CHERRIOTS

2019-2021
SPECIAL TRANSPORTATION FUND (STF) GRANT APPLICATION

FOR PROJECTS LOCATED WITHIN MARION AND POLK COUNTIES

DECEMBER 14, 2018

2019-2021 STF Grant Application
for Projects Located Within Marion and Polk Counties

INTRODUCTION

- Read the Cherriots *2019-2021STF Grant Application Instructions* prior to completing this application.
- Each project submitted for funding consideration must have its own application.
- DO NOT submit the application for subrecipients on the "Funding Opportunities" section of the ODOT RPTD website. Only submit this application to Salem Area Mass Transit District (SAMTD) following the instructions referenced above.
- Selection criteria are detailed in the *Application Instructions*.
- This form must be filled out using the online form and submitted in Adobe .pdf format. Paper applications will NOT be accepted.
- Signature pages should be scanned and attached as separate pages to each application.

Submittal Checklist

Make sure

✓ Application is complete, signed, and dated

Submit

✓ Proof of agency status (template included in application packet)

✓ Maintenance Plan (if submitting an application for preventive maintenance)

A. ORGANIZATION INFORMATION

Name of Organization: Legacy Silverton Medical Center

Employer Identification Number (EIN): 93-0281321

Contact Person: Randy Stockdale

Contact Person Title: Foundation Director

Address: 342 Fairview St. Silverton, OR 97381

Telephone: (503) 873-1790

Email: rstockdale@lhs.org

Type of Organization (check one)

Government Agency	☐
Private Not-for-Profit	☑
Other	☐

Area of service (check one)

Inside Marion and Polk Counties	☑
Outside Marion and Polk Counties	☐
Both inside and outside Marion and Polk Counties	☐

Organization Days and Hours of Operation

Day	Hours
Sunday	
Monday	8:30 a.m. to 4:30 p.m.
Tuesday	8:30 a.m. to 4:30 p.m.
Wednesday	8:30 a.m. to 4:30 p.m.
Thursday	8:30 a.m. to 4:30 p.m.
Friday	8:30 a.m. to 4:30 p.m.
Saturday	
Please list any planned periods of service closure greater than 3 days (i.e., closed the week between Christmas Day and New Year's Day)	Thanksgiving (closed for four days)

Total transportation program costs by year

FY18 (historical data, if applicable)	FY19 (projected, if applicable)	FY20 (projected)	FY21 (projected)
$159,609.00	$160,000.00	$164000	$168,000.00

B. PROJECT INFORMATION

Project Title (*will be used for reviewer reference and in public comment process. Example: Mobility Management for City of Utopia Transit Service)*

CareVan Program - Legacy Silverton Medical Center transportation

Project service area to be served (*indicate the geographic features that define your service area such as streets, rivers, or jurisdictional boundaries)*

North boundary	Woodburn/Hubbard
West boundary	Salem/Keizer
South boundary	Aumsville, Submility
East boundary	Scotts Mills
Other general geographic area (i.e., within the City of Woodburn)	Approximately a 25-mile radius of the hospital

Optional: please provide a map of your service area as a separate single page 8.5"x11" attachment.

Start date
Provide the date of first work that will be charged to the grant.

01/11/19

Project Service Types (check all that apply) *What type of services will be supported with this STF grant?*

A. Open to the general public at all times	☐
B. Open only to seniors and individuals with disabilities	☐
C. Demand response	☐
D. Open to the general public on a space-available basis	☐
E. Limited to defined clientele (i.e., group residential home)	☑
F. Deviated route	☐
G. Other (define):	☐

Project Type (check one) *Select the project type that you wish to include in your application.*

Project Type	Existing Service	New Service
A. Transit Operations	☐	☐
B. Mobility Management	☐	☐
C. Replacement Vehicle(s)	☑	☐
D. Service Expansion and Right-sizing Vehicles	☐	☐
E. Preventive Maintenance	☐	☐
F. Equipment	☐	☐
G. Signs and Other Bus Stop Amenities	☐	☐
H. Passenger Shelters	☐	☐
I. Facilities (Bus Barns and Other Buildings)	☐	☐

Total STF funds requested

$45,000.00

Total grant funds requested by year

	FY20	FY21
STF project	$45,000	$0.00

Scalable STF Grant Request by Year
You are strongly encouraged to request the full amount of funding that is needed for each project, including funding for new projects; however, funding is limited. Describe the scalability of your STF funding request, how you scaled down your request and what aspects of the program would not be funded under this funding scenario below. Then enter your scaled down request amounts.

Scalability Description (200 words max.):

The administration, program staff and volunteers of Legacy Silverton are incredibly grateful for the historical support provided through STF grant funding. After a careful review of our existing fleet, maintenance expense records and reports from our volunteer drivers, we feel that it is appropriate to only ask for the replacement of one CareVan transportation vehicle. As a result, we do not have a scalable proposal for the committee; we do not feel that there is a scaled-down proposal that would meet our CareVan transportation fleet needs, nor do we wish to inflate our initial grant request to include expenses that are less than fully and ethically justifiable. As grateful recipients of previous STF grants, we wish to continue a partnership that includes thoughtful and careful stewardship of our community's limited resources.

Note: the project budget included on page 8 is a two-year program budget projection, in accordance with the two-year STF grant funding cycle.

	FY20	FY21	Total
Scaled request:	$ n/a	$ n/a	$ n/a

Identify the project's additional sources of funding in the table below:

Estimated Additional Project Resources	
Source of Funds	**Dollar Amount**
2019-2021 STF Program Request (*Important!)*	$45,000.00
Local Resources	$0.00
Federal Resources	$0.00
Other (provide description):	$0.00
Project Grand Total	**$**45,000.00

☐ The award of this STF Grant will enable federal funds to be brought to the project.

Coordinated Plan

Is project derived from the *Cherriots Coordinated Public Transit – Human Services Transportation Plan* dated August, 2016? ☑ Yes ☐ No If yes, what page(s)? p. 69

If no, explain why the project is not part of the Coordinated Plan.
For example: Is the project part of another plan (please name)? Is the plan still being finalized?

The CareVan program is referenced in several areas of the coordinated plan, although the purchasing of a new vehicle is not specifically noted as a plan strategy.

1. **Project Description**

   a.) **Describe services or capital investment to be provided by STF funding** *(limit 500 words)*. Answer the following questions in your description:

- Who will you serve?
- What geographic area will you serve?
- What level of service will be provided to customers?
- Operational activities; how will customers request and receive rides, including scheduling and dispatching?
- Describe if volunteers will be utilized to provide service and how this will occur (will the volunteer program be supported with STF or other funds? Will you provide mileage reimbursement to volunteers using their own vehicles?).
- How will the service be marketed?

(limit 500 words).

Legacy Silverton Medical Center is now a part of Legacy Health, the largest community-based non-profit health system in the Portland-Vancouver-Salem region. With facilities located throughout the Mid-Wilamette Valley, Legacy Silverton provides a variety of family and specialist health care at the 48-bed hospital in Silverton as well as clinic locations in Woodburn, Mt. Angel and Keizer.

The Legacy Silverton CareVan program, which is entering its 27th year of operation, provides crucial door-to-door health care transportation services for patients who are transportation compromised; the vast majority of our CareVan participants are elderly or living with disabilities. Providing approximately 5,000 trips annually, this primarily volunteer-driven program provides door-to-door medical transportation services across a significant geographic segment of Marion County. In addition to the communities listed above where Legacy Silverton operates clinic services, the CareVan program serves persons living in Salem, Scotts Mills, Hubbard, Gervais, Molalla and nearby rural and unincorporated areas.

The CareVan program is primarily operated by committed volunteers, including over two dozen volunteer drivers and dispatchers who provide courteous and cheerful service to patients. Volunteers stay engaged with the program for long periods of time; our current star volunteer will be celebrating their 20th year of service in 2019. CareVan also employs two professional drivers at the Woodburn location to keep pace with demand and maintain consistent coverage. Rides are scheduled over the phone in advance, either by clinic and hospital staff or by patients themselves. Riders get 24-hour advance reminder calls to ensure that patients rarely miss appointments. Rides are free, although donations are happily accepted.

Rides are typically performed in two main shifts between 8:30 a.m. and 4:30 p.m., Monday through Friday. Volunteer drivers are dispatched from the Silverton location; employed drivers are dispatched from the Woodburn Health Center. Rides are exclusively performed in CareVan branded vehicles to ensure patient and driver safety; the vans have highly flexible seating that allows for easy pick-up and drop-off for patients using wheelchairs.

Having provided this crucial medical transportation program since 1991, the leadership of Legacy Silverton Medical Center recognizes the tremendous value that this service provides to the community. As a result, the hospital is continuing its commitment to fund the operating costs of this program - primarily management and volunteer coordination - through hospital operating funds. The program is highly regarded by our patient population and by the community. While Legacy Silverton provides printed materials to advertise CareVan services at strategic locations, we find that our patients are highly aware of the program and readily refer others to this crucial service. Word of mouth remains an effective marketing strategy for this service, as it is so well established - and well loved - within the communities we serve.

Legacy Silverton Medical Center is respectfully requesting funds to replace the oldest vehicle in its CareVan fleet - this vehicle, from 2010, is experiencing significant mechanical issues and is only used as an emergency back-up vehicle. By replacing this vehicle, the CareVan program will have a completely functional fleet of vehicles and will be able to maintain this level of service for years into the future.

b.) Will you coordinate between providers to avoid duplication? *Describe what level of coordination between partners is done and how duplication is avoided. Limit 200 words.*

Over the past 27 years, the CareVan program has adapted its service and scheduling model over time to best coordinate with local public transportation resources. Always provided in the spirit of coordination and cooperation, CareVan coordinates closely with community partner transportation providers to meet transportation needs that would otherwise go unmet. CareVan's door-to-door service exclusively provides medical-related transportation, and many of our patients also need assistance with non-medical transportation (e.g., trips to the grocery store). We work closely with each community's transportation resources to coordinate services whenever possible; the unique nature of CareVan's program model results in very little service duplication.

c.) Expected Outcomes
Describe the expected outcomes of this project on seniors and people with disabilities. Why is this project the best method to address the needs identified in the Coordinated Plan? Limit 400 words.

The expected outcome of the overall CareVan program remains consistent: provide door-to-door transportation to and from medical appointments for seniors, people with disabilities, and other transportation-compromised individuals. For the past 27 years, CareVan has been providing this necessary service to ensure patients can access their medical care, and daily our patients tell us that the service is "a life-saver" for them or for their loved ones. By providing access to medical care, this program helps keep seniors, people with disabilities and people facing other challenges healthy, happy, and allows them to live as independently as possible.

The anticipated outcome of the proposed replacement vehicle is that the fully modernized fleet will be better equipped to handle routine maintenance scheduling and logistics, will have available back-up vehicles in case of an emergency or an equipment malfunction on a newer model vehicle, and will be fully accessible for persons using wheelchairs or other mobility assistance technology. This will ensure that the CareVan program is properly equipped to to meet the transportation needs for seniors and persons with disabilities in the region for years to come.

2. Project Budget

Enter all costs involved in the **total** cost of the project.

Type	Amount
Labor (payroll)	$ 118,630.00
Contracted services	$ 18,720.00
Materials and supplies	$ 2,400.00
Operations	$ 40,832.00
Preventive maintenance	$ 800.00
Capital equipment	$
Technology	$ 3,000.00
Marketing	$ 300.00
Other (describe) fuel	$ 13,000.00
Other (describe)	$
Other (describe) volunteer hrs (in-kind, $24/hr	$ 121,536.00

Project Total	$ 319,218.00
Amount requested in this grant	$

3. Provide a timeline for the project in the following table:

	Milestone Description	**Completion Date**
1	Create Vehicle order	7/31/19
2	Obtain required price quotes	8/31/19
3	Receive purchasing approval from Cherriots/ODOT	10/1/19
4	Submit vehicle order	10/31/19
5	Vehicles are delivered	5/1/20
6	Begin service utilization	5/15/20
7	Dispose of old vehicle	6/15/20
8		
9		
10		

4. Is your application for a replacement vehicle?

☑ Yes (continue to #5) ☐ No (go to Section C)

5. Enter the following information about each vehicle to be replaced:

Year	Make/ Model	Vehicle Category*	VIN	Total Seats	ADA Seats	Current Mileage	Vehicle Condition	Maintenance History (Issues, repairs, etc.)
2010	Dodge Caravan	E-2	2D4RN4DE 7AR29073	4	2	75,165	Marginal	Frequent safety & reliability issues; significant wear
		Choose						
		Choose						
		Choose						
		Choose						

***Vehicle Category Descriptions:** http://www.oregon.gov/ODOT/PT/resources/guidance-library/vehicle-descriptions-usefullife-standards.pdf
**Fuel Type Options: (G) Gas, (D) Diesel, (B) Biodiesel, (HG) Hybrid-gas, (HD) Hybrid-diesel, (CNG) Compressed Natural Gas, (OF) Other alternative Fuel.*
***Estimated Delivery Date:** Minimum 160 days if ADA accessible.*

5a. Will you use the ODOT/DAS state price agreement contract? (☑ Yes ☐ No).

If No, describe the needs not addressed in state contracts (e.g., no contracts for trolley-style vehicles, no contracts for buses larger than 44 passengers, etc.).

5b. Vehicles to be purchased (expansion vehicles only):

Vehicle Category*	Qty (#)	Cost Each ($)	Total ($)	No. Seats w/ADA Deployed	No. of ADA Stations	Total Capacity	Fuel Type*	Estimated Order Date	Estimated Delivery Date*
E-2	1	$ 45,000	$ 45,000	4	2	6	G	7/15/19	1/1/20
Choose							Choose		
Choose							Choose		
Choose							Choose		
Choose							Choose		
Totals:	1	Grand Total:	$ 45,000						

C. ORGANIZATIONAL CERTIFICATION

By submitting this document via email to Salem Area Mass Transit District (SAMTD), I certify that the submitted materials and data included are complete, true and correct. Also, I certify that my organization is:

- Eligible to enter into agreements with SAMTD;
- Has the legal, managerial and operational capacity to do the work to be paid for by the STF;
- Not debarred or suspended from federal grants;
- In compliance with federal, state and local laws and regulations including, and not limited to, those pertaining to passenger transportation, civil rights, labor, insurance, safety and health, as applicable;
- Complies with the laws or rules of the STF Program;
- Properly uses and accounts for the STF Program's goals; and
- Will operate the project or service in a safe, prudent and timely manner.

Randy Stockdale Digitally signed by Randy Stockdale Date: 2019.01.11 15:31:52 -08'00' Foundation Director 01/11/19

Signature of Authorized Organization Officer Title Date

Private Nonprofit Agency – Corporation Status Inquiry and Certification

If your agency or organization is claiming eligibility as a Section 5310 or STF Program applicant based on its status as a private nonprofit organization, you must obtain verification of its incorporation number and current legal standing from the Oregon Secretary of State Information Retrieval/ Certification & Records Unit (IRC Unit). The "Status Inquiry" document must be attached as an appendix to the application. To assist your agency or organization in obtaining this information, use one of these two methods:

To obtain Corporate Records Information over the Internet, go to: http://sos.oregon.gov/business/Pages/find.aspx Enter the name of your agency or organization. If its status is active, print the page and submit it as proof.

Private Non-profits

Legal Name of Non-profit Applicant: Legacy Silverton Medical Center

State of Oregon Articles of Incorporation Number: 021735-19

Date of Incorporation: 01/11/19

Certifying Representative

Name (print):	Sarah Brewer		
Title (print):	President, Legacy Silverton Medical Center		
Signature:	Sarah Brewer	Digitally signed by Sarah Brewer Date: 2019.01.14 09:03:26 -08'00'	Date: 01/11/19