

Appendix G: Public Meeting Report

Public Meeting Summary

Ten public meetings were held in the Panhandle region from June 1 to June 27 to solicit input regarding transit needs and barriers to coordination. Meeting locations were chosen based on population and geographical diversity. To encourage attendance, meeting announcements were sent to the Panhandle agency contacts and a notice of a public hearing was sent to regional newspapers. Attendance at meetings ranged from one attendant (Perryton) to 22 attendants (Childress). See Table G1.

Table G1: Panhandle Public Meeting Schedule

Date	City	Name of Meeting Facility	Address of Facility
Thursday, June 1			
12:00 noon	Amarillo	Room 306, City Hall	509 SE Seventh St
Tuesday, June 20			
5:00 PM	Dalhart	Dalhart Senior Citizens Building	610 Denrock
7:30 PM	Dumas	Moore County Community Building	16th and Maddox
Wednesday, June 21			
5:00 PM	Hereford	Hereford Community Center	100 Avenue C
7:30 PM	Tulia	Swisher County Memorial Building	126 S.W. Second St.
Thursday, June 22			
7:00 PM	Childress	Childress Auditorium - Reunion Rm	1000 N. Commerce
Monday, June 26			
12:00 PM	Pampa	Chamber of Commerce	200 N. Ballard
5:00 PM	Miami	Roberts County Community Center	103 Main St.
7:30 PM	Perryton	Frank Phillips College, Allen Campus Conference Center	2314 S. Jefferson
Tuesday, June 27			
7:00 PM	Amarillo	Panhandle Regional Planning Commission - Board Room	415 W. 8th Avenue

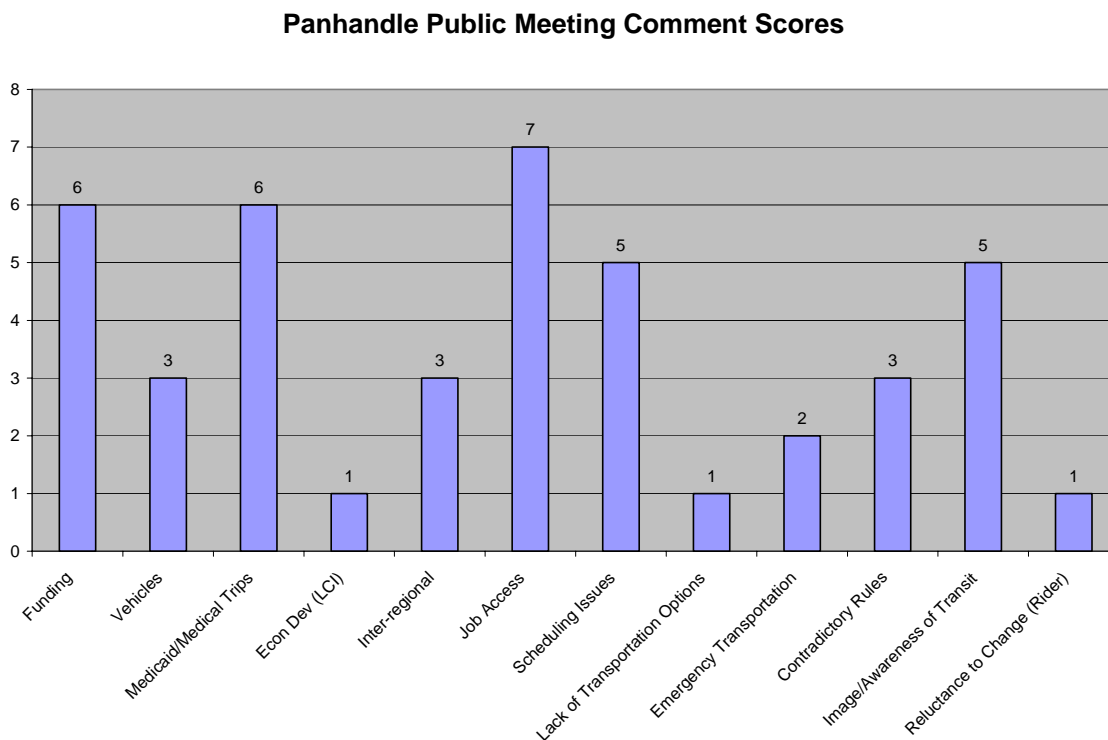
The format of the meeting included a short presentation explaining transit coordination followed by a facilitated discussion regarding transit needs and barriers. Materials accompanying the meeting included handouts of the presentation and three posters providing study information to date, a county-by-county assessment of transit-related demographic information, a general overview of the levels of transit coordination, and initial findings from the Panhandle Transit Survey.

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This section includes a summary of the public meeting comments followed by meeting comments and notes.

A facilitated discussion was held to solicit comments concerning two broad topics: 1) what are the concerns of community members regarding transit service in their area (that is, what are the gaps in service); and 2) what are the barriers and constraints that they have to accessing or delivering better transit service. The number of comments by topic is tabulated in Figure G1.

Figure G1: Panhandle Public Meeting Comment Scores



Most public comments revolved around four issues:

- **Job Access:** Transportation to jobs was a critical issue voiced in all the public meetings, but particularly so for the cities of Hereford, Childress and Perryton. The city managers, county judges, and Texas Workforce Development Center staff of these cities were concerned that their communities meet the challenge of attracting industries to their areas by supplying an available labor pool. Industries that were cited as potentially

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needing a more readily available pool of workers included meat and pork packing plants, new electric generating plants, dairies and a new Wal-Mart. As one attendant put it: “There are a lot of economic opportunities going on but there is a river between industry and the workers.” Typical comments included interest in establishing a van pool service; the difficulty in ensuring Texas Workforce Commission gas vouchers are not abused and used only for employment purposes; and concern that the job access difficulties will continue to grow if gas prices continue to rise.

- **Funding:** Attendance from staff of the local Panhandle Transit offices was strong at many of the public meetings and Amarillo City Transit staff attended the public meetings within that city. Most of the comments regarding funding came from transit staff and included: more funding for vehicle replacement and operations; high driver turnover rates due to low wages that are the result of low state and federal operating funds; concerns over decreases to state funding; a concern about the City of Amarillo losing federal funding support for transit operations once the population exceeds 200,000.
- **Medicaid/medical trips:** The change of Medicaid contractors from Panhandle Transit to AMR occurred in June 2006. This change in service delivery was the focus of many comments from transit agencies and health and human service agencies.
- **Scheduling:** Overall, transit services received very positive support at the public meetings from members of the general public and social service agency staff. However, one area that was frequently mentioned as a barrier to good service was scheduling. Specifically, the Panhandle Transit’s and ACT’s 24-hour reservation notification was perceived as difficult for certain members of the community to adhere to and, consequently, those members may be turning to other, more costly, solutions. Example comments include:
 - There is no way to handle emergency trips. Something may come up with less than a 24-hour notice that needs timely attention but does not require an ambulance. However, because people feel there are no other alternatives, they are calling 9-1-1, which is an expensive alternative.

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- Older riders may have less ability to honor their reservations because they are more susceptible to quick changes in health and energy levels. Consequently, some of these riders are taking trips when they would prefer not to do so.

Hours of operation are another scheduling issue that was frequently mentioned. Panhandle Transit ceases service at 5:00 p.m., Monday through Friday. ACT ceases service at 7:00 p.m., Monday through Saturday. No city within the Panhandle region has a taxi service with the exception of Amarillo. Consequently, transportation options are limited in the evening hours for the majority of the region. This lack of service was seen as particularly hard on minimum wage workers who frequently work evening and weekend shifts.

- Perception of transit services: Despite strong public support for transit agencies, there was an overall perception that transit was not a service that most people wanted to access, but rather accessed strictly out of need. In other words, it was a service that was needed only if one did not have the money, family, and/or friends to ensure a ride. Particularly for long-distant medical trips, transit was perceived as poor transportation option because of the duration of the trip (frequently all day) and it was implied that those who relied on transit for these trips had no other choice. When asked why transit was not the preferred choice for a trip, typical comments include:
 - We take care of our own;
 - We rely on our friends and family to take us; and
 - It's a service only for the disabled and elderly.

Other comments included how some communities knew little about the transit services available to them or how to schedule a ride (e.g., cities of Miami and Tulsa).

In addition to the above four issues, other topics included:

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- Inter-regional coordination: Coordinating at the regional level to maximize use of resources is a de-facto practice within the Panhandle. Issues of inter-regional and inter-state coordination were also of interest.
- A concern that coordination would mean passengers would experience an unwanted change in service. A concern voiced over the sharing of transportation resources solicited this response: Particularly for older riders, a trip on the Panhandle Transit can be as much a social event as a transportation need. Passengers become accustomed to one driver and a group of familiar riders and they are reluctant to see that changed.
- Dialysis trips consume vast amounts of transit resources. This situation is exacerbated when trips are scheduled for dialysis centers that are not close to the patient's home base. Patients need to know what their treatment and travel options are and communities with regional medical services are interested in serving those members that live within their market area.