

Northern Colorado Mobility Committee Agenda

May 27, 2025 1:00 – 3:30 pm

Windsor Community Recreation Center Buckeye/Redwood Room (250 11th St. Windsor, CO 80550)

Agenda Item Number	Agenda Item and Item Description	Presenter	Time
1	Call Meeting to Order, Welcome, & Overview of Agenda	Hull	1:00 - 1:05
2	Introductions & Icebreaker	Hull	1:05 – 1:10
3	Public Comment	Hull	1:10 – 1:15
4	Approval of February Minutes	Hull	1:15 – 1:20

Activity

Agenda Item Number	Agenda Item and Item Description	Presenter	Time
5	Speed Networking	Hull	1:20 - 1:40

Presentations

Agenda Item Number	Agenda Item and Item Description	Presenter	Time
6	CASTA Recap	Hull	1:40 – 1:45
7	RideNoCo Updates	Deaton	1:45 – 1:50
	Break		1:50 - 2:00

Discussion

Agenda Item Number	Agenda Item and Item Description	Presenter	Time
8	NFRMPO Title VI Plan Presentation	Karasko	2:00 – 2:15
9	2025 Coordinated Plan Presentation	Hull	2:15 – 2:40



10	Potential Mobility Project Ideas	Hull	2:40 – 3:00
11	Mobility Case Studies	Deaton	3:00 – 3:20

Wrap-up & Roundtable

Agenda Item Number	Agenda Item and Item Description	Presenter	Time
12	Announcements & Member Updates	All	3:20 - 3:30

Next Meetings:

- Weld County Mobility Committee: June 24, 2025
- Larimer County Mobility Committee: July 22, 2025
- Northern Colorado Mobility Committee: August 26, 2025





Northern Colorado Mobility Committee —MINUTES

February 26, 2025 1:00 p.m. – 3:30 p.m.

1. Call Meeting to Order, Welcome and Introductions

In Person:

- Aaron Hull, NFRMPO
- Lisa Deaton, NFRMPO
- Paul Sizemore, NFRMPO
- Jacque Penfold, Citizen
- Steve Conaway, RAFT
- Kristi Swasko, RAFT
- Celest Ewert, Envision
- Jaclynn Streeter, GoNoCo34
- Ty Lamm, United Way Weld County
- Nichole Seward, Weld AAA
- Jessica Villena Sanchez, Mobility for All
- Felipe Mosqueda, Mobility for All
- Sarah Lee, Mobility for All
- Elaine C. Erb, Boulder Chamber Transportation Connections
- Jenna Robinson, SAINT
- John Matis, Citizen

Virtual:

- Bridie Smith, COLT
- JoAnn Herkenhoff, UCHealth Aspen Club
- Hannah Shelley, Transfort
- Colleen Samules, DRMAC
- Hannah Groves, Health District of Northern Larimer County
- Stephanie O'Neill, DRMAC
- Latoya Prante, DRMAC

- Ari Edgely, Foothills Gateway
- Ian Chase, HDR
- Ann Rajewski, CASTA
- Lisa Bitzer, Via Mobility Services
- Steve Teets, WAND
- Jill Matlock, Weld County Public Health
- Ernest Cienfuegos-Baca, United Way Weld County
- Katlyn Kelly, Transfort
- Dena Boutwell, Via Mobility Services
- Amy Thompson, Boulder Valley School District
- Adriana Torres, Via Mobility Services
- Angel Bond, Mobility for All
- Melissa Hunter, Mobility for All
- Jennifer Ochs, Ms. Wheelchair Colorado 2023
- Michelle Trevino, United Way Weld County
- Margie Martinez, United Way Weld County
- Heather Sterling, Transfort
- Margery Gavin, Commuting Solutions
- Valeria Martinez, DRMAC
- Irene Davila, Adeo
- Rocke.
- Natalie Brown, Summitstone Health
- Robert Morris II, Boulder County





Activity

Group Introductions and speed networking.

Both virtual and in-person attendees introduced themselves and their organizations. The in-person group did a speed networking exercise to get to know each other and learn more about each other's respective organizations and services.

Public Comment:

Lee from Mobility for All shared with the group that she lives in Longmont, and it is difficult and sometimes impossible to go to Loveland, Fort Collins, and Greeley. She said she goes to the temple in Fort Collins, and taking an Uber is very pricey. She asked the group if anyone had any ideas. Teets mentioned the FLEX bus as an option. Lee said that she could take the FLEX, but getting from the nearest stop to the temple was difficult. Ochs expressed that she would like to help understand how FLEX works, and Deaton said she could help.

Presentations:

2025 MAC Priorities, BoCo Coordinated Plan, 2025 MAC Priorities - Bond and Villena

Bond introduced herself and the Boulder Mobility and Access Coalition (BMAC). She said the BMAC provides multi-modal support for transportation, including providing bus passes, information assistance, and bike programs. Their mission is to support populations that are not well served by the current transportation system, such as older adults, youth, people with disabilities, Veterans, and people who speak Spanish. Bond discussed the top 8 BoCo MAC priorities for 2025 and how they are based on their Coordinated Human Services Transportation Plan.

Villena discussed the Mobility and Access for All Ages and Abilities Plan and its goals and objectives. She gave an overview of the twenty-five strategies and how they are organized and prioritized. She then talked about the MAC Work Plan Priorities for 2025 and how they approach priorities. Teets talked about Greeley's Bike Share program and asked who is responsible for bikes being left on sidewalks and causing a potential hazard. Bond said that Boulder also has a program and passed a code stating that the providers are responsible for keeping the bikes and scooters out of the right-of-way. In the future, there will be docking stations for bikes. Teets asked for more information about adaptive bikes and how they are being promoted. Hunter discussed the Earn a Bike workshop for Boulder Housing Authority and said the demand has dropped. They will explore other bike needs and work with people with disabilities who need adaptive bikes. This summer, they hope to gather a small group interested in getting fit for a bike, and Boulder County will help cover the costs. Teets asked about the future of connectivity from Boulder County to the north. Bond said that Via



Mobility Services provides paratransit service to the north and that Boulder County has been investing in transit services that RTD is not able to provide.

RideNoCo and NFRMPO Updates, NFRMPO Coordinated Plan, NFRMPO Mobility Priorities, NFRMPO and RideNoCo Updates & Priorities-Deaton

Deaton gave the RideNoCo call center statistics and details about the information collected and tracked for the call center. Teets asked if RideNoCo knows the percentages of callers getting the rides they need once they are referred to a transportation provider. Deaton stated that RideNoCo can only track the callers sent as referrals to the Coordination Project Participants in the TDS system because it shows if their ride request was accepted or rejected. Teets discussed the transportation challenges Veterans face due to unreliability and shortage of drivers. Cienfuegos-Baca asked Teets if he has used RideNoCo and said that RideNoCo is a one-stop-shop for our region. Other participants noted that RideNoCo tracking is a good tool for identifying gaps and finding solutions for future planning. Deaton was asked if the gaps she named were actual or just being used as an example. Deaton stated that there are actual gaps being recorded from the calls. Conaway talked about the regional gaps and black holes, especially in the rural areas and the jurisdictions. Sizemore talked about the TDS project participants and how we share information. Matis asked who we were working with and discussed US34 and the division of Larimer and Weld County. Hull responded by discussing the GoNoCo34 TMO and introduced Streeter, who agreed to discuss it after the meeting.

Hull gave updates on the NFRMPO's 2025 Coordinated plan. The purpose of the plan is to help mobility for older adults, individuals with disabilities, and low-income and underserved communities. The Coordinated Plan for Coordinated Transit (Mobility) in the region is updated every four years, and it allows for projects to be funded by the FTA 5310 funds. Hull discussed the gaps our region is facing and asked the group to contact him to discuss gaps they have noticed, what would be helpful to address these gaps, and who needs to be part of the conversation. Teets asked if there are any resource guides, and Hull said RideNoCo has rack cards and other information that can be distributed by request. Hull discussed the NFRMPO's top five priorities, mobility programs, and projects. Bond asked if the *MyWayToGo* platform is only for commuting options or if it includes human services transportation options in the database. Hull said that it is being worked on and should be included soon.

Discussion

Joint NCMC and MAC Priorities

Hull asked the group to break into smaller groups of three or four and discuss the NCMC and MAC priorities. Bond shared that her group agreed that there should be improved communication between coordinating councils to become more aware of the activities each council is doing.



Suggested travel training between Fort Collins and Longmont and said that Mobility for All has a fund to support one-time trips with Uber and Lyft and can help RideNoCo with their "Angel Fund." She suggested doing a transportation/mobility summit in 2026 and making sure transportation agencies and funders are invited. Sizemore shared key takeaways from his group, which discussed the first mile/last mile connections and some micro-mobility solutions that are being implemented. He said the central theme in the conversation was the gaps, the rural areas, and service across jurisdictions. They also discussed how to balance reduced trips, the return-to-work mandates, and the language we use to discuss what we do due to the new changes in the federal government.

NCMC Mobility Case Study #1

Deaton presented a case study about a 92-year-old woman who lives in east Loveland and needs to get rides to visit her husband, who is in a rehab facility in Windsor. She lives in COLT's Dial-A-Ride service area, but the time it takes for approval is too long, and how would she get back home? Kelly said that as long as her trip originates in the service area, her return trip will be honored. Lee asked if Dial-A-Ride covers that area and that she thought it only covered the Loveland COLT service area. Kelly explained that the Dial-A-Taxi program provides a \$20.00 taxi voucher to get you out of the service area; if it is associated with the origin trip, it will get you back to where you started. She explained that with Dial-A-Taxi, if the meter goes above \$20.00, the rider is responsible for paying the difference, and there are a limited number of vouchers that one can get in a day.

NCMC Mobility Case Study #2

Deaton presented her second case study about a man who lives in Fort Collins and works in Loveland. He is blind, and his only affordable option is to use Transfort's FLEX bus to Loveland, then transfer to a COLT bus and walk to his destination. The total round trip is 3 hours. He has an irregular work schedule, so carpooling and vanpooling are not options. He has utilized Lyft, but it is not a cost-effective option. Edgley asked if he has a Foothills Gateway case manager, and if he does, Edgley can help. Teets asked about Lyft and Uber charging higher rates during inclement weather and how that is regulated, especially for people with disabilities and older adults. Lee said that it is not just the weather; there are upcharges during rush hour. Hull stated that Uber and Lyft are independent contractors that can charge for what they want. Bond said it is a way to entice more drivers to get on the road during those times by paying the drivers more. Sanchez shared that a new rideshare called Colorado Cooperative does not charge surge pricing, and the drivers get paid well. Smith said that he could become dual eligible for Dial-A-Ride in Fort Collins and Loveland and utilize the Dial-A-Taxi voucher to go between cities. Lee said that it is difficult because of scheduling. Kelly further explained how it would work, and Dial-A-Ride is guaranteed, but Dial-A-Taxi is not because it depends on driver availability. Swasko asked why the two cities are siloed. Kelly explained that the service areas are based on FTA standards, and because Dial-A-Ride is an extension of the bus



service, paratransit only has to be ¾ of a mile outside the fixed route bus service. The FLEX route does not qualify.

MAC Mobility Case Study #1

Sanchez presented a woman who does not own a car, primarily speaks Spanish, lives in Mead, and works at CommonSpirit United Hospital in Longmont. She uses Uber or relies on friends and family to get to work. Using Uber is too expensive and unreliable. Someone asked if she has a regular schedule and if she may be able to utilize the RideNoCo platform to find a vanpool. Hull said that Mead is in the DRGOC region and that she could sign up for *MyWaytoGo* through DRCOG's platform. It was also suggested that the HR department at CommonSpirit be contacted to see if there are carpool or vanpool options. Streeter said there is a Transportation Management Association in Longmont, and that they could be connected to their employer with that TMA to discuss services they could offer them. Matis suggested that maybe there is a carpooling network at the hospital or the nearby Target. Hull said that TMA can set something up with the hospital or use the MyWayToGo Platform to see carpooling options. Teets asked Bitzer about Via serving Mead, and Bitzer said Mead turned down because they did not think transportation was that big of an issue. Hull encouraged people to attend council meetings and board meetings to make the members of the community's voices heard. Sizemore said the MPO has a governing council of representatives from each member community, and the MPO updates the larger council on mobility updates.

MAC Mobility Case Study #1

Bond discussed a 58-year-old blind woman who lives in Longmont and works at the Center for People with Disabilities. She needs reliable transportation to get to work and often needs to travel to other communities. She uses RTD Access-A-Ride to get to work, but it is a challenge to be on time. Her schedule is normal business hours but varies depending on meeting times and location. She typically knows her schedule a week in advance, but that is not enough lead time to schedule rides. Lee said she could use Access on Demand, but she feels unsafe using Uber and has been dropped off in the middle of the street. Lee added that she had also been dropped off in the street. The Niwot Rotary Club has a grant, and they are willing to contribute \$2,000 to pilots, a more reliable option to get them to work in the mornings. Bond asked if anyone had ideas for a pilot. Streeter suggested to partner with the Lafayette Senior Center since they are a recipient of her services for the blind. Bond said that their initial idea was to create taxi vouchers or a volunteer driver program where she could be matched with a regular volunteer driver. Someone stated that RTD needs to hear from the people whose needs are unmet. We need to talk to different city councils and transit providers to let them know this is not the current level of service and does not meet the needs of the community. Edgley asked if the Center for People with Disabilities could identify the demographics of where their employees come from and whether it is worth investing in a company-wide shuttle.



Wrap-Up + Member Round Table

Kelly shared that Transfort will announce all stops on their buses, not just the ADA stops.

Teets said he was at an MPO meeting discussing the Front Range Passenger Rail and encourages all to attend.

Hull announced that he is working on the Coordinated Plan and reaching out to groups. He asked people who had not heard from him yet to contact him. He can be reached at ahull@nfrmpo.org.

Bond said their racial equity training is coming up on March 19th, and members will be invited.

Upcoming Meetings:

- a. Weld County Mobility Committee (WCMC): March 25, 2025
- b. Larimer County Mobility Committee (LCMC): April 22, 2025
- c. Northern Colorado Mobility Committee (NCMC): May 27, 2025



Agenda Overview



1:00 - 1:20: Welcome + Introductions

- 1) Call Meeting to Order, Welcome, & Overview of Agenda
- 2) Introductions & Icebreaker
- 3) Public Comment
- 4) Approval of February Meeting Minutes
- 1:20 1:40: Activity: Speed Networking

1:40 - 1:50: **Presentations:**

- 1) CASTA Recap
- 2) RideNoCo Updates
- 1:50 2:00: Break: Snacks and Refreshments Provided

2:00 - 3:20: **Discussion:**

- 1) NFRMPO Title VI Plan Presentation
- 2) 2025 Coordinated Plan Presentation
- 3) Potential Mobility Project Ideas
- 4) Mobility Case Studies

3:20 - 3:30: Wrap-Up & Member Round Table

1) Announcements & Member Updates

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Introductions





- Name
- Position
- Agency
- What's one thing you're excited about or looking forward to this Summer?

3

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Public Comment





Are any members of the public present today who would like to make public comment?

4

Approval of Last Meeting's Minutes





Who would like to motion to approve the minutes from the February 2025 meeting?

Second?

5

5

Activity: Speed Networking





Speed Networking

Two rounds of 10 minutes

- Name, agency, and mobility needs
- Partnership opportunities?
- Resources or training suggestions?

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Presentation - CASTA Recap



CASTA Recap

Aaron Hull | Mobility Planner

ahull@nfrmpo.org

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CASTA Recap



CASTA Spring Training Conference from 5/6 - 5/9 in Loveland, CO Recap

- RideNoCo & RideAlliance gave a presentation at CMAC on Wednesday.
- CASTA is creating a website/database tool to display a map of Coordinating Councils across the state.
- Volunteer Driver Handbook is being created to help with future programs (RideNoCo and SAINT will be featured).
- Lots of discussion on marketing/branding/social media.
- Any other recap information from anyone who attended the NCMC?



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Presentation - RideNoCo Updates



RideNoCo Updates

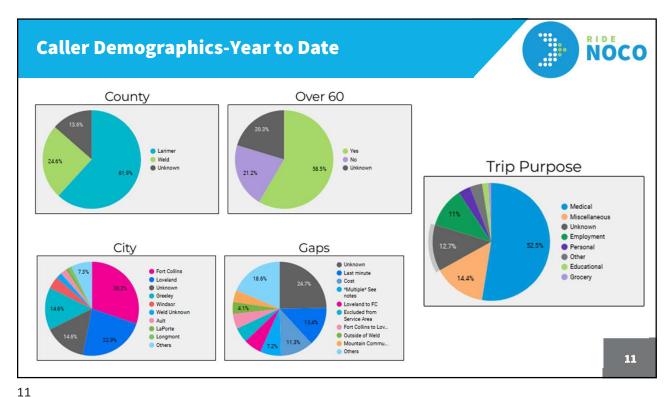
Lisa Deaton | Mobility Specialist

ldeaton@nfrmpo.org

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RideNoCo & the NFRMPO Upcoming Events NOCO May 5/30 – Oakbrook Resource Fair – Oakbrook Senior Apartments, Fort Collins June 6/1 - Loveland Bike & Trails Day - Fairgrounds Park Main Entrance **6/7 – Johnstown BBQ Day** – 1 Parish Ave., Johnstown 6/16 - Wellness & Retirement Expo - Fort Collins Senior Center 6/21 - Juneteenth Health & Wellness Fair - Foothill Mall, Fort Collins 6/25 - Bike to Work Day - Multiple Locations in Larimer and Weld County **7/12 – Eaton Days** – Town Park @ 3rd and Park Ave., Eaton 7/19 - LaSalle Days - N 2nd St., LaSalle <u>August</u> 8/9 - Poudre River Fest - New Belgium Brewery 8/23 – Severance Days – Community Park, Severance Tanya, Lisa & Aaron at the Larimer County September Answers on Aging Resource Fair. We had 9/14 - Open Streets - Fort Collins 109 people visit our table. October *We have participated in 10/2 - Senior Symposium - Island Grove, Greeley 12 10 events so far this year!

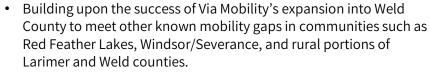
RideNoCo Updates - What's to Come in 2025 & Beyond





Mobility Management + Transportation Demand Management (TDM)

- RideNoCo is evolving into a regional TDM program focused on helping the region meet its transportation needs.
 - Expansion of DRCOG's *My Way to Go & Schoolpool* platform into the North Front Range.
- Expand Adoption of TDS
 - Expansion of TDS spec to additional agencies, including private, non-profit, and public transit providers in Northern Colorado and beyond.
- Identify & Address Regional Transportation Gaps



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Break 1:50 - 2:00







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Discussion Topics



- NFRMPO Title VI Plan Presentation Karasko (2:00 2:15)
- 2025 Coordinated Plan Presentation Hull (2:15 2:40)
- Potential Mobility Project Ideas Hull (2:40 3:00)
- Mobility Case Studies Deaton (3:00 3:20)

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Discussion - NFRMPO Title VI Plan Presentation



NFRMPO Title VI Plan Presentation

Becky Karasko, AICP
Interim Executive Director
bkarasko@nfrmpo.org



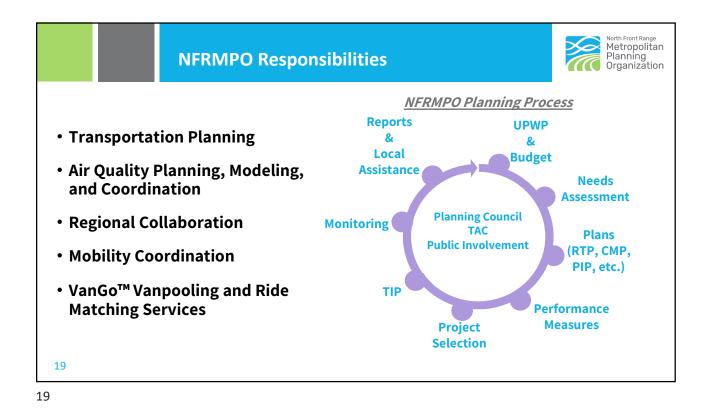
Formed in 1988 and expanded to current Fort Collins boundary in 2007 Severance **Federally designated NFRMPO Region** Transportation **Management Area** Windsor (TMA) Covers 675 square miles, with over 540,000 Greeley Garden City residents Evans Funded through federal, Berthoud state, and local Milliken government sources

May 2019 Metropolitan Planning Organization

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Legend

County Boundary 🥟 NFRMPO Boundary



NFRMPO Plans

Regional Active Transportation Plan

Project Northern Colored

Title VI Plan

Program Plansing
Organization

Title VI Plan

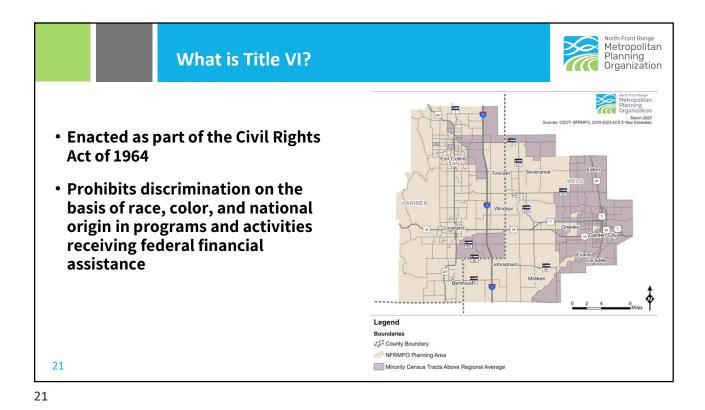
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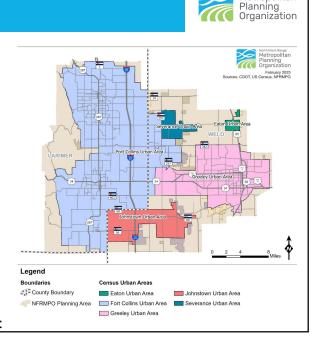
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Organi



NFRMPO Title VI Plan

Three Program Areas:

- Transportation Planning
- Mobility
- ■VanGo™
- **Six Appendices**
 - Appendix A: Copy of Signed Assurances
 - Appendix B: Notice to the Public (English and Spanish Versions)
 - Appendix C: Title VI Complaint Form (English and Spanish)
 - Appendix D: 2022 Public Involvement Plan
 - Appendix E: NFRMPO LEP Plan*
 - Appendix F: Professional Services Contract



Metropolitan

Questions?



Becky Karasko, AICP
Interim Executive Director
bkarasko@nfrmpo.org

https://nfrmpo.org

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Discussion - 2025 Coordinated Plan



2025 Coordinated Plan Presentation

Aaron Hull | Mobility Planner ahull@nfrmpo.org

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Presentation Overview



- 1. Introduction & Presentation Overview
- 2. Background on NFRMPO & Mobility Program
- 3. Overview of the RideNoCo Program
- 4. 2025 Coordinated Plan Background, Demographics, & Transit Availability
- 5. 2025 Coordinated Plan Gaps in Service, Example Strategies, & Public Survey
- 6. 2025 Coordinated Plan Discussion
- 7. Conclusion

26 Coordinated Plan

North Front Range Metropolitan Planning Organization (NFRMPO) County Boundary NFRMPO Planning Area



- Regional transportation & air quality planning agency
- Formed in 1988 and expanded to current boundaries in
- Over 549,000 people
- Covers about 675 sq. mi.
- Parts of 2 counties and 13 communities
- Greeley Urbanized Area (UZA) & Fort Collins Transportation Management Area (TMA)
- **Mobility Program ALL of Weld and Larimer Counties**

Coordinated Plan

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NFRMPO Mobility Program



- RideNoCo One-Call/One-Click Center
 - Information Hub website & call center
 - MyWayToGo Trip Planning Platform
 - SchoolPooling tool
 - Data for Planning Processes

Mobility Committees

- · Joint Northern Colorado Mobility Committee
 - · Larimer County Mobility Committee
 - Weld County Mobility Committee

Subrecipient Program & Technical Assistance

- Connecting partners to State and Federal Funding
- Coordinating service expansions in areas where gaps have been identified

Outreach, Education, and Community Engagement

Planning Efforts

- Coordinated Public Transit/Human Services Transportation Plan
 - Mobility Action Plan (MAP) to guide implementation of Coordinated Plan
 - Updated every 4 years; Currently being updated in 2025
- "Angel Fund" idea for an emergency fund for one-time trips
- RideAlliance & RideNoCo Partnership
- Strategize for Multi-Partner Coordination and Transportation Management Organizations services
- Feedback to other NFRMPO Planning **Processes**





Coordinated Plan

RideNoCo Program



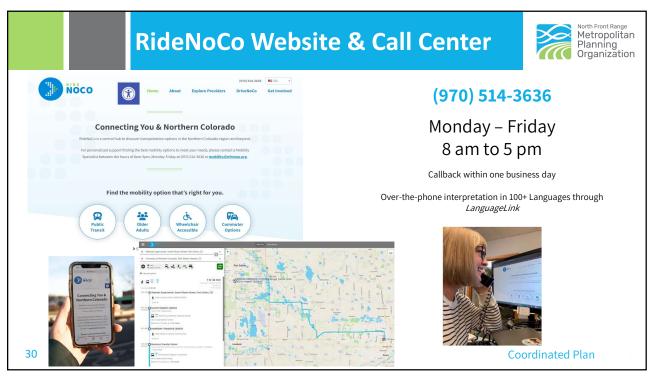
RideNoCo embodies two overarching goals:

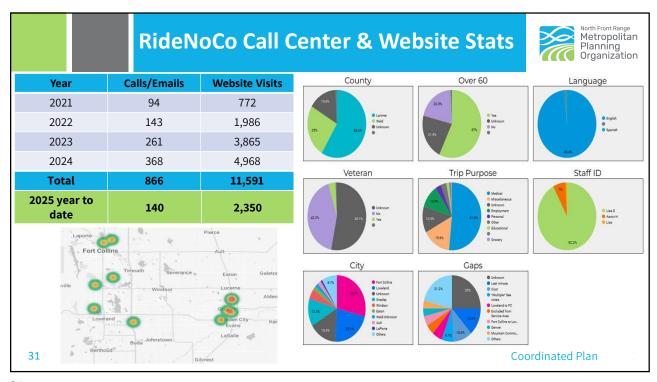
- Improving individual mobility for older adults, individuals with disabilities, individuals with a lower income, and people who do not speak English as a first language.
- 2. Improving **regional mobility** through enhanced coordination and collaboration among regional public and private transportation providers, especially in rural areas of Larimer & Weld counties.



29 Coordinated Plan

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Older Adult Population (2023 - 2045)



2023 Older Adult Population

Population	Larimer County (all)	Weld County (all)	NFRMPO Region
Total Population	363,561	340,711	549,237
60 and Above	82,228	62,419	91,014
Percent of total population	22.62%	18.32%	16.57%

Source: 2023 ACS

2045 Older Adult Population

Population	Larimer County (all)	Weld County (all)	NFRMPO Region
Total Population	506,604	634,300	906,510
60 and Above	130,155	125,752	163,594
Percent of total population	25.7%	19.8%	18.0%

Source: DOLA, NFRMPO LUAM

33 Coordinated Plan

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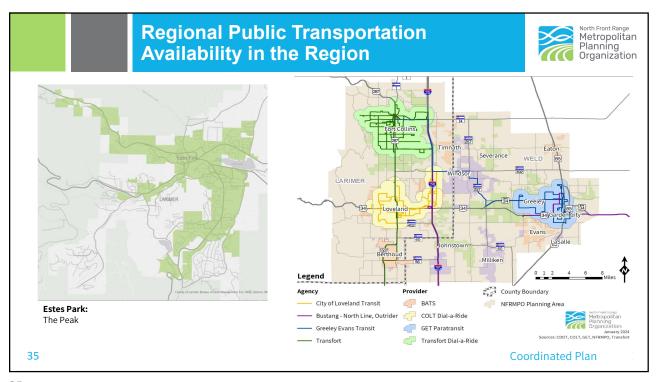
Individuals with Disabilities (2023)

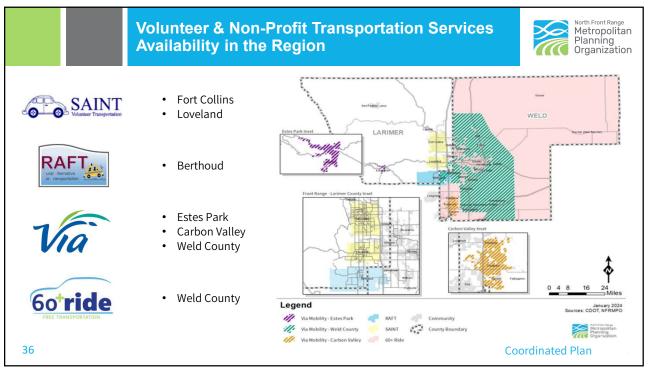


Population	Larimer County (all)	Weld County (all)	NFRMPO Region
Total			
Noninstitutionalized	360,991	338,632	473,109
Population			
Percent with	10.3%	11.3%	11.0%
Disability	10.5%	11.570	11.070
Percent Under 18	4.7%	6%	1%
with Disability	7.770	0 70	170
Percent 18-64 with	16.4 %	18.6%	6%
Disability	10.4 /0	10.070	070
Percent 65+ with	59%	74.7%	4%
Disability	3970	14.170	470

Source: 2023 ACS

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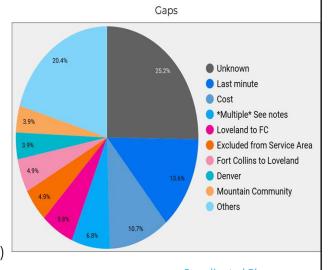




Gaps in Service



- New Neighborhoods not served by transit
- Between communities
- Rural areas need more support
- Temporary Disabled
- Affordable transportation
- Funding is very limited, so service is limited
- Awareness/Outreach (RideNoCo, Poudre Express, Bustang, 60+ Ride, United Way, Etc.)



Coordinated Plan

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Example Strategies



- The Weld County, Larimer County, and Joint Northern Colorado Mobility Committees
- Technical assistance
 - Vehicle purchases
 - · Grant reporting, writing, and management
 - Letters of support
- Outreach, Marketing, and Education
 - Rider's Guides and other informational material
- RideNoCo expansion and optimization
 - MyWaytoGo platform
 - TDS System



Coordinated Plan

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Discussion Questions



- Who needs to be involved in this conservation?
 - Are there any groups or individuals you recommend contacting for this discussion?
- What are the mobility gaps you or your clients have noticed?
- What projects, ideas, and/or strategies would be helpful to address these mobility gaps? (We will discuss this question in the following discussion topic.)
- Any other questions, comments, or suggestions?

Coordinated Plan

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2025 Coordinated Plan Public Survey



2025 Coordinated Plan Public Survey

You can take the 2025 Coordinated Plan Public Survey at the following link: https://arcg.is/1rirDP0 or using the QR code below.



40 Coordinated Plan

Discussion - Potential Mobility Project Ideas



Potential Mobility Project Ideas

Aaron Hull | Mobility Planner

ahull@nfrmpo.org

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Potential Mobility Project Ideas



Reason:

To help provide the NFRMPO's Mobility team with project ideas for the 2025 Coordinated Plan and for us to focus on in the future.

Project Ideas

- VolunteerPool Program
 - Idea of having a centralized website for grassroots volunteers to help give rides.
- RideNoCo Optimizations
 - Updating Rider's guide, creating a public PDF version, website updates, and TDS system expansion.
- Medical Chaperone Program
 - King County, WA, did a pilot program last year and released its findings in March 2025. (Provided in Packet).

- Travel Training Updates
 - Monthly Webinars for travel training on technology and how to use transit, as well as partnering with service providers to establish more training.
- Emergency Fund Idea
 - Help provide one-time trips to individuals who need help.
- Earn-a-Bike-Workshops for Adaptive Bike
 - Workshop to help get Adaptive Bikes to the community like BMAC's program.

Any other ideas?

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Discussion - Mobility Case Study #1





The caller lives in Estes Park and has doctor appointments in Loveland and Longmont. She currently does not have a car, is in poor health, and has been missing vital appointments. She cannot afford to pay for rides since the trips are long.

She has Medicare, and I suggested she call them to see if she has transportation benefits with her plan.

Any ideas on how to resolve this issue?

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Discussion - Mobility Case Study #2





The caller is a disabled Veteran who recently had a seizure and cannot drive until he is diagnosed with the cause. He lives at the Guadalupe Shelter in Greeley. He said he called Qualified Listeners, DAV, and 60+ Ride, and they could not accommodate him.

He needs to get around Greeley and get to Loveland. I suggested he try GET and Weld AAA.

Any ideas on how to resolve this issue?

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Meeting Wrap Up & Roundtable



Announcements & Member Updates

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Final Call for Public Comment

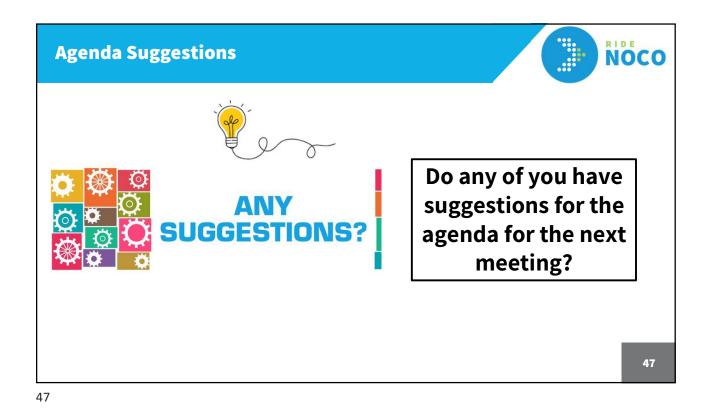


NOCO



Are any members of the public present today that would like to make public comment?

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Motion to Adjourn?

Second?

Meeting Adjourned





Meeting Adjourned!

Thank you all very much!

Next WCMC: June 24, 2025

Next LCMC: July 22, 2025

Next NCMC: August 26, 2025

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Connect with the RideNoCo Team



Aaron Hull

Mobility Planner ahull@nfrmpo.org (970) 672-0677

2025 Coordinated Plan Public Survey



Tanya Trujillo-Martinez

Mobility Director ttrujillo-martinez@nfrmpo.org (970) 999-0072

RideNoCo

8 am-5 pm, Monday-Friday mobility@nfrmpo.org (970) 514-3636

Lisa Deaton

Mobility Specialist ldeaton@nfrmpo.org (970) 300-1076

RideNoCo Website



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The Need for Medical Chaperones for Post-Sedation Transportation

Summary

This document summarizes the groundwork for piloting a medical chaperone project that would provide volunteers to accompany isolated older adults to and from medical appointments involving sedation when a "responsible party" is required post-procedure for patient safety. While the project was put on hold due to capacity constraints, the information gathered in the process is provided here for others to use if they wish to develop a similar project.

Introduction

Increasingly, older adults in King County, Washington, are experiencing challenges accessing outpatient medical procedures that involve sedation or anesthesia due to facilities' discharge requirements for a responsible party to provide both transportation and supervision to ensure the patient is safe in their home post-procedure.

Many older adults do not have someone to help them and, as a result, forego needed procedures such as colonoscopies and cataract surgeries. Hopelink Mobility staff frequently hear from clients needing assistance with these issues but lack the resources, as most public transit and nonprofit transportation providers are unable to take responsibility for medical discharges due to scope limitations, liability coverage, and staffing constraints.

Access to Health and Wellbeing

To address this challenge, the King County Mobility Coalition's Access to Health and Wellbeing workgroup, run by Hopelink Mobility, contacted the National Center for Mobility Management to request possible resources. Staff connected with Beverly Kidder, Vice President of the <u>Agency on Aging of South Central Connecticut</u>. Through grant funding, they launched a medical chaperone project with support from a national organization, <u>Trusted Riders</u>, that provides training and support.

Beverly Kidder kindly agreed to present at the King County Mobility Coalition (KCMC) Access to Health and Wellbeing workgroup meeting in February 2024. She shared information about their medical chaperone program from their initial funding and launch through their expansion and present operations. Meeting notes from that presentation are available on the KCMC's Resource Page.

Mobility staff contacted <u>Eastside Friends of Seniors</u>, a local volunteer organization serving Issaquah and Sammamish, to gauge whether they would be interested in piloting a medical



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chaperone pilot project. Executive Director, Kristin Webb, agreed to explore the possibility along with the Access to Health and Wellbeing workgroup.

Information Gathered from Healthcare Sector

Current healthcare workgroup members and others, including surgeons and discharge nurses, provided their perspectives. The following is a summary of their feedback:

- Older adults metabolize anesthesia differently and, if liver or kidney disease is present, may not fully metabolize anesthesia for a full 48 hours post-procedure.
- To reduce the chance of contracting an infection, as well as to keep hospital beds open, patients are released on the same day after an anesthetic procedure, but still require some supervision to ensure their safety.
- For the most common outpatient procedures including colonoscopy and cataract surgery, most nurses say 6 hours of post-procedure supervision is ideal, but 1-2 hours is reasonable.
- At Harborview, routine procedures are often postponed due to prioritized trauma cases, which results in a rippling effect of rescheduling problems.
- Healthcare facilities frequently experience scheduling challenges due to patients' inability to provide a responsible party at discharge. This impacts the facility's capacity in terms of both space and staff.
- For family members who act as the responsible party, the expectation is to call 911 or the healthcare facility if something happens, not to provide medical care themselves.
- Criteria for safe discharge to a responsible party will be broad, but there should not be too much variability.
- Those with fewer resources are disproportionately affected and are denied medical care
 as a result of not being able to provide transportation and a responsible party. If a
 patient arrives without a responsible party, the procedure is generally canceled.
- Many clients "oversell" the support they have at home.

Challenges

There are not enough resources available for those who need additional assistance. Senior centers and human services organizations such as <u>Sound Generations</u> and <u>Catholic Community Services</u> are all helpful, but they are not currently equipped to assist those requiring post-procedure supervision. This issue comes down to multiple factors;

- Staff capacity: too few team members who are able to perform this service.
- Cost: having a paid caregiver is not an affordable option for many.
- Time constraints: in the case that the client needs to have the chaperone present up to 24 hours post-procedure, the extended length of time is challenging for volunteers to fulfill.



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- Necessary training: providing a sufficient training program for volunteers that covers
 what to look for if the patient is distressed or needs additional assistance, to assess any
 risks that may arise, and consider the overall safety of the patient while under their
 supervision, can be a lengthy and potentially costly process.
- Background check and liability: Given the extent of the patient's vulnerability postprocedure in their own home, it is necessary to run a thorough background check, and establish trust with those who will be assisting clients. This could be an additional obstacle to ensuring their qualifications and competency to take on this responsibility.

Recommendations

For a medical chaperone pilot project to be successful, the following is recommended:

- Use a cross-sector approach involving both healthcare and transportation.
- Partner with an organization that has a volunteer base in place, such as <u>Eastside Friends</u> of <u>Seniors</u> or <u>Catholic Community Services</u>. Volunteers are an important factor given that for-profit caregivers are cost-prohibitive for many isolated, older adults in our community. Additionally, an existing volunteer base provides previously established, trusted relationships.
- Organizations need to consult with their current insurance company to inquire about adding liability coverage for volunteers.
- Develop a waiver specific to participation in the medical chaperone program that addresses insurance liability concerns.
- Consider partnering with a personal emergency alert system such as <u>Assured</u>
 <u>Independence</u> for a temporary device that can augment and extend the supervision provided by a volunteer.
- Funding sources may be available through cities and organizations such as <u>Community</u>
 <u>Care Corps.</u> Healthcare facilities may also be a potential funding source, given that they
 will benefit from medical chaperone volunteers, which would result in fewer
 appointment cancellations.
- Offices of Health Equity at healthcare settings may offer connections for information and potential funding sources.
- Consider including stipends for volunteers in a proposed budget.
- <u>Trusted Riders</u> is one possible resource for training and credentialing of volunteer medical chaperones.
- Start small, with one healthcare facility and one procedure, then scale up.
- Review the study, <u>Outpatient Dismissal With a Responsible Adult Compared With Structured Solo Dismissal: A Retrospective Case-Control Comparison of Safety Outcomes.</u>



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Next Steps

This project was put on hold due to capacity constraints with Eastside Friends of Seniors expanding their service area to the Snoqualmie Valley. If other organizations are interested in pursuing a medical chaperone pilot project, they are encouraged to reach out to Dina Atieh, King County Mobility Coalition Program Supervisor, at datieh@hopelink.org. The KCMC staff will assist with connections to help move the project forward.

Acknowledgements

Numerous professionals contributed to this exploratory needs assessment including members of the Access to Health and Wellbeing Workgroup under the King County Mobility Coalition, Kristin Webb, Executive Director of Eastside Friends of Seniors, Beverly Kidder, VP of the Agency on Aging of South Central Connecticut, Debra Kayton Michals and Alan Lopatin with Trusted Riders, David Hunt with Assured Independence, Dr. Estell Williams with UW Medical Center, and Dr. James Haering, Senior Physician Advisor and Consultant. The staff who compiled these findings include Dina Atieh and Heather Clark.

About the King County Mobility Coalition

The King County's Mobility Coalition's vision is a coordinated transportation network that allows all people to move freely around King County and the Puget Sound region.

The purpose of the King County Mobility Coalition is to inform the planning of specialized transportation services in King County and develop strategies, tools, and projects to improve mobility for people with limited transportation options due to age, income, disability, limited English proficiency, or any other factor. The Coalition brings together individuals and organizations to share information; assess the needs of the local community and current transportation network; provide recommendations to improve the system; and educate decisionmakers, community groups, and the general public.

2025 Mobility Committee Meeting Calendar

LCMC: Larimer County	
Mobility Committee	
NCMC: Northern Colorado	
Mobility Committee	
WCMC : Weld County	
Mobility Committee	

2025 Meeting Dates:		
28-Jan	LCMC	
25-Feb	NCMC	
25-Mar	WCMC	
22-Apr	LCMC	
27-May	NCMC	
24-Jun	WCMC	
22-Jul	LCMC	
26-Aug	NCMC	
23-Sep	WCMC	
28-Oct	LCMC	
18-Nov	NCMC	
16-Dec	WCMC	



LCMC	NCMC	WCMC
<u>January</u>	<u>February</u>	<u>March</u>
LCMC	NCMC	WCMC
Tues. January 28th	Tues. February 25th	Tues. March 25th
1:30-3:00pm	1:00-3:30pm *Berthoud Town Hall	1:30-3:00pm
<u>April</u>	<u>May</u>	<u>June</u>
LCMC	NCMC	WCMC
Tues. April 22nd	Tues. May 27th	Tues. June 24th
1:30-3:00pm	1:00-3:30pm	1:30-3:00pm
<u>July</u>	<u>August</u>	<u>September</u>
LCMC	NCMC	WCMC
Tues. July 22nd	Tues. August 26th	Tues. September 23rd
1:30-3:00pm	1:00-3:30pm	1:30-3:00pm
<u>October</u>	<u>November</u>	<u>December</u>
LCMC	NCMC	WCMC
Tues. October 28th	Tues. November 18th*	Tues. December 16th*
1:30-3:00pm	1:00-3:30pm	1:30-3:00pm
	*3rd Tuesday	*3rd Tuesday

rideno.co

970.514.3636

mobility@nfrmpo.org