Hello everyone and welcome to today's webinar, the future of mobility management postcode.

My name is Brandon Rocio, I'm a project associate for the National Center for mobility management, a Technical Assistance Center at Easter Seals.

And before we get begin our session today. We'd like to acknowledge the tragedy at the Santa Clara Valley Transportation authorities maintenance yard in San Jose is clearly impacts our transportation industry, and our hearts and thoughts go out to VGA, and those who have been affected.

I just want to take a few moments to go over a few housekeeping items.

Please add your name and affiliate in the chat.

Remember to keep yourself on mute. If you are not speaking or asking questions, a recording will be available on the National Center for mobility management's website.

Please add your questions throughout the session in the chat box. Closed captioning is turned on for the session, and we hope you enjoy.

So, MC mn was founded in 2013 is a National Technical Assistance Center funded through a cooperative agreement with Federal Transit Administration and operated through consortium three organizations have these include the American transportation Association, the community transportation Association of America, and Easter Seals.

The primary mission of MC mm is to promote customers, etc mobility strategies that advance good health, economic, economic vitality self sufficiency and community.

It really works to promote cross sector partnerships and assistance supporting innovative integrated transportation services by building capacity and communities and improving transportation options.

So, what is Mmz and.

Who is it really for so part of our mission is to bring together mobility managers from across the country to engage one another and best practices, share insights and collaborate on issues important to them.
Mobility Management Connections is just that it is a forum to share ideas and mobility management strategies related to transportation connections and identifying mobility solutions up this community is for mobility practitioner mobility management practitioners who are actively advancing mobility management in their communities regions and states up so please if you haven't already, sign up for mobility management connections@learn.pyd.org.

We want to hear about your roles and mobility manager, your areas of interest, please share your experience network and learn from your peers.

We've actually recently added additional member benefits courtesy of partners for youth with disabilities own resource library, such as, e learning courses, access to webinars and other informational toolkits and guidebooks in proud to have three mobility management champions who support and advance our mission. Amber Simmons who will be our moderator for today's session.

It's a regional transportation educator and project manager for move together, New York, a regional transportation program from Cornell cooperative Cooperative Extension Tompkins County.

Sheila Holbrook White is a mobility coordinator from Washington County Community Services and Sarah Hill babo cook is the general manager of the Southwest Area Regional Transit District, all of them are experts in their field who worked to strengthen communities through coordinated transportation, and we're really excited to have them as our mobility management champions.

So now, as we begin today's session, I'd like to introduce today's moderator. Amber Simmons, Amber.

Thank you, Brandon.

So Coleman 19 has dominated every part of our lives, both personally and professionally, and our jobs have pivoted to respond too many emergency community needs on the transportation and Human Services front.

And as we begin to discuss how do we move forward beyond these many immediate pandemic needs, we thought it would be an interesting topic of what mobility management would look like past coven 19.

Today we have three speakers with us today bringing their unique experiences and expertise to share with our group, our speakers today are Alan Herman mobility management supervisor, Scott and Carver counties in Minnesota.

Vernon chambers, Assistant Director transit services rides in the Harris County Community Services Department, Houston, Texas. Enjoy a net tribal liaison for the upper Great Plains Transportation Institute, North Dakota State University Fargo, North Dakota.

And now I'd like to introduce Alan Herman and Alan began his career in student transportation and evolving over time to accounting position and is currently the mobility management supervisor for Scott and Carver counties that are both located in South,
15:07:54 located in the southwest of the Twin Cities in Minneapolis and St Paul Allen's experience includes managing dial a ride non emergency medical transport fixture service and coordinating volunteer programs in the past five years Allen has built a mobility management team that has focused on linking people to transportation, discovering the needs of individual communities along with continuously reviewing revising and updating available transportation resources in communities.

15:08:24 He looks for innovative ways to go beyond traditional funding coordination of resources and marketing and travel training which is embedded in mobility management.

15:08:33 This sets the stage for the next wave of innovation and transportation such as autonomous vehicles and mobility hub and Alan take it away.

15:08:44 Thank you, Amber, and thanks everyone for having me. Let me present our, our journey with mobility management.

15:08:55 Next slide please.

15:08:58 And again, that's the we think of mobility management as really a journey of discovering basically what is needed in the community.

15:09:08 And, again, finding those resources available for them. Excellent.

15:09:14 Just wanted to give you a background as to our location and so forth.

15:09:20 We are part of the seven county Metro region, which includes Minneapolis and St. Paul, of course, we are the south and west corner there the carbon and Scott County state as far as that's concerned.

15:09:33 Next slide please.

15:09:36 So part of our history.

15:09:39 Just to just briefly and so forth, is that we were providers, we were actually the ones providing the dial right and providing the volunteer driver programs at one time.

15:09:48 Then we have the counties of Scott and Carver became engaged in a, a combined service piece.

15:09:57 And then took on that emergency medical transportation in 2010.

15:10:06 Basically transit station in one of our cities in 2013.

15:10:13 Then engagement into a full marriage in 2014 as a full merger between the two counties happened in 2015 was a major change for us, where we basically changed from an operator, into a mobility manager, so we we laid off those bus drivers and basically went into a contract type mode.

15:10:34 And then 2016 that again began that mobility management piece, still managing then of course the data right volunteers, any empty, then now taking on shared vehicle.
15:10:47 We had a shared vehicle project and beginning in, travel, travel trainer and a marketing position began in 2018, some software investment was in 2019 and then 2020 hit.

15:11:01 Next slide please.

15:11:04 We think of mobility management in different roles right there's different ways that again mobility management touches operations and so forth. administratively we look at you any empty we manage that that way.

15:11:20 Volunteer Program is definitely an administrator, and then also that travel trainer, but then we manage other certain things like contracts, so we'll get $1 right contract and taxicabs and so forth for any empty again those are contracts that we have oversight on. But we coordinate other things where we we make connections that we have that again providers, we are the ones that are tracking what's available in our communities.

15:11:45 And then also making that networking connections.

15:11:48 We talked about the 5310 shared vehicle already. And then understanding how can Uber and Lyft, help us in certain areas and so forth. And then we talk about a new, new project we have coming up called hopscotch on the customer side, again, understanding

15:12:05 your customer what is it that they have for needs and so forth. But continuously assessing that you can't, it's not a one and done it's not a one survey and done.

15:12:14 It's a continuous process. So, and then that then leads to understanding of their access and could be even then also lead to travel training, you know, is it just educational that they need or is it more but more than that.

15:12:30 We're also very part centric, you know, we need to understand how we can help our providers how they can help us. Human Services is a great partner, understanding again, a lot of their client's needs and so forth.

15:12:43 Cities, even in. Again, the way we work with comp plans and so forth is to cities, understanding of what's the best way to get these things rolling so forth.

15:12:57 Also the nonprofits and the service organizations again, understanding those pieces.

15:13:04 Kind of forming our mobility management advisory board to get that same guiding force moving forward. Next slide please.

15:13:13 Just wanted to mention software and technology very quickly. Just thinking about that process when you want to upgrade or want to look at technology.

15:13:22 Remember to think about your five year 10 year type plan, and whatever that software or technology is, can it, adjust and move into that next next operation or the next upgrade without having to against switch software's or switch technologies.

15:13:43 So, just to mention that is the again a process that you need to go through in mobility management. Next slide please.
Some of the things that we use to link people to transportation.

Again we set up that JPA first with the counties and I've gone to the cooperative agreement, little less stringent and so forth.

We have that board that we meet quarterly with so they basically have oversight but also elected officials, helping us again move forward.

We set up that one call one click center that uses that technology and so forth to move that forward.

Also using the working groups and needs and gaps on the nodes, understanding each community has different needs, a suburb has maybe more resources, and maybe needs more education whereas a more rural area, doesn't have the resources so how we have to look at each community, a little differently.

And then also, updating those existing transportation services. So in other words, how do we again keep track of taxi cabs and move in and out of the areas or.

One of the main things is our their drivers to actually drive the taxis and so forth, which is what we're seeing right now.

Travel training has been against suspended for most of 2020, but now we're starting to see groups come back and so forth and, and as things open up what's available, who's who's still working again are our company's basically gone now since post coven share vehicle again that type of coordination piece again how can we have multiple entities actually share one vehicle in a process.

And again, making sure that each of those partners is getting what they need.

Now emergency medical transportation we use for other purposes, Jen. Other than that, we use them for foster care transportation or, or the veterans transportation.

So, again, again, thinking about outside the box for these resources.

Also new, new resources, again talking about a tons of vehicles we've had studies done on that and so forth. Senior needs grocery loops evenings and weekends, you know what is it that the people are actually looking for service outside of your regular hours. What's you know, how can the communities, use and need evenings and weekends type service.

Again we talked about working the city planners and so forth, coordinating regular route services, networking with employers, and so forth. The again, service organizations and even entertainment venues, understanding what it is their needs are and so forth.
And then the pandemic what one of the. This is just a list of things that we changed or modified based on that pandemic. We quickly became involved in the county emergency operations center.

This was a different approach in the fact that we had to understand, you know what was still available, and help each of the counties understand how can we help and alleviate some of the questions that people have as to how to get around.

During this pandemic right away we understood that the dollar I had capacity limitations and what does that look like, how does that affect people.

We quickly then worked on safety procedures, you know, temperature taking sanitizing the out of the, of the equipment passenger capacity limitations. Now, what does that going to look like and how will that, again, reassure the public that, again, when

you are on the vehicle that you are safe delivery of of essential goods such as food and proper protective equipment.

This was done actually in a very group, big group effort, and, which allowed really for folks to get food in a very different fashion. So, you know, transportation has always been done word.

You take the person to the grocery store or instead now we're going to go to the grocery store pick up the food and delivered to them so a totally different type of aspect, and even proper protective equipment.

Sometimes it was even just getting thermometers to people that were in lockdown just again a different type of aspect.

during that same time we used our non emergency medical transportation network for different things, used it for veterans transportation. We were the first ones to discover and how do we transport positive covert coven clients that need to get places.

And yet, isn't available, particularly on double public transit. So we use those networks to basically fill those gaps. And, again, current providers to get that done.

We also work with how to get essential workers and the transportation that they need. And all doing this, while working remotely which, again, also has its own challenges.

So what do we go to the next world, what's the next thing after covenant so forth besides those types of things. Again, let's let's continue that look at health co workers and and those transports and those the central workers, how can we again.

You know we stepped in and help them now, what's our next role so forth that continue to is looking outside again for that any empty network and what what they could do.

Now that we've kind of stepped into veterans transportation, what would that coordination model look like between the two counties for vintage transportation.
15:19:45 With autonomous vehicles becomes also that ability for over the mobility hubs, what's that next generation of, again, shared transportation.

15:19:55 Should we be continuing with food and PP distribution.

15:20:01 Should that's something that our space in that in our wheelhouse.

15:20:05 Again, looking at minority outreach, and even the equity questions as has arrived also now.

15:20:14 Still looking at the tn sees as Uber and Lyft solutions and so forth but understanding their limitations also school needs. Would that be different. Will that be similar to 5310 shared shared a vehicle piece.

15:20:25 We have one great partnership now we're otherwise we've just step back and let partners have formed their own bond and cooperative efforts. And then last but not least the hopscotch we're calling it different approach where a rule area that typically

15:20:46 doesn't have a lot of service. We introduce a minivan at in that area. We know then recruit volunteer drivers to drive the vehicles, calling them local heroes and basically saying hey let's help people that typically don't have all the transportation

15:21:06 needs met. Let's use these, this van and these drivers to make that happen.

15:21:13 Next slide please.

15:21:17 And I'm done.


15:21:34 I would have to say two things. Yeah, I go with the travel trainer, the travel trainer really kind of took off and and made. Basically, The ability to really get down into the nitty gritty, a lot of times we, we were able to advise people, but now we

15:21:50 can actually get into the one on one training over or of a group type piece, it really kind of step that up to the next level. And the other piece was, I think the key was the partnering with the County Human Services departments.

15:22:07 That was where a lot of times when when we found most of our needs, and gaps and and working with them on a continual basis, meeting with even small units or again and bigger groups for them to understand what's available, and how to use it, and even

15:22:25 how to fund it.


15:22:30 Thank you very much, Alan. So we're going to go to our next speaker Vernon chambers.

15:22:40 Vernon is the Assistant Director of Harris County community. Community Services Department transit division and under her direction the program has received consistent grant awards from the FDA.
And from and funds from the Houston Galveston Area Council Metropolitan Transit Authority and the Texas Department of Transportation. She is responsible for the management of three transportation provider contracts numerous partnering agencies and has delivered over 1 million demand response trips to the community since the program began in 2003.

She has been a champion of transportation coordination and assisted with the implementation of the Harris County Transportation Program, which has since grown into the very successful rides program.

Thank you, Vernon for agreeing to share your information with us today, and take it away.

Thank you, Amber for that introduction. And thanks to the National Center for mobility management and Easter Seals for this opportunity to present the Harris County rights program.

The next day Harris County rights program is a local transportation. Next slide up there we go.

Who are we, the rats program was formed because a study revealed there were gaps in transportation services within Harris County. And just for point of reference Harris County contains the city of Houston is right smack dab in the middle of, of, of Harris

local stakeholders became engaged in the planning process. They were trying to find out what would work best to fill in these gaps for transportation services within the county.

The program is administered by Harris County Community Services Department, the transit division. Next slide.

I service area as you can tell it's 1772 square miles, which is pretty large is the size of probably Rhode Island rides fills in the gaps and we are a county wide transportation program.

The city of Houston Harris County Metropolitan Transit Authority is really the designated or recipient for FDA funds, and they do provide fixed route service nada paratransit within the city of Houston, but the city of Houston is 202 square miles, that's

So outside of the city of Houston. The Metropolitan Transit Authority provides commuter parking by services back into the city to from outlying areas back into the city of Houston.

Next slide.

I service strategy is that rights is a coordinated program that's demand response and it spans mobility options in the county and across counties.

The program offers a flexible clients into transportation option within the whole region.

The program also provides our customers with choices. And I guess we say client centered if we were used in that that terminology before mobility mobility management was even thought of so we started that client centric type focus in 2008, and we provide
15:26:05 customers with choices promotes independence for older adults and individuals with disabilities. And we wanted to streamline that enrollment process so they wouldn't have to wait forever to get enrolled into the program.

15:26:19 We also monitor for quality of service. And we have turned the key contracts with our transportation providers which or taxi service and shared ride providers.

15:26:33 Next slide.

15:26:36 A little bit about the program overview. We have a targeted population of adults 65 plus individuals with disabilities vulnerable populations that include low income populations as well.

15:26:50 We coordinate demand response service, and we go have mobility management which is beyond the ADA requirement.

15:26:58 And we subsidize all of our trips, which are the user side subsidy which is kind of like about your program started off as about your program but now we move to electronic fare card system that provides GPS and so that when an individual load money on

15:27:14 their card. The trip is paid for when they swipe the card in the taxi of the shared by provider.

15:27:22 We also coordinate with United Way to one one we get a lot of referrals from United Way. And actually we have a relationship with them where when calls come in at 211 related to individuals with disabilities or seniors, they do an online transfer directly

15:27:42 into the rest program.

15:27:46 Next slide.

15:27:46 The transportation solution that works best for us it's a seat for everyone. There is no trip purpose, we have everybody mixed in with everybody we don't have to have a separate vehicle for non met for veterans or anything they all mixed in together on

15:28:05 our shared rides service, or.

15:28:09 And this is just an example of some of the types of agencies that we coordinate with personal care homes community based Human Services clients. Adult Day centers, senior citizens programs.

15:28:23 Women shelters. Ada paratransit, and then we also support short term disabilities, with the Medical Center here in Houston. Houston Medical Center. There are a lot of patients that go to MD Anderson Cancer Center, and we consider that a short term disability

15:28:41 for those that are just going back and forth.

15:28:45 For for treatment. That is not long term disability, it's not a long term disability, someone may break their leg or can't drive so we will enter them into our program and so that's considered a short term disability.

15:29:00 Next slide.

15:29:07 Mobility Management we've been doing that since 2008, as I mentioned, we call it we started calling it a client centered focus program like Since then, the term mobility management has been born.
But mobility managers offer assistance with 211 referrals. They help clients with first time reservation looking their trips, finding other transportation options and it might not be our program that they need transportation on but we help them in a system. 

Them in connecting with other regional transportation providers.

So, provide additional resources for further assistance, and service coordination with various transportation providers across the region.

Next slide.

This is our service coordination map where you can see it right in the middle of the map is Harris County, and we were surrounded by neighboring counties and we connect with them and so we also provide services across county lines with bizarre your county,

Montgomery county and Galveston and to see if Galveston, as well. We provide Ada services for the city of Galveston next night.

Uh, talk a little bit more about our coordination, partnering agencies fun 50% of the cost of a trip and we use that as local match.

We have about 30 partner agencies that can consist of health and human services agencies, senior citizens organizations and day centers, and something that we started in 2019 is working with transitional students that working with those navigators independent school districts. And that was something new for us it was started before Cobra in 2019.

One of the beauties of having these partner agency assist us is that they help us with customer enrollment and intake and customer education. In addition to providing that assistance for their clients transportation, the 50% discount.

The other 50% is paid for we use our FDA grants.

As far as regional coordination on the previous map you saw the different counties that we coordinate with other counties, but we have four in a local agreements across those counties.

Next slide.

So, like, Alan said here comes Kobe, and so we've had to make some modifications and mobility coordinators and most of us staff removed to work, remote work environment.

Call certain function was program for remote work. Fortunately had it people that supported and get that move from the office to remote work environment.

And we have to staff that alternate one day a week going into the office, doing financial processing and the mail handling post co bid. This is impacted us service about 35%, I think it's going to be going up, we see a city little uptick now but it had

A 35% impact on our number of trips providing taxi service can continue doing Colvin shared rides services reduced to single office, occupancy rather than multiple passengers on the, on the vehicle.
15:32:57 I staff communications was something that we were really concerned about, because we didn't want staff to feel isolated and we wanted to stay connected so we continue to do team meetings for communications with all of our staff.

15:33:12 And of course phone and email as well.

15:33:16 Next slide.

15:33:19 During Cove it is you know it was, in fact, infected, all of our public transportation so the region developed regional campaign that was called six eight.

15:33:31 And we participated along with other the other nine providers in our areas, and it was to promote the public to tell the public about being able to feel comfortable riding on public transportation we did, we did flyers.

15:33:49 We did a media campaign. We gave out hand sanitizers and mask and they all were mark and branded with the same logo on it. And we custom each regional book transportation provider, customize it with their own logo.

15:34:06 And this was all part of our Metropolitan Planning Organization working with them and all of the chance of providers in the in the region.

15:34:16 Next slide.

15:34:20 Some of our achievements during covert coded of partnership expansions, one of our partner agencies Area Agency on Aging with works with the city of Houston public kill SS reached out to us to ask us to transport

15:34:39 us passengers for testing sites, and since that was a success when they started destinations they started.

15:34:48 They reached out to get to us again to expand that for vaccination sites and drive through, and the agency was willing to pay the wait time for the taxis, to get them through that drive through sites for testing and as well as the best nation.

15:35:05 Doing Colvin, we also form new partnerships. And one of the partnership was one within our own county less interagency relationship, the county judges office reached out to us and asked us to provide transportation for Harris County Public Health, to

15:35:21 the vaccination drive through sites. And so we've been continuing that it's it's going well.

15:35:29 So we have continued that since they begin that partnership, about two months ago.

15:35:37 Next slide.

15:35:40 So who knew that virtual outreach would work well it did. And we've been continuing that in fact it's been very successful and the reason why we're able to continue that is that we've had our partnership growth has gone up by five agencies, doing coven

15:35:59 and we just didn't know that that would work but we tried it and I mobility coordinator has made more contacts, doing covert and it's been very successful.
One of the most successful outcomes of that was a partnership with one of the large hospital districts here in Houston, which is Memorial Hermann.

We've been trying to break through and, and reach out to her hospital. Hospital facilities to partner with us, but we were able to break through doing Kobe.

And so that's going very well and we were going to continue that partnership. After Kobe.

One of the other things I had mentioned is that transition to tomorrow is a workshop that we began working with transition students and working with independent school districts here and working with their navigators to develop transition plans to include mobility and transportation options within those transition plans. And that was a very successful workshop sale virtually. We actually had held one pre coded in 2019, and it was more successful virtually that it was face to face so that is something that we will be continue after Colby Colby.

Next slide.

We also developed a mobility management resource to call mobility leads one call one click. And that was a.

It's a database system that contains all of their transportation providers in the region that can be used by not only the general public, but our mobility managers within, within the region.

In the first part of this year we expanded that service and expanded it to have the one call one click portion that is answered by Harris County rides in our call center.

The database management portion of that resides on our Metropolitan Planning authorities website.

But they can call now.

The when they call the right number. They can either press one for mobility links or to her hair is kind of rights.

Next.

Next slide.

Cold reentry. Right now we are developing a 50% return to work policy for returning back to the office, I don't think it will be full time yet but we are at a 50% occupancy.

We've got to maintain a sanitation policy which I think was a great idea to maintain hand sanitizers and so forth, and mask if that's needed in for those that want it in the vehicles on our transportation bodies into taxi cabs and our shared ride providers.

And we will continue to use the six safe we're going to relaunch that campaign since it was so successful, just to make the public feel more comfortable and returning to using public transportation on the full level.
We will maintain our virtual outreach and all of our workshops, and we're going to maintain the mission to coordinate and growth services through mobility management.

Next slide.

And this is my contact information.

And this have. Thank you.

Thank you.

We've got a couple questions here but I think I'd like to start with one that came from the chat.

What has been your key to success in virtual outreach.

I think I've ability coordinators of continually because we're not the only ones that didn't move virtual winter virtual outreach. A lot of the organizations like ESPN put on by United Way which is elder service provider network.

Organizations like that have continue to do virtual outreach doing Colbert and so that connection is helped us stay connected and he's been successful in when, when we do our own virtual outreach to with those partnerships.

Thank you.

And so I would like to thank you Vernon and I'd like to introduce our final presenter joy and that

Joy and that is a tribal liaison for the great upper Great Plains Transportation Institute joy will work with people on tribal reservations across the region providing access to the UGPTI resources and expertise for facilitating safe transportation, enhancing livability, all while maintaining community and cultural values.

Joe was most recently, a family support and Child Protection social worker with White Earth Indian Child Welfare. She previously worked as a licensing foster care worker in the upper Midwest American Indian center in Minneapolis.

She has also served as the director of the Native American program at Concordia College in Morehead, enjoy currently serves on the White Earth tribal and Community College Council of Trustees and she is a founding member of the White Earth grandmother's Council.

Joy is also a delegate for the Minnesota Chippewa tribe constitution reform committee and joy our virtual floor is all yours.

Next slide please.

Hi.

Reservation reservations are unique, and they don't necessarily fall into the same mode, as most rural or even urban areas.
So I'm going to give you a little bit of background about traffic but being I'm in the safety area that's kind of my realm, at this point. So, traffic safety or the lack of it leads to a lot of the fatalities and injuries and crashes throughout the United States. And it's important to public health and safety concern for everyone. However, the American Indians are disproportionately affected by traffic crashes motor vehicle crashes are a leading cause of unintentional injury for American Indians and Alaskan Natives as well ages one to 44 with adults, one and a half times more likely to die in a crash with whites or blacks, according to the Center for the disc for Disease Control and Prevention. So, just one of the percentages, that's our realm there that a lot of the Native Americans around, reservations are kind of forgotten about. You don't really see a lot of cooperation with trying to get the Native Americans into a safer realm. Next slide.

The loss of life's and indices on tribal roadways has made an impact on funding for our communities, to better serve the needs of having better and safe to roadways. Transportation on the reservation serves much broader needs transportation impacts tribal members healthcare, education, employment, food, continuation of tribal traditions and ceremonies, which greatly was impacted by coven. And we'll go a little bit further and how these things with transportation impacted, all of these areas on our reservations. Now I don't work with just one reservation, I'm working with reservations in Minnesota North Dakota, South Dakota, Montana, and each reservation is unique and has his own membership and how they deal with everything. Next slide.

So people on the reservations when they heard that coven was coming, they knew that they had to do something, they had to deal with this new pandemic but pandemics are not new to indigenous people around the United States. So just a little bit of history on some of the things on epidemics that Native Americans have dealt with throughout history. So when Western Hemisphere was first kind of talking about with non native people, when they came in contact with the Europeans. They also brought with them not only different ideas and different things that might enhance our culture. They also brought diseases measles smallpox lot of diseases that the native people have never had before.
So therefore they didn't have any of the, the antibodies as needed to combat these things, which was really quite prevalent in Europe. So these things really weren't that devastating to European people, but the Native Americans, they were.

So these epidemics took the lives of almost 70%, or more of the indigenous populations throughout America.

Next slide.

Lot of these epidemics not only wiped out, families, lots of them just completely decimated entire villages in some tribes.

Next slide.

Then we had purposeful expulsion of the Cherokee people, particularly what was called the Trail of Tears.

And for several months. The Cherokees they were taken from their homes, even though they had bought.

President Jackson at that time. And actually, one, he was still remove them to a remote area thousands of miles from their homelands.

So they had inadequate shelters insufficient food know sources of clean water.

Kind of like what was happening to a lot of the things today, when the Epidemics hit.

The journey went west, an additional 1500 people perished, where they were already sick from malnutrition trauma exposure, so they can you know succumb to many multiple pathogens.

And once their arrival in Oklahoma an additional 500 died from similar causes the death toll during that epidemic. If you could call it an epidemic was over 4000 people of the 1600 25% of the people who were removed from their homes had died.

Next slide please.

So, indigenous people survive, and they adapt. So cope in 19, another pandemic has no reached Native Americans, and they realize, another pandemic that they must deal with.

Next slide please.

So, when the information about the impact on health of Copa 19 would have on the people tribes around the country, close their borders in their casinos and casinos were and are the main employment on most reservations, but safety and protection of elders.

And children came before money elders are keeper of our knowledge, our language, our traditions and ceremonies and basically there are libraries.
The Children's, there are the future of our indigenous people, those are the people that we most needed to protect and every single one of the 574 recognized tribes in America, knew that they must protect these people.

Next slide please.

So, when you put a face to these people. You can see all the children, they're so precious in the tribes consider them to be the most sacred of our people, they are the most pure in our elders, they are our libraries, they are the keepers of all of our knowledge. So those are people that we protect.

Next slide please.

So many reservations were the first in the beginning to lock down in locking down, doesn't mean you just go over there and put a key and put up fences and borders, locking down is making sure that the people are staying in their homes.

Staying in their homes and being isolated intentional isolation.

And because most of the reservations are in rural areas. They couldn't get from place to place, so essential food, education,

medical prescriptions, all of those things came into play. How were the people going to manage that.

So Copa Gritten 19 it greatly impacted, all of our tribal populations around the country.

And they instantly knew good transportation and mobility has to be planned prioritized and put in place.

Where were the people going to be getting the groceries when they were locked down when they needed to stay in their home so they didn't get this, this virus.

How are they going to get their food their groceries, their medication, their prescriptions that we greatly needed employment.

Most of the employment was now no longer there.

but they still have to get from place to place.

Most of the people lack vehicles, they don't have cars shuttle services are practically nil on our reservations. So those things, all have to be in place we have to find out how could we do that, emergency vehicles.

If something did happen. A lot of our reservations because we don't have them on our mapping systems. So when emergency vehicles would or could come into the reservations once it once they hit the boundaries.

They really didn't have places to go.
We had very limited essential workers on our reservations, working our police departments, our tribal councils, all of those people also have to be protected.

We also had our social workers, because on reservations, we do have the Indian Child Welfare, we have our Native children placed in native homes. But like any other foster care, they needed to be checked upon.

So all of those things, we had to figure out, in addition to, how do we educate our children. How do we educate our teenagers. How do we keep people from going crazy from being isolated so much. Next slide please.

So isolation of elders was necessary and keeping them safe, but we have to make sure that all of their needs were met.

We have to make sure that they got their groceries they got their foods they got their medications, and they needed contact from people.

So phones were put in place, computers were bought, even though we had very few actual powers that provided internet service. They had to have a way to communicate.

Children, no longer went to school in most of those children. They dependent on school to get a couple meals per day.

families dependent on that with feeding their children.

And these children they needed to be fed. Next slide please.

So medical needs were the forefront.

Indian Health Service couldn't close down. They were the essential workers, still they needed to be protected also all precautions were taken to keep the staff and medical providers safe.

The tribe set up the shuttle shuttle services to keep those in need of medical services to their appointments, and also to deliver medical supplies and prescriptions to the people,

the medical staff stayed at the facilities.

Most of the reservation had volunteer people who would make deliveries.

Deliveries for their medicines, volunteers to go out because a lot of our elders still provide and still use their traditional medicines, but they weren't allowed to go out they were being protected so they couldn't go out and they couldn't gather a lot

of these central plants that they need it every year.

So they have to be in communication with the elders, and through social media to our computers through phone services to pictures. All of those are teenagers are adults, even some of you know the younger.
The younger people would go out and collect those medicines for the elders, all of this is done on a volunteer basis.

All of this is being done, knowing that they need to be out they need to be in contact, but very little contact is needed when you go out into the woods by yourself, but you still need to be protected because there's other things, other dangerous available.

So you still have to have that mode of communication.

Next slide please.

lot of our reservations are very remote from houses our roads, our roads, usually aren't paid 60 60% of the roads on our reservations are gravel roads.

So we still have to get people out there working, to be able to keep these roads and conditions, where people come from get from here to there, the pandemic pandemic didn't stop when winter came around, we still have to get those people out, we still had to train people on how to take care of the roads also.

So all of this is being done on our reservations.

Very little outside help.

Next slide please.

So isolation to people who are society, by nature is hard, the pandemic has also increased drug use and overdoses are at an all time high.

Our young people.

They have nothing to do, they don't go to school.

Most of their services that they had their phone service their internet.

Very few of that is available on our reservations.

So there's struggling to overcome a lot of the increased drug use. So our mental health, people need to be on top of all of that, we need to get out there to the young people, we need to get out there to the older people.

You know our adults, they don't know what to do. They no longer are employed. We have to keep them all busy. and we have to also give them things that will occupy their minds as well if there is their hands.

Next slide these teachers from our historic programs and grade schools are delivering meals on a daily with their lessons on a daily basis to the children. So the children are being fed.

But the parents still have to get that food also internet services is being slowly provided to these people.
And to that a lot of them are smartphones, which the reservation Council has saw fit to provide to their people because they have to be in communication with them.

Computers are essential for all of our children from first grade all the way through our college students, computers were being provided.

Next slide please.

Cultural teachings have renewed on the reservations because they figured the people who are at home right now, they're not being able to work, they need to be kept busy.

So through social media through this computer services. We are renewing, a lot of our cultural teachings, we're doing a lot of our storytelling.

We're showing a lot of how to do things on the computers.

So a lot of people are now going back to their cultural ways, which seemed to be a very much a life saving mode for many of the people.

Next slide please.

So a lot of things that's happening on the reservations.

We'd love to dance, we love to be together. So, how're we're doing that we're doing it to social distance power walls, you dress up, you sit there, you get your camera out, and you start dancing in you start putting it on to our different Paolo sites.

We have almost 40,000 people across United States on the social distance power network, people dancing.

We have our women who are in our jingle dresses, putting on their jingle dresses and getting them together because the jingle dress is a healing dress.

They're dancing for people, they're dancing to help heal all people in the United States because of that jingle dress, the healing mode.

they're able to get together to social distancing.

People are talking together people are singing.

The teaching the younger kids how to sing to keep our songs alive.

Keep the traditions, break all the addictions, that is what is being hailed on our reservations now.

So there's a lot of things that are going on to our reservations, which we absolutely need to have, because we are kind of a forgotten people there's lots of services out there, there's lots of services in our urban areas.

There's even a lot of services in the rural areas, but not many of them are going on to the reservations. We don't see a lot of that type of networking.
But we are surviving. We've always been an adaptable people, we've survived 575 years so far and I hope we're going to be surviving another 575.

But it's very apparent that we still need to work with this coven 19, we still need to keep our people safe.

And we will continue to do so with people like we have on here today. People who we can share knowledge with people who can help us with giving us ideas on how to what needs to be done.

where can we help get surfaces.

So, thank you burnin, Alan.

All these people who are here.

And Next slide.

This will be my last slide. So through the mobility indigenous people will survive and week which. Thank you.

Thank you joy.

There is a question from our chat, and she, and they asked, Are there opportunities through North Dakota State University or other organizations that you are aware of the offer or provide cultural competency training in working with tribal members who may live in our communities.

We find that a lot of the universities, or the schools around the area actually go to the reservations and bring people in to help teach those who are in the community.

So rather than people from the university going out there they're actually bringing people in to teach.

And I also in my own home, I will teach people. People who asked me to come.

I have my house open to all people.

Thank you.

Thank you so much for your presentation.

We actually we are now going to be initiating an audience poll.

Hello everyone this is Brandon we’re going to give it about one more minute for the audience to answer the poll questions and then I will share the results.

Great.

Everyone should be able to see the results of the poll on their screen I invite all the panelists to come back on video and we'll begin the panel discussion in audience q amp a.

Thank you.
16:06:31 Terrific, I'd like to invite our audience to ask our panelists some questions.

16:06:53 I can start off, asking, there was

16:06:59 your head a couple questions regarding the rides program funding sources, did you use for the rides program.

16:07:08 Should we use a blended funding sources FCA funds could be 310, elderly and disabled for.

16:07:18 And also we use UFTA 5307 herbal of funding.

16:07:40 Thank you very much.

16:07:42 You're welcome.

16:07:46 And it looks like they're up there is an answer to that too.

16:07:51 We were looking at.

16:07:54 Alan, do you know what your biggest hurdle was when you switched over to going from, you know, operating at transit to mobility management.

16:08:10 Once the the biggest hurdle but one of them was the understanding of elected officials or even county commissioners, you know, what's, what's the benefit of this new What are we going to see as a results, I guess, and it took them a little bit, but now

16:08:30 they are more open to suggestions and ideas and actually, sometimes even open up their pocketbooks, so they've. They basically you know funded things like evening and weekend service, and so forth so really getting the message to them, so they understand

16:08:52 it and then when you ask for the money. At some point later on they that information can make an informed decision.

16:09:03 Great, thank you. We have another question from the chat. What kind of perform for Alan and burn and what kind of performance measures do you use to assess impact.

16:09:16 Well, I'll go first.

16:09:18 We use trip volume. We use outreach, volume. We track on time performance, and all of that data is available through our system using the GPS.

16:09:33 We know what time they were picked up how long they road, and where they you know actually pick up and drop off information so we have a lot of data that we collect that we can use for performance measurements.

16:09:50 We use very similar has suffered and pointed out, we also then you just suffer Xena like on the travel training piece we use follow up surveys or even follow ups to those types of trains that we give them, wondering, hey do you do need more help on certain

16:10:07 aspects or.

16:10:10 Would you like another training, or how was the training that type of stuff.
We also have an annual customer satisfaction survey that we do every year to gauge how people are using this service and any opinions they have on how we can improve surface.

We do that on an annual basis.

You joy, what are some of the other services on the reservations during this up epidemic.

There was quite a few the college itself the wider community college and different colleges on the reservation, with their student services, put together a lot of with people helping out most of the colleges in Indian country right now, how that they had more graduates this year than ever before because of the remote learning.

So that was one of the things that we were using the cares money that each tribe God, each one, because each tribe is so different that they're able to fund different projects that they see, you know, most needed on the reservation so each tribe is different.

In that aspect depending on the location.

Depending on the amount of people the population is just that each tribe is so different, but each one of them has managed to survive and help most of the people with very little impact of the coven to the people.

It mostly was devastating because of unemployment, because of the remoteness the isolation, but just keeping people safe.

So just some of those things that that was going on.

Thank you so much as the next question looks like it for Vernon what kind of marketing items were purchased.

What is it safe campaign.

That was for public returned to public transportation use, we purchase mask and hand sanitizer individual bottles of hand sanitizer.

We had, we did flyers, and that was the, you know, they'll be posted on the vehicles on our fixed route service we posted discussing where we put it in between the seats and keep this eat bacon, that kind of thing.

Those are the items that were purchased in the city safe campaign.

purchased in the city safe campaign. Thank you.

Just checking to see Brandon Do you see any other chat questions, trying to keep up here.

You are your social distancing on your social distancing on your vehicles and if so, how are you handling your trip volume, do you reduce the ridership per vehicle or did you offer a second vehicle to meet that need.

And I think this is for the entire panel.
16:13:28 where for Harris County rides we use taxis, and we had shit and we also have shared ride providers, the taxis are individual individual trips any way, unless they're with their family to members with their family or someone did they travel with It's already


16:13:45 But for the shared ride we did reduce it to one. One person traveling on a vehicle, which means that you have more vehicles than you normally would have to meet that demand.

16:13:57 Our either a lot of that traffic was transferred from shared ride to taxi which would be more efficient to accommodate the single occupancy.

16:14:11 And as far as we’re concerned.

16:14:14 We started with one per vehicle, and then went to three.

16:14:30 In about October, and then actually as of this week, we went back to 50% of capacity. And actually, by Friday of this week, we will be at 100% capacity so things are moving quickly a pyramid so the backup, as, as can part of the government type mandates

16:14:41 Backup as as Ken part of the government type mandates and so forth. And same thing purpose of the one versus three was to keep the six foot distancing with within the buses, so.

16:14:58 Well thank you we have another question.

16:15:03 Does it ever get to a point where we can capture data about how it has impacted health, access to jobs, access to food, etc. What are your thoughts on that.

16:15:16 Well actually, our Metropolitan Planning Organization does this Colbert survey every month to all the regional providers, and they are capturing a lot of data related to to covert in transportation.

16:15:47 How is affecting the, the volume.

16:15:36 And what corporations are thinking about in terms of going back full force, when did that kind of happen. and they they capture all of that on a monthly basis they've been doing it since the beginning of Colbert.

16:15:50 So at the end of.

16:15:53 At the end of covert postcode but we hope we have a lot of data that they've collected

16:16:01 weirdness to start to consider how we like an economic impact so for instance.

16:16:10 What is the cost for instance of a medical trip that was cancelled. For a facility, when that was when they had to cancel because of transportation, or what's the impact to an employer.

16:16:24 When the person can't work because they don't have transportation So,

16:16:30 sometimes it's more.

16:16:34 Again, research, than it is anything else.
And also relative terms so it's I think it's tough to to measure some of these things in a vacuum. You have to have. There's other impacts that affect transportation too, so.

Great, thank you burning Thank you Alan, you know. Many states have been mask mandates. However agencies, really have to follow the federal mask mandate so how are you in particular handling telling riders and conveying that mask is still required per the federal government, I know this has been a big challenge throughout the nation transit. We found on the federal guidelines and so we still requiring mask on all of all of our public transit, including the taxis for the rides program, shared ride fixed route, we're following that mandating. So far we have not had a lot of controversy over but I anticipate going forward that may be an issue that we have to deal with.

As long as the. It's a conflict between what your state is requiring, and what you know is required by federal FDA, or the TSA, because we will be following that because we have federal we use the federal dollars so we have to require follow those requirements. And that's exactly. Yeah.

That's another thing that with the tribes because they do have sovereignty. They don't have to follow state mandates. They are dependent on what each tribal council determines, you know, should it be mandated, should it be personal. So each tribe is separate that way because they do not have to follow federal mandates, or state mandates I will say follow the money. You're getting funded by somebody, you better have to follow their rules. So, a lot of strings attached. And a question for those of you in your presentations a couple of you work with volunteer programs, how have you addressed volunteer driver recruitment challenges that have been across the board. Oh, we did two things in our state. We've got state village legislation, we think, to two things that are hindering volunteer transportation one is the insurance aspect. With the increase of Uber and Lyft, and and not defining a volunteer as a, not for hire. So our state is going to hopefully pass this legislative session. The definition of a volunteer driver. So that insurance company can understand the difference and and help that not penalize basically volunteers for that. The second part was.

And a question for those of you in your presentations a couple of you work with volunteer programs, how have you addressed volunteer driver recruitment challenges that have been across the board. Oh, we did two things in our state. We've got state village legislation, we think, to two things that are hindering volunteer transportation one is the insurance aspect. With the increase of Uber and Lyft, and and not defining a volunteer as a, not for hire. So our state is going to hopefully pass this legislative session. The definition of a volunteer driver. So that insurance company can understand the difference and and help that not penalize basically volunteers for that. The second part was.
Try to alleviate the 1099 type aspects. So, a volunteer driver who makes over $600 a year, could receive a 1099, and have a federal income tax, based on that.

And as soon as again at the legislature this year. I'm not going to take on the federal taking on the IRS but want to give a credit then if you do end up paying a federal tax, they give you a stick credit on that film federal tax.

So, that was two ways our status, hoping to alleviate some of that, what we think are some things that hurt recruiting as far as volunteers is.

We don't use volunteer service.

All of our contracts or competitively bid.

And we don't use volunteer services.

Most of the reservation uses a lot of the volunteerism, but that's just it is volunteerism.

One of the biggest obstacles there is training them and making sure that they're following you know guidelines that are put out there, or giving them the training of what they normally don't have.

So it's usually just training of them with, you know, letting them know what's expected.

Terrific, thank you very much. Are there other questions.

I do see one more question we have about five more so we are I mean five more minutes so we can call last call for questions from the audience if you have any please submit them to the chat box but virgin, you serve.

So many diverse communities in your work.

What do you attribute your success in engaging these communities and how can that be applied to other areas in the country.

Well, I think the best answer is centered around our active engagement in community outreach with social service agencies, and all different types of nonprofits.

Over the years we formed a great relationship with organizations like United Way, you participate heavily in our regional coordination committees and work groups within our planning organization.

and nothing beats word of mouth.

Through these types of partnerships and relationships, they bring to us pretty unlikely audiences to fall into the gap for unmet transportation needs.

Basically I can't stress enough the value of cultivating partnerships.
16:22:47 Because of these long term relationships that we formed. Sometimes, oftentimes they seek us out to help provide mobility solutions so the key is the networking and the partnerships and long term relationships we formed over the years since 2003.

16:23:13 Thank you, Vernon, Amber. I don't believe we have any more questions so I'll pass it on to you now ready.