Region of Waterloo

Transportation Services

Transit Services

То:	Planning and Works Committee	
Meeting Date:	August 15, 2023	
Report Title:	MobilityPLUS Dialysis Update Report	

1. Recommendation

For information.

2. Purpose / Issue:

To provide information and updates on how changes to MobilityPLUS booking policy has impacted travel for dialysis and other MobilityPLUS customers and report on unaccommodated travel requests as noted in report TES-TRS-21-08.1 dated December 7, 2021.

3. Strategic Plan:

Implementation of recommendations pertaining to the delivery of specialized transit services helped GRT to meet the 2019-2023 Corporate Strategic Plan objective to enhance the transit system to increase ridership and ensure it is accessible and appealing to the public under Strategic Focus Area 2 Sustainable Transportation.

4. Report Highlights:

Registered clients who were new to MobilityPLUS after May 1, 2022 were no longer guaranteed MobilityPLUS rides to dialysis and were required to book rides on a "first come first serve" priority based on ride availability, the same as all clients. Travel booking is provided on a "first come first serve" basis to all clients as required under the Accessibility for Ontarians with Disabilities Act (AODA). Customers who had dialysis trips prior to this date maintained their status and their scheduled rides were not impacted.

The COVID-19 pandemic has required a greater assessment of demand in service planning for MobilityPLUS. With an evolving ridership situation, continued and enhanced monitoring of demand to inform service planning is imperative. Daily rides on MobilityPLUS currently sits at about 500 trips per average weekday. This is still below pre-pandemic travel when MobilityPLUS was delivering 800-1000 trips per day and unaccommodated travel was higher.

Currently, dialysis customers can apply for subscription bookings (recurring rides on same time/days to the same location) under the same process as all registered

customers. Subscription trips are capped at present to ensure that on-demand and day-of trips are available at all times. Given the fluctuations in travel demand and service levels since 2020 due to the pandemic, to effectively evaluate the transition of dialysis customers to the current practice it is best to compare unaccommodated trips pre-pandemic to current:

	2019	2022	2023
			(May 1 to July 30)
Daily Trips	800-1000	500	500
Ridership	Increasing	Decreased due to	Slowly increasing,
Demand		COVID	but not to Pre-
			Pandemic Levels
Dialysis Booking Policy	Policy Adjustment to AODA Compliance	AODA Compliant	AODA Compliant
	Dialysis trips were prioritized over all other transit trips	No Trip Purpose Requested at booking	No Trip Purpose Requested at booking
Unaccommodated	8.96%	5.40%	5.76%
Trips	Note: Unaccommodated trips had increased by 38% from 2017 to 2019.		

When subscription trip requests are denied, customers are advised to book on-demand rides (where available). The combination of capping subscription trips and making on-demand travel available has ensured that all specialized customers have equitable access to available trips.

MobilityPLUS unaccommodated rides are monitored daily and fluctuate, with the primary factor being limitations of travel availability at known peak travel times. Flexibility in travel time greatly reduces the likelihood of a requested trip being unaccommodated as, in general, capacity and availability exists outside of peak travel request times. Several other factors also contribute to a fluctuating unaccommodated rate, including the current limited availability of accessible cabs within the Region.

This change has had a positive impact on trip availability and reservationists have been able to schedule more effectively since certain trips are no longer guaranteed at the expense of other requests for travel.

In the event a client is unable to book a ride with MobilityPLUS, they would need to plan alternate travel arrangements (family, private carrier, etc.) as they would for any other travel need that cannot be accommodated, medical or otherwise.

5. Background:

In 2020, Grand River Transit initiated a service review of MobilityPLUS. This review led to changes to align with AODA and industry best practices and improve operational efficiencies. One of the key changes was around how customers needing to attend dialysis appointments were handled, which was approved by Regional Council in report

TES-TRS-21-08.1 dated December 7, 2021.

Since May 2022, customers in need of regular dialysis appointments apply to the MobilityPLUS service and if approved, have trips booked through the same process as all other MobilityPLUS customers (a first-come, first-served basis, regardless of the purpose of trip).

MobilityPLUS is a public transit service and is not an emergency / non-emergency transportation provider and these changes ensured equitable access to MobilityPLUS services.

The AODA standards and the approach to accessing specialized public transit services is meant to parallel conventional transit service where customers board buses and trains on a first come first service basis and customers are not asked about or prioritized by trip purpose. People who use MobilityPLUS should be able to move freely regardless of their trip's intent.

The previously approved recommendations, and now current practice, provide equitable access to specialized services on a first come first served basis, regardless of trip purpose. By eliminating the trip priority, the scheduling system used by MobilityPLUS determines the optimal arrangements to plan and group trips in a way that accommodates the largest number of requests in the most efficient way creating the best route.

Between this approval in December 2021 and spring 2022, Regional staff worked with Grand River Hospital renal unit staff to update patients and make plans to minimize the impact of this change to future clients.

6. Communication and Engagement with Area Municipalities and the Public

Engagement between GRT and Grand River Hospital (GRH) is continuous to ensure the best possible travel for registered clients based on trip availability. The partnership between staff has led to improved communication and responses to customer needs. The use of additional suggested appointments, provided by GRH, has helped lead to additional rides being booked successfully.

In winter and spring of 2022, GRH and GRT collaborated on the implementation of this new booking process through a series of weekly/bi-weekly meetings between senior management/supervisory staff at GRT and nursing/management staff GRH.

Request forms were established with Grand River Hospital Renal Unit to receive multiple schedule options per customer, to increase likelihood of booking rides but to also balance operational needs.

In order to mitigate any impacts to registered clients when these changes were first implemented in May 2022, GRT took a measured rollout approach whereby GRT:

- continued to honour any subscription trips that existed prior to May 1st, irrespective of their ability to fit on a scheduled vehicle.
- offered a grace period that allowed individual customers to book demands to dialysis that would not fit on budgeted vehicle.

- continued to resend vehicles upon request to customers who no-showed trips to dialysis until an Operations Supervisor could follow up with the customer to discuss our no-show policy.
- when a subscription request was denied, a GRT Operations Supervisor personally followed up with the customer
- when informing a customer these changes to our booking policies, an Operations Supervisor discussed alternate means of transportation with the customer. These include use of conventional transit, use of Taxi-Script, use of accessible taxi at the customer's expense or the assistance of a family member or friend.

Customer concerns around dialysis availability have been limited with only three reported customer issues between May 2022 and May 2023.

The ongoing collaboration with GRT and GRH staff has remained positive and GRT remains appreciative of the feedback, responsiveness and open communication from staff at GRH. This collaborative effort between our staff has resulted in the successful booking of subscription service to GRH dialysis in the majority of cases.

7. Financial Implications:

All current trips on MobilityPLUS continue to be provided within the approved 2023 operating budget. The previously approved changes to no longer guarantee travel for any specific trip purpose allows GRT to serve more customers within the same budget.

The net cost of MobilityPLUS services is area-rated to the three cities and four townships.

8. Conclusion / Next Steps:

Grand River Transit will continue to monitor overall unaccommodated rides to ensure an appropriate level of travel is being provided to the community on MobilityPLUS service through operational efficiencies and potential future service improvements pending budget and Regional Council approval.

9. Attachments:

None.

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