

# Mobility Management

more than just words

Notes - Thank you for having me. I chose this title because mobility management professionals know that mobility management is so much more than a title of a position or activity—it is truly a change in mindset, which I think you will see in the projects I will describe today.

## Mobility Management demands that practitioners engage in problem-solving with

- **Empathy:** Knowing that a successful solution emerges from a deep understanding of customers' needs rather than a one-size-fits-all or top-down approach. You can't design a solution for someone you don't care about.
- **Inclusiveness:** Bringing together partnerships of end users, transportation providers and planners, core community services, businesses, advocacy groups, and political leaders and, just as in the Tp Planning 4 all projects, ensuring they can meaningful engage in the solution design
- **Creativity:** Envisioning new solutions and approaches to solving problems that go beyond "the way things have always been done."
- **Resourcefulness:** Combining and linking existing assets and services to most effectively respond to transportation needs, and thinking of assets you may not have tapped into before
- **Broad-mindedness:** Realizing that successful solutions incorporate all types of transportation services as well as surrounding street and sidewalk infrastructure and technological applications. So thinking beyond wheels on the ground

## Recent Projects Encompassing Key Values of Mobility Management

- Transit Planning for All
- Rides to Wellness Healthcare Access Mobility Design Challenge

### Transit Planning for All

Sponsored by the Administration for Community Living (ACL)

Image - Administration for Community Living Logo

Notes - The first is the Transit Planning 4 All projects, of which there have been 25 projects over the last 4 years. This project is funded through ACL

### Program Purpose

- Research and demonstration program to improve coordinated transportation systems
- To ensure that persons with disabilities and older adults can participate in the design of transportation solutions

### Strategies Proven Successful

- A commitment to the project beyond “pro forma” requirement
- Engage in active listening with respect
- Make meetings and communication accessible and appropriate for the populations involved
- Identify what didn’t work before and work through those barriers
- Including multiple stakeholder organizations to share resources and build and maintain momentum

## Lessons Learned

- Momentum needs to be built over time
- Don’t assume that new partners completely understand inclusive processes
- Avoid preconceived notions of what solution is "best" for older adults and/or persons with disabilities.

Image – Transit Planning 4 All Logo

[www.transitplanning4all.org](http://www.transitplanning4all.org)

## Rides to Wellness: Healthcare Access Mobility Design Challenge

- Planning grants implemented through the National Center for Mobility Management
- Funded by FTA
- 16 teams, 2015-2016

Image – National Center for Mobility Management Logo

Notes - The second set of projects are what we call the 1<sup>st</sup> round of Rides 2 Wellness projects, which were planning grants given to 16 communities. These projects began in 2015 and ended in March 2016. They were implemented through the NCMM, of which CTAA is one of the operating organizations.

## Phases of Design Thinking

- **Planning**
  - Reframe question
  - Create design brief
  - Plan research
- **Discovery**
  - Conduct research
  - Curate information
  - Categorize findings
  - Uncover insights
- **Idea Generation**
  - Generate ideas
  - Develop concepts
  - Choose prime concepts
- **Prototyping and Assumption Testing**

- Identify assumptions
- Build prototypes
- Test assumptions
- Apply learnings
- **Learning Launch**
  - Limited launch to learn

Notes - What was unique about these projects is that they followed a human-centered design process called Design Thinking (DT). Here you can see the main phases in that process. I'd like to highlight just two of the key tenets of DT embedded in these phases: first, in the discovery phase, the in-depth research activities. These go beyond surveys, peer community analysis, other types of secondary research, and even focus groups. Instead, the discovery phase calls for ethnographic type research, involving one-on-one, hour or more long, interviews and observations with individuals from key customer groups—such as end users, funders, implementing agencies, social service agencies, etc. It is only through this deep research that a team will develop the insights it needs to think beyond what they already know and create truly innovative solutions.

Another key tenet is vetting your solution before implementing it. This is something we call de-risking, which occurs in the prototyping and assumption testing phase. In de-risking, a team takes its 2 or 3 solution concepts and vets them each of them in many different ways, before even considering a pilot of one of the solution concepts. We've all come up with solutions that we think are great and we want to implement them, but DT makes you wait and vet them fully first. The vetting takes place on paper, through low-cost prototypes, in conversations with customer groups. The beauty of this activity is that it allows a team to figure out what portions of the proposed solution concepts will work and which need to be changed well before significant pots of money are spent on a pilot or roll-out.

## Some of the Teams' Solutions

- Simultaneous scheduling of transportation and medical appointments with hospital discharge staff, transportation call center, and patient
- Technology solutions to coordinate medical appointments with existing transportation schedules
- Patient transportation navigators embedded in clinics
- Mapping data at the intersection of transportation services, patient catchment areas, and clinics to understand access issues
- Creating a membership-based foundation for health care providers to assist their patients in making appointments

## Case Study: South King County, WA “Care Mobility Rewards Program”

Contact Information: Francois Larrivee, Director of Transportation, Hopelink, 425.943.6770, francois.larrivee@hope-link.org

**Our challenge:** Design an innovative solution to improve access to post-hospitalization medical care to help low-income, older adult patients in South King County avoid re-hospitalization.

Notes - One of the solutions that I'd particularly like to highlight is this one developed by the South King Co. team in Washington State. The team sought to reduce hospital readmissions by ensuring low-income older adult patients in South King Co. could get to their post-hospitalization appointments.

**Our Solution:** An incentivized healthcare transportation program that improves healthcare access for low-income, older adult discharged Medicare patients in South King County while helping hospitals reduce 30-day hospital readmissions.

Notes - The solution, called the "Care Mobility Rewards Program" provided transportation credits to patients identified from this target audience as they were being discharged from the hospital. Those credits, which were exchanged for trips through a transportation brokerage called Hopelink, would be used to get the patient to his or her follow-up appointments. The way the program was set up, each time a patient engaged in an activity prescribed in their post-hospitalization care plan, they would receive additional transportation credits. These activities could include doctor's visits, or other things like attending a smoking cessation class, or a weight reduction program. The team, in their research, found that incentives were a powerful motivator for desired behaviors.

## Lessons Learned

- Effective solutions are designed through iteration — We won't always get it right the first time
- We need to move away from the mindset that we as planners always know what is best for our customers—we must involve customers in designing and vetting our solutions
- The most successful solutions hit the "sweet spot": the cross-section of customer desirability, operational feasibility, and financial viability

## More information on Health Care Access Design Challenge projects

[www.nationalcenterformobilitymanagement.org/challenge](http://www.nationalcenterformobilitymanagement.org/challenge)

[www.nc4mm.org/challenge](http://www.nc4mm.org/challenge)

## Mobility Management

more than just words