# Coordinated Human Services Mobility (CHSM) Plan

## Executive Summary

January 2026

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VIRGINIA DEPARTMENT OF RAIL AND PUBLIC TRANSPORTATION

# Background

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# 5310 – Human Services Transportation Program



COORDINATED HUMAN SERVICES MOBILITY PLAN

DPRT administers FTA Section 5310 program for Virginia's:

- Rural areas,
- Small Urbanized Areas, and
- Large Urbanized Areas of Richmond, Roanoke, and Hampton Roads.

**FTA requires a Coordinated Plan (CHSM) to receive Section 5310 funding.**

# CHSM Planning Purpose

- **Identify local transportation needs** for people with disabilities, seniors, veterans, low-income residents, and provide strategies for meeting them.

- **Prioritize transportation services and projects** for funding and implementation.

# 2025 CHSM Update Goals

**01**
Identify transportation needs of people with disabilities, seniors, veterans, and low-income residents

**02**
Understand the gaps in access to transportation that limit mobility

**03**
Provide feasible, measurable, and impactful strategies

**04**
Clarify funding sources to support implementation

**05**
Recommend opportunities to improve Section 5310 program administration

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# CHSM Update Process

Existing Conditions → Gap Analysis → Mobility Management → CHSM Plan

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# Engagement Overview

**Purpose:**

- Gather rider and provider input on **mobility needs**, **service gaps**, and **improvement priorities**.

- Ensure **accessible, real-time engagement** through in-person and digital methods.

**Key Feedback Themes:**

- Need for expanded service capacity, regional coordination, reliable transportation options, and cross-jurisdictional travel.

- Demand for more vehicles, weekend/evening service, and better information on eligibility.

## AT A GLANCE

**10**
STAKEHOLDER MEETINGS

**120+**
STAKEHOLDERS ENGAGED

**650+**
SURVEY RESPONSES

**400+**
POP-UP EVENT PARTICIPANTS

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# Engagement Overview: Stakeholders

## Stakeholder Groups Engaged:

- **Interagency Advisory Group** (**IAG**)
  - Included state agencies, human service and transportation providers, nonprofit organizations.
  - Highlighted needs around funding, local trip accessibility, partnerships, and technical assistance.

- **Mobility/Case Manager Advisory Group**
  - Identified regional challenges: driver shortages, limited non-medical trips, jurisdictional travel barriers, volunteer capacity, and rural/urban access gaps.

**Interagency Advisory Group (IAG)**

**31**
Members

Four Meetings
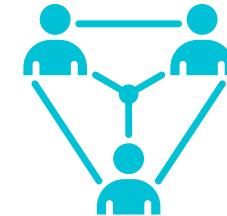
**Mobility/Case Manager Advisory Group**

**88**
Members

Six Meetings

# Engagement Overview: Public

## Public Engagement Activities:

- Outreach via CHSM Plan website, social media, and e-blasts
- **Pop-Up in a Box Events** (September – October 2025)
  - Provided pop-up engagement kit
  - 10 in-person events hosted
  - 400 participants across the Commonwealth
- **Initial Statewide Provider and Rider Survey** (April – May 2025)
  - 577 respondents
- **Final Goals and Prioritization Survey** (November – December 2025)
  - 78 respondents



**DRPT**
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September 2025

**Pop-Up Engagement Kit**

**Coordinated Human Service Mobility Plan Update**

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# Existing Conditions

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# Understanding Existing Conditions

Considered what exists now: demographics, transportation services, travel patterns.

Asked riders and providers for feedback on how well current services are being provided.

Mapped, analyzed, and graphed information.

# Example: Where Are Older Adults Concentrated?



**Older Adult Population (%)**

< 5%  |  6% - 10%  |  11% - 20%  |  21% - 30%  |  > 31%

The Alleghany region has the second highest proportion of older adults in Virginia (**21%**)

The Southwest region has the highest proportion of older adults in Virginia (**23%**)

NORTHERN

WESTERN

ALLEGHANY

CENTRAL

SOUTHWEST

TIDEWATER
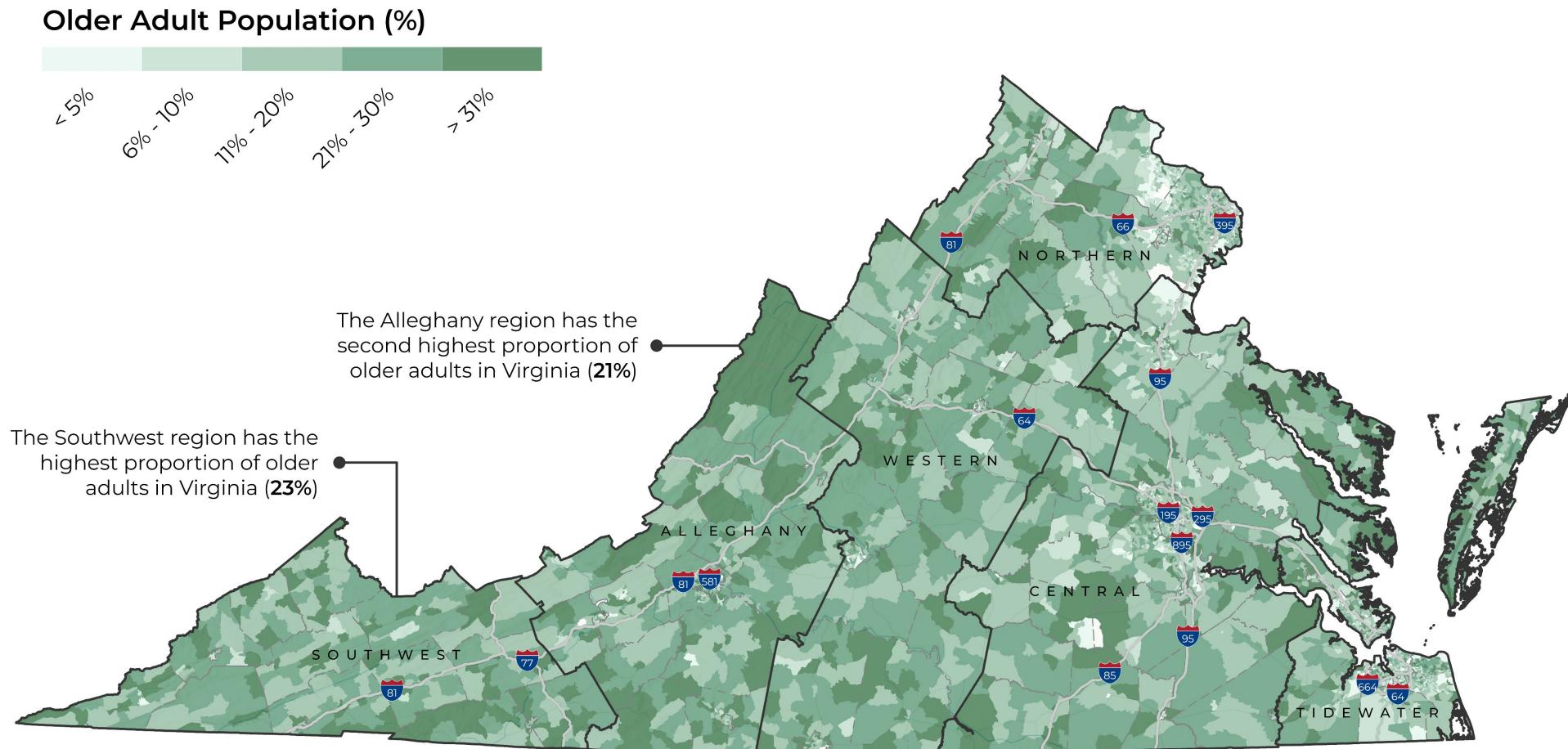
# Example: Where Are Persons with Disabilities Concentrated?

**Individuals with a Disability (%)**

< 5%  |  6% - 10%  |  11% - 15%  |  16% - 25%  |  > 26%

The Southwest Region has the highest proportion of adults with disabilities in Virginia (**22%**) with particularly high concentrations in the region's more rural areas.
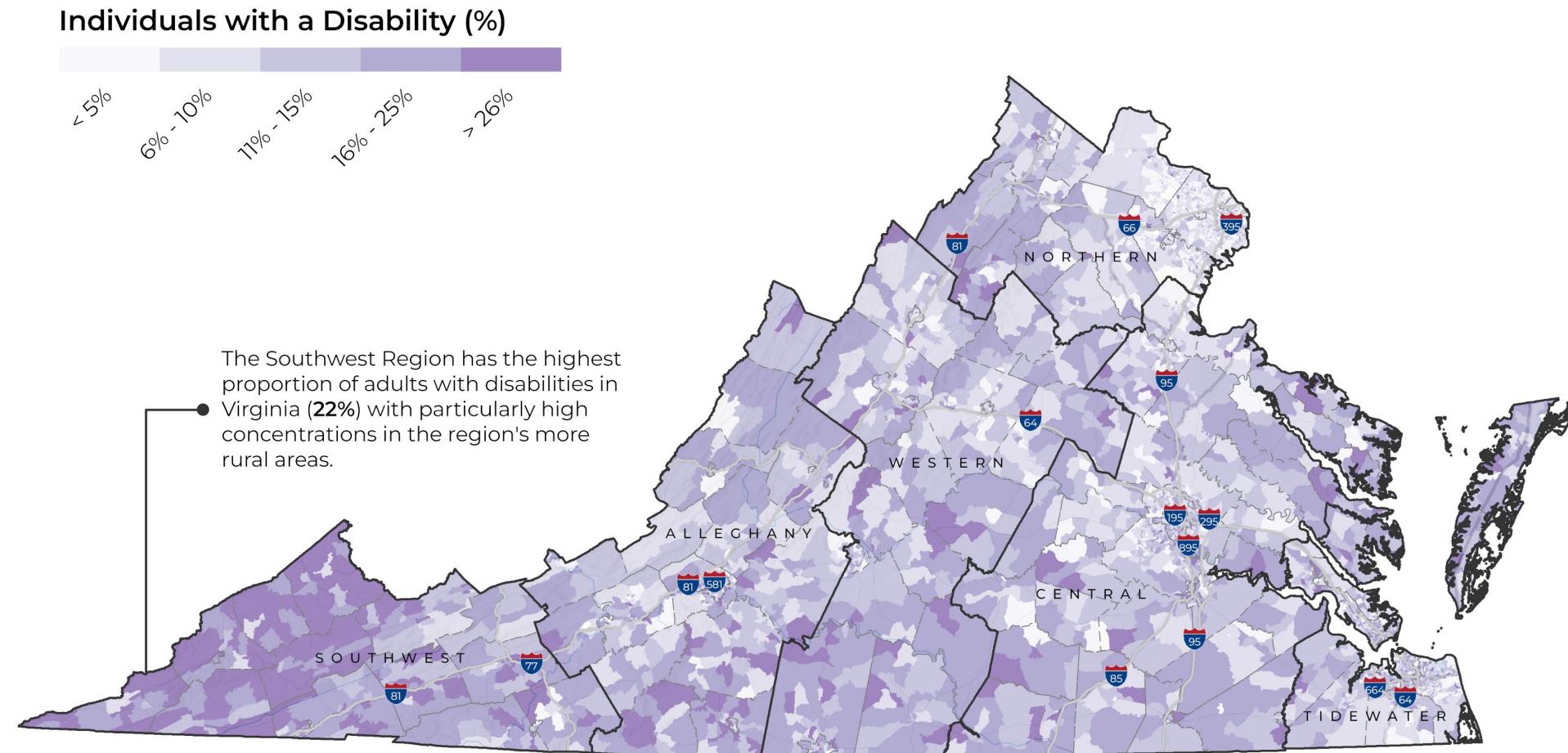
# Regional Conditions

- For each of the six CHSM regions, we **asked similar questions**.

- We also examined **data on how people travel** within the regions.

**WESTERN REGION**

Population: 922,420
Senior Population (65+): 180,365 (20%)
Population with a Disability: 117,839 (13%)
Households below the Poverty Line: 22%

**NORTHERN REGION**

Population: 2,927,887
Senior Population (65+): 392,093 (13%)
Population with a Disability: 218,228 (7%)
Households Below the Poverty Line: 11%

**ALLEGHANY REGION**

Population: 721,706
Senior Population (65+): 148,634 (21%)
Population with a Disability: 95,750 (13%)
Households below the Poverty Line: 23%

**SOUTHWEST REGION**

Population: 368,369
Senior Population (65+): 85,705 (23%)
Population with a Disability: 80,937 (22%)
Households below the Poverty Line: 29%

**TIDEWATER REGION**

Population: 1,770,687
Senior Population (65+): 280,512 (16%)
Population with a Disability: 205,154 (12%)
Households below the Poverty Line: 19%

**CENTRAL REGION**

Population: 1,946,430
Senior Population (65+): 322,851 (17%)
Population with a Disability: 220,333 (11%)
Households below the Poverty Line: 12%

Population Density (people per sq mi.)

< 100   101 - 500   501 - 2,500   2,501 - 5,000   > 5,001

# Example: Central Region – Population Data

Stafford and Spotsylvania counties have large populations and there are clusters of high density in and around Fredericksburg and along I-95

Most of the region's density is concentrated in and around Richmond, particularly in Chesterfield and Henrico counties, and clustered along I-95

**Population Density (sq. mi)**

< 100 | 101 - 500 | 501 - 2,500 | 2,501 - 5,000 | > 5,001

- **Population density:** 0.28 people per acre
- **Population**: 1.94 million
- **Number of Households**: 746,243
- **Average Household Size**: 2.6 people

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# Example: Central Region – Older Adults



Older Adult Population (65+)
Older Adult Population Density (sq. mi)

Both High
High Older Adult Pop.
Low Older Adult Pop. Density
Low Older Adult Pop.
High Older Adult Pop. Density
Both Low

Localities in the Northern Neck have a high proportion of older adults (**30%+**) but low population density

Richmond and the surrounding area have the highest concentration of older adults in the region

- 16% of residents are age 65 or older.

- Older adults live across the region with concentrations in Northumberland, Lancaster, Middlesex, Surry, and Mecklenburg counties.

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# Example: Central Region – Persons with Disabilities



Ind. with Disabilities Population
Ind. with Disabilities Population Density (sq. mi)

Both High

High Ind. with Disabilities
Low Ind. with Disabilities Density

Low Ind. with Disabilities
High Ind. with Disabilities Density

Both Low

Petersburg has the highest concentration of people with disabilities in the region (**21%**)

The southern portion of the region has a high proportion of people with disabilities but low population density

- 11% of adult residents are disabled.
- Persons with disabilities live across the region, with concentrations in Nottoway, Dinwiddie, Lunenburg, Mecklenburg, Greensville, and Middlesex counties.

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# Example: Transit Propensity Score

- Measure to help understand **where** populations that might be more likely to rely on transit or non-personal vehicle transportation live.

- Three demographic factors considered:
  - Older adults (65+)
  - Persons with disabilities
  - Zero-car households

- Mapped for each CHSM region.

Older adults (65+)

Persons with disabilities

Zero-car households

# Example: Central Region – Transit Propensity Score
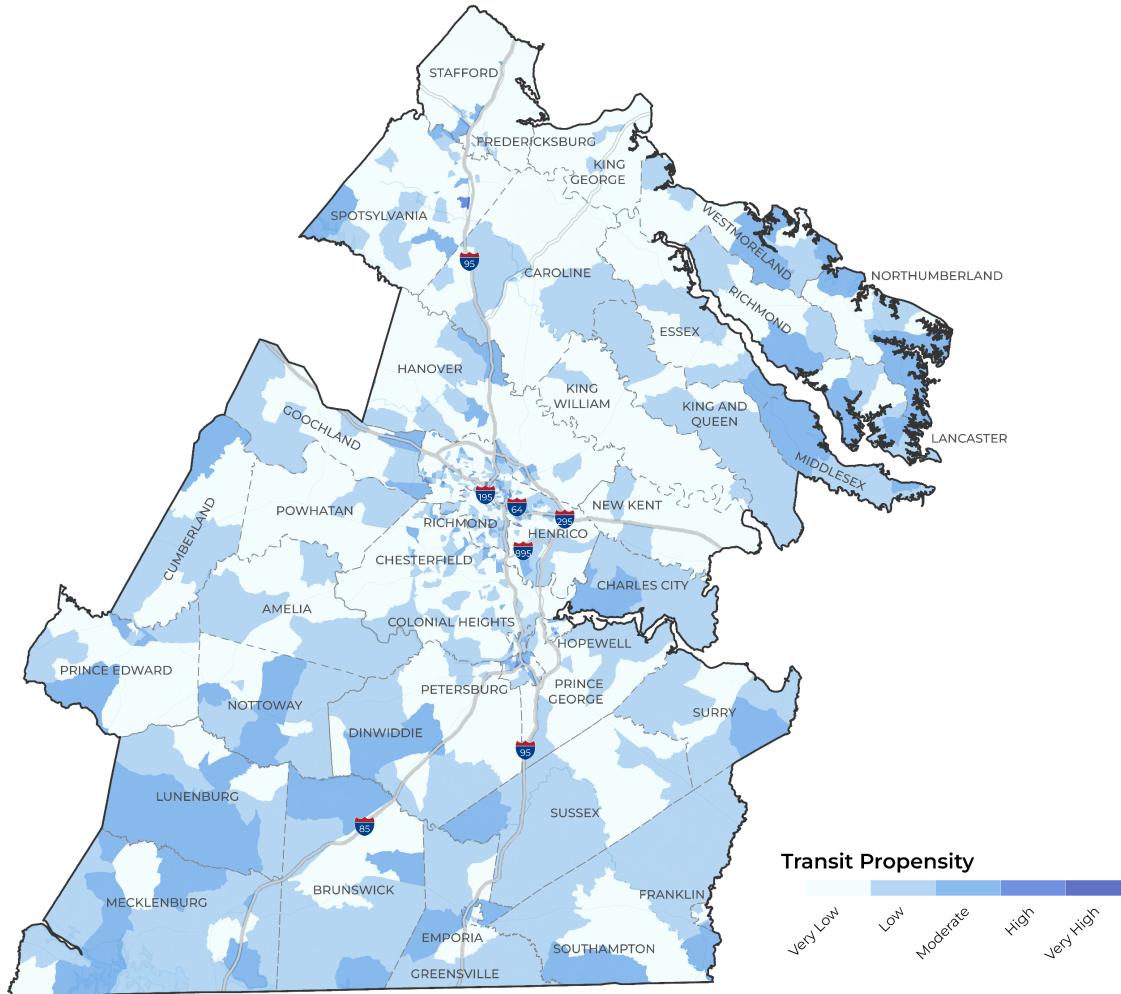


- Propensity score indicates likelihood of relying on transit options, based on demographics.

- Highest scores are in Richmond and Fredericksburg.
  - Also high in areas of Northumberland and Lancaster counties.

- Scores are lowest in Chesterfield, King William, Caroline and King George counties.

# Example: Central Region – Trip Generators



Over half (**58%**) of the region's trip generators are in the greater Richmond area, with numerous activity centers in Chesterfield and Henrico counties

**Trip Generators**

Low Concentration

High Concentration
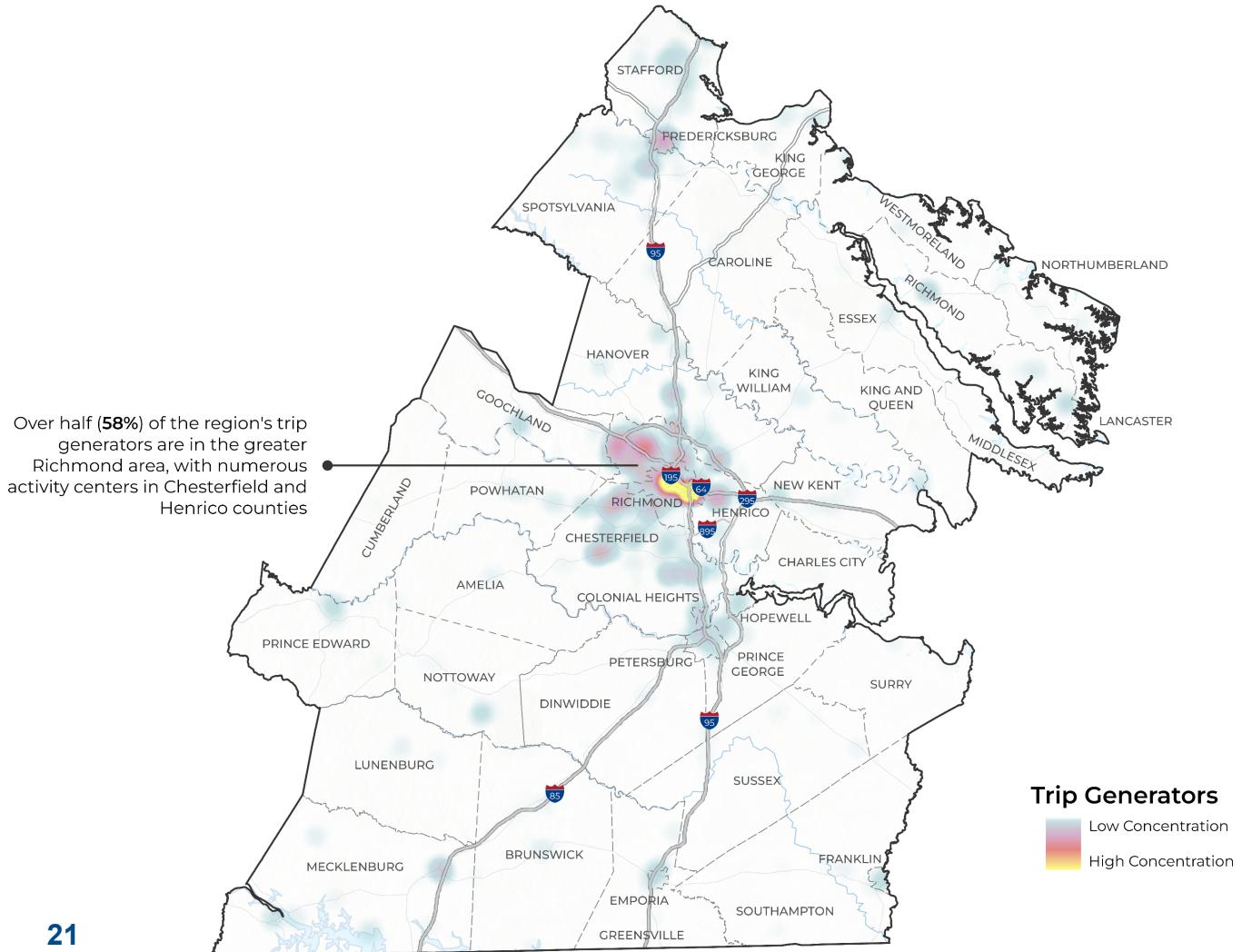
- Trip generators, or points of interest, are places people might travel.
- Trips are concentrations are around Richmond and Fredericksburg.
- Highest count destinations include food, retail, and health services.

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# Example: Central Region – Travel Patterns



Weekday Work Trips (Age 55+)

15 - 25   26 - 40   41 - 65   66 - 100   > 101
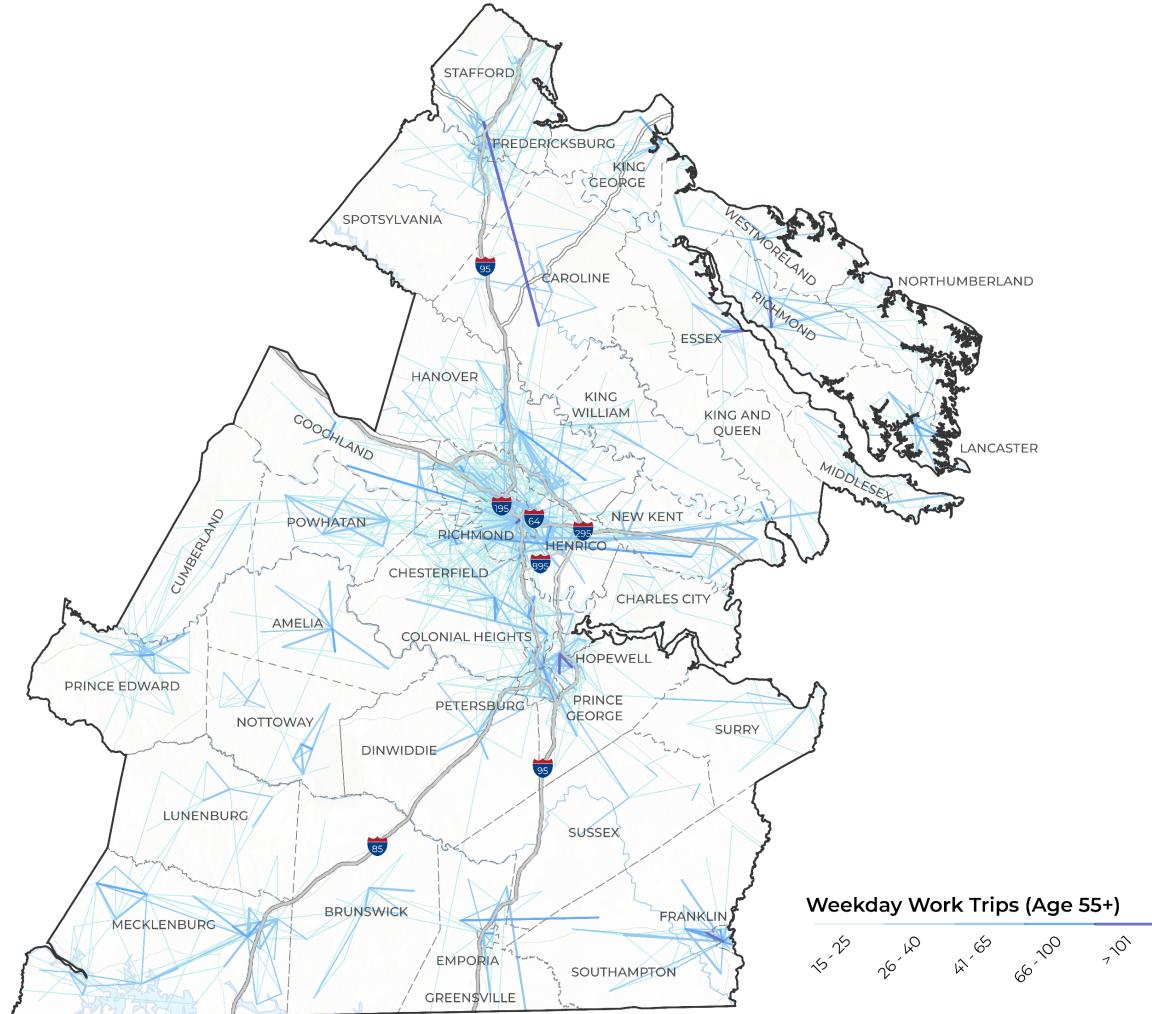
- Blue lines on map show weekday work-related trips taken by adults aged 55+.
- High volumes of trips around:
  - Stafford
  - Caroline
  - Chesterfield
  - Hanover
  - Southampton
  - Franklin

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# Online Survey of Providers & Riders

- Conducted online survey of Virginia transportation providers and riders about services they offer and use.

- Goal was to understand how well services are working and identify any unmet needs.

- Majority of respondents were providers, many were riders.

**Are you completing this survey for yourself, or on behalf of an organization, agency, or service?**
Responses: 573

| | 42.1% | 57.9% |
|---|---|---|
| I am completing this survey for myself, as rider of public/human services transportation | | I am completing this survey on behalf of an organization, agency, or human service provider |

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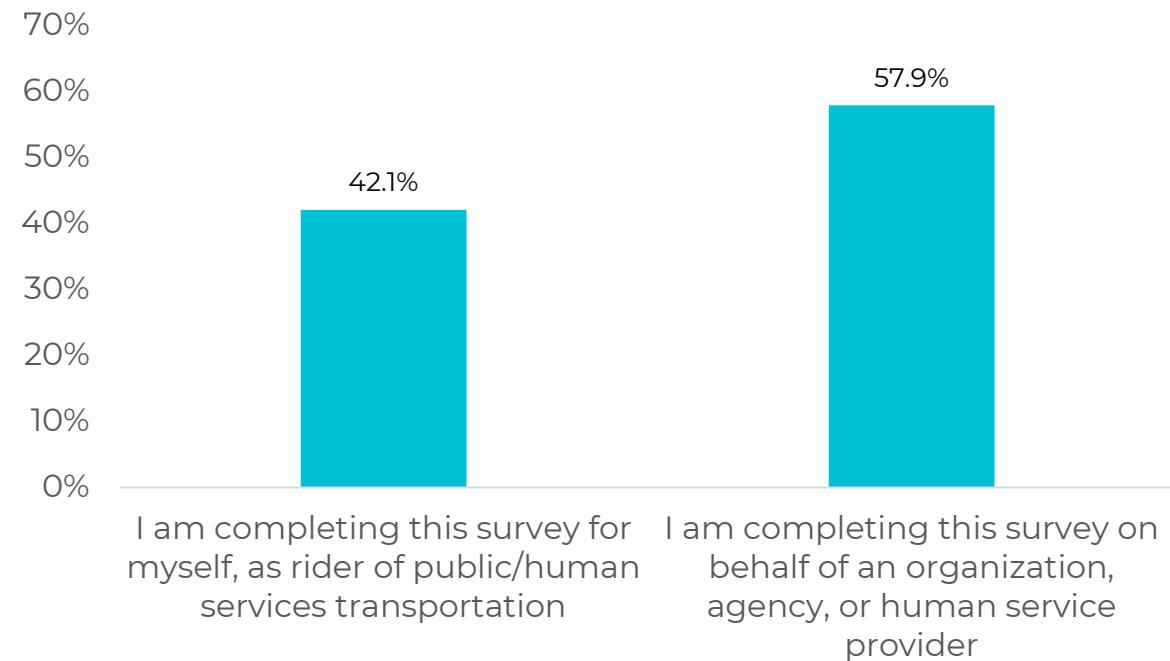
# Rider Characteristics

More than half of respondents reported that someone in their household has a disability that limits their mobility and 49% were age 65 or older.

**Do you or someone in your household have a disability that limits their mobility?**
Responses: 177

49%   51%

■ Yes  ■ No
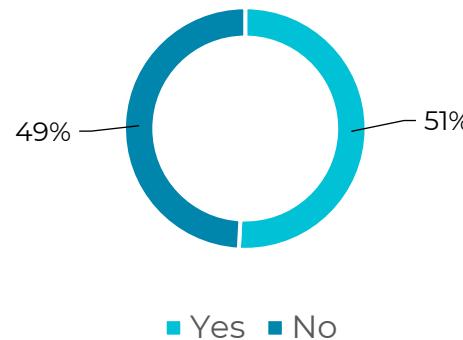
**What is your age?**
Responses: 175

60%
50%
40%
30%
20%
10%
0%

0.6%        50.3%        49.1%

Under age 18        18-64        65 or older
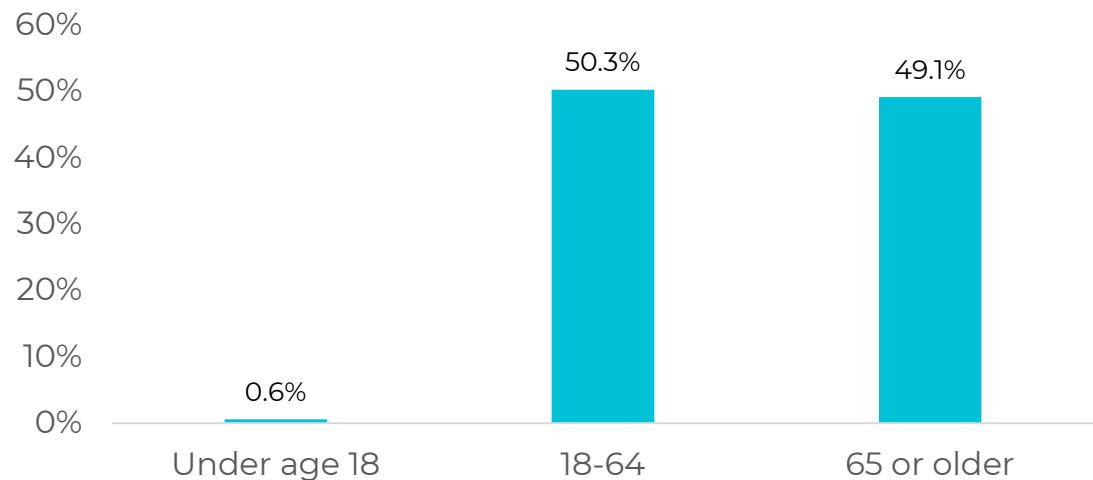
# Rider Characteristics

The most common destinations traveled to using transportation services are:

**52%** Grocery or other retail shopping

**44%** Health appointments, regular and one-time

**43%** Cultural, recreational, social and faith-based activities

**What are the top three destinations you travel to, when using the providers above?**
Responses: 176



Chart categories (top to bottom):
- Grocery or other retail shopping
- Other medical trips
- One-time/annual medical, dental, and other health services
- Cultural, recreational, social, and faith-based activities or services
- Personal care including barber/hairdresser, physical fitness
- Nutrition, restaurants, meal sites
- Work or employment
- Human services, counseling, or other health or social services
- Other (please specify)
- Education or training
- Childcare

Axis: 0% 10% 20% 30% 40% 50% 60%

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# Provider Characteristics

- 30% of respondents were Area Agencies on Aging or Community Service Boards.

- 40% were other nonprofit organizations.

- 10% of respondents were transit agencies.

- 40% directly operate transportation or contracted transportation services.

- Other respondents perform travel planning and oversight or provide travel information and referrals.

**What are the top three major functions or services of your organization?**
Responses: 175
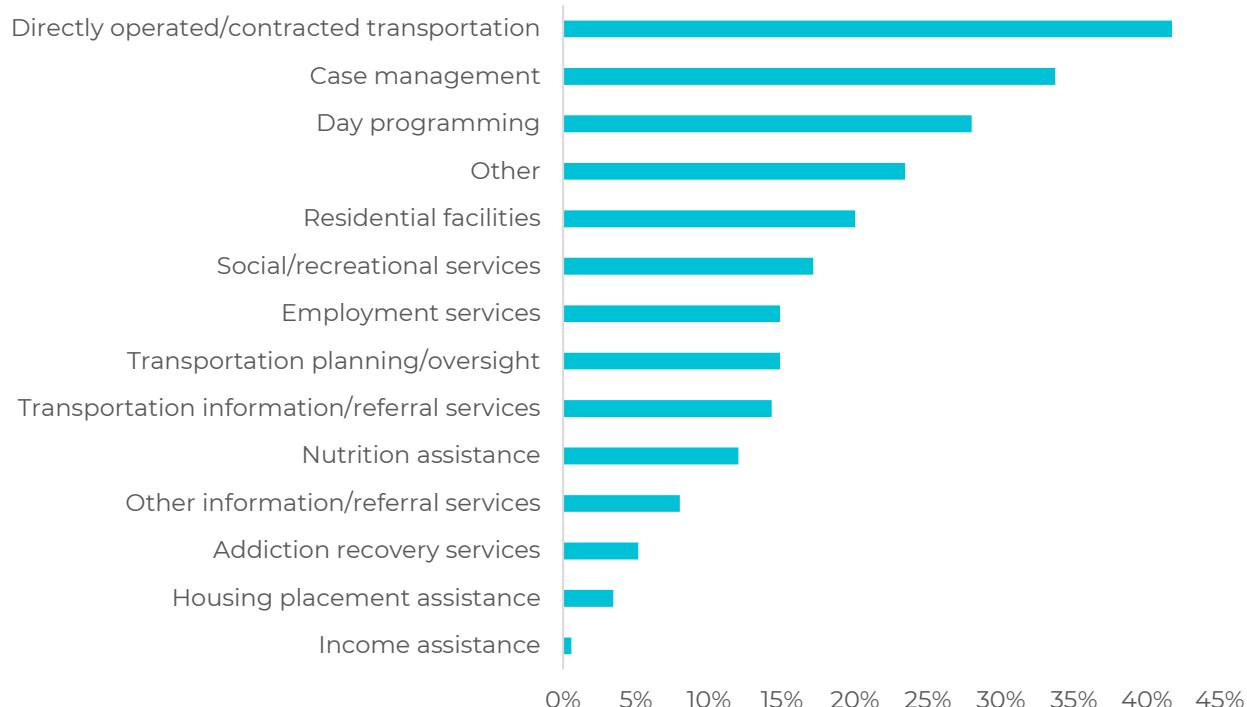
# Provider Services

- **Grocery store** trips and trips to regularly scheduled **medical appointments** were the most common unmet need.

- Other unmet needs that were specially mentioned were **trips to civic events or public meetings** and **trips for tourists**.

**What types of trips do your clients/customers most commonly need, but no (or too few) transportation providers are available to meet the need?**

Responses: 82
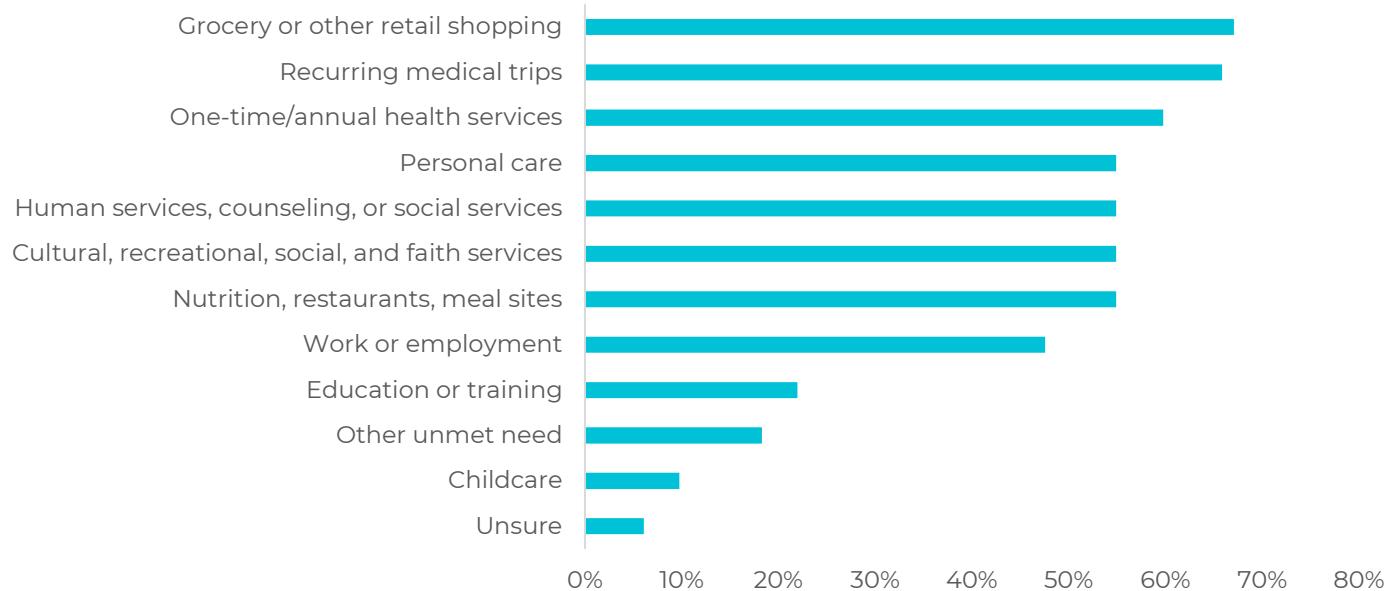
# Most Needed Enhancements

The survey asked riders and providers to share thoughts on the most needed enhancements for public transit and human service transportation

Three themes identified from 240 responses:

| Service accessibility and expansion | Service frequency and reliability | Affordability |
| --- | --- | --- |
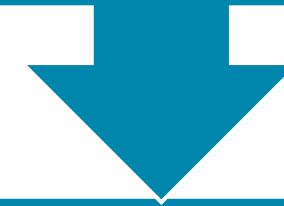
- Service accessibility and expansion
  - *"More individualized transportation (Uber-like), but drivers need to have some training/background so that they can effectively interact with people who might have varying social-interaction needs."*
- Service frequency and reliability
  - *"Reliable services that are on time picking you up so you can be on time. Clean & Safe vehicles with vetted drivers."*
- Affordability
  - *"There aren't many accessible options for a person who is unable to drive, but also low income and can't afford to uber everywhere."*

# Our Takeaways

## From mapping and analysis:

- **Populations in need of transportation services** across the Commonwealth, some in concentrated areas of need, others distributed far and wide.
- Variety of **trip generators**, or points of interest, in all regions.
- Noticeable clusters of trip activity, or **travel patterns**.
- **Range of transportation services being provided**, many available to the public but also many with eligibility requirements.

## From provider and rider survey:

- **Range of transportation services being provided**, many for older adults and those with disabilities.
- **Demand** for transportation services is far beyond what is provided.
- **Provider funding challenges** – operations, drivers, keeping services consistent with organizational core missions.
- For riders, **cost** of service, **length**, and **days/hours** of travel are challenges.
- **Shared appreciation and commitment to services**, while recognizing areas of challenge and need.

# Gaps & Needs

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# Understanding Gaps & Needs

- Next, we sought to understand the service **needs and gaps** the existing conditions and survey findings pointed to.

- We spoke to more **stakeholders and service providers** to get a better focus on their experiences.

- Our goal was to uncover gaps and needs, to **guide development of goals and strategies**.

| Gaps | Needs | Goals | Strategies |
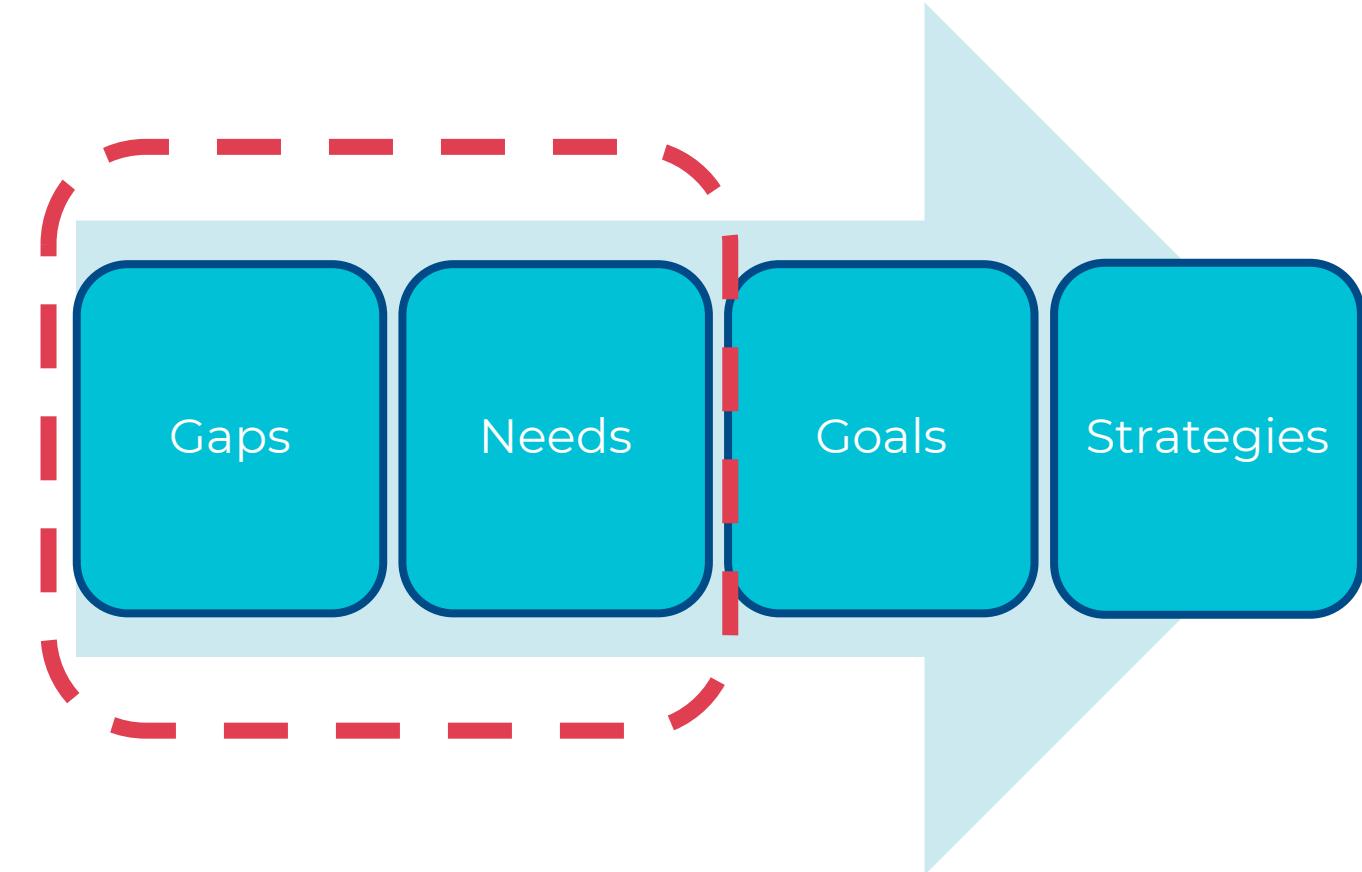
# Emerging Themes

- We uncovered several **statewide themes**.

- We also discovered **regional themes**, and needs and gaps more common in some areas than others.

# Statewide Themes

- Demand for rides outpaces provider capacity
- Driver and other staffing shortages
- Difficulty linking transportation and human services
- Coordination



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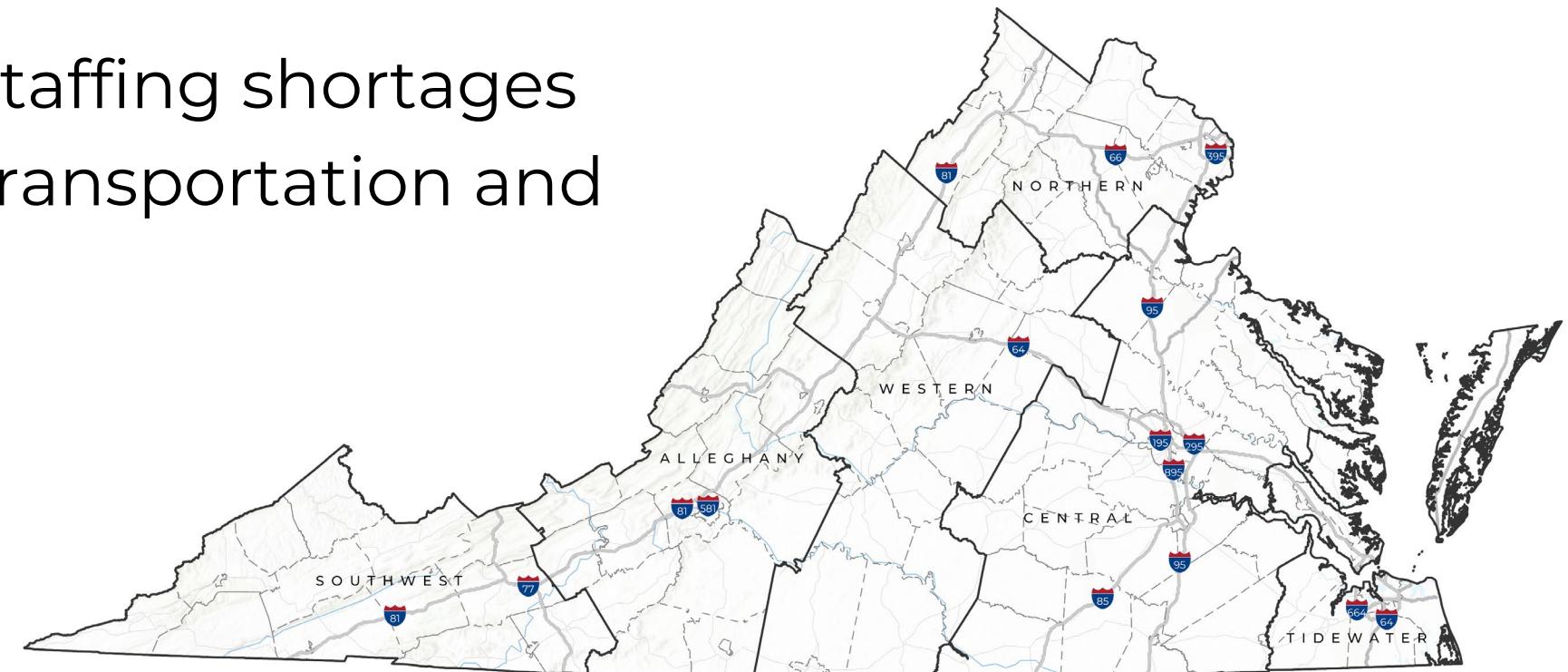
# Demand Is Greater Than Capacity

- **Limited capacity restricts recurring trips**, limiting independence of transit-dependent residents.

- **Long-distance trips strain** human service transportation providers.

- **Rural areas face less transit coverage** and frequency, some without any providers.

- **Demand for medical trips** has increased.

- **Limited capacity for repeat trips hinders employment** for transit-dependent populations.

"
**"Transportation service (such as buses) that travel outside of our service area** ... is sorely needed. The number of aging citizens who are unable to drive long distances is growing."

# Staffing Shortages Strain Providers

- Providers are **struggling to recruit and retain** drivers, operations, and administrative staff.

- There is **limited staff availability** for additional coordination meetings and activities.

- Staff turnover is leading to **institutional knowledge loss**, reducing capacity.

"
"Difficulty in **recruiting dedicated workforce**. Time needed to implement and **maintain a volunteer driver program**."

# Funding Gaps Limit Growth and Reliability

- Limited funding **prevents expansion** to meet growing needs.

- Additional funding opportunities for **non-traditional transportation** are needed.

- **Single-year and competitive funding** sources undermine reliability of transportation and human services.

- Smaller providers can struggle to meet **reporting and other funding requirements**.

- Local transportation **funding structures** can limit regional options.

> "**Financial limitations** are the primary barriers to expanding services."

# Coordination Challenges Limit Efficiency

- **Roles and responsibilities** of human service versus transportation providers are unclear at different points.

- Transportation providers are taking on human services **case management** for their riders, reducing capacity for other administrative tasks.

- **Regular regional meetings** with transportation and human service providers are needed to discuss needs and potential solutions.

"**Better training of transportation employees** in properly assisting those whom are challenged and safe access to vehicles of transport."

# Unclear Information Hinders Riders

- Many riders or caregivers are unaware of **available transportation options**, particularly for human service transportation.

- Riders are unsure of how to make **regional connections or statewide trips**.

- Riders and organizations struggle to find **consistent information** across transportation providers.

> "
> **"More visible public information presence**. I get the feeling that there are services offered but I'm not sure if my wife can take advantage of them with mobility problems."

# Regional Themes

- Many regions are facing similar issues.

- Geography and population density correlate with described gaps .

- **Urban areas** are generally facing:
  - Increasing rider needs, particularly for medical assistance during or after the trip.
  - Public may not be aware of the full range of services available in their area.
  - Larger regional coordination issues where human service transportation is left out of short- and long-term regional transportation planning.

- **Rural areas** are generally facing:
  - Administrative capacity issues for applying to grants, reporting requirements, etc.
  - Challenges taking riders across jurisdictional boundaries.
  - Length and distance of trips, and limited service hours and vehicles.

# Regional Gaps

| | Northern | Alleghany | Western | Southwest | Central | Tidewater |
|---|---|---|---|---|---|---|
| Limited service | | X | X | | | |
| Vehicle availability, types | | X | | | X | X |
| Medicaid reimbursement | | X | | | | |
| Rural to urban travel | | | X | | X | |
| Non-medical rides | X | | | X | X | |
| Medical service rides | X | | | | | |
| Public knowledge | X | | | | | X |
| Jurisdictional boundaries | | | | X | | X |
| Technology | | | X | X | | |

# Goals & Strategies

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# Defining Goals & Strategies

- After stakeholder meetings, and existing conditions and gap analysis, we **used the input** to define goals.

- We used more analysis and stakeholder feedback to develop a **final set of goals and strategies**.

Gaps    Needs    Goals    Strategies
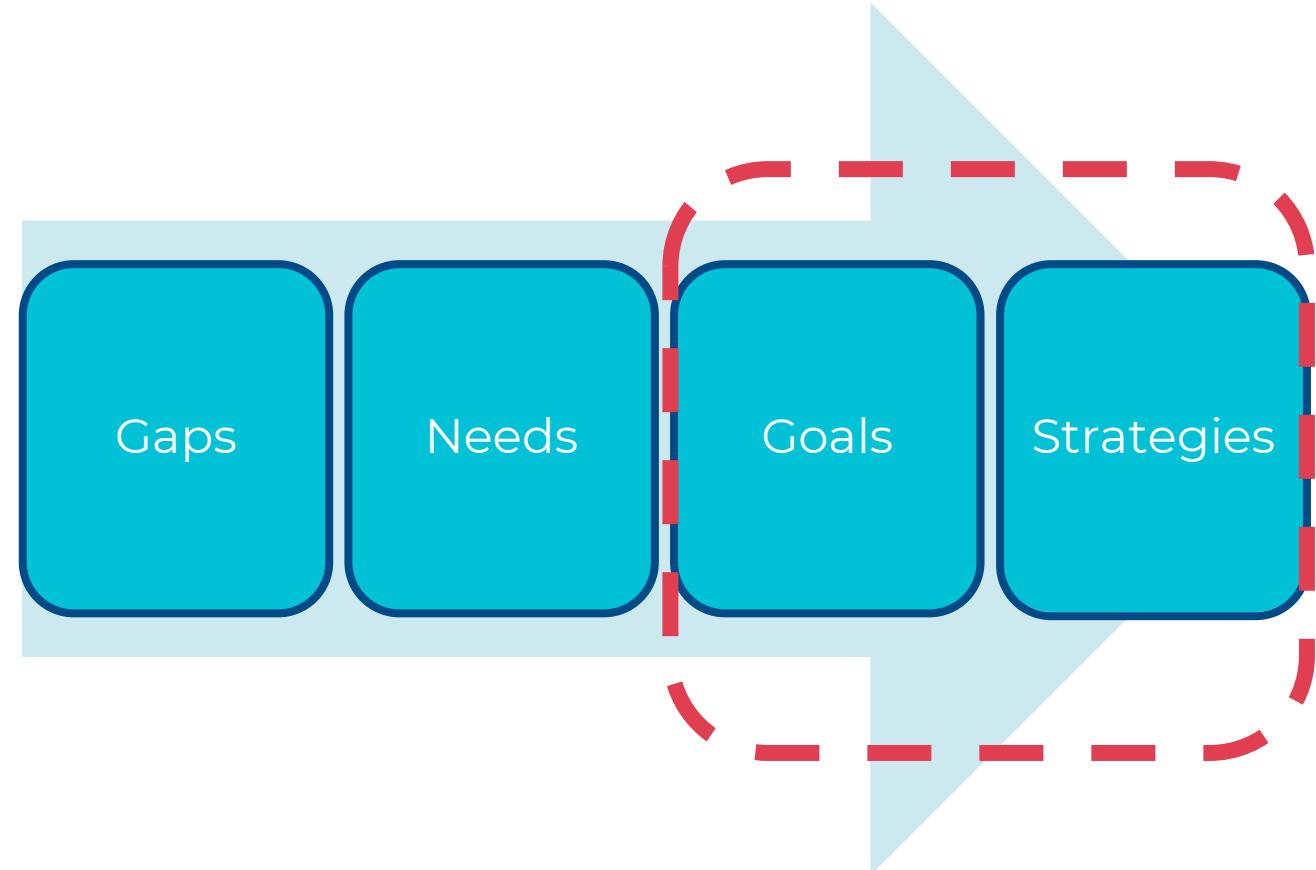
# Goals

1. Diversify **funding** sources
2. Additional **existing service** capacity
3. Service **expansion**
4. Increase **support** for riders
5. Consistent **information**
6. Human service transportation in the **broader planning** conversation
7. Structured and consistent **technical assistance**
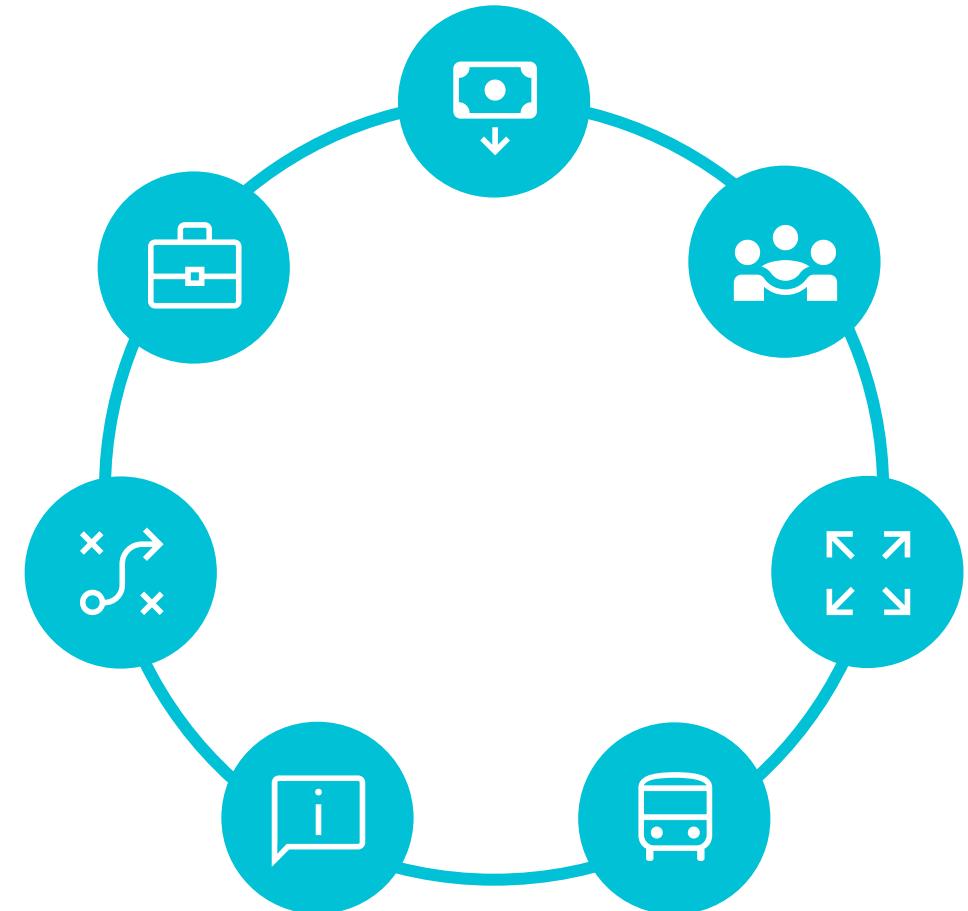
# Prioritizing Goals & Strategies

## Gather Input
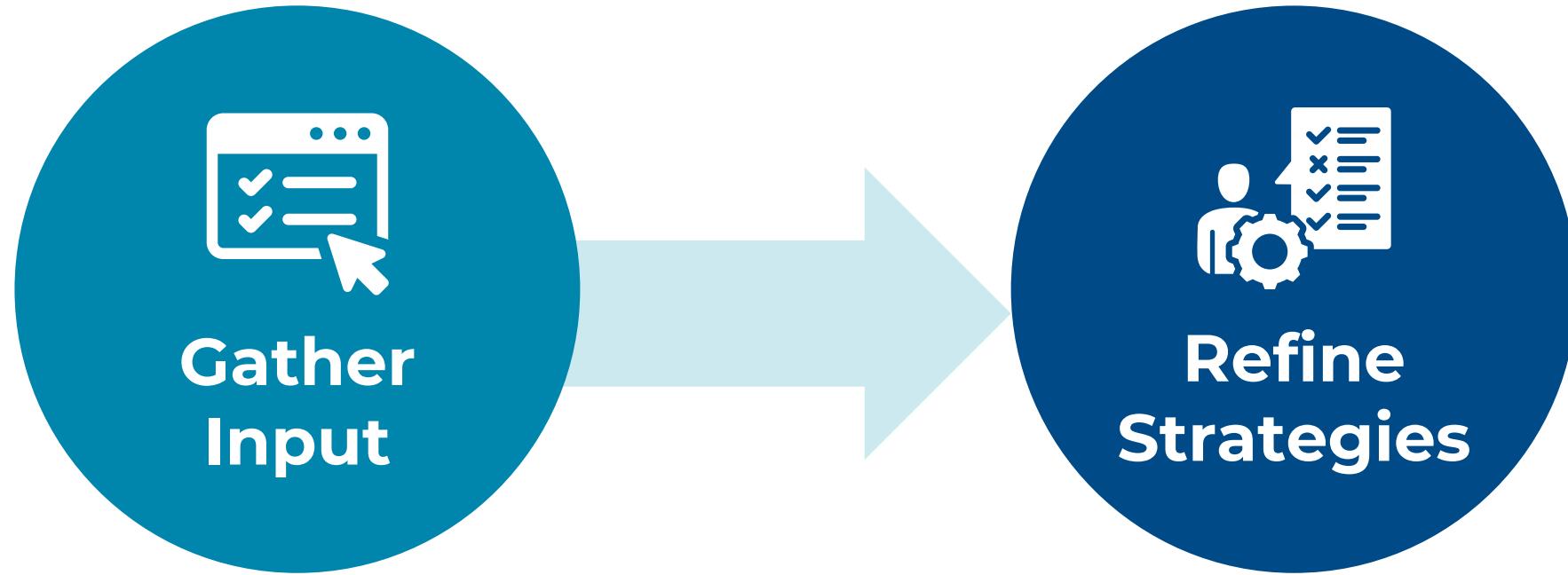
Asked people which goals or elements of goals were **most important**.

## Refine Strategies

Developed **preliminary list of strategies** for each goal and refined them using input.

# Prioritization: Outreach & Analysis

## Most Important Transportation Goals
IAG Member Responses: 11

Legend:
- Increase funding availability
- Add capacity for services
- Increase trip accessibility
- Service expansion
- Increase support for riders
- Capacity building / technical assistance
- Local coordination

Pie chart values: 19%, 16%, 13%, 29%, 7%, 10%, 6%
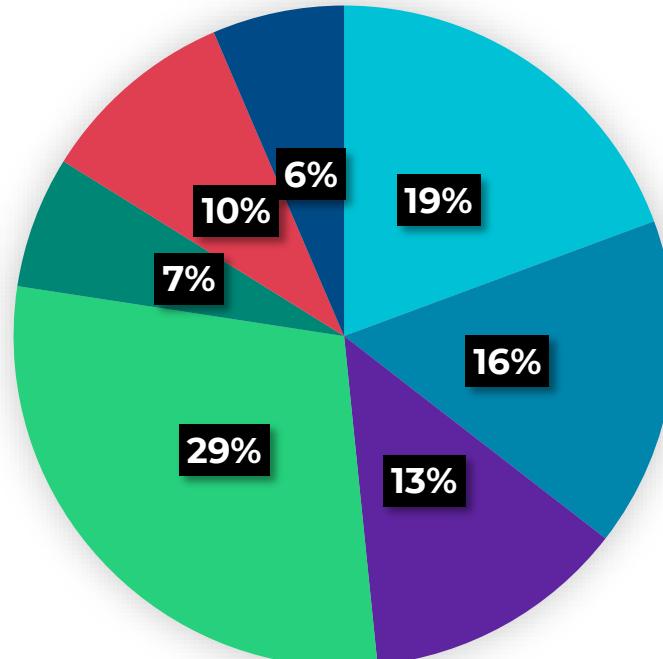
## Top-Ranked Transportation Improvements to Improve Mobility
Pop-Up Attendee Responses: 211

Bar chart categories:
- Better eligibility information
- New or improved local bus...
- More drivers
- More funding for providers
- New or additional vehicles
- More weekend or late-...

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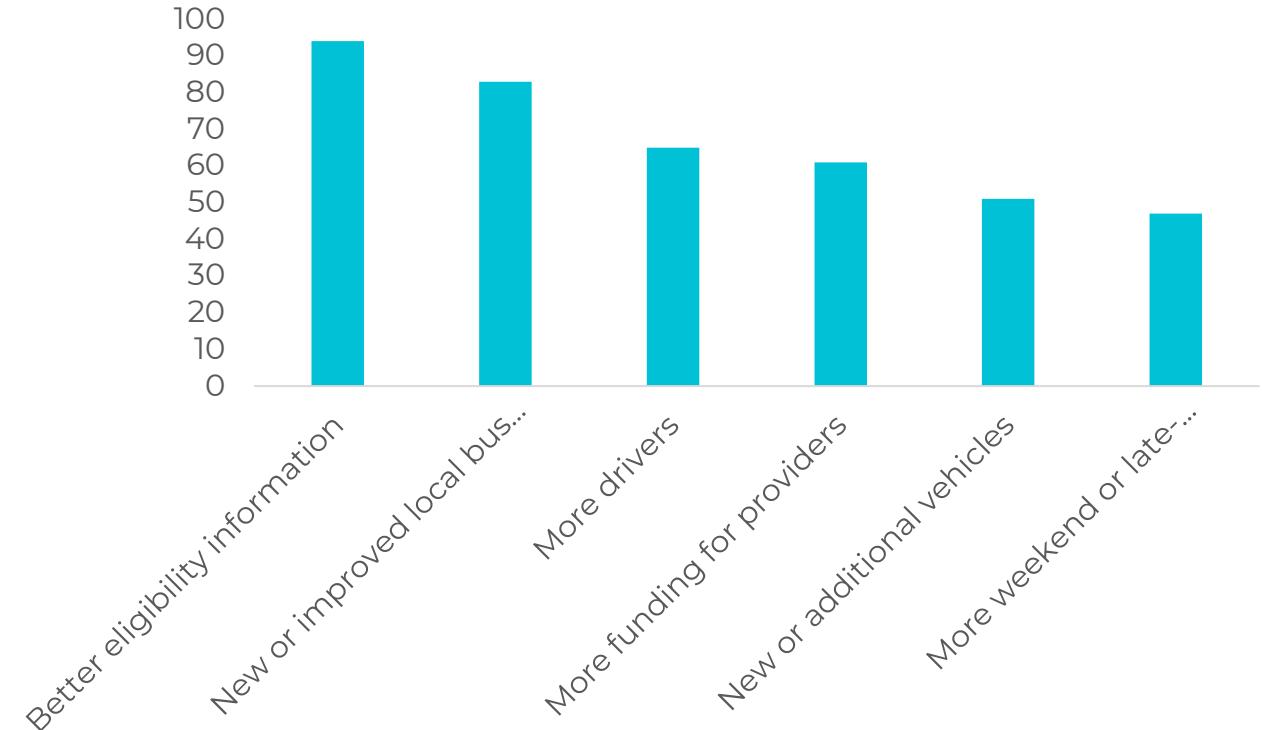
# Prioritization: Final Public Survey

**78**
participants shared feedback

All CHSM regions represented, with largest share from the
**Central Region**

## Which two goals are most important to you?
Responses: 75

| Goal | Count |
|------|-------|
| Create additional capacity for and expand existing services | 47 |
| Expand beyond existing services | 34 |
| Diversify funding sources for human service transportation | 24 |
| Bring human service transportation into the broader planning conversation | 24 |
| Increased support for riders over the complete trip | 11 |
| Consistent information and streamlined distribution | 9 |
| Structured and consistent technical assistance | 1 |

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# Prioritization: Final Public Survey

## TOP RANKED GOALS AND RELATED STRATEGIES

**Create Additional Capacity and Expand Existing Services**

1. Coordinate locally to free up human service transportation capacity for recurring trips.
2. Increase incidental use of transit vehicles.

**Expand Beyond Existing Services**

1. Provide a variety of modes to meet the needs of every individual.
2. Encourage the creation of more community transportation options, focused on community circulation and recurring trips.

# Goals and Strategies

- Each goal has two kinds of strategies: core and additional

- **Core** strategies are those that have already shown promise in Virginia and have been prioritized by stakeholders.

- **Additional** strategies, informed by stakeholders input or national best practices, are also listed as potentially useful for local applications.
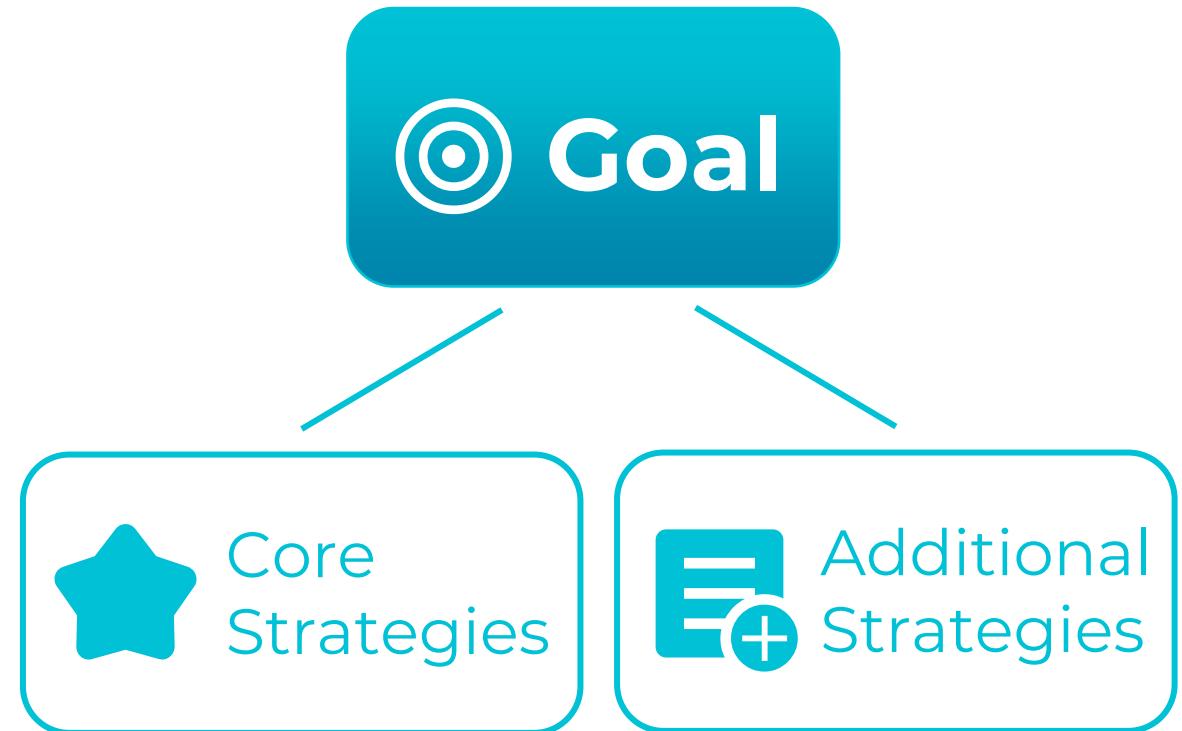
# Goal 1. Diversify Funding

## Core Strategies

- Increase **fund braiding** to diversify funding sources for transportation programs.

- Increase local knowledge and capacity for **grant** applications and fund management.

- Identify **regional entities** with capacity to accept funding and provide or contract transportation services across jurisdictional boundaries.

# Goal 1. Diversify Funding

## Additional Strategies

- Provide regular technical assistance focused on **funding reporting requirements**.

- Create **catalog of non-transportation funding** sources and their eligibility available to providers in the state.

- **Promote existing resources**, such as 211, VA Navigator, and No Wrong Door, to find non-transportation partners in local communities.

- Engage **national technical assistance providers**, such as CCAM-TAC, to assist local and regional providers in identifying long-term funding opportunities.

- Establish and consistently **report outcome metrics** for human service transportation services to show their value to partners.

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# Goal 2. Create Additional Capacity for and Expand Existing Services

## Core Strategies

- Coordinate locally to free up human service transportation capacity for **recurring trips**.

- Focus **volunteer** driver networks on the needs of daily life.

- Increase **incidental use** of transit vehicles.

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# Goal 2. Create Additional Capacity for and Expand Existing Services

## Additional Strategies

- Provide technical assistance for recruiting and retaining transportation **staff**.

- Regional or statewide marketing campaign to **increase driver pool** for transit and volunteer services.

- Shared or otherwise integrated **software** that allows for shared trips between providers.

- Formalize **volunteer networks** with regional or state support for common items (e.g., insurance, software, etc.)

- Create regional or statewide **timebanks** to incentivize volunteers to contribute their time and labor.

- **Market volunteer opportunities** at local non-profit and volunteer organizations, such as Lions Club or Rotary International.

- Hold regular meetings with regional **employers**, focusing on job placement and commuting options for older adults and individuals with disabilities.

- Serve varying communities on **different days** to provide additional services over large geography.

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# Goal 3. Expand Beyond Existing Services

## Core Strategies

- Encourage the creation of **additional** community transportation options, focused on community circulation and recurring trips.

- Increase utilization of **contracted** services.

- Provide a variety of **modes** to meet the needs of every individual.

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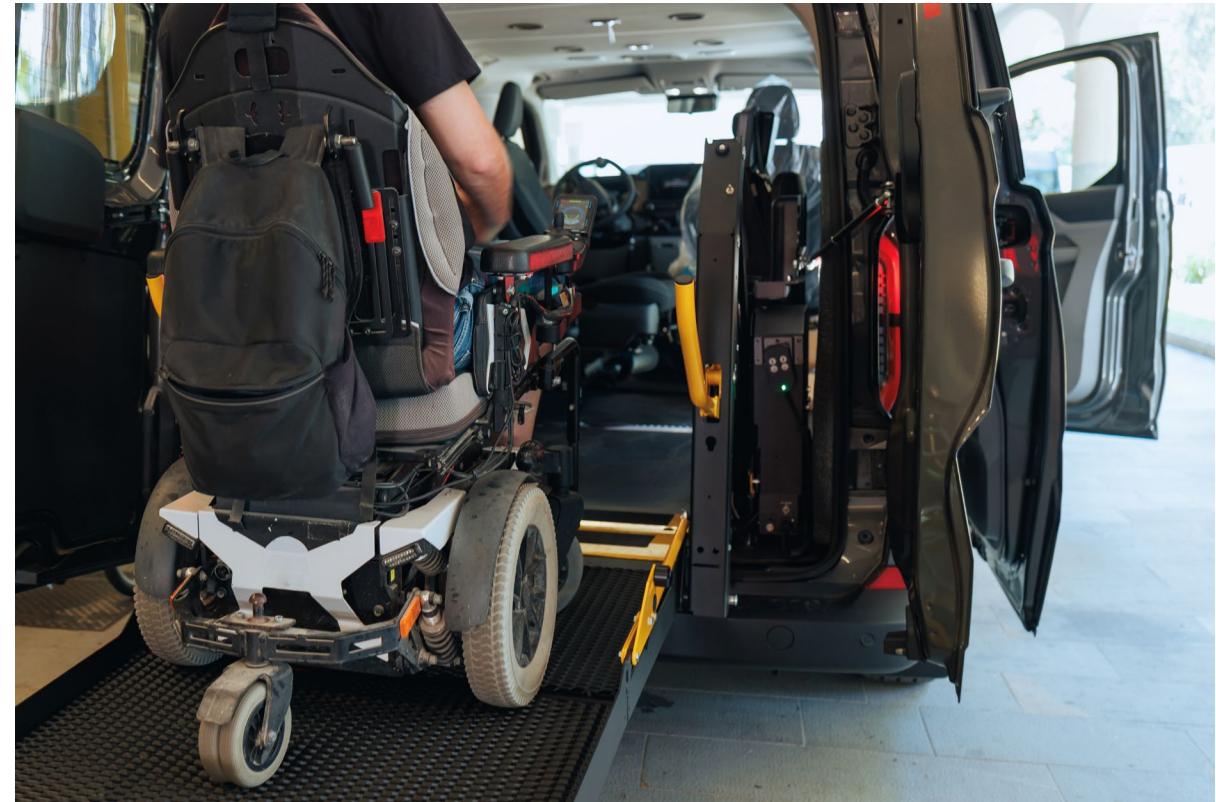
# Goal 3. Expand Beyond Existing Services

## Additional Strategies

- Provide services with greater **geographical coverage**, providing service to entire counties to ensure individuals can get to the destinations they need to access.

- Hold **regional meetings** with volunteer organizations and human service organizations to proactively communicate needs, allay concerns, and tie volunteerism with human services that need support.

- Tap into faith-based communities for additional **volunteer** driving opportunities, particularly on nights and weekends.

- Create additional **first and last mile connection** services to assist individuals in accessing existing transit services.

- Create **micromobility programs**, such as e-bike libraries, for those who would like to take advantage of other modes of transportation.

# Goal 4. Increased Support for Riders Over the Complete Trip

## Core Strategies

- Hold regular **local and or regional meetings** for human service and transportation providers to discuss needs and ways to coordinate.

- Additional support services from **curb to door**.

- Support existing local **mobility managers** and encourage coverage across the state.

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# Goal 4. Increased Support for Riders Over the Complete Trip

## Additional Strategies

- Utilize shared **scheduling software** with human service providers which allows them to directly schedule rides on behalf of their clients.

- Utilize software allowing family members or care takers to **schedule rides**.

- Integrate transportation **needs screening** and options into human service provision.

- Partner with local healthcare providers to increase **wrap-around services** for riders at their locations.

- Increased case management and **travel training** for adults with limited independence.

- Standardized **communications** language for Transportation providers on vehicle lift limits and options for those with oversized mobility devices.

- Coordinate **Managed Care Organization (MCO) benefits** in a given region to better support community transit and wrap-around services.

# Goal 5. Consistent Information and Streamlined Distribution

## Core Strategies

- Introduce human service transportation to other **local conversations**.

- Establish **travel training** programs to help community members understand their options.

- Create **single sources** of regional human service transportation information.
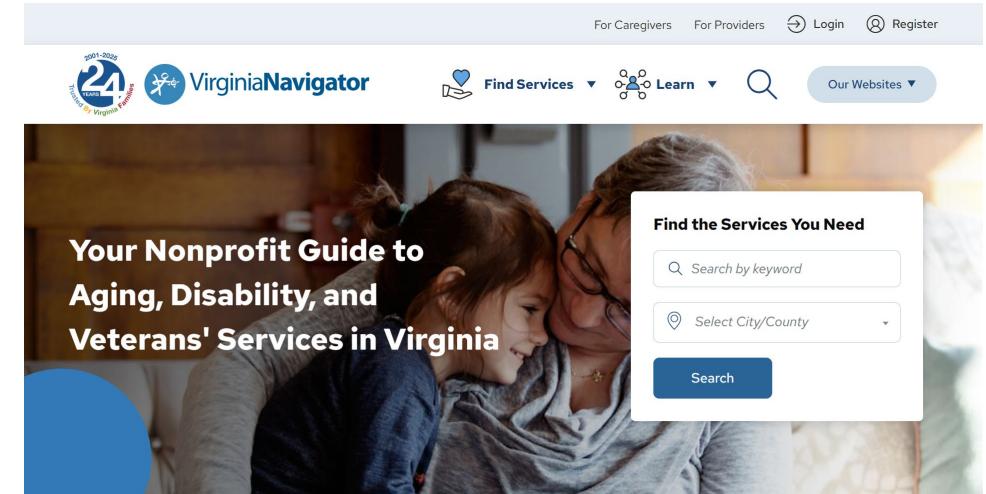
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# Goal 5. Consistent Information and Streamlined Distribution

## Additional Strategies

- Establish regional or statewide **standards** for human service transportation information.

- Create **templates** for systems to use for websites or other marketing materials to encourage the sharing of information.

- Local **points of contact** for human service and transportation questions.

- Build on **existing resources**, such as VA Navigator, to build online sources of transportation information.

- **Single source** of information and booking for transit providers across the state, such as a Mobility-as-a-Service (MaaS) app.

# Goal 6. Bring Human Service Transportation into the Broader Planning Conversation

## Core Strategies

- Create regional Human Services Transportation Plans to create **regional project pipelines**.

- Bring community transportation into local land use **planning conversations**, particularly for developments affecting older adults and people with disabilities.

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# Goal 6. Bring Human Service Transportation into the Broader Planning Conversation

## Additional Strategies

- Hold regular **local meetings** to bridge gaps between transportation providers, local government, and human services.

- **Regional mobility managers** to help bridge gaps in regional connections, ensuring resources and knowledge are not siloed within a single organization.

# Goal 7. Structured and Consistent Technical Assistance

## Core Strategies

- Create regional **mobility managers**.

- Increase **regular touchpoints** with 5310 grantees and other human service providers throughout the year.

- Utilize services from national **technical assistance** centers.

# Implementation

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# Setting up for Success

**Goal** → **Strategy** → **Action**

- Actions are specific steps and tasks that will help accomplish strategies and achieve goals.

- For each CHSM action, the Implementation Plan identifies a priority, timeframe, participating parties, and funding ideas.

- Implementation can allow the flexibility to adapt to changing conditions.

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# Goal 1. Diversify Funding

| Strategy | Action Item | Action | Timing | Outcomes and Measures | Unit of Government |
|---|---|---|---|---|---|
| **1.1 - Increase fund braiding to diversify funding sources for transportation programs.** | 1.1.a | Create an inventory of existing local/regional funding sources and what they are used for. | Short | Local inventory of human service programs and their funding structures. | Regional and Local |
| | 1.1.b | Identify non-transportation funding sources using the CCAM Program Inventory that are being used in the region. | Short | Local partnerships between human service and transportation organizations. | Regional and Local |
| | 1.1.c | Identify non-transportation partners with access to new funding streams that can pay for transportation to their services. | Medium | New partnerships to provide transportation for specific human service programs. | Local |
| **1.2 - Increase local knowledge and capacity for grant applications and fund management.** | 1.2.a | Identify the local and regional organizations applying for grants in your area. | Short | Local inventory of human service programs and their funding structures. | Regional and Local |
| | 1.2.b | Create local or regional committees to discuss potential grant opportunities, review applications, and assist with grant management questions. | Short | Local grant review committees in each region. | Regional |
| | 1.2.c | Hold regular information sessions at the state and regional level to discuss opportunities outside of the FTA 5310 program. | Medium | Bi-annual webinars on Human Service transportation funding structures. | State |
| | 1.2.d | Engage National Technical Assistance (TA) Centers to work at a regional level to build capacity for grant administration. | Medium | CCAM-TAC roundtables in regions across the state. | State and Local |
| **1.3 Identify regional entities with capacity and ability to accept funding and provide or contract for transportation services.** | 1.3.a | Identify regional entities that can accept funding and either directly run of contract for transportation services that cross county lines. | Short | Local understanding of what organization is champion for regional services. | Regional and Local |
| | 1.3.b | Develop regional plans for Human Service Transportation to identify service expansions or new services that cross jurisdictional boundaries. | Medium | Regional plans with regional project inventories. | Regional |

# Goal 2. Create Additional Capacity for and Expand Existing Services

| Strategy | Action Item | Action | Timing | Outcomes and Measures | Unit of Government |
|---|---|---|---|---|---|
| 2.1 - Coordinate locally to free up human service transportation capacity for recurring trips. | 2.1.a | Utilize the regional meetings to discuss capacity issues and potential ways to combine trips. | Short | Continuing regional meetings. | Regional |
| | 2.1.b | Identify potential shared destinations in the region, such as employment opportunities, congregate meal sites, and services for older adults. | Short | A regional list of popular destinations where trips could be coordinated. | Regional and Local |
| | 2.1.c | Identify potential shared scheduling software that eases trip coordination. | Medium | Increased coordination for trip scheduling. | Regional and Local |
| | 2.1.d | Pilot trip coordination with a few partners at first and resolve issues. | Long | Pilot projects for trip coordination in CHSM regions across the state. | Regional and Local |
| 2.2 - Focus volunteer driver networks on the needs of daily life. | 2.2.a | Identify community organizations that are currently hosting, or could potentially host, volunteer driver organizations and the necessary infrastructure. | Short | Regional champions for volunteer driving programs identified in each region. | State and Regional |
| | 2.2.b | Focus volunteer driver networks on the needs of daily life through advertising and trip eligibility. | Medium | Program marketing and incentives focused on errand running. | Regional and Local |
| | 2.2.c | Provide incentives for volunteer driving. | Medium | Additional incentive programs for volunteer driving programs. | State, Regional, and Local. |
| 2.3 - Increase incidental use of transit vehicles. | 2.3.a | Identify if local transit providers have vehicles that can be used outside of service hours. | Short | Local inventory of available vehicles in the community. | Regional and Local |
| | 2.3.b | Ensure transit operators that are willing to allow incidental use of their vehicles understand Federal reporting requirements. | Short | Memoranda of Understanding with granting agencies. | State and Local |
| | 2.3.c | Identify local partners that can fund their own transportation services if they have access to vehicles. | Short | Partnerships with local human service agencies to use vehicles. | Local |
| | 2.3.d | Pilot incidental use programs with a local partner who needs vehicles. | Medium | Pilot programs with incidental use of transit vehicles. | Local |
| | 2.3.e | Expand incidental use programs to fill gaps in human service transportation outside of hours serviced by public or community transit providers. | Long | Established incidental uses of transit programs throughout the state. | Regional and Local |

# Goal 3. Expand Beyond Existing Services

| Strategy | Action Item | Action | Timing | Outcomes and Measures | Unit of Government |
|---|---|---|---|---|---|
| 3.1 - Encourage the creation of additional community transportation options, particularly focused on community circulation and recurring trips. | 3.1.a | Identify organizations active in the community that could take on the responsibility of operating or contracting for additional transportation services. | Short | An inventory of potential service providers. | Regional and Local |
| | 3.1.b | Identify funding sources, either from transportation related sources, or from local partnerships to fund a pilot of the services. | Medium | An inventory of potential funding sources for new partnerships. | Regional and Local |
| | 3.1.c | Iterate from lessons learned in the pilot and expand the services. | Long | Best practices to be shared with other providers in the state. | Regional and Local |
| 3.2 - Increase utilization of contracted services. | 3.2.a | Understand the capacity limitations of existing providers in the region and their goals for growth. | Short | Local roundtables with transportation providers on capacity. | Local |
| | 3.2.b | Utilize contracted services for gaps that existing provider cannot fill. | Short | Number of contracted services. | Local |
| | 3.2.c | Publish RFP for needed services to understand what is available from private vendors. | Medium | Number of contracted services. | Regional and Local |
| 3.3 - Provide a variety of modes to meet the needs of every individual. | 3.3.a | Gain a regional understanding of the limitations of specific populations to better understand what mix of modes best serves the community. | Short | Continued regional meetings to discuss specific mixes of modes. | Regional and Local |
| | 3.3.b | Design services that meet the needs of multiple populations, while offering individualized support and billing. | Medium | Number of individualized programs utilizing public transit services. | Regional and Local |
| | 3.3.c | Build partnerships with human service organizations to maximize ridership and funding availability. | Long | Number of programs utilizing braided funding. | Regional and Local |

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# Goal 4. Increased Support for Riders Over the Complete Trip

| Strategy | Action Item | Action | Timing | Outcomes and Measures | Unit of Government |
|---|---|---|---|---|---|
| 4.1 - Hold regular local or regional meetings between human service providers and transportation providers to discuss needs and further ways to coordinate. | 4.1.a | Maintain and expand regional mobility meetings using Mobility Manager focus group structure, | Short | Quarterly regional meetings. | Regional |
| | 4.1.b | Invite local healthcare providers and other human service providers to meetings to discuss transportation barriers and how their organizations may be able to assist. | Short | Regional roundtables with local healthcare providers. | Local |
| | 4.1.c | Apply for assistance from national technical assistance centers to hold focused workshops with regional partners. | Medium | Number of TA engagements. | Regional |
| 4.2 - Additional support services from curb-to-door. | 4.2.a | Provide information to current and prospective riders on the amount of assistance each service allows | Short | Local guides and regional inventory of services with support. | Regional and Local |
| | 4.2.b | Partner with local human service providers to assist their clients at their locations. | Medium | Number of services with local providers embedded. | Local |
| | 4.2.c | Expand coverage of transportation services providing extra assistance to individuals. | Long | Number of services providing first-door through first-door services. | Regional and Local |
| 4.3 - Support existing local mobility managers and encourage coverage across the state. | 4.3.a | Support local mobility managers that connect and support individuals with transportation services and other needs. | Short - Medium | Coverage of local mobility managers across the state. | State, Regional, and Local |
| | 4.3.b | Ensure all localities in the state have access to a mobility manager focused on assisting individuals, local human service providers, and transportation providers. | Long | Coverage of local mobility managers across the state. | State, Regional, and Local |

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# Goal 5. Consistent Information and Streamlined Distribution

| Strategy | Action Item | Action | Timing | Outcomes and Measures | Unit of Government |
|---|---|---|---|---|---|
| **5.1 - Introduce human service transportation to other local conversations.** | 5.1.a | Identify local and regional interest groups focused on human service provision and invite them to existing transportation planning meetings. | Short | Inventory of local interest groups. | Regional and Local |
| | 5.1.b | Develop and deliver presentations on transportation services and common barriers. | Short | Number of local presentations. | Local |
| **5.2 - Establish travel training programs to help community members understand their options.** | 5.2.a | Understand the populations the travel training programs will be designed for, partnering with local human service providers to create a curriculum and resources. | Short | Learning objectives for regional travel trainings. | Regional |
| | 5.2.b | Create trainings for classroom settings and for real-world applications. | Medium | Number of available travel trainings in the state. | Regional and Local |
| | 5.2.c | Develop different training courses for different audiences and formats, defining clear learning objectives for each training. | Medium | Number of available travel trainings in the state. | Regional and Local |
| | 5.2.e | Provide "train-the-trainer" opportunities to local human service providers to ensure all providers in the community are up to date on what transportation services are available. | Medium | Number of available partner trainings. | Regional and Local |
| **5.3 - Create single sources of regional human service transportation information.** | 5.3.a | Develop and distribute guidelines for advertising common service information, such as service times, areas, and eligibilities. | Short | Template for common service information. | State |
| | 5.3.b | Utilize local and regional mobility managers as sources of truth for service information in their respective territories. | Medium | Number of local mobility managers. | Regional and Local |
| | 5.3.c | Develop a transportation focused resource with more detailed information. | Long | Transportation specific resource aggregator. | State |

# Goal 6. Bring Human Service Transportation into the Broader Planning Conversation

| Strategy | Action Item | Action | Timing | Outcomes and Measures | Unit of Government |
|---|---|---|---|---|---|
| **6.1 - Create regional human service transportation plans to create regional project pipelines.** | 6.1.a | Maintain regular regional meetings focused on human service transportation provision and common issues. | Short | Continue quarterly regional meetings. | Regional |
| | 6.1.b | Create regional project pipelines to build local and regional consensus on funding priorities. | Medium | Regional project pipelines for each region. | Regional |
| **6.2 - Bring community transportation into local land use planning conversations, particularly for developments affecting older adults and individuals with disabilities.** | 6.2.a | Identify local land use planning bodies both locally and regionally. | Short | Number of planning bodies identified. | Regional and Local |
| | 6.2.b | Attend planning meetings to ensure human service transportation perspectives are included in decision making. | Short | Number of planning meetings attended. | Regional and Local |
| | 6.2.c | Build long term partnerships to ensure providers have input on the planning of projects with implications for human service transportation. | Long | Number of new partnerships in the state. | Regional and Local |

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# Goal 7. Structured and Consistent Technical Assistance

| Strategy | Action Item | Action | Timing | Outcomes and Measures | Unit of Government |
|---|---|---|---|---|---|
| 7.1 - Create regional mobility managers. | 7.1.a | Determine ideal organizational housing for the regional mobility manager role. | Medium | Housing for regional mobility managers in all CHSM regions. | State |
| | 7.1.b | Develop partnerships with other state agencies to maximize the connectivity of a mobility manager role to other human services provided throughout the state. | Short | Shared understanding of what a regional mobility manager can do. | State |
| | 7.1.c | Develop funding strategies for the role in each region, utilizing the partnerships created for the role. | Medium | Regional funding menus. | State and Regional |
| | 7.1.d | Create roles for regional mobility managers focused on connecting programs and transportation services for older adults and individuals with disabilities. | Long | Regional mobility managers hired in each region. | State and Regional |
| 7.2 - Increase regular touchpoints with 5310 grantees and other human service providers. | 7.2.a | Develop calendar for 5310 program engagement, increasing the amount of non-application related engagement. | Short | Multiple 5310 engagements throughout the year. | State |
| | 7.2.b | Invite national leaders from the human service transportation industry to speak to providers in the state at virtual engagements. | Short - Medium | Number of technical assistance engagements hosted in the state. | State, Regional, and Local |
| 7.3 - Utilize services from national technical assistance centers. | 7.3.a | Develop a technical assistance strategy to prioritize statewide and local assistance from national technical assistance centers. | Short | Bi-annual technical assistance plan. | State |
| | 7.3.b | Apply for technical assistance opportunities that assist local providers build capacity for partnership creation and grant administration. | Medium | Number of technical assistance engagements hosted in the state. | State and Regional |

# Creating the Foundation for Success

- The project's stakeholder group, the IAG, has been integral to the CHSM process.
- Periodic reconvening and continued communication is key to CHSM Plan success.

## Foundation Strategies:

| Strategy | Action Item | Action | Timing | Outcome | Unit of Government |
|---|---|---|---|---|---|
| **Building the Foundation** | 0.a | Retain IAG structure and establish a regular meeting schedule and goals. | Short | Quarterly IAG Meetings | State |
| | 0.b | Establish Regional Coordinating Committees in each CHSM region. | Short | Quarterly regional meetings | State and Regional |

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# What Comes Next?

DRPT

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# Keeping Momentum

- The full CHSM Plan will be published to the CHSM website by February 17, 2026.

- DRPT will continue to partner with providers, and state and regional organizations to move the CHSM strategies and actions forward.

- The CHSM Plan will be a living, changing guide for the next four years.

- The next comprehensive CHSM update will be in 2029.

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# *Thank you!*