Disability Awareness Checklist for Health Care Services

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NOTE: This tool is intended for use in conjunction with the South African version of the post-GBV-QA Tool AND ALSO as a stand-alone tool for use by any health care facility.

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The following checklist provides you with guidance to help make your health services more accessible and disability inclusive.

Instructions:
- Take key measurements before you use the DAC and then follow the two-stage process
- Stage 1: Please answer Yes / No / Not sure depending on your examination of the current arrangement of your facility for all questions. Use a smart phone (for angles) and tape measure for any measurements.
- Stage 2: For elements that you rate as "No" or "Not sure," decide if you can influence change. If "Yes" please tick the last column "Things I can change/influence" if you feel that you can influence or change these aspects in your facility. You may add your ideas about possible action points.
- Space is provided to make notes and write down your ideas about things you can improve in your facility.

We recommend that you use the findings of this DAC tool to create an action plan with at least 3-5 actions that your facility can take to improve access for patients/clients with disabilities over the next 12 months. We also recommend that you revisit this checklist every 12 months to help monitor your progress and plan for further activities as you, your facility and your staff become better at welcoming and serving patients/clients with disabilities.

Table 1: Key Measurements of the Facilities

Take the following key measurements before you begin filling in the DAC

ITEM		MEASUREMENT	UNIT OF MEASURE
1.1	Distance from the nearest public transportation pick-up/drop off point to the facility entrance.		Kilometres (km) or metres (m)
1.2	Degree of slope of ramp (if any)		Degrees
1.3	Usable width of main facility entrance door (measure at the narrowest point, accounting for security gate, furniture, or other barriers)		Centimetres (cm)
1.4	Usable width of doorways to examination rooms (measure at the narrowest point, accounting for security gate, furniture, or other barriers)		Centimetres (cm)
1.5	Usable width of toilet door width for the wheelchair accessible toilet (put 0 if no accessible toilet)		Centimetres (cm)
1.6	Width of other facility doors that patients use e.g office, pharmacy (measure at the narrowest point, accounting for security gate, furniture, or other barriers)		Centimetres (cm)
1.7	Usable width of corridors (measure at the narrowest point, accounting for security gate, furniture, or other barriers)		Centimetres (cm)
1.8	Height of reception desk as it faces patients		Centimetres (cm)

Table 2: Universal design and accessibility

Does your healthcare facility have the following elements to support universal accessibility?	Yes	No	Not sure	Things I can change/influence
Entrance to services				
2.1 Public Transport access for wheelchairs (intact tared pavement) not further than 1 km from the entrance door to clinic/facility				
2.2 Clearly signed parking space/s for people with disabilities with access pathway to the front door				
2.3 Ramps to access your building/s with 1:12 slope (5-degrees or less and no lip on door) OR building level with the ground (no stair(s) at entrance and no lip on entrance doors)				
2.4 Doors in your facility that open easily with one hand and can accommodate a wheelchair (at least 82cm wide at the narrowest point including the security gate)				
2.5 Reception desk at a suitable height for wheelchair users (82cm)				
Reception, corridors and waiting rooms				
2.6 Corridors that are wide enough to fit wheelchairs without moving furniture, rubbish bins, stored items or any other objects (160cm)				
2.7 Wheelchair-accessible toilet/s with wide doors (82cm) and wash basin/s (wheelchair user can reach it)				
2.8 Railings along the corridors, ramps, and outside areas				
2.9 Directions in key areas in Braille (E.g. lifts, signposts)				
2.10 Emergency evacuation routes that are wheelchair accessible				
2.11 Emergency evacuation routes that are signed with pictures and Braille				
2.12 Emergency evacuation routes with warning lights for the deaf				
2.13 Non-slip corridor/s and room floors				
2.14 Functional lifts are available if examination rooms are on upper floors (wheelchair access, Braille signage) OR all service rooms are on the entrance level				

Table 2: Universal design and accessibility (continued)

Does your healthcare facility have the following elements to support universal accessibility?	Yes	No	Not sure	Things I can change/influence
Examination rooms				
2.15 Doorways (space before a door) to examination rooms that are wide enough to allow a wheelchair to turn around (160cm)				
2.16 The examination table is height adjustable to suit the height of a person in a wheelchair and for easy and safe transfer				
2.17 Doors that are wide enough for wheelchair access (82cm)				

Table 3: Reasonable accommodation of people with disabilities

Does your healthcare facility have the following elements to accommodate the needs of people with disabilities?	Yes	No	Not sure	Things I can change/influence
Information and communication				
3.1 Sign language interpretation for the Deaf is available when requested				
3.2 Health information is available in Braille, Braille readable format, text speech compatible format, OR in audio recorded format				
3.3 Simplified health information (including pictures) is available for people with intellectual disabilities and those who are Deaf or hard of hearing				
3.4 Informed consent forms are available and accessible to visually impaired/blind persons (large print, Braille, text speech compatible format or audio)				
3.5 Informed consent forms are accessible to the Deaf and people with intellectual disabilities using pictures				
3.6 Medication boxes with Braille signage or 2D barcode are used at medication dispensing points				
3.7 Information about more convenient dispensary options is accessible and available to people with disabilities. (e.g. Central Chronic Medicines Dispensing and Distribution (CCMDD))				
Assistance and support				
3.9 Assistance to fill in forms and documents (paper or electronic) is available if needed				
3.10 Functional assistive devices for temporary use (wheelchairs, crutches, walkers, buggies) are available if required				
3.11 An accessible and available system for people with disabilities to lodge a complaint or make a suggestion is available				
3.12 Guide dogs and other disability-related supports are accepted in the facility AND there is a protocol on how to accommodate these dogs				
3.13 People with disabilities are included in routine patient satisfaction surveys, which are accessible				
3.14 There is clear signage indicating that people with disabilities will be moved to the front of the queue if required				

Table 4: Capacity of facility staff to identify and support people with disabilities

Have the staff at the facility received any of the following?	Yes	No	Not sure	Things I can change/influence
4.1 Training on disability etiquette or sensitization training for ALL categories of staff (including training on accessibility)				
4.2 Training on supporting emergency evacuation for people with disabilities of any type of staff (at least one on duty)				
4.3 Training on basic sign language interpretation and Braille signage for any type of staff (at least one on duty)				
4.4 Training on the interrelationship between disability and sexual and reproductive health and rights (SRHR) and gender-based violence (GBV) for healthcare workers and psychosocial support staff				
4.5 Training on disability-related violence (e.g. name-calling, taking away of assistive devices) for healthcare workers and psychosocial support staff				
4.6 Training on how to screen for and identify disability (E.g., mental, intellectual, physical, hearing and visual) for healthcare workers				
4.7 A service protocols or guidelines incorporated specific guidance on addressing the needs of people with disability?				
4.8 Any promotional and educational materials that take accessibility into consideration				

Table 5: Linkage to disability and rehabilitation services

Does the facility have the following to support appropriate linkage to disability and rehabilitation services?	Yes	No	Not sure	Things I can change/influence
5.1 Intake forms that capture disability status and needed accommodations				
5.2 Screening tools to identify impairments for children and adults (E.g. physical, mental, visual, hearing, intellectual)				
5.3 Routine data summaries include people with disabilities served by the facility				
5.4 Referral initiation and follow up monitoring tool				
5.5 An annually updated referral pathway to disability services providing assistive devices				
5.6 An annually updated referral and follow-up system for repairing assistive devices				
5.7 An annually updated referral pathway to rehabilitation services (E.g. Occupational Therapy, Speech Therapy, Audiology, Physiotherapy, Podiatry and Psychology)				
5.8 An annually updated referral pathway to mental healthcare providers/services accessible to people with disabilities				
5.9 An annually updated directory of organizations for people with disabilities is available at the facility for ease of access to additional support services				
5.10 Linkage and active collaboration with organizations for people with disabilities				
5.11 Linkage with a rehabilitation outreach programme that visits the facility at least every 6 months				
5.12 Linkage and referral to Home-Based or Community-Based Rehabilitation programmes in the area				

Notes and ideas