



**WELLESLEY**  
COUNCIL *on* AGING

## Transportation Program

Passenger guidelines  
& procedures

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Bus Service & Volunteer Drivers Program (VDP)

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781-235-3046

[Drive@wellesleyma.gov](mailto:Drive@wellesleyma.gov)

## WELLESLEY COUNCIL ON AGING (COA) TRANSPORTATION PROGRAM

- ❖ COA BUS SERVICE
  - ❖ COA VOLUNTEER DRIVERS PROGRAM (VDP)
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### GUIDELINES

#### **Our goal:**

To meet the transportation needs of Wellesley senior residents with our bus service and/or our volunteer drivers program.

#### **Will you be assured a ride?**

The COA Transportation Coordinators will make every effort to provide you with a ride. Transportation requests will be accepted up to one (1) month in advance. Reservations should be made as soon as possible, but must be made at least three (3) business days before the day of service. Our VDP is based on volunteer availability and therefore, rides cannot be guaranteed. The Transportation Coordinator will suggest other options for you when COA transportation services are not available.

#### **Who is eligible?**

Wellesley residents, age 60 or older, without substantial physical or cognitive deficits that might jeopardize the safety of either passengers or drivers and physically disabled residents, regardless of age, who meet certain COA criteria and as approved by the Director of Senior Services. Eligibility is determined by COA staff and may change over time. The VDP is staffed by volunteer drivers who drive their own vehicle and cannot accommodate wheelchairs. Passengers may have a companion, 60 years or older, or a caregiver 18 years or older travel with him/her as necessary. For COA bus: Companions requires a bus ticket, however, caregivers do not require a ticket. Only service dogs or seeing-eye dogs are allowed on the COA bus. The VDP, under special circumstances, may accommodate small animals when going to the veterinarian. Seat belts are required while vehicles are in motion.

#### **Where do we go?**

The COA Transportation Program covers rides within Wellesley and the surrounding towns.

#### **For what purpose may I request a ride?**

Rides are provided for medical appointments, social engagements, shopping, errands, and more.

#### **Hours of operation:**

The COA bus typically runs Monday through Friday between the hours of 9:00 a.m. and 3:00 p.m. The COA bus is also used occasionally for evening/weekend local day trips. The VDP offers rides 24 hours a day, 7 days a week based on driver availability.

**Registration:**

Every passenger must be registered prior to requesting a ride. Registration forms are available at the Council on Aging. You can also register by phone. When you register, you will be asked to provide the names and phone numbers of two emergency contacts. Passengers must sign a copy of these Guidelines and Procedures indicating that he or she understands and agrees to abide by them.

**What if something happens to me while I am on board the COA bus or with a volunteer driver?**

If you don't feel well, you fall, or you experience some other adverse event, the drivers are instructed to err on the side of caution. If they suspect that you may need medical assistance, they will call 911. They are not allowed to make any medical decisions or to co-sign a refusal of treatment. Drivers will defer to decisions of the EMTs. If you refuse to go with the EMTs, the driver is not responsible to continue the ride. This is for your safety as well as that of the driver and/or other passengers. If you are not feeling well or have an adverse event, one or both of your contacts will be notified and the COA will follow up with you to see how you are.

**Cost:**

The cost to ride the COA bus is \$1.00 each way (\$2.00 round trip). Passengers on the COA bus are required to obtain pre-paid tickets from the COA office before using the service. There is a FREE (no tickets required) group grocery shopping trip on Mondays. (If there is a holiday observed on a Monday, the group grocery trip will be on the Wednesday of that week.) Passengers may have only 5 (five) grocery bags on grocery shopping days. When the COA bus is used for special outings (such as local day trips), a suggested voluntary donation of \$3.00 per participant is requested. These donations will be used to support the COA Transportation program.

There is no cost for the VDP and volunteers do not accept tips. The COA accepts donations in the form of cash or check (made payable to Town of Wellesley) to help support the Transportation program. Donations can be dropped off, mailed, or given directly to your driver. Passengers are responsible for parking charges and tolls.

**Cancellations:**

It is the responsibility of the passenger to notify the Transportation Coordinator or the VDP driver as soon as possible if the passenger is unable to keep his/her reservation. Repeated cancellations will be subject to review by the COA Director of Senior Services. In the event the COA needs to cancel a transportation request or day trip reservation, the passenger will be notified as soon as possible.

**\*Use of tobacco and alcohol are prohibited on the COA bus and in VDP vehicles.\***

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### PROCEDURES

#### 1. How to request a ride:

To request a ride by phone, call **781-235-3046**. A Transportation Coordinator will answer your call *or* you will have the option to leave a voice mail message and a Transportation Coordinator will return your call. Give your name, telephone number, where you want to go (include address and phone number), date and time you want a ride. A Transportation Coordinator will let you know if the COA bus is able to provide your ride(s) and/or they will add your trip request to the VDP database. **Remember to call at least 3 business days in advance.** Transportation requests will be accepted up to one month in advance.

To request a ride by email, use [Drive@wellesleyma.gov](mailto:Drive@wellesleyma.gov) and provide the following information about your request: Your name and telephone number, where you want to go (include destination address and phone number), date and time you want a ride. If you are seeking round-trip transportation, please indicate what time you want your return ride. A Transportation Coordinator will let know if the COA bus is able to provide your ride(s) and/or they will add your trip request to the VDP database. **Remember to call at least 3 business days in advance.**

\*Please do not contact volunteer drivers directly\*

#### 2. When to request a ride:

At least 3 business days advance notice is required. For example, if your ride request is for a Thursday, you should call no later than Monday. The Transportation Coordinator should be able to tell you immediately if the COA bus can provide the ride and can let you know by Wednesday morning if you have a volunteer driver. *Remember, weekends and holidays are not considered business days.*

#### 3. Confirmation/Reminder calls:

For VDP: once a volunteer driver has been identified for your ride, the Transportation Coordinator will call you and tell you the name of your driver. No later than the day before your scheduled ride, your volunteer driver will call you to make final arrangements. The driver will give you his/her phone number in case you need to change your plans. Note: if no driver has been found by the day before your ride request, the Transportation Coordinator will call you.

For COA Bus: The Transportation Coordinator conducts reminder calls for all scheduled passengers the day before the scheduled ride. The Coordinator will confirm the date, time, and destination of the scheduled rides.

4. Since your rides cannot be guaranteed through the COA Transportation Program, it is important that you be informed of other options that may be available. The Transportation Coordinator can review options with you.
5. Passengers should be ready for the driver at the agreed-upon time. Drivers will wait no longer than 5 (five) minutes at the designated pick-up location. For COA Bus: If the passenger does not board within that time, the bus will continue to its next destination.
6. If driving conditions, your driveway, or pathway to your house appears unsafe, the driver is not obliged to drive you.
7. All feedback is welcome and should be directed to the Transportation Coordinator (781-235-3046) or the Director of Senior Services (781-235-3961).

## WELLESLEY COUNCIL ON AGING (COA) TRANSPORTATION PROGRAM

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I AGREE TO FOREVER RELEASE THE TOWN OF WELLESLEY, AND ALL ITS EMPLOYEES, AGENTS, BOARD MEMBERS, VOLUNTEERS AND ANY AND ALL INDIVIDUALS AND ORGANIZATIONS ASSISTING OR PARTICIPATING IN THE WELLESLEY COUNCIL ON AGING TRANSPORTATION PROGRAM (THE "RELEASEES") FROM ANY AND ALL CLAIMS OR CAUSES OF ACTION THAT MAY HAVE ARISEN IN THE PAST OR MAY ARISE IN THE FUTURE, DIRECTLY OR INDIRECTLY, FROM PERSONAL INJURIES TO MYSELF OR PROPERTY DAMAGE RESULTING FROM MY PARTICIPATION IN THE TOWN OF WELLESLEY COUNCIL ON AGING TRANSPORTATION PROGRAM. I ALSO PROMISE TO INDEMNIFY, DEFEND AND HOLD HARMLESS THE RELEASEES AGAINST ANY AND ALL LEGAL CLAIMS AND PROCEEDINGS OF ANY DESCRIPTION THAT MAY HAVE BEEN ASSERTED IN THE PAST, OR MAY BE ASSERTED IN THE FUTURE, DIRECTLY OR INDIRECTLY, ARISING FROM PERSONAL INJURIES TO MYSELF OR OTHERS OR PROPERTY DAMAGE RESULTING FROM MY PARTICIPATION IN THE TOWN OF WELLESLEY COUNCIL ON AGING TRANSPORTATION PROGRAM. I FURTHER AFFIRM THAT I HAVE READ THIS RELEASE AND INDEMNIFICATION PROVISION AND THAT I UNDERSTAND ITS CONTENTS. BY SIGNING THIS PASSENGER AGREEMENT, I AFFIRM THAT I HAVE DECIDED TO PARTICIPATE IN THE TOWN OF WELLESLEY COUNCIL ON AGING TRANSPORTATION WITH FULL KNOWLEDGE THAT THE RELEASEES WILL NOT BE LIABLE TO ANYONE FOR PERSONAL INJURIES AND PROPERTY DAMAGE THAT MAY OCCUR.

PASSENGER AGREEMENT - (YOUR COPY)

**I have read, understand, and agree to abide by the guidelines and procedures included in this document.**

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**Name (Print)**

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**Date**

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**Signature**

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PASSENGER AGREEMENT - (COA COPY)

**\*Please sign/date this copy and return to the COA\***

I have read, understand, and agree to abide by the guidelines and procedures included in this document.

\_\_\_\_\_  
First Name (Print)

\_\_\_\_\_  
Last Name / Surname (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

To ensure we have accurate information in our records, kindly also provide the following:

\*We keep the personal information of all passengers confidential\*

Street Address: \_\_\_\_\_ City,

State, ZIP: \_\_\_\_\_ Telephone

Number: \_\_\_\_\_

DOB: \_\_\_\_\_

Gender: \_\_\_\_\_ Female \_\_\_\_\_ Male

Emergency Contact Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

For office use only:

\_\_\_\_A.R. \_\_\_\_M.S.C.

Personal information section revised 9/1/16