Transfinder – NYAPT Webinar Part IV

Questions and Answers

1.) Isn't taking a temperature on someone a HIPPA concern? Would it be a nurse taking it or a boss?

No, I don't believe so, and taking employees temp at the workplace is becoming common place. It is also common place to have employees take their own temp at home before reporting to work. Regardless, District Policy will guide us here, and that will be reviewed by attorneys. Whoever takes temperature, if we take temperature, would have to be trained (and not driving the bus). (BH)

This depends on your district policy that is put into effect when you return, it might be a supervisor, dispatcher or could be a nurse or driver assistant - whoever the district trains to do the job. (RG)

Prior to COVID-19 this probably would have been considered a violation of HIPPA however with this being a worldwide pandemic which the WHO and CDC are assisting with recommendations this is no longer the case. In my research I have found we must be clear that the temperature test is being used solely to determine whether the employee may have a symptom of COVID-19, as opposed to determining whether the employee has some other medical impairment or disability. And it is recommended that employers choose infrared digital thermometers rather than oral thermometers, which are more invasive.

The Americans with Disabilities Act (ADA) generally considers the taking of an employee's temperature to be a "medical examination," which it defines as any "procedure or test that seeks information about an individual's physical or mental impairments or health." Medical examinations of employees are allowed only if the employee poses a "direct threat" to their or others' health or safety.

The Equal Employment Opportunity Commission (EEOC) has taken the position that during a pandemic, employers can rely on the latest CDC and state or local public health assessments to objectively determine whether the pandemic rises to the level of a direct threat to the safety of the individual or others. (TA)

2.) Has anyone looked into ultraviolet light to disinfect a bus?

I have, and have not received an answer yet. I know that ultra-violet light is being used to kill the virus in other smaller applications. Not certain how that would work in a bus and the turn around, or dwell time, required. More to come on that. (BH)

This option has not been the "go to" option for some reason. The limited information I could find points to the strength needed, application time and resources required. Not to say they are not working on this to be a viable solution in the near future. (TA)

3.) Could ultraviolet light bulbs be put in the overhead lights, so you could turn them on when needed?

I do not believe it is that simple. I believe a more sophisticated lighting system would be required. (BH)

I echo above as our systems can only accommodate a certain watt; the necessary UV protection would be beyond that. (TA)

4.) Does DMV have any information on completing the affidavit of compliance?

The NYS DMV is expecting the Affidavit of Compliance to be filed in a timely manner. (BH)

DMV has replied to this question with the following answer: AFCO's went out on April 18, 2020. Because the AFCO is and statistics apply to the previous year, the pandemic doesn't apply to this year's submission. (RG)

5.) How long can you use a mask before co2 is a problem?

I believe that depends on the individual, rate and depth of respirations, type of mask material, the fit of the mask and so on. From experience, I can tell you that a homemade cloth mask that fit well, was difficult, or uncomfortable to breathe through. I feel that drivers should wear masks that are commercially available while driving a bus, not home made products. (BH)

Studies are being conducted to answer this question. Prior data was from those wearing a mask (nurses, dental etc) however not driving and in a safety sensitive position. There are some masks which have airflow adjustments and that may be the direction we must go however they are pricey and not readily available in the numbers required. This is a top question the STARTS taskforce is looking at. (TA)

6.) Is there an expectation that students will be required to wear PPE?

They may be, that is yet to be seen. The guidance we see from NYS and CDC all directs people to wear a mask when 6' social distancing cannot be maintained. Whether that remains the stance with school children, especially young school children, remains to be seen. (BH)

My initial reaction is yes however I understand children are children and this may not be a viable condition. There has been recent discussion that children should not wear masks, why? I have no idea. We must also consider if the child has any special needs and is capable of wearing one or it could trigger an issue. (TA)

7.) Rich, you mentioned no summer school, is that for gen ed in Bayshore or all summer programs?

It has not been decided if special ed will have summer school, but if we do it will be through distance learning rather than students attending school in a school building.

8.) Are the electrostatic machines expensive?

The machines I bought were about $750. That will deliver a quick payback in labor saved. (BH)

I again echo Dave's response. When we are looking at the entire operation and needs, to find a way which we could increase our turn around time and service more students that will give us the immediate ROI. I have suggested some districts purchase additional machines and have them located at centralized areas, such as schools, so they may pull in and out eliminating deadhead time and miles; again to not put another bus on the road will pay for all the machines purchased. (TA)

9.) How do you social distance on a school bus?

The best you can. Minimize/manage load balance across your fleet, control seating – who sits where - siblings with siblings, boarding sequence and unloading sequence. The bus is certainly not an environment conducive to social distance. This will be a more significant challenge with some of the younger kids. (BH)

Off set seating is your best bet. In the photo provided it gives an excellent layout. Your 1st run will adhere to the "red" numbers and X's, I would suggest taking a secondary color say blue and where the 1 is put a blue X – where there is a red X put a blue 1. This will allow the first run to load from the back forward sitting where there is a red number and avoid where the red X is. Your second run will then sit again loading from the back forward where the blue numbers are not the blue X. By this alternate seating we are able to distance students and also have an immediate turn around as the seats with the red X have not been used. This will save time and money while keeping students safe.

One of the most important procedures we will need to follow are rosters and seating charts. Who is on your bus and sitting where and when. In the event there is a report of a student becoming ill or testing positive we can immediately notify the families within the immediate region of the child and the others who were on that run/route. Below is an example of the seating without the secondary numbering as mentioned before. (TA)