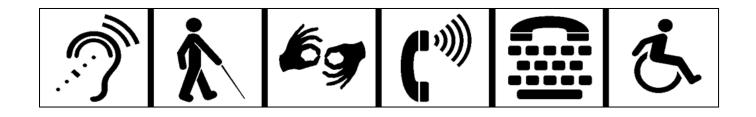
Outpatient Health Care Usability Profile V4

Drum, C.E., Davis, C.E., Berardinelli, M., Cline, A., Laing, R., Horner-Johnson, W., & Krahn, G.

This tool reflects **FEDERAL** guidelines. It is necessary to verify whether your state or local codes have more stringent accessibility requirements; if so, they take precedence.



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Outpatient Health Care Usability Profile V4-Fed

Date					
		Survey Survey	/		
Clinic N	am	e _	<u></u>		
Address	6	-			
Contact	Inf	- o		NAME	
		-		PHONE	
		-		EMAIL ADDRESS	
Start Tir	ne			End Time	
Notes:		Parking Parking Bathro which	g Ga	arage	(Specifically indicate 34-43.)
			ors	(Check if clinic has lifts to surv (Check if clinic has an elevator (Check if clinic has stairs to su	r to survey)

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Tips on Completing the OHCUP

Read the OHCUP thoroughly to become familiar with the questions and flow. It will take a minimum of two hours to complete the survey for each clinic. Allow yourself time to greet the staff and answer any questions they may have.

The OHCUP is divided into three sections:

- 1. **Patient Arrival**: Starts at the parking lot and examines the path of travel to the clinic. This includes entrance ramps and doors, controls, directional signage to the clinic and directional signage within the clinic.
- 2. **Public Facilities**: Includes telephones, water fountains, waiting room seating and reception counters, passageways, emergency egress and, perhaps most important, restrooms. Lifts, elevators and stairs are surveyed only if needed to enter or exit the clinic.
- 3. Exam Rooms and Access to Primary Services: Includes the clinic's accessible exam room and restroom most frequently used (restroom adjoining the lab specimen collection restroom, if applicable).

Within each **Section** you will also find **Subsections** that provide additional information to help you complete specific areas within the clinic. Some questions include graphics to provide a visual cue for taking measurements.

At the end of each section, a space for notes is provided. Many OHCUP questions are generalized and may apply to several locations within a clinic. Use the space provided to describe elements of poor accessibility (e.g., the location of and force required to open public doors, including restroom doors) or to take note of contextual factors that may brought to light by staff (e.g., clinic is undergoing renovations).

Within each section, each item should be judged independently from the other. You will answer **YES**, **NO**, **or N/A** (not applicable) for each item. Some sections may be irrelevant in some clinics. For example, if there are no lifts in a clinic, each question in that section would be answered "N/A".

Please read each question completely before answering and verify that you are at the correct location. Remember to answer the questions with only a **YES, NO or N/A.** This is important when it comes time to score. See Frequently Asked Questions on page 5, #3 for more information on scoring.

About Scoring

You will be able to enter only a 1 or O. "Yes" and "N/A" answers are scored as 1, which means "usable." A "NO" answer is scored as 0, which means "not usable." There are scoring sheets at the end of the OHCUP with further instructions. You can also use an electronic scoring sheet by contacting **Danielle Bailey** at 503-494-4858.

Special Note: Whenever a sign using the International Symbol of Accessibility (ISA) is required, that symbol may not be a stylized or "designer" version of the symbol; only the prescribed ISA may be used:



This Checklist is <u>NOT</u> a substitute for federal accessibility guidelines and/or the appropriate state and local building codes.

For more information see

the Americans with Disabilities Act Accessibility Guidelines (ADAAG) at the US Access board website: <u>www.access-board.gov/gs.htm</u>.

Frequently Asked Questions (FAQ)

Q 1. What equipment will I need to complete the survey?

You will need a pencil, measuring tape (25' or longer), and a SmartTool or other level that can determine slope measurement. Although the OHCUP does not ask about door-opening pressure, we recommend that you use a door pressure gauge (or a fish scale) to test doors for number of pounds of pressure needed to open them (the degree of opening difficulty). It should take no more than 5 pounds of pressure to open an **interior** door. (Your state may or may not have **exterior** door-opening requirements. Contact your state and local building codes for details. In Oregon, for example, it should take no more than 8 ½ pounds of pressure to open an **exterior** door. *Even if your state has no specific requirements regarding exterior doors, it is wise to test exterior doors and adjust each one to the least feasible door opening pressure.*)

Q 2. What about the required number of accessible parking spaces needed? Must I count all the spaces in the lot?

Yes. Appendix A shows a chart for determining the required number of accessible spaces needed based on the total number of spots in the whole parking lot. The text at the bottom of that chart box explains that for outpatient clinics, the number of accessible spaces required is 10% of the total number of spaces provided. (If 10% of the total number comes out as a fraction, it is necessary to use the next largest whole number as the required number. That means if you have 83 parking spaces in a lot, 10% would be 8.3 spaces, so the actual number of required accessible spaces would be 9.)

Q 3. How do I answer a question if part of it can be answered "yes" and part can be answered "no"?

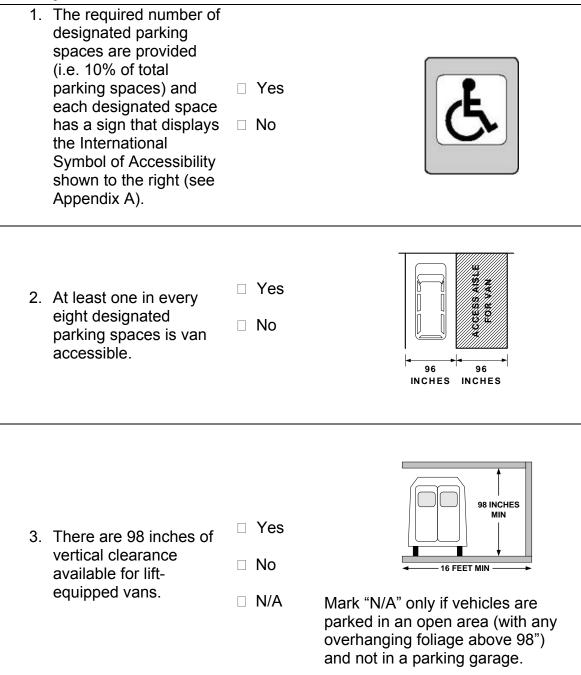
Answer the question "no" if ALL parts of the question cannot be answered "yes." One question about restrooms, for example, says, "**All** dispensers and hand dryers are operable with a closed fist." Because the hand dryer and the soap dispenser are operable with a single, closed fist, we might be tempted to answer affirmatively; however, we notice that the toilet seat cover dispenser is not operable with a single closed fist. We must answer "no" to the entire question. Keep in mind that some paper towel dispensers, even those with an automatic sensor, may still not operable with a single, closed fist. Typically, the only accessible hand dryer is the hot-air blower type with push button or automatic sensor. If you are in doubt, simply try using only one hand, held in a loose clenched-fist position, to get a paper towel from a dispenser.

Q 4. What if there is more than one restroom in the clinic? Which one should I survey?

The OHCUP has a section to use to evaluate a single restroom. **Only one restroom's survey** results can be used in the final scoring. You will want to report the scores of the restroom that clinic patients use the most and record the location on the cover sheet if you plan to do a 9-month follow-up (post) survey.

Section 1: Patient Arrival

Parking - applies only to parking area within the immediate vicinity of the clinic



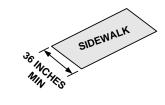
4.	All designated parking spaces are on the shortest route of travel to the building's accessible entrance.	□ Yes □ No	You may have to ask what the clinic considers their "accessible" entrance.
5.	Access aisles <u>are</u> present <u>between</u> <u>designated spaces</u> and surfaces are firm, stable and slip resistant.	□ Yes □ No	
6.	In designated passenger loading zones, there is an access aisle at least 5 feet wide and 20 feet long adjacent and parallel to a vehicle pull-up space.	□ Yes□ No□ N/A	ACCESS AISLE ACCESS AISLE AT PASSENCER LOADING ZONE MN V V V V V V V V V V V V V
7.	Curb ramps in the parking area have a smooth transition from the ramp to the pedestrian route of travel	YesNoN/A	Mark "N/A" only if curb ramps are unnecessary.

NOTES : PARKING		

Approach to Building - applies from parking area to entrance of building

8.	The route of travel	Yes
	does not require	No
	the use of stairs.	INO

- 9. The surface of the route of travel is stable, firm and slip-resistant.
 □ Yes
- 10. The route leading to the building is at least 36 <u>unobstructed</u> inches wide. □ Yes



11. All curbs on the route of travel have curb ramps.	YesNoN/A	If no curbs, then write "N/A." Ramp should have a slope no greater than 1:12 (measured at steepest point), stable, firm, and slip resistant, 36 inches wide exclusive of flared sides. If ramp does not meet these criteria, mark "No."
12. Where there are stairs at the main entrance, there is either a ramp, lift, or an alternative entrance provided.	YesNoN/A	Mark "N/A" if there are no stairs at main entrance.
13. When alternative entrances are used, there is a sign at the main entrance indicating the location of the alternative entrance.	YesNoN/A	Mark "N/A" only if there are no alternative entrances used.
14. Alternative entrances can be used without assistance.	 Yes No N/A 	Mark "N/A" only if there are no alternative entrances used.
15. The entrance door has at least 32 inches clear opening (for a double door, at least one leaf with a 32- inch clear opening).	YesNo	32 INCHES MIN CLEAR OPENING
16. There are at least 18 inches of clear, unobstructed wall space next to the latch side of the door (to get in and out).	□ Yes□ No□ N/A	If the door is automatic, mark "N/A."

17. All threshold edges are 1/4 inch high or less, or if beveled edge, no more than 1/2 inch high.	□ Yes □ No	MAX HEIGHT THRESHOLD MOST DOORS: 1/2 INCH V THRESHOLD FLOOR
---	---------------	--

Ramps (where they exist along the path of travel)

Mark each question "N/A" if no ramps are present.

18. The slope of a ramp (rise over run) should be no greater than 1:12 (or 8.33%)	YesNoN/A	MAX SLOPE 1:12 12 12
19. The surface of the ramp is stable, firm and slip resistant.	YesNoN/A	

20. The unobstructed width of the ramp is 36	□ Yes	
inches.	□ No □ N/A	
21. Any ramp that rises more than 6 inches or	□ Yes	
is longer than 72 inches has handrails on both sides.	□ No □ N/A	HANDRAILS ON BOTH SIDES
22. The tops of the handrails are between 34 and 38 inches	□ Yes	34 TO 38 INCHES
above the ramp surface.	□ N/A	
23. When the ramp		5 FEET
changes direction, there is a level landing	🗆 No	8 mm
of at least 60 by 60 inches.	□ N/A	30 INCHES / /S FEET / /S FEET /

NOTES : RAMPS		

Signage (those that direct to and within a clinic only)

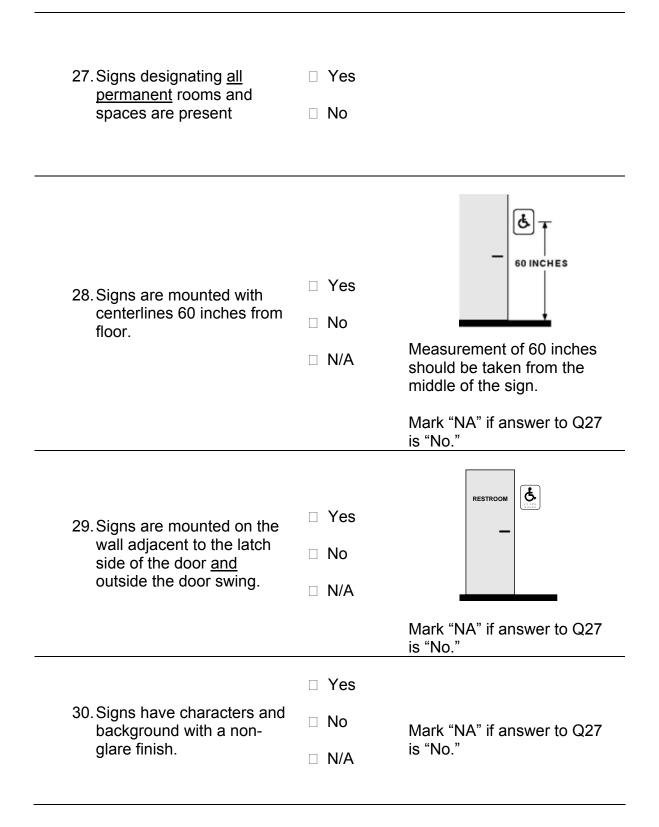
Section A (Questions 24-26): Signs mounted above 80 inches.

Measure signs along path of travel from building entrance to clinic entrance, and within clinic itself.

24. If mounted above 80 inches, characters on signs that provide directions and information have letters at least 3 inches high.	YesNoN/A	Mark "N/A" if no signs are mounted above 80 inches.
25. If mounted above 80 inches, characters on signs that provide directions and information have high contrast.	YesNoN/A	Mark "N/A" if no signs are mounted above 80 inches.
26. If mounted above 80 inches, characters on signs that provide directions and information have a non-glare finish.	YesNoN/A	Mark "N/A" if no signs are mounted above 80 inches.

OTES : SIGNS MOUNTED ABOVE 80 INCHES

Section B (Questions 27-35): Measure signs within clinic only.



31. Signs have raised characters.	YesNoN/A	Mark "NA" if answer to Q27 is "No."
32. Signs feature high contrast lettering and backgrounds.	YesNoN/A	Mark "NA" if answer to Q27 is "No."
33. Signs feature Braille text.	YesNoN/A	Mark "NA" if answer to Q27 is "No."
34. When a pictogram is used to designate rooms and spaces, it is accompanied by raised characters and Braille.	YesNoN/A	Mark "N/A" if no pictograms are used.
35. If signs designating rooms and spaces do not have raised characters, Braille, or pictograms, or are not present, there is other directional assistance available (i.e., sound recordings, or a receptionist always nearby).	YesNo	

NOTES : SIGNS WITHIN CLINIC

Section C (Question 35): Measure sign at clinic entrance only.

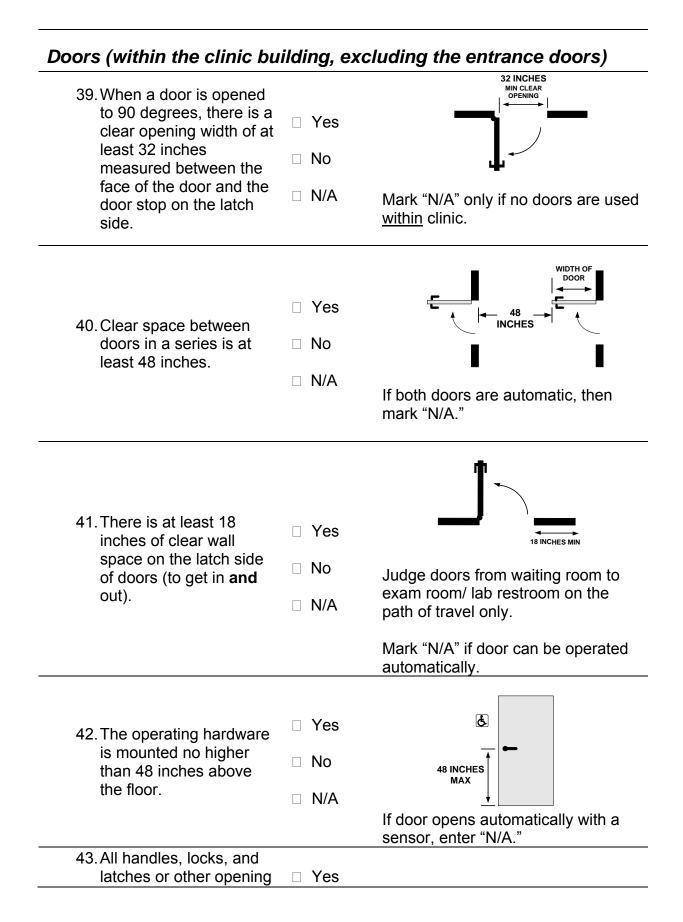
36. Sign is present at	
entrance to clinic at a	Yes
height of 60 inches to	
centerline and features	🗆 No
high contrast, raised	
and Braille characters,	
and non-glare finish.	

NOTES : SIGN AT CLINIC ENTRANCE

Controls (e.g. light switches, door handles)

37. <u>All</u> controls available to the public have controls with the highest operable part no greater than 48" and lowest operable part no lower than 15".	YesNo	Controls include light switches, locks, vending machines, television controls, fire alarms, etc.
38. <u>All</u> controls that are		
available to the public are operable with a single, closed fist.	□ No	

OTES : CONTROLS	



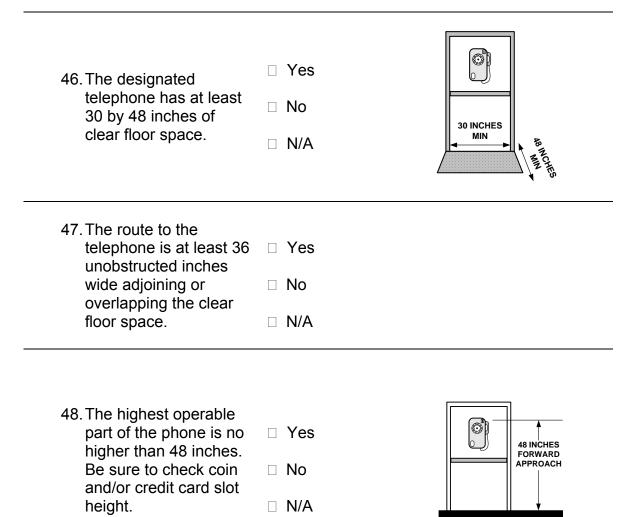
hardware are operable with a single closed fist.	□ No □ N/A	Mark "N/A" only if no doors are use <u>within</u> clinic. If operated by a contro device, consider whether it is usabl with closed fist.
44. All threshold edges are		MAX HEIGHT THRESHOLD MOST DOORS: 1/2 INCH
1/4 inch high or less, or if beveled edge, no more than 1/2 inch high.	🗆 No	▼
	□ N/A	THRESHOLD
45. No more than five		
pounds of force is required to open an		
interior door (e.g., restroom door). For	□ No	Mark "N/A" if all doors used by
information about exterior door opening pressure, see FAQ #1,	□ N/A	public are automatic.
page		

NOTES : DOORS		

Section 2: Public Facilities

Telephones (any available for public use along path of travel)

Mark "N/A" if **no** telephone is available for public use. Any phone for public use should be assessed, even if it is not a pay phone.



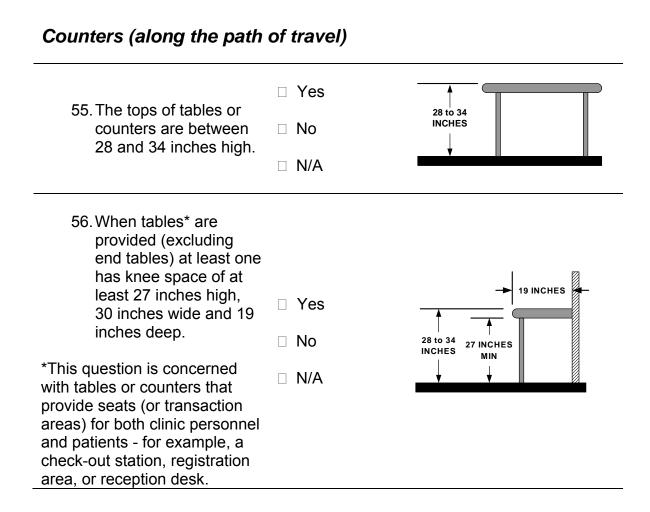
49. If a wall-mounted telephone has a leading edge between 27 and 80 inches from the floor, it projects less than 4 inches into the pathway.	YesNoN/A	OVERHANGING UID
50. The designated phone is adapted with volume control.	YesNoN/A	Alternatively, look for volume adjustment button near keypad.
51. Volume controlled telephones are identified by a sign showing a handset radiating sound waves.	YesNoN/A	
52. When telephone banks (2 or more adjacent public phones) do not contain a text telephone (TTY), there is a sign to indicate location of nearest TTY.	YesNoN/A	

NOTES : TELEPHONE

Seating (in waiting area only)

53. All aisles between seating are at least 36 unobstructed inches	YesNo	
wide.	□ N/A	Mark "N/A" only if there is no seating area provided.
54. There is a space for a		
person in a wheelchair to wait <u>without blocking</u>	□ No	
<u>the clear width</u> of any aisles.	□ N/A	Mark "N/A" only if no seating area is provided.

NOTES : SEATING	

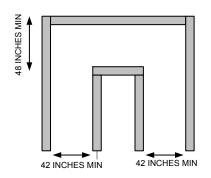


NOTES : COUNTERS		

Passageways (i.e., route of travel to clinic services excluding doorways)

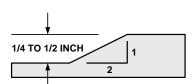
57. All passageways are at least 36 unobstructed inches wide.	□ Yes □ No □ N/A	If tomporary objects protrude into
		If temporary objects protrude into passageway, then measure passageway to edge of object.
58. If the passageway is less than 60 inches wide, there are passing spaces at least 60 inches wide and 60 inches long or intersecting walks allowing passing at reasonable intervals not exceeding 200 feet.	YesNoN/A	If passageway is more than 60 inches wide, mark N/A.
59. There is a 5-foot circle or a T-shaped space (36 inches wide each direction and 60 inches minimum depth) to reverse direction.	Yes	WHEELCHAIR TURNING SPACE G0 INCHES DIAMETER MINIMUM
Note: This is a difficult measurement to make. It may require 2 people working together to make an accurate reading. Study the diagram closely, and take your time making your measurement.	□ No □ N/A	12 INCHES 36 INCHES MIN 12 INCHES 12 INCHES 36 INCHES MIN 12 INCHES NIN SHON 9 INCHES MIN 12 INCHES

60. Where a passageway makes a U-turn around an obstacle which is less than 48 inches wide, the passageway width increases to at least 42 inches on the approaches and 48 inches in the turn.



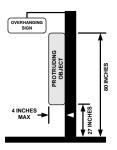
Mark "N/A" if there is no U-turn around obstacle.

61. If passageway levels change, the vertical difference is less than □ Yes 1/4 inch, or if the change in level is □ No between 1/4 and 1/2 inch, there is a beveled □ N/A edge with a slope no greater than 1:2.



Mark "N/A" if there is no change in floor level. (This often occurs where building additions have been made.)

62. Wall-mounted objects	
that have leading	Yes
edges between 27	
inches and 80 inches	🗆 No
from the floor project	
less than 4 inches into	□ N/A
the passageway.	



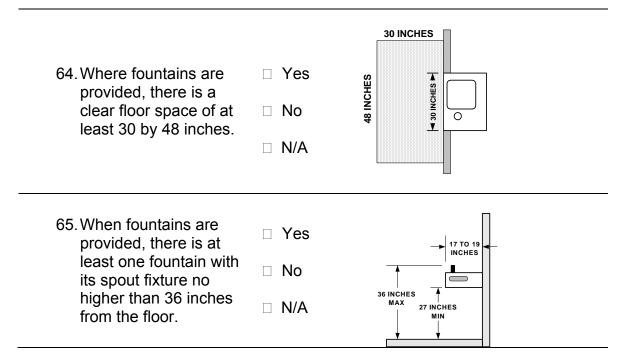
Mark "N/A" if no protruding objects are found. Objects with edges that extend below 27" are not considered obstructions because they are cane-detectable.

63. Carpeting is low-pile,	Yes
tightly woven and securely attached	🗆 No
along edges.	□ N/A

NOTES : PASSAGEWAYS		

Water Fountains (where they exist along the path of travel)

Mark "N/A" if no fountain is available to the public.



66. If a wall-mounted fountain has a leading edge between 27 and 80 inches from the floor, it projects less		
than 4 inches into the pathway.		PROTRUDING OBJECT 80 INCHES
[Note: There may be a high-	□ No	
low fountain arrangement. The high fountain may be a	□ N/A	
protruding object if it is not recessed or does not have an extension underneath to bring it down to 27" to be cane detectable.]		Enter "Yes" if fountain is recessed and not projecting into passageway.

NOTES : WATER FOUNTAINS	

Lifts (when provided along the path of travel)

Mark "N/A" only if lift is not required to access clinic services and public facilities.

67. Where a lift is provided, it is usable without assistance (i.e., key is in lock and	
doesn't have to be retrieved from	□ No
somewhere; door is operable with a closed fist).	□ N/A
68. If the lift is not usable	
without assistance, a call button is provided	
and staffed whenever the clinic is open.	□ N/A
60 The lift controls are	
69. The lift controls are operable with a closed fist.	□ No
1151.	□ N/A
70. The lift controls are	
located no higher than 48 inches for a forward approach.	
	□ N/A
71. The lift controls are	
located no higher than 54 inches for a side	□ No
approach.	□ N/A

72. The floor surface of the	
lift is slip-resistant and any change in level is	□ No
less than 1/4 inch.	□ N/A

NOTES : LIFTS		

Elevators (where they exist along the path of travel)

Mark "N/A" if elevators are not required to access clinic services and public facilities.

73. The call button has a		
visual signal that indicates direction of	□ No	
travel.	□ N/A	

74. The call button has an audible signal that indicates direction of travel.	 Yes No N/A 	► "DING" ■ "DING - DING"
75. There are signs identifying the floor number in raised letters on both sides of the door jamb of the elevator at every floor.	☐ Yes☐ No☐ N/A	
76. There are signs identifying the floor in Braille letters on both door jambs of the elevator at every floor.	 Yes No N/A 	
77. The elevator automatically comes within 1/2 inch of the floor landing at each stop.	 Yes No N/A 	1/2 INCH MAX FLOOR SURFACE SURFACE SIDE VIEW



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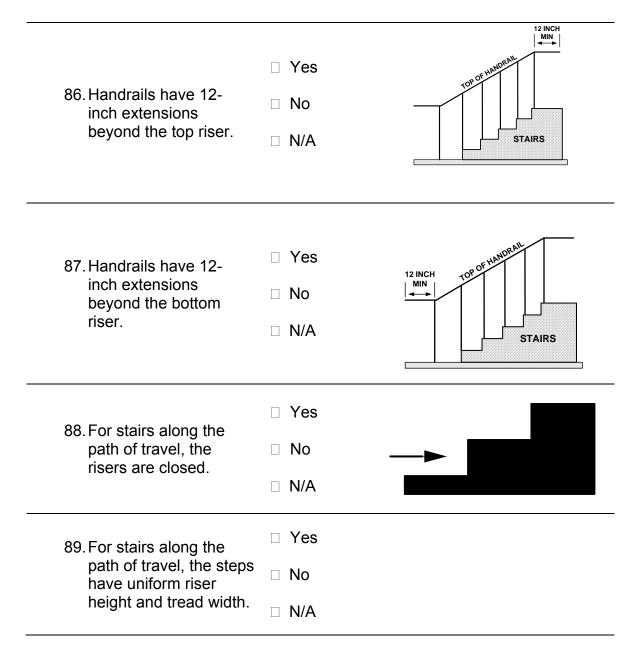
79. The elevator doors reopen automatically	□ Yes	(‡ ▲ →
without contact if an object passes through the opening between 5	□ No	€ * *
and 29 inches above the floor.	□ N/A	
80. When reopened, the door stays open for at least 20 seconds.	□ Yes	
	□ No	
	□ N/A	
81. The control buttons inside the elevator have Braille lettering.	□ Yes	
	□ No	
	□ N/A	

82. The control buttons inside the elevator have raised lettering.	 Yes No N/A
83. If provided, the emergency communication system (e.g., handset, intercom) is identified in both Braille and raised letters.	 Yes No N/A
84. If provided, the emergency communication system (e.g., handset, intercom) is no higher than 48 inches above the floor.	 Yes No N/A
85. All elevator controls are no lower than 15 inches and no higher than 48 inches from floor.	 Yes No N/A

NOTES : ELEVATORS

Stairs (where they exist along the path of travel)

Mark "N/A" only if stairs are not a part of the path to clinic services and public facilities.



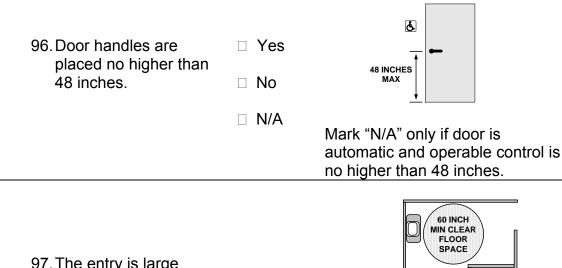
90. If there are stairs between the elevator	
and primary clinic services, there is a	
designated route without stairs.	□ N/A

NOTES : ELEVATORS

Rest Rooms (Instructions: Assess restroom in public waiting room only).

ę. 91. Signs are mounted on □ Yes 60 INCHES the wall on the latch side of the door, 60 🗆 No inches from the floor to the middle of the sign. Measurement of 60 inches should be taken from the middle of the sign. 92. Where pictograms or □ Yes symbols are used to identify rest rooms, □ No Mark "N/A" if no pictograms are Braille characters are used. included below them. □ N/A 93. Where pictograms or □ Yes symbols are used to identify rest rooms, □ No Mark "N/A" if no pictograms are raised characters are used. included below them. □ N/A 32 INCHES MIN CLEAR OPENING □ Yes 94. The restroom doorway is at least 32 inches □ No wide. □ Yes 95. Doors are operable with a single, closed If operated by a control, consider No fist. whether it is usable with a single, closed fist.

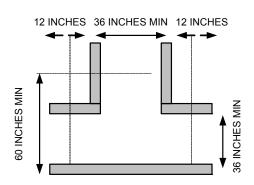
Features for both toilet stalls and toilet rooms.



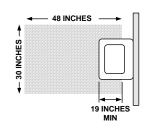
97. The entry is large enough for a wheelchair user to enter, turn around and exit.

□ Yes

Note: This is a difficult measurement to make. It may require 2 people working together to make an accurate reading. Study the diagram closely, and take your time.



- 98. There is a 36-inch wide unobstructed path to all fixtures (e.g., sink, soap and other dispensers).
- 99. The sink has a 30-inch wide by 48-inch deep □ Yes clear space in front (a maximum of 19 inches □ No of the required depth may be under the □ N/A sink).

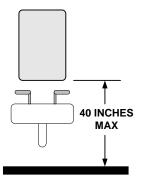


Mark "N/A" only if there is no sink.

100. Pipes under the sink are insulated to protect against contact.	YesNoN/A	PROTECTIVE PIPE COVERING (INSULATION) - U Mark "N/A" only if there is no sink.
101. Where counters or tables are provided, the top is between 28 and 34 inches from the floor.	YesNoN/A	28 to 34 27 INCHES INCHES MIN
102. The sink rim is no higher than 34 inches.	YesNoN/A	Mark "N/A" only if there is no sink.
103. The faucet is operable with a single closed fist.	YesNoN/A	Mark "N/A" only if there is no sink.
104. The highest operable part of all dispensers and hand dryers is no higher than 48 inches for a forward approach.	YesNoN/A	Mark "N/A" only if there are no dispensers.

105. All dispensers and hand dryers are operable with a single □ Yes closed fist (pull-down paper-towel dispensers □ No & many seat-cover dispensers are usually □ N/A not accessible by this criteria).

Mark "N/A" only if there are no dispensers.

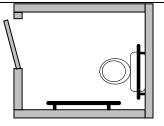


106. The mirror is □ Yes mounted with the bottom edge of the □ No reflecting surface no higher than 40 inches. □ N/A

Note: This is a difficult measure to take and sometimes requires more than one measurement. Please use caution.

Mark "N/A" only if there is no mirror.

107. There are two <u>horizontal</u> grab bars: one on the wall behind □ Yes the toilet and one on the side wall nearest to □ No the toilet in the designated stall/toilet room.



Mark "No" if grab bars are not present or are not positioned parallel to floor.

108. The toilet seat is 17"-19" high. Measure from floor to top of seat.	YesNo	17 TO 19 INCHES
 109. There is at least 18 inches of clear space from the center of the toilet to the wall(s) on either side. Note: Make measurement to adjacent wall. Do not include objects such as toilet paper dispensers in your measurement. 	YesNo	18 INCHES MIN

G

110.	At all rest rooms,	Yes
ther	e is a sign	
indi	cating the location	No
of th	ne designated rest	
roor	m(s).	N/A

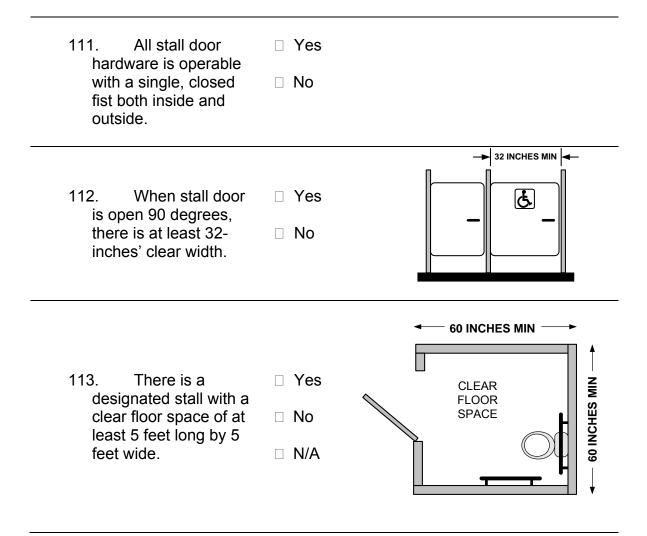
This question is specific for other restroom locations. Mark "Yes" if non-accessible restrooms provide directional signage to accessible restroom. Mark "N/A" only if: 1) other public restrooms do not exist/are not available to public; or 2) other public restrooms are accessible.

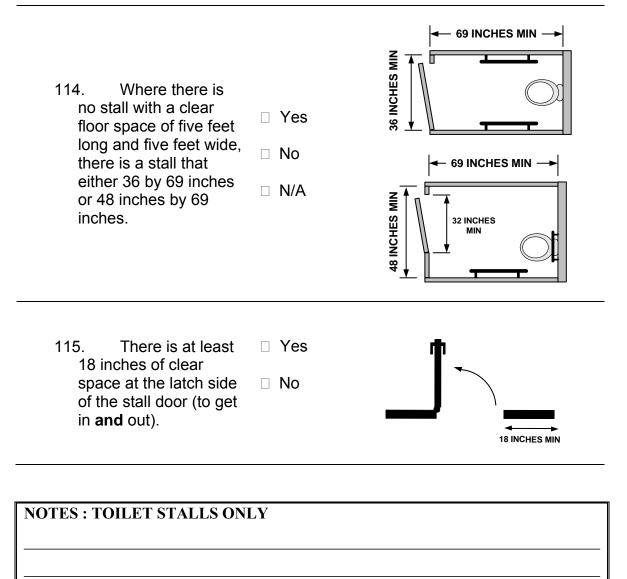
NOTES : RESTROOMS (GENERAL CHARACTERISTICS)		

(Proceed to next section!!)

FOR TOILET STALLS ONLY

Mark "N/A" if there are no toilet stalls. Proceed to next section: Toilet Room.

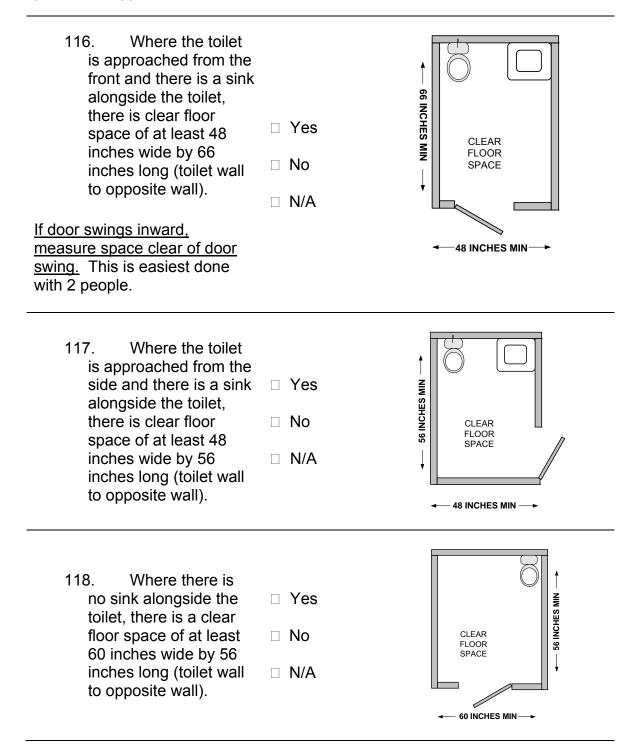




(Proceed to next section!!)

FOR TOILET ROOMS ONLY

Mark "N/A" if toilet rooms do not exist (i.e., there are stalls only) **<u>or</u>** if room floor plan is not applicable.



NOTES : TOILET ROOMS ONLY	

Emergency Egress (a route or path for going out in case of an emergency)

119. The emergency route is at least 36 unobstructed inches wide.	YesNo	If temporary objects protrude into passageway, then measure passageway to edge of object.
120. The emergency route does not require the use of stairs.	YesNo	
121. Exit doors along the emergency route are accessible doors.	YesNo	EXIT EMERGENCY EXIT 32 INCHES MIN

122. Where emergency alarms are provided, they have flashing lights.	YesNo	
123. Where emergency alarms are provided, they have audible signals.	YesNo	
124. Where emergency alarms are provided, additional visual alarms are installed in general use areas such as meeting rooms, hallways, lobbies and restrooms.	YesNo	
NOTE: Visual/audible alarms should be installed as required by the National Fire Protection Association (NFPA) code 72 unless there are other state codes that take precedence.		
125. Each area of rescue assistance (where wheelchair users wait for evacuation) provides at least 2 clear spaces no smaller than 30 by 48 inches.	YesNoN/A	NOTE: Areas of rescue assistance are not required in 1-story buildings without elevators. Mark "N/A" for ground-level facilities.
126. Each stairway serving an area of rescue assistance is at least 48 inches wide between handrails.	YesNoN/A	

NOTES : EMERGENCY EGRESS	

Section 3: Exam Rooms and access to Primary Services

127. There is a loaner wheelchair available.	Yes You may have to ask staff if a loaner wheelchair is not readily apparent.
128. There is a 36-inch clear passageway (excluding doorways) from the waiting area to designated exam room.	Yes No
129. There is a method to weigh a wheelchair-user.	Yes No

130. The clinic has at least one height- adjustable exam table (lowers to 17-19 inches).	Yes No	
131. There is at least one lift or transfer device available for use in exam room.	Yes No N/A	Mark "N/A" only if this feature is not needed. Consider whether a transfer device (e.g., step stool with arm support) is needed to get on exam table.
132. The designated exam room is large enough for a wheelchair user to enter, turn around, and exit.	Yes	WHEELCHAIR TURNING SPACE 60 INCHES DIAMETER MINIMUM
Note: This is a difficult measurement to make. It may require 2 people working together to make an accurate reading. Study the diagram closely, and take your time making your measurement.	No	12 INCHES 36 INCHES MIN 12 INCHES
133. All controls (e.g., light switches, door handles) are operable with a closed fist.	Yes No N/A	Controls include light switches, locks, vending machines, television controls, fire alarms, etc. Mark "N/A" if patient does not need to access controls in exam room.

134. When the door is opened to 90 degrees, there is a clear opening width of at least 32 inches measured between the face of the door and the door stop on the latch side.	Yes No	32 INCHES MIN CLEAR OPENING
135. There are graphic charts for assessing pain for patients with cognitive disabilities.	Yes No	You may have to ask clinic personnel if a chart is available for use. (These charts may be downloaded from the Internet.)

NOTES : EXAM ROOM A	

(Proceed to next section!!)

TOILET ROOMS <u>WHERE LAB SPECIMENS ARE COLLECTED</u> should meet the following standards.

If there is no toilet room with a specimen pass-through, mark each question in this part "N/A."

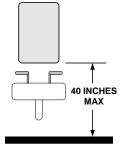
136. There is a toilet room where lab specimens are collected.	Yes N/A	Mark "NA" if there is not a toilet room reserved specifically for collecting lab specimens. If "NA" is marked, mark "NA" for the remaining questions in this section.
137. Signs are mounted 60 inches to the centerline on the wall on the latch side of the door, <u>out of the</u> way of the door swing.	Yes No N/A	
138. Where pictograms or symbols are used to identify rest rooms, Braille characters are included below them.	Yes No N/A	Mark "N/A" if no pictograms are used.
139. Where pictograms or symbols are used to identify rest rooms, raised characters are included below them.	Yes No N/A	Mark "N/A" if no pictograms are used.
140. The restroom doorway is at least 32 inches wide.	Yes No N/A	32 INCHES MIN CLEAR OPENING

141. Door handles are operable with a single, closed fist.	Yes No N/A	If door control is used, consider whether it is usable with a single, closed fist.
142. Door handles are placed no higher than 48 inches.	Yes No N/A	Mark "N/A" only if door is automatic and operable control is no higher than 48 inches.
 143. The entry is large enough for a wheelchair user to enter, turn around, and exit. Note: This is a difficult measurement to make. It may require 2 people working together to make an accurate reading. Study the diagram closely, and take your time making your measurement. 	Yes No N/A	CLEAR FLOOR SPACE
144. There is a 36- inch wide unobstructed path to all fixtures (e.g. sink, towel dispenser).	Yes No N/A	

 145. The sink has a 30 inch wide by 48 inch deep clear space in front. A maximum of 19 inches of the required depth may be under the sink. 	Yes No N/A	48 INCHES 48 INCHES 48 INCHES 48 INCHES 19 INCHES 19 INCHES MIN Mark "N/A" if there is no sink.
146. Pipes under the sink are insulated to protect against contact.	Yes No N/A	PROTECTIVE PIPE COVERING (INSULATION)
147. Where counters or tables are provided, the top is between 28 inches and 34 inches from the floor.	Yes No N/A	28 to 34 INCHES INCHES MIN
148. The sink rim is no higher than 34 inches.	Yes No N/A	Mark "N/A" if there is no sink.
149. The faucet is operable with a single, closed fist.	Yes No N/A	LEVER HANDLES Mark "N/A" if there is no sink.

150. The highest operable part of all dispensers and hand dryers is no higher than 48 inches.	Yes No N/A	Mark "N/A" if there are no dispensers.
 151. All dispensers and hand dryers are operable with a single, closed fist. (Pull-down paper-towel dispensers & many seat-cover dispensers are usually not accessible by this criteria.) 	Yes No N/A	Mark "N/A" if there are no dispensers.

152.	The mirror is	Yes
mo	unted with the	103
bot	tom edge of the	No
refl	ecting surface no	INU
hig	her than 40 inches.	N/A



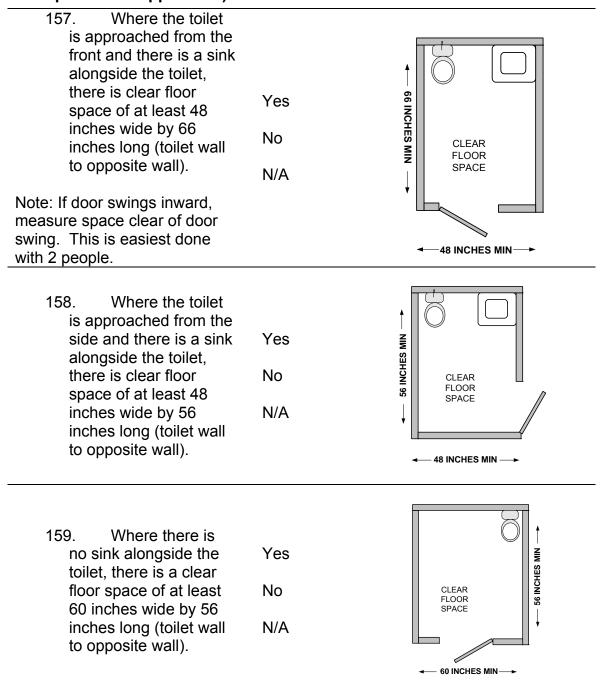
Note: This is a difficult measure to take and sometimes requires more than one measurement. Please use caution.

Mark "N/A" if there is no mirror.

153. There are <u>horizontal</u> grab bars on the wall behind the toilet and on side wall nearest to the toilet in the designated stall/toilet room.	Yes No N/A	Mark "No" if grab bars are not present or are not positioned parallel to floor.
154. The toilet seat is 17 inches to 19 inches high.	Yes No N/A	17 TO 19 INCHES
155. There are at least 18 inches of clear space from the center of the toilet to the wall(s) on either side.	Yes No N/A	Note: Make measurement to adjacent wall. Do not include objects such as toilet paper dispensers in your measurement.
156. The window or ledge where urine samples are placed is no higher than 48 inches and is operable with a closed fist.	Yes No N/A	Mark "N/A" if no window or ledge is available.

(Proceed to next section!!)

FOR TOILET ROOMS WHERE LAB SPECIMENS ARE COLLECTED ONLY (Mark "N/A" if lab specimen collection toilet rooms do not exist or if room floor plan is not applicable.)



NOTES : TOILET ROOMS WHERE LAB SPECIMENS ARE COLLECTED

Appendix A: Parking Requirements

Total Parking Spaces:	Required Minimum Number of Spaces:
1 to 25	1
26 to 50	2
51 to 75	3
76 to 100	4
101 to 150	5
151 to 200	6
201 to 300	7
301 to 400	8
401 to 500	9
501 to 1000	2% of total
1001 and over	20 plus 1 for each 100 over 1000

Number of required parking spaces for outpatient units and facilities: **10 percent** of the total number of parking spaces provided serving each such outpatient unit or facility. Note: When calculating the number of accessible spaces needed, round the number up to the next whole number if the number comes out unevenly. For example, if a lot has 83 spaces, 10 percent would be 8.3 spaces. It is required that the partial number be rounded up, so the number of spaces needed is 9.

Appendix B: Overall Scoring Sheet

Your Overall Score

To calculate an overall score, please enter "1" for each item that received a YES or N/A mark next to the corresponding question number below.

Section 1: Pat	ient Arrival
Parking	
1	
2	
3	
4	
5	
6	
7	
Approach to Build	ing
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
Ramps	
18	
19	
20	
21	
22	
23	

Signage	
24	
25	
26	
27	
28	
29	
30	
31	
32	
33	
34	
35	
36	
Controls	
37	
38	
Doors	
39	
40	
41	
42	
43	
44	
45	

Section 2: Public	
Facilities	
Telephones	
46	
47	
48	
49	
50	
51	
52	
Seating	
53	
54	
Counters	
55	
56	
Passageways	
57	
58	
59	
60	
61	
62	
63	
Water Fountains	
64	
65	
66	
Lifts	
67	
68	
69	

70 1 71 1 72 1 Elevators 7 73 1 74 1 75 1 76 1 77 1 78 1 79 1 80 1 81 1 82 1 83 1 84 1 85 1 Stairs 86 87 88 89 1 90 1 Restrooms 91
72 Elevators 73 74 75 76 77 78 79 80 81 82 83 84 85 Stairs 86 87 88 89 90 Restrooms
Elevators 73 74 74 75 76 77 78 79 80 81 82 83 84 85 Stairs 86 87 88 89 90 Restrooms
73 1 74 1 75 1 76 1 77 1 78 1 79 1 80 1 81 1 82 1 83 1 84 1 85 1 Stairs 86 87 1 88 1 89 90 Restrooms 1
74 1 75 1 76 1 77 1 78 1 79 1 80 1 81 1 82 1 83 1 84 1 85 1 Stairs 1 86 1 87 1 88 1 89 90 Restrooms 1
75 1 76 1 77 1 78 1 79 1 80 1 81 1 82 1 83 1 84 1 85 1 Stairs 86 87 1 88 1 89 90 Restrooms 1
76 1 77 1 78 1 79 1 80 1 81 1 82 1 83 1 84 1 85 1 Stairs 86 87 1 88 1 89 1 90 1 Restrooms 1
77 78 79 80 81 82 83 84 85 Stairs 86 87 88 89 90 Restrooms
78 79 80 81 81 82 83 84 85 Stairs 86 87 88 89 90 Restrooms
79 80 81 81 82 83 84 85 Stairs 86 87 88 89 90 Restrooms
80 80 81 90 82 90 88 90 Restrooms 90
81 82 83 83 84 85 Stairs 86 87 88 89 90 Restrooms
82 83 84 85 Stairs 86 87 88 89 90 Restrooms
83 84 85 Stairs 86 87 88 89 90 Restrooms
84 85 Stairs 86 87 88 89 90 Restrooms
85 Stairs 86 87 88 89 90 Restrooms
Stairs 86 87 87 88 89 90 Restrooms
86 87 88 89 90 Restrooms
87 88 89 90 Restrooms
88 89 90 Restrooms
89 90 Restrooms
90 Restrooms
Restrooms
91
92
93
94
95
96
97
98
99
100

Restrooms (continued)
101
102
103
104
105
106
107
108
109
110
111
112
113
114
115
116
117
118
Emergency Egress
119
120
121
122
123
124
125
126
Section 3: Exam Rooms and Access to Primary Services
127
128

129 130 131 132 133 134 135 Lab specimen collection rooms 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158	Exam Rooms (cor	ntinued)
131 132 133 134 135 Lab specimen collection rooms 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158	129	
132 133 134 135 Lab specimen collection rooms 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158	130	
133 134 134 135 Lab specimen collection rooms 136 137 1 138 1 139 1 140 1 141 1 142 1 143 1 144 1 145 1 146 1 147 1 148 1 149 1 150 1 151 1 152 1 153 1 155 1 156 1 157 1	131	
134 135 Lab specimen collection rooms 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158	132	
135	133	
Lab specimen collection rooms 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158	134	
136137138139140140141142143144145146147148149150151152153154155156157158	135	
137 138 139 140 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158	Lab specimen coll	ection rooms
138139140141141142143144145146147148149150151152153154155156157158	136	
139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158	137	
140141142143144145146147148149150151152153154155156157158	138	
141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158	139	
142 143 144 145 145 146 147 148 149 150 151 152 153 154 155 156 157 158	140	
143144145145146147148149150151152153154155156157158	141	
144145146147147148149150151152153154155156157158	142	
145146147148149150151152153154155156157158		
146147148149150150151152153154155156157158	144	
147 148 149 150 151 152 153 154 155 156 157 158	145	
148 149 150 151 151 152 153 154 155 156 157 158	146	
149 150 151 152 153 154 155 156 157 158	147	
150 151 152 153 154 155 156 157 158	148	
151 152 153 154 155 156 157 158	149	
152 153 154 155 156 157 158	150	
153 154 155 156 157 158	151	
154 155 156 157 158	152	
155 156 157 158	153	
156 157 158	154	
157 158		
158		
	157	
	158	
159	159	

How to calculate your overall score

Example:

Count how many items you marked YES or N/A. If you answered YES or N/A to 145 items, your calculation would look like this:

Your clinic would be 91 percent usable for people with disabilities.

Now enter the total number of yes responses, divide by 159, and multiply by 100 for your score.



Appendix C: Mobility Scoring Sheet

Your Mobility Score

To calculate a score for the mobility category, please enter "1" for each item that received a YES or N/A mark next to the corresponding question number below. There are 122 items that count towards the mobility score.

1	
2	
3	
4	
5	
6	
7	
Approach to Building	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
Ramps	
18	
19	
20	
21	
22	
23	

Controls	
37	
38	
Doors	
39	
40	
41	
42	
43	
44	
45	
Telephone	
46	
47	
48	
Seating	
53	
54	
Counters	
55	
56	
Passageways	
57	
58	
59	
60	

Your Mobility Score Continued

Passageways (continued)
60
61
62
63
Water Fountains
64
65
Lifts
67
68
69
70
71
72
Elevators
73
77
78
79
80
84
85
Stairs
90
Rest Rooms
94
95
96
97
98

Rest Rooms (c	continued)
99	
100	
101	
102	
103	
104	
105	
106	
107	
109	
109	
110	
111	
112	
113	
114	
115	
116	
117	
118	
Emergency Eg	ress
119	
120	
121	
122	
125	
126	
Exam Room	
127	
128	

Your Mobility Score Continued

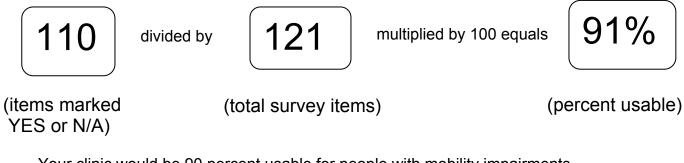
r	
Exam Room (continued)	
129	
130	
131	
132	
133	
134	
Lab specimen collection	
rooms	
141	
142	
143	
144	
145	
146	

Lab specimen collection	
rooms (cont.)	
147	
148	
149	
150	
151	
152	
153	
154	
155	
156	
157	
158	
159	
Total items	121

How to calculate your mobility score

Example:

Count how many items you marked YES or N/A. If you answered YES or N/A to 108 items, your calculation would look like this:



Your clinic would be 90 percent usable for people with mobility impairments.

Now enter the total number of yes responses, divide by 121, and multiply by 100 for your score.



Appendix D: Sensory Scoring Sheet

Your Sensory Score

To calculate a score for the sensory category, please enter "1" for each item that received a YES or N/A mark next to the corresponding question number below. There are 42 items that count towards the sensory score.

Ciana are	
Signage	
24	
25	
26	
27	
28	
29	
30	
31	
32	
33	
34	
35	
36	
Telephone	
49	
50	
51	
52	
Passageways	
62	
Water Fountains	
66	
Elevators	
73	
74	
75	

Elevators (continued)	
77	
79	
80	
82	
83	
84	
Stairs	
86	
87	
88	
89	
Rest Rooms	
91	
92	
93	
Emergency Egress	
122	
123	
124	
Lab specimen rooms	
137	
138	
139	
Total items:	41

How to calculate your sensory score

Example:

Count how many items you marked YES or N/A. If you answered YES or N/A to 37 items, your calculation would look like this:



Your clinic would be 90 percent usable for people with sensory impairments.

Now enter the total number of yes responses, divide by 41, and multiply by 100 for your score.

Appendix E: Cognitive Scoring Sheet

Your Cognitive Score

To calculate a score for the cognitive category, please enter "1" for each item that received a YES or N/A mark next to the corresponding question number below. There are 8 items that count towards the cognitive score.

24	
25	
26	
79	
122	
123	
124	
135	
Total items	8

How to calculate your cognitive score

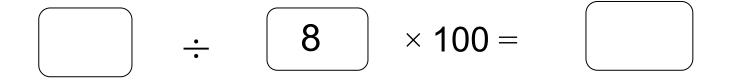
Example:

Count how many items you marked YES or N/A. If you answered YES or N/A to 7 items, your calculation would look like this:



Your clinic would be 88 percent usable for people with cognitive impairments.

Now enter the total number of yes responses, divide by 8, and multiply by 100 for your score.



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