Specialized Transit Service Application Form



Introduction:

The City of Barrie offers a public transit system within the City of Barrie. Barrie Transit service consist of both a Conventional (Regular) Accessible Fixed Route and Specialized Transit. Specialized Transit is a door to door shared ride accessible public transit service intended for persons unable to use Conventional Transit due to a disability. Please visit barrie.ca/specializedtransit for further details regarding this service.

Eligibility for Specialized Transit is based on several guiding principles.

Eligibility is considered on a case-by-case basis for persons with a disability unable to use Conventional Transit; it is not based on a particular disability, use of an assistive device, age, unable to drive, income or lack of available public transit in an applicant's area or for those who find it more difficult or are unwilling to use Conventional Transit.

Applicants must be residents of the City of Barrie. Passengers whose medical conditions require specific transportation (e.g. extreme fragility requiring transportation below regular speeds or inability to remain on the vehicle for up to 1 hour) need to contact a non-emergency medical carrier for transportation.

Specialized Transit is not an Attendant care service.

Categories of Eligibility as regulated by the Province of Ontario

<u>Unconditional eligibility:</u> A person with a permanent disability that prevents them from using conventional transportation services.

<u>Temporary eligibility:</u> A person with a temporary disability that prevents them from using conventional transportation services. (For example a person having a knee replacement surgery)

<u>Conditional eligibility:</u> A person with a disability where environmental or physical barriers limit their ability to consistently use conventional transportation services. (For example snow in winter months)

How to apply for Specialized Transit Service:

Section A and Section B Completion of the Application:

Section A of this application form is to be filled out by the applicant (or guardian). Your treating registered Health Care Professional must review Section A and complete Section B.

Completion of this application does not guarantee that an applicant is eligible for Specialized Transit Service.

Section C – How to submit the application: Page 3, 4, 5 and 6 must be submitted

Before your send: Keep a copy of this application for your records. Check to ensure application is completed in full. Check to ensure your treating Health Care Professional has completed Section B in full, including signature, certification/license number and contact information.

Applicants with vision impairments who are applying for Specialized Transit Service require supporting documentation or letter indicating that they are unable to use Conventional Transit (regular) from the Canadian National Institute for the Blind (CNIB), in addition to this completed application.

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Applicants please forward the completed application to the City of Barrie as per below:

Health Care Professional, please return the completed application to the person seeking Specialized Transit certification, or with the person's permission, forward it directly to:

The Corporation of the City of Barrie Service Barrie

Attention: Transit Department 70 Collier Street, 1st Floor P.O. Box 400 Barrie, ON L4M 4T5

Phone: 705-726-4242

Fax: 705-730-0377

Email: Service.Barrie@barrie.ca

Barrie Transit will review your application within 14 calendar days of receipt. If your application is incomplete, it will be returned to you and the application process will be delayed. Eligibility determinations will be sent by mail or email. Barrie Transit has the right to audit transit applications and the status of current transit clients and revoke the registration if it is determined that the client is no longer eligible for Specialized Transit service.

For City of Barrie Transit Office Use Only:		Service Barrie:	
Date Received Stamp		Date Received Stamp	
Approved Unconditional/Permane	ent:	With Attendant:	
Approved Temp- duration:		With Attendant:	
Approved Conditional-Seasonal:	Winter or Summer	With Attendant:	
Denied:			
Incomplete:			
Approved by:	Date:	Letter Code:	
Reviewed by:	Date:		
Client Identification (CID) #			
Notes/Summary:			

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Section A -	Applicant information ((please print clearly)
☐ New Ap	plicant	Existing Client (CID #)
1. Name:		
	First	Last
2. Address:		
	Street	Apt #
	City	Postal Code
3. Date of Bi	rth:/_	/ (Month/Day/Year)
4 Tolophon	··	Mobile Phone:
4. Telephone	7	Wobile Fliotie
	of an unexpected servicento to be contacted: Telep	e delay (30 minutes past the pick-up window) please indicate whone or Mobile Phone
		ion for upcoming trips. <u>If</u> you wish to receive notification If no selection is provided no notification will be sent.
Day before	(Between 5pm and 8pm)	
Same Day N	lotification (30 minutes I	before your scheduled pick-up time)
Both notific	ations	
Notification s	sent to: Telephone	or Mobile (No long distance numbers please)
5. Email:		
Would you li	ke to receive your corres	pondence by Email? Yes No No
		ss the application, contact (ex. guardian, family)
		Email:
		r Specialized Transit by describing how your disability prevents? The more information you provide assists us in determining

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Section A - Continued		
Please check ✓ the item(s) you will use when you travel:		
Manual Wheelchair Scooter Crutches Service Animal		
Powered Wheelchair Walker Oxygen Other		
* Clients who use a scooter must transfer to a seat. Operators do not push/pull mobility devices.		
If your mobility needs change, please inform us so we may update your profile.		
Our lifts and ramps can accommodate a wheelchair or a scooter that are no larger than 42" in length and 30" in width. For our lift equipped vehicles the combined weight of a wheelchair and passenger must not exceed 600 lbs.; for our ramp equipped vehicles the combined weight of a wheelchair and passenger must not exceed 800 lbs. All mobility aids must be kept clean, in good repair (tires, brakes, footrests, lap belts etc.) and able to be properly secured or they cannot be accommodated. Exemptions for seatbelt use, footrests, etc. can be granted when supported by medical documentation; please contact Transit Department (see page 1).		
Combined weight of wheelchair and passenger: Less than 600lbs more than 600lbs		
Width of wheelchair/scooter: Length of wheelchair/scooter:		
I hereby apply to use the Barrie Specialized Transit Service and certify that I am unable to use conventional public transit because of my disability and I hereby authorize the Corporation of the City of Barrie to consult with my Health Care Professional and emergency contact regarding the subject application. Signature of Applicant, Power of Attorney or Guardian:		
Date:		
By accepting to become a Specialized Transit registered client, the registrant/POA/Guardian is agreeing to all the terms and policies of the use of the service.		
Once registered, if a client does not use Specialized Transit during a consecutive 2 year period, they will be deemed inactive and will have to re-apply for the service.		

Personal information collected in this application is pursuant to the Municipal Act, S.O. 2001 and the Accessibility for Ontarians with Disabilities Act (AODA) O. Reg. 191/11 and will be used for the purpose of this application in accordance with the Municipal Freedom of Information and Protection of Privacy Act R.S.O. 1990 C.M.56. Questions regarding the collection of this information should be directed to the Corporation of the City of Barrie, Service Barrie, Attention: Transit Department, 70 Collier Street, 1st Floor Barrie ON., L4M 4T5, 705-726-4242 or Service.Barrie@barrie.ca.

Any fees charged by your Healthcare Professional for completion of the forms are the responsibility

of the Applicant, POA or Guardian

Name of Applicant: Page 5 of 6 Section B – To Be Completed by your Treating Registered Health Care Professional under the Ontario Regulated Health Professions Act, 1991.			
Certification Process: You may be contacted if any questions remain. The application must be filled out completely in order to be processed.			
Eligibility Criteria: Eligibility is considered on a case-by-case basis for persons unable to use Conventional Transit due to a disability.			
1. Applicants must have at least one of the following physical or functional limitations: please check all that apply.			
Cognitive: Applicants with cognitive disabilities which impact functional or physical ability to use conventional transit, including: emotional disabilities, brain injury, intellectual or learning disabilities; applicants attend day programs			
Physical: Applicants are unable to walk a distance of 600 feet.			
Sensory: Applicants experiencing sensory motor area conditions, such as Parkinson's disease, which impact physical ability to use conventional public transit			
Visual: Applicants who are legally blind and have undergone travel training through an approved agency such as the Canadian National Institute for the Blind (CNIB) and are still unable to use conventional public transit, or individuals applicants who have been deemed unsuitable for travel training. Applicant must provide supporting document from CNIB.			
2. Please answer yes or no and <u>please answer all questions</u> "a" through "j" to enable us to process the application promptly. Please base your evaluation solely on the applicant's ability or inability to use Conventional (regular) Accessible public transit service: all conventional transit buses are equipped with ramps, audio and visual next stop announcements, hand rails, priority and courtesy seating.			
a) Does the applicant's disability <u>prevent</u> (not make difficult) them from using			
Conventional (regular) Accessible Transit safely and independently? Yes No			
Is the applicant able to?			
b) Travel to a bus stop safely and independently?			
c) Get on/off Barrie Transit's Conventional accessible buses unaided?			
(all vehicles have a ramp, no stairs and handrails for accessibility.)			
d) Navigate a transit system using MyRide (transit technology), destination and			
number signs, audio announcements, and complete transfers?			
e) Present a fare, take a transfer and/or tap a pass upon boarding? Yes No			
f) Communicate with the Operator should they need assistance? Yes No			
g) Safely remain unattended on the Specialized Bus?			
h) Maneuver their mobility aid and/or assistive device to travel to and from			
the vehicle independently and while at their destination?			
i) Independently able to recognize their destination and leave the vehicle safely?			
j) Is applicant at risk of falls or has balance/gait concerns?			

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Section B – Continued

Specialized Transit Operators are not personal Attendants – if an applicant requires extra support getting on and off of a bus, they must provide their own attendant.

- 3. Attendant Requirement please assess applicant and select a) OR b) below
 - Please consider that Specialized Transit Operators (drivers) do not act as Attendants. Operators do not push or pull wheelchairs. Operators provide light assistance such as walking beside a client to and from a bus and to the closest accessible exterior door.
 - Applicants unable to present a fare upon boarding, communicate with the Operator, safely remain unattended on the bus, maneuver their mobility aid, recognize their destination, and are at risk of falls as stated in questions "e" through "j" should travel with a mandatory Attendant. Registered clients cannot be Attendants. Clients must provide their own Attendants, and Attendants must be present on all trips and ride bus with the client. The Attendant rides free as they ensure the safety and well-being of the applicant.
 - Applicants who attend a day program or work placement and require supervision at the point

of departure and arrival but are able to travel safely on the bus alone may have a Hand-to- Hand Attendant. The Hand-to Hand Attendant must be present to assist clients with all boarding and deboarding at the point of departure and arrival, they do not ride the bus.
a) Does this applicant require an Attendant while traveling?
OR b) Does this applicant require a Hand-to-Hand Attendant?
4. <u>Categories of Eligibility</u> : Based on the applicant's disability, how long will Specialized Transit's door to door service be required? (Please check ✓ one)
a) Unconditional/Permanent disability with no expectation of improvement
 For example: the applicant has a permanent disability that prevents them from boarding, travelling on and deboarding conventional transit safely
b) Temporarily up to 1 year or Expected duration/(Month/Day/Year)
 For example: the applicant suffered a stroke, a surgery, an injury and requires Temporary Eligibility due to their temporary disability while they recover as they are unable to access conventional transit
c) Conditional/Seasonal/Barrier: Winter – October to April Summer - May to September Barrier (inaccessible location): Please explain
 For example the applicant is not able to access a bus stop in winter as a result of a vision impairment due to snow.
Health Care Professional Application Certification:
Name & Official Capacity of Health Care Professional:
Telephone Number: Fax Number: Address:
In accordance with the eligibility criteria on page 1, I hereby certify that the information within this document is true.
Health Care Professional's Signature: Date:
Stamp, License or Certification #