



APPLICATION FOR PARA TRANSPO SERVICE

About Para Transpo

Para Transpo offers door-to-door accessible shared transit service. Service is booked in advance and requires fare. The service is meant for people with disabilities who cannot take conventional transit (the bus or O-Train) some or all the time. The driver will escort the customer from the first sets of doors of their pickup location. They will also escort the customer to the first set of doors of their destination.

Eligibility for Para Transpo

Eligibility for Para Transpo is determined by evaluating the information provided by the applicant and their health-care professional in this application form. Disability alone does not create eligibility for Para Transpo. Eligibility is based on the applicant's functional ability to use conventional transit. It is not based on age, income, the availability of others to travel with the applicant on conventional transit, or the availability of conventional service in the applicant's area of the city.

Conventional (bus and O-Train) transit service

OC Transpo buses and the O-Train are fully accessible, and may be a better alternative for those who want greater independence and flexibility. All buses are low-floor with ramps for easy boarding, and have allocated spaces for customers using assistive or mobility devices. The O-Train offers its customers level boarding from platform to vehicle, and also has allocated spaces for those with assistive or mobility devices.

All conventional transit vehicles are equipped with:

- cooperative seating areas for those who are not able to stand on a moving vehicle;
- on-board audible and visual "next stop" announcements;
- handholds, grab bars and stanchions positioned throughout the vehicle;
- slip-resistant, low-glare floors; and
- entrance lighting to assist with boarding and exiting.

Travel training for applicants who would like to learn how to use the bus and O-Train independently is available from community agencies, in partnership with OC Transpo.

Rural Para Transpo service

Rural Para Transpo trips must be from a rural to urban address or from an urban to rural address. Para Transpo does not travel from one rural address to another rural address. However, OC Transpo has partnered with community support services agencies that provide this service.



Categories of eligibility

Para Transpo offers three categories of eligibility, consistent with the Integrated Accessibility Standards Regulation (IASR O. Reg. 191/11) and the Accessibility for Ontarians with Disabilities Act (AODA) 2005.

- **Unconditional** A person with a disability that prevents them from using conventional transit.
- **Temporary** A person with a temporary disability that prevents them from using conventional transit. An applicant who qualifies for temporary service requires specialized transit for a defined period of time.
- **Conditional** A person with a disability where environmental or physical barriers limit their ability to consistently use conventional transit. An applicant who qualifies for conditional service may be able to use conventional transit for all or part of their trip, but may also qualify for specialized transit under specific circumstances.

Conditional categories for Para Transpo include:

- Seasonal: Reliant on weather conditions, such as winter or extreme heat events;
- Physical Barriers: Travel to or from a non-accessible location;
- **Variable Health Conditions**: Where the person's health or destination may determine if a trip is required;
- **Special / Ticketed Events:** Where service is required only for large events where travel on a regular bus / train may be difficult due to large crowds of people.

How to apply

- 1. Fill in the Application: This application package must be filled in and signed by the applicant (or by their legal guardian, power of attorney or authorized caregiver) and their health-care professional in order to be considered complete. Please use black or blue ink only. All questions are mandatory.
 - **Part A must be completed and signed by the applicant**, and contains questions about the applicant's contact information, assistive devices, and functional abilities.
 - **Part B must be completed and signed by the applicant**, and authorizes the release of the information provided to Para Transpo and Lifemark in order to assess the application.
 - Part C must be completed and signed by the applicant's health-care professional, and contains questions about the applicant's disability and ability to use conventional transit. Any fees for the completion of this form are the responsibility of the applicant.
- 2. **Make a copy**: A copy of this form should be kept for the applicant's records in case the original application is lost or not received by Para Transpo.







3. **Return the completed and signed application to Para Transpo**: Fax, mail or deliver the application to:

Para Transpo / Lifemark 2121 Carling Avenue, Unit 12 Ottawa, ON K2A 1S3 Fax: (613) 721-2151

Determining eligibility

Para Transpo contracts the determination of eligibility to Lifemark. Lifemark has qualified health-care professionals on staff that possess an understanding of the different types of disabilities and the expertise to review and assess applications to determine an applicant's functional ability to use conventional transit. Lifemark staff will review the information provided in the application and make a decision on the applicant's eligibility within 14 calendar days of receiving a complete application. If the submitted application form is unclear or incomplete, the application process will be delayed until the application received is deemed complete.

Para Transpo or Lifemark staff may contact the applicant (or their legal guardian, power of attorney or authorized caregiver) and/or their health-care professional to request additional information or clarification. If the application form is complete and there is still not enough information to make a decision, Lifemark staff may request that the applicant meet with a qualified health-care professional on staff for an in-person functional assessment.

Notifying applicants

On behalf of Para Transpo, Lifemark will inform the applicant (or their legal guardian, power of attorney or authorized caregiver) of their eligibility by mail. If a decision has not been made within 14 calendar days of having received a complete application, the applicant will be granted temporary eligibility until such time as a decision can be made.

Once approved for Para Transpo service, it is the customer's responsibility to inform Para Transpo of any change in their disability, personal/contact information, or assistive device. If the applicant is denied eligibility, the applicant will have the right to appeal. Information on the appeal process will be sent with the eligibility notification letter.

Emergency or compassionate service

Temporary access to Para Transpo may be provided to some customers in fewer than 14 calendar days, where Para Transpo service is needed because of an emergency or on compassionate grounds, and where there are no other accessible transportation services available to meet the applicant's needs.





Visitors

Temporary access to Para Transpo is available to visitors who are eligible for specialized transit in their own community, and who visit Ottawa for less than four weeks per calendar year. If you are visiting Ottawa, please contact Para Transpo for more information on our visitor policy before filling out this form.

Need more information?

If applicants have any questions, require additional information or need assistance filling in this application, please contact Para Transpo / Lifemark at 613-218-8417 (TTY calls also accepted at this number).

Accessible formats and communication supports are available upon request.

PART A – To be completed by the Applicant (PLEASE TYPE OR PRINT CLEARLY)

| 1. | Are you already, or were you previously, registered with Para Transpo? No Yes, Registration # | | | | | | |
|--------|---|--------|--------|-------------|--|--|--|
| Please | e select one: | | | | | | |
| | Mr. | | | | | | |
| | Mrs. | | | | | | |
| | Ms. | | | | | | |
| | Miss | | | | | | |
| | Other | | | | | | |
| 2. | Name: | | | | | | |
| | Last | First | Middle | | | | |
| 3. | Date of Birth: | | | | | | |
| | Day | Month | Year | | | | |
| 4. | Home Address: | | | | | | |
| | Number | Street | | Apt/Suite | | | |
| | City | Provir | nce | Postal Code | | | |
| 5. | If your residence has a name (e.g., Carleton Lodge), what is it? | | | | | | |







Pick up location: 6. Garage Front entrance Other Back entrance Side entrance 7. Daytime Phone: () Evening Phone: () TTY Number:) Cell Number: (() E-mail address: What is your preferred method of communication should we require further information and/or clarification? Phone () Fax () Email 8. Mailing address, if different from your home address: Number Apt/Suite Street Postal Code City Province 9. Preferred language of correspondence: English French 10. In case of an emergency, who should be notified (family, friend, neighbour, case worker, etc.)?

Name :

Telephone Number: ()

Relationship:

11. ParaPay is a virtual payment system designed for persons who travel mainly or completely on Para Transpo services. Payments can be made in person at an OC Transpo Customer Service Centre, by phone or online. To access the online system to make a payment, you will require an online ParaPay account.

If approved for Para Transpo, do you want an online ParaPay account?

Yes

No

If you indicated "Yes", you will be sent an e-mail with your ParaPay login information and temporary password to the e-mail address you provided in Question 7 above.

12. Identify any disability conditions that affect your ability to travel on conventional transit



lifemark 🗶



(check all that apply):

Disability Condition

Always Affects my Ability

Sometimes Affects my Ability

Physical Sensory Mental Health Cognitive Other (please describe)

Your assistive devices

13. Do you currently use any of the following assistive devices or mobility aids? Check the ones you use most often.

| Booster seat/Car seat | Scooter |
|-----------------------|-------------------|
| Cane | Walker |
| Communications aid | Manual wheelchair |
| Crutches | Power wheelchair |
| Leg brace | White cane |
| Portable oxygen tank | Other: |
| Prosthesis | |

Your service animal

14. Do you travel with a service animal or guide dog?

Yes

No

If you answered "Yes", do you have one of the following for your service animal? Please check all that apply.

> Identification from a recognized service-animal training school, such as a vest or harness

Provincially issued guide dog photo identification card

Documentation from a regulated health-care professional (e.g. physician,

Your support person

A support person is an individual who accompanies a person with a disability on Para Transpo to help them with communication, mobility, personal care, medical needs, or access to goods and services. The applicant must provide their own support person.





Para Transpo may require that a support person accompany the applicant at all times if the support person is necessary to protect the applicant's own health and safety, or to protect the health and safety of other customers. In such cases, the applicant will not be allowed to travel if the support person is not present.

In some cases, the applicant's current health, destination or weather may dictate the need for an occasional support person. If an occasional support person is required, the applicant will need to indicate this at the time of trip booking, and the support person must be present for that trip only in order to travel.

15. Are you able to independently recognize your destination and communicate to the driver if you are being dropped off at the wrong location?

Yes

No

16. Are you able to independently get help if dropped off at the wrong location? Yes No

17. Are you able to be safely left alone at your drop-off location or left alone on a Para Transpo vehicle?

Yes No

18. Based on the above answers, do you feel that you require a support person while travelling on Para Transpo?

Yes, always Yes, occasionally No

Your functional abilities

19. Why are you applying for Para Transpo service? Describe in detail how your disability affects your ability to use OC Transpo's conventional bus or O-Train service? (Please feel free to attach another page if you need more space to respond.)







20. How do you travel around Ottawa now? Check all that apply.

Conventional bus O-Train Para Transpo Taxi Car (I drive myself) Car (someone else drives me) Other:

21. Regarding OC Transpo's regular bus or train services (check one box only):

I can usually ride on an OC Transpo vehicle operating on a regular bus or train route. I can ride on an OC Transpo vehicle operating on a regular bus or train route **only if**: (check all that apply and fill in the blank as required):

- I have a support person with me
- I have received travel training

Other

I cannot ride on an OC Transpo bus or train operating on a regular route. (Please explain why)

22. Can you independently walk up and down three steps if there are handrails on both sides? Yes No

23. What is the furthest distance you are able to walk, or roll using an assistive device, to get to and from a transit stop? An average urban block is about 175 metres.

Half a block One block Two blocks More than two blocks I am not able to get to and from a transit stop because:

24. Do weather conditions affect your ability to ride transit or get to a transit stop (for example, ice, snow, heat, etc.)?

Yes If you answered Yes, please explain how:



CC Transpo Para Transpo Application



| 25. Can you independently cross a busy intersection or stree depressed curbs? Yes | et if there are curb cuts or No |
|--|------------------------------------|
| 26. Are you able to wait for 15 minutes at a transit stop? Yes No If you answered "No", please explain why not: | |
| n you answered no , please explain why hot. | |
| 27. Can you safely get on and off a low-floor bus with a ram Yes No | p? |
| If you selected "No", please explain why not: | |
| 28. Can you stand on a moving bus? Yes | Νο |
| If you selected "No", please explain why not: | |
| 29. Can you handle a fare or transfer, or tap a Presto card? Yes | |
| No If you selected "No", please explain why not: | |
| 30. Can you independently ask for help or directions? | |

No



Yes



31. Have you received any travel training from an agency or school on how to use conventional transit?

Yes No If "Yes", please provide the name of the agency or school that provided the training:

If, after travel training, you were not successful in travelling independently, which barriers prevented you from using conventional transit? (Please attach a copy of your Travel Training report card if you have one available.)





Part B – Consent Form / Release of Information and Applicant's Signature

Applicant's Certification

By submitting this application, the applicant:

- Certifies that to the best of their knowledge the information given in Parts A and C of this form are correct;
- Authorizes staff in Para Transpo in the City of Ottawa and Lifemark to collect, use and disclose the information provided in the application and information collected in support of the application for the purposes set out in the Collection, Use and Disclosure of Personal Information statement on pages 10 to 11.
- Authorizes the health care professional named in Part C to complete Part C and for Para Transpo and Lifemark staff to communicate with the health care professional to clarify information provided and to receive additional information, including personal health information;
- Authorizes Para Transpo and Lifemark staff to contact the applicant, their legal guardian, power of attorney, healthcare professionals or authorized caregiver, and / or their travel training agency / school, if required, to determine the applicant's eligibility, ongoing eligibility and / or to arrange for an interview and / or in-person functional assessment.

Signature of Applicant:

Signature of Legal Guardian, Power of Attorney, or Authorized Caregiver:

Date:

Day Month Year

Legal Guardian / Power of Attorney / Authorized Caregiver Information

If you are not the applicant but have completed this application on the applicant's behalf, please provide the following information.

| Last | First | | Middle | |
|--------|--------|---------------|---------------|---------------|
| | | | | |
| | | | | |
| Number | Street | | | Apt/Suite |
| | | | | |
| City | | Province | | Postal Code |
| | Number | Number Street | Number Street | Number Street |





| Daytime Phone: (|) | Evening Phone: (|
|------------------|---|------------------|
| TTY Number: (|) | Cell Number: () |
| E-mail address: | | |

Collection, Use and Disclosure of Personal Information

Personal information collected on this form or by other means (such as orally, by phone or by email) in support of this application will be used by authorized Para Transpo and Lifemark staff for the purposes of determining the applicant's eligibility and ongoing eligibility for Para Transpo services, and for administering and managing delivery of Para Transpo services should the applicant receive them. Upon becoming a Para Transpo customer, personal information, including health information, will also be used by Para Transpo to assist with travel, and can be disclosed on an as-needed basis to individuals / organizations to assist with pick-ups and drop-offs, and discussions regarding the customer's safety and well-being. This personal information may also be shared with Para Transpo's Eligibility Appeals Panel, should an appeal be filed by the applicant or their legal guardian, power of attorney or authorized caregiver.

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Questions about the collection and use of personal information may be addressed to:

Para Transpo / Lifemark 2121 Carling Avenue, Unit 12 Ottawa, ON K2A 1S3 Phone: (613) 218-8417 Fax: (613) 721-2151

Accessible formats and communication supports are available upon request.





PART C: TO BE COMPLETED BY A HEALTH CARE PROFESSIONAL.

You are being asked by the Para Transpo applicant named in Part A to provide information regarding their ability to use conventional transit (bus and O-Train). Para Transpo service is not meant to replace a person's private automobile or OC Transpo's fixed-route service when the fixed-route service is limited, not operating or not convenient.

Eligibility for Para Transpo service is not based on age, income or the availability of others to travel with the applicant on regular fixed-route transit. A person with a disability who does not qualify for Para Transpo's door-to-door service at all times, may qualify only under certain conditions. The information you provide will allow us to evaluate the request and to provide the appropriate service. Thank you for your cooperation in this matter.

How to complete Part C:

- 1. Read the information in the "About Para Transpo" section of this application, as well as the information provided by the applicant in Part A and B.
- 2. Fill in and sign Part C, basing your evaluation solely on the applicant's ability or inability to use conventional transit all or some of the time.
- 3. Return the completed and signed form to the applicant or send directly to Para Transpo / Lifemark at the address below.

If you have any questions about Para Transpo or OC Transpo's conventional transit service, or about the Para Transpo eligibility application process, please contact Para Transpo / Lifemark at (613) 218-8417 (TTY calls also accepted at this number).

| Health Care Professional Information: | | | | | |
|---------------------------------------|------|-------|----------|-----------|-------------|
| Name: | Last | First | | Middle | |
| Address: Number Street | | | | Apt/Suite | |
| | City | | Province | | Postal Code |





What is your preferred method of communication should we require further information and/or clarification?

Phone () Fax () Email Other

Profession (check one)

Physician / Surgeon Nurse Practitioner Physiotherapist Ophthalmologist / Optometrist Director of Care Chiropractor Occupational Therapist Psychologist/Psychiatrist Psychotherapist Speech Language Pathologist / Audiologist Social Worker Registered Nurse Mental Health Therapist Recreational Therapist Certified Orientation / Mobility Instructor

I have read Part A and B in their entirety. Yes

No

I certify that I am currently a regulated, licensed and/or accredited health-care professional of the following regulatory body, licensing authority and/or accreditation authority (for example, College of Physicians and Surgeons),

and, that the information above in Part C of this application is accurate and complete to the best of my knowledge. I declare that I do not have a conflict of interest in regards to completing this application on behalf the applicant.

Signature:

Date:

Day Month Year

1. What is the name of the applicant?

- 2. How long have you treated or known the applicant?
- 3. What is the applicant's relevant medical diagnosis (or diagnoses)?







4. What is the expected duration of the applicant's disability?

 Permanent
 Temporary

 If the disability is temporary, how long do you expect it to prevent the applicant from using conventional transit (bus or O-Train)?

5. How does the applicant's disability prevent him or her from using conventional transit?

6. Does the applicant's disability fluctuate from day to day, or with environmental conditions, so that they may be prevented from using conventional transit part of the time or under certain conditions?

Yes No

If yes, what may prevent them from using conventional transit?

Seasonal barriers (e.g. winter months, extreme heat) variable health Inaccessible bus stops Large crowds for special events only Other reasons? (please explain)

- 7. Does the applicant require the use of a mobility or assistive device? See the list on page 5.
 - Yes No Sometimes

If "Yes" or "Sometimes", what device do they require?

If "Sometimes", when do they require the device, and for what purpose?

 8. Does the applicant require the assistance of a service animal or guide dog? Yes No
If you answered "Yes", please explain why:







| 9. Can the applicant independently ask for help o Yes | r directions? No | | | |
|---|---|--|--|--|
| 10. Can the applicant independently recognize th if they are being dropped off at the wrong location Yes | | | | |
| 11. Can the applicant independently get help if d Yes | ropped off at the wrong location? No | | | |
| 12. Can the applicant be safely left alone at their drop-off location or left alone on a Para Transpo vehicle (for example, without risk of wandering or exiting the vehicle)? Yes No | | | | |
| 13. Based on questions 9 to 12 above, do you feel that the applicant requires a support person to attend to their own needs, to protect their own health and safety, or to protect the health and safety of other Para Transpo customers? | | | | |
| Yes, at all times (cannot ride | Yes, occasionally | | | |
| alone) | No | | | |
| If you answered "Yes" or "Yes, occasionally", please explain why: | | | | |
| | | | | |

14. What is the furthest distance the applicant is able to walk, or roll using an assistive device, to get to and from a transit stop? An average urban block is about 175 metres.

Half a block One block Two blocks More than two blocks Other:







15. Based on the accessible features on OC Transpo's vehicles, as noted on page 1, is the applicant able to physically board and ride on conventional transit?

Yes No If you answored "No", please explain why pet

If you answered "No", please explain why not:

16. Does the applicant have a history of falls or a balance/gait concern? Yes NoIf you answered "Yes", please note the frequency and cause:

17. Does the applicant have any other disabilities, or health or medical conditions Para Transpo should be made aware of in any of the following areas?

Physical:

Cognitive:

Mental Health:

Behavioural:

Sensory:

THANK YOU FOR YOUR ASSISTANCE

Please return this application (Part A, B and C) to the person seeking Para Transpo certification or mail to: Para Transpo / Lifemark

Para Transpo / Lifemark 2121 Carling Avenue, Unit 12 Ottawa, ON K2A 1S3 Fax: (613) 721-2151

