## DRAFT

To: Mayor Horwath and Members of City Counc	;il
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From: The Advisory Committee for Persons with Disabilities

## Re: HSR Fare Assist Program and the Cancellation of the Temporary No Pay Program and the Temporary Voluntary Pay Program

Dear Mayor Horwath and Members of City Council,

The Advisory Committee for Persons with Disabilities has significant concerns regarding the cancellation of the Temporary No Pay Program and the Temporary Voluntary Pay Program without first addressing several insufficiencies with the current bus design and fare payment options.

The HSR Fare Assist Program can help many people on ODSP save a modest amount on their transit costs. While it is not a great program, it is a good start to addressing the financial inequities of our social system. ACPD does have to take issue with the manner in which a smaller group of people with disabilities will be negatively impacted financially and the rapid pace in which the HSR has implemented this program.

The HSR has every right to charge for services, but they have to make sure people are able to do so. Revoking a program after only a few months notification like the no pay program used by the CNIB after being in place for decades seems unfair. Perhaps a transition could be discussed?

ACPD also takes issue with the HSR's failure to provide an accessible method of payment for persons with vision loss. The Presto system relies heavily on its Presto App. This requires a smart phone and the ability to manipulate one. This is very difficult if not impossible for people that can't see the display, nor feel the buttons to enter their banking information. This means that the only option they have is to travel to a Shoppers Drug Mart or a Fortinos. How do they get there? The fare box doesn't read out the display in an audible format so how are they to know if it has gone through properly? Are they still on a transfer? How much money is remaining on their card? This is all information that people with vision take for granted. When a person with vision loss needs to learn a new route, it can often take weeks of practice to learn how to navigate a new path. They do not need assistance with travel training, only the ability to practice without financial hardship.

The CNIB and other agencies that represent those with vision loss have reasonable concerns that should be addressed before ceasing a program in place longer than many of us have been alive.

To understand how the voluntary pay program came about, we need to provide a little history. In the late 1990's, the HSR purchased a small number of low floor buses to begin making the service accessible. At the time, the technology only allowed for installation at the back door and the HSR designed the layout accordingly. The HSR has been designing their buses to have the back door as the primary access point ever since. This raised a big problem however, where do they pay if they are entering from the back door? At the time, it was determined that it would cost too much to install a secondary fare box and felt it was cheaper to let people with mobility devices ride for free. This is still a problem today which the HSR has not addressed.

When the Accessibility for Ontarians with Disabilities Act (AODA) was passed in 2005, one of the rules for conventional transit was that two wheelchair seats be provided as close to the primary access point as possible. For most cities, they use the front door as the primary access and the two wheelchair seats are up front on either side. The City of Hamilton continued to use the back door design with the two wheelchair spots closest to the rear entrance and still does to this day. If the HSR wants to switch to the front door as the primary access, they will need to change the design of the buses or they would be violating the AODA's section 49(2): The priority seating for persons with disabilities shall be located as close as practicable to the entrance door of the vehicle.

If the HSR wants persons with mobility devices to pay fare, they will need to provide an accessible means of paying at the rear door or as we have also suggested, provide a portable Presto scanner for each driver.

Other points of concern are:

• The lack of appropriate grab bars surrounding the fare box. People that use walkers and rollators will need to be able to transfer their weight off of their mobility device onto the grab bar so they can swipe their card

safely. The box should have rounded grab bars available on either side; flush or of slight prominence to the fare box.

- Powerchairs have another problem using the front scanners, the control box of the chair blocks access and you have to strain and reach around to scan the card.
- Only some designs of mobility scooters and powerchairs are able to maneuver through the front door. Mobility Scooters with wide wheel bases as well as powerchairs with large footplates and high backs or tilt seating require the back door.

ACPD would be remiss if for not pointing out that a large number of people with disabilities live in deep poverty and cannot afford internet access or smartphones. This digital divide gets wider each day and we must remember that we are not operating on a level playing field. Presto is not very accessible to many people.

A financial argument can also be made that it actually saves the City money to allow a passenger to ride the bus for free than it does for a passenger to pay fare on a DARTS trip. It incentivizes using transit over paratransit. Classifying both programs as temporary was to ensure that they didn't affect DARTS, not that they were in place as a stop gap measure.

The ACPD was consulted on the Fare Assist Program in May of 2023 and raised these concerns with staff at that time and that information is not in the final staff report. Instead, the relevant consultation only states that some members felt there would be a problem using Presto.

ACPD supports the implementation of the Fare Assist Program, however, asks that the HSR pause their plan to cancel both temporary programs until they can better accommodate the needs of people with disabilities.