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Paula J. Hammond, Chair
WSDOT Chief of Staff

January 26, 2007

Margaret Casey
Consumer Representative

The Honorable James Hargrove, Chair
Human Services & Corrections
435 J.A. Cherberg Building
P.O. Box 40466 - Olympia, WA 98504-0466

Richard DeRock
Representing the Washington
State Transit Association

Theresa Hekel
Washington Association
of Pupil Transportation

SUBJECT: Access to Treatment ESSSB 6239

Marilyn Mason-Plunkett
CTA-NW

Dear Senator Hargrove:

Doug Porter
Health and Recovery
Services of DSHS

Engrossed Second Substitute Senate Bill 6239 Section 112 required the Agency Council on Coordinated Transportation (ACCT) to analyze access to treatment by transit of Division of Alcohol and Substance Abuse (DASA) patients. The purpose of the analysis was to support development of transportation services that increase access to treatment for patients of DASA, particularly recovering methamphetamine users. ESSSB 6239 requested that ACCT report back to the legislature on activities to increase access to transit by DASA clients and incorporate these activities into the ACCT strategic work plan.

Marcia Riggers
Office of Superintendent of
Public Instruction

Bernice Robinson
Consumer Representative

Page Scott
Regional and Metropolitan
Planning Organizations

ACCT is a multi agency council that provides a forum for sharing information to support statewide coordination and development of special needs transportation. "Persons with special needs" are defined in RCW 47.06B as persons who because of age, disability, or income are unable to access adequate transportation. Persons receiving treatment through DASA are included in the definition of "special needs."¹

Jennifer Ziegler
Governor's Transportation
Policy Advisor

Legislative Members:

Senator Pam Roach
Senator Jim Kastama

Access to treatment analysis

Representative Fred Jarrett
Representative Mark Miloscia
Representative Alex Wood

WSDOT completed the analysis of patient access to treatment by public transit for ACCT. The attached maps are geospatial representations of the distribution of patients and facilities in Washington in relation to public transit districts and services.

¹ For more information about ACCT please go to : www.wsdot.wa.gov/acct The enabling legislation, membership and activities are available on line.

- 13 Counties had 25% or less patient access to transit
- 47% of DASA patients were geo-coded and mapped
- 17 Counties had 75% or more patient access to transit
- All Counties with large urban areas (<200k population) had more than 75% access to transit by patients
- Rural counties with no cities over 50,000 populations made up 100% of the counties with no access to treatment by transit for patients.
- 20,032 or 76% of the patients geo-coded had access to transit for treatment²

Strategic Program

ESSSB 6239 required that ACCT adopt as part of its strategic program a plan to increase access by recovering addicts to existing special needs transportation services offered throughout the state. The ACCT strategic work plan is updated at the beginning of the biennium.³ In June when the work plan is updated ACCT will incorporate the findings of the DASA analysis in to its strategic program areas. See attachment for specific proposals.

Strategies

Through the process of developing this report several strategies for future action were identified:

- ACCT and DASA can work together to develop more information on serving DASA patients.
- ACCT can include access to transit information in the Washington planning process for coordinated human service and transportation planning.
- Projects to meet patient needs will be incorporated in the state consolidated grant process for access to state and federal transportation system funding.
- ACCT is willing and interested in working with treatment and transportation providers to develop and implement strategies to increase access to transportation resources for DASA or other DSHS clients.⁴

² This means that the client and the treatment center were both in transit services areas and if the bus ran in the times and places necessary the client had access to service. As we improve the quality of our transit data we will be able to provide more certainty about access to services and identify issues which prevent access to service. For example if the transportation service does not run at a time that would allow patients to use the transportation.

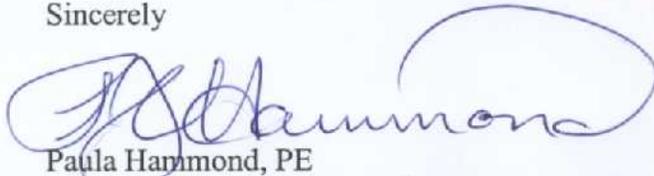
³ See Strategic Work Plan at : http://www.wsdot.wa.gov/acct/library/meeting_handouts/12-02-2005_acct_retreat_summary.pdf

⁴ For example Washington has the largest state supported vanpool program in the country. In the last three years we have spent over \$13 million dollars on purchasing vans to expand service statewide. In 3-5 years

- ACCT is the sponsor of a trip planner project to collect and manage travel information. ACCT will work with DSHS and other state and local agencies to develop public and agency awareness about the trip planning service.

ACCT staff met with DASA staff and management as well as with Chris Johnson from the Attorney General's Office regarding this information. If there are any questions that we can answer regarding this analysis and opportunities for targeting transportation resources to improve access to treatment please do not hesitate to call: Robin Phillips, ACCT Administrator 360.705.7929

Sincerely



Paula Hammond, PE
Chief of Staff, Washington State Department of Transportation
Chair, Agency Council on Coordinated Transportation

Attachments:

Proposed additions to ACCT's Strategic Program
% of Patients by County,
Patients by Zip Code,
% Patients with Access,
Public Transit Districts in the state
Regional Transportation Planning Organizations

cc: Human Services & Corrections Committee Members & Staff

those vans as well as other existing vans will need to be replaced. The vans that reach the end of their useful life may have many miles left on them that could be used to support client access to treatment and other services in communities.