# ACCESSIBLE HEALTHCARE CHECKLIST





Iowa & Affiliated Chapters

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## The Accessible Healthcare Checklist

Accessibility in the medical community continues to create unnecessary barriers for individuals diagnosed with a disability and their caregivers in accessing essential medical care. The Accessible Healthcare Checklist developed by The Arc of Iowa is focused on increasing inclusion for the disability community and its caregivers.

The 2010 ADA Standards for Accessible Design were the last federal standards adopted to building codes for the Americans with Disabilities Act in conjunction with the United States Department of Justice (DOJ). These standards were updated to include newly constructed or altered facilities (state and local), publicly accessible accommodations, and commercial facilities accessed by individuals diagnosed with a disability.

Medical facilities who utilize the checklist can receive a gold, silver, or bronze ranking. A facility must meet the minimum requirements of the 2010 ADA Standards for Accessible Design to earn a gold status. ADA Standards for Accessibility can be found by visiting <u>https://www.ada.gov/law-and-regs/design-standards/2010-stds/</u>.

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### Using the Checklist

The checklist can be facilitated by the following individuals with approval from the medical facility:

- A staff member of the facility being assessed,
- A patient with a disability,
- A caregiver of an individual with a disability, and/or
- A local disability provider

If your facility would like the checklist completed by The Arc of Iowa or one of its affiliated chapters, contact us at <u>ContactUs@arceci.org</u>.

Each section of the Accessible Healthcare Checklist includes accessibility improvements with a ranking scale of gold, silver, and bronze.

**Gold Status** – The medical facility is considered accessible. Additional changes may need to be made, but overall improvements have been made and the facility is a welcoming place to individuals diagnosed with a disability and their caregivers.

*Silver Status* – The medical facility has made some improvements, but additional changes need to be implemented to improve the facility for individuals diagnosed with a disability and their caregivers.

**Bronze Status** – The medical facility has made little or no improvements in accessibility. Large scale changes need to be implemented to improve the facility for individuals diagnosed with a disability and their caregivers.

The end of the guide includes *Your Organization Scorecard* to be completed by the facilitator. This scorecard and guide are intended to be used as a roadmap to implement changes in accessibility for facility improvements, policies, procedures, and future planning.

## **Appointment Scheduling**

Appointment scheduling is the first barrier preventing individuals from seeking medical care. The lack of accessible communication, facility location, and scheduling options creates unnecessary barriers for individuals seeking support during routine medical checkups and procedures.

<ul> <li>Provide accessibility options in your online registration portal including:</li> <li>Large text</li> <li>Picture descriptions</li> <li>Plain text</li> <li>Multiple languages offered</li> </ul>	/4
Facility pictures and/or videos with audio descriptions and Closed Captioning (CC) are available on your website for patients to review prior to their appointment. Locations should include: Front Desk Registration Waiting Room Exam Room Scale Laboratory Bathroom(s) Outside Entrances	/8
<ul> <li>Schedulers ask the following questions when an appointment is scheduled by phone:</li> <li>Do you need information on our accessible building entrances?</li> <li>Do you need interpreter assistance at the appointment? If so, what type of interpreter?</li> <li>Do you need the location of our accessible restrooms upon your arrival?</li> <li>Do you need accessible parking or parking alternatives (i.e., valet)?</li> <li>Do you need a wheelchair or assistance entering the facility?</li> <li>Do you need transportation?</li> </ul>	/6
Access to an exam room at the time of appointment check in for patients who may become over stimulated in the waiting room.	/1
TOTAL POINTS/19 Circle your status: Gold (14 to 19 points) Silver (7 to 13 points) Bronze (0 to 6 points)	

## Entry, Lobby & Elevators

Creating an ease of access into a medical provider's location ensures all lowans can seek proper care, live a healthy life, and reach their full potential.

All flooring is slip-resistant with minimal transitions.	/1
Elevators have audible and visible signals to identify arrival and direction of elevator. Audibles can be spoken or chime indicated.	/1
Elevator cars have audibled and visible signals to identify arrival and direction of elevator. Audibles can be spoken or chime indicated.	/1
All location signage throughout the entry, lobby and elevators should include large print, tactile lettering, and Braille. Critical signage and handouts offered in more than one language (e.g., days and hours of operation).	/1
Interior doors weighing 5 lbs. or more have an automatic door opener.	/1
All offices abide by the United States Department of Justice Service Animal requirements.	/1
Pathways are clear with no object hazards for patients or visitors.	/1
Parking lot, pathways, and facility are well-lit.	/1
Signage provided for ground surface changes.	/1
Signage procedure in place for slippery floors with environment change (i.e., rain, snow, etc.). This includes a written plan of action for staff to provide physical assistance to individuals seeking additional support to prevent injury.	/1
TOTAL POINTS/ 10	
Circle your status:	
Gold (8 to 10 points)	
Silver (4 to 7 points)	
Bronze (0 to 3 points)	

### Registration

Creating a welcoming and accessible registration space improves the experience for all patients utilizing services. Iowa ranks 16<sup>th</sup> in population age 50 and older and 4<sup>th</sup> in population for age 75 and older. 23% of Iowa's adult population has a disability. About 20% of children have a disability or special health care need (Disability and Health Data System, 2021 and Child Health Clinics).

Provide auxiliary aids and services for blind or low vision patients. Required material must include medical side effect information, billing invoices, and appointment reminders. Mark all that apply: Screen Readers Electronically taped text Braille material Staff Assistance The patient cannot be charged to receive alternative support and is not required to bring their own interpreter. Medical providers are required to provide services to benefit the patient and the provider.	/4
Auxiliary aids and services for deaf, Deaf, or hard of hearing patients. Mark all that apply:  In person facility staff trained in American Sign Language In person third party trained in American Sign Language and other foreign sign language, including International Sign Language. Assistive listening device Computer Aided Real Time Transcription (CART) or Remote CART Printed materials Telecommunications Relay Service (TRS) Teletypewriters (TTY) Video Remote Interpreting (VRI) and/or Visual aids Medical providers are required to provide the service to benefit the patient and the provider. Providers may not rely on an adult or child accompanying the patient to interpret except in emergency situations involving imminent threat to safety or welfare of the patient or public. The patient cannot be charged to receive alternative support and is not required to bring their own interpreter.	/9
Electronic check in computers and/or tablets are low enough for a person using a wheelchair, scooter, or is of short stature to easily access.	/1

Service counter (minimum of one) are under 36 inches, to allow a person using a mobility device or of short stature for ease of access.	/1
Communication tablets are available at the front desk for interactions with staff throughout the visit.	/1
Registration paperwork can be answered utilizing an electronic tablet.	/1
Process in place for registration staff to inform staff of a patient's communication needs, limitations, and behavioral triggers. Information should be in the patient's medical chart, shared verbally and discreetly with necessary staff members (i.e., nurse, physician, etc.).	/1
Provide patients with information on your patients' rights officer or a procedure to file a formal complaint that is accessible in their communication of choice in the event they experience discrimination.	/1
Registration paperwork can be answered verbally to a staff member.	/1
Staff are trained on Picture Exchange Communication System (PECS) to facilitate positive and accessible interactions.	/1
TOTAL POINTS/21	
Circle your status:	
Gold (15 to 21 points)	
Silver (8 to 14 points)	
Bronze (0 to 7 points)	

## Waiting Room

Patients who experience sensory overload can become overstimulated in a waiting room or may take longer to exit the building in an emergency. Providing clear signage and alternative waiting options decreases anxiety and creates an improved experience for patients and staff.

Accessible drinking fountains.	/1
Accessible private room to allow those who need a private space to administer g-tube, j-tube, or suction treatments in a sanitary space.	/1
All emergency fire exits are wheelchair accessible.	/1
All emergency shelters are wheelchair accessible.	/1
Separate sensory waiting room for patients needing a quiet space prior to their appointment.	/1
<ul> <li>Directional signage (tactile and Braille). Mark all that apply:</li> <li>Elevators</li> <li>Lab</li> <li>Patient Rooms</li> <li>Registration</li> <li>Restrooms</li> </ul>	/5
Accessible Waiting Room Seating integrated into existing seating for patients utilizing a mobility device (i.e., wheelchair, cane, walker, etc.).	/1
Allow patients who may experience sensory overload to immediately be escorted to an exam, patient, and/or therapy room.	/1
TOTAL POINTS/12	
Circle your status:	
Gold (9 to 12 points)	
Silver (5 to 8 points)	
Bronze (0 to 4 points)	

#### Restrooms

Restrooms continue to be a common location for discrimination in medical facilities. Caregivers need access to change diapers and/or briefs for children and adults. Caregivers are limited in the following options including placing the individual on the bathroom floor, between the seats of a vehicle in the parking lot or leaving the individual in a soiled brief until they can be changed at home. Restrooms and private changing rooms need to be available for a caregiver who may be a different gender to the person they are caring for (e.g., female caregiver and male person with a disability). As medical facilities, creating an environment of accessibility includes proper bathroom support.

<ul> <li>Adult sized changing table. Check all that apply:</li> <li>Manual height adjustment</li> <li>Electronic controlled height adjustment</li> </ul>	/2
Interior doors and restroom doors requiring 5 lbs. or more of force have an accessible automatic opener.	/1
Latch handles and accessible lock.	/1
ADA toilet height and handrails (Information on requirements can be found using the ADA.gov link on page 3 of this guide).	/1
An accessible, sterile, and private room for a diaper or brief change with an exam table, treatment table, and/or adult sized changing table allowing the individual to be off the floor with ease of maneuvering for the caregiver. The room should be accessible for those who remain in the waiting room until their designated appointment and/or any member of the public accessing the building. A handwashing station and diaper disposal must be included.	/1
TOTAL POINTS/6	
Circle your status:	
Gold (5 to 6 points)	
Silver (3 to 4 points)	
Bronze (0 to 2 points)	

## Medical Equipment & Testing Rooms

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Healthcare screenings are vital for those with and without a disability diagnosis. A lack of proper equipment can lead to increased health risk and undiagnosed diseases. Individuals with disabilities need equal access to routine physical exams, mammograms, pap smears, treatment for sexually transmitted infections (STIs), eye and dental exams, etc.

/1		
/1		
/1		
/1		
/1		
TOTAL POINTS/5		

#### Exam Room

An exam room should be the safest place in your facility but is often the most anxiety inducing location. Patients should be able to freely share their concerns as they seek out proper medical care from their provider. Individuals with disabilities express feelings of not being heard or having their feelings disregarded, a lack of accessible equipment to receive proper care, and no alternative communication tools to describe procedures or post visit care.

Accessible exam table - Minimum of 1 accessible exam table per medical office or unit.	/1
Designated fully accessible exam room.	/1
Door hardware is a lever handle.	/1
Door weight is with 5 lbs. or less of force.	/1
Signage for each designated exam room includes adequate font size, raised tactile lettering, and Braille.	/1
Adequate space for a patient utilizing mobility equipment to maneuver around the exam room.	/1
Medical staff utilize pictures to communicate the meaning of procedures and results. Material should minimize the use of large blocks of text.	/1
Medical staff verify a patient understands what will happen during the visit prior to beginning an exam or procedure.	/1
Interpreter is available and communicating with staff and patient.	/1
TOTAL POINTS/9	
Circle your status:	
Gold (7 to 9 points)	
Silver (4 to 6 points)	
Bronze (0 to 3 points)	

### Improving the Patient Experience

Improving experiences for all patients should start with accurate, appropriate, and disability centered training. Individuals diagnosed with a disability are protected under the Americans with Disabilities (ADA) Act of 1990. This civil rights law prevents discrimination of an individual based on their disability and requires healthcare providers to offer full and equal access for individuals with a disability. State and local government facilities must follow Title II of the ADA and private and nonprofit organizations must follow Title III of the ADA. For more information on requirements for your facility visit <a href="https://www.ada.gov/">https://www.ada.gov/</a>.

receive yearly training on accessible interactions including: Assumed competence when interacting with patients. Avoidance of medical jargon, acronyms, and terms with double meanings or nuanced meanings. Check for patient understanding. Consent & Personal Space – ask before touching. Patients can have sensory defensiveness or trauma from past medical experiences. Directing questions to the patient rather than the caregiver or interpreter. Disability, diversity, equity, and inclusion. Including statistics and increased risk factors for physical, sexual, and verbal abuse of individuals diagnosed with a disability. How to talk about a disability with set expectations for inappropriate or the use of derogatory terms. Obligations for staff and organization under the ADA. Person first language or asking patients for their preference (i.e., autistic or a person diagnosed with autism). Include supported decision making resources on your website to allow patients the maximum level of autonomy. Talk to the patient, not their companion. Use of concrete terms over abstract concepts. Instead of "Time to head out" say "It's time to put your coat on". Use of plain language and simple sentence structure. Use of visual when possible (i.e., pictures, posters, videos, 3D models, etc.). Utilize the Tell-Show-Do model during an exam. Providing culturally competent care.	/15
atient education materials have: Large text options - <u>Understanding Accessible Fonts and Typography for Section 508</u> <u>Compliance   Section508.gov</u> Electronic option available via email, portal, or website Picture descriptions Written in plain language at a third grade reading level or below More than one language	/5

Patient education materials include picture descriptions.	/1
Reasonable healthcare modifications are reviewed yearly to identify changes needed in policies, practices, and procedures.	/1
Ask about patient accommodation needs before an appointment and throughout the appointment.	/1
Televisions in common areas and waiting rooms should include Closed Captions (CC).	/1
Videos posted to your website or social media should include Closed Captions (CC).	/1
TOTAL POINTS/25	
Circle your status:	
Gold (17 to 25 points)	
Silver (9 to 16 points)	
Bronze (0 to 8 points)	

## Your Organization Scorecard

Organization/Facility:
Address:
Organization Contact:
Phone Number:
Evaluator's Name:
Date of Evaluation:
Evaluators Phone Number:

Organization is meeting 2010 ADA Accessibility Standards: YES / NO

In the below grid check the number of gold, silver, and bronze rankings received in the above sections to evaluate areas of strength and opportunities.

Areas of Focus	Gold	Silver	Bronze
Appointment Scheduling			
Entry, Lobby & Elevators			
Registration			
Waiting Room			
Restrooms			
Medical Equipment & Testing Rooms			
Exam Rooms			
Improving the Patient Experience			
TOTALS			

Utilize the below section to highlight the organization/facility top strengths and opportunities to improve accessibility for all lowans.

#### Top 3 Strengths:

1.	
2.	
3.	

#### **Top 3 Opportunities:**

1.	
2.	
3.	

Send a copy of your completed form to The Arc at <u>ContactUs@arceci.org</u>. Accessibility rankings will not be made public. All information collected will be used to implement future checklist changes and accessibility initiatives.

## **Additional Support**

#### IntellectAbility

- Curriculum in IDD Healthcare eLearn Course (Self-Paced) https://replacingrisk.com/product/curriculum-in-idd-healthcare-elearn-course/

#### Iowa DD Council

- Inclusive Communications & Discussions (PDF) https://www.iowaddcouncil.org/inclusive-communications

#### National Library of Medicine – PubMed

- Chronic Disability https://pubmed.ncbi.nlm.nih.gov/?term=chronic+disability

#### University of Iowa

- Creating Accessible Materials Training (Self-Paced) Creating Accessible Materials self paced - DOE (College of Learning) (uiowa.edu)
- **Disability Etiquette** https://webeye.ophth.uiowa.edu/update/images/2023/2.17/Disability-Etiquette-Brochure-CDD.pdf

#### **University of New Hampshire**

Institute on Disabilities – Health Professional Training (Self-Paced)
 Health Professional Training | NH Disability and Health Program (unh.edu)