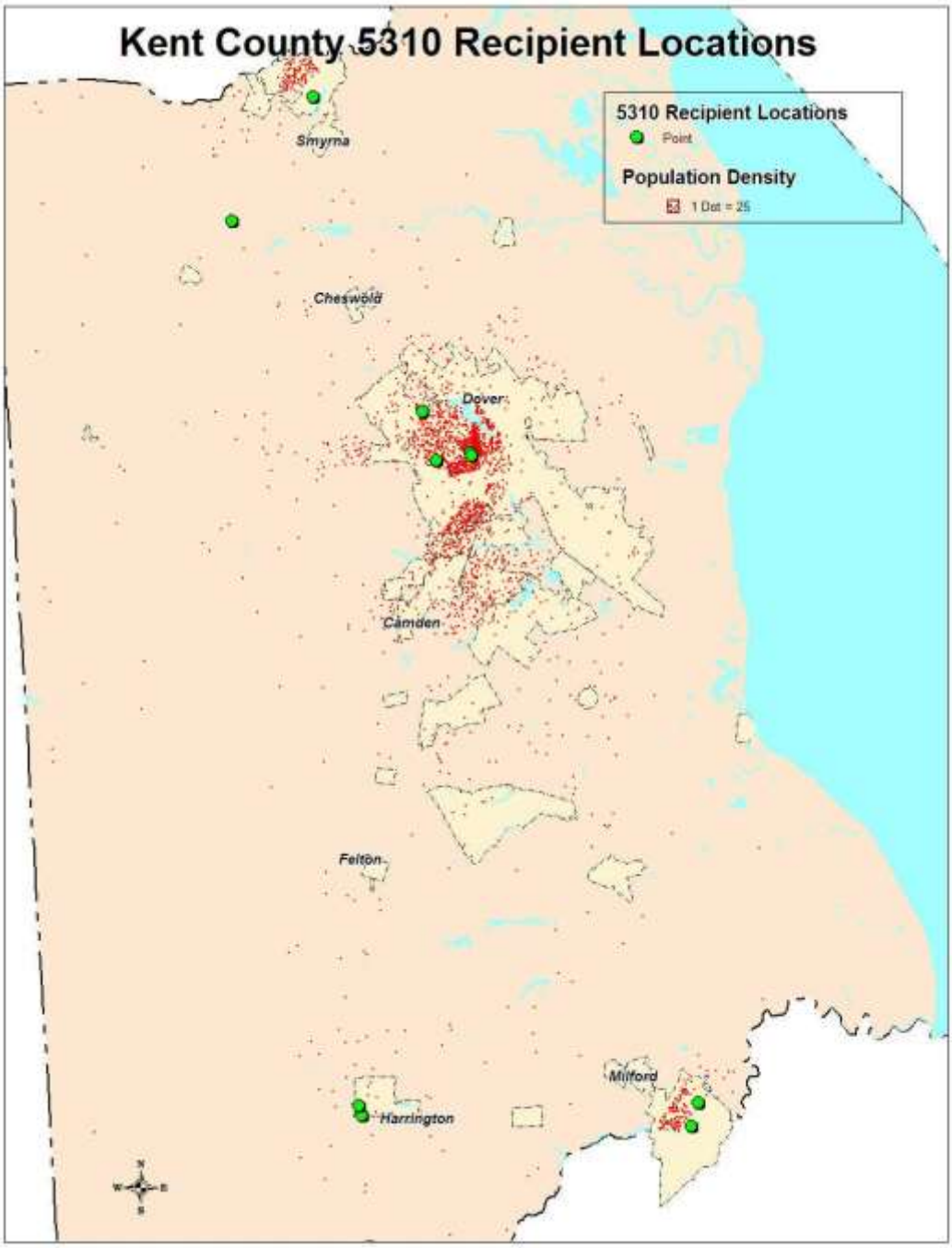
Volunteer drivers, as well as agency paid drivers, help operate the service. Since 2000, there have been 110 vehicles operating in Delaware as a result of the FTA Section 5310 program. At the end of 2006, these vehicles have logged a total of 6,034,427 miles.

The vehicles are used by private, non-profit organizations such as senior centers, community centers, churches, nursing homes and other social service agencies and community-based organizations to provide transportation to their clients for shopping, medical appointments and recreation. All of the 5310 vehicles are wheelchair accessible.

With the growing number of retirees in Delaware, the DTC managed FTA 5310 program will grow and continue to be a necessity. These participating agencies help DTC to provide an invaluable service to Delaware's residents. The number of trips has grown from 240,791 in 2000 to 346,185 in 2006. In 2000, 92,186 service miles were logged, and in 2006, the number grew to 1,249,051 service miles.

The 2006 funding available to the Section 5310 program in Delaware included $500,000 in federal/state contributions and $20,000 in agency capital contributions. In 2000, the total funding available to the Section 5310 program was $421,250. Over the last few years, Delaware has made a strong commitment to the Section 5310 program, many times providing more than the required 20% share of funding.

Map 5: Kent County 5310 Recipient Locations



6.6 Department of Health and Social Services

The Department of Health and Social Service (DHSS) manages Delaware's Medicaid Program. Medicaid furnishes medical assistance to eligible low-income families and to eligible aged, blind and/or disabled people whose income is insufficient to meet the cost of necessary medical services. Medicaid pays for: doctor visits, hospital care, labs, prescription drugs, transportation, routine shots for children, mental health and substance abuse services.

The Department of Health and Social Services (DHSS) has seen comparable growth rates to DTC's paratransit trips in Medicaid trips. Within the span of four years, from FY1999 to FY2002, the cost of providing non-emergency medical transportation trips has more than doubled from 1.9 million trips to well over 4 million trips. To alleviate the rising cost of providing these services, DHSS contracted with LogistiCare Solutions, LLC in October 2002 to better manage the cost of providing non-emergency medical transportation for clients of Medicaid and the Chronic Renal Disease Program[3]. In an effort to assist DHSS and LogistiCare, DTC provides Geographic Information Systems (GIS) data detailing bus stop alignments, bus stop locations, and geo-referenced data on all Medicaid customers within a one-quarter mile radius of all bus stops statewide. Currently, DHSS provides well over 4000 Medicaid trips per month, with 12% of these trips for fixed route transit, 60% for paratransit, and the remaining trips for ambulatory care.

6.7 Rideshare Delaware

Rideshare Delaware is a program administered by DART that helps commuters find and use alternative modes of transportation including carpools, vanpools, transit, and supportive bicycle or pedestrian facilities. The goal of Rideshare Delaware is to reduce the number of single occupancy vehicle trip making as a way to improve air quality and manage traffic congestion.

Rideshare Delaware offers free ride matching services for commuters working in Delaware as well as for parents of Delaware school students; an emergency ride home benefit for registered commuters actively ridesharing to work; vanpool services; and, transportation benefit assistance to employers in Delaware.

As of the end of fiscal 2007, 10% of the 5,900 program participants live in Kent County. 82 Kent County employers are represented by this percentage of participants.

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[3] State Hope to Rein in Medical Transport Cost; The *Business Ledger, November 2002:* http://www.ncbl.com/archive/11-02healthcare.html

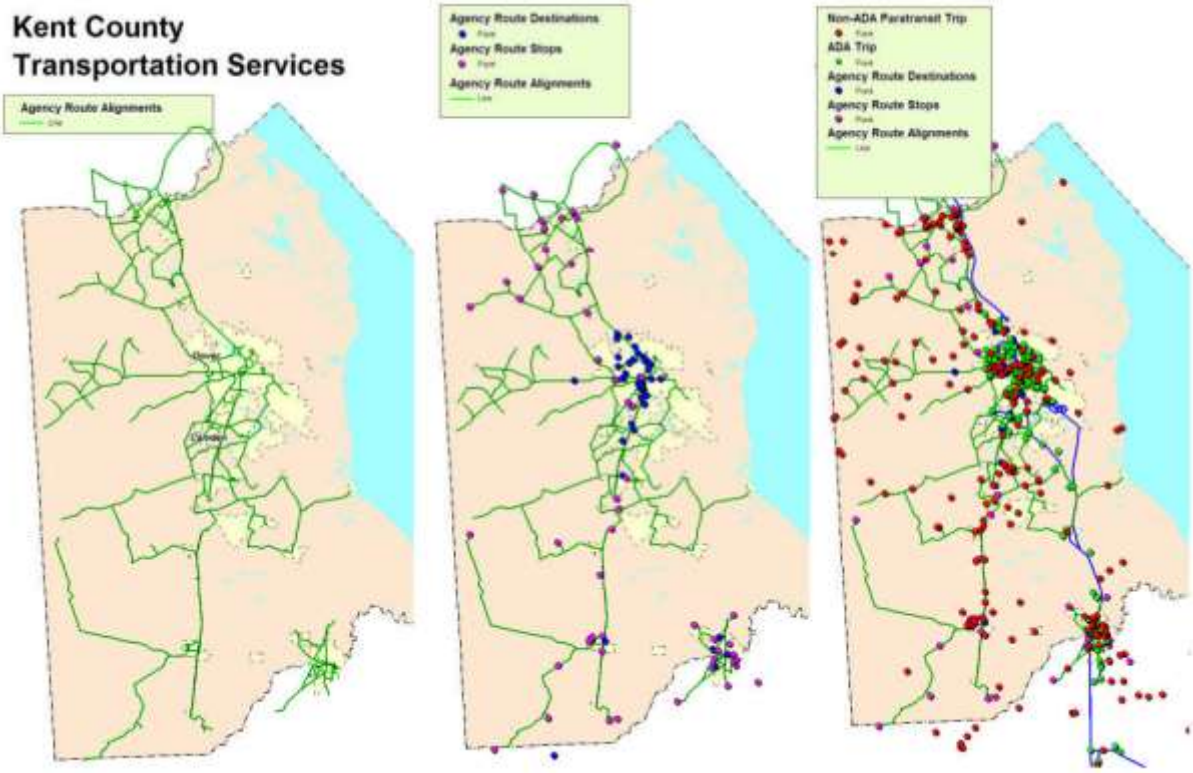
7.1 Key Findings: Unmet Needs

7.2 Gaps in Service

Through several research methods, participants in Kent County identified several transportation needs. The most common areas of destination were medical facilities, grocery or shopping facilities, social and recreational activities, and employment. The majority of transportation providers in Kent County provide service for the entire county and all provide service between the hours of 9:00 a.m. and 2:00 p.m. Further, 82% of their client transportation needs are met through the utilization of the organization's vehicle.

In addition, the MPO conducted a spatial analysis of the services provided by those participating in the plan development process. Referring to Map 6 on the opposite page, the first map in the series depicts the route alignments of 5310 recipient agency subscription trips. The second map in the series provides an overlay depicting the route alignment data and the data associated with the 5310 subscription trip route stops and route destinations. The last map in the series is a depiction of the aforementioned data elements and DTC's paratransit trip activity and fixed transit route network.

Map 6: Kent County Transportation Services



In spite of the aforementioned data informing workshop participant about the service availability and the extensive coverage of transportation services in Kent County, people needing specialized transportation services in the evening and on weekends have limited mobility options.

7.3 Centralized Coordinated Transportation System

New capabilities and opportunities are being created through the use of emerging technologies. States throughout the county are considering using ITS technologies to provide centralized coordination of community transportation services. The idea of centralized coordinated human service transportation system follows this stream of thought. The coordinated service concept will require the use of integrated technologies such as automatic vehicle location systems, advanced communication technology, the centralizing of multiple databases and real-time scheduling information. In addition to the technological needs, agreements will have to be established between participant organizations to delineate management roles and responsibilities and address issues associated with cost, eligibility, service standards and the sharing of information across programs and providers.

7.4 Lack of Operational Resources

One of the key unmet needs identified in our workshops was the need for additional funds to hire and/or retain drivers. Many participants noted that their organization lack

the resources to accomplish this goal. Those organizations able to hire operators have a difficult time retaining them because of the low wages set for these entry-level positions. Attractive pay and benefits offered by other employers contribute to the reduction and the unavailability of potential operators. The use of part-time operators contributes to absenteeism and eventual operator unavailability as well. In most cases the pay is relatively low and benefits are reduced or not provided at all. In addition, it is impossible to inform part-time operators when they can expect to become full-time employees. During that time, part-time operators might find other full-time employment with better hours and benefits.

Without the funding to pay for more competitive wages and provide better benefits, transportation providers will continue to struggle to meet the challenges associated with providing quality transportation service.

7.5 Duplication and Redundancy

Each of the transportation providers in Kent County has its own mission, eligibility requirements, funding sources, and institutional objectives, resulting in significant duplication of resources and services. Workshop participants noted that vehicles from different agencies travel on the same corridors at the same times, but offer different services, therefore, do not pick up additional riders (Refer to Map 6). Agencies believe that liability will increase or funding will be jeopardized if they open their services to clients not affiliated with their organizations.

7.6 Agency Barriers

Delaware could maximize economies of scale, if a regional system supporting the exchange of information could allow transportation providers to share the cost of maintenance, fuel, and training. In addition, similar efficiencies could be gained by centralizing maintenance facilities and personnel for the upkeep of equipment and services. Different agencies have different requirements for vehicle safety, driver training, driver licensing and other standards.

7.7 Using the Existing Transit Infrastructure

Utilizing the existing fixed route transit network as the base of a coordinated system, and filling in the gaps with coordinated community service delivery systems is the most effective way to realize efficiencies. Studies have shown that the most effective coordination strategies build on existing resources and infrastructure. Although not associated with this coordinated plan directly, the expansion of fixed route transit should be considered a direct benefit to a coordinated transit delivery system.

7.8 Barriers to Coordination

- There are opportunities to take advantage of the empty seats in Kent County; however, obtaining adequate insurance presents a potential barrier needing further research.

- Funding needs to be available to cover the cost associated with operating, maintaining and replacing vehicles.

- Training: Based upon the customers being served, different training standards and contractual requirement must be considered.

- Organizational policy barriers (mission statements)

7.9 Unmet Needs:
The following represents a list of the unmet needs expressed in our Coordinated Transit Workshops and their complementary strategies.

- Work transportation for low income, disabled and seniors
- Non-emergency medical transportation
- Other non-emergency transportation
- Other basic quality of life transportation needs
    1. Transportation Coordinator

- Size appropriate vehicles
    1. DTC will investigate the feasibility of purchasing size appropriate vehicles

- Additional capital and operating resources to meet already identified unmet needs (waiting list)
    1. Coordinated Volunteer Driver Program
    2. Create public/private partnerships to finance the purchase of additional vehicles

- Centralized and Standardized Training
    1. Identify training needs based upon the customers served by each organization
    2. Develop a memorandum of understanding which includes acceptable minimum standards for human service transportation
    3. Develop economies of scale for training drivers

- Evening and weekend service
    1. Investigate the feasibility of using Community Transportation funds for weekend and evening service

- Replacement of older 5310 vehicles
    1. Develop a replacement schedule
- Replace older vehicles

7.10 2009 Input Regarding Unmet Needs/Service Gap

The input in this section was provided as a result of the 9/30/09 "United We Ride (UWR)" Transportation Conference. The UWR Program focuses on inter-agency coordination of transportation for low-income, disabled and senior individuals. [Initially, DART First State hosted a conference in 2006 highlighting the objectives of UWR. This 2009 conference provided an update to the counties' Coordinated Human Services Transportation Plans.]

This input is related to Kent County unmet human services transportation needs. Each unmet need also includes the type of customer that would benefit (in parentheses) at the end of each bullet (i.e. elderly, disabled and low income). Finally, if there was a specific suggestion provided for an unmet need, it has been included in blue.

Unmet needs/service gaps identified as a Kent issue:

- Evening fixed route service - extend routes 100-113 into the evening or combine some routes into the evening.
- Harrington Delaware Diamond Court and Clark's Corner to Milford. Current existing route takes approximately 2 1/2 to 3 hours to go 14 miles - Initiate a pilot shuttle service such as the Delmar and Harrington Shuttles under the 5310 Program or coordinate existing providers with town agencies. (elderly, disabled, low income)
- Evening, weekend transportation – Generations is providing it. (disabled, low income)
- Inaccessible bus stops in Harrington or along highway
- Transportation to outlying areas – include a clause in all future transportation contracts that requires the selected vendor to provide linkage on a set schedule from an outlying DART area to a main DART route. The money paid by riders from these outlying areas can help subsidize this effort. (elderly, disabled, low income; Kent and Sussex)
- Sunday service in Kent and Sussex Counties (disabled; Kent and Sussex)
- Weekend bus service in Kent & Sussex Counties and Middletown - Review need and cost of service. If feasible pilot service in both counties. (elderly, disabled, low income; Kent and Sussex)
- More options for Sussex Co. esp. rural areas – provide more transportation (elderly, disabled, low income; Kent**???** and Sussex)
- Time Mgmt/Scheduling (getting riders to location in a timely manner esp. workers) - scheduling - automated system (elderly, disabled, low income; Kent and Sussex)
- Better customer service – customer service training (elderly, disabled, low income; Kent and Sussex)

Unmet needs which were identified as a statewide issue:

- Subcontracting of 5310 vehicles/agencies to expand Para transit services - Utilize idle 5310's by having agency drivers take on specific DART trips. Have DART pay drivers' agency route and mileage. (elderly, disabled, low income)
- Increase safety when crossing multi-lane traffic roadways to/from bus stops: gives information when to cross and gives more time to cross for those with physical

limitations (walkers, canes, etc) - Accessible pedestrian signals with no right on red and ability to adjust volume (elderly, disabled, low income)

- Reduced ticket cost for New Freedom Program. At $5/ride, it can be expensive for low income and disabled riders. (elderly, disabled, low income)
- On-time delivery of riders. ADA report states 70% OTD. - Use existing capacity from community systems to improve delivery. Retain more vehicles. Move eligible disabled to transit. (elderly, disabled, low income)
- Take all complaints and not just late trips (elderly, disabled, low income)
- Take action on the 2007 Action Plan (elderly, disabled, low income)
- On-time performance needs improvement. - utilize existing technology capabilities for dispatch/AVL scheduling. (elderly, disabled, low income)
- Non-medical, after hours wheelchair accessible transportation - Create a pool of wheelchair accessible vehicles from existing non-profits. Recruit drivers and formulate fee schedule from/with agencies (elderly, disabled)
- Provide a "client-sharing" pool for 5310 providers. This would provide greater service for all riders in Delaware - Work with 5310 providers to coordinate trips. The State should provide dispatch function to facilitate. (elderly, disabled)
- $5/trip fee if client is utilizing service everyday - Discount tickets if rider is buying tickets in bulk. (disabled/low income)
- Late hour service (disabled)
- Neighborhood based van pools administered by community civic assoc. and subsidized through DART - Gauge interest through contact with civic associations and community groups. Create template for pool operation including driver requirements, fees, reporting, etc. (low income)
- Improve on-time delivery – Use technology DelDOT has to maximum advantage through aggressive use of Trapeze software and AVL.

Flex Route Service - Implement flex routing to allow deviation within a one-mile corridor from existing route

Target transportation services for Veterans - Collaborate with Veterans Administration for coordination opportunities

***Items in Red indicate 2014 Coordinated Plan updates

- **8.0 Kent County Strategy to Coordinate Human Service Transportation**

The growth in demand for transportation services in Delaware combined with the gaps in services identified in this document affords transportation providers in Kent County an opportunity to develop a coordinated human service transportation system. This section lists the vision, mission, goals and strategies that will address the gaps in services mentioned in the previous chapter.

8.1 Mission:

Through this plan the Kent Interagency Transportation Enterprise (KITE) and its members are committed maintaining and expanding personal independence through increased opportunities for mobility throughout Kent County

8.2 hared Vision:

DTC and KITE's vision is to maintain and expand personal independence through increased opportunities for mobility across the State of Delaware. Mobility is an essential element for well-being. Mobility enables independence, which lets us choose where and how we live and work so as to allow us to maintain our homes, our social networks and our lives in our community.

8.3 Goals, Objectives and Strategies

Goal 1: Provide greater mobility options for disabled, senior and low income Delawareans:

- Develop transportation options for seniors beyond fixed route transit, and paratransit
- Improve distribution of 5310 resources
- Identify origin, destination and type of denied trips
- Seek other resources to sustain the coordinated plan

Goal 2: Utilize transportation resources to maintain a good quality of life and independence for citizens in Kent County who are transportation disadvantaged

- Define and document and replacement policy for 5310 resources
- Provide person oriented transportation services – opposed to agency oriented transportation
- Investigate the feasibility of a shared maintenance and training program

Goal 3: Utilize technology to increase and enhance coordination to better service the transportation disadvantaged

- Develop real-time scheduling for better coordination
- Investigate additional technologies for future needs

Goal 4: Accessible taxi and work transportation

9.0 Prioritized Strategies

9.1 Short Term Prioritized Strategies:

1) Develop a memorandum of understanding which includes acceptable minimum standards for human service transportation

2) Identify training needs based upon the customers served by each organization

3) DTC will investigate the feasibility of purchasing size appropriate vehicles

4) Develop a replacement schedule

5) Replace older vehicles

6) Hire a transportation coordinator

   - The coordinated service concept will require the use of integrated technologies such as automatic vehicle location systems, advanced communication technology, the centralizing of multiple databases and real-time scheduling information. In addition to the technological needs, agreements will have to be established between participant organizations to delineate management roles and responsibilities and address issues associated with cost, eligibility, service standards and the sharing of information across programs and providers.

7) Coordinate Volunteer Driver Program

9.2 Long Term Strategies:

1) Develop economies of scale for training drivers
2) Investigate the feasibility of using Community Transportation funds for weekend and evening service
3) Create public/private partnerships to finance the purchase of additional vehicles

Appendix A:

New Freedom Eligible Activities[4]:

ELIGIBLE ACTIVITIES. New Freedom Program funds are available for capital and operating expenses that support new public transportation services beyond those required by the Americans with Disabilities Act of 1990 (ADA) and new public transportation alternatives beyond those required by the ADA designed to assist individuals with disabilities with accessing transportation services, including transportation to and from jobs and employment support services. For the purpose of the New Freedom Program, "new" service is any service or activity that was not operational on August 10, 2005, and did not have an identified funding source as of August 10, 2005, as evidenced by inclusion in the Transportation Improvement Plan (TIP) or the STIP. In other words, if not for the New Freedom Program, these projects would not have consideration for funding and proposed service enhancements would not be available for individuals with disabilities.

Maintenance of Effort: Recipients or subrecipients may not terminate ADA paratransit enhancements or other services funded as of August 10, 2005, in an effort to reintroduce the services as "new" and then receive New Freedom funds for those services.

Eligible projects funded with New Freedom funds may continue to be eligible for New Freedom funding indefinitely as long as the project(s) continue to be part of the coordinated plan.

Both new public transportation services and new public transportation alternatives are required to go beyond the requirements of the ADA and must (1) be targeted toward individuals with disabilities; and (2) meet the intent of the program by removing barriers to transportation and assisting persons with disabilities with transportation, including transportation to and from jobs and employment services.

The list of eligible activities is intended to be illustrative, not exhaustive. Recipients are encouraged to develop innovative solutions to meet the needs of individuals with disabilities in their communities.

- New Public Transportation Services Beyond the ADA. The following activities are examples of eligible projects meeting the definition of new public transportation.

  - Enhancing paratransit beyond minimum requirements of the ADA. ADA complementary paratransit services can be eligible under New Freedom in several ways as long as the services provided meet the definition of "new:"

[4] FTA Circular 9045.1, New Freedom Program Guidance and Application Instructions, effective May 1, 2007

- Expansion of paratransit service parameters beyond the three-fourths mile required by the ADA;

- Expansion of current hours of operation for ADA paratransit services that are beyond those provided on the fixed-route services;

- The incremental cost of providing same day service;

- The incremental cost of making door-to-door service available to all eligible ADA paratransit riders, but not as a reasonable modification for individual riders in an otherwise curb-to-curb system;

- Enhancement of the level of service by providing escorts or assisting riders through the door of their destination;

- Acquisition of vehicles and equipment designed to accommodate mobility aids that exceed the dimensions and weight ratings established for common wheelchairs under the ADA and labor costs of aides to help drivers assist passengers with over-sized wheelchairs. This would permit the acquisition of lifts with a larger capacity, as well as modifications to lifts with a 600 lb design load, and the acquisition of heavier-duty vehicles for paratransit and/or demand-response service; and

- Installation of additional securement locations in public buses beyond what is required by the ADA.

- Feeder services. New "feeder" service (transit service that provides access) to commuter rail, commuter bus, intercity rail, and intercity bus stations, for which complementary paratransit service is not required under the ADA.

- Making accessibility improvements to transit and intermodal stations not designated as key stations. Improvements for accessibility at existing transportation facilities that are not designated as key stations established under 49 CFR 37.47, 37.51, or 37.53, and that are not required under 49 CFR 37.43 as part of an alteration or renovation to an existing station, so long as the projects are clearly intended to remove barriers that would otherwise have remained. New Freedom funds are eligible to be used for new accessibility enhancements that remove barriers to individuals with disabilities so they may access greater portions of public transportation systems, such as fixed-route bus service, commuter rail, light rail and rapid rail. This may include:

- Building an accessible path to a bus stop that is currently inaccessible, including curbcuts, sidewalks, accessible pedestrian signals or other accessible features,

- Adding an elevator or ramps, detectable warnings, or other accessibility improvements to a non-key station that are not otherwise required under the ADA,

- Improving signage, or wayfinding technology, or

- Implementation of other technology improvements that enhance accessibility for people with disabilities including Intelligent Transportation Systems (ITS).

- Travel training. New training programs for individual users on awareness, knowledge, and skills of public and alternative transportation options available in their communities. This includes travel instruction and travel training services.

- New Public Transportation Alternatives Beyond the ADA. The following activities are examples of projects that are eligible as new public transportation alternatives beyond the ADA under the New Freedom Program:

  - Purchasing vehicles to support new accessible taxi, ride sharing, and/or vanpooling programs. New Freedom funds can be used to purchase and operate accessible vehicles for use in taxi, ridesharing and/or van pool programs provided that the vehicle has the capacity to accommodate a passenger who uses a "common wheelchair" as defined under 49 CFR 37.3, at a minimum, while remaining in his/her personal mobility device inside the vehicle, and meeting the same requirements for lifts, ramps and securement systems specified in 49 CFR part 38, subpart B.

  - Supporting the administration and expenses related to new voucher programs for transportation services offered by human service providers. This activity is intended to support and supplement existing transportation services by expanding the number of providers available or the number of passengers receiving transportation services. Only new voucher programs or expansion of existing programs are eligible under the New Freedom Program. Vouchers can be used as an administrative mechanism for payment of alternative transportation services to supplement available public transportation. The New Freedom Program can provide vouchers to individuals with disabilities to purchase rides, including: (a) mileage reimbursement as part of a volunteer driver program; (b) a taxi trip; or (c) trips provided by a human service agency. Providers of transportation can then submit the voucher for reimbursement to the recipient for payment based on pre-determined rates or contractual arrangements. Transit passes for use on existing fixed route or ADA

complementary paratransit service are not eligible. Vouchers are an operational expense which requires a 50/50 (Federal/local) match.

- Supporting new volunteer driver and aide programs. New volunteer driver programs are eligible and include support for costs associated with the administration, management of driver recruitment, safety, background checks, scheduling, coordination with passengers, and other related support functions, mileage reimbursement, and insurance associated with volunteer driver programs. The costs of new enhancements to increase capacity of existing volunteer driver programs are also eligible. FTA notes that any volunteer program supported by New Freedom must meet the requirements of both "new" and "beyond the ADA." FTA encourages communities to offer consideration for utilizing all available funding resources as an integrated part of the design and delivery of any volunteer driver/aide program.

- Supporting new mobility management and coordination programs among public transportation providers and other human service agencies providing transportation. Mobility management is an eligible capital cost. Mobility management techniques may enhance transportation access for populations beyond those served by one agency or organization within a community. For example, a non-profit agency could receive New Freedom funding to support the administrative costs of sharing services it provides to its own clientele with other individuals with disabilities and coordinate usage of vehicles with other non-profits, but not the operating costs of the service. Mobility management is intended to build coordination among existing public transportation providers and other transportation service providers with the result of expanding the availability of service. Mobility management activities may include:

  - The promotion, enhancement, and facilitation of access to transportation services, including the integration and coordination of services for individuals with disabilities, older adults, and low-income individuals;

  - Support for short term management activities to plan and implement coordinated services;

  - The support of State and local coordination policy bodies and councils;

  - The operation of transportation brokerages to coordinate providers, funding agencies and customers;

  - The provision of coordination services, including employer-oriented Transportation Management Organizations' and Human Service Organizations' customer-oriented travel navigator systems and neighborhood travel coordination activities such as coordinating

individualized travel training and trip planning activities for customers;

- The development and operation of one-stop transportation traveler call centers to coordinate transportation information on all travel modes and to manage eligibility requirements and arrangements for customers among supporting programs; and

Operational planning for the acquisition of intelligent transportation technologies to help plan and operate coordinated systems inclusive of Geographic Information Systems (GIS) mapping, Global Positioning System Technology, coordinated vehicle scheduling, dispatching and monitoring technologies as well as technologies to track costs and billing in a coordinated system and single smart customer payment systems (acquisition of technology is also eligible as a stand alone capital expense).

Appendix B: Initial United We Ride Contact List and Conference Invitation List

United We Ride Invitation List

House of Representatives Transportation/Land Use Infrastructure Committee

Name	District	Legislative Office	Phone #
Bruce C. Ennis	Smyrna (28)	P.O. Box 1401, Dover, DE 19903	302-744-4351
G. Wallace Caulk	Frederica (33)	P.O. Box 1401, Dover, DE 19903	302-744-4081
Gregory F. Lavelle	Sharpley (11)	P.O. Box 1401, Dover, DE 19903	302-744-4080
Pamela S. Maier	Drummond Hill (21)	P.O. Box 1401, Dover, DE 19903	302-744-4108
Richard C. Cathcart	Middletown (9)	P.O. Box 1401, Dover, DE 19903	302-744-4391
Teresa Schooley	Newark (23)	P.O. Box 1401, Dover, DE 19903	302-744-4351

Senate Energy and Transit Committee

Name	District	Legislative Office	Phone #
Catherine L. Cloutier	Heatherbrooke (5)	P.O. Box 1401, Dover, DE 19903	302-744-4137
Charles L. Copeland	West Farms (4)	P.O. Box 1401, Dover, DE 19903	302-744-4135
Harris B. McDowell III	Wilmington (1)	P.O. Box 1401, Dover, DE 19903	302-744-4147
Karen E. Peterson	Stanton (9)	P.O. Box 1401, Dover, DE 19903	302-744-4163
Robert I. Marshall	Wilmington (3)	P.O. Box 1401, Dover, DE 19903	302-744-4168
Robert L. Venables	Laurel (21)	P.O. Box 1401, Dover, DE 19903	302-744-4298

Planning Organizations

Name	Organization	Email Address	Phone #
Dave Gula	WILMAPCO	dgula@wilmapco.org	302-737-3205
Juanita Wieczoreck	Kent County MPO	Juanita.Wieczoreck@state.de.us	302-760-2711
Leslie Gorak	Cecil Co.	lgorak@ccgov.org	(410) 996-5295
Susan Twigg	Cecil Co.		
Tigist Zegeye	WILMAPCO		302-737-3205

University of Delaware

Name	Organization	Email Address	Phone #
Carol Denson	University of Delaware		

United We Ride ListServ

Name	Organization	Email Address	Phone #
Arlene Littleton	Cheer	alittleton@scss.org	
Brian Squire	Easter Seals	bsquire@esdel.org	
Cathy McCool	EDTAC	clancy118@aol.com	
Devona Williams	Goeins-Williams Assc.	Devogo@aol.com	
Dolye R. Dobbins		ddobbin@dca.net	
Doug Croft	DSHA	doug@dsha.state.de.us	
Ed Strauss	DSHA	ED@dsha.state.de.us	

Elaine Archangelo	DHSS	elaine.archangelo@state.de.us	
Eve Austin	Elwyn	eve_austin@elwyn.org	
Helen Groft	DEDO	Helen.Groft@state.de.us	
Jan Clowes	DSHA	JAN@dsha.state.de.us	
Jeanne Lawson	DHSS	Jeanne.Lawson@state.de.us	
John Culp	Cheer	Jculp@scss.org	
Joyce Pinkett	DHSS	joyce.pinkett@state.de.us	
Ken Anderson	Goeins-Williams Assc.	Kander1116@aol.com	
Ken Bock	Cheer	Kbock@scss.org	
Kyle Hodges	DOS	kyle.hodges@state.de.us	
Lloyd Schmitz		lkschmitz@aol.com	
Lucretia Young		lyoung@aarp.org.	302-498-6503
Michael Dube		mdube@chimes.org	
Pat Maichle	DOS	pat.maichle@state.de.us	
Pat Weygandt	DHSS	pat.weygandt@state.de.us	
Rebecca Kauffman	DSHA	REBECCA@dsha.state.de.us	
Reese W. Parker	DSCYF	Reese.Parker@state.de.us	
Reginald Knowlton	FTA Region 3 Ambssdr	knowlton@ctaa.org	
Rita Landgraph		ritalas94@aol.com	
Ron Love	DOE	rlove@DOE.K12.DE.US	
Ruth Campell	DHSS	ruth.campbell@state.de.us	
Suzanne Reph	TMA	sreph@tmadelaware.org	
Tammy Ford	TMA	tammy@tmadelaware.org	
Tom McFalls	Goeins-Williams Assc.	McFalls.assoc@verizon.net	
Toney Tarone	FTA Region 3 Administ.	Toney.Tarone@fta.dot.gov	
B. Thomas Sharp	DOL	Tom.Sharp@state.de.us	

Sussex County Working Group

Name	Organization	Email Address	Phone #
Alfred Cannon		acannon@firststatecaa.org	
Bernice Edwards		bedwards@firststatecaa.org	
Bill McCafferty		ottie@dmv.com	
Brian Olson		bolson375@aol.com	
Carlton Moore		sherry@indianriverland.com	
Carol Everhart		carol@beach-fun.com	
Carol Senerchia			
		cabinetconnection@juno.com Deborah Elliott	
	DHSS	deborah.elliott@state.de.us	
Denise Frazier	DHSS	denise.frazier@state.de.us	
Effie Jones		effie.jones@state.de.us	
Felicia Dorman		fdorman@state.de.us	
Geneva Rathbone		grathbon@dtcc.edu	
Hope Ellsworth		lightquest1@earthlink.net	
Jennifer Dawson		jdawson@drminc.org	
Joan Boyce		millsboro@intercom.net	
Joseph DeMul		joedemul@splus.net	
Kia Margot		margotckia@aol.com	
Margaret D. Foraker		mdforaker@salisbury.edu	

Margee Brenneman		mbrennem@college.dtcc.edu
Maria Picazo		picazoco@yahoo.com
Marissa C. BonVille		marissac@dmv.com
Melissa L. Worthy		melissa.worthy@cffed.org
Michael Flood		mflood@fhiplan.com
Niecy LeBright		nlebrigh@colleg.dtcc.edu
Patricia Boyce		patricia.boyce@state.de.us
Richard T. Masten		smasten@sussexcounty.net
Susan Lingenfelder		susan.lingenfelder@state.de.us
Vickie Wolverton		oneccharmiingone@aol.com
William Duffy	DHSS	william.duffy@state.de.us