



Passenger Assistance Safety and Sensitivity

# PASS 6.0

DRIVER MANUAL



A certification course from the  
Professional Development Services Division

*Raising the Standard of Excellence*

Community  
**Transportation**  
ASSOCIATION

UNIVERSITY OF WISCONSIN  
**UWMILWAUKEE**  
School of  
Continuing Education

Welcome to the 6.0 Version of the Passenger Assistance Safety and Sensitivity (PASS) program.

In our efforts to keep the curriculum as up to date as possible, we are pleased to announce the latest edition – PASS 6.0.

There are now sections on Distracted Driving, Driver Fatigue and Occupational Safety and Health. You will also notice that some subject areas have been expanded, for example, advice for agencies that operate as a private company providing a taxi service.

*This Passenger Assistance Safety and Sensitivity (PASS) training manual and Power Point presentation is for the use of participants in the Community Transportation Association of America (CTAA) and University of Wisconsin-Milwaukee (UWM) PASS Certification Program. It is offered only for information purposes. **It is not intended to be all-inclusive or to address the hazards faced by each participant specifically.** The manual specifically does not address issues or duties arising out of any Federal, State or local statutes, ordinance or regulations except in a direct manner. Users must evaluate their own needs and adapt the information and procedures in this manual to meet those needs. CTAA and UWM assume no liability for the contents herein or the lack thereof.*

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## **PASSENGER ASSISTANCE SAFETY AND SENSITIVITY CERTIFICATION**

### **OBJECTIVE:**

Identify and share personal attitudes and perceptions regarding people we transport.

**Become familiar and proficient at passenger assistance, disability awareness, and emergency evacuation techniques.**

### **THIS TRAINING PROGRAM CONSISTS OF:**

#### **Presentations and coaching...**

...basic information on various mobility aids, vehicle accessibility equipment including wheelchair lifts and mobility aid securement.

#### **Role Play Exercises...**

...providing some understanding of the practical difficulties individuals may face.

#### **Hands on Application...**

...opportunity to experience different situations such as operating a vehicle lift and securing a wheelchair.

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## DISTRACTED DRIVING

Safety of your passengers must remain a high priority at all times. However, safety begins with you. If you do not take appropriate action to create a safe work environment for yourself you are compromising your personal well-being and the well-being of your passengers, other motorists and pedestrians.

The average driver spends about one hour and 15 minutes in their personal vehicle every day. On average how many hours a day do you drive your transit agency vehicle?

Unfortunately, too many people often treat this time as an opportunity to take care of daily activities from eating breakfast, lunch and dinner, to returning phone calls.

Drivers spend more than half their time behind the wheel engaged in potentially distracting behaviors. Because of today's proliferation of mobile device, dash-board technologies, and other tools that provide easy access to information, in vehicle distractions are increasing – as is the temptation to give in to them.

All of us do it. Everyone reaches for something, adjusts a control, and gets distracted at some point while driving.

You may not realize it but while you are driving you are multitasking;

- Operating at high speed
- Navigating across changing terrain
- Calculating speeds and distances

- Responding to other drivers and obstacles around you.

Now add;

- Talking to your passengers
- Responding to a radio call from your dispatcher
- Looking for street names and building numbers
- Singing along to the radio or CD.

The higher number of passengers, the greater the potential for distraction. Managing the elderly and passengers with disabilities requires special attention.

Just because something may not be illegal does not mean it is safe, such as;

- Adjusting seat positions while driving
- Adjusting climate controls
- Using vehicle mirrors for personal grooming
- Eating and/or drinking

All of the above can be enough to cause you to fail to respond to a dangerous situation.

Do not complete your paperwork while you are driving. The vehicle must be parked in order to make a drop-off or pick-up. That is when you complete your paperwork.

All distractions fall into basically three categories;

Visual

Manual

Cognitive

## Visual Distractions

Visual distractions cause you to take your eyes off the road. When traveling at 65 mph, if you take your eyes off the road for two seconds, you will have driven two-thirds the length of a football field before you see the road again.

Drivers must;

- keep an eye on the road – front, sides, rear – with a mirror check every 3-5 seconds
- be aware of on-board passenger activity
- monitor gauges – speed, oil, water and fuel
- monitor and respond to Mobile Data Terminals (MDT's)
- rely on GPS or read hand written directions.

## Manual Distractions

Manual distractions take your hands off the wheel. When you use one or both of your hands to get that burger under control, you risk losing control over your vehicle – which is more important?

You are greatly slowing your ability to respond to changing or unexpected conditions that can occur without warning.

Contributors to manual distractions include;

- use of two-way radio, cell phone, MDT
- mirror, seat, climate control adjustments
- non secured items in the vehicle
- eating and drinking

- collecting fares, making change, providing transfer ticket(s).

Remember; check your logs prior to leaving the dispatcher's office. Get location directions for pick-ups and drop-offs prior to getting on the road.

### **Cognitive Distractions**

Cognitive distractions take your mind off the task at hand. When you get into a discussion – whether it's over the phone, two-way radio, (hands free or handheld), or, person to person, your mind can become absorbed more with the discussion than with driving.

You can cause your own cognitive distractions, such as; thinking about your up-coming or last vacation, singing along with the radio, etc. Your body may be behind the wheel, but your head is not.

Drivers who use hand-held devices are four times as likely to get into crashes serious enough to injure themselves, or others.

Using a cell phone while driving, whether it is hand-held or hands-free, delays a driver's reactions as much as having a blood alcohol concentration at the legal limit of .08 percent.

### **Texting**

While all distractions can endanger driver's safety, texting is the most alarming because it involves all three types of distractions.

Sending or receiving a text takes a driver's eyes from the road for an average of 4.6 seconds, the equivalent – at 55 mph – of driving the length of an entire football field –BLIND.

When your eyes are reading the text message, your fingers or thumbs are typing on the keypad, and your mind is busy crafting a message, you are not paying attention to driving and you are 23 times more likely to crash.

So that you will not be tempted to use it – turn off your cell phone prior to driving. **YOU ARE MORE IMPORTANT THAN THAT PHONE CALL OR TEXT MESSAGE.**

The Federal Transit Administration (FTA) has developed an on line training program **Curbing Transit Employee Distracted Driving**, Course number FT00555. This course is free and takes approximately 30 minutes to complete. It is "designed to raise awareness of distracted driving with the desired outcome of reducing the risk of distracted driving by public transportation professionals." The program can be found on line at <https://www.transit.dot.gov/regulations-and-guidance/policy-letters/curbing-transit-employee-distracted-driving>

## Driver Fatigue

The best way to prevent driver fatigue is to make certain you have enough sleep before driving, regardless of the length of your trip.

Early warning signs of fatigue include;

- yawning
- tired eyes
- poor concentration
- restlessness
- drowsiness
- slow reactions
- boredom
- over steering
- difficulty remembering driving the last few miles.

Driving while sleep deprived, especially late at night and at dawn, increases the risk of having a “micro sleep” and losing control of your vehicle.

“Micro Sleep” is a brief and unintended loss of consciousness. It can cost you your life if it happens when you are driving. It is characterized by head snapping, nodding or closing your eyes for more than a couple of seconds.

### Who is at risk

- Adults between 18 – 29 are much more likely to drive while drowsy.
- Men are more likely than women to drive while drowsy.

- Night shift workers.
- You are four times more likely to have a fatal fatigue crash if you are driving between 10 pm and dawn.

The National Highway Transportation Safety Administration (NHTSA) estimates falling asleep while driving is responsible for at least 100,000 automobile crashes, 40,000 injuries, and, 1,550 fatalities each year.

Statistics indicate that 103 million people have reported actually fallen asleep at the wheel, while 11 million drivers admitted they have had an accident or near accident because they dozed off or were too tired to drive.

### Tips and responsibilities of drivers

- Recognize the signals and dangers of drowsiness; frequent yawning, heavy eyes, blurred vision
- Maintain a healthy diet; skipping meals or eating at irregular times may lead to fatigue and/or food cravings.
- Take a nap; the only reliable way to combat fatigue is with proper rest. Even a short nap can do wonders to help fight fatigue. A nap should last a minimum of 10 minutes. Allow at least 10 minutes after waking to fully recover before driving again.
- Avoid medication that may induce drowsiness; tell your doctor or pharmacist that you drive for a living and need non-drowsy medications.
- Do not rely on “alertness tricks” to keep you awake. Smoking, turning up the radio, drinking coffee or high caffeine drinks, opening windows is not cures for

drowsiness and may give you a false sense of security.

Remember – fatigue may slow reaction time, reduce attention, memory lapses, lack of awareness, mood changes and reduced judgment ability.

Driving fatigued may cause death.

The Federal Transit Administration (FTA) has developed an on line training program **Fatigue and Sleep Apnea Awareness**, Course number FT00558. This course is free and takes approximately 30 minutes to complete. It is “designed to inform and guide transit operators and systems regarding the identification and treatment of individuals at high risk for obstructive sleep apnea and other sleep disorders, as well as general concepts about sleep and fatigue.” The program can be found on line at: <https://www.transit.dot.gov/regulations-and-guidance/policy-letters/announcement-online-fatigue-and-sleep-apnea-awareness-course>

## **TRANSIT EMPLOYEE OCCUPATIONAL SAFETY AND HEALTH**

Federal Occupational Safety and Health Act Standards are applicable to all private transit systems and to many public transit systems.

As a professional bus operator you may be exposed to a broad array of biological, physical, ergonomic hazards, as well as various stressors. Simultaneous exposure to multiple hazards is common. The potential for musculoskeletal injuries is always present, and can be caused by;

- Repeatedly performing the same motions.
- Working in an extended fixed posture.
- Exerting excessive forces while lifting or pushing.
- Exposure to constant or excessive vibration from vehicle operation.
- Direct contact pressure on soft tissue.
- Working long periods without adequate rest breaks.
- Working in cold environments.

### **Work-related Musculoskeletal Disorders (WMSD's)**

WMSD's can be associated with work patterns that include but are not limited to;

- Fixed or constrained body positions
- Continual repetition of movement
- Force concentrated on small parts of the body
- A pace of work that does not allow sufficient recovery
- Heat, cold and vibration contribute to the development of WMSD.

Drivers/Operators need to know how to adjust driver seat areas properly to fit their individual needs.

- Adjust the seat into a position that permits full access to all controls and allows for a comfortable arm position.
- Adjust and re-adjust the lumbar support, if available, throughout your entire workday.
- Adjust all mirrors properly to ensure good visibility while maintaining neutral neck postures.

Know and understand the importance of rest periods, and take advantage of these short periods to relax the leg muscles.

Learn how to consciously control muscle tension throughout your entire workday.

Stretching is beneficial because it promotes circulation and reduces muscle tension. However, make certain to consult with your personal health care provider or a physical therapist to develop a properly designed, for you, stretching program.

If you are a fixed route bus operator and you get a break at the end of your “run”, get out of the seat, and vehicle, and walk around. If you are a paratransit/community transit driver you must get out of the seat and vehicle to provide assistance to each passenger boarding or exiting your vehicle. Take advantage of this non-driving time to stretch your back and leg muscles.

Wear good, appropriate for weather conditions, footwear. Avoid open toe footwear and never wear sandals, flip flops or shower shoes while driving.

**REMEMBER – SAFETY BEGINS WITH YOU!**

## YOU AS A PROFESSIONAL

There are several characteristics of a professional, whether the professional is a doctor, lawyer, teacher or transportation vehicle operator. Each...

- ...is specially trained for a job
- ...is required to have special skills
- ...is required to meet licensing standards.

In addition, the final characteristic of a professional is high level performance at all times.

There are several ways in which your passengers can tell if you are a professional. They can tell by the smooth way that you pull the vehicle to and from the curb, by your neat and alert appearance, and by your friendly greeting. They can tell it by the tone of your voice, the fact that you ask them how you can assist them and by the courteous and knowledgeable way that you provide them with assistance.

It is easy to be positive, feel good, and treat others well when everything is fine. The difficulty comes when things are not going well. This is the true test of your skill as a professional.

If you can remain professional and courteous towards all your passengers, no matter how difficult traffic conditions are; no matter how difficult your passengers may be, then you are a true professional.

At times you must use all your energy and passenger relations skills to maintain a courteous and professional attitude towards your passengers and your job. The payoff

for you is that your passengers will make your job much easier in the long run.

When being pleasant to passengers is not easy, try following one or more of these techniques:

Refocus – think about positive things in order to stop thinking about negative things.

Talk it out – talk to supervisors.

Understand – dealing with the public, traffic, agency rules, schedules, etc., can be frustrating at times. If there is a problem, contribute to the solution as best you can.

### Professional Driving

A professional driver must possess the necessary skills to work with passengers, family of passengers, agency administrators, elected officials, and the public in general. Driving a motor vehicle safely is not enough, you must also;

- Make the passenger feel welcome
- Answer questions
- Make the ride safe and comfortable
- Handle any problems that occur
- Follow special instructions
- Keep accurate and timely records of your work

Passengers rightfully expect safe, efficient and comfortable transportation service. Take the time necessary to permit passengers to board and exit comfortably. Be certain to offer assistance to each passenger. Remember, confidence and

respect from passengers must be earned every day on every trip.

Practically everything done while performing your job, and the manner in which you conduct yourself while performing it, contributes either favorably or unfavorably to the passenger's image of you and your agency.

**Keep in mind – good performance is taken for granted, poor performance is always recognized.**

Therefore, remember one of the first things to be considered is that a courteous trained driver makes positive impressions; the driver who is careless and thoughtless creates negative impressions.

Support and explain agency policies when dealing with passengers;

- Speak positively about your agency. Avoid talking about how tough your job is.
- Talk over agency/organization problems with supervisors, not passengers.

Three basic rules or skills that a transit vehicle operator must know and follow:

1. Provide safe, reliable and expert service.
  - Drive safely and smoothly at all times
  - Adjust temperature controls for the comfort of your passengers whenever possible
  - Answer questions politely and completely
  - Speak clearly, calmly and with respect
  - Offer assistance to every passenger

2. Be courteous and patient

- Use respectful language and tone of voice
- Do not swear or call names, avoid sarcasm
- Never embarrass your passengers
- Leave your troubles at home or with the dispatcher
- Remember your passengers are people

3. Avoid arguments

- Remain polite
- Avoid lengthy discussions about policy
- Remember it takes two to have an argument  
Do not get angry

When you perform your job as a professional everyone benefits.

You benefit because passengers will:

- Treat you more pleasantly
- Willingly follow your directions
- Respect you as a professional

Your passengers benefit through:

- Safe transportation
- Comfortable transportation
- Reliable transportation

The agency benefits because you help to:

- Increase supportive ridership
- Improve community support
- Increase potential funding
- Reduce insured risks

Remember you are the face of the agency that passengers see on a daily basis.

## CUSTOMER SERVICE

The driver is the most important asset of a transit agency. However, the most important person to any transit operation is the customer. Without the customer there is NO agency.

### Who are your customers?

Think in terms of who receives the service and how that service impacts that individual or group. Also, think about who provides the service and how the perceptions of employees, funders, contributors and taxpayers have a strong positive or negative effect on your service.

Groups to consider as customers include:

- Existing riders – these are the people for whom your service exists.
- Former riders – these individuals were users of your service, which made a difference in their lives; either positive or negative.
- Potential riders – these individuals are not using your service now, but might in the future.
- Indirect customers – this group does not use your service themselves; however, they derive a direct benefit from the availability of your service – for example, the employer or family of the individual being transported by you.
- Funders of service - this can include funding agencies, state or federal departments of transportation, service clubs, municipalities, individual community members, and elected officials.
- Coworkers – in transit agencies, every employee is a customer to at least one other employee.

## Interaction with Passengers

Of all the things that you will do as a transportation vehicle operator, the way you interact with your passengers will have the most influence on your job and the future of your agency. Therefore, consider these facts;

- As a driver, you represent your employer.
- In the course of a day you have more contact with the public than any other employee of your agency.
- A large number of motorists and pedestrians see your vehicle.
- A driver's attitude toward passengers helps to determine whether the public has a good or bad impression of his/her employer.

Remember that each passenger is an individual and deserves to be treated with respect. Understand that a person with a disability is more than their disability. They may have the same interests that you have; sports, theater, literature, etc. When speaking to people with disabilities speak to the person not the disability, and focus on daily activities.

**A PASSENGER SHOULD NEVER HAVE TO ASK FOR ASSISTANCE BECAUSE THE DRIVER FAILED TO OFFER IT.**

As a driver you are responsible for passenger safety.

- Assistance must be offered to every passenger, every day.
- You are responsible for assisting passengers both in and out of the vehicle.
- Some riders may wish to board or exit the vehicle on their own. Be close by to assist these individuals should it be needed.
- If injury occurs as the result of negligence, because the driver did not get out of the drivers' seat, you the driver may be found at fault.

Helping passengers get on or off the vehicle requires some judgment calls from the driver. For those passengers who are having difficulty utilizing the steps offer the use of the lift. Remember, in accordance with the Americans with Disabilities Act (ADA), the passenger may stand on the lift.

When providing assistance, it is very important to remember that you are dealing with a person. Ask before taking any direct action. Keep in mind that just because an individual utilizes a personal assistance device does not mean that person knows how to use it. Also, keep in mind that they may be an expert and know the best way. In all instances, acknowledge their request/suggestion and possibly offer an alternative. Safety is extremely important and must remain a high priority. Therefore, if the passenger refuses your offer of assistance, you must be close by and watch for signs of trouble.

## Handling complaints

- Listen non-defensively. No matter how outrageous a complaint seems to you, listen without bias and judgment.
- Validate the feelings of the person making the complaint. Acknowledge the person's frustrations and confirm his or her right to feel upset.
- Remember feelings are not always rational, but they are real. Don't make promises or try to solve the problem in the heat of the moment.
- Try to see the problem from the passenger's point of view.

## COMMUNICATION

Communication, the interaction between you and a passenger, a supervisor, or even a member of your family, is a series of obstacles and openings. You are in a position to control whether those obstacles become problems, or whether you find the openings for effective communication, which can help toward solving problems and make you, and those around you feel better.

The major obstacle to effective communication is our very natural tendencies to judge, evaluate, approve or disapprove the statement or actions of another person.

People have a tendency to develop ideas about what other people are like based on their looks or the way they dress. Disapproval of someone's appearance or taste may cause a driver to ignore a passenger or cut them off in mid-sentence.

The common tendency to make judgments about others increases when emotions, like anger are involved. Emotional communication is more likely to get out of control. To avoid this, make a determined effort to stay calm.

Anxiety or frustration is caused by any number of reasons, including personal problems, traffic, schedule, unfriendliness, etc. Anxiety will limit a driver's capacity to be tolerant and understanding. It is ironic that a driver might have the capacity to dwell on a problem for a long period of time but have little or no time for the passenger who may wish to ask a question or two.

To understand your passenger's point of view, put yourself in their place. Treat others as you would want to be treated, or how you would want a transportation vehicle operator to treat a member of your family.

Three steps for better communication include:

1. Be alert to the person...
  - ...be an active listener
  - ...notice if the person; has difficulty expressing him or herself, asks you the same question over and over, does not seem to understand.
2. Adjust how you communicate...
  - ...use simpler words if necessary
  - ...show how to do what you are telling the person to do
  - ...write it down or draw a simple picture
  - ...know that you may need to give the information more than once before the passenger understands.
3. Check for comprehensions...
  - ...do not ask "Do you understand?"
  - ...instead, ask the passenger if he or she can repeat your instructions.

### Tips on communicating with passengers

- Use body language that says you are willing to help
- Greet your passengers
- Treat adults as adults
- Offer assistance. Ask, wait, and listen for a response from your passenger
- Speak directly to the passenger
- Do not be condescending
- Be patient
- Use easy-to-understand language
- Don't overwhelm the person with too much information
- If you do not understand the passenger do not pretend that you did
- Keep directions simple
- Be calm, or at least look calm

## STRESS

As a vehicle operator, your job is a very responsible one. You are required to handle many tasks:

- Operate the vehicle in a safe manner
- Remain aware of all that is happening around you in traffic, on sidewalks and in your vehicle
- Provide assistance to passengers
- Be attentive to special needs and potential emergencies
- Always perform your duties in a pleasant, courteous manner.

Clearly you face stresses on the job. These stressors can include;

- A rapid work pace and lack of control over work conditions
- Potential for violence
- Lack of bathroom access
- Long hours
- Split shifts
- Traffic
- Route scheduling

All of the above can be contributing factors in a variety of personal health issues, including cardiovascular disease. It is extremely important that you learn to deal with them.

Remember, you are your agency's most important asset. Perform your job as a professional and you will be successful.

Do not let events that you cannot control cause you to lose control of the situation. Use your agency staff for support.

### Tips on dealing with stress

- Deal with the cause  
If tension comes from a relationship, talk out your differences. If the problem is with a task, look at what you can do to positively address the responsibility.
- Talk out your troubles  
Find a levelheaded person you can trust.
- Learn to pace yourself  
Take one thing at a time.
- Give in occasionally  
If you often get into quarrels with people, give in once in a while. Ask yourself, "Is this really worth fighting for?"
- Give yourself a pat on the back for things you do well
- Give the other person a break  
Avoid the tendency to want to "get there first" – to edge out the other person. When you give the other person a break, you very often make things easier on yourself. If he/she no longer feels you are a threat, they stop being a threat to you.

- Plan for change  
Coping with the unexpected is a big source of stress. You don't have to be caught off guard. You have control over many elements of your life. Whenever possible plan to avoid too many big changes coming at the same time.
- Develop a positive and outgoing attitude  
Look at the bright side of things and beyond yourself. Positive feelings help fight stress.
- Smile and have fun  
Recreation is important for good physical and mental health. Plan to do something you enjoy as part of your regular routine.

## PEOPLE FIRST LANGUAGE

The words we use in everyday conversation, on the job, at home and with friends are powerful. The way we refer to other people can either show respect or be a "put down". This is especially true when it comes to the words we use when talking with or about people with disabilities.

Many people still view individuals with disabilities as lesser people, to be pitied, feared or ignored. These attitudes may arise from a fear of someone who is different in some way, or simply from ignorance. As much as the disability itself may affect a person's life, being treated as a lesser person prevents a person with a disability from leading a productive life and enjoying the same opportunities as others.

Human beings are not inanimate objects and should not be treated as such when speaking to or describing people with disabilities.

People with disabilities are "people first". They are more like people without disabilities than they are different. Like other people, people with disabilities are individuals. It is also inaccurate to "group" all people with a particular disability. One-way to avoid this is through "people first" language. Put the person first rather than the disability.

### Terms

Just as some well-known four-letter words are offensive, some words used in referring to people with disabilities are equally offensive. The use of adjectives such as disabled, blind or deaf, before the noun or instead of a noun, is demeaning.

Here are some words to avoid when speaking to or about people with disabilities.

**Afflicted** – it is negative and suggests hopelessness.

**Cerebral Palsied** – sounds like an inanimate object instead of a person. The correct description is “person with cerebral palsy.”

**Confined to a wheelchair** – a person is not confined to a wheelchair, nor is a person bound to their wheelchair. It is a mobility device that allows them to work, play, maneuver comfortably inside and outside their wheelchair-accessible home and to have a life.

**Courageous** – people who have disabilities are not usually brave and do not want to be regarded as superheroes. Like everyone else, they have the will to live and experience life.

**Crippled** – this gives a mental picture of a person who cannot do anything, someone people would rather ignore.

**Deaf and dumb or deaf-mute** – these out-of-date terms were used to describe people unable to hear or speak. Many people who cannot hear or have limited hearing can speak, although their speech may be difficult to understand.

**Disease** – describes an unhealthy condition. Most persons with disabilities are as healthy as anyone else.

**Epileptic** – individuals with this condition prefer to be referred to as a person who has epilepsy.

**Gimp** – this out-of-date word was once used to describe someone who walked with a limp. It is an insult.

**Invalid** - another out of date term. Do not use it.

**Normal** – when used to describe someone who does not have a disability, it suggests that a person with a disability is abnormal or subnormal.

**Patient** – hospitals and doctors have patients. People transported in your vehicle are passengers. You must have patience when transporting your passengers.

**Poor** – describes a person who lacks money or one to be pitied.

**Retard, retardate, or retarded** – this is an out-of-date term and should not be used. Individuals with Intellectual Disabilities prefer to be called by their own personal names.

**Spastic** – some people lack coordination but this is only a result of the physical disability and should not be ridiculed.

**Suffering** – to say that someone suffers from a disability implies that he or she is in constant pain as a result of the disability. This is rarely the case.

**Unfortunate** – this implies unlucky, unsuccessful or socially unacceptable. Luck is irrelevant; he or she wants to be regarded as a real, likable person.

**Victim** – victims are people sacrificed by an uncontrollable force or agent. People with disabilities do not want to be considered as helpless victims, but as people with many worthwhile qualities.

The term “handicapped” is not the same as “disabled”.

Handicap is a condition or barrier imposed by society, the environment or one’s own self. Handicap can be used when describing a situation, as in “The stairs are a handicap for her”, but the term should not be used to describe a person with a disability.

## AMERICANS WITH DISABILITIES ACT - ADA

The ADA is an extensive civil rights law designed to remove barriers that prevent individuals with disabilities from enjoying the same opportunities that are available to persons without disabilities.

The ADA addresses four areas. These areas cover a wide range of issues including employment, the provision of services, (including transportation services), access to facilities and "places of public accommodation", and access to the nation's telecommunications systems.

A substantial part of the ADA covers any public entity that provides designated public transportation, intercity transportation or commuter rail transportation; any private entity that provides specified public transportation; and, any private entity that is not primarily engaged in the business of transporting people but operates a demand response, or fixed route system.

The physical barriers are coming down – slowly but surely. However, invisible barriers still exist, i.e., the negative attitudes of many toward people with disabilities. These attitudes may arise from fear or ignorance about disabilities.

The law requires that all buses have an accessible entrance, securement areas and securement systems. The ADA requires operators to assist and to be courteous to passengers with disabilities and also to permit service animals on the vehicles.

It is not a violation of the ADA, or discrimination, to refuse to provide service to an individual with a disability because that individual engages in violent, seriously disruptive, or illegal conduct. However, service may not be refused solely because the individual's disability results in appearance or involuntary behavior that may offend, annoy, or inconvenience employees or other passengers of the transit system. (49CFR part 37; 37.5(h))

The ADA prohibits driver/operators from passing customers with disabilities at stops and requires drivers to make audible stop announcements.

The transit system is not required to enforce a request for nondisabled, or nonelderly, passengers to move from priority seating areas or wheelchair securement locations. (49CFR part 37; 37.167(j) (3))

The professional driver must know how to operate all accessible features on the vehicle. As a driver, you must ask passengers if they need assistance and specifically what type of assistance they may require.

The ADA requires service be provided to one person accompanying the passenger, with others served on a space-available basis. This one person rides even if this means there is less room for other passengers.

In order to be considered as accompanying the passenger, the companion/PCA must have the same origin and destination. In a paratransit operation the **PCA** is not required to pay a fare. This exemption does not apply to fixed route operations.

## Vehicle driver requirements under the law

- The ADA states that a vehicle operator must use the accessibility related equipment in the vehicle. If a vehicle is equipped with an accessible entrance, and a passenger requests its use, the vehicle operator must comply with the request.
- Allow adequate time for passengers with disabilities to board and exit the vehicle.
- Permit passengers with disabilities who do not use wheelchairs, including standees, to use the lift.
- Operate the lift and or ramp at all stops when needed, or requested.
- Immediately report lift or ramp failures. If the vehicle is operating on a fixed route with an inoperative accessible entrance, and the headway to the next accessible vehicle exceeds 30 minutes, the transit provider shall promptly provide alternative transportation to individuals with disabilities who are unable to use the vehicle because the accessible entrance does not work.
- Allow passengers with disabilities to board the lift either forward or backward.
- Transport any mobility device that fits on the lift or ramp, and within the “envelope” for securement.
- Assist passengers with disabilities with the use of the lift or ramp, and with securement of their mobility device.
- The passenger cannot refuse securement of their mobility device. (49CFR part 37, 37.165(c)(3))

- Secure mobility devices using the available securement system. If the mobility device absolutely cannot be secured using the existing securement system, explain to the passenger that he or she is not secured. **The transit provider may not deny transportation to a wheelchair or its user on the ground that the device cannot be secured or restrained satisfactorily by the vehicle’s securement system. Therefore, if the passenger still wants to be transported, you must transport them.** (49CFR part 37, 37.165 (d))
- Permit passengers with disabilities to travel with respirators or portable oxygen supply.
- Permit all service animals to accompany passengers with disabilities on your vehicle.
- Announce all transfer points, major intersections and destination points as well as any stop requested by a passenger. All announcements must be made in a clear understandable voice with sufficient volume to be heard in the rear of the vehicle. The new, proposed, ADA vehicle guidelines require an automatic stop annunciation system in vehicles.
- On a vehicle which uses a ramp for entry, the operator may have to leave the seat and assist in pushing a manual wheelchair up and or down the ramp. (49CFR part 37, 37.165)

## What you cannot require passengers with disabilities to do

- Transfer from a mobility device to a regular seat; however, you may recommend that they transfer.

- Use designated seats if the individual does not want to.
- Have a personal care attendant.

**NOTE:**

You must stop for all customers with disabilities and use the lift, or ramp, and securement equipment as needed.

Passing by people with disabilities is against the ADA. If all securement areas are in use, stop and inform the customer of the situation and that another vehicle will be along shortly.

Remember, passengers using assistive devices such as crutches, canes or walkers, and passengers who have difficulty using stairs are permitted to use the lift, or ramp. Always instruct the passenger to hold the railing for additional safety. Some disabilities are hidden; therefore you may not deny anyone this service if it is requested.

## Taxi Service and the ADA

54 Million people in America live with disabilities. They have jobs, families, classes, meetings, travel plans, and other activities, and they need transportation. Taxicabs can help get them where they need to go.

On July 26, 1990 the Americans with Disabilities Act became law. The ADA protects the civil rights of people with disabilities and ensures their access to public and private transportation. Taxi services must comply with ADA requirements as private companies, primarily engaged in the business of transporting people, which provide demand-response transportation.

Demand-response service is when the customer takes action to initiate transportation. In order to use taxi service a customer must make a request for a ride – demand. The taxi company dispatches a vehicle to the pick-up location – response.

When it comes to providing service to people with disabilities, ignorance is no excuse for failure.

The ADA states that every transportation provider who serves people with disabilities must be trained to proficiency so that each employee knows how to provide service the proper way. The ADA requires that training be appropriate to the duties of each employee.

The requirements address both technical tasks and interacting with customers. Drivers need to know how to operate equipment properly. Everyone who has contact

with the public must understand the necessity and details of treating people with disabilities courteously and respectfully.

Taxi companies must provide service in a manner that does not discriminate against people with disabilities. Examples of discriminatory service include:

- Denying service to individuals with disabilities who can use taxi vehicles.
- Charging higher fares or fees to passengers with disabilities.
- Denying a ride to a customer using a service animal.
- The driver refusing to assist with stowing wheelchairs or other mobility devices.

Taxi services and drivers cannot deny a ride to an individual because of a disability if the customer is able to use a taxi. If the customer is using a wheelchair or other mobility aid that can be stowed in the vehicle, and the customer can transfer from the device to a regular seat, the company and the driver must provide service. Neither the company nor the driver can require the passenger to wait for a lift or ramp equipped vehicle.

Drivers also cannot refuse to assist with stowing a wheelchair in the trunk of the taxi. Drivers cannot charge a higher fee or fare for serving a person with a disability, nor charge a higher fee for stowing a wheelchair. It may take more time and effort to serve a person with a disability, but that is not justification for discriminatory conduct.

If a taxi company has a policy that all luggage be stored in the trunk of the cab an exception to this policy should be made to accommodate luggage on the floor, or a seat, for a passenger whose wheelchair or other mobility device has been placed in the trunk of the taxi.

### Service Animals in Taxi Services

A service animal is not a pet. Dogs are the most common service animal; however other animals can also be trained to assist customers with disabilities. Service animals are individually trained to assist a customer with a disability and are allowed to ride in the passenger compartment of taxicabs.

Certification or identification is not required for the animal.

The ADA requires a company to modify “No Pets” policies to allow the use of a service animal by a person with a disability. An exception must be made to accommodate service animals for people with disabilities.

### Vehicles

A taxi service is not required to purchase vehicles other than sedan-type automobiles in order to add accessible vehicles to its fleet. However, if a taxi company purchases or leases a new vehicle such as a van with a seating capacity of fewer than eight persons, including the driver, the vehicle must be accessible.

Accessible means meeting the requirements for transportation vehicles and service under the ADA. All the accessibility requirements for van and busses can be found in 49CFR Part 38 of the ADA regulations on the FTA website; [FTA.dot.gov](http://FTA.dot.gov); or the United States Access Board website; [Access-board.gov/transit](http://Access-board.gov/transit).

According to the ADA's requirements, private companies primarily engaged in the business of transporting people, including taxicab companies, are not required to acquire accessible vehicles when they purchase or lease used vehicles.

Both public and private transportation providers need to maintain in working condition the vehicle features that make the vehicles and service accessible and usable by people with disabilities. These features include, but are not limited to, lifts, ramps, securement devices, signage, and systems to facilitate communication with customers who have visual and learning disabilities. These accessibility features must be repaired promptly when they are damaged or out of order. If they are out of order, companies must take reasonable steps to accommodate customers with disabilities who would use these features.

Taxicab companies communicate information to the public about policies, fares, telephone numbers and other kinds of customer service details. The ADA requires this communication and information be available in accessible format such as; braille, large print, audio tapes, TDD devices, email, and accessible web sites.

The law protects both customers with disabilities and taxicab drivers, and each group has its own set of rights and responsibilities. While these standards ensure safe and fair treatment for customers and drivers, they are also a formula for good service.

Drivers must:

- Provide transportation to any person with a disability.
- Offer assistance to passengers if requested (not to include actual lifting).
- Serve customers with disabilities traveling alone and only use assistance of family members, companions, or medical/public safety personnel if the customer requests or agrees to help from such persons.
- Give the same reservation services to customers with disabilities that are available to other customers.
- Not charge customers with disabilities extra fees for necessary assistance. For example, drivers must charge the same amount to stow a wheelchair or other aid in the trunk as they would charge for a piece of luggage.
- Not deny service to a customer with a disability solely because the disability results in appearance or involuntary behavior that may offend, annoy, or inconvenience the driver.

Customers with disabilities must:

- Know whether or not they can use a typical taxicab/van. Not all taxicabs can accommodate oversized mobility aids.

- Be able to transfer from their mobility aid to the passenger compartment of the taxi without the driver's help.
- Tell drivers if they need help and explain what help is needed.
- Control their service animal at all times.
- Know their destination and be capable of paying the fare.

**Remember:** The ADA is a civil rights law that guarantees people with disabilities an equal opportunity to take part in our society. Access to transportation services is essential to full community participation.

More information about accessible taxi services can be obtained from:

**Taxi, Limousine and Paratransit Association**  
**3849 Farragut Ave.**  
**Kensington, MD 20895**  
**301-946-5700**  
**Web site: TLPA.org**

**Easter Seals Project ACTION**  
**1425 K. Street, NW Suite 200**  
**Washington, DC 20005**  
**800-659-6428**  
**Web site: projectaction.org**

## ASSISTING PASSENGERS WITH SERVICE ANIMALS

Included in the ADA regulations is the right of a person traveling with a service animal to have equal access to public transportation accommodations.

The ADA defines service animals in the following way:

***Any animal that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability.***

A transit system must permit the use of a miniature horse by an individual with a disability if the animal has been individually trained to work or perform tasks for the benefit of the individual with a disability.



The ADA prohibits questions about the nature of a person's disability. However, transit systems may ask two questions to determine whether an animal qualifies as a service animal.

- You may ask if the animal is required because of a disability.
- You may ask what work or task the animal has been trained to perform

The ADA does not specifically mention requirements for service animal identification, training, or animals in training. Therefore, it is illegal to require a person with a service animal to provide proof.

Service animals provide assistance in a number of ways. Examples of work or task include, but are not limited to; assisting individuals who are blind or have low vision with navigation and other tasks; alerting individuals who are deaf or hard of hearing to the presence of people or sounds; providing non-violent protection or rescue work; pulling a wheelchair; assisting an individual during a seizure; alerting individuals to the presence of allergens; retrieving items such as medicine or the telephone; providing physical support and assistance with balance and stability to individuals with mobility disabilities; and helping persons with psychiatric and neurological disabilities by preventing or interrupting impulsive or destructive behaviors.

The crime deterrent effects of an animal's presence and the provision of emotional support, well-being, comfort, or companionship do not constitute work or tasks.

## Post-Traumatic Stress Disorder (PTSD) and Service Animals

A service animal plays an important role in supporting an individual with PTSD. In assisting a person with PTSD service animals can interrupt flashbacks and nightmares or reduce anxiety by licking or nudging the person. A trained dog can help a person with physical tasks such as reminding them to take medication, or with turning on lights in a room. The service dog can also guide the partner out of crowded spaces or buildings or retrieve items such as telephones and other objects. The possible tasks that the animal can be trained to do is highly individualized around the needs of the person with PTSD.

### Safety Issues

Service animals are socialized and trained to interact appropriately with other animals and people. However, it is possible that a service animal could be provoked and become aggressive. You may exclude a service animal from your vehicle when the behavior of the animal poses a direct threat to the health or safety of others. You may not make assumptions about a particular animal based on your past experiences. Each situation must be considered individually.

Keep in mind the control of the service animal is the responsibility of the animals' partner. If an incident occurs while transporting a service animal, the accountability for damages or injuries should remain with the person responsible for the animal.

## Tips on Providing Assistance to passengers with service animals

- Do not stereotype passengers based on their disabilities
- Ask the passenger how you can assist them
- Do not touch or give the service animal any commands unless asked to do so by its partner.
- If necessary, remind passengers that the service animal is working and not to distract it.
- A service animal might board and exit with the passenger.
- When a service animal must ride the lift, be extremely aware of safety. Their paws, tail, head or equipment may catch in the lift mechanism, causing severe injury to the animal.
- It is not appropriate for service animals to sit on a seat. The animal will usually lie on the floor close to its partner.

## DISABILITY AWARENESS

According to the ADA, disability is defined, with respect to an individual as;

*A physical or mental impairment that substantially limits one or more of the major life activities of such individual; a record of such impairment; or being regarded as having such impairment.*

It is important to keep in mind that your passenger with a disability is a person first; a person who has feelings, concerns and opinions. That person deserves to be treated with the same respect displayed to passengers without disabilities.

Passenger conditions can vary from day-to-day. Be alert to changes and conditions that might change passenger assistance needs.

## ASSISTING THE VISUALLY IMPAIRED

When offering assistance to a passenger who has visual impairments, speak to them in a normal tone, using normal terms. Address the passenger directly, as it will help the person locate you. Speak directly to the person; if your gaze wanders your voice follows.

If you will be guiding a passenger who is blind ask how you may assist them. Permit the passenger to take your arm, showing them where your arm is by placing his or her hand on it. Stand alongside and slightly ahead of the person you are guiding. If you are assisting an individual using a “white cane” provide assistance on the side they are not using the cane.

Walk at a normal pace or a pace comfortable for you and the person you are guiding. Alert the person to changes in the walking surface (uneven sidewalk, grass, carpet, etc.) and surrounding obstructions. Hesitate before going up or down steps or curbs and make certain you vocally indicate the need to “step up” or “step down”.

Use the word STOP. It has only one meaning – cease doing what you are doing.

When showing a person who is blind to a seat, place his or her hand on the back of it. Do not try to push the person into the seat. In almost all cases the person will use his or her sense of touch to determine the type, height and width of the seat prior to sitting down.

General things to remember when transporting a person with a visual impairment:

- Always announce your entrances or exits from a room or vehicle.
- Keep your voice at a normal level.
- Try to stand directly in front of your passenger when speaking to him or her.
- Offer assistance in boarding and exiting your vehicle, and if you provide door-to-door service be certain to assist the person in getting to and from the vehicle.

## HIDDEN DISABILITIES

*Any one or combination of impairments, such as epilepsy; heart or lung problems; diabetes; cancer; kidney failure; etc., which might affect the function and or endurance of an individual.*

The passenger may appear non-disabled; have difficulty climbing steps; be unable to walk even short distances.

**Cardiovascular disease:** In many cases you will not be able to tell if a passenger has cardiovascular disease. These passengers may need extra time to get on and off your vehicle. Keep in mind that passengers with cardiovascular disease require extra patience on your part and may be fearful of any physical activity.

**Respiratory disorders:** Emphysema, bronchial asthma, and some allergies are examples of respiratory disorders.

The most helpful thing you can do when a passenger has a respiratory attack is to remain calm and encourage other passengers to do the same. In most cases the individual experiencing the attack knows the best way to deal with it. Ask how you can assist.

Make every attempt to keep the air in the vehicle as clean as possible. Closing windows and using air-conditioning helps. Your agency/organization should have a **NO SMOKING Policy**, which applies to drivers as well as passengers.

## HEARING IMPAIRMENTS

Most people will either have some hearing loss in their lifetime or will have a close family member experience a hearing loss.

The major barrier facing a person with a hearing impairment is one of communication. Unable to benefit from voice communication, persons with severe hearing impairment rely on their eyes for signals, which aid in understanding.

Unfortunately, many individuals feel that hearing loss is embarrassing or unimportant.

### Tips on providing assistance

- Speak clearly and distinctly, do not exaggerate words.
- Use normal speed unless asked to slow down.
- Provide a clear view of your mouth; waving your hands or holding something in front of your lips makes lip reading impossible.
- Try not to stand in front of a light source such as a window; the person may find it difficult to see your face, which would be silhouetted in the light making it almost impossible to read your lips.
- Use normal tone of voice unless you are asked to raise your voice. Shouting will be of no help.
- If your passenger with a hearing impairment is traveling with an interpreter, speak directly to the hearing impaired passenger not the interpreter.

## SPEECH DISORDERS

Approximately 2.1 million individuals in the United States have some type of speech impairment. Speech impairments may be caused by a variety of factors, including brain injury, drug abuse, hearing loss, neurological disorders, stroke, or physical impairments such as cleft lip or palate.

Recognize that speech impairments can significantly limit the ability to communicate, which can be devastating to an elderly person. Strong feelings of frustration, anger, shame, and isolation may occur. The person may totally withdraw.

If your passenger has speech impairment, pay particular attention to the way you talk and interact with them.

### Tips on providing assistance

- Be patient, and be very careful not to make fun of a passenger with a speech disorder.
- If you are not sure of what the passenger said, politely ask him or her to repeat the statement. Generally, people with speech disorders would much rather repeat themselves than be misunderstood.
- Repeat what you think you heard. Ask your passenger to start again where you end.
- Ask some questions that require a short answer or nod.
- If all else fails, if possible, use pen and paper to communicate.

It is important to remember, one of the most important things you can do is to continue to patiently communicate with your passengers.

## COGNITIVE DISABILITIES

Some passengers may have disabilities that affect their ability to know, think, remember, and learn (cognition). These disabilities may be mental impairments or physical disabilities that also affect the person's thinking, memory, awareness and communication abilities.

People who have cognitive disabilities may have difficulties with some or all of the following skill areas:

Thinking	Learning
Awareness	Communication/language
Orientation	Processing information
Judgment	Decision making
Memory	Emotional control

## ALZHEIMER'S DISEASE

Alzheimer's disease affects memory, speech, and other intellectual skills. People with this disease experience changes in their mood, personality and behavior. In addition they may get upset, fearful, and confused. They may become violent or display some other inappropriate behavior. They also may become suddenly fearful of people they have known for years.

Because of memory loss, and trouble understanding information, it is often necessary to repeat information, even telling them their address, where they are going, and who they are meeting.

Sometimes people with this disease have a tendency to wander. In addition to making sure they do not get into dangerous situations such as wandering into traffic, it may be necessary to complete a person-to-person drop-off.

Reprimanding passengers with Alzheimer's disease for inappropriate behavior won't help, since they may not know what they have done. Instead, ask your supervisor to talk to the supervisor and staff of any program serving the passenger, or with a family member of the passenger, to work out a solution to the problem.

Alzheimer's disease begins slowly with memory loss. It then affects speech or other intellectual skills, progressing until the person becomes totally incapacitated. It is a common, serious mental disorder and is the fourth leading cause of death among adults. Alzheimer's disease is not a natural part of aging; is not mental illness; is not curable or contagious.

## Tips on providing assistance

- Be patient, reassuring.
- Use short, clear sentences.
- Do not give too much information at one time.
- Encourage the person to sit close to you in the front of the vehicle.

## **STROKE**

*A stroke is caused by an interruption in the blood supply to the brain which may result in paralysis, loss of feeling of one side of the body, memory loss and confusion, and may cause difficulty speaking.*

### **Five symptoms of stroke**

1. Sudden weakness or numbness of the face, arm or leg especially on one side of the body.
2. Slurred words or trouble talking or understanding speech.
3. Blurring or dimness of vision, in one or both eyes.
4. Unexpected dizziness, loss of balance or sudden falls.
5. Sudden severe headache with no apparent cause.

### **What to do if you believe a person is having a stroke:**

- Ask the individual to smile.
- Ask him or her to raise both arms.
- Ask the person to repeat a simple sentence after you, such as; "It is sunny out today".

If he or she has trouble with any of these tasks, call 911 immediately and describe the symptoms to the dispatcher, as well as the time you noticed the symptoms.

### **Tips on providing assistance**

- Be patient; give the passenger time to communicate.
- Ask yes or no questions to assist in communication.
- Be willing to repeat information.

## **CEREBRAL PALSY**

*A group of conditions, not a disease, caused by damage to the brain before, during or just after birth.*

It is also referred to as a developmental disability which affects a person's posture, muscle control and in some cases, their senses.

Passengers with cerebral palsy may have a balance problem, difficulty walking, and difficulty using his or her arms and hands. In addition, the passenger may have great difficulty speaking clearly therefore, ask yes or no questions.

### **Tips on providing assistance**

- Speak as you would to any passenger.
- Speak directly to the individual, not a friend or companion.
- Be patient; allow time for your passenger to speak
- Don't pretend you understood something that was said if you did not.

## AMPUTATION

Amputation causes problems with mobility and a real or perceived loss of self-sufficiency that can cause depression or anxiety. Grief is also a common reaction. Many amputees actually experience a “mourning period” as they adjust to the change in their appearance and physical limitations.

Keep in mind that amputation often changes the way a person feels about themselves.

Becoming an amputee can be a traumatic experience, bringing with it a host of lifestyle changes. Sometimes the smallest adjustments to former habits of everyday living can be a source of hidden frustration.

## LEARNING DISABILITIES

*A disorder that makes it hard for a person to store, process or express information.*

Passengers with a learning disability may have:

- Short attention span
- Difficulty with reasoning
- Poor memory
- Difficulty communicating
- Difficulty understanding jokes, puns
- Problems understanding time and sequencing
- Some difficulty with social behavior, and skills
- Problems understanding and following verbal directions

### Tips on providing assistance

- Be direct, say what you mean.
- Don't use sarcasm and don't exaggerate.
- Give the passenger time to put his or her thoughts into words, especially if you are asking questions.
- Have patience, the passenger may ask the same question over and over.
- Announce your vehicle, stops, transfer points and major landmarks.

## INTELLECTUAL DISABILITIES

The effects of intellectual disabilities vary considerably with each individual. Some are affected severely while others are only mildly affected. Intellectual disabilities are not the same as mental illness, although some people may have both.

An individual with intellectual disabilities has a very far below average intellectual functioning (IQ below 70 to 75), and significant limitations in two or more daily living skills such as communication, self-care, social skills, health and safety, and are seen in a person before the age of 18.

Passengers may:

- Be slower in doing things like boarding the vehicle, paying a fare, taking a seat
- Not be able to read well or at all
- Have difficulty expressing themselves and may have some degree of speech impairment
- Watch what other people do to know what to do
- Be very affectionate

### Tips on providing assistance

- Treat adults as adults, and each individual as a person.
- Use eye contact.
- Use simple words and short sentences.
- Repeat information.
- Show how to do what you are telling them to do.
- Check for comprehension; ask what they are going to do now.

## MENTAL ILLNESSES

*Brain diseases that affect the passenger's ability to think, feel, and relate to other people and the environment.*

Mental illness is not the same as intellectual disabilities and can occur at any time during life, although one of the most serious forms of mental illness, schizophrenia, usually begins during young adulthood.

Mental illnesses include schizophrenia, major depression, manic-depressive disorder, phobias, anxiety, personality disorders and stress-related illnesses and disorders.

Symptoms vary depending on the individual and the type of mental illness; some of the different kinds of symptoms are:

- Confused thinking, poor concentration/memory.
- Garbled or confused speech.
- Excessive anxiety, fear, suspicion, anger or hostility.
- Hallucinations – may hear, feel, or see things that are not really there.
- Delusions – person may think they are someone else.
- Repetitive behavior.
- Difficulty with over stimulating, high stress environments.

### Tips on assisting

- Keep your tone and manner pleasant and even.
- Avoid putting a lot of pressure on the person.

## AUTISM

At this time there is no known unique cause of Autism. There is also no adjective which can be used to describe every type of person with Autism. It is a lifelong disability that usually affects a person's social interactions, learning, communication, and behavior.

One characteristic which is quite common is the individual's "insistence on sameness", i.e., following the same routine. If a transit route is changed, even slightly, the individual may become upset and even have a tantrum.

Many individuals with Autism do not realize that others may have different thoughts, plans, and perspectives than their own. As an example; the display of a ride pass may be required when boarding a vehicle. The individual may show the driver the back of the pass while they may be looking at the front, not realizing that the driver has a different view.

Some individuals are anti-social, some are asocial, and others are social. Some are aggressive toward themselves or towards others. Some may repeat (echo) words or phrases, while others may have normal language skills.

Passengers with Autism may:

- Have severe language difficulties.
- Understand but not respond.
- Seem disinterested in other people, keep to themselves.
- Rock or have other repetitive behaviors.

**NOTE: Autism is a very complex disorder, and the needs of these individuals vary greatly.**

### Tips on providing assistance

- Try to have eye contact and speak directly to the passenger, use simple, short sentences.
- Tell the passenger in advance of changes in the routine such as a different driver while you are on vacation, or a schedule change.

## TRAUMATIC BRAIN INJURY

Individuals with a traumatic brain injury may:

- Have difficulty paying attention or concentrating.
- Have difficulty remembering, understanding complex topics or issues.
- Have difficulty thinking through the steps needed to do something.
- Not move, think, or react quickly.
- Become very irritable, impatient, or frustrated.
- Have poor balance and coordination.
- Have difficulty putting thoughts into words.
- Take a long time to respond to a question.
- Have slurred speech or speak very slowly.

This is a very complex disorder, needs of these individuals vary greatly.

### Tips on providing assistance

- Use good eye contact.
- Use simple words and sentences.
- Show how to do what you are telling to do.
- Be patient.
- Do not take comments personally.

## SPINAL CORD INJURY

Approximately 450,000 people in the United States have experienced a spinal cord injury; of these, over 250,000 currently live with some degree of paralysis.

There are two types of spinal cord injury:

### 1. Complete

In a complete injury, an individual is unable to function below the level of the injury. There is no sensation or voluntary movement below the injury site.

### 2. Incomplete

An individual with an incomplete injury has some functioning below the primary injury level. Individuals can sometimes move one limb more than another, can feel body parts they are unable to move, or may have better functioning on one side of the body than the other.

In addition to problems with limb or body functioning, individuals often experience even greater changes. For example, the person may experience bowel, and or bladder control issues. Some individuals may also experience loss of involuntary functions such as the ability to breathe, to regulate blood pressure effectively, to control body temperature, to sweat below the injury level, and to control pain.

## DIABETES

*Diabetes is a disease in which the body does not produce or properly use insulin, a hormone that is needed to convert sugar, starches and other food into energy needed for daily life.*

### Major types of diabetes

**Type 1** – results from the body's failure to produce insulin. It is usually diagnosed in children and young adults. Individuals with Type 1 Diabetes **have increased** risk for heart disease, blindness, and nerve and kidney damage.

**Type 2** – the most common form of diabetes, it occurs in people of all ages and ethnic groups. Some complications of Type 2 Diabetes include heart disease, blindness, and nerve and kidney damage.

## EPILEPSY OR SEIZURE DISORDERS

*Epilepsy or seizure disorders are symptoms of brain disorders. These disorders can start before birth, or may be the result of a head injury. Medication controls seizures, although a seizure may take place at any time, even under medication.*

### Types of seizures

#### Complex partial seizure

- The most common kind of seizure, lasts a couple of minutes.
- Blank stare followed by chewing or twitching movements of the mouth or face.
- Person may wander, may make repeated movements or fumble with clothing, shout, cry, laugh, show fear, run.
- Person may sometimes understand what you say but be unable to respond.

#### Absence seizure

- Looks like a blank stare.
- Begins and ends abruptly and only lasts a few seconds.
- You might think the person is daydreaming or just not paying attention.

#### Convulsive seizure (grand mal seizure)

- The body becomes stiff, followed by rapid jerky movements.

- Person may have some frothing of saliva at the mouth.
- Person may go into deep unconsciousness and may lose bowel or bladder control.
- Usually lasts only 2 to 5 minutes but can be longer.

Grand Mal seizures usually include extensive shaking of the entire body, accompanied by temporary loss of consciousness.

It may be safest for passengers who are prone to Grand Mal seizures to sit near the front of the vehicle so the driver can provide assistance more quickly.

Do not attempt to restrain the person during a seizure. Since it is impossible for an individual to swallow their tongue, do not attempt prevention by putting your fingers or any other object into the person's mouth.

If a passenger goes from one seizure to another or if a seizure lasts more than 3 minutes, call for emergency assistance. Regardless of how long the seizure may last, inform your dispatcher as soon as possible. Do not continue on your run without a determination as to whether additional medical assistance is required.

It can be very unpleasant for a passenger to recover from a seizure to find a crowd of people around. Keep other passengers away, explain to them what is happening, and reassure them that you have called for assistance.

At the end of the seizure the passenger may be embarrassed, tired, and disoriented. Sometimes the person will have a severe headache or be physically ill and need to

make an unscheduled stop. Be patient with these passengers. Allow them time to rest and get oriented.

Except when having a seizure, people with epilepsy look, think, and act like everyone else. They ordinarily do not need any special assistance.

Epilepsy can usually be controlled with medication. It is dangerous to assume that because the person's condition was under control one day, he or she cannot have a seizure on the next.

#### Tips on providing assistance

- Remain calm. Pull your vehicle safely to the curb or side of the road, and stop.
- Fold a jacket or other soft material and gently slide it under the head of the passenger.
- Loosen the clothing around the passenger's neck.
- Secure objects that may fall onto the passenger.
- Allow the seizure to run its course. Do not attempt to restrain the person.
- Do not attempt to place anything in the mouth of the passenger having a seizure.
- Avoid having a lot of physical contact with the person as this can occasionally aggravate or prolong the seizure.
- Do not expect to be able to communicate with the person during the seizure.
- Stay with the person until he/she is fully reoriented.
- Become familiar with your agency's safety policy for reporting and further action.

# DAY TWO

## Driver Certification

### BLOODBORNE PATHOGENS

*Bloodborne pathogens are viruses or other infectious agents carried by the blood. These pathogens include, but are not limited to, Hepatitis B Virus (HBV), and Human Immunodeficiency Virus (HIV).*

The Occupational Safety and Health Administration (OSHA) regulation 1910.1030 deals specifically with bloodborne pathogens. This regulation applies to all organizations that have employees who may come in contact with potentially infected bodily fluids.

Consider that as a driver of a motor vehicle transporting passengers, it is possible that you may at some time come in contact with potentially infected body fluids; in a motor vehicle collision a passenger may be injured and bleeding; after dialysis a passenger may bleed; after radiation or chemotherapy treatments a passenger may vomit.

Knowledge of, and compliance with, the bloodborne pathogen regulation is the best way to protect yourself, your family, employer and passengers from infection.

### Universal Precautions

The bloodborne pathogens regulation recommends the use of universal precautions which are a set of protective measures, primarily aimed at preventing, bloodborne diseases, which can aid in the prevention of all kinds of disease.

Treat all blood and body fluids as potentially infectious for HIV, HBV, Hepatitis C virus (HCV) and other pathogens. It is highly recommended that you wash your hands thoroughly before hand to mouth, nose, or eye contact.

### **Maintain Barrier Protection**

The most basic protection is a barrier between yourself and the contaminated material.

Unbroken skin is a barrier against bloodborne pathogens. Any break in skin may provide a pathway for infected blood or other potentially infected materials to enter your body. Infected blood or other material can enter through;

- Open sores, cuts, abrasions
- Damaged or broken skin such as sunburn or blisters
- Acne
- Hang nail
- Paper cuts

### **Biohazard Cleanup Kit (Spill Kit)**

Each vehicle should be equipped with a biohazard kit. Make it a regular part of your daily pre-trip inspection routine. Knowing how to use the spill kit, which is your primary source of personal protective equipment, is of extreme importance.

As part of your Pre-Trip inspection routine it is a good idea to open the kit and verify the presence of required materials. If something is missing have it replaced immediately.

If the kit is sealed do not open it for inspection. However, verify that the seal is intact and make a notation on your inspection form.

A common practice is that fixed route public transit bus operators will call for assistance and a change of vehicle, in the event of possible contamination. Spreading newspapers over a spill can prevent coming in contact with infectious materials while waiting for responders, and will assist in containing the material to one area.

However, this option may not be available to paratransit drivers. It may be the driver who is responsible for the cleanup of the potentially infectious material. Therefore, knowing how to use the spill kit, which is your primary source of personal protective equipment, is of extreme importance.

## Hepatitis

Hepatitis is a general term that refers to inflammation of the liver. Viruses, alcohol, or chemicals can cause it.

Cirrhosis of the liver is the term that describes scarring or permanent damage to the liver. Severe or chronic hepatitis can lead to cirrhosis as well as liver cancer. A damaged liver can lead to terminal illness and liver transplants may be required to prolong life.

### Hepatitis A (HAV)

*A virus spread by infected feces that contaminate food or drinking water and infects approximately 35,000 people in the United States each year.*

### Hepatitis B (HBV)

*A virus that causes serious liver disease, and is sometimes fatal. It causes inflammation of the liver, and can lead to cirrhosis of the liver and liver cancer.*

HBV is 50 to 100 times more infectious than Human Immunodeficiency Virus (HIV) and can survive in dried blood up to seven days.

### Hepatitis C (HCV)

*Like HBV, HCV is a viral infection of the liver. It causes inflammation of the liver and is the leading reason for liver transplants in the United States. It is a chronic illness.*

If someone gets sick or injured on your vehicle you should:

- Remain calm.
- Comfort the injured/sick person.
- Use universal precautions and put on disposable gloves.
- Call for medical assistance at your location.
- Use a biohazard spill kit for cleanup.

## Human Immunodeficiency Virus (HIV)

HIV is the virus that causes Acquired Immunodeficiency Syndrome (AIDS). It is an infectious disease that currently has no cure. It attacks certain white blood cells, T-Cells, and when the T-Cells die they release more viruses into the bloodstream causing more T-Cells to be infected and die.

When HIV develops into AIDS, symptoms become severe. The body is unable to resist common viruses, or the complications associated with them. Virtually every system of the body is attacked. Eventually the body is no longer capable of withstanding the various infections and ailments, and organ systems collapse, which ultimately leads to death.

HIV cannot be spread by inhalation, and cannot be spread by casual contact, like touching, shaking hands, hugging or closed mouth kissing.

## AIDS

AIDS renders the body's immune system unable to resist invasion by several microorganisms that cause serious infections. It is usually characterized by severe weight loss and fatigue, and frequently by neurological complications due to damage of cells of the brain. There is also a high incidence of certain cancers, especially Kaposi's sarcoma, which shows up as purple lesions on the skin, and tumors known as B-Cell lymphomas. The virus usually remains dormant for some time and it may take up to 10 years for symptoms to develop.

Casual contact in general is not a risk factor for infection. The virus is transmitted by blood – to blood. Therefore, any time you provide first aid, or assistance to an injured passenger, be certain to practice universal precautions.

Others, sometimes including their own families, often reject AIDS patients. Courtesy on your part will be deeply appreciated.

## Special needs of passengers with AIDS

- Many individuals with AIDS do not need special assistance
- Maintain client confidentiality
- Be careful not to rush these passengers and use the same courtesy and common sense you would with other passengers

## Kidney Dialysis

Your kidneys maintain body fluid levels by excreting fluids when the body has excess, and conserving fluids when the body fluid is low. The kidneys assist in regulating blood pressure by excreting excess fluids and a chemical called rennin. The kidneys filter the entire blood supply every 2 minutes in order to perform their major job of removing waste from blood and discharging it as urine.

## Hemodialysis

Hemodialysis is an artificial process of removing waste and excess fluid from blood. The process utilizes the principle of diffusion by employing an artificial kidney machine.

Hemodialysis treatments are required 2 to 3 days a week, and each treatment lasts from 4 to 6 hours.

Individuals who go through this treatment may be carrying up to 15 pounds of excess body fluid prior to treatment. Upon completion, the individual may be extremely weak and feel ill. Make absolutely certain that you provide assistance boarding and exiting your vehicle.

Remember kidney dialysis passengers may:

- Wear a Med Alert Bracelet.
- Scratch a lot from dry skin caused by blood chemistry.
- Have poor vision.
- Require assistance standing, walking and entering or exiting your vehicle.
- Experience light-headedness and blackouts.

- Bleed from the access to their blood supply. Should this occur, seek medical attention immediately while the individual applies direct pressure to control the bleeding.

## MOBILITY EQUIPMENT AND FEATURES

### Walkers

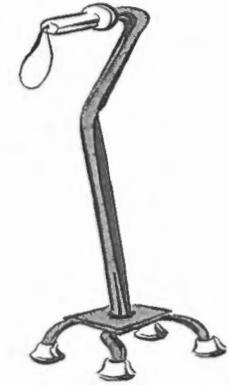
Passengers using this device will lean fairly heavily on it, placing it ahead of them and walking to it. This is a very practical device, particularly common among the elderly and may have a seat attached so the user may rest. Passengers using walkers may be moving quite slowly since balance is a problem. Do not rush your passengers.

It will be extremely difficult, if not impossible, for the passenger to utilize the steps in your vehicle. Therefore, the ADA requires that this individual be permitted to use the vehicle lift for entry and exit of the vehicle.



### Canes

The primary function of a cane is to maintain balance when walking or standing.



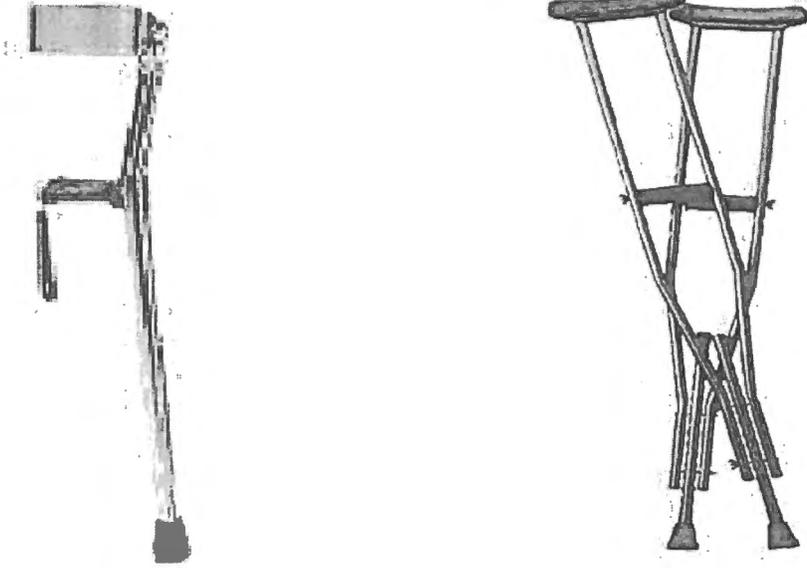
The "White Cane" is not used for support. The user taps the cane on the ground, on the floor or against objects for guidance. Only those individuals who are legally blind are entitled to use a white cane.



When providing assistance to a passenger using any type of cane, do so on the side opposite the cane. Be certain to ask your passenger if they would like assistance, and if so, how you may help.

## Crutches

There are two basic types of crutches; underarm, and forearm. Crutches assist with balance and body weight support.

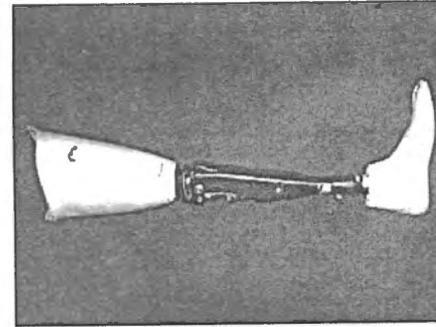


All passengers using crutches may have a balance problem. Ask if they would like, or require, assistance and how you may provide it.

Remember, it may be easier for your passenger to use the accessible entrance (lift or ramp) for boarding and exiting the vehicle.

## Prosthesis

A prosthesis is an artificial device that replaces a missing body part such as an arm or a leg.



A passenger using a prosthetic leg may walk slowly and have difficulty walking up or down steps or your vehicle.

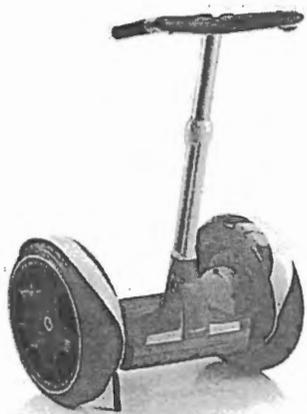
Be patient and do not make your passenger feel pressured to move faster.

Keep in mind that the human body loses body heat mostly through the skin. The human air conditioning system is sweat. The loss of a limb reduces the ability of the amputee passenger to lose body heat. Therefore, the passenger can readily overheat on a hot vehicle or when sitting in the sun.

Make certain your passenger is comfortable.

## Segway

The Segway small electric vehicle is a two-wheeled, gyroscopically stabilized, battery powered personal transportation device. Some individuals with disabilities may use a Segway as a personal mobility aid in lieu of more traditional devices like a wheelchair or scooter.



A Segway vehicle is not a wheelchair. However, when used by a person with a disability as a mobility device, a Segway is part of the broad class of mobility aids that the ADA intends will be accommodated. In this way, a Segway mobility device occupies a legal position analogous to canes, walkers, etc.

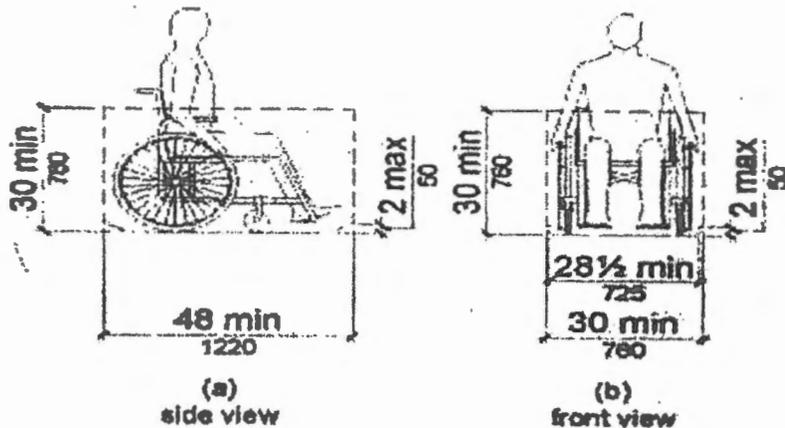
## WHEELCHAIRS

The DOT definition of a wheelchair is:

*A mobility aid belonging to any class of three-or more-wheeled devices, usable indoors, designed or modified for and used by individuals with mobility impairments, whether operated manually or powered.*



The ADA no longer uses the term “Common Wheelchair” because the requirements for lift platforms, and wheelchair spaces specify the appropriate dimensions for wheelchairs. Therefore, a device used by individuals with disabilities for mobility must fit an “envelope” which is 30 inches wide by 48 inches long.



It must be remembered that persons with mobility disabilities may use devices other than wheelchairs to assist with locomotion. However, the DOT ADA rules do not require a transit system to accommodate devices that are not primarily designed or intended to assist persons with mobility disabilities (eg, skateboards, bicycles, shopping carts). In addition, transportation providers are not required to permit an assistive device to be used in a way that departs from or exceeds the intended purpose of the device (eg, to use a walker with a seat, intended to allow temporary rest intervals, as a wheelchair on which a passenger sits for the duration of a ride on a transit vehicle). (49CFR part 37, 37.3)

The first thing to consider about a wheelchair is its great importance to its owner. The chair is as valuable to the user as the body part or function it has replaced. Many wheelchair users consider their wheelchair to be a part, or extension, of their own body. Understanding that all people have a space requirement, unnecessary leaning on or touching the chair is similar to leaning on or touching the person.

Proper assisting techniques insure safety and comfort for the occupant. Just as you would assist an ambulatory person, slowly and carefully, move a person in a wheelchair by making your movements smooth and gentle. Do not jerk or jolt, which can be very uncomfortable or even painful for the person in the wheelchair.

When moving a person in a wheelchair you must be confident of your ability to be in control, and be able to relay this confidence to your passengers. Passengers are often put in vulnerable situations, as when sitting on a ramp or lift. There is total dependence on your firm but gentle control.

You should prepare your passenger for movement by telling him or her when you are going to start that movement. A simple verbal cue will prepare the passenger for your next move.

Because of a wheelchair's value to the occupant, it is important to treat it carefully. Take care not to scratch the tubing on corners of lifts or vehicle seats. The securement straps should not gouge or scar the frame of the chair.

The wheelchair itself should be in proper working order. Malfunctions can create hazardous situations when transporting passengers in wheelchairs. Spokes should be tight, handgrips secure, and wheel locks effective. Wheel locks can lose their grip with tire wear, resulting in frequent adjustments. Always be aware of the wheelchair's condition and report safety defects to the owner.

### Center of gravity

Assisting passengers in wheelchairs involves a few basic maneuvers that, when done properly can move a wheelchair around efficiently and easily. Just getting the feel for pushing a wheelchair around on a level surface is the first step in becoming accustomed to its movement.

As you push the chair around you can feel that the weight is distributed fairly evenly between the front and rear wheels. The center of gravity in an unoccupied chair is just above and forward of the rear axle.

The center of gravity is raised, however, when the chair is occupied and changes to the top of the armrests. Therefore, even though weight is well distributed, the short wheelbase and high center of gravity make it possible to spill a person forward. Hitting a crack in the sidewalk or the base lip of the lift with the front wheels may be enough to cause such an accident.

### Driving techniques

Smooth... steady... even...

You should be giving this type of ride to all passengers and especially wheelchair users.

Centrifugal force (outward) is exerted on wheelchairs when your vehicle turns a corner or takes a curve in the road. Regardless of the direction of the turn or curve, the passenger may feel as if they are being pulled forward out of their chair, or that the chair may tip over. Therefore slow steady turns and curves must be made.

Wheelchairs pick up road shock each time the vehicle hits a bump. Care and judgment are needed to avoid unnecessary bumps or potholes. If a road is unavoidably bumpy, slow down and ease your way through. Stopping and starting the vehicle exerts forces on the sides or back of the wheelchair and its occupant. Fast movement in any direction may bruise the passenger if they are thrown side-to-side against the wheelchair armrests.

### Frequently asked questions

1. Does a wheelchair need brakes in order to use transit service?

The answer is no. The DOT ADA regulations' definition of a wheelchair does not include a requirement for brakes or any other equipment. Therefore, a transit provider may not deny transportation to a wheelchair user because the wheelchair does not have brakes or the user does not choose to set the brakes.

2. Can a transportation provider require a person to transfer from a wheelchair to a vehicle seat?

The answer is no. Section 37.165(e) of the DOT ADA regulations allows persons who use wheelchairs to transfer to a vehicle seat, if one is available. Such a move is the rider's decision and the transit provider cannot force a rider to transfer to a vehicle seat, although the transit provider can suggest a transfer in a noncoercive way.

**Tips for drivers:**

- Talk directly to the person in a wheelchair rather than the person pushing it. In extended conversation bend your knees and stoop to the person's eye level.
- Learn the locations of accessible ramps.
- Ask if assistance is needed before you assist, including pushing a wheelchair. Let the person in the wheelchair know when you are ready to push so they can balance their body in preparation for movement.
- Whenever possible, place yourself on the low side of the passenger for whom you are providing assistance. When going up an incline, ramp or curb, you should be behind the chair facing and walking forward; when coming down, you should be behind the chair holding onto the handgrips, facing the direction you are coming from. Make certain you are checking behind you for obstacles, slippery spots, etc.

**LIFT OPERATION**

***The information provided here covers general procedures that will apply to all lifts. Your agency may have specific policies pertaining to vehicle lift operations. It is recommended that you check with your supervisor concerning those policies.***

### Lift Operation

Lifts make it possible to board wheelchairs of various sizes and weights in an efficient and safe manner. However, lifts are potentially hazardous equipment. They must be maintained and operated properly. Considerable caution and awareness is needed when operating a lift.

Remember, lifts may differ slightly in structure and operation and no one but the vehicle operator should operate the lift. It is important that each vehicle operator be familiar with all lifts likely to be used.

Upon arriving at your destination, stop on level ground, put the vehicle transmission in "park" and secure the emergency brake. Make certain there is room for the lift platform to open without hitting obstacles. Also make certain that your vehicle hazard (four way) lights are flashing.

It is the responsibility of the vehicle operator to properly open, secure and close the lift doors, to load and unload the passenger on and off the lift platform and to properly use all lift functions.

### Lift operation procedures

Understand that these procedures are in place for safety reasons. They have not been developed to hassle a driver or passenger.

- Open the lift doors from outside the vehicle and securely lock them in the open position.
- Greet your passenger. Talk to them not around them. Ask you passenger if they would like assistance in getting onto the platform.
- The passenger may ride on the lift facing the vehicle if they desire. Explain the hazards involved and request that the passenger ride on the lift with their back to the vehicle. (Remember, under ADA it is their choice).
- Set the wheel locks on a manual chair. If the passenger is using a motorized chair ask them to turn the power off once on the lift platform.
- If the passenger is capable, ask him or her to hold the handrails on the lift. If they are not capable of grasping the hand rails ask them to keep their hands in their lap.

***The lift must always be operated from the ground. Do not remain in the vehicle while raising or lowering the lift platform, and do not ride on the lift with passengers who are using a wheelchair.***

***Stand on the ground with one hand on the wheelchair and one hand operating the controls; raise the platform only a couple of inches. Check the front safety barrier to be certain it is locked. Only after you are certain the***

**barrier is locked, continue raising the lift platform to the vehicle floor level.**

**Put the lift controls in a secure location with one hand while holding the wheelchair with the other. Release the wheelchair wheel locks and push the wheelchair into your vehicle reach in and lock one wheel. Never leave a wheelchair sitting on the lift platform unattended. When boarding, push it into your vehicle, when exiting pull it out.**

(NOTE: this procedure may be difficult for some drivers. Therefore, ask the passenger if they can assist moving their wheelchair in and out of the vehicle.)

#### Power wheelchairs

Extra caution is needed when loading a power wheelchair onto a lift. Some individuals operating these devices are slow in their reactions, or may have involuntary movements, which may cause their hand to hit the controls. Also, some of the devices may be set on high speed.

When boarding passengers using power wheelchairs ask them to turn the power to the device off after they have gotten onto the lift. After the lift comes to floor level ask the passenger to turn the power on again and only tap their controls for the direction you want them to travel. This may require two or three taps, but you want to be certain they are going in the correct direction.

When exiting the vehicle, again ask the passenger to tap their controls once, twice or three times to get them onto the lift platform. Once on the platform tell them to turn off the

power. Make certain you are clear in your directions, and that the passenger understands what you are saying.

#### Standees on the lift

Remember the lift is the accessible entrance to your vehicle. Therefore individuals using walkers, crutches, canes or braces, and persons who otherwise have difficulty using steps are permitted under ADA to stand on the vehicle lift for entry and or exit of the vehicle.

Standees should stand in the center of the platform facing the direction of their travel. If capable, the passenger should hold both handrails when on the platform. The driver must determine whether it is safe to ride the lift with the passenger, or safer to operate the lift while standing on the ground. How you can better protect the passenger must be assessed with each standee's use of the lift.

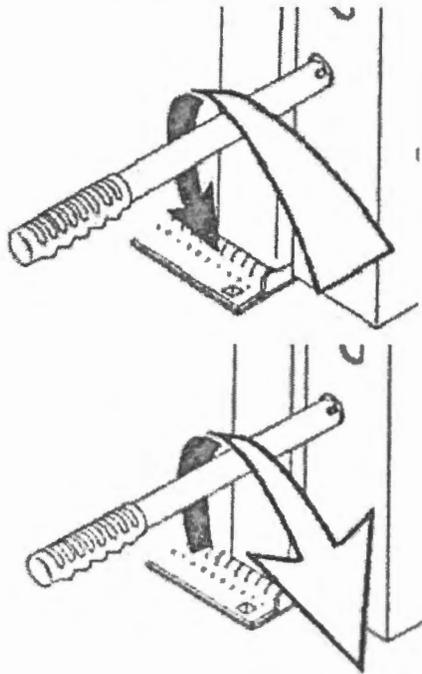
#### Manual lift operation

Lifts are equipped with a hydraulic manual pump located within the plastic motor housing on the side of the lift. A steel pump arm may be mounted on the inside or outside of this plastic housing.

NOTE: During manual operation the driver of a paratransit vehicle must be inside the vehicle. This is the only time under normal conditions that it is acceptable for the driver to operate the lift from inside the vehicle.

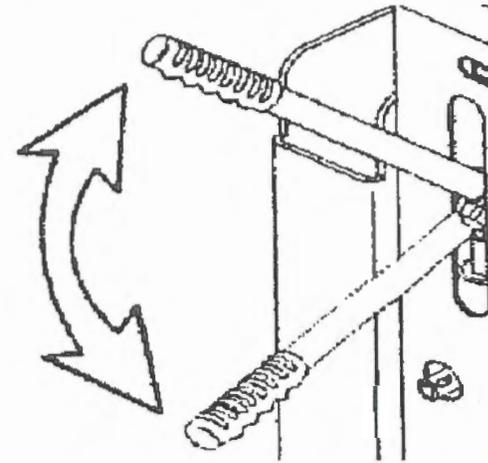
## Lowering

To lower the platform manually, insert the pump arm into the bleeder valve making certain the two flanges fit inside of the pump arm. The pump arm should be parallel to the vehicle floor. Turn the pump arm, counter clockwise, just enough to allow the platform to drop slowly. Do not unscrew it too far or hydraulic fluid will leak. When the platform has reached the ground, tighten the valve by turning it clockwise.



## Raising

To raise the platform, insert the pump arm into the pump opening. Pump the arm by raising and lowering it a full stroke. The lift platform will rise very slowly to floor level. Talk to your passenger during this entire operation to make certain they are aware of what is happening.



If your lift is fully automatic, after moving your passenger off the lift, continue to pump the arm to fold the lift into the vehicle. If your lift is not fully automatic refer to the lift operating instructions, which should be mounted directly on the lift.

## FMVSS 403 compliant lifts

The 403 lift must be classified by the National Highway Traffic Safety Administration (NHTSA) as a "Public Use Lift" with a continuous minimum lifting capacity of 800 pounds.

## BRAUN 403 compliant lifts

Vehicle movement is prohibited unless the lift is fully stowed and the lift will not function unless the vehicle is parked and secured.

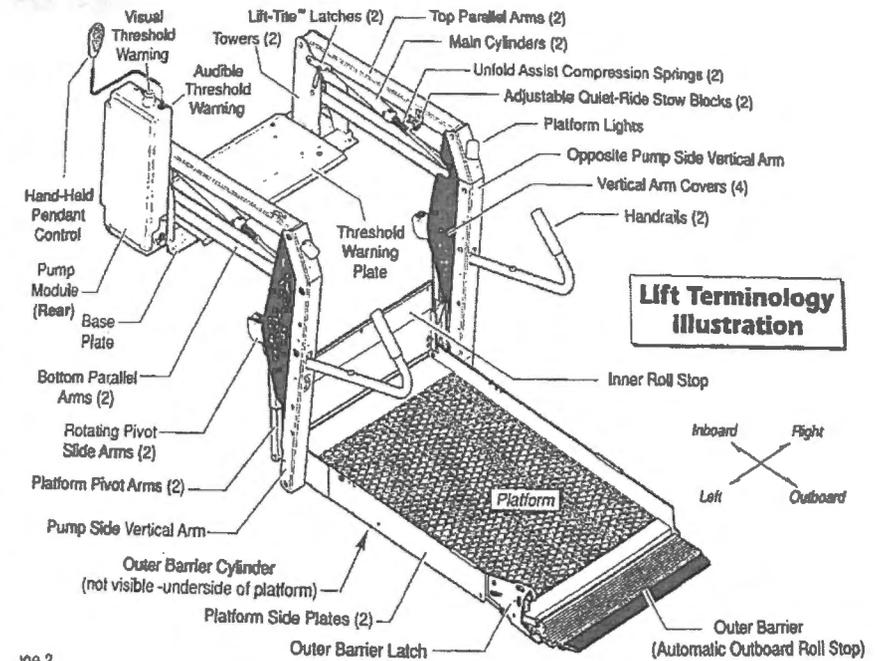
A visible and audible threshold warning system will activate if 25 pounds or more are on the threshold warning plate when the platform is 1 inch or more below floor level.

The inner roll stop and the outer barrier sense weight to prohibit lift operation. The lift will not function if 25 pounds or more are on the inner roll stop or outer barrier stop. The lift platform cannot be folded if 50 pounds or more are on the platform.

The lift cannot be raised more than 3 inches unless the outer barrier is vertical and the outer barrier latch is positively engaged.

A power switch is located on the power box to the lift itself and is accessible from outside the vehicle when the lift doors are open.

## BRAUN LIFT



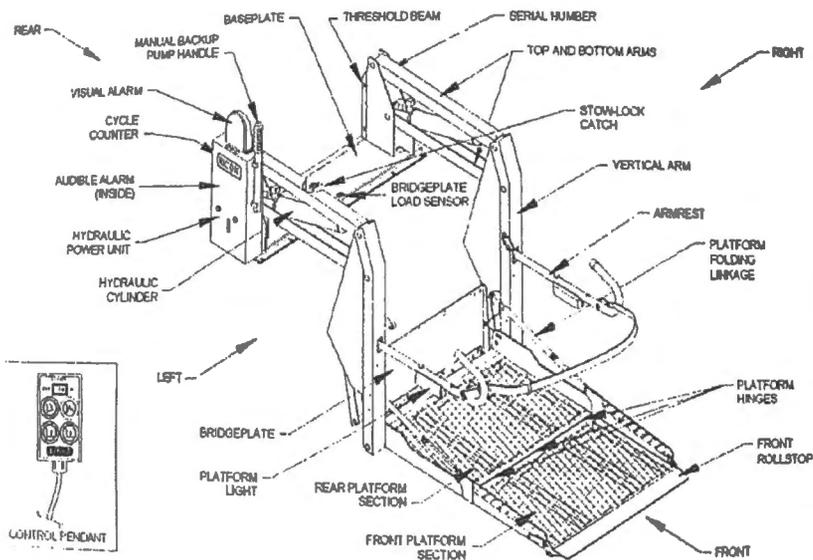
## RICON 403 compliant lifts

Two light beams detect if someone passes through either beam when the platform is 1 inch below the floor. An audible and visual signal is activated.

The RICON lift bridge plate is equipped with a load sensor that will prevent lowering of the lift platform if an object is on the bridge plate.

The RICON lift will not operate unless the occupant restraint belt is properly fastened.

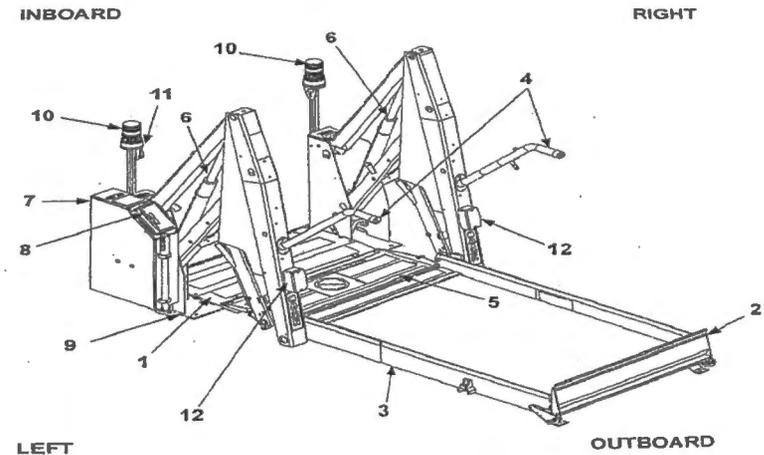
A power switch is located on the hand controls for the lift.



## MAXON Mobility lift

A visible and audible threshold warning system will activate if 50 pounds or more are on the threshold warning plate when the platform is 1 inch or more below floor level.

A power switch is located on the power box of the lift itself.



- |                       |                                |
|-----------------------|--------------------------------|
| 1. Threshold Plate    | 7. Hydraulic Power Unit        |
| 2. Outboard roll stop | 8. Lift controller (brain box) |
| 3. Platform           | 9. Base                        |
| 4. Handrails          | 10. Threshold warning beacon   |
| 5. Inboard roll stop  | 11. Threshold warning alarm    |
| 6. Hydraulic cylinder | 12. Platform lights            |

### Cycle counter

All BRAUN and RICON 403 lifts have a lift cycle counter located on the hydraulic pump housing, visible through a window on the housing. The counter advances each time the platform moves through a complete cycle.

The counter on the MAXON Mobility lift is located within the lift controller brain box display. One cycle is counted each time the lift is unfolded from the stowed position to floor level, lowered to the ground, raised to floor level, and then stowed. One lift is counted each time the lift is lowered from floor level to the ground, and raised back to floor level.

It is very important that these cycle and lift numbers be entered onto your Pre-Trip Inspection form each day. The numbers are used to schedule required preventive maintenance services.

### WHEELCHAIR SECUREMENT

#### Requirements under the ADA

Section 38.23(d) of the DOT ADA regulation (49CFR Part 38) requires all ADA compliant vehicles to have a two-part securement system; one to secure the wheelchair, and a seatbelt and shoulder harness for the wheelchair user. Seat belts and shoulder harnesses shall not be used in lieu of a device that secures the wheelchair or mobility aid itself.

The securement system shall be placed as near to the accessible entrance as practical and must have a clear floor area of 30 inches by 48 inches for each mobility device. Such space may adjoin, and may overlap, an access path. Securement areas may have fold-down seats - provided the seats, when folded up, do not obstruct the clear floor space required. All vehicles 22 feet in length, or longer, must have two securement locations, while vehicles less than 22 feet in length must have at least one securement area.

The securement system must limit the movement of an occupied wheelchair or mobility aid to no more than 2 inches in any direction under normal vehicle operating conditions.

Since 1991, all vehicles must have securement locations for wheelchairs and other mobility aids that face forward or rearward. However, rearward facing is permitted only when a padded barrier extending from a height of 38 inches from the floor to a height of 56 inches,

with a width of 18 inches laterally centered immediately in back of the seated individual is provided.

### Securement

Currently the major company providing wheelchair securement systems widely used within the paratransit and community transit industry is Q'Straint/Sure-Lok. The securement system includes a minimum of four floor-mounted belts and a lap and shoulder belt. Q'Straint/Sure-Lok requires that all belts be utilized each time the system is used.

**When securing a mobility device in your vehicle DO NOT TAKE SHORTCUTS, REMEMBER, THE SAFETY AND SECURITY OF THE PASSENGER IS OF EXTREME IMPORTANCE.**

### Placement of the wheelchair

The wheelchair and occupant must face toward the front of the vehicle; center the wheelchair between the floor tracks or securement plates. Apply the wheel locks when securing a manual wheelchair and turn off the power on motorized chairs.

### Attaching the front straps

The track/pocket fitting on the belt must be attached to the floor track/pocket 3 to 8 inches outside the front wheel, providing side-to-side stability. Do not permit the strap to interfere with the passenger's footrests or to conform around any part of the wheelchair. Make certain to maintain a clear load path from floor to wheelchair.

When inserting the track/pocket fitting into the floor, pull on it to make certain it is secure. The other end of the strap must be looped around a permanent part of the chair as close to the seat cushion as possible without going above it. Ideally there should be a 45-degree angle from the floor to the wheelchair.

When using a retractor type system, retract the belts until tight. If you do not use retractors, pull the loose end of the strap toward the point the belt is attached to the wheelchair and tension through the buckle. Lock the buckle while maintaining tension.

### Attaching the rear straps

After moving to the rear of the wheelchair, release the wheel locks and pull the chair rearward, then reapply the wheel locks. When securing a motorized wheelchair ask the occupant to move the chair rearward, and then turn off all power. Doing this removes all slack in the front securement belts.

Attach the track/pocket fitting in the floor just to the inside of the rear wheels. Pull upward on the strap to make certain it is secure. The other end of the strap must be looped around a permanent part of the chair as close to the seat cushion as possible without going above it. Ideally there should be a 45 – degree angle from floor to wheelchair.

Check to ensure that all securement belts are properly attached and tensioned and that the wheelchair is secure

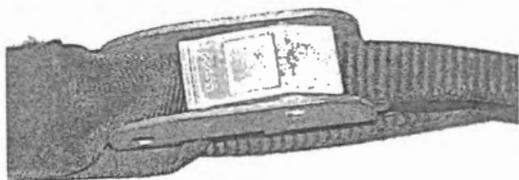
and does not have more than 2 inches of movement in any direction.

### Web Loops/Quick Straps

In an attempt to assist in safe securement of almost all wheelchairs, Q'Straint/Sure-Lok has developed a webbing loop/quick strap. These loops come in various lengths and are relatively inexpensive. If these loops are going to be used, explain to the occupant of the wheelchair the difficulty in proper securement and ask if the loop may be attached to their mobility device to assist with proper safe securement.

### Cautions

- Do not attach the securement straps to the wheels or any detachable portion of the wheelchair.
- Do not allow the straps to conform or bend around wheels, footrests or any other object.
- Never use only the cam buckle straps on all four points of attachment to the wheelchair frame. The cam buckle is a slack-removing device and can only tension to the extent of the operator's strength and angle of pull. At least two of the securement straps must have full tensioning capability.



- Do not use different styles of buckle straps for attachment to the same end of the wheelchair such as one retractor and one non-retractor.
- Do not cross the securement straps or attach to the cross piece under the seat. This may place added stress or unequal load forces on the wheelchair frame and may contribute to collapsing or tipping of the wheelchair.

## Securing the Wheelchair Occupant

### Requirements under the ADA

Under the broad nondiscrimination provisions in the DOT ADA regulations, a transit operator is not permitted to require the use of seatbelts and shoulder harnesses by wheelchair users, unless the transit system requires the use of these devices by all passengers.

If a seat occupant restraint system (seat belt) is provided at each passenger seat location, and the transit provider has a written policy requiring seat belt use, all passengers must use that provided occupant restraint system.

### WC 19 Wheelchairs and securement systems

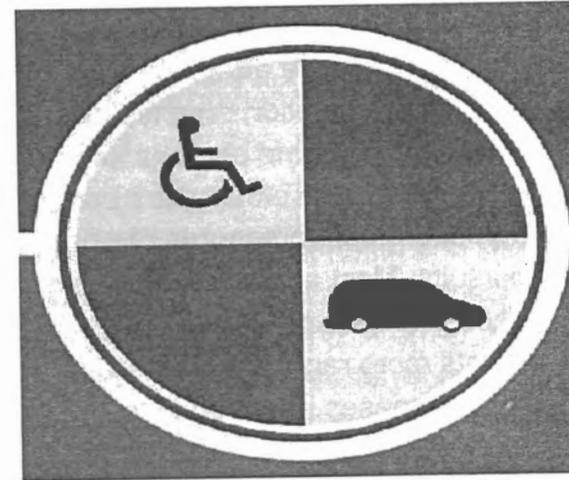
Many wheelchairs are equipped with a "seat belt" permanently attached to the seat portion of the device. The vast majority of these belts are for postural support, used to assist in keeping the occupant sitting upright in the device.

**This belt is not a certified lap belt that is designed and tested for use in conjunction with the wheelchair and occupant securement system. NEVER use a postural support belt in place of a properly certified seat belt and shoulder harness.**

In late 2015 wheelchairs will be manufactured compliant with WC19. These devices will permit the safe securement of the occupant shoulder harness directly to the lap belt permanently attached to the wheelchair. This will also eliminate the need for a lap belt secured to the floor of the vehicle.

**CAUTION:** If the wheelchair does not have a permanent label identifying it as a WC19 wheelchair – Do not allow the lap belt to substitute for the required lap and shoulder belt combination.

Wheelchairs that comply with WC19 standards are labeled with the symbol below:



**NOTE:** The actual procedure for securing the shoulder belt and lap belt is going to vary from wheelchair to wheelchair and securement system model to securement system model. Attached to the interior vehicle wall, in the securement area, should be a diagram of the securement system installed in your vehicle. Read this information.

## TRANSPORTING AN AGING SOCIETY

People are living longer today than ever before. Having the freedom to get around in the community is equally as important in old age as in youth. However, it is harder for elders to get around in their communities than it is for younger people.

### Problems associated with aging

Problems experienced by older people are attracting our attention as more and more of our population reaches old age. Aging is a very individual matter. Some persons are young at 65, others are old. For some the older years bring a sense of accomplishment, freedom from pressures of work and time to enjoy leisure pursuits. Most adjust to advancing age gradually and gracefully. For others older age brings difficult and painful adjustments more rapidly and they are compounded by other factors. Diseases may add to the normal aging process. Heart disease, arteriosclerosis or both, not only limit physical strength, stamina and mobility but also lead to losses of enjoyed activities. Personal losses – death of their spouse, close relatives, or friends – remove important sources of comfort and support, resulting in loneliness. Without meaningful work to do there is no compelling reason to get up in the morning. Financial resources are reduced but medical expenses increase. Aging people face a loss of value in our society, which can be debilitating. These multiple losses are inescapable and frightening. A person's personality traits and how he or she

cope with life are basically the same in old age as they were in younger years. People cope differently. Some are angry, irritable, depressed, self-pitying, or dependent.

Driving the elderly is a very personal service. Drivers may see the same people day after day, month after month. It is not unusual for drivers to learn about a rider's health, family, and personal problems.

Older people depend on you – their driver. You may see more of this person than any other member of the public. For someone who lives alone, a long ride in a car, van or bus, may be a social event.

Drivers see people at home and see the condition of their house, their yard and the individual over time. Drivers hear riders chat during a trip. A driver is likely to observe a sudden change or serious problem. The driver is not expected to make judgments on an older person's needs. However, you play a critical role in noticing that this person needs help, and informing your supervisor of your observations can mean the difference between a rider's life and death.

Be aware of the following conditions that may indicate an older rider is in trouble:

1. Communication – being confused, forgetful, excessively angry or hostile
2. Economic condition – being very confused about money matters, counting coins for the ride, expressed trouble paying bills or being unable to afford your transportation

3. Social condition – seems isolated from social contact; a possible victim of abuse or neglect.
4. Emotional health – making any strong statement of rejection, not sleeping well, having recently lost a spouse, relative friend or pet; appearing anxious, fidgety, or withdrawn
5. Personal appearance – being unkempt; having dirty clothes or uncombed hair or being unshaven
6. Physical limitations- having sever difficulty in seeing, speaking, hearing, or moving
7. Condition of home – being in need of repair, having a neglected yard, old newspapers on the lawn, porch, or sidewalks, offensive odors, or unattended pets.

If you see any of the above conditions, particularly if they have changed, notify your supervisor. Suggest that your supervisor may want to notify the local Office on Aging of the situation.

Never ignore something out of the ordinary. When dropping people at senior centers or at a doctor's office do not assume that others will notice what you have observed; alert staff of your observation immediately.

#### Tips for drivers

- Allow older passengers extra time for getting up and down, and in and out; be supportive and don't make the elderly passenger feel pressured.
- As a driver you are not expected to be a counselor, but listening and talking about current events or television programs are appropriate if it does not distract you from your driving.

- Consider that an elderly person's trip to the doctor may be the only social activity for the day, week or month.
- When passengers' words are angry and blaming, it is helpful to think about how that person might be feeling and not respond to the words; keep your emotions calm so that your driving is not affected.
- Use your sense of humor and make your passengers laugh.

## SEXUAL HARASSMENT

Sexual harassment is defined as; unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct;

- Gender harassment; generalized gender-based remarks and behavior
- Seductive behavior; inappropriate, unwanted, offensive physical or verbal sexual advances
- Sexual bribery; solicitation of sexual activity or other sex-linked behavior by promise of reward
- Sexual coercion; coercion of sexual activity by threat or punishment
- Sexual assault; gross sexual imposition like touching, fondling, grabbing, or assault.

Sexual harassment can occur in a variety of circumstances including but not limited to the following:

- The victim as well as the harasser may be a woman or a man. The victim does not have to be of the opposite sex.
- The victim does not have to be the person harassed but could be anyone affected by the offensive conduct.
- The conduct of the harasser must be unwelcome.

### Appropriate vs. Inappropriate Behavior

Your passengers may be friendly and anxious to meet you, or they may be shy and withdrawn. In either case how you act, or do not act, will be interpreted by your passengers in ways that you may not have intended. Holding the hand of a

passenger when assisting boarding and exiting the vehicle may be interpreted as a sexual overture. A personal relationship that you may offer can be misinterpreted.

### **DO NOT BECOME SOCIALLY INVOLVED WITH YOUR PASSENGERS.**

#### Remember

- Call your passengers by name, not "pet" names
- Ignore sexual overtures
- Report to your supervisor instances of inappropriate passenger behavior.
- Avoid conversations about religion, politics, sex or morals
- Do not offer advice unless related to the vehicle and safety of passengers.

## **ACCIDENTS AND EMERGENCIES**

Your passengers literally place their lives in your hands when they board your vehicle. It is you to whom passengers will initially look for help and protection during an emergency. This is a tremendous responsibility.

In an accident or emergency, your responsibilities range from having the ability to protect yourself and your passengers from injury or death, to protecting yourself and your organization afterwards from fraudulent or excessive liability claims.

You must also protect your vehicle from damage, or further damage, and keep your passengers as comfortable and as calm as the situation permits.

When there is an accident or emergency involving your vehicle or passengers, you are responsible for handling that situation in a way that lessens the risk of injury or death to your passengers and to yourself.

Therefore, as a transportation vehicle operator, you must have thorough knowledge and understanding of the basic accident and emergency handling procedures in order to maintain that trust.

The four basic accident and emergency handling procedures are:

1. **Keep calm** – you are the person who must make rational and informed decisions. Pause for a moment; take a deep breath; take control.

2. **Protect your passengers, yourself, your vehicle** – determine whether the vehicle must be evacuated or not. Make certain your passengers are in a safe location and do not wander into danger. Do not become so involved in the situation that you move in front of traffic. Be aware of circumstances around you. Move the vehicle only when you are instructed to, and put it in a location where it will be safe from further damage.
3. **Contact your dispatcher** – advise the dispatcher who and where you are, that you have had an accident and whether or not anyone appears injured or is complaining of injury. Ask the dispatcher to request the police and, if necessary, an ambulance. It is important to stay in contact with the dispatcher.
4. **Complete the required reports** – you are responsible for completing accident reports thoroughly and in full detail. This report must be completed on the day of the incident prior to departing for your home, unless, of course, you are receiving medical treatment as a result of the accident/incident.

## Evacuation

As a driver, you have an important responsibility for the welfare and safety of your passengers, and you must be prepared to provide evacuation assistance to all of them. Each organization should establish guidelines to deal with a situation that may require the driver to remove passengers from the vehicle.

### The evacuation decision

Weather conditions, traffic, road conditions, availability of assistance, response time of public safety services, passenger characteristics and driver experience will enter into the decision to evacuate. However, when fire is present, there is leaking fuel, or the vehicle is in danger, then the need to evacuate is very clear.

If you smell smoke, see smoke or smell gasoline or diesel fumes evacuate the vehicle immediately. Do not assume it is not an emergency.

### Evacuation of passengers in wheelchairs

Passengers in wheelchairs present two elements for assessment. The first is whether or not conditions permit operation of the lift. Cold weather will cost significant loss of time to get the lift deployed. If the emergency was caused by a collision the impact may have damaged the lift, thereby, preventing deployment.

Second is the decision of whether or not to evacuate the passenger while on the mobility device. If the vehicle impact forces were high, then the wheelchair may have sustained damage that may not be readily apparent. Do not waste time removing securement belts only to find the wheelchair cannot be moved.

Passengers may be reluctant to leave their wheelchair behind because without it they become totally immobile. However, saving the passenger's life is the first priority. If time and conditions permit, the wheelchair can be recovered later.

Be sure to locate passenger's personal oxygen devices and remove them from the vehicle. Inform first responders, especially fire personnel, of these devices and their location.

### Communicating with passengers and helpers

In an emergency most passengers will look to you the driver, for direction. You represent authority and must take the lead and initial control. Being well trained in evacuation emergency procedures will make it easier for you to remain calm.

Time and conditions permitting, tell passengers in a calm, clear, and concise manner that there is an emergency. An explanation of what they are required to do will help to prevent passenger hysteria. Passengers should be advised that help is on the way; however for their safety it is best

they leave and/or are assisted from the vehicle. Continued reassurance, while performing your duties, will be helpful in reducing panic.

The use of able-bodied passengers or passersby must be done with great care. The ability to remain calm and give clear and concise instructions to helpers will prevent unnecessary injuries. Placement of hands, feet and body position can be done by example. Make it clear what commands will be used to start whatever you will be doing. If you use 3 on count of 3, your helper is better able to synchronize his or her actions with you, rather than just using "go" or some other single command.

Remember – as the driver of your vehicle, you are responsible for directing passengers and passersby in giving assistance. However, once public safety personnel arrive on the scene they will assume command and control of the emergency. At that point, your responsibility is seeing to the needs of the passengers.

## Fire extinguishers

A fire extinguisher is an essential piece of emergency equipment and all passenger vehicles should be equipped with one. However, in order for a fire extinguisher to be effective, it must be used properly following this four step sequence:

1. Pull Pin – every fire extinguisher should be equipped with a pin that prevents accidental discharge. This pin should be attached with a plastic seal that indicates that it has not been used since its last recharging. The pin must be pulled out before the extinguisher can be operated.
2. Aim Nozzle Toward Fire – depending on the type of extinguisher you are using, it may have a flexible tube, a fixed nozzle, or a cone-shaped nozzle that swivels. Aim this nozzle toward the base of the fire.
3. Squeeze handle of extinguisher to discharge – discharge the fire extinguisher by squeezing the handle.
4. Sweep at the base of the fire – the discharge of the fire extinguisher must be aimed at the base of the fire. Use a regular sweeping motion at the base, covering that part of the fire closest to you and then move forward. If the fire flashes back on you, begin again, maintaining the sweeping motion.

Special considerations

Fire extinguishers are an extremely valuable tool but you must always remember that they are small and have a limited capacity. When confronted with a fire, your first concern should be in protecting the safety of your passengers and yourself. The fire extinguisher should be used to protect your exits while you evacuate the vehicle.

**NOW THE EVACUATION VIDEO!**

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