

Care-A-Van and SAINT: Addition of Volunteer Division to Model System

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Since 1972 CARE-A-VAN has been a pioneer in coordinating transportation services, combining more than two dozen funding sources to avoid duplication of administration, personnel, and equipment. Twenty-seven vehicles provide about 155,000 trips annually. SAINT was established as a pilot project for the city of Fort Collins, Colorado, in 1983 to recruit volunteers who used their own cars to provide economical transportation for senior or disabled residents. Administrative costs caused the volunteer system to operate at a significantly higher cost per trip than the private nonprofit CARE-A-VAN system. Disappointed supporters withdrew dollars shifted to SAINT without restoring them to the professional system. In January 1988, SAINT became a volunteer division of CARE-A-VAN. Cooperation replaced competition. In the first year, rides increased by 26 percent (to 10,464), donations increased, emphasis shifted from survival to quality of service and the benefits of coordination were demonstrated.

In 1984 Senior Alternatives in Transportation (SAINT) received a national Technology Achievement Award from Public Technology, Inc. This news was received by CARE-A-VAN with mixed emotions. SAINT was established as a pilot transportation project that involved volunteers who provided transportation to senior or disabled citizens using their own cars. Because of its talk of building community, bridging generations, and providing friends as well as rides, SAINT seemed an unlikely candidate for anything associated with advanced technology.

CARE-A-VAN had been considered the model transportation program for Fort Collins, for the rest of Larimer County, and even for the State of Colorado. It was not exactly ready to share either the spotlight or any available transportation dollars with the SAINT program. Within four years, the two systems were sharing much more—including administration, space, publicity, and funding. This is the story of how that came about.

BACKGROUND

CARE-A-VAN was incorporated as a private nonprofit organization in 1970 and began providing specialized door-to-door transportation service in October 1972. It started with one van and took about eight passengers a day to a sheltered workshop in Fort Collins. In 1973 service was expanded to Loveland and several smaller communities, transporting clients of the new Foothills-Gateway Rehabilitation Center, which served developmentally disabled residents from several areas

of the county. In 1974 CARE-A-VAN expanded service to include passengers aged 60 and over and persons with low incomes. Since 1985, with the advent of Section 18 funding, some "open-door" service has been available for the general public outside the Fort Collins urban area.

CARE-A-VAN coordinates as many funding sources as possible to provide the widest variety of specialized transportation. It facilitates programs, quality of life, and self-sufficiency for targeted groups by providing access. In 1987 its efforts were recognized by receipt of an Outstanding Public Service Award (UMTA Administrator's Award) from the U.S. Department of Transportation as one of four outstanding systems in the United States.

CARE-A-VAN now has a fleet of 27 buses and air-conditioned minibuses, most of which are equipped for wheelchairs. CARE-A-VAN provided 162,033 trips during 1989.

VOLUNTEER TRANSPORTATION

During the 1970s a multipurpose volunteer program called FISH ended its transportation segment because research into answering service records revealed that the system was being abused. Several people were requesting rides many days each week for nonessential trips, often riding in CARE-A-VAN on other days of the same week. FISH volunteers were diverted to other services.

About 1982 talk began of developing a new volunteer transportation service, and SAINT was born. Begun in 1983 under the wing of the city of Fort Collins, with the support of the city's Senior Advisory Board and the county's Area Agency on Aging, SAINT recruited volunteers to provide door-to-door transportation for elderly or disabled residents of Fort Collins. Since the beginning, transportation has been available daily, from 9 a.m. to 9 p.m., for any reason.

BARRIERS TO COORDINATION

While coordination of CARE-A-VAN and SAINT might have been possible (and logical) from the beginning, there were personal and political reasons why it did not happen. A competitive atmosphere developed for the following reasons.

First, some SAINT supporters believed the volunteer service would be less costly than the professional paratransit service. They also believed that volunteer services could have been able to meet the bulk of the specialized transportation needs. They wanted to operate separately and maintain control. On the other hand, CARE-A-VAN's board and staff,

grantee for the county's Retired Senior Volunteer Program since 1973, had directly experienced the effort involved in maintaining an adequate volunteer corps. They worried that high administrative costs for SAINT would draw upon scarce transit dollars. As it turned out, new financing sources that had been anticipated to fund SAINT did not materialize, and SAINT approached CARE-A-VAN's funding sources. In at least two instances, funding went to SAINT that had previously gone or could have gone to CARE-A-VAN. Corporations began to call CARE-A-VAN to ask why they were being requested to contribute to both systems.

At about the same time, CARE-A-VAN's contract to administer the city's fixed-route system had just ended after CARE-A-VAN had initiated more than \$6,000,000 in grants for a new Transit Center, new buses for both systems, and technical grants, among other things. There were some hard feelings, with CARE-A-VAN distrusting the city and some city staff somewhat envious of CARE-A-VAN's record. The opportunity to develop a competitive system was attractive to some of those persons who worked behind the scenes.

To secure a place in the funding arena, some perhaps overzealous representatives of SAINT began to spread misinformation about SAINT costs (ignoring many expenses) and about CARE-A-VAN service (i.e., mistaken notions that CARE-A-VAN served only fixed routes, required 3-days' notice, was not as kind to or as understanding of riders, etc.).

In the long run, early efforts to use volunteers, community service workers, RSVP volunteers, and so on for most staff work did not provide enough support for SAINT. The SAINT staff grew to include a full-time administrator, a half-time dispatcher-scheduler, and a half-time volunteer coordinator. Costs soared, although the city provided space, equipment, and administrative support at no recorded cost. At first, the providers of funds had split transportation dollars between the two systems and they expected the volunteer system to be less costly. When disappointed, providers began to withdraw dollars from SAINT without restoring them or contributing money to CARE-A-VAN. Despite so many barriers, the thought persisted that coordination of the two systems would be in the best interests of the community and the clients, and certain things happened to ease the way.

ON THE WAY TO COORDINATION

In 1986, SAINTS' best year, \$34,457 was spent to provide only 7,401 trips. Funding providers were disturbed by the high cost per trip and began to encourage a merger. Changes at the city included the resignation of one problem staff member and the transfer of SAINT to the Senior Center. The Senior Center Director began exploratory talks with CARE-A-VAN and hired a CARE-A-VAN driver to fill a vacancy for the SAINT Director position. To reduce costs, the SAINT Director was soon reduced to a 0.4 full-time equivalent (FTE) position and the other 0.6 FTE changed to grants administration for the fixed-route system. The SAINT Director's goals became the completion of a merger and working full-time with the fixed-route system. Both turf and staff issues began to fade.

Members of the SAINT Advisory Council and the CARE-A-VAN Board of Directors began to meet to explore the

possibility of mutually acceptable goals for a combined operation. Goals were recommended and approved by the City. A charter member of the driving force and a member of the SAINT Advisory Council agreed to become members of the CARE-A-VAN Board of Directors. Meanwhile, on the front-line, call-forwarding technology allowed the SAINT Dispatcher-Scheduler to be stationed in the CARE-A-VAN dispatch center for a two-week simulation of a merger. The simulation was a big success and one major "what if" was laid to rest. Finally, the Community Development Block Grant Program provided \$5,000 to pay the start-up costs of a merger.

COORDINATION

On January 1, 1988 SAINT became a volunteer division of CARE-A-VAN. Maintaining its identity, it became "SAINT at CARE-A-VAN."

What has happened after the merger is this. A half-time Dispatcher-Scheduler takes requests only from 8:00 a.m. to noon, the same hours as before. An answering machine takes calls at other times. Drivers also have the support of CARE-A-VAN between 6:30 a.m. and 6:30 p.m., if necessary. SAINT and CARE-A-VAN share a dispatch center and often help each other to fill requests that might otherwise have to be turned away. At the same time, clients are introduced to the other system, which might be more appropriate for their needs.

A half-time volunteer coordinator, also based at the transit center, recruits, trains, and provides recognition for a volunteer force of 47 to 52 drivers. A volunteer packet has been developed and includes orientation materials. Volunteers receive a monthly newsletter. The volunteer coordinator carries materials and makes presentations for both SAINT and CARE-A-VAN, and SAINT is always mentioned in CARE-A-VAN presentations.

Administration has been absorbed by CARE-A-VAN, which can integrate the activity more easily than the city because the services are so similar. The city continues to provide volunteer insurance in excess of the personal limits of volunteers, who must provide proof that they meet state limits. Mileage payments are made to those drivers requesting reimbursement. About half of all drivers request reimbursement (20 cents/mile), with perhaps some increase due to rising fuel costs.

All donations go to SAINT at CARE-A-VAN. SAINT now has access to city, United Way, Area Agency on Aging, and Human Resources Committee funding through channels already established by CARE-A-VAN. SAINT receives greater exposure through the publicity and facility tours connected with these funding sources. Donation envelopes, Christmas letters, no-show door hangers, and other printed materials are designed to serve both systems, although each has a separate informational brochure.

Although it has taken some time for long-term CARE-A-VAN employees to think of SAINT as "we" instead of "they," the change has come about. There has been turnover in both SAINT positions, and CARE-A-VAN has been there to provide continuity for the system. Employees are cross-trained sufficiently to help out when either system is affected by illness or absences.

For CARE-A-VAN administration, the greatest pleasure during the transition period came from the grateful letters

sent by SAINT clients who love the service and the volunteers who drive them. Their comments were quick to replace any residual negative memories. SAINT clients tend to be 75 and older, from a little higher economic level, and may be more comfortable both physically and psychologically when traveling in a personal car. For many elderly, transportation may be the first help they have requested and they may be more comfortable with the familiar. The newly retired gentleman in his Buick is a welcome sight for the group of widows in search of groceries! The young mother with her toddler along fills in for distant grandchildren. Without the turf issues of separate systems, clients may move easily between systems as their needs change.

RESULTS

These are the operational changes, but what are the results? In the first year, SAINT rides increased by 26 percent (to

10,464) and out-of-pocket expenses were cut more than one-third (to \$2.04). Donations increased and emphasis could move from survival to quality of service. Once again, on another front, the benefits of coordination have been demonstrated and have been profiled in the U.S. Departments of Transportation and Health and Human Services joint publication, *Best Practices in Specialized and Human Services Transportation Coordination*, in which CARE-A-VAN and SAINT happily share the same spotlight (1).

REFERENCE

1. *Best Practices in Specialized and Human Services Transportation Coordination*. Report DOT-T-89-20. U.S. Department of Transportation and U.S. Department of Health and Human Services, 1989.