

Special-Needs Transportation in Portland: Implementation and Dismantling of the LIFT Project

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The Portland, Oregon, special-needs transportation demonstration project—the LIFT—provided advance-reservation, door-to-door transportation services to elderly and handicapped persons unable to use the regular transit system. The Tri-County Metropolitan Transit District (Tri-Met), the local transit district, operated a fleet of 15 lift-equipped buses, supplemented by transportation furnished by local private providers under contract to Tri-Met. The LIFT project, which was funded from December 1976 through June 1979 by a Service and Methods Demonstration grant from the Urban Mass Transportation Administration, was designed to test a transit operator's ability to provide special-needs transportation service in coordination with social service agencies. The Transportation Systems Center was responsible for evaluating the demonstration, and contracted with Crain and Associates for this purpose. Although the project did have a significant positive impact on the travel behavior of regular users, penetration of the transportation-handicapped market was not dramatic. More important, the demonstration clearly revealed that the LIFT was not a cost-effective means of providing special-needs transportation to the elderly and the handicapped, primarily because of high union wages paid to LIFT drivers and controllers. A year after the demonstration ended, the LIFT ceased operations. The service was transferred to one of the private transportation providers under contract to Tri-Met. Thus, the long-range design of special-needs transportation service in the tri-county area remains an unresolved issue.

The Portland, Oregon, special-needs transportation (SNT) demonstration project—the LIFT—provided door-to-door transportation services to elderly and/or handicapped persons living within the Portland city limits who were unable to use the regular transit system and lacked access to alternative means of private transportation. From the start of the project in December 1976 through June 1979, the LIFT project was funded by a Service and Methods Demonstration grant from the Urban Mass Transportation Administration (UMTA). Thereafter, the Tri-County Metropolitan Transit District (Tri-Met) funded the LIFT from June 1979 until the service discontinued operations on June 27, 1980.

The specific purposes of the LIFT demonstration were as follows:

1. To test a transit operator's ability to provide special service to a special group and coordinate this service with the social service agencies involved,
2. To test the cost-effectiveness and value to social service agencies and users of automated fare-collection equipment,
3. To determine the impact of the demonstration on the target group, and
4. To assess the impact of the service on the social service agencies that contracted with Tri-Met for LIFT service for their clients.

The funding of the demonstration grant was as follows:

Source	Amount (\$)
Federal	916 768
Local	
Tri-Met	510 000
City of Portland,	349 848
agency contracts,	
and state of Oregon	
Total	1 776 616

This paper documents the circumstances leading to the implementation and subsequent dismantling of the LIFT project, evaluates the cost-effectiveness of the LIFT system in comparison with alternative types of SNT delivery systems, and offers some conclusions regarding the transferability of Portland's four-year experience with this project.

PROJECT HISTORY

Providing service to the handicapped and the elderly of Portland had been a concern of the city for some time. In 1972, the Portland City Council approved funds to study the problems of the mobility disadvantaged. Based on the results of the study, the City Council appropriated \$20 000, which was combined with a grant from the state of Oregon early in 1974; this grant became the basis for a Special Transportation Unit within the Portland Bureau of Human Resources. The unit aimed at coordinating the efforts of 40 agencies that had been identified as providing transportation to the handicapped and the elderly. Initially, only 9 agencies were involved in the consortium; this number eventually increased to 15.

However, in October 1974, in keeping with its policy to operate as few programs as possible, the Bureau of Human Resources made the decision to contract out services then being provided by the city's Special Transportation Unit. The contract was awarded to Special Mobility Services (SMS), a private, nonprofit transportation program. SMS was not able to provide all of the necessary transportation; thus, another transportation provider, Metro Mobility, came into being. It was within this context of fragmented and overlapping transportation services to the elderly and the handicapped that Tri-Met, with the cooperation of the Portland Bureau of Human Resources, stated in a proposal to UMTA the intention to "demonstrate the viability of transit company operated, demand-responsive special transportation...combining the resources and transit expertise of Tri-Met with the resources and social service expertise of the Bureau of Human Resources of the City of Portland." The proposal was submitted to UMTA in March 1976; the following July, Tri-Met was awarded the federal grant to operate the LIFT system. The LIFT service began operations in December 1976.

PROJECT DESCRIPTION

The LIFT vehicles consisted of a fleet of 15 Mercedes-Benz diesel buses equipped with wheelchair lifts, tie-downs, and a retractable lower step. Twelve of the vehicles accommodated eight passengers and two wheelchairs; three vehicles accommodated six passengers and four wheelchairs. All of the buses were equipped with two-way radios. Supplemental services were furnished by two taxi companies and a private wheelchair transportation firm. LIFT operators were Tri-Met drivers who volunteered for the

LIFT and were selected, in part, on the basis of their safety records and their desire to work, and/or special experience in working, with the handicapped and the elderly. Drivers were given a special training course before service began.

The LIFT service carried three types of passengers:

1. Agency-sponsored passengers were sponsored by a public agency that agreed to contract with Tri-Met for LIFT service. Agencies were charged \$3 per one-way trip. No fare was required from the passenger.

2. Affiliated passengers were those affiliated with a nonprofit organization that also contracted with Tri-Met for LIFT service. These organizations were billed \$2/ride; Tri-Met provided the additional \$1/ride as a partial subsidy. No fare was required from the passenger.

3. General passengers were those neither affiliated with an organization nor sponsored by a public agency. General passengers paid a cash fare of \$0.50 per one-way trip on the LIFT. The cash fare was deposited in a farebox similar to those used on regular Tri-Met buses.

Agency-sponsored and affiliated clients were registered for LIFT service by their contracting agencies; general passengers completed the registration application themselves, and each application was verified by a doctor, a case worker, a representative of a social service agency, or some other qualified individual. Each registered client received a special-needs bus pass, a plastic card similar to a credit card. The cards were designed for insertion in the automatic fare identification recorders (AFIRs) that were installed on the LIFT buses. This equipment, a major demonstration innovation, was intended to eliminate the need for manual record keeping. However, because of repeated mechanical and electrical failures, the AFIR equipment was never fully operational. In November 1978, the automated fareboxes were dismantled.

LIFT service was provided to eligible city residents from 7:00 a.m. to 7:00 p.m., Monday through Friday, and operated principally within the Portland city limits. All rides were scheduled in advance. To arrange for service, agency-sponsored and affiliated passengers called their sponsoring agencies, which then called the LIFT in accordance with Tri-Met scheduling procedures. General passengers called Tri-Met directly to arrange for service. Passengers were supplied with the telephone number (on the reverse side of the special-needs bus pass) and instructions on how to call for their return trips. Return trips were provided on both a pre-scheduled and demand-responsive basis. A staff of four dispatchers manually scheduled and dispatched all rides from the control room, which was furnished with a large wall map of the service area, a radio console, and the required data-collection and scheduling equipment.

As an innovation of the project, service design was to be based on market research. Thus, in early 1976, a comprehensive "before" household survey was conducted to determine the number of transportation-handicapped people (those who could not use regular bus service), their predemonstration transportation behavior, and their attitudes, perceptions, and problems regarding travel within Portland. The survey revealed that approximately 22 000 people in Portland had difficulty using or were unable to use regular bus service. The unconstrained trip demand of this group could not possibly have been met by the LIFT. Data from the predemonstration survey showed that transportation-

handicapped people make 1.4 trips/day. If one applies this trip rate to the transportation-handicapped population and assumes that 10 percent of all their trips could be diverted to the LIFT, the unconstrained daily demand of 1.4 trips/day x 22 000 = 10 would be 3080 trips/day. Operating personnel optimistically estimated that the 15 LIFT buses could serve 850 trips/day. Analysis by Crain and Associates revealed a more realistic daily capacity of about 400 trips. Therefore, potential demand for the service was as much as six times the available capacity.

Thus, Tri-Met took three measures to ration the anticipated demand for service:

1. A two-day advance-reservation policy was developed. This was reduced to one day in September 1978 and then changed back to two days in June 1979.

2. Eligibility criteria were formulated.

3. A ride-rationing or priority scheme based on trip purpose or need, length of trip, number of persons served, and destination location was established.

Eligibility criteria for LIFT passengers were established as follows. Registration was to be limited to those mobility-disadvantaged persons of all ages who met both of the criteria below:

1. Those in one or more of the following categories: (a) unable to get on or off a regular public transit bus; (b) unable to walk from home to the nearest bus stop; (c) unable to wait standing for more than 10 min; (d) unable to move in crowds (difficulty keeping balance in a regular transit bus is not considered a transit disadvantage since federal regulations require seats for the handicapped near the entrance of all buses); (e) unable to read information signs (this does not include foreign language problems); (f) unable to grasp coins, tickets, or handles; (g) unable to understand and follow transit directions; and (h) unable to use a regular public transit bus in the performance of life-sustaining activities; and

2. Those unable to drive a car or who do not have access to a vehicle for transportation.

The word "unable" here means that performing the function is absolutely impossible or causes severe and continuing pain; it does not mean discomfort or occasional pain. Persons who needed a wheelchair, a walker, or crutches in order to travel were automatically eligible.

DEMONSTRATION FINDINGS

After two years of operations, the LIFT demonstration had yielded the following results.

Demand

The LIFT did not have a dramatic impact on the travel patterns of the estimated 22 000 transportation-handicapped persons in Portland. Although the LIFT registered 5914 people, about 27 percent of the transportation-handicapped market, only one-fourth of those registered actually used the service. The average rider used the service for one round trip per week. The LIFT system was providing a total of 370 trips/day, 18 percent of which were furnished by LIFT-sponsored taxis.

The LIFT did have a significant impact on the travel behavior of regular users. On-board surveys indicated that the LIFT provided two-thirds of the trips made by the regular users. One-fourth of those surveyed stated that without LIFT service they

would have been forced to forgo the trips they were making, and those who had the option of switching to alternative modes viewed them as more costly and less convenient than the LIFT service.

The main reason the majority of eligible users did not use the LIFT was that they did not need this specialized type of service; they had alternative means of transportation, mainly the automobile, to serve their trip needs. Lack of awareness of the service and defects in LIFT service were not significant reasons for nonuse of the LIFT.

Overall, Tri-Met was satisfied with the performance of the Mercedes-Benz buses, despite problems with maintenance, the jerkiness of the ride, and the noise made by the diesel engines. The AFIRs, a technological innovation of the project, were not given a complete test in Portland due to mechanical failure of the fareboxes.

The reliability of LIFT service varied, depending on the time of day and the vehicle coverage. Overall, the buses were an average of 12 min late for pickup during 1977; in 1978, reliability improved somewhat. This improvement was caused by increased efficiency in the dispatch and scheduling functions and the increased use of taxis to relieve peak-period pressures. Average lateness was 9 min for the periods sampled in 1978.

By and large, LIFT users were enthusiastic about the LIFT and particularly pleased with the Tri-Met drivers. There was some dissatisfaction about the noise and the jerky ride; in general, however, clients seemed pleased with the service. They seemed to understand and accept the reliability problems reported earlier as necessary by-products of the SNT system. The taxi component of the LIFT SNT system also received favorable ratings from users. By most objective level-of-service measures, the taxi provided better service than the LIFT: Taxis were more reliable in picking up people on time; because they traveled direct routes, travel times in taxis were less than half the time required on the LIFT; the comfort of the ride was greater; and passengers reported that taxi rides were less noisy than LIFT rides. However, for most passengers taxis were not heavily preferred to the LIFT mode. The LIFT drivers contributed to that mode's image as the service that "understands the needs of the handicapped"; consequently, the LIFT was very popular among its transportation-handicapped clientele.

Cost-Effectiveness

Perhaps the most significant finding to emerge from the LIFT demonstration concerned the cost-effectiveness of that system. In fact, the demonstration clearly revealed that the LIFT was not a cost-effective means of providing SNT to the handicapped and the elderly and that alternatives were available in Portland that could provide equivalent or better service at lower cost. This conclusion was reported in an interim evaluation report after the first year of experience with the LIFT system; at that time, there was hope that recommended operational improvements could significantly lower costs. During 1978, most of these recommended changes were implemented: Efficiency improved and trip costs decreased slightly, despite the rise in labor and materials costs. The LIFT was operating as efficiently as could be expected given the nature of the clientele it was serving. Nevertheless, the total LIFT trip cost was still about \$2 more than the private-sector rate for similar service. The factors that contributed to the high cost of LIFT service made it clear that the LIFT would never be competitive with alternative modes of privately financed and privately operated SNT service.

The primary reasons for high LIFT costs were two: (a) The service was very labor intensive, and (b) union wage rates were high. Labor costs, including payroll and payroll-related overhead expenses, accounted for 86 percent of LIFT operating cost (72 percent of total cost). The wage rates for drivers as of the end of 1978 (excluding benefits) were \$8.61/h; controllers earned \$9.11/h. These rates were more than 60 percent above the market rate in the private sector. Furthermore, there was reason to believe that the differential between the Tri-Met and private-sector wage rates would grow: Between 1977 and 1978, LIFT driver wage rates increased more than 8 percent whereas taxi fares, an indirect measure of private-sector wage rates, remained stable.

Other reasons for the relatively high LIFT costs were as follows:

1. Restricted nature of the market--Because the LIFT only served the transportation handicapped, it consumed considerable time deadheading to reach a widely dispersed clientele.

2. Relatively high capital and finance costs--Capital and finance costs ran at about \$1.55/trip (17 percent of total trip cost) at 1978 operating levels. These costs were about \$1.20/trip greater than the taxi cost, which was estimated at \$0.35 for a 5-mile trip.

3. Inflexible union work rules--Union work rules made it difficult to match service supply with demand. Drivers and controllers were guaranteed a fixed schedule and a 40-h workweek, regardless of demand. Therefore, Tri-Met incurred labor costs even when demand was slack. By contrast, taxi companies do not incur labor costs when demand is down; the drivers simply do not get paid for dead time.

4. High level of dispatch effort--It appears that the dispatch level of effort was about 6 min/trip compared with the estimated taxi labor cost of 1.5 min/trip.

5. Budgetary cutbacks--Tri-Met agencywide budgetary cutbacks in the second year of the demonstration resulted in a higher LIFT operating cost per trip than would have been incurred if system capacity had been fully used. In 1978, only 11 of the 15 buses were used regularly. Analysis performed in 1978 showed that, as the number of trips per day increased, the daily costs per trip of the LIFT system decreased when the fixed costs (e.g., controller salaries) were spread over a higher volume of trips. Conversely, the decrease in capacity and demand in 1978 served to raise unit trip costs.

Effectiveness of Coordinated Paratransit

The LIFT demonstration showed that a coordinated paratransit system can serve the needs of the transportation-handicapped population. The LIFT, supplemented by taxi and local nonprofit provider service, scheduled and delivered more than 200 000 trips from 1976 to 1978. About half of these trips were delivered to unsponsored passengers who heretofore had not had access to publicly provided transportation.

The LIFT demonstration raised reservations about the feasibility of using a fixed-capacity paratransit fleet to serve the varied demands of agency clients. The LIFT penetrated only a small percentage of the social-service-agency trip market, and the number of trips provided to agency clients declined during the second year. Those agencies that did use the service were pleased with LIFT performance but registered complaints about reliability. Those agencies that did not use the service reported that service reliability was the major

reason. Thus, it appeared that the LIFT did not meet the reliability demands of the agencies as well as other modes did--e.g., the agencies' own vehicles and taxis. Ironically, the analysis showed that LIFT reliability was as good as could be expected, given the nature of the clientele served and the peaks in demand that occur throughout the service day (lateness closely paralleled demand); furthermore, reliability improved in the second year of the demonstration. It is not clear that reliability could have improved enough to meet agency expectations. These findings suggested that a coordination strategy that used a variety of paratransit modes on an as-needed basis--i.e., that established a reserve capacity--would be more successful in penetrating the agency trip market than a fixed-capacity paratransit fleet, which had inherent limitations that affected service reliability.

A key lesson yielded by the LIFT demonstration is that short-term demand for SNT service is very difficult to predict: LIFT use by both agency and general passengers fell below original estimates drawn from extensive market research. In the face of this highly uncertain demand, a flexible strategy that allowed expansion or contraction of service in response to demand was likely to be more cost effective than a strategy that required a high front-end capital investment.

Throughout the demonstration, any economies of scale that might have been realized through consolidation of transportation resources within Tri-Met were more than outweighed by the high union wage rates. That large organizations tend to attract union organizing efforts is well documented. Conversely, the small-scale nature of coordinated paratransit--i.e., several different small providers serving several markets--tends to make that mode less vulnerable to union organizing and thus to union wage rates. Therefore, a decentralized but coordinated arrangement with a number of paratransit providers appeared to constitute a more cost-effective system of providing SNT service than the LIFT system operated by Tri-Met.

Role of Transit Operator

The LIFT demonstration indicated that, in the long run, the transit operator should not provide SNT service; less expensive, equal-quality transportation services available to address the needs of the transportation handicapped usually exist. The primary reason a transit operator should not provide this service is that the costs resulting from higher-than-market wage rates that must be paid to union drivers outweigh any economies that can be achieved through larger-scale operation or greater expertise. In the short run, provision of SNT service by a transit operator may prove valuable as a means of establishing a leadership role in coordinating SNT and as a way of attracting additional resources to this critical area of need. Once these roles and the funding channels have been established, however, the transit operator's role as service provider should be phased out in favor of less expensive, private paratransit options.

The LIFT project was instrumental in establishing Tri-Met as a legitimate coordinator of SNT services in Portland. In addition, the LIFT was a visible reminder to the community of their responsibility toward and commitment to the transportation handicapped. However, Tri-Met's coordination efforts did not result in increased efficiency of the SNT system. Instead, the SNT cost per trip rose during the demonstration period.

Finally, the Portland experience indicated that, when a transit operator serves as both SNT operator

and SNT coordinator, a conflict in goals may arise. As SNT operator, the transit operator may be subject to organizational pressures to maintain the service in its existing form; as SNT coordinator, however, the transit operator is responsible for maximizing the cost-effectiveness of the SNT system. When the transit-operator-provided SNT service is not cost effective, as was the case in Portland, there may be organizational barriers or resistance to service cutbacks or elimination; the commitment of the organization to the service may impede objective assessment of its cost-effectiveness.

POST-DEMONSTRATION EVENTS

Cutback in LIFT Operations

When the demonstration funds for the LIFT ran out in June 1979, a number of changes to the existing system were made:

1. The size of the LIFT fleet was cut back to six vehicles.
2. The LIFT service area was considerably reduced. The LIFT continued to serve north and northeast Portland; service in south and southeast Multnomah County was transferred to the Multnomah County Community Action Agency (MCCAA), which operated a small transportation program; and service in West Multnomah County was transferred to SMS. Both MCCAA and SMS were already receiving operating funds from Tri-Met, under the Suburban Agency Support Program, to provide special transportation service to elderly and/or handicapped residents of those areas of the Tri-Met service district surrounding the city of Portland. Under this program, MCCAA provided service in the outlying areas of Multnomah County, SMS in Washington County, and a third provider, Clackamas County Community Action Agency, in Clackamas County.
3. The advance-reservation policy was changed back from one to two days in advance.
4. Due to the reduced capacity of the LIFT system, only medical, work, and school trips were served by the LIFT after June.
5. The LIFT Citizens Advisory Committee, an 11-person committee that met throughout the LIFT demonstration to monitor service operations and suggest improvements, was disbanded.
6. Finally, the amount of Tri-Met funding allocated to SNT was substantially increased.

SNT Policy Advisory Committee

The following September, Tri-Met convened a new advisory committee: the SNT Policy Advisory Committee (SNTPAC). Tri-Met faced a budget crisis, and the number of trips served by the LIFT had declined more than anticipated as a result of the June changes; thus, Tri-Met convened the SNTPAC to solicit public input regarding the future of SNT in the tri-county area. Specifically, the committee was charged by the Tri-Met Board with the responsibility "to determine the best ways to provide the most service and identify the financial resources to support it, and define the appropriate role for Tri-Met." Subsequently, SNTPAC was also granted the responsibility to review elements of Tri-Met's transition plan to implement Section 504 regulations (Rehabilitation Act of 1973) requiring "...access for elderly and handicapped persons to public mass transportation facilities, equipment and services."

SNTPAC, which met regularly for five months, presented a number of recommendations to the Tri-Met Board in February 1980, including the following:

1. Tri-Met should be responsible for special transportation service in the tri-county area. Specifically, Tri-Met should serve as coordinator, broker, planner, and contract manager. An ongoing policy advisory committee should be appointed to aid the Tri-Met Board and staff in formulating policies and decisions that would affect mobility-impaired persons.

2. In the interest of cost-effectiveness, the LIFT operations should be phased out and eventually replaced by service provision by subcontractors in a manner that ensures continuity in frequency and quality of service. For FY 1981, the subcontracting service providers should continue to perform their own dispatch functions; however, Tri-Met staff and SNT-PAC should investigate the feasibility of a central dispatch system.

3. Tri-Met should fund special transportation service only for those clients who are physically or mentally handicapped (elderly, nonhandicapped clients would therefore be ineligible).

4. Tri-Met should increase the operations budget for special transportation by 25 percent, to \$825 000, in FY 1981.

5. Door-to-door special transportation services should be integrated with the fixed-route system as soon as that system becomes accessible.

LIFT Shutdown

The SNT-PAC recommendations had stressed the need for a gradual phase-out of LIFT operations, due to the time required for existing special transportation contractors with Tri-Met to "gear up" for the additional service to be transferred to them: approximately 150-200 rides/day. However, in the spring of 1980 the general manager of Tri-Met decided, over the objections of some Tri-Met staff, that the LIFT should cease operations on June 30, at the end of that fiscal year. Two major risks were associated with this strategy. First, there was a strong possibility that special transportation service to former LIFT users would be severely disrupted when the LIFT service was replaced by subcontracted service. Moreover, some advocates of the handicapped community threatened to organize massive wheelchair demonstrations outside Tri-Met in the event of a service disruption. Second, the Amalgamated Transit Union (ATU), Tri-Met's union, threatened to file suit against Tri-Met management on the grounds that the Tri-Met plan to lease the LIFT vehicles (purchased with demonstration funds) to one or more private providers violated the existing union contract as well as the Section 13c (Urban Mass Transportation Act of 1964, as amended) agreement negotiated in 1976 prior to the LIFT demonstration. Tri-Met management was aware of these risks but was unwilling to extend the July 1 deadline unless the transition problems proved insurmountable.

Tri-Met took a number of steps in response to the risks outlined above. First, the outside consultant hired in response to the SNT-PAC recommendations to investigate the feasibility of a centralized dispatch facility in the tri-county area began to devote a substantial amount of effort to providing technical assistance to SMS, the only provider capable of assuming responsibility for the LIFT vehicles and service by June 30. Second, the Tri-Met labor relations staff began negotiations with the union in an attempt to avoid a confrontation

over the LIFT shutdown. It was planned that the six LIFT drivers would return to regular Tri-Met service; they were unlikely to file a grievance. However, satisfactory job spots had to be found for the four controllers and one clerk working on the LIFT service.

New, Decentralized LIFT System

On June 30, SMS began to furnish service to former LIFT riders, using SMS' own vans and several LIFT buses. One by one, the LIFT buses were repainted with a new color scheme and logo. The five LIFT staff members were relocated in new positions within Tri-Met at identical wage rates, and the ATU agreed not to file suit against Tri-Met. By August 1, 1980, the LIFT operation had been completely dismantled with the exception of the computerized billing system, which was revised to accommodate the needs of the new arrangements with the providers and client agencies. Tri-Met had originally planned to rename the SNT system, but it was decided that "the LIFT" was preferable to other names under consideration; the new, decentralized SNT system of service provision was therefore referred to as the LIFT in all subsequent informational materials prepared by Tri-Met.

The post-transition LIFT system had incorporated the following changes:

1. Tri-Met continued to serve as service coordinator, broker, planner, and contract manager, as SNT-PAC had recommended.

2. The service was operated by four special transportation providers under subcontract to Tri-Met: SMS, the private, nonprofit organization cited above; two county-operated programs cited earlier in this paper, MCCA and the Clackamas County Community Action Agency; and a local taxi company, Broadway Cab Company.

3. The eligibility criteria applied to new registrants for LIFT service were altered somewhat from those listed earlier in this paper. The new criteria placed a greater emphasis on the applicant's physical and mental disability; in addition, they made no mention of the applicant's ability to drive, or access to, an automobile.

4. Based on the recommendations of the outside consultant, Tri-Met decided for the time being not to attempt centralization of the four subcontractor dispatch operations. However, Tri-Met staff, aided by the consultant, began work on the design of a standardized record-keeping and billing system that would allow the trip data reported to Tri-Met by the providers to be keypunched directly from each provider's data-collection forms and computerized at Tri-Met. This measure was intended to reduce the end-of-month reporting burden on the service providers and to improve the accuracy of the LIFT system records.

As of January 1981, no major problems with the decentralized service arrangements were reported by riders, client agencies, providers, or Tri-Met staff. The short-term risks of dismantling LIFT operations at Tri-Met and subcontracting with outside providers for service appeared to have been overcome; however, the longer-range design and operation of SNT service in the tri-county area remained an unresolved issue.