One-Call/One-Click Training: Webinar #1
Questions, Comments, and Follow-up

In the applications, assessments, and first webinar there were a variety of questions I noted for a response. If you asked a question and I didn’t respond, please ask again: it probably means I couldn’t make sense of my notes.

C. Many teams mentioned the need for additional services. This is very common, and I recall two of the original Mobility Services for All Americans (South Carolina and Kentucky) where the provision of additional services to meet critical needs was an important part of getting buy-in from diverse stakeholders. If building additional transit capacity is an important part of you project, put it on your list. To start, identify what, where, and when services are needed. If you do not know, then list the identification of this as part of your early activities. Once your center starts up and you are able to document the trip needs that are not met, building the service may be easier.

Q. Is it feasible to have a one-call, one-click (OCOC) service in a rural area such as North Central New Mexico?
A. Absolutely, although your service may look quite different than one in a largely urban area. Many of the OCOC sites are in areas with populations in the key city of around 30,000. In rural areas across the Southwest (and this is likely common in other rural areas as well), there is a significant need for connecting people with available long-distance or regional transportation options. If the nearest specialty medical services and nearest Veteran’s medical center are 200 miles away, you will likely find both a shortage of regional services and few options for people to figure out how to combine trips on the available services. If your OCOC service provided good information on available services – it is a challenge to find good quality maps and schedules that show multiple providers and modes in most of these rural areas – and served as a clearinghouse to schedule trips for people traveling long-distances – you could have a strong service. You are fortunate to have State services connecting communities and the rail service, but it may be that getting to and from these services remain a
challenge or that there remains a need for specialized services to and from distant points as some clients require more support because of their frailty.

Q. Who are vendors of scheduling software?
A. This is not meant to be a comprehensive list, because every time I look I learn about more. Some tend to operate in some parts of the country more than others. But here is a list I have and many will be at EXPO demonstrating their products.

- Route Match
- Trapeze
- Stratagen
- Mobilitat
- CTS
- Enghouse Transportation
- Engraph
- EcoLane
- HB Software Solutions
- Shah Software
- PC Trans

Q. What about marketing for OCOC services?
A. As noted in Webinar #1, this isn’t a topic we planned to cover. However, when doing the original research for the OCOC Toolkit, the best examples I found were through the Association for Commuter Transportation, a group that serves the various rideshare and vanpool organizations. In addition to contacting them, read section VIII in the OCOC Guide. Mr. Rico Fleshman, who was the Mid-Atlantic Manager of VPSI (a company that leases vans to vanpool programs) was interviewed for the “Advice from the Experts” document that is part of the OCOC Toolkit on the CTAA website. Some of his comments and those of Ms. Linda Daily, the United Way 2-1-1 Coordinator, are included in both the OCOC Guide and the Advice from the Experts. Your markets will be different, and indeed, among the teams in the training I see different marketing needs.

While many of the young who have disabilities remain as ongoing customers, you will have “newly” elderly or disabled people needing to find out about your
service all the time. In this way, it is like commuters who need to know commute options for their job, and again for a new job five years later. There is significant turnover in the consumers who need specialized transportation. As for regular transit riders, gaining transit ridership too is the result of ongoing public awareness efforts.

Consider marketing directly to consumers, to caseworkers, or to places where the elderly or their family members congregate. You might want to do brown bag lunches for case-workers in many human service agencies to share resources and explain how you can help. In the Denver Area, the original list of providers was printed on a large format – 11 x 17, I believe. This was folded into a brochure but also available flat, unfolded. Caseworkers would post a copy on the wall of their cubicles. I was surprised, but at many senior centers and assisted living centers the chart was laminated and used as a place mat. There was a surprisingly high demand for this.

If your team spends time researching this and identifies ideas, I will make sure to take time to go through them with you at Expo.

Q. Can you provide examples of OCOC services in metropolitan areas of 300,000 to 600,000?
A. Many areas of this size are parts of larger urban areas rather than freestanding. One you might wish to investigate is Via, serving Boulder County, CO with a population of 300,000. Others are Connect-a-Ride in Rockville, MD, Arlington County Commuter Services in Arlington VA, Go Triangle Regional Transit Information Center in Durham, NC, Miami Valley Ride Finder in Dayton, OH, and one of our participants, Link for Care serving the Kansas City area. Louisville Kentucky was one of the original Mobility Services for All Americans sites, and they have a population of around 700,000 – but are part of a larger metro area with 1.4 million. Ride Connection in Portland OR is similar – the city is 600,000 but it is part of a 2.3 million urban area. Some of the freestanding large urban areas that I am aware of in this size range are just thinking about OCOC services.
Q. What if customers don’t want to go through the OCOC but prefer to call their “standby” provider?

A. How one looks at this depends on the degree of joint scheduling that is important for the region to meet productivity goals. If it is critical that customers go through a joint scheduling system, then the providers need to sign on and transfer such calls to the scheduling center. As there may be issues with getting people comfortable that providers other than their “standby” can provide comparable services, you may need to address service quality and training standards, and engage in a marketing effort to let riders know you are serious about having all providers give good quality service. On the other hand, in other circumstances it may not be a problematic for people to call their desired provider directly. Only if the provider cannot effectively provide the trip would the request get sent to the OCOC center to get distributed to another provider.

Q. A question was asked about financing, and after thinking about it I believe I answered it too narrowly. Let me try again here.

A. As noted in the webinar, capital funds are available through the FTA (Section 5310 is a common source) for purchasing the capital items needed for a OCOC center. In addition, there is presently a solicitation through the Mobility Services for All Americans initiative to assist with planning and implementation activities, with a particular emphasis on projects that tackle the technology barriers such as interoperability.

A large issue for many agencies is how to pay for ongoing operations of the OCOC center. One option remains the FTA Section 5310 funds. As with every fund source, there is competition for such funds, which are needed for a wide variety of capital and operating projects. Ongoing operating funds are an issue for a wide range of programs, including 2-1-1 and 5-1-1 services and Aging and Disabilities Resource Centers and for transportation providers. If you are able to design a system that provides a useful service and relieves related organizations of some of their financial responsibilities, then their participation in funding the ongoing operating costs of the OCOC center becomes viable. Or, if by partnering
with them if you can help to cover basic overhead costs, you may be able to provide significant value to your region.