

Rider/Passenger Survey

1. Gender of riders:
 _____ # male riders _____ # female riders

2. Vehicle(s) preferred by riders: (check only one)
 _____ automobile _____ bus
 _____ van _____ other

3. Drivers preferred by riders: (check only one)
 _____ paid _____ volunteer
 _____ doesn't matter _____ other

4. Primary concerns expressed by riders: (check only two)
 _____ on time service _____ cost of rides
 _____ who will be the driver _____ inability to drive
 _____ getting to far-away places _____ need for additional assistance
 _____ other (please specify) _____

5. Types of assistance needed by riders: (check all that apply)
 _____ door-to-door (drop off and pick up assistance)
 _____ hand-to-hand (help in and out of the vehicle)
 _____ door-through-door (walk in the house assistance)
 _____ escort (staying with the rider during an appointment)
 _____ other (please specify) _____
 _____ none

6. Most frequent types of trips taken by riders: (please indicate 1, 2, 3 with 1 as most frequent)
 _____ medical (non-emergency) _____ work related
 _____ shopping _____ religious activities
 _____ supportive services _____ volunteer activities
 _____ nutrition services _____ recreational activities
 _____ personal activities _____ other, please specify: _____

7. Average number of trips taken by individual riders: (check only one)
 _____ less than 1 trip a week _____ 1 to 3 trips a week
 _____ 4 to 6 trips a week _____ 6 – 10 trips a week
 _____ more than 10 trips a week _____ other: _____

- 8.** Average length of participation for riders: (check only one)
 _____ less than 1 year _____ 1 – 3 years
 _____ 4 to 6 years _____ 7 – 10 years _____ more than 10 years
- 9.** Top two reasons older adults become riders in your program: (Please identify #1 and #2)
 _____ had to give up driving
 _____ death of a spouse
 _____ could no longer use other options
 _____ children could not provide rides
 _____ wanted to get to quality of life activities
 _____ need of way to go shopping
 _____ don't know
 _____ other (please specify) _____
- 10.** What do you consider your program's best practice in providing "volunteer driver services?"»
- 11.** What is your major recommendation for "meeting the needs" of your riders?
- 12.** In your transportation program.... (please circle yes or no)
- | | | |
|---|-----|----|
| Do riders complete an application form? | yes | no |
| Do riders need to be evaluated for eligibility? | yes | no |
| Do riders have a formal feedback check? | yes | no |
| Do riders get to choose their own driver? | yes | no |
| Do riders need to make advance reservations? | yes | no |
| Do riders have an option of not paying for rides? | yes | no |
| Do riders participate in planning for services? | yes | no |
| Do riders receive "rider training"? | yes | no |
| Do riders need to be recruited? | yes | no |
| Do riders have a choice of vehicle? | yes | no |

13. What are your top two management challenges related to providing volunteer driver services: (check only two)

- | | |
|--|--|
| <input type="checkbox"/> financial | <input type="checkbox"/> insurance |
| <input type="checkbox"/> recruitment | <input type="checkbox"/> vehicles |
| <input type="checkbox"/> communication | <input type="checkbox"/> security |
| <input type="checkbox"/> scheduling | <input type="checkbox"/> other (please specify): _____ |

14. What (if any) technology have you embraced to improve transportation services for your riders?

15. Review the following 20 words/phrases. Then, please indicate the 4 words/phrases (by numbering 1 to 4) that best describe the relationship between riders and drivers in your program.

- | | | |
|---|--|---|
| <input type="checkbox"/> social | <input type="checkbox"/> expensive | <input type="checkbox"/> committed |
| <input type="checkbox"/> formal | <input type="checkbox"/> disappointing | <input type="checkbox"/> complex |
| <input type="checkbox"/> supportive | <input type="checkbox"/> purposeful | <input type="checkbox"/> time consuming |
| <input type="checkbox"/> interdependent | <input type="checkbox"/> friendly | <input type="checkbox"/> unbalanced |
| <input type="checkbox"/> rewarding | <input type="checkbox"/> problematic | <input type="checkbox"/> stressful |
| <input type="checkbox"/> burdensome | <input type="checkbox"/> fun | <input type="checkbox"/> enriching |
| <input type="checkbox"/> family-like | <input type="checkbox"/> stressful | |

16. Please check topics of informational or resource materials that you believe would be of use in your volunteer driver program.

- older adult rider tip book
- volunteer driver tip book
- transition from driving tip book
- driver sensitivity information manual
- risk management tip book
- resource booklet on funding sources
- liability and insurance information
- other (please specify): _____

17. What do you consider your “keys to success” in delivering volunteer driver services to your passengers?

18. Add your questions if desired.