



FTA Traditional Section 5310 Enhanced Mobility of Seniors and Individuals with Disabilities

Quantitative Scoring & Project Rating Worksheets

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Maximum Total Per Requested Project			100

Scored by: (MPO/RTPA Name and Phone Number)
Agency submitting Application:
Signature of Person Verifying Eligibility of Applicant and Scoring

Quantitative Scoring & Project Rating

(See Application Part III – Pg. 20-28)

Evidence of an applicant's experience and history of providing efficient and effective transit services.

SECTION – I

Ability of Applicant

Score

<p>1a. Applicant has experience providing existing specialized transportation services for seniors or individuals with disabilities for:</p> <p style="text-align: right;">More than 5 years = 4 ____ 3 to 5 years = 3 ____ 1 to < 3 years = 2 ____ Less than 1 year = 0 ____</p> <p style="text-align: center;">OR</p> <p>1b. Applicant has experience in providing social services (non-transportation) for seniors or individuals with disabilities: Applicant demonstrates support from the local RTPA or CTSA (attach letter) = 2 ____ And applicant has provided social services for More than 3 years = 2 ____ 1 to 3 years = 1 ____ Less than 1 year = 0 ____</p>	
<p>Scoring criteria for the following questions: 0 = Does not address question 1 = Addresses question without attaching relevant documentation. 2 = Addresses question completely and attaches relevant documentation</p> <p>2. Driver training program: New and continuing driver training, including classroom and road testing = 2 ____ Sensitivity Training, Emergency Preparedness, First Aid, and CPR = 2 ____</p> <p>3. Dispatching Plan: Description of dispatching plan with ongoing training = 2 ____</p> <p>4. Maintenance plan including the following: Daily Pre- and post- trip inspection description with inspection forms = 2 ____ Preventative and routine maintenance description, with maintenance schedule and forms = 2 ____ Contingency plans for when equipment is not available for service = 2 ____</p> <p>5. California Highway Patrol (CHP) Inspections Inclusion of satisfactory CHP or Caltrans inspection or documentation that such an inspection is not required = 2 ____</p> <p>Annual Budget/Fund Sources: 6. Agency describes other funding received or why other funding is not available = 2 ____ 7. Qualified audit for agency included with no instances of non-compliance = 2 ____</p> <p>Emergency Operations and Response Planning: 8. Emergency planning and drill activities, and county coordination. = 2 ____ 9. Identified available accessible vehicles (including capacity) to the county for use in emergency evacuations. = 2 ____</p> <p>Proposed Budget for Transportation Program: 10. All sources of estimated income are identified for proposed project. = 2 ____ 11. Budget for applicant agency includes prior, current, and budget year. = 2 ____ 12. *Appropriate funding source for local match is identified*. = 2 ____</p> <p>*For this cycle – Local Match is not required, award is 100% Federally Matched (2 automatic Points) and is not asked in application</p>	
<p>Total Points Maximum 32</p>	

Quantitative Scoring & Project Rating

(See Application Part III – Pg. 29-32)

SECTION – II Coordination Planning

0 – Does not address question and/or does not include Coordinated Plan section or page number

3 – Addresses question & indicated Coordinated Plan section and/or page number

COORDINATED PLAN REQUIREMENTS Maximum 12 points (3 points per question)

<p>Element 1: <i>An assessment of available services that identifies current transportation providers (public, private, and non-profit).</i></p> <p>1. Generally describes available non-profit, public transit or Paratransit, including fixed route, dial-a-ride, and ADA complementary Paratransit services as contained in the Coordinated Plan by section and/or page number.</p>	
<p>Element 2: <i>An assessment of transportation needs for individuals with disabilities or seniors. This assessment can be based on the experiences and perceptions of the planning partners or on more sophisticated data collection efforts, and gaps in service.</i></p> <p>2. Describes transportation needs of individuals with disabilities or seniors to be served by the proposed project as contained in the Coordinated Plan by section and/or page number.</p>	
<p>Element 3: <i>Strategies, activities, and/or projects to address the identified gaps between current services and needs, as well as opportunities to achieve efficiencies in service delivery.</i></p> <p>3. Identifies coordination strategies activities and/or efficiencies by name. Accurately describes <u>how this project addresses strategies, activities and/or efficiencies</u>. Includes section and/or page number of Coordinated Plan.</p>	
<p>Element 4: <i>Priorities for implementation based on resources (from multiple program sources), time, and feasibility for implementing specific strategies and/or activities identified.</i></p> <p>4. Identifies the Coordinated Plan's implementation priorities. Accurately describes <u>how this project addresses them</u>. Includes section and/or page number of Coordinated Plan.</p>	
Total Planning Score Maximum 12	

COORDINATION – USE OF VEHICLES/EQUIPMENT Maximum 6 points (3 points each)

(See Application Part III – Pgs.33-34) Verify required letters are attached for 1 and 2 or 3.

1. Clearly describes how vehicles, equipment or services in agency's existing fleet are used to provide coordinated service for another agency's clients or how these vehicles are shared with another agency(s).	
<p>2. Clearly describes plan for coordinating use of requested vehicle(s) or equipment. (1 point per type of coordination or sharing of resources, up to 3 points.) Examples:</p> <ul style="list-style-type: none"> • Shared use of vehicles • Dispatching or scheduling • Maintenance • Back up transportation • Staff training programs • Joint procurement of services and supplies from funding sources other than Section 5310 • Active participation in local social service transportation planning process • Coordination of client trip(s) with other transportation agencies • Other – please describe 	
OR	
3. Clearly identifies attempts the agency has made to coordinate. Explains why coordinating isn't possible. Provides supporting documentation letter from CTSA or RTPA confirming that no opportunities for coordination currently exist for requested equipment.	
Total Coordination of Vehicles Score Maximum 6	

Project Rating Worksheet

(See Application Part III – Pg. 35 Existing Services)

Existing Transportation Services

REPLACEMENT – Vehicles to be replaced that are currently in Active Service.

VEHICLE USEFUL LIFE CRITERIA

TYPE OF VEHICLE	EXISTING VEHICLE MILES AND AGE	SCORE
Minivan (Class D), Standard Van (Class V)	175,000 to 200,000 or 8 years	.....20
	150,000 to 174,999 or 7 years	.....15
	125,000 to 149,999 or 6 years	.....10
	100,00 to 124,999 or 5 years	.....5
	Less than 100,000 miles or 4 years old not eligible	.....0
Small Bus (Class A), Medium Bus (Class B, Large Bus (Class C)	225,000 - 250,000 or 9 years	.....20
	200,000 – 224,999 or 8 years	.....15
	175,000 – 199,999 or 7 years	.....10
	150,000 – 174,999 or 6 years	.....5
	Less than 150,000 or 5 years not eligible	.....0
Larger Bus (Class E)	275,000 – 300,000 or 11 years	.....20
	250,000 – 274,999 or 10 years	.....15
	225,000 – 249,999 or 9 years	.....10
	200,000 – 224,999 or 8 years	.....5
	Less than 200,000 or 7 years not eligible	.....0

Replacement: Determination that an applicant's vehicle needs to be replaced in order to continue its existing transportation services. For each new vehicle requested a vehicle currently in **active service** will be removed and sold or placed into backup service. Sedans and SUV's are no longer eligible as replacement vehicles.

Active Service: Vehicle is providing service throughout the agency's normal days and hours of operation.

Excessive Maintenance: Vehicle does not meet minimum useful life but needs to be replaced due to excessive maintenance. Requests must have prior approval from the Branch Chief of Specialized Transit Grants.

Use the chart below to score each replacement vehicle.

Maximum 20 points each

Type of Vehicle	VIN - last 5 numbers	Disposition: Sell or Backup	Mileage	Age	Score

* If requesting new system (base station and mobile radios) score under **Other Equipment**.

Project Rating Worksheet

(See Application Part III – Pg. 36 Proposed Services)

Proposed Transportation Services

NEW OR SERVICE EXPANSION – Determination that requested additional equipment would be fully utilized (days and hours, passenger trips, service area) including usage of vehicle by another agency through a coordination plan.

Use the chart below to score each new or service expansion vehicle.

Round to the nearest whole number.

Score

Projected service hours per week to be provided with requested vehicle will increase total existing service hours by:		
> 38 = 7 points	27 to 29 = 3	
36 to 38 = 6	24 to 26 = 2	
33 to 35 = 5	20 to 23 = 1	
30 to 32 = 4	< 20 hours = 0 points	
AND Projected number of daily one-way Passenger Trips divided by Proposed total vehicle service hours:		
> 7 per service hour = 7 points	4 = 3	
7 = 6	3 = 2	
6 = 5	2 = 1	
5 = 4	< 2 per service hour = 0 points	
AND Projected number of miles for proposed vehicle per day is:		
> 105 miles per vehicle = 6 points		
91 to 105 = 5	46 to 60 = 2	
76 to 90 = 4	30 to 45 = 1	
61 to 75 = 3	< 30 miles per vehicle = 0 points	

Maximum 20 Points

Proposed New or SE Vehicle	Total Score Each Vehicle

Project Rating Worksheet

(See Application Part III – Pg. 37 Other Equipment)

OTHER EQUIPMENT - Determination that ancillary equipment will provide critical support to the applicant's transportation program.

Use the chart below to score each equipment request.

Criteria	Points	Score
1. Equipment will coordinate fleet of 10 or more vehicles (pg. 18)		
10	15	
9	13	
8	11	
7	9	
6	7	
5	5	
4	3	
1-3 vehicles	1	

2. Applicant is currently using manual system for scheduling, vehicle tracking, etc. And/or has no dispatch communication equipment. (Application pages 18-19)	5	
OR		
3. Applicant needs to replace inadequate equipment to improve efficiency. (Application pages 18-19)		
More than 5 years	5	
3 to 5 years	3	
Less than 3 years	0	
	Total (Maximum 20)	

Other Equipment: Computer system, Software, Maintenance equipment, Communication system or other.

Describe and Score **each** request

Maximum Points 20

Equipment Requested	Score

Project Rating Worksheet

(See Application Part III – Pgs. 35-37 Transportation Service) - Service Effectiveness
Determination that existing fleet is fully utilized (days and hours, passenger trips and service area) including usage of vehicle(s) by another agency through a coordination plan.

Round to the nearest whole number.

Existing transportation provider: Total service hours per week divided by number of vehicles (<u>excluding vehicles in back up service</u>). Refer to Attachment AA: OR First-time transportation provider or Service Expansion: Total projected service hours per week divided by number of vehicles (<u>excluding vehicles in back up service</u>):		SCORE
Over 36 hours per week = 10 35 to 36 = 9 33 to 34 = 8 31 to 32 = 7 29 to 30 = 6	27 to 28 = 5 25 to 26 = 4 23 to 24 = 3 20 to 22 = 2 0-19 hours per week = 0	
AND Existing transportation provider: Sum of the total one-way passenger trips per day divided by total service hours per day (<u>excluding backup service</u>). Refer to Attachment AA: OR First-time transportation provider or Service Expansion: Projected number of daily one-way passenger trips divided by total vehicle service hours:		SCORE
Over 8 passengers per service hour = 10 7 to 8 = 8 5 to 6 = 6	3 to 4 = 4 1 to 2 = 2 no passenger per service hour = 0	
AND Existing transportation provider: Total miles per day divided by number of vehicles (<u>excluding backup vehicles</u>) Refer to Attachment AA: OR First-time transportation provider or Service Expansion: Projected number of miles for requested vehicle per day:		SCORE
Over 102 miles per vehicle = 10 95 to 102 = 9 87 to 94 = 8 79 to 86 = 7 71 to 78 = 6 63 to 70 = 5	55 to 62 = 4 47 to 54 = 3 39 to 46 = 2 30 to 38 = 1 0-29 miles per vehicle = 0	
Additional Points Possible -Total cannot exceed 30 points		
Existing transportation provider: Current wheelchair/lift users as a percentage of current total users. Refer to Attachment AA: OR First-time transportation provider or Service Expansion: Projected wheelchair/lift users as a percentage of current total users:		SCORE
More than 65% = 10 61 to 65% = 9 56 to 60% = 8 51 to 55% = 7 46 to 50% = 6	41 to 45% = 5 36 to 40% = 4 31 to 35% = 3 26 to 30% = 2 20 to 25% = 1 0-19% = 0	
		Total Score Maximum 30

Project Rating Worksheet

Agency: _____ MPO/RTPA: _____

	Project Request	If Replacement Vehicle - VIN	Sect 1 (Max 32pts)	Sect II (Max 18pts)	Sect III (Max 20pts)	Sect IV (Max 30pts)	Total (Max 100pts)
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							