



# Kansas Trans Reporter

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## Taxi voucher programs good option for flexible service

by Dan Nelson

**T**axicabs are an important component of America's public transportation infrastructure. Annually, taxis provide nearly two billion rides to passengers in American communities. While taxi service is typically more abundant in large metropolitan areas, small communities also rely on taxis to transport citizens to a variety of destinations. In fact, taxicabs can provide a cost-effective alternative to traditional fixed route transit services, especially when used in



conjunction with voucher programs that subsidize fares for transit-dependent individuals.

### What is a taxi voucher program?

Taxi voucher programs are typically public-private partnerships in which

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## Dialysis treatment and the impact on transportation services for patients

by David Murray

**C**hronic kidney disease affects more than 2,325 Kansans, and in 2006 approximately 89 percent (2,073) of them regularly received treatment at a dialysis center, up to three times a week (*ESRD 12 2006 Annual Report*, 5). Many dialysis patients are dependent on public transportation to get to treatment centers, and they have special sched-

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## Taxi voucher program,

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a city or other agency contracts with one or more taxi companies to provide service at a reduced rate for seniors, disabled and low-income citizens. The transit agency that administers the program reimburses the taxi company for all services provided, equal to the normal fare. For a flat rate, qualified individuals can purchase vouchers that allow them to travel throughout the city on a one-way basis. Most voucher programs require that a rider pre-qualifies for

## A taxi voucher program can save money and add flexibility.

service based on disability status, age or income level. To maintain service efficiency and to prevent abuse of the system, the number of vouchers that an individual can purchase in a month typically is limited.

Funding for taxi voucher programs is generally shared by local, state, and federal agencies. In many cases, local funding is generated through sales taxes, though some cities also rely on public donations as a complementary funding source. State and federal grants are also available through state departments of transportation and the Federal Transit Administration. Finally, revenue generated through voucher sales supplements these primary funding sources.

### Benefits of voucher programs

Taxi voucher programs can be beneficial to communities in a few key ways. First, voucher programs provide low-cost transportation options to people who are otherwise mobility-impaired, whether because of a disability, age, or lack of a personal vehicle. A well-run taxi voucher program affords residents the ability to travel

to and from work, medical appointments, shopping trips, and other essential destinations. Without reliable transportation, it becomes difficult, or impossible, for individuals to complete necessary tasks.

A second benefit provided by taxi voucher programs is cost-savings to local communities. Instead of investing in additional expensive fixed route or other demand-response services, a city can subsidize a voucher program, likely resulting in significant savings to taxpayers. Voucher programs typically are supplemental services to existing transit, and fill in key gaps, such as evening or weekend hours, that are difficult for transit agencies to serve. Local taxicab companies provide much of the necessary labor and equipment, thus leaving the sponsoring agency responsible only for the administration of the program. Instead of running large vehicles that may be underutilized throughout some of the day, a taxi voucher program uses only the vehicles necessary to meet demand.

### Examples of taxi voucher programs in Kansas

Three Kansas communities—Manhattan, Salina, and Olathe—have well-established taxi voucher programs. Olathe's voucher program, which has been operating for over 30 years, is nationally-recognized as a successful alternative transit system.

On average, Olathe's program provides 45,000 one-way rides per year at a cost of \$296,000 to local taxpayers. Additionally, Olathe receives approximately \$240,000 in federal grants each year to support the program.

Olathe's taxi voucher program is available to seniors over the age of 60, persons with disabilities, and low-income residents earning less than 80

percent of the area median income as defined by the U.S. Department of Housing and Urban Development. Each \$2.50 voucher can be redeemed with a local taxi operator, and is good for a one-way ride anywhere within the city. However, Olathe's policy stipulates that only 20 vouchers can be purchased by seniors and disabled persons in any given month for general purpose trips. Medical trips are exempt from this limitation, and low-income residents can purchase an unlimited amount of vouchers for trips to and from work. Additionally, \$1 "yellow" tickets can be purchased and redeemed with the cab operator for a five minute stop anywhere within the city. This allows riders to make a brief stop without being required to spend multiple one-way tickets.

The city of Manhattan operates a voucher program that is similar to Olathe's, though considerably smaller. Approximately 10,000 subsidized taxi rides are provided annually to low-income elderly and disabled persons. Riders must pre-qualify before using the service by filling out a certification form and getting necessary signatures from physicians, if applicable. For trips within the city of Manhattan, the fare is \$2.50 per ride. Manhattan's voucher program allows for an accompanying rider to ride along with the voucher recipient for 75 cents so long as both riders are from the same household. If a disabled or elderly rider requires an aide or personal assistant in order to complete the trip, the accompanying rider is entitled to travel without charge. Local funding for the program is \$150,000, which is generated through a local sales tax. Federal and state contributions total \$160,000 each year.

Salina's taxi voucher program is operated through the Saline County Commission on Aging and OCCCK, a local human services organization that also provides transportation ser-

## Tips for starting a new taxi voucher program

- **Model a new voucher program after another well-established program.** Get in contact with other programs to gain insight and advice.
- **Identify as many funding sources as possible.** Federal funding through the 5310, 5311 and JARC programs has been used to fund taxi voucher programs, as well as other state funding. Check with your local regional council, if applicable, for funding opportunities. Further, some cities have sought private donations to help offset the cost of the program.
- **To ensure quality service, service standards should be established and agreed upon with any taxi company wishing to participate in a voucher program.** Include vehicle types and condition, driver training (e.g. passenger assistance), on-time performance, minimum passenger complaints, etc.
- **Focus on how you can best use the equipment you have, or the equipment that exists within your community, to provide rides.** Determine how you can best get a passenger from point A to point B with the vehicles available, including taxis. Determine whether you will need a certain percentage of accessible taxis for a taxi voucher program (necessary if it is the only service operating).

vices. This program operates under a different model than Manhattan and Olathe's voucher programs, as taxis are used only when OCCK-operated vehicles are unavailable. Passengers contact OCCK to schedule a pick-up time, and if an OCCK vehicle is available, the ride costs the passenger \$2 per one-way trip. If no OCCK vehicle is available, then one of several local taxi companies is contacted and requested to provide service. Trips made using taxicabs cost passengers \$4 one-way. Once the trip is complete, the passenger provides the \$4 fare to the driver and fills out a voucher card. The taxi company then submits all voucher cards to OCCK for reimbursement of the balance of the cab fare. For example, if the fare was \$10, the passenger would pay \$4, and OCCK would provide the cab company \$6.

Salina's taxi voucher program uses Section 5311 public transportation funding to support the program, which is administered through the Kansas Department of Transportation. To receive this funding, the

transportation services provided using these funds must be available to the general public. Therefore, neither OCCK nor the Commission on Aging places limitations on who may use this service. This has resulted in high demand for the service in Salina. During the busiest weeks, approximately 800 one-way rides are provided by local taxi companies.

When fixed route service is implemented in Salina, program administrators plan to change the taxi voucher program to be used when fixed route and complementary paratransit is not operating, during evening and weekend hours.

### What makes a successful taxi voucher program?

A successful taxi voucher program efficiently and safely transports transit-dependent citizens to work, home, medical appointments, and other essential destinations.

According to Joe Peters, housing program specialist with the city of Olathe, a successful voucher program attracts ridership because it is seen as

a good value. Full-fare cab service often is too expensive for elderly, low-income, and persons with disabilities, so the availability of a subsidized transportation program is appealing to many.

However, Peters stressed that is important for voucher programs to continually be on the lookout for additional funding sources. Demand for transportation services is increasing steadily, and keeping up with demand is often challenging. To maintain service efficiency and to serve as many qualified riders as possible, it is imperative to find reliable sources of funding, whether from federal, state, local, or private entities.

Because a voucher program generally caters to specific rider groups such as the elderly persons and persons with disabilities, it is essential that the contracted cab companies have accessible vehicles within their fleet, including lift-equipped vans or buses, and that employees are trained in passenger-assistance.

Tom Mulhern, director of the Saline County Commission on Aging, which is a partner in Salina's taxi voucher program, stated that communities should try to involve as many taxi companies as possible when administering a voucher program. Competition between cab companies for business will help keep prices down, thus reducing the cost of the program.

Mulhern also suggests that program administrators be aware that riders and cab companies have been known to abuse the system. Some riders might over-use the voucher program to make nonessential trips, which can prevent other users from being able to attend to essential appointments. Further, though a less common concern, cab companies have in the past provided false voucher redemptions in attempt to increase

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## Taxi voucher programs,

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profits. By being aware of these abuses of service, voucher program administrators can get identify problems early so they can be addressed.

The outlook for taxi voucher programs is bright. Peters contends that demand response transit such as taxi voucher programs “sells itself,” and that ridership can be expected to increase substantially if the program is well-funded and administered efficiently. ▲

## Dialysis transportation,

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uling needs due to the nature of those treatments. This article provides some information about kidney disease, the challenges facing dialysis patients in obtaining treatment due to access to transportation, and examples of how some Kansas rural transit systems are trying to meet the challenge.

The number of dialysis centers in Kansas has almost doubled since 1993, from 24 to 47 currently. However, a dialysis patient can obtain treatment in their home county in only 27 of 105 counties in Kansas. Gaining access to dialysis treatment is a huge challenge for those living in the remaining 78 Kansas counties that do not have a treatment facility. According to Betty Vega, East Wichita Dialysis Center social worker, while patients from rural counties do use public transportation to access service, service is difficult because some providers do not offer service outside their own county. For patients living in north-west Kansas, the only option for dialysis treatment is in Hays—as far as 180 miles away!

**Types of dialysis and where they are conducted.** Performing the tasks of healthy kidneys, dialysis removes wastes from the body, helps to control blood pressure, and ensures that appropriate levels of vital chemicals remain in the patient’s body.

There are two general types of dialysis. *Peritoneal dialysis* is performed several times a day, and it is typically administered at home. The other form of dialysis, hemodialysis, filters one’s blood outside of the body using an artificial kidney machine. *Hemodialysis* is performed in a clinic and accounts for nearly 90 percent of dialysis treatment (*Medical Transportation: Toolkit and Best Practices*, 71).

### The patient’s experience.

Dialysis treatment is typically performed several times per week, and it lasts between three and four hours. The treatment is said to be relatively painless, but the process may cause patients to experience a drop in blood pressure and feel weak following treatment. The reduction in blood pressure can also make patients feel nauseated. Patients often need assistance returning home following dialysis treatment.

**Transportation needs and challenges.** Reliable transportation is necessary to ensure that dialysis patients have access to their treatment centers, and that they have it regularly. Finding adequate roundtrip transportation to dialysis centers is a great concern to patients and providers alike. Many patients currently rely on personal vehicles driven by family and friends, taxis, paratransit service, and where available, other public or nonprofit transportation providers for this service.

In a study conducted in Delaware, it was found that less than 50 percent of dialysis patients use private vehicles to access treatment (Denson, 91). Although we do not have comparable research to identify travel modes to dialysis in Kansas, we suspect that a significant percentage of our state’s dialysis patients rely on several sources for their transportation as well.

Vega estimates that 40 percent of the patients receiving treatment at the East Wichita Dialysis Center use public or private transportation providers to access treatment. She estimates that another 30 percent travel with family or friends and

## What is kidney disease and how is it treated?

End Stage Renal Disease, or chronic kidney failure, results when a person’s kidneys no longer perform the work of healthy kidneys. Today, chronic kidney disease affects more than 26 million Americans, and an additional 20 million are at an increased risk of developing the disease (National Kidney Foundation Web site, 6/13/08). Nationally, the rate of kidney disease is increasing at a rate of roughly 6 percent. According to the Community Transportation Association’s *Medical Transportation: Toolkit and Best Practices*, 65 percent of End Stage Renal Disease (ESRD) is a result of hypertension or diabetes. As the kidneys lose their cleansing abilities, dialysis treatment may be employed to perform the tasks of healthy kidneys. This option is used when the patient has lost 85 to 90 percent of the kidney’s function (National Kidney Foundation Web site, 2/7/2008). Dialysis treatment is necessary because ESRD is fatal if not systematically treated.



## Medicare coverage

In 1972, Medicare coverage was extended to individuals who are unable to live without receiving dialysis or a kidney transplant (*ESRD Network 12 2006 Annual Report*). Through Medicare, people affected by ESRD are able to receive insurance coverage regardless of age or financial status. Patients under 65 that perform peritoneal dialysis at home receive coverage beginning the first month of treatment, while patients who go to dialysis centers for hemodialysis are covered by Medicare on the fourth month of treatment (davita.com, 6/16/2008).

about 30 percent drive themselves.

In a survey assessing problems experienced by patients attempting to access dialysis transportation, Pam Hawley, Transportation Program Field Representative for the North Carolina Department of Transportation, found that the primary barriers included prohibitive costs, riders being ineligible for transport services, insufficient operating hours, and depleted transportation provider funding (Sulek and Lind, 11). These mounting issues are of great concern for providers that are currently operating at service and financial capacity.

Recently, rising gasoline prices have imposed an increased burden upon family and friends to meet the transportation needs of dialysis treatment, and the weekly schedule associated with treatment makes it difficult for family members and friends to continually aide patients' trans-

portation needs. Likewise, rural transportation providers often do not have the resources to take a passenger to dialysis treatment two to three times per week and still provide service to riders for other trip purposes within their service area.

The treatment length and distance to the dialysis center often requires the vehicle to be out of the area for an entire day.

Although transportation barriers vary based on the proximity to treatment facilities and availability of public services,

increased collaboration between transportation providers and dialysis centers can help meet the needs. Kansas is lucky to have some form of public transportation in 90 percent of rural counties, which could and sometimes do collaborate in transporting these patients.

### More demand; special needs.

Demand for public transportation to dialysis centers in the United States will continue to increase as a result of at least three factors, according to a study conducted in 2005. These factors include the Baby Boom generation approaching retirement, a decline in physical activity and increase in obesity rates, and a reduction in general health causing more patients to rely upon assistance to get to their appointments (Sulek and Lind, 1).

The frequency and length of dialysis treatment has made provid-

ing transportation a challenging process. Often the amount of time a patient receives treatment varies, and the unpredictable recovery time following treatment makes it difficult to schedule patient return trips. This makes it difficult for providers to assist other customers, or may cause exhausted patients to remain at the treatment facility far longer than in situations where pick-up time is predictable. In order to make use of available transportation services, some patients have had to reduce their treatment length, which can have a negative effect upon patients' health (Rocco & Burkart, 1178).

**Financial challenges.** A financial challenge that confronts some dialysis patients is that Medicare does not cover transportation to and from the treatment facility. Although Medicare covers the majority of the cost of treatment, the federal program only covers transportation expenses of patients requiring an ambulance. According to the *Health Care Financing Administration's Medicare Carriers Manual*, "a person receiving outpatient dialysis is not ordinarily ill enough to require an ambulance" (Brown, 1). Therefore, local transit may be the only source of public transportation to a dialysis center.

In contrast to Medicare, Medicaid is a federal program that provides medical assistance to patients based upon financial need. In some cases this program can aid patients that require additional assistance with costs and transportation needs, and it often provides relief for rural Kansans.

**Scheduling.** Another factor affecting patient transportation is coordinating transit schedules and hours of operation with the dialysis center's operating hours. Often, transportation service is available in the area, but the service times do not

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coordinate with the needs of patients. According to Bonnie Burgardt, Finney County Transportation Director, service hours in Finney County are being expanded in July. Although the longer hours will help, Burgardt stated that they still might not meet the needs of patients who start treatment in the late afternoon. With that said, the expanded hours will certainly help by providing one leg of the trip.

**Helping meet the transportation needs of patients.** A variety of steps can help transit agencies accommodate the increasing demand

for rides by dialysis patients. Providers can work with dialysis center staff in scheduling rides. This can be accomplished by creating standing schedules that group patient trips together based upon geographical location and dialysis treatment time. This is the case in Harper County, where the transit agency provides roundtrip service to Wichita for dialysis treatment three times per week. Knowing that a vehicle is going to be used for dialysis treatment, the standing schedule helps Harper County Transit make arrangements for other passengers' requesting local service. Grouped rides may help reduce the expense incurred in providing transportation scheduling and service. Additionally,

the use of extended or alternative dialysis service hours can make transportation to and from the treatment facilities far easier. As in Finney County, the extended transportation and dialysis hours will help family members provide the return trip following treatment.

For communities exploring fixed route service, providing access to treatment centers may help reduce patients' reliance upon demand response transit. Examples of fixed route service providing access to dialysis treatment are found in Garden City, Lawrence, and Topeka. Although patients may prefer paratransit service following treatment, fixed route service can serve one leg of the roundtrip, and help reduce the overall transportation costs for the community or the individual.

Dialysis centers may look to aid patients' transportation needs by seeking funding from other sources such as the American Red Cross, American Kidney Fund, area agencies for the aging, and the National Kidney Foundation (Brown, 3). These funding sources can help offset the increasing cost of transportation.

**Conclusion.** Although providing dialysis patients with access to treatment is difficult in some communities, there are some strategies that have proven successful in aiding patients and transit providers. The use of standing schedules, prioritizing patient service during poor weather, and creating an open line of communication with dialysis center staff should help improve transportation accessibility (Sulek and Lind, 13). These practices will help improve access to the life-saving dialysis treatment, Providing Kansans with reliable access to dialysis treatment is a primary concern for transportation providers, and it is important to recognize that progress is being made. ▲

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## Risk management in transit

by Tom Worker-Braddock

**R**isk is inherent in transit; vehicles are out in traffic, making frequent stops, volunteers may not have the same training and qualifications as hired employees (although they should), and clients, due to age or disability, may be more prone to injuries than the general population. Agencies can be held liable for any damaging actions of an employee or volunteer while that person is performing duties for the agency.

### Six steps

A risk management plan is a two pronged approach of creating company and employee practices and policies that minimize risk, and obtaining insurance to protect against the risk that cannot be fully minimized. According to the National Rural Transit Assistance Program publication *Risk Management for Rural Transit Systems*, there are six steps to risk management:

**1. Identify the risks.** Perform and keep an inventory of all the risks in the agency's operations. Review and keep this inventory up to date as contracts, agreements, equipment, and facilities change.

**2. Measure the potential impact of the system's risks.** Estimate the frequency and severity of each risk, and how much it would cost the agency for each occurrence. Do this whenever a new risk is identified.

**3. Analyze alternative strategies for managing the risks.** Carefully look at different ways to manage



Risks in the workplace are not usually this obvious. You need to carefully identify potential risks and how to keep them at a minimum.

risks including risk control (i.e., pre-screening drivers), risk transfer (i.e., shifting the financial risk to an insurer), risk removal (i.e., rerouting away from a bad intersection), and risk retention (i.e., taking financial responsibility for all or part of a potential loss). Be sure to look at the agency's administrative and financial capabilities for managing the risks.

#### 4. Select the best alternatives.

Review the agency's capabilities and create a program with a combination of techniques that meet the system's goals of risk management, including a plan for phasing in risk management practices in areas that have none.

**5. Monitor your progress in reducing risks and losses.** Similar to keeping an inventory of risks, keep an inventory of losses the agency incurs, along with any changes to insurance costs. This inventory should keep track of incident causes, who was involved (client, driver and/or any other personnel), the amount of loss in insurance deductibles and other costs, any

resulting increases in insurance rates, and steps taken to avoid a repeat incident. If there still seems to be a high number of losses, make changes where needed, perhaps by modifying agency-wide training, or offering more training to specific individuals.

**6. Report and follow up.** Have policies in place to create accurate and complete reports after an incident, identifying the causes and any corrections or changes that were subsequently implemented.

### Financing risk management

There are three ways of financing risk management: insurance, self-insurance, and risk-retention groups.

*Insurance* is the most common way for small agencies to handle risk. This is because small agencies cannot afford the year-to-year cost fluctuations of self-insurance, and usually do not have access to a risk-retention group.

*Self insurance* is the conscious decision for the agency to pay its own

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## Risk management,

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losses, and the service can either be self-administered or by a third party. The agency commits itself to pay for the losses up to a certain dollar amount (\$250,000, for example), and can buy excess insurance to protect itself from losses over that amount.

Self-insurance can result in the agency having severe fluctuations in year-to-year insurance costs. This can be somewhat mitigated by designating a portion of operating reserves to be used to cover claims.

Self-insurance is a good option when the agency calculates that the cost of losses, administrative tasks to handle claims, and setting aside a reserve fund for contingencies, is less than regular insurance. Benefits of self insurance include having greater say in handling claims and payments, possible cost savings if conventional insurance is more difficult or expensive to acquire, and the ability to tightly control your agency's risk and claim management.

The Kansas Department of Insurance must approve any non-profit or for-profit transit agency that wants to self-insure. Governmental agencies are exempt and can self-insure without the Kansas Insurance Department's approval. For-profit and non-profit agencies must own 26 or more vehicles and must allow the Kansas Department of Insurance to review the agency's financial records.

According to Ken Abitz of the Kansas Department of Insurance, there are no stated minimum financial requirements for self-insurance programs, but the Kansas Department of Insurance prefers that the agency considering self-insurance be financially viable. Non-profit agencies have the same self-insurance regulations and requirements as for-profit agencies, which includes being

**F**ocus on maintaining and laying out facilities with the same level of attention that goes into training employees.

—Examine the agency's facilities. Look for hazards and designate a staff person as a risk management officer to keep facilities safe.

—Work with your insurer once an accident occurs to review circumstances and how to avoid a repeat occurrence.

—Never ignore accidents. Fixing something that caused a slight mishap may prevent a more serious accident, and a lawsuit, later.

—Ask operations staff for recommendations. Drivers, maintenance, and custodial staff may be more familiar with day to day operations and hazards than management.

—Don't assume that the landlord is responsible. The agency's lease agreement may state that the tenant is responsible for identifying, and maybe even correcting, hazardous situations. Also, the landlord wouldn't be at fault if the problem was furniture placement or lack of signage about agency activities.

—Strive to achieve ADA compliance, even if not required. Some transit agencies may not need to follow ADA rules due to religious affiliation or other exemptions. However, following ADA rules does nothing but good for the reputation of the agency, while adding tangible safety benefits to the workplace environment.

required to have excess insurance.

Example: MV Transportation was approved to self-insure. MV Transportation, based in Fairfield, CA, is the transit operator for both the Lawrence "T" city bus system, the University of Kansas bus system KU On Wheels, as well as several transit systems nationwide. According to General Manager Mike Sweeten, having self-insurance and internally managed claims keeps insurance costs down. Because it is self-insured MV Transportation sees a direct benefit to having a risk-management department that offers input on hiring practices and internal training. As added protection, MV Transportation also has additional insurance for claims exceeding \$1 million.

*A risk retention group* is a group of several similar businesses, or in this case, transit agencies, that create a liability insurance company. These companies can be chartered in any state. The purpose of several agencies joining together and forming an insurance company is to assume and

spread all or part of the liability risk of its group members. Risk retention groups became popular when the insurance market made it very expensive, or even impossible, for transit agencies to obtain insurance.

With several exceptions, risk retention groups operate much like ordinary insurance companies. Members might pay a premium, and if an incident occurs the member pays a deductible, with the rest of the group assuming and spreading out the rest of the loss. A key difference is that risk retention groups have greater control of their expenses and possible risk exposure because every insured agency is also an owner/member of the group.

There are 50 risk retention groups registered to do business in the state of Kansas. The relatively small number of registered groups in the State reflects the good availability of liability coverage in the state of Kansas, according to Pete Tavares, Jr. of the Kansas Insurance Department.

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## Proven marketing ideas

by Kelly Heavey

Are you looking to jazz up your transit agency's promotional style? *A Handbook of Proven Marketing Strategies for Public Transit*, produced by the Texas Transportation Institute, South West Transit Association and the University of Wisconsin-Milwaukee, presents dozens of marketing ideas. Having a rural audience is much different than advertising toward city commuters. We pulled a few that might apply to smaller and more spread-out agencies, possibly applicable to yours.

### Offer special free rides

When the Mass Transit District of Rosiclare, IL, noticed a decrease in ridership on its route to two specific towns, management began talking tactics. It didn't want to lose those areas on its routes, so the agency placed a coupon for a free return trip on Saturdays in newspapers and on fliers it distributed in the service area. This was a two month promotion of little cost to the agency, and the agency saw an increase in ridership by 53 percent. Does your agency have a day of low ridership or an area of town that you wish would have more riders? A coupon such as this might benefit your numbers.

### Educate your riders

If your community's commuters aren't as educated on your services as you'd like, consider the TransPlan strategy of Ann Arbor Transportation Authority. TransPlan includes an employer information packet that is used to promote, educate, and recruit



employers and their employees on the availability of public transit and rideshare programs. It is also a resource with all services the agency offers, employee surveys on commuting and an invitation to conduct presentations at worksites.

Informing your own employees about this resource will make them more comfortable in answering customer questions about commuting and promoting the agency. Printing costs and work time is up to your organization, but Ann Arbor estimated three hours of staff time per week and \$1,500 per year for printing.

### Advertise, advertise, advertise

Simple as it sounds, sometimes increasing ridership is just about raising awareness. The Bladen Area Rural Transportation System in Elizabethtown, NC, tried to raise public awareness that their services were not solely available to elderly or low-income residents. Anyone can ride in their vans, buses or automobiles. The agency printed brochures and advertisements, designed in-house. Bus drivers distributed the brochures to existing riders and the agency ran advertisements periodically in community newspapers. The total budget for printing and advertising was \$400. The campaign was so successful that the agency had to hire another driver and expand their mailing list.

### Donate to charities

When the spirit of the holiday season hits your riders, why not let that cheer spread to the agency, as well? The Northwestern Connecticut Transit District in Torrington, CT, decorated one of its buses during the city's holiday toy drive and parked it at local shopping centers on specified days. Shoppers were invited to "stuff a bus" by donating toys or money, and local businesses could make contributions, as well. The transit agency served coffee and doughnuts at some of the locations.

The toy drive had numerous other public service partners, such as the Mayor's Office and the Torrington Firefighters Union, and it was staffed by community volunteers. More than 2,000 toys and \$1,500 were collected during the two-week program.

If collaboration this large is not feasible for your organization, try a smaller scale version. Accept toy donations in lieu of payment for rides and donate all proceeds to a toy drive in the area.

In sum, marketing doesn't always have to be a traditional newspaper advertisement. It can range from educating commuters to donating to charities in the area. Many tactics can raise awareness of your organization, whether it is rural or urban. You are only limited by your creativity.

To view a copy of *A Handbook of Proven Marketing Strategies for Public Transit*, visit [http://www.trb.org/news/blurb\\_detail.asp?id=2568](http://www.trb.org/news/blurb_detail.asp?id=2568).

Source:

Report 50: *A Handbook of Proven Marketing Strategies for Public Transit*. Texas Transportation Institute, South West Transit Association and University of Wisconsin-Milwaukee. 1999. ▲

# Who is responsible for making sure scheduling for drug testing is not predictable?



by Jacob Bustad

What happens if a specimen collector you hire does not perform drug and alcohol testing on a random schedule? Who is at fault? — the collection agency or you? The answer may be YOU.

Although different agencies may work with different collectors in their drug and alcohol testing program, one responsibility always lies with the agency: *the scheduling of the testing*. Random (unpredictable) scheduling makes the procedure more effective as a deterrent to drug

and alcohol misuse.<sup>1</sup>

Cheryl Fisher, KDOT Drug & Alcohol Program Coordinator, recently returned from the FTA National D & A conference, where the need for random scheduling was stressed heavily. According to Fisher, random scheduling means spreading testing out throughout the year, the week, and all hours of safety-sensitive duty. The goal of random scheduling is to “increase deterrence through unpredictability.”

Fisher explained that the responsibility of test scheduling is solely the agency’s, and the collector would not be held responsible if testing was not scheduled properly.


It is the agency’s right and responsibility to tell the collector that testing be done properly and follow FTA guidelines. If a collector does not follow the agency’s schedule or other random testing guidelines, the agency should report that collector to Kansas’ Drug and Alcohol Coordination Program at TMHC, Inc., (785) 232-1196 in the Topeka area or (800) 888-0112 toll free; and to Fisher at cherylfi@ksdot.org.

Fisher added that during her statewide audits, as well as those being done nationwide by the FTA, random scheduling will be a primary focus. She emphasized that any findings about improper scheduling will be held against the transit agency, not the collector.

For more information, contact Cheryl Fisher at (785) 368-7091. ▲

<sup>1</sup>Random *scheduling* is different than random *testing*, which refers to the selection of individuals to be tested. Selection for random testing is automated, using a computer.

**18th National Conference on Rural Public and Intercity Bus Transportation**  
 PARTNERSHIPS for PROGRESS IN RURAL TRANSPORTATION



October 19-22, 2008  
 Omaha Qwest Center  
 Omaha, Nebraska

Featured Speakers:  
 James Simpson, Administrator, FTA  
 Bill Millar, APTA  
 Dale Marsico, CTAA

Keynote Presentation  
 Back to the Future:  
 Overcoming Hindsight to Keep Rural Transit on the  
 Road to Progress and Productivity

Michael Dillich  
 Foresight Reconstruction

For more information, visit the conference website at  
<http://www.trbruralconference.org>

## National transit conference to be held close to home

“Partnerships for Progress in Rural Transportation” is the theme of the National Conference on Rural Public and Intercity Bus Transportation to be held in Omaha, Nebraska in October. See above for more information.

The conference will offer learning opportunities to anyone who is interested in the latest in best practice and current research in public transportation. Session tracks (or “routes”) will include planning and design, funding and finance, rural transportation in today’s operating environment, technology, and special issues in transportation. The conference is held every other year and is a great way to network and learn with colleagues around the country. ▲



## Child safety seats and transit in Kansas

by Tom Worker-Braddock



**M**otor vehicle crashes are the number one cause of accidental injury-related death for children ages 0-14 in Kansas. In 2003, 61 percent of the Kansas children killed were not using safety belts or child safety seats. Transit providers need to realize their role in protecting children when transporting children in either a primary capacity, for example, when contracting out to a daycare, or as a secondary capacity when transporting a child passenger traveling with or without an adult. Seat belt laws apply to transit providers that use passenger vans designed to carry 10 passengers or fewer.

The Kansas Child Passenger Safety Act (KSA 8-1344) applies to all vehicles designed for carrying 10 or fewer passengers, and stipulates that children under four years old be in a child safety seat, while children 4-8 years old be in a safety or booster seat unless they weigh more than 80 lbs or are taller than 4 ft 9 inches. Children between 8 and 14 must be protected by a safety belt. The only exceptions to these rules are if the vehicle weighs over 16,000 pounds, or if there are more children in the vehicle than available safety belts.

Transit providers need to have

### Kansas law on child safety seats

The Child Passenger Safety Act (KSA 8-1344) is a primary law.

#### *Requirements:*

All children under age four must be in a federally-approved child safety seat. Children age four to under the age of eight years must be in a federal-ly-approved child safety seat/booster seat UNLESS the child weighs more than 80 pounds OR is taller than 4 ft 9 inches in height. Children eight years of age but under the age of 14 must be protected by a safety belt.

#### *Applies to:*

All drivers transporting children.

All vehicles designed for carrying 10 passengers or fewer.

Kansas residents and non-residents alike.

All seating positions in vehicle.

Pickup trucks registered for 12,000 pounds

Farm trucks registered for 16,000 pounds.

#### *Other provisions:*

—Drivers may be stopped solely for a violation of this law.

—Only drivers may be cited for violations.

—There is no violation if the children (ages 4 but under 14 years old) being transported exceeds the number of securing locations and all securing locations are in use by children.

—Only a single violation exists even when more than one child in a vehicle is not properly restrained.

—Convictions are not considered moving violations.

—\$10 of the fine and court costs may be waived if a safety restraining system is obtained.

—Persons under the age of 14 are prohibited from riding in any portion of the vehicle not intended for passengers; this includes riding in the back of pickup trucks.

Source: <https://www.ksdot.org/burTrafficSaf/chpasafy/chilsetla.asp>

clear, written policies regarding transporting children, specifically relating to the use and provision of child safety seats or boosters. Children transported in a van that can carry 10 or fewer passengers need to be in either booster seats or child safety seats. Even if the provider requires parents to provide child safety or booster seats, transit

drivers still need to be familiar with how to use the safety seat attachment features in their transit vehicle.

Sources:

[http://www.kdheks.gov/safekids/child\\_passenger.html](http://www.kdheks.gov/safekids/child_passenger.html)  
[www.seatcheck.org](http://www.seatcheck.org) ▲



## Keeping your information safe

by Jacob Bustad

**W**e live in the “Information Age”—with more information about more subjects available to more people than ever before. The benefits are easy to see: improved communication and opportunities for learning. However, the digital world has risks, with the potential for serious consequences like identity theft, data theft, and other types of computer crime. But, just like locking your front door at night, a few simple steps can help keep you ahead of any potential wrongdoers. Julie Fugett, Information Technology Security Analyst at the University of Kansas, offers the following suggestions and sources:

### Top ways to be safe, online (and off):

#### Offline:

- Buy and use a shredder. Crosscut is best! Strip cut is okay if you’re on a budget.
- Sensitive data should never go into the trash or recycle bins intact. Dumpsters are gold mines for identity thieves and “social engineers”—those who want to manipulate people into doing something or divulging confidential information. Company phone directories, blueprints, customer and employee records, and other sensitive information should all be put through a shredder prior to being discarded.
- Did you know it is legal for dumpster divers to dig through unlocked dumpsters? If possible, consider locking your dumpsters or trash barrels to



deter thieves (for an example of a locking mechanism, check out [www.seriouslock.com](http://www.seriouslock.com)).

#### Online:

- Use a firewall.
- Whether it’s host-based (software that runs on your computer), network-based (a stand-alone appliance plugged into your network), or both,

Dumpsters are gold mines for identity thieves and “social engineers”—those who want to manipulate people into doing something or divulging confidential information.

you should use a firewall to protect your computers, printers, and other devices on your network.

- Antivirus software is not optional. You need it! Install antivirus software and keep it updated. If budgetary constraints are an issue, there are even some excellent free options available (see sidebar for more details).

- Install updates for your operating system and for your other software.
- It’s not enough to keep your OS up to date—these days you need to make sure everything from your Office suite to your Web browser to your music software is patched. The reason it’s important to keep your OS and installed software up to date is patching security holes. Every day both good guys and bad guys are working to find security holes in operating systems as well as other programs you may install on your computer. If the bad guys find a hole, they write a virus to exploit it. That virus may allow the bad guys to wreak havoc with your computer! Keeping those holes patched will help protect you from viruses and malware designed to exploit these vulnerabilities.

#### Using e-mail:

- You should treat e-mail just as you would a postcard. Messages go across the wire “in the clear,” meaning they are not encrypted or scrambled while

in transit. This means anyone who plucks your e-mail off the wire can read it very easily! Here are a few things you should never, ever send in e-mail, not even as an attachment:

- credit card numbers
- bank account numbers
- social security numbers
- login names and passwords

—any information deemed confidential or sensitive by your agency's management.

- Data you should strongly consider not e-mailing:
  - Drivers' license numbers
  - Information you would prefer remain private—gossip, rumors, etc.
  - Content that may violate company policy or get you in “hot water” with management.

### Incident response: What to do and when to do it

Let's say, despite your best efforts, your computer's antivirus software pops up a message and says you're infected, or you suspect there may be something going on with your computer. What to do next?

- If you have an IT department or staff person, call them first.
- Run a full antivirus scan of your hard

### Where can I find free antivirus software?

According to KU's Julie Fugett, there is no shortage of options when it comes to antivirus software, both free and for purchase. However, two free software programs she strongly recommends are:

**AVG** — <http://free.grisoft.com/>      **Avast!** — <http://www.avast.com/>

Fugett said: “There are other free antivirus options out there, but they may come bundled with undesirable features and may even venture firmly into ‘spyware’ territory. AVG and Avast! do not do that.”

drive and allow your antivirus software to attempt to clean the infection.

- Use antispyware tools like AdAware and Spybot Search & Destroy to search for problems your antivirus may have missed.
- Use an online scan tool like Trend Micro Housecall at <http://housecall.trendmicro.com> to do a scan as well.

- If you're still having problems, the people who post on the “CastleCops” forums at [www.castlecops.com](http://www.castlecops.com) may be able to help you. ▲

### Further reading...

**Microsoft Security at Home blog:** <http://www.microsoft.com/protect/default.msp>

This site offers security tips and information for both personal and business users of Microsoft products. The blog serves as an up-to-date informational source, commenting on certain security issues and solutions.

**OnGuard Online:** <http://onguardonline.gov/>

This site provides practical tips from both the federal government and the technology industry about cyber security, including the ability to file a complaint against a known cyberthief or social engineer.

**SANS Tip of the Day:** [http://www.sans.org/tip\\_of\\_the\\_day.php](http://www.sans.org/tip_of_the_day.php)

The SANS Institute's site gives a new technology security tip each day for free, and also offers courses in cybersecurity education (not free).

**Stay Safe Online:** <http://www.staysafeonline.org/>

This site is sponsored by the National Cyber Security Alliance, and provides information for users and their families about basic security tips. Includes a list entitled *Top 8 Cyber Security Practices*.

**Security Fix by Brian Krebs:** <http://blog.washingtonpost.com/securityfix/>

Cyber security analyst Brian Krebs offers his own blog at this site, which features daily postings about all kinds of cyber-related issues. You can also search his archives for previous postings, including by topic.

**Be SeKURe:** <http://www.besekure.ku.edu>

This site is KU's own cyber security blog, maintained by Fugett. It features regular postings, as well as links to some of the other sites on this list.

## Rural Transit Conferences and Workshops

### July 10, 2008

SW Regional Transportation Workshop: Exploring Models for State-Local Rural Official Consultation in Austin, TX  
National Association of Development Organizations, Call the Texas Association of Regional Councils, 512- 478-4715

### July 15 or July 23, 2008

The Supervisor's Role in Enhancing Cooperative Work. in Larned & Emporia, KS  
For more information contact Sarah Meyer, 785-272-2585, <http://www.kansascounties.org>

### July 27-29, 2008

Sustainability and Public Transportation Workshop American Public Transportation Administration, in Chicago, IL  
For more information contact Rich Weaver, 202- 496-4809, [www.apta.com](http://www.apta.com)

### August 5-7, 2008

State Public Transit Partnerships Conference & FTA State Programs Meeting. in Providence, RI  
Call (202) 624-3625

### September 15-17, 2008

Kansas Public Transit Association Annual Meeting. in Wichita, KS  
<http://www.kstransit.com>

### September 18, 2008

Fundamentals of Leadership Kansas Association of Counties, in Abilene, KS  
For more information contact Sarah Meyer, 785-272-2585, [www.kansascounties.org](http://www.kansascounties.org)

### October 6-8, 2008

EXPO 2008. American Public Transportation Association. in San Diego, CA  
<http://www.apta.com>

### Coming this Fall

—One day training:  
RTAP Fall Driver Training (a.m.) and Defensive Driving and Emergency Procedures (p.m.)

Locations around Kansas. Watch for the dates and locations on the Web site <http://www.krtap.org>.

### October 19-22, 2008

18th National Conference on Rural Public and Intercity Bus Transportation. in Omaha, NE  
<http://www.trbruralconference.org>

## Risk management, continued from page 7

### Another idea

The Finney County Council on Aging (COA) has found other ways to mitigate insurance costs. It runs a paratransit service and began operating four fixed routes in September. COA is not a county agency, but receives county funds. With this in mind, the COA approached the county asking to buy COA's insurance through the county's plan to obtain lower premiums. The county agreed. As Transportation Director Bonnie Burgardt observed, the arrangement "helps save those tax dollars; it just helps spread those dollars further."

### Sources:

*Threat & Vulnerability Toolbox*, National Rural Transit Assistance Program, <http://www.nationalrtap.org/?MODE=Resources&xsec=35&cid=13>.

TCRP Synthesis 13, *Risk Management for Small and Medium Transit Agencies*, Transportation Research Board. National Academy Press, 1995.

"Basic Risk Management," <http://nonprofitrisk.org/tools/basic-risk/1.shtml>.

*Risk Management for Rural Transit Systems*, National Transit Resource Center, Brief No. 8.

"Foreseeable Harm," *Nonprofit World*, Vol. 20, No. 3.

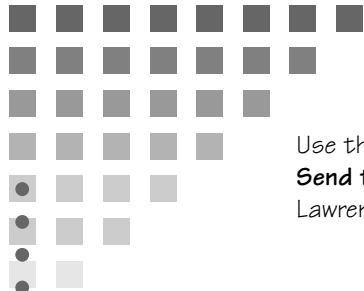
### Beyond insurance

In addition to having a general risk management plan and financial risk mitigation, procedures can be implemented to handle risk, regarding both personnel and facilities.

Activities to reduce risk should not differentiate between volunteers or a full-time paid employee. With this in mind, treat and train volunteers on the same level and with the same training and precautions as full-time employees. Volunteers should be pre-screened for both criminal and driving violations. Some transit agencies find it easier just to use paid drivers. The

Finney County COA has only one volunteer driver, the rest are paid, and all drivers are required to have their Commercial Drivers License.

Transit agencies, as good stewards of their limited resources have much to lose by not writing and following a risk management plan. A concerted effort now to identify and correct risks before incidents occur can save the agency from costly litigation later. ▲



## Resources Order Form

Use this order form to order the resources listed here. There are two ways to order:  
**Send the order form to:** KUTC Lending Library, 1530 W. 15th Street, Room 2160,  
 Lawrence, KS 66044. **Or fax the form to** 785/ 864-3199.

### Resources from our catalog

- Risk Management for Rural Transit Systems.** National Transit Resource Center, Brief No. 8.
  
- Disaster Response and Recovery Resource for Transit Agencies.** Federal Transit Administration, 2006. Based on lessons learned from Hurricane Katrina and other events, FTA has documented practices and procedures to improve emergency preparedness. The purpose of this guide is to provide local transit agencies and transportation providers with useful information and best practices in emergency preparedness and disaster response and recovery. It provides summary information for general background, and includes best practices and links to more specific resources and more detailed information for local agencies concerning critical disaster related elements such as emergency preparedness, disaster response, and disaster recovery.
  
- Emergency Preparedness Guide for Transit Employees: On the Job and at Home.** National Transit Institute. Covers the three basics of emergency preparedness: understanding threats, staying informed, and communicating clearly while also explaining emergency preparedness on the job and at home.

### Online resources

- The Role of the Private-for-Hire Vehicle Industry in Public Transit.** TCRP REPORT 75. (2002) Research sponsored by the FTA in cooperation with the Transit Development Corporation. [http://www.tcrponline.org/bin/doc-distr.cgi/TCRP\\_RPT\\_75.pdf](http://www.tcrponline.org/bin/doc-distr.cgi/TCRP_RPT_75.pdf). Documents the results of a national survey of PHVs and analyzes eight case studies. Examines funding, the selection process, contract terms, general administration, public/private roles and responsibilities, regulatory requirements, and operations.
  
- Toolkit for Integrating Non-Dedicated Vehicles in Paratransit Service** (2007). TCRP REPORT 121. Research sponsored by the FTA in cooperation with the Transit Development Corporation. [http://www.tcrponline.org/bin/doc-distr.cgi/TCRP\\_RPT\\_121.pdf](http://www.tcrponline.org/bin/doc-distr.cgi/TCRP_RPT_121.pdf)
  
- Workplace Safety Is No Accident: An Employer's Online Toolkit to Protect Employees and Volunteers.** Nonprofit Risk Management Center. <http://nonprofitrisk.org/tools/workplace-safety/nonprofit/wsp.htm>. A set of resources for non-profit agencies to improve safety conditions in the workplace. An online toolkit for public agencies also is available.

<b>Name</b>	<b>Title</b>
<b>Agency</b>	<b>Phone</b>
<b>Street address</b>	<b>Email address</b>
<b>City</b>	<b>State</b>
<b>Zip + 4</b>	<b>Date materials needed</b>

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# Kansas Trans Reporter

The *Kansas Trans Reporter* is an educational and technology transfer newsletter published quarterly by the Kansas University Transportation Center. The newsletter is distributed free to rural and specialized transit providers and others with an interest in rural and specialized service.

The *Kansas Trans Reporter* is co-sponsored by the Federal Transit Administration under its Rural Transportation Assistance Program (RTAP) and the Kansas Department of Transportation. The purposes of the RTAP program are to: 1) educate transit operators about the latest technologies in rural and specialized transit; 2) encourage their translation into practical application; and 3) to share information among operators.

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## How to reach us

For a free subscription to the *Kansas Trans Reporter* or to contact one of our faculty or staff, call toll-free **800/248-0350** (in Kansas) or **785/864-2595** (outside Kansas). Send correspondence to *Kansas Trans Reporter*, Kansas University Transportation Center, 1530 W. 15th Street, Room 2160, Lawrence, KS 66045. Send e-mail messages to Patricia Weaver at [weaver@ku.edu](mailto:weaver@ku.edu) or Lisa Harris at [LHarris@ku.edu](mailto:LHarris@ku.edu). Visit our Web site at **[www.ksrtap.org](http://www.ksrtap.org)**

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## Address incorrect?

Send us the inside form with your corrected address, or fax your changes to 785/864-3199.

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## Other services

In addition to publishing the *Kansas Trans Reporter*, the Kansas RTAP program offers a variety of other educational services. Following is a partial list of these services:



- Publication dissemination
- Technical assistance
- Telephone consultation
- Training development
- Web site
- Program planning assistance
- Video lending library
- Computer database searches
- Referral services
- E-mail discussion group

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## Kansas RTAP staff

Assistance can be obtained by contacting a *Kansas Trans Reporter* staff person at the numbers or address above.

Project Director ..... Pat Weaver  
Editor ..... Lisa Harris  
Contributors ..... Kelly Heavey, Jacob Bustad, Dan Nelson  
..... Tom Worker-Braddock, David Murray

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