

2008 MARQUETTE COUNTY SPECIALIZED TRANSPORTATION COORDINATION ACTION PLAN

Facilitator: Jason Kakatsch, East Central Wisconsin RPC

Location: Liberty Hall, Kimberly

Date: 8/27/08

Things Done Well	Service Needs and Gaps	Limitations/Implementation Feasibility	Strategies, Projects, and Programs to Address Service Needs and Gaps	Responsible Parties	Timeframe	Priority Level
One phone number for transportation-one stop shop for info	More volunteer drivers	Fuel costs	Find ways to compensate drivers without being penalized	Feds, state, county, banks, citizens, businesses, CBRFs, nursing homes, fund-raising	ASAP - discussions amongst all stakeholders	high
Coordination Committee in place since 1979 - constantly examining ways to improve efficiency	Scheduling limitations for consumers (County) - CBRFs calling ahead of time	larger consumer base/funding	Obtaining additional funds/annual fundraiser/donations from various organizations	Feds, state, county, banks, citizens, businesses, CBRFs, nursing homes, fund-raising	ASAP - discussions amongst all stakeholders	high
centrally located from medical facilities/urbanized areas	Marketing these services to the public/organizations/nursing homes/health care facilities/etc. Also how the funding system works - County relies heavily on donations	Staffing - changes with the ADRC/participation from CBRFs	Obtaining additional funds/annual fundraiser/donations from various organizations/bring everyone to the table	Feds, state, county, banks, citizens, businesses, CBRFs, nursing homes, fund-raising	ASAP - discussions amongst all stakeholders	high
Door through door service is in place	Montello Care Center - no push button to open door for disabled. (Remodeling in progress.)	ADA requirements possibly overlooked due to changes in ownership so many times/drivers are not caregivers	Contact with the Administrator to implement this. (Remodeling in progress.)	Montello Care Center, CBRFs, clinics, County, social workers	in progress	medium
Mileage reimbursements						
	Many times health care facilities express that transportation is a right of the consumer and an obligation of the County/services taken for granted	Services misunderstood	Inclusion of additional agencies and health care industry on the coordination committee/update transportation brochure and education	Existing committee, CBRFs, nursing homes, social workers, encouragement of existing members to participate that don't	Ongoing	high
Transportation info is sent out to the meal sites/media/etc.	Increase the distribution of info/transportation availability for shopping/advertise transportation phone number	Staffing and funding	Obtaining additional funds/annual fundraiser/donations from various organizations	Feds, state, county, banks, citizens, businesses, CBRFs, nursing homes, funding-raising	Ongoing	high

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Elderly and disabled population service	Low income/employment services	funding	JARC grant a possibility, but the 50% match is a challenge	Diverse Options	2010	medium
	Limitations of medical options in the county forces people to go to other urbanized areas	Population/medical specialists	Families need to step in assume a larger role in medical and transportation needs; increase funding options through grant options	families through marketing, social workers, CBRFs, nursing homes, Faith in Action, neighbors, grants, fund-raising	Ongoing	high
Extensive training for the drivers which includes passenger assistance and sensitivity, CPR training, etc./additional stops (pharmacy, etc.)	rides for the ill more private rides for longer trips/short notice rides	cost per ride, large consumer base, funds	private provider and increase volunteer driver base	County, private transportation providers, social workers, caregivers, medical transportation	Ongoing	high
Creation of the ADRC	Communication - especially between counties/coordination of rides	lack of participation from some health care facilities/CBRFs	Creation of a Tri-County Coordination Group; flyers to discharge planners, ADRC committee to examine this issue regionally	ADRC committee, county transportation coordination committees, discharge planners, CBRFs, nursing homes, social workers, Tri-County Coordination Group	Ongoing	high
	Making funding less restrictive	red tape, specific requirements	federal and state policy change	Transportation Coordination Committees and local stakeholders	Ongoing	high
	coordination between all providers and agencies, especially more participation from health care providers, CBRFs, consumers, counties, etc.	participation from various agencies, lack of awareness of the importance of transportation,	invitation and expansion of other agencies at the transportation coordination committee	Existing committee, CBRFs, nursing homes, social workers, Tri-County Coordination Group	Ongoing	high
	increase relay/intercounty/regional transportation coordination and rides	communication barrier, approvals from the State and Corp. Counsel on committee breakdown	invitation and expansion of other agencies at the transportation coordination committee; creation of a Tri-County Coordination Group	County, State, Corp. Counsel, Tri-County Coordination Group	Ongoing	high
	Rural transportation in general, Greyhound, railroads, highways, all impact specialized transportation	Population/funding	federal and state policy change	Transportation Coordination Committees and local stakeholders	Ongoing	high