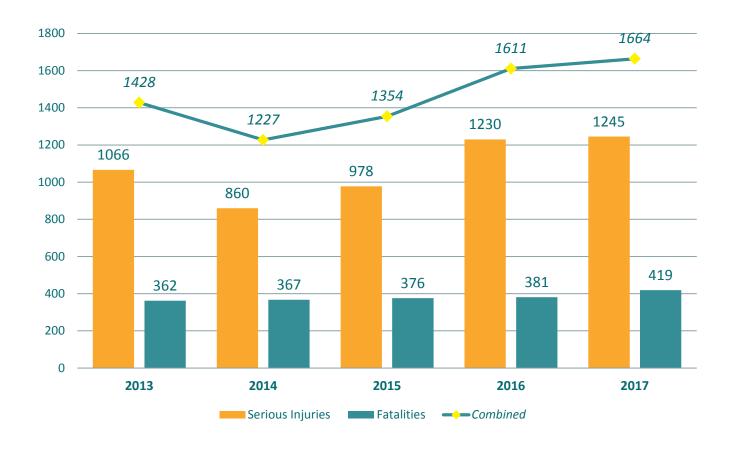


CRASH TREND

Total KSI - Regional Trend (by person), 2013-2017





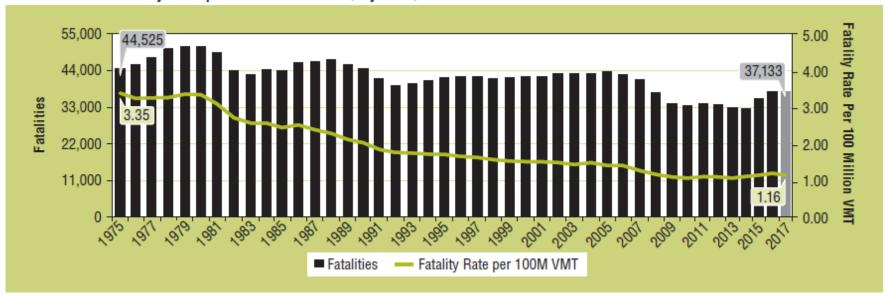


NHTSA: U.S. Fatal Motor Vehicle Crashes, 2017

EMPHASIS AREA

- 37,133 people killed in crashes:
 - 1.8-percent decrease, from 37,806 in 2016
 - vehicle miles traveled (VMT) increased by 1.2 percent from 2016 to 2017

Fatalities and Fatality Rate per 100 Million VMT, by Year, 1975-2017



Sources: FARS 1975-2016 Final File, 2017 ARF; Vehicle Miles Traveled (VMT): FHWA.





STRATEGIES



NHTSA: Facts About Older Drivers, 2016

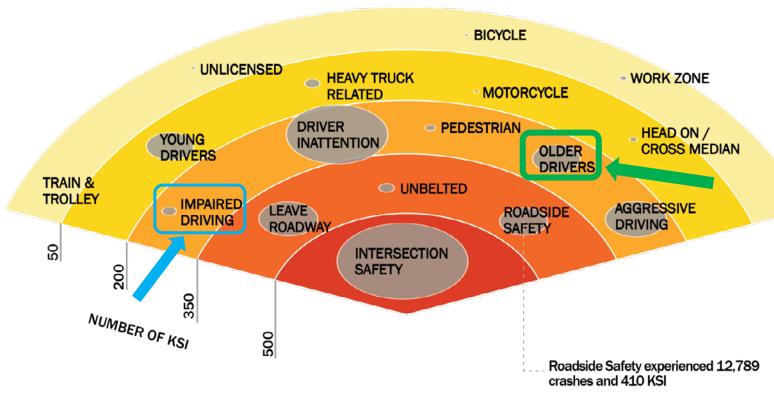
- 49.2M
 - People 65 and older in the U.S
- 30%
 - Increase in population of people 65 and older
- 6,764
 - People 65 and older killed in crashes (18% of total)





KSI & Total Crashes by Emphasis Area

EMPHASIS AREA



= TOTAL CRASHES (size proportional to total number of crashes)

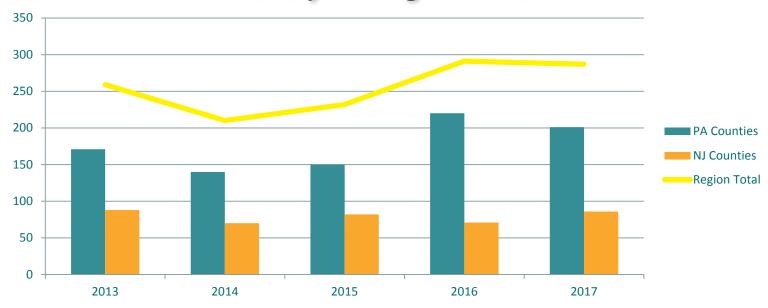




Older Drivers



Older Driver-Involved KSI 5-year Regional Trend

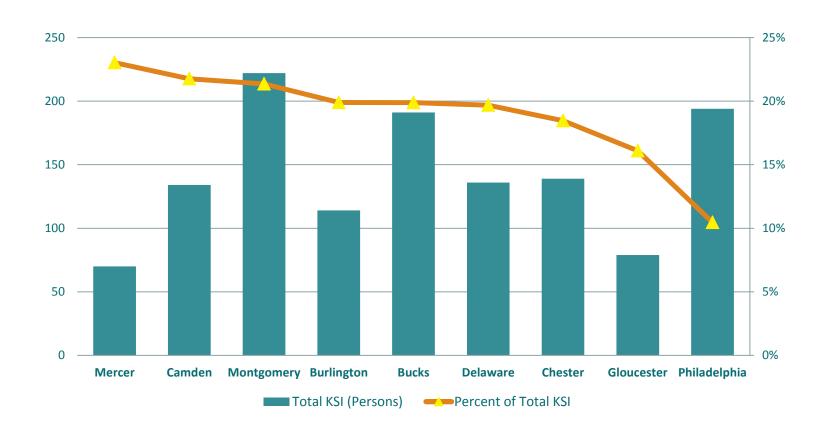






Older Driver-Involved KSI Compared to Total KSI by County, 2013-2015

EMPHASIS AREA

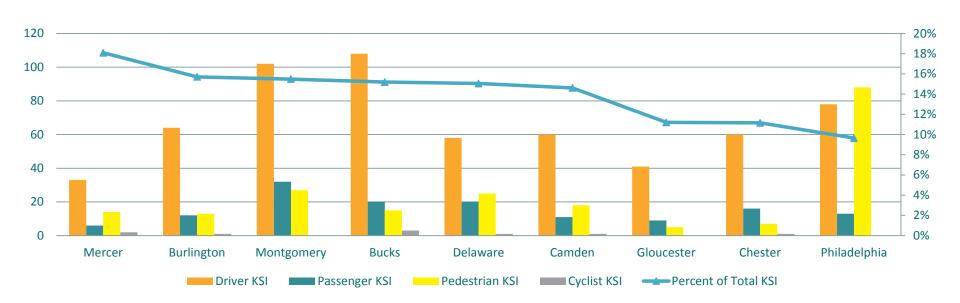






Senior KSI by Mode by County, 2013-2015

EMPHASIS AREA







Older Drivers

Coincidence Ratios by Emphasis Areas:



- Distracted driving crashes
- Aggressive driving crashes

Emphasis Area	Inter- section Safety	Lane Departure	Older Drivers	Young Drivers	Pedestrian & Bicyclist Safety	Impaired Driving	Distracted Driving	Aggressive Driving
Collision Type								
Intersection Safety	-	0.51	1.15	1.04	1.24	0.74	0.86	0.99
Work Zone	0.43	0.99	0.94	0.88	0.44	1.03	0.81	1.76
Lane Departure	0.51	11 8	0.62	1.01	0.18	2.22	0.89	1.05
Road User								
Older Drivers	1.15	0.62	1-2	0.64	0.62	0.44	1.09	1.20
Young Drivers	1.04	1.01	0.64		0.29	0.57	1.19	1.31
Truck-Related	0.71	0.79	0.92	0.54	0.37	0.48	1.01	1.32
Motorcycle	0.95	1.81	0.66	0.67	0.19	0.97	0.54	0.95
Train/Trolley	1.38	0.35	0.72	0.30	0.76	0.87	0.52	0.33
Pedestrian	1.20	0.20	0.62	0.30	17	0.87	0.41	0.20
Bicycle	1.36	0.14	0.60	0.26	277	0.51	0.47	0.24
Dangerous Behavior								
Impaired Driving	0.74	2.22	0.44	0.57	0.80	-	0.92	0.88
Unbelted	0.97	1.40	0.78	1.03	0.77	2.05	0.70	0.66
Distracted Driving	0.86	0.89	1.09	1.19	0.43	0.92		0.77
Aggressive Driving	0.99	1.05	1.20	1.31	0.21	0.88	0.77	







Priority Recommended Strategies

Safe Senior Mobility

- Communicate to the public about "transportation retirement" and the need for seniors, adult children, and caretakers to begin planning for a carless future for aging drivers. [Education]
- Promote use of best practices in senior-safe roadway design, like clear, concise messaging and highly legible design elements. [Engineering/Education]
- Explore PA and NJ driver's license retesting requirements that would inform a change to current policy, including practices from other states (such as Maryland's Silver Alert retesting requirement). [Education/Policy]







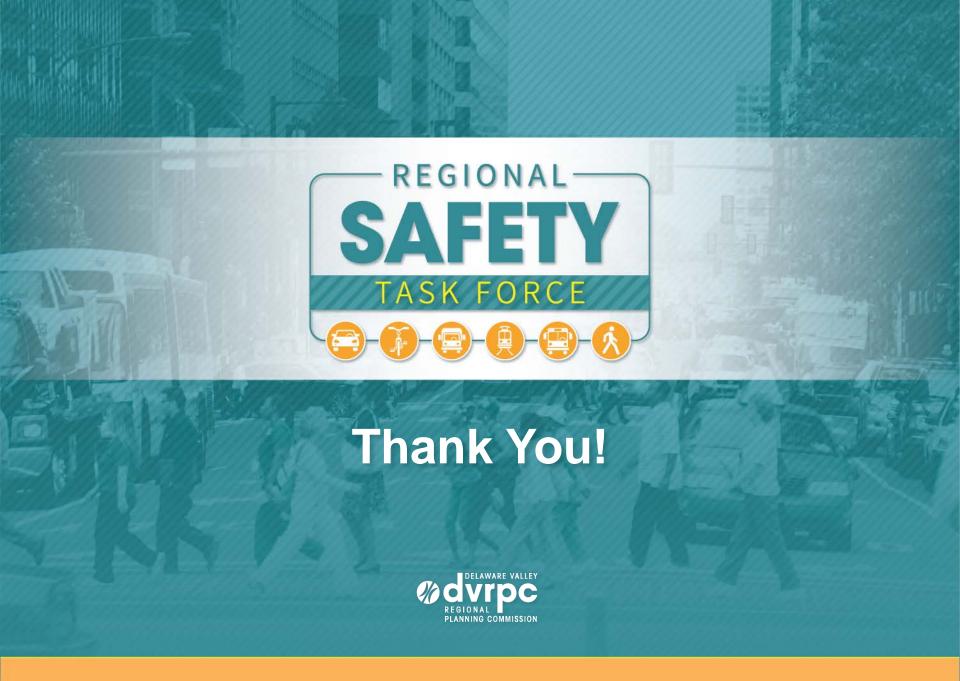
Speakers

Dr. Anne Mitchell
 Assistant Professor
 Jefferson University

Tim Evans Director of Research New Jersey Future







Safe Senior Mobility and Land Use

Tim Evans

New Jersey Future

DVRPC Regional Safety Task Force

December 13, 2018



About New Jersey Future

Founded in 1987, New Jersey Future is a nonprofit, nonpartisan organization that promotes sensible growth, redevelopment and infrastructure investments to foster vibrant cities and towns, protect natural lands and waterways, enhance transportation choices, provide access to safe, affordable and aging-friendly neighborhoods and fuel a strong economy. The organization does this through original research, innovative policy development, coalition-building, advocacy, and hands-on strategic assistance.



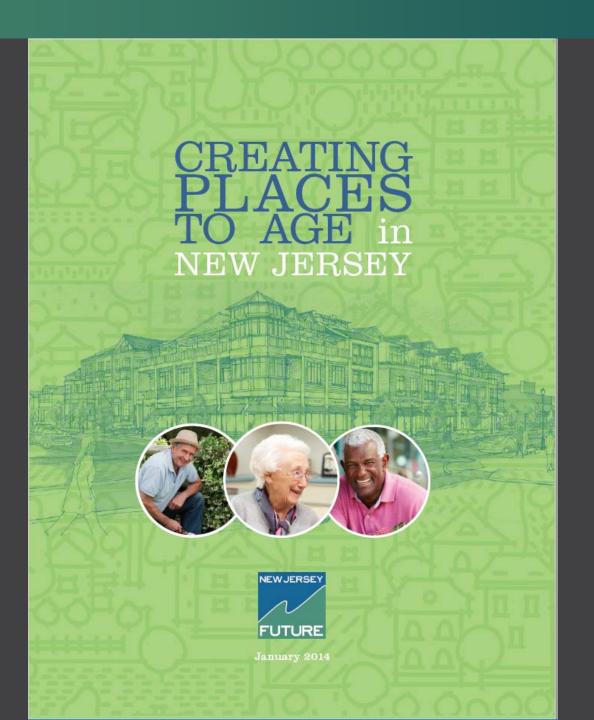


Promote responsible land-use policies:

- Revitalize cities
- Preserve open space
- Keep housing affordable
- Encourage transportation choices

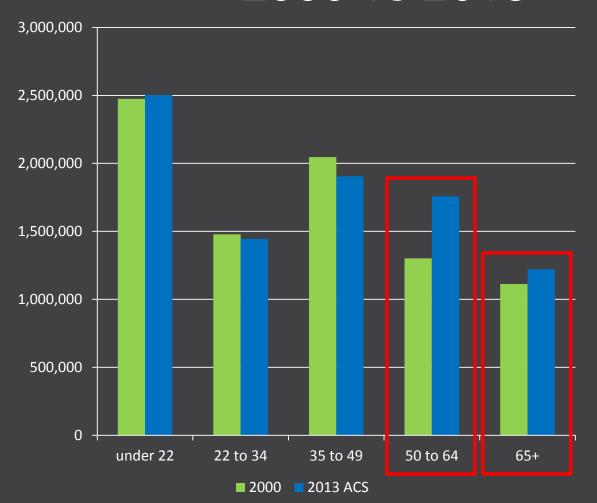
www.njfuture.org
@newjerseyfuture







Change in Population by Age Group, 2000 vs 2013



Bulk of the
Baby Boomers
hitting middle
age, older
Boomers now
retiring – will
they be able
to "age in
place"?



Aging and Land Use

From a land-use perspective, has New Jersey built the kinds of places – and built enough of them – that provide what older adults are likely to be seeking as they age?*



^{*} and, specifically, as they no longer have the desire or ability to drive everywhere, or on certain types of roads, or at certain times of day

- 1. Density are destinations close together?
- 2. "Downtown" (mix of uses) are different *kinds* of destinations close together?
- 3. Walkability is the street network well-connected?
- 4. Access to public transportation



Density – are destinations close together?

as measured by "net activity density" = (population + employment) / developed acres

Higher density is better for older people because it puts destinations closer together, an important consideration for people with constraints on their mobility.



"Downtown" or mixed-use center – are different *kinds* of destinations close together?

as indicated by:

- designated center in the State Plan or Pinelands (or Highlands)
- SID, BID, or "Main Street" organization
- Main Street New Jersey list

Town centers with homes, stores, offices, and civic buildings in close proximity allow people to streamline their tripmaking by minimizing the distances among different types of destinations. A "town center" environment also increases opportunities to interact with other people!



Walkability – is the street network well-connected?

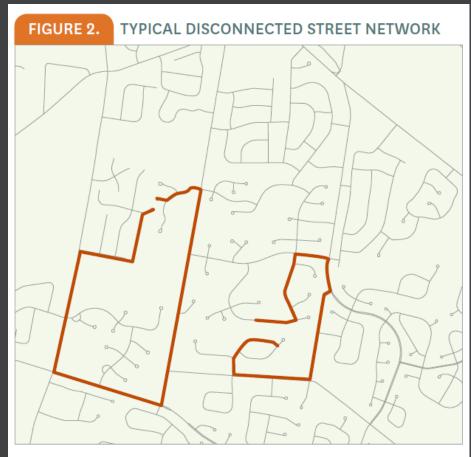
as measured by **local road density**= route-miles of local road / square mile

Without connectivity, high density and mixed use can end up meaning that you can see your destination out your window but have to walk or drive a mile to get to it.

* Median block size might be an even better measure of connectivity



It's close, but can you walk there?

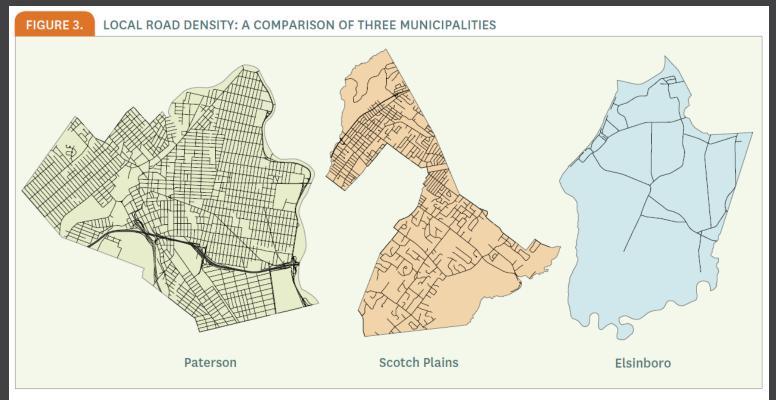


So close, and yet so far: a lack of street network connectivity can mean a neighbor's house is a mile away by car – or on foot.

- Street network connectivity is an important measure of pedestrian-friendliness shorter and more numerous paths between destinations
- A well-connected grid of local streets [and small blocks] is also safer for older people to drive on slower speeds, lower traffic volumes, less complex intersections



Street network connectivity



Paterson, Scotch Plains, and Elsinboro Township are all roughly the same size — about 5,000 acres — but they have very different road densities. Paterson's street network has 21.7 route-miles of local road per square mile, creating a very high degree of connectivity and walkability. Scotch Plains is a typical older suburb, with 9.7 route-miles per square mile. And Elsinboro Township in Salem County, at 2.1 route-miles per square mile, is illustrative of what the road networks look like in rural and largely undeveloped areas.



Access to public transportation

as measured by local bus stops per square mile [bus more important for local trips, rail for regional trips]

Public transit access is presumed to be a plus for older people, because it offers them access to destinations to which they may not feel comfortable driving.

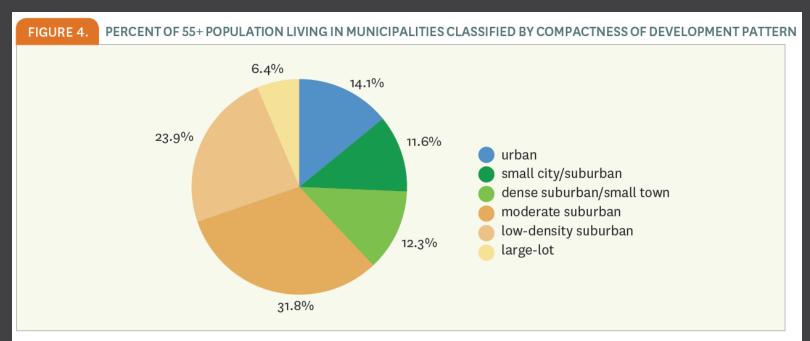


- 1. Density are destinations close together?
- 2. "Downtown" (mix of uses) are different *kinds* of destinations close together?
- 3. Walkability is the street network well-connected?
- 4. Access to public transportation

The land-use characteristics that make a place good for older people are the same "smart-growth" features that make it easier for *everybody* to get around.



Where Do Older New Jerseyans Live vs. Density of Destinations



Three in ten New Jersey residents aged 55 or older live in municipalities with net activity densities low enough (low-density suburban or large-lot) that a car is a virtual necessity for getting around.



Good news: 31.3 percent of all New Jersey residents aged 55 or older live in one of the 107 municipalities that score well on all four aging-friendliness development metrics.

Bad news: 13.1 percent – almost 300,000 people – live in one of the 109 municipalities that score poorly on all four.

one dot = 500 people aged 55+

- municipalities scoring well on all 4 metrics
- municipalities scoring poorly on all 4 metrics



More bad news:

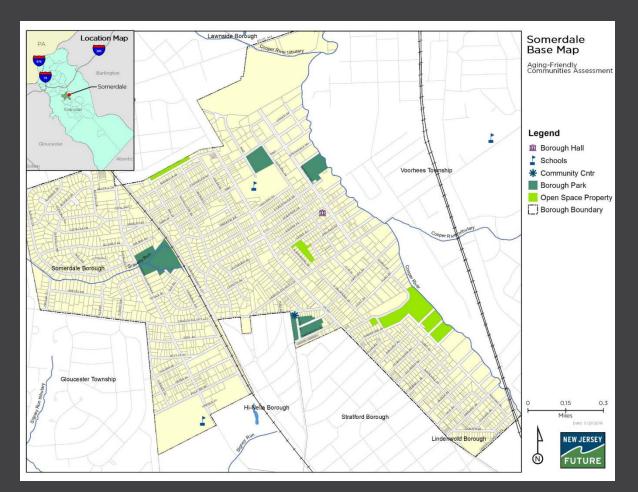
Aging-friendly, but...aging-ready?

It's more than just development patterns:

- Housing types
- Housing unit size
- Housing affordability
- Pedestrian safety (sidewalks, crosswalks, lane widths, traffic light timing, vehicle speeds....)



municipality name	county	median block size (acres)	rank (of 565)	local road route-miles per square mile	rank (of 565)
Teaneck township	Bergen	4.432	214	19.037	60
Somerdale borough	Camden	4.140	177	16.230	104
Westwood borough	Bergen	4.150	179	15.851	118







Cedar Lane in Teaneck



Westwood Ave in Westwood



White Horse Pike in Somerdale

These three places all score well (and similarly to each other) on metrics of street network connectivity!



Aging-Friendliness: Recommendations

In places that score poorly (post-WWII car-oriented suburbia):

- Create brand-new "downtowns" (e.g. Robbinsville Town Center, Plainsboro)
- Retrofit existing single-use development to make more mixed-use and pedestrian-friendly (e.g. Voorhees/Echelon Mall, Somerdale)

In places that already have "good bones" (cities, but also many older suburbs):

- Add to and diversify the housing stock
- Improve the pedestrian environment





Thank you!

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Senior Mobility



Anne Bradley Mitchell PhD, ANP-BC Jefferson University College of Nursing

Normal physiologic changes of aging

- Decreased Accommodation Impaired night vision
- Decreased hearing- high pitch sounds
- Decreased tendon reflexes
- Decreased joint mobility
- Slowed reaction time
- Slowed processing new information





Aging Changes: Pathology

Common Chronic Conditions for Adults 65+



80% have have at least 1 chronic condition



68% have 2 or more chronic conditions



Hypertension (High Blood Pressure) 58%



High Cholesterol 47%



Arthritis 31%



Ischemic Heart Disease (or Coronary Heart Disease)



Diabetes 27%

29%



Chronic Kidney Disease 18%



Heart Failure 14%



Depression 14%



and Dementia

Alzheimer's Disease 11%



Chronic Obstructive **Pulmonary Disease**

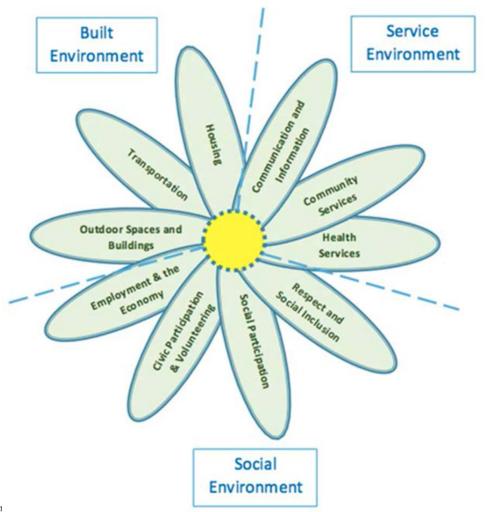
11%

Source: Centers for Medicare & Medicaid Services. Chronic Conditions Prevalence State/County Table: All Fee-for-Service Beneficiaries. 2015



ncoa.org
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Age Friendly Tenets





Philadelphia University + Thomas Jefferson University

Age Friendly Movement

- Universal design can create inclusive environments, products, and services that are: safer, accessible, attractive, and desirable for everyone; easily repurposed; capable of reducing falls and related health-expenses.
- Walkable communities reduce the risk of chronic disease and improve public health and quality of life.
- AARP Foundation Initiative: Decreased Social Isolation



Driving: NHTSA Data(2015)

Older adults account for:

- 16% of all licensed drivers
- 18% of all traffic fatalities

Involved in Traffic:

Accidents:

PA: 16.7%

NJ: 16.1%

Del: 9.5%

Account for Traffic

Fatalities:

PA: 20.2%

NJ: 22.8%

Del: 14.3%

Only 8% of older adults have elevated BAC





Practice

Advocacy & Policy

Education & Careers

Conferences & Events

Publications & News

About Occupational Therapy

HOME ▶ CONFERENCES & EVENTS ▶ OLDER DRIVER SAFETY AWARENESS WEEK







A JOIN



2019 AOTA Annual Conference & Expo

Calendar

Member Appreciation Events

Call for Papers

School Backpack Awareness Day

Hill Day

Children & Youth Specialty Conference

2018 AOTA Education Summit

AOTA/NBCOT National Student Conclave

Adult Rehab Specialty Conference

Older Driver Safety Awareness Week

Monday: Anticipating Changes That Can Affect Driving

Tuesday: Family Conversations

Wednesday: Screening and Evaluations

Thursday: Interventions That Can **Empower Drivers and Families**

Friday: Staying Engaged in the Community With or Without a Car

Occupational Therapy Month

Download Your CE Transcript

Past Conferences

Exhibitors and Sponsors

Older Driver Safety Awareness Week: Dec. 3-7, 2018



It is a fact of life that people grow older every day. With increasing age come changes in physical, mental and sensory abilities that can challenge a person's continued ability to drive safely. But there are a variety of safe travel options for people of all ages. The real need is a broader awareness of the solutions, rather than a narrow focus on the problem.

The American Occupational Therapy Association (AOTA) believes that occupational therapy practitioners have the skills to evaluate a person's overall ability to operate a vehicle safely and provide rehabilitation, if necessary. Many are specially trained in the full scope of driving rehabilitation. Occupational therapy practitioners work with older adults as well as their families and caregivers, offering individualized assessment. They can identify individuals' unique challenges and find strategies that will help them live life to its fullest by keeping them active, healthy, and safe in their communities.

AOTA's Older Driver Safety Awareness Week, December 3-7, 2018, aims to promote understanding of the importance of mobility and transportation to ensuring older adults remain active in the community-shopping, working or volunteering-with the confidence that transportation will not be the barrier to strand them at home.

Throughout the week, AOTA will bring attention to a different aspect of older driver safety. Occupational therapy practitioners are encouraged to share their experiences during Older Driver Safety Awareness Week on the Driving/Driver Rehabilitation forum in OT Connections.



Older Driver Safety Awareness Week Chats

Chats consist of three 20minute discussions on topics relevant to occupational therapy practitioners addressing the driving and community mobility needs of aging drivers.

Presenters and Titles:

- Dr. Anne Dickerson, PhD. OTR/L. SCDCM, FAOTA "What The Ageing of America Means for my Practice, and How Transportation Planning Can Start With OT!"
- · Susan Touchinsky, OTR/L, SCDCM, CDRS "CarFit: Know What to Say, How to Say it, and How Person-Vehicle Fit Contributes to the Occupational Therapy-Generated Transportation Plan"
- · Jenny Nordine, OTR/L, CDRS "I'm Driving Because of my Comprehensive Driving Evaluation: Tips for Occupational Therapy Practitioners to Consider Driving Evaluation as a Constructive Part of the Transportation Plan*

Get Contact Hours!

Download the attendance verification letter now.



Families and Older Drivers

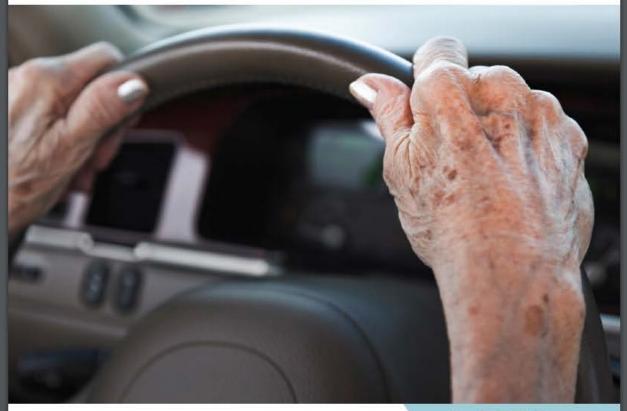
- Families must assess many issues regarding older drivers: personality, driving record, availability of transportation resources, geographic proximity, long-term family relationships.
- How to prepare:
 - Get the facts
- Observe the driver
- Discuss concerns with a doctor
- Investigate alternatives
- Be supportive



https://www.thehartford.com/sites/thehartford/files/we-need-to-talk-2012.pdf



Clinician's Guide to Assessing and Counseling Older Drivers



3rd Edition





West Philadelphia Older Drivers

- Half of the sample over age 85 were still driving.
- Clinicians need to be aware of the high numbers of older adults driving in urban areas.
- Assess for potential clinical symptomology that could potentially impede driving ability.
- Urban planners and policy makers need to modify built environment features to accommodate older adult drivers such as adequate signage and increased lighting.

Older Adult Focus Groups

- Issues with distracted drivers
- Want a Traffic Safety Month
- Retesting of all drivers at five year intervals
- Speed of younger drivers
- NTHSA Data (2015)
- 27% of pedestrian vs. MV are women >age 65
- 68% of older adult pedestrian deaths occur at nonintersection



Emerging Technologies

- •Interest in the technology is increasing among older adults, According to Veciana-Suarez (2016), 25% of Americans aged 55+ are providers in the sharing economy; Uber reported 1 in 4 drivers are aged 50+.
- •In a 2015 study (Olshevski), 70% Boomers said they would be willing to test drive an autonomous vehicle, 31% noted a willingness to purchase a self-driving car, and 38% said that if their health prevented them from driving they would consider purchasing an autonomous vehicle.
- 3seconds.org



NEIGHBORHOOD FEATURES PLAY A ROLE IN

Healthy Aging in Place



http://www.prb.org/Multimedia/Infographics/2017/neighborhood-features-aging



Sidewalks, crosswalks, intersections, few dead-end streets or cul-de-sacs.

Potential Benefits:

- Lower obesity rates.¹
- Better self-rated health.²
- Lower rates of self-reported disabilities.³



Extensive, street-level public transportation and well-maintained streets and sidewalks.

Potential Benefits:

- More walking outdoors.⁴
- Fewer mobility problems among those with difficulty walking.⁵



Diverse mix of residences and businesses in close proximity.

Potential Benefits:

- Less mobility disability.⁶
- More walking outside by those with disabilities.⁷
- Longer walks by older men.⁸
- Lower heart disease risk.9

http://www.prb.org/Multimedia/Infographics/2017/neighborhood-features-aging



Safe

Residents consider their neighborhoods safe.

Potential Benefits:

- Greater likelihood of recovering from mobility limitations.¹⁰
- More outdoor physical activity.¹¹
- More frequent and longer walks.¹²



Plentiful Resources

Parks, libraries, community centers, well-kept public spaces.

Potential Benefits:

• Slower cognitive decline.13



Healthy Air

Low levels of fine particulate matter pollution.

Potential Benefits:

Higher cognitive function.¹⁴

http://www.prb.org/Multimedia/Infographics/2017/neighborhood-features-aging

Pedestrian/Multi-use Facilities

The use of pedestrian and multi-use facilities includes sidewalks,

trails, bikeways, multi-use paths, etc.

- Walking is the 2nd most important travel mode for older people (approx. 9% of all trips).
- Among older adults who do not drive, walking accounts for 1 of 4 trips; its importance increases with age.
- Challenges include: lack of sidewalks/system of connected sidewalks, unsafe intersection crossings, cyclists on the sidewalk, obstructed sidewalks, uneven pavements, failure to remove leaves, ice, snow, weeds, roots.

Rosenbloom (2009): Generations 33(2)





Proximity to Services

- The American Planning Association has called for communities to create housing options that are affordable, accessible, close to services (including transit), and located within existing communities.
- The metric most commonly utilized to quantify close proximity is a quarter-mile distance (0.25 mi.) -it is assumed to be adequate distance for planning for access to services by frailer individuals/people with disabilities.

I LIVE LIFE 1/4 MILE AT A TIME



Research on Crime and Traffic

- Traffic was not associated with decreased transport or leisure walking.
- The subscale, crime was consistent with 48 less minutes of transport walking per week controlling for age, sex, BMI, and physical function.
- The variable, fear of walking because of night crime was associated with decreased walking.
- Traffic was not associated with decreased transport or leisure walking.
- Fear of night crime was highly correlated with the number of medical conditions.
- Crime statistics for the neighborhoods had an assault rate of 22.1/1000 incidents which was ten times greater than the state average.



Implications

- Length of residence may be associated with the neighborhood perception. Participants lived in their current neighborhoods for a mean over 27 years.
- Older adults create strategies to negotiate their neighborhood to avoid dangers of crime such as not going out at night or avoiding street corners where known drug activity takes place.
- Older adults create strategies to negotiate street landscape by avoiding streets without crosswalks or streets with > than two lanes.



Public Transit



- Public transit includes buses, light rail, heavy rail, aerial trams, and ferries.
 - Riding public transit is older adults' 3rd most frequent mode of transportation choice (1st: autos, 2nd: walking).
 - Research has shown that in order to increase older adults' transit ridership, providers must:
 - Increase safety and security in all parts of the system
 - Provide better information both before and during travel
 - Expand the hours of service and provide additional routes
 - Make service more reliable
 - Enhance driver training

Rosenbloom (2009): Generations 33(2)



Public Transit Challenges

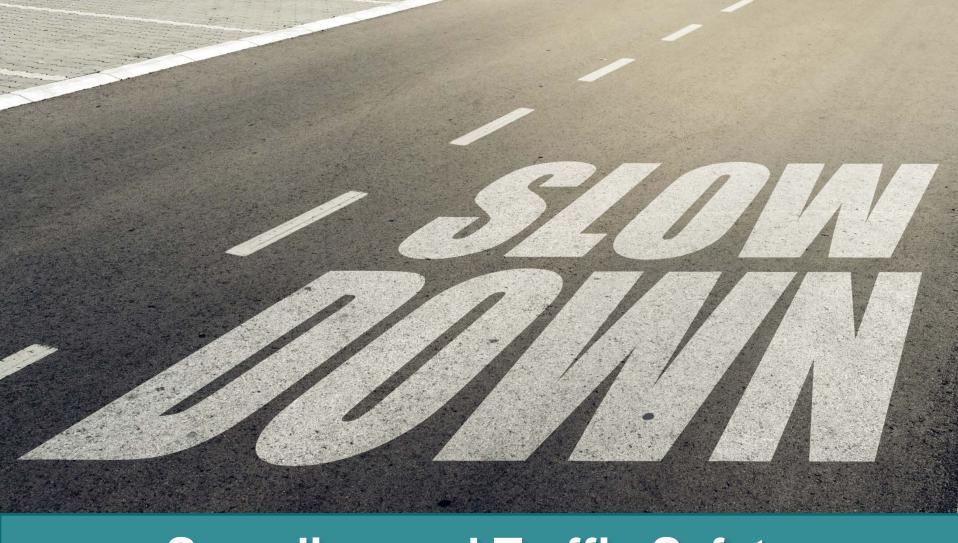
- Places to wait for bus, trolley, train
- Schedules for high peak senior traffic time
- Not adequate time to take a seat
- Difficult to store a walker
- Passengers







HOME OF SIDNEY KIMMEL MEDICAL COLLEGE

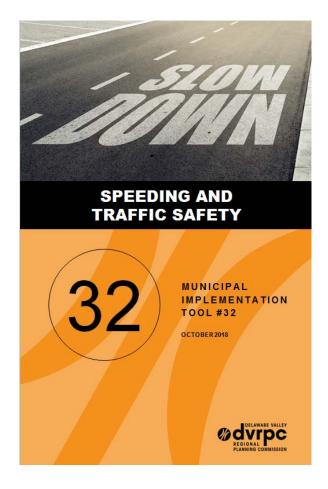


Speeding and Traffic Safety

Municipal Implementation Tool

WHAT IS A MUNICIPAL IMPLEMENTATION TOOL?

Municipal implementation tools are designed to introduce local officials and citizens to planning techniques that may be useful in their communities and to best practices from within the Greater Philadelphia region.

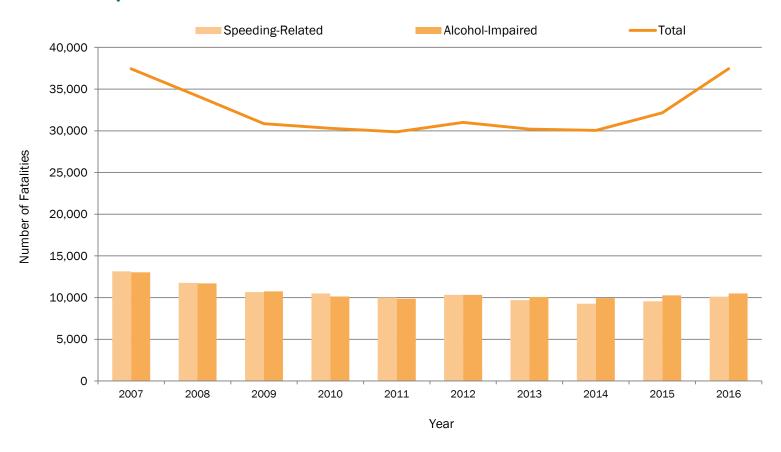






WHY SPEEDING?

Total U.S. Traffic Fatalities versus Speeding-Related and Alcohol-Impaired Fatalities per Year



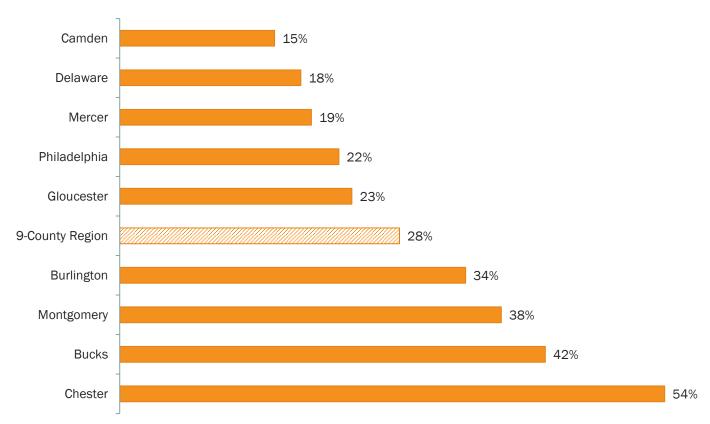
Source: 2007–2016 Fatality Analysis Reporting System (FARS) Data





SPEEDING IN THE REGION

Speeding-Related Traffic Fatalities as a Percentage of Total Traffic Fatalities by County in 2016



Percentage of Total Traffic Fatalities

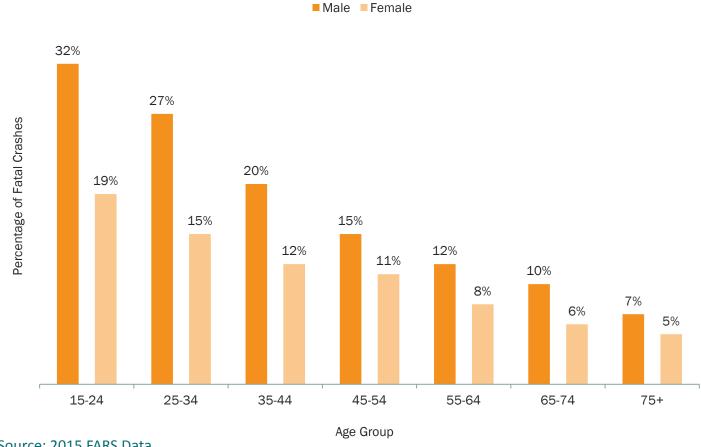
Source: 2016 FARS Data





CONTRIBUTING FACTORS

Percentage of Fatal Crashes in the United States Involving Speeding **Drivers by Age and Gender in 2015**

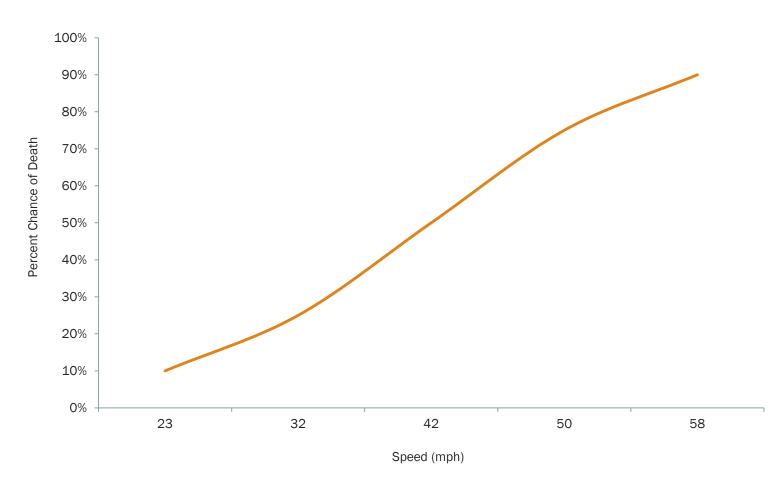






CONTRIBUTING FACTORS

Pedestrian Crash Mortality by Impact Speed



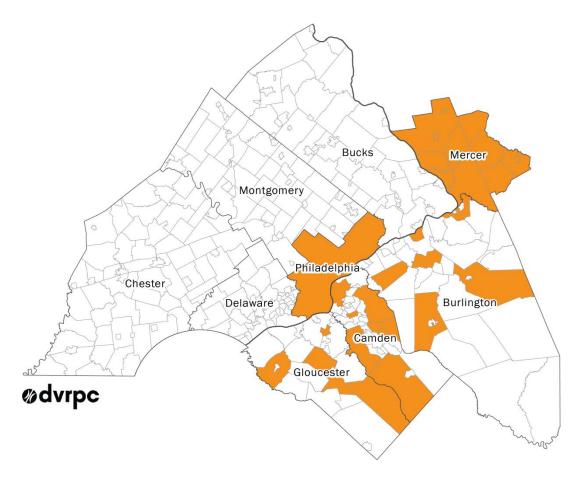
Source: Tefft, 2011 (AAA Foundation for Traffic Safety)





SPEED REDUCTION STRATEGIES

Municipalities in the DVRPC Region with Complete Streets Policies



Source: National Complete Streets Coalition, 2018





SPEED REDUCTION STRATEGIES

Road Diet on Garrett Road in Upper Darby, PA

May 2017



Source: Traffic Planning and Design, Inc./Randy Waltermyer

June 2018





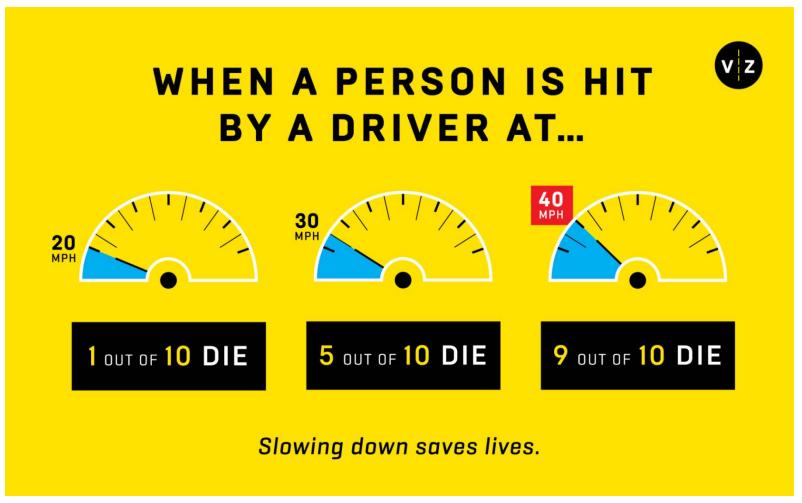
SPEED REDUCTION STRATEGIES



Source: PennDOT



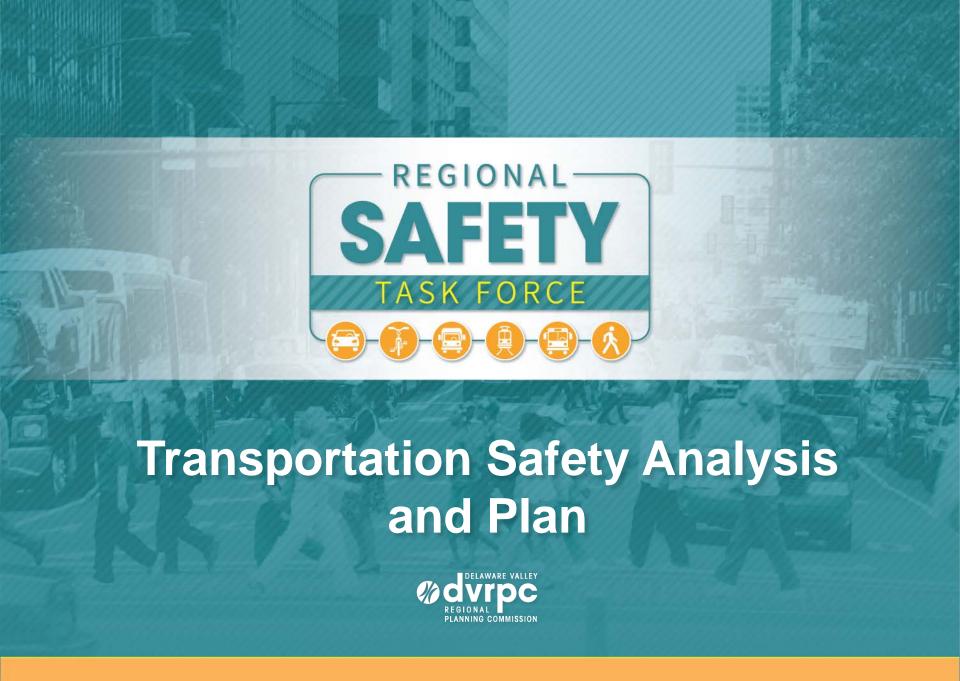
CONCLUSION



Source: Vision Zero PHL 2017 Action Plan







TSAP, 2007-2016

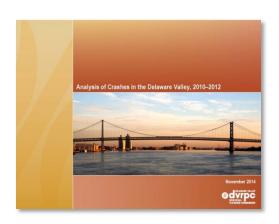




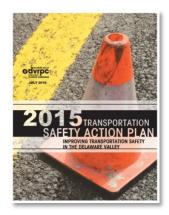


2018 TSAP

- April 2017: RSTF endorsed changes to forthcoming fifth edition
 - 1. Inclusion of all AASHTO Emphasis Areas
 - Emphasis Areas measured by people killed and severely injured (KSI)
 - 3. Combining "Analysis of Crashes" into the TSAP (previously published as a separate report)







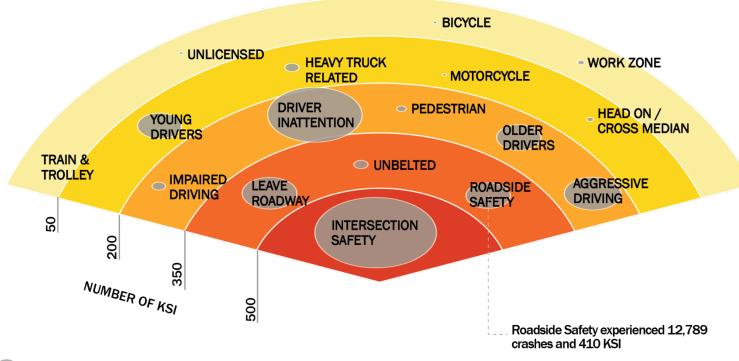


2018 TSAP



2018 TSAP

 July 2017: RSTF Special Strategies Session developed priority strategies to address all emphasis areas



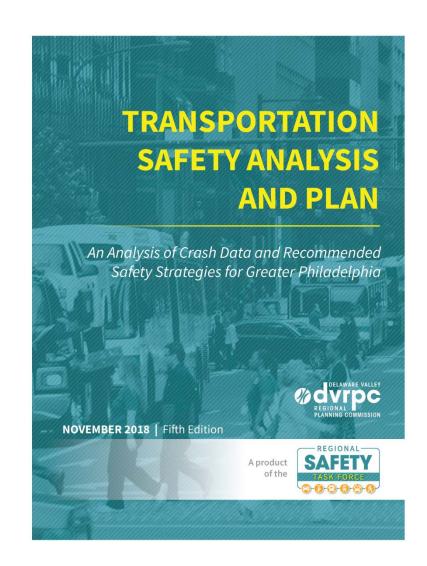
= TOTAL CRASHES (size proportional to total number of crashes)





2018 TSAP

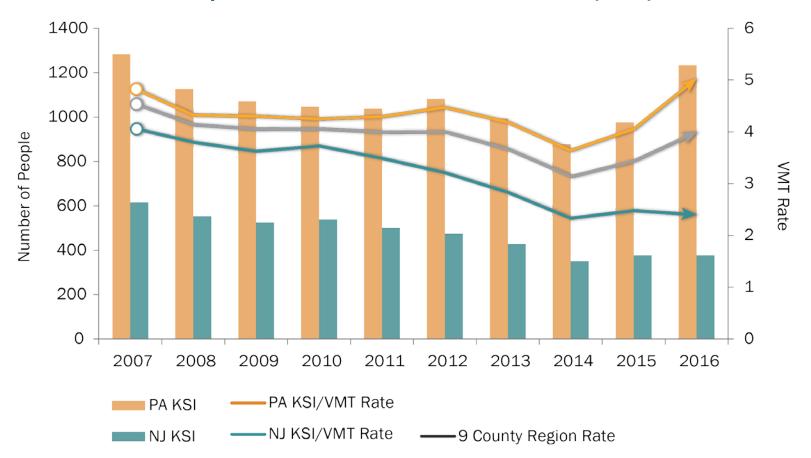
- November 2018: Fifth edition published as "Transportation Safety Analysis and Plan" (TSAP)
- Three parts:
 - 1. Crash Trends in the Region, 2012-2016
 - Safety Planning in the Region
 - 3. Emphasis Areas





1. Crash Trends in the Region, 2012-2016

Total KSI and KSI Rate per 100 Million Vehicle Miles Traveled (VMT)

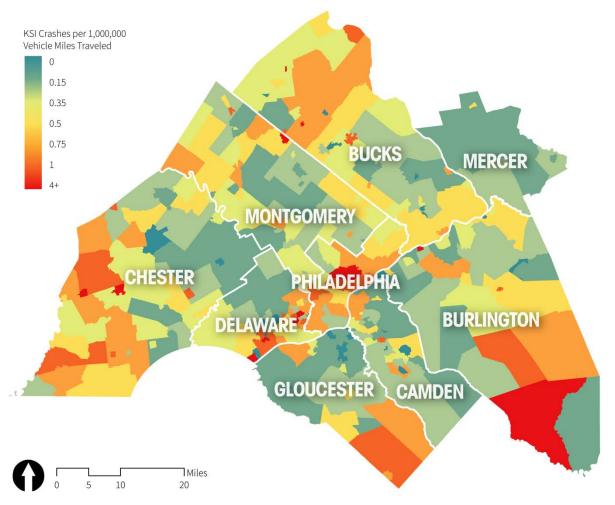






1. Crash Trends in the Region, 2012-2016

KSI Rate by Municipal or Philadelphia Planning District VMT, 5-Year Average



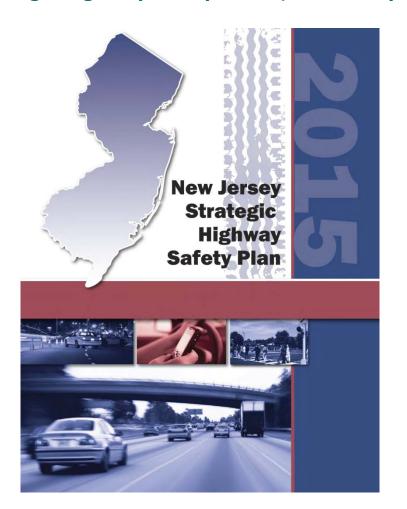
Other crash rates mapped:

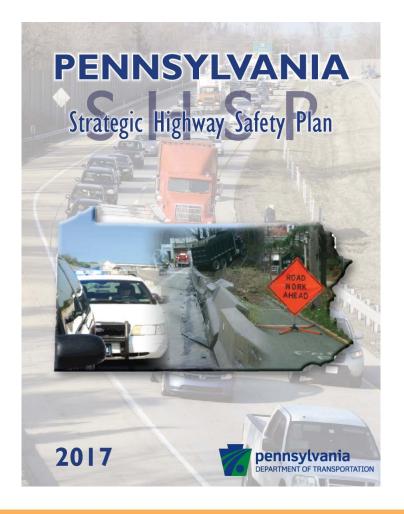
- KSI Rate by Population
- KSI Rate by Lane Miles



2. Safety Planning in the Region

Strategic Highway Safety Plans (New Jersey and Pennsylvania)



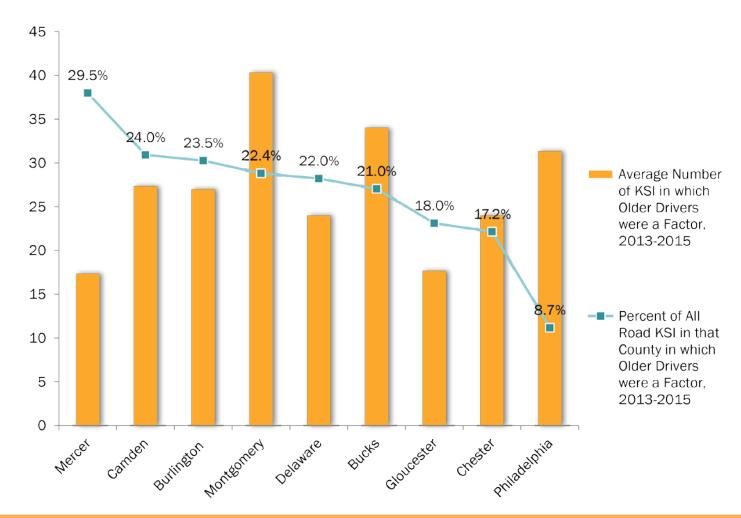






3. Emphasis Areas

Importance of Promoting Older Driver Safety by County

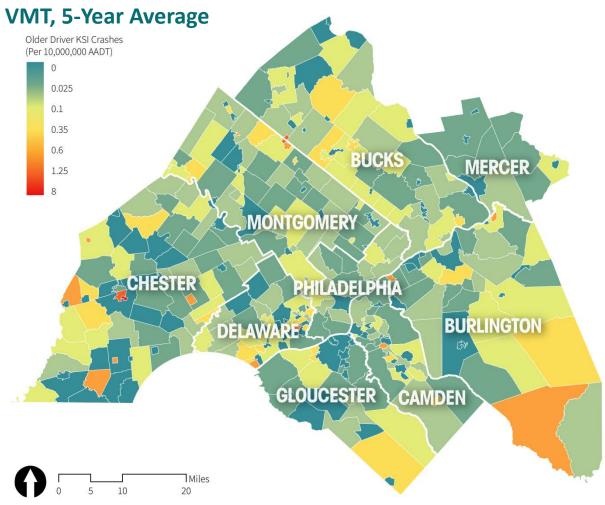






3. Emphasis Areas

Older Driver KSI Crash Rate by Municipal or Philadelphia Planning District





3. Emphasis Areas

Programs and Policies in the Region That Help Promote Older Driver Safety

Engineering

Sign improvements: Clearview font; larger, higher, advance warning signs (PennDOT, Burlington County Engineering Department)

CCT Connect Services (SEPTA)

Senior ID cards, senior discounts, shared-ride program (SEPTA)

Courtesy transportation for seniors (New Jersey Transit)

Reduced transit fare program (New Jersey Transit, PATCO, SEPTA)

TRADE Transportation demand-responsive transit for seniors funded by the Senior Citizen and Disabled Resident Transportation Assistance Program (Mercer County)

Ride Provide personal transportation for seniors, transit travel training program at senior centers (Greater Mercer TMA)

Enforcement

Pennsylvania Medically Impaired Driver Law (medical professionals, PennDOT)

Education

Car Fit program (AAA, AARP, Burlington County Sheriff's Department, Chester County Highway Safety Project, and NJDHTS)

Senior driver evaluation tools, Roadwise Rx, defensive driving refresher courses (AAA, AARP)

Ambassador program, personnel located at each station to provide assistance (PATCO)

AARP Driver Safety Program (Chester County Highway Safety Project)

Driver Simulation Program, Fitness-to-Drive screening tool, Smart Driver Course, Safe Driver Videos, Livable Communities Campaign (AARP)

Roadwise Review DVD (AAA Mid-Atlantic Foundation for Safety and Education)

Skill testing for seniors to check for alertness, eye sight, etc. (Virtua Hospital and other local hospitals)

Senior Defensive Driver Program, Senior Safety Task Force (NJDHTS)

Senior Pedestrian Safety Program (Greater Mercer TMA)

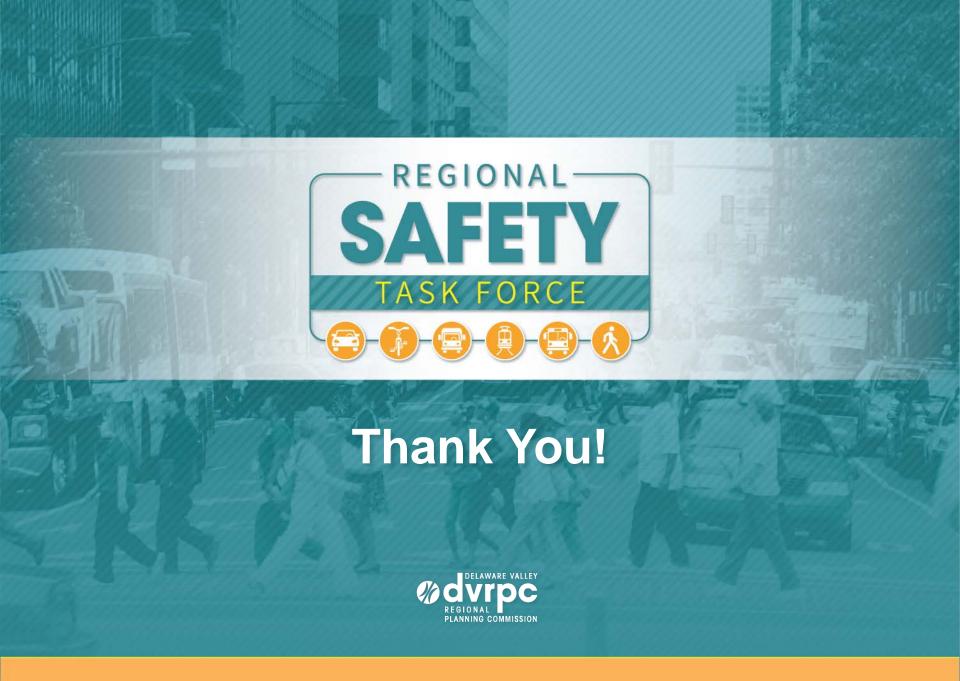
Policy

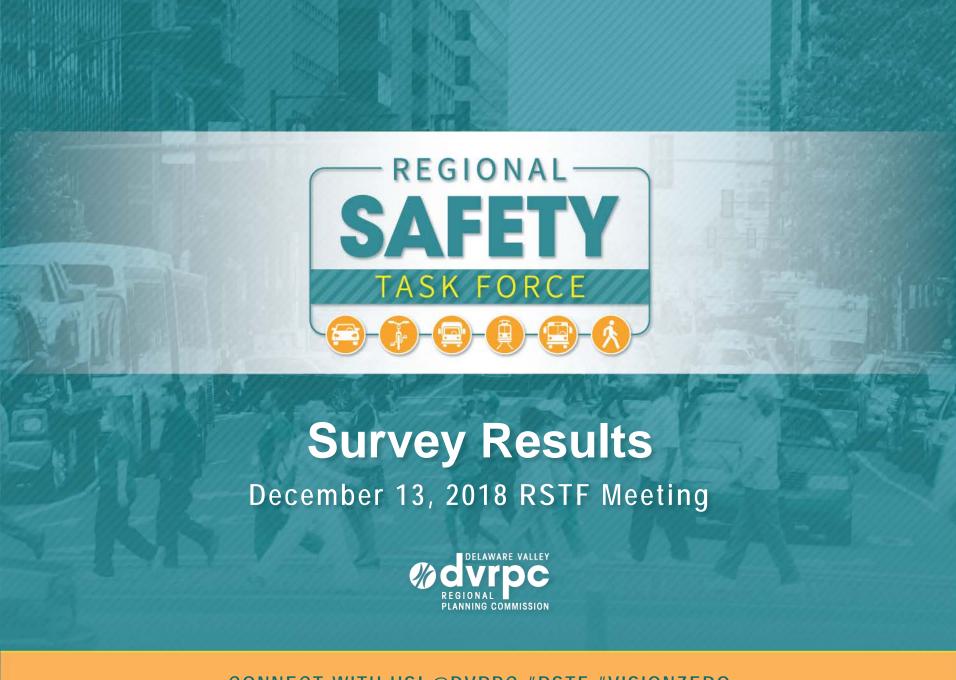
Classic Towns of Greater Philadelphia, Transit-Oritented Development (DVRPC)

Sources: PennDOT, NJDOT, DVRPC





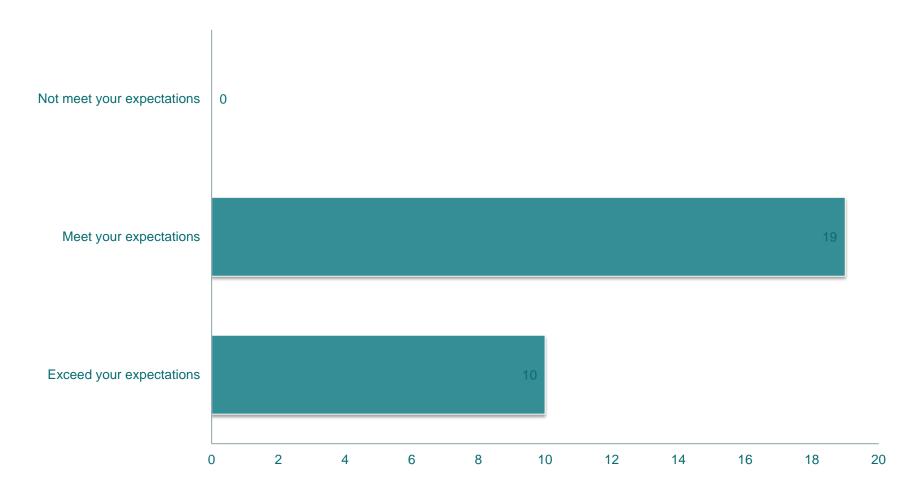




Overall Survey Results

- 29 out of 50 meeting attendees responded
- The meeting either met or exceeded the expectations of all respondents
- Some write-in comments offered potential areas for improvement

Question 1: Did this meeting:



Question 2: What at today's meeting met, exceeded, or didn't meet your expectations?

Good discussion on senior safety; too much focus on driving though

I haven't been to a meeting in a while and it was nice to see the meeting stay on track

Lots of good ideas/comments at breakout as always!

Greater emphasis needed on action item development

Presentations were insightful and informative

Regional updates from a variety of groups

More collaborative than expected

Question 3: How else can the RSTF raise awareness or take action on this topic?

Encourage partners to post links to educational materials on their websites

Host another joint meeting with Healthy Communities Task Force; many health/aging advocates there

Reach out to municipalities and get more involved in the creation/updating of municipal/county master plans

Work more with senior centers/organizations, especially those run by low-income and non-white seniors

Question 4: Are there any topics you would like to discuss at future RSTF meetings?

Drugged driving

Autonomous vehicles

Bicycle and pedestrian safety

Question 5: Additional comments/suggestions

Include more decision-makers/politicians in the discussion

Love the mix of attendees

Meeting is too long/starts too early

