

## SOCIAL SERVICE AGENCY SURVEY

(For agencies that provide client-focused services)

On behalf of the Houston-Galveston Area Council (H-GAC), which is the Council of Governments for the 13-county Gulf Coast Planning Region, we are requesting your assistance in completing the following survey. The data gathered from this effort will assist the Texas Department of Transportation (TxDOT) and H-GAC in identifying areas of needs and opportunities for enhanced transportation services through coordination. H-GAC currently is developing a 13-county Regional Transportation Coordination Plan, which ultimately will identify several new Pilot Projects throughout the region. **Your input in the survey process will help ensure that H-GAC is fully aware of potential Pilot Project opportunities in your area.**

There are several ways in which you can complete the survey including:

1. online at <http://www.surveymonkey.com/s.asp?u=620832388494>
2. by mailing the survey to H-GAC at the following address:

Attention: Lydia Abebe  
P.O. Box 22777  
Houston, TX 77227-2777

If you, or anyone in your organization, have a question regarding the survey or its contents, please contact:

John Carrara – The Goodman Corporation  
Call (713) 951-7951 or Email: [jcarrara@thegoodmancorp.com](mailto:jcarrara@thegoodmancorp.com)

The deadline for receiving your response is August 25, 2006. Your participation in this survey is truly appreciated.

### SURVEY QUESTIONS

1. Tell us about your agency. What is your mission? What services do you provide? What target population(s) do you serve?

---

---

---

2. Does your agency utilize transportation services? (*Circle letter of all that apply*)
  - a. We provide transportation services for our clients using our agency vehicles.
  - b. We pay for the use of transportation services for our clients.
  - c. We arrange transportation services for our clients.
  - d. We offer an option for home visits to clients that do not have their own means of transportation.
  - e. We do not utilize or need transportation services for our clients or employees.
  - f. We do not utilize, but do need transportation services for our clients or employees.

3. If you answered “a” in question 2 above, what type of transportation service does your agency operate? *(Circle letter of all that apply)*
- a. Owned or leased vehicles
  - b. Purchase transportation trips from another provider
  - c. Provide bus or taxi subsidy or vouchers to clients
  - d. Other(explain)\_\_\_\_\_
- 

4. What type of vehicles does your agency operate for client transportation services; and how many of each? *(Circle letter of all that apply)*
- a. Sedans #\_\_\_\_\_
  - b. Vans #\_\_\_\_\_
  - c. Buses #\_\_\_\_\_
  - d. Other #\_\_\_\_\_

5. If you answered “b” in question 2 above, what type of transportation services does your agency pay for? *(Circle letter of all that apply)*
- a. Private van
  - b. Private bus
  - c. Taxi
  - d. Local fixed-route buses
  - e. Community transportation services (American Red Cross, Harris County “Rides” Program)
  - f. Reimburse staff who provide transportation for clients in personal vehicles
  - g. Other *(Explain)*
- 
- 

6. Are there any alternatives for your clients if your current transportation services were unavailable?       Yes       No

7. What other public transportation services are you aware of that are provided in your community that your clients could utilize? Why do your clients  use /  not use these other services?

8. What are the greatest barriers your agency faces in arranging transportation services for your clients? *(Circle letter for all that apply)*
- a. Waiting lists for service
  - b. Cost to client
  - c. Cost to agency
  - d. Client resistance to using available transportation options
  - e. Current transportation options are not feasible to meet client needs
  - f. Other \_\_\_\_\_

9. Whether your agency provides transportation services or not, what type of transportation services do your agency and clients need? Are there particular destinations/trips for which transportation is difficult to arrange?
10. Has your agency coordinated (or shared) transportation services with another agency or transit provider?  
 Yes       No (*If no, skip to end*)
11. How has your agency (or community) coordinated transportation services?  
(*Circle letter of all that apply.*)
- a. Joint Marketing
  - b. Fare Coordination
  - c. Trip Sharing
  - d. Other (explain) \_\_\_\_\_
12. What have been the major benefits to coordination? (*Circle letter of all that apply*)
- a. Cost Savings
  - b. Improved Service Delivery
  - c. Ability to Serve More People
  - d. Other (*Explain*) \_\_\_\_\_
13. Which agencies participated in coordination activities?
14. How and why did that agency participate?
15. What were the major obstacles and hurdles in your coordination program and how were they overcome?

16. Which of the following criteria are necessary for your clients to utilize public transportation?

- a. No fare
- b. Door to door service
- c. Wheelchair accessible
- d. Provision for an escort
- e. Assistance boarding/de-boarding
- f. Safer sidewalks, lighting, and neighborhood environment at and around bus stops
- g. Other \_\_\_\_\_

17. Would you be willing to consider other opportunities to coordinate services in the future?

*Thank you for participating in this important survey.*