

# WHEELS Application Form

The Accessible WHEELS Services ("WHEELS") transit system is a door-to-door shared ride accessible public transit service intended for persons unable to use Cobourg Transit's accessible fixed-route system due to a disability.

WHEELS is intended for those persons who, due to a function limitation, cannot:

- Board,
- Disembark,
- Ride, or
- Travel to and/or from a fixed route accessible Cobourg Transit bus.

If you have any questions or need assistance, please contact WHEELS at:

COBOURG TRANSIT
740 Division Street, Building 7
Cobourg, Ontario K9A2M2
Phone: 905 372 4555

Fax: 905 372 0009 Email: transit@cobourg.ca

# How to Apply for WHEELS Service

- 1. **Part A** of the application must be read and each page initialed by the Applicant. By initialing the bottom of each page you acknowledge that you have read and understood the requirements outlined.
- 2. **Part B** must be completed by the Applicant or designate and contains questions about your everyday mobility and ability to use Cobourg Transit's accessible fixed-route transit services.
- 3. **Part C** must be completed by your registered health care professional. The health care professional completing the application must have the appropriate knowledge, skill, and evaluate the specific abilities of the Applicant. The Town reserves the right to contact the health care professional for clarification purpose.
  - a. If there is a fee associated with receiving the completed form, please contact us about reimbursement for a successful application.
- 4. Return the completed application (Parts A, B, and C) to Cobourg Transit.
- 5. WHEELS will notify you of your eligibility within fourteen (14) business days of submitting your application.
  - a. If we require additional information, you may be requested to come in for an interview to provide us with more information about your disability and how it affects your use of Cobourg Transit's accessible fixed-route transit services.

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b. If you have not been notified within fourteen (14) business days of submitting your application, please contact us by phone, email, or in person.

**Note**: All information on this application form will be kept confidential and will be used for the purposes of determining eligibility for the WHEELS service only. Personal information contained in this form is collected pursuant to the "Municipal Transit Manual for Specialized Services" issued by the Ministry of Transportation and will only be used for the purpose of processing the application. All personal information is protected under the Municipal Freedom of Information and Protection Act, 1989.

Failure to completely fill out the application will delay the application process. All three (3) parts (Parts A, B, and C) need to be completed in full for your application to be considered.

#### Part A

## Introduction

This guide provides you with what you will need to know about WHEELS Specialized Transit service.

#### The WHEELS Service is:

- A scheduled pre-booked bus, shared ride, origin-to-destination service,
- A service intended for people who, because of their disability, cannot ride the regular, accessible fixed-route service,
- Only for those riders who are travelling within the town limits of Cobourg, and
- Suitable for customers using a wheelchair, scooter, cane, walker, and other types of assistive devices for mobility.

#### The WHEELS Service is not:

- A taxi service.
- A medical transportation service,
- Meant to replace Cobourg Transit's regular, accessible fixed-route service when it is not operating or not convenient, or
- A service for seniors without a disability.

#### Shared Ride means:

- Other riders may be on board during the trip to your destination, and/or
- Your route of travel may be altered so another rider(s) can be accommodated, and/or
- The vehicle may stop and pick up other rider(s) as it travels to your destination in order to maximize the transportation needs of all WHEELS members.

For this reason, travel times may be similar to the times of the accessible fixed-route Conventional Transit system in Cobourg.

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## Categories of Eligibility

There are three (3) categories of eligibility for which the Applicant can apply for which include:

- 1. **Unconditional**: A Person with a Disability that prevents them from using the accessible conventional transportation services,
- 2. **Temporary**: A Person with a Disability that prevents them from using the accessible conventional transportation services on a temporary basis (ex. a person having knee replacement surgery),
- 3. **Conditional**: A Person with a Disability where environmental or physical barriers limit their abilities to consistently use conventional transportation services, such as persons with a visual disability, persons who use assistive devices for mobility, especially during the winter conditions, and/or Persons with Disabilities that may have periods when their condition worsens.

People who are permanently disabled and are eligible for WHEELS receive a permanent registration, with renewal every three (3) years.

Persons who may only need WHEELS during a period of rehabilitation may submit an application. If approved, they would be registered on a temporary basis for a specific period of time at the end of which their registration and eligibility will also end. An extension will be granted on a case-by-case basis pending a re-application.

## More Information about Eligibility

WHEELS Specialized Transit is intended for persons who, due to a functional limitation, would be physically unable to board a Conventional Transit vehicle, ride a conventional public transit bus without the ability to hold on for support, or travel a distance of 175 meters (approximately 575 feet or a city block) to reach a Conventional Transit stop.

Eligibility is not based on a particular disability, age, income, or lack of available public transit in an Applicant's area. Eligibility is not for those who are unwilling to use the accessible conventional fixed-route public transit system. Specialized Transit is not an attendant care service. Passengers whose medical conditions require specific transportation (i.e. extreme fragility requiring transportation below regular speeds or inability to remain on the vehicle for up to one hour or inability to maneuver their own mobility device) need to contact a non-emergency medical carrier for transportation.

If you are considering your eligibility for Specialized Transit, please note that the WHEELS service is limited in capacity and intended for those with the least amount of ability. Please consider that you may be able to use Cobourg Transit's conventional accessible fixed-route system. Cobourg Transit offers accessible buses on all conventional routes.

#### Accessible features include:

• Kneeling capability and ramp deployment,

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- Low-floors,
- On-board next stop announcement,
- Call/Display system,
- Hand rails, and
- Priority seating with space for wheelchairs.

In order to be eligible for WHEELS, all users must first submit an application form which will be reviewed by the Public Transit Administrator, in accordance with the approved Eligibility Criteria.

#### Using the WHEELS Service

If your application has been approved, you will be eligible to book trips on WHEELS.

Please refer to the Town of Cobourg WHEELS Service - Policies & Procedures (enclosed) for detailed information regarding hours of operation and how to book a ride on WHEELS.

#### Cost of the Service

Please refer to Appendix B of the Wheels Service – Policies & Procedures for a list of available rates.

#### **Rider Attendants**

A Personal Attendant ("PA") is a mandatory support person who is capable of providing the rider with care and assistance they require beyond what the driver is required to provide.

A rider will require a PA to accompany them on the bus under these conditions:

- If the passenger is unable to travel independently beyond the door of the pick-up or drop-off location
- If the passenger is unable to be left alone
- If the passenger requires supervision on board the vehicle during transport
- If there is a risk of the passenger leaving the vehicle while the driver is escorting other passengers to and from the vehicle
- If the medical professional has deemed on the application that the client requires an attendant

All PA's travel at no charge, but must board and disembark at the same location as the passenger, and travel with the passenger at all times. WHEELS drivers are not Personal Attendants. WHEELS passengers cannot be Personal Attendants for another WHEELS passenger.

A Hand-to-Hand Attendant is required for riders who need supervision at the point of departure and arrival but are able to travel safely on the bus alone. The Hand-to-Hand Attendant must be

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present to assist riders with all boarding and disembarking at the point of departure and arrival, they are not required to ride the bus.

A Hand-to-Hand Attendant is required under these conditions:

- If the passenger cannot maneuver his or her wheelchair on his or her own
- If the medical professional has deemed on the application that the client requires a Hand-to-Hand Attendant

The need for a PA or Hand-to-Hand Attendant must be identified on the application form. In the event that the WHEELS operator is not able to provide the required assistance to the rider or the rider's function changes enough to require an attendant, the Town reserves the right to request the rider to resubmit a new application with updated information. If a rider is identified as needing a PA to ride the vehicle and he/she is not accompanied by a PA upon arrival of the WHEELS vehicle, or the PA is not qualified (e.g. too young), then the driver will not be permitted to allow the rider to board the vehicle. The driver will immediately notify dispatch for instructions.

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

By initialling this page, you are confirming that you have read the Town of Cobourg WHEELS Policies and Procedures.

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# Part B: Applicant Information

Please type or print clearly.

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	ral Information Name:
2.	Address (Including Postal Code):
3.	Daytime Phone Number:
4.	Evening Phone Number:
5.	TTY/TDD Number (If applicable):
6.	Email (If applicable):
7.	Phone Number for Reminder Call:
8.	Date of Birth:
9.	Will you use any of the following when you ride WHEELS? (Check all that apply):
	<ul> <li>□ Manual Wheelchair</li> <li>□ Oxygen Bottle</li> <li>□ Walker</li> <li>□ Guide Dog</li> <li>□ White Cane</li> <li>□ Communication Board</li> <li>□ Powered Wheelchair</li> <li>□ Powered Scooter</li> <li>□ Hearing Aid</li> <li>□ Cane</li> <li>□ Prosthesis</li> <li>□ Crutches</li> <li>□ Other (Please specify):</li> </ul>

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10.	Do you have any health care needs that the transportation service provider should be made aware of? (Check all that apply):
	□ Seizures
	☐ Diabetes
	☐ Heart Condition
	☐ Dementia/Alzheimer
	<ul><li>☐ Respiratory</li><li>☐ Communicable Disease</li></ul>
	☐ Other (Please specify):
	□ Other (Please specify).
Trave	lling on the Transit System
	In order to travel unaccompanied on WHEELS, you must be able to check <b>all</b> of the
	following boxes:
	☐ I can recognize my destination and communicate to the vehicle operator (verbally
	or with an augmentative device, in writing or with an alternative method of
	communication) if I am about to be dropped off at the wrong location.
	$\square$ I can get help if I was dropped off at a wrong location. $\square$ I can be safely left unattended on the vehicle with other customers when the
	vehicle operator is away from the vehicle (i.e., I am not at risk of exiting the vehicle
	and wandering).
	$\Box$ I can maneuver my mobility device (if I currently have one) to travel to the bus, get
	on and off the vehicle, and into the building at destination.
must p	If any of the above boxes relating to independence were left unchecked, the customer provide their own Personal Attendant. The Personal Attendant must be capable of meeting stomer's care needs during travel and getting to and from destinations.
2.	Do you require an Attendant when you travel?
	□ Yes
	□ No
3.	Do you require a Hand to Hand Attendant when you travel?
	□ Yes
	□ No
4.	Please check <b>only one</b> of the following boxes regarding your ability to travel to a bus
	stop:
	☐ I can always get to and from a bus stop.
	r ·

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	☐ I can sometimes get to and from a bus stop.
Е	$\Box$ I can never get to and from a bus stop. I can get to and from a bus stop only if (Please check all the boxes that apply):
٦.	☐ I have an Attendant with me.
	☐ The distance travelled to/from the transit stop is less than 175 meters
	(approximately 575 feet or a city block).
	$\Box$ I am familiar with the area.
	☐ There are curb cuts along the route to the stop.
	☐ There is a sidewalk.
	☐ The ground is level or only slightly inclined.
	☐ The path is free of ice, snow, or debris.
6.	Please check <b>only one</b> of the following boxes regarding your ability to wait at bus stops:
	☐ I can generally wait outside at a bus stop.
	☐ I cannot wait outside at a bus stop.
	$\Box$ I can wait outside at a bus stop only if (check those that apply):
	☐ There is a bench.
	$\square$ There is a shelter.
	$\square$ The wait is no longer than a certain amount of time.
	☐ Other (Please specify):
Cobo	urg Accessible Conventional Transit System
1.	Regarding the use of Cobourg's accessible conventional fixed-route transit (Not the
	WHEELS service). Please check only one box:
	$\square$ I can independently recognize my destination and leave the vehicle.
	$\square$ I cannot independently recognize my destination and leave the vehicle.
	$\square$ I can recognize my destination and leave the vehicle only if (check those that
	apply):
	☐ I receive travel training (not provided by Town).
	☐ The stops are announced.
	☐ Other (Please specify)
2.	I can ride an accessible conventional fixed-route transit bus only if (check all that apply):
	☐ I have an Attendant with me.
	☐ I am familiar with the route.
	☐ Every bus on my route is accessible.
	☐ A seat is available.
	☐ I have received travel training (not provided by Town).
	☐ Other (Please specify):

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3.	Can you transfer to a car without assistance?
	☐ Yes ☐ No
1	☐ Sometimes  How does your disability affect your ability to use Cobourg's accessible conventional
4.	fixed-route transit system? Please provide any additional information that has not been
	included in the application.
	Answer:
In Cas	e of Emergency Contact Information
1.	Name:
2.	Phone Number:
3.	Relationship:
Signati	ure
I herek	by certify that to the best of my knowledge, the information given above is correct and I
author	ize the health care professional named in Part B to provide information to WHEELS. If
	LS receives new information regarding a change in my functional ability, my eligibility
status	may be reviewed and revised.
Signat	ure of Applicant:
Date:	
	are not the Applicant, but have completed this application on the Applicant's behalf, you rovide the following information:
•	Name:
•	Address:
•	Daytime Phone Number:
•	Relationship to the Applicant:

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I certify that to the best of my knowledge that the information provided above is correct.
Signature:
Date:

When Part A has been completed, take or mail Parts A and B to your health care professional. When Part C has also been completed, return Parts A, B, and C to:

COBOURG TRANSIT
740 Division Street, Building 7
Cobourg, Ontario K9A2M2
Fax: 905 372 0009

Email: <a href="mailto:transit@cobourg.ca">transit@cobourg.ca</a>

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Part C: To Be Completed by the Treating Registered Health Care Professional under the Ontario Regulated Health Professions Act, 1991.

**Certification Process**: You may be contacted by the Town 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 Accessible Transit due to a disability.

I have read PART A and PART B in its entirety.

INITIALS:
I agree with the information provided in PART B.
INITIALS:
If you do not agree with Part B, please explain:  Answer:
Functional Limitations  Applicants must have at least one of the following physical or functional limitations to be eligible for the WHEELS service:
☐ <b>Cognitive</b> : Applicants with cognitive disabilities which impact functional or physical ability to use Conventional Transit, including: emotional disabilities, brain injury, intellectual or learning disabilities, Applicant attend day programs.
☐ <b>Physical</b> : Applicants are unable to walk a distance of 175 meters (575 feet or a city block).
☐ <b>Sensory</b> : Applicants experiencing sensory motor area conditions, such as Parkinson's disease, which impact physical ability to use conventional public transit.
□ <b>Visual</b> : 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 Applicants who have been deemed unsuitable for travel training. Applicant must provide supporting document from CNIB.

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## **Functional Abilities**

Please answer yes or no to all questions "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 an accessible conventional fixed-route public transit service: all conventional transit buses are equipped with ramps, audio and visual next stop announcements, hand rails, and priority and courtesy seating.

A.	Does the Applicant's disability prevent (not make difficult) them from using accessible conventional transit safely and independently?	
	☐ Yes	□ No
s the A	Applicant able to?	
В.	Travel up to 175 meters (approximately 57 independently?	75 feet or a city block) safely and
	☐ Yes	□ No
C.	Get on/off Cobourg Transit's Conventiona a ramp, and handrails for accessibility)	l accessible buses unaided? (All vehicles have
	☐ Yes	□ No
D.	Navigate a transit system using transit technology announcements, and complete transfers?	hnology, destination and number signs, audio
	☐ Yes	□No
E.	Present a fare or take a transfer upon boa	rding?
	☐ Yes	□No
F.	Communicate with the Driver should they	need assistance?
	☐ Yes	□ No
G.	Safely remain unattended on the bus?	
	☐ Yes	□ No
Н.	Maneuver their mobility aid and/or assisti independently and while at their destinati	
	☐ Yes	□ No
l.	Independently able to recognize their dest	tination and leave the vehicle safely?
	☐ Yes	□ No
J.	. Is the Applicant at risk of falls or has balance/gait concerns?	
	☐ Yes	□ No

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### **Attendants**

WHEELS Specialized Transit Drivers are not personal Attendants – if an Applicant requires extra support getting on and off a bus, they must provide their own Attendant.

- Drivers do not push or pull wheelchairs.
- Drivers 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 Driver, safely remain unattended on the bus, maneuver their mobility aid, recognize their destination, and are a great risk of falls must travel with a Personal Attendant.
- Registered clients cannot be Personal Attendants.
- Clients must provide their own Attendants and Attendants must be present on all trips and ride the 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.

Please assess Applicant and indicate if the Applicant requires a Personal Attendant or Hand-to-Hand Attendant.

A.	Does this Applicant require a Personal Attendant while traveling?	
	☐ Yes	□ No
В.	Does this Applicant require a Hand-to-	Hand Attendant?
	☐ Yes	□ No

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# Categories of Eligibility

Based on the Applicant's disability, how long will Specialized Transit's origin to destination service be required? Please check only one.
<ul> <li>Unconditional/Permanent disability with no expectation of improvement.</li> <li>For example: The Applicant has a permanent disability that prevents them from boarding/deboarding and/or travelling on the Accessible Conventional Transit safely.</li> </ul>
<ul> <li>Temporarily up to one year or an expected short term duration.</li> <li>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     </li> </ul>
☐ Conditional/Seasonal Barrier which is Winter (October to April) or Summer (May to
<ul> <li>For example: The Applicant is not able to access a bus stop in winter as a result of a vision impairment due to snow.</li> </ul>
Please Include details of Conditional/Seasonal Barrier:
Health Care Professional Application Certification  Name and Official Capacity of Health Care Professional:
Telephone Number:
Email:
Address:
In accordance with the eligibility criteria on Page 1, I hereby certify that the information withir this document is true.
Signature:
Date:

Thank you for your assistance!

Stamp, License, or Certification Number:

Please return this application to the person seeking WHEELS certification, or with the person's permission, forward it directly to Cobourg Transit.

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