

Post COVID-19 Report: Resiliency and Transformation

Background

The novel coronavirus (COVID-19) pandemic had a sudden impact on human service agencies and public transportation, requiring agencies to dramatically implement procedures to protect riders and staff from serious illness while providing trips safely. For human service agencies, meeting the needs of people in the community, when required to shelter in place or limit social contact, impelled programs to innovate and work with other programs, such as transportation providers and health departments, to ensure people's basic needs were being met. This report looks at challenges caused by the pandemic for both human service and transit providers and highlights imaginative ways that each continued to serve their communities in a resilient manner.

Challenges for transit included fewer riders, limited service, cancelled trips, concern for driver well-being along with a shift to remote work for office staff. Under the incidental use policy of the Federal Transit Administration (FTA), public transportation providers used transit vehicles and facilities for meal delivery, transportation to vaccination sites and other services that helped their communities respond to COVID-19.

Additionally, the Coronavirus Response and Relief Supplemental Appropriations Act of 2021 (CRRSAA) and American Rescue Plan Act of 2021 (ARP), each allocated \$50 million for the Enhanced Mobility of Seniors and Individuals with Disabilities formula program. These additional funds can be used to cover many COVID-19 expenses including service changes and reductions, vehicle cleaning, shifting some employees to work remotely, and PPE.

Despite these challenges from the pandemic, experience across the country reveals that transportation and human services agencies are resilient, adapting to decreases in ridership and offering resources to meet community needs. As needs in the community became apparent, transportation providers worked in partnership with local agencies by offering vehicles and personnel to provide critical added services for older adults and people with disabilities. With this focus, agencies found creative ways to support their riders and their communities during

the pandemic. The experiences endured by transportation providers and human service agencies can offer transformative lessons for future health emergencies that will provide a foundation for readiness when residents and communities need quick action and support by deploying vehicles and staff.

Transformation of Staffing and Volunteers

A key transformation within public transportation as a result of needed health and safety measures, was changing roles and tasks of staff and volunteers. With a great reduction in the demand for trips, staff were sometimes furloughed or even let go, but as non-traditional opportunities for using vehicles arose, staff were put back in place to fulfill these tasks. In other instances, staff roles changed to meet needs such as reassignment to loading vehicles with meals, supplies, or transporting agency staff to community residential sites for people with disabilities when public transit was not operating. Drivers with health concerns could sometimes choose not to drive, reduce their working hours, or were assigned to other tasks. For many agencies, the pandemic highlighted the importance of keeping staff and volunteer drivers safe and offering skills orientation and training to help them with new roles. Trainings included the proper use of personal protective equipment (PPE) for drivers, social distancing methods, and vehicle cleaning. When carrying supplies or other cargo, drivers also received training for proper securement of bins and use of tie-down straps.

Transformation with Creative Use of Vehicles and Food Delivery

For people staying at home, packaged food or prepared meal delivery became a vital service provided by drivers. Grocery items are picked up from food banks and supermarkets, then delivered to homes. As an added bonus provided by some programs, nutrition programs added recipes and tips for use and storage of food items with a delivery. When pandemic safety restrictions eased, shopping trips for residents to purchase food, personal items, and household supplies were increased.

Transformation with Healthcare Visits and Medication

To alleviate a critical need, transportation providers offered rides for people to critical medical appointments such as dialysis, COVID testing or vaccination sites, and shopping for medical equipment or prescriptions. While some programs reduced services, such as volunteer drivers, other providers stepped in to offer rides to essential services, such as dialysis and medical appointments. Similarly, human service and transit providers stepped in to assist with delivery of medications or medical supplies for individuals at home when refills were needed or nursing staff rode along to assist with medical equipment, such as, adjustments to insulin pumps. These actions of cooperation and sharing of information ensured that pandemic restrictions were not detrimental to the health of many community members.

Transformation Through Virtual and On-line Services

With the restriction or elimination of face-to-face interactions, transportation and human service providers became creative and flexible to quickly transition to virtual or on-line services to distribute information and gather feedback. Providers found an opportunity to expand contact through virtual engagement with individuals or groups who were not previously involved in community surveys or in-person outreach events. These newly established connections are vital for future planning activities to gain perspectives of underrepresented groups needing transportation. A hybrid approach between virtual and in-person engagement will probably be the norm for the future.

Similarly, travel training, usually done in small groups or individually, was restructured so that basic travel elements, such as bus routes, boarding, seating, or wheelchair securement is explained through on-line sessions and videos. These videos were developed to create a virtual learning experience from bus arrival to destination with discussion points on vehicle features explained along the way. Additionally, videos also offered options for a language interpreter, captioning, and real time chat with the clients during a travel training session.

Throughout the pandemic, medical providers increased the use of telehealth for general health appointments and as a tool to screen people before they arrived at a hospital or clinic. These screenings offered an opportunity for healthcare staff to set up additional services with specialists such as physical therapy or wound care. In rural areas, an obstacle to providing telehealth services has been access to high-speed internet. In these situations, a creative option implemented in some areas was for staff to assist people by delivering the technology needed for an online visit or completing the virtual healthcare visit in a vehicle using a mobile hotspot connection or Wi-Fi.

Examples

City of Schaumburg, Illinois

Just to the west of Chicago, the City of Schaumburg transportation services (human services and dial-a-ride) decided to help wherever possible as the pandemic reduced ridership. Nicholas Christopher, Transportation Director, says that his department decided early in the pandemic that vehicles and drivers would be available to meet any reasonable need. When their Governor put a stay-at-home order in place in March 2020, one critical need that became apparent was food delivery for older adults or people with disabilities who could not leave their homes.

Transportation staff worked with aging services and other organizations to pick up items from food banks and senior nutrition sites and deliver directly to those in need. A bonus with these visits was that drivers could check-in with residents to see if they were doing well or had other needs. If an issue is identified, the need is communicated to the Township of Schaumburg Office of Senior or Disability Services through a phone call.

Southern Highlands, West Virginia

Southern Highlands Community Mental Health Center, a multi-discipline behavioral support agency, started offering rides to participants in rural mountainous areas to locations with strong Wi-Fi or cellular service, allowing them to connect with telehealth providers. Additionally, when needed, staff would visit clients' homes to set up laptops, tablets, or phones and provide training on how to use these devices for telehealth appointments. For people with chronic health conditions or even basic health care needs, assisting with telehealth ensured proper treatment could be maintained or updated until in-person medical appointments were possible.

Summary

As the COVID-19 pandemic evolves, human services and transit agencies will continue to adapt and transform to assist the community and the people they serve. They have become champions that fulfill community needs by providing services beyond traditional rides. Quickly, providers adapted their operations to support food distribution, delivery of personal protective equipment (PPE), assist with telehealth appointments while maintaining traditional roles such as providing trips for individuals to employment sites. Providers transformed their services to ensure older adults and people with disabilities remained healthy and connected during a global health crisis. Agencies across the country have been flexible and resilient to adjust and reshape delivery of services to people during the COVID-19 public health emergency.

Despite many challenges of the pandemic, human services and transportation providers continue to be recognized as valuable partners for health departments, nutrition programs, and other social support agencies. Human services and transit providers continue to be a valuable voice and asset for post-pandemic activities and will be in future crisis situations such as extreme weather events. The pandemic created important opportunities for organizations to recognize and address inequities in transportation services for disadvantaged populations to work together for planning services and managing assurances that rides and technology will be accessible and usable for all. The resiliency shown by these organizations and their staff through the COVID-19 pandemic provides valuable lessons that human services and transit providers can meet the needs of the community through coordination with community partners and transformative action for future community and national emergencies.

Resources

National Aging and Disability Transportation Center (NADTC) – COVID-19 Resources https://www.nadtc.org/covid-19-resource-center/

American Public Transportation Association (APTA) - COVID-19 Resource Hub https://www.apta.com/covid-19-resource-hub/

Community Transportation Association of America (CTAA) – COVID-19 Resources https://ctaa.org/covid-19-resources/

National Academies of Sciences, Engineering, and Medicine. 2021. *A Pandemic Playbook for Transportation Agencies*. Washington, DC: The National Academies Press. https://doi.org/10.17226/26145

U.S. DOT, Federal Transit Administration (FTA) Coronavirus Frequently Asked Questions https://www.transit.dot.gov/frequently-asked-questions-fta-grantees-regarding-coronavirus-disease-2019-covid-19#CARES