

APPENDIX B

ACCESS AUDIT CHECKLISTS ON OPERATIONAL AND ATTITUDINAL BARRIERS

Access Audit Checklist(3) – Operational Barrier

Date of Access Audit _____

Name of Building _____

Address _____

Name of Auditor _____

CONTENTS

- 1.0 Car Parking
- 2.0 External Routes
- 3.0 Street Furniture
- 4.0 Entrances/ Entrance Doors
- 5.0 Internal Surfaces
- 6.0 Internal Ramps/ Steps/ Handrails
- 7.0 Counters and Service Desks
- 8.0 Signs
- 9.0 Building Management
- 10.0 Information
- 11.0 Websites
- 12.0 Evacuation

Access Audit Checklist(3) – Operational Barrier

Name of Building: _____ Floor Level: _____

Departments/Sections/Wards: _____ Location/Room: _____

1.0 Car parking

	Yes	No	N/A
1.1 Is there accessible car parking spaces?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2 Are ticket machines accessible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3 Is shroff office accessible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.4 Is entry controls accessible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.5 Are car parking bays level, smooth, even and free from loose stones?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.6 Are routes adequately lit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2.0 External Routes

	Yes	No	N/A
2.1 Signage and landmarks to aid orientation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.2 Are vehicle and pedestrian routes clearly distinguished?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.3 Path surfaces suitable? Material _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4 Planting kept well trimmed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3.0 Street Furniture

	Yes	No	N/A
3.1 Bollards at least 1000 high and visually contrasting with background?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
chains and ropes linking bollards avoided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.2 Items of street furniture visually contrasting with background?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.3 Seating provided on long or inclined routes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4.0 Entrances / Entrance Door

	Yes	No	N/A
4.1 Alternative accessible entrance(s) clearly signed from main entrance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.2 Signage incorporates the International Symbol for Access?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.3 Weather protection provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.4 Outward-opening doors adequately guarded?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.5 Alternative gate access provided in conjunction with turnstiles?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.6 Doors and/or frames visually contrasting with wall?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.7 Glazed doors: markings for safety and visibility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.8 Revolving doors: supplemented by an adjacent accessible door in regular use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Access Audit Checklist(3) – Operational Barrier

5.0	Internal surfaces	Yes	No	N/A
5.1	Floor surfaces slip resistant?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.2	Floor and wall surfaces free of confusing glare and reflection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.3	Bright, boldly patterned floors avoided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.4	Busy or distracting wall coverings avoided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.0	Internal ramps/ steps/ handrails	Yes	No	N/A
6.1	Ramp easily identifiable or clearly signed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.2	Steps easily identifiable or clearly signed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.3	Lighting adequate and well positioned?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.4	Are handrails continuous along ramps, stair flights and landings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.5	Are handrails visually contrasting with the background?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.0	Counters and service desks	Yes	No	N/A
7.1	Counter height to suit seated and standing users?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.2	Sufficient space to write or sign documents on counter?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.3	Adequate lighting to counter?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.0	Signs	Yes	No	N/A
8.1	Are directional signs provided for accessibility of people with disabilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.2	Signs in a logical position? At an appropriate height? Not obstructed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.3	Signs easily identifiable against their background?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.4	Adequate visual contrast between text and signboard?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.5	Suitable text style?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.6	Symbols used to supplement text?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.7	Signs well lit? Signboard surface minimizes glare and reflection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.8	Tactile signs used where appropriate and positioned at a suitable height?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.0	Building Management	Yes	No	N/A
9.1	Carparking: designed spaces not used by non-disabled drivers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.2	External routes, including steps and ramps, kept clean, unobstructed and free of surface water?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.3	Doors closers and door ironmongery maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.4	Horizontal circulation: space provided for wheelchair manoeuvre not			

Access Audit Checklist(3) – Operational Barrier

	obstructed by furniture, deliveries, storage and so on?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.5	WCs not used as unofficial storage areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	waste bin not positioned in transfer area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.6	Temporary signs provided when required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	temporary signs removed when no longer required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.7	Induction loop or other hearing enhancement systems regularly checked to ensure equipment fully operational and effective?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	staff trained in using the equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.8	Emergency evacuation alarm regularly checked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	WC assistance alarm regularly checked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	staff fully trained in response procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.9	Cleaning and polishing do not render slip-resistant surfaces slippery?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.10	Information readily available on the accessibility of the building?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.11	Building management procedures and policies regularly reviewed and updated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.0	Information			
		Yes	No	N/A
10.1	Is information available in a range of formats, including:			
	clear print?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	large print?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Braille?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	telephone services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	audio tape?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	digital (e.g. disk, CD ROM)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.2	Is the information readily available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.0	Websites			
		Yes	No	N/A
11.1	Has the website been designed including the following:			
	is there effective tonal contrast between text, graphics and background?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	is there a text alternative to audio and image files?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	are unnecessary moving graphics avoided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	are video sequences captioned, or is a link provided to a transcript of the audio and video content?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.2	Does the design of the website offer the flexibility for individual users to adjust text and colour settings using their own browser?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.3	Is the web designer familiar with international guidelines on web accessibility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Access Audit Checklist(3) – Operational Barrier

12.0 Evacuation

	Yes	No	N/A
12.1 Is an Evacuation plan available for visitors with disabilities in case of emergency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If so, are the following incorporated?			
Fire escape routing for people with disabilities displayed? Routing colour coded for PWD on the plan? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.2 Any staff awareness, training program, risk management or management commitment in relation to evacuation for people with disabilities in case of emergency? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Remarks

Access Audit Checklist(4) – Attitudinal Barrier

Date of Access Audit _____

Name of Building _____

Address _____

Name of Auditor _____

CONTENTS

- 1.0 Communication Services
- 2.0 Awareness of the need of people with disabilities

Name of Building: _____ Floor Level: _____

Access Audit Checklist(4) – Attitudinal Barrier

Departments/Sections/Wards: _____ Location/Room: _____

1.0 Communication Services

	Yes	No	N/A
1.1 Are staff aware of or given training in the diversity of communication needs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2 Are any staff trained and/or qualified to provide communication services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.3 Is there a procedure for arranging communication services, when required, including: sign language interpreters? communication support workers?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

2.0 Awareness of the needs of people with disabilities

	Yes	No	N/A
2.1 Are staff aware of the needs of people with disabilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.2 Are staff delivering positive responses in assisting the people with disabilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.3 Are staff trained to deal with emergencies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4 Is there any staff training related to accessibility available? If so, how often?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Remarks